

<b>Reference:</b>	FOI.8422.22
<b>Subject:</b>	Targeted therapies in blood-related cancers
<b>Date of Request:</b>	8 March 2022

**Requested:**

Could you please tell me how many patients have you treated in the last 3 months for Multiple Myeloma? Further, how many have received the following treatments?

<b>Treatment</b>	<b>Patients in last 3 months</b>
Bortezomib [Velcade] and Dexamethasone	
Bortezomib [Velcade], Thalidomide and Dexamethasone [known as VTD]	
Bortezomib [Velcade], Cyclophosphamide/Melphalan and Dexamethasone/Prednisolone [known as VCD or VMP]	
Lenalidomide [Revlimid] monotherapy	
Lenalidomide [Revlimid] and Dexamethasone	
Lenalidomide [Revlimid], Bortezomib [Velcade] and Dexamethasone	
Lenalidomide [Revlimid], Melphalan and Prednisolone	
Thalidomide, Cyclophosphamide/Melphalan, and Dexamethasone/Prednisolone [known as MPT or CTD]	
Bortezomib [Velcade] monotherapy	
Carfilzomib [Kyprolis] and Dexamethasone	
Carfilzomib [Kyprolis], Lenalidomide [Revlimid], and Dexamethasone [known as KRD]	
Daratumumab [Darzalex], Velcade [Bortezomib] and Dexamethasone [known as DVD]	
Daratumumab [Darzalex], Velcade [Bortezomib], Thalidomide and Dexamethasone [known as Dara-VTd]	
Daratumumab [Darzalex], Lenalidomide [Revlimid] and Dexamethasone	
Daratumumab [Darzalex], Pomalidomide [Imnovid] and Dexamethasone (DaraPd)	
Daratumumab [Darzalex] monotherapy	
Isatuximab [Sarclisa], Pomalidomide [Imnovid] and Dexamethasone [known as IsaPd]	
Isatuximab [Sarclisa], Carfilzomib [Kyprolis] and Dexamethasone [known as IsaKd]	
Ixazomib [Ninlaro], Lenalidomide [Revlimid] and Dexamethasone [known as IRD]	
Pomalidomide [Imnovid] and Dexamethasone	
Panobinostat [Farydak], Bortezomib [Velcade] and Dexamethasone	
Any other systemic anti-cancer treatment	

**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 limit” as stated in the Freedom of Information and Data Protection (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.

The ChemoCare Team, which holds a central record of cancer treatments, is based within Swansea Bay University Health Board (SBUHB). In order to provide you with the information requested, the UHB would be required to conduct a manual trawl of all cancer patients’ medical records, to establish the type of cancer diagnosed and therapies used to treat the patients. It is estimated that conducting this search would take longer than the 18 hours ‘appropriate limit’ as stated within the Freedom of Information Act 2000 (FoIA).

The UHB is therefore applying an exemption under Section 12 of the 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 FoIA. We therefore recommend that you redirect your request to the Freedom of Information Team in SBUHB, who may be able to help you with your enquiry. 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.