



Department
of Health &
Social Care

*From Helen Whately MP
Minister of State for Care*

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The Rt Hon Sir George Howarth MP
By email to: george.howarth.mp@parliament.uk

6 November 2020

Dear Sir George,

Thank you for your correspondence of 17 July to Matt Hancock on behalf of a number of your constituents about graded exercise therapy (GET) for chronic fatigue syndrome/myalgic encephalomyelitis (CFS/ME) patients.

Because of the unprecedented situation caused by the coronavirus pandemic, I am not able to reply to every individual letter personally.

This is not what I would wish; however, in order to prevent further delay to you, I have asked the Department's Head of Correspondence to reply on my behalf and her reply is enclosed.

I hope Ms Turner's reply is helpful.

Kind regards,

HELEN WHATELY



Department
of Health &
Social Care

From Marie Turner
Head of Ministerial Correspondence and Public Enquiries

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Dear Sir George,

Thank you for your correspondence of 17 July to Matt Hancock on behalf of a number of your constituents about graded exercise therapy (GET) for chronic fatigue syndrome/myalgic encephalomyelitis (CFS/ME) patients. I have been asked to reply and I apologise for the delay in doing so, which has been caused by an unprecedented volume of correspondence in recent months.

Ministers recognise that CFS/ME can be a debilitating condition and completely understand concerns about access to effective treatment.

The National Institute for Health and Care Excellence (NICE) is the independent body responsible for developing evidence-based guidance, in consultation with expert groups, for the NHS and is best placed to make recommendations on the diagnosis, treatment and care support of people with CFS/ME.

As your constituents know, the NICE clinical guidelines on the management of CFS/ME in adults and children set out best practice for the care, treatment and support of patients. The guidance recommends cognitive behavioural therapy (CBT) and GET as appropriate treatments for mild to moderate CFS/ME, in line with the best available evidence. The research evidence reviewed to support the guidance found that CBT and GET were safe, with no serious reactions in any groups. More information on this guidance can be found at www.nice.org.uk by searching for 'CG53'.

However, the NICE guidance acknowledges that there is no universal treatment to suit every patient, and that treatment and care should take into account the personal needs and preferences of the patient. It also makes clear that, in common with all people receiving care from the NHS, those with CFS/ME have the right to refuse or withdraw from any component of their care plan.

On 20 September 2017, NICE announced its decision to undertake a full update of its CFS/ME guidelines, following a review of the latest available evidence on the diagnosis and management of the condition and a public consultation. This will set the direction for best practice in this area and is due for publication in April 2021.

I understand your constituents' concerns about recovery from COVID-19 and the development and treatment of CFS/ME. I would like to assure them that the Government is committed to providing appropriate treatment for people with CFS/ME. The Your COVID Recovery resource, launched by NHS England on 5 July, is an online tool being developed in two phases. Phase 1 enables patients and their families/carers to access further information around recovering post-COVID. It provides a holistic approach to health and wellbeing and includes information on areas such as mental health and wellbeing, physical strength and returning to work. Phase 1 was clinically led and developed by rehabilitation experts, with the support of patients recovering from COVID-19. It is available online at www.yourcovidrecovery.nhs.uk and aims to cover all aspects of care following an individual having had COVID-19, either at home or in hospital.

Phase 2 of Your COVID Recovery will be the 'virtual rehabilitation' aspect of the platform and will be launched later this year. It will be available to people who are assessed and referred by a healthcare professional, so that only patients who are able to benefit from the virtual rehabilitation programme are referred to it.

Your COVID Recovery is drawing on the best available evidence on COVID-19 and will evolve as the evidence base develops.

I hope this reply is helpful.

Kind regards,

A handwritten signature in black ink, appearing to read 'M. Turner', with a stylized, cursive script.

MARIE TURNER