

Pandemic (H1N1) 2009

Please distribute to all physicians at this fax.

Date: December 4, 2009
To: All Alberta Physicians
From: Senior Physician Executive
Re: **H1N1 Physician Update to December 4, 2009**

Current Status: Week eight of Wave two of Pandemic (H1N1) 2009 in Alberta:

The second wave of the Pandemic is on the decline, and Alberta Health Services is returning to normal business in all areas. ***However, we are still expecting a third wave of the pandemic in the new year, and everyone must remain vigilant and prepared.***

Public immunization – H1N1 and Seasonal Influenza

Seasonal influenza immunization is now available to all Albertans over 6 months of age at the drop-in public immunization clinics where H1N1 vaccine is still being offered. H1N1 and seasonal vaccines can be administered at the same time in most cases (by separate injections in different locations, however). Public vaccination clinics will continue to operate for the next one to two weeks but will no longer be open on Sundays in most Zones. In addition, clinic hours may also change. The most up to date information is available at: <http://www4.albertahealthservices.ca/immunization/>. Seasonal and H1N1 vaccines are currently being distributed to community physician clinics and offices.

Local Reactions to pH1N1 vaccine are NOT infections:

Public Health has become aware that some Alberta physicians are assessing expected local reactions to pH1N1 vaccine to be infections and are inappropriately prescribing antibiotics. The adjuvanted pH1N1 vaccine is more reactogenic than seasonal influenza vaccine. Pain, redness and swelling at the injection site (and further in some people) are common side effects of the adjuvanted vaccine. These reactions occur as early as a few hours post vaccine and can be mild to moderate in severity, resolving or decreasing in intensity within 48 hours of vaccine administration. They are not infections and do not need antibiotics.

The most frequently reported systemic symptoms with adjuvanted pH1N1 vaccine include: fatigue; myalgia; headache and arthralgia. Other less common symptoms include fever, swelling and/or pain in local lymph nodes. Uncommon reported reactions include: insomnia; paresthesia; somnolence; dizziness; gastrointestinal symptoms; pruritis and rash. These expected reactions should not be routinely reported as adverse events. Other reactions/adverse events should be reported by the physician to local Public Health office or the patient can report through HealthLink.

Closure of AHS Emergency Coordination Center and Zone Emergency Operations Centers:

The AHS Emergency Coordination Center (ECC) and the Zone Emergency Operations Centers (ZEOCs) have been deactivated for this wave of the pandemic. If the need arises, this governance and command/control structure will be reinstated with subsequent waves according to the triggers outlined in the Pandemic (H1N1) 2009 Response Plan October 2009. The full document can be found at: <http://www.albertahealthservices.ca/files/ns-h1n1-plan.pdf>

Please monitor daily the Health Professionals section of the AHS website for current Pandemic (H1N1) 2009 information at: <http://www.albertahealthservices.ca/660.asp>, or contact: AHS.ECC@albertahealthservices.ca

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