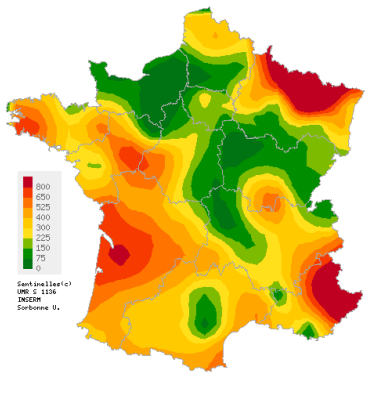


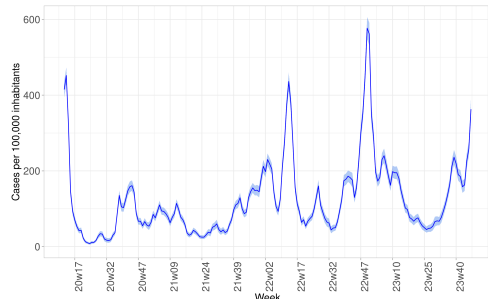
Observed situation in general practice for the week 47 of the year 2023, from 11/20/2023 to 11/26/2023

### Acute Respiratory Infection (ARI)

Covid-19, Influenza and other respiratory viruses  
Moderate to high activity in general practice



Spatial interpolation map of incidence rates at department level



Incidence rates by week

In mainland France, last week (2023w47), the incidence rate of ARI cases consulting in general practice was estimated at **363 cases per 100,000 population (95% CI [337; 389])**.

Subject to future consolidation of data, this rate is **sharply increasing** compared to the previous week (consolidated data for 2023w46: 258 [239; 277]).

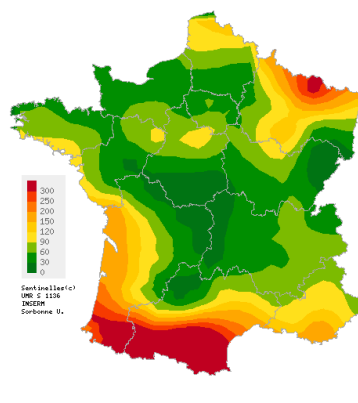
**You will find more detailed information on ARI on page 2, and on influenza, Covid-19 and RSV, see page 3.**

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

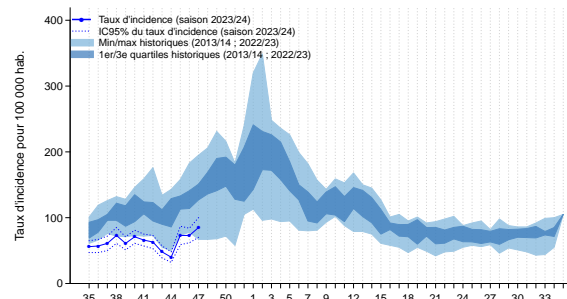
ARI are caused by a variety of respiratory viruses including SARS-CoV-2 (Covid-19), influenza viruses, and other respiratory viruses such as RSV, rhinovirus and metapneumovirus. The purpose of ARI surveillance is to monitor outbreaks of these viruses.

### Acute diarrhea

Low activity in general practice



Spatial interpolation map of incidence rates at department level



Incidence rates and comparison with historical data (\*)

In mainland France, last week (2023w47), the incidence rate of acute diarrhea cases seen in general practice was estimated at **85 cases per 100,000 population (95% CI [70 ;100])**.

Subject to future consolidation of data, this rate is **stable** compared to the previous week (consolidated data for 2023w46: 73 [62 ;84]) and corresponds to a **low activity level** compared to those usually observed at this time of the year.

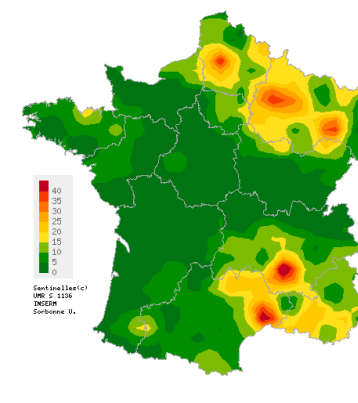
Complete national and regional data are available on the last page of this bulletin.

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

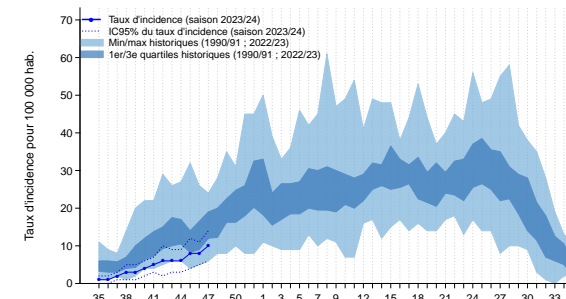
(\*) Incidences of acute diarrhea were greatly reduced entre mars 2020 et août 2021 by containment and sanitary measures to control the Covid-19 pandemic. They are not included in historical comparisons.

### Chickenpox

Low activity in general practice



Spatial interpolation map of incidence rates at department level



Incidence rates and comparison with historical data (\*)

In mainland France, last week (2023w47), the incidence rate of Chickenpox cases seen in general practice was estimated at **10 cases per 100,000 population (95% CI [6; 14])**.

Subject to future consolidation of data, this rate is **stable** compared to the previous week (consolidated data for 2023w46: 8 95% CI [5; 11]) and corresponds to a **low activity level** compared to those usually observed at this time of the year.

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 47 of the year 2023, from 11/20/2023 to 11/26/2023

## Acute respiratory infection (ARI) - Additional data

### 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 **SARS-CoV-2 (COVID-19)**, **respiratory syncytial virus (RSV)**, **influenza viruses**, **rhinovirus** and **metapneumovirus**.

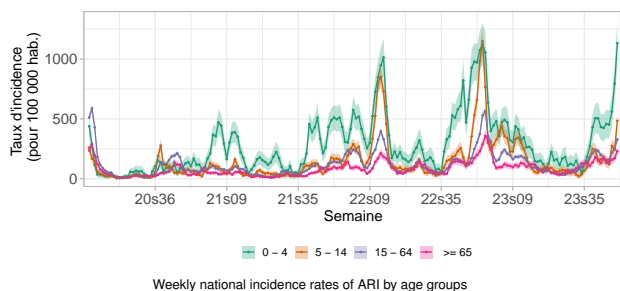
In order to carry out this surveillance, Sentinel general practitioners have been reporting the number of cases of acute respiratory infection (ARI) seen in consultation (or teleconsultation), according to the following definition: **sudden onset of fever (or feeling of fever) and respiratory signs**.

Descriptive data are also collected for each patient, including the results of diagnostic tests for Covid-19 (RT-PCR or antigenic test).

**Virological surveillance** is also carried out by Sentinel general practitioners and pediatricians, who take weekly samples from patients consulting for an ARI, in order to identify different respiratory viruses and monitor their circulation.

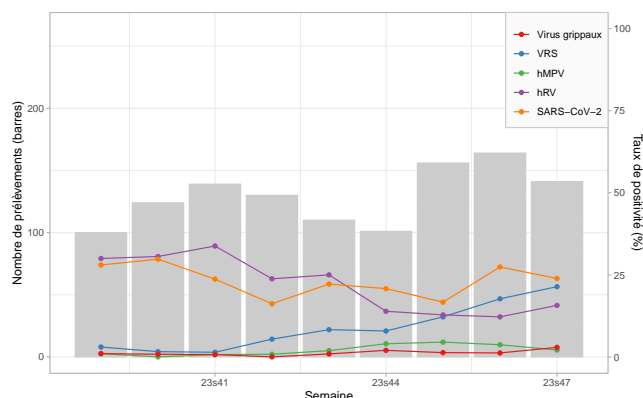
From this clinical and virological information, it is possible to estimate the number of cases of **Covid-19**, **influenza virus** and **VRS** among ARI cases seen in **general medical consultations**.

### ARI incidence rates by age groups



Last week (2023w47), subject to future data consolidation, incidence rates were **increasing** in all age groups and particularly among the **5-14 and 15-64 age groups** compared to the previous week.

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



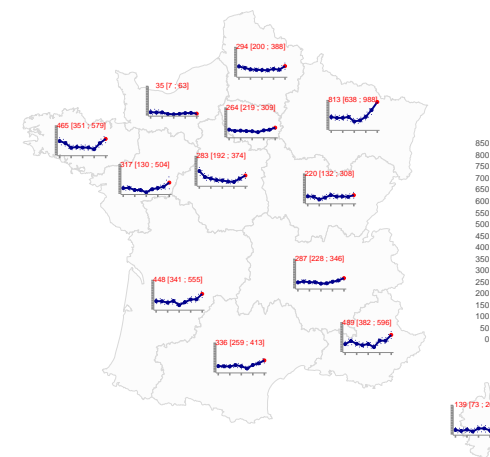
Number of swabs and positivity rate of the tested respiratory viruses among ARI cases swabbed by Sentinelles physicians (GPs and pediatricians) since week 2023w39

This season, **259** general practitioners and pediatricians are taking part in the ARI virological surveillance.

Last week (2023w47), **141 patients** presenting an ARI and seen in general practice or pediatric consultations were tested. Of these, **88 (62%) were positive** for at least one of the viruses tested, broken down as follows:

- **SARS-CoV-2 (Covid-19)** : 33/138 (24%)(consolidated data for 2023w46: 45/164 (27%));
- **Respiratory syncytial virus (RSV)** : 30/140 (21%) (consolidated data for 2023w46: 29/164 (18%));
- **Rhinovirus (hRV)** : 22/140 (16%) (consolidated data for 2023w46: 20/164 (12%));
- **Influenza viruses** : 4/140 (3%) (consolidated data for 2023w46: 2/164 (1%));
- **Métapneumovirus (hMPV)**: 3/140 (2%) (consolidated data for 2023w46: 6/164 (4%).

### ARI incidence rates by regions



Weekly ARI incidence rates by regions over the last nine weeks

### In conclusion

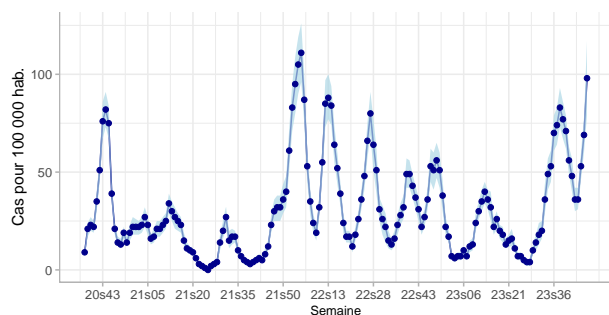
Last week (2023w47), subject to future data consolidation, the incidence of ARI cases seen in general practice was **increasing** in all age groups and most regions compared to the previous week (see graph opposite).

The ARI cases observed the past week (2023w47) in general practice were mainly linked to the concomitant circulation of the **SARS-CoV-2 (Covid-19)**, the **respiratory syncytial virus (RSV)** and the **rhinovirus (hRV)** (see graph opposite).

Observed situation in general practice for the week 47 of the year 2023, from 11/20/2023 to 11/26/2023

## COVID-19 and INFLUENZA

### Covid-19



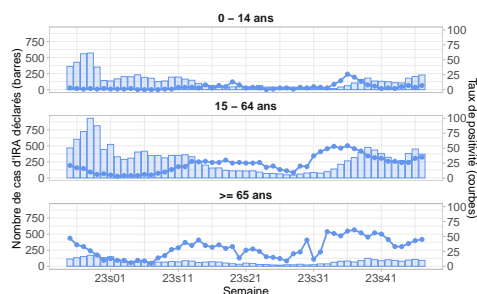
Incidence rate of Covid-19 cases with respiratory signs observed in general practice since 2020w37

Last week (2023w47), the incidence rate of Covid-19 cases seen in general practice for acute respiratory infection was estimated at **98 cases per 100,000 population** (95% CI [79; 117]), corresponding to 65,051 [52,388; 77,714] new cases.

Subject to future data consolidation, this rate is **increasing** compared to the previous week (consolidated data for 2023w46: 69 [60; 78], corresponding to 45,872 [39,828; 51,916] new cases).

The incidence of Covid-19 cases presenting respiratory signs for ARI seen in general medical practice has been **increasing since three weeks**.

### 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

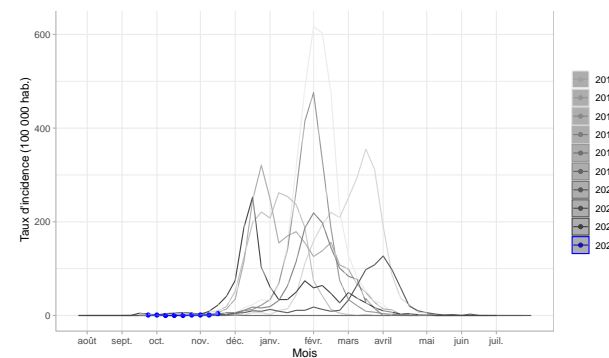
Last week (2023w47), the SARS-CoV-2 (Covid-19) positivity rates of patients consulting for ARI were **7%**, **35%**, and **45%** respectively in the 0-14, 15-64, and 65 and older age groups.

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

Since week 2023w39 (25th September, date of the beginning of the virological surveillance), the **268 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 4 months to 91 years);
- 61% (162/266) were women;
- 18% (44/255) of cases aged 12 years and older were not vaccinated against Covid-19 (no vaccine dose received);
- 36% (92/253) had risk factors for complications;
- None was hospitalized after the consultation (0/240).

### Influenza



Incidence rate of influenza cases observed in general practice since 2023w39 (blue) compared to previous seasons (grey) (\*)

Last week (2023w47), the incidence rate of influenza cases seen in general practice for acute respiratory infection was estimated at **7 cases per 100,000 population** (95% CI [2; 13]), corresponding to 4,937 [1,063; 8,811] new cases.

Subject to future data consolidation, this rate is **slightly increasing** compared with the previous week (consolidated data for 2023w46: 2 [0; 4], corresponding to 1,461 [215; 2,707] new cases).

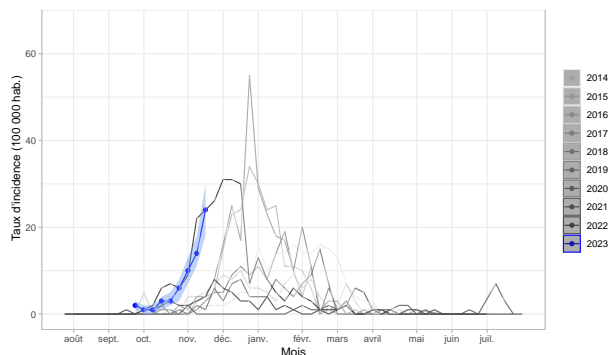
Last week (2023w47), a **low circulation of influenza viruses** was observed in general practice. This level of activity is **similar to past seasons at the same period**.

(\*) In order to compare current activity with past influenza epidemics, the incidences presented in this graph are taken from the influenza-like illness indicator. These data have been estimated secondarily from the ARI indicator since 2020.

Observed situation in general practice for the week 47 of the year 2023, from 11/20/2023 to 11/26/2023

## RSV

### RSV



Incidence rate of RSV cases in general practice since 2023w39 (blue) compared to historical data (grey) (\*)

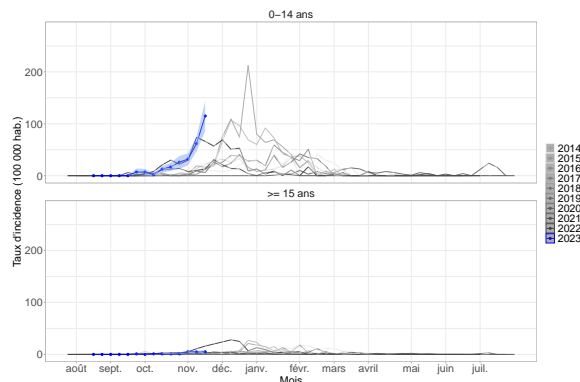
Last week (2023w47), the incidence rate of VRS cases seen in general practice for acute respiratory infection was estimated at **49 cases per 100,000 population** (95% CI [38; 60]), corresponding to 32,654 [25,405; 39,903] new cases.

Subject to future data consolidation, this rate is **increasing** compared to the previous week (consolidated data for 2023w46: 29 [22; 35], corresponding to 19,079 [14,586; 23,572] new cases).

Last week (2023w47), **the level of RSV circulation** observed in general practice was **similar to the 2022-2023 season** at the same time, but **higher than the ones observed in previous seasons**.

(\*) In order to compare current activity with past RSV epidemics, the incidences presented in this graph are taken from the influenza-like illness indicator. These data are estimated secondarily from the ARI indicator since 2020.

### Estimated incidence of RSV cases by age group



Incidence rate of RSV cases in general practice since 2023w39 (blue) compared to historical data (grey) (\*)

Last week (2023w47), incidence rates of RSV cases seen in general practice for acute respiratory were estimated as estimated at **238 cases per 100,000 population** (95% CI [183; 293]) and **11 cases per 100,000 population** (95% CI [4; 17]), respectively in the 0-14 and 15 and over age groups.

Subject to future data consolidation, this rate is **strongly increasing among the 0-14 age group** and **stable among those aged 15 and over**, compared with the previous week.

The **level of RSV circulation** observed in general practice is **higher than in past seasons at the same time for 0-14 year-olds**, and **similar to seasons prior to the 2022-2023 season at the same time for those aged 15 and over**.

(\*) In order to compare current activity with past RSV epidemics, the incidences presented in this graph are taken from the influenza-like illness indicator. These data are estimated secondarily from the ARI indicator since 2020.

### Description of RSV cases

Since the beginning of virological surveillance in week 2023w39 (25th September), the **109** confirmed RSV cases seen by Sentinel general practitioners and pediatricians had the following characteristics:

- Their median age was 3 years (from 0 months to 85 years);
- 49% (52/107) were women;
- 19% (20/106) had risk factors for complications;
- One patient was hospitalized at the end of the consultation (1/100).

These characteristics are **similar** to those of positive RSV cases observed in past seasons in general practice (historical data : median age: 4 years; 53% women; 17% with risk factors; 0.6% hospitalized patients).

### In conclusion

Last week (2023w47), the incidence of RSV cases among patients consulting for ARI in general practice was **increasing** compared to the previous week, and particularly **in the 0-14 age group**.

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 47 of the year 2023, from 11/20/2023 to 11/26/2023

National incidence rates over the last 3 weeks (per 100,000 inhabitants)	2023w47 (unconsolidated) Incidence rate estimations [95% confidence interval]	2023w46 Incidence rate estimations [95% confidence interval]	2023w45 Incidence rate estimations [95% confidence interval]
Acute Respiratory Infection	363 [337 ; 389]	258 [239 ; 277]	226 [207 ; 245]
Acute diarrhea	85 [70 ; 100]	73 [62 ; 84]	73 [59 ; 87]
Chickenpox	10 [6 ; 14]	8 [5 ; 11]	8 [4 ; 12]

Regional incidence rates for the week 2023w47 (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	287 [228 ; 346]	63 [37 ; 89]	7 [0 ; 15]
Bourgogne-Franche-Comté	220 [132 ; 308]	27 [0 ; 65]	3 [0 ; 11]
Bretagne	465 [351 ; 579]	73 [26 ; 120]	10 [0 ; 25]
Centre-Val de Loire	283 [192 ; 374]	69 [12 ; 126]	3 [0 ; 11]
Corse	139 [73 ; 205]	23 [0 ; 50]	0 [0 ; 0]
Grand Est	813 [638 ; 988]	159 [78 ; 240]	11 [0 ; 22]
Hauts-de-France	294 [200 ; 388]	107 [51 ; 163]	8 [0 ; 18]
Ile-de-France	264 [219 ; 309]	65 [42 ; 88]	12 [3 ; 21]
Normandie	35 [7 ; 63]	35 [0 ; 82]	0 [0 ; 0]
Nouvelle-Aquitaine	448 [341 ; 555]	134 [85 ; 183]	3 [0 ; 10]
Occitanie	336 [259 ; 413]	123 [76 ; 170]	17 [1 ; 33]
Pays de la Loire	317 [130 ; 504]	40 [0 ; 83]	4 [0 ; 14]
Provence-Alpes-Côte d'Azur	489 [382 ; 596]	110 [0 ; 220]	14 [0 ; 33]

## 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, 568 physicians participate in the continuous surveillance activity (519 general practitioners and 49 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

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