Key messages

There were increases in consultations about upper respiratory tract infection (URTI), pharyngitis/scarlet fever and asthma during week 37, but they remain within expected levels (figures 1 & 1a, 3 & 3a, 10 & 10a).

A Heat-Health Watch system operates in England from 1 June to 15 September each year. As part of the Heatwave Plan for England, the PHE Real-time Syndromic Surveillance team will be routinely monitoring the public health impact of hot weather using syndromic surveillance data during this period.

Heat-health watch level (current reporting week): Level 1 Summer preparedness

http://www.metoffice.gov.uk/weather/uk/heathealth/

Diagnostic indicators at a glance:

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Trend</th>
<th>Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>Upper respiratory tract infection</td>
<td>increasing</td>
<td>similar to baseline levels</td>
</tr>
<tr>
<td>Influenza-like illness</td>
<td>no trend</td>
<td>below baseline levels</td>
</tr>
<tr>
<td>Pharyngitis</td>
<td>increasing</td>
<td>above baseline levels</td>
</tr>
<tr>
<td>Scarlet fever</td>
<td>no trend</td>
<td>similar to baseline levels</td>
</tr>
<tr>
<td>Lower respiratory tract infection</td>
<td>no trend</td>
<td>similar to baseline levels</td>
</tr>
<tr>
<td>Pneumonia</td>
<td>no trend</td>
<td>below baseline levels</td>
</tr>
<tr>
<td>Gastroenteritis</td>
<td>no trend</td>
<td>below baseline levels</td>
</tr>
<tr>
<td>Vomiting</td>
<td>no trend</td>
<td>below baseline levels</td>
</tr>
<tr>
<td>Diarrhoea</td>
<td>decreasing</td>
<td>below baseline levels</td>
</tr>
<tr>
<td>Asthma</td>
<td>increasing</td>
<td>similar to baseline levels</td>
</tr>
<tr>
<td>Wheeze</td>
<td>no trend</td>
<td>above baseline levels</td>
</tr>
<tr>
<td>Conjunctivitis</td>
<td>no trend</td>
<td>below baseline levels</td>
</tr>
<tr>
<td>Mumps</td>
<td>no trend</td>
<td>similar to baseline levels</td>
</tr>
<tr>
<td>Measles</td>
<td>no trend</td>
<td>similar to baseline levels</td>
</tr>
<tr>
<td>Rubella</td>
<td>no trend</td>
<td>similar to baseline levels</td>
</tr>
<tr>
<td>Pertussis</td>
<td>increasing</td>
<td>similar to baseline levels</td>
</tr>
<tr>
<td>Chickenpox</td>
<td>decreasing</td>
<td>similar to baseline levels</td>
</tr>
<tr>
<td>Herpes zoster</td>
<td>no trend</td>
<td>similar to baseline levels</td>
</tr>
<tr>
<td>Cellulitis</td>
<td>decreasing</td>
<td>below baseline levels</td>
</tr>
<tr>
<td>Impetigo</td>
<td>no trend</td>
<td>below baseline levels</td>
</tr>
<tr>
<td>Allergic rhinitis</td>
<td>decreasing</td>
<td>similar to baseline levels</td>
</tr>
<tr>
<td>Heat/sunstroke</td>
<td>no trend</td>
<td>similar to baseline levels</td>
</tr>
<tr>
<td>Insect Bites</td>
<td>decreasing</td>
<td>below baseline levels</td>
</tr>
</tbody>
</table>

GP practices and denominator population:

<table>
<thead>
<tr>
<th>Year</th>
<th>Week</th>
<th>GP Practices Reporting**</th>
<th>Population size**</th>
</tr>
</thead>
<tbody>
<tr>
<td>2017</td>
<td>37</td>
<td>3,176</td>
<td>25.5 million</td>
</tr>
</tbody>
</table>

**based on the average number of practices and denominator population in the reporting working week.
1: Upper respiratory tract infection (URTI)

Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages).

1b: Upper respiratory tract infection (URTI) by age

Average daily incidence rate by week per 100,000 population (all England).

2: Influenza-like illness

Daily incidence rates (and 7-day moving average*) per 100,000 population (all England, all ages).

* 7-day moving average adjusted for bank holidays.
3: Pharyngitis or scarlet fever

Daily incidence rates (and 7-day moving average*) per 100,000 population (all England, all ages).

3a: Pharyngitis/scarlet fever by age

Average daily incidence rate by week per 100,000 population (all England).

4: Scarlet fever

Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, based on a population denominator of approximately 5.5 million patients).

* 7-day moving average adjusted for bank holidays.
5: Lower respiratory tract infection (LRTI)

Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages).

6: Pneumonia

Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages).

7: Gastroenteritis

Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages).

* 7-day moving average adjusted for bank holidays.
7a: Gastroenteritis by age
Average daily incidence rate by week per 100,000 population (all England).

8: Vomiting
Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages).

8a: Vomiting by age
Average daily incidence rate by week per 100,000 population (all England).

* 7-day moving average adjusted for bank holidays.
9: Diarrhoea

Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages).

9a. Diarrhoea by age

Average daily incidence rate by week per 100,000 population (all England).

* 7-day moving average adjusted for bank holidays.
10: Asthma

Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages).

10a: Asthma by age

Average daily incidence rate by week per 100,000 population (all England).

11: Wheeze

Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages).

* 7-day moving average adjusted for bank holidays.
12: Conjunctivitis

Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages).

12: Conjunctivitis by age

Average daily incidence rate by week per 100,000 population (all England).

13: Mumps

Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages).

* 7-day moving average adjusted for bank holidays.
13a: Mumps by age

Average daily incidence rate by week per 100,000 population (all England).

14: Measles

Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages).

15: Rubella

Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages).

* 7-day moving average adjusted for bank holidays.
16: Pertussis
Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages).

17: Chickenpox
Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages).

17a: Chickenpox by age
Average daily incidence rate by week per 100,000 population (all England).

* 7-day moving average adjusted for bank holidays.
18: **Herpes zoster**
Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages).

19: **Cellulitis**
Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages).

20: **Impetigo**
Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages).

* 7-day moving average adjusted for bank holidays.
21: Allergic rhinitis

Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages).

21a: Allergic rhinitis by age

Average daily incidence rate by week per 100,000 population (all England).

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* 7-day moving average adjusted for bank holidays.
22: Heat/sunstroke
Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages).

23: Insect bites
Average daily incidence rate by week per 100,000 population (all England).

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* 7-day moving average adjusted for bank holidays.
• The Public Health England GP in hours surveillance system is a syndromic surveillance system monitoring community-based morbidity recorded by GP practices.

• GP consultation data are analysed on a daily basis to identify national and regional trends. A statistical algorithm underpins each system, routinely identifying activity that has increased significantly or is statistically significantly high for the time of year. Results from these daily analyses are assessed by the ReSST, along with analysis by age group, and anything deemed of public health importance is alerted by the team.

• This system captures anonymised GP morbidity data from two GP clinical software systems, EMIS, from version 1 of the QSurveillance® database, and TPP SystmOne.

• Baselines represent seasonally expected levels of activity and are constructed from historical data. Furthermore, they take into account any known substantial changes in data collection, population coverage or reporting practices. Baselines are refreshed using the latest data on a regular basis.

• From week 40 2015 the influenza-like illness thresholds illustrated in the bulletin appendix maps are calculated using the “Moving Epidemic Method” (MEM). MEM is used as a standard methodology for setting influenza surveillance thresholds across Europe.

• The ILI thresholds have been calculated separately for each of the nine PHE Centres to allow for structural differences between areas e.g. background rates are historically higher in London than other areas of England.

• The current ILI thresholds are based on six previous influenza seasons (excluding the 2009/10 H1N1 pandemic). In future, thresholds will be recalculated each year incorporating the latest season’s data.

Maps:

We thank and acknowledge the University of Nottingham, ClinRisk® and the contribution of EMIS and EMIS practices. Data source: version 1 of the QSurveillance® database.

We thank TPP, ResearchOne and the SystmOne GP practices contributing to this surveillance system.

Acknowledgements:

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