

GP In Hours

Syndromic Surveillance System: England

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Diagnostic indicators

Key messages

Data to: 17 January 2016

GP consultation rates for influenza-like illness increased slightly during week 2 but remained within seasonally expected levels (figure 2). Rates of lower respiratory tract infection and pneumonia decreased during week 2, and remain within seasonally expected levels (figures 5 and 6).

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): Levels 2/3--Alert & readiness/Cold weather action http://www.metoffice.gov.uk/weather/uk/coldweatheralert/

Diagnostic indicators at a glance:

Indicator	Trend	Level
Upper respiratory tract infection	decreasing	similar to baseline levels
Influenza-like illness	increasing	below baseline levels
Pharyngitis	no trend	above baseline levels
Scarlet fever	no trend	similar to baseline levels
Lower respiratory tract infection	decreasing	above baseline levels
Pneumonia	decreasing	similar to baseline levels
Gastroenteritis	no trend	below baseline levels
Vomiting	no trend	below baseline levels
Diarrhoea	no trend	similar to baseline levels
Severe asthma	decreasing	above baseline levels
Wheeze	no trend	above baseline levels
Conjunctivitis	no trend	below baseline levels
Mumps	no trend	below baseline levels
Measles	no trend	similar to 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	above baseline levels

GP practices and denominator population:

Year	Week	GP Practices Reporting**	Population size**
2016	2	4801	36.4 million

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

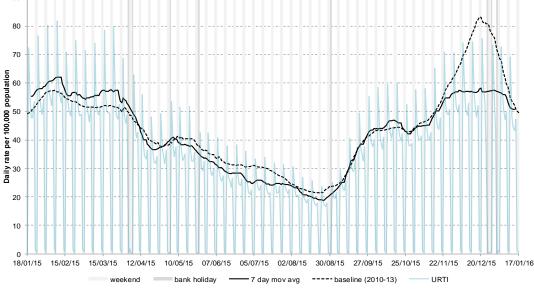
1: Upper respiratory tract infection (URTI)

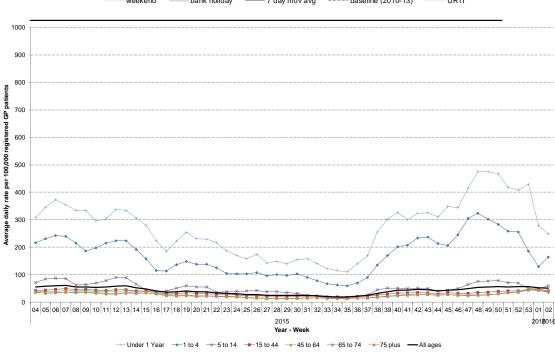
90

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

1a: Upper respiratory tract infection (URTI) 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

Year: 2016 Week: 2

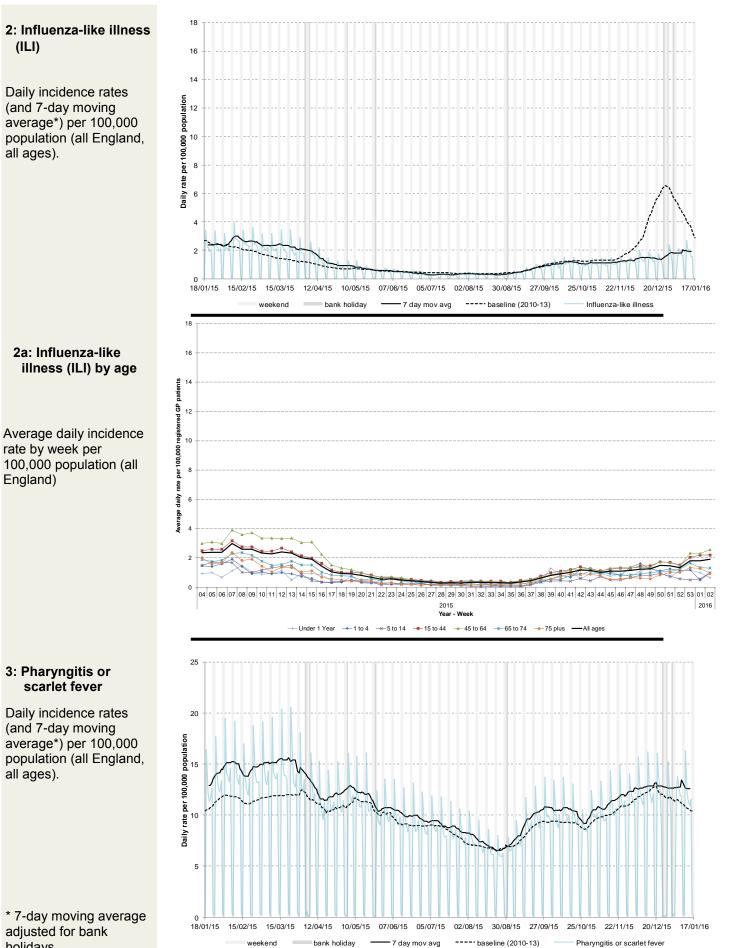
戀 Public Health England

(ILI)

all ages).

England)

GP In Hours



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.

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1.2

0.1 00,000 population 9.0 9.0 population

rate

Jaily Daily

0.2

0.0 18/01/15

60

50

40

18/01/15

15/02/15

15/03/15

12/04/15

10/05/15

Daily rate per 100,000 population

15/02/15

15/03/15

weekend

12/04/15

10/05/15 07/06/15

bank holiday

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).

5: Lower respiratory tract infection (LRTI)

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

5a: Lower respiratory tract infection (LRTI) by age

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

* 7-day moving average adjusted for bank holidays.



25/10/15

22/11/15

20/12/15

17/01/16

25/10/15

22/11/15

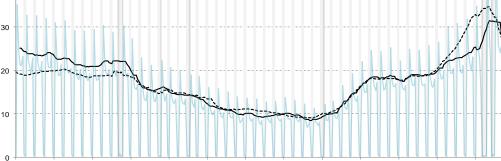
Scarlet Fever

20/12/15

17/01/16

27/09/15

----- baseline (2012-14)



02/08/15

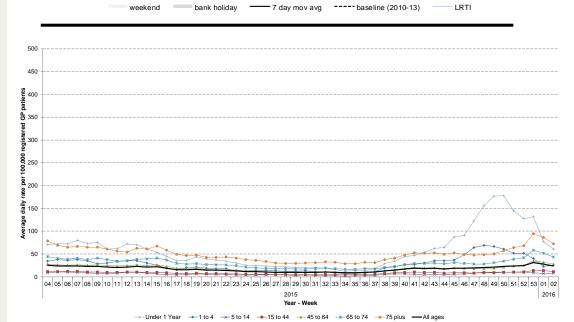
30/08/15

27/09/15

07/06/15 05/07/15

05/07/15 02/08/15 30/08/15

7 day mov avg



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6: Pneumonia

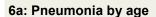
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Public Health England

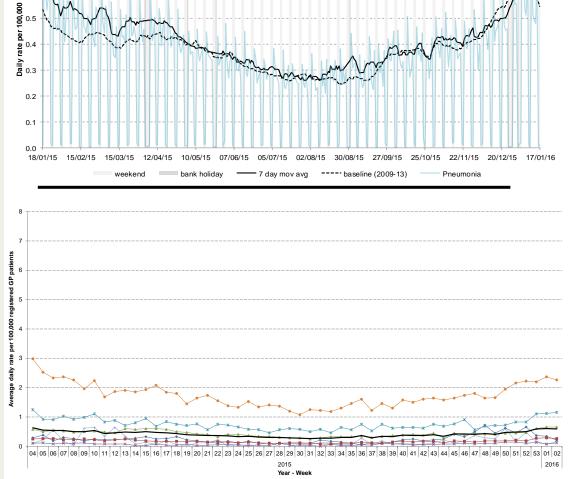
Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages). 1.0 0.9

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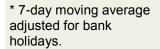


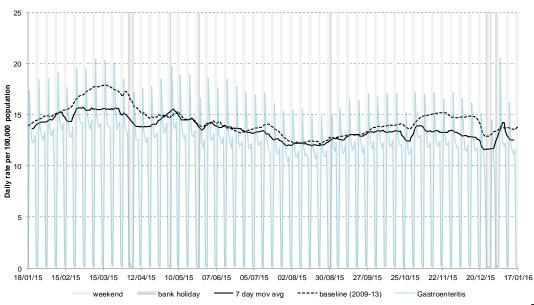
Average daily incidence rate by week per 100,000 population (all England)



7: Gastroenteritis

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





→ Under 1 Year → 1 to 4 → 5 to 14 → 15 to 44 → 45 to 64 → 65 to 74 → 75 plus → All ages

8: Vomiting

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

10

Daily rate per 100,000 population

100 90

80

70

60 50

100,000 registered GP patients

rate per 40

Average daily 30 20 10

0

14

12

10

Daily rate per 100,000 population

6

2

0

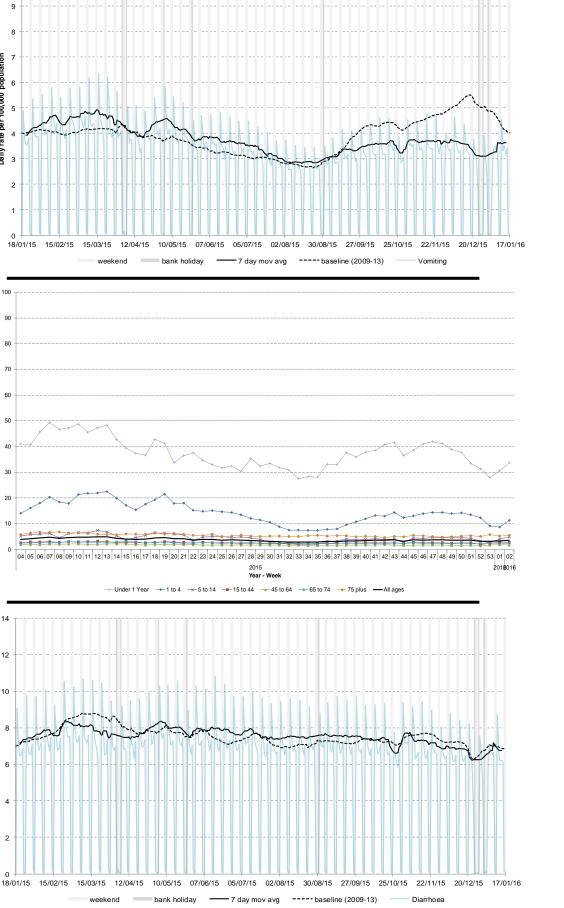


Average daily incidence rate by week per 100,000 population (all England)



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

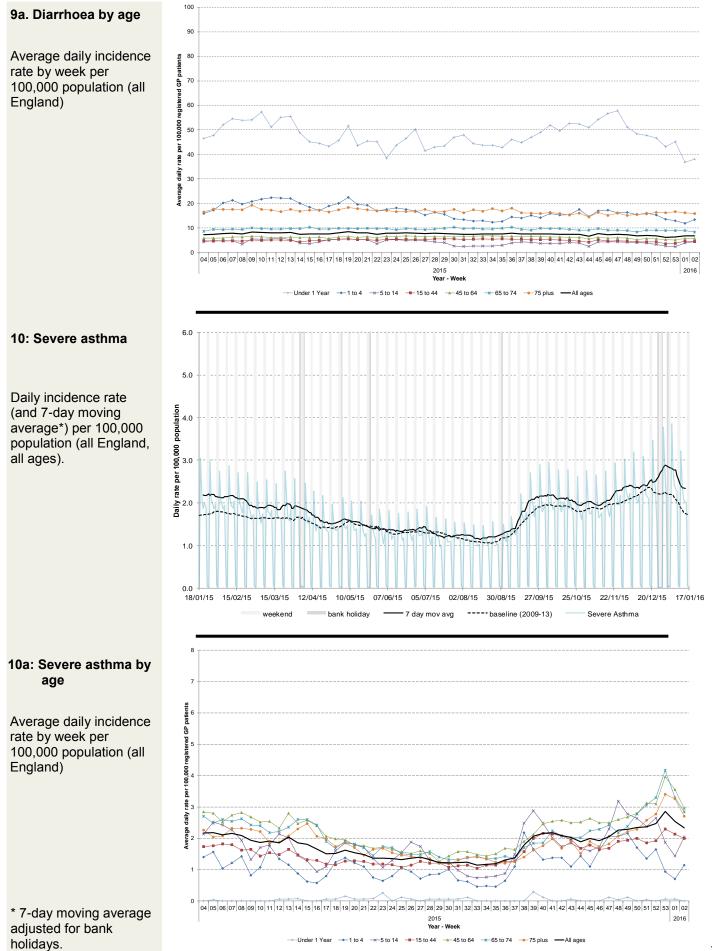
* 7-day moving average adjusted for bank holidays.



GP In Hours

GP In Hours





11: Wheeze

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

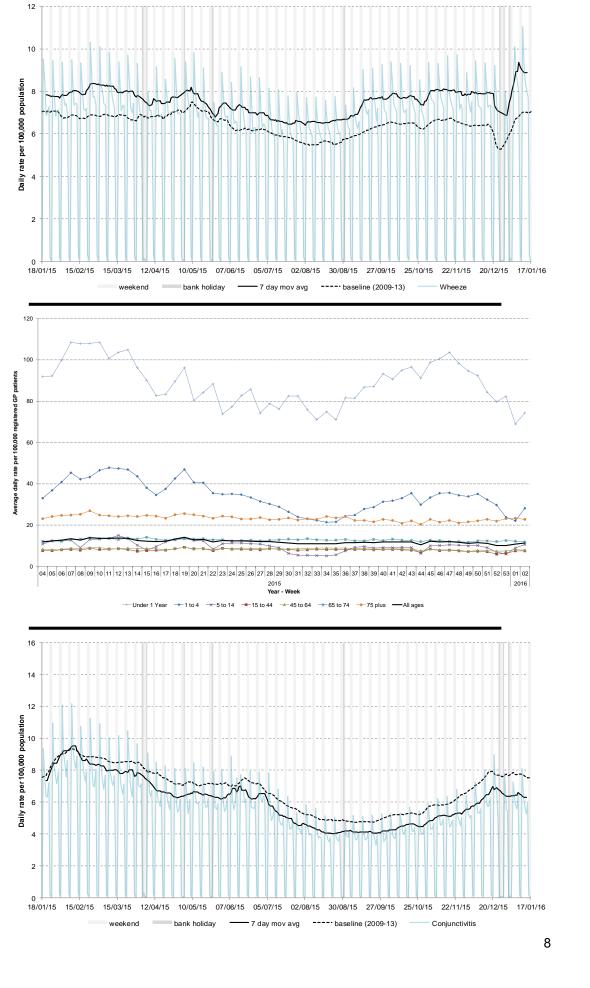
11a: Wheeze by age

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

12: Conjunctivitis

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

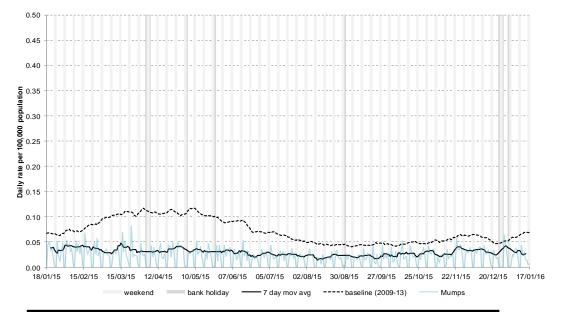
Year: 2016 Week: 2

GP In Hours

(ear: 2016 Week: 2

13: Mumps

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



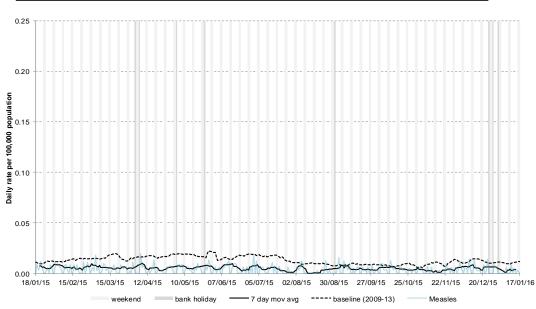
14: Measles

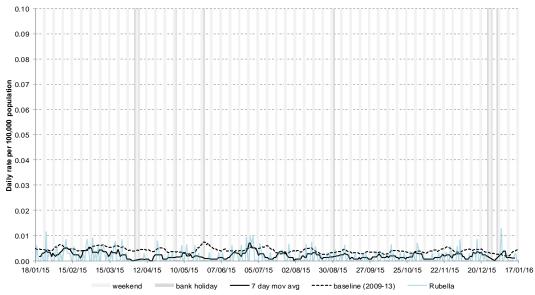
Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages).



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

* 7-day moving average adjusted for bank holidays.





16: Pertussis

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

0.20

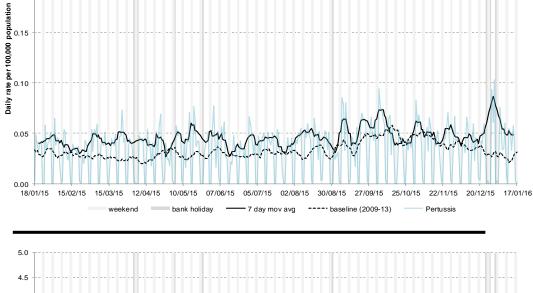
18/01/15

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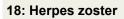
weekend

12/04/15



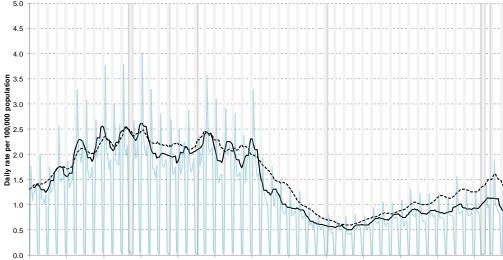
17: Chickenpox

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.



05/07/15

- 7 day mov avg

02/08/15 30/08/15

25/10/15

27/09/15

----- baseline (2009-13)

20/12/15

22/11/15

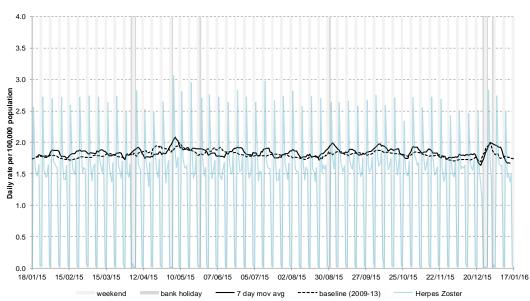
Chickenpox

17/01/16

07/06/15

10/05/15

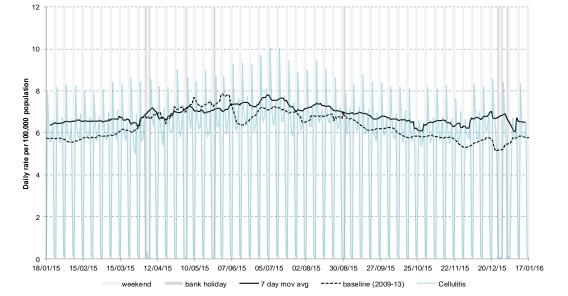
bank holiday



GP In Hours

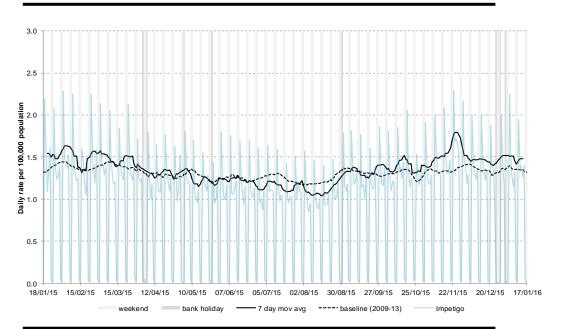
19: Cellulitis

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



20: Impetigo

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



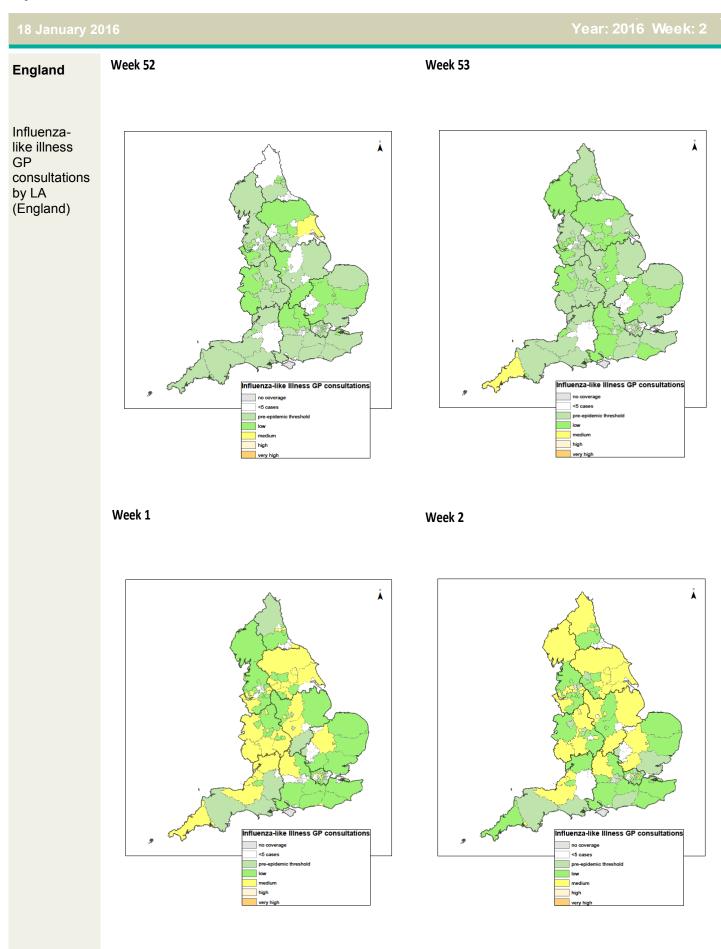
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* 7-day moving average adjusted for bank holidays.

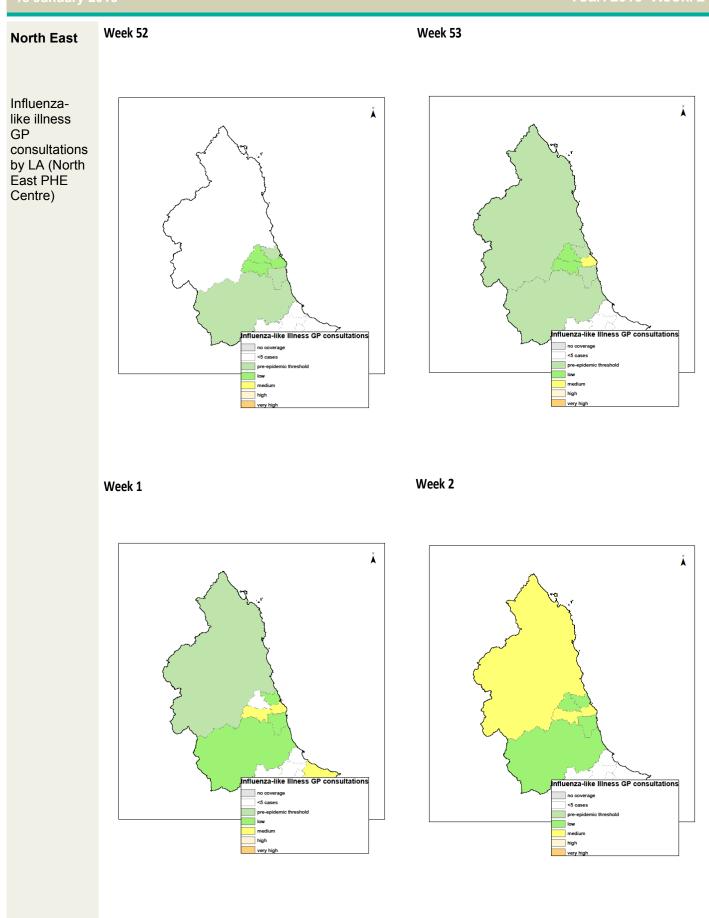
GP In Hours

(ear: 2016 Week: 2

19 January 2016	Year: 2016 Week: 2
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.
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. Influenza Other Respir Viruses. 2013;7(4):546-58. ² Green HK et al. Epidemiol Infect. 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.
Contact ReSST: syndromic.surveillance @phe.gov.uk	GP In Hours Syndromic Surveillance System Bulletin. 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 Web: https://www.gov.uk/government/collections/syndromic-surveillance-systems-and
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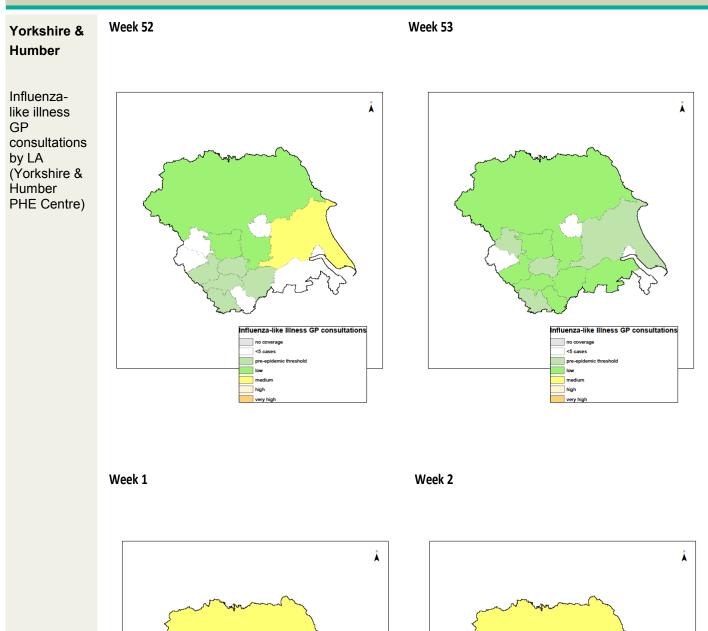


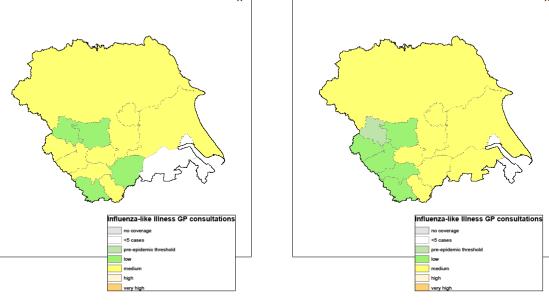
Year: 2016 Week: 2

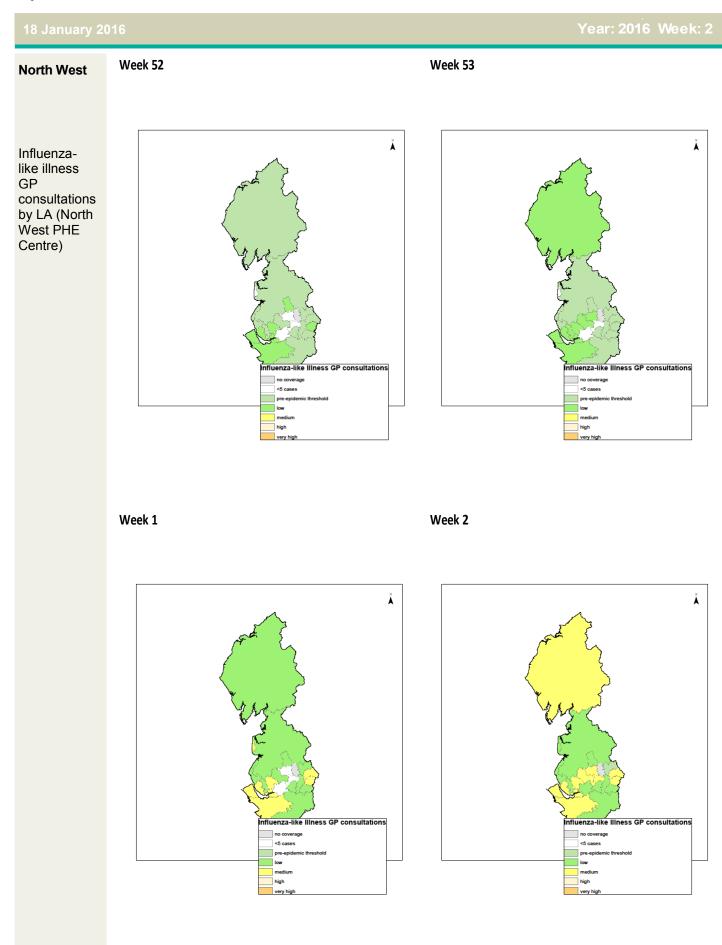


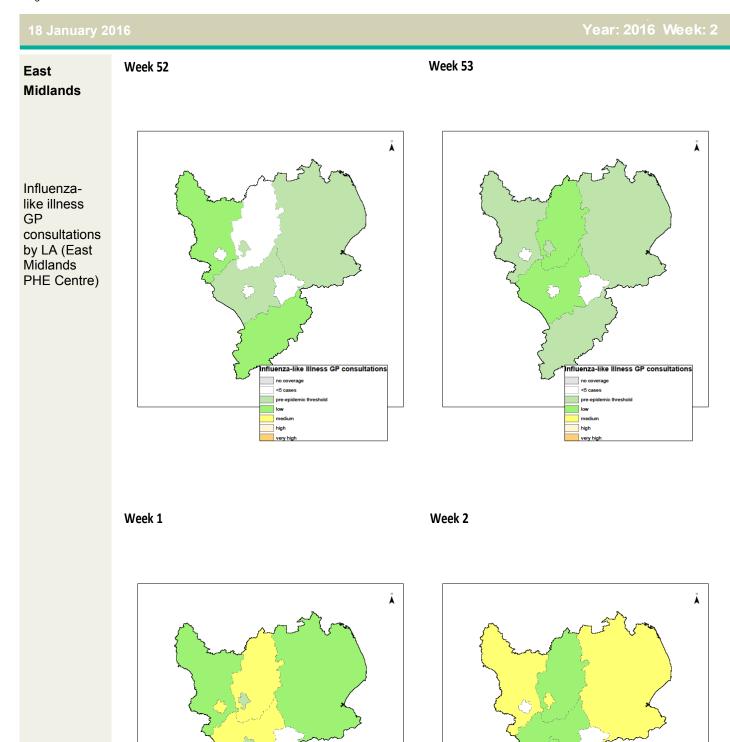
18 January 2016

Year: 2016 Week: 2









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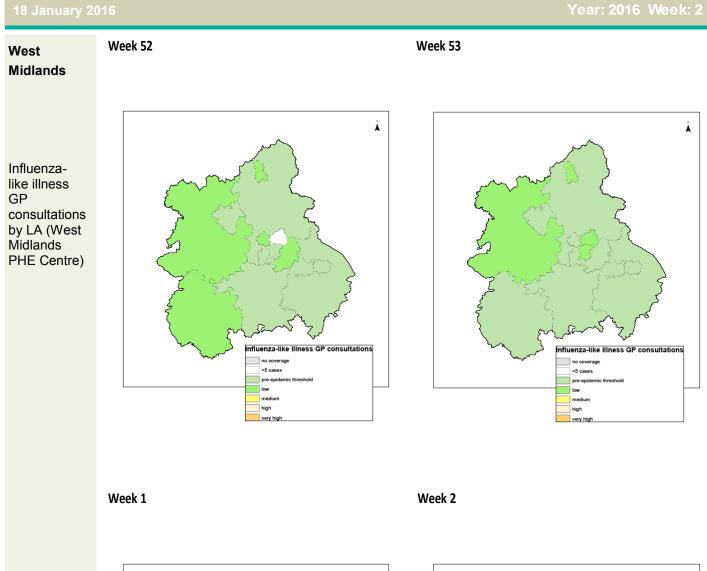
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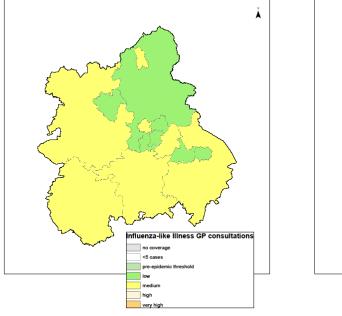
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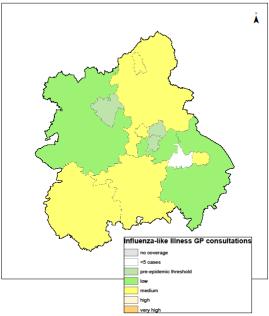
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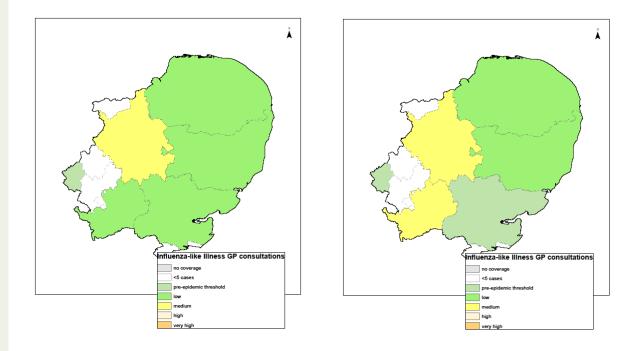


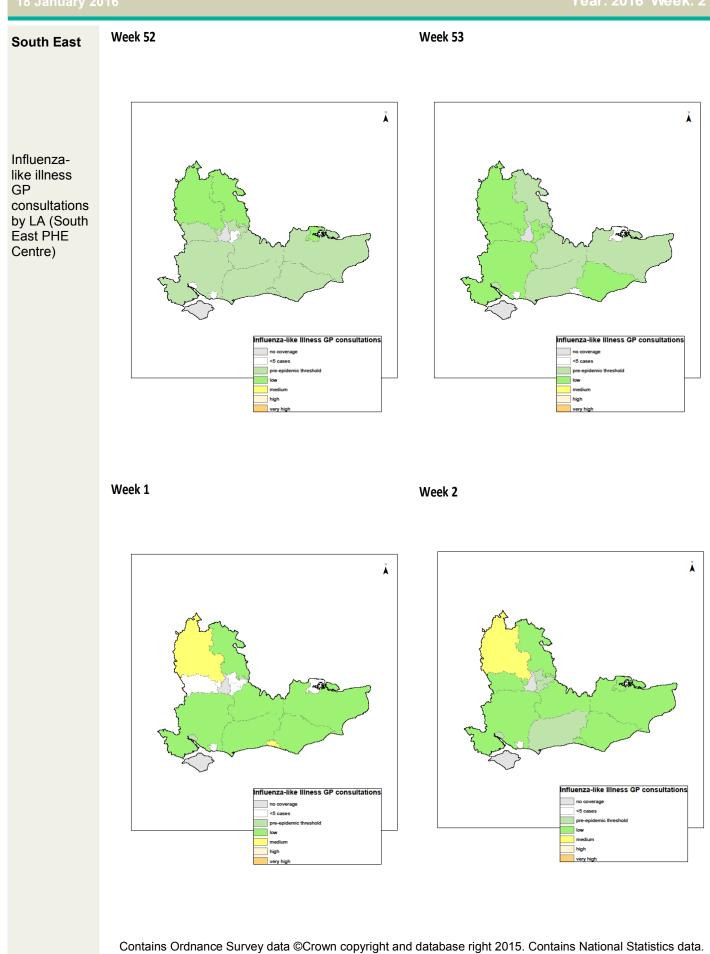


WW Public Health England

GP In Hours Appendix

Week 53 Week 52 East of England Ă Ă Influenzalike illness GP consultations by LA (East of England PHE Centre) Influenza-like Illness GP consultations Influenza-like Illness GP consultations no coverag no covera <5 cases <5 cases pre-epic pre-ep low medium me high high very h Week 1 Week 2



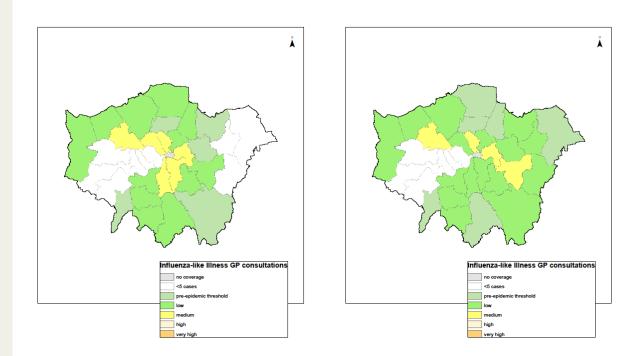


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Week 52 Week 53 London Ă Ă Influenzalike illness GP consultations by LA (London PHE Centre) Influenza-like Illness GP consultations Influenza-like Illness GP consultations no coverage no coverage <5 cases <5 cases pre-epic pre-epide low medi media high high

Week 1

Week 2



Year: 2016 Week:

