



05 November 2014

Year: 2014 Week: 44

## In This Issue:

- Key Messages.
- Weekly summary.
- Total contacts.
- Syndromic indicators.
- Notes and caveats.
- Further information.
- Acknowledgements.

## Syndromic indicators at a glance:

Number of contacts and percentage of Read coded contacts.

## 1: Total out-of-hours contacts:

Daily total number of out-of-hours and unscheduled contacts and 7 day average (adjusted for bank holidays).

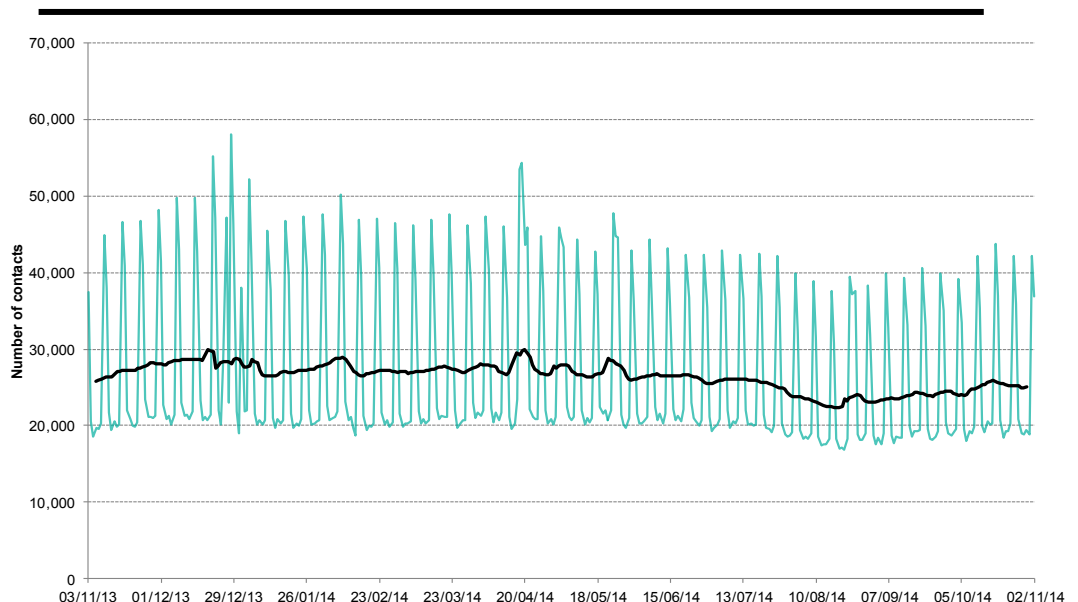
## Key messages

Data to: 02 November 2014

GP out of hours consultations for bronchitis/bronchiolitis increased during week 44 (figure 4), particularly in children aged <1 year (figure 4a). This increase is in line with seasonally expected increases in laboratory reports for respiratory syncytial virus (RSV).

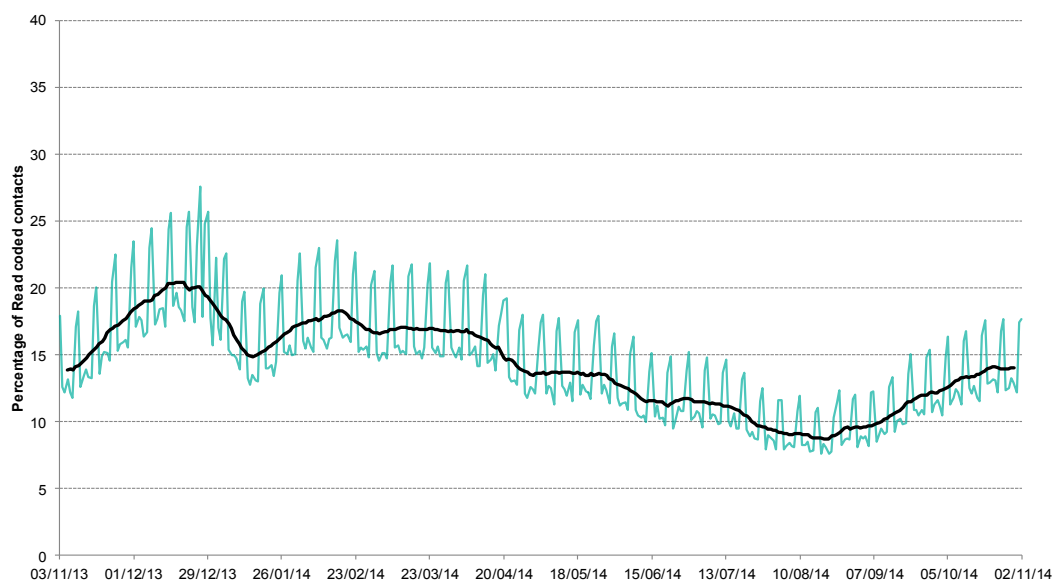
Key indicator	No. of contacts	% Week 44	% Week 43	Trend*
All OOH contacts, all causes	175,942			
Acute respiratory infection	13,945	15.07	14.98	↔
Influenza-like illness	166	0.18	0.22	↔
Bronchitis/bronchiolitis	221	0.24	0.23	↑
Difficulty breathing/wheeze/asthma	2,182	2.36	2.36	↔
Gastroenteritis	4,659	5.03	5.04	↔
Diarrhoea	1,120	1.21	1.14	↔
Vomiting	1,594	1.72	1.82	↔
Myocardial infarction	977	1.06	1.09	↔
Pharyngitis	94	0.10	0.10	↔

\*Trend: reports on the trend seen over previous weeks in the percentage of Read coded contacts.



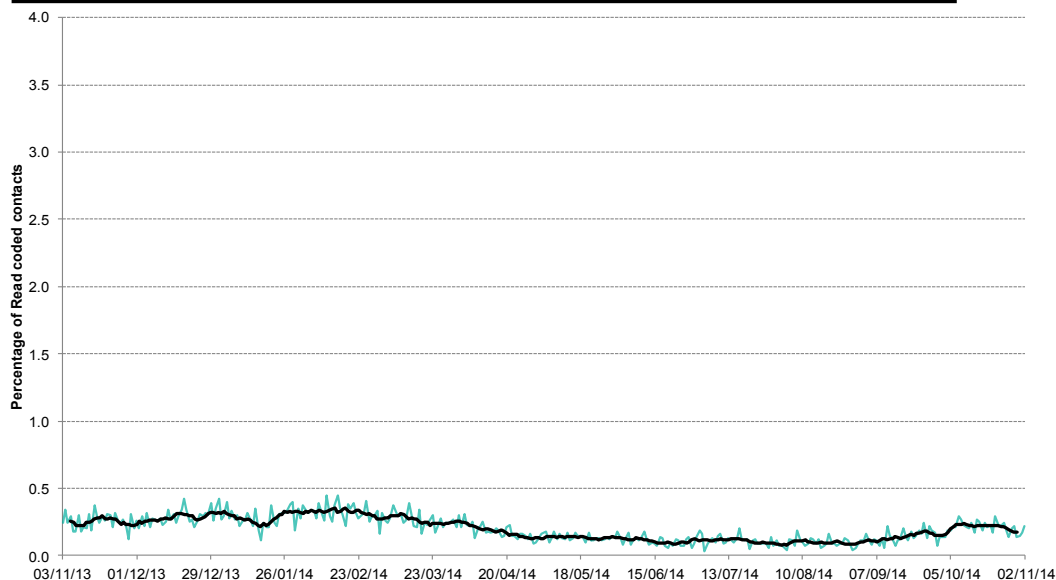
**2: Acute Respiratory Infection daily contacts.**

Shown as a percentage of the total contacts with a Read code and as a 7 day average\*.



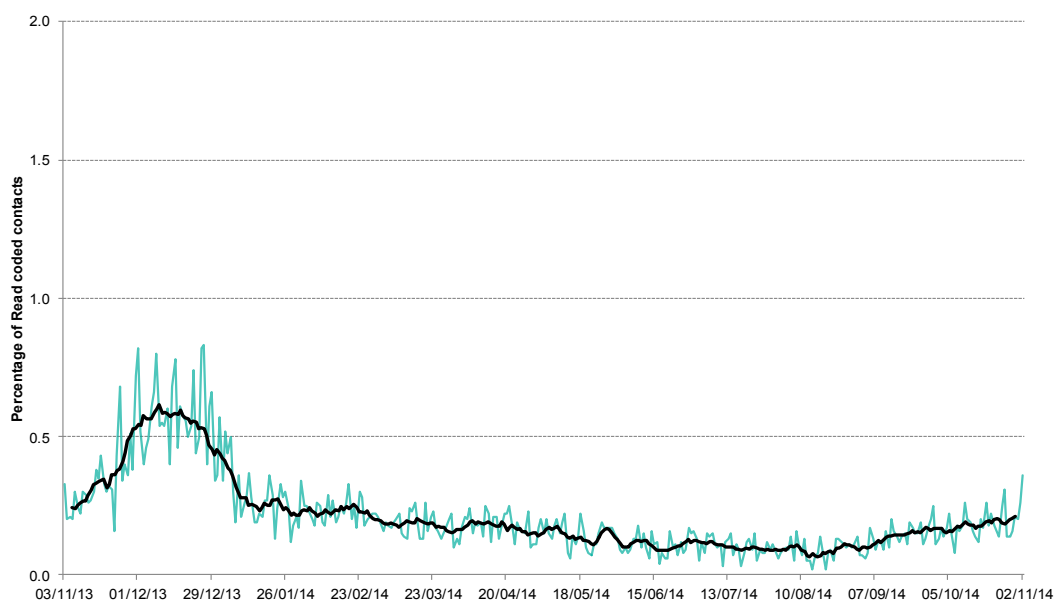
**3: Influenza-like illness daily contacts.**

Shown as a percentage of the total contacts with a Read code and as a 7 day average\*.



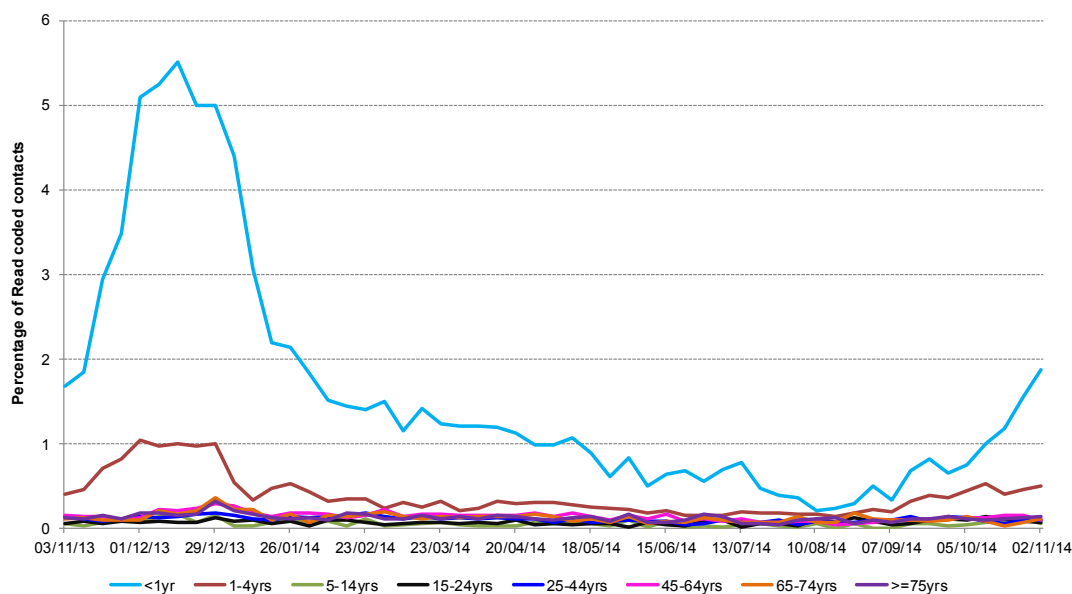
**4: Bronchitis/ bronchiolitis daily contacts.**

Shown as a percentage of the total contacts with a Read code and as a 7 day average\*.



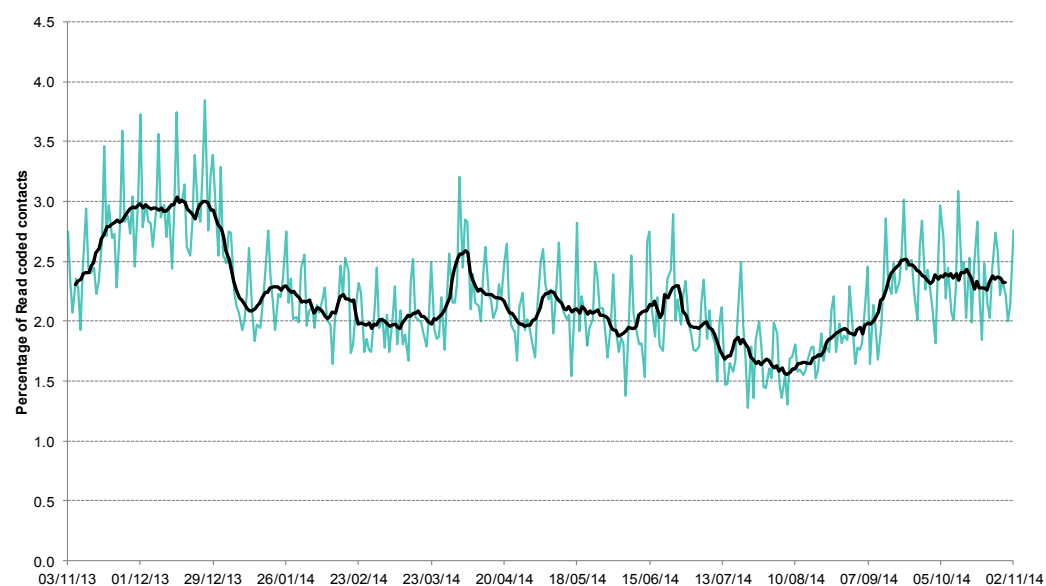
\*7-day moving average adjusted for bank holidays.

**4a: Bronchitis/  
bronchiolitis weekly  
contacts by age  
group.**

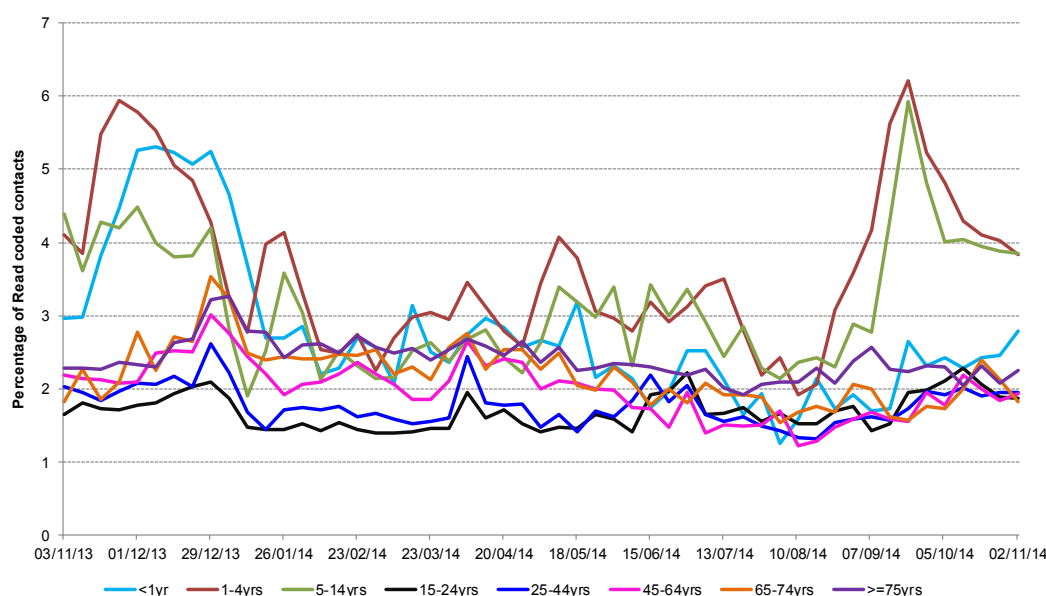


**5: Difficulty breathing/  
wheeze/asthma daily  
contacts.**

Shown as a percentage of the total contacts with a Read code and as a 7 day average\*.



**5a: Difficulty  
breathing/wheeze/  
asthma weekly  
contacts by age  
group.**

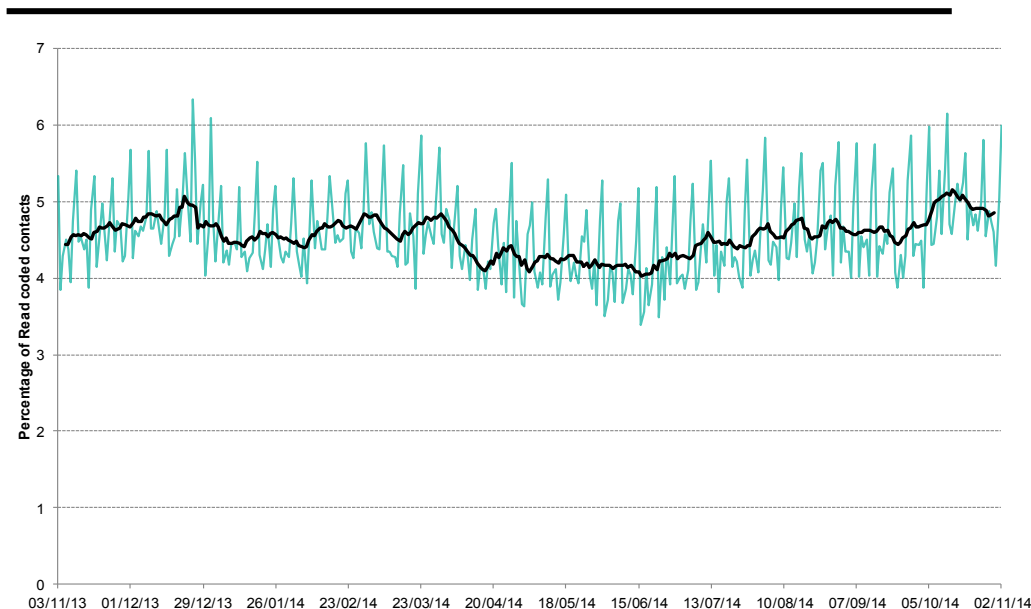


\*7-day moving average  
adjusted for bank  
holidays.

**6: Intentionally left blank.**

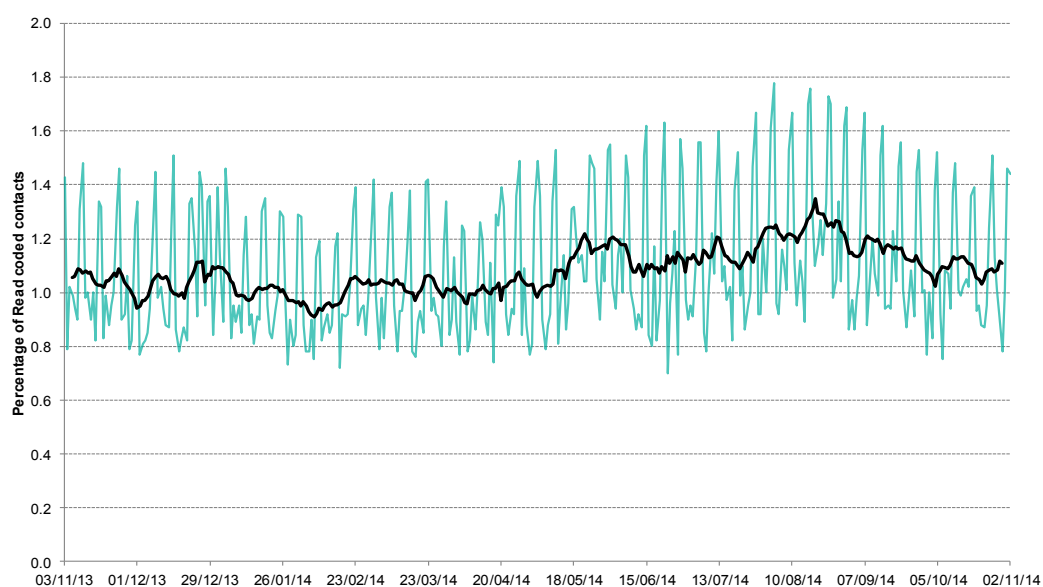
**7: Gastroenteritis daily contacts.**

Shown as a percentage of the total contacts with a Read code and as a 7 day average\*.



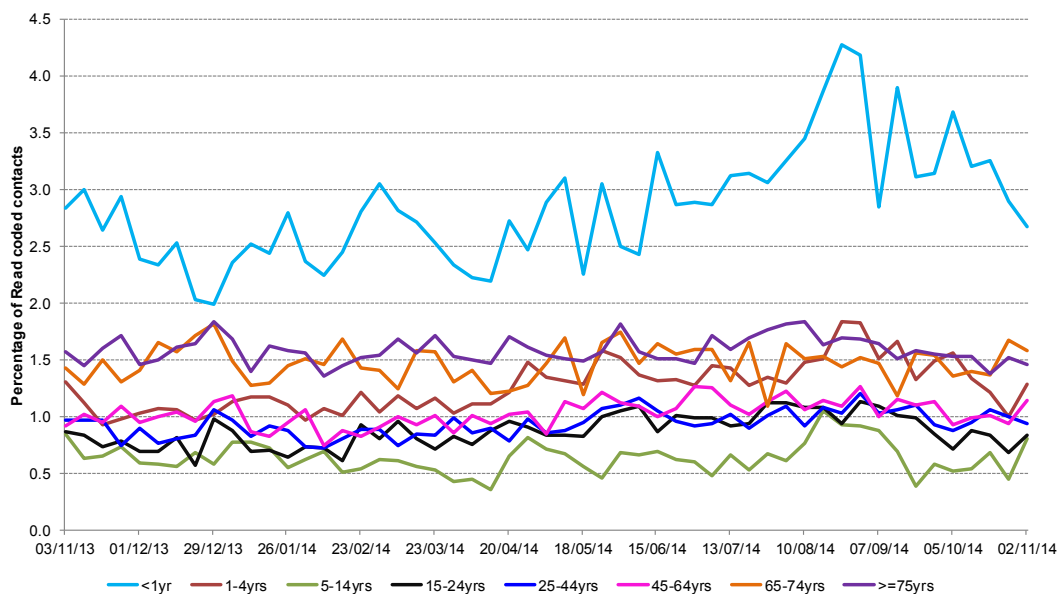
**8: Diarrhoea daily contacts.**

Shown as a percentage of the total contacts with a Read code and as a 7 day average\*.



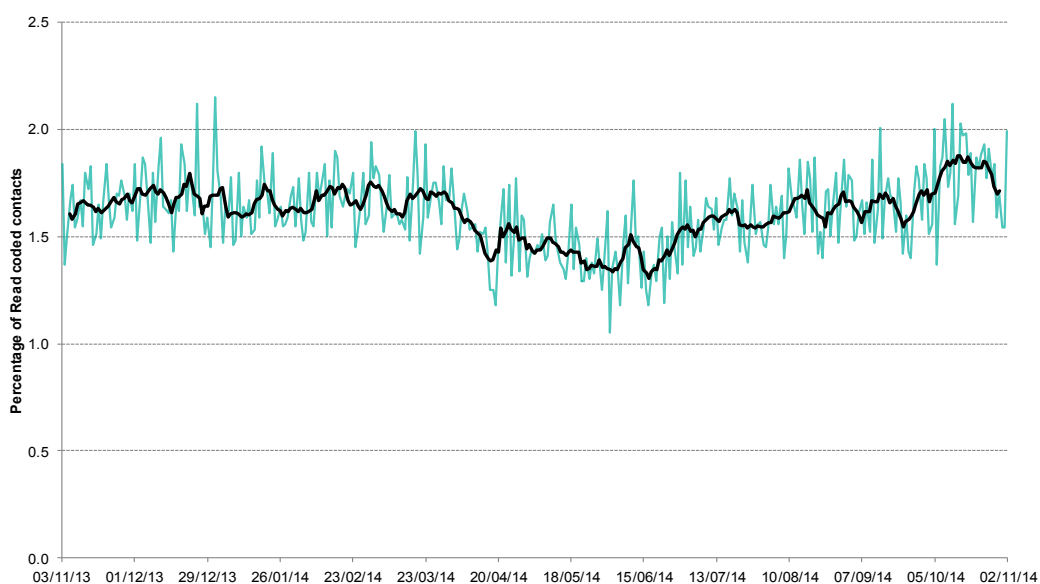
\*7-day moving average adjusted for bank holidays.

**8a: Diarrhoea weekly contacts by age group.**



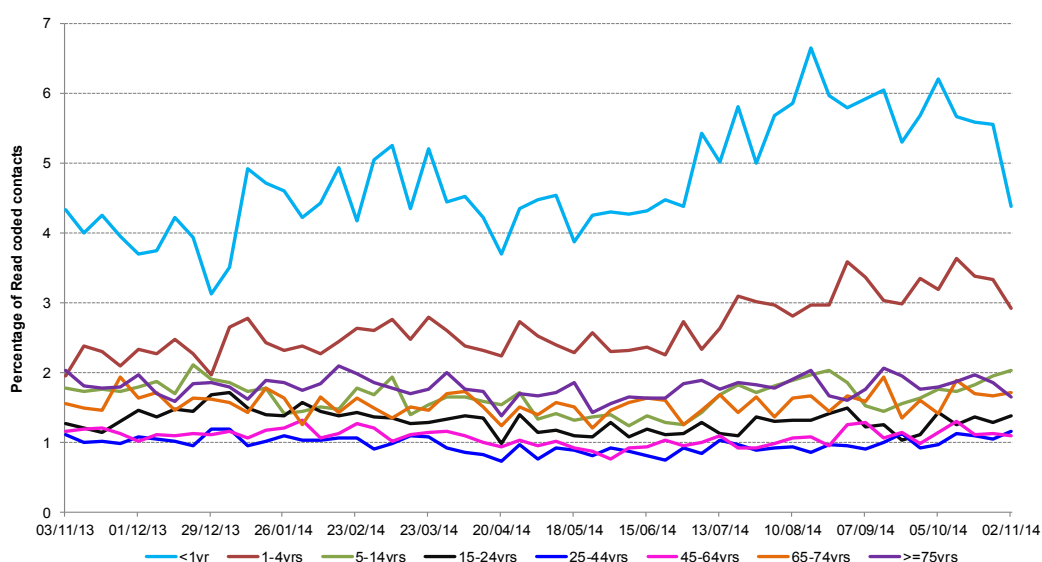
**9: Vomiting daily contacts.**

Shown as a percentage of the total contacts with a Read code and as a 7 day average\*.



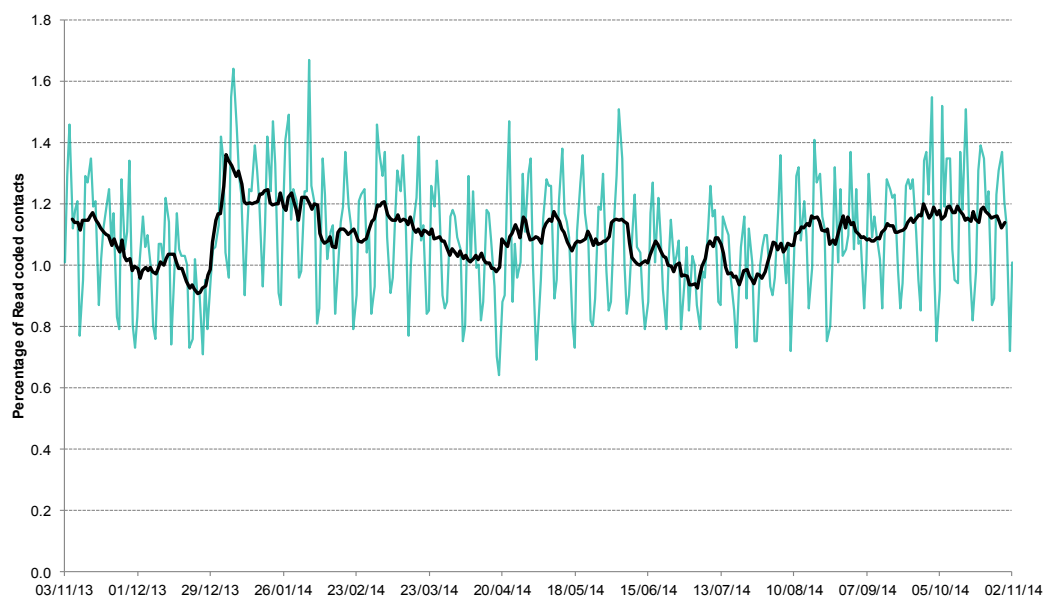
**9a: Vomiting weekly contacts by age group.**

\*7-day moving average adjusted for bank holidays.



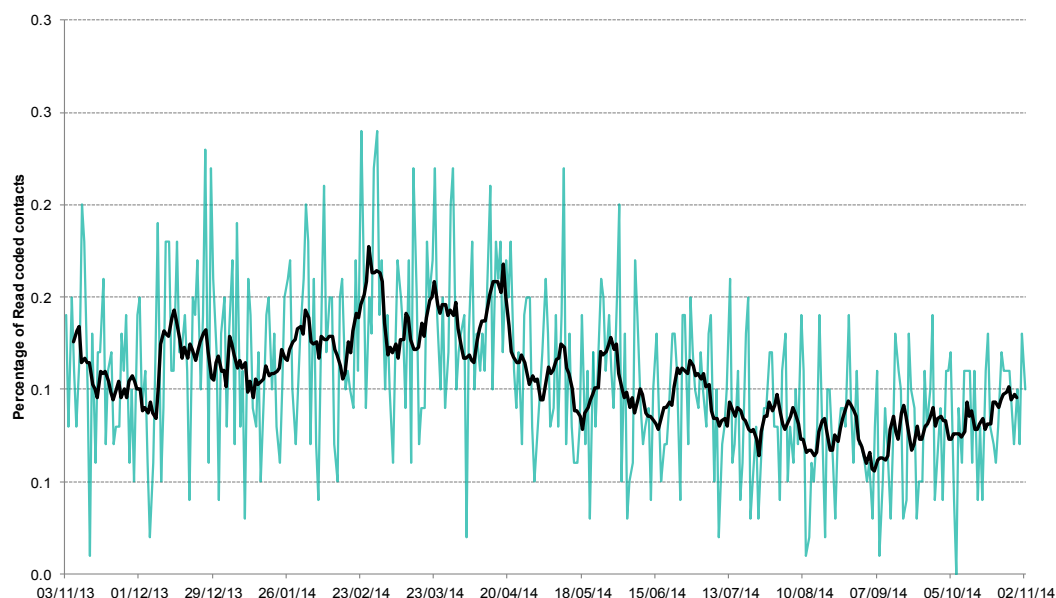
**10: Myocardial  
Infarction daily  
contacts.**

Shown as a percentage of the total contacts with a Read code and as a 7 day average\*.



**11: Acute pharyngitis  
and persistent sore  
throat.**

Shown as a percentage of the total contacts with a Read code and as a 7 day average\*.



**12: Intentionally left  
blank.**

\*7-day moving average  
adjusted for bank  
holidays.

05 November 2014

Year: 2014 Week: 44

## Notes and caveats:

- This bulletin presents data from the Public Health England (PHE) GP Out-of-hours\Unscheduled Care Surveillance System (GP OOHSS).
- Fully anonymised data from GP out-of-hours (OOH) and unscheduled care service providers in England are being transferred to the PHE for analysis and interpretation by the PHE Real-time Syndromic Surveillance Team (ReSST).
- This new system supplements existing PHE syndromic surveillance systems by monitoring data on general practitioner consultations outside of routine surgery opening times (evenings, weekends and bank holidays) and unplanned contacts within NHS primary care.
- The key indicators presented within this bulletin are derived by grouping selected Read coded consultations.

## Further information:

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The GP Out-of-Hours Surveillance System Bulletin can also be downloaded from the PHE Real-time Syndromic Surveillance website which also contains more information about syndromic surveillance:

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

## Acknowledgements:

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We are grateful to Advanced Health and Care and the GP out-of-hours and unscheduled care service providers who have kindly agreed to participate in this system.

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### PHE Out-of-Hours/Unscheduled Care Surveillance

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