

IDENTIFYING COMMONLY COMORBID CONDITIONS

In the past, a diagnosis of ME/CFS was made by first excluding all other possible conditions. However, the 2015 National Academy of Medicine report established ME/CFS as a positive diagnosis that can coexist with other conditions, including those in the differential diagnosis. Recognizing co-morbid conditions early and treating them appropriately may improve the patient's health, function, and quality of life. Commonly comorbid conditions include:

AUTONOMIC DYSFUNCTION Postural Orthostatic Tachycardia Syndrome (POTS), Neurally Mediated Hypotension (NMH), Orthostatic Hypotension	RHEUMATOLOGICAL DISORDERS Fibromyalgia, Ehlers-Danlos Syndrome, Temporomandibular Joint Dysfunction, Sicca Syndrome (dry eyes/mouth)	NEUROLOGICAL DISORDERS Sensory Hypersensitivities (light, sound, touch, odors or chemicals), Poor Balance, Migraine Headaches, Peripheral Neuropathy, Small Fiber Neuropathy
IMMUNOLOGICAL DISORDERS New or worsened allergies, Mast Cell Activation Syndrome, Multiple Chemical Sensitivities, Chronic infections & immunodeficiencies	GASTROINTESTINAL DISORDERS Food Allergy and Intolerances, including to milk protein, Gut motility issues, Celiac Disease, Irritable Bowel Syndrome, Small Intestinal Bacterial Overgrowth	ENDOCRINE/METABOLIC DISORDERS Hypothyroidism, Hypothalamus-Pituitary-Adrenal Axis dysregulation (low normal or flattened cortisol curve), Metabolic Syndrome
SLEEP DISORDERS Sleep Apnea, Restless Leg Syndrome, Periodic Limb Movement Disorder	PSYCHIATRIC DISORDERS Secondary Anxiety, Secondary Depression	GYNECOLOGICAL DISORDERS Endometriosis, Premenstrual Syndrome, Vulvodynia
MISCELLANEOUS: Interstitial Cystitis, Overactive Bladder. Nutritional deficiencies. Vitamin B12 and D deficiencies, Obesity		