

# **Centre for Disease Control**

NT HEALTH

# ↑ Public Health Alert

Issued: 13th June 2024
Issued by: NT Centre for Disease Control
Issued to: Health Practitioners

# **Increase in COVID-19 cases**

#### Summary

- Increased case numbers of COVID-19 disease are occurring across the NT and Australia-wide.
- While COVID-19 continues to circulate and new sub-variants are emerging, immunity in the community from past infections and vaccinations is waning.
- Practitioners are encouraged to consider anti-viral treatment for all eligible COVID-19 patients.
- Vaccination remains key to protecting the community ensure people who are recommended to have COVID-19 boosters are up to-date, and consider promoting vaccination for other eligible people to prevent severe COVID-19 disease.

#### **Current situation**

- Notifications for cases of COVID-19 have significantly increased across the month of May in the NT – there were 419 notifications this month, which is around 2.5 times more than the 173 cases in April.
- There has been an associated increase in hospitalisations with COVID-19 over the last 3-4 weeks.
- Cases have mostly been in the Top End (particularly Darwin region), however, cases are now also starting to increase in Central Australia.
- The dominant circulating COVID-19 variant in Australia currently is the Omicron BA.2.86 sublineage JN.1.
- The best strategy to control COVID-19 and other respiratory viruses is to test, treat, vaccinate, and prevent spread:

# **Testing**

- Offer testing to any patients presenting with flu-like symptoms, including runny nose, sore throat, cough, shortness of breath and fever.
- Note that Rapid Antigen Test (RAT) results are no longer notifiable to the NT Centre for Disease Control (CDC).

## **Treatment**

• Consider antiviral medication for eligible COVID-19 patients to help prevent severe illness or hospitalisation.

- Antivirals should be commenced within the first 5 days of COVID-19 symptoms to have the greatest effect.
- Visit this page for general information on antiviral eligibility: Eligibility for oral COVID-19 treatments | Australian Government Department of Health and Aged Care
- Paxlovid® (nirmatrelvir plus ritonavir) is the recommended antiviral medication for COVID-19. See here for more information: PBS Factsheet Paxlovid
- Molnupiravir is not routinely recommended in the NT. Speak with the Infectious Diseases team if your patient cannot receive Paxlovid® or remdesivir.
- Additional eligibility criteria for patients in the NT and recommended treatment options are available in the "COVID-19 Treatment of at Risk Adults and Adolescents not Requiring Oxygen" NT Health guideline (internal link here), and criteria are also listed in Appendix 1 of this alert.

#### **Vaccination**

- Vaccination remains the most effective means of preventing COVID-19 hospitalisations and deaths.
- People aged 18 years and older are eligible for annual boosters, and they are recommended for people aged 65 years and older. See this page for information about primary and booster dose eligibility: COVID-19 vaccine advice and recommendations for 2024

### **Preventing Spread**

- People with COVID-19 can be infectious for up to 10 days from the onset of symptoms. Encourage patients to stay home from childcare, school, work, and places where there may be vulnerable people at least until symptoms have resolved. Remind patients of good hand hygiene practices, and that wearing a mask may help protect from spreading COVID-19.
- For NT Health staff, refer to the "COVID-19 Staff Exclusion" NT Health guideline (internal link here).
- There are currently no NT-wide policies or guidelines in effect for organisations and institutions about managing COVID-19, however, information and resources are available on the NTG website (Managing COVID-19 | NT Health - COVID-19) and the NT CDC can be contacted for advice.

#### **Further information**

Contact the NT CDC for any questions relating to the public health management of COVID-19 on the following numbers:

Darwin Tennant Creek

(08) 8922 8044 (08) 8932 4259 Katherine Alice Springs

(08) 8973 9041 (08) 8951 7540

Nhulunbuy (08) 8987 0357

Issued by: A/Director, Centre for Disease Control, Public Health Division, NT Health

#### Appendix 1: Additional NT Specific Criteria (non-PBS) for prescribing Paxlovid®

#### Initial eligibility (must meet all criteria):

- Patient is COVID-19 positive (either PCR or RAT), AND
- Has at least one symptom of COVID-19 if under 70 years, AND
- Is within the approved time frame for medication initiation (five days for Paxlovid® or seven days for remdesivir), AND
- Patient is 18 years or older, OR is 12-18 years and greater than 40kg, AND
- Meets eligibility either through the PBS criteria or through NT specific criteria below:
  - Moderate to severe Rheumatic Heart Disease
  - Hypertension
  - Patient has received less than the recommended number of vaccine doses e.g. has not received a full initial vaccine course or is overdue for additional approved doses
  - Requiring long term renal replacement therapy\*
- Multiple immunosuppressants where the cumulative effect is considered to be severely immunosuppressive
- Aged between 12-17 years AND paediatric complex chronic conditions (PCCC) congenital and genetic, cardiovascular, gastrointestinal, malignancies, metabolic, neuromuscular, renal and respiratory conditions

### NT-specific criteria risk factors for progression to severe COVID-19:

Additionally, patients may be eligible in the NT if they:

- Have two risk factors for disease progression as per the PBS, but are under the age threshold for PBS-funded treatment
- Have two risk factors for disease progression between the PBS criteria AND the NT specific criteria (listed above)
- Are aged between 12 and 17 years and are at high risk of disease progression (listed above).

Speak with the Infectious Diseases team via Royal Darwin Hospital switch for assistance in deciding if your patient is eligible for antiviral medications in the NT.

#### Scan below for more on Public Health Alerts



<sup>\*</sup>Patients requiring long term renal replacement therapy are eligible for treatment based on this criteria alone, and do not require a second risk factor.