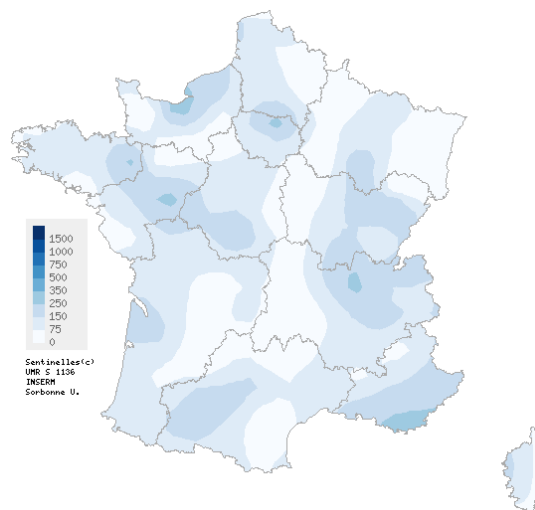


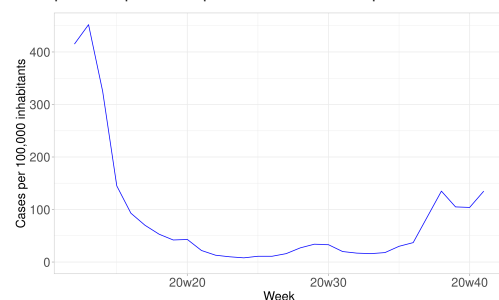
Observed situation for the week 41 of the year 2020, from 10/05/2020 to 10/11/2020

## Acute Respiratory Infection (ARI)

Increasing activity in general practice



Spatial interpolation map of incidence rates at department level

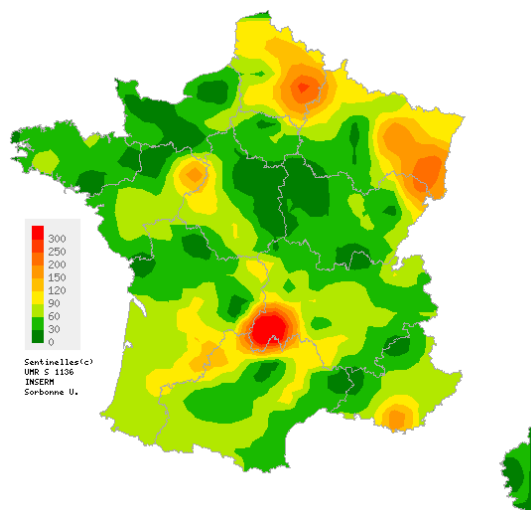


**In metropolitan France**, last week (2020w41), the incidence rate of ARI consulting (or teleconsulting) in general practice was estimated at 135 cases per 100,000 inhabitants (95% CI [119; 151]). This estimate is increasing compared to week 2020w40 (consolidated data : 104 [92; 116]).

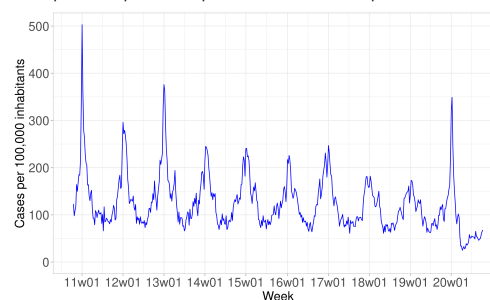
Complete national and regional data are available on the last page of this bulletin.

## Acute diarrhea

Low activity in general practice



Spatial interpolation map of incidence rates at department level

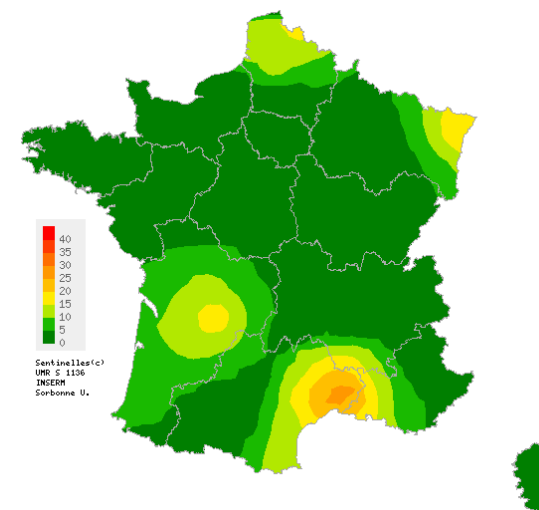


**In metropolitan France**, last week (2020w41), the incidence rate of acute diarrhea seen in general practice was estimated at 68 cases per 100,000 inhabitants (95% CI [57; 79]). This estimate is stable compared to week 2020w40 (consolidated data : 64 [55; 73]).

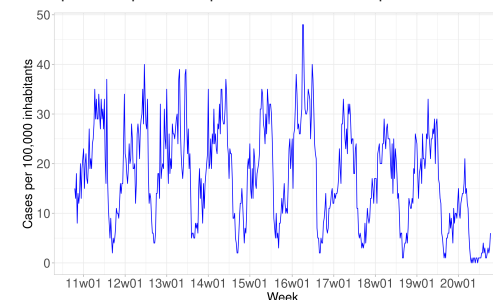
Complete national and regional data are available on the last page of this bulletin.

## Chickenpox

Low activity in general practice



Spatial interpolation map of incidence rates at department level



**In metropolitan France**, last week (2020w41), the incidence rate of Chickenpox seen in general practice was estimated at 6 cases per 100,000 inhabitants (95% CI [3; 9]). This estimate is stable compared to week 2020w40 (consolidated data : 3 [1; 5]).

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

Observed situation for the week 41 of the year 2020, from 10/05/2020 to 10/11/2020

## Acute Respiratory Infection (ARI) - Additional Clinical and Virological Data

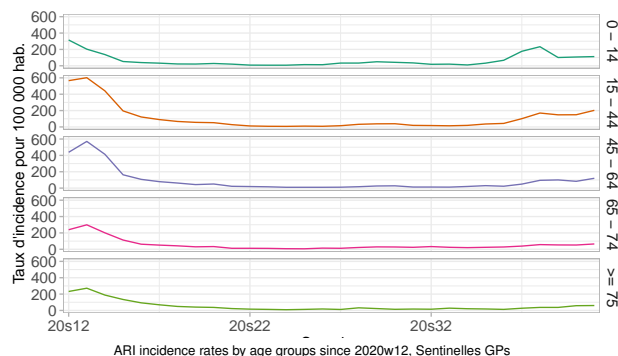
### Information about the monitoring of respiratory infections

Since March 17th 2020, the surveillance of respiratory infections has been extended from the syndromic and virological monitoring of "influenza-like illness" to that of "acute respiratory infections (ARI)". This new indicator allows the joint monitoring of seasonal respiratory viruses (influenza, RSV, rhinovirus, metapneumovirus) and SARS-CoV-2 (COVID-19).

Sentinelles GPs report the number of ARI patients seen in consultation (or teleconsultation), according to the following definition : sudden onset of fever (or feeling of fever) and respiratory signs. Virological surveillance is conducted by a sample of Sentinel GPs and paediatricians, in complement to the ARI syndromic surveillance.

This surveillance is implemented in collaboration with Santé Publique France, the National Reference Center (CNR) for respiratory infections (including influenza) (Pasteur Institute, Paris; Associated Center : Hospices Civils de Lyon), and the virology laboratory of the University of Corsica.

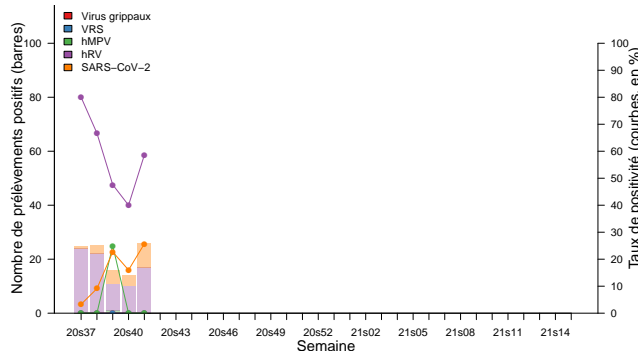
### ARI incidence rates by age groups Slight increasing activity



In week 2020s41, the highest increase in incidence rate is found in the 15-64 age group.

### ARI virological surveillance

Circulation of rhinovirus and SARS-CoV-2(COVID-19)



Since week 2020w37, among the ARI cases seen in consultation, 145 patients have had a nasopharyngeal swab tested for the following respiratory viruses : SARS-CoV-2 (COVID-19), influenza viruses, rhinovirus (hRV), respiratory syncytial virus (RSV) and metapneumovirus (hMPV). Of these, 83 (60.1%) were positive for the rhinovirus, 22 (15.2%) were positive for the SARS-CoV-2 (COVID-19) and none was positive for influenza viruses.

On week 2020w41, 35 patients had a nasopharyngeal swab tested for the various respiratory viruses.

Of these :

- 17/29 (58.6%) were positive for hRV (consolidated data in 2020w40 : 10/25 (40.0%)).
- 9/35 (25.7%) were positive for SARS-CoV-2 (COVID-19) (consolidated data in 2020w40 : 4/25 (16.0%)).
- None were positive for influenza viruses (0/30 (0.0%)), for RSV (0/35 (0.0%)) or the metapneumovirus (0/20 (0.0%)).

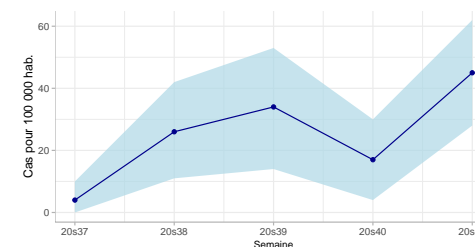
No viral co-infection has been observed.

### Description of COVID-19 confirmed cases seen in primary care

Since week 2020w37, the 22 (15.2%) positive cases for SARS-CoV-2 (COVID-19) seen by Sentinelles physicians (GPs and paediatricians) had the following characteristics :

- Their median age was 50 years (from 1 year and 3 months to 88 years). There were 13 men and 9 women.
- 4/22 (18.2%) of them had risk factors for complications.
- Hospitalization at the end of the consultation was requested for one case.

### Estimated incidence of COVID-19 cases seen in general practice



ARI incidence rate due to SARS-CoV-2 (COVID-19) observed in general practice since 2020w37

In week 2020w41, the ARI incidence rate due to SARS-CoV-2 (COVID-19) seen in general practice was estimated at 45 cases per 100,000 inhabitants (95% CI [28 ; 62]), representing 29 616 [18 625 ; 40 607] new cases of COVID-19 seen by a GP, increasing compared to previous weeks.

*These estimates need to be read carefully and will need to be consolidated in the coming weeks.*

Observed situation for the week 41 of the year 2020, from 10/05/2020 to 10/11/2020

National incidence rates over the last 3 weeks (per 100,000 inhabitants)	2020w41 (unconsolidated) Incidence rate estimations [95% confidence interval]	2020w40 Incidence rate estimations [95% confidence interval]	2020w39 Incidence rate estimations [95% confidence interval]
Acute Respiratory Infection	135 [119 ; 151]	104 [92 ; 116]	105 [93 ; 117]
Acute diarrhea	68 [57 ; 79]	64 [55 ; 73]	58 [49 ; 67]
Chickenpox	6 [3 ; 9]	3 [1 ; 5]	2 [1 ; 3]

Regional incidence rates for the week 2020w41 (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	178 [132 ; 224]	75 [44 ; 106]	0 [0 ; 0]
Bourgogne-Franche-Comté	145 [29 ; 261]	38 [6 ; 70]	0 [0 ; 0]
Bretagne	142 [70 ; 214]	43 [15 ; 71]	2 [0 ; 6]
Centre-Val de Loire	115 [65 ; 165]	49 [20 ; 78]	7 [0 ; 16]
Corse	130 [43 ; 217]	16 [0 ; 47]	0 [0 ; 0]
Grand Est	51 [27 ; 75]	120 [65 ; 175]	11 [0 ; 41]
Hauts-de-France	87 [50 ; 124]	134 [78 ; 190]	19 [2 ; 36]
Ile-de-France	174 [113 ; 235]	30 [13 ; 47]	0 [0 ; 0]
Normandie	137 [67 ; 207]	23 [0 ; 52]	0 [0 ; 0]
Nouvelle-Aquitaine	100 [55 ; 145]	53 [24 ; 82]	8 [0 ; 20]
Occitanie	106 [67 ; 145]	23 [3 ; 43]	19 [3 ; 35]
Pays de la Loire	142 [67 ; 217]	89 [18 ; 160]	0 [0 ; 0]
Provence-Alpes-Côte d'Azur	211 [109 ; 313]	98 [26 ; 170]	0 [0 ; 0]

## 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, 756 physicians participate in the continuous surveillance activity (680 general practitioners and 76 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, Bourgogne-Franche-Comté	<b>Marianne Sarazin</b> Caroline Liotard
Centre-Val de Loire, Pays de la Loire, Bretagne	<b>Thierry Prazuck</b> Charly Kengne-Kuetché, Marie Pouquet
Corse, PACA	<b>Alessandra Falchi</b> Shirley Masse, Louis Longo
Grand Est	Daouda Niaré
Ile-de-France, Hauts-de-France	<b>Mathilde François</b> Camille Bonnet, Hayat Benamar, Morgane Swital
Normandie	Arthur Rakover
Nouvelle-Aquitaine, Occitanie	Marion Debin, Yves Dorléans

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