



Yukon Communicable Disease Control
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Memorandum

Date: 2022-11-10 **22-14**
To: All Health Care Providers
From: Chief Medical Officer of Health (CMOH) & Yukon Communicable Disease Control (YCDC)
Subject: COVID-19 provider update #27, Updates to Case/Contact management, Web pages, Paxlovid

Dear Colleagues:

As we enter the 2022-2023 respiratory season in a highly COVID-19 immunized population, another update to the COVID specific testing recommendations and case management.

Key updates:

1. Testing recommendations

Lab and health care provider-based testing continues to be reserved for situations where there is highest risk to individual or public health outcomes. Outside of the existing RI outbreak guidelines, diagnostic testing for COVID-19 is recommended based on clinical judgement, primarily in situations where it will inform or change the management of a symptomatic patient.

Consideration for other viral respiratory illnesses should also be taken into account.

Asymptomatic testing is not routinely recommended.

For those individuals who do not require a clinical assessment and are not at risk of severe outcomes nor eligible for Paxlovid, at home testing by rapid antigen tests will be available through the 2022/2023 winter season at several locations, noted on Yukon.ca.

As mentioned in the news release today, CTAC will close on 18 November 2022. This will be in line with the updated testing recommendations.

Please continue to send screening forms as well as positive results to YCDC including Lucira and Abbott screening forms. As a nationally reportable disease, all COVID-19 positive results are to be reported to YCDC.

2. Updates to case and contact management, self-management at home

Key changes to the COVID-19 Public Health Management of Cases document are found on pages 10 to 12.

In reviewing and updating the isolation recommendations, a balance between isolation/infection control needs and the practicalities of life given the widespread nature of the disease in the community and the high immunization rate was taken into account.

Individuals residing in or admitted to a congregate health care setting (i.e. long term care homes, in-hospital patients) who test positive for COVID, will be recommended to complete a 5 day isolation period, possibly longer depending on symptomatology.

Individuals in the community setting are recommended to stay home if sick and self-manage their care at home, to seek health care as needed especially for clinical assessment and decision making re eligibility/criteria for treatment and to return to activities when symptoms are resolved.

YCDC continues to monitor for COVID and respiratory illness outbreaks in acute care and congregate health settings.

YCDC continues to support notification and case management for persons without primary care providers and/or for cases who were identified at the time of testing as having been at any of the following high-risk exposure areas during their period of communicability:

<ul style="list-style-type: none">• Long term care/assisted living /group home• Aggregate addiction services – withdrawal support (detox)	<ul style="list-style-type: none">• Correctional Centres - WCC, YOF• Person who received clinical services in acute care facilities and rural health centres.
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3. Hospitalizations and Deaths

Since the beginning of the pandemic, the majority of hospitalizations and deaths have been among people not up to date with COVID-19 vaccination. Looking at deaths specifically, 88% of the deaths due to COVID-19 are in individuals who either had 2 or more chronic medical conditions or were in an age group > 60 years. 16% of the all deaths were in individuals whose only identified risk factor was age > 60 years. Vaccination has dramatically reduced the risk of severe outcomes in most age groups, with some residual

risk among all age groups primarily in the unvaccinated, but also in those with 2 or more chronic conditions.

Hospitalizations & deaths (confirmed cases) by age group and wave & total cases reported to YCDC in same period – to 14 October 2022

Age Group	Other	Gamma	Delta	Omicron	Total
0-9	1	2	0	2	5
10-19	0	2	0	0	2
20-29	1	6	3	3	13
30-39	1	12	1	2	16
40-49	2	13	8	1	24
50-59	0	14	7	10	31
60-69	3	11	6	11	31
70-79	0	5	10	17	32
80+	0	4	4	11	19
Total hospitalizations	8	69	39	57	173
Total Deaths	2	7	7	16	32
Cases reported to YCDC	91	598	957	3262*	4908

Episode date
Other pre May 15 2021
Gamma – May 15, 2021-Aug 21-2021
Delta – Aug 22, 2021 – Dec 18, 2021
Omicron – Dec 19, 2021 ongoing

* With the widespread use of home antigen testing since January 2022, testing/reported numbers are under-represented. Hospitalization numbers are defined as COVID admissions.

4. Paxlovid

When Paxlovid was first issued, there was a national concern regarding supply and criteria was suggested for those in whom Paxlovid would provide the greatest benefit. As it is funded by public health, there was a degree of management over distribution. However, as long as we have the supply, public health supports provision when used for either the identified Yukon criteria or under Health Canada authorization circumstances, in conjunction with clinical judgement by the HCP.

The current and unchanged Yukon eligibility list identifies those individuals for whom Paxlovid might most benefit.

While using up the existing supply, but outside of Yukon specific eligibility criteria, Health Canada has authorized use in the > 18 year old population, upon appropriate clinical assessment and decision making by the health care provider. If a client does not fall within the Yukon eligibility criteria, but the health care provider believes there would be benefit to prescribing, HCPs are encouraged to use clinical judgement as they would in dispensing any medication, paying attention to circumstances based on the product monograph. This can be done with or without consultation with Dr. Kevin McLeod as determined by the HCP.

As with other medical products, prescribers should pay attention to circumstances in which they may be prescribing off-label based on the product monograph, and recognize that prescribers may have to bear significant responsibility for consequences related to off-label use.

You will see an updated note to this point within the attached Paxlovid document.

Health Canada <https://covid-vaccine.canada.ca/info/pdf/paxlovid-pm-en.pdf>

5. Infection Prevention and Control measures in primary care settings

See attached the memo circulated in June 2022 and a refresher on routine practices that can be used for seeing symptomatic clients in your practice.

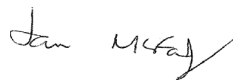
Updates to Yukon.ca COVID web pages

Public information pages and the COVID-19 health professional's pages will be updated shortly.

Thank you for your continued cooperation and support.



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