Today

• Review causes of cancer-related fatigue
• Describe how clinicians approach cancer-related fatigue
• Discuss evidence-based interventions to improve cancer-related fatigue

Causes of fatigue

• Uncontrolled cancer
• Cancer treatment side effects
• Poorly controlled symptoms
• Anemia
• Drug side effects
• Thyroid abnormalities
• High calcium
• Inactivity
• Nutritional deficiencies
• "Multifactorial"
“Identify and treat what you can”

Cancer-Related Fatigue

- Exceedingly common
- Multifactorial, occurs with other symptoms
- Low-intensity exercise is the best evidence-based intervention
- Pharmacologic approaches have demonstrated mixed benefits
  - Stimulants (methylphenidate)
  - Dexamethasone
  - American ginseng
Insomnia

- Frequent awakening: 76%
- Difficulty falling asleep: 46%
- Staying asleep: 35%
- Early morning awakening: 23%

Predisposing Factors:
- Female
- Older age
- Medical/psychiatric/substance disorders
- Sedentary existence
- Genitourinary symptoms
- Gastrointestinal symptoms
- Obesity
- Night sweats
Difficulty going to sleep, maintaining sleep, early waking, generally ≥3 x / week

Daytime consequences of night-time issues

Adequate opportunity to sleep

No other (sleep) disorder explains the issues

Acute < 3 months

Chronic > 3 months

Daytime consequences of night-time issues

Adequate opportunity to sleep

No other (sleep) disorder explains the issues

Excessive time spent in bed

Irregular sleep-wake schedule

Napping

Engaging in sleep-interfering activities in the bedroom

Ill-timed light exposure

Cognitive Behavioral Therapy (insomnia)

Low-to-moderate exercise

Yoga

Pharmacologic Approaches

Melatonin

Trazodone
Starvation Cachexia

<table>
<thead>
<tr>
<th></th>
<th>Starvation</th>
<th>Cachexia</th>
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</thead>
<tbody>
<tr>
<td>Anorexia</td>
<td>+/-</td>
<td>++</td>
</tr>
<tr>
<td>Metabolism</td>
<td>--</td>
<td>+++</td>
</tr>
<tr>
<td>Reverses with increased calories</td>
<td>++</td>
<td>+/-</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Agent</th>
<th>Suggested dosing</th>
<th>Benefits</th>
<th>Risks</th>
<th>Cost per month$^a$</th>
</tr>
</thead>
<tbody>
<tr>
<td>Megestrol acetate/ medroxyprogesterone</td>
<td>200–600 mg/day; liquid formulation may be less expensive and more bioavailable than tablets</td>
<td>Improved appetite, weight gain</td>
<td>Edema, Thromboembolism, Adrenal insufficiency</td>
<td>$57.43$</td>
</tr>
<tr>
<td>Corticosteroids</td>
<td>5–40 mg dexamethasone equivalent dose/day$^b$</td>
<td>Improved appetite</td>
<td>Multiple common side effects</td>
<td>$27.11$</td>
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## What can we do?

- Recognize there is no "magic pill"
- Avoid "Doctor Google"
- "If it sounds too good to be true... it is"
- "If it looks good and you can keep it down, go for it"
- Early referral to nutrition
- Avoid extreme/fad diets
- Physical therapy
- Continue to move
- Mind-body connection
- Seeking help is a sign of strength

![Diagram showing various components related to health and wellness](image)

- Physical activity
- Patient-reported outcomes
- Local resources
- Education
- Caregiver support
- Clinical trials
- Funding
- Nutritionists
- Occupational therapy
- Physical therapy
- Pain
- Palliative care
- Physical assessment
- Health
- Research
- Advocacy
- Care