COVID-19 Community of Practice for Ontario Family Physicians

Sep 6, 2024

Dr. Darrell Tan Dr. Daniel Warshafsky Dr. Chase McMurren



Preparing for Fall & Practice Management





Preparing for Fall & Practice Management

Moderator:

 Dr. Eleanor Colledge, CPD Program Director, University of Toronto and Family Physician, South East Toronto Family Health Team, Toronto, ON

Panelists:

- Dr. Darrell Tan, Toronto, ON
- Dr. Daniel Warshafsky, Toronto, ON
- Dr. Chase McMurren, Toronto, ON

Host:

• Dr. Mekalai Kumanan, Cambridge, ON

The COVID-19 Community of Practice for Ontario Family Physicians is a one-credit-per-hour Group Learning program that has been certified for up to a total of 32 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.

Canadian Medical Association to apologize for Indigenous harm

VICTORIA - The Canadian Medical Association says it will formally apologize for the role doctors played in harming members of Canada's Indigenous communities.

Sept. 5, 2024 💿 1 min read 🔲 🖆 📁



Changing the way we work

A community of practice for family physicians during COVID-19

At the conclusion of this <u>series</u> participants will be able to:

- Identify the current best practices for delivery of primary care within the context of COVID-19 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. Mekalai Kumanan (OCFP), Dr. Ali Damji (DFCM), Dr. Eleanor Colledge (DFCM), Dr. Harry O'Halloran, Julia Galbraith (OCFP), Pavethra Yogeswaran (OCFP), Marisa Schwartz (DFCM)

Previous webinars & related resources:

https://www.dfcm.utoronto.ca/covid-19-community-practice/past-sessions



Dr. Darrell Tan – Panelist

Infectious Diseases Physician & Clinician-Scientist, St. Michael's Hospital



Dr. Daniel Warshafsky – Panelist

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



Dr. Chase McMurren – Panelist

Assistant Professor, Department of Family & Community Medicine at the University of Toronto

Speaker Disclosure

- Faculty Name: **Dr. Darrell Tan**
- Relationships with financial sponsors:
 - Grants/Research Support: Gilead, Glaxo Smith Kline
 - Speakers Bureau/Honoraria: Ontario College of Family Physicians
 - Others: N/A
- 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. Chase McMurren
- Relationships with financial sponsors:
 - Grants/Research Support: N/A
 - Speakers Bureau/Honoraria: University of Toronto, College of Physicians and Surgeons of Ontario, Ontario Medical Association, Medical Psychotherapy Association Canada, Ontario College of Family Physicians, Centre for Effective Practice, Indigenous Physicians Association of Canda, National Consortium for Indigenous Medical Education, University of Waterloo, Toronto Metropolitan University, College of Optometrists of Ontario, Bruyère Continuing Care
 - Others: N/A

Speaker Disclosure

- Faculty Name: **Dr. Mekalai Kumanan**
- Relationships with financial sponsors:
 - Grants/Research Support: N/A
 - Speakers Bureau/Honoraria: Ontario College of Family Physicians
 - Others: N/A
- 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

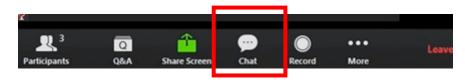
• All questions should be asked using the Q&A function at the bottom of your screen.



• 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.

🗢 Q&A			
	All questions (1)	My questions	
Lee 01:54 PM			
Will there be a fol	low-up session?		
ıЪ			Comment

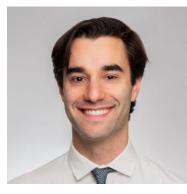
• Please use the chat box for networking purposes only.





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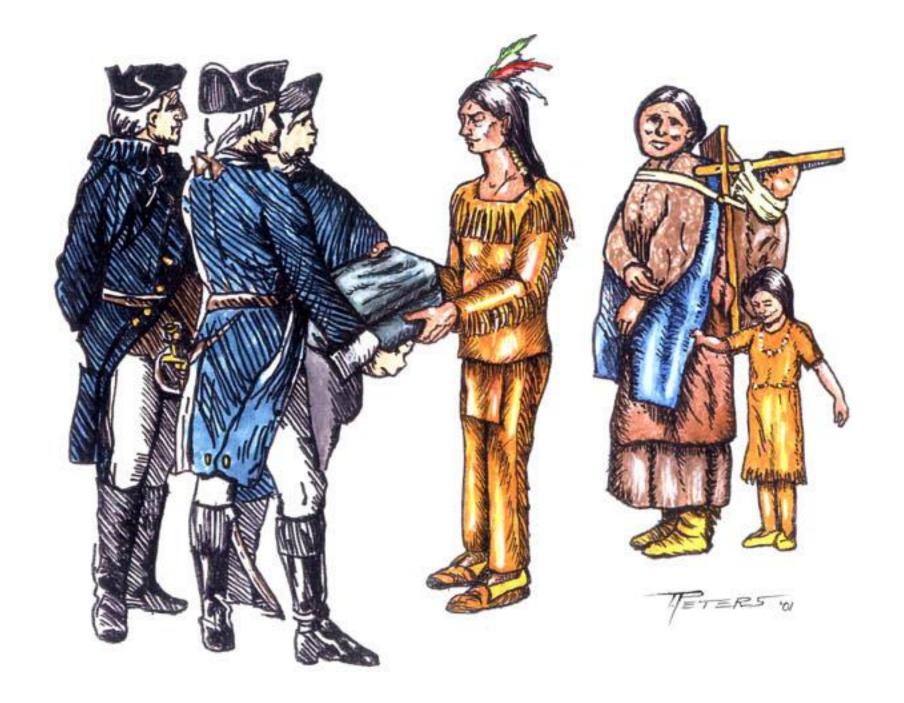
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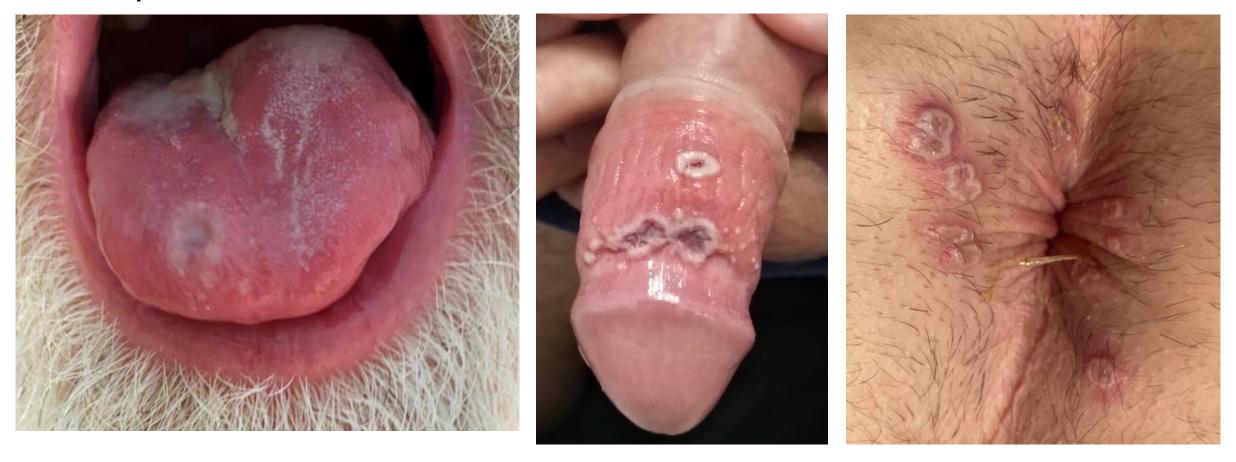
Mpox: What's the latest?

Darrell H. S. Tan, MD FRCPC PhD

06SEP2024



Mpox lesions at the site of inoculation



Variation in skin lesion morphology



Subtle mpox lesions in the setting of prior vaccination

• Early pustule on the chest



• Small papules on the hip



Asymptomatic transmission of human mpox Margarida Mouro ⁽ⁱ⁾,¹ Vitor Duque ⁽ⁱ⁾,²

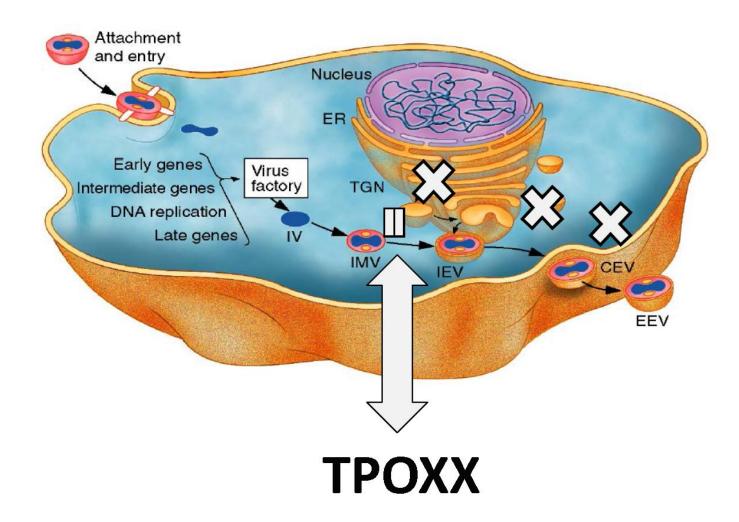


Annals of Internal Medicine

Observation: Brief Research Report

Detection of Monkeypox Virus in Anorectal Swabs From Asymptomatic Men Who Have Sex With Men in a Sexually Transmitted Infection Screening Program in Paris, France

Tecovirimat (TPOXX[™])



To access via SAP contact: vaccinesupplyandlogistics@ontario.ca





PLATINUM-CAN

Placebo-controlled randomized trial of tecovirimat in non-hospitalized monkeypox patients CTN 338

NOW ENROLLING AT TGH AND SMH

https://www.hivnet.ubc.ca/study/ctn-338-platinum-can/

Or just Google "mpox CTN"



Agence de la santé publique du Canada







the CTN CIHR Canadian HIV Trials Network

MVA-BN Vaccine effectiveness



Study name	Study design	n, cases ¹	n, controls ¹	VE and 95% CI	
1 dose studies					
Brousseau, et al. (Canada)	Case-control	231	301	65% (1 to 87)	╞───┼┲──│
Navarro, et al. (Canada)	Cohort study	3204	3204	59% (31 to 76)	│ ─┼┳── │
Bertran, et al. (UK)	Case-coverage	362	N/A	78% (54 to 89)	
Fontan-Vela, et al. (Spain)	Cohort study	5660	5660	79% (33 to 100)	▏─┼─∎─┤
Sagy, et al. (Israel)	Cohort study	1037	1017	86% (59 to 95)	│ │──■│
Deputy, et al. (USA)	Case-control	2193	8319	36% (22 to 48)	
Dalton, et al. (USA)	Case-control	309	608	75% (61 to 84)	
Rosenberg, et al. (USA)	Case-control	252	255	68% (25 to 87)	▏─┼┲─│
Ramchandani, et al (USA)	Cohort study	685	2393	81% (64 to 90)	
2 dose studies					
Deputy, et al. (USA)	Case-control	2193	8319	66% (47 to 78)	▏ ┼╼╾ │
Dalton, et al. (USA)	Case-control	309	608	86% (74 to 92)	-=
Rosenberg, et al. (USA)	Case-control	252	255	89% (44 to 98)	│ <u>┤ </u>
Ramchandani, et al (USA)	Cohort study	1152	2393	83% (28 to 96)	

NACI Guidance – May 2024

- PEP: ideally given within 4d, not beyond 14d
- PrEP: 2 doses at least 28d apart
 - Men who have sex with men (MSM*) who meet one or more of the following criteria:
 - have more than one partner
 - b) are in a relationship where at least one of the partners has other sexual partners
 - c) have had a confirmed sexually transmitted infection acquired in the last year
 - have engaged in sexual contact in sex-on-premises venues.
 - Sexual partners of individuals who meet the criteria above.
 - 3. Sex workers (regardless of gender, sex assigned at birth, or sexual orientation).
 - Staff or volunteers in sex-on-premises venues where workers may have contact with fomites potentially contaminated with mpox.
 - Those who engage in sex tourism (regardless of gender, sex assigned at birth, or sexual orientation).
 - 6. Individuals who anticipate experiencing any of the above scenarios.

An Advisory Committee Statement (ACS) National Advisory Committee on Immunization (NACI)

Interim guidance on the use of Imvamune[®] in the context of a routine immunization program



Canada

Public Health Agence de la santé Agency of Canada publique du Canada

NACI Guidance – May 2024

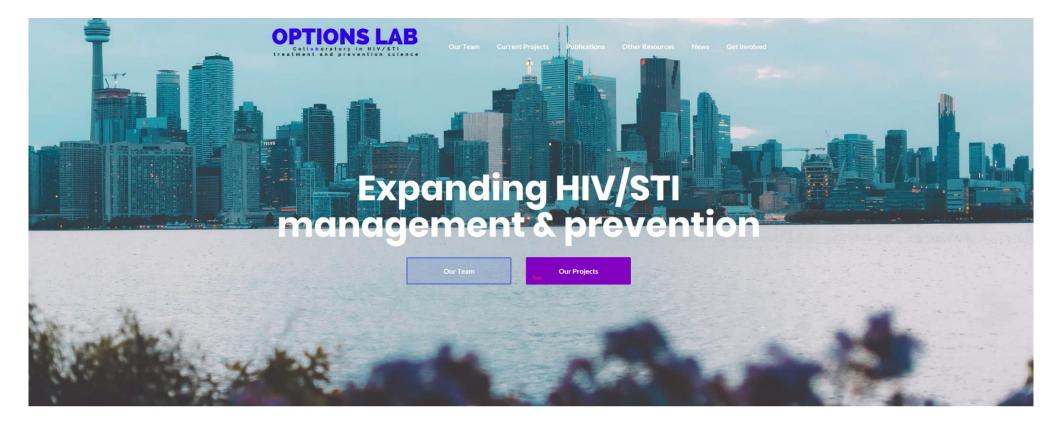
- No need to give 3rd doses
- No need to consider prior history of smallpox vaccination
- No need to vaccinate healthcare workers
- No need to space out from other vaccines
- No travel-based indications for vaccine at this time (exc. Sex tourism)

Key points

- Recognition: This is what classic mpox looks like.... But:
 - Lesion appearance can be variable
 - Initial mucosal infection may present as pharyngeal or rectal symptoms
 - Mild or even asymptomatic infection is possible particularly if vaccinated
- Diagnosis: viral swab for mpox PCR
- Treatment: It is unclear whether antiviral therapy (tecovirimat) works
 - PLATINUM-CAN trial is enrolling in Toronto: google "mpox CTN"
 - To access via SAP contact: <u>vaccinesupplyandlogistics@ontario.ca</u>
- Prevention: Vaccine (2 doses, 28+d apart) is available via public health units
 - Eligibility based on sexual networks
 - Not recommended for healthcare workers, nor based on travel at this time



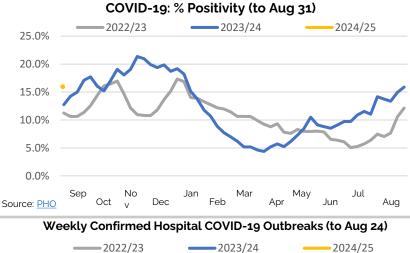
www.optionslab.ca

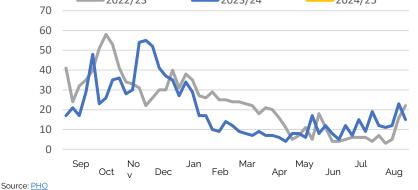


About

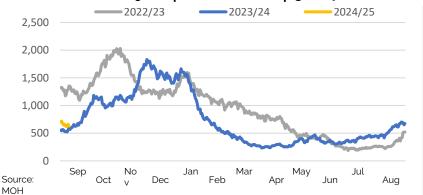
We are an interdisciplinary research team dedicated to bringing together community, academic, clinical, and policy partners to find and implement new and better options for HIV and STI treatment and prevention.

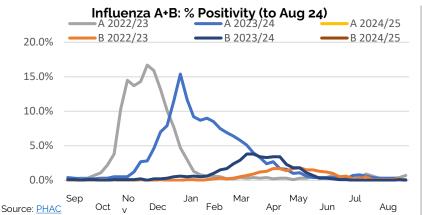
Key Respiratory Virus Metrics

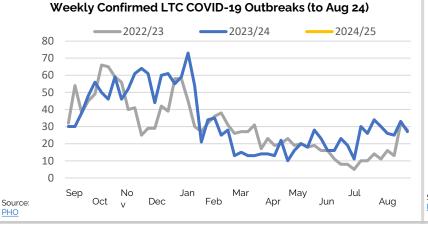


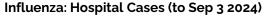


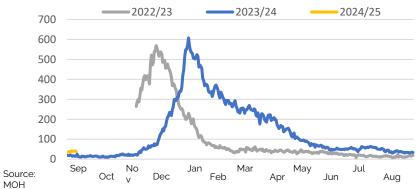


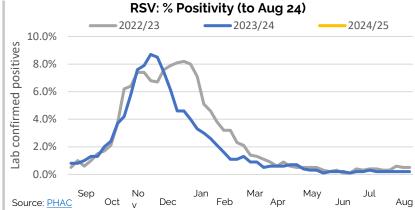








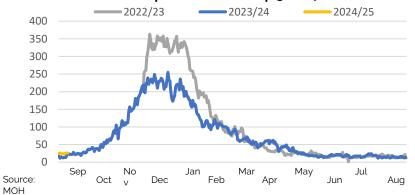




Weekly Confirmed Retirement Home COVID-19 Outbreaks (to Aug 24)



RSV: Hospital Cases (to Sep 3 2024)



COVID Immunization Program

- Per memo from August 28, 2024, provinces and territories were directed to withdraw all XBB vaccine doses from their jurisdiction in order
- Awaiting Health Canada authorization for KP.2 product
- Expected timelines to align with flu rollout



RSV Older Adult Prevention Program 2024-2025

The ministry of health will:

- Continue with the current eligibility criteria from FY 2023-2024 with the addition of all retirement homes. Those 60 years of age and older:
 - living in long-term care homes
 - living in Elder Care Lodges
 - residents of retirement homes
 - patients in hospital receiving alternate level of care (ALC)
 - patients receiving hemodialysis or peritoneal dialysis
 - recipients of solid organ or hematopoietic stem cell transplants
 - individuals experiencing homelessness
 - individuals who identify as First Nations, Inuit, or Métis



Infant RSV Prevention Program: 2024-25 Season

	Beyfortus™	Abrysvo™
Manufacturer	Sanofi	Pfizer
Product Type	Monoclonal Antibody	Stabilized subunit vaccine
Eligibility	Born in 2024 prior to the RSV season Born during the 2024/25 RSV season	Pregnant individuals from 32 to 36 weeks gestational age
	Infants up to 24 months of age and are at high risk from RSV disease (see Table 1)	Delivering during RSV season
Schedule	Single administration (1 or 2 doses depending on age/weight)	1 dose
Dosing Under 12 months of age • < 5kg: 50 mg in 0.5 mL • ≥ 5 kg: 100 mg in 1.0 mL		0.5 mL (120 mcg) Requires reconstitution
	 Over 12 months of age 200 mg (two - 1 mL injections of 100mg/mL) if child weighs <10 kg clinical discretion to administer single 100 mg dose 	
Route	Intramuscular	Intramuscular
Timing (tentative)	October through to end of March	September through to end of March

Administration Settings

Beyfortus (NACI Preferred Product)

- i. In-season births: Hospitals soon after birth before discharge
- ii. Out of season Infants and Births Outside Hospital: Primary Care, Public Health supportive role
- iii. Second RSV Season Infants (up to 2 y/o and at high risk): Pediatric Specialists, Primary Care, Outpatient Hospital Clinics

Abrysvo

- i. Primary Care
- ii. Obstetricians
- iii. Midwives



Changes to Ontario's Publicly Funded Pneumococcal Vaccine Program

Overview of the new vaccines for the age cohorts. Eligibility and dosing remain the same.

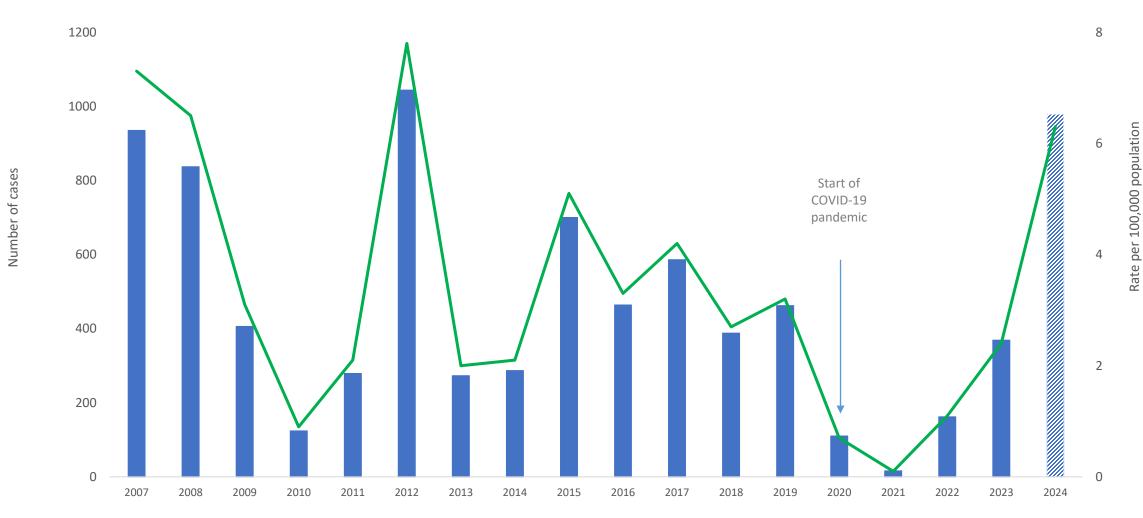
Eligible Age Cohort	Risk of Invasive Pneumococcal Disease (IPD)	Current Publicly Funded Vaccine	New Publicly Funded Vaccine
6 weeks to 4 years	Low risk	Pneu-C-13	Pneu-C-15
6 weeks to 4 years	High risk	Pneu-C-13	Pneu-C-20
2 to 49 years	High risk	Pneu-P-23	
50 years of age and older	High risk	Pneu-C-13 and Pneu-P-23	
65 years of age and older	Low risk High risk	Pneu-P-23	

https://ontariofamilyphysicians.ca/wp-content/uploads/2024/08/OCFP_PneumococcalVaccineProgram_August_2024.pdf

Pertussis

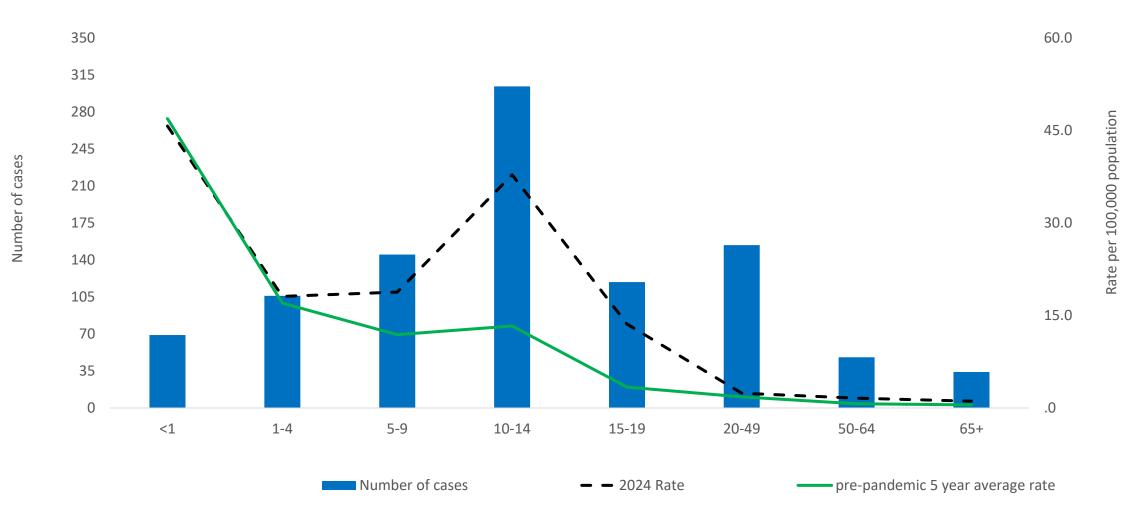
 Quebec is reporting more than 13,000 cases of pertussis since the beginning of 2024, including nearly 90 hospitalizations. Infants younger than 3 months old make up most of these cases.

Pertussis case counts and incidence rates: Ontario, 2007-2024*



^{*} January 1 to September 4, 2024

Pertussis incidence rates by age group: Ontario, January-September 2024*



*data up to September 4, 2024

Publicly Funded Immunization Schedules for Ontario – June 2022

Publicly funded vaccines may be provided only to eligible individuals and must be free of charge

Routine Schedule: Children Starting Immunization in Infancy

Age Vaccine	2 Months	4 Months	6 Months	$\frac{1}{Year}\Phi$	15 Months	18 Months	4 Years	Grade 7	14 Years	24 Years	≥34 Years [¶]	65 Years
DTaP-IPV-Hib Diphtheria, Tetanus, Pertussis, Polio, <i>Haemophilus influenzae</i> type b	•	•	•			•						
Tdap-IPV Tetanus, diphtheria, pertussis, Polio							•					
Tdap Tetanus, diphtheria, pertussis									•	•		
Tdap Tetanus, diphtheria, pertussis								 One dose of gestat 		jnancy, ideally	/ between 27-3	32 weeks

- ◆ A single vaccine dose given by intramuscular injection
- A single vaccine dose given by subcutaneous injection
- ▲ A single vaccine dose given by mouth
- Provided through school-based immunization programs. Men-C-ACYW is a single dose; HB is a 2 dose series (see Table 6); HPV-9 is a 2 dose series (see Table 10). Each vaccine dose is given by intramuscular injection
- $\pmb{\Phi}$ Given no earlier than the 1st birthday, and prior to 16 months of age

- Υ Once a dose of Tdap is given in adulthood (24 years of age), adults should receive Td boosters every 10 years thereafter
- HZ is a 2 dose series (see Table 12) given by intramuscular injection
- ★ Children 6 months to 8 years of age who have not previously received a dose of influenza vaccine require 2 doses given ≥4 weeks apart. Children who have previously received ≥1 dose of influenza vaccine should receive 1 dose per season thereafter

Note: A different schedule and/or additional doses may be needed for high risk individuals (see Table 3) or if doses of a vaccine series are missed (see appropriate Tables 4-24)

Reminder: Inform OCFP's Policy Agenda!

The OCFP is reviewing and refining our policy solutions to ensure we continue to reflect our members' needs.

We are asking for your input as we work to ensure we are bringing the best possible solutions to government and health system partners.

<u>Please take our brief survey</u> by **September 13, 2024.**



Managing Patient Expectations

the HOW matters!



Freud observed that threats to our self-esteem or self conception can often cause far more anxiety than threats to our physical wellbeing.

Velcro & Teflon



Respond rather than React

ABCD: Acknowledge Breathe Consider Do



Validation:"This is important."

∽ Who, where, & what-else is possible?

∽ What's your policy for e-mails, call-backs etc.?



Everyone is on their own life journey I am not the cause of this person's suffering Nor is it entirely within my power to make it go away Even though I wish I could Moments like this are difficult to bear Yet I may still try to help if I can May I remember I make a difference.

-shared by Robin Beardsley from Chris Germer & Kristin Neff's Mindful Self Compassion Program









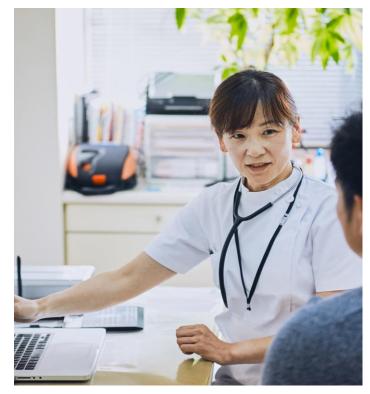
An opportunity to partner with another family physician, **one-to-one or in a small group**, for support as you **explore clinical complexity and increase your confidence** caring for patients with mental health challenges, substance use, and chronic pain. A focus can be on your well-being as you engage in this challenging work.

Managing Patient Expectations Series

Торіс	Description
Conflict Resolution with Patients Sept. 25 noon-1:00 pm	De-escalate patient conflicts and know when to seek additional support. Learn strategies to manage difficult encounters, fostering a more harmonious health-care environment.
Patient Boundaries with Patients Oct. 9 noon-1:00 pm	Learn why boundaries benefit patients and physicians and get practical tips for establishing and maintaining them. We'll practice effective boundary-setting techniques to enhance your professional interactions. Strengthen your ability to create a respectful and productive health-care environment
Managing Aggressive Behaviours Oct. 23 noon-1:00 pm	Equip yourself with prevention tactics and approaches to handling aggression. You will learn how to manage the aftermath of aggressive incidents and ensure a safe environment for all. Enhance your skills in maintaining calm and control in challenging situations.
Strategies to Manage Challenging Encounters and Preserve Your Well-Being Nov. 6 noon-1:00 pm	Discover resilience-building tips to incorporate into your busy clinic routine, preserving your mental health and well-being. You will be provided with practical strategies to maintain your composure and emotional balance, ensuring you can continue providing excellent patient care.

Navigating patient interactions can be one of the most challenging aspects of health care. That's why we'll be running a four-part webinar series, Managing Patient Expectations, to equip you and your team with the tools and strategies to handle difficult situations effectively, improving patient satisfaction and staff well-being.

For registration contact: info@oma.org





NEW!

Osteoporosis and Fracture Prevention Workshop

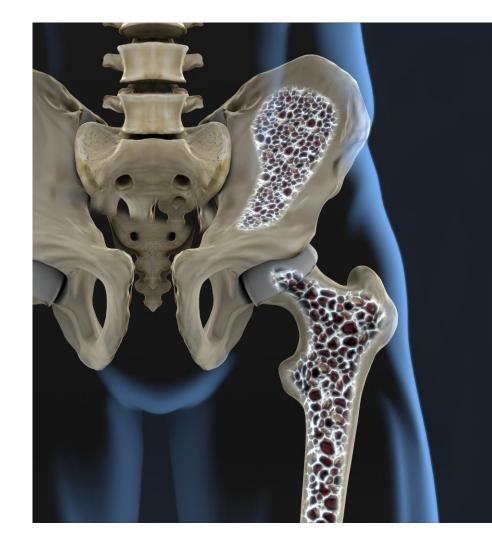


October 30, 2024 1 p.m. – 4 p.m. Registration is now open

\$195 + HST Early bird: \$175 + HST until September 20

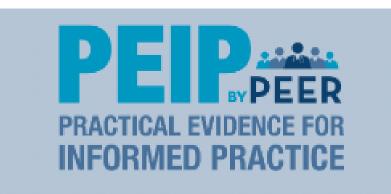
Scan to learn more

This is a three-credit-per-hour Mainpro+ certified program



Registration Open: Practical Evidence for Informed Practice (PEIP) Conference 2024

- Hybrid Event: Oct 18 19, 2024, DoubleTree Hotel West Edmonton and live webcast
- Topics include
 - Prenatal Care: vaccines, anti-platelets and more
 - Pediatrics update
 - The other F-word approach to Fibromyalgia
 - Adult Attention Deficit Disorder
 - Artificial Intelligence misinformation
 - Menopause
 - Cardiology updates
 - Geriatric Pearls from Rx Files
 - Annual review examining some of the finest and not-sofine research papers from the past year



<u>REGISTER</u>

https://whova.com/web/KZCkPmREuxOsM-DmPP7DmGGw3eT%40UARiT0NIOVENIU%3D/Conference%20Pricing/?utm_source=Acti veCampaign&utm_medium=email&utm_content=We%20re%20Back%21%20PEI P%202024%20Registration%20is%20now%20open&utm_campaign=PIEP%202 024%20-%20Previous%20Attendees%20-%20Registration%20Now%20Open

OCFP supports for Mental Health, Addictions and Chronic Pain

Mental health, addictions and chronic pain are challenging conditions. Find information to support the care you give patients – in a way that also considers your wellbeing.



Community of Practice

Join upcoming sessions:

Best practices for treating and diagnosing ADHD in primary care (September 18) Integrating AI and technology into family medicine (October 23)



Peer Connect Mentorship

Receive tailored support to skillfully respond to mental health issues, address substance use disorders, and chronic pain challenges in your practice.



RECENT SESSIONS

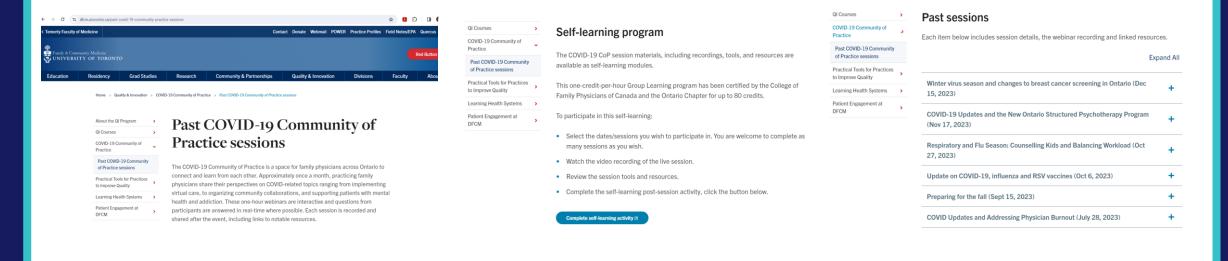
April 26	Infectious Disease Updates and Approaching ADHD	Dr. Allison McGeer Dr. Joan Flood
May 17	Infectious Disease and Practical Tips for Practice Management & Al	Dr. Daniel Pepe Dr. Alon Vaisman Dr. Ali Damji
June 7	Infectious Disease and Management of Obesity	Dr. Daniel Warshafsky Dr. Neil Naik
June 21	Infectious Disease Updates, Managing Alcohol Use & Practical Tips for a Restful Summer	Dr. Daniel Warshafsky Dr. Jennifer Wyman Dr. Joan Chan
July 26	Infectious Disease: Circulating Seasonal Illnesses & Important Vaccine Updates	Dr. Daniel Warshafsky Dr. Zain Chagla

Previous webinars & related resources:

https://www.dfcm.utoronto.ca/covid-19-community-practice/past-sessions

Accessing Previous Sessions and Self Learning

Previous webinars & related resources https://www.dfcm.utoronto.ca/covid-19-community-practice/past-sessions



Questions?

Webinar recording and curated Q&A will be posted soon <u>https://www.dfcm.utoronto.ca/covid-19-community-practice/past-sessions</u>

Our next Community of Practice: Sep 20, 2024

Contact us: <u>ocfpcme@ocfp.on.ca</u>

Visit: <u>https://www.ontariofamilyphysicians.ca/tools-resources/covid-19-</u> <u>resources</u>

The COVID-19 Community of Practice for Ontario Family Physicians is a one-credit-per-hour Group Learning program that has been certified for up to a total of 32 credits...

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



