



28 September 2021

Year: 2021 Week: 38

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Key messages

Data to: 26 September 2021

During week 38, attendances for respiratory and acute respiratory infection increased further, particularly in children aged 0-14 years (figures 4, 4a, 5 & 5a). Attendances for bronchiolitis continued to increase in children aged <1 and 1-4 years (figure 6a). Asthma attendances in children aged 1-4 and 5-14 years remain elevated following the return to school, however attendances have not increased further during week 38 (figure 9a).

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 ED syndromic indicators including important caveats around the interpretation.

Diagnostic indicators at a glance:

Further details on the syndromic indicators reported and baselines can be found on page 10.

Indicator	Current trend	Level
COVID-19-like	decreasing	-
Respiratory	increasing	above baseline
Acute Respiratory Infection	increasing	above baseline
Bronchiolitis	increasing	above baseline
Influenza-like Illness	increasing	above baseline
Pneumonia	decreasing	above baseline
Asthma	increasing	above baseline
Gastrointestinal	no trend	above baseline
Gastroenteritis	no trend	above baseline
Cardiac	decreasing	below baseline
Myocardial Ischaemia	decreasing	below baseline
Alcohol intoxication	increasing	similar to baseline

EDSSS weekly report statistics

Only Type 1 EDs meeting the weekly reporting criteria are included (see page 10 for details).

*max EDs included across full time period reported in charts, individual days may include fewer EDs.

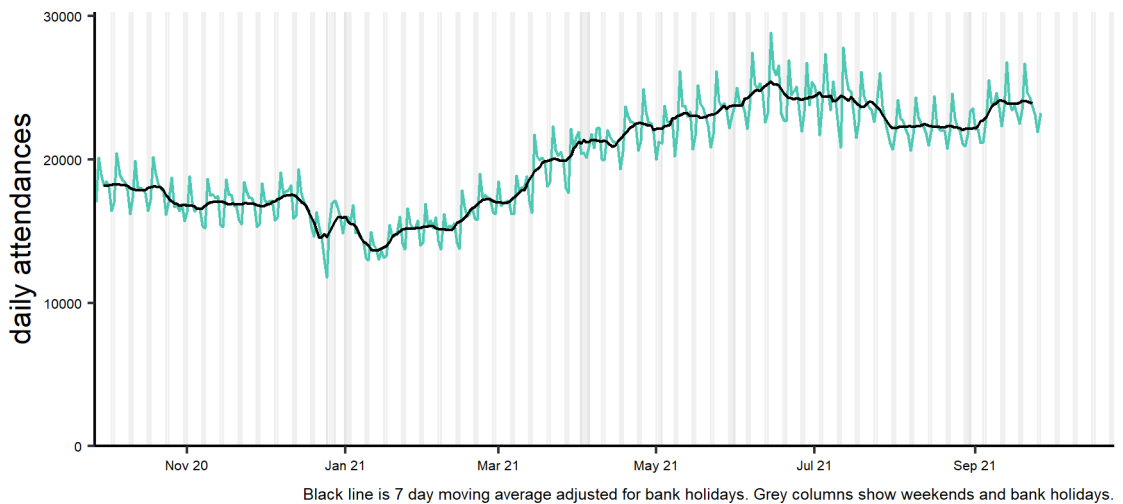
Date	Total Attendances	Diagnoses Coded Number	%	Type 1 EDs Included
20 09 2021	26,700	19,274	72.2%	95
21 09 2021	24,646	17,550	71.2%	95
22 09 2021	24,343	18,193	74.7%	95
23 09 2021	23,733	17,135	72.2%	95
24 09 2021	23,114	16,339	70.7%	95
25 09 2021	21,915	15,328	69.9%	95
26 09 2021	23,256	16,372	70.4%	95
Total	167,707	120,191	71.7%	(max)* 95

1: Total attendances.

Daily number of total attendances recorded, across the EDSSS network.

(see page 6 for ED inclusion criteria).

Total attendances 27/09/2020 - 26/09/2021

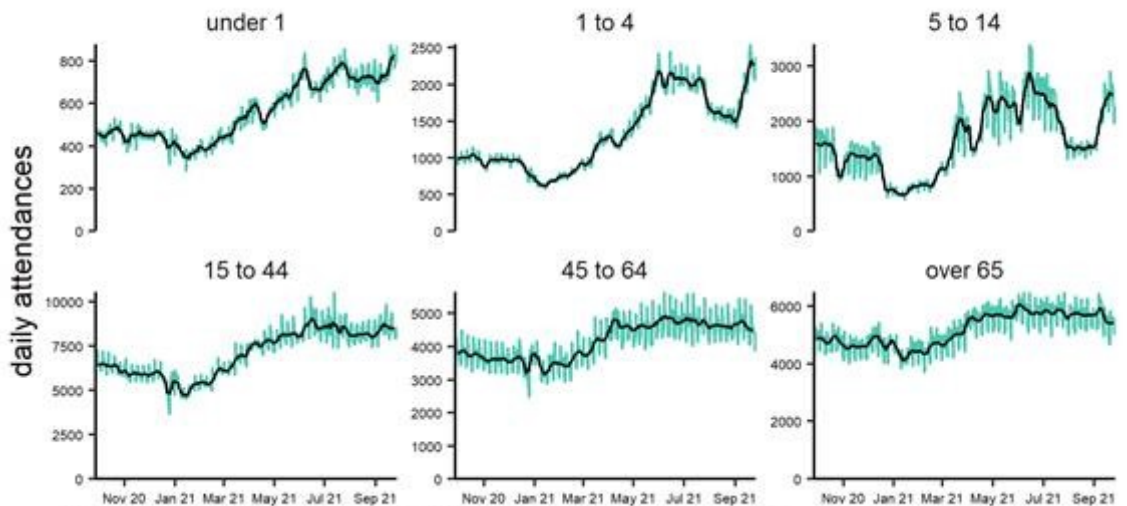


Black line is 7 day moving average adjusted for bank holidays. Grey columns show weekends and bank holidays.

1a: Daily attendances by age: numbers.

Daily number and 7-day moving average of total attendances, by age group.

Total attendances by age group (years) 27/09/2020 - 26/09/2021

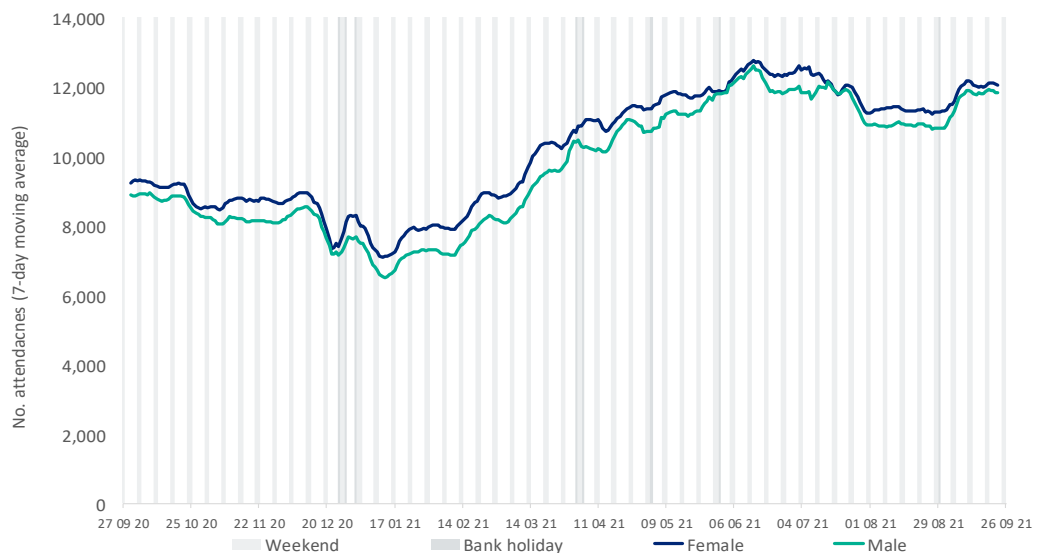


NOTE: SCALES MAY VARY IN EACH GRAPH TO ENABLE TREND COMPARISON. Black line is 7 day moving average adjusted for bank holidays.

2: Daily attendances by gender: numbers

Daily number of total attendances by gender, recorded across the EDSSS network (shown as a 7-day moving average).

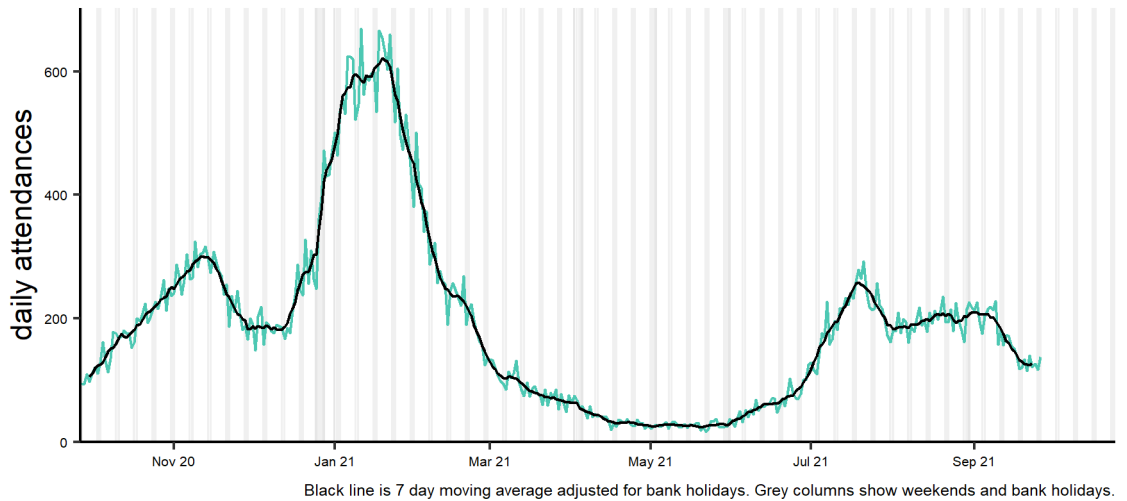
Please note: indeterminate gender is not shown due to small numbers



3: COVID-19-like.

Daily number of attendances recorded as COVID-19-like attendances across the EDSSS network.

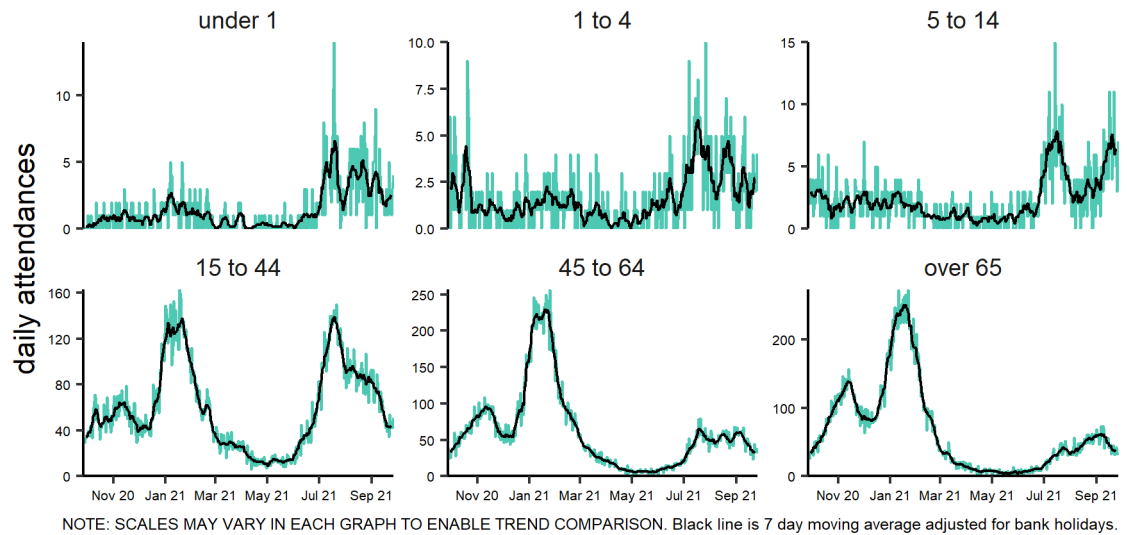
Covid-19-like 27/09/2020 - 26/09/2021



3a: COVID-19-like by age group.

Daily number and 7 day moving average of COVID-19-like attendances within each age group.

Covid-19-like by age group (years) 27/09/2020 - 26/09/2021

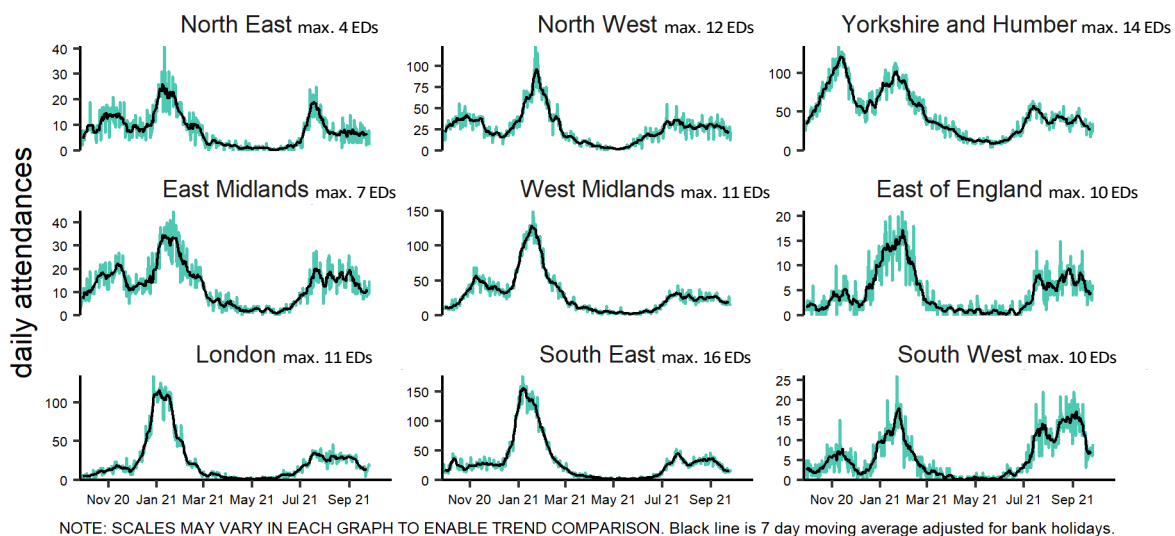


3b: COVID-19-like by PHE Centre

Daily attendances and 7 day moving average of COVID-19-like attendances within each PHE Centre (with the maximum number of EDs included in each time series).

Please see ['notes and caveats'](#) for information on how EDs are selected for inclusion each week.

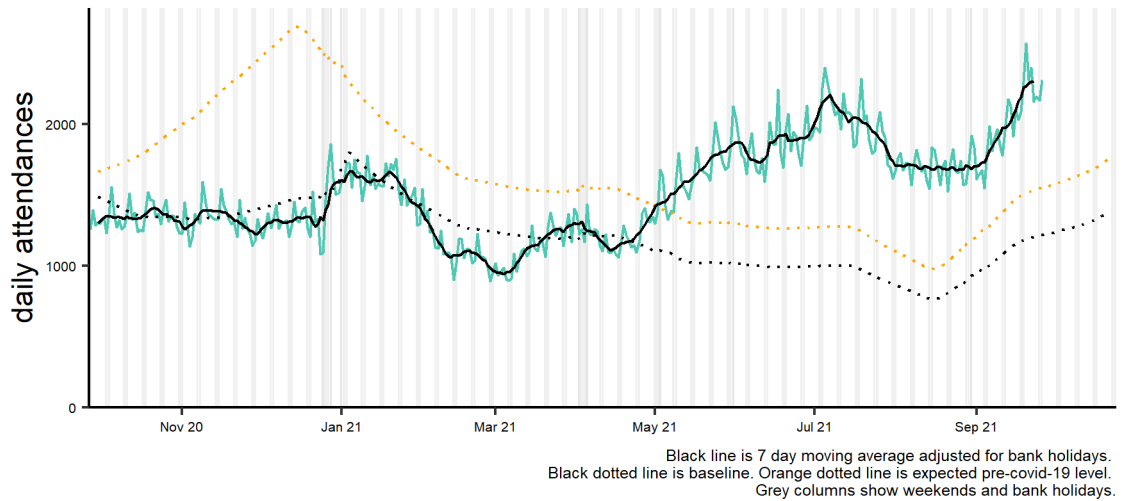
Covid-19-like by PHE centre 27/09/2020 - 26/09/2021



4: Respiratory.

Daily number of attendances recorded as respiratory attendances across the EDSSS network.

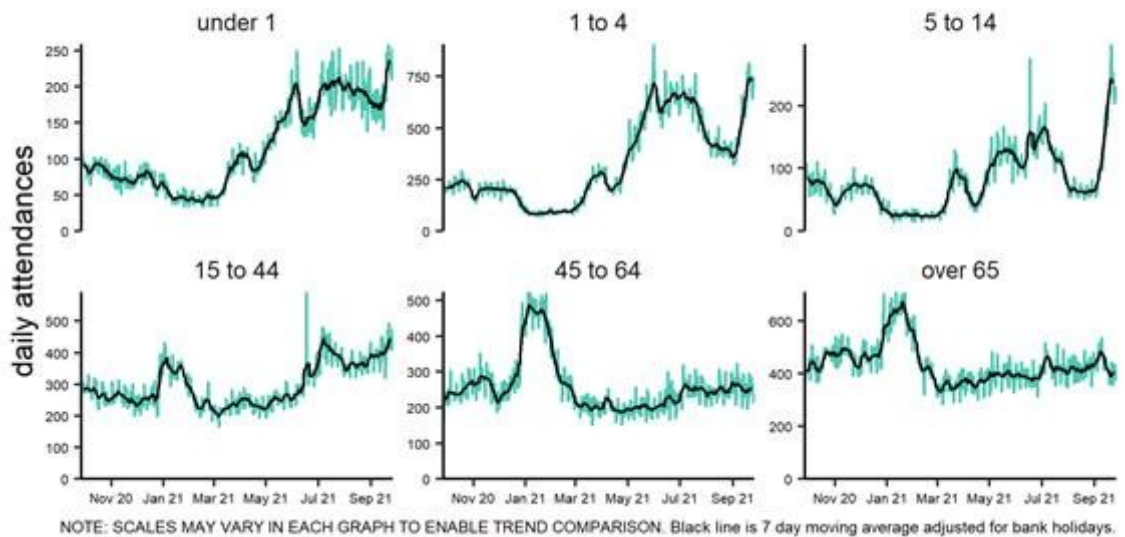
Respiratory conditions 27/09/2020 - 26/09/2021



4a: Respiratory by age group.

Daily number and 7 day moving average of attendances within each age group.

Respiratory conditions by age group (years) 27/09/2020 - 26/09/2021

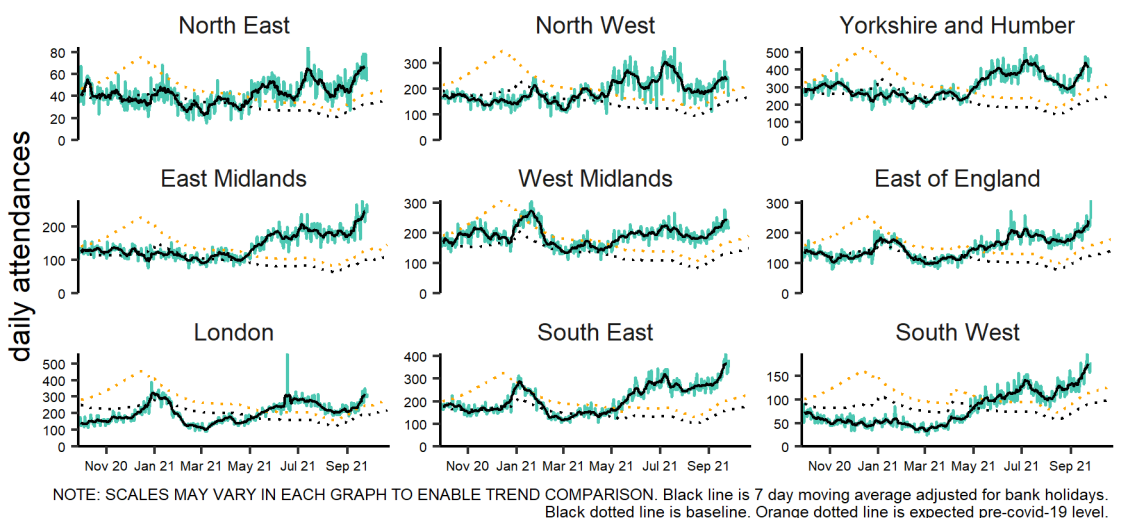


4b: Respiratory by PHE Centre

Daily attendances and 7 day moving average of attendances within each PHE Centre (with the maximum number of EDs included in each time series).

Please see 'notes and caveats' for information on how EDs are selected for inclusion each week.

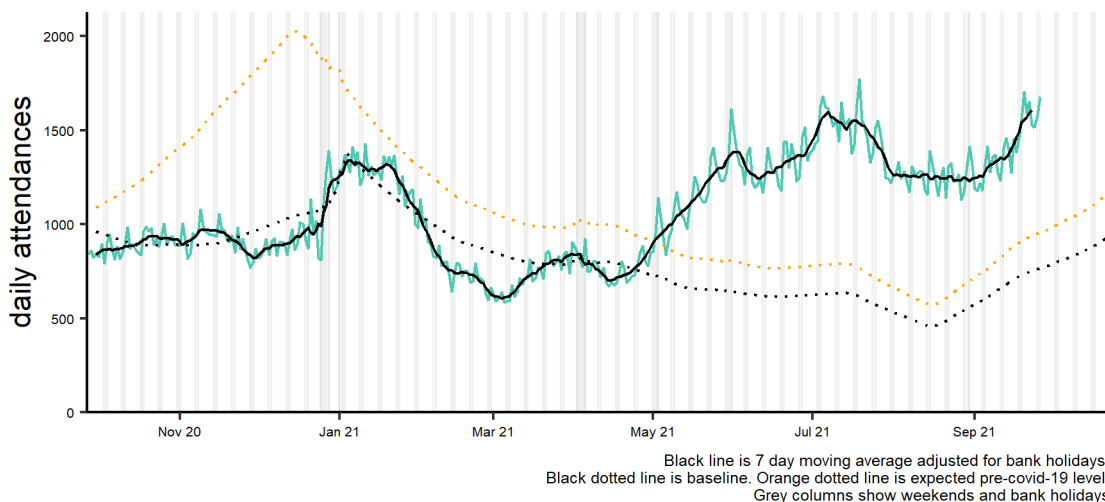
Respiratory conditions by PHE centre 27/09/2020 - 26/09/2021



5: Acute respiratory infection.

Daily number of attendances recorded as respiratory attendances across the EDSSS network.

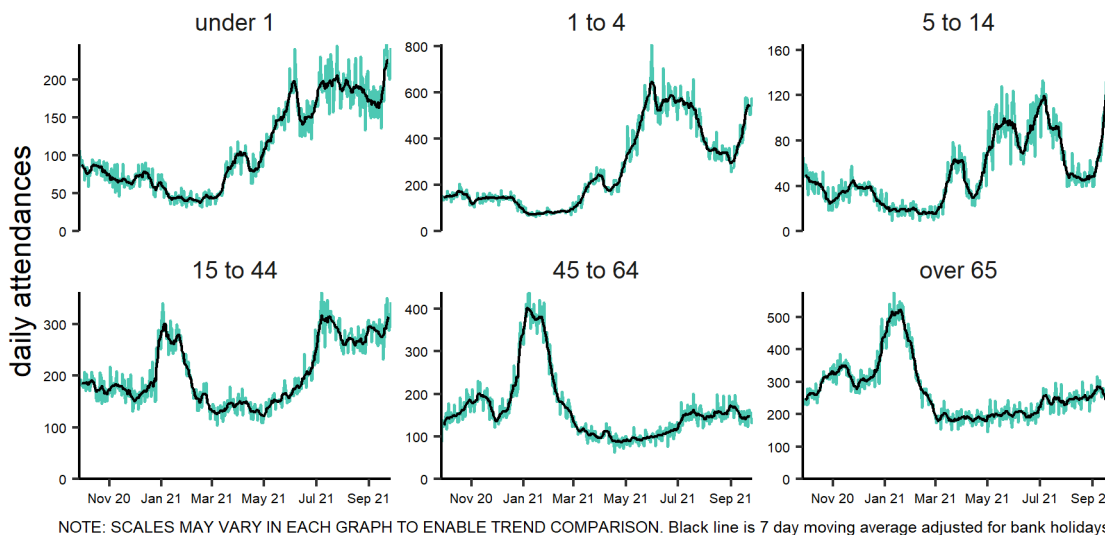
Acute respiratory infection 27/09/2020 - 26/09/2021



5a: Acute respiratory infection by age group.

Daily number and 7 day moving average of attendances within each age group.

Acute respiratory infection by age group (years) 27/09/2020 - 26/09/2021

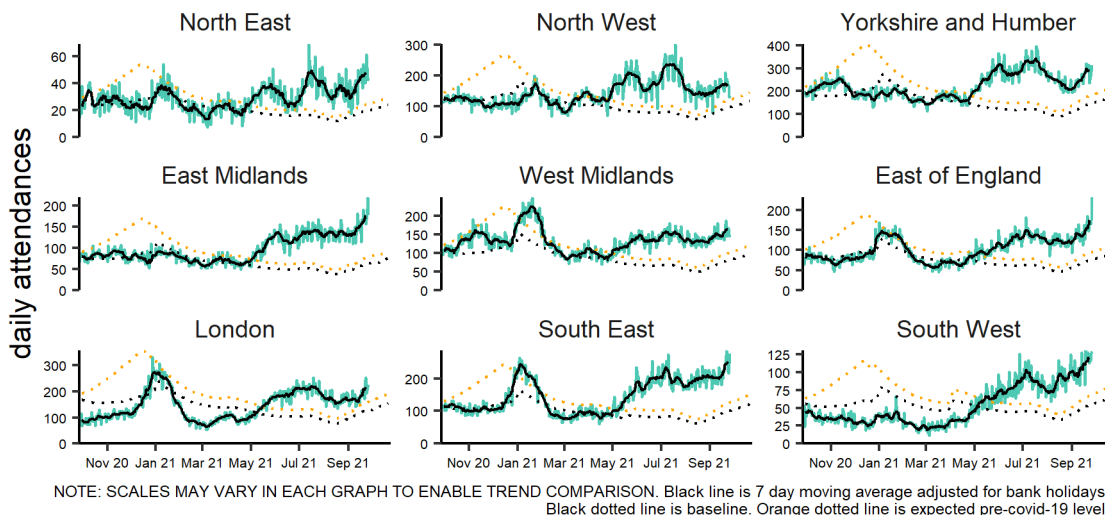


5b: Acute Respiratory Infection by PHE centre.

Daily attendances and 7 day moving average of attendances within each PHE Centre (with the maximum number of EDs included in each time series).

Please see 'notes and caveats' for information on how EDs are selected for inclusion each week.

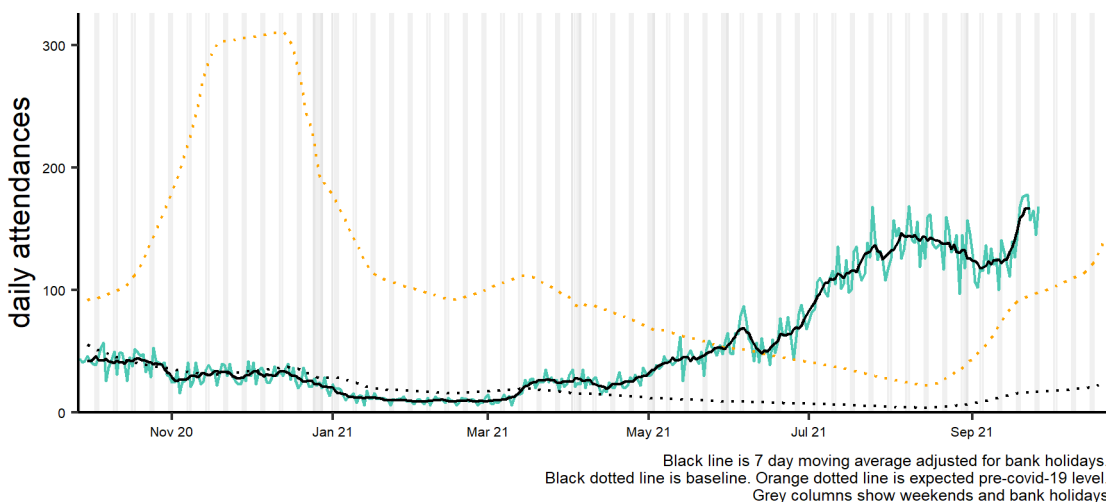
Acute respiratory infection by PHE centre 27/09/2020 - 26/09/2021



6: Bronchiolitis/bronchitis.

Daily number of attendances recorded as bronchiolitis/ acute bronchitis attendances across the EDSSS network.

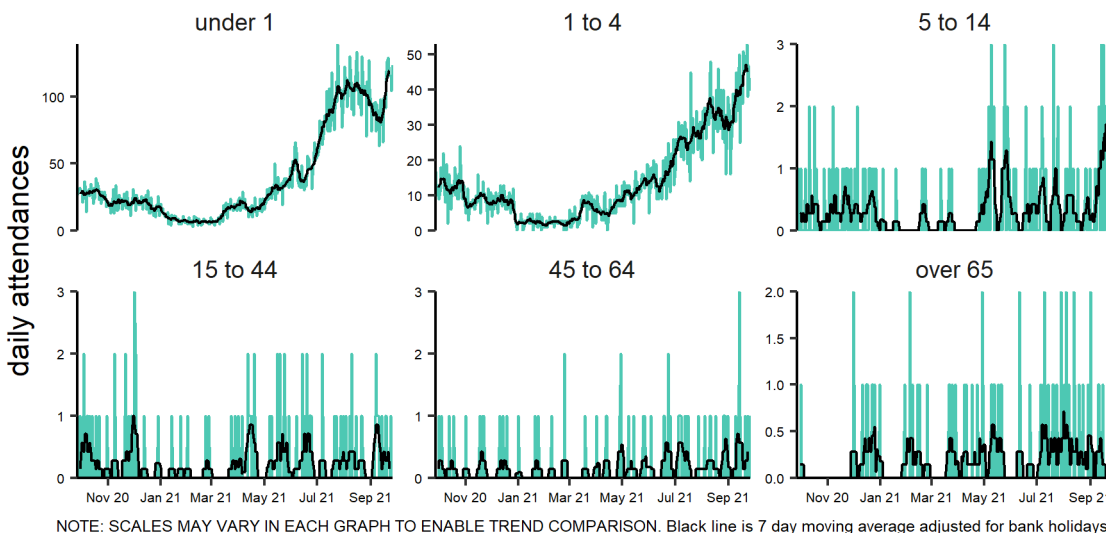
Acute bronchiolitis 27/09/2020 - 26/09/2021



6a: Bronchiolitis/bronchitis by age group

Daily number and 7 day moving average of attendances within each age group.

Acute bronchiolitis by age group (years) 27/09/2020 - 26/09/2021

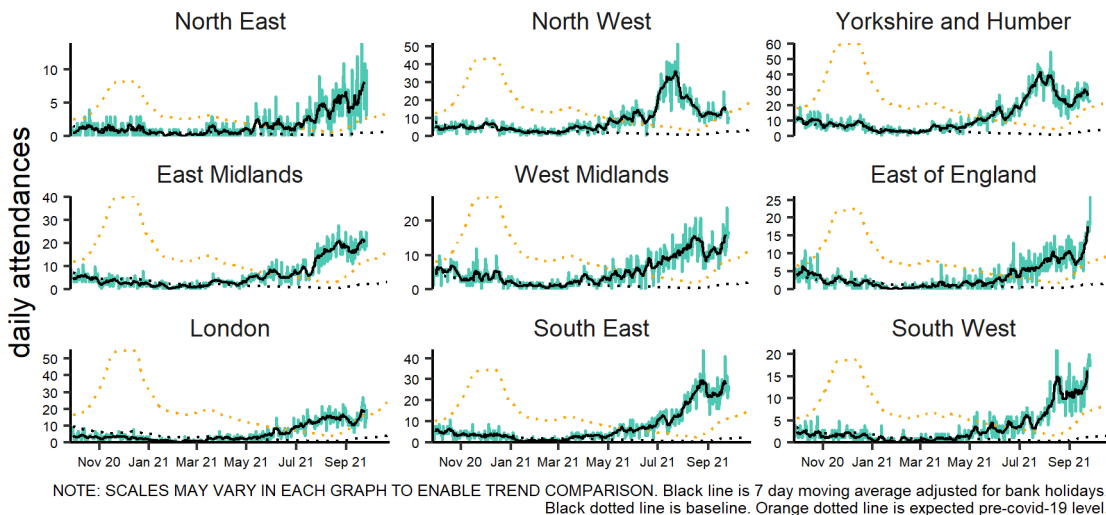


6b: Bronchiolitis/bronchitis by PHE centre.

Daily attendances and 7 day moving average of attendances within each PHE Centre (with the maximum number of EDs included in each time series).

Please see 'notes and caveats' for information on how EDs are selected for inclusion each week.

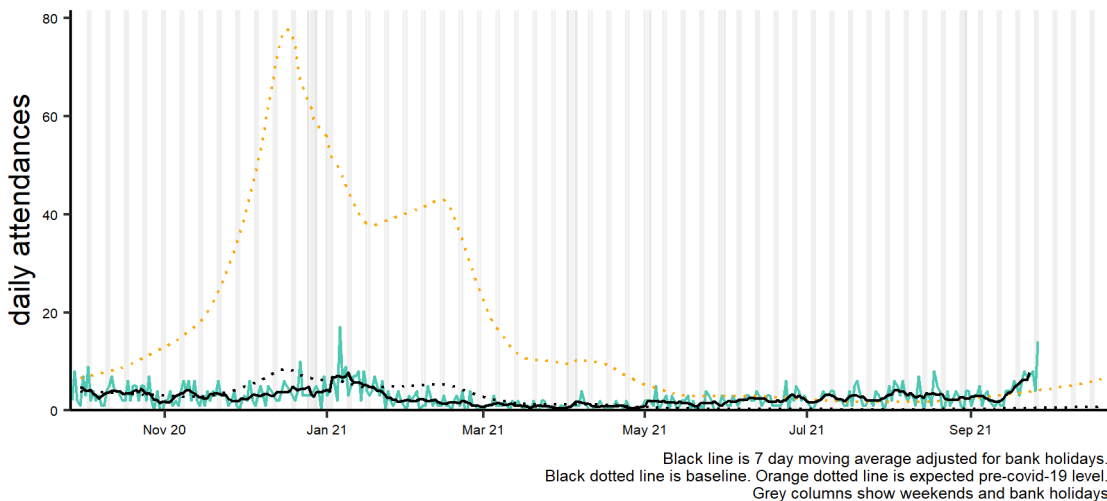
Acute bronchiolitis by PHE centre 27/09/2020 - 26/09/2021



7: Influenza-like Illness.

Daily number of attendances recorded as ILI attendances across the EDSSS network.

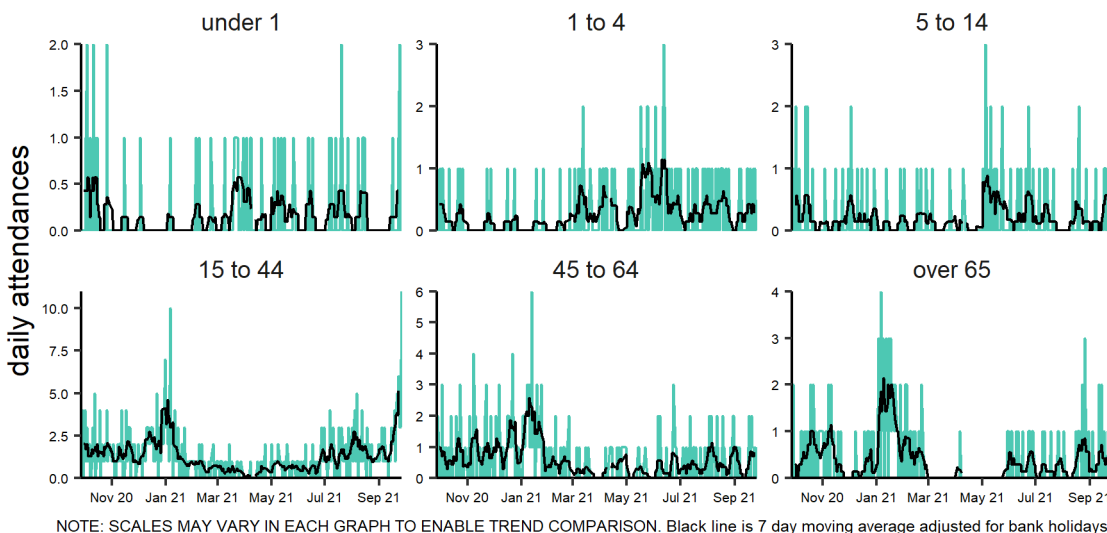
Influenza-like illness 27/09/2020 - 26/09/2021



7a: Influenza-like Illness by age group

Daily number and 7 day moving average of attendances within each age group.

Influenza-like illness by age group (years) 27/09/2020 - 26/09/2021

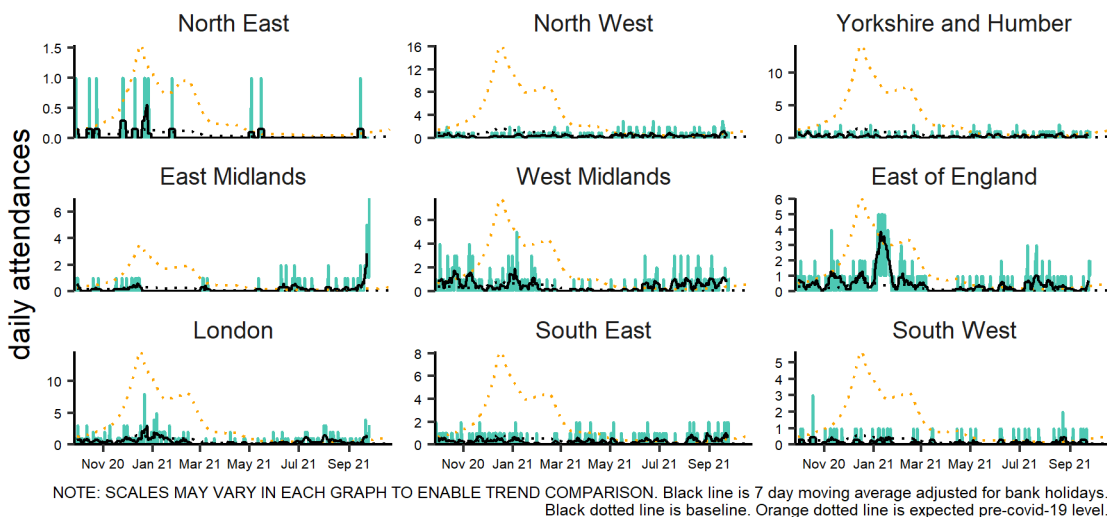


7b: Influenza-like Illness. By PHE centre

Daily attendances and 7 day moving average of attendances within each PHE Centre (with the maximum number of EDs included in each time series).

Please see 'notes and caveats' for information on how EDs are selected for inclusion each week.

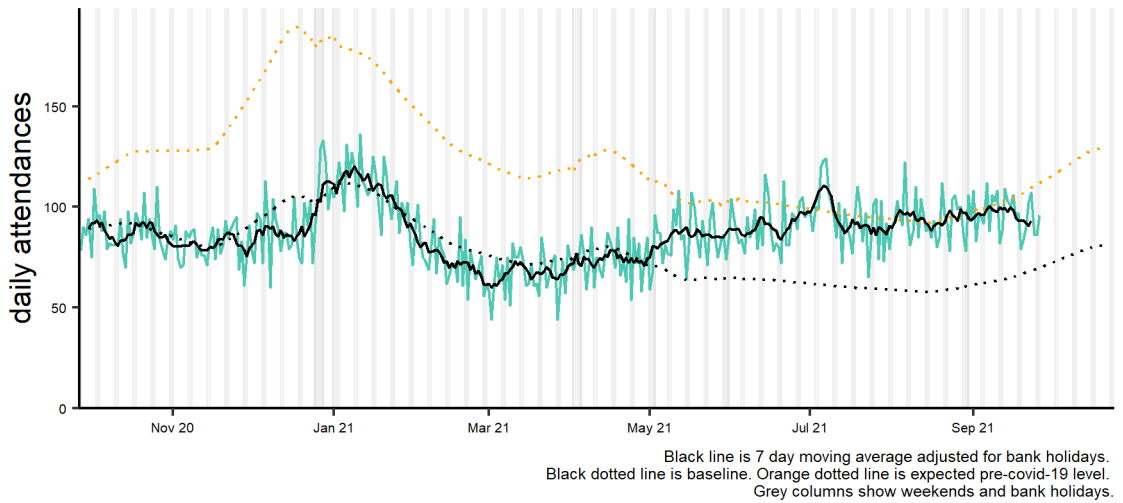
Influenza-like illness by PHE centre 27/09/2020 - 26/09/2021



8. Pneumonia

7 day moving average of pneumonia attendances within each age group.

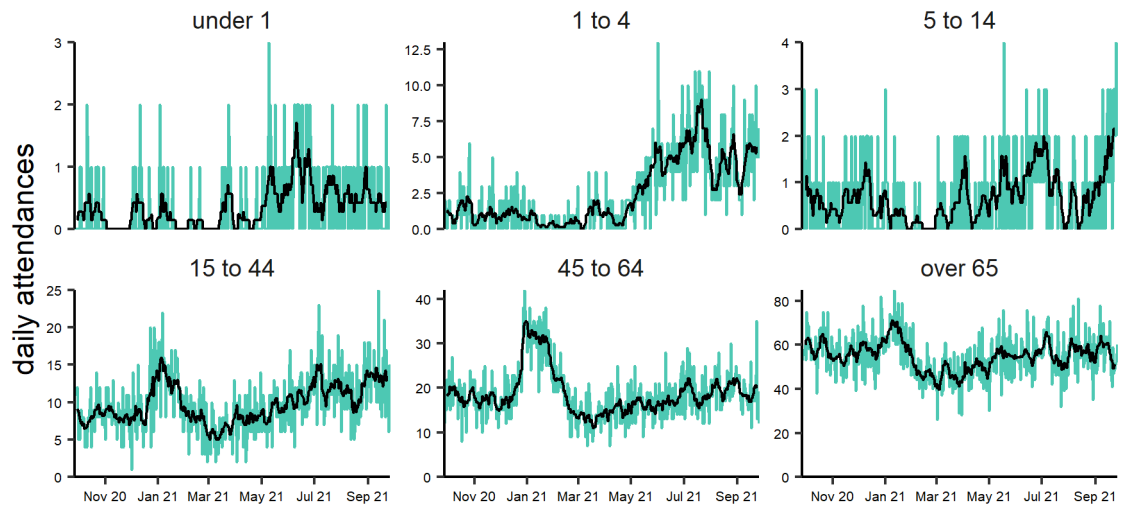
Pneumonia 27/09/2020 - 26/09/2021



8a: Pneumonia. by age group

Daily number and 7 day moving average of attendances within each age group.

Pneumonia by age group (years) 27/09/2020 - 26/09/2021

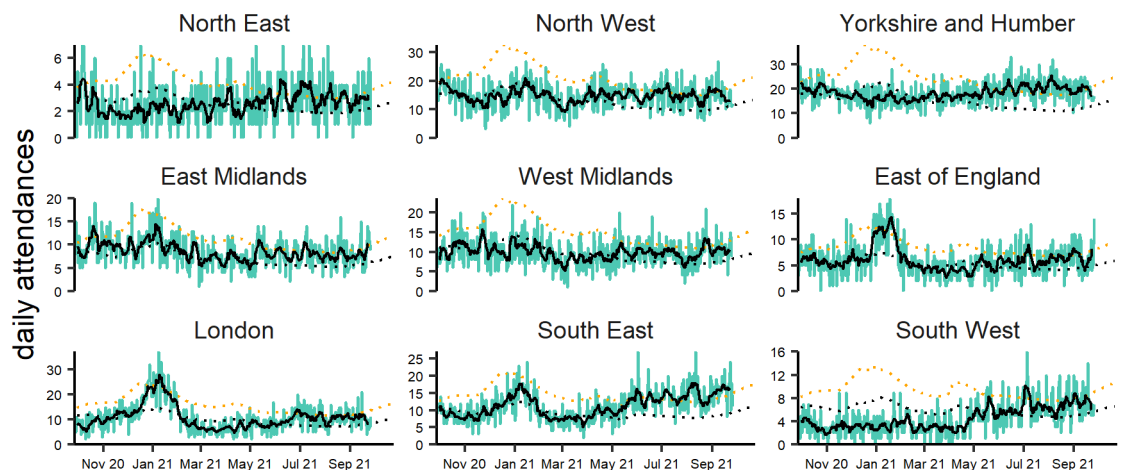


8b: Pneumonia by PHE centre.

Daily attendances and 7 day moving average of attendances within each PHE Centre (with the maximum number of EDs included in each time series).

Please see 'notes and caveats' for information on how EDs are selected for inclusion each week.

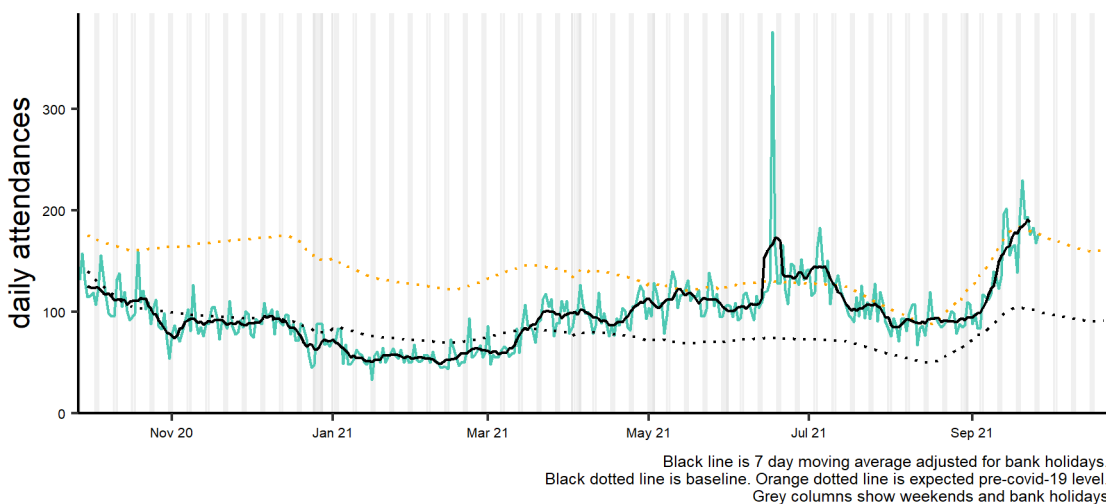
Pneumonia by PHE centre 27/09/2020 - 26/09/2021



9: Asthma.

Daily number of attendances recorded as asthma/wheeze/difficulty breathing attendances across the EDSSS network.

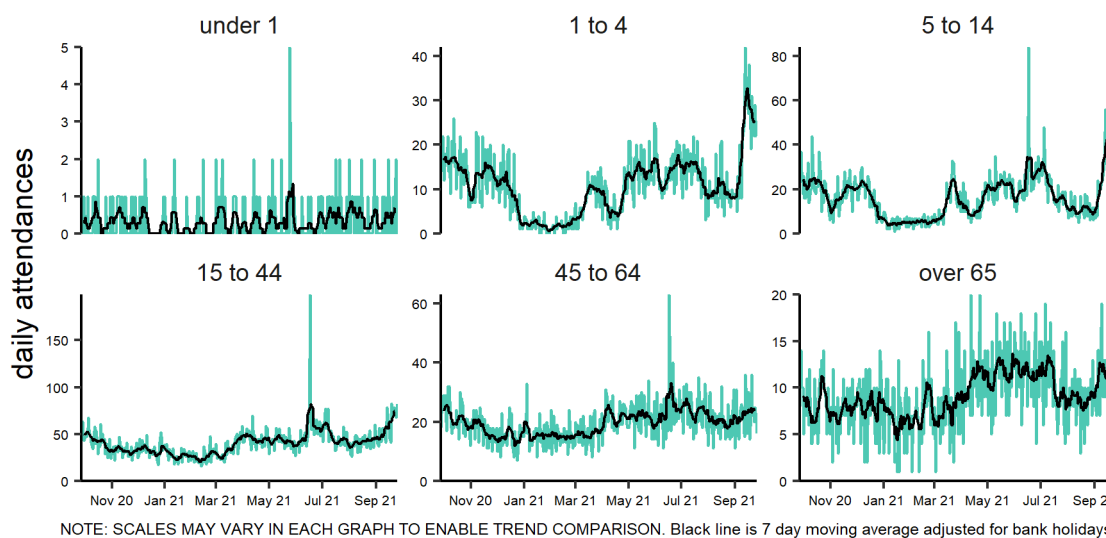
Asthma 27/09/2020 - 26/09/2021



9a: Asthma by age group.

Daily number and 7 day moving average of attendances within each age group.

Asthma by age group (years) 27/09/2020 - 26/09/2021

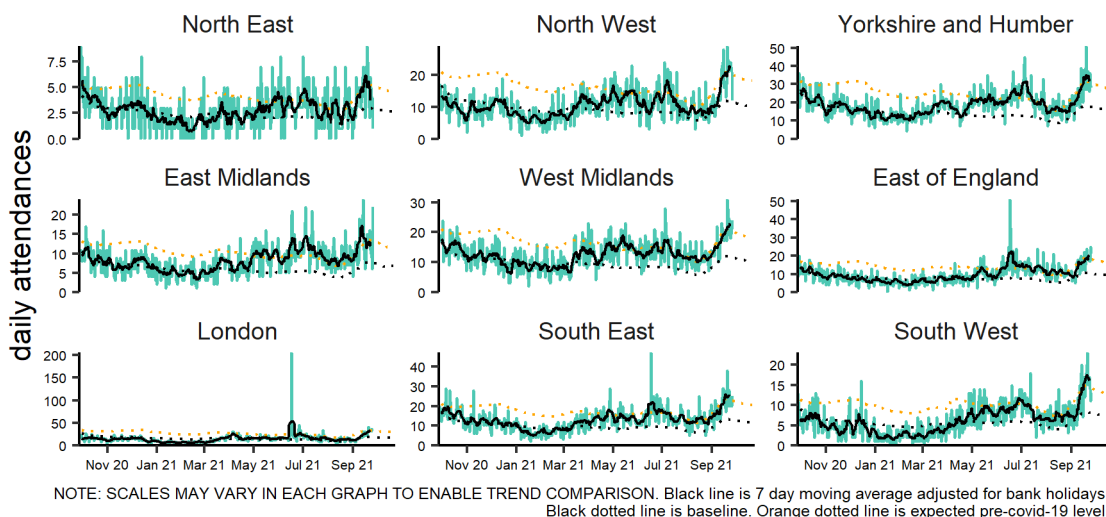


9b: Asthma by PHE centre.

Daily attendances and 7 day moving average of attendances within each PHE Centre (with the maximum number of EDs included in each time series).

Please see 'notes and caveats' for information on how EDs are selected for inclusion each week.

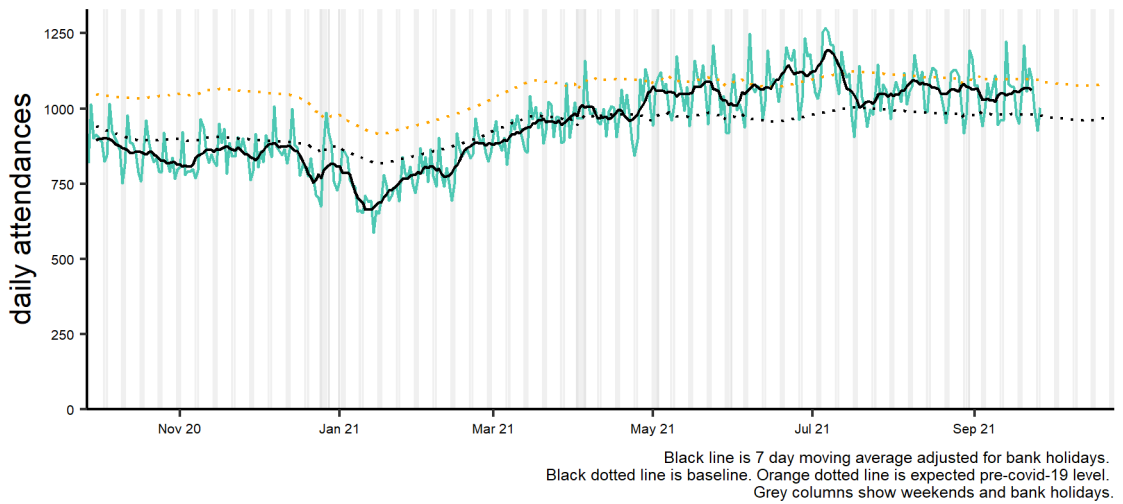
Asthma by PHE centre 27/09/2020 - 26/09/2021



10: Gastrointestinal.

Daily number of attendances recorded as gastrointestinal attendances across the EDSSS network.

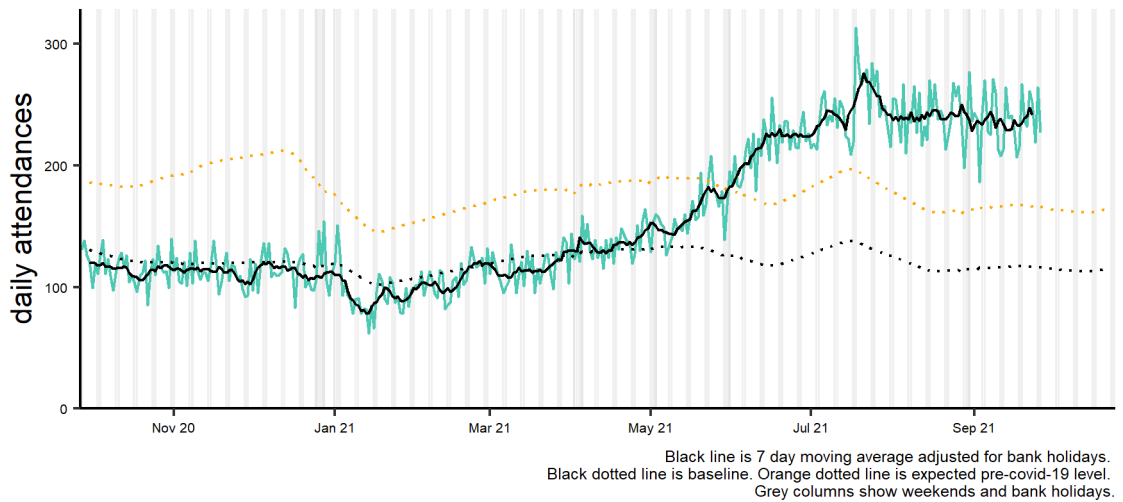
Gastrointestinal conditions 27/09/2020 - 26/09/2021



11: Gastroenteritis

Daily number of attendances recorded as gastroenteritis attendances across the EDSSS network.

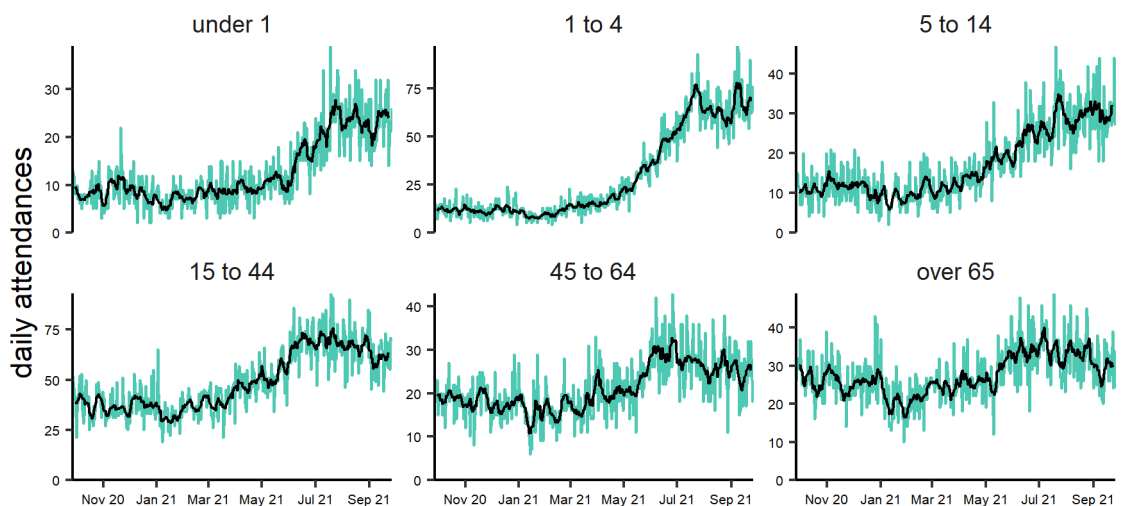
Gastroenteritis 27/09/2020 - 26/09/2021



11a: Gastroenteritis by age group.

Daily number and 7 day moving average of attendances within each age group.

Gastroenteritis by age group (years) 27/09/2020 - 26/09/2021

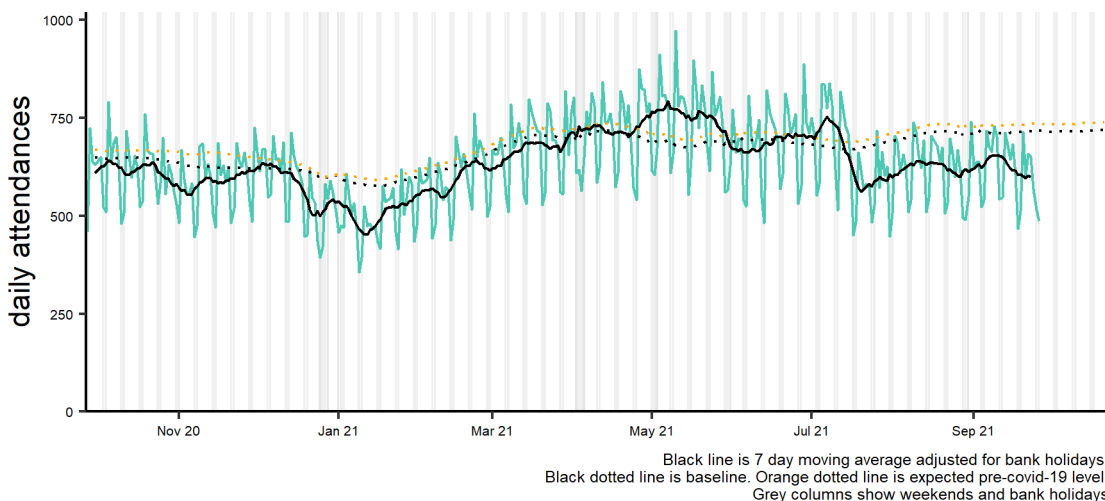


NOTE: SCALES MAY VARY IN EACH GRAPH TO ENABLE TREND COMPARISON. Black line is 7 day moving average adjusted for bank holidays.

12: Cardiac.

Daily number of attendances recorded as cardiac attendances across the EDSSS network.

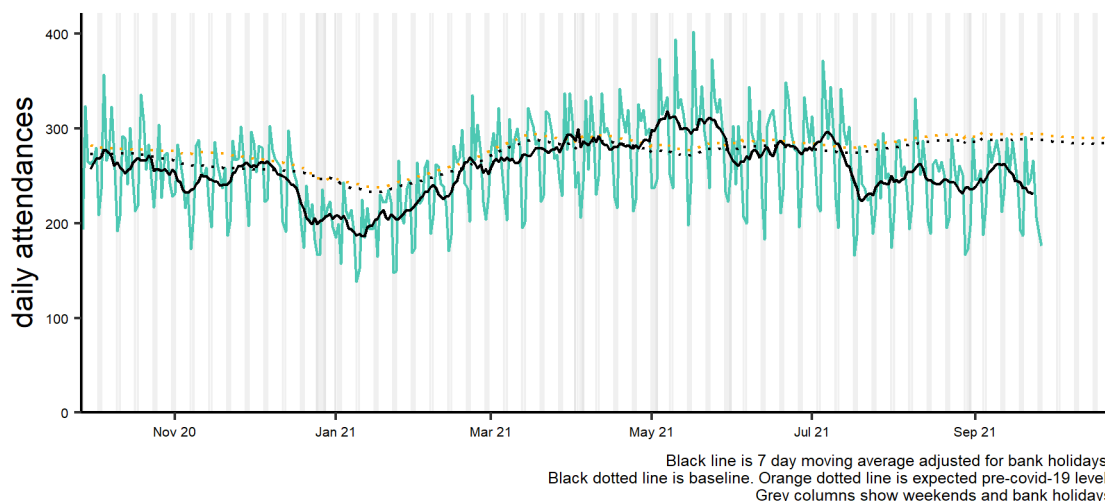
Cardiac conditions 27/09/2020 - 26/09/2021



13: Myocardial Ischaemia.

Daily number of attendances recorded as myocardial ischaemia attendances across the EDSSS network.

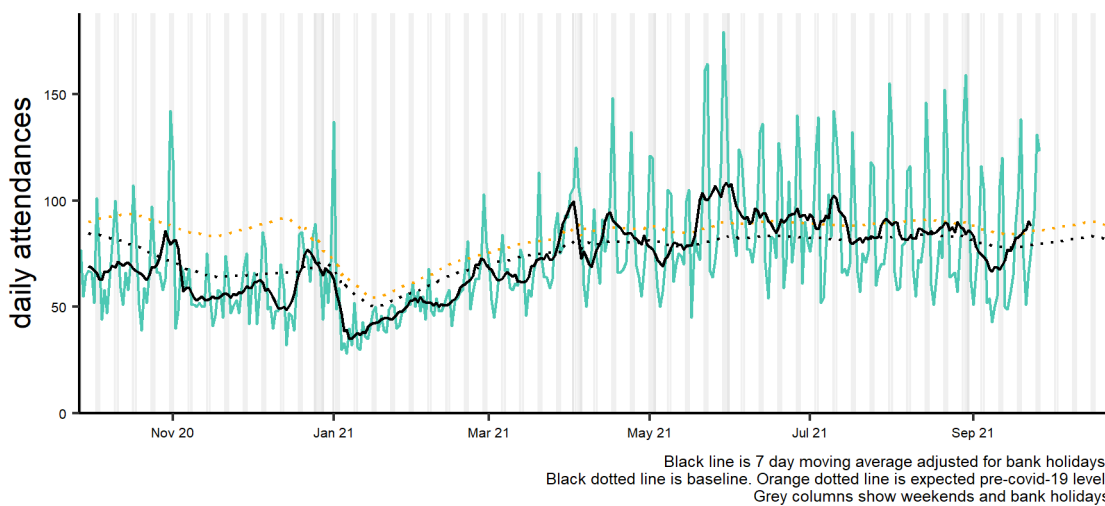
Myocardial ischaemia 27/09/2020 - 26/09/2021



14. Acute alcohol intoxication

Daily number of attendances recorded as acute alcohol intoxication across the EDSSS network.

Acute alcohol intoxication 27/09/2020 - 26/09/2021



Notes and caveats:

- ▶ **National EDSSS** began operating in April 2018. Following the introduction of the Emergency Care Data Set (ECDS) the: <https://www.england.nhs.uk/ourwork/tsd/ec-data-set/>
- ▶ EDSSS receives an automated daily transfer of anonymised ED data from NHS Digital
- ▶ **Not all EDs currently provide data through ECDS on a daily basis**
- ▶ EDs are eligible for inclusion in this report only where the EDSSS reporting criteria have been met during the surveillance week reported:
 - Data relates to attendances at a type 1 ED
 - Data for 7 of the 7 most recent days was received by PHE
 - Data for those days was received within 2 calendar days of the patient arrival
- ▶ Where an ED meets these criteria, all data received from that ED previous to the current surveillance week is included. EDs eligible for inclusion is likely to change each week, which will in turn affect the historical data inclusion
- ▶ Individual EDs will not be identified in syndromic surveillance reporting in these bulletins
- ▶ **All EDs report diagnoses to EDSSS using SnomedCT codes**
- ▶ Not all diagnoses are confirmed
- ▶ The syndromic indicators presented in this bulletin are based on the **primary diagnosis of each attendance** as reported by EDs using SnomedCT codes:
 - Respiratory:** All respiratory diseases and conditions (infectious and non infectious).
 - Asthma:** As indicated by title.
 - Acute Respiratory Infections (ARI):** All acute infectious respiratory diseases.
 - Bronchiolitis/ bronchitis:** As indicated by title (excluding 'chronic').
 - Influenza-like illness (ILI):** As indicated by title.
 - Pneumonia:** As indicated by title.
 - COVID-19-like:** Coronavirus* or Severe Acute Respiratory Syndrome (SARS).
 - *Please note: not all EDs have reported a coronavirus diagnosis code.
 - Gastrointestinal:** All gastrointestinal diseases and conditions (infectious and non infectious).
 - Gastroenteritis:** All infectious gastrointestinal diseases.
 - Cardiac:** All cardiac conditions.
 - Myocardial Ischaemia:** All ischaemic heart disease.
 - Acute alcohol intoxication:** As indicated by title (excluding 'chronic')
- ▶ **EDSSS indicators are likely to be an underestimation of number attendances as they are based on primary diagnosis only.**
- ▶ **The EDSSS should therefore be used to monitor trends in ED attendances and not numbers of 'cases'.**
- ▶ 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. Baselines take into account: the change from sentinel to National EDSSS and coverage (numbers of attendances and the individual type 1 EDs included).
- ▶ - **Sentinel EDSSS** ran from July 2010 to March 2018, collected data through a bespoke, voluntary network of EDs across England and Northern Ireland.

Acknowledgements:

We are grateful to the clinicians in each ED and other staff within each Trust for their continued involvement in the EDSSS.

We thank the Royal College of Emergency Medicine, NHS Digital and NHS England for their support in the development of national EDSSS, using anonymised data collection from ECDS.

Emergency Department Syndromic Surveillance System Bulletin.

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