

# National Immunisation Program 2025 Influenza Vaccination

A joint Australian, State and Territory Government Initiative

### **Program advice for health professionals**

### Key points and updates for 2025

- Delivery of Sanofi's VaxiGrip Tetra<sup>®</sup> vaccine is expected to arrive in early April. To ensure early
  access to flu vaccines for all eligible cohorts, a quantity of Sanofi's FluQuadri<sup>®</sup> vaccine is available
  to vaccinate NIP eligible children under 5 years until stock of VaxiGrip Tetra<sup>®</sup> is distributed.
- Influenza vaccines are recommended for pregnant women in every pregnancy, at any stage of pregnancy. They can be co-administered with pertussis (20 to 32 weeks), maternal RSV (28 to 36 weeks), COVID-19 (if required) and other vaccines indicated during pregnancy.
- For adults aged 65 years and over, both the NIP funded adjuvanted vaccine (Fluad<sup>®</sup> Quad) and the private market high dose influenza vaccine (Fluzone High Dose Quadrivalent) are equally preferentially recommended over standard influenza vaccines.
- Flucelvax Quad<sup>®</sup>, a cell-based vaccine, is NIP funded for people aged 5 to 64 years with medical conditions that put them at increased risk of complications from influenza. There is no preferential recommendation between Flucelvax Quad<sup>®</sup> and standard dose egg-based influenza vaccines.
- Influenza vaccines can be co-administered with any of the COVID-19 vaccines.

#### Vaccine strains

For the 2025 season, Quadrivalent Influenza Vaccine (QIVs) are the only vaccines available in Australia.

Egg-based influenza vaccines	Cell-based influenza vaccines
A/Victoria/4897/2022 (H1N1)pdm09-like virus	A/Wisconsin/67/2022 (H1N1)pdm09-like virus
A/Croatia/10136RV/202 3 (H3N2)-like virus	A/District of Columbia/27/2023 (H3N2)-like virus
B/Austria/1359417/202 1 (B/Victoria lineage)- like virus	B/Austria/1359417/202 1 (B/Victoria lineage)- like virus
B/Phuket/3073/2013 (B/Yamagata lineage)- like virus	B/Phuket/3073/2013 (B/Yamagata lineage)- like virus

#### Cell based vaccines

Flucelvax Quad<sup>®</sup>, a cell-based vaccine, is NIP funded for people aged 5 to 64 years with medical conditions that increase their risk of complications from influenza. There is no preferential recommendation between Flucelvax Quad<sup>®</sup> and standard dose egg-based influenza vaccines.

#### Vaccination timing

Annual influenza vaccination is recommended when it becomes available in March/April 2025, before the start of the influenza season.

For patients who received a 2024 influenza vaccine in late 2024 or early 2025, it is still recommended they receive a 2025 vaccine when it becomes available.

Vaccination should continue to be offered as long as influenza viruses are circulating and a valid vaccine is available.

#### Special considerations

- Pregnant women are recommended to receive the vaccine in every pregnancy and at any stage of pregnancy.
- People who are planning international travel should consider vaccination for optimal protection while travelling.
- While the seasonal influenza vaccine is not protective against avian influenza virus, people in occupational risk groups are recommended to receive the seasonal influenza vaccine.

## Children aged 6 months to less than 5 years

Influenza vaccination is recommended and funded under the NIP for all children aged 6 months to less than 5 years. This is due to their higher risk of complications from influenza.

Delivery of VaxiGrip Tetra® vaccine is expected to arrive in early April. A quantity of FluQuadri® vaccine is available to use to vaccinate NIP eligible children under 5 years until the stock of VaxiGrip Tetra® is distributed.

FluQuadri® vaccine packaging will not be labelled with "Government Funded Program – 2025" like other NIP influenza vaccines. Make sure this stock is identified and only used and recorded as a NIP funded vaccination for children under 5 years.

Two doses of influenza vaccine are recommended and funded in the first year of vaccination, given at least 4 weeks apart. While 2 doses are recommended, receiving 1 dose provides some protection and is preferable to receiving none. Subsequent years requires an annual dose, even if only 1 dose was given in the first year.

Parents and carers should be informed that the likelihood of fever may increase modestly when a child receives both the influenza vaccine and pneumococcal vaccine (Prevenar 13®) at the same time.

#### Pregnant women

Influenza vaccination is recommended and funded for every pregnancy, at any stage of pregnancy, and is part of routine antenatal care. This protects pregnant women and their babies from influenza and its complications.

While it is best to give the vaccine before the influenza season, it can be given at any time, providing protection for both the mother and baby for the first few months of life.

For women who received an influenza vaccine in 2024, it is recommended to also administer the 2025 vaccine if available before the end of pregnancy. Women who received an influenza vaccine before becoming pregnant should be

revaccinated during pregnancy to protect the unborn infant.

It is safe to administer the influenza vaccine at the same time as the pertussis vaccine (20 to 32 weeks), RSV vaccine (28 to 36 weeks), COVID-19 vaccine (if required), or other vaccines indicated during pregnancy.

## Aboriginal and Torres Strait Islander People

Influenza vaccination is recommended and funded under the NIP for all Aboriginal and Torres Strait Islander people aged 6 months and over. This is because the disease burden from influenza is significantly higher among Aboriginal and Torres Strait Islander people than non-Indigenous Australians.

It is important to take every opportunity to offer influenza vaccination to your Aboriginal and Torres Strait Islander patients.

#### People aged 65 years and over

Influenza vaccination is recommended and funded under the NIP for all people aged 65 years and over. This is due to their higher risk of complications from influenza.

Fluad® Quad, a NIP funded adjuvanted influenza vaccine, and the private market high dose influenza vaccine (Fluzone High Dose Quadrivalent), are equally preferentially recommended over standard influenza vaccines.

Influenza vaccines can be co-administered with any of the COVID-19 vaccines and the shingles vaccine.

#### Medically at-risk

Influenza vaccination is recommended and funded under the NIP for all people aged 6 months and over with:

- Cardiac disease
- Chronic respiratory condition
- Immunocompromising condition
- Haematological disorder
- Chronic metabolic disorder
- Chronic kidney disease
- Chronic neurological condition
- Long-term aspirin therapy in children aged 5 to 10 years

## Eligibility for the National Immunisation Program vaccines

Check if your patient is eligible to receive a free influenza vaccine using the following tables:

#### 2025 NIP-funded eligibility

- Children aged 6 months to less than 5 years
- Pregnant women at any stage of pregnancy
- First Nations people aged 6 months and over
- People aged 65 years and over
- People aged 6 months and over with certain medical conditions. Refer to medical conditions below.

#### **Medical Conditions**

Category	Example medical conditions		
Cardiac disease	Congenital heart disease, congestive heart failure, coronary artery disease		
Chronic respiratory condition	Suppurative lung disease, bronchiectasis, cystic fibrosis, chronic obstructive pulmonary disease, chronic emphysema, severe asthma (requiring frequent medical consultations or the use of multiple medicines)		
Immunocompromising condition	HIV infection, malignancy, immunocompromise due to disease or treatment, asplenia or splenic dysfunction, solid organ transplant, haematopoietic stem cell transplant, CAR T-cell therapy		
Haematological disorder	Sickle cell disease or other haemoglobinopathies		
Chronic metabolic disorder	Type 1 or 2 diabetes, amino acid disorders, carbohydrate disorders, cholesterol biosynthesis disorders, fatty acid oxidation defects, lactic acidosis, mitochondrial disorders, organic acid disorders, urea cycle disorders, vitamin/cofactor disorders, porphyrias		
Chronic kidney disease	Chronic renal impairment – eGFR <30 mL/min (stage 4 or 5 disease)		
Chronic neurological condition	Hereditary and degenerative CNS diseases, seizure disorders, spinal cord injuries, neuromuscular disorders, other conditions which impair respiratory or airway function		
Long-term aspirin therapy in children aged 5 to 10 years	These children are at increased risk of Reye's syndrome following influenza infection		

## NIP funded influenza vaccines by age group

Age group	Quadrivalent influenza vaccines (QIVs)				
	FluQuadri <sup>®</sup>	Fluad <sup>®</sup> Quad	Flucelvax® Quad	Vaxigrip Tetra®	
	0.50 mL (Sanofi)	0.50 mL (CSL Segirus)	0.50 mL (CSL Segirus)	0.50 mL (Sanofi)	
	FILCULATION  PROVIDED TO AND THE PROVIDED TO A	PRESCRIPTION ONLY MEDICINE  PR	PRECEDENCE  COLOR  COLO	Production and assume the control of	
6 months to <5 years	Not NIP labelled	DO NOT USE	NOT FUNDED	<b>~</b>	
≥5 to <60 years	NOT FUNDED	DO NOT USE	<b>~</b> *	<b>~</b> *	
≥60 to <65 years	NOT FUNDED	DO NOT USE	<b>*</b>	<b>*</b>	
≥65 years	NOT FUNDED	<b>~</b>	NOT FUNDED	NOT FUNDED	

**Note:** Ticks indicate vaccines that are NIP funded. Asterisks (\*) indicate funding only for Aboriginal and Torres Strait Islander people, pregnant women and people who have certain medical conditions. Other influenza vaccines that are not NIP-funded are available in 2025. For further information, refer to the ATAGI clinical statement on the administration of influenza vaccines in 2025 available at <a href="https://example.com/heat-resources">heat-resources</a> and the Australian Immunisation Handbook chapter — <a href="https://example.com/influenza-resources">Influenza (Flu)</a>.

#### Influenza vaccine safety

#### **Contraindications**

The only contraindications to influenza vaccines are:

- Anaphylaxis following a previous dose of any influenza vaccine
- Anaphylaxis following any vaccine component excluding eggs

#### Latex allergy

All influenza vaccines available under the NIP in 2025 are latex free and people with a latex allergy can be safely vaccinated.

#### Egg allergy

Allergy to eggs is not a contraindication to egg based influenza vaccines. However, in the case of significant concerns, the vaccine may be administered in a primary care setting with a longer waiting period of 30 minutes.

#### Adverse events following vaccination

You must notify of all adverse events following immunisation through the usual reporting mechanisms in your state or territory.

#### Disposal of vaccines

Some 2024 influenza vaccine brands expired in December 2024 and others expired in February 2025. Dispose of vaccines in accordance with your local level protocols.

#### Australian Immunisation Register

You must report all influenza vaccinations, both NIP and privately purchased, to the Australian Immunisation Register (AIR).

#### Keep up to date with current information

- Subscribe to the National Immunisation Program (NIP) and National COVID-19 Vaccination Program (NCVP) updates email distribution list.
   Search 'NIP and NCVP updates' on health.gov.au
- You should read the advice in this factsheet in conjunction with:
  - The ATAGI clinical statement on the administration of seasonal influenza vaccines in 2025 available at health.gov.au/influenza-resources
  - The Australian Immunisation Handbook available at immunisationhandbook.health.gov.au
  - 2025 NIP influenza website available at health.gov.au/flu
  - 2025 NIP influenza resources available at health.gov.au/influenza-resources

State and territory health department contact numbers:

 ACT
 02 5124 9800
 SA
 1300 232 272

 NSW
 1300 066 055
 TAS
 1800 671 738

NT 08 8922 8044 VIC immunisation@health.vic.gov.au
WA 08 9321 1312 QLD Contact your local Public Health Unit



