

 MENU CDC A-Z  SEARCH

- A B C D E F G H I J K L M N O P
- Q R S T U V W X Y Z #

 

Myalgic Encephalomyelitis/Chronic Fatigue Syndrome

ME/CFS
What is ME/CFS
Possible Causes
Symptoms and Diagnosis
Symptoms
Diagnosis
Treatment
ME/CFS in Children
Symptoms and Diagnosis of ME/CFS in Children
Treatment of ME/CFS in Children
ME/CFS in Children Fact Sheets
Fact Sheet for Healthcare Professionals
Fact Sheet for Parents/Guardians
Fact Sheet for Education

Professionals
CDC's ME/CFS Program
Meetings
Multi-site Clinical Assessment of CFS
Wichita Clinical Study Data Access
Information for Healthcare Providers
Live, Local, and Free Continuing Education Event
Resources
Disability and ME-CFS

Treatment

There is no cure or approved treatment for myalgic encephalomyelitis/chronic fatigue syndrome (ME/CFS). However, some symptoms can be treated or managed. Treating these symptoms might provide relief for some patients with ME/CFS but not others. Other strategies, like learning new ways to manage activity, can also be helpful.

Patients, their families, and healthcare providers need to work together to decide which symptom causes the most problems. This should be treated first. Patients, families, and healthcare providers should discuss the possible benefits and harms of any treatment plans, including medicines and other therapies.

Healthcare providers need to support their patients' families as they come to understand how to live with this illness. Providers and families should remember that this process might be hard on people with ME/CFS.

Symptoms that healthcare providers might try to treat are:

Sleep Problems

Patients with ME/CFS often feel less refreshed and restored after sleep than they did before they became ill. Common sleep complaints include difficulty falling or staying asleep, extreme sleepiness, intense and vivid dreaming, restless legs, and nighttime muscle spasms.

Good sleep habits are important for all people, including those with ME/CFS. Some common tips for good sleep are:

- Start a regular bedtime routine with a long, calming wind-down period.
- Go to bed at same time each night and wake up at same time each morning.
- Limit daytime naps to 30 minutes in total during the day.
- Remove all TVs, computers, phones, and gadgets from bedroom.
- Use the bed only for sleep and sex and not for other activities (avoid reading, watching TV, listening to music, or using phones).
- Control noise, light, and temperature.
- Avoid caffeine, alcohol, and large meals before bedtime.
- Avoid exercise right before going to bed. Light exercise and stretching earlier in the day, at least four hours before bedtime, might improve sleep.

When people try these techniques but are still unable to sleep, their doctor might recommend taking medicine to help with sleep. First, people should try over-the-counter sleep products. If this does not help, doctors can offer a prescription sleep medicine, starting at the smallest dose and using for the shortest possible time.

People might continue to feel unrefreshed even after the medications help them to get a full night of sleep. If so, they should consider seeing a sleep specialist. Most people with sleep disorders, like sleep apnea (brief pause in breathing during sleep) and narcolepsy (uncontrollable sleeping), respond to therapy. However, for people with ME/CFS, not all symptoms may go away.

Pain

People with ME/CFS often have deep pain in their muscles and joints. They might also have headaches (typically pressure-like) and soreness of their skin when touched.

Patients should always talk to their healthcare provider before trying any medication. Doctors may first recommend trying over-the-counter pain-relievers, like acetaminophen, aspirin, or ibuprofen. If these do not provide enough pain relief, patients may need to see a pain specialist. People with chronic pain, including those with ME/CFS, can benefit from counseling to learn new ways to deal with pain.

Other pain management methods include stretching and movement therapies, gentle massage, heat, toning exercises, and water therapy for healing. Acupuncture, when done by a licensed practitioner, might help with pain for some patients.

Depression, Stress, and Anxiety

Adjusting to a chronic, debilitating illness sometimes leads to other problems, including depression, stress, and anxiety. Many patients with ME/CFS develop depression during their illness. When present, depression or anxiety should be treated. Although treating depression or anxiety can be helpful, it is not a cure for ME/CFS.

Some people with ME/CFS might benefit from antidepressants and anti-anxiety medications. However, doctors should use caution in prescribing these medications. Some drugs used to treat depression have other effects that

might worsen other ME/CFS symptoms and cause side effects. When healthcare providers are concerned about patient's psychological condition, they may recommend seeing a mental health professional.

Some people with ME/CFS might benefit from trying techniques like deep breathing and muscle relaxation, massage, and movement therapies (such as stretching, yoga, and tai chi). These can reduce stress and anxiety, and promote a sense of well-being.

Dizziness and Lightheadedness (Orthostatic Intolerance)

Some people with ME/CFS might also have symptoms of orthostatic intolerance that are triggered when-or made worse by-standing or sitting upright. These symptoms can include:

- Frequent dizziness and lightheadedness
- Changes in vision (blurred vision, seeing white or black spots)
- Weakness
- Feeling like your heart is beating too fast or too hard, fluttering, or skipping a beat

For patients with these symptoms, their doctor will check their heart rate and blood pressure, and may recommend they see a specialist, like a cardiologist or neurologist.

For people with ME/CFS who do not have heart or blood vessel disease, doctor might suggest patients increase daily fluid and salt intake and use support stockings. If symptoms do not improve, prescription medication can be considered.

Memory and Concentration Problems

Memory aids, like organizers and calendars, can help with memory problems. For people with ME/CFS who have concentration problems, some doctors have prescribed stimulant medications, like those typically used to treat Attention-Deficit / Hyperactivity Disorder (ADHD). While stimulants might help improve concentration for some patients with ME/CFS, they might lead to the 'push-and-crash' cycle and worsen symptoms. "Push-and-crash" cycles are when someone with ME/CFS is having a good day and tries to push to do more than they would normally attempt (do too much, crash, rest, start to feel a little better, do too much once again).

Strategies that do not involve use of medications and might be helpful to some patients-particularly if their illness does not keep them bed-bound-are:

- Avoiding 'push-and-crash' cycles through carefully managing activity. "Push-and-crash" cycles are when someone with ME/CFS is having a good day and tries to push to do more than they would normally attempt (do too much, crash, rest, start to feel a little better, do too much once again). This can then lead to a "crash" (worsening of ME/CFS symptoms). Finding ways to make activities easier may be helpful, like sitting while doing the laundry or showering, taking frequent breaks, and dividing large tasks into smaller steps.

- Talking with a therapist to help find strategies to cope with the illness and its impact on daily life and relationships.

Other potentially supportive treatments or strategies include:

- **Balanced diet.** A balanced diet is important for everyone’s good health and would benefit a person with or without any chronic illness.
- **Nutritional supplements.** Doctors might run tests to see if patients lack any important nutrients and might suggest supplements to try. Doctors and patients should talk about any risks and benefits of supplements, and consider any possible interactions that may occur with prescription medications. Follow-up tests to see if nutrient levels improve can help with treatment planning.
- **Complementary therapies.** Complementary therapies, like acupuncture, meditation, gentle massage, deep breathing, relaxation therapy, yoga, or tai chi, might be helpful to increase energy and decrease pain.

Important note: Patients should talk with their doctors about all potential therapies because many treatments that are promoted as cures for ME/CFS are unproven, often costly, and could be dangerous.

Disclaimer: This website is for informational purposes only. The information provided on this website is not intended to be a substitute for professional medical advice, diagnosis, or treatment.

Page last reviewed: July 3, 2017

Page last updated: July 3, 2017

Content source: [Centers for Disease Control and Prevention](#)

[National Center for Emerging and Zoonotic Infectious Diseases \(NCEZID\)](#)

[Division of High-Consequence Pathogens and Pathology \(DHCPP\)](#)



ABOUT

[About CDC](#) [Jobs](#) [Funding](#)

LEGAL

[Policies](#) [Privacy](#) [FOIA](#) [No Fear Act](#) [OIG](#)

1600 Clifton Road Atlanta, GA 30329-4027 USA
800-CDC-INFO (800-232-4636), TTY: 888-232-6348
[Email CDC-INFO](#)

U.S. Department of Health & Human Services
HHS/Open
USA.gov