

## Why prevention matters

Considering the impact of post COVID-19 condition (PCC) on labour, education and communities, preventive measures are recommended. Since PCC follows a COVID-19 infection, preventing the infection means decreasing the risk of PCC.



## The CAN-PCC Collaborative suggests

### Vaccination



- **additional doses** in people previously immunized
- **primary series** in people not previously immunized

The benefit may be greater for populations at higher risk of post COVID-19 condition (e.g., female gender, higher BMI, middle-age). Timing of COVID-19 vaccine doses should be informed by current national or provincial guidance.

### Ventilation / Air Filtration



- **optimizing indoor ventilation:** mechanical ventilation (e.g., HVAC system, portable units) or natural (e.g., opening a window)
- **usage of air filtration systems:** HEPA, MERV-13, in-room HEPA filter air cleaners and DIY-type Corsi-Rosenthal Boxes

Settings that are a priority for ventilation improvements include public settings where there is close contact, crowding, or closed spaces. Air filtration may also help reduce other airborne infections.

### Masking



- for caregivers, workers and visitors in **long-term care homes**
- for asymptomatic staff, patients and support persons in **out-of-hospital clinical settings**
- for asymptomatic adults in **community settings**

During high transmission risk there is a small, but important additional benefit of masking with a respirator (N95/KN95) compared to a medical/surgical mask in all the above settings.

Scan the QR code for all CAN-PCC recommendations on prevention or click the links above to access the respective recommendations.

Corresponding tools ([implementation considerations](#), [text modules](#), [printing templates](#)) are available further along in this document.





## Vaccination

**Timing** of COVID-19 vaccine doses should be informed by **current national or provincial guidance** (e.g., [National Advisory Committee on Immunization](#), [Comité sur l'immunisation du Québec](#)).

Efforts should be made to ensure that **vaccines** are easily **available**.

Suspected **adverse events** following immunization should be reported in accordance with standard provincial/territorial processes (see the [Brighton Collaboration](#) for case definitions and possible approaches).

As vaccine rollout has been implemented across Canada, **existing approaches** and implementation across the country should be **built upon**.

### Previously immunized



It is suggested to administer additional doses of COVID-19 vaccines (authorized mRNA or protein based) 6 months (minimum of 3 months) after the last dose of COVID-19 vaccine in adults.

Program evaluation should be undertaken to assess the incremental benefit of additional boosters, including for sub-groups (e.g., those not at high risk for post COVID-19 condition).

### Not previously immunized



The vaccination with a primary series COVID-19 vaccine (authorized mRNA or protein-based) is suggested for adults.

There might be a benefit for populations at higher risk of PCC (e.g., female gender, higher BMI, middle-age).

Additional information to understand vaccine refusal and hesitancy in this group, along with barriers and facilitators, would be needed to support implementation.

Scan the QR code for a list of all CAN-PCC vaccine recommendations or click the links above to access the respective recommendations.

For plain language recommendations please see [can-pcc.recmag.org/plain-language-recommendations](https://can-pcc.recmag.org/plain-language-recommendations).





## Ventilation / Air Filtration

**Inform the public** on how to assess and improve indoor ventilation. CO<sub>2</sub> monitoring may be a helpful tool in gauging the effectiveness of indoor ventilation.

**Prioritize public settings with close contact, crowding, or closed spaces** like community/ outpatient clinical settings (e.g., primary care, ambulatory care) or congregate living settings (e.g., long-term care homes, detention centres, group homes, shelters, workplace).

There may be **additional benefits** to overall indoor air quality improvement and prevention of **other respiratory pathogen transmission**.

### 1 Optimize indoor ventilation

Indoor ventilation = mechanical ventilation (e.g., [HVAC](#) system, portable units) **or** natural (e.g., opening windows and doors)

- Prioritize mechanical ventilation (as natural ventilation is not practical all year around).
- When inadequate mechanical ventilation is in place, natural ventilation may be used as an additional measure.
- Include expertise from HVAC/Engineering - considering room size, population at risk, noise, electricity use, etc.

### 2 Consider additional portable air filtration

Various types of filters may be used (e.g., HEPA, MERV-13, [in-room HEPA filter air cleaners](#) and [DIY-type Corsi-Rosenthal Boxes](#)).

- Consult with an expert to determine the appropriate type for room/building (e.g., room size, population at risk).
- Consider that access to air filtration may empower people to prevent COVID-19 infection, particularly repeat infections for people already affected by post COVID-19 condition.

### Further information

Scan the QR code for CAN-PCC recommendations on ventilation / air filtration or click [here](#).



Scan the QR code or click [here](#) to access: *“Using ventilation and filtration to reduce the risk of aerosol transmission of COVID-19”* (PHAC).





## Masking – General considerations

**Education and de-stigmatizing:** The possible stigma of mask-use should be minimized/ addressed to increase acceptability of mask use and "mask friendly" environments.

**Availability:** The access to masks at low or no cost should be improved (e.g., free distribution in settings like libraries, community centres, community clinics, hospitals, etc.).

**Timing:** Recommendations on masking apply to periods of higher transmission.

**Planetary health impacts:** The duration of use/reuse of masks should be communicated.

**Comfort of masks:** Mask options that are more comfortable/breathable while maintaining efficacy should be promoted. Mask fitting may vary across groups in the community.

Scan the QR code or click [here](#) for guidance on  
“**Respiratory infectious diseases: Mask use for reducing the spread**”  
(Public Health Agency of Canada).



With details on

[How to choose, use and care for masks](#)

[Types of masks](#)

[How to make masks fit properly](#)

This advice is intended for the general public (not for occupational health purposes, including health care settings).

Scan the QR code to view all CAN-PCC masking recommendations or click [here](#).

For plain language recommendations please see [can-pcc.recmag.org/plain-language-recommendations](https://can-pcc.recmag.org/plain-language-recommendations)





## Masking – PCC specific considerations

### Mask use is suggested depending on:

- Current community **epidemiology**, the risk of **elevated transmission** and personal **risk tolerance** – during high transmission risk of COVID-19, there is additional benefit of using a respirator (N95/KN95)
- **Physical space considerations** of elevated transmission risk (crowded, enclosed, or poorly ventilated spaces)
- **Proximity to people** that elevates transmission risk – shared air with individuals who may be infected due to recent exposures (and could be asymptotically infectious) or have symptoms of COVID-19 infection

Recommendations focus on personal protection. Still there may be a benefit to vulnerable people unable to wear a mask.

### Long-Term Care homes

Long-term care is an extremely vulnerable setting for COVID-19 transmission. The risk of transmission is expected to vary depending on the characteristics of the long-term care home (e.g. those offering private rooms). Masking for caregivers, workers and visitors is suggested.

### Out-of-hospital clinical settings

Non-hospital clinical settings may have vulnerable patients with high risk of severe COVID-19 infections. Masking for all people in a non-hospital clinical setting including healthcare professionals, staff, support persons and patients is suggested.

### Community settings

Masking for all adults is suggested in indoor locations that are generally accessible to the public/workers/clients (e.g. grocery stores, recreation centres, shopping malls, some workplaces) especially when crowded and/or poorly ventilated.

Scan the corresponding QR-Codes or click the links above to access the respective recommendations:



## Text modules for newsletters or press releases

As the world adapts to COVID-19, one lingering challenge is post-COVID condition (PCC), also known as long COVID. Its impact on labour, education, and communities has highlighted the importance of public health measures, especially in high-risk environments.



### VACCINATION

COVID-19 vaccinations not only lower the risk of the infection itself but are **reducing** the risk of **long-term complications**, commonly known as post COVID-19 condition (PCC) or long COVID.

Vaccinations remain one of the **most effective** tools in the fight **against COVID-19** and its lasting health effects.



### VENTILATION/AIR FILTRATION

Improving air circulation in **schools, offices, healthcare settings** and **public buildings** can make indoor environments **safer** and help **prevent new cases** of COVID-19 infection and therefore post COVID-19 condition (PCC).

The benefits of improved ventilation go beyond preventing a COVID-19 infection and therefore PCC. Cleaner air also **reduces** the **transmission** of other **respiratory infections** such as flu and colds, resulting in a healthier indoor environment all year round. In addition, good ventilation can benefit cognitive function, concentration and general well-being, especially in schools and workplaces where people spend long periods of time indoors.



### MASKING

Masking in **long-term care homes, community spaces, and clinical settings** is a simple yet powerful tool to protect the most vulnerable and prevent long-term complications associated with post COVID-19 condition (PCC).

Wearing a mask demonstrates an individual's commitment to protecting themselves and others from the spread of illness. It reflects a sense of civic responsibility and care for the **health and safety of the community**. By doing so, everyone contributes to reducing risks and safeguarding public well-being.

# Preventing Post COVID-19 Condition/ long COVID



CANADIAN GUIDELINES FOR POST COVID-19 CONDITION

## PCC - what we know and why it matters

Post COVID-19 Condition (PCC) usually appears within three months from the acute COVID-19 infection and lasts at least two months. Symptoms vary, and can change or worsen over time, and significantly impact daily life, according to the World Health Organization. Common symptoms may include fatigue, pain, shortness of breath, brain fog and sleep problems. PCC is also known as long COVID, and can affect adults and children.

**PREVENT INFECTION TODAY  
STAY HEALTHY TOMORROW!**

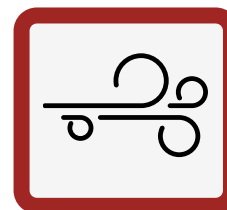
### Vaccination



### Masking



### Ventilation



Scan the QR code to view an infographic on prevention methods for PCC.



Scan the QR code to access "How to break the chain of respiratory diseases" by PHAC.





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Common symptoms may include fatigue, pain, shortness of breath, brain fog and sleep problems. PCC is also known as long COVID, and can affect adults and children.

## Please consider wearing a mask when entering this facility



Masking is suggested in order to prevent COVID-19 infection with the aim of preventing PCC.

Scan the QR code to learn about CAN-PCC masking recommendations in different settings:



for staff, patients & support persons in  
**out-of-hospital clinical settings**



for asymptomatic adults in  
**community settings**



for caregivers, workers & visitors in  
**long-term care homes**



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## Fresh Air Means Safer Air!

Use mechanical ventilation / air conditioners

and - if not available:

open windows and doors regularly  
(if the weather permits).



Do you have air filtration in place (like HEPA or MERV-13 filters)?

**GREAT!**



Ensure regular maintenance and filter replacement.



Use them in high-traffic areas for maximum benefit.

**Optimizing indoor ventilation** in a given space and then considering **additional** portable **air filtration** for further improvements in air quality is suggested in order to prevent COVID-19 infection with the aim of preventing PCC.

Scan the QR code to learn about CAN-PCC recommendations related to ventilation/air filtration.

