



The Course of Fatigue

Ann Fam Med 2008;6:iii. DOI: 10.1370/afm.923.

The *Annals of Family Medicine* encourages readers to develop a learning community of those seeking to improve health care and health through enhanced primary care. You can participate by conducting a RADICAL journal club and sharing the results of your discussions in the *Annals* online discussion for the featured articles. RADICAL is an acronym for Read, Ask, Discuss, Inquire, Collaborate, Act, and Learn. The word *radical* also indicates the need to engage diverse participants in thinking critically about important issues affecting primary care and then acting on those discussions.¹

HOW IT WORKS

In each issue, the *Annals* selects an article or articles and provides discussion tips and questions. We encourage you to take a RADICAL approach to these materials, and to post a summary of your conversation in our online discussion. (Open the article online and click on "TRACK Comments: Submit a response.") You can find



discussion questions and more information online at: <http://www.AnnFamMed.org/AJC/>.

CURRENT SELECTION

Article for Discussion

Nijrolder I, van der Windt DAWM, van der Horst HE. Prognosis of fatigue and functioning in primary care: a 1-year follow-up study. *Ann Fam Med*. 2008;6(6):519-527.

Discussion Tips

This article describes a practice-based cohort study of patients with fatigue. It might be interesting for participants to reflect upon or even to review the medical records of some of their patients with fatigue before the journal club.

Discussion Questions

- What questions are addressed by the article? Why do they matter? How do the questions fit with what already is known on this topic? How relevant are prior studies (often of referral samples of patients) to family medicine practice settings?
- How appropriate is the study design for answering the research questions?
- To what degree can the findings be accounted for by:
 1. How participants were selected? The exclusion criteria and drop outs? Are any biases likely to be important?
 2. How fatigue, comorbid symptoms, and conditions and outcomes were measured?
 3. Confounding (false attribution of causality because 2 variables discovered to be associated actually are associated with a 3rd factor)?
 4. How information was interpreted?
 5. Chance?
- What are the main findings?
- How well do the 4 identified patterns of patients' course reflect your clinical experience?
- How transportable are the findings to your clinical setting?
- How might these findings be used in clinical practice? What might be the intended and unintended consequences of sharing this prognostic information with patients?
- What are some next steps for applying the findings or answering other questions that this study raises?

References

1. Stange KC, Miller WL, McLellan LA, et al. *Annals Journal Club: It's time to get RADICAL.* *Ann Fam Med*. 2006;4(3):196-197. <http://annfammed.org/cgi/content/full/4/3/196>.