

Many Americans in debt, bankruptcy paying for cancer care

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Others cut back on food, medicines trying to cover costs, studies found.

(HealthDay News) —Besides the danger and worry from the disease itself, many Americans battling cancer are faced with high bills for medical care, two new reports show.

One-third of <u>cancer</u> survivors in the United States say they have experienced money or work problems due to <u>cancer care</u>, while even many cancer patients who have insurance say they have had to change their lifestyle and <u>medical care</u> due to the <u>financial burden</u> of treatment, the research shows.

The findings were presented Tuesday in Boston at a meeting of the American Society of Clinical Oncology (ASCO).

"We found that many cancer survivors, particularly those who are younger or from underserved populations, experience financial or work-related hardship—even when insured and years out from treatment," Robin Whitney, lead author of one of the studies, said in an ASCO news release. Whitney is a <u>cancer survivor</u> and a graduate student at the University of California, Davis, School of Nursing.

In the study, Whitney's team surveyed nearly 1,600 U.S. cancer survivors. They found that 27 percent reported at least one financial hardship—such as debt or bankruptcy. Thirty-seven percent said that they had to make changes at work such as having to take extended time off or delaying retirement, because of the demands of cancer care.

These types of problems were most common among women, younger patients, racial/ethnic minority patients, and those without insurance, the study found.

"Addressing these challenges is an important aspect of providing quality cancer care, because they can substantially impact quality of life and health outcomes," Whitney added.

Among the cancer survivors in the study, 14 percent were in active treatment, 46 percent were less than five years post-treatment, and 39 percent were five or more years post-treatment. Those in active treatment reported more than double the amount of financial hardship than those who were less than five years post-treatment.

Financial problems were more than twice as high among survivors younger than 65 than among older survivors, 67 percent higher among those without insurance than among those with insurance, and 42 percent higher among non-whites than whites, the study authors said.

Work changes were much more common among women than men, more than twice as common among those in active treatment than those who were less than five years post-treatment, and 57 percent more common among non-whites than whites, the study found.

Another study presented at the same meeting included 174 people undergoing treatment for breast, colon, or other solid tumor cancers. All of them were insured and had asked for assistance



through a national co-payment assistance program.

Among the patients, 89 percent had had to make at least one lifestyle change to accommodate cancer care, the researchers said. Lifestyle changes included spending less on leisure activities (78 percent), spending less on basics like food and clothing (57 percent), borrowing money (54 percent), and spending savings (50 percent).

Those most likely to make lifestyle changes included patients who were younger, had higher levels of education and had spent less time receiving chemotherapy. Younger and lower-income patients were more likely to make changes in their medical care than older and higher-income patients.

Perhaps even more troubling were cutbacks some patients felt they needed to make when it came to their medical care, the study authors noted. Thirtynine percent said they made at least one change in their medical care, which included steps such as not filling prescriptions (28 percent) and taking less medication than prescribed (23 percent).

All of this means that "we need a better, more open dialog between <u>patients</u> and providers about the financial burden associated with cancer care costs," study lead author Dr. Ryan Nipp, an oncology fellow at Dana-Farber Cancer Institute, said in the ASCO news release.

The data and conclusions of research presented at medical meetings should be viewed as preliminary until published in a peer-reviewed journal.

More information: The U.S. National Library of Medicine has more about <u>living with cancer</u>.

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