

A. Clinical Scenarios Questionnaire 1 to the GDG December 2005 CFS/ME Clinical Scenarios ratings Sheet

Explanation and Instructions:

The clinical scenarios have been developed from the information contained in the systematic review and are primarily structured around the CUES of Severity and Age. There is a pick list column along the right hand side of this spread-sheet containing a numerical agreement scale (1-9) and what these numbers will represent (**rating column is highlighted in pink**).

Using the evidence you have read in the systematic review, the GDG discussions and your personal expertise, you need to read the clinical scenarios and rate your agreement with them. To do this, click on the box to the right of this spreadsheet (**in pink**) and a drop down tab will appear. Using this tab you will need to select a numerical representation of your opinion.

ASSUMPTIONS: please refer to the detailed instruction sheet 'Information and Instructions for filling out the questionnaire' (word.doc) for all assumptions and definitions to be used when filling out this questionnaire.

After rating the scenarios, please SAVE the changes to the spreadsheet and e-mail it back to ncostin@rcgp.org.uk

Clinical Scenarios

Section 1 Diagnosis, investigations and referral

Diagnosis

Fatigue indicative of CFS/ME an **adult** is.....

1. persistent and/or recurrent
2. unexplained by mental or physical conditions

3. results in substantial reduction in previous activity levels
4. post-exertion malaise and/or fatigue (often delayed with slow recovery)

Other symptoms indicative of CFS/ME in an adult can, but not necessarily always, include....

1. Difficult with sleeping (e.g. early morning waking, insomnia, hypersomnia, unrefreshing sleep, disturbed sleep/wake cycle)
2. Muscles and/or joint pain
3. Significant headaches of new type, pattern or severity
4. Painful lymph nodes
5. Sore throat
6. Cognitive Impairment for example confusion, difficulty thinking, inability to concentrate, impairment of short-term memory, word-finding difficulty, inability to plan/organise thoughts, spatial disorientation, difficulty with information processing
7. Physical or mental exertion making symptoms worse
8. Recurrent flu-like symptoms
9. Neuro-endocrine symptoms e.g. orthostatic intolerance, nausea and palpitations
10. Autonomic symptoms e.g. loss of thermostatic stability and marked weight change

After ruling out other possible likely causes of the symptoms, a diagnosis of CFS/ME should be made in an adult.....

1. After symptoms have persisted for 6 weeks
2. After symptoms have persisted for 4 months
3. After symptoms have persisted for 6 months

Fatigue indicative of CFS/ME in a child is....

1. persistent and/or recurrent
2. unexplained by mental or physical conditions
3. results in substantial reduction in previous activity levels
4. post-exertional malaise and/or fatigue (often delayed with slow recovery)

Other symptoms indicative of CFS/ME in a child can, but not necessarily always, include.....

1. Difficult with sleeping (e.g. early morning waking, insomnia, hypersomnia, unrefreshing sleep, disturbed sleep/wake cycle)
2. Muscles and/or joint pain
3. Significant headaches of new type, pattern or severity
4. Painful lymph nodes
5. Sore throat
6. Cognitive Impairment for example confusion, difficulty thinking, inability to concentrate, impairment of short-term memory, word-finding difficulty, inability to plan/organise thoughts, spatial disorientation, difficulty with information processing
7. Physical or mental exertion making symptoms worse
8. Recurrent flu-like symptoms
9. Neuro-endocrine symptoms e.g. orthostatic intolerance and palpitations
10. Autonomic symptoms e.g. loss of thermostatic stability and marked weight change

After ruling out other possible likely causes of the symptoms, a diagnosis of CFS/ME should be made in a **child....**

1. After symptoms have persisted for 6 weeks
2. After symptoms have persisted for 4 months
3. After symptoms have persisted for 6 months

Investigations

The following investigations or examinations are appropriate for an **adult....**

1. The head up tilt test
2. Neurological exam
3. Auditory brainstem responses
4. Electrodermal conductivity
5. Urinalysis for protein, blood, glucose
6. ECG if there are cardiological symptoms
7. Endoscopy if there are gastro-intestinal (gut) symptoms
8. Allergy test if there are gastro-intestinal (gut) symptoms
9. Blood tests
 - a. five laboratory tests (fibrinogen, prothrombin fragment 1+2, thrombin-anti-thrombin complexes, soluble fibrin monomer (SFM) and platelet activation (CD62P, ADP))
 - b. Circulating red blood cell volume
 - c. Erythrocyte sedimentation rate
 - d. C-reactive protein

- e. Electrophoresis
- f. Ferritin
- g. B12
- h. Folate
- i. Cholesterol
- j. Liver Function Tests
- k. Lactate dehydrogenase
- l. Thyroid Function Tests
- m. Calcium
- n. General virus serology, including heterophile antibody tests for Infectious Mononucleosis
- o. Serology for chronic virus infections: HIV, hepatitis B & C
- p. Serology for chronic bacterial infections e.g. borelliosis
- q. Serology for latent infections: toxoplasma, EBV (Epstein Barr virus), CMV (cytomegalovirus).

The following investigations or examinations are appropriate for a child....

1. The head up tilt test
2. Neurological exam
3. Auditory brainstem responses
4. Electrodermal conductivity
5. Urinalysis for protein, blood, glucose
- 6. ECG** if there are cardiological symptoms
- 7. Endoscopy** if there are gastro-intestinal (gut) symptoms
- 8. Allergy test** if there are gastro-intestinal (gut) symptoms

9. Blood tests

- a. five laboratory tests (fibrinogen, prothrombin fragment 1+2, thrombin-anti-thrombin complexes, soluble fibrin monomer (SFM) and platelet activation (CD62P, ADP))
- b. Circulating red blood cell volume
- c. Erythrocyte sedimentation rate
- d. C-reactive protein
- e. Electrophoresis
- f. Ferritin
- g. B12
- h. Folate
- i. Cholesterol
- j. Liver Function Tests
- k. Lactate dehydrogenase
- l. Thyroid Function Tests
- m. Calcium
- n. General virus serology, including heterophile antibody tests for Infectious Mononucleosis
- o. Serology for chronic virus infections: HIV, hepatitis B & C
- p. Serology for chronic bacterial infections e.g. borelliosis
- q. Serology for latent infections: toxoplasma, EBV (Epstein Barr virus), CMV (cytomegalovirus).

Referral

For an **adult with mild CFS/ME symptoms a referral to specialist care is appropriate....**

1. As soon as symptoms occur
2. After symptoms have persisted for 3 weeks
3. After symptoms have persisted for 6 weeks
4. After symptoms have persisted for 3 months
5. After symptoms have persisted for 6 months

For an **adult with moderate CFS/ME symptoms a referral to specialist care is appropriate....**

1. As soon as symptoms occur
2. After symptoms have persisted for 3 weeks
3. After symptoms have persisted for 6 weeks
4. After symptoms have persisted for 3 months
5. After symptoms have persisted for 6 months

For an **adult with severe CFS/ME symptoms a referral to specialist care is appropriate....**

1. As soon as symptoms occur
2. After symptoms have persisted for 3 weeks
3. After symptoms have persisted for 6 weeks
4. After symptoms have persisted for 3 months
5. After symptoms have persisted for 6 months

For a **child with mild CFS/ME symptoms a referral to specialist care is appropriate....**

1. As soon as symptoms occur
2. After symptoms have persisted for 3 weeks
3. After symptoms have persisted for 6 weeks
4. After symptoms have persisted for 3 months
5. After symptoms have persisted for 6 months

For a **child with moderate CFS/ME symptoms a referral to specialist care is appropriate....**

1. As soon as symptoms occur
2. After symptoms have persisted for 3 weeks
3. After symptoms have persisted for 6 weeks
4. After symptoms have persisted for 3 months
5. After symptoms have persisted for 6 months

For a **child with severe CFS/ME symptoms a referral to specialist care is appropriate....**

1. As soon as symptoms occur
2. After symptoms have persisted for 3 weeks
3. After symptoms have persisted for 6 weeks
4. After symptoms have persisted for 3 months
5. After symptoms have persisted for 6 months

Section 2 Pharmacological interventions

The use of Thyroxine where the individual has LOW thyroxine levels is appropriate....

1. for adults with CFS/ME with mild symptoms
2. for adults with CFS/ME with moderate symptoms
3. for adults with CFS/ME with severe symptoms
4. for children with CFS/ME with mild symptoms
5. for children with CFS/ME with moderate symptoms
6. for children with CFS/ME with severe symptoms

The use of Thyroxine where the individual has NORMAL thyroxine levels is appropriate....

1. for adults with CFS/ME with mild symptoms
2. for adults with CFS/ME with moderate symptoms
3. for adults with CFS/ME with severe symptoms
4. for children with CFS/ME with mild symptoms
5. for children with CFS/ME with moderate symptoms
6. for children with CFS/ME with severe symptoms

The use of SSRIs where the individual is depressed is appropriate....

1. for adults with CFS/ME with mild symptoms
2. for adults with CFS/ME with moderate symptoms
3. for adults with CFS/ME with severe symptoms

The use of Tricyclics where the individual is depressed is appropriate....

1. for adults with CFS/ME with mild symptoms
2. for adults with CFS/ME with moderate symptoms
3. for adults with CFS/ME with severe symptoms
4. for children with CFS/ME with mild symptoms
5. for children with CFS/ME with moderate symptoms
6. for children with CFS/ME with severe symptoms

The use of Gabapentin where the individual is depressed is appropriate....

1. for adults with CFS/ME with mild symptoms
2. for adults with CFS/ME with moderate symptoms
3. for adults with CFS/ME with severe symptoms

The use of Monoamine oxidase inhibitors where the individual is depressed is appropriate....

1. for adults with CFS/ME with mild symptoms
2. for adults with CFS/ME with moderate symptoms

3. for adults with CFS/ME with severe symptoms
4. for children with CFS/ME with mild symptoms
5. for children with CFS/ME with moderate symptoms
6. for children with CFS/ME with severe symptoms

The use of Glucocorticoids (such as Hydrocortisone) where the individual's primary symptom is pain is appropriate....

1. for adults with CFS/ME with mild symptoms
2. for adults with CFS/ME with moderate symptoms
3. for adults with CFS/ME with severe symptoms

The use of Mineralocorticoids (such as Fludrocortisone) where the individual's primary symptom is pain is appropriate....

1. for adults with CFS/ME with mild symptoms
2. for adults with CFS/ME with moderate symptoms
3. for adults with CFS/ME with severe symptoms

The use of Dexamphetamine where the individual's primary symptom is fatigue is appropriate....

1. for adults with CFS/ME with mild symptoms
2. for adults with CFS/ME with moderate symptoms
3. for adults with CFS/ME with severe symptoms

The use of Methylphenidate where the individual's primary symptom is fatigue is appropriate....

1. for adults with CFS/ME with mild symptoms
2. for adults with CFS/ME with moderate symptoms
3. for adults with CFS/ME with severe symptoms
4. for children with CFS/ME with mild symptoms
5. for children with CFS/ME with moderate symptoms
6. for children with CFS/ME with severe symptoms

The use of Melatonin is appropriate....

1. for children with CFS/ME with mild symptoms
2. for children with CFS/ME with moderate symptoms
3. for children with CFS/ME with severe symptoms

The use of Anti-Herpes agents (such as Acyclovir) where the individual has had herpes viral infection is appropriate....

1. for adults with CFS/ME with mild symptoms
2. for adults with CFS/ME with moderate symptoms
3. for adults with CFS/ME with severe symptoms
4. for children with CFS/ME with mild symptoms
5. for children with CFS/ME with moderate symptoms
6. for children with CFS/ME with severe symptoms

The use of Anti-Herpes agents (such as Acyclovir) where the individual has NOT had herpes viral infection is appropriate....

1. for adults with CFS/ME with mild symptoms
2. for adults with CFS/ME with moderate symptoms
3. for adults with CFS/ME with severe symptoms
4. for children with CFS/ME with mild symptoms
5. for children with CFS/ME with moderate symptoms
6. for children with CFS/ME with severe symptoms

The use of gut anti-spasmodics (such as mebeverine, alverine and peppermint oil) where the individual has bowel symptoms is appropriate....

1. for adults with CFS/ME with mild symptoms
2. for adults with CFS/ME with moderate symptoms
3. for adults with CFS/ME with severe symptoms
4. for children with CFS/ME with mild symptoms
5. for children with CFS/ME with moderate symptoms
6. for children with CFS/ME with severe symptoms

The use of gut anti-spasmodics (such as mebeverine, alverine and peppermint oil) where the individual has NO bowel symptoms is appropriate....

1. for adults with CFS/ME with mild symptoms
2. for adults with CFS/ME with moderate symptoms
3. for adults with CFS/ME with severe symptoms
4. for children with CFS/ME with mild symptoms
5. for children with CFS/ME with moderate symptoms

6. for children with CFS/ME with severe symptoms

The use of skeletal anti-spasmodics (such as diazepam, baclofen, and clonazepam) where the individual has muscle pain, cramps or twitching is appropriate....

1. for adults with CFS/ME with mild symptoms

2. for adults with CFS/ME with moderate symptoms

3. for adults with CFS/ME with severe symptoms

4. for children with CFS/ME with mild symptoms

5. for children with CFS/ME with moderate symptoms

6. for children with CFS/ME with severe symptoms

The use of skeletal anti-spasmodics (such as diazepam, baclofen, and clonazepam) where the individual has NO muscle pain is appropriate....

1. for adults with CFS/ME with mild symptoms

2. for adults with CFS/ME with moderate symptoms

3. for adults with CFS/ME with severe symptoms

4. for children with CFS/ME with mild symptoms

5. for children with CFS/ME with moderate symptoms

6. for children with CFS/ME with severe symptoms

Section 3 Behavioural interventions

A programme consisting of a planned increases of aerobic exercise is appropriate....

1. for adults with CFS/ME with mild symptoms
2. for adults with CFS/ME with moderate symptoms
3. for adults with CFS/ME with severe symptoms
4. for children with CFS/ME with mild symptoms
5. for children with CFS/ME with moderate symptoms
6. for children with CFS/ME with severe symptoms

A programme which allows the person to find a baseline, followed by gradual and sustainable increases in activity/exercise (physical, emotional, cognitive) is appropriate....

1. for adults with CFS/ME with mild symptoms
2. for adults with CFS/ME with moderate symptoms
3. for adults with CFS/ME with severe symptoms
4. for children with CFS/ME with mild symptoms
5. for children with CFS/ME with moderate symptoms
6. for children with CFS/ME with severe symptoms

A programme based upon planned increases in duration of physical activity/exercise followed by increases in intensity leading to aerobic exercise is appropriate....

1. for adults with CFS/ME with mild symptoms
2. for adults with CFS/ME with moderate symptoms

3. for adults with CFS/ME with severe symptoms
4. for children with CFS/ME with mild symptoms
5. for children with CFS/ME with moderate symptoms
6. for children with CFS/ME with severe symptoms

A programme that encourages self management and builds on the skills of the individual is appropriate....

1. for adults with CFS/ME with mild symptoms
2. for adults with CFS/ME with moderate symptoms
3. for adults with CFS/ME with severe symptoms
4. for children with CFS/ME with mild symptoms
5. for children with CFS/ME with moderate symptoms
6. for children with CFS/ME with severe symptoms

A programme involving assessment and management of the emotional impact of CFS/ME is appropriate....

1. for adults with CFS/ME with mild symptoms
2. for adults with CFS/ME with moderate symptoms
3. for adults with CFS/ME with severe symptoms
4. for children with CFS/ME with mild symptoms
5. for children with CFS/ME with moderate symptoms
6. for children with CFS/ME with severe symptoms

Techniques that improve the quality of relaxation and restorative rest are appropriate....

1. for adults with CFS/ME with mild symptoms
2. for adults with CFS/ME with moderate symptoms
3. for adults with CFS/ME with severe symptoms
4. for children with CFS/ME with mild symptoms
5. for children with CFS/ME with moderate symptoms
6. for children with CFS/ME with severe symptoms

Setting an individually tailored self management strategy (with patient-centred goals) is appropriate....

1. for adults with CFS/ME with mild symptoms
2. for adults with CFS/ME with moderate symptoms
3. for adults with CFS/ME with severe symptoms
4. for children with CFS/ME with mild symptoms
5. for children with CFS/ME with moderate symptoms
6. for children with CFS/ME with severe symptoms

A strategy which consistently maintains activity levels at less than full capacity in order to have reserve energy for the body to heal itself is appropriate....

1. for adults with CFS/ME with mild symptoms
2. for adults with CFS/ME with moderate symptoms
3. for adults with CFS/ME with severe symptoms
4. for children with CFS/ME with mild symptoms

5. for children with CFS/ME with moderate symptoms
6. for children with CFS/ME with severe symptoms

A strategy which involves monitoring thoughts and discusses alternative cognitive or behavioural strategies is appropriate....

1. for adults with CFS/ME with mild symptoms
2. for adults with CFS/ME with moderate symptoms
3. for adults with CFS/ME with severe symptoms
4. for children with CFS/ME with mild symptoms
5. for children with CFS/ME with moderate symptoms
6. for children with CFS/ME with severe symptoms

A programme that encourages patients to extend their activity capacity is appropriate....

1. for adults with CFS/ME with mild symptoms
2. for adults with CFS/ME with moderate symptoms
3. for adults with CFS/ME with severe symptoms
4. for children with CFS/ME with mild symptoms
5. for children with CFS/ME with moderate symptoms
6. for children with CFS/ME with severe symptoms

Strategies to normalise sleep patterns are appropriate....

1. for adults with CFS/ME with mild symptoms
2. for adults with CFS/ME with moderate symptoms
3. for adults with CFS/ME with severe symptoms
4. for children with CFS/ME with mild symptoms
5. for children with CFS/ME with moderate symptoms
6. for children with CFS/ME with severe symptoms

Complete rest (doing nothing at all)(cognitive, physical and emotional) during significant (enough to worsen current activity ability) increases in symptoms (a 'set-back') is appropriate....

1. for adults with CFS/ME with mild symptoms
2. for adults with CFS/ME with moderate symptoms
3. for adults with CFS/ME with severe symptoms
4. for children with CFS/ME with mild symptoms
5. for children with CFS/ME with moderate symptoms
6. for children with CFS/ME with severe symptoms

Equipment and adaptations (e.g. a wheelchair) that allow patients to improve independence and quality of life should be provided....

1. for adults with CFS/ME with mild symptoms
2. for adults with CFS/ME with moderate symptoms
3. for adults with CFS/ME with severe symptoms
4. for children with CFS/ME with mild symptoms
5. for children with CFS/ME with moderate symptoms

6. for children with CFS/ME with severe symptoms

Graded Exercise Therapy (GET) is appropriate....

1. for adults with CFS/ME with mild symptoms
2. for adults with CFS/ME with moderate symptoms
3. for adults with CFS/ME with severe symptoms
4. for children with CFS/ME with mild symptoms
5. for children with CFS/ME with moderate symptoms
6. for children with CFS/ME with severe symptoms

Graded Activity Therapy (GAT) is appropriate....

1. for adults with CFS/ME with mild symptoms
2. for adults with CFS/ME with moderate symptoms
3. for adults with CFS/ME with severe symptoms
4. for children with CFS/ME with mild symptoms
5. for children with CFS/ME with moderate symptoms
6. for children with CFS/ME with severe symptoms

Pacing is appropriate....

1. for adults with CFS/ME with mild symptoms
2. for adults with CFS/ME with moderate symptoms

3. for adults with CFS/ME with severe symptoms
4. for children with CFS/ME with mild symptoms
5. for children with CFS/ME with moderate symptoms
6. for children with CFS/ME with severe symptoms

Individual (one on one) GET is appropriate....

1. for adults with CFS/ME with mild symptoms
2. for adults with CFS/ME with moderate symptoms
3. for adults with CFS/ME with severe symptoms
4. for children with CFS/ME with mild symptoms
5. for children with CFS/ME with moderate symptoms
6. for children with CFS/ME with severe symptoms

Individual (one on one) GAT is appropriate....

1. for adults with CFS/ME with mild symptoms
2. for adults with CFS/ME with moderate symptoms
3. for adults with CFS/ME with severe symptoms
4. for children with CFS/ME with mild symptoms
5. for children with CFS/ME with moderate symptoms
6. for children with CFS/ME with severe symptoms

Individual (one on one) pacing is appropriate....

1. for adults with CFS/ME with mild symptoms
2. for adults with CFS/ME with moderate symptoms
3. for adults with CFS/ME with severe symptoms
4. for children with CFS/ME with mild symptoms
5. for children with CFS/ME with moderate symptoms
6. for children with CFS/ME with severe symptoms

About 6 sessions of group GET is appropriate....

1. for adults with CFS/ME with mild symptoms
2. for adults with CFS/ME with moderate symptoms
3. for adults with CFS/ME with severe symptoms
4. for children with CFS/ME with mild symptoms
5. for children with CFS/ME with moderate symptoms
6. for children with CFS/ME with severe symptoms

About 6 sessions of group GAT is appropriate....

1. for adults with CFS/ME with mild symptoms

2. for adults with CFS/ME with moderate symptoms
3. for adults with CFS/ME with severe symptoms
4. for children with CFS/ME with mild symptoms
5. for children with CFS/ME with moderate symptoms
6. for children with CFS/ME with severe symptoms

About 6 sessions of group pacing is appropriate....

1. for adults with CFS/ME with mild symptoms
2. for adults with CFS/ME with moderate symptoms
3. for adults with CFS/ME with severe symptoms
4. for children with CFS/ME with mild symptoms
5. for children with CFS/ME with moderate symptoms
6. for children with CFS/ME with severe symptoms

About 12 sessions of activity management therapy (e.g. GET, GAT or pacing) is appropriate....

1. for adults with CFS/ME with mild symptoms
2. for adults with CFS/ME with moderate symptoms
3. for adults with CFS/ME with severe symptoms
4. for children with CFS/ME with mild symptoms
5. for children with CFS/ME with moderate symptoms
6. for children with CFS/ME with severe symptoms

The addition of Cognitive Behaviour Therapy (CBT) techniques to other self-management and/or activity management strategies is appropriate....

1. for adults with CFS/ME with mild symptoms
2. for adults with CFS/ME with moderate symptoms
3. for adults with CFS/ME with severe symptoms
4. for children with CFS/ME with mild symptoms
5. for children with CFS/ME with moderate symptoms
6. for children with CFS/ME with severe symptoms

Individual Cognitive Behaviour Therapy (CBT) is appropriate....

1. for adults with CFS/ME with mild symptoms
2. for adults with CFS/ME with moderate symptoms
3. for adults with CFS/ME with severe symptoms
4. for children with CFS/ME with mild symptoms
5. for children with CFS/ME with moderate symptoms
6. for children with CFS/ME with severe symptoms

Group Cognitive Behaviour Therapy (CBT) is appropriate....

1. for adults with CFS/ME with mild symptoms
2. for adults with CFS/ME with moderate symptoms
3. for adults with CFS/ME with severe symptoms

4. for children with CFS/ME with mild symptoms
5. for children with CFS/ME with moderate symptoms
6. for children with CFS/ME with severe symptoms

Cognitive Behaviour Therapy (CBT) combined with an activity programme is appropriate....

1. for adults with CFS/ME with mild symptoms
2. for adults with CFS/ME with moderate symptoms
3. for adults with CFS/ME with severe symptoms
4. for children with CFS/ME with mild symptoms
5. for children with CFS/ME with moderate symptoms
6. for children with CFS/ME with severe symptoms

About 6 sessions of Cognitive Behaviour Therapy (CBT) is appropriate....

1. for adults with CFS/ME with mild symptoms
2. for adults with CFS/ME with moderate symptoms
3. for adults with CFS/ME with severe symptoms
4. for children with CFS/ME with mild symptoms
5. for children with CFS/ME with moderate symptoms
6. for children with CFS/ME with severe symptoms

About 12 sessions of Cognitive Behaviour Therapy (CBT) is appropriate....

1. for adults with CFS/ME with mild symptoms
2. for adults with CFS/ME with moderate symptoms
3. for adults with CFS/ME with severe symptoms
4. for children with CFS/ME with mild symptoms
5. for children with CFS/ME with moderate symptoms
6. for children with CFS/ME with severe symptoms

Section 4 Complementary, Dietary and Supplementary interventions

Dietary Supplements

Vitamin B12 injections should be used in....

1. adults with CFS/ME with mild symptoms
2. adults with CFS/ME with moderate symptoms
3. adults with CFS/ME with severe symptoms
4. children with CFS/ME with mild symptoms
5. children with CFS/ME with moderate symptoms
6. children with CFS/ME with severe symptoms

Vitamin C should be used in.....

1. adults with CFS/ME with mild symptoms
2. adults with CFS/ME with moderate symptoms
3. adults with CFS/ME with severe symptoms
4. children with CFS/ME with mild symptoms
5. children with CFS/ME with moderate symptoms
6. children with CFS/ME with severe symptoms

Co-enzyme Q10 should be used in....

1. adults with CFS/ME with mild symptoms
2. adults with CFS/ME with moderate symptoms
3. adults with CFS/ME with severe symptoms
4. children with CFS/ME with mild symptoms
5. children with CFS/ME with moderate symptoms
6. children with CFS/ME with severe symptoms

Magnesium should be used in....

1. adults with CFS/ME with mild symptoms
2. adults with CFS/ME with moderate symptoms
3. adults with CFS/ME with severe symptoms
4. children with CFS/ME with mild symptoms
5. children with CFS/ME with moderate symptoms
6. children with CFS/ME with severe symptoms

Echinacea should be used in....

1. adults with CFS/ME with mild symptoms
2. adults with CFS/ME with moderate symptoms
3. adults with CFS/ME with severe symptoms
4. children with CFS/ME with mild symptoms
5. children with CFS/ME with moderate symptoms
6. children with CFS/ME with severe symptoms

Nicotinamide adenine dinucleotide (NADH) should be used in....

1. adults with CFS/ME with mild symptoms
2. adults with CFS/ME with moderate symptoms
3. adults with CFS/ME with severe symptoms
4. children with CFS/ME with mild symptoms
5. children with CFS/ME with moderate symptoms
6. children with CFS/ME with severe symptoms

Essential Fatty acids should be used in....

1. adults with CFS/ME with mild symptoms
2. adults with CFS/ME with moderate symptoms
3. adults with CFS/ME with severe symptoms

4. children with CFS/ME with mild symptoms
5. children with CFS/ME with moderate symptoms
6. children with CFS/ME with severe symptoms

Multivitamin and mineral supplements should be used in.....

1. for adults with CFS/ME with mild symptoms
2. for adults with CFS/ME with moderate symptoms
3. for adults with CFS/ME with severe symptoms
4. for children with CFS/ME with mild symptoms
5. for children with CFS/ME with moderate symptoms
6. for children with CFS/ME with severe symptoms

Diets

An anti-candida (low yeast, low sugar) diet should be used in....

1. adults with CFS/ME with mild symptoms
2. adults with CFS/ME with moderate symptoms
3. adults with CFS/ME with severe symptoms
4. children with CFS/ME with mild symptoms
5. children with CFS/ME with moderate symptoms
6. children with CFS/ME with severe symptoms

An exclusion diet followed by food challenges where the individual has bowel symptoms should be used in...

1. adults with CFS/ME with mild symptoms
2. adults with CFS/ME with moderate symptoms
3. adults with CFS/ME with severe symptoms
4. children with CFS/ME with mild symptoms
5. children with CFS/ME with moderate symptoms
6. children with CFS/ME with severe symptoms

An exclusion diet followed by food challenges where the individual is has no bowel symptoms should be used in....

1. adults with CFS/ME with mild symptoms
2. adults with CFS/ME with moderate symptoms
3. adults with CFS/ME with severe symptoms
4. children with CFS/ME with mild symptoms
5. children with CFS/ME with moderate symptoms
6. children with CFS/ME with severe symptoms

Complementary Therapies

Acupuncture should be used in....

1. adults with CFS/ME with mild symptoms

2. adults with CFS/ME with moderate symptoms
3. adults with CFS/ME with severe symptoms
4. children with CFS/ME with mild symptoms
5. children with CFS/ME with moderate symptoms
6. children with CFS/ME with severe symptoms

Homeopathy should be used in....

1. adults with CFS/ME with mild symptoms
2. adults with CFS/ME with moderate symptoms
3. adults with CFS/ME with severe symptoms
4. children with CFS/ME with mild symptoms
5. children with CFS/ME with moderate symptoms
6. children with CFS/ME with severe symptoms

Overall

Question 1(g) 9h	Frequencies	3 3 1 2 3 1 2	3 1 2	UNCERTAIN*	3.0	2.4
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM
Question 1(g) 9i	Frequencies	3 3 2 1 1 1 4	DISAGREE	2.0	1.8	
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM
Question 1(g) 9j	Frequencies	1 1 1 2 6 4	AGREE	8.0	1.5	
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM
Question 1(g) 9k	Frequencies	2 3 1 1 1 2 1 4	UNCERTAIN*	3.0	2.4	
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM
Question 1(g) 9l	Frequencies	1 1 1 5 7	AGREE	8.0	1.1	
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM
Question 1(g) 9m	Frequencies	1 2 1 3 2 3 3	AGREE	7.0	2.2	
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM
Question 1(g) 9n	Frequencies	1 3 1 1 4 1 1 3	UNCERTAIN	6.0	2.4	
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM
Question 1(g) 9o	Frequencies	1 2 2 2 2 1 1 1 3	UNCERTAIN	4.0	2.1	
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM
Question 1(g) 9p	Frequencies	2 3 3 1 1 2 1 2	UNCERTAIN*	3.0	2.3	
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM
Question 1(g) 9q	Frequencies	1 4 1 2 1 1 2 3	UNCERTAIN	4.5	2.8	
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM
Question 1(h) 1	Frequencies	6 3 2 1 1 2	DISAGREE	2.0	1.4	
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM
Question 1(h) 2	Frequencies	2 1 1 2 8 1	AGREE	9.0	1.7	
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM
Question 1(h) 3	Frequencies	7 3 1 1 1 2	DISAGREE	1.0	1.0	
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM
Question 1(h) 4	Frequencies	8 1 1 1 1 3	DISAGREE	1.0	0.8	
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM
Question 1(h) 5	Frequencies	1 2 3 8 1	AGREE	9.0	1.0	
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM
Question 1(h) 6	Frequencies	1 1 2 2 2 5 2	AGREE	8.0	1.5	
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM
Question 1(h) 7	Frequencies	2 4 2 1 2 4	DISAGREE	3.0	1.9	
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM
Question 1(h) 8	Frequencies	2 2 3 1 2 1 4	DISAGREE	3.0	2.0	
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM
Question 1(h) 9	Frequencies	4 3	DISAGREE	0.0	3.0	
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM
Question 1(h) 9a	Frequencies	8 1 1 1 4	DISAGREE	1.0	1.3	
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM
Question 1(h) 9b	Frequencies	5 2 2 3 3	UNCERTAIN*	2.0	3.2	
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM
Question 1(h) 9d	Frequencies	1 3 2 6 3	AGREE	8.5	1.3	
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM
Question 1(h) 9c	Frequencies	1 1 2 1 7 3	AGREE	9.0	1.3	
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM
Question 1(h) 9e	Frequencies	2 2 2 1 1 1 1 1 4	DISAGREE	3.0	2.1	
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM
Question 1(h) 9f	Frequencies	3 3 2 2 2 3	UNCERTAIN	4.0	2.1	
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM

Overall

Question 1(h) 9g	Frequencies	2 3 2 1 2 1 4	DISAGREE	3.0	1.9
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k
			group rating	median	MADM
Question 1(h) 9h	Frequencies	3 3 2 1 2 1 3	DISAGREE	2.5	1.9
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k
			group rating	median	MADM
Question 1(h) 9i	Frequencies	6 3 1 1 1 3	DISAGREE	1.5	1.4
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k
			group rating	median	MADM
Question 1(h) 9j	Frequencies	1 1 1 1 5 4 3	AGREE	8.0	1.5
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k
			group rating	median	MADM
Question 1(h) 9k	Frequencies	2 3 1 1 1 1 1 5	DISAGREE	2.5	2.4
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k
			group rating	median	MADM
Question 1(h) 9l	Frequencies	1 1 3 2 7 2	AGREE	9.0	1.2
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k
			group rating	median	MADM
Question 1(h) 9m	Frequencies	1 1 1 1 2 2 2 5	AGREE	7.0	2.2
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k
			group rating	median	MADM
Question 1(h) 9n	Frequencies	1 1 1 1 1 2 1 2 5	UNCERTAIN	6.5	2.4
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k
			group rating	median	MADM
Question 1(h) 9o	Frequencies	2 2 2 2 1 1 1 4	DISAGREE	3.0	1.9
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k
			group rating	median	MADM
Question 1(h) 9p	Frequencies	3 1 2 1 2 1 1 4	DISAGREE	3.0	2.0
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k
			group rating	median	MADM
Question 1(h) 9q	Frequencies	1 4 1 2 2 1 4	UNCERTAIN*	3.0	2.7
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k
			group rating	median	MADM
Question 1(i) 1	Frequencies	6 5 3 1	DISAGREE	2.0	0.9
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k
			group rating	median	MADM
Question 1(i) 2	Frequencies	5 5 3 1 1	DISAGREE	2.0	0.9
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k
			group rating	median	MADM
Question 1(i) 3	Frequencies	3 2 2 3 3 1 1	UNCERTAIN	4.0	1.5
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k
			group rating	median	MADM
Question 1(i) 4	Frequencies	1 1 3 3 2 4 1	UNCERTAIN	5.0	1.5
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k
			group rating	median	MADM
Question 1(i) 5	Frequencies	3 1 1 3 3 4	AGREE	7.0	2.1
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k
			group rating	median	MADM
Question 1(j) 1	Frequencies	6 2 2 3 1 1	DISAGREE	2.0	1.7
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k
			group rating	median	MADM
Question 1(j) 2	Frequencies	4 3 1 2 2 1 2	DISAGREE	3.0	1.9
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k
			group rating	median	MADM
Question 1(j) 3	Frequencies	2 2 1 1 2 1 5 1	UNCERTAIN	5.0	2.1
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k
			group rating	median	MADM
Question 1(j) 4	Frequencies	1 1 1 2 3 3 4	AGREE	7.0	1.5
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k
			group rating	median	MADM
Question 1(j) 5	Frequencies	1 3 4 7	AGREE	8.0	1.1
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k
			group rating	median	MADM
Question 1(k) 1	Frequencies	4 2 3 2 1 2 1	UNCERTAIN*	3.0	2.1
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k
			group rating	median	MADM
Question 1(k) 2	Frequencies	1 5 1 1 1 2 1 2 1	UNCERTAIN	3.5	2.6
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k
			group rating	median	MADM
Question 1(k) 3	Frequencies	1 2 2 3 1 5 1	UNCERTAIN*	7.0	2.0
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k
			group rating	median	MADM
Question 1(k) 4	Frequencies	1 2 2 9 1	AGREE	9.0	1.3
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k
			group rating	median	MADM

Overall

Question 1(k)	Frequencies 5	1	2	3	4	5	6	7	8	9	10	1	1	10	1	AGREE	9.0	0.9
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM		
Question 1(l)	Frequencies 1	4	3	2	1							1	4	4	DISAGREE	2.0	1.5	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM		
Question 1(l)	Frequencies 2	4	1					1	2		1	4	4	DISAGREE	2.0	2.2		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM		
Question 1(l)	Frequencies 3	2	3	2				1	1	1	1	4	4	UNCERTAIN	4.0	1.9		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM		
Question 1(l)	Frequencies 4	2	1					3	2	1	3	3	3	UNCERTAIN	6.5	1.8		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM		
Question 1(l)	Frequencies 5	1						1	3	2	5	3	3	AGREE	8.0	1.5		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM		
Question 1(m)	Frequencies 1	3	1	1	1	2	1				1	5	5	UNCERTAIN	3.5	2.1		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM		
Question 1(m)	Frequencies 2	1	4					1	1	1	3	1	3	UNCERTAIN	5.5	2.7		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM		
Question 1(m)	Frequencies 3	1	1	3	1	2					2	2	3	UNCERTAIN	5.5	2.0		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM		
Question 1(m)	Frequencies 4	1						1	5	1	4	3	3	AGREE	7.0	1.2		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM		
Question 1(m)	Frequencies 5	1						2	3	6		3	3	AGREE	8.5	1.3		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM		
Question 1(n)	Frequencies 1	4	1			2	1	1			3	3	3	UNCERTAIN	5.0	2.8		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM		
Question 1(n)	Frequencies 2	1	3	1				1	2	4		3	3	UNCERTAIN*	7.5	2.9		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM		
Question 1(n)	Frequencies 3	1	1					1	3	2	4	3	3	AGREE	7.5	1.7		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM		
Question 1(n)	Frequencies 4	1						2	1	8		3	3	AGREE	9.0	0.9		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM		
Question 1(n)	Frequencies 5	1	1					2	1	7		3	3	AGREE	9.0	1.6		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM		
Question 2(a)	Frequencies 1					1	3	3	4			4	4	AGREE	8.0	0.9		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM		
Question 2(a)	Frequencies 2					1	3	3	4			4	4	AGREE	8.0	0.9		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM		
Question 2(a)	Frequencies 3					1	3	3	4			4	4	AGREE	8.0	0.9		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM		
Question 2(a)	Frequencies 4					1	4	2	4			4	4	AGREE	8.0	1.0		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM		
Question 2(a)	Frequencies 5					1	4	2	4			4	4	AGREE	8.0	1.0		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM		
Question 2(a)	Frequencies 6					1	4	2	4			4	4	AGREE	8.0	1.0		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM		
Question 2(b)	Frequencies 1	8	1	2	1							3	3	DISAGREE	1.0	0.8		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM		
Question 2(b)	Frequencies 2	8	1	2	1							3	3	DISAGREE	1.0	0.8		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM		
Question 2(b)	Frequencies 3	8	1	2	1							3	3	DISAGREE	1.0	0.8		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM		

Overall

Question 2(b) 4	Frequencies	8	1	2	1							3	DISAGREE	1.0	0.8	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(b) 5	Frequencies	8	1	2	1							3	DISAGREE	1.0	0.8	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(b) 6	Frequencies	8	1	2	1							3	DISAGREE	1.0	0.8	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(c) 1	Frequencies			2	2	1	3	1	1			5	UNCERTAIN	6.5	1.6	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(c) 2	Frequencies			1	2	3	3	1	1			4	UNCERTAIN	6.0	1.2	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(c) 3	Frequencies			1	2	2	4	1	1			4	AGREE	7.0	1.2	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(d) 1	Frequencies			1	4	2	3	1	1			3	UNCERTAIN	6.0	1.3	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(d) 2	Frequencies		1		5	1	3	1	1			3	UNCERTAIN	5.5	1.4	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(d) 3	Frequencies	1		1	4	1	2	1	1			3	UNCERTAIN	5.0	1.8	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(d) 4	Frequencies	3	1	1	1		1	1				5	UNCERTAIN*	2.5	2.4	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(d) 5	Frequencies	3	2	1	1		1	1				5	UNCERTAIN*	3.0	2.3	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(d) 6	Frequencies	3	1	1	1		1	1				5	UNCERTAIN	3.5	2.4	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(e) 1	Frequencies	5	1	2								7	DISAGREE	1.0	1.3	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(e) 2	Frequencies	5	1	1	1							7	DISAGREE	1.0	1.1	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(e) 3	Frequencies	5	1	1	1							7	DISAGREE	1.0	0.9	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(f) 1	Frequencies	3	2	2	2							6	DISAGREE	2.0	1.2	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(f) 2	Frequencies	3	2	2	1	1						6	DISAGREE	2.0	1.3	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(f) 3	Frequencies	4	1	2	1	1						6	DISAGREE	2.0	1.4	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(f) 4	Frequencies	7	1		1							6	DISAGREE	1.0	0.6	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(f) 5	Frequencies	7	1		1							6	DISAGREE	1.0	0.6	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(f) 6	Frequencies	6	1		1							6	DISAGREE	1.0	0.7	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(g) 1	Frequencies	6	1	1	1							6	DISAGREE	1.0	1.0	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(g) 2	Frequencies	6	2		1							6	DISAGREE	1.0	0.9	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(g) 3	Frequencies	5	2	1	1							6	DISAGREE	1.0	0.9	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(h) 1	Frequencies	6	1	1	1							6	DISAGREE	1.0	1.0	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM

Overall

Question 2(h) 2	Frequencies	6	2	1								6	DISAGREE	1.0	0.9	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(h) 3	Frequencies	5	1	2	1							6	DISAGREE	1.0	1.0	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(i) 1	Frequencies	8	1	1	1							4	DISAGREE	1.0	0.6	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(i) 2	Frequencies	7	2	1	1							4	DISAGREE	1.0	0.7	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(i) 3	Frequencies	6	2	1	2							4	DISAGREE	1.0	1.1	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(j) 1	Frequencies	7	1	2	1							4	DISAGREE	1.0	0.8	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(j) 2	Frequencies	6	1	1	1	1	1					4	DISAGREE	1.0	1.4	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(j) 3	Frequencies	6	1	1	2	1						4	DISAGREE	1.0	1.5	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(j) 4	Frequencies	6	1	1	1							6	DISAGREE	1.0	0.8	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(j) 5	Frequencies	6	1	1	1							6	DISAGREE	1.0	0.8	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(j) 6	Frequencies	6	1	1	1							6	DISAGREE	1.0	0.8	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(k) 1	Frequencies	2	2	1	2	1	2					5	UNCERTAIN	4.5	2.0	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(k) 2	Frequencies	2	2	2	2	1	1					5	UNCERTAIN	5.0	2.1	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(k) 3	Frequencies	1	3	2	1	2	1					5	UNCERTAIN	5.0	2.1	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(l) 1	Frequencies	5	4	1	1							4	DISAGREE	2.0	1.2	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(l) 2	Frequencies	5	4	1	1							4	DISAGREE	2.0	1.2	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(l) 3	Frequencies	6	3	1	1							4	DISAGREE	1.0	1.2	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(l) 4	Frequencies	7	3	1	1							3	DISAGREE	1.0	1.1	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(l) 5	Frequencies	7	3	1	1							3	DISAGREE	1.0	1.1	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(l) 6	Frequencies	7	3	1	1							3	DISAGREE	1.0	1.1	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(m) 1	Frequencies	10	1									4	DISAGREE	1.0	0.4	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(m) 2	Frequencies	10	1									4	DISAGREE	1.0	0.4	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(m) 3	Frequencies	10	1									4	DISAGREE	1.0	0.4	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(m) 4	Frequencies	10	1									4	DISAGREE	1.0	0.4	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(m) 5	Frequencies	10	1									4	DISAGREE	1.0	0.4	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM

Overall

Question 3(a) 1	Frequencies	1 1 1 2 2 4 1 3	AGREE	7.0	2.1
	Rating scale	Disagree 1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM
Question 3(a) 2	Frequencies	3 2 1 1 1 3 3 1	UNCERTAIN	5.0	2.7
	Rating scale	Disagree 1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM
Question 3(a) 3	Frequencies	5 1 2 2 3 1 1	UNCERTAIN*	3.0	2.5
	Rating scale	Disagree 1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM
Question 3(a) 4	Frequencies	1 1 2 3 3 2 2	UNCERTAIN	5.0	1.9
	Rating scale	Disagree 1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM
Question 3(a) 5	Frequencies	2 2 1 1 2 2 2	UNCERTAIN	4.5	2.3
	Rating scale	Disagree 1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM
Question 3(a) 6	Frequencies	4 1 2 2 2 1 2	UNCERTAIN*	3.0	2.2
	Rating scale	Disagree 1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM
Question 3(b) 1	Frequencies	1 4 3 7	AGREE	8.0	0.9
	Rating scale	Disagree 1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM
Question 3(b) 2	Frequencies	2 3 3 7	AGREE	8.0	1.1
	Rating scale	Disagree 1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM
Question 3(b) 3	Frequencies	1 2 3 4 5 6 7 8 9	AGREE	8.0	1.3
	Rating scale	Disagree 1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM
Question 3(b) 4	Frequencies	2 2 4 6 1	AGREE	8.0	1.0
	Rating scale	Disagree 1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM
Question 3(b) 5	Frequencies	3 1 4 6 1	AGREE	8.0	1.1
	Rating scale	Disagree 1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM
Question 3(b) 6	Frequencies	1 1 1 6 5 1	AGREE	8.0	1.2
	Rating scale	Disagree 1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM
Question 3(c) 1	Frequencies	1 1 3 1 6 1 2	AGREE	7.0	1.3
	Rating scale	Disagree 1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM
Question 3(c) 2	Frequencies	1 1 1 1 2 1 4 1 3	AGREE	7.0	2.0
	Rating scale	Disagree 1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM
Question 3(c) 3	Frequencies	2 1 1 3 2 3 3	UNCERTAIN	6.0	2.1
	Rating scale	Disagree 1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM
Question 3(c) 4	Frequencies	1 3 1 6 1 2	AGREE	7.0	1.2
	Rating scale	Disagree 1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM
Question 3(c) 5	Frequencies	1 1 1 3 5 1 2	AGREE	7.0	1.7
	Rating scale	Disagree 1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM
Question 3(c) 6	Frequencies	1 1 1 3 1 4 1 1	UNCERTAIN	5.0	2.1
	Rating scale	Disagree 1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM
Question 3(d) 1	Frequencies	2 1 3 9	AGREE	9.0	0.9
	Rating scale	Disagree 1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM
Question 3(d) 2	Frequencies	2 3 10	AGREE	9.0	0.7
	Rating scale	Disagree 1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM
Question 3(d) 3	Frequencies	2 3 10	AGREE	9.0	0.7
	Rating scale	Disagree 1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM
Question 3(d) 4	Frequencies	3 3 9	AGREE	9.0	1.0
	Rating scale	Disagree 1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM
Question 3(d) 5	Frequencies	2 1 3 9	AGREE	9.0	0.9
	Rating scale	Disagree 1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM
Question 3(d) 6	Frequencies	2 3 10	AGREE	9.0	0.7
	Rating scale	Disagree 1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM
Question 3(e) 1	Frequencies	1 2 2 1 2 7	AGREE	8.0	1.5
	Rating scale	Disagree 1 2 3 4 5 6 7 8 9	Agree d/k	group rating	median MADM

Overall

Question 3(e) 2	Frequencies				1	3	2	2	7					AGREE	8.0	1.5
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(e) 3	Frequencies				1	3	2	2	7					AGREE	8.0	1.5
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(e) 4	Frequencies				1	2	2		2	8				AGREE	9.0	1.5
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(e) 5	Frequencies					4		1	2	8				AGREE	9.0	1.3
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(e) 6	Frequencies					4		1	2	8				AGREE	9.0	1.3
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(f) 1	Frequencies		1				1	1	2	3	7			AGREE	8.0	1.4
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(f) 2	Frequencies		1				1	1	2	3	7			AGREE	8.0	1.4
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(f) 3	Frequencies		1				1	1	2	3	7			AGREE	8.0	1.4
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(f) 4	Frequencies		1				1	1	2	3	7			AGREE	8.0	1.4
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(f) 5	Frequencies		1				1	1	2	3	7			AGREE	8.0	1.4
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(f) 6	Frequencies		1				1	1	2	3	7			AGREE	8.0	1.4
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(g) 1	Frequencies					1		3	1	10				AGREE	9.0	0.7
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(g) 2	Frequencies					1		1	3	10				AGREE	9.0	0.6
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(g) 3	Frequencies			1			1			12				AGREE	9.0	0.8
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(g) 4	Frequencies					2		3		10				AGREE	9.0	0.9
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(g) 5	Frequencies					1	1	2	1	10				AGREE	9.0	0.8
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(g) 6	Frequencies					2		1		12				AGREE	9.0	0.7
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(h) 1	Frequencies		2	1		1	5	1	2		2		1	UNCERTAIN	5.0	1.8
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(h) 2	Frequencies		2		1	1	5	1	1		3		1	UNCERTAIN	5.0	1.9
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(h) 3	Frequencies		2			1	4	2	2		3		1	UNCERTAIN	5.5	1.9
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(h) 4	Frequencies		2	1		5	1	3		2		1		UNCERTAIN	5.0	1.9
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(h) 5	Frequencies		2			1	5	1	2	1	2		1	UNCERTAIN	5.0	1.8
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(h) 6	Frequencies		2			5	2	1	2	2		1		UNCERTAIN	5.5	1.9
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(i) 1	Frequencies		1	1	1	1	1	2	3	3	2			AGREE	7.0	1.9
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(i) 2	Frequencies		1	1	1		1		4	4	3			AGREE	7.0	1.8
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM

Overall

Question 3(i) 3	Frequencies	1			2	4	5	3							AGREE	8.0	1.3
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM	
Question 3(i) 4	Frequencies	1		2	1	2	2	1	3	2			1		UNCERTAIN	6.0	2.0
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM	
Question 3(i) 5	Frequencies	1		1		3		4	3	2			1		AGREE	7.0	1.6
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM	
Question 3(i) 6	Frequencies	1				3		4	4	2			1		AGREE	7.0	1.4
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM	
Question 3(j) 1	Frequencies					2		2	6	4			1		AGREE	8.0	0.9
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM	
Question 3(j) 2	Frequencies					3		3	4	4			1		AGREE	8.0	1.1
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM	
Question 3(j) 3	Frequencies	1		1	3		1	4	4				1		AGREE	8.0	1.7
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM	
Question 3(j) 4	Frequencies					3	1	1	5	4			1		AGREE	8.0	1.1
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM	
Question 3(j) 5	Frequencies				1	3		2	4	4			1		AGREE	8.0	1.4
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM	
Question 3(j) 6	Frequencies		1	1		3		1	4	4			1		AGREE	8.0	1.8
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM	
Question 3(k) 1	Frequencies					2		1	5	7					AGREE	8.0	0.9
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM	
Question 3(k) 2	Frequencies				1	1	1	5	7						AGREE	8.0	0.9
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM	
Question 3(k) 3	Frequencies				1	3	4	7							AGREE	8.0	0.9
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM	
Question 3(k) 4	Frequencies				2		6	7							AGREE	8.0	0.9
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM	
Question 3(k) 5	Frequencies				1	1	6	7							AGREE	8.0	0.8
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM	
Question 3(k) 6	Frequencies				1	3	4	7							AGREE	8.0	0.9
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM	
Question 3(l) 1	Frequencies	7	2	3	1	1		1							DISAGREE	2.0	1.4
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM	
Question 3(l) 2	Frequencies	6	3	2	1	2		1							DISAGREE	2.0	1.5
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM	
Question 3(l) 3	Frequencies	5	3	1		2	1	1	1	1					DISAGREE	2.0	2.3
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM	
Question 3(l) 4	Frequencies	5	3	3		1		1					1		DISAGREE	2.0	1.3
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM	
Question 3(l) 5	Frequencies	5	3	3		1		1					1		DISAGREE	2.0	1.3
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM	
Question 3(l) 6	Frequencies	5	3			2	1	1	1				1		UNCERTAIN*	2.0	2.2
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM	
Question 3(m) 1	Frequencies	2	2	2		2	1	1		4			1		UNCERTAIN	5.0	2.6
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM	
Question 3(m) 2	Frequencies	1		1		4		3	1	4			1		UNCERTAIN*	7.0	1.9
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM	
Question 3(m) 3	Frequencies					1		4	1	8			1		AGREE	9.0	0.9
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM	

Overall

Question 3(m) 4	Frequencies	2 2 2	2 1 1	4	1	UNCERTAIN	5.0	2.6
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating	median	MADM
Question 3(m) 5	Frequencies	1	1 1 3	1 3 4	1	AGREE	7.5	2.1
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating	median	MADM
Question 3(m) 6	Frequencies		1 1 4 1 7	1	AGREE	8.5	1.1	
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating	median	MADM
Question 3(n) 1	Frequencies	1	1 4 3 2 4		AGREE	7.0	1.5	
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating	median	MADM
Question 3(n) 2	Frequencies	1 1 1	4 1 3 4		UNCERTAIN	6.0	2.3	
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating	median	MADM
Question 3(n) 3	Frequencies	4 1	1 2 1 1 2 3		UNCERTAIN	5.0	2.7	
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating	median	MADM
Question 3(n) 4	Frequencies	1	2 4 2 2 3	1	UNCERTAIN	6.5	1.6	
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating	median	MADM
Question 3(n) 5	Frequencies	1 1 2	3 1 4 2	1	UNCERTAIN	5.5	2.3	
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating	median	MADM
Question 3(n) 6	Frequencies	4 1 1	2 1 2 3	1	UNCERTAIN	5.0	2.9	
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating	median	MADM
Question 3(o) 1	Frequencies		2 3 1 5 4		AGREE	8.0	1.1	
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating	median	MADM
Question 3(o) 2	Frequencies		1 1 2 2 4 5		AGREE	8.0	1.3	
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating	median	MADM
Question 3(o) 3	Frequencies	1	2 3 1 1 3 4		AGREE	7.0	2.0	
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating	median	MADM
Question 3(o) 4	Frequencies		3 2 1 5 3	1	AGREE	8.0	1.2	
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating	median	MADM
Question 3(o) 5	Frequencies		1 2 2 2 4 3	1	AGREE	7.5	1.4	
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating	median	MADM
Question 3(o) 6	Frequencies	1 1	1 2 1 1 4 3	1	AGREE	7.5	2.1	
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating	median	MADM
Question 3(p) 1	Frequencies		1 4 1 2 1 4	2	UNCERTAIN*	7.0	1.6	
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating	median	MADM
Question 3(p) 2	Frequencies	1	1 3 1 2 1 4	2	UNCERTAIN*	7.0	1.9	
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating	median	MADM
Question 3(p) 3	Frequencies	1	4 1 1 3 3	2	AGREE	7.0	1.8	
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating	median	MADM
Question 3(p) 4	Frequencies		1 4 1 2 1 4	2	UNCERTAIN*	7.0	1.7	
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating	median	MADM
Question 3(p) 5	Frequencies	1	1 3 1 2 1 4	2	UNCERTAIN*	7.0	1.9	
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating	median	MADM
Question 3(p) 6	Frequencies	1	4 1 1 3 3	2	AGREE	7.0	1.8	
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating	median	MADM
Question 3(q) 1	Frequencies	1 1	3 1 2 2 1 3	1	UNCERTAIN	6.0	2.1	
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating	median	MADM
Question 3(q) 2	Frequencies	1	1 4 2 2 4	1	UNCERTAIN	6.0	2.0	
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating	median	MADM
Question 3(q) 3	Frequencies	2	1 2 1 3 4	1	AGREE	7.5	2.2	
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating	median	MADM
Question 3(q) 4	Frequencies	1 1 1	2 2 1 1 3	3	UNCERTAIN	5.0	2.3	
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating	median	MADM

Overall

Question 3(q) 5	Frequencies	1 1 1 2 2 1 1 3	3	UNCERTAIN	6.0	2.2
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating
					median	MADM
Question 3(q) 6	Frequencies	2 1 1 1 2 3 2	3	AGREE	7.0	2.2
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating
					median	MADM
Question 3(r) 1	Frequencies	1 1 1 2 3 2 2 3		UNCERTAIN	6.0	1.7
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating
					median	MADM
Question 3(r) 2	Frequencies	2 2 4 1 3 3		UNCERTAIN	6.0	1.6
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating
					median	MADM
Question 3(r) 3	Frequencies	1 1 1 3 5 4		AGREE	8.0	1.6
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating
					median	MADM
Question 3(r) 4	Frequencies	1 1 1 2 2 2 1 3	2	UNCERTAIN	6.0	1.8
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating
					median	MADM
Question 3(r) 5	Frequencies	2 3 3 1 1 3	2	UNCERTAIN	6.0	1.6
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating
					median	MADM
Question 3(r) 6	Frequencies	1 1 1 2 4 3	2	AGREE	8.0	2.3
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating
					median	MADM
Question 3(s) 1	Frequencies	1 1 1 2 1 3 1 3	2	AGREE	7.0	1.9
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating
					median	MADM
Question 3(s) 2	Frequencies	1 3 2 1 3 3	2	AGREE	7.0	1.8
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating
					median	MADM
Question 3(s) 3	Frequencies	1 3 1 1 3 4	2	AGREE	8.0	1.8
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating
					median	MADM
Question 3(s) 4	Frequencies	1 1 1 2 1 2 1 3	3	UNCERTAIN	6.5	2.1
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating
					median	MADM
Question 3(s) 5	Frequencies	1 3 2 1 2 3	3	UNCERTAIN	6.5	1.8
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating
					median	MADM
Question 3(s) 6	Frequencies	1 3 1 1 3 3	3	AGREE	7.5	1.8
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating
					median	MADM
Question 3(t) 1	Frequencies	2 1 1 3 1 3 1 1	2	UNCERTAIN	5.0	2.0
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating
					median	MADM
Question 3(t) 2	Frequencies	2 2 1 4 1 1 2	2	UNCERTAIN	5.0	2.0
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating
					median	MADM
Question 3(t) 3	Frequencies	4 2 1 1 3 2	2	UNCERTAIN*	3.0	2.2
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating
					median	MADM
Question 3(t) 4	Frequencies	2 1 1 3 1 1 1 1	4	UNCERTAIN	5.0	2.0
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating
					median	MADM
Question 3(t) 5	Frequencies	2 1 1 3 2 1 1	4	UNCERTAIN	5.0	1.8
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating
					median	MADM
Question 3(t) 6	Frequencies	2 2 1 1 3 1 1	4	UNCERTAIN	4.0	2.0
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating
					median	MADM
Question 3(u) 1	Frequencies	1 1 2 3 1 4 1 1	1	UNCERTAIN	5.5	1.6
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating
					median	MADM
Question 3(u) 2	Frequencies	1 1 2 3 3 3 1	1	UNCERTAIN	5.5	1.5
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating
					median	MADM
Question 3(u) 3	Frequencies	5 1 1 1 4 2	1	UNCERTAIN	3.5	2.3
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating
					median	MADM
Question 3(u) 4	Frequencies	1 1 2 3 2 1 1	4	UNCERTAIN	5.0	1.6
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating
					median	MADM
Question 3(u) 5	Frequencies	1 1 1 3 3 1 1	4	UNCERTAIN	5.0	1.5
	Rating scale	Disagree	1 2 3 4 5 6 7 8 9	Agree	d/k	group rating
					median	MADM

Overall

Question 3(z) 1	Frequencies		1	2	2	3	1	2	2	2		UNCERTAIN	5.0	1.9		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(z) 2	Frequencies		1	2	2	3	5	2				UNCERTAIN	6.0	1.6		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(z) 3	Frequencies		4	2	2	1	1	1	2	2		UNCERTAIN*	3.0	2.6		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(z) 4	Frequencies		1	3	2	3	1	2	1	2		UNCERTAIN	5.0	1.8		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(z) 5	Frequencies		1	1	2	1	3	3	2	2		UNCERTAIN	6.0	1.7		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(z) 6	Frequencies		3	2	1	1	1	3	2	2		UNCERTAIN	4.0	2.6		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(aa) 1	Frequencies		1	1	3	2	3	3	2			AGREE	7.0	1.5		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(aa) 2	Frequencies		1	2	2	5	1	4				AGREE	7.0	1.4		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(aa) 3	Frequencies		1	1	2	1	2	2	2	4		AGREE	7.0	2.2		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(aa) 4	Frequencies		1	1	1	4	2	2	2	2		UNCERTAIN	5.0	1.8		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(aa) 5	Frequencies		1	2	2	2	1	2	3	2		UNCERTAIN	6.0	2.1		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(aa) 6	Frequencies		1	2	1	3	2	1	3	2		UNCERTAIN	5.0	2.4		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(ab) 1	Frequencies		3	3	1	1	1	3	1	2		UNCERTAIN	5.0	2.4		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(ab) 2	Frequencies		1	3	2	2	1	2	1	1		UNCERTAIN	5.0	2.1		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(ab) 3	Frequencies		1	6	1	2	1	2	2	2		DISAGREE	2.0	2.6		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(ab) 4	Frequencies		4	3	1	1	1	1	4			UNCERTAIN	5.0	2.0		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(ab) 5	Frequencies		1	2	1	1	1	2	2	1		UNCERTAIN	5.0	2.1		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(ab) 6	Frequencies		1	4	1	1	1	2	1	4		UNCERTAIN	5.0	2.6		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(ac) 1	Frequencies		2	1	3	1	4	1	1	2		UNCERTAIN	6.0	1.8		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(ac) 2	Frequencies		1	1	2	2	4	3	2			AGREE	7.0	1.7		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(ac) 3	Frequencies		1	1	1	2	3	1	3	3		AGREE	7.0	2.2		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(ac) 4	Frequencies		2	2	2	3	1	1	4			UNCERTAIN	5.0	2.1		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(ac) 5	Frequencies		1	2	2	2	2	2	4			UNCERTAIN	6.0	1.9		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(ac) 6	Frequencies		1	1	2	1	3	1	2	4		AGREE	7.0	2.4		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(a) 1	Frequencies		7	2	1	4				1		DISAGREE	1.5	1.5		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM

Overall

Question 4(a) 2	Frequencies	7	2	1	3	1					1	DISAGREE	1.5	1.6		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(a) 3	Frequencies	7	2	1	3						1	DISAGREE	1.5	1.8		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(a) 4	Frequencies	7	2	2	2						2	DISAGREE	1.0	1.1		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(a) 5	Frequencies	7	2	2	1	1					2	DISAGREE	1.0	1.2		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(a) 6	Frequencies	7	2	2	1					1	2	DISAGREE	1.0	1.4		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(b) 1	Frequencies	7	4		2	1					1	DISAGREE	1.5	1.3		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(b) 2	Frequencies	7	4		2	1					1	DISAGREE	1.5	1.3		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(b) 3	Frequencies	7	4		2	1					1	DISAGREE	1.5	1.3		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(b) 4	Frequencies	7	4		2						2	DISAGREE	1.0	0.9		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(b) 5	Frequencies	7	4		2						2	DISAGREE	1.0	0.9		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(b) 6	Frequencies	7	4		2						2	DISAGREE	1.0	0.9		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(c) 1	Frequencies	7	2		3	1					2	DISAGREE	1.0	1.5		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(c) 2	Frequencies	7	2		3	1					2	DISAGREE	1.0	1.5		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(c) 3	Frequencies	7	1	1	3						2	DISAGREE	1.0	1.3		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(c) 4	Frequencies	7	2		2						3	DISAGREE	1.0	0.9		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(c) 5	Frequencies	7	2		2						3	DISAGREE	1.0	0.9		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(c) 6	Frequencies	7	2		2						3	DISAGREE	1.0	0.9		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(d) 1	Frequencies	6	2	1	1	3	1				1	DISAGREE	2.0	1.6		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(d) 2	Frequencies	6	2	1	1	3	1				1	DISAGREE	2.0	1.6		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(d) 3	Frequencies	6	3	1	2	2					1	DISAGREE	2.0	1.6		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(d) 4	Frequencies	7	2	1	2						3	DISAGREE	1.0	1.1		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(d) 5	Frequencies	7	2		3						3	DISAGREE	1.0	1.2		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(d) 6	Frequencies	7	2		2	1					3	DISAGREE	1.0	1.3		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(e) 1	Frequencies	6	2	2	1	1	1				2	DISAGREE	2.0	1.4		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(e) 2	Frequencies	6	2	2	1	1	1				2	DISAGREE	2.0	1.4		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM

Overall

Question 4(e) 3	Frequencies	6	2	2	1	1	1					2	DISAGREE	2.0	1.4	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(e) 4	Frequencies	6	2	2	1	1						2	DISAGREE	1.5	1.1	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(e) 5	Frequencies	6	2	2	1	1						2	DISAGREE	1.5	1.1	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(e) 6	Frequencies	6	2	2	1	1						2	DISAGREE	1.5	1.1	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(f) 1	Frequencies	7	1	1	1	4						1	DISAGREE	1.5	1.6	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(f) 2	Frequencies	7	1	2	4							1	DISAGREE	1.5	1.5	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(f) 3	Frequencies	7	2	1	4							1	DISAGREE	1.5	1.4	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(f) 4	Frequencies	7	1	1	3							3	DISAGREE	1.0	1.3	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(f) 5	Frequencies	7	1	1	3							3	DISAGREE	1.0	1.3	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(f) 6	Frequencies	7	1	1	3							3	DISAGREE	1.0	1.3	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(g) 1	Frequencies	3	3	1	1	1	3	1				2	UNCERTAIN*	3.0	2.4	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(g) 2	Frequencies	3	3	1	1	1	3	1				2	UNCERTAIN*	3.0	2.4	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(g) 3	Frequencies	3	3	1	1	2	2	1				2	UNCERTAIN*	3.0	2.3	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(g) 4	Frequencies	3	3	1	2	1	2					3	DISAGREE	2.5	2.0	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(g) 5	Frequencies	3	3	1	2	1	2					3	DISAGREE	2.5	2.0	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(g) 6	Frequencies	3	3	1	2	2	1					3	DISAGREE	2.5	1.9	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(h) 1	Frequencies	3	2	4	2	3	1						DISAGREE	3.0	1.7	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(h) 2	Frequencies	3	2	4	3	2	1						DISAGREE	3.0	1.7	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(h) 3	Frequencies	3	2	4	3	2	1						DISAGREE	3.0	1.7	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(h) 4	Frequencies	3	2	4	2	3							DISAGREE	3.0	1.5	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(h) 5	Frequencies	3	2	4	3	2							DISAGREE	3.0	1.4	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(h) 6	Frequencies	3	2	4	3	2							DISAGREE	3.0	1.4	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(i) 1	Frequencies	6	3	3	2							1	DISAGREE	2.0	1.1	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(i) 2	Frequencies	6	3	3	2							1	DISAGREE	2.0	1.1	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(i) 3	Frequencies	6	3	3	2							1	DISAGREE	2.0	1.1	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(i) 4	Frequencies	6	3	3	1							2	DISAGREE	2.0	0.9	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM

Overall

Question 4(i) 5	Frequencies	6	3	3	1							2	DISAGREE	2.0	0.9	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(i) 6	Frequencies	6	3	3	1							2	DISAGREE	2.0	0.9	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(j) 1	Frequencies	3	1	1	1	2	2	2	1			2	UNCERTAIN	5.0	2.1	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(j) 2	Frequencies	3	1	1	1	3	1	2	1			2	UNCERTAIN	5.0	2.0	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(j) 3	Frequencies	3	1	1	1	3	1	2	1			2	UNCERTAIN	5.0	2.0	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(j) 4	Frequencies	3	2	2	1	3	1	1				2	DISAGREE	3.0	1.7	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(j) 5	Frequencies	3	2	1	2	2	1	1	1			2	UNCERTAIN	4.0	1.9	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(j) 6	Frequencies	3	2	1	1	3	1	1	1			2	UNCERTAIN	4.0	2.0	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(k) 1	Frequencies	8	3	2		2							DISAGREE	1.0	1.0	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(k) 2	Frequencies	8	3	2		2							DISAGREE	1.0	1.0	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(k) 3	Frequencies	8	3	1		2	1						DISAGREE	1.0	1.2	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(k) 4	Frequencies	8	3	2		1						1	DISAGREE	1.0	0.8	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(k) 5	Frequencies	8	3	2		1						1	DISAGREE	1.0	0.8	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(k) 6	Frequencies	8	3	1		1	1					1	DISAGREE	1.0	1.0	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(l) 1	Frequencies	2	4			3	1	1				4	DISAGREE	2.0	1.8	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(l) 2	Frequencies	2	4			3	1	1				4	DISAGREE	2.0	1.8	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(l) 3	Frequencies	2	3			3	2	1				4	UNCERTAIN	5.0	1.9	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(l) 4	Frequencies	3	4			3	1					4	DISAGREE	2.0	1.5	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(l) 5	Frequencies	3	4			3	1					4	DISAGREE	2.0	1.5	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(l) 6	Frequencies	3	4			3	1					4	DISAGREE	2.0	1.5	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(m) 1	Frequencies	3	3		1	4	3					1	UNCERTAIN	4.5	1.8	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(m) 2	Frequencies	3	3		2	3	3					1	UNCERTAIN	4.0	1.7	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(m) 3	Frequencies	3	4	1	1	3	2					1	DISAGREE	2.5	1.6	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(m) 4	Frequencies	3	3		1	2	3					3	DISAGREE	3.0	1.9	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(m) 5	Frequencies	3	3		1	2	3					3	DISAGREE	3.0	1.9	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 4(m) 6	Frequencies	3	3	1	1	2	2					3	DISAGREE	2.5	1.7	
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM

C. Clinical Scenarios Questionnaire 2 to GDG February 2006

NOTE: For reference, the GDG was given the full questionnaire, including the previous ratings on which there was consensus. They only rated the questions on which there was not consensus which are the blanks in column 2 below.

CFS/ME Clinical Scenarios ratings Sheet

YOUR NAME:

Explanation and Instructions:

NOTE: Red font, underlining and bold are used to draw the readers attention to the key words that differentiate the statement rather than to infer any judgement.

The clinical scenarios have been developed from the information contained in the systematic review and the discussion of the GDG to date. They are primarily structured around the CUES of Severity and Age. There is a pick list column along the right hand side of this spread-sheet containing a numerical agreement scale (1-9) and what these numbers will represent (**rating column is highlighted in pink**).

Using the evidence you have read in the systematic review, the GDG discussions and your personal expertise, you need to read the clinical scenarios and rate your agreement with them. To do this, click on the box to the right of this spreadsheet (**in pink**) and a drop down tab will appear. Using this tab you will need to select a numerical representation of your opinion.

ASSUMPTIONS: please refer to the detailed instruction sheet 'Information and Instructions for filling out the questionnaire' (word.doc) for all assumptions and definitions to be used when filling out this questionnaire.

After rating the scenarios, please SAVE the changes to the spreadsheet and e-mail it back to ncostin@rcgp.org.uk

	Section 1 Diagnosis, investigations and referral	GDG Consensus
	<u>Diagnosis</u>	Rating Column
1(a)	Fatigue indicative of CFS/ME in an adult.....	
	1. is persistent and/or recurrent	Agreed
	2. is unexplained by mental or physical conditions	Agreed
	3. results in substantial reduction in previous activity levels	Agreed
	4. characterised by post-exertion malaise and/or fatigue (often delayed with slow recovery)	Agreed
1(b)	Other symptoms <u>indicative</u> of CFS/ME in an adult can, but not necessarily always, include....	
	1. Difficulty with sleeping (e.g. early morning waking, insomnia, hypersomnia, unrefreshing sleep, disturbed sleep/wake cycle)	Agreed
	2. Muscles and/or joint pain	Agreed
	3. Significant headaches of new type, pattern or severity	Agreed
	4. Painful lymph nodes	Agreed
	5. Sore throat	Agreed
	6. Cognitive Impairment for example confusion, difficulty thinking, inability to concentrate, impairment of short-term memory, word-finding difficulty, inability to plan/organise thoughts, spatial disorientation, difficulty with information processing	Agreed

Overall

	7. Physical or mental exertion making symptoms worse	Agreed
	8. Recurrent flu-like symptoms	Agreed
	9. Orthostatic intolerance (problems standing upright), nausea and palpitations	
	10. Significant weight change(s)	
	11. Loss of thermostatic stability (difficulty controlling temperature)	
1(c)	After ruling out other possible likely causes of the symptoms, a diagnosis of CFS/ME should be made.....	
	1. After symptoms have persisted for at least 6 weeks	
	2. After symptoms have persisted for at least 4 months	
	3. After symptoms have persisted for at least 6 months	
1(d)	Fatigue indicative of CFS/ME in a child is....	
	1. persistent and/or recurrent	Agreed
	2. unexplained by mental or physical conditions	Agreed
	3. results in substantial reduction in previous activity levels	Agreed
	4. characterised by post-exertion malaise and/or fatigue (often delayed with slow recovery)	Agreed

Overall

1(e)	Other symptoms indicative of CFS/ME in a child can, but not necessarily always, include.....	
	1. Difficult with sleeping (e.g. early morning wakening, insomnia, hypersomnia, unrefreshing sleep, disturbed sleep/wake cycle)	Agreed
	2. Muscles and/or joint pain	Agreed
	3. Significant headaches of new type, pattern or severity	Agreed
	4. Painful lymph nodes	Agreed
	5. Sore throat	Agreed
	6. Cognitive Impairment for example confusion, difficulty thinking, inability to concentrate, impairment of short-term memory, word-finding difficulty, inability to plan/organise thoughts, spatial disorientation, difficulty with information processing	Agreed
	7. Physical or mental exertion making symptoms worse	Agreed
	8. Recurrent flu-like symptoms	Agreed
	9. Orthostatic intolerance (problems standing upright), nausea and palpitations	
	10. Significant weight change(s)	
	11. Loss of thermostatic stability (difficulty controlling temperature)	
1(f)	After ruling out other possible likely causes of the symptoms, a diagnosis of CFS/ME should be made in a child.....	
	1. After symptoms have persisted for 6 weeks	
	2. After symptoms have persisted for 4 months	
	3. After symptoms have persisted for 6 months	

Overall

	<u>Investigations</u>	
1(g)	The following investigations or examinations are appropriate in <u>establishing a diagnosis</u> of CFS/ME in an adult....	
	1. The head up tilt test	Disagreed
	2. Neurological examination	Agreed
	3. Auditory brainstem responses	Disagreed
	4. Electrodermal conductivity	Disagreed
	5. Urinalysis for protein, blood, glucose	Agreed
	6. ECG if there are cardiological symptoms	Agreed
	7. Endoscopy if there are gastro-intestinal (gut) symptoms	
	8. Coeliac antibodies if there are gastro-intestinal (gut) symptoms	
	9. Blood tests	
	a. Full Blood Count	Agreed
	b. combined laboratory tests including fibrinogen, prothrombin fragment 1+2, thrombin-anti-thrombin complexes, soluble fibrin monomer (SFM) and platelet activation (CD62P, ADP)	Disagreed
	c. Creatinine Kinase	Agreed
	d. Circulating red blood cell volume	
	e. Erythrocyte sedimentation rate	Agreed
	f. C-reactive protein	Agreed
	g. Electrophoresis	

Overall

	h. Ferritin	
	i. B12	
	j. Folate	
	k. Cholesterol	Disagreed
	l. Liver Function Tests	Agreed
	m. Thyroid Function Tests	Agreed
	n. Calcium	Agreed
	o. In the absence of any indicative history, general virus serology, including heterophile antibody tests for Infectious Mononucleosis are appropriate	
	p. In the absence of any indicative history, serology for chronic virus infections: HIV, hepatitis B & C are appropriate	
	q. In the absence of any indicative history, serology testing for chronic bacterial infections (e.g. borelliosis) is appropriate	
	r. In the absence of any indicative history, serology testing for latent infections: toxoplasma, EBV (Epstein Barr virus), CMV (cytomegalovirus) is appropriate	
1(h)	The following investigations or examinations are appropriate in establishing a diagnosis of CFS/ME in a child....	
	1. The head up tilt test	Disagreed
	2. Neurological examination	Agreed
	3. Auditory brainstem responses	Disagreed
	4. Electrodermal conductivity	Disagreed
	5. Urinalysis for protein, blood, glucose	Agreed
	6. ECG if there are cardiological symptoms	Agreed

Overall

7. Endoscopy if there are gastro-intestinal (gut) symptoms	Disagreed
8. Coeliac antibodies if there are gastro-intestinal (gut) symptoms	
9. Blood tests	
a. Full Blood Count	Agreed
b. combined laboratory tests including fibrinogen, prothrombin fragment 1+2, thrombin-anti-thrombin complexes, soluble fibrin monomer (SFM) and platelet activation (CD62P, ADP)	Disagreed
c. Creatinine Kinase	Agreed
d. Circulating red blood cell volume	
e. Erythrocyte sedimentation rate	Agreed
f. C-reactive protein	Agreed
g. Electrophoresis	Disagreed
h. Ferritin	
i. B12	Disagreed
j. Folate	Disagreed
k. Cholesterol	Disagreed
l. Liver Function Tests	Agreed
m. Thyroid Function Tests	Agreed
n. Calcium	Agreed
o. In the absence of any indicative history, general virus serology, including heterophile antibody tests for Infectious Mononucleosis are appropriate	
p. In the absence of any indicative history, serology for chronic virus infections: HIV, hepatitis B & C are appropriate	Disagreed
q. In the absence of any indicative history, serology testing for chronic bacterial infections (e.g. borelliosis) is appropriate	Disagreed

Overall

	r. In the absence of any indicative history, serology testing for latent infections: toxoplasma, EBV (Epstein Barr virus), CMV (cytomegalovirus) is appropriate	
	,	
	<u>Referral</u>	
1(i)	For an adult with mild CFS/ME symptoms a referral for specialised care is appropriate....	
	1. as soon as symptoms occur	
	2. only after symptoms have persisted for about 4-6 weeks following treatment in primary care	
	3. only after symptoms have persisted for about 3-4 months following treatment in primary care	
	4. only aftersymptoms have persisted for at least 6 months following treatment in primary care	
	5. Never or only very exceptionally	
1(j)	For an adult with moderate CFS/ME symptoms a referral for specialised care is appropriate....	
	1. as soon as symptoms occur	
	2. only after symptoms have persisted for about 4-6 weeks following treatment in primary care	
	3. only after symptoms have persisted for about 3-4 months following treatment in primary care	
	4. only aftersymptoms have persisted for at least 6 months following treatment in primary care	
	5. Never or only very exceptionally	
1(k)	For an adult with severe CFS/ME symptoms a referral for specialised care is appropriate....	
	1. as soon as symptoms occur	

Overall

	2. only after symptoms have persisted for about 4-6 weeks following treatment in primary care	
	3. only after symptoms have persisted for about 3-4 months following treatment in primary care	
	4. only after symptoms have persisted for at least 6 months following treatment in primary care	
	5. Never or only very exceptionally	
1(l)	For a child with mild CFS/ME symptoms a referral for specialised care is appropriate....	
	1. as soon as symptoms occur	
	2. only after symptoms have persisted for about 4-6 weeks following treatment in primary care	
	3. only after symptoms have persisted for about 3-4 months following treatment in primary care	
	4. only after symptoms have persisted for at least 6 months following treatment in primary care	
	5. Never or only very exceptionally	
1(m)	For a child with moderate CFS/ME symptoms a referral for specialised care is appropriate....	
	1. as soon as symptoms occur	
	2. only after symptoms have persisted for about 4-6 weeks following treatment in primary care	
	3. only after symptoms have persisted for about 3-4 months following treatment in primary care	
	4. only after symptoms have persisted for at least 6 months following treatment in primary care	
	5. Never or only very exceptionally	
1(n)	For a child with severe CFS/ME symptoms a referral for specialised care is appropriate....	
	1. as soon as symptoms occur	

Overall

	2. only after symptoms have persisted for about 4-6 weeks following treatment in primary care	
	3. only after symptoms have persisted for about 3-4 months following treatment in primary care	
	4. only after symptoms have persisted for at least 6 months following treatment in primary care	
	5. Never or only very exceptionally	
	Section 2 Pharmacological interventions	GDG Rating
	Need explanation that the focus is on the treatment of CFS/ME symptoms not for other co-morbid conditions. Need to add something about this is in general recognising that in some individual circumstances might be the answer	
2(a)	The use of Thyroxine where the individual has <u>LOW</u> thyroxine levels is appropriate....	
	1. for adults with CFS/ME with mild symptoms	Agreed
	2. for adults with CFS/ME with moderate symptoms	Agreed
	3. for adults with CFS/ME with severe symptoms	Agreed
	4. for children with CFS/ME with mild symptoms	Agreed
	5. for children with CFS/ME with moderate symptoms	Agreed
	6. for children with CFS/ME with severe symptoms	Agreed
2(b)	The use of Thyroxine where the individual has <u>NORMAL</u> thyroxine levels is appropriate....	
	1. for adults with CFS/ME with mild symptoms	Disagreed
	2. for adults with CFS/ME with moderate symptoms	Disagreed
	3. for adults with CFS/ME with severe symptoms	Disagreed
	4. for children with CFS/ME with mild symptoms	Disagreed
	5. for children with CFS/ME with moderate symptoms	Disagreed
	6. for children with CFS/ME with severe symptoms	Disagreed

Overall

2(c)	The use of Selective Serotonin Re-uptake Inhibitors (SSRIs) (for example Fluoxetine/Prozac or Paroxetine/Seroxat) where the individual is moderately or severely depressed is INAPPROPRIATE....	
	1. for adults with CFS/ME with mild symptoms	
	2. for adults with CFS/ME with moderate symptoms	
	3. for adults with CFS/ME with severe symptoms	
	1. for children with CFS/ME with mild symptoms	
	2. for children with CFS/ME with moderate symptoms	
	3. for children with CFS/ME with severe symptoms	
2(c)	The use of Venlafaxine where the individual has pain difficulties AND is moderately or severely depressed is INAPPROPRIATE	
	1. for adults with CFS/ME with mild symptoms	
	2. for adults with CFS/ME with moderate symptoms	
	3. for adults with CFS/ME with severe symptoms	
2(c)	The use of Venlafaxine where the individual has pain difficulties AND is NOT moderately or severely depressed is INAPPROPRIATE	
	1. for adults with CFS/ME with mild symptoms	
	2. for adults with CFS/ME with moderate symptoms	
	3. for adults with CFS/ME with severe symptoms	
2(d)	The use of Tricyclics (for example Amitriptyline) where the individual has sleep and pain difficulties AND is moderately or severely depressed is INAPPROPRIATE	
	1. for adults with CFS/ME with mild symptoms	
	2. for adults with CFS/ME with moderate symptoms	

Overall

	3. for adults with CFS/ME with severe symptoms	
	4. for children with CFS/ME with mild symptoms	
	5. for children with CFS/ME with moderate symptoms	
	6. for children with CFS/ME with severe symptoms	
2(e)	The use of Tricyclics (for example Amitriptyline) where the individual has sleep and pain difficulties AND is NOT moderately or severely depressed is INAPPROPRIATE.....	
	1. for adults with CFS/ME with mild symptoms	
	2. for adults with CFS/ME with moderate symptoms	
	3. for adults with CFS/ME with severe symptoms	
	4. for children with CFS/ME with mild symptoms	
	5. for children with CFS/ME with moderate symptoms	
	6. for children with CFS/ME with severe symptoms	
2(f)	The use of Gabapentin or example where the individual has pain difficulties is INAPPROPRIATE.....	
	1. for adults with CFS/ME with mild symptoms	
	2. for adults with CFS/ME with moderate symptoms	
	3. for adults with CFS/ME with severe symptoms	
	4. for children with CFS/ME with mild symptoms	
	5. for children with CFS/ME with moderate symptoms	
	6. for children with CFS/ME with severe symptoms	
2(g)	The use of Monoamine oxidase inhibitors (for example phenelzine or isocarboxazid) where the	

Overall

	individual has pain difficulties AND the individual is moderately or severely depressed is INAPPROPRIATE....	
	1. for adults with CFS/ME with mild symptoms	
	2. for adults with CFS/ME with moderate symptoms	
	3. for adults with CFS/ME with severe symptoms	
	4. for children with CFS/ME with mild symptoms	
	5. for children with CFS/ME with moderate symptoms	
	6. for children with CFS/ME with severe symptoms	
2(g)	The use of Monoamine oxidase inhibitors (for example phenelzine or isocarboxazid) where the individual has pain difficulties AND the individual is NOT moderately or severely depressed is INAPPROPRIATE....	
	1. for adults with CFS/ME with mild symptoms	
	2. for adults with CFS/ME with moderate symptoms	
	3. for adults with CFS/ME with severe symptoms	
	4. for children with CFS/ME with mild symptoms	
	5. for children with CFS/ME with moderate symptoms	
	6. for children with CFS/ME with severe symptoms	
2(h)	The use of Glucocorticoids (such as Hydrocortisone) where the individual's primary symptom is pain is appropriate....	
	1. for adults with CFS/ME with mild symptoms	Disagreed
	2. for adults with CFS/ME with moderate symptoms	Disagreed
	3. for adults with CFS/ME with severe symptoms	Disagreed

Overall

2(i)	The use of Mineralocorticoids (such as Fludrocortisone) where the individual's primary symptom is pain is appropriate....	
	1. for adults with CFS/ME with mild symptoms	Disagreed
	2. for adults with CFS/ME with moderate symptoms	Disagreed
	3. for adults with CFS/ME with severe symptoms	Disagreed
2(i)	The use of Dexamphetamine where the individual's primary symptom is fatigue is appropriate....	
	1. for adults with CFS/ME with mild symptoms	Disagreed
	2. for adults with CFS/ME with moderate symptoms	Disagreed
	3. for adults with CFS/ME with severe symptoms	Disagreed
2(j)	The use of Methylphenidate where the individual's primary symptom is fatigue is appropriate....	
	1. for adults with CFS/ME with mild symptoms	Disagreed
	2. for adults with CFS/ME with moderate symptoms	Disagreed
	3. for adults with CFS/ME with severe symptoms	Disagreed
	4. for children with CFS/ME with mild symptoms	Disagreed
	5. for children with CFS/ME with moderate symptoms	Disagreed
	6. for children with CFS/ME with severe symptoms	Disagreed
2(k)	The use of Melatonin where the individual has sleep difficulties is INAPPROPRIATE....	
	1. for children with CFS/ME with mild symptoms	

Overall

	2. for children with CFS/ME with moderate symptoms	
	3. for children with CFS/ME with severe symptoms	
2(l)	The use of Anti-Herpes agents (such as Acyclovir) where the individual <u>has had</u> herpes viral infection is appropriate....	
	1. for adults with CFS/ME with mild symptoms	Disagreed
	2. for adults with CFS/ME with moderate symptoms	Disagreed
	3. for adults with CFS/ME with severe symptoms	Disagreed
	4. for children with CFS/ME with mild symptoms	Disagreed
	5. for children with CFS/ME with moderate symptoms	Disagreed
	6. for children with CFS/ME with severe symptoms	Disagreed
2(m)	The use of Anti-Herpes agents (such as Acyclovir) where the individual has <u>NOT</u> had herpes viral infection is appropriate....	
	1. for adults with CFS/ME with mild symptoms	Disagreed
	2. for adults with CFS/ME with moderate symptoms	Disagreed
	3. for adults with CFS/ME with severe symptoms	Disagreed
	4. for children with CFS/ME with mild symptoms	Disagreed
	5. for children with CFS/ME with moderate symptoms	Disagreed
	6. for children with CFS/ME with severe symptoms	Disagreed
2(n)	The use of gut anti-spasmodics (such as mebeverine, alverine and peppermint oil) where the individual <u>has</u> bowel symptoms is INAPPROPRIATE.	
	1. for adults with CFS/ME with mild symptoms	

Overall

	2. for adults with CFS/ME with moderate symptoms	
	3. for adults with CFS/ME with severe symptoms	
	4. for children with CFS/ME with mild symptoms	
	5. for children with CFS/ME with moderate symptoms	
	6. for children with CFS/ME with severe symptoms	
2(o)	The use of gut anti-spasmodics (such as mebeverine, alverine and peppermint oil) where the individual has <u>NO</u> bowel symptoms is appropriate....	
	1. for adults with CFS/ME with mild symptoms	Disagreed
	2. for adults with CFS/ME with moderate symptoms	Disagreed
	3. for adults with CFS/ME with severe symptoms	Disagreed
	4. for children with CFS/ME with mild symptoms	Disagreed
	5. for children with CFS/ME with moderate symptoms	Disagreed
	6. for children with CFS/ME with severe symptoms	Disagreed
2(p)	The use of skeletal anti-spasmodics (such as diazepam, baclofen, and clonazepam) where the individual <u>has</u> MODERATE OR SEVERE muscle pain, cramps or twitching is INAPPROPRIATE....	
	1. for adults with CFS/ME with mild symptoms	
	2. for adults with CFS/ME with moderate symptoms	
	3. for adults with CFS/ME with severe symptoms	
	4. for children with CFS/ME with mild symptoms	
	5. for children with CFS/ME with moderate symptoms	
	6. for children with CFS/ME with severe symptoms	

Overall

2(p)	The use of skeletal anti-spasmodics (such as diazepam, baclofen, and clonazepam) where the individual has <u>NO</u> muscle pain is INAPPROPRIATE....	
	1. for adults with CFS/ME with mild symptoms	
	2. for adults with CFS/ME with moderate symptoms	
	3. for adults with CFS/ME with severe symptoms	
	4. for children with CFS/ME with mild symptoms	
	5. for children with CFS/ME with moderate symptoms	
	6. for children with CFS/ME with severe symptoms	
	Section 3 Behavioural Approaches	GDG Rating
3(a)	A programme which allows the person to find a baseline, followed by gradual and sustainable increases in activity/exercise (physical, emotional, cognitive) is appropriate....	
	1. for adults with CFS/ME with mild symptoms	Agreed
	2. for adults with CFS/ME with moderate symptoms	Agreed
	3. for adults with CFS/ME with severe symptoms	Agreed
	4. for children with CFS/ME with mild symptoms	Agreed
	5. for children with CFS/ME with moderate symptoms	Agreed
	6. for children with CFS/ME with severe symptoms	Agreed
3(b)	A programme based upon planned increases in duration of physical activity/exercise followed by increases in intensity leading to aerobic exercise (i.e. exercise which increases the pulse rate) is appropriate....	

Overall

	1. for adults with CFS/ME with mild symptoms	Agreed
	2. for adults with CFS/ME with moderate symptoms	Agreed
	3. for adults with CFS/ME with severe symptoms	
	4. for children with CFS/ME with mild symptoms	Agreed
	5. for children with CFS/ME with moderate symptoms	Agreed
	6. for children with CFS/ME with severe symptoms	
3(c)	A programme consisting of increases of aerobic exercise (i.e. exercise which increases the pulse rate) is appropriate....	
	1. for adults with CFS/ME with mild symptoms	
	2. for adults with CFS/ME with moderate symptoms	
	3. for adults with CFS/ME with severe symptoms	
	4. for children with CFS/ME with mild symptoms	
	5. for children with CFS/ME with moderate symptoms	
	6. for children with CFS/ME with severe symptoms	
3(d)	A programme that encourages self management and builds on the skills of the individual is appropriate....	
	1. for adults with CFS/ME with mild symptoms	Agreed
	2. for adults with CFS/ME with moderate symptoms	Agreed
	3. for adults with CFS/ME with severe symptoms	Agreed
	4. for children with CFS/ME with mild symptoms	Agreed

Overall

	5. for children with CFS/ME with moderate symptoms	Agreed
	6. for children with CFS/ME with severe symptoms	Agreed
3(e)	A programme involving assessment and management of the emotional impact of CFS/ME is appropriate....	
	1. for adults with CFS/ME with mild symptoms	Agreed
	2. for adults with CFS/ME with moderate symptoms	Agreed
	3. for adults with CFS/ME with severe symptoms	Agreed
	4. for children with CFS/ME with mild symptoms	Agreed
	5. for children with CFS/ME with moderate symptoms	Agreed
	6. for children with CFS/ME with severe symptoms	Agreed
3(f)	Techniques that improve the quality of relaxation and restorative rest are appropriate....	
	1. for adults with CFS/ME with mild symptoms	Agreed
	2. for adults with CFS/ME with moderate symptoms	Agreed
	3. for adults with CFS/ME with severe symptoms	Agreed
	4. for children with CFS/ME with mild symptoms	Agreed
	5. for children with CFS/ME with moderate symptoms	Agreed
	6. for children with CFS/ME with severe symptoms	Agreed
3(g)	Setting an individually tailored self management strategy (with patient-centred goals) is appropriate....	

Overall

	1. for adults with CFS/ME with mild symptoms	Agreed
	2. for adults with CFS/ME with moderate symptoms	Agreed
	3. for adults with CFS/ME with severe symptoms	Agreed
	4. for children with CFS/ME with mild symptoms	Agreed
	5. for children with CFS/ME with moderate symptoms	Agreed
	6. for children with CFS/ME with severe symptoms	Agreed
3(h)	A strategy that always maintains activity levels at substantially less than full capacity in order to have reserve energy for the body to heal itself (can be known as the envelope theory) is appropriate....	
	1. for adults with CFS/ME with mild symptoms	
	2. for adults with CFS/ME with moderate symptoms	
	3. for adults with CFS/ME with severe symptoms	
	4. for children with CFS/ME with mild symptoms	
	5. for children with CFS/ME with moderate symptoms	
	6. for children with CFS/ME with severe symptoms	
3(i)	A strategy which involves monitoring thoughts and discusses alternative cognitive or behavioural strategies is appropriate....	
	1. for adults with CFS/ME with mild symptoms	Agreed
	2. for adults with CFS/ME with moderate symptoms	Agreed
	3. for adults with CFS/ME with severe symptoms	Agreed

Overall

	4. for children with CFS/ME with mild symptoms	Agreed
	5. for children with CFS/ME with moderate symptoms	Agreed
	6. for children with CFS/ME with severe symptoms	Agreed
3(j)	A programme that encourages patients to extend their activity capacity is appropriate....	
	1. for adults with CFS/ME with mild symptoms	Agreed
	2. for adults with CFS/ME with moderate symptoms	Agreed
	3. for adults with CFS/ME with severe symptoms	Agreed
	4. for children with CFS/ME with mild symptoms	Agreed
	5. for children with CFS/ME with moderate symptoms	Agreed
	6. for children with CFS/ME with severe symptoms	Agreed
3(k)	Strategies to normalise sleep patterns are appropriate....	
	1. for adults with CFS/ME with mild symptoms	Agreed
	2. for adults with CFS/ME with moderate symptoms	Agreed
	3. for adults with CFS/ME with severe symptoms	Agreed
	4. for children with CFS/ME with mild symptoms	Agreed
	5. for children with CFS/ME with moderate symptoms	Agreed
	6. for children with CFS/ME with severe symptoms	Agreed
3(l)	Complete rest (cognitive, physical and emotional) during significant increases in symptoms (a 'set-back') is appropriate....	

Overall

	1. for adults with CFS/ME with mild symptoms	Disagreed
	2. for adults with CFS/ME with moderate symptoms	Disagreed
	3. for adults with CFS/ME with severe symptoms	Disagreed
	4. for children with CFS/ME with mild symptoms	Disagreed
	5. for children with CFS/ME with moderate symptoms	Disagreed
	6. for children with CFS/ME with severe symptoms	
3(m)	Equipment and adaptations (e.g. a wheelchair) that allow patients to improve independence and quality of life should be provided....	
	1. for adults with CFS/ME with mild symptoms	
	2. for adults with CFS/ME with moderate symptoms	
	3. for adults with CFS/ME with severe symptoms	Agreed
	4. for children with CFS/ME with mild symptoms	
	5. for children with CFS/ME with moderate symptoms	Agreed
	6. for children with CFS/ME with severe symptoms	Agreed
3(n)	Individual Cognitive Behaviour Therapy (CBT) is appropriate....	
	1. for adults with CFS/ME	
	2. for children with CFS/ME	
3(o)	Group Cognitive Behaviour Therapy (CBT) is appropriate....	
	1. for adults with CFS/ME	
	2. for children with CFS/ME	

Overall

3(p)	Cognitive Behaviour Therapy (CBT) combined with an activity programme is appropriate....	
	1. for adults with CFS/ME	
	2. for children with CFS/ME	
	Section 4 Complementary, Dietary and Supplementary Approaches	GDG Rating
	<u>Dietary Supplements</u>	
4(a)	Vitamin B12 (assuming these levels are currently normal) injections is appropriate for the treatment of....	
	1. adults with CFS/ME with mild symptoms	Disagreed
	2. adults with CFS/ME with moderate symptoms	Disagreed
	3. adults with CFS/ME with severe symptoms	Disagreed
	4. children with CFS/ME with mild symptoms	Disagreed
	5. children with CFS/ME with moderate symptoms	Disagreed
	6. children with CFS/ME with severe symptoms	Disagreed
4(b)	Vitamin C is appropriate for the treatment of....	
	1. adults with CFS/ME with mild symptoms	Disagreed
	2. adults with CFS/ME with moderate symptoms	Disagreed
	3. adults with CFS/ME with severe symptoms	Disagreed
	4. children with CFS/ME with mild symptoms	Disagreed
	5. children with CFS/ME with moderate symptoms	Disagreed

Overall

	6. children with CFS/ME with severe symptoms	Disagreed
4(c)	Co-enzyme Q10 is appropriate for the treatment of....	
	1. adults with CFS/ME with mild symptoms	Disagreed
	2. adults with CFS/ME with moderate symptoms	Disagreed
	3. adults with CFS/ME with severe symptoms	Disagreed
	4. children with CFS/ME with mild symptoms	Disagreed
	5. children with CFS/ME with moderate symptoms	Disagreed
	6. children with CFS/ME with severe symptoms	Disagreed
4(d)	Magnesium is appropriate for the treatment of....	
	1. adults with CFS/ME with mild symptoms	Disagreed
	2. adults with CFS/ME with moderate symptoms	Disagreed
	3. adults with CFS/ME with severe symptoms	Disagreed
	4. children with CFS/ME with mild symptoms	Disagreed
	5. children with CFS/ME with moderate symptoms	Disagreed
	6. children with CFS/ME with severe symptoms	Disagreed
4(e)	Echinacea is appropriate for the treatment of.....	
	1. adults with CFS/ME with mild symptoms	Disagreed
	2. adults with CFS/ME with moderate symptoms	Disagreed
	3. adults with CFS/ME with severe symptoms	Disagreed

Overall

	4. children with CFS/ME with mild symptoms	Disagreed
	5. children with CFS/ME with moderate symptoms	Disagreed
	6. children with CFS/ME with severe symptoms	Disagreed
		Disagreed
4(f)	Nicotinamide adenine dinucleotide (NADH) is appropriate for the treatment of....	
	1. adults with CFS/ME with mild symptoms	Disagreed
	2. adults with CFS/ME with moderate symptoms	Disagreed
	3. adults with CFS/ME with severe symptoms	Disagreed
	4. children with CFS/ME with mild symptoms	Disagreed
	5. children with CFS/ME with moderate symptoms	Disagreed
	6. children with CFS/ME with severe symptoms	Disagreed
4(g)	Essential Fatty acids is appropriate for the treatment of....	
	1. adults with CFS/ME with mild symptoms	
	2. adults with CFS/ME with moderate symptoms	
	3. adults with CFS/ME with severe symptoms	
	4. children with CFS/ME with mild symptoms	
	5. children with CFS/ME with moderate symptoms	
	6. children with CFS/ME with severe symptoms	
4(h)	Multivitamin and mineral supplements is appropriate for the treatment of.....	

Overall

- | | |
|--|------------------|
| 1. for adults with CFS/ME with mild symptoms | Disagreed |
| 2. for adults with CFS/ME with moderate symptoms | Disagreed |
| 3. for adults with CFS/ME with severe symptoms | Disagreed |
| 4. for children with CFS/ME with mild symptoms | Disagreed |
| 5. for children with CFS/ME with moderate symptoms | Disagreed |
| 6. for children with CFS/ME with severe symptoms | Disagreed |

Diets

4(i) An anti-candida (low yeast, low sugar) diet is appropriate for....

- | | |
|--|------------------|
| 1. adults with CFS/ME with mild symptoms | Disagreed |
| 2. adults with CFS/ME with moderate symptoms | Disagreed |
| 3. adults with CFS/ME with severe symptoms | Disagreed |
| 4. children with CFS/ME with mild symptoms | Disagreed |
| 5. children with CFS/ME with moderate symptoms | Disagreed |
| 6. children with CFS/ME with severe symptoms | Disagreed |

4(j) An clinically supervised exclusion diet followed by food challenges where the individual has moderate or severe bowel symptoms is appropriate for....

- | | |
|--|--|
| 1. adults with CFS/ME with mild symptoms | |
| 2. adults with CFS/ME with moderate symptoms | |
| 3. adults with CFS/ME with severe symptoms | |

Overall

- 4. children with CFS/ME with mild symptoms
- 5. children with CFS/ME with moderate symptoms
- 6. children with CFS/ME with severe symptoms

4(k) A clinically supervised exclusion diet followed by food challenges where the individual is has no bowel symptoms is appropriate for....

- 1. adults with CFS/ME with mild symptoms
- 2. adults with CFS/ME with moderate symptoms
- 3. adults with CFS/ME with severe symptoms
- 4. children with CFS/ME with mild symptoms
- 5. children with CFS/ME with moderate symptoms
- 6. children with CFS/ME with severe symptoms

Disagreed
Disagreed
Disagreed
Disagreed
Disagreed
Disagreed

Complementary Therapies

4(l) Acupuncture by a registered therapist is appropriate for symptom control in.....

- 1. adults with CFS/ME with mild symptoms
- 2. adults with CFS/ME with moderate symptoms
- 3. adults with CFS/ME with severe symptoms
- 4. children with CFS/ME with mild symptoms
- 5. children with CFS/ME with moderate symptoms
- 6. children with CFS/ME with severe symptoms

Disagreed
Disagreed

--

Disagreed
Disagreed
Disagreed

Overall

4(m) Homeopathy by a registered therapist is appropriate for symptom control in...

- 1. adults with CFS/ME with mild symptoms
- 2. adults with CFS/ME with moderate symptoms
- 3. adults with CFS/ME with severe symptoms
- 4. children with CFS/ME with mild symptoms
- 5. children with CFS/ME with moderate symptoms
- 6. children with CFS/ME with severe symptoms

Disagreed

Disagreed

Disagreed

Disagreed

4(m) Other complementary therapies by a registered therapist is appropriate for symptom control in...

- 1. adults with CFS/ME with mild symptoms
- 2. adults with CFS/ME with moderate symptoms
- 3. adults with CFS/ME with severe symptoms
- 4. children with CFS/ME with mild symptoms
- 5. children with CFS/ME with moderate symptoms
- 6. children with CFS/ME with severe symptoms

Overall

D. Results of Questionnaire 2

Question 1(b)	8	Frequencies	1	1	3	1	2	4	4	1			AGREE	7.0	1.9		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(b)	9	Frequencies	3	3		2	3	2	2	1			UNCERTAIN	5.5	2.4		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(b)	10	Frequencies	2			2	3	5	3	2			AGREE	7.0	1.4		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(c)	1	Frequencies	4	6	3	1		3					DISAGREE	2.0	1.2		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(c)	2	Frequencies	1	1		1	2	7	4	2			AGREE	7.0	1.1		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(c)	3	Frequencies			1		1		1	4	10		AGREE	9.0	0.9		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(e)	8	Frequencies	2	3		3	1	3	2	1			UNCERTAIN	5.0	2.3		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(e)	9	Frequencies	3	2		2	2	2	1	1			UNCERTAIN	4.0	2.2		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(e)	10	Frequencies	1	2	1		3	1	4	1	1		UNCERTAIN	5.5	2.0		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(f)	1	Frequencies	1	3	2	2		3	1	2			UNCERTAIN	4.0	2.0		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(f)	2	Frequencies						3	2	2	7		AGREE	8.5	1.1		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(f)	3	Frequencies	2				1		1	2	9		AGREE	9.0	1.6		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(g)	7	Frequencies	4	1		1	5		1	1			UNCERTAIN	5.0	1.9		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(g)	8	Frequencies	1			2		1	2	4	3		AGREE	8.0	1.7		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(g)	9d	Frequencies	5	3	1			1			1		DISAGREE	2.0	1.5		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(g)	9g	Frequencies	4	3	1	1	1		1		1		DISAGREE	2.0	1.8		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(g)	9h	Frequencies	2	2		1		2	2	2	1		UNCERTAIN	6.0	2.4		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(g)	9i	Frequencies	2	4	1	1	1	1	3		1		UNCERTAIN	3.5	2.3		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(g)	9j	Frequencies	2	4	2	1		1	1		1		DISAGREE	2.5	1.8		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(g)	9o	Frequencies	3	3	1	1	1	1	3		1		UNCERTAIN	3.5	2.4		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(g)	9p	Frequencies	4	4	2	1			2	1			DISAGREE	2.0	1.7		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(g)	9q	Frequencies	6	2	3	1			2		1		DISAGREE	2.0	1.9		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(g)	9r	Frequencies	5	1	2	1	2	1	1		1		UNCERTAIN*	3.0	2.1		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(h)	8	Frequencies	1	2		1	1		2	2	5		UNCERTAIN*	7.5	2.4		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(h)	9d	Frequencies	6	5	1						1		DISAGREE	2.0	1.1		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM

Overall

Question 1(h)	9h	Frequencies	2	2	1	1	2	1	1	2	5	UNCERTAIN	5.5	2.5			
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(h)	9o	Frequencies	2	3	3	1	1	2			1	4	DISAGREE	3.0	1.7		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(h)	9r	Frequencies	5	2	2	1		1	1		1	4	DISAGREE	2.0	1.9		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(i)	1	Frequencies	10	4	2							1	DISAGREE	1.0	0.5		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(i)	2	Frequencies	5	3	3	3	2					1	DISAGREE	2.5	1.3		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(i)	3	Frequencies	1	1	2	1	1	3	5	1	1	1	UNCERTAIN	6.0	1.8		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(i)	4	Frequencies	1	1	2			2	3	7		1	AGREE	8.0	1.9		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(i)	5	Frequencies	7	2	2	2	1				1	2	DISAGREE	2.0	1.5		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(j)	1	Frequencies	10	4	1	1						1	DISAGREE	1.0	0.6		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(j)	2	Frequencies	2	4	3	1	1	2	3			1	UNCERTAIN*	3.0	1.8		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(j)	3	Frequencies	2	1	1		2	5	4	1		1	AGREE	7.0	1.6		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(j)	4	Frequencies	1	1	1	1			2	10		1	AGREE	9.0	1.5		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(j)	5	Frequencies	11	3	1	1						1	DISAGREE	1.0	0.5		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(k)	1	Frequencies	6	3	1		1	2	1	2		1	UNCERTAIN*	2.0	2.5		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(k)	2	Frequencies	2	3	2	1		2	3	3		1	UNCERTAIN	6.0	2.4		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(k)	3	Frequencies	2		1			2	2	9		1	AGREE	9.0	1.6		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(k)	4	Frequencies	2	2	1	1	1				9	1	AGREE	9.0	2.8		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(k)	5	Frequencies	13	1	1						1	1	DISAGREE	1.0	0.8		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(l)	1	Frequencies	6	3	2	2		1				3	DISAGREE	2.0	1.2		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(l)	2	Frequencies	4	3			1	2	2	1		4	DISAGREE	3.0	2.4		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(l)	3	Frequencies	3		1			3	2	4		4	UNCERTAIN*	7.0	2.2		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(l)	4	Frequencies	2	1	1		1	1	1	6		4	UNCERTAIN*	8.0	2.3		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(l)	5	Frequencies	6	4	1	1					1	4	DISAGREE	2.0	1.2		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(m)	1	Frequencies	6	3	1		1	1	2			3	DISAGREE	2.0	1.7		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(m)	2	Frequencies	3	2			1	3	1	4		3	UNCERTAIN*	7.0	2.4		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM

Overall

Question 1(m)	3	Frequencies		1	2	1	1	2	7	3	AGREE	8.5	1.8				
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(m)	4	Frequencies		2	2	1	1	1	8	2	AGREE	9.0	2.5				
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(m)	5	Frequencies		13	1	1				2	DISAGREE	1.0	0.3				
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(n)	1	Frequencies		3	3	2		2	4	3	UNCERTAIN*	3.0	2.9				
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(n)	2	Frequencies		2	2	1	1	2	2	6	AGREE	8.0	1.8				
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(n)	3	Frequencies		2	1	1	1		1	9	AGREE	9.0	2.0				
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(n)	4	Frequencies		3	1	1	1		1	8	AGREE	9.0	2.9				
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1(n)	5	Frequencies		12	1	1			1	2	DISAGREE	1.0	0.8				
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(c)(1)	1	Frequencies		4	5	2	1			5	DISAGREE	2.0	0.8				
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(c)(1)	2	Frequencies		4	5	2	1			5	DISAGREE	2.0	0.8				
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(c)(1)	3	Frequencies		5	4	2	1			5	DISAGREE	2.0	0.8				
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(c)(1)	4	Frequencies		1	2	1	1		2	10	UNCERTAIN	4.0	2.6				
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(c)(1)	5	Frequencies		1	2		2		2	10	UNCERTAIN	5.0	2.6				
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(c)(1)	6	Frequencies		2	1		2		2	10	UNCERTAIN	5.0	2.7				
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(c)(2)	1	Frequencies		4	2	1	1	1	1	7	DISAGREE	2.0	1.5				
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(c)(2)	2	Frequencies		4	2	2	1	1	1	7	DISAGREE	2.0	1.4				
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(c)(2)	3	Frequencies		4	2	2	1	1	1	7	DISAGREE	2.0	1.4				
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(c)(3)	1	Frequencies		1			2	1	2	2	9	AGREE	7.5	2.0			
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(c)(3)	2	Frequencies		1			2	1	2	2	9	AGREE	7.0	2.1			
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(c)(3)	3	Frequencies		1			2	1	2	2	9	AGREE	7.0	2.1			
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(d)	1	Frequencies		4	4	1	3			5	DISAGREE	2.0	1.3				
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(d)	2	Frequencies		4	4	1	3			5	DISAGREE	2.0	1.3				
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(d)	3	Frequencies		4	4	1	2	1		5	DISAGREE	2.0	1.3				
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(d)	4	Frequencies		1	1	2	1	1	1	10	DISAGREE	3.0	2.0				
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(d)	5	Frequencies		1	1	1	1	1	1	10	UNCERTAIN	5.0	2.1				
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM

Overall

Question 2(d)	6	Frequencies	1	1	1	1	1	1	1	1	10	UNCERTAIN	5.0	2.6	
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
														median	MADM
Question 2(e)	1	Frequencies	3	3	3	2	1				5	DISAGREE	2.5	1.3	
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
														median	MADM
Question 2(e)	2	Frequencies	3	4	1	1	2	1			5	DISAGREE	2.0	1.3	
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
														median	MADM
Question 2(e)	3	Frequencies	2	5	2	1	1	1			5	DISAGREE	2.0	1.1	
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
														median	MADM
Question 2(e)	4	Frequencies	2	1		3		1			10	UNCERTAIN	5.0	1.9	
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
														median	MADM
Question 2(e)	5	Frequencies	2	1	2	1	1				10	UNCERTAIN	5.0	2.1	
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
														median	MADM
Question 2(e)	6	Frequencies	2	1	1	1		2			10	UNCERTAIN	4.0	2.4	
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
														median	MADM
Question 2(f)	1	Frequencies	2	1	1	1	1	1			8	UNCERTAIN	4.0	2.2	
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
														median	MADM
Question 2(f)	2	Frequencies	2	1	1	3	1			1	8	UNCERTAIN	5.0	2.0	
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
														median	MADM
Question 2(f)	3	Frequencies	3	1	1	1	1		1		8	UNCERTAIN*	3.0	2.2	
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
														median	MADM
Question 2(f)	4	Frequencies	1		2	1				1	12	UNCERTAIN	5.0	1.8	
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
														median	MADM
Question 2(f)	5	Frequencies	1		2	1				1	12	UNCERTAIN	5.0	2.0	
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
														median	MADM
Question 2(f)	6	Frequencies	1		2	1				1	12	UNCERTAIN	5.0	2.0	
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
														median	MADM
Question 2(g)(1)	1	Frequencies	1	1	1		2	4			8	AGREE	7.0	1.7	
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
														median	MADM
Question 2(g)(1)	2	Frequencies	1		2		2	4			8	AGREE	7.0	1.6	
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
														median	MADM
Question 2(g)(1)	3	Frequencies	1		1	3	3	1			8	AGREE	7.0	1.4	
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
														median	MADM
Question 2(g)(1)	4	Frequencies	4		1		2	2			8	UNCERTAIN	5.0	3.3	
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
														median	MADM
Question 2(g)(1)	5	Frequencies	4		1		2	2			8	UNCERTAIN	5.0	3.3	
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
														median	MADM
Question 2(g)(1)	6	Frequencies	4		1		2	2			8	UNCERTAIN	5.0	3.3	
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
														median	MADM
Question 2(g)(2)	1	Frequencies	2	1		1		1	4		8	UNCERTAIN*	8.0	3.0	
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
														median	MADM
Question 2(g)(2)	2	Frequencies	2	1		1		1	4		8	UNCERTAIN*	8.0	3.0	
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
														median	MADM
Question 2(g)(2)	3	Frequencies	2		1	1		5			8	AGREE	9.0	2.6	
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
														median	MADM
Question 2(g)(2)	4	Frequencies	3		1			5			8	AGREE	9.0	3.1	
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
														median	MADM
Question 2(g)(2)	5	Frequencies	3		1			5			8	AGREE	9.0	3.1	
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
														median	MADM
Question 2(g)(2)	6	Frequencies	3		1			5			8	AGREE	9.0	3.1	
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
														median	MADM

Overall

Question 2(k) 1	Frequencies	3	1	1	1	1	1	1	1	1	8	UNCERTAIN*	3.0	2.4		
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(k) 2	Frequencies	3	1	2	1	1	1	1	1	8	UNCERTAIN*	3.0	2.1			
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(k) 3	Frequencies	4	1	1	1	1	1	1	8	DISAGREE	2.0	2.2				
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(n) 1	Frequencies	2	7	3	2	1	2	2	2	2	DISAGREE	2.0	1.0			
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(n) 2	Frequencies	2	8	2	3	2	2	2	2	2	DISAGREE	2.0	0.9			
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(n) 3	Frequencies	2	7	3	2	1	2	2	2	2	DISAGREE	2.0	1.0			
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(n) 4	Frequencies	1	2	2	1	1	2	2	2	8	DISAGREE	3.0	1.4			
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(n) 5	Frequencies	1	3	1	1	1	2	2	2	8	DISAGREE	3.0	1.6			
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(n) 6	Frequencies	1	2	2	1	1	2	2	2	8	DISAGREE	3.0	1.4			
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(p)(1) 1	Frequencies	2	1	1	2	1	2	1	2	7	UNCERTAIN	5.0	2.1			
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(p)(1) 2	Frequencies	2	1	1	2	2	3	3	3	6	UNCERTAIN	4.0	1.8			
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(p)(1) 3	Frequencies	2	2	2	1	1	3	3	3	6	DISAGREE	3.0	1.9			
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(p)(1) 4	Frequencies	1	1	1	1	1	2	1	2	9	UNCERTAIN	5.5	2.1			
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(p)(1) 5	Frequencies	1	1	1	1	1	2	1	2	9	UNCERTAIN	5.5	2.1			
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(p)(1) 6	Frequencies	1	1	1	1	1	2	1	2	9	UNCERTAIN	5.0	2.3			
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(p)(2) 1	Frequencies	2	2	2	2	1	9	9	9	3	AGREE	9.0	1.5			
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(p)(2) 2	Frequencies	2	2	2	2	1	8	8	8	3	AGREE	9.0	1.7			
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(p)(2) 3	Frequencies	2	2	2	1	2	8	8	8	3	AGREE	9.0	1.7			
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(p)(2) 4	Frequencies	2	2	2	1	1	7	7	7	6	AGREE	9.0	1.7			
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(p)(2) 5	Frequencies	2	2	2	1	1	7	7	7	6	AGREE	9.0	1.7			
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 2(p)(2) 6	Frequencies	2	2	2	1	1	7	7	7	6	AGREE	9.0	1.7			
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(b) 3	Frequencies	2	1	2	2	5	1	3	3	1	AGREE	7.0	1.8			
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(b) 6	Frequencies	2	2	2	2	3	1	3	3	2	UNCERTAIN	6.0	2.0			
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(c) 1	Frequencies	2	1	1	1	4	4	3	3	1	AGREE	7.0	1.6			
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 3(c) 2	Frequencies	1	1	2	1	2	5	2	2	1	AGREE	7.0	1.9			
	Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM

Overall

Question 3(c)	3	Frequencies	4	2	4	1	1	1	2	2	2	DISAGREE	3.0	2.0	
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
													median	MADM	
Question 3(c)	4	Frequencies	1	1	3	1	3	6	3	2	1	AGREE	7.0	1.3	
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
													median	MADM	
Question 3(c)	5	Frequencies	1	2	2	2	6	1	2	1	AGREE	7.0	1.8		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
													median	MADM	
Question 3(c)	6	Frequencies	4	3	1	1	1	1	3	2	UNCERTAIN*	3.0	2.6		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
													median	MADM	
Question 3(h)	1	Frequencies	4	2	3	1	1	1	2	1	2	DISAGREE	3.0	2.0	
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
													median	MADM	
Question 3(h)	2	Frequencies	4	1	4	1	1	3	1	2	DISAGREE	3.0	2.0		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
													median	MADM	
Question 3(h)	3	Frequencies	3	3	4	1	3	1	2	2	UNCERTAIN	5.0	1.9		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
													median	MADM	
Question 3(h)	4	Frequencies	4	2	3	1	1	3	1	2	DISAGREE	3.0	2.1		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
													median	MADM	
Question 3(h)	5	Frequencies	4	1	3	2	1	3	1	2	DISAGREE	3.0	2.1		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
													median	MADM	
Question 3(h)	6	Frequencies	3	3	3	2	3	1	2	2	UNCERTAIN	5.0	2.0		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
													median	MADM	
Question 3(l)	6	Frequencies	6	1	2	1	1	2	4	2	DISAGREE	2.0	2.3		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
													median	MADM	
Question 3(m)	1	Frequencies	5	4	1	3	1	1	1	1	DISAGREE	2.0	2.3		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
													median	MADM	
Question 3(m)	2	Frequencies	2	1	2	3	5	3	1	2	UNCERTAIN	6.0	2.0		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
													median	MADM	
Question 3(m)	4	Frequencies	4	4	1	2	2	1	2	1	UNCERTAIN*	3.0	2.3		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
													median	MADM	
Question 3(n)	1	Frequencies	1	1	1	3	2	7	2	2	AGREE	8.0	1.5		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
													median	MADM	
Question 3(n)	2	Frequencies	1	2	3	2	7	2	2	7	AGREE	8.0	1.4		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
													median	MADM	
Question 3(o)	1	Frequencies	1	2	1	1	1	3	3	3	AGREE	7.0	1.9		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
													median	MADM	
Question 3(o)	2	Frequencies	1	2	1	1	2	4	1	3	AGREE	7.0	2.1		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
													median	MADM	
Question 3(p)	1	Frequencies	1	2	3	3	7	1	3	7	AGREE	8.0	1.3		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
													median	MADM	
Question 3(p)	2	Frequencies	1	2	3	1	6	2	6	1	AGREE	7.5	1.3		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
													median	MADM	
Question 4(g)	1	Frequencies	3	2	2	1	3	3	3	3	UNCERTAIN	3.5	1.9		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
													median	MADM	
Question 4(g)	2	Frequencies	3	2	2	1	3	3	3	3	UNCERTAIN	3.5	1.9		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
													median	MADM	
Question 4(g)	3	Frequencies	3	2	2	1	3	1	2	3	UNCERTAIN	3.5	1.9		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
													median	MADM	
Question 4(g)	4	Frequencies	3	2	3	1	2	2	4	4	DISAGREE	3.0	1.6		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
													median	MADM	
Question 4(g)	5	Frequencies	3	2	3	1	2	2	4	4	DISAGREE	3.0	1.6		
		Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating
													median	MADM	

Overall

Question 4(g)	Frequencies 6	3	2	3	1	2	1	1		4	DISAGREE	3.0	1.5
	<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>
											<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 4(j)	Frequencies 1	2	2	1	2	2	2	2		4	UNCERTAIN	5.0	1.9
	<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>
											<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 4(j)	Frequencies 2	2	2	1	3	1	2	2		4	UNCERTAIN	5.0	1.8
	<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>
											<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 4(j)	Frequencies 3	3	2	1	2	1	2	2		4	UNCERTAIN	5.0	2.2
	<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>
											<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 4(j)	Frequencies 4	3	1	1	1	1	2	1	2	5	UNCERTAIN	4.5	2.3
	<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>
											<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 4(j)	Frequencies 5	3	1	1	2	1	1	1	2	5	UNCERTAIN	4.0	2.2
	<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>
											<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 4(j)	Frequencies 6	4	2	1	1	1	1	2		5	UNCERTAIN	3.5	2.3
	<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>
											<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 4(l)	Frequencies 3	2	1	1	5	1	1			6	UNCERTAIN	5.0	1.5
	<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>
											<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 4(m)(1)	Frequencies 1	2	3	1	3	3	1			4	UNCERTAIN	4.0	1.5
	<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>
											<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 4(m)(1)	Frequencies 2	2	3	1	4	2	1			4	UNCERTAIN	4.0	1.4
	<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>
											<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 4(m)(2)	Frequencies 1	3	1	1	4		2	1		5	UNCERTAIN	4.0	1.9
	<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>
											<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 4(m)(2)	Frequencies 2	3	1	1	4		2	1		5	UNCERTAIN	4.0	1.9
	<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>
											<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 4(m)(2)	Frequencies 3	3	1	1	3	1	2	1		5	UNCERTAIN	4.0	2.0
	<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>
											<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 4(m)(2)	Frequencies 4	3	1	1	4		2	1		5	UNCERTAIN	4.0	1.9
	<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>
											<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 4(m)(2)	Frequencies 5	3	1	1	4		2	1		5	UNCERTAIN	4.0	1.9
	<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>
											<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 4(m)(2)	Frequencies 6	3	1	1	3	1	1	1		6	UNCERTAIN	4.0	1.9
	<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>
											<i>group rating</i>	<i>median</i>	<i>MADM</i>

Overall

E. Clinical Scenarios Questionnaire 3 Sent to Wider Group

Note: For reference, the Wider Group were given the ratings of the GDG which are listed below in Column 3

Questionnaire to support the work of the NICE CFS/ME Guideline Development Group

This questionnaire does not express the content of the National Institute for Health and Clinical Excellence (NICE) CFS/ME Guideline or the individual opinions of guideline development group members (GDG), NICE or the National Collaborating Centre for Primary Care NCC-PC methods team.

Remember that this questionnaire only contains those statements the GDG could not reach a consensus on and a 20% random selection of those they could.

Any questionnaire that does not have its identifying number on it will not be able to be processed.

Rate your agreement with the statement and not your agreement with the GDG rating.

Number Your details

**Please input
answer here**

Overall

A About you (please select ONE of the options below):

- 1) I have / have had CFS/ME
- 2) I am a carer for a person who has / had CFS/ME
- 3) I am a health professional

B I am a health professional and my role is (Please select the ONE box that best describes your health profession by typing 'Yes'):

- 1) Dietitian
- 2) General Practitioner
- 3) Immunologist
- 4) Neurologist
- 5) Nurse
- 6) Occupational Health Physician
- 7) Occupational Therapist
- 8) Psychiatrist
- 9) Psychologist
- 10) Specialist in Infectious diseases
- 11) Other (please specify)

- C** Age:
1) I am over 16 years old
2) I am under 16 years old

Number Statements

GDG rating

DIAGNOSIS, INVESTIGATIONS and REFERRAL

- | | | |
|---|--|------------------|
| 1 | Symptoms indicative of CFS/ME in an ADULT can, but not necessarily always, include....

Recurrent flu-like symptoms | agree |
| 2 | Symptoms indicative of CFS/ME in an ADULT can, but not necessarily always, include....

Orthostatic intolerance (problems standing upright), nausea and palpitations | uncertain |
| 3 | After ruling out other possible likely causes of the symptoms, a diagnosis of CFS/ME should be made in an ADULT

After symptoms have persisted for at least 6 weeks | disagree |

Overall

- 4 After ruling out other possible likely causes of the symptoms, a diagnosis of CFS/ME should be made in an **ADULT**..... **agree**
- After symptoms have persisted for at least 6 months
- 5 Symptoms indicative of CFS/ME in a **CHILD** can, but not necessarily always, include.... **uncertain**
- Recurrent flu-like symptoms
- 6 Symptoms indicative of CFS/ME in a **CHILD** can, but not necessarily always, include..... **uncertain**
- Orthostatic intolerance (problems standing upright), nausea and palpitations
- 7 Symptoms indicative of CFS/ME in a **CHILD** can, but not necessarily always, include..... **uncertain**
- Significant weight change(s)
- 8 After ruling out other possible likely causes of the symptoms, a diagnosis of CFS/ME should be made in a **CHILD**..... **uncertain**
- After symptoms have persisted for 6 weeks
- 9 The following investigation or examination is appropriate in establishing a diagnosis of CFS/ME in an **ADULT**..... **uncertain**
- Endoscopy if there are gastro-intestinal (gut) symptoms

Overall

- 10 The following investigation or examination is appropriate in establishing a diagnosis of CFS/ME in an **ADULT**.... **uncertain**
A blood test measuring Ferritin levels
- 11 The following investigation or examination is appropriate in establishing a diagnosis of CFS/ME in an **ADULT**.... **uncertain**
A blood test measuring vitamin B12 level
- 12 In the absence of any history to suggest a viral cause, general virus serology, including heterophile antibody tests for Infectious Mononucleosis is appropriate **uncertain**
- 13 In the absence of any history to suggest a viral cause, serology testing for latent infections: toxoplasma, EBV (Epstein Barr virus), CMV (cytomegalovirus) is appropriate **uncertain**
- 14 The following investigation or examination is appropriate in establishing a diagnosis of CFS/ME in a **CHILD**.... **uncertain**
Testing for coeliac antibodies if there are gastro-intestinal (gut) symptoms
- 15 The following investigation or examination is appropriate in establishing a diagnosis of CFS/ME in a **CHILD**.... **disagree**

Overall

Measurement of circulating red blood cell volume

- 16 The following investigation or examination is appropriate in establishing a diagnosis of CFS/ME in a **CHILD**.... **uncertain**

A blood test measuring Ferritin levels

- 17 In the absence of any history to suggest a viral cause, serology testing for latent infections: toxoplasma, EBV (Epstein Barr virus), CMV (cytomegalovirus) in a **CHILD** is appropriate... **disagree**

- 18 For an **ADULT** with **MILD** CFS/ME symptoms a referral for specialised care is appropriate... **uncertain**

only after symptoms have persisted for about 3-4 months following treatment in primary care

- 19 For an **ADULT** with **MODERATE** CFS/ME symptoms a referral for specialised care is appropriate.... **uncertain**

only after symptoms have persisted for about 4-6 weeks following treatment in primary care

- 20 For an **ADULT** with **SEVERE** CFS/ME symptoms a referral for specialised care is appropriate.... **uncertain**

as soon as symptoms occur

Overall

21 For an **ADULT** with **SEVERE** CFS/ME symptoms a referral for specialised care is appropriate.... **uncertain**

only after symptoms have persisted for about 4-6 weeks following treatment in primary care

22 For a **CHILD** with **MILD** CFS/ME symptoms a referral for specialised care is appropriate.... **uncertain**

only after symptoms have persisted for about 3-4 months following treatment in primary care

23 For a **CHILD** with **MILD** CFS/ME symptoms a referral for specialised care is appropriate.... **uncertain**

only after symptoms have persisted for at least 6 months following treatment in primary care

24 For a **CHILD** with **MODERATE** CFS/ME symptoms a referral for specialised care is appropriate.... **uncertain**

only after symptoms have persisted for about 4-6 weeks following treatment in primary care

25 For a **CHILD** with **MODERATE** CFS/ME symptoms a referral for specialised care is appropriate.... **agree**

only after symptoms have persisted for about 3-4 months following treatment in primary

Overall

care

- 26 For a **CHILD** with **MODERATE** CFS/ME symptoms a referral for specialised care is appropriate.... **agree**

only after symptoms have persisted for at least 6 months following treatment in primary care

- 27 For a **CHILD** with **SEVERE** CFS/ME symptoms a referral for specialised care is appropriate.... **uncertain**

as soon as symptoms occur

- 28 For a **CHILD** with **SEVERE** CFS/ME symptoms a referral for specialised care is appropriate.... **agree**

only after symptoms have persisted for at least 6 months following treatment in primary care

PHARMACOLOGICAL INTERVENTIONS (including medications)

Please note that in this section the statements ask you to rate your agreement with how [inappropriate](#) something is. Having given careful thought to the potential indications for use of different pharmacological interventions, the guideline development group (GDG) needs your views on when these interventions should not be used. By inappropriate, we mean that the medication should not be prescribed, either because the intervention would be

Overall

harmful or would not be effective.

- 29 The use of Selective Serotonin Re-uptake Inhibitors (SSRIs) (for example Fluoxetine/Prozac or Paroxetine/Seroxat) where the individual is moderately or severely depressed is **INAPPROPRIATE**.... **disagree**
- for an **ADULT** with **MODERATE** CFS/ME.
- 30 The use of Selective Serotonin Re-uptake Inhibitors (SSRIs) (for example Fluoxetine/Prozac) where the individual is moderately or severely depressed is **INAPPROPRIATE**.... **uncertain**
- for a **CHILD** with **MILD** CFS/ME.
- 31 The use of Selective Serotonin Re-uptake Inhibitors (SSRIs) (for example Fluoxetine/Prozac) where the individual is moderately or severely depressed is **INAPPROPRIATE**.... **uncertain**
- for a **CHILD** with **MODERATE** CFS/ME.
- 32 The use of Selective Serotonin Re-uptake Inhibitors (SSRIs) (for example Fluoxetine/Prozac) where the individual is moderately or severely depressed is **INAPPROPRIATE**.... **uncertain**
- for a **CHILD** with **SEVERE** CFS/ME.

Overall

- 33 The use of Venlafaxine where the individual has pain difficulties AND is NOT moderately or severely depressed is **INAPPROPRIATE**... **agree**
for an **ADULT** with **SEVERE** CFS/ME.
- 34 The use of Tricyclics (for example Amitriptyline) where the individual has sleep and pain difficulties AND is moderately or severely depressed is **INAPPROPRIATE**.... **uncertain**
for a **CHILD** with **MODERATE** CFS/ME.
- 35 The use of Tricyclics (for example Amitriptyline) where the individual has sleep and pain difficulties AND is moderately or severely depressed is **INAPPROPRIATE**.... **uncertain**
for a **CHILD** with **SEVERE** CFS/ME.
- 36 The use of Tricyclics (for example Amitriptyline) where the individual has sleep and pain difficulties AND is NOT moderately or severely depressed is **INAPPROPRIATE**..... **uncertain**
for a **CHILD** with **MILD** CFS/ME.
- 37 The use of Tricyclics (for example Amitriptyline) where the individual has sleep and pain difficulties AND is NOT moderately or severely depressed is **INAPPROPRIATE**..... **uncertain**
for a **CHILD** with **MODERATE** CFS/ME.
- 38 The use of Tricyclics (for example Amitriptyline) where the individual has sleep and pain difficulties AND is NOT moderately or severely depressed is **INAPPROPRIATE**..... **uncertain**

Overall

for a **CHILD** with **SEVERE** CFS/ME.

39 The use of Gabapentin, where the individual has pain difficulties is **INAPPROPRIATE**..... **uncertain**

for an **ADULT** with **MILD** CFS/ME.

40 The use of Gabapentin, where the individual has pain difficulties is **INAPPROPRIATE**..... **uncertain**

for an **ADULT** with **MODERATE** CFS/ME.

41 The use of Gabapentin, where the individual has pain difficulties is **INAPPROPRIATE**..... **uncertain**

for an **ADULT** with **SEVERE** CFS/ME.

42 The use of Gabapentin, where the individual has pain difficulties is **INAPPROPRIATE**..... **uncertain**

for a **CHILD** with **MILD** CFS/ME .

43 The use of Gabapentin, where the individual has pain difficulties is **INAPPROPRIATE**..... **uncertain**

Overall

for a **CHILD** with **MODERATE** CFS/ME.

- 44 The use of Gabapentin, where the individual has pain difficulties is **uncertain**
INAPPROPRIATE.....

for a **CHILD** with **SEVERE** CFS/ME.

- 45 The use of Monoamine oxidase inhibitors (anti-depressants -for example phenelzine or isocarboxazid) where the individual has pain difficulties AND the individual is moderately or severely depressed is **uncertain**
INAPPROPRIATE....

for a **CHILD** with **MILD** CFS/ME.

- 46 The use of Monoamine oxidase inhibitors (anti-depressants -for example phenelzine or isocarboxazid) where the individual has pain difficulties AND the individual is moderately or severely depressed is **uncertain**
INAPPROPRIATE....

for a **CHILD** with **MODERATE** CFS/ME.

- 47 The use of Monoamine oxidase inhibitors (for example phenelzine or isocarboxazid) where the individual has pain difficulties AND the individual is moderately or severely depressed is **uncertain**
INAPPROPRIATE....

for a **CHILD** with **SEVERE** CFS/ME.

- 48 The use of Monoamine oxidase inhibitors (anti-depressants -for example phenelzine or isocarboxazid) where the individual has pain difficulties AND the individual is NOT **uncertain**

Overall

moderately or severely depressed is **INAPPROPRIATE**....

for an **ADULT** with **MILD** CFS/ME.

- 49 The use of Monoamine oxidase inhibitors (anti-depressants -for example phenelzine or isocarboxazid) where the individual has pain difficulties AND the individual is NOT moderately or severely depressed is **INAPPROPRIATE**.... **uncertain**

for an **ADULT** with **MODERATE** CFS/ME.

- 50 The use of Monoamine oxidase inhibitors (anti-depressants- for example phenelzine or isocarboxazid) where the individual has pain difficulties AND the individual is NOT moderately or severely depressed is **INAPPROPRIATE**.... **agree**

for an **ADULT** with **MODERATE** CFS/ME.

- 51 The use of Melatonin where the individual has sleep difficulties is **INAPPROPRIATE**.... **uncertain**

for a **CHILD** with **MILD** CFS/ME.

- 52 The use of Melatonin where the individual has sleep difficulties is **INAPPROPRIATE**.... **uncertain**

for a **CHILD** with **MODERATE** CFS/ME.

- 53 The use of Melatonin where the individual has sleep difficulties is **INAPPROPRIATE**.... **disagree**

Overall

for a **CHILD** with **SEVERE** CFS/ME.

- 54 The use of gut anti-spasmodics (such as mebeverine, alverine and peppermint oil) where the individual has bowel symptoms is **INAPPROPRIATE**... **disagree**

for an **ADULT** with **MILD** CFS/ME.

- 55 The use of gut anti-spasmodics (such as mebeverine, alverine and peppermint oil) where the individual has bowel symptoms is **INAPPROPRIATE**... **disagree**

for an **ADULT** with **MODERATE** CFS/ME.

- 56 The use of gut anti-spasmodics (such as mebeverine, alverine and peppermint oil) where the individual has bowel symptoms is **INAPPROPRIATE**... **disagree**

for a **CHILD** with **MILD** CFS/ME.

- 57 The use of skeletal anti-spasmodics (such as diazepam, baclofen, and clonazepam) where the individual has moderate or severe muscle pain, cramps or twitching is **INAPPROPRIATE**.... **uncertain**

for an **ADULT** with **MILD** CFS/ME.

- 58 The use of skeletal anti-spasmodics (such as diazepam, baclofen, and clonazepam) where the individual has moderate or severe muscle pain, cramps or twitching is **INAPPROPRIATE**.... **uncertain**

Overall

for an **ADULT** with **MODERATE** CFS/ME

- 59 The use of skeletal anti-spasmodics (such as diazepam, baclofen, and clonazepam) where the individual has moderate or severe muscle pain, cramps or twitching is **INAPPROPRIATE**.... **uncertain**

for a **CHILD** with **MILD** CFS/ME.

- 60 The use of skeletal anti-spasmodics (such as diazepam, baclofen, and clonazepam) where the individual has moderate or severe muscle pain, cramps or twitching is **INAPPROPRIATE**.... **uncertain**

for a **CHILD** with **MODERATE** CFS/ME.

- 61 The use of skeletal anti-spasmodics (such as diazepam, baclofen, and clonazepam) where the individual has moderate or severe muscle pain, cramps or twitching is **INAPPROPRIATE**.... **uncertain**

for a **CHILD** with **SEVERE** CFS/ME.

BEHAVIOURAL APPROACHES

- 62 A programme based upon planned increases in duration of physical activity/exercise followed by increases in intensity leading to aerobic exercise (i.e. exercise which increases the pulse rate) is appropriate.... **uncertain**

Overall

for a **CHILD** with **SEVERE** CFS/ME.

- 63 A programme consisting of increases of aerobic exercise (i.e. exercise which increases the pulse rate) is appropriate.... **agree**

for an **ADULT** with **MODERATE** CFS/ME.

- 64 A programme consisting of increases of aerobic exercise (i.e. exercise which increases the pulse rate) is appropriate.... **uncertain**

for a **CHILD** with **SEVERE** CFS/ME.

- 65 A strategy that always maintains activity levels at substantially less than full capacity in order to have reserve energy for the body to heal itself (can be known as the envelope theory) is appropriate.... **disagree**

for an **ADULT** with **MODERATE** CFS/ME.

- 66 A strategy that always maintains activity levels at substantially less than full capacity in order to have reserve energy for the body to heal itself (can be known as the envelope theory) is appropriate.... **uncertain**

for an **ADULT** with **SEVERE** CFS/ME.

- 67 A strategy that always maintains activity levels at substantially less than full capacity in order to have reserve energy for the body to heal itself (can be known as the envelope theory) is appropriate.... **uncertain**

Overall

theory) is appropriate....

for a **CHILD** with **SEVERE** CFS/ME.

68 Equipment and adaptations (e.g. a wheelchair) that allow patients to improve independence and quality of life should be provided.... **uncertain**

for an **ADULT** with **MODERATE** CFS/ME.

69 Equipment and adaptations (e.g. a wheelchair) that allow patients to improve independence and quality of life should be provided.... **uncertain**

for a **CHILD** with **MILD** CFS/ME.

70 **Individual** Cognitive Behaviour Therapy (CBT) is appropriate.... **agree**

for an **ADULT** with CFS/ME.

71 **Group** Cognitive Behaviour Therapy (CBT) is appropriate.... **agree**

for an **ADULT** with CFS/ME.

DIETARY AND COMPLEMENTARY APPROACHES

Overall

- 72 Essential Fatty acids is appropriate for the treatment of.... **uncertain**
an **ADULT** with **MILD** CFS/ME.
- 73 Essential Fatty acids is appropriate for the treatment of.... **uncertain**
an **ADULT** with **MODERATE** CFS/ME.
- 74 Essential Fatty acids is appropriate for the treatment of.... **uncertain**
an **ADULT** with **SEVERE** CFS/ME.
- 75 Essential Fatty acids is appropriate for the treatment of.... **disagree**
a **CHILD** with **SEVERE** CFS/ME.
- 76 A clinically supervised exclusion diet followed by food challenges where the individual has moderate or severe bowel symptoms is appropriate for.... **uncertain**
an **ADULT** with **MILD** CFS/ME.
- 77 A clinically supervised exclusion diet followed by food challenges where the individual has moderate or severe bowel symptoms is appropriate for.... **uncertain**
an **ADULT** with **MODERATE** CFS/ME.

Overall

- 78 A clinically supervised exclusion diet followed by food challenges where the individual has moderate or severe bowel symptoms is appropriate for.... **uncertain**
an **ADULT** with **SEVERE** CFS/ME.
- 79 A clinically supervised exclusion diet followed by food challenges where the individual has moderate or severe bowel symptoms is appropriate for.... **uncertain**
a **CHILD** with **MILD** CFS/ME.
- 80 A clinically supervised exclusion diet followed by food challenges where the individual has moderate or severe bowel symptoms is appropriate for.... **uncertain**
a **CHILD** with **MODERATE** CFS/ME.
- 81 A clinically supervised exclusion diet followed by food challenges where the individual has moderate or severe bowel symptoms is appropriate for.... **uncertain**
a **CHILD** with **SEVERE** CFS/ME.
- 82 Acupuncture by a registered therapist is appropriate for symptom control in..... **uncertain**
an **ADULT** with **SEVERE** CFS/ME.
- 83 Homeopathy by a registered therapist is appropriate for symptom control in... **uncertain**

Overall

an **ADULT** with **MILD** CFS/ME.

84 Homeopathy by a registered therapist is appropriate for symptom control in... **uncertain**

an **ADULT** with **MODERATE** CFS/ME.

85 Other complementary therapies by a registered therapist are appropriate for symptom control in... **uncertain**

an **ADULT** with **MILD** CFS/ME.

86 Other complementary therapies by a registered therapist are appropriate for symptom control in... **uncertain**

an **ADULT** with **MODERATE** CFS/ME.

87 Other complementary therapies by a registered therapist are appropriate for symptom control in... **uncertain**

an **ADULT** with **SEVERE** CFS/ME.

88 Other complementary therapies by a registered therapist are appropriate for symptom control in... **uncertain**

a **CHILD** with **MILD** CFS/ME.

Overall

89 Other complementary therapies by a registered therapist are appropriate for symptom control in... **uncertain**

a **CHILD** with **MODERATE** CFS/ME.

90 Other complementary therapies by a registered therapist are appropriate for symptom control in... **uncertain**

a **CHILD** with **SEVERE** CFS/ME.

Comments

If you would particularly like to briefly clarify your ratings for a specific statement please do so here.

Please do not use this section to comment on the content of the questionnaire, guideline (including the development process) or the evidence review. Any comments you have concerning these issues should be coordinated with your nominating stakeholder organisation and submitted at the public consultation phase later this summer. For further information about this process can be found at www.nice.org.uk.

Comments (please indicate which question your comment refers to).

F: Results Questionnaire 3

Final GDG ratings of recommendations

Recommendations

- 1.1.1.1 Shared decision-making between a person with CFS/ME and healthcare professionals should take place during diagnosis and all phases of care. The healthcare professional should:
- acknowledge the reality and impact of the condition and the symptoms
 - provide information about the range of interventions and management strategies as detailed in this guideline, (such as the benefits, risks, likely side effects)
 - provide information on the possible causes, nature and course of CFS/ME, and returning to work or education
 - take account of patient age (particularly in younger children aged under 12 years), preferences, experience and outcome of previous treatment(s)
 - offer information about local and national self-help groups and support groups for patients and their carers (see also the NHS Expert Patients Programme www.expertpatients.nhs.uk, and in Wales www.eppwales.org).
- 1.1.1.2 Healthcare professionals should be aware that all people with CFS/ME have the right to refuse, or withdraw from, any component of a care plan without detriment to the provision of other aspects of care, as do all patients receiving care in the NHS.
- 1.1.1.3 The definitions in the Glossary in this guideline should be used for consistency.
- 1.1.1.4 Healthcare professionals should recognise that the patient is in charge of the aims and goals of the overall management plan. The pace of progression throughout the course of the intervention should be mutually agreed.
- 1.1.1.5 Healthcare professionals responsible for caring for people with CFS/ME should have appropriate skills and expertise in the condition.
- 1.1.1.6 Healthcare professionals should follow best practice as described in the National Service Framework for Children (for England www.dh.gov.uk which includes an exemplar pathway for CFS/ME, or for Wales, www.wales.nhs.uk) when providing care for children and young people.

Overall

- 1.1.1.7 To facilitate effective management of the condition, healthcare professionals should aim to establish a supportive and collaborative relationship with the person with CFS/ME and their carers. This engagement with the family is important for all people with CFS/ME, but is particularly important for children and people with severe CFS/ME.
- 1.1.1.8 The following support should be offered to any person diagnosed with CFS/ME.
- Information concerning the illness (see section xx).
 - Acceptance and understanding.
 - Assistance negotiating the healthcare, benefits and social care systems.
 - Assistance with occupational activities including work and education where appropriate.
- 1.1.1.9 Healthcare professionals should provide appropriate diagnostic and therapeutic options to people with CFS/ME in ways that are suitable for the individual patient. This may require providing domiciliary services (including specialist assessment), or other modes of delivery such as telephone or email.
- 1.1.1.10 An individualised management plan should be developed with the person with CFS/ME, and their carers where appropriate. The plan should be reviewed and changes documented at each contact. It should include:
- relevant symptoms and history
 - plans for care, including those for setback/relapses
 - information and support needs
 - any education, training or employment support needs
 - details of the healthcare professionals involved in care and their contact details.
- 1.1.1.11 A designated healthcare professional should be responsible for coordinating care for each person with CFS/ME.
- 1.1.1.12 Healthcare professionals should provide accurate information to people at all stages of CFS/ME starting from when a diagnosis is first being considered. This should be tailored to the patient's circumstances, including the stage and duration of the condition, symptoms experienced and relevant personal and social factors. The 'Understanding NICE guidance' document that accompanies this guideline is a good starting point and is freely available from the NHS response line (phone 0870 1555 455 and quote reference XX). [[Note: this document will be available at publication of this guideline.]]
- 1.1.1.13 Information should be available in a variety of formats (printed copy, electronic, audio) to allow access by people with CFS/ME and their

carers at home and in the clinical setting.

1.2 **Presentation**

1.2.1 **Presenting symptoms suspicious of CFS/ME**

1.2.1.1 CFS/ME is recognised on clinical grounds alone. Primary healthcare professionals should be familiar with and be able to identify the characteristic features of CFS/ME.

1.2.1.2 Healthcare professionals should consider the possibility of CFS/ME if a person has:

- fatigue that is all of the following:
 - new or specific onset (that is, not life-long)
 - persistent and/or recurrent
 - unexplained by other conditions
 - results in substantial reduction in previous activity level
 - characterised by post-exertional malaise and/or fatigue (typically delayed, for example by at least 24 hours, with slow recovery over several days), and
- has one or more of the following symptoms:
 - difficulty with sleeping (such as, insomnia, hypersomnia, unrefreshing sleep, disturbed sleep/wake cycle)
 - muscles and/or joint pain (multi-site without evidence of inflammation)
 - significant headaches
 - painful lymph nodes without pathological enlargement
 - sore throat
 - cognitive dysfunction (such as, difficulty thinking, inability to concentrate, impairment of short-term memory, difficulties with word-finding, planning/organising thoughts, information processing)
 - physical or mental exertion making symptoms worse
 - general malaise or 'flu-like' symptoms
 - dizziness and/or nausea
 - palpitations in the absence of identified cardiac pathology.

1.2.1.3 Healthcare professionals should be aware that the symptoms of CFS/ME fluctuate in severity and may change in nature over time.

1.2.1.4 Healthcare professionals should not attribute signs and symptoms to being part of CFS/ME without consideration and investigation; this may include such features as

Overall

- localising/focal neurological signs
- signs and symptoms of inflammatory arthritis or connective tissue disease
- significant weight loss
- sleep apnoea
- clinically significant lymphadenopathy
- any cardiorespiratory failure.

1.2.2 History, examinations and investigations

1.2.2.1 A full history (including exacerbating and alleviating factors, sleep disturbance, intercurrent stressors), appropriate physical examination, and assessment of psychological wellbeing should be carried out.

1.2.2.2 Before diagnosing CFS/ME, investigations should be carried out to exclude other diagnoses that could explain the symptoms. These should be tailored to the history, and signs and symptoms of the patient.

1.2.2.3 Investigations to exclude other diagnoses may include the following, but clinical judgment should be used.

- Urinalysis for protein, blood and glucose.
- Full blood count.
- Urea and electrolytes.
- Liver function.
- Thyroid function.
- Erythrocyte sedimentation rate/plasma viscosity.
- C-reactive protein.
- Random blood glucose.
- Serum creatinine.
- Screening blood tests for gluten sensitivity.
- Serum calcium.
- Creatine kinase.
- Assessment of blood ferritin levels (children and young people only).

1.2.2.4 The following tests should not be done routinely to aid diagnosis:

- The head-up tilt test.
- Auditory brainstem responses.
- Electrodermal conductivity.
- Folate levels

Overall

- 1.2.2.5 Serological testing should not be carried out unless there is indicative history of:
- chronic bacterial infections, such as borelliosis.
 - chronic viral infections, such as HIV, hepatitis B and C.
 - general virus infections, such as heterophile antibody tests for infectious mononucleosis.
 - latent infections, such as, toxoplasma, Epstein Barr virus (EBV), cytomegalovirus (CMV).

- 1.2.2.6 Tests for serum ferritin in adults should not be carried out unless a full blood count and other haematological indices suggest iron deficiency.

- 1.2.2.7 Tests for vitamin B12 deficiency should not be carried out unless a full blood count and mean cell volume show a macrocytosis.

1.2.3 Advice on symptom management before diagnosis

- 1.2.3.1 Advice on symptom management should not be delayed until a diagnosis is established. This advice should be tailored to the patient's specific symptoms and be aimed at minimising the impact of these on daily life and activities.

1.2.4 Re-assessment before diagnosis

- 1.2.4.1 Primary healthcare professionals should listen carefully to patients', families and/or carers' concerns and be prepared to reassess their initial opinion or to seek a second opinion from a colleague, for a patient in whom symptoms do not resolve as expected.

- 1.2.4.2 A child or young person who has symptoms suggestive of CFS/ME or disabling fatigue should be referred to a general paediatrician for assessment to exclude other diagnoses within 6 weeks of presentation.

- 1.2.4.3 Primary healthcare professionals should consider discussion with a specialist if there is uncertainty about the interpretation of signs and symptoms and whether a referral is needed. This may also enable the primary healthcare professional to communicate their concerns and a sense of urgency to secondary healthcare professionals when symptoms are unusual.

1.3 Diagnosis

1.3.1 Making a diagnosis

Overall

- 1.3.1.1 There are several diagnostic criteria for CFS/ME and the GDG does not recommend any specific one. However, there are key features of CFS/ME, and a diagnosis of CFS/ME should be reconsidered in adults if none of the following key features are present.
- post-exertional fatigue/malaise
 - cognitive difficulties
 - sleep disturbance
 - chronic pain.

- 1.3.1.2 An adult should be diagnosed with CFS/ME after symptoms have persisted for 4 months and other possible diagnoses have been excluded.

- 1.3.1.3 A child or young person should be diagnosed with CFS/ME by a general paediatrician after symptoms have persisted for 3 months and other possible diagnoses have been excluded.

- 1.3.1.4 When a diagnosis of CFS/ME is made, healthcare professionals should provide honest, realistic information about CFS/ME and promote cautious optimism.

- 1.3.1.5 Healthcare professionals should advise patients that most people with CFS/ME will improve over time, and that with appropriate management, some people will recover and be able to resume work and normal activities, with the prognosis in children and young people being more optimistic. However, others will continue to experience symptoms or relapse and some people with severe CFS/ME may remain housebound.

1.4 *General management strategies after diagnosis*

1.4.1 Symptom management

- 1.4.1.1 There is no known pharmacological treatment or cure for CFS/ME. However, symptoms of CFS/ME should be managed conventionally (that is, as per usual clinical practice).

- 1.4.1.2 No research evidence was found to support the greater intolerance and more severe adverse/side effects from drug treatment reported by some people with CFS/ME. However, when patients have concerns, healthcare professionals may consider starting drug treatment for CFS/ME symptoms at a lower dose than in usual clinical practice. The dose may be increased gradually, in agreement with the patient.

Overall

1.4.1.3 Drug treatment for children and young people with CFS/ME should be started by a general paediatrician. However, prescribing may be continued in primary care depending on the preferences of the patient, their carers and local circumstances.

1.4.1.4 If a person experiences nausea as part of CFS/ME, this should be managed conventionally including giving advice on eating little and often, snacking on dry starchy foods and sipping fluids. The use of anti-emetic drugs should only be considered if the nausea is severe.

1.4.1.5 If a person experiences bowel symptoms as part of CFS/ME, these should be managed conventionally. Please refer to the NICE IBS guideline for further information.

1.4.1.6 Although exclusion diets are not generally recommended for managing CFS/ME, many patients find them helpful in managing symptoms including bowel symptoms. If a patient undertakes an exclusion diet or dietary manipulation, healthcare professionals should seek advice from a dietitian because of the risk of malnutrition.

1.4.2 Function and quality-of-life management

Sleep management

1.4.2.1 Healthcare professionals should provide tailored sleep management advice that includes the following. See DH publication for details

- Explaining the role and effect of disordered sleep or sleep dysfunction in CFS/ME.
- Identifying the common changes in sleep seen in CFS/ME that may exacerbate fatigue symptoms (such as insomnia, hypersomnia, sleep reversal, and non-refreshing sleep).
- Providing general advice on good sleep hygiene.
- Introducing changes to sleep patterns gradually.
- Regular review.

1.4.2.2 Sleep management strategies may not result in improved sleep and rest for all people with CFS/ME. The possibility of an underlying sleep disorder or dysfunction should be considered and appropriate interventions provided.

1.4.2.3 Sleep management strategies should not include encouraging daytime sleeping and naps. Patients should be advised that excessive sleep does not generally improve physical or mental functioning and excessive periods of daytime sleep or frequent napping may further disrupt the sleep–wake cycle.

Overall

Rest periods

- 1.4.2.4 Rest periods are a component of all management strategies for CFS/ME. Healthcare professionals should advise people with CFS/ME on the role of rest, how to introduce rest periods into their daily routine, and the frequency and length appropriate for each person. This may include:
- limiting the length of rest periods to 30 minutes at a time
 - introducing 'low level' physical and cognitive activities (depending on the level of severity of symptoms)
 - using relaxation techniques such as guided visualisation and breathing techniques (see recommendation 1.4.2.x)

- 1.4.2.5 Healthcare professionals should review the use of rest periods regularly as part of the patient's management plan.

Relaxation

- 1.4.2.6 Relaxation techniques appropriate to the patient should be offered for the management of pain, sleep problems and comorbid stress or anxiety. There are a number of different relaxation techniques (such as guided visualisation or breathing techniques) that can be incorporated into rest periods. Please refer to ... (NHS relaxation booklet) for further information.

Pacing

- 1.4.2.7 Patients have reported pacing (cross ref to Glossary) to be helpful in self-managing CFS/ME. However, healthcare professionals should advise people with CFS/ME that, at present, there is no research evidence on the benefits or harms of pacing.

1.4.3 Diet

- 1.4.3.1 Healthcare professionals should emphasise the importance of a well-balanced diet in line with 'The Balance of Good Health'. They should work with the person with CFS/ME to develop strategies to minimise complications that may be caused by nausea, sore throat or additional physical limitations (such as food purchasing, preparation and eating).

- 1.4.3.2 Healthcare professionals should emphasise the importance of eating regularly, and including slow release starchy foods with meals and snacks. The physiological consequences of not doing so should be explained to the patient.

1.4.4 Equipment to maintain independence

Overall

- 1.4.4.1 For people with moderate or severe CFS/ME, provision of equipment and adaptations (such as a wheelchair, blue badge or stairlift) should be considered as part of an overall management plan. This may allow patients to improve their independence and quality of life.

1.4.5 Education and employment

- 1.4.4.2 Loss of education or employment is generally detrimental to health and well-being. Therefore, the patient's ability to continue in education or work should be addressed early in the care pathway for CFS/ME, and reviewed regularly as part of the ongoing management plan.

- 1.4.4.3 Healthcare professionals should proactively advise about fitness for work and education, and recommend flexible adjustments or adaptations to work or studies to assist people with CFS/ME to return to previous activities. This may include liaising with, with the patient's informed consent, employers, education providers and support services, such as:
- occupational health services
 - disability services through Jobcentre Plus (www.jobcentreplus.gov.uk/JCP/Customers/Helpfordisabledpeople/index.html)
 - Schools and Local Education Authorities disability advisers in universities and colleges
 - home education.

- 1.4.4.4 For people with CFS/ME who are able to continue at or return to education or employment, healthcare professionals should ensure that, with the patient's informed consent, employers, occupational health or education institutions have information on the condition and the agreed management plan.

Education

- 1.4.4.5 Healthcare professionals should follow the guidance from the Department for Education and Skills (www.dfes.gov.uk/sickchildren/) on education for children and young people with medical needs, or equivalent statutory guidance (Wales – to add ref).

- 1.4.4.6 There should be close liaison between health, social care and education to ensure a common understanding of goals. Healthcare professionals should discuss the use of a flexible approach, including home tuition and use of equipment that allows a gradual reintegration into education.

- 1.4.4.7 Time in education should not be used as a sole marker of progress of CFS/ME, nor should it be the only activity a person undertakes. There should be a balance between time spent attending school/college and doing homework, and home and social activities.

Overall

Employment

- 1.4.4.8 Where possible, issues around employment should be discussed with occupational health professionals, who will communicate with the treating clinicians and the patient's manager or human resources representative. When there is no access to occupational health services, the responsible clinician should liaise with the employer directly. Please refer to the guidance from NHS Plus (<http://www.nhsplus.nhs.uk>) on the Occupational Aspects of the Management of Chronic Fatigue Syndrome and the NICE guidance (<http://www.nice.org.uk/>) on the Management of Long Term Sickness and Incapacity.

1.4.5 Strategies that should not be used for CFS/ME

- 1.4.5.1 The following drugs are not recommended for the treatment of CFS/ME.

- Monoamine oxidase inhibitors.
- Glucocorticoids (such as hydrocortisone).
- Mineralocorticoids (such as fludrocortisone).
- Dexamphetamine.
- Methylphenidate.
- Thyroxine.
- Antiviral agents.

- 1.4.5.2 The following strategies should not be offered to people with CFS/ME:

- advice to undertake unsupervised, or unstructured, vigorous exercise (such as simply 'go to the gym' or 'exercise more') because this may worsen symptoms
- specialised management programmes (see section x) delivered by practitioners with no experience in the condition.

- 1.4.5.3 Healthcare professionals should be aware that there is no controlled trial evidence of benefit for the following strategies. However, there is considerable patient support (particularly for people with severe CFS/ME), and research is being done in these areas.

- Encouraging maintenance of activity levels at substantially less than full capacity to reserve energy for the body to heal itself (sometimes known as the envelope theory).
- Encouraging complete rest (cognitive, physical and emotional) during a setback/relapse.

1.5 Referral to specialised CFS/ME care

- 1.5.1.1 The decision to refer people with CFS/ME to specialised care should be based on the patient's needs, the type, duration, complexity and severity of their symptoms, and the presence of co-morbidities. The decision should be made jointly between the patient and the healthcare professional.

- 1.5.1.2 Unless an earlier referral to specialised care has been made, the GDG considered that:
- people with mild CFS/ME should be offered referral within 6 months of presentation
 - people with moderate CFS/ME should be offered referral within 3–4 months of presentation
 - people with severe CFS/ME should be offered referral immediately.

1.6 Specialised management

- 1.5.1.3 If general management strategies (see section xx) are found to be helpful, these should be continued after referral to specialised care.

1.6.1 Cognitive Behavioural Therapy (CBT), Graded Exercise Therapy (GET) and Activity Management programmes

- 1.6.1.1 An individualised, person-centred programme should be offered to people with CFS/ME. The objectives of the programme should be to:
- sustain or gradually extend, if possible, the patient's physical, emotional and cognitive capacity
 - manage the physical and emotional impact of their symptoms.

- 1.6.1.2 The rationale and content of the different programmes, including their potential benefits and risks, should be fully explained to the person with CFS/ME. Healthcare professionals should explain that no single strategy will be successful for all patients, or during all stages of the condition.

- 1.6.1.3 Healthcare professionals should recognise that the patient is in charge of the aims of the programme. The choice of the programme, its components, and progression throughout the programme should be mutually agreed and based on:
- the patient's age, preferences and needs
 - their skills, abilities and goals for managing their condition (such as improvement or treatment of deterioration of symptoms, prevention of relapse, or maintenance)
 - the severity and complexity of symptoms
 - physical and cognitive functioning.

- 1.6.1.4 Healthcare professionals should be aware that all people with CFS/ME have the right to refuse, or withdraw from, any component of a care plan without detriment to the provision of other aspects of care, as do all patients receiving care in the NHS.

- 1.6.1.5 CBT and/or GET should be offered to people with mild or moderate symptoms because currently these are the interventions for which there is the clearest research evidence of benefit.

Overall

- 1.6.1.6 If a full CBT or GET programme is inappropriate or not available, components of CBT or GET should be offered, either individually or more effectively in combination with:
- activity management strategies (see section X)
 - sleep management (see section X)
 - relaxation techniques (see section X).

- 1.6.1.7 The choice of programme, its components and progression through it should be reviewed regularly, taking into account the patient's goals and abilities. and other approaches agreed as necessary.

- 1.6.1.8 Healthcare professionals should advise patients that, if an increase in symptoms lasts for longer than a few days, or if they are severe or distressing, the patient should contact the healthcare professional.

Cognitive behavioural therapy (CBT)

- 1.6.1.9 CBT should only be delivered by a suitably trained CBT therapist with experience in CFS/ME, under appropriate clinical supervision. The therapist should adhere closely to empirically grounded therapy protocols.

- 1.6.1.10 A CBT programme should be offered on a one-to-one basis where possible.

- 1.6.1.11 A CBT programme should include the following.
- Acknowledging and validating the patient's symptoms and condition.
 - Explaining the CBT approach in CFS/ME, such as the relationship between thoughts, feelings, behaviours and symptoms, and the distinction between causal and perpetuating factors.
 - Discussing the patient's attitudes and expectations.
 - Developing a supportive and collaborative therapeutic relationship.
 - Developing a shared understanding of factors that affect CFS/ME.
 - Agreeing therapeutic goals.
 - Tailoring treatment to the patient's needs and level of functioning.

- 1.6.1.12 A CBT programme may include other components as appropriate for the patient which may include the following.
- Recording patterns of activity and rest, and thoughts, feelings and behaviours.
 - Establishing a stable and maintainable activity level (baseline) followed by a gradual and mutually agreed increase or decrease in

Overall

activity.

- Identifying perpetuating factors that may maintain or exacerbate CFS/ME symptoms to increase the patient's sense of control over symptoms.
- Addressing any over-vigilance to symptoms and related checking or reassurance-seeking behaviours by providing physiological explanations of symptoms and using refocusing/distraction techniques.
- Problem solving using activity management and homework tasks to test out alternative thoughts or beliefs, such as undertaking tasks that are enjoyable and give a sense of accomplishment.
- Building on existing assertion and communication skills to set appropriate limits on activity.
- Managing sleep problems, such as establishing a consistent sleep routine by addressing any unhelpful beliefs about sleep, behavioural approaches to sleep disturbance, stress management, and/or relaxation training.

Graded exercise therapy (GET) (Please see also the recommendations on setbacks/relapses)

1.6.1.13 GET should only be delivered by a suitably trained GET therapist with experience in CFS/ME, under appropriate clinical supervision.

1.6.1.14 A GET programme should be offered on a one-to-one basis where possible.

1.6.1.15 Adults with mild or moderate CFS/ME should be offered a GET programme that includes planned increases in the duration of physical activity/exercise. The intensity should then be increased, leading to aerobic exercise (that is, exercise that increases the pulse rate).

1.6.1.16 A GET programme should be based on the patient's current level of activities (such as physical activity, daily routines, sleep patterns) and setbacks, emotional factors, vocational or educational factors and individual goals (details of these may be obtained from an activity diary). The programme should also include sleep and relaxation strategies (see Recommendations XX to XX)

1.6.1.17 When planning a GET programme, the healthcare professional should:

- undertake an activity analysis to ensure that the patient is not in an 'boom and bust' cycle before they increase the time spent in exercise
- discuss with the patient ultimate goals that are important and relevant to them. This may be, for example, a twice daily 15 minute brisk walk to the shop, a return to a previous active hobby such as cycling or gardening, or, for people with severe CFS/ME, sitting up in bed to eat a meal
- recognise that it can take weeks, months, or even years to achieve goals and ensure that this rate of progress (including setting short and medium-term goals) is taken into account in the therapy structure.
- explain symptoms and the benefits of exercise in a physiological context.

Overall

1.6.1.18 When starting a GET programme, the healthcare professional should:

- assess the patient's current daily activities
- agree with the patient a baseline of low-intensity exercise which is sustainable, independent of daily fluctuations in symptoms, and avoids 'boom and bust' cycles. For people with severe CFS/ME the baseline may start with sitting up in bed or brushing hair or for those less severely affected with gentle stretches or a slow walk
- encourage patients to undertake their baseline exercise for at least 5 days out of 7, or build up to this level if and when possible
- advise the patient that the baseline level of exercise may mildly increase symptoms for a few days (for example, a mild to moderate increase in stiffness and fatigue) and explain the reasons why this may occur and discuss strategies to mitigate its effect
- offer information on the management of setbacks/relapses (see recommendations XX to XX)

Progressing in a GET programme

1.6.1.19 When the baseline level of low-intensity exercise can be sustained for 5 days out of 7 (usually accompanied by a reduction in perceived exertion), the duration should be reviewed and increased, if appropriate, by up to 20%. For example, a 5-minute walk becomes 6 minutes, or for people with severe CFS/ME, sitting up in bed for a longer period, or walking more frequently to another room. The aim is to reach 30 minutes of low-intensity exercise.

1.6.1.20 When the duration of low-intensity exercise has reached 30 minutes, the intensity of the exercise may be increased gradually up to an aerobic heart rate zone, as assessed individually by an appropriately trained healthcare professional (50-70% maximum heart rate is recommended as an appropriate level during a GET programme).

1.6.1.21 Exercise intensity should be measured using a heart rate monitor. This allows the patient to know they are within their target heart rate zone.

1.6.1.22 If agreed GET goals are met, exercise duration and intensity may be increased further if and when appropriate, if other daily activities can also be sustained and the patient would like to progress further

Maintaining exercise in a GET programme

1.6.1.23 After completing a GET programme, the healthcare professional and the patient should continue working together to develop and build on strategies to maintain exercise. Support should be available, if needed, to enable the patient to reinforce the learning and lifestyle changes made and continue GET beyond discharge.

Overall

Activity management

- 1.6.1.24 An activity management programme should include the following.
- A goal-oriented and person-centred approach tailored to the patient's needs.
 - Identifying and establishing a stable and sustainable range of functioning (baseline). This may involve increasing or decreasing specific activities while the baseline is established.
 - Gradually increasing activity above the baseline in agreement with the patient
 - Offering information on the management of setbacks/relapses (see recommendations XX to XX)
- 1.6.1.25 Healthcare professionals may consider adding the following components as appropriate for the patient.
- Identifying and understanding that activities have physical, emotional and cognitive components.
 - Planning daily activities to allow for a balance and variety of different types of activity, rest and sleep. This may include making a weekly activity schedule.
 - Spreading out difficult or demanding tasks over the day/week.
 - Splitting activities into small achievable tasks according to the patient's level of ability/functioning, followed by gradual increases in task complexity.
 - Monitoring, regulating and planning activities to avoid a 'boom and bust' cycle
 - Goal setting, planning and prioritising activities.
 - Keeping a diary that records cognitive and physical activity, daytime rest and sleep. This will help to set baseline levels of activity and identifying patterns of over- and underactivity and develop an activity/exercise strategy.
 - Explaining the role of rest in CFS/ME and problem solving around building in rest periods and achieving a productive day (see recommendations XX to XX on rest)
 - Regularly reviewing activity levels and goals.
- 1.6.1.26 Activity management should not include:
- prolonged or complete rest or extended periods of daytime rest in response to a slight increase in symptoms
 - an imposed rigid schedule of activity and rest.

1.6.2 1.6.2 Pharmacological interventions for symptom control

- 1.6.2.1 Prescribing of low-dose tricyclic antidepressants, specifically amitriptyline, should be considered for people with CFS/ME who have poor sleep or pain symptoms, unless they are already taking selective serotonin reuptake inhibitors (SSRIs) because of the potential for serious adverse interactions.
- 1.6.2.2 When CFS/ME is complicated by chronic pain, healthcare professionals should consider referral to a pain management clinic.

- 1.6.2.3 Melatonin may be considered for children and young people with CFS/ME who have sleep difficulties, but only under specialist supervision because it is not licensed in the UK.

1.7 1.7 Management of setbacks/relapses

1.7.1 1.7.1 Before a setback/relapse

- 1.7.1.1 Patients should be advised that setbacks/relapses are to be expected as part of CFS/ME.

- 1.7.1.2 Healthcare professionals and patients should develop a plan for managing setbacks/relapses, so that skills, strategies, resources and support are readily available and accessible when needed. This plan may be shared with their carers, if the patient agrees.

1.7.2 1.7.2 During a setback/relapse

- 1.7.2.1 Setbacks/relapses may result from factors such as unexpected/unplanned activities, poor sleep, infection, or stress. Healthcare professionals, in discussion with the patient, should try to identify the cause(s) of a setback/relapse, but it should be recognised that this may not always be possible.

- 1.7.2.2 When managing a setback/relapse, the management plan should be reviewed. Healthcare professionals should discuss and agree an appropriate course of action with the patient, taking into account the:

- patient's experience
- possible causes of the setback/relapse, if known
- nature of presenting symptoms
- severity and duration of the setback/relapse
- current non-pharmacological programme.

- 1.7.2.3 When managing setbacks, healthcare professionals should put strategies into place that:

- include relaxation and breathing techniques
- maintain activity and exercise levels if at all possible by alternating activities with breaks and pacing activities, as appropriate
- includes the healthcare professional talking to families and carers, if appropriate
- challenge distressing thoughts about setbacks/relapses such as 'this means I'll never get better'
- reconsider and revise the levels and types of symptom control.

Overall

1.7.2.4 In some setbacks/relapses, it may be necessary to reduce, or even stop, some activities and increase the frequency and/or duration of rest periods to stabilise symptoms and re-establish a baseline activity level. This should be discussed between the patient and the healthcare professional.

1.7.2.5 Patients should be advised to minimise daytime sleep periods. However, healthcare professionals should recognise that this is not always possible for some patients depending on the severity of their symptoms and the setback.

1.7.3 After a setback/relapse

1.7.3.1 After a setback/relapse, healthcare professionals should review the patient's activity levels to re-establish a baseline and review the management plan. A gradual return, when possible, to previous exercise and functional routines should be encouraged. Activity should be increased gradually.

1.7.3.2 Healthcare professionals should advise on:

- slowly decreasing the frequency and duration of rest periods
- continuing the use of relaxation techniques, even when the patient is beginning to feel better.

1.7.3.3 After a setback, healthcare professionals and patients should review the experience to determine, if possible, whether triggers can be managed in the future, and put strategies into place to manage any identified triggers.

1.8 Complementary and supplementary therapies

1.8.1.1 There is insufficient evidence that complementary therapies are effective treatments for CFS/ME and therefore their use is not recommended. However, patients may choose to access some of these therapies for symptom control and find them helpful.

1.8.1.2 If patients are using complementary therapies, healthcare professionals should advise them to check that the therapist is registered appropriately and has both a good understanding of CFS/ME and experience of the use of the therapy with this condition.

1.8.1.3 There is insufficient evidence for the use of supplements (such as vitamin B12, vitamin C, co enzyme Q10, magnesium, NADH, or

Overall

multivitamins and minerals) for people with CFS/ME, and therefore they should not be prescribed for the treating the symptoms of the condition. However, some patients have reported finding these helpful as a part of a self-management strategy for their symptoms.

1.8.1.4 If patients are using supplements, healthcare professionals should be advise them not to exceed the levels for safety as recommended by the Food Standards Agency.

1.8.1.5 Some patients will need supplements because of a restricted dietary intake or nutritional deficiencies. Healthcare professionals should seek advice from a dietitian where there are concerns.

1.9 Review and ongoing management

1.9.1.1 Regular, structured review of management should be undertaken for all people with CFS/ME. The review should include, if appropriate:

- assessing improvement or deterioration in symptoms
- assessing any adverse or unwanted effects of therapy
- ongoing investigations
- reviewing the diagnosis, especially if signs and symptoms change
- considering referral to specialised care
- reviewing equipment needs
- assessing any additional support needs (cross ref back).

1.9.1.2 The timing of the reviews should be according to the severity and complexity of symptoms, the effectiveness of any interventions, and the patient's needs.

1.9.1.3 For children and young people, the paediatrician should consider repeating selected investigations if there is no improvement at 1 year.

1.9.1.4 For adults, the healthcare professional should re-assess the patient and consider repeating selected investigations if there is no improvement.

1.10 Key principles of care for people with severe CFS/ME

1.10.1 General principles of care

Overall

1.10.1.1 Management of severe CFS/ME is difficult and complex and healthcare professionals should recognise that specialist expertise is required when planning and managing care for people with severe CFS/ME.

1.10.1.2 Diagnosis, investigations and management for people with severe CFS/ME should be supervised or supported by a specialist in CFS/ME.

1.10.1.3 People with severe CFS/ME may need to access community services, at various times. These may include nursing, occupational therapy, dietetics, respite care, psychology and physiotherapy, as appropriate (see the National Service Framework for Long term conditions). The input of various professionals should be coordinated by a named professional.

1.10.1.4 People with severe CFS/ME should be offered a summary record of every consultation because of cognitive difficulties.

1.10.1.5 The majority of people with CFS/ME will not need hospital admission. However, there may be circumstances when a planned admission should be considered. The decision to admit should be made with the patient and be based on an informed consideration of the benefits and disbenefits. For example, a planned admission may be useful when assessment of a management plan and investigations would require frequent visits to the hospital or the impact of travel would be detrimental to the patient's condition.

1.10.2 Rest

1.10.2.1 Decisions about prolonged bed-rest are difficult. Healthcare professionals should seek advice from a specialist experienced in the care of people with severe CFS/ME and the significant physical and psychological risks associated with prolonged bed-rest should be considered.

1.10.2.2 Healthcare professionals working with people with severe CFS/ME who are bed-bound for most, if not all, of the time, should explain the associated risks (such as postural hypotension, DVT, osteoporosis, pressure sores, and deconditioning) and monitor these.

1.10.3 Management approaches

1.10.3.1 People with severe CFS/ME should be offered an individually tailored activity management programme as the core therapeutic strategy which may:

- be delivered at home (and/or by telephone if appropriate)
- incorporate the elements of Section XX and be informed by the principles of CBT and GET.. (Cross refer to app section)

Overall

1.10.3.2 An activity management programme should be reviewed regularly and frequently.

Overall

Results

General Principles of Care

Question 1.1.1.1															
Frequencies															
<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	AGREE	9.0	0.6
													<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 1.1.1.2															
Frequencies															
<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	AGREE	9.0	0.5
													<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 1.1.1.3															
Frequencies															
<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	AGREE	9.0	0.4
													<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 1.1.1.4															
Frequencies															
<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	AGREE	9.0	0.5
													<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 1.1.1.5															
Frequencies															
<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	AGREE	9.0	0.4
													<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 1.1.1.6															
Frequencies															
<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	AGREE	9.0	0.5
													<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 1.1.1.7															
Frequencies															
<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	AGREE	9.0	0.6
													<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 1.1.1.8															
Frequencies															
<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	AGREE	9.0	0.8
													<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 1.1.1.9															
Frequencies															
<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	AGREE	9.0	0.7
													<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 1.1.1.10															
Frequencies															
<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	AGREE	8.0	0.6
													<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 1.1.1.11															
Frequencies															
<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	AGREE	8.5	1.3
													<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 1.1.1.12															
Frequencies															
<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	AGREE	8.0	0.7
													<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 1.1.1.13															
Frequencies															
<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	AGREE	8.0	1.1
													<i>group rating</i>	<i>median</i>	<i>MADM</i>
Presenting symptoms suspicious of CFS/ME															
Question 1.2.1.1															
Frequencies															
<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	AGREE	9.0	0.5
													<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 1.2.1.2															
Frequencies															
<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	AGREE	8.5	1.1
													<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 1.2.1.3															
Frequencies															
<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	AGREE	9.0	0.2
													<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 1.2.1.4															
Frequencies															
<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	AGREE	8.0	0.8
													<i>group rating</i>	<i>median</i>	<i>MADM</i>

Overall

History, examinations and investigations

Question 1.2.2.1															
Frequencies								1	7	8		AGREE	8.5	0.6	
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM

Question 1.2.2.2															
Frequencies								1		5	10		AGREE	9.0	0.5
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM

Question 1.2.2.3																	
Frequencies								1	1	3	4	6		1	AGREE	8.0	0.9
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM		

Question 1.2.2.4																
Frequencies								2	1	2	9		2	AGREE	9.0	0.9
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM	

Question 1.2.2.5																	
Frequencies								2	1	1	2	8		2	AGREE	9.0	1.1
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM		

Question 1.2.2.6																
Frequencies		1		1				4	2	5			3	AGREE	8.0	1.6
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM	

Question 1.2.2.7																
Frequencies		1				1		4	3	5			2	AGREE	8.0	1.4
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM	

Advice on symptom management before diagnosis

Question 1.2.3.1																
Frequencies			1				1		2	3	9			AGREE	9.0	1.2
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM	

Re-assessment before diagnosis

Question 1.2.4.1																
Frequencies								1	4	4	7			AGREE	8.0	0.8
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM	

Question 1.2.4.2																
Frequencies									4	5	7			AGREE	8.0	0.7
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM	

Question 1.2.4.3																	
Frequencies								1		6	4	5			AGREE	8.0	0.9
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM		

Making a diagnosis

Question 1.3.1.1																	
Frequencies								1	1	5	2	7			AGREE	8.0	1.1
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM		

Question 1.3.1.2																	
Frequencies								1		5	5	5			AGREE	8.0	0.8
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM		

Question 1.3.1.3																	
Frequencies								1		6	1	8			AGREE	8.5	1.1
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM		

Question 1.3.1.4																	
Frequencies									3	5	8				AGREE	8.5	0.7
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM		

Question 1.3.1.5																	
Frequencies								2	1	1	5	6		1	AGREE	8.0	1.0
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM		

Overall

Symptom management

Question 1.4.1.1															
Frequencies						2	1	2	4	7		AGREE	8.0	1.1	
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM

Question 1.4.1.2															
Frequencies						2		6	4	4		AGREE	7.5	1.0	
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM

Question 1.4.1.3															
Frequencies							1	5	5	4		AGREE	8.0	0.7	
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM

Question 1.4.1.4															
Frequencies						1		3	6	4		AGREE	8.0	0.7	
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM

Question 1.4.1.5															
Frequencies						1	1	2	6	5		AGREE	8.0	0.8	
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM

Question 1.4.1.6															
Frequencies						1	2	6	1	4		AGREE	7.0	0.9	
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM

Sleep management

Question 1.4.2.1															
Frequencies						1		4	5	6		AGREE	8.0	0.8	
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM

Question 1.4.2.2															
Frequencies						1		2	5	8		AGREE	8.5	0.8	
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM

Question 1.4.2.3															
Frequencies		1	1	1		1		2	4	6		AGREE	8.0	1.8	
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM

Question 1.4.2.4															
Frequencies			1		1		4	4	2	4		AGREE	7.0	1.4	
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM

Question 1.4.2.5															
Frequencies						1	1	5	4	5		AGREE	8.0	0.9	
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM

Question 1.4.2.6															
Frequencies						2	1	3	4	6		AGREE	8.0	1.1	
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM

Question 1.4.2.7															
Frequencies								5	5	6		AGREE	8.0	0.7	
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM

Diet

Question 1.4.3.1															
Frequencies							1	3	6	5		AGREE	8.0	0.7	
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM

Question 1.4.3.2															
Frequencies							2	3	4	6		AGREE	8.0	0.9	
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM

Overall

Equipment to maintain independence

Question 1.4.4.1															
Frequencies			1			2	2	1	4	6		AGREE	8.0	1.4	
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM

Question 1.4.4.2															
Frequencies						1	2		4	9		AGREE	9.0	0.9	
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM

Question 1.4.4.3															
Frequencies			1						4	6	5		AGREE	8.0	0.9
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM

Question 1.4.4.4															
Frequencies									4	6	6		AGREE	8.0	0.6
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM

Question 1.4.4.5															
Frequencies						1		3	4	6		2	AGREE	8.0	0.9
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM

Question 1.4.4.6															
Frequencies			1					5	4	6			AGREE	8.0	1.1
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM

Question 1.4.4.7															
Frequencies								5	3	8			AGREE	8.5	0.8
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM

Question 1.4.4.8															
Frequencies			1			1	1	4	4	5			AGREE	8.0	1.3
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM

Strategies that should not be used for CFS/ME

Question 1.4.5.1															
Frequencies								1	3	9		3	AGREE	9.0	0.4
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM

Question 1.4.5.2															
Frequencies							2	2	3	9			AGREE	9.0	0.8
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM

Question 1.4.5.3															
Frequencies			1			2		2	7	3		1	AGREE	8.0	1.1
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM

Referral to specialised CFS/ME care

Question 1.5.1.1															
Frequencies								3	4	9			AGREE	9.0	0.6
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM

Question 1.5.1.2															
Frequencies						1		2	4	9			AGREE	9.0	0.8
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM

Question 1.5.1.3															
Frequencies						1		1	5	9			AGREE	9.0	0.7
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM

Overall

Cognitive Behavioural Therapy (CBT), Graded Exercise Therapy (GET) and Activity Management progr:

Question 1.6.1.1															
Frequencies						1	2	2	11		AGREE	9.0	0.6		
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1.6.1.2															
Frequencies						1		3	4	8		AGREE	8.5	0.9	
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1.6.1.3															
Frequencies						2	1	3	4	6		AGREE	8.0	1.1	
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1.6.1.4															
Frequencies						1	2	3	10		AGREE	9.0	0.6		
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1.6.1.5															
Frequencies		1			2	1		2	1	9		AGREE	9.0	1.7	
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1.6.1.6															
Frequencies				1		1	8	4	2		AGREE	7.0	0.8		
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1.6.1.7															
Frequencies							4	3	8		1	AGREE	9.0	0.7	
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1.6.1.8															
Frequencies		1	1		1	1	5	4	3			AGREE	7.0	1.4	
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1.6.1.9															
Frequencies		1	1				2	2	10			AGREE	9.0	1.3	
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1.6.1.10															
Frequencies					2		3	5	6			AGREE	8.0	0.9	
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1.6.1.11															
Frequencies					1		4	5	6			AGREE	8.0	0.8	
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1.6.1.12															
Frequencies		1			2	1	1	5	6			AGREE	8.0	1.3	
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1.6.1.13															
Frequencies			1	1		2	2	10				AGREE	9.0	1.0	
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1.6.1.14															
Frequencies				1	2		1	5	7			AGREE	8.0	1.1	
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1.6.1.15															
Frequencies		1	1		3		3	4	4			AGREE	7.5	1.8	
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1.6.1.16															
Frequencies					3		4	5	4			AGREE	8.0	1.1	
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1.6.1.17															
Frequencies				1	2	1	3	5	4			AGREE	8.0	1.2	
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM
Question 1.6.1.18															
Frequencies			1	1	1		4	4	5			AGREE	8.0	1.3	
Rating scale	Disagree	1	2	3	4	5	6	7	8	9	Agree	d/k	group rating	median	MADM

Overall

Question 1.6.1.19															
Frequencies		1	2		1		3	5	4			AGREE	8.0	1.6	
Rating scale	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 1.6.1.20															
Frequencies		1				2		4	4	4		1	AGREE	8.0	1.4
Rating scale	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 1.6.1.21															
Frequencies						2	3	5	2	3		1	AGREE	7.0	1.0
Rating scale	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 1.6.1.22															
Frequencies		1			1	2		3	5	4			AGREE	8.0	1.5
Rating scale	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 1.6.1.23															
Frequencies						2		3	7	4			AGREE	8.0	0.8
Rating scale	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 1.6.1.24															
Frequencies						1		4	7	3		1	AGREE	8.0	0.7
Rating scale	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 1.6.1.25															
Frequencies						1	1	1	7	5		1	AGREE	8.0	0.7
Rating scale	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 1.6.1.26															
Frequencies		1				1	2	1	4	6		1	AGREE	8.0	1.4
Rating scale	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	<i>group rating</i>	<i>median</i>	<i>MADM</i>
Pharmacological interventions															
Question 1.6.2.1															
Frequencies						3		2	4	4		3	AGREE	8.0	1.2
Rating scale	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 1.6.2.2															
Frequencies						2	1	2	3	7		1	AGREE	8.0	1.1
Rating scale	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 1.6.2.3															
Frequencies		1				3		1	2	5		4	AGREE	8.0	1.8
Rating scale	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	<i>group rating</i>	<i>median</i>	<i>MADM</i>

Overall

Management of setbacks/relapses

Question 1.7.1.1															
Frequencies					2	1		1	3	8		1	AGREE	9.0	1.3
<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 1.7.1.2															
Frequencies						1	1	2	3	8		1	AGREE	9.0	0.9
<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 1.7.2.1															
Frequencies						1		2	7	5		1	AGREE	8.0	0.7
<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 1.7.2.2															
Frequencies							1	3	7	4		1	AGREE	8.0	0.6
<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 1.7.2.3															
Frequencies			1					6	4	4		1	AGREE	8.0	1.0
<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 1.7.2.4															
Frequencies					1		5	6	3			1	AGREE	8.0	0.7
<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 1.7.2.5															
Frequencies					1	2	6	3	3			1	AGREE	7.0	0.9
<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 1.7.3.1															
Frequencies						2	3	6	4			1	AGREE	8.0	0.7
<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 1.7.3.2															
Frequencies					1	1	4	5	4			1	AGREE	8.0	0.9
<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 1.7.3.3															
Frequencies					1	1	1	5	6			2	AGREE	8.0	0.9
<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	<i>group rating</i>	<i>median</i>	<i>MADM</i>
Complementary and supplementary therapies															
Question 1.8.1.1															
Frequencies			1			1	6	3	4			1	AGREE	7.0	1.1
<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 1.8.1.2															
Frequencies							4	6	5			1	AGREE	8.0	0.6
<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 1.8.1.3															
Frequencies						2	6	2	4			1	AGREE	7.0	0.9
<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 1.8.1.4															
Frequencies							6	2	7			1	AGREE	8.0	0.9
<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	<i>group rating</i>	<i>median</i>	<i>MADM</i>
Question 1.8.1.5															
Frequencies							2	4	9			1	AGREE	9.0	0.5
<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	<i>group rating</i>	<i>median</i>	<i>MADM</i>

Overall

Review and ongoing management

Question 1.9.1.1															
Frequencies								4	7	4		1	AGREE	8.0	0.5
<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	<i>group rating</i>	<i>median</i>	<i>MADM</i>

Question 1.9.1.2															
Frequencies								3	5	6		2	AGREE	8.0	0.6
<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	<i>group rating</i>	<i>median</i>	<i>MADM</i>

Question 1.9.1.3															
Frequencies						1		6	4	3		2	AGREE	7.5	0.9
<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	<i>group rating</i>	<i>median</i>	<i>MADM</i>

Question 1.9.1.4															
Frequencies					1	1	5	5	3			1	AGREE	8.0	0.9
<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	<i>group rating</i>	<i>median</i>	<i>MADM</i>

Key principles of care for people with severe CFS/ME

Question 1.10.1.1															
Frequencies					1	1	2	3	8			1	AGREE	9.0	0.9
<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	<i>group rating</i>	<i>median</i>	<i>MADM</i>

Question 1.10.1.2															
Frequencies						1	3	1	10			1	AGREE	9.0	0.7
<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	<i>group rating</i>	<i>median</i>	<i>MADM</i>

Question 1.10.1.3															
Frequencies								5	2	8		1	AGREE	9.0	0.8
<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	<i>group rating</i>	<i>median</i>	<i>MADM</i>

Question 1.10.1.4															
Frequencies					1	3	3	4	4			1	AGREE	8.0	1.1
<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	<i>group rating</i>	<i>median</i>	<i>MADM</i>

Question 1.10.1.5															
Frequencies								7	3	5		1	AGREE	8.0	0.8
<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	<i>group rating</i>	<i>median</i>	<i>MADM</i>

Rest

Question 1.10.2.1															
Frequencies					1	2	4	4	4			1	AGREE	8.0	1.0
<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	<i>group rating</i>	<i>median</i>	<i>MADM</i>

Question 1.10.2.2															
Frequencies								4	4	7		1	AGREE	8.0	0.7
<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	<i>group rating</i>	<i>median</i>	<i>MADM</i>

Management approaches

Question 1.10.3.1															
Frequencies					1	2	3	4	5			1	AGREE	8.0	1.0
<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	<i>group rating</i>	<i>median</i>	<i>MADM</i>

Question 1.10.3.2															
Frequencies					1		2	5	7			1	AGREE	8.0	0.8
<i>Rating scale</i>	<i>Disagree</i>	1	2	3	4	5	6	7	8	9	<i>Agree</i>	<i>d/k</i>	<i>group rating</i>	<i>median</i>	<i>MADM</i>