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Issued to: All clinicians

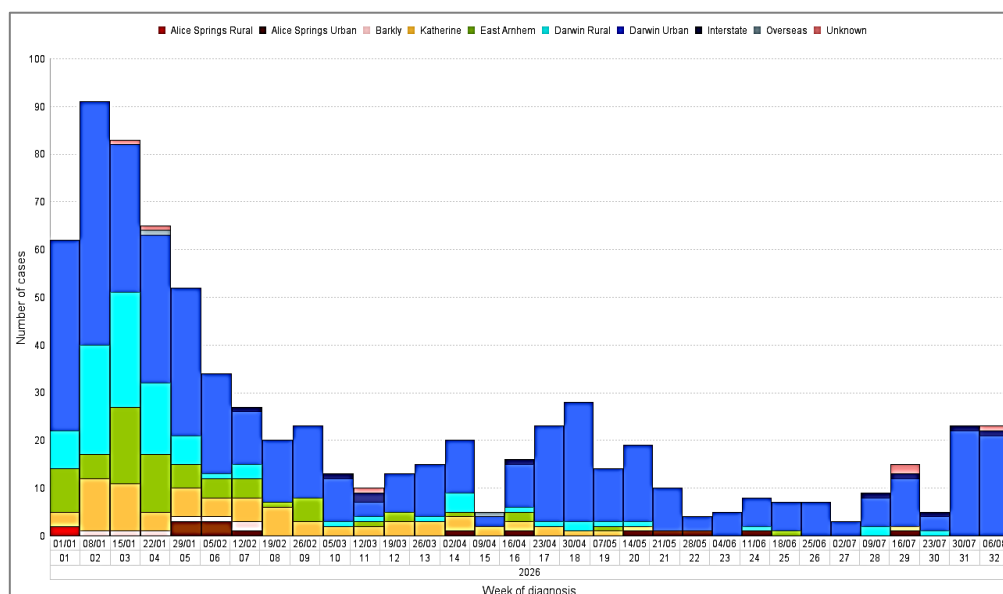
Increasing influenza notifications in NT

Summary

Influenza activity is increasing across the Northern Territory (NT). In 2026, there have been 752 laboratory-confirmed influenza notifications, 214 hospitalisations, and 2 deaths reported in the NT. Influenza cases have risen by 21% in the most recent fortnight.

Cases are currently increasing in multiple regions, particularly in Darwin Urban and Rural, Katherine, and East Arnhem (Figure 1). Based on recent trends, further increases in influenza activity are anticipated over coming weeks. The NT experiences influenza cases throughout the year with distinct surges occurring often but not exclusively during the dry season. This dry season rise is driven by increased population movement, a high influx of interstate and international tourists, and a busy calendar of large-scale community events.

Figure 1: Influenza notifications in the NT by region and diagnosis week (01 Jan 2026 – 11 Aug 2026)



Key surveillance highlights (2026):

- From the year's total of 752 notified cases most remain concentrated in Darwin Urban (470 cases/62.5%), followed by Darwin Rural (97 cases/12.9%) areas.
- Close to one-third (214/752) of all notified cases have required hospital admission.
- Over half of all notified cases (378/752, 50.3%) identify as Aboriginal people.
- Children aged 0–9 years account for one-fifth of total cases (155/752), with those under 5 years making up 11.8%.
- Influenza A accounts for 61% of subtyped cases (426 unspecified A, 23 A/H3N2, 9 A/H1N1), while influenza B accounts for 39% (293 cases).

Further national surveillance information is also available [here](#).

We urge clinicians across the Territory to remain highly vigilant for influenza and influenza-like illness (ILI), and to implement the key influenza control measures of vaccinate, test, treat and prevent.

The strategy for flu control - *Vaccinate. Test. Treat. Prevent.*

- **Vaccinate** everyone over 6 months of age who has not yet received the vaccine.
- **Test** patients presenting with influenza-like illness for influenza, COVID-19 and RSV where appropriate.
- **Treat** people with suspected or confirmed influenza who are at high risk of severe disease, moderately unwell or deteriorating.
- **Prevent spread** by promoting the use of masks in symptomatic people and using personal protective equipment (PPE). Isolate cases and promote hand hygiene, social distancing and cough etiquette.

Vaccination information

Influenza vaccination remains the most effective way to reduce serious illness, hospitalisation and death from influenza. It can be administered at the same time as other vaccines including COVID-19 and pneumococcal vaccines and also diphtheria-preventing vaccines.

Who is eligible for the free influenza vaccine?

- Adults aged 65 years and over
- All children aged 6 months to less than 5 years
- Aboriginal people aged 6 months and over
- All people aged 6 months and over with medical conditions associated with an increased risk of severe influenza and its complications. See [here](#) for a list of medical conditions
- Pregnant women in any trimester.

Actions

Vaccinate

- Offer the 2026 influenza vaccine to all people NOW over 6 months of age who have not yet received the vaccine.
- Prioritise vaccination of those at greatest risk of severe disease and complications. See [here](#) for more information.
- Opportunistically check vaccination status during all patient encounters to identified missed or overdue vaccines.

Test

- Test patients presenting with influenza-like illness for influenza, COVID-19 and RSV where appropriate which may include sending a specimen for lab testing if point of care testing is not available.
- ILI is defined as an acute respiratory illness with symptoms including fever and cough.

Treat

- Consider early antiviral treatment such as oseltamivir (Tamiflu) for people with suspected or confirmed influenza who are at high risk of severe disease, moderately unwell or deteriorating.
- Further information on oseltamivir is available on the NT Centre for Disease Control [factsheet](#).

Prevent spread

- Encourage patients with respiratory symptoms to stay home from work, school and childcare until well.
- Promote the use of masks in symptomatic people and appropriate personal protective equipment (PPE) in health staff.
- Health staff consulting patients with possible ILI should wear an N95 mask, gloves, gown and eye protection and perform hand hygiene prior to and following each patient care encounter.
- Isolate cases and promote hand hygiene, social distancing and cough etiquette.

Contact & advice

Please contact the Immunisation Unit at NT CDC on 08 8922 8315 for additional guidance.

[Immunisation program | NT Health](#) [Influenza posters | NT Health](#)

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