THE IMPACT OF FORCED INTERNAL DISPLACEMENT DUE TO THE FULL-SCALE RUSSIAN INVASION OF UKRAINE ON SURVIVAL AND QUALITY OF LIFE FOR MULTIPLE MYELOMA PATIENTS: A REAL-WORLD OBSERVATIONAL STUDY

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Introduction

The beginning of a full-scale invasion and active hostilities in Ukraine after February 24, 2022, caused mass displacement – citizens left their homes in search of safety and protection.

Currently, the number of officially registered internally displaced persons in Ukraine reaches 4.9 million people. This fact and newly diagnosed multiple myeloma may significantly influence a patient's quality of life and survival.

Aim

The primary endpoint was to assess the overall survival (OS) of multiple myeloma patients who were internally displaced from the territories of active hostilities to Poltava region.

The second endpoint was to assess their quality of life.

Materials and methods

Our study included 84 primary patients with multiple myeloma during 2022–2023 after the full-scale Russian invasion of Ukraine.

Median age, 64.6±7.57 years; male, 46 (54.8%); female, 38 (45.2%); and ECOG 0-II, types of multiple myeloma are presented in Fig.1.

The patients were divided into two groups:

group I (n=60) – native citizens of the Poltava region,

group II (n=24) – internally displaced persons from the regions of active hostilities:

- Kharkiv, n=11;
- Donetsk, n=8;
- Sumy, n=3;
- Luhansk, n=2.

The 2-year overall survival (OS) was assessed and quality of life was evaluated by EQ-5D-5L questionnaire with descriptive data and visual analog scoring (EQ-VAS).

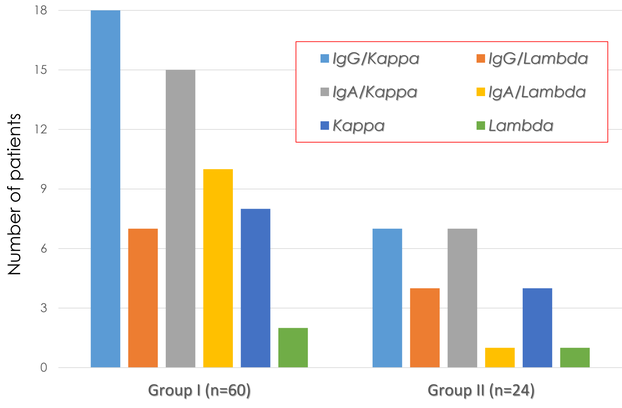


Fig.1. Multiple myeloma distribution by types in the study groups.

Results and discussion

The 2-year OS was 56% in citizens native to the Poltava Region (Group I) and 22% in internally displaced persons with multiple myeloma (Group II; hazard ratio [HR], 2.338; 95% CI, 1.17–4.68; P=0.0162) (Fig. 2).

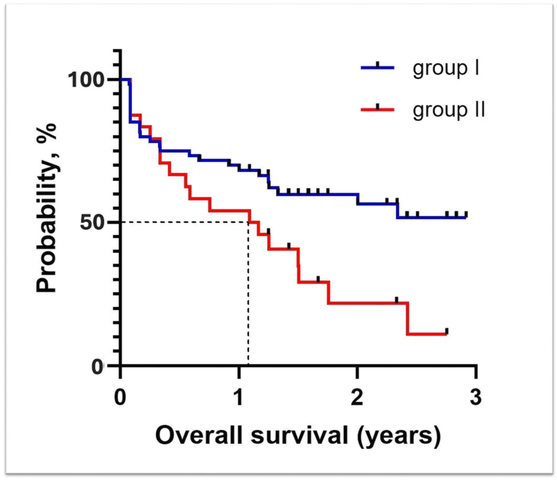


Fig.2. The 2-year overall survival in the study groups.

There was no significant difference between patients in the two groups in impairments of mobility, self-care, and pain/discomfort data.

The usual activities such as work, study, housework, family or leisure activities, were significantly impaired in Group II pts compared to Group I (X^2[1, N=84]=10.14, P<0.04).

Additionally, the results showed an increased level of anxiety/depression in patients of Group II who had moved to the Poltava region due to active hostilities (X^2[1, N=84]=24.9, P=0.000053).

EQ-VAS data for Group II patients was significantly lower compared with Group I reported parameters (57.02±9.88 vs 69.92±7.86; P=0.00001) (Fig.3).

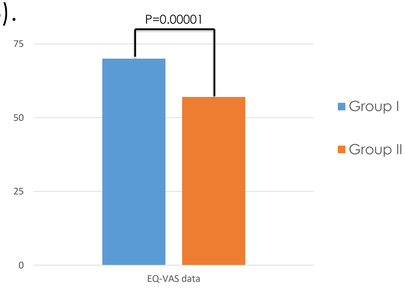


Fig.3. EQ-VAS data of the EQ-5D-5L questionnaire.

Conclusions

The results of our study confirm that internal displacement from regions of active hostilities have a significant negative impact on OS of multiple myeloma patients.

Moreover, these patients have significantly impaired quality of life, which manifests with difficulties in usual activities and increased anxiety/depression levels.

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