

FOI 2594

18/09/24

FREEDOM OF INFORMATION ACT 2000 – INFORMATION REQUEST

MYELOPROLIFERATIVE DISEASES

Request Q1:

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

Response Q1:

Name of medicine	Number patients treated
1.1 Fedratinib (Inrebic)	0
1.2 Momelotinib (Omjjara)	0
1.3 Ruxolitinib (Jakavi)	17
1.4 Hydroxycarbamide	165

Request Q2:

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

Response Q2:

Please see attached document.

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

Request 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 April 2024 and end of June 2024, or latest 3-month period available?

Response Q3:

Name of medicine	Number patients treated
3.1 Fedratinib (Inrebic)	0
3.2 Momelotinib (Omjjara)	0
3.3 Ruxolitinib (Jakavi)	Information not held
3.4 Hydroxycarbamide	Information not held
3.5 Peginterferon Alfa-2a (Pegasys)	Information not held
3.6 Ropeninterferon Alfa-2b (Besremi)	0
3.7 Epoetin alfa (Eprex, Binocrit)	0
3.8 Epoetin beta (NeoRecormon, Mircera)	0
3.9 Epoetin zeta (Retacrit)	0
3.10 Darbepoetin (Aranesp)	Information not held
3.11 No active treatment	Information not held

3.12 Allogeneic stem cell transplant

Information not held

Request Q4:

How many patients were treated with ruxolitinib (Jakavi) in combination with epoetin in the 3 months between the start of April 2024 and end of June 2024, or latest 3-month period available?

Please include all types of epoetin – epoetin alfa, epoetin beta, epoetin zeta, darbepoetin alfa

Response Q4:

Name of medicine	Number patients treated
4.0 Ruxolitinib (Jakavi) + epoetin	2

NON HODGKIN LYMPHOMA (NHL) AND CHRONIC LYMPHOCYTIC LEUKAEMIA (CLL)

Request Q5:

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

Response Q5:

Name of medicine	Number patients treated
5.1 Acalabrutinib (Calquence)	26
5.2 Ibrutinib (Imbruvica)	13
5.3 Pirtobrutinib (Jaypirca)	0
5.4 Venetoclax (Venclyxto)	6
5.5 Zanubrutinib (Brukinsa)	3

Request 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 April 2024 and end of June 2024, or latest 3-month period available?

Response Q6:

Name of medicine	Number patients treated
6.1 Acalabrutinib (Calquence)	Information not held
6.2 Ibrutinib (Imbruvica)	
6.3 Pirtobrutinib (Jaypirca)	
6.4 Venetoclax (Venclyxto)	
6.5 Zanubrutinib (Brukinsa)	

Request 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 April 2024 and end of June 2024, or latest 3-month period available?

Response Q7:

Name of monotherapy or combination	Number patients treated
7.1 Ibrutinib + venetoclax	Information not held
7.2 Obinutuzumab + venetoclax	
7.3 Acalabrutinib monotherapy / maintenance	
7.4 Zanubrutinib monotherapy / maintenance	
7.5 Ibrutinib monotherapy / maintenance	
7.6 Venetoclax monotherapy	
7.7 Venetoclax + rituximab	

MANTLE CELL LYMPHOMA

Request Q8:

How many patients with Mantle Cell Lymphoma – ICD10 code = C831, C83.1 - were treated in the 3 months between the start of April 2024 and end of June 2024, or latest 3-month period available?

Response Q8:

	Number patients treated
8.0 Treated for Mantle Cell Lymphoma	Information not held

Request Q8.1

How many patients with Mantle Cell Lymphoma were treated with the following medicines as monotherapy, or in combination, in the 3 months between the start of April 2024 and end of June 2024, or latest 3-month period available?

Response Q8.1:

Name of medicine	Number patients treated
8.1 MaxiCHOP + rituximab + high dose Cytarabine or NORDIC protocol	Information not held
8.2 Stem Cell Transplant	
8.3 Rituximab + bendamustine + cytarabine	
8.4 Rituximab + bendamustine	
8.5 Ibrutinib	
8.6 Rituximab + CHOP, Rituximab + CVP or rituximab + other chemo	
8.7 Acalabrutinib + rituximab + bendamustine	

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