

**Purpose** The instrument is used to quickly assess the severity of fatigue experienced by cancer patients, as well as its impact on their ability to function over the previous 24 h. It can be administered in a clinical setting as part of patient screening processes, and may also be useful for clinical trials. As a short scale that can be rapidly administered and easily understood, the BFI is designed to be well tolerated by patients suffering even the most severe degrees of fatigue.

**Population for Testing** Patients experiencing fatigue as a result of cancer and cancer treatment.

**Administration** A pencil-and-paper scale, patients provide self-report ratings either orally through an interview, or in written form. With only nine items, the instrument was designed to be completed rapidly and relatively painlessly. Approximately 2–3 min should be sufficient for administration.

**Reliability and Validity** Following instrument development, Mendoza and colleagues [1] conducted a study to evaluate the scale's

psychometric properties. To find concurrent validity, they compared BFI to two previously validated fatigue scales: the Fatigue Assessment of Cancer Therapy ( $r=0.88$ ,  $p<.001$ ) and the Profile of Mood States ( $r=0.84$ ,  $p<.001$ ). Internal consistency was measured as Cronbach's  $\alpha=.96$ .

**Obtaining a Copy** A published copy can be found in an article by Mendoza and colleagues [1].

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**Scoring** Respondents rate each item on a 0–10 numeric scale, with 0 meaning “no fatigue” and 10 meaning “fatigue as bad as you can imagine.” Scores are categorized as Mild (1–3), Moderate (4–6), and Severe (7–10). Finally, a global fatigue score can be found by averaging the score obtained on each test item.



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**Reference**

1. Mendoza, T. R., Wang, X. S., Cleeland, C. S., Morrissey, M., Johnson, B. A., Wendt, J. K., & Huber, S. L. (1999). The rapid assessment of fatigue severity in cancer patients. *Cancer*, *85*(5), 1186–1196.
- with cancer, patients with clinical depression, and community-dwelling adults. *Journal of Pain and Symptom Management*, *25*(4), 307–318.
- Dimeo, F., Schwartz, S., Wesel, N., Voigt, A., & Thiel, E. (2008). Effects of an endurance and resistance exercise program on persistent cancer-related fatigue after treatment. *Annals of Oncology*, *19*(8), 1495–1499.

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**Representative Studies Using Scale**

Anderson, K.O., Getto, C. J., Mendoza, C. R., Palmer, S. N., Wang, X. S., Reyes-Gibby, C. C., & Cleeland, C. S. (2003). Fatigue and sleep disturbance in patients