SCREENING FOR PEM/PESE

Is your patient not responding to traditional therapy approaches?  
Do they express an inability to do the things they once tolerated?  
Do they no longer tolerate exercise?

Taking a thorough subjective history and asking these questions can help you to identify patients who experience post-exertional malaise or exertion intolerance. There are evidence-based questionnaires that can aid you in this process.

SCREENING TO IDENTIFY PEM/PESE
Even if your patient presents with a fatiguing disease (cancer, cardiovascular, COPD, depression, etc.), you still need to screen for PEM/PESE. Screening is quick and can help you effectively treat your patient.

Clinical Screening Decision Tree for ME/CFS and LC

![Decision Tree Diagram]

During evaluations and treatments, it is imperative to avoid triggering PEM/PESE. Check in with the patient often and allow them to guide the intensity/duration of the visit.
SCREENING FOR PEM/PESE

PEM/PESE known or ME/CFS or LC diagnosed: patient may not yet understand PEM/PESE.
• Review past medical history (PMH) and prepare BRIEF clarifying questions regarding PEM/PESE triggers: what task and duration triggers, what symptoms manifest, what is the recovery time?

PEM/PESE unidentified: look and listen for
• Complex PMH- orthostatic intolerance, fibromyalgia, Ehlers-Danlos Syndrome, migraine, mast cell activation syndrome (MCAS), chronic pain, GI issues
• History of viral/bacterial infections – EBV (Mono), LCM, Ebola, SARS, DENV, tick-borne disease, etc.

Patient reports:
• I never recovered after the flu
• Activity makes me worse
• After a week of work/school I need the weekend to recover
• Sleep doesn’t make me better/sleep is non restoring
• Exercise level has plateaued or worsened/feel sick after exercise

Can’t tolerate activity anymore
Feel like I “crash” after doing _____
Limbs feel like cement
Always feel exhausted

SCREENING TOOLS FOR PEM/PESE

US ME/CFS Clinician Coalition:
• What happens when you engage in normal (previously tolerated) physical/cognitive exertion/activity?
• How much activity does it take to make you feel ill or trigger illness worsening?
• How long does it take to recover from physical/cognitive effort?
• Do you avoid or change certain activities because of what happens after you do them?

Workwell Foundation (PDF):
• Do you experience severe fatigue with at least 3 symptoms in the categories below
  ◦ Feel unwell
  ◦ Feel weak
  ◦ Don’t sleep well
  ◦ Have pain
  ◦ Does it take a day or more to recover from exertion?
### DePaul Symptom Questionnaire PEM Short Form (PDF)

#### Symptom

<table>
<thead>
<tr>
<th>Symptom</th>
<th>Frequency</th>
<th>Severity</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Throughout the past 6 months, how often have you had this symptom?</td>
<td>Throughout the past 6 months, how much has this symptom bothered you?</td>
</tr>
<tr>
<td></td>
<td>For each symptom listed below, circle a number from:</td>
<td>For each symptom listed below, circle a number from:</td>
</tr>
<tr>
<td></td>
<td>0 = none of the time</td>
<td>0 = symptom not present</td>
</tr>
<tr>
<td></td>
<td>1 = a little of the time</td>
<td>1 = mild</td>
</tr>
<tr>
<td></td>
<td>2 = about half the time</td>
<td>2 = moderate</td>
</tr>
<tr>
<td></td>
<td>3 = most of the time</td>
<td>3 = severe</td>
</tr>
<tr>
<td></td>
<td>4 = all of the time</td>
<td>4 = very severe</td>
</tr>
<tr>
<td>1. Dead, heavy feeling after starting to exercise</td>
<td>0 1 2 3 4</td>
<td>0 1 2 3 4</td>
</tr>
<tr>
<td>2. Next day soreness or fatigue after non-strenuous, everyday activities</td>
<td>0 1 2 3 4</td>
<td>0 1 2 3 4</td>
</tr>
<tr>
<td>3. Mentally tired after the slightest effort</td>
<td>0 1 2 3 4</td>
<td>0 1 2 3 4</td>
</tr>
<tr>
<td>4. Minimum exercise makes you physically tired</td>
<td>0 1 2 3 4</td>
<td>0 1 2 3 4</td>
</tr>
<tr>
<td>5. Physically drained or sick after mild activity</td>
<td>0 1 2 3 4</td>
<td>0 1 2 3 4</td>
</tr>
</tbody>
</table>

#### DSQ-PEM Scoring

**Scoring Step 1**
- Items 1–5: A frequency and severity score of 2, 2 on any.
- Items 1–5 is indicative of PEM.

**Scoring Step 2**
- Items 7,8: Either item 7 or 8 must have an answer of yes to indicate an ME and/or CFS dx.
- Item 9: A response of >14 h is needed to indicate an ME and/or CFS dx.
- Items 6,10: Neither item indicates an ME and/or CFS diagnosis, but provides a description of patient PEM for clinical evaluations.

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Co-authored by professional ME/CFS rehabilitation clinicians.