

GP In Hours

Syndromic Surveillance System: England

Year: 2015 Week: 29

Key messages

Data to: 19 July 2015

Noting new to report in week 29.

Consultation rates for allergic rhinitis and conjunctivitis continue to decrease in line with seasonal expectations (figures 12 & 13.)

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 system 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:

Indicator	Trend	Level
Upper respiratory tract infection	decreasing	below baseline levels
Influenza-like illness	no trend	similar to baseline levels
Pharyngitis	decreasing	similar to baseline levels
Scarlet fever	decreasing	above baseline levels
Lower respiratory tract infection	decreasing	similar to baseline levels
Pneumonia	decreasing	similar to baseline levels
Gastroenteritis	no trend	similar to baseline levels
Vomiting	decreasing	above baseline levels
Diarrhoea	no trend	similar to baseline levels
Severe asthma	no trend	similar to baseline levels
Wheeze	decreasing	above baseline levels
Allergic rhinitis	decreasing	
Conjunctivitis	decreasing	below baseline levels
Mumps	no trend	below baseline levels
Measles	no trend	below baseline levels
Rubella	no trend	similar to baseline levels
Pertussis	no trend	above baseline levels
Chickenpox	decreasing	below baseline levels
Herpes zoster	no trend	similar to baseline levels
Cellulitis	no trend	above baseline levels
Impetigo	no trend	below baseline levels
Heat/sunstroke	no trend	below baseline levels
Insect Bites	no trend	above baseline levels

GP practices and denominator population:

Year	Week	GP Practices Reporting**	Population size**
2015	29	4080	30.3 million

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

21 July 2015

In This Issue:

Key messages.

Diagnostic indicators at a glance.

GP practices and denominator population.

National syndromic indicators.

Notes and further information.

Appendix.

21 July 2015

戀

Public Health England

1: Upper respiratory tract infection (URTI)

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

2: Influenza-like illness (ILI)

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

3: Pharyngitis or scarlet fever

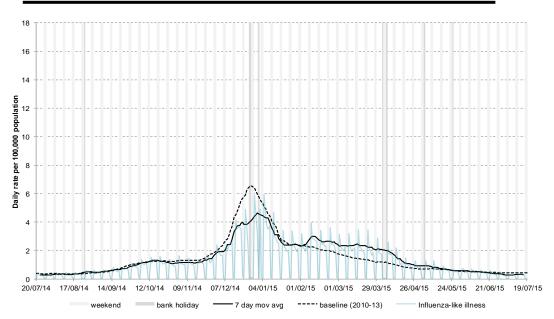
Daily incidence rates (and 7-day moving average*) per 100,000 population (all England, all ages).

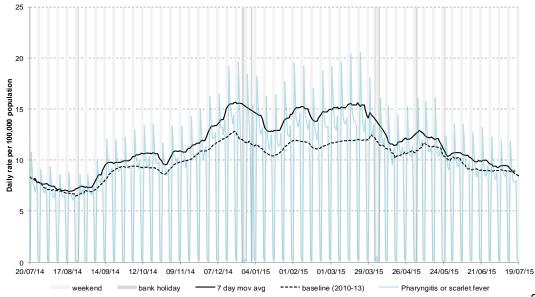
* 7-day moving average adjusted for bank holidays.



Year: 2015 Week: 29







戀 Public Health 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).

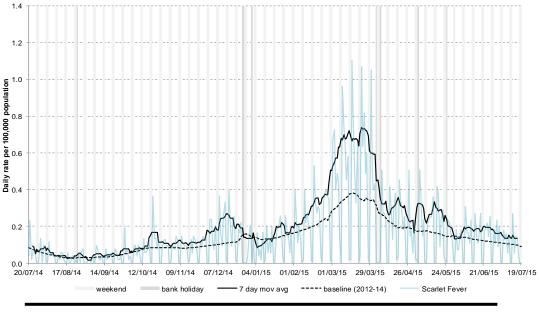
4a: Scarlet fever by age

Average daily incidence rate by week per 100,000 population (all England, based on a population denominator of approximately 5.5 million patients).

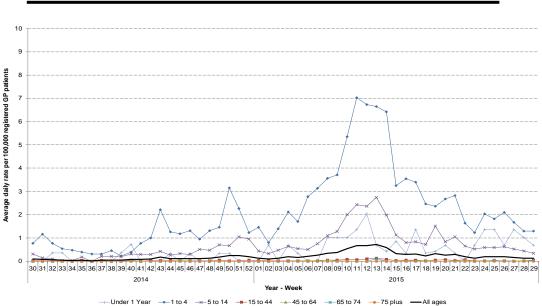
5: Lower respiratory tract infection (LRTI)

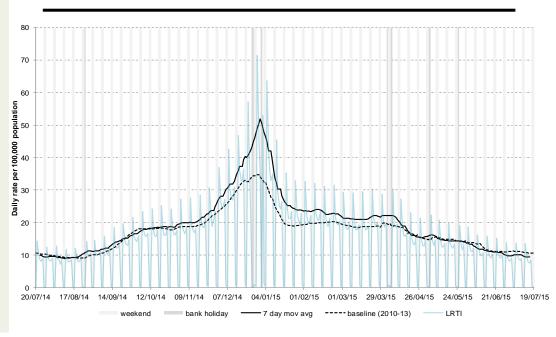
Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages).

* 7-day moving average adjusted for bank holidays.









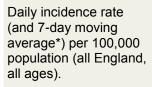
GP In Hours

Nublic Health England

21 July 2015

6: Pneumonia

(ear: 2015 Week: 29



1.2

1.0

0.8

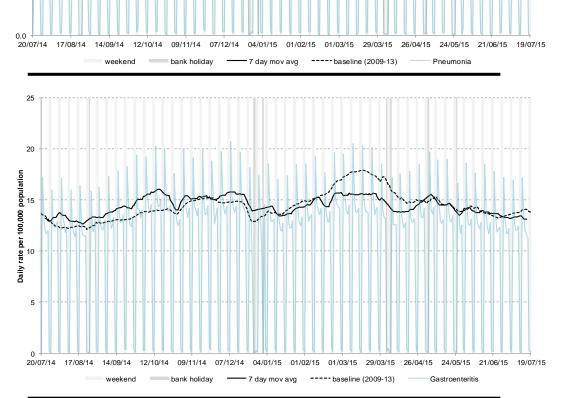
0.6

0.2

Daily rate per 100,000 population

7: Gastroenteritis

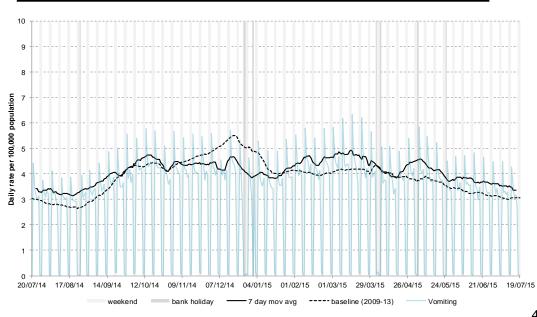
Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages).



8: Vomiting

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

* 7-day moving average adjusted for bank holidays.



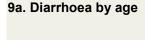
戀 Public Health England

8a: Vomiting by age

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

9: Diarrhoea

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)

60

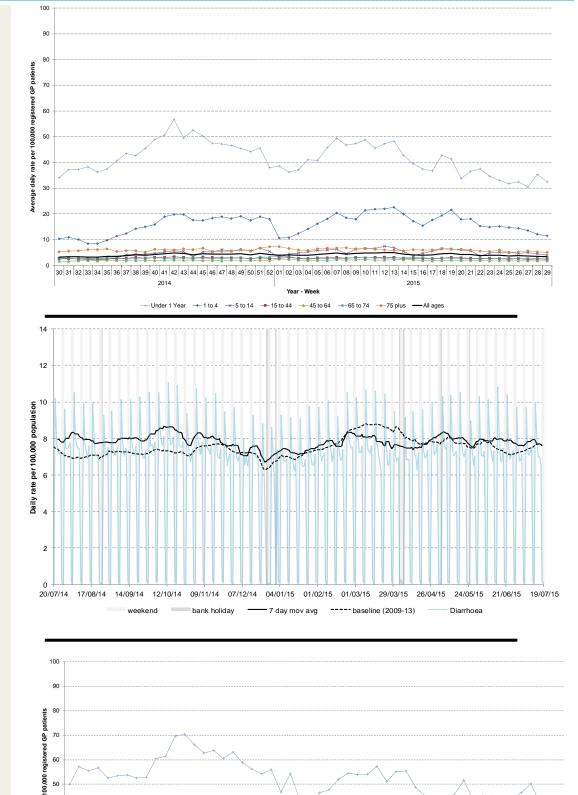
50

0

2014

Average daily rate per 40 30 20 10

* 7-day moving average adjusted for bank holidays.



GP In Hours

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 24 25 26 27 28 29

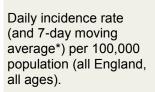
Year - Weel

2015

戀 Public Health England

10: Severe asthma

GP In Hours



10a: Severe asthma by age

7

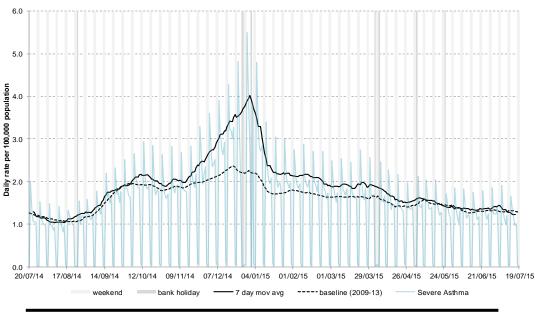
registered GP patients

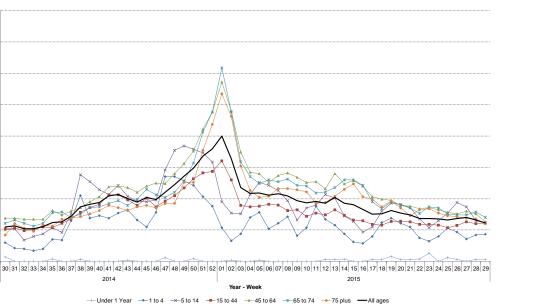
daily rate per 100,000

Average

0

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

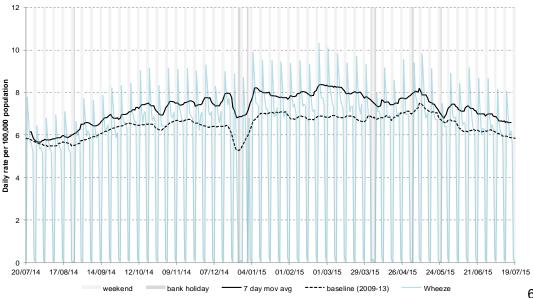




11: Wheeze

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

* 7-day moving average adjusted for bank holidays.



GP In Hours

Dublic Health England

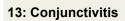
21 July 2015

12: Allergic rhinitis

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

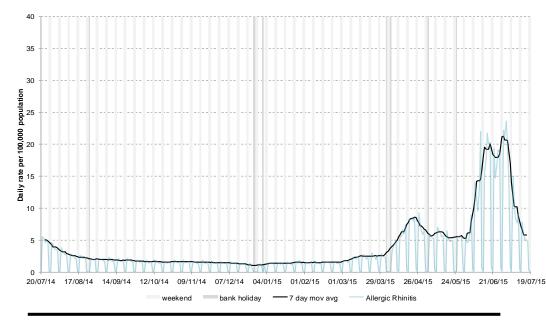
12a: Allergic rhinitis by age

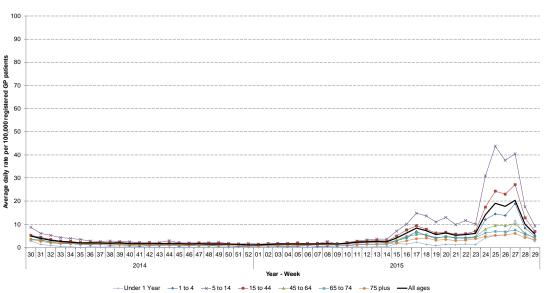
Average daily incidence rate by week per 100,000 population (all England)

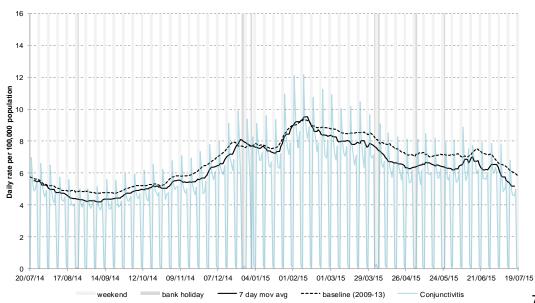


Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages).

* 7-day moving average adjusted for bank holidays.







Dublic Health England

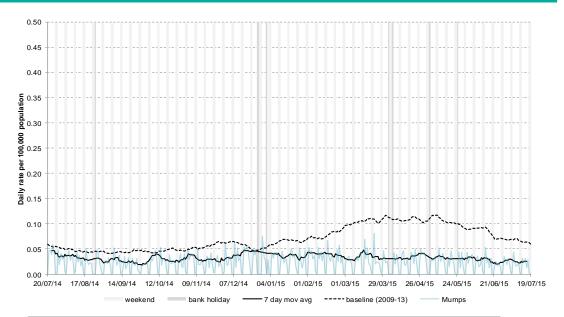
21 July 2015

GP In Hours

'ear: 2015 Week: 29

14: Mumps

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



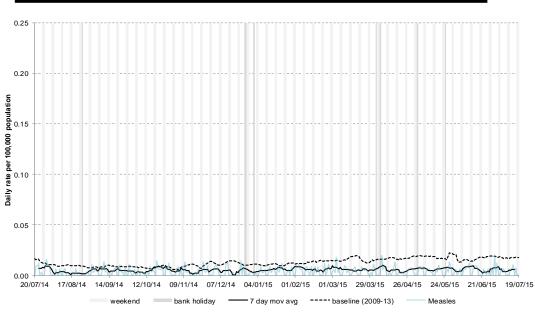
15: Measles

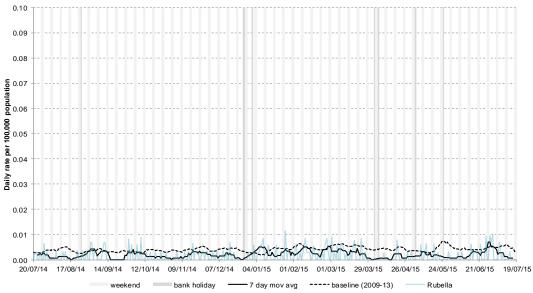
Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages).



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

* 7-day moving average adjusted for bank holidays.





21 July 2015

17: Pertussis

Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages). 0.25





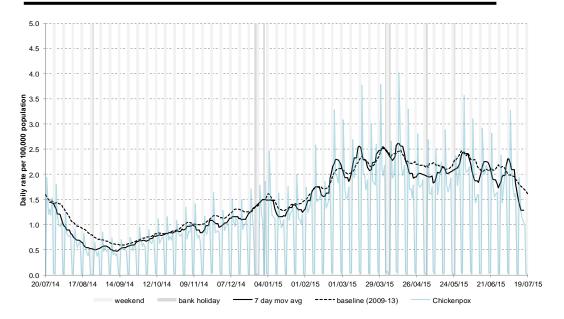
18: Chickenpox

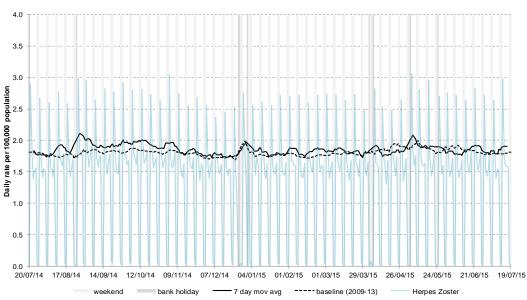
Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages).

19: Herpes zoster

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

* 7-day moving average adjusted for bank holidays.





GP In Hours



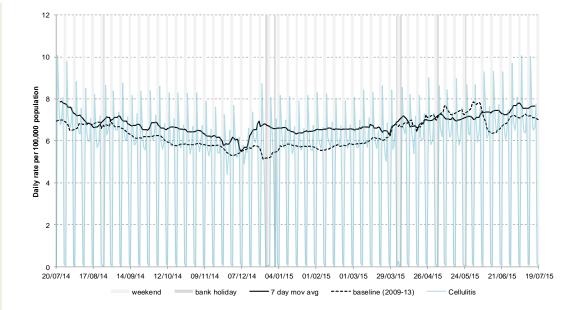
21 July 2015

20: Cellulitis

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

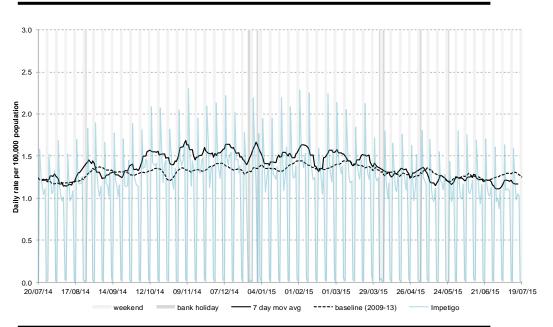
GP In Hours

Year: 2015 Week: 29



21: Impetigo

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



22: Intentionally left blank

Intentionally left blank.

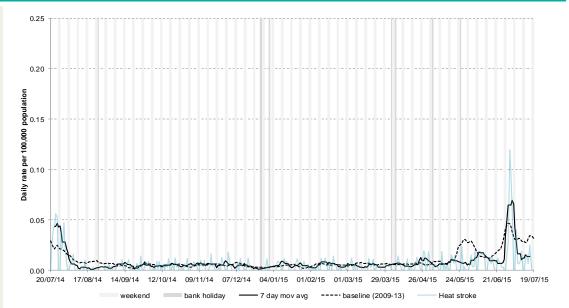
* 7-day moving average adjusted for bank holidays.

Dublic Health England

21 July 2015

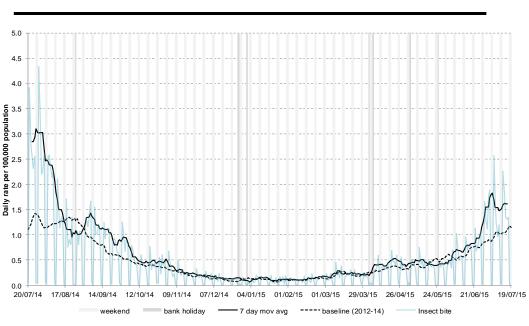
23: Heat/sunstroke

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



24: Insect Bites

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



25: Intentionally left blank

Intentionally left blank.

* 7-day moving average adjusted for bank holidays.

GP In Hours

ear: 2015 Week: 29

21 July 2015	Year: 2015 Week: 29
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. Historic baselines are smoothed to remove bank holiday effects. Data from 2009 has been excluded for selected indicators which were affected by the H1N1 influenza pandemic. No baseline is currently included for allergic rhinitis. The appendix illustrates weekly GP in hours consultation data for influenza-like illness (ILI). Each PHE Centre is represented by a thematic map showing its constituent local authorities (LA) coloured according to the weekly consultation rate of ILI per 100,000 population. LAs where less than 5 cases of ILI have been reported are supressed and illustrated as no data. The maps on the following pages contains Ordnance Survey data © Crown copyright and database right 2014.
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. Me thank TPP, ResearchOne and the SystmOne GP practices contributing to this surveillance system. GP In Hours Syndromic Surveillance System Bulletin. Produced by: PHE Real-time Syndromic Surveillance Team
Contact ReSST:	Produced by: PHE Real-time Syndromic Surveillance Team 6 th Floor, 5 St Philip's Place, Birmingham, B3 2PW Tel: 0344 225 3560 > Option 4 > Option 2 Fax: 0121 236 2215

syndromic.surveillance @phe.gov.uk

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