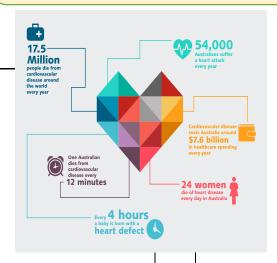
# Living with a mended heart – an integrative literature review of the lived experiences of women following first acute coronary syndrome

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## Introduction

There is a lack of research on the women's lived experiences in the recovery process following first acute coronary syndrome (ACS). A woman's experiences following first ACS with the health care system could impact on her recovery and quality of life (QOL).

### Aim

To explore the lived experience of women following first ACS

# <u>Table 1: Medical Subject Headings and keywords</u>

('myocardial infarction' OR 'heart attack' OR 'acute coronary syndrome' OR 'acute myocardial infarction') AND ('live experience' OR 'life experience') AND (women\* OR woman\*) AND (post discharge OR recovery OR outcome) AND ('psychological' OR 'psychosocial' OR 'physical' OR 'quality of life' OR ' well-being)

# **Methods**

**Review method**: Whittemore and Knafl's integrative review method

**Search terms**: Medical Subject Headings and keywords using Boolean "OR" and "AND" (Table 1)

**Data sources**: Studies in MEDLINE, PubMed, EMBASE, CINAHL and Scopus

# Inclusion and exclusion criteria:

We included English language peer reviewed studies focusing on women's experiences following ACS published between 2008 – 2018 and excluded grey literature, case reports, protocols, reviews, and abstracts

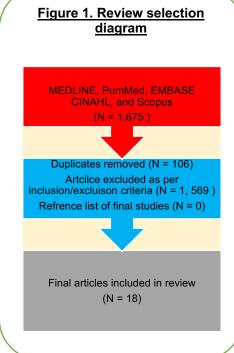
**Quality appraisal**: Joanna Briggs Institute quality assessment tool

**Data extraction**: Data reporting table included author's name, publication date, place of study, aims, number of participants, age, methods, findings, recommendations, and limitations.

**Data analysis:** We used Braun and Clarke thematic analysis

# Conflict of interest

Authors declare no conflict of interest



#### Results

We found 18 eligible studies (Figure 1). Key themes identified were:

- Knowledge of the body physical symptoms,
- Managing with a mended heart complications during and after first ACS event,
- Temporary becomes permanent selfdiscovery and impact of ACS on psychological well-being,
- Seeking other options disruptions and dissatisfaction in relationships,
- Deep connection with oneself and others – the good, the bad and the ugly.

Significant impacts on women's lives include:

- physical limitations
- fear and uncertainties about the future.
- sexual dissatisfaction.
- social isolation.

Comparison between men and women include:

 women had higher mortality rates, stroke and hospital readmissions

#### Conclusion

There are gaps in the current knowledge on the lived experiences in the physical, psychological, sexual and social wellbeing of women following their first ACS. Further research addressing these gaps will improve the care women receive following first ACS and enhance their recovery and QOL.

#### Impact

Women's lived experiences following first ACS in physical, psychological, sexual, and social state are under researched. We need further research to address the gaps and promote their wellbeing and QOL following first ACS.



Reference Victor Chang Cardiac Research Institute