CHRONIC FATIGUE SYNDROME IS AN ORGANIC DISEASE AND SHOULD BE TREATED BY NEUROLOGISTS: NO I. Steiner

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Chronic fatigue syndrome (CFS) is a poorly understood heterogeneous disorder. It is characterized by profound fatigue and a combination of other nonspecific somatic manifestations and neuropsychological symptoms, including difficulties with concentration, short-term memory and thinking disturbances, as well as impaired attention and slowed processing speed. This may result in substantial reduction in occupational, personal, social, and educational status. The condition is a challenging diagnosis as the disorder has vague symptomatology and common features with other conditions like fibromyalgia. Likewise, the criteria proposed for the diagnosis of CFS are difficult to interpret. Opinions differ regarding the classification of chronic fatigue cases with a history of psychiatric illnesses and CFS is often diagnosed as depression. Current etio-pathogenetic hypotheses that favor the organic possibility of center on atypical sensory processing in the CNS, dysfunction of skeletal muscle nociception and the hypothalamic-pituitary-adrenal (HPA) axis. To date, no pharmacological agent has been reliably shown to be effective in the disorder.

Several factors have been related to the pathology of CFS, like anti-virus autoantibodies, abnormal vasoactive neuropeptides, vaccinations, but the results from different studies are controversial and conflicting and none of the findings was found to be either specific or sensitive. The disorder lacks a reproducible biological marker. Further research is needed to understand the exact pathology of CFS and to clarify whether this disorder is truly a distinct one. At present the condition should be regarded as a mental dysfunction and treated by psychiatrists.