

BACKGROUND

• Individuals with triple negative breast cancer (TNBC) are at increased risk for financial toxicity, which can negatively impact treatment adherence and health-related quality of life.

AIMS

 To characterize experience of financial toxicity in TNBC patients and survivors and investigate association between financial toxicity and psychosocial distress

METHODS

- From July 2017-August 2021, **94 participants with TNBC** from Cancer Support Community's Cancer Experience Registry® (CER) completed:
 - > COmprehensive Score for Financial Toxicity (COST; lower scores indicate worse financial well-being)
 - > Patient-Reported Outcomes Measurement Information System-29 (PROMIS-29 v2.0)
- > Items related to patient-provider communication (yes/no)
- Demographic and clinical characteristics
- Pearson correlation was used to measure the strength of the relationship between COST score and PROMIS symptom subscale scores for depression, anxiety, and sleep disturbance and PROMIS subscale for social function.

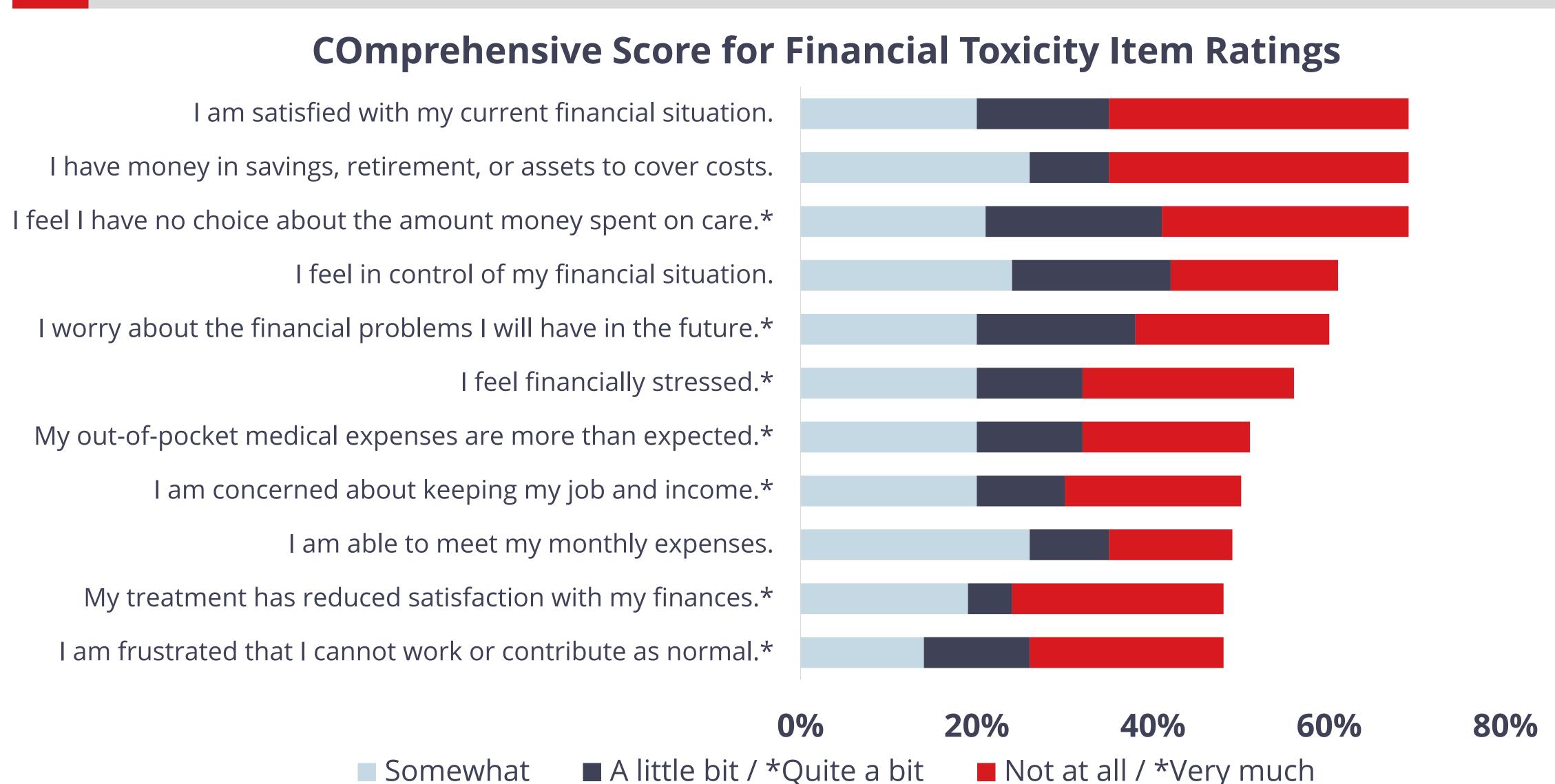
PARTICIPANTS

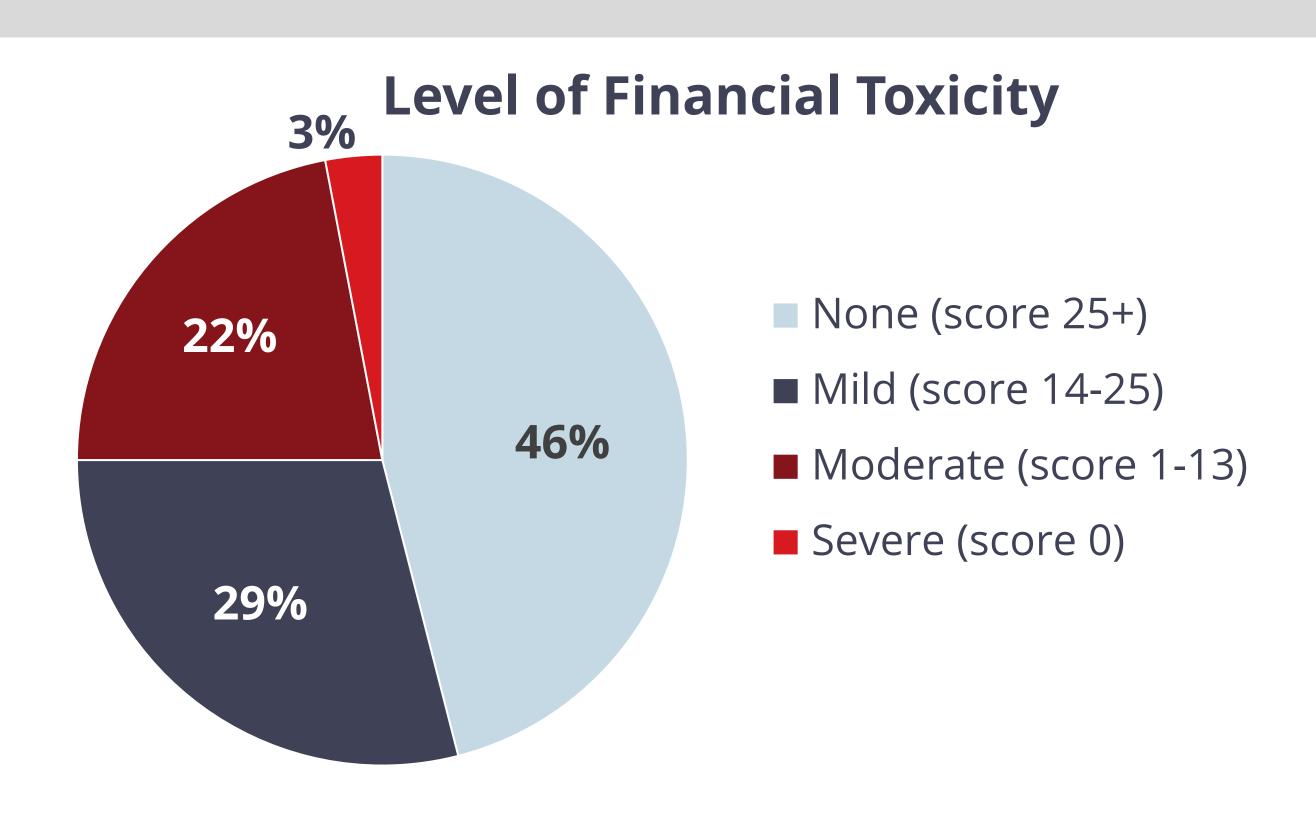
<i>N</i> = 94 Individuals with TNBC	Mean/ n	SD/ %
Age (years) <i>n</i> =90, range (28-77)		SD=11.3
Race & Ethnicity		
Non-Hispanic White	76	81%
Non-Hispanic Black	6	6%
Hispanic	6	6%
Non-Hispanic other/Multiracial	6	6%
Household Income		
<\$40,000	14	15%
\$40,000 or above	63	67%
Employment Status		
Employed Full-Time or Part-Time	54	57%
Retired	16	17%
Unemployed due to disability or other reason	23	24%
Years Since Diagnosis <i>n</i> =93, range (<1-29)	M=3.5	SD=4.6
<2 years	38	40%
2 to <5	36	38%
≥5 years	19	20%
Monthly Out-of-Pocket Costs		
<=\$250	40	43%
\$251-\$500	22	23%
>\$500	29	31%
Metastatic Breast Cancer	14	15%
Currently Receiving Treatment	34	36%
PROMIS Symptom T-score		
Depression	52.2	10.6
Anxiety	55.9	11.0
Sleep Disturbance	52.9	8.8
PROMIS Function T-score		
Social Function	48.5	10.4

Experience of Financial Toxicity and Distress Among Individuals Diagnosed with Triple Negative Breast Cancer: Findings from the Cancer Experience Registry

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RESULTS



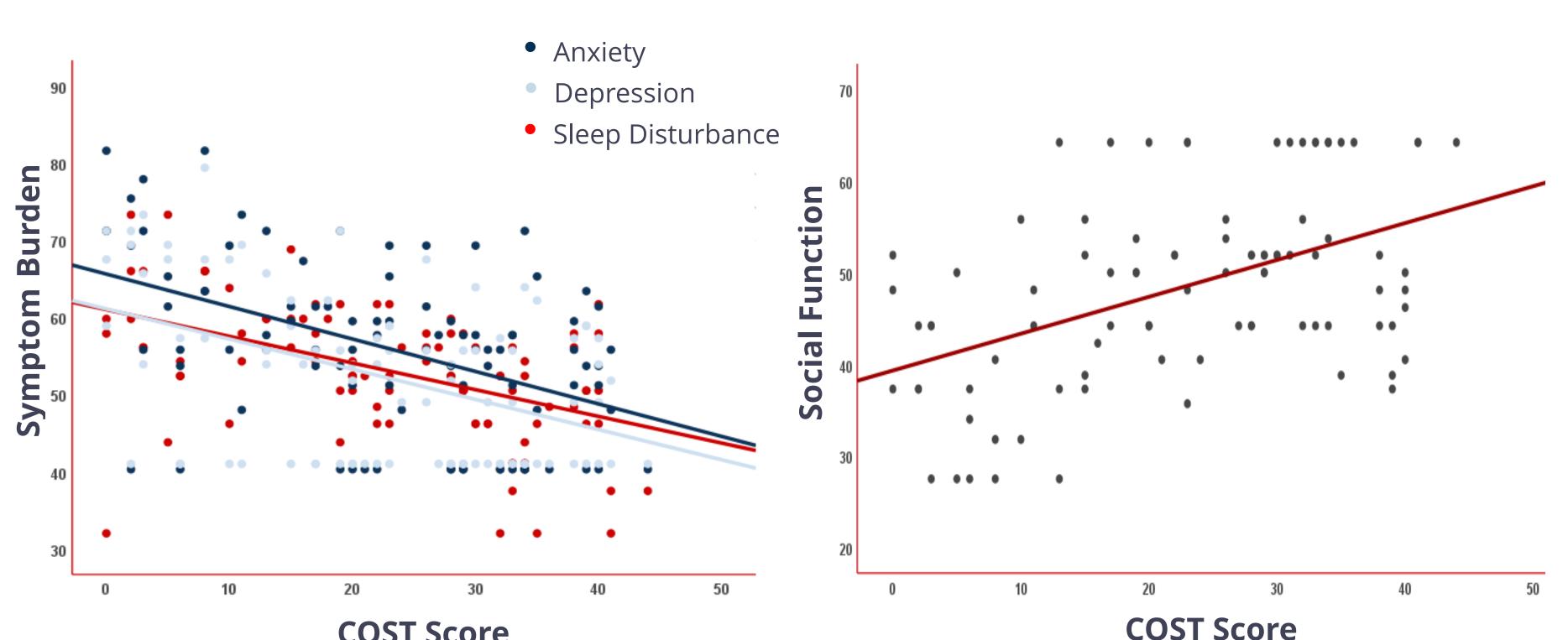


The mean COST score was 23.0 (SD=12.3; range 0-44).

54% of TNBC participants indicated at least mild levels of financial toxicity.

1 of 4 reported moderate to severe toxicity.

Symptom Burden and **Financial Toxicity**



COST Score COST Score

- COST score was inversely correlated with PROMIS anxiety (r= -.45, p<.001), depression (r= -.44, p<.001, and sleep disturbance (r= -.48, p<.001).
- COST score was positively associated with social function (r= .46, p<.001).

Actions Taken to Reduce Cost

23% postponed seeking psychological counseling or support

19% delayed follow-up on for complementary treatment (e.g., physical or occupational therapy, nutrition counseling)

7% postponed filling prescriptions

6% postponed doctor's appointments

6% postponed follow-up screening and/or blood work

5% skipped dosages of prescribed drugs

Patient-Provider Communication about Cost

70% reported health care team did not discuss costs

62% did not discuss impact of TNBC and treatment on work

59% did not discuss financial concerns

34% wished they received more financial advice and assistance

CONCLUSIONS AND IMPLICATIONS

• Greater financial toxicity was related to increased symptoms of anxiety, depression, sleep disturbance, and worse social functioning.

Social Function and

Financial Toxicity

- Results indicate there is little patient-provider discussion about financial burden, with more than half of our sample reporting their healthcare team did not discuss costs, impact on work, or financial distress.
- Free supportive care services provided by community-based organizations meet a critical need when patients forego care to reduce costs related to cancer and its treatment.
- Providing TNBC patients with education and resources related to treatment costs may help alleviate financial impact and its negative consequences.

ACKNOWLEDGMENTS

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