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## Treatment

Research on the Chronic Fatigue Syndrome/Chronic Fatigue and Immune Dysfunction Syndrome/Myalgic Encephalopathy (CFS/CFIDS/ME) and Fibromyalgia (FM) is making considerable progress, which has generated enthusiasm even within the medical community, and will hopefully provide more definitive answers to the cause and cure. Meanwhile, there are various options and strategies that can be used as part of a treatment plan for people with these illnesses. Standard treatment usually consists of prescription medications to help relieve the most troublesome symptoms. But patients can tap into the different disciplines, like naturopathic medicine and alternative therapies, by which to improve their overall health and lifestyle.

CFS/CFIDS/ME and FM share a fair number of symptoms (i.e. sleep disorder, pain, decreased energy and cognitive functioning difficulties) and many individuals have both illnesses, though

one tends to be more dominant. For practical reasons, information about the most commonly used medications and treatments for CFS/CFIDS/ME and FM have been combined on our website.

It is important to remember results can vary greatly between patients, and effective treatment plans often come from a "trial and error" process. Furthermore, many patients with CFS/CFIDS/ME are found to have a heightened sensitivity to medications and often cannot tolerate standard dosages. Medication titration is often recommended—a process by which a drug dosage is slowly brought up to achieve optimal therapeutic effect. It is also better for patients not to start out on too many medications or products at once, in order to better observe the effects (or side effects) of each. Then again, some physicians will prescribe several medications together, in small to modest amounts, to produce a synergistic effect.

Since patients with CFS/CFIDS/ME and FM often see several physicians and/or other practitioners and take a mixture of prescription drugs and other products, it is strongly advised they review everything they are taking with each and every doctor to prevent interactions.

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### **The multi-pronged approach**

CFS/CFIDS/ME and FM are known to generate a multitude of symptoms and problems, though these can vary between patients. It does not seem very likely that one single drug or therapy will provide adequate treatment for anyone. Effective treatment plans could consist of several elements from each of the following approaches/modalities listed below:

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**Conventional Medicine**—Conventional medicine is a system that relies heavily on scientific

research and technology and treats the disease and its symptoms by and large with pharmaceutical products. The primary objective is to help relieve or control symptoms and this is especially true for CFS/CFIDS/ME and FM. Even though these illnesses are still not fully understood, treatment will be geared towards alleviating the most disruptive symptoms, such as sleep disorder, pain, fatigue, cognitive disturbances, mood, infections, and cardiovascular and digestive problems.

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**Supplements, vitamins & herbal medicine**—Herbal preparations, plant extracts, vitamins, and dietary supplements have been used as medicinal agents for many years. In many countries, these are prescribed by physicians, much like pharmaceuticals, and the manufacturers of these products are held to specified standards. Patients in the USA are left with the responsibility in navigating through all the various products and brands, which should not be taken lightly, but there are some guidelines in how they can go about this safely.

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**Lifestyle Management**—When people are diagnosed with a new illness and/or their illness becomes chronic, it is always a good idea to become as well informed about it as possible and learn about different strategies and self-care skills. Knowledge can help people make better choices and feel more in control of their illness and situation. Patients will do better if they reevaluate what they still can do and make sensible adjustments and learn to pace themselves.

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**Mental Health**—Many people are able to link the onset of CFS/CFIDS/ME or FM to a specific event (or soon thereafter) such as an infection, an accident, injury or surgery, or some other type of trauma. However, others will say that they have been struggling with various health

problems since childhood. Whether people are learning to accept and adjust to a sudden change/decline in their health, or have been in poor health for a long time, this will often take a toll on people—physically, mentally and emotionally.

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**Nutrition & Exercise**—Consuming more nutritious foods or eliminating those which may aggravate symptoms, and engaging in some level of physical activity can help to improve one's overall wellness. Though there are appreciable limits and consequences that CFS/CFIDS/ME and FM may impose, there are a number of things people can explore to help them stay as healthy, strong and mobile as possible.

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**Alternative Therapies**—Naturopathic Medicine follows a different philosophy/paradigm of disease than conventional medicine, focusing more on the patient as a whole and not only on one's disease. Its approach is to tap into the body's inherent ability to heal and maintain itself and this is accomplished through a wide variety of modalities such as qigong, yoga, meditation/relaxation techniques, acupuncture, chiropractic care, and physical therapy, as well as using natural products. Many of these practices and therapies are gaining more support by the general medical community and are being recommended to patients—especially those with CFS/CFIDS/ME and FM.

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[Clinical Guides to Diagnosis and Treatment](#)

[Antiviral treatment creates improvement in a subset of CFS/CFIDS/ME patients](#)

[Complementary & Mainstream Treatment Approaches](#)

[Comprehensive Treatment of FM](#) by Dr. Robert Bennett

[\*The Physical Basis of CFS\* by Dr. Anthony Komaroff](#)

[\*Research Advances in Chronic Fatigue Syndrome: Impact on Treatment\* by Dr. Nancy Klimas](#)

[Review of Nutritional Supplements used for CFIDS & FM](#)

[\*On the Morbid Fascination with Psychiatric Morbidity\* by Dr. Alan Gurwitt](#)

[\*Orthostatic Intolerance in CFIDS\* by Peter Rowe](#)

[\*Orthostatic Problems in CFIDS/FM and Post Polio Syndrome\* by Dr. Richard Bruno](#)

[Warning Against Long-term Use of SSRIs and Stimulants](#)

[\*Review of abnormal quantitative EEG \(brainwave activity\) results in CFIDS\* by Dr Frank Duffy, on Chronic Fatigue Syndrome/ Sleep/ The immune system, Radio National transcripts: The Health Report, 1997](#)

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