

## MEDICAL HEALTH OFFICERS UPDATE

**October 1, 2019**

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To view previous MHO UPDATES, go to:

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www.interiorhealth.ca/  
AboutUs/Leadership/MHO/  
Pages/MHOUpdates.aspx](https://www.interiorhealth.ca/AboutUs/Leadership/MHO/Pages/MHOUpdates.aspx)

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### **New Reporting Requirements for Severe Pulmonary Disease Associated with Vaping or Dabbing\***

The US Centers for Disease Control and Prevention (US CDC) has received reports of over 530 possible cases of severe pulmonary disease and 7 deaths associated with vaping<sup>1</sup> or dabbing<sup>2</sup>, which are dispersed in 38 states.

The time between exposure (vaping or dabbing) and symptoms ranges from a few days to a few weeks. No single substance or e-cigarette product has been consistently associated with illness.

Presenting symptoms have included cough, shortness of breath, chest pain, gastrointestinal symptoms (nausea, vomiting, and diarrhea) and non-specific constitutional symptoms (fever, fatigue, weight loss). Signs have included hypoxemia, fever, and tachycardia.

Chest imaging may show bilateral pulmonary infiltrates or ground glass opacities. Cases have been severe such that supplemental oxygen, assisted ventilation, and intubation have been required. Gastrointestinal symptoms sometimes preceded respiratory symptoms.

**Please contact the MHO if you have a patient who meets the following criteria with symptoms onset on or after June 1, 2019:**

1. Reports vaping or dabbing using e-cigarette devices, related products or other means of Inhaling a variety of products in the 90 days before symptom onset, AND
2. Who has pulmonary infiltrates on X-ray imaging, AND
3. Whose illness is not attributed to other causes.

**The MHO can be reached during business hours via the IH Communicable Disease Unit at 1-866-778-7736 and after hours via the IH MHO On-call number: 1-866-457-5648.**

A more detailed description and up to date case definitions for both probable and confirmed cases can be found at:

US CDC – [“Outbreak of Lung Disease Associated with E-Cigarette Use, or Vaping”](#)

US CDC – [“Severe Pulmonary Disease Associated with Electronic-Cigarette–Product Use — Interim Guidance”](#)

Information regarding vaping and cannabis use and support for persons who wish to seek treatment can be found at:

BC Gov – [Health Link BC – Vaping Information](#)

BC Gov – [Health Link BC – Cannabis Information](#)

- “dabbing” is heating concentrates of cannabis on a hot surface then inhaling through a “dab” rig

**Influenza Vaccine Campaign 2019-2020 Update #1**

**Eligibility:** There are no changes in the eligibility this year. Influenza vaccine is recommended for everyone and provided free to individuals at high risk of complications and their caregivers/close contacts. This includes:

- Children 6-59 months
- Seniors
- Pregnant women
- People 5-64 years with chronic health conditions
- Visitors to health care facilities
- Essential community service providers

<b>Publicly funded Influenza vaccines available this season:</b>		
<b>Age</b>	<b>Children 6 months to 17 years</b>	<b>Adults 18 years +</b>
<b>Trade name</b>	Quadrivalent Inactivated Influenza Vaccine (QIV) FluLaval® Tetra Fluzone® Quadrivalent	Trivalent Inactivated Influenza Vaccine (TIV) Fluviral® Agriflu®
Please do not miss an immunization opportunity. When intended product is not available, all four products can be used for ages ≥ 6 months.		
<b>Strains</b>	A/Brisbane/02/2018 (H1N1) pdm09-like virus* A/Kansas/14/2017 (H3N2)-like virus* B/Colorado/06/2017-like virus (Victoria lineage) B/Phuket/3073/2013-like virus (Yamagata lineage) in quadrivalent vaccines only *The A/H1N1 and A/H3N2 components of the vaccine have been updated for this fall	
<b>Egg Allergy</b>	People with severe egg allergy (including anaphylaxis) can be offered any influenza vaccine	

**Please Note:** Flumist® is not available this season, publicly or privately, due to undisclosed decisions by AstraZeneca.

**Influenza vaccine for seniors:** Publicly funded vaccines for seniors include Fluviral® or Agriflu®; both are recommended by the National Advisory Committee on Immunization (NACI) for immunization of all ages. Another option for seniors is Fluzone® HD, a high dose trivalent inactivated influenza vaccine.

Fluzone® HD is license for those 65 years and older and provides better protection for this age group against influenza and its complications. Additional details can be found in the [NACI statement on Influenza vaccines](#) or in the [BCCDC FAQ on Fluzone® HD](#). Despite the lack of public funding, we recommend Fluzone® HD be offered to those 65 years and older. Availability and cost may vary, but Fluzone® HD is available for purchase without prescription at select pharmacies and Travel Medicine and Vaccination Centres.

**Influenza vaccine ordering and distribution process:** Immunizers who provided flu shots during the 2018-2019 season do not need to place an initial order for influenza vaccine. They will receive a vaccine allocation based on reported usage during the previous year.

New influenza vaccine immunizers who did not receive publicly funded influenza vaccine from IH last year should complete an order form at <https://www.interiorhealth.ca/sites/Partners/ImmunizationResourcesTools/Documents/Influenza%20Vaccine%20Order%20Form%20-%20Health%20Care%20Provider.pdf> and fax it to the local public health centre. Immunizers will receive notification when vaccine is available for pick-up. Once all immunizers have received their allotment and if excess vaccine has been identified, a communication will be sent stating additional doses may be ordered through their local Health Centre.

### **Immediately Notifiable Communicable Diseases**

You will find attached to the update the current Immediately Notifiable Communicable Disease list.

The diseases on this list require immediate verbal notification to the Medical Health Officer as regulated under the [Reporting Information Affecting Public Health Regulations \(BC Reg. 167/2018\)](#) under the Public Health Act.

The list has been formatted to support posting in your office for quick reference.

## Immediately Notifiable Communicable Diseases

For Health Professionals, Hospital Administrators, Laboratory Directors, Veterinarians or Person in charge of an institution or a workplace

The following Communicable Diseases, either by patient clinical presentation or lab-result, require **immediate verbal notification** to the Medical Health Officer for urgent follow-up:

### Monday to Friday, 08:30 to 16:30

Communicable Disease Unit: 1-866-778-7736

### After Hours , Weekends and Holidays

MHO On-Call: 1-866-457-5648

- Communicable Disease Clusters: Unexpectedly high numbers of a suspected communicable disease **or** suspect food-borne outbreaks
- Suspect bacterial meningitis or meningococcal disease
- Severe respiratory illness from suspected infectious etiology and symptom onset is within 10 days of return from overseas travel
- High risk contacts of lab- confirmed or probable pertussis cases, including baby < 1 year old and pregnant women in their 3<sup>rd</sup> trimester
- Invasive Group A strep
- Invasive Haemophilus Influenza Type B
- Diphtheria
- Measles
- Mumps
- Suspect or known infectious respiratory Tuberculosis
- Hepatitis A
- Suspect polio
- Botulism
- Suspect viral hemorrhagic fever e.g. Ebola
- Smallpox or Anthrax
- New or emerging infections e.g. SARS, MERS-CoV
- Contamination threat involving food, water or air
- Possible human rabies exposure:
  - Dogs or cats – any bite outside North America, or any bites in BC by a dog or cat behaving abnormally suspicious of rabies
  - Any animal bite outside BC, or, in BC if unprovoked and abnormal animal behavior
  - Any bat exposure with physical contact

Reportable Diseases in BC are regulated under the [Reporting Information Affecting Public Health Regulations \(BC Reg. 167/2018\)](#) under the Public Health Act.