

MID AND SOUTH ESSEX MEDICINES OPTIMISATION COMMITTEE (MSEMOC)

DIETARY SUPPLEMENTS, COMPLEMENTARY THERAPIES AND OTHER MEDICATIONS FOR THE TREATMENT OF CHRONIC FATIGUE SYNDROME / MYALGIC ENCEPHALOMYELITIS (OR ENCEPHALOPATHY)

BLACK: NOT RECOMMENDED FOR PRESCRIBING IN PRIMARY, COMMUNITY OR SECONDARY CARE

Mid and South Essex CCGs do not support the prescribing of dietary supplements, complementary therapies or other medications for the treatment of chronic fatigue syndrome nor myalgic encephalomyelitis / encephalopathy (CFS/ME) in accordance with NICE CG53.

Patients should be managed by GPs as recommended by NICE clinical guideline number 53 – Chronic Fatigue syndrome/ myalgic encephalomyelitis (or encephalopathy) – Diagnosis and management of CFS/ME in adults and children.

However Mid and South Essex CCGs will not routinely fund referral to a secondary care specialist in CFS/ME care for assessment or treatment on either an in-patient or outpatient basis outside routinely commissioned pathways.

The clinical guideline also states the following:

- Do not use the following drugs for the treatment of CFS/ME: monoamine oxidase inhibitors, glucocorticoids (such as hydrocortisone), mineralocorticoids (such as fludrocortisone), dexamphetamine, methylphenidate, levothyroxine or antiviral agents.
- There is insufficient evidence that complementary therapies are effective treatments for CFS/ME and therefore their use is not recommended. However, some people with CFS/ME choose to use some of these therapies for symptom control, and find them helpful.
- There is insufficient evidence for the use of supplements – such as vitamin B12, vitamin C, co-enzyme Q10, magnesium, NADH (nicotinamide adenine dinucleotide) or multivitamins and minerals – for people with CFS/ME, and therefore they should not be prescribed for treating the symptoms of the condition.
- Patients with CFS/ME reported to finding these helpful as a part of a self-management strategy for their symptoms should be encouraged to purchase them as self-care.
- People with CFS/ME who are using supplements should be advised not to exceed the safe levels recommended by the Food Standards Agency.

NHS prescribing of these medicines/supplements is not supported by Mid and South Essex CCGs as this is considered a low clinical priority due to the lack of evidence of any benefit.

Recommendations:

- Do not start new patients on dietary supplements, complementary therapies or other medications for the treatment of CFS or ME
- Patients currently being prescribed such products for this indication should be reviewed and advise that treatment will be stopped.

Providers commissioned to provide services on behalf of Mid and South Essex CCGs are reminded that they are required to follow the local joint formulary and prescribing guidance, as detailed in the medicines management service specification of their contract.

References	NICE CG53 Chronic fatigue syndrome/myalgic encephalomyelitis (or encephalopathy): diagnosis and management. 22 August 2007. Accessed 22 September 2021 https://www.nice.org.uk/guidance/cg53
Acknowledgements	Mid and South Essex CCGs Medicines Management Teams
Version	1.0
Author	HCPMSEMOC working group
Approved by	MSEMOC
Date Approved	October 2021
Review Date	October 2026 or earlier subject to any new updates nationally