Insights from Survivors:
Managing the Personal, Emotional and Financial Impact of Cancer

September 2014 | Consumer study
Table of contents

Introduction ........................................................................................................................... 1
Methodology .......................................................................................................................... 3
Key findings .......................................................................................................................... 4
Chapter 1: Insights from survivors ................................................................................... 7
  Recommendations from cancer survivors ......................................................................... 9
Chapter 2: Diagnosis and treatment resources .................................................................. 11
Chapter 3: Financing cancer treatment .............................................................................. 17
Chapter 4: Life after cancer .............................................................................................. 25
Chapter 5: Recommendations for consumers ..................................................................... 31
About the Washington National Institute for Wellness Solutions ..................................... 33
Introduction

Cancer is an all-too-common threat for individuals and families across America. According to the American Cancer Society, about **one in two men** and **one in three women** will develop some form of cancer in their lifetime.¹

People who are diagnosed with cancer face an all-encompassing battle. And the battle’s scars—physical, emotional and financial—can linger long after treatment ends and life returns to “normal.” Diagnosis and treatment require meaningful lifestyle changes, both for the person diagnosed and for each one who provides support as a caregiver.

The financial costs of cancer cannot be ignored. In a recent study, the National Institutes of Health estimated the annual cost of cancer in the U.S. at **$216.6 billion**, including direct medical costs (all health expenditures) and indirect mortality costs (lost productivity due to premature death).² These costs are felt by all who face treatment, especially those diagnosed under age 50 and those with Stage III or IV cancers.

But as average five-year survival rates improve—from 49% in 1977 to 68% in 2009, according to the most recent comparative data available³—many types of cancer are no longer as deadly as they once were. When treatment ends, survivors often find the cancer has resulted in unforeseen positive side effects. **Many report they have a more positive outlook in one or more aspects of life.** Furthermore, those who have battled cancer report their priorities have shifted away from their career and financial concerns toward living a healthier and more spiritual life.

To date, little research has focused on the experiences of middle-income cancer survivors. “Insights from Survivors: Managing the Personal, Emotional and Financial Impact of Cancer” aims to make the road easier for those who inevitably will follow by asking middle-income cancer survivors to candidly share what they’ve learned, what worked for them and what didn’t, and deeply personal insights into life after cancer.
Methodology

“Insights from Survivors: Managing the Personal, Emotional and Financial Impact of Cancer” is part of a series of studies commissioned by the Washington National Institute for Wellness Solutions. It was conducted in May 2014 by Zeldis Research, an independent research firm.

A nationwide sample of 400 middle-income Americans participated in the internet-based survey. All respondents:

- Have a household income between $35,000 and $100,000.
- Had been diagnosed with cancer within the past 10 years.
- Received chemotherapy and/or radiation.
- Were between the ages of 25 and 65 at the time of diagnosis.

Respondents were excluded if they had Medicaid insurance at the time of treatment.

Significant subsample differences were tested at the 95% confidence level.

Survey participants represented a cross-section of adult generational groups from ages 25 to 65.

Cancer types represented in the survey

<table>
<thead>
<tr>
<th>Cancer Type</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Breast</td>
<td>42.5%</td>
</tr>
<tr>
<td>Prostate</td>
<td>10.8%</td>
</tr>
<tr>
<td>Thyroid</td>
<td>10.0%</td>
</tr>
<tr>
<td>Colon</td>
<td>5.5%</td>
</tr>
<tr>
<td>Non-Hodgkin’s lymphoma</td>
<td>5.0%</td>
</tr>
<tr>
<td>Lung</td>
<td>3.0%</td>
</tr>
<tr>
<td>Leukemia</td>
<td>2.8%</td>
</tr>
<tr>
<td>Colorectal</td>
<td>2.5%</td>
</tr>
<tr>
<td>Ovarian</td>
<td>2.3%</td>
</tr>
<tr>
<td>Esophagus</td>
<td>2.3%</td>
</tr>
<tr>
<td>Bladder</td>
<td>2.0%</td>
</tr>
<tr>
<td>Skin</td>
<td>1.8%</td>
</tr>
<tr>
<td>Uterine</td>
<td>1.5%</td>
</tr>
<tr>
<td>Hodgkin’s lymphoma</td>
<td>1.0%</td>
</tr>
<tr>
<td>Kidney</td>
<td>0.8%</td>
</tr>
<tr>
<td>Cervical</td>
<td>0.8%</td>
</tr>
<tr>
<td>Liver</td>
<td>0.5%</td>
</tr>
<tr>
<td>Pancreatic</td>
<td>0.5%</td>
</tr>
<tr>
<td>Bone</td>
<td>0.3%</td>
</tr>
<tr>
<td>Brain</td>
<td>0.3%</td>
</tr>
<tr>
<td>Other</td>
<td>4.3%</td>
</tr>
</tbody>
</table>

Key findings

Cancer survivors wish they had been more proactive and focused on themselves

- More than four in ten survivors (44%) advise others facing cancer to be proactive about their treatment. They most often mention getting involved by doing research, paying attention to warning signs and discussing treatment with a doctor.

- More than one in four (26%) urge others to make themselves the priority during treatment with actions such as finding a facility they are comfortable with, taking care of themselves and accepting help from others.

Survivors credit their personal relationships as their most valuable resource

- Top resources to help survivors come to terms with the diagnosis include doctors, nurses and medical staff (40%); friends and relatives with similar experience (20%); and support groups (10%).

- While three in four (77%) were satisfied with their treatment decision, one-quarter (23%) would choose a different facility if they could do it again.

- More than four in ten (44%) used the internet to research their diagnosis. Top-mentioned sites included the American Cancer Society (Cancer.org) and WebMD.com.

- Many personal, financial and emotional needs go unmet during cancer treatment. One in three (32%) cancer survivors needed additional financial assistance, and one in four wished they could have talked more to other survivors through support groups (25%).

- More than half (53%) of survivors diagnosed under age 50 needed additional monetary support, while about half (45%) of Stage III and IV survivors needed the same.
Financial challenges continue long after treatment

- More than one-third of survivors (34%) did not get the financial support they needed during treatment, either with specific monetary support (32%) or help with financial decisions (20%).
- More than half of survivors (57%) felt that at least one aspect of their treatment cost more than they expected; two-thirds (65%) could not name even one aspect that cost less than they expected.
- Two-thirds of survivors (65%) did not have sufficient household income to cover treatment-related expenses, including more than half (55%) who had to withdraw from their personal savings or investment accounts.
- More than six in ten survivors (62%) reported facing some medical debt after their treatment, with one-third (30%) reporting debt of more than $10,000.
- About one in ten survivors diagnosed under age 50 (11%) and Stage III and IV survivors (11%) reported medical debt of $40,000 or more.
- About one-quarter of survivors under age 50 had to borrow money from family and friends (27%) or withdraw from a retirement account (24%).

Life after cancer is a mix of challenges and changes in life outlook

- The long-term challenges are undeniable:
  - 44% report less physical strength.
  - 31% are less financially secure.
  - 24% feel their career prospects are worse.
- However, nearly nine in ten (85%) cancer survivors look back on their experience and recognize that at least one aspect of life has actually improved.
- More than Stage 0–II survivors, those whose cancer reached Stage III or IV report that many aspects of life are worse after treatment. Nearly six in ten (58%) Stage III and IV survivors have reduced physical strength following treatment.

Priorities change after treatment, including a greater emphasis on healthy living, spirituality and friendships

- Across all ages, genders and cancer stages, nearly half of survivors (45%) ranked living a healthy lifestyle a top priority following treatment, up from one-fourth (28%) before diagnosis.
- Less than one in ten (5%) ranked career as a top priority after treatment, down from one in three (30%) before diagnosis.
Insights from survivors

Survey participants were eager to make the road easier for new cancer patients by candidly sharing what they’ve learned, what worked for them and what didn’t, and insights into their very personal experiences. Three themes stood out in their responses:

Survivors say it’s vital to be proactive

When cancer survivors were asked what they would have done differently and what they found important to know about the diagnosis, treatment and recovery process, nearly half (44%) said it’s most important to be proactive.

Cancer survivors’ top six ways to be proactive about diagnosis, treatment and recovery:

1. Do your own research.
2. Pay attention to warning signs.
3. Discuss your treatment with your doctor.
4. Ask your doctor questions.
5. Get a second opinion.


IN THEIR OWN WORDS

Be proactive:

“I should have listened to my body a couple of months earlier than I did.”

“The infusion nurse who took care of me during my first treatment told me to keep a journal. At the time I didn’t see how that would be important. I really wish I had done so. I don’t remember at what point [the treatments] started making me feel bad, which ones were the worst and with which treatment they changed my medication for the nausea.”

Stay positive:

“Know that you can beat the cancer. Have a positive mind.”

“Always keep a positive outlook. Every day they are coming out with new drugs and treatments.”

One-quarter advise others to put their own needs first

More than one in four (26%) cancer survivors encourage others to make themselves the priority during treatment.

Finally, according to those who have been there, individuals must remain positive during treatment (15%).

Cancer survivors’ top five ways to make themselves the priority during diagnosis, treatment and recovery:

1. Find a facility you are most comfortable with.
2. Take care of yourself.
3. Accept help from others.
4. Follow your treatment regimen.
5. Take time to make appropriate decisions.

Recommendations from cancer survivors

Over-the-counter products

- Mederma and coconut oil for scar prevention
- Biotene, Oasis, lemon drops and Lycopene tablets for dry mouth
- Prilosec, PepcidAC and GasX for acid indigestion
- Preparation H for hemorrhoid treatment
- Senna Lax, Dulcolax, MiraLAX, Benefiber and Senokot for constipation

Nutrition and grocery items

- Boost and Ensure shakes
- Zija nutritional products
- Great Harvest Bread for iodine-free bread
- Gatorade
- Arizona watermelon fruit juice

Lotions, gels and ointments

- Eucerin
- Aquaphor
- Desitin
- Jafra Royal Jelly
- Aloe gel
- Udderly Smooth skin cream
- Whole Foods calendula lotion
- Gold Bond Intensive Cream
- Vanicream

Books recommended

- Dr. Susan Love’s Breast Book by Susan M. Love, MD
- Breast Cancer Treatment Handbook: Understanding the Disease, Treatments, Emotions and Recovery from Breast Cancer by Judy C. Kneece
- Breast Cancer: The Complete Guide by Yashar Hirshaut, Peter Pressman and Jane Brody
- Just Enough Light for the Step I’m On: Trusting God in the Tough Times by Stormie Omartian
- The Cancer Fighting Kitchen: Nourishing, Big-Flavor Recipes for Cancer Treatment and Recovery by Rebecca Katz and Mat Edelson
RECOMMENDATIONS FROM CANCER SURVIVORS

Support services
• Services of the American Cancer Society
  - ACS Hope Club
  - ACS Reach to Recovery program
  - ACS Hope Lodge
• Look Good Feel Better
• Online shopping
  - Schwan’s Home Service
  - Safeway Grocery Delivery
  - Amazon
• Cleaning for a Reason

Sources of wigs and scarves
• American Cancer Society
• Wigs on Wheels
• Lovely Lady
• Helping Hand Fund
• Local boutiques
• Paula Young Wigs
• Good Wishes

Quick tips— in survivors’ own words
• Schedule smartly: “I would not schedule biopsies for Thursdays or Fridays because the wait over the weekend is so hard.”

• Hydrate: “Drink lots of water; it helps to flush the system of the chemo, fewer side effects.”

• Find a trusted notetaker: “Take a trusted person with you to all appointments to take notes. You will not be able to absorb all the information you will receive.”

• Find a home helper: “You will need people to help you after chemo treatments. I would come home after my treatments and go to bed and sleep for three days. If someone didn’t bring me food I would have not eaten and probably not done as well as I did.”

• Stay positive: “[Do] not think of this cancer as a death sentence because there has been so much progress in the treatment, and you can live a long life after treatment.”

• Take your time: “There is rarely a need to make a decision immediately. Take time to find the treatment plan that is best for you. It is YOUR body, you should be in charge...NOT the doctor.”
A cancer diagnosis can be overwhelming and isolating. To cope, cancer survivors call upon many useful resources, often crediting their personal relationships as their most valuable resource in coming to terms with the diagnosis: their doctors, nurses, and medical staff (40%); friends or relatives with similar experiences (20%); and support groups (10%).

Top 10 most helpful resources after a cancer diagnosis:

1. Doctors, nurses and medical staff
2. Websites
3. Friends and relatives with similar experiences
4. Books
5. American Cancer Society
6. Support groups
7. Pamphlets
8. WebMD.com
9. Cancer and treatment centers
10. Prayer and faith


IN THEIR OWN WORDS

Diagnosis support:

“I tapped into friends who had already been through breast cancer, listened to their experiences.”

“My boss, who was a cancer survivor, encouraged me to be assertive with my doctor and to get a second opinion. My husband came to every doctor’s appointment and treatment with me. He made sure I took all my meds on schedule.”

“I spoke with the hospital staff, who provided me with reading materials about the type of treatment that I would be receiving.”

“I had terrific doctors and staff who walked me through the process of treatment. All the nurses and doctors were encouraging and explained and answered any questions I had.”
One in four were not satisfied with their treatment facility

Two-thirds of cancer survivors (66%) chose to receive their treatment at a local hospital or treatment center, while one in four (26%) chose a regional specialized treatment center. Overall, three in four (77%) were satisfied, although one-quarter (23%) reported they would choose a different facility if they could do it again.

Survivors turn to other people during treatment and recovery

During treatment and recovery, more than one-quarter (26%) said that the people in their lives were most helpful, specifically mentioning family and friends (13%), medical staff (5%), home health care nurses (4%) and support groups (4%).

Top 10 most helpful resources during treatment and recovery:

1. Support from family and friends
2. Wigs and hats
3. Skin creams
4. Medication (general)
5. Comfortable clothing
6. Medical staff
7. Online shopping
8. Home health care and visiting nurses
9. American Cancer Society
10. Support groups


IN THEIR OWN WORDS

Treatment resources:

“The American Cancer Society ran a program—Look Good Feel Good. They gave us a bag of makeup and showed us how to put on eyebrows. There is a lot of community support out there.”

“I received a wig from the American Cancer Society. Also, the resources at MD Anderson were helpful, such as classes and educational resources.”

“Shopping for wigs was probably the most challenging. I called around to wig stores and talked to the workers until I found the right person that was knowledgeable and I felt comfortable with.”
Top 5 most helpful online resources after diagnosis

More than four in ten (44%), used the internet to research their diagnosis.

- Cancer.org
- WebMD.com
- MayoClinic.org
- Komen.org
- LLS.org


More than one-quarter of survivors (28%) used social media forums to find and share information. Among those who did use social media, Facebook was most popular, chosen by three-fourths (74%) of social media users.

Cancer survivors’ social media use

- Did use social media
  - Facebook: 74%
  - Online communities: 18%
  - Blogging: 15%
  - Other social media: 16%
- Did NOT use social media


IN THEIR OWN WORDS

Treatment resources:

“YouTube videos of survivors were very helpful, showing me what the patients looked like after surgery and reconstruction. The American Cancer Society sent a very nice woman to talk to me about what to expect.”

“The American Cancer Society has many useful books and other tools to provide insight into the situation.”

“The Leukemia and Lymphoma Society has a wonderful website [LLS.org] with lots of information as well as online, live chat groups. Through those, I have been able to trade information and make lots of new friends, as well as attend talks, support groups, art therapy, massages, exercise classes and many other things, all free.”
Personal networks are the most valuable support system

A broad range of support systems are available to those who are facing cancer. Even so, many personal, emotional and financial needs go unmet. One-in-three (32%) cancer survivors needed additional financial assistance, and one-in-four wished they could have talked more to other survivors through support groups (25%) and needed more help with household activities (24%).

Yet almost two-thirds (64%) of survivors reported satisfaction with the financial support they received. More than two-thirds (68%) were satisfied with the personal help they received from support groups or by talking to other survivors; three-fourths (75%) said they received sufficient emotional support.

Support systems:

“**It is important to have someone to share your experiences with, someone to support you when you do not feel well.”**

“I wish I had used support groups and not tried to tough it out alone.”

“You need a support system around you, whether it is a hospital support group or your family and friends.”

Satisfaction with the level of support received during treatment

<table>
<thead>
<tr>
<th>Support</th>
<th>Needed More Of</th>
<th>Received Sufficient Support</th>
<th>Needed Less Of</th>
</tr>
</thead>
<tbody>
<tr>
<td>Financial assistance</td>
<td>32%</td>
<td>64%</td>
<td>4%</td>
</tr>
<tr>
<td>Talking to other survivors/support groups</td>
<td>25%</td>
<td>68%</td>
<td>7%</td>
</tr>
<tr>
<td>Help with household activities</td>
<td>24%</td>
<td>71%</td>
<td>5%</td>
</tr>
<tr>
<td>Emotional support</td>
<td>22%</td>
<td>75%</td>
<td>3%</td>
</tr>
<tr>
<td>Help with financial decisions/managing finances</td>
<td>20%</td>
<td>74%</td>
<td>6%</td>
</tr>
<tr>
<td>Transportation to/from appointments and treatment</td>
<td>13%</td>
<td>81%</td>
<td>6%</td>
</tr>
<tr>
<td>Coordinating care/communicating with health care providers</td>
<td>13%</td>
<td>83%</td>
<td>4%</td>
</tr>
</tbody>
</table>

Young people and patients in Stages III and IV are especially vulnerable

More than half (53%) of those diagnosed in their 20s, 30s or 40s needed additional monetary assistance. In addition, about one-third needed more peer support (38%), help with household activities (35%) or help with financial decisions (35%).

Nearly half (45%) of those diagnosed with Stage III or IV cancer needed more monetary assistance. One-third needed more peer support (35%), help with household activities (34%) or help with financial decisions (33%), and one-quarter needed more support in coordinating and communicating with health care providers (23%) or receiving transportation assistance (20%).

### Additional support needed by young people and patients in Stages III and IV

<table>
<thead>
<tr>
<th></th>
<th>Younger Than 50</th>
<th>Stage III and IV</th>
</tr>
</thead>
<tbody>
<tr>
<td>Needed more financial assistance</td>
<td>53%</td>
<td>45%</td>
</tr>
<tr>
<td>Needed more peer support</td>
<td>38%</td>
<td>35%</td>
</tr>
<tr>
<td>Needed more help with household activities</td>
<td>35%</td>
<td>34%</td>
</tr>
<tr>
<td>Needed more help with financial decisions</td>
<td>35%</td>
<td>33%</td>
</tr>
</tbody>
</table>

Financing cancer treatment

Many cancer patients are surprised by the extent of the direct and indirect expenses not covered by medical insurance. Even with health insurance, the average cancer patient still incurs \$712 in monthly bills for physician copayments, prescription drugs and other expenses related to treatment,\(^5\) not to mention lost income from being unable to work.

**Cancer survivors face financial struggles**

More than one-third of survivors (34%) did not get the financial support they needed during treatment, either with specific monetary support (32%) or help with financial decisions (20%). Additionally, survivors are one-third more likely to say they needed more financial support than to say they needed more emotional support (34% versus 22%).

**Types of support missing for cancer survivors**

![Bar chart showing 34% for financial support and 22% for emotional support.](chart.png)

Treatment costs were more than expected

More than half of survivors (57%) noted that at least one financial aspect of treatment was more than expected, including lost income due to missed work and uncovered out-of-pocket expenses. Two-thirds (65%) could not even name one aspect that cost less than expected.

More than half of survivors (53%) lost at least some income due to missed work. Four in ten lost more income than expected due to missed days from work (40%) or paid more than they expected in out-of-pocket costs not covered by insurance (38%). Only one-quarter (24%) experienced uncovered out-of-pocket expenses that were less than they expected.

Expectations for out-of-pocket expenses related to treatment

IN THEIR OWN WORDS

Saving money:

“It’s important to be able to stay close to home for surgeries and ongoing treatments if possible, to keep transportation and other costs lower and have the local support of family and friends available.”

“Hope Lodge and the services they provided were fantastic. Not only did they provide at no cost a place to live during intense treatments, they also provided daily transportation services to and from my treatments, offered support groups and even catered meals from outside groups.”

Financial demands continue long after treatment

Nearly two-thirds of survivors (65%) did not have enough household income to cover all expenses related to their cancer treatment and were forced to take additional financial action to pay for treatment. These actions included withdrawing money from personal savings or investment accounts (55%), using credit cards (46%) and reducing discretionary spending (41%). Actions such as these have financial implications even after treatment ends.

Younger survivors and those with more advanced cancer are more severely affected. Eight in ten (80%) survivors who were diagnosed under age 50 had to use at least one additional resource, versus six in ten (61%) of those who were diagnosed between ages 50 and 65 (57%). And 72% of survivors diagnosed with Stage III or IV cancer used at least one additional resource, versus 60% of those with Stage 0 or I.

How cancer survivors paid out-of-pocket treatment expenses

- Personal savings or investment accounts: 55%
- Credit cards: 46%
- Reduced discretionary spending: 41%
- Borrowed from family/friends: 15%
- Withdrew from retirement account: 15%

65% Needed to take at least one additional financial action to pay for treatment

FINANCING CANCER TREATMENT

Most survivors accumulate medical debt

More than six in ten survivors (62%) reported facing at least some medical debt after treatment. Among those who reported medical debt, nearly one-third (30%) reported debt of $10,000 or more, and 15% reported debt of $20,000 or more.

Cancer survivors who incurred debt as a result of treatment

- 62% of cancer survivors incurred some medical debt.
- 38% incurred no medical debt.

Amount of medical debt incurred as result of cancer treatment

- 48% incurred debt of $5,000-9,999.
- 23% incurred debt of $10,000-19,999.
- 15% incurred debt of $20,000-29,999.
- 6% incurred debt of $30,000-39,999.
- 4% incurred debt of $40,000-49,999.
- 2% incurred debt of $50,000 or more.

Most do not have supplemental insurance

Eight in ten survivors (84%) had no supplemental insurance at the time of their cancer treatment. Seven percent had critical illness or cancer insurance, and 9% had some other form of supplemental insurance to help pay for costs not covered by employer-provided medical insurance.

**Supplemental insurance held by cancer survivors during treatment**

<table>
<thead>
<tr>
<th>Insurance Type</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>No supplemental insurance</td>
<td>84%</td>
</tr>
<tr>
<td>Critical illness/cancer insurance</td>
<td>7%</td>
</tr>
<tr>
<td>Other supplemental insurance</td>
<td>9%</td>
</tr>
</tbody>
</table>


**IN THEIR OWN WORDS**

**Insurance issues:**

“Having access to a therapist I could see, even if it wasn’t covered by insurance. The few times I could afford to go were very helpful.”

“I wish my insurance company had been more helpful with information. I could have had different treatment options. At times I felt bullied into places and things I did not want by the insurance company.”

“I wish that I had demanded quicker services and not waited on insurance-provided care. Eight months from diagnosis was wrong. I learned to be my best advocate and demand quick testing.”

“I should have had the proper insurance to take care of all the bills.”
FINANCING CANCER TREATMENT

Financial struggles of Stage III and IV survivors

Survivors whose cancer reached later stages are more likely than those with earlier-stage cancers to say their cancer-related expenses were “more than expected,” especially in terms of lost income from missed work (54% versus 35%), costs associated with lifestyle changes (45% versus 29%), the cost of extra help for household responsibilities (39% versus 16%) and the cost of traveling to and from treatment (35% versus 17%).

Treatment expenses that were more than expected for Stage III and IV survivors versus Stage 0-II survivors

<table>
<thead>
<tr>
<th></th>
<th>STAGE III AND IV</th>
<th>STAGE 0-II</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lost income</td>
<td>54%</td>
<td>35%</td>
</tr>
<tr>
<td>Lifestyle changes</td>
<td>45%</td>
<td>29%</td>
</tr>
<tr>
<td>Extra household help</td>
<td>39%</td>
<td>16%</td>
</tr>
<tr>
<td>Traveling to treatment center</td>
<td>35%</td>
<td>17%</td>
</tr>
</tbody>
</table>


Plus, more than one in ten (11%) Stage III and IV survivors accumulated medical debt of $40,000 or more, versus just one in one hundred (1%) Stage 0-II survivors.

Survivors with medical debt of more than $40,000

Younger survivors face worse-than-expected financial struggles

Survivors diagnosed under age 50 are more likely than older survivors to say their cancer-related expenses were “more than expected,” especially in terms of lost income from missed work (53% versus 32%), costs for treatment not covered by insurance (48% versus 34%), costs associated with lifestyle changes (44% versus 28%) and costs for professional caregiving services (40% versus 18%). More than one in ten (11%) survivors diagnosed under age 50 accumulated medical debt of $40,000 or more, versus just two in one hundred (2%) older survivors.

**Treatment expenses that were more than expected for younger survivors**

<table>
<thead>
<tr>
<th>Category</th>
<th>Younger Than 50</th>
<th>50 And Older</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lost income</td>
<td>53%</td>
<td>32%</td>
</tr>
<tr>
<td>Treatment not covered by insurance</td>
<td>48%</td>
<td>34%</td>
</tr>
<tr>
<td>Lifestyle changes</td>
<td>44%</td>
<td>28%</td>
</tr>
<tr>
<td>Professional caregiving services</td>
<td>40%</td>
<td>18%</td>
</tr>
</tbody>
</table>

FINANCING CANCER TREATMENT

Younger survivors turn to outside resources for financial help
One-quarter of survivors diagnosed under age 50 had to borrow money from family or friends (27%) and/or withdraw from a 401(k) (24%), versus 8% and 9%, respectively, for survivors older than 50 at diagnosis.

How young survivors paid for unexpected expenses
Among those who used at least one additional resource

- Borrowed money from family/friends: 27% (Younger than 50), 8% (50 and Older)
- Withdrawed from 401(k): 24% (Younger than 50), 9% (50 and Older)

CHAPTER 4

Life after cancer

The American Cancer Society estimates that more than 1.6 million new cases of cancer will be diagnosed across the U.S. in 2014. Commonly thought to be an older person’s disease, cancer is diagnosed nearly half of the time (46%) in people of working age, less than 65 years old. The most common types of cancer are prostate (14.4%), breast (14.1%) and lung (13.7%).

New cancer cases in 2013 by age

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Predicted Number</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Younger than 45</td>
<td>8%</td>
<td></td>
</tr>
<tr>
<td>45-65</td>
<td>38%</td>
<td></td>
</tr>
<tr>
<td>Older than 65</td>
<td>54%</td>
<td></td>
</tr>
</tbody>
</table>

46% of new cancer cases are diagnosed in those younger than 65.


Predicted number of new cancer cases in 2014 by type

<table>
<thead>
<tr>
<th>Type</th>
<th>Number</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Breast</td>
<td>235,030</td>
<td>14.1%</td>
</tr>
<tr>
<td>Prostate</td>
<td>233,000</td>
<td>14.0%</td>
</tr>
<tr>
<td>Lung</td>
<td>224,210</td>
<td>13.9%</td>
</tr>
<tr>
<td>Colon</td>
<td>96,830</td>
<td>6.0%</td>
</tr>
<tr>
<td>Skin</td>
<td>81,220</td>
<td>5.0%</td>
</tr>
<tr>
<td>Bladder</td>
<td>74,690</td>
<td>4.7%</td>
</tr>
<tr>
<td>Non-Hodgkin's lymphoma</td>
<td>70,800</td>
<td>4.3%</td>
</tr>
<tr>
<td>Kidney</td>
<td>63,980</td>
<td>4.0%</td>
</tr>
<tr>
<td>Thyroid</td>
<td>62,980</td>
<td>4.0%</td>
</tr>
<tr>
<td>Uterine</td>
<td>52,630</td>
<td>3.2%</td>
</tr>
<tr>
<td>Leukemia</td>
<td>52,380</td>
<td>3.1%</td>
</tr>
<tr>
<td>Pancreatic</td>
<td>46,420</td>
<td>2.8%</td>
</tr>
<tr>
<td>Colorectal</td>
<td>40,000</td>
<td>2.4%</td>
</tr>
<tr>
<td>Liver</td>
<td>33,190</td>
<td>2.0%</td>
</tr>
<tr>
<td>Brain</td>
<td>23,380</td>
<td>1.4%</td>
</tr>
<tr>
<td>Ovarian</td>
<td>21,980</td>
<td>1.3%</td>
</tr>
<tr>
<td>Esophagus</td>
<td>18,170</td>
<td>1.1%</td>
</tr>
<tr>
<td>Cervical</td>
<td>12,360</td>
<td>0.7%</td>
</tr>
<tr>
<td>Hodgkin's lymphoma</td>
<td>9,190</td>
<td>0.6%</td>
</tr>
<tr>
<td>Bone</td>
<td>3,020</td>
<td>0.2%</td>
</tr>
<tr>
<td>Other</td>
<td>210,080</td>
<td>12.6%</td>
</tr>
</tbody>
</table>

1,665,540 100%


IN THEIR OWN WORDS

It can happen to anyone:

“I wish I would have performed regular breast exams. I thought it was an old-person’s disease, but the truth is it can happen at any age.”

“[I wish I would have] had a colonoscopy at age 50.”

“Make sure to have your doctor order a PSA blood test at the age of 40 to 50. Early detection is the key!”

“At the time, I looked up everything I could online. I couldn’t find many people who had been diagnosed that young, so that was discouraging.”
LIFE AFTER CANCER

Nearly half of survivors face less physical strength after treatment

Regardless of age, gender or type of cancer, those who receive a cancer diagnosis face a lifetime of physical and financial challenges. When cancer survivors were asked about their condition following treatment:

- 44% had less physical strength.
- 31% were less financially secure.
- 24% faced reduced career prospects.

Attitudes and perceptions after cancer treatment

<table>
<thead>
<tr>
<th>Physical Strength</th>
<th>44%</th>
<th>20%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Financial Security</td>
<td>31%</td>
<td>13%</td>
</tr>
<tr>
<td>Career Prospects</td>
<td>24%</td>
<td>6%</td>
</tr>
</tbody>
</table>

n=400


IN THEIR OWN WORDS

Work challenges:

“If I had it to do over again, I would not try to work while I had treatments. I think you need to save all your strength for chemo and side effects.”

“I would not have waited a few months for the surgery while work demands prevented the surgery. I think that may have led to the spread beyond the margins.”

“I think I would have taken more time off work during my treatment and recovery.”

“Forget about work and get a medical leave. Don’t let your employer tell you to take a family leave. Get a medical leave!”

“I did have a lot of fatigue afterwards so I had to take time off from work. You just have to take one day at a time and not rush into anything.”
Nearly all survivors find unexpected positive impacts

Many survivors note unforeseen and positive changes in their life outlook, priorities, family relationships and emotional strength.

Nearly nine in ten survivors (85%) expressed at least one lasting positive impact on their life following their treatment, including a more positive attitude and outlook toward life (57%), greater focus on eating healthier (54%), being more in touch with their spirituality (48%), greater emotional strength (47%) and better relationships with family members (46%). In fact, nearly one-third (30%) feel that at least one aspect of their life or outlook was “much better” than before the diagnosis.

**Attitudes and perceptions after cancer treatment**

<table>
<thead>
<tr>
<th></th>
<th>BETTER</th>
<th>WORSE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Positive attitude/outlook toward life</td>
<td>57%</td>
<td>11%</td>
</tr>
<tr>
<td>Attention to eating healthy foods</td>
<td>54%</td>
<td>3%</td>
</tr>
<tr>
<td>In touch with spirituality</td>
<td>48%</td>
<td>5%</td>
</tr>
<tr>
<td>Overall emotional strength</td>
<td>47%</td>
<td>17%</td>
</tr>
<tr>
<td>Relationship with family</td>
<td>46%</td>
<td>7%</td>
</tr>
<tr>
<td>Ability to manage stress</td>
<td>35%</td>
<td>18%</td>
</tr>
<tr>
<td>Regular exercise</td>
<td>35%</td>
<td>18%</td>
</tr>
</tbody>
</table>

**85%** Expressed at least one positive lasting impact

n=400

LIFE AFTER CANCER

Following treatment, living a healthy lifestyle becomes more important

Across all ages, genders and cancer stages, survivors describe a change in their life’s priorities after treatment, including a greater emphasis on healthy living, spirituality and friendships. Nearly half of survivors (45%) ranked living a healthy lifestyle among their top three priorities after treatment, up from about one-fourth (28%) before their diagnosis.

More than one-third (36%) ranked living a religious or spiritual life in their top three following treatment, up from 28%. Focusing on friendships rose to 33% from 27%.

Family remains priority No. 1 before and after diagnosis

Focusing on the needs of the family was the No. 1 priority before and after treatment for all survivors regardless of age, gender or cancer stage.

Life priorities before diagnosis versus after treatment

<table>
<thead>
<tr>
<th></th>
<th>BEFORE DIAGNOSIS</th>
<th></th>
<th>AFTER TREATMENT</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>PRIORITY RANKING</td>
<td>PERCENT WHO PLACED</td>
<td>PRIORITY RANKING</td>
<td>PERCENT WHO PLACED</td>
</tr>
<tr>
<td></td>
<td>OUT OF 10</td>
<td>IN THEIR TOP 3</td>
<td>OUT OF 10</td>
<td>IN THEIR TOP 3</td>
</tr>
<tr>
<td>Focusing on the needs of the family</td>
<td>1</td>
<td>70%</td>
<td>1</td>
<td>67%</td>
</tr>
<tr>
<td>Living a healthy lifestyle</td>
<td>5</td>
<td>28%</td>
<td>2</td>
<td>45%</td>
</tr>
<tr>
<td>Enjoying leisure time</td>
<td>2</td>
<td>39%</td>
<td>3</td>
<td>41%</td>
</tr>
<tr>
<td>Living a religious or spiritual life</td>
<td>5</td>
<td>28%</td>
<td>4</td>
<td>36%</td>
</tr>
<tr>
<td>Focusing on friendships</td>
<td>7</td>
<td>27%</td>
<td>5</td>
<td>33%</td>
</tr>
<tr>
<td>Saving money for the future</td>
<td>3</td>
<td>33%</td>
<td>6</td>
<td>23%</td>
</tr>
<tr>
<td>Traveling</td>
<td>8</td>
<td>24%</td>
<td>7</td>
<td>20%</td>
</tr>
<tr>
<td>Life, health and/or supplemental insurance</td>
<td>9</td>
<td>11%</td>
<td>8</td>
<td>18%</td>
</tr>
<tr>
<td>Helping others/volunteering</td>
<td>10</td>
<td>10%</td>
<td>9</td>
<td>12%</td>
</tr>
<tr>
<td>Having a successful career</td>
<td>4</td>
<td>30%</td>
<td>10</td>
<td>5%</td>
</tr>
</tbody>
</table>

Reduced emphasis on money and careers; increased emphasis on insurance

Life priorities that became less important following treatment included saving money, which one in four (23%) ranked among their top three (down from 33%). Having a successful career also became less important, with only one in 20 (5%) ranking career success in their top three priorities (down from 30%). Overall, career became the least important priority, falling from fourth to 10th overall. But the percentage who ranked insurance considerations among the top three priorities rose from 11% to 18%.

**Financial and career priority changes before and after cancer treatment**

<table>
<thead>
<tr>
<th>Priority</th>
<th>Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td>Having a successful career</td>
<td>↓ from 4th to 10th</td>
</tr>
<tr>
<td>Saving money for the future</td>
<td>↓ from 3rd to 6th</td>
</tr>
<tr>
<td>Life, health and/or supplemental insurance</td>
<td>↑ from 9th to 8th</td>
</tr>
</tbody>
</table>

LIFE AFTER CANCER

Especially life changing for Stage III and IV survivors

More than Stage 0-II survivors, those whose cancer reached Stage III or IV report that many aspects of life were worse following cancer treatment than before diagnosis. Nearly six in ten (58%) Stage III and IV survivors reported decreased physical strength, versus less than four in ten (38%) Stage 0-II survivors. Nearly half (46%) of Stage III and IV survivors reported decreased financial security, versus one-quarter (26%) of Stage 0-II survivors. And four in ten (39%) Stage III and IV survivors reported decreased career prospects, versus just two in ten (19%) Stage 0-II survivors.

Attitudes and perceptions that are worse after treatment for Stage III and IV versus Stage 0-II

Be proactive about your health—cancer can happen to anyone

Don’t fall into the trap of believing that you won’t get cancer. About one-half of men and about one-third of women will develop cancer at some point in their lifetime.8

Getting regular checkups and cancer screenings will increase the chances that any cancer would be diagnosed at an early, treatable stage. Pay attention to warning signs and seek an expert opinion as soon as you notice anything suspicious.

• To learn more about cancer signs and symptoms, visit the American Cancer Society website at Cancer.org.

Understand your risk and take steps to reduce it

Some cancer diagnoses are attributable to genetics, but many cases develop because of unhealthy habits and behaviors. According to the American Cancer Society, “more than half of all cancer deaths could be prevented by making healthy choices like not smoking, staying at a healthy weight, eating right, keeping active and getting recommended screening tests.”9

• For more information about how to help lower your chances of getting cancer, plus what screening tests the American Cancer Society recommends—and when—visit Cancer.org.

Prepare financially for a diagnosis—just in case

Consider what options you would use to pay for treatment and associated expenses if the worst does happen. Find out what your current insurance will—and will not—cover. Investigate supplemental health insurance policies that provide insurance coverage specifically for cancer treatment.

• Remember, if you decide to add supplemental insurance, don’t wait until you are diagnosed, because you will almost certainly no longer qualify for coverage.

Heed the lessons learned by cancer survivors

Stay positive and tap into the many available resources, including family, friends, information sources like your physicians and the internet, and service organizations such as the American Cancer Society. Listen to your doctors, but don’t be afraid to ask questions. Play an active role in your own treatment and care. Above all, recognize that your life will undergo many changes.

• Accept negative changes and find ways to work around them. Watch for and embrace the positive changes many survivors report experiencing.
About the Washington National Institute for Wellness Solutions

The Institute for Wellness Solutions is Washington National’s research and consumer education program. The organization sponsors studies and supports awareness campaigns to help Americans meet the challenges of critical illnesses. Specifically, the institute provides insight and practical advice about:

- Illness prevention and wellness.
- Illness care and treatment.
- Managing the total costs—financial and personal—of critical illnesses.

Since 1911, Washington National has helped Americans protect themselves and their families from the financial hardship that often comes with critical illnesses, accidents and loss of life. The company remains dedicated to helping middle-income Americans who work hard and want to protect themselves and their loved ones.

Learn more
For more information about the Washington National Institute for Wellness Solutions, visit WNInstituteforWellness.com.

Washington National partners with independent insurance agents to serve individuals and families nationwide. For more information, visit WashingtonNational.com.

Supplemental insurance policies are limited-benefit policies that have limitations and exclusions. For costs and complete details, contact Washington National.

ENDNOTES
4 No quotas were imposed given the relatively low panel incidence of the population being surveyed, although the final sample reflects a mix of ages, incomes, regions and gender.
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