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Perspective of chronic fatigue syndrome (myalgic encephalomyelitis)

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DESCRIPTION

Perspective

Myalgic Encephalomyelitis/Chronic Fatigue Syndrome (ME/CFS) is a serious long-term illness that affects many systems of the body and lasts for at least 6 months and cannot be completely explained by the underlying condition. Fatigue is exacerbated by physical or mental activity, but not by rest. People with ME/CFS often cannot perform normal activities. It may be bedridden. People suffer from severe fatigue and sleep disorders and can be exacerbated when a symptomatic person tries to do what he or she wants or needs to do. This symptom is called Post-Exercise Fatigue (PEM). Other symptoms include problems with thinking and concentration, pain and dizziness. Also known as Myalgic Encephalomyelitis/Chronic Fatigue Syndrome (ME/CFS), it is a serious chronic condition that can affect your ability to perform your daily tasks. In the past, some did not believe that ME/ CFS was a real illness. But in recent years, experts have begun to take it more seriously, and research is being conducted to find out why it happens and how to handle it.

In the meantime, lifestyle strategies and treatments can help people manage some of their symptoms. CFS is also known as Systemic Exercise Intolerance (SEID). The cause of CFS is not yet fully understood. Some theories include viral infections, mental stress, or a combination of factors. Diagnosis of CFS can be difficult because no single cause has been identified and similar symptoms occur in many other conditions. There are no CFS tests. The doctor will need to rule out other causes of your fatigue when making a diagnosis. CFS was once a controversial diagnosis, but is now widely recognized as a disease. CFS can affect anyone, but it is most common for women in their 40s and 50s. Currently, there is no cure, but treatment can relieve symptoms.

Causes and Symptoms

The cause of chronic fatigue syndrome is still unknown. Some people can be born with a predisposition to disability, which is then caused by a combination of factors. A possible trigger is a virus infection, Immune system problems, Hormonal imbalance, Physical or emotional trauma. Factors that may increase the risk of chronic fatigue syndrome include age and gender. Chronic fatigue syndrome can occur at any age, but most commonly affects young to middle-aged adults. Chronic fatigue syndrome is diagnosed much more often in women than in men.

The symptoms of chronic fatigue syndrome differ from person to person, and symptom severity may vary from day to day. Signs and symptoms are of sleep disorders, thinking and memory problems, twitching muscle, skin rash, boiler, depression, high stress level, spelling incorrect words, tinnitus, period tinnitus (PMS), sexual treatment or sexually lacking impotence, hair removal, unknown weight changes, chest pain, seizure, paralysis, spatial dispatch, difficulty in moving tongue. People who have ME/CFS often experience pain and discomfort that does not come from injuries and other identifiable causes. Types of general pain include muscle pain and joint pain, redness and swelling, headaches in people with lymph nodes (especially neck and flanks), gastrointestinal problems, cold, night sweat, food, sensitive, sensitive, light, contact, heat or cold, muscle weakness, breathing difficult, irregular heartbeat, hypersensitivity and mood changes, anxiety and panic attacks, numbness, tingling, burning in hands, feet, face and eye pain, low fever, vision problem.

TREATMENT

There is no cure for chronic fatigue syndrome. Treatment focuses on relieving symptoms. The most annoying or incapacitating symptoms need to be addressed first.

Medication

Some problems associated with chronic fatigue syndrome can be improved with either prescription or over the counter medications. Examples include: Treating depression (Orthostatic intolerance), Medications for regulating blood pressure or heart rhythm, Over the counter medications such as ibuprofen (Advil, Motrin IB, other) and naproxen sodium (Aleve) are not useful for using prescription drugs to treat fibrillation, these include pregabalin (Lyrica), duloxetine (Cymbalta), amitriptyline, or gabapentin (Neurontin).

Many people with chronic fatigue syndrome also benefit from therapy like counselling, treating sleep disorders, regular exercise.

Addressing Post-Exertional Malaise (PEM) Symptoms

PEM occurs when even minor physical, mental, or emotional exertion results in CFS symptoms becoming worse, which occurs 12 to 48 hours after normal activity, and occurs daily or weekly. Activity management is also called pacing and helps to compensate for peace and activities to avoid PEM flat-up. You need to find your individual limits for mental and physical activity, plan these activities and rest so that they stay within these limits. Some doctors refer to stay within these limits as "energy envelope". Maintaining your activities diary can help you find your personal limitations. Powerful aerobic exercise is suitable for most chronic conditions, but it is important to note that people with CFS are not allowed to do such exercise routines.