

# Comparison Chart of Diagnostic Criteria Used to Diagnose ME, CFS and ME/CFS



Name of criteria	# of required symptoms	Required symptoms	# of additional symptoms required for diagnosis	Optional or polythetic symptoms	Exclusionary symptoms or diagnoses
<b>Oxford criteria</b>	1	Severe, disabling <b>fatigue</b> of new origin present at least 50% of the time	n/a	Myalgias (muscle pain), mood disturbances, and sleep disturbances	Severe mental illness such as schizophrenia or bipolar disorder; other fatiguing illness such as anemia
<b>Post-infectious Fatigue Syndrome criteria (post-infectious Oxford criteria)</b>	2	Severe, disabling <b>fatigue</b> of new origin present at least 50% of the time <b>Onset proved to be during or post-infection</b>	n/a	Myalgias (muscle pain), mood disturbances, and sleep disturbances	Severe mental illness such as schizophrenia or bipolar disorder; other fatiguing illness such as anemia
<b>Ramsay definition (acute stage)</b>	2	<b>Muscle fatigability</b> with slowed recovery, exacerbated by exercise; <b>Low-grade fever</b>	n/a	Persistent and profound fatigue; headache; dizziness/vertigo; giddiness; muscle pain, cramps, or twitching; muscle tenderness or weakness; paraesthesia (unusual sensations, typically in extremities); frequent urination; and sensory disturbances such as tinnitus, deafness alternating with hyperacusis, or blurred vision; malaise, a general feeling of being ill or unwell; hypoglycemia; swollen lymph nodes	n/a

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Ramsay definition (chronic stage)	1	Muscle fatigability with slowed recovery, exacerbated by exercise	n/a	<p>Muscular system (pp 30)</p> <p>Muscular spasm/twitching and swollen bands in the muscle in severe cases; tender points in the neck and upper back and back of the lower leg can be found in less severe cases; issues with fine motor control</p> <p>Circulatory system (pp 30)</p> <p>Cold extremities and hypersensitivity to cold; ashen-grey pallor preceding worsened symptoms.</p> <p>Nervous system (pp 31)</p> <p>Problems with memory and concentration; emotional lability (mood swings); difficulty with reading comprehension; choosing the wrong word when speaking; difficulty with word-finding; alterations in sleep rhythm and/or vivid dreams.</p> <p>Autonomic symptoms, such as sensory sensitivity; increased frequency of urination; episodic sweating, especially where the disease is more severe; and orthostatic tachycardia (POTS).</p>	n/a



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<b>Fukuda criteria</b>	<b>1</b>	<b>Fatigue</b> that is not explained by other conditions; that is either persistent or relapsing; of new or definite onset; not the result of ongoing exertion; is not substantially alleviated by rest; and results in substantial reduction in previous levels of occupational, educational, social, or personal activities.	<b>4</b>	<b>Polythetic</b> <i>four of eight symptoms must be present for at least 6 mo. and not precede onset of fatigue</i> <ol style="list-style-type: none"> <li>1) substantial impairment in short-term memory or concentration;</li> <li>2) sore throat;</li> <li>3) tender lymph nodes;</li> <li>4) muscle pain;</li> <li>5) multi-joint pain without swelling or redness;</li> <li>6) headaches of a new type, pattern, or severity;</li> <li>7) unrefreshing sleep; and/or</li> <li>8) post-exertional malaise lasting more than 24 hours.</li> </ol>	Drug or alcohol abuse; depression with psychotic features; side effects of medication; eating disorders; severe obesity (BMI > 45); other fatiguing illness
<b>Canadian Consensus Criteria</b>	<b>4</b>	<b>Fatigue</b> with physical and cognitive dimensions, of new origin, unexplained by other diseases, that results in substantial reduction of previous levels of activity;  <b>Post-exertional malaise,</b>	<b>4</b>	<b>Polythetic:</b> <i>At least two from the following neurological/cognitive symptoms:</i> trouble concentrating; confusion, disorientation; difficulty with information processing, categorizing and word retrieval; perceptual and sensory disturbances, such as spatial instability, disorientation, and inability to focus vision; ataxia, muscle weakness, and fasciculations; sensory sensitivities such as photophobia,	Exclude active disease processes that explain most of the major symptoms: Addison's disease, Cushing's Syndrome, hypothyroidism, hyperthyroidism, iron deficiency, other treatable forms of anemia, iron overload syndrome, diabetes



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		<p>post-exertional fatigue, and/or post-exertional pain with worsening of all symptoms and slowed recovery;</p> <p><b>Sleep disturbances</b>, such as inverted sleep cycles, unrefreshing sleep, sleep quantity disturbances (hypersomnia and/or insomnia);</p> <p><b>Pain</b>, such as headaches of new type, pattern, or severity; muscle pain; and/or joint pain. These may be migratory in nature.</p> <p><b>Must be present 6 mo. or more</b> in adults, 3 mo. or more in children.</p>		<p>hyperacusis (sound sensitivity), potentially leaning to emotional overload and/or anxiety.</p> <p><i>At least <b>one</b> symptom from at least <b>two</b> of the following three categories:</i></p> <p>(1) <b>autonomic</b>: orthostatic intolerance; light-headedness; extreme pallor; nausea and irritable bowel syndrome; urinary frequency and bladder dysfunction; palpitations with or without cardiac arrhythmias; exertional dyspnea.</p> <p>(2) <b>neuroendocrine</b>: loss of thermostatic stability; intolerance of extremes of heat and cold; marked weight change; loss of adaptability and worsening of symptoms with stress</p> <p>(3) <b>immune</b>: tender lymph nodes, recurrent sore throat, recurrent flulike symptoms, general malaise, new sensitivities to food, medications and/or chemicals.</p>	<p>mellitus, and cancer; treatable sleep disorders; rheumatological disorders; immune disorders such as AIDS; neurological disorders such as multiple sclerosis (MS), Parkinsonism, myasthenia gravis and B12 deficiency; infectious diseases such as tuberculosis, chronic hepatitis, Lyme disease, etc.; primary psychiatric disorders and substance abuse.</p> <p><i>“If a potentially confounding medical condition is under control, then the diagnosis of ME/CFS can be entertained if patients meet the criteria otherwise.”</i></p>



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International Consensus Criteria	1	<p><b>Post-exertional neuroimmune exhaustion:</b> increase in symptoms in response to what may be very minor physical or cognitive activity, that may be delayed in onset and may take days, weeks, or months from which to recover, resulting in a decrease in overall activity levels.</p>	7	<p><i>At least <b>one</b> symptom in at least <b>three</b> categories.</i></p> <p>(1) <b>neurocognitive:</b> difficulty with information-processing, inc. slowed thought, or impaired concentration, confusion, disorientation, cognitive overload, difficulty with decision-making, slowed speech, and acquired or exertional dyslexia. Short-term memory loss, difficulty with word-retrieval, difficulty remembering what one wanted to say, or what one was saying; difficulty recalling information or poor working memory</p> <p>(2) <b>pain:</b> headaches, often with aching behind the eyes or back of the head; migraine; or tension headaches; muscular, tendon, or joint pain, as well as pain in the chest or abdomen.</p> <p>(3) <b>sleep disturbances:</b> insomnia, hypersomnia, inverted sleep cycle, frequent awakenings, awakening much earlier than before onset, and vivid dreams and nightmares; unrefreshing sleep (awakening feeling exhausted), and daytime sleepiness.</p> <p>(4) <b>neurosensory, perceptual and motor disturbances:</b> inability to focus vision, sensory sensitivities, and impaired depth perception; muscle weakness, twitching, poor coordination, feeling unstead on one's feet, and ataxia.</p> <p><i>At least <b>three</b> of five symptoms/symptom-categories:</i></p> <p>(1) <b>flu-like symptoms</b> that are recurrent or chronic</p>	<p>“It is possible to have more than one disease but it is important that each one is identified and treated.” Primary psychiatric disorders, somatoform disorder and substance abuse are excluded. Pediatric: ‘primary’ school phobia is excluded.</p>



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				<p>and activate or worsen with exertion, such as sore throat, sinusitis, and tender or enlarged lymph nodes;</p> <p>(2) <b>susceptibility to viral infections</b> with prolonged recovery periods;</p> <p>(3) <b>GI symptoms</b> such as nausea, abdominal pain, bloating, irritable bowel syndrome (IBS);</p> <p>(4) <b>genitourinary symptoms</b> such as urinary urgency or frequency or needing to get up at night to urinate;</p> <p>(5) <b>sensitivities</b> to food, medications, odors or chemicals.</p> <p><i>At least <b>one</b> symptom in <b>one</b> of the following categories:</i></p> <p>(1) <b>cardiovascular</b> symptoms such as orthostatic intolerance, which may be delayed; palpitations with/without arrhythmias, or dizziness;</p> <p>(2) <b>respiratory</b> symptoms such as air hunger, labored breathing, or fatigue of chest wall muscles;</p> <p>(3) <b>loss of thermostatic ability</b> (lower than normal body temperature, marked differences in nighttime vs daytime temperatures; sweating episodes; recurrent feelings of feverishness with or without low-grade fever; or cold extremities;</p> <p>(4) <b>intolerance of extremes</b> of temperature</p>	



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National Academy of Medicine or Institute of Medicine Criteria	3	<p><b>Fatigue</b> that is persistent and profound, of new and definite onset, that is not the result of ongoing exertion and not alleviated by rest that impairs the ability to engage in pre-illness activity; <b>post-exertional malaise</b>; and <b>unrefreshing sleep</b>.</p> <p>These symptoms must be present at least 50% of the time, be moderate or severe in character, and persist for 6 months or more.</p>	1	<p><b>Polythetic:</b> Either <b>cognitive impairment</b> or <b>orthostatic intolerance</b> must be present.</p> <p>These symptoms must be present at least 50% of the time, be moderate or severe in character, and persist for 6 months or more.</p>	n/a

