CANADIAN CLINICAL CRITERIA (abbreviated version) 2003

It is recommended that this tick chart be used in the initial consultation to assist with a possible diagnosis of ME/CFS. (NB: Sections 1 to 6 must all be met as indicated below)

1) Post-Exertional Malaise and Fatigue: (All criteria in this section must be met)	5) Autonomic/Neuroendocrine/Immune Manifestations:
a) The patient must have a marked degree	(At least one symptom in at least two of the
of new onset, unexplained, persistent, or	following three categories must be met):
recurrent physical and mental fatigue that	A) Autonomic Manifestations:
substantially reduces activity level	Orthostatic Intolerance (e.g. neurally
b) Post-exertional fatigue, malaise and/or	mediated hypotension (NMH))
pain, and a delayed recovery period	2) Postural orthostatic tachycardia
(more than 24 hours to recover)	syndrome (POTS)
c) Symptoms can be exacerbated by exertion	3) Vertigo and/or light-headedness.
or stress of any kind	4) Extreme pallor
	5) Intestinal or bladder disturbances with
2) Sleep Disorder:	or without irritable bowel syndrome
(This criterion must be met)	(IBS) or bladder dysfunction
Unrefreshing sleep or altered sleep pattern	6) Palpitations with or without cardiac
(including circadian rhythm disturbance)	arrhythmia
	7) Vasomotor instability.
3) Pain:	8) Respiratory irregularities
(This criterion must be met)	o) Respiratory megularities
Arthralgia and/or myalgia without clinical	B) Neuroendocrine Manifestations:
evidence of inflammatory responses of joint	1) Loss of thermostatic stability.
swelling or redness, and/or significant	2) Heat/cold intolerance
headaches of new type, pattern, or severity	3) Anorexia or abnormal appetite,
	weight change
4) Neurological/Cognitive Manifestations:	4) Hypoglycemia
(Two or more of the following criteria	5) Loss of adaptability and tolerance for stress,
must be met)	worsening of symptoms with stress and
a) Impairment of concentration and	slow recovery, and emotional lability
short-term memory.	
b) Difficulty with information processing,	C) Immune Manifestations:
categorizing, and work retrieval, including	1) Tender lymph nodes
intermittent dyslexia.	2) Recurrent sore throat
c) There may be an overload phenomena:	3) Flu-like symptoms and/or general
information, cognitive, and sensory	malaise
overload (e.g. photophobia and	4) Development of new allergies or
hypersensitivity to noise) and/or emotional	changes in status of old ones.
overload which may lead to relapses	5) Hypersensitivity to medications and/or
and/or anxiety	chemicals.
d) Perceptual/sensory disturbances	
e) Disorientation or confusion	6) The illness persists for at least
f) Ataxia \Box	6 months:
	(This criterion must be met)
	NB: ME/CFS usually has an acute onset, but onset may also be gradual. A preliminary diagnosis may be possible in the early stages. The disturbances generally form symptom clusters that are often
	unique to a particular patient. The manifestations

may fluctuate and change over time.