

IN EVERY ISSUE

Tired of Being Tired?

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Cancer-related fatigue doesn't have to slow you down.

Not all cancer patients experience fatigue at a severe level, but studies show that up to 90 percent of patients are affected by cancer-related fatigue at some point during treatment. Both how and when patients experience fatigue can vary, and it can last months or even years after therapy ends.

Causes

A broad range of cancer treatments can cause fatigue. Radiation and chemotherapy destroy healthy cells in addition to cancer cells, so the body may use more energy to repair damaged healthy cells, leading to fatigue.

Anemia, one of the major causes of fatigue, can be a direct result of the cancer (specifically leukemia, lymphoma, or myeloma) or its treatment. When the body has too few red blood cells, which carry oxygen to the body's tissues, a person will feel lethargic and fatigued.

Cancer and its treatments may also decrease thyroid function and levels of the stress hormone cortisol, which can lead to fatigue or a feeling of sluggishness.

Psychological factors, such as depression and anxiety, also can contribute to the development of fatigue.

Management

The best way to combat cancer-related fatigue is to treat the underlying medical cause. The Food and Drug Administration recently noted that blood transfusions are the preferred method for correcting anemia (see "New Blood" from Spring 2009, available at www.curetoday.com/new_blood), but erythropoiesis-stimulating agents, such as Procrit (epoetin alfa) and Aranesp (darbepoetin alfa), also may be used to increase red blood cells and avoid blood transfusions in patients undergoing palliative (not curative) chemotherapy. Not all studies have shown improvement in fatigue with ESAs, so these drugs aren't specifically approved for fatigue.

Fatigue caused by low thyroid function can be treated with daily synthetic hormone pills, such as levothyroxine (sold under the brand names Levothroid, Levoxyl, and Synthroid).

Stimulants such as Ritalin (methylphenidate), a treatment for attention deficit disorder, and Provigil (modafinil), which is approved for narcolepsy, are sometimes used to treat cancer-related fatigue, but studies to determine their effectiveness are ongoing.

Studies have shown that exercise, such as light- to moderate-intensity walking, reduces fatigue and improves physical energy, appetite, and quality of life. (For more on exercise to combat fatigue, see “Fighting Fatigue” from Summer 2009, available at www.curetoday.com/fighting_fatigue.) Talk to your doctor about an exercise routine based on your current stage of treatment and your physical abilities.

Prioritize daily activities and use time management to save energy for the things you care about most. Do important tasks and activities first thing in the morning, take on lower priorities later in the day, and allow others to help with additional chores. Plan your activities during the times you have the most energy, and try easier or shorter versions of activities you enjoy. Find other ways to conserve energy when possible.

Some suggestions from M.D. Anderson Cancer Center on ways to conserve energy include: Do housework sitting down when possible; prepare double portions of food and freeze half; sit down to bathe; let a grocery store employee carry bags to the car; and when bathing or dressing, minimize leaning down or reaching.

Plan your day so you have time to take short naps—no longer than 30 minutes—between activities and try to exercise a little each day. Establish a normal sleep pattern and, as much as possible, optimize your activities and medication schedule to allow you to get enough rest.

Eat a healthy diet and make sure you are getting proper nutrition, vitamins, and fluids, but limit caffeine and alcohol intake. Because cancer and its treatments affect appetite and tastes, it may help to consult with a registered dietitian about a strategy to get all of the necessary nutrition in your diet.