

ME/FM Research notes

Written by Administrator

Monday, 13 April 2015 07:43 - Last Updated Tuesday, 14 April 2015 07:35

A lot has been happening recently in the research area. Here are some items to note:

ME Research Notes

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The final version of the US National Institutes of Health P2P report looking at the state of ME research was scheduled for release on April 14. However, it was discovered that not all of the public submissions were passed on to the panel members, so there will be a delay in the release of the final report.

<https://prevention.nih.gov/programs-events/pathways-to-prevention/workshops/me-cfs>

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Dr Hornig from Columbia published a study in February finding that ME/CFS patients had different cytokine profiles than health controls, with the cytokine profile changing at around 3 years suggesting that the neuroimmune system becomes exhausted. She published a second paper in March that found cytokine differences in spinal fluid between ME/CFS patients, MS patients and healthy controls. Descriptions of the two studies can be found here:

<http://simmaronresearch.com/2015/03/major-study-suggests-early-immune-activation-may-drive-chronic-fatigue-syndrome/>

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<http://simmaronresearch.com/2015/04/spinal-fluid-study-finds-dramatic-differences-chronic-fatigue-syndrome/>

- A study out of Norway divided adolescents with fatigue into two groups – those that met the Canadian Consensus Criteria and those that did not. The researchers conducted various

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tests and found little difference between the two groups. They therefore questioned the validity of the CCC. Perhaps they didn't find the right tests to use to distinguish the two groups. Note that Dr Hornig used the CCC.

- <http://www.ncbi.nlm.nih.gov/pubmed/25640602>
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Last year, a team from DePaul University found depressed levels of a certain chemical in ME/CFS patients. In March, a team out of UBC led by Dr David Patrick announced that they did not find depressed levels. This is what science is about – putting out ideas and challenging them. It is great to see UBC taking an active role in the ME debate.

- http://www.tandfonline.com/doi/abs/10.1080/21641846.2015.1024004#.VSMq6_nF_u
- [Q](#)
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Dr Abdolamir Landi of the University of Alberta has been invited to speak at the Invest in ME research colloquium to be held in London England in May. Dr Landi has both a MD and a PhD. His field of study is immunology and virology. Dr Landi has agreed to be a medical and research advisor to the Network.

FM Research Notes

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The Network received an email from Dr El-Gabalawy of CIHR and Dr Fitzcharles, steering committee chair, advising us that the priority setting project for adult-FM is moving forward. The Network has asked to see the questionnaire and other methodological documents.

- A researcher in Scotland contacted local residents to identify people who might have FM. He asked likely candidates to come to the study center. They were then tested to see if they met the 1990, 2010 and/or 2011 criteria. He found that few people met two or three criteria. The lack of overlap could be due to chance or to how the criteria were applied, but could also be due to major differences between the three criteria. This study is another signal that criteria do matter. See:

- <http://www.ncbi.nlm.nih.gov/pubmed/25323744> or <http://www.researchgate.net/pub>

[lication/266972658 The prevalence of fibromyalgia in the general population a comparison of the American College of Rheumatology 1990 2010 and modified 2010 classification criteria](#)

- Sometimes, battles play out in professional journals. Pain Research and Management is the journal of the Canadian Pain Society. The Nov/Dec 2014 journal includes a commentary by Fitzcharles et al “to provide advice and highlight shortcomings in the adjudication of FM”. The next article is by Harth and Nielson critiquing the first article. Among other things it states: “Fitzcharles et al suggest using poorly defined criteria for diagnosis, dismiss the use of well-tested instruments for assessing function, present selective evidence minimizing the contribution of trauma to the development of FM and cast doubt on the role of the expert. The authors advocate a very skeptical approach to claims made by patients with FM on disability, or applying for it, to the point of suggesting widespread malingering in such cases. We believe that the article presents a highly biased view of FM, and that reading it will not help adjudicators in arriving at fair and well-informed decisions.” Team Fitzcharles responds in a letter also included in the journal that Team Harth is “unfortunately content with concepts of the past.” and that Team Fitzcharles is “delighted that we have started a debate on how the courts should 'treat' FM.

- <http://www.pulsus.com/journals/toc.jsp?sCurrPg=journal&jnlKy=7&isuKy=1234&fromfold=Past+Issues&fold=Table%20Of%20Contents>