



17 August 2021

Year: 2021 Week: 32

## In This Issue:

- Key messages.
- Diagnostic indicators at a glance.
- GP practices and denominator population.
- National syndromic indicators.
- Notes and further information.

## Key messages

data to

15/08/21

During week 32, GP consultations for gastroenteritis increased slightly (figure 8). Consultations for respiratory indicators remained stable.

Baselines have been remodelled to account for changes due to COVID-19 and additional, new modelled lines have been added to the charts to represent expected levels if COVID-19 had not occurred.

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 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 data during this period.

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

<http://www.metoffice.gov.uk/weather/uk/heathealth/>

## Diagnostic indicators at a glance:

Indicator	Trend	Level
COVID-19-like	no trend	similar to baseline levels
Upper respiratory tract infection	no trend	above baseline levels
Influenza-like illness	no trend	similar to baseline levels
Pharyngitis	no trend	above baseline levels
Scarlet fever	no trend	similar to baseline levels
Lower respiratory tract infection	no trend	above baseline levels
Pneumonia	decreasing	above baseline levels
Gastroenteritis	increasing	above baseline levels
Vomiting	no trend	above baseline levels
Diarrhoea	decreasing	above baseline levels
Asthma	no trend	above baseline levels
Conjunctivitis	no trend	above baseline levels
Mumps	no trend	similar to baseline levels
Measles	no trend	similar to baseline levels
Whooping cough	no trend	similar to baseline levels
Chickenpox	decreasing	above baseline levels
Herpes zoster	no trend	similar to baseline levels
Cellulitis	no trend	similar to baseline levels
Impetigo	no trend	below baseline levels
Allergic rhinitis	no trend	similar to baseline levels
Heat/sunstroke	no trend	similar to baseline levels

## GP practices and denominator population:

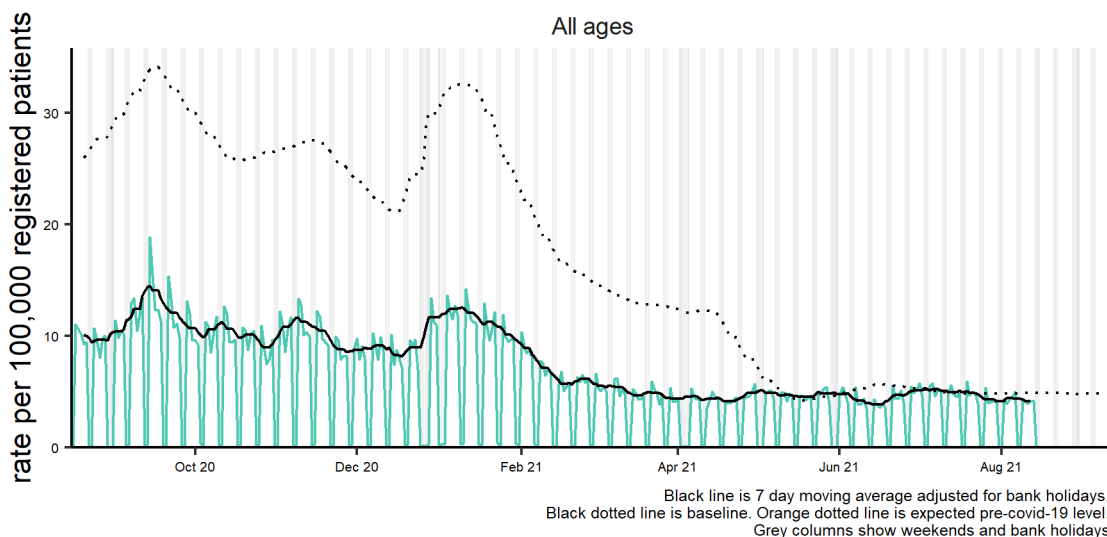
Year	Week	GP Practices Reporting**	Population size**
2021	32	677	6.7 million

\*\*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, all ages).

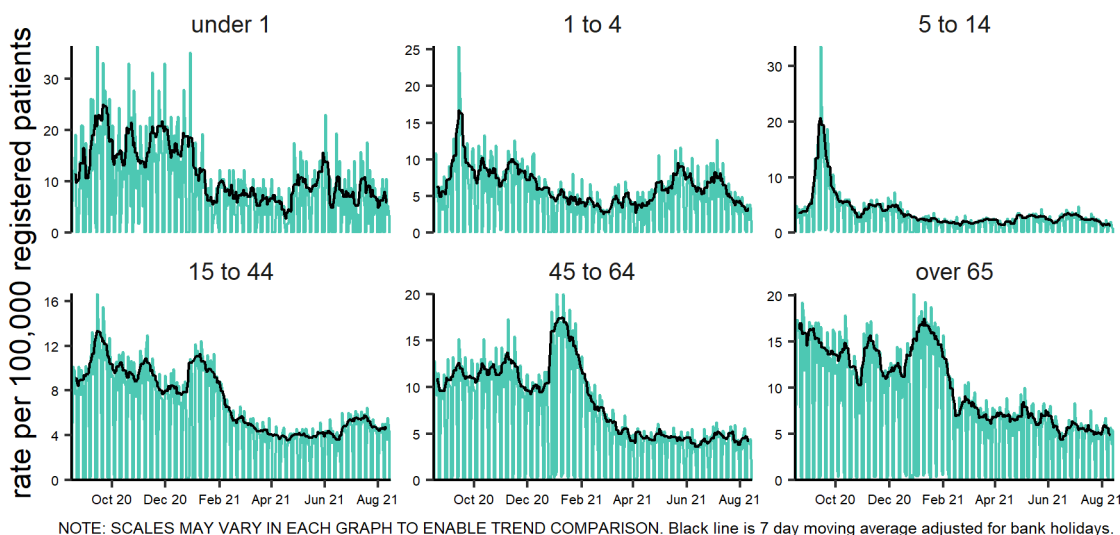
Covid-19-like 16/08/2020 - 15/08/2021



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

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

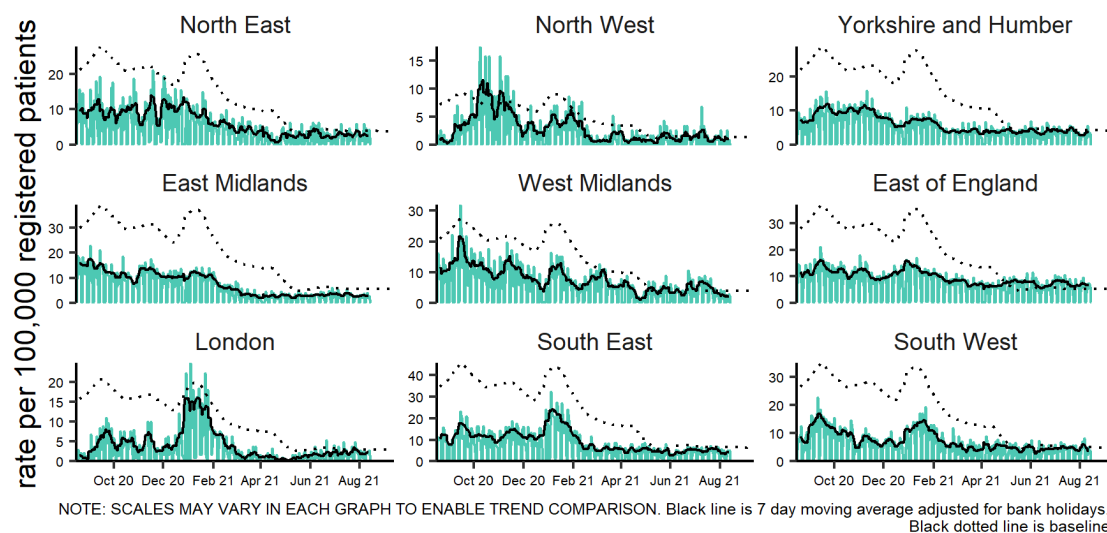
Covid-19-like by age group (years) 16/08/2020 - 15/08/2021



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

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

Covid-19-like by PHE centre 16/08/2020 - 15/08/2021

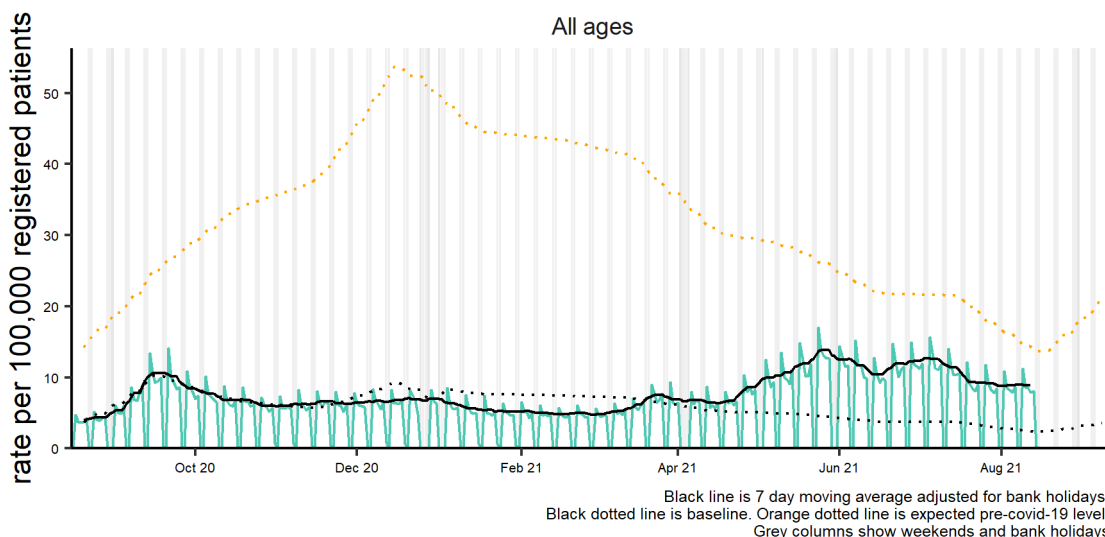


\* 7-day moving average adjusted for bank holidays.

## 2: Upper respiratory tract infection (URTI)

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

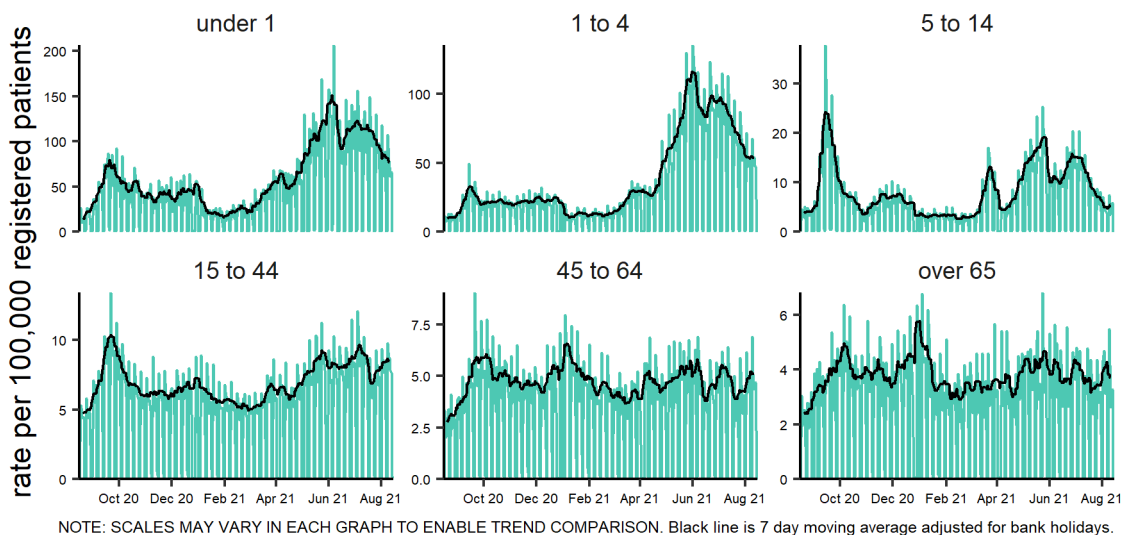
Upper respiratory tract infection 16/08/2020 - 15/08/2021



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

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

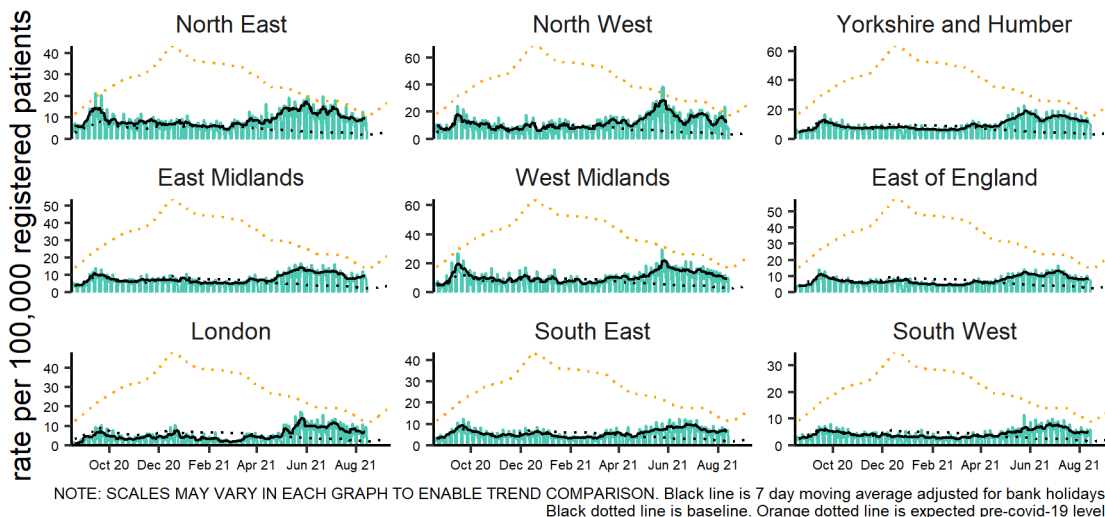
Upper respiratory tract infection by age group (years) 16/08/2020 - 15/08/2021



## 2b: Upper respiratory tract infection (URTI) by PHE centre

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

Upper respiratory tract infection by PHE centre 16/08/2020 - 15/08/2021

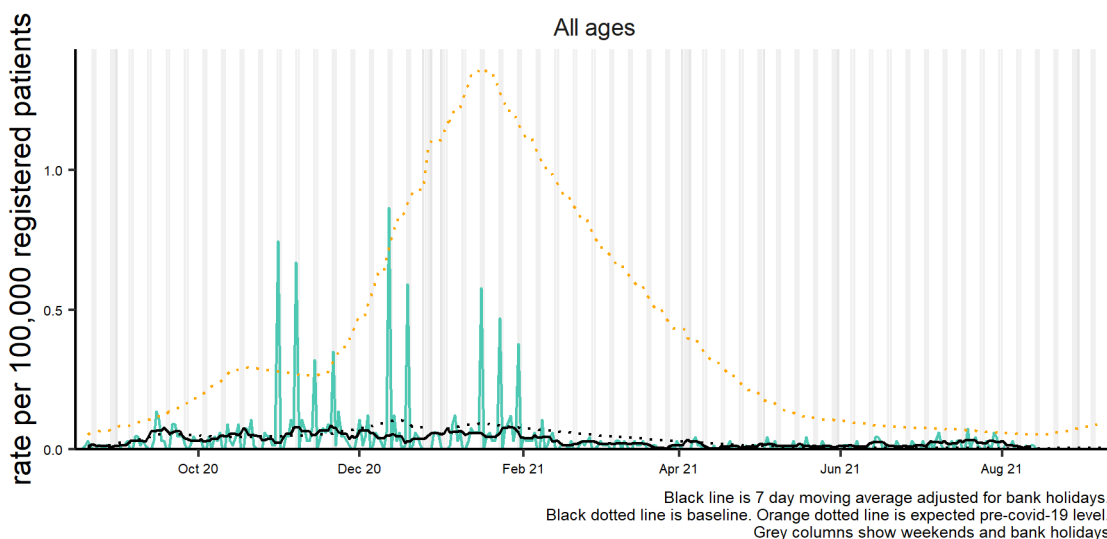


\* 7-day moving average adjusted for bank holidays.

### 3: Influenza-like illness (ILI)

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

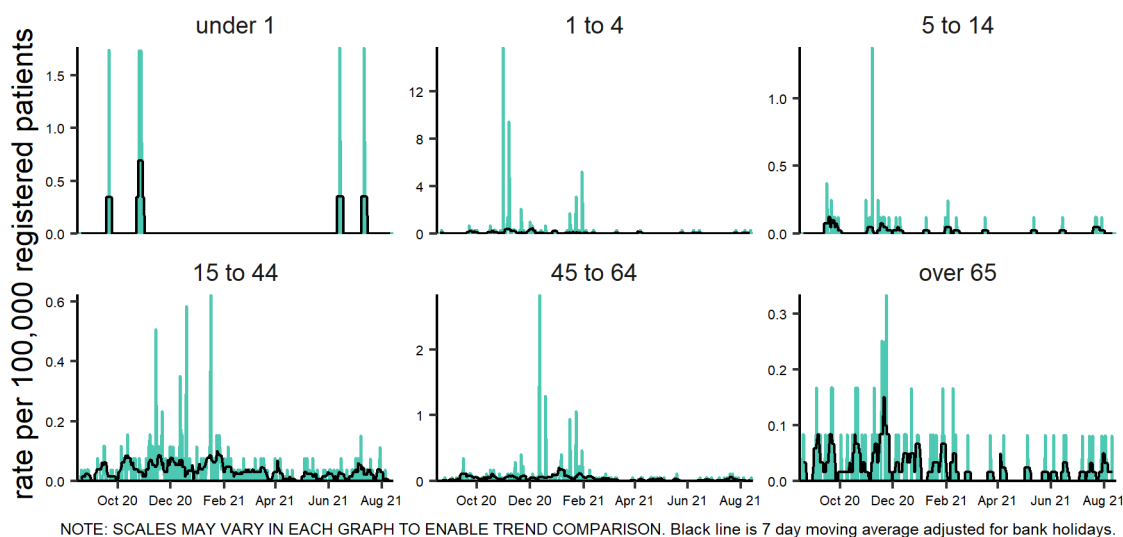
Influenza-like illness 16/08/2020 - 15/08/2021



### 3a: ILI by age group

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

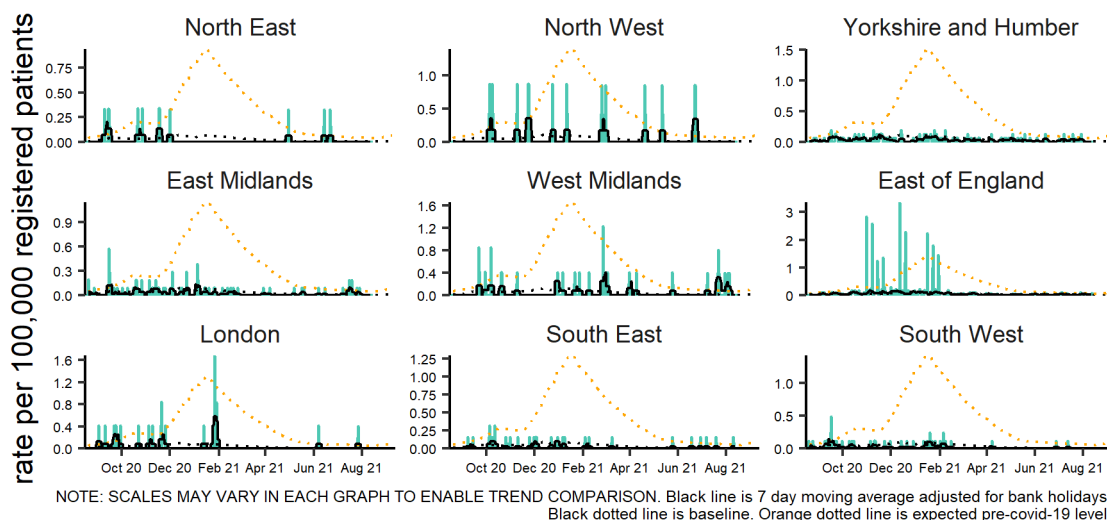
Influenza-like illness by age group (years) 16/08/2020 - 15/08/2021



### 3b: ILI by PHE centre

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

Influenza-like illness by PHE centre 16/08/2020 - 15/08/2021

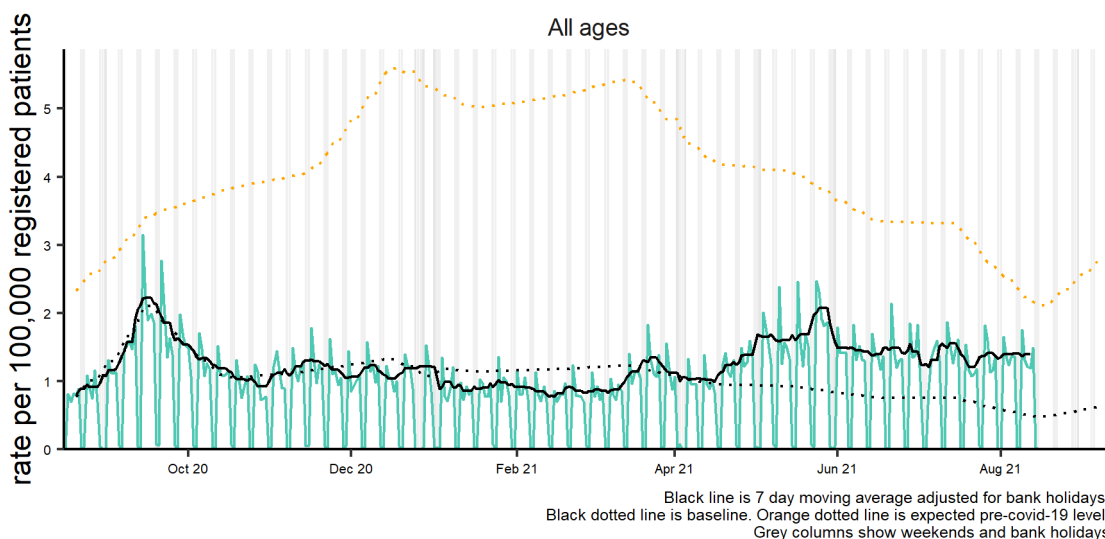


\* 7-day moving average adjusted for bank holidays.

#### 4: Pharyngitis or scarlet fever

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

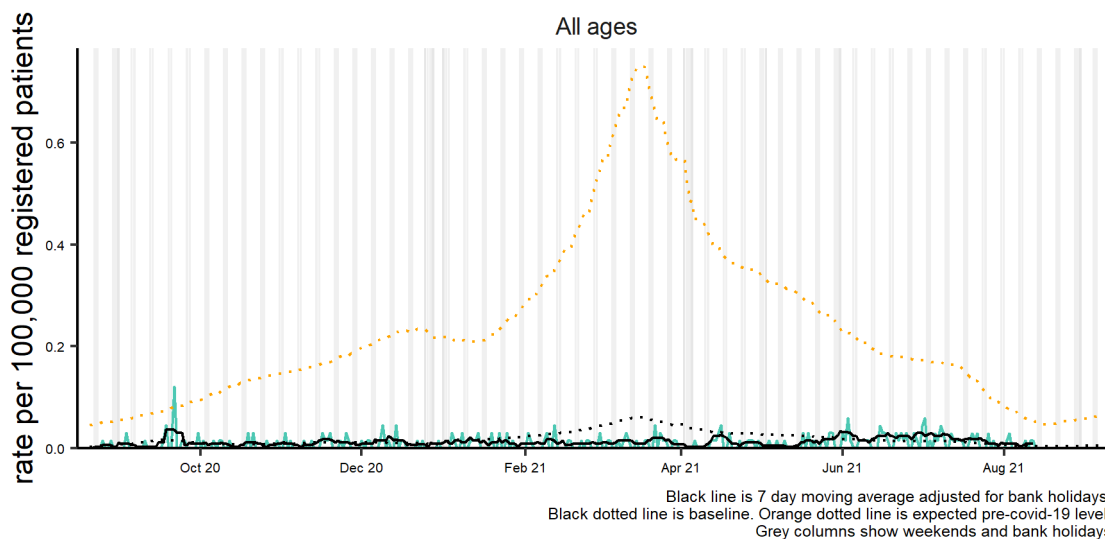
Pharyngitis or scarlet fever 16/08/2020 - 15/08/2021



#### 5: Scarlet fever

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

Scarlet fever 16/08/2020 - 15/08/2021



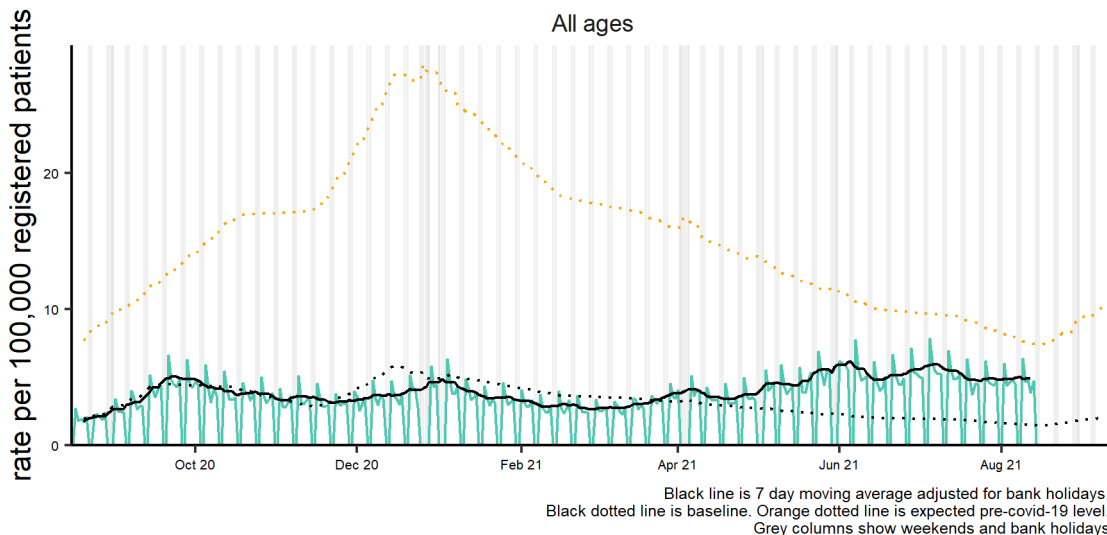
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\* 7-day moving average adjusted for bank holidays.

## 6: Lower respiratory tract infection (LRTI)

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

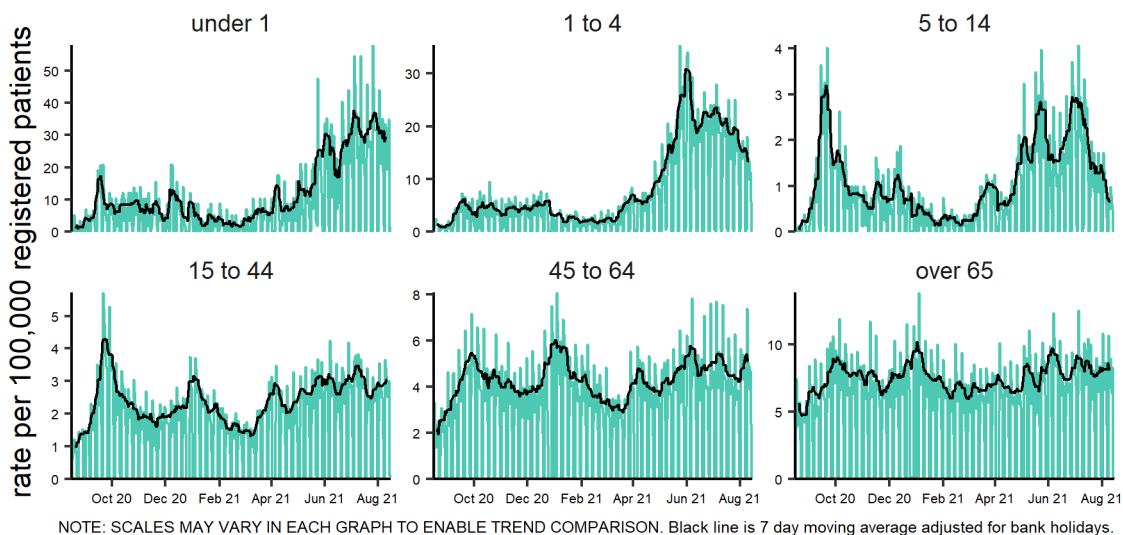
Lower respiratory tract infection 16/08/2020 - 15/08/2021



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

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

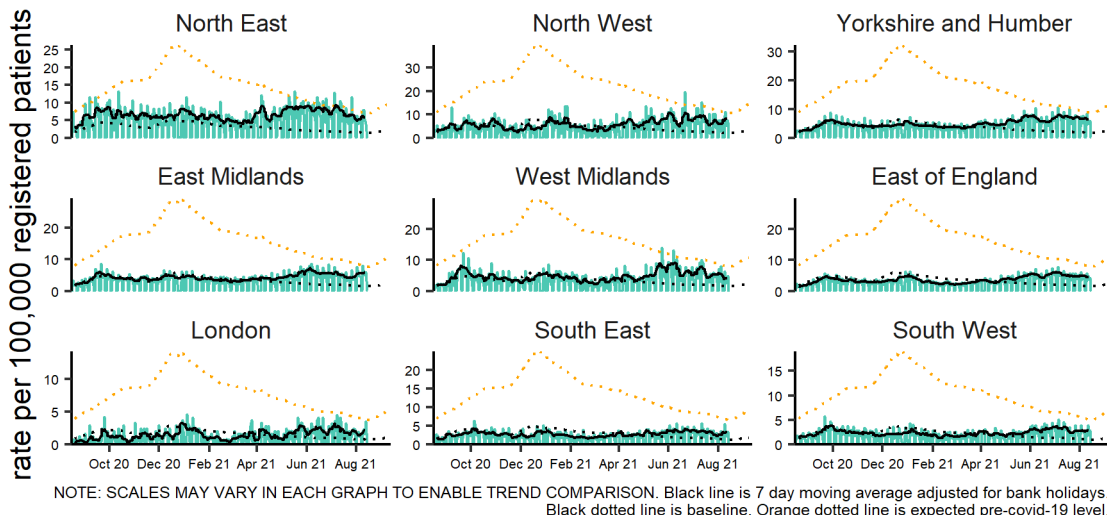
Lower respiratory tract infection by age group (years) 16/08/2020 - 15/08/2021



## 6b: LRTI by PHE centre

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

Lower respiratory tract infection by PHE centre 16/08/2020 - 15/08/2021

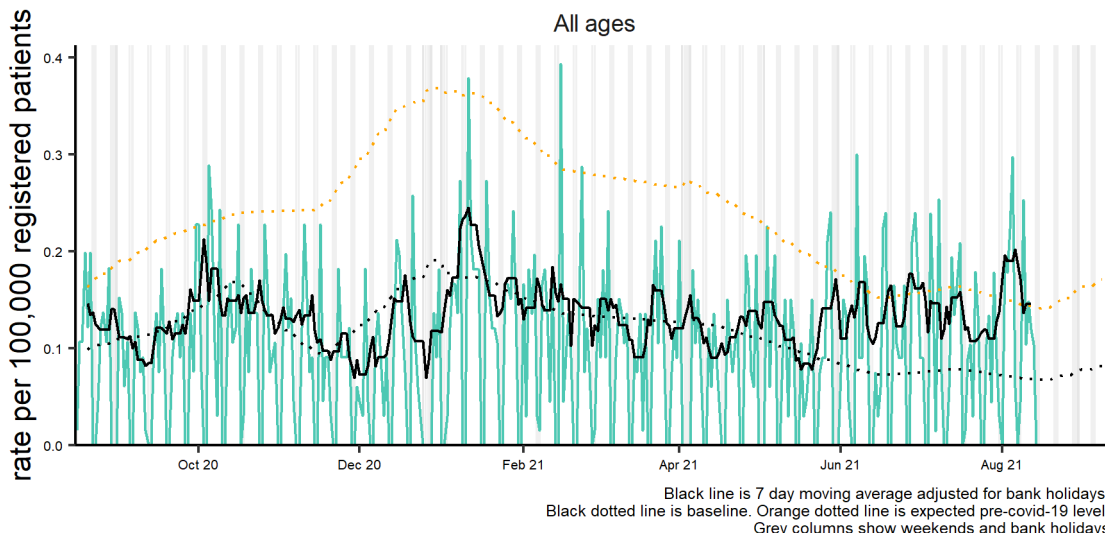


\* 7-day moving average adjusted for bank holidays.

## 7: Pneumonia

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

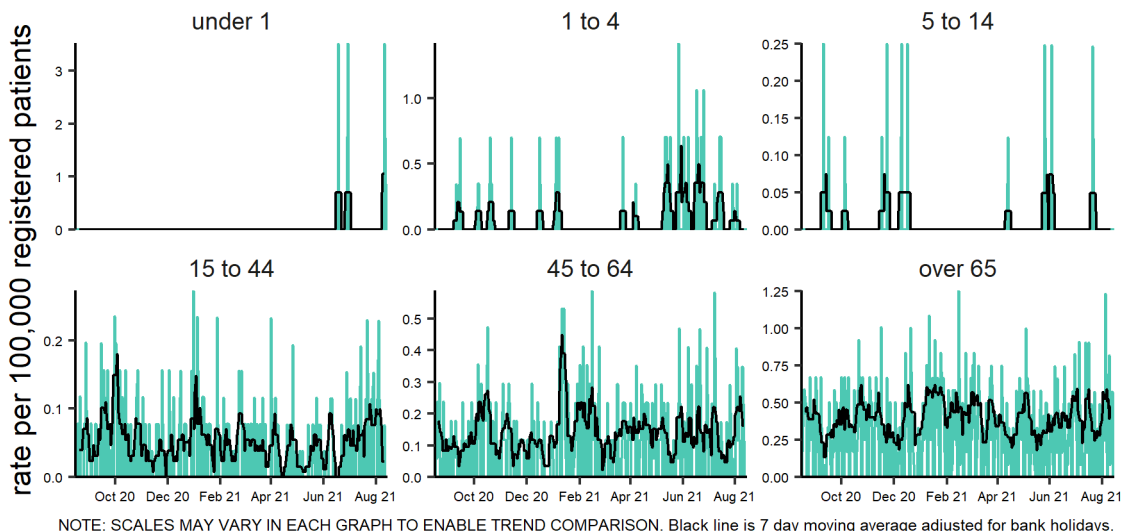
Pneumonia 16/08/2020 - 15/08/2021



## 7a: Pneumonia by age

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

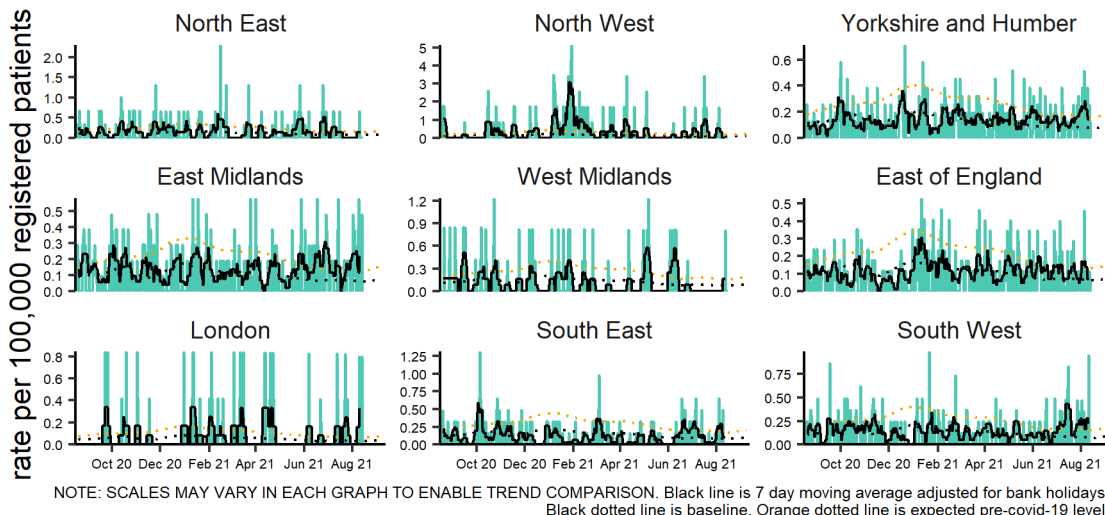
Pneumonia by age group (years) 16/08/2020 - 15/08/2021



## 7b: Pneumonia by PHE centre

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

Pneumonia by PHE centre 16/08/2020 - 15/08/2021

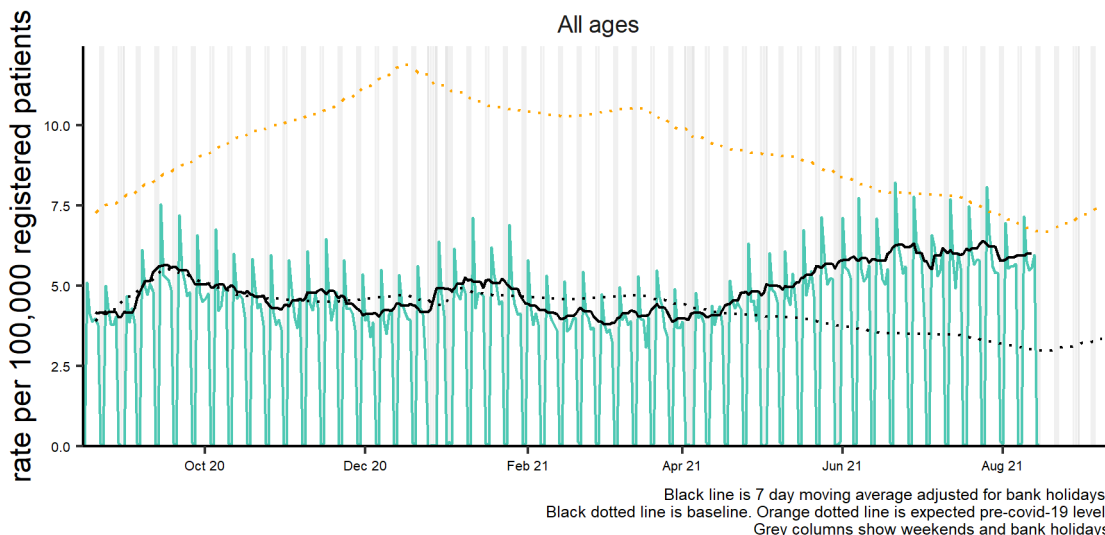


\* 7-day moving average adjusted for bank holidays.

## 8: Gastroenteritis

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

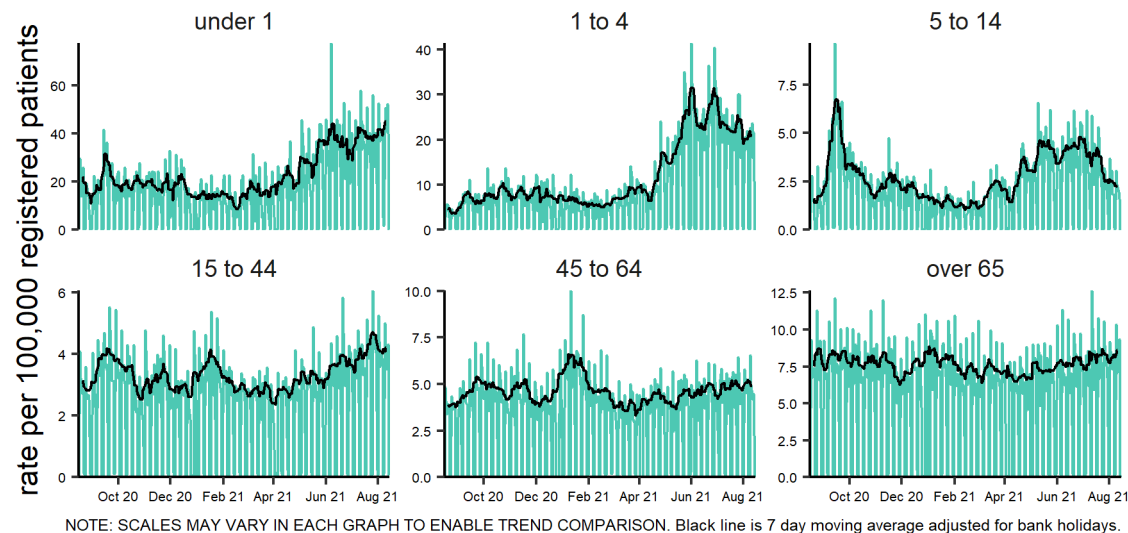
Gastroenteritis 16/08/2020 - 15/08/2021



## 8a: Gastroenteritis by age

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

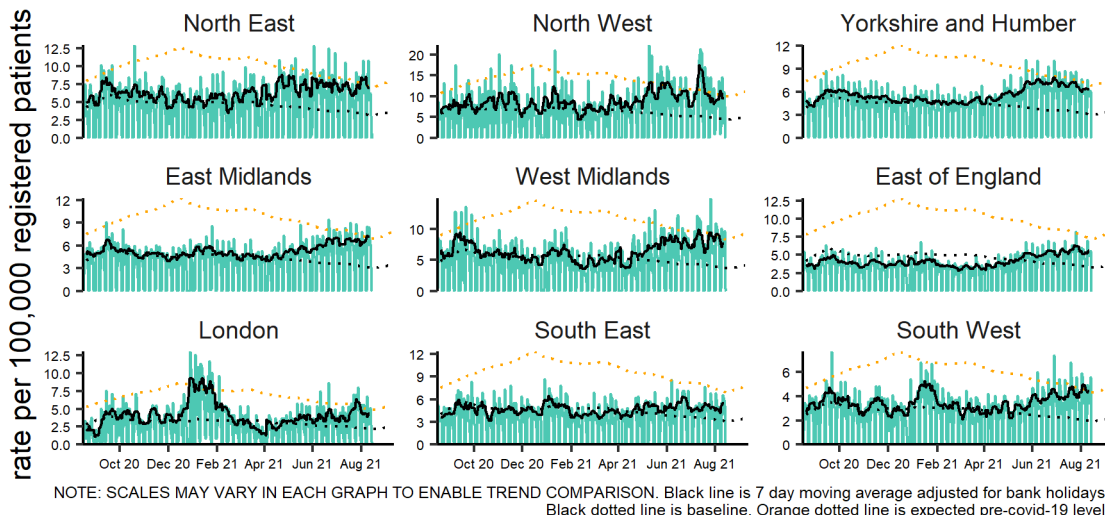
Gastroenteritis by age group (years) 16/08/2020 - 15/08/2021



## 8b: Gastroenteritis by PHE centre

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

Gastroenteritis by PHE centre 16/08/2020 - 15/08/2021



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



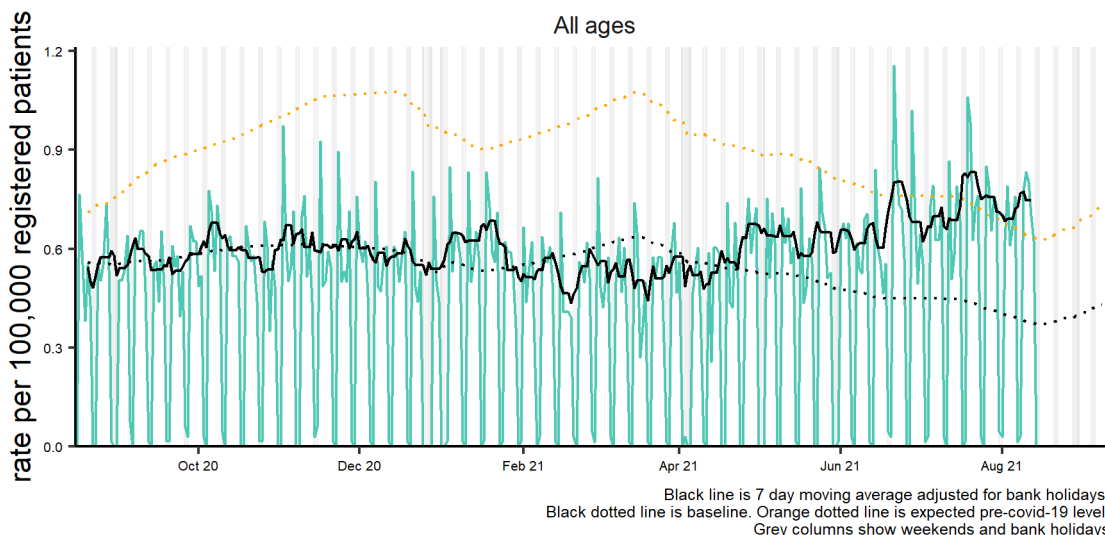
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## 9: Vomiting

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

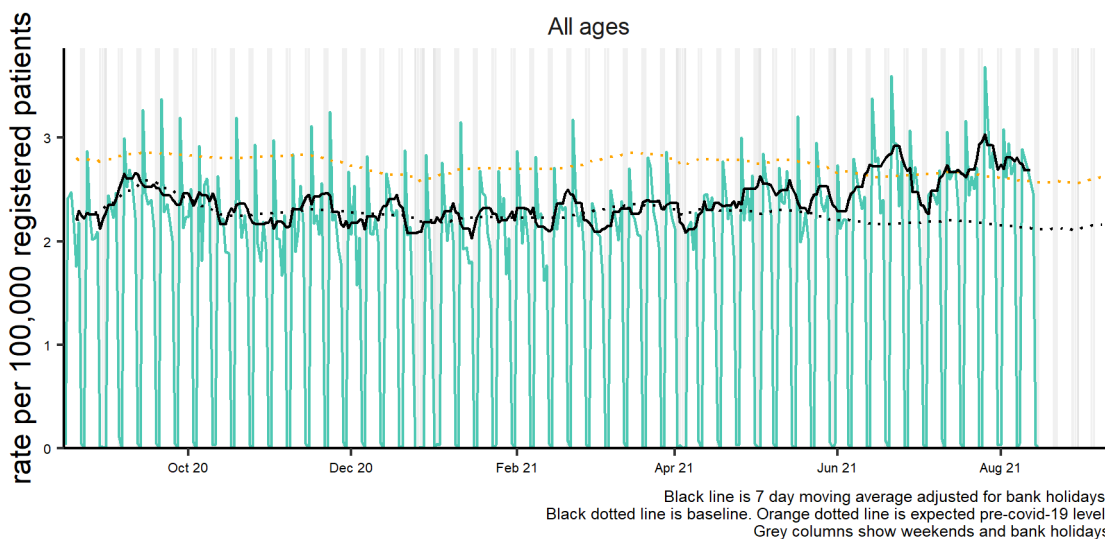
Vomiting 16/08/2020 - 15/08/2021



## 10: Diarrhoea

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

Diarrhoea 16/08/2020 - 15/08/2021



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

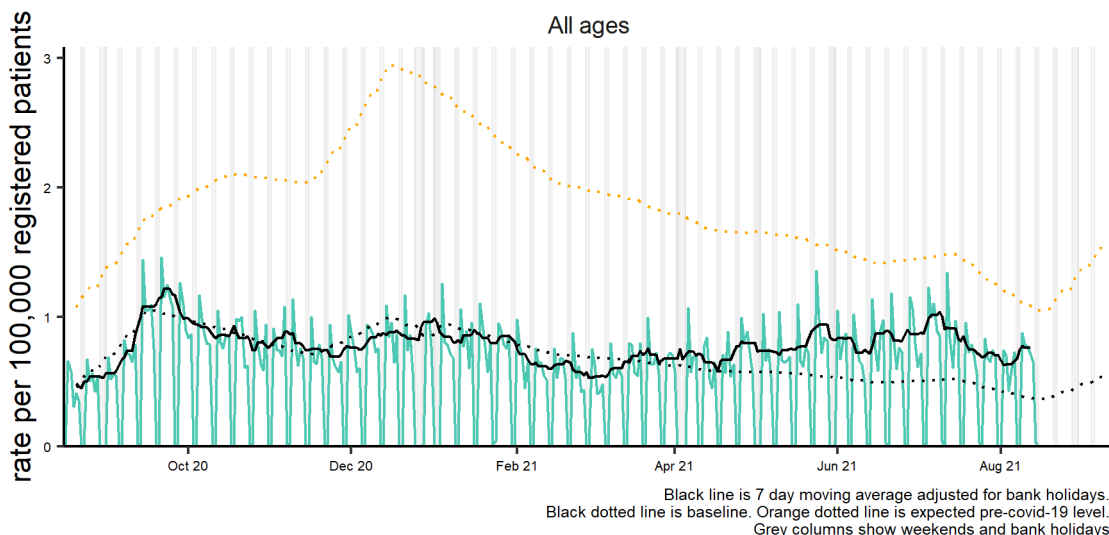
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## 11: Asthma

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

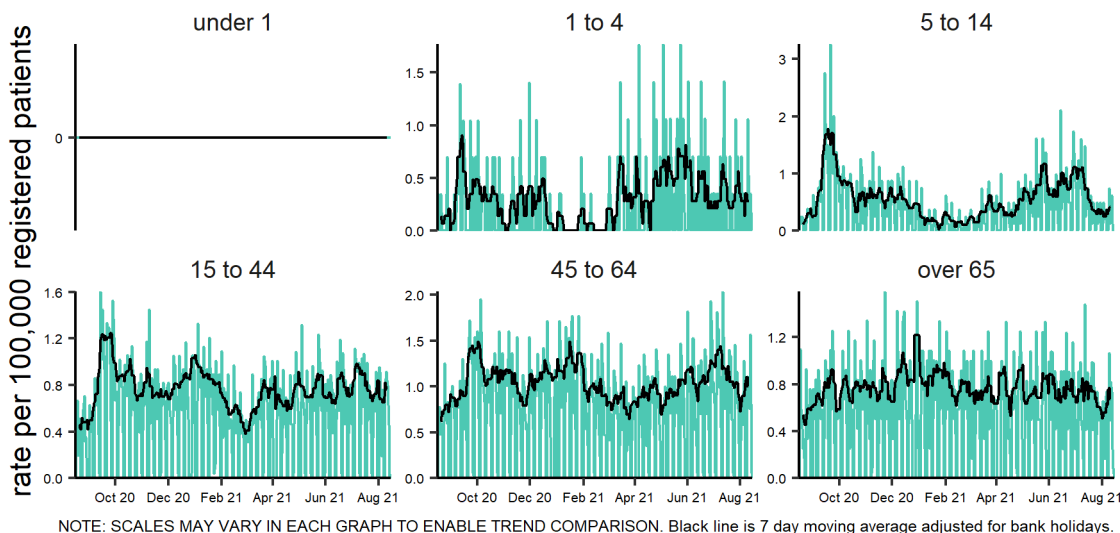
Acute presenting asthma 16/08/2020 - 15/08/2021



## 11a: Asthma by age

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

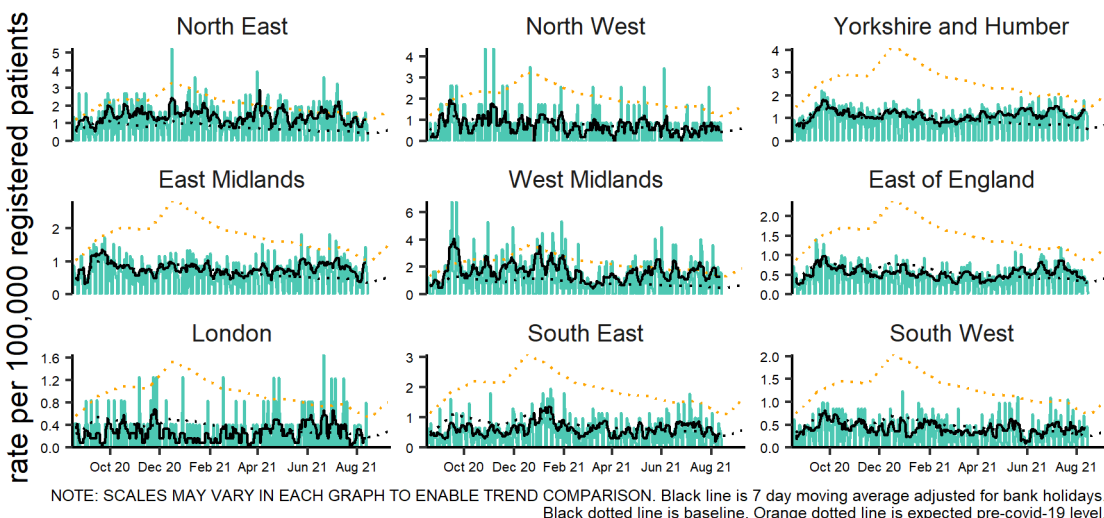
Acute presenting asthma by age group (years) 16/08/2020 - 15/08/2021



## 11b: Asthma by PHE centre

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

Acute presenting asthma by PHE centre 16/08/2020 - 15/08/2021

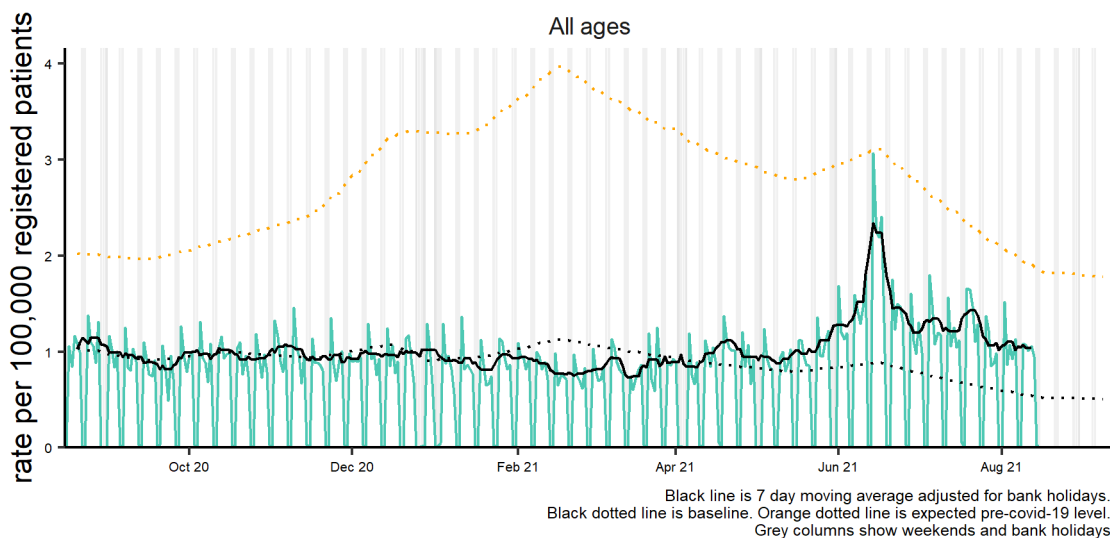


\* 7-day moving average adjusted for bank holidays.

## 12: Conjunctivitis

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

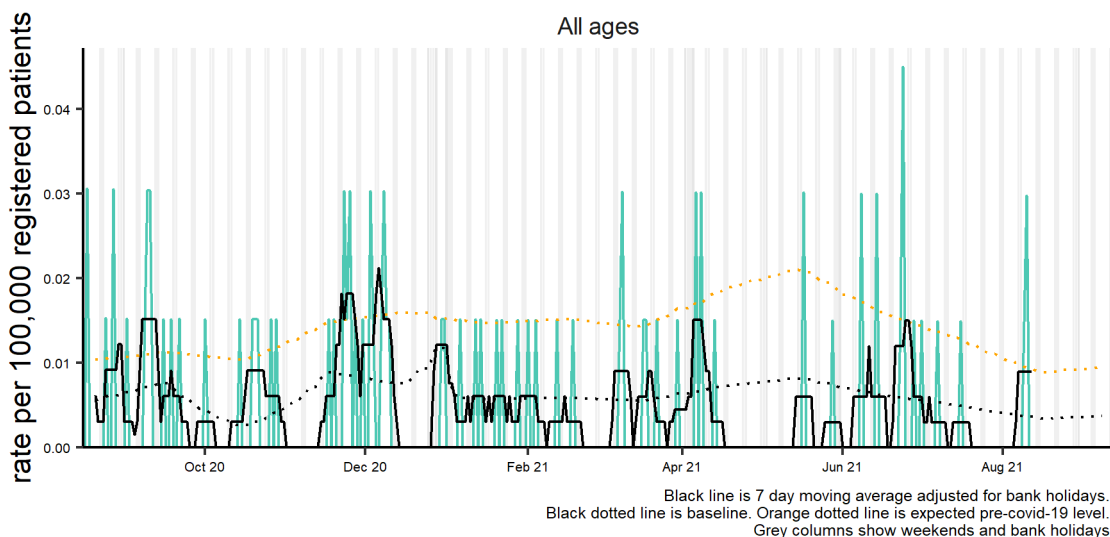
Conjunctivitis 16/08/2020 - 15/08/2021



## 13: Mumps

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

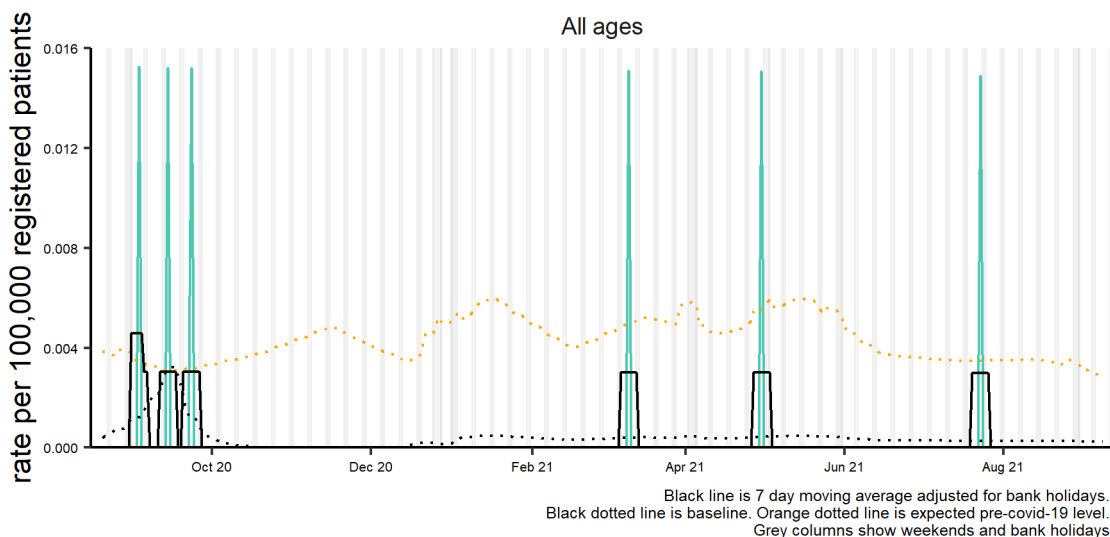
Mumps 16/08/2020 - 15/08/2021



## 14: Measles

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

Measles 16/08/2020 - 15/08/2021



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

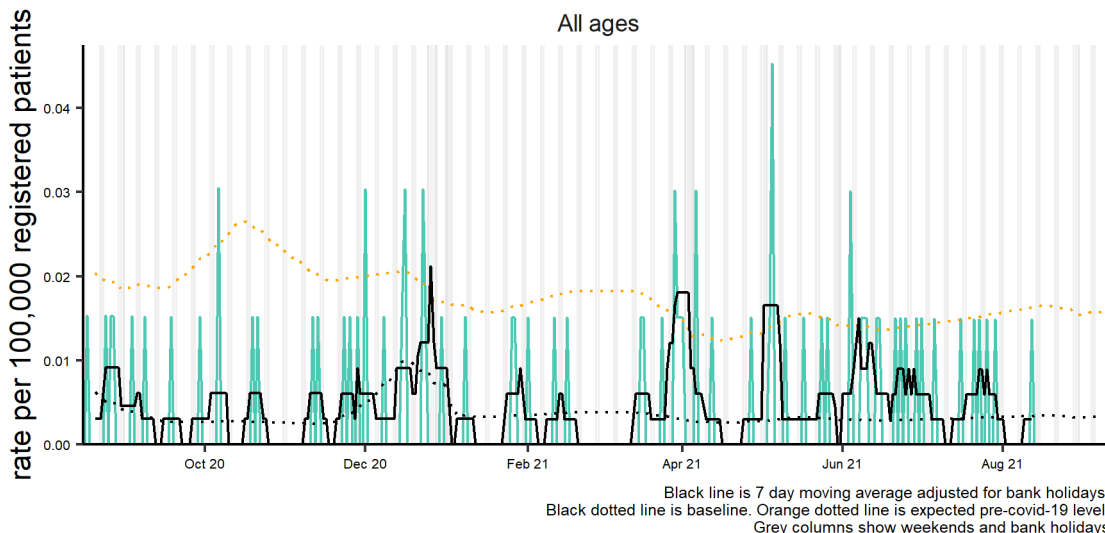
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## 16: Whooping cough

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

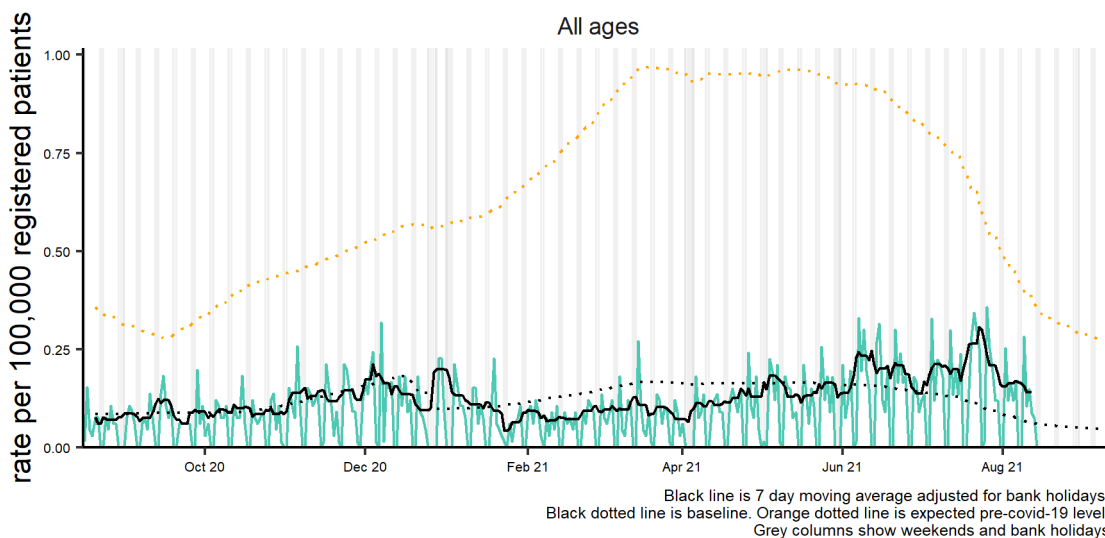
Whooping cough 16/08/2020 - 15/08/2021



## 17: Chickenpox

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

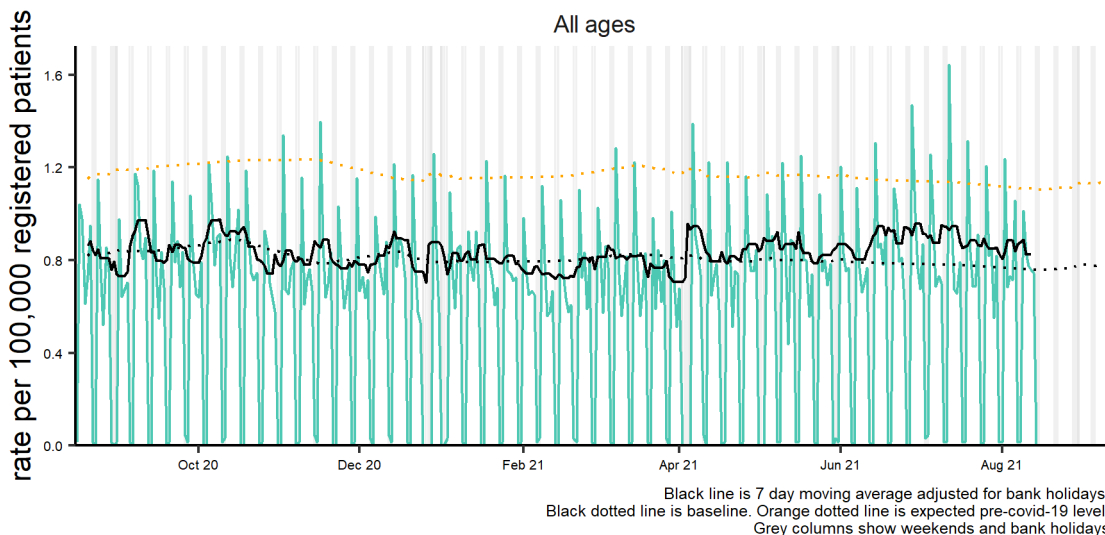
Chickenpox 16/08/2020 - 15/08/2021



## 18: Herpes zoster

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

Herpes zoster 16/08/2020 - 15/08/2021



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

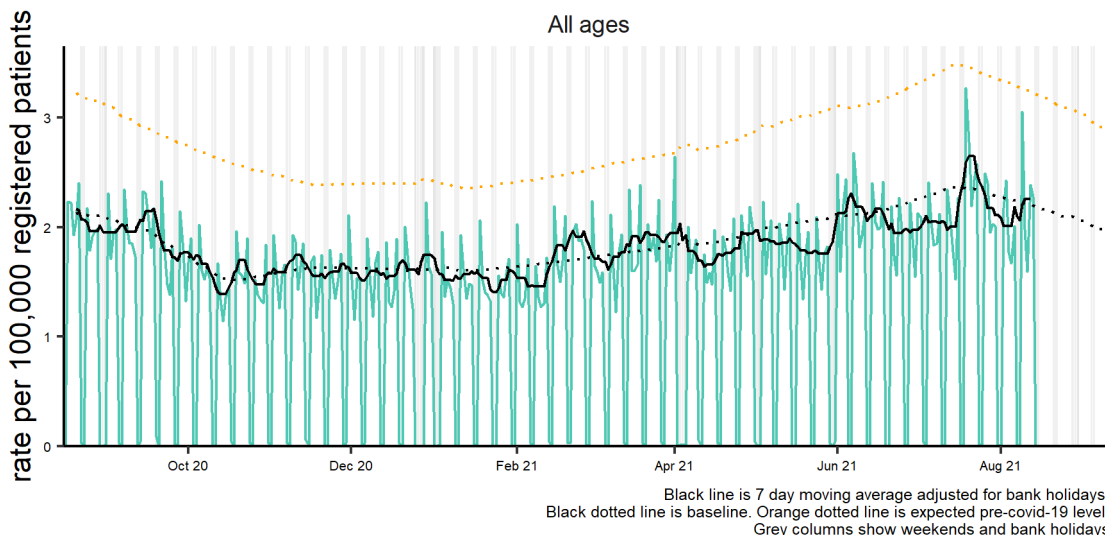
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## 19 Cellulitis

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

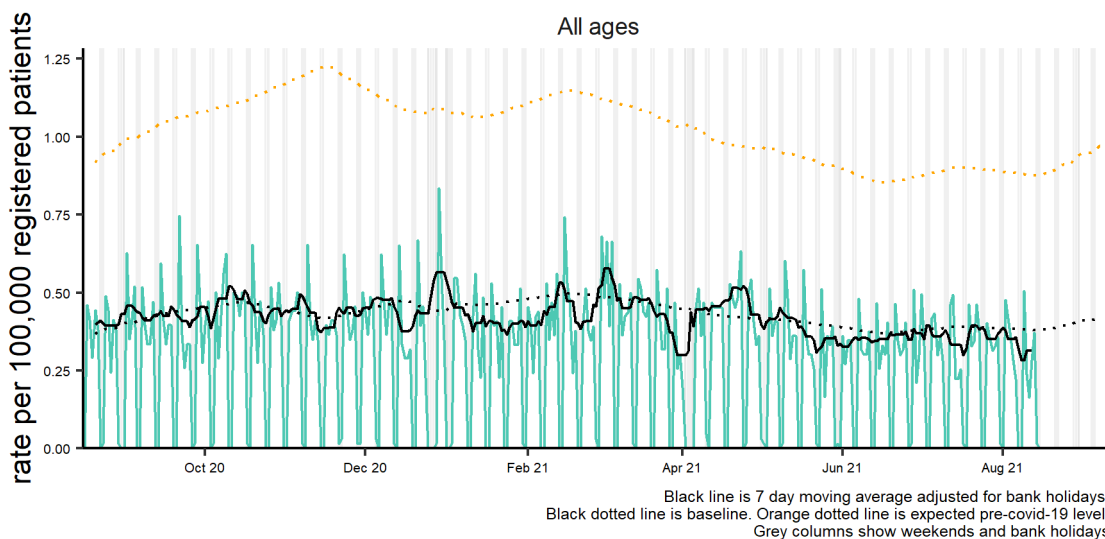
Cellulitis 16/08/2020 - 15/08/2021



## 20: Impetigo

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

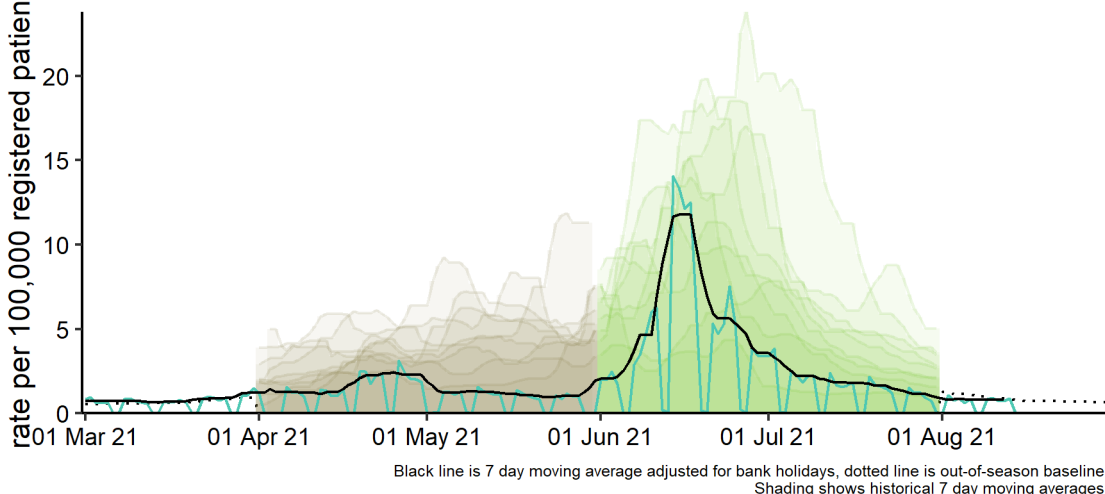
Impetigo 16/08/2020 - 15/08/2021



## 21: Allergic Rhinitis

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

Allergic rhinitis - March to August



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

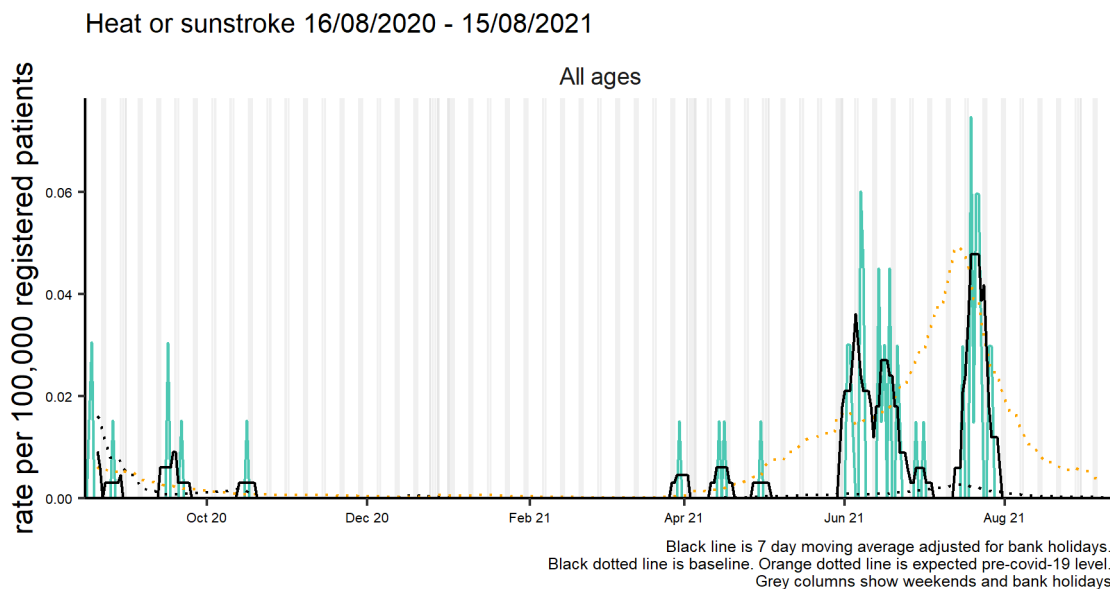
lightest shades are peaks seen once since 2012, darkest shades show levels reached every year since 2012. April-May (brown) is associated with tree pollen peaks, June-July (green) with grass pollen.

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## 22 Heat/sunstroke

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.

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## Notes and further information

- The PHE GP in hours surveillance system monitors the number of visits to general practitioners (GP) during regular surgery hours for known clinical indicators.
- This system captures anonymised GP morbidity data TPP SystemOneGP clinical software system including approximately 12% of the England population.
- Baselines are modelled from historical data to give current seasonally expected levels. Baselines have been remodelled to account for changes due to COVID-19 and the orange dotted lines are counter-factual models showing seasonally expected levels if covid-19 had not occurred.
- Each day, syndromic surveillance data are interrogated by a statistical algorithm to detect statistically significant exceedances (compared to baselines derived from historical data) in syndromic signals e.g. 'influenza-like illness GP consultations in London'. Each statistical exceedance is risk assessed by the ReSST using a published framework. Following the risk assessment, any exceedances requiring further action are communicated to relevant PHE colleagues for investigation. Further information about the methodology is available:
  1. Morbey RA et al. The application of a novel rising activity, multi-level mixed effects, indicator emphasis' (RAMMIE) method for syndromic surveillance in England. *Bioinformatics* 2015;31: 3660-3665. [10.1093/bioinformatics/btv418](https://doi.org/10.1093/bioinformatics/btv418)
  2. Smith GE et al. Novel public health risk assessment process developed to support syndromic surveillance for the 2012 Olympic and Paralympic Games. *Journal of Public Health (Oxford)* 2017;39: e1111-e1117. [10.1093/pubmed/fdw054](https://doi.org/10.1093/pubmed/fdw054)

## 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 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.
- All indicator trends reported here 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.

## Acknowledgements:

We thank TPP, ResearchOne and the SystemOne GP practices contributing to this surveillance system.

**Contact ReSST:**  
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@phe.gov.uk

### GP In Hours Syndromic Surveillance System Bulletin.

**Produced by:** PHE Real-time Syndromic Surveillance Team  
1<sup>st</sup>Floor, 5 St Philips Place, Birmingham, B3 2PW  
**Tel:** 0344 225 3560 > Option 4 > Option 2

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