Primary care epidemiological surveillance bulletin

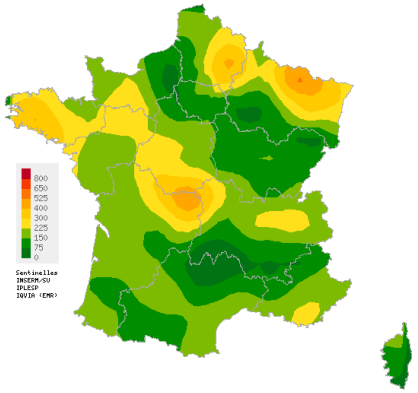
Observed situation in general practice for the week 41 of the year 2024, from 10/07/2024 to 10/13/2024

Sentinelles

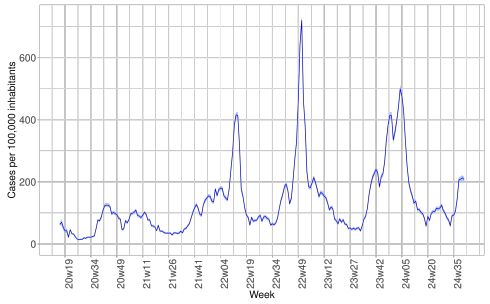
Acute Respiratory Infection (ARI)

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 (2024w41), the incidence rate of acute respiratory infection (ARI) cases consulting in general practice was estimated at **208 cases per 100,000 population (95% CI [200; 216])**.

Subject to future data consolidation, this rate is **stable** compared to the previous week (consolidated data for 2024w40: 213 [204; 221]).

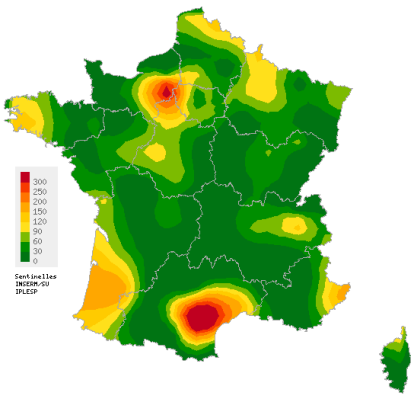
You will find complete regional data on page 4 of this bulletin, and more detailed information on ARI on page 2 and 3.

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.

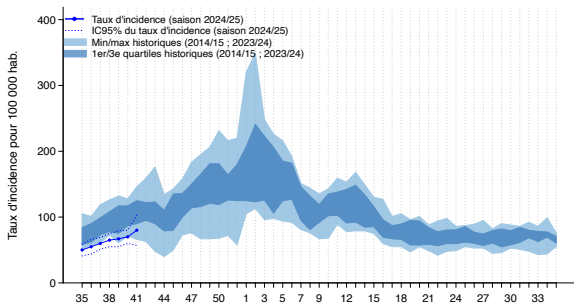
Data sources: Sentinelles and Electronic Medical Records (EMR) IQVIA

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 (2024w41), the incidence rate of acute diarrhea cases seen in general practice was estimated at **80 cases per 100,000 population (95% CI [57; 103])**.

Subject to future data consolidation, this rate is **slightly increasing** compared to the previous week (consolidated data for 2024w40: 70 [60; 80]) and corresponds to a **low activity level** compared to those usually observed at this time of the year.

Complete regional data are available on the page 4 of this bulletin.

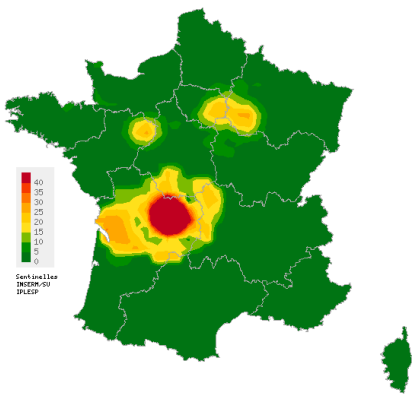
The purpose of acute diarrhea surveillance is to monitor gastroenteritis outbreaks.

(*) 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.

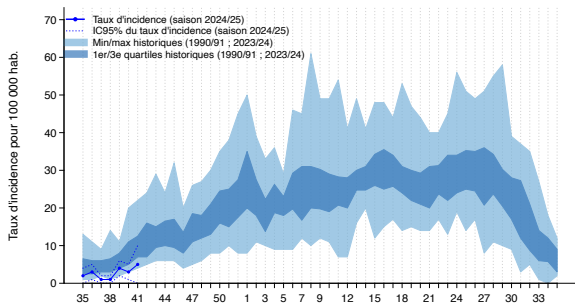
Data source: Sentinelles

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 (2024w41), the incidence rate of Chickenpox cases seen in general practice was estimated at **5 cases per 100,000 population (95% CI [0; 10])**.

Subject to future data consolidation, this rate is **stable** compared to the previous week (consolidated data for 2024w40: 3 [1; 5]) and corresponds to a **low activity level** compared to those usually observed at this time of the year.

Complete regional data are available on the page 4 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

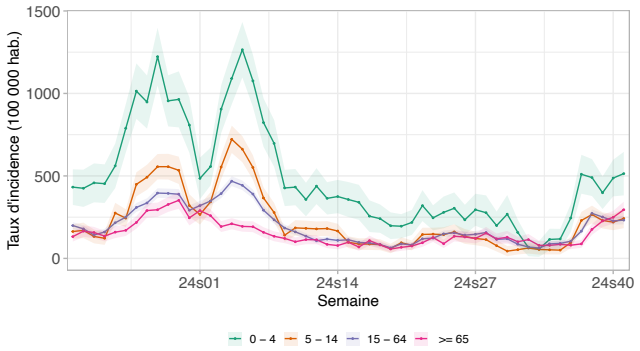
Find more information about case definitions, statistical methods and the Sentinelles network on our website

Acute respiratory infection (ARI) - Additional data

Observed situation in general practice for the week 41 of the year 2024, from 10/07/2024 to 10/13/2024

Sentinelles

ARI incidence rates by age groups



Weekly national incidence rates of ARI by age groups

Last week (2024w41), subject to future data consolidation, incidence rates were estimated :

- **0-4 age group**: 514 cases per 100 000 population (CI 95% [382; 646]) (consolidated data 2024w40 : 487 [376; 598]);

- **5-14 age group**: 242 cases per 100 000 population (CI 95% [183; 301]) (consolidated data 2024w40 : 220 [171; 269]);

- **15-64 age group** : 232 cases per 100 000 population (CI 95% [206; 258]) (consolidated data 2024w40 : 227 [205; 249]);

- **65 and above age group** : 295 cases per 100 000 population (CI 95% [246; 344]) (consolidated data 2024w40 : 249 [210; 288]).

Incidence rates were **stable in all age groups** compared to the previous week.

Data source : Sentinelles

Description of IRA cases seen in general practice

Last week (2024w41), 668 cases of ARI were reported by Sentinelles general practitioners. Of these, 511 (76% of reported cases) were described and had the following characteristics:

- **Median age**: 43 years (range from 3 months to 102 years);
- **Male/female sex-ratio:** 0.67 (196/293);
- **Risk factors**: 23% (107/471) had risk factors for complications;
- **Hospitalization**: 0.6% (95% CI [0; 1]) of patients were hospitalized after the consultation (3/468).

Data source : Sentinelles

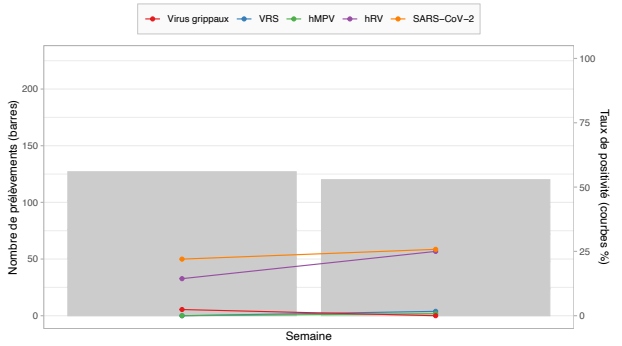
Description of Covid-19 cases presenting ARI seen in general practice

Since week 2024w40, the **297 Covid-19 described cases** with an acute respiratory infection had the following characteristics:

- **Median age**: 59 years (range from 5 months to 102 years);
- **Male/female sex-ratio:** 0.63 (112/177);
- **Risk factors**: 29% (81/282) had risk factors for complications;
- **Hospitalization**: 1% (2/286) of patients were hospitalized after the consultation.

Data source : Sentinelles

Circulation of respiratory viruses in general practice and pediatric



Number of weekly samples taken and positive rate for the five families of respiratory viruses tested

Virological surveillance of ARI began on Monday, September 30 (2024w40).

Last week (2024w41), **120 patients** presenting an ARI and seen in general practice or pediatric consultations were tested. The rates of positivity of samples for the various viruses tested were as follows:

- **SARS-CoV-2 (Covid-19): 26%** (31/120) (consolidated data for 2024w40: 22% (28/127));
- **Rhinovirus: 25%** (30/120) (consolidated data for 2024w40: 14% (18/125));
- **Respiratory syncytial virus (RSV): 2%** (1/120) (consolidated data for 2024w40: 0% (0/127));
- **Metapneumovirus: 1%** (1/120) (consolidated data for 2024w40: 0% (0/127));
- **Influenza viruses: 0%** (0/120) (consolidated data for 2024w40: 2% (3/127)).

Data sources : Sentinelles, Rouen and Côtes d'Azur DUMG, SOS Médecins

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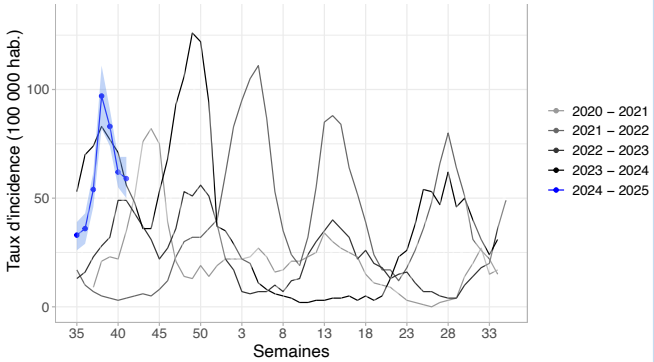
Covid-19, RSV and influenza

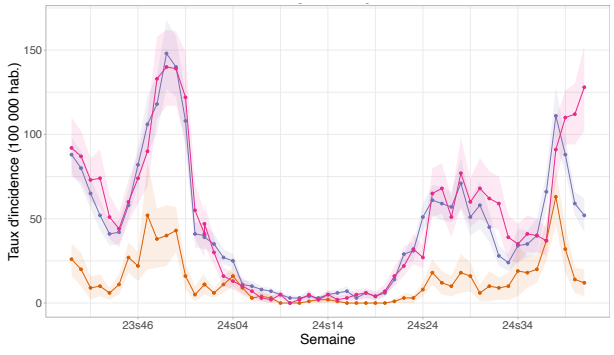
Observed situation in general practice for the week 41 of the year 2024, from 10/07/2024 to 10/13/2024

Sentinelles

Covid-19



ARI incidence rate due to Covid-19 and comparison with historical data



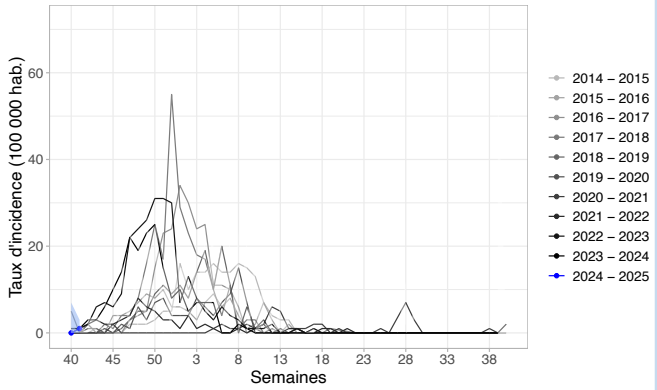
Incidence rate of ARI cases due to Covid-19 by age groups

Last week (2024w41), the incidence rate of **Covid-19** cases seen in general practice for acute respiratory infection was estimated at **59 cases per 100,000 population** (95% CI [50; 69]), corresponding to 39,677 [33,376; 45,978] new cases.

Subject to future data consolidation, the incidence rates were **stable** in all age groups except in the **65 and above age group** where a **slight increase** compared to previous week was observed.

Data source : Sentinelles

RSV



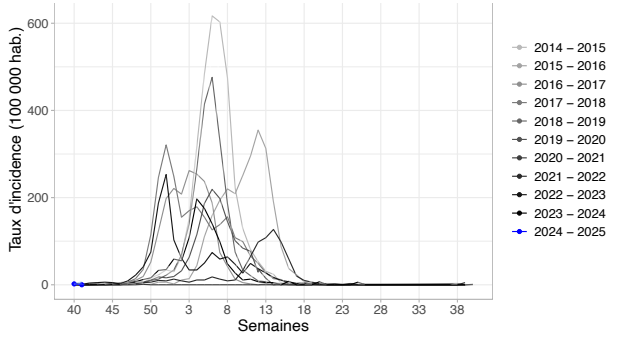
Incidence rate of RSV cases in general practice since 2024w40 (blue) compared to historical data (grey) (*)

Last week (2024w41), the incidence rate of **RSV** cases seen in general practice for acute respiratory infection was estimated at **3 cases per 100,000 population** (95% CI [1; 6]), corresponding to 2,171 [379; 3,963] new cases.

Subject to future data consolidation, this rate is **stable** compared to the previous week (consolidated data for 2024w40: 0 [0; 7]).

Data source : Sentinelles, Rouen and Côte d'Azur DUMG, SOS Médecins

Influenza



Incidence rate of influenza cases in general practice since 2024w40 (blue) compared to historical data (grey) (*)

Last week (2024w41), the incidence rate of **influenza** cases seen in general practice for acute respiratory infection was estimated at **0 cases per 100,000 population** (95% CI [0; 8]). Subject to future data consolidation, this rate is **stable** compared to the previous week (consolidated data for 2024w40: 4 [1; ;8]).

Data Source : Sentinelles, Rouen and Côte d'Azur DUMG, SOS Médecins

In conclusion

Last week (2024w41), subject to future data consolidation:

- the incidence of **ARI** cases seen in general practice was **stable** in all age groups and at a **moderate level of activity**.
- The incidence of **Covid-19** cases seen in general practice for ARI was **stable** compared to the previous week. There has been a **global downward trend over the past three weeks, except among the 65 and above where the incidence remains at a high level**.
- **No active circulation of RSV** (the respiratory virus responsible for the majority of bronchiolitis cases in infants) was observed in primary care. This level of activity is **similar to past seasons at the same period**.
- **No active circulation of influenza viruses** was observed in primary care. This level of activity is **similar to previous seasons at the same period**.

You can find the Santé publique France epidemiological bulletin with all surveillance data (ambulatory and hospital) on ARI by clicking here.

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Incidence rates by french region

Observed situation in general practice for the week 41 of the year 2024, from 10/07/2024 to 10/13/2024

Sentinelles

Regions	Acute respiratory infection (*)	Acute diarrhea	Chickenpox
Auvergne-Rhône-Alpes	204 [179 ; 228]	38 [14 ; 62]	0 [0 ; 0]
Bourgogne-Franche-Comté	116 [84 ; 147]	28 [0 ; 56]	0 [0 ; 0]
Bretagne	299 [246 ; 351]	56 [20 ; 92]	2 [0 ; 6]
Centre-Val de Loire	206 [171 ; 240]	79 [23 ; 135]	0 [0 ; 0]
Corse	180 [80 ; 280]	72 [4 ; 140]	0 [0 ; 0]
Grand Est	321 [285 ; 357]	48 [16 ; 80]	2 [0 ; 9]
Hauts-de-France	232 [205 ; 260]	100 [59 ; 141]	1 [0 ; 6]

Regions	Acute respiratory infection (*)	Acute diarrhea	Chickenpox
Ile-de-France	158 [146 ; 169]	52 [29 ; 75]	5 [0 ; 10]
Normandie	120 [90 ; 151]	88 [0 ; 191]	0 [0 ; 0]
Nouvelle-Aquitaine	207 [174 ; 241]	61 [28 ; 94]	19 [0 ; 49]
Occitanie	175 [143 ; 207]	103 [60 ; 146]	0 [0 ; 0]
Pays de la Loire	174 [131 ; 218]	38 [0 ; 80]	6 [0 ; 21]
Provence-Alpes-Côte d'Azur	197 [168 ; 226]	35 [10 ; 60]	2 [0 ; 7]

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

Activity levels

- Low activity
- Moderate activity
- High activity

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 .

General organization and partners

Sentinelles

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 .

Information and contacts

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

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Partners and supervisory bodies

Partners & data sources

Sentinelles IQVIA

Université de Rouen Normandie — Université Côte d'Azur

SOS Médecins

Santé publique France — Ministère des Solidarités et de la Santé

Università di Corsica Pasquale Paoli — HCL Hospices Civils de Lyon — Institut Pasteur

CNR virus des gastro-entérites, Dijon, France — CNGE Collège Académique

Supervisory bodies of Sentinelles network

iPLesp — Inserm La science pour la santé From science to health — Santé Sorbonne Université

French General Practionner 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

grippe covid net

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!