

## ISC-AB Weekly Vaccine Update March 30, 2021

### General Updates:

- As of March 29, 2021 there are 7186 total on reserve cases of COVID-19 in Alberta. Of these 7186 total cases – 6974 have recovered, 318 are active in 31 First Nation communities. 9 communities have more than 10 active cases. There are 28 hospitalizations (14 in ICU), and 74 individuals have sadly passed away to date.
- There are now 53 cases of variants of concern on-reserve in Alberta First Nations. Alberta has the highest number of variant cases in the country, and 27% of active cases are variants. The main variant spreading is the B.1.1.7 strain which is more contagious and has higher rates of transmission within households. Early data from Ontario indicates that the variants are 60% more transmissible, variant cases 60% more likely to be hospitalized, 100% more likely to be admitted to the ICU and 60% higher death rate. Given the significant variant spread in Alberta, it is very important to continue to follow public health guidelines and members must adhere to public health measures.

### Vaccine General Update:

- One of the best ways to control variant spread is ensuring as many members as possible are vaccinated quickly. In age groups that have received the vaccine, there is already evidence that cases of COVID-19, and severe outcomes, have been significantly reduced amongst those age groups already immunized.
- As of March 26, 2021, 66% of the over 65 on-reserve population have received at least one dose, and almost 50% have received a second dose. Almost 14% of the 18 – 64 population on-reserve have received their first dose and just over 4.5% have received a second dose.
- Canada's National Advisory Committee on Immunization (NACI) has issued a new recommendation that the AstraZeneca COVID-19 vaccine should not be used in adults under 55 years of age. Rare cases of serious blood clots, including cerebral venous sinus thrombosis, associated with thrombocytopenia have been recently reported in Europe following post-licensure use of AstraZeneca COVID-19 vaccine and NACI is currently investigating the vaccine further.
- In rare cases in Europe, individuals who received the AstraZeneca vaccine had drops in platelet levels. While investigations are underway, this issue may be due to antibodies causing blood platelets to cluster, causing clots. The vaccine is still recommended for older people as the risk of clotting appears to be lower and the severe outcomes of COVID-19 present a much greater risk than not being vaccinated. For further information, you can consult the NACI guidelines here: <https://www.canada.ca/en/public-health/services/immunization/national-advisory-committee-on-immunization-naci/rapid-response-recommended-use-astrazeneca-covid-19-vaccine-younger-adults.html>
- AstraZeneca was opened for individuals in Phase 2D, including Indigenous people over age 35. We do not know how many Indigenous members received this vaccine.
- When answering questions about AstraZeneca, please remind members that this risk is specific to AstraZeneca and mRNA vaccines such as Pfizer and Moderna have had no major issues. Further, no AstraZeneca is being provided in Alberta First Nations. Moderna will continue to be provided to your communities.
- Phase 2B for those 18 and above with chronic conditions will begin in AHS clinics next with allocations for First Nations available next week as well. Ordering may open up by

the end of next week. As a reminder, the eligibility criteria for phase 2B and 2C are available in at <https://www.alberta.ca/covid19-vaccine.aspx> and a more detailed list for Phase 2B eligibility is available here <https://www.alberta.ca/assets/documents/covid19-vaccine-phase-2B-eligibility-fact-sheet.pdf>

- While vaccinations are expected to increase rapidly, it is still very important to follow public health orders. ISC-AB is still gathering data on how the vaccine protects against transmission of COVID-19. Guidelines have not changed for people who have been immunized. They are required to isolate when exposed.
- Most communities have shared the population numbers for Phase 2C numbers. These numbers were lower than anticipated, so we will follow up to confirm we have the correct allocations. Phase 2C is expected to begin by the end of April.
- ISC-AB continues to find surge supports and will share a form in the coming week to all communities, who can then identify the surge supports they will require.
- We appreciate the continued reporting on adverse events in communities. Within the next few weeks, ISC-AB will be developing an anonymous and optional survey that can be shared with individuals who receive the vaccine. The survey would be sent to the immunized individual immediately after receiving their vaccine and after two weeks. The results of the survey will be entered directly into CHIP and will significantly increase our understanding of adverse reactions. This is an innovative and new approach to vaccine side effect/ adverse event reporting that has not been done yet in other jurisdictions. Further information on this will be shared when available.

#### *Vaccine Clinic Updates*

- ISC-AB has received notification from AHS that the 2B shipment of vaccine will be arriving in the province, April 8 – 10, if the shipment arrives on time, communities can access their doses after April 10, 2021.
- Some First Nations are receiving 1cc syringes with their shipment, and others are not. ISC-AB continues to work with AHS to ensure these syringes, and other supplies are available for your communities. If you are having any issues accessing syringes or any other supplies you require, you can contact Christina Smith at [christina.smith@canada.ca](mailto:christina.smith@canada.ca)
- The use of the 1cc syringe has helped in getting an extra dose out of Moderna vials as it is smaller and more precise, however, even with the 1cc syringe not every vial will produce 11 doses. There is no expectation to squeeze out the extra dose, it is important to ensure everyone receives a full dose. Also, it is still not recommended to mix leftover vaccine from different vials to make an extra full dose.
- There have been many questions on whether pregnant women can receive the vaccine. In many cases, it is recommended that pregnant women consult with their doctor, similar to immune-suppressed people. The AHS Moderna vaccine biological page has a paragraph on pregnancy and lactation. It also has the link to the statement from the Society of Obstetricians and Gynaecologists of Canada [https://www.sogc.org/common/Uploaded%20files/Latest%20News/SOGC\\_Statement\\_COVID-19\\_Vaccination\\_in\\_Pregnancy.pdf](https://www.sogc.org/common/Uploaded%20files/Latest%20News/SOGC_Statement_COVID-19_Vaccination_in_Pregnancy.pdf). According to more professionals, pregnancy and breastfeeding are not contraindications for receiving the COVID-19 vaccine. There is always a theoretical risk in vaccination, but in almost all cases the vaccine is recommended for pregnant and breastfeeding women.

## Questions:

- ***Will the CHIP survey be emailed to the patient or require nursing support?***
  - We appreciate it is very busy in First Nations with vaccine clinics being operated and this survey would not significantly increase the workload. Nursing staff would be required to get the patient's permission to send the survey to their phones but Nurses would not fill out the survey. There may be some need for follow-up, but the expected work added for Nurses will be low.
  
- ***If we are having issues getting syringes what can we do?***
  - 1cc syringes should be available to all First Nations and should be provided by your vaccine depot when you pick up your vaccines. If you are having any issues accessing syringes or any other supplies you require, you can contact Christina Smith at [christina.smith@canada.ca](mailto:christina.smith@canada.ca)

We will meet next week, **April 13, 2021 at 1:00pm.**