

Financial difficulties linked to worse outcomes from cancer treatment

October 11 2016

Financial difficulties can significantly impact a cancer patient's quality of life during treatment and may even increase their risk of death, according to the results of a pooled analysis presented at the ESMO 2016 Congress in Copenhagen.

"Financial difficulties may impact the outcome for [cancer patients](#) even in countries where the national public health system covers most of the expenses, and therefore, it is our mission to understand what are the determinants of such difficulties and whether some of them may be actionable," said principal investigator Dr. Francesco Perrone, director of the Unità Sperimentazioni Cliniche at the National Cancer Institute of Naples, Italy.

Researchers pooled data from 16 prospective multicenter trials in Italy involving a total of 3670 patients with either lung, breast or [ovarian cancer](#), which included the EORTC quality of life C30 questionnaire. Question 28 of this questionnaire asks patients to rate financial difficulties related to their disease or treatment on a scale from 'not at all' to 'very much'.

The [analysis](#) showed that [financial burden](#) - defined as any [financial difficulty](#) reported at baseline—was present in 26% of patients at baseline, and was associated with a 35% greater risk of a worse global quality-of-life response ($p = 0.009$).

Furthermore, financial toxicity, defined as a worsening of the financial

score in subsequent questionnaire, was observed in 22.5% of the 2735 who filled out a subsequent questionnaire, and was associated with a 20% increase in the risk of death ($p = 0.007$).

Perrone said the researchers had expected to find an impact on quality of life from financial hardship, but were surprised to see that worsening financial problems during treatment was associated with a higher risk of death over the course of treatment.

"The size of this impact is moderate but not negligible; it is similar in size to the effect that pushed some new drugs into the market over the last twenty years," Dr. Perrone said.

While pointing out that it was not possible to completely disentangle financial toxicity from a worsening of a patient's clinical condition and disease progression, Perrone said the results from this analysis reflect those observed in similar analyses conducted in the US. "Based on common sense, we oncologists should pay attention to the social status and economic possibilities of our patients and try to advise them regarding their rights in terms of public support and respect due to their condition," Perrone said.

Commenting on the study, Dr Nathan Cherny from the Shaare Zedek Medical Center in Jerusalem, said the study demonstrates that even when patients do not have to pay—for example, when they are participating in a clinical trial—a significant number of them enter [treatment](#) with some degree of financial burden.

"These findings underscore that even in the absence of payment or co-payment of medications, being ill with cancer often has severe and progressive financial impact on patients and their families," Dr Cherny said. "In the absence of substantial supports and benefits, this may not only compromise quality of life but also patient outcomes."

Provided by European Society for Medical Oncology

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