

<b>Reference:</b>	FOI.16793.25
<b>Subject:</b>	Oncology medicines
<b>Date of Request:</b>	7 March 2025

**Requested:**

1. How many early-stage (non-metastatic or Stages 1-3) non-small cell lung cancer (NSCLC) patients were treated in the past 3 months with:
  - Atezolizumab (Tecentriq)
  - Durvalumab (Imfinzi)
  - Nivolumab (Opdivo)
  - Pembrolizumab (Keytruda)
  - Chemotherapy
  - Radiotherapy
  - Chemotherapy AND Radiotherapy
  - Osimertinib
  
2. How many patients were treated in the past 3 months for gastric cancer (any stage) with:
  - CAPOX (Capecitabine with Oxaliplatin)
  - FOLFOX (Folinic acid, Fluorouracil and Oxaliplatin)
  - Lonsurf (Trifluridine - tipiracil)
  - Nivolumab in combination with Platinum (Cisplatin or Oxaliplatin) and Fluoropyrimidine (5-Fluorouracil or Capecitabine)
  - Pembrolizumab in combination with Platinum (Cisplatin or Oxaliplatin) and Fluoropyrimidine (5-Fluorouracil or Capecitabine)
  - Any other systemic anti-cancer therapy
  - Palliative care only
  - Zolbetuximab (Vyloy)
  
3. How many patients were treated in the past 3 months for cancer of the gastro-oesophageal junction (any stage) with:
  - CAPOX (Capecitabine with Oxaliplatin)
  - FOLFOX (Folinic acid, Fluorouracil and Oxaliplatin)
  - Lonsurf (Trifluridine - tipiracil)
  - Nivolumab in combination with Platinum (Cisplatin or Oxaliplatin) and Fluoropyrimidine (5-Fluorouracil or Capecitabine)
  - Pembrolizumab in combination with Platinum (Cisplatin or Oxaliplatin) and Fluoropyrimidine (5-Fluorouracil or Capecitabine)
  - Zolbetuximab (Vyloy)
  - Any other systemic anti-cancer therapy
  - Palliative care only
  
4. How many patients were treated in the last 3 months with any systemic anti-cancer therapies for Gastric cancer or cancer of the Gastro-Oesophageal Junction?
  
5. How many patients has your trust treated in the last 3 months with Pembrolizumab for stage II Melanoma?

**Response:**

Hywel Dda University Health Board (UHB) is unable to provide you with the information requested for palliative care, 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 and the Data Protection (Appropriate Limit and Fees) Regulations 2004. The “appropriate limit” represents the estimated cost of one person spending 18 hours (or 2½ working days) in determining whether the UHB holds the information, and locating, retrieving and extracting the information.

In order to provide you with the data requested in questions 2 and 3 for palliative care, the UHB would need to undertake a manual trawl of the medical records of patients that are receiving palliative care, to identify any information that would fulfil your request, as this is not recorded centrally.

Additionally, the UHB is unable to provide the information requested for question 5, as this information is not recorded centrally on the ChemoCare system. Therefore, a manual trawl of cancer patient records would be required to fulfil this part of your request.

The UHB is therefore 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, the UHB has a duty to provide advice and assistance. Therefore, the UHB provides the accessible information it holds below.

Where the figures in the tables have been replaced with an asterisk (\*), the UHB is unable to provide you with the exact number of patients due to the low numbers of cases (less than 5), as there is a potential risk of identifying individuals if this was disclosed. The UHB is therefore withholding this detail under Section 40(2) of the FoIA. 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.

1. The UHB provides, within the table below, the number of early-stage Non-Small Cell Lung Cancer (NSCLC) patients that have received the treatments listed, as recorded on the ChemoCare system, during the period 1 December 2024 to 28 February 2025.

<b>Treatment</b>	<b>Number</b>
Atezolizumab (Tecentriq)	*
Durvalumab (Imfinzi)	*
Nivolumab (Opdivo)	0
Pembrolizumab (Keytruda)	0
Chemotherapy	6
Radiotherapy	**Not held
Chemotherapy AND Radiotherapy	0
Osimertinib	*

\*\*The UHB regrets to inform you that it does not hold the information requested for Radiotherapy. The UHB's patients that require Radiotherapy are seen and treated in Singleton Hospital, within Swansea Bay University Health Board (SBUHB) and are managed by them.

Therefore, we recommend that you redirect this part of your request to the Freedom of Information Team at SBUHB, who may be able to help you further. The contact details are as follows:

[FOIA.Requests@wales.nhs.uk](mailto:FOIA.Requests@wales.nhs.uk) or alternatively, you can contact: FOIA Team, Swansea Bay University Health Board, Health Board Headquarters, 1 Talbot Gateway, Port Talbot, SA12 7BR.

- The UHB provides, within the table below, the number of gastric cancer patients that have received the treatments listed, as recorded on the ChemoCare system, during the period 1 December 2024 to 28 February 2025

Treatment	Number
CAPOX (Capecitabine with Oxaliplatin)	0
FOLFOX (Folinic acid, Fluorouracil and Oxaliplatin)	*
Lonsurf (Trifluridine - tipiracil)	0
Nivolumab in combination with Platinum (Cisplatin or Oxaliplatin) and Fluoropyrimidine (5-Fluorouracil or Capecitabine)	*
Pembrolizumab in combination with Platinum (Cisplatin or Oxaliplatin) and Fluoropyrimidine (5-Fluorouracil or Capecitabine)	*
Any other systemic anti-cancer therapy	*
Palliative care only	Section 12 exemption applied
Zolbetuximab (Vyloy)	0

- The UHB provides, within the table below, the number of gastro-oesophageal junction cancer patients that have received the treatments listed, as recorded on the ChemoCare system, during the period 1 December 2024 to 28 February 2025.

Treatment	Number
CAPOX (Capecitabine with Oxaliplatin)	*
FOLFOX (Folinic acid, Fluorouracil and Oxaliplatin)	*
Lonsurf (Trifluridine - tipiracil)	0
Nivolumab in combination with Platinum (Cisplatin or Oxaliplatin) and Fluoropyrimidine (5-Fluorouracil or Capecitabine)	*
Pembrolizumab in combination with Platinum (Cisplatin or Oxaliplatin) and Fluoropyrimidine (5-Fluorouracil or Capecitabine)	*
Zolbetuximab (Vyloy)	0
Any other systemic anti-cancer therapy	*
Palliative care only	Section 12 exemption applied

- The UHB confirms that twelve (12) gastric cancer and gastro-oesophageal junction cancer patients were treated with any systemic anti-cancer therapies, during the period 1 December 2024 to 28 February 2025.
- Section 12 exemption applied.