

Reference:	FOI.3627.20
Subject:	Psoriasis and Psoriatic Arthritis
Date of Request:	21 July 2020

Requested:

1. Please detail the number of patients currently prescribed apremilast with a current primary diagnosis of: a) Psoriasis b) Psoriatic Arthritis?

Psoriasis	Psoriatic Arthritis

2. Of the patients prescribed apremilast in the last 12 months for Psoriasis and Psoriatic Arthritis, what number of patients received treatment with targeted small molecules or biologic therapies* prior to beginning treatment with apremilast? (*See annex 1 for a list of small molecule/biologic therapies)

Psoriasis	Psoriatic Arthritis

3. How many small molecule- and/or biologic-naive patients in the Trust are currently receiving a conventional non-biologic systemic therapy for Psoriasis or a conventional non-biologic disease-modifying anti-rheumatic drug (DMARD) for Psoriatic Arthritis? (e.g. methotrexate)

Therapy	No. of patients receiving the specified therapy	
	Psoriasis	Psoriatic Arthritis
Systemic therapies		
Disease-modifying anti-rheumatic drugs (DMARDs)		

4. Is CCG prior-approval required for the prescribing of apremilast? Y/N.
If Yes, please tick the system you use: Blueteq /Other .
5. If other, what system do you use?
6. Is apremilast listed individually or grouped with biologic therapies on the prior-approval form for Psoriasis and Psoriatic Arthritis?
Psoriasis: Individually grouped **Psoriatic Arthritis:** Individually grouped .
7. Please provide the wording used on the CCG's prior-approval form for the prescribing of apremilast.

	Psoriasis	Psoriatic Arthritis
Please provide the wording used on the CCG's prior-approval form for the prescribing of apremilast		

Annex 1

Abatacept (Orencia®)
Adalimumab (Amgevita®, Humira®, Hyrimoz® or Imraldi®)
Arodalumab (Siliq®)
Aertolizumab (Cimzia®)
Atanercept (Benepali®)
Auselkumab (Tremfya®)
Infliximab (Remicade®)
Ixekizumab (Taltz®)
Risankizumab (Skyrizi®)
Secukinumab (Cosentyx®)
Tildrakizumab (Ilumya®)
Tofacitinib (Xeljanz®)
Ustekinumab (Stelara®)

Response:

Hywel Dda University Health Board (UHB) is unable to provide you with the information requested as it is estimated that the cost of answering your request would exceed the “appropriate level” as stated in the Freedom of Information (Fees and Appropriate Limit) Regulations 2004. The “appropriate level” 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.

In order to provide you with the requested information, the UHB would need to undertake a manual trawl of all patient records, to identify any information that fulfils your request.

The UHB is therefore applying an exemption under Section 12 of the Freedom of Information Act 2000 (FOI), 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.