

Reference:	FOI.1589.19
Subject:	Treatment of various conditions
Date of Request:	13 September 2019

Requested

1. Does your trust treat Hereditary angioedema HAE? [Yes/No]
2. In the last 6 months, how many patients with Hereditary angioedema (HAE) have been treated with,
 - Berint
 - Cinryze
 - Firazyr
 - Ruconest
 - Takhzyro
 - Tranexamic acid
 - Other
3. Does your trust treat Immune thrombocytopenia purpura ITP? [Yes/No]
4. Over the past 6 months, how many patients with persistent / chronic* Immune thrombocytopenia purpura [ITP] have you treated [include all treatments such as steroids, splenectomy, immune globulins, Rituximab and TPOs]?
5. Over the past 6 months, how many patients with persistent / chronic* Immune thrombocytopenia purpura [ITP] were new to treatment with the following;
 - Eltrombopag [Revolade]
 - Romiplostim [Nplate]
6. At what line of treatment would you currently use a TPO in an ITP patient: 4th line, 3rd line, 2nd line or 1st line.
7. Over the past 6 months, how many patients have you treated with the following; conditions and treatments. If none, please state none.

	Total patients	Eltrombopag [Revolade]	Romiplostim [Nplate]
Immune thrombocytopenia purpura [ITP]			
Chronic hepatitis C virus (HCV) infection for the treatment of thrombocytopenia, where the degree of thrombocytopenia is the main factor preventing the initiation or limiting the ability to maintain optimal interferon-based therapy			
Acquired severe aplastic anaemia (SAA) who were either refractory to prior immunosuppressive therapy or heavily pre-treated and are unsuitable for haematopoietic stem cell transplantation			
Chemotherapy induced thrombocytopenia (CIT)			
Myelodysplastic syndromes (MDS)			

*Patient has ITP for over 6 months and does not respond to standard active treatments

Response

Hywel Dda University Health Board (UHB) is unable to provide you with all of 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 (2½ working days), in determining whether the UHB holds the information, and locating, retrieving and extracting the information.

In order to provide you with all of the information being requested, the UHB would need to manually scrutinise all patient records to identify any information that would fulfil 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 for questions 2, 4, 5 and 7.

Under section 16 of the FOI, 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 FOI Act and therefore can provide you with some of the information requested.

1. The UHB confirms it does treat Hereditary Angioedema (HAE).
3. The UHB confirms it does treat Immune Thrombocytopenia Purpura (ITP).
6. The UHB confirms that a Thrombopoietin (TPO) is used as a 4th line of treatment is in an ITP patient.
7. The UHB provides, within the table below, the name and number of medication dispensed for the treatment of HAE and ITP as recorded on the pharmacy for the six (6) months preceding your request.

Name	Type	Number issued
C1-ESTERASE INHIBITOR INFUSION 1,500 units	Vial	2
ELTROMBOPAG TABLETS 25mg	Tablet	1017
ELTROMBOPAG TABLETS 50mg	Tablet	913
ROMIPLOSTIM INJECTION 250 micrograms	Vial	370
TRANEXAMIC ACID INJECTION 500mg in 5ml	Ampoule	4055