

Patients With Cancer who Suffered a Major Adverse Financial Event More Likely to be Diagnosed With Advanced Stage Disease

Adverse financial events were most common among non-Hispanic Black, unmarried and low-income patients.

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New findings led by researchers at [the American Cancer Society](#) (ACS) and the National Cancer Institute (NCI) show more than one-third of cancer patients had a major adverse financial event – bankruptcy, lien, or eviction – before their cancer diagnosis. These patients with adverse financial events (AFE) had a later-stage diagnosis compared with patients with no events. The findings are published today in the Journal of Clinical Oncology (JCO).

“Patients with a previous AFE not only face greater likelihood of more advanced cancer but also may encounter substantial barriers to receiving recommended care and experience worse health outcomes for their newly diagnosed cancer because of their pre-existing financial vulnerability,” said [Dr. Robin Yabroff](#), scientific vice president, health services research at the American Cancer Society and senior author of the study.

Researchers identified individuals, aged 21 to 69 years old, diagnosed with cancer during 2014-2015 from the SEER population-based registries for Seattle, Louisiana, and Georgia. Registry data were linked with LexisNexis consumer data to identify patients with a history of court-documented AFEs. All AFEs occurring at any time prior to cancer diagnosis were identified. The association of AFEs and later-stage cancer diagnoses (Stages III/IV) was assessed with sex-specific multivariable logistic regression.

The results showed 36.2% of the 101,649 patients with cancer had a major AFE reported prior to diagnosis. AFEs were most common among non-Hispanic Black, unmarried, and low-income patients. However, even 27% of patients in the highest income group had an AFE prior to diagnosis.

Yabroff adds, “understanding patients’ financial vulnerability within healthcare settings may inform efforts to improve equitable access to oncology care.”

Dr. Joan Warren formerly of the National Cancer Institute is lead author of the study.

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