

Date 17/07/2025  
Your Ref  
Our Ref 10299

Enquiries to Richard Mutch  
Extension 35687  
Direct Line 0131 465 5687  
[loth.freedomofinformation@nhs.scot](mailto:loth.freedomofinformation@nhs.scot)  
[richard.mutch@nhs.scot](mailto:richard.mutch@nhs.scot)

Dear

## FREEDOM OF INFORMATION – CANCER PRESCRIBING

I write in response to your request for information in relation to cancer prescribing.

Question:

1. Does your trust provide SACT (systemic anti-cancer therapy) treatments for endometrial cancer? If not, which other trust do you refer endometrial cancer patients to for SACT treatments?

Answer:

NHS Lothian provides SACT treatments for endometrial cancer.

Question:

2. How many patients were treated for endometrial cancer (any stage) in the past three months with the following treatments:
  - Dostarlimab (Jemperli)
  - Dostarlimab (Jemperli) AND Chemotherapy
  - Hormone therapy (Progesterone or Letrozole)
  - Pembrolizumab (Keytruda) monotherapy
  - Lenvatinib + Pembrolizumab (Lenvima +Keytruda)
  - Platinum-based chemotherapy (monotherapy or combination with taxanes, anthracyclines, cyclophosphamide)
  - Any other SACT
  - Any other Chemotherapy
  - Durvalumab with platinum-based chemotherapy
  - Pembrolizumab with platinum-based chemotherapy

Answer:

Dostarlimab (Jemperli) - 5 or fewer

Dostarlimab (Jemperli) AND Chemotherapy - 5 or fewer

Hormone therapy (Progesterone or Letrozole) - Prescribed elsewhere.

Pembrolizumab (Keytruda) monotherapy - 0

Headquarters  
Mainpoint  
102 West Port  
Edinburgh EH3 9DN

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

Lenvatinib + Pembrolizumab (Lenvima +Keytruda) - 6  
Platinum-based chemotherapy (monotherapy or combination with taxanes, anthracyclines, cyclophosphamide) - 19  
Any other SACT - 0  
Any other Chemotherapy - 0  
Durvalumab with platinum-based chemotherapy - 0  
Pembrolizumab with platinum-based chemotherapy - 0

Question:

3. In the past three months, how many patients were treated for recurrent endometrial cancer after having previously received platinum-based chemotherapy?

Answer:

Data not available - Requires linkage to additional data sets to find recurrent patients

Question:

4. In the past three months, how many patients were treated for endometrial cancer with the following as first line treatments:
- Dostarlimab (Jemperli) AND Chemotherapy
  - Durvalumab with platinum-based chemotherapy
  - Pembrolizumab with platinum-based chemotherapy
  - Hormone therapy (Progesterone or Letrozole)
  - Platinum-based chemotherapy (monotherapy or combination with taxanes, anthracyclines, cyclophosphamide)
  - Any other SACT
  - Any other chemotherapy

Answer:

Dostarlimab (Jemperli) AND Chemotherapy - 5 or fewer  
Durvalumab with platinum-based chemotherapy - 0  
Pembrolizumab with platinum-based chemotherapy - 0  
Hormone therapy (Progesterone or Letrozole) - 0  
Platinum-based chemotherapy (monotherapy or combination with taxanes, anthracyclines, cyclophosphamide) - 11  
Any other SACT - 0  
Any other chemotherapy - 0

Question:

5. Does your trust participate in any clinical trials for the treatment of endometrial cancer? If so, can you please provide the name of each trial and the number of patients taking part?

Answer:

A Phase 1/2a/3 Evaluation of the Safety and Efficacy of Adding AL3818, a Dual Receptor Tyrosine Kinase, Inhibitor, to Standard Platinum-Based Chemotherapy in Subjects with Recurrent or Metastatic, Endometrial, Ovarian, Fallopian, Primary Peritoneal or Cervical Carcinoma – 0

ATr inhibitor in combination with olaparib in gynaecological cancers with ARId1A loss or no loss – 8

Adaptive ChemoTherapy for Ovarian cancer: A multicentre phase II randomised controlled trial to evaluate the efficacy of Adaptive Therapy (AT) with carboplatin, based on changes in CA125, in patients with relapsed platinum-sensitive high grade serous or high grade endometrioid ovarian cancer – 5 or fewer

A Phase 1/2 Study to Investigate the Safety, Pharmacokinetics and Efficacy of CRB-601, a Monoclonal Antibody against Integrin  $\alpha v \beta 8$ , in Patients with Advanced Solid Tumors – 5 or fewer

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).

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