



Public Health Update – March 2019

Please circulate this notice to your staff

HPV4 Vaccine No Longer Available

- Because Merck Canada Inc. is transitioning to the HPV9 vaccine, the Ontario supply of HPV4 vaccine will expire March 14, 2019. Starting March 15, Southwestern Public Health will offer HPV9 vaccine to 1) complete an initiated HPV4 series or 2) to start an HPV9 series for eligible students who had not yet received a dose of HPV4 to date.
- The National Advisory Committee on Immunization (NACI) recommends the use of HPV9 vaccine to complete an HPV4 series, if it is not possible to complete the series with the HPV4 vaccine.
- Currently, there is no interchangeability data available for a mixed regimen of HPV vaccines. The protection against HPV types 31, 33, 45, 52, and 58 (additional types in the HPV9 vaccine) to complete an HPV4 series cannot be confirmed. The ministry will provide a substitution notice indicating that a mixed series (with less doses than a complete series of HPV9) will not provide full protection against the additional five strains in the HPV9 vaccine. If someone wishes to be vaccinated with a complete series of HPV9, they must purchase the additional doses privately.
- Individuals, who have completed their HPV4 series as of March 14, 2019, will be considered up-to-date with their HPV immunization and will not be eligible for publicly funded HPV9 vaccine. NACI states that there is insufficient evidence at this time to recommend, at a population level, re-immunization with HPV9 vaccine in individuals who have completed an immunization series with another HPV vaccine.

Infants less than 12 Months Do Not Need Measles Vaccine

- With increased media coverage regarding measles we have received questions regarding advice on the immunization schedule for Measles, Mumps, Rubella (MMR).
- We recommend that healthcare providers continue to follow the publicly funded schedule. The publicly funded schedule states one dose of MMR should be given at 12 months of age, on or after the first birthday. A second dose should be given between 4-6 years of age.
- Alternatively, the publicly funded schedule states that you can give a dose to an infant 6-11 months of age if he/she is travelling to areas where disease is a significant concern. The infant would then need 2 additional doses after 1 year of age at appropriate intervals.
- Please refer to this [link](#) for information on areas where disease is a concern.
- <https://travel.gc.ca/travelling/health-safety/travel-health-notices>

Zostavax Shortage – Prioritize Patients in their 70th Year

- Due to higher demand, the provincial supply of vaccine at the Ontario Government Pharmaceutical and Medical Supply Service (OGPMSS) is expected to stock-out before it can be replenished by the manufacturer. We anticipate that the supply will not be replenished until June 2019.
- To help manage current supply, the ministry recommends that, until the provincial supply is replenished, priority for Zostavax doses be given to unimmunized individuals who are in their 70th year and will be turning 71 soon.

For Latent TB Treatment – 4 Months of Rifampin as good as 9 of Isoniazid

- A recent publication in the New England Journal of Medicine provides efficacy data for a large trial comparing 4 months of rifampin to 9 months of isoniazid for LTBI treatment. The study found the same effectiveness but much better completion rates and safety for rifampin.
- For more information, register for the March 19th Public Health Ontario Grand Round. Visit <https://www.publichealthontario.ca/en/education-and-events/events#q=1>

For World TB Day, Facts about TB Reporting, Testing and Treatment

It's Time... to know my TB status, It's Time... to talk about TB

All positive tuberculin skin tests (TST's) are reportable your local Public Health Unit.

- The health care provider reading the test results must report the positive TST, even when referring the patient to another physician or specialist for treatment.
- The TST Reporting Form can be found on our website [Southwestern Public Health](#)
- Fax all positive TST results with recent chest x-ray to: Southwestern Public Health: St. Thomas Location 519-631-1682; Woodstock Location 519-539-6206

Publicly funded Tubersol® can be ordered from Public Health for the following:

- Are students and require the test for admission or continuation in an educational institution such as a day care or pre-school program, or a program of study in a school, community college, university or other educational institution
- Have had contact with an active TB case
- Require the test for medical reasons
- Require the test for admission into a Long-Term Care Home & are under 65 years of age
- For more information on publicly-funded Tubersol® see [OHIP INFObulletin \(#4692\)](#).

There is an [Online TST Interpreter](#) .

- The tool estimates the risk of active tuberculosis for an individual with a tuberculin skin test reaction of ≥5mm, based on his/her clinical profile.
- An interferon-gamma release assay ([IGRA](#)) could be considered to confirm a positive TST results in a client with a [low pre-test probability](#) for latent TB or if a client has received [multiple BCG](#) vaccinations. This test is available at Gamma Dynacare, 230 Victoria Street in London for a fee (it is not covered by OHIP).
- If a client has received a BCG vaccination in infancy, it is unlikely to cause a tuberculin reaction of 10 mm or greater after 10 years of age or older

Free Tuberculosis Medications

- for latent infection & active disease meds are available at no cost through the Health Unit

For You and Your Staff – Learn more about IPAC in Clinical Office Practice

- Please join the Southwestern Ontario Chapter of Infection Prevention and Control Canada (IPAC Canadas) at Elmhurst in Ingersoll on March 26 from 5:30 – 8:30 pm to learn more about environmental cleaning, reprocessing medical equipment and devices, vaccinations and more!
- The cost of registration is 50\$, dinner provided.
- To register, visit: <https://www.eventbrite.ca/e/ipac-101-in-community-health-settings-oxford-county-tickets-55219615356?aff=ebdssbeac>

Proposed Changes to ODSP Definition of Disability

- The Ontario government intends to change the definition of disability in the Ontario Disability Support Program (ODSP) to align with federal government guidelines.
- To qualify for ODSP now, a person must have a physical or mental impairment that is continuous or recurrent and expected to last one year or more; and that impairment must impact one or more areas of function.
- To qualify for the federal Canada Pension Plan-Disability (CPP-D) program, for example, a person must have a “severe and prolonged” mental or physical disability due to a medical condition. All other federal disability-related income benefit programs are as or more restrictive.
- Changing the ODSP definition will force those with episodic disabilities, or time limited disabilities, and people who experience the cumulative impacts of several health conditions to rely on Ontario Works instead of ODSP. This means they will qualify for 37% less income.
- For more information and advocacy opportunities see [The Alliance for Healthier Communities](#)