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CORRELATES OF FATIGUE IN ADVANCED HEART FAILURE PATIENTS

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Background: Fatigue is one of the most common symptoms associated with heart failure (HF), and is an important impediment to maintain an active lifestyle. Unfortunately, factors associated with fatigue are poorly understood. We conducted this study to identify the significant demographic, clinical, and psychological correlates of fatigue in HF patients.

Methods: One hundred and fifty HF patients (73% male, 68% Caucasian, mean age 55.4 years), from a single HF center, completed the Profile of Mood States - Fatigue Subscale, the Minnesota Living with Heart Failure, and the Beck Depression Inventory to assess levels of fatigue, quality of life (QOL), physical health, emotional health, and depression. Descriptive statistics and step-wise multiple regression were used to analyze data. Level of significance was set at 0.05.

Results: Reported mean scores were as follows: fatigue, 2.4 ± 1.0 ; QOL, 42.2 ± 27.0 ; physical health, 18.0 ± 12.0 ; emotional health, 8.4 ± 7.0 ; and depression 9.9 ± 8.2 . Ergometry work rate (watts), lipid-lowering medication, QOL, physical health, emotional health, and depression scores were highly correlated with fatigue ($p < 0.01$). Additional demographic and clinical variables were not significantly related to levels of fatigue. In a multivariate model, watts, physical health, emotional health, and depression explained 51% of the variance in fatigue ($p < 0.001$).

Conclusions: Fatigue significantly impacts QOL in physical and emotional domains. Our findings suggest the need for multiple risk factor interventions to decrease fatigue and possibly improve physical and emotional health; patients on lipid-lowering medications and depression warrant increased scrutiny and may be at high risk for this debilitating symptom of HF.