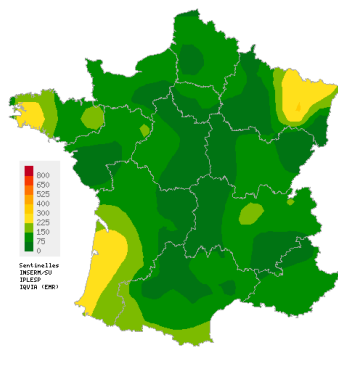
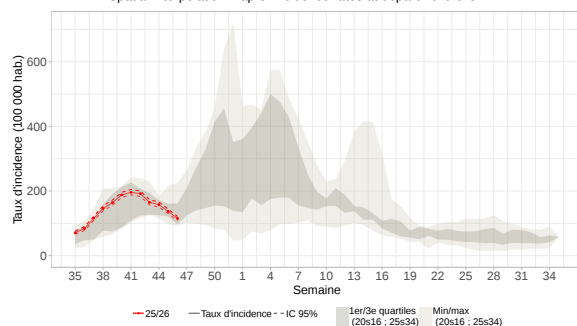


Acute Respiratory Infection (ARI)

Covid-19, Influenza and other respiratory viruses
Low to 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 (2025w46), the incidence rate of acute respiratory infection (ARI) cases consulting in general practice was estimated at **115 cases per 100,000 population (95% CI [108; 121])**.

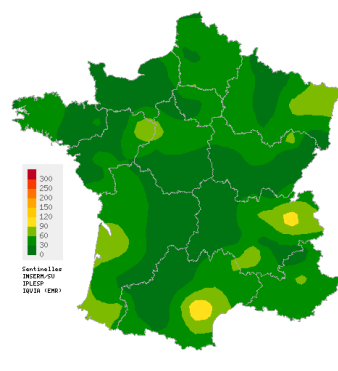
Subject to future data consolidation, this rate is **decreasing over the past few weeks** but corresponds to a **similar level of activity** to those usually observed at this time of the year (consolidated data for 2025w45: 137 [130; 144]).

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.

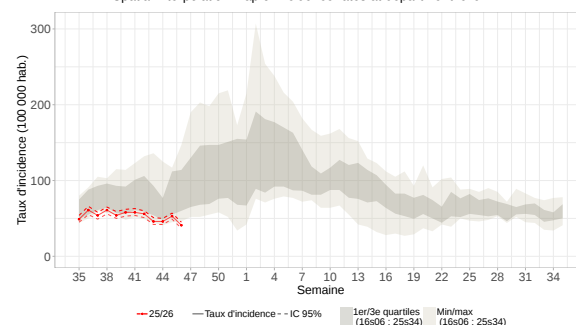
Data sources: Sentinelles, Electronic Medical Records (EMR) IQVIA

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 (2025w46), the incidence rate of acute diarrhea cases seen in general practice was estimated at **41 cases per 100,000 population (95% CI [37; 45])**.

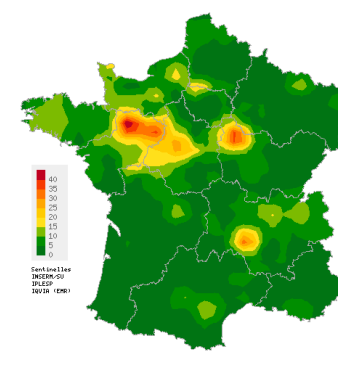
Subject to future data consolidation, this rate is **decreasing** compared to the previous week and corresponds to a **lower level of activity** than those usually observed at this time of the year (consolidated data for 2025w45: 53 [49; 57]).

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

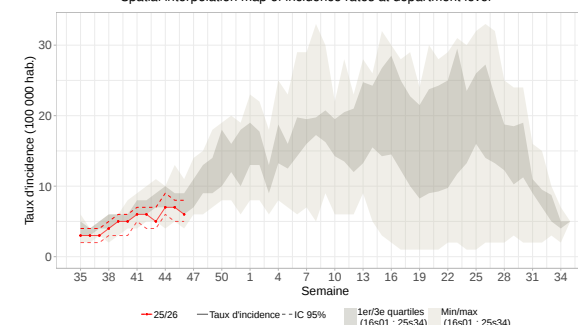
Data sources: Sentinelles, Electronic Medical Records (EMR) IQVIA

Chickenpox

Low activity in general practice



Spatial interpolation map of incidence rates at department level

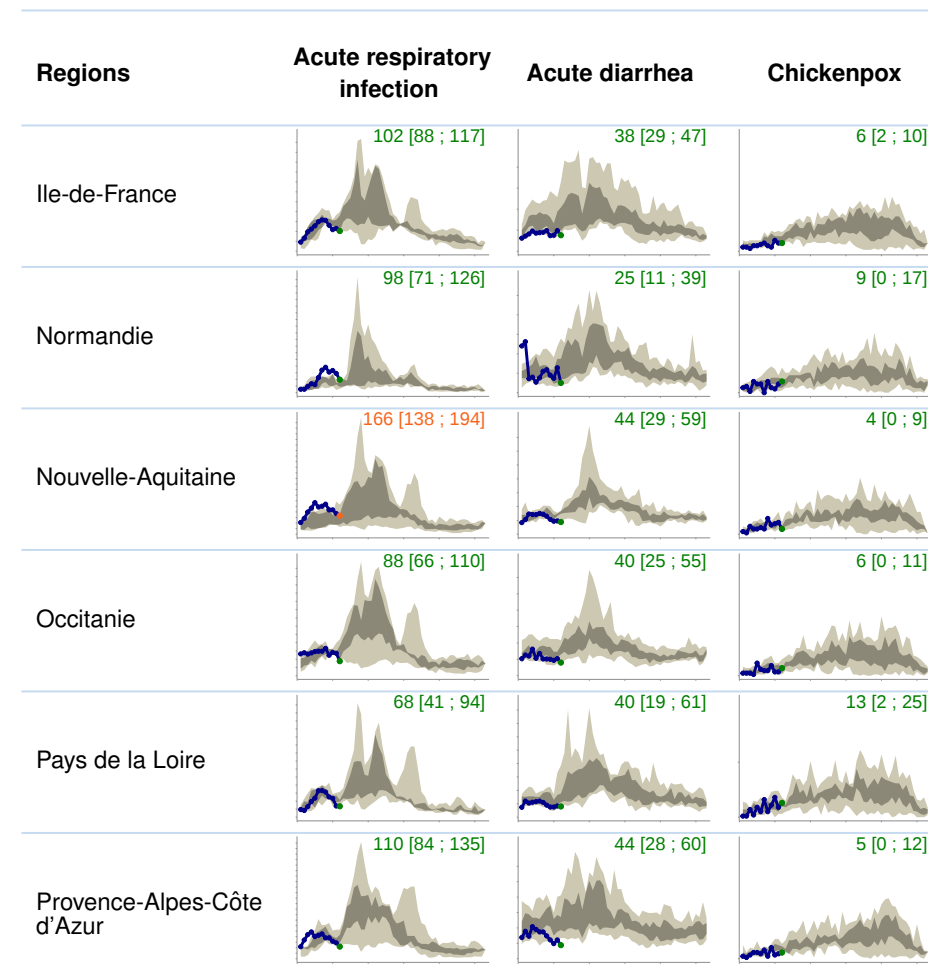
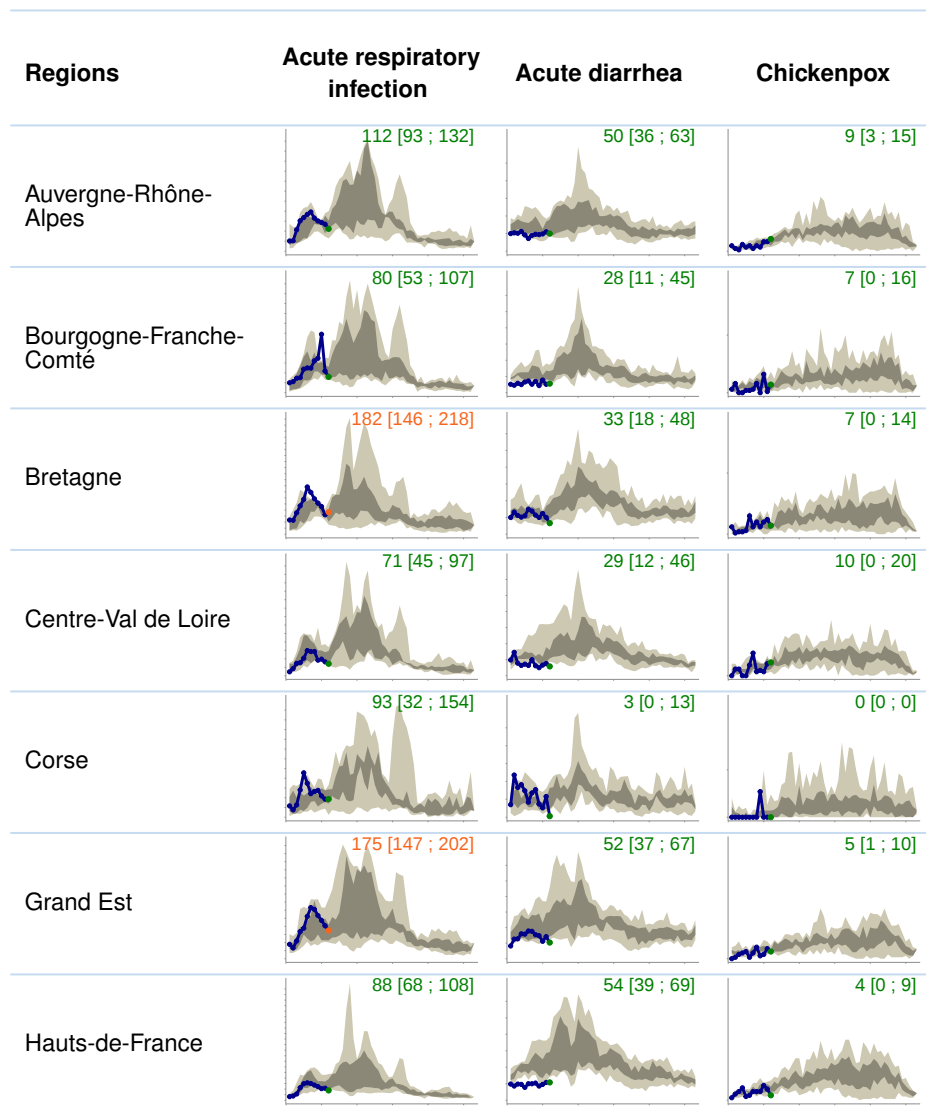


Incidence rates and comparison with historical data

In mainland France, last week (2025w46), the incidence rate of Chickenpox cases seen in general practice was estimated at **6 cases per 100,000 population (95% CI [5; 8])**.

Subject to future data consolidation, this rate is **stable** compared to the previous weeks and corresponds to a **similar level of activity** to those usually observed at this time of the year (consolidated data for 2025w45: 7 [5; 8]).

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



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

Activity levels
■ Low activity
■ Moderate activity
■ High activity

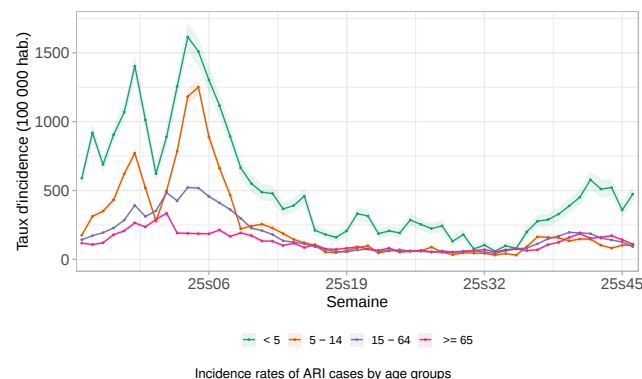
For the three indicators, the blue curve corresponds to the change in the incidence rate per 100,000 population for the current year. For ARI, previous years (since 2020) are shown with the grey curves. For acute diarrhea and chickenpox, the distribution of weekly incidence rates for the previous years is shown in grayed colour, with quartiles in darker and minimum/maximum values in lighter. 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 46 of the year 2025, from 11/10/2025 to 11/16/2025

Sentinelles

ARI incidence rates by age groups



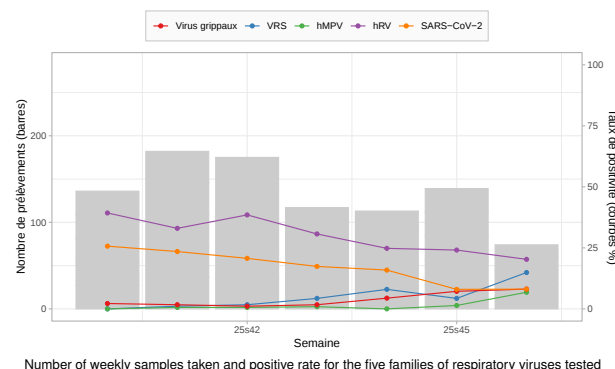
Last week (2025w46), subject to future data consolidation, incidence rates were estimated at:

- **0-4 age group:** 474 cases per 100 000 population (95% CI [412; 535]) (consolidated data for 2025w45: 358 [307; 409]);
- **5-14 age group:** 103 cases per 100 000 population (95% CI [84; 121]) (consolidated data for 2025w45: 103 [85; 120]);
- **15-64 age group :** 92 cases per 100 000 population (95% CI [84; 99]) (consolidated data for 2025w45: 126 [117; 135]);
- **65 and above age group :** 110 cases per 100 000 population (95% CI [96; 124]) (consolidated data for 2025w45: 143 [128; 158]).

Incidence rates are **increasing among children aged 0-4 years, stable among children aged 5-14 years, and decreasing among adults** (15-64 years and 65 years and older) compared to the previous week.

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

Circulation of respiratory viruses in general practice and pediatric



Since 2025w40, **936** samples have been tested by general practitioners and pediatricians participating in the 2025/2026 virological surveillance of ARI.

Last week (2025w46), **74 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:** **20%** (15/74) (consolidated data for 2025w45: 24% (33/137));
- **Respiratory syncytial virus (RSV):** **15%** (11/74) (consolidated data for 2025w45: 4% (6/138));
- **SARS-CoV-2 (Covid-19):** **8%** (6/74) (consolidated data for 2025w45: 8% (11/138));
- **Influenza viruses:** **8%** (6/74) (consolidated data for 2025w45: 7% (10/138));
- **Metapneumovirus:** **7%** (5/74) (consolidated data for 2025w45: 1% (2/138)).

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

Description of IRA cases seen in general practice

Last week (2025w46), 337 cases of ARI were reported by Sentinelles general practitioners. Among these, 244 (73% of reported cases) were described and had the following characteristics:

- **Median age:** 42 years (range from 2 months to 96 years);
- **Male/female sex-ratio:** 0.76 (95/125);
- **Risk factors:** 22% (46/212) of the patients had risk factors for complications;
- **Hospitalization:** 4% (8/214) of the patients were hospitalized after the consultation.

Data source: Sentinelles

In conclusion

Last week (2025w46), subject to the upcoming data consolidation, **the incidence of ARI cases seen in general practice consultations continued to decrease** compared to previous weeks. **By age group**, however, it was **increasing among children aged 0-4 years** and stable among children aged 5-14 years.

The viruses primarily detected in sampled patients consulting for an ARI were **rhinovirus** and **RSV**. To a lesser extent, the circulation of **SARS-CoV-2 (Covid-19)**, **influenza viruses**, and **metapneumovirus** is also observed.

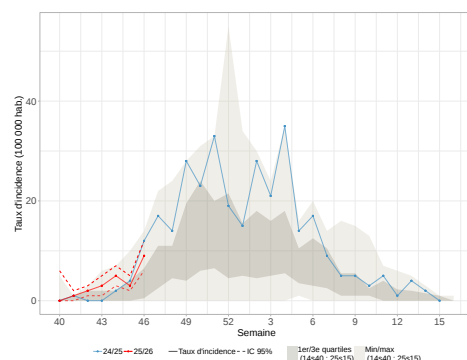
Find [the epidemiological bulletin of "Santé publique France"](#) with all the surveillance data (outpatient and hospital) on acute respiratory infections.

RSV infection and bronchiolitis

Epidemiological surveillance bulletin for the week 46 of the year 2025, from 11/10/2025 to 11/16/2025

Sentinelles

Incidence rates of RSV infection cases Increasing activity



Incidence rates of RSV infection cases and comparison to historical data

Last week (2025w46), 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 **17 cases per 100,000 population** (95% CI [10; 23]), corresponding to 11,142 [6,973; 15,311] new cases.

Subject to future data consolidation, this rate is **increasing** compared to the previous week (consolidated data for 2025w45: 6 [3; 8]).

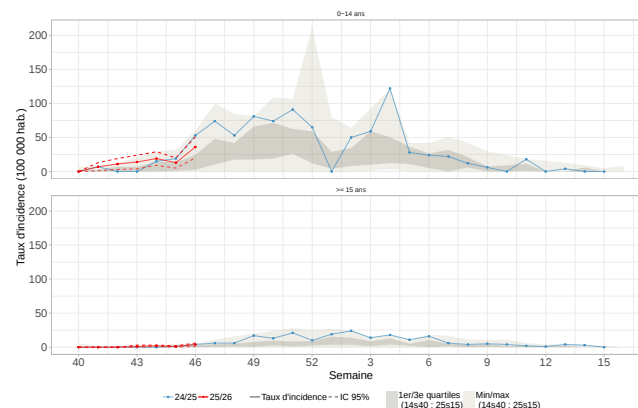
Description of RSV infection cases seen in general practice

Since surveillance resumed (2025w40), the 36 confirmed cases of RSV infection collected by general practitioners and pediatricians had the following characteristics:

- **Median age:** 3 years (from 5 months to 95 years);
- **Male/female sex ratio:** 0.80 (16/20);
- **Risk factors:** 25% (2/8) of patients had risk factors for complications;
- **Hospitalization:** no patient was hospitalized following consultation (0/31).

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

Incidence rates of RSV infection cases by age groups



Incidence rate of RSV infection cases by age groups and comparison to historical data

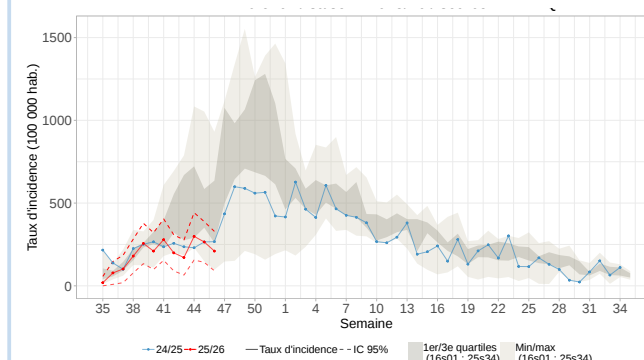
Last week (2025w46), incidence rates of **RSV infection** cases seen in general practice among patients consulting for an ARI were estimated at:

- **0-14 years:** 67 cases per 100,000 population (95% CI [40; 94]), corresponding to 7,448 [4,443; 10,453] new cases;
- **15 years and above:** 7 cases per 100,000 population (95% CI [2; 12]), corresponding to 3,694 [1,035; 6,352] new cases.

Subject to future data consolidation, these rates are **increasing in the 0-14 age group and stable in the 15 and over age group** compared to those of the previous week.

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

Incidence rates of bronchiolitis cases in children under 1 year



Incidence rate of bronchiolitis cases seen in children under one year and comparison with historical data

Last week (2025w46), the incidence rate of **bronchiolitis** cases seen in general practice was estimated at **210 cases per 100,000 population** (95% CI [91; 329]) **in children under 1 year old**.

Subject to future data consolidation, this rate is **stable** compared to the previous weeks (consolidated data for 2025w45: 265 [142; 388]).

Data source: Electronic Medical Records (EMR) IQVIA

In conclusion

Last week (2025w46), subject to future data consolidation, the incidence of **RSV infection** cases seen in general practice among patients consulting for an ARI was **increasing** compared to the previous week. **This increase was observed mainly in children aged 0-14 years.**

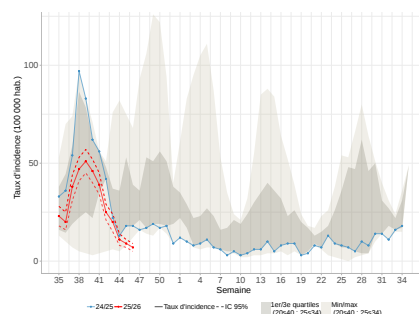
Furthermore, **the incidence of bronchiolitis in children under 1 year** seen by general practitioners is **stable** compared to the previous weeks. The level of bronchiolitis activity in this age group is **lower** to the ones usually observed at this time of the year.

Bronchiolitis is mainly caused by respiratory syncytial virus (RSV), although other respiratory viruses may also be responsible, such as rhinovirus or SARS-CoV-2 (Covid-19).

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

Incidence rates of Covid-19 cases

Decreasing activity at a low level

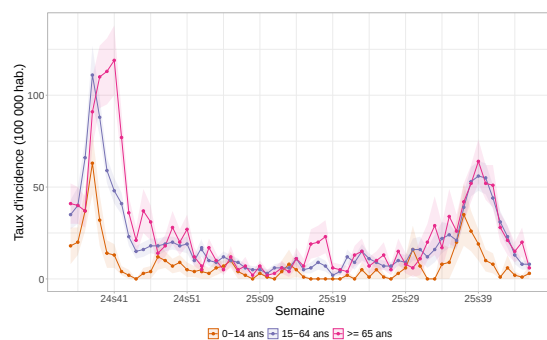


Incidence rate of Covid-19 cases and comparison to historical data

Last week (2025w46), the incidence rate of Covid-19 cases seen in general consultations for an ARI has been estimated at **6 cases per 100,000 population** (95% CI [4; 9]), corresponding to 4,328 [2,941; 5,715] new cases. Subject to future data consolidation, this rate is **decreasing** compared to previous weeks (consolidated data for 2025w45: 9 [7; 11]).

Data source: Sentinelles

Incidence rates of Covid-19 cases by age groups



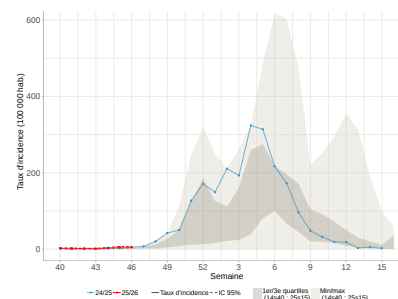
Incidence rates of Covid-19 cases by age groups

Last week (2025w46), subject to future data consolidation, the incidence rates of Covid-19 cases seen in general practice for an ARI were **stable in the 0-14 and the 15-64 age groups, and decreasing in the 65+ age group** compared to those of the previous week.

Data source: Sentinelles

Incidence rates of influenza cases

Stable activity at a low level



Incidence rates of influenza cases and comparison to historical data

Last week (2025w46), the incidence rate of **influenza** cases seen in general practice among patients consulting for an ARI was estimated at **9 cases per 100,000 population** (95% CI [5; 14]), corresponding to 6,186 [3,080; 9,292] new cases.

Subject to future data consolidation, this rate was **stable** compared to the previous week (consolidated data for 2025w45: 9 [6; 13]).

By age groups, the incidence rates of **influenza** cases seen in general practice among patients consulting for an ARI were estimated at:

- **0-14 years:** 33 cases per 100,000 inhabitants (95% CI [13; 54]), corresponding to 3,724 [1,391; 6,057] new cases;
- **15 years and older:** 4 cases per 100,000 inhabitants (95% CI [1; 8]), corresponding to 2,462 [326; 4,599] new cases.

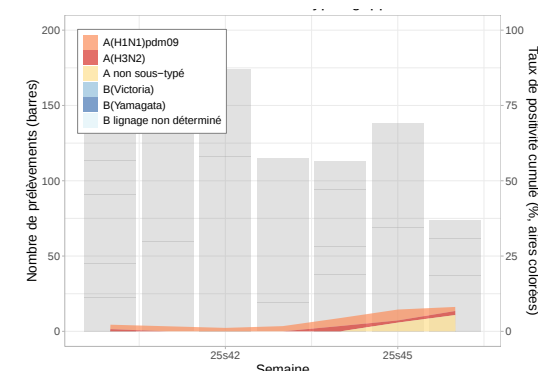
Description of confirmed influenza cases seen in primary care

Since the beginning of virological surveillance (2025s40), the 31 confirmed influenza cases swabbed by general practitioners and pediatricians presented the following characteristics:

- **Median age:** 35 years (range from 1 to 78 years old);
- **Male/female sex-ratio:** 0.72 (13/18);
- **Vaccination:** 97% (29/30) were not vaccinated against influenza;
- **Risk factors:** 18% (3/17) of the patients had risk factors for complications;
- **Hospitalization:** no patient was hospitalized at the end of the consultation (0/21).

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

Identification of influenza viruses



Cumulative influenza positivity rate according to circulating influenza virus subtypes from ARI cases collected by physicians

Since week 2025w40, the 31 identified influenza viruses were all type A and were distributed as follows: **58% A(H1N1)pdm09 viruses** (18/31), **16% A(H3N2) type** (5/31), and **26% non-subtyped type A** (8/31).

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

In conclusion

Last week (2025w46), subject to future data consolidation:

- The incidence of **Covid-19** cases seen in general practice consultations for an ARI **continued the decrease observed over the past several weeks** and was at a **low level of activity**.
- The incidence of **influenza** cases seen in general practice consultations for an ARI was overall **stable** compared to previous weeks and was at a **low level of activity**. However, a **slight increase in influenza activity has been observed among children (0-14 years) for the past two weeks**.

Find [the epidemiological bulletin of "Santé publique France"](#) with all the surveillance data (outpatient and hospital) on acute respiratory infections.

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.

Information and contacts

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

Head of the Sentinelles network
Olivier Steichen, Thierry Blanchon

IT Biostatistics
Clément Turbelin

Epidemiological Surveillance and Studies
Marion Debin

Publication
Yves Dorléans

CONTACT US

☎ 06 64 84 66 62

✉ sentinelles@upmc.fr

📄 IPLESP UMR-S 1136
Faculté de Santé Sorbonne Université
Site Saint-Antoine, BC 2908
27, rue Chaligny
75571 Paris Cedex 12

Partners and supervisory bodies

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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

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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!