

GP In Hours

Syndromic Surveillance System: England

Key messages

Data to: 21 June 2015

There have been further increases in allergic rhinitis consultations during week 25 (figure 12), notably in the 5-14 years age group (figure 12a). There have also been increases in insect bite consultations, in line with seasonal expectations (figure 24).

A Heat-Health Watch system operates in England from 1 June to 15 September each year. As part of the Heatwave Plan for England, the PHE Real-time Syndromic Surveillance team will be routinely monitoring the public health impact of hot weather using syndromic surveillance system during this period.

Heat-health watch level (current reporting week): level 1 Summer preparedness

Diagnostic indicators at a glance:

Indicator	Trend	Level
Upper respiratory tract infection	decreasing	below baseline levels
Influenza-like illness	no trend	similar to baseline levels
Pharyngitis	decreasing	similar to baseline levels
Scarlet fever	no trend	above baseline levels
Lower respiratory tract infection	decreasing	similar to baseline levels
Pneumonia	no trend	similar to baseline levels
Gastroenteritis	no trend	similar to baseline levels
Vomiting	no trend	above baseline levels
Diarrhoea	no trend	above baseline levels
Severe asthma	no trend	similar to baseline levels
Wheeze	no trend	above baseline levels
Allergic rhinitis	increasing	
Conjunctivitis	no trend	below baseline levels
Mumps	no trend	below baseline levels
Measles	no trend	similar to baseline levels
Rubella	no trend	similar to baseline levels
Pertussis	no trend	similar to baseline levels
Chickenpox	no trend	similar to baseline levels
Herpes zoster	no trend	similar to baseline levels
Cellulitis	no trend	above baseline levels
Impetigo	no trend	similar to baseline levels
Heat/sunstroke	no trend	similar to baseline levels
Insect Bites	increasing	similar to baseline levels

GP practices and denominator population:

Year	Week	GP Practices Reporting**	Population size**
2015	25	4351	32.4 million

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

In This Issue:

Key messages.

Diagnostic indicators at a glance.

GP practices and denominator

population. National syndromic

indicators.

Notes and further

information.

Appendix.

Nublic Health England

24 June 2015

1: Upper respiratory tract infection (URTI)

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

2: Influenza-like illness (ILI)

18

16

14

12

10

6

4

2

0

22/06/14 20/07/14

17/08/14

weekend

14/09/14

12/10/14

bank holiday

09/11/14

7 day mov avg

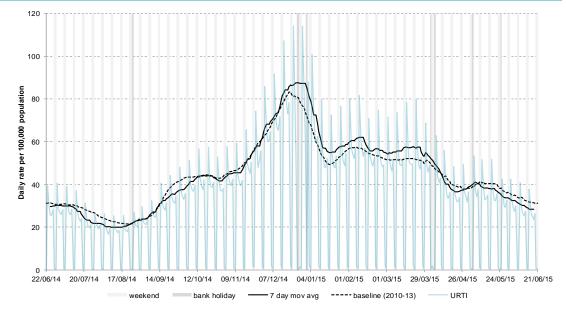
Daily rate per 100,000 population

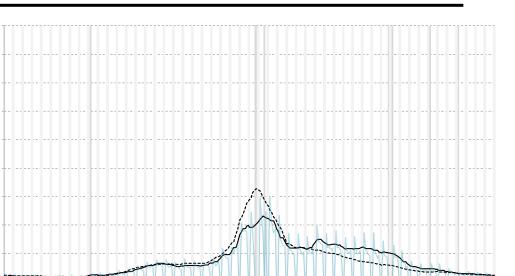
Daily incidence rates (and 7-day moving average*) per 100,000 population (all England, all ages).

3: Pharyngitis or scarlet fever

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

* 7-day moving average adjusted for bank holidays.





07/12/14 04/01/15 01/02/15

01/03/15

----- baseline (2010-13)

29/03/15

26/04/15 24/05/15 21/06/15

Influenza-like illness



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/ear: 2015 Week: 25

戀 Public Health England

4: Scarlet fever

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).



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

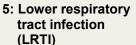
6

5

4

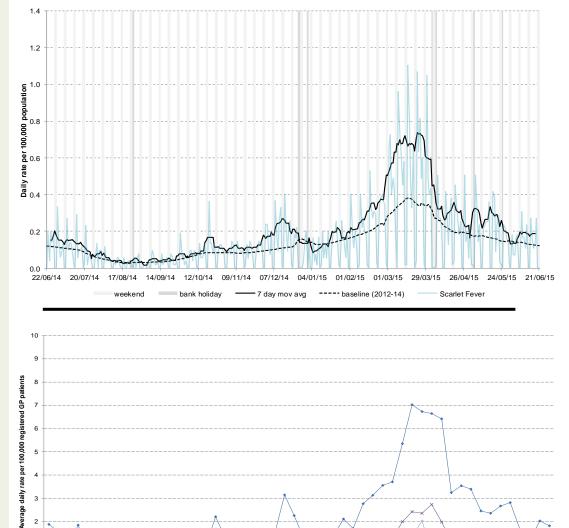
3 2

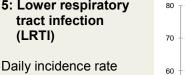
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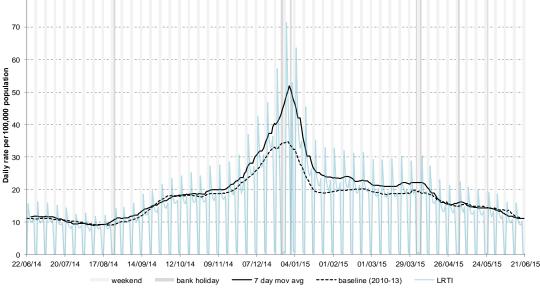


(and 7-day moving average*) per 100,000 population (all England, all ages).

* 7-day moving average adjusted for bank holidays.







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 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25

Year - Week

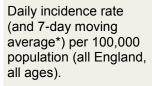
2015

2014

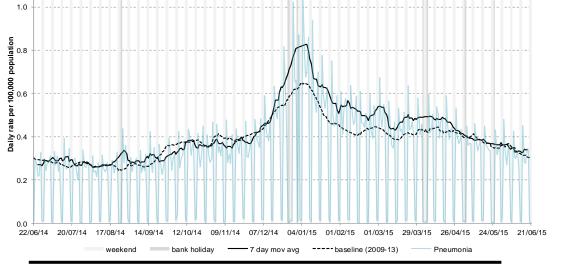
GP In Hours

爕 Public Health England

6: Pneumonia

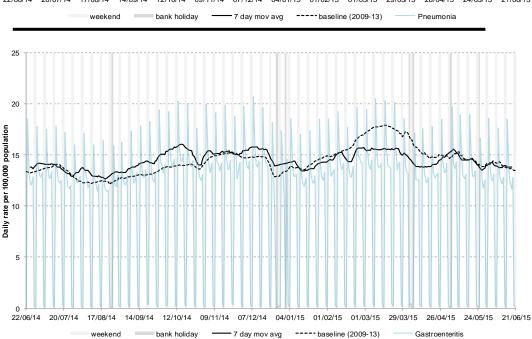


1.2



7: Gastroenteritis

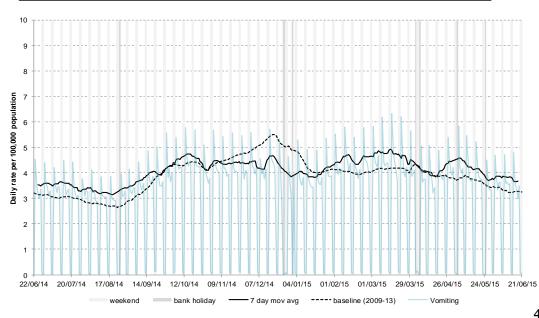
Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages).



8: Vomiting

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

* 7-day moving average adjusted for bank holidays.



Public Health England

24 June 2015

8a: Vomiting by age

100

90 80

70

60

50

22/06/14 20/07/14 17/08/14

14/09/14

kend

wee

12/10/14 09/11/14

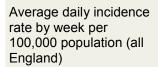
bank holiday

100,000 registered GP patients

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

9: Diarrhoea

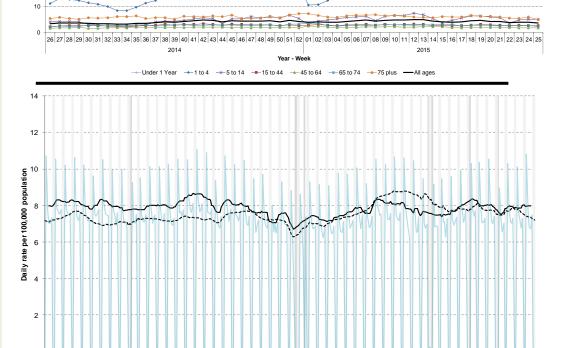
Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages).



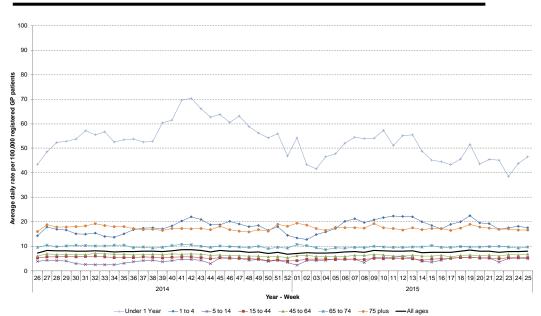
9a. Diarrhoea by age

* 7-day moving average adjusted for bank holidays.





7 day mov avg



07/12/14 04/01/15 01/02/15 01/03/15

----- baseline (2009-13)

GP In Hours

26/04/15 24/05/15 21/06/15

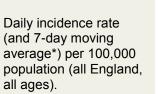
29/03/15

Diarrhoea

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10: Severe asthma

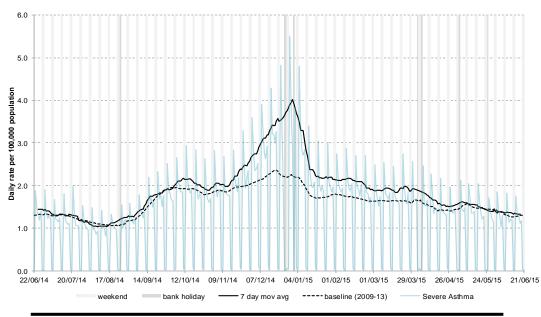


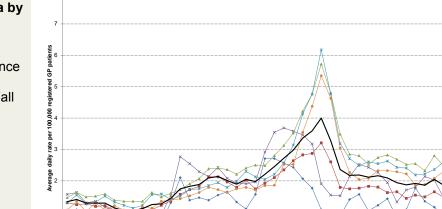


10a: Severe asthma by age

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

0



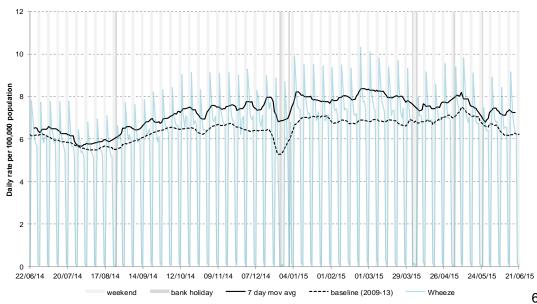


26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 2014 2015 Year - W

11: Wheeze

Daily incidence rate (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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24 June 2015

12: Allergic rhinitis

40

35

30

Daily rate per 100,000 population 21 05 25 52

10

5

100

90 80

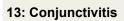
22/06/14 20/07/14

17/08/14

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

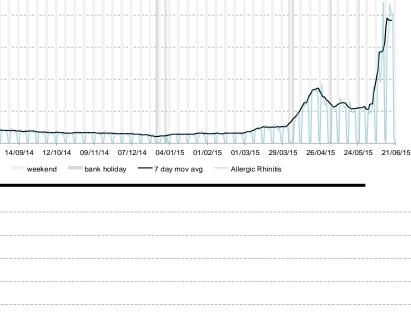
12a: Allergic rhinitis by age

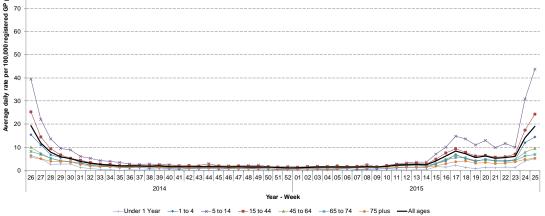
Average daily incidence rate by week per 100,000 population (all England)

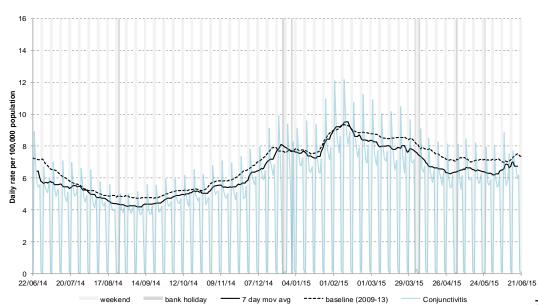


Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages).

* 7-day moving average adjusted for bank holidays.







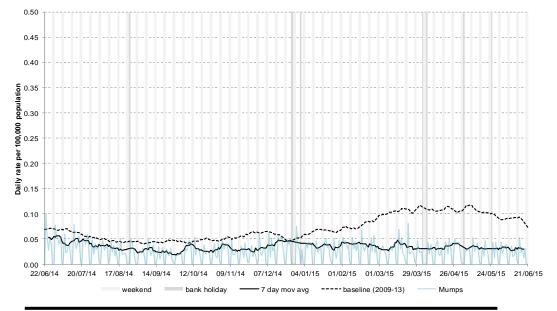
24 June 2015

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(ear: 2015 Week: 25

14: Mumps

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



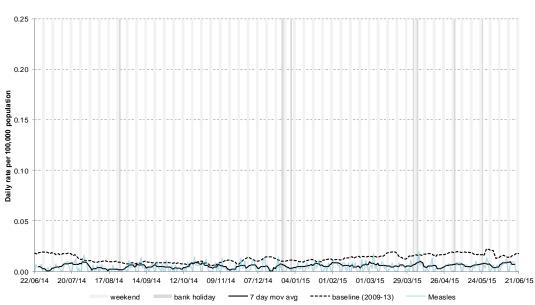
15: Measles

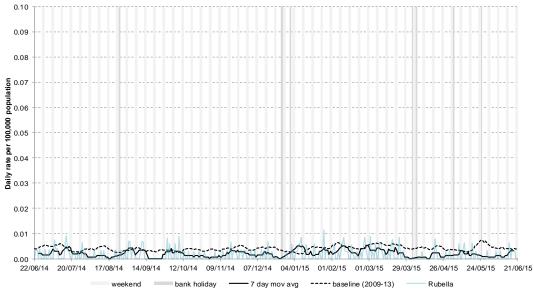
Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages).



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

* 7-day moving average adjusted for bank holidays.

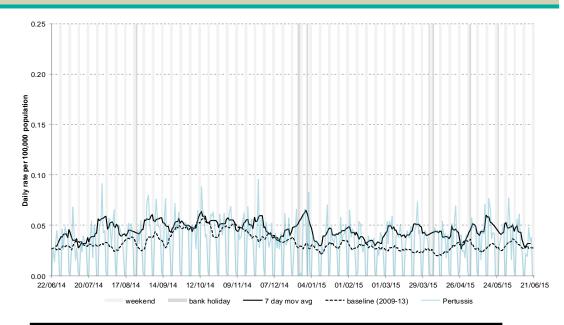




24 June 2015

17: Pertussis

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



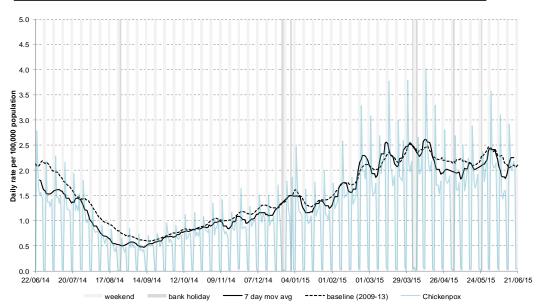
18: Chickenpox

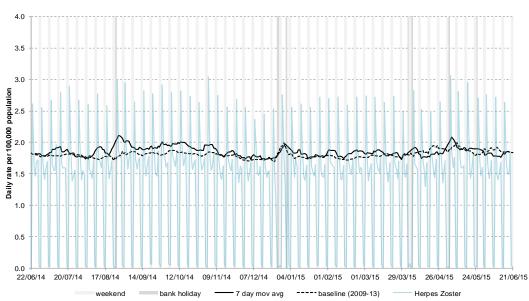
Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages).

19: Herpes zoster

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



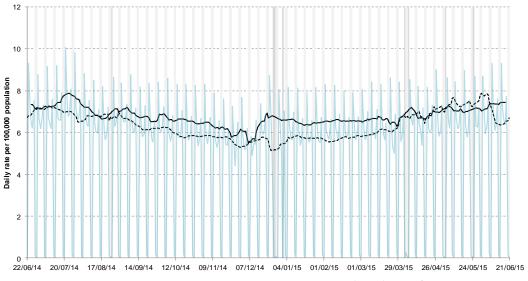
24 June 2015

20: Cellulitis

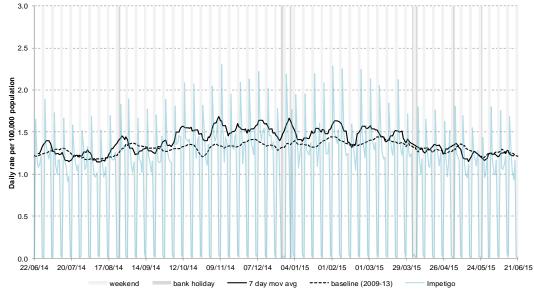
Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages).

21: Impetigo

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







22: Intentionally left blank

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* 7-day moving average adjusted for bank holidays.

GP In Hours

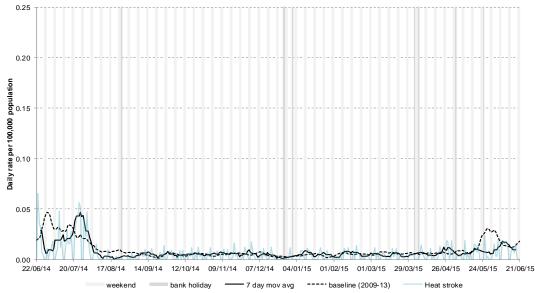
(ear: 2015 Week: 25

WWW Public Health England

24 June 2015

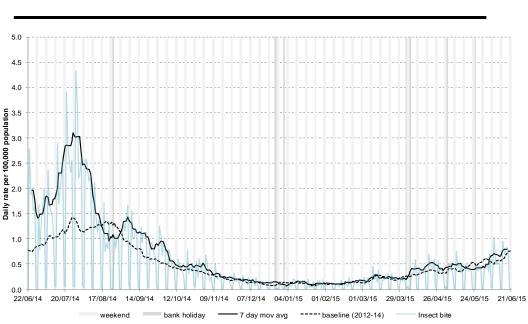
23: Heat/sunstroke

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



24: Insect Bites

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



25: Intentionally left blank

Intentionally left blank.

* 7-day moving average adjusted for bank holidays.

GP In Hours

24 June 2015	Year: 2015 Week: 25
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. Historic baselines are smoothed to remove bank holiday effects. Data from 2009 has been excluded for selected indicators which were affected by the H1N1 influenza pandemic. No baseline is currently included for allergic rhinitis. The appendix illustrates weekly GP in hours consultation data for influenza-like illness (ILI). Each PHE Centre is represented by a thematic map showing its constituent local authorities (LA) coloured according to the weekly consultation rate of ILI per 100,000 population. LAs where less than 5 cases of ILI have been reported are supressed and illustrated as no data. The maps on the following pages contains Ordnance Survey data © Crown copyright and database right 2014.
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.
Contact ReSST:	GP In Hours Syndromic Surveillance System Bulletin. 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

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