Public Health England

GP In Hours

Syndromic Surveillance System: England

30 December 2020 **Year: 2020 Week: 52**

In This Issue:

Key messages

Data to: 27 December 2020

During week 52 influenza-like illness increased slightly but remains below seasonally expected levels; increases were noted in adults aged 45-64 years and London and the South East (figures 3a-c).

Please note: a technical problem at one of our data providers has resulted in over-reporting of daily COVID consultations and therefore it has not been possible to update COVID-19 figures 1, 1a and 1b. We are working to resolve this problem.

Note: during the COVID-19 pandemic, patients with COVID-19 symptoms are generally advised to initially access a COVID-19 test through the national COVID-19 testing programme. This is likely to result in lower numbers of patients accessing health advice as monitored through syndromic surveillance systems. Syndromic data should therefore be interpreted with some caution and in the context of other COVID-19 monitoring data sources. Please see 'notes and caveats' for information about the COVID-19-like GPIH syndromic indicator including important caveats around the interpretation of this indicator.

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 1/2 Winter preparedness/Alert & readiness**
http://www.metoffice.gov.uk/weather/uk/coldweatheralert/

Diagnostic indicators at a glance:

Indicator	Trend	Level
COVID-19-like	no trend	-
Upper respiratory tract infection	no trend	below baseline levels
Influenza-like illness	increasing	below baseline levels
Pharyngitis	no trend	below baseline levels
Scarlet fever	no trend	below 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	no trend	below baseline levels
Conjunctivitis	no trend	below baseline levels
Mumps	no trend	below baseline levels
Measles	no trend	below baseline levels
Rubella	no trend	below baseline levels
Pertussis	no trend	below baseline levels
Chickenpox	no trend	below baseline levels
Herpes zoster	no trend	below baseline levels
Cellulitis	no trend	below baseline levels
Impetigo	no trend	below baseline levels

GP practices and denominator population:

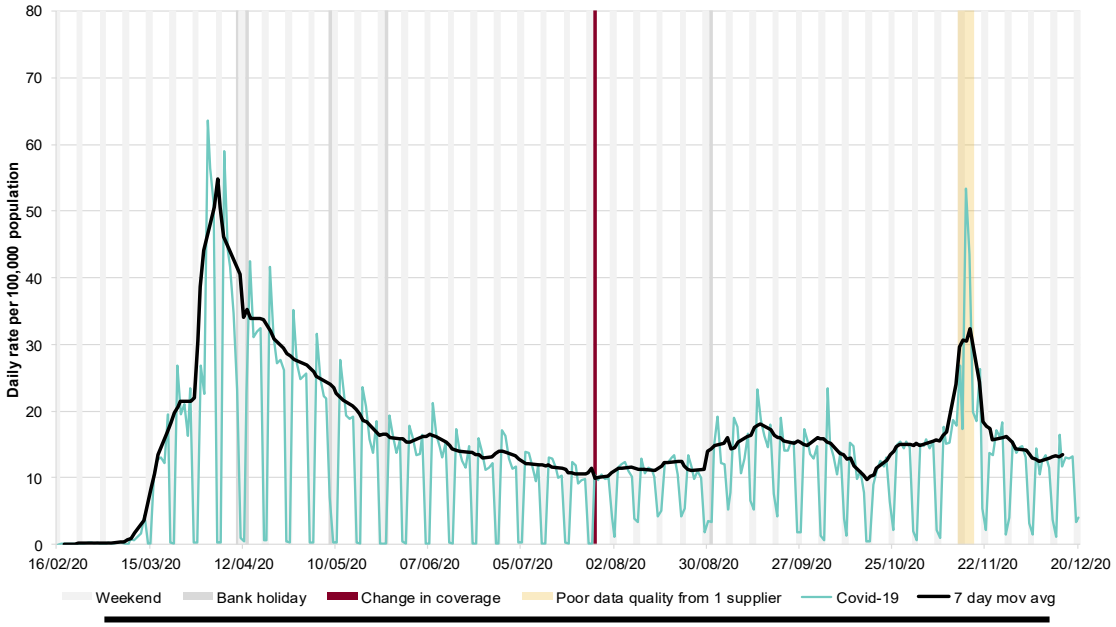
Year	Week	GP Practices Reporting**	Population size**
2020	52	4263	39.0 million

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

1. COVID-19-like consultations

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

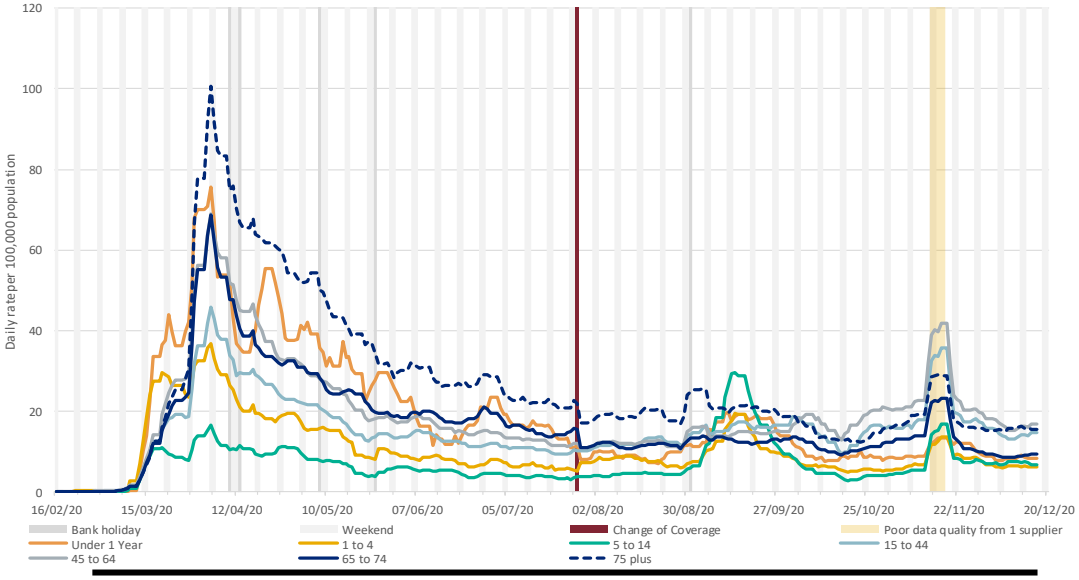
Please note: includes consultations diagnoses of suspected, tested, exposed and/or confirmed COVID-19. On 27 July there was a change in GPIH population coverage as COVID-19 diagnosis codes became monitored across more locations



1a: COVID-19-like consultations by age group

Daily incidence rate by age group per 100,000 population all England.

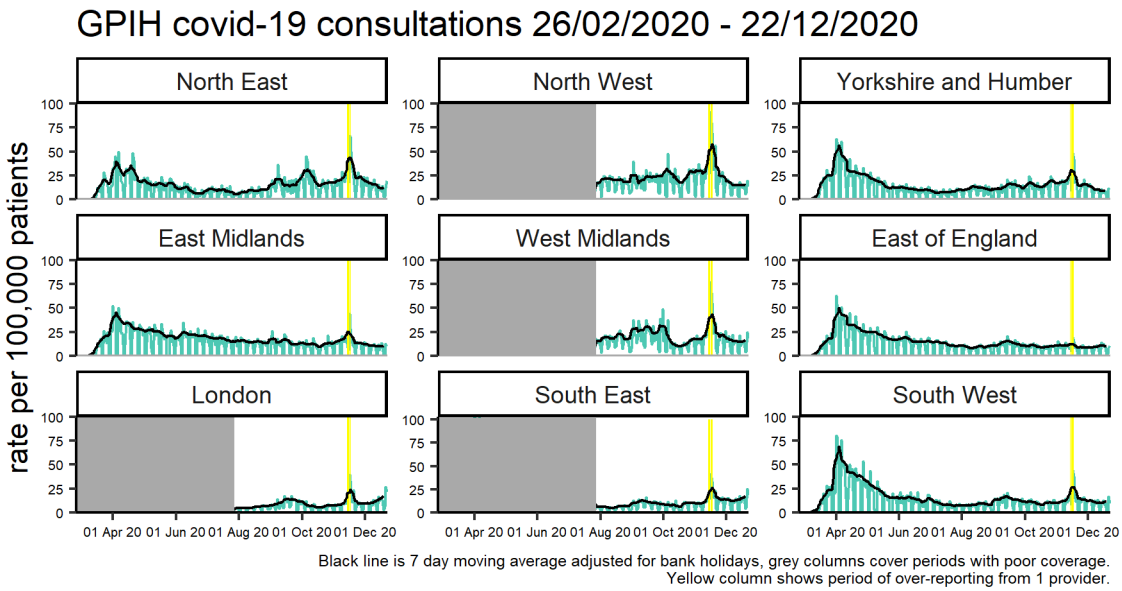
Please note: on 27 July there was a change in GPIH population coverage as COVID-19 diagnosis codes became monitored across more locations



1b: COVID-19-like consultations by PHE Centre

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

Please note: on 27 July there was a change in GPIH population coverage as COVID-19 diagnosis codes became monitored across more locations

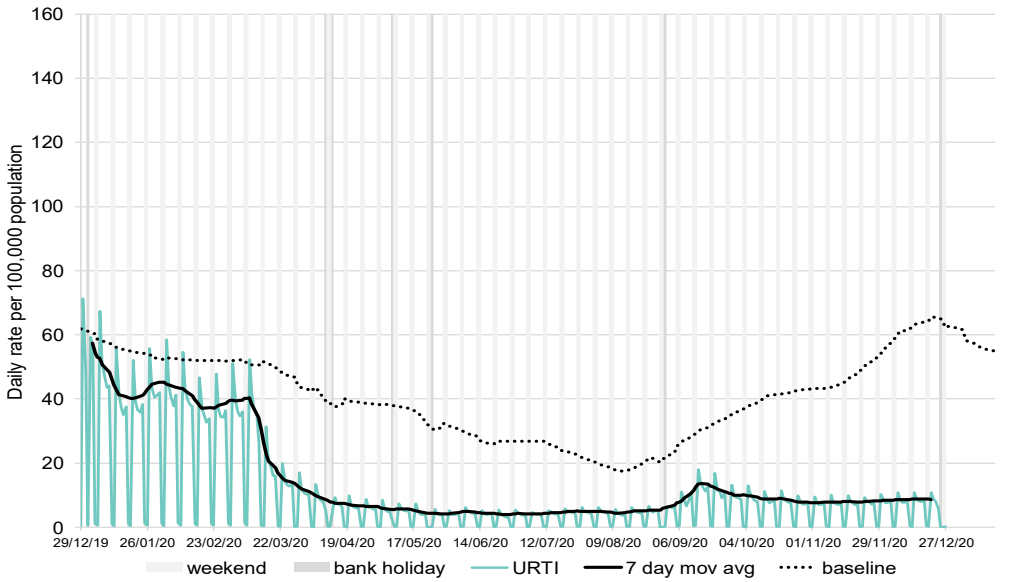


Black line is 7 day moving average adjusted for bank holidays, grey columns cover periods with poor coverage.
Yellow column shows period of over-reporting from 1 provider.

* 7-day moving average adjusted for bank holidays.

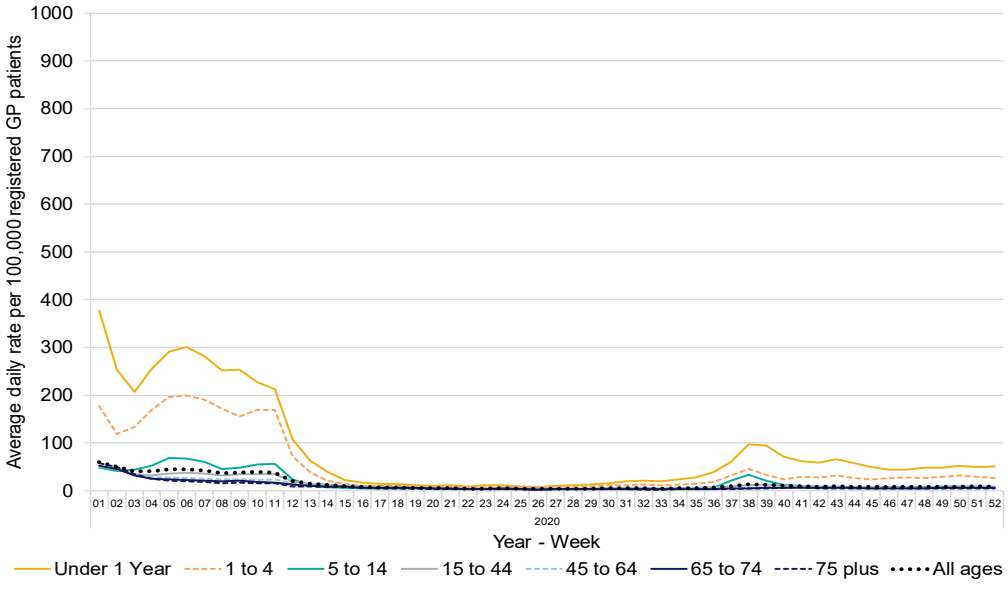
2: Upper respiratory tract infection (URTI)

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



2a: Upper respiratory tract infection (URTI) by age

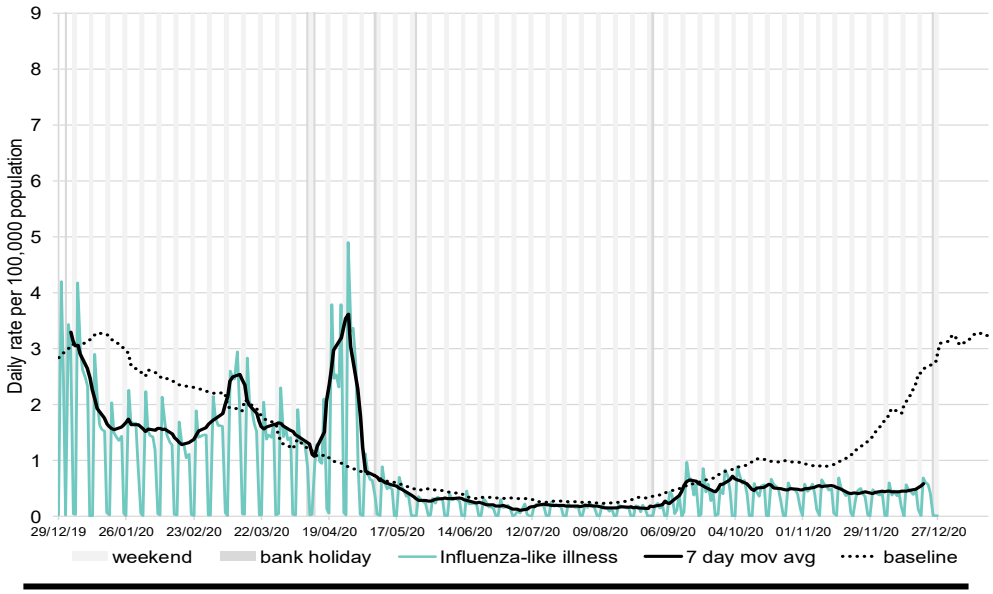
Average daily incidence rate by week per 100,000 population (all England).



* 7-day moving average adjusted for bank holidays.

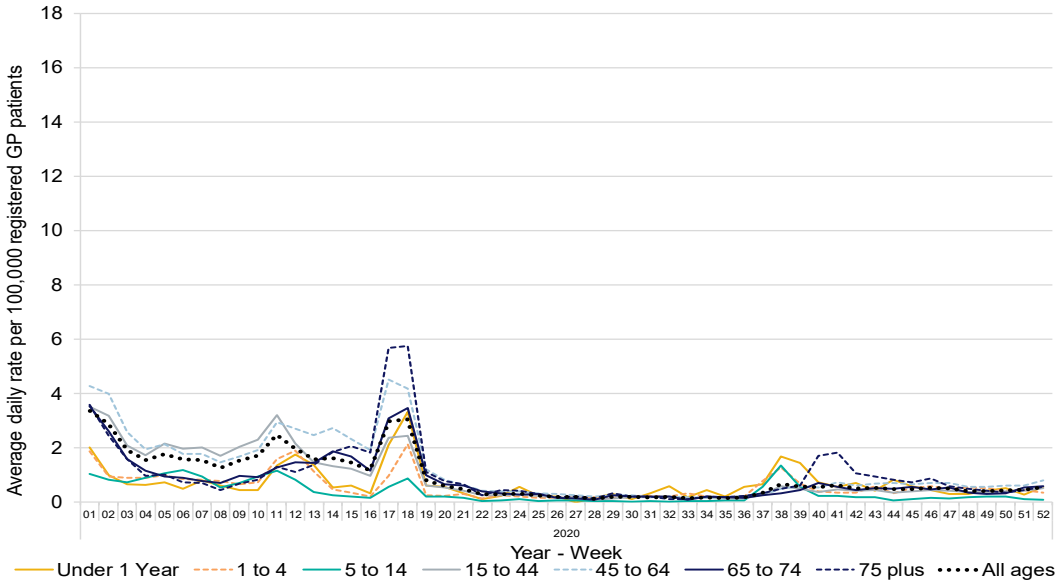
3: Influenza-like illness (ILI)

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



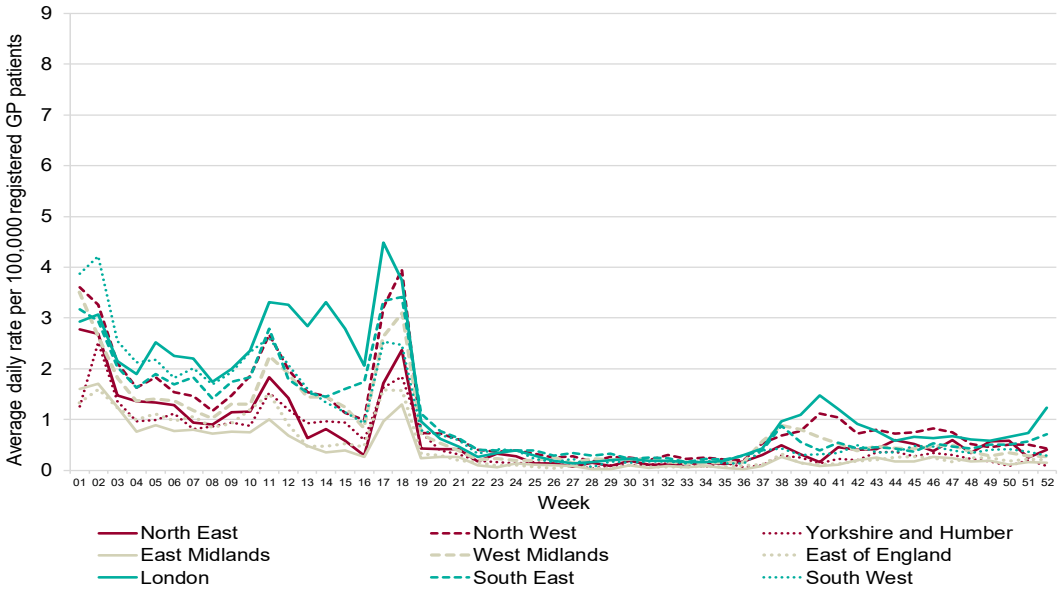
3a: Influenza-like illness by age

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



3b: Influenza-like illness by PHE Centre

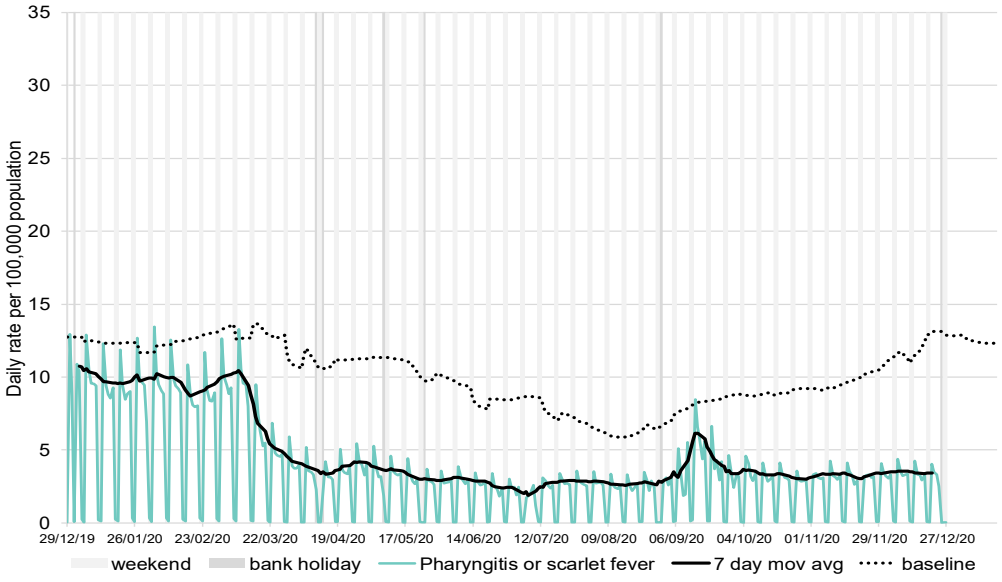
Average daily incidence rate by week per 100,000 population (all ages).



* 7-day moving average adjusted for bank holidays.

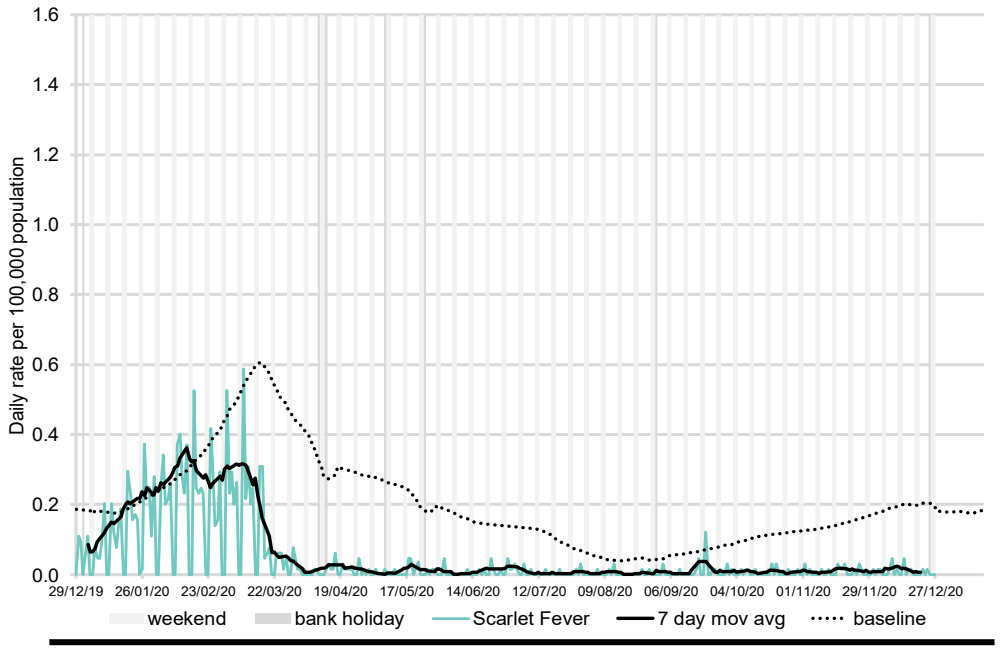
4: Pharyngitis or scarlet fever

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



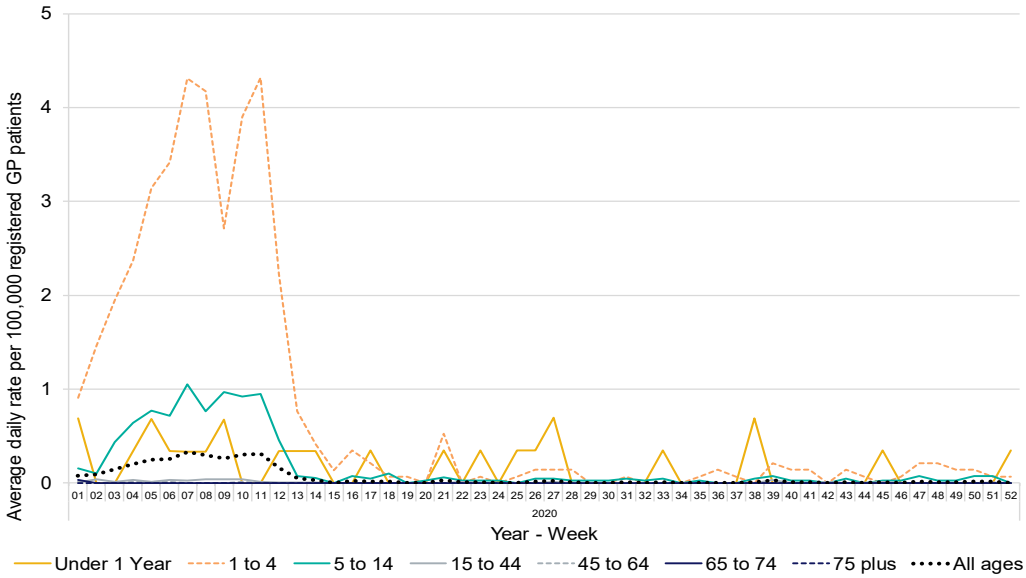
5: Scarlet fever

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)



5a: Scarlet fever by age

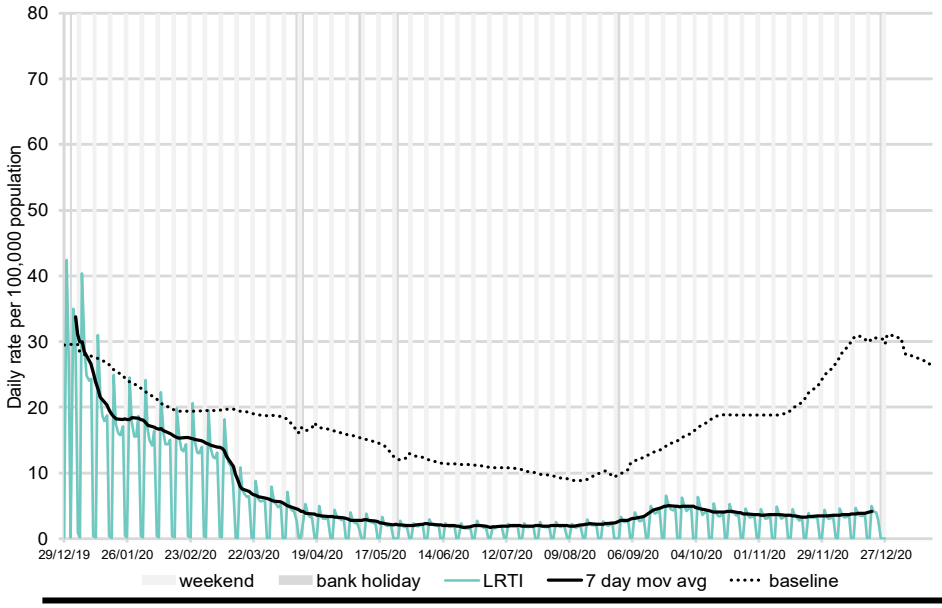
Average daily incidence rate by week per 100,000 population (all England, based on a denominator population of approximately 5.5 million patients).



* 7-day moving average adjusted for bank holidays.

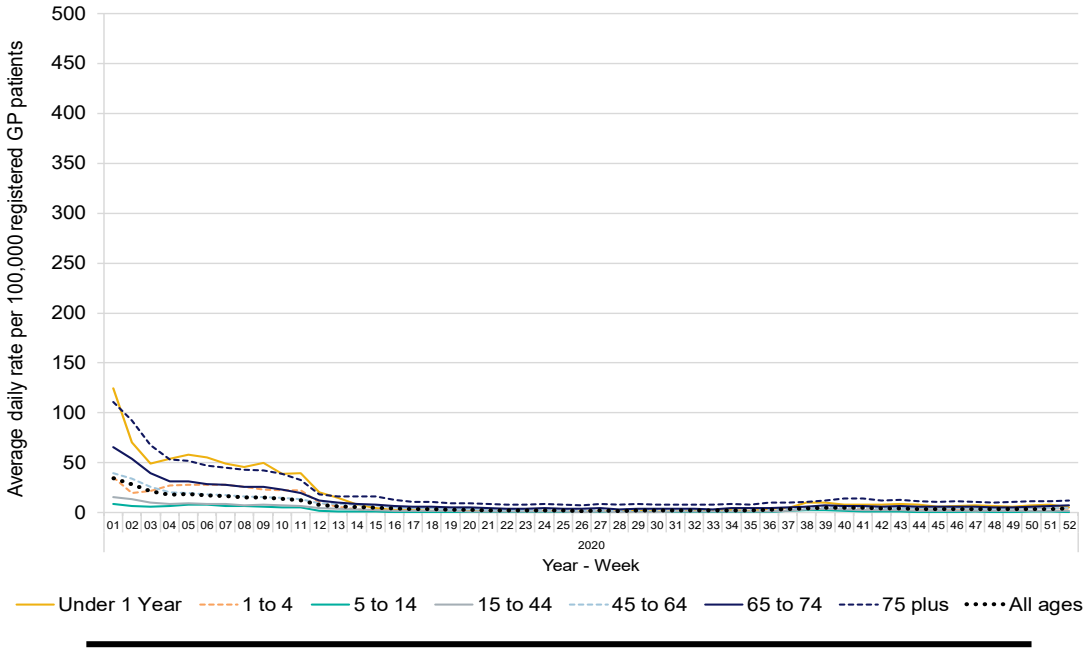
6: Lower respiratory tract infection (LRTI)

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



6a: Lower respiratory tract infection (LRTI) by age

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



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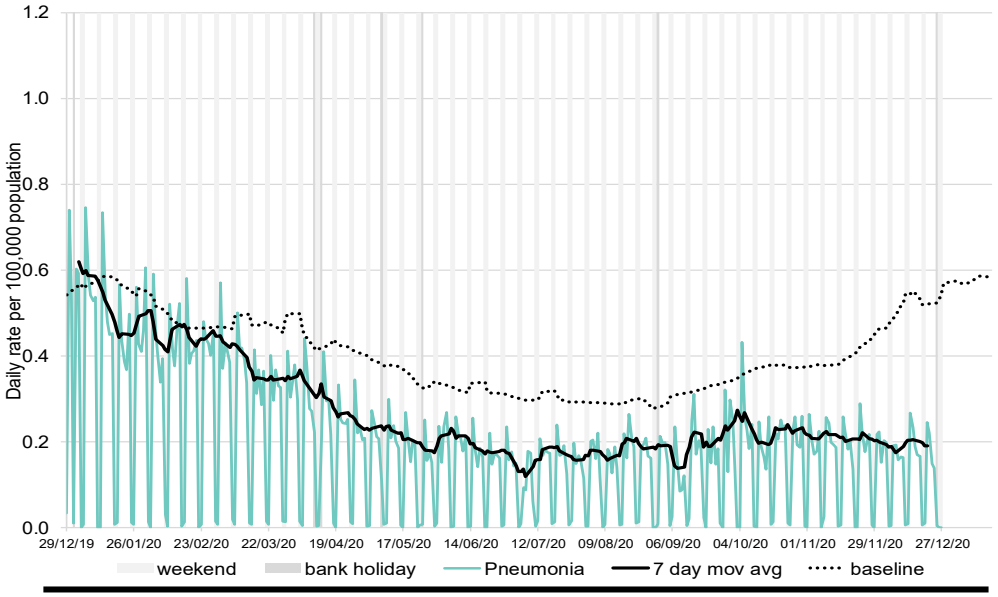
* 7-day moving average adjusted for bank holidays.

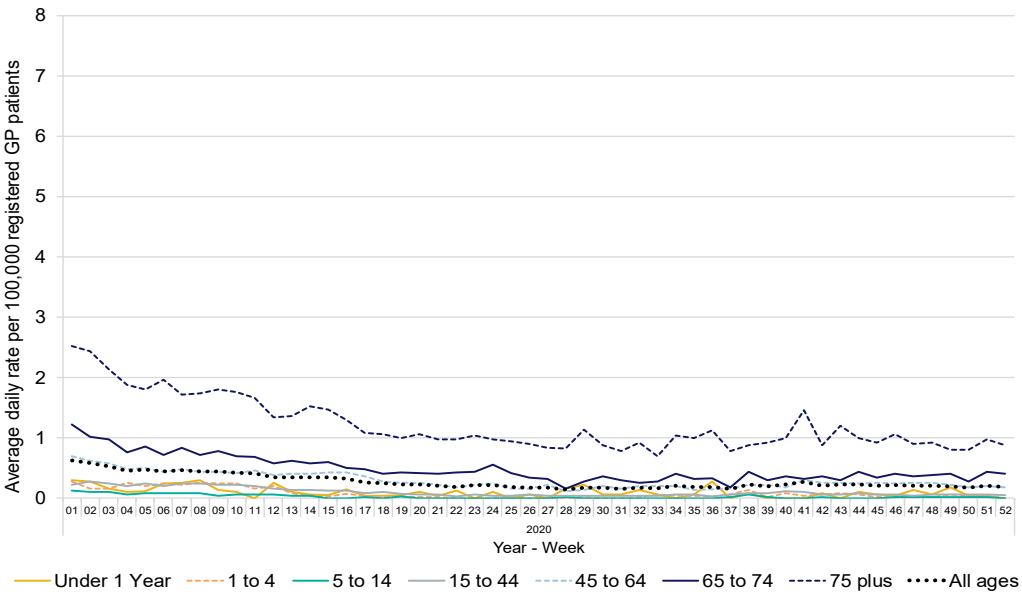
7: Pneumonia

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



7a: Pneumonia by age

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



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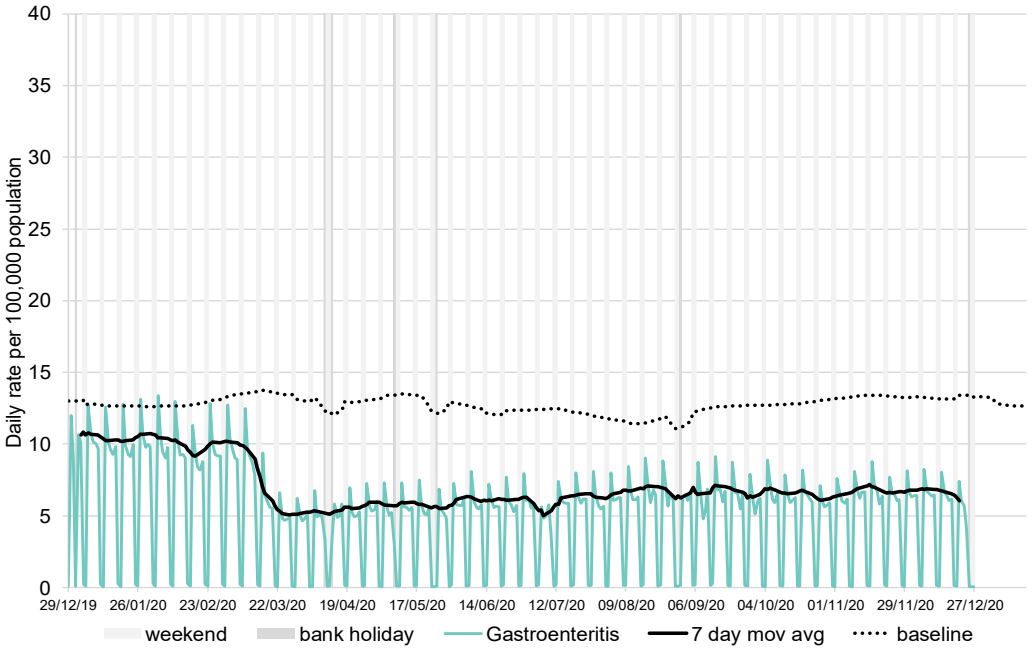
* 7-day moving average adjusted for bank holidays.

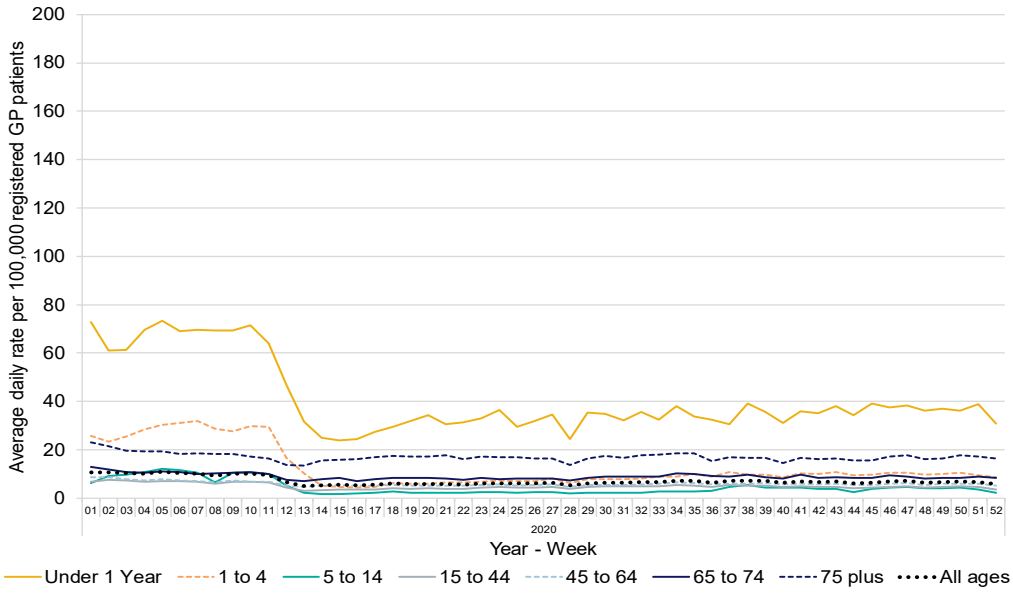
8: Gastroenteritis

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



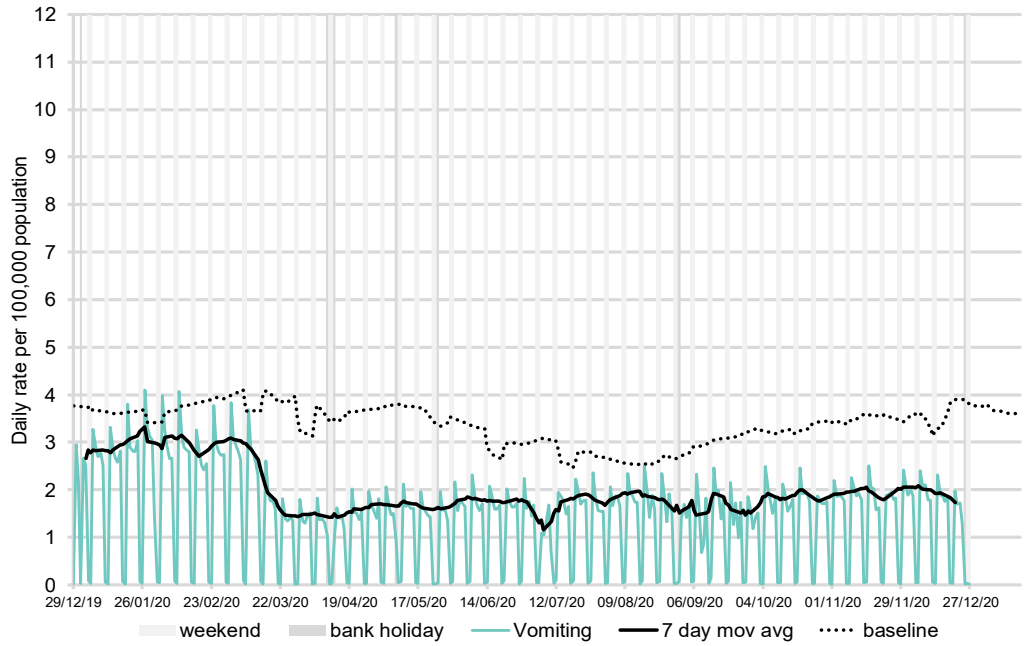
8a: Gastroenteritis by age

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



9: Vomiting

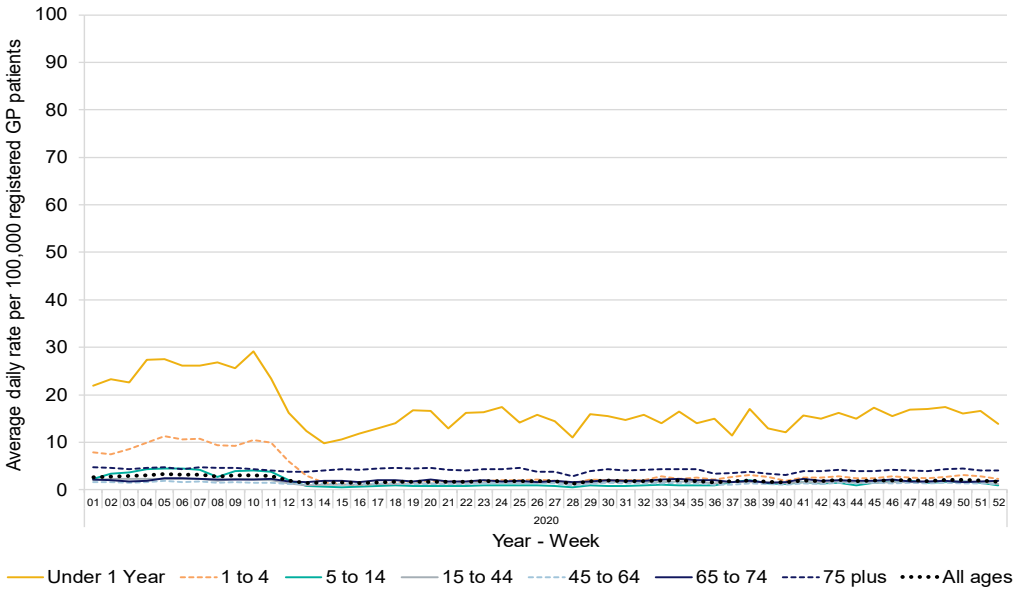
Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages).



* 7-day moving average adjusted for bank holidays.

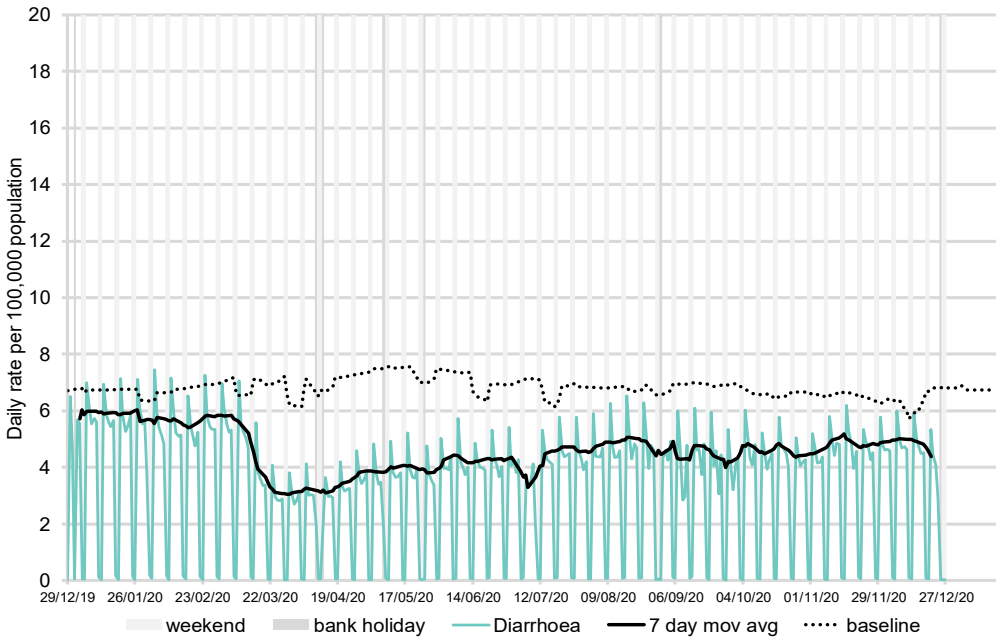
9a: Vomiting by age

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



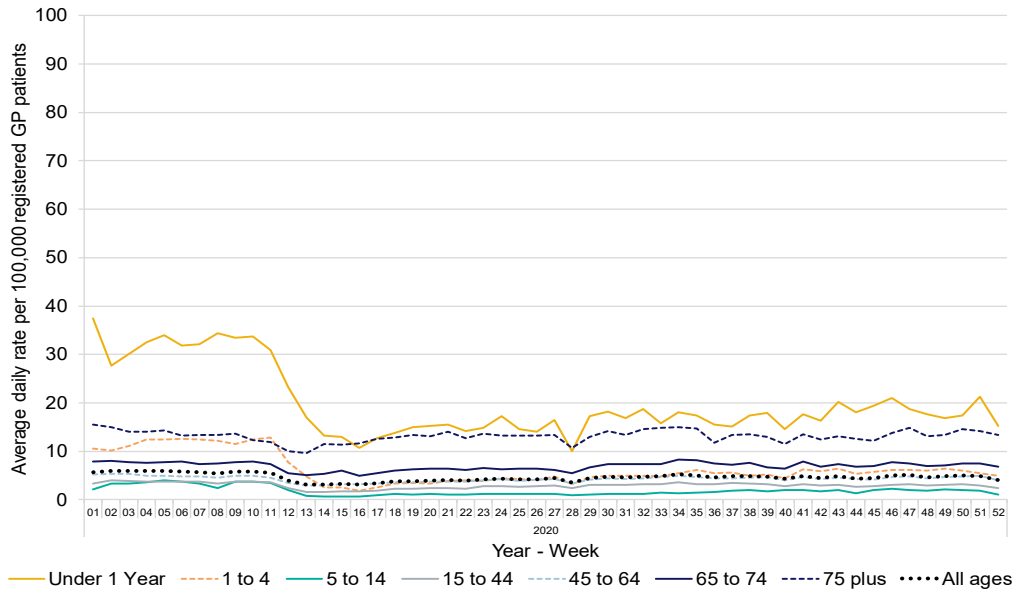
10: Diarrhoea

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



10a. Diarrhoea by age

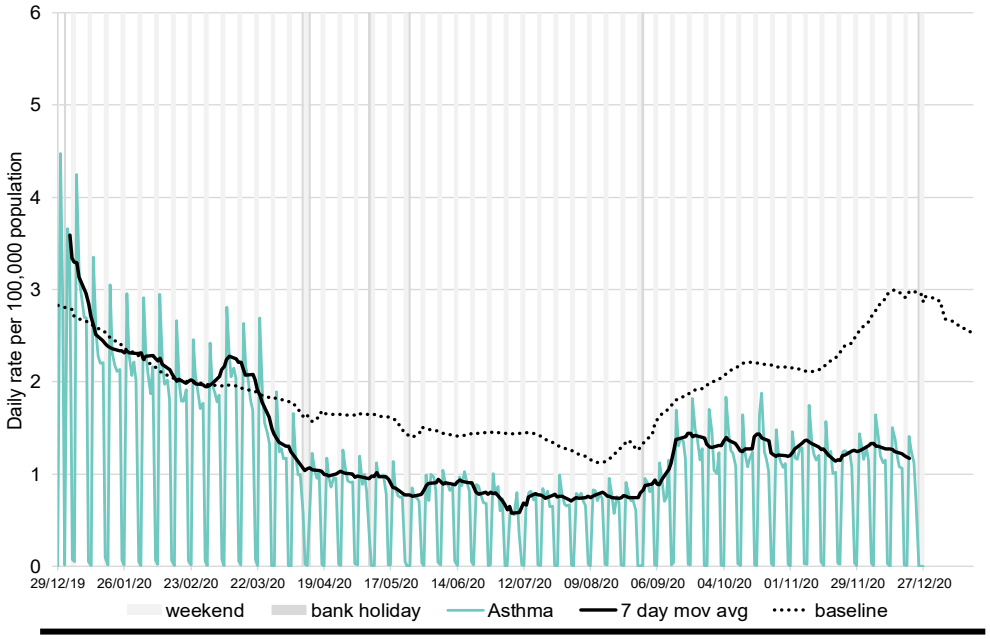
Average daily incidence rate by week per 100,000 population (all England).



* 7-day moving average adjusted for bank holidays.

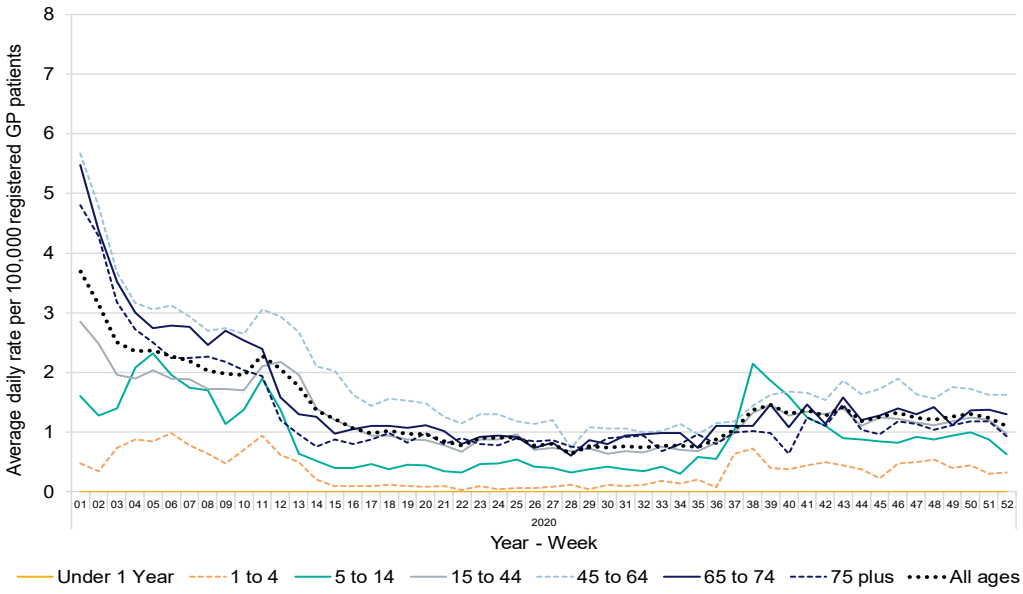
11: Asthma

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



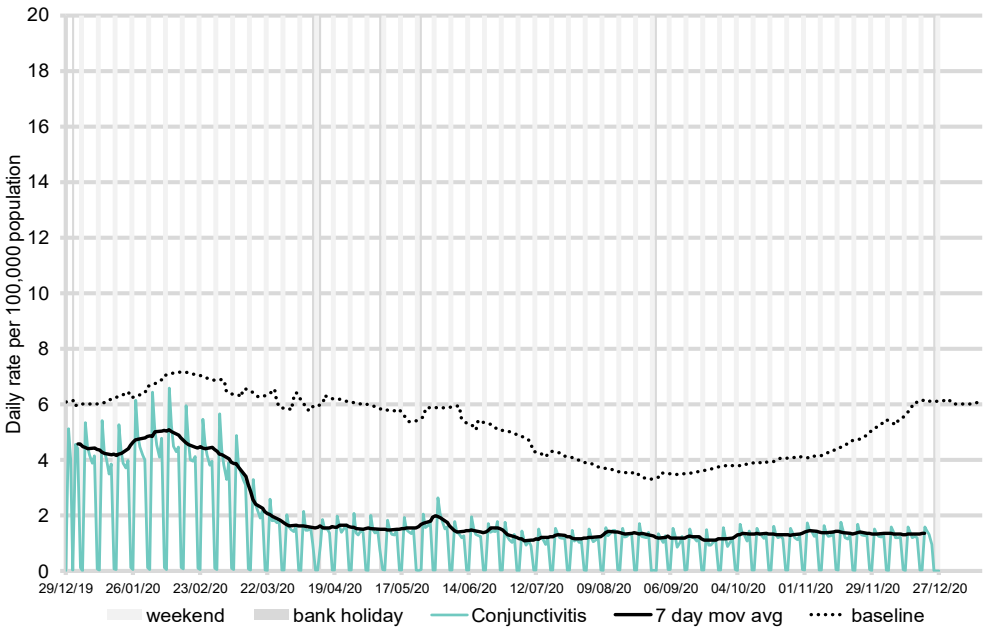
11a: Asthma by age

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



12: Conjunctivitis

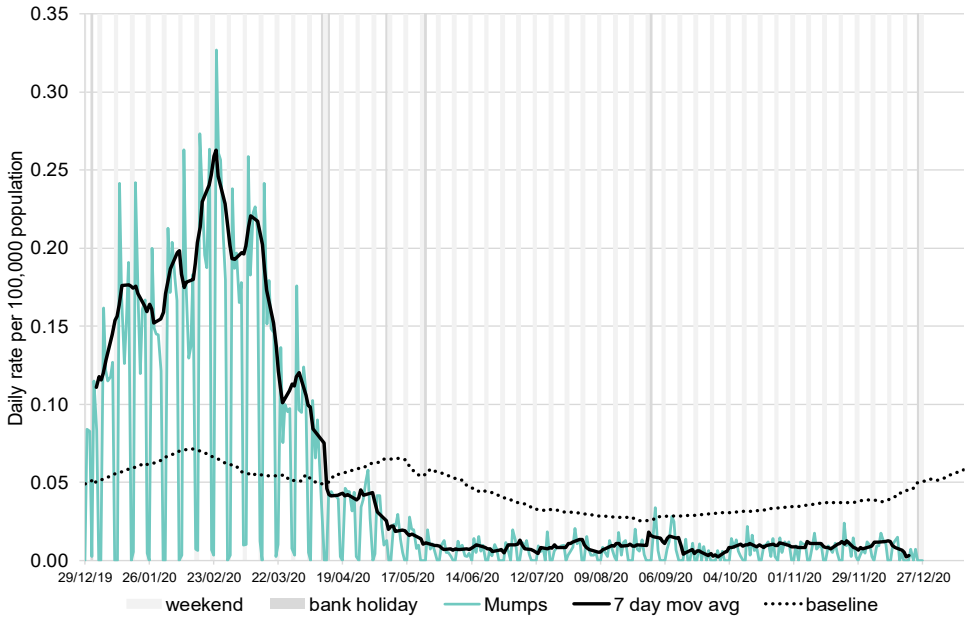
Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages).



* 7-day moving average adjusted for bank holidays.

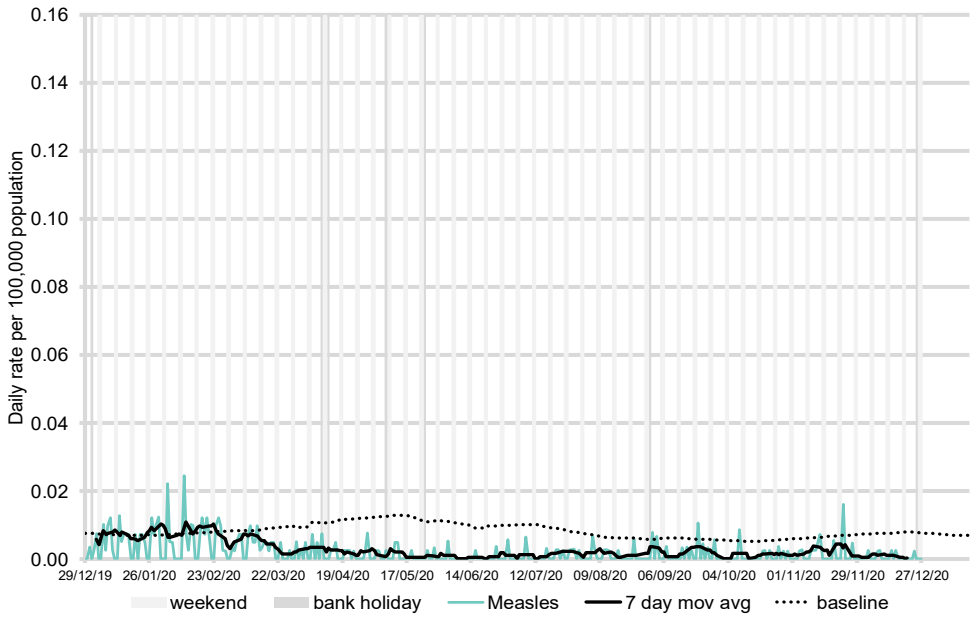
13: Mumps

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



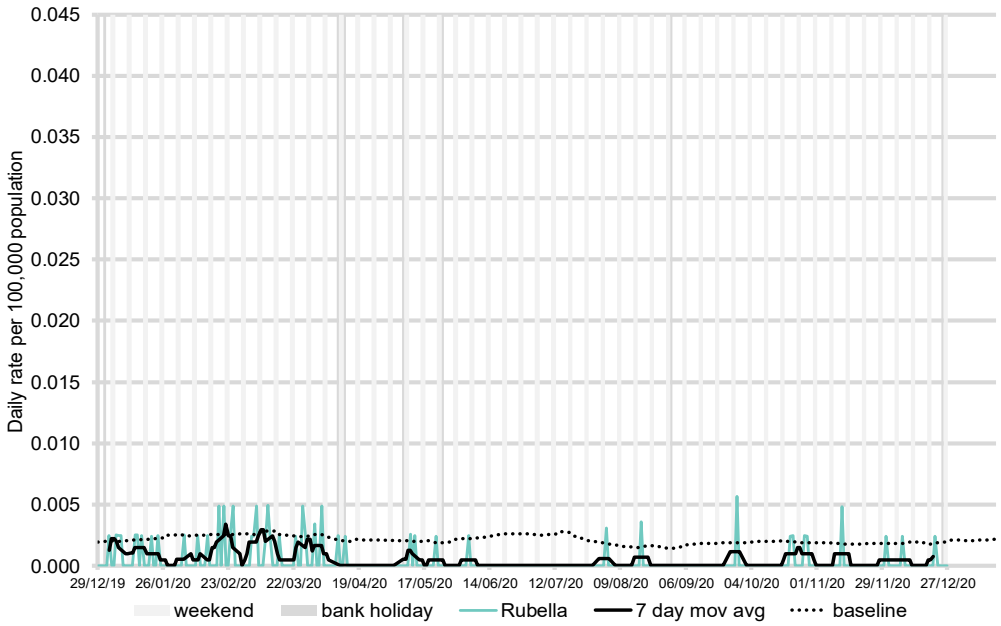
14: Measles

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



15: Rubella

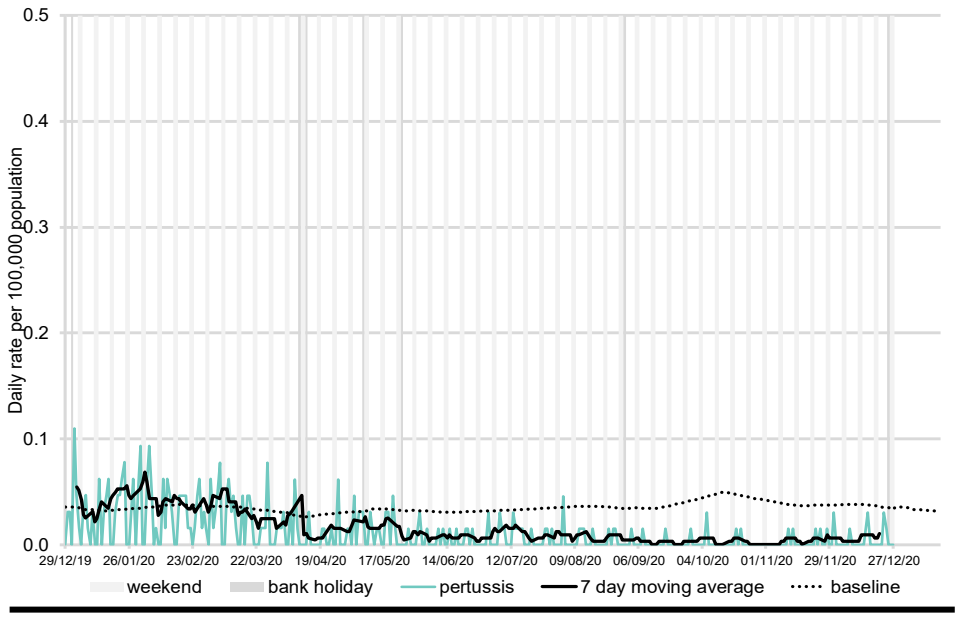
Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages).



* 7-day moving average adjusted for bank holidays.

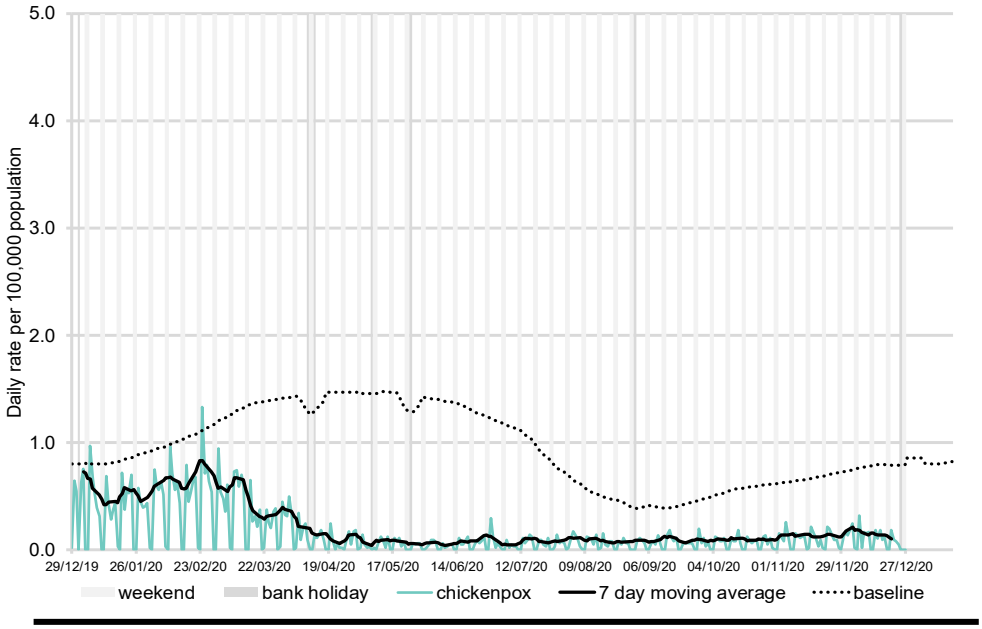
16: Pertussis

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)



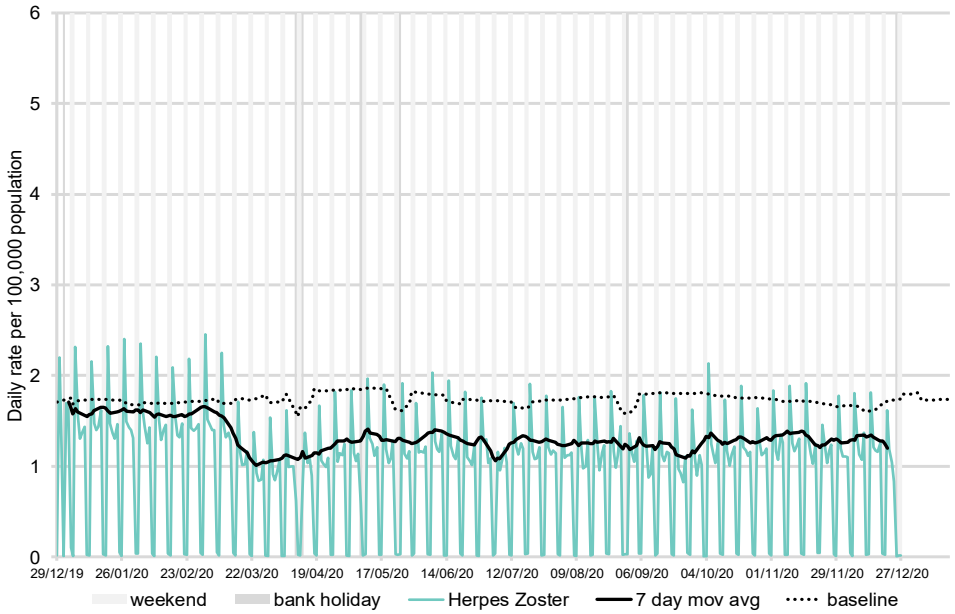
17: Chickenpox

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)



18: Herpes zoster

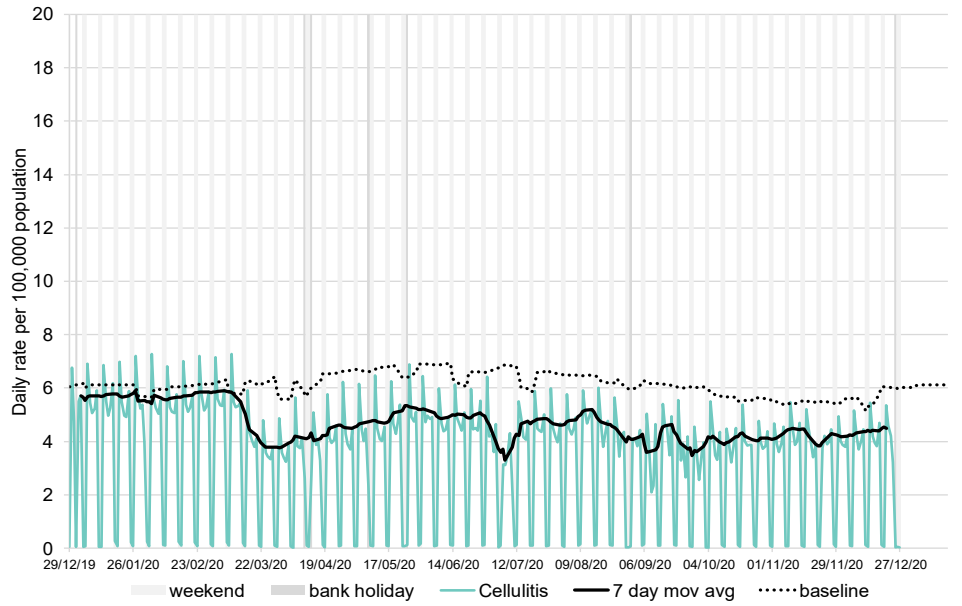
Daily incidence rate (and 7-day moving average*) per 100,000 population (all England, all ages).



* 7-day moving average adjusted for bank holidays.

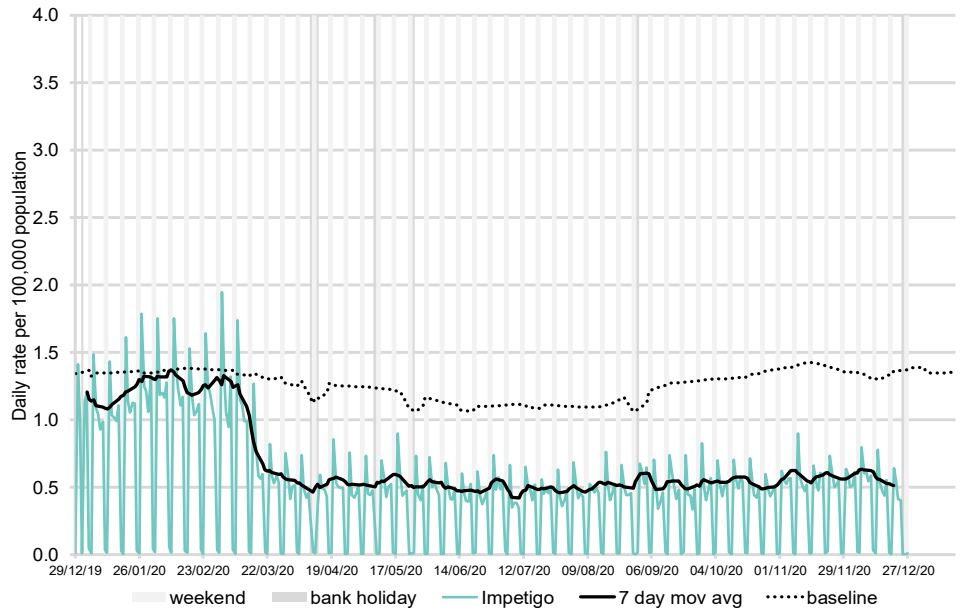
19 Cellulitis

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



20: Impetigo

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



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* 7-day moving average adjusted for bank holidays.

Notes and further information

- The PHE 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 along with analysis by age group, and anything deemed of public health importance is alerted.
- 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 since April 2012. They take into account any known substantial changes in data collection, population coverage or reporting practices. Gastroenteritis, diarrhoea and vomiting baselines also account for changes since the introduction of rotavirus vaccine in July 2013. Baselines are refreshed using the latest data on a regular basis however they currently exclude data from 2020 due to the COVID-19 pandemic affecting GP services and patient health care seeking behaviour.

COVID-19 consultations

- A collection of new COVID-19 Snomed codes were released in March 2020 to facilitate the recording of patients presenting to primary care services with symptoms of COVID-19.
- The GPIH surveillance system monitors the use of these codes in a selection of TPP and EMIS practices across England.
- However, patients presenting with COVID-19 symptoms may be diagnosed using other clinical codes used by the GP.
- Therefore, the COVID-19-like indicator presented in this report is primarily for monitoring trends in GP consultations, and it must be interpreted in context with the other respiratory syndromic indicators presented in this report. The number/ rate of COVID-19-like consultations should therefore not be used as an absolute count of those patients with COVID-19.
- During April 2020 a new COVID-19 Care Pathway template was introduced into GP systems that has affected recording of influenza-like illness (ILI), resulting in an increase in the consultation rate for ILI (figures 2a-c).
- All indicator trends should be interpreted with caution due to current national advice and guidance regarding access to GP surgeries and changes in clinical coding for COVID-19.
- Centre level COVID-19 consultation data should be interpreted with some caution. Different GP clinical system providers have different coding for COVID-19 and therefore rates can differ between Centres depending on the relative contribution of individual GP system providers in GPIH. Centre-specific data should not be compared across Centres: trends should only be interpreted for each individual Centre.

Acknowledgements:

We thank and acknowledge the University of Oxford, 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.

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GP In Hours Syndromic Surveillance System Bulletin.

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