

FAQ: What is Chronic Fatigue Syndrome?

Chronic Fatigue Syndrome is a debilitating disease characterized by overwhelming fatigue often aggravated by physical or mental exertion. It does not improve with rest.

Causes and risk factors

The exact causes of CFS have yet to be identified and diagnostic tests do not exist. It is not directly caused by other medical conditions.

According to the National Institutes of Health, some theories suggest CFS may be due to:

- Epstein-Barr virus or human herpes virus-6 (HHV-6); however, no specific virus has been identified as the cause
- Inflammation in the nervous system due to a faulty immune system response

Age, previous illness, stress, genetics and environmental factors may also play a role in the development of CFS.

Symptoms

According to the U.S. Centers for Disease Control and Prevention, symptoms for diagnosis must include severe fatigue along with at least four additional symptoms ranging from cognitive difficulty to sore throat, headache and muscle pain. These symptoms are similar to influenza and common viral infections.

A patient is diagnosed only once all other treatable conditions are ruled out and symptoms have persisted for more than six consecutive months.

According to the NIH, the main symptom of CFS is extreme tiredness (fatigue), which is:

- New
- Lasts at least six months
- Not relieved by bed rest
- Severe enough to keep you from participating in certain activities

Other symptoms include:

- Excessive tiredness for more than 24 hours after light or easy exercise
- Tiredness unrelieved by sleep
- Forgetfulness

- Trouble concentrating
- Confusion
- Joint pain without swelling or redness
- Headaches that feel different from past headaches
- Irritability
- Mild fever (101 degrees Fahrenheit or less)
- Muscle aches (myalgias)
- Muscle weakness unexplained by any known disorder
- Sore throat
- Sore lymph nodes (neck or underarms)

Diagnosis and tests

Currently, there are no specific tests to confirm the diagnosis of CFS. For that reason, a healthcare provider will make the diagnosis of CFS only after all other possible causes of the symptoms have been ruled out, such as:

- Drug dependence
- Immune or autoimmune disorders
- Infections
- Muscle or nerve diseases (such as multiple sclerosis)
- Endocrine diseases (such as hypothyroidism)
- Other illnesses (such as heart, kidney, or liver diseases)
- Psychiatric or psychological illnesses, particularly depression
- Tumors

A diagnosis of CFS must include:

- Absence of other causes of extreme, long-term fatigue
- At least four additional CFS symptoms

Treatment

As there is currently no cure for CFS, treatment is aimed at relieving symptoms. In many cases, treatment reduces the depression and other psychological disorders experienced by CFS patients.

According to the NIH, treatment typically includes some combination of the following:

- Cognitive-behavioral therapy and graded exercise for certain patients
- Healthy diet
- Sleep management techniques
- Medications to reduce pain, discomfort, and fever
- Medications to treat anxiety (anti-anxiety drugs)
- Medications to treat depression (antidepressant drugs)

However, some medications can cause adverse side effects.

Having an active social life and doing regular mild physical exercise can also improve a patient's experience. (Inability to participate in social activities can lead to feelings of isolation.) A healthcare provider can help determine the proper amount and frequency of exercise.

Some patients may also engage in relaxation and stress-reduction techniques such as deep breathing exercises, hypnosis, massage therapy, meditation or yoga. However these are meant to be secondary treatments only.

Prognosis for recovery

According to the NIH, the long-term prognosis for patients with CFS varies. While some patients completely recover within six months to a year, others feel like they never fully recover their pre-CFS condition.

Sources

http://www.ncbi.nlm.nih.gov/pubmedhealth/PMH0002224/

http://www.cdc.gov/cfs/