

Helping people manage their fatigue: A randomised controlled trial to evaluate an online fatigue self-management program

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Introduction: An evidence-based, face-to-face fatigue self-management program (Packer et al, 1995), designed based on self-management principles and energy conservation techniques, is available to help people manage their fatigue. However, people with transportation, time or geographic restrictions cannot access this intervention. The internet is a potential solution.

Objective: The main objective of this study was to evaluate an online fatigue self-management program (online FSM) in a sample of adults with chronic neurological conditions.

Methods: A three-arm randomized controlled trial was used to evaluate the online FSM, a 7-week program transformed from the face-to-face program. Each week includes information, online discussions and a homework assignment. Participants share information, express their ideas and/or feelings and offer advice/support to one another. The study consisted of 95 participants with multiple sclerosis, Parkinson's disease, and post-polio syndrome from different parts of Australia. They were tested prior to, directly after participation in the course and 12 weeks later with the Fatigue Impact Scale, Personal Well-being Index and Activity Card Sort.

Results: The results showed that although participants in both the online and information-only FSM groups improved over time on the FIS and ACS ($p < .05$), they were not significantly different from the control group or from each other at any time point. The control group showed no improvements. Results of secondary analysis on a combined group composed of the online and information-only groups (with increased sample size and therefore power of analysis) showed significant differences when compared to the control group.

Conclusion: The findings provide some evidence of the potential benefits of the online FSM program which represents an important strategy for bridging the gap in services for people who can not participate in face-to-face programs.

Contribution to the practice: Although the face-to-face version of the fatigue self-management program is being delivered in some metropolitan areas, new ways to deliver the program are needed to overcome existing barriers. People with neurological conditions in rural and remote areas, those who cannot travel to face-to-face programs and those who are isolated at home due to chronic conditions may now benefit from evidence based programs.