

The use of tocilizumab in COVID-19 inpatients: experience from a district general hospital

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Introduction

Tocilizumab (TCZ) reduces mortality in COVID-19.¹ There is a concern regarding secondary bacterial infections. Locally, TCZ is given to those with a rapidly deteriorating oxygenation or needing ventilation. Neutrophil and platelet counts must be above $2 \times 10^9/L$ and $50 \times 10^9/L$. Bacterial infections or immunosuppression are relative contra-indications, and blood borne viral (BBV) serology must be sent.

Methods

With Caldicott approval, all patients receiving TCZ between 1 February 2021 and 28 June 2021 were analysed.

Results

104 patients were identified. Their median age was 59 years (interquartile range (IQR) 19); 65 were men and 39 were women. Fifty-one received a 600 mg dose, 49 received a 800 mg dose, three received a 400 mg dose and one received a 510 mg dose (all weight adjusted). Procalcitonin (PCT) levels were not tested in four; of those tested, median PCT was 0.21 (IQR 0.41). Thirty-five were receiving concurrent antibiotics and 11 had intercurrent immunosuppression. All were on steroids and all had appropriate platelets or neutrophil counts. 88 had TCZ at the time of ventilation commencement.

BBV serology was tested in 52. One was positive for HIV (testing improved over time). Liver transaminitis in was noted in 76/104 (73%); the majority improved.

There were 25 (24%) deaths. 23 infections occurred within 3 months (one severe septicaemia of unclear source; 10 pneumonias; two unknown infections; the rest were urinary tract infections, osteomyelitis, cellulitis or orchitis). Infections occurred after one received a 400 mg dose, 10 received 600 mg doses and 12 received 800 mg doses.

Conclusion

TCZ seems safe. Infections within 3 months approach 30%. Our cohort does not have a control group, and we have not corrected

for confounders, but BBV serology must be sent and increased vigilance is required. ■

Reference

- 1 RECOVERY Collaborative Group. Tocilizumab in patients admitted to hospital with COVID-19 (RECOVERY): a randomised, controlled, open-label, platform trial. *Lancet* 2021;397:1637–45.

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