



Encephalitis and Fatigue

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Following encephalitis, people commonly experience excessive fatigue. From a general feeling of tiredness, a lack of energy, weariness or even lethargy. In the context of encephalitis it is very important that the person is assessed by a responsible physician to ensure that the ongoing fatigue is not a direct symptom of the disorder, and to establish in what way it might be a secondary effect of the illness. It might be secondary due to medical and/or psychological reasons. It should also be borne in mind that fatigue is also a general, normal, experience, and an important response to physical exertion, emotional stress, or lack of sleep.

Assessment:

In general, people who get up in the morning rested but rapidly fatigue when active may have an ongoing condition or disease. Indeed, fatigue is considered a condition in its own right when it is not relieved by adequate rest, adequate sleep, or removal of stressful factors. Individuals who awaken fatigued and the level of fatigue remains constant throughout the day may be suffering from depression. Fatigue that is not relieved by normal means, or that occurs in the absence of a known cause or other symptoms should be fully assessed by a responsible medical person or team. This is particularly important in the case of encephalitis as encephalitis can affect parts of the brain that might control sleep and arousal, as well as memory and thinking, but also involves a host of psychological stresses. It is vital that the survivor and her/his family be helped to get a picture of how much of a person's current fatigue is due to medical and/or psychological factors so that an appropriate, and realistic, treatment plan can be drawn up.

The pattern of fatigue, then, gives clues to its underlying cause. In the consultation the following questions might be asked:

- sleep pattern
 - o How much do you sleep?
 - o What hours do you sleep?
 - o Do you awake feeling rested or fatigued?
- quality
 - o Does the level of fatigue remain constant throughout the day?
 - o Does fatigue get worse as the day goes on?
- emotional state
 - o Are you feeling boredom, unhappiness, or disappointment in your life?
- other
 - o Have you had unusual activity lately?
 - o How are your relationships?
 - o What is your diet like?
 - o Do you get regular exercise?
 - o What other symptoms are present? Is there pain? nausea?
 - o What medications are being taken?

- o time pattern
- o Has fatigue only been developing recently?
- o Has it been lasting for weeks to months?
- o Does fatigue occur in regular cycles?

There might also be a physical examination

It would help your medical team to assess the fatigue problem if you were to be able to make notes of your symptoms and patterns of daily living and sleep before you attend a consultation. You can add to these notes when you see the team to help you remember later what was said and agreed. It would be useful to have information on the following:

- activity levels (what do you do in the mornings, afternoons, evening, night-time)
- caffeine intake (in coffee/tea etc)
- any types of drugs being used (prescribed or non-prescribed), particularly stimulants and/or tranquillisers
- general nutrition
- any additional medical condition
- any additional pain problems

Also, you may be aware of having suffered from sleep disorders in the past (like insomnia, the inability to fall asleep easily). It would be useful to check with people who know you well about whether they have noticed such problems.

Intervention:

When the causes of fatigue are better understood, then a treatment plan can be created. It would probably involve some of the following points. But, please bear in mind that no individual treatment plan should be started before you have a full evaluation from an appropriate professional.

There are 2 main ways of tackling fatigue problems, general lifestyle changes and specific treatment plan. There are also ways to improve sleep patterns that could affect fatigue.

Lifestyle changes:

The following might be useful:

- Taking breaks (holiday/long weekends)
- keep a balanced diet
- keep a program of regular exercise (within prescribed limits)
- maintain adequate relaxation and/or rest periods
- Manage time by re-setting priorities and maintain a reasonable schedule of activities
- develop good sleep habits (see below).

Bear in mind that taking stimulants does not work and can actually make the problem worse when the drugs are discontinued. Tranquilizers generally intensify fatigue. Also, alcohol makes sleep more disturbed.

Treatment plans:

If you are in recovery from an encephalitic episode it will be important to follow a structured programme of activity and rest follow a structured programme as follows:

- keep to graded mental activities followed by rest followed by graded physical activities followed by rest
- The periods of activity should initially be short and the rest long then slowly reversed
- If any symptoms or problems re-appear (like difficulty with speech/concentration/shortness of temper, headaches) then the programme should be slowed down or longer rest periods taken
- putting rest periods into the day can be useful for weeks, months or even years after illness
- rest is preferably lying down in a quiet dark room - not watching TV and not falling asleep
- make sure you know where there is somewhere you can go to (either at work or home) that is reliably quiet and restful
- keep a log of your activities and rest periods so that you can plan effectively, and get the benefit of seeing change happen over a longer term
- It is crucial that you pace yourself - change does not always happen in a progressive way, and you need to pace things to your abilities over time - there will be “good days” which might be followed by “bad days”.

Getting better Sleep

Fatigue is often associated with a poor sleep pattern. Especially if the person has had to be away from home and have had a neurological problem that affected sleep patterns. The following might be useful to help sleep:

- Have a regular routine. Go to bed and get up at roughly the same time each day.
- Avoid drinks with caffeine (tea, coffee, coke) after 5pm. Do not drink alcoholic drinks excessively (remember, alcohol and caffeine disrupt your sleep).
- Do something relaxing before you try to go to sleep e.g. listening to music, relaxation techniques (remember, watching T.V. or reading can both stimulate your mind and may cause you to toss and turn).
- If you have things running through your mind, write them down before you go to bed.
- Avoid sleeping during the day if you have to, have very brief naps, but try to have a plan for reducing how often you have them, and for how long.
- If you are not asleep after 15-30 minutes, get up out of bed and do something relaxing until you feel sleepy. (Remember: Lying in bed tossing and turning will make you frustrated and make it even harder to get to sleep.)
- pacing activities for the day

Further Information

<http://www.biausa.org/Askdoctor/fatigue.htm>

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