

Influenza and the Flu Shot

Facts for Health Care Workers

2019-2020

Presentation to (group name)

Your Name

Your Title

Date

- Highly contagious and common respiratory illness caused by influenza A & B viruses
- Influenza strains circulating the globe change on a regular basis
- In Canada influenza generally occurs between late fall and early winter

Estimated attack rate globally:

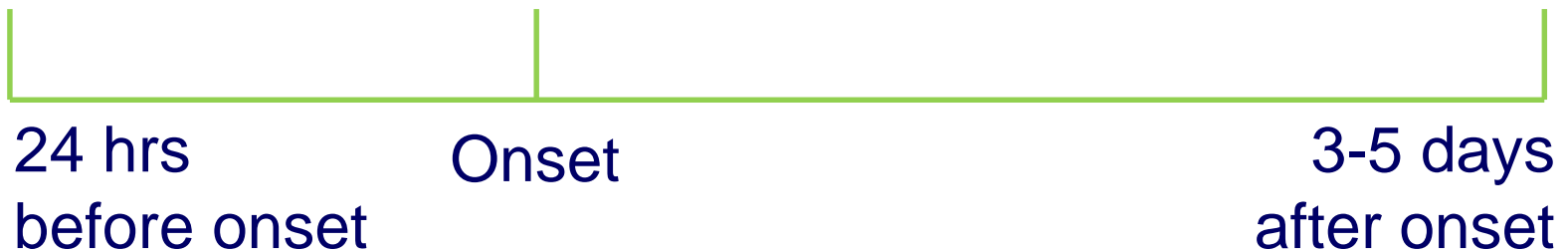
- 5 to 10% in adults
- 20 to 30% in children

Each year in Canada, influenza:

- causes up to **12,200** hospitalizations
- leads to about **3,500** deaths

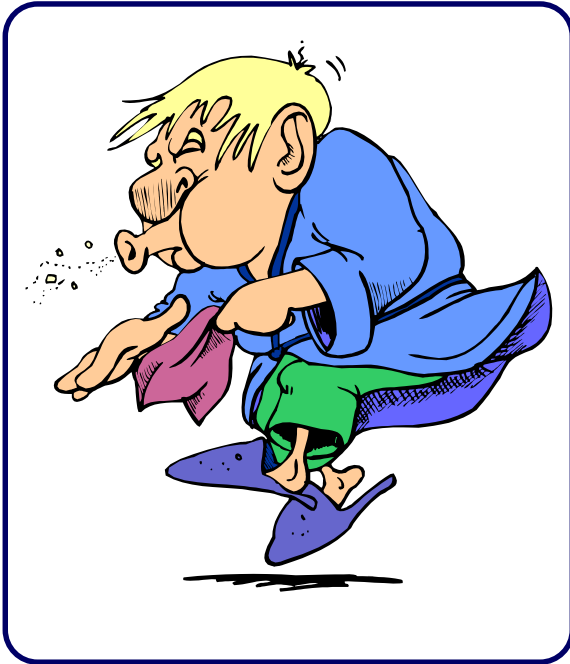
Incubation Period:
~1-4 days

Period of Communicability:

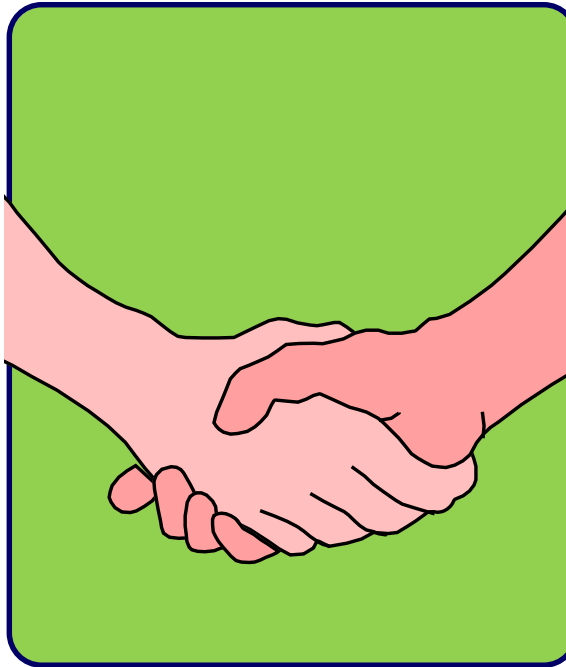


How Influenza Is Spread

Small Droplets



Direct Contact



Indirect Contact



Watch Video:

<https://www.canada.ca/en/public-health/services/video/the-flu-don-t-pass-it-on.html>

Signs and Symptoms

- Fever
- Cough
- Muscle aches
- Headache
- Chills
- Loss of appetite
- Fatigue
- Sore throat
- Nausea, vomiting and diarrhea may occur, especially in children

- A person infected with influenza may:
 - not develop symptoms but may shed the virus and infect others
 - spread influenza for up to 24 hours before developing symptoms
 - develop only mild symptoms but continue to work and infect others

Why Should I Be Concerned?

- You may get sick with influenza
- You may spread influenza to family and friends
- You may transmit influenza to people at high risk of influenza-related complications, including pneumonia or even death

People at high risk for influenza-related complications

- Adults and children with chronic health conditions
- People of any age who are residents of nursing homes and other chronic care facilities
- Adults 65 years of age and older
- All children under six years of age
- All pregnant people
- Indigenous peoples

What Can be Done to Prevent and Control the Spread of Influenza?

- Influenza Immunization
- Basic Infection Prevention and Control Measures:
 - Hand hygiene
 - Respiratory etiquette
 - Avoid touching your eyes, nose and mouth
 - Stay home if you are ill



What Can be Done to Prevent and Control the Spread of Influenza?

- Routine Practices and Additional Precautions for all health care settings, including surveillance for acute respiratory infections
- Environmental cleaning
- Outbreak control measures, including antiviral prophylaxis

- Vaccination is the **most effective** way to protect against influenza infection
- Influenza vaccine ~ 50% effective
- Reduces hospitalization, pneumonia and death in the elderly

Can vary from season to season

Depends on at least two factors:

- Who is being vaccinated
- Match between the influenza strains in the vaccine and the influenza strains that are circulating

With a poor match, may still offer some protection

Other flu shot vaccine strains may be well matched

Strains

- *A/Brisbane/02/2018 (H1N1)pdm09-like virus*
- *A/Kansas/14/2017 (H3N2)-like virus*
- *B/Colorado/06/2017-like virus (B/Victoria/2/87 lineage)*
- *B/Phuket/3073/2013-like virus (B/Yamagata lineage)**

*Quadrivalent vaccine only

- Quadrivalent

- FluLaval® Tetra
- Fluzone®
- Afluria® Tetra (5 yrs +)

- Trivalent

- High-Dose Fluzone® (for 65 yrs +)

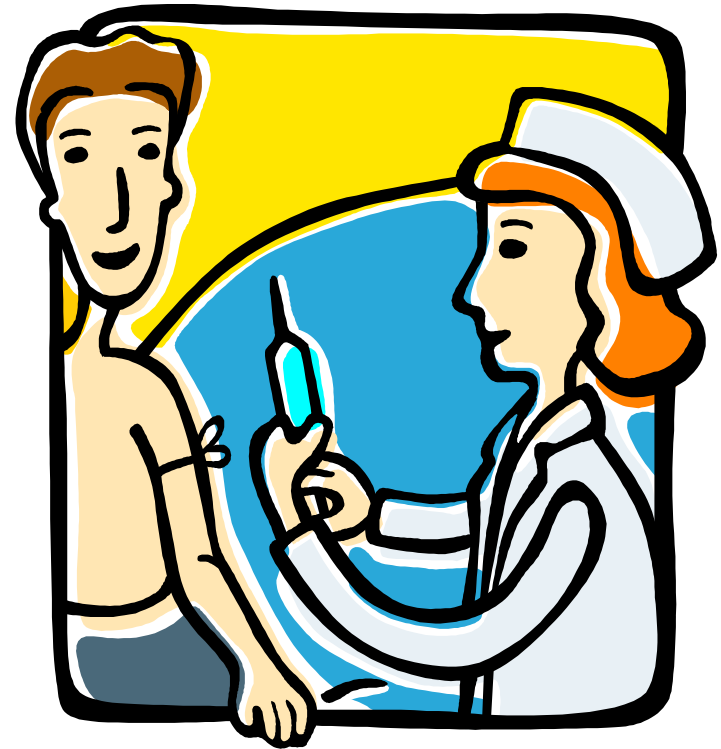
- Influenza vaccine is safe and well tolerated
- Soreness at the injection site may occur, and last up to 2 days
- Children may get a fever after vaccination
- Severe side effects and allergic reactions are rare
- Oculorespiratory syndrome (ORS) causing both eyes to be red and one or more of cough, wheeze, chest tightness, difficulty breathing, difficulty swallowing, hoarseness or sore throat.
- Guillain Barré Syndrome (GBS) is a very uncommon disease that causes muscle paralysis and has been associated with certain infectious diseases. In very rare instances (about 1 in a million doses of vaccine), the flu shot has been associated with GBS. The risk of developing GBS after an influenza infection is larger than the risk associated with the flu shot.

- Expert advisory groups continue to recommend annual influenza vaccination
- Studies show better protection by being vaccinated than by not getting vaccinated.
- More research needed.

FREE for everyone greater than 6 months old who lives, works or goes to school in Ontario

NACI recommends flu shot programs should focus on people:

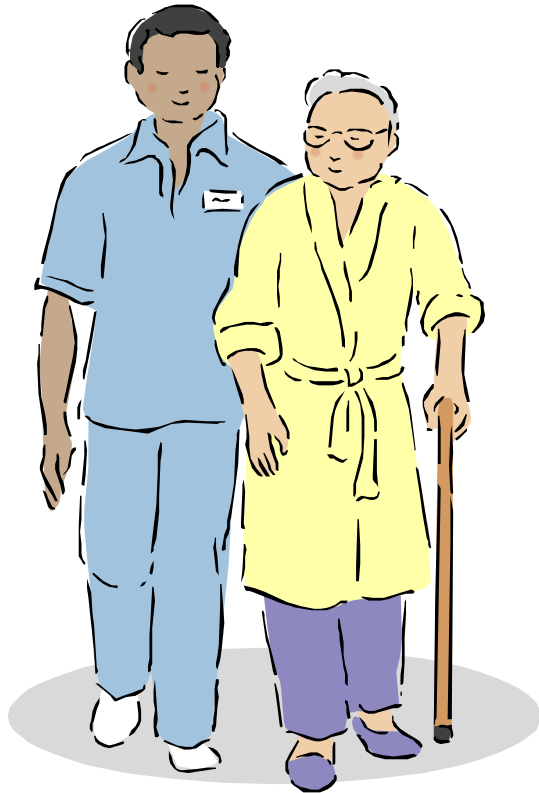
- At high risk for influenza-related complications or hospitalization
- Capable of transmitting flu to high risk individuals
- Who provide essential community services



Who Should NOT Get the Vaccine?

- Infants under 6 months of age
- Person who had an anaphylactic reaction to a previous dose of influenza vaccine **OR** to any vaccine components, with the exception of egg
- Person who has had GBS within 6 weeks of influenza vaccination
- Most people who had ORS can safely receive the vaccine but should talk to their doctor first
- Postpone vaccination in persons with serious acute illness until their symptoms have abated

Health Care Workers' (HCWs) Duty of Care



“In the absence of contraindications, refusal of HCWs to be immunized against influenza implies failure in their duty of care to patients.”

- NACI

HCW Immunization Rates – Acute Care

**HCW Influenza Immunization Coverage Rates for 2018-2019
Influenza Season as of December 15, 2018
Acute Care Hospitals**

Influenza Season	Toronto Median Rate (Range)	Ontario Median Rate	Your Facility's Rate
2018-2019	46% (27%-69%)	53%	ENTER RATE HERE

HCW Immunization Rates – CCC/Rehab

**HCW Influenza Immunization Coverage Rates for 2018-2019
Influenza Season as of December 15, 2018
Complex Continuing Care/Rehab**

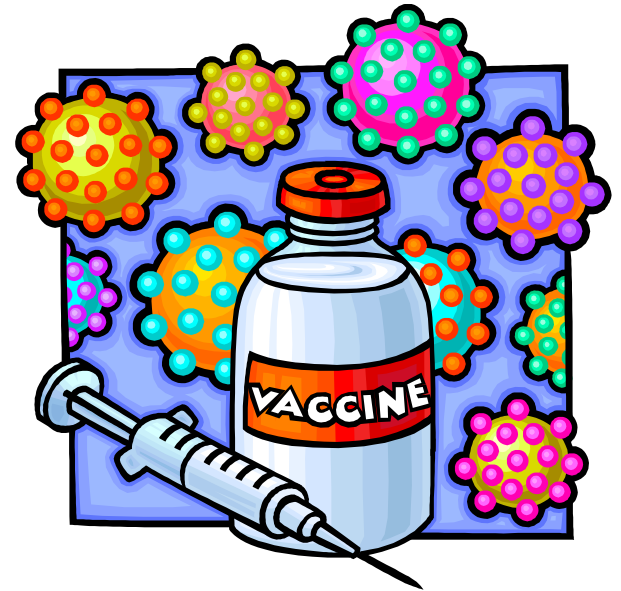
Influenza Season	Toronto Median Rate (Range)	Ontario Median Rate	Your Facility's Rate
2018-2019	59% (35%-96%)	53%	ENTER RATE HERE

**HCW Influenza Immunization Coverage Rates for 2018-2019
Influenza Season as of December 15, 2018
Long-Term Care Homes**

Influenza Season	Toronto Median Rate (Range)	Ontario Median Rate	Your Facility's Rate
2018-2019	80% (9%-99%)	73%	ENTER RATE HERE

Under What Conditions Can I Work During a Influenza Outbreak?

- Must be **well**
- Vaccinated for 2 weeks or more
- Vaccinated for less than 2 weeks - must take antivirals
- Unvaccinated - must take antivirals





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AND YOUR PATIENTS**

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- Influenza vaccines are safe and the most effective way to prevent influenza
- Unvaccinated staff can spread influenza to family, friends, and patients/residents
- Hospitalized and other vulnerable patients can have prolonged hospitalizations, severe illnesses, and can die as a result of influenza transmission from healthcare workers

