

THE NATIONAL HOSPITALS
FOR NERVOUS DISEASES

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Dr. G.P. Holmes,
Medical Epidemiologist,
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Center for Infectious Diseases,
Public Health Service Center for Disease Control,
Atlanta,
Georgia 30333

Dear Dr. Holmes,

✓ Thank you very much for your prompt and courteous reply to my recent letter. It is obviously excellent news that the CDC are initiating a case control study of the chronic fatigue syndrome as this is precisely the type of research that is needed. However, there is one particular point that I think is still in need of clarification. I note that your case definition will exclude cases of major depression which is I think appropriate. ✓ However, in our study of chronic fatigue, and also that of Peter Manu in Connecticut, 65% of cases who satisfy standard operational criteria for CFS also achieve RDC psychiatric diagnoses, of which the majority are affective. Even if major depression is excluded, that still leaves nearly a majority of cases that satisfy RDC criteria for minor depressive illness. Given that the diagnosis of major depression is really only a symptom checklist, I think that you will have very great difficulty making the separation. I am enclosing a brief review that I have just completed which explains this argument in more detail.

A further point of interest is that we are currently finding that there is really no evidence whatsoever for a peripheral disorder in these patients, a fact confirmed by Lloyd and his colleagues in Australia. Our thinking is that CFS is a clinical condition, and one that is going to be very difficult to separate from affective disorder, and indeed may in fact be a closely related condition. Therefore, matters of case definition are by no means trivial.

I am actually on a Training Fellowship in epidemiology, and hope to be going to the WHO conference on viral immunity and mental health in Montreal in October. It would certainly be very helpful for me to be able to discuss these points further if you are going to be at that meeting. I am also going to be visiting various centres specialising in psychiatric epidemiology in December; perhaps our paths may cross then instead.

Once again many thanks for your courteous reply, I certainly find it reassuring that at last serious epidemiological work is being undertaken. With every best wish.

Yours sincerely,

Simon Wessely

Simon Wessely, Senior Registrar.

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