



**Healthcare Provider Webinar**  
Middlesex and London Region  
August 9, 2022

# Welcome

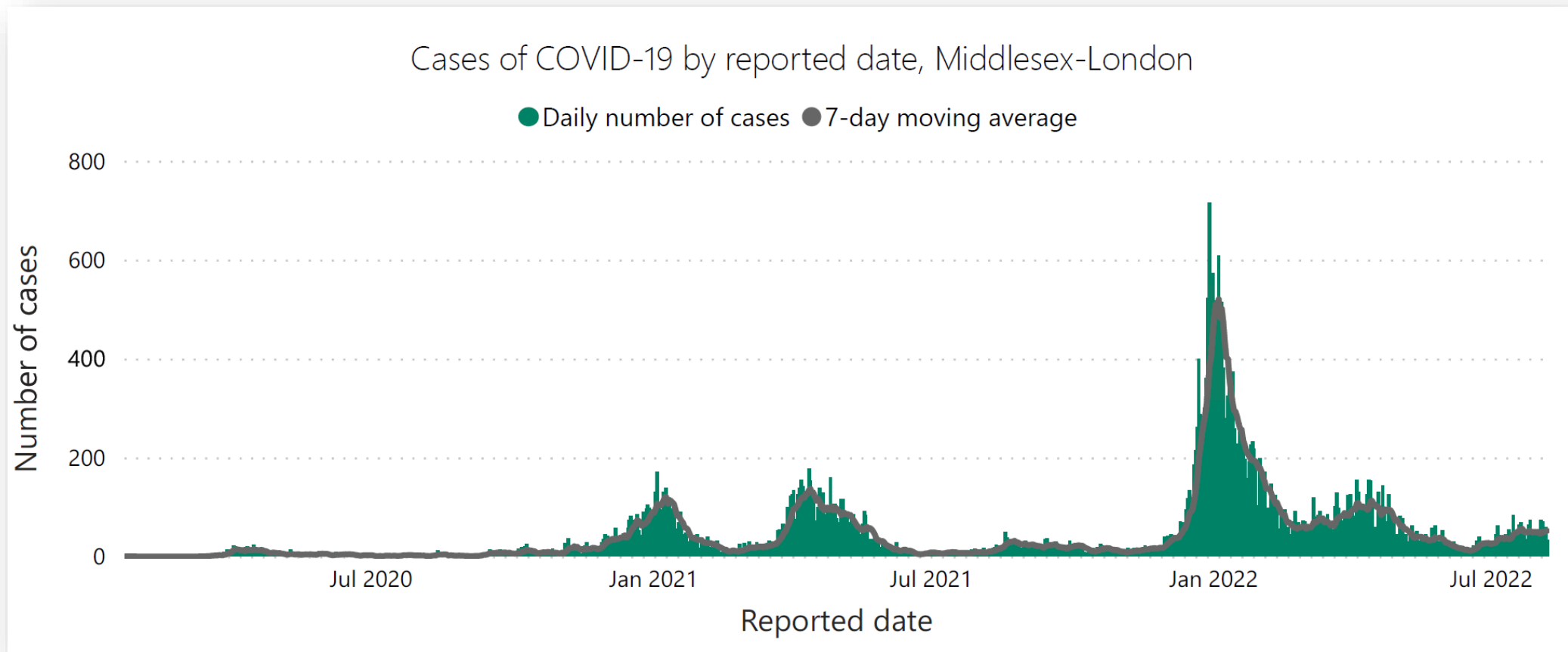
Presenter:

**Dr. Alex Summers**

Medical Officer of Health  
Middlesex-London Health Unit

 @alexsummers4

# Cases by Reported Date



**Data source:** Ontario Ministry of Health (Ministry) *Public Health Case and Contact Management Solution (CCM)*, extracted 2022-08-08 Data current as of the end of day 2022-08-08.

## Expanded Eligibility for Second Booster

- As of July 14<sup>th</sup>, all individuals 18 years of age and older in London and Middlesex County are now able to receive a second booster dose of COVID-19 vaccine.
- It is recommended that a second booster dose be administered **five months after an individual received their first booster dose** of vaccine (minimum interval of three months).
- The Health Unit strongly recommends that individuals book their second booster dose vaccination appointment in advance at [www.covidvaccinelm.ca](http://www.covidvaccinelm.ca), using Gate 1.
- Appointments can also be booked over the phone by calling 226-289-3560, from 9:00 a.m. to 5:00 p.m., Monday to Friday.

# Pediatric COVID-19 Vaccine Now Available

- Parents, guardians and caregivers of children between the ages of **six months and five years** can book appointments for the COVID-19 vaccine as of July 28<sup>th</sup> ([www.covidvaccinelm.ca](http://www.covidvaccinelm.ca)).
- The lower-dose Moderna vaccine is available at mass vaccination clinics (Western Fair District Agriplex and Caradoc Community Centre in Mount Brydges).
- **Note:** the pediatric dose of COVID-19 vaccine **cannot be given within two weeks after or before a child receives any other vaccines.**
- Immunocompromised children between 12 and 17 years old can receive a second booster dose (fifth dose) of vaccine once 168 days have passed since their last dose.

# Joining the COVID-19 Vaccine Distribution Program

- Healthcare providers plan an instrumental role in supporting vaccine uptake; for many, having a personal conversation about a vaccine with their healthcare provider is the key to getting vaccinated.
- Some people may experience barriers to being vaccinated at a mass vaccination clinic and having the option to be vaccinated by their trusted healthcare provider may be the only way to ensure they stay up to date on vaccinations.
- By participating in this program, your office and clinic can provide an important service for your patients/residents and contribute to the community response during these unprecedented times.
- If you are not signed up to administer the COVID-19 vaccine, MLHU encourages you to consider joining the [COVID-19 Vaccine Distribution Program](#).
  - To sign up, please visit: <https://www.healthunit.com/covid-19-vaccine-distribution-program>.

# Monkeypox Guidance Documents Updates

- MOH has released a new reference document, [Recommendations for the management of cases and contacts of monkeypox in Ontario](#) to replace PHO's Interim Case and Contact Management Guidance for Local Public Health Units
- [The Infectious Disease Appendix for Smallpox and other Orthopoxviruses including Monkeypox](#) has also been updated to refer to this new document
  - Monkeypox case definitions have been updated (p. 4-5)



# Key Updates re: Case and Contacts of Monkeypox

- New phased isolation approach, including the 12- week recommended time for barrier method use (e.g. condoms) during any sexual activity following monkeypox symptom resolution.
- Guidance for when to exclude infants and young children who are high-risk contacts from group daycare/childcare settings
- Guidance regarding risk exposure criteria, and examples for:
  - Healthcare workers who are contacts of patient monkeypox cases, and
  - Patients who are contacts of healthcare worker monkeypox cases



# Cannabis

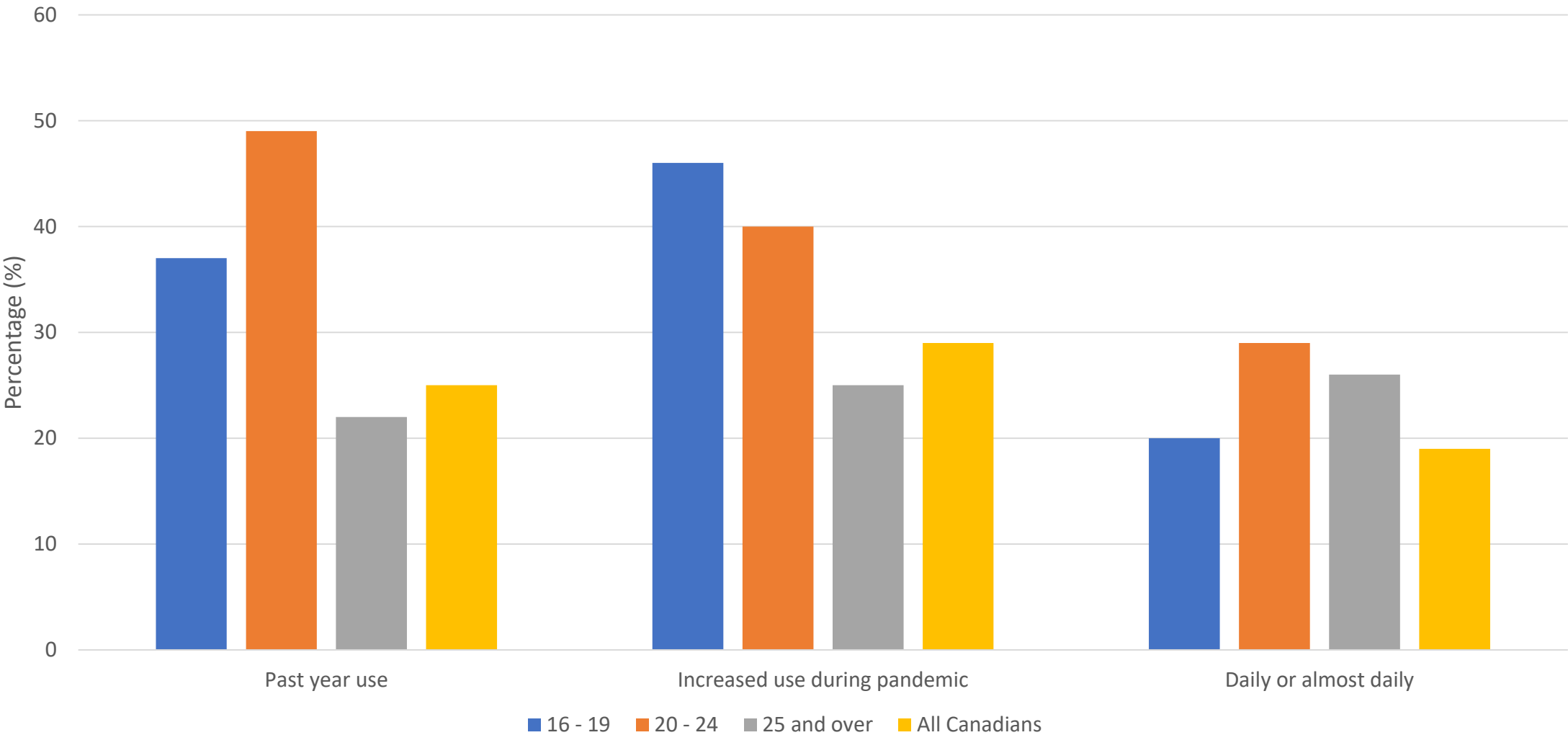
Dr. Summers & Tarryn Azevedo



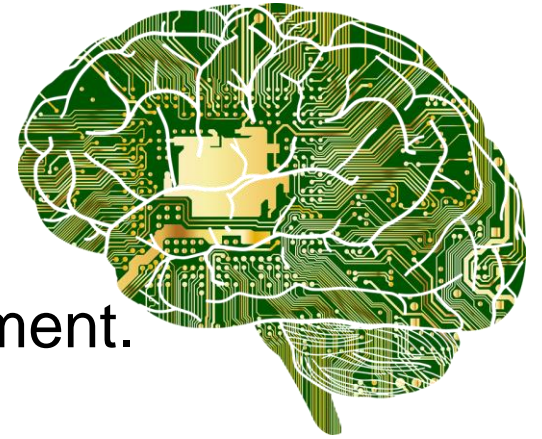
# Agenda

- Prevalence of cannabis use
- Harms associated with cannabis use:
  - Brain Development
  - Mental Health
  - Vaping Cannabis
  - Cannabis Edibles & Poisonings
  - Mixing Cannabis and Alcohol
- Screening for cannabis use
- Resources
- Referrals

## Self-Reported Cannabis Use Among Canadians, 2021



# Brain Development



- Cannabis use before the age of 25 can affect brain development.
- Problems with:
  - memory,
  - concentration,
  - thinking,
  - learning,
  - handling emotions, and
  - decision making.
- Difficulty completing schoolwork, reduced school performance and increased risk of dropping out of high school.
- Increased risk of cannabis use disorder.

# Mental Health

- In 2018, the #1 reason for cannabis-related emergency department visits in Middlesex-London was due to cannabis-related mental health concerns.
- Cannabis use can increase the risk of developing psychosis, schizophrenia, and possibly anxiety, depression and suicide especially if there is a family history of mental illness.
- People are at higher risk of psychosis when they:
  - Start using cannabis before the age of 16,
  - Use cannabis frequently,
  - Use high potency THC products,
  - Have a family history of psychosis or schizophrenia.



# Vaping Cannabis



- Vaping cannabis is increasing, especially among youth.
- In 2021, 28% of Canadians who used cannabis, did so by vapourizing.
- The most common way for Ontario high school students to use cannabis is a vaping device which significantly increased from 10% in 2019 to 17% in 2021.
- Vaping cannabis has been associated with severe lung and pulmonary illnesses (shortness of breath, cough, pleuritic chest pain) and gastrointestinal disorders (diarrhea, nausea, vomiting). There have been many cases showing leukocytosis. This has largely been associated with cannabis from the unregulated market.

Boak, A., Elton-Marshall, T., & Hamilton, H. A. (2022). The well-being of Ontario students: Findings from the 2021 Ontario student drug use and health survey (OSDUHS). Toronto, ON: Centre for Addiction and Mental Health. <https://www.camh.ca/-/media/files/pdf---osduhs/2021-osduhs-report-pdf.pdf>

Canadian Centre on Substance Use and Addiction. (2019). Vaping linked with severe lung illnesses. [https://www.ccsa.ca/sites/default/files/2019-11/CCSA-Vaping-and-Lung-Illnesses-Summary-2019-en\\_0.pdf](https://www.ccsa.ca/sites/default/files/2019-11/CCSA-Vaping-and-Lung-Illnesses-Summary-2019-en_0.pdf)

Health Canada. (2021). Canadian Cannabis Survey 2021: Summary. <https://www.canada.ca/en/health-canada/services/drugs-medication/cannabis/research-data/canadian-cannabis-survey-2021-summary.html>

Image: Vaping. (n.d.). Pixabay. Retrieved July 25, 2022, from <https://pixabay.com/photos/vaping-ecig-vgod-atomvape-smoking-1675911/>

# Cannabis Edibles & Poisonings



- The consumption of edible cannabis has been increasing since becoming legal in 2019.
- Emergency Department visits due to Cannabis Poisonings in Middlesex-London (in 2018):
  - Age 0 -12: Almost 3X higher in 2018 than in 2017, and 3X higher than the rate in Ontario.
  - Age 13-18: Almost 2X higher in 2018 than in 2017, and 2X higher than the rate in Ontario.
- Only 25% of Canadian parents who use cannabis know proper storage methods.
- **Key Messages for Parents/Guardians:**
  - Label any homemade cannabis edible products,
  - Put it in a child resistant container,
  - Keep away from regular food products,
  - Keep it out of sight and reach, and
  - Put it in a high, locked cupboard.

Jiang, A., Belton, K.L., & Fuselli, P. (2020). Evidence summary on the prevention of poisoning in Canada. Parachute: Toronto, ON. <https://parachute.ca/wp-content/uploads/2020/11/Evidence-Summary-on-Poisoning-in-Canada-UA.pdf>

Ontario Agency for Health Protection and Promotion (Public Health Ontario). (2020). Snapshots: Cannabis harms snapshot [Internet]. Emergency department visits for cannabis-related poisonings. Toronto, ON: Queen's Printer for Ontario. <https://www.publichealthontario.ca/en/data-and-analysis/substance-use/cannabis-harms>

Image: Gummy Bears. (n.d.). Pixabay. Retrieved July 25, 2022, from <https://pixabay.com/illustrations/gummy-bears-gummies-candy-candies-1514016/>

SickKids. (June 24, 2021). SickKids research finds rates of accidental cannabis ingestion and severe intoxication in young children rose after legalization. <https://www.sickkids.ca/en/news/archive/2021/accidental-cannabis-ingestion-severe-intoxication-children-rose-after-legalization/>

# Mixing Cannabis and Alcohol

- Simultaneous use of alcohol and cannabis is prevalent among youth and adults in Canada and is associated with more harmful consequences than using either substance alone including negative physical, social and behavioural outcomes.
- 43% of Canadians who use cannabis, often/always or sometimes combined cannabis with alcohol.
- 11.9% of Ontario students who use cannabis, combined cannabis and alcohol on the same occasion.
- The side effects of mixing cannabis with alcohol include:
  - Enhanced effects of THC,
  - Over intoxication,
  - Decreased judgment,
  - Increased dehydration,
  - Intensified side effects,
  - Alcohol poisoning (antiemetic effect of cannabis).



American Addiction Centers. (April 7, 2020). What are the effects of mixing weed and alcohol? <https://www.alcohol.org/mixing-with/marijuana/>

Boak, A., Elton-Marshall, T., & Hamilton, H. A. (2022). The well-being of Ontario students: Findings from the 2021 Ontario student drug use and health survey (OSDUHS). Toronto, ON: Centre for Addiction and Mental Health. <https://www.camh.ca/-/media/files/pdf---osduhs/2021-osduhs-report-pdf.pdf>

Health Canada. (2021). Canadian Cannabis Survey 2021: Summary. <https://www.canada.ca/en/health-canada/services/drugs-medication/cannabis/research-data/canadian-cannabis-survey-2021-summary.html>

Ontario Agency for Health Protection and Promotion (Public Health Ontario), Meyer, W., & Leece, P. Evidence brief: risk factors for simultaneous use of alcohol and cannabis. Toronto, ON: Queen's Printer for Ontario; 2018. [https://www.publichealthontario.ca/-/media/documents/e/2018/eb-risk-factors-alcohol-cannabis.pdf?sc\\_lang=en](https://www.publichealthontario.ca/-/media/documents/e/2018/eb-risk-factors-alcohol-cannabis.pdf?sc_lang=en)



# Screening for Cannabis Use

## **Non-Medical Cannabis Resource**

Centre for Effective Practice in collaboration with the Ontario College of Family Physicians & Nurse Practitioners' Association of Ontario

<https://tools.cep.health/tool/non-medical-cannabis-resource/#benefits-harms-for-patients-using-cannabis>

## **Counselling adolescents and parents about cannabis: A primer for health professionals**

Canadian Paediatric Society, Cannabis Project Advisory Group

<https://cps.ca/en/documents/position/counselling-adolescents-parents-about-cannabis-primer-for-health-professionals#ref11>

## Non-Medical Cannabis Resource

Developed by the Centre  
for Effective Practice in  
collaboration with the  
Ontario College of Family  
Physicians & Nurse  
Practitioners' Association  
of Ontario

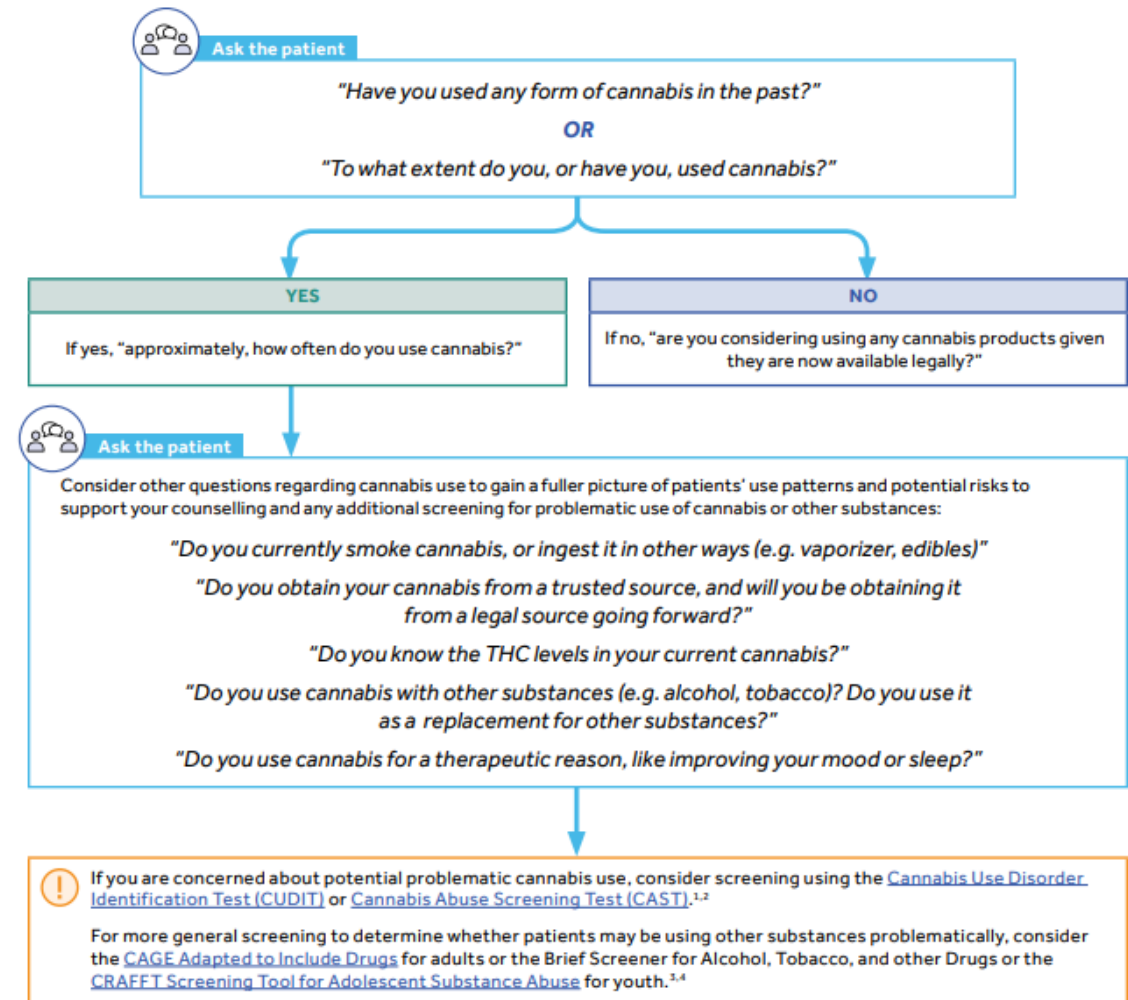
### Introduction

The following resource has been developed to address the legalization of cannabis. The resource is designed to help primary care providers in discussing non-medical cannabis with their adult (19+) patients, including educating on the harms and benefits of cannabis as well as general harm reduction. This resource is not intended to address medical cannabis.

It is important that providers provide a safe, non-judgmental environment to allow for open dialogue. Counsel patients that use non-medical cannabis on harm reduction techniques and potential risk factors. If you identify problematic use or behaviour, screen for Cannabis Use Disorder and/or cannabis related mental health issues.

### Section A: Screening for cannabis use

Providers should screen all patients in their practice to ascertain their cannabis use. Patients who may have previously declined to inform their providers regarding their use may feel more comfortable disclosing cannabis use given legalization.



# Screening for Non-Medical Cannabis Use for Adults (19+)

Developed by the Centre for Effective Practice in collaboration with the Ontario College of Family Physicians & Nurse Practitioners' Association of Ontario

## Advising special populations

For patients with specific health risk factors or comorbidities, cannabis use may increase adverse health events. Advise patients with specific health concerns accordingly:



### MENTAL HEALTH<sup>5</sup>

If your patient or an immediate family member has a history of psychosis, their risk of cannabis-related psychosis is increased.

Cannabis use may exacerbate or trigger underlying mental health issues.



### PRECONCEPTION AND MATERNAL HEALTH<sup>5</sup>

If your patient is pregnant, or is considering pregnancy, cannabis could harm their fetus or newborn. There is evidence that cannabis use may affect fertility in both men and women.

Use of cannabis during pregnancy increases risk of anemia.

Use of cannabis during pregnancy can lead to decreased birth weight, increased placement in neonatal care units, and child development and behavioural problems.

If your patient is breastfeeding, advise your patient that THC does pass into breastmilk and therefore to the baby but the impacts to the baby are unknown.



### CARDIOVASCULAR

If your patient has previous cardiovascular events or cardiovascular risk factors, using dried and smoked cannabis could lead to elevated risk of stroke or adverse events.



### SUBSTANCE USE

If your patients or an immediate family member has a history of substance use disorder, additional harm reduction and precaution should be exercised.

Concurrent use of cannabis and other substances, including alcohol, results in increased impairment-related risks. Tobacco is considered more addictive than cannabis. Combining tobacco and cannabis can result in an increased risk of developing addiction to tobacco which can lead to regular use of cannabis.



### OLDER ADULTS

Older adults may have age-related changes that could impact the outcome of their cannabis use, even if they have used cannabis previously. Evidence is limited in the older adult population, but age-related concerns may be a factor even for patients who have used cannabis previously.

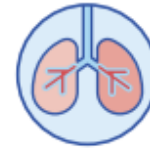


### CANNABIS USE AND DRIVING

Cannabis use significantly increases risk of motor vehicle accidents – patients should wait at least 6-8 hours after using dry cannabis before driving or operating any heavy machinery and 8-12 hours if the patient ingests cannabis. This range may vary and is dependent on the amount and potency of the cannabis used, and the individual patient.

Ensure patients are aware of the current driving penalties in their province or territory if found under influence of cannabis.

Ensure patients are aware of the effects cannabis can have on driving: [Canadian Centre on Substance Use and Addiction Drug Impaired Driving Toolkit](#)



### RESPIRATORY

Cannabis use, specifically dried and smoked cannabis, can exacerbate respiratory comorbidities and increase risk of additional respiratory concerns (e.g. chronic bronchitis, shortness of breath)



### YOUTH AND YOUNGER ADULTS

Population based studies have shown longer lasting cognitive effects including memory and attention problems in youth under the age of 25.

Ensure younger patients and their families are appropriately informed and supported: [CAMH Cannabis Health Information & Resources](#)

## **Counselling adolescents and parents about cannabis: A primer for health professionals**

Canadian Paediatric Society,  
Cannabis Project Advisory Group

- Adolescents are interested in their physician's information and support when discussing current cannabis use.
- Having a conversation with youth about substances is associated with reducing excessive use.
- Using validated screening tools is the most effective method of identifying youth requiring intervention.

### **Box 1. The 8 As for addressing cannabis use with adolescents**

1. **A**ssure patient privacy and confidentiality
2. **A**sk about cannabis use, after obtaining permission to do so
3. **A**nsWER all patient questions, and support healthy choices
4. **A**ssess the impacts of cannabis use, by applying a screening tool
5. **A**ppraise patient willingness to change or reduce cannabis use
6. **A**ssist with specific goal-setting and a realistic time frame
7. **A**rrange for a follow up within weeks, and regularly thereafter
8. **A**cknowledge parental needs and concerns, when these arise



# Resource from the Canadian Centre on Substance Use and Addiction

## Talking to Youth About Cannabis Vaping A Guide for Healthcare Professionals

### Concerns About Vaping Cannabis

Vaping cannabis poses risks for mental and physical health harms. Chemicals created in the heating process can be harmful when inhaled and may affect breathing. Vaping unregulated cannabis products has also been associated with severe lung illness, causing coughing, shortness of breath and chest pain.

Cannabis vaping products differ in the levels of THC and CBD they contain. Using vaping products that have high levels of THC increases the risk for over-intoxication. Over-intoxication can cause severe anxiety, vomiting and paranoia.

Further research is needed to understand the full effects of frequent and long-term cannabis vaping on brain, respiratory and cardiovascular functioning.

Start the conversation with youth about cannabis vaping to have an open and evidence-based discussion.

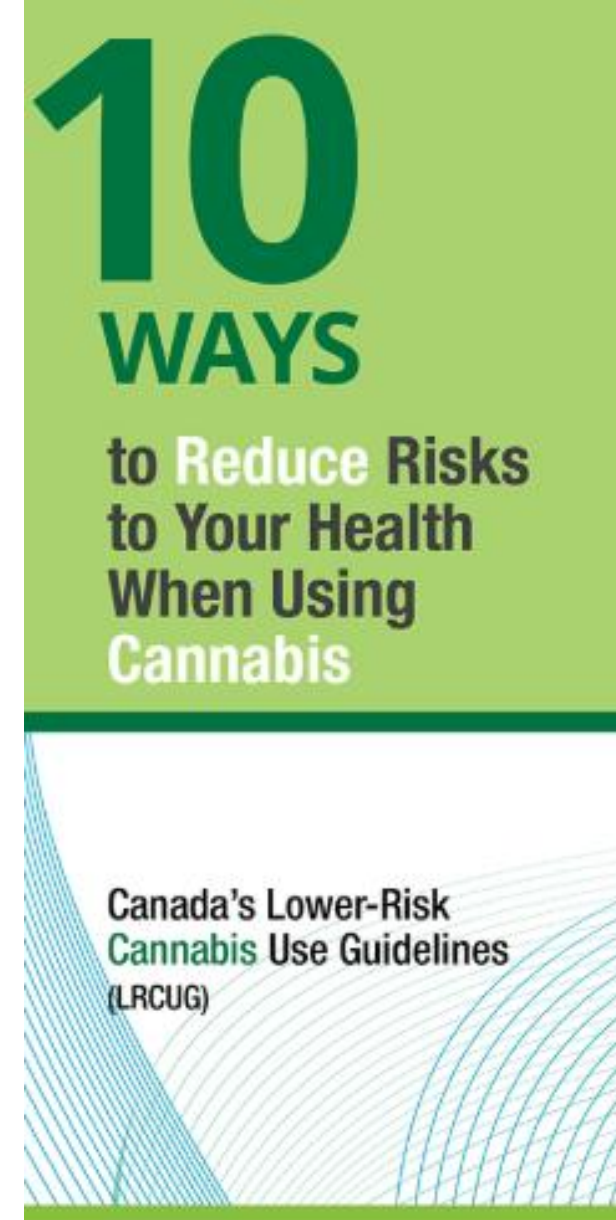
Daily or almost daily cannabis use has been associated with an increased risk of cognitive impairment, psychosis and cannabis use disorder. The risk for developing these conditions is higher among individuals who:

- Use cannabis products high in THC
- Use cannabis daily or almost daily
- Initiate frequent cannabis use during adolescence
- Have a family history of mental health or substance use disorders

Initiating frequent cannabis use during adolescence may be associated with **structural brain changes** and **alterations in brain functioning**.

For more information about cannabis and vaping, visit [ccsa.ca/cannabis](https://www.ccsa.ca/cannabis).

# Lower-Risk Cannabis Use Guidelines

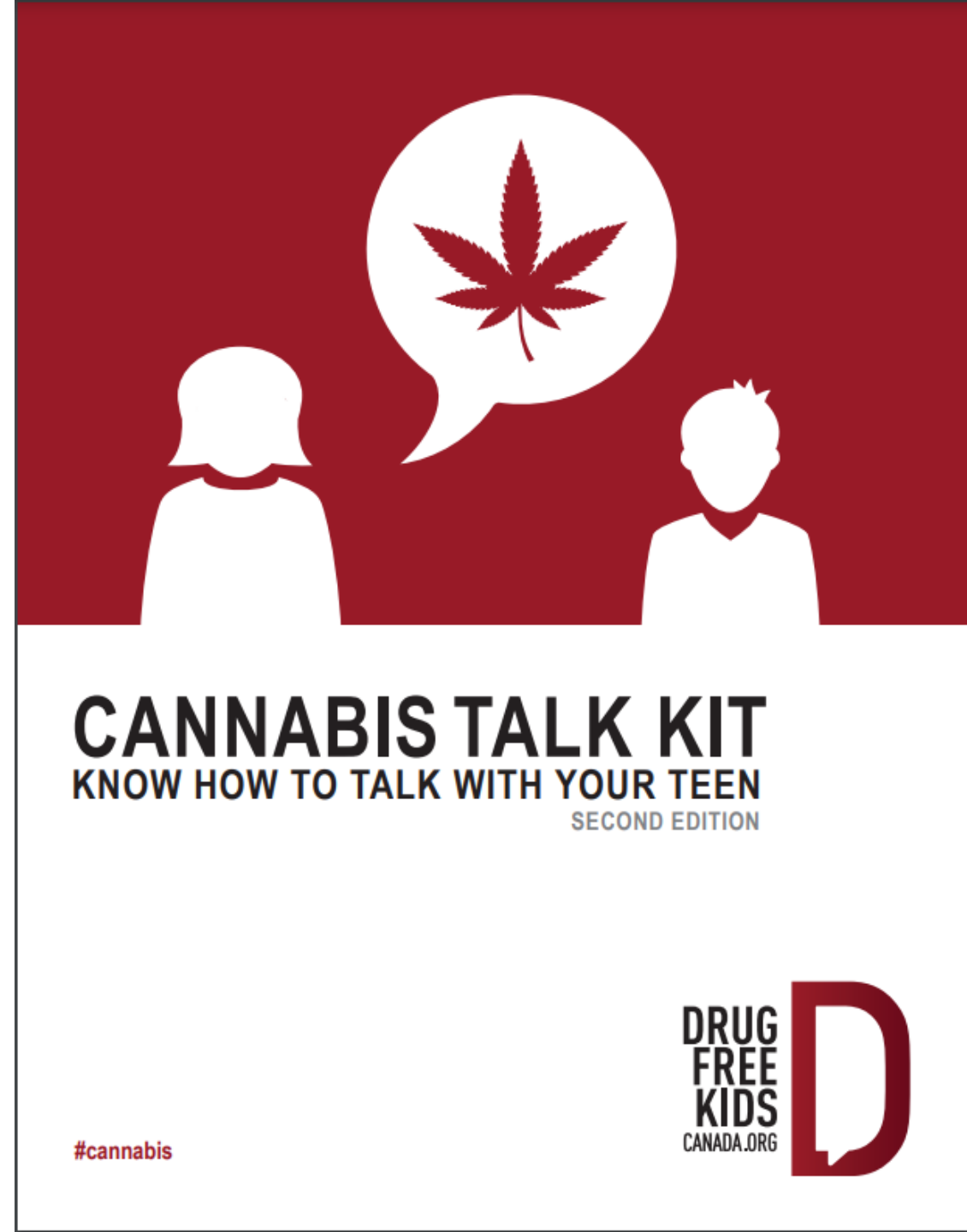


# Lower-Risk Cannabis Use Guidelines for Youth

Developed by CAMH's Youth  
Engagement Initiative, and  
National Youth Action Council,  
and the Canadian Research  
Initiative in Substance Misuse.



# For Parents/Guardians of Youth



#cannabis

DRUG  
FREE  
KIDS  
CANADA.ORG



YouNeedtoKnow.ca

# Know the Law. Know the Facts.

**Cannabis use** and vaping are **illegal in all places** where smoking tobacco is banned.



**Cannabis use** can have a negative **impact on brain** development in youth and **young adults**.



**Cannabis use** during pregnancy or while breastfeeding can be **harmful to a baby**.



**Impaired driving** is **illegal** and increases the risk of a crash. **Drive sober.**



The effects of **cannabis edibles** can take up to **2 hours or longer** to be felt. **Wait. Go slow.**



Choose **cannabis edibles** with **low THC. Start low. Go slow.**



Keep **cannabis edibles locked up**, out of sight and reach of **children and youth**.



**Avoid mixing cannabis and alcohol** to lower **health risks** and **harms**.



YouNeedtoKnow.ca



**Cannabis use** during pregnancy or while breastfeeding can be **harmful to a baby.**



**Cannabis use** can have a negative **impact on brain** development in youth and **young adults.**





# Referrals

## **CMHA Thames Valley Addiction & Mental Health Services**

- Phone: 519-673-3242
- Website: <https://cmhatv.ca/>

## **Connex Ontario**

- Phone: 1-866-531-2600



# Questions?

- Ask using chat function now, or after the webinar at: [healthcareproviders@mlhu.on.ca](mailto:healthcareproviders@mlhu.on.ca)
  - If you would like to request hard copies of resources mentioned today, please email us your:
    - Office name and full address, resource(s) of interest\* and quantity, and hours for delivery.
    - \*Please note: We do not have hard copies of the *Talking to Youth about Vaping* guide, but it can be printed directly from the CCSA webpage
- For urgent matters please call the Health Unit's main line at **519-663-5317**
- For more information [www.healthunit.com/healthcare-providers](http://www.healthunit.com/healthcare-providers)

