Tower Bridge Hospital London

Tower Bridge Hospital London
97–99 Whitechapel Road, London E1 1DT
020 7916 0029 · Open 7 days, 9am–7pm
towerbridgehospital.co.uk

PATIENT INFORMATION · GENERAL HEALTH

Always tired
what to check before accepting it as normal

Tiredness is one of the commonest reasons people see a doctor and one of the least satisfyingly answered. Often it is sleep, stress or life circumstances — but a meaningful proportion have something specific and treatable, and one set of blood tests finds most of them.

Seek prompt assessment if tiredness comes with

- **unexplained weight loss**, or drenching night sweats
- **a new lump anywhere**, or swollen glands lasting weeks
- **breathlessness at rest, chest pain or fainting**
- **unusual bruising or bleeding**, or looking very pale
- **persistent fever**, or feeling profoundly unwell
- **thoughts of harming yourself**

Fatigue with weight loss, night sweats or lumps needs investigating rather than attributing to lifestyle. If you are struggling with your mood, Samaritans are free on 116 123 at any hour, or call NHS 111 and select the mental health option.

The common medical causes

- **Iron deficiency** — very common, especially in women with heavy periods. Ferritin can be low with a normal haemoglobin.
- **Underactive thyroid** — with cold intolerance, weight gain, dry skin and constipation.
- **Diabetes** — with thirst, frequent urination and blurred vision.
- **Vitamin B12, folate or vitamin D deficiency**.
- **Sleep apnoea** — snoring, witnessed pauses, waking unrefreshed. Frequently missed.
- **Coeliac disease**, which often presents with fatigue and anaemia rather than gut symptoms.
- **Depression and anxiety** — fatigue is often the presenting symptom, particularly in men.
- **Perimenopause**, **chronic kidney or liver disease**, and **long COVID**.
- **Medicines** — beta-blockers, antihistamines, antidepressants, statins and opioids.

The pattern tells you a lot

Tired but sleeping badly points to insomnia, sleep apnoea, restless legs, pain or stress. **Sleeping well but still exhausted** points more towards anaemia, thyroid disease, diabetes or depression. **Fatigue that worsens hours or days after activity** suggests post-exertional malaise, seen in ME/CFS and long COVID, and changes the management entirely. **Worse in the mornings and improving through the day** is typical of depression. It is worth thinking about which of these fits before an appointment.

The blood tests worth doing

- Full blood count, **ferritin**, B12 and folate
- Thyroid function, HbA1c or glucose
- Kidney and liver function, calcium
- Inflammatory markers (CRP, ESR)
- Coeliac screening — while still eating gluten
- Vitamin D
- In some cases: iron studies, cortisol, and tests for infection

That panel identifies the great majority of medical causes. Broader testing without a clinical reason mostly produces borderline results that generate anxiety rather than answers.

Things worth changing regardless

Helps

- A fixed wake time every day, including weekends
- Daylight in the morning, and movement most days
- Reducing alcohol, which wrecks the second half of the night
- Caffeine only before midday
- Treating pain, reflux or urinary symptoms that break sleep

Common traps

- Napping in the afternoon, which worsens night sleep
- Assuming exhaustion is just age or parenthood without testing
- Buying supplements for deficiencies you have not been shown to have
- Energy drinks and sugar, which produce a rebound
- Pushing through when fatigue worsens after exertion

When it has gone on a long time

Fatigue lasting more than six months, with unrefreshing sleep, cognitive difficulty and symptoms worsening after exertion, may be ME/CFS or post-viral fatigue — both recognised conditions with specific management, and both diagnosed only after other causes are excluded. We have separate leaflets on each.

Why come to us. The usual experience is a ten-minute appointment, a limited blood test, and a call saying everything is normal. We offer an unhurried consultation and take the **full fatigue panel — blood count, ferritin, B12, folate, thyroid, HbA1c, kidney, liver, calcium, coeliac and vitamin D — in-house**, with the actual numbers explained to you face to face in the same visit and a written plan. We screen for sleep apnoea and depression rather than treating tiredness as a diagnosis of exclusion.

The full fatigue panel, explained the same visit

Bloods in-house, actual numbers explained. Seven days a week.

Book an appointment

or call 020 7916 0029

Where to get help

Tower Bridge Hospital London
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020 7916 0029

WhatsApp **07903 284 189**
info@mhwclinic.co.uk
Open 7 days, 9am–7pm

In an emergency
Call 999, or go to the Royal London Hospital Emergency Department, Whitechapel Road, London E1 1FR.

When we are closed and it is not an emergency
Call NHS 111 or visit 111.nhs.uk.

Related: **Blood Tests** · **Health Screening & MOT** · **Mental Health** · **Private GP Services** · **All patient leaflets**

Written and reviewed by Dr H Bolat, GP & Clinical Director **Review date: 26 July 2026** **Next review due: July 2028**

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This leaflet is based on current NHS and NICE CKS guidance on tiredness and fatigue in adults. It is general information and does not replace advice from a clinician who has assessed you. If your symptoms change or you are worried, contact us on 020 7916 0029, call NHS 111, or call 999 in an emergency.