



Researching Oral vs. IV Breast Cancer Treatment: How Treatment Delivery Affects Everyday Life

About This Study

The Susan G. Komen® [Center for Applied Research](#) and [Center for Public Policy](#) collaborated to explore how different breast cancer treatment methods affect people’s daily lives — including their experiences with side effects, ability to work and ability to care for family.

The study surveyed **147 people** with early stage and metastatic breast cancer (MBC) about their experiences with two methods of treatment delivery:



IV treatment:

Medication delivered through a vein, typically at an infusion center



Oral treatment:

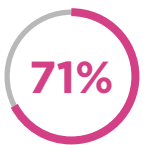
Medication taken by mouth, at home (pills or liquids)

What We Found

Across nearly every measure, **people receiving IV treatment reported a significantly greater negative impact on their daily lives** than people receiving oral treatment.

Side Effects

Overall, people on IV treatment reported a higher impact from side effects than those on oral treatment.



of people on IV treatment reported a high side effect burden

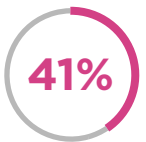


of people on oral treatment reported a high side effect burden

“I lost my hair with IV treatments, I was physically sick after IV treatments. I appear to be a ‘normal’ person on my oral treatments.” - Study Participant

Work & Productivity

People on IV treatment were more than three times as likely as people on oral treatment to say their treatment had a big impact on productivity at work or school.



of people on IV treatment reported a high impact on work or school

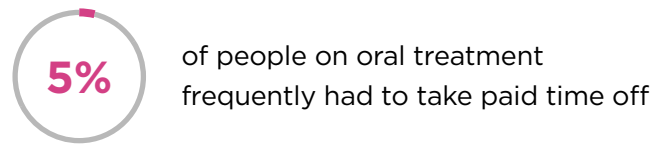
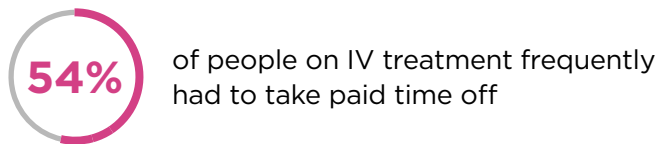


of people on oral treatment reported a high impact on work or school

“Oral treatment did not require leave from my work... and so has been far less invasive in my daily life.” - Study Participant

Time Away From Work

People on IV treatment reported having to take paid and unpaid time off work more frequently, compared to people on oral treatment.

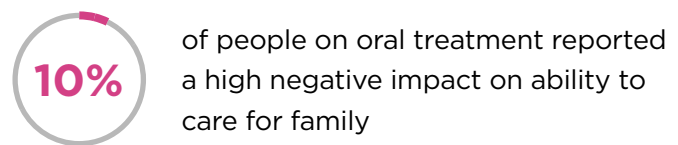
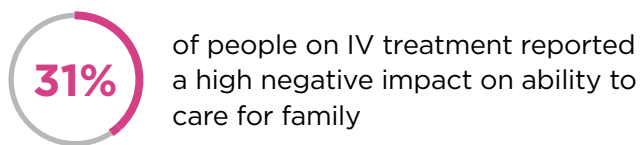


33% of people on IV treatment also frequently took unpaid time off, compared to 9% on oral treatment.

“Oral treatment can be done at home, no missing work, or having to schedule.” - Study Participant

Family & Caregiving

People on IV treatment were about three times as likely as people on oral treatment to say their treatment had a negative impact on their ability to care for or meet the needs of their families.



“[With oral treatment], I don’t have to miss work or time with my family.” - Study Participant

What This Means

For many people with breast cancer, having access to oral treatment isn’t just about convenience — it’s about being able to stay employed, remain present for their families. But not everyone has that access.

Insurance coverage for oral cancer medications varies widely. In some cases, patients face significantly higher out-of-pocket costs for oral treatments than they would for IV treatment administered in a clinical setting — even when oral medication is medically appropriate and preferred.

Oral parity laws require insurers to cover oral cancer treatments at the same level as IV treatments. Currently, 44 states have passed legislation to create parity in coverage of oral and IV treatments, Idaho doing so most recently in early 2026 with the help of information from this study. Federal legislation, the Cancer Drug Parity Act, is pending action in the 119th Congress.

How You Can Help

Komen is working to pass legislation that ensures every person with breast cancer can access the treatment that best fits their life — not just what their insurance makes easiest.

To support equitable access to oral breast cancer treatments and learn about current legislative efforts, [visit **komen.org/advocacy**](https://www.komen.org/advocacy).