

Clinical Updates for Family Physicians: Fall 2024

New and updated prevention programs are in place to address seasonal respiratory and other significant illnesses affecting Ontarians. The following summary highlights the key changes and provides links to tools and in-depth resources for family physicians.

SEPTEMBER 25, 2024

Key Highlights and Changes	
Respiratory Syncytial Virus (RSV)	<ul style="list-style-type: none"> • The infant RSV prevention program has expanded to all infants (previously was solely for high-risk infants) and has transitioned from Synagis® to Beyfortus® – both are preventive antibody medications. • Eligible infants and where they will be immunized: <ul style="list-style-type: none"> ✓ Born in 2024 prior to the RSV season; offered in primary care and local public health units. ✓ Born during the 2024-25 RSV season (typically late October to the end of March); offered soon after birth (before hospital discharge) or if born outside of hospital, offered in primary care or local public health units. ✓ Infants older than above (up to 24 months of age) who are at high risk from RSV disease; offered in primary care and hospital clinics. • Beyfortus® is highly effective and is the first-line product recommended by NACI for preventing serious RSV infection in children. The Abrysvo® vaccine may be offered to any pregnant patient who, after discussion, declines Beyfortus® for their baby. • Eligible adults aged 60+ should receive the Abrysvo® vaccine. The publicly funded program has been expanded from last season to include all retirement home residents. <p>More Information:</p> <ul style="list-style-type: none"> • OCFP summary of Ontario’s RSV prevention program • RSV resources (Centre for Effective Practice)
COVID-19	<ul style="list-style-type: none"> • Vaccine for fall includes the KP.2 formulation and replaces the XBB vaccines. <u>XBB vaccines were withdrawn on Sept. 1, 2024.</u> The Novavax vaccine may not be available in Ontario this season due to supply issues. • Updated COVID-19 vaccines are expected to be available in October for high-risk individuals, and shortly thereafter for the general public.

Key Highlights and Changes

COVID-19 (cont'd)

- Testing is intended for individuals who would be eligible for treatment, i.e., at high risk for severe outcomes from COVID-19 infection (65 years of age or older; 18 years of age or older and immunocompromised).
 - ✓ Continue to order RATs via the [PPE Supply Portal](#) (must be registered for the Provincial Antigen Screening Program).
 - ✓ Continue to request PCR testing as needed for eligible patients using the [PHO requisition form](#).
 - ✓ Patients may also access testing via participating pharmacies and local public health units – COVID-19 testing locations [here](#).
- Treatment with Paxlovid or remdesivir is recommended for patients who have symptoms, test positive for COVID-19, are age 65 years or older and/or at high risk for more severe COVID-19 outcomes, and meet the clinical criteria as specified on the Ontario Drug Benefit Formulary. A patient with a prescription may obtain Paxlovid from an Ontario pharmacy. Remdesivir is administered intravenously through [Ontario Health at Home](#) and in certain other settings.

More Information:

- OCFP – [COVID-19 Summary Information for Family Physicians, August 2024](#)
- [Ontario COVID-19 testing locations](#)
- Ontario Health – [COVID-19 clinical guidance webpage](#)
- Ontario Health – [Access to Antiviral Therapy for COVID-19 in the Community, July 2024](#)

Invasive Pneumococcal Disease

- Pneu-C-15 (Vaxneuvance®) and Pneu-C-20 (Prevnar 20®) vaccines have replaced Pneu-C-13 (Prevnar 13®) and Pneu-P-23 (Pneumovax®).
- PCV-15 is recommended for low-risk children, and PCV-20 is recommended for all other eligible populations (high-risk children, high-risk adults and adults over 65).
- No changes to eligibility and dosing schedule; individuals with completed vaccine series are not part of the product transition.

More Information:

- [OCFP summary of vaccines with timing and age cohorts, August 2024](#)

Key Highlights and Changes

Influenza

- Any age-appropriate quadrivalent or trivalent influenza vaccine should be used for individuals six months of age and older who do not have contraindications or precautions.
- For children, no preference for quadrivalent over trivalent flu vaccine formulations (new NACI recommendation).
- Adults aged 65+ should get an enhanced flu vaccine, either high-dose or adjuvanted — they are considered equivalent in the most recent NACI recommendations. If not available, offer any of the available age-appropriate influenza vaccines.

More Information:

- [NACI addendum to the statement on seasonal influenza vaccine for 2024-2025: Transition from quadrivalent to trivalent influenza vaccines, July 25, 2024](#)
- [NACI Supplemental Statement on Influenza Vaccination in Adults 65 Years of Age and Older, July 25, 2024](#)

Pertussis

- Tdap doses at:
 - ✓ Two, four and six months
 - ✓ Four years and 14 years
 - ✓ One dose during **every** pregnancy, ideally between 27-32 weeks of gestation

More Information:

- DFCM-OCFP Community of Practice: [Preparing for Fall and Practice Management, Sept. 6, 2024 \(starts at 36:34\)](#)
- DFCM-OCFP Community of Practice: [Managing Respiratory Illness in Kids & COPD, Sept. 20, 2024 \(starts at 46:47\)](#)
- [Publicly Funded Immunization Schedules for Ontario, June 2022](#)

Key Highlights and Changes

Mpox

- As prophylaxis, Imvamune® vaccine is available to eligible groups: two doses, 28 days apart provides the best protection; booster doses are not currently recommended.
- As a post-exposure vaccination, one dose as soon as possible, preferably within four days of last exposure, but can be considered up to 14 days from last exposure — NACI recommendation is for “individuals who have had high-risk exposure(s) to a probable or confirmed case of mpox, or within a setting where transmission is happening, if they have not received both doses of the pre-exposure vaccination.” If eligible, patients should get Imvamune® whether or not they received a smallpox vaccine.
- Antiviral Tecovirimat (TPoxx®) may be requested for eligible patients based on your clinical judgement for treating severe mpox infections. Note that TPoxx® does not have an approved indication for the treatment of mpox in Canada.
- Toronto Public Health hosts [mpox vaccination clinics](#) with appointments. Clients do not need to have an Ontario Health Card or health insurance.

More Information:

- [NACI Interim guidance on the use of Imvamune® in the context of a routine immunization program](#)
- Ministry of Health: [Mpox guidance](#) (June 2024) | [Mpox resources for health care professionals](#)
- Toronto Public Health: [Mpox information](#)

Breast cancer

- The [Ontario Breast Screening Program \(OBSP\)](#) has been expanded to include people ages 40 to 49, i.e., the eligible age for self-referral for a mammogram is lowered to 40 from 50 for average-risk individuals, effective October 8, 2024.
- Eligible women, Two-Spirit, trans and nonbinary people may self-refer for a [mammogram](#) at any OBSP location from ages 40 to 74.

More Information:

- [Ontario Health — Cancer Care Ontario: Letter to primary care](#)
- [Ontario Health — Cancer Care Ontario: Talking points to support physician-patient discussion](#)
- [Ontario Health — Cancer Care Ontario: FAQs for Primary Care Providers](#)
- Canadian Task Force on Preventive Health Care: [Draft guidelines on breast cancer screening for women ages 40-49 not at high risk](#)