

ME/CFS and Long Covid What you need to know

A presentation by Dr Katrina Pears
Research Coordinator
The ME Association



meassociation.org.uk





WELCOME AN INTRODUCTION

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OVERVIEW



Medical Research



Evidence-based NICE Guideline



Expert Medical Opinion



Causation





Predisposing, precipitating, and perpetuating factors



Underlying disease process



https://meassociation.org. uk/1n2w



ME/CFS =

Myalgic Encephalomyelitis
Myalgic Encephalopathy
Chronic Fatigue Syndrome

Long Covid =

Post-Acute Sequelae of Covid-19 (PASC)

Long-term Covid Syndrome
Post-Covid-19 syndrome

PVFS=

Post Viral Fatigue Syndrome



Triggering Infection Viral or Bacterial

c.80% of people who develop

PVFS/ME/CFS can trace the onset

back to an infection that is often

acute.



Types of infection

Includes any infection from

Epstein Barr (Glandular Fever) to
Influenza (The Flu) to previous

Coronavirus outbreaks to Ebola in

ME/CFS and Covid-19 in Long

Covid.



Failure to Fully Recover

Research suggests c.5-10% of people acutely affected by a viral or bacterial infection are at risk of not recovering fully and developing a chronic disease state.



Post-Viral Fatigue Syndrome

Main symptoms often like the triggering infection with additional complications or damage often resulting in a loss of mobility and energy and an inability to perform previous activities with greater reliance on other people for help and

support.



Similarities



Debilitating physical and mental fatigue



Post-exertional malaise



Pain



Flu-like symptoms



Cognitive dysfunction



Dysautomnia



Sleep disturbances



Headaches



Poor temperature control



Sensory disturbances



Differences

Symptoms relating to organ damage from Covid-19 virus

Shortness of breath and/or cough

Chest pains

Heart-rhythm disturbances/arrhyth mias

Palpitations on exertion

Periodic fevers

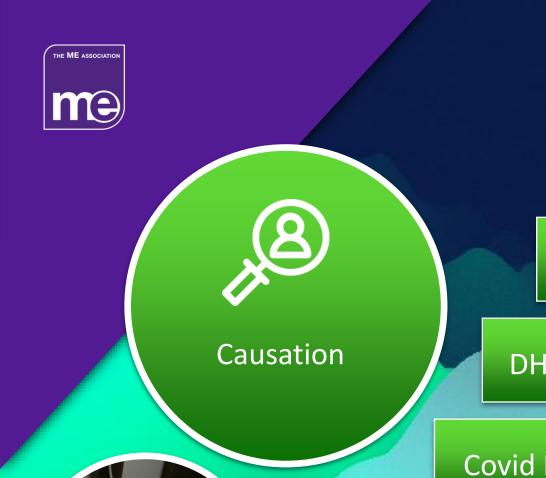


Loss of change of taste and/or smell

Abdominal pain and diarrhoea/IBS

Skin rashes and 'Covid toe'

Hair loss



Medical debate



NICE Guideline



DHSC Delivery Plan



Covid Pandemic & Long Covid



ME/CFS perpetuated by physical disease process





Predisposing, precipitating, and perpetuating factors

Is ME/CFS and Long Covid a 3-stage illness?

1. Predisposing

- a genetic predisposition?

2. Precipitating

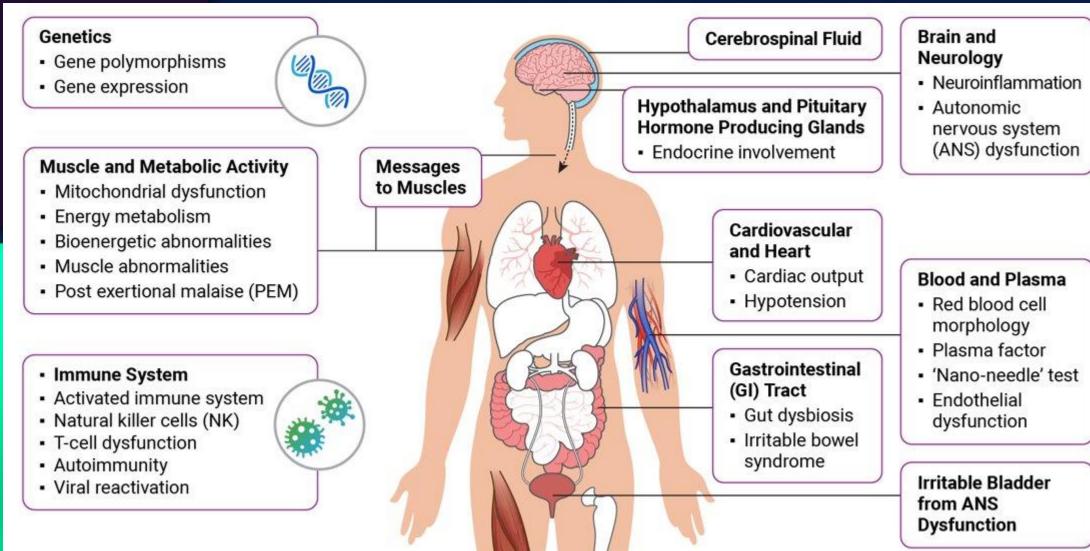
- a triggering event
- infection e.g. viral or bacterial
- other immune system stressors
- failure to fully recover

3. Perpetuating

- a complex interaction involving changes to the way in which the brain, nervous system, muscle, immune and endocrine systems respond to the triggering event













1. Brain: Neurology

Autonomic nervous system (ANS) dysfunction

Neuroinflammation

Central nervous system

Cerebrospinal fluid

Neuroimaging









2. Blood and Plasma

Red blood cell morphology

Plasma factor

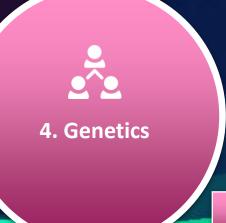
'Nano-needle' test

Endothelial dysfunction

Microclots







Gene polymorphisms

Gene expression

DecodeME

Epigenetic profiling -> EpiSwitch®



Source: DecodeME collaboration 2025 'Initial findings from the DecodeME genome-wide association study of myalgic encephalomyelitis/chronic fatigue syndrome'. https://meassociation.org.uk/bur1

Hunter et al. Development and validation of blood-based diagnostic biomarkers for Myalgic Encephalomyelitis/Chronic Fatigue Syndrome (ME/CFS) using EpiSwitch® 3-dimensional genomic regulatory immuno-genetic profiling. https://meassociation.org.uk/7bnj











5. Gut microbiome

Gut dysbiosis



6. Heart

Cardiac output

Hypotension



LOVE IS EN





7. Immune System

Activated immune system and cytokines

Natural killer cells (NK)

T-cell dysfunction

Autoimmunity

Viral reactivation



8. Metabolism

Metabolic pathways



9. Mitochondria, cellular bioenergetics and exercise physiology

Energy, or a lack thereof, is a significant concern in ME/CFS and Long Covid.

Mitochondrial dysfunction

Energy metabolism pathways

Bioenergetic abnormalities

Muscle abnormalities

Post-Exertional Malaise (PEM)





Advancing ME/CFS and Long Covid research

much larger studies to see more definitive research and the removal of any false positives.

well-defined patient cohorts and greater use of sedentary and other relevant controls.

to have a greater representation of all illness severities.

to identify subgroups.

to use new investigative techniques.

collaboration between different specialties to see the 'whole picture'.







Advancing ME/CFS and Long Covid research

Ramsay Research Fund (RRF) Invest in biomedical research.

Over £4m in the last 40 years.

Average investment of £108,000 a year.

Largest investment into a single study in 2025.





CONCLUSION

ME/CFS and Long Covid is a complex, multi-system disease triggered by an immune system stressor and perpetuated by various changes in the brain, nervous system, muscle, immune and endocrine systems.

We need a better understanding of the underlying disease pathways.

Important discoveries have emerged that need replicating in larger research studies.

Research offers the best chance of improving the lives of people affected by this disease and of preventing it occurring in the future.

The Covid-19 pandemic and Long Covid. Are ME/CFS and Long Covid the same condition?



The ME Association: changing attitudes and improving lives...

The ME Association provides:

Vital Support

Reliable Information

Medical Training

Effective Campaigning

Research Investment

How to contact us:

Email: feedback@meassociation.org.ul

Call: 01280 818 963

Social Media:

Facebook.../meassociation
Instagram./meassociation
Twitter...@meassociation
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YouTube.../MEAssociationUKCharity









Any Questions?

Thank you for listening

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The ME Association: changing attitudes and improving lives...

Booklet- What do you need to know about ME/CFS



https://meassociation.org. uk/1n2w Booklet- Long Covid and ME/CFS – Are they the same condition?



https://meassociation.org.uk/pluz

MEA Research Review: Post-Exertional Malaise (PEM) in ME/CFS and Long Covid



https://meassociation.org.uk/3h01

MEA Research Review:
Reactivation of human
herpesviruses and their role
in ME/CFS and Long Covid



https://meassociation.org.uk/