Financial Hardship Associated With Increased Mortality

This association held true for people with or without a history of cancer.

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Financial hardship is linked with higher death risk, irrespective of an individual's cancer history. These findings were presented at the 2020 American Society of Clinical Oncology (ASCO) Quality Care Symposium.

People who have survived cancer are known to experience financial hardship in the United States.

"Compared to individuals without a cancer history, cancer survivors have a greater risk for new cancer and chronic conditions, health care expenditures, including out-of-pocket spending, and limitation in amount or kind of work," said presenter Robin Yabroff, PhD, MPH, of the American Cancer Society.

In the long run, the impact of these financial difficulties on the health of people who have survived cancer is not well understood. In their study, Yabroff and colleagues explored the links between cancer history, medical financial hardship and death.

They selected two groups of adults from the 1997 to 2014 National Health Interview Survey (NHIS) and the NHIS Linked Mortality Files whose status was known through December 31, 2015. The two groups included people between ages 18 and 64 and between ages 65 and 79, respectively.

A medical financial hardship was defined as difficulty obtaining affordable care, including having to delay or forgo medical care because of its cost sometime over the last year. This was determined through a survey.

The researchers found that among adults between ages 18 and 64, 30% of those with a history of cancer and 21% of those without such history had experienced financial trouble. Among adults ages 65 to 79, 11% of those with and without a history of cancer had experienced financial hardship.

In the first cohort, people with a history of cancer and financial hardship had the highest risk of death, followed by cancer survivors with no experience of financial hardship, adults without a cancer history but medical financial hardship and, lastly, adults with no cancer history or financial

hardship. The second, older cohort had corresponding risks: Cancer survivors with and without medical financial hardship as well as those with financial hardship but no cancer history had the highest risk of death.

When these data were adjusted for health insurance coverage, the link between financial hardship and mortality risk was weakened for the first cohort but not the second. “This reflects, in part, the protective effects of Medicare coverage,” said Yabroff, since adults can access Medicare at age 65.

“Medical financial hardship was associated with increased risk of mortality among adults with and without a cancer history, highlighting the need for efforts to mitigate financial hardship in the United States,” wrote the researchers. They also suggested that future research examine how food, housing, health care and financial hardship all tie together, especially with respect to cancer outcomes.

Click here to read the meeting abstract from the ASCO Quality Care Symposium.

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