

GP In Hours

Syndromic Surveillance System: England

In This Issue:

Key messages.

at a glance. GP practices and

denominator

National syndromic indicators.

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information.

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population.

Diagnostic indicators

Key messages

Data to: 05 March 2017

Scarlet fever consultations increased slightly during week 9; particularly in the 5-14 years age group (figures 4 and 4a).

Consultations for pneumonia increased slightly during week 9, however rates remain within seasonally expected levels and highest in the 65+ years age groups (figures 6 and 6a).

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 - 2 Alert and readiness http://www.metoffice.gov.uk/weather/uk/coldweatheralert/

Diagnostic indicators at a glance:

| 5 5 | | |
|-----------------------------------|------------|----------------------------|
| Indicator | Trend | Level |
| Upper respiratory tract infection | decreasing | below baseline levels |
| Influenza-like illness | decreasing | below baseline levels |
| Pharyngitis | no trend | below baseline levels |
| Scarlet fever | increasing | similar to baseline levels |
| Lower respiratory tract infection | decreasing | below baseline levels |
| Pneumonia | increasing | similar to baseline levels |
| Gastroenteritis | no trend | below baseline levels |
| Vomiting | no trend | below baseline levels |
| Diarrhoea | increasing | below baseline levels |
| Asthma | decreasing | below 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 | below baseline levels |
| Pertussis | decreasing | below baseline levels |
| Chickenpox | no trend | similar to baseline levels |
| Herpes zoster | no trend | similar to baseline levels |
| Cellulitis | no trend | similar to baseline levels |
| Impetigo | no trend | below baseline levels |
| | | |

GP practices and denominator population:

| Year | Week | GP Practices Reporting** | Population size** |
|------|------|--------------------------|-------------------|
| 2017 | 9 | 3,618 | 28.3 million |

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

1: Upper respiratory tract infection (URTI)

160

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

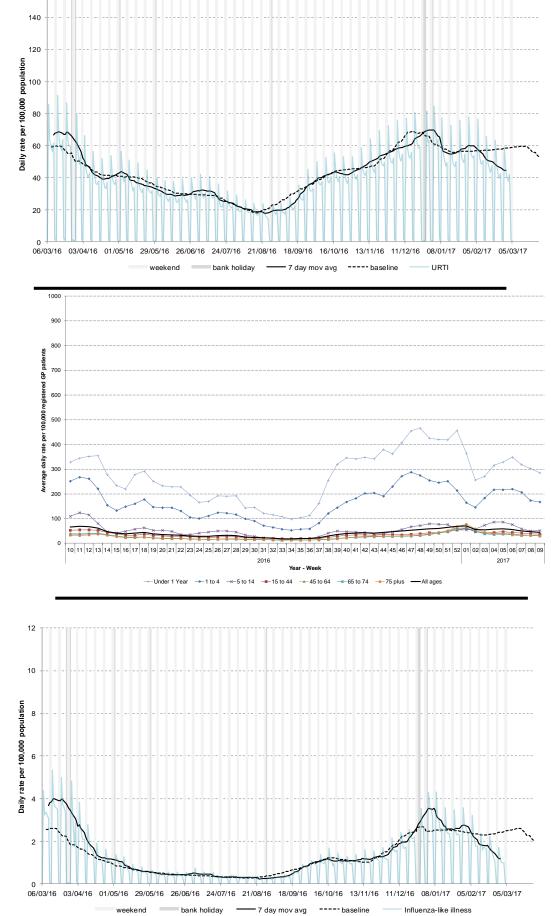
1a: Upper respiratory tract infection by age

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



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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2a: Influenza-like illness (ILI) by age

18

16

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

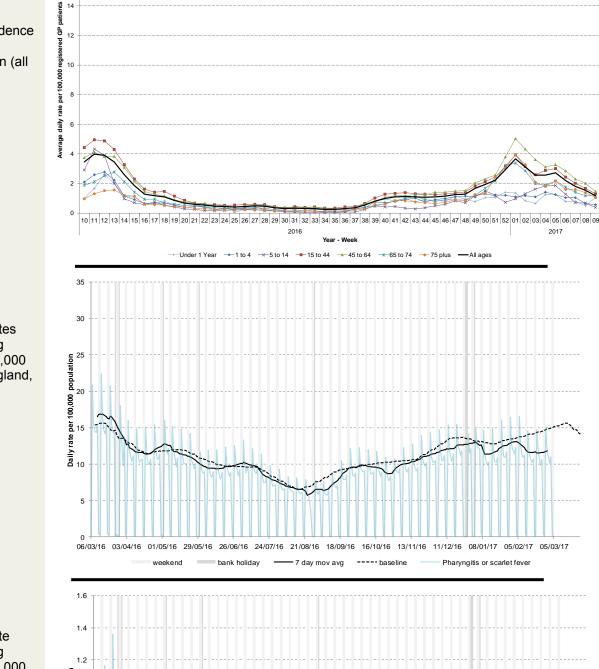
3: Pharyngitis or scarlet fever

Daily incidence rates (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, based on a population denominator of approximately 5.5 million patients).

* 7-day moving average adjusted for bank holidays.





GP In Hours

2017

08/01/17 05/02/17 05/03/17

Pharyngitis or scarlet fever

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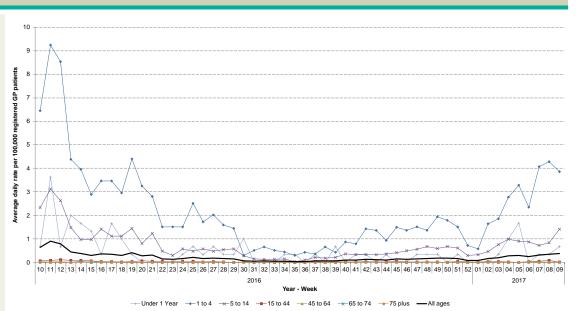
Public Health England

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/ear: 2017 Week: 9

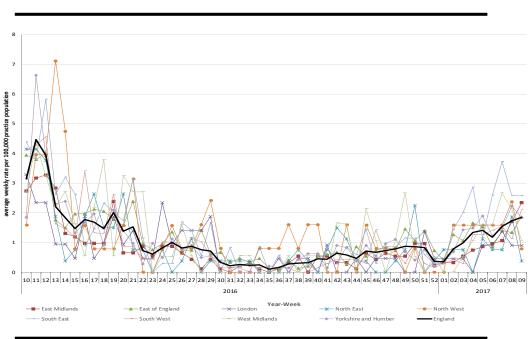
4a: Scarlet fever by age

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



4b: Scarlet fever by PHE centre

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



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GP In Hours

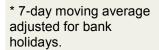
Year: 2017 Week: 9

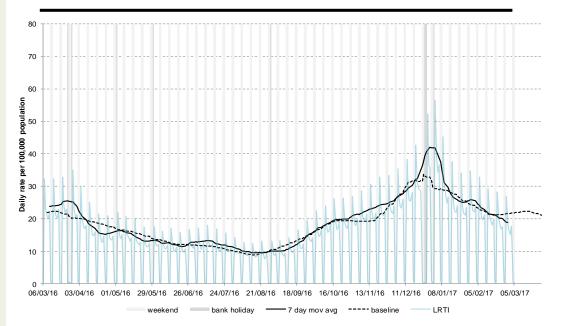
5: Lower respiratory tract infection (LRTI)

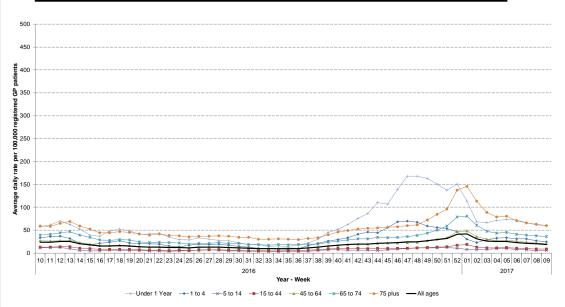
Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages).

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

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







6: Pneumonia

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

6a: Pneumonia by age

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29/05/16

weekend

bank holiday

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

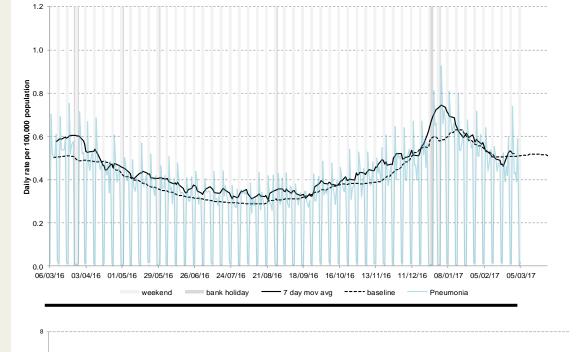
7: Gastroenteritis

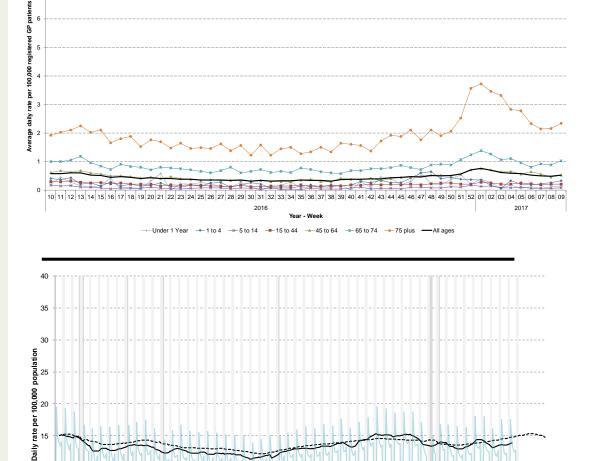
Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages).

* 7-day moving average adjusted for bank holidays.



GP In Hours





26/06/16 24/07/16 21/08/16 18/09/16 16/10/16 13/11/16 11/12/16 08/01/17 05/02/17 05/03/17

- 7 day mov avg

---- baseline

Gastroenteritis



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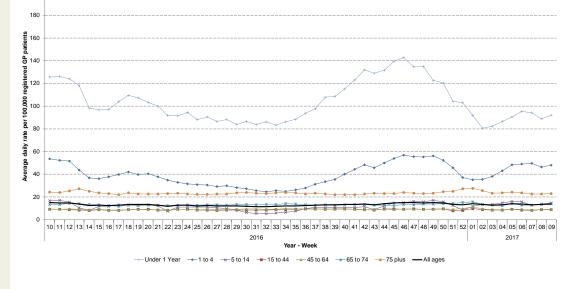
Public Health England

7a: Gastroenteritis by age

200

12

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

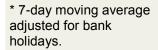


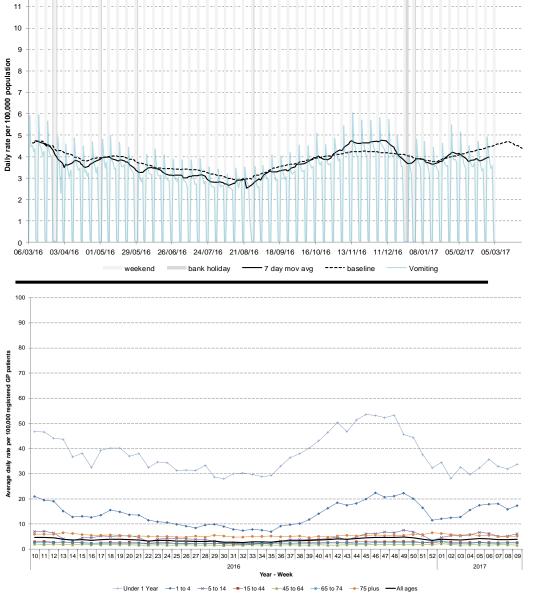
8: Vomiting

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

8a: Vomiting by age

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



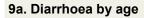


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Year: 2017 Week: 9

9: Diarrhoea

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



90 80

70

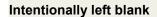
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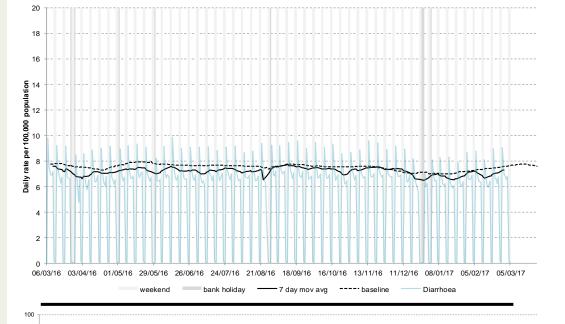
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daily rate per 100,000 registered GP patients

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



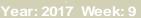


10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 01 02 03 04 05 06 07 08 09

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

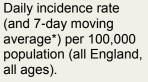
2016





2017

10: Asthma

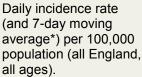


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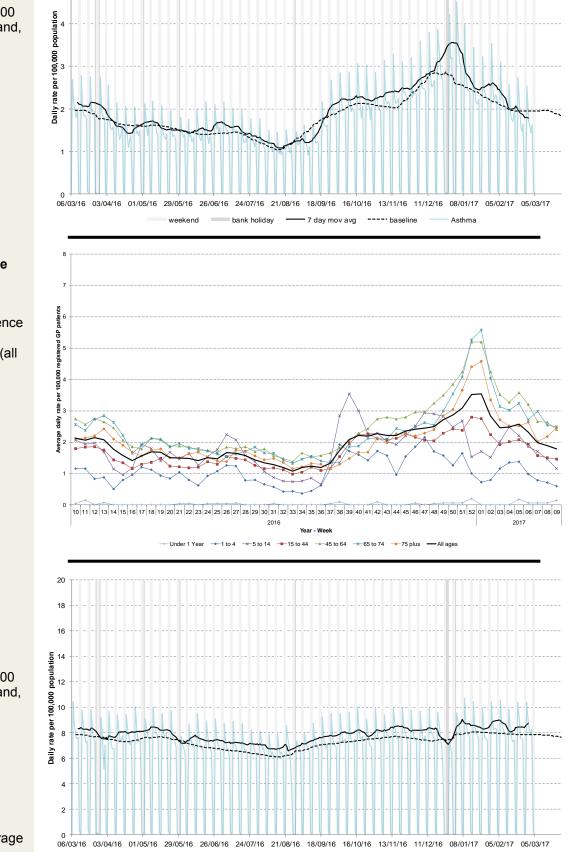


Average daily incidence rate by week per 100,000 population (all England).



11: Wheeze

* 7-day moving average adjusted for bank holidays.



weekend

bank holiday

- 7 day mov avg

---- baseline

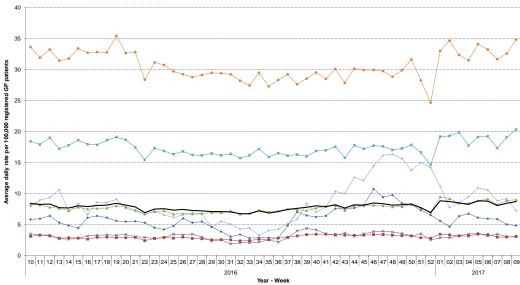
GP In Hours

(ear: 2017 Week: 9

Wheeze

11a: Wheeze by age

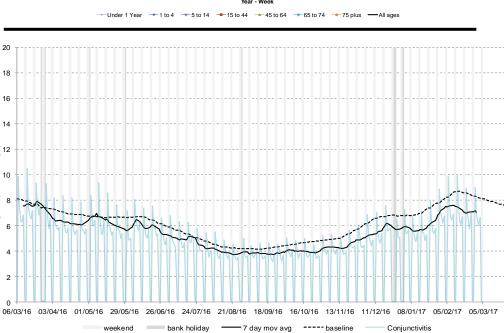
Average daily incidence rate by week per 100,000 population (all England).



12: Conjunctivitis

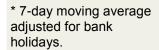
Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages).

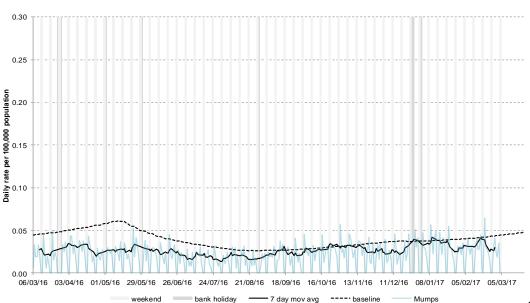
Daily rate per 100,000 population



13: Mumps

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





GP In Hours

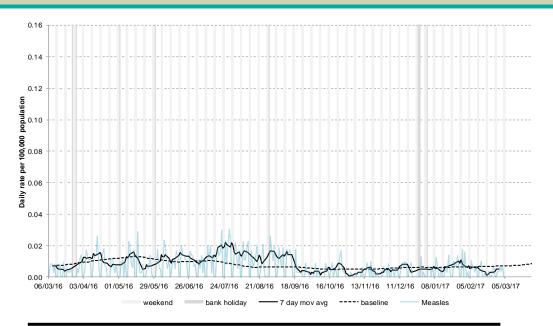
Year: 2017 Week: 9

WWW Public Health England

07 March 2017

14: Measles

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

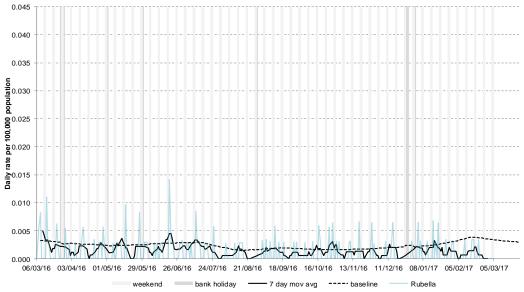


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15: Rubella

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

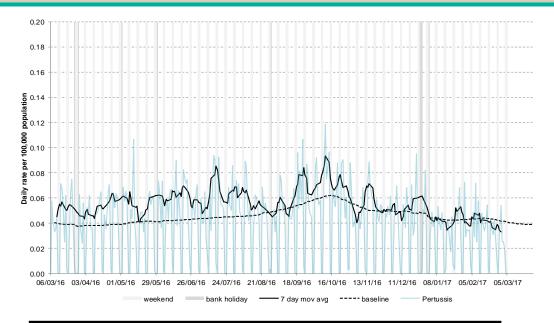
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GP In Hours

/ear: 2017 Week: 9

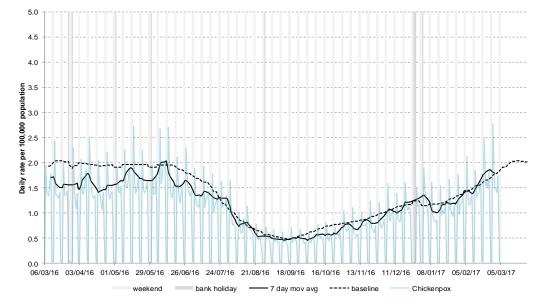
16: Pertussis

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



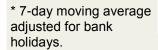
17: Chickenpox

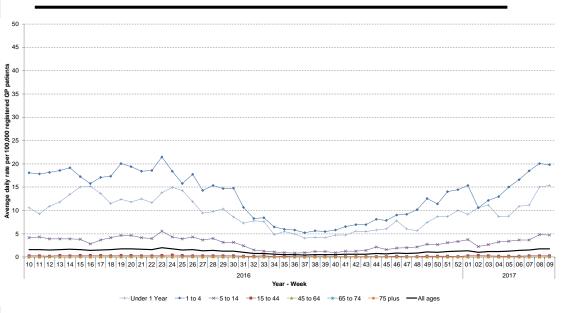
Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages).



17a: Chickenpox by age

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





18: Herpes zoster

Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages). 6.0

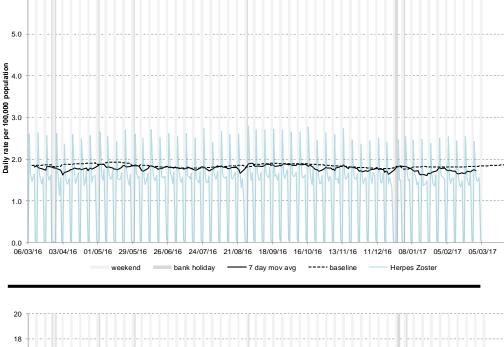
19: Cellulitis

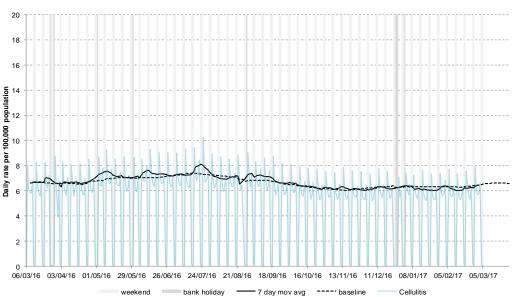
Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages).

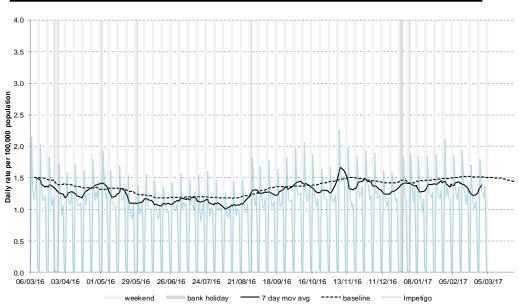


Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages).

* 7-day moving average adjusted for bank holidays.



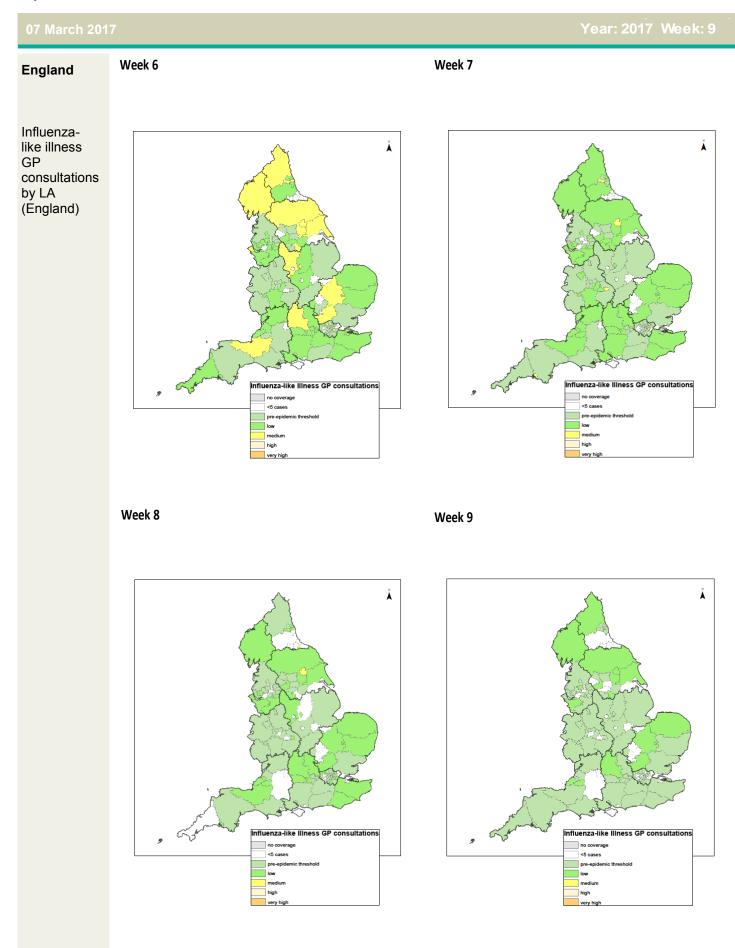




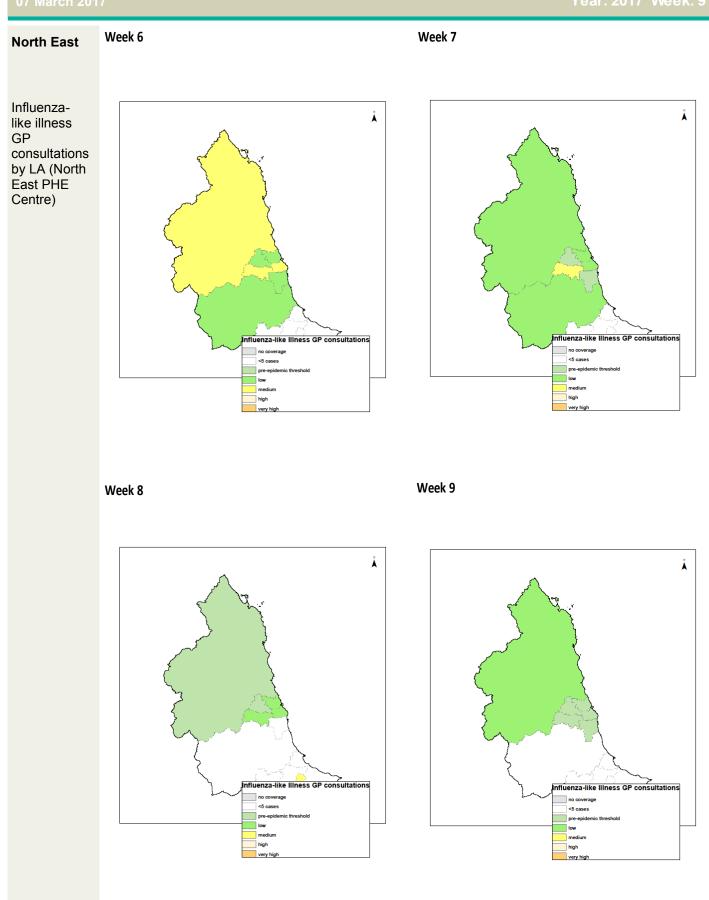
GP In Hours

(ear: 2017 Week: 9

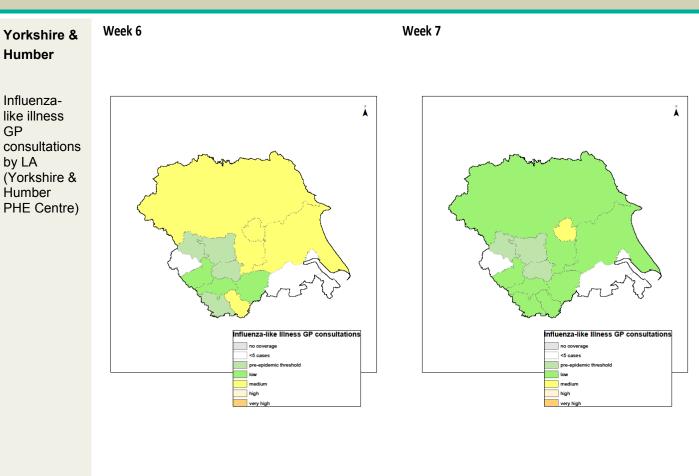
| 07 March 2017 Year: 2017 Week: 9 | | | |
|--|---|--|--|
| Notes and further information | The Public Health England GP in hours surveillance system is a syndromic surveillance system monitoring community-based morbidity recorded by GP practices. GP consultation data are analysed on a daily basis to 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. Baselines represent seasonally expected levels of activity and are constructed from historical data. Furthermore, they take into account any known substantial changes in data collection, population coverage or reporting practices. Baselines are refreshed using the latest data on a regular basis. | | |
| 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. <i>Influenza Other Respir Viruses</i>. 2013;7(4):546-58. ² Green HK et al. <i>Epidemiol Infect</i>. 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. | | |
| | GP In Hours Syndromic Surveillance System Bulletin. | | |
| Contact ReSST: syndromic.surveillance @phe.gov.uk | 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: <u>https://www.gov.uk/government/collections/syndromic-surveillance-systems-and</u> <u>-analyses</u> | | |



Year: 2017 Week: 9

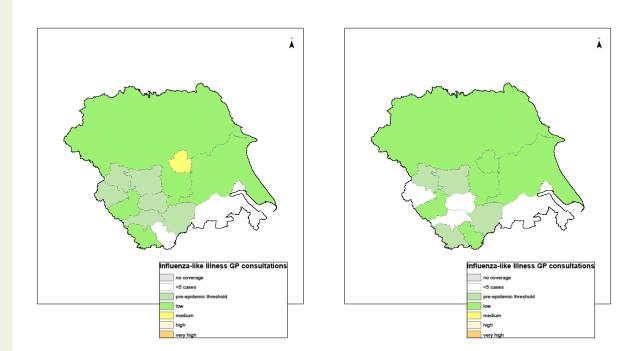


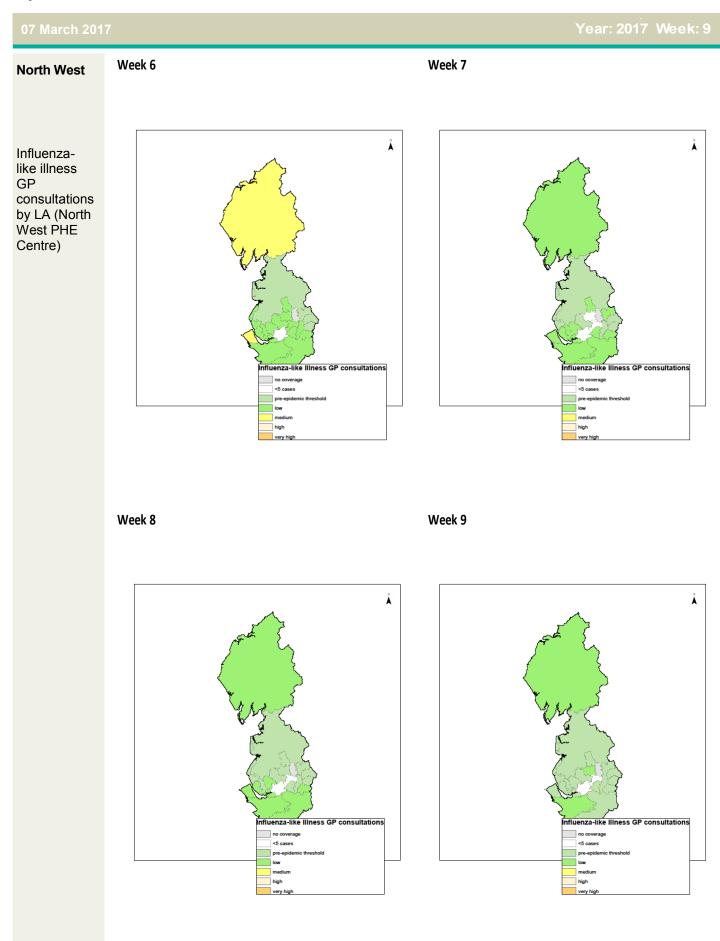
07 March 2017

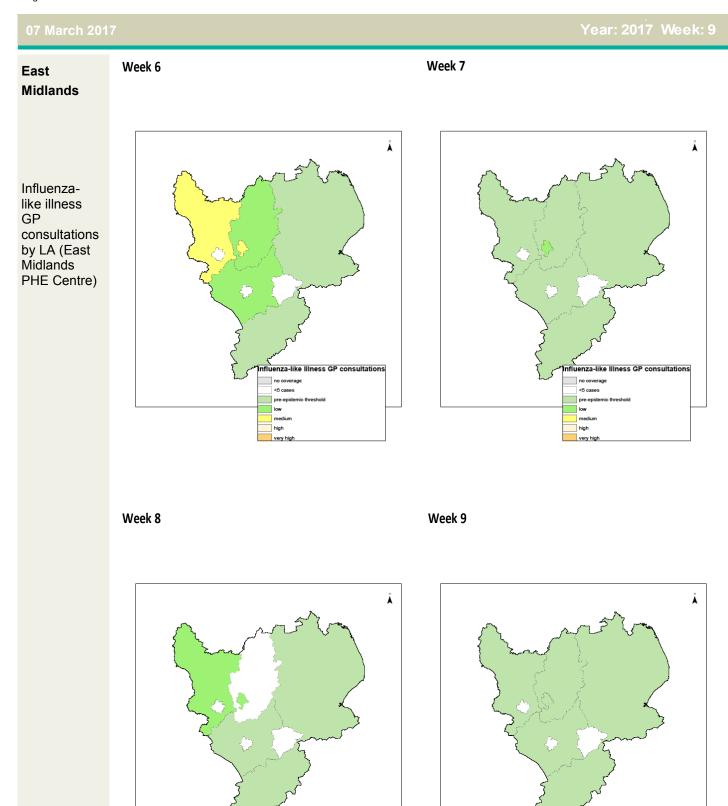


Week 8

Week 9







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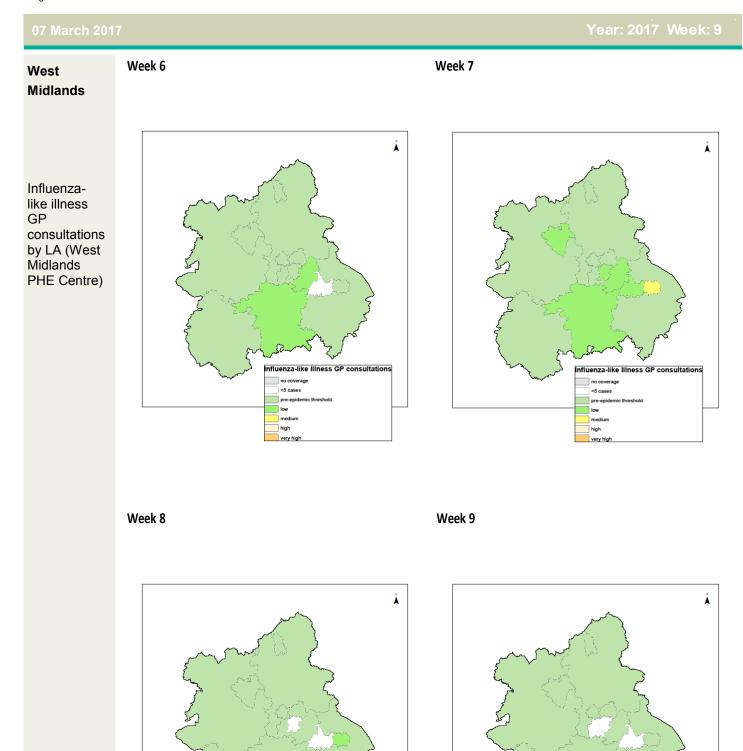
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nfluenza-like Illness GP consultations

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GP In Hours Appendix

Week 6 Week 7 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 8 Week 9 Ă Ă

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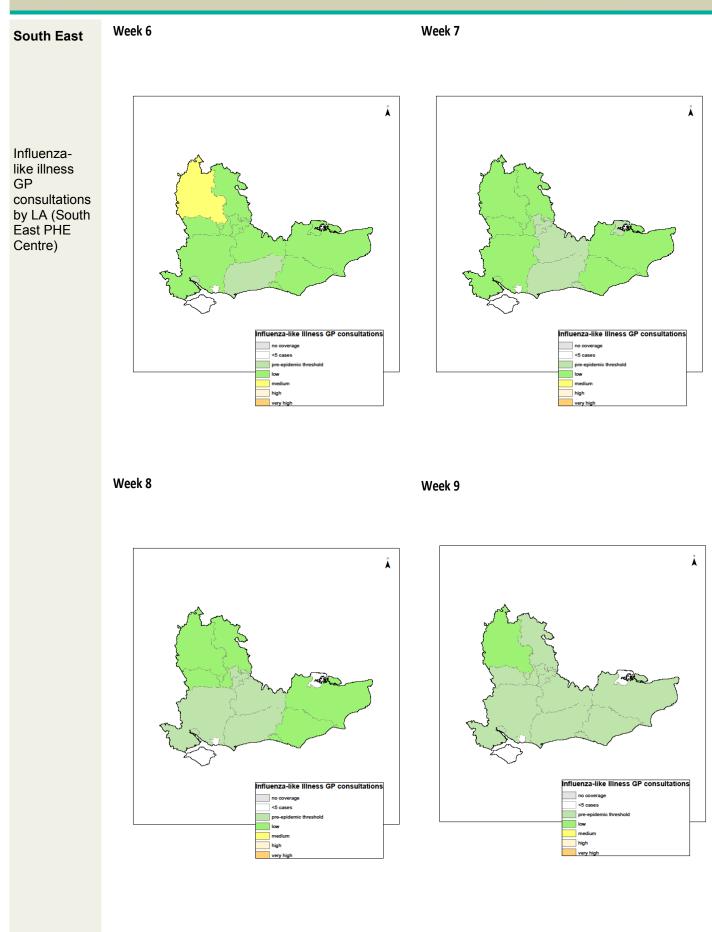
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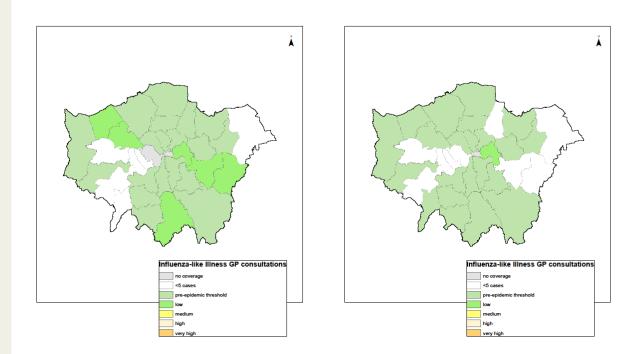
Year: 2017 Week: 9



Week 6 Week 7 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 medi high high very h

Week 8

Week 9



Year: 2017 Week: 9

