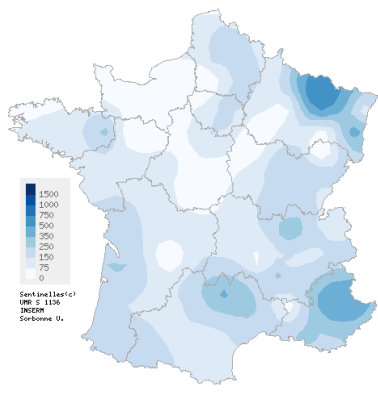


Observed situation in general practice for the week 14 of the year 2023, from 04/03/2023 to 04/09/2023

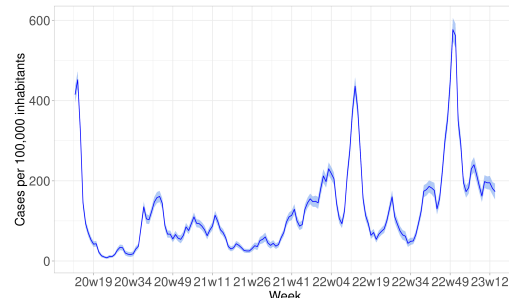
## Acute Respiratory Infection (ARI)

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

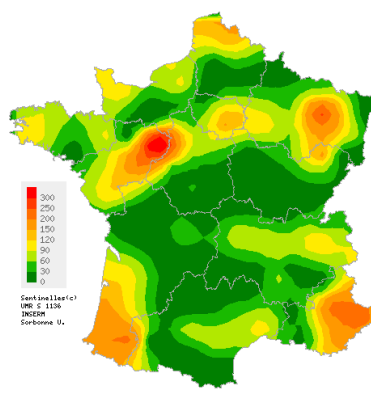
In mainland France, last week (2023w14), the incidence rate of ARI cases consulting in general practice was estimated at **173 cases per 100,000 inhabitants (95% CI [153 ; 193])**. This rate is **stable** compared to week 2023w13 (consolidated data: 181 [165 ; 197]).

- Additional IRA data: page 2
- Influenza data: page 3
- Covid-19 data: page 4
- RSV data: page 5
- Complete national and regional data: page 6

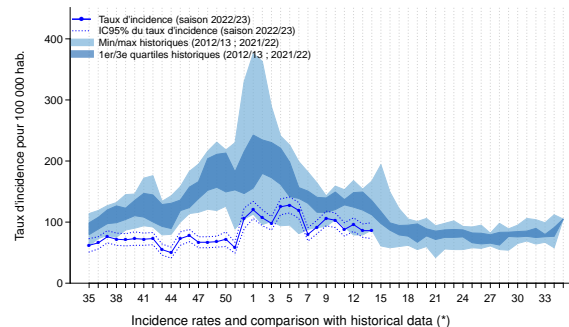
ARI are caused by a variety of respiratory viruses including SARS-CoV-2 (Covid-19), influenza viruses, and other respiratory viruses such as RSV, rhinovirus and metapneumovirus. The purpose of ARI surveillance is to monitor outbreaks of these virus.

## Acute diarrhea

Moderate activity in general practice



Spatial interpolation map of incidence rates at department level



In mainland France, last week (2023w14), the incidence rate of acute diarrhea cases seen in general practice was estimated at **86 cases per 100,000 inhabitants (95% CI [73 ; 99])**. This rate is **stable** compared to week 2023w13 (consolidated data: 86 [75 ; 97]) and is at a **low activity level** compared to those usually observed in this period.

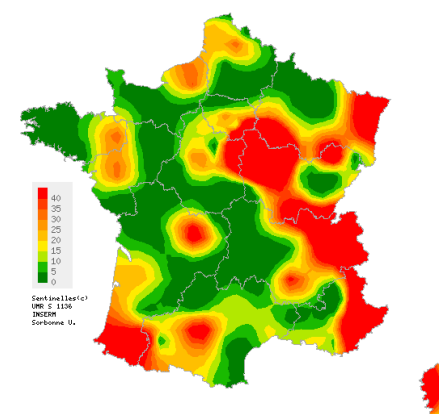
Complete national and regional data are available on the last page of this bulletin.

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

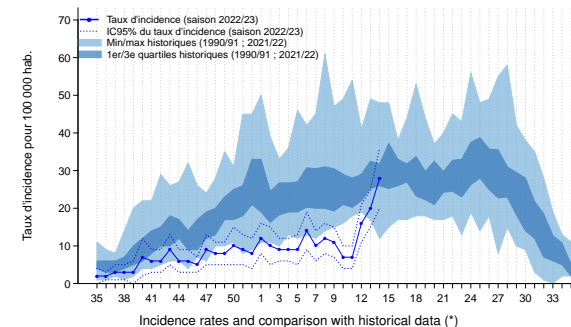
(\*) Incidences of acute diarrhea during the 2019/2020 and 2020/2021 seasons were greatly reduced by containment and sanitary measures to control the Covid-19 pandemic. They are not included in historical comparisons.

## Chickenpox

Moderate activity in general practice



Spatial interpolation map of incidence rates at department level



In mainland France, last week (2023w14), the incidence rate of Chickenpox cases seen in general practice was estimated at **28 cases per 100,000 inhabitants (95% CI [20 ; 36])**. This rate is **increasing** compared to week 2023w13 (consolidated data: 20 [15 ; 25]) and at a level of **activity similar** to those usually observed in this period.

Complete national and regional data are available on the last page 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.

Observed situation in general practice for the week 14 of the year 2023, from 04/03/2023 to 04/09/2023

## Additional data on acute respiratory infections

### Modalities of ARI monitoring by the Sentinelles Network

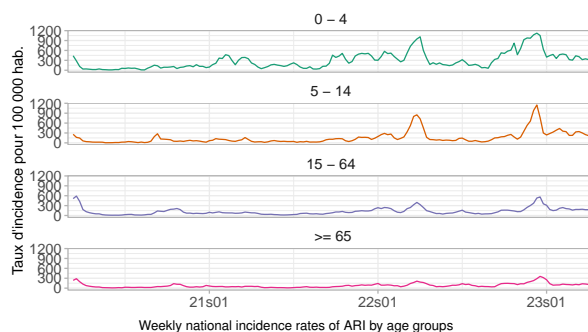
Every year, viruses with respiratory tropism circulate in mainland France causing acute respiratory infections (ARI). These viruses are mainly influenza viruses, and other respiratory viruses such as respiratory syncytial virus (RSV), rhinovirus or metapneumovirus, but also SARS-CoV-2 (COVID-19) since 2020. They require close monitoring because they can be the cause of more or less severe epidemics.

In order to carry out this surveillance in general practice, Sentinel general practitioners have been reporting the number of cases of acute respiratory infection (ARI) seen in consultation (or teleconsultation) since March 17, 2020, according to the following definition: sudden onset of fever (or feeling of fever) and respiratory signs.

Virological surveillance is also carried out by Sentinel general practitioners and pediatricians, with the collection of a sample of ARI cases seen in consultation in order to identify the circulating viruses.

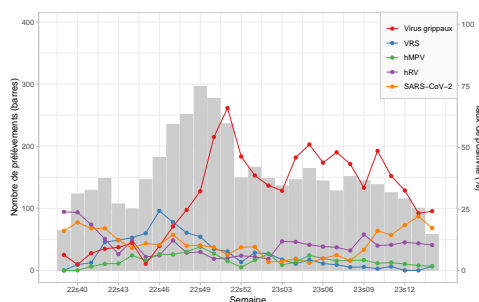
This monitoring is carried out in collaboration with Santé publique France, the National Reference Center (CNR) for respiratory infections (Pasteur Institute in Paris and Hospices Civils de Lyon), and the University of Corsica.

### ARI incidence rates by age groups



Last week **2023w14**, incidence rates are **stable** in all age groups compared to the previous week.

### Circulation of respiratory viruses in general practice and pediatrics



Number of swabs and positivity rate of the tested respiratory viruses among ARI cases swabbed by Sentinelles physicians (GPs and pediatricians) since week 2022w39

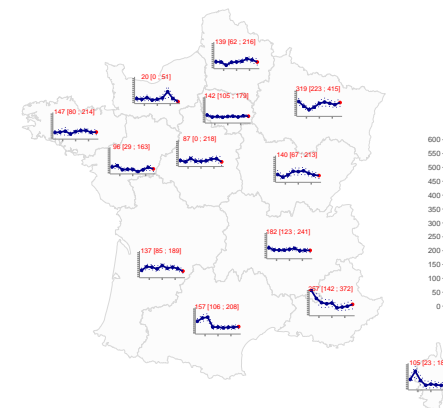
Last week (**2023w14**), **58 patients** with ARI seen in GPs and paediatric consultations had been collected as a part of the Sentinel surveillance (salivary and nasopharyngeal samples). These samples were tested for various respiratory viruses, including SARS-CoV-2 (COVID-19) and influenza viruses. The results of the virological tests performed according to the weeks are presented in the graph above and detailed below:

- 14/58 (24.1%) were positive for **influenza virus** (consolidated data for 2023w13: 23/99 (23.2%));
- 10/58 (17.2%) were positive for **SARS-CoV-2 (COVID-19)** (consolidated data in 2023w13: 22/100 (22.0%));
- 1/58 (1.7%) was positive for **respiratory syncytial virus (RSV)** (consolidated data in 2023w13: 0/100 (0%)) ;
- 6/58 (10.3%) were positive for **rhinovirus (hRV)** (consolidated data in 2023w13: 11/100 (11.0%));
- 1/58 (1.7%) was positive for **metapneumovirus (hMPV)** (consolidated data in 2023w13: 2/100 (2.0%)).

Since week **2022w39** (September 26th 2022), **4,305 patients** with ARI seen in GPs and paediatric consultations have been swabbed.

**20 "Influenza A+COVID-19" co-infections**, **6 "Influenza B+Covid-19" co-infections**, **1 "Influenza A+Influenza B" co-infection** and **1 "Influenza A+COVID-19+RSV" co-infection** were observed. A(H3N2)/SARS-CoV-2 co-infections were observed between weeks 2022w42 and 2023w09. B (lineage not determined)/SARS-CoV-2 co-infections were observed between weeks 2023w05 and 2023w13, and A(H3N2)/B lineage Victoria co-infection was observed in week 2023w04. Triple A(H3N2)/SARS-CoV-2/VRS co-infection was observed in week 2022w50.

### Evolution of ARI incidence by regions



Weekly ARI incidence rates by regions over the last nine weeks

The regional ARI incidence rates estimated for the last week 2023w14 are available on the last page.

### In conclusion

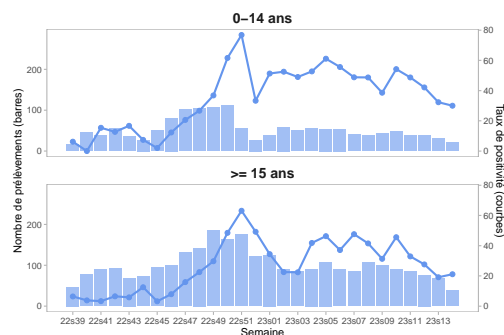
Last week (**2023w14**), the incidence of ARI cases seen in general practice is **stable** in all age groups and regions compared to the previous week (see graph opposite).

The increase in the ARI incidence rate is linked to the concomitant circulation of various respiratory viruses the past week (2023w14), in particular the influenza viruses (see page 3) and the SARS-CoV-2 (Covid-19) (see page 4), but also the RSV (see page 5), the rhinovirus (hRV) and the metapneumovirus (hMPV) (see graph opposite).

Observed situation in general practice for the week 14 of the year 2023, from 04/03/2023 to 04/09/2023

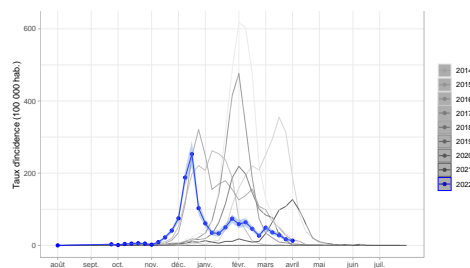
## INFLUENZA

### ARI positivity rates to influenza by age groups



Last week (**2023w14**), the influenza positivity rates of patients consulting for an ARI and sampled by Sentinel physicians were **30%** and **21%** respectively in the 0-14 and 15 and older age groups.

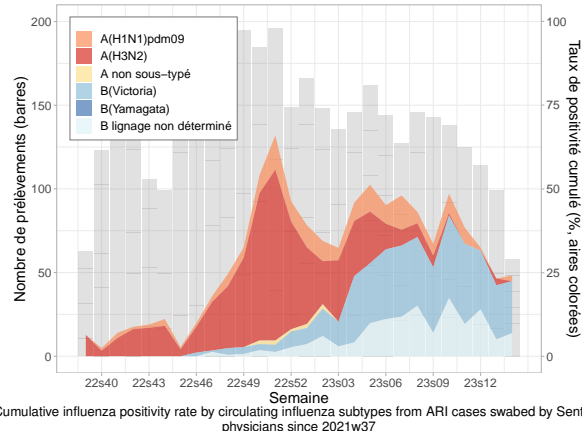
### Estimated incidence of influenza cases seen in general practice



Last week (**2023w14**), the incidence rate of influenza cases seen in general practice was estimated at 30 cases per 100,000 population (95% CI [21; 39]), representing 20,115 [14,077; 26,153] new cases of influenza seen in general practice.

This rate is **stable** compared to those in recent weeks (consolidated data for 2023w12 and 2023w13 : 51 [40; 61] and 32 [24; 39], representing 33,806 [26,773; 40,839] and 20,975 [15,870; 26,080] new cases of influenza seen in general practice).

### Circulation of influenza viruses



Last week (**2023w14**), among the 58 patients with ARI who were sampled, 14 were **positive for influenza virus (24.1%)**. The majority of circulating influenza viruses were type B (13/14 or 93%), and more precisely type B Victoria.

Since the beginning of virological surveillance in week 22s39 (26th September), the 1,376 confirmed influenza cases have been sampled by Sentinel general practitioners and pediatricians. They presented the characteristics below:

#### Clinical description of confirmed influenza cases:

- Their median age was 24 years (from 1 mois month to 89 years);
- 52% (706/1,370) were women;
- 93% (1,232/1,328) were not vaccinated against influenza;
- 14% (179/1,255) had risk factors for complications;
- 0.7% (8/1,212) were hospitalized at the end of the consultation.

#### Identification of influenza circulating viruses:

The 1,376 influenza viruses identified since the beginning of the virological surveillance were distributed as follows:

- 13% (173/1,376) influenza A(H1N1)pdm09 virus;
- 49% (670/1,376) influenza A(H3N2) virus;
- 1% (11/1,376) non-subtyped influenza A virus;
- 25% (343/1,376) influenza B of Victoria lineage virus;
- 13% (183/1,376 B lineage influenza virus not yet identified.

### Influenza circulation by region

Last week (**2023w14**), among the **58 tested samples 14 (24.1%)** were positive for at least one influenza virus. Influenza cases were identified in 5 French metropolitan regions, and in particular in:

- Grand Est (4/8 tested samples, or 50%),
- Ile-de-France (3/8 tested samples, or 38%),
- Auvergne-Rhône-Alpes (4/11 tested samples, or 36%),
- Bourgogne-Franche-Comté (1/3 tested samples, or 33%),
- Bretagne (2/8 tested samples, or 25%).

### In conclusion

Last week (**2023w14**), the circulation of influenza viruses was **stable** compared to the previous week, but we can note the **epidemic decline since mid-March** (see graphs opposite and text above).

Overall, the predominantly circulating influenza viruses are of type A, with the subtype A(H3N2) in the majority. We can note however a predominant circulation of influenza viruses of type B (Victoria lineage) since the beginning of the year 2023.

The characteristics of influenza cases are similar to those of positive influenza cases observed in past seasons in general practice (historical data : median age: 24 years; 50% women; 92% unvaccinated against influenza; 14% with risk factors; 0.3% hospitalized patients).

You can find the epidemiological bulletin of Santé publique France with all the surveillance data (ambulatory and hospital) on influenza by clicking [here](#).

Observed situation in general practice for the week 14 of the year 2023, from 04/03/2023 to 04/09/2023

## Covid-19

### Modalities of Covid-19 monitoring by the Sentinelles Network

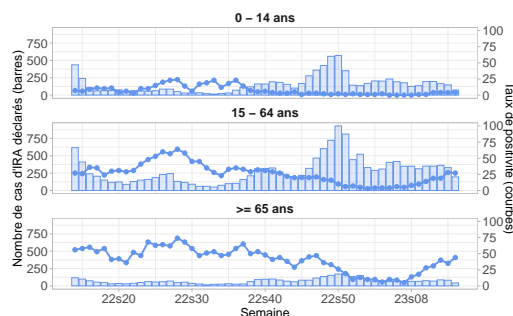
The Sentinel network contributes to the monitoring of the dynamics of the Covid-19 epidemic through the surveillance of cases of acute respiratory infection (ARI) seen in general practice (*defined as a fever or a feeling of fever accompanied by respiratory signs*).

For each patient presenting an ARI reported by Sentinel general practitioners, descriptive data are collected, including the results of diagnostic tests for Covid-19 (RT-PCR or antigenic test).

From this information, it is possible to estimate the number of Covid-19 cases with respiratory signs seen in general practice. These cases represent a majority share of all Covid-19 cases seen in general practice. However, it is important to note that Covid-19 cases without respiratory signs are not included in our estimates (such as those with only isolated ageusia or anosmia).

This indicator provides comparable estimates over time to monitor the dynamics of the epidemic.

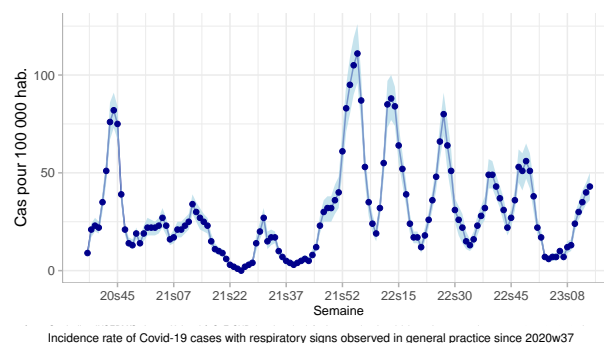
### ARI positivity rates to SARS-CoV-2 (Covid-19) by age groups



Number of ARI cases reported by Sentinelles physicians and SARS-CoV-2 (Covid-19) positivity rate since 2020w37

Last week (**2023w14**), the SARS-CoV-2 (Covid-19) positivity rates of patients consulting for ARI were 4%, 27%, and 44% respectively in the 0-14, 15-64, and 65 and older age groups.

### Estimated incidence of Covid-19 cases with respiratory signs



Last week (**2023w14**), the incidence rate of Covid-19 cases with respiratory signs seen in general practice was estimated at 43 cases per 100,000 population (95% CI [36; 50]), corresponding to 28,608 [24,081; 33,135] new cases of Covid-19 with respiratory signs seen in general practice.

This rate is **stable** compared to the previous week (consolidated data for 2023w13: 40 [34; 45], or 26,435 [22,791; 30,079] new Covid-19 cases with respiratory signs seen in general practice).

### Description of Covid-19 cases with respiratory signs

Since week 2022w39 (26th September, date of the beginning of the virological surveillance), the **446** Covid-19 confirmed cases with respiratory signs sampled by the Sentinel general practitioners and paediatricians had the following characteristics:

- Their median age was 49 years (range from 3 months to 91 years);
- 57% (254/444) were women;
- 19% (79/418) of cases aged 12 years and older were not vaccinated against Covid-19 (no vaccine dose received);
- 31% (120/392) had risk factors for complications;
- None was hospitalized after their consultation (0/363).

### In conclusion

Last week (2023w14), the incidence of Covid-19 cases with respiratory signs seen in general practice was **stable** compared to the previous week, but we can note an increasing trend since 2023w10 (beginning of March) (see graph opposite).

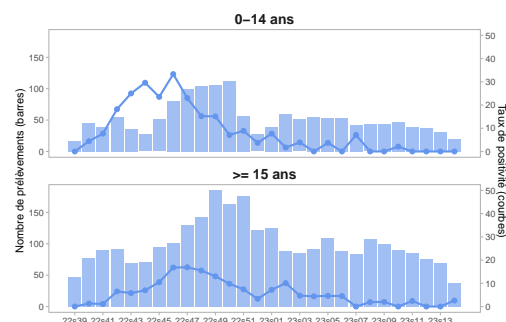
The characteristics of SARS-CoV-2 (Covid-19) positive ARI cases observed since week 2022s21 in general practice remain similar to those observed since the beginning of the pandemic (see graph opposite).

You can find the epidemiological bulletin of Santé publique France with all the surveillance data (ambulatory and hospital) on the Covid-19 pandemic by clicking [here](#).

Observed situation in general practice for the week 14 of the year 2023, from 04/03/2023 to 04/09/2023

## RSV

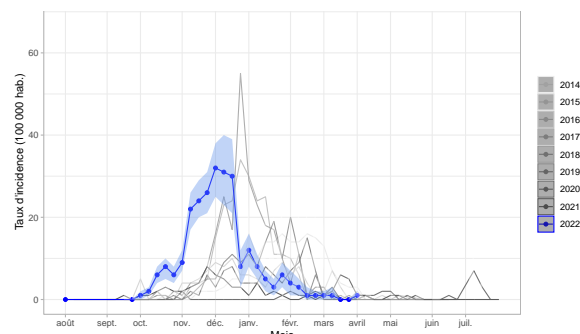
### ARI positivity rates to RSV by age groups



Number of samples and positivity rates to RSV by age groups in ARI patients swabbed by Sentinelles physicians since 2022w39

Last week (**2023w14**), only one RSV case has been detected by the Sentinel physicians. The RSV positivity rates of patients consulting for an ARI and sampled by Sentinel physicians were then 0% in the 0-14 and 3% in the 15 and older age groups.

### Estimated incidence of RSV cases with fever >39



Incidence rate of RSV cases (with fever >39) since 2022w39 (blue) compared to past seasons since 2014 (grey)

Last week (**2023w14**), the incidence rate of RSV cases with fever >39 seen in general practice was stable compared to the previous weeks, and at a similar level of activity compared to past seasons at the same time.

### RSV circulation by region

Last week (**2023w14**), among the 58 tested samples realized by the Sentinel GPs, 1 sample was positive for the respiratory syncytial virus (RSV) in Bretagne (1/8 samples tested, or 13%).

### Estimated incidence of RSV cases seen in general practice

Last week (**2023w14**), the incidence rate of RSV cases seen in general practice was estimated at 3 cases per 100,000 population (95% CI [0; 6]), corresponding to 1,720 [0; 3,744] new cases of RSV seen in general practice.

This rate is **stable** compared to those in recent weeks (consolidated data for 2023w12 and 2023w13 : 0 [0; 0]).

### Description of RSV cases

Since the beginning of virological surveillance in week 2022w39 (26th September), the 340 confirmed RSV cases seen by Sentinel general practitioners and pediatricians had the following characteristics:

- Their median age was 22 years (from 3 months to 96 years);
- 59% (199/337) were women;
- 20% (65/322) had risk factors for complications;
- 0.7% (2/308) were hospitalized at the end of the consultation.

These characteristics are similar to those of positive RSV cases observed in past seasons in general practice (historical data : median age: 3 years; 52% women; 23% with risk factors; 0.6% hospitalized patients).

### In conclusion

Last week (**2023w14**), the incidence of RSV cases among patients consulting for an ARI in general practice was **very low and stable** compared to the previous weeks.

You can find all the bronchiolitis epidemiological data (outpatient and inpatient) in the Public Health France weekly bulletin by clicking [here](#).



Observed situation in general practice for the week 14 of the year 2023, from 04/03/2023 to 04/09/2023

National incidence rates over the last 3 weeks (per 100,000 inhabitants)	2023w14 (unconsolidated) Incidence rate estimations [95% confidence interval]	2023w13 Incidence rate estimations [95% confidence interval]	2023w12 Incidence rate estimations [95% confidence interval]
Acute Respiratory Infection	173 [153 ; 193]	181 [165 ; 197]	195 [178 ; 212]
Acute diarrhea	86 [73 ; 99]	86 [75 ; 97]	96 [85 ; 107]
Chickenpox	28 [20 ; 36]	20 [15 ; 25]	16 [11 ; 21]

Regional incidence rates for the week 2023w14 (per 100,000 inhabitants)	Acute Respiratory Infection Incidence rate estimations [95% confidence interval]	Acute diarrhea Incidence rate estimations [95% confidence interval]	Chickenpox Incidence rate estimations [95% confidence interval]
Auvergne-Rhône-Alpes	182 [123 ; 241]	62 [25 ; 99]	35 [0 ; 74]
Bourgogne-Franche-Comté	140 [67 ; 213]	32 [0 ; 64]	56 [0 ; 114]
Bretagne	147 [80 ; 214]	71 [27 ; 115]	13 [0 ; 34]
Centre-Val de Loire	87 [0 ; 218]	48 [0 ; 141]	9 [0 ; 22]
Corse	105 [23 ; 187]	86 [23 ; 149]	42 [0 ; 102]
Grand Est	319 [223 ; 415]	87 [50 ; 124]	31 [0 ; 78]
Hauts-de-France	139 [62 ; 216]	101 [32 ; 170]	10 [0 ; 29]
Ile-de-France	142 [105 ; 179]	83 [55 ; 111]	12 [3 ; 21]
Normandie	20 [0 ; 51]	75 [0 ; 156]	16 [0 ; 52]
Nouvelle-Aquitaine	137 [85 ; 189]	66 [33 ; 99]	19 [0 ; 38]
Occitanie	157 [106 ; 208]	61 [27 ; 95]	21 [0 ; 42]
Pays de la Loire	96 [29 ; 163]	175 [81 ; 269]	14 [0 ; 32]
Provence-Alpes-Côte d'Azur	257 [142 ; 372]	86 [27 ; 145]	56 [18 ; 94]

## French Sentinel network

**Pierre Louis Institute of Epidemiology and Public Health**

UMR-S 1136 (Inserm - Sorbonne Université)

Phone : +33 144 738 435 | E-mail : [sentinelles@upmc.fr](mailto:sentinelles@upmc.fr)

Since 1984, the "réseau Sentinelles" or Sentinelles network has been a research and health monitoring network in primary care (general medicine and paediatrics) in metropolitan France. The participation of physicians is voluntary. Currently, 559 physicians participate in the continuous surveillance activity (511 general practitioners and 48 paediatricians), allowing the production of weekly epidemiological reports.

**Heads of Sentinel Network** : Olivier Steichen, Thierry Blanchon

**Publication** : Yves Dorléans

**Information system & biostatistics** : Clément Turbelin

**Monitoring manager** : Marion Debin, Caroline Guerrisi

Regional branches	Heads
Auvergne-Rhône-Alpes, Bourgogne-Franche-Comté	Marianne Sarazin
Centre-Val de Loire, Pays de la Loire	Thierry Prazuck
Corse	Alessandra Falchi
PACA	David Darmon
Grand Est	Daouda Niaré
Ile-de-France, Hauts-de-France	Mathilde François
Bretagne, Normandie	Marie Pouquet
Nouvelle-Aquitaine, Occitanie	Maryse Lapeyre-Mestre

[See all the team](#)

## Need more information?

Visit our website :

<https://www.sentiweb.fr/>

## You are a french GP ?

Contact us

<https://www.sentiweb.fr/france/fr/inscrire>

## Envie de participer à la veille sanitaire ?

**covidnet.fr**

Devenez acteur de la surveillance du Covid-19 !

Pas besoin d'être malade pour participer !

Inscrivez-vous sur <https://www.covidnet.fr/>