

ME/CFS, Autism & ADHD

Many chronic conditions increase the risk of co-occurring conditions, and some conditions seem to cluster together. A person who has myalgic encephalomyelitis/chronic fatigue syndrome (ME/CFS), autism spectrum disorder (ASD) or attention deficit hyperactivity disorder (ADHD) seems to be more likely to experience the other conditions as well. We don't yet know why these conditions cluster together, but it means managing ME/CFS with neurodivergence can be a challenge due to the impact each set of symptoms have on each other.

ME/CFS

ME/CFS is a chronic health condition that is characterised by severe energy limits and post-exertional malaise, which is where symptoms get much worse after mild physical, mental or emotional exertion.

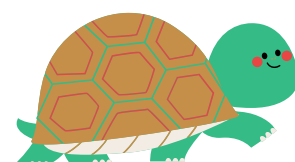
ME/CFS & Autism

Autism is a lifelong neurodevelopmental condition, also known as **Autism Spectrum Disorder**, that affects how a person interacts with the world, leading to differences in social communication, interaction, and behaviour. Autism can present very differently from person to person.

Many people with autism can experience sensory sensitivity, difficulty with interpersonal communication and relationships, and heightened anxiety. Additionally, autistic people often also learn to suppress or 'mask' their differences or struggles compared to neurotypical people, which can drain their energy reserves. Because of all this, autistic people can be more prone to burnout, which can lead to low energy, anxiety and depression, among other symptoms. Autistic burnout can sometimes look like PEM, which makes it difficult to differentiate the two. If the person has ME/CFS in addition to autism, the cycle of autistic burnout can make their ME/CFS worse.

ME/CFS & ADHD

ADHD is a neurodevelopmental disorder affecting executive function, characterised by persistent symptoms of inattention, hyperactivity, and impulsivity. The impact of ADHD can vary from person to person, particularly between genders.



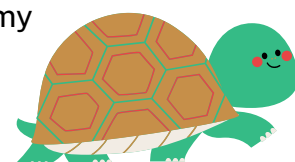
ME/CFS, Autism & ADHD

People with ADHD often seek out activities and experiences that increase their dopamine (a feel-good hormone), which can lead to higher risk or impulsive behaviours. Their executive dysfunction means that remembering appointments, setting and sticking to routines and habits, and being able to respect their bodies' limits, which are all cornerstones of pacing and self-management for ME/CFS, can be really hard to do.

Strategies for Managing ME/CFS, Autism & ADHD

Because of the impact each condition has on each other, it can be helpful to find strategies for managing each of them. Many people with autism and ADHD say that they find traditional pacing strategies for ME/CFS difficult to stick to or that they might not work as well for them. These are some strategies they have suggested instead:

- **Find an ADHD medication that works for you:** Some people have found that medicating their ADHD (typical medications include stimulants) actually improved their ME/CFS symptoms too, as well as their executive functioning. A psychiatrist will need to prescribe your medication for you.
- **Find an occupational therapist or a psychologist who works for you:** OTs and some psychologists can be helpful for teaching self-management skills and helping you adapt your life to your conditions. It's important to find someone you like and trust, and who has knowledge of your conditions or symptoms.
- **Use reminders:** You can use phone alarms, calendar pop ups, post-it notes or visual reminders to help you to remember medications, pacing strategies and routines. It might take some time to work out the best reminders for you.
- **Limit sensory input:** If you find that you are sensitive to noise or light or too many things at once, there are lots of ways of limiting sensory input. You can use noise-cancelling headphones, sunglasses, only invite one person at a time to catch up, or visit shops at low-sensory hours. Sensory overload is a common trigger for ME/CFS crashes.
- **Include pleasurable sensory input:** For some people, pleasurable sensory input can help manage anxiety or self-soothe and induce relaxation or balance. Some examples might be: weighted cuddle toys or blankets, soft clothes, sour sweets or breath mints, fidget toys, or music.
- **Use rules and prickly burs:** To manage executive dysfunction, some people use personal rules that turn important tasks into something that causes discomfort if not completed. People with ADHD may find that they will only complete tasks if there is a very enticing reward or to avoid a lot of discomfort (a bur). For example, "I am not allowed to sleep if I haven't brushed my teeth".



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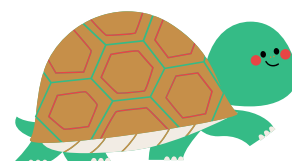
- **Keep pleasurable and meaningful activities in your life:** There is a tendency with all three conditions to experience low mood and a loss of enjoyment in life, simply because of the limitations they impose on you. Think of values you hold and meaningful activities you enjoy and find ways to keep them in your life. This might involve some problem solving with other peers or with a professional.
- **Find ways of staying connected that work for you:** In the same vein, ME/CFS is an isolating illness in and of itself, let alone with other limitations and disability on top. Seek out ways of connecting with others that respect your limits (maybe using virtual technologies) and that are fulfilling to you. This might also include finding support groups to connect with others in the same boat. If you have problems with executive function, positive peer pressure (being accountable to others) or a technique called body doubling, which is where someone spends time with you in-person or virtually for company when you need to complete important tasks, can be helpful tools, too.

Emerge ACT has a number of social support groups, including online, in-person and social media groups, which can help a person with ME/CFS and neurodivergence connect with others in the same boat. Contact us for more information.

Information in this factsheet is adapted from a range of sources, including the HealthDirect website and lived experiences of some of our members:

- <https://www.healthdirect.gov.au/autism>
- <https://www.healthdirect.gov.au/attention-deficit-disorder-add-or-adhd>
- <https://neurodivergentinsights.com/autism-and-health-issues/#:~:text=of%20co%2Doccurrence-,Autistic%20Burnout,force%2Dfeeding%2C%20or%20pain.>
- Khubaib, N. (2025). The association between Autism Spectrum Disorder and Chronic Fatigue Syndrome. A Care Plan Perspective. Mental Health: Global Challenges Journal, 8(1), 60-66. <https://doi.org/10.56508/mhgcj.v8i1.265>
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- Rogers, D. C., Dittner, A. J., Rimes, K. A., & Chalder, T. (2017). Fatigue in an adult attention deficit hyperactivity disorder population: A trans-diagnostic approach. Br J Clin Psychol, 56(1), 33-52. <https://doi.org/10.1111/bjc.12119>
- Saez-Francas, N., Alegre, J., Calvo, N., Antonio Ramos-Quiroga, J., Ruiz, E., Hernandez-Vara, J., & Casas, M. (2012). Attention-deficit hyperactivity disorder in chronic fatigue syndrome patients. Psychiatry Res, 200(2-3), 748-753. <https://doi.org/10.1016/j.psychres.2012.04.041>

This factsheet is part of our Club Tortoise program for pacing with energy-limiting conditions.



For more information or help managing your condition:

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