



Ymddiriedolaeth GIG
Prifysgol Felindre
Velindre University
NHS Trust



Pencadlys Ymddiriedolaeth GIG Prifysgol Felindre
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Parc Nantgarw
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CF15 7QZ
Ffôn/Phone : (029) 20196161
<https://velindre.nhs.wales>

Date: 21st March 2025
Ref: CORP 2025 - 050

Dear xxx

Freedom of Information request: Treatment of haematology (CORP 2025 – 050)

Thank you for your request for information which the Trust received on 4th March 2025.

Your request and the Trust's response can be found in Appendix 1 below.

I trust this answers your request for information, however, should you not be satisfied with the information supplied or the process of supplying it, you have a right to complain and request a review. Please note that you must submit a request for a review within 40 days of the date of this letter.

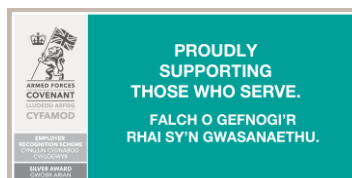
You should forward your complaint to:

Mr Ian Bevan via FOI.VUNHST@wales.nhs.uk
Head of Information Governance
Velindre University NHS Trust
2, Charnwood Court
Heol Billingsley
Parc Nantgarw
Cardiff / Caerdydd
CF15 7QZ

Should you wish to take your complaint further, if you are still unhappy with the decision after review, you can contact the:

Information Commissioner's Office - Wales
2nd Floor,
Churchill House,
Churchill Way,
Cardiff,
CF10 2HH
Telephone: 0330 414 6421
email: wales@ico.org.uk

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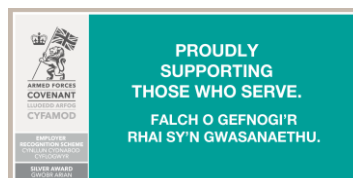


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Yours sincerely

Non Gwilym
Interim Director of Corporate Governance
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APPENDIX 1

MYELOPROLIFERATIVE DISEASES

Q1. How many patients were treated in total, regardless of diagnosis, with the following medicines in the 3 months between the start of October 2024 and end of December 2024, or latest 3-month period available?

Name of medicine	Number patients treated
1.1 Fedratinib (Inrebic)	0
1.2 Momelotinib (Omjjara)	0
1.3 Ruxolitinib (Jakavi)	0
1.4 Hydroxycarbamide	0

Q2. How many patients were treated for the following myeloproliferative diseases in the 3 months between the start of October 2024 and end of December 2024, or latest 3-month period available?

Diagnosis with ICD10 codes	Number patients treated
2.1 Polycythaemia vera ICD10 codes = D45, D450, D45.0, D45X OR morphology code = 9950/3	7
2.2 Myelofibrosis ICD10 codes = C944, C94.4 or D474, D47.4; OR morphology codes = 9931/3 or 9961/3	0
2.3 Essential thrombocythemia ICD10 code = D473, D47.3 OR morphology code = 9962/3	<6*
2.4 Myeloproliferative Disease, Chronic ICD10 code = D471, D47.1	0

*Where the figure provided is less than 6, and where simple calculations could identify fields that contain less than 6, the Trust has applied an exemption under Section 40(2) (personal data) of the Freedom of Information Act 2000. This is because the Trust believes there is a potential risk of individuals being able to be identified if the figures were disclosed.

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Q3. How many patients with **Myelofibrosis** (ICD10 codes = C944 or D474; OR morphology codes = 9931/3 or 9961/3) were treated with the following medicines in the 3 months between the start of October 2024 and end of December 2024, or latest 3-month period available?

Name of medicine	Number patients treated
3.1 Ruxolitinib (Jakavi)	0
3.2 Hydroxycarbamide	0

Q4. How many patients with **Polycythaemia Vera** (ICD10 codes = D45, D450, D45.0, D45X OR morphology code = 9950/3) were treated with the following medicines in the 3 months between the start of October 2024 and end of December 2024, or latest 3-month period available?

Name of medicine	Number patients treated
4.1 Ruxolitinib (Jakavi)	0
4.2 Hydroxycarbamide	0

NON-HODGKIN'S LYMPHOMA (NHL), CHRONIC LYMPHOCYTIC LEUKAEMIA (CLL) AND ACUTE MYELOID LEUKAEMIA (AML)

Q5. How many patients were treated in total, regardless of diagnosis, with the following medicines in the 3 months between the start of October 2024 and end of December 2024, or latest 3-month period available?

Name of medicine	Number patients treated
5.1 Acalabrutinib (Calquence)	0
5.2 Ibrutinib (Imbruvica)	0
5.3 Pirtobrutinib (Jaypirca)	0
5.4 Venetoclax (Venclyxto)	0
5.5 Zanubrutinib (Brukinsa)	0
5.6 Rituximab	0
5.7 Obinutuzumab (Gazyvaro)	0

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Q6. How many patients with **Chronic Lymphocytic Leukaemia** OR **Small B-Cell Lymphoma** – ICD10 codes = C911, C91.1 OR C830, C83.0 - were treated with the following medicines in the 3 months between the start of October 2024 and end of December 2024, or latest 3-month period available?

Name of medicine	Number patients treated
6.1 Acalabrutinib (Calquence)	0
6.2 Ibrutinib (Imbruvica)	0
6.3 Pirtobrutinib (Jaypirca)	0
6.4 Venetoclax (Venclyxto)	0
6.5 Zanubrutinib (Brukinsa)	0
6.6 Obinutuzumab (Gazyvaro)	0
6.7 Rituximab	0
6.8 Bendamustine	0
6.9 Chlorambucil	0
6.10 Fludarabine	0
6.11 Cyclophosphamide	0

Q7. How many patients with **Chronic Lymphocytic Leukaemia** OR **Small B-Cell Lymphoma** were treated with the following medicines as monotherapy, or in combination, in the 3 months between the start of October 2024 and end of December 2024, or latest 3-month period available?

Name of monotherapy or combination	Number patients treated
7.1 Ibrutinib + venetoclax	0
7.2 Obinutuzumab + venetoclax	0
7.3 Zanubrutinib monotherapy / maintenance	0
7.4 Ibrutinib monotherapy / maintenance	0
7.5 Venetoclax monotherapy	0
7.6 Venetoclax + rituximab	0

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Q8. How many patients with **Mantle Cell Lymphoma** (ICD-10 code = C83.1) were treated with the following medicines, in the 3 months between the start of October 2024 and end of December 2024, or latest 3-month period available?

Name of monotherapy or combination	Number patients treated
8.1 Acalabrutinib	0
8.2 Ibrutinib	0
8.3 Zanubrutinib	0

Q9. How many patients with **Acute Myeloid Leukaemia** – ICD10 code = C920 - were treated with the following medicines in the 3 months between the start of October 2024 and end of December 2024, or latest 3-month period available?

Name of medicine	Number patients treated
9.1 Azacitidine	0
9.2 Cytarabine	0
9.3 Venetoclax (Venclyxto)	0

Q10. How many patients with **Acute Myeloid Leukaemia** were treated with the following medicines in combination, in the 3 months between the start of October 2024 and end of December 2024, or latest 3-month period available?

Name of combination	Number patients treated
10.1 Venetoclax + Azacitidine (<i>with or without posaconazole</i>)	0
10.2 Venetoclax + Cytarabine (<i>inc. V + LDAC, V + ARAC, V+ ARA-C</i>)	0

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