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Material Submitted for the 5/28/2009 meeting of the

**United States Department of Health and Human Services**  
**Chronic Fatigue Syndrome Advisory Committee**

## *Adolescent CFS*

1. Unexplained, persistent or relapsing chronic fatigue over the past 3 months that was not the result of ongoing exertion and was not substantially alleviated by rest.
2. Substantial reduction in previous levels of social, educational, and personal activities.
3. Specific symptoms within the five classic symptom categories, which have persisted or recurred during the past 3 months of illness, but may predate the reported onset of fatigue

Jason LA, et al. A Pediatric Case Definition for Myalgic Encephalomyelitis and chronic fatigue syndrome. JCFS. 2006;13:1-44.

## *Five Symptom Categories*

1. Post-exertional malaise with loss of physical or mental stamina, rapid muscle or cognitive fatigability.
2. Unrefreshing sleep; disturbance of quantity and/or rhythm
3. Myofascial pain, joint pain, abdominal and/or head pain
4. Two or more neurocognitive manifestations
5. At least one symptom from two of three subcategories:
  - Autonomic manifestations
  - Neuroendocrine manifestations
  - Immune manifestations

Jason, et al. JCFS. 2006;13:1-44.

## ***Somatoform Disorders***

- Somatization Disorder
- Conversion Disorder
- Pain Disorder
- Hypochondriasis
- Body Dysmorphic Disorder
- Malingering
- Dissociative Disorders
- Factitious Disorder
  - Munchausen's Syndrome

## ***Both Factitious Disorder and Malingering***

"they are not so much interested in treatment as they are in either seeking to "enjoy" the status of "patient" or in obtaining a medical diagnosis for personal gain." <sup>2</sup>

## ***Munchausen's by Proxy***

1. Illness in a child that is simulated or produced by a parent or someone acting *in loco parentis*.
2. Presentation of the child for medical assessment and care, usually persistently, often resulting in multiple medical procedures
3. Denial of knowledge by the perpetrator as to the etiology of the child's illness
4. Abatement of the child's acute symptoms when the child is separated from the perpetrator. Excludes physical and sexual abuse and nonorganic failure to thrive.

Shaw. Factitious disorder by Proxy; Harv Rev Psychiatry 16, 215-223, 2008

## ***Pediatric Condition Falsification (PCF)***

American Professional Society on the Abuse of Children

- Diagnosis of PCF given to the child victim
  - Psychiatric Diagnosis of Factitious Disorder by Proxy (FDP) given to the perpetrator
- Ayoub. Definitional Issues in Munchausen's syndrome by Proxy; 2003. Child Abuse Neglect 11:7-10

## *Hypochondriasis by Proxy*

Mild variants where maternal anxiety leads to an exaggerated perception of the child as sick.

Roth. How "mild" is Munchausen's syndrome by Proxy? *Isr J Psychiat Relat Sci* 1990;27:160-7

“The diagnosis of [Factitious Disorder by Proxy] can be ruled out in a child when the repeated and suspicious presentations for medical care are found to result from illness that is wholly and credibly accounted for in another way.”

Shaw. *Harv Rev Psychiatry*.2008. p218

## *Action Points*

1. CFS be considered a diagnosis that specifically excludes PCF (FDP)
2. This information distributed to pediatricians, child abuse agencies, and educators.
3. Engage the American Academy of Pediatrics to formulate a policy