Survivorship after autologous hematopoietic cell transplantation for lymphoma and multiple myeloma: late effects and quality of life

Georges GE, Bar M, Onstad L, Yi JC, Shadman M, Flowers ME, Carpenter PA, Stewart S, Lee SJ, Holmberg LA.

Biol Blood Marrow Transplant 2020; 26: 407-412.

(Survey administered July 2015 – June 2016)

This study investigated the long-term effects and quality of life of patients who had received autologous hematopoietic cell transplantation (AHCT) for either lymphoma or multiple myeloma (MM). The study surveyed 665 patients who were at least 5 years post-AHCT, with 389 respondents. Commonly reported (>10%) long-term medical conditions of patients included sexual dysfunction, shingles, cataracts, osteoporosis, joint replacement, and skin cancer. The most frequently reported conditions for each disease included post-traumatic stress symptoms in lymphoma survivors, and osteoporosis and spontaneous bone fracture in MM survivors. 32% of patients with MM reported taking pain medications. This is not surprising, because MM is associated with multiple lytic bone lesions. The study found that worse physical functioning was associated with older age, a more recent transplant, comorbidities, relapse, and treatment for depression and pain. Worse mental functioning was linked to younger age and taking medication for anxiety, depression, or pain.

Overall, patients that were treated for lymphoma reported better health and quality of life than those treated for MM. MM patients reported using medications more frequently for infection prevention, hypertension, osteoporosis, and pain compared to lymphoma patients. Lymphoma patients were more likely to take thyroid replacement therapy. The study identified areas, such as sexual dysfunction and medication use, where interventions could improve survivors' well-being.