Fast Facts: Myalgic Encephalomyelitis /CFS

- **An estimated** 180,000 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.