

Freedom of Information Request	FOI 22-499	1 <sup>st</sup> November 2022
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**I have a freedom of information query regarding the use of Biologic medicines in gastroenterology. Could you please answer the following two questions:**

**Q1. 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**

The Health Board is only able to provide information by quantity and not by patient or diagnosis. Please find below quantities dispensed via hospital pharmacies for the above listed drugs for *gastroenterology only* for the period July 2022 to September 2022.

<b>Description</b>	<b>Quantity</b>
ADALIMUMAB (AMGEVITA) 40 mg in 0.8mL Pre-Filled Pen 2 Pre-Filled Pen Pack	634
ADALIMUMAB (AMGEVITA) 40 mg in 0.8mL Pre-Filled Syringe 2 Pre-Filled Syringe Pack	10
ADALIMUMAB (HUMIRA) 40 mg in 0.4mL Pre-Filled Pen 2 Pre-Filled Pen Pack	12
INFLIXIMAB (FLIXABI) 100 mg Intravenous Infusion 1 Vial Pack	1265
INFLIXIMAB (INFLECTRA) 100 mg Intravenous Infusion 1 Vial Pack	17
TOFACITINIB 5 mg Tablets 56 Tablet Pack	6
USTEKINUMAB 130 mg in 26mL Intravenous Infusion 1 Vial Pack	34
USTEKINUMAB 90 mg in 1mL Pre-Filled Syringe 1 Pre-Filled Syringe Pack	80

Description	Quantity
VEDOLIZUMAB 108 mg in 0.68mL Pre-Filled Pen 1 Pre-Filled Pen Pack	500
VEDOLIZUMAB 108 mg in 0.68mL Pre-Filled Syringe 1 Pre-Filled Syringe Pack	8
VEDOLIZUMAB 300 mg Intravenous Infusion 1 Vial Pack	271

**Q2. If you are able to link patient treatment to a disease, could you please provide the number of patients treated in the last 3 months for Ulcerative Colitis ONLY with the following biologic drugs:**

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

Please refer to Q1.