

## Analysis of NIH-Funded Research on Chronic Fatigue Syndrome Shows a Trend of Decreased Support Fiscal Years 1999-2003

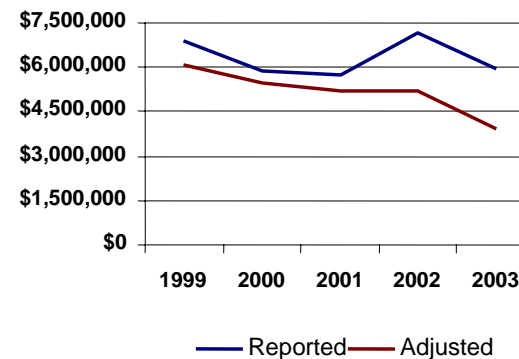
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### Overview

Information obtained from the National Institutes of Health's budget office indicates that over a five-year period, from FY99-03, a total of \$31.6 million supported studies of chronic fatigue syndrome (CFS, also known as chronic fatigue and immune dysfunction syndrome or CFIDS). This amount is extremely low given the prevalence, serious nature and economic impact of CFS.

The titles of some of the funded research projects provided by the budget office did not appear to relate to CFS, calling for a more detailed review by the CFIDS Association of America. Additional research, including discussions with NIH program officers and principal investigators and searches of NIH's CRISP database and the published scientific literature, was conducted over the past several months. These efforts showed that about \$5.2 million (12 of 76 projects) appear to have been misclassified as CFS research. Another \$1 million (9 additional projects) were found to support studies of conditions similar to CFS, but diagnostically distinct. Adjusting for both types of misclassification of research funding, the amount NIH spent on CFS research thus drops to \$26 million. If yearly CFS budget figures were adjusted for inflation, the essentially stagnant five-year funding trend would become a trend of decreasing support. This is particularly distressing when one considers that NIH's overall funding increased by an enormous 76% during this period and that Congress has consistently directed NIH to expand its CFS research portfolio.

**Reported vs. Adjusted CFS Funding**



CFS warrants a considerably more robust research investment from NIH, the world's largest biomedical research institution. CFS affects approximately 800,000 American adults and costs the U.S. economy \$9.1 billion a year in lost productivity. Although CFS is severely disabling, 80% of Americans who have the illness are not appropriately diagnosed or cared for by medical professionals. There is still no diagnostic marker and treatment is limited to symptom relief, largely as a consequence of insufficient research. This analysis of NIH funding for CFS research provides detailed descriptions of how budget adjustments were performed, charts research trends and includes recommendations from the CFIDS Association of America, the nation's leading organization working to conquer CFS.