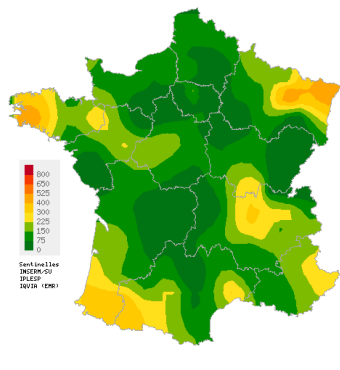
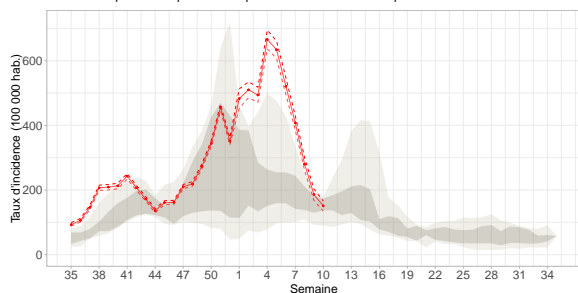


Acute Respiratory Infection (ARI)

Covid-19, Influenza and other respiratory viruses
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 (2025w10), the incidence rate of acute respiratory infection (ARI) cases consulting in general practice was estimated at **151 cases per 100,000 population (95% CI [135; 166])**.

Subject to future data consolidation, this rate is **still decreasing** compared to previous weeks (consolidated data for 2025w09: 186 [168; 203]).

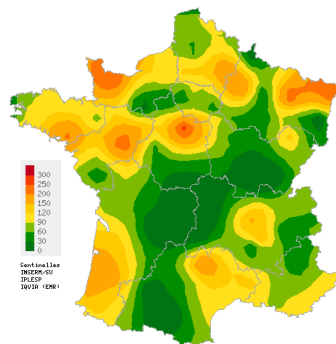
ARI are caused by a variety of respiratory viruses including SARS-CoV-2 (Covid-19), influenza viruses, and other respiratory viruses such as RSV, rhinovirus and metapneumovirus. The purpose of ARI surveillance is to monitor outbreaks of these viruses.

You can find the french "Santé Publique France epidemiological bulletin" with all surveillance data (ambulatory and hospital) on ARI [by clicking here](#).

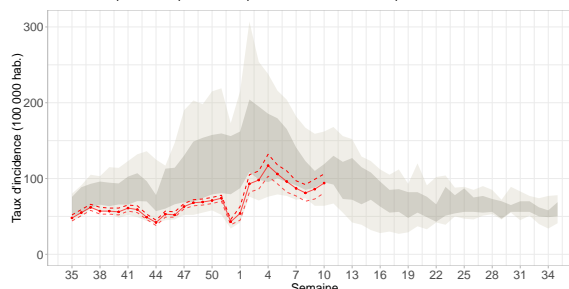
Data sources: Sentinelles, Electronic Medical Records (EMR) IQVIA

Acute diarrhea

Moderate 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 (2025w10), the incidence rate of acute diarrhea cases seen in general practice was estimated at **94 cases per 100,000 population (95% CI [81; 106])**.

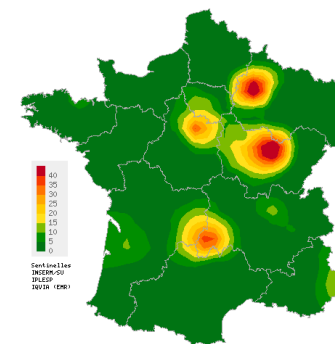
Subject to future data consolidation, this rate is **slightly increasing** over the past two weeks and remains at a similar activity level to those usually observed at this time of the year (consolidated data for 2025w09: 86 [73; 99]).

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

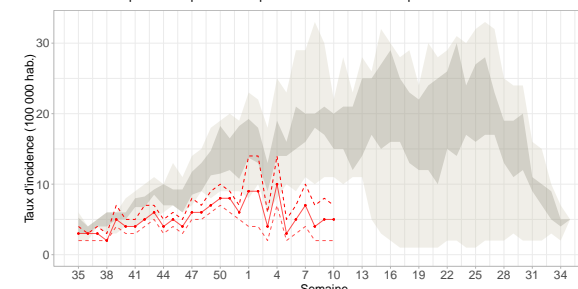
Data sources: Sentinelles, Electronic Medical Records (EMR) IQVIA

Chickenpox

Low activity in general practice



Spatial interpolation map of incidence rates at department level



Incidence rates and comparison with historical data

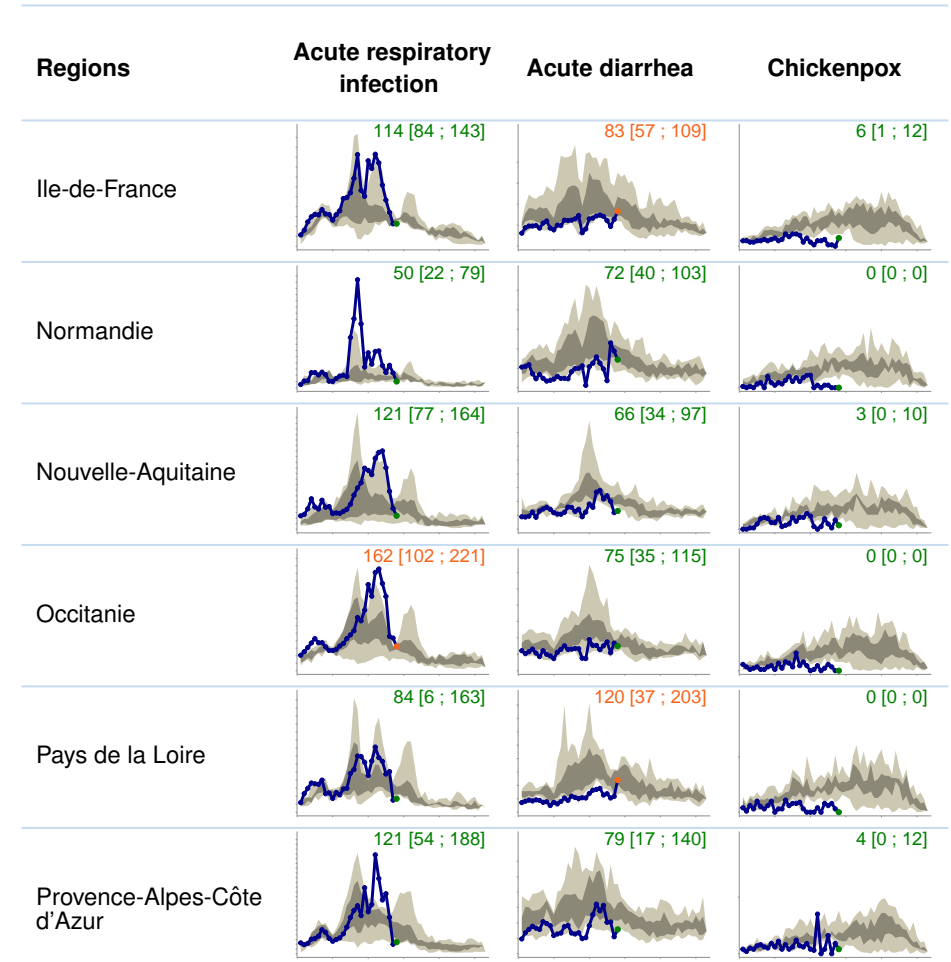
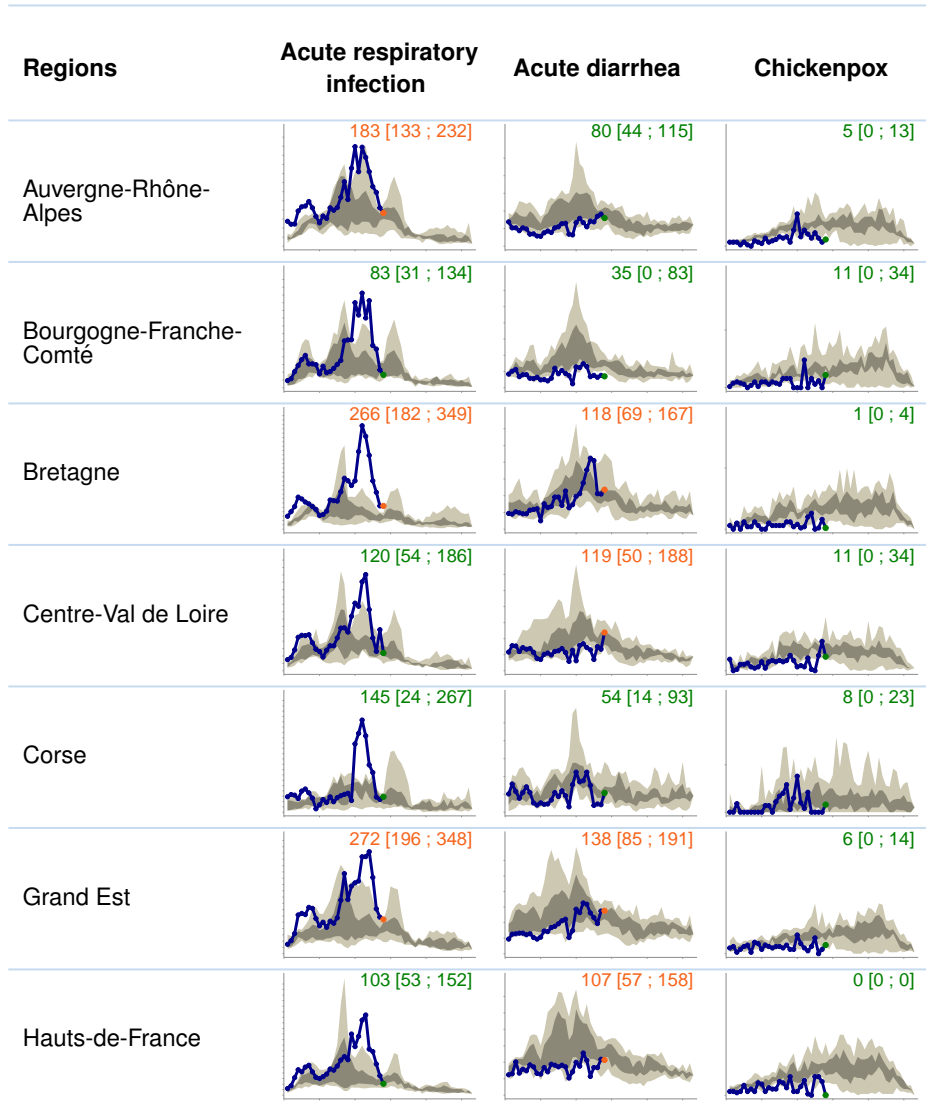
In mainland France, last week (2025w10), the incidence rate of Chickenpox cases seen in general practice was estimated at **5 cases per 100,000 population (95% CI [2; 7])**.

Subject to future data consolidation, this rate is **stable** compared to the previous week and corresponds to a **lower activity level** than those usually observed at this time of the year (consolidated data for 2025w09: 5 [2; 8]).

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

Incidence rates by french region

Epidemiological surveillance bulletin for the week 10 of the year 2025, from 03/03/2025 to 03/09/2025

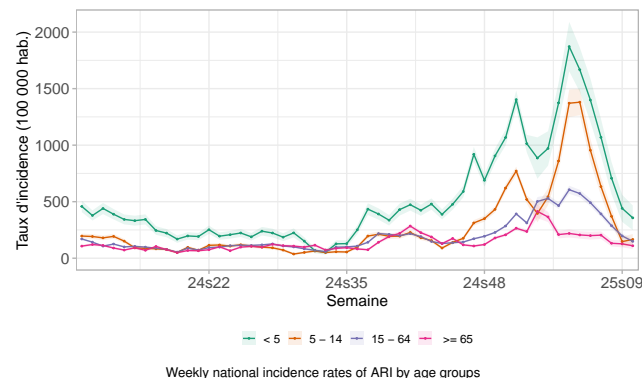


Data sources : Sentinelles Network and EMR (Electronic Medical Records) IQVIA

Activity levels
■ Low activity
■ Moderate activity
■ High activity

For the three indicators, the blue curve corresponds to the change in the incidence rate per 100,000 population for the current year. For ARI, previous years (since 2020) are shown with the grey curves. For acute diarrhea and chickenpox, the distribution of weekly incidence rates for the 10 previous years is shown in blue, with quartiles in dark and minimum/maximum values in light. This representation enables current trends to be compared with historical data. The value of the last point and its confidence interval are shown at the top of each graph. Different scales are used for different indicators.

ARI incidence rates by age groups



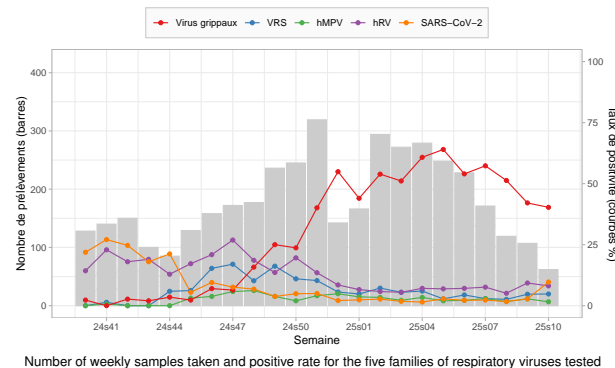
Last week (2025w10), subject to future data consolidation, incidence rates were estimated at:

- **0-4 age group:** 357 cases per 100 000 population (95% CI [249; 466]) (consolidated data for 2025w09: 441 [321; 561]);
- **5-14 age group:** 166 cases per 100 000 population (95% CI [118; 214]) (consolidated data for 2025w09: 147 [102; 191]);
- **15-64 age group :** 149 cases per 100 000 population (95% CI [129; 169]) (consolidated data for 2025w09: 197 [175; 220]);
- **65 and above age group :** 110 cases per 100 000 population (95% CI [81; 139]) (consolidated data for 2025w09: 127 [96; 158]).

Incidence rates are **slightly decreasing** in children below the age of 5 and adults (15-64 years and 65 years and above), and **stable** in children from 5 to 14 years old compared to those of the previous weeks.

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

Circulation of respiratory viruses in general practice and pediatric



Since 2024w40, **4,127** samples have been tested as part of virological surveillance of ARI 2024/2025.

Last week (2025w10), **62 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:

- **Influenza viruses:** 40% (25/62) (consolidated data for 2025w09: 42% (45/107));
- **SARS-CoV-2 (Covid-19):** 10% (6/62) (consolidated data for 2025w09: 3% (3/107));
- **Rhinovirus:** 8% (5/62) (consolidated data for 2025w09: 9% (10/107));
- **Respiratory syncytial virus (RSV):** 5% (3/62) (consolidated data for 2025w09: 5% (5/107));
- **Metapneumovirus:** 2% (1/62) (consolidated data for 2025w09: 3% (3/107)).

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

Description of IRA cases seen in general practice

Last week (2025w10), 429 cases of ARI were reported by Sentinelles general practitioners. Among these, 307 (72% of reported cases) were described and had the following characteristics:

- **Median age:** 39 years (range from 3 months to 96 years);
- **Male/female sex-ratio:** 0.81 (124/154);
- **Risk factors:** 17% (45/266) of the patients had risk factors for complications;
- **Hospitalization:** 0.8% (95% CI [0; 1.9]) of the patients were hospitalized after the consultation (2/264).

Data source: Sentinelles

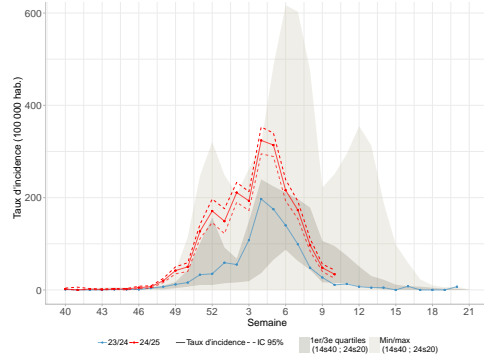
In conclusion

Last week (2025w10), subject to future data consolidation, the incidence of ARI cases seen in general practice was **still decreasing for the sixth consecutive week** (i.e. since the end of January - 2025w04). Overall, ARI activity is now at a **low level**, and this is the case in all age groups.

The cases of ARI observed last week in general practice were still mainly due to the **circulation of influenza viruses**.

Incidence rates of influenza cases

Activity still decreasing and at a low level



Incidence rates of influenza cases observed in general practice since 2024w40 compared to previous seasons (*)

Last week (2025w10), the incidence rate of **influenza** cases seen in general practice among patients consulting for an ARI was estimated at **59 cases per 100,000 population** (95% CI [44; 75]), corresponding to 39,713 [29,222; 50,204] new cases.

Subject to future data consolidation, this rate was **slightly decreasing** compared to the previous week (consolidated data for 2025w09: 76 [64; 88]).

Description of confirmed influenza cases seen in primary care

Since the beginning of virological surveillance (2024w40), the 1,435 confirmed influenza cases swabbed by general practitioners and pediatricians presented the following characteristics:

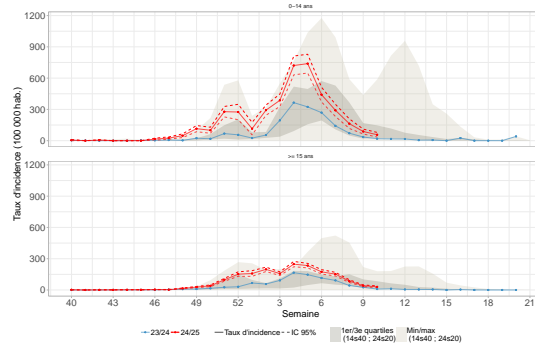
- **Median age:** 32 years (range from less than 1 month to 95 years old);
- **Male/female sex-ratio:** 0.87 (665/763);
- **Vaccination:** 89% (1,182/1,327) were not vaccinated against influenza;
- **Risk factors:** 20% (260/1,336) of the patients had risk factors for complications;
- **Hospitalization:** 0.4% (4/1,119) of the patients were hospitalized at the end of the consultation.

(*) The indicator currently monitored by Sentinel physicians estimates the number of patients with influenza among those consulting for ARI and was implemented during the Covid-19 pandemic in March 2020. To allow better interpretation and visualization of trends in the current epidemic compared to past seasons, the graph presents influenza cases among patients consulting for influenza-like illness. This indicator has been available since 2014. The figures mentioned in the text and those represented graphically are therefore different. This must be taken into account when interpreting the data.

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

Incidence rates of influenza cases

by age groups

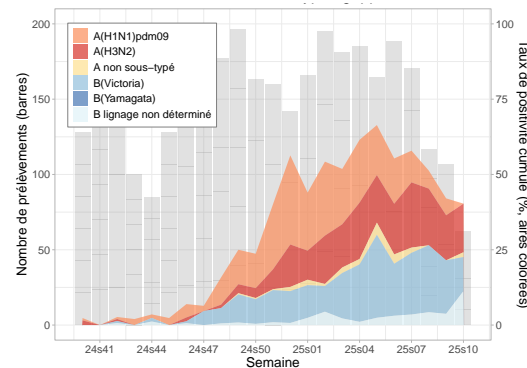


Incidence rates of influenza cases seen in general practice by age groups since 2024w40 and comparison with historical data (*)

Last week (2025w10), subject to future data consolidation, the incidence rates of influenza cases seen in general practice among patients consulting for an ARI were **slightly decreasing in both age groups** (0-14 and 15 and above age groups) compared to those of the previous week.

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

Identification of influenza viruses

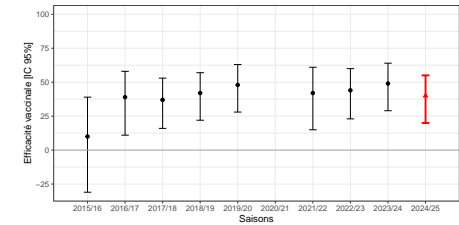


Cumulative influenza positivity rate according to circulating influenza virus subtypes from ARI cases collected by physicians

Since the week 2024s40, the 1,452 influenza viruses identified were distributed as follows: **36% of type A(H1N1)pdm09** (518/1,452), **30% of type B Victoria** (442/1,452), **26% of type A(H3N2)** (379/1,452), **5% of undetermined B lineage** (72/1,452) and **3% of non-subtyped A viruses** (41/1,452).

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

Vaccine effectiveness against seasonal flu



In red: 2024-2025 season / In black: 2015-2016 to 2023-2024 seasons*

The overall influenza vaccine effectiveness is estimated at **40% (95% CI [20%; 55%])**, a moderate level comparable to previous seasons. Among groups for whom influenza vaccination is recommended, efficacy varies according to category, and remains close to those estimated in the previous seasons:

- People under 65 with risk factors for complication: 56% [23%; 75%];
- People aged 65 or over: 36% [-2%; 59%].

These estimates are computed thanks to the [Test-Negative Design \(TDN\)](#) statistical method and will be refined in the upcoming weeks.

*Absence of active circulation of influenza viruses during the 2020/2021 season

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

In conclusion

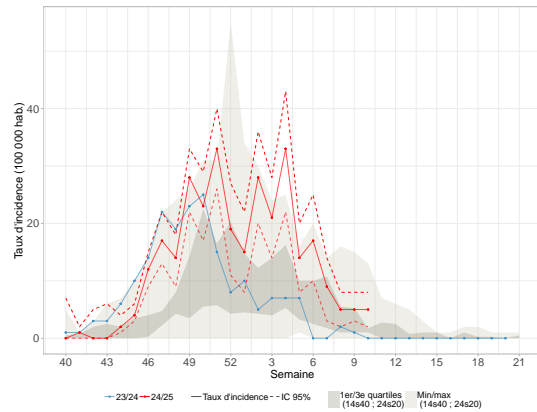
Last week (2025w10), subject to future data consolidation, the incidence of **influenza** cases seen in general practice among patients consulting for an ARI continued **the decrease observed the previous weeks since the end of January (2025w04)**, but less markedly. This decrease was observed in both children and adults. Influenza activity is at a **low level**.

This season, we are observing co-circulation of viruses of type A(H1N1)pdm09, A(H3N2) and B Victoria, with however a majority circulation of viruses **B Victoria** and **A(H3N2)** since mid-February (2025w07).

Find the [epidemiological bulletin of Santé publique France](#) with all the surveillance data (ambulatory and hospital) on influenza.

Incidence rates of RSV infection cases

Stable activity and at a low level



Incidence rates of RSV infection cases seen in general practice since 2024w40 and comparison to historical data (*)

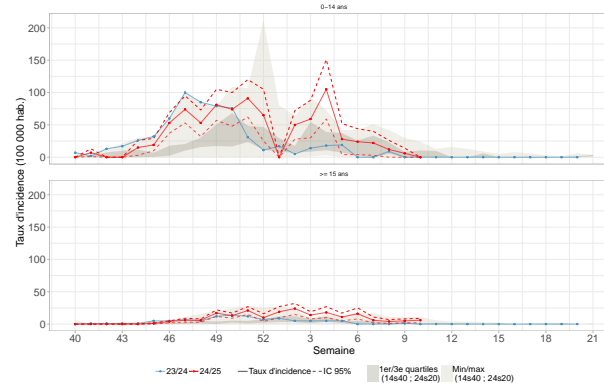
Last week (2025w10), the incidence rate of **RSV infection** cases (the virus responsible for most cases of bronchiolitis in infants) seen in general practice among patients consulting for an ARI was estimated at **8 cases per 100,000 population** (95% CI [3; 13]), corresponding to 5,386 [1,902; 8,870] new cases.

Subject to future data consolidation, this rate is **stable** compared to those of the previous weeks (consolidated data for 2025w09: 8 [4; 13]).

(*) The indicator currently monitored by Sentinel physicians estimates the number of patients with RSV infection among those consulting for ARI and was implemented during the Covid-19 pandemic in March 2020. To allow better interpretation and visualization of trends in the current epidemic compared to past seasons, the graph presents cases of RSV infection among patients consulting for influenza-like illness. This indicator has been available since 2014. The figures mentioned in the text and those represented graphically are therefore different. This must be taken into account when interpreting the data.

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

Incidence rates of RSV infection cases by age groups



Incidence rates of RSV infection cases in general practice since 2024w40 compared to historical data (*)

Last week (2025w10), incidence rates of **RSV infection** cases seen in general practice among patients consulting for an ARI were estimated at:

- **0-14 years:** 0 cases per 100,000 population ;
- **15 years and above:** 10 cases per 100,000 population (95% CI [3; 16]), corresponding to 5,386 [1,902; 8,870] new cases.

Subject to future data consolidation, these rates are **decreasing in the 0-14 age group and stable in the 15 and over age group** compared to those of the previous weeks.

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

Description of RSV infections seen in general practice and pediatric

Since the beginning of virological surveillance (2024w40), the 285 confirmed RSV infection cases swabbed by general practitioners and pediatricians presented the following characteristics:

- **Median age:** 15 years (range from 1 month to 98 years old);
- **Male/female sex-ratio:** 0.81 (127/157);
- **Risk factors:** 32% (87/271) of the patients had risk factors for complications;
- **Hospitalization:** 0.4% (1/234) of the patients were hospitalized at the end of the consultation.

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

In conclusion

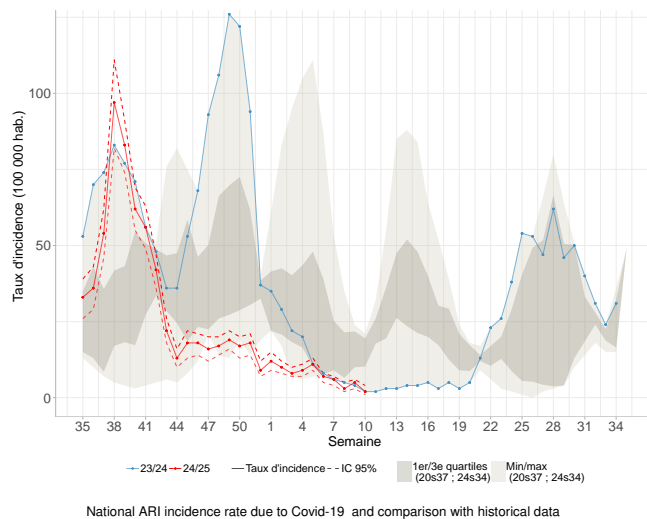
Last week (2025w10), subject to future data consolidation, the incidence of **RSV** infection cases seen in general practice among patients consulting for an ARI was **decreasing in children and stable in adults** compared to the previous weeks, and was at a **low level of activity**.

Bronchiolitis is mainly caused by respiratory syncytial virus (RSV), although other respiratory viruses may also be responsible, such as rhinovirus or SARS-CoV-2 (Covid-19).

Find the [epidemiological bulletin of Santé publique France](#) with all the surveillance data (ambulatory and hospital) on bronchiolitis.

Incidence rates of Covid-19 cases

Stable activity and at a low level



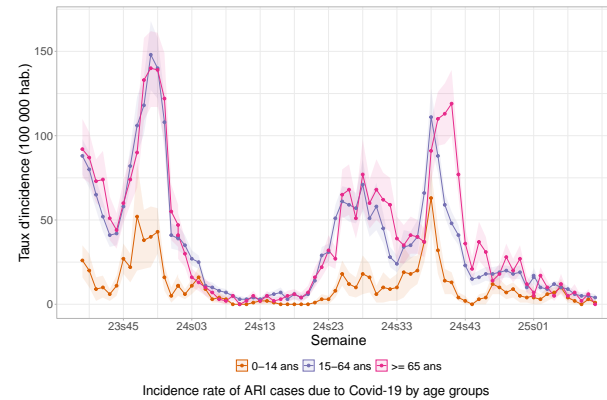
Last week (2025w10), the incidence rate of **Covid-19** cases seen in general practice among patients consulting for an ARI was estimated at **2 cases per 100,000 population** (95% CI [1; 4]), corresponding to 1,652 [721; 2,583] new cases.

Subject to future data consolidation, this rate is **stable** compared to those of the previous weeks (consolidated data for 2025w09: 5 [3; 6]).

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

Incidence rates of Covid-19 cases

by age groups



Last week (2025w10), the incidence rates of **Covid-19** cases seen in general practice among patients consulting for an ARI were estimated at:

- **0-14 years:** 1 cases per 100,000 population (95% CI [0; 3]), corresponding to 144 [0; 289] new cases;
- **15-64 years:** 4 cases per 100,000 population (95% CI [1; 6]), corresponding to 1,509 [588; 2,429] new cases;
- **65 years and above:** 0 cases per 100,000 population.

Subject to future data consolidation, these rates are **stable in all age groups** compared to those of the previous weeks.

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

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

Since week 2025w09, the 16 Covid-19 described cases with an ARI had the following characteristics:

- **Median age:** 44 years (range from 3 months to 83 years);
- **Male/female sex-ratio:** 0.46 (5/11);
- **Risk factors:** 24% (4/16) of the patients had risk factors for complications;
- **Hospitalization:** no patient was hospitalized after the consultation (0/16).

Data source: Sentinelles

In conclusion

Last week (2025w10), subject to future data consolidation, the incidence of **Covid-19** cases seen in general practice among patients consulting for an ARI was **stable** compared to the previous weeks and was at a **low level of activity** (see graph opposite).

Find the [epidemiological bulletin of Santé publique France](#) with all the surveillance data (ambulatory and hospital) on the Covid-19 pandemic.

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, statisticians, physicians, IT specialists and technicians.

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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 net
covid

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!