



Aug 2009 ► Volume 1, Number 4



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Welcome to the CanPREP Pandemic Digest, a monthly summary of key pandemic headlines, events, and learning opportunities for collaborators and students. If you have questions, comments or contributions, please contact us at canprep@gmail.ca. Previous editions are available at the [CanPREP archives](#).

CanPREP NEWS AND UPDATES

Joint Centre for Bioethics Public Symposium – September 23, 2009

The University of Toronto Joint Centre for Bioethics (JCB) is planning a public symposium on the ethical issues raised by the H1N1 pandemic on September 23, 2009 at the JCB.

The H1N1 pandemic has presented a myriad of ethical challenges, including the duty to care of health care providers, allocation of scarce resources, risk communication and the use of restrictive measures. CanPREP is currently addressing these pressing challenges through its research. At present, we have been examining the views of Canadians on these ethical issues through a national telephone survey and a series of town hall meetings across the country. We are also conducting conceptual research on issues such as public trust and vulnerability.



University of Toronto
Joint Centre for Bioethics

The agenda for the Public Symposium includes two sessions, each consisting of a CanPREP presentation, a panel discussion, and a question/answer period. Panelists will include representatives from the Public Health Agency of Canada, Ontario Agency for Health Protection and Promotion, Aboriginal communities, Toronto Public Health, the community care sector, Ontario Ministry of Health and Long-Term Care and the Canadian Medical Association.

The CanPREP team is preparing a series of 'white papers' on the ethical challenges posed by pandemic influenza which will be available at the symposium. These 'white papers' will be released to the media in advance and members of the media will be covering the symposium.

In addition to the media, the symposium will be attended by health care providers, professional colleges, community organizations and the general public. The symposium will also be available via a live online broadcast.

Further information on the Public Symposium and registration will be posted on the CanPREP website. (www.canprep.ca). Next month's Digest will also be featuring the Public Symposium.

Listening to the Elderly

In order to gain the perspectives of Canadian citizens on ethical issues in pandemic influenza, the CanPREP project has repeatedly been involved in public deliberations across the country. Such deliberations have taken on renewed importance with the recent activity of the H1N1 pandemic influenza, and as such, CanPREP is beginning to set up focus groups for particular subsets of the population in Canada.

To better prepare for such deliberation, members of the CanPREP team convened an expert group of older adults on July 30th, 2009. Representatives from the Elders Health Coalition, the Ontario Nurses Association, The Ontario Association of Non-Profit Homes and Services for Seniors, Canadian Pensioners Concerned, Care Watch and the Ontario Coalition of Senior Citizens met to review potential questions on ethical issues in pandemic influenza thought to be relevant to the older individuals. The two hour session was informative and lively, and will result in an updated question guide for use in focus groups in the coming months. A summary report is being completed and will be posted to the CanPREP website in the upcoming weeks.

The CanPREP team is committed to such collaboration with community stakeholders as a model for the development of research that best reflects the needs of the Canadian population.

White Paper Preparations

The CanPREP team is finalizing a number of 3-page white papers that will be released at the **Public Symposium, at the Joint Centre for Bioethics, on September 23rd**. The papers will be on priority setting, duty to care, restrictive measures, risk communication, trust, vaccine, research ethics and global governance. The content of each paper will include background information, CanPREP data from Town Halls, surveys, etc., procedural guidelines, and policy recommendations

PANDEMIC NEWS

[WHO Disease Outbreak News: Swine influenza - Daily Situation Update](#)

World Health Organization

Daily Influenza A (H1N1) Update. Update includes worldwide confirmed cases and deaths, along with WHO travel recommendations.

[ProMED-Mail – The Program for Monitoring Emerging Diseases](#)

A global electronic reporting system for outbreaks of emerging infectious diseases & toxins, open to all sources. Subscribe to daily email updates. ProMED-mail is a program of the [International Society for Infectious Diseases](#).

[Cases of H1N1 Flu Virus in Canada](#)

Public Health Agency of Canada

A detailed daily update of swine flu cases in Canada – updated bi-weekly.

[Pandemic flu: will there be a second wave?](#)

BMJ News

Rates of swine flu are leveling off in the northern hemisphere. Will there be a second wave this winter, and if so how bad will it be? Over the past 14 or so pandemics since 1510, pandemic flu has never infected the entire population at once, and although it tends to recur after a first wave, it eventually adopts the familiar seasonal flu pattern.

[Should Canada share its swine flu drugs?](#)

The Toronto Star

“Dr. Ross Upshur, director of the Joint Centre for Bioethics at the University of Toronto, says ‘wealthier countries have an ethical duty to help poorer nations out with health crises like the swine flu pandemic.’”

[In a pandemic, where's the moral ground?](#)

The Globe and Mail

As medical ethicists confront the difficult issues around swine flu, experts say ordinary Canadians should get in on the debate. The Globe and Mail interviews Dr. Peter Singer, a bioethicist and director of the McLaughlin-Rotman Centre at the University of Toronto, and Dr. Ross Upshur, director of the Joint Centre for Bioethics at the University of Toronto.

[Telephone triage and the flu pandemic \(audio podcast\)](#)

BMJ Pandemic Flu

Dr. Helen Morant talks to Dr. Kate Adams and Dr. Brian McKinstry about the pressures of handling large numbers of phone calls and how to conduct a safe telephone consultation.

[Should healthcare workers have the swine flu vaccine?](#)

BMJ Editorials

Healthcare workers in England are being urged to be vaccinated against pandemic and seasonal flu as soon as possible to protect themselves and their patients – however, many unanswered questions still remain.

[The Ethics of Pandemic Planning – audio podcast](#)

CBC – Maritime Noon

Dr. Jennifer Gibson from the Joint Centre for Bioethics, University of Toronto and Dr. Francoise Baylis from Dalhousie University on CBC Radio One talk about the ethical issues surrounding pandemic planning.

NEW PUBLICATIONS (via .PDF links)

O'Malley P, Rainford J, Thompson A. [Transparency during public health emergencies: from rhetoric to reality](#). WHO Bulletin. 2009;87:614-18.

Yamada T. [Poverty, Wealth, and Access to Pandemic Influenza Vaccines](#). The New England Journal of Medicine. 2009 Aug 12. [Epub ahead of print].

Simonds AK, Sokol DK. [Lives on the line? Ethics and practicalities of duty of care in pandemics and disasters](#). Eur Respir Journal. 2009;34:303-9.

INER Working Group on Influenza. [Pneumonia and Respiratory Failure from Swine-Origin Influenza A \(H1N1\) in Mexico](#). The New England Journal of Medicine. 2009 Jun 29;361.

Flahault A, Vergu E, Boelle PY. [Potential for a global dynamic of Influenza A \(H1N1\)](#). BMC Infectious Disease. 2009 Aug;9:129.

Tarantola D, Amon J, Zwi A, Gruskin S, Gostin L. [H1N1, public health security, bioethics, and human rights](#). The Lancet. 2009 Jun 20;373(9681):2107-8.

Ong CWM, Ho KY, Hsu LY, Lim AYT. [Reacting to the emergence of swine-origin influenza A H1N1](#). The Lancet Infectious Diseases. 2009 Jul;9(7):397-8.

Merler S, Ajelli M, Rizzo C. [Age-prioritized use of antivirals during an influenza pandemic](#). BMC Infectious Disease. 2009 Jul;9:117.

Cutler et al. [Investigation of the first cases of human-to-human infection with the new swine-origin influenza A \(H1N1\) virus in Canada](#). CMAJ. 2009 Aug;181(34):159-63.

Bernard H, Fischer R, Mikolajczyk RT, et al. [Nurses' Contacts and Potential for Infectious Disease Transmission](#). Emerging Infectious Diseases. 2009 Sep. [Epub ahead of print]

Zhang H, Chen L. [Possible origin of current influenza A H1N1 viruses](#). The Lancet Infectious Diseases. 2009 Aug;9(8):456-7.

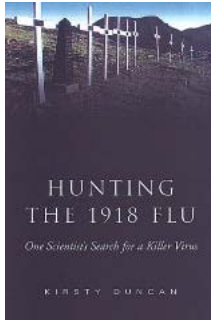
Katz R. [Use of Revised International Health Regulations during Influenza A \(H1N1\) Epidemic, 2009](#). Emerging Infectious Diseases. 2009 Aug;15(8):1165-70.

MacDonald N. [H1N1 influenza vaccine: Global access for a global problem](#). CMAJ. 2009 Aug;181(34):123.

Peiris JSM, Poon LLM, Guan Y. [Emergence of a novel swine-origin influenza A virus \(S-OIV\) H1N1 virus in humans](#). Journal of Clinical Virology. 2009 Jun;45(2009):169-73.

Pronovost PJ, Faden RR. [Setting Priorities for Patient Safety; Ethics, Accountability, and Public Engagement](#). JAMA. 2009 Aug; 302(8):890-1.

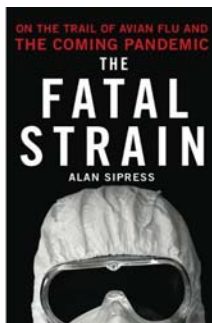
BOOKS



"Hunting the 1918 Flu: One Scientist's Search for a Killer Virus"

Kirsty E. Duncan

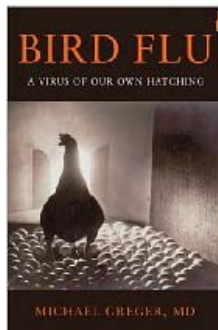
Responding to the sustained interest of a reoccurring pandemic after the Spanish flu, Kirsty Duncan in *Hunting the 1918 Flu* presents a detailed account of her experiences as she organized a multi-national, multi-discipline scientific expedition to exhume the bodies of a group of Norwegian miners, buried in Svalbard, all of whom died from the Spanish flu virus.



"The Fatal Strain: On the Trail of Avian Flu and the Coming Pandemic"

Alan Sipress

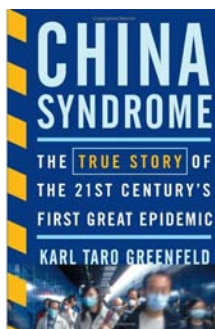
When avian flu began spreading across Asia in the early-2000s, it reawakened fears that had lain dormant for nearly a century. During the outbreak's deadliest years, Alan Sipress chased the virus as it infiltrated remote jungle villages and teeming cities and saw its mysteries elude the world's top scientists. In *The Fatal Strain*, Sipress details how socioeconomic and political realities in Asia make it the perfect petri dish in which the fast-mutating strain can become easily communicable among humans. Once it does, the ease and speed of international travel and worldwide economic interdependence could make it as destructive as the flu pandemic of 1918.



"Bird Flu: A Virus of Our Own Hatching"

Michael Greger

The influenza virus has existed for millions of years as an innocuous intestinal virus of wild ducks. What turned a harmless waterborne duck virus into a killer? In *Bird Flu*, Dr. Michael Greger traces the human role in the evolution of this virus, whose humble beginnings belie its transformation into a killer mutant strain with the potential to become as ferocious as Ebola and as contagious as the common cold. In the face of the coming pandemic, Dr. Greger reveals what we can do to protect our families and what human society can do to reduce the likelihood of such catastrophes in the future. Amid the growing panic surrounding this issue, Dr. Greger takes a sobering look at a deadly cycle and offers a solution to ending it.



"China Syndrome: The True Story of the 21st Century's First Great Epidemic"

Karl Taro Greenfeld

Greenfeld's ground zero perspective on SARS brings reportorial immediacy to this chronicle of how epidemiologists realized that the cases of "atypical pneumonia" scattered throughout Asia were the initial wave of severe acute respiratory syndrome, a new strain of avian flu. The author describes his own reactions while trying to keep his family and magazine staff safe in Hong Kong amid growing panic, and muses on how congested urban areas provide a perfect breeding ground for viruses.

FEATURE

Toronto Central Community Care Access Centre

Toronto Central Community Care Access Centre and the current H1N1 pandemic



Toronto Central Community Care Access Centre (CCAC) has taken a leading role in community based pandemic preparedness and response since 2005. The organization's first influenza pandemic plan was implemented in 2006. In May 2009, the first major revisions were made in light of the emergence of the

H1N1 virus. The revisions made in May were just a beginning and Toronto Central CCAC is currently working to make their influenza pandemic plan more detailed and operational with final revisions expected to be completed in August 2009.

At present, the CCAC is faced with several challenges and numerous ethical implications. First is the question of allocating scarce resources. They have attempted to identify what resource challenges their agency may face during a pandemic. There are two areas identified as having the potential to cause considerable disruption to the ability of the organization to function effectively, in the event of a pandemic: personnel and community resources. It has been estimated that up to 35% of CCAC staff may be unable to work at any given time due to illness or as a result of care giving responsibilities. To prepare for these contingencies, they are currently exploring options for the reassignment of staff in order to meet ongoing operational needs. The organization recognizes its obligation to keep clients and families as informed as possible regarding restrictions or limitations to services that would otherwise be provided under normal conditions.

A second ethical challenge facing the Toronto Central CCAC is of balancing employee safety with the need to continue delivering services to clients. CCAC recognizes an organizational obligation to protect their staff and service providers while working in the community, but do not have control over the environment in which they work, and have yet to receive or find information on distribution of vaccines and prophylactic anti-viral treatments to protect employees. At this point, the means for the Ministry of Health and Long-Term Care (MOHLTC) and the local Public Health Department for access to vaccines and prophylactic anti-viral treatment is unclear. The CCAC is doing their best to be transparent with staff as to what they can expect, and plans to communicate information to staff as soon as new information becomes available from the MOHLTC and Toronto Public Health (TPH).

"We will make every effort to meet the needs of those most at risk by assessing and reassessing clients, as circumstances change, and will create processes to ensure delivery of services with the resources we have available."

A third ethical challenge being faced is that of justice and equitable access to services. Identifying clients who are at highest risk or those with the greatest need is essential in order to ensure they receive the necessary services and/or resources. It is recognized that during an influenza pandemic, normal operating procedures for many community based services and organizations will be disrupted, for example 'Meals on Wheels'. CCAC recognizes that it will not be able to meet the needs of all clients during a pandemic, however in order to minimize disruptions and ensure that some or most needs are still being met, it will identify those clients who are at highest risk for being negatively affected by such disruptions.

During an influenza pandemic, Toronto Central CCAC intends to continue providing services to clients as safely and effectively as possible, utilizing the scarce resources in an effective manner. This is increasingly important as Toronto Central CCAC provides services to clients who may otherwise be extremely isolated and vulnerable. Included within their 2009 influenza pandemic plan, the organization plans to facilitate readiness for an influenza pandemic; communicate planned response to clients, staff and stakeholders; maximize the organization's resources around those that are identified as requiring essential services; maximize worker and client caregiver safety; and help take a leadership role in supporting the health system's response to a pandemic.

Currently, Toronto Central CCAC is taking safety measures in order to fully protect and prepare staff and service providers to ensure clients receive continued service. Toronto Central CCAC has provided N95 masks to its entire staff, in addition to goggles, masks, gloves, hand sanitizer, gowns and emergency kits to protect themselves when conducting home visits. Furthermore all staff members have been educated and trained on how to correctly use this equipment.

One of the goals of the Toronto Central CCAC's Pandemic Plan is to take a leadership and support role in facilitating the health system's response to a pandemic; therefore the Toronto Central CCAC has begun to collaborate with other community agencies, Long Term Care Homes and hospitals to facilitate planning for a severe H1N1 breakout within the community. Toronto Central CCAC has developed a community influenza pandemic template plan in order to help facilitate pandemic planning within smaller community agencies that may not have the resources to plan alone. This template includes numerous directives from the federal, provincial and municipal pandemic plans with points of consideration or questions to discuss within their agencies. The Toronto Central CCAC has offered to play a coordinating role in bringing recommendations to the Local Health Integration Networks on how to support community agencies in a pandemic. Furthermore, the Toronto Central CACC is working with TPH to decide on the role that the CCAC will take in supporting TPH run flu assessment centers and the clients they serve.



As a community based organization, Toronto Central CCAC will be impacted at multiple levels in the event of an influenza pandemic. They will be expected to respond to the requirements imposed by public health, as well as acute care facilities, long term care facilities and many of their partner organizations. Moreover, coordinating the flow of information between the stakeholders will be challenging. CCAC has started to develop a protocol and process for establishing a communication chain, in the event of a pandemic influenza, within the overall continuum of care. Although some communication links are already in place, these links may break down during a pandemic due to potential staff reassignment. Most agencies have internal mechanisms established for communicating during a pandemic, but an inter-agency plan must also be in place prior to an emergency.

Along with CanPREP, Toronto Central CCAC seeks to collaborate with as many health care organizations and community agencies as possible. Toronto Central CCAC is a community based organization and to achieve pandemic goals, they need hospitals and health organizations to consider the community health sector in the development of their own pandemic plans. CanPREP hopes to play a role here by emphasizing the importance of this point and the need for ongoing collaboration.

For more information, visit the Toronto Central CCAC website at www.torontoccac.com

Many thanks to Frank Wagner, Tara Tyson, Tom Foreman and Jennifer Nephew for help in the collaboration of this article.

UPCOMING EVENTS AND CONFERENCES

- **Severe H1N1 Disease: Preventing Cases, Reducing Mortality** in Winnipeg, MN, September 2-3, 2009. [<http://www.nml-lnm.gc.ca/icu-h1n1-usi/index-eng.htm>]

The Public Health Agency of Canada is hosting a meeting to bring together national and international critical care and public health experts to discuss the clinical care and management of severe H1N1 disease and to prepare for the anticipated fall pandemic wave.

- **BirdFlu2009: Avian Influenza and Human Health** in Oxford, UK, September 9-10, 2009. [<http://www.libpubmedia.co.uk/Conferences/BirdFlu2009/Home.htm>]

- **American Society for Bioethics and Humanities 11th Annual Meeting** in Washington, DC, October 15-18, 2009. [<http://www.asbh.org/meetings/annual/index.html>]

CanPREP member Diego S. Silva will be presenting CanPREP's National Telephone Survey data and its significance in the current H1N1 pandemic influenza.

- **137th American Public Health Association: Annual Meeting & Exposition** in Philadelphia, PA, November 7-11, 2009. [<http://www.apha.org/meetings/>]

FEEDBACK

Questions or comments? Interested in submitting something to the Digest? Looking to highlight your organization/institution's current pandemic influenza ethics work? [Contact us at canprep@gmail.com](mailto:canprep@gmail.com)