More than 8 million people are living with cancer. People with cancer have identified fatigue as a major symptom that causes them distress as they experience cancer and its treatment sequelae (Dean et al., 1995; Driever & McCorkle, 1984; Kurtz, Kurtz, Given, & Given, 1993; Pickard-Holley, 1991). Literature on cancer-related fatigue (CRF), distress, quality of life (QOL), depression, support groups, and rehabilitation in people with cancer and previous work conducted by the principal investigator were used as the background and rationale for the rehabilitation group intervention (Holley, 2000a). This article reports the preliminary findings of the first 20 participants of an ongoing cancer rehabilitation group intervention project.

Key Points . . .

➤ A growing population of people with cancer are achieving long-term periods of remission, survival, and even cure, so cancer rehabilitation is becoming even more important.

➤ Many people with cancer experience physical, social, psychological, and cognitive distress as a result of their cancer-related fatigue.

➤ Cancer-related fatigue has been documented as a problem up to four years after cancer treatment.

Background and Literature Review

Fatigue is a phenomenon characterized by increased feelings of discomfort and by decreased functional status. Both are related to decreased energy. Factors and dimensions that may be involved are physical, mental, emotional, environmental, physiologic, and pathologic—plus a voluntary component (Pickard-Holley, 1991). Fatigue affects cognitive/attentional functions, alters one’s expectations, has physical sequelae, and adversely affects one’s psychosocial and spiritual self. CRF has been documented as a problem 4–28 years after cancer treatment.