

COVID-19 Vaccine Bulletin #18

Vaccine Status & VOC Update

The purpose of the Vaccine Bulletin is to give you the latest information about COVID-19 vaccines. For this bulletin, the focus will be on vaccine status updates, variants of concern, and vaccine hesitancy.

Quick Updates

- Tomorrow, immunization numbers will push the region over the 25% threshold of eligible residents of the region who have received at least one dose of a vaccine.
- Check out [Wellington-Dufferin-Guelph's vaccination dashboard](#). The **total number of doses** administered in Wellington-Dufferin-Guelph (WDG) is **67,393**.
- **90%** of people who are 80 years of age and older and **54%** of people who are 65-79 years old in WDG have received at least one dose of vaccine with many more in the 65-79 age category booked for appointments.
- Education workers who provide direct support to students with special education needs are now eligible to be immunized. The process for education workers to receive vaccine is being managed directly between the school boards and public health. School boards identify eligible staff and WDG Public Health phones them to book an appointment. If physicians are asked to intervene please direct all inquiries back to their respective school board.
- **All residents (age 16+) in WDG can pre-register for their vaccination.** Local vaccinations will be following the Province's framework. Booking will continue to follow sequence with timelines based on supply.
- Go to www.wdgpUBLICHEALTH.ca/register for more information about vaccine pre-registration. There is a **Vaccine Registration and Booking Helpline: 1-844-780-0202 (Mon-Sat, 12-8 pm)** for anyone who has issues pre-registering or booking online.
- There are five mass vaccination sites and five smaller pop-up clinics in more remote areas currently operating in WDG. Self selected primary care offices and [ten pharmacies](#) in WDG are offering AstraZeneca vaccine to clients 55 years of age and older. Physicians who wish to deliver the AstraZeneca vaccine in their office who have not previously been onboarded can contact marlene.jantzi@wdgpUBLICHEALTH.ca for more information.

Vaccine Status for Wellington-Dufferin-Guelph

67,393 doses administered	23% of eligible population received one dose
Maximum number of doses administered in one day = 2,873	Total number of doses given in primary care office or pharmacy = 6,916
94% LTC/RH residents fully immunized	73% of LTC/RH staff received one dose

Age Group	Percentage with First Dose
85+	91%
80-85	89%
75-79	72%
70-74	60%
65-69	40%
60-64	38%

Updates to Ontario's Vaccine Distribution Plan – Phase Two

- “Hot spot” postal code areas have been identified by the Province based on established patterns of transmission, severe illness, and mortality.
- Not every part of an identified “hot spot” postal code is at increased risk. Within WDG Public health we use neighbourhood level data to subdivide these larger “hot spot” areas into true areas of risk.
- Adults aged 50+ in neighbourhood level “hot spot” areas will be prioritized as part of Phase Two.
- Education workers who provide direct support to students with special education needs, and education workers in select “hot spot” areas will be eligible to register for vaccination. This process is being managed by the school boards and WDG Public Health directly.
- WDGPH will be using a number of targeted approaches to identify and vaccinate people living or working in neighbourhood level “hot spots” within our community. Small targeted clinics will be managed in collaboration with community organizations to ensure that the people vaccinated are from the at-risk community.
- Summary - [Vaccine Uptake in Ontario: December 14, 2020 to April 3, 2021](#)

Variants of Concern & Vaccine Effectiveness

- As of April 8, 2021, the B.1.1.7 variant of concern (VOCs) makes up 67% of all COVID-19 cases in Wellington-Dufferin-Guelph. There have been no cases of the other two types of VOCs (B.1.351 or P.1) detected in this area.
- In general, the current COVID-19 vaccines being offered (Pfizer, Moderna, and AstraZeneca) have shown to be **effective again the B.1.1.7 variant.**

<p>B.1.1.7 (originated in UK)</p>	<p>Most recent data suggest that the efficacy of current vaccines (Pfizer, Moderna and AstraZeneca) would not be significantly impacted.</p> <ul style="list-style-type: none"> ○ Public Health Ontario. COVID-19 B.1.1.7 (501Y.V1) Variant of Concern – What We Know So Far. ○ Emary, K.R.W. et al. (2021). <i>Efficacy of ChAdOx1 nCoV-19 (AZD1222) Vaccine against SARS-CoV-2 VOC 212012/01 (B.1.1.7)</i>. Pre-print available at SSRN: https://ssrn.com/abstract=3779160. ○ Kustin, T. (2021). <i>Evidence for increased breakthrough rates of SARS-CoV-2 variants of concern in BNT162b2 mRNA vaccinated individuals</i>. Pre-print available doi: https://doi.org/10.1101/2021.04.06.21254882.
<p>P.1 (originated in Brazil)</p>	<p>While data is still emerging, there is some evidence that the current vaccines (Pfizer, AstraZeneca, and Moderna) have some reduced effectiveness yet still provide protection against P.1 variant. P.1 has been shown to be less resistant to vaccine-induced antibody responses than B.1.351.</p> <ul style="list-style-type: none"> ○ Public Health Ontario. COVID-19 P.1 Variant of Concern – What We Know So Far. ○ Wanwisa, D. et al. (2021) <i>Antibody evasion by the Brazilian P.1 strain of SARS-CoV-2</i>. Pre-print available at DOI: https://doi.org/10.1101/2021.03.12.435194.
<p>B.1.351 (originated in South Africa)</p>	<p>Current evidence suggests that there is some variability across vaccines in terms of effectiveness against this variant. Moderate reductions in neutralizing activity has been shown for Pfizer and Moderna while more significant reductions have been seen for AstraZeneca.</p> <p>Moderna has announced plans to evaluate a new vaccine that incorporates B.1.351 mutations. Pfizer has also stated that it is possible to update their vaccine with a new variant sequence, if needed.</p> <ul style="list-style-type: none"> ○ Public Health Ontario. COVID-19 B.1.351 (501Y.V2) Variant of Concern – What We Know So Far. ○ Madhi, S. A. et al. (2021). <i>Efficacy of the ChAdOx1 nCoV-19 Vaccine against the B.1.351 variant</i>. <i>New England Journal of Medicine</i>. DOI: 10.1056/NEJMoa2102214.

- Kustin, T. (2021). *Evidence for increased breakthrough rates of SARS-CoV-2 variants of concern in BNT162b2 mRNA vaccinated individuals*. Pre-print available doi: <https://doi.org/10.1101/2021.04.06.21254882>.

Primary Care Education Series

Webinar video – [COVID-19 Vaccination in Autoimmune Inflammatory Rheumatic Diseases](#)

Vaccine Hesitancy – How to Debunk a Myth

For full details and references, see [The COVID-19 Vaccine Communication Handbook](#) (p. 14).

1. **FACT**

Provide a factual alternative to the misinformation. Avoid scientific jargon or complex, technical language.

2. **WARN ABOUT THE MYTH**

Repeat the misinformation only once, prior to providing the factual alternative.

3. **EXPLAIN FALLACY**

Explain 1) why the mistaken information was thought to be correct; 2) why it is now clear it is not correct; and 3) why the alternative is true.

4. **FACT**

Finish by reinforcing the fact – multiple times, if possible.

NACI Extended Dose Intervals Statement

- The National Advisory Committee on Immunization (NACI) has released a full advisory statement on extended dose intervals for COVID-19 vaccines which includes references and detailed summaries of evidence updated to reflect the most recent data:
 - [Full NACI Statement](#)
 - [Summary NACI Statement](#)
- NACI reports that current evidence demonstrates very good vaccine efficacy (in clinical trials) and good vaccine effectiveness (in “real-world”) against COVID-19 after single dose.

Reliable Sources of Information on Vaccines

[Public Health Agency of Canada](#)

[Government of Ontario](#)

[Public Health Ontario](#)

[Centre for Effective Practice \(CEP\)](#)

[World Health Organization](#)

[COVID-19 Studies from the World Health Organization Database](#)

[Centres for Disease Control and Prevention \(CDC\)](#)