Reference:	FOI.20915.26
Subject:	Medical cannabis
Date of Request:	2 July 2026

Requested:

Since medical cannabis was rescheduled to allow prescription in November 2018:

1. The total number of prescriptions issued on the NHS for cannabis-based products for medicinal use (CBPMs), broken down by year and, if possible, by product (e.g. Sativex, Epidyolex, unlicensed CBPMs).

2. The total health board expenditure on these prescriptions, broken down by year.

3. The number of patient applications or referrals for NHS-funded medical cannabis that were approved versus declined, broken down by year, if this data is held.

4. The medical conditions for which these prescriptions were issued, if recorded in a way that can be disclosed without identifying individuals (e.g. by condition category: chronic pain, epilepsy, multiple sclerosis, chemotherapy-induced nausea, other).

Response:

Hywel Dda University Health Board (UHB) is unable to provide you with all of the information requested for question 1 and 4, as it is estimated that the cost of answering your request would exceed the "appropriate limit" as stated in the Freedom of Information Act 2000 (Appropriate Limit and Fees) Regulations 2004. The "appropriate limit" represents the estimated cost of one person spending 18 hours (or 2 ½ working days) in determining whether the UHB holds the information, and locating, retrieving and extracting the information.

Not all of the information requested for question 1, specifically for the 2018/19 and 2019/20 financial years is available, as Primary Care prescriptions at this time were not recorded centrally due to a different system being in use at this time. The UHB would need to undertake a manual trawl of all Primary Care prescriptions for the 2018/19 and 2019/20 financial years, to identify any information that may fulfil this part of your request.

Furthermore, in respect of question 4, not all of the information requested is provided. Medical conditions are not indicated on a patient's prescription. Therefore, in order to identify the medical conditions for which CBPMs were prescribed since November 2018, the UHB would first need to identify the patients prescribed CBPMs, before undertaking a manual trawl of their patient records to identify any information that may fulfil this part of your request, as it is not recorded centrally.

The UHB is therefore that applying an exemption under Section 12 of the Freedom of Information Act 2000 (FoIA), which provides an exemption from a public authority's obligation to comply with a request for information where the cost of compliance is estimated to exceed the appropriate limit.

However, under Section 16 of the FoIA, we are required as a public authority, to provide advice and assistance so far as it is reasonable to individuals who have made a request under the FoIA, which can include assisting a requestor to further refine their request.

Unfortunately, the UHB is unable to provide advice on how you can refine your request further. This is due to the UHB still requiring a manual trawl of prescriptions to be undertaken to identify information that may fulfil this part of your request.

Additionally, the UHB is unable to provide you with some of the requested information as there is a potential risk of identifying individuals if this was disclosed. The UHB is therefore withholding the following details under Section 40(2) of the FoIA:

- The figures in the tables for question 1 have been replaced with an asterisk (*) due to the low number of cases (less than 5)
- The information requested for question 3, is being withheld due to the low number of cases (less than 5)

It is not within the expectation of these individuals that their personal data would be released into the public domain. This information is classed as personal data of a third party. Therefore, it is being withheld in accordance with the exemption set out in section 40(2) of the FoIA, by virtue of section 40(3)(a) of the FoIA, which permits a public authority to withhold personal data other than the requestor's where the disclosure would breach Data Protection principles.

This information is protected by the Data Protection Act 2018 (DPA)/UK General Data Protection Regulations, as its disclosure would constitute unfair and unlawful processing and would be contrary to the principles and articles of the UK GDPR. This exemption is absolute and therefore, there is no requirement to apply the public interest test.

In reaching this decision, the DPA and UK GDPR define personal data as data that relates to a living individual who can be identified solely from that data or from that data and other information, which is in the possession of the data controller.

However, whilst operating in accordance with the Section 45 Freedom of Information Code of Practice, the UHB has a duty to provide advice and assistance and provides the accessible information it holds below.

1. An exemption under Section 12 of the FoIA has been applied. However, under Section 16, the UHB provides within the table below, the number of CBPM prescriptions dispensed between 1 April 2018 and 6 July 2026, broken down by financial year and by medication.

Financial Year	Sativex Medication	Epidyolex Medication
2018/19	26	0
2019/20	22	*
2020/21	242	24
2021/22	232	16
2022/23	270	15
2023/24	286	5
2024/25	305	35
2025/26	279	21
2026/27	25	*

2. The UHB provides within the table below, its total expenditure on CBPMs between 1 April 2018 and 6 July 2026, broken down by financial year.

Financial Year	Spend
2018/19	£10,800.00
2019/20	£10,098.00
2020/21	£84,526.00
2021/22	£95,504.00
2022/23	£114,228.00
2023/24	£94,822.00
2024/25	£146,020.35
2025/26	£83,760.00
2026/27	£7,500.00

3. An exemption under Section 40 of the FoIA has been applied.

4. An exemption under Section 12 of the FoIA has been applied. The UHB has conducted a search within the remit of the exemption, up to 18 hours, and provides a list of medical conditions for which CBPM prescriptions were dispensed between 1 April 2025 and 6 July 2026, within the table below.

Medical Conditions
Multiple Sclerosis
Lennox Gastaut Syndrome (epilepsy)
Pain management