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Duke Doctors Consider when the Cost of Care Becomes Toxic

Morrisville, NC (March 23, 2018)—Can the cost of health care be bad for you? In the [January/February issue](#) of the *North Carolina Medical Journal*, Drs. Caroline Sloan and S. Yousuf Zafar at Duke University examine the “financial toxicity” of cancer care in an article titled, “Ask Early and Ask Often: How Discussing Costs Could Save Your Patient’s Life.”

The authors write that out-of-pocket costs, which have increased particularly in cancer care, can have a toxic effect on patients and their families. Although the Affordable Care Act has created out-of-pocket maximums (\$6,850 for an individual in 2016), Sloan and Zafar write “even this amount, which is roughly equivalent to 22% of the median annual personal income in the United States, can be harmful.”

In addition to out-of-pocket costs for care, patients face other financial losses like decreased savings and more time off of work.

“Patients will come from rural North Carolina to go all the way to Duke for their cancer care,” said Sloan, an internal medicine resident at Duke University School of Medicine. “If we want to make sure that patients have good outcomes, in terms of life expectancy and quality of life, we need to make sure that we’ve taken into account all of that time and money spent to take care of themselves.”

The authors also point out that the financial burden of care deters patients from maintaining their medications and treatment.

“Some studies have shown that decreased adherence turns into lower life expectancy,” Sloan said. “If you don’t adhere to your chemotherapy, for example, then you’re probably not going to be able to cure the cancer that you have.”

However, there are solutions. Sloan and Zafar discuss several interventions that can ease the financial burden of cancer care: Medicare offers low-income subsidies, some pharmaceutical companies offer rebates or pharmaceutical patient assistance programs for expensive drugs, and many cancer centers offer financial help for patients who can't afford their out-of-pocket expenses.

To direct patients to these resources, Sloan and Zafar say doctors will need to bring up finances with their patients and ask if patients are having trouble paying for their cancer care. The authors wrote that one recent study found that while half of cancer patients wanted to discuss finances with their oncologists, only about one-fifth mentioned this topic during their appointments.

"It's important for us to try and work together to try and figure out how we can make those out-of-pocket costs go down," said Sloan. "In the meantime, it's important for us as doctors to bring it up as often as we can."

To read the [full article](#), "Ask Early and Ask Often: How Discussing Costs Could Save Your Patient's Life," by Caroline Sloan and S. Yousuf Zafar, as well as other NCMJ articles, visit ncmedicaljournal.com.

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