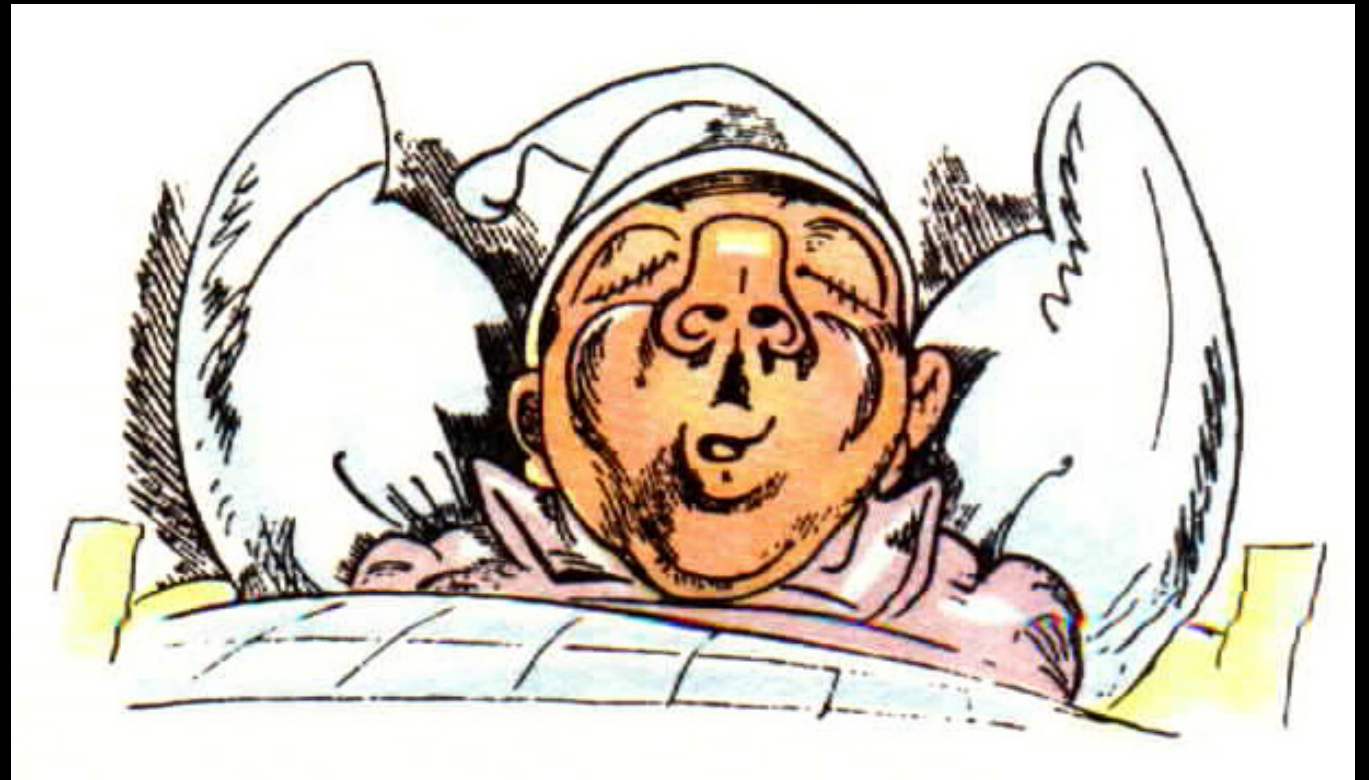


# Fatigue – Pro's and Con's of Expert Groups

Lukas  
Radbruch



# Fatigue

[www.wikipedia.com](http://www.wikipedia.com)

Fatigue is a state, following a period of mental or physical activity, characterized by a lessened capacity for work and reduced efficiency of accomplishment, usually accompanied by a feeling of weariness, sleepiness, or irritability.

It may also follow when, from any cause, energy expenditure outstrips restorative processes and may be confined to a single organ.

Fatigue can also be quite dangerous when performing certain duties that require constant concentration, such as driving a [vehicle](#).



# Fatigue and weakness

## Incidence

<i>Seamark et al. 1996</i>	hospice - admission	Weakness 7% Confusion/agitation 17%
<i>Bruera 2000</i>	admission palliative care unit	Asthenia 90% Sedation/Confusion 60%
<i>Blesch et al. 1999</i>	oncology in-/outpat.	VAS Fatigue 99%
<i>Mercadante et al. 2000</i>	home care	Weakness 63% → 85% Drowsiness 9% → 51%
<i>Radbruch et al. 2000</i>	palliative care unit MiDOS	Tiredness 77% Weakness 86%



# Fatigue and weakness

## Incidence

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<i>Mercadante et al. 2000</i>	home car	<i>Exhaustion</i>	Weakness 63% → 85% Drowsiness 9% → 51%
<i>Radbruch et al. 2000</i>	palliative MiDOS	<i>Asthenia</i>  <i>Fatigue</i>	Tiredness 77% Weakness 86%



# Fatigue and weakness

## Qualitative study

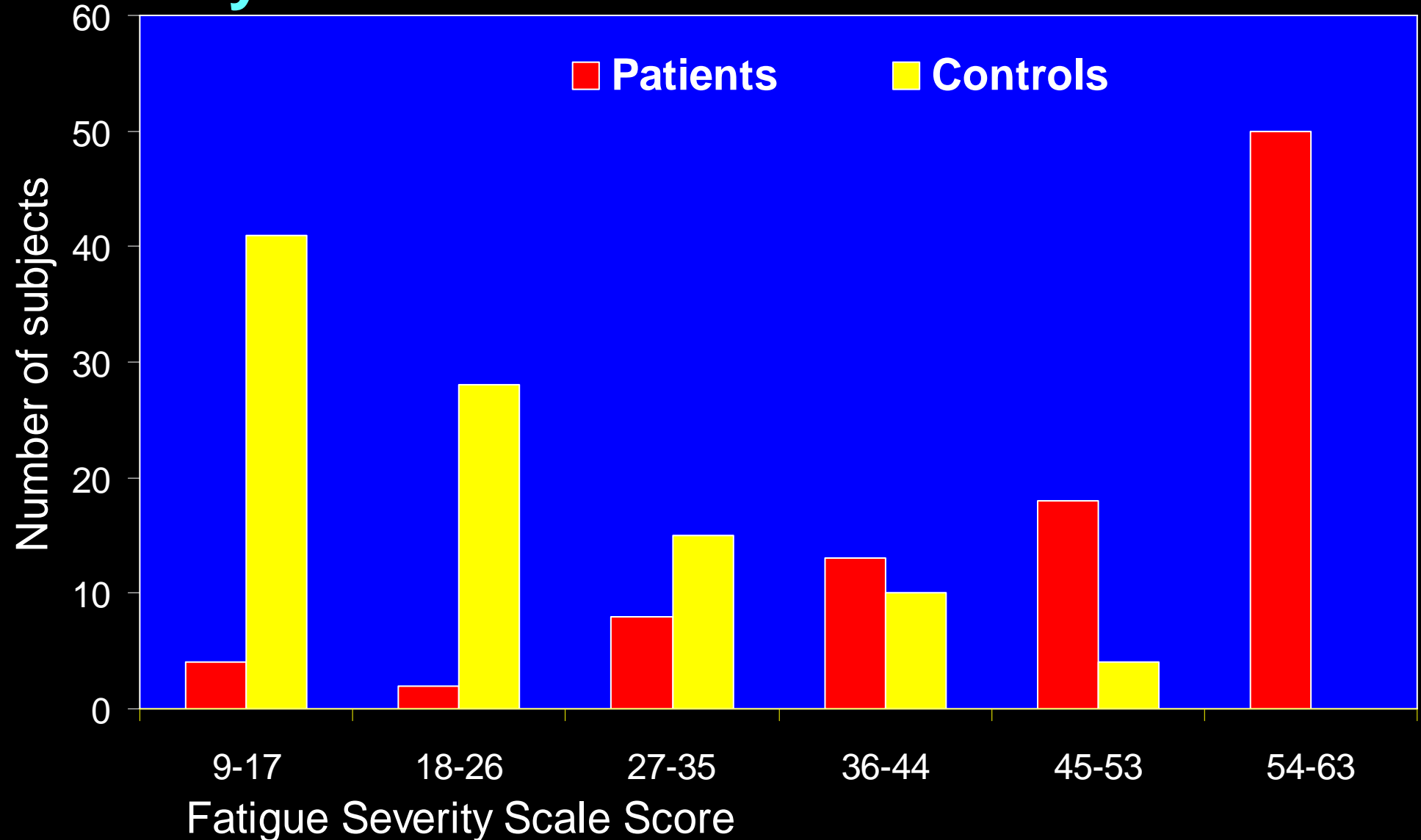
<b>Patients</b>	20 cancer patients (20 healthy comparisons)
<b>Physical 59%</b>	working ability ↓, weakness, sleep requirements ↑, rest periods ↑
<b>Affektive 29%</b>	sadness, motivation ↓, anxiety
<b>Cognitive 12%</b>	concentration ↓, tiredness, thought disturbances

Glaus et al, Supp Care Cancer 4 (1996) 82-96)



# Fatigue in Palliative Care

## Severity



# Fatigue

## EAPC Expert Group

3. As a working definition Fatigue is defined as a subjective feeling of tiredness, weakness or lack of energy.
4. Qualitative differences between fatigue in cancer patients and in healthy controls have been proposed. However, these differences seem to be only an expression of the overwhelming intensity of cancer-related fatigue.



# Fatigue

## EAPC Expert Group

**7. A physical and cognitive dimension seem to be acknowledged by all authors.**

**8. Weakness seems to be useful as a paraphrase for the physical dimension, and tiredness for the cognitive dimension. Screening for fatigue should include questions on weariness and tiredness such as “Do you feel unusual tired or weak?” or “How weak are you?” / “How tired are you?”.**



# Fatigue

## EAPC Expert Group

- 11. However, most patients will require symptomatic treatment for fatigue with pharmacological and/or non-pharmacological interventions.**
  
- 12. In the final stage of life, fatigue may provide protection and shielding from suffering for the patient, and treatment of fatigue may be detrimental. Identification of the time point where treatment of fatigue no longer is indicated is important to alleviate distress at the end of life.**



# Fatigue

## EAPC Expert Group

**15. Aerobic exercise effectively alleviates fatigue in patients receiving cancer treatment.**

**17. Treatment with methylphenidate (investigated predominantly in opioid-induced sedation and cancer-related fatigue) and modafinil (in advanced neurological diseases and AIDS) provides effective relief of fatigue.**

