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## Corrigendum

Corrigendum to 'Patient-related characteristics considered to affect patient involvement in shared decision making about treatment: A scoping review of the qualitative literature' Patient Education and Counseling 111 (2023) 107677

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The authors regret to inform readers that there were errors in the numbering of some citations in Table 1 and in one sentence in section 3.3.2. The corrections (indicated in bold) are:

Table 1, Alameddine, 2020, Dubai [64]; Baig, 2020, Pakistan [65]; Becher, 2021, Germany [40]; Carrotte, 2021, Australia [38]; Finlay, 2020, Canada [81]; Gibson, 2020, England [41]; Haugom, 2020, Norway [80]; House, 2021, USA [79]; Huang, 2021, China [45]; Jiang, 2021, China [54]; Keij, 2021, the Netherlands [9]; Moleman, 2021, the Netherlands [67]; Pan, 2022, China [26]; Rodenburg-

Vandenbussche, 2020, the Netherlands [36], Sumpton, 2021, Australia [35], Van Beek-Peeters, 2021, the Netherlands [21]; Vedasto, 2021, Tanzania [25]; Whitney, 2021, USA [77]; Windon, 2021, USA [34]; Wubben, 2021, the Netherlands [66]. The corrected table can be found below.

Self-efficacy and self-confidence in being involved in the SDM process were reported to benefit patient involvement [20, 35, 40, 54], and such self-efficacy may grow over time [35].

The authors would like to apologise for any inconvenience caused.

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**Table 1** Study characteristics.

		Patients and/or sig	gnificant others	Professionals			
First author, year of publication, country of origin	Data collection method	Diagnosis	N, gender, age (years)	Profession	N, gender, age (years)	Decision specification	Data analysis
Alameddine, 2020, Dubai [64]	Survey including open-ended questions	-	-	Physicians with various specialties	N = 50 Female: 50% Age: < 50: n = 28 ≥ 50: n = 22	Various	Inductive thematic analysis
Alsulamy 2022, Saudi Arabia [23]	Semi-structured interviews	-	-	Primary healthcare professionals (physicians, managers, medical directors and training directors)	N = 16 Female: 56% Age: range, 29- 52	Various	Thematic analysis themes were mapped to the COM-B model
Avis, 1994, UK [42]	Unstructured, open interviews, hierarchical focusing.	Patients with a hernia	N = 10 Female: 10% Age: range, 15- 70	-	-	Surgery	Inductive analysis
Baig, 2020, Pakistan [65]	In-depth interviews	-	-	Endocrinologists	N = 11 Female: not reported Age: not reported	Diabetes management	Thematic analysis using grounded theory
Beaver, 2005, UK [48]	Semi-structured interviews	Patients with colorectal cancer	N = 41 Female: 54% Age: M = 62; range, 37-84	-	-	Surgery, radiotherapy, chemotherapy	Open coding
Becher, 2021, Germany [40]	Semi-structured interviews with patients and corresponding clinicians	Patients with schizophrenia or schizoaffective disorder	N = 18 Female: 61% Age: range, 19-65	-	N = 14 Female: 79% Age: 25-30: n = 4 30-35: n = 5 35-40: n = 2 40-45: n = 2 45-50: n = 1	Medication, staying at or leaving psychiatric ward, treatment after stay at psychiatric ward, other	Content analysis
Belcher, 2006, USA [49]	Semi-structured interviews	Older patients taking medication	N = 51 Female: 63% Age: M = 77, SD = 6.6; range, 65-89	-	-	Medication	Grounded theory approach
Blumenthal-Barby, 2015, USA [72]	Structured interviews and surveys	Left ventricular assist device (LVAD) candidates/ patients and caregivers	Total: N = 45 Female: 36% Age: M = 58; range, 33-74 LVAD candidates: n = 15 Female: 13% Age: M = 54; range, 35-74 LVAD patients: n = 15 Female: 27% Age: M = 60; range, 33-74 LVAD caregivers: n = 15 Female: 67% Age: M = 59; range, 36-74			Implant of left ventricular assist device	Grounded theory approach
Caress, 2002, UK [68]	Focused conversation style interviews	Patients with asthma	N = 32 Female: 47% Age: M = 47; range, 18-84	-	-	Medication	Thematic analysis followed by a member's check among $n=10$ participants
Carrotte, 2021, Australia [38]	Interviews	Patients with schizophrenia	N = 12 Female: 67% Age: M = 55.0; range, 27-75	-	-	Treatment and support services most frequently accessed were medication, psychiatrist, and/	Reflexive approact to thematic analys (both deductive ar inductive)

Table 1 (continued)

		Patients and/or sig	nificant others	Professionals			
First author, year of publication, country of origin	Data collection method	Diagnosis	N, gender, age (years)	Profession	N, gender, age (years)	Decision specification	Data analysis
						or general	
Chen, 2021, USA	Semi-structured	Patients with	N = 17			practitioner Palliative	Thematic analysis
[55]	interviews and	cancer with lung	Female: 35%			radiotherapy	Thematic analysis
[55]	questionnaires	or bone	Age: $M = 64$ ;			таптинер,	
		metastases	range, 27-75				
Chong, 2013,	Semi-structured	-	-	Healthcare	N = 31	Mental healthcare,	Thematic analysis
Australia [58]	interviews			providers with experience in	Female: 55% Age: not	specific focus on medication for	
				mental healthcare	reported	depression	
Delman, 2015 USA	Semi-structured	Patients with	N=24	-	-	Psychiatric	Inductive analytic
[90]	interviews	serious mental	Female: 67%			medication	approach
		illness	Age: $M = 24$ ;				
Eliacin, 2014, USA	Semi-structured	Patients with	range, 19–30 N = 54	_		Mental health	Inductive themat
[78]	interviews	psychiatric	Female: 9%	-	-	treatment	approach
		conditions	Age:				
		(mood disorders,	20-40: n = 3				
		posttraumatic	41-70: $n = 51$				
		stress disorder, and					
		schizophrenia)					
		in veterans					
Ernst, 2013, Germany	Semi-structured	Haemato-	N = 11	-	-	Haemato-oncology	Content analysis
[50]	interviews	oncological	Female: 36%			treatment,	
		patients	Age: range, 39- 70			including antibody treatment and/or	
			70			chemotherapy	
Finlay, 2020, Canada	Semi-structured	Patients with	N=20	Cardiologists	N=10	Coronary	Inductive content
[81]	interviews	chronic kidney	Female: 25%		Female: 50%	procedures	analysis
		disease and heart	Age: $M = 65.2$ ,		Age: not		
Fisher, 2017,	Semi-structured	disease Patients with	SD = 11.4 Total	_	reported -	Non-medication	Thematic analysis
Australia [86]	interviews	bipolar II	N = 41			related treatment	framework metho
		disorder and	Patients:				
		family members	N = 28				
			Female: $68\%$ Age: $M = 41.6$ ,				
			Age. $M = 41.0$ , SD = 13.1				
			Family				
			members:				
			n = 13				
			Female: 77% Age: M = 48.38,				
			SD = 13.5				
Fraenkel, 2007, USA	Semi-structured	Patients with	N=26	-	-	Various treatment	Inductive analysis
[32]	interviews	osteoporosis	Female: 96%			decisions, not	
			Age: $M = 61$ ;			limited to	
			range, 49-76			osteoporosis treatment	
Frerichs, 2016,	Semi-structured	-	-	Professionals	N = 43	Different types of	Content analysis
0 [(0]	focus groups and			involved in	Female: 47%	cancer treatment	
Germany [62]				diagnosis and	Age: $M = 45.81$ ,		
Germany [62]	interviews				OD 11 01		
•	interviews	Drimary care	N — 48	treatment of cancer	SD = 11.31	Various	Constant
Frosch, 2012, USA		Primary care	N = 48 Female: 63%	treatment of cancer	SD = 11.31	Various	Constant comparative
•	interviews	Primary care patients	N = 48 Female: 63% Age: M = 64.7,	treatment of cancer -	SD = 11.31 -	Various	Constant comparative method
Frosch, 2012, USA [53]	interviews Focus groups	•	Female: 63%	-	-		comparative method
Frosch, 2012, USA [53] Gagliardi, 2017,	interviews Focus groups Semi-structured	•	Female: $63\%$ Age: $M = 64.7$ ,	- Physicians	N = 22	Higher-risk	comparative method Thematic analysis
Frosch, 2012, USA [53]	interviews Focus groups	•	Female: $63\%$ Age: $M = 64.7$ ,	Physicians involved in	. $\label{eq:N=22} N=22$ Gender and age	Higher-risk implantable	comparative method Thematic analysis using theoretical
Frosch, 2012, USA [53] Gagliardi, 2017,	interviews Focus groups Semi-structured	•	Female: $63\%$ Age: $M = 64.7$ ,	- Physicians	N = 22	Higher-risk	comparative method Thematic analysis
Frosch, 2012, USA [53] Gagliardi, 2017,	interviews Focus groups Semi-structured	•	Female: $63\%$ Age: $M = 64.7$ ,	Physicians involved in decisions about higher risk implantable	. $\label{eq:N=22} N=22$ Gender and age	Higher-risk implantable	comparative method Thematic analysis using theoretical
Frosch, 2012, USA [53] Gagliardi, 2017, Canada [74]	Focus groups  Semi-structured interviews	patients -	Female: 63% Age: M = 64.7, SD = 12.1	Physicians involved in decisions about higher risk	. $\label{eq:N=22} N=22$ Gender and age	Higher-risk implantable medical devices	comparative method Thematic analysic using theoretical frameworks
Frosch, 2012, USA [53] Gagliardi, 2017, Canada [74] Gibson, 2020,	Focus groups  Semi-structured interviews  Semi-structured	patients - Patients with	Female: 63% $Age: M = 64.7, \\ SD = 12.1$ $\cdot$ $N = 14$	Physicians involved in decisions about higher risk implantable	. $\label{eq:N=22} N=22$ Gender and age	Higher-risk implantable medical devices Psychotherapy	comparative method  Thematic analysi using theoretical frameworks  Grounded theory
Frosch, 2012, USA [53] Gagliardi, 2017,	Focus groups  Semi-structured interviews	patients -	Female: 63% Age: $M=64.7$ , $SD=12.1$ . $N=14$ Female: 71%	Physicians involved in decisions about higher risk implantable	. $\label{eq:N=22} N=22$ Gender and age	Higher-risk implantable medical devices	comparative method  Thematic analysis using theoretical frameworks  Grounded theory approach adapted
Frosch, 2012, USA [53] Gagliardi, 2017, Canada [74] Gibson, 2020,	Focus groups  Semi-structured interviews  Semi-structured	patients - Patients with	Female: 63% $Age: M = 64.7, \\ SD = 12.1$ $\cdot$ $N = 14$	Physicians involved in decisions about higher risk implantable	. $\label{eq:N=22} N=22$ Gender and age	Higher-risk implantable medical devices Psychotherapy	comparative method  Thematic analysi using theoretical frameworks  Grounded theory approach adapted
Frosch, 2012, USA [53]  Gagliardi, 2017, Canada [74]  Gibson, 2020, England [41]  Grim, 2016, Sweden	Focus groups  Semi-structured interviews  Semi-structured	patients - Patients with	Female: 63% Age: M = 64.7, SD = 12.1  N = 14 Female: 71% Age: M = 21.6; range, 18-34 N = 22	Physicians involved in decisions about higher risk implantable	. $\label{eq:N=22} N=22$ Gender and age	Higher-risk implantable medical devices Psychotherapy	comparative method  Thematic analysis using theoretical frameworks  Grounded theory approach adapted for psychotherapy research  Directed content
Frosch, 2012, USA [53]  Gagliardi, 2017, Canada [74]  Gibson, 2020, England [41]	interviews Focus groups Semi-structured interviews Semi-structured interviews	patients  Patients with depression	Female: 63% Age: M = 64.7, SD = 12.1 - N = 14 Female: 71% Age: M = 21.6; range, 18-34	Physicians involved in decisions about higher risk implantable	. $\label{eq:N=22} N=22$ Gender and age	Higher-risk implantable medical devices Psychotherapy treatment	comparative method  Thematic analysi using theoretical frameworks  Grounded theory approach adapted for psychotherap research

Table 1 (continued)

		Patients and/or sig	nificant others	Professionals			
First author, year of publication, country of origin	Data collection method	Diagnosis	N, gender, age (years)	Profession	N, gender, age (years)	Decision specification	Data analysis
Hamann, 2016, Germany [60]	Focus groups	Patients with depression or schizophrenia	N = 16 Female: 50% Age: M = 41.8, SD = 14.6	Psychiatrists and psychologists	N = 17 Female: 35% female Age: M = 44.9, SD = 7.7	Clinical mental health treatment in acute settings	Content analysis
Haugom, 2020, Norway [80]	Focus groups	-	-	Mental healthcare professionals	N = 18 Female: 61% Age: not reported	Treatment for psychotic disorders, including antipsychotic medications	Qualitative conter analysis
Heggland, 2013, Norway [71]	Semi-structured interviews	Patients needing surgery	N = 7 Female: 56% Age: range, 49- 65	Surgical ward physicians and nurses	Total N = 11 Female: 73% Age: range, 26- 62 Nurses: n = 7 Female: 100% Physicians: n = 4	Surgery	Content analysis
Hirpara, 2016, Canada [29]	Semi-structured telephone interviews	Patients with suspected or confirmed	N = 20 Female: 45% Age: M = 71.5;	-	Female: 25% -	Surgery	Descriptive thematic analysis
Hofstede, 2013, The Netherlands [63]	Semi-structured interviews and focus groups	colorectal cancer Patients with sciatica	range 42-88 Total  N = 22 Female: 68% Surgery: n = 8 Female: 75% Age: M = 51; range, 19-81 Conservative therapy: n = 8 Female: 62% Age: M = 56; range, 19-75 Still had to decide: n = 6 Female: 67% Age: M = 51; range, 33-75	Physical therapists, general practitioners, neurologists, neurosurgeons, orthopedic surgeons	Total N = 40 Gender not reported Age: range, 30-67 Physical therapists (n = 8): Age: M = 47; range, 30-58 General practitioners (n = 8): Age: M = 49; range, 32-63 Neurologists (n = 8): Age: M = 49; range, 37-62 Neurosurgeons (n = 8): Age: M = 50; range, 38-62 Orthopedic surgeons (n = 8): Age: M = 52; range, 40-67	Surgery or conservative treatment	Directed content analysis
House, 2021, USA [79]	Semi-structured interviews	Patients with chronic kidney disease	N = 29 Female: 34% Age: M = 67, SD = 6	Clinicians in nephrology, oncology, social work, vascular surgery and primary care	N = 10 Female: 70% Age: M = 52 SD = 12	Treatment of advanced chronic kidney disease (including dialysis, kidney transplant, conservative treatment)	Inductive thematic
Huang, 2021, China [45]	Interviews and focus groups	-	-	Mental health professionals	N = 33 Female: 61% Age: range, 22- 54	Schizophrenia treatment	Inductive themati approach
Jiang, 2021, China [54]	Semi-structured interviews	Patients with chronic obstructive pulmonary disease	N = 22 Female: 23% Age: 60-65: n = 6 66-70: n = 6 71-75: n = 7 76-80: n = 3	Respiratory doctors, rehabilitation practitioners, nurses	N = 29 Age: not reported Respiratory doctors and rehabilitation practitioners: n = 19 Female: 47%	Pulmonary rehabilitation	Thematic analysis

Table 1 (continued)

		Patients and/or sig	gnificant others	Professionals			
First author, year of publication, country of origin	Data collection method	Diagnosis	N, gender, age (years)	Profession	N, gender, age (years)	Decision specification	Data analysis
Kaminskiy, 2021, UK [47]	Semi-structured interviews	Patients with serious mental illness	N = 15 Female: 60% Age: M = 36, SD = 10.18, range	Psychiatrists and nurses	Nurses: n = 10 Female: 100% N = 15 Female: 73% Age:	Psychiatric medication management	Thematic analysis, collaborative data analysis
Keij, 2021, the Netherlands [9]	Semi-structured interviews	Patients with diabetes, cancer, or cardiovascular disease	22-54 N = 15 Female: 73% Age: M = 69; range, 38-92	Physicians and nurses (oncology, endocrinology, geriatrics, cardiology), general practitioners, researchers	N = 16 Female: 69% Physicians: n = 6 Female: 50% Age: Md = 42; range, 37-53 Nurses: n = 3 Female: 67% Age: Md = 55; range, 44-61 General practitioners: n = 2 Female: 50% Age: M = 48.5; range, 44-53 Researchers: n = 5 Female: 100% Age: not reported	Treatment for diabetes, cancer or cardiovascular disease	Inductive analysis
Kwok, 2017, Australia [30]	Focus groups	Patients with breast cancer	N = 23 Female: 100% Age: M = 56; range, 35-68		-	Modified radical mastectomy (with or without breast construction), breast-conserving surgery	Content analysis
Lee, 2020, USA [22]	Focus groups	Various	N = 26 Female: 65% Age: M = 55, SD = 12	-	-	Any treatment decision	Inductive content analysis
Lin, 2020, Taiwan [46]	Semi-structured interviews	Patients with mental illness	N = 20 Female: 35% Age: M = 38	-		Mental healthcare, mainly schizophrenia treatment	Thematic analysis
Lin, 2022, Taiwan [83]	Semi-structured interviews		-	Healthcare professionals in secondary mental healthcare (psychiatrists, occupational therapists, social worker, nurses)	N = 24 Female: 46% Age: range, 28- 54	Mental healthcare	Thematic analysis
Lown, 2009, USA [39]	Collaborative work group sessions	Patients with various chronic conditions	N = 44 Female: 68% Age: range 34- 79 (patients and professionals combined)	Primary care physicians	N = 41 Female: 49% Age: range 34- 79 (patients and professionals combined)	Treatment for chronic conditions	Constant comparative method and grounded theory techniques
Mahmoodi, 2019, UK [89]	Semi-structured interviews	Patients with breast cancer	N = 20 Female: 100% Age: M = 57; range, 40-73	-	-	Adjuvant treatment for breast cancer	Thematic analysis
Mahone, 2011, USA [44]	Focus groups	Patients with serious mental illness and family members	Total N = 28 Female: 66% (patients, family members and professionals combined) Age: not reported Patients: N = 24	Professionals working at mental health clinic	N = 16 Female: 66% (patients, family members and professionals combined) Age: not reported	Mental health treatment (including medication)	Content analysis

Table 1 (continued)

		Patients and/or sign	gnificant others	Professionals			
First author, year of publication, country of origin	Data collection method	Diagnosis	N, gender, age (years)	Profession	N, gender, age (years)	Decision specification	Data analysis
Moleman, 2021, The Netherlands [67]	Semi-structured interviews	Patients with a psychiatric diagnosis or cancer	Family members: N = 4 N = 15 Female: not reported Age: not reported	Physicians, medical residents, nurses, and department managers working in psychiatry, internal medicine, general surgery, intensive care medicine, obstetrics/ gynecology and orthopedics	N = 83 Female: not reported Age: not reported	Various	Inductive analysis
Nota, 2016, The Netherlands [70]	Semi-structured interviews and Control Preferences Scale [100]	Patients with rheumatoid arthritis	N = 29 Female: 66% Age: M = 56; range, 17-74	-	-	Rheumatoid arthritis treatment	Inductive analysis
O'Brien, 2013, Canada [75]	Semi-structured interviews	Patients with breast cancer	N = 19 Female: 100% Age: M = 61; range, 40-74			Surgery (lumpectomy and radiation vs. mastectomy) Adjuvant systemic treatment (decision between two chemotherapy regimens or between two hormonal agents) Adjuvant radiation (radiation treatment vs. additional surgery)	Constant comparative method, inductive analysis
Pan, 2022, China [26]	Semi-structured interviews	Patients with prostate cancer	N = 30 Female: 0% Age: M = 67.2, SD = 6.96	-	-	Prostate cancer treatment	Phenomenological approach
Patel, 2014, USA [52]	Interviews	-	-	Nurse practitioners, psychiatrists, primary care physicians, social workers and practice administrators	$\begin{split} N &= 15 \\ \text{Female: } 87\% \\ \text{Age: } M &= 39 \end{split}$	Depression treatment	Grounded thematic analysis
Peek, 2009, USA [76]	Semi-structured interviews and focus groups	Patients with diabetes	Total N = 51 Female: 82% Age: M = 62	-	-	Diabetes management	Coding performed iteratively, conceptual framework developed
Peek, 2010, USA [31]	Semi-structured interviews and focus groups	Patients with diabetes	$\begin{aligned} & \text{Total} \\ & \text{N} = 51 \\ & \text{Female: 82\%} \\ & \text{Age: M} = 62 \end{aligned}$	-	-	Diabetes management	Coding performed iteratively, conceptual framework developed
Peek, 2013, USA [87]	Semi-structured interviews and focus groups	Patients with diabetes	Total N = 51 Female: 82% Age: M = 62	-	-	Diabetes management	Coding performed iteratively, conceptual framework developed
Rodenburg- Vandenbussche, 2020, The Netherlands [36]	Focus groups	Patients with depression and/ or anxiety/ obsessive compulsive disorder	N = 17 Female: 47% Age: M = 44, SD = 16; range, 20- 75	Psychiatrists and psychologists	N = 30 Female: 50% Age: M = 47, SD = 12; range, 27- 69	Treatment for depression and/or anxiety/obsessive compulsive disorder in specialized psychiatric care	Thematic analysis
Sanders, 2003, UK [43]	(Repeated) semi- structured interviews Structured non-	Patients with bowel cancer	N = 37 Female: 35% Age: range 37- 80	-	-	Chemotherapy vs. radiotherapy	Grounded theory approach

Table 1 (continued)

		Patients and/or significant others		Professionals			
First author, year of publication, country of origin	Data collection method	Diagnosis	N, gender, age (years)	Profession	N, gender, age (years)	Decision specification	Data analysis
	participant observation methods (oncologist–patient interactions during clinics)		Repeated interviews with $N=28$				
Santema, 2017, The Netherlands [88]	Semi-structured interviews	Patients with abdominal aortic aneurysm or peripheral arterial occlusive disease	N = 17 Female: 17.6% Age: M = 72, SD = 9.3; range 51- 92	•	-	Vascular surgery	Deductive and inductive analyses
Shepherd, 2011, Australia [24]	Semi-structured interviews	-	-	Medical oncologists, surgeons, haematologists	N = 22 Female: 23% Age: M = 48, range 37-61	Various types of cancer treatment decisions	Framework analysi
Siouta, 2016, Sweden [61]	Interviews	Patients with atrial fibrillation	N = 22 Female: 50% Age: M = 72.5, SD = 12.4; range 37-90	-	-	Atrial fibrillation treatment	Inductive content analysis
Stevenson, 2003, UK [91]	Focus groups	-	-	General practitioners	N = 11 Female: 46% Age not reported	Various primary healthcare treatment decisions	Thematic analysis
Stovell, 2016, UK [56]	Semi-structured interviews	Patients with schizophrenia	N = 7 Female: 57% Age: M = 49; range, 38-58	-	-	Psychosis treatment	Interpretative Phenomenological Analysis
Sumpton, 2021, Australia [35]	Semi-structured interviews	Patients with psoriatic arthritis	N = 25 Female: 44% Age: range, 27-	-	-	Medication for psoriatic arthritis	Thematic analysis
Suurmond, 2006, The Netherlands [27]	Semi-structured interviews	Patients with various diagnoses	N = 13 Female: approximately 50% Age: range, 20- 78	Physicians of various disciplines (general practitioners, company doctors, internist, cardiologist, intern)	$\begin{split} N &= 18 \\ \text{Gender and age} \\ \text{not reported} \end{split}$	Various	Deductive analysis
Tamirisa, 2017, USA [69]	Semi-structured interviews	Patients with cancer	N = 20 Female: 50% Age: M = 63.3, SD = 9	Physicians involved in cancer care	$\begin{aligned} N &= 8 \\ \text{Gender and age} \\ \text{not reported} \end{aligned}$	Cancer treatment	Grounded theory approach
Thorne, 2013, Canada [37]	Repeated interviews	Patients with cancer	N = 100 Female: 72% Age: range, 23-	-	-	Various cancer treatment decisions	Inductive analysis
van Beek-Peeters, 2021, The Netherlands [21]	Semi-structured interviews	-	-	Cardiothoracic surgeons, interventional cardiologists, nurse practitioners and physician assistants	N = 21 Female: 33% Age: M = 45.5, SD = 9.0	Treatment for severe aortic stenosis	Inductive thematic analysis
Vedasto, 2021, Tanzania [25]	Semi-structured interviews	Patients with diabetes	N = 7 Female: 43% Age: range, 46- 76	Nurses and medical specialists	N = 4 Female: 50% Age: range, 30- 45	Diabetes management	Content analysis
Velligan, 2016, USA [82]	Focus groups	Patients who had been recently hospitalized for severe mental illness and caregivers	Total: N = 18 Patients N = 10 Female: 50% Age not reported Caregivers N = 8 Female: 75% Age not	-	·	Mental health treatment	Iterative process, open coding

Table 1 (continued)

		Patients and/or sig	nificant others	Professionals			
First author, year of publication, country of origin	Data collection method	Diagnosis	N, gender, age (years)	Profession	N, gender, age (years)	Decision specification	Data analysis
Whitney, 2021, USA [77]	Semi-structured interviews	Patients with multiple myeloma	N = 19 Female: 53% Age: 45-54: n = 3 55-64: n = 7 65-74: n = 6 75 + : n = 3	-	-	Treatment for multiple myeloma	Inductive thematic analysis
Wilson, 2017, Canada [85]	Focus groups followed by individual semi- structured interviews	Patients with non-ST elevation acute coronary syndrome	N = 20 Female: 40% Age: M = 68.5, range, 51.3- 87.5	-		Cardiac catheterization, percutaneous coronary intervention, coronary artery bypass surgery	Based on grounded theory approach
Windon, 2021, USA [34]	Semi-structured interviews and focus groups	Patients with oropharyngeal squamous cell cancer	N = 26 Female: 19% Pre-treatment patients: n = 11 Age: M = 62; interquartile range, 56-64 Post-treatment patients: n = 15 Age: M = 64; Interquartile range, 60-66.5	-		Primary surgery or primary radiation therapy	Thematic analysis
Wong, 2008, Canada [28]	Interviews	Patients with ductal carcinoma in situ	N = 26 Female: 100% Age: M = 52.2, SD = 6.8	-	-	Lumpectomy vs. mastectomy	Thematic content analysis
Wubben, 2021, The Netherlands [66]	Semi-structured interviews	Patients who stayed at the Intensive Care Unit and family members	Total: N = 17 Age: M = 57.4, SD = 3.5 Patients: n = 9 Female: 44% Family members: n = 8 Female: 75%	Intensive care unit nurses and physicians	$\begin{split} N &= 12 \\ Female: 50\% \\ Age: M &= 47.7, \\ SD &= 2.6 \end{split}$	Various Intensive Care Unit treatment decisions	Grounded theory approach
Younas, 2016, UK [19]	Semi-structured interviews	-	-	Mental health pharmacists	N = 13 Female: 77% Age: majority between 30 and 40 years old	Antipsychotic medication	Thematic analysis
Ziebland, 2006, UK [84]	Semi-structured interviews	Patients with ovarian cancer	N = 43 Female: 100% Age: M = 54, range 33-80	-	•	Surgery; surgery + single platinum agent chemotherapy; surgery + platinum agent chemotherapy + Taxol; surgery + single agent chemotherapy + radiotherapy	Thematic analysis
Ziebland, 2015, UK [51]	Narrative and semi- structured interviews	Patients with pancreatic cancer	N = 32 Female: 47% Age: 35-44 n = 3 45-54 n = 7 55-64 n = 9 65-74 n = 10 75-84 n = 3	-	-	Pancreatic cancer treatment	Thematic analysis, modified grounded theory

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