

Date 04/07/2025  
Your Ref  
Our Ref 10212

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Dear

## FREEDOM OF INFORMATION – PRESCRIBING

I write in response to your request for information in relation to Non-small cell lung cancer prescribing.

### Question:

1. How many Non-small cell lung cancer (NSCLC) patients were treated in the past 3 months with:

- ALK Inhibitors (Alectinib, Brigatinib, Ceritinib, Crizotinib, Lorlatinib)
- Amivantamab
- Atezolizumab Monotherapy
- Atezolizumab + Bevacizumab + Carboplatin + Paclitaxel
- Atezolizumab subcutaneous
- Dabrafenib + Trametinib
- Docetaxel monotherapy or in combination with Carboplatin/Cisplatin
- Durvalumab
- Gemcitabine
- Nintedanib + Docetaxel
- Nivolumab
- Osimertinib
- Other EGFR Inhibitors (Afatinib, Erlotinib, Gefitinib, Dacomitinib, Mobocertinib)
- Paclitaxel
- Pembrolizumab Monotherapy
- Pembrolizumab + Paclitaxel + Platinum (Carboplatin/Cisplatin)
- Pembrolizumab + Pemetrexed + Platinum (Carboplatin/Cisplatin)
- Pemetrexed + Platinum (Carboplatin/Cisplatin)
- RET Inhibitors (Pralsetinib, Selpercatinib)
- Sotorasib
- Tepotinib
- Vinorelbine monotherapy or in combination with Carboplatin/Cisplatin

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Chair Professor John Connaghan CBE  
Chief Executive Professor Caroline Hiscox  
*Lothian NHS Board is the common  
name of Lothian Health Board*

- Other active systemic anti-cancer therapy
- Palliative care only
- Amivantamab with carboplatin and pemetrexed
- Cemiplimab with platinum-based chemotherapy

Answer:

1a	ALK Inhibitors ( <i>Alectinib, Brigatinib, Ceritinib, Crizotinib, Lorlatinib</i> )	13
1b	Amivantamab	Nil
1c	Atezolizumab Monotherapy	Nil
1d	Atezolizumab + Bevacizumab + Carboplatin + Paclitaxel	Nil
1e	Atezolizumab subcutaneous	5<
1f	Dabrafenib + Trametinib	Nil
1g	Docetaxel monotherapy or in combination with Carboplatin/Cisplatin	Nil
1h	Durvalumab	15
1i	Gemcitabine	5<
1j	Nintedanib + Docetaxel	5<
1k	Nivolumab	5<
1l	Osimertinib	52
1m	Other EGFR Inhibitors ( <i>Afatinib, Erlotinib, Gefitinib, Dacomitinib, Mobocertinib</i> )	5<
1n	Paclitaxel	Nil
1o	Pembrolizumab Monotherapy	49
1p	Pembrolizumab + Paclitaxel + Platinum ( <i>Carboplatin/Cisplatin</i> )	5<
1q	Pembrolizumab + Pemetrexed + Platinum ( <i>Carboplatin/Cisplatin</i> )	12
1r	Pemetrexed + Platinum ( <i>Carboplatin/Cisplatin</i> )	5<
1s	RET Inhibitors ( <i>Pralsetinib, Selpercatinib</i> )	5<
1t	Sotorasib	5<
1u	Tepotinib	Nil
1v	Vinorelbine monotherapy or in combination with Carboplatin/Cisplatin	9
1w	Other active systemic anti-cancer therapy	20
1x	Palliative care only	N/A
1y	Amivantamab with carboplatin and pemetrexed	Nil
1z	Cemiplimab with platinum-based chemotherapy	Nil

To protect the identity of the individuals involved any figure of 5 or less has not been shown in the table above. Since we do not have their consent to release this data from their records, the information is exempt under section 38(1)(b) of the Freedom of Information (Scotland) Act i.e. to provide it would breach the Data Protection Act (2018).

Question:

- Does your trust participate in any Clinical trials for Non-Small Cell Lung Cancer? If so, please provide the name of each trial, and the number of patients taking part.

Answer:

Full Title	Recruited
REFINE-Lung, A randomised open-label phase III trial of REduced Frequency pembrolizumab immuNothErapy for first-line treatment of patients with advanced non-small cell lung cancer (NSCLC) utilising a novel multi-arm frequency-response optimisation design	24
PACIFIC-9, A Phase III, double-blind, placebo-controlled, Randomized, Multicenter, International Study of Durvalumab Plus Oleclumab and Durvalumab Plus Monalizumab in Patients With Locally Advanced (Stage III), Unresectable Non-small Cell Lung Cancer (NSCLC) Who Have Not Progressed Following Definitive, Platinum-Based Concurrent Chemoradiation Therapy	18
CONCORDE, A platform study of DNA damage response inhibitors in combination with conventional radiotherapy in non small cell lung cancer	10
PRESERVE-003, Phase 3, Two-stage, Randomized Study of ONC-392 Versus Docetaxel in Metastatic Non-Small Cell Lung Cancers that Progressed on PD-1/PD-L1 Inhibitors	0

I hope the information provided helps with your request.

If you are unhappy with our response to your request, you do have the right to request us to review it. Your request should be made within 40 working days of receipt of this letter, and we will reply within 20 working days of receipt. If our decision is unchanged following a review and you remain dissatisfied with this, you then have the right to make a formal complaint to the Scottish Information Commissioner within 6 months of receipt of our review response. You can do this by using the Scottish Information Commissioner's Office online appeals service at [www.itspublicknowledge.info/Appeal](http://www.itspublicknowledge.info/Appeal). If you remain dissatisfied with the Commissioner's response you then have the option to appeal to the Court of Session on a point of law.

If you require a review of our decision to be carried out, please write to the FOI Reviewer at the email address at the head of this letter. The review will be undertaken by a Reviewer who was not involved in the original decision-making process.

FOI responses (subject to redaction of personal information) may appear on NHS Lothian's Freedom of Information website at: <https://org.nhsllothian.scot/FOI/Pages/default.aspx>

Yours sincerely

**ALISON MACDONALD**  
**Executive Director, Nursing**  
 Cc: Chief Executive