



13 January 2015

Year: 2015 Week: 02

## 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: 11 January 2015

Consultations for acute respiratory infections and difficulty breathing/asthma/wheeze continued to decrease across all age groups during week 2 (figures 2 & 2a, 3 & 3a, 5 & 5a).

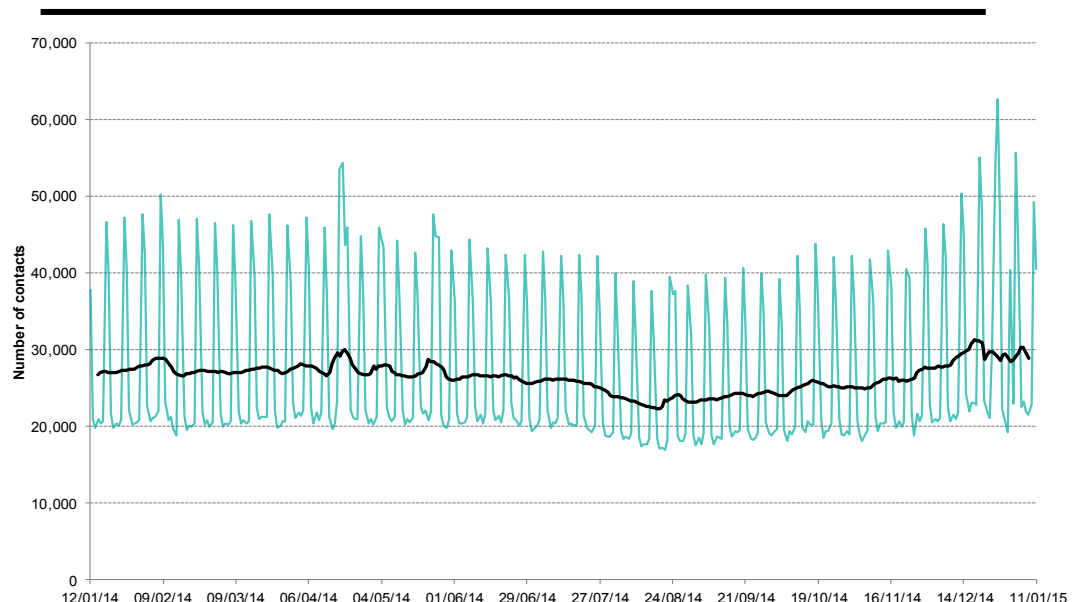
There has been little change in the levels of influenza-like illness contacts.

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): **Level 1: Winter preparedness and action**  
<http://www.metoffice.gov.uk/weather/uk/coldweatheralert/>

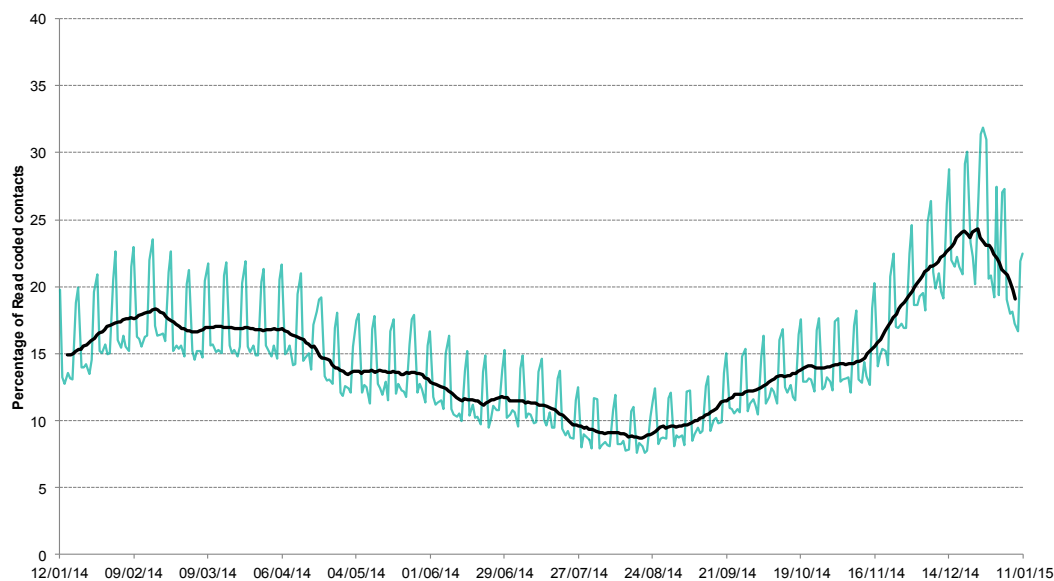
Key indicator	No. of contacts	% Week 02	% Week 01	Trend*
All OOH contacts, all causes	201,480			
Acute respiratory infection	19,500	19.95	24.81	↓
Influenza-like illness	573	0.59	0.68	↔
Bronchitis/bronchiolitis	350	0.36	0.51	↓
Difficulty breathing/wheeze/asthma	2,651	2.71	3.38	↓
Pharyngitis	124	0.13	0.13	↓
Gastroenteritis	3,958	4.05	4.35	↓
Diarrhoea	989	1.01	1.12	↔
Vomiting	1,471	1.51	1.52	↔
Myocardial infarction	1,104	1.13	0.98	↑

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

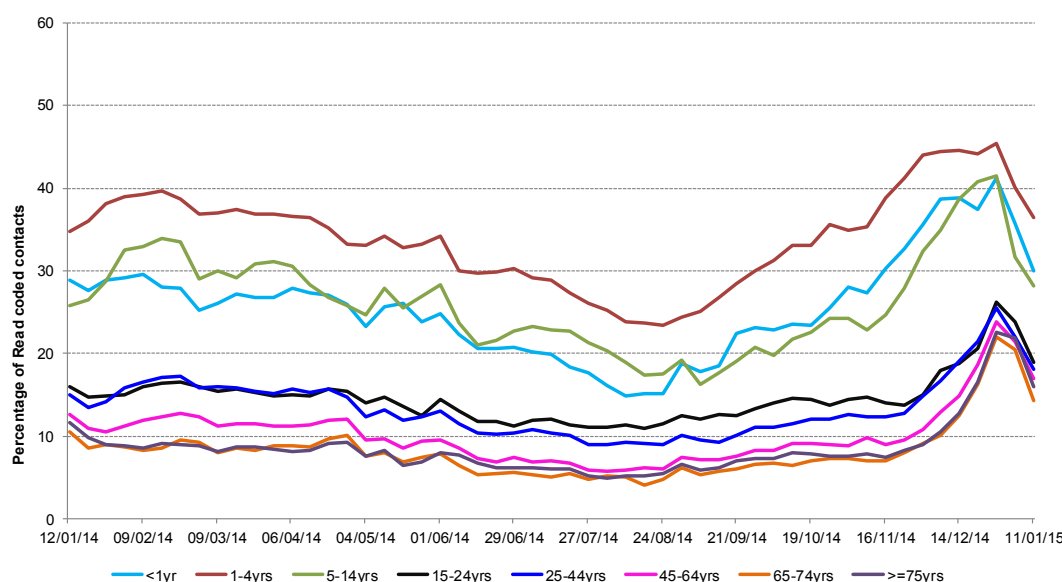


**2: Acute Respiratory Infection daily contacts.**

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

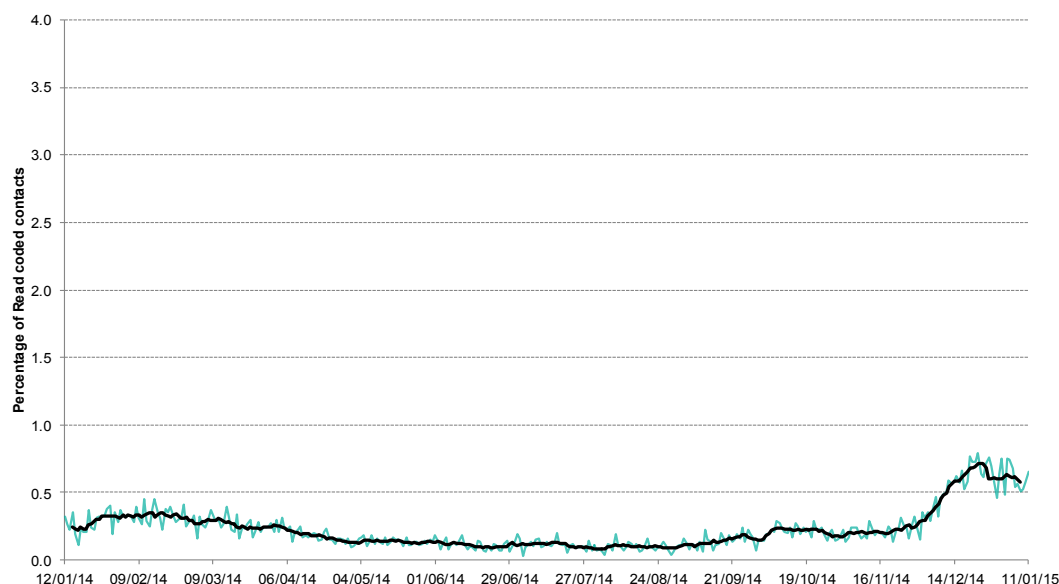


**2a: Acute respiratory infection daily contacts by age group.**



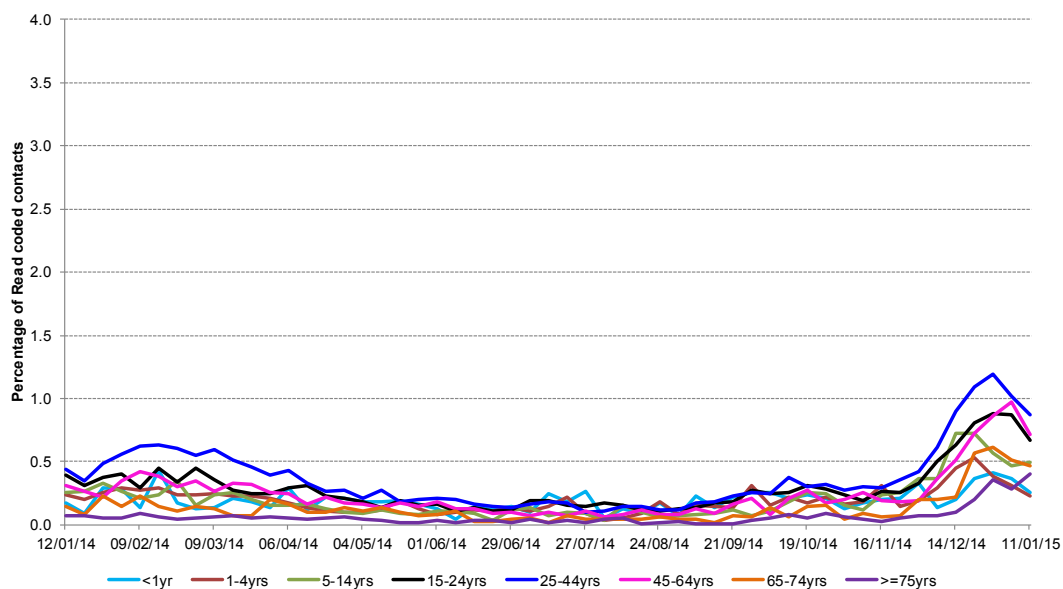
**3: Influenza-like illness daily contacts.**

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



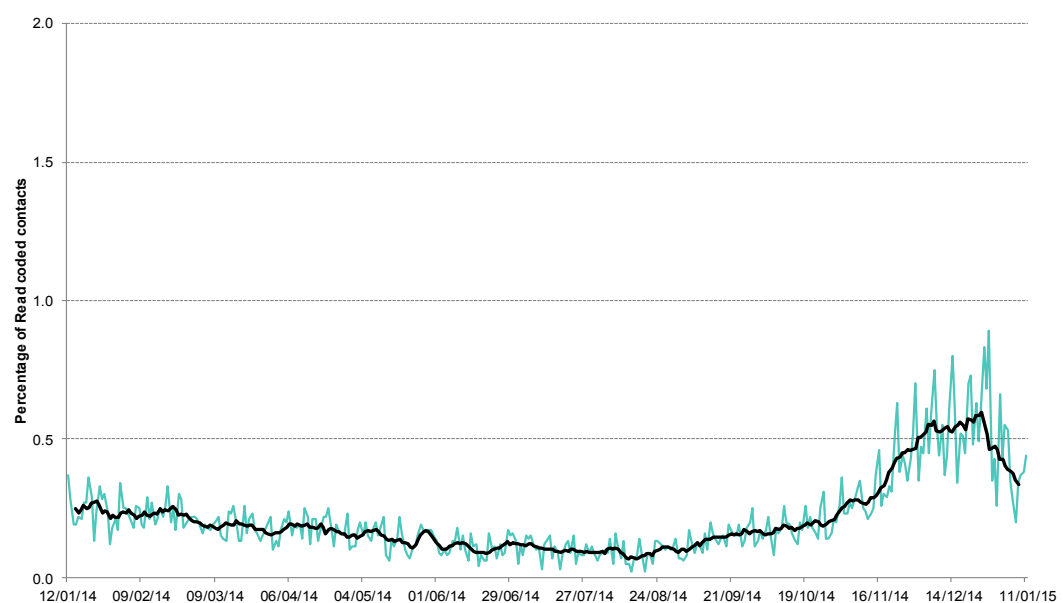
\*7-day moving average adjusted for bank holidays.

**3a: Influenza-like illness weekly contacts by age group.**



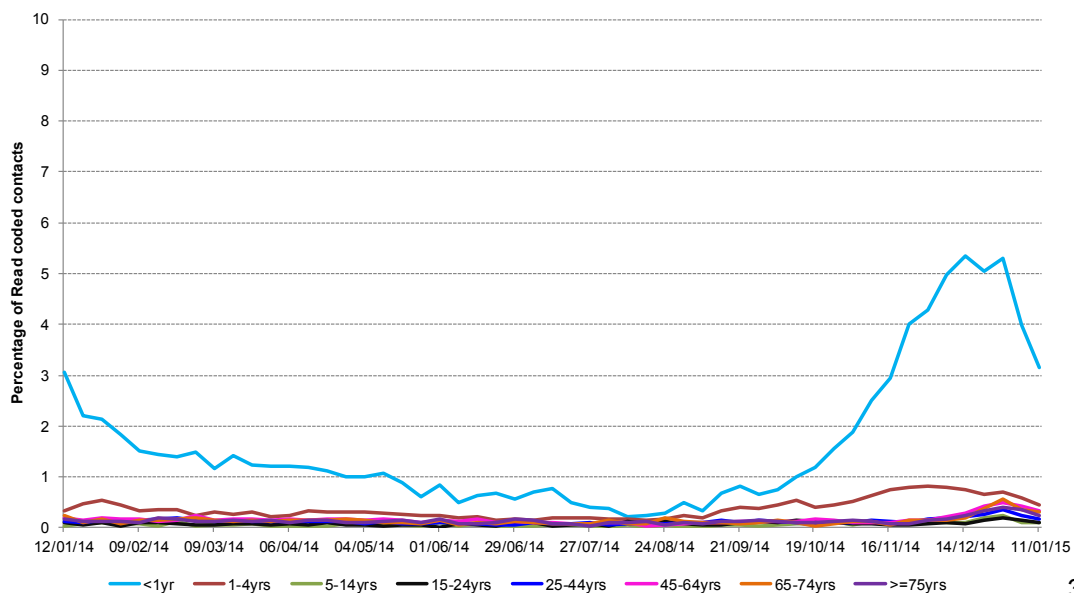
**4: Bronchitis/ bronchiolitis daily contacts.**

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



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

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

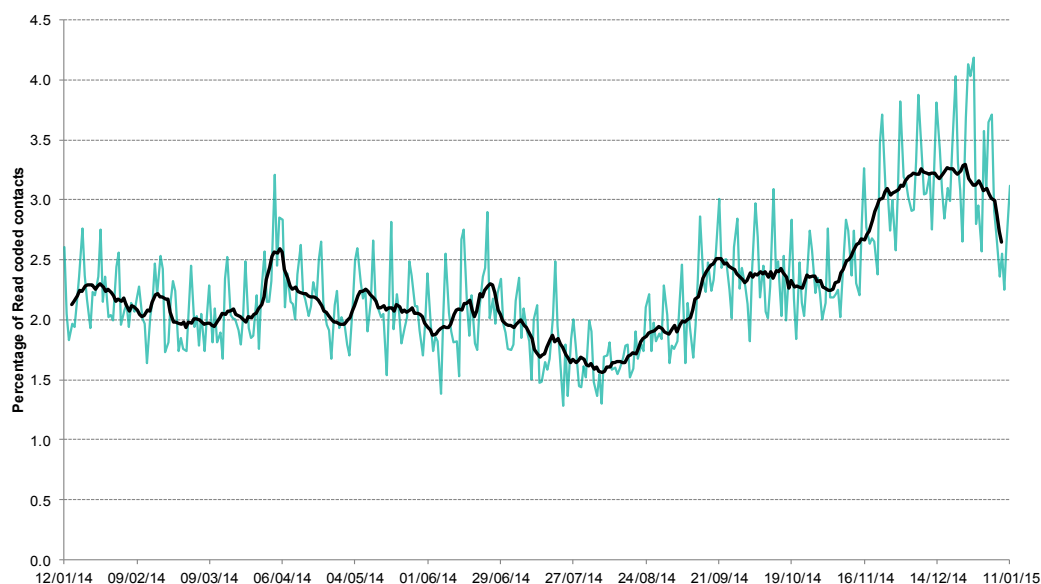


13 January 2015

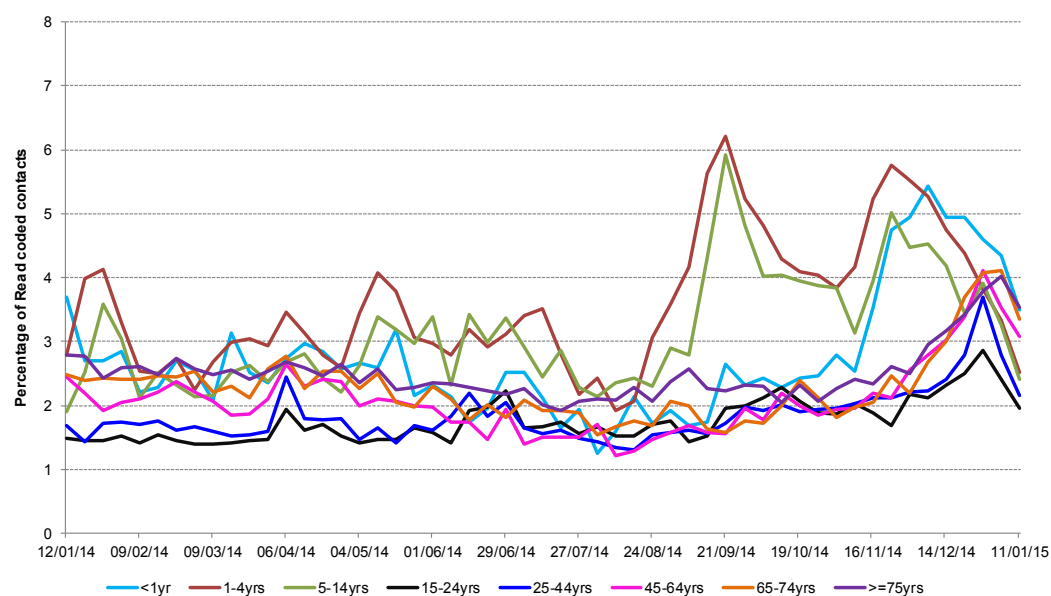
Year: 2015 Week: 02

**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\*.

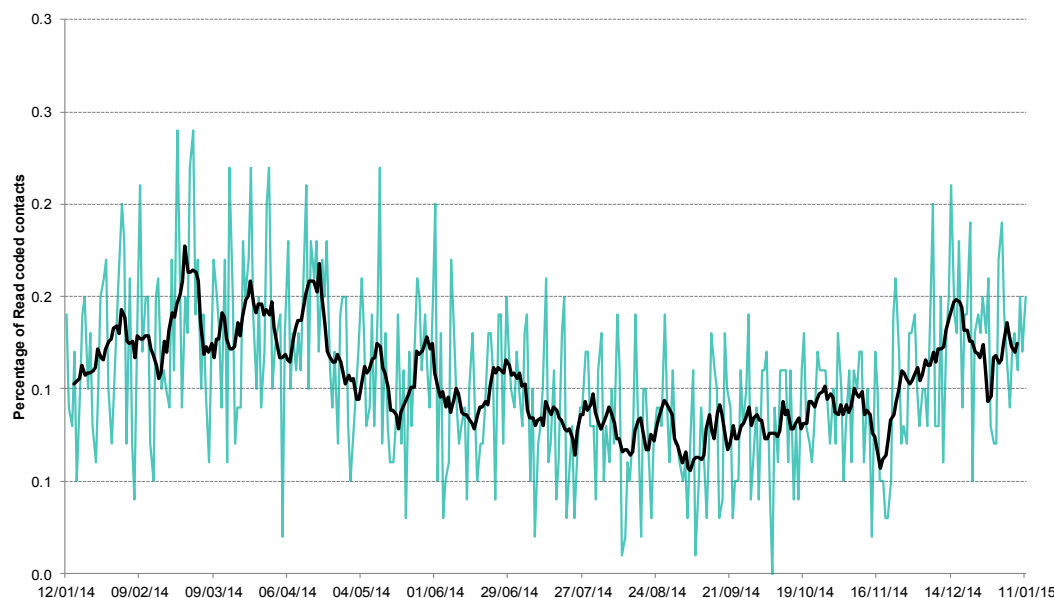


**5a: Difficulty  
breathing/wheeze/  
asthma weekly  
contacts by age  
group.**



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

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

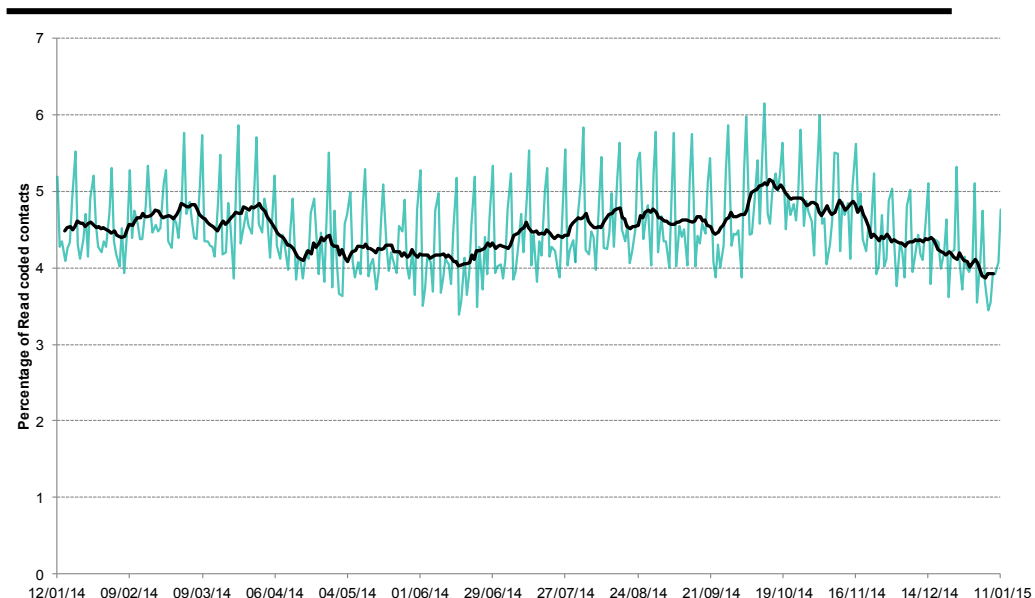


\*7-day moving average  
adjusted for bank  
holidays.

**7: Intentionally left blank.**

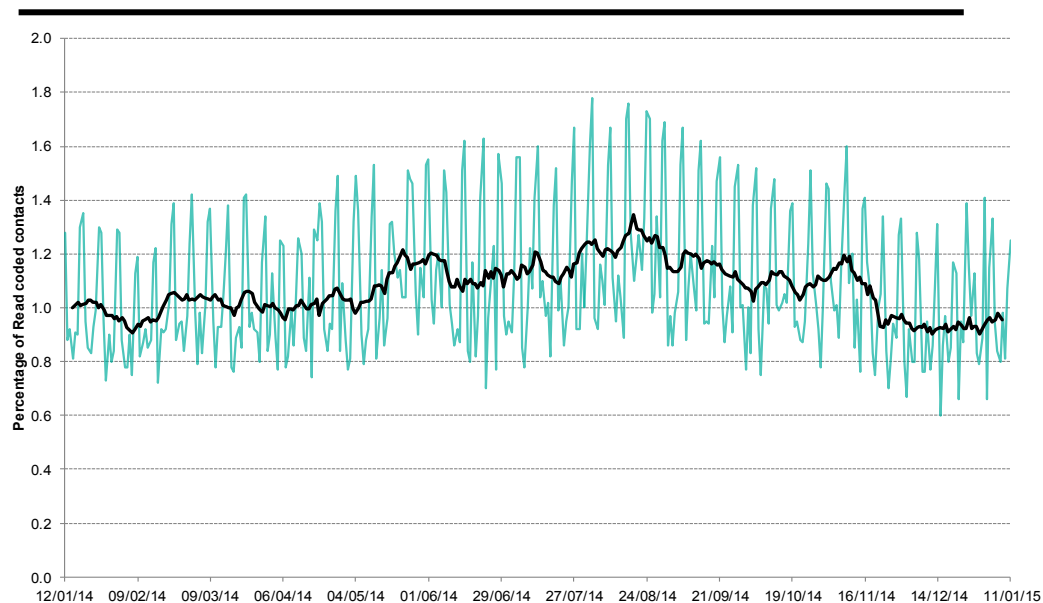
**8: Gastroenteritis daily contacts.**

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



**9: Diarrhoea daily contacts.**

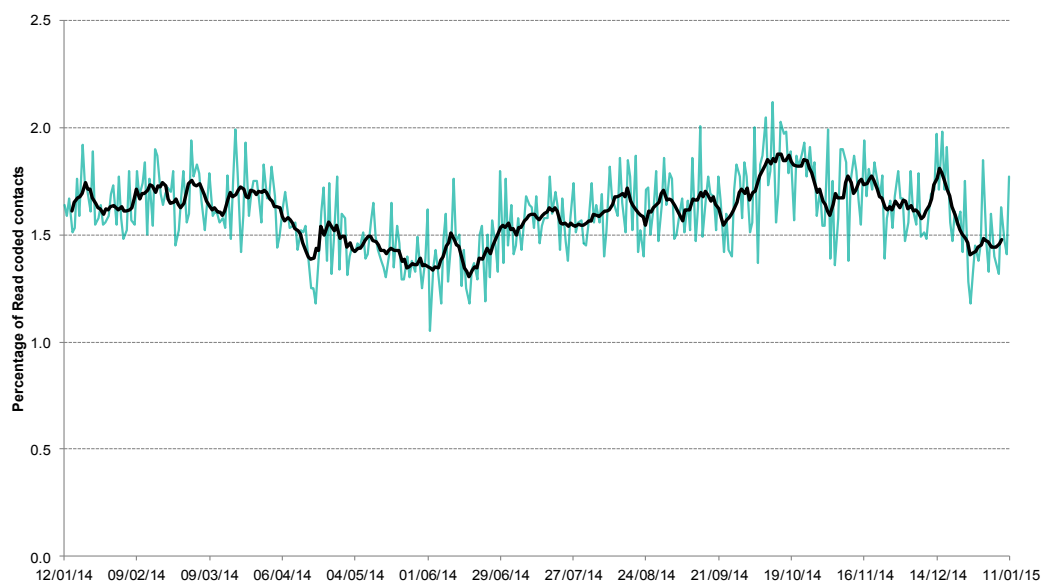
Shown as a percentage of the total contacts with a Read code and as a 7 day average\*.



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

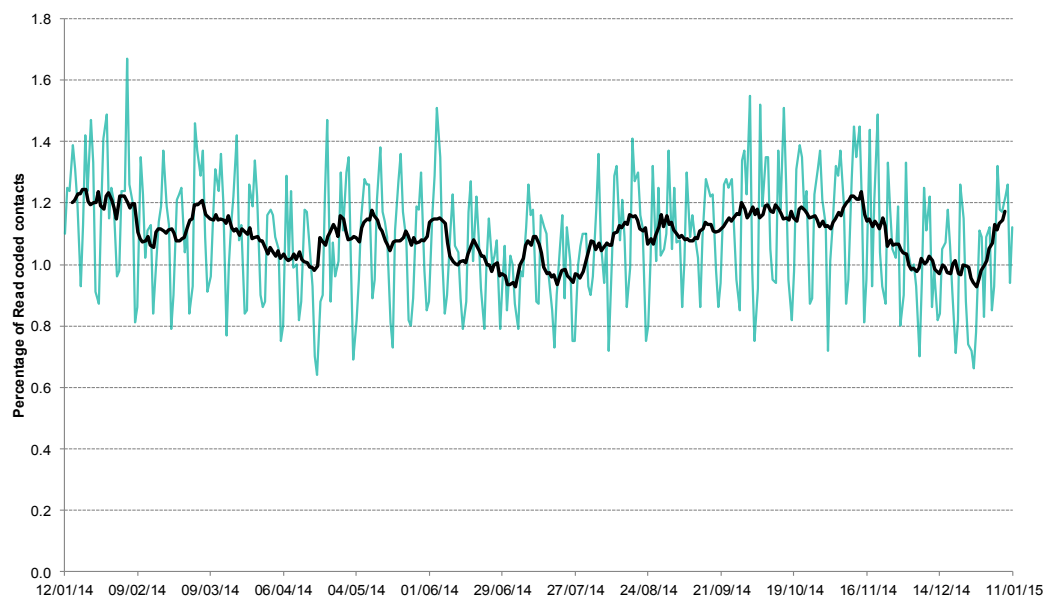
**10: Vomiting daily contacts.**

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



**11: Myocardial Infarction daily contacts.**

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.

13 January 2015

Year: 2015 Week: 02

## 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:

---

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:

---

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.

---

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

**Produced by:** PHE Real-time Syndromic Surveillance Team  
6<sup>th</sup> 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>

## Contact ReSST:

[@phe.gov.uk](https://www.gov.uk/government/collections/syndromic-surveillance)