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• 計畫中文名稱	新浮現的疾病(慢性疲勞症候群)的研究慢性感染、免疫功能以及其他身心因子的探討	
• 計畫英文名稱	Chronic Fatigue SyndromeChronic Infection, Immune Function and Psychosomatic Factors	
• 主管機關	行政院衛生署	
• 執行機構	台北醫學院細胞及分子生物研究所	
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• 中文關鍵字	慢性疲勞症候群;免疫功能;病因學;慢性感染	
• 英文關鍵字	Chronic fatigue syndrome; Immunological function; Etiology; Chronic infection	
• 中文摘要	背景與目的:慢性疲勞症候群(Chronic fatigue syndrome,以下縮寫為 CFS)。 其主要症狀為:持續半年以上的疲勞,且導致個人身心或社會功能 CFS 乃自 1988 年才逐漸受重視的一種健康問題,國際間的研究正方興未艾,且發現可能與慢性感染、內分泌、免疫功能或神經精神狀態等因 雖然目前仍然病因不明,然而在診斷與治療上若無法同時考慮生理、心理與環境因素,則往往導致病患到處求醫卻無良好的療效,而浪費許多源。 依據國際疾病分類(International Classification of Diseases)的診斷標準,「神經衰弱症」(Neurasthenic disorder)即用來診斷無法發現生理與因的慢性疲勞。雖然國人主訴「神經衰弱」者眾,但國內目前對 CFS 的研究仍然相當有限。疲勞是生理與心理疾病的常見症狀,而國內醫藥卻尚未注意到主訴「慢性疲勞」的臨床診治與預防、對個人以及醫療資源的衝擊,因此本研究主要的目的乃欲探討本土的 CFS 個案其相關病身心方面的臨床特徵。 研究方法:自綜合醫院的家庭醫學科、內科與精神科之求治病患,以美國疾病控制中心最近頒佈的 CFS 標準為診斷仍由內科或家醫科專科醫師評估生理狀態,精神科醫師評估心理精神狀態,並進行必要之生理狀態檢驗,再進行與 CFS 相關卻易被忽略的病毒進	京素有關, 醫療資 或心理原 衛生界, 病因以及 衣據。經

(Cytomegalovirus, Herpes simplex, E-B virous, Humnam immunity deficiency

• 英文摘要

Background and objectives: Chronic fatigue syndrome (CFS) is characterized by disabling fatigue for at least 6 months. CFS has been notified since 1988 and may be related to chronic infection, endocrine and immunity dysfunction, and neuropsychiatric problems, etc. It bears a striking resemblance to the set of symptoms labeled "neurasthenia", a term frequently used to explain the nature of minor psychiatric disorders in Taiwan. The aim of this study is to demonstrate and investigate the clinical features, related etiology psychophysiological interaction and adaptive behavior of CFS. We used the modified CDC criteria (American Centers for Disease Control) CFS to diagnose patients visiting the departments of psychiatry, internal medicine, and familial medicine in

several general hospital To exclude physical conditions related to chronic fatigue, all subjects fulfilling the criteria for CFS were assessed by the board doctors of the mentioned department and received a laboratory evaluation consisting of complete blood cell count with differential count, erythrocyte sedimentation rate, serum electrolytes, liver and renal function tests, thyroid-stimulating hormone, serum levels of cortisol and immunoglobulin. Where clinically indicated, additional investigations were performed. Subjects underwent psychiatric intervention and visual analogue scales were used to assess current severity of global illness outcome.