COVID-19 Community of Practice for Ontario Family Physicians

Winter virus season and changes to breast cancer screening in Ontario

Dec 15, 2023

Dr. Allison McGeer
Ms. Maggie Keresteci
Dr. Jonathan Isenberg
Dr. Anna M. Chiarelli
Winter virus season and changes to breast cancer screening in Ontario

Co-moderators:

- Dr. Tara Kiran, Fidani Chair of Improvement and Innovation, University of Toronto and Family Physician, St. Michael’s Academic Family Health Team, Toronto, ON
- Dr. Eleanor Colledge, CPD Program Director, University of Toronto and Family Physician, South East Toronto Family Health Team, Toronto, ON

Panelists:

- Dr. Allison McGeer, Toronto, ON
- Ms. Maggie Keresteci, Toronto, ON
- Dr. Jonathan Isenberg, Toronto, ON
- Dr. Anna M. Chiarelli, 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.
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.
10 Community Roundtables

**British Columbia**
- People with Disabilities

**Manitoba**
- Indigenous Youth
- Michael Redhead Champagne

**Ontario**
- African, Caribbean & Black Community

**Quebec**
- Newcomers & Low-Income
- Racialized & Newcomer 2S+LGBTQIA+
- Clinique Mauve

**Nova Scotia**
- Refugee Claimants
- Black Nova Scotians [of African Descent]

**Newcomers**
- Umbrella Multicultural Health Co-op

**Newcomers**
- ECRC

**First Nations, Inuit & Métis**
- Indigenous Primary Health Care Council

**Well Living House**
- United Way
Changing the way we work

A community of practice for family physicians during COVID-19

At the conclusion of this series 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. Tara Kiran (DFCM), Dr. Mekalai Kumanan (OCFP), Dr. Ali Damji (DFCM), Dr. Eleanor Colledge (DFCM) Dr. Harry O’Halloran, Mina Viscardi-Johnson (OCFP), Julia Galbraith (OCFP), Pavethra Yogeswaran (OCFP), Marisa Schwartz (DFCM), Erin Plenert (DFCM)

Previous webinars & related resources:

https://www.dfcm.utoronto.ca/covid-19-community-practice/past-sessions
Dr. Allison McGeer – Panelist
Infectious Disease Specialist, Mount Sinai Hospital

Ms. Maggie Keresteci – Panelist
Executive Director at Canadian Association for Health Services & Policy Research

Dr. Jonathan Isenberg – Panelist
Provincial Primary Care Lead, Cancer Screening, Ontario Health

Dr. Anna M. Chiarelli – Panelist
Senior Scientist and Provincial Scientific Lead, Ontario Breast Screening Program, Clinical Institutes & Quality Programs, Ontario Health
Speaker Disclosure

- **Faculty Name:** Dr. Allison McGeer
  - Relationships with financial sponsors: Novavax, Medicago, Sanofi-Pasteur, GSK, Merck
    - Grants/Research Support: Sanofi-Pasteur, Pfizer
    - Speakers Bureau/Honoraria: Moderna, Pfizer, AstraZeneca, Novavax, Medicago, Sanofi-Pasteur, GSK, Merck
    - Others: N/A

- **Faculty Name:** Maggie Keresteci
  - Relationships with financial sponsors:
    - Grants/Research Support: N/A
    - Speakers Bureau/Honoraria: Ontario College of Family Physicians, Cdn Association for Health Services & Policy Research
    - Membership on advisory boards: N/A
    - Others: N/A

- **Faculty Name:** Dr. Jonathan Isenberg
  - Relationships with financial sponsors:
    - Grants/Research Support: N/A
    - Speakers Bureau/Honoraria: Ontario College of Family Physicians
    - Membership on advisory boards: N/A
    - Others: N/A

- **Faculty Name:** Dr. Anna M. Chiarelli
  - Relationships with financial sponsors:
    - Grants/Research Support: N/A
    - Speakers Bureau/Honoraria: Ontario College of Family Physicians
    - Membership on advisory boards: N/A
    - 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: Chief of Family Medicine, Cambridge Memorial Hospital

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

- Faculty Name: **Dr. Tara Kiran**
- Relationships with financial sponsors:
  - Speakers Bureau/Honoraria: St. Michael’s Hospital, University of Toronto, Health Quality Ontario (HQO), Canadian Institutes for Health Research (CIHR), Ontario College of Family Physicians (OCFP), Ontario Medical Association (OMA), Doctors of BC, Nova Scotia Health Authority, Osgoode Hall Law School, Centre for Quality Improvement and Patient Safety, Vancouver Physician Staff Association, University of Ottawa, Ontario Health, Canadian Medical Association, McMaster University, Queen’s University, North American Primary Care Research Group.
  - Grants/Research Support: Canadian Institute for Health Research, Ministry of Health and Long-Term Care, St. Michael’s Hospital Foundation, St. Michael’s Hospital Medical Services Association, Women’s College Hospital Academic and Medical Services Group Innovation Fund, University of Toronto, Health Quality Ontario, Ontario Ministry of Health, Gilead Sciences Inc., Staples Canada, Max Bell Foundation.
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 panel’s attention.

• Please use the chat box for networking purposes only.
Dr. Allison McGeer – Panelist
Infectious Disease Specialist, Mount Sinai Hospital

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Senior Scientist and Provincial Scientific Lead, Ontario Breast Screening Program, Clinical Institutes & Quality Programs, Ontario Health
Novavax XBB.1.5 vaccine authorized in Canada

• In Ontario, will be distributed by health units
• Should be available in health units next week

• 5 and 10 dose vials
  • Stable for 9 months at 2-8C unopened
  • Stable for 6 hours after vial opened

What is coming in winter viruses?

COVID-19

Influenza

A(H1N1)

RSV

COVID-19 hospitalizations and deaths
Ontario, June-November 2023
COVID-19 deaths
Ontario, June-November 2023

September 1, 2023 - November 30, 2023

532 deaths: 375 80+ years
143 60-79 years
14 40-59 years
XBB.1.5 COVID vaccination uptake to Dec 2, 2023

Last dose status:
- At least one XBB dose
- Non-XBB dose <6 months ago
- Non-XBB dose 6 to <12 months ago
- Non-XBB dose 12+ months ago
Preparing for the holidays

• **Protecting yourself**
  - vaccination against influenza and COVID-19
  - avoiding crowded indoor spaces
  - not having contact with symptomatic persons
  - wearing a mask or respirator
  - having rapid tests available and a treatment plan for COVID-19

• **Protecting/supporting vulnerable family, friends, colleagues**
  - Staying home if you have symptoms compatible with influenza/COVID
  - Sharing rapid tests
  - Planning visits (e.g. back-up plans if someone gets sick, avoiding exposure in the days before)

• **Be kind, and respectful of people’s different needs**
Three things about RATS

• They are not perfect, but they are significantly better than nothing
• Sensitivity is increased by adding a throat/back of tongue swab
• Expiry dates have been extended

Science M et al. Clin Infect Dis epub Dec 12, 2023; Todsen JAMA network open 2023;6(12):e2344295
Symptom profiles of common respiratory tract infections

https://www.nature.com/articles/s41598-023-38869-1
Three things about RATS

• They are not perfect, but they are significantly better than nothing
• Sensitivity is increased by adding a throat/back of tongue swab
• Expiry dates have been extended
Rapid Response (BNTX)
Abbott Panbio
SD Biosensor

*Expiry is 2 years after manufacturing*

Artron: *add 6 months to listed expiry date*
RSV prevention

Older adults

- One authorized vaccine (adjuvanted, F protein)
- Good efficacy data from RCT (small # cases)
- Safety data in 30,000 vaccines (now >5M American older adults vaccinated)
- Available in private market
- Expensive

0-2 yr olds

- Vaccine for pregnant women (not yet authorized in Canada)
- Monoclonal antibody for neonates (not yet available in Canada)
## What is going to happen to pneumococcal vaccines?

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>What will happen?</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>13-Valent pneumococcal conjugate (PCV13)</td>
<td>Will be phased out, and replaced with either PCV15 or PCV20</td>
<td>Already gone from private supply</td>
</tr>
<tr>
<td>15-Valent pneumococcal conjugate (PCV15)</td>
<td>May be selected for pediatric and/or adult vaccine programs</td>
<td>If PCV15 in program, PPV23 will be recommended as later dose (adults, and high risk kids)</td>
</tr>
<tr>
<td>20-Valent pneumococcal conjugate (PCV20)</td>
<td>May be selected for pediatric and/or adult vaccine programs</td>
<td>If PCV20 in program, no PPV23</td>
</tr>
<tr>
<td>Pneumococcal polysaccharide (PPV23)</td>
<td>May be kept if adult program remains PPV23 or changes to PCV15, or phased out if programs use PCV20</td>
<td>Eventually (when PCV21, PCV24, etc. are introduced) – will be phased out</td>
</tr>
</tbody>
</table>

**What do you do now? – one opinion**

<table>
<thead>
<tr>
<th>Age group</th>
<th>Action</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children</td>
<td>Continue PCV13, wait for program changes</td>
<td>If parents wish to, paying for either PCV15 or PCV20 is fine. <em>NACI recommends that PNEU-C-15 vaccine may be used interchangeably with PNEU-C-13 vaccine in children. A pneumococcal vaccine series may be started or completed with either vaccine.</em></td>
</tr>
<tr>
<td>Adults</td>
<td>If eligible adult (&gt;65, 50-64 with comorbidity, 18+ immunocompromised): • PCV20 if private insurance • PCV20 if can afford/wish to pay • PPV23 otherwise</td>
<td>• Getting PCVs paid for in public programs for adults may take time • PPV23 in the short term is a clear benefit • Current recommendation is PCV20 1 year after PCV13, and 5 years after PPV23</td>
</tr>
</tbody>
</table>

Changes to the CPSO *Continuity of Care: Advice to the Profession*

These updates provide greater clarity around administrative responsibilities for specialists and emphasize clear communication between consultants and family physicians.

[https://www.ontariofamilyphysicians.ca/supports-for-family-doctors/](https://www.ontariofamilyphysicians.ca/supports-for-family-doctors/)
What you need to know:

Resources to support your practice

# Resources to support your practice

## Letter Templates

1. **REFERRALS**
2. **ORDERING TESTS**
3. **REVIEWING TESTS**
4. **REFERRAL TO SUB-SPECIALISTS**
5. **CONSULT NOTES & DISCHARGE SUMMARIES**

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**Ordering Tests**

<table>
<thead>
<tr>
<th>02</th>
<th>Ordering Tests</th>
</tr>
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</table>

Inset practice name & information

Dear Dr. (insert name),

Re: (patient identifier)

Thank you for your thorough and helpful consultation note on the above-mentioned patient. Although I am always eager to collaborate with you in the care of our mutual patients, I will leave the ordering of investigations you recommended in your consult to you.

Include the relevant tests and imaging, where applicable

You’ll note that the recently updated advice from CPOD on Continuity of Care explicitly stated that “Any physician who determines a test is needed is responsible for ordering that test, including tracking the results and managing any follow up that stems from that test.” By ordering tests that they themselves have deemed necessary, physicians ensure that patient care is not unnecessarily delayed, and that their colleagues are not required to receive results or manage care that falls outside their scope of practice.

Include the following. If desired, I appreciate being copied to receive test results; however, as per the CPOD “It should be clear that I have no additional responsibilities in regard to the issues or results.”

Your expertise in this specialized area is greatly appreciated. Please contact me if you would like to discuss this further.

Sincerely,

Dr. (insert name)

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OCFP’s [IPAC guidance](https://www.ontariofamilyphysicians.ca) has been updated to reflect the [high-risk season](https://www.ontariofamilyphysicians.ca) for respiratory illnesses.

[PHO recommends](https://www.ontariofamilyphysicians.ca) masking for direct patient care during high-risk periods. In all practices, mask wearing should be mandatory for patients with signs and symptoms of infectious respiratory diseases. Ontario’s Respiratory Virus Tool has up to date information on respiratory virus activity. Download this OCFP poster to remind patients to wear a mask, in [English](https://www.ontariofamilyphysicians.ca) and [French](https://www.ontariofamilyphysicians.ca).

[https://www.ontariofamilyphysicians.ca/education-practice-supports/respiratory-illness-season-tools-and-resources](https://www.ontariofamilyphysicians.ca/education-practice-supports/respiratory-illness-season-tools-and-resources)
**Bottom Line**

In **fall 2024**, breast cancer screening for Ontarians ages 40-49 will shift from:

Ad hoc screening accessible via primary care referral

to

Organized screening program accessible by self-referral and primary care referral
Ontario Breast Screening Program (OBSP)

• Organized breast cancer screening program (launched in 1990)
• Benefits of organized screening
  • Invitation and recall letters
  • Sharing results
  • Navigational support
  • Program quality and performance measurement
<table>
<thead>
<tr>
<th>Year</th>
<th>Recommendation</th>
</tr>
</thead>
<tbody>
<tr>
<td>2011</td>
<td>&quot;Recommend not routinely screening for breast cancer with mammography&quot;</td>
</tr>
</tbody>
</table>
| 2018 | "For women aged 40 to 49 years, we recommend not screening with mammography; the decision to undergo screening is conditional on the relative value a woman places on possible benefits and harms from screening (Conditional recommendation; low-certainty evidence)"

"Some women aged 40 to 49 years may wish to be screened based on their values and preferences; in this circumstance, care providers should engage in shared decision-making with women who express an interest in being screened" |

Current State: Breast Screening for People Ages 40-49 in Ontario

OBSP

- Those ages 40 to 49 at average risk for breast cancer are not eligible for screening through the OBSP

- People are encouraged to make a decision about breast cancer screening in consultation with a primary care provider (PCP)
- PCP referral is required for mammography

Barrier for people without a PCP
On October 30, the government announced that the OBSP will be expanding to include eligible people ages 40 – 49 starting in **fall 2024**

**Rationale**

- Improved access
- Provides people who screen with the benefits of organized screening
- Compared to past modelling results, new modelling from the United States shows an improved benefits to harms ratio for screening people in their 40s.
Evidence: Improving health equity

• Slight increase in breast cancer incidence in females ages 40 – 49 in Ontario
• Younger women are more likely to be diagnosed at a later stage
• There are inequities in mammography screening participation in Ontario females ages 40 – 49. Those with no mammogram had a higher percentage of people:
  • In the most materially deprived communities
  • In the lowest income neighbourhoods
  • In the most ethnically concentrated communities
Results from modelling conducted by the United States Preventive Service Task Force (USPSTF)

- For ages 50-74, 7 breast cancer deaths averted for 1000 female persons screened. 1 to 2 fewer breast cancer deaths over a lifetime if start at age 40
- Potential harms of screening for women ages 40 to 49 include false positive results leading to unnecessary follow up testing and overdiagnosis

Importance of informed decision-making
OBSP 40-49: Screening Model

Informed decision making

Health811  Primary Care  Prevention Navigator

Mammogram

Navigation and follow up of results
Planned Supports for Primary Care Providers and Participants

- Provider resources to support breast screening conversations
  - Informational tool(s)
  - FAQs and website updates
  - Pre-launch presentations (provincial and regional webinars/presentations)
- Fact sheet for the public, translated into different languages
- Participants can contact Health811 and prevention navigators where they are available
Thank you!
New Toolkit

Choosing Wisely Canada's new toolkit features easy-to-use tools and resources to help clinicians and caregivers manage bronchiolitis appropriately.
PEDIATRIC VIRAL PRESCRIPTION

Provides other ways to help relieve symptoms to avoid unnecessary antibiotic prescriptions.

The symptoms your child presented with today suggest a viral infection:

- Common cold (upper respiratory tract infection): Cough can last 3-4 weeks
- Bronchiolitis: Cough can last 3-4 weeks
- Sore throat (viral pharyngitis)
- Middle ear infection (otitis media)
- Sinus infection (acute sinusitis)
- Other viral respiratory infection:

Your child does not need antibiotics because they do not work on viral infections. Using antibiotics when not needed makes them less effective for potential future bacterial infections. They can cause side effects (like diarrhea, rash) and, in rare cases, allergic reactions, or kidney injury, or liver injury.

How to help your child feel better and manage symptoms:

- Ensure they drink plenty of fluids and get rest
  - For infants, smaller feeds more often to meet the same total daily amount of feeds
- Wash hands often and stay home to avoid spreading the infection
- Do not give Aspirin or over-the-counter cough and cold medicines.
  - Talk to your healthcare provider or pharmacist about using the following treatments and the right amount to give:
    - Acetaminophen (e.g., Tylenol) for fever and aches
    - Ibuprofen (e.g., Advil, Motrin) for fever and aches
Benefits

- Specimens submitted inform local respiratory virus surveillance and assist in estimating influenza and COVID-19 vaccine effectiveness.
- Enables accurate measurement of circulating respiratory viruses in Ontario and BC which also contributes to our national surveillance.

Eligibility and Compensation

- Provider of primary patient care in the community
- Able to collect specimens for respiratory virus testing in your practice
- $20 compensation for each specimen submitted with a completed questionnaire
- CFPC Members and Non-Member Mainpro+ participants can submit the total number of hours of participation as non-certified credits in Mainpro+

More Info

- For more details and consent form, please Click Here to Start the Survey
- Contact: Ontario Vaccine Effectiveness Coordinator Mandy Kwok, 647-792-3627 / mandy.kwok@oahpp.ca.
• Publicly-funded Canada-wide study evaluating effectiveness of COVID-19 medications
• By primary care providers, for primary care providers
• Eligible: Adults who tested positive for COVID with symptoms starting in the past five days and are aged 50+ years or 18–49 with chronic condition(s)
• Participants receive personalized care, close monitoring by a healthcare team and can participate online or by phone.

• Enrollment underway – to refer your patients (patients may self-refer):
  o Phone: 1-888-888-3308 (Monday - Friday, 8 am to 6 pm ET)
  o Email: info@CanTreatCOVID.org
  o Website: CanTreatCOVID.org/contact

• More information:
  o CanTreatCOVID.org
Live-stream days on January 26 & 27, 2024

Register today and save with early bird pricing!
http://www.ocfpsummit.ca

Dr. Hayley Wickenheiser
Family Physician Resident, Olympic Gold Medalist, Hockey Hall of Famer and Senior Director of Player Development for the Toronto Maple Leafs

Why attend?

• Hear from thought-provoking leaders including keynote speakers: Dr. Teresa Chan, Dr. Avi Goldfarb and Dr. Chika Stacy Oriuwa.

• Strengthen your skills on health topics that matter to you and your practice.

• Connect and network with your family medicine community.
# RECENT SESSIONS

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<tr>
<th>Date</th>
<th>Session Title</th>
<th>Speakers</th>
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<tr>
<td>November 17</td>
<td>COVID-19 Updates and the New Ontario Structured Psychotherapy Program</td>
<td>Dr. Gerald Evans Dr. Paul Kurdyak Dr. Leah Skory</td>
</tr>
<tr>
<td>October 27</td>
<td>Respiratory and Flu Season: Counselling Kids &amp; Balancing Workload</td>
<td>Dr. Joan Chan Dr. Janine McCready</td>
</tr>
<tr>
<td>October 6</td>
<td>Update on COVID-19, influenza and RSV vaccines</td>
<td>Dr. Zain Chagla Dr. Elizabeth Muggah</td>
</tr>
<tr>
<td>September 15</td>
<td>Preparing for the fall</td>
<td>Dr. Kieran Michael Moore Dr. Daniel Warshafsky</td>
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Previous webinars & related resources: [https://www.dfcm.utoronto.ca/covid-19-community-practice/past-sessions](https://www.dfcm.utoronto.ca/covid-19-community-practice/past-sessions)
Questions?

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

Our next Community of Practice: January 19, 2024

Contact us: ocfpcme@ocfp.on.ca

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

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