

Ref: FOIA Reference 2024/25-637

**Royal Stoke University Hospital** 

Data, Security and Protection Newcastle Road Stoke-on-Trent Staffordshire ST4 6QG

Date: 20<sup>th</sup> February 2025

Email foi@uhnm.nhs.uk

Dear Sir/madam

I am writing to acknowledge receipt of your email dated 12th December 2024 requesting information under the Freedom of Information Act (2000) regarding Asthma

On 20th December 2024 we contacted you via email with the following.

To continue with your request we require clarification Q4;

Do you want the number of unique patients who have been diagnosed, for example if a patient is diagnosed multiple times, we would only count the patient once during the time period or the number of diagnoses made no matter if the patient has been previously diagnosed during the time period

On 3<sup>rd</sup> January 2025 you replied via email with. *'Please provide the number of unique patients who have been diagnosed.'* 

## Q1 How many patients have been treated (for any condition) in the last 4 months with:

- Benralizumab
- Dupilumab
- Omalizumab
- Reslizumab
- Mepolizumab
- Tezepelumab

## A1 Please see below.

Medication	Number of Patients
Benralizumab	116
Dupilumab	87
Omalizumab	37
Reslizumab	0
Mepolizumab -	92
Tezepelumab	60







- Q2 Of the patients treated in the last 4 months with any of the above products, please provide the number of patients by the following age-groups:
  - Age 6-11
  - Age 12-17
  - Age 18 and above
- A2 Please see table below.

Age 6 -11	4
Age 12 -17	9
Age 18 and above	379

- Q3 How many patients have been treated in the last 4 months by the Respiratory Medicine department ONLY with:
  - Dupilumab
  - Omalizumab
- A3 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. Please see below.

Dupilumab	9
Omalizumab	<5

- Q4 How many patients have been diagnosed with BOTH chronic sinusitis (ICD-10 code J32) AND nasal polyps (ICD-10 code J33) in the past year? Of these patients, how many have been treated in the last 4 months with:
  - Benralizumab
  - Dupilumab
  - Omalizumab
  - Reslizumab
  - Mepolizumab
  - Tezepelumab
- A4 For patients who have been diagnosed with BOTH chronic sinusitis (ICD-10 code J32) AND nasal polyps (ICD-10 code J33) in the past year we are unable to confirm as we record, on our current clinical information system, diagnosis information on inpatient discharge records. Therefore the following information is based on this.

This is based on the time period 01/12/2023 to 30/11/2024.







The number of discharges where the following clinical coding, J32 and J33 was applied to the discharge is 127. Please note, as there could potentially be multiple discharges for a patient during the year the number of unique patients who had the above IDC10 coding is 72. For example, Patient X was admitted and subsequently discharged on the 2<sup>nd</sup> Jan 24, then admitted again later in the month and subsequently discharged on the 31<sup>st</sup> Jan 24. This is classed as 2 discharges but only 1 unique patient.

Please also note for Emergency Department and Outpatient Department diagnosis information may be held in the patient's paper records. However, this would require a manual audit of paper records.

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 this question is not held centrally but may be recorded in the patients' 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* 

In response to the second part of your question we can confirm no patients have received any of the listed medications.

\*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: <u>http://www.uhnm.nhs.uk/aboutus/Statutory-Policies-and-Procedures/Pages/Freedom-of-Information-Disclosure-Log.aspx</u>

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 <u>www.ico.org.uk</u>.

Yours,

L Carlisle

Leah Carlisle Head of Data, Security & Protection and Health Records Data Protection Officer



