

Fatigue:

Making plans,
Making sense,
Making peace

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I have no disclosures.



Learning Objectives

Identify clinical resources for mitigating fatigue.

Develop an approach for **examining the impact of fatigue** on clinical priorities and decision making.



Road Map

- In the clinic
 - The stats
 - How clinicians think
 - Treatment possibilities
- In our own contexts
 - Theories (ways of knowing) about fatigue
 - Interrogating your experience, plans, outcomes



TIRED
FATIGUED
EXHAUSTED
WEARY



In cancer, fatigue is..

- More severe
- More distressing
- Less relieved with rest
- A subjective experience
Tools can describe but not encompass.

*Your fatigue experience does not compare or
measure up to someone else's.
But you can find common ground.*



EVERYONE IS TIRED

- **49%** of patients with cancer in a systematic review / meta-analysis of 129 studies with 71,568 patients (32768552)
- **80%** of those undergoing chemotherapy and/or radiotherapy (18204940)
- With metastatic disease, **more than 75%** (8039118, 1870042)
- In complete remission*, still **29%** (24436136)
 - *breast, prostate, colorectal, lung



How clinicians think

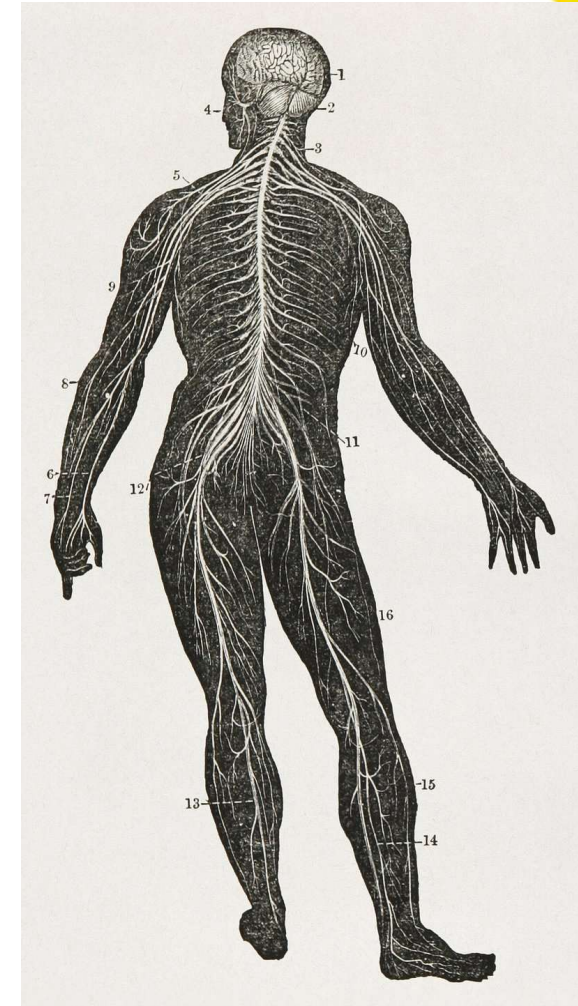
- **Screening:** Is it present? How severe?

1. Fatigue severity scale
2. Fatigue questionnaire
3. Multidimensional fatigue inventory
4. Multidimensional fatigue symptom inventory
5. Revised Piper fatigue scale
6. Revised Schwartz cancer fatigue scale
7. Brief fatigue inventory
8. Multidimensional assessment of fatigue
9. Fatigue symptom inventory
10. Functional Assessment of Chronic Illness Therapy-Fatigue (FACIT-F)
11. Functional Assessment of Cancer Therapy-Fatigue (FACT-F)
12. Edmonton Symptom Assessment Scale (ESAS)



How clinicians think

- **Assessing**
 - Deeper dive to find the cause(s)
 - When it started; how often; new factors; change over time; what helps or hinders; disruption; context
 - Cancer itself, or treatments
 - Medications, sleep, substances, other symptoms, heart, lungs, kidneys, blood, mood, hormones, infection, diet, immune



How clinicians think

- **Managing**

- Cure (or at least lessen severity); adapt; adjust
- Team approach (rehabilitation therapies, mental health, integrative care, palliative care, nursing)



“Here’s what you need to do..”

- ☐ Fill out this survey!
- ☐ Make these appointments:
 - ☐ Physical therapy
 - ☐ Nutrition
 - ☐ Cognitive Behavioral Therapy
 - ☐ Massage
- ☐ Daily exercise (3-5 hours / week)
 - ☐ Cardio
 - ☐ Strength
 - ☐ Range of motion
- ☐ Mindfulness, breathing, yoga
- ☐ Supportive expressive therapies
- ☐ Sleep
 - ☐ Hygiene
 - ☐ Diary
 - ☐ Environment (clean your room!)
- ☐ Medication use record
- ☐ Bright White Light Therapy (1250- 10,000 lux)
- ☐ Energy conservation:
 - ☐ Meal trains, schedules
 - ☐ Apps!
 - ☐ Lists on lists! Efficiency!





**On a scale from one
to even...**

... I can't



More pills?

- Stimulants
- Wakefulness agents
- Sleep aids
- Steroids
- Appetite stimulants
- Supplements
 - American ginseng, Ginger, Coenzyme Q10, Guarana, L-carnitine






(And in the back of your mind...)

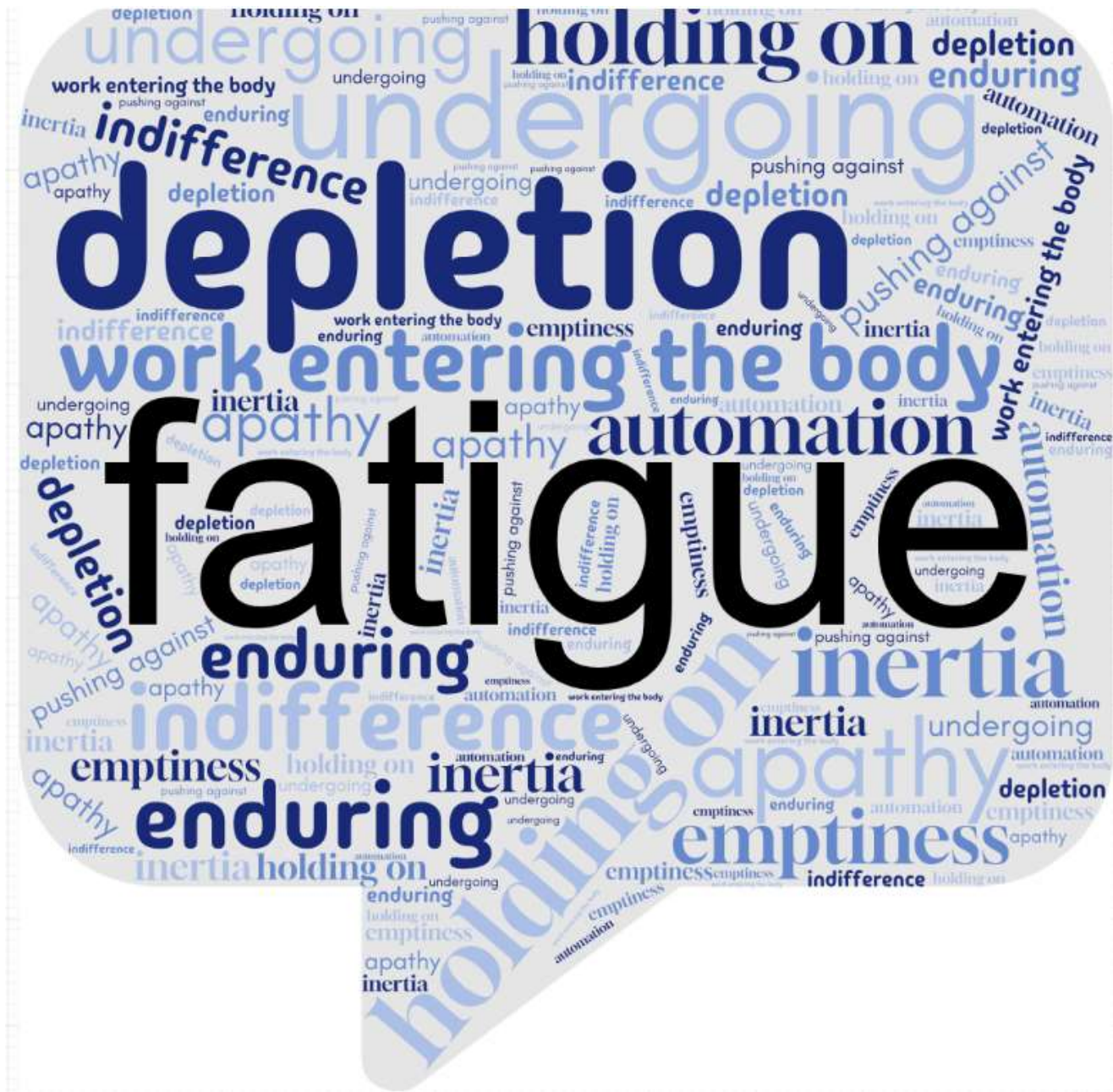
- What does this fatigue mean about my cancer?
- Will this get better?
- What should I do first?
- Am I running out of time?





Are there other ways to
think about
talk about
interact with
fatigue?







I can't

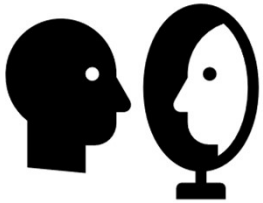
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Interrogating our Fatigue



- You know yourself best. Trust yourself.
 - What has this been like?
 - What does it mean, for me?



- There's more than one perspective.
 - How can we talk, starting with hearing what we each worry about?
 - What would caring for me mean for them?



- Budgets, not binaries.
 - If this is the energy I have, what's my priority each day / week / month?



May 2025

Mon	Tue	Wed	Thu	Fri	Sat	Sun
			1 folded laundry 3 emails	2 Sibling chat groceries	3 weeds-30 minutes soccer game	4 sort pictures: April meal prep
5 walk 30 minutes	6 Gave a Talk	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

What does “better” look like?

- **Cure:** make the problem go away
- **Manage:** slow worsening, minimize harm
- **Adapt:** Strengthen reserves, function better even if the symptom persists
- **Accommodate:** “to make room for”, heal your experience with fatigue



Thank you.

Questions and Discussion



Resources for Patients

- NCCN.org
- Cancer.org
- Cancer.gov
- ucsfhealth.org/education/tips-for-conserving-your-energy
- <https://www.archives-pmr.org/> Energy Conservation Techniques to Decrease Fatigue. Vawtwni, Archana et al. Archives of Physical Medicine and Rehabilitation, Volume 100, Issue 6, 1193 - 1196



Resources for Clinicians

- Center to Advance Palliative Care: capc.org
- nccn.org/professionals/physician_gls/pdf/fatigue.pdf
- Journal of Pain and Symptom Management
- Thomas Cole et al. Medical Humanities: an Introduction. Cambridge UP.

