

PANDEMIC PLANNING UPDATE

Since early September preparations have been underway in planning for a pandemic outbreak. With all the discussion about H1N1 in the media, we wanted to take this opportunity to update you, the LDMH staff, on what we do know and what we have been doing to prepare. It is important that you understand that directives and information from Health Canada, the Ministry of Health and Long-Term Care and the Public Health Unit are changing regularly and we are doing our utmost to stay informed of the latest developments.

SUPPLIES AND INVENTORY

We have been reviewing the MOHLTC Guidelines for suggested inventory for pandemic outbreak and preparing our stockpile inventories. We do have a 4 day on-site supplies inventory of Personal Protective Equipment (PPE) and other pandemic supplies. We also have an off-site 4 week inventory stockpile of N-95 masks and other outbreak supplies. Recommended PPE for an outbreak situation includes: N95 and procedure masks, gowns, face shields and gloves. We are working with our suppliers to ensure we have enough supplies and back-up available for both suspected cases we may see admitted prior to an outbreak and during an outbreak situation. Currently the Ministry is monitoring and approving the release of supplies to hospitals and other health service organizations. Staff is reminded that N95 masks are only for hospital staff and those who have been fit tested, not for distribution to family and visitors. Any staff that needs to be fit tested should set up a time with the Respiratory Therapy department.

H1N1 VACCINES

The Windsor-Essex Public Health Unit does have initial doses of H1N1 vaccine. They are currently in discussions with the hospital's Infection Control & Occupational Health and Safety practitioners regarding the distribution and administration of those vaccines to Health Care staff and workers. Tracey MacFie will be sending out more information regarding clinics at LDMH and how and when staff will receive their H1N1 vaccinations. We encourage all staff to be vaccinated once the vaccine is available. We know there are a lot of questions and myths in the public about the H1N1 vaccine and we encourage all staff to become informed. We have attached information from the Public Health Agency of Canada and the Public Health Unit. More information is available on the internet at: www.fightflu.ca; www.wechealthunit.org; or Health Canada - <http://www.phac-aspc.gc.ca/alert-alerte/h1n1/index-eng.php>.

PLANNING AND PREPAREDNESS

It is important that all Health Care workers recognize that they may be called on to work in extreme circumstances if there is a large outbreak within our community. We know schools and businesses may be closed and we encourage everyone to have a personal preparedness plan. It is important that you think about and discuss with your family who will care for your children or family members when you are required to be at work. During a pandemic outbreak we, as health care workers, will be called upon to protect and serve our community and we recognize that the services and care we provide may have to change. We know it will not be business as usual. As part of the LDMH planning we are currently contacting retired workers to see if there would be interest from individuals to work in the event we require additional assistance.

NEXT STEPS

We are currently finalizing the Influenza Immunization Policy. This policy will outline our Human Resource expectations for staff regarding immunization. Once the policy has been finalized it will be distributed to all staff for review. We are also finalizing our internal flow and services plan which outlines where and when suspected influenza patients will be admitted, when elective and non-essential services will be discontinued and how staff will be redeployed in the event of a pandemic outbreak. We will also be distributing a procedure for how to call in and report your illness for staff in the event that you become ill and are unable to report to work. As more information becomes available we will do our best to communicate it directly to you. We will also be hosting an integrated planning meeting with our community health service partners (EMS, FHT, LTC representatives) on November 4, 2009 to have further discussion with our community on this issue.

QUESTIONS

If you have any questions please contact Tracey MacFie, your Manager or any member of the Pandemic Planning Team: Sarah Padfield, Roberta Jarecni, Rose Costa, Janice Dawson, Cheryl Deter, Rosemary Lemmon, Tom Marshall, Jason Keane, Irene McClymont, Tracey MacFie, Liz Chaplain.

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H1N1 FLU VACCINE



VACCINE INFORMATION



What is H1N1 Influenza?

H1N1 flu virus is a respiratory disease caused by Type A influenza viruses. These viruses have been reported to spread from person to person, but in the past this transmission was limited.

In Ontario, the H1N1 flu vaccine is available free at the health unit community H1N1 flu clinics.

People who work, live, or study in Ontario are eligible for the free flu shot.

JUST THE FACTS

How is H1N1 flu spread?

The H1N1 virus spreads the same way as seasonal flu. An infected person releases the virus into the air by talking, coughing, and sneezing. Everything a sick person touches, such as toys and doorknobs, also spreads the virus, which stays active on surfaces for up to 48 hours. If you touch your nose or eyes after touching a contaminated surface, then you can become infected.

Why should I get a H1N1 flu shot?

Anyone can get the H1N1 flu. By getting the H1N1 flu shot you can save yourself from a couple of unpleasant weeks being sick or becoming seriously ill. It is also important for everyone to get an H1N1 flu shot to reduce the risk of spreading the infection to people who are at a high risk of getting life-threatening complications from the H1N1 flu.

How does the H1N1 flu shot protect you against H1N1 flu?

The H1N1 vaccine is made exactly like the seasonal flu vaccine but it contains a helper substance called adjuvant. The adjuvant is added to help the body make good protection (also called immune response) against Pandemic H1N1 infection. This protection helps the vaccinated person from getting sick if exposed to the H1N1 virus.

The H1N1 vaccine doesn't protect you from seasonal flu. Therefore, this year you will need both a seasonal vaccine and an H1N1 vaccine to get the best possible protection from influenzas. The vaccines can be given at the same time as other vaccines but are given in a different site (part of the body).

How many H1N1 flu shots do I need this year?

- ♦ Children from six months of age up to and including nine years of age will need two doses of vaccine, with at least 21 days (Three weeks) between each dose.
- ♦ Anyone 10 years of age and older will need just one dose.

Older children and adolescents can consent to their own vaccinations if they are able to understand the benefits and risks of receiving and not receiving the vaccine.

Who should get the H1N1 flu shot?

Those who would benefit the most from immunization and/or those who care for them:

- ♦ People with chronic medical conditions, under age 65.
- ♦ Pregnant women.
- ♦ Healthy children from six months to five years old.
- ♦ Persons residing in remote and isolated settings or communities.
- ♦ Health care workers involved in pandemic response or the delivery of essential health care services.
- ♦ Household contacts and care providers of persons at high risk who cannot be immunized or may not respond to vaccines.

Who shouldn't get the H1N1 flu shot?

You shouldn't get the H1N1 flu shot if:

- ♦ You had a previous anaphylactic (severe allergic reaction) to any element of the vaccine.
- ♦ You have a hypersensitivity to eggs or thimerosal (e.g. hives, swelling of the mouth and/or throat, or difficulty breathing).
- ♦ You have a high fever.
- ♦ You have previously experienced Guillan-Barré Syndrome within eight weeks of receiving a seasonal flu vaccine.

The H1N1 vaccine isn't approved for infants under six months of age.

Is the H1N1 flu shot safe for women who are pregnant?

Pregnant women should receive the H1N1 vaccine **without** the adjuvant if it's available. They can receive the vaccine **with** the adjuvant if:

- ♦ There is a lot of Pandemic H1N1 influenza in the community.
- ♦ They have ongoing medical problems.
- ♦ They are more than half way through their pregnancy (over 20 weeks).

The vaccine hasn't been specifically studied in pregnant women, however, the vaccine is being used in Europe in pregnant women.

For more information.

Windsor-Essex County Health Unit

<http://www.wehealthunit.org/diseases-conditions/h1n1-virus>
519-258-2146 ext. 1444

Health Canada

<http://www.phac-aspc.gc.ca/alert-alerte/h1n1/index-eng.php>

Ministry of Health and Long-Term Care

<http://www.health.gov.on.ca/en/ccom/flu/>

References:

Public Health Agency of Canada (2009). H1N1 flu vaccine authorization. Media lines. H1N1 vaccine guidance, 2009.

Glaxo Smith Kline Inc. (2009). Product information leaflet. Arepanrix™ H1N1. ASO3 adjuvanted H1N1 pandemic influenza vaccine. Emulsion for injection. ATC code J07BB02.

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Can the H1N1 flu shot cause the flu?

No. The vaccine doesn't contain live viruses so you can't get the flu from the vaccine.

The vaccine won't protect you against colds and other respiratory illnesses that may be mistaken for the flu.

Are there any side effects to the flu shot?

The H1N1 flu shot, like any medicine, can cause side effects. The very common and common side effects are usually mild and should only last a day or two.

Very Common

- Soreness, redness, or swelling where the shot was given
- Headache
- Fatigue
- Shivering
- Sweating
- Muscle aches and joint pain

Common

- Bruising, itching, and warmth where the shot was given
- Fever
- Swollen Lymph nodes
- Feeling sick, diarrhea

Uncommon

- Tingling or numbness of the hands or feet
- Sleepiness
- Sleeplessness
- Dizziness
- Vomiting
- Stomach pain
- Rash

All of these side effects usually disappear within one to two days without treatment. If they persist, **Seek medical attention.**

A more serious illness called Guillain-Barré syndrome (a severe paralytic illness also called GBS) has occurred very rarely after the administration of seasonal flu vaccine. All age groups can be affected but GBS is most common in the elderly population.