Observed situation in primary care

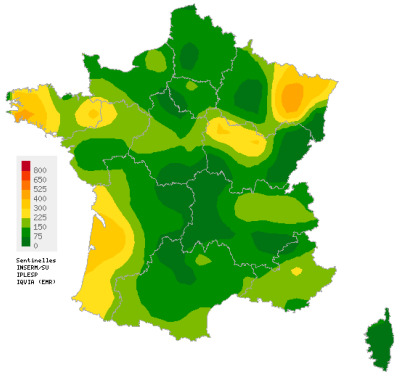
Epidemiological surveillance bulletin for the week 47 of the year 2025, from 11/17/2025 to 11/23/2025

Sentinelles

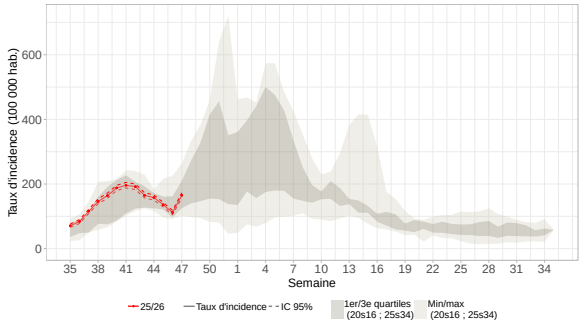
Acute Respiratory Infection (ARI)

Covid-19, Influenza and other respiratory viruses

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 (2025w47), the incidence rate of acute respiratory infection (ARI) cases consulting in general practice was estimated at **165 cases per 100,000 population (95% CI [157; 173])**.

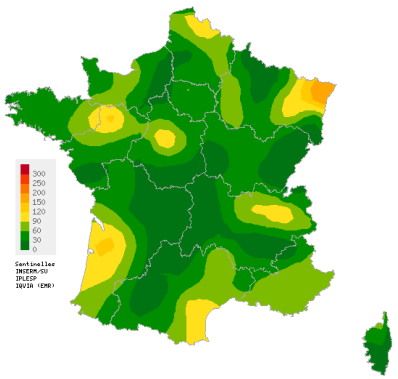
Subject to future data consolidation, this rate is **increasing** compared to the previous week and corresponds to a **similar level of activity to** those usually observed at this time of the year (consolidated data for 2025w46: 112 [105; 118]).

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.

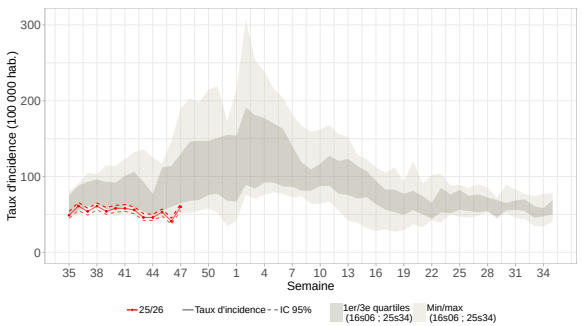
Data sources: Sentinelles, Electronic Medical Records (EMR) IQVIA

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 (2025w47), the incidence rate of acute diarrhea cases seen in general practice was estimated at **60 cases per 100,000 population (95% CI [55; 64])**.

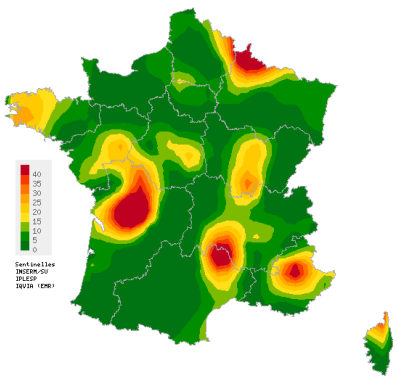
Subject to future data consolidation, this rate is **increasing** compared to the previous week but remains at a **lower level of activity** than those usually observed at this time of the year (consolidated data for 2025w46: 41 [37; 45]).

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

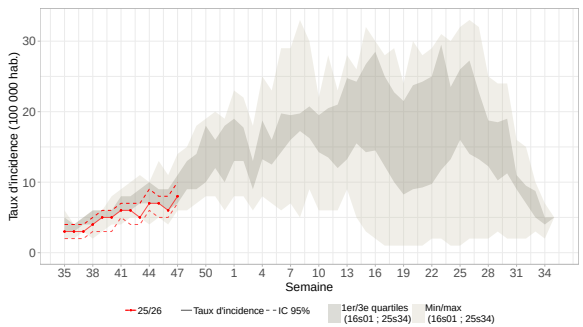
Data sources: Sentinelles, Electronic Medical Records (EMR) IQVIA

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 (2025w47), the incidence rate of Chickenpox cases seen in general practice was estimated at **8 cases per 100,000 population (95% CI [7; 10])**.

Subject to future data consolidation, this rate is **slightly increasing** compared to the previous week and corresponds to a **similar level of activity** to those usually observed at this time of the year (consolidated data for 2025w46: 6 [5; 8]).

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

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

Incidence rates by french region

Epidemiological surveillance bulletin for the week 47 of the year 2025, from 11/17/2025 to 11/23/2025

Sentinelles

Regions	Acute respiratory infection	Acute diarrhea	Chickenpox
Auvergne-Rhône-Alpes	142 [120 ; 163]	59 [45 ; 73]	6 [2 ; 11]
Bourgogne-Franche-Comté	146 [109 ; 183]	31 [14 ; 48]	13 [2 ; 24]
Bretagne	287 [243 ; 332]	65 [44 ; 87]	11 [3 ; 20]
Centre-Val de Loire	120 [85 ; 155]	52 [29 ; 76]	6 [0 ; 14]
Corse	73 [22 ; 123]	56 [10 ; 101]	25 [0 ; 56]
Grand Est	244 [211 ; 278]	83 [64 ; 103]	10 [3 ; 18]
Hauts-de-France	103 [81 ; 125]	87 [67 ; 107]	7 [1 ; 12]
Ile-de-France	146 [129 ; 163]	48 [38 ; 58]	9 [4 ; 13]
Normandie	143 [110 ; 176]	40 [22 ; 57]	4 [0 ; 9]
Nouvelle-Aquitaine	227 [195 ; 259]	62 [46 ; 78]	11 [3 ; 18]
Occitanie	130 [105 ; 156]	49 [34 ; 65]	5 [0 ; 9]
Pays de la Loire	137 [98 ; 176]	54 [28 ; 79]	13 [2 ; 24]
Provence-Alpes-Côte d'Azur	186 [153 ; 219]	69 [49 ; 88]	6 [0 ; 12]

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

Activity levels

- Low activity
- Moderate activity
- High activity

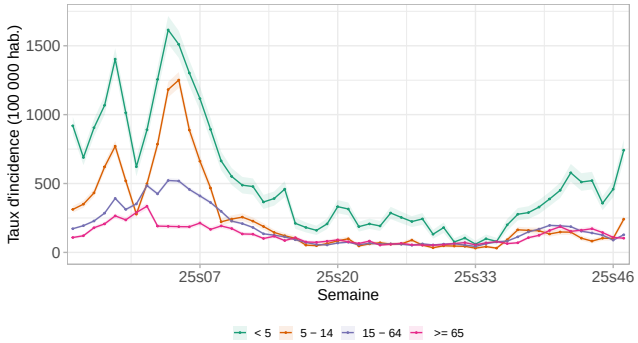
For the three indicators, the blue curve corresponds to the change in the incidence rate per 100,000 population for the current year. For ARI, previous years (since 2020) are shown with the grey curves. For acute diarrhea and chickenpox, the distribution of weekly incidence rates for the previous years 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 47 of the year 2025, from 11/17/2025 to 11/23/2025

Sentinelles

ARI incidence rates by age groups



Incidence rates of ARI cases by age groups

Last week (2025w47), subject to future data consolidation, incidence rates were estimated at:

- **0-4 age group**: 742 cases per 100 000 population (95% CI [666; 819]) (consolidated data for 2025w46: 459 [401; 517]);

- **5-14 age group**: 241 cases per 100 000 population (95% CI [213; 270]) (consolidated data for 2025w46: 102 [85; 120]);

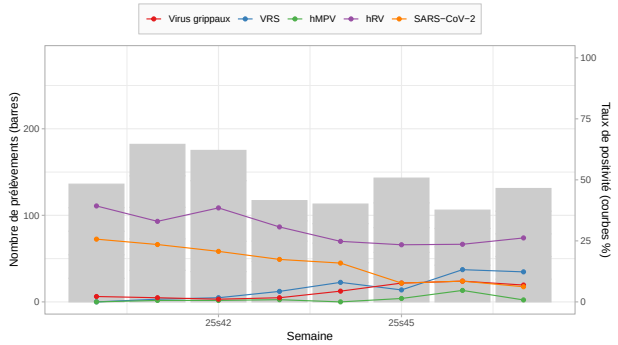
- **15-64 age group** : 128 cases per 100 000 population (95% CI [119; 137]) (consolidated data for 2025w46: 89 [82; 96]);

- **65 and above age group** : 103 cases per 100 000 population (95% CI [90; 117]) (consolidated data for 2025w46: 109 [96; 123]).

Incidence rates are **increasing in children** (0-4 and 5-14 age groups) **and in the 15-64 age group, and stable in the 65+ age group** compared to those of the previous week.

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

Circulation of respiratory viruses in general practice and pediatric



Number of weekly samples taken and positive rate for the five families of respiratory viruses tested

Since 2025w40, **1,103** samples have been tested by general practitioners and pediatricians participating in the 2025/2026 virological surveillance of ARI.

Last week (2025w47), **131 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**: **26%** (33/126) (consolidated data for 2025w46: 24% (25/106));
- **Respiratory syncytial virus (RSV)**: **12%** (16/130) (consolidated data for 2025w46: 13% (14/106));
- **Influenza viruses**: **7%** (9/130) (consolidated data for 2025w46: 9% (9/106));
- **SARS-CoV-2 (Covid-19)**: **6%** (8/130) (consolidated data for 2025w46: 9% (9/106));
- **Metapneumovirus**: **1%** (1/126) (consolidated data for 2025w46: 5% (5/106)).

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

Description of IRA cases seen in general practice

Last week (2025w47), 486 cases of ARI were reported by Sentinelles general practitioners. Among these, 358 (74% of reported cases) were described and had the following characteristics:

- **Median age**: 30 years (range from 4 months to 94 years);
- **Male/female sex-ratio**: 0.75 (140/187);
- **Risk factors**: 16% (48/298) of the patients had risk factors for complications;
- **Hospitalization**: 1% [0; 2.3] of the patients were hospitalized after the consultation (3/295).

Data source: Sentinelles

In conclusion

Last week (2025w47), subject to future data consolidation, the incidence of ARI cases seen in general practice consultations was **increasing** compared to the previous week. This increase was **observed mainly in children** (0-4 and 5-14 age group), but **also in the 15-64 age group**.

The viruses mainly detected in sampled patients consulting for an acute respiratory infection were **rhinovirus**, **RSV**, and **influenza viruses**.

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

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

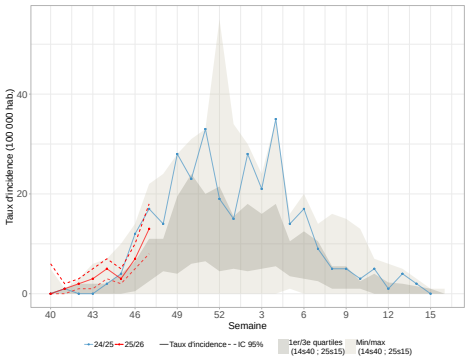
RSV infection and bronchiolitis

Epidemiological surveillance bulletin for the week 47 of the year 2025, from 11/17/2025 to 11/23/2025

Sentinelles

Incidence rates of RSV infection cases

Increasing activity at a moderate level



Incidence rates of RSV infection cases seen in general practice since 2025s40 and comparison to historical data (*)

Last week (2025w47), 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 **24 cases per 100,000 population** (95% CI [17; 32]), corresponding to 16,396 [11,269; 21,523] new cases.

Subject to future data consolidation, this rate is **increasing for two consecutive weeks** (consolidated data for 2025w46: 14 [9; 18]), and is at a **moderate level of activity**.

Description of RSV infection cases seen in general practice

Since surveillance resumed (2025w40), the 56 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);

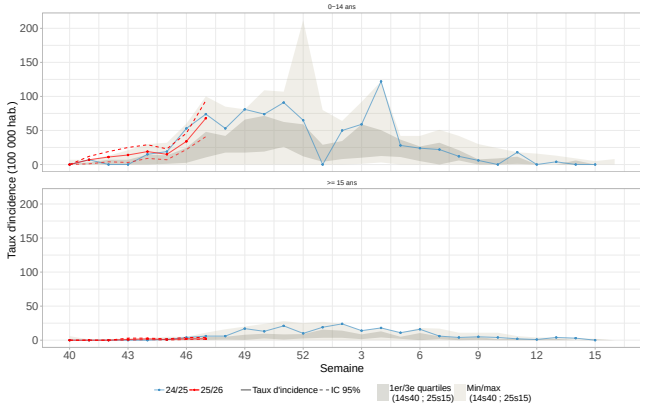
- Male/female sex ratio: 0,75 (24/32);

- Risk factors: 21% (3/14) of patients had risk factors for complications;

- Hospitalization: no patient was hospitalized following consultation (0/48).

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 with historical data

Last week (2025w47), incidence rates of **RSV infection** cases seen in general practice among patients consulting for an ARI were estimated at:

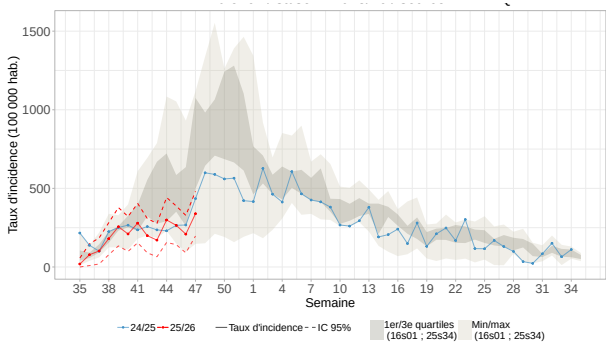
- 0-14 years: 125 cases per 100,000 population (95% CI [82; 169]), corresponding to 13,937 [9,086; 18,788] new cases;

- 15 years and above: 4 cases per 100,000 population (95% CI [2; 7]), corresponding to 2,459 [842; 4,077] 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 (2025w47), the incidence rate of **bronchiolitis** cases seen in general practice was estimated at **339 cases per 100,000 population** (95% CI [197; 481]) **in children under 1 year old.**

Subject to future data consolidation, this rate is **increasing** compared to the previous week but corresponds to a **lower level of activity** than those usually observed at this time of the year (consolidated data for 2025w46: 209 [90; 328]).

Data source: Electronic Medical Records (EMR) IQVIA

In conclusion

Last week (2025w47), subject to future data consolidation, the incidence of **RSV infection** cases seen in general practice among patients consulting for an ARI was **increasing** for the second consecutive week. **This increase was mainly observed in children aged 0-14 years**.

Furthermore, we observe an **increase in the incidence of bronchiolitis in children under 1 year** seen by general practitioners, compared to the previous week. However the **level of bronchiolitis activity** in this age group is **lower than that 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.

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

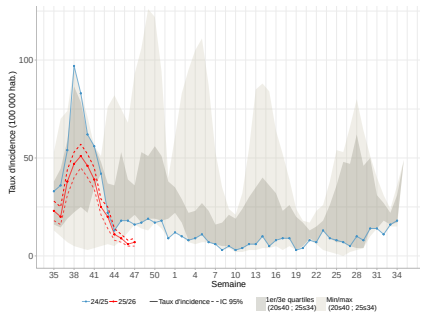
Covid-19 and influenza

Epidemiological surveillance bulletin for the week 47 of the year 2025, from 11/17/2025 to 11/23/2025

Sentinelles

Incidence rates of Covid-19 cases

Stable activity at a low level



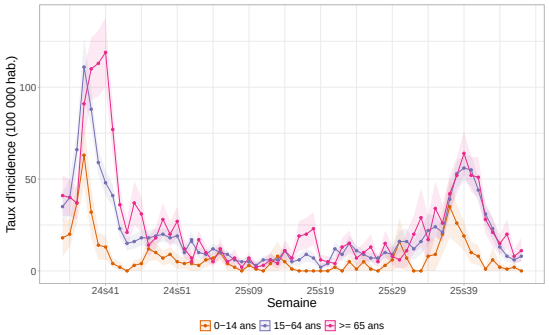
Incidence rate of Covid-19 cases and comparison with historical data

Last week (2025w47), the incidence rate of Covid-19 cases seen in general consultations for an ARI has been estimated at **7 cases per 100,000 population** (95% CI [5; 9]) corresponding to 4,863 [3,402; 6,324] new cases.

Subject to future data consolidation, this rate is **stable** compared to the previous week (consolidated data for 2025w46: 6 [4; 7]).

Data source: Sentinelles

Incidence rates of Covid-19 cases by age groups



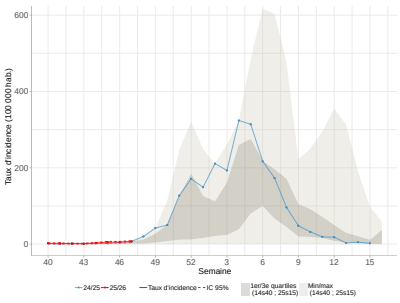
Incidence rates of Covid-19 cases by age groups

Last week (2025w47), subject to future data consolidation, the incidence rates of **Covid-19** cases seen in general practice for an ARI were **stable** in all age groups 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 observed in general practice since 2025s40 compared to previous seasons (*)

Last week (2025w47), the incidence rate of **influenza** cases seen in general practice among patients consulting for an ARI was estimated at **12 cases per 100,000 population** (95% CI [7; 17]), corresponding to 8,135 [4,896; 11,374] new cases.

Subject to future data consolidation, this rate is **stable** compared to the previous week (consolidated data for 2025w46: 9 [6; 13]).

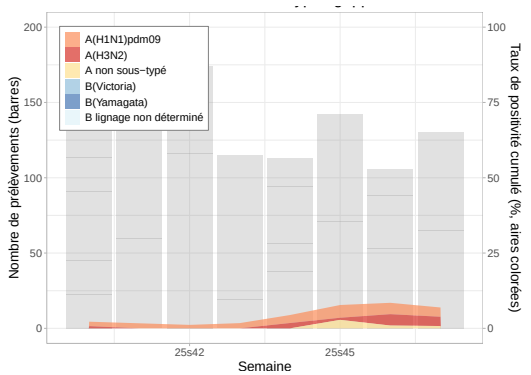
Description of confirmed influenza cases seen in primary care

Since the beginning of virological surveillance (2025w40), the 44 confirmed influenza cases swabbed by general practitioners and pediatricians presented the following characteristics:

- **Median age**: 35 years (range from 1 month to 78 years old);
- **Male/female sex-ratio**: 0.83 (20/24);
- **Vaccination**: 98% (42/43) were not vaccinated against influenza;
- **Risk factors**: 12% (3/25) of the patients had risk factors for complications;
- **Hospitalization**: no patient was hospitalized at the end of the consultation (0/34).

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 the week 2025w40, the 44 influenza viruses identified were all **type A** and were distributed as follows: **59% of type A(H1N1)*pdm09*** *(*26/44*)*, **27% of type A(H3N2)** *(*12/44*)*, and **14% of non-subtyped A viruses** *(*6/44*)*.

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

In conclusion

Last week (2025w47), subject to future data consolidation:

- The incidence of **Covid-19** cases seen in general practice for an ARI was **stable** compared to the previous week, and was at a **low level of activity.**

- The incidence of **influenza** cases seen in general practice 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.

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

General organization and partners

Sentinelles

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, statisticans, physicians, IT specialists and technicians.

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Partners and supervisory bodies

Partners

Supervisory bodies of Sentinelles network

French General Practionner 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

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!