Summary.

Reporting week: 04 to 10 November 2019.

During week 45, selected respiratory indicators remained high in the under 1 year age group, in line with seasonal increases in respiratory syncytial virus (RSV).

Remote Health Advice:
During week 45, there were further increases in NHS 111 difficulty breathing calls in young children aged under 1 year, in line with seasonal respiratory syncytial virus activity (figure 5a). Also, sore throat calls increased and are above baseline levels (figures 6 & 6a).

GP In Hours:
GP consultations for asthma increased during week 45 and remain above seasonally expected levels (figure 10), increases have been highest in adults aged 45 years and over (figure 10a).

GP Out of Hours:
GP out-of-hours contacts for bronchitis/bronchiolitis and difficulty breathing continued to increase in children aged under 1 year during week 45 (figures 4a & 5a), in line with increasing levels of respiratory syncytial virus circulating in the community.

Emergency Department:
During week 45 ED attendances for bronchiolitis continued to increase in young children aged under 1 year in line with seasonal increases in respiratory syncytial virus activity (figure 6a).

Ambulance:
During week 45 there was nothing new to report.
Key messages are provided from each individual system.

The different PHE syndromic surveillance systems access data from different areas of the national health care system.

Each syndromic surveillance system is able to monitor a different selection of syndromic indicators based upon a different case mix of patients.

Access to the full version of each syndromic surveillance bulletin is available through the PHE Syndromic Surveillance website found at: (https://www.gov.uk/government/collections/syndromic-surveillance-systems-and-analyses); reports are made available on Thursday afternoons.

Remote Health Advice Syndromic Surveillance System:
A remote health advice syndromic surveillance system that monitors syndromic calls from remote health advice services e.g. NHS 111 each day across England.

GP In-Hours Syndromic Surveillance System:
A large UK-based general practitioner surveillance system monitoring daily consultations for a range of clinical syndromic indicators.

GP Out-of-Hours Syndromic Surveillance System (GPOOHS):
A syndromic surveillance system monitoring daily GP out-of-hours activity and unscheduled care across England using a range of clinical syndromic indicators.

Emergency Department Syndromic Surveillance System (EDSSS):
A national ED network across England monitoring daily attendances and presenting symptoms/diagnoses.

National Ambulance Syndromic Surveillance System (NASSS):
The national ambulance syndromic surveillance system (NASSS) monitors daily calls made by persons to an ambulance trust. All 10 ambulance trusts in England provide data.

We thank and acknowledge the contribution of all data providers including:

- NHS 111 and NHS Digital.
- QSsurveillance®; University of Oxford; EMIS/EMIS practices; ClinRisk®.
- TPP, ResearchOne and participating SystmOne GP practices.
- Advanced Health & Care and the participating OOH service providers.
- Participating EDSSS emergency departments.
- Royal College of Emergency Medicine.

PHE Real-time Syndromic Surveillance Team.
Public Health England, 1st Floor, 5 St Philips Place, Birmingham, B3 2PW. Tel: 0344 225 3560 > Option 4 > Option 2. Web: https://www.gov.uk/government/collections/syndromic-surveillance-systems-and-analyses

Contact ReSST: syndromic.surveillance@phe.gov.uk