

## **Understanding meaning in life interventions in patients with advanced disease: A systematic review and realist synthesis**

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### **Abstract**

**Background:** Among patients with advanced disease, meaning in life is thought to enhance well-being, promote coping and improve the tolerance of physical symptoms. It may also act as a buffer against depression and hopelessness. As yet, there has been no synthesis of meaning in life interventions in which contextual factors, procedures and outcomes are described and evaluated.

**Aims:** To identify meaning in life interventions implemented in patients with advanced disease and to describe their context, mechanisms and outcomes.

**Design:** Systematic review according to Preferred Reporting Items for Systematic Reviews and Meta-Analyses guidelines and realist synthesis of meaning in life interventions using criteria from the Realist And Meta-narrative Evidence Syntheses: Evolving Standards project.

**Data sources:** The CINAHL, PsycINFO, PubMed and Web of Science databases were searched.

**Results:** A total of 12 articles were included in the systematic review, corresponding to nine different interventions. Five articles described randomized controlled trials, two were qualitative studies, two were commentaries or reflections, and there was one pre–post evaluation, one exploratory study and one description of a model of care. Analysis of context, mechanisms and outcomes configurations showed that a core component of all the interventions was the interpersonal encounter between patient and therapist, in which sources of meaning were explored and a sense of connectedness was re-established. Meaning in life interventions were associated with clinical benefits on measures of purpose-in-life, quality of life, spiritual well-being, self-efficacy, optimism, distress, hopelessness, anxiety, depression and wish to hasten death.

**Conclusion:** This review provides an explanatory model of the contextual factors and mechanisms that may be involved in promoting meaning in life. These approaches could provide useful tools for relieving existential suffering at the end of life.

### **Strengths:**

- Well-designed systematic review with detailed description of research steps and use of RAMESES (Realist and Meta-narrative evidence Syntheses: Evolving Standards) and PRISMA (Preferred Reporting Items for Systematic Reviews and Meta-Analyses) guidelines
- Broad inclusion criteria, enabling integration and interpretation: both quantitative and qualitative studies, non-experimental articles, both empirical and theoretical studies
- Quality assessment of both quantitative (CONSORT guidelines) and qualitative studies (CASP)
- Three researchers involved in data extraction, with disagreements resolved by discussion
- Detailed explanatory model which succinctly illustrates findings

### **Weaknesses:**

- Limited to studies of patients with advanced cancer
- Lack of clear consensus regarding the definition of meaning in life – no single framework
- Focus on type of outcomes included in studies rather than on what those outcomes actually were
- Exclusion of well-known interventions (CALM, cognitive-existential therapy, supportive-expressive therapy, Dignity Therapy) as they were not designed exclusively to focus on quality of life

### **Relevance to Palliative Care:**

The findings from this review suggest that meaning-in-life interventions can enhance advanced cancer patients' well-being and quality of life. Given the central role of the patient-health care provider relationship in these interventions, specific training for health care professionals is warranted to provide patients with an opportunity to explore their existential concerns in a supportive environment.