



UK Health
Security
Agency

GP in Hours Syndromic Surveillance System Bulletin (England)

2022 Week 30

Key messages

Data reported to: 31 July 2022

During week 30 there were further decreases in GP in-hours 'COVID-19-like' consultations. GP consultations for diarrhoea increased slightly, mainly in adults aged 65 years and older. Scarlet fever and chickenpox consultations both continued to decrease in week 30 and are at seasonally expected levels.

Syndromic indicators at a glance

Table 1: The current trend (based on previous weeks, not only the current week) and the level (compared to the expected baseline), of each indicator included in this bulletin.

| Indicator | Trend ¹ | Level |
|--|--------------------|---------------------|
| COVID-19-like (Figure 1) | Decreasing | No baseline |
| Upper respiratory tract infections (Figure 2) | Decreasing | Below baseline |
| Influenza-like illness (Figure 3) | No trend | Below baseline |
| Pharyngitis or scarlet fever (Figure 4) | Decreasing | Similar to baseline |
| Scarlet fever (Figure 5) | Decreasing | Similar to baseline |
| Lower respiratory tract infections (Figure 6) | No trend | Below baseline |
| Pneumonia (Figure 7) | No trend | Above baseline |
| Acute presenting asthma (Figure 8) | Decreasing | Below baseline |
| Gastroenteritis (Figure 9) | No trend | Similar to baseline |
| Diarrhoea (Figure 10) | Increasing | Above baseline |
| Vomiting (Figure 11) | Increasing | Above baseline |
| Measles (Figure 12) | No trend | Similar to baseline |
| Mumps (Figure 13) | No trend | Below baseline |
| Whooping cough (Figure 14) | No trend | Below baseline |
| Cellulitis (Figure 15) | Decreasing | Below baseline |
| Chickenpox (Figure 16) | Decreasing | Similar to baseline |
| Herpes zoster (Figure 17) | No trend | Below baseline |
| Impetigo (Figure 18) | Decreasing | Below baseline |
| Conjunctivitis (Figure 19) | No trend | Below baseline |
| Allergic rhinitis (Figure 20) | Decreasing | Below baseline |
| Heat or sunstroke (Figure 21) | Decreasing | Below baseline |
| Insect bites (Figure 22) | Decreasing | Below baseline |

¹ trend reports on the trend seen over most recent and earlier weeks

System coverage

Table 2: The number of GP practices, and number of registered patients included in surveillance during the most recent week.

| Year | Week | GP practices reporting ¹ | Registered patients ¹ |
|------|------|-------------------------------------|----------------------------------|
| 2022 | 30 | 672 | 6.9 million |

¹ based on the average number of practices and registered patient population in the reporting week (Monday-Friday).

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About this syndromic surveillance system

This bulletin presents data from the UK Health Security Agency (UKHSA) GP in hours Syndromic Surveillance System.

Syndromic surveillance can be used to:

- assess current trends
- assess current trends and levels compared to historical baselines
- compare trends between age groups/areas

Syndromic surveillance should not be used to:

- estimate total burden or number of 'cases' of a condition (see **Notes and caveats**)
- compare levels between age groups/areas

Fully anonymised, daily GP in hours data are analysed and reported here, to identify and describe trends for a variety of syndromic indicators:

- syndromic indicators include groupings such as upper respiratory tract infections, acute presenting asthma and gastroenteritis
- syndromic indicators are based on:
 - diagnoses recorded during GP in hours patient consultations
 - diagnoses are based on signs/symptoms and may not be laboratory confirmed
- **Key messages** describes any notable trends nationally (England), by age group and/or by geographical area (based on UKHSA Regions)
- the full list of syndromic indicators reported here, along with their current level and trend, are summarised in **Table 1**
- charts are provided for each syndromic indicator, on a national basis, by age group and by geographical area (UKHSA Region). Each chart includes a year of data with:
 - 7-day moving averages (adjusted for weekends and bank holidays) to aid in the identification of trend
 - statistical baselines (where available) to aid in the assessment of level compared to historical expectations

For further information please see the **Notes and caveats** section.

Previous weekly bulletins from this system are available [here](#).

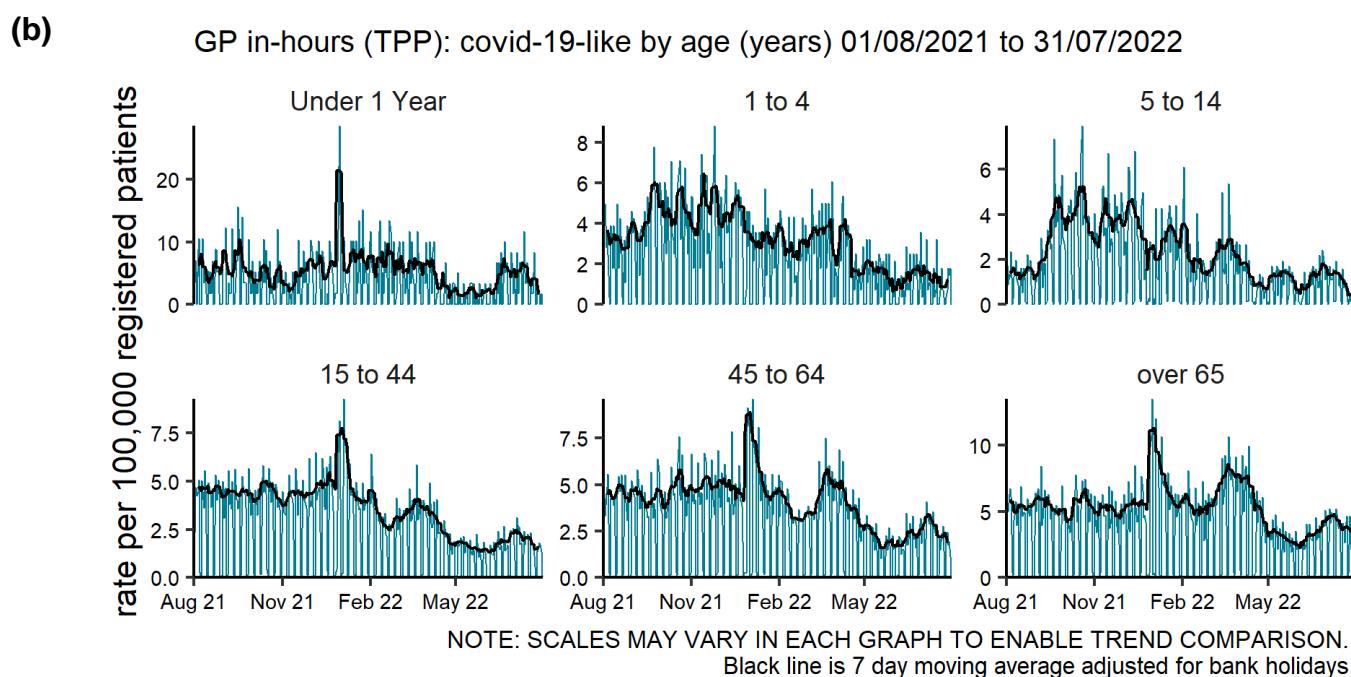
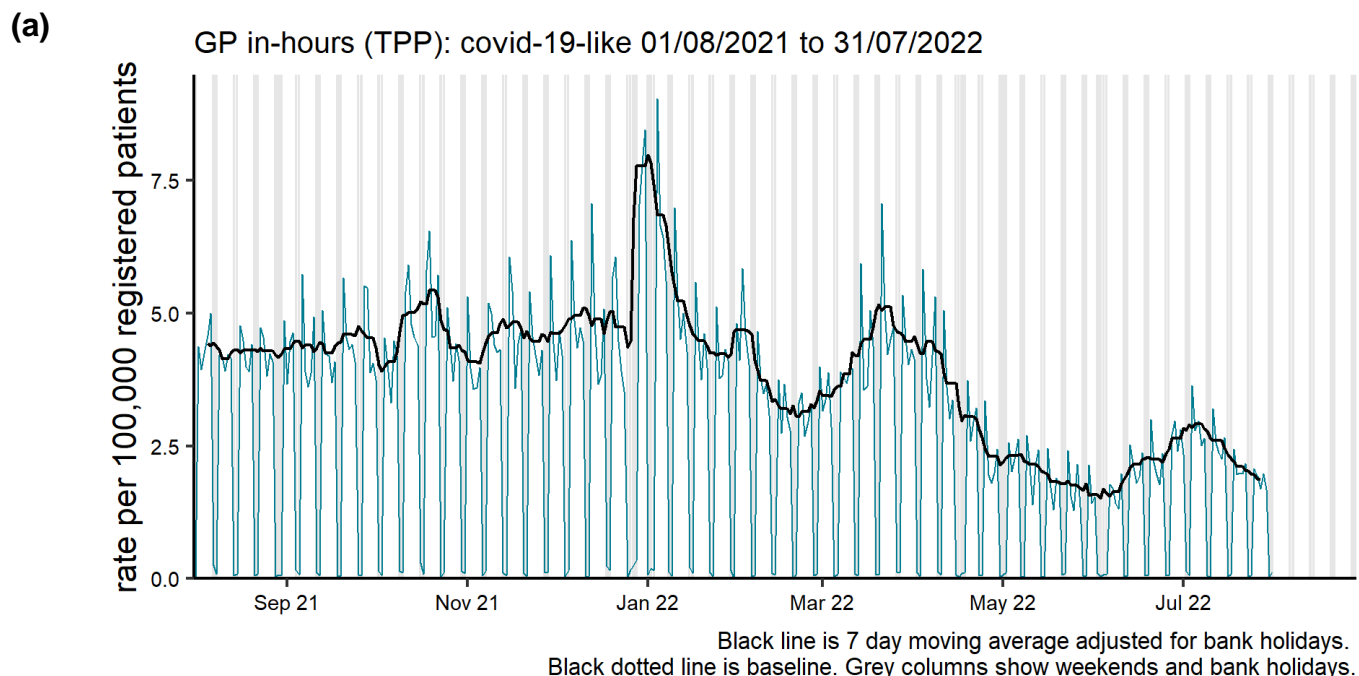
Data quality issues of note this week

No issues identified.

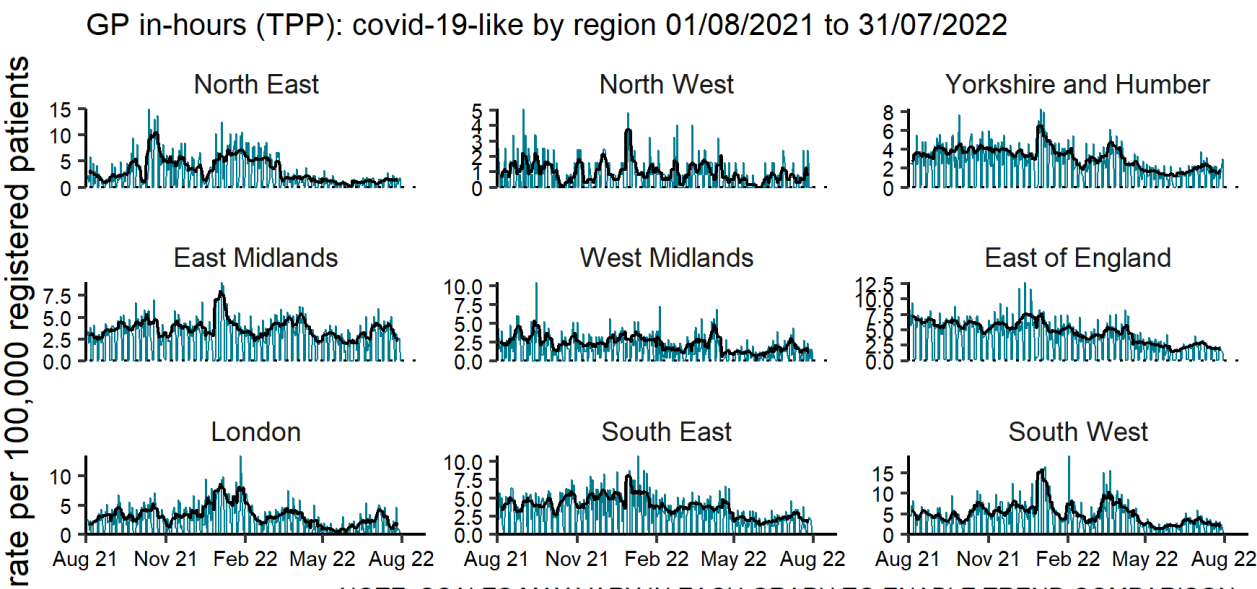
Respiratory conditions

COVID-19-like

Figure 1: Daily incidence rate per 100,000 population (and 7-day moving average adjusted for bank holidays) for COVID-19-like GP in hours consultations, England (a) nationally, (b) by age and (c) by UKHSA Region.

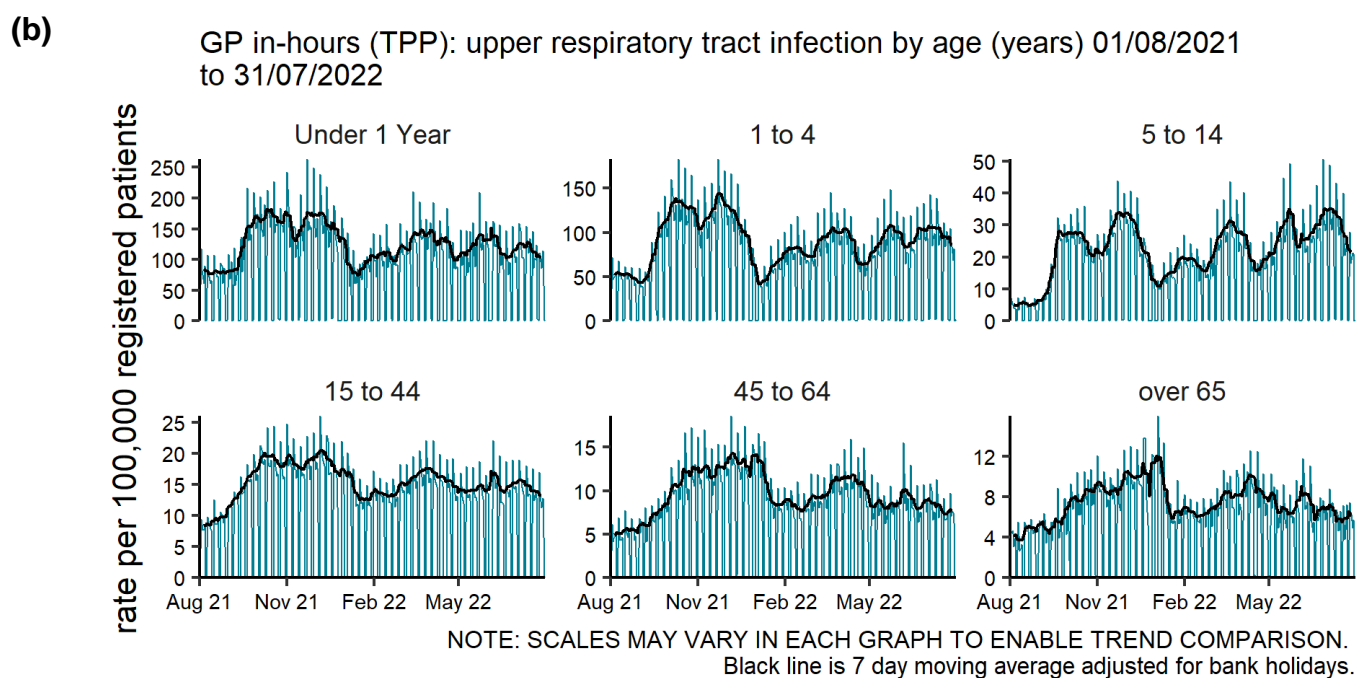
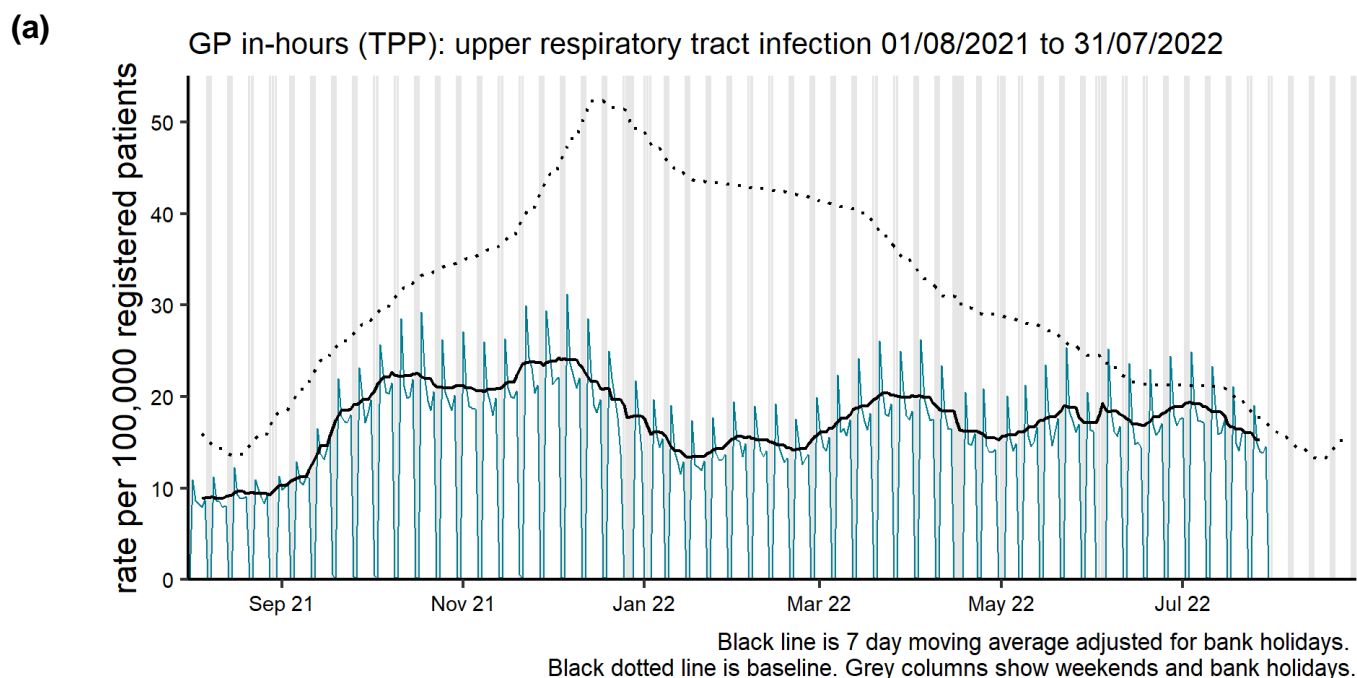


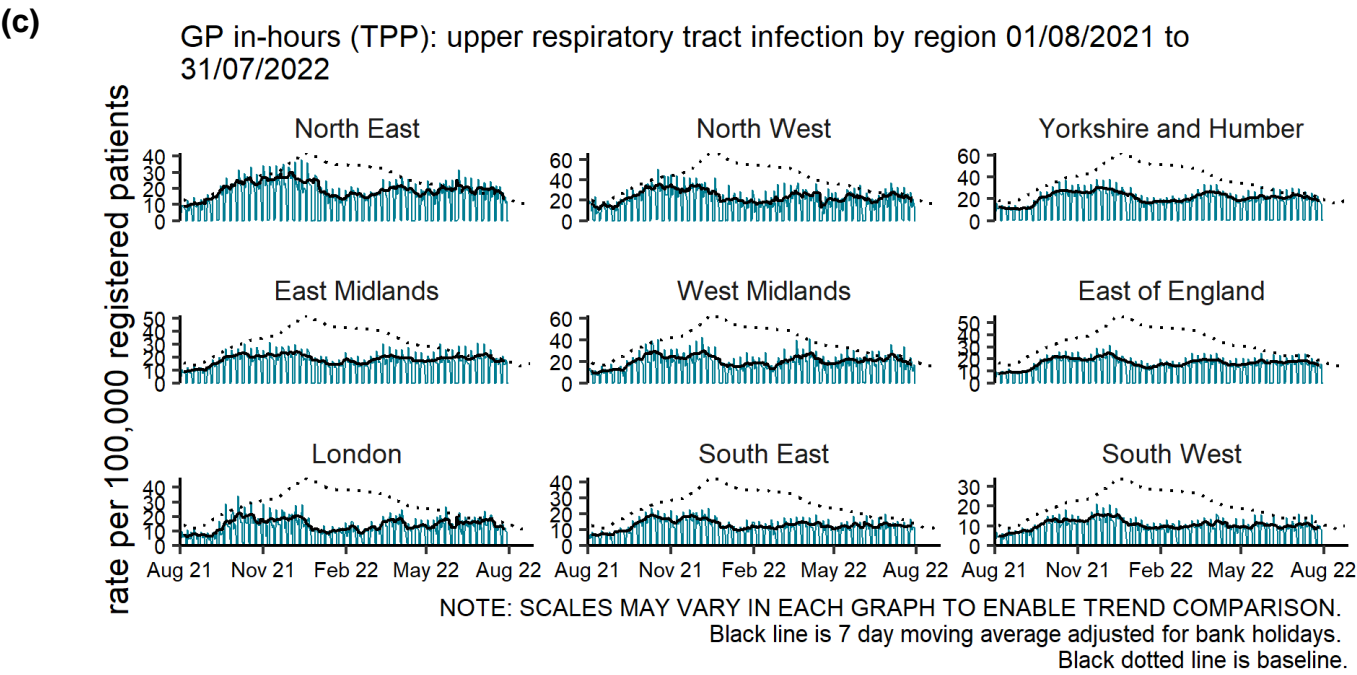
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Upper respiratory tract infections

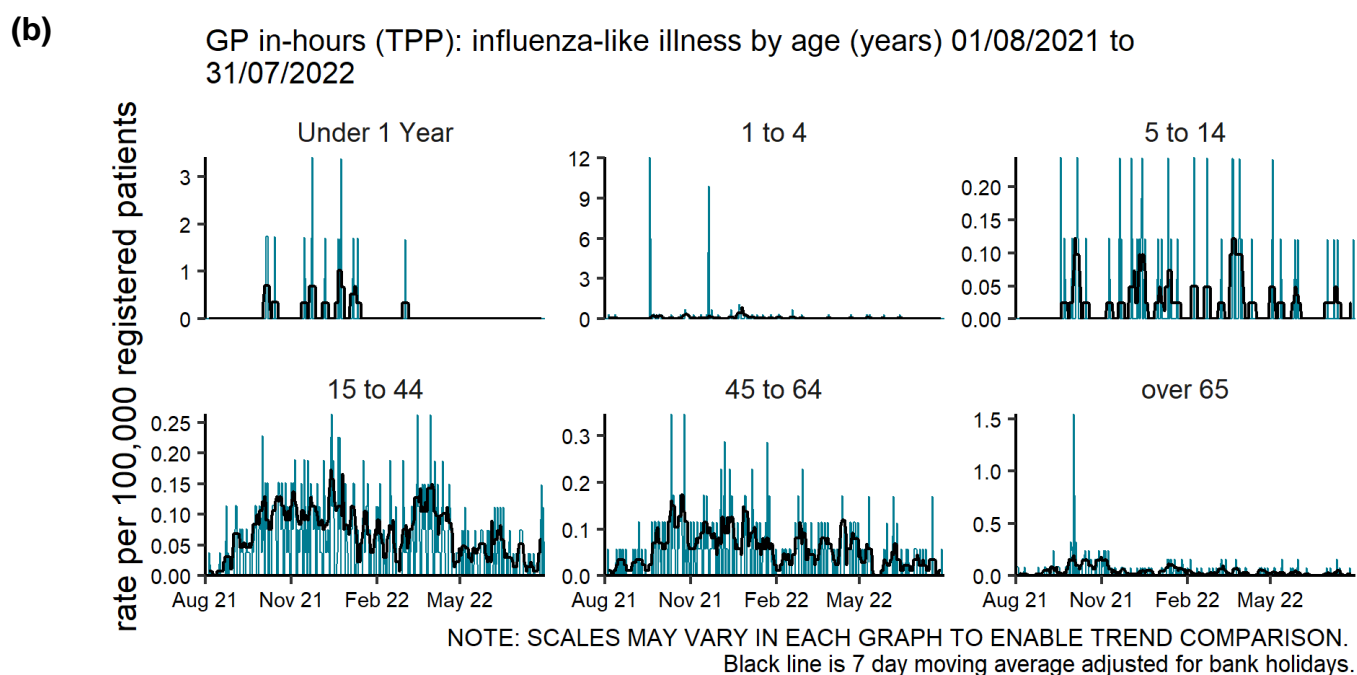
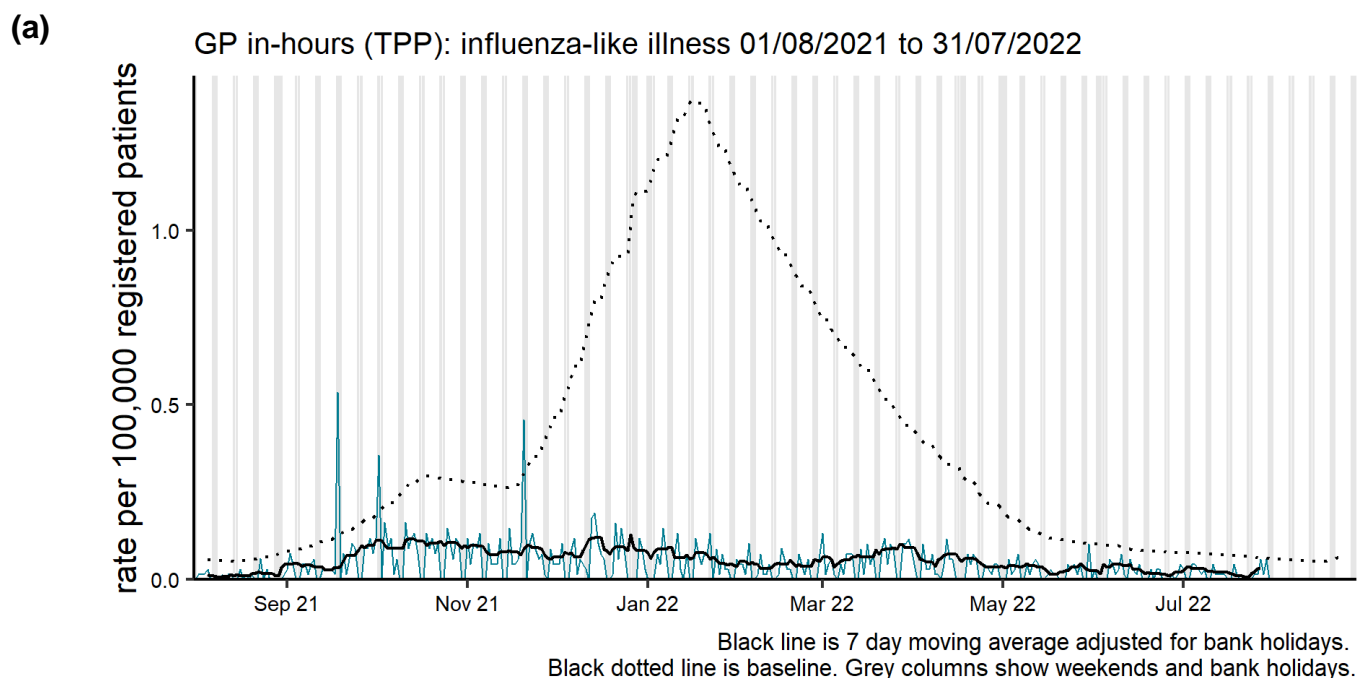
Figure 2: Daily incidence rate per 100,000 population (and 7-day moving average adjusted for bank holidays) for upper respiratory tract infections GP in hours consultations, England (a) nationally, (b) by age and (c) by UKHSA Region.





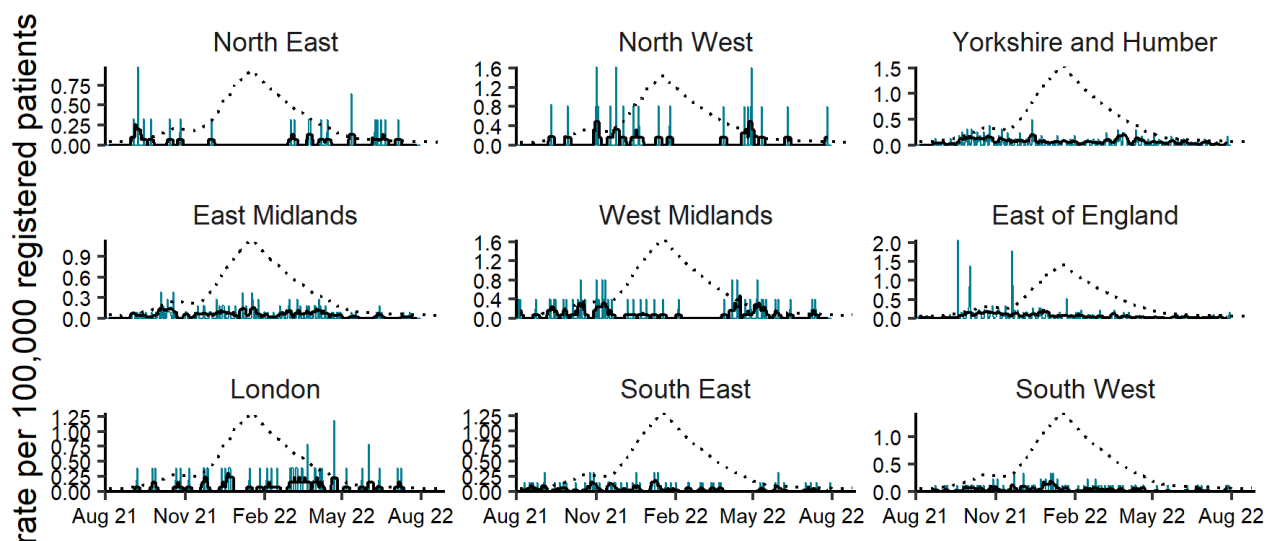
Influenza-like illness

Figure 3: Daily incidence rate per 100,000 population (and 7-day moving average adjusted for bank holidays) for influenza-like illness GP in hours consultations, England (a) nationally, (b) by age and (c) by UKHSA Region.



(c)

GP in-hours (TPP): influenza-like illness by region 01/08/2021 to 31/07/2022



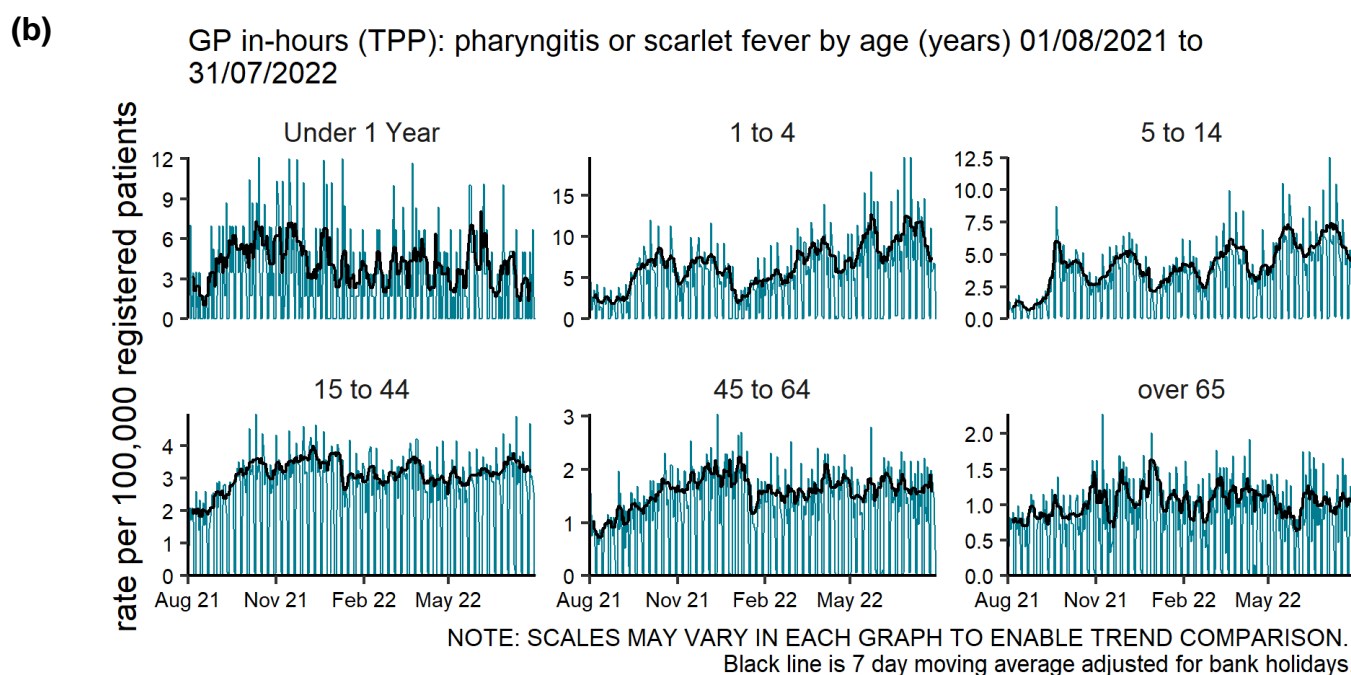
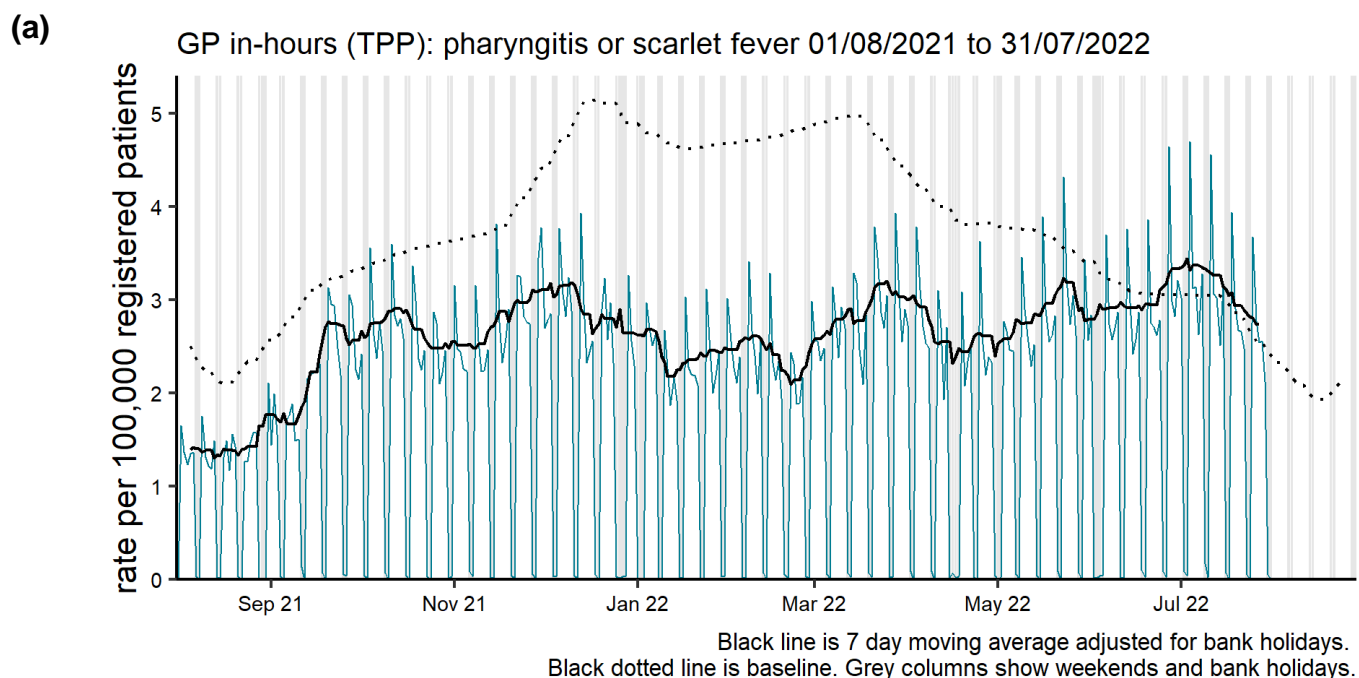
NOTE: SCALES MAY VARY IN EACH GRAPH TO ENABLE TREND COMPARISON.

Black line is 7 day moving average adjusted for bank holidays.

Black dotted line is baseline.

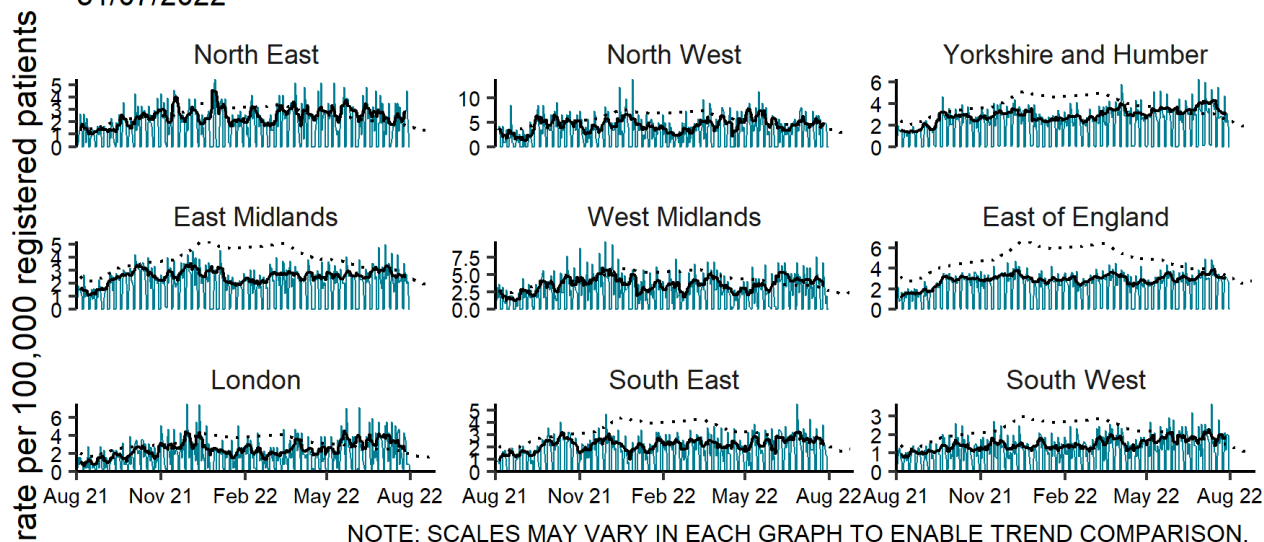
Pharyngitis or scarlet fever

Figure 4: Daily incidence rate per 100,000 population (and 7-day moving average adjusted for bank holidays) for pharyngitis or scarlet fever GP in hours consultations, England (a) nationally, (b) by age and (c) by UKHSA Region.



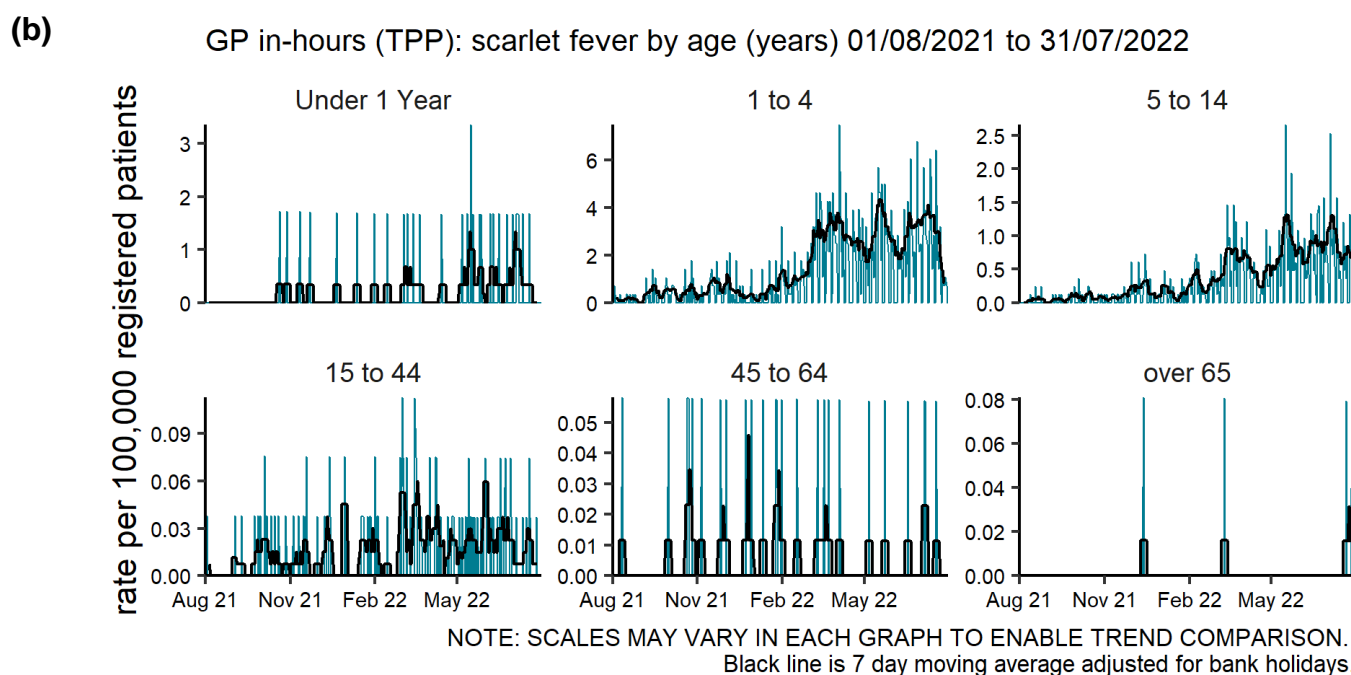
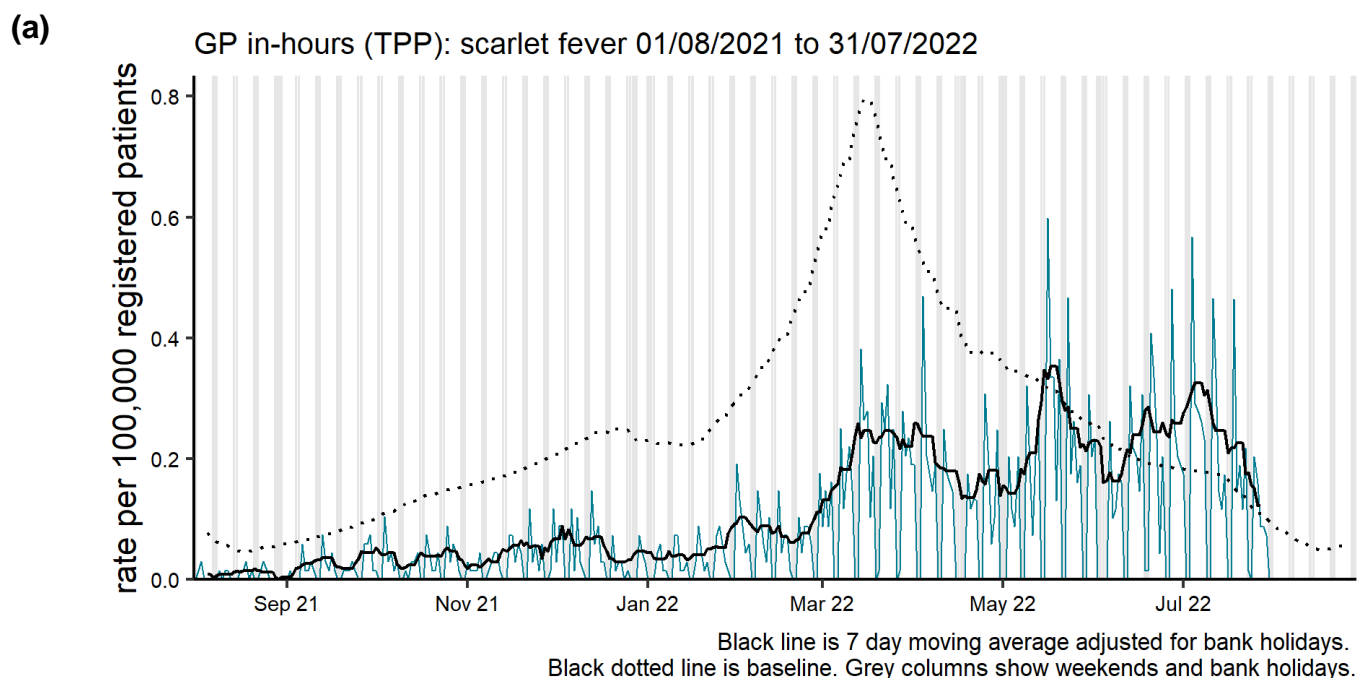
(c)

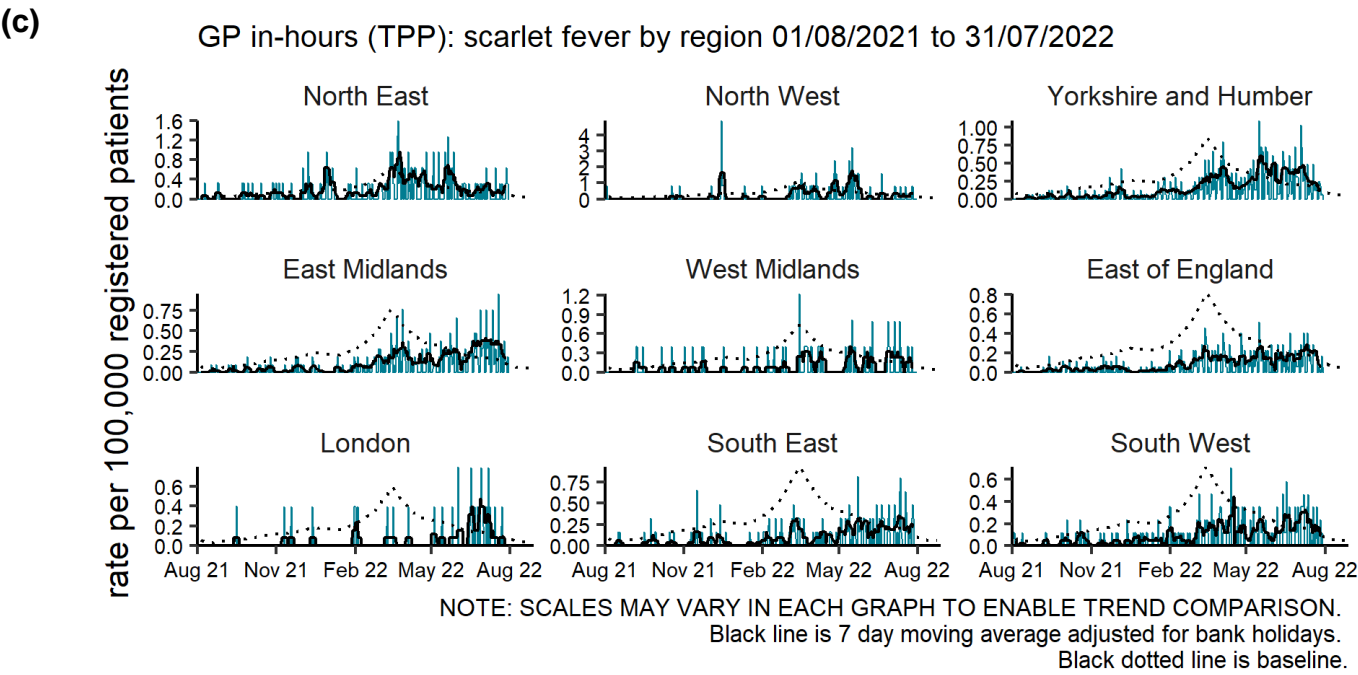
GP in-hours (TPP): pharyngitis or scarlet fever by region 01/08/2021 to 31/07/2022



Scarlet fever

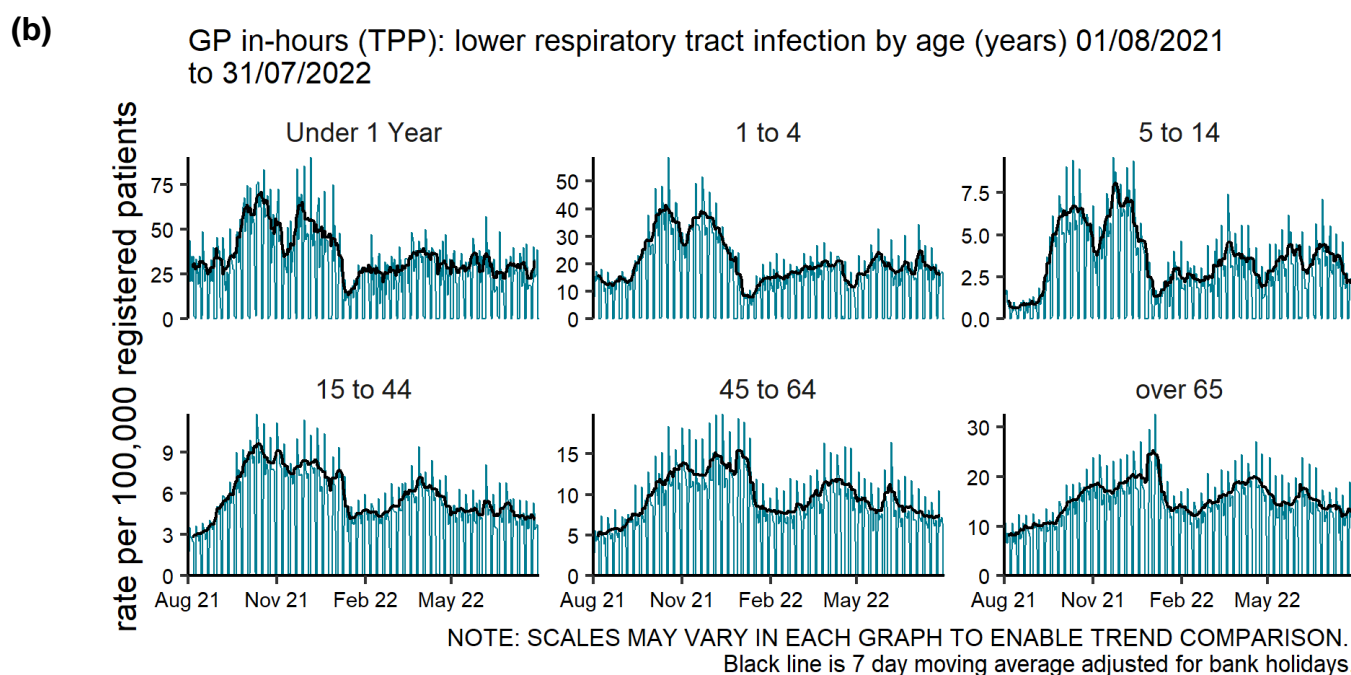
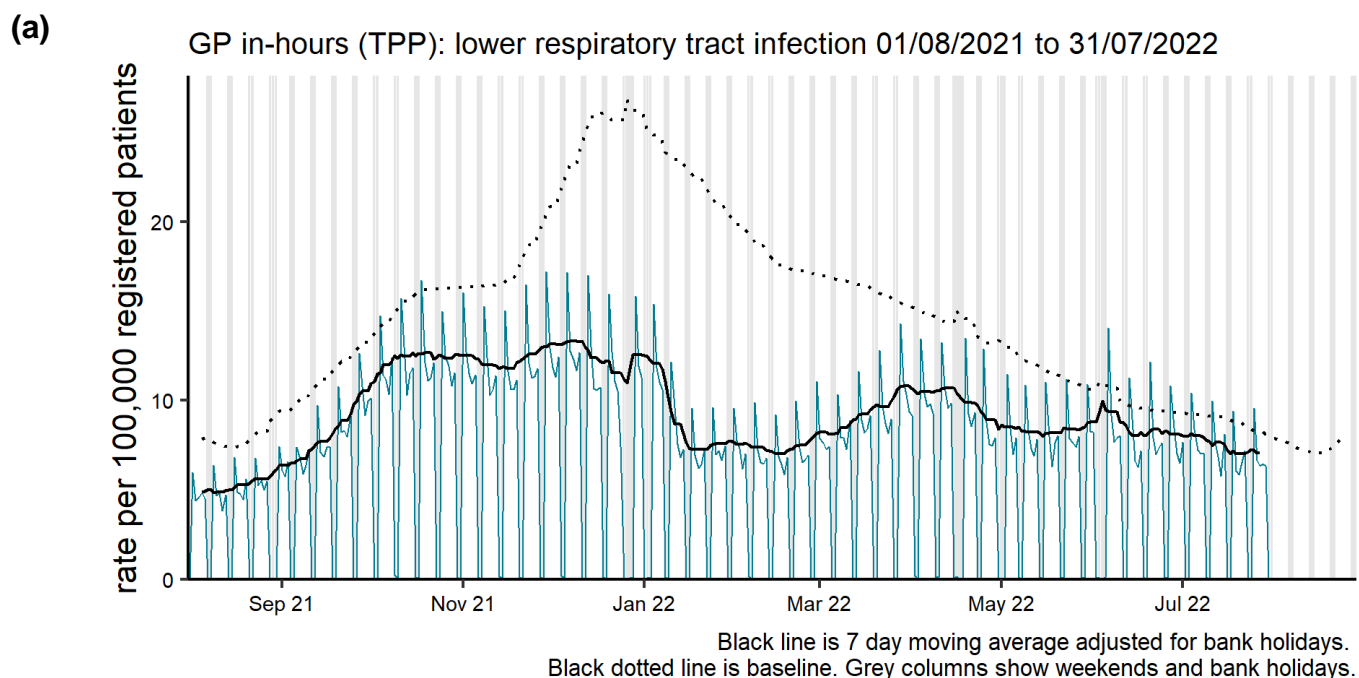
Figure 5: Daily incidence rate per 100,000 population (and 7-day moving average adjusted for bank holidays) for scarlet fever GP in hours consultations, England (a) nationally, (b) by age and (c) by UKHSA Region.

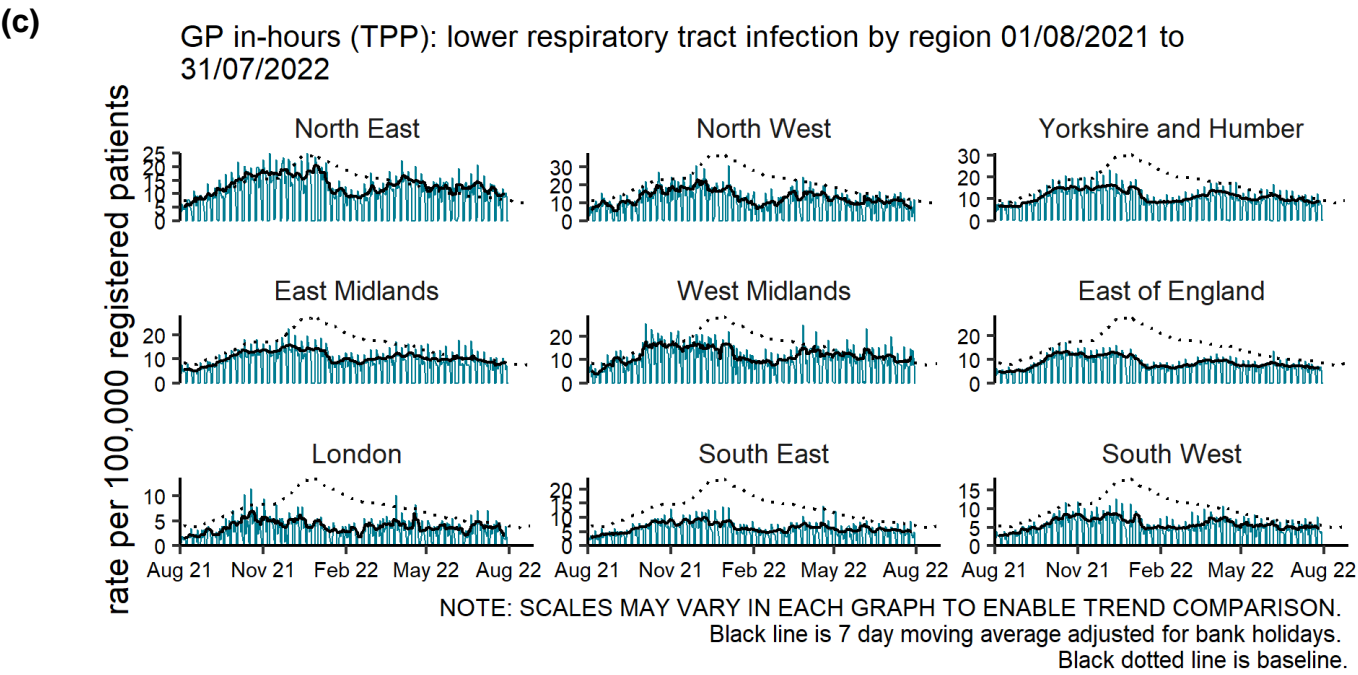




Lower respiratory tract infections

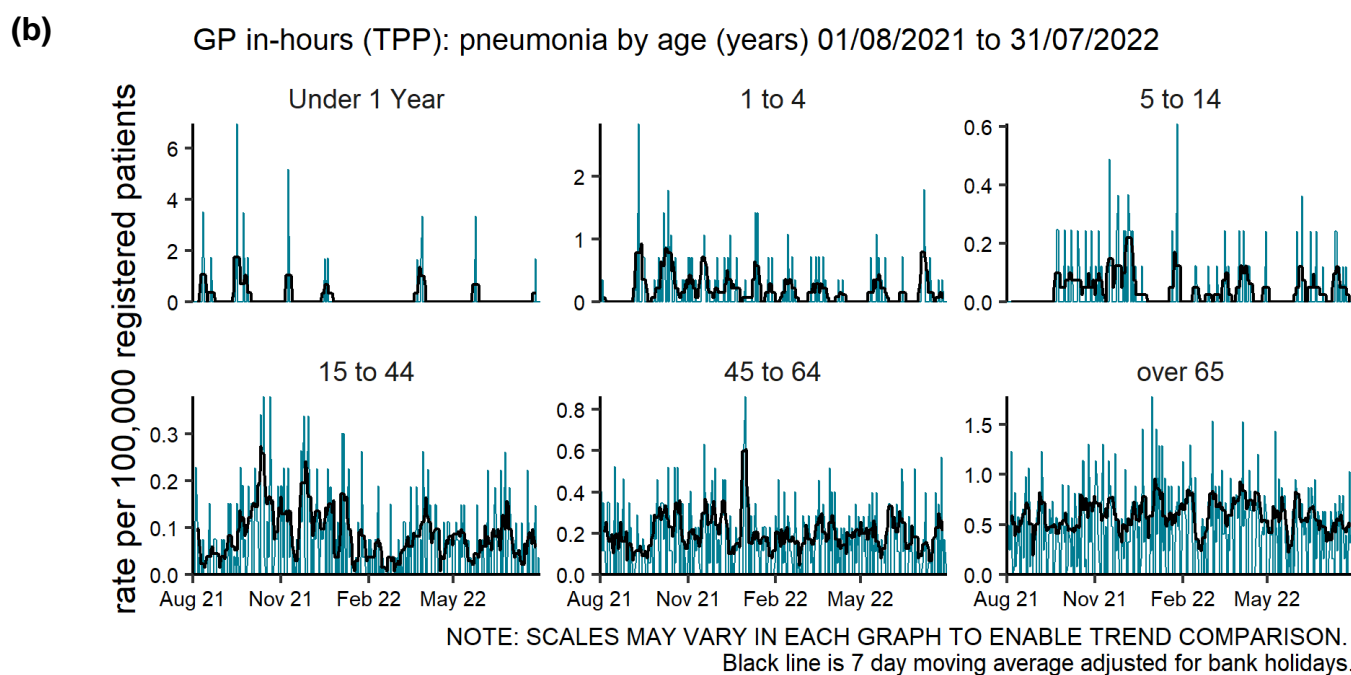
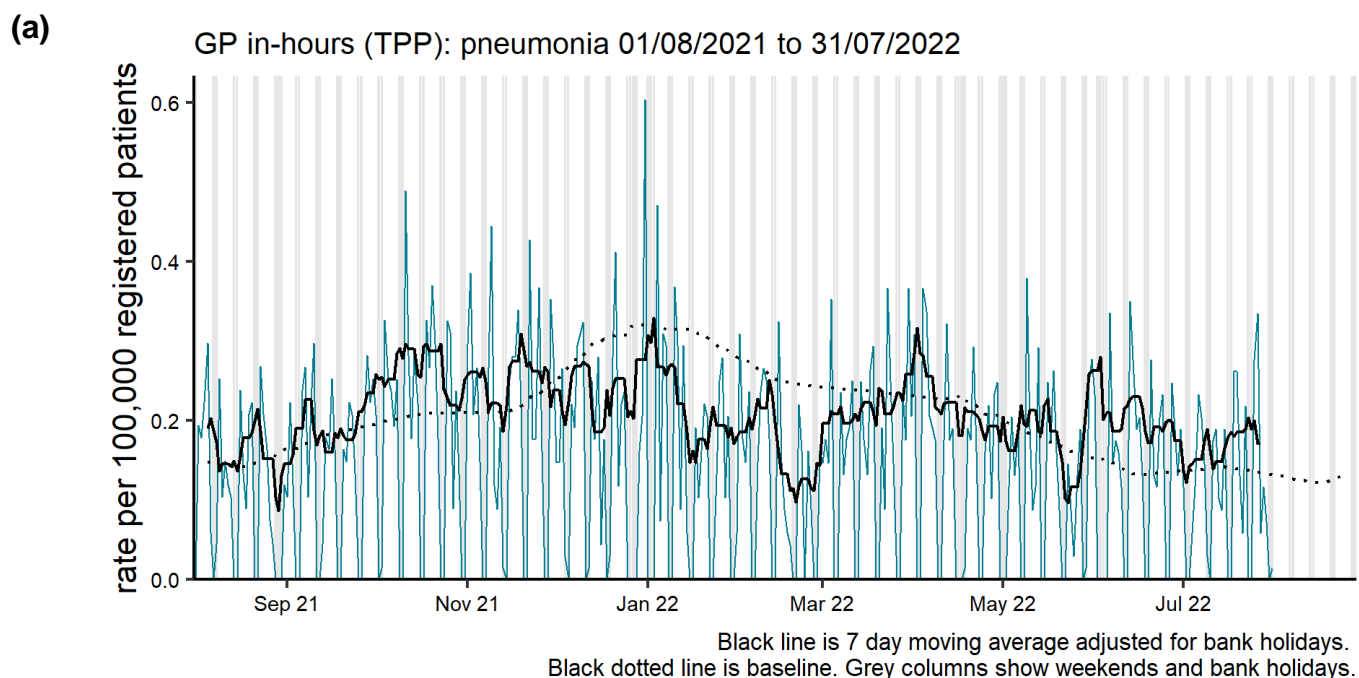
Figure 6: Daily incidence rate per 100,000 population (and 7-day moving average adjusted for bank holidays) for lower respiratory tract infections GP in hours consultations, England (a) nationally, (b) by age and (c) by UKHSA Region.



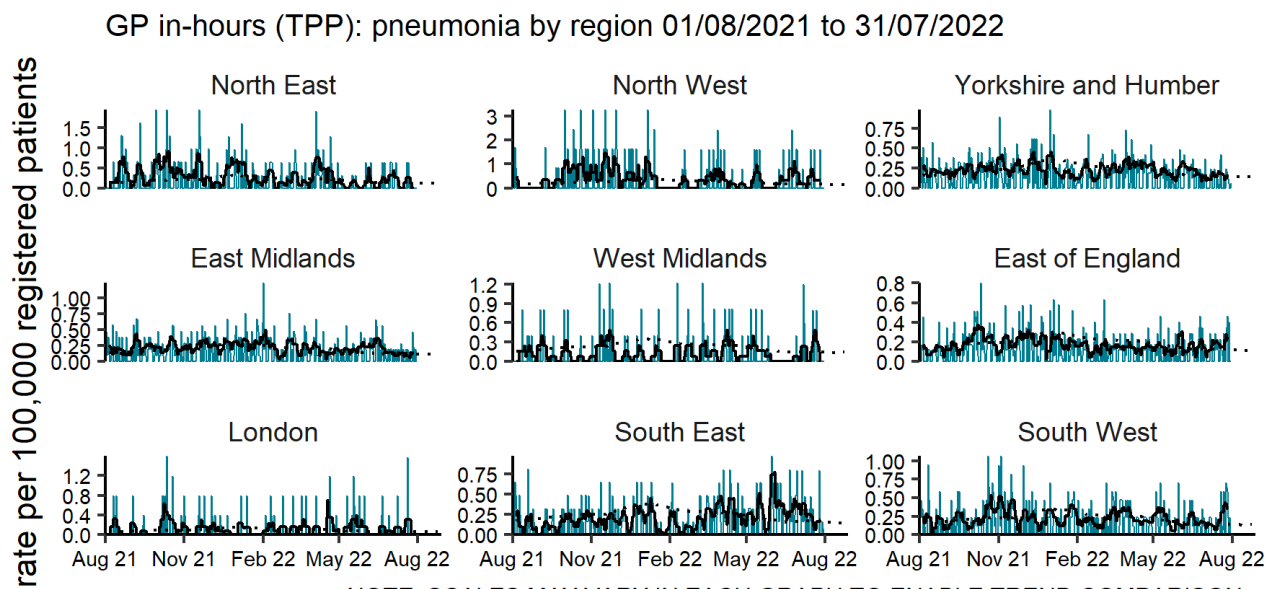


Pneumonia

Figure 7: Daily incidence rate per 100,000 population (and 7-day moving average adjusted for bank holidays) for pneumonia GP in hours consultations, England (a) nationally, (b) by age and (c) by UKHSA Region.



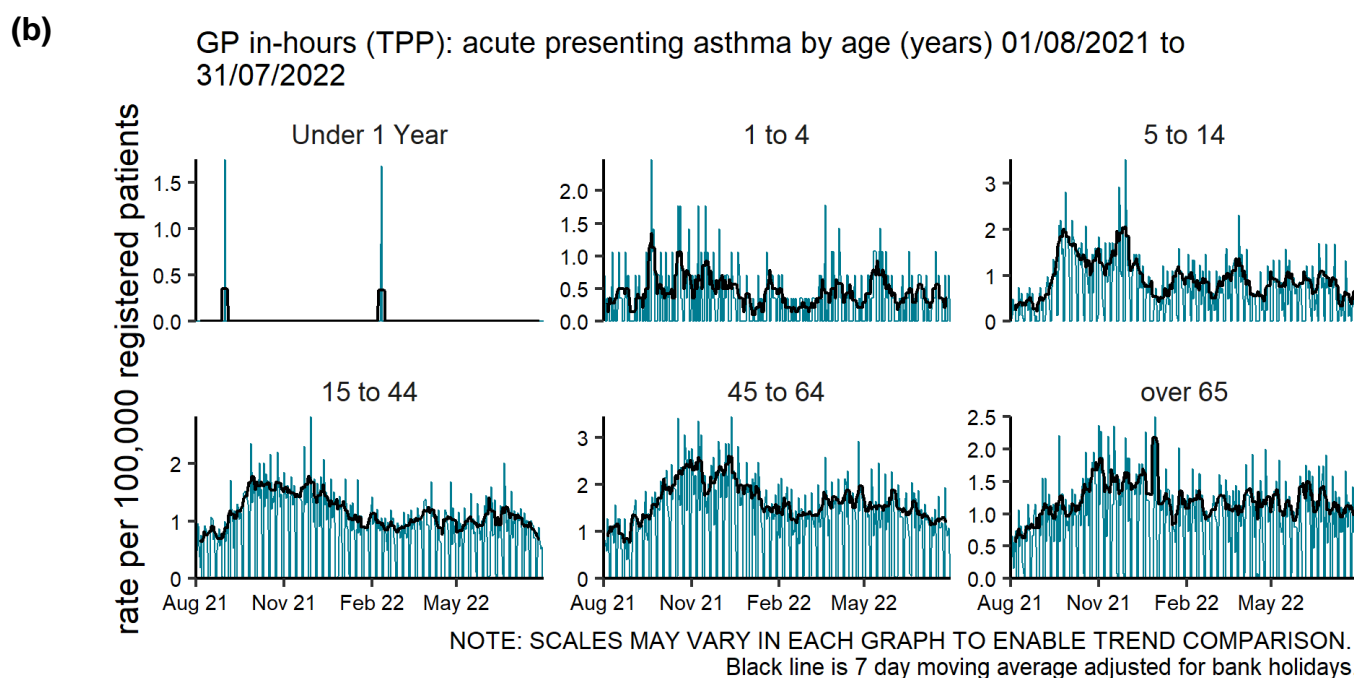
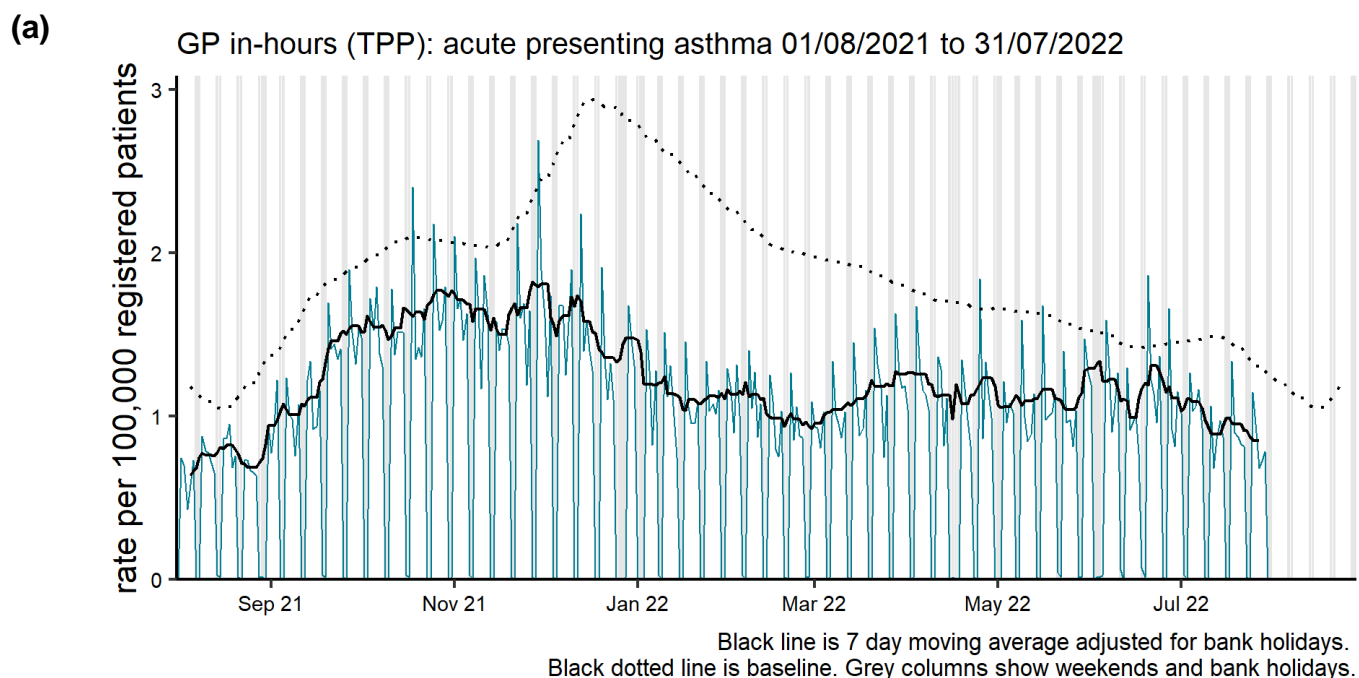
(c)

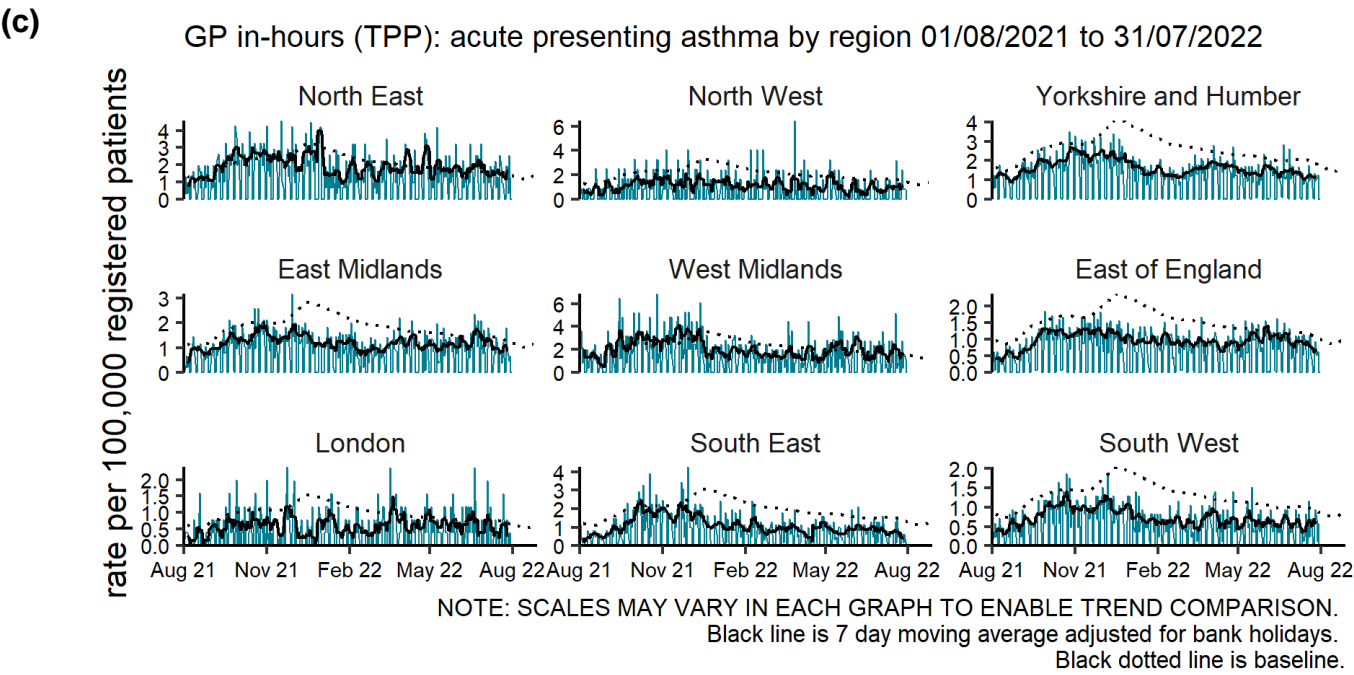


NOTE: SCALES MAY VARY IN EACH GRAPH TO ENABLE TREND COMPARISON.
Black line is 7 day moving average adjusted for bank holidays.
Black dotted line is baseline.

Acute presenting asthma

Figure 8: Daily incidence rate per 100,000 population (and 7-day moving average adjusted for bank holidays) for acute presenting asthma GP in hours consultations, England (a) nationally, (b) by age and (c) by UKHSA Region.

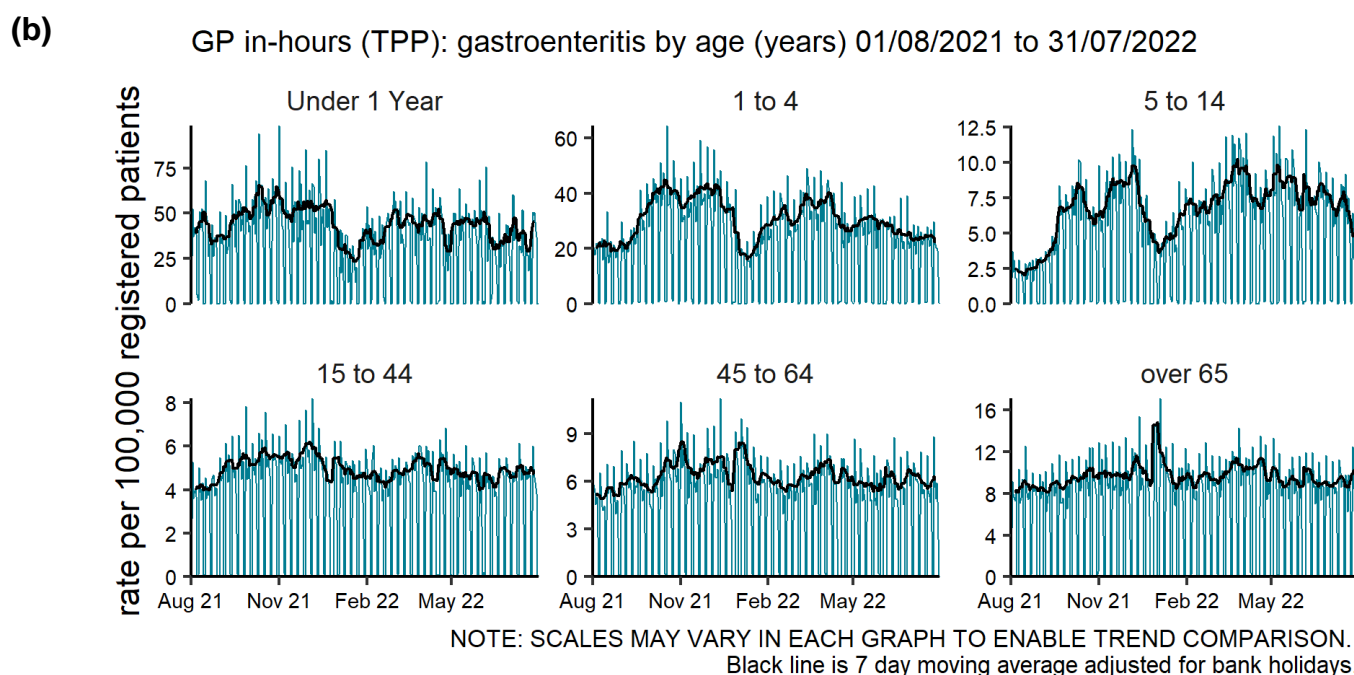
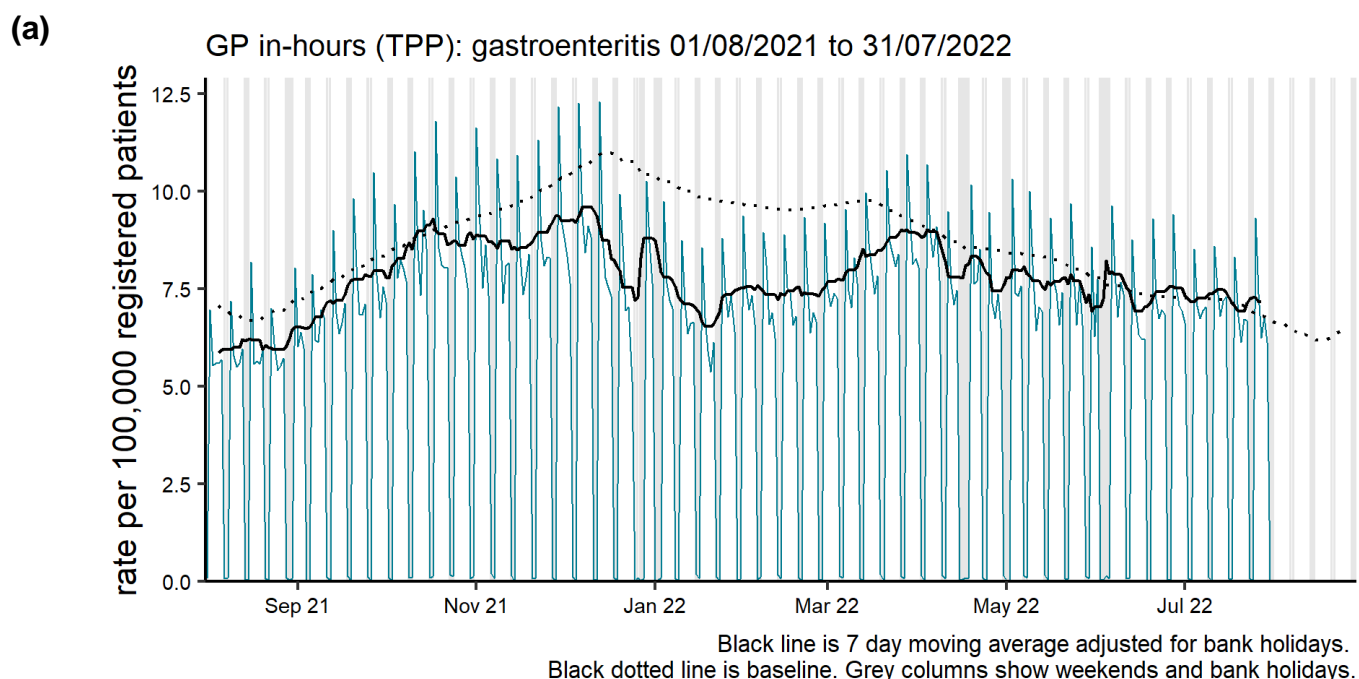




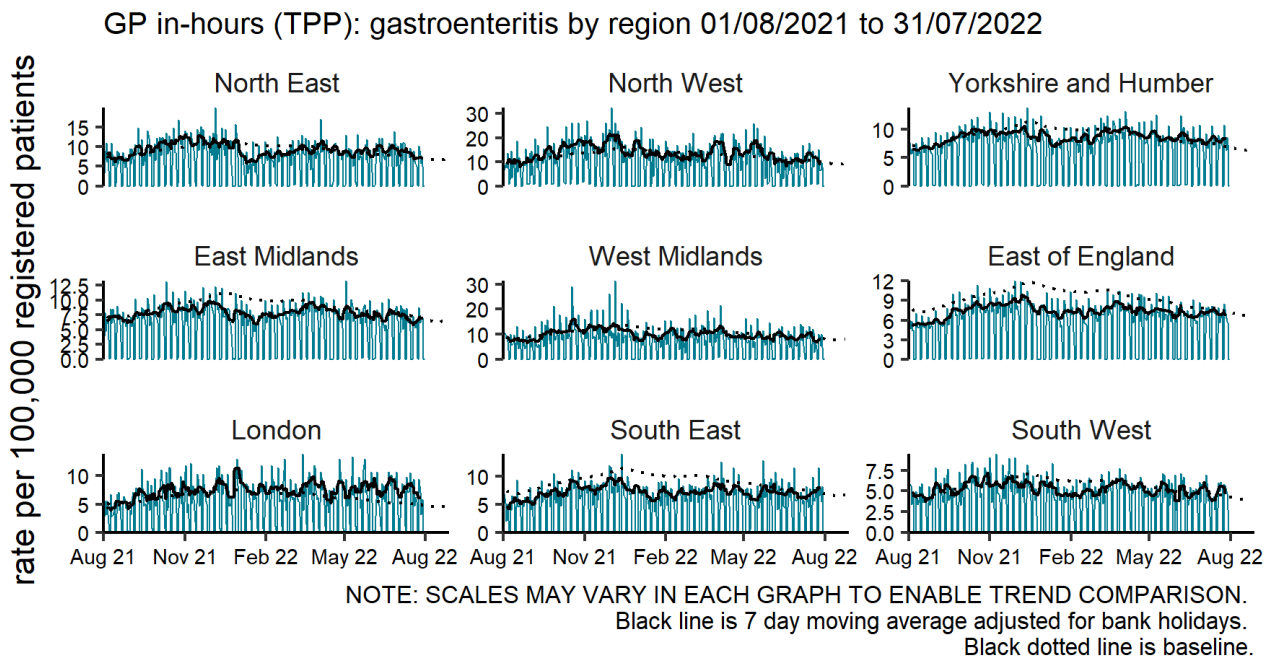
Gastrointestinal conditions

Gastroenteritis

Figure 9: Daily incidence rate per 100,000 population (and 7-day moving average adjusted for bank holidays) for gastroenteritis GP in hours consultations, England (a) nationally, (b) by age and (c) by UKHSA Region.

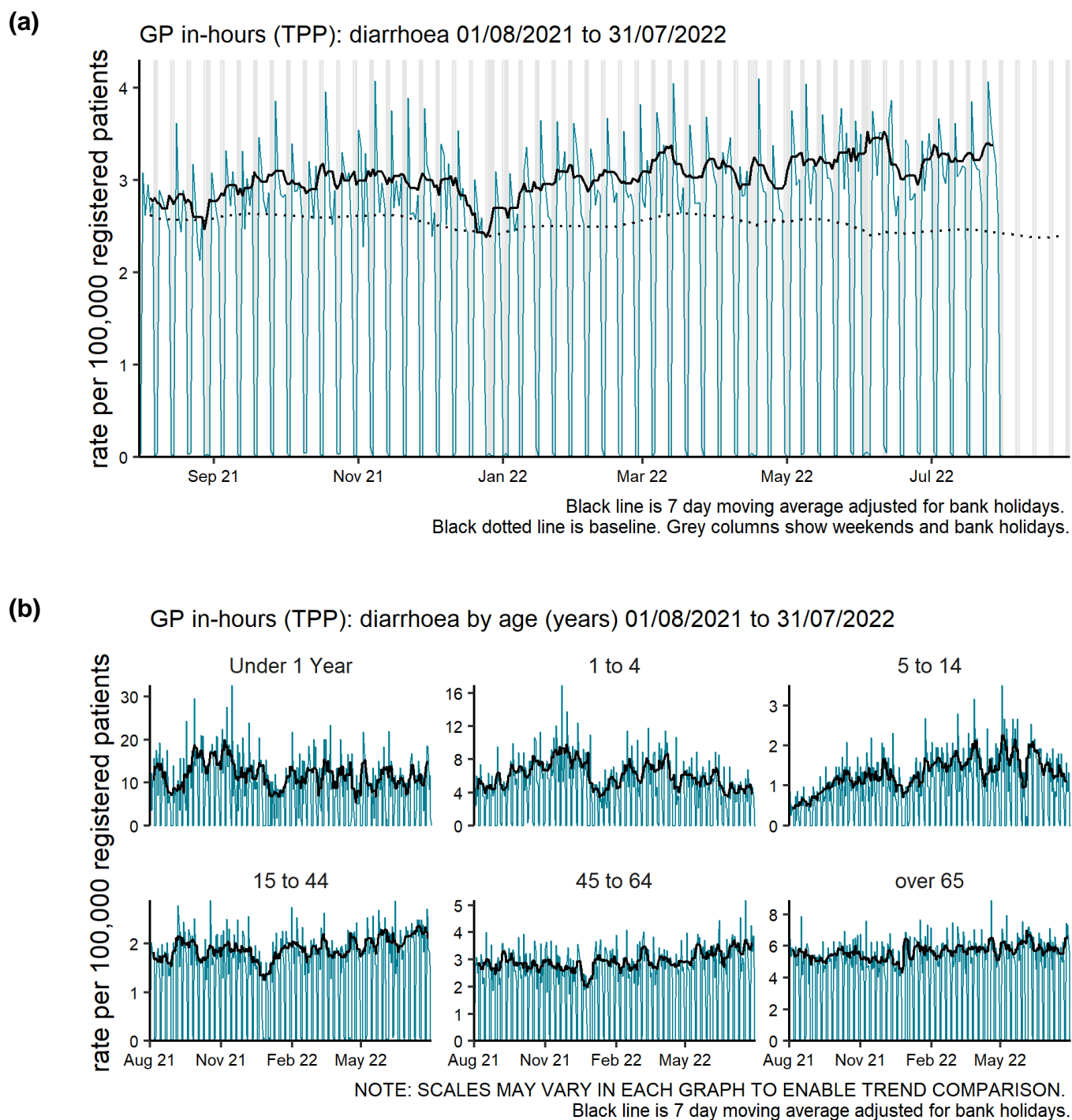


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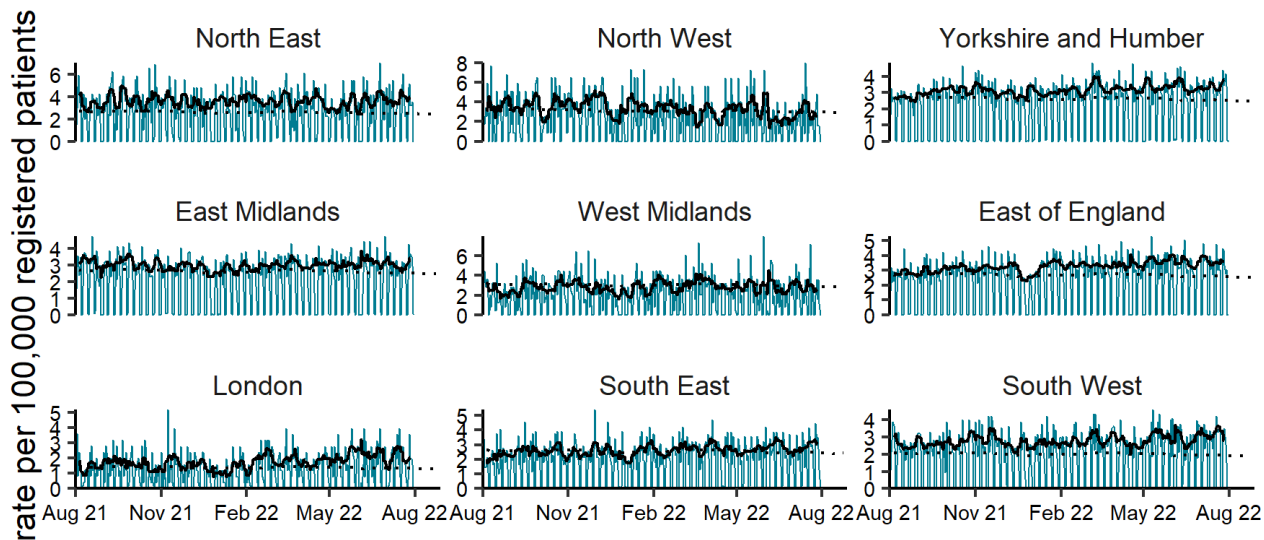
Diarrhoea

Figure 10: Daily incidence rate per 100,000 population (and 7-day moving average adjusted for bank holidays) for diarrhoea GP in hours consultations, England (a) nationally, (b) by age and (c) by UKHSA Region.



(c)

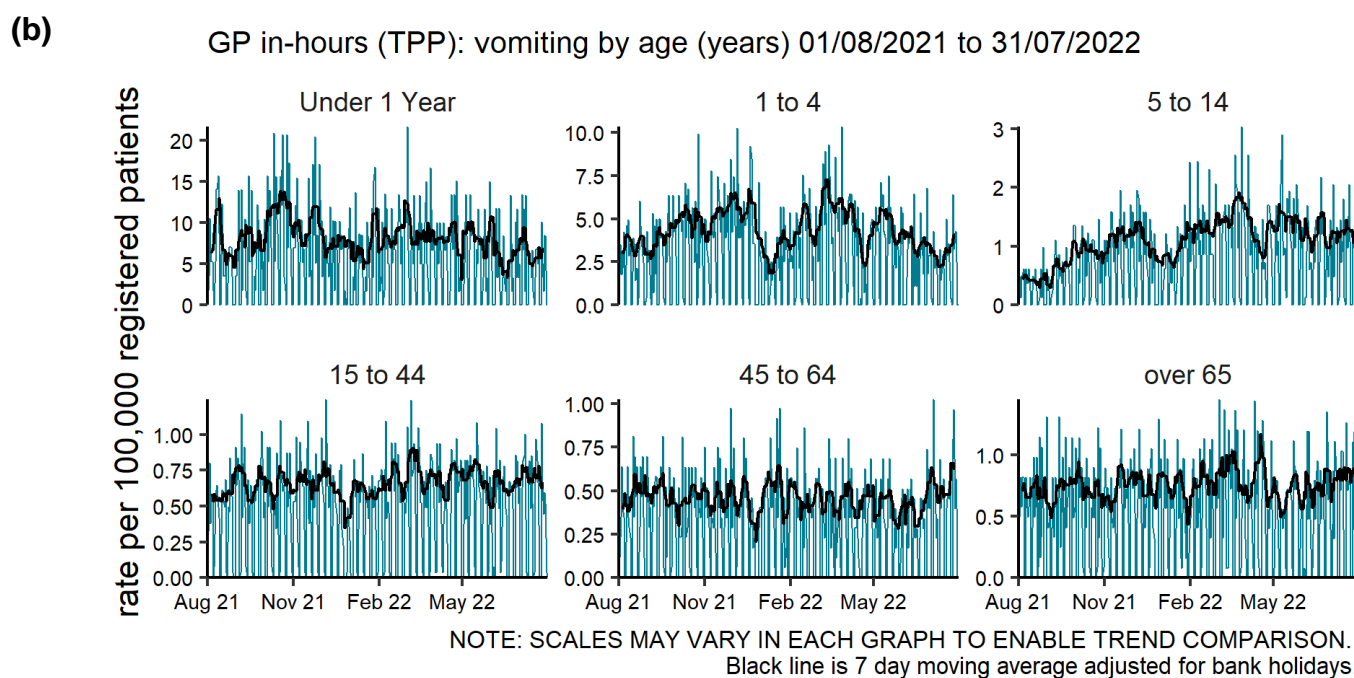
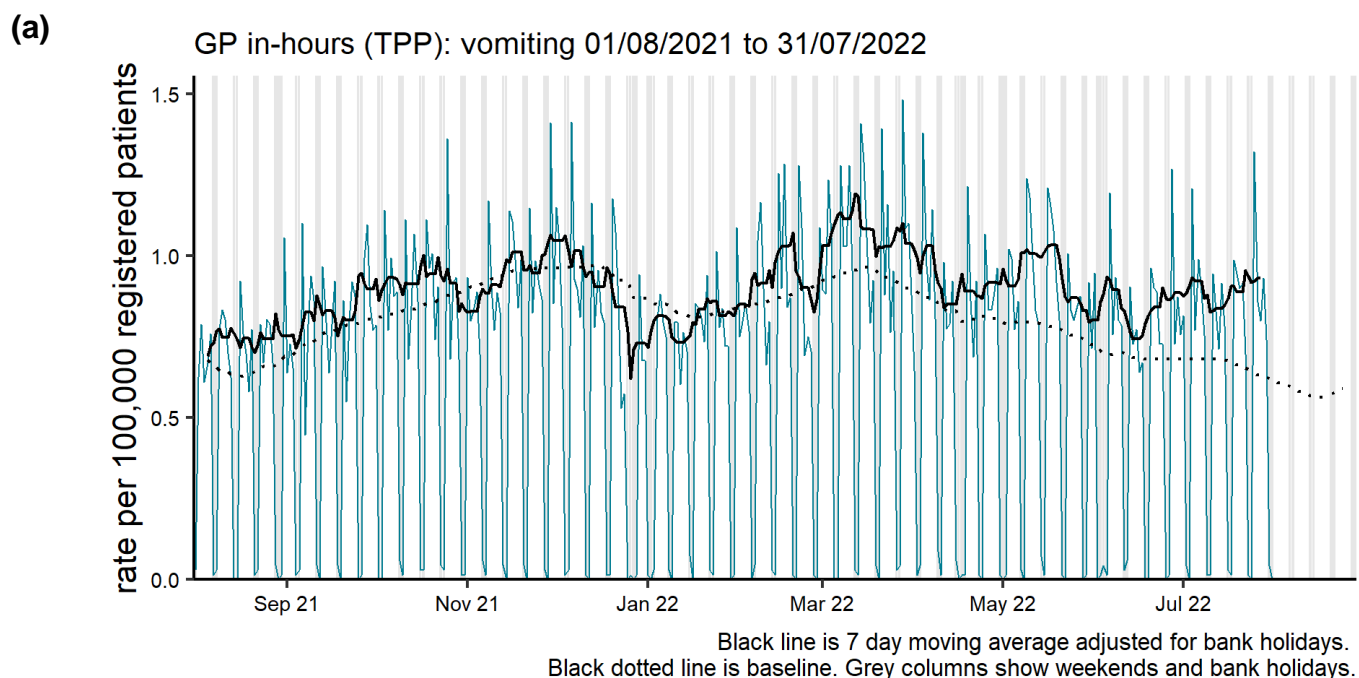
GP in-hours (TPP): diarrhoea by region 01/08/2021 to 31/07/2022

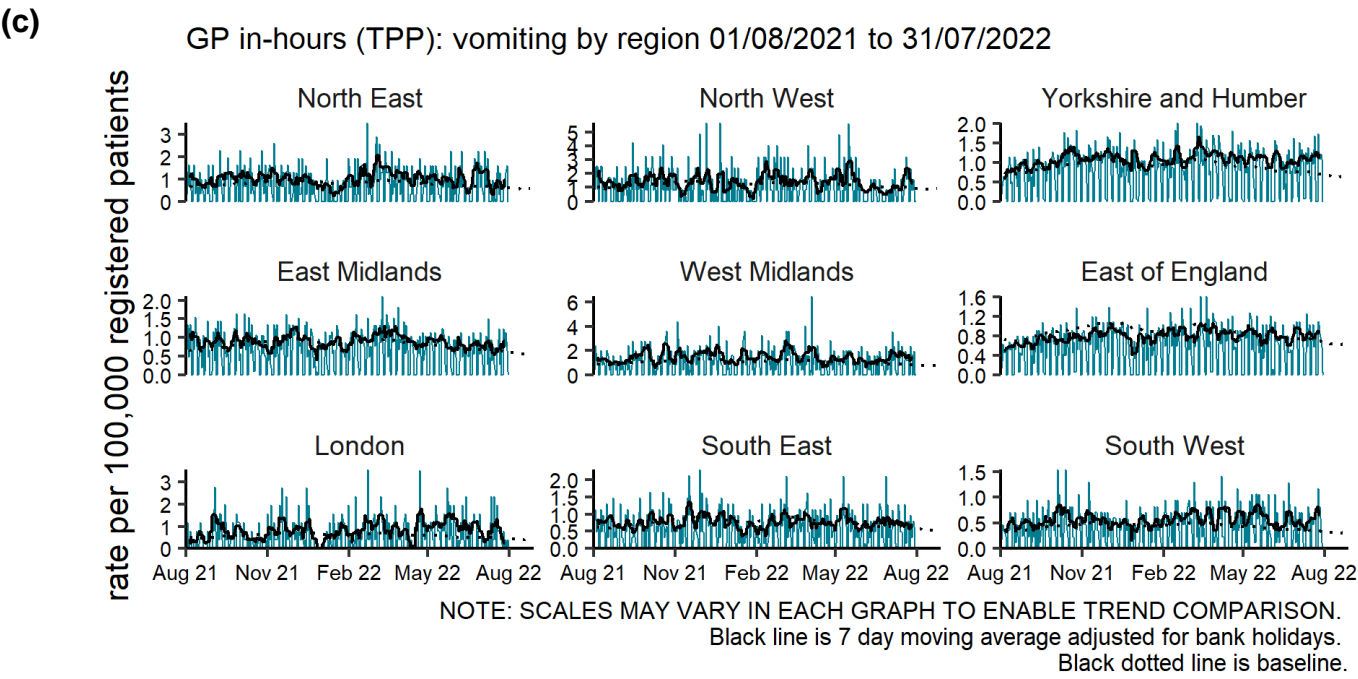


NOTE: SCALES MAY VARY IN EACH GRAPH TO ENABLE TREND COMPARISON.
Black line is 7 day moving average adjusted for bank holidays.
Black dotted line is baseline.

Vomiting

Figure 11: Daily incidence rate per 100,000 population (and 7-day moving average adjusted for bank holidays) for vomiting GP in hours consultations, England (a) nationally, (b) by age and (c) by UKHSA Region.

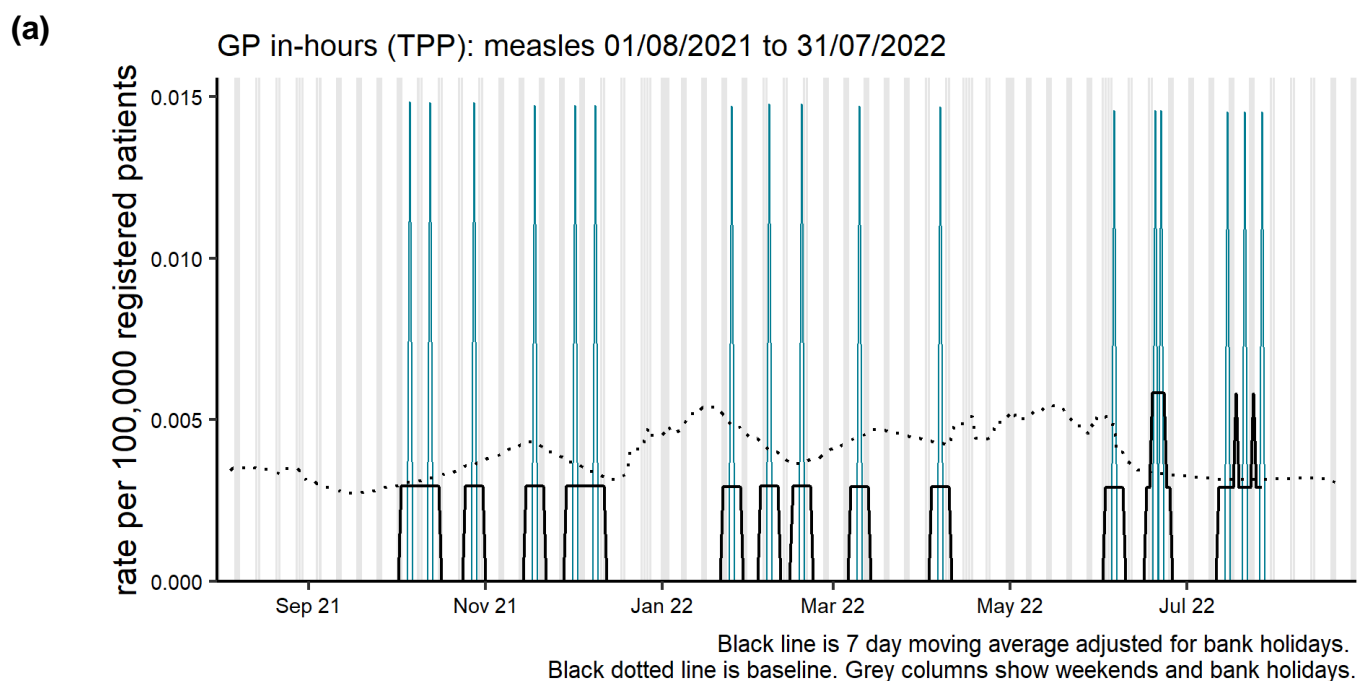




Vaccine preventable conditions

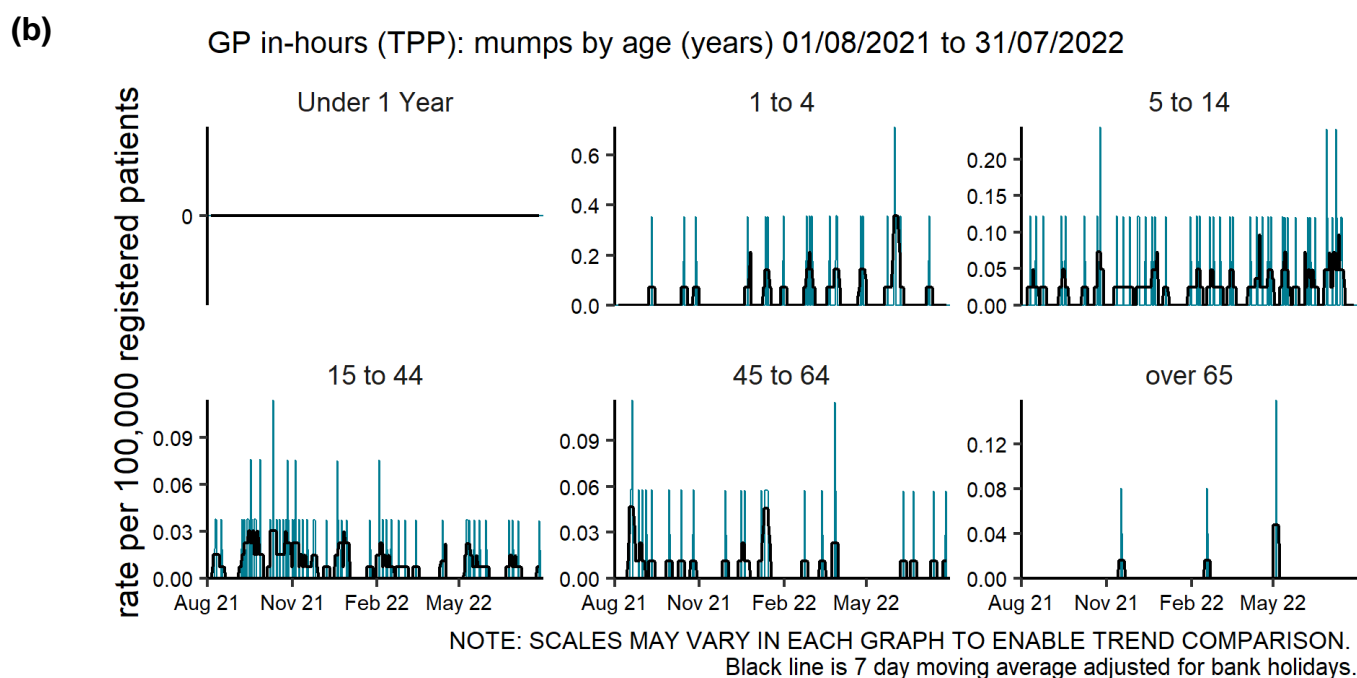
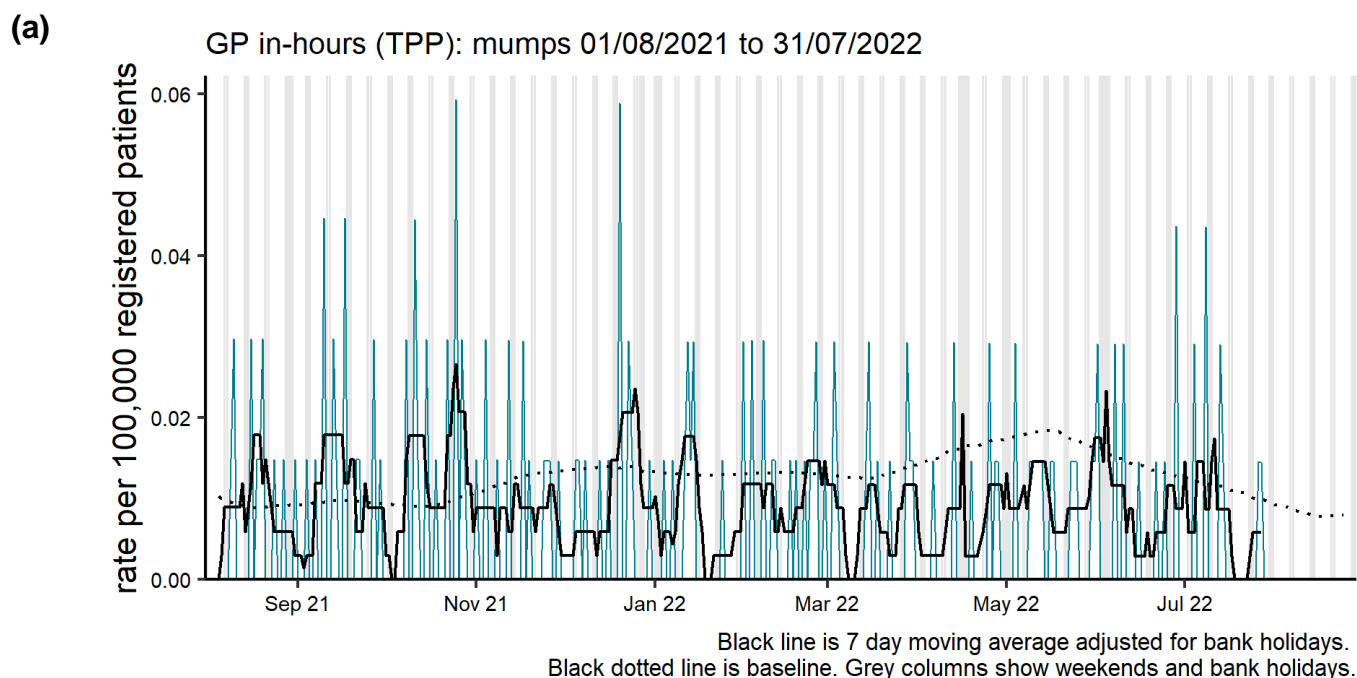
Measles

Figure 12: Daily incidence rate per 100,000 population (and 7-day moving average adjusted for bank holidays) for measles GP in hours consultations, England (a) nationally.

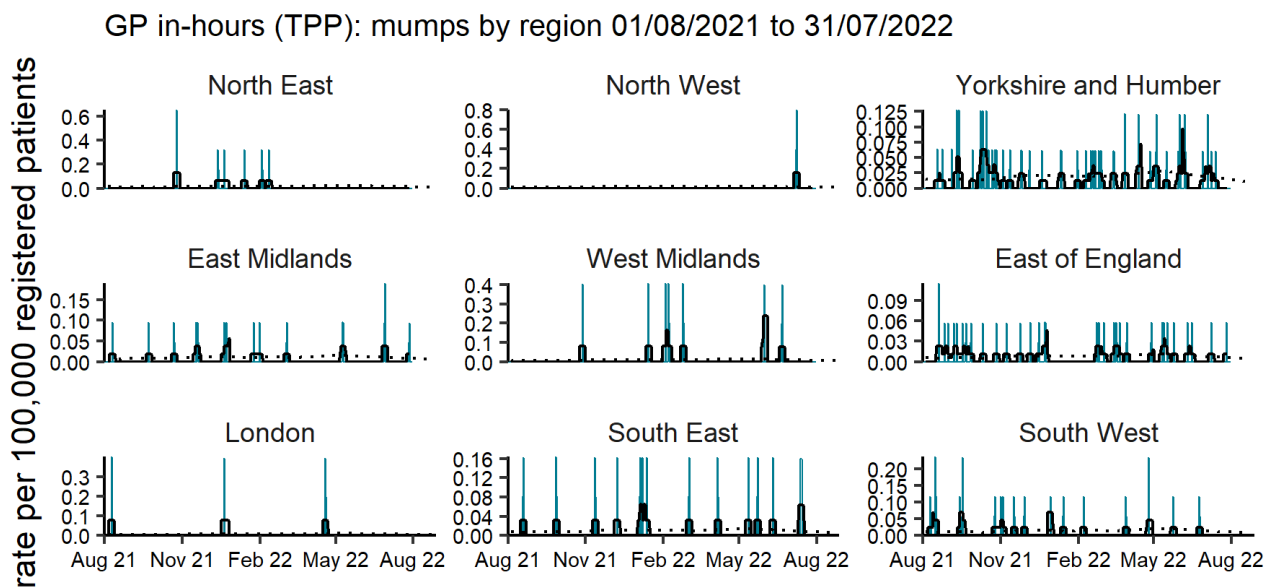


Mumps

Figure 13: Daily incidence rate per 100,000 population (and 7-day moving average adjusted for bank holidays) for mumps GP in hours consultations, England (a) nationally, (b) by age and (c) by UKHSA Region.



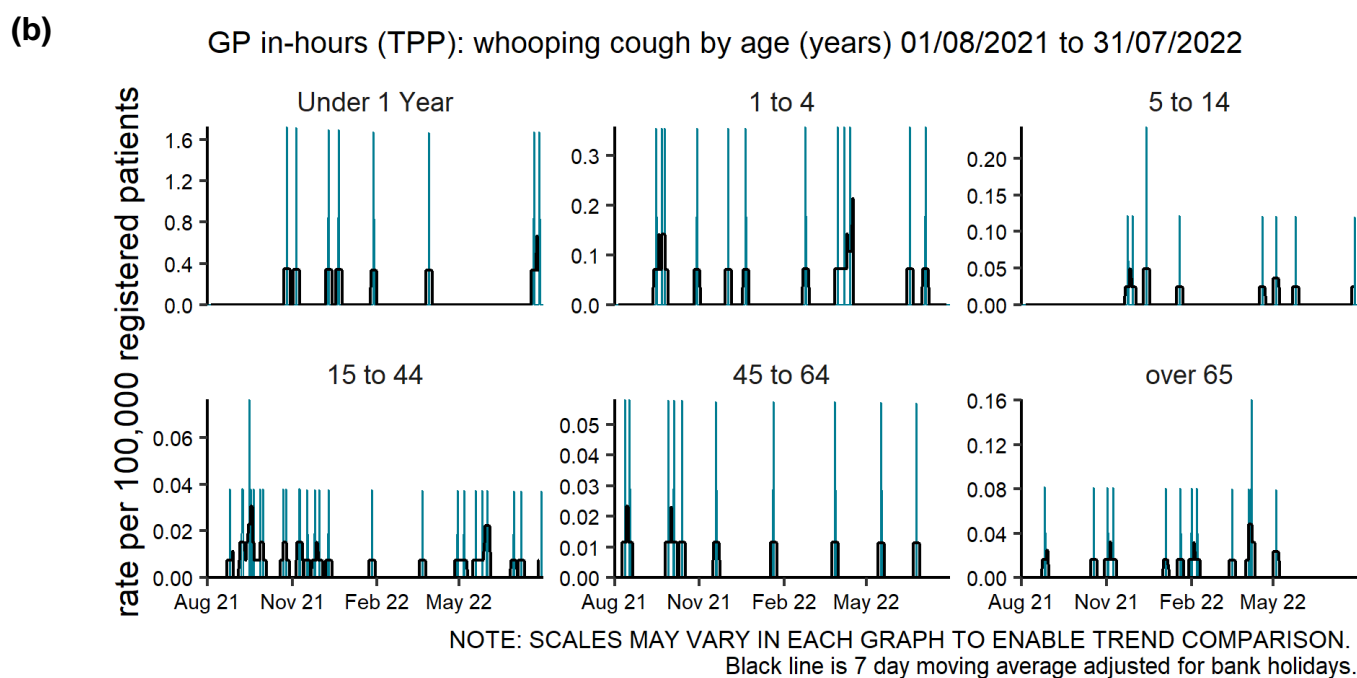
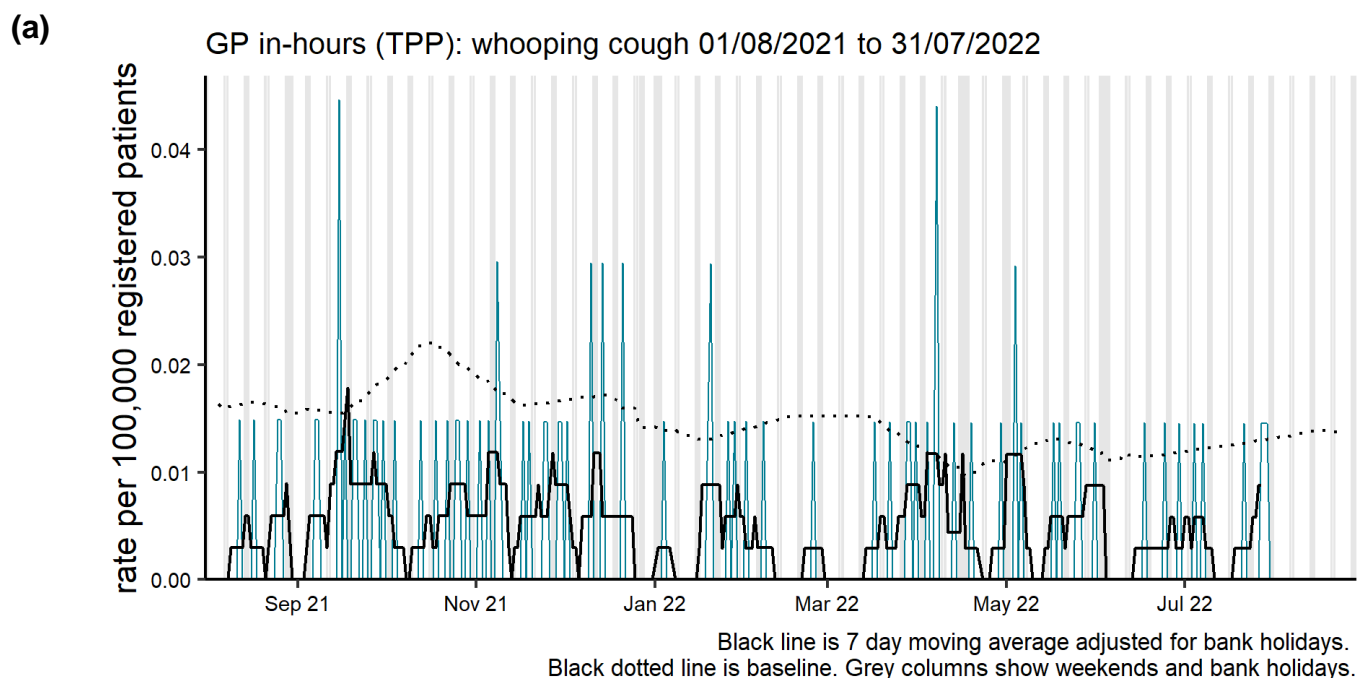
(c)

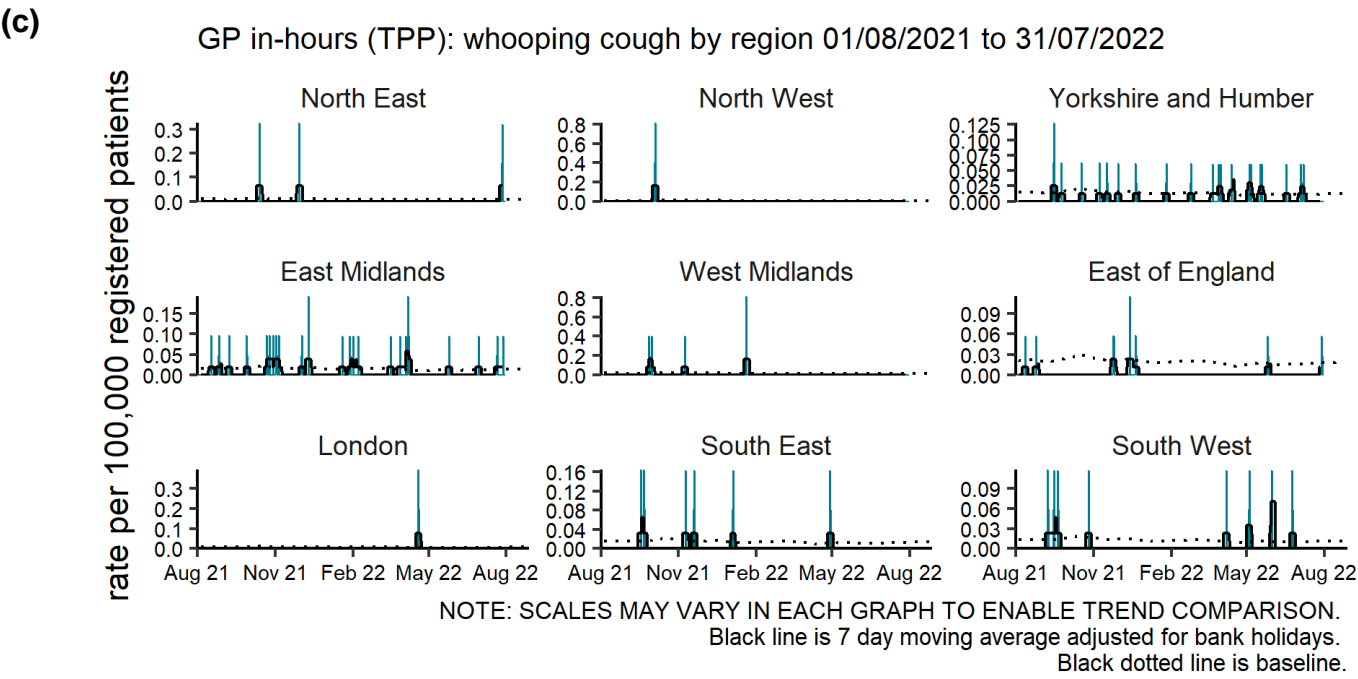


NOTE: SCALES MAY VARY IN EACH GRAPH TO ENABLE TREND COMPARISON.
Black line is 7 day moving average adjusted for bank holidays.
Black dotted line is baseline.

Whooping cough

Figure 14: Daily incidence rate per 100,000 population (and 7-day moving average adjusted for bank holidays) for whooping cough GP in hours consultations, England (a) nationally, (b) by age and (c) by UKHSA Region.

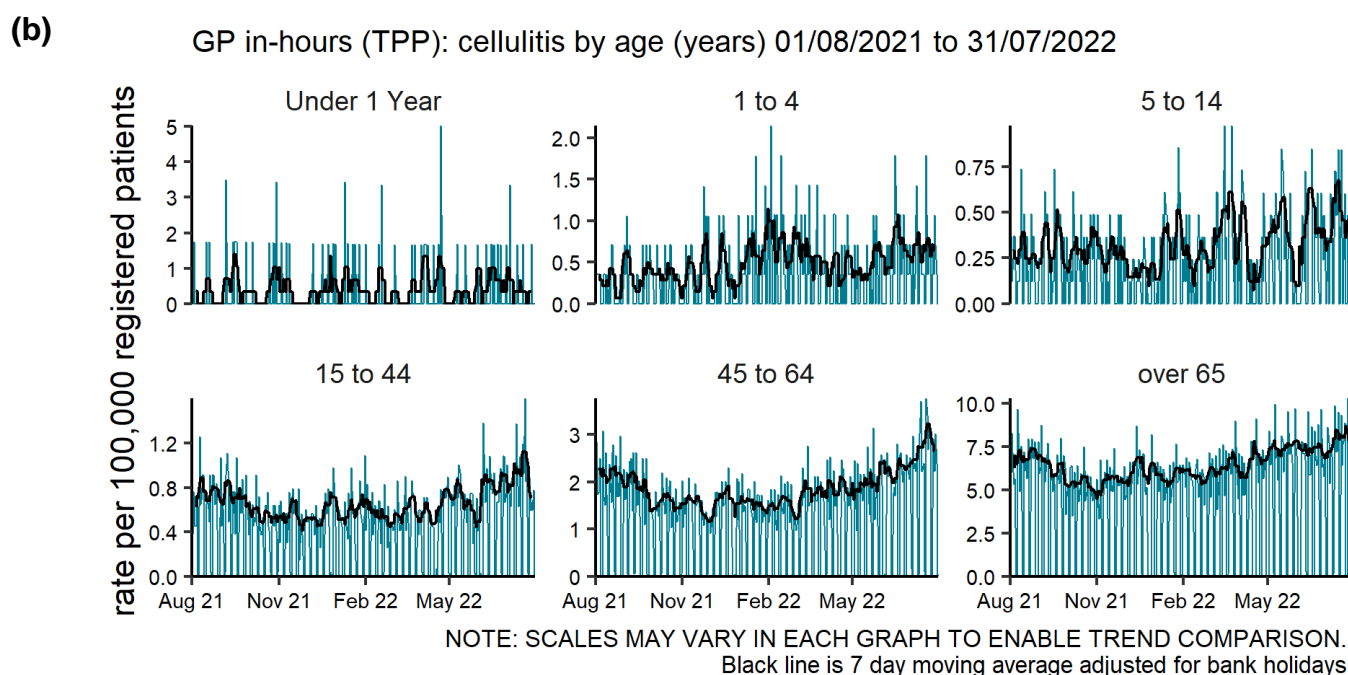
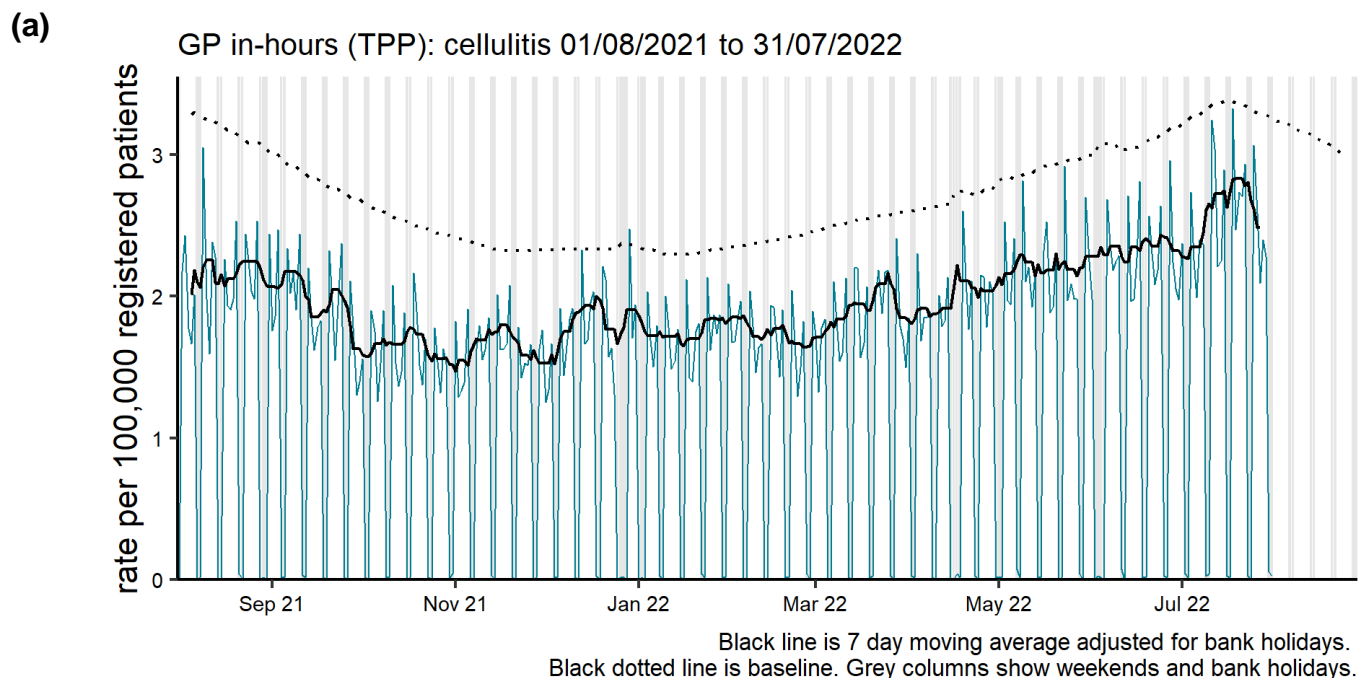


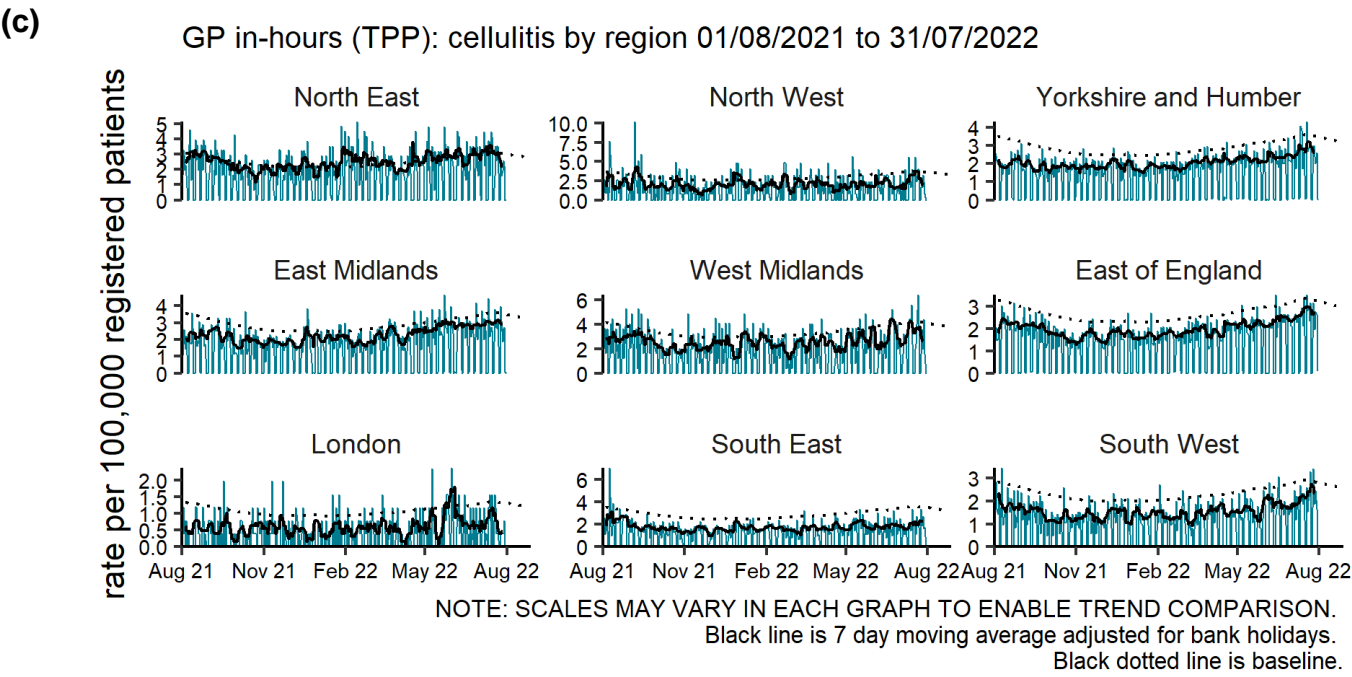


Skin conditions

Cellulitis

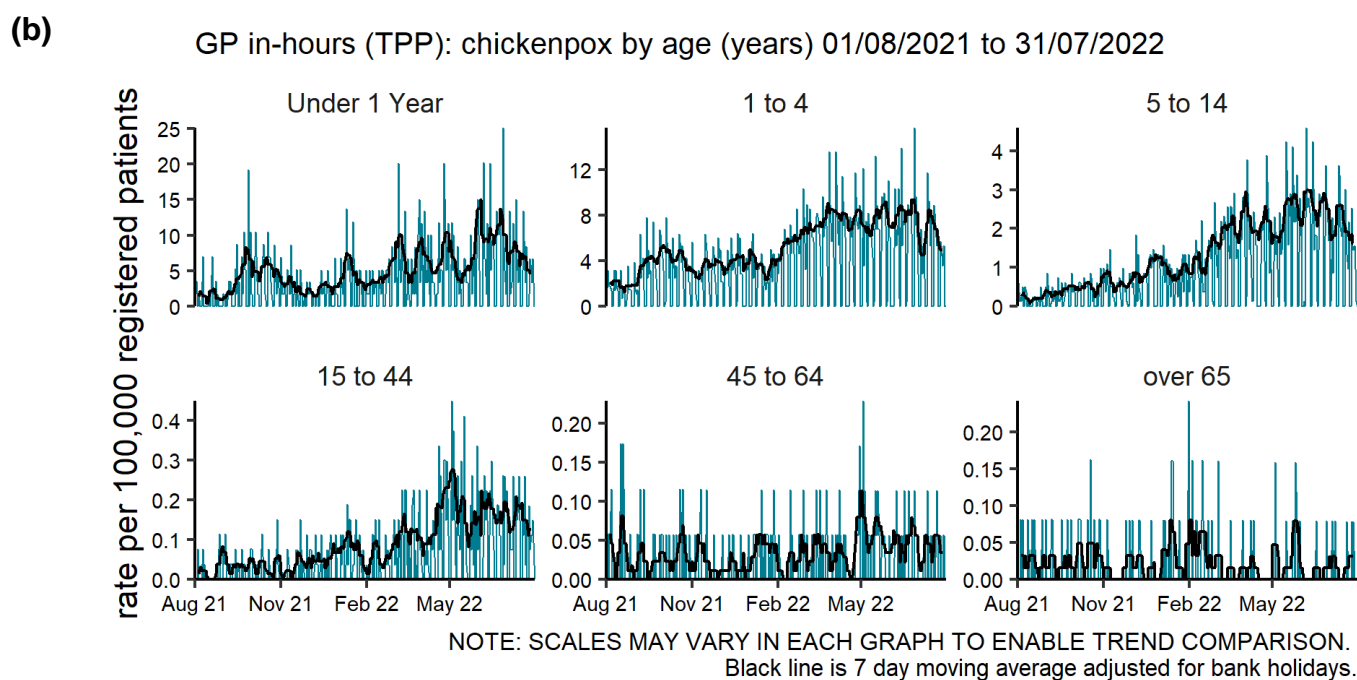
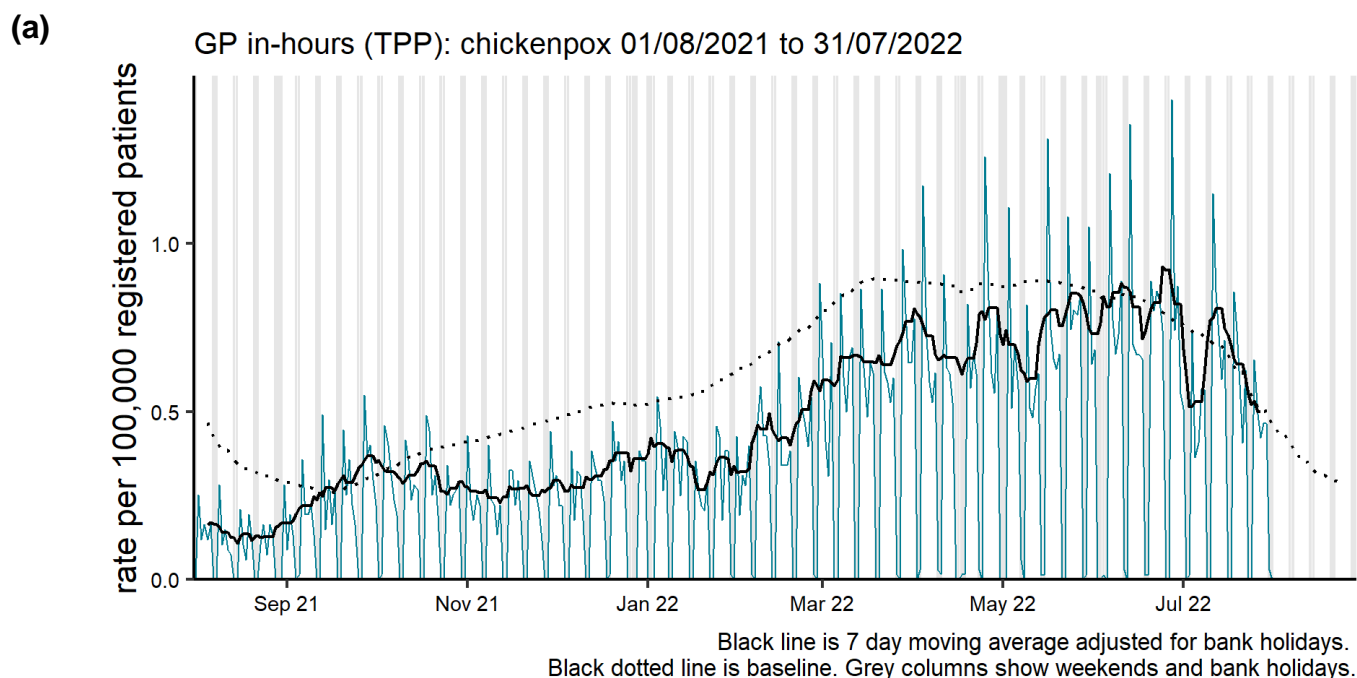
Figure 15: Daily incidence rate per 100,000 population (and 7-day moving average adjusted for bank holidays) for cellulitis GP in hours consultations, England (a) nationally, (b) by age and (c) by UKHSA Region.

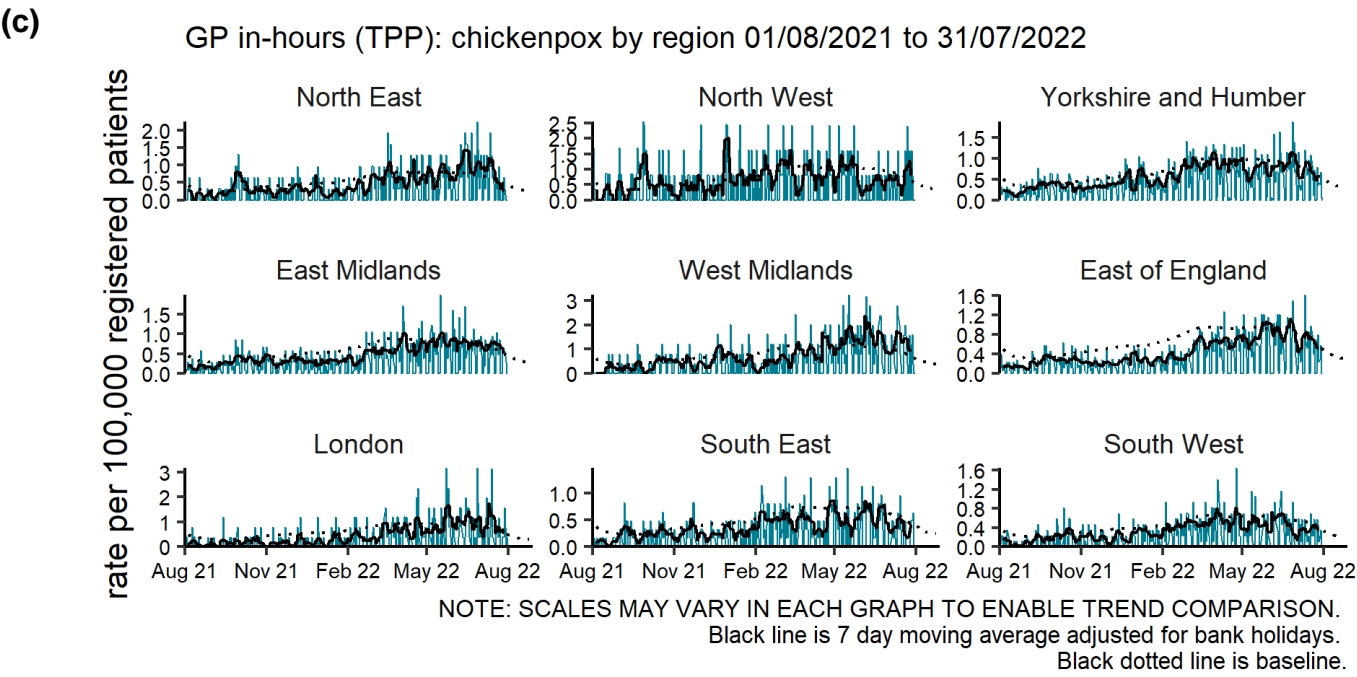




Chickenpox

Figure 16: Daily incidence rate per 100,000 population (and 7-day moving average adjusted for bank holidays) for chickenpox GP in hours consultations, England (a) nationally, (b) by age and (c) by UKHSA Region.

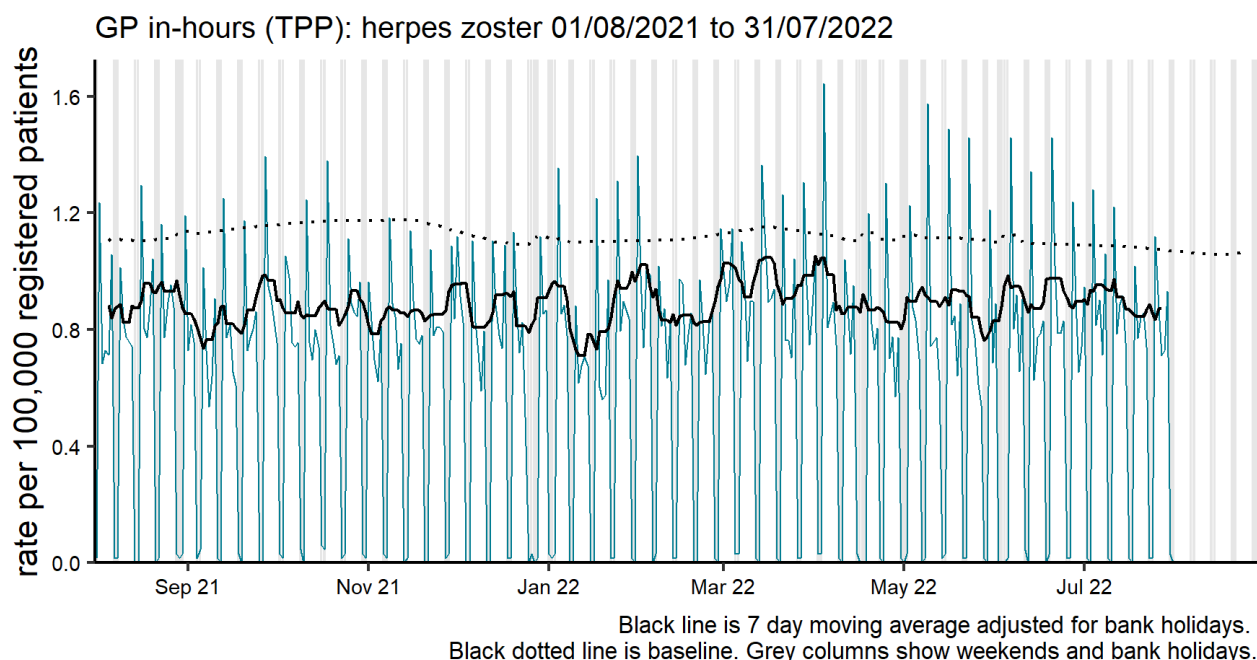




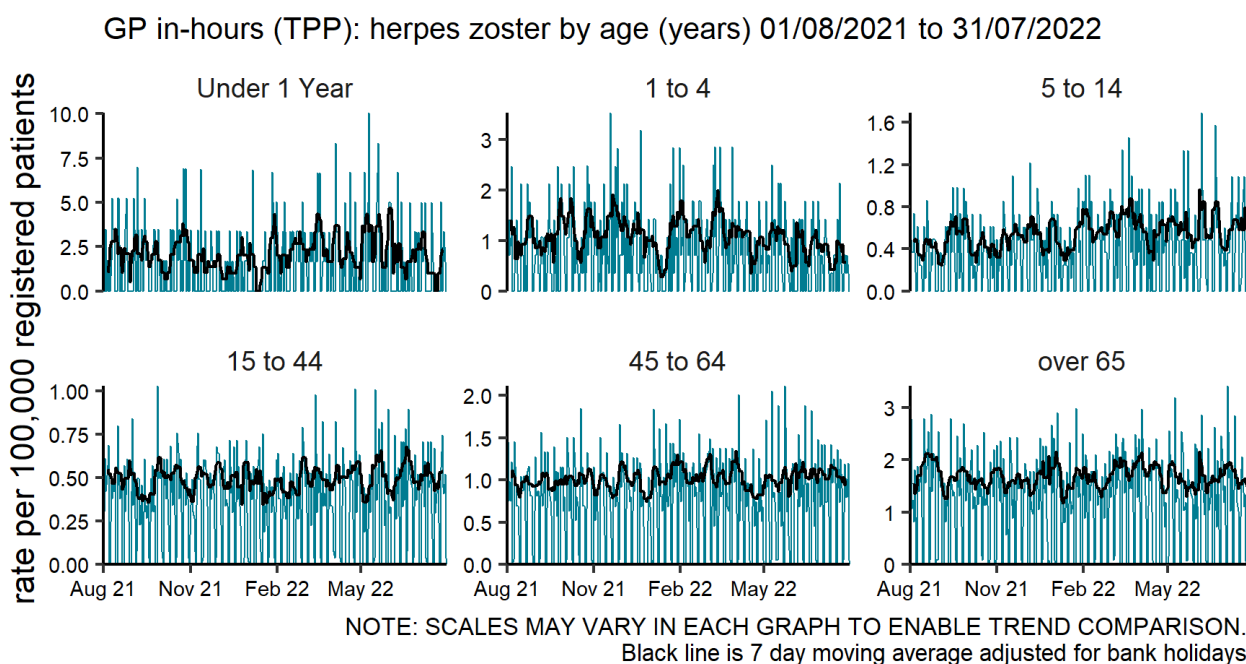
Herpes zoster

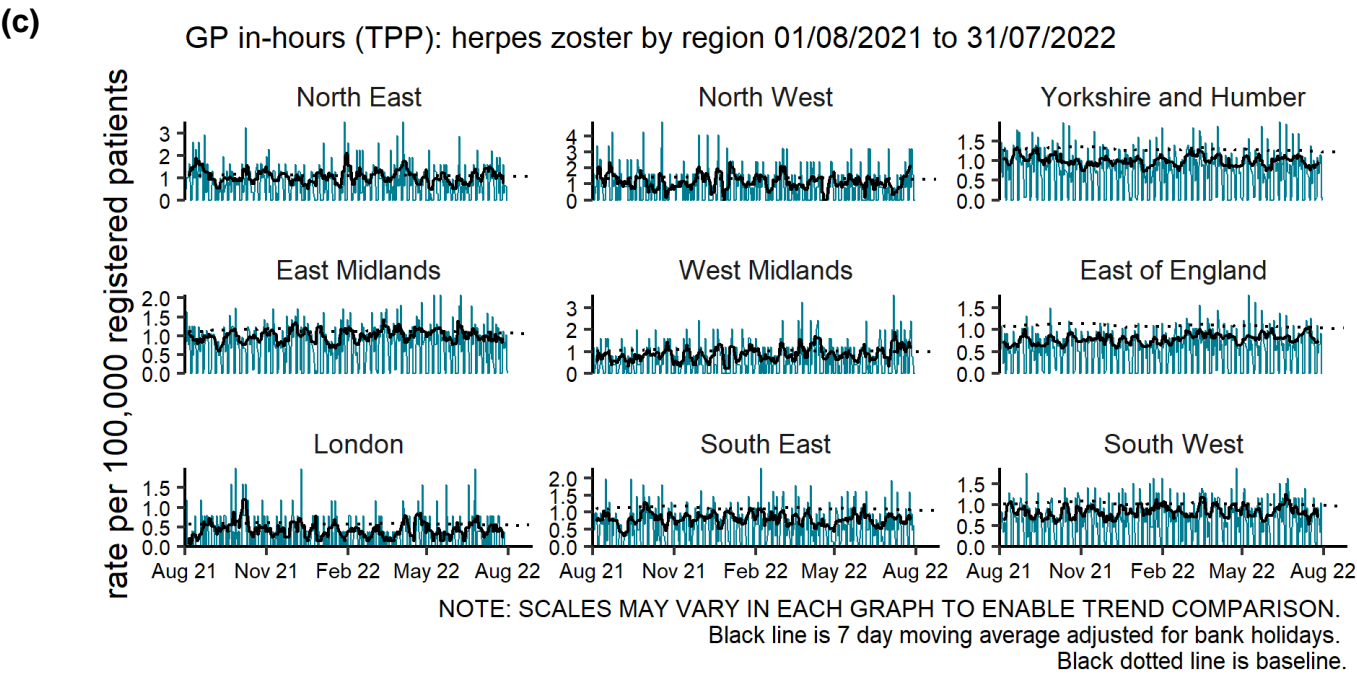
Figure 17: Daily incidence rate per 100,000 population (and 7-day moving average adjusted for bank holidays) for herpes zoster GP in hours consultations, England (a) nationally, (b) by age and (c) by UKHSA Region.

(a)



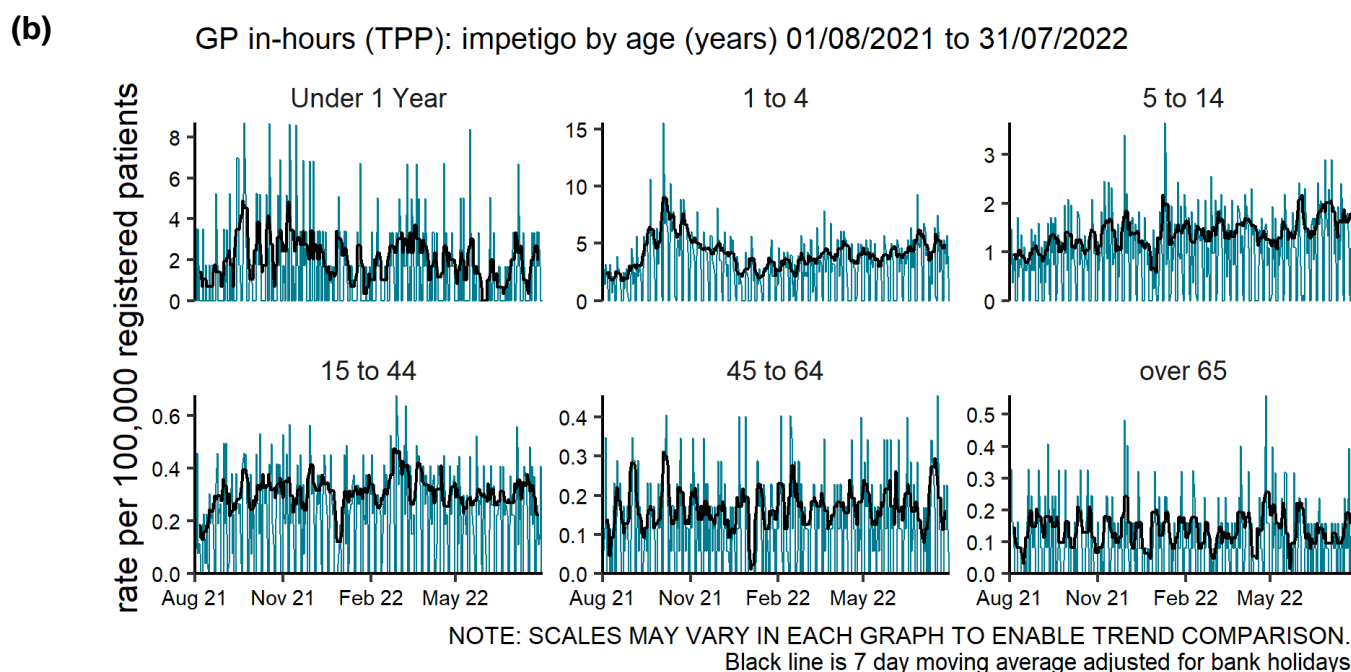
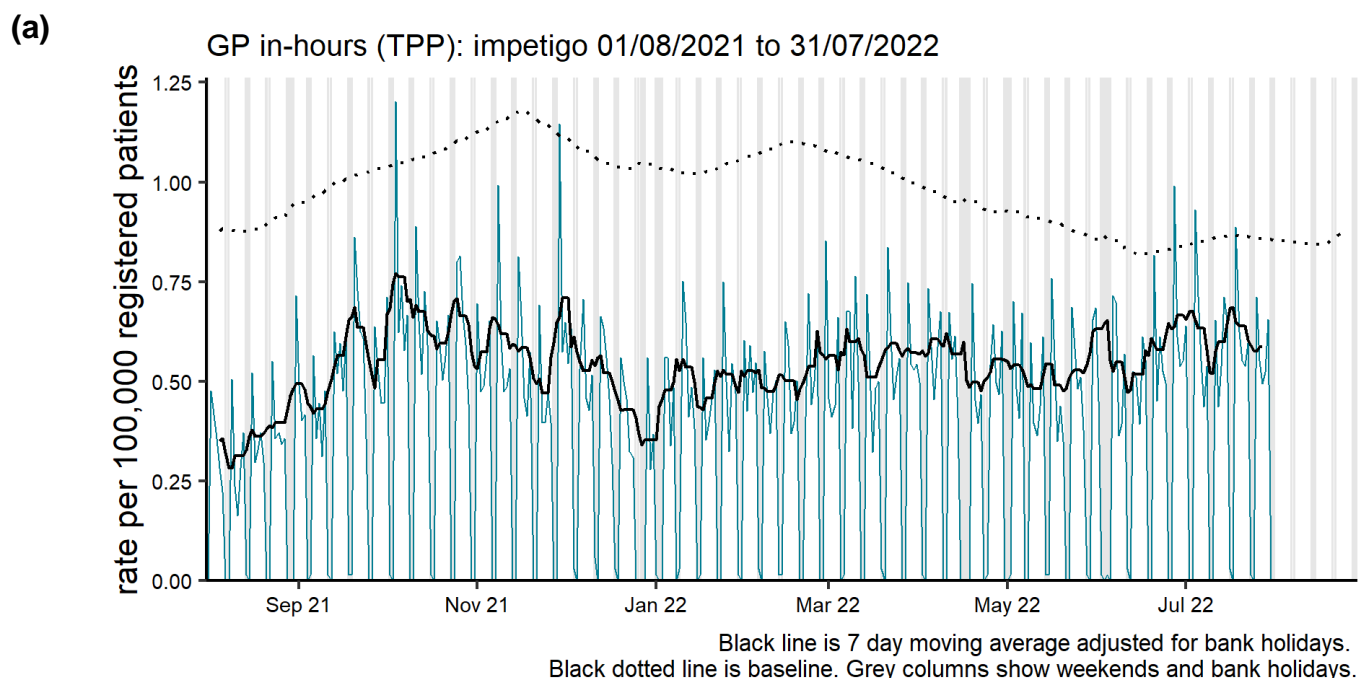
(b)





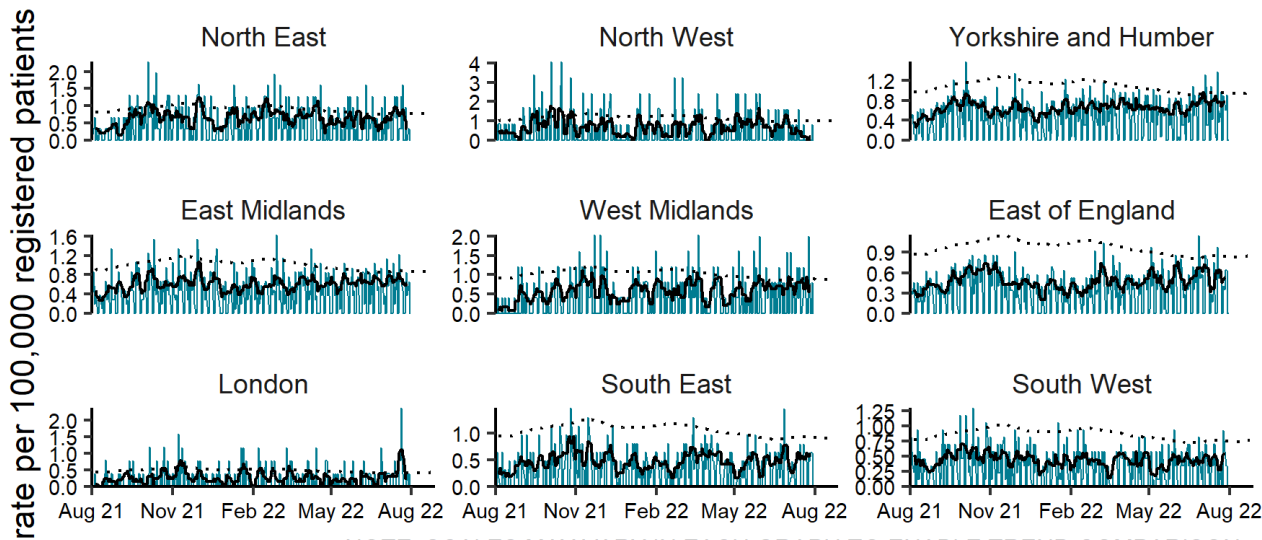
Impetigo

Figure 18: Daily incidence rate per 100,000 population (and 7-day moving average adjusted for bank holidays) for impetigo GP in hours consultations, England (a) nationally, (b) by age and (c) by UKHSA Region.



(c)

GP in-hours (TPP): impetigo by region 01/08/2021 to 31/07/2022



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

Seasonal environmental conditions

During set periods of the year the Met Office operates both heat and cold weather watch systems, in association with UKHSA. Syndromic indicators are used to monitor the impact of both extreme hot and cold weather in England during these periods and will be included below (where an appropriate syndromic indicator is available).

[Cold weather alert](#) period: 1 November to 31 March

[Heat-Health Alert](#) period: 1 June to 15 September

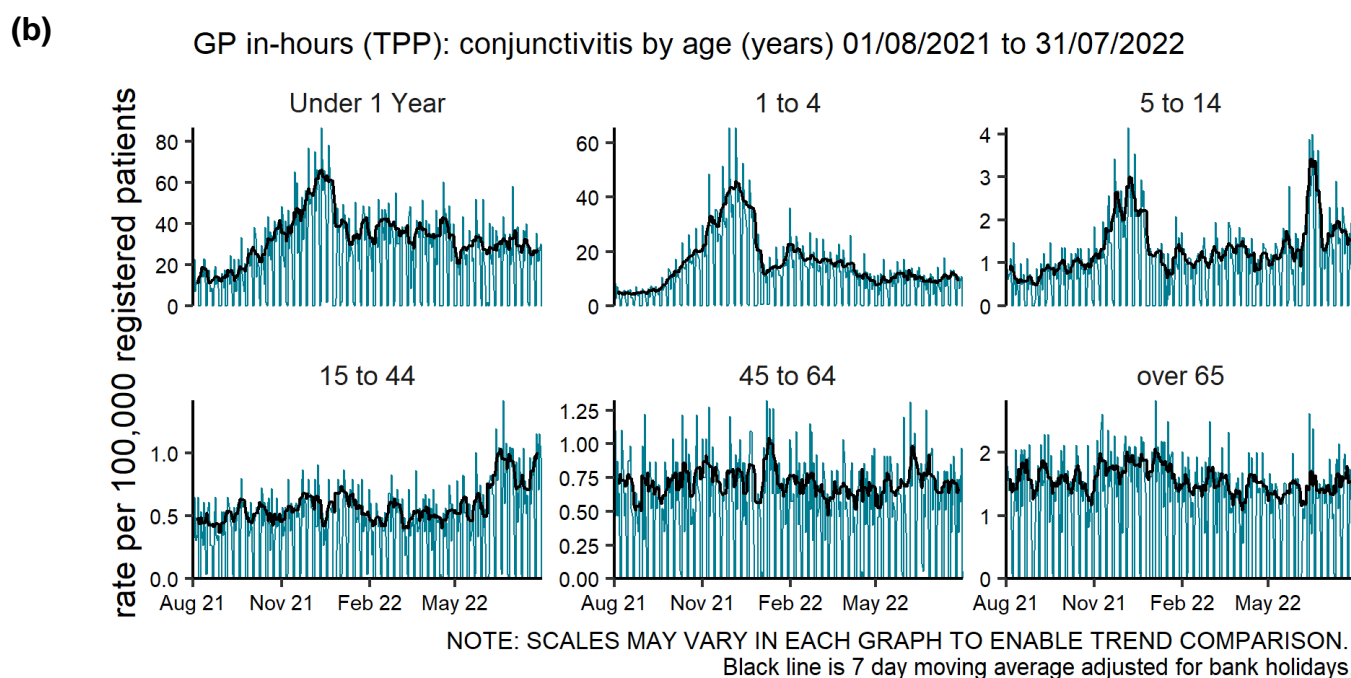
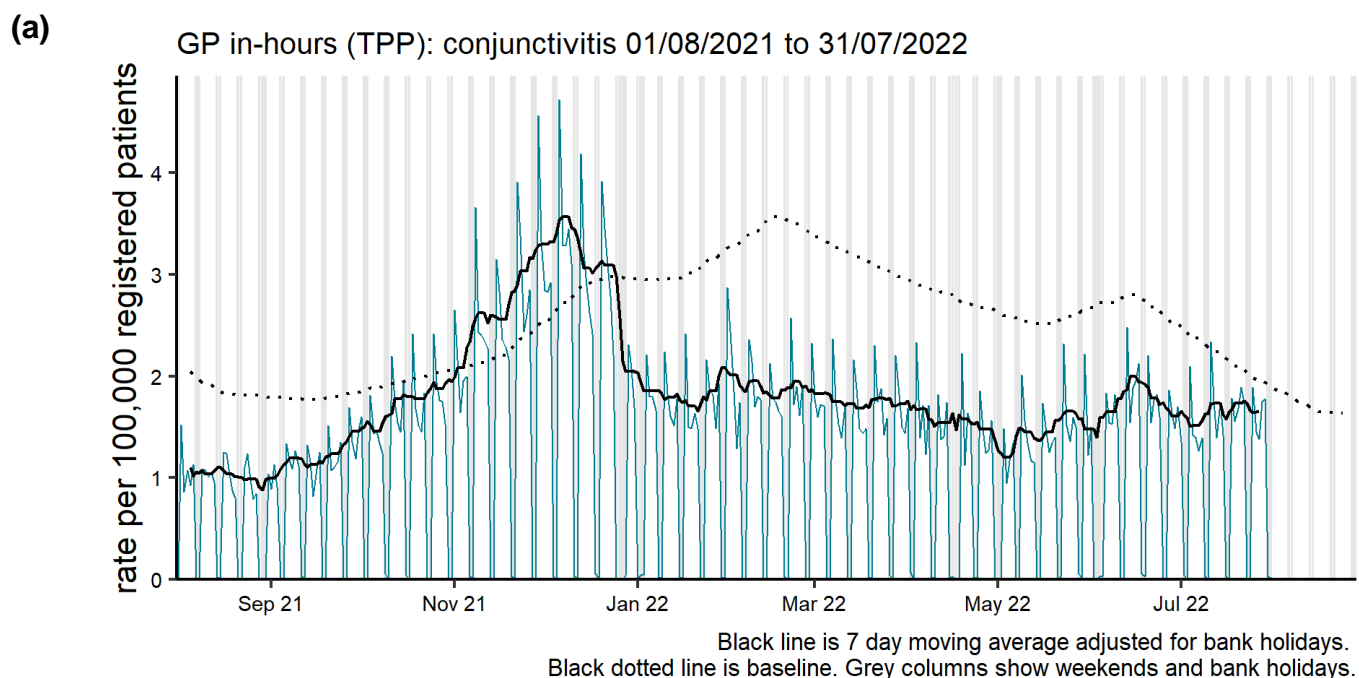
Highest weather alert level during the current reporting week:

Level 1 – Summer preparedness.

Heat-Health watch in place

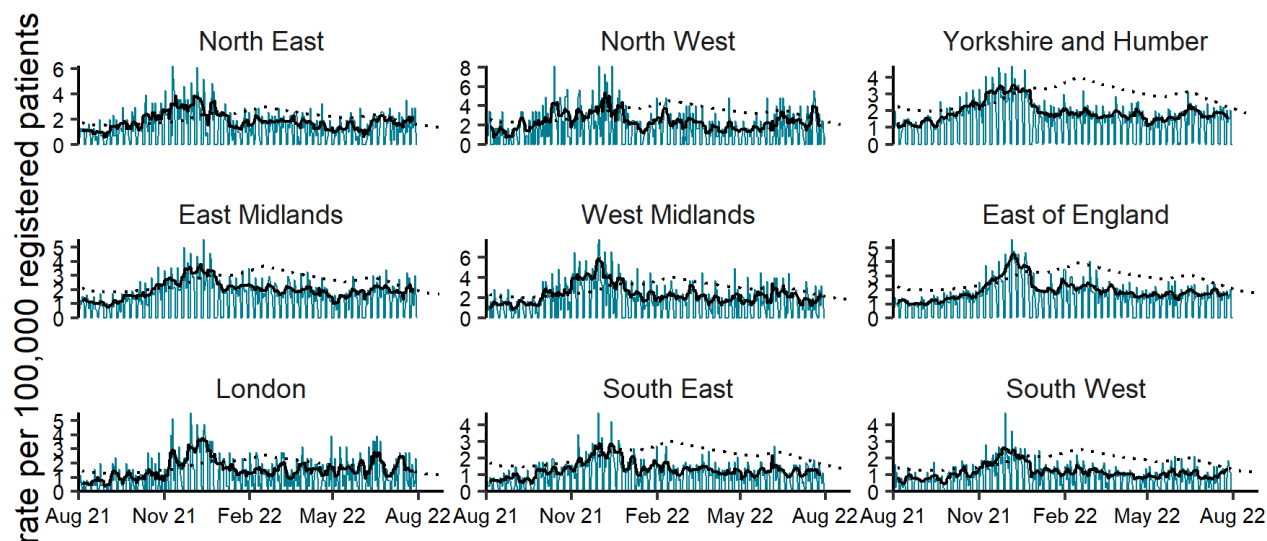
Conjunctivitis

Figure 19: Daily incidence rate per 100,000 population (and 7-day moving average adjusted for bank holidays) for conjunctivitis GP in hours consultations, England (a) nationally, (b) by age and (c) by UKHSA Region.



(c)

GP in-hours (TPP): conjunctivitis by region 01/08/2021 to 31/07/2022



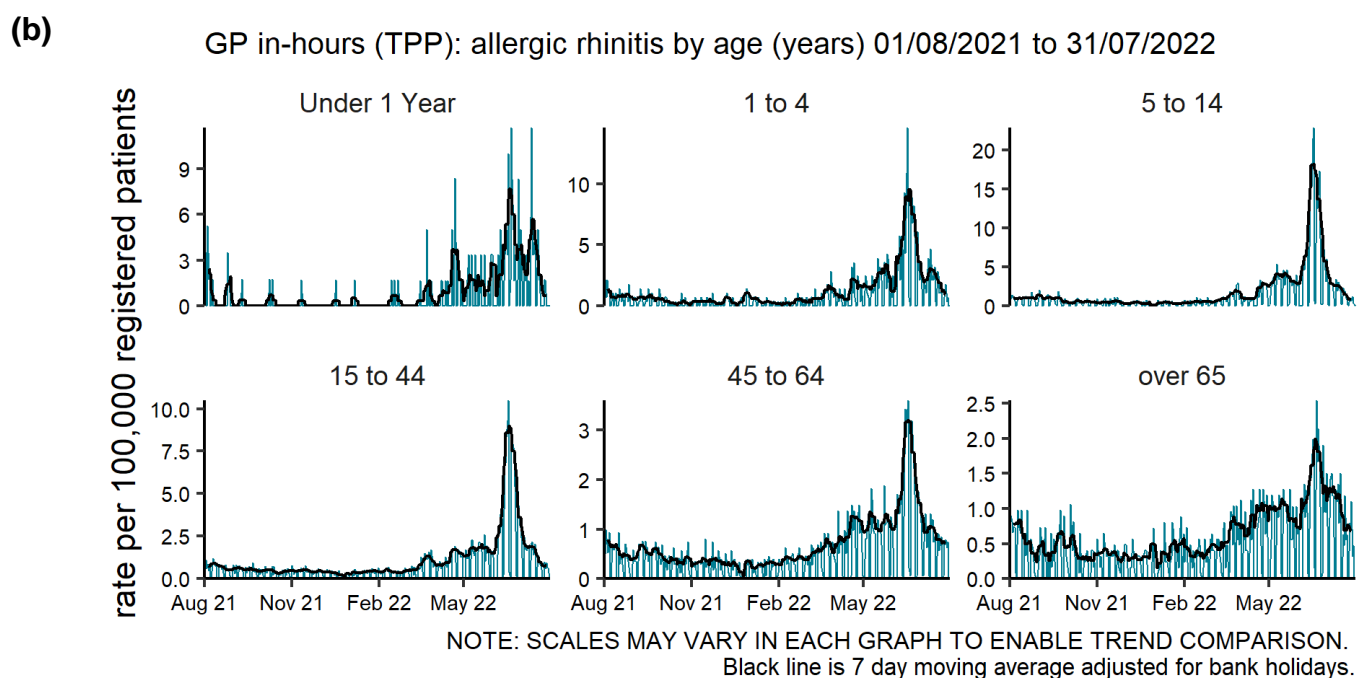
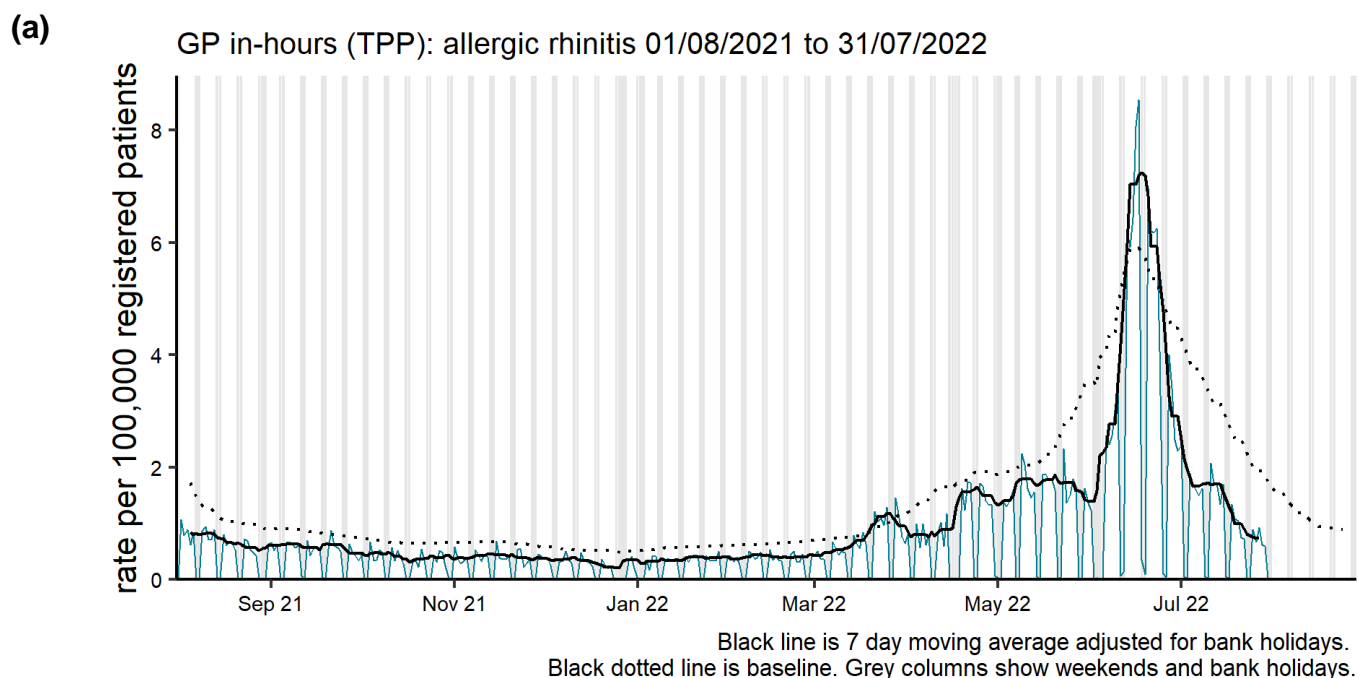
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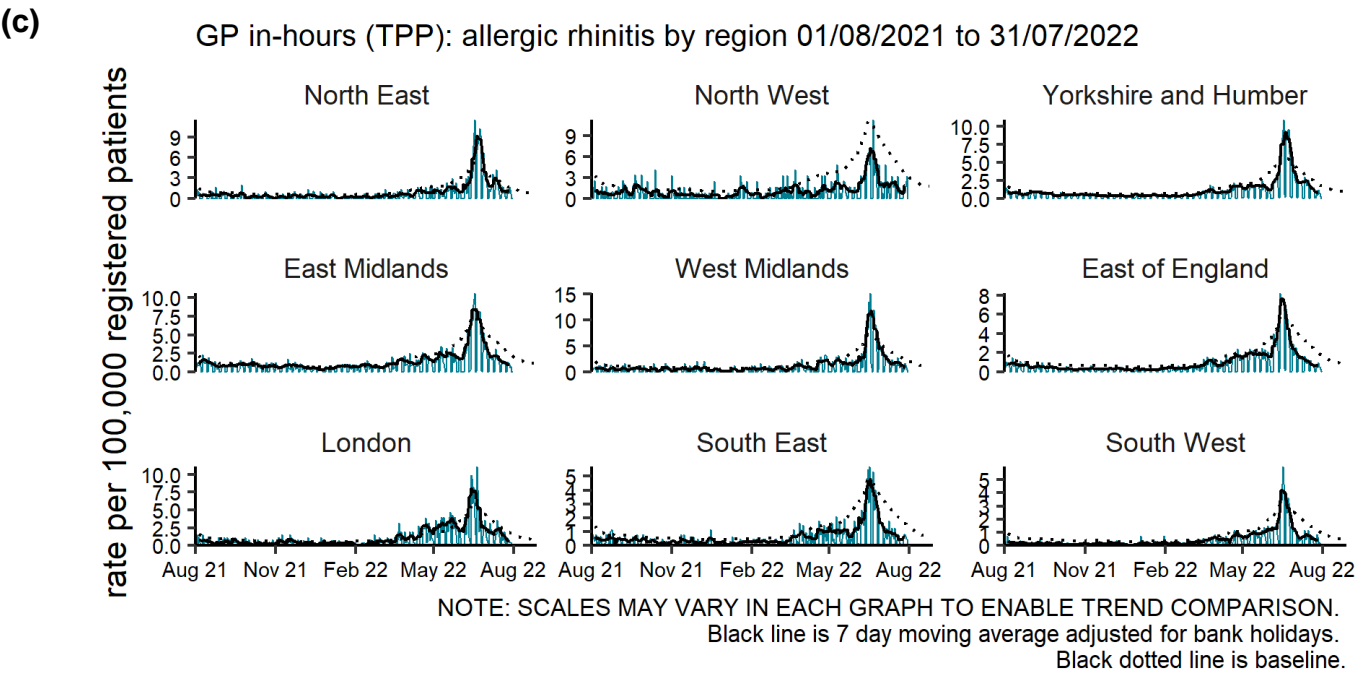
Black line is 7 day moving average adjusted for bank holidays.

Black dotted line is baseline.

Allergic rhinitis

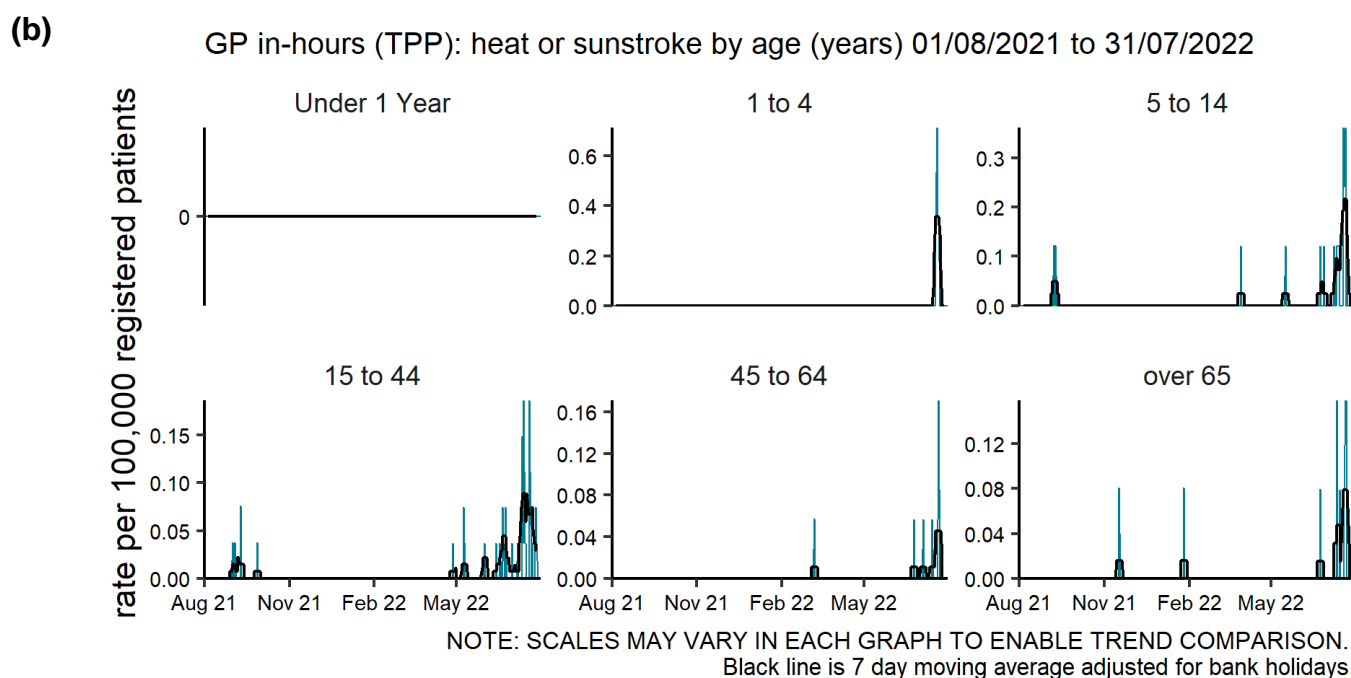
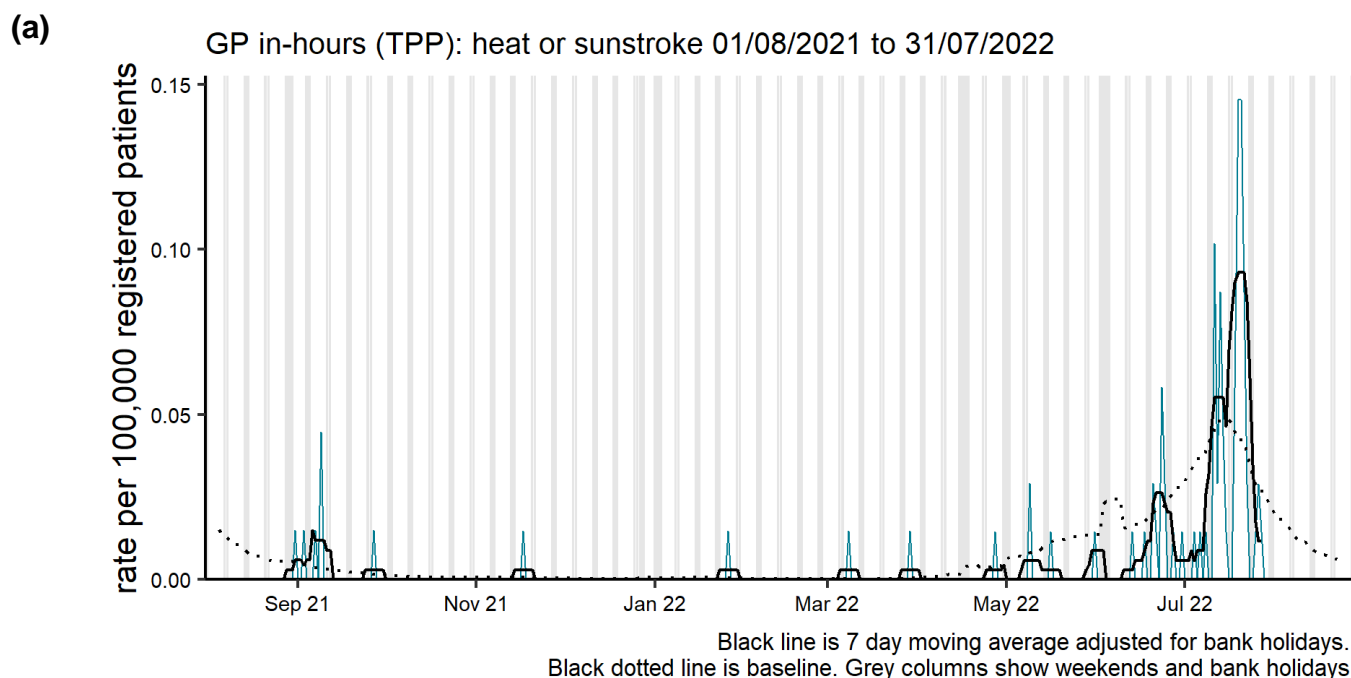
Figure 20: Daily incidence rate per 100,000 population (and 7-day moving average adjusted for bank holidays) for allergic rhinitis GP in hours consultations, England (a) nationally, (b) by age and (c) by UKHSA Region.

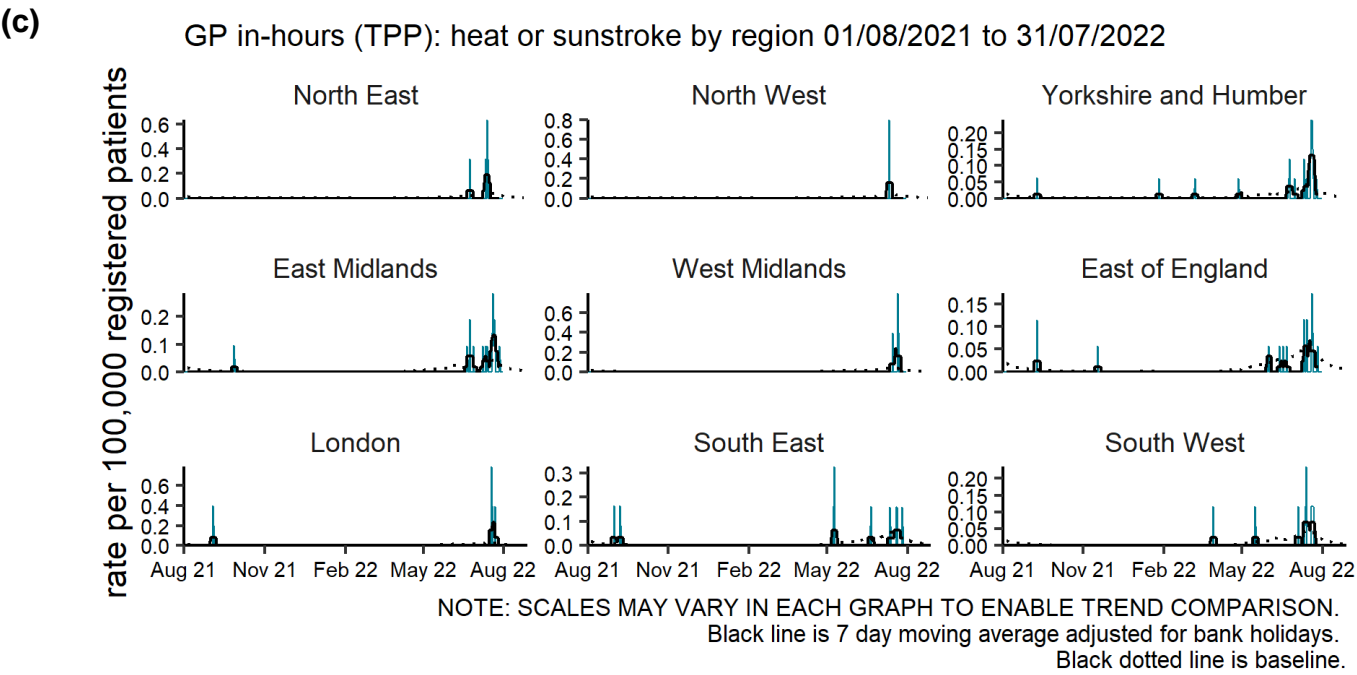




Heat or sunstroke

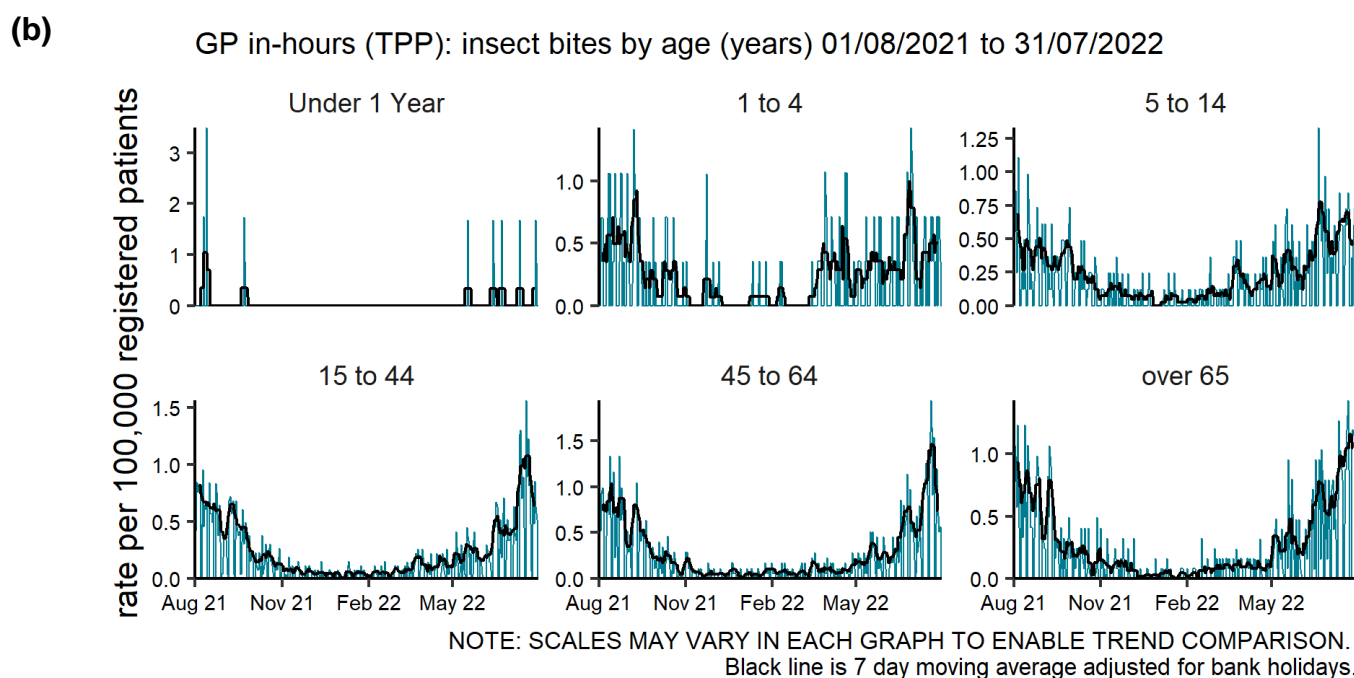
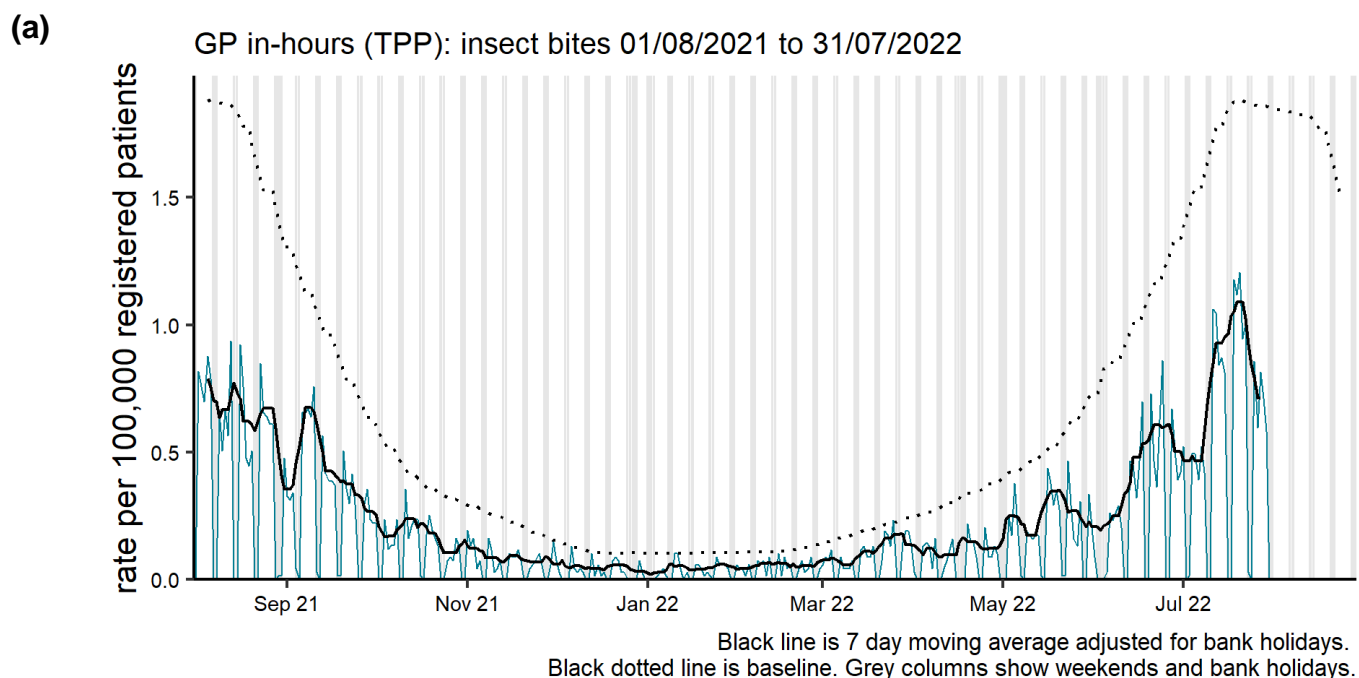
Figure 21: Daily incidence rate per 100,000 population (and 7-day moving average adjusted for bank holidays) for heat or sunstroke GP in hours consultations, England (a) nationally, (b) by age and (c) by UKHSA Region.

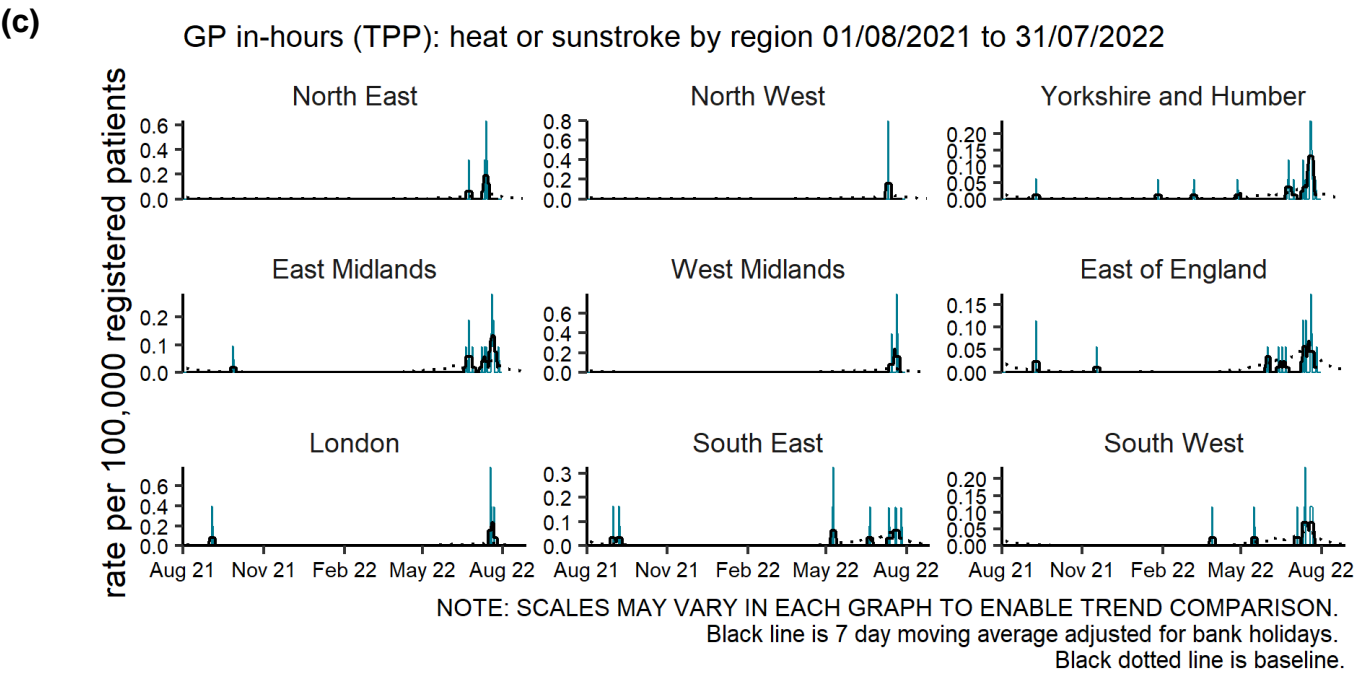




Insect bites

Figure 22: Daily incidence rate per 100,000 population (and 7-day moving average adjusted for bank holidays) for insect bites GP in hours consultations, England (a) nationally, (b) by age and (c) by UKHSA Region.





Notes and caveats

The following additional caveats apply to the UKHSA GP in hours syndromic surveillance system:

- all syndromic trends should be interpreted with caution due to changes in national advice and guidance regarding access to health care services as well as updates and changes to service provision during the COVID-19 pandemic
- the data presented are based on a sentinel syndromic surveillance system:
 - not all GP practices in England are included
 - national coverage each week is included in **Table 2**
 - coverage varies by location
- some syndromic indicators are hierarchical:
 - upper respiratory tract infections includes:
 - influenza-like illness
 - pharyngitis or scarlet fever
 - other and non-specific upper respiratory tract infections
 - lower respiratory tract infections includes:
 - pneumonia
 - other and non-specific upper respiratory tract infections
 - gastroenteritis includes:
 - diarrhoea
 - vomiting
 - other and non-specific gastroenteritis
- baselines:
 - were last remodelled March 2021
 - are constructed from historical data since April 2012
 - represent seasonally expected levels of activity
 - take account of any known substantial changes in data collection, population coverage or reporting practices:
 - the COVID-19 pandemic period is excluded, to show seasonally expected levels if COVID-19 had not occurred
 - may be remodelled to include the impacts seen during periods of the COVID-19 pandemic if/when appropriate due to introduction of large scale public health interventions which may affect GP consultation levels

COVID-19 syndromic surveillance

- the COVID-19-like syndromic indicator is based on diagnoses recorded using the COVID-19 Snomed codes released in March 2020:
 - these data are based on COVID-19-like symptoms reported and are not based on outcomes of tests for coronavirus

- patients presenting with COVID-19 symptoms may be diagnosed using other clinical codes used by the GP, so the COVID-19-like syndromic indicator should be interpreted in context with the other respiratory syndromic indicators presented in this report
- the rate of COVID-19-like consultations should not be used to estimate an absolute count of patients with COVID-19

Acknowledgements

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

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Version: IH-2

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Published: August 2022



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