



## The 65th ASH Annual Meeting Abstracts

**ONLINE PUBLICATION ONLY****901.HEALTH SERVICES AND QUALITY IMPROVEMENT - NON-MALIGNANT CONDITIONS****Financial Toxicity in the Spanish Speaking Population**Elisa Quiroz, MD<sup>1</sup>, Alberto Godinez, MD<sup>2</sup><sup>1</sup>Department of Hematology and Oncology, Scripps Prebys Cancer Center, San Diego, CA<sup>2</sup>Internal Medicine Residency, San Ysidro Health, San Diego, CA

Advances in therapy have significantly improved cancer survival outcomes but with a harmful patient consequence: financial toxicity. Financial toxicity consists of a patient's many economic burdens from cancer. The long-term research goal that this study will contribute to is to develop culturally appropriate and effective patient navigation resources and psychosocial support resources for interventions to increase cancer care.

**Eligibility**

Participant must be 18 years of age or older at the time of study participation, able to read and speak Spanish, have diagnosis of cancer within the past 2 years or be on active treatment for their cancer; all other criteria are subject to change.

**Methods**

This is a prospective observational study of cancer patients and survivors, with participants to be recruited from Scripps MD Anderson Cancer Center. Participating clinics will be screened in the electronic medical records.

Individuals who express that they would like to participate in the survey study will receive the study packet with the consent statement and baseline survey questions. Study participants will also be invited to participate in the patient navigation portion of the study.

Participants who are not active on the MyScripps patient portal will be invited to join the patient navigation portion of the study. Those elect to participate will be provided a device if they do not have their own.

They will undergo a follow-up survey during a range from 4 months to 9 months from the initial survey date. Those participating in the patient navigation portion of the study will be contacted by the navigation team.

**Statistics**

We plan to enroll N= 80 Spanish-speaking patients in the survey study. For correlation testing, we hypothesize a moderate effect size (correlation = 0.32) for the association between the primary outcome measure and the baseline Hope State score.

**Analysis**

The primary outcome measure is financial toxicity, measured using the ENRICH instrument at baseline. The primary predictor is the baseline Hope State score. This modeled association is of primary interest.

**Disclosures** No relevant conflicts of interest to declare.

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