

Title: Lung Cancer (NSCLC) Treatment

Reference Number: RDF1305-23

Date of Response: 08/03/23

Further to your Freedom of Information Act request, please find the Trust's response(s) below.

Please be aware that the Royal Devon University Healthcare NHS Foundation Trust (Royal Devon) has existed since 1st April 2022 following the integration of the Northern Devon Healthcare NHS Trust (known as Northern Services) and the Royal Devon and Exeter NHS Foundation Trust (known as Eastern Services).

I am analysing the treatment of lung cancer and would greatly appreciate if you could answer the following question:

In the past 3 months, how many non-small cell lung cancer (NSCLC) patients were treated with:

	*No. of patients treated
Afatinib	Nil
Alectinib	6
Amivantamab	Nil
Atezolizumab monotherapy	≤5
Atezolizumab with chemotherapy	≤5
Brigatinib	Nil
Ceritinib	≤5
Crizotinib	≤5
Dacomitinib	Nil
Dabrafenib with Trametinib	Nil
Durvalumab	7
Erlotinib	≤5
Gefitinib	Nil
Lorlatinib	≤5
Mobocertinib	Nil
Nintedanib with Docetaxel	≤5
Nivolumab	Nil
Osimertinib	26
Pembrolizumab monotherapy	27
Pembrolizumab with chemotherapy	Nil
Pemetrexed with Carboplatin/Cisplatin	12
Pralsetinib	Nil
Selpercatinib	Nil
Sotorasib	≤5
Tepotinib	≤5

Vinorelbine with Carboplatin/Cisplatin	12
Any other active systemic anti-cancer therapy (SACT)	16
Palliative care only**	6

Answer: Please see table above.

* Note the information provided is the latest available data – September 2022 to November 2022.

**Note that this figure is for all patients with palliative care, not specifically those with ONLY palliative care.

In accordance with Section 40 (2) of the Freedom of Information Act 2000, we are unable to provide figures where the number of patients is less than or equal to five and could risk the identification of those patients and breach Caldicott principles. In these cases ≤5 is used to indicate that a figure between 1 and 5 is being suppressed.

This follows NHS Digital (formerly HSCIC) analysis guidance (2014) which states that small numbers within local authorities, wards, postcode districts, CCG's providers and Trusts may allow identification of patients and should not be published.