

Chronic fatigue therapies provide some with long-term relief

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Study shows benefits from certain treatments can last more than two years.

(HealthDay)—For some people with chronic fatigue syndrome, two types of treatment can provide long-term benefits, new research suggests.

Chronic fatigue syndrome is characterized by extreme, debilitating fatigue that doesn't go away with rest, and lasts for six months or more, hindering normal, everyday activity. There is no cure.

After evaluating four potential treatments for the mysterious condition, British researchers concluded that a form of talk therapy, called cognitive behavioral therapy, and graded [exercise therapy](#) are among the best available treatments for extended relief.

"There is always hope for a simpler treatment in a pill, but we are not

near that yet. So, at present treatments that work to rehabilitate [patients](#) toward normal activity remain the best ones," said Dr. Michael Sharpe, a study co-author and professor of psychological medicine at the University of Oxford in England.

In 2011, after one year of study, Sharpe's team reported positive results for cognitive behavioral therapy and graded exercise therapy. The new results—based on follow-up with three-quarters of the original 641 participants—showed those treatments still helped some people two-and-a-half years later.

The new findings were published recently in the online edition of *The Lancet Psychiatry*.

For the study, patients were randomly divided into four groups. One group received standard medical care, while the others were given a combination of standard medical care plus either graded exercise therapy, cognitive behavioral therapy, or so-called adaptive pacing therapy.

The follow-up questionnaires revealed that cognitive behavioral therapy and graded exercise therapy provided greater relief than standard care or standard care plus adaptive pacing. Patients reported improved physical functioning, less overall fatigue after one year, and continued benefits for more than two years after treatment. In a small number of cases, patients said they experienced complete recovery, according to the researchers.

"The key to maximizing the chance that [these treatments] will work is to first achieve a stable, steady and manageable level of activity, and only then make increases in activity, very slowly," said Sharpe.

With cognitive behavioral therapy, a counselor helps patients pinpoint

negative thinking and develop positive approaches to a particular problem, using techniques such as relaxation training, hypnosis and desensitization. For this study, Sharpe said, the therapy was tailored to help patients cope with the illness and gradually increase activities.

Graded exercise therapy leads patients through individualized exercise plans. It can start with one minute of gentle movement, such as stretching, and build up to light, aerobic exercise, such as walking for increasing periods of time. The goal is to get patients to create and stick with personal routines, and not think they're too tired to do anything, he said.

In contrast, adaptive pacing therapy helps patients identify signs of oncoming exhaustion and alter activities to avoid fatigue altogether, Sharpe explained.

The researchers found none of the treatments led to a decline in a patient's condition. However, they acknowledged that not everyone was helped and said more work is needed to find other beneficial therapies.

Another expert said cognitive behavioral therapy can help someone handle emotional fallout linked to sleeplessness and lack of energy—two complaints commonly associated with the illness.

Cognitive behavioral therapy "may also be useful since it works well for both insomnia and depression, which anyone with severe fatigue is very likely to have," said Dr. Jim Pagel, a sleep disorders specialist and associate clinical professor at the University of Colorado Medical School.

Some health insurance plans cover [cognitive behavioral therapy](#) and graded exercise therapy. Out-of-pocket, one-hour sessions range from \$100 to \$300 or more, depending on the provider and location. Medicare

does not list either [therapy](#) under its coverage plan, but there are exceptions and special circumstances, so check with your care provider, the experts said.

There is no known cause for [chronic fatigue syndrome](#), which usually affects people in their 40s and 50s, women more often than men. The persistent fatigue can last for years and is often accompanied by joint pain, insomnia, enlarged lymph nodes, or memory and concentration problems.

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More information: Find out more about chronic fatigue syndrome at the [U.S. Centers for Disease Control and Prevention](#).

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