

Email: foi.tsdfd@nhs.net
 Our Ref: TSD10885

12 October 2026

Dear Sir/Madam

Request for Information

We are writing to confirm that we have now completed our search for the information you requested.

A copy of the information is below:

Q1. How many patients have been treated for breast cancer (any stage) in the past 3 months with the following systemic anti-cancer therapies:

Abemaciclib + Aromatase Inhibitor (e.g. anastrozole, exemestane, letrozole)	28
Abemaciclib + Fulvestrant	<5
Alpelisib + Fulvestrant	zero
Anthracycline (e.g. doxorubicin or epirubicin) + Cyclophosphamide only	6
Anthracycline (e.g. doxorubicin or epirubicin) + Cyclophosphamide + Paclitaxel	8
Atezolizumab	zero
Capivasertib	zero monotherapy
Capecitabine as a single agent	15
Carboplatin + Paclitaxel	<5
Elacestrant	<5
Eribulin as a single agent or in combination	<5
Everolimus + Exemestane	<5
Fulvestrant as a single agent	5
Palbociclib + Aromatase Inhibitor (e.g. anastrozole, exemestane, letrozole)	22
Palbociclib + Fulvestrant	8
Parp Inhibitors (Olaparib/Talazoparib)	<5

Pembrolizumab Monotherapy	zero
Pembrolizumab + Anthracycline (e.g. doxorubicin or epirubicin) + Cyclophosphamide	zero
Carboplatin + Paclitaxel + Pembrolizumab	12
Pertuzumab (Perjeta) + Trastuzumab (Herceptin)	zero
Phesgo (Pertuzumab + Trastuzumab in a single injection)	zero
Ribociclib + Aromatase Inhibitor (e.g. anastrozole, exemestane, letrozole)	47
Ribociclib + Fulvestrant	11
Sacituzumab Govitecan	zero
Taxane (e.g. docetaxel, paclitaxel, nab-paclitaxel) as a single agent	8
Trastuzumab deruxtecan (Enhertu)	7
Trastuzumab (Herceptin) as a single agent or in combination with Paclitaxel	15
Trastuzumab emtansine (Kadcyla)	5
Any other active systemic anti-cancer therapy	Capivasertib and fulvestrant <5 Capecitabine plus phesgo <5 Docetaxel, carbo, phesgo <5 Doce, phesgo 9 Doce, cyclo <5 Pembro, nab-pac <5 Pembro, carbo, paclitaxel 12
Pembrolizumab subcutaneous injection	zero

Q2. In the past 3 months, how many patients have been treated with the following systemic anti-cancer therapies for breast cancer (please indicate whether they were treated for early or metastatic disease):

	Total Patients	Early Patients	Metastatic Patients
<i>Phesgo (Pertuzumab + Trastuzumab in a single injection)</i>	0	0	0
<i>Pertuzumab (Perjeta) + Trastuzumab (Herceptin)</i>	0	0	0
<i>Trastuzumab (Herceptin) as a single agent or in combination with Paclitaxel</i>	15	13	<5
<i>Trastuzumab deruxtecan (Enhertu)</i>	7	0	7
<i>Trastuzumab emtansine (Kadcyla)</i>	5	<5	<5
<i>Abemaciclib + Aromatase Inhibitor (e.g. anastrozole, exemestane, letrozole)</i>	27	21	6
<i>Abemaciclib + Fulvestrant</i>	<5	0	<5
<i>Ribociclib + Aromatase Inhibitor (e.g. anastrozole, exemestane, letrozole)</i>	47	17	30
<i>Ribociclib + Fulvestrant</i>	11	0	11
<i>Capecitabine as a single agent</i>	15	<5	13
<i>Carboplatin + Paclitaxel</i>	<5	0	<5
<i>Carboplatin + Paclitaxel + Pembrolizumab</i>	12	12	0

Low Numbers:

Where there are less than 5, we are unable to provide the exact information you require as this may enable the identification of our employees, members of the public or patients. This would constitute personal information and would be considered exempt under Section 40 of the Freedom of Information Act. Section 40 (FOI Act) provides an exemption to disclosure, where disclosure would contravene any of the Data Protection principles. This exemption is an absolute exemption that is not subject to the public interest test. Where the information relates to an individual who can be identified from that data, or from that data when added to other information, in the possession of, or

likely to come into the possession of the data controller, this meets the definition of personal data as defined by the Data Protection Act.

The information supplied to you continues to be protected by the Copyright, Designs and Patents Act 1988. You are free to use it for your own purposes, including any non-commercial research you are doing and for the purposes of news reporting.

If you wish to discuss any of the above, please contact us, quoting the FOI reference number above.

If you are unhappy with the way in which we have handled your request, please contact the Data Protection and Freedom of Information Lead in the first instance. If you wish to make a formal complaint, you should write to our Information Governance Team at Information Governance and Data Protection, Belmont Court, Torbay and South Devon NHS Foundation Trust, Torquay, TQ2 7AA or by email to tsdft.igteam@nhs.net

If you are not content with the outcome of your complaint or the internal review, you may apply directly to the Information Commissioner for a decision. Generally, the Information Commissioner will only make a decision once you have exhausted the complaints and/or internal review process provided by us. The Information Commissioner can be contacted at: The Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire, SK9 5AF or through this link <https://ico.org.uk/global/contact-us/>

Yours sincerely,

Freedom of Information Team