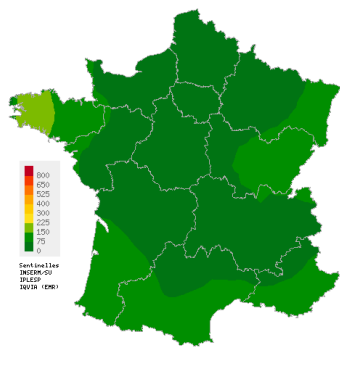
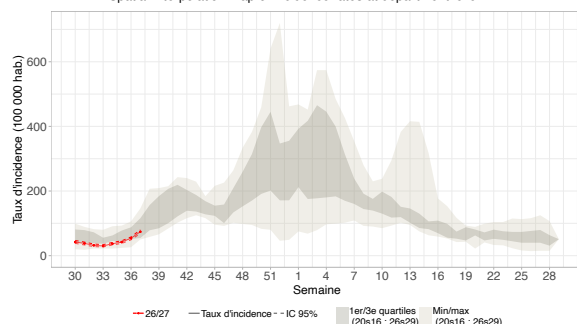


Acute Respiratory Infection (ARI)

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 (2026w37), the incidence rate of acute respiratory infection (ARI) cases consulting in general practice was estimated at **74 cases per 100,000 population** (95% CI [69; 80]).

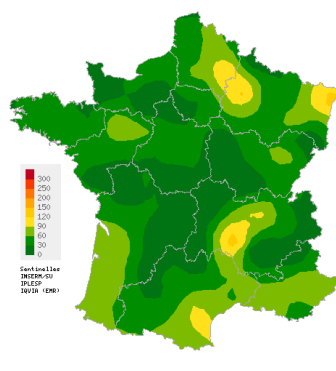
Subject to future data consolidation, this rate is **increasing** compared to the previous week and corresponds to a **similar activity level** to those usually observed at this time of the year (consolidated data for 2026w36: 54 [49; 58]).

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.

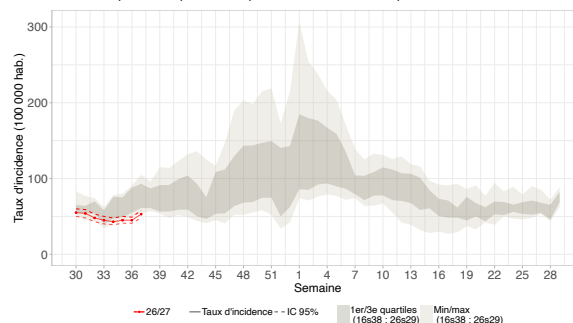
Data sources: Sentinelles, Electronic Medical Records (EMR) IQVIA

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 (2026w37), the incidence rate of acute diarrhea cases seen in general practice was estimated at **53 cases per 100,000 population** (95% CI [48; 58]).

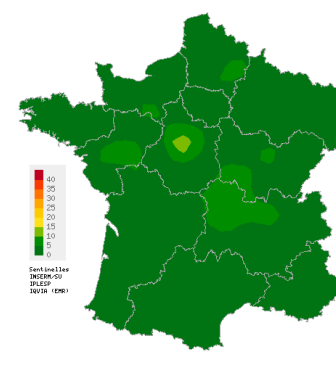
Subject to future data consolidation, this rate is **slightly increasing** compared to the previous week and corresponds to a **lower activity level** than those usually observed at this time of the year (consolidated data for 2026w36: 45 [41; 49]).

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

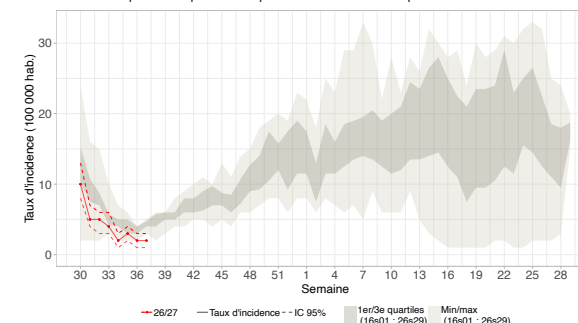
Data sources: Sentinelles, Electronic Medical Records (EMR) IQVIA

Chickenpox

Low activity in general practice



Spatial interpolation map of incidence rates at department level

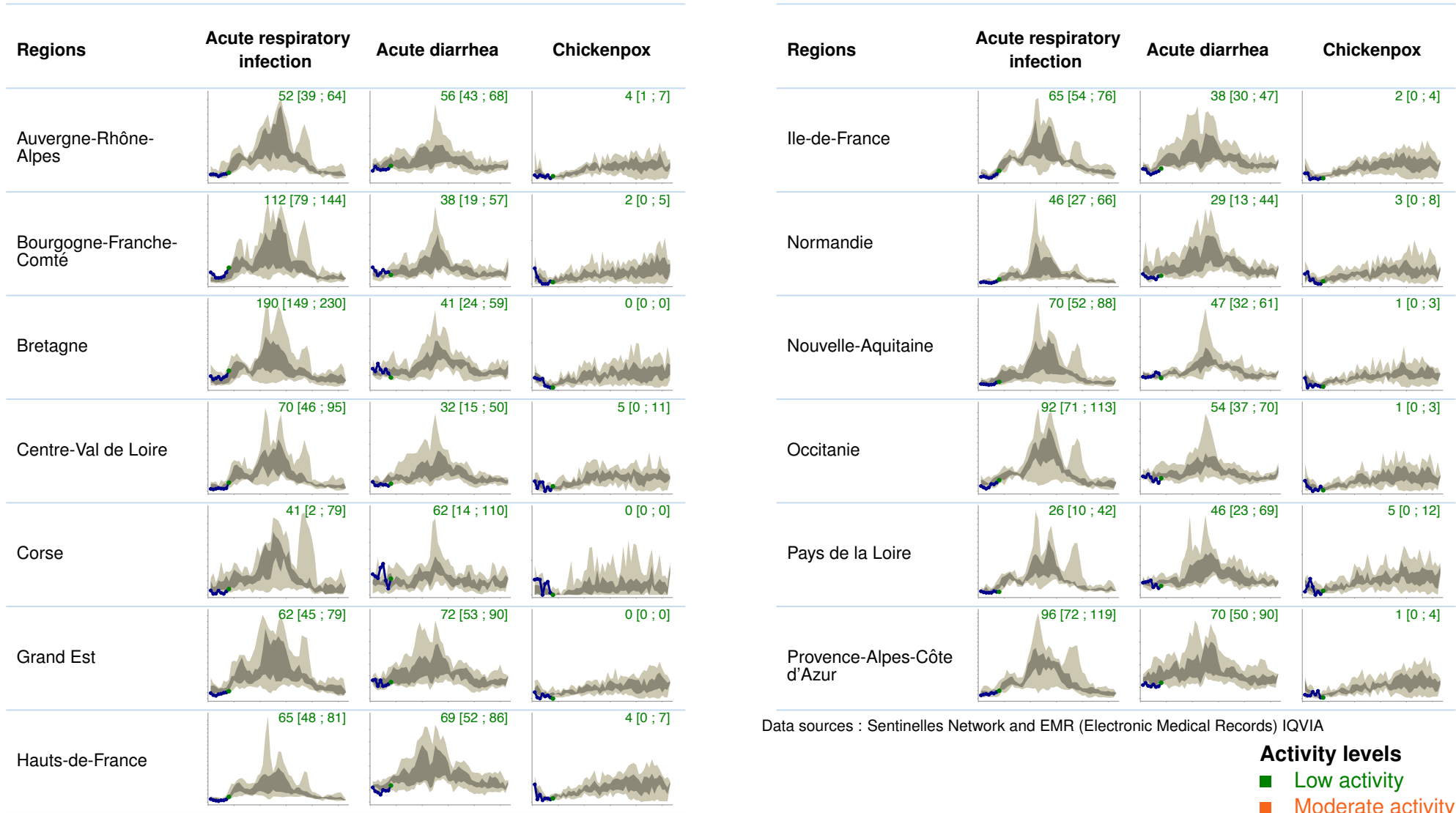


Incidence rates and comparison with historical data

In mainland France, last week (2026w37), the incidence rate of chickenpox cases seen in general practice was estimated at **2 cases per 100,000 population** (95% CI [1; 3]).

Subject to future data consolidation, this rate is **stable** compared to the previous week and corresponds to a **lower activity level** than those usually observed at this time of the year (consolidated data for 2026w36: 2 [1; 3]).

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



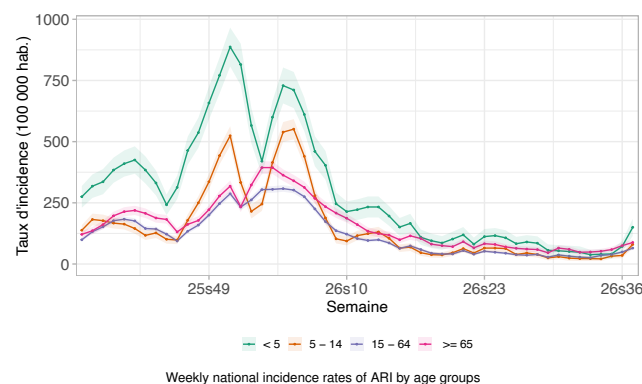
For the three indicators, the blue curve corresponds to the change in the incidence rate per 100,000 population for the current year. For ARI, previous years (since 2020) are shown with the grey curves. For acute diarrhea and chickenpox, the distribution of weekly incidence rates for the previous years 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 37 of the year 2026, from 09/07/2026 to 09/13/2026

Sentinelles

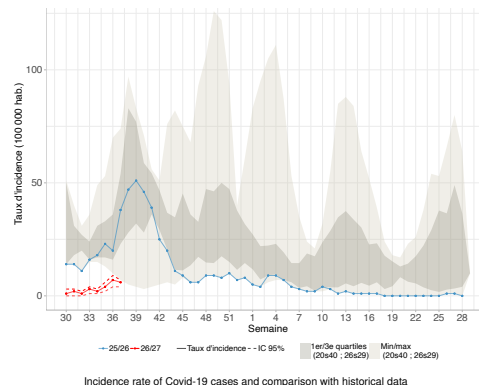
ARI incidence rates by age groups



Last week (2026w37), subject to future data consolidation, incidence rates were **increasing in all age groups**, and **especially among children** (0-5 and 5-14 age groups) compared to the previous week.

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

Incidence rates of Covid-19 cases Stable activity at a low level



Last week (2026w37), the incidence rate of Covid-19 cases seen in general consultations for an ARI has been estimated at **5 cases per 100,000 population** (95% CI [3; 7]) corresponding to 3,685 [2,351; 5,019] new cases.

Subject to future data consolidation, this rate is **stable** compared to the previous week (consolidated data for 2026w36: 7 [5; 9]).

Data source: Sentinelles

Circulation of respiratory viruses in general practice and pediatrics

Since 2026w36, **106 samples** have been tested by general practitioners and pediatricians participating in the 2026/2027 virological surveillance of ARI. Last week (2026w37), **67 patients** were tested. The positivity rates of samples were as follows:

- **Rhinovirus (hRV)**: 11/60 (18%) (consolidated data in 2026w36: 8/39 (21%));
- **SARS-CoV-2 (COVID-19)**: 7/60 (12%) (consolidated data in 2026w36: 3/39 (8%));
- **Influenza viruses**: 5/67 (7,5%) (consolidated data for 2026w36: 6/39 (15%));
- **Respiratory syncytial virus (RSV)**: 0/60 (consolidated data in 2026w36: 1/39 (3%));
- **Metapneumovirus (hMPV)**: 0/60 (consolidated data in 2026w36: 0/39).

Data sources: Sentinelles, DMG (départements universitaires de médecine générale), SOS Médecins

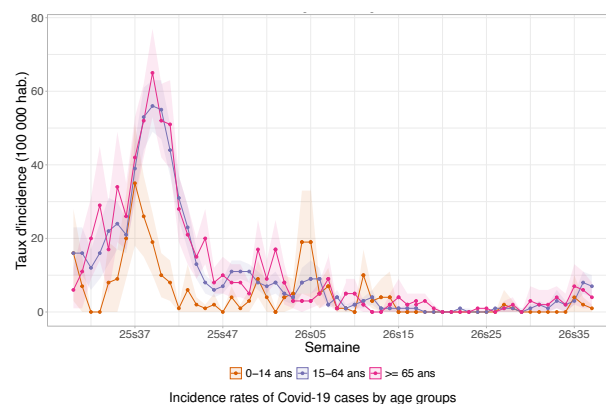
Description of IRA cases seen in general practice

Last week (2026w37), 293 cases of ARI were reported by Sentinelles general practitioners. Among these, 204 (69% of reported cases) were described and had the following characteristics:

- **Median age**: 30 years (range from 5 months to 92 years);
- **Male/female sex-ratio**: 0.85 (85/100);
- **Risk factors**: 17% (29/175) of the patients had risk factors for complications;
- **Hospitalization**: no patient was hospitalized after the consultation (0/173).

Data source: Sentinelles

Incidence rates of Covid-19 cases by age groups



Last week (2026w37), 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

In conclusion

Last week (2026w37), subject to future data consolidation :

- The incidence of ARI cases seen in general practice was **increasing** compared to those of the previous week, especially among children (0-5 and 5-14 age groups);
- The incidence of **Covid-19** cases seen in general practice for an ARI was **stable** compared to the previous week.

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 Universities of Rouen, Côte d'Azur and Strasbourg.

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.

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Partners and supervisory bodies

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Sentinelles IQVIA

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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!