

# PANDEMIC PULSE

Expert Analysis of the Current Pandemic Influenza Threat



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**Global Consulting**

*Emergency Preparedness Specialists*



**Global Medical Services**

## Monthly Feature

### Younger Women and the H1N1 Virus

According to a new study, 72% of those who have fallen critically ill and died of H1N1 influenza in Canada have been younger women. The research, published in the Journal of the American Medical Association, highlights that a large majority of those who became seriously ill had no serious underlying health conditions. One possible reason for greater susceptibility in these women has been identified as pregnancy, which is a risk factor seen in some severe H1N1 cases. The study also suggested that a smaller lung capacity and obesity were shown to be additional risk factors for severe H1N1 disease.



Pregnant women have been identified as a high risk group due to the fact that their immune systems become altered during pregnancy, increasing the chance of infection. Adverse pregnancy outcomes have been reported following previous influenza pandemics, with increased rates of spontaneous abortion and pre-term birth reported. Early treatment with influenza antiviral medications, without waiting for test results to confirm the virus, is recommended for pregnant women with suspected influenza illness. Also, both public health agencies have strongly recommended that pregnant women receive the H1N1 vaccine.

However, in both the U.S. and Canada, there have been delays in providing certain vaccines to pregnant women. In the U.S., the first dose of the vaccine was in the nasal spray form, which was not recommended for pregnant women because it contains a live, attenuated form of the virus. Canadian health authorities have ordered 1.8 million doses of adjuvant-free vaccines for pregnant women but reports suggest that these vaccines may be further delayed.

## Table of Contents

### Monthly Feature

Younger Women and the H1N1 Virus .....1

### National News

Canada and the Second H1N1 Wave .....2

\$2.4 Million for H1N1 Research .....2

British Columbia Hit Hard by H1N1 .....2

### International News

Worldwide Pandemic Update .....3

Severe Flu in Children .....3

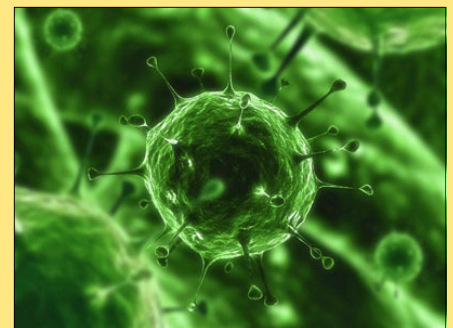
Obama Declares National Emergency .....3

### Vaccine and Antiviral News

H1N1 Vaccinations Begin in Canada .....4

Delays in Vaccine for Pregnant Women .....4

US Vaccine Supply Delayed .....4



National News

Pandemic Pulse

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<http://h1n1flu2009.blogspot.com/>



**Canada enters 2nd wave of the H1N1 pandemic**

**CBC**– 23 October 2009

<http://www.cbc.ca/canada/toronto/story/2009/10/23/h1n1-second-wave-canada.html>



Federal Health Minister Leona Aglukkaq has announced that Canada has officially entered the second wave of the H1N1 flu pandemic. The move into the second pandemic phase means that a drop in flu cases won't occur until enough people have been inoculated against the H1N1 influenza virus — either through vaccination or by contracting the virus. The

announcement was based on several increasing trends: the number of people testing positive for the virus, reported hospitalizations for flu-like illness, more people coming into doctor's offices with flu symptoms, and increase in sales of antiviral medications for flu. Total fatalities in Canada from the H1N1 virus have reached 87.

**\$2.4 million for H1N1 research**

**CBC**– 14 October 2009

<http://www.cbc.ca/health/story/2009/10/14/h1n1-research-funding.html>

Health Minister Leona Aglukkaq has announced funding of \$2.4 million over two years to support five new research projects on the H1N1 flu virus. The research will be funded through the Canadian Institutes of Health Research. The projects include research into high risk groups, complications in pregnant women, new drug treatments for severe infections, and immune-based preventive and treatment strategies.

**British Columbia hit hard by the H1N1 virus**

**Vancouver Sun**– 17 October 2009

<http://www.vancouversun.com/health/rate+positive+H1N1+tests+much+higher/2116063/story.html>

B.C. leads the nation in positive tests for the H1N1 virus. Provincial Medical Health Officer Dr. Perry Kendall says the rate of positive tests for the potentially deadly flu in B.C. is “several times higher than in the rest of Canada.” In B.C., about 50 per cent of the samples for H1N1 are proving positive compared to other provinces where only five to 10 per cent of the samples are proving positive. Since April, there have been 199 severe H1N1 cases in B.C. and twelve deaths, although in a large proportion of those, there were underlying medical conditions.



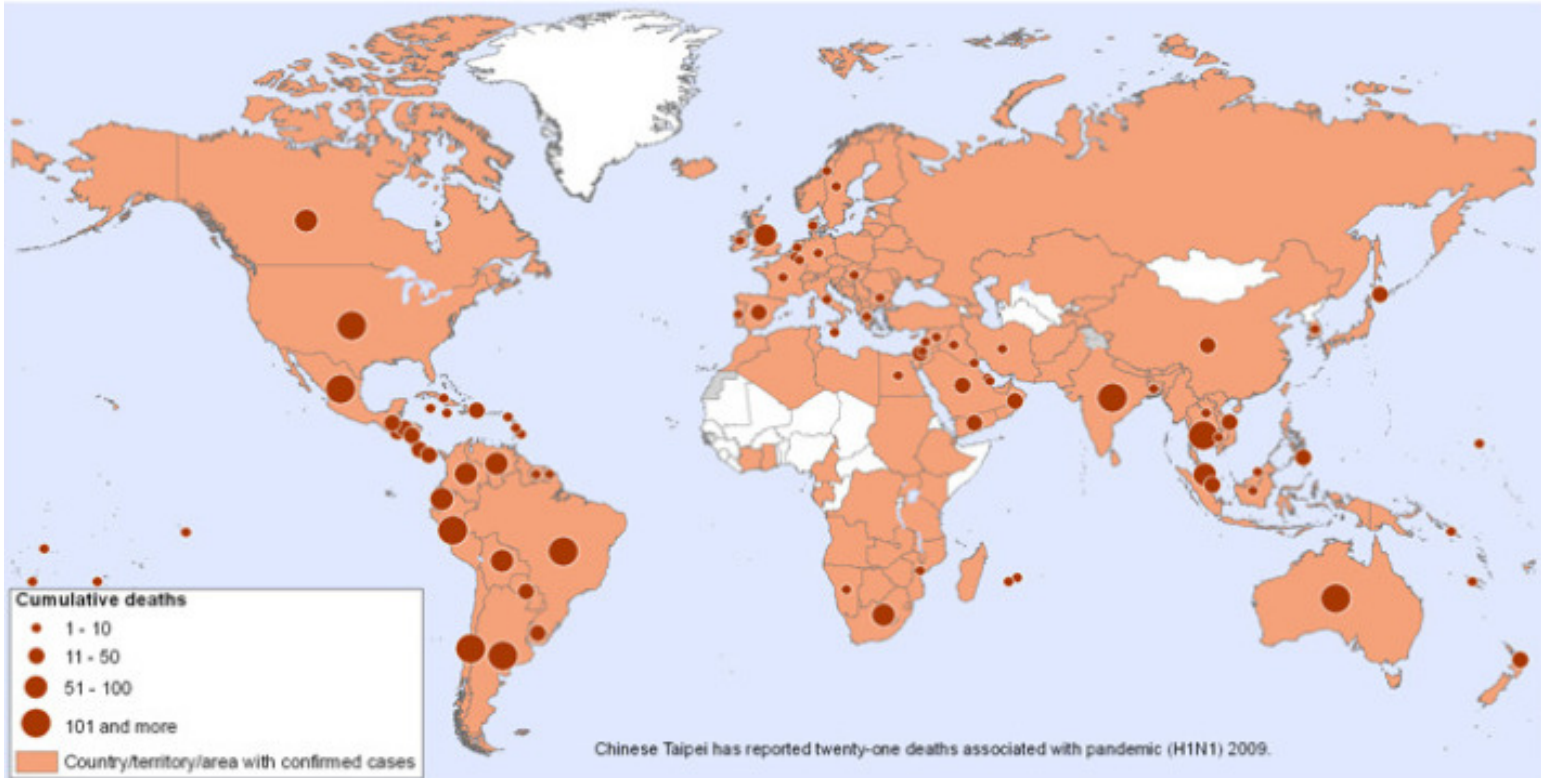
## International News

### Worldwide pandemic update

**World Health Organization** – 23 October 2009

[http://www.who.int/csr/don/2009\\_10\\_23/en/index.html](http://www.who.int/csr/don/2009_10_23/en/index.html)

In North America, the U.S. is still reporting nationwide rates of Influenza-Like Illness (ILI) well above baseline rates with high rates of pandemic H1N1 2009 virus detections in clinical laboratory specimens. Canada reports increases in ILI rates for the fourth straight week but the highest level of activity is in the western province of British Columbia. In Belgium, Israel, the Netherlands, Norway, and parts of the United Kingdom, consultation ILI rates are above baseline levels. Rates of respiratory illness in Eastern Europe and Northern Asia are increasing but are not yet at levels normally seen in an influenza season (baseline levels are not defined in many countries of the area).



### Severe flu in children

**CTV**– 16 October 2009

[http://www.ctv.ca/servlet/ArticleNews/story/CTVNews/20091013/severe\\_091013/20091013?hub=Health](http://www.ctv.ca/servlet/ArticleNews/story/CTVNews/20091013/severe_091013/20091013?hub=Health)

Young children with flu-like symptoms should go to a hospital as soon as possible. Common signs of a serious infection are fast or troubled breathing, bluish skin color, lack of thirst, irritability (the child does not want to be held), and improvement of symptoms, then a return to fever and worse cough. Approximately 1/3 of H1N1 pediatric deaths were with no known underlying conditions.

### Obama declares H1N1 pandemic a national emergency

**Globe and Mail**– 26 October 2009

<http://www.theglobeandmail.com/news/world/obama-declares-swine-flu-emergency/article1337891/>

Responding to a dramatic surge in the number of H1N1 cases, President Barack Obama has declared the H1N1 influenza a national emergency. This will facilitate setting up tents in hospital parking lots to establish extra emergency room care and creating health clinics in school gymnasiums or community centres. The death toll in the U.S. due to pneumonia and influenza has risen to 2,827.

Vaccine and Antiviral News

H1N1 Quick Links

**Public Health Agency of Canada:**

H1N1 Influenza Information

<http://www.phac-aspc.gc.ca/alert-alerte/h1n1/index-eng.php>

**Health Link BC:**

Flu Symptom Checker

<http://www.healthlinkbc.ca/kbaltindex.asp>

**Google:**

Global Flu Trends

[http://www.google.org/flutrends/intl/en\\_us/](http://www.google.org/flutrends/intl/en_us/)

**World Health Organization:**

Worldwide Pandemic Updates

<http://www.who.int/feeds/entity/csr/disease/swineflu/en/rss.xml>

Global Medical Services

Global Medical Services is a leader in the development of medical educational workshops aimed at providing physicians, nurses, and other health care professionals with the latest information and skills enabling them to provide optimum care. Our programs meet and exceed all recommendations from the Heart and Stroke Foundation, Health Canada, WorkSafeBC, and PCTIA.

Certifications

- Advanced Cardiac Life Support (ACLS)
- Pediatric Advanced Life Support (PALS)

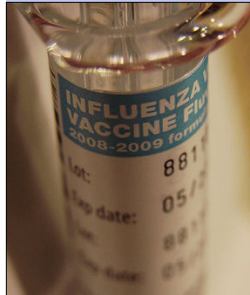
Workshops

- Critical Interventions
- Procedural Sedation
- Electrocardiogram Interpretation
- AED – Cardiac Arrest Management

H1N1 vaccinations begin across Canada

CBC- 26 October 2009

<http://www.cbc.ca/canada/story/2009/10/26/h1n1-vaccine194.html>



The H1N1 influenza vaccine is now available across most of Canada to health care workers and people considered at a higher risk for complications from the respiratory illness. Eligible groups include individuals under the age of 65 who have chronic medical conditions, as well as pregnant women, children under the age of five and people living in First Nations or remote and isolated communities. Clinical trials suggest that up to 85 per cent of healthy adults who are vaccinated will develop immunity within 10 days. Vaccinations are expected to continue throughout November and December.

Delay in vaccines for pregnant women

The Ottawa Star– 26 October 2009

<http://www.thestar.com/news/canada/article/716305--h1n1-shot-for-pregnant-women-to-arrive-early?bn=1>

The federal government has bought 200,000 doses of unadjuvanted vaccine from an Australian company so that pregnant women who want to use that version of the shot can get it earlier. The doses are expected to arrive early next week. The government has ordered 1.8 million doses of the unadjuvanted H1N1 vaccine from GlaxoSmithKline but they are not expected to arrive until late November. The doses currently being administered contain an adjuvant, a mixture of water, fish oil, and vitamin E that stretches vaccine supply by reducing the amount of antigen needed in each dose.

US vaccine supply delayed

CIDRAP – 23 October 2009

<http://www.cidrap.umn.edu/cidrap/content/influenza/swineflu/news/oct2309vaxsupply.html>

Most of Novartis's doses may not reach the US until early in 2010 and a European regulatory recommendation may have implications for the global vaccine supply. Novartis has a contract to supply about 35% of the total projected US supply of about 251 million doses. Only 16.1 million doses have become available. The EU's drug regulatory agency continues to recommend a two-dose regimen for H1N1 vaccines, despite data showing one-dose efficacy. The recommendation raises the possibility of a major increase in European demand for the vaccines, reducing US supply.