The Unintended Burden of a Cancer Diagnosis: Financial Toxicity

Researchers observed a trend of increased risk of major financial hardship in younger, non-white, lower-income patients.

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The past few years have seen a concerted effort from stakeholders to raise colorectal cancer awareness; however, those undergoing treatment can face significant financial impact. Financial hardship is one of several factors that has a recognized consequence on treatment outcomes. Many organizations like the National Cancer Institute and American Society for Clinical Oncology are ardent advocates for interventions to diminish the effects of "financial toxicity" that results from medical bills, indirect costs, and non-medical costs faced by patients and their families.

Several retrospective studies have previously found that 25–50% of long-term cancer survivors experience financial hardship. A study recently published in the Journal of the National Cancer Institute is the first prospective cohort study led by the SWOG Cancer Research Network to evaluate financial hardship in metastatic colorectal cancer (mCRC) patients over 12 months. The researchers evaluated the financial impact on newly diagnosed patients who may have an advanced illness. Self-reporting questionnaires were administered over 12 months and considered new debt accumulations in analyses. Of the 380 patients initially enrolled in the study, several became ineligible due to lack of baseline data or death, leaving 302 patients to be evaluated at the end of the one-year follow-up.

Age, race, income, or marital status did not have a significant impact on major financial hardship. Additionally, unemployed individuals were less likely to face significant financial hardship, which the authors believe may be confounded by age and older individuals having more assets and savings. What the researchers observed was a trend of increased risk of major financial hardship in younger, non-white, lower-income patients (but no statistically significant association). They also found that financial toxicity increases over time, where two-thirds of the study subjects faced hardship during the 12-month study period.

The bottom line is that patients with limited resources are more likely to be negatively impacted by the financial burden of a cancer diagnosis. Interventions to help ease the effects are only successful when there is a sense of trust between patients and clinicians and a working dialogue

about cost and financial concerns surrounding treatment plans. Critical solutions include:

- Developing policies that facilitate access to affordable health care
- Designing insurance benefits to minimize costs
- Connecting patients and caregivers to resources for counseling and assistance

The first step to change is an acknowledgment of the issue and screening patients to identify those most vulnerable to financial hardship.

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