

Influenza Division Key Points: 2025-2026 Flu Season**September 4, 2025**

NOTE: The key points related to the 2025-2026 influenza (flu) season will be updated as appropriate throughout the fall and winter.

In this document:

- [Summary Key Points for the 2025-2026 Flu Season](#)
- [Information for Specific Groups of People](#)
- [Summary Information on the 2024-2025 Flu Season](#)

Summary Key Points for the 2025-2026 Flu Season

- Flu causes a significant burden on the health of Americans during most flu seasons.
- The burden of flu in the United States is influenced by several factors, including the characteristics of circulating influenza viruses, the timing of the season (e.g., whether the season starts earlier or lasts longer or is shorter than average), how many people have pre-existing immunity to circulating influenza viruses, how well the flu vaccine is protecting those who are vaccinated against illness, and how many people get vaccinated.
- While flu activity continues year-round in the United States, flu activity is low at this time, which is typical during the summertime.
- The timing, intensity, and severity of the upcoming flu season is difficult to predict, but flu vaccination is a critical tool to reduce the risk of flu and its potentially serious complications.
- CDC expects influenza viruses to spread along with other viruses this fall and winter, including respiratory syncytial virus (RSV) and the virus that causes COVID-19.
- Everyone 6 months and older, with rare exceptions, should get a flu vaccine every season.
 - For the 2025-2026 flu season, CDC recommends seasonal flu vaccination with single-dose formulations that are free of thimerosal as a preservative for children, adults, and pregnant women.
- Also new for the 2025-2026 season:
 - On March 13, 2025, the U.S. Food and Drug Administration (FDA) made recommendations concerning the composition of 2025-2026 U.S. flu vaccines.
 - In September 2024, the FDA approved FluMist, the live attenuated nasal spray flu vaccine, for self- or caregiver administration.
 - In March 2025, the FDA approved Flublok, the recombinant flu vaccine, previously approved for ages ≥18 years, for ages ≥9 years.
- Manufacturers have said they will provide as many as 154 million doses of flu vaccine to the United States market this season.
- Most of the U.S. flu vaccine supply for 2025-2026 will be free of thimerosal as a preservative.

- Updated 2025-2026 flu vaccines will all be trivalent (i.e., contain three virus components), the same as last season, and will protect against an influenza A(H1N1), A(H3N2), and a B/Victoria lineage virus.
- September and October are generally good times for most people to be vaccinated.
 - CDC recommends vaccination before the end of October, ideally, but vaccination efforts should continue for as long as influenza viruses are circulating.
- CDC tracks U.S. flu activity weekly in a report called “[FluView](#).”
- The first full FluView of the 2025-2026 season will be released on Friday, October 10, 2025.
- Some people are at higher risk of developing severe flu complications if they get sick, including people 65 and older, pregnant women, young children, and people with underlying medical conditions. Getting a flu vaccination every year is especially important for these groups of people.
- There are three flu vaccines that are preferentially recommended for people 65 years and older.
 - These are [Fluzone High-Dose vaccine](#), [Flublok recombinant flu vaccine](#), and [Fluad adjuvanted flu vaccine](#).
 - The preferential recommendation is based on a review of available studies which suggested that, in this age group, these vaccines are potentially more effective than standard dose unadjuvanted flu vaccines.
 - More information is available at [Flu and People 65 Years and Older](#).
- There is no preferential recommendation for any one flu vaccine over others for people younger than 65 years.
- Getting an annual flu vaccine is very important to protect yourself, your loved ones, and your community against flu.
- If you have questions or concerns about flu vaccination, you should talk to your health care provider about making the best flu vaccination decision for yourself and your family.
- While flu vaccination varies in how well it works each season, depending on many factors, flu vaccines have been shown to reduce the risk of flu illness, hospitalization, and death.
- Health care providers play an important role in promoting flu vaccination and supporting patients to make informed decisions about vaccination. Health care providers should be prepared to answer questions and help patients make an informed flu vaccination decision for themselves and their families.

2025-2026 Recommendations

- At a meeting in June 2025, CDC’s Advisory Committee on Immunization Process (ACIP) recommended annual seasonal flu vaccination for people 6 months and older for those who do not have a contraindication to vaccination.

- For the 2025-2026 flu season, ACIP recommends that children aged 18 years and younger, pregnant women, and all adults receive seasonal flu vaccines only in single-dose formulations that are free of thimerosal as a preservative.
- Memos to adopt the 2025-2026 ACIP recommendations on annual flu vaccination were signed by Secretary of Health and Human Services Robert F. Kennedy Jr on July 22, 2025.
- Thus, for the 2025-2026 flu season, CDC recommends annual seasonal flu vaccination for people 6 months and older with single-dose flu vaccines that are free of thimerosal as a preservative.
 - Thimerosal is used as a preservative in multi-dose vials.
 - Last season, about 95% of the U.S. flu vaccine supply did not include thimerosal as a preservative.

FluMist for Self- or Caregiver-Administration

- On September 20, 2024, The Food and Drug Administration (FDA) [approved](#) the nasal spray flu vaccine, FluMist, for self- or caregiver-administration.
- [FluMist is sprayed into the nose and is approved](#) for the prevention of flu in people 2 through 49 years of age who are not pregnant.
- FluMist is not recommended during pregnancy, for people who are immunocompromised, and for people with certain medical conditions. The recommendations for who should and should not receive FluMist remain the same for self-, caregiver-, and health care provider administration.
- The option for self- or caregiver-administration will be available for the 2025-2026 flu season.
- When supplied for self- or caregiver-administration, it will be possible for people to administer FluMist to themselves (if they are 18 through 49 years old) or for a caregiver who is 18 years or older to administer it to a child (2-17 years old).
- FluMist contains weakened live influenza viruses.
- FluMist protects against the same viruses as other flu vaccines, which are designed to protect against an influenza A(H1N1) virus, and an A(H3N2) virus, and an influenza B virus.

2025-2026 Flu Vaccine Composition

- The composition of flu vaccines for this season has been updated from 2024-2025. The updates are labeled below.
- Flu vaccines for the U.S. 2025-2026 season will contain the following:
 - Egg-based vaccines
 - an A/Victoria/4897/2022 (H1N1)pdm09-like virus;
 - an A/Croatia/10136RV/2023 (H3N2)-like virus (NEW); and
 - a B/Austria/1359417/2021 (B/Victoria lineage)-like virus
 - Cell- or recombinant-based vaccines

- an A/Wisconsin/67/2022 (H1N1)pdm09-like virus;
 - an A/District of Columbia/27/2023 (H3N2)-like virus (NEW); and
 - a B/Austria/1359417/2021 (B/Victoria lineage)-like virus
- The composition of 2025-2026 flu vaccines in the United States is the same as what was recommended for the 2025 Southern Hemisphere flu season.

Flu Vaccine Benefits

- Flu vaccination has many important benefits:
 - Flu vaccination reduces the burden of flu illness, hospitalization, and death.
 - Flu vaccination can reduce your risk of getting sick with flu.
 - Flu vaccination has been shown in several studies to reduce severity of illness in people who get vaccinated but still get sick.
 - Flu vaccination can reduce the risk of flu-associated hospitalization.
 - Flu vaccination is an important preventive tool for people with chronic health conditions.
 - Flu vaccination during pregnancy helps protect against flu during and after pregnancy and helps protect infants from flu in their first few months of life.
 - Flu vaccine can be lifesaving in children.
- Getting vaccinated could also protect people around you, including those who are more vulnerable to serious flu illness, like babies and young children, older people, and people with certain chronic health conditions.
- For more on flu vaccine benefits, visit: [Benefits of the Flu Vaccine](#)
- Despite the many benefits offered by flu vaccination, only about half of Americans get an annual flu vaccine.
- During an average flu season, flu can cause millions of illnesses, hundreds of thousands of hospitalizations, and tens of thousands of deaths.
- In recent years, vaccine coverage has fallen among certain groups of people.
- Many more people could be protected from flu if more people got vaccinated.

When to Get Vaccinated

- Because timing of the onset, peak, and decline of flu activity varies each season, it's best to be vaccinated before flu begins spreading in your community.
- For most people who only need one dose of flu vaccine for the season, September and October are generally good times to be vaccinated against flu.
- Ideally, everyone should be vaccinated by the end of October. However, even if you are not able to get vaccinated until December or later, flu vaccination is still recommended because flu activity often peaks in February and significant activity can continue into May.
- Additional considerations concerning the timing of vaccination for certain groups of people include:

- Most adults, especially those 65 years and older, and pregnant women in the first or second trimester should generally not get vaccinated early (in July or August) because protection typically decreases over time. However, early vaccination can be considered for any person who is unable to return at a later time to be vaccinated.
- Some children need two doses of flu vaccine. For those children it is recommended to get the first dose as soon as vaccine is available, because the second dose needs to be given at least four weeks after the first.
- Vaccination during July and August can also be considered for children who need only one dose. While waning of immunity after vaccination has been observed in all age groups, there are fewer data from studies showing waning immunity in children. Children might visit health care providers during the late summer months for medical examinations before the start of school. Vaccination can be considered at this time.
- Vaccination during July and August can also be considered for women who are in the third trimester of pregnancy during those months, because this can help protect their infants during the first months of life (when they are too young to be vaccinated).

Healthy Habits to Prevent Flu

- The best way to reduce the risk of seasonal flu and its potentially serious complications is to get vaccinated each year, but preventive actions like avoiding people who are sick, covering your cough and washing your hands also can help stop the spread of germs and prevent respiratory illnesses like flu.
- The tips below will help you learn about actions you can take to protect yourself and others from flu and help stop the spread of germs.
 - Avoid close contact.
 - Avoid close contact with people who are sick.
 - When you are sick, keep your distance from others to protect them from getting sick, too.
 - Stay home when you are sick.
 - If possible, stay home from work, school, and errands when you're sick. You can go back to your normal activities when, for at least 24 hours, both are true: (1) your symptoms are getting better overall, and (2) you have not had a fever (and are not using fever-reducing medication).
 - Cover your mouth and nose.
 - Cover your mouth and nose when coughing or sneezing.
 - Wearing a mask is an additional prevention strategy that you can choose to do to further protect yourself and others.

- When worn by a person with an infection, masks reduce the spread of the virus to others.
 - Masks can also protect wearers from breathing in infectious particles from people around them.
- Clean your hands.
 - Washing your hands often will help protect you from germs.
 - If soap and water are not available, use an alcohol-based hand sanitizer.
- Avoid touching your eyes, nose or mouth.
 - Germs can be spread when a person touches something that is contaminated with germs and then touches his or her eyes, nose, or mouth.
- Take steps for cleaner air.
 - You can improve air quality by bringing in fresh outside air, purifying indoor air or gathering outdoors.
 - Cleaner air can reduce the risk of exposure to viruses.
- Practice good hygiene and other healthy habits.
 - Cleaning frequently touched surfaces, such as countertops, handrails, and doorknobs regularly can help prevent the spread of some illnesses.
 - Also, get plenty of sleep, be physically active, manage your stress, drink plenty of fluids, and eat nutritious food.
- For more on healthy habits to prevent flu, visit: [Healthy Habits to Prevent Flu](#)

Information for Specific Groups of People

People with Certain Medical Conditions

- In past flu seasons, 9 out of 10 adults hospitalized with flu had at least one reported underlying medical condition.
- Diabetes, asthma and chronic lung disease, and chronic heart disease (even if well managed) are among the most common long-term medical conditions that place people at higher risk for serious flu complications.
 - A full list of medical conditions that put people at increased risk for flu complications is available at [People at Increased Risk for Flu Complications](#)
- Flu can also make long-term health problems worse, even if they are well managed.
- It is particularly important that adults with chronic medical conditions get a flu vaccine every year.
- CDC recommends that people at higher risk of developing serious flu complications be treated with flu antiviral drugs if they get sick with flu.
- Links for more information:
 - [Flu and People with Asthma](#)
 - [Flu and People with Heart Disease or History of Stroke](#)
 - [Flu and People with Diabetes](#)
 - [Flu and People with Chronic Kidney Disease](#)

- [Flu and People with Disabilities](#)
- [Flu and People Living with HIV](#)
- [Flu and Children with Neurologic Conditions](#)
- [Flu and Cancer](#)

Adults 65 Years and Older

- Flu vaccination is important for people 65 years and older because people in this age group are at higher risk of developing serious flu complications.
- While flu seasons vary in severity, during most seasons, people 65 years and older bear the greatest burden of severe flu disease.
- There is a preferential flu vaccine recommendation for adults 65 years and older in the United States. CDC and ACIP preferentially recommend the use of higher dose flu vaccines (including high-dose inactivated and recombinant) or adjuvanted inactivated flu vaccine over standard-dose unadjuvanted flu vaccines for people 65 years and older.
 - This recommendation is based on a review of available studies which suggests that, in this age group, these vaccines are potentially more effective than standard dose unadjuvanted flu vaccines.
 - If none of the three flu vaccines preferentially recommended for people 65 years and older is available at the time of administration, people in this age group should get any other age-appropriate flu vaccine instead.
- For more information, visit: [Flu and People 65 Years and Older](#)

Children/Parents

- Flu is more dangerous than the common cold for children.
- Flu places a large burden on the health and well-being of children and their families. Each year, millions of children get sick with seasonal flu; thousands of children are hospitalized, and some children die from flu.
- Children commonly need medical care because of flu, especially children younger than 5 years old.
- Children younger than 5 years old—especially those younger than 2—and children of any age with certain chronic health conditions, like asthma and diabetes, are at higher risk of developing potentially serious flu complications.
- While not at higher risk, healthy children 5 years and older can also get very sick from flu, in addition to spreading flu to vulnerable family members like infants younger than 6 months and adults who are 65 years and older or people of any age who have certain chronic health conditions.
- Flu can be serious for children, and a flu vaccine is the best way to protect your kids from flu.
- As of the week ending August 23, 2025, a total of 278 flu-associated pediatric deaths occurring during 2024-2025 have been reported to CDC.

- This is the highest number of pediatric deaths reported in any non-pandemic flu season since flu-related deaths in children became reportable in 2004.
- Among children who were eligible for flu vaccination and with known vaccine status, 90% of reported pediatric deaths this season (compared to 82% during the 2023-2024 season) have occurred in children who were not fully vaccinated against flu (as of the week ending August 23, 2025).
- Some children 6 months to 8 years old need two doses of flu vaccine this season:
 - Children in this age group getting vaccinated for the first time,
 - Children who have only previously received one dose of flu vaccine, and
 - Children whose flu vaccination history is unknown.
- For these children it is recommended they get the first dose as soon as vaccine is available, because the second dose needs to be given at least four weeks after the first. Your child's health care provider can tell you if your child needs two doses.
- Children aged 6 months to 8 years who have received a total of two or more doses of flu vaccine previously (even if they were during different seasons) and all people 9 years of age and older need only one dose of flu vaccine each season.
- Consult a health care provider to determine whether two doses are recommended for your child.
- For more information, visit: [Flu and Children](#)

Pregnant Women

- Flu can be dangerous for pregnant women and may be harmful for their developing baby.
- Flu during pregnancy is more likely to cause illness that results in hospitalization.
- Flu shots have been given to millions of women during their pregnancies over more than 50 years with an excellent safety record. There is substantial evidence that flu shots are safe during pregnancy for mom and baby.
- Getting the flu shot during pregnancy can protect against flu and flu related hospitalizations.
- Flu vaccination during pregnancy also can protect babies for several months after birth, and before they can be vaccinated, because the pregnant mother passes antibodies on to the developing baby during pregnancy.
- When you get a flu shot while pregnant or breastfeeding your body develops antibodies against flu that are shared with your baby through breast milk.
- CDC and ACIP recommend flu vaccination during any trimester of pregnancy.
- For more information, visit: [Flu & Pregnancy](#)

Other Factors that Contribute to Differences in Flu-related Outcomes

- Flu can be serious and can lead to hospitalization and death.

- Preventable difference in burden of severe flu outcomes has been observed among various groups, particularly by race and ethnicity.
- Black, Hispanic, and American Indian and Alaska Native (AI/AN) people often have had higher rates of hospitalization across all ages, from 2009 to 2023, after adjusting for age.
 - Compared to White adults, age-adjusted flu hospitalization rates were:
 - 1.8 times higher among Black adults
 - 1.4 times higher among American Indian or Alaska Native adults
 - 1.2 times higher among Hispanic or Latino adults
 - Compared with White children (0-17 years), age-adjusted flu hospitalization rates were:
 - 2.5 times higher among American Indian/Alaska Native children
 - 2.2 times higher among Black children
 - 1.7 times higher among Hispanic or Latino children
- Everyone can be the healthiest versions of themselves when they have opportunities, choices, and the conditions in their environments to reduce severe flu outcomes.
- This includes ensuring everyone has the resources and opportunities they need, when they need them, to receive a flu vaccine.
- While flu vaccination is the best way to reduce the risk of flu and its potentially serious complications, flu vaccination rates among people in some racial and ethnic minority groups are lower than vaccination rates among non-Hispanic White people.
- For more information, visit: [Flu and Healthy Lives for All](#)

Flu Vaccination for People with Egg Allergies

- Most flu vaccines today continue to be produced using an egg-based manufacturing process and, therefore, contain a small amount of egg proteins, such as ovalbumin.
- While ACIP has previously recommended that all people 6 months and older with egg allergy should be vaccinated for flu, in the past there have been additional safety measures recommended for administration of egg-based flu vaccine to people who have had severe allergic reactions to egg.
- Beginning with the 2023-2024 season, additional safety measures are no longer recommended for flu vaccination of people who are allergic to eggs beyond those recommended for receipt of any vaccine, regardless of the severity of previous reaction to egg.
- Everyone 6 months and older with egg allergy should receive an annual flu vaccine. Any flu vaccine (egg based or non-egg based) that is otherwise appropriate for the recipient's age and health status can be used.
- Severe and life-threatening reactions to vaccines are rare but can occur with any vaccine and in any vaccine recipient, regardless of allergy history. Medical settings in which vaccines are administered should be prepared to recognize and treat a severe allergic reaction if one occurs.

- For more information, visit: [Flu Vaccines and People with Egg Allergies](#)

Summary Information on the 2024-2025 Flu Season

- A report summarizing the 2024-2025 season will be released in September 2025. The below data are preliminary (data reported as of week ending August 23, 2025) and may change as more data are received.
- Preliminary Cumulative Hospitalization Rate
 - Based on data from FluSurv-NET, the cumulative hospitalization rate for the 2024-2025 season was the highest observed since the 2010-2011 season.
- Preliminary Flu Season Severity
 - The 2024-2025 flu season was classified as a high severity season overall and for all age groups (children, adults, older adults) and is the first high severity season since 2017-2018.
- Preliminary Number of Pediatric Deaths
 - A total of 278 flu-associated pediatric deaths occurring during 2024-2025 have been reported to CDC.
 - This is the highest number of pediatric deaths reported in any non-pandemic flu season since flu-related deaths in children became reportable in 2004.
 - Among children who were eligible for flu vaccination and with known vaccine status, 90% of reported pediatric deaths this season (compared to 82% during the 2023-2024 season) have occurred in children who were not fully vaccinated against flu.
- Preliminary Flu Burden Estimates
 - Based on preliminary data, CDC estimates there have been at least 47 million illnesses, 620,000 hospitalizations, and 27,000 deaths from flu so far during the 2024-2025 season.
- Preliminary Flu Burden Prevented Estimates
 - Based on preliminary data, CDC estimates that during the 2024-2025 flu season, flu vaccination prevented between 10 million and 18 million flu illnesses, 4.8 million and 8.4 million flu medical visits, and 180,000 and 460,000 flu-related hospitalizations.
- Preliminary Flu Vaccine Effectiveness Estimates
 - Interim flu vaccine effectiveness estimates from multiple networks show that during the 2024-2025 flu season, flu vaccines reduced the risk of flu-related medical visits and hospitalizations overall, though there was some variation in estimates across networks, by virus type and by recipient's age.
 - Specifically, the network with the largest sample size showed that flu vaccination reduced the risk of flu medical visits by nearly two-thirds and flu-related

hospitalizations by about three-fourths among vaccinated children and flu medical visits and hospitalization by about half among vaccinated adults.

- 2024-2025 flu season vaccine effectiveness data show that overall, flu vaccines reduced risk of flu-related medical visits and/or hospitalizations in people who were vaccinated compared with people who did not get vaccinated.