

Association between Chemotherapy Toxicities and Financial Problems in The First Three Cycles of Chemotherapy Breast Cancer Patients

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Introduction

The aim of the study was to know the Association between chemotherapy toxicities and financial toxicity in the first three cycles of chemotherapy breast cancer patients.

Methods

- Conducted in secondary inpatient referral hospital
- Inclusion criteria: Newly diagnosed woman breast cancer patients either done surgery or naïve chemotherapy were included.
- Subjects were followed if they had chemotherapy toxicity during the three cycles of chemotherapy.
- Evaluation of chemotherapy toxicity was using National cancer institute common terminology criteria for adverse events (NCI-CTCAE) version 4.0.
- Evaluation of financial problem based on one of domain in European Organization for research and treatment of cancer core quality of life questionnaire (EORTC-QLQ-C30).

Table 1. Characteristic subject

Variables	N=128
Age	47(25-59)
Body mass index	56.97±9.49
Married	107(83.6)
Active working	63(49.2)
Functional status ECOG 1	124(96.9)
Independent	82(64.1)
Had comorbidity	52(40.6)
Early stage	72(56.3)
Menopause	62(48.4)
Taxane base chemotherapy	81(63.3)
Grade 1-2 Toxicity 1 st cycle	
Hematology	12(10.9)
Gastrointestinal	16(14.5)
Grade 1-2 Toxicity 2 nd cycle	
Hematology	11(13.9)
Gastrointestinal	5(6.3)
Grade 1-2 Toxicity 3 rd cycle	
Hematology	10(14.3)
Gastrointestinal	11(16.4)
Financial problems	14(10.9)

Results

The characteristic of 128 subjects was presented in table 1. Toxicities were associated with financial problem with RR 1.692(0.950-3.015) and after Adjusted with others confounder adjusted OR 5.538(1.559-19.574)

Conclusion

- Chemotherapy toxicity after three cycles of chemotherapy were associated with financial problems in naïve women breast cancer patients who underwent chemotherapy.
- Further larger prospective cohort study should be done to confirm these findings. Supportive care may be needed to cope the toxicities in order to decrease the financial problems.

