

Ref: FOI-047 -202425-Clinical Data and Processes- AML

Date: 13th May 2024

Email foi@uhnm.nhs.uk

Dear Sir/ Madam

I am writing to acknowledge receipt of your email dated 16th April 2024 requesting information under the Freedom of Information Act (2000) regarding acute myeloid leukaemia

As of 1st November 2014 University Hospitals of North Midlands NHS Trust (UHM) 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 Please see below a Freedom of Information request made by OPEN Health. Please answer the questions with regards to NHS patients, i.e., excluding patients that received treatment as part of clinical trials or private healthcare.

1. Do you treat patients with acute myeloid leukaemia (AML) in your Trust?

Answer:

If yes, please proceed to Question 3, if no, please answer Question 2

A1 Yes

Q2 Where do patients diagnosed with AML in your Trust receive treatment?

A2 Not applicable

Q3 Please complete the table below with how many newly diagnosed patients with AML have started first-line treatment with each of the following therapies during the 6-month period October 2023 to March 2024?

- Azacitidine monotherapy
- Low dose cytarabine (LoDAC) monotherapy
- Venetoclax + azacitidine
- Venetoclax + LoDAC
- Ivosidenib
- Intensive chemotherapy-based regimen
 - Examples include: cytarabine and daunorubicin, idarubicin, fludarabine, mitoxantrone, etoposide (VP-16), 6-thioguanine (6-TG), methotrexate (MTX) or 6-mercaptopurine (6-MP), gemtuzumab ozogamicin with daunorubicin cytarabine, or FLAG-Ida (fludarabine, cytarabine, granulocyte-colony stimulating factor and idarubicin)

- Best supportive care
- Other
 - Do not include prophylactic therapies such as GCSF, anti-fungals, antihistamines, anti-nauseants

Note: this should only include patients with AML who have started first-line treatment during the 6-month window

Answer:

Treatment option	Number of newly diagnosed patients with AML starting first line treatment during the 6-month period October 2023 to March 2024
Azacitidine monotherapy	
(LoDAC) monotherapy	
Venetoclax + azacitidine	
Venetoclax + LoDAC	
Ivosidenib	
Intensive chemotherapy-based regimen	
Best supportive care	
Other	

A3 See below:

Treatment option	Number of newly diagnosed patients with AML starting first line treatment during the 6-month period October 2023 to March 2024
Azacitidine monotherapy	0
(LoDAC) monotherapy	0
Venetoclax + azacitidine	8
Venetoclax + LoDAC	0
Ivosidenib	0

*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.

Yours,



Rachel Montinaro
Data Security and Protection Manager - Records