



NORTHERN
TERRITORY
GOVERNMENT

Centre for Disease Control

NT HEALTH

Public Health Alert

Issued: 08 November 2023
Issued by: Centre for Disease Control
Issued to: Health Staff

Increase in COVID-19 cases across the Top End

Summary

- Increased case numbers of COVID-19 are being seen across the NT and Australia wide.
- While COVID-19 continues to circulate, immunity in the community from past infections and vaccinations has waned.
- Practitioners are encouraged to consider anti-viral treatment for all eligible COVID-19 patients.
- Vaccination remains key to protecting our community. Ensure that your patients are up to date to prevent severe COVID-19 disease and further deaths.

Current situation

- There were 160 confirmed COVID-19 cases in the 2 weeks between 21 October and 3 November, more than twice the number seen in the previous 2 weeks.
- Cases have mostly been in Darwin, East Arnhem and Katherine regions.
- There have also been recent outbreaks across various institutions and an increase in hospitalisations.
- NT COVID-19 vaccination coverage is currently **low**. Only an estimated 43% of Territorians 75 years and over have received a COVID-19 vaccination in 2023.
- Circulating strains in Australia are mostly Omicron recombinant and recombinant sub-lineages. There is no evidence of increased severity for these sub-lineages.

Testing

- Offer testing to any patients presenting with COVID-19 or influenza like symptoms (runny nose, sore throat, cough, shortness of breath, fever).
- Rapid Antigen Tests (RATs) are readily available free of charge through NT Health.
- Consider PCR testing for patients with a negative RAT but who still have symptoms.

Treatment

- Effective drug treatments for people at risk of severe COVID-19 include **inhaled corticosteroids** (e.g. budesonide) and **antivirals** (e.g. Paxlovid®, Remdesivir)
- National guidelines for different patient groups and disease severity are available from the [National Clinical Evidence Taskforce COVID-19](#)

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Public Health Division

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- Check the eligibility criteria for Paxlovid® (nirmatrelvir plus ritonavir) on the [PBS Paxlovid® Factsheet](#), or see [Appendix 1](#)
- For patients who do not meet the PBS criteria there are additional NT criteria for antivirals that includes people with Rheumatic heart disease (RHD) and hypertension. ([Appendix 1](#))
- The COVID-19 drug interactions checker is available at <https://www.covid19-druginteractions.org/checker>
- Paxlovid® must be given within 5 days of symptoms.
- Speak to On-call IFD Consultant about other options if your patient cannot take Paxlovid®.
- Molnupiravir is **not** recommended.
- For children or pregnant women with risk factors for severe COVID-19 please speak to a paediatrician or IFD consultant.

Isolation and management

- People with COVID-19 can be infectious for up to 10 days from the onset of symptoms /positive test. It is recommended for all patients to:
 - stay at home for at least 5 days, or longer if still symptomatic
 - practice personal hygiene including hand washing or using hand sanitiser
 - wear a mask indoors and outdoors when social distancing is not possible
 - maintain a distance of 1.5 metres away from others where possible
 - avoid visiting people at high risk of severe illness, hospitals, correctional settings aged care or disability facilities for at least 7 days
- People who work in high risk settings or who live with high risk contacts may need to isolate for longer and/or follow additional measures.

Prevention

- Vaccination remains the most effective means of preventing COVID-19 hospitalisation and death. Effectiveness of current vaccines wanes after 6 months.
- All adults aged 18 years and over are eligible for a booster if it has been 6 months or longer since their last COVID-19 vaccine. See [ATAGI recommended COVID-19 vaccine doses \(health.gov.au\)](#).
- Advice is now available in [COVID-19 | The Australian Immunisation Handbook \(health.gov.au\)](#)

Public health management

- All health staff are encouraged to follow your service's COVID-19 prevention and control measures. It is everyone's responsibility to stop the spread of COVID-19 in these high risk settings.
- If you are concerned about a rise in cases or potential outbreak in your area, please contact the Centre for Disease Control.

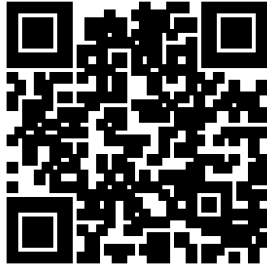
Further information

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- Contact the Centre for Disease Control for any questions relating to the public health management of COVID-19.
- For advice on COVID-19 patient management, please contact Infectious Disease Oncall at Royal Darwin Hospital.

Scan below for more on Public Health Alerts



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Appendix 1

Adults with mild to moderate COVID-19 confirmed by a PCR or a RAT can be prescribed PBS-subsidised Paxlovid by their doctor or authorised nurse practitioner if treatment is commenced within 5 days of the onset of symptoms for:

Table 1 PBS criteria for prescribing Paxlovid

Patient category	Eligibility criteria
All patients 70+	All
All patients 50 to 69	1 risk factor* for developing severe disease (Table 2)
First Nations patients 30+	1 risk factor* for developing severe disease (Table 2)
All patients 18+	Moderate to severe immunocompromise OR Previously hospitalised from COVID-19 infection

Table 2 Risk factors (national) for PBS subsidised Paxlovid

- The patient is in residential aged care,
- The patient has disability with multiple comorbidities and/or frailty,
- Neurological conditions, including stroke and dementia and demyelinating conditions,
- Respiratory compromise, including COPD, moderate or severe asthma (required inhaled steroids), and bronchiectasis, or caused by neurological or musculoskeletal disease,
- Heart failure, coronary artery disease, cardiomyopathies
- Obesity (BMI greater than 30 kg/m²), 7. Diabetes type I or II, requiring medication for glycaemic control,
- Renal impairment (eGFR less than 60mL/min),
- Cirrhosis, or

- The patient resides in an area in the NT outside of urban Darwin
- Past COVID-19 infection episode resulting in hospitalisation.

Additional NT Specific Criteria (non-PBS) Risk Factors for Progression to Severe COVID-19

For a patient that does not meet PBS criteria but:

1. Has two risk factors for disease progression as per the PBS (Table 2) but are under the age threshold for PBS funded treatment OR
2. Has two risk factors for disease progression between the PBS criteria (Table 2) AND the NT specific criteria (Table 3) OR
3. Requires long term renal replacement therapy OR
4. Are aged between 12 and 18 years and are at high risk of disease progression: congenital and genetic, cardiovascular, gastrointestinal, malignancies, metabolic, neuromuscular, renal and respiratory conditions.

Table 3 NT additional risk factor criteria for prescribing Paxlovid

- 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.
- Multiple immunosuppressants where the cumulative effect is considered to be severely immunosuppressive.