

The CFIDS Association of America (CAA) recently posted a compilation of four articles about post-exertional malaise (PEM) on their website. PEM is one of the most common and one of the most disabling symptoms experienced by CFS/CFIDS/ME patients. Yet, it is not well understood, nor is it taken as seriously as it should be.

The most detailed and specific description of post-exertional symptoms is included in the 2003 Canadian Clinical Case Definition for CFS/CFIDS/ME, which reads as follows:

"With activity (it need not be strenuous and may include walking up a flight of stairs, using a computer, or reading a book), there must be a loss of physical or mental stamina, rapid/sudden muscle or cognitive fatigability, post- exertional malaise and/or fatigue and a tendency for other associated symptoms within the patient's cluster of symptoms to worsen. The recovery is slow, often taking 2-24 hours or longer."

Jennifer Spotila, J.D., a litigation attorney whose career was disrupted by CFS/CFIDS/ME, serves on the Board of Directors for the CAA and takes the PEM topic on by checking out multiple sources. In the first article, Ms. Spotila examines this major symptom, word for word, in order to accurately define it, and describes how it affects patients with this illness. In the second article she explains some objective methods by which patients can be tested for PEM (i.e., a test and re-test protocol developed by VanNess at the University of the Pacific), how patients usually differ from healthy controls, and the repercussion of exercise in patients with CFS/CFIDS/ME. These measured changes in many body systems post-exercise, especially 24-hours after exercise, distinguish CFS/CFIDS/ME patients from other patients who have chronic, fatiguing illnesses.

After clarifying the above, the third article focuses on what she considers the most likely and the unlikely causes of PEM. Ms. Spotila completes the series by reviewing many strategies and suggestions offered by physicians who work with CFS/CFIDS/ME patients—things that patients can safely do on their own to prevent or lessen the misery of PEM.

These articles can be viewed individually on the CAA webpage called [Post-Exertional Malaise](#) . To access the entire PEM series as a PDF, scroll down to the end of that webpage and click where shown.