

February 2021 TARRANT Bulletin

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TARRANT WATCH VIRAL

February 2021 Bulletin

2020-21 Reporting Season Reminders

Happy New Year!

Our team here at TARRANT Viral Watch hope that everyone had a restful holiday season.

Thank you all for your continued support of TARRANT Viral Watch and your participation in our Influenza Vaccine Effectiveness Study. To ensure the smooth running of the study, here are a few reminders with regards to swabbing and the use of requisition forms:

1. Please only use the new 2020-21 **BLUE** requisition forms when submitting samples. Incomplete forms prevent us from using your data in our studies.
2. We ask that everyone try to primarily conduct nasopharyngeal swabs, rather than throat. This will allow for consistency in testing across all of the participating SPSN provinces.
3. For the Tarrant weekly reporters, please submit the report every Monday or early Tuesday. The report has to be submitted every Tuesday by noon to Alberta Health. When there is a Monday holiday, our report is submitted on

Wednesday.

4. If you are in need of more swab kits, please email us at tarrant@ucalgary.ca

COVID-19 Seroprevalence Study Update

We had hoped to establish a seroprevalence study, and had applied for research funding to enable us to follow through a cohort of physicians and staff to measure the prevalence of past COVID-19 infection, then any changes over time. We obtained ethics approval, but sadly, we did not succeed in persuading the granting agency. Our concept was good: others have been funded for similar projects, but their samples will be different, and larger.

Many of you had volunteered to participate and we had started to gather samples, but failure to obtain funding, and restrictions on antibody testing within Alberta Provincial Laboratories mean that we will be unable to continue this study. Thus we are sending results to those of you who sent in samples, but we cannot follow through with further monitoring. We are grateful to those physicians and staff who joined us on this project, and apologise for causing inconvenience.

Publications of Interest

We summarize recent papers that may be of interest to sentinels. There is a lag period from paper submission to publication, even in this era of very fast publication. Consequently, some information may be out of date already.

Influenza vaccination and the evolution of evidence-based recommendations for older adults: A Canadian perspective

M. K. Andrew and S. A. McNeil, Influenza vaccination and the evolution of evidence-based recommendations for older adults: A Canadian perspective, Vaccine, <https://doi.org/10.1016/j.vaccine.2020.09.011>

Adults aged 65 and older are at high risk of complications associated with Influenza. Given this, older adults are considered an important target population for public health prevention efforts. This paper describes how recommendations have been made and updated as evidence has emerged. The Public Health Agency of Canada's (PHAC) 'FluWatch' is responsible for the collection of influenza surveillance data from clinical and laboratory-based reporting, as well as both outpatient sentinel surveillance and hospital-based active surveillance networks.

The Serious Outcomes Surveillance network, based at Dalhousie performs influenza surveillance in hospitals across Canada, and compliments the Community Sentinel Practitioner Surveillance Network (SPSN) based in Vancouver that Tarrant is part of. The SOS has a particular focus on understanding vaccine effectiveness in the elderly, since they are under-represented in the community surveillance,

because they do not present in typical ways, yet are admitted to hospital more often. Over half do not fulfil the criteria for influenza-like illness. After admission, many are unable to return home, since the illness exacerbates frailty.

Immunization appears to reduce these adverse events, and in the absence of comparative trials, observational studies try to assess the relative effectiveness of the different types of vaccines. Higher dose vaccines or those with adjuvants provide better protection. There are current efforts to develop universal influenza vaccines which can provide long-term protection against multiple strains of Influenza variants.

At this time, four seasonal influenza vaccines are approved for older adults by Health Canada. Vaccine delivery is determined both federally and provincially given the infrastructure of the Canadian healthcare system. Provinces choose which vaccine to administer each season, and prioritise vaccinating older adults. In 2019/20 Alberta chose standard dose quadrivalent vaccine, while other provinces selected high dose tetravalent vaccine for adults over 65 and in long term care.

Influenza Updates

Alberta Update:

From August 23rd, 2020 until January 09, 2021 there have been no lab-confirmed influenza cases in Alberta. During this same time period, 1,514,141 people have received an Influenza Immunization dose in the province. This equates to approximately one-third of Alberta's population receiving a vaccination.

Source: AHS

Canada Update (as of January 16th, 2021):

Despite continued, even increased, monitoring across the country, influenza activity has remained extremely low for this time in the reporting season. So far this season, 55 influenza-positive specimens have been reported. When compared to the average of 18,130 influenza detections over the course of the past six reporting seasons, this current number is exceptionally lower. For reporting week 02, the influenza percent positivity was 0.02%, compared to an average 23% over the past six seasons.

Since the start of the 2020-21 season, 0 laboratory-confirmed influenza-associated hospitalizations have been reported.

This low circulation of Influenza this season has led to the National Microbiology Laboratory not receiving any influenza viruses for strain characterization. It was impossible to undertake mid-season vaccine effectiveness estimates, and it may not be possible to provide any vaccine effectiveness estimates for the 2020-21 season given this continued low influenza circulation.

Source: FluWatch and PHAC

WHO Influenza Update (as of January 18, 2021, data up to January 03, 2021)

Influenza activity remains below inter-seasonal levels in most countries in the temperate zone of the northern hemisphere, despite a high increase in testing. Hygiene and physical distancing measures implemented to reduce SARS-CoV-2 transmission are likely to have played a role in reducing influenza virus transmission.

From December 21 2020 to January 3 2021, WHO laboratories tested more than 200,863 specimens from 82 different countries. Of these specimens, 409 were positive for influenza viruses; 29.6% Influenza A and 70.4% Influenza B - a reverse of the usual predominance of Influenza A. Of the sub-typed Influenza A viruses, 54.3% were Influenza A(H1N1)pdm09 and 45.7% were A(H3N2). Of the characterized B viruses, all of them belonged to the B-Victoria lineage.

Source: World Health Organization



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