

**From:** Public & Professional Affairs Department  
**Sent:** November 4, 2020 1:22 PM  
**Subject:** The Weekly: CPhA's COVID-19 Update for November 4



**November 4, 2020**

## **CPhA**

### ***TODAY: Women in Pharmacy Leadership Empowerment Panel — Hidden burdens: The impact of COVID-19 on women in pharmacy***

CPhA is pleased to launch its new webinar series, the Women in Pharmacy Leadership Empowerment Panels. Join us today, November 4, from 3:30-5:00 pm ET for the first session, Hidden burdens: The impact of COVID-19 on women in pharmacy. We know that COVID-19 has turned our world upside-down. We also know that women have been disproportionately affected, often bearing the weight of additional responsibilities that have arisen due to the pandemic. Sponsored by Shoppers Drug Mart, this panel will be moderated by Kelly Grindrod, associate professor at the University of Waterloo School of Pharmacy and CPhA's 2020 Canadian Pharmacist of the Year, who will be joined by a diverse panel of pharmacists from across Canada to discuss their unique experiences and ways they have worked through challenging situations. [Register here](#). Can't make it today? Register anyway to receive a link to the session recording once it's available.

CPhA's COVID-19 web pages are being updated regularly at [www.pharmacists.ca/covid19](http://www.pharmacists.ca/covid19) and [www.pharmacists.ca/covid19fr](http://www.pharmacists.ca/covid19fr).

## **Provincial**

### ***What it's like to be a COVID-19 'long-hauler': fatigue, persistent symptoms, organ function changes***

Cordell Hilderman, a pharmacist/pharmacy manager in Saskatoon, has been struggling with lingering COVID-19 symptoms for 7 months, [reports CBC](#). He was one of the first people in Saskatchewan to be diagnosed with COVID-19. Today, he is still experiencing symptoms and is unable to work. "I just get this stronger malaise come over me. I can describe it maybe as a headache. But it's not like headaches that we normally get. It's just kind of more of the tightness, a feeling of fatigue and discomfort at the same time," said Hilderman.

## **National**

### ***Get your COVID-19 testing questions answered***

This evening, November 4, Whole Health Pharmacy Partners is presenting a Q&A session in which pharmacists will speak to their experience providing asymptomatic COVID-19 testing in their pharmacies. The session begins at 7:00 pm ET. [Register here](#).

### ***Who should get a COVID-19 vaccine first in Canada? New formal advice released***

Canadians have been given their first look at who could be prioritized once a COVID-19 vaccine becomes available in this country, says the [The Star](#). A national advisory body tasked with giving immunization advice released its first set of guidelines on November 3. They suggest the elderly and the high risk as well as health care and essential workers should be first in line for a vaccine. The National Advisory Committee on Immunization's guidelines are not binding but are designed as advice to public

health bodies to “minimize serious illness and overall deaths while minimizing societal disruption as a result of the COVID-19 pandemic.” They’re based on the assumption that once a vaccine becomes available, there won’t be enough to go around — at least not at first. To that end, the guidelines are designed to plan out an “efficient, effective and equitable allocation.”

### ***New recommendations for non-medical masks***

The country’s top doctor unveiled new recommendations on November 3 for non-medical masks, saying they should be made of at least 3 layers and stressing their importance as the country heads indoors for winter amid a surging COVID-19 case count, says the [Canadian Press](#). Face masks should comprise 2 layers of tightly woven fabric such as cotton or linen, plus a third layer of a “filter-type fabric” such as polypropylene, according to the Public Health Agency of Canada. “We’re not necessarily saying throw out everything that you have,” Dr. Theresa Tam, Canada’s Chief Public Health Officer, said at a news conference. “The fit is the most important thing,” she said, emphasizing a nose pinch and full coverage of nose and mouth, but also comfort and breathability.

### ***More calls for transparency as feds request help to distribute COVID vaccine***

Public Works Canada is looking for logistics and support services to help distribute COVID-19 vaccines once they become available, [iPolitics reports](#). That’s in spite of the fact that Ottawa hasn’t yet said how it will distribute and store the vaccine, nor who will receive it first and who will administer it. Public Works is in charge of procurement, and after its bidding process is done, it plans to award a contract by November 23. According to the tender notice, the department is looking for freight- and cargo-handling services, trucking, warehousing, and pharmaceutical and medical advisory services.

### ***Canada says stronger response needed to fight coronavirus, PM hopes to avoid major shutdown***

Canadians need to do more to tackle a second wave of the coronavirus by slashing the number of personal contacts they have with others, [according to Reuters](#). Prime Minister Justin Trudeau says more targeted measures could help avert another major national shutdown of the kind that hammered the economy earlier in the year. Released modelling updates show the cumulative death toll in the country could range between 10,285 and 10,400 by November 8. Cumulative cases could be between 251,800 and 262,200 by the same date. “[The] long-range forecast indicates that a stronger response is needed now to slow the spread of COVID-19,” Chief Public Health Officer Theresa Tam told a briefing. “If we decrease our current rate of contacts by 25% the epidemic is forecast to come under control in most locations,” she said.

### ***Canada’s COVID-19 Alert app updated to include more precise exposure information***

Prime Minister Justin Trudeau says the COVID Alert app can now provide more precise information to people who are exposed to the virus, [reports the Canadian Press](#). There have been approximately 4.9 million downloads of the federal COVID-19 exposure [notification app](#) so far, with 2,939 Canadians using it to report a positive coronavirus test. Alberta and BC are the final 2 provinces that have yet to activate the app. Trudeau says users who test positive for COVID-19 can enter the time their symptoms started or the date they were tested. This information is important to figure out when they were most infectious to others, and those who are exposed can better estimate the time period they were at risk. Health Canada says the tweak aligns more closely with public health guidance, as symptomatic individuals are most infectious from 2 days before their symptoms began.

### ***Canada and other wealthier countries undermining efforts to ensure equitable distribution of COVID-19 vaccine, report warns***

A “shopping spree” by Canada and other high-income countries to secure large quantities of COVID-19 vaccines is undermining global efforts to ensure people in developing countries aren’t pushed to the back of the line, [reports the Globe and Mail](#). Researchers with Duke University’s Global Health Innovation Center (GHIC) analyzed the wave of announcements made in recent months by these countries to secure priority access to COVID-19 vaccine candidates in the event that the vaccines are approved for use. The research found that, to date, these agreements with pharmaceutical companies by high-income countries and a few middle-income countries have secured access to nearly 3.8 billion doses, with options for another 5 billion. The researchers warn that these one-off agreements run contrary to the commitments of Canada and more than 170 other

countries that have signed on to support the COVAX Facility. The aim of COVAX is to ensure equitable access for all countries to a COVID-19 vaccine.

### ***Canadian company's COVID-19 vaccine candidate begins clinical trial in Australia***

Canadian company Symvivo Corporation says it has begun clinical trials for its oral COVID-19 vaccine. The clinical-stage biotechnology company based in Burnaby, BC, announced on November 2 the enrolment and dosing of the first healthy volunteer in its bacTRL-Spike COVID-19 Phase I clinical trial in Australia. “We are exceptionally pleased to commence dosing of our oral DNA vaccine for COVID-19 as we continue scale-up and manufacturing activities for future clinical development,” Symvivo’s Chief Medical Officer Eric Sievers said in a [press release](#). The company says bacTRL-Spike has 2 key advantages over other vaccines: it can be taken orally as a capsule instead of by injection, and it is stored at room temperature, bypassing cold-chain supply logistics.

## **International**

### ***Pharmacy interns and techs who meet HHS requirements can administer childhood, COVID-19 vaccines***

The US Department of Health and Human Services (HHS) has released guidance that expands the immunization authorities of state-licensed pharmacy interns and “qualified” pharmacy technicians during the public health emergency, [says the American Pharmacists Association \(APhA\)](#). Interns and techs who meet conditions set forth by HHS will not only be allowed to administer Advisory Committee on Immunization Practices (ACIP)-recommended childhood vaccines (ages 3 to 18) and FDA-authorized or licensed COVID-19 vaccines and tests (ages 3 and older)—including serology tests—but also they will be granted liability coverage for these duties during the public health emergency.

### ***41% drop in patient safety incidents reported in April-June may be due to pandemic***

There was a 41% decrease in the number of patient safety incidents reported between April and June, compared to the year before, the UK’s National Pharmacy Association (NPA) said in an [article in C+D](#). The NPA shared the data in its latest medication safety officer (MSO) report, published in late October. The report also found that the number of patient safety incidents reported in April, May and June decreased by 45% compared to the first 3 months of 2020. This drop “may be due to the increased workload and pressure on pharmacy teams due to [the] COVID-19 pandemic, whereby pharmacy teams may not be prioritizing reporting of patient safety incidents,” [the MSO report said](#). The report includes an “important reminder” for pharmacy teams to “continue to report, investigate and analyze patient safety incidents” in light of the reduction in incidents flagged.

### ***Regeneron to stop enrolling very sick COVID-19 patients in antibody trial***

Regeneron Pharmaceuticals said it would stop enrolling patients receiving advanced COVID-19 care in a trial testing its experimental antibody treatment in hospitalized patients, based on the recommendation of an independent safety board, [reports Reuters](#). The recommendation was based on a potential safety signal and an unfavourable risk-benefit profile at this time, the company said. Rival Eli Lilly and Co stopped enrolling such patients based on a similar suggestion last week.

### ***Britain starts accelerated review for AstraZeneca’s potential COVID-19 vaccine***

AstraZeneca said on November 1 that Britain’s health regulator has started an accelerated review of its potential coronavirus vaccine. In rolling reviews, regulators are able to see clinical data in real time and communicate with drug makers on manufacturing processes and trials to accelerate the approval process, [says Reuters](#). AstraZeneca’s COVID-19 vaccine is being developed along with the University of Oxford. It was reported last week that the Medicines and Healthcare products Regulatory Agency (MHRA) has also begun an accelerated review of the COVID-19 vaccine candidate from Pfizer. AstraZeneca and Pfizer are among the front-runners in the race to develop a vaccine for the coronavirus, with the race also including Johnson & Johnson and Moderna. Their vaccine candidates are in late-stage trials, interim data from which are expected in the coming weeks.

### ***Contact tracers eye cluster-busting to tackle COVID’s new surge***

As a resurgent coronavirus sweeps across Europe and the US, some health experts are calling for a “cluster-busting” approach to contact tracing like the one Japan and other countries in Asia have used with success, [reports Bloomberg](#). Rather than simply tracking down the contacts of an infected person and isolating them, proponents advocate finding out where the individual caught COVID-19 in the first place. That extra step, known as backward tracing, exploits a weak spot of the virus — the tendency for infections to occur in clusters, often at super-spreading events.

## Newsorthy

### ***It may be time to reset expectations on when we'll get a COVID-19 vaccine***

The ambitious drive to produce a COVID-19 vaccine at warp speed seems to be running up against reality. Pauses in clinical trials to investigate potential safety issues, a slower-than-expected rate of infections among participants in at least 1 of the trials, and signals that an expert panel advising the Food and Drug Administration (FDA) [may not be comfortable](#) recommending use of vaccines on very limited safety and efficacy data appear to be adding up to a slippage in the estimates of when vaccine will be ready to be deployed. [STAT reports](#) that we all probably need to reset our expectations about how quickly we're going to be able to be vaccinated.

## Worth Repeating

“What’s clear is that this is not just a virus that kills people. To a significant number of people, this virus poses a range of serious long-term effects. While people do recover, it can be slow, sometimes weeks or months. – The World Health Organization’s Director General Dr. Tedros, speaking at a WHO COVID-19 news conference last week.

“We hear a lot of people saying, ‘why are we making such a big deal of COVID, because the death rate is very low’ ... The death rate is one thing, but nobody's been talking about the possible long-term morbidity that could be associated with this disease.” – Saskatoon pharmacist Cordell Hilderman, a COVID-19 ‘long-hauler,’ [wants people to take the COVID-19 virus seriously](#).

*This weekly COVID-19 update is compiled by the Canadian Pharmacists Association. To unsubscribe, please reply to this email with “Unsubscribe” in the subject line.*

Please note that this publication is meant to inform and is not a comprehensive list of information available. Be sure to check with your provincial regulatory authority or advocacy association for province-specific information. While we aim to ensure all information contained in this update is accurate, the situation is evolving rapidly and CPhA does not take responsibility for the content provided by other organizations and sources.