



Fast Facts: Myalgic Encephalomyelitis /CFS

- **An estimated** 180,00 in Australia missing... missing from school or work due to ME/CFS
- **7 in every 1,000;** **38,000 in Victoria**
- **Effects** All age groups, children as young as 5, common in teens, more common in females
- **Cause** Often sudden following an infection or other trigger, but can be slow onset
- **Pathophysiology** A complex neuro-immune disorder, it is not a psycho-somatic condition
- **Cure** No known cure, some treatments can be helpful
- **Severity** Mild, moderate or severe; some recover, some will improve, some never recover
- **Early & appropriate** specialist ME/CFS management is critical to assist a good outcome
- **Diagnosis** Canadian Criteria *see website*: Require some symptoms in all 7 categories of criteria

Symptoms New onset:

- 1) Post- exertional malaise after physical /cognitive or emotional activity
- 2) Dysfunctional sleep
- 3) Pain: joint or muscle or headaches
- 4) Difficulty thinking/comprehending / processing information and or sensory overload, vision disturbance
- 5) Fatigue

Symptoms from two of the following three categories:

- 6) Dizzy, pale, gut changes, chest palpitations, shortness of breath
 - 7) Changes in body temperature, appetite changes
 - 8) Sore throat swollen lymph glands allergies sensitivities
- Students with ME/CFS will require an ME/CFS Pacing Plan and an Individual Education Plan

For more information please call ME/CFS Australia (Vic, Tas, NT) information/support line (03) 9791 2199.

Fact sheets, self management course, youth chat forum/connections www.mecfs-vic.org.au