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Date: 5 August 2022

Re: Freedom of Information Request

Ref: 252-2022

Thank you for your email dated the 18th July2022, requesting information in relation to Oesophageal and Gastric cancer

The information you require is as follows:

Q1. How many patients were treated in the past 3 months (Apr - June 22) for gastric and gastro-oesophageal junction cancer (any stage) with:

| • | CAPOX (Capecitabine with Oxaliplatin) | 24 |
|---|--|----|
| • | FOLFOX (Folinic acid, Fluorouracil and Oxaliplatin) | 5 |
| • | Pembrolizumab in combination with Platinum (Cisplatin or Oxaliplatin) and Fluoropyrimidine (5-Fluorouracil or Capecitabine) Palliative care only | 0 |
| • | Any other systemic anti-cancer therapy: | |
| | Azacitidine | <5 |
| | Capecitabine + Cisplatin + Trastuzumab | 5 |
| | Capecitabine + Irinotecan | <5 |
| | CAPECITABINE + TEMOZOLOMIDE | <5 |
| | Carboplatin + Etoposide | <5 |
| | Carboplatin + Paclitaxel | <5 |
| | Cisplatin + Etoposide | <5 |
| | Denosumab | <5 |
| | Enzalutamide | <5 |
| | Fluorouracil + Leucovorin + Oxaliplatin + Docetaxel (FLOT) | 23 |
| | Imatinib | 19 |
| | Irinotecan | <5 |
| | Nivolumab | <5 |
| | Oxaliplatin + Capecitabine | <5 |
| | Oxaliplatin + Raltitrexed | <5 |
| | Paclitaxel | 8 |

| Pembrolizumab | <5 |
|---------------|----|
| Sunitinib | <5 |
| Trastuzumab | 8 |
| Triptorelin | <5 |
| Venetoclax | <5 |

Q2. How many patients were treated in the past 3 months (Apr - June 22) for Oesophageal cancer (any stage) with:

| • | Pembrolizumab in combination with Platinum (Cisplatin or Oxaliplatin) and Fluoropyrimidene (5-Fluorouracil or Capecitabine) | 0 |
|---|---|----|
| • | Platinum and Fluoropyrimidene based combination treatments (Cisplatin | 0 |
| | or Oxaliplatin with 5-Fluorouracil or Capecitabine) | |
| • | Nivolumab monotherapy | <5 |
| • | Nivolumab and Ipilimumab | 0 |
| • | Palliative care only | 0 |
| • | Any other systemic anti-cancer therapy | |
| | Capecitabine + Carboplatin | <5 |
| | Capecitabine + Carboplatin + RT | <5 |
| | Capecitabine + Carboplatin + Trastuzumab | <5 |
| | Capecitabine + Cisplatin | <5 |
| | Capecitabine + Cisplatin + RT | <5 |
| | Capecitabine + Cisplatin + Trastuzumab | <5 |
| | Capecitabine + Irinotecan | <5 |
| | Capecitabine + Oxaliplatin | 19 |
| | Carboplatin | <5 |
| | Carboplatin + Etoposide | <5 |
| | Carboplatin + Paclitaxel | 8 |
| | Carboplatin with Fluorouracil (5FU) | <5 |
| | Cetuximab + Fluorouracil + Irinotecan | <5 |
| | Cisplatin + Fluorouracil (5FU) | <5 |
| | Cisplatin with Radiotherapy | <5 |
| | Daratumumab | <5 |
| | Dasatinib | <5 |
| | Denosumab | <5 |
| | Fluorouracil + Leucovorin + Oxaliplatin + Docetaxel (FLOT) | 8 |
| | Hydroxycarbamide | <5 |
| | Imatinib | <5 |
| | Irinotecan + Modified De Gramont | <5 |
| | Oxaliplatin + Modified de Gramont | <5 |
| | Paclitaxel | <5 |
| | Pembrolizumab | <5 |
| | Pemetrexed with Carboplatin/Cisplatin | <5 |
| | Tiragolumab + Atezolizumab | <5 |
| | Trastuzumab | <5 |
| | Triptorelin | <5 |

Zoledronate <5

Q3. Of the Oesophageal Cancer patients (from Q2) treated with Pembrolizumab in the past 3 months (Apr - June 22), how many patients were treated for:

| • | Oesopnageai adenocarcinoma | <5 |
|---|---|----|
| • | Oesophageal squamous cell carcinoma | <5 |
| | 4. How many patients were treated in the past 3 months (Apr - June 22) for dvanced/metastatic oesophageal cancer ONLY with: | |
| • | Pembrolizumab in combination with Platinum (Cisplatin or Oxaliplatin) and Fluoropyrimidene (5-Fluorouracil or Capecitabine) | 0 |
| • | Platinum and Fluoropyrimidene based combination treatments (Cisplatin or Oxaliplatin with 5-Fluorouracil or Capecitabine) | 0 |
| • | Nivolumab monotherapy | 0 |
| • | Nivolumab and Ipilimumab | 0 |
| • | Palliative care only | 0 |
| • | Any other systemic anti-cancer therapy | |
| | Capecitabine + Cisplatin + Trastuzumab | <5 |
| | Capecitabine + Oxaliplatin | 6 |
| | Cetuximab + Fluorouracil + Irinotecan | <5 |
| | Denosumab | <5 |
| | Oxaliplatin + Modified de Gramont | <5 |
| | Paclitaxel | <5 |
| | Pembrolizumab | <5 |

Where a small number of patients have been prescribed a treatment, the number of patients have been stated as <5, so as not to identify individual patients when combined with other datasets.

Should you require any further information please do not hesitate to contact me on the email address provided below.

Please remember to quote the reference number above in any future communications.

If you are dissatisfied with the handling of your request, you have the right to ask for this to be investigated internally.

If you are dissatisfied with the information you have received, you have the right to ask for an internal review.

Both processes will be handled in accordance with our Trust's Freedom of Information Policy and the Freedom of Information Act 2000.

Internal investigation and 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: Freedom of Information Review, The Clatterbridge Cancer Centre NHS Foundation Trust, Clatterbridge Road, Bebington, Wirral, CH63 4JY

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

In order for us to ensure customer satisfaction and to monitor compliance with the Freedom of Information Act 2000, we would be grateful if you could take a couple of minutes to complete a short feedback form via the link below:

https://forms.office.com/r/eLzHXi49Ea



Kind Regards,

The Information Governance Team Contact Email: ccf-tr.foi@nhs.net