

Our Ref: CTFOI1889

4<sup>th</sup> October 2022

**Quality and Governance Service**  
Wirral Community Health and Care  
NHS Foundation Trust  
Wing 5, 1<sup>st</sup> Floor  
St Catherine's Health Centre  
Derby Road  
Birkenhead  
Wirral  
CH42 0LQ  
0151 514 2202

Dear Mr Caswell,

[www.wchc.nhs.uk](http://www.wchc.nhs.uk)

## Re: Freedom of Information Request

### Original Request and Response

1. How many patients in the last 12 months has the trust treated for metastatic Cholangiocarcinoma (CCA) or Acute myeloid leukaemia (AML)?
  - a. For each of AML and CCA, how many have IDH-1 mutation?
  - b. How many CCA are intrahepatic vs extrahepatic?
    - i. How many of each of these present at 2nd line? How many of these at 2nd line have IDH-1 mutation?
  - c. For AML, how many patients were not fit for intensive chemotherapy? How many of these AML patients have IDH-1 mutation?
2. How many patients have been treated with pemigatinib (CCA), venetoclax plus azacitadine dual therapy or azacitadine monotherapy (AML )?
  - a. What is the average treatment duration for CCA patients treated with pemigatinib and AML patients treated with azacitadine dual therapy and azacitadine monotherapy? What is the preferred azacitadine product?
3. What is the real-world dosing for venetoclax (in combination with a CYP3A4)?
  - a. What is the antifungal of choice for patients treated with venetoclax?
  - b. What is the antifungal average treatment duration when used in combination with venetoclax ?
  - c) what proportion of patients are treated with an antifungal in combination with venetoclax? In what proportion of patients is the antifungal treatment stopped? In what proportion of these pts is the venetoclax dosage altered following cessation of the antifungal?
4. Do you routinely test CCA and AML patients for IDH-1 mutation?
  - a. If so when does the testing take place. E.g. at diagnosis or following 1st line progression? Is this done using NGS panel? Is this done using PCR testing?
  - B. What is the average turnaround time for these tests?
5. Who is responsible for the routine management of patients with CCA and AML?
  - a. Clinical oncologist / medical oncologist / specialist nurse etc?
6. How many admissions have occurred in the last 12 months for patients with CCA and AML?
  - a. What is their average length of stay?
  - b. How many of these patients were readmissions or readmitted during this time? If readmitted, can you state the main reason?

**Response:** The Trust does not treat the above conditions, nor does it administer the above drugs. As a result, the questions are not applicable to the Trust.

If you are not satisfied that your Freedom of Information request has been dealt with in an adequate manner, you have the right to request a review, requiring us to review our action and response. To request a review of this response, please contact the FOI Officer, Wirral Community Health and Care NHS Foundation Trust, St Catherine's Health Centre, Derby Road, Birkenhead, Wirral, CH42 0LQ or email: [WCNT.foi@nhs.net](mailto:WCNT.foi@nhs.net). You will receive a full response to your request for review within 20 working days of its receipt.

If you are unhappy with the way we have handled your request for review, you may ask the Information Commissioner to review our decision: The Information Commissioner, Wycliffe House, Water Lane, Wilmslow, Cheshire SK9 5AF, Telephone: 01625 545700.



**Wirral Community Health and Care  
NHS Foundation Trust**

Chair: Professor Michael Brown CBE DL  
Chief Executive: Karen Howell