northern health
the northern way of caring

memo

Date:	Feb 2, 2021
To:	NH physicians, nurses, and pharmacists
From:	NH Therapeutics Committee
Re:	Tocilizumab (ACTEMRA) Injection for COVID-19; Use and Access

The BC COVID-19 Therapeutics Committee (CTC) recently revised their clinical practice guidance regarding tocilizumab injection for the treatment of patients with severe COVID-19 requiring life support measures. This guidance is based on evidence from the REMAP-CAP trial, which showed mortality benefit and decreased time requiring ICU level support in this specific patient population.

Tocilizumab injection is a humanized monoclonal antibody against the interleukin 6 (IL-6) receptor. Tocilizumab is non-formulary for BC hospitals, but approved by Health Canada for indications such as rheumatoid arthritis and cytokine release syndrome. Some patients with COVID-19 develop severe disease, which is primarily driven by inflammatory cytokines such as IL-6; tocilizumab exerts its therapeutic effect by neutralizing these inflammatory mediators.

NH pharmacy has obtained a supply of tocilizumab, which is currently available at the University Hospital of Northern BC, Mills Memorial Hospital and Fort St. John Hospital, as the facilities designated to provide care for critically ill COVID patients. The Critical Care and Regional Pharmacy Leads will reassess this, should the need for this therapy arise outside of these three facilities.

Guidance:

Tocilizumab is recommended for patients requiring life support due to suspected or confirmed COVID-19. Life support measures include:

- High flow oxygen (e.g. Optiflow) if flow rate greater than 30 L/min and FiO_2 greater than 0.4
- OR invasive or non-invasive ventilation
- OR vasopressor or inotropic support

Tocilizumab should be administered within 24 hours of the initiation of life support measures. Patients admitted to hospital for more than 14 days with symptoms of COVID-19 should not receive tocilizumab for this indication.

Dose: tocilizumab 8 mg/kg IV as a single dose up to a maximum of 800 mg. A pre-printed order set is currently in development. Until the order set is available for use, a non-formulary medication request form (Document Source: 10-110-5001) must be completed for all patients who will receive tocilizumab.

A NH parenteral drug administration monograph has been developed and is available on OurNH.

Another IL-6 receptor antagonist, sarilumab, is also undergoing procurement provincially as an alternative option to tocilizumab. Should sarliumab be used in place of tocilizumab, it can be prescribed at a dose of 400 mg IV as a single dose for all patients. Creation of a NH parenteral drug administration monograph and consideration for a pre-printed order are also underway.

NOTE: tocilizumab (and sarilumab, if required) will be mixed by NH pharmacy.

For more information on the most current research on the use of therapies in the management of COVID-19 see most up to date guidelines provided by the BC CTC.

For more information on NH supply and availability contact:
NH Regional Medication Use Management Pharmacist: mumpharmacist@northernhealth.ca