

## Influenza-like illness

Results from the electronic surveillance of communicable diseases from 01/12/2015 to 01/18/2015.

### INFLUENZA-LIKE ILLNESS

#### High activity, first week above the epidemic threshold

Sentinel physicians monitor the number of ILI seen in consultations (defined by sudden fever > 39°C (>102°F) with myalgia and respiratory signs).

**Clinical monitoring:** in metropolitan France, last week, the incidence rate of influenza-like illness seen in general practice was estimated at 231 cases per 100,000 inhabitants (95% CI [204 ; 258]), 149,000 new cases, **above** the epidemic threshold (179 cases per 100,000) [1]. It will take a second consecutive week exceeding the threshold to confirm the arrival of the flu epidemic.

**At the regional level,** the highest incidence rates were noted in: Limousin (582 cases per 100,000 inhabitants, 95% CI [321 ; 843]), Auvergne (360, 95% CI [212 ; 508]) and Corse (331, 95% CI [178 ; 484]) (the regional data are presented at the end of this newsletter).

**Regarding the cases reported** last week, the median age was 28 years (7 months to 93 years). Males accounted for 45 of the cases. The percentage of hospitalization was estimated at 0.7% (95% CI [0.0 ; 1.5]).

#### Virological surveillance

Since week 2014s40 of resumption of monitoring, 694 samples were collected by Sentinelles network general practitioners. Among them, 196 influenza viruses have been identified:

- 42 (21%) A(H1N1)pdm09 type virus,
- 92 (47%) A(H3N2) type virus,
- 34 (17%) A non-subtyped virus,
- 0 (0%) B Victoria type virus lineage,
- 23 (12%) B Yamagata type virus lineage,
- 5 (3%) B non-subtyped virus,

The samples were analyzed by the CNR (National Reference Centers) of *influenzae* viruses, and the laboratory of Virology at the University of Corsica.

**Forecast:** according to the forecast models based on historical data [2], and on medication sales (IMS-Health research partnership) [3], the intensity of the epidemic of influenza will continue to rise this week and confirm the epidemic. (see the graph hereafter).

[More information about this surveillance](#)

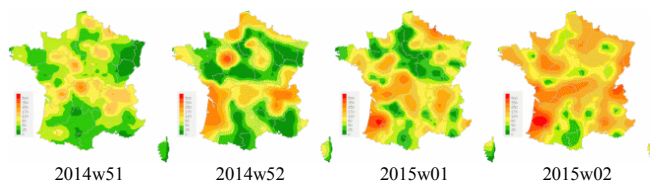
The Sentinelles network team

[1] Costagliola D, et al. A routine tool for detection and assessment of epidemics of influenza-like syndromes in France. *Am J Public Health*. 1991;81(1):97-9.

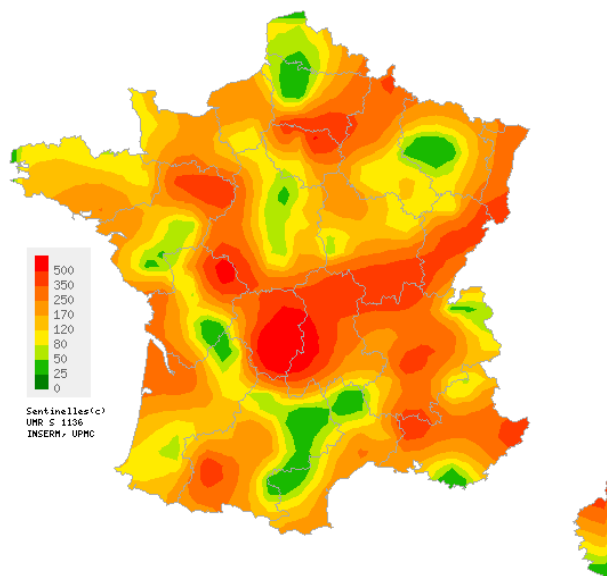
[2] Viboud C, et al. Prediction of the spread of influenza epidemics by the method of analogues. *Am J Epidemiol*. 2003 Nov 15;158(10):996-1006.

[3] Vergu E, et al. Medication sales and syndromic surveillance, France. *Emerg Infect Dis*. 2006. 12(3):416-21.

### Current activity



Consolidated data for the last 4 weeks

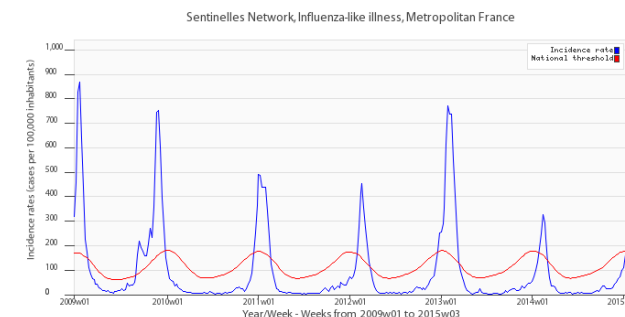


Week 2015w03

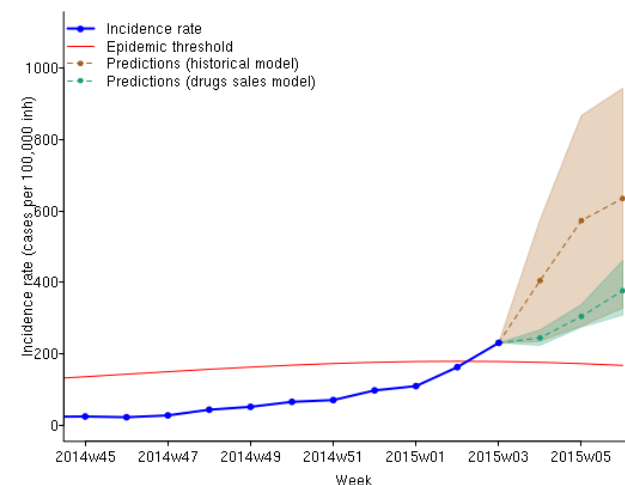
Map of data spatial interpolation.  
The interpolation is based on the departmental incidence.  
(cases per 100,000 inhabitants)

Maps available at <http://www.sentiweb.fr/>

### Predictions



Incidence rate in blue,  
epidemic threshold in red calculated by a periodic regression model [1]  
(in cases per 100,000 inhabitants)



Predicted incidence rate for the next three weeks  
based on a forecast model on historical data [2] (in brown),  
and on drug sales [3] (in green)  
(IMS-Health partnership)

## Acute diarrhea

Results from the electronic surveillance of communicable diseases from 01/12/2015 to 01/18/2015.

### ACUTE DIARRHEA High activity

Sentinel physicians monitor the number of acute diarrhea seen in consultations (defined by recent acute diarrhea (at least 3 daily watery or nearly so stools, dating less than 14 days, motivating consultation).

**Clinical monitoring:** in metropolitan France, last week, the incidence rate of acute diarrhea seen in general practice was estimated at 248 cases per 100,000 inhabitants, 95% CI [220 ; 276], (160,000 new cases), back **below** the epidemic threshold (276 cases per 100,000) [1].

**At the regional level**, the highest incidence rates were noted in: Haute-Normandie (393 cases per 100,000 inhabitants, 95% CI [174 ; 612]), Limousin (372, 95% CI [167 ; 577]) and Rhône-Alpes (351, 95% CI [266 ; 436]) (the regional data are presented at the end of this newsletter).

**Regarding the cases reported**, last week, the median age was 22 years (6 months to 91 years). Males accounted for 51% of the cases. These cases showed no particular sign of severity: the percentage of hospitalization was estimated at 0.3% (95% CI [0.0 ; 0.8]).

**Forecast:** according to the forecast model based on historical data [2], the level of activity of acute diarrhea may have peaked and begin its decline in weeks (see the graph hereafter).

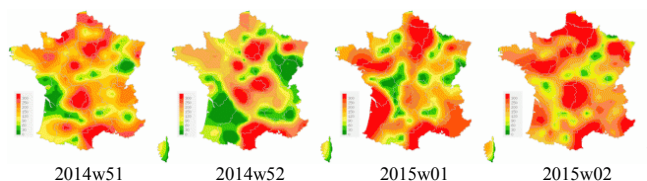
[More information about this surveillance](#)

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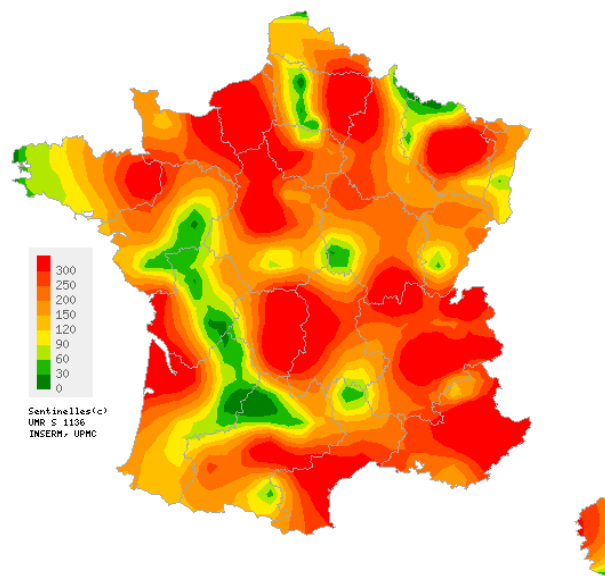
[1] Costagliola D, et al. A routine tool for detection and assessment of epidemics of influenza-like syndromes in France. *Am J Public Health.* 1991;81(1):97-9.

[2] Viboud C, et al. Prediction of the spread of influenza epidemics by the method of analogues. *Am J Epidemiol.* 2003 Nov 15;158(10):996-1006.

### Current activity



Consolidated data for the last 4 weeks

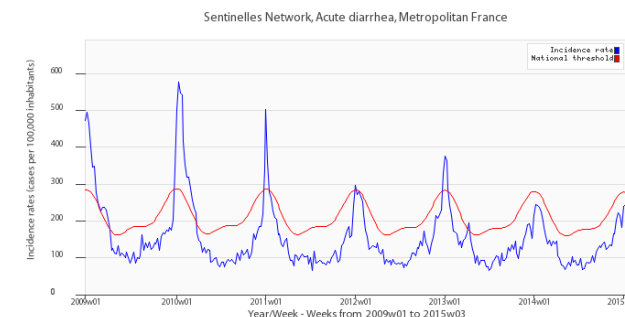


Week 2015w03

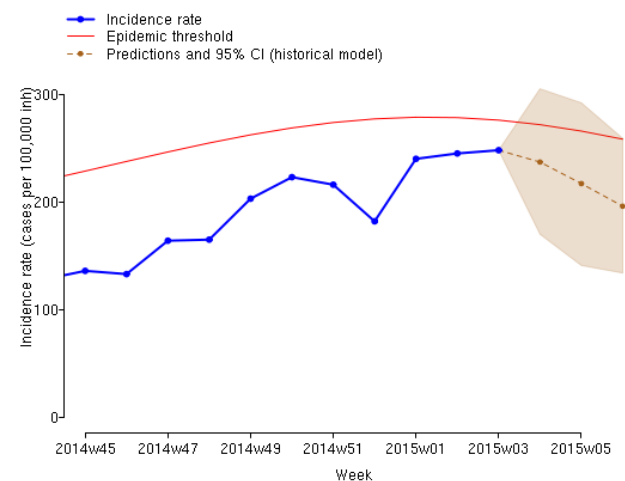
Map of data spatial interpolation.  
The interpolation is based on the departmental incidence.  
(cases per 100,000 inhabitants)

Maps available at <http://www.sentiweb.fr/>

### Predictions



Incidence rate in blue,  
epidemic threshold in red calculated by a periodic regression model [1]  
(in cases per 100,000 inhabitants)



Predicted incidence rate for the next three weeks  
based on a forecast model on historical data [2] (in brown)

## Chickenpox

Results from the electronic surveillance of communicable diseases from 01/12/2015 to 01/18/2015:

### CHICKENPOX Low activity

In metropolitan France, last week, the incidence rate of Chickenpox seen in general practice was estimated at 14 cases per 100,000 inhabitants (95% CI [7 ; 21]).

Seven regional clusters were reported, **high** in Corse (57 cases per 100,000 inhabitants), Auvergne (45) and Picardie (43) and **moderate** in Centre (35), Provence-Alpes-Côte-d'Azur (26), Lorraine (25) and Haute-Normandie (23). \*

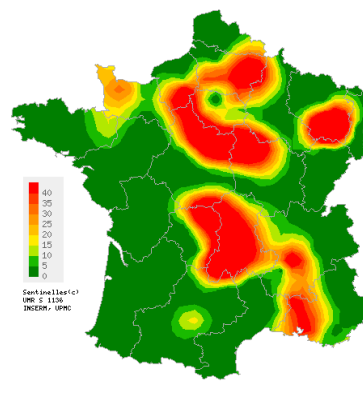
[More information about this surveillance](#)

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\* The regional data are presented at the end of this report.

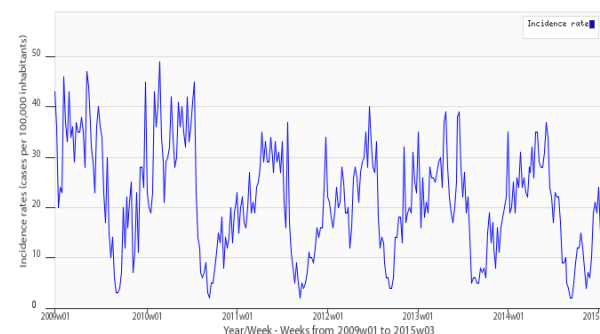
### Observed situations and National incidence trend

Week 20015w03 (in cases per 100,000 inhabitants)



Map of spatial data interpolation based on incidence rates at the « departement » (NUTS 3) level.  
Maps available at <http://www.sentiweb.fr>

Sentinelles Network, Chickenpox, Metropolitan France



Incidence rate in blue  
(in cases per 100,000 inhabitants).

| National incidence rates<br>(per 100 000 inhabitants)<br>over the past 3 weeks | 2015w03 (non consolidated)                             | 2015w02  | 2015w01  |
|--|--|--|--|
|  | Incidence rate estimation<br>[95% confidence interval] | Incidence rate estimation<br>[95% confidence interval] | Incidence rate estimation<br>[95% confidence interval] |
| INFLUENZA-LIKE ILLNESS   | 231 [204 ; 258]  | 163 [146 ; 180]  | 110 [94 ; 126]   |
| ACUTE DIARRHEA   | 248 [220 ; 276]  | 245 [224 ; 266]  | 240 [215 ; 265]  |
| CHICKENPOX   | 14 [7 ; 21]  | 15 [10 ; 20]   | 24 [17 ; 31]   |

Table 1 : Incidence rates estimation with 95% confidence interval, for each indicator, in France, over the past 3 weeks .

| Regional incidence rates<br>for week 2015w03<br>(per 100 000 inhabitants) | INFLUENZA-LIKE ILLNESS                                 | ACUTE DIARRHEA   | CHICKENPOX   |
|---|--|--|--|
|   | Incidence rate estimation<br>[95% confidence interval] | Incidence rate estimation<br>[95% confidence interval] | Incidence rate estimation<br>[95% confidence interval] |
| Alsace  | 297 [85 ; 509]   | 128 [0 ; 259]  | 0 [0 ; 0]  |
| Aquitaine   | 205 [31 ; 379]   | 224 [38 ; 410]   | 0 [0 ; 0]  |
| Auvergne  | 360 [212 ; 508]  | 222 [102 ; 342]  | 45 [0 ; 97]  |
| Basse-Normandie   | 195 [82 ; 308]   | 272 [136 ; 408]  | 12 [0 ; 36]  |
| Bourgogne   | 263 [0 ; 635]  | 314 [0 ; 691]  | 19 [0 ; 50]  |
| Bretagne  | 140 [21 ; 259]   | 220 [108 ; 332]  | 5 [0 ; 19]   |
| Centre  | 122 [60 ; 184]   | 246 [152 ; 340]  | 35 [0 ; 73]  |
| Champagne-Ardenne   | 236 [104 ; 368]  | 205 [77 ; 333]   | 4 [0 ; 20]   |
| Corse   | 331 [178 ; 484]  | 259 [139 ; 379]  | 57 [5 ; 109]   |
| Franche-Comté   | 328 [87 ; 569]   | 162 [0 ; 330]  | 0 [0 ; 0]  |
| Haute-Normandie   | 206 [39 ; 373]   | 393 [174 ; 612]  | 23 [0 ; 67]  |
| Ile-de-France   | 312 [199 ; 425]  | 166 [107 ; 225]  | 7 [0 ; 20]   |
| Languedoc-Roussillon  | 170 [69 ; 271]   | 285 [157 ; 413]  | 0 [0 ; 0]  |
| Limousin  | 582 [321 ; 843]  | 372 [167 ; 577]  | 16 [0 ; 49]  |
| Lorraine  | 91 [0 ; 191]   | 330 [101 ; 559]  | 25 [0 ; 60]  |
| Midi-Pyrénées   | 177 [101 ; 253]  | 264 [172 ; 356]  | 9 [0 ; 26]   |
| Nord-Pas-de-Calais  | 110 [33 ; 187]   | 165 [68 ; 262]   | 0 [0 ; 0]  |
| Pays-de-la-Loire  | 182 [83 ; 281]   | 123 [43 ; 203]   | 0 [0 ; 0]  |
| Picardie  | 87 [0 ; 217]   | 195 [0 ; 390]  | 43 [0 ; 135]   |
| Poitou-Charentes  | 280 [69 ; 491]   | 164 [0 ; 337]  | 0 [0 ; 0]  |
| Provence-Alpes-Côte-d'Azur  | 204 [123 ; 285]  | 275 [159 ; 391]  | 26 [0 ; 61]  |
| Rhône-Alpes   | 266 [205 ; 327]  | 351 [266 ; 436]  | 8 [0 ; 18]   |

Table 2 : Incidence rates estimation with 95% confidence interval, for each indicator, for each French regions, for week 2015w03 .

## Réseau Sentinelles

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*The " Réseau Sentinelles" or Sentinelles Network  
(a.k.a. French Communicable Diseases Computer Network)  
is a network of general practitioners,  
working throughout the metropolitan regions of France.  
This group includes 1284 physicians, including 405 involved in the clinical  
surveillance activity, enabling the achievement of weekly newsletters.  
This network is developped in cooperation between Inserm, Université  
Pierre et Marie Curie (UPMC) and the Institut de Veille Sanitaire (InVS).*

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**Deputy head of RS :** Thierry Blanchon  
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**Editor :** Yves Dorléans

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| <b>Nord-Pas-de-Calais<br/>Centre</b>              | Thierry Prazuck    | Mathieu Rivière                     |

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