

Patients' Experiences With Multiple Myeloma: A Meta-Aggregation of Qualitative Studies

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All of the authors contributed to the study conception and design. Hauksdóttir, Klinke, and Björnsdóttir performed the data analysis. Hauksdóttir carried out the literature searches and drafted the manuscript.

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Problem Identification: To systematically review qualitative evidence regarding patients' experiences of living with multiple myeloma. The main objective was to gain structured understanding of this experience, which is a prerequisite for advancing nursing care and ensuring it is effective.

Literature Search: Qualitative research articles from January 2005 to March 2016 were located in CINAHL®, PubMed, and Scopus. Supplementary resources were found by scrutinizing reference lists and performing citation tracking. All included articles fulfilled predetermined criteria.

Data Evaluation: Three reviewers independently assessed the risk of methodologic bias by using the Joanna Briggs Institute (JBI) Qualitative Assessment and Review Instrument. The JBI methodology of meta-aggregation was used to synthesize findings.

Synthesis: Eleven studies fulfilled the eligibility criteria. From these, 84 findings were extracted. Each finding was assigned a level of credibility: unequivocal, credible, or unsupported. Findings were grouped into 11 subcategories and synthesized further into four main categories: (a) distress, (b) a different body, (c) coping, and (d) contributions of other people.

Conclusions: Patients with myeloma require a different form of follow-up compared to patients with many other cancers because of its chronic nature. Results demonstrate that widespread physical, emotional, and social challenges were experienced by patients throughout their illness trajectories, even in periods of remission. Nursing care should incorporate knowledge of patients' experiences.

Implications for Practice: The results provide directions for nurses to improve supportive strategies in the care of patients with multiple myeloma. The categories provide a useful framework for developing clinical assessment tools.

Patients diagnosed with multiple myeloma need to adjust to many changes throughout their illness trajectories. Although several qualitative studies have shown that the disease has a substantial impact on patients' life situations and possibilities (Dahan & Auerbach, 2006; Kelly & Dowling, 2011; Maher & de Vries, 2011), no study has synthesized these research findings.

Multiple myeloma is a rare cancer in which plasma cells accumulate in the bone marrow and secrete an abnormal immunoglobulin (paraprotein). Although only accounting for 1% of all cancer types, multiple myeloma is the second most common hematologic malignancy (Lobban & Perkins, 2013; National Comprehensive Cancer Network [NCCN], 2016; Stephens, 2009). Myeloma usually affects patients in late adulthood, which is reflected in the average age of 70 years at diagnosis (Genadieva-Stavric, Cavallo, & Palumbo, 2014). Advancements in treatment, with development of novel drugs used in combination with cytostatic therapy, autologous stem cell transplantation, and improved supportive care, has