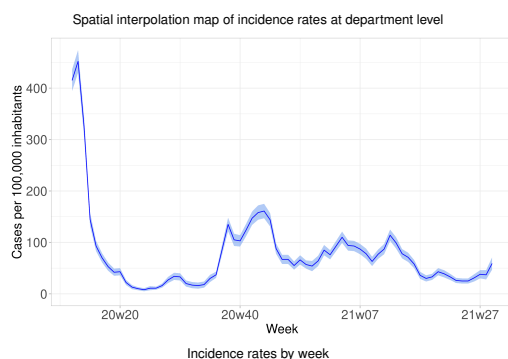
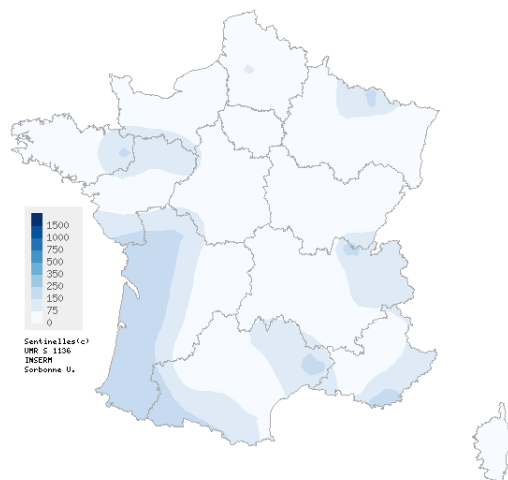


Observed situation for the week 29 of the year 2021, from 07/19/2021 to 07/25/2021

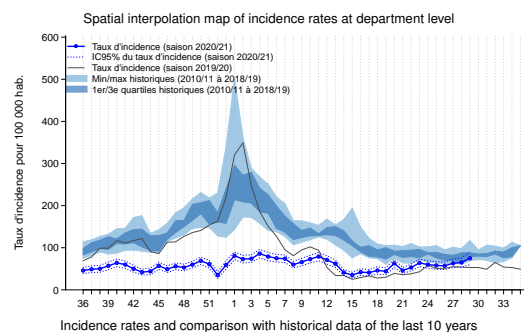
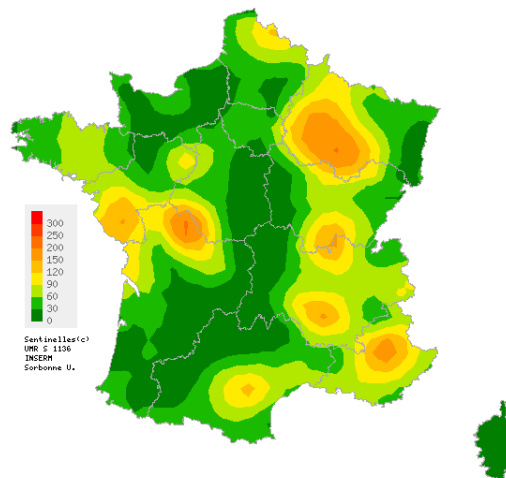
Acute Respiratory Infection (ARI) (COVID-19, Influenza and other respiratory viruses) Increasing activity in general practice



In metropolitan France, last week (2021w29), the incidence rate of ARI consulting (or teleconsulting) in general practice was estimated at 59 cases per 100,000 inhabitants (95% CI [47 ; 71]). This rate is increasing compared to week 2021w28 (consolidated data: 37 [28 ; 46]).

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

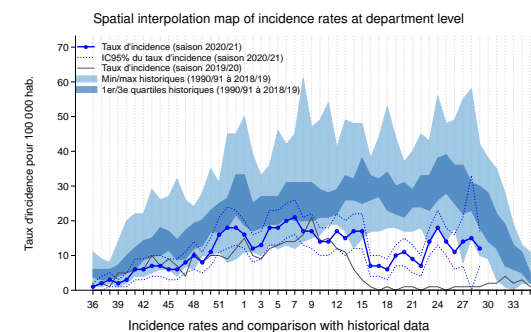
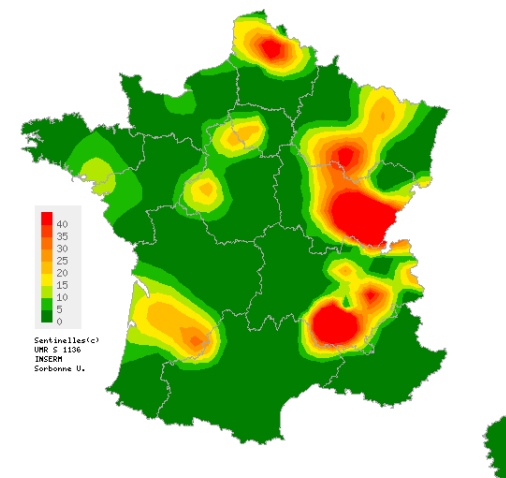
Acute diarrhea Low activity in general practice



In metropolitan France, last week (2021w29), the incidence rate of acute diarrhea seen in general practice was estimated at 75 cases per 100,000 inhabitants (95% CI [60 ; 90]). This rate is slightly increasing compared to week 2021w28 (consolidated data: 65 [54 ; 76]) with a similar activity level compared to those usually observed in this period.

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

Chickenpox Low activity in general practice



In metropolitan France, last week (2021w29), the incidence rate of Chickenpox seen in general practice was estimated at 12 cases per 100,000 inhabitants (95% CI [7 ; 17]). This rate is stable compared to week 2021w28 (consolidated data: 15 [0 ; 33]) and with 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.

Observed situation for the week 29 of the year 2021, from 07/19/2021 to 07/25/2021

ARI - COVID-19, INFLUENZA and other respiratory viruses

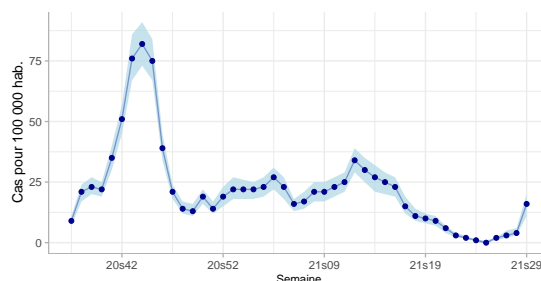
Modality of ARI monitoring by the Sentinelles Network

Since March 17th 2020, Sentinel general practitioners (GPs) report the number of cases of acute respiratory infection (ARI) seen in consultation (or teleconsultation), according to the following definition: sudden onset of fever (or feeling of fever), and respiratory signs. For each reported case of ARI, descriptive data are collected, including the results of antigenic or PCR tests for COVID-19 performed by patients in city laboratories. This clinical surveillance is complemented by virological surveillance of ARI with specific samples swabbed by Sentinel GPs and pediatricians, in order to identify the different respiratory viruses (including influenza) circulating in the population.

Until week 2021w10, the incidence of ARI cases due to COVID-19 seen by GPs was estimated by crossing the data from the Sentinel's clinical and virological surveillances. Due to the various changes in management linked to the COVID-19 pandemic, the data from the Sentinel virological samples are no longer sufficient to constitute a representative random sample, and therefore to accurately estimate the SARS-CoV-2 positivity rate among ARI cases. Henceforth, this positivity rate (presented in the box below) is estimated solely from the clinical surveillance (descriptive data transmitted by Sentinel physicians).

ARI surveillance 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 virology laboratory of the University of Corsica.

ARI cases due to COVID-19 in general practice Significant increasing activity



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

Estimated incidence of ARI cases due to COVID-19 seen in consultation in general practice

In week 2021w29, the incidence rate of ARI cases due to SARS-CoV-2 (COVID-19) seen in general practice was estimated at 16 cases per 100,000 population (95% CI [11; 20]), corresponding to 10,245 [7,053; 13,437] new cases of COVID-19 seen in general practice. This rate is significantly increasing compared to the previous week (consolidated data for 2021w28 : 4 [3; 6]) representing 2,818 [1,859; 3,777] new ARI cases due to COVID-19 seen in general practice).

Description of confirmed cases of COVID-19 seen in general practice

Since week 2020w37 (early September), the 3,531 (28.1%) positive cases for SARS-CoV-2 (COVID-19) seen by Sentinelles physicians had the following characteristics :

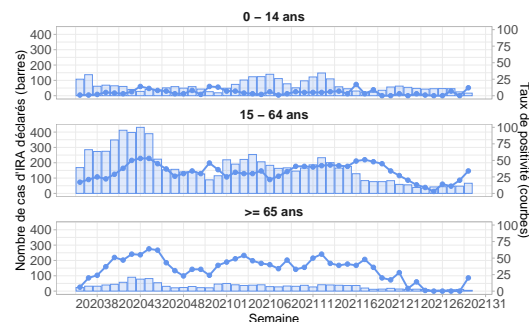
- Their median age was 46 years (from 1 year to 100 years). There were 42.6% (1,483/3,479) of men and 57.4% (1,996/3,479) of women.
- 26.7% (888/3,331) of them had risk factors for complications.
- 5.3% (177/3,320) of the cases were hospitalized following the consultation.

Circulation of respiratory viruses

Virological surveillance conducted by Sentinel general practitioners and pediatricians allows the characterization and monitoring of epidemics due to different respiratory viruses: SARS-CoV-2 (COVID-19), influenza viruses, respiratory syncytial virus (RSV), rhinovirus and metapneumovirus. It is based on the observation and sampling of patients with acute respiratory infection (ARI), defined as an abrupt onset of fever or fever-like illness and respiratory signs.

During the 2020/2021 season, this surveillance took place between early September (2020w37) and mid-June (2021w24). It showed the exceptional absence of influenza virus circulation and the unusually delayed occurrence of the RSV epidemic, among others. This virological surveillance will start again in early September 2021 for the monitoring of the 2021/2022 winter season.

Positivity rates for SARS-CoV-2 among ARI cases seen in general practice



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

In week 2021w29, the SARS-CoV-2 positivity rate of patients consulting for ARI was 12%, 34%, and 20%, respectively, in the 0-14, 15-64, and 65 and older age groups. These estimates are increasing in all age groups.

Observed situation for the week 29 of the year 2021, from 07/19/2021 to 07/25/2021

National incidence rates over the last 3 weeks (per 100,000 inhabitants)	2021w29 (unconsolidated) Incidence rate estimations [95% confidence interval]	2021w28 Incidence rate estimations [95% confidence interval]	2021w27 Incidence rate estimations [95% confidence interval]
Acute Respiratory Infection	59 [47 ; 71]	37 [28 ; 46]	38 [30 ; 46]
Acute diarrhea	75 [60 ; 90]	65 [54 ; 76]	63 [53 ; 73]
Chickenpox	12 [7 ; 17]	15 [0 ; 33]	14 [7 ; 21]

Regional incidence rates for the week 2021w29 (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	47 [24 ; 70]	71 [39 ; 103]	21 [5 ; 37]
Bourgogne-Franche-Comté	0 [0 ; 0]	77 [16 ; 138]	23 [0 ; 50]
Bretagne	79 [17 ; 141]	55 [19 ; 91]	4 [0 ; 12]
Centre-Val de Loire	10 [0 ; 24]	22 [1 ; 43]	11 [0 ; 27]
Corse	17 [0 ; 47]	0 [0 ; 0]	0 [0 ; 0]
Grand Est	47 [5 ; 89]	63 [30 ; 96]	11 [0 ; 28]
Hauts-de-France	38 [1 ; 75]	103 [38 ; 168]	17 [0 ; 44]
Ile-de-France	39 [16 ; 62]	50 [22 ; 78]	10 [0 ; 20]
Normandie	2 [0 ; 7]	16 [0 ; 32]	2 [0 ; 8]
Nouvelle-Aquitaine	127 [65 ; 189]	60 [3 ; 117]	9 [0 ; 21]
Occitanie	69 [34 ; 104]	56 [24 ; 88]	0 [0 ; 0]
Pays de la Loire	56 [0 ; 114]	103 [29 ; 177]	3 [0 ; 11]
Provence-Alpes-Côte d'Azur	78 [13 ; 143]	73 [13 ; 133]	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, 693 physicians participate in the continuous surveillance activity (646 general practitioners and 47 paediatricians), allowing the production of weekly epidemiological reports.

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Publication : Yves Dorléans

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Centre-Val de Loire, Pays de la Loire, Bretagne	Thierry Prazuck Charly Kengne-Kuetché, Marie Pouquet, Morgane Swital
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