Fatigue and Exhaustion

What is fatigue?

*Fatigue* is caused by continuous or repeated physical or mental effort. The affected person can't continue or repeat an activity, and can't resist falling asleep. They can't concentrate, can't perform efficiently, and may feel bored or fuzzyheaded. They may be irritable, easily upset and intolerant of others. *Fatigue goes away after rest or a change in activity*. The person is refreshed after a good night's sleep. Fatigue is common in those who are caring for an ill person at home, and tends to increase throughout the period of care.

How do we manage fatigue?

- healthy lifestyle
- appropriate recreation and rest
- good sleep habits
- respite; for a few hours, overnight, or longer is important for carers.

*It is important for carers to monitor their own health and to seek treatment as they need to.*

How is fatigue related to illness?

Fatigue is a prominent symptom of illness, due to many factors.

- The body uses energy to fight disease.
- Treatments such as chemotherapy, radiotherapy, surgery and medications cause fatigue. Immunotherapy in particular, can cause fatigue that stays long after treatment is complete.
- Disturbances in eating and sleeping habits increase fatigue.
- Fatigue can be a symptom of anxiety or depression that accompanies illness.
- Prolonged inactivity reduces fitness.

How do we manage fatigue related to illness?

Healthy lifestyle and alternating periods of appropriate activity and rest will help combat fatigue related to treatment. Good management of sleep disorders and treatment of clinical anxiety or depression will result in a better ability to do things.

What about fatigue in advanced illness?

Palliative care patients often report that fatigue is their most worrying symptom because it will not go away. In addition to the factors mentioned above:-

- Advanced illness itself causes fatigue
- People with advanced illness are psychologically stressed.
- Pain increases fatigue.
- Medications used to control pain may have a sedative effect.
- Symptoms of severe illness such as vomiting, diarrhoea, and breathing difficulties are exhausting.
- It is difficult for many patients to remain well nourished because of the disease process. Efforts to eat and drink well may be only partly successful.
- Some patients report that friends and relatives don’t understand the extent of their exhaustion, or the fact that they wake up tired. This can cause problems, especially when the ill person is irritable or resistant to suggestions because they are exhausted.
In palliative care, the relationship between the patient and carer can become fraught if both are exhausted.

It may help family and friends to remember that it is the person’s condition, not their nature that leads to irritability. Ask the doctor or nurse to explain the situation to family members. If the ill person or the carer is snapping at the other, give yourself and the other person a break. Acknowledging the other person’s need for rest is fundamental. Phrases such as ‘I can see you’re fully stretched today’ or ‘You seem knocked out today’ can help. It is essential that both the ill person and the carer are willing to share the responsibility for care, by accepting help from family, friends and volunteers.

The most important step is to discuss fatigue with your healthcare care team.

- Healthy lifestyle involves trying to eat and drink well. Frequent, small meals are easier to handle than large meals. Ask for advice about diet, nourishing drinks, and nutritional supplements. Eating what you like, when you want to, may be best for you.
- Get adequate rest. Ask for advice if you have sleeping problems. Going to bed at a set time and preparing for bed in a set order can help prepare you for sleep.
- Something small to eat, and a warm milk drink at bedtime can help.
- Alternate periods of activity and rest during the day. Vary your activities. Try activity just before meals and rest after them.
- A nap in the early afternoon is helpful.
- Pamper yourself. Do something you enjoy each day, no matter how small. Watch a funny video, listen to music, ring a friend, or read a magazine.
- Sitting in the garden, meeting with a baby, or spending time with a pet can be particularly beneficial and refreshing.
- Try to do something physical each day, depending on your strength. Get up for a meal, walk to the mailbox, walk around the house or garden.
- Decide your priorities. Some people find a shower refreshing. For others, it is just an exhausting chore, and a wash will suffice.

The doctor will assess each aspect of your condition. It is important to discuss your feelings and symptoms frankly, so that diagnosis is accurate and treatment correct.

- Pain control is important. Your need for medication may change over time. Always mention changes in your pain to the doctor or nurse.
- Changing the type, dosage, timing or combination of medication can help.
- Increasing the use of common stimulants such as coffee early in the day may help. Discuss this with your doctor.
- Stimulant medications are helpful in a small group of patients, although the beneficial effects may be short term. Their use by many patients is limited by drug interactions.
- Depression is not necessarily part of your illness, and needs to be evaluated and treated separately.
- Tell the nurse or doctor about any symptoms such as breathing difficulties, vomiting, or bowel problems, so they can be treated.
- Anaemia is treatable in some cases. However repeated blood transfusion can lose effectiveness as the disease progresses.

Use your energy for the things you enjoy and find rewarding. Leave the rest.

Thank you to Palliative Care Victoria for the source material for this fact sheet.