

Date: 18/08/2026
Our Ref: 11685
Enquiries to loth.freedomofinformation@nhs.scot

Dear

FREEDOM OF INFORMATION – CANCER TREATMENT

I write in response to your request for information in relation to cancer treatment in NHS Lothian?

Question:

Please could you answer the questions below in relation to the number of patients treated with these specific medicines from the 1st of April 2026 to the 30th of June 2026, or for the latest time-period you have data for. Please include data for all hospitals in your Health Board.

1. How many patients were treated with the following medicines in total regardless of diagnosis in the 3 months between the start of April 2026 to the end of June 2026, or latest 3-month period available?

Glofitamab (Columvi) monotherapy; Glofitamab (Columvi) + Gemcitabine + Oxaliplatin (Glo + GEMOX); Epcoritamab (Tepkinly); Tafasitamab (Minjuvi); Lenalidomide; Daratumumab.

Answer:

The information you have requested is detailed in the table below:

Patients treated, 1 April - 30 June 2026, NHS Lothian	
Name of medicine	Number of patients treated
1.1 Glofitamab (Columvi) monotherapy	0
1.2 Glofitamab (Columvi) + Gemcitabine + Oxaliplatin (Glo + GEMOX)	0
1.3 Epcoritamab (Tepkinly)	6
1.4 Tafasitamab (Minjuvi)	0
1.5 Lenalidomide	44
1.6 Daratumumab	23

Question:

2. How many patients with a diagnosis of Follicular Lymphoma were treated with the following medicines, in the 3 months between the start of April 2026 to the end of June 2026, or latest 3-month period available?

Epcoritamab (Tepkinly) Monotherapy; Epcoritamab (Tepkinly) + Rituximab + Lenalidomide (E + R²); Rituximab + Lenalidomide (R²); Tafasitamab (Minjuvi) + Rituximab + Lenalidomide (Tafa + R²)

Answer:

The information you have requested is detailed in the table below. I have not released numbers of 5 or fewer in the table, as this information could lead to the identification of the individuals involved. Since we do not have their consent to release their personal data, the information is exempt under section 38 of the Freedom of Information (Scotland) Act 2002 as to provide it would breach the principles of the Data Protection Act 2018.

Patients treated with a diagnosis of Follicular Lymphoma, 1 April - 30 June 2026, NHS Lothian	
Name of medicine	Number of patients treated
2.1 Epcoritamab (Tepkinly) Monotherapy	6
2.2 Epcoritamab (Tepkinly) + Rituximab + Lenalidomide (E + R ²)	0
2.3 Rituximab + Lenalidomide (R ²)	≤5
2.4 Tafasitamab (Minjuvi) + Rituximab + Lenalidomide (Tafa + R ²)	0

Question:

3. How many patients with a diagnosis of Multiple Myeloma were treated with the following medicines in the 3 months between the start of April 2026 to the end of June 2026, or latest 3-month period available?

Daratumumab + Bortezomib + Thalidomide + Dexamethasone (DVTD); Daratumumab + Lenalidomide + Dexamethasone (DRD); Daratumumab + Bortezomib + Dexamethasone (DVD); Daratumumab + Bortezomib + Lenalidomide + Dexamethasone (DVRD); Daratumumab Monotherapy; Isatuximab + Bortezomib + Lenalidomide + Dexamethasone (IVRD); Isatuximab + Pomalidomide + Dexamethasone (IPD); Isatuximab + Carfilzomib + Dexamethasone (IKD); Belantamab mafodotin Monotherapy; Belantamab mafodotin + Bortezomib + Dexamethasone (BVD); Belantamab mafodotin + Pomalidomide + Dexamethasone (BPD); Lenalidomide + Dexamethasone (RD); Lenalidomide Maintenance Monotherapy

Answer:

The information you have requested is detailed in the table below:

Patients treated with a diagnosis of Multiple Myeloma, 1 April - 30 June 2026, NHS Lothian	
Name of medicine	Number of patients treated

Patients treated with a diagnosis of Multiple Myeloma, 1 April - 30 June 2026, NHS Lothian	
Name of medicine	Number of patients treated
3.1 Daratumumab + Bortezomib + Thalidomide + Dexamethasone (DVTD)	0
3.2 Daratumumab + Lenalidomide + Dexamethasone (DRD)	57
3.3 Daratumumab + Bortezomib + Dexamethasone (DVD)	27
3.4 Daratumumab + Bortezomib + Lenalidomide + Dexamethasone (DVRD)	16
3.5 Daratumumab Monotherapy	17
3.6 Isatuximab + Bortezomib + Lenalidomide + Dexamethasone (IVRD)	≤5
3.7 Isatuximab + Pomalidomide + Dexamethasone (IPD)	7
3.8 Isatuximab + Carfilzomib + Dexamethasone (IKD)	0
3.9 Belantamab mafodotin Monotherapy	0
3.10 Belantamab mafodotin + Bortezomib + Dexamethasone (BVD)	≤5
3.11 Belantamab mafodotin + Pomalidomide + Dexamethasone (BPD)	0
3.12 Lenalidomide + Dexamethasone (RD)	38
3.13 Lenalidomide Maintenance Monotherapy	42

Question:

4. How many patients with the following types of Myeloproliferative Disease were treated with the following medicines, in the 3 months between the start of April 2026 to the end of June 2026, or latest 3-month period available?

Fedratinib (Inrebic); Momelotinib (Omjjara); Peginterferon Alfa-2a (Pegasys);
Ropeginterferon Alfa-2b (Besremi); Ruxolitinib (Jakavi)

Answer:

The information you requested is detailed in the table below:

Patients treated with a diagnosis of Myeloproliferative Disease, 1 April - 30 June 2026, NHS Lothian				
Name of medicine	All Types of Myeloproliferative Disease	Myelofibrosis	Polycythaemia Vera	Essential Thrombocythaemia
4.1 Fedratinib (Inrebic)	≤5	≤5	0	0
4.2 Momelotinib (Omjjara)	7	7	0	0
4.3 Peginterferon Alfa-2a (Pegasys)	19	0	8	10

Patients treated with a diagnosis of Myeloproliferative Disease, 1 April - 30 June 2026, NHS Lothian				
Name of medicine	All Types of Myeloproliferative Disease	Myelofibrosis	Polycythaemia Vera	Essential Thrombocythaemia
4.4 Ropeginterferon Alfa-2b (Besremi)	0	0	0	0
4.5 Ruxolitinib (Jakavi)	20	10	10	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 <https://www.foi.scot/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 reviewer at the address at the top 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>

Yours sincerely

ALISON MACDONALD
Executive Director of Nursing Midwifery and AHPs
 Cc: Chief Executive