### Correspondence

Psychological Medicine, **43** (2013). doi:10.1017/S0033291713001256

### **Editorial** note

Unusually for *Psychological Medicine*, we publish below six letters concerning the paper by White *et al.* (2013) on the PACE Trial. The UK Office of the Journal received 15 letters criticizing aspects of this paper, but it seemed unlikely that all of these letters originated entirely independently since a number arrived on successive days and reiterated the same points. Nevertheless, in the spirit of scientific openness we have published six of the letters which cover the main criticisms, and invited Professor White to reply to them.

### References

White PD, Goldsmith K, Johnson AL, Chalder T, Sharpe M; PACE Trial Management Group (2013). Recovery from chronic fatigue syndrome after treatments given in the PACE trial. *Psychological Medicine*. Published online: 31 January 2013. doi:10.1017/S0033291713000020.

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### Letter to the Editor

## Comments on 'Recovery from chronic fatigue syndrome after treatments given in the PACE trial'

In their paper on recovery rates in the PACE trial, White *et al.* (2013) acknowledge that 'objective measures of physical activity have been found previously to correlate poorly with self-reported outcomes'. Yet, there is no attempt to utilize the Six Minute Walking Test results. The best results were a mean of 379 metres walked in the graded exercise therapy condition, a gain of 67 metres in 52 weeks, 35 metres more than the specialist medical care (SMC)-only group (White *et al.* 2011). The cognitive behaviour therapy group showed no improvement compared with the SMC group. The distance of 379 metres is exceeded by patients listed for lung transplantation (Kadikar *et al.* 1997) and by older patients with chronic heart failure (Lipkin *et al.* 1986). Given the recognized

problem with self-reported outcomes, reliance solely on such measures leaves open the question of the validity of the recovery criteria of PACE.

### **Declaration of Interest**

None.

### References

**Kadikar A, Maurer J, Kesten S** (1997). The Six-Minute Walk Test: a guide to assessment for lung transplantation. *Journal of Heart and Lung Transplantation* **16**, 313–319.

Lipkin DP, Scriven AJ, Crake T, Poole-Wilson PA (1986). Six minute walking test for assessing exercise capacity in chronic heart failure. *British Medical Journal* **292**, 653–655.

White PD, Goldsmith K, Johnson AL, Chalder T, Sharpe M; PACE Trial Management Group (2013). Recovery from chronic fatigue syndrome after treatments given in the PACE trial. *Psychological Medicine*. Published online: 31 January 2013. doi:10.1017/S0033291713000020.

White PD, Goldsmith KA, Johnson AL, Potts L, Walwyn R, DeCesare JC, Baber HL, Burgess M, Clark LV, Cox DL, Bavinton J, Angus BJ, Murphy G, Murphy M, O'Dowd H, Wilks D, McCrone P, Chalder T, Sharpe M; PACE Trial Management Group (2011). Comparison of adaptive pacing therapy, cognitive behaviour therapy, graded exercise therapy, and specialist medical care for chronic fatigue syndrome (PACE): a randomised trial. *Lancet* 377, 823–836.

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### Letter to the Editor

# 'Recovery from chronic fatigue syndrome after treatments given in the PACE trial': recovery or remission?

White and colleagues conclude from the results of the PACE trial that 'recovery from CFS (chronic fatigue syndrome) is possible, and that CBT (cognitive behavioural therapy) and GET (graded exercise therapy) are the therapies most likely to lead to recovery' (White *et al.* 2013).