

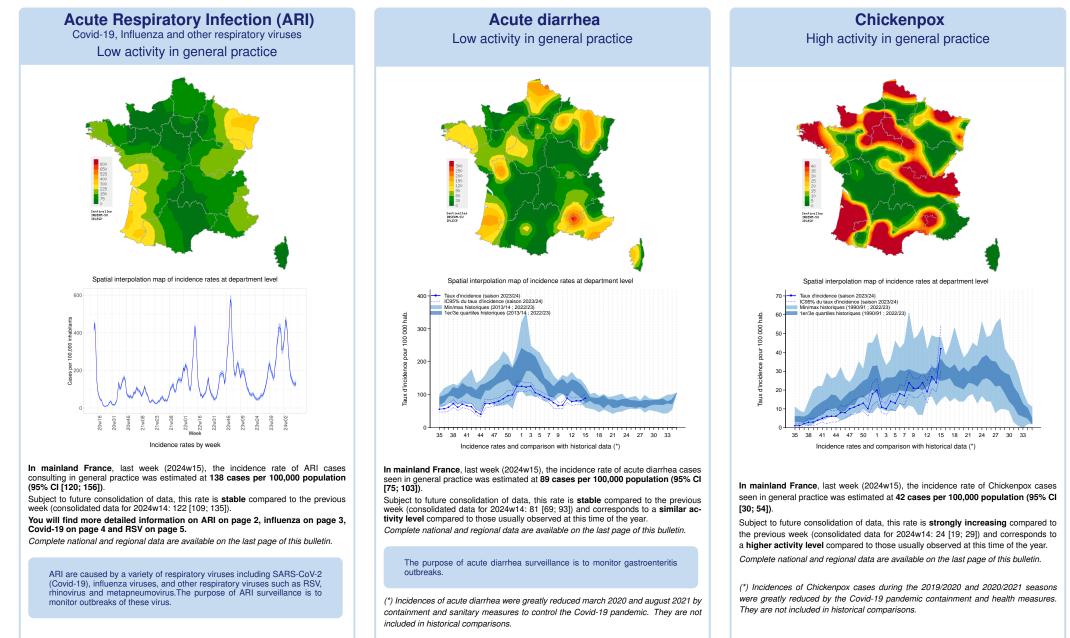


Sentinelles





Observed situation in general practice for the week 15 of the year 2024, from 04/08/2024 to 04/14/2024













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.

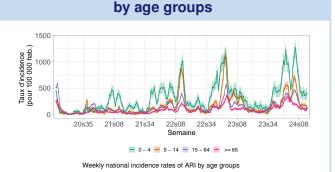
In order to carry out this surveillance, Sentinel general practitioners have been reporting the number of cases of acute respiratory infection (ARI) seen in consultation (or teleconsultation), according to the following definition: **sudden onset of fever** (or feeling of fever) and respiratory signs.

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 (and also from the <u>University department of general practice of Rouen</u>), who take weekly samples from patients consulting for an ARI, in order to identify different respiratory viruses and monitor their circulation.

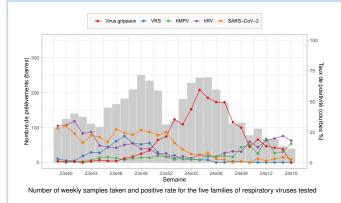
From this clinical and virological information, it is possible to estimate the number of cases of Covid-19, influenza virus and VRS among ARI cases seen in general medical consultations.

ARI incidence rates



Last week (2024w15), subject to future data consolidation, incidence rate was **stable** in all age groups compared to the previous week.

Circulation of respiratory viruses in general practice and pediatric



This season, **303** general practitioners and pediatricians are taking part in the ARI virological surveillance.

Last week (2024w15), **39 patients** presenting an ARI and seen in general practice or pediatric consultations were tested. The rates of positivity of samples for the various viruses tested were as follows:

- Influenza viruses: 0% (0/39) (consolidated data for 2024w14: 11% (5/46));

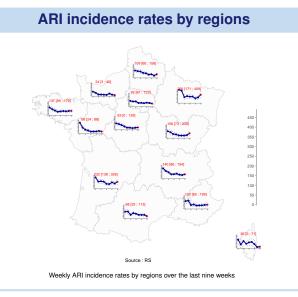
- **SARS-CoV-2 (Covid-19): 3%** (1/39) (consolidated data for 2024w14: 4% (2/46));

- **Rhinovirus: 22%** (7/39) (consolidated data for 2024w14: 22% (10/46));

- **Respiratory syncytial virus (RSV): 0%** (0/39) (consolidated data for 2024w14: 0% (0/46));

- **Metapneumovirus: 15%** (6/39) (consolidated data for 2024w14: 22% (10/46)).

Data sources: Sentinelles and the UDGP of Rouen



In conclusion

Last week (2024w15), subject to future data consolidation, the incidence of ARI cases seen in general practice was **stable** in all age groups and regions compared to the previous week (see graph opposite).

The ARI cases observed the past week (2024w15) in general practice were mainly linked to the concomitant circulation of the **rhinovirus** (hRV) and the **metapneumovirus** (hMPV) *(see graph opposite).*

Virological surveillance, which monitors the influenza epidemic and RSV circulation (the main virus responsible for bronchiolitis), ended on April 14 and will resume next autumn for the 2024-2025 winter season.

Find more information about case definitions, statistical methods and the Sentinelles network on our website



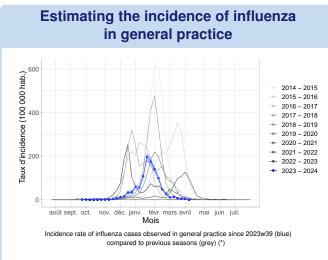








INFLUENZA

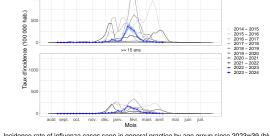


Last week (2024w15), the incidence rate of **influenza** cases seen in general practice for acute respiratory infection was estimated at **0 cases per 100,000 population** (95% CI [0; 12]).

Subject to future data consolidation, this rate was **stable** compared to the previous week (consolidated data for 2024w14: 13 [6; 20], corresponding to 8,525 [3,990; 13,058] new cases).

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





Incidence rate of influenza cases seen in general practice by age group since 2023w39 (blue) and comparison with historical data (grey)*

Last week (2024w15), subject to future data consolidation, the incidence rates of influenza cases seen in general practice for ARI were **stable in both age groups** compared to the previous week.

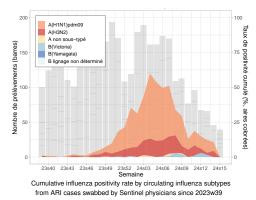
Description of confirmed influenza cases

Since the beginning of virological surveillance in week 2023w39 (25th September), the **902** confirmed influenza cases have been swabbed by Sentinel general practitioners and pediatricians. They presented the characteristics below:

- Median age: 36 years (from 1 mois months to 89 years old);
- Male/female sex-ratio: 0.93 ([430/464);
- Vaccination: 91% (761/839) were not vaccinated against influenza;
- Risk factors: 18% (153/874) had risk factors for complications;

- **Hospitalization**: no patient were hospitalized at the end of the consultation (0/812).

Identification of influenza viruses



Since the beginning of the surveillance (2023w39), influenza viruses identified have been **predominantly of type A**, with **74%** A(H1N1)pdm09, **24.5%** A(H3N2), **1%** unsubtyped A and **1.5%** B Victoria.

In conclusion

Last week (2024w15), subject to future data consolidation, the incidence of **influenza** cases seen in general practice among patients consulting for ARI was **stable** compared to the previous week and was at a **low level of activity**.

Most of the influenza viruses identified are of type A(H1N1)pdm09.

You can find the epidemiological bulletin of Santé publique France with all the surveillance data (ambulatory and hospital) on influenza by clicking <u>here</u>.

Samples analysis by the respiratory viruses National Reference Laboratory (Hospices Civils de Lyon ; associated center : Institut Pasteur, Paris) and the virological laboratory of Corsica University.



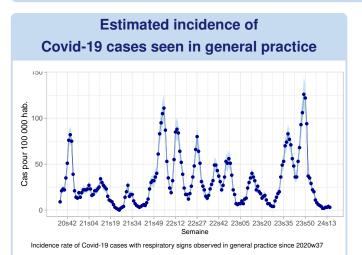






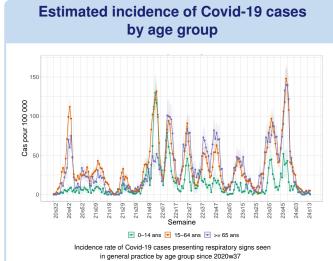


Covid-19



Last week (2024w15), the incidence rate of **Covid-19** cases seen in general practice for acute respiratory infection was estimated at **3 cases per 100,000 population** (95% CI [2; 5]), corresponding to 2,313 [1,222; 3,404] new cases.

Subject to future data consolidation, this rate was **stable** compared to the previous week (consolidated data for 2024w14: 4 [2; 6], corresponding to 2,618 [1,537; 3,699] new cases).



Last week (2024w15), the incidence rates of **Covid-19** cases seen in general practice for acute respiratory infection were estimated at:

- **0-14 years**: 1 cases per 100,000 population (95% CI [0; 2]), corresponding to 101 [0; 230]] new cases;

- **15-64 years**: 5 cases per 100,000 population (95% CI [3; 8]), corresponding to 2,114 [1,046; 3,182] new cases;

- **65 years and above**: 0 cases per 100,000 population (95% CI [0; 1]).

Subject to future data consolidation, these rates were **stable in all age groups** compared to the previous week.

Description of Covid-19 cases with respiratory signs

Since week 2023w39 (25th September, date of the beginning of the virological surveillance), the **631 Covid-19 confirmed cases** with an acute respiratory infection and sampled by the Sentinel general practitioners and paediatricians had the following characteristics:

- Median age: 48 years (range from 2 months to 99 years);
- Male/female sex-ratio: 0.66 (247/376);

- **Vaccination**: 21% (127/602) of cases aged 12 years and older were not vaccinated against Covid-19 (no vaccine dose received);

- Risk factors: 35% (206/597) had risk factors for complications;

- **Hospitalization**: 0.4% (2/559) of patients were hospitalized after the consultation.

In conclusion

Last week (2024w15), subject to future data consolidation, the incidence of **Covid-19** cases seen in general practice among patients consulting for acute respiratory infection was **stable** compared to the previous week and was at a **low level of activity** (see graph opposite).

You can find the epidemiological bulletin of Santé publique France with all the surveillance data (ambulatory and hospital) on the Covid-19 pandemic by clicking <u>here</u>.





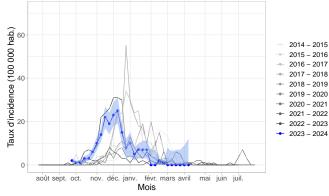






RSV

Estimated incidence of RSV cases in general practice

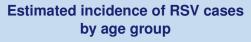


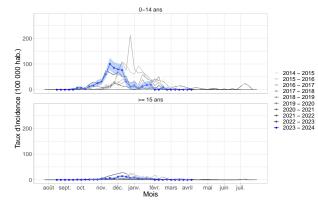
Incidence rate of RSV cases in general practice since 2023w39 (blue) compared to historical data (grey) (*)

Last week (2024w15), the incidence rate of **RSV** cases seen in general practice for acute respiratory infection was estimated at **0 cases per 100,000 population** (95% CI [0; 12]).

Subject to future data consolidation, this rate was **stable** compared to the previous week (consolidated data for 2024w14: 0 [0; 9]).

(*) 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.





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

Last week (2024w15), incidence rates of **RSV** cases seen in general practice for acute respiratory were estimated at:

- 0-14 years: 0 cases per 100,000 population;
- 15 years and above: 0 cases per 100,000 population.

Subject to future data consolidation, these rates were **stable in both age groups** compared to the previous week.

(*) 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 **277 confirmed RSV cases** swabbed by Sentinel general practitioners and pediatricians had the following characteristics:

- Median age: 4 years (range from 1 month to 96 years);
- Male/female sex ratio: 0.96 (132/141);
- Risk factors: 20% (51/252) had risk factors for complications;

- $\mbox{Hospitalization: } 0.8\%$ (2/248) of patients were hospitalized at the end of the consultation.

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 (2024w15), subject to future data consolidation, the incidence of **RSV** cases seen among patients consulting for ARI in general practice was **stable** compared to the previous week and was at a **low level of activity** (see graphs opposite).

You can find all the bronchiolitis epidemiological data (outpatient and inpatient) in the Public Health France weekly bulletin by clicking <u>here</u>.





Sent^{*}**nelles**





Observed situation in general practice for the week 15 of the year 2024, from 04/08/2024 to 04/14/2024

National incidence rates over the last 3 weeks (per 100,000 inhabitants)	2024w15 (unconsolidated) Incidence rate estimations [95% confidence interval]	2024w14 Incidence rate estimations [95% confidence interval]	2024w13 Incidence rate estimations [95% confidence interval]
Acute Respiratory Infection	138 [120 ; 156]	122 [109 ; 135]	129 [116 ; 142]
Acute diarrhea	89 [75 ; 103]	81 [69 ; 93]	81 [70 ; 92]
Chickenpox	42 [30 ; 54]	24 [19 ; 29]	27 [21 ; 33]

Regional incidence rates for the week 2024w15 (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	140 [86 ; 194]	51 [21 ; 81]	43 [10 ; 76]
Bourgogne-Franche-Comté	156 [73 ; 239]	43 [1 ; 85]	17 [0 ; 44]
Bretagne	137 [95 ; 179]	87 [39 ; 135]	27 [8 ; 46]
Centre-Val de Loire	63 [0 ; 129]	67 [8 ; 126]	25 [0 ; 50]
Corse	35 [0 ; 71]	110 [0 ; 262]	0 [0 ; 0]
Grand Est	290 [171 ; 409]	106 [61 ; 151]	26 [4 ; 48]
Hauts-de-France	109 [60 ; 158]	161 [101 ; 221]	60 [23 ; 97]
lle-de-France	92 [61 ; 123]	52 [30 ; 74]	34 [15 ; 53]
Normandie	24 [3 ; 45]	31 [0 ; 64]	67 [16 ; 118]
Nouvelle-Aquitaine	232 [138 ; 326]	60 [30 ; 90]	19 [3 ; 35]
Occitanie	68 [23 ; 113]	67 [19 ; 115]	44 [1 ; 87]
Pays de la Loire	56 [24 ; 88]	78 [31 ; 125]	19 [0 ; 38]
Provence-Alpes-Côte d'Azur	132 [65 ; 199]	119 [1 ; 237]	10 [0 ; 32]

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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, 585 physicians participate in the continuous surveillance activity (544 general practitioners and 41 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,	Marianne Sarazin	
Bourgogne-Franche-Comté		
Centre-Val de Loire,	Thierry Prazuck	
Pays de la Loire		
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	

See all the team - Ours partners

Envie de participer à la veille sanitaire ?

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