

Vaccine Supply Update from OGPMS

The Ontario Government Pharmaceutical and Medical Supply Service (OGPMSS) has informed the Health Unit of a number of vaccine supply issues over the next few months:

- **Pediacel:** As a result of supply issues with Pediacel, OGPMS has obtained a supply of Pentacel. Once the remaining supply of Pediacel has been depleted, OGPMS will start distributing Pentacel to Health Units for distribution to healthcare providers for approximately 6 weeks. It is anticipated that after this time, OGPMS will return to only distributing Pediacel. *Reminder:* Pentacel contains two separate packages and needs to be reconstituted (Quadracel with Act-Hib) in order to get the Pentacel formulation.
- **Adacel and Adacel-Polio:** As a result of supply issues with Adacel and Adacel-Polio, OGPMS has obtained a supply of Boostrix and Boostrix-Polio. All 4 vaccine products (Adacel, Boostrix, Adacel-IPV, Boostrix-Polio) will be distributed to Health Units for distribution to Health Care Providers for approximately 3 months. It is anticipated that after this time, OGPMS will return to only distributing Adacel and Adacel-Polio.
- **MMRV:** OGPMS has received a supply of MMRV which is approximately a two month supply for Ontario Health Units to distribute to their healthcare providers. It is anticipated that this stock of vaccine will last until the next shipment is received at OGPMS which will occur in July. Health care providers should ensure that they do not over order to ensure that the stock of MMRV can last for the next two months.

For questions about the vaccine supply, please contact:
Zina Allen, Secretary
705-743-1000, ext 283.

OR

For immunization questions, please contact:
Vaccine Preventable Disease Program
705-743-1000.

Measles Update & Dosage Guidelines

In 2014, many Canadian provinces have experienced measles importations, some of which have resulted in significant spread. Substantial measles activity has been reported in Asia, Europe and Africa. As of May 9, 2014, 19 confirmed cases of measles among 10 public health units (Toronto, Wellington-Dufferin-Guelph, Hamilton, Halton, Middlesex-London, Ottawa, Peel, Simcoe Muskoka, Sudbury and York) have been reported in the Integrated Public Health Information System (iPHIS).

With the cases occurring, it is important that healthcare providers and Ontarians are aware of the importance of up to date immunizations for all vaccines, with a special emphasis on measles. The publicly funded Ontario immunization schedule recommends that MMR vaccine be given at 1 year of age and MMRV vaccine be given at 4 to 6 years of age. Administering a second dose of measles-containing vaccine before the age of 4 to 6 years may be considered under certain circumstances, such as for individuals at higher risk of being exposed to measles during travel outside of North America. In these situations, an accelerated schedule can be implemented, in which two doses of MMR vaccine may be given with a minimum interval of 4 weeks between doses.

For children travelling to countries outside of North America, the ministry publicly funds MMR vaccine as early as 6 months of age, based on the clinical judgment of the health care provider and the needs of the child. If the first dose of MMR is given at less than 12 months of age, two additional doses of measles-containing vaccine must be administered after the child is one year of age to ensure long-lasting immunity to measles.

For more information, please contact:
Vaccine Preventable Disease Program
705-743-1000, ext. 139.

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Safety Announcement For Antimalarial Drug

On July 29, 2013, the U.S. Food and Drug Administration (FDA) advised the public about strengthened and updated warnings regarding neurologic and psychiatric side effects associated with the antimalarial drug mefloquine hydrochloride. A boxed warning, the most serious kind of warning about these potential problems, was added to the drug label. FDA has revised the patient Medication Guide dispensed with each prescription and wallet card to include this information and the possibility that the neurologic side effects may persist or become permanent. The neurologic side effects can include dizziness, loss of balance, or ringing in the ears. The psychiatric side effects can include feeling anxious, mistrustful, depressed, or having hallucinations.

Neurologic side effects can occur at any time during drug use, and can last for months to years after the drug is stopped or can be permanent. Patients, caregivers, and healthcare professionals should watch for these side effects. When using the drug to prevent malaria, if a patient develops neurologic or psychiatric symptoms, mefloquine should be stopped, and an alternate medicine should be used. If a patient develops neurologic or psychiatric symptoms while on mefloquine, the patient should contact the prescribing healthcare professional. The patient should not stop taking mefloquine before discussing symptoms with the healthcare professional.

Malaria is a serious disease caused by a parasite that commonly infects mosquitoes, which then bite humans. It is a major cause of death worldwide but is less common in Canada and the United States. The disease is a problem primarily in developing countries with warm climates. Persons who travel to these countries may be at risk of malaria infection and should take drugs to prevent or reduce that risk. People with malaria often experience fever, chills, and flu-like symptoms. Drugs must be taken to treat the disease if you have been infected, but may, themselves, have side effects.

For more information, visit www.pcchu.ca and go to [For Professionals | Health Professionals](#) under What's New, June 17, 2014 and click [Safety Announcement for Antimalarial Drug](#). As of May 6, 2014, Health Canada has advised that there were no updated warnings regarding neurologic and psychiatric side effects associated with the drug mefloquine in Canada.

For information, please contact:
Travel Clinic Nurses: Sharon Hele or Christine Kayembe
705-743-1000

New Physical Activity Screening Guidelines for Pregnant Women

Current research suggests that healthy pregnant women should be encouraged to participate in 30 minutes of aerobic activity four times per week. The benefits of activity during pregnancy include: improved heart and lung health; muscular fitness; and prevention of excessive weight gain, gestational diabetes and pregnancy induced hypertension.

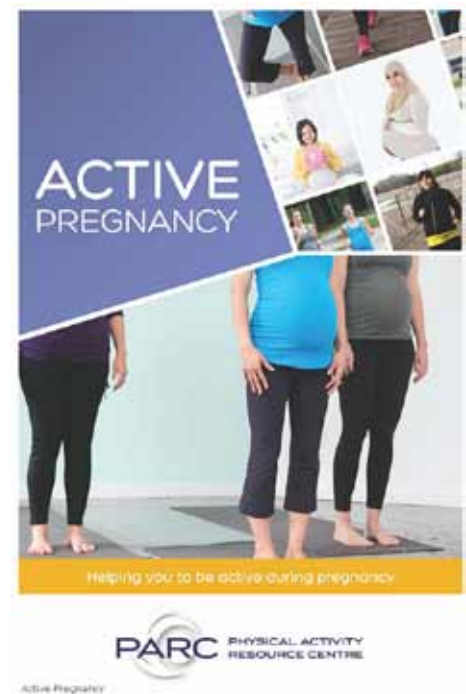
The Canadian Society for Exercise Physiology has updated the **"PARmed-X for PREGNANCY: Physical Activity Readiness Medical Examination"** guidelines for health screening prior to pregnant women participating in a prenatal fitness class or other exercise. Healthcare providers are encouraged to:

- screen pregnant women for contraindications to exercise;
- determine the appropriate "prescription for aerobic activity;" and
- complete the PARmed-X for Pregnancy – Health Evaluation Form.

The "prescription for aerobic activity" is as simple as determining the pregnant woman's age, fitness level/ BMI, and heart rate range. The **PARmed-X for Pregnancy** is available electronically at www.csep.ca.

Now available: The "ACTIVE PREGNANCY" resource developed by Physical Activity Resource Centre. "ACTIVE PREGNANCY" outlines guidelines for safe physical activity during pregnancy. "ACTIVE PREGNANCY" will be provided in the First Prenatal Package and is also available electronically at www.parc.ophea.net.

For information, please contact:
Reproductive Health Program
705-743-1000



Salmonella Infections Related to Sprouted Chia Seed Powder

Public Health Ontario (PHO) is currently investigating a Salmonella outbreak linked to the consumption of various chia seed products. PHO is working with the Public Health Agency of Canada, the Canadian Food Inspection Agency, Health Canada, the Ontario Ministry of Health and Long-Term Care, local public health units, and American public health partners to support an investigation led by the Public Health Agency of Canada.

The Canadian Food Inspection Agency has issued a food recall warning for various chia seed products due to possible Salmonella contamination. Similar chia seed products were also recalled in the United States.

Based on information available as of June 18, 44 cases in Canada and 21 cases in the United States are linked to this outbreak. Symptom onset dates for outbreak-confirmed cases range from December 8, 2013 to May 29, 2014. As the investigation continues, new cases may be reported.

Eight serotypes of Salmonella have been found in chia products: *Salmonella* Newport, *S. Hartford*, *S. Oranienburg*, *S. Saintpaul*, *S. Sandiego*, *S. Carrau*, *S. Gaminara* and *S. subspecies enterica* (I) 6,7:b:-.

There are currently 26 outbreak-confirmed cases in 12 different Ontario public health units:

- *S. Newport*: 11
- *S. Hartford*: 10
- *S. Newport* and *S. Hartford* co-infection: 1
- *S. Oranienburg*: 4

For more information, visit www.pcchu.ca and go to [For Professionals | Health Professionals](#) under What's New, June 20, 2014 and find [Salmonella in Chia Seeds](#).

If you have any questions, please contact
Communicable Disease Program
705-743-1000



West Nile Virus Update

The May 15, 2014 Canadian Communicable Disease Report (40-10) reported that the incidence of West Nile virus (WNV) has waxed and waned in Canada over the past 12 years, but it is unlikely to disappear. Climate change models, which suggest warming temperatures and changing patterns of precipitation, predict an expansion of geographic range for WNV in some regions of Canada, such as the Prairie provinces. Such projected changes in WNV distribution might also be accompanied by genetic changes in the virus and/or the range of bird and insect host species it infects. To minimize the impacts of WNV disease on the health of Canadians emphasis should be placed on primary prevention of human exposure to mosquitoes that may be carrying the virus, with the support of high-quality surveillance of WNV and WNV disease, control of mosquito vectors, and public and professional education. In Canada, a number of these preventive approaches are in place. For more information and brochures, visit www.pcchu.ca and go to [For Professionals | Health Professionals](#) under What's New, June 17, 2014 and click [West Nile virus in Canada: ever-changing, but here to stay](#).



Resources For HCPs

The Health Unit will be offering quarterly information sessions for Family Physicians, Nurse Practitioners and their nursing staff.

Lyme Disease and West Nile Virus

Wednesday, July 23, 2014

8:00 a.m. - 9:00 a.m.

Influenza Update

Wednesday, September 24, 2014

8:00 a.m. - 9:00 a.m.

Antibiotic Resistant Organisms

Wednesday, December 10, 2014

8:00 a.m. - 9:00 a.m.

All the information sessions will be held at the Peterborough County-City Health Unit, 10 Hospital Drive, Board Room

To register please call
705-743-1000, ext. 135
Refreshments Provided

Local Syndromic Surveillance

Reports detail trends in emergency department visits for respiratory, fever, and gastrointestinal symptoms, as well as local institutional outbreaks and school absenteeism.

www.pcchu.ca go to [For Professionals](#) | [Health Professionals | Syndromic Surveillance](#)

Are Your Patients Ready for Extreme Heat This Summer?

With summer quickly approaching and warmer temperatures imminent, the Health Unit has activated its Heat Alert and Response System (HARS) to advise residents of the best way to protect their health when temperatures soar.

The Health Unit has adopted a series of extreme heat thresholds designed to advise the public, health professionals, and community service providers of appropriate measures they can take to reduce the health effects of hot, humid and smoggy weather. Information about these three advisory levels is available at www.pcchu.ca go to [My Home & Environment](#) | [My Environment](#) | [Extreme Weather – Heat](#).

Resources For Patients

Visit www.pcchu.ca for information on:

Fluoride go to [My Life & Health | Parents & Caregivers | Fluoride in Drinking Water](#) and found under [Resources](#). Resources include: Fluoridated Water & Infants, Top 10 Facts about Fluoride, Fluoride Facts for Parents, and more.

Local Beach Testing go to [My Home & Environment | My Community | Beach Testing | Beach Testing Results](#) to find results posted daily.

School Immunization Checklist go to [My Life & Health | Parents & Caregivers | Immunization](#) and found under [Resources](#). Note new vaccinations take effect July, 2014.

Health Events For Patients

Prenatal Classes

Classes are ongoing from 7:00 p.m. to 9:00 p.m. (please call for class dates). All classes are held at the Peterborough County-City Health Unit, 10 Hospital Drive, Peterborough. The cost is \$50.00 and subsidies are available. Please let us know if the fee would prevent your patient from attending.



To register, call the Peterborough County-City Health Unit 705-743-1000, ext. 254

Prenatal Health Fair

Monday, September 30, 2014

6:00 p.m. – 8:30 p.m.

Holiday Inn, 150 George Street, Peterborough

STOP on the Road, Apsley

Coming this Fall 2014

For information, contact

Mary Pat Fasken

705-743-1000, ext. 217

Looking for a specific health topic? Visit the FYI Newsletter archive at www.pcchu.ca