



17 December 2014

Year: 2014 Week: 50

**Syndromic  
surveillance national  
summary:**

## Reporting week: 8 to 14 December 2014

Syndromic surveillance indicators for influenza, including GP consultations for influenza-like illness, continued to increase across all syndromic systems during week 50.

GP consultations for severe asthma have continued to increase; levels are now slightly higher than those expected, particularly in 5-14 year olds.

**Remote Health  
Advice:**

NHS 111 calls for cold/flu continued to increase during week 50 (figure 2). Increases in cold/flu calls were recorded across all age groups (figure 2a).

**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 50 (fig 2). ILI rates continue to increase in age groups over 5+ years with the highest rates in the 5-14 and 15-44 year age groups (fig 2a). Although the highest ILI rates are in London, note these are historically higher than the national rate (online data spreadsheet),

Consultation rates for severe asthma continue to rise; rates are slightly above seasonally expected levels, particularly in the 5-14 years age group (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 50 (figure 7-8). ARI attendances remain high in the <5 year olds although attendances in the 5-14 years age group increased (figure 9).

Bronchitis attendances continued to increase, particularly in young children, and are at levels slightly higher than reported last winter (figure 10-11). Attendances for asthma/wheeze/difficulty breathing continued to decrease during week 50 (figure 14).

**Click to access the EDSSS bulletin** [\[intranet\]](#) [\[internet\]](#)

**GP Out of Hours:**

Consultations for influenza-like illness continued to rise in week 50 (figure 3). Influenza-like illness consultations are highest in the 5 - 44 years age groups (figure 3a).

**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*

## Acknowledgements:

We thank and acknowledge the contribution of all data providers including:

- 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 SystemOne GP practices

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