



Summary.

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Reporting week: 25 November to 01 December 2019.

During week 48, syndromic indicators associated with seasonal influenza continued to rise, particularly in the North of England and in children aged 5-14 years. Also, selected respiratory indicators continued to increase in the under 1 year age group, in line with seasonal increases in respiratory syncytial virus (RSV).

Remote Health Advice:

During week 48, NHS 111 cold/flu calls continued to increase (figure 2); activity was particularly noted in the 5-14 years age group and in the North of England (figures 2d & 2e). Cough and difficulty breathing calls continued to increase in young children aged under 15 years, in line with seasonal respiratory syncytial virus activity (figures 4a & 5a).

[Access bulletin.](#)

GP In Hours:

During week 48 GP consultations for influenza-like illness (ILI) reached baseline levels at a national level (figure 2c), and in the North East, North West, Yorkshire and Humber and East Midlands. Levels were highest in the North West and North East, where activity has reached medium levels (figures 2b, 20 & 21). The greatest increases in ILI have been noted in the 1-4 and 5-14 years age group (figure 2a).

[Access bulletin.](#)

GP Out of Hours:

GP out-of-hours contacts for influenza-like illness continued to increase during week 48 remaining above the baseline threshold (figure 3a). Bronchitis/bronchiolitis contacts continued to increase in children aged under 1 year during week 48 (figure 4a), in line with increasing levels of respiratory syncytial virus circulating in the community.

[Access bulletin.](#)

Emergency Department:

During week 48 ED attendances for influenza-like-illness continued to increase in children aged 5-14 years (figure 7a).

[Access bulletin.](#)

ED attendances for bronchiolitis also showed a further increase in young children aged under 1 year in line with seasonal increases in respiratory syncytial virus activity (figure 6a).

Ambulance:

During week 48 breathing problems remained above expected levels (figure 2), in line with increasing influenza and respiratory syncytial virus activity.

[Access bulletin.](#)

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- 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.
 - QSurveillance®; University of Oxford; EMIS/EMIS practices; ClinRisk®.
 - TPP, ResearchOne and participating SystemOne GP practices.
 - Advanced Health & Care and the participating OOH service providers.
 - Participating EDSSS emergency departments.
 - Royal College of Emergency Medicine.
 - North East, North West, Yorkshire, East Midlands, West Midlands, East of England, London, South East Coast, South Central, and South Western NHS Ambulance Trusts and The Association of Ambulance Chief Executives.
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PHE Real-time Syndromic Surveillance Team.

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Web: <https://www.gov.uk/government/collections/syndromic-surveillance-systems-and-analyses>