

Date: 11/11/2016

FREEDOM OF INFORMATION REQUEST FOI/013090 – Womens health

Under the Freedom of Information Act, please could you fill out the following Freedom of Information request with the information for your Trust. Please note that the information provided in response to this request may be partly or wholly re-used unless specified otherwise by the response.

1. In each of the last three financial years how many women a year are diagnosed with:
 - a. symptomatic fibroids
 - b. endometriosis

Figures below are those women who have a diagnosis; we do not record if our Trust provided the original diagnosis through our investigations.

	2013/14	2014/15	2015/16
Fibroids	261	272	272
Endometriosis	152	186	167

2. In each of the last three financial years how many women with chronic pain were i) investigated by laparoscopy and ii) what proportion of these women received a diagnosis for
 - a. endometriosis
 - b. fibroids
 - c. other, please state where possible

No gynaecology patients were found with coded chronic pain diagnoses that were also investigated by a laparoscopy, retrieving further information from paper records would be highly time-consuming and therefore no figures can be provided.

3. In each of the last three financial years how many women have received a diagnostic or other test(s) for:
 - a. endometriosis
 - b. fibroids

We do not electronically record a 'suspected' diagnosis, we only record that at some point during their period of treatment a diagnosis has been recorded. Retrieving further information from paper records would be highly time-consuming. Therefore we cannot distinguish which diagnostic tests were for the suspicion of endometriosis and fibroids.

4. On average how many diagnostic and other tests do women receive who later receive a diagnosis of:
 - a. endometriosis
 - b. fibroids

We do not electronically record a specific time at which a diagnosis is made, we only record that at some point during their period of treatment a diagnosis has been recorded. Retrieving further information from paper records would be highly time-consuming. Therefore we cannot distinguish that a diagnosis is a 'later' diagnosis.

5. What information is offered to women who present with :
- pelvic pain
 - heavy menstrual bleeding

In respect of heavy menstrual bleeding we give information regarding specific treatments such as endometrial ablation, the Mirena intrauterine system and hysterectomy as appropriate for each patient. We would discuss myomectomy for treatment of uterine fibroids with individual patients.

6. On average, how much money a year is spent on hospital admissions for women with:
- fibroids (as the primary diagnosis)

2013/14	2014/15	2015/16
£225,718.04	£226,630.95	£243,985.44

- endometriosis (as the primary diagnosis)

2013/14	2014/15	2015/16
£68,443.51	£124,739.32	£93,023.03

7. In each of the last 5 years, how many times have the below codes been logged?

- Open Myomectomy - code Q09.2

2011/12	2012/13	2013/14	2014/15	2015/16
1	4	2	3	2

- Endoscopic myomectomy – code Q17.1

2011/12	2012/13	2013/14	2014/15	2015/16
54	144	104	119	109

- Hysterectomy - code Q07.1-Q08.9

2011/12	2012/13	2013/14	2014/15	2015/16
154	297	315	285	313

- Heavy menstrual bleeding – code N92

2011/12	2012/13	2013/14	2014/15	2015/16
131	335	323	386	372

e. Fibroids – code D25.0-25.02 and D25.9

2011/12	2012/13	2013/14	2014/15	2015/16
85	202	241	249	258

f. Uterine Fibroid Embolisation - code RC41Z

2011/12	2012/13	2013/14	2014/15	2015/16
1	4	5	5	3

8. How many laparoscopies have you carried out over the last three financial years for:

- a. diagnostic endometriosis
- b. treatment for endometriosis

Laparoscopy is recognised as the 'gold standard' for the diagnosis of endometriosis, a positive diagnosis will be made at the time of the laparoscopy. When undertaking a laparoscopy for the assessment of pelvic pain we often undertake minor treatment of endometriosis such as diathermy destruction of endometriotic deposits, though more major interventions such as excision of endometriosis or division of extensive adhesions would be undertaken at a second procedure to allow appropriate discussion of the risks and benefits of treatment with the patient. Therefore it is difficult in this case to class a laparoscopy as purely diagnostic in nature; as such we have simply provided the number of laparoscopies performed for patients with a diagnosis of endometriosis.

2013/14	2014/15	2015/16
11	14	24

c. fibroids

2013/14	2014/15	2015/16
12	15	12

d. other, please state where possible

2013/14	2014/15	2015/16
133	142	158

9. How many laparoscopic excision surgeries and hysterectomies (code Q07.1-Q08.9) due to endometriosis/adenomyosis/fibroids have you carried out over the last three financial years broken down by year?

	2013/14	2014/15	2015/16
Fibroids	10	14	11
Adenomyosis	1	2	4
Endometriosis	1	3	3

10. What is the cost of the number of hysterectomies (code Q07.1-Q08.9) related to a) endometriosis b) adenomyosis and c) fibroids over the last three financial years?

Primary Diagnosis	2013/14	2014/15	2015/16
Fibroids	£34,701.49	£43,976.76	£31,126.43
Adenomyosis	£9,764.10	£4,484.36	£25,953.36
Endometriosis	£2,267.04	£13,273.91	£6,850.82

11. How many uterine artery/fibroid embolization procedures (code RC41Z) have you carried out over the last three financial years, for fibroids, broken down by year?

	2013/14	2014/15	2015/16
RC41Z	5	5	3