

Ministry of Health

Ministère de la Santé

Hospitals and Capital Division  
Provincial Programs Branch

Division des hôpitaux et des immobilisations  
Direction des programmes provinciaux

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**DATE:** April 27, 2020

**MEMORANDUM TO:** AIDS and Hepatitis C Funded Programs

**FROM:** Joanne Lush, Manager  
AIDS & Hepatitis C Programs

**SUBJECT:** **2019 Novel Coronavirus (COVID-19)**

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Greetings:

This is further follow-up to our previous messages regarding COVID-19, as we continue to share the best information we have at this time, in response to the questions we have received. This situation remains unprecedented, fluid and evolving. What is clear is that governments, community-based organizations, industry and individuals are working collaboratively to ensure that we remain responsive and abreast of developments.

### **Q1. Does having HIV place you at greater risk with COVID-19?**

There is limited research on the impact of COVID-19 for people with HIV. Leading organizations, including the United States Center for Disease Control, World Health Organization and International AIDS Society, suggest that people with HIV who take HIV treatments, have healthy immune function and an undetectable viral load, are expected to be at low risk of complications from COVID-19.

However, as in all people, people with HIV who are over age 65 or who have additional comorbidities (e.g., high cholesterol, high blood pressure, diabetes, COPD, kidney disease) are at heightened risk for COVID-19 complications.

All people should be encouraged to follow public health guidelines to avoid contributing to the spread of COVID-19 and to remain safe. If people have specific questions, their primary care provider remains the most appropriate starting place.

To remain abreast of developments with HIV and COVID-19, CATIE is a reliable resource:  
[www.catie.ca](http://www.catie.ca).

**Q2. Does having hepatitis C place you at greater risk with COVID-19?**

There is limited research on the impact of COVID-19 for people with hepatitis C, but there is evidence suggesting that people with viral hepatitis (i.e., hepatitis B or C) are not at increased risk of COVID-19-related illness and possible associated complications *unless* they have advanced liver disease (including cirrhosis) or underlying health conditions, such as hypertension, kidney injury, cardiovascular disease or diabetes. In addition, as with the general population, people with viral hepatitis who are over age 65 are at heightened risk for COVID-19 complications.

All people should be encouraged to follow public health guidelines to avoid contributing to the spread of COVID-19 and to remain safe. If people have specific questions, their primary care provider remains the most appropriate starting place.

For up-to-date information on hepatitis C and COVID-19, CATIE is a reliable resource: [www.catie.ca](http://www.catie.ca).

**Q3. Can people access testing for hepatitis C, HIV or other sexually transmitted infections?**

We have been advised by the Public Health Ontario Laboratory that HIV and hepatitis C diagnostic testing protocols and services remain in place.

For access to testing services, clients should be encouraged to contact their primary care physician, local public health unit, or clinic where they wish to obtain testing. Ultimately, decisions on health unit and other testing site services will be made by the organizations providing these services. While some sites have closed, others are providing telephone counselling, redirecting clients to their primary care physician, and/or providing testing (and treatment) to clients who are deemed to have had a high-risk exposure, have symptoms of an STI or are a contact of someone who has an STI.

- For current information on health unit services, refer to your local health unit's website. <http://www.health.gov.on.ca/en/common/system/services/phu/locations.aspx>.
- For information on service access for sexual health clinics, such as those offered by a Community Health Centre, refer to the organization's website. To find services around you, visit [www.hiv411.ca](http://www.hiv411.ca).
- The Sexual Health Infoline Ontario and eChat (SHILO) are closed during this time.

**Q4. The 30-day limit on prescription medications is resulting in more trips to the pharmacy and increasing out-of-pocket costs. Is there anything that can be done?**

The Ministry of Health has recommended that pharmacists and dispensing physicians provide no more than a 30-day supply of medications. This directive is intended to protect supply and prevent stockpiling of medications. However, this can increase dispensing fees, paid per medication and each time a prescription is filled. This can also require people to visit the pharmacy more often, which contradicts the advice that people with comorbidities reduce their risk of COVID-19.

What can be done?

- Pharmacists can use their discretion to make exceptions and provide a longer supply. Anecdotally, we are hearing that some people are obtaining more than a 30-day supply, and clients for whom this limitation creates undue hardship, or a risk of treatment interruption, should be encouraged to work with their physician and/or pharmacist to obtain what they need.
- Many pharmacies now offer delivery services and a signature is no longer required at the door. Individuals should be encouraged to contact their pharmacy directly to investigate delivery options and any changes to their services.

For a detailed overview of the Ministry recommendations to drug dispensers:

[http://www.health.gov.on.ca/en/pro/programs/drugs/opdp\\_eo/notices/exec\\_office\\_20200320.pdf](http://www.health.gov.on.ca/en/pro/programs/drugs/opdp_eo/notices/exec_office_20200320.pdf)

To review Ontario Pharmacy Association guidance to pharmacists:

[https://www.opatoday.com/Media/Default/Default/2020-03-22\\_EO\\_Notice\\_Supplementary\\_FAQ\\_Final.pdf](https://www.opatoday.com/Media/Default/Default/2020-03-22_EO_Notice_Supplementary_FAQ_Final.pdf)

**Q5. There have been media reports that there are risks to the supply of medications because of the COVID-19 pandemic. What is being done?**

The federal and provincial governments, along with industry, have identified the risks posed by COVID-19 to medication access as a high priority and are taking steps to mitigate it (see <http://cmajnews.com/2020/04/02/covid-patent-1095862/>). At the same time, McKesson (Canada's largest drug distributor) has indicated that the global supply chain is stable and current stocks should last until fall (see <https://nationalpost.com/opinion/john-ivison-the-reality-about-food-and-drug-shortages-due-to-covid-19>).

There are also steps being taken within our networks to monitor the issue:

- we have established an open line of communication with ministry colleagues overseeing drug programs, to signal issues as they arise and to monitor changes to the drug supply;
- the Ontario HIV Treatment Network has set up a system for ongoing communication with the Ontario HIV Outpatient Clinic Network where HIV clinics can communicate drug supply issues; and
- we are in regular contact with a few connected pharmacists, clinicians and people with HIV who are all keeping their ear to the ground to ensure that as things change, we are all remaining abreast of developments.

**Q6. Where can I find resources on how best to support my staff? Are there resources for mental health supports?**

The COVID-19 crisis has placed unprecedented challenges on all of us as we cope with a rapidly changing response. We have heard from many of you (staff and managers) asking for resources to support mental health, wellness and reduce harms associated with substance use. The AIDS and Hepatitis C Programs has compiled a list of resources from the federal and provincial governments, as well as other mental health, substance use, and addictions organizations.

Please share the attached Mental Health Resources document with all your staff and colleagues. We encourage everyone to use these free resources which include telephone supports, crisis lines, online counselling, live chats, and other strategies for coping during these times.

**Reminder:** For those agencies that have an Employee Assistance Program (EAP), please note that EAPs are also available to all staff and managers. They can provide individual counselling sessions and other resources for support.

For tips on how best to support your staff teams, the AIDS Bereavement and Resiliency Program of Ontario (ABRPO) has put together a webinar for managers:

- Visit <https://abrpo.org/abrpo-news/>
- Scroll to bottom of the page to watch 'How to support your teams during COVID 19, a webinar for Managers' with presenter Chris Leonard

We encourage all funded programs to continue to liaise with your local public health units and to regularly check the Public Health Ontario, Ministry of Health, and Public Health Agency of Canada websites, as they are updated frequently.

**Ontario Ministry of Health**

<https://www.ontario.ca/page/2019-novel-coronavirus>

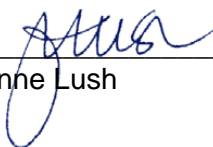
<https://covid-19.ontario.ca/>

**Public Health Agency of Canada** (includes links to financial and economic supports)

<http://www.canada.ca/coronavirus>

**Public Health Ontario**

<https://www.publichealthontario.ca/en/diseases-and-conditions/infectious-diseases/respiratory-diseases/novel-coronavirus>



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Joanne Lush