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[REDACTED]  
**RE: Freedom of Information Request**

**2<sup>nd</sup> August 2024**

Dear Sir/Madam

With reference to your request for information received on 16<sup>th</sup> April 2024, I can confirm in accordance with Section 1 (1) of the Freedom of Information Act 2000 that we do hold the information you have requested. A response to each part of your request is provided below. Please accept our sincere apologies for the delay.

In your request you asked:

- 1. Do you treat patients with acute myeloid leukaemia (AML) in your Trust?**  
Yes
  - If yes, please proceed to Question 3, if no, please answer Question 2*
- 2. Where do patients diagnosed with AML in your Trust receive treatment?**
- 3. Please complete the table below with how many newly diagnosed patients with AML have started first-line treatment with each of the following therapies during the 6-month period October 2023 to March 2024?**
  - Azacitidine monotherapy
  - Low dose cytarabine (LoDAC) monotherapy
  - Venetoclax + azacitidine
  - Venetoclax + LoDAC
  - Ivosidenib
  - Intensive chemotherapy-based regimen
  - Examples include: cytarabine and daunorubicin, idarubicin, fludarabine, mitoxantrone, etoposide (VP-16), 6-thioguanine (6-TG), methotrexate (MTX) or 6-mercaptopurine (6-MP), gemtuzumab ozogamicin with daunorubicin cytarabine, or FLAG-Ida (fludarabine, cytarabine, granulocyte-colony stimulating factor and idarubicin)

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- **Best supportive care**
- **Other**
- **Do not include prophylactic therapies such as GCSF, anti-fungals, antihistamines, anti-nauseants**

**Note: this should only include patients with AML who have started first-line treatment during the 6-month window**

Treatment option	Number of newly diagnosed patients with AML starting first line treatment during the 6-month period October 2023 to March 2024
<b>Azacitidine monotherapy</b>	3 Patients
<b>(LoDAC) monotherapy</b>	0 Patients
<b>Venetoclax + azacitidine</b>	0 Patients
<b>Venetoclax + LoDAC</b>	0 Patients
<b>Ivosidenib</b>	0 Patients
<b>Intensive chemotherapy-based regimen</b>	0 Patients
<b>Best supportive care</b>	0 Patients
<b>Other</b>	0 Patients

I trust this information answers your request. Should you have any further enquiries or queries about this response please do not hesitate to contact me. However, if you are unhappy with the way in which your request has been handled, you have the right to ask for an internal review. 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: Sally Brook Shanahan, Director of Corporate Affairs, King's Mill Hospital, Mansfield Road, Sutton in Ashfield, Nottinghamshire, NG17 4JL or email [sally.brookshanahan@nhs.net](mailto:sally.brookshanahan@nhs.net).

If you are dissatisfied with the outcome of the internal review, you can apply to the Information Commissioner's Office, who will consider whether we have complied with our obligations under the Act and can require us to remedy any problems. Generally, the Information Commissioner's Office cannot decide unless you have exhausted the internal review procedure. You can find out more about how to do this, and about the Act in general, on the Information Commissioner's Office website at: <https://ico.org.uk/your-data-matters/official-information/>.

Complaints to the Information Commissioner's Office should be sent to FOI/EIR Complaints Resolution, Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire, SK9 5AF. Telephone 0303 1231113, email [casework@ico.org.uk](mailto:casework@ico.org.uk).

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If you would like this letter or information in an alternative format, for example large print or easy read, or if you need help with communicating with us, for example because you use British Sign Language, please let us know. You can call us on 01623 672232 or email [sfh-tr.foi.requests@nhs.net](mailto:sfh-tr.foi.requests@nhs.net).

Yours faithfully

### Information Governance Team

All information we have provided is subject to the provisions of the Re-use of Public Sector Information Regulations 2015. Accordingly, if the information has been made available for re-use under the [Open Government Licence](#) (OGL) a request to re-use is not required, but the licence conditions must be met. You must not re-use any previously unreleased information without having the consent from Sherwood Forest Hospitals NHS Foundation Trust. Should you wish to re-use previously unreleased information then you must make your request in writing. All requests for re-use will be responded to within 20 working days of receipt.

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