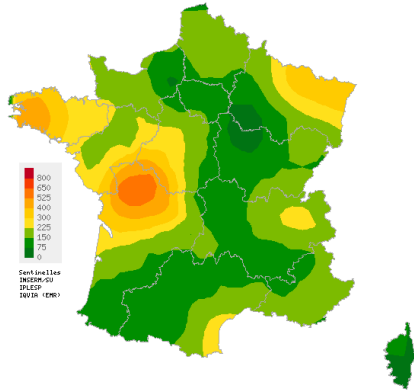
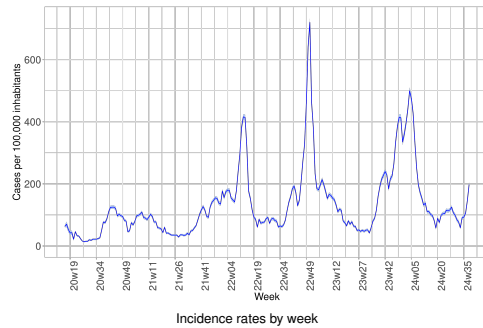


## Acute Respiratory Infection (ARI)

Covid-19, Influenza and other respiratory viruses  
Moderate activity in general practice



Spatial interpolation map of incidence rates at department level



Incidence rates by week

In mainland France, last week (2024w38), the incidence rate of acute respiratory infection (ARI) cases consulting in general practice was estimated at **198 cases per 100,000 population (95% CI [189; 207])**.

Subject to future data consolidation, this rate is **increasing** compared to the previous week (consolidated data for 2024w37: 146 [139; 152]).

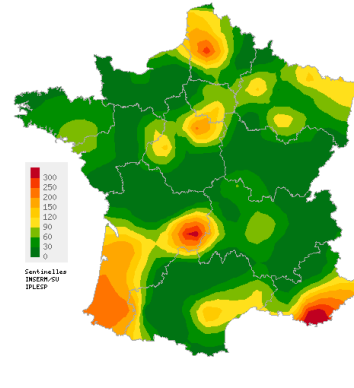
You will find complete regional data on page 2 of this bulletin, and more detailed information on ARI on page 3.

ARI are caused by a variety of respiratory viruses including SARS-CoV-2 (Covid-19), influenza viruses, and other respiratory viruses such as RSV, rhinovirus and metapneumovirus. The purpose of ARI surveillance is to monitor outbreaks of these virus.

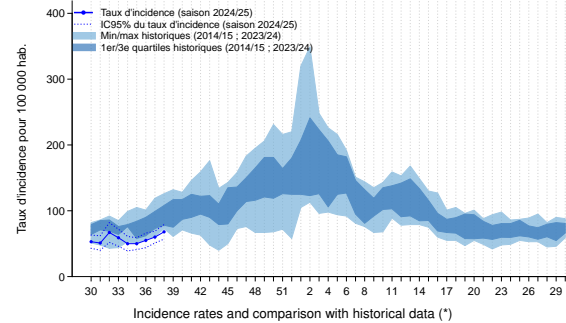
Data sources: Sentinelles and Electronic Medical Records (EMR) IQVIA

## Acute diarrhea

Low activity in general practice



Spatial interpolation map of incidence rates at department level



Incidence rates and comparison with historical data (\*)

In mainland France, last week (2024w38), the incidence rate of acute diarrhea cases seen in general practice was estimated at **68 cases per 100,000 population (95% CI [57; 79])**.

Subject to future data consolidation, this rate is **stable** compared to the previous week (consolidated data for 2024w37: 60 [51; 69]) and corresponds to a **lower activity level** than those usually observed at this time of the year.

Complete regional data are available on the second page of this bulletin.

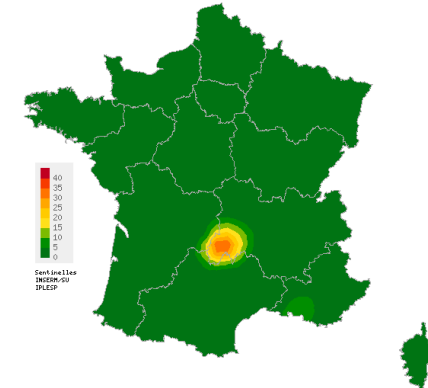
The purpose of acute diarrhea surveillance is to monitor gastroenteritis outbreaks.

(\*) Incidences of acute diarrhea were greatly reduced march 2020 and august 2021 by containment and sanitary measures to control the Covid-19 pandemic. They are not included in historical comparisons.

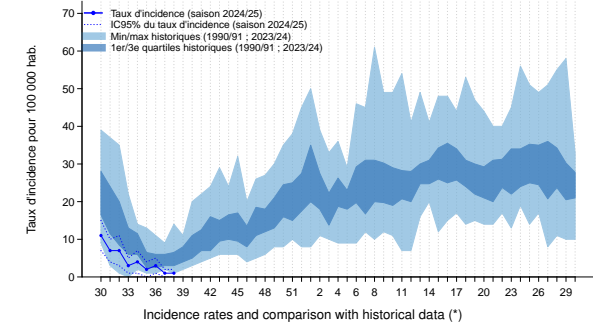
Data source: Sentinelles

## Chickenpox

Low activity in general practice



Spatial interpolation map of incidence rates at department level



Incidence rates and comparison with historical data (\*)

In mainland France, last week (2024w38), the incidence rate of Chickenpox cases seen in general practice was estimated at **1 case per 100,000 population (95% CI [0; 2])**.

Subject to future data consolidation, this rate is **stable** compared to the previous week (consolidated data for 2024w37: 1 [0; 2]) and corresponds to a **lower activity level** than those usually observed at this time of the year.

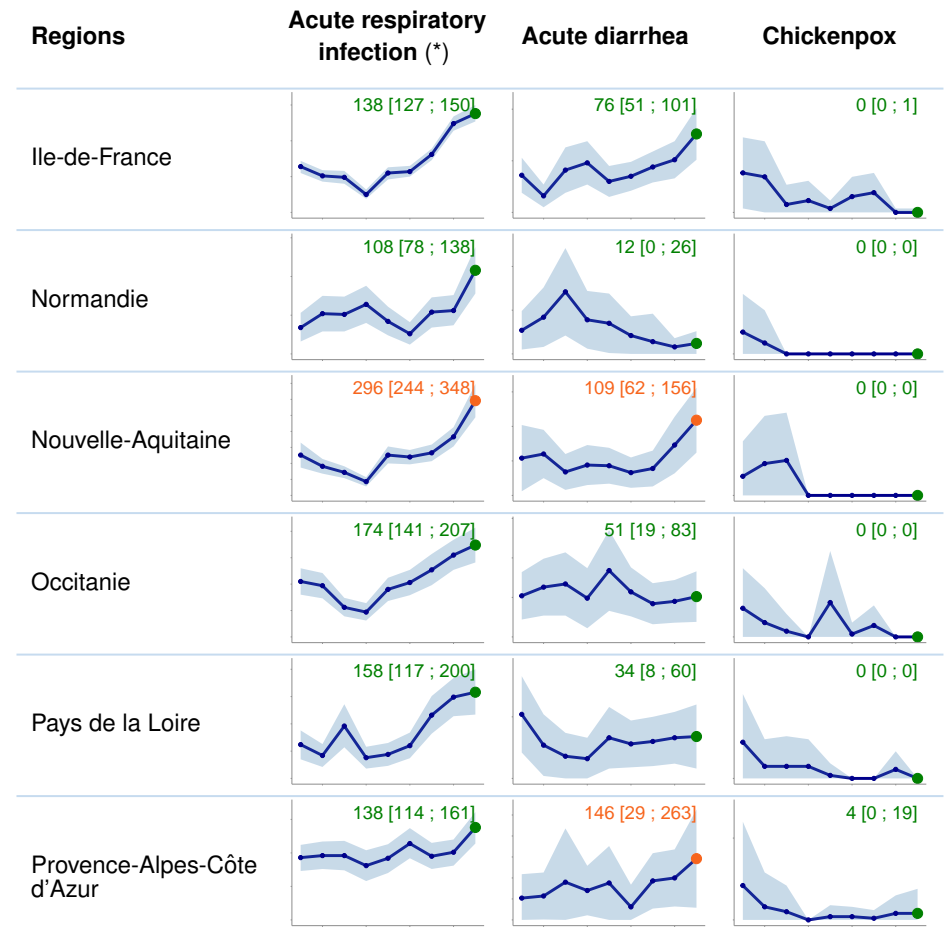
Complete regional data are available on the second page of this bulletin.

(\*) Incidences of Chickenpox cases during the 2019/2020 and 2020/2021 seasons were greatly reduced by the Covid-19 pandemic containment and health measures. They are not included in historical comparisons.

Data source: Sentinelles

# Incidence rates by french region

Observed situation in general practice for the week 38 of the year 2024, from 09/16/2024 to 09/22/2024



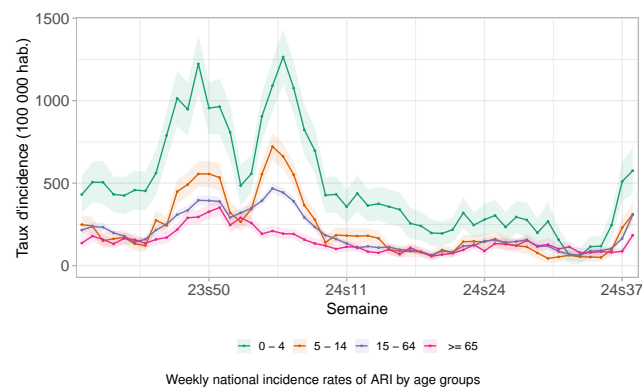
Data sources : Sentinelles Network and EMR (Electronic Medical Records) IQVIA (\*)



Each graph shows changes in the incidence rate per 100,000 population (curve) and its 95% confidence interval (blue zone) over the last eight weeks. The value of the last point and its confidence interval are shown at the top of each graph. The colour indicates the corresponding level of activity. Different scales are used for different indicators.

The purpose of these graphs is to show regional trends over the last two months for each of the indicators presented in this bulletin. You can find more data on our [Sentiweb website](https://www.sentiweb.fr).

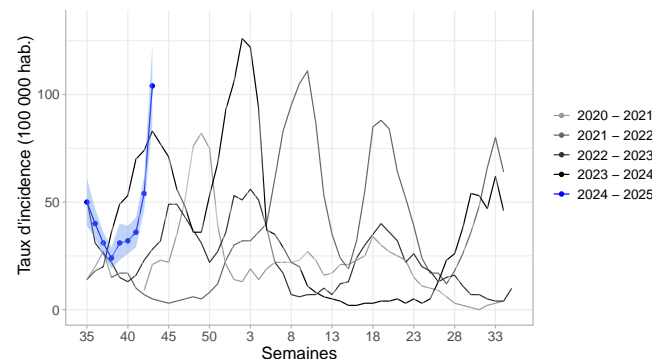
## ARI incidence rates by age groups



Last week (2024w38), subject to future data consolidation, the incidence rates were **increasing in all age groups** compared to the previous week.

Data source : Sentinelles

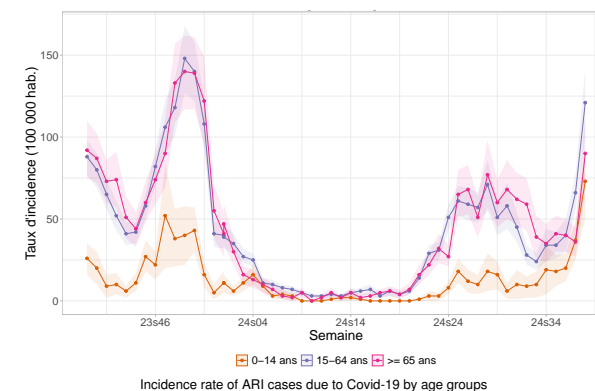
## Estimated incidence of ARI cases due to Covid-19 seen in general practice



Last week (2024w38), the incidence rate of Covid-19 cases seen in general consultations for an ARI has been estimated at **104 cases per 100,000 population** (95% CI [86; 123]) corresponding to 69,576 [57,426; 81,726] new cases.

Data source : Sentinelles

## Estimated incidence of ARI cases due to Covid-19 by age groups



Last week (2024w38), subject to future data consolidation, the incidence rates of **Covid-19** cases seen in general practice for ARI were **strongly increasing in all age groups** compared to those of the previous week.

Data source : Sentinelles

## Description of IRA cases seen in general practice

Last week (2024w38), 735 cases of ARI were reported by Sentinelles general practitioners. Of these, 550 (83% of reported cases) were described and had the following characteristics:

- **Median age:** 35 years (range from 2 months to 93 years);
- **Male/female sex-ratio:** 0.71 (222/312);
- **Risk factors:** 16% (81/436) had risk factors for complications;
- **Hospitalization:** 0.3% (95% CI [0; 0.8]) of patients were hospitalized after the consultation (2/156).

Data source : Sentinelles

## Description of Covid-19 cases presenting ARI seen in general practice

Since week 2024w37, the **348 Covid-19 described cases** with an ARI had the following characteristics:

- **Median age:** 42 years (range from 5 months to 93 years);
- **Male/female sex-ratio:** 0.63 (133/212);
- **Risk factors:** 21% (71/337) had risk factors for complications;
- **Hospitalization:** 1% (2/337) of patients were hospitalized after the consultation.

Data source : Sentinelles

## In conclusion

Last week (2024w38), subject to future data consolidation:

- the incidence of **ARI** cases seen in general practice was **increasing** in all age groups compared to the previous week. However, it remains at a **low** level of activity.
- the incidence of **Covid-19** cases seen in general practice for an ARI was **strongly increasing** in all age groups compared to the previous week.

## Surveillance organisation

Under the aegis of Santé publique France, surveillance in general practice in mainland France is moving towards the integration and joint analysis of data from different networks.

The epidemiological surveillance data published in this bulletin come from several complementary networks of general physicians:

- The Sentinelles network, coordinated by the Institut Pierre Louis of Epidemiology and Public Health (iPLESP) under the supervision of Sorbonne University and Inserm;
- and the EMR (Electronic Medical Records) database, managed by IQVIA.

During the enhanced respiratory infection surveillance season (September to April), data are also collected from physicians in the network coordinated by the general medicine departments of the University of Rouen and the Côte d'Azur University.

All these collected data are analysed jointly. They provide more reliable on a finer geographical scale, while limiting consolidation from one week to the next.

Current monitoring concerns [nine health indicators](#), with three of them being published each week in this bulletin;

You can find more information about the organization of this surveillance, the number of participating physicians, the methods used, scientific publications and partnerships on the Sentinelles network website: [www.sentiweb.fr](http://www.sentiweb.fr).

## Information and contacts

The Sentinelles team is composed of epidemiologists, statisticians, physicians, IT specialists and technicians.

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Olivier Steichen, Thierry Blanchon

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Clément Turbelin


**Epidemiological Surveillance and Studies**  
Marion Debin

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## Sources, supervisory bodies and partners

### Data sources



### Supervisory bodies



### Partners



## French General Practitioner or Paediatrician ?



Get involved in research and health monitoring in primary care by joining the Sentinelles network ([become a Sentinelles doctor](#)) !

## THERE IS ALSO GENERAL POPULATION MONITORING



Join the participatory cohort for monitoring Covid-19 and influenza by registering at <https://www.grippenet.fr>

You don't need to be a healthcare professional to take part!