

1. Definitions

Noor N, Urits I, Degueure A, Rando L, Kata V, Cornett EM, Kaye AD, Imani F, Narimani-Zamanabadi M, Varrassi G, Viswanath O. A Comprehensive Update of the Current Understanding of Chronic Fatigue Syndrome. *Anesth Pain Med.* 2021 Jun 26;11(3):e113629. doi: 10.5812/aapm.113629. PMID: 34540633; PMCID: PMC8438707.

Nacul L, Authier FJ, Scheibenbogen C, et al. European Network on Myalgic Encephalomyelitis/Chronic Fatigue Syndrome (EUROMENE): Expert Consensus on the Diagnosis, Service Provision, and Care of People with ME/CFS in Europe. *Medicina (Kaunas).* 2021;57(5):510. Published 2021 May 19. doi:10.3390/medicina57050510 (see BOX 9 where they classify post-COVID)

Box 1. Institute of Medicine (IOM) criteria for the diagnosis of ME/CFS.

Required symptoms

1. Substantial reduction or impairment in the ability to engage in pre-illness levels of activity (occupational, educational, social, or personal life) with profound fatigue of new onset, which is present for at least 6 months, is not explained by ongoing or unusual excessive exertion and is not substantially relieved by rest
2. Post-exertional malaise (PEM)
3. Unrefreshing sleep

At least one of the following:

1. Cognitive impairment
2. Orthostatic intolerance

Box 9. Diagnostic categories and sub-grouping.

Symptom description

Prolonged fatigue: persistent profound fatigue or lack of energy, usually (but not necessarily) accompanied by other symptoms; should be present for at least one month

Chronic fatigue (CF): persistent fatigue or lack of energy, that leads to reduced activity levels lasting over 3–6 months*. This may be explained by a condition other than ME/CFS (e.g., cancer-related fatigue) or unexplained (“idiopathic chronic fatigue”). It does not require other symptoms that are typically found in ME/CFS

Post-infectious fatigue or post-viral illness (PIF or PVI): new onset symptom complex including persistent profound fatigue with exercise intolerance following an infectious trigger and which is not otherwise explained by a diagnosed condition or lifestyle. It is usually accompanied by at least 2 further symptoms** from: post-exertional malaise, unrefreshing or poor sleep quality, cognitive or autonomic symptoms for at least 3 months (i.e., this is a subset, where the viral aetiology is clear, of patients with chronic fatigue).

Diagnostic categories

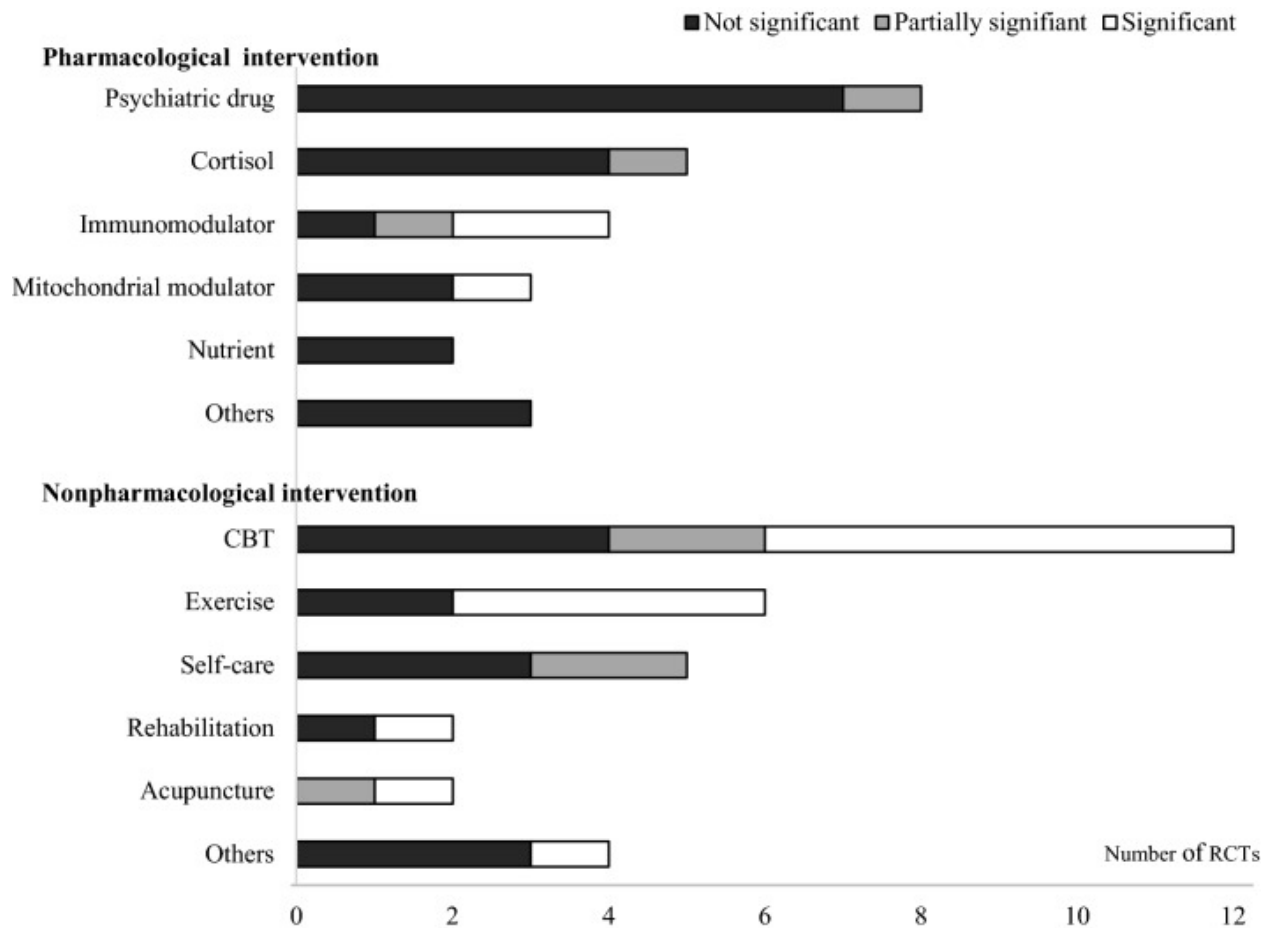
- *ME or ME/CFS*: persistent fatigue or lack of energy that leads to reduced activity levels lasting over 3–6 months, when diagnostic criteria according to IOM or Canadian Consensus criteria (CCC) are fully met for adults, and CCC or Rowe’s criteria are fully met in children.
- *ME/PVFS (ME/Post-viral fatigue syndrome or post-infectious fatigue syndrome, post-infectious ME/CFS)*: As for ME/CFS, when symptoms follow a presumed or confirmed infection (e.g., post-COVID-19 fatigue syndrome, post-mononucleosis fatigue syndrome, post-Lyme ME/CFS) (NB. This does not preclude there being triggers other than infections involved in the origins of the illness in other cases)
- *Non-ME chronic fatigue*: chronic fatigue cases that do not fulfil the diagnostic criteria for ME/CFS, lasting for at least 3–6 months, but are attributable to other underlying causes.
- *ME/CFS of combined aetiology*: when symptoms are attributed to a combination of ME/CFS and other known disease(s), e.g., ME/CFS and diabetes type 2 (NB. This is not in itself a diagnosis, which requires identification of the disease(s) to which the condition is attributable).

2. Acupuncture for CFS

Kim JE, Seo BK, Choi JB, Kim HJ, Kim TH, Lee MH, Kang KW, Kim JH, Shin KM, Lee S, Jung SY, Kim AR, Shin MS, Jung HJ, Park HJ, Kim SP, Baek YH, Hong KE, Choi SM. Acupuncture for chronic fatigue syndrome and idiopathic chronic fatigue: a multicenter, nonblinded, randomized controlled trial. *Trials*. 2015 Jul 26;16:314. doi: 10.1186/s13063-015-0857-0. PMID: 26211002; PMCID: PMC4515016.

2. Comparison of multiple treatments for CFS

Kim DY, Lee JS, Park SY, Kim SJ, Son CG. Systematic review of randomized controlled trials for chronic fatigue syndrome/myalgic encephalomyelitis (CFS/ME). *J Transl Med*. 2020 Jan 6;18(1):7. doi: 10.1186/s12967-019-02196-9. Erratum in: *J Transl Med*. 2020 Dec 23;18(1):492. PMID: 31906979; PMCID: PMC6943902.



3. Roman P, Carrillo-Trabalón F, Sánchez-Labraca N, Cañadas F, Estévez AF, Cardona D. Are probiotic treatments useful on fibromyalgia syndrome or chronic fatigue syndrome patients? A systematic review. *Benef Microbes*. 2018 Jun 15;9(4):603-611. doi: 10.3920/BM2017.0125. Epub 2018 Apr 26. PMID: 29695180.

Lactobacillus casei strain Shirota

Bifidobacterium infantis 35624

Use of Acupuncture for COVID

1. Published guidelines from Chinese government

Liu WH, Guo SN, Wang F, Hao Y. Understanding of *guidance for acupuncture and moxibustion interventions on COVID-19* (Second edition) issued by CAAM. *World J Acupunct Moxibustion*. 2020;30(1):1-4. doi:10.1016/j.wjam.2020.03.005