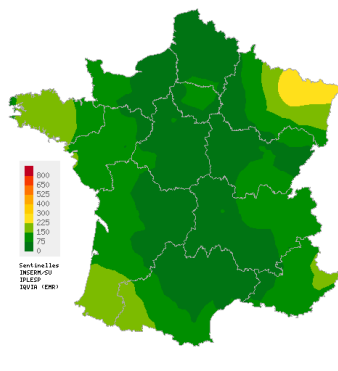
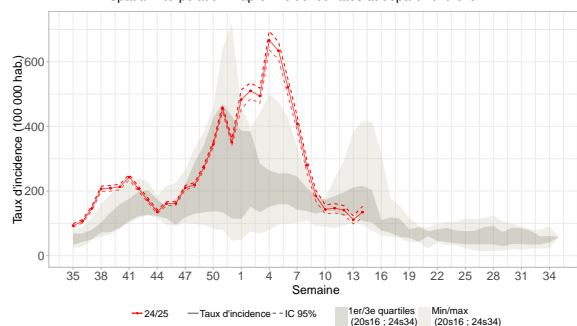


## Acute Respiratory Infection (ARI)

Covid-19, Influenza and other respiratory viruses  
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 (2025w14), the incidence rate of acute respiratory infection (ARI) cases consulting in general practice was estimated at **135 cases per 100,000 population (95% CI [118; 153])**.

Subject to future data consolidation, this rate is **stable** compared to the previous weeks and corresponds to a **similar activity level** than those usually observed at this time of the year (consolidated data for 2025w13: 111 [98; 123]).

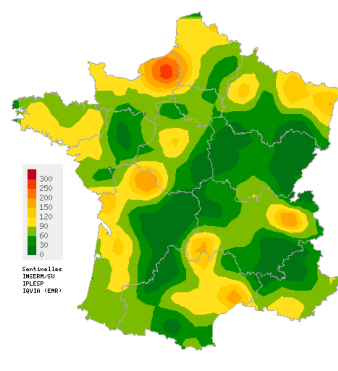
ARI are caused by a variety of respiratory viruses including SARS-CoV-2 (Covid-19), influenza viruses, and other respiratory viruses such as RSV, rhinovirus and metapneumovirus. The purpose of ARI surveillance is to monitor outbreaks of these virus.

You can find the french "Santé Publique France epidemiological bulletin" with all surveillance data (ambulatory and hospital) on ARI [by clicking here](#).

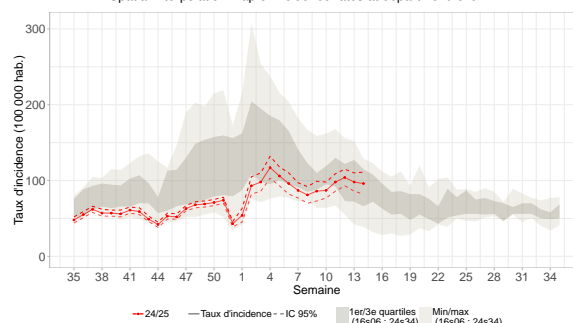
Data sources: Sentinelles, Electronic Medical Records (EMR) IQVIA

## Acute diarrhea

Moderate 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 (2025w14), the incidence rate of acute diarrhea cases seen in general practice was estimated at **96 cases per 100,000 population (95% CI [82; 111])**.

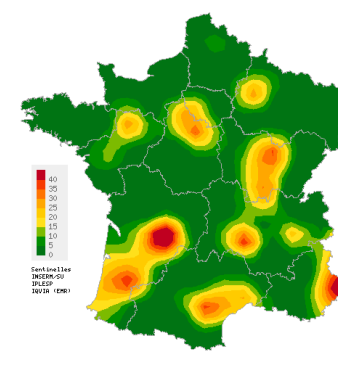
Subject to future data consolidation, this rate is **slightly decreasing** compared to the previous weeks and corresponds to a **similar activity level** than those usually observed at this time of the year (consolidated data for 2025w13: 98 [86; 110]).

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

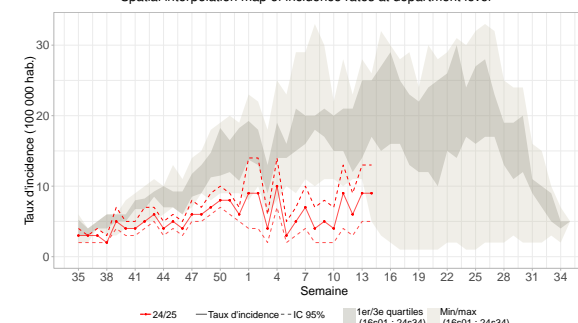
Data sources: Sentinelles, Electronic Medical Records (EMR) IQVIA

## 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 (2025w14), the incidence rate of Chickenpox cases seen in general practice was estimated at **9 cases per 100,000 population (95% CI [5; 13])**.

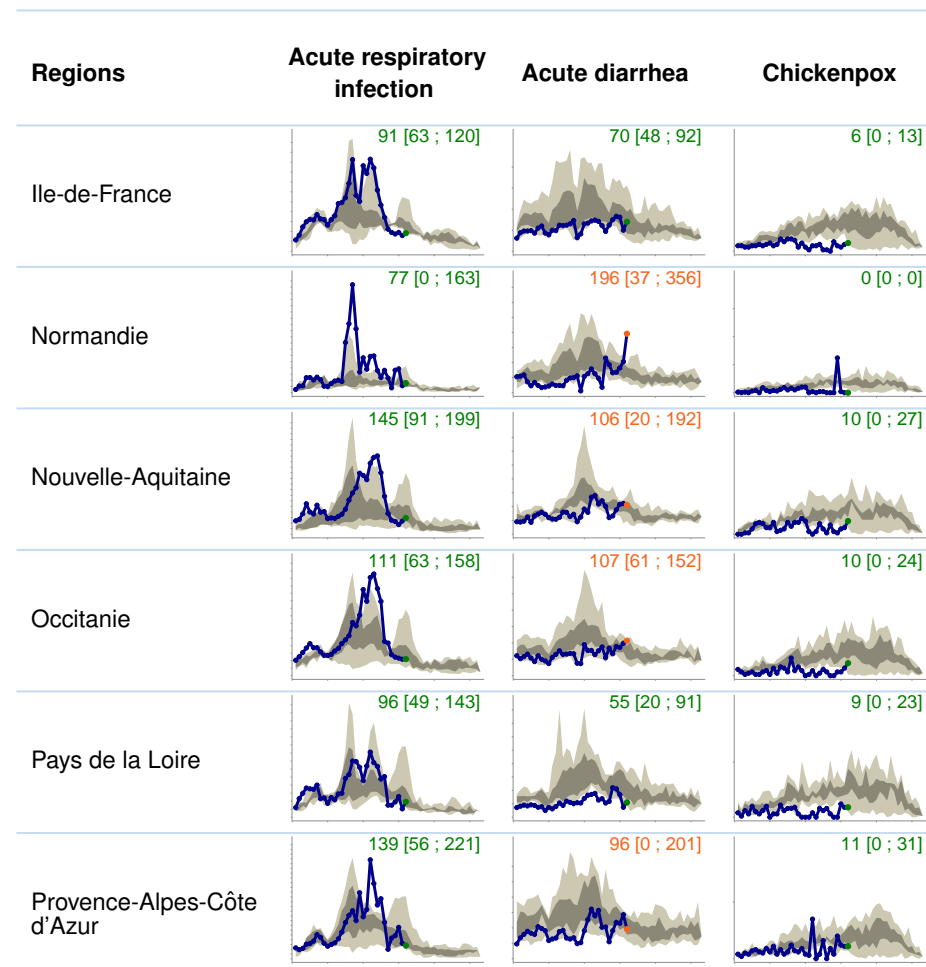
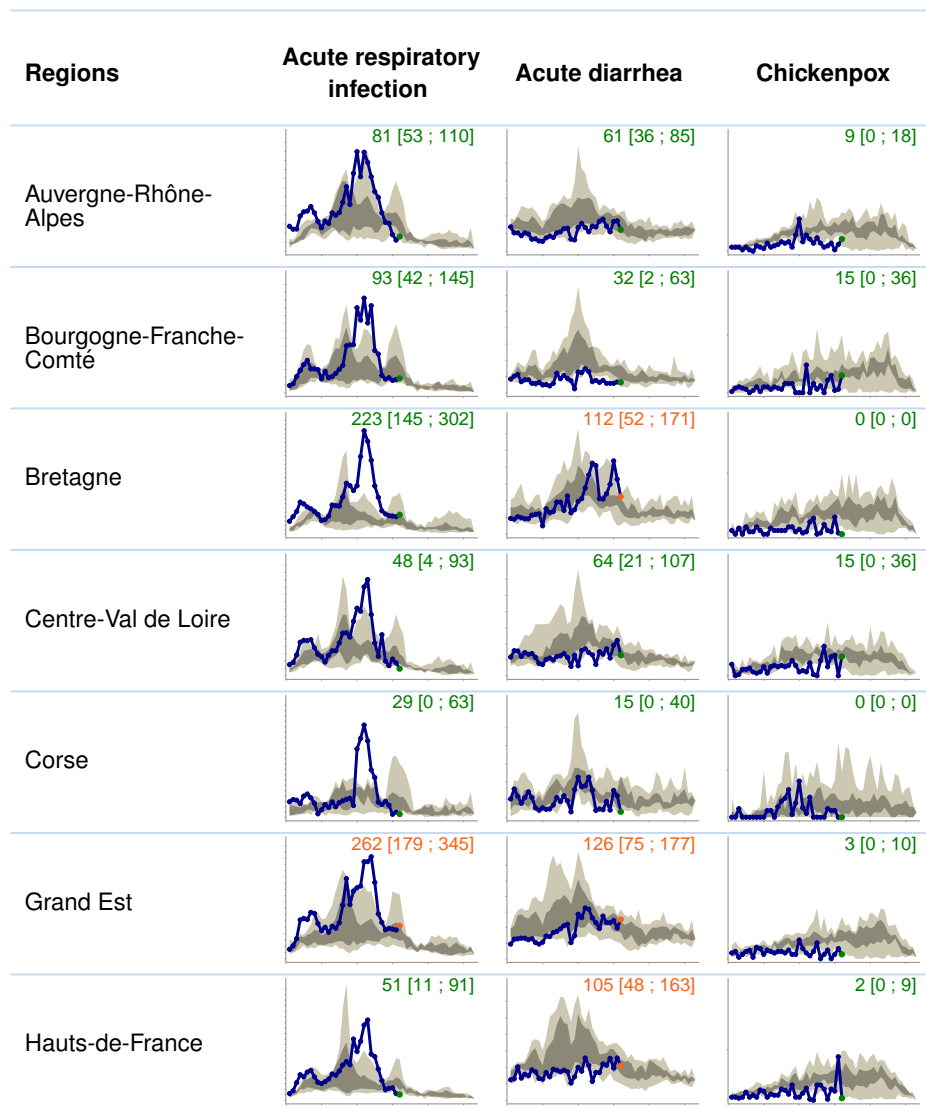
Subject to future data consolidation, this rate is **stable** compared to the previous weeks and corresponds to a **low activity level** compared to those usually observed at this time of the year (consolidated data for 2025w13: 9 [5; 13]).

Data sources: Sentinelles, Electronic Medical Records (EMR) IQVIA

# Incidence rates by french region

Epidemiological surveillance bulletin for the week 14 of the year 2025, from 03/31/2025 to 04/06/2025

# Sentinelles



Data sources : Sentinelles Network and EMR (Electronic Medical Records) IQVIA

## Activity levels

- Low activity
- Moderate activity
- High activity

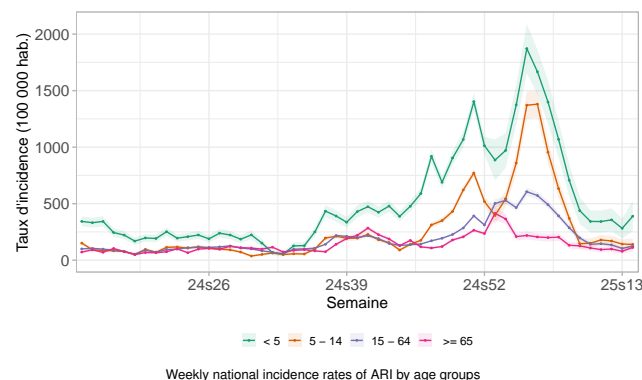
For the three indicators, the blue curve corresponds to the change in the incidence rate per 100,000 population for the current year. For ARI, previous years (since 2020) are shown with the grey curves. For acute diarrhea and chickenpox, the distribution of weekly incidence rates for the 10 previous years is shown in blue, with quartiles in dark and minimum/maximum values in light. This representation enables current trends to be compared with historical data. The value of the last point and its confidence interval are shown at the top of each graph. Different scales are used for different indicators.

# Acute respiratory infection (ARI) - Additional data

Epidemiological surveillance bulletin for the week 14 of the year 2025, from 03/31/2025 to 04/06/2025

# Sentinelles

## ARI incidence rates by age groups



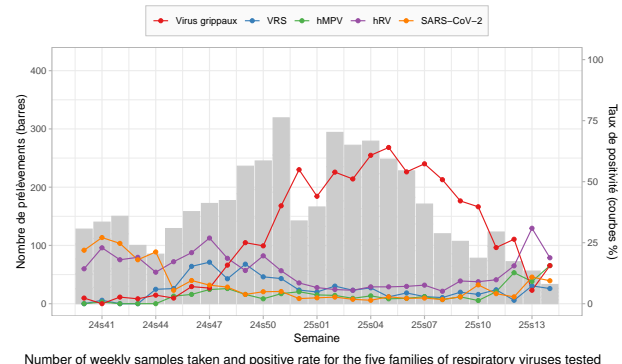
Last week (2025w14), subject to future data consolidation, incidence rates were estimated at:

- **0-4 age group:** 389 cases per 100 000 population (95% CI [255; 524]) (consolidated data for 2025w13: 282 [192; 371]);
- **5-14 age group:** 140 cases per 100 000 population (95% CI [88; 193]) (consolidated data for 2025w13: 143 [102; 184]);
- **15-64 age group :** 125 cases per 100 000 population (95% CI [103; 147]) (consolidated data for 2025w13: 104 [89; 120]);
- **65 and above age group :** 113 cases per 100 000 population (95% CI [78; 148]) (consolidated data for 2025w13: 79 [56; 101]).

Incidence rates are **stable in all age groups** compared to those of the previous weeks.

Data sources: Sentinelles, Electronic Medical Records (EMR) IQVIA

## Circulation of respiratory viruses in general practice and pediatric



Since 2024w40, **4,428** samples have been tested as part of virological surveillance of ARI 2024/2025.

Last week (2025w14), **33 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:

- **Rhinovirus:** **19%** (6/32) (consolidated data for 2025w13: 31% (17/55));
- **Influenza viruses:** **16%** (5/32) (consolidated data for 2025w13: 6% (3/55));
- **Metapneumovirus:** **16%** (5/32) (consolidated data for 2025w13: 9% (5/55));
- **SARS-CoV-2 (Covid-19):** **9%** (3/32) (consolidated data for 2025w13: 11% (6/55));
- **Respiratory syncytial virus (RSV):** **6%** (2/32) (consolidated data for 2025w13: 7% (4/55)).

Data sources: Sentinelles, DUMG Rouen and Côte d'Azur, SOS Médecins

## Description of IRA cases seen in general practice

Last week (2025w14), 318 cases of ARI were reported by Sentinelles general practitioners. Among these, 247 (78% of reported cases) were described and had the following characteristics:

- **Median age:** 39 years (range from 1 month to 92 years);
- **Male/female sex-ratio:** 0.79 (607/767);
- **Risk factors:** 20% (42/215) of the patients had risk factors for complications;
- **Hospitalization:** 0.5% (95% CI [0; 1.5]) of the patients were hospitalized after the consultation (1/215).

Data source: Sentinelles

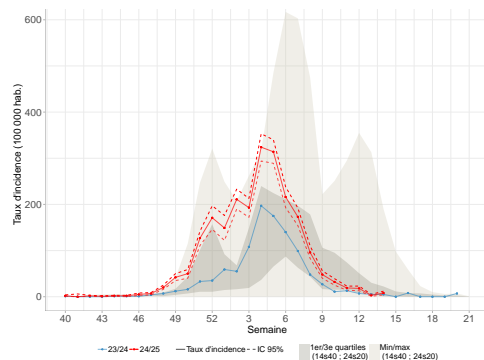
## In conclusion

Last week (2025w14), subject to future data consolidation, the incidence of ARI cases seen in general practice was **stable in children and adults** compared to previous weeks and was at a **low level of activity**.

The cases of ARI observed last week in general practice were mainly due to the **circulation of rhinoviruses, influenza viruses, metapneumovirus**, and **SARS-CoV-2 (Covid-19)** to a lesser extent.

## Incidence rates of influenza cases

Stable activity and at a low level



Incidence rates of influenza cases observed in general practice since 2024w40 compared to previous seasons (\*)

Last week (2025w14), the incidence rate of **influenza** cases seen in general practice among patients consulting for an ARI was estimated at **18 cases per 100,000 population** (95% CI [8; 27]), corresponding to 11,818 [5,609; 18,027] new cases.

Subject to future data consolidation, this rate was **stable** compared to those of the previous weeks (consolidated data for 2025w13: 6 [2; 10]).

## Description of confirmed influenza cases seen in primary care

Since the beginning of virological surveillance (2024w40), the 1,496 confirmed influenza cases swabbed by general practitioners and pediatricians presented the following characteristics:

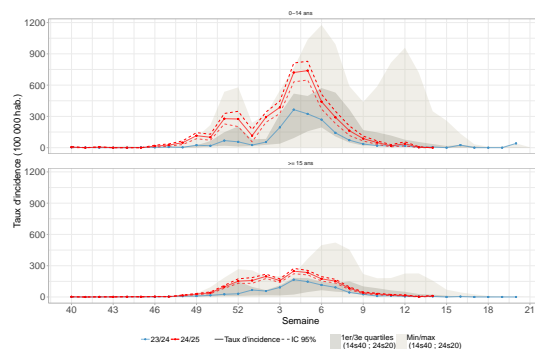
- **Median age:** 32 years (range from less than 1 month to 95 years old);
- **Male/female sex-ratio:** 0.86 (688/800);
- **Vaccination:** 89% (1,234/1,385) were not vaccinated against influenza;
- **Risk factors:** 19% (270/1,418) of the patients had risk factors for complications;
- **Hospitalization:** 0.3% (4/1,179) of the patients were hospitalized at the end of the consultation.

(\*) The indicator currently monitored by Sentinel physicians estimates the number of patients with influenza among those consulting for ARI and was implemented during the Covid-19 pandemic in March 2020. To allow better interpretation and visualization of trends in the current epidemic compared to past seasons, the graph presents influenza cases among patients consulting for influenza-like illness. This indicator has been available since 2014. The figures mentioned in the text and those represented graphically are therefore different. This must be taken into account when interpreting the data.

Data sources: Sentinelles, DUMG Rouen and Côte d'Azur, SOS Médecins

## Incidence rates of influenza cases

by age groups

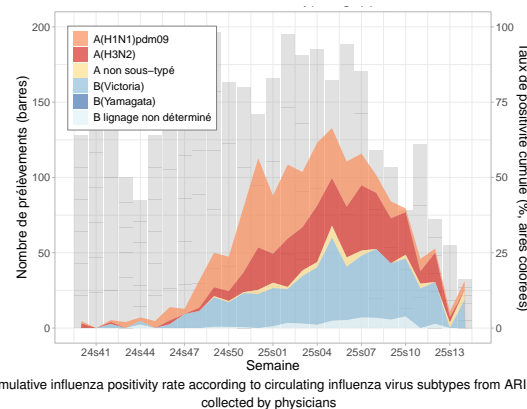


Incidence rates of influenza cases seen in general practice by age groups since 2024w40 and comparison with historical data (\*)

Last week (2025w14), subject to future data consolidation, the incidence rates of influenza cases seen in general practice among patients consulting for an ARI were **stable in both age groups** (0-14 and 15 and above age groups) compared to those of the previous weeks.

Data sources: Sentinelles, DUMG Rouen and Côte d'Azur, SOS Médecins

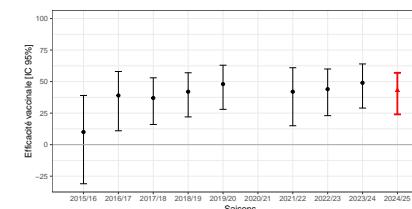
## Identification of influenza viruses



Since the week 2024s40, the 1,513 influenza viruses identified were distributed as follows: **35% of type A(H1N1)pdm09** (527/1,513), **34% of type B Victoria** (502/1,513), **26% of type A(H3N2)** (393/1,513), **3% of undetermined B lineage** (46/1,513) and **3% of non-subtyped A viruses** (45/1,513).

Data sources: Sentinelles, DUMG Rouen and Côte d'Azur, SOS Médecins

## Vaccine effectiveness against seasonal flu



In red: 2024-2025 season / In black: 2015-2016 to 2023-2024 seasons\*

The overall influenza vaccine effectiveness is estimated at **43% (95% CI [24%; 57%])**, a moderate level comparable to previous seasons. Among groups for whom influenza vaccination is recommended, vaccine effectiveness varies according to targeted groups, and remains close to those estimated in previous seasons:

- People under 65 with risk factors for complication: 59% [28%; 76%];
- People aged 65 or over: 38% [3%; 60%].

These estimates are computed thanks to the [Test-Negative Design \(TDN\)](#) statistical method and will be refined in the upcoming weeks.

\*No active circulation of influenza viruses during the 2020/2021 season

Data sources: Sentinelles, DUMG Rouen and Côte d'Azur, SOS Médecins

## In conclusion

Last week (2025w14), subject to future data consolidation, the incidence of **influenza** cases seen in general practice among patients consulting for an ARI was **stable** compared to the previous weeks and was at a **low level of activity**.

This season, we observed a co-circulation of viruses of type A(H1N1)pdm09, A(H3N2) and B Victoria, with however a majority circulation of viruses **B Victoria** and **A(H3N2)** at the end of the epidemic.

Find the [epidemiological bulletin of Santé publique France](#) with all the surveillance data (ambulatory and hospital) on influenza.

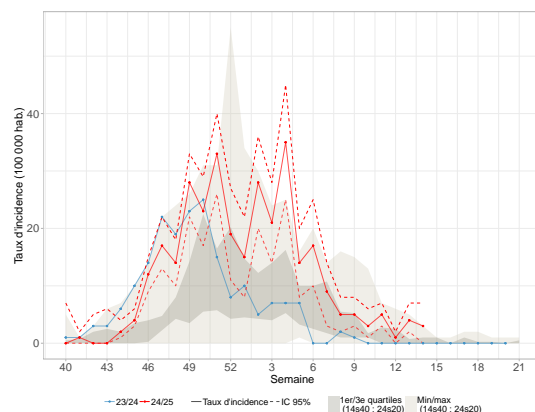
# RSV infection

Epidemiological surveillance bulletin for the week 14 of the year 2025, from 03/31/2025 to 04/06/2025

# Sentinelles

## Incidence rates of RSV infection cases

Stable activity and at a low level



Incidence rates of RSV infection cases seen in general practice since 2024w40 and comparison to historical data (\*)

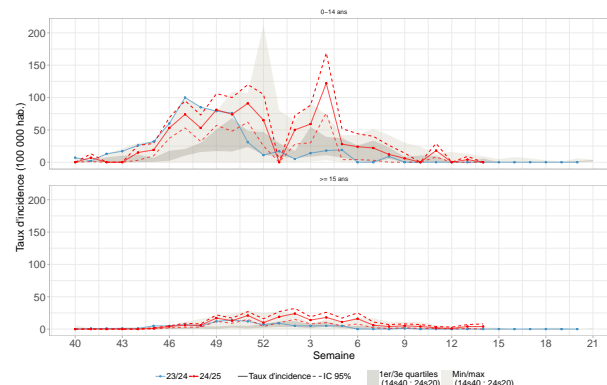
Last week (2025w14), the incidence rate of **RSV infection** cases (the virus responsible for most cases of bronchiolitis in infants) seen in general practice among patients consulting for an ARI was estimated at **7 cases per 100,000 population** (95% CI [0; 15]), corresponding to 4,727 [0; 10,313] new cases.

Subject to future data consolidation, this rate is **stable** compared to those of the previous weeks (consolidated data for 2025w13: 8 [3; 13]).

(\*) The indicator currently monitored by Sentinel physicians estimates the number of patients with RSV infection among those consulting for ARI and was implemented during the Covid-19 pandemic in March 2020. To allow better interpretation and visualization of trends in the current epidemic compared to past seasons, the graph presents cases of RSV infection among patients consulting for influenza-like illness. This indicator has been available since 2014. The figures mentioned in the text and those represented graphically are therefore different. This must be taken into account when interpreting the data.

Data sources: Sentinelles, DUMG Rouen and Côte d'Azur, SOS Médecins

## Incidence rates of RSV infection cases by age groups



Incidence rates of RSV infection cases in general practice since 2024w40 compared to historical data (\*)

Last week (2025w14), incidence rates of **RSV infection** cases seen in general practice among patients consulting for an ARI were estimated at:

- **0-14 years:** 0 cases per 100,000 population;
- **15 years and above:** 9 cases per 100,000 population (95% CI [0; 19]), corresponding to 4,727 [0; 10,313] new cases.

Subject to future data consolidation, these rates are **stable in both age groups** (0-14 and 15 and over age groups) compared to those of the previous weeks.

Data sources: Sentinelles, DUMG Rouen and Côte d'Azur, SOS Médecins

## Description of RSV infections seen in general practice and pediatric

Since the beginning of virological surveillance (2024w40), the 301 confirmed RSV infection cases swabbed by general practitioners and pediatricians presented the following characteristics:

- **Median age:** 16 years (range from 1 month to 98 years old);
- **Male/female sex-ratio:** 0.81 (134/166);
- **Risk factors:** 32% (94/290) of the patients had risk factors for complications;
- **Hospitalization:** 0.4% (1/249) of the patients were hospitalized at the end of the consultation.

Data sources: Sentinelles, DUMG Rouen and Côte d'Azur, SOS Médecins

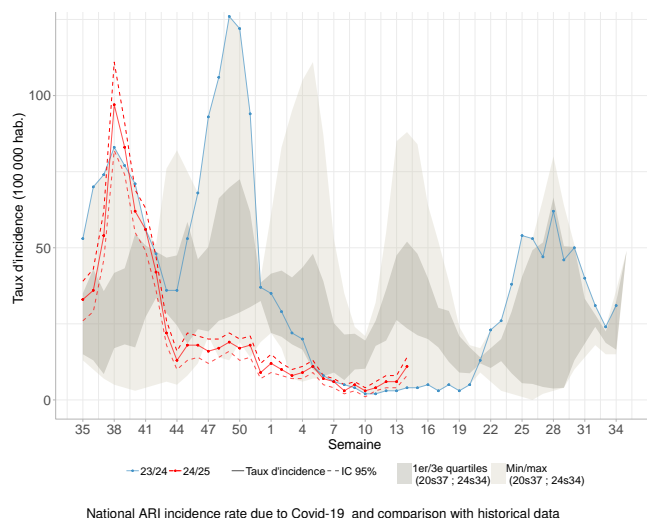
## In conclusion

Last week (2025w14), subject to future data consolidation, the incidence of **RSV** infection cases seen in general practice among patients consulting for an ARI was **stable** compared to the previous weeks, and was at a **low level of activity**. Nevertheless, the level of activity observed since the beginning of January remains at a level higher than those usually observed, mainly among adults.

Find the [epidemiological bulletin of Santé publique France](#) with all the surveillance data (ambulatory and hospital) on bronchiolitis.

### Incidence rates of Covid-19 cases

Activity slightly increasing and at a low level

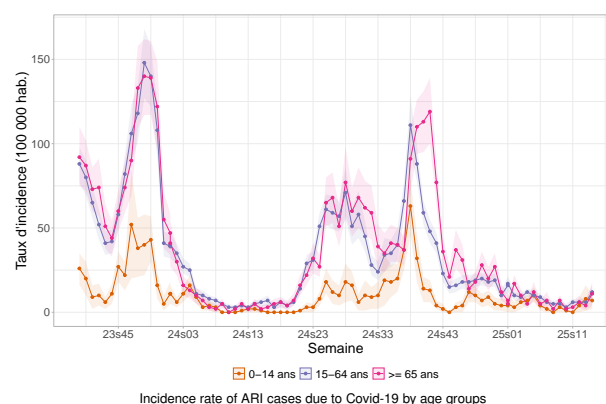


Last week (2025w14), the incidence rate of **Covid-19** cases seen in general practice among patients consulting for an ARI was estimated at **11 cases per 100,000 population** (95% CI [8; 14]), corresponding to 7,255 [5,317; 9,193] new cases.

Subject to future data consolidation, this rate is **slightly increasing** compared to the previous week (consolidated data for 2025w13: 6 [4; 8]).

Data source: Sentinelles

### Incidence rates of Covid-19 cases by age groups



Last week (2025w14), the incidence rates of **Covid-19** cases seen in general practice among patients consulting for an ARI were estimated at:

- **0-14 years:** 7 cases per 100,000 population (95% CI [2; 11]), corresponding to 753 [240; 1,266] new cases;
- **15-64 years:** 12 cases per 100,000 population (95% CI [9; 16]), corresponding to 4,979 [3,487; 6,471] new cases;
- **65 years and above:** 11 cases per 100,000 population (95% CI [4; 18]), corresponding to 1,523 [522; 2,524] new cases.

Subject to future data consolidation, these rates are **stable among children** (0-14 age group) and **slightly increasing among adults** (15-64 and 65 and over age groups) compared to those of the previous week.

Data source: Sentinelles

### Description of Covid-19 cases presenting ARI seen in general practice

Since week 2025w11, the 64 Covid-19 described cases with an ARI had the following characteristics:

- **Median age:** 48 years (range from 3 years to 91 years);
- **Male/female sex-ratio:** 0.85 (29/34);
- **Risk factors:** 21% (13/63) of the patients had risk factors for complications;
- **Hospitalization:** no patient was hospitalized after the consultation (0/63).

Data source: Sentinelles

### In conclusion

Last week (2025w14), subject to future data consolidation, the incidence of **Covid-19** cases seen in general practice among patients consulting for an ARI was **stable among children** (0-14 age group) and **slightly increasing among adults** (15-64 and 65 and over age groups) compared to the previous week, and was at a **low level of activity** (see graph opposite).

Find the [epidemiological bulletin of Santé publique France](#) with all the surveillance data (ambulatory and hospital) on the Covid-19 pandemic.



## Surveillance organisation

Under the aegis of Santé publique France, surveillance in general practice in mainland France is moving towards the integration and joint analysis of data from different networks.

The epidemiological surveillance data published in this bulletin come from several complementary networks of general physicians:

- The Sentinelles network, coordinated by the Institut Pierre Louis of Epidemiology and Public Health (iPLESP) under the supervision of Sorbonne University and Inserm;
- and the EMR (Electronic Medical Records) database, managed by IQVIA.

During the enhanced respiratory infection surveillance season (September to April), data are also collected from physicians in the network coordinated by the general medicine departments of the University of Rouen and the Côte d'Azur University.

All these collected data are analysed jointly. They provide more reliable on a finer geographical scale, while limiting consolidation from one week to the next.

Current monitoring concerns [nine health indicators](#), with three of them being published each week in this bulletin;

You can find more information about the organization of this surveillance, the number of participating physicians, the methods used, scientific publications and partnerships on the Sentinelles network website: [www.sentiweb.fr](http://www.sentiweb.fr).

## Information and contacts

The Sentinelles team is composed of epidemiologists, statisticians, physicians, IT specialists and technicians.

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## Partners and supervisory bodies

### Partners

Sentinelles IQVIA

UNIVERSITÉ DE ROUEN UNIVERSITÉ CÔTE D'AZUR

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Santé publique France

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HCL  
HOSPICES CIVILS DE LYON

INSTITUT PASTEUR

CR virus des gastro-entérites  
Dijon, France

CNGE  
COLLEGE ACADEMIQUE

### Supervisory bodies of Sentinelles network

iPLESP

Inserm  
La science pour la santé  
From science to health

SANTÉ SORBONNE UNIVERSITÉ

## French General Practitioner or Paediatrician ?



Get involved in research and health monitoring in primary care by joining the Sentinelles network ([become a Sentinelles doctor](#)) !

## THERE IS ALSO GENERAL POPULATION MONITORING

grippe  
covid net

Join the participatory cohort for monitoring Covid-19 and influenza by registering at <https://www.grippenet.fr>

You don't need to be a healthcare professional to take part!