

GP In Hours

Syndromic Surveillance System: England

In This Issue:

Key messages.

at a glance.

population.

indicators.

GP practices and denominator

National syndromic

Notes and further

information.

Appendix.

Diagnostic indicators

Key messages

Data to: 11 June 2017

Allergic rhinitis consultations increased during week 23, particularly in the 5 -14 years age group, in line with seasonal grass pollen activity, but remain below seasonally expected levels (figures 21 and 21a).

Mumps consultations remained at elevated levels during week 23 (figure 13). Highest rates are in the 5-14 and 15-44 years age groups (figure 13a).

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:

IndicatorTrendLevelUpper respiratory tract infection Influenza-like illnessdecreasing no trendbelow baseline levelsPharyngitisno trendbelow baseline levelsScarlet feverno trendbelow baseline levelsLower respiratory tract infectiondecreasingbelow baseline levelsPneumoniano trendsimilar to baseline levelsGastroenteritisno trendbelow baseline levelsVomitingno trendbelow baseline levelsDiarrhoeano trendbelow baseline levelsMeezeno trendbelow baseline levelsMumpsno trendbelow baseline levelsMumpsno trendbelow baseline levelsMumpsno trendbelow baseline levelsConjunctivitisno trendabove baseline levelsMumpsno trendabove baseline levelsMumpsno trendsimilar to baseline levelsMumpsno trendsimilar to baseline levelsRubellano trendsimilar to baseline levelsRubellano trendsimilar to baseline levelsRubellano trendsimilar to baseline levelsPertussisno trendsimilar to baseline levelsPertussisno trendsimilar to baseline levelsRubellano trendsimilar to baseline levelsRubellano trendsimilar to baseline levelsRubellano trendsimilar to baseline levelsHerpes zosterno trendsimilar to baseline levels<			
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Heat/sunstroke decreasing similar to baseline levels			
5	C C	•	
Insect Bites decreasing similar to baseline levels		0	
	Insect Bites	decreasing	similar to baseline levels

GP practices and denominator population:

Year	Week	GP Practices Reporting**	Population size**
2017	23	4,508	35.9 million

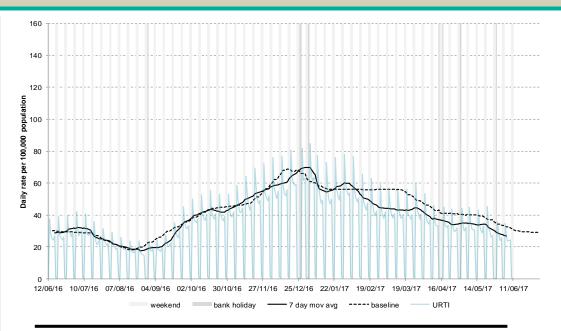
**based on the average number of practices and denominator population in the reporting working week.

WWW Public Health England

13 June 2017

1: Upper respiratory tract infection (URTI)

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



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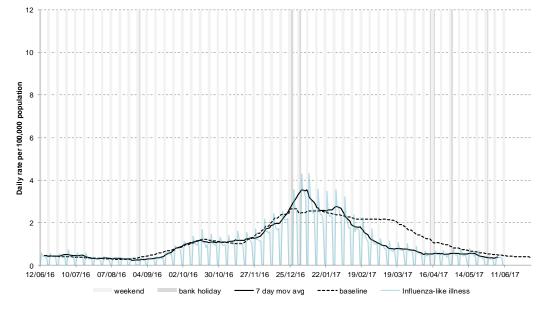
2: Influenza-like illness (ILI)

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

* 7-day moving average

adjusted for bank

holidays.



GP In Hours

Year: 2017 Week: 23

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3: Pharyngitis or scarlet fever

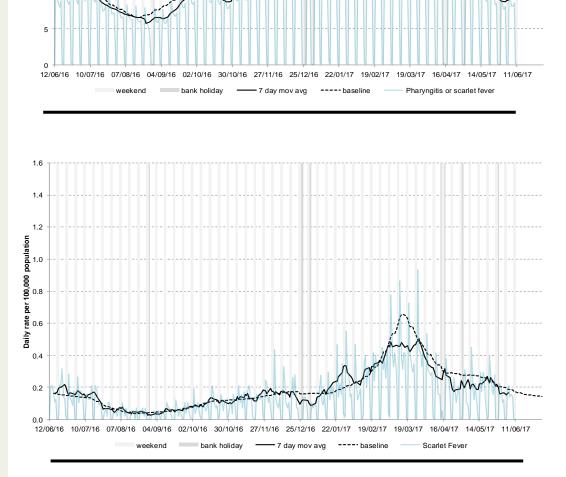
Daily incidence rates (and 7-day moving average*) per 100,000 population (all England, all ages). 35

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Daily rate per 100,000 population 0 00 00 000 001 10



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).



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* 7-day moving average adjusted for bank holidays.

Nublic Health England

13 June 2017

5: Lower respiratory tract infection (LRTI)

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

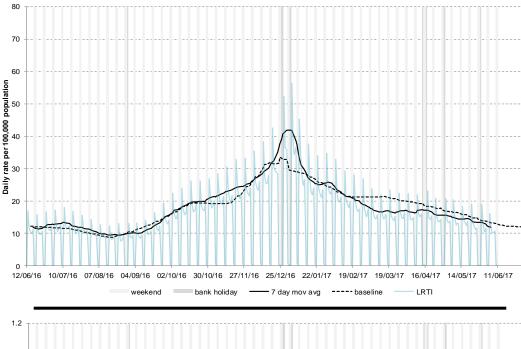
6: Pneumonia

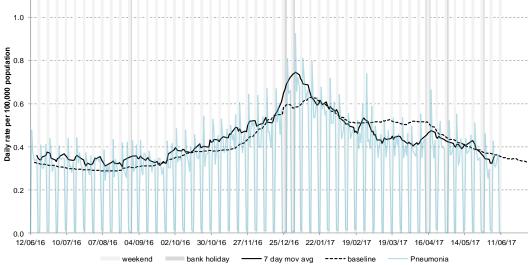
Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages).

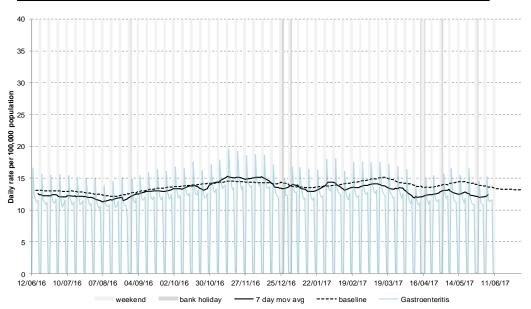


Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages).

* 7-day moving average adjusted for bank holidays.







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7a: Gastroenteritis by age

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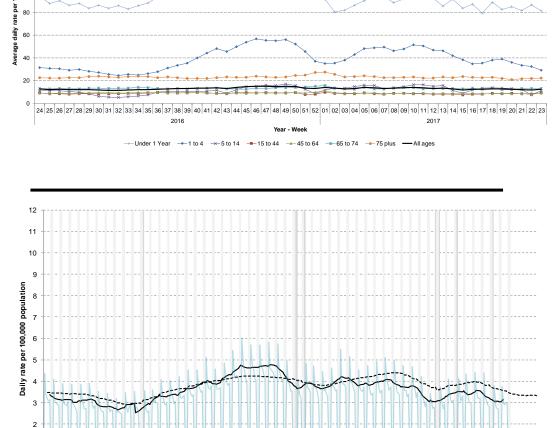
180

d GP patients 140

120

000 100

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



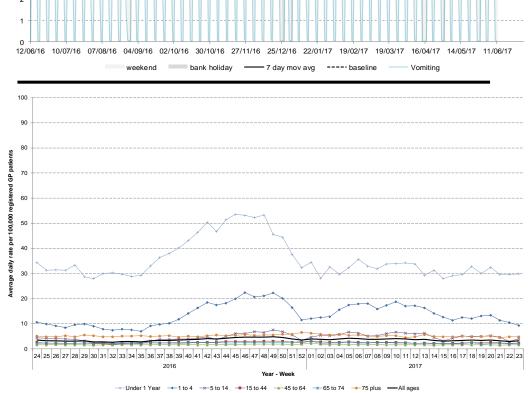
Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages).

8: Vomiting

8a: Vomiting by age

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

* 7-day moving average adjusted for bank holidays.

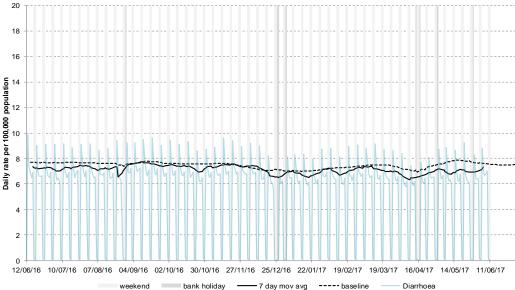


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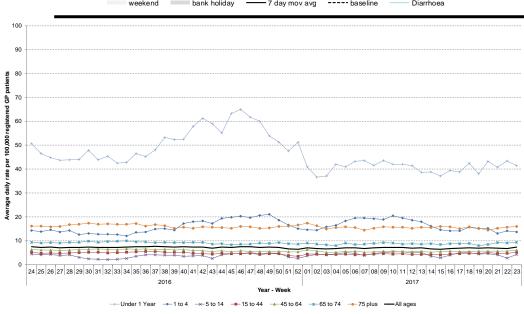
9: Diarrhoea

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).



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* 7-day moving average adjusted for bank holidays.

GP In Hours

(ear: 2017 Week: 23

10: Asthma

Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages). 6

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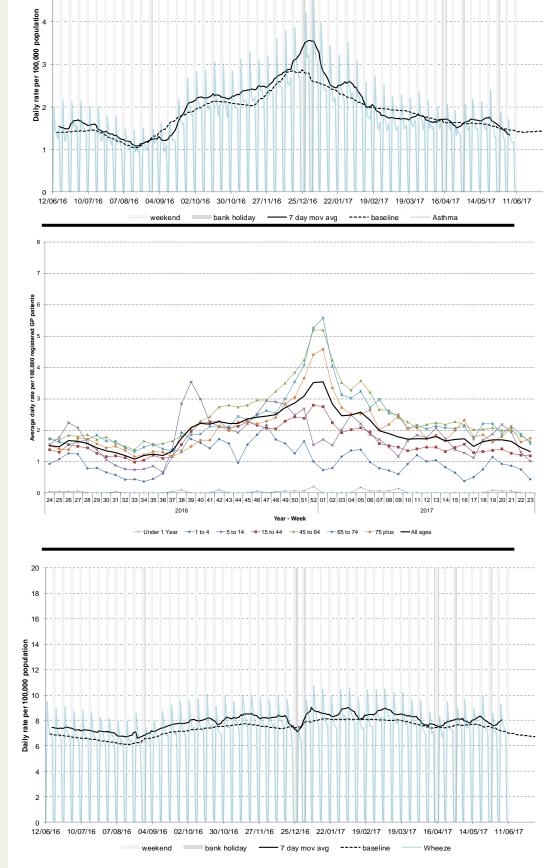
10a: Asthma by age

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



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

* 7-day moving average adjusted for bank holidays.



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Year: 2017 Week: 23

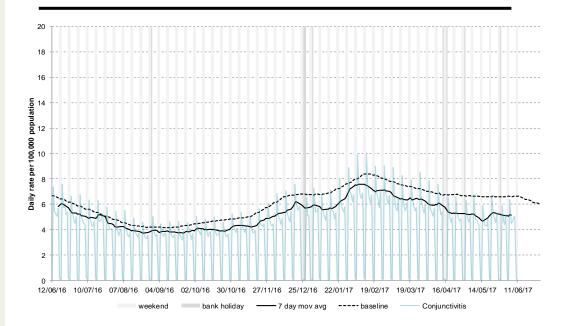
12: Conjunctivitis

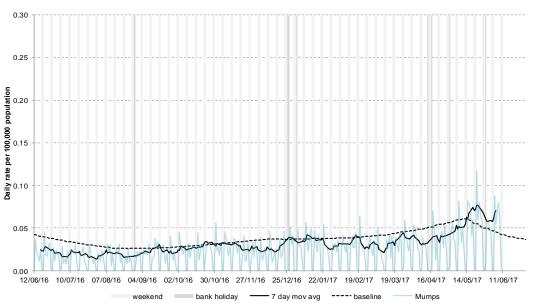
Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages).

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.



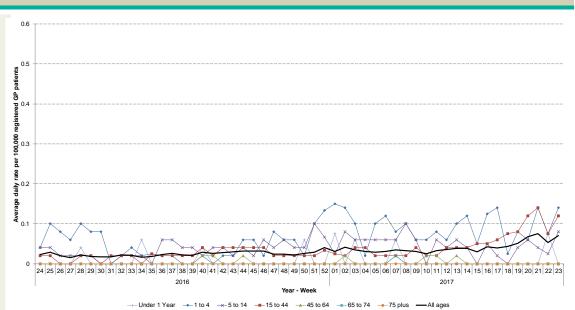


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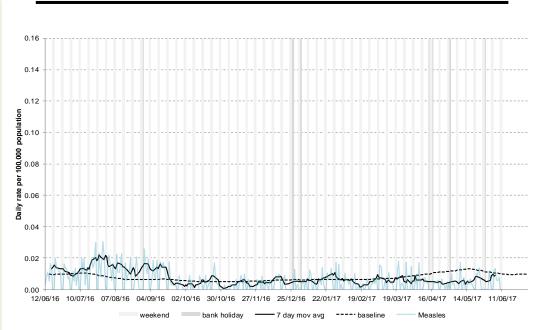
13a: Mumps by age

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



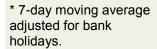
14: Measles

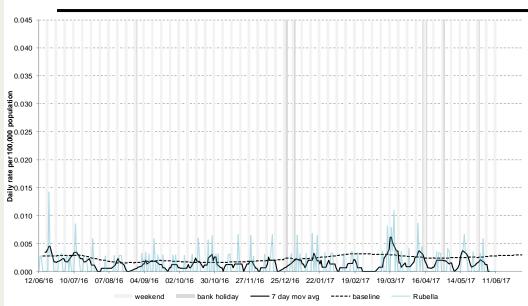
Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages).



15: Rubella

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





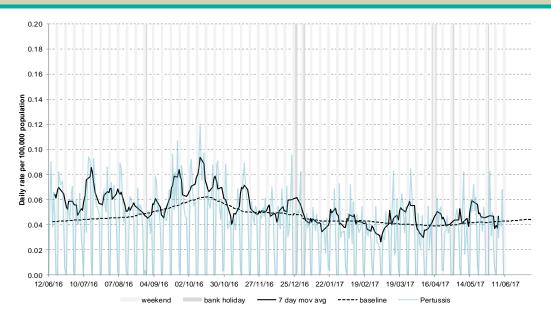
GP In Hours

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/ear: 2017 Week: 23

16: Pertussis

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

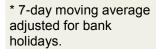


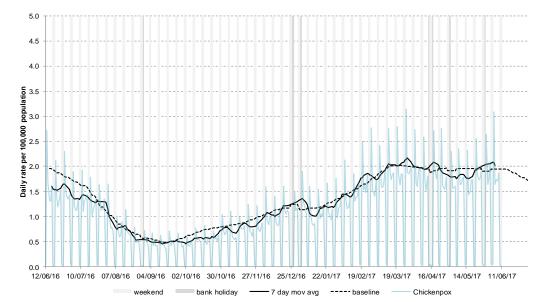
17: Chickenpox

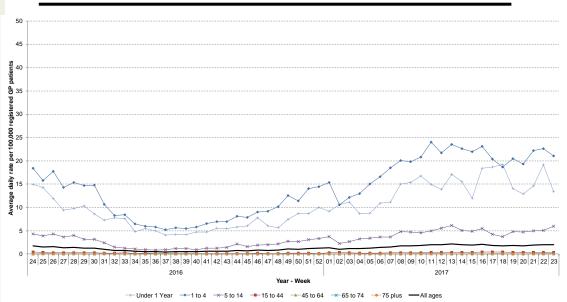
Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages).



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







18: Herpes zoster

Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages). 6.0

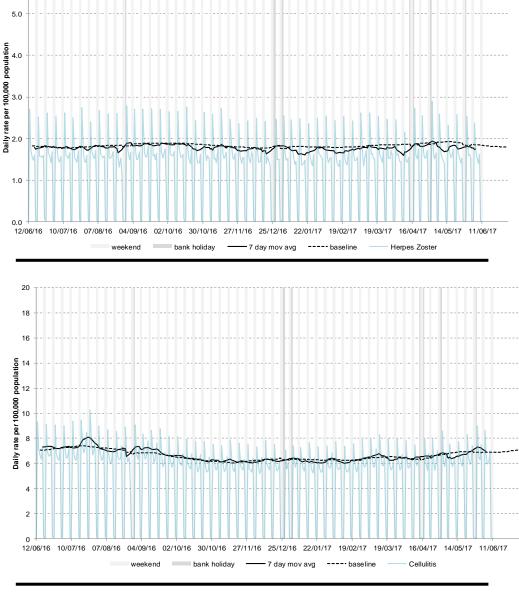
19: Cellulitis

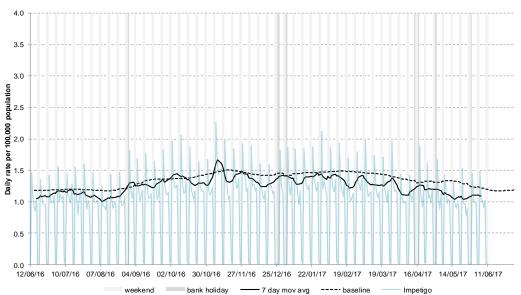
Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages).



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

* 7-day moving average adjusted for bank holidays.





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21: Allergic rhinitis

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

30 Daily rate per 100,000 population 57 57 10 5 0 VVV 12/06/16 10/07/16 07/08/16 04/09/16 02/10/16 30/10/16 27/11/16 25/12/16 22/01/17 19/02/17 19/03/17 16/04/17 14/05/17 11/06/17 weekend bank holiday - 7 day mov avg Allergic Rhinitis - - - baseline -_ 100 90 Average daily rate per 100,000 registered GP patients 80 70 60 50 40 30 20 10 0 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16 17 18 19 20 21 22 23 2016 2017 Year - Week

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21a: Allergic rhinitis by

Average daily incidence

rate by week per 100,000 population (all

age

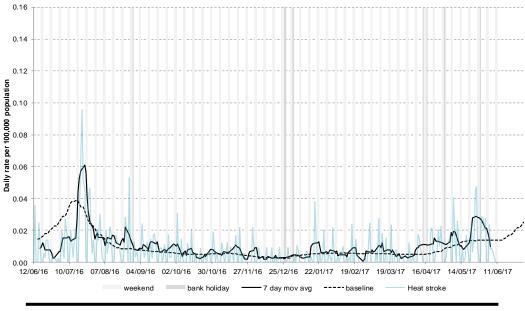
England).

Public Health England

15 June 2017

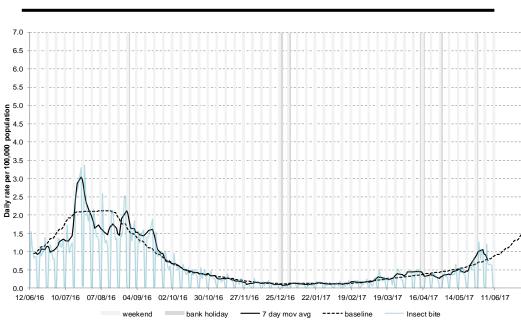
22: Heat/sunstroke

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.

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'ear: 2017 Week: 23

13 June 2017	Year: 2017 Week: 23
Notes and further information	 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.
Maps:	• From week 40 2015 the influenza-like illness thresholds illustrated in the bulletin appendix maps are calculated using the "Moving Epidemic Method" (MEM). ¹ MEM is used as a standard methodology for setting influenza surveillance thresholds across Europe. ²
	 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.
	 The maps on the following pages contains Ordnance Survey data © Crown copyright and database right 2014. Contains National Statistics data © Crown copyright and database right 2014.
	 ¹ Vega T et al. <i>Influenza Other Respir Viruses</i>. 2013;7(4):546-58. ² Green HK et al. <i>Epidemiol Infect</i>. 2015;143(1):1-12.
Acknowledgements:	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.
	GP In Hours Syndromic Surveillance System Bulletin.
Contact ReSST: syndromic.surveillance @phe.gov.uk	Produced by: PHE Real-time Syndromic Surveillance Team 6th Floor, 5 St Philip's Place, Birmingham, B3 2PW Tel: 0344 225 3560 > Option 4 > Option 2 Fax: 0121 236 2215 Web: https://www.gov.uk/government/collections/syndromic-surveillance-systems-and -analyses