

October 6, 2009



Tripartite First Nations Health Plan

An Information Bulletin from the Tripartite First Nations H1N1 Working Group

Dear First Nations Community Members,

The Tripartite First Nations H1N1 Working Group is in place, meeting weekly and is committed to communicating with you on a regular basis. The group is made up of representatives from the First Nations Health Council, Health Canada, the provincial government and every health authority. We will be sending regular bulletins about efforts underway to support you. Most recently, we sent a "H1N1 Community Preparedness Checklist" to assist you in your preparations - we hope you find it useful.

You are likely receiving information from many sources about the yearly seasonal Influenza A vaccine, the H1N1 Influenza vaccine and the use of antiviral medicines.

The Tripartite First Nations H1N1 Working Group believes it is critically important that you and your community have the facts about the H1N1 Influenza virus and related issues. Rumours and misinformation circulating from unreliable and rhetorical sources should be identified as such. First Nations community members around BC need and deserve accurate information about H1N1 Influenza.

Anti-viral medications:

Tamiflu is not a vaccine. Tamiflu is the brand of antiviral medication that can be used for most people with suspected or confirmed H1N1 Influenza – especially those with moderate to severe illness.

The taking of Tamiflu or any other antiviral medication is not mandatory. An individual must give their consent to receive it after being informed of the risks and benefits, and is free to decline it if they so choose.

Availability:

The cost of Tamiflu is currently covered by Non-Insured Health Benefits (NIHB). **As of October 1, 2009, Tamiflu will be dispensed free of charge to anyone in BC with a prescription.** The pharmacist will still charge a dispensing fee, but this fee will be paid by the province.

Many First Nations communities do not have regular access to a doctor or a pharmacy and the Tripartite First Nations H1N1 Working Group is creating ways to increase access to Tamiflu for

such communities. Please see your Community Health Nurse or health care provider to learn how to access Tamiflu if needed.

Vaccine:

The H1N1 Influenza vaccine will be given, when it becomes available, to prevent an individual from developing H1N1 Influenza and becoming sick.

Vaccination against H1N1 Influenza is not mandatory. An individual must give their consent to receive the vaccine after being informed of the risks and benefits, and is free to decline the vaccination if they so choose.

The immediate priority is to make the H1N1 Influenza vaccine available to people who will benefit most from it and those who care for them. This priority list includes:

- people with chronic medical conditions under age 65 years of age
- pregnant women
- children six months to less than 5 years old
- people living in remote and isolated communities
- health care workers who deliver essential services
- household members and care providers of infants less than six months old and people with compromised immune systems
- other groups identified as high risk

The H1N1 Influenza vaccine will be available at the following locations:

- **special clinics organized by Public Health Nurses (PHNs)**
- **physician offices**
- **Community Health Nurses (CHNs) working in First Nations communities**
- **other health care facilities, including those for long-term care**

Details of clinic dates and locations for vaccination will be made available through your Regional Health Authority, your local health unit and your community health centre.

Timing of Seasonal Influenza Vaccine and H1N1 Influenza Vaccine

Starting on October 13, 2009, the seasonal Influenza vaccine will be available to people 65 years and older and to residents of long-term care facilities.

Starting in November, the H1N1 Influenza vaccine will be available to everyone who needs and wants it.

Early in 2010, the seasonal Influenza vaccine will be offered to everyone else less than 65 years of age according to the guidelines for British Columbia.

The decision to focus on the seasonal and H1N1 Influenza vaccine campaigns in this way has been based on a number of reasons, including:

- The possibility of an early-fall, second-wave of H1N1 Influenza
- The timing of H1N1 Influenza vaccine availability
- The seasonal strains of the Influenza virus that are currently circulating
- Canadian research that has suggested a potential association between prior seasonal Influenza vaccination and the risk of possibly acquiring H1N1 Influenza


For more information about accessing the seasonal Influenza vaccine, clinic locations and time of clinics, visit: www.immunizebc.ca.

For more information on the H1N1 Influenza virus, visit: www.gov.bc.ca/h1n1

Questions? Please contact your local Community Health Nurse or your local health care worker with any questions you have related to H1N1 Influenza or seasonal Influenza A.



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