



Changing the Way We Work: COVID-19 Community of Practice for Ontario Family Physicians

Long COVID and Lessons from the U.K., February 19, 2021

Answers from CoP guest, panelists and co-hosts to in-session questions posed by participants, based on current guidance and information available at the time.

For house calls, should we double mask; or mask and face-shield?

The Provincial Infectious Diseases Advisory Committee (PIDAC) has just reviewed the evidence on masking and their recommendations will be coming out shortly. They say that double masking is not recommended for healthcare professionals. The most appropriate PPE would be a [medical] mask and eye protection (either goggles or face shield)

 What type of needle (gauge, length, vole) should family docs order for vaccination in their clinics?

We do not currently know which vaccine we will have in our offices (AZ or J&J). The Canadian government has ordered the supplies for the vaccination campaign. [Article with details here:] https://www.biopharma-reporter.com/Article/2020/07/27/BD-receives-order-for-syringes-from-US-and-Canada

 Do you need a positive COVID test for a long COVID diagnosis? What about suspected cases in March 2020? (no testing kits in Ontario at that time)

Long COVID can be diagnosed clinically on the history alone — you do not need a positive test.

 What evidence is there, based on current research, of the adequacy of one dose of the COVID vaccine (Pfizer) in producing sufficient immune response?

At this time, a single dose of any of the mRNA vaccines has not been demonstrated to provide long-lasting immunity, and efficacy is in the range of 60%. Two doses are necessary to achieve a sufficient immune response.

• Is there any point for serology testing if you suspect long COVID but patient never had swab as was not eligible for swab early in the pandemic?

[There is no role for serology testing in these cases.] Long COVID can be diagnosed on history alone.

 Person infected with COVID 19 in November 2020 having cough and not feeling well over last few days. Should she be tested for Corona virus again?

Yes - if they have clinical indications of acute COVID, they should be tested again.





Can you comment on the adenovirus end vector vaccines like Astra [Zeneca]
 (Oxford) vaccine on lack of efficacy depending on local epidemiology prior
 immunity from prior adenovirus exposures? How is Canada here? Also with
 variants [of concern (VOC)] is this vaccine hence not able to booster (either as is,
 or incorporating the genetic code variants?)

There is not any change in the efficacy of the Ad vector vaccines based on local epi as they use chimp adenoviruses that are not found in humans. They are less effective against VOCs, especially the South African and Brazilian VOCs.

• Is there any concern in administering the COVID 19 vaccine – mRNA type – in timing proximity to Prolia injection?

It is safe to take the COVID vaccine and Prolia, the question we do not have the answer for is about [any impact of Prolia on the] efficacy of the vaccine. [Canada has not released guidance yet, this] UK guidance here helps to weight out pro/con to delay Prolia – but generally suggests you do not need to alter the Prolia timing: [updated link] https://theros.org.uk/healthcare-professionals/covid-19-hub/denosumab-prolia-treatment-and-the-covid-19-pandemic/

• I would like to know role of colchicine in primary care setting for treating COVID-19 positive patients.

We have 2 webinars on this topic:

[Feb. 22: **Primary Care for COVID in the Community** was hosted by OCFP on and highlighted the tools and resources here: https://hfam.ca/clinical-pathways-and-evidence/covid/assessment-diagnosis-and-management-of-covid/] and

[March 4: COVID@Home Monitoring for Primary Care Providers, Ontario Health

 How can we tell the difference between functional impairment from long COVID or from mental health issues that have developed in so many people due to the pandemic, especially in those who weren't able to be tested early on?

We do not yet know. Emphasize the importance of our relationship-based care and helping to support and heal the patient, this is the "way in" to care.

• We need to know when are the community physicians' priority to be vaccinated, how to register? Is it through the CPSO, OMA or OCFP?

Vaccination for community physicians will be guided by the provincial prioritization and managed by the local Public Health Unit You do not need to register but keep an eye on communication from your PHU. The prioritization for patients and healthcare workers is to be integrated into the provincial IT system called COVaxON where you can register and also schedule your appointment (and also will record vaccines given, adverse events etc.) [NOTE: Public Health may partner with hospitals in this effort to vaccinate health care workers. At this point we don't have information on registering.]





Are there currently any long-haul COVID clinics in the GTA?

Patients can be referred to the CANCOV study Canadian COVID-19 Cohort study (one year observational) run via UHN and through that get standardized assessments and referrals. You can email: CANCOV@uhn.ca or fax to 1-866-6CANCOV (1-866-622-6268).

Also, there is the virtual COVID Care@Home program: https://coviDcareathome.ca/

Those admitted with severe COVID (i.e. ICU) are often followed post discharge by the hospital team who cared for them.

E-consult can also be used to get COVID advice: https://econsultontario.ca/ontario-econsult-service-access-to-COVID-19-advice

How long will the vaccinations give you protection?

We do not have a final answer yet for this question given vaccines are new. Data from at least one trial on Moderna suggested antibodies persisted for 4 months.

Take a look at this NEJM FAQ for more info: https://www.nejm.org/COVID-vaccine/faq

I would like to clarify, the diagnosis of long COVID can be made clinically alone?
 What happens when we have negative antibody test? Does this exclude long COVID?

Yes, this is correct – a positive COVID test is needed.

How will vaccination be rolled out?

The vaccination rollout will be managed by the local public health units. There is a good summary of what we know about the vaccination rollout here on the CEP website along with other information: https://tools.cep.health/tool/COVID-19-vaccines/#availability-rollout-and-prioritization-in-ontario

• Can you refer us to a protocol for treating Acute COVID as an outpatient? When do we start steroids? When do we start thrombolytics etc.?

Great collection of resources here on caring for [acute] COVID patients from Hamilton Family Medicine: https://hfam.ca/clinical-pathways-and-evidence/COVID/assessment-diagnosis-and-management-of-COVID/

Is it possible to get the second dose of Moderna after 3 weeks, knowing that the interval is 28 days?

We are still looking at what minimum dose intervals are appropriate to use, for both Pfizer and Moderna. The trials used those specific schedules (earliest was 19 days for Pfizer) but it is likely that earlier than the recommended is reasonable. At this point, a few days early is leeway, and we would not recommend getting a third dose for that reason.

Any advice on vaccine hesitancy in LTC staff

[Great resources on this topic at] 19 To Zero https://www.19tozero.ca/healthcare-workers





These additional questions were answered live during the session. To view responses, please refer to the <u>session recording</u>.

- COVID-19 long haulers, how long are they contagious for? Do they need to have another swab test PCR before they are able to go back to work/community? Are there special clinics to see these patients?
- Is there a racial difference in how COVID-19 infection effects the various organs? Anecdotally there appear to be fatal myocardial infarctions in young, racialized men who are infected.
- Long COVID patients. How to do proper follow up care for them? Cardiac tests? PFT, Chest Xray? Are particular blood tests needed? When do we stop worrying?
- Any prevention of long COVID? Colchicine Remdesivir Oral Prednisone IV dexamethasone?
 Anticlonal?
- Please comment on similarities between Long COVID and Chronic Fatigue Syndrome.
- Is long COVID another type of chronic fatigue syndrome?