

Oct. 21, 2024

Dear Toronto Board of Health Members,

Re: Agenda Item 2 – Fall 2024 Respiratory Virus Season

From today's report it is clear that Toronto Public Health is still promoting and encouraging the mRNA Covid-19 vaccines, and so I am here to voice and share that there are scientists and doctors all over the world insisting these vaccines be taken off the market immediately due to numerous & severe, sometimes fatal, vaccine adverse effects.

The side effects they mention include cardiovascular, auto-immune, neurological, reproductive, ocular & more. And supporting evidence includes:

1. What was actually observed during the clinical trials as outlined for instance in the just released book "[Pfizer Papers](#)" edited by journalist Naomi Wolf. She mentions hand tremors, joint pain, muscle pain, tingling, numbness, dementia, epilepsy, clots, thrombocytopenia, skin disorders, respiratory disorders, kidney problems, liver problems, menstrual problems, etc.
2. Tons of serious adverse event reports in vaccine adverse event reporting systems such as VAERS (Vaccine Adverse Event Reporting System) in the USA. As of Oct. 4, 2024, there have been 37,966 deaths reported in relation to the COVID-19 vaccines in [VAERS](#), which is 78% of the total deaths reported to VAERS from all vaccines since it started in 1990 (ref: [openvaers.com](#))
3. Personal testimonies such as can be found on the website [react19.org](#), a grassroots group based in the US that helps those with vaccine injuries, or on the website of Canada's National Citizens Inquiry [nationalcitizensinquiry.ca](#), a grassroots cross-country inquiry that listened to & recorded the stories of Canadians impacted by Covid-19 policies.

At the least one action Toronto Public Health could take is to stop prioritizing 6 mo to 4 year old kids. I was astonished to see on your website, small children 6 mo to 4 years listed as a "priority population" along with healthcare workers & first responders.

This is not in line with the National Advisory Committee on Immunization (NACI).

NACI strongly recommends vaccination for:

- adults 65 years of age or older
- Residents of long-term care homes and other congregate living settings
- Individuals with underlying medical conditions that place them at higher risk of severe COVID-19, including children with complex health needs
- Individuals who are pregnant
- Individuals in or from First Nations, Métis and Inuit communities
- Members of racialized and other equity-deserving communities
- People who provide essential community services

All others not on the list above may receive the vaccine.

So if I had a young healthy child, from this I would infer that they “may” but not “should” get a vaccine.

However, according to the City’s website, in addition to those who are at high-risk of getting very sick from COVID-19 (i.e. the NACI list), who it says should receive their vaccine, it says:

“...the following priority populations can receive their vaccine in October:

- **children 6 month to 4 years of age**
- health care workers
- first responders
- individuals with significant exposure to birds and mammals (such as poultry, livestock, slaughterhouse and processing plant workers, wildlife officers/researchers, and veterinarians)”

Seeing children 6 mo to 4 yrs listed as a “priority population” may make me think I “should” vaccinate my toddler.

Reinforcing this, elsewhere on the website it says:

“It is recommended anyone 6 months of age and older receive an updated COVID-19 vaccine this fall/winter to provide protection against strains that are spreading.”

Further, I received this News Release email (Oct. 17, 2024) from the City that said:

“Initial doses of the updated COVID-19 (KP.2) vaccine are now available for eligible individuals who are at an increased risk of SARS-CoV-2 infection or severe illness due to COVID-19. Eligible Torontonians include:

- Adults 65 years of age or older
- **Children six months to four years of age**
- Residents and staff of long-term care homes and other congregate living settings (e.g., chronic care facilities, retirement homes)
- Individuals who have underlying medical conditions that place them at higher risk of severe COVID-19 including children with complex health needs
- Pregnant individuals
- Individuals from First Nations, Métis and Inuit communities
- Members of racialized and other equity-deserving communities
- Healthcare workers and first responders.”

Again, 6 mo to 4 year olds are lumped together with the high-risk populations, making me think I “should” vaccinate my toddler!

What justification does Toronto Board of Health putting 6 mo to 4 year olds in a “priority population”? Going beyond even what NACI recommends?

It can help to look at what other jurisdictions are doing. For example in Denmark, they are in general not offering the Covid vaccine to the young & healthy.

This is what it says on the Denmark gov't website. <https://www.sst.dk/en/english/vaccination-against-influenza-and-covid-19>

“Why are people under 65 years of age generally not recommended being vaccinated?

“We know that age is the strongest biggest risk factor for becoming severely ill from influenza and covid-19.

“This is the reason why we do not generally offer to vaccinate people under 65 years of age unless they suffer from a particular chronic disease or health condition that increases their risk of becoming severely ill.”

Please save if not all Torontonians *at least* this age group from these mRNA-Covid-19 shots that are clearly not without severe adverse effects and for which we still do not know their long-term impacts.

Yours truly,

Mariko Uda, Toronto resident

Attachment 1: Summary of NACI statement of May 3, 2024: Guidance on the use of COVID-19 vaccines during the fall of 2024

<https://www.canada.ca/en/public-health/services/publications/vaccines-immunization/national-advisory-committee-immunization-summary-guidance-covid-19-vaccines-fall-2024.html>

Attachment 2: City of Toronto Covid-19 Vaccines webpage Oct. 20, 2024

<https://www.toronto.ca/community-people/health-wellness-care/health-programs-advice/respiratory-viruses/covid-19/covid-19-vaccines/>

Attachment 3: Oct. 17, 2024 News Release - Toronto Public Health encourages residents to get vaccinated during fall respiratory illness season





[Canada.ca](#) > [Health](#) > [Vaccines and immunization](#)

> [National Advisory Committee on Immunization \(NACI\): Statements and publications](#)

# Summary of NACI statement of May 3, 2024: Guidance on the use of COVID-19 vaccines during the fall of 2024

[Download in PDF format](#)

(645 KB, 5 pages)

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## Overview

On May 3, 2024, the Public Health Agency of Canada (PHAC) released the National Advisory Committee on Immunization's (NACI) [Guidance on the use of COVID-19 vaccines during the fall of 2024](#). This guidance is based on current evidence and NACI expert opinion.

**Beginning in the fall of 2024, NACI recommends the following for the use of the most recently updated COVID-19 vaccines:**

- **COVID-19 vaccination is strongly recommended for previously vaccinated and unvaccinated individuals at increased risk of SARS-CoV-2 infection or severe COVID-19 disease as follows:**
  - **All adults 65 years of age or older**
  - **Those 6 months of age and older who are:**
    - **Residents of long-term care homes and other congregate living settings**

- **Individuals with underlying medical conditions that place them at higher risk of severe COVID-19, including children with complex health needs**
- **Individuals who are pregnant**
- **Individuals in or from First Nations, Métis and Inuit communities**
- **Members of racialized and other equity-deserving communities**
- **People who provide essential community services**
- **All other previously vaccinated and unvaccinated individuals (6 months of age and older) who are not at increased risk for SARS-CoV-2 infection or severe COVID-19 disease (i.e., not on the list above) may receive the most recently updated vaccine in the fall of 2024.**
  - For previously vaccinated individuals, the recommended interval is 6 months from the last COVID-19 dose, with a minimum interval of 3 months from the last dose. This minimum interval will ensure that those who receive a spring 2024 dose (i.e., those at increased risk for severe disease) will be eligible again for an updated fall 2024 vaccine when it becomes available.

NACI will continue to monitor the evolving evidence and will update guidance as needed.

For the full statement, including supporting evidence and rationale, please see NACI's [Guidance on the use of COVID-19 vaccines during the fall of 2024](#).

## What you need to know

- NACI is providing advice well in advance of fall 2024 to provide provinces and territories with sufficient time to plan their fall COVID-19 immunization programs. This is similar to how seasonal influenza vaccine guidance is provided to allow sufficient time to organize fall influenza immunization programs.
- While the seasonality of SARS-CoV-2 has not been established, based on previous years, COVID-19 activity is expected to be elevated during the fall and winter months.
- Getting an additional dose of a COVID-19 vaccine this fall is expected to increase individual protection against infection, symptoms, and severe disease from COVID-19 that has waned since a last COVID-19 vaccine dose or previous infection. This protection helps to reduce the strain of COVID-19 on the health care system while other seasonal viruses such as influenza and respiratory syncytial virus (RSV) are also circulating.
- Receiving the most recently updated COVID-19 vaccine (either an mRNA or protein subunit COVID-19 vaccine) is also expected to provide a better immune response against circulating SARS-CoV-2 strains compared to earlier vaccines and is especially important for those at increased risk for SARS-CoV-2 infection or severe COVID-19 illness.
- As of spring 2024, Omicron sublineages of SARS-CoV-2 continue to circulate in Canada and globally, particularly JN.1\* group strains. The World Health Organization has recently recommended the use of a monovalent JN.1 lineage as the antigen in future formulations of COVID-19 vaccines. Recommendations will also be forthcoming from the United States Food and

Drug Administration. The advice from both organizations will inform which products are available in Canada in the fall.

- In this Statement update, NACI is also updating and clarifying the number of doses recommended for different immunocompromised populations.
- Consistent with previous guidance, COVID-19 vaccines may be given concurrently (i.e., same day), or at any time before or after non-COVID-19 vaccines (including live and non-live vaccines).
- NACI continues to simplify COVID-19 vaccine recommendations where possible, balancing available scientific evidence, expert advice, and program considerations. While general recommendations support access to those who want to be vaccinated, tailored guidance can facilitate support and communication for individuals at high-risk.

For more information on NACI's recommendations on the use of COVID-19 vaccines, please refer to the [COVID-19 vaccines chapter in the Canadian Immunization Guide \(CIG\)](#), as well as additional statements on the [NACI web page](#).

## Quotes

"With its most recent statement, NACI is providing guidance to facilitate fall vaccine program planning. The committee emphasizes the benefits of available vaccines for COVID-19 protection, and particularly for those most at risk of severe illness, as we know that protection against severe illness due to COVID-19 can wane over time. An updated COVID-19 vaccine formulation may also be available by the fall that would better target the currently circulating strains."

— Dr. Robyn Harrison, NACI Chair

"I would like to thank NACI for providing this guidance to help plan for COVID-19 vaccine programs in the fall. Vaccination remains one of our most effective tools in protecting ourselves and our communities from COVID-19. With our experience from previous years, we know there is potential for increased impact of COVID-19 activity during the fall and winter months when other respiratory viruses such as influenza and RSV are circulating. An additional dose using the latest vaccine formulation, layered with personal protective practices, will continue to be important this fall to increase protection especially for those most at risk of COVID-19 infection or severe disease in our communities"

— Dr. Theresa Tam, Chief Public Health Officer

### Date modified:

2024-05-03



# COVID-19: Vaccines

Translate this site using [Google Translate \(https://www.toronto.ca/home/translate/\)](https://www.toronto.ca/home/translate/) in 简体中文, 繁體中文, فارسی, தமிழ், Español, Português, Français, Русский, Italiano, 한국어, اردو, and other languages.

The updated fall/winter 2024-2025 COVID-19 KP.2 vaccine is available now for eligible individuals who live in Ontario and are six months of age and older and at high risk from COVID-19 or a priority population. Vaccine will be available to anyone 6 months of age and older beginning October 28, 2024.

Vaccines are available at select pharmacies and primary care providers. Find a pharmacy [here](https://www.ontario.ca/vaccine-locations/) (https://www.ontario.ca/vaccine-locations/). COVID-19 vaccines are available by appointment at Toronto Public Health clinics for children 6 months to 4 years of age.

Staying up-to-date with COVID-19 vaccines is important to protect ourselves and the most vulnerable people in our community from serious illness, including hospitalization and death.

Expand All

Collapse All

## Recommendations for fall/winter 2024-2025 COVID-19 Vaccination

It is recommended anyone 6 months of age and older receive an updated COVID-19 vaccine this fall/winter to provide protection against strains that are spreading.

The [National Advisory Committee on Immunization \(NACI\)](https://www.canada.ca/en/public-health/services/immunization/national-advisory-committee-on-immunization-naci.html) (https://www.canada.ca/en/public-health/services/immunization/national-advisory-committee-on-immunization-naci.html) recommend individuals who are at higher risk of getting very sick from a COVID-19 infection should be vaccinated with an updated COVID-19 vaccine this fall including:

- Adults 65 years of age or older
- Individuals 6 months of age and older who are/have:
  - Residents of long-term care homes and other congregate living settings
  - Pregnant Individuals\*

- From First Nations, Métis and Inuit communities
- Members of racialized and other equity-deserving communities
- Underlying medical conditions that places them at higher risk of severe COVID-19, including children with complex health needs
- Provide essential community services including health care workers and first responders.

NACI also recommends that all individuals 6 months of age and over not listed above may receive an updated vaccine beginning in the fall of 2024.

## Available COVID-19 Vaccines fall/winter 2024

Publicly funded COVID-19 vaccines are made available by the Ontario Ministry of Health.

The COVID-19 vaccines available in Ontario for fall/winter 2024:

- Moderna KP.2 for those 6 months of age and older
- Pfizer KP.2 for those 12 years of age and older

**Note:** The Novavax vaccine will not be available in Ontario for 2024/25. Individuals who are unable to receive an mRNA vaccine, should speak with their health care provider about treatment options, including the use of Paxlovid, to reduce the duration and severity of illness.

Both Moderna and Pfizer vaccines can be used interchangeably, as long as the vaccine provided is the vaccine approved by age.

## When to Receive an Updated COVID-19 Vaccine

Beginning in October, those who are at **high-risk of getting very sick** from COVID-19 should receive their vaccine.

In addition, the following **priority populations** can receive their vaccine in October:

- children 6 month to 4 years of age
- health care workers
- first responders
- individuals with significant exposure to birds and mammals (such as poultry, livestock, slaughterhouse and processing plant workers, wildlife)

officers/researchers, and veterinarians)

Beginning October 28, 2024, everyone 6 months of age and older can receive a COVID-19 vaccine.

## Recommended Interval for Fall/Winter Dose with Updated Vaccine

**For previously vaccinated individuals** the recommended interval is 6 months from the last COVID-19 vaccine dose, and a minimum of 3 months from the last dose may be used. See schedules below.

**For recent COVID-19 infection:** Individuals may consider delaying COVID-19 immunization by 3 to 6 months if someone had a recent test-confirmed COVID-19 infection and were previously vaccinated.

Children 6 months to 4 years of age and moderately to severely immunocompromised individuals may need additional doses at different intervals. See schedule below.

## Vaccine Use by Age

### Immunization schedule for fall/winter 2024-25 – Children 6 months to 4 years of age.

Current Age	Health Status	Vaccination History	# of Doses of Moderna to give	Interval between doses
6 months to 4 years	Immunocompetent	0 does	2 doses	8 weeks
		1 dose Moderna	1 dose	8 weeks
		1 dose Pfizer	2 doses	8 weeks
		2 doses with $\geq 1$ doses Pfizer	1 dose	8 weeks
		2 doses both Moderna	1 dose	6 months <sup>°</sup>
		$\geq 3$ doses, any product	1 dose	6 months <sup>°</sup>

<sup>°</sup>For previously vaccinated individuals, the recommended interval is 6 months from the last COVID-19 vaccine dose, and a minimum of 3 months from the last dose may be used.

## Immunization schedule for fall/winter 2024-25 – Immunocompetent Children ages 5 years and older

Current Age	Health Status	Vaccination History	# of Doses of Moderna or Pfizer to give	Interval between Doses
5 years <sup>^</sup> +	Immunocompetent	0 doses	1 dose	–
		≥1 dose, any product	1 dose	6 months <sup>°</sup>

<sup>^</sup> Children who started the primary series at less than 5 years of age and turn 5 years of age before completing the series, should get 1 dose this fall/winter with a minimum 8-week interval after their last dose.

### Vaccination if Immunocompromised

Receiving a vaccine is important for individuals who are moderately to severely immunocompromised and at increased risk of severe illness from COVID-19.

Moderately to severely immunocompromised individuals who are 6 months to 4 years of age who have not been previously vaccinated should receive an additional dose of vaccine to be fully protected.

Moderately to severely immunocompromised individuals who are 5 years of age and older should received an additional COVID-19 vaccine.

### Moderately to Severely Immunocompromised Individuals

As indicated by NACI, the following individuals are considered to be moderately to severely immunocompromised and are recommended to receive additional dose(s) as detailed in the immunization schedules section above:

- Solid tumor or hematologic malignancies or treatments for these conditions.
- Solid-organ transplant and taking immunosuppressive therapy.  
Hematopoietic stem cell transplant (HSCT) (within 2 years of transplantation or taking immunosuppression therapy).

- Immunocompromise due to chimeric antigen receptor (CAR) T cell therapy targeting lymphocytes.
- Moderate to severe primary immunodeficiency with associated humoral and/or cell-mediated immunodeficiency or immune dysregulation.
- HIV with AIDS-defining illness or TB diagnosis in last 12 months before starting vaccine series, or severe immune compromise with CD4 < 200 cells/μL or CD4 < 15%, or without HIV viral suppression.
- Recent treatment with the following categories of immunosuppressive therapies: anti-B cell therapies (monoclonal antibodies targeting CD19, CD20 and CD22), high-dose systemic corticosteroids, alkylating agents, antimetabolites, or tumor- necrosis factor (TNF) inhibitors and other biologic agents that are significantly immunosuppressive.
- Chronic kidney disease on dialysis

Please refer to [Ministry of Health](https://www.ontario.ca/page/covid-19-vaccines)  [\(https://www.ontario.ca/page/covid-19-vaccines\)](https://www.ontario.ca/page/covid-19-vaccines) guidance for more information and schedules below.

## Immunization schedule for fall/winter 2024-25 – Moderate to Severely immunocompromised Children 6 months to 4 years of age

Current Age	Health Status	Vaccination History	# of Additional Doses Recommended	Interval between Doses
6 months to 4 years	Immunocompromised	0 doses	3 doses	4 to 8 weeks
		1 dose Moderna	2 doses	4 to 8 weeks
		1 dose Pfizer	3 doses	4 to 8 weeks
		2 doses both Moderna	1 dose	4 to 8 weeks
		2 doses with $\geq 1$ doses Pfizer	2 doses	4 to 8 weeks
		3 doses with $\geq 1$ doses Pfizer	1 dose	4 to 8 weeks
		3 doses all Moderna	1 dose	6 months <sup>o</sup>
		$\geq 4$ doses, any product	1 dose	6 months <sup>o</sup>

## Immunization schedule for fall/winter 2024-25 – Moderate to Severely immunocompromised 5 years of age and older

Current Age	Health Status	Vaccination History	# of Additional Doses Recommended	Interval Between Doses
5 years <sup>^</sup> +	Immuno-compromised (IC)	0 doses	2 doses	4 to 8 weeks
		1 dose XBB or KP.2	1 dose <sup>¥</sup>	4 to 8 weeks
		1 dose non-XBB/non-KP.2	2 doses <sup>¥</sup>	4 to 8 weeks
		2 doses with ≥1 doses non-XBB/non-KP.2	1 dose <sup>¥</sup>	4 to 8 weeks
		2 doses, XBB	1 dose	6 months <sup>°</sup>
		≥3 doses, any product	1 dose	6 months <sup>°</sup>
	IC: HSCT recipient or CAR T cell therapy	1 dose XBB or KP.2	2 doses	4 to 8 weeks
		2 doses XBB and/or KP.2	1 dose	4 to 8 weeks
		≥3 doses XBB	1 dose	6 months <sup>°</sup>

¥ An additional dose may also be offered if recommended by the client's healthcare provider.

<sup>^</sup> Immunocompromised children who started the primary series at less than 5 years

of age and turn 5 years of age before completing the series, should continue the primary series schedule that was initiated (i.e., continue schedule as if child is under 5 years of age).

## Immunization schedule for fall/winter 2024-25 – Moderate to Severely immunocompromised HSCT, CAR T cell therapy – 5 years of age and older

Current Age	Health Status	Vaccination History	# of Additional Doses Recommended	Interval between Doses
5 years +	IC: HSCT recipient or CAR T cell therapy	0 doses	3 doses	4 to 8 weeks
		1 dose XBB or KP.2	2 doses	4 to 8 weeks
		2 doses XBB and/or KP.2	1 dose	4 to 8 weeks
		≥3 doses XBB	1 dose	6 months <sup>o</sup>

New hematopoietic stem cell transplantation (HSCT) recipients and chimeric antigen receptor (CAR) T cell therapy are considered immunologically naïve and should be vaccinated with 3 doses beginning at 3 to 6 months post-HSCT/CAR T-cell therapy, regardless of previous vaccination history, with 4 to 8 weeks between doses.

## Co-administration of Vaccines

Moderna and Pfizer vaccines may be given at the same time with other vaccines, or at any time before or after other non-COVID-19 vaccines (live or non-live vaccines), including influenza vaccine, respiratory syncytial virus (RSV) vaccine and/or the RSV monoclonal antibody, Beyfortus®.

## Residents Without OHIP Cards

Learn more on [where people without OHIP cards can get vaccinated.](https://www.toronto.ca/community-people/health-wellness-care/health-programs-advice/respiratory-viruses/reduce-respiratory-virus-spread-guide/)

(<https://www.toronto.ca/community-people/health-wellness-care/health-programs-advice/respiratory-viruses/reduce-respiratory-virus-spread-guide/>)

## If You Received a Vaccine Outside of Ontario/Canada

Everyone six months of age and older who has been vaccinated outside of Canada with one or more vaccine(s) not approved by Health Canada can receive a dose of the updated COVID-19 vaccine if it has been at least six months since the last COVID-19 vaccine.

If you live in Toronto and got COVID-19 vaccines outside of Ontario or Canada, learn more about how to document any dose(s) received outside of Ontario or Canada by visiting [COVID-19: Proof of Vaccination.](https://www.toronto.ca/community-people/health-wellness-care/health-programs-advice/respiratory-viruses/covid-19/) (<https://www.toronto.ca/community-people/health-wellness-care/health-programs-advice/respiratory-viruses/covid-19/>)

## Further information:

To support with vaccine information, [VaxFacts+](https://www.shn.ca/vaxfacts/) 

(<https://www.shn.ca/vaxfacts/>) is helping community members and families to get the most accurate information.

## How COVID-19 Vaccines Work

COVID-19 vaccines teach our immune system to make antibodies that protect against COVID-19. These antibodies can recognize and attack the virus when it enters the body.

mRNA vaccines, like the Pfizer-BioNTech Comirnaty and Moderna Spikevax vaccines, provide your body with instructions (mRNA) to make antibodies. The COVID-19 vaccine is the first vaccine using mRNA technology to be approved for use, but it was in development for many years prior to the COVID-19 pandemic.

Protein subunit vaccines, like Novavax, contain harmless and purified pieces (proteins) of the virus which have been specifically selected for their ability to trigger immunity. Your body then uses these to make its own instructions to make antibodies.

Novavax vaccine will not be available in Ontario for 2024/25. Individuals who are unable to receive an mRNA vaccine, should speak with their health care provider about treatment options, including the use of Paxlovid, to reduce the duration and severity of illness.

The vaccine is given using a needle in your upper arm. It takes at least two weeks after getting a vaccine dose to be protected. It is safe to get the vaccine at the same time with other vaccines, or at any time before or after other non-COVID-19 vaccines (live or non-live vaccines), including influenza vaccine, respiratory syncytial virus (RSV) vaccine and/or the RSV monoclonal antibody, Beyfortus®.

## Vaccine Safety

Health Canada has approved COVID-19 vaccines as safe and effective. They meet quality standards, and the benefits of the vaccines outweigh the risks of a COVID-19 infection.

Health Canada and Public Health Agency of Canada continue to monitor the safety of all COVID-19 vaccines approved in Canada and will take appropriate action as needed.

## Potential Side Effects and When to Get Medical Attention

Most vaccine side effects are mild and last for one to three days. Common side effects include:

- Sore arm near the injection site
- Feeling tired
- Headache
- Achy muscles or joints
- Fever and chills

Severe side effects are rare. Get medical attention right away if you develop any of these symptoms after getting a vaccine:

- Signs and symptoms of severe allergic reaction, including hives, swelling of the mouth or throat or trouble breathing, hoarseness or wheezing.
- High fever (over 40°C)
- Seizures
- Other serious reactions

**Report any severe reactions (<https://www.toronto.ca/community-people/health-wellness-care/information-for-healthcare-professionals/immunization-and-vaccine-info-for-health-professionals/adverse-events-following-immunization-aeifi/>) to the COVID-19 vaccine to your health care provider. Health care providers are required to report Adverse Events Following Immunizations (AEFIs) to Toronto Public Health.**

## Vaccine Allergies

COVID-19 vaccines do not contain eggs, gelatin (pork), gluten, latex, preservatives, antibiotics or aluminum.

People with allergies, including serious allergies to food, medications, and insect bites can get the COVID-19 vaccine. Allergic reactions can be treated and are usually temporary. People are monitored for 15 minutes after vaccination for any reactions.




People with severe allergies to any of the vaccine ingredients should speak with their physician/allergist about getting the vaccine. Some people with allergies to an ingredient can still be safely vaccinated.

If you get a serious reaction after your first dose, talk to your health care provider about future vaccinations. Sometimes you can still be safely vaccinated or can received a different vaccine.

## Resources

- **Vaccine Data on COVID-19 Pandemic Archived Dashboards** (<https://www.toronto.ca/community-people/health-wellness-care/health-programs-advice/respiratory-viruses/covid-19/covid-19-pandemic-data/covid-19-archived-dashboards/>)
- Archived: **COVID-19 Pandemic City Immunization Strategies** (<https://www.toronto.ca/community-people/health-wellness-care/health-programs-advice/respiratory-viruses/covid-19/covid-19-vaccines/covid-19-city-immunization-program/>)
- **Adverse Events Following Immunization** (<https://www.toronto.ca/community-people/health-wellness-care/information-for-healthcare->

[professionals/immunization-and-vaccine-info-for-health-professionals/adverse-events-following-immunization-aeft/](#)

- [Adverse Events Following Immunization \(AEFIs\) for COVID-19 in Ontario](#)   
([https://www.publichealthontario.ca/-/media/documents/ncov/epi/covid-19-aeft-report.pdf?sc\\_lang=en](https://www.publichealthontario.ca/-/media/documents/ncov/epi/covid-19-aeft-report.pdf?sc_lang=en))
- [Reported Side Effects Following COVID-19 Vaccination in Canada](#)   
(<https://health-infobase.canada.ca/covid-19/vaccine-safety/>)
- [Vaccine Injury Support Program](#)  (<https://vaccineinjurysupport.ca/en>)

## Contact Information

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### Toronto Public Health

8:30 a.m. – 4:30 p.m., Monday to Friday

Call if you have questions about COVID-19. Translation is available in multiple languages. Toronto Public Health staff cannot book vaccine appointments over the phone.

**Telephone:** 416-338-7600

**TTY:** 416-392-0658

**Email:** [PublicHealth@toronto.ca](mailto:PublicHealth@toronto.ca) (<mailto:PublicHealth@toronto.ca>)

### 311 Toronto

Outside City limits: 416-392-2489

Call to get information about City services in more than 180 languages.

**Telephone:** 311

**TTY:** 416-338-0889

**Email:** [311@toronto.ca](mailto:311@toronto.ca) (<mailto:311@toronto.ca>)

### Health Connect Ontario

Call to talk to a registered nurse if you have any health questions. Open 24 hours a day, seven days a week, 365 days a year.

**Telephone:** 811

### Emergency Services

Call if you're having difficulty breathing or experiencing other severe symptoms.

**Telephone:** 911



----- Forwarded message -----

From: **Toronto News Releases** <[media@toronto.ca](mailto:media@toronto.ca)>

Date: Thu, Oct 17, 2024 at 10:04 AM

Subject: News Release - Toronto Public Health encourages residents to get vaccinated during fall respiratory illness season

To: <[NEWS-RELEASES@lists.toronto.ca](mailto:NEWS-RELEASES@lists.toronto.ca)>

City of Toronto Media Relations has issued the following:

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News Release

October 17, 2024

Toronto Public Health encourages residents to get vaccinated during fall respiratory illness season

With cooler weather coming in, Toronto Public Health (TPH) encourages eligible residents to get immunized against respiratory infections that include COVID-19, influenza (flu) and Respiratory Syncytial Virus (RSV).

Initial doses of the updated COVID-19 (KP.2) vaccine are now available for eligible individuals who are at an increased risk of SARS-CoV-2 infection or severe illness due to COVID-19. Eligible Torontonians include:

- Adults 65 years of age or older
- Children six months to four years of age
- Residents and staff of long-term care homes and other congregate living settings (e.g., chronic care facilities, retirement homes)
- Individuals who have underlying medical conditions that place them at higher risk of severe COVID-19 including children with complex health needs
- Pregnant individuals
- Individuals from First Nations, Métis and Inuit communities
- Members of racialized and other equity-deserving communities
- Healthcare workers and first responders.

Updated COVID-19 and flu vaccines will be available beginning Monday, October 28 for all residents aged six months and older who live, work or go to school in Ontario. Vaccines are available at many locations including participating primary healthcare providers, walk-in clinics and participating pharmacies. Individuals may confirm their eligibility by visiting the Ministry of Health's webpage: [www.ontario.ca/page/vaccines](http://www.ontario.ca/page/vaccines).

TPH will not be administering the updated COVID-19 (KP.2) and flu vaccines directly to the general public. With the ending of provincial funding for the mass immunization clinics last year, TPH will focus on vaccinating children four years of age and younger against COVID-19 and the flu and residents in select high-risk settings. Residents can visit <https://www.tphbookings.ca> to book an appointment for their eligible child.

Vaccination is an effective way to protect residents, preventing severe illness, hospitalization and death, especially for high-risk individuals. In addition, Toronto residents can reduce the spread of respiratory infections by staying home when sick, practicing good hand hygiene, choosing well-ventilated spaces and wearing a well-fitted mask in crowded indoor areas.

## RSV vaccine availability

Those 60 years of age or older and not eligible for the publicly-funded RSV vaccine can speak to their healthcare provider about receiving it at a cost. Currently, pharmacies will not be administering the publicly-funded RSV vaccine.

The Ministry of Health introduced a new RSV prevention program for infants and high-risk children through the following options:

- Pregnant Ontarians (32-36 weeks gestation) delivering near or during the 2024-2025 RSV season can receive a vaccine through their prenatal care provider to protect their newborn. This vaccine is available through participating prenatal health care providers, primary care providers and midwives.
- Infants born in 2024-25 and high-risk children up to 24 months can receive a monoclonal antibody treatment for immediate RSV protection. This is available through hospitals, birthing centers, primary care providers and specialty clinics.

For more information on vaccine availability and respiratory disease updates, please visit the City's Respiratory Viruses webpage at [www.toronto.ca/RespiratoryViruses](http://www.toronto.ca/RespiratoryViruses) or contact a healthcare provider.

Toronto is home to more than three million people whose diversity and experiences make this great city Canada's leading economic engine and one of the world's most diverse and livable cities. As the fourth largest city in North America, Toronto is a global leader in technology, finance, film, music, culture, innovation and climate action, and consistently places at the top of international rankings due to investments championed by its government, residents and businesses. For more information visit [www.toronto.ca](http://www.toronto.ca) or follow us on X at [x.com/cityoftoronto](https://x.com/cityoftoronto), on Instagram at [www.instagram.com/cityofto](https://www.instagram.com/cityofto) or on Facebook at [www.facebook.com/cityofto](https://www.facebook.com/cityofto).

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