



# The Role of Patient-reported Outcomes in Assessing Treatments for ME/CFS and Long COVID

Valen Greystone\*

Department of Public Health, University of Virginia, USA

## INTRODUCTION

Patient-reported treatment outcomes (PROs) are a valuable tool in assessing the effectiveness of interventions, particularly in conditions like myalgic encephalomyelitis/chronic fatigue syndrome (ME/CFS) and Long COVID, where traditional clinical measures may not fully capture the complexity of the patient experience. Both ME/CFS and Long COVID are chronic, multisystem disorders that significantly impact patients' quality of life, yet are often poorly understood and under-recognized in medical practice. As these conditions present with a wide range of symptoms, including severe fatigue, cognitive dysfunction, pain, and post-exertional malaise, measuring treatment outcomes from the patient's perspective is essential for determining the success of interventions and guiding clinical care.

## DESCRIPTION

In the case of ME/CFS, PROs play a central role in understanding how treatments affect patients beyond what is observable in clinical exams or laboratory tests. ME/CFS is a complex, debilitating condition, and its pathophysiology remains largely unknown. As such, traditional biomarkers are not well-established, and many treatments aim to alleviate symptoms rather than cure the disease. Common symptoms of ME/CFS, such as fatigue, unrefreshing sleep, muscle and joint pain, and cognitive impairments (often referred to as "brain fog"), can vary greatly between individuals. As a result, the experience of ME/CFS can be highly subjective, and PROs, including patient surveys and quality-of-life questionnaires, are essential to gauge the real impact of a treatment on the daily functioning and well-being of those affected. PROs can capture aspects of disease progression and response to treatment that cannot be measured by traditional clinical tests, such as the improvement in a patient's ability to perform activities of daily living or their

perception of symptom severity.

Similarly, Long COVID, a condition that persists in some individuals following acute COVID-19 infection, shares many symptoms with ME/CFS, including debilitating fatigue, cognitive dysfunction, and pain. In fact, there has been increasing recognition that Long COVID may represent a post-viral syndrome similar to ME/CFS. Given the complexity and variability of Long COVID, measuring treatment outcomes through patient-reported data is crucial. Long COVID patients may experience a wide spectrum of symptoms that fluctuate over time, making it challenging for clinicians to assess treatment efficacy using standard clinical measures alone. PROs in Long COVID can help to assess not only the reduction of physical symptoms like fatigue but also improvements in mental health, cognitive function, and overall quality of life. For instance, patients may report improvements in their ability to work, engage in social activities, or perform everyday tasks, providing a more comprehensive picture of the treatment's impact on their lives. In both ME/CFS and Long COVID, the subjective nature of symptoms, such as fatigue and cognitive difficulties, necessitates the inclusion of PROs to understand the effectiveness of treatments. For example, patients who experience significant improvements in their ability to perform physical tasks may report higher satisfaction with a treatment, even if clinical markers do not show substantial changes.

## CONCLUSION

Ultimately, the use of PROs in ME/CFS and Long COVID treatment evaluation underscores the importance of considering the patient's perspective in clinical care. By capturing the lived experiences of those affected by these chronic conditions, healthcare providers can better understand the effectiveness of treatments and tailor interventions to improve the quality of life of patients.

<b>Received:</b>	30-October-2024	<b>Manuscript No:</b>	IPJIDT-25-22114
<b>Editor assigned:</b>	01-November-2024	<b>PreQC No:</b>	IPJIDT-25-22114 (PQ)
<b>Reviewed:</b>	15-November-2024	<b>QC No:</b>	IPJIDT-25-22114
<b>Revised:</b>	20-November-2024	<b>Manuscript No:</b>	IPJIDT-25-22114 (R)
<b>Published:</b>	27-November-2024	<b>DOI:</b>	10.36648/2472-1093-10.11.107

**Corresponding author** Valen Greystone, Department of Public Health, University of Virginia, USA, E-mail: ValenGreystone6477@yahoo.com

**Citation** Greystone V (2024) The Role of Patient-reported Outcomes in Assessing Treatments for ME/CFS and Long COVID. J Infect Dis Treat. 10:107.

**Copyright** © 2024 Greystone V. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.