

# **GP In Hours**

Data to: 08 April 2018

Syndromic Surveillance System: England

11 April 2018 Year: 2018 Wee

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### **Key messages**

GP consultations for scarlet fever decreased during week 14 but remained above seasonally expected levels (figure 4). Please note that school holidays may have affected consultation rates.

### Diagnostic indicators at a glance:

Indicator	Trend	Level
Upper respiratory tract infection	decreasing	below baseline levels
Influenza-like illness	decreasing	similar to baseline levels
Pharyngitis	decreasing	similar to baseline levels
Scarlet fever	decreasing	above baseline levels
Lower respiratory tract infection	no trend	below baseline levels
Pneumonia	no trend	below baseline levels
Gastroenteritis	no trend	below baseline levels
Vomiting	no trend	below baseline levels
Diarrhoea	no trend	below baseline levels
Asthma	decreasing	similar to baseline levels
Wheeze	decreasing	similar to baseline levels
Conjunctivitis	no trend	below baseline levels
Mumps	no trend	below baseline levels
Measles	no trend	above baseline levels
Rubella	no trend	similar to baseline levels
Pertussis	no trend	similar to baseline levels
Chickenpox	no trend	below baseline levels
Herpes zoster	no trend	below 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**
2018	14	2735	22.4 million

<sup>\*\*</sup>based on the average number of practices and denominator population in the reporting working week.



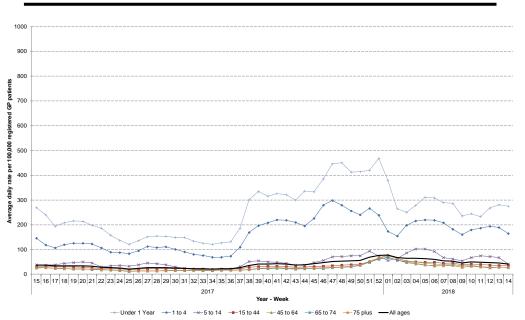
# 1: Upper respiratory tract infection (URTI)

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

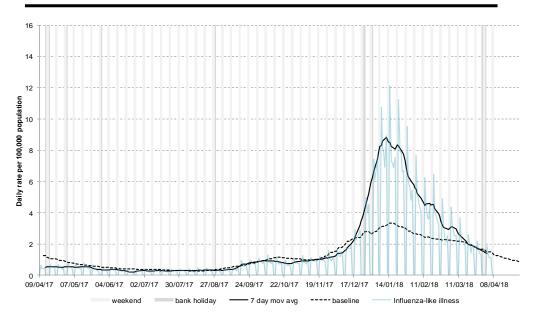


### 1a: Upper respiratory tract infection (URTI) by age

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



### 2: Influenza-like illness

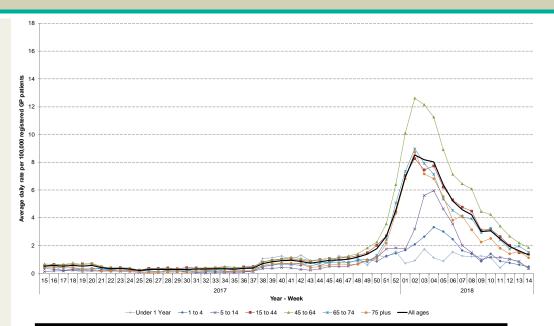


<sup>\* 7-</sup>day moving average adjusted for bank holidays.



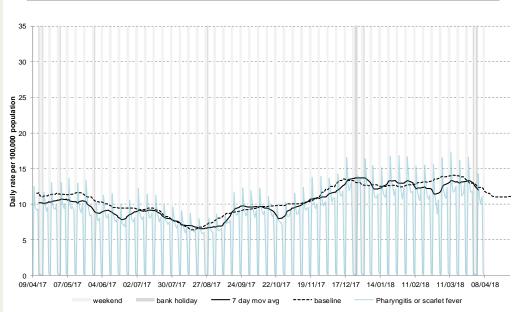
# 2a: Influenza-like illness by age

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



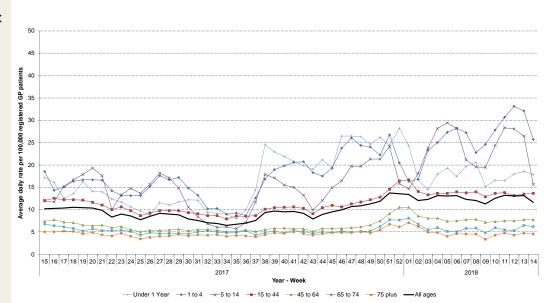
## 3: Pharyngitis or scarlet fever

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



# 3a: Pharyngitis/scarlet fever by age

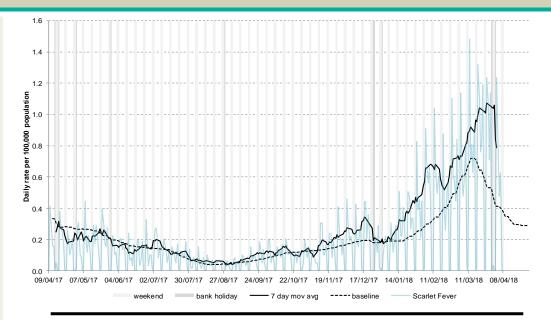
Average daily incidence rate by week per 100,000 population (all England).





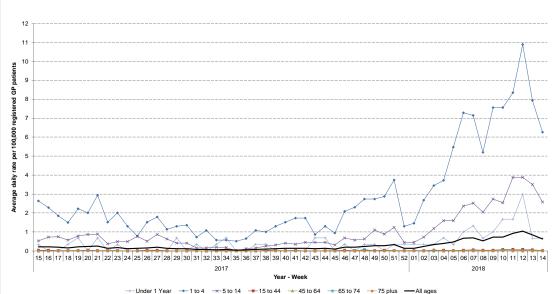
#### 4: Scarlet fever

Daily incidence rate (and 7-day moving average\*) per 100,000 population (all England, based on a denominator population of approximately 5.5 million patients)



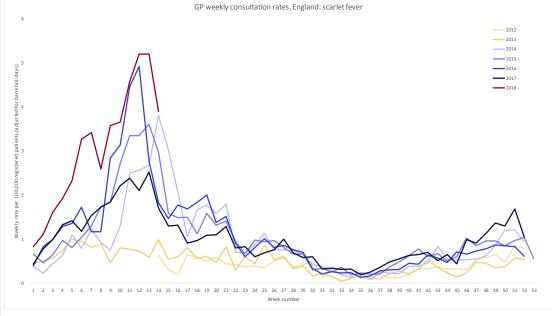
# 4a: Scarlet fever by age

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



# 4b: Scarlet fever year by year

Weekly incidence rate per 100,000 population (all England since April 2012, based on a denominator population of approximately 5.5 million patients).



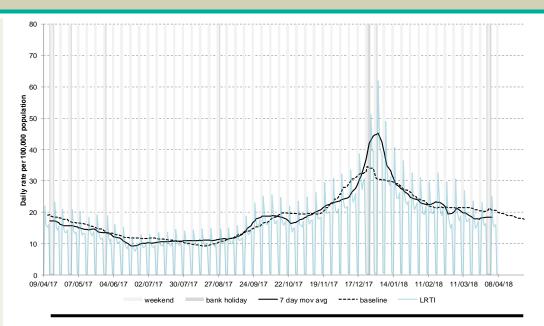
\* 7-day moving average adjusted for bank holidays.

### **GP In Hours**

11 April 2018 Year: 2018 Week: 14

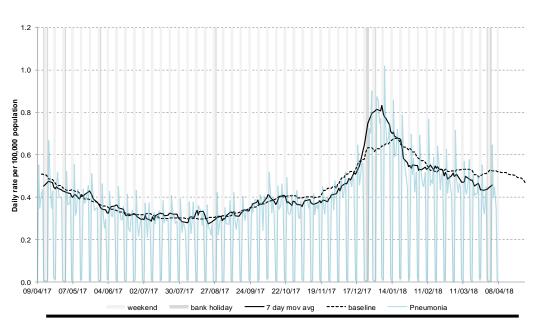
# 5: Lower respiratory tract infection (LRTI)

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



### 6: Pneumonia

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



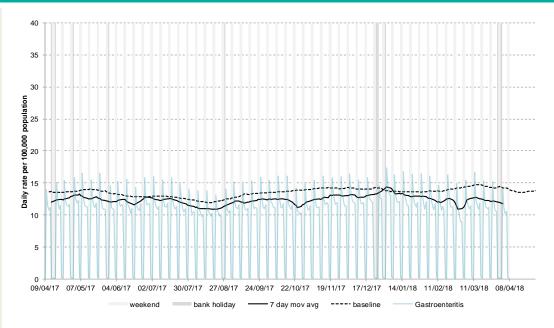
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<sup>\* 7-</sup>day moving average adjusted for bank holidays.



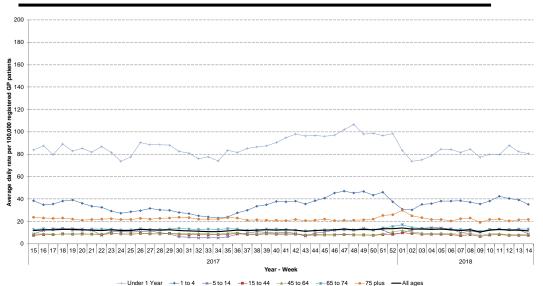
#### 7: Gastroenteritis

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

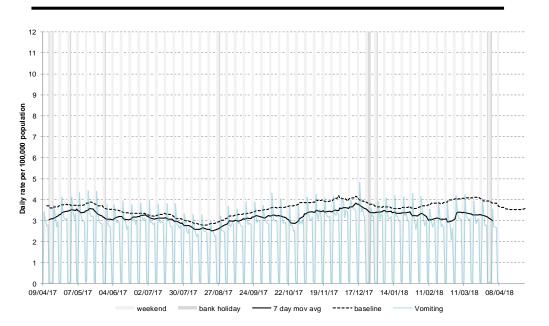


# 7a: Gastroenteritis by age

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



### 8: Vomiting

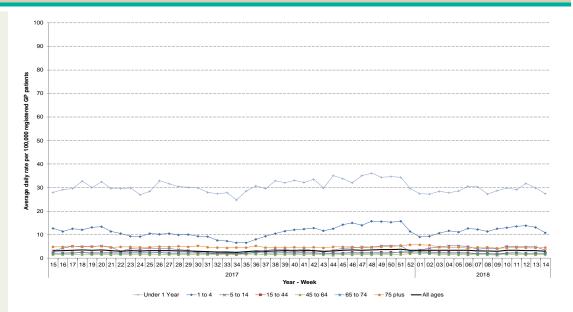


<sup>\* 7-</sup>day moving average adjusted for bank holidays.



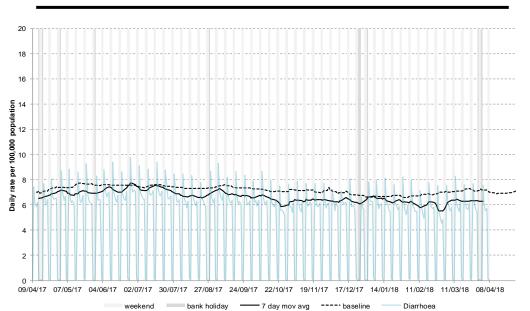
### 8a: Vomiting by age

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



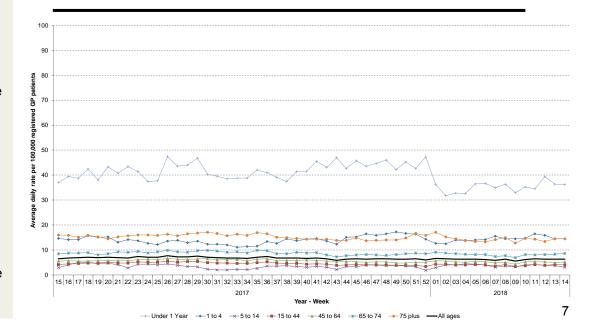
#### 9: Diarrhoea

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



### 9a. Diarrhoea by age

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

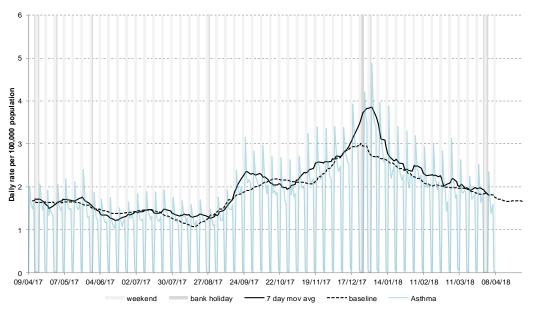


\* 7-day moving average adjusted for bank holidays.



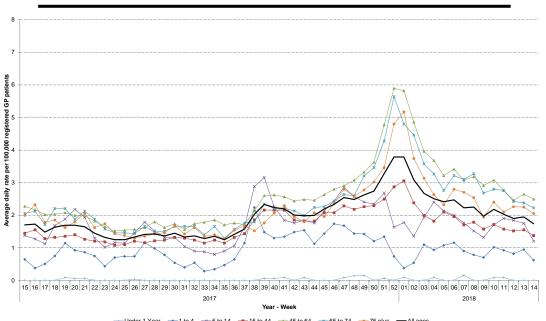
### 10: Asthma

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

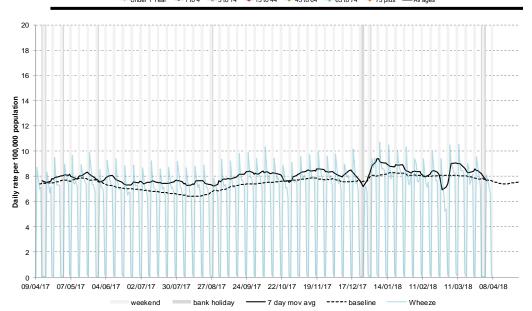


### 10a: Asthma by age

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



### 11: Wheeze

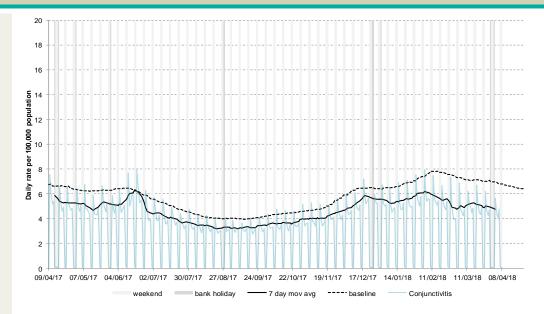


<sup>\* 7-</sup>day moving average adjusted for bank holidays.



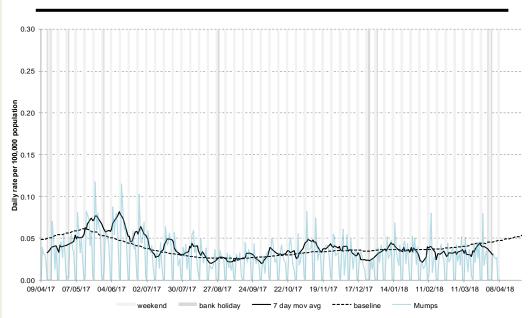
### 12: Conjunctivitis

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

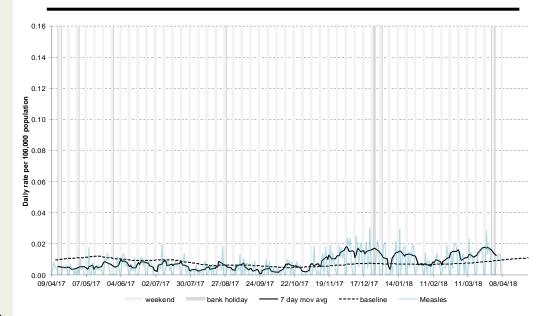


### 13: Mumps

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



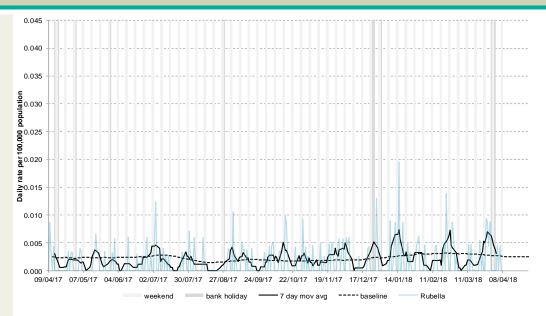
#### 14: Measles





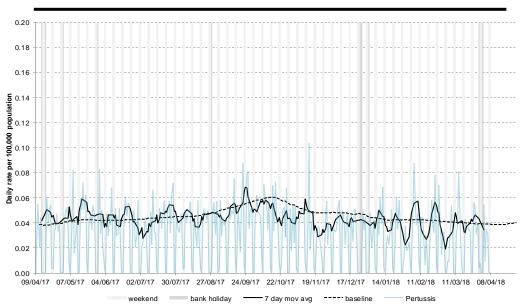
### 15: Rubella

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

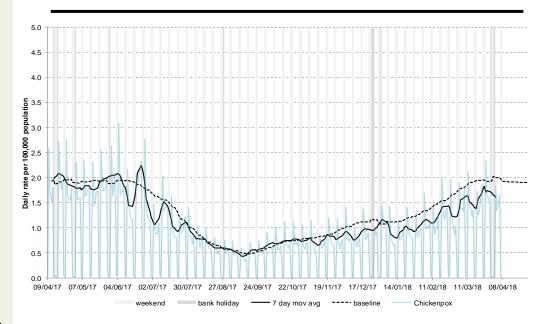


#### 16: Pertussis

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



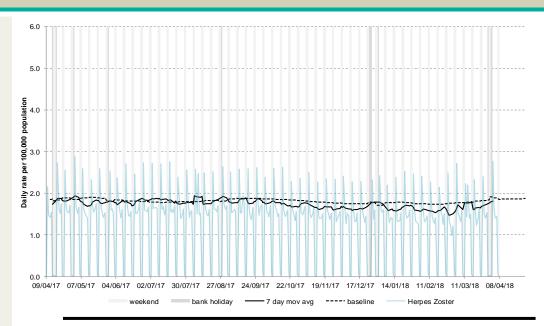
### 17: Chickenpox





### 18: Herpes zoster

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

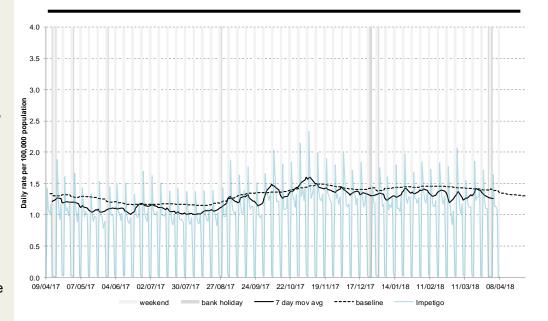


### 19: Cellulitis

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



### 20: Impetigo



<sup>\* 7-</sup>day moving average adjusted for bank holidays.



### 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 2017 the levels of influenza-like illness (ILI) rates are illustrated in the bulletin appendix maps. The ILI intensity levels are calculated using the "Moving Epidemic Method" (MEM).<sup>1</sup> MEM is used as a standard methodology for setting influenza surveillance thresholds across Europe.<sup>2</sup>
- The current ILI thresholds are based upon previous influenza seasons from 2012/13
  onwards and therefore illustrate activity levels in relation to previous ILI activity recorded in
  the GPIH system. IILI thresholds presented in the maps should be interpreted with caution
  and reference made to other GP surveillance systems incorporating more historical
  data, which are available in the PHE National Influenza Report.
- The ILI thresholds have been calculated separately for each of the nine PHE Centres to allow for differences between areas e.g. background ILI rates are historically higher in London than other areas of England. However, upper tier Local Authority (utLA) ILI consultation rates are compared to Centre-level thresholds only and therefore utLAs with higher background rates than the Centre may appear to have higher ILI activity.
- ILI consultation rates presented for each utLA in the maps should be interpreted in context
  of regional and national ILI activity. The small numbers reported at this local level can often
  result in short-lived fluctuations in rates causing threshold exceedances that are out of
  context with national and regional activity. utLA ILI data should therefore be interpreted
  with caution and interpreted in context with the national influenza report which can
  be found here:

https://www.gov.uk/government/statistics/weekly-national-flu-reports

- The maps on the following pages contains Ordnance Survey data © Crown copyright and database right 2015. Contains National Statistics data © Crown copyright and database right 2015.
  - <sup>1</sup> Vega T et al. Influenza Other Respir Viruses. 2013;**7**(4):546-58.

### **Acknowledgements:**

We thank and acknowledge the University of Nottingham, ClinRisk<sup>®</sup> 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:**

syndromic.surveillance @phe.gov.uk

### **GP In Hours Syndromic Surveillance System Bulletin.**

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Web: https://www.gov.uk/government/collections/syndromic-surveillance-systems-and-analyses

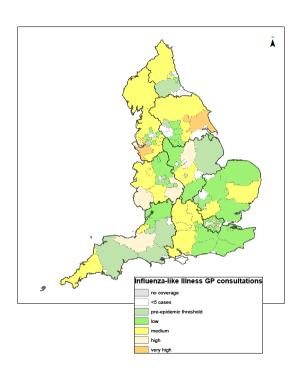
<sup>&</sup>lt;sup>2</sup> Green HK et al. *Epidemiol Infect.* 2015;**143**(1):1-12.

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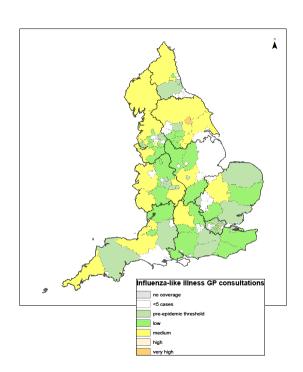
### **England**

Influenzalike illness GP consultations by LA (England)

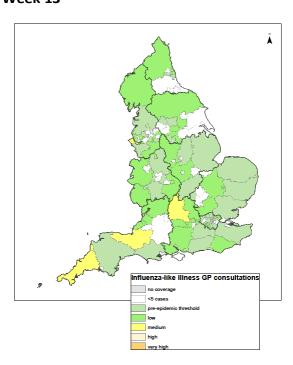
### Week 11



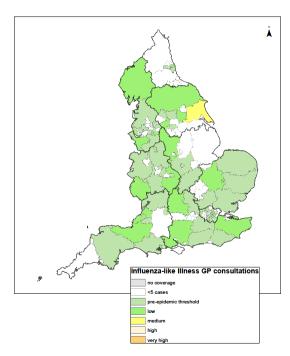
### Week 12



### Week 13



### Week 14



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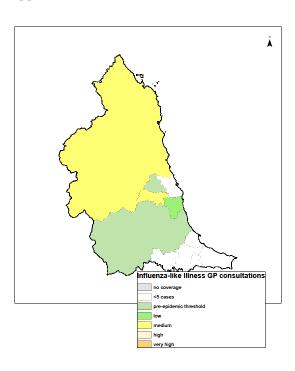
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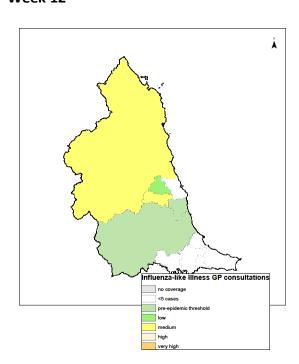
#### **North East**

Influenzalike illness GP consultations by LA (North East PHE Centre)

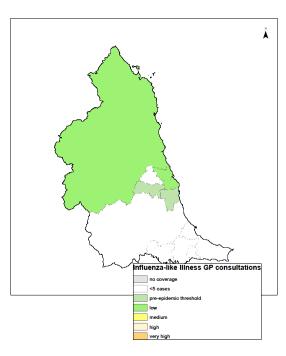
### Week 11



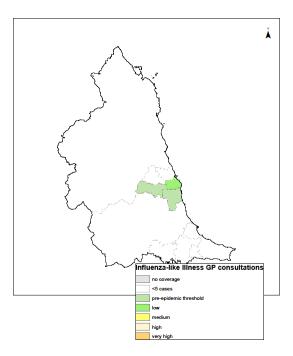
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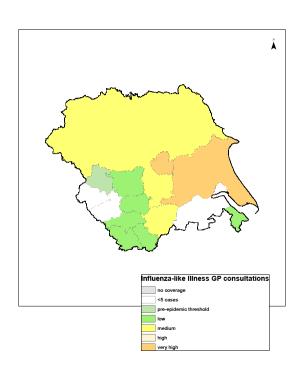
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11 April 2018 Year: 2018 Week: 14

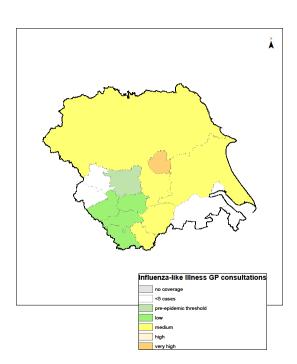
# Yorkshire & Humber

Influenzalike illness GP consultations by LA (Yorkshire & Humber PHE Centre)

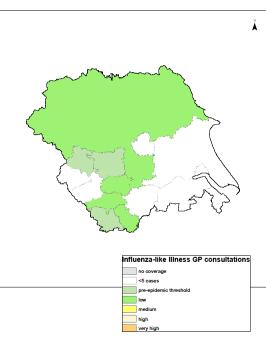
### Week 11



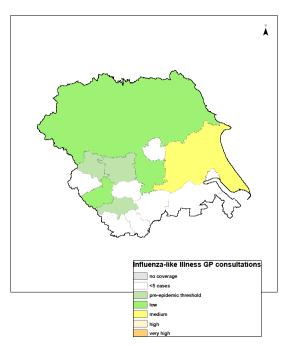
### Week 12



### Week 13



### Week 14



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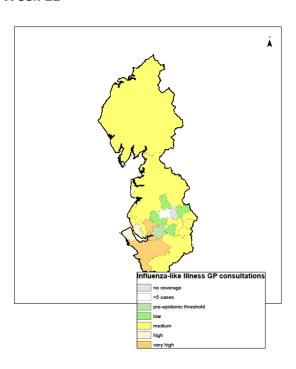
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11 April 2018 Year: 2018 Week: 14

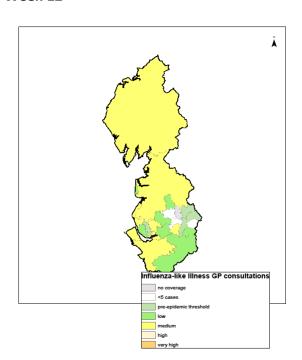
### **North West**

Influenzalike illness GP consultations by LA (North West PHE Centre)

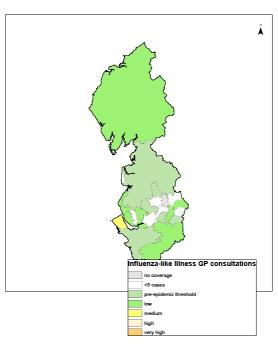
### Week 11



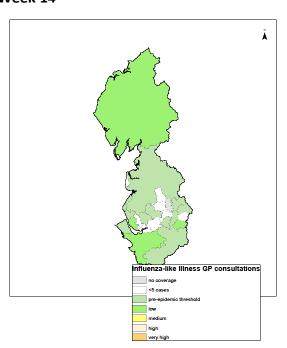
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### Week 13



### Week 14



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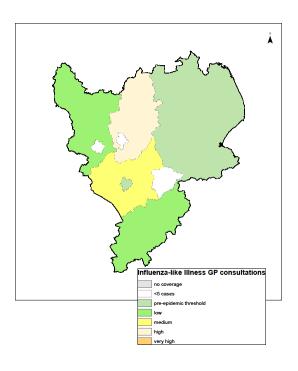
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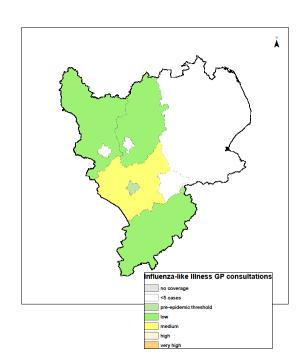
### East Midlands

Influenzalike illness GP consultations by LA (East Midlands PHE Centre)

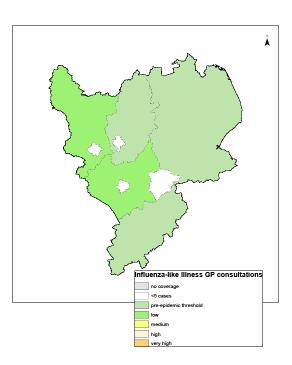
### Week 11



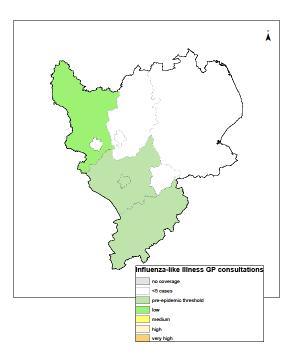
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#### Week 14



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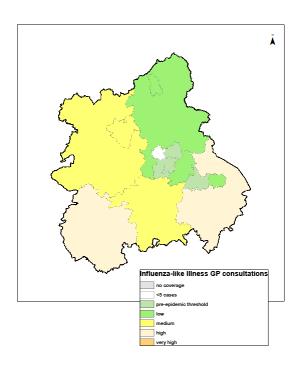
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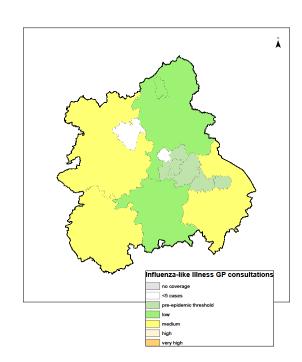
### West Midlands

Influenzalike illness GP consultations by LA (West Midlands PHE Centre)

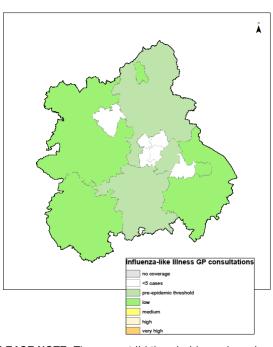
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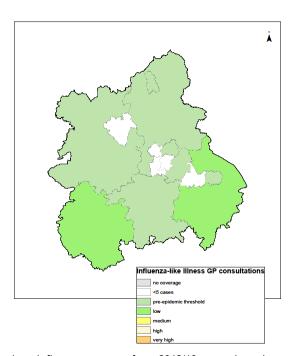
#### Week 12



### Week 13



### Week 14



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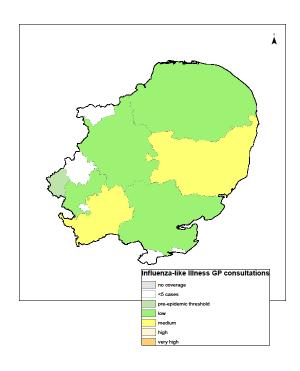
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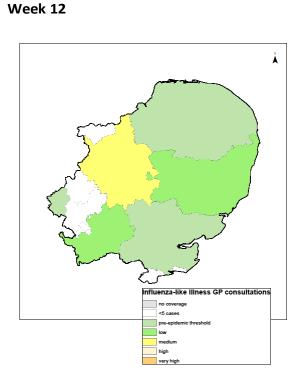
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### East of England

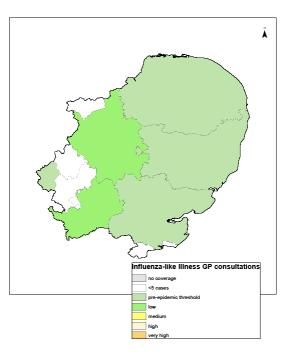
Influenzalike illness GP consultations by LA (East of England PHE Centre)

### Week 11

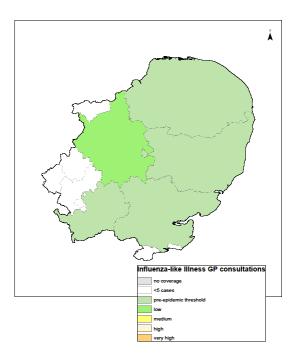




### Week 13



### Week 14



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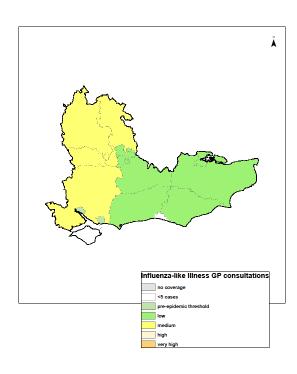
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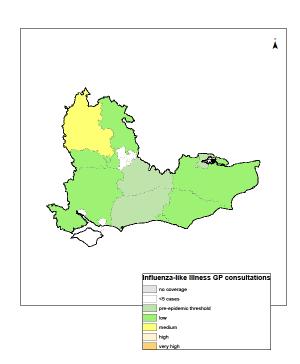
### **South East**

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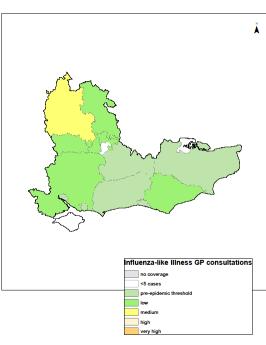
#### Week 11



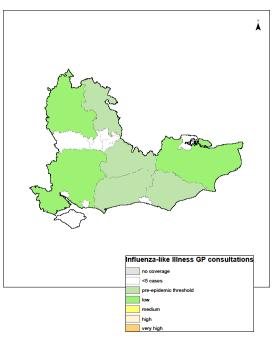
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### Week 14



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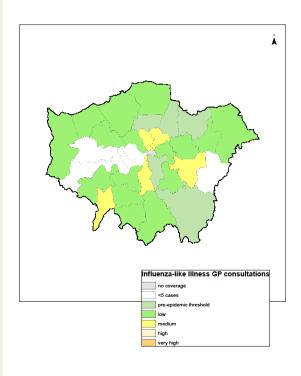
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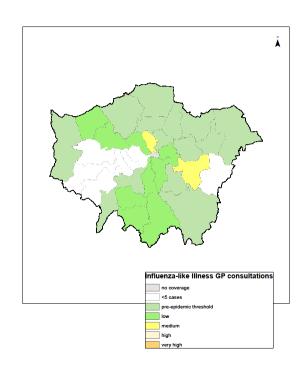
### London

### Week 11

### Week 12

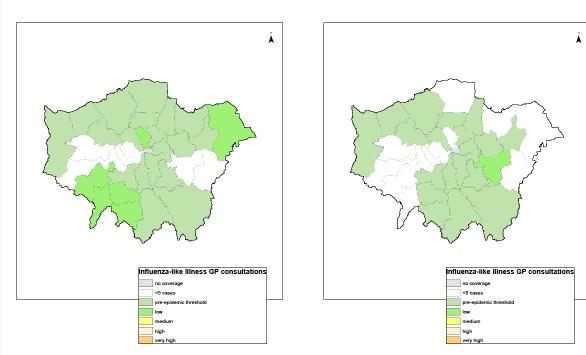
Influenzalike illness GP consultations by LA (London PHE Centre)





### Week 13

Week 14



PLEASE NOTE: The current ILI thresholds are based upon previous influenza seasons from 2012/13 onwards and therefore illustrate activity levels in relation to previous ILI activity recorded in the GPIH system. ILI thresholds presented in the maps should be interpreted with caution and reference made to other GP surveillance systems incorporating more historical data, which are available in the PHE National Influenza Report.

Please read the notes section (page 11) to understand the caveats and limitations on the use and interpretation of local ILI consultation data

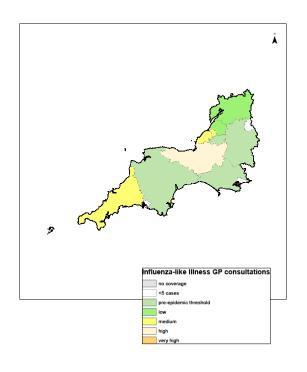
1 April 2018 Year: 2018 Week: 14

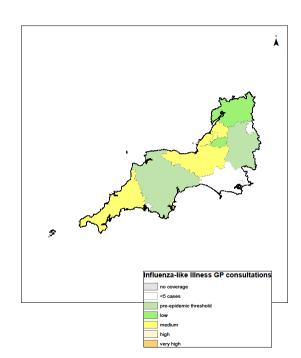
### **South West**

### Week 11

### Week 12

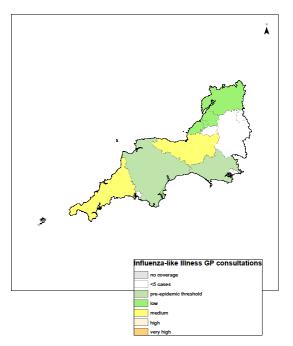
Influenzalike illness GP consultations by LA (South West PHE Centre)

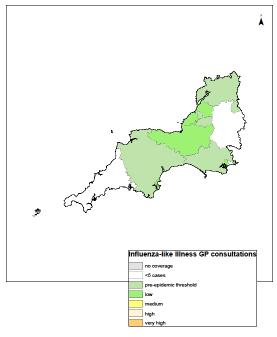




### Week 13

Week 14





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