ISSUE 28 | APR 2026

REMAP-CAP

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Dear REMAP-CAP family,

The start of spring comes with some good news. We have initiated the transition to Core Protocol V4.0, incorporating many learnings from the pandemic, and ensuring the sustainability of the trial. We have reached an important conclusion on the use of oseltamivir in severely ill patients. Currently, the full analyses are being performed, and we will inform you as soon as we have data for publication. The team implementing the trial at Ecraid is up to speed, and the UMC Utrecht (as the sponsor of the trial) has committed financially to supporting the trial for the next two years. This is an important recognition of REMAP-CAP, and ensures continuation of the trial while we secure additional funding.

You'll read all about these achievements in this newsletter, you'll also find the link to our recent paper on how regulators assess platform trials, which gives a lot of insight into how platform trials are viewed, and how we can further improve them.

I hope you enjoy reading this newsletter!

Lennie

Core Protocol V4.0 Activation

We are working on the transition of all active sites to Core Protocol V4.0. Our goal is to transition all sites before the end of May 2026.

Soon thereafter, the eligibility module will be disabled in the old database (eCRF) which is linked to Core Protocol V3.0/3.1. This means that participating sites will not be able to enroll participants anymore until they have transitioned to the new database linked to Protocol V4.0. Therefore, we kindly ask for close collaboration with your monitor/ country manager on training needs and for the collection of essential documents.

As a reminder, recordings of the central Core Protocol V4.0 transition training are available and were shared with you together with other documents to be completed. Please reach out to us in case of document requests or questions.

Funding Update

We are pleased to share the good news that we have received approval for a 12-month extension of the ECRAID-Base project.

A majority of REMAP-CAP activities is funded by this project which will now run until 28 February 2027.

Top 3 recruiting sites since January 1st 2026

1. Centre Hospitalier de Dieppe (FR)
2. Meander Medisch Centrum (NL)
3. Hospital de Tortosa Verge de la Cinta (ES)

Ecraid news

Sign up for the Young Investigator Workshop at ESCMID Global 2026

Ecraid's Young Investigator Workshop returns to ESCMID Global for the fifth year. In Munich, our early-career collaborators will share valuable experience from their work on building a/your own network, Open Science and FAIR-by-design or machine learning tools for diagnosing VAP. Are you up for an hour of knowledge-exchange? Sign up!

Influenza Antiviral Domain

In the most recent adaptive analysis, the 5-day oseltamivir intervention and the 10-day oseltamivir intervention of the Influenza Antiviral Domain reached a statistical trigger for inferiority when compared to the other interventions in the Severe Illness Severity State. the ITSC has decided to permanently close the Oseltamivir-containing arms in the Severe Illness Severity State.

The domain is currently still paused for recruitment, while we look into updating the randomisation proportions.

We plan to re-open the domain for recruitment shortly both in the Severe State to continue investigating Baloxavir vs no antiviral, and in the Moderate Illness Severity State.

Participating sites have been informed regarding the pause of the entire domain.

UMC Utrecht as Sponsor of the trial has also confirmed to provide the financial means to cover REMAP-CAP activities and fees in the year following the end of ECRAID-Base.

Recruitment to REMAP-CAP and all linked activities can therefore continue in all currently active countries.

Celebrations

Earlier this year, we started the successful transition of the first sites to the new Core Protocol and the new database. Soon thereafter, the first participant was recruited under Core Protocol V4.0, including first recruitments to the Influenza Immune Modulation domain and Baloxavir intervention of the influenza Antiviral domain. Congratulations to the research team at HagaZiekenhuis, NL, for having recruited the first participant under Core Protocol V4.0.

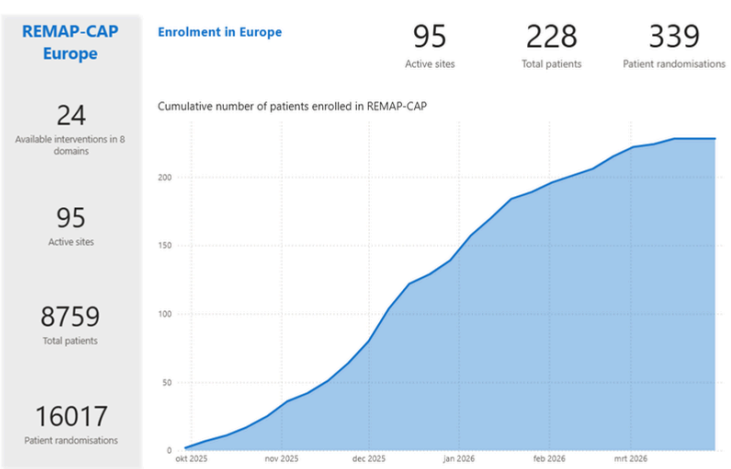
We look forward to recruiting many more patients to these domains in the next influenza season.

ICH-GCP R3 Certification

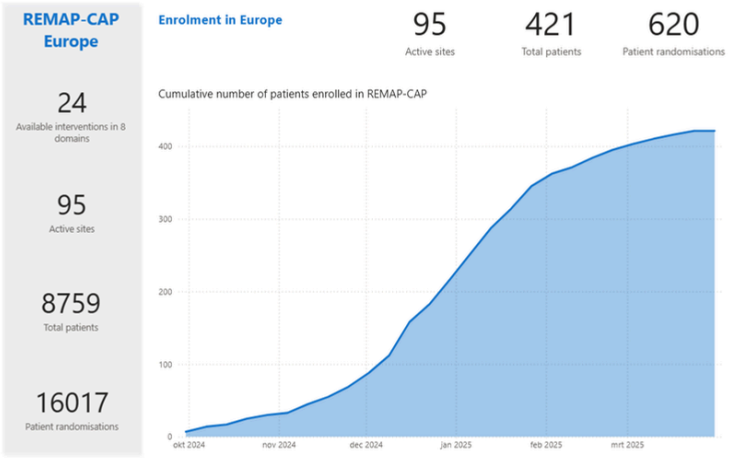
We kindly remind the research teams to complete their ICH GCP E6 R3 training and share their updated GCP certificates with the CRA/country manager. On a trial-level, we accept self-training by using the summary GCP R3 training slides provided by Ecraid. Please reach out to your CRA/country manager, if this has not been shared with you

Recruitment

Overall enrolment EU (including UK)
1st October 2025 - 31st March 2026



Overall enrolment EU (including UK)
1st October 2024 - 31st March 2025



The graphs above depict the enrolment numbers of influenza seasons for 2024-2025 and 2025-2026. Recruitment during the 2025/2026 season was significant lower than the last season. We hope activation of Core V4.0 will make it more easy to recruit and increase the enrolment numbers during next season.

New Publication

Considerations raised during the regulatory and ethics review of platform clinical trials in infectious diseases

UMC Utrecht has published this article in Contemporary Clinical Trials Communications, which examined ethical and regulatory review comments on five Ecraid-managed platform trials (REMAP-CAP, ECRAID-Prime, RECOVERY, RECLAIM and SNAP) between January 2022 and March 2025. Out of 1,218 total comments, 93 (7.6%) focused specifically on platform trial design. While no major protocol changes were required, reviewers sought clarification on issues like interim analyses and platform-specific details in consent forms. Notably, no comments addressed expected concerns such as response adaptive randomization or interim result confidentiality. The study recommends clearer communication from sponsors about platform trial features and better preparedness among assessors reviewing such designs. The full article is available here.

For live EU region enrolment data click **here**

World
- 240 sites
- 16,088 unique patients
- 27,302 randomisations

European region
- 92 sites
- 8,753unique patients
- 16,005 randomisations

Let's connect

The ECRAID-Base project has received funding from the European Union's Horizon 2020 research and innovation programme under grant agreement No. 965313

UMC Utrecht ecraid ecraid Base