

## Interrelationship between Lupus and Fatigue

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### EDITORIAL

Fatigue is described as a sensation of exhaustion or lack of energy that occurs regardless of how well or how long a person sleeps. Physical and mental tiredness are both possible causes of exhaustion. Fatigue is a typical symptom among those who have lupus. The majority of lupus patients experience persistent severe fatigue, which means that the fatigue lasts for a long time. Almost everyone who has lupus has fatigue at some point during their illness. Fibromyalgia, a disease characterized by widespread muscle pain and exhaustion, may be the reason in some patients. Fibromyalgia affects about a quarter of patients with lupus. Another disease, such as anemia or depression, can cause fatigue in certain people. Medication can sometimes cause fatigue as a side effect. If fatigue is a problem for a person with lupus, there are some things he can do to boost his energy, such as:

- Treating the underlying conditions that cause fatigue.
- Getting regular exercise to boost energy.
- Getting enough rest to avoid fatigue.
- Prioritizing activities when living with lupus.
- Keeping a diary to track lupus fatigue.

Anemia, flares and inflammation, infection, gastrointestinal disorders, thyroid imbalance, stress, depression and anxiety, drugs, and loss of sleep due to pain and other symptoms are just a few of the factors that can make someone with lupus feel exhausted. Fatigue can be caused by a variety of medical conditions other than lupus. Low vitamin D levels or poor nutrition, for example, can cause exhaustion, but these issues are easily remedied with supplements or dietary modifications.

Many people with lupus suffer from fatigue, or the sense of being exhausted all day. For some people, exhaustion makes it

difficult to perform daily tasks such as showering, cooking dinner, or going to work. Fatigue assessment and therapy in SLE patients, particularly those with no disease activity, remains a serious difficulty. Medical history, clinical, and laboratory investigations should be used to rule out non-SLE related causes of fatigue. The presence of disease activity or organ damage associated with SLE should then be determined. Remission is the most appropriate therapeutic objective in patients with current disease, but symptomatic support is required in the event of damage. Anxiety and depression are key independent predictors of fatigue in SLE and require specialized evaluation and treatment, including psychological counseling and, if necessary, pharmaceutical medication.

To figure out what's causing fatigue; doctor will ask a number of questions. The treatment for exhaustion will be determined by what appears to be causing the problem. If a person has an infection, for example, treating the ailment with antibiotics should help them feel more energized. If a medicine appears to be the problem, doctor may prescribe a new prescription or advise to take it at a different time. Anemia, or a decreased red blood cell count, affects nearly half of lupus patients, and fatigue is the most common complaint. Iron supplements should be provided if anemia is caused by a lack of iron. Other drugs may be administered if it is caused by inflammation, antibodies, or steroids. A medicine called erythropoietin may be recommended if kidney problems limit the generation of essential hormones that encourage red blood cell development. Some of the medications used to treat the many symptoms of lupus might cause fatigue as well. Cold and allergy medications, muscle relaxants, blood pressure medications, antidepressants, and opioids are among medications that might make fatigued.

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