

Fatigue is a very common complaint, and can be due to a variety of factors. One of the commonest is insomnia, which is usually related to an increase of pain at night.

Many arachnoiditis patients find sleep difficult and they may have some reversal of day-night pattern. Fatigue is also of course a feature of autoimmune conditions and in multiple sclerosis, which as we have seen, have similarities to arachnoiditis.

Fatigue in arachnoiditis may be episodic or continual. It should be noted that depression is associated with a lack of energy and this may well be compounding the problem.

'Tiredness' was reported in 92% of respondents in the New Zealand survey, 76% in the global survey, and 56% in Aldrete's survey. In the New Zealand survey, 48% had moderate tiredness, 38% severe and 6% extreme.

Sleep disturbance is understandably common, and usually directly related to pain, which tends to be worse at night. It may contribute to depression, which is an understandable reaction to intractable pain, loss of function, loss of role and job, financial and relationship problems as seen in other chronic, debilitating conditions.

Fear for the future (prognosis cannot be predicted) and uncertainty about the diagnosis substantially increase this problem. In the Global survey, 84% had disturbed sleep.

Heat intolerance: this common symptom is similar to the problems experienced by patients with Multiple Sclerosis. Hot conditions (e.g. a hot bath) exacerbate pain, weakness and other symptoms.

91% of Aldrete's survey and 58% of the Global survey respondents reported this symptom.

Weight gain occurs frequently (50% of the global survey respondents).

This is largely to do with decreased mobility and may also be secondary to medication, particularly drugs such as: amitriptyline, gabapentin, ibuprofen, morphine and other opiates, prednisolone & methylprednisolone.

Increased weight may of course result in further loss of mobility and puts undue stress on the joints of the lower body, exacerbating joint pain and if there is weakness, increasing the risk of falls.

Alternatively, some patients may suffer weight loss, due to general debility and often, poor appetite.

The cognitive effects of arachnoiditis are anxiety and reduced ability to think clearly, with some short-term memory impairment. These are usually in direct proportion to the pain level being experienced. ([\[1\]](#))

They may be compounded by the side effects from various types of medication, especially in combination. In the Global survey, 63% of respondents reported this problem. 55% of the New Zealand survey respondents reported 'poor concentration'.

Depression and Anxiety: Many sufferers are reluctant to admit to depression, as they fear that their more unusual symptoms may be more readily dismissed by doctors as a product of their mental state.

However, it is an inevitable fact that a debilitating illness such as arachnoiditis has a substantial effect on psychological well being.

Anxiety and depression are understandably common problems, but often help is not sought for this aspect of the illness. 62% of the Global survey respondents reported this problem.

[1] Luoto S, Taimela S, Hurri H, Alaranta H *Spine* 1999 Feb 1; 24(3): 255-61 Mechanisms explaining the association between low back trouble and deficits in information processing. A controlled study with follow-up.