Fatigue in people with primary biliary cholangitis (PBC)

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A position paper from the PBC working group found that fatigue is highly prevalent in primary biliary cholangitis, affecting 63.4% of patients in a meta-analysis, substantially impairs quality of life, and currently has no evidence-based pharmacological treatment.

KEY POINTS

- The speaker reported a pooled fatigue prevalence of 63.4% in PBC patients from a meta-analysis, with a mean PBC fatigue domain score of almost 30 indicating moderate fatigue, higher than the general population.
- Fatigue persists over time and is unaffected by disease progression or treatment response to ursodeoxycholic acid, meaning patients can achieve complete biochemical response but remain fatigued.
- The speaker stated that ursodeoxycholic acid has no effect on fatigue, obeticholic acid can worsen it via pruritis, and while Seladelpar and Elafibranor show some positive signals, robust evidence is currently lacking.
- The position paper recommends a three-step clinical algorithm: ask patients about fatigue and contributing factors, measure fatigue using a visual analogue scale and assess for underlying conditions including thyroid dysfunction and coeliac disease, and treat identified underlying conditions while encouraging social support and physical activity.
- Fatigue affects cognition, mental health, relationships, job performance, and physical function, with the strongest correlation found between fatigue and the social domain in a meta-analysis.
- The speaker emphasized the importance of acknowledging fatigue as a common PBC symptom to patients and noted that PBC 40 is the most validated questionnaire and recommended assessment tool in recent consensus guidance.

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