

Drug therapy effective for cancer related fatigue

Clinical question	How effective and safe are drugs for the management of cancer related fatigue (CRF)?
Bottom line	Compared to placebo, haemopoietic growth factors such as erythropoietin and darbopoietin (for anaemic patients on chemotherapy), and psychostimulants such as methylphenidate, showed small but significant improvements in CRF. Antidepressants such as paroxetine and progestational steroids demonstrated no superiority over placebo in treating CRF.
Caveat	It was not possible to determine optimum doses as a result of this review. Although haemopoietic growth factors and psychostimulants may be effective in treating CRF, they can have serious side effects (convulsions and thrombo-embolic events with erythropoietin and darbopoietin and convulsions, tachycardia and blood dyscrasias with methylphenidate). They should be used under expert supervision and their effects closely monitored.
Context	CRF is common, under-recognised, and difficult to treat. It can occur as a side effect of treatment or because of the disease itself, and can have a significant impact on quality of life and a person's ability to function.
Cochrane Systematic Review	Minton O et al. Drug therapy for cancer related fatigue. Cochrane Reviews 2008, Issue 1. Art. No.: CD006704. DOI:10.1002/14651858.CD006704.pub2. This review contains 27 randomised controlled trials involving 6,746 adult participants.
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