Margaret Williams asks Trudie Chalder some questions arising from the item promoted by the charity Action for ME in today's Times

2nd February 2004

In the item in today's Times (Fit to fight fatigue by Peta Bee: Times 2: 2nd February 2004), Trudie Chalder is quoted as saying "The psychological benefits of following a fitness routine for people with CFS are great".

We know that CFS equates with ME because the article says so.

We also know that Ms Chalder, a Registered Mental Nurse who obtained a PhD, is described as "one of the experts heading the research" and that Ms Chalder claims there is "growing evidence from previous small studies that progressive physical activity sessions are helpful".

Crucially, Ms Chalder is also quoted as saying "By incorporating exercise, muscles get stronger, which aids recovery".

The questions for Ms Chalder are these:

1. As an expert on CFS/ME, on what grounds does she ignore the convincing laboratory evidence that these patients reach exhaustion more quickly than normal subjects, as confirmed by ^{31}P NMR, which provides positive evidence of defective oxidative capacity by monitoring ATP in tissues? How does exercise make muscles stronger in such patients?

2. As an expert, why does she ignore the evidence of world-class expert Paul Cheney, Professor of Medicine, who, with regard to activity in ME/CFS patients, is on record as advising "The most important thing about exercise is not to have (patients) do aerobic exercise. Even progressive exercise, especially in phase one and possibly in other phases, is counter-productive. If you have a defect in mitochondrial function and you push the mitochondria by exercise, you kill the DNA". On what evidence does she rely to refute the evidence of Professor Cheney?

3. As an expert, why does she ignore the compelling evidence of persistent enterovirus in skeletal muscle of some patients with ME/CFS? On what evidence does she rely to refute the fact that this is entirely consistent with delayed recovery of muscle power after exertion? On what evidence does she rely that

refutes the well-documented effects of compulsory exercise in such patients, particularly on the heart?

4. As an expert, why does she ignore the documented consequences of total depletion of glutathione synthesis that results in rapid endogenous viral replication, causing energy loss and detoxification failure at cell level in these patients? On what evidence does she rely to refute the evidence that if glutathione deficiency drops low enough, the cells simply die an apoptotic death?
5. As an expert, by what means is she certain that she is looking at patients with ME/CFS, and by what means does she differentiate them from those with chronic tiredness, given that neither the 1991 Oxford criteria nor the 1994 CDC criteria selects those with ME?

6. As an expert, is she yet aware of the paper by Professor Leonard Jason et al that says it is inappropriate to synthesize results from studies of this disorder which use different definitions to select study populations? (A Comparison of Diagnostic Criteria. Evaluation and the Health Professions In press).

The ME community asks Ms Chalder as an expert to answer these questions fully and promptly.

Finally, some questions for the charity Action for ME about which clarification is requested:

a) Is the charity aware of the evidence mentioned above?

b) If so, on what grounds does the charity refute that evidence?

c) If it is not aware of that evidence, then in order for it to act in accordance with its objective statement to the Charity Commission (ie. in the best interest of those with myalgic encephalomyelitis), ought not the charity to be aware of that evidence?

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