

Date: Thursday, 08th September 2022
Our Ref: MB/CM FOI 5341

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Re: Freedom of Information Request FOI 5341

We are writing in response to your request submitted under the Freedom of Information Act, received in this office on 06th September 2022.

Your request was as follows:

1. How many patients in the last 12 months has the trust treated for metastatic Cholangiocarcinoma (CCA) or Acute myeloid leukaemia (AML)?
 - a. For each of AML and CCA, how many have IDH-1 mutation?
 - b. How many CCA are intrahepatic vs extrahepatic?
 - i. How many of each of these present at 2nd line? How many of these at 2nd line have IDH-1 mutation?
 - c. For AML, how many patients were not fit for intensive chemotherapy? How many of these AML patients have IDH-1 mutation?

The Walton Centre NHS Foundation Trust is a Specialist Neuroscience Tertiary Care Centre; we do not treat patients for Metastatic Cholangiocarcinoma (CCA) and Acute Myeloid Leukaemia (AML), therefore we cannot provide this information.

2. How many patients have been treated with pemigatinib (CCA), venetoclax plus azacitadine dual therapy or azacitadine monotherapy (AML)?
 - a. What is the average treatment duration for CCA patients treated with pemigatinib and AML patients treated with azacitadine dual therapy and azacitadine monotherapy? What is the preferred azacitadine product?

N/A

3. What is the real-world dosing for venetoclax (in combination with a CYP3A4)?
 - a. What is the antifungal of choice for patients treated with venetoclax?
 - b. What is the antifungal average treatment duration when used in combination with venetoclax ?
 - c) what proportion of patients are treated with an antifungal in combination with venetoclax? In what proportion of patients is the antifungal treatment stopped? In what proportion of these pts is the venetoclax dosage altered following cessation of the antifungal?

N/A

4. Do you routinely test CCA and AML patients for IDH-1 mutation?

a. If so when does the testing take place. E.g. at diagnosis or following 1st line progression? Is this done using NGS panel? Is this done using PCR testing?

b. What is the average turnaround time for these tests?

N/A

5. Who is responsible for the routine management of patients with CCA and AML?

a. Clinical oncologist / medical oncologist / specialist nurse etc?

N/A

6. How many admissions have occurred in the last 12 months for patients with CCA and AML?

a. What is their average length of stay?

b. How many of these patients were readmissions or readmitted during this time? If readmitted, can you state the main reason?

N/A

Please see our response above in [blue](#).

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All information supplied by the Trust in answering a request for information (RFI) under the Freedom of Information Act 2000 will be subject to the terms of the Re-use of Public Sector Information Regulations 2005, Statutory Instrument 2005 No. 1515 which came into effect on 1st July 2005.

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If you are dissatisfied with the handling of your request, you have the right to ask for an internal review. Internal review requests should be submitted within two months of the date of receipt of the response to your original letter and should be addressed to the Freedom of Information Office at the address above.

Please remember to quote the reference number, FOI 5341 in any future communications.

If you are not content with the outcome of the internal review, you have the right to apply directly to the Information Commissioner for a decision. The Information Commissioner can be contacted at: Information Commissioners Office, Wycliffe House, Water Lane, Wilmslow, Cheshire, SK9 5AF.

Yours sincerely

Mike Burns

Mr. Mike Burns, Executive Lead for Freedom of Information