



Saskatchewan
Health

Public Pandemic Influenza Plan



March 2006

Saskatchewan Health's Public Pandemic Influenza Response Plan

A message from Saskatchewan's Chief Medical Health Officer

Every winter strains of influenza circulate through our province as they make their way around the world. These viruses often cause local outbreaks and even regional epidemics. The extent varies from year to year. People are exposed to different strains many times throughout their lives, thereby developing some form of protection against the slightly changed virus. Influenza vaccines are changed each year in an attempt to provide the best match with the strains likely to come around.

Periodically, however, a major change in the genetic make-up of the influenza A virus will occur and a new subtype (novel strain) will suddenly appear. The immunity that people have developed to the influenza that occurs every year will not be helpful against the new subtype because it is a completely different strain. If the new strain is transmitted easily from person to person and causes higher rates of disease and complications it is called a pandemic strain.

Even in a normal year, serious complications and death from influenza do occur – especially in the very young, the elderly and those with chronic medical conditions. To reduce these impacts Saskatchewan Health encourages all residents to get a flu shot every year, and provides free flu shots for those in high-risk groups.

We do not have a pandemic influenza in Canada or anywhere in the world at this time.

It is not possible to predict when the next influenza pandemic will occur or how serious its impact will be. However, since there may be little warning, the federal government, Saskatchewan Health, the Regional Health Authorities, and municipal governments along with other governments and agencies around the world are preparing to respond when the next pandemic arrives.

The purpose of Saskatchewan Health's *Pandemic Influenza Preparedness Plan* is to provide a framework to assist the provincial government, regional health authorities, municipalities, First Nations and other key stakeholders to develop their own plans in preparation for a pandemic.

In the event of a pandemic, the priorities at the provincial and local levels will be to assure the ongoing delivery of essential health care services, both for prevention and treatment, while providing assistance to meet the emergency needs of the affected population.

The pandemic influenza response plan is a living document that is continuously updated and revised as new information becomes available.

This Pandemic Plan provides a mechanism to guide appropriate decision-making and action when it may be needed.

Planning for emergencies of any kind involves an assessment of risk and decisions about the limits of what you are able to plan for. Emergencies will not occur in the exact manner for which you have planned, so in fact the most important components of a plan are basic ones, which can be used in responding to a number of different types of situations. The communication and decision making structures used to implement and adapt a plan should work for many kinds of emergencies. The least useful components are those which deal with only one type of emergency, may never have any other benefit, or involve large resource investments to handle very unlikely scenarios.

With pandemic planning, and with planning for other emergencies, it is useful to keep a balanced perspective. What you may not realize is that many of us have already lived through one or two pandemics (1957 and 1968). In 1977 there was a major antigenic shift in influenza A which did not result in a pandemic.

We anticipate that another major shift in influenza viruses will occur, and appropriate planning and preparation for it are the keys to decreasing the impact of the next pandemic strain. Saskatchewan will continue to work on this issue.

Dr. Ross Findlater

Some Basic Facts about Influenza/Pandemic Influenza

What is pandemic influenza?

How is influenza different from ordinary 'flu'?

The term "flu" is a non-specific term used by different people to mean different things ranging from actual influenza to any illness that causes diarrhea and vomiting (sometimes called stomach flu) or other collections of symptoms like fever or muscle aches.

Influenza is an infectious respiratory disease caused by an influenza virus. It generally causes fever, chills, headache, sore throat, cough, stuffy or runny nose, and/or muscle pains. Some people may feel sick to their stomach, vomit and have diarrhea. Influenza spreads rapidly from person to person –by droplets from a simple cough or sneeze, or by contact with something recently contaminated by infectious fluids from the nose and throat of an ill person (like shaking hands with someone whose hands have been contaminated).

Real influenza is only caused by influenza viruses. It is generally much more serious than a common cold.

Seasonal Influenza vs. Pandemic Influenza – What's the difference?

There are three types of influenza viruses, but only Type A and Type B cause significant disease in humans. Type A influenza viruses mutate frequently and cause local outbreaks and regional epidemics during influenza season each year. A person may be infected by these viruses multiple times throughout their

There is no pandemic influenza virus in circulation currently.

life, thus developing some form of immunity against the slightly changed viruses. In an average year there are between 12 and 50 deaths from influenza in Saskatchewan.

A pandemic means an epidemic of any disease over a wide geographic area affecting a large proportion of the population.

Pandemic influenza occurs when a major *new* subtype of influenza A virus appears against which the entire human population has little or no immunity. It spreads rapidly and widely, and causes more severe disease and more deaths than a seasonal influenza. Pandemic influenza has occurred on average about once every 30 – 40 years since 16th century, with the last one hitting almost 40 years ago. In the last century, there were three influenza pandemics:

- The Spanish Flu in 1918-1919 killed an estimated 30,000 to 50,000 people in Canada and 20 – 40 million people worldwide;
- Asian Flu in 1957-1958 resulted in about one million deaths worldwide;
- Hong Kong Flu in 1968 -1969 killed less than one million people worldwide.

Both Type A and Type B influenza viruses can cause seasonal influenza, but only Type A viruses can cause pandemic influenza.

Although the avian flu H5N1 virus has spread in a number of countries, this virus has rarely infected humans. There is currently no evidence of efficient and sustained human-to-human transmission that would be necessary for the avian flu virus to become a pandemic virus strain.

How would pandemic influenza affect Saskatchewan?

While the next influenza pandemic is inevitable, it is not possible to predict the timing and impacts associated with it. However, effective planning can reduce its effect on people and society in general.

For planning purposes, it is necessary to make a number of assumptions. These are based on the historical evidence and available scientific information. It is assumed that the next pandemic virus will arrive in Canada within three months after it emerges in another part of the world and the first peak of illness will occur two to four months after that.

A pandemic may have more than one wave and each wave will last likely six to eight weeks. A mathematical model developed by the U.S. Centres for Disease Control is used to provide an estimate of numbers of people who could become ill. This calculation is based on the assumption that between 15% and 35% of the population would be affected. The number of people in Saskatchewan that would be affected is estimated to be:

150,000 to 350,000 people could become clinically ill.

- 150,000 – 350,000 people could become clinically ill;
- 60,000 – 160,000 people could require outpatient care;
- 1,000 to 2,800 people could require hospitalisation;

- 300 to 1,000 could die from influenza or complications of influenza.

A pandemic influenza is a global public health emergency and different than a natural disaster that would typically involve only a very localized area. Many communities throughout Canada and worldwide could be affected simultaneously with large numbers of severely ill people and deaths. A pandemic influenza will have prolonged effects on health services and the entire society. For example, there could be increases in absenteeism from the workplace due to illness, or people staying home to look after sick children. This will have an impact on the ability of organizations to deliver health and other essential services (fire, police and ambulance).

What is being done to prepare for a pandemic influenza in Saskatchewan?

Pandemic influenza planning is an important part of *health* emergency planning in Saskatchewan and is a priority for Saskatchewan Health. The Saskatchewan Pandemic Influenza Steering committee was formed in 1999. The committee developed the

first draft of the provincial pandemic influenza contingency plan in 2001 based on the national guidelines and local/regional input. The Saskatchewan Health Pandemic Influenza Preparedness Plan is a living document that is revised and updated regularly as new information or recommendations become available. The information outlined below is a synopsis of the detailed technical document.

The Saskatchewan Health Pandemic Influenza Preparedness Plan provides a framework to assist the provincial government, regional health authorities, municipalities, First Nations communities and other sectors to develop their *own* plans in preparation for a pandemic influenza. It clarifies the roles and responsibilities of government, health regions and other agencies and addresses the issues in pandemic planning and response. The goal of the plan is to reduce illness and death as well as societal disruption by providing access to appropriate prevention, care and treatment during an influenza pandemic.

Planning and preparation is well underway at both provincial and regional levels. Saskatchewan Health is working with Regional Health Authorities and other partners in health service delivery to ensure an effective and coordinated response in the event of a pandemic. Saskatchewan Health also supports other government departments and Crown corporations to incorporate pandemic influenza preparedness into their business continuity plans.

Saskatchewan has taken a balanced and multi-faceted approach in pandemic preparedness to address key issues in prevention and preparedness, response, and post pandemic recovery. The provincial health pandemic plan takes into account the need to balance uncertainties around planning and preparation for a possible pandemic against the daily demands of the health care system.

Many municipal governments and businesses throughout the province are also making contingency plans to ensure the continued delivery of essential services in the event of a pandemic.

Who is responsible for what during a pandemic?

Many groups and agencies have a role to play in planning for and responding to an influenza pandemic.

International:

The World Health Organization (WHO) www.who.int/csr/disease/influenza/pandemic/en/ watches for and tracks the emergence of new strains of influenza around the world. The WHO determines the level of pandemic alert and when to move from one phase to another. It will be the WHO that declares a pandemic on an international level and notifies federal health authorities.

Federal:

The federal government holds responsibility for the nationwide coordination of the pandemic influenza health response, including surveillance, international liaison, and coordination of the vaccine response (the way vaccines are obtained, allocated and funded).

It is up to the federal government to activate the Canadian Pandemic Influenza Plan once a pandemic is declared.

The First Nations and Inuit Health Branch (FNIHB) and Northern Inter-Tribal Health Authority (NITHA)

FNIHB/NITHA is responsible for working with First Nations (FNs) and Inuit communities on reserves to ensure that:

- planning for pandemic at the community level is taking place;
- communities have pandemic plans and they are closely linked with their neighbouring jurisdictions/RHAs;
- the needs of FNs are considered in planning, and;
- health services are available and accessible in the event of emergency.

For information on pandemic planning on reserve FNs in Saskatchewan please visit the following websites:

http://www.phac-aspc.gc.ca/cpip-pclcpi/pdf_appendix/appendixb_e.pdf and www.nitha.com

Provincial:

The province has the responsibility for coordinating pandemic influenza planning and mobilizing contingency plans and resources in the province. Health emergency response begins at the local (regional health authority) level.

The Saskatchewan Health Pandemic Influenza Preparedness Plan provides a framework for activities to be carried out in each pandemic period.

Regional Health Authorities:

Regional Health Authorities (RHAs) are responsible for planning the local response to a pandemic according to provincial and national guidelines. This includes planning health services delivery and working with local partners (e.g., emergency responders, mortuary services) in advance of a pandemic to ensure a coordinated response when pandemic influenza strikes.

Other key players that will be affected by pandemic influenza and are in various stages of contingency planning include:

- Municipalities
- Schools
- Health care professionals
- Non-government organizations
- Business sectors

Threat Levels for Pandemic Influenza

The World Health Organization has identified four levels indicating the threat of a pandemic, which have been adapted by the Canadian Pandemic Influenza Planning Committee.

They are:

Interpandemic Period

No new viruses detected in humans. This is normally considered the period *between* pandemics.

Pandemic Alert Period

There are several levels within this category based on a number of criteria such as;

- whether a new virus has been detected;
- how people are being affected; and
- whether the virus is able to spread from person to person.

Globally, we are currently in the pandemic alert period.

Pandemic Period

There are three levels within this period ranging from;

- increased transmissions of the virus outside of Canada to;
- sporadic infections detected in Canada to;
- widespread pandemic activity within the Canadian population.

Post-pandemic Period

This is a period of recovery following the pandemic period.

Each period requires a series of recommended activities by all levels of government and various agencies. In the health sector, these activities ensure the system is prepared to detect, report, analyse and respond to any cases of human illness caused by the new virus, and to manage the demands on the health system should an outbreak of illness or pandemic occur.

Saskatchewan Health's Influenza Pandemic Preparedness Plan

About Saskatchewan's Plan

Saskatchewan Health's Pandemic Influenza Health Preparedness Plan was first developed in 2001 by the Saskatchewan Pandemic Influenza Steering Committee. It is based on the federal plan and continues to be revised and updated as new information becomes available.

The preparedness plan is divided into three sections representing three pandemic periods (Pandemic Alert, Pandemic and Post Pandemic periods), and outlines actions to be taken in the following key areas:

- Surveillance;
 - Immunization and Antivirals;
 - Health Services;
 - Infection Prevention and Control;
- The plan is divided into three sections:
Pandemic Alert,
Pandemic and Post
Pandemic
- Emergency Response; and
 - Communications.

Pandemic Alert Period

During this period there are escalating phases characterized by different levels of pandemic influenza threats. These include:

1. Human infection(s) with a new subtype are occurring, but no human-to-human spread, or at most rare instances of spread to a close contact has been observed. **(This is the current situation as of March 2006)**
2. Small cluster(s) with limited human-to-human transmission are occurring but spread is highly localized, suggesting that the virus is not well adapted to humans.
3. Larger cluster(s) are occurring but human-to-human spread still localized, suggesting that virus is becoming increasingly better adapted to humans but may not yet be fully transmissible (substantial pandemic risk).

Surveillance

Surveillance is the collection, analysis and sharing of information about influenza. This information is used to determine when, where and which type of influenza virus is circulating. This surveillance will also ensure we have the greatest possible advance warning of the arrival of the next pandemic.

The World Health Organization tracks the global movement of influenza viruses.

In Canada, the Public Health Agency of Canada collaborates with provincial / territorial departments of health, laboratories and physicians across the country in a program called Fluwatch www.phac-aspc.gc.ca/fluwatch that tracks influenza activity in this country.

Provincially and in health regions, the Saskatchewan influenza surveillance network includes laboratory surveillance, and disease surveillance through sentinel physicians (a type of lookout position) and community sites throughout the province. The sentinel program monitors outbreaks of influenza through reports from sentinel physicians, helping to detect cases that would not be seen in hospitals or other public facilities.

The Provincial Laboratory will enhance its capacity for pandemic response during this period.

Antiviral Drugs

Antivirals are drugs that act directly against viruses, just like antibiotics do against bacteria. When taken within 48 hours of developing influenza symptoms, antiviral drugs reduce the severity and duration of the illness. Antivirals are also effective at preventing influenza, however they must be taken continuously for the time that one wants to be protected. They have no lasting effect.

Antiviral stockpile is an important component of pandemic influenza preparedness. As vaccines **will not** be available for the early months of the pandemic, antivirals such as Tamiflu will be the only temporary and virus specific medication during the initial pandemic response.

Given that the supplies of antivirals (Tamiflu or Relenza) are very limited in the world, stockpiling of antiviral drugs is recommended.

... pandemic alert period

Options on the size, composition and use of the National Antiviral stockpile are being reviewed in the context of new scientific knowledge.

The use of antivirals should be combined with other public health measures, including proper personal hygiene such as frequent hand washing to reduce the spread of the virus.

Immunization/Vaccine

Each year, Saskatchewan Health and the RHAs promote influenza immunization (flu shots) at the beginning of the common flu season in the late autumn. This yearly production of vaccine also helps to strengthen the capacity for vaccine production, distribution and administration necessary for a pandemic response.

During a pandemic, immunization would be the primary means to prevent disease and death. However, a vaccine will not be immediately available when a pandemic first arrives in Canada.

The development of a vaccine specific to the "pandemic strain" of the virus will take some time (up to several months). When the vaccine *is* developed, there will be limited supply initially. During this Pandemic Alert period, the province and regional health authorities will plan influenza immunization for the priority groups recommended by the National Pandemic Influenza Planning Committee.

(For example, front-line health providers are currently given first priority) These groups are subject to change once the epidemiology (who is most at risk) of the virus is determined.

The development of a vaccine may take several months.

Mass immunizations are the most effective way of providing immunization to a large number of people over a short period of time. During this pandemic alert period Saskatchewan Health will continue to work with RHAs on advance planning to ensure that, when a pandemic arrives and a vaccine *is developed*, it is delivered in the fastest, most efficient way possible. In addition, during this period, pneumococcal immunization coverage will be increased to protect vulnerable groups against major complications of influenza.

Health Services

Regional Health Authorities (RHAs), working with Saskatchewan Health, are developing plans for the best use of health care providers, facilities and equipment during a pandemic. The RHAs have responsibility for the development of triage systems and to create detailed plans for reallocation of resources or reduction of non-essential services (e.g. postponing elective surgeries). Guidelines for health care professionals will be developed in accordance with the national recommendations.

... pandemic alert period

Infection Prevention and Control

The pandemic alert period provides an opportunity to educate health care workers and the public in prevention strategies such as frequent hand washing and covering coughs.

http://www.health.gov.sk.ca/rr_influenza_treatment.pdf. Regional Health Authorities will develop plans to enhance infection control prevention in health care settings.

Emergency Response

Saskatchewan has established an Emergency Response Management system to identify essential services and resources. These emergency response plans are designed to ensure a coordinated, organized response to all emergencies and disasters.

Communications

The federal government is responsible for providing information to the general public about overall pandemic impact, as well as any infection control measures taken at the national level (e.g. airport closures).

Saskatchewan Health in coordination with Health Canada and the Public Health Agency of Canada will work with a province-wide network of communication professionals in the health regions, to distribute useful information in a timely way.

Pandemic Period

The decision on when to declare a pandemic period is determined by the World Health Organization (WHO). In Canada a pandemic is declared by the Canadian Public Health Agency. A pandemic is when there is efficient and sustained human-to-human transmission of a new influenza virus causing a greater than usual amount of disease and death.

During a pandemic period the activity will focus on providing care for people who are ill, working to minimize the spread of the disease and reduce the societal disruptions

Surveillance

Surveillance during the pandemic period will be enhanced. This will include monitoring of schools and workplaces for absenteeism. The information collected through surveillance will help to guide decision making by indicating when, where and which influenza viruses are circulating, what are the high-risk populations and the intensity and impact of the influenza activity.

Antiviral Drugs

Saskatchewan Health will allocate and distribute antiviral medication to Regional Health Authorities (RHAs). Regional Health Authorities will administer the antivirals in accordance with provincial direction to the people in order of priority.

The WHO decides when to declare a pandemic period.

Immunization/Vaccine

The federal and provincial governments will control the allocation and distribution of vaccine during a pandemic. The goal is to deliver vaccination to the entire population of

Saskatchewan as quickly as possible, in order of priority.

Recommendations for priority groups for immunization will be made by the National Pandemic Influenza Committee and endorsed by the province and Regional Health Authorities. These groups will receive vaccine in order of priority based on availability of supply. Depending on who is most affected by the pandemic virus, the priority groups could change. Regional Health Authorities will implement mass immunization when sufficient vaccine becomes available.

Saskatchewan Health will allocate and distribute vaccine to the pre-determined sites in Regional Health Authorities (RHAs) and First Nations communities.

Health Services

The goal for health service delivery during a pandemic will be to provide the best care for the most people with influenza and non-influenza emergencies, and to reduce the risk of influenza for those with other conditions.

... pandemic period

There will be challenges to meet the increased demands for care at the same time that there may be fewer health providers because of illness. It may be necessary to call up former health care workers and volunteers during peak periods of illness.

If necessary, RHAs will set up and maintain some alternate non-traditional sites for patient care. A checklist of necessary functions and personnel has been prepared for the alternate sites during pandemic alert period that include:

- Administration;
- Patient care;
- Infection control;
- Food services;
- Social services;
- Morgue;
- Transportation;
- Support services (laboratory testing, maintenance, laundry, communications equipment and support);
- Security.

The Provincial Emergency Services Director may apply to Health Canada to activate the National Emergency Stockpile System. This is a collection of essential medical supplies stored in warehouses across Canada that enable a better response to disasters or emergencies with large numbers of casualties.

Infection Prevention and Control

Regional Health Authorities will implement infection control policies in health care settings to prevent infecting vulnerable patients.

In the communities, regional Medical Health Officers have the authority to implement public health measures to slow down the spread of influenza. Schools and daycares may be closed, depending the severity of the pandemic strain and who is most vulnerable to infection and complications. There may also be restrictions on travel or public gatherings.

Emergency Response

A multi-disciplinary team with clear authority and ability to co-ordinate the pandemic response is essential. The emergency response plans will be activated at provincial and regional levels, following confirmation of the arrival of pandemic influenza.

Municipalities will be expected to implement their contingency plans and lead the response activities in their communities as required. Assistance from the province may be requested. The province in turn may request assistance from the federal government.

The province and Regional Health Authorities will work together to monitor the effectiveness of the response at the local level. The response plans will be refined as necessary.

... pandemic period

Communications

The public, Regional Health Authorities, and municipalities will be informed of any measures that need to be taken to protect public health.

The Public Health Agency of Canada will continue to provide information on overall pandemic impact and infection control measures taken at the national level.

Saskatchewan Health and Regional Health Authorities will provide timely updates to Saskatchewan residents through a variety of media including – radio/print/TV/website. This would include regular notification of any significant activity around the province, such as facility closures.

- The Saskatchewan Health website will have an Influenza Pandemic section to provide accurate and timely information.
- The toll-free Healthline 1-877-800-0002 will be available to provide health advice but will also function as a provincial information call centre to provide reliable information.
- Physicians and health care workers will receive materials on prevention and clinical care.
- The media and public will be provided with basic infection prevention information.

next phase, post pandemic period ...

Post-Pandemic Period

The post-pandemic period occurs when the number of cases of influenza returns to normal pre-pandemic levels. During this period, the province, RHAs and other sectors will review, evaluate and take measures to improve or enhance their respective roles following the conclusion of a pandemic influenza.

Surveillance

Surveillance will return to regular monitoring activity, although Saskatchewan Health and Regional Health Authorities will continue to watch for any renewed pandemic influenza. The effectiveness of surveillance during the pandemic will also be evaluated.

Antivirals

The effectiveness of using antivirals during a pandemic will be evaluated.

Immunization/Vaccine

The post-pandemic period will provide an opportunity for more thorough evaluation of the immunization program, which may guide future decisions.

During the pandemic period, the regular immunization program for other diseases may have been delayed or suspended. A period of catch-up for these programs will start.

Health Services

This will be a period of catch-up for non-essential health services that were suspended during the urgent needs of the pandemic. Health human resources will be re-deployed appropriately at this time.

It is recognized there may also be a need for special support services for health care workers and families of victims to cope with the emotional stress of grief and loss.

Infection Prevention and Control

Saskatchewan Health and the Regional Health Authorities will evaluate the infection prevention and control strategies and revise based on lessons learned.

Emergency Response

The provincial government and the Regional Health Authorities will assess the effectiveness of the emergency response and make changes to improve future planning and deal with any issues that may have arisen.

Communications

Saskatchewan Health will notify the public when the pandemic is officially over in this province. Saskatchewan Health will also provide information on the overall health impact of the pandemic on the province.

Regional Health Authorities will continue to provide timely updates on the restoration of services in the community. RHAs will also inform residents of the local and regional impact of the pandemic.

The dedicated website will remain *live* as long as it is needed.

The province and Regional Health Authorities will continue to promote routine influenza immunization and regular immunization programs.

First Nations Communities

The responsibility for delivering health services to First Nations people is divided among the federal government, provincial government, individual bands and Tribal Councils and Regional Health Authorities. This complex administrative arrangement poses some unique challenges for co-ordinating delivery of health services.

First Nations and Inuit Health Branch (FNIHB) and Northern Intertribal Health Authority (NITHA) are working with the First Nations communities that are in various stages of planning for management of pandemic influenza.

Vaccine Distribution

FNIHB is working with Saskatchewan Health to ensure that vaccine distribution for First Nations communities will follow the same pattern as is currently used for the distribution of the annual influenza vaccines.

Health Services

Registered nurses are the most predominant health care provider in remote and isolated communities. In some northern First Nations communities, low population numbers have led to regional, rather than community centred services. Often, people requiring more complex or critical care have been evacuated to larger cities with appropriate services. Plans are being established to determine evacuation criteria and which hospitals will receive patients from each community.

RNs are the most predominant health care provider in isolated communities.

Communications

Pandemic planning teams from each Regional Health Authority will identify a key contact person for First Nations communities within their health region.

For more information on planning for pandemic within

Saskatchewan's First Nation's communities please contact:

- FNIHB Regional Pandemic coordinator at (306) 780-3427
- Pandemic Coordinator FNIHB North Service Centre at (306) 953-8598
- Pandemic Coordinator FNIHB South Service Centre at (306) 332-3505
- Pandemic Coordinator NITHA at (306) 953-0673

For information you can also visit these websites: http://www.phac-aspc.gc.ca/cpip-pclcp/pdf_appendix/appendixb_e.pdf and www.nitha.com

What should I do to prepare my family and myself?

- Follow infection prevention measures – http://www.health.gov.sk.ca/rr_influenza_treatment.pdf
- Plan ahead – It is a good idea to ensure enough food, drink and basic necessities to last for one week. For more information visit www.emergencypreparednessweek.ca
- Plan with neighbours to support each other in case of emergency.
- **During a pandemic** - be alert to the information on the radio, in the newspapers and on the government web site. Saskatchewan Health and the Regional Health Authorities will keep you informed about the availability of immunization and steps you can take to reduce the risk of the illness.
- Visit the Saskatchewan Health website at www.health.gov.sk.ca for more information and updates.

- For more on Canadian planning for Pandemic Influenza visit <http://www.pandemicinfluenza.gc.ca/>

For more background information on pandemic influenza, visit the Canadian Pandemic Influenza Plan <http://www.phac-aspc.gc.ca/cpip-pclcpi>

For more information on a variety of related health topics including preventing influenza, visit the Public Health Agency of Canada at www.phac-aspc.gc.ca

For health advice from qualified registered nurses call *Healthline* toll-free

1-877-800-0002.