Fatigue Management for Living with Multiple Sclerosis

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Objectives

Define fatigue and fatigability Primary and Secondary Effects Strategies for Fatigue Management

Fatigue

One of most common symptoms for PwMS

Can be reported in up to 80% of individuals

Can have a significant impact on function

Most described symptoms as most limiting in PwMS

Subjective report of feeling "tired"

Tends to be generalized

• Whole body or global

Various Measurements in therapy



Visual Analog Scale, Modified Fatigue Impact Scale, Fatigue Scale for Motor and Cognitive Functions



Fatigability

Objective measure of how quickly someone gets tired

Worsening of motor performance over time or with repetition

Can be part of a specific motion or task or body part

- Foot drop that develops with walking
- Reduced ability to raise arm after lifting it several times
- Can be tested in physical therapy (or other disciplines)
 - Six Minute Walk Test, 5 Times Sit to Stand

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Secondary Effects

Adaptions to lifestyle due to disease progress

• Walking less due to weakness

Sedentary lifestyle

• Sitting more due to balance deficits

Learned behaviors

- · Easier to ask for help than to do it yourself
- · Can be related to adaptions

Mental health

- Depression, anxiety
- Depression can lead to fatigue or fatigue can lead to depression



Heat Exposure

Related to reduce nerve conduction with heat exposure

Typically transient

• Will subside with rest

Use of cooling devices or air conditioned rooms

- · Has demonstrated improved outcomes with walking
- Aides with reducing fatigue and fatigability



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Fatigue Management Techniques

Exercise can directly help with fatigue management

- Interval training
 - · Performing same activity with rest (walking or recumbent bike)
 - Rest breaks to prevent fatigue
- Circuit training
 - · Performing various activities to allow for rest from one
 - Sit to stands > core > balance. REPEAT
- · Improve motor performance, strength, balance, endurance
- Combats disuse effects or sedentary behaviors
- · Can assist with symptoms related to depression
 - Release of neurotransmitters

Fatigue Management Techniques

Monitoring Fatigue

- Monitoring fatigue and activities that create fatigue
- Can also monitor daily fatigue t/o day
- Develop plan to modify activities
 - Doing laundry all at once vs break up throughout day or week
 - Performing all grocery shopping at once vs multiple trips throughout week
 - Performing activities in AM vs PM

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Fatigue Management Techniques

Adaptive equipment

- Use of foot drop devices (Saebo Step, AFO)
- Use of wheelchairs or walking aides (walking poles, canes, walkers)
- Use of ADL equipment
 - Shower chair
 - Reachers
 - Bedcanes
 - Stair lift



Takeaways	Fatigue is subjective and multifactorial
	Fatigue is different than fatigability
	Fatigue can be directly related to disease process or can be related to disuse or sedentary causes
	Exercise can help with fatigue
	Can monitor activities and fatigue and develop plan to modify activities
	Can use adaptive strategies or equipment to

Questions?

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