

Ref FOI17 103  
Date 11 April 2017

Dear Sir/Madam

**Request for information under the Freedom of Information Act 2000**

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Please find below/attached the Isle of Wight NHS Trust's response to your request.

Please provide the following information

**Within your health trust how many patients are currently [within the past 6 months] being treated with a chemotherapy agent [not including surgery/radiotherapy only];**

**All Non-Small Cell Lung Cancer patients  
Patients with Non-Small Cell Lung Cancer (NSCLC) Stage IIIB\*\*/IV\*\* (Stage 3b/4)**

**Of the NSCLC patients, please state the number of patients currently [within the past 6 months] being treated with the following therapies;**

<b>Treatment</b>	<b>Number of Patients</b>
<b>Afatinib (Giotrif)</b>	<b>0</b>
<b>Ceritinib (Zykadia)</b>	<b>0</b>
<b>Crizotinib (Xalkori)</b>	<b>0</b>
<b>Erlotinib (Tarceva)</b>	<b>1</b>
<b>Gefitinib (Iressa)</b>	<b>3</b>
<b>Nitendaninb + docetaxel</b>	<b>1</b>
<b>Nivolumab (Opdivo)</b>	<b>0</b>
<b>Pemetrexed (Alimta) mono or in combination with carboplatin / cisplatin</b>	<b>9</b>
<b>Pembrolizumab (Keytruda)</b>	<b>1</b>
<b>Gemcitabine mono or in combination with carboplatin / cisplatin</b>	<b>6</b>
<b>Paclitaxel mono or in combination with carboplatin / cisplatin</b>	<b>0</b>
<b>Doxetaxel mono or in combination with carboplatin / cisplatin</b>	<b>0</b>

Vinorelbine [or other Vinka alkaloid] mono or in combination with carboplatin / Cisplatin	1
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If your trust does not treat these cancers and you refer your patients to another trust, please state which trust?

**RESPONSE:-** We do not have full facilities and work with Southampton (Wessex) with visiting consultants and as much treatment as can be locally provided.

Within your health trust how many patients are currently [within the past 6 months] diagnosed with Urothelial cancer?

**RESPONSE:-** Outpatient diagnoses are not coded and therefore cannot be retrieved without case note analysis. Inpatient diagnosis is coded but not the date of the diagnosis (which would require examination of case notes) and therefore inpatient episodes during the past 6 months (completed coded months August 16 – January 17) will include patients diagnosed previous to this. Coding is not related to the morphological type of cancer but to the site and is therefore not specific to Non-small cell lung cancer, Transitional Cell Carcinoma or any other type). The numbers below include Bladder, kidney and urethra/ureter sites

The following numbers of inpatients were coded with uro-tract cancers during the 6 months period Aug-Jan 2016/17.

Month of discharge	AUG	SEP	OCT	NOV	DEC	JAN
Number inpatients coded with uro-tract cancers	21	13	30	17	18	19
Number inpatients above also coded with known mets	0	0	4	0	3	1

All Urothelial cancer (UCC, also transitional cell carcinoma or TCC) patients (TREATED or UNTREATED);

Metastatic\* or locally advanced\* Urothelial cancer (UCC, also transitional cell carcinoma or TCC) patients

Of these patients (metastatic/locally advanced UCC), please state the number of patients currently [within the past 6 months] being treated with the following therapies;

Treatment	Number of Patients
Cisplatinum single agent	
Cisplatinum in combination with another agent	3
Carboplatinum single agent	
Carboplatinum in combination with another agent	2
Any other chemo regimen without cisplatinum or carboplatinum	

\*TNM staging for metastatic Urothelial Cancer = Any T, any N, M1

**\*TNM staging for locally advanced Urothelial Cancer = Any T, N2-3, M0 or T4b, any N, M0**

**\*\*TNM staging for Stage IIIB NSCLC = Any T, N3, M0 or T4, N2, M0**

**\*\*TNM staging for Stage IV NSCLC = Any T, any N, M1**

*NB Clarity received from applicant as follows*

*This is all fine. I'd be happy to receive data in this format.*

*Further to your above reference FOI request, we require some clarity from you as follows before we can proceed.*

*We can supply information for lung cancer patients and those that have had metastases however we cannot differentiate between the stages i.e III/IV – Do you want us to go ahead on this basis?*

*Urothelial cancer is very general and includes bladder, kidneys, ureters etc. Do you want all areas or a specific area? Again we can differentiate patients with mets but not the locally advanced cancers – please advise how you wish to proceed?*

**Please note the Isle of Wight NHS Trust came into existence on the 1.4.12 therefore we do not hold information prior to this date. If you require information prior to this date please contact the Department of Health.**

**Please note that this response does not constitute as consent for direct marketing.**

**A copy of this response will be published on the Trust website.**

**We would like to bring to your attention the unique set up of the Isle of Wight NHS Trust which serves a resident population of 140,000 with a substantial influx of tourists during the summer months. The Trust provides acute, ambulance, community, maternity, mental health services on the Isle of Wight. As the only fully integrated service provider in England with this unique range of services comparisons with other service providers are not always straightforward and may result in higher or lower reporting data.**

This letter also confirms the completion of this request. A log of this request will be held on a database by the Trust. All hard copy correspondence relating to this request will be held for one year from the date of this letter, before being confidentially destroyed.

If you are unhappy about the response you have received your first line of action should be to write and request the Trust to undertake an internal review of your application. A senior member of staff, who was not involved with your initial application, will undertake this review. If after this process you are still not satisfied with the response you receive from the Trust you can complain to the Information Commissioner at the following address:

Information Commissioner  
Wycliffe House  
Water Lane  
Wilmslow  
Cheshire  
SK9 5AF

Please do not hesitate to contact this office if you have any further questions.

Yours faithfully

Freedom of Information Team