

NHS patients to receive life-saving COVID-19 treatments that could cut hospital time by 10 days

- Patients in intensive care units across the UK are to receive potentially life-saving treatments for COVID-19
- Government ensures life-saving drugs will be available in NHS healthcare settings with immediate effect

Patients across the UK who are admitted to intensive care units due to COVID-19 are set to receive new life-saving treatments which can reduce the time spent in hospital by up to 10 days, the government has announced today (Thursday 7 January).

Results from the government-funded REMAP-CAP clinical trial published today showed tocilizumab and sarilumab reduced the relative risk of death by 24%, when administered to patients within 24 hours of entering intensive care.

Most of the data came from when the drugs were administered in addition to a corticosteroid, such as dexamethasone – also discovered through government-backed research through the RECOVERY clinical trial – which is already provided as standard of care to the NHS.

Patients receiving these drugs, typically used to treat rheumatoid arthritis, left intensive care between 7 to 10 days earlier on average. The rollout of these treatments could therefore contribute significantly towards reducing pressures on hospitals over the coming weeks and months.

Updated guidance will be issued tomorrow by the government and the NHS to trusts across the UK, encouraging them to use tocilizumab in their treatment of COVID-19 patients who are admitted to intensive care units, effective immediately.

Supplies of tocilizumab are already available in hospitals across the UK and clinicians will be able to treat all those admitted to intensive care units, potentially saving hundreds of lives. The department is working closely with Roche, who manufacture tocilizumab, to ensure treatments continue to be available to UK patients.

Health and Social Care Secretary Matt Hancock said:

The UK has proven time and time again it is at the very forefront of identifying and providing the most promising, innovative treatments for its patients.

Today's results are yet another landmark development in finding a way out of this pandemic and, when added to the armoury of vaccines and treatments already being rolled out, will play a significant

role in defeating this virus.

We have worked quickly to ensure this treatment is available to NHS patients without delay, meaning hundreds of lives will be saved.

I am hugely proud of the significant role our NHS and its patients have played in this international trial, and grateful to the outstanding scientists and clinicians behind REMAP-CAP who have brought this treatment to our patients.

Deputy Chief Medical Officer Professor Jonathan Van-Tam said:

This is a significant step forward for increasing survival of patients in intensive care with COVID-19. The data shows that tocilizumab, and likely sarilumab, speed up and improve the odds of recovery in intensive care, which is crucial for helping to relieve pressure on intensive care and hospitals and saving lives.

This is evidence of the UK's excellent research infrastructure and life sciences industry advancing global understanding of this disease, which we have done both through our own programme of clinical research and through our ability to make very large contributions to international studies.

In June last year, the UK government approved dexamethasone as the world's first treatment proven to reduce mortality for COVID-19. The REMAP-CAP trial found that the rate of death for those in intensive care units on corticosteroids, such as dexamethasone, and respiratory support alone was 35%, which was reduced to 28% when tocilizumab was also administered.

The government continues to work in partnership to ensure global equitable access to safe and effective treatments. Only multilateral collaboration can deliver at the speed and scale needed to end the global pandemic, and the government remains committed to participating in international trials such as this that seek to answer important questions about the virus.

The UK has played an integral role in these international efforts: three-quarters of patients enrolled globally have been NHS patients, in 142 hospitals across the UK – roughly half of the 289 total sites across the world. A quarter of all patients in intensive care with COVID-19 have enrolled and continue to volunteer to enrol in the REMAP-CAP trial – all of whom have made a vital contribution to the research needed to beat this disease.

Support also came from the UK's National Institute for Health Research (NIHR), its well-established Clinical Research Network and the UK's Chief Medical Officers. The UK government has, to date, provided £1.2 million to support the REMAP-CAP trial.

Professor Stephen Powis, NHS national medical director, said:

The fact there is now another drug that can help to reduce mortality for patients with COVID-19 is hugely welcome news and another positive development in the continued fight against the virus.

This signals how the NHS is working all the time to find new treatments and therapies, but the best advice for individuals is to remember the hands, face, space guidance.

The REMAP-CAP analysis has not yet been peer-reviewed.

Tocilizumab is administered intravenously in a one or two-dose regime. It has been demonstrated to be effective for patients requiring organ support when administered soon after admission to ICU.

Other trials such as the RECOVERY trial are assessing efficacy in wider patient groups outside of intensive care settings, but these are still ongoing. REMAP-CAP has not tested the effectiveness of tocilizumab in primary care settings.

Tocilizumab will be used to further reduce mortality from COVID-19 and in addition to dexamethasone, which is already standard of care for hospitalised patients receiving supplemental oxygen.

Tocilizumab and sarilumab have already been added to the government's [export restriction list](#), which bans companies from buying medicines meant for UK patients and selling them on for a higher price in another country. This will protect supply for UK patients by enforcing regulatory action on those who flout the restrictions.

The REMAP-CAP trial showed that mortality was 35.8% for patients receiving current standard of care alone, and that this was reduced to 27.3% using tocilizumab and sarilumab. This was a 24% relative reduction in risk of mortality for patients who entered intensive care.