REMAP-CAP

Randomized, Embedded, Multifactorial Adaptive Platform trial for Community-Acquired Pneumonia

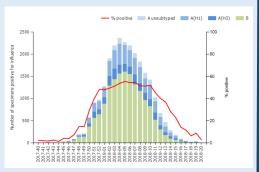
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NEWSLETTER

Global expansion- Canada joins the team

In June 2018, the Canadian Grant titled CAPTIC (Canadian Adaptive platform Trial in Critical Illness) was awarded. This means that Canadian Intensivists will also participate in the REMAP-CAP study. With the help of Canada we will include about 300 extra patients! An exciting and innovative part of the Canadian grant is the involvement of patients from the beginning, amongst others to determine which research questions and outcomes are important to patients. The addition of a new region contributes to the goal of the REMAP-CAP becoming a global and long-lasting trial.



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The CAP-season is comming!

Influenza viruses are human respiratory pathogens that can be detected all year round, but are most commonly found from October to April in the Northern Hemisphere, the so-called flu season. Influenza is spread easily from person to person, usually through the air or contaminated hands. Therefore, it is a common cause of pneumonia, especially among younger children, the elderly, pregnant women or people with chronic health conditions. Frequently, patients admitted to the intensive care unit are diagnosed with both an influenza infection and a bacterial pneumonia. We expect an increase in the incidence of community-acquired pneumonia (CAP) cases to be included in REMAP-CAP during the winter season. We therefore strongly advise you to be extra alert and to not miss any patients eligible for REMAP-CAP.

REMAP-CAP: an international study on the treatment of severe CAP in patients admitted to the Intensive Care Unit

PREPARE Reaching Out Meeting Brussels

On 20-21 September 2018, the 'Reaching Out; A Meeting to Advance Clinical Research Preparedness During Infectious Disease Outbreaks', was held in Brussels, Belgium. This meeting was co-organised by GloPID-R and PREPARE, the latter being the platform in which REMAP-CAP takes part (WP5). This event united people from a broad spectrum of backgrounds, including clinicians, ethicists, social scientists and regulators to further integrate clinical research in care and to improve data sharing in case of public health emergencies.

The message throughout the meeting was that pre-positioned and pre-approved studies are key for proper epidemic responses. However, it requires a lot of innovation and investments to make clinical research in pandemics and especially also in inter-pandemic periods sustainable and advantageous. This innovation is to be achieved by several factors, including a favourable regulatory and policy environment for clinical research. According to Prof. Herman Goossens: "We made progress, but there is much room for improvement" and "we have the moral obligation to learn lessons from past outbreaks and ensure that essential preparedness capabilities are in place".



First REMAP-CAP Pandemic Meeting

At the Reaching Out Meeting in Brussels, a meeting was held with representatives from the Australian, Canadian and European regions of REMAP-CAP. With input of a large group interested in Pandemic Research, multiple options for intervention research during pandemics, as well as the yearly seasonal influenza, were discussed. A "pandemic appendix" to the Core protocol is being developed to facilitate the changes to the protocol necessary during a pandemic and describe the triggering of the pandemic research response. Additionally, an antiviral domain investigating the effectiveness of oseltamivir is being developed.

Are you interested to join?

If you would like to join the REMAP-CAP Study, please send an email to the general REMAP-CAP email address (below). The members of the Regional Coordinating Committee will provide you with essential information and guide you through the process of becoming a member of the REMAP-CAP family.