

HEALTH ALERT NETWORK | HEALTH ADVISORY | December 30, 2025

## Antiviral Treatment of Influenza and Priority Groups for Treatment

The North Dakota Department of Health and Human Services (HHS) is providing this information regarding the use of antivirals for the treatment of influenza. Reported influenza cases are rapidly increasing in North Dakota. During the last surveillance week, 871 new laboratory-confirmed cases were reported, bringing the total to 1,663 for the 2025-26 season. There have been 130 total influenza-associated hospitalizations reported.

Antiviral treatment of influenza, when given early, reduces the duration of symptoms and may reduce the risk of some severe complications. There are four Food and Drug Administration (FDA)-approved antiviral drugs recommended by the Centers for Disease Control and Prevention (CDC) to treat influenza this season.

- oseltamivir phosphate (available as a generic version or under the trade name Tamiflu®),
- zanamivir (trade name Relenza®),
- peramivir (trade name Rapivab®), and
- baloxavir marboxil (trade name Xofluza®).

**If providers are having difficulty obtaining antivirals, HHS can assist with locating available products and moving them to your location. Providers can reach HHS for assistance by calling 701-328-0707.**

### Priority Groups for Antiviral Treatment of Influenza

Antiviral treatment is recommended **as soon as possible** for any patient with suspected or confirmed influenza who:

- is **hospitalized**;
- has **severe, complicated, or progressive illness**; or
- is at **higher risk** for influenza complications.

Decisions about starting antiviral treatment for patients with suspected influenza should not wait for laboratory confirmation of influenza virus infection. Empiric antiviral treatment should be started as soon as possible in the above priority groups.

Clinicians can consider early empiric antiviral treatment of non-higher-risk outpatients with suspected influenza based upon clinical judgment if treatment can be initiated within two days of illness onset.

### **Antiviral Drug Options**

- For **hospitalized patients with suspected or confirmed influenza, initiation of antiviral treatment with oral or enterically administered oseltamivir** is recommended **as soon as possible**.
- For **outpatients with complications or progressive disease >2 days after symptom onset and suspected or confirmed influenza** (e.g., pneumonia, or exacerbation of underlying chronic medical conditions), **initiation of antiviral treatment with oral oseltamivir** is recommended **as soon as possible**.
- For outpatients with suspected or confirmed uncomplicated influenza within two days of symptom onset, [oral oseltamivir, inhaled zanamivir, intravenous peramivir, or oral baloxavir](#) may be used for treatment, depending upon approved age groups and contraindications. In one randomized controlled trial, baloxavir had greater efficacy than oseltamivir in adolescents and adults with influenza B virus infection<sup>1</sup>.

**Vaccination against influenza** remains the best way to help prevent influenza infection and severe disease.

- Influenza [vaccination is recommended](#) for **all individuals ages 6 months and older**.
- See the HHS [Recommendations for Respiratory Infection Season Health Advisory](#) for complete influenza vaccine recommendations for this season.

**For more information, call ND HHS Disease Control and Forensic Pathology at (701) 328-2378 or (800) 472-2180.** Influenza is a reportable condition via electronic laboratory reporting. Novel influenza cases and pediatric influenza deaths should be reported immediately by calling (701) 328-2378 or (800) 472-2180.

### **Additional Resources**

- ISDA Recommendations - <https://www.idsociety.org/practice-guideline/influenza/>
- CDC Recommendations - <https://www.cdc.gov/flu/hcp/antivirals/summary-clinicians.html>
- Influenza Vaccine Recommendations - [ACIP Recommendations: Influenza \(Flu\) Vaccine | ACIP Recommendations | CDC](#).
- The ND HHS [influenza website](#) is updated weekly.

**Categories of Health Alert Network messages:**

**Health Alert** Requires immediate action or attention; highest level of importance

**Health Advisory** May not require immediate action; provides important information for a specific incident or situation

**Health Update** Unlikely to require immediate action; provides updated information regarding an incident or situation

**HAN Info Service** Does not require immediate action; provides general public health information

##This message was distributed to state and local health officers, state and local epidemiologists, state and local laboratory directors, public information officers, HAN coordinators, and clinician organizations##