Worldwide, venous thromboembolism (VTE) remains a major cause of mortality and morbidity. Although VTE is less common in young age compared to older age, evidence suggests that young VTE patients, in particular, are at risk of psychological distress and impaired mental well-being. Thus, the intent of this multistage mixed methods study was to investigate the long-term mental well-being of adolescents and young adults diagnosed with VTE. This was sought through epidemiological descriptions of the long-term mental well-being using psychotropic drug purchase as a proxy; qualitative exploration of the lived experiences following VTE; epidemiological comparisons of the long-term mental well-being between adolescents and young adults with VTE and insulin dependent diabetes mellitus (IDDM) using psychotropic drug purchase as a proxy and finally; an integrated mixed methods interpretation combining the description, exploration and comparison. The description showed the mental well-being of adolescents and young adults was negatively impacted in long-term when considering psychotropic drug purchase as a proxy. One in five adolescents and young adults diagnosed with VTE redeemed a psychotropic drug prescription within the first 5 years after diagnosis. A risk double that of age and sex matched peers. The exploration of the lived experiences following VTE showed an experience of; a creeping loss of youth immortality, a perception of being different; to live with a body in a state of alarm; and to feel symptom management insecurity. The comparison showed the long-term mental well-being of adolescents and young adults with VTE was worse than that of chronically ill patients with IDDM when considering risk of psychotropic drug purchase as a proxy. The integrated mixed methods interpretation of the findings combining the description exploration and comparison showed the mental well-being of adolescents and young adults diagnosed with VTE had a chronic perspective with an increased risk of psychotropic drug purchase and psychological distress persisting over time. Impaired mental well-being was largely connected to fear of recurrence and concomitant uncertainty. Thus to navigate uncertainty was important for the long-term mental well-being. Further, the integrated mixed methods interpretation showed the perceived health threat played a more profound role than illness severity for the long-term mental well-being. In conclusion, mental well-being of adolescence and young adults diagnosed with VTE is negatively impacted in the long-term, which highlights the clinical importance of long-term focus on mental well-being in this group.
To fulfill the requirements for the PhD degree, Anette Arbjerg Højen has submitted the thesis: Long-term Mental Well-being of Adolescents and Young Adults Diagnosed with Venous Thromboembolism, to the Faculty Council of Medicine at Aalborg University.

The Faculty Council has appointed the following adjudication committee to evaluate the thesis and the associated lecture:

**Associate Professor Simon Noble**
*Institute of Cancer & Genetics*  
*Cardiff University*  
*United Kingdom*

**Associate Professor Mette Spliid Ludvigsen**  
*Aarhus University*  
*Aalborg University Hospital*  
*Denmark*

**Chairman:**  
**Associate Professor Henrik Bøggild**  
*Department of Health Science and Technology*  
*Aalborg University*  
*Denmark*

**Moderator:**  
**Professor Erik Elgaard Sørensen**  
*Department of Health Science and Technology*  
*Aalborg University*  
*Denmark*

The PhD lecture is public and will take place on:

**Thursday 15 December 2016 at 13:00**  
The Auditorium at Medicinerhuset, Aalborg University Hospital, Mølleparkvej 4, 9000 Aalborg

Program for PhD lecture on  
Thursday 15 December 2016  
by  
Anette Arbjerg Højen

Long-term Mental Well-being of Adolescents and Young Adults Diagnosed with Venous Thromboembolism

Chairman:  
**Associate Professor Henrik Bøggild**
Moderator:  
**Professor Erik Elgaard Sørensen**

13.00  
Opening by the Moderator

13.05  
PhD lecture by Anette Arbjerg Højen

13.50  
Break

14.00  
Questions and comments from the Committee  
Questions and comments from the audience at the Moderator’s discretion

16.00  
Conclusion of the session by the Moderator

After the session a reception will be arranged