



Ministry
of Defence

Defence Statistics (Health)
Ministry of Defence
Oak 0 West (#6028)
Abbey Wood North
Bristol BS34 8JH
United Kingdom

Telephone [MOD]: +44 (0)30679 84423

Facsimile [MOD]: +44 (0)1179 319634

E-mail: DefStrat-Stat-Health-PQ-FOI@mod.uk

Reference: [REDACTED]

Date: 02 December 2014

Dear [REDACTED]

Thank you for your email of 3 November 2014 requesting the following information:

"...could you please send me the numbers you have for military personnel who have been diagnosed with myeloproliferative neoplasms; polycythaemia vera, essential thrombocythaemia and myelofibrosis."

I am treating your correspondence as a request for information under the Freedom of Information Act 2000 (FOIA).

A search for the information has now been completed within the Ministry of Defence, and I can confirm that information in scope of your request is held.

There were a total of 62 UK Armed Forces Regular personnel who have had codes entered in their electronic medical records for the above conditions since 1 January 2007. This number has also been split by condition:

- 37 - Polycythaemia vera,
- 19 - Essential thrombocythaemia,
- 14 - Myelofibrosis.

Please note that the sum of these numbers does not equal the total number of personnel with a code entered because some people have codes entered for more than one condition.

Under section 16 of the Act (Advice and Assistance), you may find it useful to note the following:

Defence Medical Information Capability Programme (DMICP) is the source of electronic, integrated healthcare records for primary healthcare and some MOD specialist care providers. DMICP was rolled out in 2007 and legacy medical data for currently serving personnel was migrated across during rollout. The data between 2007 and 2010 may be incomplete due to the rollout of the electronic medical record system therefore numbers presented are a minimum. If information is entered as free text in the patient record then it is not available in the data warehouse.

Data recorded for UK Armed Forces Regular personnel identified from DMICP were used for this analysis.

Diagnoses of cancers are made in secondary care (NHS hospitals) and information may be passed to an individual's GP in the form of a hospital discharge letter. The GP may then file this letter in

the paper FMed4, code this information into the patient's electronic record, or they may scan it as a document (which is only searchable by a review of the individual record). For this reason the numbers provided would be a minimum as it would not include cases where the letter was only filed in a paper record or where the letter was scanned or notes made as free text (as opposed to codes).

Medical data is stored in the DMICP data warehouse using read codes. One ICD10 code maps to one or more read code. The read codes relating to the ICD10 codes as provided by you in your email of 1 December 2014 that were used to search the DMICP data warehouse for military personnel with myeloproliferative neoplasms, polycythaemia vera, essential thrombocythaemia and myelofibrosis were:

- B6z – Malignant neoplasm lymphatic or haemotopoietic tissue
- B6y0 - Myeloproliferative disorder
- BBs2 - [M] Chronic myeloproliferative disease
- BBs – [M] Misc myeloproliferative & lymphoproliferative disorders
- BBsz - [M] Misc myeloproliferative or lymphoproliferative dis NOS
- By60-1 – Myeloproliferative disease
- B677 – Myelodysplastic & myeloproliferative disease
- B585 – Secondary malignant neoplasm of bone & bone marrow

- B934 – Polycythaemia vera
- B934-1 – Polycythaemia rubra vera
- B934-2 – Primary polycythaemia
- BBs0-1 – [M] Polycythaemia rubra vera
- BBs0 – [M] Polycythaemia vera

- D3y0 – Essential thrombocythaemia
- B9374 - Essential (haemorrhagic) thrombocythaemia
- D3133 – [M] Essential thrombocythaemia NOS
- D313z-1 - Essential thrombocythaemia NOS

- D41y1 – Myelofibrosis
- BBrA7 – [M] Acute myelofibrosis
- B675 – Acute myelofibrosis
- B675-1 – Acute panmyelosis with myelofibrosis
- D4035 – Hypereosinophilic syndrome

If you are not satisfied with this response or you wish to complain about any aspect of the handling of your request, then you should contact me in the first instance. If informal resolution is not possible and you are still dissatisfied then you may apply for an independent internal review by contacting the Deputy Chief Information Officer, 2nd Floor, MOD Main Building, Whitehall, SW1A 2HB (e-mail CIO-FOI-IR@mod.uk). Please note that any request for an internal review must be made within 40 working days of the date on which the attempt to reach informal resolution has come to an end.

If you remain dissatisfied following an internal review, you may take your complaint to the Information Commissioner under the provisions of Section 50 of the Freedom of Information Act. Please note that the Information Commissioner will not investigate your case until the MOD internal review process has been completed. Further details of the role and powers of the Information Commissioner can be found on the Commissioner's website, <http://www.ico.gov.uk>.

I hope you find this information useful

Yours sincerely,

Defence Statistics (Health) Head (B1)