



Ref: FOIA Reference 2023/24-830

Date: 10th April 2024

Email foi@uhn.nhs.uk

Dear

I am writing to acknowledge receipt of your email dated 4th March 2024 requesting information under the Freedom of Information Act (2000) regarding Gynaecology

On the same day we contacted you via email with the following:

To continue with your request we require clarification on the following:

Highlighted above (1iii/2 iii/3i/ii/4iii/5iii)_ what are you want including as Ovarian Pathology is not a recognised ICD10 clinical coding

'Other'- all questions -what are you referring to, as **Other** is not a recognised ICD10 clinical coding

On 19th March you replied via email with:

Many thanks for your email regarding this FOI request.

re Ovarian Pathology.

For purposes of this request relates to the following: conditions:

Ovarian torsion

Ovarian cyst rupture

Ovarian cyst accident

Ovarian haemorrhage

Ovarian haemorrhagic cyst

Re "vi. Other."

We would like any admission relating to any other diagnosis other than those listed above in i-v.

These will be any admissions other than those relating to Endometriosis, Appendicitis, Ovarian pathology, Pelvic Inflammatory Disease, Non-specific abdominal pain.'

As of 1st November 2014 University Hospitals of North Midlands NHS Trust (UHNM) 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 This FOI includes the following. Please may we have:

- 1. The number of acute admissions of women between the ages of 18 to 35 to Gynaecology, Urology or General Surgery per year from 2013 to 2023**
 - a. Of these women the number admissions per year with a diagnosis:**
 - i. Endometriosis**

- ii. Appendicitis
 - iii. Ovarian pathology (ovarian torsion, cyst rupture)
 - iv. Pelvic Inflammatory Disease
 - v. Non-specific abdominal pain
 - vi. Other
- b. Of these women and per diagnosis and speciality please can you summarise the number of those who have launched complaint through pals or equivalence
- c. Of these women and per diagnosis please can you summarise how many had readmissions related to abdominal pain after admission related to diagnostic laparoscopy.

10 year follow up data

2. Please can we have the 2013 data of number of diagnostic laparoscopies by general surgeons in women between 16 and 35.

a. Of these women please can we have the diagnosis at time of discharge in 2013 categorised as:

- i. Endometriosis
- ii. Appendicitis
- iii. Ovarian pathology (ovarian torsion, cyst rupture)
- iv. Pelvic Inflammatory Disease
- v. Non-specific abdominal pain
- vi. Other

b. For those women who were not diagnosed with endometriosis at the time of their discharge, can you provide information on how many of these patients received a new diagnosis of endometriosis in the period from 2013 to the present, following their discharge from the hospital stay that included the diagnostic laparoscopy. Where possible please include the year of diagnosis in a separate table. This could be summarised as 2016 – 17, 2018 - 40 etc.

3. Please can we have the 2013 data of number of diagnostic laparoscopies by gynaecologists in women between 16 and 35.

a. Of these women please can we have the diagnosis at time of discharge in 2013 categorised as:

- i. Endometriosis
- ii. Appendicitis
- iii. Ovarian pathology (ovarian torsion, cyst rupture)
- iv. Pelvic Inflammatory Disease
- v. Non-specific abdominal pain
- vi. Other

b. For those women who were not diagnosed with endometriosis at the time of their discharge, can you provide information on how many of these patients received a new diagnosis of endometriosis in the period from 2013 to the present, following their discharge from the hospital stay that included the diagnostic laparoscopy. Where possible please include the year of diagnosis in a separate table. This could be summarised as 2016 – 17, 2018 - 40 etc.

1-5 year follow up data

4. Please can we have the 2018 till 2023 data of number of diagnostic laparoscopies by general surgeons in women between 16 and 35.

a. Of these women please can we have the diagnosis at time of discharge categorised as:

- i. Endometriosis
 - ii. Appendicitis
 - iii. Ovarian pathology (ovarian torsion, cyst rupture)
 - iv. Pelvic Inflammatory Disease
 - v. Non-specific abdominal pain
 - vi. Other
- b. For those women who were not diagnosed with endometriosis at the time of their discharge, can you provide information on how many of these patients received a new diagnosis of endometriosis in the period from laparoscopy to the present, following their discharge from the hospital stay that included the diagnostic laparoscopy.
5. Please can we have the 2018 till 2023 data of number of diagnostic laparoscopies by gynaecologists in women between 16 and 35.
- a. Of these women please can we have the diagnosis at time of discharge categorised as:
- i. Endometriosis
 - ii. Appendicitis
 - iii. Ovarian pathology (ovarian torsion, cyst rupture)
 - iv. Pelvic Inflammatory Disease
 - v. Non-specific abdominal pain
 - vi. Other
- b. For those women who were not diagnosed with endometriosis at the time of their discharge, can you provide information on how many of these patients received a new diagnosis of endometriosis in the period from laparoscopy to the present, following their discharge from the hospital stay that included the diagnostic laparoscopy.

A1 Refer to the attached spreadsheet:

Please note that the following exemptions have been placed on this request:

Section 21:

I can confirm that the Trust holds information regarding lines 47/ 57 but feel this information is exempt under section 21: *information reasonably accessible by other means*. This is because the information is available via the Trust's public website at the following link: FOI ref 197-2324

<http://www.uhnm.nhs.uk/about-us/regulatory-information/freedom-of-information-publication-scheme/freedom-of-information-disclosure-log/>

Section 40- line 52

We are unable to provide the information you require in the requested format as to release this data could lead to the identification of the person(s) involved due to the low numbers involved, and would breach the Trusts obligations under Data Protection Act 2018. Accordingly, this aspect of your request is exempt from disclosure under the terms of Section 40(2) of the FOI Act. *Personal information*. However as the Trust is committed to openness and transparency we can band the numbers as being <5

This exemption is an absolute exemption and therefore no consideration of the public interest test is needed.

Section 12:

I can neither confirm nor deny whether the information you have requested is held by the Trust in its entirety. This is because the information requested in lines 14/ 15/ 57 is not held centrally, but may be recorded in health records. In order to confirm whether this information is held we would therefore have to individually access all health records within the Trust and extract the information where it is present. We therefore estimate that complying with your request is exempt under section 12 of the FOI Act: *cost of compliance is excessive*. The section 12 exemption applies when it is estimated a request will take in excess of 18 hours to complete. We estimate that accessing and reviewing all health records and then extracting relevant information would take longer than the 18 hours allowed for.

In addition to the section 12 exemption the Trust is also applying section 14 (1) exemption: *oppressive burden on the authority*

*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