



PATIENT/FAMILY TEACHING SHEET

ASSISTING FAMILIES TO MANAGE FATIGUE

What is fatigue?

- Tiredness, exhaustion or lack of energy
- A condition which impacts the ability to perform any activity
- Seen frequently in hospice and palliative care patients
- A complicated symptom which can have many causes
- Sometimes comes with depressed feelings

What are the signs that a patient is fatigued?

- Unable to perform the normal activities for that patient – every person is different in their normal activity level, “just too tired”
- Not participating in the normal routine
- Lack of appetite – do not have the energy to eat
- Sleepiness
- Not talking
- Depressed

What to report to the Hospice/Palliative Care Team?

- Any of the behaviors listed above
- Assist your loved one to rank their fatigue using a scale – it helps the team to be able to find what works for him/her and how severe the fatigue is: 0 = **no fatigue** to 10 = **in bed all day**
- What makes the fatigue better or worse
- The concerns you as the caregiver have about the fatigue
- Spiritual concerns
- Changes in appetite

- Any distressing symptoms that are not controlled
- Have they experienced fatigue before – and if so what made it better

What can be done to help fatigue?

Because fatigue is a complex problem, it takes a group of actions to help the symptoms. The team will work with the patient, family and the primary care provider to find the causes for the fatigue and discuss treatments.

Things family can do:

- Gradually help to increase his/her activity and assist to conserve energy
 - Plan, schedule and prioritize activities at optimal times of the day
 - Help your loved one keep a log of which time of the day seems to be his/her best time
 - Eliminate or postpone activities that are not his/her priority
 - Assist with position changes – do not encourage staying in bed
 - Use sunlight/light source to cue his/her body to feel energized
 - Try activities that restore energy
 - Assist with daily activities such as eating, moving or bathing, plan activities ahead of time
 - Accept the new energy pace of your loved one
- Rest and sleep better
 - Encourage him/her to rest as needed
 - Establish and continue a regular bedtime and awakening
 - Avoid interrupted sleep time to get continuous hours of sleep
 - Plan rest times or naps during the day during late morning and mid afternoon
 - Avoid sleeping later in the day, which could interrupt night time sleep
 - Ask the team if using oxygen while sleeping will help
- Increase food intake
 - Try nutritious, high protein, nutrient dense food
 - Small frequent meals
 - Add protein supplements to foods or drinks
 - Frequent mouth care (before and after meals)

- Ask your team about possible use of medications to stimulate appetite
 - Tell your team about any distressing symptoms that are not in control
 - Ask your team about treatments for depression

Other HPNA Patient/Family Teaching Sheets are available at www.hpna.org

Reference

***Core Curriculum for the Generalist Hospice and Palliative Nurse.* Dubuque, IA: Kendall/Hunt Publishing Company; 2005.**

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