

Cancer Care Costs High and Vary Substantially by Cancer Type and Stage; Highest Costs at the End of Life and for Patients With Advanced Disease at Diagnosis, Study Reveals

The American Cancer Society study provides key financial data that helps underscore the value of cancer prevention and early detection

ATLANTA, July 28, 2026 — The financial burden of cancer continues to pose a significant challenge for patients and their families across the United States, with many facing staggering costs that can persist throughout treatment and beyond. A new, large study led by researchers at the American Cancer Society (ACS) and the National Cancer Institute finds that cancer-related expenses continue to be high, varying substantially by the type of cancer and how early it is caught. Spending was greatest for patients with advanced cancers, especially at the end-of-life (EOL), topping more than \$100K per year. The study is to be published today in the [*Journal of the National Cancer Institute \(JNCI\)*](#).

“Many advances in cancer treatment introduced in the past decade have been groundbreaking, leading to improved patient outcomes, including survival. However, some of these novel treatments are also costly and frequently used in combination and for longer periods, which can lead to substantial increases in overall spending and high out-of-pocket costs for patients and their families,” said [Dr. Robin Yabroff](#), scientific vice president, health services research at the American Cancer Society and senior author of the study. “This study quantifies the economic burden of cancer and provides key inputs that can be used to study the value of cancer prevention and early detection.”

For the study, researchers used the linked SEER-Medicare data from individuals aged 66 years or older who were diagnosed with cancer during 2008-2019 and without a cancer history based on demographic characteristics, comorbidity burden, and area-level socioeconomic status. Cancer-attributable costs were estimated for 2013-2019 according to cancer type, stage, age, sex, race, and calendar year. Phases of care were defined as initial (first 12 months after diagnosis), continuing, and end-of-life (final 12 months before death from cancer).

The results showed that cancer-attributable medical service costs per year were highest in the EOL phase (\$121,746 on average), followed by the initial (\$45,063 on average) and continuing (\$7,141 each year, on average) phases. Oral prescription drug costs increased over time across all phases, particularly in the end-of-life (from \$4800 in 2013 to \$11 600 in 2019). Medical service and hospitalization costs remained relatively stable after adjustment for inflation. Distant-stage cancers incurred the highest costs, including cancers with effective screening tests (breast, cervix, colorectal, lung, prostate) and other cancers that do not currently have effective screening tests (e.g., pancreas). For example, medical costs for colorectal cancer in the first year after diagnosis for early-stage disease were \$49,000 compared to \$116,000 for advanced-stage disease. Oral prescription drug costs for female breast cancer in the first year after diagnosis for early-stage disease were \$700 compared to \$25,000 for advanced-stage disease.

“Additional research is needed to better understand the long-term economic burden for patients and families, including for cancer-directed treatment, side effects and lasting conditions, and lost household income due to time away from work for patients and family caregivers,” Yabroff added. “This burden frequently lasts many years after cancer diagnosis and increases the risk of financial hardship, including medical debt, stress and worry, and delayed and forgone care due to cost, which has been shown to result in outcomes for patients with cancer.”

“These findings underscore the importance of effective cancer prevention and early detection in improving patient outcomes as well as avoiding the high costs of advanced cancer diagnoses. The availability of affordable, comprehensive health insurance options is critical so that individuals can access no-cost, evidence-based cancer prevention and early detection services and get needed follow-up care and treatment,” said [Lisa Lacasse](#), president of ACS CAN. “ACS CAN will continue urging lawmakers at all levels of government to improve access to comprehensive health insurance.”

Additional ACS Resources:

- [Managing the Cost of Cancer](#)
- [The Costs of Cancer](#)
- [More Cancer Survivors Using Crowdfunding Campaigns to Pay Medical and Living Expenses](#)
- [New Study Shows Patients Paying More Out-of-Pocket Costs for Cancer Care](#)

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The American Cancer Society is a leading cancer-fighting organization with a vision to end cancer as we know it, for everyone. For more than 110 years, we have been improving the lives of people with cancer and their families as the only organization combating cancer through advocacy, research, and patient support. We are committed to ensuring everyone has an opportunity to prevent, detect, treat, and survive cancer. To learn more, visit cancer.org or call our 24/7 helpline at 1-800-227-2345. Connect with us on [Facebook](#), [X](#), and [Instagram](#).

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