

WHAT IS POST-STROKE FATIGUE?

- An overwhelming sense of tiredness or exhaustion that does not always improve with rest. It is not necessarily related to a person's recent activity. Post-stroke fatigue is not explained by the type of stroke, side of stroke or location of stroke in the brain and is not associated with stroke severity.
- It can occur at any time after a stroke, including during the first few weeks. Post-stroke fatigue may improve with time. For some people it can last for up to 3 years or more.

WHAT ARE THE DIFFERENT TYPES OF POST-STROKE FATIGUE?

PHYSICAL - Unusual tiredness after physical activities (e.g., going up the stairs, getting dressed).

COGNITIVE/MENTAL- Difficulty with tasks that require attention, concentration, or multitasking such as following instructions.

EMOTIONAL - Increased tiredness when facing interactions or demanding situations.

WHAT ARE THE SIGNS?

- Low energy/exhaustion (physically and/or mentally)
- Feeling weary or tiredness that becomes greater during physical exercise, during activities that require concentration and/or with stress
- Difficulty with memory and/or concentration
- Emotional instability or a loss of self-control
- Sleeping more
- Unmotivated to perform activities once enjoyed
- More easily tired by daily activities than pre-stroke
- Unpredictable feelings of fatigue without apparent reason

POST-STROKE FATIGUE CAN BE:

UNDER RECOGNIZED - The signs of post-stroke fatigue are not always obvious. Care providers, family and friends may not realize just how genuinely exhausted a person may feel.

MISTAKEN FOR DEPRESSION - Fatigue and depression post stroke are different. Each of these conditions needs to be recognized and managed.

A SIGNIFICANT IMPACT on a person's ability to function, participate in activities and their overall quality of life.



CESN POST-STROKE FATIGUE TOOLKIT

Click [Here](#) or scan code to access the CESN Post Stroke Fatigue Toolkit for:

- health care provider and patient education resources
- lived experience videos



“ —WHAT’S THE LIVED EXPERIENCE?”

“Post-stroke fatigue is different than general tiredness....when you get fatigued you can't function. I just can't take a break to recharge, I need to lay down” - CAROLYN

“..... if I push too hard, if I do too much, it's tired, but it's not I need a nap tired,I lose all emotional regulation, I can't make decisions, my speech gets worse, my functioning gets worse, ...” - JENNA



Listen to persons with stroke share their experience with post-stroke fatigue - visit the [CESN Post-Stroke Fatigue Toolkit](#)

WHAT'S YOUR ROLE?

Be knowledgeable about post-stroke fatigue, management strategies and resources

Screen at least once prior to discharge and when clinically indicated, following established organization protocols

Provide education about post-stroke fatigue, its management and encourage the person to apply energy conservation strategies

Consider if other conditions or medications may be worsening the fatigue

Most importantly, be supportive and an active listener

Energy conservation strategies: The 4Ps

Prioritize

- Determine what needs to be done. Eliminate unnecessary activities

Plan

- Make a plan for daily and weekly activities
- Allow time for daily exercise, rest, and leisure activities
- Alternate between heavy and light tasks
- Spread out the hardest jobs to avoid overwork

Pacing

- Rest before feeling tired and even in the middle of an activity
- Recognize that it might take longer to accomplish a task

Positioning

- Sit as needed, use assistive devices

The **traffic light system** can help **with planning**:

1 **RED** activity – more demanding in nature

2-3 **YELLOW** activities – hard activities that can be spread around the day/week for balance



Unlimited **GREEN** activities – light activities that are meaningful and bring pleasure (e.g., arts/crafts, mindfulness)

Other Tips

- provide suggestions on healthy sleep and eating habits
- promote gradual increases in physical activity to improve deconditioning and physical tolerance
- encourage individuals to communicate their energy status and rest needs
- provide information on mindfulness /stress reduction strategies
- cognitive behavioural therapy may be an adjunct treatment