Written by Administrator
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The New International Consensus Criteria for ME

Reference: Carruthers et al. Myalgic Encephalomyelitis: International Consensus Criteria, The Journal of Internal Medicine , July 2011.

The recent publication of new criteria for ME has generated a number of initial reactions ranging from enthusiasm to concern. The new criteria designate ME as the appropriate biological name for the illness, and put aside the CFS label as confusing and overly-focused on the symptom of fatigue.

The 2003 Canadian Consensus Criteria were used as a starting point, but significant changes were made. Rather than pathological fatigue, the cardinal symptom of the newly defined ME is post-exertional malaise now termed, post-exertional neuroimmune e xhaustion. Also the six-month waiting period before diagnosis is no longer required.

The biological focus in the article for the new definition of ME is clear, consistent, and unequivocal. The ultimate value of the new definition will be determined by our researchers, clinicians, and policy makers. There are no ready answers about the impact of the re-defined ME on important issues such as illness credibility, physician willingness to diagnose and treat ME, and disability determinations.

The lead author of the new criteria, Dr. Bruce Carruthers, will be a featured speaker at the IACFS/ME Research and Clinical Conference in Ottawa, Sept. 22-25, 2011 (www.iacfsme.org) . He will share the podium with prominent CFS/ME researchers Dr. Leonard Jason and Dr. Elizabeth Unger in a 90-minute, case-definitions symposium that will allow plenty of time for Q and A about the new criteria. I expect this to be a lively session.

I think that discussion, debate, and input from practitioners and scientists are now in order regarding this newly defined ME.

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