

**Information Governance**

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9<sup>th</sup> September 2022

**Our reference: FOI DA4353**

I am responding to your request for information received **6<sup>th</sup> September 2022**. This has been treated as a request under the Freedom of Information Act 2000.

I am now enclosing a response which is attached to the end of this letter. Please do not hesitate to contact me on the contact details above if you have any further queries.

Yours sincerely,



Shuchi Joshi  
Information Governance Coordinator – Information Rights

If you are dissatisfied with the Trust's response to your FOIA request then you should contact us and we will arrange for an internal review of this decision.

If you remain dissatisfied with the decision following our response to your complaint, you may write to the Information Commissioner for a decision under Section 50 of the Freedom of Information Act 2000. The Information Commissioner can be contacted at:

Information Commissioner's Office  
Wycliffe House  
Water Lane  
Wilmslow  
Cheshire  
SK9 5AF

Tel: 0303 123 1113  
Web: [www.ico.org.uk](http://www.ico.org.uk)

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We promise to work together creatively to: learn 'what matters' to everyone, achieve a better quality of life and continuously improve our services.  
**We care . We respect . We are inclusive**

**Chief Executive:** Paul Calaminus  
**Interim Chair:** Eileen Taylor

**Request:**

**Question 1: How many patients in the last 12 months has the trust treated for metastatic Cholangiocarcinoma (CCA) or Acute myeloid leukaemia (AML)?**

**Question 1a: For each of AML and CCA, how many have IDH-1 mutation?**

**Question 1b: 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?**

**Question 1c: For AML, how many patients were not fit for intensive chemotherapy?  
How many of these AML patients have IDH-1 mutation?**

**Question 2: How many patients have been treated with pemigatinib (CCA), venetoclax plus azacitadine dual therapy or azacitadine monotherapy (AML )?**

**Question 2a: 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?**

**Question 3: What is the real-world dosing for venetoclax (in combination with a CYP3A4)?**

**Question 3a: What is the antifungal of choice for patients treated with venetoclax?**

**Question 3b: What is the antifungal average treatment duration when used in combination with venetoclax?**

**Question 3c: 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?**

**Question 4: Do you routinely test CCA and AML patients for IDH-1 mutation?**

**Question 4a: 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?**

**Question 4b: What is the average turnaround time for these tests?**

**Question 5: Who is responsible for the routine management of patients with CCA and AML?**

**Question 5a: Clinical oncologist / medical oncologist / specialist nurse etc?**

**Question 6: How many admissions have occurred in the last 12 months for patients with CCA and AML?**

**Question 6a: What is their average length of stay?**

**Question 6b: How many of these patients were readmissions or readmitted during this time? If readmitted, can you state the main reason?**



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Answer: The Trust has reviewed questions 1 - 6b of your request for information under the Freedom of Information Act (FOI) 2000.

Section 1(1) of the Freedom of Information Act 2000 states:

Any person making a request for information to a public authority is entitled—  
(a) to be informed in writing by the public authority whether it holds information of the description specified in the request, and  
(b) if that is the case, to have that information communicated to them.

East London NHS Foundation Trust is primarily a Mental Health and Community Health Trust and as such does not provide the services described in this request. We are therefore unable to provide a response.



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