

Image adapted from: www.shropshiretelfordandwrekin.nhs.uk

Vomiting?
Diarrhea?
High temperature?
Aching arms and legs?

It may be norovirus. Don't pass it on.

NOROVIRUS AND ITS CURRENT RISE IN CANADA

Noroviruses (aka Norwalk virus) are a group of related, highly contagious, non-enveloped viruses that cause acute gastroenteritis in humans with symptoms like vomiting, nausea, stomach cramps, diarrhea, and sometimes fever. It is sometimes called “stomach flu”, which is a misnomer, as norovirus is not related to influenza. The number of cases of norovirus has been on the rise both at the national level and within several provinces, including Ontario, according to the Public Health Agency of Canada (PHAC).

Norovirus is a serious gastrointestinal illness and primarily spreads through the **fecal-oral route**. It is easily transmitted through direct person-to-person contact, by consuming contaminated food or water, or by touching contaminated surfaces and then touching the oral mucosa. Food and water can be contaminated when it's touched by staff who have not washed their hands properly. Noroviruses can also spread via **droplet route** from vomitus of an infected person.

A person who is sick with norovirus can shed billions (not a typo) of viral particles in the feces. It can spread easily because only a few norovirus particles is required to make a person ill. You are most contagious when you are symptomatic, and during the first few days after you recover from the illness. Symptoms may start 12-48 hrs after exposure and most people feel better within 2-3 days. Those infected with norovirus can spread it once they feel ill and for up to 48 hrs after symptoms (usually diarrhea) have resolved but people can carry the virus for up to two weeks.

Common hand sanitizers are **ineffective** against norovirus and should not be used as a substitute for washing hands with soap and water. Hands should be washed with soap and water frequently to limit transmission, especially before and after providing care to a resident/client, before and after meals, and after using the washroom. The **first available** method of cleaning should be used by staff, including alcohol-based hand sanitizers with 70-90% alcohol, and then soap and water as soon as you can get to a sink. A bleach-based cleaner or other Health Canada approved product with efficacy claim specifically against norovirus should be used to disinfect high-touch surfaces and objects frequently.

Sources: globalnews.ca | www.cdc.gov | www.toronto.ca | www.health.gov.on.ca | apic.org | www.osha.gov | www.niddk.nih.gov

Stop Norovirus!

Norovirus causes diarrhea and vomiting. It spreads easily from an infected person to others, especially in long-term care facilities. Elderly residents are more likely to become very sick or die from norovirus.

Protect yourself and elderly residents from norovirus.

WASH YOUR HANDS



Wash your hands often with soap and water for at least 20 seconds each time and avoid touching your mouth.

CLEAN SURFACES



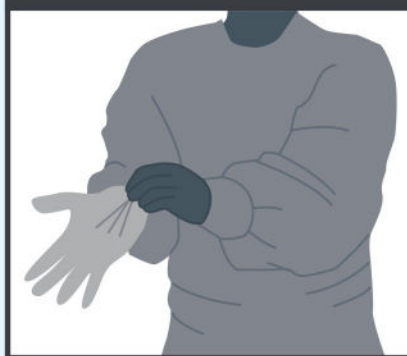
Use a bleach-based cleaner or other approved product* to disinfect surfaces and objects that are frequently touched.

WASH LAUNDRY



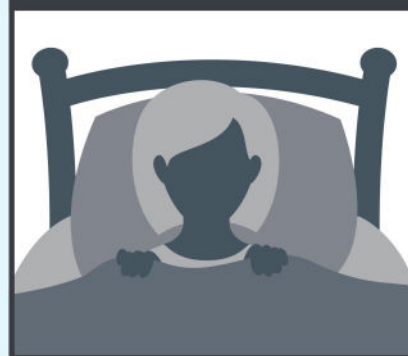
Remove and wash soiled clothes and linens immediately, then tumble dry.

USE GOWN AND GLOVES



Use gown and gloves when touching or caring for patients to reduce exposure to vomit or fecal matter.

STAY HOME WHEN SICK



If you're sick, stay home and don't take care of or visit people in long-term care facilities for at least 2 days after your symptoms stop.



U.S. Department of
 Health and Human Services
 Centers for Disease
 Control and Prevention

*Use a chlorine bleach solution with a concentration of 1000-5000 ppm (5-25 tablespoons of household bleach [5.25%] per gallon of water) or other disinfectant registered as effective against norovirus by the Environmental Protection Agency (EPA) at http://www.epa.gov/oppad001/list_g_norovirus.pdf

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NOROVIRUSES ARE RESISTANT TO ALCOHOL-BASED HAND SANITIZERS



The antimicrobial activity of alcohol-based hand sanitizer or hand rub (ABHR) is attributed to their ability to denature or alter structure of proteins. ABHR destroys the cell wall and membranes of bacteria cells and the envelope of viruses, including influenza, RSV, and SARS-CoV-2, the virus that causes COVID-19. The efficacy of ABHR depends on the type of alcohol used, the alcohol content in the product, the quantity applied, the technique used, and the consistency of use.

Norovirus (belongs to the family *Caliciviridae*) is a **non-enveloped** virus enclosed by a structure known as a capsid, which makes it resistant to ABHR as the alcohol cannot effectively penetrate the viral particle and inactivate it. This is why hand washing with soap and water for at least 15-20 seconds *is critical* when dealing with a norovirus outbreak, even when hands are not visibly soiled, instead of only using ABHR for hand hygiene. In addition, efforts should be made to avoid touching the face to limit potential transmission. Since norovirus is also relatively resistant to heat, all soiled laundry should be washed with detergent and hot water at maximum available cycle length and then machine dried at the highest heat setting.

Sources: www.cdc.gov | www.canada.ca | nccid.ca

COVID-19 IPAC CHECKLIST FOR LTCH AND RH - **UPDATED**

Public Health Ontario recently published the updated version (3rd Edition) of their COVID-19 infection prevention and control checklist for long-term care and retirement homes. The updated checklist incorporates the latest IPAC requirements and recommendations with a new user-friendly design, and can be used as a tool for point-in-time assessment, and to guide policies, procedures, preparedness and response planning related to COVID-19.

The tool *does not* however replace the advice, guidelines, recommendations, or other direction from provincial Ministries and local public health authorities. You can download the PDF version of the latest checklist by clicking on the icon to the right.



COVID-19 Community Risk

[CLICK HERE](#)

For the date of:

18 February, 2023

Overall Risk Level

- Very High
- High
- Moderate**
- Lower (Caution)

Trend



For the week ending February 18, 2023:

The overall COVID-19 Risk Level is **Moderate**

Compared to the previous week COVID-19 activity is **decreasing**.