

Program/Service Information Report

Influenza and Respiratory Syncytial Virus Vaccinations

October 1, 2023 to January 31, 2024

To: Board of Health

Meeting Date: March 6, 2024

Report No.: BH.01.MAR0624.C06

Key Points

- Wellington Dufferin Guelph (WDG) has not recorded a death due to influenza since the 2019-2020 flu season, with highest mortality in recent years occurring during the 2016-2017 season.¹
- Hospital admissions to date for influenza in WDG and for the province represented approximately 20% and 15 % respectively of total hospitalizations due to COVID-19, influenza, and respiratory syncytial virus (RSV) during the current flu season.²
- The leading cause of both hospitalization and death for respiratory viruses remained COVID-19, whereas prior to the pandemic it was influenza.¹
- Seasonal influenza vaccine is the most effective way to help prevent influenza, its complications, and can also help prevent the spread of this virus to others.³
- During the 2023/2024 flu season, a total of 49,720 doses of influenza vaccine were administered in WDG by Wellington-Dufferin-Guelph Public Health (WDGPH) and local pharmacies.
- October 10, 2023, marked a new age in Ontario's vaccine landscape with the introduction of Canada's first publicly funded RSV vaccine program. Since November 2023, WDGPH has distributed 1,480 doses of RSV vaccine to providers to immunize eligible groups.



Program Requirements

Compliance with OPHS and Accountability Indicators: ☑ In compliance ☐ Not in compliance. If not in compliance, provide additional information about the variance and how it will be addressed. Highlights

Influenza Vaccines

The influenza vaccination campaign is promoted annually under Ontario's Universal Influenza Immunization Program (UIIP) to all individuals aged 6 months and older in the WDG area. Annual vaccination is required because protection from the vaccine decreases over time and circulating strains of the virus change from year to year.³ The National Advisory Committee on immunization (NACI) provides the Public Health Agency of Canada (PHAC) with recommendations for annual influenza vaccinations based on risks and experiences from other parts of the world ahead of Canada in the flu season. The influenza vaccine is offered through pharmacies, public health units, primary care providers, and facilities such as Long-Term Care Homes and hospitals. The goal of the influenza program is to reduce overall burden on the health care system caused by influenza, including death.

Individuals that are at greatest risk in the influenza season were strongly recommended to receive the vaccine.⁴ In 2023/2024 these populations included:

- Children six months up to five years of age
- Adults 65 years of age and older
- · Adults and children with certain chronic health conditions
- Individuals who are pregnant
- People of any age who are residents of nursing homes and other chronic care facilities
- Indigenous peoples
- Healthcare and other care providers, including childcare providers
- Household contacts of people at high risk
- Healthy individuals working in essential services (e.g., grocery, pharmacy, utility services) where absenteeism due to illness would cause an interruption in essential services
- People in direct contact with poultry infected with avian influenza during culling operations



Household contacts of expectant women or infants younger than six months of age,
 because infants younger than six months are at high risk but cannot receive the vaccine

Seasonal influenza presents an ongoing disease burden in Canada during the fall and winter months.⁴ As of February 2, 2024, there have been over 100 hospitalizations in WDG of patients with influenza, and over 3,100 in Ontario for the current influenza season. This represents approximately 20% and 15 % respectively of total hospitalizations due to COVID-19, influenza, and RSV.² (see Table 1)

Table 1: Respiratory Virus Hospital Admissions (2023-2024 season)

	Total	Influenza	% total	COVID-	% total	RSV	% total
	admissions		admissions	19	admissions		admissions
	COVID-19,						
	influenza,						
	and RSV						
WDG	503	101	20.1	362	72.0	40	8.0
Ontario	20,048	3,104	15.5	14,304	71.3	2,640	13.2

Publicly funded vaccines provided for the 2023/2024 UIIP included:

- Quadrivalent Inactivated Vaccine (QIV) for ≥6 months of age;
- High-Dose Quadrivalent Inactivated Vaccine (QIV-HD) for ≥65 years only; and
- Adjuvanted Trivalent Inactivated Vaccine (TIV-adj) for ≥65 years only.⁵

The QIV-HD and TIV-adj formulations are available from the province in limited supply, with an emphasis to prioritize supply to Long-Term Care Homes (LTC), Retirement Homes (RH), and primary care providers. Demand for the QIV-HD product exceeded supply and was no longer available to WDGPH clinics as of October 30, 2023.

During the 2023/2024 season, a total of 49,720 doses were administered in WDG by public health staff and local pharmacies. Of the 5,517 doses administered in WDGPH clinics, 2,760 clients identified as high risk (49.99 %) and 736 as non-high risk capable of transmitting to high-risk individuals (13.37%). (see Table 2)



Table 2: Influenza Vaccine Administration (season to date Jan. 31, 2024)

Provider	Influenza doses 2021-2022	Influenza doses 2022-2023	Influenza doses 2023-2024
Pharmacies	42,895	47,804	44,203
WDGPH	7,240	11,725	5,517
Total	50,135	59,529	49,720

Additional doses were administered by primary care and local hospitals; however, these vaccination numbers are not collected by public health units. WDGPH distribution of influenza vaccine to primary care totalled 26,836 doses and hospitals received 2,450 doses. LTC and RHs received 4,800 doses of influenza vaccine from WDGPH.

RSV Vaccine

RSV is a major cause of lower respiratory illness, particularly among infants, children, and older adults. In Ontario, most deaths from RSV have occurred in those aged 60 years and older. During peak RSV season, hospitals have seen a surge in emergency room visits and admissions of young children and older adults requiring medical care, putting a strain on hospital resources.⁶ See also Table 1 above for hospital admission data for RSV this season.

Health Canada authorized GlaxoSmithKline (GSK) on August 4, 2023, for their RSV vaccine, Arexvy.⁶ Initially, Ontario's publicly funded RSV prevention program included individuals 60 years of age and older who are:

- Living in LTC or Elder Care Lodges
- Residents of RHs licensed to provide dementia care

Eligibility was expanded on December 18, 2023, to include⁷:

- Patients in hospital receiving alternative level of care
- Patients receiving hemodialysis or peritoneal dialysis
- Recipients of solid organ or hematopoietic stem cell transplants
- Individuals experiencing homelessness
- Individuals aged 65 or older who identify as First Nations, Inuit or Metis



WDGPH distributed this vaccine in the WDG region. (see Table 3) WDGPH administered one dose to a client who accessed service through the Guelph-Wellington Community Health Van.

Table 3: RSV Vaccine Distribution (season to date Jan. 31, 2024)

Distribution	Doses
LTC	1124
Retirement Homes	273
Hospitals/Dialysis Units	83
Total	1480

WDGPH 2023-2024 Respiratory Season Clinic Campaign

The community clinic campaign centred on 3 primary locations, Stone Road Mall (Guelph), Centre Wellington Community Sportsplex (Fergus) and Monora Park Pavilion (Orangeville). Clinics commenced October 17, 2023, and continued for 6 weeks. Public Health Nurses from all WDGPH program areas as well as some other employees participated in these clinics, strengthening the emergency response preparedness.

Influenza and COVID-19 mRNA vaccines were offered simultaneously at all WDGPH clinics. One Saturday clinic as well as some evening clinics were offered at all locations. In addition, several clinics were held in a variety of locations throughout Wellington and Dufferin counties, primarily at community libraries to increase access and reduce barriers in more rural areas of the WDG region. Throughout the 6 weeks, most clinics were fully booked with walk-in clients accommodated wherever possible. WDGPH continues to prioritize accessibility and health equity for COVID-19 and influenza immunization i.e. clients were booked into WDGPH office clinics as appropriate.

In addition, WDGPH promoted and supported respiratory season immunizations in the WDG region by:

- Monitoring facilities that stored vaccines to ensure cold chain requirements are being met
- Promoting the importance of influenza and COVID vaccination through physicians' advisories, social media platforms, on the WDGPH website and advertising in local newspapers

As the community adjusts to respiratory season illnesses, WDGPH is working with the Ministry of Health and local stakeholders toward establishing a more predictable pattern for community clinics in the fall and potentially spring.



Related Reports

BH.01.APR0523.C07 - Influenza and COVID Vaccinations

References

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