

Dear Dr. Green,

In the hope of improving the final P2P, ME/CFS Report, and reducing the amount of criticism that ensues, please find the comments below and attached.

According to Susan E. Maier, Ph.D. Office of Research on Womens' Health, Division of Program Coordination, Planning and Strategic Initiatives, National Institutes of Health, the Office of Disease Prevention coordinates the Pathways to Prevention Program and identified the goals of the ME/CFS report to be issued as part of that program to be: (1) Identify research gaps and methodological and scientific weaknesses in a the science, (2) suggest research needs, and (3) move the field forward through an unbiased and evidence-based assessment of the complex issue.

Page 14 line 275 of the preliminary draft of that report states, "Studies addressing biopsychosocial parameters (including body-mind connection) function, and QOL should be addressed."

This statement and/or recommendation is of questionable value, may not be of relevant to the assigned goals of the report, and should be considered for removal from the final version of the report for two reasons: (1) It is a term and practice mainly used by mental health professionals whose role in the management of ME/CFS has already been unduly, overly emphasized, and (2) it is neither a term or discipline considered worthy by the National Library of Medicine for inclusion as a Medical Subject Heading. The recommendation by the Pathways to Prevention Panel to enhance the use of a discipline either so new, or of such dubious value, as to not be recognized by the National Library of Medicine as a Medical Subject Heading (a MeSH term) does both the report and the ME/CFS patient community a disservice.

A sense of the meaning of the term biopsychosocial, and its implementation as a discipline by contemporary healthcare

practitioners can be learned from the overview of a book published in August, 2014 by Timothy P. Melchert, Ph.D., entitled, *“Biopsychosocial Practice: A Science-Based Framework for Behavioral Health Care.”*

•••••••••• Overview

“Throughout the history of mental health practice, conflicting and irreconcilable theories have caused confusion about how disorders form, what they look like, and how they should be assessed and treated. But dramatic scientific advances in recent years have shed light on the scientific processes that underlie and connect body and mind. As a result, the patchwork theoretical orientations of the past can now be replaced by a unified, science-based, biopsychosocial framework for understanding human development, functioning, and behavior change.

In this book, Timothy Melchert presents a comprehensive biopsychosocial framework for behavioral health care. He lays out the essential scientific and ethical foundations of the framework and then applies it across the treatment process, from intake through outcome assessment. In doing so, Melchert provides a critical basis for the integrated health care systems of the 21st century.

This book is appropriate for all mental health practitioners treating all types of patients, at all levels of functioning, in general as well as specialized practice.”

As indicated in a previous email, biopsychosocial is not a Medical Subject Heading (MeSH term).

“MeSH is the National Library of Medicine's controlled vocabulary thesaurus. It consists of sets of terms naming descriptors in a hierarchical structure that permits searching at various levels of specificity.

MeSH descriptors are arranged in both an alphabetic and a hierarchical structure. At the most general level of the hierarchical structure are very broad headings such as "Anatomy" or "Mental Disorders." More specific headings are found at more narrow levels of the twelve-level hierarchy, such as "Ankle" and "Conduct Disorder." There are 27,149 descriptors in 2014 MeSH. There are also over 218,000 entry terms that assist in finding the most appropriate MeSH Heading, for example, "Vitamin C" is an entry term to "Ascorbic Acid." In addition to these headings, there are more than 219,000 headings called Supplementary Concept Records (formerly Supplementary Chemical Records) within a separate thesaurus.

MeSH Applications

The MeSH thesaurus is used by NLM for indexing articles from 5,400 of the world's leading biomedical journals for the MEDLINE®/PubMed® database. It is also used for the NLM-produced database that includes cataloging of books, documents, and audiovisuals acquired by the Library. Each bibliographic reference is associated with a set of MeSH terms that describe the content of the item. Similarly, search queries use MeSH vocabulary to find items on a desired topic.

Establishing and Updating MeSH

The Medical Subject Headings Section [staff](#) continually revise and update the MeSH vocabulary. Staff subject specialists are responsible for areas of the health sciences in which they have knowledge and expertise. In addition to receiving suggestions from indexers and others, the staff collect new terms as they appear in the scientific literature or in emerging areas of research; define these terms within the context of existing vocabulary; and recommend their addition to MeSH. Professionals in various disciplines are also consulted regarding broad organizational changes and close coordination is maintained with various specialized vocabularies.

As has been previously mentioned, it is possible to retrieve biomedical literature using "biopsychosocial" as a text word. However, the ability to retrieve literature searching for a text word should not be considered synonymous with the National Library of Medicine's designation of a word as a MeSH term. As indicated in the article below, there are advantages of searching literature using both text words and MeSH terms. However, in my mind, the

acceptance of a word as a MeSH term by the National Library of Medicine establishes that term or word as being recognized as a sufficiently established term or discipline to merit being placed in the hierarchical structure of this nation's biomedical literature.

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PMCID: PMC442177

Comparison of Medical Subject Headings and text-word searches in MEDLINE to retrieve studies on sleep in healthy individuals*

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ABSTRACT

Objective: The objective was to investigate the performance of two search strategies in the retrieval of primary research papers containing descriptive information on the sleep of healthy people from MEDLINE.

Methodology: Two search strategies—one based on the use of only Medical Subject Headings (MeSH), the second based on text-word searching—were evaluated as to their specificity and sensitivity in retrieving a set of relevant research papers published in the journal *Sleep* from 1996 to 2001 that were preselected by a hand search.

Results: The subject search provided higher specificity than the text-word search (66% and 47%, respectively) but lower sensitivity (78% for the subject search versus 88% for the text-word search). Each search strategy gave some unique relevant hits.

Conclusions: The two search strategies complemented each other and should be used together for maximal retrieval. No combination of MeSH terms could provide comprehensive yet reasonably precise retrieval of relevant articles. The text-word searching had sensitivity and specificity comparable to the subject search. In addition, use of text words "normal," "healthy," and "control" in the title or abstract fields to limit the final sets provided an efficient way to increase the specificity of both search strategies.

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Thank-you for the consideration.

Sincerely,

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Kenneth J. Friedman, Ph.D.

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Board Member, ImmuneDysfunction.org

Associate Professor of Pharmacology and Physiology, New Jersey Medical School (retired)