For Your Information

News for Healthcare Providers in Peterborough County and City

Measles Update

Given the current and evolving measles activity, the Peterborough County-City Health Unit is reminding healthcare professionals to remain vigilant for measles in general, and in particular, for patients with compatible signs and symptoms who have traveled to Toronto or internationally (including the United States).

The Acting Chief Medical Officer of Health, Dr. Robin Williams, is issuing this important advisory to individuals who attended the "Acquire the Fire" event, a mass gathering of youth that was held in Toronto at Queensway Cathedral on February 6 and 7, 2015. A

large number of youth from all over Ontario, as well as performers, volunteers and speakers attended this event. As a result of the ongoing investigation into measles cases in this province, the Ministry of Health and Long-Term Care was advised today of a person with a newly-confirmed case of measles who had attended this event during the measles infectious period. Fortunately, most adolescents in Ontario are appropriately immunized with two doses of measles vaccine, and for most, this is highly effective at preventing measles. However, individuals who attended this event and are born after 1970 are requested to review their immunization status to ensure they are protected against measles. Blood testing to check measles immunity is not required or recommended. If they have not been adequately immunized, they are requested to immediately self-isolate by staying at home and contact their local public health unit for important additional guidance. Or they can call Telehealth Ontario at 1-866-797-0000/TTY: 1-866-797-0007. They should not attend any public gatherings and should not attend school, work, daycare, or any post-secondary institutions until they are cleared of measles risk.

At this time, there are no recommended changes to Ontario's routine, two-dose measles immunization schedule. Children should continue to receive their first dose (as MMR vaccine) at 12 months, and their second dose (as MMRV vaccine) between 4 and 6 years of age. However, as per the current schedule, considerations for the following may be made:

- Administering a second dose of measles-containing vaccine prior to 4 to 6 years of age can be considered for individuals under certain circumstances such as those at higher risk of being exposed to measles during travel.
- For infants, the ministry currently publicly funds MMR vaccine for travel outside of North America as early as six months of age, based on the clinical judgment of the healthcare provider and the needs of the child. Effective immediately, this eligibility has been expanded to include travel to regions where measles is a concern, including within North America. Please note that, 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.
- Adults born before 1970 are generally presumed to have acquired natural immunity to measles; however, some of these individuals may be susceptible. As per the current publicly funded immunization schedule, all Ontarians, regardless of date of birth, are eligible for two doses of measles-containing vaccine based on the healthcare provider's clinical judgment and the needs of the patient. A second dose of measles-In this issue... containing vaccine is particularly recommended for adults in the following groups: > Young adults (18 to 25 years of age)

 - > Post-secondary students
 - > Persons who received killed vaccine previously (born between 1967 to 1970)
 - > Healthcare workers
 - >Those who plan to travel internationally

If you have any questions, please contact a nurse in the Reportable Diseases Program at 705-743-1000.

705-743-1000 · www.pcchu.ca 10 Hospital Drive, Peterborough, ON K9J 8M1 H7N9 Confirmed in Canada

Immunization Catch Up in Local High Schools

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2013 Annual Report on Vaccine Safety

Peterborough County-City

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HEALTH



Volume 20 · Number 2 · February 2015

H7N9 Influenza Confirmed in Canada

The Government of Canada and the Ministry of Health in British Columbia have confirmed two human cases of H7N9 in North America. As noted by health officials on January 26, the husband and wife recently returned to Canada from China. The risk to Canadians of getting sick with H7N9 is very low as evidence suggests that it does not transmit easily from personto-person. Since both cases became symptomatic one day apart, it is likely they were exposed to a common source, rather than one having been infected by the other. These individuals are residents of British Columbia and were not symptomatic during travel and began showing symptoms after arrival in Canada. The individuals did not require hospitalization and are currently recovering from their illness. All close contacts of the individuals have been identified and their health is being monitored by provincial public health authorities. The Canadian healthcare system has strong procedures and controls in place to respond to and control the spread of infectious diseases and protect healthcare workers.

While in China, the patients travelled to a location where there were poultry roaming around. This site was also contaminated with poultry droppings. All evidence is indicating that the individual was likely infected following exposure in China.

The risk to Canadians of getting sick with H7N9 is very low as evidence suggests that it does not transmit easily from personto-person. There is no risk of catching the virus by eating wellcooked poultry. Canada does not import raw poultry or raw poultry products from China.

H7N9 is a type of avian influenza virus that has been seen in people in China since 2013. As of January 26, 2015, the H7N9 strain has not been detected in birds in Canada. The avian influenza H7N9 virus is one virus among the larger group of H7 viruses that normally circulate among birds and have occasionally infected humans. Since April 2013, confirmed human cases of H7N9 have been reported in China. The majority of cases have occurred in neighbouring regions in eastern and south eastern China, including the travel-related cases in Hong Kong, Malaysia and Taiwan. Most of those cases reported contact with poultry, usually in live poultry markets. China has reported approximately 500 cases of H7N9 since 2013. The most current information on cases and official case numbers are available on the World Health Organization's Global Alert and Response website.

For more information, please contact a Vaccine Preventable Disease Nurse at 705-743-1000.

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2013 Annual Report on Vaccine Safety in Ontario

Vaccines are safe and have a low risk of adverse reactions, according to results recently published in Public Health Ontario's 2013 Annual Report on Vaccine Safety in Ontario. Of the 8.2 million doses of vaccine distributed in Ontario in 2013, 642 adverse reactions were recorded. Of those, only 27 cases were considered serious—3.3 in every one million doses distributed. The majority of the 642 adverse reactions were mild, such as pain, redness, or swelling around the injection site, rashes and a smaller number of fevers.

Do Your Part to Monitor Adverse Events!

- 1. Advise patients to contact you if they experience an adverse event after vaccination.
- 2. Report adverse events to the Health Unit, using Public Health Ontario's Report of Adverse Event Following Immunization Reporting Form. This is available on *www.pcchu.ca* under For Professionals | Health Professionals | Vaccines.
- 3. For more information on how to report an adverse event, please refer to Public Health Ontario's Adverse Event Following Immunization (AEFI) Reporting Form Provider Questions and Answers.

For a copy of the 2013 Annual Report on Vaccine Safety, visit *www.publichealthontario.ca/vaccinesafety*

By the numbers: 2013* By the numbers: 2013* By the numbers: 2013* By the numbers: 2013* Approximate number of publicly funded vaccine doses distributed in Ontario 64.2 adverse events following fold a sole arms 64.2 adverse events foll averse are very tare. 65.3 an event foll averse averse adverse are very tare. 64.2 adverse events foll averse averse after very tare. 64.2 adverse events foll averse averse after very tare. 64.2 adverse events foll averse averse atter very tare. 64.2 adverse events foll averse averse atter very tare. 64.2 adverse events foll averse averse atter very tare. 64.2 adverse events foll averse averse atter

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For Parents: Please say 'yes' to the 2014 Ontario Child Health Study and School Mental Health Surveys.

Healthcare providers may be asked about the Ontario Child Health Study or the School Mental Health Survey by patients wanting to know if they should take part. Here's some information you can pass along.

The largest and most comprehensive study on child and youth mental health that has ever been done in Ontario is now underway. The study is being conducted through the Offord Centre for Child Studies in partnership with the:

- Ministry of Health and Long-Term Care
- Ministry of Education
- Ministry of Child and Youth Services

Study participation is by invitation only. Sampling is based on place of residence and income in order to identify environmental influences and examine the influence of poverty and income inequality. All information collected is confidential.

The total sample size is over 13,500 households drawn from 180 Ontario communities – and Peterborough is one! From October 2014 to May 2015, Statistics Canada will be inviting 7,000 families with children aged 4 -17 years to complete an interview in their home. Letters were sent to families at the beginning of October and families are now being contacted by Statistics Canada and invited to participate. Information will be collected on up to four children per household, and from the partner/spouse. At the same time, McMaster researchers will be conducting School Mental Health Surveys with students in 240 Ontario schools in the same communities. Dr. Michael Boyle is Principle Investigator, and Canada Research Chair in the Social Determinants of Child Health.

Together, these studies will:

- examine the influence of family, community and school on child and youth mental health;
- determine if children and families are receiving the services they need;
- identify ways to reduce the risk for children's mental health problems; and
- find out if levels of disorder are linked to family income and poverty levels.

Results will be used to help Ontario make funding decisions which improve the prospects and conditions for all children and youth. Encourage your patients to say 'yes' if they are invited to participate. Their involvement will help make our province a better place for children and youth.

For more information, go to: www.ontariochildhealthstudy.ca

2014 Ontario Child Health Study

Immunization Catch Up in Local Highschools

In the coming weeks, public health nurses from the Peterborough County-City Health Unit will be visiting local high schools, offering students a chance to catch up on vaccinations that they may have missed in Grades 7 and 8. All three vaccines are safe, effective, free and highly recommended by the health unit. The meningococcal vaccine is mandatory for all students and is necessary to avoid school suspension, according to the *Immunization of School Pupils Act*. Nurses will begin visiting schools on February 17 and continue until mid-March.

To find out dates, time and locations of nurses' visits, go to *www.pcchu.ca* under Clinics & Classes | Immunization Clinics where there is a specific section for School Immunization Clinics.

Alternatively, if healthcare providers have patients (in high school) in their practice who would prefer to be vaccinated by their physician, the Health Unit has created specific order forms for healthcare providers to obtain school-based vaccines in their office. Please visit *www.pcchu.ca* and under For Professionals | Health Professionals | Vaccines to find the vaccine order forms.

For more information, please contact a Vaccine Preventable Disease Nurse at 705-743-1000.

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Events For HCPs

Model for Refusal Skills: Crucial Conversations Friday, March 13, 2015 12 noon - 1:00 p.m.

Presented by Dr. Peter Selby, Chief of Addictions and Clinician-Scientist at the Centre for Addiction and Mental Health (CAMH).

This free webinar is for primary care physicians and other health care providers. Participants will learn about the crucial conversations model for enhancing refusal skills of healthcare providers regarding prescribing opioids and discuss skills and principles for holding the right conversation. In addition, effective strategies for turning these conversations into results will be reviewed, including factors affecting a safe conversation. Please note that this webinar is not eligible for CE credits.

Register online by clicking here or go to *www.eventbrite.ca* and search for "refusal skills".

Identifying and Managing Neonatal Abstinence Syndrome Wednesday, March 11, 2015 12 noon - 1:00 p.m.

Presented by Dr. Alice Ordean, Medical Director of the Toronto Centre for Substance Use in Pregnancy (T-CUP) at St. Joseph's Health Centre and Associate Professor in the Department of Family and Community Medicine, University of Toronto.

This free webinar is for primary care physicians and other health care providers. articipants will learn about the management of perinatal opioid use disorder and the presentation of neonatal abstinence syndrome (NAS). In addition, effective strategies for comprehensive management of NAS will be reviewed, including factors affecting NAS severity. Please note that this webinar is not eligible for CE credits.

Register by clicking here or go to *www.eventbrite.ca* and search for "Identifying and Managing NAS".

Resources For Patients

Mother Matters: On-line Support Group February 23 to May 1, 2015

The Reproductive Life Stages Program at Women's College Hospital (WCH) is excited to report that the registration for the winter session of Mother Matters online group for postpartum women is now open!

This is group has an online discussion format and is not suitable for women requiring intensive or urgent care or follow-up or who are in crisis. If interested, women can be directed to the visit the WCH Mother Matters site: *www.womenscollegehospital.ca/MotherMatters*. There they can get information about the group, and answer some questions to see if they are eligible to participate in the group.

Please feel free to contact Greer Slyfield Cook, MSW RSW, on behalf of the Mother Matters team, at *mothermatters@wchospital.ca* with any questions.

Health Events For Patients

Prenatal Health Fair

Start your prenatal education early in pregnancy by attending this informative, hands-on event. The Fair is offered two times a year. It showcases displays and demonstrations on a wide variety of topics of interest to both expectant parents and their friends and families. Health professionals and community partners share information, answer your questions, and link you to the many services that can help you on your journey to becoming a parent. Dads-to-be won't want to miss the Empathy Belly and fathering displays.

Enjoy refreshments and a chance to win door prizes. The fair is hosted by the Peterborough County-City Health Unit.

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NEXT PRENATAL HEALTH FAIR IS: Monday, February 23, 2015 6:00 p.m. – 8:30 p.m. Holiday Inn, 150 George Street, Peterborough

View the FYI Newsletter online at www.pcchu.ca under For Professionals | Health Professionals | FYI Newsletter

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