Chronic Fatigue Syndrome

Policy

Patients with CFS/ME should be referred to the North West London sector service provided at Hillingdon Hospital in line with NICE criteria.

In-patient treatment for CFS at other centres will not be routinely funded except in exceptional circumstances.

These polices have been approved by the eight Clinical Commissioning Groups in North West London (Brent CCG, Central London CCG, Ealing CCG, Hammersmith and Fulham CCG, Harrow CCG, Hillingdon CCG, Hounslow CCG and West London CCG)

Background

Chronic fatigue syndrome (CFS – often known as ME) is relatively common, with a population prevalence of 0.2 – 0.4%. It is characterised by debilitating fatigue that has persisted for four months in an adult and three months in a child or young person. Diagnoses are often difficult and by exclusion, with symptoms ranging from fatigue malaise, sleep disturbance and headaches to difficulty with concentration and muscle pain. As a result, clinical management can be difficult and requires a patient-centred, multi-disciplinary approach.

NICE guidelines on management of CFS recommend that patients should be referred to specialist CFS/ME care based on their needs, the type, duration, complexity of their symptoms and the presence of co-morbidities. Referrals should be offered within 6 months of presentation for people with mild CFS, within 3-4 months for those with moderate symptoms and immediately if symptoms are severe. Patients should be managed holistically with a combination of cognitive behavioural therapy and graded exercise +/- pharmacological therapy for symptom control.

Note: according to White et al., activity management programmes such as adaptive pacing have been shown to be ineffective.

References

Patient information
http://www.nhs.uk/conditions/Chronic-fatigue-syndromePages/Introduction.aspx

References