Changing the Way We Work

November 17, 2023: COVID-19 Updates and the New Ontario Structured Psychotherapy Program

Panelists: Dr. Gerald Evans, Dr. Paul Kurdyak, Dr. Leah Skory
Moderator: Dr. Ali Damji

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

Paxlovid and COVID-19 Therapeutics

For a 40-year-old with asthma, could you prescribe Paxlovid not just to prevent severe outcomes, but to also prevent Long COVID?

A recent observational study suggested that Paxlovid does not significantly reduce the likelihood of Long COVID.

Is Paxlovid still recommended for asymptomatic residents of a long-term care home who test positive for COVID-19 during an outbreak on their unit?

Generally, yes.

Are there recommended time frames between getting vaccinated/having COVID-19 and receiving therapeutics (e.g., a patient receives a vaccination, and has a COVID-19 a few weeks later, can they receive Paxlovid)?

If they are at-risk, I would say yes.

Is there any more data on the safety of administering Paxlovid during pregnancy?

It's safe. A recent study published in JAMA confirms it.

For those with Paxlovid drug interactions, is the recommendation to not to take anything, work out a modified Paxlovid course or to arrange for Remdesivir?

Remdesivir infusion referral forms and procedures available here: https://healthcareathome.ca/document/remdesivir-infusion-referral-forms-procedures/
How do I refer a patient for Remdesivir?

Remdesivir is available to patients in the community through Home and Community Care Support Services (HCCSS). More information is available here: [https://www.ontariohealth.ca/sites/ontariohealth/files/Access_to_antiviral_treatments_for_COVID-19_in_the_community.pdf](https://www.ontariohealth.ca/sites/ontariohealth/files/Access_to_antiviral_treatments_for_COVID-19_in_the_community.pdf).

Is there any update on providing a Paxlovid prescription to patients in advance of travel/holidays when pharmacies are closed?

We know this continues to be a challenge, especially for our high-risk patients. The OCFP has continued to advocate in order to ensure timely access to Paxlovid. As you know, you can provide a prescription for Paxlovid to pharmacy in advance, and the pharmacy can dispense if the patient reports a positive test. Ideally, we’ll see further movement on this to improve access and we hope we will hear from MOH about progress on this soon. We will keep everyone updated.

I have a 75-year-old patient, who is not taking any medication and has received seven doses of the COVID-19 vaccine. He now has COVID-19. Would you recommend Paxlovid?

Yes.

Would you still recommend Paxlovid if it is a mild infection in an elderly patient?

Yes.

**XBB Variant of COVID-19**

How long does protection against the XBB variant last? Four or six months?

Almost certainly for two to three months. Protection may be longer for young healthy people.

If someone had COVID-19 six months ago, was it likely XBB?

Yes, XBB has dominated since January 2023.
Can you comment on link between both COVID-19 infection and COVID-19 vaccines triggering or causing flare of bullous diseases like pemphigoid?

It is anecdotal, so causation is uncertain.

I have a pregnant patient who had COVID-19 in early June and is now 15 weeks pregnant. When should she receive a COVID-19 vaccine?

They can receive the vaccine at anytime now.

How long does it take for vaccine to have peak effectiveness? (My pregnant patient caught COVID-19 two weeks after receiving a vaccination.)

If previously vaccinated, approximately seven days. It is important to remember that sterilizing immunity is not 100 per cent and particularly in pregnant people who have a modest reduction in immunogenicity from vaccines.

What is the percent of efficacy of the Moderna vaccine against infection from XBB variant?

Likely to be similar to original and bivalent vaccines (60-80 per cent within first two to three months of vaccine administration), but vaccine effectiveness is not yet available from ongoing trials or observational studies.

Is it the expectation that everyone should receive a COVID-19 vaccine every six to nine months indefinitely?

No. As the virus becomes endemic with high rates of immunity, we will likely diminish the role of vaccines for much of the population. Exception likely to be older persons and those at high-risk for severe illness.

Is the Novavax XBB 1.5 product approved for use in Canada yet?

Not yet.

How to get the Novavax vaccine?

It is still not approved in Canada, but when it is, Novavax will be available through public health units.
For patients who have never received a COVID-19 vaccination and haven’t been infected in the past six to 12 months, do they still require a primary series?

Yes, they should receive a primary series. There is unpublished data that suggests a primary series with the current XBB vaccines is similarly effective to the original vaccines. We are waiting for NACI and APIC recommendations.

A child received a COVID-19 vaccine in early August due to international travel plans. Should they hurry to get the new XBB.1.5 vaccine or wait until it has been six months between doses?

They should wait six months. Young healthy kids have very good immunogenicity from vaccines with prolonged duration of immunity. The bivalent vaccines provide reasonable protection vs. XBB subvariants.

**COVID-19 Virulence**

Is COVID-19 less virulent due to the vaccines or evolution of the virus?

Both.

Is the mortality rate lower now solely because of vaccination rates or are the newer variants less virulent?

Both.

**Long COVID**

Is there evidence to support that the number of vaccines that ones get, can lower the chances of acquiring Long COVID?

I have not seen any data on the number of vaccines (beyond a primary series (2-3 doses)) and long COVID risk.

Is there any evidence of COVID-19 vaccines causing Long COVID?

I have not seen any data to support that happening.
Masking

Would you please provide an update on masking recommendations in outpatient clinics for health care providers and patients?

I would encourage and recommend masking for staff and patients/clients at this time.

How has the risk of being unmasked indoors changed pre COVID-19?

The risk is higher with COVID-19 due to the contribution of short-range aerosols to transmission, which is less so with influenza, RSV and the other respiratory viruses.

Materials for Conducting COVID-19 Tests

The COVID-19 swabs in my office will be expire in December. Is there a way to obtain more swabs?

I suggest you reach out to your local public health unit.

Public Health Mandates

If the number of COVID-19 cases continue to rise, do you think public health would bring back lockdowns? I read that some European countries are considering this.

Here in Ontario, I think there is little appetite within the population to re-introduce mandates.

COVID-19 Data and Research

Can you comment on the Cleveland health care workers study, which showed the risk of acquiring COVID-19 increases with the number of boosters?

It shows correlation, but not causation. It is subject to a lot of confusion. Cleveland Clinic is major alternative care centre.

How do you collect COVID-19 data nowadays?

It’s getting challenging, but there are various databases with reports from public health units and the province, which I check manually.

Dr. Evan, you recently spoke about a study that showed RATs are not as effective as they once were. In the study, were they swabbing nose, cheek and throat, and not just throat?
Positive predictive value is improved with swabbing multiple sites. The previous data was with mainly nasal swabs.

Respiratory Syncytial Virus Infection (RSV) Vaccines

Last session we were told that pharmacists could administer the RSV vaccine if prescribed. Local pharmacists state that the Ontario College of Pharmacy (OCP) will not allow them to administer the vaccine at this time.

Currently, the RSV vaccine is not publicly funded in Ontario. We need to observe patients for rare immediate reactions, which I think is why the OCP is being cautious.

Rapid Antigen Tests (RATs)

Are the green RATs less effective in detecting XBB?

Most RATs have a lower negative predictive value since the onset of the Omicron variant.

Cognitive Behavioural Therapy (CBT)

Are you referring to Mind Beacon when you mention internet-based cognitive behavioural therapy (CBT)?

The program has two iCBT providers, Mind Beacon and Tranquility. There are common elements between them, but some slight nuances. For example, you can connect with a clinician through Tranquility and Mind Beacon has some specialized modules for PTSD.

BounceBack

In the past, BounceBack has declined any individuals with moderate to high patient health questionnaire scores. Is this still a barrier?

Yes, I have experienced the same in the past. The Ontario Structured Psychotherapy program is more integrated now. In our health region, we have a central referral form and the intake process determines best program. With this approach, fewer of my patients are declined. If they are not appropriate for BounceBack they may be appropriate for higher levels of care.

Mental Health Programs

Can you provide the link to the e-mental health primary care link you referenced?

https://primarycare.ementalhealth.ca/index.php?m=fpStart
I see many resources for depression/anxiety, but the patients who fall through the cracks are people experiencing psychosis and have had multiple ER visits while in crisis. Community psychiatrists often reject these referrals. Can we form a clinic just for them?

I share your frustration. I’m not sure if you have tried this approach but each Canadian Medical Association chapter has an early psychosis program for patients under 30 with new onset psychosis.

**Definitions**

**Could you please define 'older'?**

People who are age 60 and over.

*These additional questions and comments were answered live during the session. To view responses, please refer to the session recording.*

- How much of a problem is Long COVID right now?
- Is there any new data on the death rate from the new variant of COVID-19?
- Can you please explain the concept of viral interference? It’s a new term for me.
- For those over 65 who have not had a previous COVID-19, would you recommend boosters at the four-month interval vs. six months given they don’t have hybrid immunity?
- If patients who didn’t get the new vaccine yet just had COVID-19, how long do they now wait to get the vaccine?
- I’m seeing more COVID-19 cases now in my patients than I have all through the pandemic. Granted, because of immunization and prior infection, most people get mild to moderate disease, but not all. Some get very sick and some have symptoms for months. However, people are refusing to think of Covid - they don’t mask, they don’t stay home when they are sick, they don’t test for COVID-19. How can we get people to buy in to these simple principles still, when most people want to pretend COVID-19 doesn’t exist?
- Are there Continuing Medical Education credits for this program?
- What is the current wait time for one-on-one therapy?
- I thought that you now have to pay for BounceBack—does this mean that they can get it for free again?
- Does the referral have to be done through Ocean? Referral processes requiring this creates barriers.
- Poverty is the biggest barrier in accessing mental health care. Are there services linked to teams that alleviate homelessness, food insecurity and access to technology?
- Is the Ontario Structured Psychotherapy program offered in different languages?
- Why don’t we just put the program into all schools since anxiety is rampant?
- Can you comment on rebound of symptoms after a course of Paxlovid?
- What about rebound COVID-19 with Paxlovid?