



## **RSV prevention in infants and high-risk children: Program extension**

- RSV positivity and variability remain high across the province, particularly among at-risk populations, including infants and children. As a result, the Ministry of Health is continuing the 2025/2026 infant RSV program. Healthcare providers should continue to offer RSV immunizations to [eligible infants and children](#). The Ministry will circulate communication to end the 2025-26 program once RSV rates decrease.
- The decision to administer maternal vaccination should weigh the timing of administration during pregnancy (i.e. between 32-36 weeks of gestation) and the end of the 2025-26 RSV season.
- The Ministry will provide guidance for the 2026-27 program before the fall, including recommendations for infants and children receiving RSV protection late this season.

## **Tuberculosis awareness**

- Following declines in diagnosis and treatment of TB during the COVID-19 pandemic, TB rates in Ontario have gradually increased. While the incidence of TB in Grey-Bruce remains lower than the provincial average, the disease is present locally. In 2025, there was one case of TB disease and 26 cases of TB infection reported in Grey-Bruce.
- Consider including TB in the differential diagnosis if your patient presents with the following:
  - Symptoms:
    - Cough lasting more than 2–3 weeks
    - Hemoptysis
    - Fever
    - Night sweats
    - Unexplained weight loss
    - Fatigue
  - Risk Factors:
    - Birth or residence in TB-endemic countries ([TB incidence >50/100 000](#))
    - Known TB exposure
    - Immunocompromising conditions
    - Homelessness
    - Substance use
    - History of BCG vaccine given in infancy for those over 10 years of age or older is generally not the cause of a positive TST
- As mandated under the *Health Protection and Promotion Act*, the following must be reported to [Grey Bruce Public Health](#) (519-376-9420 ext. 6):
  - All positive Tuberculin Skin Test (TST) results
  - All positive Interferon-Gamma Release Assay (IGRA) results
  - All suspected or confirmed cases of active TB disease
- Grey Bruce Public Health (GBPH) provides:
  - Free TB medications for latent TB infection and active TB disease when ordered through Public Health
  - Publicly funded Tubersol for eligible patients
  - Case and contact management, including follow-up support

## **Medetomidine in the unregulated opioid supply**

- Medetomidine has emerged within the local, unregulated opioid supply. It is a veterinary sedative that acts as an  $\alpha_2$ -adrenergic receptor agonist—it is not approved for human use.
- Medetomidine's strong sedative effects are not counteracted by naloxone administration. Naloxone should still be given to reverse opioid toxicity, but bradycardia, hypotension, and miosis may persist. Some patients may require airway support and additional monitoring.
- Medetomidine withdrawals are distinct from opioid withdrawals and may be severe. Symptoms may begin within 4-6 hours of last use and can include nausea, vomiting, tachycardia, hypertension, anxiety, tremor, diaphoresis, and progressing agitated delirium and autonomic crisis.
- Please consider medetomidine co-exposure or withdrawal in patients with known or suspected fentanyl exposure, who present with prolonged sedation and/or whose clinical course does not follow expected opioid withdrawal symptoms or resolution timelines.
- Early consultation with the Ontario Poison Centre (1-800-268-9017) is encouraged when medetomidine toxicity or withdrawal is suspected.

## **ISPA Update: School suspensions**

- Under the *Immunization of School Pupils Act* (ISPA), Grey Bruce Public Health (GBPH) is required to have either an up-to-date immunization record or a valid statement of exemption on file for all students aged four to 17 years. Students who have not met the ISPA requirements are subject to suspension. This year's school suspension period began Tuesday, March 24, 2026, and will end April 22, 2026. 223 suspension-notices have been issued.
- As GBPH continues to work on getting students back to school as soon as possible, we appreciate your help in providing immunization records and making time to see these students in your clinics.
- As you provide vaccinations to children and youth throughout the year, please continue to provide parents/caregivers with a copy of their vaccination records and fax updated records to GBPH at 519-376-7782.
- For any vaccine-related questions, contact a nurse in the Vaccine-Preventable Diseases Program at 519-376-9420, ext. 2.

## **Chikungunya vaccine: Enhanced monitoring for adverse events following immunizations**

- IK-LAV (trade name IXCHIQ) is a single-dose chikungunya live attenuated vaccine authorized for use in Canada for the prevention of disease caused by the chikungunya virus. The Committee to Advise on Tropical Medicine and Travel (CATMAT) in Canada advises that the vaccine [may be considered](#) for people aged 18 to 64 years who are at high risk of infection (e.g., travel to an area experiencing a chikungunya outbreak).
- There have been post-marketing reports of serious adverse events following immunization (AEFI) with CHIK-LAV in Europe, the United States, and Canada, [mostly among](#) persons 65 years or older and those with pre-existing health conditions. Reported serious adverse events have included hospitalizations with chikungunya-like illness and three deaths, including [one death](#) directly attributable to the vaccine.
- To support vaccine safety surveillance, health care providers are required to report AEFIs for CHIK-LAV to their local public health unit as soon as a suspect AEFI is identified.
- All adverse reactions to an immunization that meet one of the [Provincial Case Definitions](#) for an Adverse Event Following Immunization are to be reported to your local Public Health Unit. These reports are used to ensure the continued safety of vaccines available in Canada. The reporting form can be found here: [Vaccine Safety | Public Health Ontario](#).

## **Resources for Primary Care Professionals**

### **Online Modules**

- [Provincial Common Orientation to the Care of Older Adults - Provincial Geriatrics Leadership Ontario](#) – Offered in spring, fall and winter.
  - The Provincial Common Orientation to the Care of Older Adults is a unique training series designed for health and social care professionals. This course combines on-line content (self-paced) and 11 weekly 90-minute virtual (synchronous) sessions.

### **Webinars**

- [PHO Rounds: Primary and Secondary Prevention of HPV and Anal Cancer](#) – April 28, 2026.