

<p>IN THIS ISSUE:</p> <ul style="list-style-type: none"> ▪ Expansion of Vaccine Priority Groups ▪ Updated H1N1 Vaccine Dosing for Children ▪ Updated Guidance Documents ▪ Chronic Conditions and H1N1 ▪ GSK Unadjuvanted Vaccine 	<p>FROM: David L. Mowat, MBChB MPH FRCPC Medical Officer of Health</p>
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Expansion of Vaccine Priority Groups

The H1N1 immunization program has now further expanded to include:

- People aged 65 and over with chronic medical conditions
- All children aged 6 to 13 yrs

In summary, H1N1 vaccine is to be offered to:

- People with chronic medical conditions
See page two for the list of chronic conditions.
- Pregnant women
- Children from 6 months to 13 yrs of age
- Persons residing in remote and isolated settings or communities
- Health care workers involved in pandemic response or the delivery of essential health care services
- Household contacts and care providers of persons at high risk who cannot be immunized or may not respond to vaccines
- First responders (police and firefighters)
- Frontline institutional correctional workers
- People aged 65 and over in institutions

As more vaccine is received, the H1N1 priority grouping will continue to expand. As always we encourage you to exercise your discretion to minimize vaccine wastage and meet your patients' needs.

Updated H1N1 Vaccine Dosing for Children

The Public Health Agency of Canada has updated its recommendations on H1N1 vaccine dosing for **children between 3 years and 9 years** of age.

The updated recommendations reflect findings from European clinical trials that suggest a single half-dose of adjuvanted H1N1 flu vaccine for healthy children likely provides an acceptable level of protection from the H1N1 flu virus.

The new recommendations include three components:

- **Children between 6 months of age and under 3 years of age** should receive two half-doses of adjuvanted H1N1 flu vaccine, administered at least 21 days apart (guidance is unchanged).
- **Children with chronic health conditions who are between 3 and 9 years of age** receive one half-dose of the H1N1 flu vaccine followed by a second half-dose a minimum of 21 days later. See page two for the list of chronic conditions.
- **Healthy children between 3 and 9 years of age** should only receive a single half-dose of the H1N1 vaccine, and do not need to return for a second vaccine for now.

Further adjustments to the vaccine dosage recommendations may be made once the results of additional research and clinical trials on vaccine effectiveness are available.

Updated Guidance Documents

The guidance documents for ERs, ambulatory care, and LTC have the following updates:

- Expansion of antiviral treatment to include patients with ILI who are not at high risk of complications

- Includes information on pH1N1 complications
- Post-partum duration extended to 6 weeks
- New section on paediatric patients

For more information regarding H1N1 immunization contact Peel Public Health at 905-799-7700 or visit our website:
<http://www.peelregion.ca/health/professionals/>

To access the documents, visit
www.health.gov.on.ca/en/ccom/flu/h1n1/pro/

Chronic Conditions and H1N1

People with the following underlying or chronic health conditions are more at risk of developing complications from H1N1 infection if they do get sick:

- Heart disease
- Kidney disease
- Asthma and chronic lung disease
- Liver disease
- Diabetes
- Serious obesity
- Diseases or treatments that affect the immune systems such as cancer, HIV/AIDS, organ transplants
- Blood disorders
- Neurological disorders
- Medical conditions where people have difficulty swallowing or are at risk of choking
- Children and adolescents' medical conditions treated for long periods with acetylsalicylic acid (Aspirin®).

Source: MOHLTC

GlaxoSmithKline (GSK) Unadjuvanted Vaccine

On November 13th, Health Canada approved an additional unadjuvanted H1N1 flu vaccine, *Influenza A (H1N1) 2009 Pandemic Monovalent Vaccine (Without Adjuvant)*, manufactured by GSK. Peel Public Health expects to receive the vaccine in the next few days and will provide information in the next HPU on its distribution and use.