

EMEA Charter of Actions to support people with ME*

12 May 2026, International ME Awareness Day

We invite clinicians and researchers to work in partnership with the European ME Alliance (EMEA) members to improve diagnosis, care, research, and outcomes.

1. Strengthen Knowledge and Clinical Practice

- Develop and maintain knowledge of ME and promote early diagnosis using established criteria (e.g. Canadian Concensus Criteria, Institute of Medicine, NICE guidelines)
- Recognise ME as a disabling biological disease and align clinical practice with current biomedical evidence
- Use national and international ME guidelines and WHO ICD codes (ICD-11: 8E49; previously ICD-10: G93.3) in diagnosis and documentation
- Improve differential diagnosis and the management of comorbidities

2. Ensure Safe and Appropriate Patient Care

- Understand and clearly explain post-exertional malaise (PEM) to patients
- Teach patients pacing and energy conservation as essential management strategies
- Ensure patient safety and avoid interventions that may cause harm, particularly those that exacerbate symptoms
- Accommodate patient needs, including sensory and environmental sensitivities, access to quiet spaces, and the use of telemedicine for those unable to travel

3. Support Patients in Daily Life

- Support patient applications for disability benefits and social assistance
- Provide clear, accessible information for families, carers, employers, and teachers
- Increase awareness that denial of the disease and lack of appropriate support can significantly increase disability

4. Communicate and Advocate Responsibly

- Familiarise yourself with EMEA's information and initiatives
- Publicly affirm that ME is a biological disease in all relevant professional contexts
- State clearly that patients are not malingerers and require appropriate support

- Help combat misinformation and harmful narratives
- Work with EMEA to raise awareness among medical colleagues and present at professional meetings (e.g. general practitioners, neurologists, psychiatry)
- Share accurate information through both scientific channels and public or patient-oriented media
- Participate in joint interviews with EMEA members to support their visibility and recognition

5. Advance Research and Knowledge Sharing

- Contribute through the European ME Research Group (EMERG) and Young EMERG to high-quality biomedical research, with a focus on pathophysiology, biomarkers, and the needs of severe and very severe patients
- Support the dissemination of accurate knowledge through scientific forums, publications, and medical education
- Collaborate with EMEA patient organisations as partners in research design, clinical improvement, and policy development
- Engage with EMEA and its work with WHO Europe and the European Union to provide expertise and to exchange knowledge, experience, and good practices
- Support the integration of international best practices into national healthcare systems

6. Engage with Health Systems and Policy

- Advocate for the inclusion of ME in undergraduate and postgraduate medical education
- Support the development of national strategies for ME (following examples such as Switzerland)
- Advocate for funding of biomedical research and improved healthcare structures
- Support the establishment of national Centres of Excellence
- Highlight and address human rights concerns related to ME and equitable access to care and support services

** Myalgic encephalomyelitis (ME, sometimes referred to as ME/CFS)*