

PHE Syndromic Surveillance Summary

Produced by the PHE Real-time Syndromic Surveillance team

30 December 2014 Year: 2014 Week: 52

Syndromic surveillance national summary:

Reporting week: 22 to 28 December 2014

Syndromic surveillance indicators for respiratory infections including influenza-like illness continued to increase across all syndromic systems during week 52.

GP consultations for asthma continue to rise but are decreasing in children. There was an increase in pneumonia indicators (EDSSS and GPIH) in the over 65 years age group.

Remote Health Advice:

NHS 111 calls for respiratory indicators continued to increase during week 52 (figures 2, 4, 5, 6).

Cold/flu calls increased across all age groups except the 5-14 years (figure 2a). Cough calls increased across all age groups (figure 4a).

Click to access the Remote Health Advice bulletin [intranet] [internet]

GP In Hours:

Consultation rates for influenza-like illness (ILI) continued to increase during week 52 (fig 2). Consultation rates for pneumonia rose during week 52, for adults aged 65 years and over in particular (figures 6 and 6a).

Consultation rates for severe asthma continue to rise however rates in the 5-14 years age group appear to be decreasing (fig 10-10a).

Click to access the GP In Hours bulletin [intranet] [internet]

Emergency Department:

Attendances for respiratory and acute respiratory infection (ARI) continued to increase during week 52 and are at levels slightly higher than those reported last winter (figures 7-8).

ARI attendances remain high for children although there were no further increases in these age groups during week 52.

ARI attendances increased across older age groups (figure 9), with pneumonia attendances increasing in those aged 65 years in particular (figures 13 & 13a)

Click to access the EDSSS bulletin [intranet] [internet]

GP Out of Hours:

Acute respiratory infection consultations increased across all age groups, though particularly in adults, during week 52 (figures 2 & 2a).

Consultations for difficulty breathing/wheeze/asthma decreased in children and increased for adult age groups during week 52 (figure 5 & 5a).

Click to access the GPOOHSS bulletin [intranet] [internet]

RCGP Weekly Returns Service:

Click here to access reports from the RCGP website [external link]



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Syndromic surveillance summary notes

- Key messages are provided from each individual system.
- The different syndromic surveillance systems in operation within PHE access data from different areas of the national health care system.
- Each 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 Syndromic Surveillance website found at: (https://www.gov.uk/government/collections/syndromic-surveillance-systems-and-analyses); reports will be made available on Thursday afternoons.
- Further weekly and annual reports are available from the RCGP Research and Surveillance web pages http://www.rcgp.org.uk/clinical-and-research/research-and-surveillance-centre.aspx

Syndromic surveillance systems

Remote Health Advice

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

Emergency Department Syndromic Surveillance System (EDSSS)

A sentinel ED network across England monitoring daily attendances and presenting symptoms/diagnoses

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

RCGP Weekly Returns Service (RCGP WRS)

A sentinel GP surveillance network covering England and Wales monitoring weekly consultations for a range of clinical indicators. This surveillance system is coordinated by the RCGP Research and Surveillance Centre

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- NHS 111 and HSCIC.
- Participating EDSSS emergency departments
- College of Emergency Medicine
- Advanced Health & Care and the participating OOH service providers
- QSurveillance[®]; University of Nottingham; EMIS/EMIS practices; ClinRisk®
- TPP, ResearchOne and participating SystmOne GP practices

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