aspren | ASPREN UPDATE

Reporting period: Week 29-30 2026
(13 July - 26 July 2026)

Summary: Influenza-like illness rates are remaining steady. Influenza, RSV and SARS-CoV-2 positivity are steady.

—

ILI levels have remained steady and are lower than seen during the same period in previous years

11%

influenza positivity during the reporting period.

97

cases of influenza have been detected this year:
83 influenza A
14 influenza B

21

cases of influenza have been detected in this reporting period:
16 influenza A
5 influenza B

Key messages

- ILI rates have remained steady since the last reporting period and are still lower than in previous years (see Figure 1). Currently, ILI rates are at baseline levels in most jurisdictions and at normal levels in South Australia, ACT and NSW (see Figure 3)
- ILI activity is highest in the 1 - 4 years age group (see Figure 4)
- Influenza virus detections have remained steady since the last reporting period and are lower than seen in previous years for the same reporting period (see Table 2).
- RSV activity has increased from 12% to 13% since the last reporting period.
- SARS-CoV-2 activity has remained the same at 3% since the last reporting period.

This report is based on data available as at 26 July 2026. Delays in the reporting of data may cause data to change retrospectively.

Participation

343 reporters submitted data to ASPREN this fortnight (410 YTD) in all 8 jurisdictions.

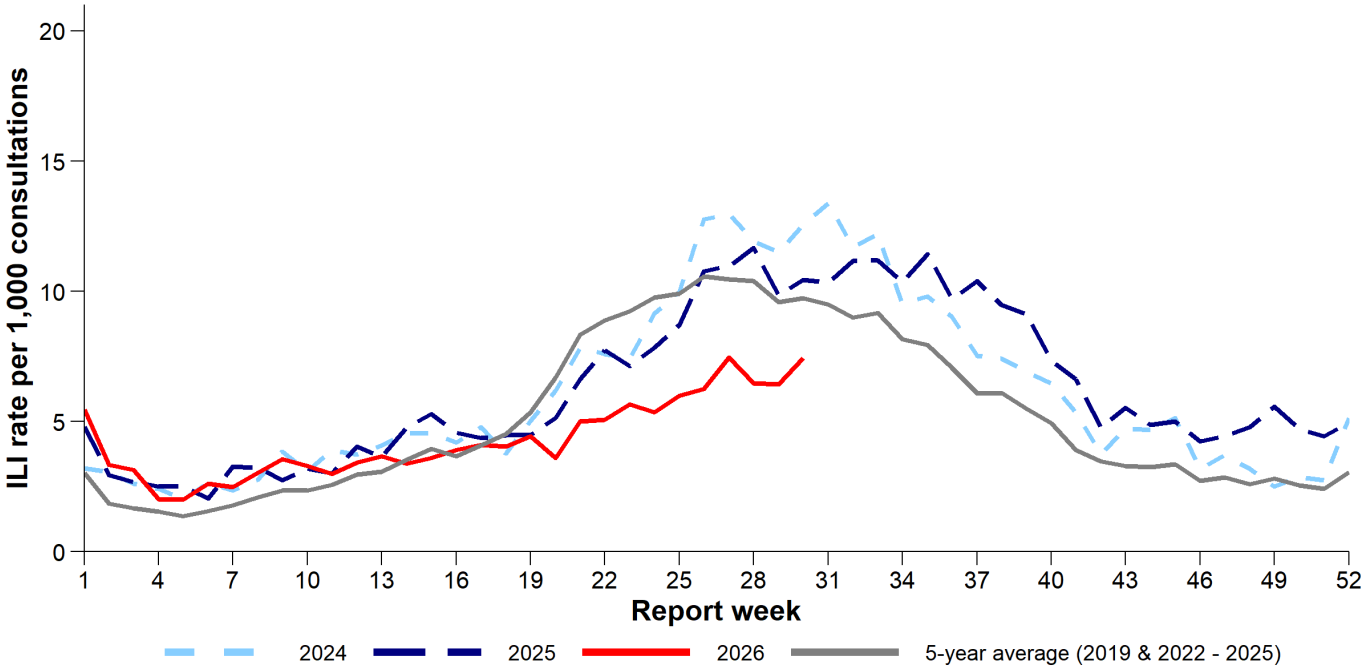
Table 1. ASPREN reporter participation, weeks 29-30 (13 July–26 July), 2026.

Jurisdiction	GPs	Consultations	Percentage	ABS population percentage
ACT	22	2,959	6.4%	1.8%
NSW	82	13,211	24%	31%
NT	35	2,403	10%	0.96%
QLD	31	6,103	9%	20%
SA	40	5,484	12%	6.9%
TAS	22	2,644	6.4%	2.1%
VIC	46	8,010	13%	26%
WA	65	9,812	19%	11%
Australia	**343**	**50,626**	**100%**	**100%**

Syndromic Surveillance

Influenza-like illness (ILI)

Figure 1. ASPREN ILI rate per 1,000 consultations, 1 January 2024 - 26 July 2026 and the 5-year average for 2019, 2022-2025.



This report is based on data available as at 26 July 2026. Delays in the reporting of data may cause data to change retrospectively.

Figure 2. ASPREN ILI rate by jurisdiction, 3 January 2026 - 26 July 2026.

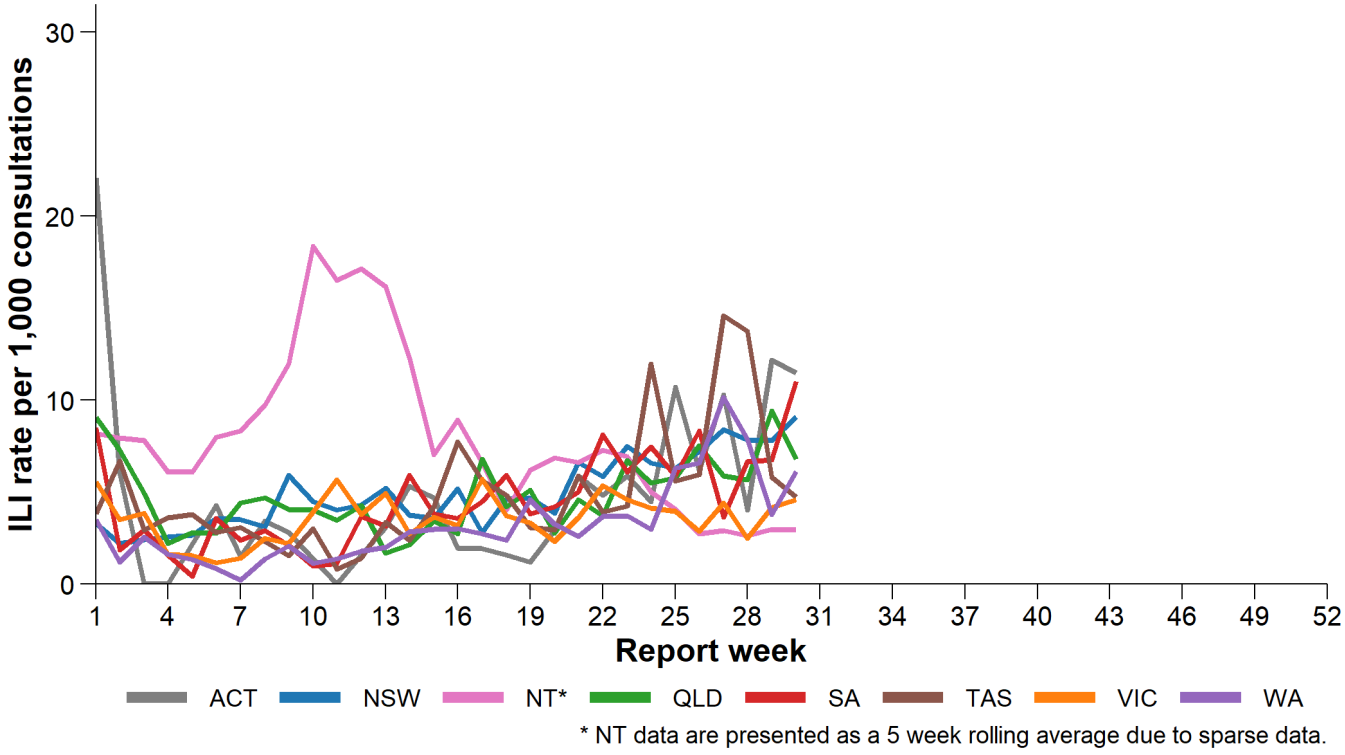
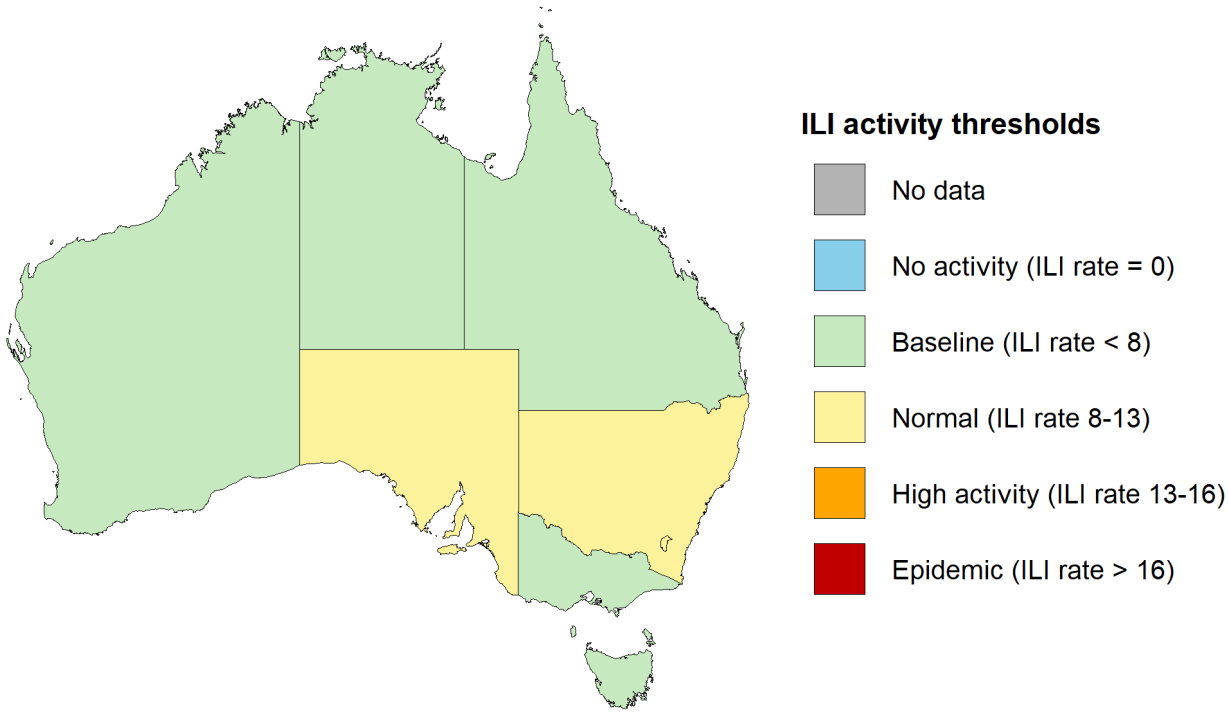
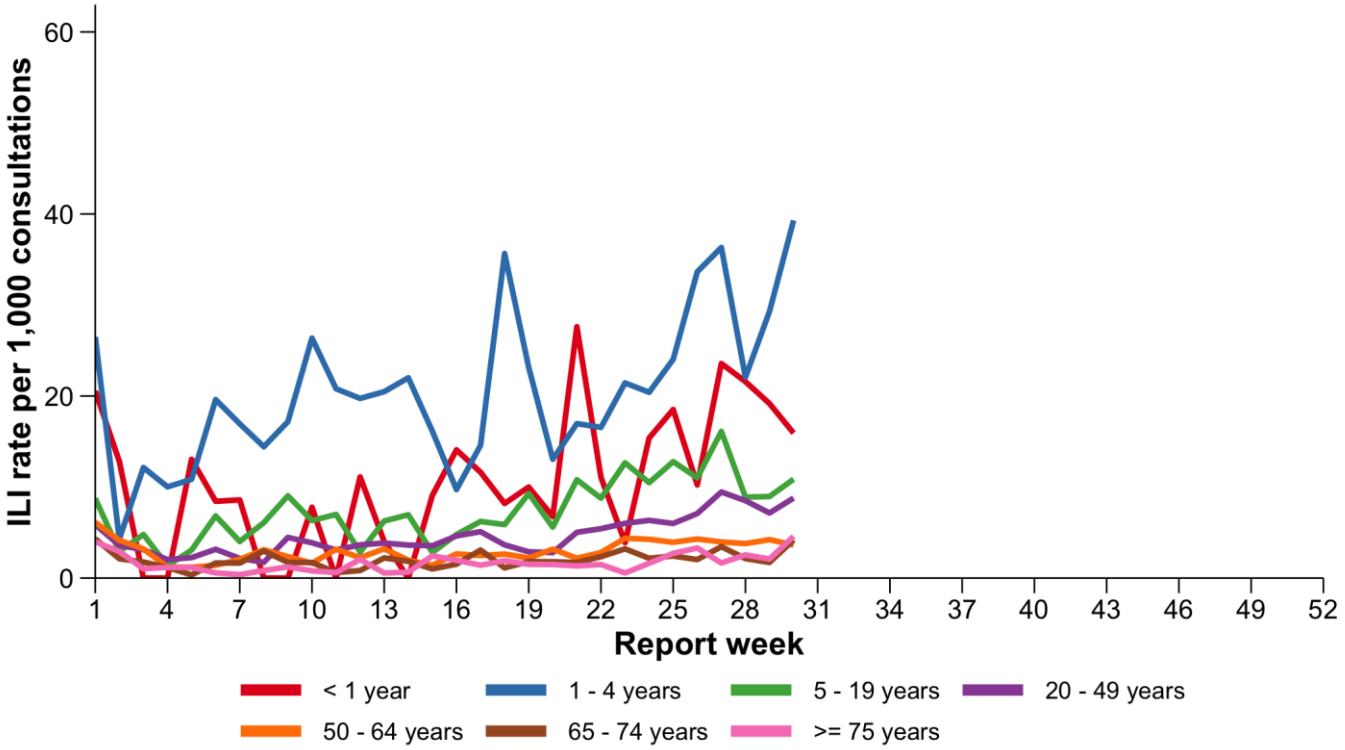


Figure 3. Map of ILI activity by jurisdiction, week 30 2026.



This report is based on data available as at 26 July 2026. Delays in the reporting of data may cause data to change retrospectively.

Figure 4. ASPREN ILI rate by age, 3 January 2026 - 26 July 2026.



Summary ILI activity

- Nationally, ILI rates are lower than seen at this time of year compared to previous seasons (Figure 1).
- ILI rates have remained steady since the last reporting period. They are at baseline levels, nationally and at normal levels in some jurisdictions (ACT, NSW, SA). ILI activity exceeding baseline is a predictive indicator of the start of the influenza season.
- ILI rates are highest for the 1 - 4 years age group and lowest for people aged 65 - 74 years (Figure 4).

This report is based on data available as at 26 July 2026. Delays in the reporting of data may cause data to change retrospectively.

Virological Surveillance

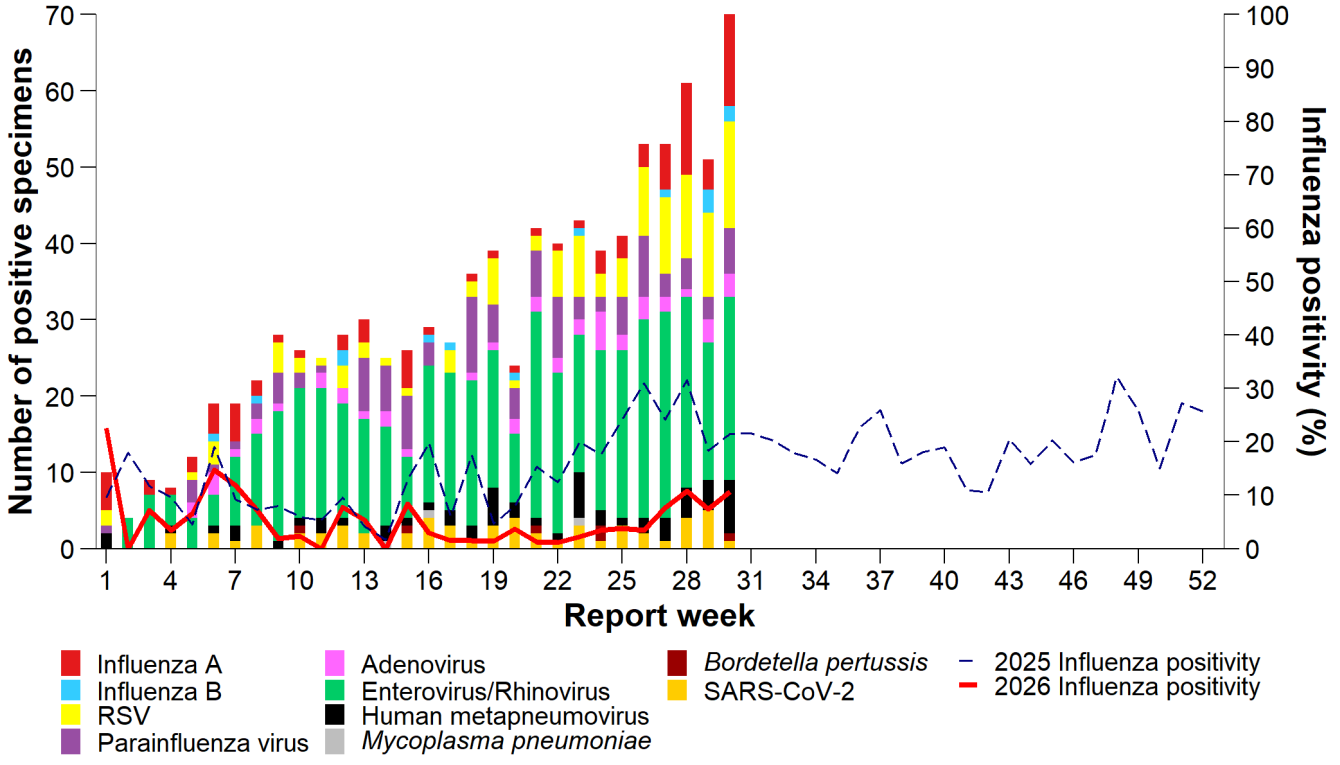
Respiratory pathogen activity

Table 2: ASPREN virological surveillance summary, 2026.

Indicator	Current fortnight 13 Jul – 26 Jul 2026	Previous fortnight 29 Jun – 12 Jul 2026	YTD 29 Dec 2025 – 26 Jul 2026	Last YTD 30 Dec 2024 – 27 Jul 2025
Number of ILI notifications	363	347	3250	4342
Number of swab tests performed	193	174	1591	1657
% swab tests positive for influenza	11%	11%	6%	19%
% swab tests positive for influenza A	8.3%	10%	5.2%	15%
% swab tests positive for influenza B	2.6%	0.57%	0.88%	4.8%
% swab tests positive for SARS-CoV-2	3.1%	2.9%	3.6%	7%
% swab tests positive for RSV	13%	12%	7%	6%
% swab tests positive for any pathogen	27%	25%	16%	32%

YTD: Year to-date

Figure 5. ASPREN weekly virological detection of respiratory pathogens, 2026.



This report is based on data available as at 26 July 2026. Delays in the reporting of data may cause data to change retrospectively.

Figure 6: ASPREN weekly virological detection of influenza by type and subtype, RSV and SARS-CoV-2, 2026.

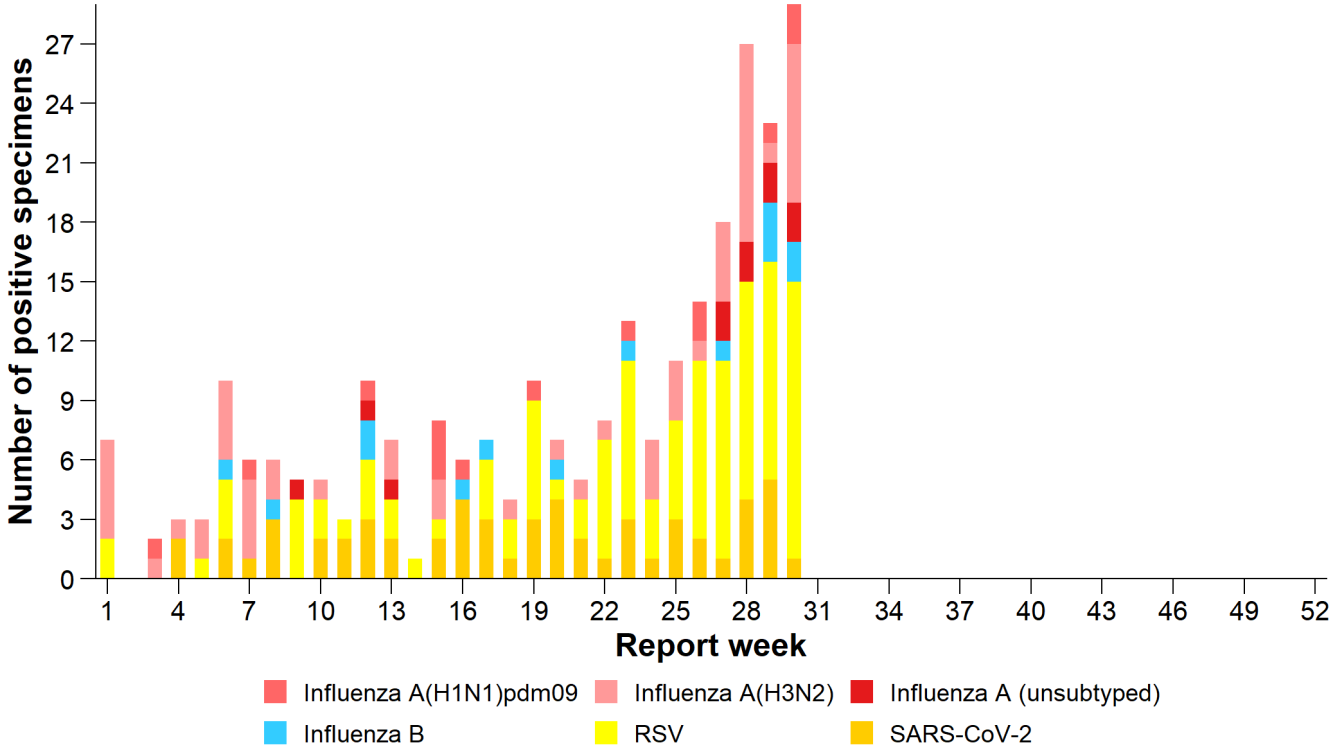
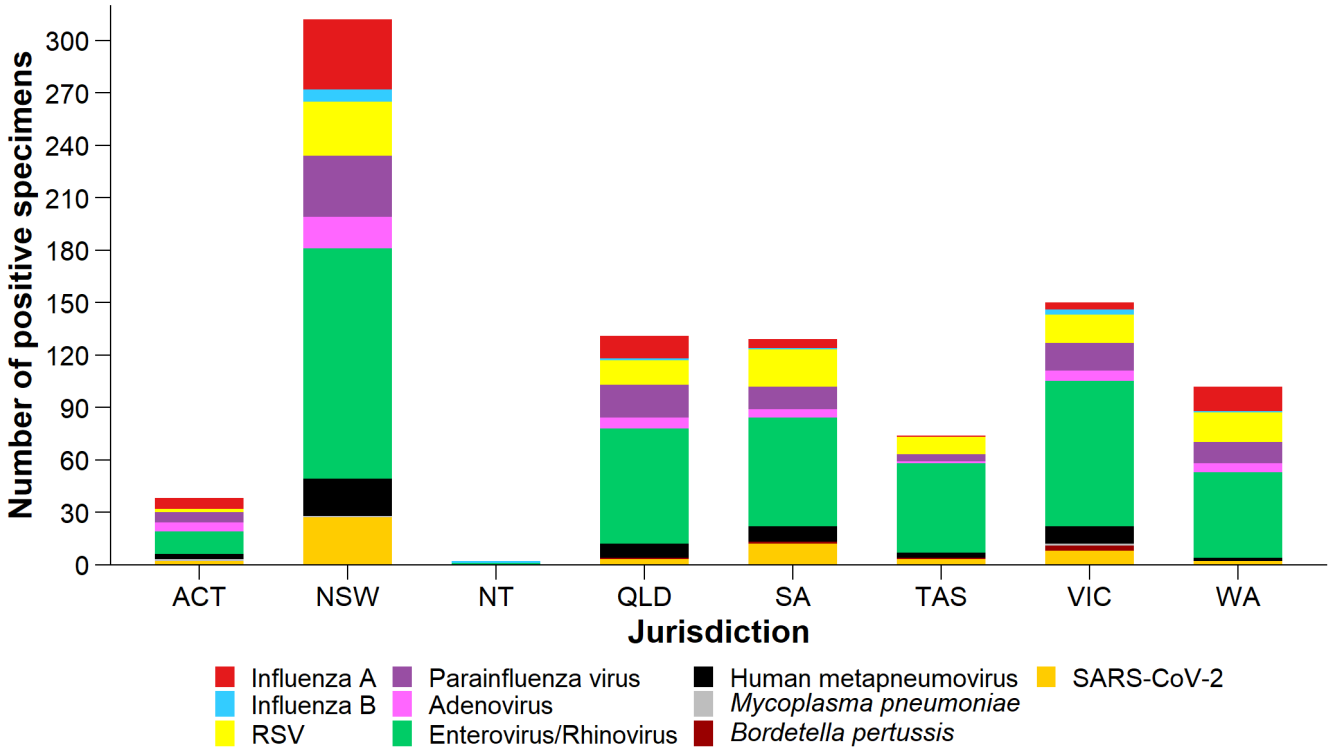


Figure 7: ASPREN virological detection by jurisdiction, 2026.



This report is based on data available as at 26 July 2026. Delays in the reporting of data may cause data to change retrospectively.

Table 3: ASPREN respiratory pathogen positivity by age group, 2026.

Virus	<1 year N = 47	1-4 years N = 244	5-19 years N = 226	20-49 years N = 492	50-64 years N = 252	65-74 years N = 164	≥75 years N = 166
Influenza	1 (2.1%)	13 (5.3%)	25 (11%)	35 (7.1%)	9 (3.6%)	11 (6.7%)	3 (1.8%)
Influenza A	1 (2.1%)	13 (5.3%)	19 (8.4%)	30 (6.1%)	8 (3.2%)	9 (5.5%)	3 (1.8%)
Influenza A H1N1pdm09	0 (0%)	2 (0.8%)	0 (0%)	7 (1.4%)	3 (1.2%)	2 (1.2%)	1 (0.6%)
Influenza A H3N2	1 (2.1%)	10 (4.1%)	19 (8.4%)	21 (4.3%)	4 (1.6%)	7 (4.3%)	1 (0.6%)
Influenza A H3N2 subclade K	1 (2.1%)	9 (3.7%)	14 (6.3%)	13 (2.7%)	2 (0.8%)	3 (1.9%)	1 (0.6%)
Influenza B	0 (0%)	0 (0%)	6 (2.7%)	5 (1.0%)	1 (0.4%)	2 (1.2%)	0 (0%)
SARS-CoV-2	1 (2.1%)	8 (3.3%)	8 (3.5%)	16 (3.3%)	12 (4.8%)	3 (1.8%)	9 (5.4%)
RSV	8 (17%)	39 (16%)	10 (4.4%)	24 (4.9%)	9 (3.6%)	12 (7.3%)	9 (5.4%)
NIRP positive	36 (78%)	178 (74%)	114 (51%)	209 (43%)	108 (44%)	71 (44%)	76 (48%)
Positive for any pathogen	36 (78%)	188 (78%)	138 (62%)	243 (51%)	116 (47%)	80 (49%)	78 (49%)
Negative for all pathogens	10 (22%)	54 (22%)	86 (38%)	237 (49%)	129 (53%)	82 (51%)	82 (51%)

Proportion positivity was calculated as the number of specimens detected in each age group divided by the total number of specimens detected for that age group.
NIRP: Non-influenza respiratory pathogen. Includes parainfluenza virus 1, 2, 3, human metapneumovirus, adenovirus, enterovirus / rhinovirus, Mycoplasma pneumoniae, and Bordetella pertussis.

Summary virological activity

- Enterovirus/Rhinovirus has been the most common pathogen detected this reporting period and throughout the year.
- 21 cases of influenza were detected since the last reporting period: 9 A(H3N2), of which 9 were subclade K; 3 A(H1N1)pdm09; and 5 B.
- RSV positivity has increased slightly since the last reporting period from 12% to 13%. Year-to-date, a majority of RSV presentations have been among persons aged 1 - 4 years.
- SARS-CoV-2 activity has remained steady since the last reporting period at 3% positivity. Ear-to-date, positivity has been highest among adults aged 20-49 years.

Vaccination Coverage and Vaccine Effectiveness (VE)

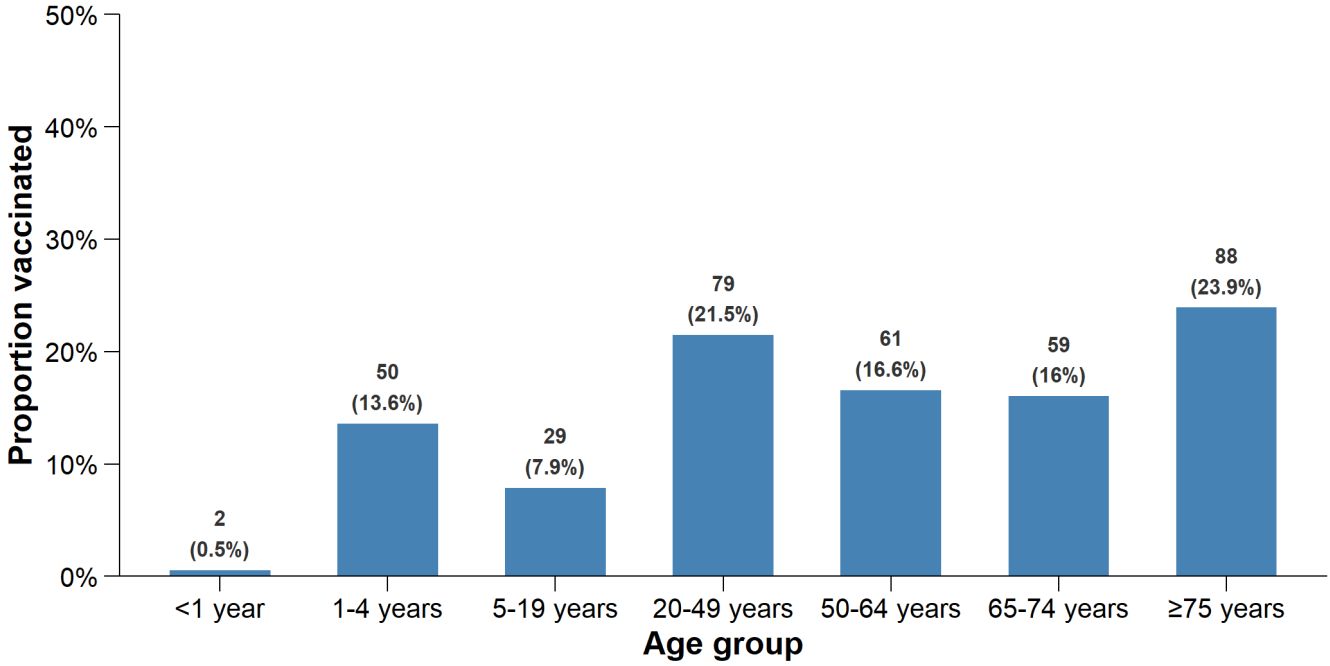
Vaccination coverage

Table 4. ASPREN vaccination coverage by year, 2024 - 2026

Vaccine	Vaccinated	Not vaccinated	Unknown vaccination status	% vaccinated 2026 YTD (n)	% vaccinated 2025 (n)	% vaccinated 2024 (n)
Influenza	368	696	6	35% (368)	36% (1,147)	36% (975)
COVID-19	89	1,444	58	6% (89)	8% (251)	N/A
RSV < 6 months	8	1	2	89% (8)	49% (18)	20% (8)
Maternal RSV	27	6	2	82% (27)	N/A	N/A
RSV > 6 months	81	1,269	210	6% (81)	4% (98)	1% (11)

Influenza vaccination coverage is calculated among influenza-negative patients. Patients are classified as vaccinated if they received an influenza vaccination after the vaccine became available (around week 15, 2026).

Figure 8. Influenza vaccination coverage by age and influenza status, 2026.



Summary vaccination coverage

- Compared to the same period in 2025, vaccination coverage for influenza is lower in 2026.
- It is too early in the season to estimate vaccine effectiveness.

This report is based on data available as at 26 July 2026. Delays in the reporting of data may cause data to change retrospectively.