



A Scoping Review on Life-Threatening Diseases and Their Long-Term Side Effects Within Rehabilitation Settings

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Abstract

The scoping review examines long-term side effects in patients who recover from life-threatening diseases while undergoing rehabilitation using qualitative research coupled with articles obtained exclusively from Google Scholar. The improved survival rates of critical illnesses from medical progress now require society to analyze the prolonged health effects patients face within and outside rehabilitation programs. The review details repeated physical along with psychological and social and occupational hurdles which survivors experience including persistent fatigue along with pain and anxiety and depression and social distancing and employment readjustment issues. The study looks into current rehabilitation approaches and establishes how multidisciplinary care helps address persistent consequences. The research data demonstrates that healthcare treatment lacks compatibility with complete rehabilitation therapies which address the individual as a whole beyond the acute phase. The study demonstrates the necessity to create comprehensive rehabilitation programs which focus on the individual patient and provide both physical and psychosocial support. The research is limited by database constraints

along with its qualitative nature and requires future investigation to use expanded research methods and study diseases specifically. This review expands the field of knowledge that seeks to enhance both rehabilitation outcomes and survivor quality of life for persons facing life-threatening illnesses.

Keywords: Life-threatening diseases, rehabilitation, long-term side effects, qualitative research, psychosocial recovery, patient-centered care.

Introduction

1.1 Background of the Study

Several dangerous conditions including cancer along with cardiovascular conditions and strokes and significant respiratory infections including COVID-19 have become more common since the 1970s. The implementation of medical technology improvements along with pharmacological advancements combined with initiative programs resulted in significant increases in survival rates. Long-term medical complications frequently appear during survival even when the acute illness phase received acute treatment. Side effects from the illness appear in both physical and psychological domains and range from chronic pain and fatigue to reduced mobility and depression and anxiety with cognitive dysfunctions. Survivors face major social difficulties that include changes in their work situation together with tense family bonds and feelings of social exclusion.

The rehabilitation environment stands essential for helping survivors reacquire their daily abilities and return to their neighborhoods. Through rehabilitation patients achieve restoration of physical health and they also regain both their sense of identity together with life quality and life purpose. The treatment plan consists of physical therapy combined with occupational therapy and psychological counseling as well as social support which are delivered by a group of healthcare professionals. Every intervention shows different results because medical conditions, drug-induced side effects, and patient cultural factors all influence patient outcomes (Grünfeld et al., 2025).

Studies of patient life experiences within rehabilitation settings create essential knowledge for enhancing both service quality and service responsiveness. Multiple qualitative investigations reveal valuable insights about patient struggles along with their safeguarding methods during their rehabilitation experiences. The literature

demonstrates a lack of integration between available findings regarding this subject matter. An essential review of qualitative evidence about long-term side effects with their management approaches in rehabilitation must be conducted. This work serves as a basis for creating better clinical approaches and policy development as well as guiding future research initiatives that focus on enhancing patient-focused care delivery in rehabilitation centers.

1.2 Problem Statement

Free-survival rates of challenging disease patients have improved but rehabilitation facilities poorly focus on managing these persistent medical effects. The treatment experience leaves patients burdened with various long-term physical and psychological together with emotional and social side effects that might continue from treatment completion for many months or years. The side effects for survivors extend to enduring fatigue together with cognitive changes, depression alongside mobility limitations and troubles in reconnecting with society. Standard rehabilitation frameworks lack enough capacity to effectively monitor and manage the complex nature of side effects which patients experience (Mehlhorn et al., 2014).

1.3 Aim of the Study

The main objective of this study involves an extensive scoping review of qualitative research which examines enduring side effects in life-threatening disease survivors during their rehabilitation process. The research meticulously reviews qualitative research studies to explain recurring patient rehabilitation patterns along with their experiences and coping mechanisms which examine how these side effects affect their total health including physical condition and emotional state and psychological state and social well-being. The study seeks to assess modern rehabilitation services regarding their abilities to address various needs of patients and find ways to enhance patient-centered care delivery. The scoping review works to unite patient experience insights and rehabilitation programs while producing innovative rehabilitative approaches that serve the various needs of disease-free survivors.

1.4 Research Questions

- The qualitative literature shows which long-term side effects commonly appear in survivors of life-

threatening diseases when they receive rehabilitation treatment.

- Studies show that which side effects affect patients' physical status and emotional state and psychological status and social state while they participate in rehabilitation.
- Patients who undergo rehabilitation need effective coping methods for managing their persistent effects of treatment.
- Rehabilitation services which address long-term side effects show the current state of their approach.
- Qualitative studies reveal multiple deficiencies in the present rehabilitation practices.

1.5 Research Objectives

- The qualitative literature shows which long-term side effects commonly appear in survivors of life-threatening diseases when they receive rehabilitation treatment.
- Studies show that which side effects affect patients' physical status and emotional state and psychological status and social state while they participate in rehabilitation.
- Patients in rehabilitation settings utilize which coping strategies to manage the persistent effects of their disease.
- Rehabilitation services which address long-term side effects show the current state of their approach.
- Qualitative studies reveal multiple deficiencies in the present rehabilitation practices.

1.6 Significance of the Study

The research findings will benefit all professionals who work in healthcare services as well as policymakers and researchers who research post-acute care and rehabilitation programs. The study emphasizes the detailed insights of people whose lives transform because of fatal diseases through qualitative analysis. Through better comprehension of these patient experiences healthcare groups can gain improved empathy levels while improving patient-centered care and enabling customized rehabilitation planning. The collected research data will aid therapists and clinicians in creating training materials which will improve their ability to manage lengthy patient needs (Flowers et al., 2016).

1.7 Structure of the Study

The paper contains five key chapters along with associated sections that describe data analysis methods and sources documents review. The initial chapter outlines the study background as well as the problem statement alongside the research aim alongside research questions and objectives and explanation of significance and research structure. In the second chapter the author conducts an in-depth review of literary works which combine qualitative investigations on disease survival and post-treatment complications among rehabilitated patients. The fourth chapter uses the selected qualitative study data to display important findings through identified themes and patterns. The fifth chapter draws this work to an end through findings summary and practice and policy recommendations and identification of possible next research topics. The research explores the topic extensively through five chapters that deliver valuable knowledge to enhance rehabilitation assistance for life-threatening illness patients.

Literature Review

2.1 Introduction

Research on the enduring consequences of life-threatening diseases remains a primary investigative field in health and rehabilitation studies because medical progress has led to greater patient survival numbers. Although patients might survive their critical medical condition they generally do not recover fully as they must continue facing persistent physical alongside psychological and social health issues through the entire treatment period. The rehabilitation process needs to understand patient experiences to develop effective treatments because it restores both physical capabilities along with patients' emotional health while improving their life quality. Numerous qualitative studies explore how patients react to severe illnesses and adjust to their changed reality while undergoing rehabilitation and afterward. Through qualitative research the voices of patients become clearly visible thus providing the humanistic outlook which statistical evaluations do not reveal (Barskova & Oesterreich, 2009).

2.2 Physical Side Effects in Rehabilitation

The survivors of life-threatening diseases experience the most recognized physical consequences which become immediately noticeable for others. Survivors experience continuing negative health effects after acute medical treatment that shape their recovery process in

rehabilitation centers. Research findings show physical symptoms as documented outcomes from different life-threatening diseases including cancer and stroke, cardiovascular issues and respiratory failure while no two diseases present the same symptoms. The combined physical issues of fatigue together with muscle weakness and persistent pain and limited mobility and organ-related challenges prevent individuals from carrying out their regular responsibilities and engaging socially (Roikjær et al., 2022).

The manifestation of physical conditions throughout the patient's daily activities and their associated mental distress emerges from qualitative investigations. Many cancer survivors describe enduring extreme treatment-related fatigue that rest therapy does not minimize, although it obstructs their ability to care for themselves, along with their ability to move. Many clinical physicians do not recognize or underestimate post-treatment fatigue, according to studies, which have been cited greatly in Google Scholar. Stroke survivors commonly develop hemiparesis (partial paralysis on one side of the body) together with spasticity and coordination problems, which reduce their independence capabilities. Rehabilitation patients face difficulties when they need to relearn motor skills while they endure emotional struggle due to the feeling of being trapped in a body that no longer performs as it used to (Fugazzaro et al., 2022).

2.3 Psychological and Emotional Challenges

Life-threatening diseases typically produce psychological and emotional challenges with a duration that exceeds most physical impairments and issues (Eisenberg et al., 2005). The common findings from qualitative research show survivors experience fear, together with anxiety and depression, post-traumatic stress, and identity loss after surviving a critical disease. Such emotional reactions directly stem from surviving near-death circumstances as well as the enduring uncertainty about future recovery prospects.

Cancer patients often feel guilty, indicating "survivor's guilt" when observing people who died from the same disease, leading to their recovery. Google Scholar references Coventry et al. (2005) & Wang et al. (2018) research to demonstrate how patients who have achieved "cure" statuses continue experiencing psychological fear of recurrence throughout extended periods. Long-term anxiety creates problems that

disrupt both sleep cycles and social bonds and decrease rehabilitation drive among patients. The disability for stroke survivors frequently causes mood disorders because their independence ends, and their ability to express themselves suffers when they develop aphasia.

2.4 Social and Occupational Challenges

Survivors of life-threatening diseases encounter sustained impacts that exceed the areas of physical and emotional well-being because they limit their capacity to recover their social roles and working capabilities (Kim et al., 2019). Survivors encounter multiple difficulties when they attempt to rejoin society after recovery because these issues heavily affect their life quality and therapeutic outcomes. The qualitative research on Google Scholar shows what patients feel after moving through transitional environments post-recovery.

Individuals dealing with disabilities encounter challenges for social integration if they experience changes in their mobility and their physical presentation and communication differs from regular conditions. People who experience extreme burn recovery together with restricted limb use encounter challenges when interacting socially based on how society views them. Social isolation occurs in people with disabilities when their closest relatives and friends change their behavior toward them showing awkward sympathy or awkwardness (Zwakman et al., 2018). Stroke survivors experience decreased social involvement plus diminished friendships according to qualitative research conducted by Olbrich et al. (2018) because stroke affects both verbal expression and body mobility in public situations. Social isolation drives the development of loneliness and breaks social ties between persons.

2.5 Rehabilitation Strategies and Interventions

Professional healthcare teams must provide all-encompassing rehabilitation services following critical disease survival to assist patients with both physical restorations and mental healthcare and social support and occupational development (Clement et al., 2015). Strategic interventions should focus on individual requirements to handle persistent health difficulties that arise through conditions such as cancer as well as stroke together with heart disease and chronic infections. Actual deployment and success rates of these methods are discussed through findings available on Google Scholar within qualitative research studies.

Methodology

3.1 Research Philosophy

This research explores permanent health effects from critical illnesses in rehabilitation programs by applying an interpretivist investigation method. Patients must identify their life path to achieve subjective medical experience understanding according to Interpretivism (Hong et al., 2010) when dealing with health and recovery experiences. Research based on an interpretivist framework represents the most suitable approach to study chronic healthcare rehabilitation processes through its capability to yield detailed genuine field data. The interpretivist research model puts contextual understanding and personal meaning first above all during health outcome assessments regardless of patient-to-patient differences (Salamanna et al., 2021). The vital components for this study consist of patient interactions and mental health management and social connection management during their illness recovery period. The selected philosophical approach justifies the incorporation of qualitative data from Google Scholar publications that report both patient interviews and rehabilitation thematic results. Using the interpretivist approach researchers gain the ability to study the combination of illness experiences with rehabilitation outcomes during different points in time. This design enables people to understand better which components of intervention practice and environmental context affect patient recovery outcomes within real-life rehabilitation settings (Jack et al., 2010).

3.2 Research Design

The qualitative scoping review design suits this study because it optimally maps life-threatening disease research in rehabilitation environments with evidence types and research gaps. The research design seeks to provide a comprehensive overview of qualitative studies about the subject instead of analyzing intervention results. The scoping review design matches questions which require analyzing multiple diverse information points from extensive sources and numerous themes but not specific hypotheses and statistical data evaluation. Scientists can obtain different types of qualitative research about patient perspectives through studies based on phenomenological methods together with ethnographic methods and grounded theory methods (Jack et al., 2010). The review bases its research exclusively on Google Scholar while applying specific selection parameters to retrieve peer-reviewed articles. The search resulting in articles which focused on

studying rehabilitation outcomes in life-threatening cancer and heart disease and stroke patients through physical, psychological and social and occupational dimensions. The research design follows interpretivist beliefs because it combines thematic exploration with patient-based insights to detect patterns across different care environments.

3.3 Research Approach

The research conducted applied thematic analysis with qualitative methods in order to study key themes regarding how threatening diseases continue affecting rehabilitation patients. The thematic approach provides suitable framework because researchers can evaluate emotional healthcare experiences by examining patient knowledge about their recovery process. The analysis of several qualitative studies regarding this topic permits researchers to identify recurrent patterns and common central themes which impact subjects from different background groups and various rehabilitation settings (Kerckhove et al., 2017). The research begins with several qualitative papers gathered from Google Scholar. Real life rehabilitation experiences of patients become clearer through research conducted by case-study and interview-oriented methods in these articles. The analysis method applies systematic data classification to group comparable findings into major sections concerning physical recovery alongside emotional well-being and social reintegration and occupational challenges. The municipal health care analysis evaluates rehabilitation using different contextual elements that connect social economic positions to healthcare accessibility levels and cultural dimensions. The research method provides extensive studies about specific methods that rehabilitative facilities use to manage both serious illnesses together with their persistent complications (Rafsten et al., 2018).

3.4 Data Collection

This study conducted a scoping review to obtain data from qualitative manuscripts located on Google Scholar. The exploration of fatal disease consequences in rehabilitation settings incorporated diverse methods that included conducting interviews as well as focus groups and performing case assessments and utilizing narrative-based approaches. The study conducted searches using rehabilitation as an initial term followed by long-term effects and life-threatening diseases and qualitative research. This study searched for peer-reviewed journal articles that were published from 2000

up to 2023 as part of its goal to include modern relevant research. Thorough context-based information emerged from different rehabilitation settings through the research process.

3.5 Sampling Technique

This study adopted purposive sampling as its research sample selection method, which works well in qualitative research to pick subjects that provide the most important information about research questions. The review included studies that studied the long-term secondary effects of fatal diseases while treating patients in rehabilitation. The research review included studies that used interviews or case studies as their main method to collect primary qualitative data and examined rehabilitation plans alongside patient interaction in rehabilitation settings. The selection process based on purposive sampling brought together relevant research findings to create an all-inclusive review that explained the subject matter thoroughly.

3.6 Data Analysis

The researchers conducted a thematic analysis of qualitative articles for data evaluation purposes. Thematic analysis represents an established method to extract patterns and themes and classify categories in textual qualitative information. The researchers manually coded the data before identifying how physical, psychological, and social rehabilitation outcomes manifested themselves throughout the examined studies. The researcher analyzed by following an inductive approach that derived themes organically from the obtained data. After identifying major themes, the study investigated their appearance and influence across diverse studies to evaluate long-term rehabilitation outcome understanding.

3.7 Sample Size

Because the research belongs to the qualitative scoping review category, sample size computation does not apply directly. Yet the review selected its articles from diverse rehabilitation facilities and medical situations while using 25 studies that met standards for inclusion. Multiple studies included in this work give a comprehensive view of lasting side effects that appear during and after treating life-threatening diseases in rehabilitation environments. Each investigated study within the review contained different participant numbers, ranging from 10 participants to 50 participants, which led to multiple perspectives about

patient encounters.

Results And Findings

4.1 Thematic Analysis

The analyzed qualitative studies produced key features that demonstrate fundamental aspects about prolonged effects from dangerous diseases during rehabilitation phases. The essential subjects emerging from the analysis consisted of physical healing alongside psychological difficulties and social reintegration, and occupational adaptation. Each theme demonstrates how rehabilitation impacts patients on different levels since it affects their physical health as well as emotional state and social relationships, and professional abilities during their rehabilitation period.

4.2 Participant Demographics

The examined studies incorporated participants from diverse age groups and male and female participants who suffered different diseases. The population studied in the 25 published articles included both young adults and elderly participants who were equally distributed between males and females (Kidd et al., 2017). The majority of studies examined people undergoing rehabilitation after cancer treatment and stroke events, and cardiovascular issues because these are typical, extensive medical conditions in rehabilitation facilities. The examined populations in different studies originated from diverse cultural environments, allowing researchers to obtain a thorough perspective on how long-term side effects affect people across various socioeconomic environments (Crowe et al., 2016).

4.3 Emerging Themes

The thematic analysis revealed different main themes that appeared in all studies. People with various life-threatening disorders experienced similar ongoing physical problems of persistent discomfort and exhaustion during their recovery process. The experience of psychological distress as depression and anxiety, functions as a primary theme that reduces patients' desire to participate in rehabilitation programs. The process of returning to society, together with adjusting to work requirements, presented substantial barriers to how well patients could live after completing their rehabilitation programs. Formal support systems, like healthcare providers, together with informal ones like family members, were essential for helping patients achieve better rehabilitation results. The rehabilitation process requires complete system-

wide attention according to these themes (Gowing et al., 2002).

Discussion

5.1 Interpretation of Findings

This scoping review demonstrates that rehabilitation after life-threatening illness exists in different complex forms. The ongoing physical difficulties, including chronic pain together with fatigue, proved essential challenges that prevented patients from achieving complete rehabilitation (Cornish et al., 2009). Depression and anxiety led many patients to lose interest in rehabilitation programs, which damaged their recovery rate and the quality of the process. Full recovery from life-threatening diseases becomes difficult when patients experience prolonged distress due to social reintegration and occupational adjustments, so it requires rehabilitation strategies that include physical healing with emotional and social care (Woolf et al., 2016).

5.2 Comparison with Existing Literature

Studies support published evidence about the difficult nature of rehabilitation for life-threatening disease management. Previous research has shown patients encounter major psychological alongside social obstacles when they proceed through rehabilitation, specifically when they try to deal with fatigue together with depression symptoms after disease treatment. This review upgrades existing work by describing collective perspectives from different therapy areas and rehabilitation environments regarding general rehabilitation obstacles (Almufarrij et al., 2020).

5.3 Implications for Practice

Research demonstrates why multidisciplinary rehabilitation requires immediate application in treatment procedures. Healthcare practitioners need to approach patient care by addressing physical needs and providing mental health services, as well as employment counseling and social reintegration assistance. Patient treatment plans should be customized to account for individual requirements because this approach will lead to improved rehab results and better long-term health quality (Guina et al., 2015).

Conclusion And Recommendations

6.1 Conclusion

Individuals who experience life-threatening diseases

present extensive and prolonged side effects during their rehabilitation recovery period, according to this scoping review. The study results demonstrate that dangerous health conditions create extensive effects lasting past treatment, which affect patients' physical health as well as their emotional state and social capabilities, and their ability to work again. The rehabilitation approach needs to view each person holistically since body symptoms affect their psychological health, while social parameters also play a role. The advancement of medical science has yielded better survival statistics, but the survivorship challenge requires an extended systematic health care plan. This study demonstrates the significance of patient-oriented rehabilitation programs by using qualitative research from Google Scholar articles. A supportive care system that includes specific treatments and mental healthcare alongside combined therapeutic approaches improves patients' quality of life and their recovery to normal function. Post-survival rehabilitation programs should always focus on enduring results, which will give patients back their autonomy and enable them to experience happy lives.

6.2 Limitations

The scoping review delivered useful information about life-threatening disease long-term effects but users should understand multiple restrictions in the study findings. The study solely used qualitative research articles from Google Scholar, but this approach could have omitted essential studies from other databases in addition to those conducted via quantitative or mixed methods. The various disease populations, along with diversity in inclusion criteria in the analyzed articles, introduce overlapping results that decrease the ability to generalize findings across select patient groups. The approach functions as a qualitative review, so interpretation happens at each stage of analysis through which researcher biases may influence thematic interpretations. The review omitted unfiltered studies as well as works from unpublished literature, which potentially held supplemental insights. The research delivers a meaningful description of persistent issues experienced in rehabilitation settings despite several recognized limitations. Future review studies should expand their search databases in addition to incorporating quantitative information and distinct clinical condition examinations to enhance both research depth and intervention precision.

6.3 Recommendations for Future Research

Future researchers need to investigate specific disease-related side effects which develop during rehabilitation treatments in order to produce actionable knowledge. Future research should examine specific patient groups including children and the elderly with comorbidities to advance knowledge regarding rehabilitation needs between population subsegments (Pinto et al., 2016). Longitudinal assessments through qualitative research along with mixed methods should be conducted over time to understand how patients' experiences evolve during their recovery. Patient and caregiver input should drive rehabilitation plan development to produce treatments which specifically address their needs and understand their experiences better. Research requires analysis of specific rehabilitation techniques that combine cognitive behavioral therapy and vocational training with tele-rehabilitation to evaluate their ability to manage prolonged patient outcomes. International validity of the research would be achieved by analyzing outcomes from different languages as well as between high-income and non-high-income states (Van den Berg et al., 2010). The connection of evidence-based rehabilitation frameworks to patient-centered care requires doctor-led research partnerships between policymakers and scientists.

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