

BACKGROUND

- Financial toxicity (FT) refers to the objective monetary burden and subjective psychological distress that cancer patients face as a result of their care.
- Myelodysplastic syndromes (MDS) are particularly costly, with patients facing an estimated burden of nearly \$130,000 in the first two years following diagnosis.

AIMS

- To better understand the degree to which MDS patients report:
 - 1) financial toxicity
 - 2) finance-related worries and behaviors, and
 - 3) cost-related medication scrimping

METHODS

- Observational, cross-sectional study
- From Oct 2021-Jun 2022, **112 participants with MDS** from the Cancer Support Community's Cancer Experience Registry® provided sociodemographic and clinical history information and completed:
 - Comprehensive Score for financial Toxicity (COST; scores range from 0 to 44, with lower indicating worse financial well-being) – Questions regarding finance-related worries, behaviors, and
 - medication scrimping

PARTICIPANTS

N = 112 individuals with MDS Mean/r M=69 Age (years) (range 34-93) Race & Ethnicity Non-Hispanic White Non-Hispanic Asian/Asian American Non-Hispanic Black Non-Hispanic American Indian/Alaska Native Hispanic Non-Hispanic other/Multiracial **Gender Identity** Woman Man Household Income <\$40,000 **Employment Status** Employed Full-Time, Part-Time, or Temp. Retired Unemployed due to disability or other reason **Years Since Diagnosis** (range 0-24) M=3 **Currently in Treatment** History of Transplant WHO Subtype MDS-EB MDS-MLD MDS-RS MDS with isolated del MDS-SLD MDS-U

9 (8%) participants reported an **IPSS-R score** of very low risk, 50 (45%) low risk, 19 (17%) intermediate risk, 6 (5%) high risk, and 5 (5%) very high risk, and 19% did not know.

Note: Data for "I don't know" and "Prefer not to share" response options omitted from table

Financial Toxicity and Cost-Management Behaviors Among Patients with Myelodysplastic Syndromes

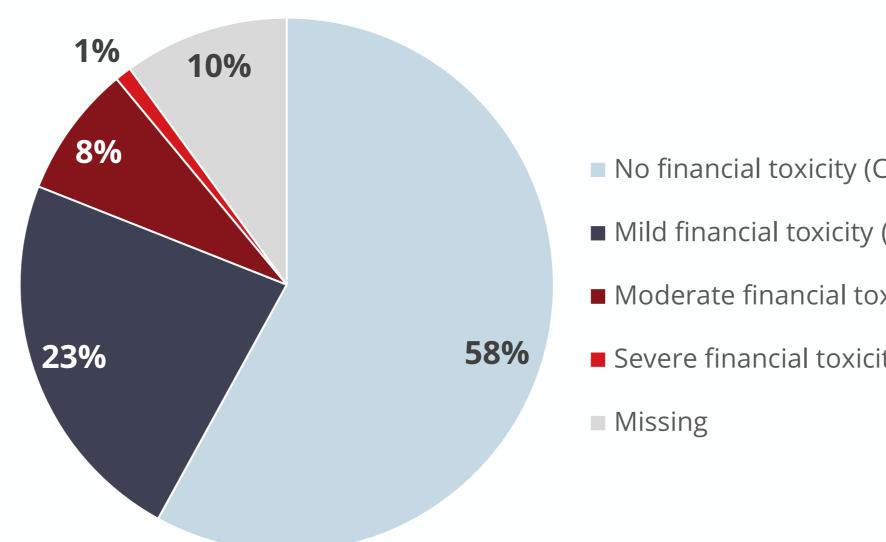
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RESULTS

n	SD/%
9.8	SD=11.0
99 3 1 1 4	88% 3% 1% 1% 1% 4%
61 49 22	55% 44% 20%
13 82 14 3.8 60 25	12% 73% 13% SD=5.2 54% 22%
19 18 13 12 6 5	17% 16% 12% 11% 5% 5%

Level of Financial Toxicity



The mean COST score was 28.9 (SD=1

32% of participants indicated at least m levels of financial toxicity

9% reported moderate to severe toxicit

13% of
participants
indicated that
they were
moderately to
severely
concerned about
health insurance
or money
worries.

Actions Taken to Manage Cost

- **22%** used retirement funds

- **1%** filed for bankruptcy

CONCLUSIONS AND IMPLICATIONS

- prescription medication.

ACKNOWLEDGMENTS

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	Comprehensive Score for Financial 1
	I have enough money in savings, retirement, etc. to cover costs.*
	I am satisfied with my current financial situation.*
COST score >26) (scores ≥14-26)	I am frustrated that I cannot work or contribute as much as usual.
oxicity (scores >0-14)	I feel I have no choice about the amount of money spent on care.
ity (score = 0)	I worry about the financial problems I will have in the future
	I feel in control of my financial situation. ³
	My out-of-pocket medical expenses are more than I expected
	I feel financially stressed.
0.5)	My treatment has reduced my satisfaction with my finances.
nild	I am able to meet my monthly expenses.*
	My illness has been a financial hardship to my family and me.
ty	I am concerned about keeping my job and income

Somewhat Quite a bit / *A little bit Very much / *Not at all

31% utilized co-pay cards (e.g., pharmacy cards) **19%** received cash gifts or gift cards from others **12%** borrowed money or went into debt **11%** used up or depleted savings **7%** sold or liquidated assets

Medication Scrimping

6% of participants indicated that in the past 12 months, there were times when they needed some kind of prescription medication but did not get it because of the cost.

• MDS patients report significant cost-related worries, frustrations, and fears related to treatment, with almost 1 in 10 noting moderate/severe financial toxicity. • MDS patients engage in a variety of strategies to mitigate the financial burden of treatment, including tapping into personal assets and scrimping on

• Future research should examine how maladaptive coping strategies for dealing with financial toxicity (e.g., medication scrimping) impacts patient outcomes. • MDS healthcare teams should consider engaging in timely conversations about the cost and value of MDS treatments, conducting periodic assessments of financial toxicity, and offering access to financial and work-related resources for patients who may be at risk for financial toxicity.

70%

Foxicity (COST) Item Ratings

Of the 51 participants who took prescription medication for their cancer in the past 12 months, **10%** reported that they skipped medication doses, took less medication, or delayed filling a prescription to save money.





Please contact melissa@cancersupportcommunity.org with questions or for additional information.