

HEALTH CARE

# Some Patients Dump Lifesaving Cancer Drugs Because of Cost

BY MAGGIE FOX



(LOIC VENANCE/AFP/Getty Images)

May 19, 2011 New targeted pills can have dramatic effects on cancer, not only driving the disease into remission but also freeing patients from hours of uncomfortable and boring chemotherapy treatments. Up to 10 percent of patients, however, are not filling their prescriptions for the pills--and cost appears to be a factor, according to a new report.

The higher the co-pay for a cancer pill, the less likely patients were to fill their prescriptions, the team at advisory company Avalere Health found.

“Our study shows that many cancer patients are abandoning the medicine they need,” Lauren Barnes, a vice president at Avalere Health, said in a statement. “With 45.5 percent of Medicare patients in our sample facing cost-sharing greater than \$500 for their first anticancer drug, this is a Medicare quality issue of the first order.”

The research team looked at a basketful of cancer pills, including Tarceva, used to treat lung cancer and pancreatic cancer; Gleevec, which turned one type of leukemia into a chronic but manageable disease for many people; Xeloda, used to treat breast

and colon cancer; Temodar for skin cancer; and others.

People who made less money were more likely to start but not finish their prescriptions, the researchers reported in the *Journal of Oncology Practice*. Like drugs for other conditions, cancer medications must be taken regularly and completely to be effective.

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Avalere’s Michael Johnsrud, and oncologist Lee Schwartzberg of the West Clinic in Memphis, Tenn., studied more than 10,000 patients insured either by Medicare or commercial insurance who were prescribed cancer pills between 2007 and 2009.

“Lower annual household income was associated with higher abandonment rates,” they wrote.

“Patients with incomes of less than \$40,000 per year had an abandonment rate of 11 percent, decreasing to 10 percent for incomes between \$40,000 and \$75,000 and 9 percent for incomes above \$75,000.”

More than 70 percent of the drugs required a \$100 co-pay or less. “Claims with cost-sharing above \$500 had the highest abandonment rate (25 percent) as compared with an abandonment rate of 6 percent for claims with cost sharing of \$100 or less,” the research team wrote.

They said that their findings are important to keep in mind as the Health and Human Services Department modifies Medicare Part D and requirements for coverage by commercial insurance plans.


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