

JOURNAL ARTICLE

# Socioeconomic driven disparities in neuro-oncology

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*Neuro-Oncology Practice*, Volume 11, Issue 5, October 2024, Pages 511–512,  
<https://doi.org/10.1093/nop/npae071>

**Published:** 07 August 2024    **Article history** ▼

## Extract

Addressing the need for more equitable neuro-oncology care requires attention to existing disparities in neuro-oncologic care journey and outcomes. This is particularly important among frail patients with adverse psychosocial and environmental factors.

Growing evidence supports a clear correlation between psychosocial and economic factors and disease outcomes in cancer patients. Recently, an increasing attention on this issue has been also dedicated in neurooncological patients, but research data analyzing the impact of socioeconomic factors on prognosis reported controversial data and inconclusive results.

However, literature data specifically addressing economic factors in neurooncology is scarce and affected by several methodological limits, with large heterogeneity of financial toxicity and economic status methods of assessment.

The term financial toxicity (FT) has been utilized in the last decades to highlight the impact that the financial burden of care may have on patients quality of life and access to optimal cancer care.<sup>1</sup>

But, currently, standardized measures to better understand the multidimensionality of FT are lacking. Several factors have been reported to influence financial burden in cancer patients. Among them, not only income but also age, race and ethnicity, lower educational level, and change in job status may affect financial burden with negative effects on the well-being and quality of life of patients and their families. Also, treatment adherence and equitable access to cancer care may be influenced by financial distress.

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