

MEMORANDUM

TO: Nova Scotia Immunization Providers

FROM: Dr. Robert Strang, Chief Public Health Officer,
Department of Health and Wellness

DATE: September 19, 2011

RE: Influenza Vaccination Program for 2011-2012

Along with fall, the annual influenza immunization season is fast approaching. Your participation and cooperation in the past is greatly appreciated. The formal provincial media launch of the influenza immunization program will be October 19, 2011.

Vaccine orders can be placed anytime, but influenza vaccine will not be delivered until after October 11, 2011. Influenza immunizations may be administered as soon as you receive your vaccine order. It is important to work with your local Public Health office to coordinate vaccine ordering and delivery.

Public Health receives weekly shipments of vaccine over a 6-8 week period and must distribute it equitably to all providers over that time period. Therefore, it is not possible to fill everyone's total order at the beginning of the season and you will not be able to order your whole season's supply at once. We ask you to plan your immunization clinics accordingly and we encourage you to first immunize people at greatest risk of influenza-related complications.

For the 2011/12 season, influenza vaccine is recommended and publicly funded for all Nova Scotians. While all Nova Scotians are encouraged to be immunized, the National Advisory Committee on Immunization (NACI) annual influenza immunization statement emphasizes that the following groups remain the top priority for influenza immunization:

- adults and children with chronic heart or lung disease, diabetes mellitus and other metabolic diseases, cancer, immunodeficiency, immunosuppression (due to underlying disease and/or therapy), renal disease, anemia, and hemoglobinopathy
- adults and children with any condition that can compromise respiratory function or the handling of respiratory secretions or that can increase the risk of aspiration
- children and adolescents (age 6 months to 18 years) with conditions treated for long periods with acetylsalicylic acid (e.g., rheumatoid arthritis patients)
- people of any age who are residents of long term or chronic care facilities
- all pregnant women
- all children from 6 to 23 months of age
- those with morbid obesity (body mass index of 40 or more) (*new this year*)
- Aboriginal peoples (*new this year*)
- those 65 or older
- those who live with or care for someone in the above groups
- health care workers (*includes all staff and volunteers in acute or long term care facilities, home care/home support agencies, community-based offices (including physicians,*

pharmacists, dentists and physiotherapists) or other community settings) and students in a health care profession educational program

- first responders (EHS, fire and police)
- people living in a home that is expecting a newborn during the regular influenza season
- anyone who lives with, or cares for children less than 24 months of age

- **MSI billing information is used to collect data on physician-delivered vaccine as part of assessing overall vaccine coverage rates**
- **The diagnostic codes to be used are: for pregnant women- V221 and for males & non-pregnant females- V048**
- **Other immunization providers are to complete aggregate data collection**

IMPORTANT CHANGE: The National Advisory Committee on Immunization (NACI) 2011-12 Statement on Influenza Immunization recommends a **change in the dose of influenza vaccine for children ages 6-35 months.** The recommended dosage is now **0.5ml of vaccine** (not 0.25 ml as in previous years). This is based on evidence of moderate increase in immunogenicity and no evidence of increased adverse events. N.S. has made the decision to adopt the NACI recommendation.

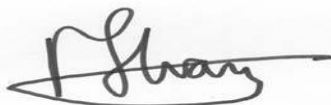
In both their clinical practice, and as leaders in health care facilities and District Health Authorities, there are many opportunities for health care providers to promote and support annual influenza immunization, such as:

- ensuring that individuals (especially those at high risk) are advised about and/or offered influenza vaccine at every clinical encounter during the fall and early winter
- encouraging and supporting initiatives to provide influenza vaccine within health care facilities, such as at outpatient specialty clinics (e.g. diabetic daycare), as part of discharge planning for admitted patients and in emergency departments
- being a positive role model for other health care workers (HCW) by being immunized yourselves, encouraging co-workers to be immunized, providing factual information on influenza vaccine and ensuring HCW and patients are offered vaccine
- promoting and supporting the allocation of resources to implement comprehensive influenza immunization programs for both the public and HCW
- working with other partners to increase opportunities for the public to access influenza immunization

More information on influenza immunization can be found at:

<http://www.gov.ns.ca/hpp/cdpc/influenza.asp>
www.immunize.cpha.ca

Thank you for your continued support in promoting influenza vaccination.



Robert Strang MD, MHSc, FRCPC
Chief Public Health Officer
Department of Health and Wellness