

15th International Conference on **Surgical Pathology and Cancer Diagnosis**

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4th International Conference on **General Practice & Primary Care**

April 15-16, 2019 Berlin, Germany

Fatigue syndrome in chronic neurological disorders: Non-Pharmacological management strategies.**Monika Zawadka-Kunikowska, Joanna Słomko and Paweł Zalewski**

Nicolaus Copernicus University, Poland

Fatigue is commonly reported symptom in many chronic neurologic diseases such as multiple sclerosis, Parkinson's disease and myasthenia gravis. In general practice, from 20% to almost 80% of patients complain of fatigue which may contribute to decreased quality of life during the course of the disease. Etiology of fatigue in chronic neurologic diseases is multifactorial and may include central, peripheral, primary and secondary components. In clinical practice, it is important to distinguish fatigue from potentially similar symptoms, including excessive daily sleepiness, depression, and apathy. Fatigue should be assessed and managed by a multidisciplinary team including neurologists, occupational therapists, nurses and physiotherapists. Physical/psychological approaches should have a comprehensive nature and may have benefit results in clinical practice. Recent studies suggest that regular aerobic physical training, yoga and cooling therapy may be effective in improving fatigue. Other psychological and cognitive approaches include routinize of daily task, cognitive behavioral therapy and mindfulness intervention. Fatigue can be considered to essential part of neurologic disability and it has to be taken into account during physical examination, evaluation and intervention in general medical practice.

Recent Publications

1. Manjaly ZM, Harrison NA, Critchley HD. Et al. (2019) Pathophysiological and cognitive mechanisms of fatigue in multiple sclerosis. J Neurol Neurosurg Psychiatry.
2. Tur C (2016) Fatigue Management in Multiple Sclerosis. Curr Treat Options Neurol.18: 26.
3. Kluger BM1, Krupp LB, Enoka RM. (2013) Fatigue and fatigability in neurologic illnesses: proposal for a unified taxonomy. Neurology. 80:409-16.

Biography

Monika Zawadka-Kunikowska completed her PhD on the Nicolaus Copernicus University in Torun. Her research interests include: cognitive and autonomic functions in neurodegenerative disorders (Parkinson's disease), autoimmune diseases (multiple sclerosis, myasthenia gravis) related to the pathogenesis of fatigue.

m.zkunikowska@cm.umk.pl

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