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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.com. Previous editions are available at the [CanPREP archives](#).

CanPREP NEWS AND UPDATES

CanPREP's New Home!

The University of Toronto Joint Centre for Bioethics has moved to the **7th floor of the Health Sciences Building** at 155 College Street. CanPREP will be based out of this location as well. As a result, CanPREP has been able to build a brand new Collaboratory to further enhance collaboration on the project with fellow researchers and collaborating centers.



New Address:

CanPREP c/o Joint Centre for Bioethics
155 College Street, Suite 754
Toronto, Ontario, Canada
M5T 1P8



Latest CanPREP Publications

[*Physicians' Legal Duty to Treat and Legal Right to Refuse Work During a Pandemic*](#) was published in the December 2009 issue of the Canadian Medical Association Journal. This article outlines the legal duty to existing patients, non-patients, and the public. It also mentions the legal rights of physicians to refuse work in unsafe circumstances.

[Vulnerability: A Contentious and Fluid Term](#) was published in the January 2010 issue of The Hastings Center Report. This letter discusses the ethical considerations that remain unaddressed regarding the inclusion and recognition of persons and populations designated as 'vulnerable' in pandemic planning and response. Furthermore, this publication stresses the need for moral deliberation and problem-solving among 'vulnerable' persons to address the issues facing their communities.

[Contextualizing Ethics: Ventilators, H1N1, and Marginalized Populations](#) was published in the January 2010 issue of Health Care Quarterly. This paper discusses challenges in using the ethical principle of utility as the sole determinant of resource allocation during an influenza pandemic. Furthermore, it discusses the scarce allocation of ventilators and highlights current pandemic issues being faced by Aboriginal Canadians.

CanPREP Focus Groups

As mentioned in previous newsletters, CanPREP recently held a number of focus groups to further facilitate public deliberation in pandemic research.

The project held two focus groups engaging older adult populations. These were held on December 8, 2009 in Toronto, ON and on December 15, 2009 in Peterborough, ON. The issues discussed in each group were: priority setting (specifically surrounding the use of age as a criterion); quality of, and the amount of, access to pandemic information; and the potential role of community or informal groups during a more severe pandemic. Both groups were well attended and contained very enthusiastic participants.

On January 15 in Burlington, ON, CanPREP held a focus group with senior managers from Therapy Health Care. Managers attended from the organization's Toronto, Burlington, Hamilton, Guelph, and Halton offices. Therapy Health Care provides physiotherapy, occupational therapy, dietitian, social work, and speech language services to homes, schools, and workplaces.



CanPREP's mission in the Burlington focus group was to take note of the organizations' pandemic experience thus far. How prepared did they feel? What were the greatest challenges? What support would they need in the future? These were just some of the questions discussed with the group of managers.

The CanPREP project hopes that new research questions, and novel direction, will arise from analyzing the data from these focus groups.

CanPREP Prepares to hold its Second Stakeholder Forum

In January of 2009 CanPREP held a Stakeholder Forum where discussion included the ethical principles in pandemic planning, and important practical implications. New research questions and proposals were gathered on this day and CanPREP has been working to address many of them through its research.

As CanPREP shifts its focus from pandemic planning to pandemic response, the project plans to once again bring together key stakeholders on the anniversary of the WHO declaration of the H1N1 pandemic. This forum will aim at discussing lessons learned and next steps in the investigation of ethics in pandemic planning and response.

More information on the Stakeholder Forum happening this summer will be available in future newsletters as the date approaches.

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.

[Canada loans 5 million flu vaccines to Mexico](#)

Global News

"Given that some nations are making contributions out of their stock, one would ask the question why Canada isn't doing the same," said Dr. Ross Upshur, director of the Joint Centre for Bioethics at the University of Toronto. "I think we've got sufficient resources to make a contribution to others on the basis on generosity, solidarity, altruism."

[WHO-led H1N1 vaccine redistribution may be scaled back as countries reassess need](#)

The Canadian Press

"We may want to ask the question why Canada has A, not had any public discussion of this from our political masters, and B, why it seems that we are not good global citizens in that regard," said Dr. Ross Upshur, adding that there is a strong ethical argument for sharing Canada's H1N1 vaccine with other countries.

[UOttawa public health policy expert debunks H1N1 myths](#)

The Gazette Newsletter

"I've been getting calls from two or three reporters a day and I like to help them try to understand a difficult story as best I can," says Dr. Kumanan Wilson, Canada Research Chair in Public Health Policy at uOttawa. "When there's confusion and uncertainty, it's up to the media and media commentators to explain to the audience what is happening."

[H1N1 flu: The fear, the facts, the future](#)

Canada.com

In the first part of a special two-part series, Sharon Kirkey tracks the pandemic's progress and looks at the lives lost and the lessons learned.

[H1N1 Vaccine Loan](#)

The Canadian Press

"If you really want to hold a mirror up to our nation, you might ask the question why we're lending and not just giving," Dr. Ross Upshur, head of the University of Toronto's Joint Centre for Bioethics, said when he heard the news Canada is lending vaccine to Mexico. "What does that say about us? We're not using the vaccine that we have, we've got a surplus, but we're not big enough just to simply give?"

NEW PUBLICATIONS (via .PDF links)

Nie JX, Sahni SS, Sellers CES, Smith MJ, Viens AM, Upshur REG. [Public Engagement on Social Distancing in a Pandemic: A Canadian Perspective](#). American Journal of Bioethics. 2009; 9(11): 15-25.

Davies CE, Zlotnik-Shaul R. [Physicians' legal duty of care and legal right to refuse to work during a pandemic](#). Canadian Medical Association Journal. 2009; Analysis.

Smith MJ, Bernard C, Rossiter K, Sahni SS, Silva D. [Vulnerability: A Contentious and Fluid Term](#). The Hastings Centre Report. 2010; 40(1): 4-6.

O'Riordan S, Barton M, Yau Y, Read SE, Allen U, Tran D. [Risk factors and outcomes among children admitted to hospital with pandemic H1N1 influenza](#). Canadian Medical Association Journal. 2010; 182(1): 39.

Ofri D. [The Emotional Epidemiology of H1N1 Influenza Vaccination](#). The New England Journal of Medicine. 2009; 361(27): 2594-2595.

Zhu FC, Wang H, Fang HH, Yang JG, Lin XJ, et al. [A Novel Influenza A \(H1N1\) Vaccine in Various Age Groups](#). The New England Journal of Medicine. 2009; 361(25): 2414-2423.

Gaur AH, Bagga B, Barman S, Hayden R, et al. [Intravenous Zanamivir for Oseltamivir-Resistant 2009 H1N1 Influenza](#). The New England Journal of Medicine. 2010; 362(1): 88-89

Liao QY, Lam WWT, Dang VT, Jiang CQ, Udomprasertgul V, Fielding R. [What causes H5N1 avian influenza? Lay perceptions of H5N1 aetiology in South East and East Asia](#). Journal of Public Health. 2009; 31(4): 573-581.

Ilyushina NA, Kim J-K, Negovetich NJ, Choi Y-K, Lang V, Bovin NV, et al. [Extensive mammalian ancestry of pandemic \(H1N1\) 2009 virus](#). Emerg Infect Dis. 2010 Feb; [Epub ahead of print]

Meltzer MI, McNeill KM, Miller JD. [Laboratory Surge Capacity and Pandemic Influenza](#). Emerg Infect Dis. 2010 Jan; 16(1): 147-148.

Carlowe J. [WHO vaccine expert had conflict of interest, Danish newspaper claims](#). BMJ. 2010; 340: c201.

Delamothe T. [H1N1: now entering the recrimination phase](#). BMJ. 2010; 340: c225

Enserink M and Cohen J. [The Novel H1N1 Influenza](#). Science. 2009 Dec; 326: 1607.

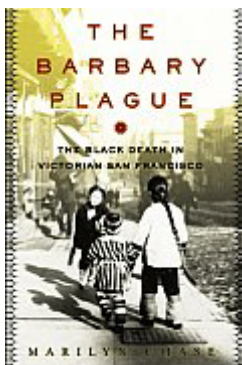
BOOKS



SARS UNMASKED: RISK COMMUNICATION OF PANDEMICS AND INFLUENZA IN CANADA

Michael G. Tyshenko

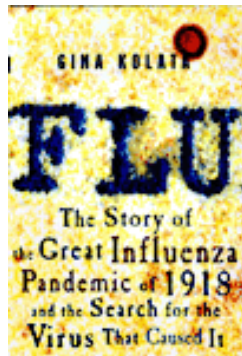
Severe Acute Respiratory Syndrome (SARS) was the first global pandemic of the twenty-first century, spreading within weeks from southern China to over thirty-seven countries around the world. In Canada intense news media coverage had a profound impact on how the disease was perceived, with frontline health care workers, despite their heroic efforts, stigmatized due to their contact with patients. Will SARS or another pandemic influenza reoccur and, if it does, have we learned how to manage pandemics more effectively? In *SARS Unmasked* risk communication expert Michael Tyshenko offers answers to this and other questions.



THE BARBARY PLAGUE: THE BLACK DEATH IN VICTORIAN SAN FRANCISCO

Marilyn Chase

In 1900, a ship called the *Australia* docked in San Francisco, carrying infected rats that launched a plague epidemic in the city, which raged sporadically for five years before it was subdued. Chase, a reporter for the *Wall Street Journal*, argues in this engaging narrative that social, cultural and psychological issues prevented public health officials from curtailing the outbreak. Relying on published sources, diaries and letters, Chase shows how the disease first hit Chinatown and explains that most San Franciscans denied the outbreak, while others blamed the city's Chinese population (city officials hid behind worries about tourism and the city's reputation).



FLU: THE STORY OF THE GREAT INFLUENZA PANDEMIC OF 1918 AND THE SEARCH FOR THE VIRUS THAT CAUSED IT

Gina Kolata

"It was a plague so deadly that if a similar virus were to strike today, it would kill more people in a single year than heart disease, cancers, strokes, chronic pulmonary disease, AIDS and Alzheimer's disease combined." Between 20 million and 100 million people worldwide died in the 1918 flu pandemic, but for years afterward this deadliest plague in history was almost completely forgotten. Histories and even medical texts rarely mentioned it. This disconnect between the flu's devastation and its obscurity is the starting point for Kolata's incisive history. She explains how the plague spread, covers the various speculations about its causes and origins and gives an account of the search to retrieve a specimen of the virus strain once genetic science had advanced enough to unravel the virus's mysteries.



THE PATIENT AS VICTIM AND VECTOR ETHICS AND INFECTIOUS DISEASE

Margaret P. Battin, Charles B. Smith, Leslie P. Francis, Jay A. Jacobson

The Patient as Victim and Vector explores how traditional and new issues in clinical medicine, research, public health, and health policy might look different in infectious disease were treated as central. The authors argue that both practice and policy must recognize that a patient with a communicable infectious disease is not only a victim of that disease, but also a potential vector- someone who may transmit an illness that will sicken or kill others.

FEATURE: Prioritizing Ventilators During an Influenza Pandemic in Ontario

Toronto Health Policy Citizens' Council Engages in Policy Making Process

Large scale public health emergencies, like the H1N1 pandemic, raise difficult moral questions. Some of the most difficult of these questions relate to the possible need to prioritize access to ventilators. On November 21 and 22, 2009, the Priority Setting Research Group at the University of Toronto established a Citizen's Council to discuss the ongoing uncertainty revolving around ventilator allocation in an Intensive Care Unit (ICU).

The **Toronto Health Policy Citizens' Council** consists of 26 individuals who represent the diversity of the gender, ethnic and socioeconomic characteristics of Torontonians. None are employed in health care related occupations. The purpose of the council meetings is to have ordinary citizens deliberate about important, value-sensitive issues in health care and to comment and make recommendations about those issues.

The group was presented with a situation in which there was a shortage of ventilators during an influenza pandemic. The citizens were asked about the principles which should be used to allocate ventilators and about the role that members of the public should have in the process by which ventilators are allocated. The deliberation was focused around two main questions:

Q1. If there are an insufficient number of ventilators to provide them to everyone who needs one during a major influenza pandemic (e.g. H1N1), what principle(s) should be used to allocate ventilators?

Q2. How should the public be involved in the process of allocating ventilators during a pandemic? For example, should triage protocols be publicly available? Is there a role for the public in the valuation of whether a patient should be denied a ventilator and /or in any appeal of such decisions?

The main principle which was agreed upon was the principle of survivability. The group believed that those most likely to benefit from being in an ICU (i.e. whose chance of survival is most greatly increased) are the people who should get priority access. Furthermore, survivability should be assessed for all patients, not just those presenting with influenza.

The role of healthcare workers (HCWs) in a pandemic situation was also deliberated upon. The group believed that asking HCWs to make allocation decisions that lead to their patients not receiving ventilation places HCWs in a difficult position. The council also mentioned that HCWs should use the best available tools (e.g. SOFA scores) and their clinical experience to make their best estimate of survivability. Moreover, patient characteristics such as gender, race, social standing, etc., should not influence the assessment of survivability or access to ventilators.

While factors such as the number of dependents (e.g. a single parent looking after three children) should be used when making allocation decisions, occupations should not be prioritized. This includes occupations which may be more important to the functioning of society during a pandemic than others.

Three presentations were also made during the two-day meeting, providing relevant information and various perspectives on the issues involved.

Presenters:

Dr. Vivek Goel, President and CEO, Ontario Agency for Health Protection and Promotion

Dr. Robert Fowler, Internist, Critical Care Physician, and Associate Scientist at the Sunnybrook Health Sciences Centre (Toronto)

Dr. Andrew Baker, Anesthesiologist and Chief of Critical Care at St. Michael's Hospital (Toronto)

Presenters provided H1N1 background information, current ICU ventilation decision-making processes, and proposed a process by which Ontario could prioritize ventilators during a major influenza pandemic.

Many of the considerations and suggestions from this Citizens' Council are similar to public views at CanPREP's numerous Town Hall Forums. CanPREP plans to analyze the Toronto deliberation and compare it to research findings from Vancouver, Winnipeg, and Saint John Town Halls.

The complete Toronto Health Policy Citizens' Council Report, along with several other priority setting policy documents, can be found in the Research Library at www.canprep.ca (front page) or by clicking [HERE](#)

UPCOMING EVENTS AND CONFERENCES

• **The Annual CAHSPR Conference** in Toronto, ON, May 10-13, 2010.

[\[http://www.cahspr.ca/Conferences/tabid/78/language/en-US/Default.aspx\]](http://www.cahspr.ca/Conferences/tabid/78/language/en-US/Default.aspx)

The Annual CAHSPR Conference brings together over 400 of Canada's leading researchers, decision makers, managers and trainees to exchange ideas and share findings from the most recent studies in health services and policy research.

• **21st Canadian Bioethics Society Annual Conference** in Kelowna, BC, June 9-12, 2010.

[\[http://en.cbskelowna2010.ca\]](http://en.cbskelowna2010.ca)

The theme of the 2010 Canadian Bioethics Society Conference is "Voices of Communities" focusing on voices of patients and families, voices of professionals and voices of the vulnerable.

• **Public Health in Canada: Shaping the Future** in Toronto, ON, June 13-16, 2010.

[\[http://www.cpha.ca/en/conferences/conf2010.aspx\]](http://www.cpha.ca/en/conferences/conf2010.aspx)

On the occasion of the 100th anniversary of the founding of the Canadian Public Health Association (CPHA), public health practitioners from across the country and around the world will meet in Toronto to celebrate a century of achievements and to shape the future of public health.

• **9th Canadian Immunization Conference, Immunization: A Global Challenge for the 21st Century** in Québec City, QC, December 5-8, 2010.

[\[http://www.phac-aspc.gc.ca/cnic-ccni/2010/index-eng.php\]](http://www.phac-aspc.gc.ca/cnic-ccni/2010/index-eng.php)

Every two years, the Conference brings together researchers and scientists; physicians; nurses; pharmacists; vaccine experts; health promoters; and health policy makers to expand knowledge on immunization and learn about the latest developments in immunization research, innovation and practice.

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)