

Royal Stoke University Hospital

Data, Security and Protection Newcastle Road Stoke-on-Trent Staffordshire ST4 6QG

Email foi@uhnm.nhs.uk

Ref: FOIA Reference 2022/23-443

Date: 17th November 2022

Dear

I am writing to acknowledge receipt of your email dated 8th November 2022 requesting information under the Freedom of Information Act (2000) regarding Breast Cancer

As of 1st November 2014 University Hospitals of North Midlands NHS Trust (UHNM) manages two hospital sites – Royal Stoke University Hospital, and County Hospital (Stafford). Therefore the response below is for the two sites combined from that date where appropriate.

Q1 In the past 3 months, how many Breast Cancer patients (at any stage) were treated with?

Abemaciclib monotherapy
Aromatase inhibitor monotherapy (e.g. anastrazole, exemestane, letrozole)
Tamoxifen monotherapy
Abemaciclib + Tamoxifen

A1 We able to answer only two of the above sections:

Abemaciclib monotherapy and Abemaciclib tamoxifen.

Data is not held for hormones alone and monotherapy is normally prescribed in primary care

See below:

Abemaciclib monotherapy = 0 Aromatase inhibitor monotherapy (e.g. anastrazole, exemestane, letrozole) Tamoxifen monotherapy Abemaciclib + Tamoxifen = 0

Q2 In the past 3 months, how many early/locally advanced Breast Cancer (Stages 1 to 3B) patients were treated with?

Abemaciclib + Aromatase inhibitor (e.g. anastrazole, exemestane, letrozole) Taxane and/or Anthracycline (monotherapy or in combination) Any other active systemic anti-cancer therapy

A2 We are unable to review individual patient details for staging or triple negative status and this data is not routinely recorded in Med Oncology: section 12 exemption as detailed below:







I can neither confirm nor deny whether the information you have requested is held by the Trust in its entirety. This is because some of the information requested in this question is not held centrally, but may be recorded in individual health records. In order to confirm whether this information is held we would therefore have to individually access all individual health records within the Trust and extract the information where it is present. We therefore estimate that complying with your request is exempt under section 12 of the FOI Act: cost of compliance is excessive. The section 12 exemption applies when it is estimated a request will take in excess of 18 hours to complete. We estimate that accessing and reviewing all individual health records and then extracting relevant information would take longer than the 18 hours allowed for. In addition to the section 12 exemption the Trust is also applying section 14 (1) exemption: oppressive burden on the authority

Under section 16 of the FOI Act we are required to provide requestors with advice and assistance where possible. We would therefore like to advise you that your request is shortened what we are able to comply within the 18 hour time frame.

Abemaciclib + Aromatase inhibitor (e.g. anastrazole, exemestane, letrozole) = 0 Taxane and/or Anthracycline (monotherapy or in combination) = 79 Any other active systemic anti-cancer therapy = 43

Q3 How many patients have been treated for Triple Negative Breast Cancer (any stage) in the past 3 months with the following systemic anti-cancer therapies?

Anthracycline (e.g. doxorubicin or epirubicin) as a single agent

Atezolizumab +Nab-paclitaxel/Paclitaxel

Pembrolizumab

Sacituzumab Govitecan

Parp Inhibitors (Olaparib/Talazoparib)

Eribulin as a single agent or in combination

Capecitabine as a single agent

Platinum (e.g. carboplatin or cisplatin) as a single agent

Taxane (e.g. docetaxel, paclitaxel, nab-paclitaxel) as a single agent

Taxane and/or Anthracycline in combination

Any other active systemic anti-cancer therapy

I can neither confirm nor deny whether the information you have requested is held by the Trust in its entirety. This is because some of the information requested in this question is not held centrally, but may be recorded in individual health records. In order to confirm whether this information is held we would therefore have to individually access all individual health records (300 patients notes) within the Trust and extract the information where it is present. We therefore estimate that complying with your request is exempt under section 12 of the FOI Act: cost of compliance is excessive. The section 12 exemption applies when it is estimated a request will take in excess of 18 hours to complete. We estimate that accessing and reviewing all individual health records and then extracting relevant information would take longer than the 18 hours allowed for.

In addition to the section 12 exemption the Trust is also applying section 14 (1) exemption: oppressive burden on the authority







*Please note that any individuals identified do not give consent for their personal data to be processed for the purposes of direct marketing.

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An anonymised copy of this request can be found on the Trust's disclosure log, please note that all requests can be found at the following link: http://www.uhnm.nhs.uk/aboutus/Statutory-Policies-and-Procedures/Pages/Freedom-of-Information-Disclosure-Log.aspx

This letter confirms the completion of this request. A log of this request and a copy of this letter will be held by the Trust.

If you have any queries related to the response provided please in the first instance contact my office.

Should you have a complaint about the response or the handling of your request, please also contact my office to request a review of this. If having exhausted the Trust's FOIA complaints process you are still not satisfied, you are entitled to approach the Information Commissioner's Office (ICO) and request an assessment of the manner in which the Trust has managed your request.

The Information Commissioner may be contacted at:

Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire SK9 5AF or via www.ico.org.uk.

If following review of the responses I can be of any further assistance please contact my secretary on 01782 671612.

Yours,

Leah Carlisle

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Head of Data, Security & Protection/ Data Protection Officer



