

Freedom of Information Request	FOI 22-224	6 <sup>th</sup> June 2022
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**I have a freedom of information request regarding the use of Biologic medicines. Could you please answer the following two questions:**

**Q1. How many patients were treated in the last 3 months by the Dermatology department (for any medical condition) with the following biologic drugs:**

- **Adalimumab - Humira**
- **Adalimumab Biosimilar**
- **Apremilast**
- **Bimekizumab**
- **Brodalumab**
- **Certolizumab**
- **Dimethyl fumarate**
- **Etanercept - Enbrel**
- **Etanercept Biosimilar**
- **Guselkumab**
- **Infliximab - Remicade**
- **Infliximab Biosimilar**
- **Ixekizumab**
- **Risankizumab**
- **Secukinumab**
- **Tildrakizumab**
- **Ustekinumab**

Please note the Health Board is only able to supply information by quantity and not by the number of patients treated.

Please find below the quantities dispensed in the Health Board's pharmacy for unknown diagnosis only for February, March and April 2022.

Type	Qty
ADALIMUMAB (AMGEVITA) 40 mg in 0.8mL Pre-Filled Pen 2 Pre-Filled Pen Pack	320
ADALIMUMAB (HUMIRA) 40 mg in 0.4mL Pre-Filled Pen 2 Pre-Filled Pen Pack	24
ADALIMUMAB (HUMIRA) 40 mg in 0.4mL Pre-Filled Syringe 2 Pre-Filled Syringe Pack	4
ADALIMUMAB (IMRALDI) 40 mg in 0.8mL Pre-Filled Pen 2 Pre-Filled Pen Pack	2
BRODALUMAB 210 mg in 1.5mL Pre-Filled Syringe 1 Pre-Filled Syringe Pack	24
ETANERCEPT (BENEPALI) 50 mg in 1mL Pre-Filled Pen 4 Pre-Filled Pen Pack	13
ETANERCEPT (ENBREL) 50 mg in 1mL Pre-Filled Pen 4 Pre-Filled Pen Pack	4
GUSELKUMAB 100 mg in 1mL Pre-Filled Pen 1 Pre-Filled Pen Pack	54
INFLIXIMAB (INFLECTRA) 100 mg Intravenous Infusion 1 Vial Pack	53

Type	Qty
INFLIXIMAB (REMICADE) 100 mg Intravenous Infusion 1 Vial Pack	9
SECUKINUMAB 150 mg in 1mL Pre-Filled Pen 2 Pre-Filled Pen Pack	19
SECUKINUMAB 150 mg in 1mL Pre-Filled Syringe 2 Pre-Filled Syringe Pack	18
SECUKINUMAB 300 mg in 2mL Pre-Filled Pen 1 Pre-Filled Pen Pack	84
USTEKINUMAB 45 mg in 0.5mL Pre-Filled Syringe 1 Pre-Filled Syringe Pack	26
USTEKINUMAB 90 mg in 1mL Pre-Filled Syringe 1 Pre-Filled Syringe Pack	19

**Q2. How many patients were treated in the last 3 months by the Gastroenterology department (for any medical condition) with the following biologic drugs:**

- **Adalimumab - Humira**
- **Adalimumab Biosimilar**
- **Filgotinib**
- **Golimumab**
- **Infliximab - Remicade**
- **Infliximab Biosimilar**
- **Ozanimod**
- **Tofacitinib**
- **Ustekinumab**
- **Vedolizumab**

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Type	Qty
ADALIMUMAB (AMGEVITA) 40 mg in 0.8mL Pre-Filled Pen 2 Pre-Filled Pen Pack	829
ADALIMUMAB (AMGEVITA) 40 mg in 0.8mL Pre-Filled Syringe 2 Pre-Filled Syringe Pack	12
ADALIMUMAB (HUMIRA) 40 mg in 0.4mL Pre-Filled Pen 2 Pre-Filled Pen Pack	15
INFLIXIMAB (FLIXABI) 100 mg Intravenous Infusion 1 Vial Pack	1369
INFLIXIMAB (INFLECTRA) 100 mg Intravenous Infusion 1 Vial Pack	16
TOFACITINIB 5 mg Tablets 56 Tablet Pack	9
USTEKINUMAB 130 mg in 26mL Intravenous Infusion 1 Vial Pack	10
USTEKINUMAB 90 mg in 1mL Pre-Filled Syringe 1 Pre-Filled Syringe Pack	93
VEDOLIZUMAB 108 mg in 0.68mL Pre-Filled Pen 1 Pre-Filled Pen Pack	566
VEDOLIZUMAB 108 mg in 0.68mL Pre-Filled Syringe 1 Pre-Filled Syringe Pack	4
VEDOLIZUMAB 300 mg Intravenous Infusion 1 Vial Pack	251