

**U.S. Centers for Disease Control and Prevention**  
National Center for Immunization and Respiratory Diseases

# **2024-25 Influenza Season Update and Seasonal Influenza Vaccine Recommendations for the 2025-26 U.S. Influenza Season**

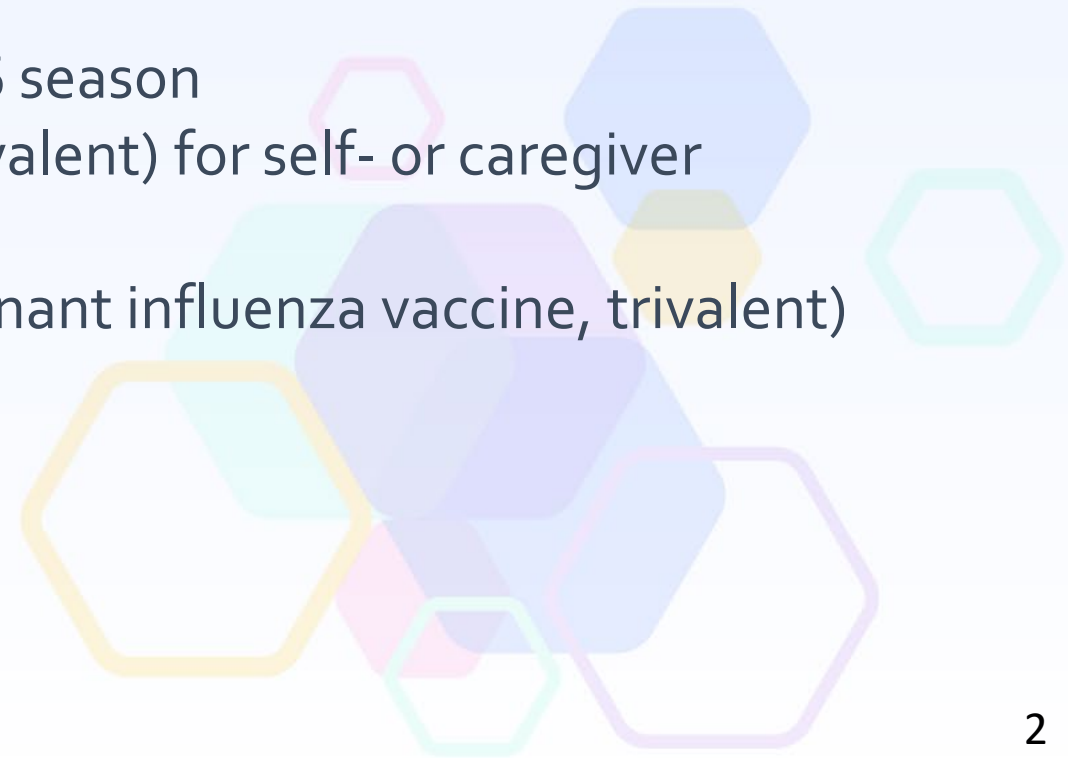
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June 26, 2025



# Overview

- 2024-25 influenza season summary
- Proposed updates to the seasonal influenza vaccine recommendations for the 2025-26 influenza season including the following recent FDA approvals:
  - Influenza vaccine composition for the 2025-26 season
  - FluMist (live attenuated influenza vaccine, trivalent) for self- or caregiver administration
  - Change in age indication for Flublok (recombinant influenza vaccine, trivalent) from  $\geq 18$  years to  $\geq 9$  years



# 2024-25 Influenza Season

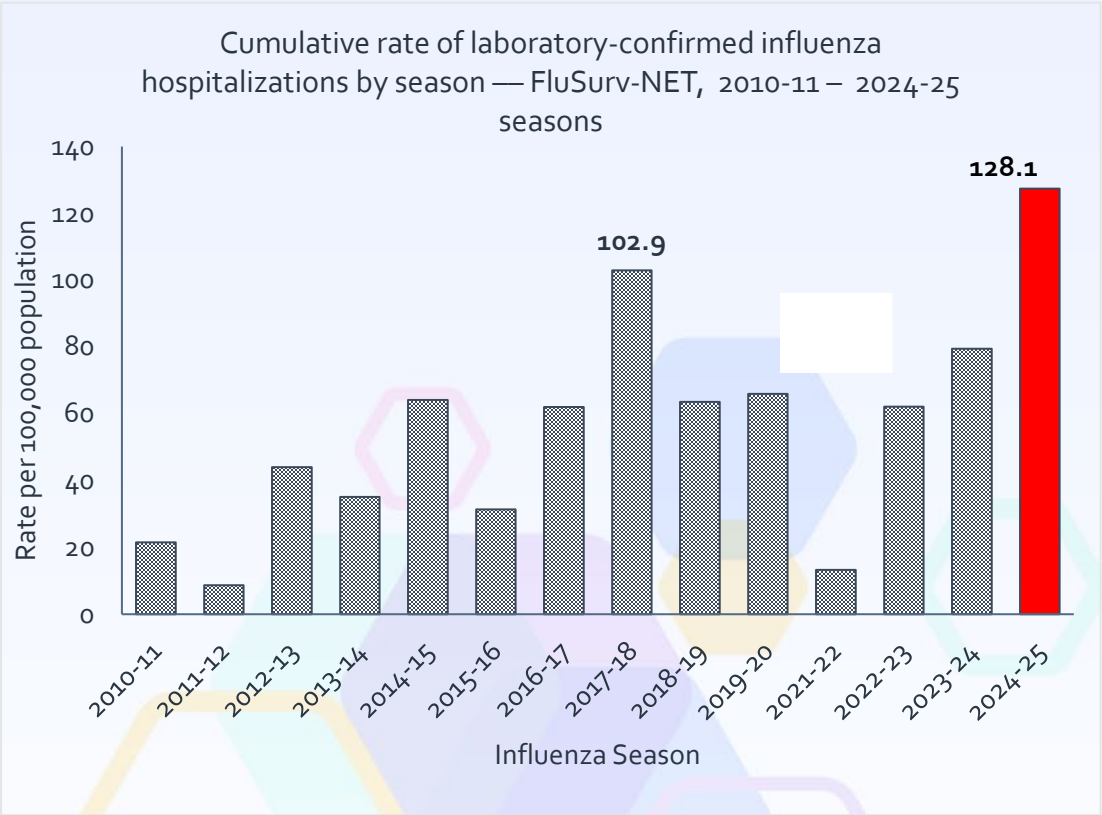
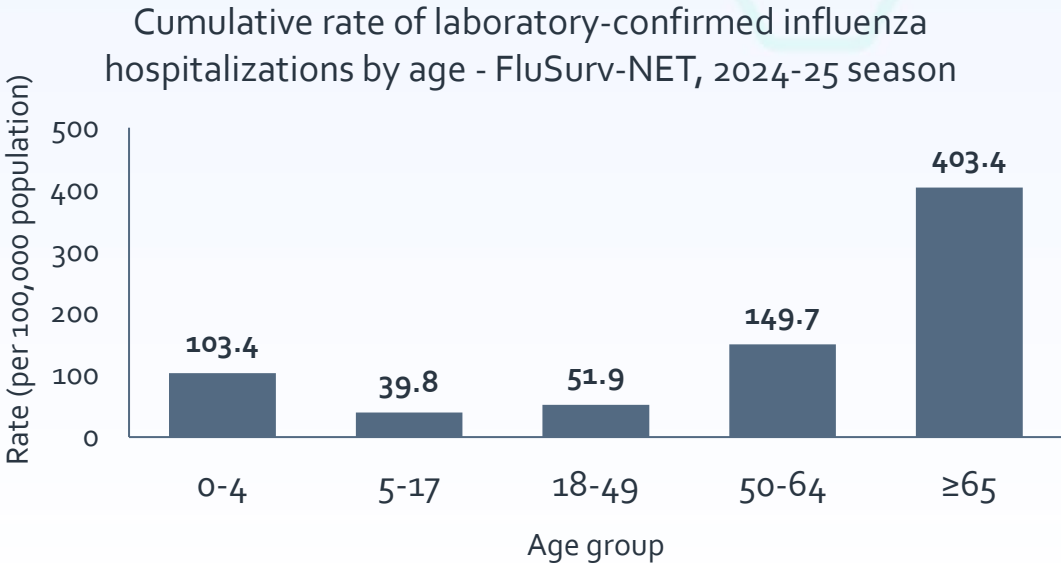


# 2024-25 U.S. Influenza Season

- High severity season overall and for all age groups
  - First high severity season since 2017-2018
- Highest cumulative influenza-associated hospitalization rate since 2010-2011
  - October 1, 2024 through April 30, 2025: 128.1 per 100,000
  - Cumulative rate was 102.9 per 100,000 for the severe 2017-18 season
- As of June 7, 246 influenza-associated pediatric deaths have been reported this season

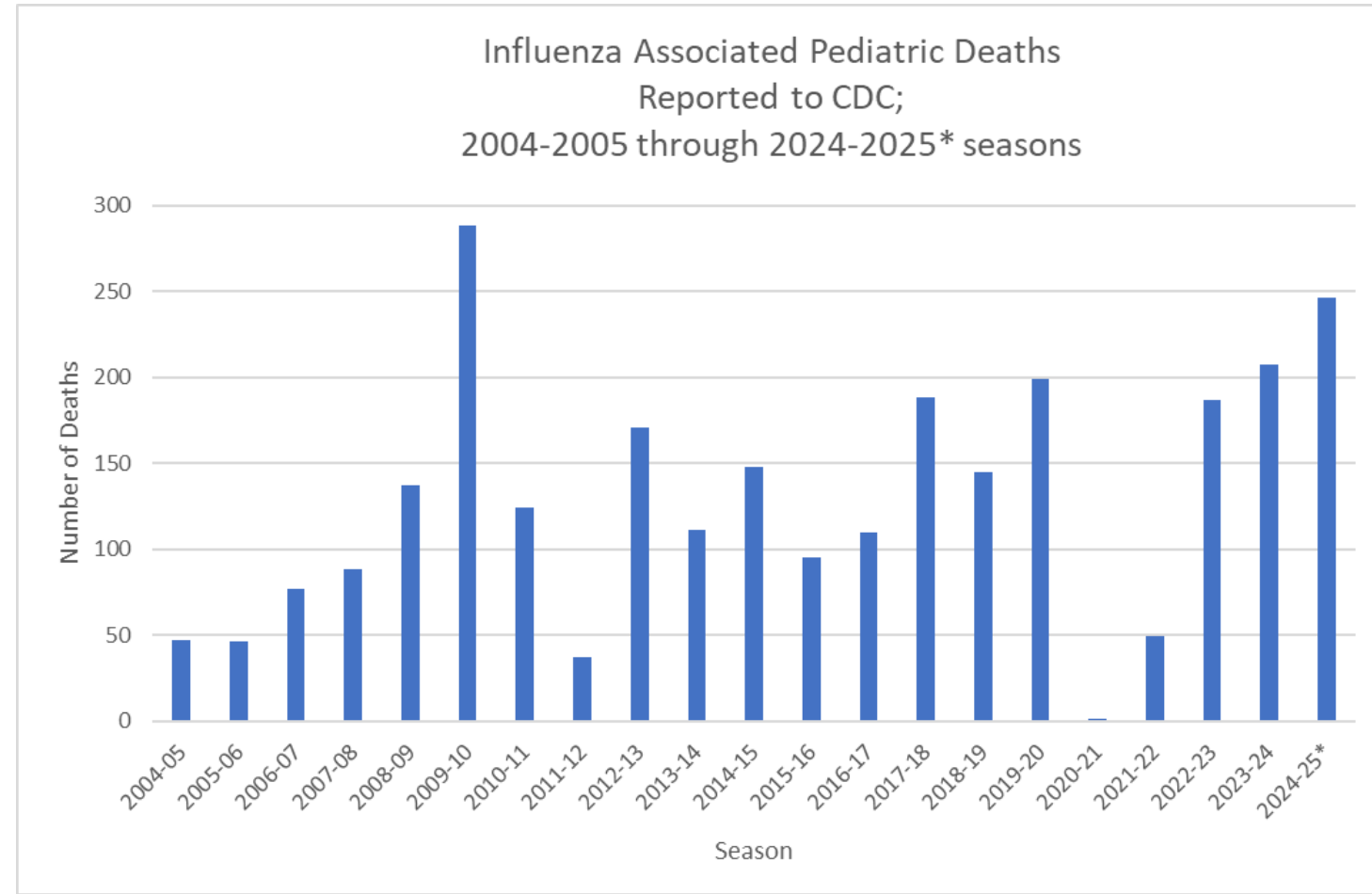
# Influenza-Associated Hospitalizations, FluSurv-NET, 2024-2025 Season

- Lab-confirmed influenza-associated hospitalizations in select counties in 14 states
- Approx. 9% of U.S. population
- As of May 17, cumulative rate of 128.1 per 100,000
  - Was 102.9 for 2017-18
- Approx 16% of hospitalized patients required ICU admission and 6% required invasive mechanical ventilation



# Influenza-Associated Pediatric Mortality, 2024-2025 Season\*

- Death in a person <18 yrs of age
  - with clinically compatible illness
  - and influenza positive laboratory test
  - and no period of complete recovery between illness and death
- Nationally notifiable since 2004
- 246 deaths reported\*
- All age groups affected
  - 0-5 months: 7%
  - 6-23 months: 13%
  - 2-4 years: 18%
  - 5-11 years: 37%
  - 12-17 years: 26%



\* Through June 7, 2025

<https://gis.cdc.gov/GRASP/Fluview/PedFluDeath.html>

# Influenza-Associated Pediatric Mortality, 2024-2025 Season\*

- Among 246 influenza-associated pediatric deaths reported thus far for 2024-25\*,
  - 42% had no known high risk underlying medical condition
  - 40% had a bacterial co-infection of a sterile site
  - 89% of those eligible for influenza vaccination were not fully vaccinated
    - Compared with 82% for the 2023-24 season
- Highest number of pediatric deaths reported in any non-pandemic influenza season since condition became reportable in 2004

# 2025-26 Seasonal Influenza Vaccine Recommendations

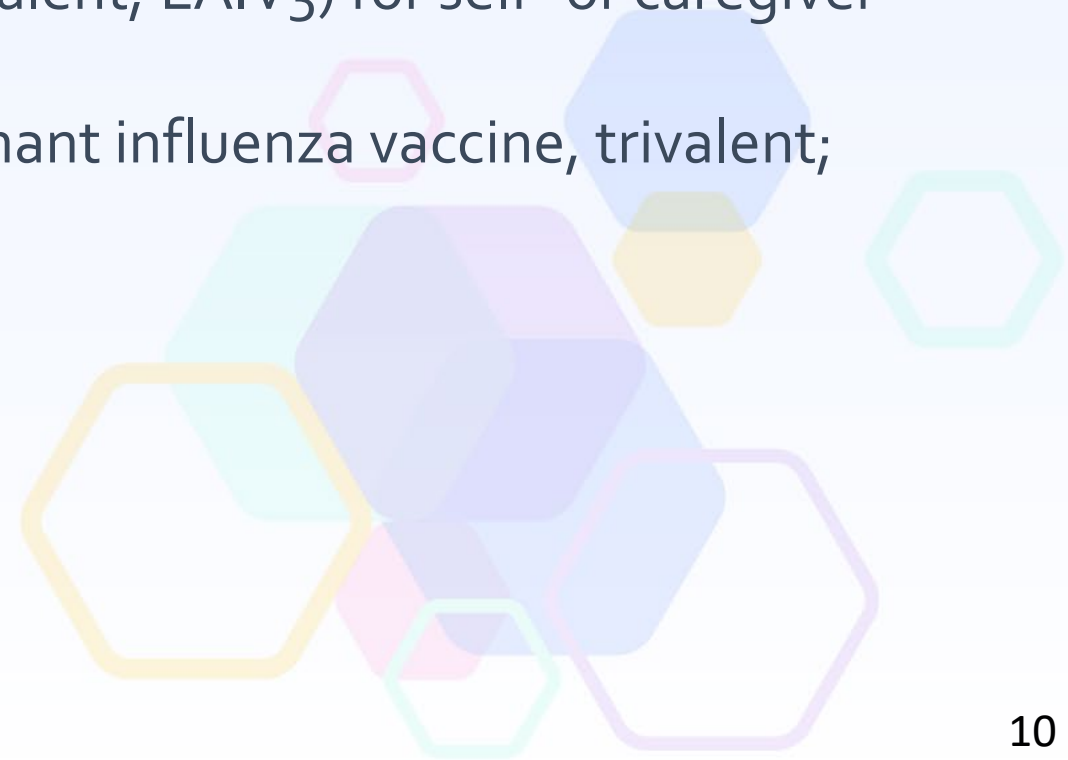


# Seasonal Influenza Vaccine Recommendations, 2025-26

- Annual influenza vaccination remains recommended for those aged  $\geq 6$  months who do not have contraindications
- As previously,
  - No preferential recommendations are made with the exception that high-dose inactivated, recombinant, and adjuvanted inactivated influenza vaccines are preferentially recommended for persons aged  $\geq 65$  years when available
  - Recipients should receive an age-appropriate influenza vaccine (one approved for their age), with the exception that solid organ transplant recipients aged  $\geq 18$  years who are taking immunosuppressive medications regimens may receive either high-dose or adjuvanted inactivated vaccines (without preference over other appropriate influenza vaccines)
- Recommendations concerning timing, vaccine selection, and contraindications and precautions remain the same as previously

# Recommendations for 2025-26: Updates

- The 2025-26 recommendations include three updates, all of which reflect recent FDA approvals:
  - Influenza vaccine composition for the 2025-26 season
  - FluMist (live attenuated influenza vaccine, trivalent; LAIV<sub>3</sub>) for self- or caregiver administration
  - Change in age indication for Flublok (recombinant influenza vaccine, trivalent; RIV<sub>3</sub>) from  $\geq 18$  years to  $\geq 9$  years



# U.S. Influenza Vaccine Composition for the 2025-26 Influenza Season

- All influenza vaccines marketed in the United States for the 2025-26 season will be trivalent
- U.S. influenza vaccine composition for 2025-26 includes an update to the influenza A(H3N2) component:
  - An A/Victoria/4897/2022 (H1N1)pdm09-like virus for egg-based vaccines or an A/Wisconsin/67/2022 (H1N1)pdm09-like virus for cell and recombinant vaccines;
  - An A/Croatia/Y10136RV/2023 (H3N2)-like virus for egg-based vaccines or an A/District of Columbia/27/2023 (H3N2)-like virus for cell and recombinant vaccines;
  - A B/Austria/1359417/2021 (B/Victoria lineage)-like virus

# FluMist (LAIV<sub>3</sub>) for Self- or Caregiver Administration

- Approved by FDA in September 2024<sup>1</sup>; presented to ACIP in April 2025
- Anticipated to be available for the 2025-26 influenza season
- Consumers will be able to order FluMist for delivery for eligible recipients
  - Screening for eligibility performed by central pharmacy, based on ACIP criteria
  - Approved for self-administration for persons aged ≥18 years, or by a caregiver aged ≥18 years for recipients aged 2 through 17 years
- LAIV<sub>3</sub> will continue to be available for administration by healthcare providers as previously
- No changes made to recommendations regarding appropriate populations, contraindications, or precautions

1. <https://www.fda.gov/vaccines-blood-biologics/vaccines/flumist>

# Approval of Flublok (RIV3) for Persons Aged 9 through 17 Years

- Approved by FDA in March 2025<sup>1</sup>
- Previously approved for  $\geq 18$  years; new age indication is  $\geq 9$  years
- Information has been updated in the Table of available U.S. influenza vaccines for 2025-26



1. <https://www.fda.gov/vaccines-blood-biologics/vaccines/flublok>

For more information, contact CDC  
1-800-CDC-INFO (232-4636)  
TTY: 1-888-232-6348 [www.cdc.gov](http://www.cdc.gov)

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