

MEDICAL HEALTH OFFICERS UPDATE FOR PHYSICIANS

February 1, 2016

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To view previous MHO UPDATES, go to:
www.interiorhealth.ca/AboutUs/Leadership/Pages/MHOUpdates.aspx

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Zika Virus Guidance

The Public Health Agency of Canada and CDC Atlanta have issued a travel notice regarding the Zika virus that has been associated with birth defects as well as with Guillain-Barre syndrome in Brazil and other countries. Zika virus infection is transmitted by infected mosquitoes (*Aedes aegypti* and *albopictus*).

PHAC recommends that pregnant women and those considering becoming pregnant discuss their travel plans with their health care provider to assess their risk and consider postponing travel to areas where the Zika virus is circulating. If travel cannot be postponed, strict mosquito precautions should be followed.

For pregnant women who develop a clinical illness, while in an affected area, or within the first two weeks after returning home, testing for Zika virus is recommended. For women who have no symptoms, but who traveled to one of the affected regions, an obstetrical ultrasound is recommended and consideration should be given to performing serial ultrasounds.

Zika virus testing is available through routine outpatient laboratory services. Specimens will be forwarded to the BCCDC Public Health Laboratory.

Sample collection instructions:

1. If acute symptomatic infection collect:
 - 5ml EDTA purple top blood tube for Zika virus PCR
 - 5 ml gold top serum separator tube for Zika virus serology (performed at presentation, and again after 2-3 weeks if initially negative)
2. If symptoms have resolved collect:
 - 5 ml gold top serum separator tube only for Zika virus serology

Please provide the following details when ordering the test:

1. Travel and clinical history, including the date of onset of symptoms and travel dates.
2. Whether the patient is currently asymptomatic or recovered. If symptomatic, the onset date is extremely important to ensure appropriate testing.
3. Specify if the patient is pregnant, and whether an ultrasound has been done and the findings.

If you have any questions please contact BCCDC Public Health Laboratory 1-877-747-2522

Further information:

<http://www.phac-aspc.gc.ca/phn-asp/2016/zika-eng.php>

http://www.cdc.gov/mmwr/volumes/65/wr/mm6503e1er.htm?s_cid=mm6503e1er_e

http://www.paho.org/hq/index.php?option=com_content&view=article&id=11605%3A2016-paho-statement-on-zika-transmission-prevention-&catid=8424%3Acontent&lang=en

Influenza Update: 2015-2016 Seasonal Influenza Activity

In early January, BC experienced increasing influenza activity with co-circulation of influenza A(H3N2), A(H1N1)pdm09, and influenza B. Current surveillance indicators suggest a milder season compared to last year (2014-2015), which was a particularly severe influenza A (H3N2)-predominant season with numerous outbreaks in residential care facilities. Fewer laboratory-confirmed cases of influenza and respiratory infection outbreaks in facilities have been reported to date compared to the last two years.

Canadian isolates of influenza typed by the National Microbiology Laboratory show presence of all strains included in this year's influenza vaccine.

The uptake of influenza immunization by the public appears to be lower this year as demonstrated by a decreased number of doses administered by all providers. Interior Health (IH) has an adequate supply of influenza vaccine to meet additional requests from community vaccine providers, and therefore we encourage physicians to take any opportunities to offer influenza vaccine to their patients. To order more influenza vaccine please refer to the IH Partner Website for immunization forms, resources and tools at www.interiorhealth.ca > Partners > Immunization Resources & Tools. <https://www.interiorhealth.ca/sites/Partners/ImmunizationResourcesTools/Pages/default.aspx>

For further information on influenza:

BC Centre for Disease Control (BCCDC). [Influenza](http://www.bccdc.ca/health-info/diseases-conditions/influenza) <http://www.bccdc.ca/health-info/diseases-conditions/influenza>

BCCDC. [Influenza Surveillance Reports](http://www.bccdc.ca/health-professionals/data-reports/influenza-surveillance-reports) . <http://www.bccdc.ca/health-professionals/data-reports/influenza-surveillance-reports>

Pertussis Update

Pertussis cases continue to occur across the health authority. In 2015, a total of 174 laboratory-confirmed or epidemiologically-linked cases were reported across the IH region. In 2013 and 2014, totals of 52 cases and 126 cases were reported, respectfully. The largest numbers of cases, including several clusters, were reported in the Central Okanagan (n=68) and Vernon (n=32) Local Health Areas corresponding to annual incidence rates of 55 per 100,000 and 49 per 100,000, respectively. Elevated incidence rates were also observed in Castlegar (n=14; 102 per 100,000) and Nelson (n=16; 62 per 100,000). The overall incidence rate of pertussis in IH was 24 per 100,000, which is similar to the provincial incidence rate. In 2015, eight cases were reported among infants less than one year of age. The highest proportion of cases occurred in the 10-14 year age group (112 per 100,000), likely reflecting waning immunity prior to the grade 9 booster Tdap vaccine. Cases are continuing to be reported in early 2016.

Following a peak of pertussis activity in the Central Okanagan in August 2015, clustering of cases in Vernon has been on-going since late fall. Continued detection of pertussis cases in IH is likely due, in part, to increased clinical suspicion and public awareness following an MHO Alert and public news release last summer. Cyclical pertussis activity is also occurring elsewhere in BC and Canada.

Please refer to [the MHO Alert for Physicians from August 6, 2015](https://www.interiorhealth.ca/AboutUs/Leadership/MHO%20Updates/MHO%20Alert%20-%20August%206,%202015.pdf). <https://www.interiorhealth.ca/AboutUs/Leadership/MHO%20Updates/MHO%20Alert%20-%20August%206,%202015.pdf> for detailed guidance on testing, treatment, and chemoprophylaxis

Suggested resources:

BCCDC. Pertussis. http://www.bccdc.ca/resource-gallery/Documents/Guidelines%20and%20Forms/Guidelines%20and%20Manuals/Epid/CD%20Manual/Chapter%201%20-%20CDC/EPI_Guideline_CDChapt1Pertussis_20100625.pdf

Immunize BC. [BC Routine Immunization Schedule](http://www.immunizebc.ca/sites/default/files/graphics/immz_schedule_website_child_infant_oct_27_2014_final1.pdf). http://www.immunizebc.ca/sites/default/files/graphics/immz_schedule_website_child_infant_oct_27_2014_final1.pdf

Refugee Health

Newcomer and Refugee health planning is well underway within Interior Health. There are care provider and sponsor information packages available on our new webpage [Newcomer & Refugee Health \(https://www.interiorhealth.ca/sites/Partners/refugeeCare/Pages/default.aspx\)](https://www.interiorhealth.ca/sites/Partners/refugeeCare/Pages/default.aspx) We are still actively looking for physicians to sign up for the Interim Federal Health (IFH) insurance program (details in the provider pathway on the webpage). We are expecting an increased volume of refugees over the coming months including both Privately Sponsored Refugees (PSRs) across the health authority and now Government Assisted Refugees (GARs) in Kelowna and Kamloops.

If you have any questions please contact the program manager Leslie Bryant MacLean at leslie.bryantmaclean@interiorhealth.ca.

HPV vaccine program for males launched in BC

As of Sept. 1, 2015, B.C launched a new publicly funded, targeted HPV vaccine program using Gardasil for boys and young men who are at higher risk of contracting the virus. The program aims to provide protection to those males who are most vulnerable to HPV infection and who are unlikely to be protected through indirect protection (female protection). Those eligible for free HPV vaccine through this program expansion include the following:

- Males 9 – 26 years of age at time of series commencement who are:
 - ◊ Men who have sex with men (MSM) including those who may not yet be sexually active and are questioning their sexual orientation
 - ◊ Street involved
 - ◊ HIV positive.
- Males 9 -18 years of age in the care of the Ministry of Children and Family Development (MCFD)
- Males 12 – 17 years of age in youth custody services centres.

This new program complements B.C.'s publicly funded HPV vaccine program for Grade 6 females and a publicly funded time-limited catch up program for young women up to age 26. Please keep this program in mind and promote it amongst eligible males encountered in your practice.

For more information, contact your local public health unit and refer to the following resources:

BC Ministry of Health Press Release: [HPV Immunization Program Expanded to Vulnerable Boys \(https://news.gov.bc.ca/stories/hpv-immunization-program-expanded-to-vulnerable-boys \)](https://news.gov.bc.ca/stories/hpv-immunization-program-expanded-to-vulnerable-boys)

BC CDC's Q & A for HCP's: [Expanded Eligibility for HPV Vaccination for Select Male Populations \(http://www.bccdc.ca/resource-gallery/Documents/Guidelines%20and%20Forms/Guidelines%20and%20Manuals/Immunization/Vaccine%20Info/HPV_QA_FINAL_Aug19.pdf\)](http://www.bccdc.ca/resource-gallery/Documents/Guidelines%20and%20Forms/Guidelines%20and%20Manuals/Immunization/Vaccine%20Info/HPV_QA_FINAL_Aug19.pdf)

[The BC Immunization Manual \(http://www.bccdc.ca/health-professionals/clinical-resources/communicable-disease-control-manual\)](http://www.bccdc.ca/health-professionals/clinical-resources/communicable-disease-control-manual)

Infection Prevention And Control Newsletter (available only through the internal IH website)

Stay up to date with the Infection Prevention and Control newsletters called Infection Reflections.

The latest edition of [Infection Reflections from January 2016 \(http://insidenet.interiorhealth.ca/QPS/IPC/Documents/January%202016.pdf\)](http://insidenet.interiorhealth.ca/QPS/IPC/Documents/January%202016.pdf) features Salmonella.

You can also find all previous editions of the newsletter at the bottom of [IPAC site \(http://insidenet.interiorhealth.ca/QPS/IPC/Pages/default.aspx\)](http://insidenet.interiorhealth.ca/QPS/IPC/Pages/default.aspx), before "Other Web Resources"

Staffing Announcement

We welcome Dr. Silvina Mema who has been **appointed** Medical Health Officer for Interior Health effective January 18, 2016. Dr. Mema completed her residency in Public Health and Preventive Medicine at the University of Calgary in 2015, and has recently moved to Kelowna with her family.