

Fatigue Presentation

Kirsteen Simmons
Occupational Therapist
Pilgrims Hospice Ashford
December 2019

What is Fatigue?

- ▶ Extreme and persistent tiredness, weakness or exhaustion - physically and/or mentally.
- ▶ Fatigue can affect all areas of your life, impacting on activities of daily living, relationships and social events.
- ▶ It is subjective and a complex symptom.
- ▶ In a healthy person, fatigue is alleviated by rest or sleep. In a person with illness related fatigue, this often does not help.
- ▶ Cancer related fatigue is not relieved by rest or sleep.
- ▶ Fatigue does not correlate to activity levels.

How do patients describe fatigue?

Tiredness
Lethargy
Weakness
Drowsiness
Sleepy
Lazy

Cancer related fatigue

- ▶ One of the most common side effects, for patients with cancer (Ahlberg et al 2003, Stone and Minton 2008)
- ▶ Most severe and distressing symptom (Winningham et al 1994, Pepper et al 1993)
- ▶ Chemo therapy, radiotherapy and biological therapy can contribute too.

Non cancer related fatigue

- ▶ Multiple Sclerosis, Motor Neurone Disease, heart failure, renal failure and respiratory diseases.
- ▶ Mental health needs - depression, stress and anxiety.

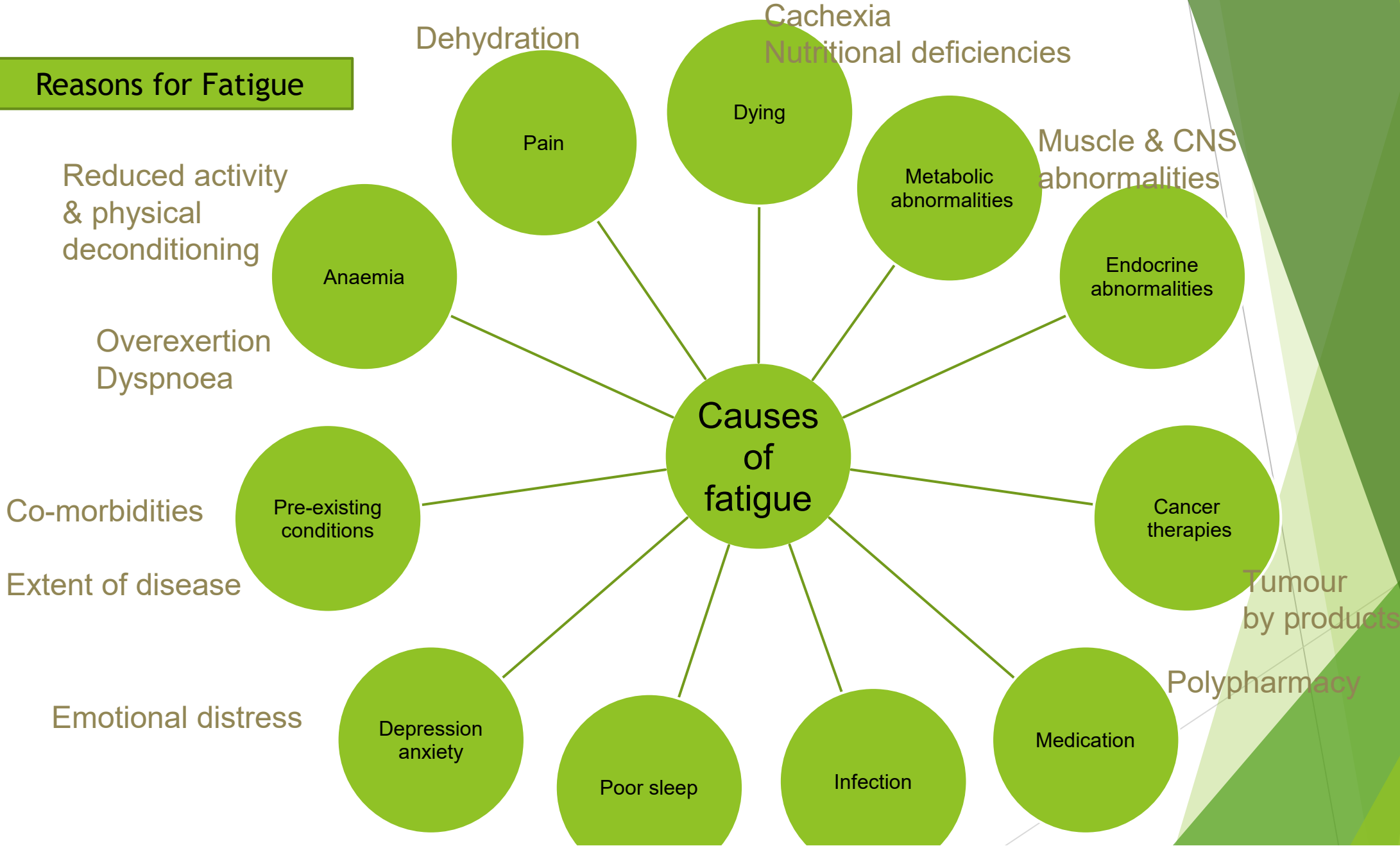
Causal factors in cancer related fatigue

Recent studies have suggested:

- ▶ The need for extra energy to repair and heal body tissue damaged by treatment.
- ▶ The build up of toxic substances from the cancer treatment.
- ▶ The effect of therapy on the immune system.
- ▶ Changes in the sleep/wake cycle.
- ▶ Fatigue can also be a common symptom of some cancers in patients who are not receiving any treatment.



Reasons for Fatigue



(Including info from Yennurajalingam & Bruera 2010 & www.caresearch.com 2017)

Other considerations

- ▶ Exclude anaemia / possible bleed
- ▶ Exclude infection / acute illness
- ▶ Consider dehydration and nutrition
- ▶ Address: pain, nausea, sleep, depression
- ▶ Medication

Occupational Therapy: Our Approach with Fatigue Management



- Educate and inform
- Develop self awareness eg. triggers
- Support behavioural change and adjustment
- Enable coping strategies
- Utilise carer / peer support



OT Fatigue Management Principles

- ▶ Activity management; prioritise/planning/pacing
- ▶ Organisation - tools, materials, work area, support
- ▶ Adopt a good posture (energy conservation)
- ▶ Lead a healthy lifestyle and take exercise
- ▶ Take frequent rests, and relaxation (body and mind)

Coping Strategies

- ▶ Good news! There are strategies which can help, so that fatigue can have less impact on your life and you stay in control.
- ▶ Understand your energy limits and sticking to them.
- ▶ Balancing your day between rest and activity
- ▶ Alternating activity types in your day.
- ▶ Keeping a diary / monitoring
- ▶ Managing your expectations
- ▶ Relaxation techniques
- ▶ Getting the best sleep possible
- ▶ The 5P's and 4 D's

Using Energy Effectively

The 5 P's

- ▶ Plan
- ▶ Prioritise
- ▶ Pace
- ▶ Posture
- ▶ Permission

The 4 D's

- ▶ Dump
- ▶ Delay
- ▶ Do
- ▶ Delegate

Referral for Fatigue Management

- ▶ Palliative diagnosis, referred to Hospice
 - ▶ Any one who says they are experiencing fatigue
 - ▶ Willing to attend 3 sessions / able to participate in 1:1
 - ▶ Able to attend at the hospice for the sessions (own transport or volunteer car).
 - ▶ Able to cope cognitively and behaviourally
 - ▶ IPOS - identify needs
 - ▶ Identify through three simple questions:
 1. Are you experiencing any fatigue?
 2. If yes, how severe has it been, on average, during the past week on a scale of 1-10?
 3. How is the fatigue interfering with your ability to function?
- (Russell K, Portnoy and Loretta M 1999)

How to refer?

- ▶ Emis - Linked episode For Occupational Therapy
- ▶ Reasoning why?
- ▶ Is the person aware of the completed referral?
- ▶ Awareness of individual communication needs
- ▶ Could discuss with OT Team too!

Fatigue Management Group

- ▶ 3 Sessions for one hour each
- ▶ Fridays 10.30-11.30
- ▶ Facilitated by OT and OTA
- ▶ Opportunity to learn from others
- ▶ Gain ideas and coping strategies
- ▶ Practice relaxation & visualisation

Ongoing development of fatigue management group

- ▶ Re-evaluating the process, how we run it and content of sessions
- ▶ Use of IPOS at beginning and again at end of three sessions
- ▶ Identify and educate people early in their care
- ▶ Group to be reviewed early 2020 by OT Team to ensure it is still meeting the needs of the patients

Any Thoughts or Questions?



Relaxation



References

- ▶ Yennurajalingam, S & Bruera, E. (2010) Fatigue & asthenia in *Oxford Textbook of Palliative Medicine* 4th Ed. Oxford University Press: Oxford.
- ▶ Ahlberg et al 2003. Assessment and management of cancer-related fatigue in adults. NCBI PubMed.gov
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- ▶ Pepper et al 1993. Fatigue scales and chronic fatigue syndrome: issues of sensitivity and specificity. ncbi.nlm.nih.gov