NHS Borders

Planning & Performance

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Freedom of Information request 75-21

Request

- 1. First and second line treatments
 - a) What is first line and second line treatment for patients with a diagnosis of relapsing remitting MS (RRMS)?
 - b) What is first line and second line treatment for patients with a diagnosis of primary progressive MS (PPMS)?
 - c) What is first line and second line treatment for patients with a diagnosis of secondary progressive MS (SPMS)?
- 2. DMT use and costs

Please complete Table 1.

Table 1: Use of DMTs in 2020

Drug	No of patients treated with this drug in 2020	Total cost of the treatment
Alemtuzumab (Lemtrada)		
Avonex (interferon beta-1a)		
interferon alpha		
interferon beta		
Cladribine (Mavenclad)		
Daclizumab (Zinbryta) –		
withdrawn		
Dimethyl fumarate		
(Tecfidera)		
Extavia (beta interferon-1b)		
Fingolimod (Gilenya)		
Glatiramer acetate		
(Copaxone)		
Natalizumab (Tysabri)		
Ocrelizumab (Ocrevus)		
Peginterferon alpha		
Plegridy (peginterferon beta		
1a)		
Rebif (beta interferon-1a)		

3. Prevalence of MS

Please complete Table 2.

Table 2: Prevalence of types of MS

	Number of patients with diagnosis	
RRMS		
PPMS		
SPMS		
Other types of MS		
Total		

Response

1. First and second line treatments

- a. There are 14 licensed and approved drugs. None of which are administered as first or second line treatments.
- b. There is only 1 licensed treatment for MS (PPMS), therefore no first or second line treatment as such.
- c. There is only 1 licensed treatment for MS (SPMS), therefore no first or second line treatment as such.

2. DMT use and costs:

Drug	No of patients treated with this drug in 2020	Total cost of the treatment
Alemtuzumab (Lemtrada)	0	Both the number of
Avonex (interferon beta-1a)	<5	patients treated and the
interferon alpha	0	total cost of the treatment cannot be disclosed due
interferon beta	0	to commercial
Cladribine (Mavenclad)	0	confidentiality
Daclizumab (Zinbryta) –		agreements.
withdrawn	0	
Dimethyl fumarate		Under Section 33(b)
(Tecfidera)	56	Commercial interests and the economy of the
Extavia (beta interferon-1b)	0	Freedom of Information
Fingolimod (Gilenya)	<5	(Scotland) Act 2002, the
Glatiramer acetate		total cost of treatment is
(Copaxone)	<5	withheld.
Natalizumab (Tysabri)	11	
Ocrelizumab (Ocrevus)	0	
Peginterferon alpha	5	
Plegridy (peginterferon beta		
1a)	<5	
Rebif (beta interferon-1a)	<5	

Source: Homecare and Ascribe, Rx started before or during 2020, Rx ended during or after 2020, all clinics.

As the number of events in some areas are very small and in accordance with the Code of Practice for Official Statistics any number that is less than five, actual numbers and potentially identifiable information is withheld to help maintain patient confidentiality due to potential risk of disclosure. Further information is available in the ISD Statistical Disclosure Control Protocol.

3. This data is not recorded electronically and would only be held in a patient's notes. To extract this data would require a manual trawl of all notes and the cost of carrying out this work would exceed the limit set in the Fees Regulations of the FOI(S)A 2002 and therefore we are not required to provide.

If you are not satisfied with the way your request has been handled or the decision given, you may ask NHS Borders to review its actions and the decision. If you would like to request a review please apply in writing to, Freedom of Information Review, NHS Borders, Room 2EC3, Education Centre, Borders General Hospital, Melrose, TD6 9BS or foi.enquiries@borders.scot.nhs.uk.

The request for a review should include your name and address for correspondence, the request for information to which the request relates and the issue which you wish to be reviewed. Please state the reference number **75-21** on this request. Your request should be made within 40 working days from receipt of this letter.

If following this review, you remain dissatisfied with the outcome, you may appeal to the Scottish Information Commissioner and request an investigation of your complaint. Your request to the Scottish Information Commissioner should be in writing (or other permanent form), stating your name and an address for correspondence. You should provide the details of the request and your reasons for dissatisfaction with both the original response by NHS Borders and your reasons for dissatisfaction with the outcome of the internal review. Your application for an investigation by the Scottish Information Commissioner must be made within six months of your receipt of the response with which you are dissatisfied. The address for the Office of the Scottish Information Commissioner, Kinburn Castle, Doubledykes Road, St Andrews, Fife.