

Table 29: Clinical evidence profile: Corticosteroids (oral hydrocortisone or fludrocortisone, nasal flunisolide) versus placebo

Quality assessment	No of patients	Effect	Quality	Importance
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No of studies	Design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Corticosteroids (oral hydrocortisone or fludrocortisone, nasal flunisolide) versus placebo	Control	Relative (95% CI)	Absolute		
Quality of Life: SF36 physical (follow-up 6 weeks; range of scores: 0-100; Better indicated by higher values)												
1	randomised trials	serious ¹	no serious inconsistency	serious ²	serious ³	none	20 (fludrocortisone)	20	-	MD 7.6 higher (5.36 lower to 20.56 higher)	⊕000 VERY LOW	CRITICAL
Quality of Life: SF36 energy or fatigue (follow-up 6 weeks; range of scores: 0-100; Better indicated by higher values)												
1	randomised trials	serious ¹	no serious inconsistency	serious ²	serious ³	none	20 (fludrocortisone)	20	-	MD 2.1 higher (7.43 lower to 11.63 higher)	⊕000 VERY LOW	CRITICAL
Quality of Life: SF36 emotional wellbeing (follow-up 6 weeks; range of scores: 0-100; Better indicated by higher values)												
1	randomised trials	serious ¹	no serious inconsistency	serious ²	serious ³	none	20 (fludrocortisone)	20	-	MD 3.8 higher (5.29 lower to 12.89 higher)	⊕000 VERY LOW	CRITICAL
Quality of Life: SF36 role emotional (follow-up 6 weeks; range of scores: 0-100; Better indicated by higher values)												
1	randomised trials	serious ¹	no serious inconsistency	serious ²	very serious ³	none	20 (fludrocortisone)	20	-	MD 0 higher (14.96 lower to 14.96 higher)	⊕000 VERY LOW	CRITICAL
Quality of Life: SF36 role physical (follow-up 6 weeks; range of scores: 0-100; Better indicated by higher values)												
1	randomised trials	serious ¹	no serious inconsistency	serious ²	serious ³	none	20 (fludrocortisone)	20	-	MD 11.8 lower (29.09 lower to 5.49 higher)	⊕000 VERY LOW	CRITICAL
Quality of Life: SF36 pain (follow-up 6 weeks; range of scores: 0-100; Better indicated by higher values)												
1	randomised trials	serious ¹	no serious inconsistency	serious ²	very serious ³	none	20 (fludrocortisone)	20	-	MD 0.6 lower (15.29 lower to 14.09 higher)	⊕000 VERY LOW	CRITICAL
Quality of life: SF36 social (follow-up 6 weeks; range of scores: 0-100; Better indicated by higher values)												

1	randomised trials	serious ¹	no serious inconsistency	serious ²	serious ³	none	20 (fludrocortisone)	20	-	MD 1.9 higher (11.06 lower to 14.86 higher)	⊕000 VERY LOW	CRITICAL
Quality of life: SF36 general wellbeing (follow-up 6 weeks; range of scores: 0-100; Better indicated by higher values)												
1	randomised trials	serious ¹	no serious inconsistency	serious ²	serious ³	none	20 (fludrocortisone)	20	-	MD 3.7 lower (12.54 lower to 5.14 higher)	⊕000 VERY LOW	CRITICAL
Fatigue: fatigue on VAS (follow-up 6 weeks; range of scores: 0-10; Better indicated by lower values)												
1	randomised trials	serious ¹	no serious inconsistency	serious ²	very serious ³	none	20 (fludrocortisone)	20	-	MD 0 higher (1.1 lower to 1.1 higher)	⊕000 VERY LOW	CRITICAL
Fatigue: Chronic Fatigue Syndrome Severity Rating (follow-up 4-8 weeks; range of scores: not reported; Better indicated by lower values)												
1	randomised trials	serious ¹	no serious inconsistency	very serious ⁴	Serious ³	none	28 (nasal flunisolide)	28	-	MD 3.17 lower (7.48 lower to 1.14 higher)	⊕000 VERY LOW	CRITICAL
Fatigue: Profile of Mood States - fatigue (follow-up 11 weeks; range of scores: 0-28; Better indicated by lower values)												
1	randomised trials	very serious ¹	no serious inconsistency	very serious ⁵	no serious imprecision	none	38 (fludrocortisone)	45	-	MD 0.2 lower (3.47 lower to 3.07 higher)	⊕000 VERY LOW	CRITICAL
Fatigue: Profile of Mood States - fatigue (follow-up 12 weeks; range of scores: 0-28; Better indicated by lower values)												
1	randomised trials	serious ¹	no serious inconsistency	serious ²	serious ³	none	34 (hydrocortisone)	34	-	MD 1.8 lower (4.14 lower to 0.54 higher)	⊕000 VERY LOW	CRITICAL
Fatigue: Profile of Mood States - vigour (follow-up 11 weeks; range of scores: 0-32; Better indicated by higher values)												
1	randomised trials	very serious ¹	no serious inconsistency	very serious ⁵	no serious imprecision	none	38 (fludrocortisone)	45	-	MD 0.2 higher (2.56 lower to 2.96 higher)	⊕000 VERY LOW	CRITICAL
Fatigue: Profile of Mood States - vigour (follow-up 12 weeks; range of scores: 0-32; Better indicated by higher values)												

1	randomised trials	serious ¹	no serious inconsistency	serious ²	no serious imprecision	none	34 (hydrocortisone)	34	-	MD 0.5 higher (1.07 lower to 2.07 higher)	⊕⊕⊕ LOW	CRITICAL
Fatigue: Wood Mental Fatigue Inventory (follow-up 11 weeks; range of scores: 0-36; Better indicated by lower values)												
1	randomised trials	very serious ¹	no serious inconsistency	very serious ⁵	serious ³	none	38 (fludrocortisone)	45	-	MD 0.8 higher (3.66 lower to 5.26 higher)	⊕⊕⊕⊕ VERY LOW	CRITICAL
Physical function: SF36 physical function (follow-up 11 weeks; range of scores: 0-100; Better indicated by higher values)												
1	randomised trials	very serious ¹	no serious inconsistency	very serious ⁵	serious ³	none	38 (fludrocortisone)	45	-	MD 7.5 higher (3.2 lower to 18.2 higher)	⊕⊕⊕⊕ VERY LOW	CRITICAL
Psychological status: SF36 mental health (follow-up 11 weeks; range of scores: 0-100; Better indicated by higher values)												
1	randomised trials	very serious ¹	no serious inconsistency	very serious ⁵	serious ³	none	38 (fludrocortisone)	45	-	MD 1.2 lower (8.92 lower to 6.52 higher)	⊕⊕⊕⊕ VERY LOW	CRITICAL
Adverse events: adverse events leading to study withdrawal (follow-up 6 weeks)												
1	randomised trials	serious ¹	no serious inconsistency	serious ²	very serious ³	none	0/20 (0%) (fludrocortisone)	2/20 (10%)	Peto OR 0.13 (0.01 to 2.13)	100 fewer per 1000 (from 250 fewer to 50 more)	⊕⊕⊕⊕ VERY LOW	CRITICAL
Adverse events: adverse effects / adverse events (follow-up 6-11 weeks)												
2	randomised trials	very serious ¹	no serious inconsistency	serious ⁵	no serious imprecision	none	27/58 (46.6%) (fludrocortisone)	36/65 (55.4%)	RR 0.86 (0.63 to 1.17)	78 fewer per 1000 (from 205 fewer to 94 more)	⊕⊕⊕⊕ VERY LOW	CRITICAL
Adverse events: any adverse reaction (follow-up 12 weeks)												
1	randomised trials	serious ¹	no serious inconsistency	serious ²	serious ³	none	31/35 (88.6%) (hydrocortisone)	27/35 (77.1%)	RR 1.15 (0.93 to 1.43)	116 more per 1000 (from 54 fewer to 332 more)	⊕⊕⊕⊕ VERY LOW	CRITICAL
Psychological status: Beck Depression Inventory (follow-up 11weeks; range of scores: 0-63; Better indicated by lower values)												

1	randomised trials	very serious ¹	no serious inconsistency	very serious ⁵	serious ³	none	38 (fludrocortisone)	45	-	MD 0.4 lower (3.43 lower to 2.63 higher)	⊕○○○ VERY LOW	CRITICAL
Psychological status: Beck Depression Inventory (follow-up 12 weeks; range of scores: 0-63; Better indicated by lower values)												
1	randomised trials	serious ¹	no serious inconsistency	serious ²	serious ³	none	34 (hydrocortisone)	34	-	MD 1.7 lower (3.9 lower to 0.5 higher)	⊕○○○ VERY LOW	CRITICAL
Psychological status: Profile of Mood States - anger (follow-up 12 weeks; range of scores: 0-48; Better indicated by lower values)												
1	randomised trials	serious ¹	no serious inconsistency	serious ²	no serious imprecision	none	34 (hydrocortisone)	34	-	MD 0.8 lower (2.63 lower to 1.03 higher)	⊕⊕○○ LOW	CRITICAL
Psychological status: Profile of Mood States - anxiety (follow-up 12 weeks; range of scores: 0-36; Better indicated by lower values)												
1	randomised trials	serious ¹	no serious inconsistency	serious ²	serious ³	none	34 (hydrocortisone)	34	-	MD 1.3 higher (0.17 lower to 2.77 higher)	⊕○○○ VERY LOW	CRITICAL
Psychological status: Profile of Mood States - confusion (follow-up 12 weeks; range of scores: 0-28; Better indicated by lower values)												
1	randomised trials	serious ¹	no serious inconsistency	serious ²	no serious imprecision	none	34 (hydrocortisone)	34	-	MD 0.3 higher (1.18 lower to 1.78 higher)	⊕⊕○○ LOW	CRITICAL
Psychological status: Profile of Mood States - depression (follow-up 12 weeks; range of scores: 0-60; Better indicated by lower values)												
1	randomised trials	serious ¹	no serious inconsistency	serious ²	serious ¹	none	34 (hydrocortisone)	34	-	MD 1.6 lower (3.61 lower to 0.41 higher)	⊕○○○ VERY LOW	CRITICAL
Psychological status: Symptom checklist-90-R general sensitivity index (follow-up 12 weeks; range of scores: not reported; Better indicated by lower values)												
1	randomised trials	serious ¹	no serious inconsistency	serious ²	no serious imprecision	none	34 (hydrocortisone)	34	-	MD 0 higher (0.1 lower to 0.1 higher)	⊕⊕○○ LOW	CRITICAL
Psychological status: Symptom checklist-90-R positive symptom distress index (follow-up 12 weeks; range of scores: not reported; Better indicated by lower values)												

1	randomised trials	serious ¹	no serious inconsistency	very serious ²	serious ³	none	34 (hydrocortisone)	34	-	MD 0.1 higher (0.04 lower to 0.24 higher)	⊕000 VERY LOW	CRITICAL
Psychological status: Symptom checklist-90-R positive symptom total (follow-up 12 weeks; range of scores: not reported; Better indicated by lower values)												
1	randomised trials	serious ¹	no serious inconsistency	serious ²	no serious imprecision	none	34 (hydrocortisone)	34	-	MD 0.2 lower (5.5 lower to 5.1 higher)	⊕⊕00 LOW	CRITICAL
Psychological status: Hamilton Depression Rating Scale (follow-up 12 weeks; range of scores: not reported; Better indicated by lower values)												
1	randomised trials	serious ¹	no serious inconsistency	serious ²	serious ³	none	32 (hydrocortisone)	33	-	MD 0.9 lower (2.55 lower to 0.75 higher)	⊕000 VERY LOW	CRITICAL
Psychological status: Positive and negative effect scale (PANAS) positive affect (follow-up 6 weeks; range of scores: 10-50; Better indicated by higher values)												
1	randomised trials	serious ¹	no serious inconsistency	serious ²	very serious ³	none	20 (fludrocortisone)	20	-	MD 1 higher (3.67 lower to 5.67 higher)	⊕000 VERY LOW	CRITICAL
Activity levels: activity scale (follow-up 12 weeks; range of scores: not reported; Better indicated by higher values)												
1	randomised trials	serious ¹	no serious inconsistency	serious ²	serious ³	none	34 (hydrocortisone)	34	-	MD 0.4 lower (1 lower to 0.2 higher)	⊕000 VERY LOW	CRITICAL
Activity levels: distance before exhausted (ordinal scale) (follow-up 6 weeks; range of scores: 1-5; Better indicated by higher values)												
1	randomised trials	serious ¹	no serious inconsistency	serious ²	very serious ³	none	20 (fludrocortisone)	20	-	MD 0 higher (0.72 lower to 0.72 higher)	⊕000 VERY LOW	CRITICAL
Activity levels: Duke Activity Status Index (follow-up 11 weeks; range of scores: 0-58.2; Better indicated by higher values)												
1	randomised trials	very serious ¹	no serious inconsistency	very serious ⁵	serious ³	none	38 (fludrocortisone)	45	-	MD 2.5 higher (1.49 lower to 6.49 higher)	⊕000 VERY LOW	CRITICAL
Cognitive function: Reaction time (secs) (follow-up 6 weeks; Better indicated by lower values)												

1	randomised trials	serious ¹	no serious inconsistency	serious ²	very serious ³	none	20 (fludrocortisone)	20	-	MD 0.01 lower (0.06 lower to 0.04 higher)	⊕000 VERY LOW	CRITICAL
Cognitive function: inability to concentrate on VAS (follow-up 6 weeks; range of scores: 0-10; Better indicated by lower values)												
1	randomised trials	serious ¹	no serious inconsistency	serious ²	serious ³	none	20 (fludrocortisone)	20	-	MD 0.6 lower (2.18 lower to 0.98 higher)	⊕000 VERY LOW	CRITICAL
Cognitive function: forgetfulness on VAS (follow-up 6 weeks; range of scores: 0-10; Better indicated by lower values)												
1	randomised trials	serious ¹	no serious inconsistency	serious ²	serious ³	none	20 (fludrocortisone)	20	-	MD 0.9 lower (2.45 lower to 0.65 higher)	⊕000 VERY LOW	CRITICAL
Cognitive function: confusion on VAS (follow-up 6 weeks; range of scores: 0-10; Better indicated by lower values)												
1	randomised trials	serious ¹	no serious inconsistency	serious ²	very serious ³	none	20 (fludrocortisone)	20	-	MD 0.1 lower (1.68 lower to 1.48 higher)	⊕000 VERY LOW	CRITICAL
Pain: muscle pain on VAS (follow-up 6 weeks; range of scores: 0-10; Better indicated by lower values)												
1	randomised trials	serious ¹	no serious inconsistency	serious ²	very serious ³	none	20 (fludrocortisone)	20	-	MD 0.1 lower (1.82 lower to 1.62 higher)	⊕000 VERY LOW	CRITICAL
Pain: joint pain on VAS (follow-up 6 weeks; range of scores: 0-10; Better indicated by lower values)												
1	randomised trials	serious ¹	no serious inconsistency	serious ²	very serious ³	none	20 (fludrocortisone)	20	-	MD 0.3 lower (2.39 lower to 1.79 higher)	⊕000 VERY LOW	CRITICAL
Sleep quality: unrefreshing sleep on VAS (follow-up 6 weeks; range of scores: 0-10; Better indicated by lower values)												
1	randomised trials	serious ¹	no serious inconsistency	serious ²	serious ³	none	20 (fludrocortisone)	20	-	MD 0.5 lower (1.68 lower to 0.68 higher)	⊕000 VERY LOW	CRITICAL
[NASAL] Sleep quality: Functional Outcomes of Sleep Questionnaire (follow-up 4-8 weeks; range of scores: not reported; Better indicated by higher values)												

1	randomised trials	serious ¹	no serious inconsistency	very serious ⁴	serious ³	none	28 (nasal flunisolide)	28	-	MD 0.89 higher (0.99 lower to 2.77 higher)	⊕000 VERY LOW	CRITICAL
[NASAL] Sleep quality: Epworth Sleepiness Scale (follow-up 4-8 weeks; range of scores: 0-24; Better indicated by lower values)												
1	randomised trials	serious ¹	no serious inconsistency	very serious ²	serious ³	none	28 (nasal flunisolide)	28	-	MD 3.18 lower (6.57 lower to 0.21 higher)	⊕000 VERY LOW	CRITICAL
Exercise performance measure: Treadmill time (mins) (follow-up 6 weeks; Better indicated by lower values)												
1	randomised trials	serious ¹	no serious inconsistency	serious ²	serious ³	none	20 (fludrocortisone)	20	-	MD 2.6 higher (3.85 lower to 9.05 higher)	⊕000 VERY LOW	CRITICAL
Symptom scales: Wellness scale (follow-up 11 weeks; range of scores: 0-100; Better indicated by higher values)												
1	randomised trials	very serious ¹	no serious inconsistency	very serious ⁵	serious ³	none	38 (fludrocortisone)	45	-	MD 1.1 higher (3.58 lower to 5.78 higher)	⊕000 VERY LOW	CRITICAL
Symptom scales: Wellness scale (follow-up 12 weeks; range of scores: 0-100; Better indicated by higher values)												
1	randomised trials	very serious ¹	no serious inconsistency	serious ²	serious ³	none	30 (hydrocortisone)	35	-	MD 4.6 higher (0.5 lower to 9.7 higher)	⊕000 VERY LOW	CRITICAL
Symptom scales: Sickness Impact Profile (follow-up 12 weeks; range of scores: 0-68; Better indicated by lower values)												
1	randomised trials	serious ¹	no serious inconsistency	serious ²	no serious imprecision	none	33 (hydrocortisone)	34	-	MD 0.3 lower (3.46 lower to 2.86 higher)	⊕⊕00 LOW	CRITICAL
Symptom scales: headaches on VAS (follow-up 6 weeks; range of scores: 0-10; Better indicated by lower values)												
1	randomised trials	serious ¹	no serious inconsistency	serious ²	very serious ³	none	20 (fludrocortisone)	20	-	MD 0 higher (1.55 lower to 1.55 higher)	⊕000 VERY LOW	CRITICAL
Symptom scales: painful lymph nodes on VAS (follow-up 6 weeks; range of scores: 0-10; Better indicated by lower values)												

1	randomised trials	serious ¹	no serious inconsistency	serious ²	very serious ³	none	20 (fludrocortisone)	20	-	MD 0.2 lower (2.31 lower to 1.91 higher)	⊕000 VERY LOW	CRITICAL
Symptom scales: sore throat on VAS (follow-up 6 weeks; range of scores: 0-10; Better indicated by lower values)												
1	randomised trials	very serious ¹	no serious inconsistency	serious ²	serious ³	none	20 (fludrocortisone)	20	-	MD 0.2 lower (1.8 lower to 1.4 higher)	⊕000 VERY LOW	CRITICAL

¹ Downgraded by 1 increment if the majority of the evidence was at high risk of bias, and downgraded by 2 increments if the majority of the evidence was at very high risk of bias

² The majority of the evidence included an indirect population (downgraded by one increment) downgraded if the ME/CFS diagnostic criteria used did not include PEM as a compulsory feature (original analysis); percentage of participants with PEM unclear [PEM reanalysis – see Appendix G for additional details].

³ Downgraded by 1 increment if the confidence interval crossed one MID or by 2 increments if the confidence interval crossed both MIDs

⁴ The majority of the evidence included an indirect population (downgraded by one increment) or a very indirect population (downgraded by two increments): 1) downgraded if the ME/CFS diagnostic criteria used did not include PEM as a compulsory feature [original analysis]; percentage of participants with PEM unclear [PEM reanalysis – see Appendix G for additional details]. 2) Additionally downgraded due to all participants having rhinitis (Kakumanu 2003)

⁵ The majority of the evidence included an indirect population (downgraded by one increment) or a very indirect population (downgraded by two increments): 1) downgraded if the ME/CFS diagnostic criteria used did not include PEM as a compulsory feature [original analysis]; percentage of participants with PEM unclear [PEM reanalysis – see Appendix G for additional details]. 2) Additionally downgraded due the majority of evidence coming from a study where all participants had neurally-mediated hypotension (Rowe 2001)