



## NWT Seasonal Influenza Program Guidelines: 2021-2022

The seasonal influenza vaccine is planned for implementation no earlier than the third week of October 2021.

Human influenza viruses change and mutate continuously and, as a result, vaccines are updated annually to provide protection from the current circulating viruses. This year one quadrivalent seasonal influenza vaccine product will be available. The quadrivalent product, provided for everyone six months of age and older, is Flulaval® Tetra Quadrivalent (pre-filled syringe and multi-dose vial formats). This vaccine product will include the following influenza viral strains:

- **A/Victoria/2570/2019 (H1N1)pdm09-like virus**
- **A/Cambodia/e0826360/2020 (H3N2)-like virus**
- **B/Phuket/3073/2013-like virus from B/Yamagata lineage**
- **B/Washington/02/2019-like virus from B/Victoria lineage**

High-dose quadrivalent influenza vaccine (Fluzone® High-dose) will be the preferred product for those who reside in a long-term care facility **and** who are also 65 years and older –both criteria to be met for receiving the high dose vaccine. Fluzone® High-Dose includes the following strains:

- **A/Victoria/2570/2019 (H1N1) pdm09-like strain**
- **A/Cambodia/e0826360/2020 (H3N2)-like strain**
- **B/Washington/02/2019-like strain**
- **B/Phuket/3073/2013-like strain**

### Vaccine Products 2021-2022:

#### NWT Vaccine Products for 2021-2022

Age Group	Influenza Vaccine Product	Type	Comments
Six months of age and older	Flulaval® Tetra Quadrivalent (GlaxoSithKline)	IIV4-SD	Available in multidose vials (10 doses) and in single dose pre-filled syringe
65 years and older and who live in a long-term care facility (preferred vaccine for this group)	Fluzone® High-Dose (Sanofi Pasteur)	IIV-HD	A high-dose vaccine available in single-dose prefilled syringes

**NOTE: FluMist® Quadrivalent (AstraZeneca) is not publicly funded for use in the NWT for the 2021-2022 influenza season.**

Egg allergy continues to no longer be a contraindication for any of the influenza vaccine products.

The abbreviations used by NACI have been recently updated to better describe the defining features of the various types of influenza vaccines. (NACI 2021-22). Documents related to influenza vaccine used in the NWT and the electronic medical record (EMR) will be updated to reflect these changes:

**NACI Influenza Vaccine Standard Abbreviations updated 2021-2022:**

Influenza Vaccine Category	Formulation	Type	NACI abbreviation*
Inactivated influenza vaccine (IIV)	Quadrivalent (IIV4)	High dose, unadjuvanted, IM administered, egg-based	IIV4-HD
		Standard dose unadjuvanted, IM administered, egg based	IIV4-SD

\*numeric suffix denotes the number of antigens contained in the vaccine

Health care professionals who will be administering publicly funded influenza vaccine must:

- Be licensed to practice in the NWT,
- Have completed the Education Program on Immunization Competency (EPIC), and
- Be competent to administer vaccinations as per the amended clinical practice information notice [#152: NWT Mandatory Education Program on Immunization Competency](#)

**Guidance Documents:**

It is the responsibility of all vaccine administrators to review the following documents before the administration of influenza vaccines:

- [Canadian Immunization Guide Chapter on Influenza and Statement on Seasonal Influenza Vaccine for 2021-2022](#)
- Vaccine product monographs can be found on the HSS Health Professional website <https://www.hss.gov.nt.ca/professionals/en/services/seasonal-influenza-program-package> or downloaded from the Health Canada Drug database: [Drug Product Database Online Query](#)

When there is a conflict of information between the vaccine product monograph and the NACI statement, you are advised to follow the NACI statement or contact the Communicable Disease Control Unit at the Communicable Disease and Afterhours Line (867-920-8646) for guidance.

## **Co-Administration of Influenza vaccine and COVID-19 Vaccine:**

**NACI recommends that COVID-19 vaccines may be given concomitantly with, or at any time before or after, other vaccines including live, non-live, adjuvanted, or unadjuvanted vaccines**

The concomitant administration of COVID-19 with non-COVID-19 vaccines will facilitate influenza vaccine programs in the fall and winter months and other routine vaccine programs that were disrupted due to the COVID-19 pandemic. Informed consent should include a discussion of the benefits and risks given the limited data available on administration of COVID-19 vaccines with other vaccines.

If more than one type of vaccine is administered at a single visit, they should be administered at different injection sites using separate injection equipment.

## **Influenza vaccination recommendation:**

Vaccination is publicly funded and recommended annually for all NWT residents six months of age and older. Unless the Office of the Chief Public Health Officer (OCPHO) advises otherwise, **plan to vaccinate no earlier than the third week of October.**

High-risk groups are particularly vulnerable to influenza and should be vaccinated as a priority. In addition to planned public flu clinics, every opportunity should be taken to vaccinate high-risk and vulnerable populations including when this group of individuals are presenting for care at hospitals, emergency departments, doctor's offices, at outreach centers and programs, during home visits and during regularly scheduled appointments.

### **High-risk groups include:**

- All children 6–59 months of age
- Adults and children with the following chronic health conditions:
  - Cardiac or pulmonary disorders (includes bronchopulmonary dysplasia, cystic fibrosis, and asthma);
  - Diabetes mellitus and other metabolic diseases;
  - Cancer, immune compromising conditions (due to underlying disease, therapy, or both, such as solid organ transplant or hematopoietic stem cell transplant recipients);
    - Renal disease;
    - Anemia or hemoglobinopathy;
    - Neurologic or neurodevelopment conditions (includes neuromuscular, neurovascular, neurodegenerative, neurodevelopmental conditions, and seizure disorders [and, for children, includes febrile seizures and isolated developmental delay], but excludes migraines and psychiatric conditions without neurological conditions);
    - morbid obesity (BMI of 40 and over); and

- Children 6 months to 18 years of age undergoing treatment for long periods with acetylsalicylic acid, because of the potential increase of Reye's syndrome associated with influenza.
- All pregnant women;
- People of any age who are residents of nursing homes and other chronic care facilities;
- Adults 65 years of age and older; and
- Indigenous peoples.

**People capable of transmitting influenza to those at high risk:**

- Health care and other care providers in facilities and community settings who, through their activities, are capable of transmitting influenza to those at high risk;
- Household contacts, both adults and children, of individuals at high risk, whether or not the individual at high risk has been vaccinated: - household contacts of individuals at high risk; - household contacts of infants less than 6 months of age, as these infants are at high risk but cannot receive influenza vaccine;
  - Members of a household expecting a newborn during the influenza season;
- Those providing regular child care to children 0–59 months of age, whether in or out of the home; and
- Those who provide services within closed or relatively closed settings to people at high risk (e.g., crew on a ship)

**Others:**

- Those who provide essential community services; and
- Those who are in direct contact with poultry infected with avian influenza during culling operations.

**Immunization of Health Care Workers (HCW):**

HCWs include any person, paid or unpaid, who provides services, works, volunteers or trains in a hospital, clinic or other healthcare facility. (*NACI Statement on Seasonal Influenza Vaccine for 2021-2022*).

Each facility and HSS Authority should have a policy and procedure referring to immunization of HCWs and HCWs coming to work when sick.

HSS Authorities must keep track of health care workers who have and have not been vaccinated with influenza vaccine each year. They must be able to provide the list upon request from the OCPHO in the event of a facility outbreak.

“Given the potential for HCWs and other care providers to transmit influenza to individuals at high risk and knowing that vaccination is the most effective way to prevent influenza, NACI recommends that, in the absence of contraindications, HCWs and other care providers in facilities and community

settings should be vaccinated against influenza annually. NACI considers the receipt of influenza vaccination to be an essential component of the standard of care for all HCWs and other care providers for their own protection and that of their patients. This group should consider annual influenza vaccination as part of their responsibilities to provide the highest standard of care.” (*NACI Statement on Seasonal Influenza Vaccine for 2021-2022*)

## **Vaccine Ordering:**

Influenza vaccine product is procured through the National Bulk Purchasing Agreement. All vaccine products must be ordered through an NTHSSA regional pharmacy located at Stanton Territorial Hospital or Inuvik Regional Hospital.

To prevent unnecessary wastage of the vaccine, regional pharmacies have been provided with a list of a designated amount of influenza vaccine for each community’s initial order. Health centers and public health units can order more vaccine if, after the first round of immunization clinics, you have confirmed the need for more product.

Now is a good time to ensure HSS Authority vaccine storage and handling policies and procedures are up to date, and to review these guidelines with your staff especially if you will be conducting off-site clinics in the community. See the Canadian Immunization Guide and the Public Health Agency of Canada 2015 Vaccine Storage and Handling Guidelines:

- [Canadian Immunization Guide: Part 1 - Key Immunization Information](#)
- [National Vaccine Storage and Handling Guidelines for Immunization Providers - 2015](#)

## **Mandatory Reporting:**

The following **MUST** be reported to the OCPHO:

- All influenza vaccinations given must be documented in the EMR in communities with EMR capability. For those communities not yet on the EMR include influenza vaccines with the monthly immunization registry reporting.
- All suspect or confirmed cases of influenza:
  - a) Individual cases and outbreak activity must be reported within 24 hours to the OCPHO.
  - b) Ensure you are using the current NWT Influenza Report Form included in this package and found online: [Communicable Disease | HSS Professionals](#).
- Serious or unexpected Adverse Events Following Immunization (AEFI) including:
  - a) An unexpected event not listed in the available product monograph but may be due to immunization;
  - b) A change in frequency of a known AEFI;
  - c) Guillain-Barré Syndrome (GBS) that occurs within six weeks of receiving the vaccine; or

d) Oculo-Respiratory syndrome (ORS).

- The AEFI reporting form is available in the EMR and also provided in this link to the Public Health Agency of Canada (PHAC): [Adverse Event Following Immunization](#).

### **Antivirals:**

- The antiviral, Oseltamivir (TAMIFLU®), is now a **MUST STOCK** item according to the [April 2018 NWT Formulary](#).
- For more information on antiviral use during an outbreak, follow the guidance provided by the [Association of Medical Microbiology and Infectious Disease Canada \(AMMI\)](#) and in the “[NWT Influenza Outbreak Management Protocol for Long Term Care Facilities \(LTCF\)](#)”.

### **Outbreak Management including Long Term Care Facilities:**

For guidance on influenza outbreak management in Long Term Care Facilities, see the [NWT Influenza Outbreak Management Protocol for Long Term Care Facilities](#) included in this package.

Each season, all long term care facilities must have a process in place to keep track of influenza vaccine uptake in both residents and staff. This list must be available upon request by the CPHO or designate in the event of an outbreak.

### **Attachments and Additional Information:**

- NWT Influenza Report Form: [Communicable Disease | HSS Professionals](#).
- The Public Health Agency of Canada Report of Adverse Events Following Immunization Form (AEFI): [Adverse Event Following Immunization \(AEFI\)](#).
- [NWT Influenza Outbreak Management Protocol for Long-Term Care Facilities and Home Care](#)
- NACI/Canadian Immunization Guide statement on Seasonal Influenza Vaccine for 2021-2022: <https://www.canada.ca/content/dam/phac-aspc/documents/services/publications/vaccines-immunization/canadian-immunization-guide-statement-seasonal-influenza-vaccine-2021-2022/naci-2021-2022-statement.pdf>
- [Influenza Immunization Coverage, NWT September 2020 - March 2021](#)
- Influenza Vaccine Product Monographs (2021-2022):
  - a) [Flulaval Tetra Quadrivalent](#)
  - b) [Fluzone® High-Dose](#)
- [Vaccine Administration Summary](#)
- National Vaccine Storage and Handling Guidelines: [National Vaccine Storage and Handling Guidelines for Immunization Providers - 2015](#)

- Association of Medical Microbiology and Infectious Disease Canada: Guidelines for the use of Antivirals [AMMI Canada](#)
  - a. [Tamiflu® Product Monograph](#)

## **Additional Information for the General Public:**

Influenza program promotional materials for HCWs and the general public can be downloaded, printed or ordered from the following approved locations:

- NWT Influenza vaccine information sheets:  
[Immunization / Vaccination | Health and Social Services](#)
- NWT Influenza Program on the Topics page:  
<https://www.hss.gov.nt.ca/en/services/influenza-flu>
- NWT Influenza immunization clinics available to the public:  
<https://www.nthssa.ca/en/services/2020-seasonal-flu-clinics>
- Public Health Agency of Canada/Immunize.ca promotional material can be found at these links:  
<https://www.canada.ca/en/public-health/services/diseases/flu-influenza/flu-influenza-awareness-resources.html>
- Immunize Canada:  
<https://immunize.ca/influenza-campaign>
- Become a Flu Watch volunteer:  
<https://www.canada.ca/en/public-health/services/diseases/flu-influenza/fluwatcher.html>