



01 November 2016

Year: 2016 Week: 43

**Syndromic
surveillance national
summary:**

Reporting week: 24 to 30 October 2016

During week 43 there were increases in bronchitis/bronchiolitis across several syndromic systems, particularly in young children. These increases are in line with increasing laboratory reports for respiratory syncytial virus activity.

[Click to subscribe to the weekly syndromic surveillance email](#)

**Remote Health
Advice:**

During week 43 calls for cough continued to increase within expected seasonal levels, particularly in children aged <15 years (figures 4 and 4a). This increase is in line with recent increases in laboratory reports for respiratory syncytial virus activity. There were also further increases in NHS 111 calls for diarrhoea and vomiting (figures 7 and 8), particularly in children aged <15 years (figures 7a and 8a).

[Click to access the Remote Health Advice bulletin](#)

GP In Hours:

Overall, during week 43 there were no further increases in GP consultations for a range of respiratory conditions, which remain at or below seasonally expected levels.

[Click to access the GP In Hours bulletin](#)

**Emergency
Department:**

During week 43, ED attendances for respiratory conditions continued to increase, including attendances for acute respiratory infection and bronchitis/bronchiolitis (figures 7-11). The increases in bronchitis/bronchiolitis were particularly noted in infants aged <1 year (figure 11) and activity appears earlier than last year (figure 10), in line with laboratory reports for respiratory syncytial virus (RSV).

[Click to access the EDSSS bulletin](#)

GP Out of Hours:

During week 43 there were further seasonal increases in consultations for acute respiratory infection (figure 2) and bronchitis/bronchiolitis (figure 4), both in line with increases in laboratory reports for respiratory syncytial virus (RSV).

There were also increases in GP consultations for gastroenteritis and vomiting in the 5-14 years age group (figure 7a and 9a).

[Click to access the GPOOHSS bulletin](#)

**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/our-programmes/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

PHE Real-time Syndromic Surveillance Team

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