

# What Are ME/CFS Symptoms?

Three primary symptoms **ALWAYS** occur with ME/CFS. These must be of at least moderate intensity and be present at least 50% of the time to diagnose a patient with ME/CFS:



## **A substantial reduction or impairment in the ability to engage in pre-illness levels of activity (occupational, educational, social, or personal life) that:**

- Lingers for more than 6 months
- Is accompanied by fatigue that is:
  - Often profound
  - Of new onset (not life-long)
  - Not the result of ongoing or unusual or excessive exertion
  - Not substantially alleviated by rest



## **Post-exertional malaise (PEM),** an abnormal response to physical or cognitive exertion that:

- Is characterized by an exacerbation of some or all of a patient's symptoms (such as physical fatigue, cognitive problems, unrefreshing sleep, muscle or joint pain, light-headedness, sensory sensitivities, and flu-like symptoms) and a further loss of functional capacity
- Has either immediate onset, or onset delayed for hours or days after the exertion
- Has severity and duration of symptoms that are out of proportion to the inciting event.
- Takes days, weeks, or months to return to the pre-PEM baseline health

For some patients, basic activities of daily living can trigger PEM, and PEM can affect a person's ability to perform these activities or to attend school or work. The trigger varies between individuals and within the same individual at different points during their illness. These characteristics of PEM often make life difficult and unpredictable.



**Unrefreshing sleep.** People with ME/CFS may not feel better or less tired even after a full night of uninterrupted sleep. Some may also have sleep disorders, including sleep apnea, that would benefit from treatment.



In addition, **at least one of the following two manifestations** must be present:



**Cognitive impairment.** Most people with ME/CFS have problems with thinking, memory, executive function, and information processing as well as attention deficit and impaired psychomotor functions. All are exacerbated by exertion, effort, or stress, and may have serious consequences on a person's ability to maintain a job, attend school, or engage in other activities of daily living. Patients often say they have "brain fog" to describe this problem because they are unable to think clearly.



**Orthostatic intolerance.** People with ME/CFS develop a worsening of symptoms upon assuming and maintaining upright posture as measured by objective heart rate and blood pressure abnormalities during standing, bedside orthostatic vital signs, or head-up tilt testing. Orthostatic symptoms such as lightheadedness, fainting, increased fatigue, cognition, headaches, or nausea worsen with upright posture (standing or sitting) and improve (though not necessarily fully resolve) with lying down. This is often the most problematic manifestation of ME/CFS among adolescents.

## OTHER COMMON SYMPTOMS

- Muscle pain
- Pain in the joints without swelling or redness
- Headaches of a new type, pattern, or severity
- Swollen or tender lymph nodes in the neck or armpit
- A sore throat that is frequent or recurring
- Gastrointestinal symptoms
- Genitourinary symptoms
- Sensitivity to light, sound, touch, and smell
- Chills and night sweats
- Visual disturbances
- Nausea
- Allergies or sensitivities to foods, odors, chemicals, or medications

CS321382-B



Centers for Disease  
Control and Prevention  
National Center for Emerging and  
Zoonotic Infectious Diseases

**For more information on ME/CFS,  
please visit [www.cdc.gov/me-cfs](http://www.cdc.gov/me-cfs).**