

Changing the Way We Work Community of Practice for Ontario Family Physicians

Feb 20, 2026

**Dr. Daniel Warshafsky
Dr. Vincent Ki**



Infectious Disease & New Hypertension Guidelines Update



Family & Community Medicine
UNIVERSITY OF TORONTO

Ontario College of
Family Physicians



Infectious Disease & New Hypertension Guidelines Update

Moderator:

- **Dr. Eleanor Colledge**, Family Physician, South East Toronto Family Health Team, Toronto, ON

Panelists:

- **Dr. Daniel Warshafsky**, Associate Chief Medical Officer of Health at the Office of the Chief Medical Officer of Health, Toronto, ON
- **Dr. Vincent Ki**, Division Head of Nephrology at the Trillium Health Partners, Mississauga, ON

Host:

- **Dr. Eric Wong**, OCFP President-Elect, Family Physician, Vice-Dean, Education, Toronto Metropolitan University, School of Medicine & Professor, Department of Family Medicine at the Schulich School of Medicine & Dentistry, Western University

Session slides will be available on the CTWWW website by the end of the day.

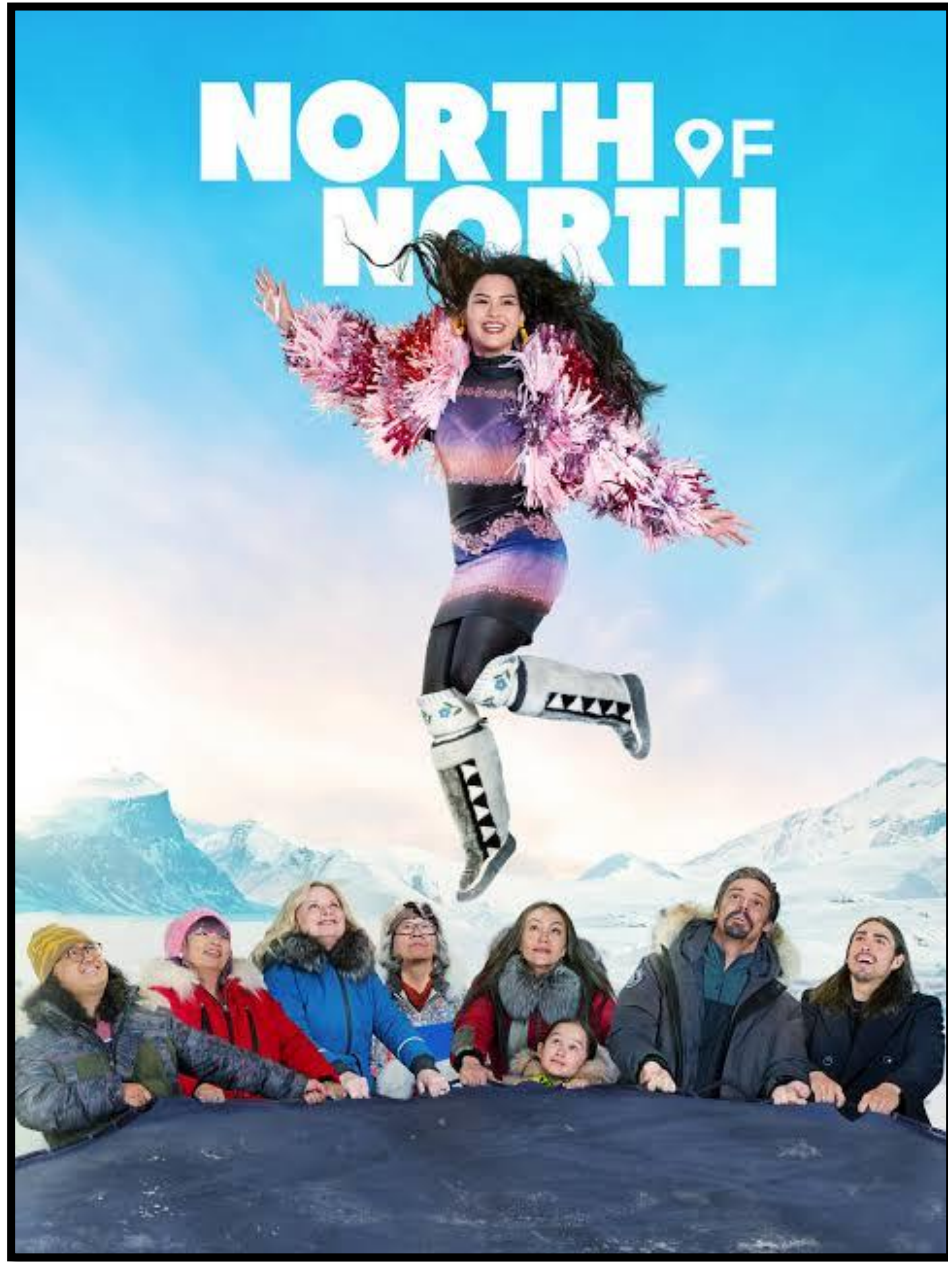
The Changing the Way We Work Community of Practice for Ontario Family Physicians has been certified by the College of Family Physicians of Canada and the Ontario Chapter for up to 32 Mainpro+ Certified Activity credits.

Land Acknowledgement

We acknowledge that the lands on which we are hosting this meeting include the traditional territories of many nations.

The OCFP and DFCM recognizes that the many injustices experienced by the Indigenous Peoples of what we now call Canada continue to affect their health and well-being. The OCFP and DFCM respects that Indigenous people have rich cultural and traditional practices that have been known to improve health outcomes.

I invite all of us to reflect on the territories you are calling in from as we commit ourselves to gaining knowledge; forging a new, culturally safe relationship; and contributing to reconciliation.



Changing the way we work

A community of practice for family physicians

At the conclusion of this series participants will be able to:

- Identify the current best practices for delivery of primary care and how to incorporate into practice.
- Describe point-of-care resources and tools available to guide decision making and plan of care.
- Connect with a community of family physicians to identify practical solutions for their primary care practice under current conditions.

Disclosure of Financial Support

This CPD program has received in-kind support from the Ontario College of Family Physicians and the Department of Family and Community Medicine, University of Toronto in the form of logistical and promotional support.

Potential for conflict(s) of interest:

N/A

Mitigating Potential Bias

- The Scientific Planning Committee has full control over the choice of topics/speakers.
- Content has been developed according to the standards and expectations of the Mainpro+ certification program.
- The program content was reviewed by a three-member national/scientific planning committee.

Planning Committee: Dr. Jobin Varughese (OCFP), Dr. Ali Damji (DFCM), Dr. Eleanor Colledge (DFCM), Dr. Stephanie Zhou (DFCM), Julia Galbraith (OCFP), Pavethra Yogeswaran (OCFP), Angeline Tan (OCFP), Reema Chaudhry (OCFP), Marisa Schwartz (DFCM), Erin Plenert (DFCM)

Previous webinars & related resources:

<https://dfcm.utoronto.ca/past-changing-way-we-work-community-practice-sessions>

Self-learning program

The session materials, including recordings, tools, and resources are available as self-learning modules.

This one-credit-per-hour Group Learning program has been certified by the College of Family Physicians of Canada and the Ontario Chapter for up to 80 credits.

To participate in this self-learning:

- Select the dates/sessions you wish to participate in. You are welcome to complete as many sessions as you wish.
- Watch the video recording of the live session.
- Review the session tools and resources.
- Complete the self-learning post-session activity, click the button below.

[Complete self-learning activity](#)



Self-Learning Activity and Evaluation: COVID-19 Community of Practice for Ontario Family Physicians

By completing this Self-Learning Activity for the COVID-19 Community of Practice for Ontario Family Physicians, you are confirming that you have completed this activity.

*** 1. Attestation: I confirm that I have completed the COVID-19 CoP self-learning activity (video and resources). (If completing multiple session dates, please enter all that apply below**

ENTER DATE AS Month-Day-Year i.e. December 10, 2021)

Session Date(s):

Name:

Email:

*** 2. After reviewing this COVID-19 session material (video and resources), I have a question (s) regarding the content that needs clarifying.**

I have no questions

Question:

Missed a session? Want to earn credits?

The Self-learning Program lets you earn credits for watching past sessions.

Just click the link and fill out a 60s form!



Dr. Daniel Warshafsky – Panelist

Associate Chief Medical Officer of Health at the Office of the Chief Medical Officer of Health



Dr. Vincent Ki – Panelist

Division Head of Nephrology at the Trillium Health Partners

Speaker Disclosure

- Faculty Name: **Dr. Daniel Warshafsky**
- Relationships with financial sponsors:
 - Grants/Research Support: N/A
 - Speakers Bureau/Honoraria: N/A
 - Others: N/A

- Faculty Name: **Dr. Vincent Ki**
- Relationships with financial sponsors:
 - Grants/Research Support: Servier and Sanofi
 - Honoraria: Ontario College of Family Physicians, Janssen
 - Advisory boards or speakers bureau: Fresenius, Amgen, Sanofi, Servier, Janssen, Boehringer-Ingelheim, Astrazeneca, Bayer, Otsuka
 - Others: N/A

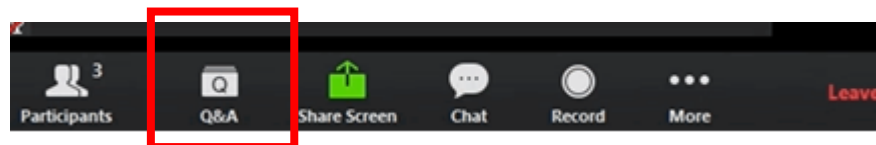
Speaker Disclosure

- Faculty Name: **Dr. Eric Wong**
- Relationships with financial sponsors:
 - Grants/Research Support: N/A
 - Speakers Bureau/Honoraria: Ontario College of Family Physicians, Touchstone Institute
 - Others: Thames Valley Family Health Team, University of Toronto, Western University, Agecare Aylmer LTC, Peoplecare Oakcrossing LTC, Earls Court Village LTC, Terrace Lodge LTC, Oakcrossing Retirement Living

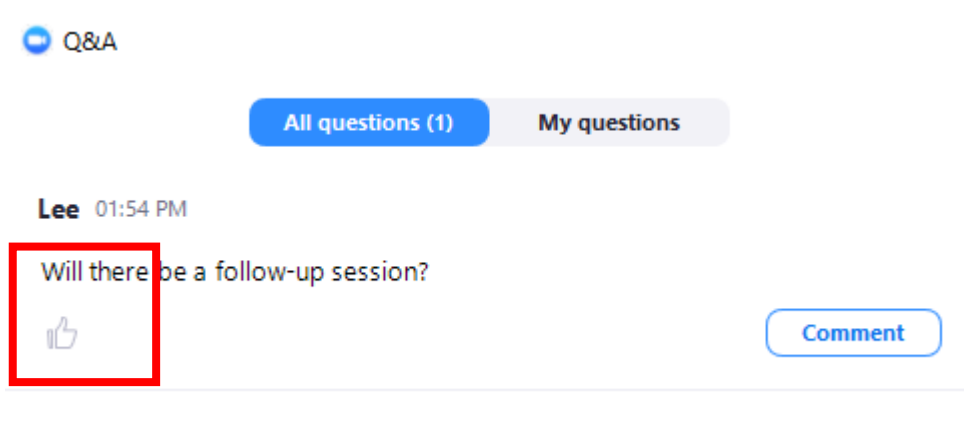
- Faculty Name: **Dr. Eleanor Colledge**
- Relationships with financial sponsors:
 - Grants/Research Support: N/A
 - Speakers Bureau/Honoraria: Ontario College of Family Physicians
 - Others: The Foundation for Medical Practice Education (McMaster University)

How to Participate

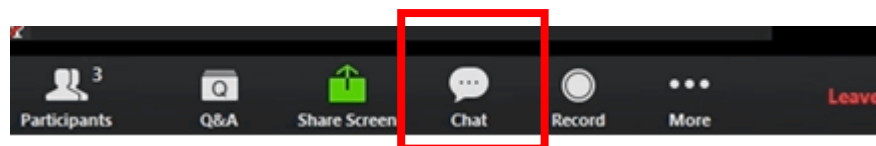
- All questions should be asked using the Q&A function at the bottom of your screen.



- Press the thumbs up button to upvote another guest's questions. Upvote a question if you want to ask a similar question or want to see a guest's question go to the top and catch the panels attention.



- Please use the chat box for networking purposes only.





Dr. Daniel Warshafsky – Panelist

Associate Chief Medical Officer of Health at the Office of the Chief Medical Officer of Health



Dr. Vincent Ki – Panelist

Division Head of Nephrology at the Trillium Health Partners

Respiratory Season Update

February 20, 2026

Summary of key respiratory metrics: February 19 published

Summary table of key respiratory metrics: Fall 2025/26

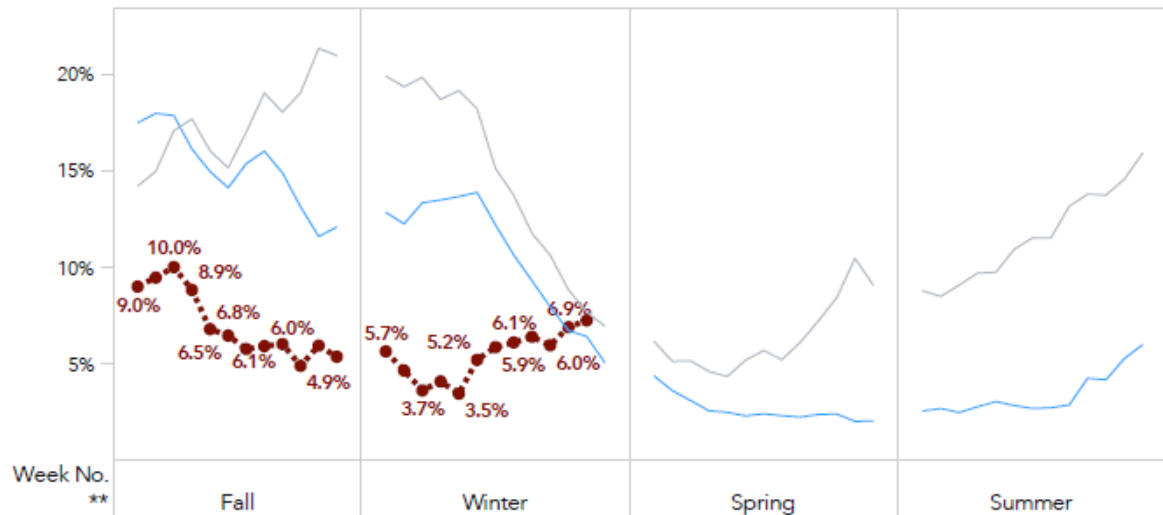
Δ from previous week	COVID-19	Δ	Influenza A/B	Δ	RSV	Δ	As of date
Viral: % positivity	7.2%	-0.1% pts	2.8% (A=1.5%B=1.4%)	0.1% (A=-0.2%B= 0.3%)	8.2%	0.6% pts	15/2/2026
*Viral: Positive cases/tests	719	1	283 (A=156 B=127)	22 (A=-13 B=35)	816	57	15/2/2026
Viral: LTC % positivity	10.8%	0.4%pts	2.5% (A=2.4%B= 0.2%)	0.7% (A=0.6%B= 0.1%)	7.5%	0.1%	14/2/2026
New Outbreaks: LTC	13	3	2	-1	4	-2	14/2/2026
New Outbreak: Hospitals	7	-4	0	-1	1	-2	14/2/2026
Hospital: New confirmed admits (last 7 days)	207	14.4%	54	-6.9%	214	10.3%	17/2/2026
Hospital: Daily confirmed patients (avg)	361	4.8%	66	-18.6%	207	7.7%	17/2/2026
**Hospital ICU :New confirmed admits (last 7 days)	34	36.0%	7	40.0%	21	16.7%	17/2/2026
**Hospital ICU: Daily confirmed patients (avg)	20	34.6%	16	-17.3%	15	2.0%	17/2/2026

*Viral: COVID and flu cases refer to individuals with a positive PCR/NAAT test result in OLIS provided that the result is not within 90 days of another positive result. RSV positive tests refers to absolute number of positive tests in OLIS in latest week.

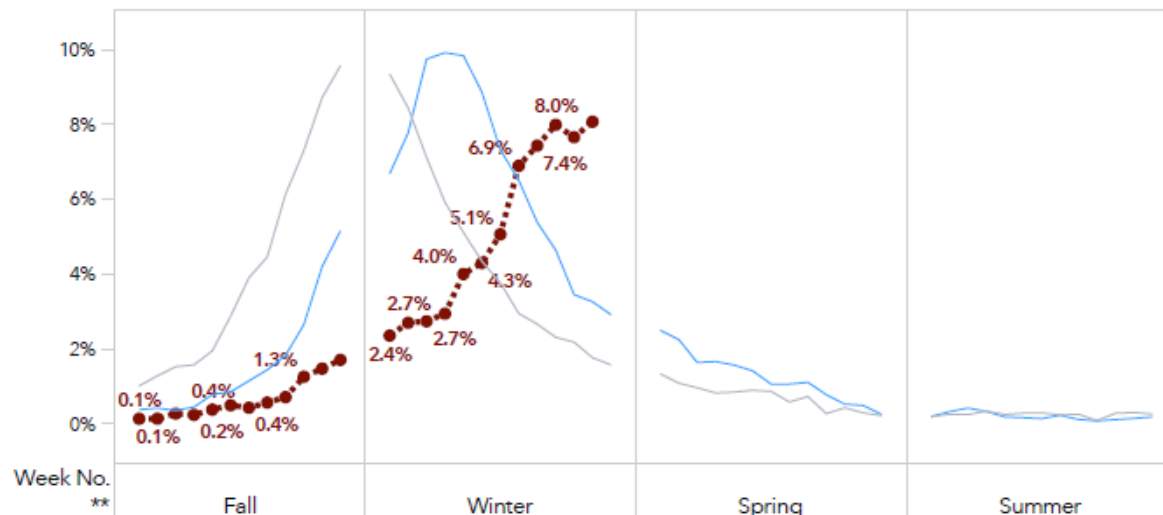
Respiratory Percent Positivity: 2025/26

●●●●● 2025/26 — 2024/25 — 2023/24

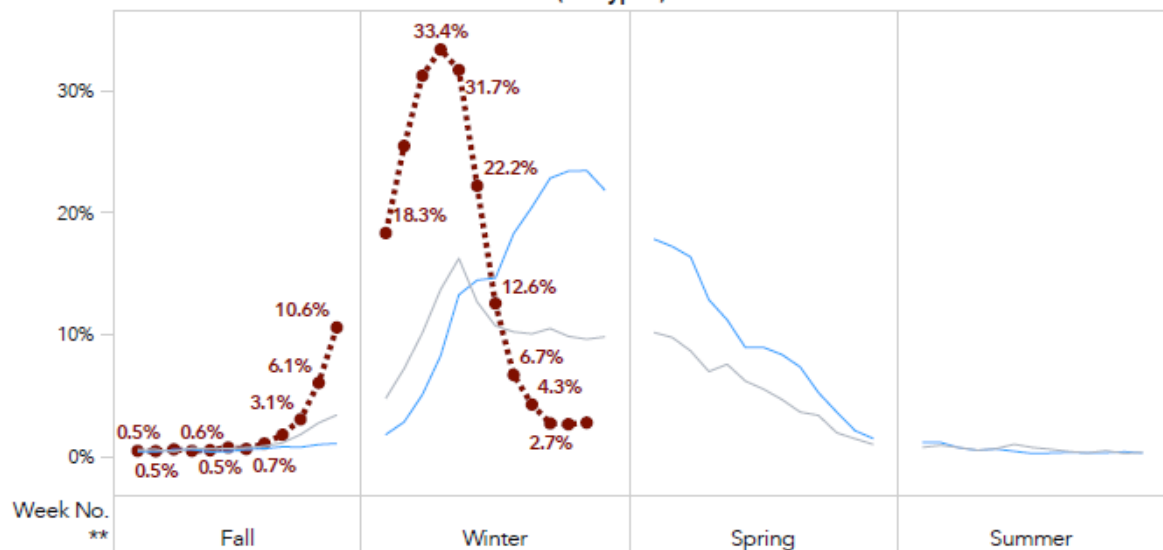
COVID-19



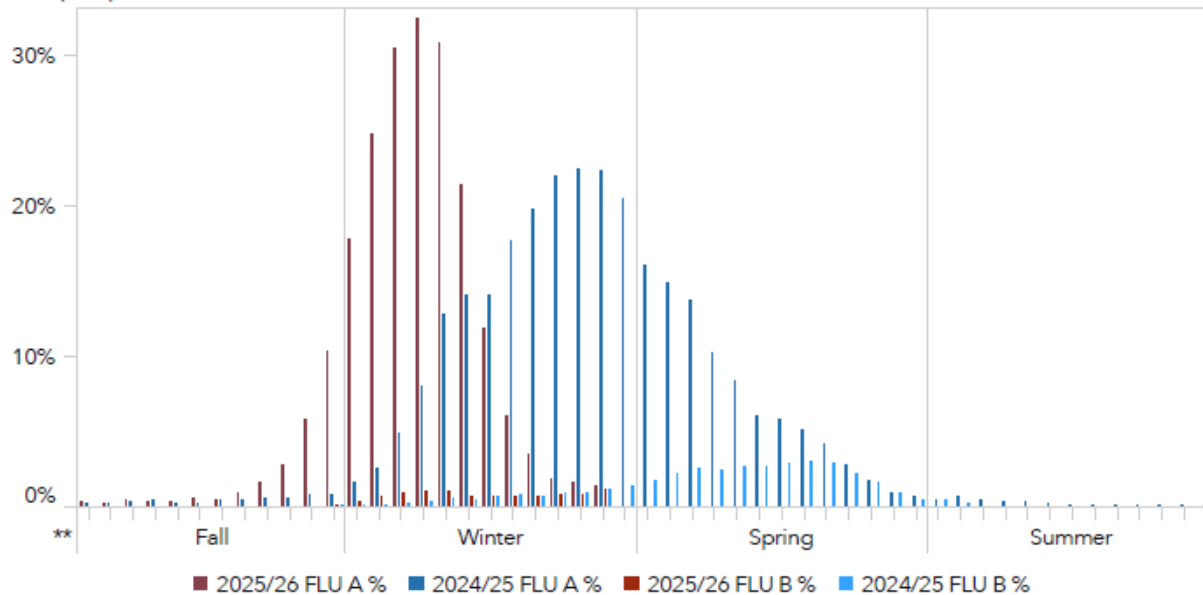
RSV



FLU (All types)



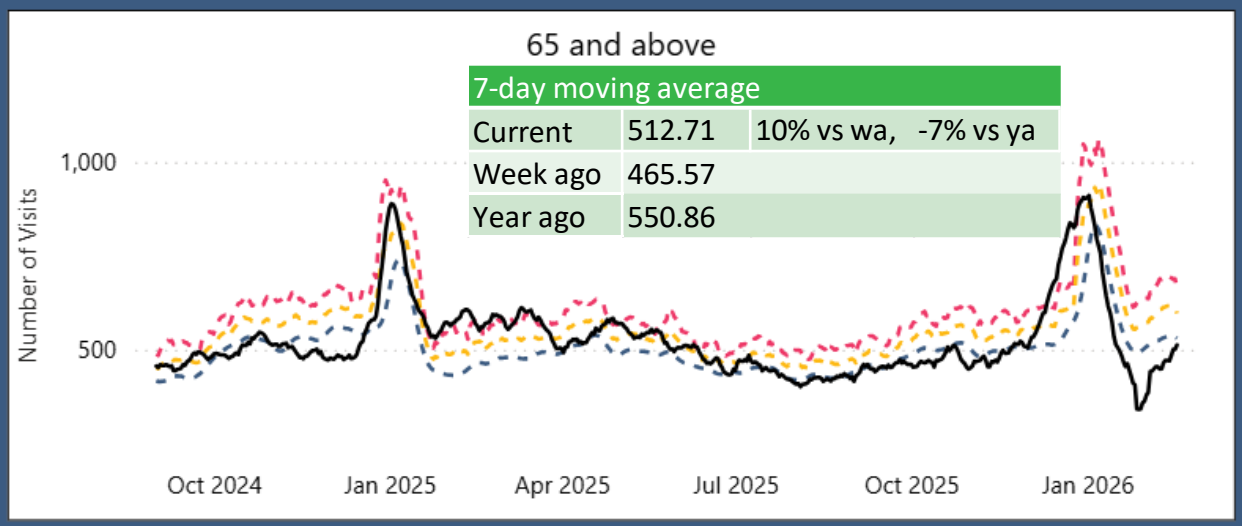
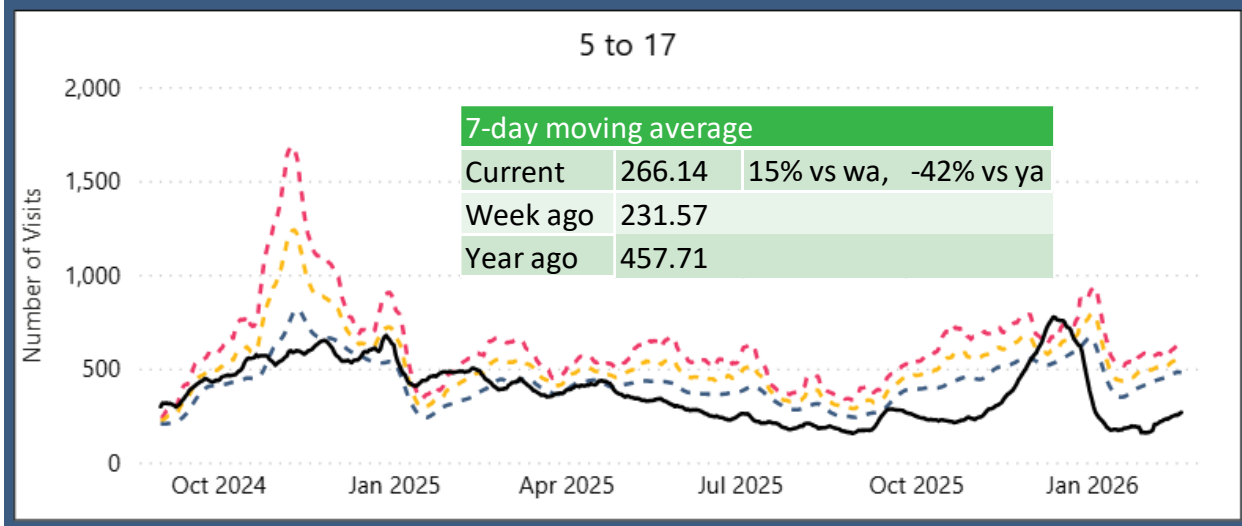
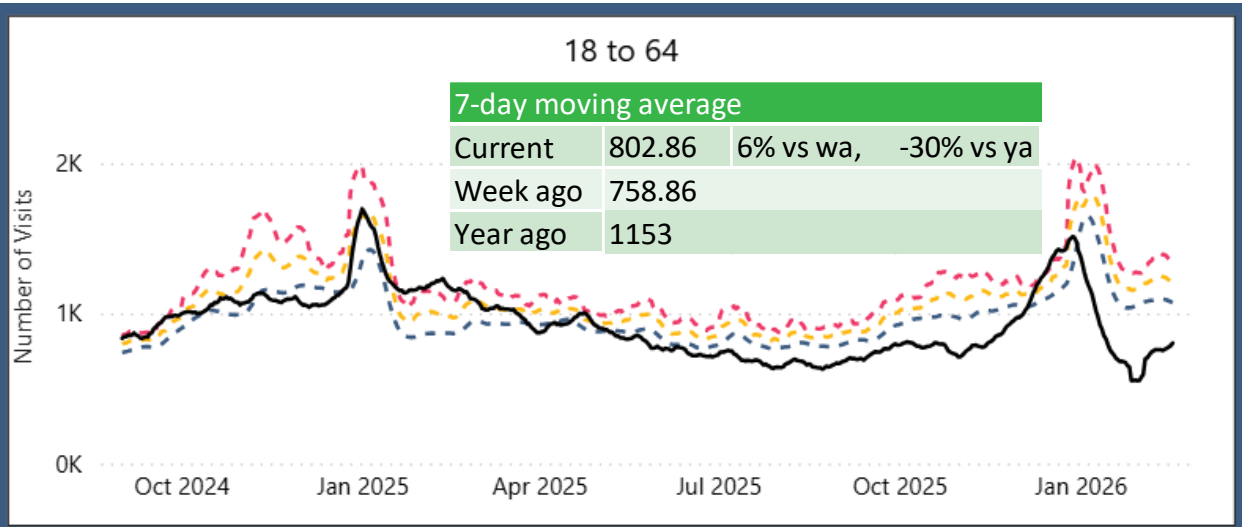
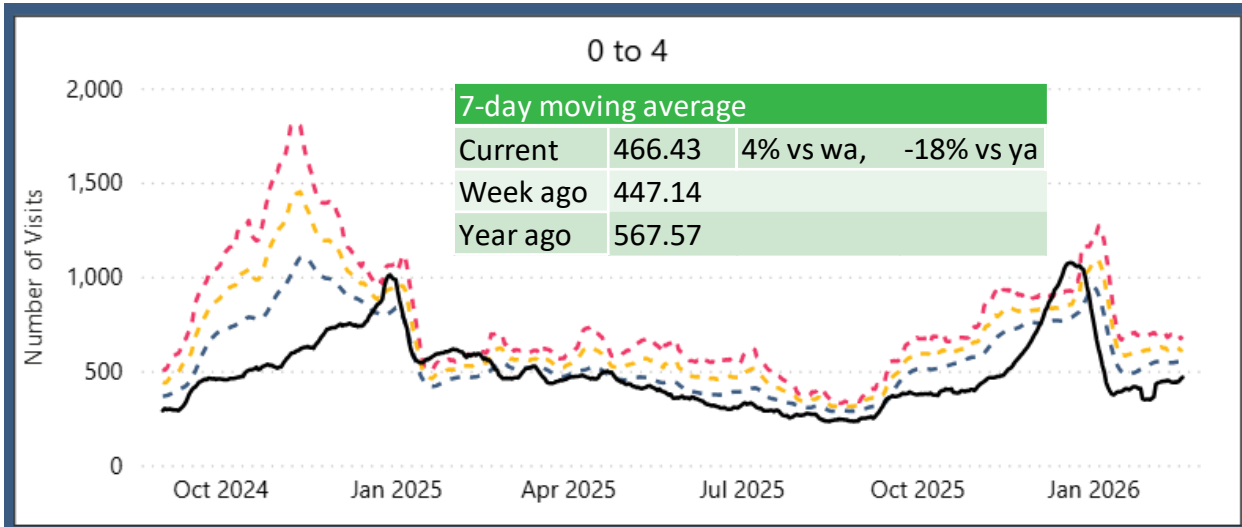
FLU (A/B)



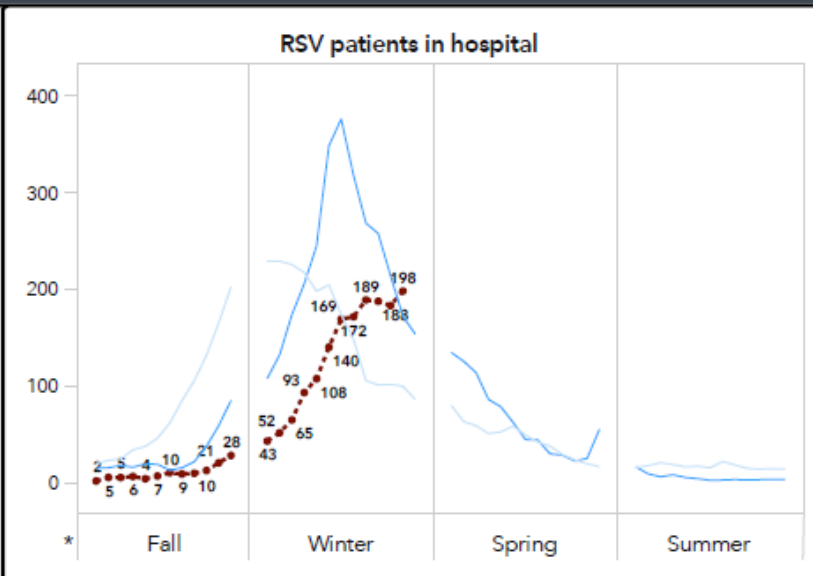
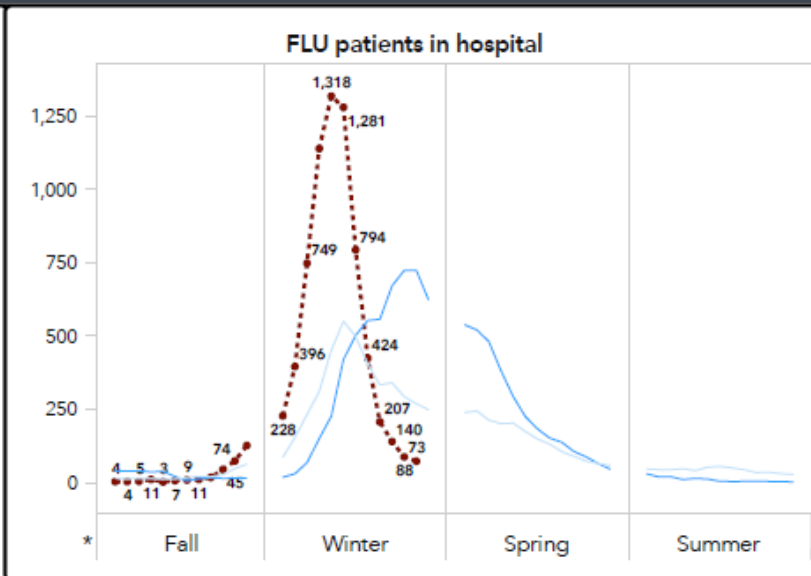
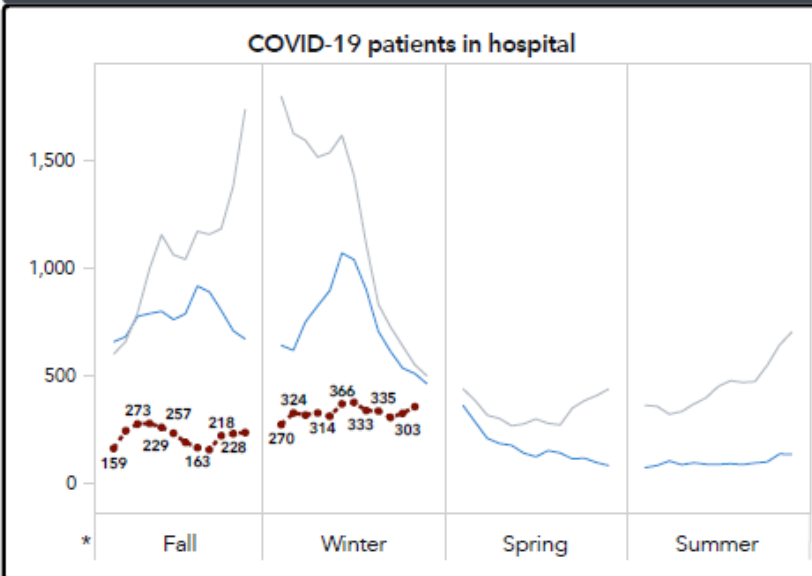
Note: Numbers on the graphs are up to the latest complete week of data (up to Saturday) for seasonal comparisons. As such, they may be slightly different than the numbers presented on summary table, which are the most recent data available.

Health System Impacts Indicators: ACES ED respiratory-related presentations volume data (to February 18)

■ 7-Day Moving Average
 ■ Historical 7-Day Moving Average
 ■ Historical 7-Day Moving Average + 1 Standard Dev
 ■ Historical 7-Day Moving Average + 2 Standard Dev

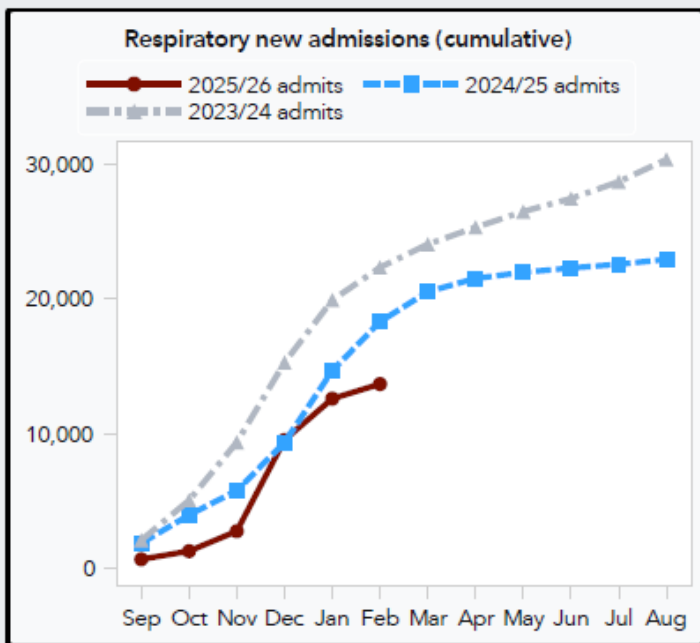


Hospital Monitoring: Hospital cases and New Admissions by Virus, 2025/26



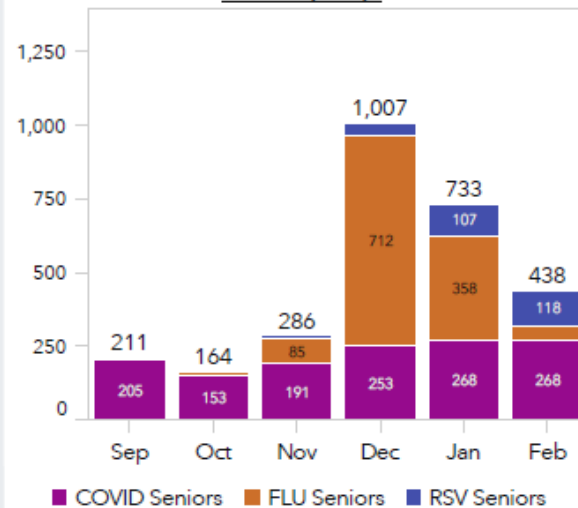
Note: Numbers on the graphs above are up to the latest complete week of data (up to Saturday) for seasonal comparisons. As such, they may be slightly different than the numbers presented on summary table, which are the most recent data available.

Respiratory season
 - - - 2025/26 - - - 2024/25 - - - 2023/24

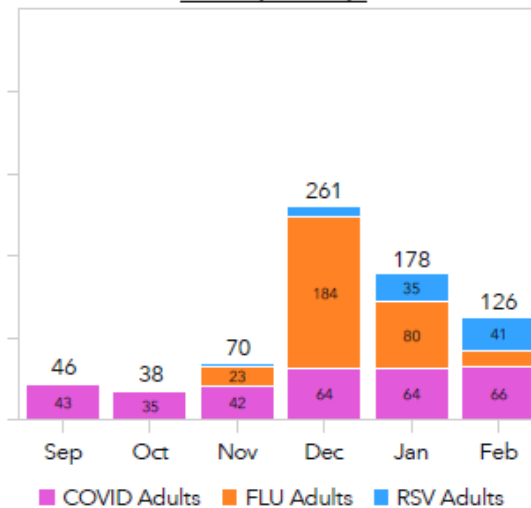


This season average daily patients in hospital by age group and respiratory virus

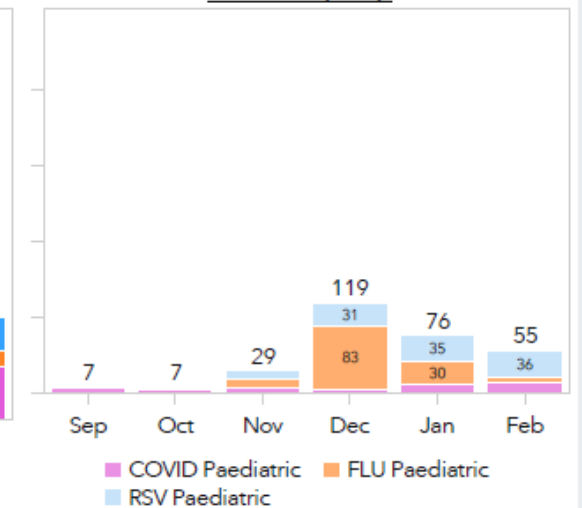
Seniors (65+)



Adults (18to64)



Paediatric (<18)



Immunization Coverage

Influenza Vaccination Coverage: 2025/26

As of December 31:

- 851,695 doses administered through physicians
- 2,019,699 administered through pharmacy
- Bump in uptake through December of this year
- Overall nearly 200,000 doses more administered compared to last season!

COVID-19 Vaccination Coverage: 2025/26

Population Coverage

1,513,870 (+2,142)
People w/ Fall 2025 dose

10.2% (+0.0%)
% of population: **All ages**

33.5% (+0.0%)
% of population: **65+**

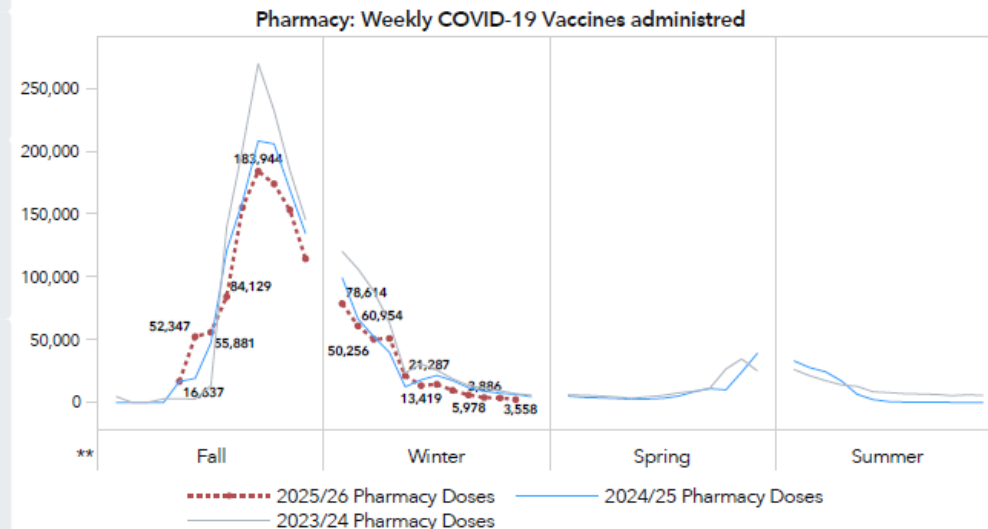
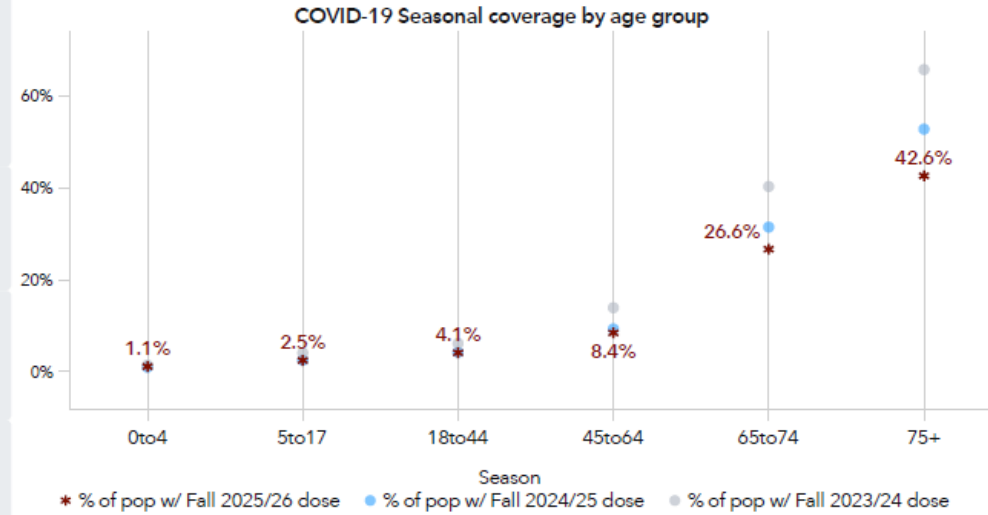
5.9% (+0.0%)
% of population: **18to64**

2.1% (+0.0%)
% of population: **<18**

Dose Administration

Total Doses: This Week
3,012

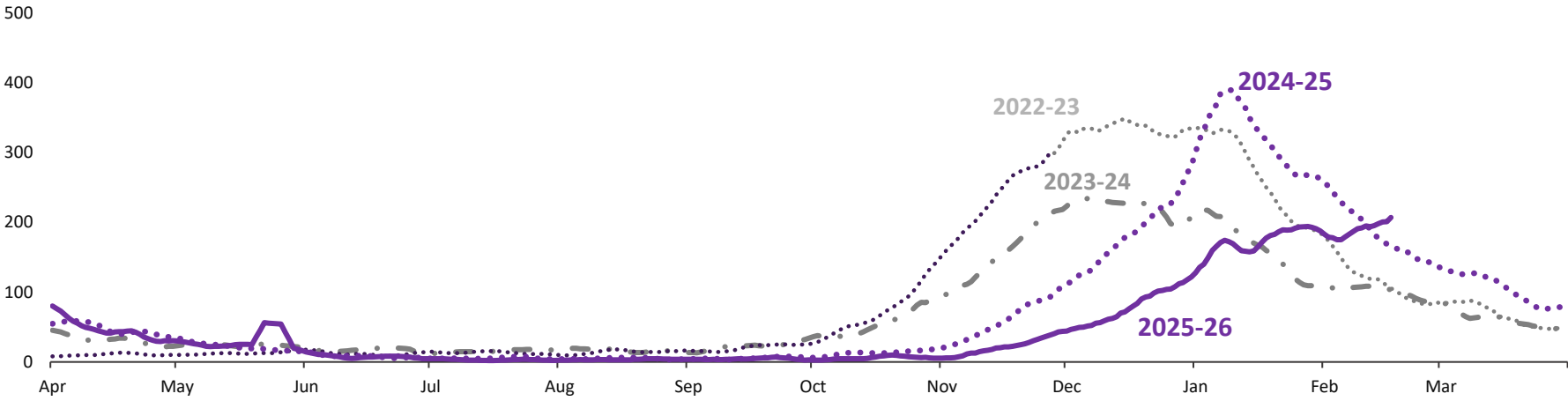
Total Doses: Last Week
4,545



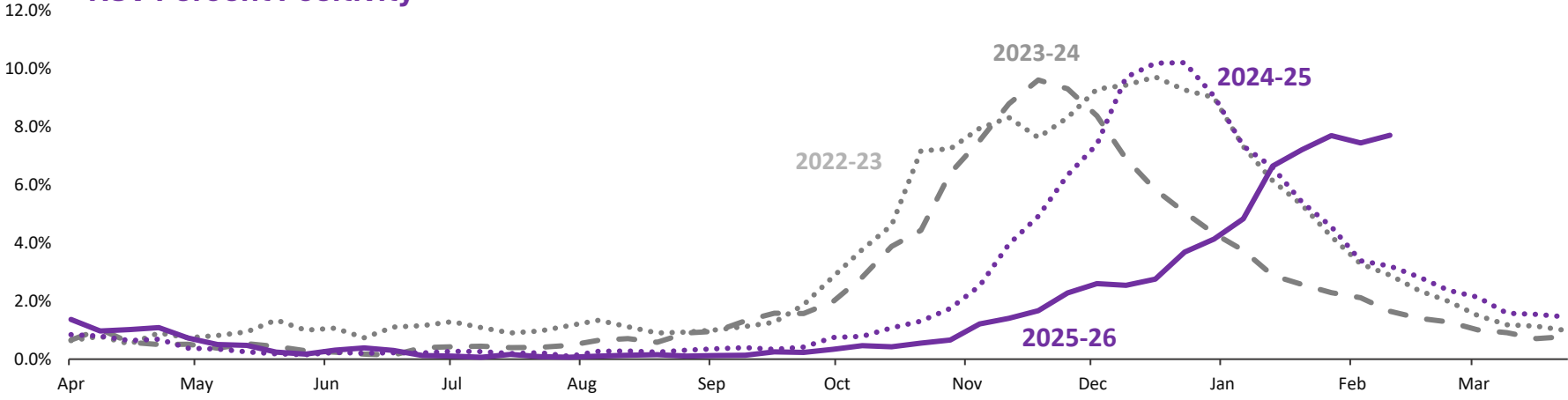
RSV 2025-26 Season At a Glance

Starting later than last three seasons, potentially due to severe and early flu season

RSV Hospital Patients



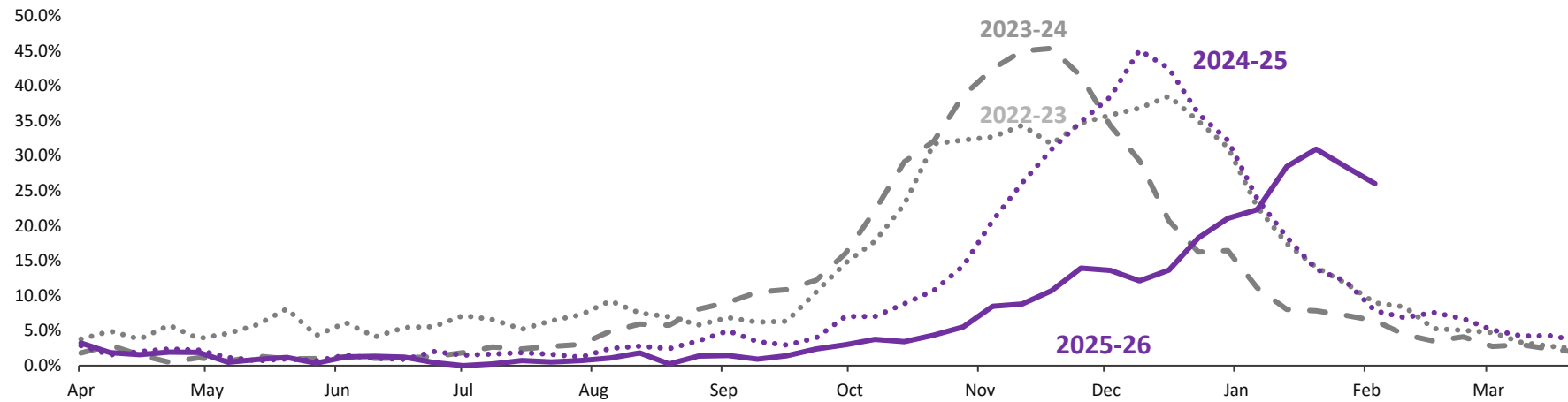
RSV Percent Positivity



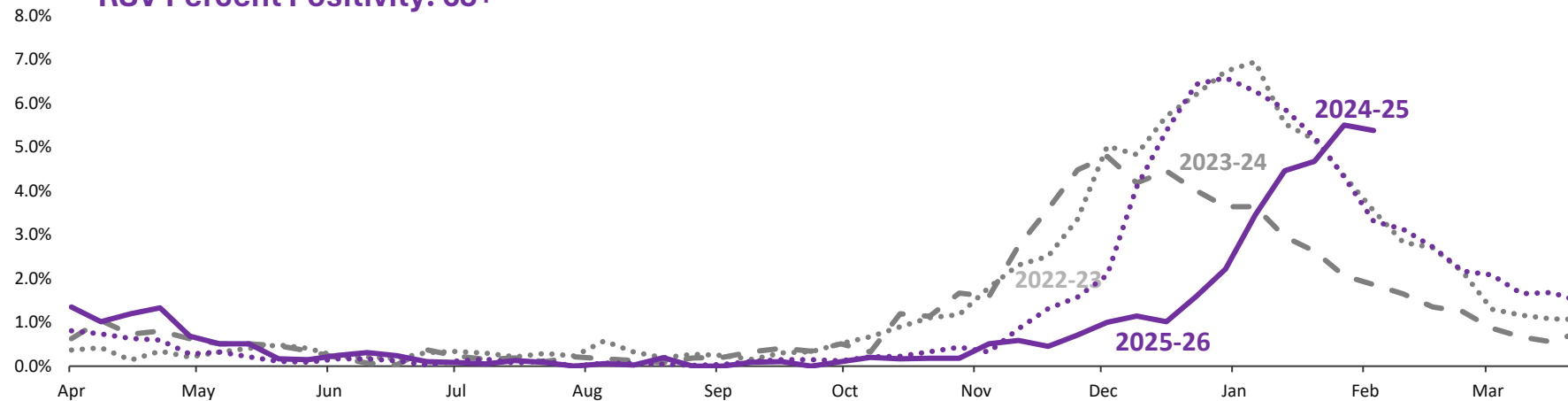
Data: I9 hospital census data as of February 17, Ontario Lab Information System data as of February 14

Percent Positivity Comparison by Age: Pediatric positivity expected to peak near end of January in 2026, with seniors following typical pattern of increasing after pediatric.

RSV Percent Positivity: 0-4

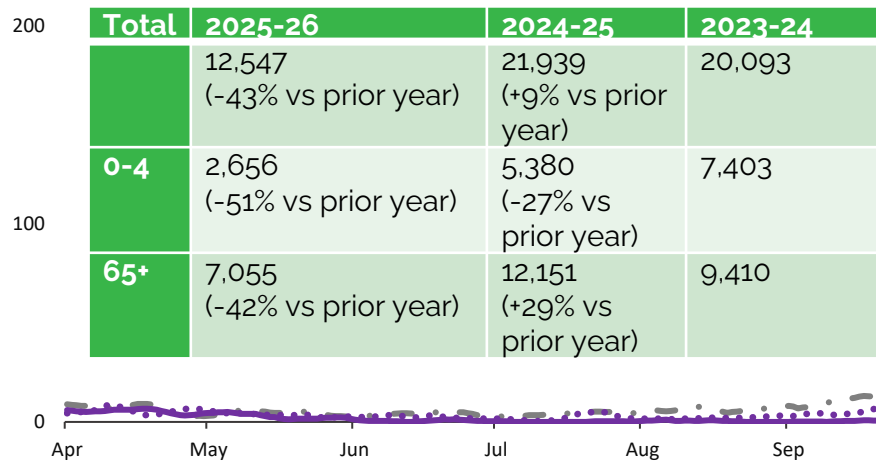


RSV Percent Positivity: 65+



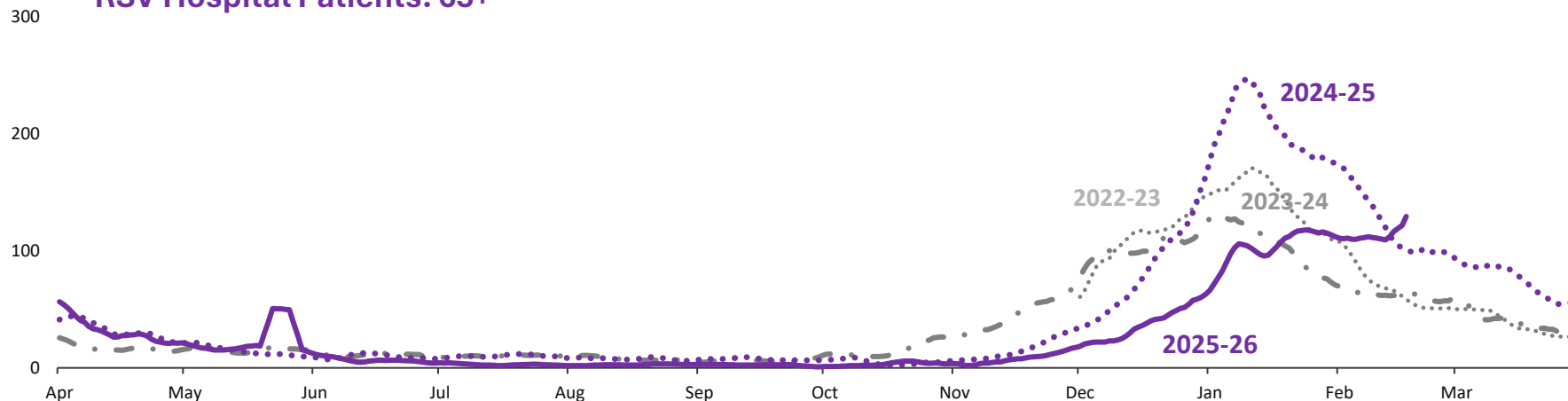
Hospitalization Comparison by Age: Kids (0-4) and Seniors (≥65) make up over 80% RSV hospital census. Lower hospitalization in current season partly due to lower community spread and likely successful vaccination efforts.

RSV Hospital Patients: 0-4



Peak	0-4	65+
2022-23	201 (Dec 1)	182 (Jan 9)
2023-24	124 (Nov 23)	144 (Jan 1)
2024-25	89 (Dec 10)	279 (Jan 7)
2025-26	42 (Jan 16)	157 (Feb 17)

RSV Hospital Patients: 65+



KI UPDATES ON HYPERTENSION GUIDELINES 2025

Vincent Ki MD, ASH-Clinical Hypertension Specialist, FRCPC

Nephrology and Hypertension

Trillium Health Partners, Mississauga, Ontario

February 20, 2026

BACKGROUND

- Hypertension highly prevalent among general Canadian population but even more so when coexisting cardiovascular risk conditions e.g. Diabetes, Obesity, etc.
- Rates of control have been declining in Canada; interestingly, better controlled among patients with coexisting risk conditions
- Awareness and Control remain below optimal among all Canadians leaving excess cardiovascular risk

SPECULATED RATIONALE FOR DECLINING CONTROL

- Discrepancies in OPTIMAL BP targets
- Overly complex guideline recommendations
- Inadequate implementation strategies
- Suboptimal engagement with front-line health care practitioners

UPDATES IN GLOBAL GUIDELINES

2024 ESC Guidelines for the Management of Elevated Blood Pressure and Hypertension

30 Aug, 2024

**2025
HYPERTENSION
CANADA
GUIDELINES**



ESSENTIAL UPDATES

**2025 AHA/ACC
High Blood
Pressure Guideline**

OVERARCHING GOALS OF UPDATED GUIDELINES

- Standardization of diagnostic techniques
- Simplification of diagnostic criteria and therapeutic targets and options
- Emphasis on aggressive diagnosis and treatment beginning at primary care level
- Emphasis on aggressive lifestyle modification

W TAKE-AWAY MESSAGES

1) NO MORE MANUAL BP – USE VALIDATED AUTOMATED BP DEVICE



2) MAKE SURE YOUR PATIENTS GET VALIDATED AUTOMATED BP DEVICES FOR HOME



BIOS Diagnostics
Hypertension CANADA

BLOOD PRESSURE MONITOR | Insight Bluetooth

Pre-installed 7-Day Measurement Software

- BIOS Averaging
- Detects Irregular Heartbeat
- Stores 90 Measurements x 2 Users
- Free Medilink App

7-D PROTOCOL®

12:15 12/28 120 SYS mmHg 81 PUL /min 80 DIA mmHg

MEM [Power] SET

biosmedical.com



OMRON HEM-RML31

22-42cm (9-17inch) 1-2cm (1/2inch)

OMRON HEALTHCARE 53, KUNIKI-SUENAGA

7:20 AM 7:30 AM LATEST

123 78 73 SYS mmHg DIA mmHg PULSE /min

118 78 70

START STOP

Normal Per AHA guidelines

Systolic 118 mmHg Diastolic 78 mmHg Pulse 70 Beats/Min

Manual Reading My Diary

<https://hypertension.ca/public/recommended-devices>

3) HYPERTENSION DEFINED BY BP \geq 130 / 80 mmHg

- Data emerging demonstrating higher cardiovascular risk beginning at lower BP levels
- Higher value on early detection and management
 - N.B. Once diagnosed, recommendation to assess cardiovascular disease risk and screen for end-organ damage

4) CONFIRM HYPERTENSION WITH OUT-OF-HOSPITAL ABPM OR HBPM

5) STARTING PHARMACOTHERAPY ABOVE BP 140/90

- Start medical treatment if 1 of following:

- **BP \geq 140 / 90**

OR

- **sBP 130-139 with high cardiovascular risk**

- High Cardiovascular Risk Conditions

- Established CV disease (coronary artery disease, heart failure, stroke, peripheral artery disease)
- Diabetes mellitus
- CKD (eGFR $<$ 60 or UACR \geq 3.0)
- 10-year Framingham Risk Score \geq 20%
- Age \geq 75 years

6) TARGET FOR TREATMENT IS SYSTOLIC BP < 130

- Based largely on SPRINT Trial data
- Lower target not adopted
 - Study-level BP usually 5-10 mmHg lower than usual BP measures
 - Most study participants did not achieve tight BP target
 - Patient and physician groups supported recommendations
 - Potential harms (hypotension, syncope, injurious falls, electrolyte abnormalities, AKI/ARF)

7) START TREATMENT WITH LOW DOSE COMBINATION THERAPY

- ***ACEI / ARB***
- ***Thiazide / thiazide-like diuretics***
- ***Dihydropyridine calcium channel blockers***
- Upfront combination therapy as a single pill combination
 - Better BP lowering ability
 - Better control rates
 - Better adherence
 - Less therapeutic inertia
 - Cost efficient

8) ADD-ON AGENT OF CHOICE IS *SPIRONOLACTONE*

- After ACEI/ARB, Diuretic, and Calcium channel blockers

9) THE DEFINITION OF RESISTANT HYPERTENSION IS BP NOT AT TARGET WHEN ON 3 OR MORE AGENTS INCLUDING A DIURETIC

• PSEUDORESISTANCE

- Non-compliance / medication non-tolerance
- White coat hypertension
- Secondary hypertension
- BP-raising interferent medication/substance

• INTERFERENTS

- NSAIDs
- Decongestants
- Licorice
- Oral contraceptives
- Stimulants (e.g. methamphetamines)
- Cocaine
- Calcineurin inhibitors (Transplant)
- Caffeine
- Midodrine***

10) HYPERALDOSTERONISM IS MOST COMMON SECONDARY HYPERTENSION – IF THINKING THIS YOU SHOULD BE REFERRING FOR OPINION

- RISK FACTORS
 - Young onset
 - True resistant hypertension
 - Sudden worsening of previously stable hypertensive
- CAN CONSIDER CHECKING ALDOSTERONE-RENIN RATIO – ESPECIALLY BEFORE STARTING SPIRONOLACTONE
- REFER TO LOCAL EXPERT HYPERTENSION

CONCLUSIONS

- Hypertension highly prevalent but diagnosis and control rates declining
- Hypertension Canada put out new Primary Care guidelines 2025
- Main changes
 - Earlier diagnosis at $>130/80$
 - Start treatment earlier $>140/90$
 - Target lower sBP <130 (no diastolic target)
 - Start with 2-drug combination therapy
 - SPIRONOLACTONE recommended as add-on agent of choice once classic medications employed

Interested in joining the CTWWW planning committee?

We are seeking a new member who **practices outside of the GTA** for our Community of Practice Scientific Planning Committee*.

The OCFP strongly encourage applications from individuals who bring diverse perspectives, backgrounds, and experiences that reflect the communities served by family physicians across Ontario.

**SPC Members are remunerated.*

Scan the QR code



The Children's Mental Health Workshop Series

Foundations of Children's Mental Health

March 9, 2026 | 1:00PM - 4:00PM | Virtual Workshop | Claim up to 3 credits!



- Explore how to take a comprehensive psychosocial history specific to school-aged children and adolescents
- Identify common childhood presentations, including adjustment disorder, anxiety & depression, and review essential concepts related to ADHD
- Review early identification through use of evidence-based screening tools
- And More

Price: \$250 +HST

[Register now](#)



Scan QR Code

Supports for Mental Health, Addictions and Chronic Pain

Find information to support the care you give patients – in a way that also considers your wellbeing.

Community of Practice



Prescribing for Insomnia: When and How to Use Medications Safely
(Feb 25)

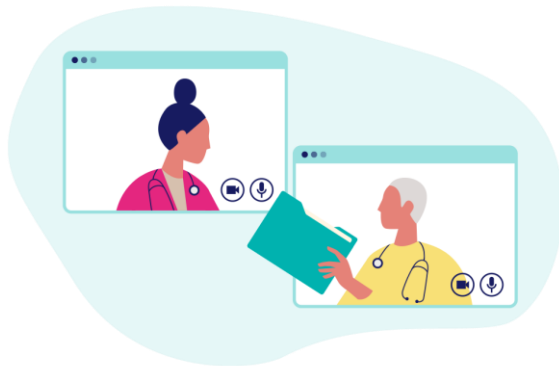
Navigating WSIB for Family Physicians: Improving Patient Access and Your Practice (Mar 25)

Peer Connect Mentorship

Receive tailored support to skillfully respond to challenges in your practice and earn Mainpro+ credits.

Topics Explored by Peer Learners:

- Managing ADHD in primary care
- Strategies to address work-life balance
- Supporting patients living with chronic pain and addiction challenges



[Sign up to become a Peer Learner](#)

Join a series of small group learning sessions!

Engage in **open discussions** where you're invited to **share the difficulties you're facing in your practice, in areas related to mental health, substance use disorders, chronic pain and your own wellness.** Groups are held between April 1, 2026 and March 26, 2027.

- Family physicians at all stages of their career
- Transitioning to retirement
- Psychiatry in primary care
- Transitioning to GP psychotherapy
- Support for family physicians with lived experience of a chronic illness/disability
- Boundaries/work-life balance



The deadline to register is March 9, 2026

Learn More and Register

Ontario College of
Family Physicians  AWARDS 2026

NOMINATE AN OUTSTANDING FAMILY PHYSICIAN, RESIDENT OR MEDICAL STUDENT!

Deadline: March 15th, 2026

Visit OntarioFamilyPhysicians.ca



Care

When You Need It

No patient should be waiting without answers.

Together, we can build a system that gets patients the care they need, when they need it.

[Send a Letter to Your MPP](#)

[Spread the Word](#)



RECENT SESSIONS

October 31	Infectious Disease & New Aneurysm Screening Program	Dr. Daniel Warshafsky Dr. Varun Kapila
November 21	Infectious Disease & Migraine Updates	Dr. Zain Chagla Dr. Danny Adel Monsour
December 5	Infectious Disease & Current Public Health Issues	Dr. Daniel Warshafsky Dr. Kieran Moore
January 16	Infectious Disease & e-Referral Development	Dr. Alon Vaisman Dr. Stephen Pomedli
February 6	Infectious Disease & Best Practices for MSK Imaging	Dr. Allison McGeer Dr. Daniel Warshafsky

Past Webinars, Slides, Self-Learning & More Resources:
<https://dfcm.utoronto.ca/past-changing-way-we-work-community-practice-sessions>

UPCOMING SESSIONS

Month	Date
March 2026	March 6
March 2026	March 27
April 2026	April 17

SAVE THE DATE

Registration links will be emailed to you closer to the date



Questions?

Webinar recording and curated Q&A will be posted soon.

Session slides will be available by the end of the day:

<https://dfcm.utoronto.ca/past-changing-way-we-work-community-practice-sessions>

Our next Community of Practice: March 6, 2026

Contact us: ocfpcme@ocfp.on.ca

The Changing the Way we Work Community of Practice for Ontario Family Physicians has been certified by the College of Family Physicians of Canada and the Ontario Chapter for up to 32 Mainpro+ Certified Activity credits.

Post session survey will be emailed to you. Mainpro+ credits will be entered for you with the information you provided during registration.