

Financial Burden of Cancer Survivorship Varies by Age, Cancer Site

Study calls for targeted efforts to address excess costs faced by those with a history of cancer

December 26, 2016—Survivors of cancer pay thousands of dollars in excess medical expenditures every year, with the excess financial burden varying by age and cancer site, according to a new American Cancer Society study. The study, appearing [early online in the *Journal of the National Cancer Institute*](#), says targeted efforts will be important to reduce the economic burden of cancer.

As a group, cancer survivors (estimated to number 14.5 million in the United States in 2014) face greater economic burden, including medical expenditures and productivity losses. But relatively little is known about whether that burden varies by cancer site compared to similar individuals without a cancer history.

Researchers led by Zhiyuan “Jason” Zheng, PhD, senior health services researcher in the Surveillance and Health Services Research program at the American Cancer Society, used 2008 to 2012 Medical Expenditure Panel Survey data to measure excess economic burden attributable to the three most prevalent cancers. They calculated excess annual medical expenditures and productivity losses (employment disability, missed work days, and days stayed in bed) for colorectal (n = 540), female breast (n = 1568), and prostate (n = 1170) cancer survivors, and for those without a cancer history (n = 109,423). They stratified the data by cancer site and age (nonelderly: 18–64 years vs elderly: ≥65 years), and controlled for age, sex, race/ethnicity, marital status, education, number of comorbidities, and geographic region.

They found cancer survivors experienced annual excess medical expenditures compared with individuals without a cancer history. For the nonelderly population, annual excess expenditures were \$8657 for colorectal cancer; \$5119 for breast cancer; and \$3586 for prostate cancer. For the elderly population, annual excess expenditures were: colorectal: \$4913; breast: \$2288; prostate: \$3524.

Nonelderly colorectal and breast cancer survivors were more likely to have employment disability as well as productivity loss at work (7.2 days) and at home (4.5 days). In contrast, elderly survivors of all three cancer sites had comparable productivity losses as those without a cancer history.

“This study helps us quantify the excess economic burden associated with the three major cancer sites,” said Dr. Zheng. “Understanding this burden is an important step to shape health care policies to target areas where cancer survivors are most vulnerable.”

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