



Healthcare Provider Webinar
Middlesex and London Region
February 21, 2024

Welcome

Presenter:

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February 21, 2024

Outline

- Respiratory Season Updates
- Invasive Group A Streptococcal Disease (iGAS) Rates Continue to Rise
- Middlesex-London Syphilis Rates Climbing
- Toxic Drug Supply in Ontario
- Immunization Services Available in Health Unit Run Clinics
- Childhood Vaccination Services in Middlesex-London Area
- RSV Vaccine
- Publicly Funded Tuberculosis (TB) Skin Test
- Healthcare Provider Webinars



Respiratory Season Updates

Respiratory Transmission Risk Assessment

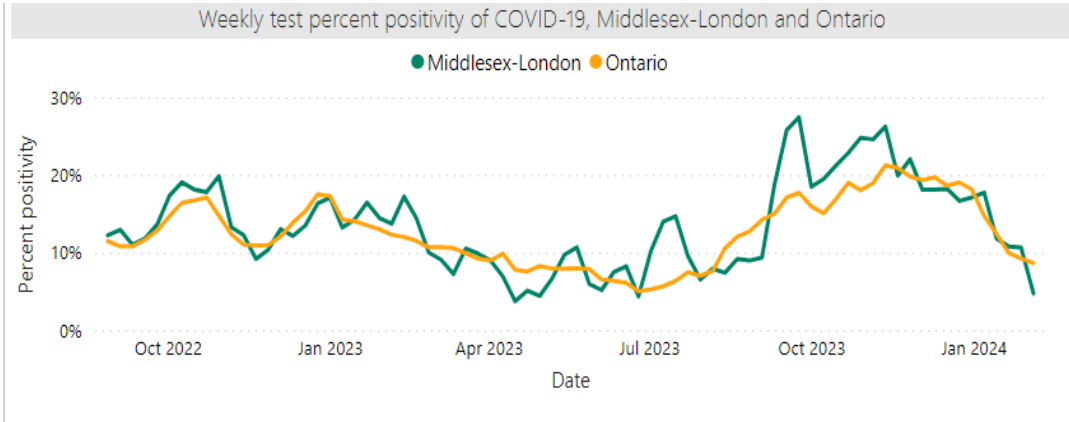
Middlesex-London region is in a High Risk Period for Respiratory Illness

Indicator	Status
▲ 1. New respiratory outbreaks in health care facilities	Low
2. Respiratory hospitalizations	Low
3a. % positivity for COVID-19	Low
3b. % positivity for influenza	Medium
4. Wastewater surveillance trend of COVID-19	Very high

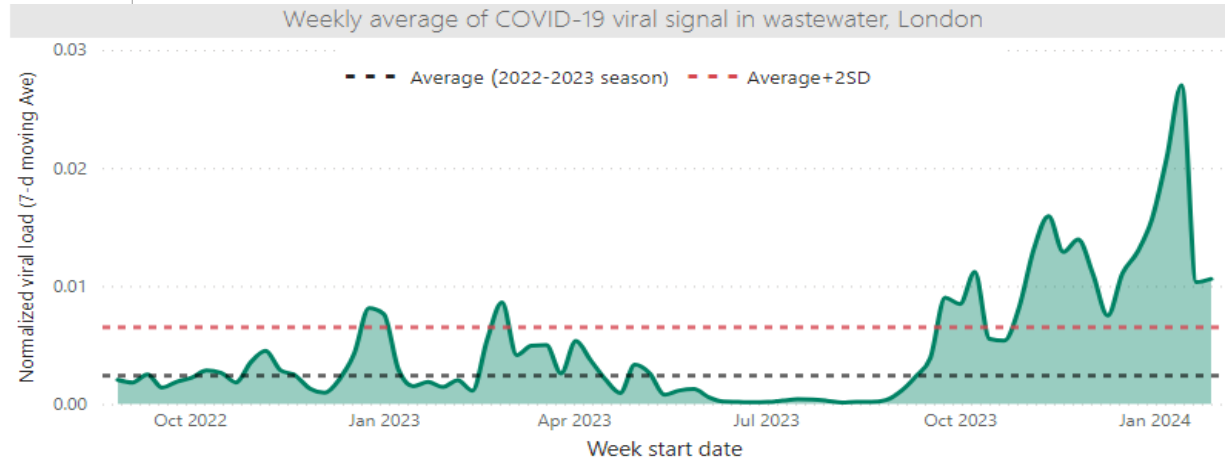
COVID-19 Summary

<u>Local</u> metrics	Week 06 (Feb 04 - Feb 10, 2024)	Season to date (Aug 27, 2023 - Feb 10, 2024)	Trend (compared to previous week)
Laboratory-confirmed cases	32	2,531	Decreased
Deaths	0	43	Decreased
Active outbreaks	As of the end of Feb 12, 2024:		Decreased
Local test positivity	Percent of tests positive: 4.7% Positivity level: Low		Decreased
<u>Provincial</u> metrics	Week 05 (Jan 28 - Feb 03, 2024)		
Provincial weekly indicator change			Lower

Data source: Middlesex-London Health Unit – *Middlesex-London Respiratory Surveillance Report*, extracted 2024-02-13. Data current as of the end of day 2024-02-13. <https://app.powerbi.com/view?r=eyJrljoiMzE5MzJIOTItOWE2ZS00MDNILTikNDEtMTcyYTg5OGFhMTFiliwidCI6ImRjNTYxMjk1LTdjYTktNDFhOS04M2JmLTUwODM0ZDZhOWQwZiJ9>



Source: Visual Analytics Hub, Capacity Planning and Analytics Division, Ontario Ministry of Health.



Source: Ontario Wastewater Surveillance Initiative Data and Visualization Hub.

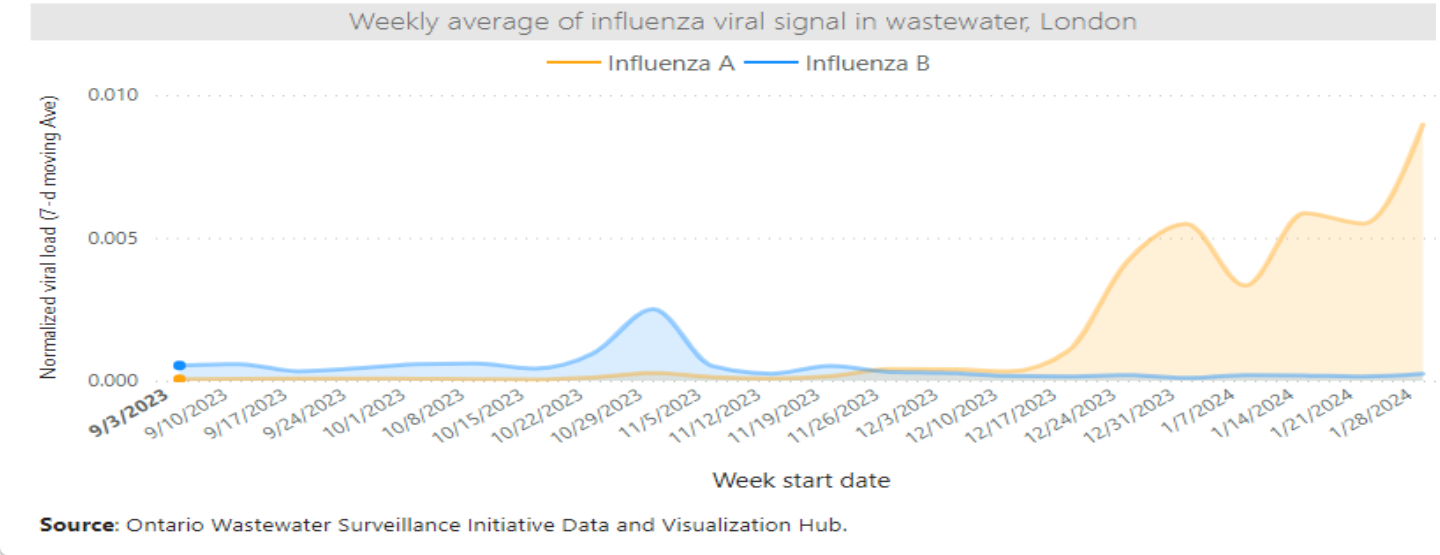
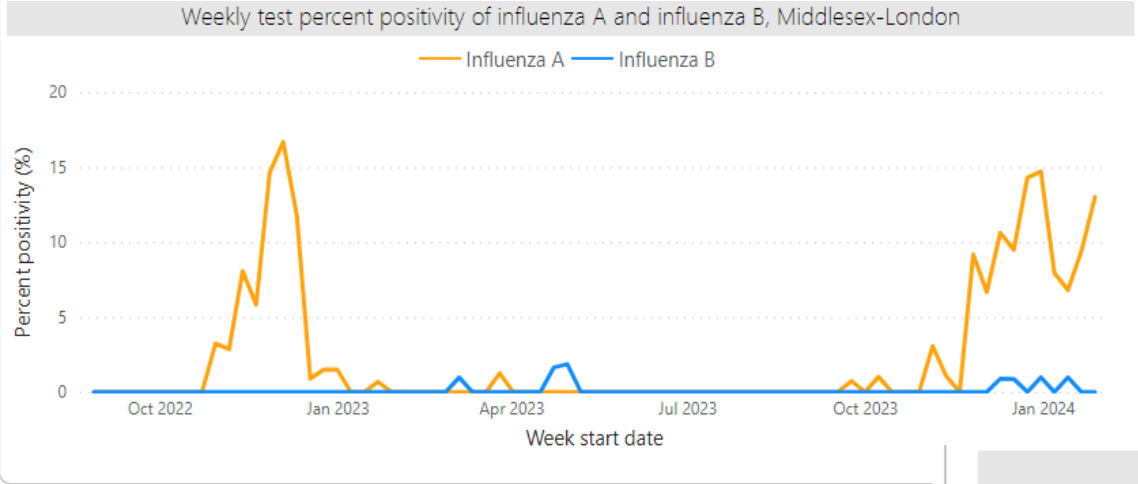
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Influenza Summary

Local metrics	Week 06 (Feb 04 - Feb 10, 2024)	Season to date (Aug 27, 2023 - Feb 10, 2024)	Trend (compared to previous week)
Laboratory-confirmed cases	51	561	Similar
Influenza sub-types	Influenza A: 48 Influenza B: 3 Influenza A and B: 0	Influenza A: 529 Influenza B: 31 Influenza A and B: 1	Same Similar Decreased
Deaths	1	6	Same
Active outbreaks	As of the end of Feb 12, 2024:	0	Decreased
<u>Provincial</u> metrics	Week 05 (Jan 28 - Feb 03, 2024)		
Local influenza activity level	Activity level: Localized		
Provincial test positivity	Percent of tests positive: 9.5% Positivity level: Low		
Provincial weekly indicator change			Similar

Data source: Middlesex-London Health Unit – *Middlesex-London Respiratory Surveillance Report*, extracted 2024-02-13. Data current as of the end of day 2024-02-

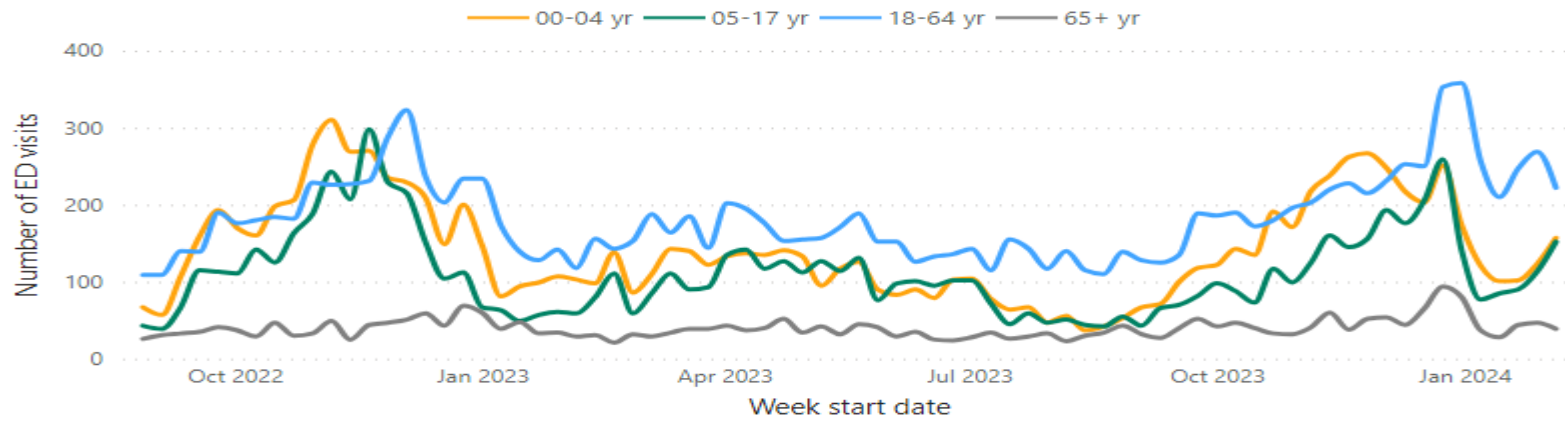
13 <https://app.powerbi.com/view?r=eyJrIjoiMzE5MzJlOTItOWE2ZS00MDNlTlknNDEtMTcyYTg5OGFhMTFiliwidCI6ImRjNTYxMjk1LTdjYTktNDFhOS04M2JmLTUwODM0ZDZhOWQwZiJ9>



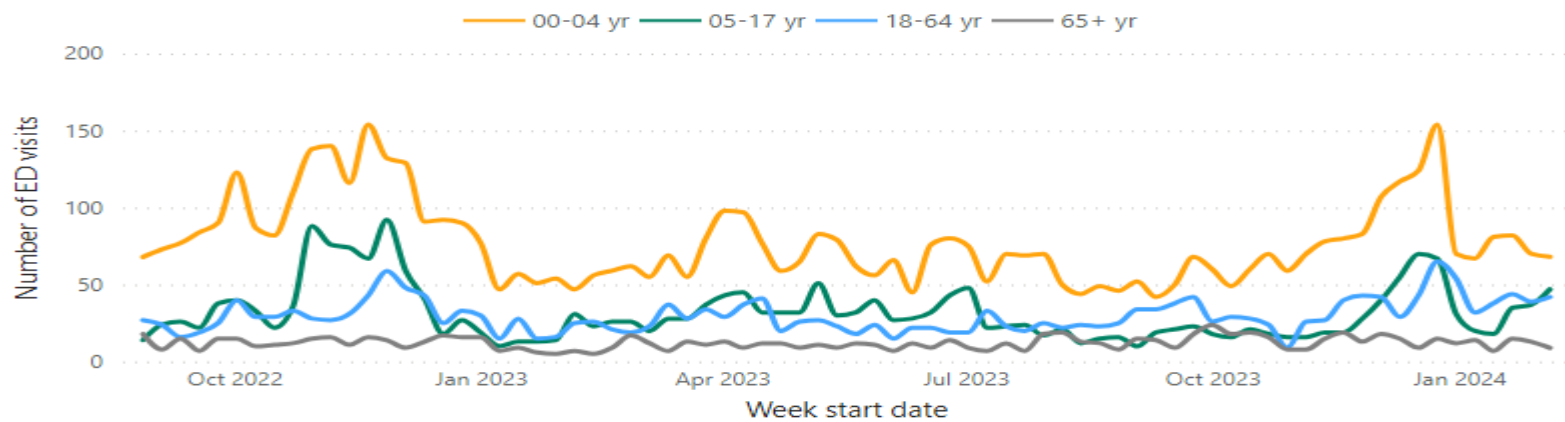
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Clinical Syndromic Surveillance

Weekly ED visits due to respiratory syndrome by age group in Middlesex-London



Weekly ED visits due to influenza-like illness (ILI) syndrome by age group in Middlesex-London



Data source: Middlesex-London Health Unit – *Middlesex-London Respiratory Surveillance Report*, extracted 2024-02-13. Data current as of the end of day 2024-02-13. <https://app.powerbi.com/view?r=eyJrljoiMzE5MzJlOTItOWE2ZS00MDNlLTlkNDEtMTcyYTg5OGFhMTFiliwidCI6ImRjNTYxMjk1LTdjYTktNDFhOS04M2JmLTUwODM0ZDZhOWQwZiJlJ9>



Invasive Group A Streptococcal Disease (iGAS) Rates Continue to Rise

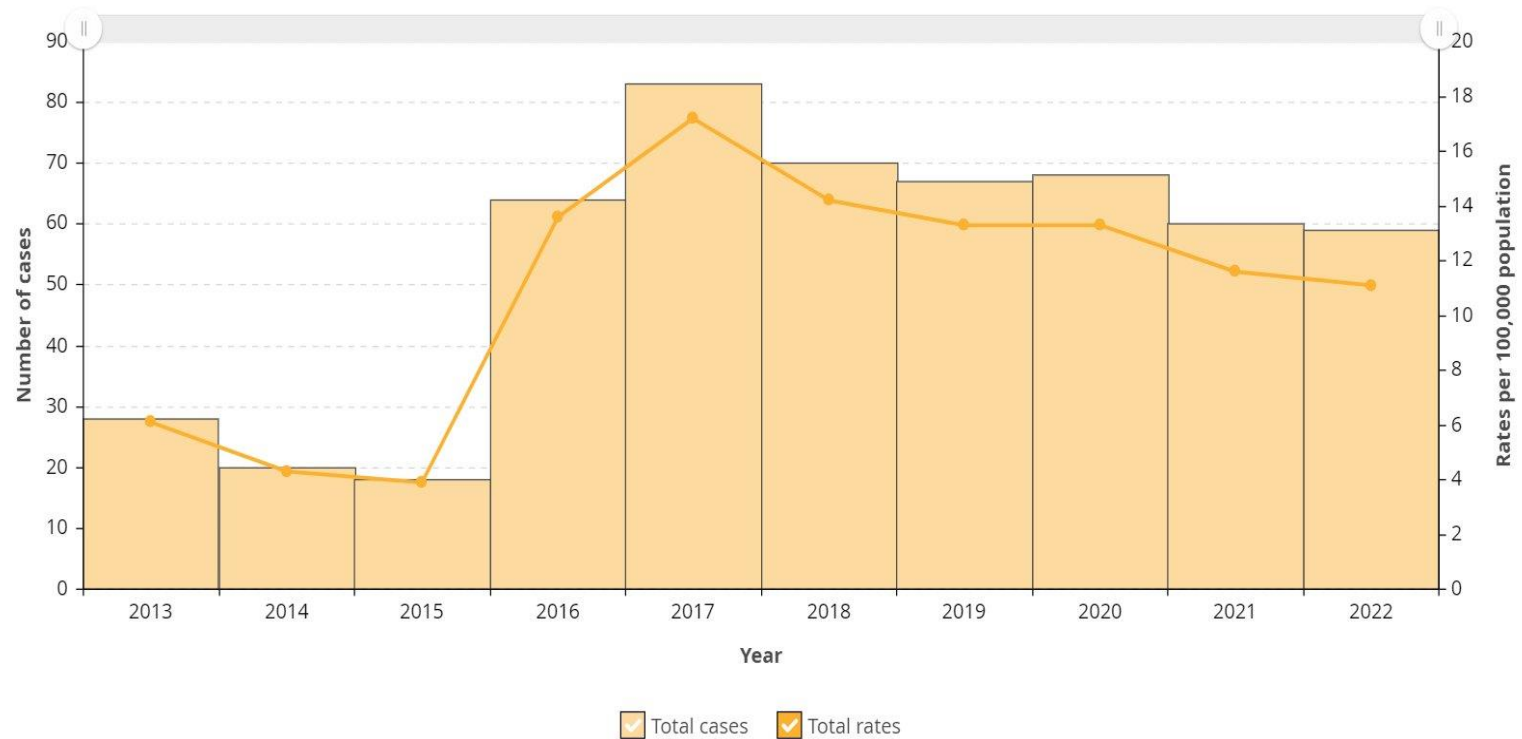
Invasive Group A Streptococcal Disease (iGAS) Rates Continue to Rise

Rates of Invasive Group A Streptococcal Disease (iGAS) continue to increase across Canada. In 2023, Middlesex-London identified:

- 100 iGAS cases reported to the Middlesex-London Health Unit (MLHU), exceeding the annual average of the previous 5 years of 65 cases
- 12 cases were fatal
- 43% were over the age of 65 years
- Annual rate among Middlesex-London was 18.6/100,000 population compared to Ontario average of 12.6/100,000

Group A Streptococcal disease, invasive

Group A Streptococcal disease, invasive rates and cases for all ages, for all sexes, in Middlesex-London Health Unit



Invasive Group A Streptococcal Disease (iGAS) Rates Continue to Rise

- Invasive Group A Streptococcal Disease (iGAS) is a [Disease of Public Health Significance](#) that must be **reported immediately** due to the need for public health follow-up.
- In cases that are clinically severe, post exposure prophylaxis with antibiotics may be indicated for close contacts.
- While most sore throats are caused by viruses not GAS, we do recommend the treatment of strep throat with antibiotics to prevent progression to invasive disease and limit transmission to contacts.



Middlesex-London Syphilis Rates Climbing

Middlesex-London Syphilis Rates Climbing

- Cases are now being seen amongst all patient populations
- Unfortunately, rare cases of congenital syphilis are also being seen
- It is critical to maintain a high index of suspicion across all demographics
- Given the rising syphilis rates, we are asking for your support by assessing sexual history for patients presenting with new maculopapular rashes
- Please consider including a VDRL/Syphilis screen in your diagnostic approach.

Middlesex-London Syphilis Rates Climbing

- Detecting these cases can be challenging due to the inconspicuous nature of primary syphilitic chancres, often overlooked by patients as they are typically painless
- Additionally, the maculopapular rash that can be seen with secondary syphilis can often be mistaken for various conditions such as drug or allergic reactions, pityriasis rosea, dermatitis, or similar rashes
- At the Middlesex-London Health Unit (MLHU) Sexually Transmitted Infections (STI) Clinic, we have an ample supply of Bicillin and are fully equipped to provide comprehensive treatment for all cases.
- Additionally, for acute syphilis, the use of doxycycline 100 mg PO BID for 14 days is a viable option, accompanied by appropriate counseling on abstinence



Toxic Drug Supply in Ontario

Toxic Drug Supply in Ontario

- New toxic drugs are being added to the drug supply that are considered more potent, and are not opioids, meaning **naloxone will not reverse their effects** in an overdose situation.
- However, Naloxone will work on any opioids that are likely present alongside these new drugs.

Toxic Drug Supply in Ontario

Newly identified drugs:

- Medetomidine: a tranquillizer only approved for use in animals.
- Dexmedetomidine: approved for use on humans and animals for sedation and pain relief.
- Other drugs have been identified in substances containing [opioids](#), including [benzodiazepines](#) and [xylazine](#).
- For more information, visit the Toronto's Drug Checking Service

Toxic Drug Supply in Ontario

In these cases, Naloxone reverses opioid toxicity but has no effect on the sedating properties that may persist; and there are no approved treatments or reverse agents beyond supportive care.

Please reinforce harm reduction messages and caution clients to be careful when using any unregulated drugs as the supply may be stronger than usual.

Reduce Potential Harms

Don't Use Alone

- Remind individuals, avoid using alone; if you must use alone, let someone know before you use.
- Use at a **supervised consumption site**: [Carepoint Consumption and Treatment Service Site](#), London
- Use in as safe a place as possible. Test a small amount of drug first: start low and go slow.
- If using alone, consider calling the [National Overdose Response Service](#) at 1-888-688-NORS (6677)

Carry a Naloxone Kit (also known by brand name Narcan)

Free naloxone kits are available at some pharmacies

- [Where to get a free naloxone kit](#)
- Tell the person you are with where your Naloxone kit is located if needed
- If someone you are with experiences an overdose call **911**



Immunization Services Available in Health Unit Run Clinics

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The Middlesex-London Health Unit's (MLHU) Immunization Clinic continues to provide immunization services to residents of London and Middlesex County who qualify.

Due to the increase in demand for immunization services, the MLHU is actively encouraging individuals to seek immunization services from primary healthcare providers and walk-in clinics.

Immunization Services available in Health Unit Run Clinics

Appointments are available at London and Strathroy immunization clinics for individuals who:

- Do not have health care coverage in Ontario (i.e., Ontario Health Card).
- Arrived as a newcomer to Canada within the past 12 months and under 18 years of age.
- Require post-exposure prophylaxis related to a vaccine preventable disease case or community outbreak.
- Require specific publicly funded vaccines that are only available in public health unit run clinics (e.g., MPOX vaccine).
- Missed receiving vaccines normally offered as part of the grade 7 school program and their Healthcare Provider (HCP) does not offer these vaccines (e.g., Hepatitis B, Meningococcal ACYW-135, and HPV).

Immunization Services available in Health Unit Run Clinics

Patients outside of these categories will be referred to their healthcare provider or to a walk-in clinic.

If you do not have the vaccine your patient requires in stock, you can order it from the health unit at [Immunization - Middlesex-London Health Unit](#)



Childhood Vaccination Services in Middlesex-London Area

Childhood Vaccination Services in Middlesex-London Area

- As we screen student vaccination records, your clients may come to you with a letter from MLHU detailing which vaccines they require.
- The focus of the MLHU's Immunization Clinic is to provide services to priority populations, primarily those who do not have a Healthcare Provider (HCP) or OHIP coverage.
- There has been an increase in children and adolescents being booked for appointments to be vaccinated at the MLHU Immunization Clinic who do not meet the definition of a priority population, including clients calling to state they have a HCP but have been unable to book an appointment.
- This has resulted in long wait times at the MLHU Clinic and students being behind in immunizations; putting the community at risk for outbreaks and students at risk of suspension, as per the Immunization of School Pupils Act.

Offering Vaccines in Your Practice

- If you currently do not offer vaccine or OHIP insured TB skin testing services as part of your health care practice and are interested in doing so, or if you are interested in offering vaccine services to individuals that do not have a family physician, email Shots@mlhu.on.ca and a Public Health Nurse (PHN) will connect with you.
- Everyone has a part in ensuring that children, families, and our community are protected from vaccine preventable diseases!



RSV Vaccine

RSV Vaccine

When ordering vaccine in the MLHU online Public Health Ordering System (PHOS), you will note that RSV vaccine is available to order for clients.

Please review the following information to see what your workplace is eligible to order:

RSV Vaccine

Hospitals, Long-Term Care Homes, Indigenous Health Care Centers on-reserve and Retirement Homes with a licensed dementia unit:

- Can order by “batch”, to allow for bulk ordering for those currently in their care or who qualify.

All other health care providers:

- Can order for each individual patient using “high-risk” criteria. The patient’s information, including their eligibility will be required to verify the vaccine order. This vaccine is not currently available in enough quantity to have on-hand in healthcare provider vaccine fridges.

RSV Vaccine

Eligibility:

- **Individuals 60 years and older* who reside in one of the following settings:**
 - A long-term care home; or
 - An Elder Care Lodge; or
 - A retirement home licensed to provide dementia care services; or
 - ALC patient (in-hospital)

RSV Vaccine

Eligibility:

- **Individuals 60 years and older*** in the following eligible categories:
 - Hemodialysis or Peritoneal Dialysis patients*
 - Solid organ or Hematopoietic Stem Cell Transplant patients (at least 3-6 months posttransplant, with a one month minimum at specialist's discretion) *
 - Indigenous individuals, including urban dwelling (does not include household members)
 - Homeless individuals

***Note:** for individuals followed by dialysis or transplant program teams, RSV vaccine coordination and planning was to be done by the teams. Patients who live remotely from their centre, or who do not attend for regular appointments, may seek the vaccine from their own healthcare provider.

RSV Vaccine

- Pharmacies do not have access to publicly funded RSV vaccine, so the eligible individuals in the list above cannot go to a pharmacy for this vaccine.
- For others over the age of 60 years who would like to receive this vaccine, but are not eligible for a publicly funded dose, healthcare providers can write a prescription to obtain it at a cost from a pharmacy.



Publicly Funded Tuberculosis (TB) Skin Tests

Publicly Funded Tuberculosis (TB) Skin Tests

- The MLHU immunization clinic is no longer booking appointments for TB skin tests (TSTs), recommended, or required for medical purposes.
- Patients will be referred back to their healthcare provider or to a walk-in clinic for TSTs. The MLHU continues to provide TSTs as part of contact follow-up for TB.

Publicly Funded Tuberculosis (TB) Skin Tests

- Healthcare providers can order publicly funded tuberculin skin test solution (brand name: Tubersol®) from the health unit for OHIP-insured TB skin testing.
- Eligibility criteria is available in a health services provider [INFOBulletin \(Number 4692\)](#), available online at OHIP Bulletins: Physician Services (issued January 30, 2017).
- Publicly funded Tubersol® should not be used for employment related purposes.
- In these situations, Tubersol® can be purchased by a physician/nurse practitioner and sold to the patient or purchased by a client from a pharmacy with a prescription from a physician/nurse practitioner.
- It is important to keep publicly funded and purchased Tubersol® separate in your vaccine fridge.



Healthcare Provider Webinars

eNewsletter and Webinar Schedule

- eNewsletters will continue twice a month
- Upcoming webinars:
 - March 19, 2024
 - April 16, 2024

Thank you for joining us!

Questions?

- Ask using chat function now, or after the webinar at:
healthcareproviders@mlhu.on.ca
- For urgent matters please call the Health Unit's
main line at **519-663-5317**
- For more information
www.healthunit.com/healthcare-providers

