Observed situation in primary care
Epidemiological surveillance bulletin for the week 15 of the year 2025, from 04/07/2025 to 04/13/2025
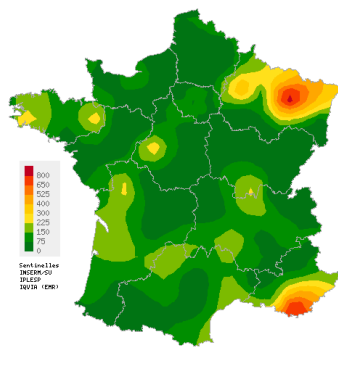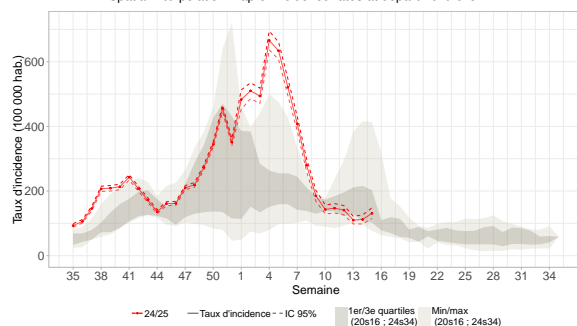
Sentinelles

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 (2025w15), the incidence rate of acute respiratory infection (ARI) cases consulting in general practice was estimated at **131 cases per 100,000 population (95% CI [115; 148])**.

Subject to future data consolidation, this rate is **stable** compared to the previous weeks and corresponds to a **similar activity level** than those usually observed at this time of the year (consolidated data for 2025w14: 112 [98; 126]).

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.

You can find the french "Santé Publique France epidemiological bulletin" with all surveillance data (ambulatory and hospital) on ARI by clicking here.
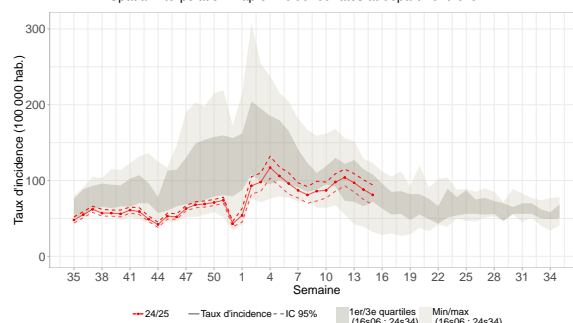
Data sources: Sentinelles, Electronic Medical Records (EMR) IQVIA

Acute diarrhea
Low activity in general practice
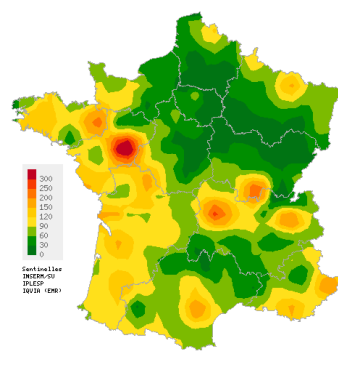
Spatial interpolation map of incidence rates at department level

Incidence rates and comparison with historical data

In mainland France, last week (2025w15), the incidence rate of acute diarrhea cases seen in general practice was estimated at **81 cases per 100,000 population (95% CI [68; 94])**.
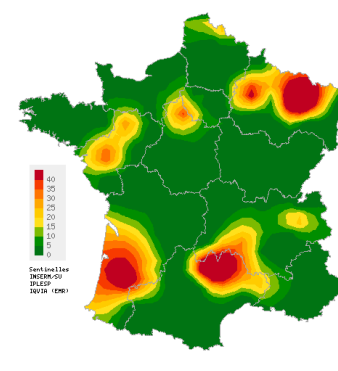
Subject to future data consolidation, this rate **continues the decline observed over the past 3 weeks** and corresponds to a **similar activity level** than those usually observed at this time of the year (consolidated data for 2025w14: 88 [75; 101]).

The purpose of acute diarrhea surveillance is to monitor gastroenteritis outbreaks.
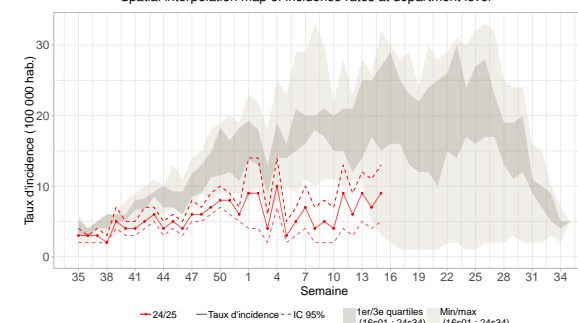
Data sources: Sentinelles, Electronic Medical Records (EMR) IQVIA

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 (2025w15), the incidence rate of Chickenpox cases seen in general practice was estimated at **9 cases per 100,000 population (95% CI [5; 13])**.

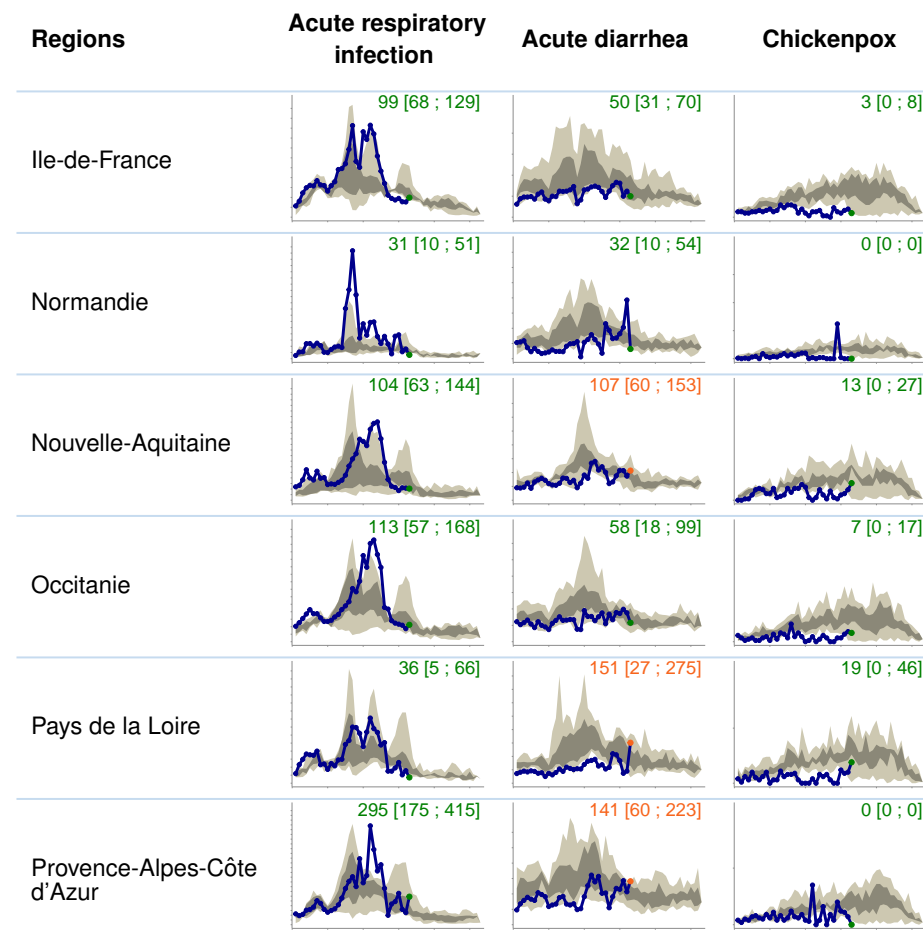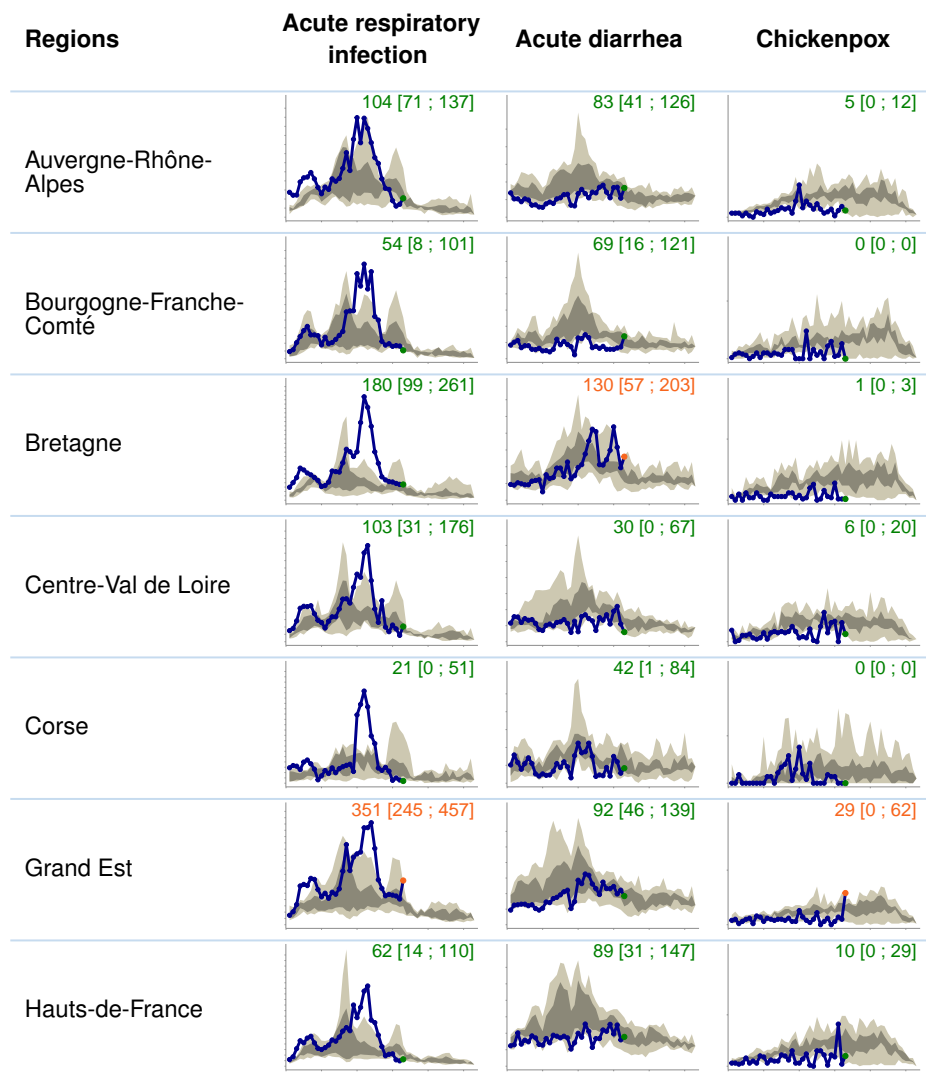Subject to future data consolidation, this rate is **stable** compared to the previous weeks and corresponds to a **low activity level** compared to those usually observed at this time of the year (consolidated data for 2025w14: 7 [4; 11]).

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

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

Incidence rates by french region
Epidemiological surveillance bulletin for the week 15 of the year 2025, from 04/07/2025 to 04/13/2025

Sentinelles

Regions	Acute respiratory infection	Acute diarrhea	Chickenpox	Regions	Acute respiratory infection	Acute diarrhea	Chickenpox
Auvergne-Rhône-Alpes	104 [71 ; 137]	83 [41 ; 126]	5 [0 ; 12]	Ile-de-France	99 [68 ; 129]	50 [31 ; 70]	3 [0 ; 8]
Bourgogne-Franche-Comté	54 [8 ; 101]	69 [16 ; 121]	0 [0 ; 0]	Normandie	31 [10 ; 51]	32 [10 ; 54]	0 [0 ; 0]
Bretagne	180 [99 ; 261]	130 [57 ; 203]	1 [0 ; 3]	Nouvelle-Aquitaine	104 [63 ; 144]	107 [60 ; 153]	13 [0 ; 27]
Centre-Val de Loire	103 [31 ; 176]	30 [0 ; 67]	6 [0 ; 20]	Occitanie	113 [57 ; 168]	58 [18 ; 99]	7 [0 ; 17]
Corse	21 [0 ; 51]	42 [1 ; 84]	0 [0 ; 0]	Pays de la Loire	36 [5 ; 66]	151 [27 ; 275]	19 [0 ; 46]
Grand Est	351 [245 ; 457]	92 [46 ; 139]	29 [0 ; 62]	Provence-Alpes-Côte d'Azur	295 [175 ; 415]	141 [60 ; 223]	0 [0 ; 0]
Hauts-de-France	62 [14 ; 110]	89 [31 ; 147]	10 [0 ; 29]				

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 previous years is shown in grayed colour, with quartiles in darker and minimum/maximum values in lighter . 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.

Acute respiratory infection (ARI) - Additional data
Epidemiological surveillance bulletin for the week 15 of the year 2025, from 04/07/2025 to 04/13/2025

Sentinelles

ARI incidence rates by age groups

Weekly national incidence rates of ARI by age groups
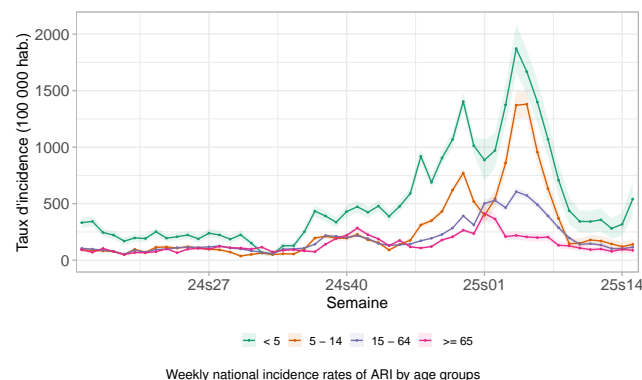
Last week (2025w15), subject to future data consolidation, incidence rates were estimated at:

- **0-4 age group**: 541 cases per 100 000 population (95% CI [389; 693]) (consolidated data for 2025w14: 318 [214; 422]);

- **5-14 age group**: 140 cases per 100 000 population (95% CI [90; 190]) (consolidated data for 2025w14: 120 [78; 161]);

- **15-64 age group**: 115 cases per 100 000 population (95% CI [95; 135]) (consolidated data for 2025w14: 102 [85; 119]);

- **65 and above age group**: 87 cases per 100 000 population (95% CI [58; 116]) (consolidated data for 2025w14: 96 [68; 123]).

Incidence rates are **slightly increasing in the 0-4 age group, and stable in the other age groups** compared to those of the previous weeks.

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

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
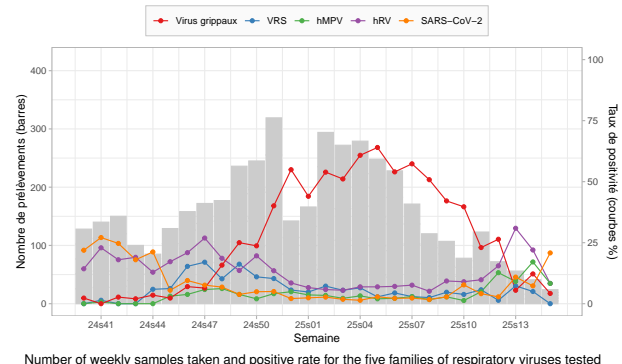
Since 2024w40, **4,460** samples have been tested as part of virological surveillance of ARI 2024/2025.

Last week (2025w15), **24 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)**: **21%** (5/24) (consolidated data for 2025w14: 7% (3/41));
- **Rhinovirus**: **8%** (2/24) (consolidated data for 2025w14: 22% (9/41));
- **Metapneumovirus**: **8%** (2/24) (consolidated data for 2025w14: 17% (7/41));
- **Influenza viruses**: **4%** (1/24) (consolidated data for 2025w14: 12% (5/41));
- **Respiratory syncytial virus (RSV)**: **0%** (0/24) (consolidated data for 2025w14: 5% (2/40)).

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

Description of IRA cases seen in general practice

Last week (2025w15), 295 cases of ARI were reported by Sentinelles general practitioners. Among these, 242 (82% of reported cases) were described and had the following characteristics:

- **Median age**: 37 years (range from 3 months to 96 years);
- **Male/female sex-ratio**: 0.78 (98/126);
- **Risk factors**: 15% (32/211) of the patients had risk factors for complications;
- **Hospitalization**: 0.9% (95% CI [0; 2.1]) of the patients were hospitalized after the consultation (2/214).

Data source: Sentinelles

In conclusion

Last week (2025w15), subject to future data consolidation, the incidence of ARI cases seen in general practice was **slightly increasing in the 0-4 age group, and stable in the other age groups** compared to those of the previous weeks.

The cases of ARI observed last week in general practice were mainly due to the **circulation of SARS-CoV-2 (Covid-19)**.

Virological surveillance, in particular to monitor the flu epidemic and the circulation of RSV (the main pathogen of bronchiolitis), ended on 13 April. It will be resumed next autumn for the 2025-2026 winter season.

Incidence rates of influenza cases
Stable activity and at a low level
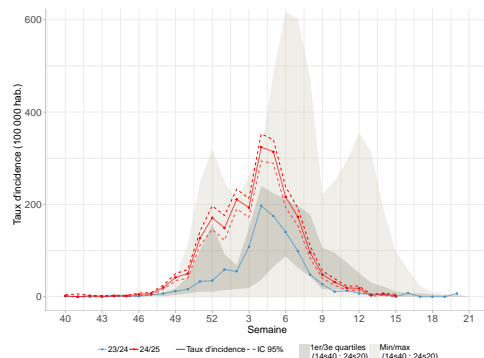
Incidence rates of influenza cases observed in general practice since 2024w40 compared to previous seasons (*)

Last week (2025w15), the incidence rate of **influenza** cases seen in general practice among patients consulting for an ARI was estimated at **5 cases per 100,000 population** (95% CI [0; 13]), corresponding to 3,439 [0; 8,558] new cases.

Subject to future data consolidation, this rate was **stable** compared to the previous weeks (consolidated data for 2025w14: 12 [5; 18]).

Description of confirmed influenza cases seen in primary care
Since the beginning of virological surveillance (2024w40), the 1,497 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**: 0.86 (598/800);
- **Vaccination**: 89% (1,235/1,386) were not vaccinated against influenza;
- **Risk factors**: 19% (270/1,419) of the patients had risk factors for complications;
- **Hospitalization**: 0.3% (4/1,179) 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

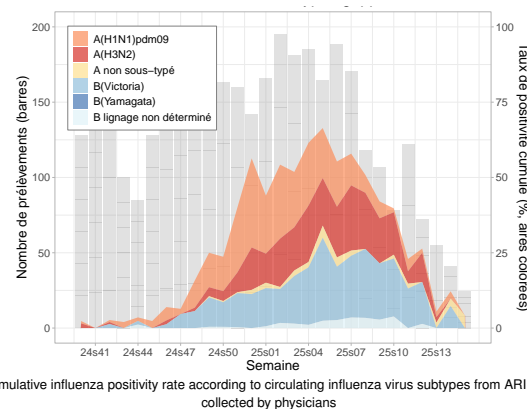## Incidence rates of influenza cases by age groups
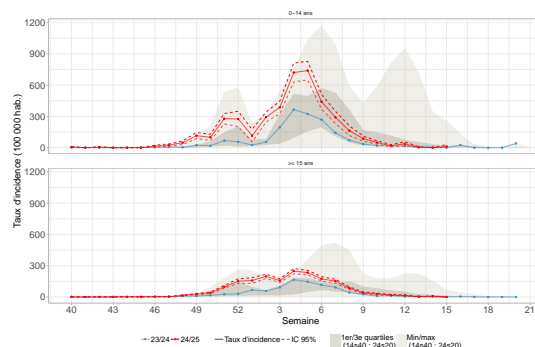
Incidence rates of influenza cases seen in general practice by age groups since 2024w40 and comparison with historical data (*)

Last week (2025w15), subject to future data consolidation, the incidence rates of influenza cases seen in general practice among patients consulting for an ARI were **stable in both age groups (0-14 and 15 and above age groups)**, compared to those of the previous weeks.

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 1,514 influenza viruses identified were distributed as follows: **35% of type A(H1N1)***pdm09* *(527/1,514)*, **34% of type B Victoria** *(502/1,514)*, **26% of type A(H3N2)** *(393/1,514)*, **3% of undetermined B lineage** *(46/1,514)* and **3% of non-subtyped A viruses** *(46/1,514)*.

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

Vaccine effectiveness against seasonal flu
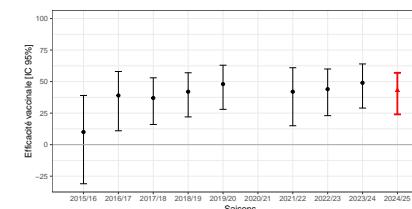
In red: 2024-2025 season / In black: 2015-2016 to 2023-2024 seasons*

The overall influenza vaccine effectiveness is estimated at **43% (95% CI [24%; 57%])**, 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: 59% [28%; 76%];
- People aged 65 or over: 38% [3%; 60%].

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 (2025w15), subject to future data consolidation, the incidence of **influenza** 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**.

This season, we observed a 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)** at the end of the epidemic.

Find the epidemiological bulletin of Santé publique France with all the surveillance data (ambulatory and hospital) on influenza.
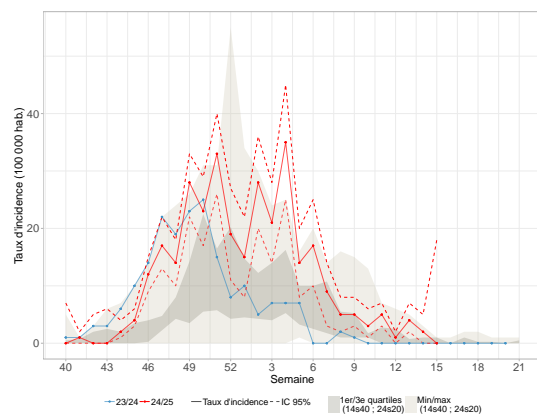
Incidence rates of RSV infection cases
Stable activity and at a low level

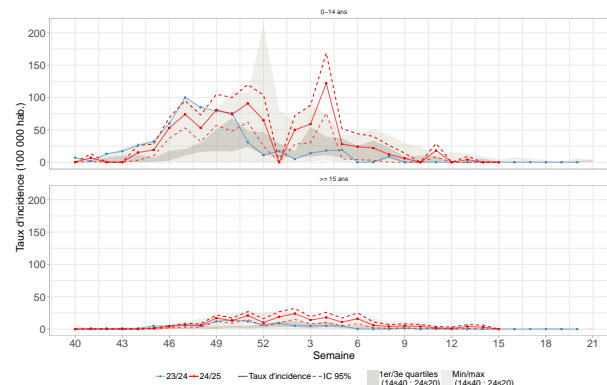Incidence rates of RSV infection cases seen in general practice since 2024w40 and comparison to historical data (*)

Last week (2025w15), 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 **0 cases per 100,000 population** (95% CI [0; 18]).

Subject to future data consolidation, this rate is **stable** compared to the previous weeks (consolidated data for 2025w14: 5 [0; 11]).

(*) 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 (2025w15), 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**: 0 cases per 100,000 population.

Subject to future data consolidation, these rates are **stable in both age groups** (0-14 and 15 and over age groups) 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 301 confirmed RSV infection cases swabbed by general practitioners and pediatricians presented the following characteristics:

- **Median age**: 16 years (range from 1 month to 98 years old);

- **Male/female sex-ratio**: 0.81 (134/166);

- **Risk factors**: 32% (94/290) of the patients had risk factors for complications;

- **Hospitalization**: 0,4% (1/249) of the patients were hospitalized at the end of the consultation.

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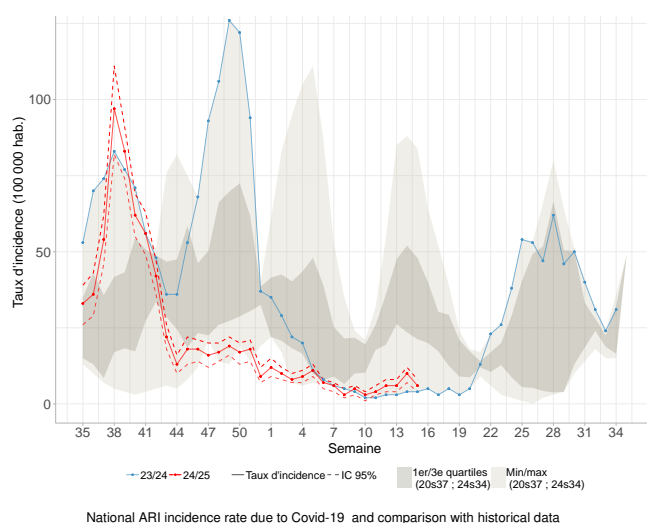
In conclusion

Last week (2025w15), subject to future data consolidation, the incidence of **RSV** infection 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**.

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

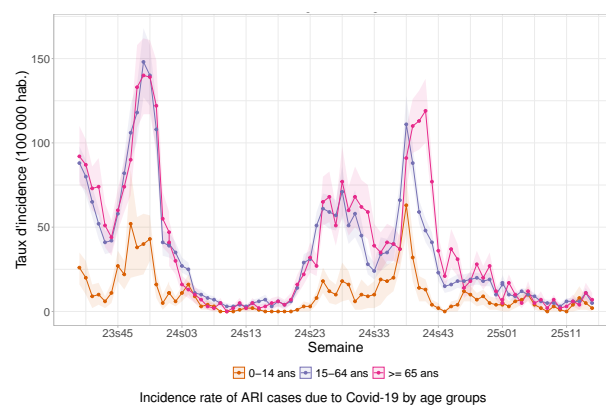National ARI incidence rate due to Covid-19 and comparison with historical data

Last week (2025w15), the incidence rate of **Covid-19** cases seen in general practice among patients consulting for an ARI was estimated at **5 cases per 100,000 population** (95% CI [3; 7]), corresponding to 3,311 [2,208; 4,414] new cases.

Subject to future data consolidation, this rate is **stable** compared to the previous weeks (consolidated data for 2025w14: 10 [7; 12]).

Data source: Sentinelles

Incidence rates of Covid-19 cases
by age groups

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

Last week (2025w15), the incidence rates of **Covid-19** cases seen in general practice among patients consulting for an ARI were estimated at:

- **0-14 years**: 2 cases per 100,000 population (95% CI [0; 4]), corresponding to 212 [2; 423] new cases;

- **15-64 years**: 5 cases per 100,000 population (95% CI [3; 7]), corresponding to 2 030 [1,131; 2,929] new cases;

- **65 years and above**: 7 cases per 100,000 population (95% CI [11; 4]), corresponding to 1,068 [515; 1,261] new cases.

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

Data source: Sentinelles

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

Since week 2025w14, the 70 Covid-19 described cases with an ARI had the following characteristics:

- **Median age**: 48 years (range from 3 years to 91 years);

- **Male/female sex-ratio**: 0.86 (32/37);

- **Risk factors**: 25% (17/68) of the patients had risk factors for complications;

- **Hospitalization**: no patient was hospitalized after the consultation (0/67).

Data source: Sentinelles

In conclusion

Last week (2025w15), 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**.

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

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

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

Sentinelles   IQVIA

UNIVERSITÉ DE ROUEN NORMANDIE   UNIVERSITÉ CÔTE D'AZUR

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Santé publique France   RÉPUBLIQUE FRANÇAISE MINISTÈRE DES SOLIDARITÉS ET DE LA SANTÉ

Università di Corsica Pasquale Paoli   HCL HOSPICES CIVILS DE LYON   INSTITUT PASTEUR

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 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!