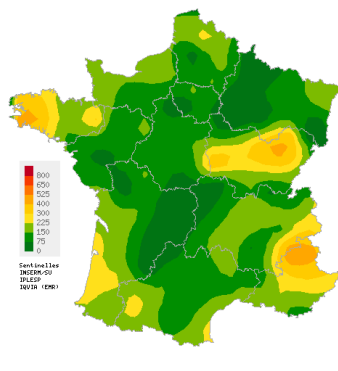
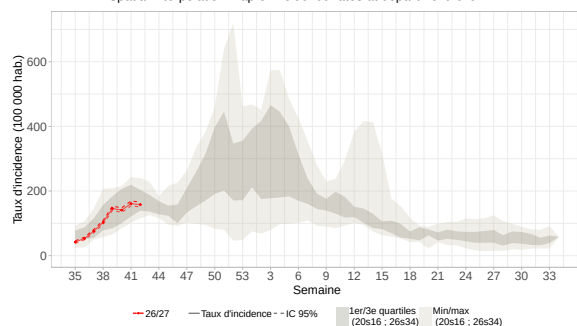


Acute Respiratory Infection (ARI)

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 (2026w42), the incidence rate of acute respiratory infection (ARI) cases consulting in general practice was estimated at **158 cases per 100,000 population** (95% CI [151 166]).

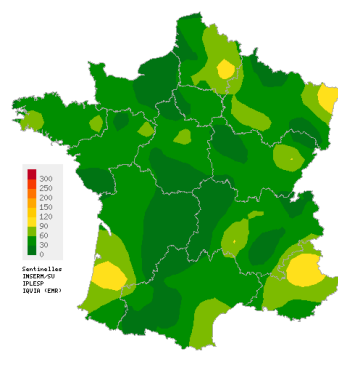
Subject to future data consolidation, this rate is **stable** compared to the previous week and corresponds to a **similar activity level** to those usually observed at this time of the year (consolidated data for 2026w41: 161 [154; 169]).

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.

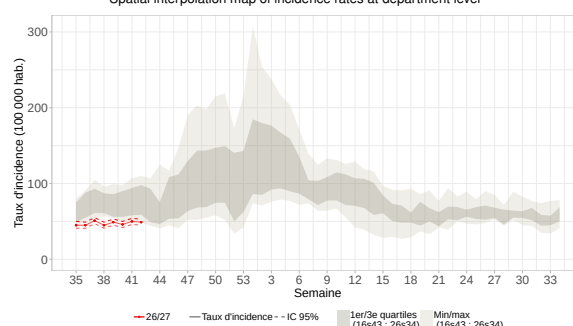
Data sources: Sentinelles, Electronic Medical Records (EMR) IQVIA

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 (2026w42), the incidence rate of acute diarrhea cases seen in general practice was estimated at **49 cases per 100,000 population** (95% CI [45; 53]).

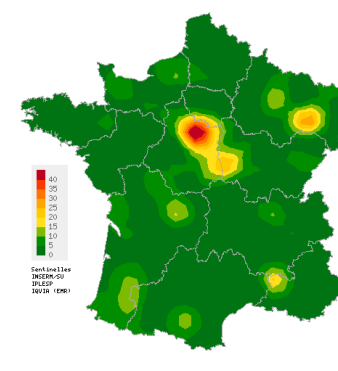
Subject to future data consolidation, this rate is **stable** compared to the previous week and corresponds to a **lower activity level** than those usually observed at this time of the year (consolidated data for 2026w41: 50 [46; 54]).

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

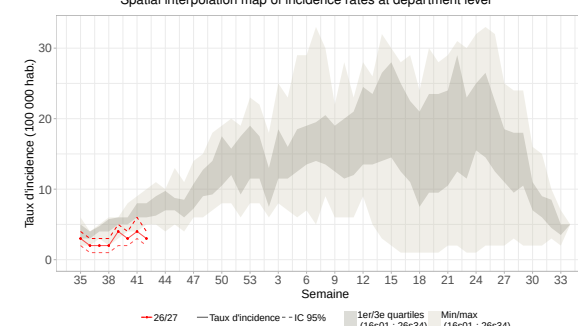
Data sources: Sentinelles, Electronic Medical Records (EMR) IQVIA

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 (2026w42), the incidence rate of chickenpox cases seen in general practice was estimated at **3 cases per 100,000 population** (95% CI [2; 4]).

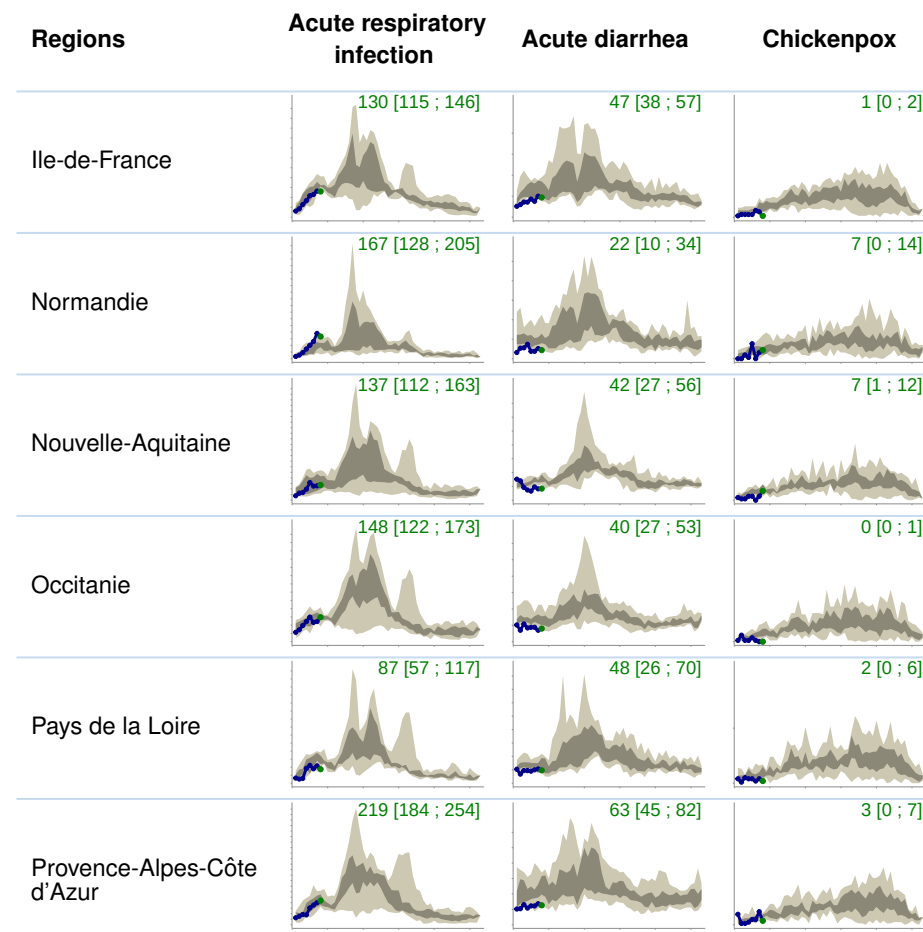
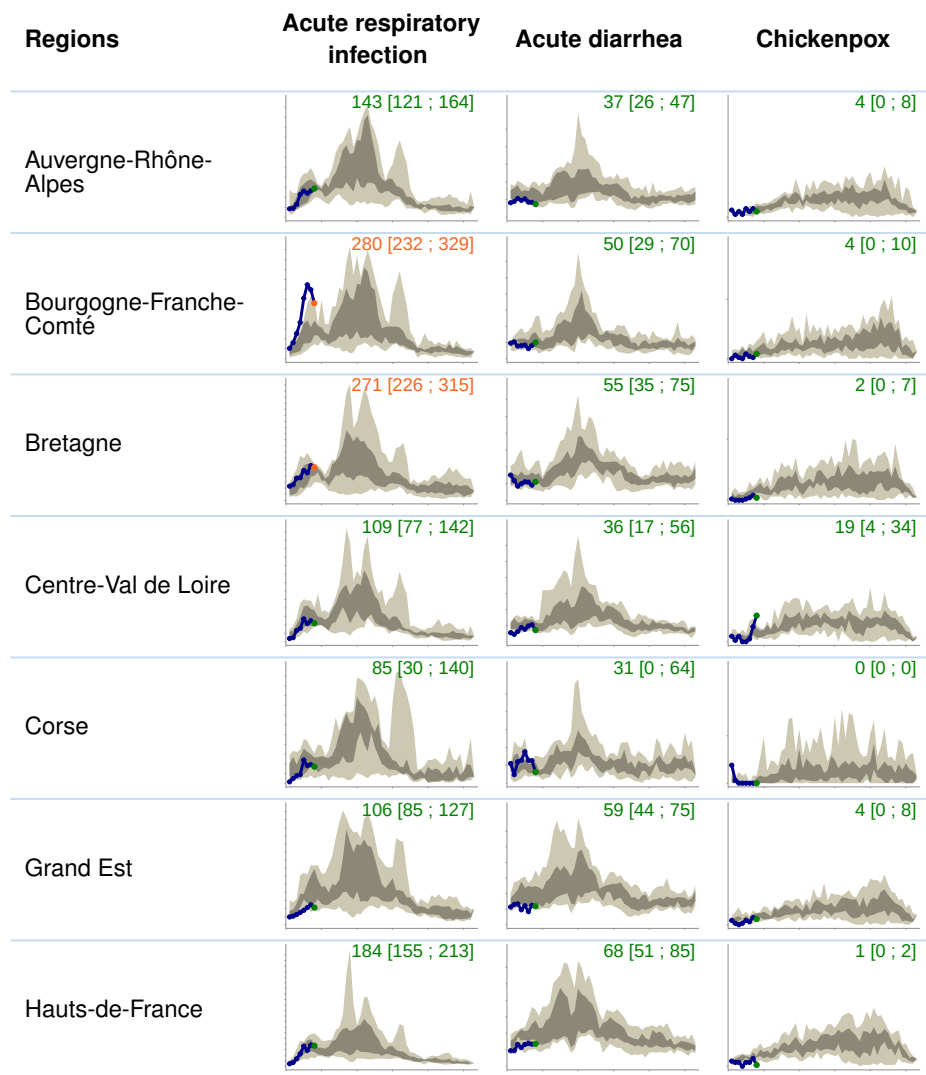
Subject to future data consolidation, this rate is **stable** compared to the previous week and corresponds to a **lower activity level** than those usually observed at this time of the year (consolidated data for 2026w41: 4 [3; 6]).

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

Incidence rates by french region

Epidemiological surveillance bulletin for the week 42 of the year 2026, from 10/12/2026 to 10/18/2026

Sentinelles



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

Activity levels

- Low activity
- Moderate activity
- High activity

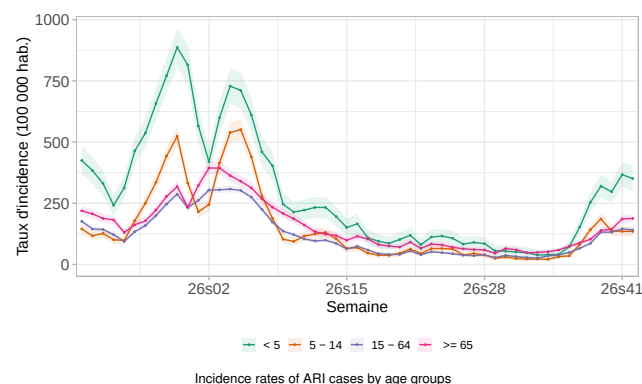
For the three indicators, the blue curve corresponds to the change in the incidence rate per 100,000 population for the current year. For ARI, previous years (since 2020) are shown with the grey curves. For acute diarrhea and chickenpox, the distribution of weekly incidence rates for the previous years 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 42 of the year 2026, from 10/12/2026 to 10/18/2026

Sentinelles

ARI incidence rates by age groups



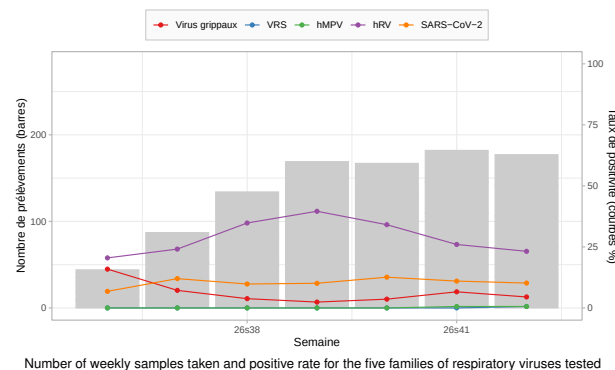
Last week (2026w42), incidence rates of cases of acute respiratory infections (ARI) seen in general practice were estimated at:

- **0-4 age group:** 351 cases per 100,000 population (95% CI [299; 403]) (consolidated data for 2026w41: 367 [317; 417]);
- **5-14 age group:** 135 cases per 100,000 population (95% CI [114; 155]) (consolidated data for 2026w41: 135 [116; 155]);
- **15-64 age group:** 141 cases per 100,000 population (95% CI [131; 150]) (consolidated data for 2026w41: 145 [136; 154]);
- **65 and above age group:** 188 cases per 100,000 population (95% CI [170; 206]) (consolidated data for 2026w41: 186 [170; 203]).

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

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

Circulation of respiratory viruses in general practice and pediatric



Since 2026w36, **960** samples have been tested by general practitioners and pediatricians participating in the 2026/2027 virological surveillance of ARI.

Last week (2026w42), **177 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:

- **Rhinovirus:** **23%** (41/177) (consolidated data for 2026w41: 26% (47/181));
- **SARS-CoV-2 (Covid-19):** **10%** (18/177) (consolidated data for 2026w41: 11% (20/181));
- **Influenza viruses:** **5%** (8/177) (consolidated data for 2026w41: 7% (12/181));
- **Metapneumovirus:** **0.6%** (1/177) (consolidated data for 2026w41: 0,6% (1/181));
- **Respiratory syncytial virus (RSV):** **0.6%** (1/177) (consolidated data for 2026w41: 0% (0/126)).

Data sources: Sentinelles, University Departments of General Practice, SOS Médecins

Description of IRA cases seen in general practice

Last week (2026w42), 517 cases of ARI were reported by Sentinelles general practitioners. Among these, 375 (73% of reported cases) were described and had the following characteristics:

- **Median age:** 43 years (range from 3 months to 98 years);
- **Male/female sex-ratio:** 0.85 (155/182);
- **Risk factors:** 19% (58/299) of the patients had risk factors for complications;
- **Hospitalization:** 0.3% (1/307) of the patients were hospitalized after the consultation.

Data source: Sentinelles

In conclusion

Last week (2026w42), subject to future data consolidation :

- The incidence of ARI cases seen in general practice was **stable** in all age groups compared to those of the previous week;
- IRA cases were mainly due to the circulation of **rhinovirus** and **SARS-CoV-2** (Covid-19).

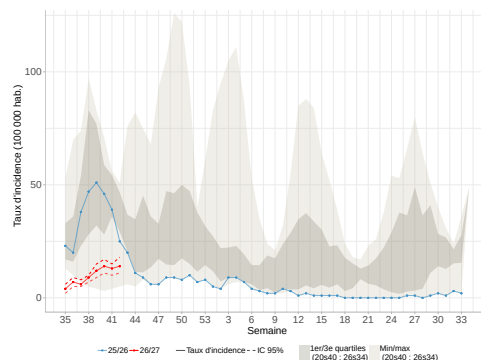
Covid-19, RSV, bronchiolitis and influenza

Epidemiological surveillance bulletin for the week 42 of the year 2026, from 10/12/2026 to 10/18/2026

Sentinelles

Incidence rates of Covid-19 cases

Stable activity at a low level



Incidence rate of Covid-19 cases and comparison with historical data

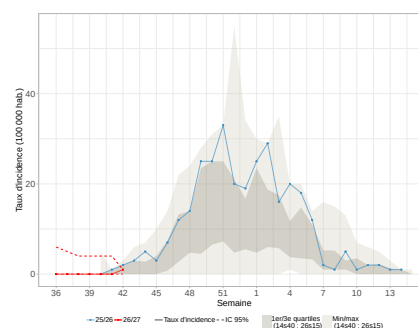
Last week (2026w42), the incidence rate of Covid-19 cases seen in general consultations for an ARI has been estimated at **14 cases per 100,000 population** (95% CI [11; 18]) corresponding to 9,566 [7,095; 12,037] new cases.

Subject to future data consolidation, this rate is **stable** compared to the previous week (consolidated data for 2026w41: 13 [10; 15]).

Data source: Sentinelles

Incidence rates of RSV infection cases

Stable activity and at a low level



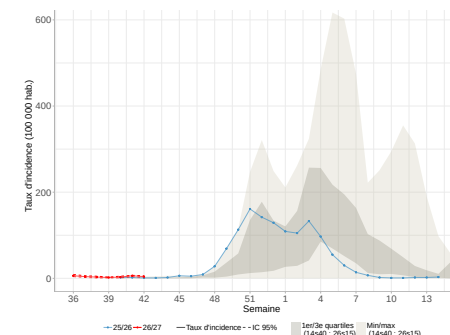
Incidence rates of RSV infection cases and comparison with historical data

Last week (2026w42), 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 **1 cases per 100,000 population** (95% CI [0; 3]). Subject to future data consolidation, this rate is **stable** compared to the previous week (consolidated data for 2026w41: 0 [0; 4]).

Data sources: Sentinelles, University Departments of General Practice, SOS Médecins

Incidence rates of influenza cases

Stable activity and at a low level

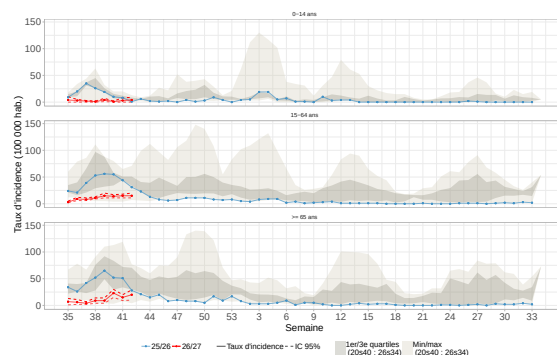


Incidence rate of influenza cases and comparison with historical data

Last week (2026w42), the incidence rate of **influenza** cases seen in general practice for an ARI was estimated at **8 cases per 100,000 population** (95% CI [4; 12]), corresponding to 5,384 [2,845; 7,923] new cases. Subject to future data consolidation, this rate is **stable** compared to the previous week (consolidated data for 2026w41: 11 [8; 15]).

Data sources: Sentinelles, University Departments of General Practice, SOS Médecins

Incidence rates of Covid-19 cases by age groups

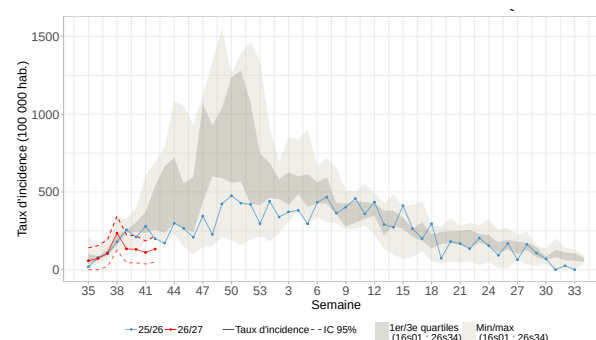


Incidence rates of Covid-19 cases by age groups

Last week (2026w42), subject to future data consolidation, the incidence rates of **Covid-19** cases seen in general practice for an ARI were **stable** in all age groups compared to those of the previous week.

Data source: Sentinelles

Incidence rates of bronchiolitis cases in children under one year



Incidence rate of bronchiolitis cases seen in children under one year and comparison with historical data

Last week (2026w42), the incidence rate of **bronchiolitis** cases seen in general practice was estimated at **133 cases per 100,000 population** (95% CI [50; 216]) **in children under one year old**.

Subject to future data consolidation, this rate is **stable** compared to the previous week (consolidated data for 2026w41: 111 [37; 185]).

Data source: Electronic Medical Records (EMR) IQVIA

In conclusion

Last week (2026w42), subject to future data consolidation, the incidence of ARI cases seen in general practice was **stable** compared to the previous week.

These cases were still predominantly due to the circulation of rhinoviruses and SARS-CoV-2 (Covid-19).

- The incidence of **Covid-19** cases seen in general practice for an ARI was **stable** and remained at a **low level of activity**.
- **No active circulation of RSV** was observed in general practice. The incidence of **bronchiolitis cases in children under one year old** was also **stable** compared to the previous weeks.
- The incidence of **influenza** cases seen in general practice for an ARI was **stable** and remained at a **low level of activity**.

Find all the surveillance data on acute respiratory infections on [Santé publique France's Odissé platform](#).

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 Universities of Rouen, Côte d'Azur and Strasbourg.

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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Partners and supervisory bodies

Partners

Sentinelles IQVIA



Supervisory bodies of Sentinelles network



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

**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!