

Royal Stoke University Hospital

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

Email foi@uhnm.nhs.uk

Ref: FOIA Reference 2022/23-479

Date: 2nd December 2022

Dear

I am writing to acknowledge receipt of your email dated 18th November 2022 requesting information under the Freedom of Information Act (2000) regarding breast cancer

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.

- I am researching the incidence and treatment of breast cancer. I would greatly appreciate if you could answer the following two questions.
 - Q1. How many patients have been treated for breast cancer (any stage) in the past 3 months with the following systemic anti-cancer therapies?
 - Abemaciclib + Aromatase Inhibitor (e.g. Anastrozole, exemestane,

letrozole)

- Abemaciclib + Fulvestrant
- Alpelisib + Fulvestrant
- Anthracycline (e.g. doxorubicin or epirubicin) as a single agent
- Atezolizumab +Nab-paclitaxel/Paclitaxel
- Capecitabine as a single agent
- Eribulin as a single agent or in combination
- Everolimus + Exemestane
- Fulvestrant as a single agent
- Lapatinib
- Neratinib
- Parp Inhibitors (Olaparib/Talazoparib)
- Palbociclib + Aromatase Inhibitor (e.g. Anastrozole, exemestane, letrozole)
- Palbociclib + Fulvestrant
- Pembrolizumab
- · Platinum (e.g. carboplatin or cisplatin) as a single agent
- Ribociclib + Aromatase Inhibitor (e.g. Anastrozole, exemestane, letrozole)
- Ribociclib + Fulvestrant
- Sacituzumab Govitecan
- Taxane (e.g. docetaxel, paclitaxel, nab-paclitaxel) as a single agent
- Taxane and/or Anthracycline in combination







- Trastuzumab as a single agent or in combination
- Trastuzumab emtansine
- Transtuzumab deruxtecan
- Any other active systemic anti-cancer therapy
- 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.

- Abemaciclib + Aromatase Inhibitor (e.g. Anastrozole, exemestane, letrozole) = 15
- Abemaciclib + Fulvestrant = 19
- Alpelisib + Fulvestrant = 0
- Anthracycline (e.g. doxorubicin or epirubicin) as a single agent = 0
- Atezolizumab +Nab-paclitaxel/Paclitaxel = <5
- Capecitabine as a single agent = 17
- Eribulin as a single agent or in combination = <5
- Everolimus + Exemestane = <5</p>
- Fulvestrant as a single agent =9
- Lapatinib = 0
- Neratinib = <5
- Parp Inhibitors (Olaparib/Talazoparib) = 0
- Palbociclib + Aromatase Inhibitor (e.g. Anastrozole, exemestane, letrozole) = 34
- Palbociclib + Fulvestrant =21
- Pembrolizumab = 0
- Platinum (e.g. carboplatin or cisplatin) as a single agent = 0
- Ribociclib + Aromatase Inhibitor (e.g. Anastrozole, exemestane, letrozole) = 15
- Ribociclib + Fulvestrant = <5
- Sacituzumab Govitecan = 0
- Taxane (e.g. docetaxel, paclitaxel, nab-paclitaxel) as a single agent = 11
- Taxane and/or Anthracycline in combination = 42
- Trastuzumab as a single agent or in combination = 92
- Trastuzumab emtansine = 12
- Transtuzumab deruxtecan = <5
- Any other active systemic anti-cancer therapy = 7
- Q2 Does your Trust participate in any clinical trials for breast cancer? If so, can you please provide the name of each trial and the number of patients taking part?
- 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







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Project Short title	Project Full title	Recruited	Project site status	Project site name
Add-Aspirin	A phase III double-blind placebo- controlled randomised trial assessing the effects of aspirin on disease recurrence and survival after primary therapy in common non-metastatic solid tumours.	45	Open	Royal Stoke University Hospital
ATNEC	ATNEC–Axillary management in T1-3N1M0 breast cancer patients with FNA or core biopsy proven nodal metastases at presentation who convert to node negative after NEoadjuvant Chemotherapy	0	Open	Royal Stoke University Hospital
IMPassion30	A phase iii, multicenter, randomized, open-label study comparing atezolizumab (anti-pd-I1 antibody) in combination with adjuvant anthracycline/taxane-based chemotherapy versus chemotherapy alone in patients with operable triple-negative breast cancer	<5	Open	Royal Stoke University Hospital
IMPORT HIGH	IMPORT HIGH - Randomised trial testing dose escalated intensity modulated radiotherapy in women with higher than average local tumour recurrence risk after breast conservation surgery and appropriate systemic therapy for early breast cancer	81	Open	Royal Stoke University Hospital
IMPORT LOW	IMPORT LOW - Randomised trial testing intensity modulated and partial organ radiotherapy following breast conservation surgery for early breast cancer	47	Open	Royal Stoke University Hospital
IMreal	a non-interventional, multicenter, multiple cohort study investigating the outcomes and safety of atezolizumab under real-world conditions in patients treated in routine clinical practice	0	Open	County Hospital
IMreal	a non-interventional, multicenter, multiple cohort study investigating the outcomes and safety of atezolizumab under real-world conditions in patients treated in routine clinical practice	<5	Open	Royal Stoke University Hospital







KORTUC phase II	randomised phase ii trial testing	<5	Open	Royal Stoke
•	efficacy of intra-tumoural			University
	hydrogen peroxide as a radiation			Hospital
	sensitiser in patients with locally			
	advanced/recurrent breast cancer.			
OPTIMA	optimal personalised treatment of	79	Open	Royal Stoke
	early breast cancer using			University
norgov/EDA Broost	multiparameter analysis a phase iii randomized, double-	0	Onon	Hospital
persevERA Breast Cancer	blind, placebo-controlled,	U	Open	Royal Stoke University
Cancer	multicenter study evaluating the			Hospital
	efficacy and safety of gdc-9545			Ποδριταί
	combined with palbociclib			
	compared with letrozole combined			
	with palbociclib in patients with			
	estrogen receptor-positive, her2-			
	negative locally advanced or			
	metastatic breast cancer			
The ANTHEM	The ANTHEM Feasibility Study :	5	Open	Royal Stoke
Feasibility Study	Is A Novel THErapeutic		'	University
	mammaplasty procedure a safe			Hospital
	and effective surgical alternative			
	to Mastectomy for treatment of			
	breast cancer?			
The NERLYFE study	Multicentre, multi-country,	0	Open	Royal Stoke
	prospective, observational, post-			University
	authorisation safety study to			Hospital
	describe the incidence of			
	discontinuation due to diarrhoea			
	within the first 3 months of			
	treatment with neratinib, in adult			
	breast cancer patients treated in extended adjuvant in a real world			
	setting: the NERLYFE study			
CANC - 3490	A randomised, double-blind,	6	Closed to	Royal Stoke
OLYMPIA	parallel group, placebo-controlled,		recruitme	University
OLTIVII I/	multi-centre, Phase III study to		nt - in	Hospital
	assess the efficacy and safety of		follow up	Tioopitai
	olaparib versus placebo as		Tonon up	
	adjuvant treatment in patients with			
	germline BRCA1/2			
	mutations and high risk HER2			
	negative breast cancer who have			
	completed definitive local			
	treatment and neoadjuvant or			
	adjuvant chemotherapy		1	
CLEE011O12301C	A phase III, multicenter,	<5	Closed to	Royal Stoke
(TRIO033) -	randomized, open-label trial to		recruitme	University
NATALEE	evaluate efficacy and safety of		nt - in	Hospital
	ribociclib with endocrine therapy		follow up	
	as an adjuvant treatment in			
	patients with hormone receptor-			
	positive, HER2-negative, early breast cancer (New Adjuvant TriAl			
	with Ribociclib [LEE011]:			
	WITH KIDOCICIID [LEEUTT].	j		







	NATALEE).			
Exercise to prevent shoulder problems (PROSPER) (V1.0)	Exercise to prevent shoulder problems in patients undergoing breast cancer treatment: The PRevention Of Shoulder Problems TRial (PROSPER)	14	Closed to recruitme nt - in follow up	Royal Stoke University Hospital
HORIZONS: Understanding the impact of cancer diagnosis and treatment	HORIZONS: a cohort study to explore recovery of health and well-being in adults diagnosed with cancer	14	Closed to recruitme nt - in follow up	Royal Stoke University Hospital
MANTA	A Randomized Phase II Study of Fulvestrant in Combination with the dual mTOR Inhibitor AZD2014 or Everolimus or Fulvestrant alone in Estrogen ReceptorPositive Advanced or Metastatic Breast Cancer	11	Closed to recruitme nt - in follow up	Royal Stoke University Hospital
MO39193 - Atezolizumab + Chemotherapy in early relapsing TNBC	A phase iii, randomised, double-blind, placebo-controlled, multicentre study of the efficacy and safety of atezolizumab plus chemotherapy for patients with early relapsing recurrent (inoperable locally advanced or metastatic) triple-negative breast cancer	<5	Closed to recruitme nt - in follow up	Royal Stoke University Hospital
NCRN - 2627 carboplatin+veliparib vs carboplatin+standard chemo vs standard chemo in TNBC	A Randomized, Placebo-Controlled, Double-Blind, Phase 3 Study Evaluating Safety and Efficacy of the Addition of Veliparib Plus Carboplatin Versus the Addition of Carboplatin to Standard Neoadjuvant Chemotherapy Versus Standard Neoadjuvant Chemotherapy in Subjects with Early Stage Triple Negative Breast Cancer (TNBC)	<5	Closed to recruitme nt - in follow up	Royal Stoke University Hospital
NCRN - 2639 / KAITLIN TRASTUZUMAB + PERTUZUMAB + TAXANE vs TRASTUZUMAB EMTANSINE + PERTUZUMAB IN BC	NCRN - 2639 / Kaitlin Trastuzumab + Pertuzumab + Taxane Vs Trastuzumab Emtansine + Pertuzumab In Bc	20	Closed to recruitme nt - in follow up	Royal Stoke University Hospital
NCRN381 FALCON: Faslodex and Anastrazole in hormone naive metastsic or locally	A Randomised, Double-blind, Parallel-group, Multicentre, Phase III Study to Compare the Efficacy and Tolerability of Fulvestrant (FASLODEXTM) 500 mg with	<5	Closed to recruitme nt - in follow up	Royal Stoke University Hospital







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adv Br Ca NCRN522 PEGGY:	Anastrozole (ARIMIDEXTM) 1 mg as Hormonal Treatment for Postmenopausal Women with Hormone Receptor-Positive Locally Advanced or Metastatic Breast Cancer Who Have Not Previously Been Treated With Any Hormonal Therapy (FALCON) A phase ii, randomized study of	<5	Closed to	Royal Stoke
PACLITAXEL + GDC-0941 vs PACLITAXEL + PLACEBO IN METASTATIC BREAST CANCER	paclitaxel with gdc-0941 versus paclitaxel with placebo in patients with locally recurrent or metastatic breast cancer		recruitme nt - in follow up	University Hospital
PAKT Study	A phase II, double blind, randomised, placebo-controlled study of the AKT inhibitor AZD5363 in combination with paclitaxel in triple-negative advanced or metastatic breast cancer	8	Closed to recruitme nt - in follow up	Royal Stoke University Hospital
Persephone	Duration of Trastuzumab with chemotherapy in women with early stage breast cancer: six months versus twelve	25	Closed to recruitme nt - in follow up	Royal Stoke University Hospital
POSNOC.	POSNOC - POsitive Sentinel NOde: adjuvant therapy alone versus adjuvant therapy plus Clearance or axillary radiotherapy. A randomised controlled trial of axillary treatment in women with early stage breast cancer who have metastases in one or two sentinel nodes.	31	Closed to recruitme nt - in follow up	Royal Stoke University Hospital
PRIMETIME	Post-operative avoidance of radiotherapy: biomarker selection of women categorised to be in a very low risk group by IHC4+C	85	Closed to recruitme nt - in follow up	Royal Stoke University Hospital
RADICALS (MRC PR10)	Radiotherapy and Androgen Deprivation In Combination After Local Surgery	12	Closed to recruitme nt - in follow up	Royal Stoke University Hospital
UNIRAD	UNIRAD: Randomized, double- blind, multicentre phase III trial evaluating the safety and benefit of adding everolimus to adjuvant hormone therapy in women with poor prognosis, ER+ and HER2- primary breast cancer who remain free of disease after at least 1 year of adjuvant hormone therapy	44	Closed to recruitme nt - in follow up	Royal Stoke University Hospital







*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:

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Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire SK9 5AF or via www.ico.org.uk.

If following review of the responses I can be of any further assistance please contact my secretary on 01782 671612.

Yours.







Leah Carlisle Head of Data, Security & Protection/ Data Protection Officer



