

Greater efforts are needed to address 'financial toxicity' of cancer treatment

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In addition to facing new concerns about their health, individuals who are diagnosed with cancer often worry about the financial burdens of treatment. A new study indicates that many patients feel that such 'financial toxicity' is not adequately addressed by their doctors and other clinicians. The findings are published early online in *CANCER*, a peer-

reviewed journal of the American Cancer Society.

There is growing awareness that cancer diagnosis and treatment can create financial difficulties even for patients with health insurance, but it is unclear whether patients today are being helped by their doctors or staff with these challenges. To investigate, Reshma Jagsi, MD, DPhil, of the University of Michigan in Ann Arbor, and her colleagues surveyed patients with early-stage breast cancer and their physicians: 2502 patients, 370 surgeons, 306 medical oncologists, and 169 [radiation oncologists](#).

Half of responding medical oncologists reported that someone in their practice often or always discusses financial burden with patients, as did 15.6 percent of surgeons and 43.2 percent of radiation oncologists. Patients indicated that financial toxicity remains common: 21.5 percent of whites and 22.5 percent of Asians had to cut down spending on food, as did 45.2 percent of blacks and 35.8 percent of Latinas.

The survey also revealed that many patients desired to talk to providers about the financial impact of cancer: 15.2 percent of whites, 31.1 percent of blacks, 30.3 percent of Latinas, and 25.4 percent of Asians. Unmet patient needs for engagement with doctors about financial concerns were common. Of 945 women who worried about finances, 679 (72.8 percent) indicated that doctors and their staff did not help. Of 523 women who desired to talk to providers about the impact of breast [cancer](#) on employment or finances, 283 (55.4 percent) reported no relevant discussion.

"We found that even though many doctors reported that they routinely make services available to their patients to help with financial concerns, many patients still reported unmet needs," said Dr. Jagsi.

The investigators noted that although advances in detection and

treatment have transformed how [breast cancer](#) is perceived and managed, this study reveals an important aspect that cannot be overlooked or addressed as an afterthought. "Efforts must now turn to confront the financial devastation that many patients face, particularly as they progress into survivorship," said Dr. Jagsi. "The first steps for clinical practice and policy are clear: all physicians must assess patients for financial toxicity and learn how to communicate effectively about it. To cure a patient's disease at the cost of financial ruin falls short of the physician's duty to serve—and failure to recognize and mitigate a patient's financial distress is no longer acceptable."

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