

Asthenia in primary care; The 3me mnemonic

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Abstract

Asthenia, or lack of energy, is a commonly encountered complaint. Asthenia is a subjective, static feeling of weakness, not necessarily related to effort. We propose a simple algorithm which can help primary care physicians in evaluation and counselling of persons presenting with asthenia. (Table 1). This is equally important in persons with acute symptoms and chronic lifestyle diseases.

Keywords: Anabolic, asthenia, catabolism, fatigue, person centred care

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Introduction

Asthenia, or lack of energy, is a commonly encountered complaint in the clinic.¹ Some individuals may complain of generalized physical weakness, while others may be concerned with cognitive decline, 'nerve weakness' or sexual dysfunction. Though the pathophysiology can be pinpointed in a few persons, the history is vague or inchoate in most. Asthenia is similar to fatigue, but there is a subtle difference in their meaning. Asthenia is a subjective, static feeling of weakness, not necessarily related to effort. Fatigue, on the other hand, is related to effort, and may be quantified, e.g. fatigue or weakness on climbing one flight of stairs, or after conversing with ten patients.

The term 'chronic fatigue syndrome' has often been used as a synonym for idiopathic asthenia. This, however, is not completely true. Chronic fatigue syndrome is a specific condition characterized by profound fatigue or tiredness, lasting more than six months, which is not relieved by rest.²

Checklist

Here, we share a simple algorithm which can help primary

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Table: Facets Of Asthenia Management.

Medical And Metabolic
• Infection and inflammation
• Metabolic
• Iatrogenic
Musculoskeletal
• Bone health
• Muscle health
• Joint health
Mental
• Mindstyle
• Psychological health
• Psychiatric
Ergonomic
• Exercise & activity
• Environment
• Entertainment
Endocrine
• Adrenal
• Thyroid
• Gonadal
Energy Nutrition
• Macro nutrient sufficiency-protein, fat, carbohydrates
• Micro nutrient sufficiency – vitamins, minerals, electrolytes
• Hydration

care physicians address asthenia in their patients. The 3ME mnemonic serves as a checklist for history taking, for evaluation, and also for counselling persons presenting with asthenia (Table). This is equally important in persons with acute symptomatology (e.g. post-viral fever myalgia), chronic rheumatological illness, and chronic lifestyle diseases.

Actionable Algorithm

The medical, metabolic, musculoskeletal and mental facets of asthenia can usually be addressed at primary care level. The same is true for advice related to ergonomics and energy intake (nutrition, hydration). Endocrine evaluation may need in some situation. It must be noted that a hierarchical approach must be followed while optimizing endocrine function. Adrenal function should be prioritized, and optimized, prior to addressing thyroid and gonadal dysfunction.³ This prevents complications such as adrenal crisis.

The 3M3E approach should assist in comprehensive and

complete, as well as clinic-friendly, management of asthenia.

References

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