



**Randomised, Embedded, Multi-factorial, Adaptive Platform for Community-Acquired Pneumonia**

**WELCOME TO THE SECOND EDITION OF THE REMAP-CAP PANDEMIC NEWSLETTER**

#### THANK YOU

The REMAP-CAP team would like to extend a **SINCERE** and **BIG** thank you to **EVERYONE** for their commitment to the REMAP-CAP study.

Thanks to **YOUR** hard work, the UK now has:

- **142** (48%) of the 296 sites open globally
- **4243** (67%) of the 6290 patients recruited globally
- **4163** (76%) of the 5488 COVID-19 patients recruited globally

#### ACTIVE PANDEMIC TREATMENT DOMAINS

*Active both on the ward and ICU*

- Antiplatelet

*Active on ICU only*

- Immune Modulation
- Vitamin C (central supplies available soon)
- Simvastatin

#### UPDATED AND NEW DOMAINS COMING SOON

*Updated domains*

- Anticoagulation
- Immune Modulation

*New domain*

- ACE-2 Renin-Angiotensin System



## SUMMARY OF REMAP-CAP RESULTS

### *Corticosteroid domain:*

REMAP-CAP has helped establish corticosteroids as standard care for critically ill patients with COVID-19. The results of the [REMAP-CAP steroid domain, evaluating hydrocortisone](#), were published in JAMA on 2 September 2020, alongside a [meta-analysis](#) of corticosteroids. Subsequently, the [World Health Organisation \(WHO\)](#) issued new guidance recommending the use of systemic corticosteroids in critically ill patients with COVID-19. An updated COVID-19 [Therapeutic Alert](#) for corticosteroids was issued on 3 September 2020.

### *Immune Modulation domain:*

REMAP-CAP established, for the first time, that [Interleukin-6 inhibitors](#) (sarilumab and tocilizumab) reduce mortality and time in ICU for critically ill patients with COVID-19. Preliminary results were published as a pre-print on 7 January 2021. A [Therapeutic Alert interim position statement for Tocilizumab](#) and [Therapeutic Alert for Interleukin-6 inhibitors](#) for critically ill patients with COVID-19 pneumonia (adults) were issued on 25 November 2020 and 1 February 2021, respectively.

### *Antiviral domain:*

REMAP-CAP established that [Kaletra](#) (lopinavir/ritonavir) provided no benefit for critically ill patients with COVID-19.

### *Immunoglobulin domain:*

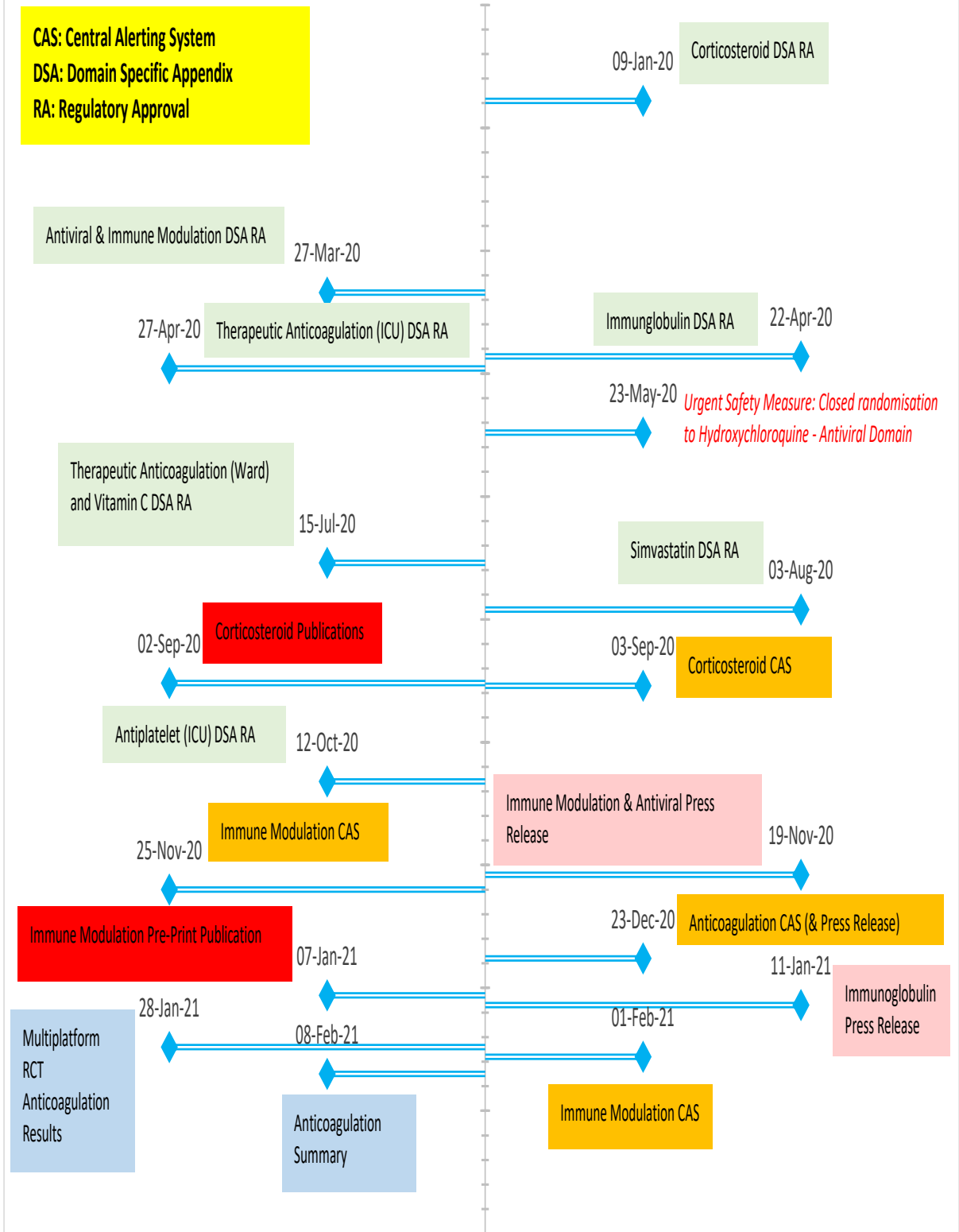
REMAP-CAP established that treatment with [convalescent plasma treatment](#) provided no benefit for the general critically ill population with COVID-19.

### *Therapeutic anticoagulation domain:*

Statements on the effect of [therapeutic anticoagulation](#) were released from the REMAP-CAP trial on 23 December 2020 and from [ATTACC, ACTIV-4a & REMAP-CAP Multiplatform RCT](#) on moderately sick hospitalised patients on 28 January 2021. For critically ill patients with COVID-19 (receiving organ support) therapeutic-dose heparin, compared with standard of care, was found to be futile with high probability of inferiority/harm. In contrast, in hospitalised patients (not receiving organ support) therapeutic-dose heparin treatment was beneficial. A [therapeutic alert](#) and [summary on heparin anticoagulation](#) for patients admitted to hospital with COVID-19 were issued on 23 December 2020 and 8 February 2021, respectively.

These results show the evidence you are generating in REMAP-CAP is already being used to guide treatment decisions and improve outcomes for patients with COVID-19.

## REMAP-CAP Covid-19 Milestones





## WEB LINKS

### *Corticosteroid domain:*

02 Sep 2020 <https://www.imperial.ac.uk/news/203273/steroid-found-improve-survival-critically-covid19/>

02 Sep 2020 [Effect of Hydrocortisone on Mortality and Organ Support in Patients With Severe COVID-19: The REMAP-CAP COVID-19 Corticosteroid Domain Randomized Clinical Trial](#)

02 Sep 2020 [Association Between Administration of Systemic Corticosteroids and Mortality Among Critically Ill Patients With COVID-19: A Meta-analysis | Critical Care Medicine | JAMA | JAMA Network](#)

02 Sep 2020 [Editorial: Corticosteroids in COVID-19 ARDS - Evidence and Hope During the Pandemic](#)

03 Sep 2020 [Covid-19 Therapeutic Alert: Corticosteroids in the treatment of suspected or confirmed COVID-19](#)

### *Immune Modulation domain:*

19 Nov 2020 [Arthritis drug effective in treating sickest Covid-19 patients](#)

25 Nov 2020 [Publication of an interim position statement: Tocilizumab for patients admitted to ICU with COVID-19 pneumonia \(adults\)](#)

07 Jan 2020 [Arthritis drugs may reduce mortality and time in ICU for sickest ICU patients](#)

07 Jan 2020 [Interleukin-6 Receptor Antagonists in Critically Ill Patients with Covid-19 – Preliminary report](#)

01 Feb 2021 [Interleukin-6 inhibitors \(tocilizumab and sarilumab\) for critically ill patients with COVID-19 pneumonia \(adults\)](#)

### *Antiviral domain:*

19 Nov 2020 [Arthritis drug effective in treating sickest Covid-19 patients](#) (Reports Kaletra ineffective)

### *Immunoglobulin domain:*

11 Jan 2021 [Blood plasma treatment has limited effect for the sickest Covid-19 patients](#)

### *Anticoagulation domain:*

23 Dec 2020 [Statement from REMAP-CAP Trial on Blood Thinners in Covid-19 Patients](#)

23 Dec 2020 [Therapeutic Anticoagulation \(Heparin\) in the Management of Severe COVID-19 \(SARS-CoV-2 Positive\) Patients](#)

28 Jan 2021 [ATTACC, ACTIV-4a & REMAP-CAP multiplatform RCT - Results of interim analysis](#)

08 Feb 2020 [Heparin anticoagulation in patients admitted to hospital with Covid-19](#)



### DATA ENTRY

Please ensure that data are entered in a timely and accurate manner so that we can analyse and publish data using the most complete and accurate dataset.

General missing pages reports will continue to be sent bi-weekly basis. Urgent form-specific query reports will be sent when we are approaching scheduled data analysis.

### CO-ENROLMENT WITH REMAP-CAP

The following co-enrolment agreements are in place with the REMAP-CAP study:

ACCORD, ADAPT-Sepsis, ARCADIA, ARREST, ASICS, BALANCE, BLING III, cEEG SE STUDY, COVRAS, COVSurf, COVEMERALD, EFFORT, EMPRESS, GenOMICC, INHALE, INNATE, INNATE IMMUNITY IN CRITICAL ILLNESS, INTENT, ISARIC, LUCID, PASS, Patch, Plasma-Lyte 148® vs Saline study, PROMEDIC, PRONTO, REACTOR, REALIST, RECOVERY, SUDDICU, START-AKI, STOP-COVID, STRESS-L, SUDDICU, TEAM-ICU, VACIRiS, VITAMINS Trial, XARELTO.

### RECENT SPINNAKER UPDATES

A question has been added to the baseline form to collect the patient's vaccination status prior to this acute illness (Yes/No/Unknown).

- For patients randomised **before** the vaccination program began, the answer will default to "No"
- For patients randomised **since** the vaccination program began, but before the addition of this field, it will default to "unknown".
- It is not necessary for sites to retrospectively update this information.

The "<" and ">" options for physiological and laboratory variables have been removed. If a laboratory has not reported a specific value and has instead reported that the value is beyond a certain threshold (i.e. >999) then the site should enter the threshold value (i.e. 999). No action is required by sites for data previously entered.



### NIHR Urgent Public Health Studies Research Workforce Participation Certificate

The COVID Consenting Initiative will present anyone who has consented participants to UPH studies with a certificate which can be included in their continuing professional development (CPD) portfolios.

Please sign up and log into NIHR Learn to download the certificate.

The NIHR Learn Platform link is: <https://learn.nihr.ac.uk/course/view.php?id=808>

If there are any difficulties, please contact: [covid19application@nihr.ac.uk](mailto:covid19application@nihr.ac.uk).

### WE4YOU SEMINARS

The next WE4YOU seminar 'Convalescent Plasma' is scheduled for Wednesday 17<sup>th</sup> February 2021 at 15:00 GMT.

Please click the link below to join the webinar:

<https://us02web.zoom.us/j/82888442003?pwd=TEtwTC91RVBPUGkrNGNQ3Y5R2c5QT09>

Webinar ID: 828 8844 2003; Passcode: 632964

Recordings of previous Webinars can be accessed here:

<https://www.remapcap.org/site-education>

### CELEBRATE YOUR SUCCESS

So much has been achieved by the UK REMAP-CAP sites over the past year. THANK YOU EVERYONE for your continued SUPPORT. The evidence you are generating is already improving care for patients with COVID-19.

We look forward to the time when we can celebrate your success together.

