

The Efficacy of NES in the Treatment of ME/CFS

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'If you have Chronic Fatigue Syndrome (CFS), Fibromyalgia Syndrome (FMS), Myalgic Encephalomyelitis (ME) or another disabling fatigue state, you have been through a difficult journey. I remember being told I was depressed. I was depressed. I was unable to function. Most people with Chronic Fatigue Syndrome have to struggle to get compassion and understanding'.

(Jacob Teitelbaum, From Fatigued to Fantastic! 2007)

Aim of Study

The aim was to evaluate NES treatment in reducing the subjective symptoms of ME/CFS.

Introduction:

Myalgic Encephalomyelitis/Chronic Fatigue Syndrome (ME/CFS) is a debilitating, often relapsing illness, affecting approximately a quarter of a million people in the UK (1), with similar rates of incidence in Europe, USA, New Zealand and Australia. Studies have shown that most sufferers are unable to work to full capacity (2), and that 25% are severely disabled with some house/bed-bound.

Early reports, dating from 1934, described epidemics of the illness—such as the 1955 outbreak at the Royal Free Hospital in London—but endemic (sporadic) cases are now more common. The World Health Organisation's International Classification of Disease lists ME/CFS as a disorder of the nervous system, under Post-Viral Fatigue Syndrome. A report to the Chief Medical Officer of England in 2002 stated that ME/CFS "is a genuine illness and imposes a substantial burden on the health of the UK population. Improvement of health and social care for people affected by the condition is an urgent challenge."

The cause of ME is still unknown, but there is unlikely to be one single causative agent. The early epidemics appear to have been triggered by an outbreak of an infection with enteric organisms or poliovirus which then subsided, and many patients report an infectious onset to their illness. However, in others, there may have been a variety of contributing factors— infectious, traumatic, environmental and endogenous— all of which can lead on to a condition which shares a set of common symptoms. There is currently no cure or effective treatment for the illness.

Symptoms of ME/CFS

CFS/ME is a debilitating and complex disorder characterised by profound fatigue that is not improved by bed rest and that may be worsened by physical or mental activity (3). The main symptoms of ME/CFS are post-exertional loss of muscle power; muscle pain that may include tenderness and swelling; physical and mental exhaustion following normal activities; and neurological signs. Patients are also prone to relapses which may take the form of recurrences of the original systemic illness, or fresh episodes of muscle weakness, neurological changes or well-defined cognitive problems. As with many chronic illnesses, fatigue may be present, but in ME patients the fatigue is post-exertion, often delayed, and quite unlike the 'fatigue' experienced by healthy people.

Personal Background of the Researcher

My interest in the efficacy of NES on the symptoms of ME-CFs stems from the fact that I was diagnosed with this debilitating condition in 1993.

After six months of feeling overwhelmingly exhausted to a level I had never experienced before while suffering flu symptoms, muscle weakness, mental fatigue and a range of other symptoms such as on-going headache. I was referred by my GP to the infectious diseases department at one of the Edinburgh hospitals. After many tests which all came back as clear, I was informed there was nothing that could be done to alleviate or treat my symptoms. In my determination to feel well once again, I could see no other way forward other than to try to find a solution to my condition via complementary therapies. I tried reflexology, herbalism, kinesiology, healing, acupuncture and nutritional therapy. All of these therapies provided short term relief but nothing lasting.

Then I ran into a friend who'd had ME/CFS. She looked and felt so well and she told me she had been having regular NES scans and taking the prescribed Infoceuticals. I was uplifted to see her look so well and thought perhaps I may have similar benefits if I tried NES for myself.

I found a practitioner in Scotland and began my first NES programme. Slowly but steadily all of the symptoms I had experienced for so long began to improve. I felt stronger, had more energy and clarity of mind including a return to an ease of word finding. I experienced refreshing sleep which had eluded me for many years. I generally felt a great improvement in all of the symptoms I'd experienced for so many years. This led me to decide to train to become a NES Health practitioner in order that I would be in a position to help others to reclaim their health.

The use of complementary therapies to treat ME/CFS

Many people with ME/CFS use complementary therapies as a method of managing or improving their symptoms. Therapies reportedly used are acupuncture, homeopathy, osteopathy, herbalism and naturopathy.

The Medical Research Council (MRC) has compiled a comprehensive literature review relating to ME/CFS for the period January 2004 – June 2009. This was based on a Scopus search using the following search terms: CFS/ME AND chronic fatigue syndrome and myalgic encephalomyelitis and myalgic encephalopathy.

NES Health and ME/CFS

When a person is diagnosed with ME/CFS there have invariably been years of frustration for the individual in trying to find relief from the puzzling assortment of symptoms that come with the condition. Some people spend years trying to find out what is wrong with them. When a doctor is found who acknowledges the problem and gives it a name it is expected that the doctor will be able to provide a drug to ease the symptoms. Indeed there may be prescribed painkillers for the pain and antidepressants for the mood disorder, but such conventional drugs produce their temporary relief only at the cost of side effects and considerable toxicity. (Goldberg and Trivieri 2004).

Conventional medical research seems, as it is with most illnesses, capable only of focusing on the search for that single cause that will then yield the mythical

'magic bullet' cure (Burton Goldberg , Larry Trivieri Junior 2004). This isn't the way that alternative medicine sets about dealing with a complex illness such as ME-CFS. In order to achieve a successful outcome, one must consider the body as a whole (Goldberg and Trivieri 2004).

NES Health recognises the human body to be 'complex energy system that serves as a master control system for the biochemical body. To be truly healthy-to achieve long lasting wellness- we need to correct distortion and blockages in the complex energy structure that is the human body field (Decoding the human Body Field Fraser and Massey 2008).

Although there has been some improvement over the past twenty years one of the most difficult problems in our society is the lack of understanding of the nature of ME-CFS.

Since people with symptoms produced by ME/CFS do not return to state of good health with the use of pharmaceutical medicines another approach is required to solve the unexplained quandary.



EDMESH

EDMESH is a registered charity which is an Edinburgh based self-help group for people with a diagnosis of ME/CFS. There are 210 members who provide mutual support through the regular newsletter, Facebook, social meetings, and coffee meetings. The participants for the study were drawn from the members of EDMESH (Edinburgh ME Self Help Group).

Method

Description of the sample

The initial sample group consisted of 17 individuals (16 female and 1 male) with an age range of 28-81. All had a diagnosis of ME/CFS, resided in the Edinburgh area and were members of the Edinburgh ME Self Help Group (EDMESH). The participants had all retired from work on medical grounds post diagnosis of ME/CFS.

A total of nine individuals from the initial group completed all stages of the trial – all were female with an age range of 36-42 (mean age 56). Eight out of the nine final participants had been employed in the within the National Health Service. Withdrawals were due to pregnancy, moving away from Edinburgh and a decision by one individual to start another complementary therapy.

Description of the Instruments:

Self-assessment which includes -

- Health Questionnaire (medical and family history)
- Criteria for Diagnosis of ME/CFS Form
- MYMOP2 Form
- Socio Demographic Questionnaire
- Consent Form

Each participant was asked to complete a form to identify any of the symptoms listed on the Control for Diagnosis of ME/CFS as drawn up by the Centres for Disease Control as defined in 1988 and revised in 2001. The Centres for Disease Control's list of criteria specifies eight symptoms. Participant in the trial needed to be experiencing four or more of the identified symptoms for six consecutive months prior to starting the NES protocol intervention.

Each participant completed a socio demographic questionnaire.

Each participant completed a MYMOP questionnaire (Measure Yourself Medical Outcome Profile) at the beginning of the study and completed a follow up MYMOP questionnaire after completing the study. MYMOP is a patient-generated outcome questionnaire. It is symptom-specific and is applicable to all patients who present with symptoms which can

be physical, emotional or social. It is brief and simple to administer.

Following the initial consultation assessment, participants were scanned via the NES ProVision software. From the scan obtained each participant received a treatment plan indicating the quantity of Infoceuticals required for each 30 day period. Each participant was given a copy of the book 'Healing Yourself and Others by Mastering Energy and Information' and the CD 'Body Field Sound Healing', both supplied by NES Health.

Each participant had four NES scans and was prescribed four Infoceuticals after each session following the Sensitive NES Programme. The participants were informed that there would be between one and five Infoceuticals prescribed depending on the individual scan. After a period of one month each participant was advised to contact the researcher to arrange a further appointment and a further assessment of the Infoceutical programme.

Results

- There was an overall improvement for all symptoms and activities.
- Six individuals noted improvement in activities and three were neutral. The greatest improvement was by a factor of 4.
- Six individual noted a positive improvement in symptoms, three were neutral and two were negative. The greatest improvement over both symptoms was by a factor of 5.
- There was no significant difference in the degree of the improvement seen and the age of the subject or length of time with the diagnosis.
- Two of the subjects out of 3 subjects taking medication were able to reduce concurrent medication during the trial period.
- Three of the subjects have continued to have regular NES scans and Infoceutical programmes after the end of the study as they feel they are making real progress in alleviating symptoms and improving their general well-being.

Conclusion

These results show that the majority of participants experienced improvement in both symptoms and activities over the course of the study. Although small scale, the results of this study were very promising. Three of the subjects have opted to continue with the protocol due to changes in their health, and out of the other 6 case studies, there were confounding factors such as serious dental work and pressure to return to work early - that would have influenced the outcome. This study provides a foundation for the exploration of NES as a complementary therapy in the reduction of negative symptoms of ME/CFS.

Full details of this study available on request, please mail research@neshealth.com

Reference

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2. Ross SD, Estok RP, Frame D, Stone LR, Ludensky V, Levine CB (2004). "Disability and chronic fatigue syndrome: a focus on function.". *Arch Intern Med* 164 (10): 1098–107. doi:10.1001/archinte.164.10.1098. PMID 15159267. <http://archinte.ama-assn.org/cgi/content/full/164/10/1098>.
3. Centers for Disease Control and Prevention, <http://www.cdc.gov/cfs/>.