

Fatigue

(March 2023)

Rationale

Fatigue is a common presenting symptom, particularly in primary care. However, the cause may not be immediately apparent because fatigue is a nonspecific symptom. Therefore, the key to making a diagnosis is taking a careful and detailed history, followed by an appropriate physical examination and limited laboratory testing.

Although fatigue can be a symptom of almost any illness, the disorders listed here are those characterized almost exclusively by fatigue as a predominant symptom.

Causal Conditions

(list not exhaustive)

- Iatrogenic/pharmacologic
 - a. Hypnotics
 - b. Antihypertensives
 - c. Antidepressants
 - d. Substance use disorder
- Idiopathic
 - a. Idiopathic chronic fatigue
 - b. Chronic fatigue syndrome
 - c. Fibromyalgia
- Other disease categories associated with fatigue
 - a. Psychiatric

- b. Endocrine and metabolic
- c. Cardiopulmonary
- d. Infectious and postinfectious (e.g., long COVID)
- e. Connective tissue disorders
- f. Sleep disturbances (e.g., shift work)
- g. Neoplastic
- h. Hematologic

Key Objectives

Given a patient with fatigue, the candidate will perform a thorough and complete history and physical examination to establish an underlying cause.

Enabling Objectives

Given a patient with fatigue, the candidate will

- list and interpret critical clinical findings, including
 - a. features that are more likely associated with either a psychological or iatrogenic cause of fatigue; and
 - b. results of a complete physical examination;
- critically select and interpret clinical investigations, recognizing that in the absence of localizing features, tests may be of limited value; and
- construct an effective initial management plan, including
 - a. treating any underlying causes; and
 - b. outlining a plan of management that will help minimize the effect of fatigue on function and quality of life if no underlying cause can be identified.