What's new in Fatigue (2022)

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Some of the new information and major changes included in Therapeutic Guidelines.

Fatigue is a common symptom and one of the most frequent reasons for presentation in general practice. This update to the Fatigue Guidelines focuses on practical advice to assist clinicians in the assessment and management of patients who present with fatigue.

Many **common medical conditions** can be associated with fatigue—the guidelines outline associated conditions to guide assessment, with links to relevant *Therapeutic Guidelines* information to clarify management and referral pathways.

A holistic patient assessment also considers psychosocial, behavioural and environmental factors that can cause or contribute to fatigue. **Mental health** is emphasised with links to assessment tools and advice on assessing and managing people with associated anxiety or depressive symptoms.

Advice on the **diagnostic process** when a patient presents with fatigue has been updated and expanded to include key points and questions for clinicians to consider, **red flags** that should raise concern, and assessment considerations when fatigue presents in **specific age groups**. A flowchart has been included to illustrate a stepwise approach to the diagnostic process.

The importance of **understanding symptoms** and what a patient means by 'fatigue' has been highlighted. A new figure illustrates the multifactorial and potentially overlapping contributors to fatigue and how specific fatigue-related symptoms may help to direct diagnostic inquiry.

Evidence suggests that only a minority of patients who report unexplained fatigue have significantly abnormal pathology test results; to minimise the potential harms of overinvestigation and optimise testing, the section on when to investigate fatigue has been expanded to support clinician decision-making and provide useful guidance.

The **principles of rational testing** are discussed further in a new appendix that includes resources for further reading. Updated tables showing the **prevalence of conditions associated with fatigue** are included to further guide diagnostic considerations and inform estimation of disease probability in different age groups.

To aid estimation of the post-test probability of disease in different patient scenarios, the guidelines include **worked examples** for breast cancer and iron-deficiency anaemia.

For a patient with nonsevere fatigue of recent onset and no indications of, or a low pretest probability of, serious underlying disease, the guidelines advocate 'watchful waiting'; this approach is outlined and relevant points to discuss with patients are included in a new figure.

Advice on **fatigue in patients with pre-existing conditions** has been expanded to address fatigue related to cancer and provide links to advice on managing fatigue in patients with specific medical conditions.

Accepted management approaches for **persistent unexplained fatigue** are discussed, including those that may be helpful for patients with myalgic encephalomyelitis / chronic fatigue syndrome (ME/CFS). Updated advice on ME/CFS addresses the evidence around the condition, current diagnostic criteria and commonly co-occurring conditions. Links to relevant external information are also provided to help clinicians manage this challenging presentation.

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