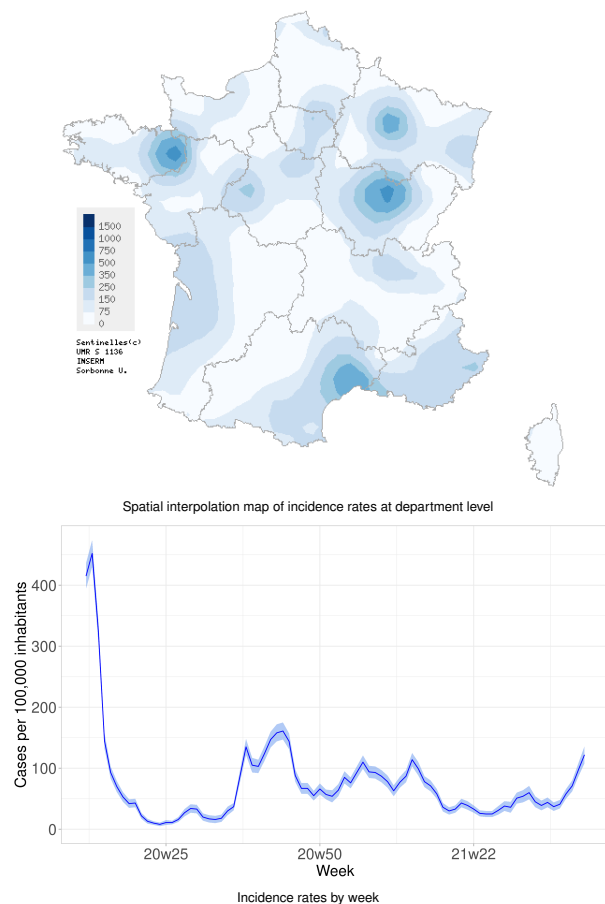


Observed situation for the week 40 of the year 2021, from 10/04/2021 to 10/10/2021

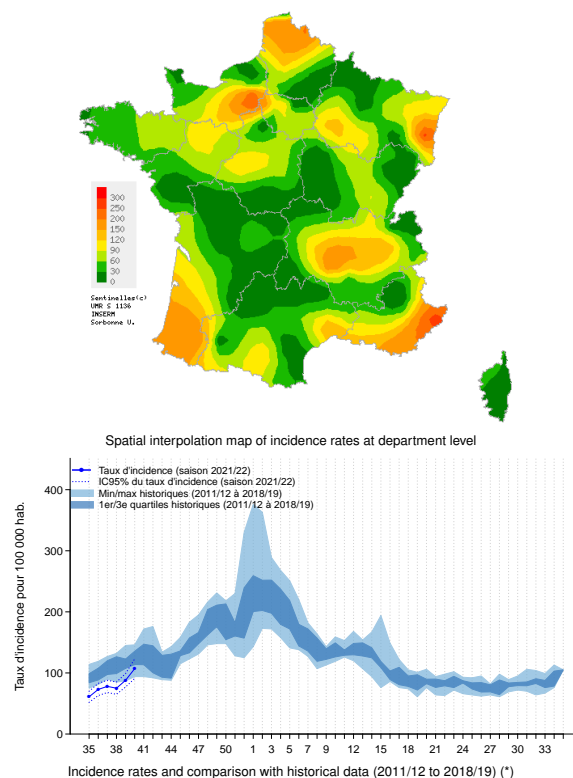
Acute Respiratory Infection (ARI) (COVID-19, Influenza and other respiratory viruses) Moderate activity in general practice



In metropolitan France, last week (2021w40), the incidence rate of ARI consulting (or teleconsulting) in general practice was estimated at 122 cases per 100,000 inhabitants (95% CI [108; 136]). This rate has been increasing since the beginning of September (consolidated data 2021s39: 97 [86; 108]).

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

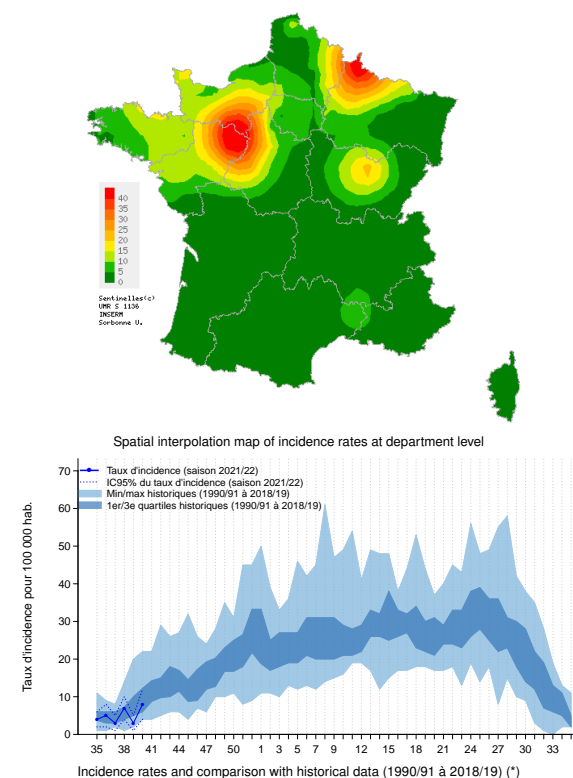
Acute diarrhea Low to moderate activity in general practice



In metropolitan France, last week (2021w40), the incidence rate of acute diarrhea seen in general practice was estimated at 107 cases per 100,000 inhabitants (95% CI [91 ; 123]). This rate is increasing compared to week 2021w39 (consolidated data: 88 [77 ; 99]) with low level of activity compared to those usually observed in this period. Complete national and regional data are available on the last page of this bulletin.

(*) As a result of the locks-down and barrier measures implemented during the COVID-19 pandemic, the incidence of acute diarrhea was significantly modified in 2019/20 and 2020/21. Therefore, these seasons are not included in the referent historical data presented here. The full data set (including 2019/20 and 2020/21) is available at www.sentiweb.fr/?lang=en.

Chickenpox Low activity in general practice



In metropolitan France, last week (2021w40), the incidence rate of Chickenpox seen in general practice was estimated at 8 cases per 100,000 inhabitants (95% CI [4 ; 12]). This rate is slightly increasing compared to week 2021w39 (consolidated data: 3 [1 ; 5]) and with an activity level close to those usually observed in this period. Complete national and regional data are available on the last page of this bulletin.

(*) As a result of the locks-down and barrier measures implemented during the COVID-19 pandemic, the incidence of chickenpox was significantly modified in 2019/20 and 2020/21. Therefore, these seasons are not included in the referent historical data presented here. The full data set (including 2019/20 and 2020/21) is available at www.sentiweb.fr/?lang=en.

Observed situation for the week 40 of the year 2021, from 10/04/2021 to 10/10/2021

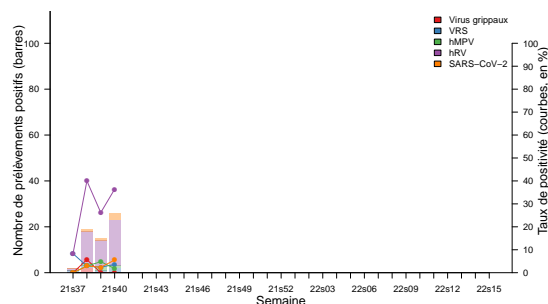
ARI - COVID-19, INFLUENZA and other respiratory viruses

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 (SARS-CoV-2 (COVID-19), influenza viruses, respiratory syncytial virus (RSV), rhinovirus (hRV), and metapneumovirus (hMPV)) circulating in the population.

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.

Circulation of respiratory viruses



Positive swabs and positivity rate of the tested respiratory viruses among ARI cases swabbed by Sentinelles physicians (GPs and pediatricians) since week 2020w37

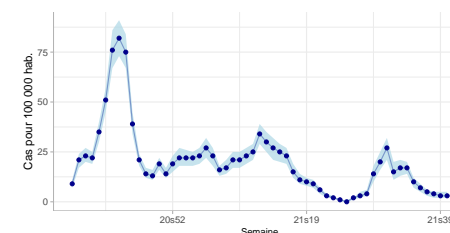
Since week 2021w37 (September 13th 2021), 144 patients with ARI seen in GPs and paediatric consultations have been swabbed as part of the Sentinel surveillance (from saliva swabs). These swabs are tested for various respiratory viruses, including SARS-CoV-2 (COVID-19) and influenza viruses.

Regarding influenza, two samples have been tested positive for influenza viruses since the beginning of the surveillance. Both of them were detected for influenza A viruses (not sub-typed) and were isolated in week 2021w38 (mid-september).

In week 2021w40, 55 patients with ARI seen in GPs and paediatric consultations had been collected:

- 3/55 (5.5%) were positive for **SARS-CoV-2 (COVID-19)** (consolidated data in 2021w39: 1/42 (2.4%)).
- None were positive for **influenza virus** (0/55 tested) (consolidated data for 2021w39: 0/42 tested).
- 20/55 (36.4%) were positive for **rhinovirus (hRV)** (consolidated data in 2021w39: 11/42 (26.2%)).
- 2/55 (3.6%) were positive for **respiratory syncytial virus (RSV)** (consolidated data in 2021w39: 1/42 (2.4%)).
- 1/55 (1.8%) was positive for **metapneumovirus (hMPV)** (consolidated data in 2021w39: 2/42 (4.8%)).

ARI cases due to COVID-19 in general practice Stable activity



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

In week 2021w40, the incidence rate of ARI cases due to SARS-CoV-2 (COVID-19) seen in general practice was estimated at 3 cases per 100,000 population (95% CI [2; 5]), corresponding to 2,181 [1,187; 3,175] new cases of COVID-19 seen in general practice. This rate is stable compared to those in recent weeks (consolidated data for 2021w39 : 3 [2; 5], representing 2,274 [1,425; 3,069] new cases of ARI due to COVID-19 seen in general practice).

To conclude

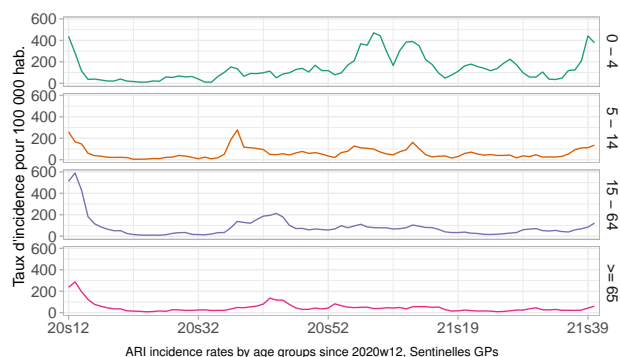
The observed increase in ARI activity continues (see page 1). This may be explained by the circulation of other respiratory viruses than SARS-CoV-2 (COVID-19).

According to the samples provided by Sentinel physicians, in this beginning of season, we observe the circulation of rhinovirus (hRV) mainly, but also of respiratory syncytial virus (RSV) and metapneumovirus (hMPV), as well as the detection of two influenza A viruses (not subtyped) in week 38.

The implementation of ARI virological surveillance for the 2021/2022 season at the Sentinel Network is still ongoing. More detailed descriptions of this surveillance will be presented in the coming weeks.

ARI incidence rates by age groups

Significant increasing activity in all age groups



ARI incidence rates by age groups since 2020w12, Sentinelles GPs

In week 2021s39, incidence rates increase in all age groups, except in the 0-4 age group, compared to the previous week.

Observed situation for the week 40 of the year 2021, from 10/04/2021 to 10/10/2021

| National incidence rates over the last 3 weeks (per 100,000 inhabitants) | 2021w40 (unconsolidated) Incidence rate estimations [95% confidence interval] | 2021w39 Incidence rate estimations [95% confidence interval] | 2021w38 Incidence rate estimations [95% confidence interval] |
|---|---|--|--|
| Acute Respiratory Infection | 122 [108 ; 136] | 97 [86 ; 108] | 71 [62 ; 80] |
| Acute diarrhea | 107 [91 ; 123] | 88 [77 ; 99] | 75 [65 ; 85] |
| Chickenpox | 8 [4 ; 12] | 3 [1 ; 5] | 7 [4 ; 10] |

| Regional incidence rates for the week 2021w40 (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 | 93 [56 ; 130] | 102 [66 ; 138] | 0 [0 ; 2] |
| Bourgogne-Franche-Comté | 195 [86 ; 304] | 36 [0 ; 73] | 9 [0 ; 27] |
| Bretagne | 260 [169 ; 351] | 57 [20 ; 94] | 7 [0 ; 17] |
| Centre-Val de Loire | 151 [78 ; 224] | 71 [24 ; 118] | 12 [0 ; 34] |
| Corse | 60 [0 ; 125] | 30 [0 ; 72] | 0 [0 ; 0] |
| Grand Est | 105 [49 ; 161] | 100 [54 ; 146] | 9 [0 ; 20] |
| Hauts-de-France | 81 [31 ; 131] | 152 [94 ; 210] | 2 [0 ; 6] |
| Ile-de-France | 135 [97 ; 173] | 83 [59 ; 107] | 9 [1 ; 17] |
| Normandie | 38 [12 ; 64] | 89 [35 ; 143] | 12 [0 ; 31] |
| Nouvelle-Aquitaine | 98 [57 ; 139] | 69 [32 ; 106] | 0 [0 ; 0] |
| Occitanie | 147 [96 ; 198] | 64 [33 ; 95] | 2 [0 ; 7] |
| Pays de la Loire | 72 [16 ; 128] | 46 [0 ; 96] | 23 [1 ; 45] |
| Provence-Alpes-Côte d'Azur | 192 [120 ; 264] | 158 [94 ; 222] | 0 [0 ; 3] |

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, 658 physicians participate in the continuous surveillance activity (613 general practitioners and 45 paediatricians), allowing the production of weekly epidemiological reports.

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| Normandie | Pol Prevot-Monsacré |
| Nouvelle-Aquitaine, Occitanie | Marion Debin, Yves Dorléans |

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