



Sentinelles

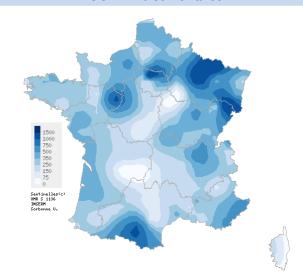




Weekly report on 03/25/2020, 2020w12 (from 03/16/2020 to 03/22/2020)

Acute Respiratory Infection (ARI)

COVID-19 surveillance



Spatial interpolation map of departemental incidence rates

The blue color gradient used above was chosen to be easily visible to all, unlike the usual green-red gradient. As this is the first week of monitoring for this new indicator, the scale chosen could be reviewed in the coming weeks.

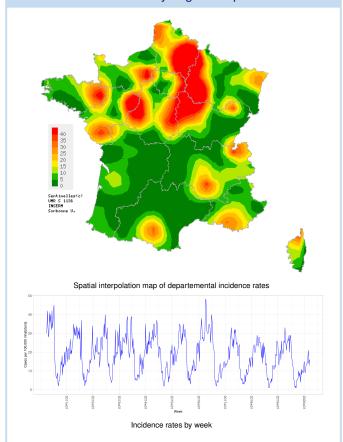
In metropolitan France, last week (2020w12), the incidence rate of ARI seen in consultation (or teleconsultation) of general practice was estimated at 445 cases per 100,000 inhabitants (95% CI [421; 469]).

At the regional level, the highest incidence rates were noted in: Ile-de-France (736 [640; 832]), Grand Est (659 [561; 757]), and Pays de la Loire (472 [336; 608]).

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

Chickenpox

Moderate activity in general practice

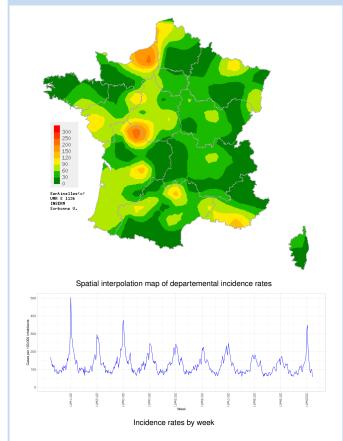


In metropolitan France, last week (2020w12), the incidence rate of Chickenpox seen in general practice was estimated at 13 cases per 100,000 inhabitants (95% CI [9; 17]).

At the regional level, the highest incidence rates were observed in Corse (29 [0; 64]), Pays de la Loire (23 [0; 47]) and Centre-Val de Loire (22 [3; 41]).

Acute diarrhea

Low activity in general practice



In metropolitan France, last week (2020w12), the incidence rate of acute diarrhea seen in general practice was estimated at 58 cases per 100,000 inhabitants (95% CI [49; 67]).

At the regional level, the highest incidence rates were noted in: Normandie (123 [31; 215]), Provence-Alpes-Côte d'Azur (83 [31; 135]) and Pays de la Loire (77 [31; 123]).





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Acute Respiratory Infection (ARI) - COVID-19 Monitoring

Information about COVID-19 surveillance

In collaboration with Public Health France, the National Reference Centre for Respiratory Infections, and the University of Corsica, the Sentinel surveillance of respiratory infections has been adapted to the specific monitoring of COVID-19.

Since 17/03/2020, Sentinel physicians have been monitoring the number of cases of acute respiratory infection (ARI) seen in consultation (or teleconsultation), according to the following case definition: sudden onset of fever (or feeling of fever), and respiratory signs (such as coughing, shortness of breath or a feeling of tightness in the chest).

This bulletin presents data from the first week of ARI surveillance in ambulatory care (general practice and pediatrics).

The data presented are therefore not comparable to those published in the previous weeks on ILI.

These initial figures need to be read with caution and will need to be consolidated in the coming weeks.

ARI incidence rates by age groups

In week 12, the age-specific incidence rates of ARI cases seen in general practice (consultations or teleconsultations) were estimated at :

- 348 cases per 100,000 inhabitants (95% CI [298; 398]) in the 0-14
- 608 [562; 654] in the 15-44
- 461 [414; 508] in the 45-64
- 253 [199; 307] in the 65-74
- 256 [197; 315] in those aged 75 years or older

ARI virological surveillance

In week 12, among the ARI cases seen in consultation by the Sentinel doctors (general practitioners and paediatricians), 116 patients had a nasopharyngeal swab. Of these samples, 16 (13.8%) were positive for the coronavirus SARS-CoV-2 (COVID-19).

These 116 samples were also tested for influenza viruses. Of these, 21 (18.1%) were positive for an influenza virus:

- 10 (8.6%) for influenza A virus type A
 - 1 A(H3N2) virus
 - 9 A viruses not subtyped
- 11 (9.5%) for an influenza B virus
- 4 Victoria lineage B viruses
- 7 viruses B of undetermined lineage

No SARS-CoV-2/influenza viruses co-infection was observed.

Description of COVID-19 confirmed cases seen in primary care

In week 12, the 16 positive cases for SARS-CoV-2 (COVID-19) seen by Sentinelles physicians (general practitioners and paediatricians) had the following characteristics:

- These cases were diagnosed in Grand-Est (n=5), Auvergne-Rhône-Alpes (n=3), Ile-de-France (n=3), Nouvelle-Aquitaine (n=2), Bourgogne-Franche-Comté (n=1), Centre-Val de Loire (n=1), Pays de la Loire (n=1).
- Their median age was 60 years (minimum = 20 years and maximum = 77 years). There were 10 men and 6 women.
- Seven of them had risk factors for complications.
- No hospitalization was requested for these 16 cases at the end of the consultation.
- The most frequently reported clinical signs at the time of consultation were cough (n=16) and fever (n=15).

Estimated incidence of COVID-19 cases seen in general practice

In metropolitan France, last week (2020s12), the incidence rate of ARI cases due to SARS-CoV-2 (COVID-19) seen in general practice consultations was estimated at 64 cases per 100,000 inhabitants (95% CI [43; 84]), which represents 41,836 new cases of COVID-19 (95% CI [28,441; 55,231]) having consulted a general practitioner.

These initial estimates need to be read with caution and will need to be consolidated in the coming weeks.

Additional information

An epidemiological bulletin published by Public Health France includes all the surveillance data (ambulatory and hospital) concerning the COVID-19 epidemic. Find this bulletin by following this link.

You can find more general information on :

the dedicated government website.





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National incidence rates over the last 3 weeks (per 100,000 inhabitants)	2020w12 (unconsolidated) Incidence rate estimations [95% confidence interval]	2020w11 Incidence rate estimations [95% confidence interval]	2020w10 Incidence rate estimations [95% confidence interval]
Acute diarrhea	58 [49; 67]	94 [84 ; 104]	102 [92; 112]
Chickenpox	13 [9; 17]	16 [12; 20]	14 [10 ; 18]
Acute Respiratory Infection	445 [421 ; 469]	-	-

Regional incidence rates for the week 2020w12 (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	420 [350 ; 490]	37 [17; 57]	12 [0; 26]
Bourgogne-Franche-Comté	352 [264 ; 440]	37 [11 ; 63]	12 [0; 26]
Bretagne	300 [232; 368]	32 [11 ; 53]	19 [0; 38]
Centre-Val de Loire	287 [228; 346]	59 [32; 86]	22 [3; 41]
Corse	115 [54; 176]	47 [3; 91]	29 [0; 64]
Grand Est	659 [561 ; 757]	47 [20; 74]	17 [0; 34]
Hauts-de-France	385 [311 ; 459]	50 [23; 77]	20 [4; 36]
Ile-de-France	736 [640 ; 832]	40 [22; 58]	10 [0; 21]
Normandie	451 [299; 603]	123 [31 ; 215]	13 [0; 28]
Nouvelle-Aquitaine	230 [173 ; 287]	74 [40 ; 108]	4 [0; 11]
Occitanie	266 [208; 324]	50 [21 ; 79]	3 [0;8]
Pays de la Loire	472 [336 ; 608]	77 [31 ; 123]	23 [0; 47]
Provence-Alpes-Côte d'Azur	361 [265; 457]	83 [31 ; 135]	19 [0; 45]

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French Sentinel network

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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, 678 physicians participate in the continuous surveillance activity (599 general practitioners and 79 paediatricians), allowing the production of weekly epidemiological reports.

Heads of Sentinel Network: Thomas Hanslik, Thierry Blanchon

Publication: Yves Dorléans

Information systems & biostatistics : Corentin Hervé, Titouan Launay, Cécile

Souty, Clément Turbelin, Ana Vilcu

Monitoring manager: Louise Rossignol, Caroline Guerrisi

Regional branch	Heads & Epidemiologists/Animators	
Auvergne-Rhône-Alpes,	Marianne Sarazin	
Bourgogne-Franche-Comté	Caroline Liotard	
Centre-Val de Loire,	Thiores December	
Pays de la Loire,	Thierry Prazuck	
Bretagne	Charly Kengne-Kuetche, Romain Pons	
Dietagne		
Corse. PACA	Alessandra Falchi	
Ouise, i AOA	Shirley Masse, Natacha Villechenaud	
Grand Est	Daouda Niaré	
lle-de-France,	Mathilde François	
Hauts-de-France	Camille Bonnet, Jennifer Morice	
Nouvelle-Aquitaine, Occitanie	Marion Debin	

Envie de participer à la veille sanitaire?



Devenez acteur de la surveillance de la grippe! Pas besoin d'être malade pour participer! Inscrivez-vous sur https://www.grippenet.fr/