

IS COVID-19 JUST LIKE THE FLU NOW?

Image source: www.cagle.com



No, it is not. The incorrect notion that “COVID-19 is just like the flu” has been pervasive since the beginning of the pandemic and it still persists to some extent. It is like conflating poison with venom. Or more disturbingly, conflating Star Trek with Star Wars. COVID-19 and seasonal influenza do share some similarities. They both are contagious respiratory illnesses and share some of the main symptoms like fever, cough, fatigue, sore throat, runny nose, and body aches. Both illnesses can be asymptomatic, mild, severe, and even deadly. In addition, SARS-CoV-2 and influenza viruses both spread in a similar way, via close contact with aerosols or droplets containing the viruses from an infected individual.

However, both diseases also differ in a significant way. Compared to seasonal flu, COVID-19 is caused by a different virus, which has a higher transmission rate, is capable of spreading even in the absence of symptoms, is contagious for longer, and it still actively circulates all year long. Both can cause severe illnesses but COVID-19 can cause more severe outcomes and has a higher mortality rate than the flu, particularly among certain age groups and individuals with underlying health conditions. In addition, up to 23% of COVID-19 patients may experience prolonged effects known as ‘Long COVID’ that are not typically associated with the flu. According to the latest data from the Government of Canada, it is estimated that seasonal flu causes 3,500 deaths each year while COVID-19 was responsible for over **6,200** deaths in the last 12 months in Canada. This is a sobering reminder that even though there are similarities between the two diseases, COVID-19 and the flu are not equivalent.

These differences matter because as SARS-CoV-2 continues to circulate and spread rapidly, the virus has a higher capacity to mutate and change over time, resulting in emergence of new variants that could be potentially more severe and contagious. This could overwhelm our already overloaded healthcare system and put additional burden and stress on our healthcare workers. Up until August, we did catch a break during this summer where COVID-19 activity was either stable or decreasing in Canada. But there has been a rapid rise in COVID-19 activity since then. Preventative measures like being up to date with the current vaccine recommendations, wearing a mask in crowded areas, and staying home when feeling sick will help to limit transmission and protect the more vulnerable amongst us.

Sources: www.canada.com | health-infobase.canada.ca | www.cdc.gov | www.scienceupfirst.com | jamanetwork.com

MANAGEMENT OF CASES AND CONTACTS OF COVID-19 – UPDATED

Ontario Ministry of Health published an updated **Appendix 1: Case Definitions and Disease-Specific Information** document on September 27, 2023. This document now includes management of cases and contacts of COVID-19 in Ontario, and provides comprehensive guidelines for the diseases caused by a novel coronavirus, including coronavirus disease 2019 (COVID-19), severe acute respiratory syndrome (SARS) and Middle East respiratory syndrome (MERS). The document, which is part of the infectious disease protocol, can be accessed by clicking on the PDF icon to the right.



Ontario 

IPAC SELF-ASSESSMENT AUDIT TOOL FOR LTCH AND RH – NEW



Public Health Ontario (PHO) recently published their new IPAC self-assessment audit tool for long-term care homes (LTCH) and retirement homes (RH). This self-assessment audit is created to help IPAC leads assess how their IPAC practices meet minimum IPAC requirements under applicable legislation and regulations. However, as mentioned in the audit tool, some areas like environmental cleaning, PPE, and hand hygiene will require more in-depth auditing to identify any gaps in best practices.

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IPAC CHECKLIST FOR LTCH AND RH – NEW

PHO also published a new IPAC checklist for LTCHs and RHs on September 22, 2023. The checklist is meant for those working in or supporting LTCHs and RHs for the purpose of self-assessment and to guide policies, procedures, preparedness and response planning. This checklist can also be used as a supplement to the self-assessment audit tool to perform a more comprehensive assessment of IPAC best practices.



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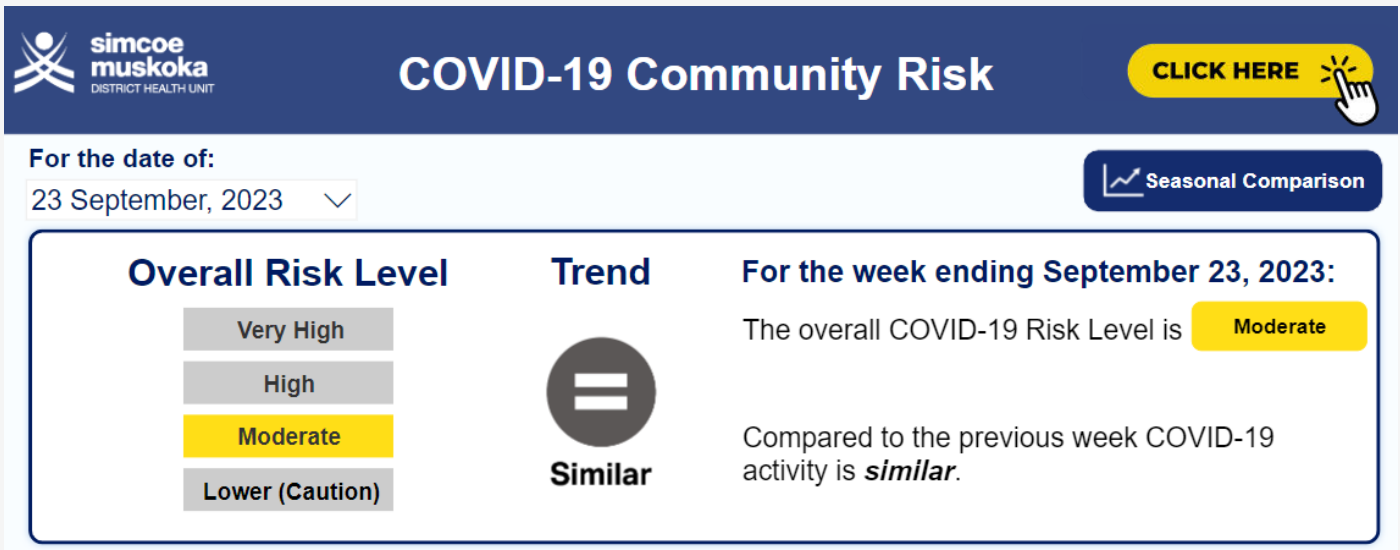
IPAC FOR ENVIRONMENTAL CLEANING IN HEALTH CARE – NEW



PHO has released their new comprehensive online learning modules on environmental cleaning in health care that are intended for both, environmental cleaning staff and management. There are a total of **six** modules and each module should take no more than 15 minutes to complete. Upon completion of all required modules, a certification from PHO will also be provided. The modules can be accessed through PHO's learning management system by clicking on the icon to the left.

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WEEKLY RESPIRATORY VIRUS ACTIVITY IN SIMCOE MUSKOKA



The COVID-19 Community Risk Level tool was relaunched by Simcoe Muskoka District Health Unit (SMDHU) recently and will be updated on a weekly basis going forward. The purpose of this tool is to help the community to gauge personal and situational risk within the County of Simcoe and the District of Muskoka. According to the most recent data available, the percent positivity for COVID-19 for the week ending on September 23, 2023 in the region was **16.9%**. Comparing this to the earlier months, the percent positivity at the end of August 2023 was 12.1% , and was just 5.0% in the beginning of July 2023.

With regard to seasonal flu activity, there were only three laboratory-confirmed influenza cases and one influenza outbreak reported to the SMDHU as of September 22, 2023 for the current 2023-2024 season.

It is important to keep in mind that the statistics for COVID-19 mentioned above are based on the results of PCR or rapid molecular testing, which only a portion of the public qualifies for, and are a significant underestimation of actual prevalence of COVID-19 in the community.

There is an essential distinction between the rise in COVID-19 cases we are seeing within the province and nationally compared to the past few years. The number of ICU admissions have remained relatively stable and fewer people are becoming seriously ill. Widespread vaccination and/or prior infections have provided strong immune protection in vast majority of the population, limiting severe outcomes when there is a new infection. However, immunity against COVID-19 *does* wane over time and it is imperative to get the updated, XBB.1.5 containing COVID-19 mRNA monovalent vaccine once it is available, and when eligible, to maintain strong immunity against this continuously evolving and highly contagious virus. You can use SMDHU's [find a COVID-19 vaccination clinic](#) link to find a location near you.

Sources: www.simcoemuskokahealth.org¹ | www.simcoemuskokahealth.org² | data.ontario.ca | health-infobase.canada.ca

THOUGHTS ON THIS MONTH'S NEWSLETTER?



Love it



Good



Meh