



11 December 2019

Year: 2019 Week: 49

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## Key messages

Data to: 08 December 2019

During week 49 there were further increases in ED attendances for acute respiratory infections (figure 5). Influenza-like-illness attendances increased and remain highest in children aged 5-14 years (figure 7a).

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

A Cold Watch System operates in England from 1 November to 31 March each year. As part of the Public Health England Cold Weather Plan for England the PHE Real-time Syndromic Surveillance Team will be monitoring the impact of cold weather on syndromic surveillance data during this period.

Cold weather alert level (current reporting week): **Level 1/2 Winter preparedness/Alert & readiness**  
<http://www.metoffice.gov.uk/weather/uk/coldweatheralert/>

## Diagnostic indicators at a glance:

Further details on the syndromic indicators reported can be found on page 9.

Indicator	Current trend
Respiratory	increasing
Acute Respiratory Infection	increasing
Bronchiolitis	increasing
Influenza-like Illness	increasing
Pneumonia	increasing
Asthma	no trend
Gastrointestinal	decreasing
Gastroenteritis	no trend
Cardiac	decreasing
Myocardial Ischaemia	decreasing

## EDSSS weekly report statistics

Only Type 1 EDs meeting the weekly reporting criteria are included (see page 6 for details).

\*max EDs included across full time period reported in charts, individual days may include fewer EDs.

Date	Total Attendances	Diagnoses Coded Number	Diagnoses Coded %	Type 1 EDs Included
02/12/2019	29,672	19,993	67.4%	101
03/12/2019	27,197	17,977	66.1%	101
04/12/2019	27,040	18,165	67.2%	100
05/12/2019	26,064	17,062	65.5%	99
06/12/2019	26,388	17,684	67.0%	101
07/12/2019	24,962	17,184	68.8%	100
08/12/2019	25,523	16,590	65.0%	95
<b>Total</b>	<b>186,846</b>	<b>124,655</b>	<b>66.7%</b>	<b>(max)* 101</b>

## 1: Total attendances.

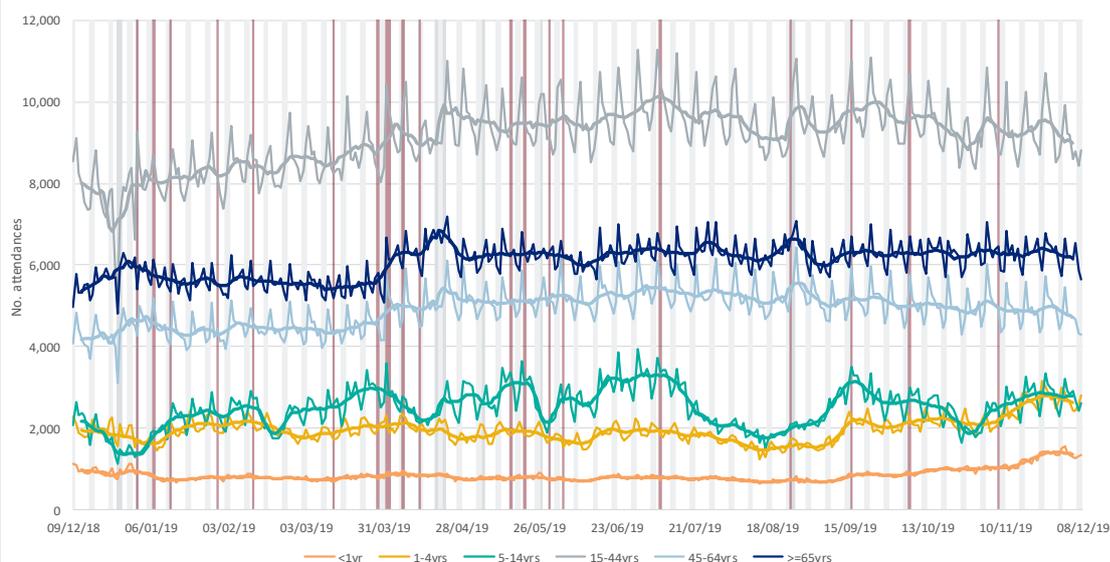
Daily number of total attendances recorded, across the EDSSS network.

The entry of new ED(s) is marked by a vertical red line (see page 6 for inclusion criteria).



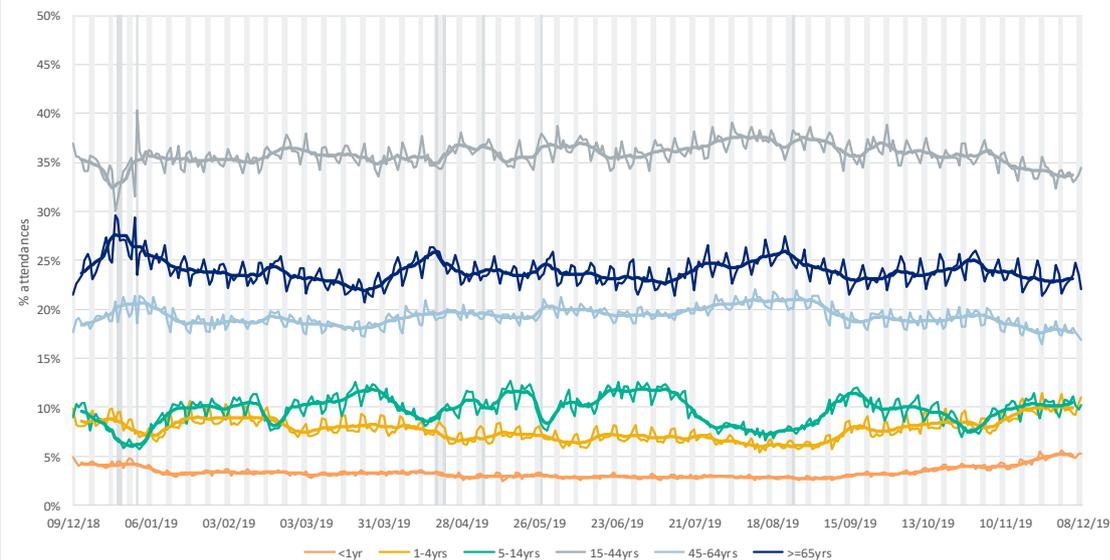
## 2: Daily attendances by age: Numbers.

Daily number of total attendances, by age group, recorded across the EDSSS network.



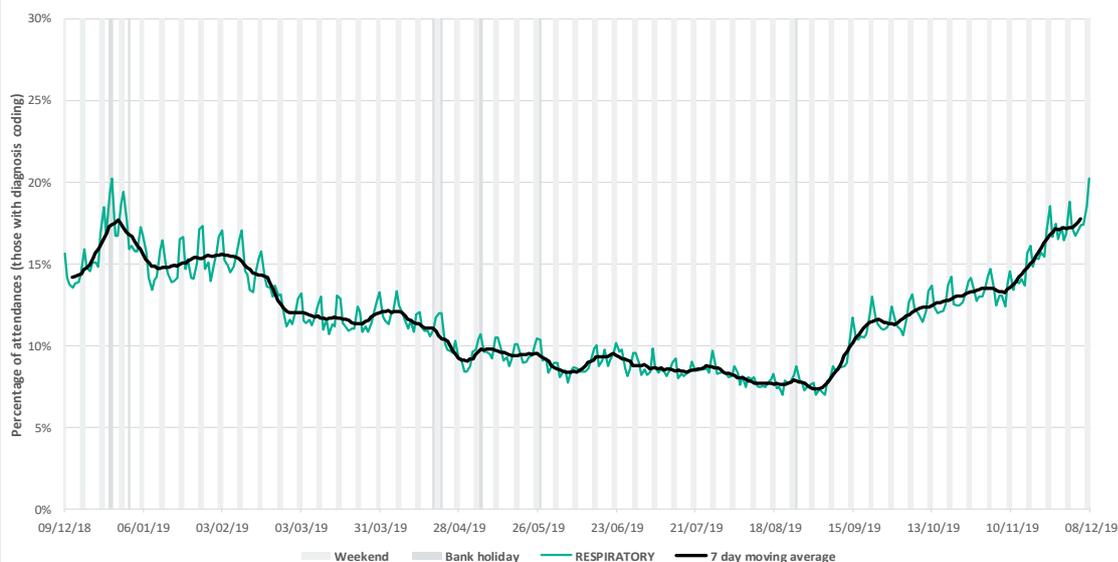
## 3: Daily attendances by age: Percentages

Daily percentage of total attendances by age group, recorded across the EDSSS network.



#### 4: Respiratory.

Daily percentage of all attendances recorded as respiratory attendances across the EDSSS network.



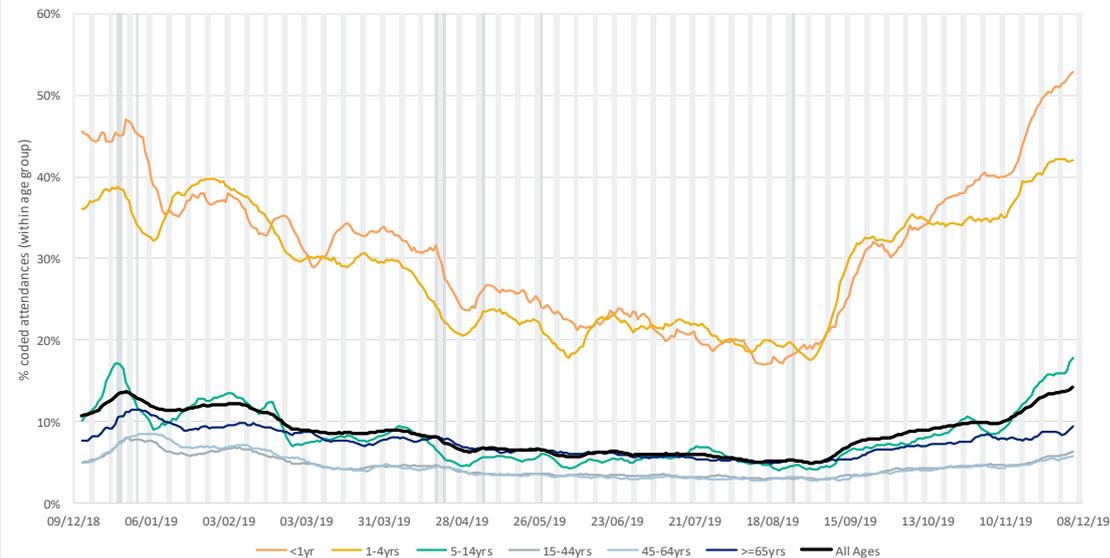
#### 5: Acute Respiratory Infection.

Daily percentage of all attendances recorded as acute respiratory infection attendances across the EDSSS network.



#### 5a: Acute Respiratory Infection by age group.

7 day moving average of ARI attendances presented as a proportion of the attendances within each age group.



**6: Bronchiolitis/  
bronchitis.**

Daily percentage of all attendances recorded as bronchiolitis/ acute bronchitis attendances across the EDSSS network.



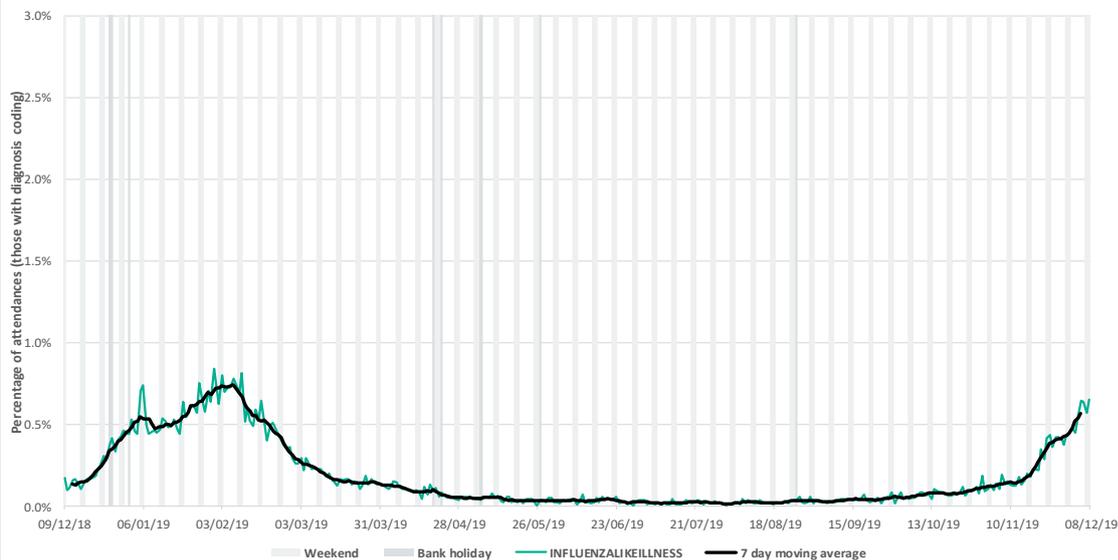
**6a: Bronchiolitis/  
bronchitis by age group**

7 day moving average of bronchitis/ bronchiolitis attendances presented as a proportion of the attendances within each age group.



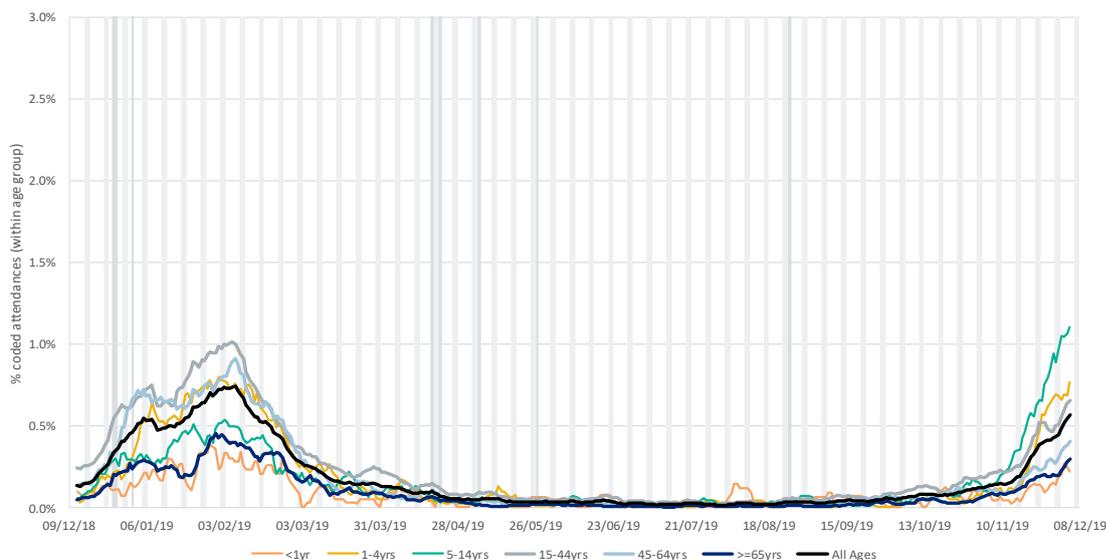
**7: Influenza-like  
illness.**

Daily percentage of all attendances recorded as influenza-like illness attendances across the EDSSS network.



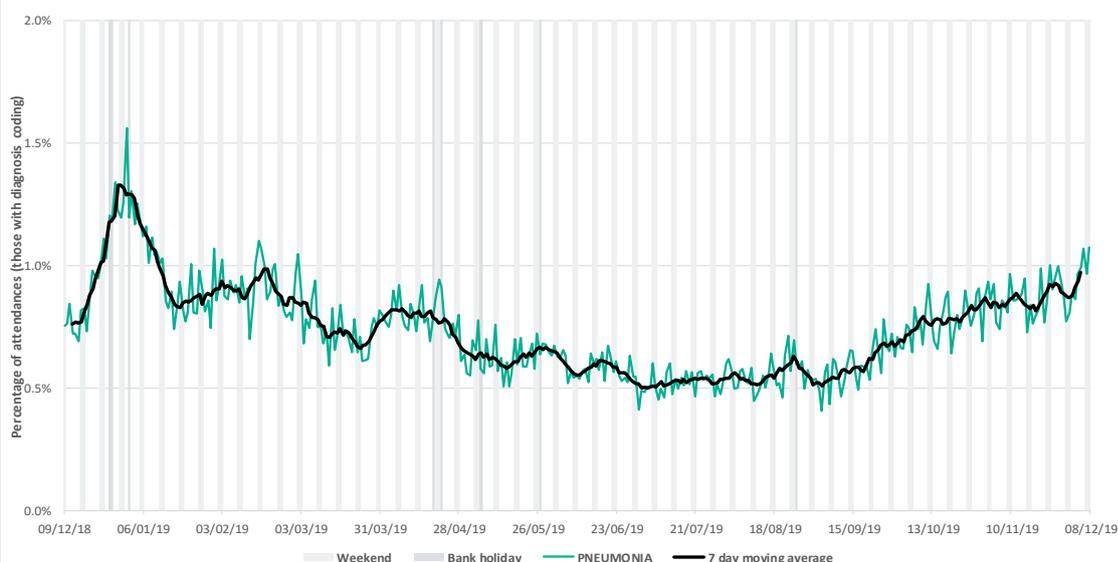
**7a: Influenza-like illness by age group**

7 day moving average of influenza-like illness attendances presented as a proportion of the attendances within each age group.



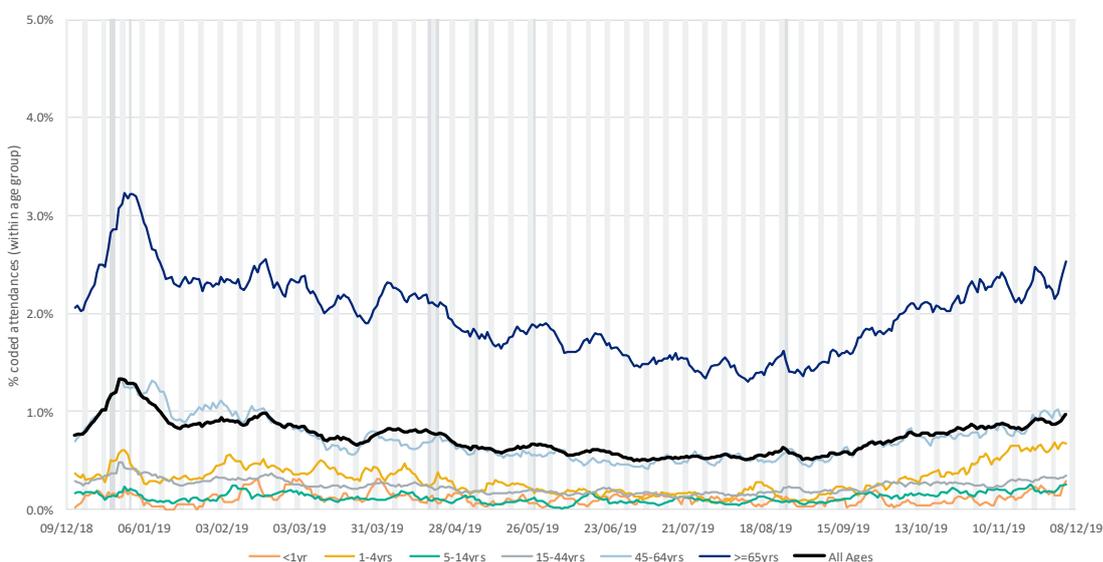
**8: Pneumonia.**

Daily percentage of all attendances recorded as pneumonia attendances across the EDSSS network.



**8a: Pneumonia by age group.**

7 day moving average of pneumonia attendances presented as a proportion of the attendances within each age group.



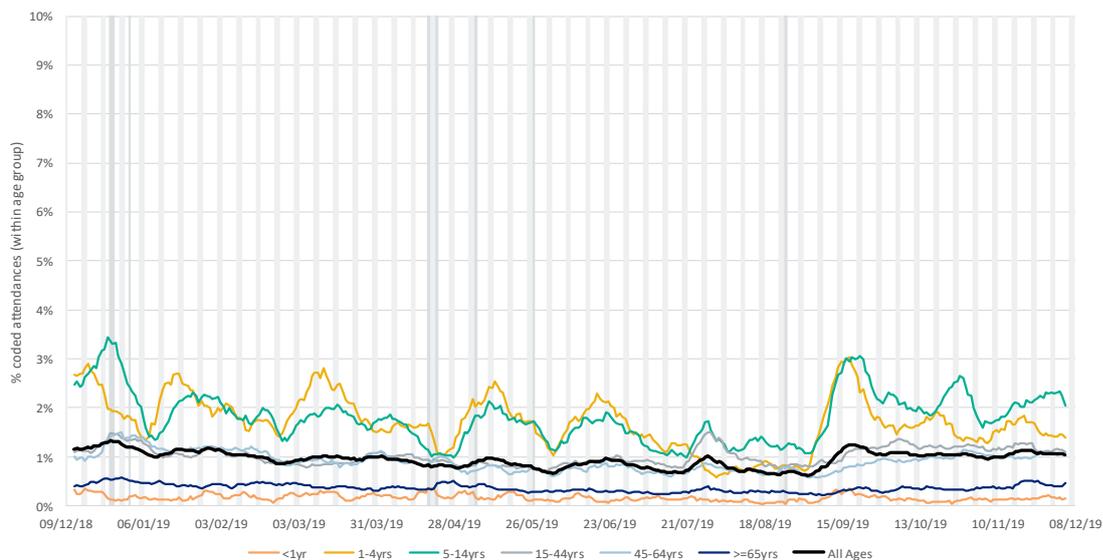
**9: Asthma.**

Daily percentage of all attendances recorded as asthma/wheeze/difficulty breathing attendances across the EDSSS network.



**9a: Asthma by age group.**

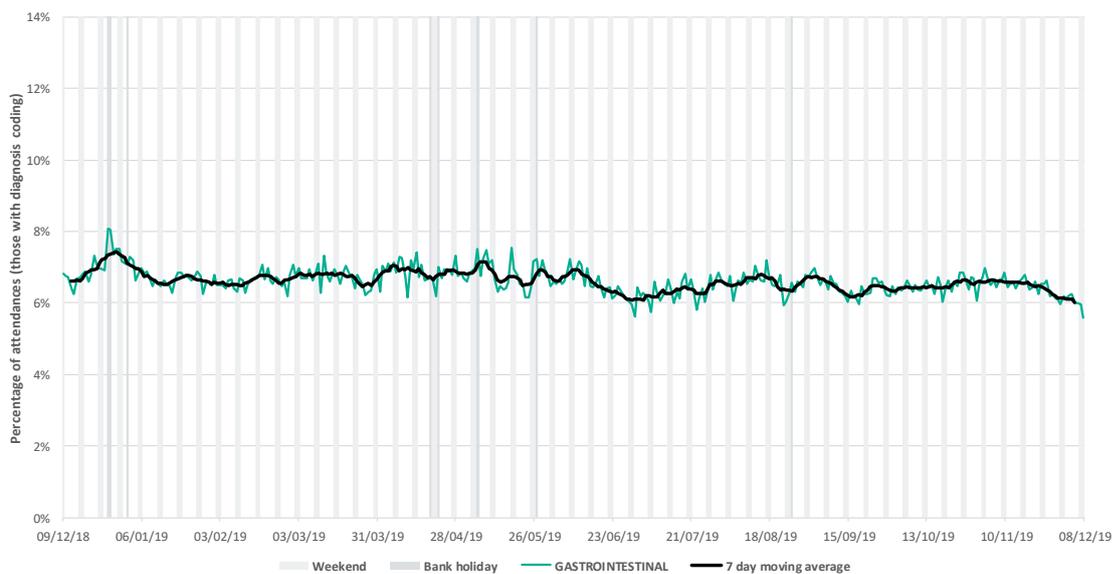
7 day moving average of asthma/wheeze/difficulty breathing attendances presented as a proportion of the attendances within each age group.



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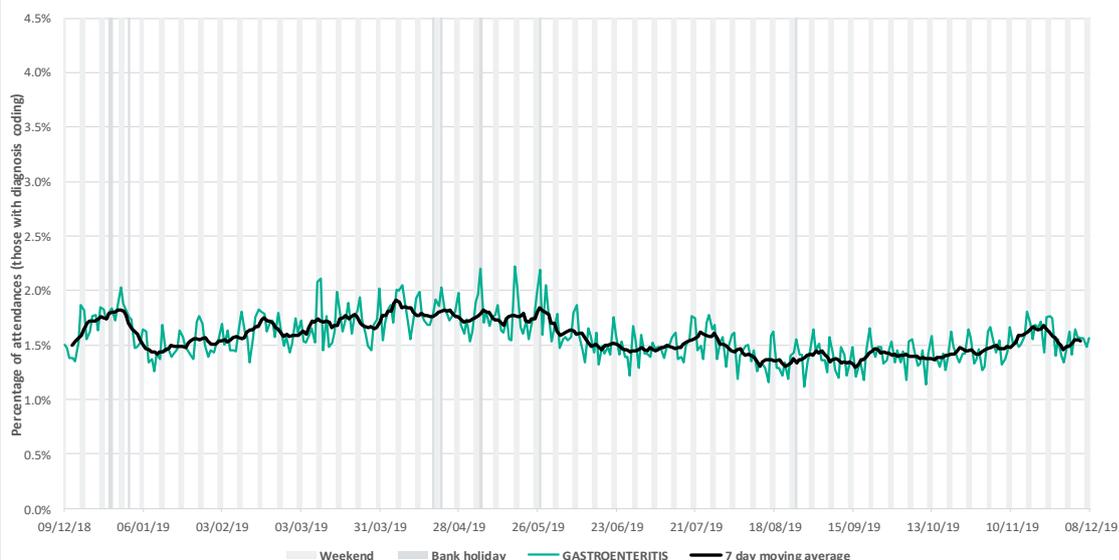
### 10: Gastrointestinal.

Daily percentage of all attendances recorded as gastrointestinal attendances across the EDSSS network.



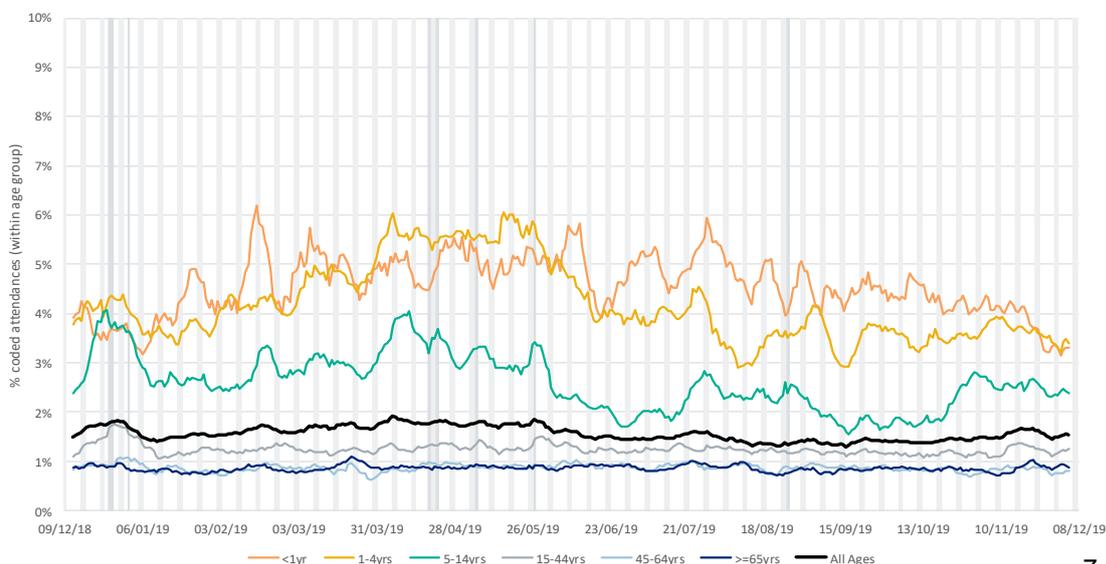
### 11: Gastroenteritis

Daily percentage of all attendances recorded as gastroenteritis attendances across the EDSSS network.



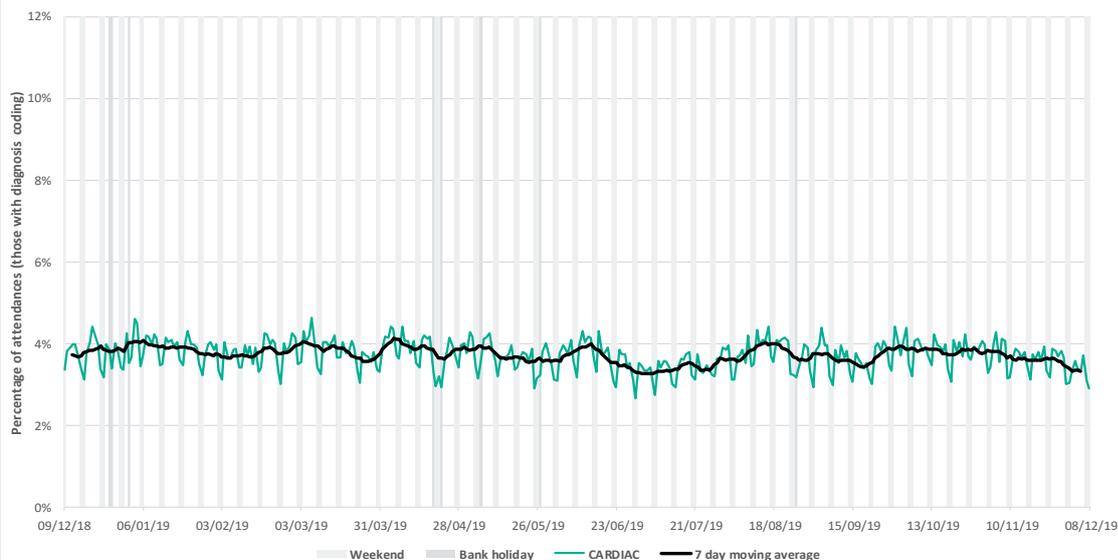
### 11a: Gastroenteritis by age group.

7 day moving average of gastroenteritis attendances presented as a proportion of the attendances within each age group.



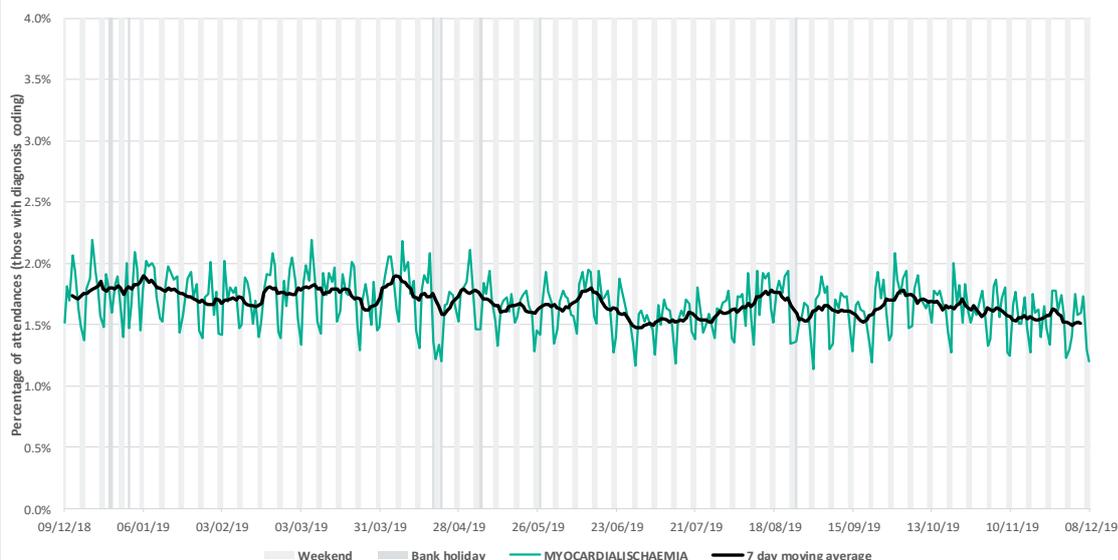
**12: Cardiac.**

Daily percentage of all attendances recorded as cardiac attendances across the EDSSS network.



**13: Myocardial Ischaemia.**

Daily percentage of all attendances recorded as myocardial ischaemia attendances across the EDSSS network.



**Notes and caveats:**

- ▶ **National EDSSS** began operating in April 2018
- ▶ Following the introduction of the Emergency Care Data Set (ECDS) the national reporting of secondary care activity data through the commissioning data sets mechanism from EDs to NHS Digital became a daily feed:  
<https://www.england.nhs.uk/ourwork/tsd/ec-data-set/>
- ▶ EDSSS receives an automated daily transfer of anonymised ED data from NHS Digital
  
- ▶ The number of EDs reporting through ECDS continues to increase
- ▶ Not all EDs currently provide data through ECDS on a daily basis
- ▶ EDs are eligible for inclusion in this report only where the **weekly EDSSS reporting criteria** have been met during the surveillance week reported:
  - Data relates to attendances at a type 1 ED
  - Data for 4 of the 7 days was received by PHE
  - Data for those days was received within 2 calendar days of the patient arrival
- ▶ Where an ED meets these criteria, all data received from that ED previous to the current surveillance week is included.
- ▶ EDs eligible for inclusion is likely to change each week, which will in turn affect the historical data inclusion
  
- ▶ Individual EDs will not be identified in syndromic surveillance reporting in these bulletins
  
- ▶ All EDs report diagnoses to EDSSS using SnomedCT codes. Where Snomed codes are not used the ED is excluded from indicator analysis
- ▶ The syndromic indicators presented in this bulletin are based on the SnomedCT diagnosis codes reported by EDs:
  - Respiratory:** All respiratory diseases and conditions (infectious and non infectious).
    - Acute Respiratory Infections (ARI):** All acute infectious respiratory diseases.
    - Asthma:** As indicated by title.
    - Bronchiolitis/ bronchitis:** As indicated by title (excluding 'chronic').
    - Influenza-like Illness (ILI):** As indicated by title.
    - Pneumonia:** As indicated by title.
  - Gastrointestinal:** All gastrointestinal diseases and conditions (infectious and non infectious).
    - Gastroenteritis:** All infectious gastrointestinal diseases.
  - Cardiac:** All cardiac conditions.
    - Myocardial Ischaemia:** All ischaemic heart disease.
  
- ▶ **Sentinel EDSSS** 2010 to March 2018, collected data through a bespoke, voluntary network of EDs across England and Northern Ireland
- ▶ **Sentinel EDSSS** reports be found in bulletins up to and including week 13 2018:  
<https://www.gov.uk/government/collections/syndromic-surveillance-systems-and-analyses>

**Acknowledgements:**

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We are grateful to the clinicians in each ED and other staff within each Trust for their continued involvement in the EDSSS.

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**Emergency Department Syndromic Surveillance System Bulletin.**

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