



## Update on recruitment to convalescent plasma and tocilizumab treatment arms

## Statement from the RECOVERY trial chief investigators, 11 January 2021

The RECOVERY trial independent Data Monitoring Committee (DMC) held a routine meeting on Thursday 7 January to review the safety and efficacy data that were available for 23,935 randomised patients. This meeting included review of data for the convalescent plasma and tocilizumab treatment arms and consideration of all relevant external information, including findings from the REMAP-CAP trial.

The DMC recommended that recruitment should be paused for patients being considered for treatment with convalescent plasma who require invasive mechanical ventilation or extra-corporal membranous oxygenation (ECMO), a form of life support that aids respiratory function. Follow-up of these patients should continue.

The DMC strongly encouraged continuing recruitment to the convalescent plasma comparison of all those patients who, at randomisation, do not require invasive mechanical ventilation or ECMO. They also recommended continuing recruitment to the tocilizumab treatment arm, and to the other ongoing comparisons - aspirin, colchicine, and Regeneron's antibody cocktail.

Martin Landray, Professor of Medicine and Epidemiology at the Nuffield Department of Population Health, University of Oxford, and Joint Chief Investigator, said 'RECOVERY remains the largest trial of treatments in COVID-19, with over 26,000 participants to date including over 10,000 to the comparison of convalescent plasma versus usual NHS care alone. The RECOVERY trial has already answered four important questions, most notably identifying the benefit of dexamethasone for patients requiring oxygen or ventilation. At this very challenging time, we are incredibly grateful to the hard work of NHS staff and huge contribution made by patients across the whole country. With their efforts, the RECOVERY trial will soon find out whether other treatments, such as convalescent plasma, are beneficial for patients in hospital.'

Peter Horby, Professor of Emerging Infectious Diseases in the Nuffield Department of Medicine, University of Oxford, and Joint Chief Investigator for the RECOVERY trial, said 'We don't yet know if convalescent plasma works as a treatment for certain COVID patients, but if it does it would have a major impact worldwide. Plasma from patients who have recovered from COVID-19 may help to speed up clearance of the virus from those who are suffering from the disease and improve their chances of recovery, particularly if they are treated before they become severely ill.

'RECOVERY is the world's largest trial of convalescent plasma and we are close to getting an answer. By volunteering to donate plasma, patients who have recovered from COVID-19 will ensure we complete the study and provide the evidence we need to improve care and save lives.'