## **Situation**

Financial toxicity is the adverse economic consequences and distress resulting from medical treatment. Cancer is one of the costliest health conditions in the United States, making patients with cancer and cancer survivors particularly vulnerable to financial toxicity. Many factors influence financial health and distress, including illness status, direct and indirect medical costs, insurance, and treatment choices. Financial toxicity can be reported as objective (ability to pay for care) or subjective (anxiety and stress due to medical costs).

### **Risk Factors**

- Age: Younger adults (early income earners without assets, financial responsibilities such as children)
- Income: Lower- or fixed-income households, loss in productivity, difficulty returning to work
- Minority groups
- Type and severity of cancer

## **Effects of Financial Toxicity**

- Lower adherence to cancer treatment, skipping medications, delaying or missing scheduled visits, or declining referral services
- Greater symptom burden, shorter survival, poorer prognosis, and greater risk of recurrence
- Medical debt, delinquency on personal bills, or bankruptcy
- Lower quality of life, poor physical and mental health, and dissatisfaction with social life

# **Nursing Considerations**

- Consider financial toxicity for all patients and establish a culture that considers financial health part of overall well-being.
- Assess for financial concerns early in the decision-making process and throughout the care trajectory.
- Leverage the nurse–patient relationship. Patients may be reluctant to discuss financial issues with a physician provider but more open to discussing them with a nurse.
- Refer patients to assistance programs and support systems.
- Advocate to local government for policy change.

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