UK Health Security Agency

Emergency department syndromic surveillance system bulletin (England)

2025 week 4

Key messages

Data reported to: 26 January 2025

During week 4 ED attendances for acute respiratory infections increased slightly, particularly in children aged 5 to 14 years. Influenza attendances decreased nationally, though there were increases in children aged 5 to 14 years.

Gastroenteritis attendances increased further during week 4, again largely in children up to 14 years.

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
Total attendances (**Figure 1**)	Increasing	No baseline
COVID-19-like (**Figure 2**)	Decreasing	No baseline
Acute respiratory infections (**Figure 3**)	Increasing	Above baseline
Acute bronchiolitis or bronchitis (**Figure 4**)	No trend	Similar to baseline
Influenza-like illness (**Figure 5**)	Decreasing	Above baseline
Pneumonia (**Figure 6**)	Decreasing	Similar to baseline
Asthma (**Figure 7**)	Increasing	Similar to baseline
Gastroenteritis (**Figure 8**)	Increasing	Similar to baseline
Cardiac (**Figure 9**)	No trend	Similar to baseline
Myocardial ischaemia (**Figure 10**)	No trend	Similar to baseline
Acute alcohol intoxication (**Figure 11**)	No trend	Similar to baseline
Mental health (**Figure 12**)	No trend	No baseline
Scarlet fever **(Figure 13)**	Increasing	Similar to baseline
Impact of cold (**Figure 14**)	No trend	Below baseline

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

Contents

About this syndromic surveillance system

This bulletin presents data from the UK Health Security Agency (UKHSA) emergency department syndromic surveillance system.

Syndromic surveillance can be used to:
- 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 ED data are analysed and reported here, to identify and describe trends for a variety of syndromic indicators:
- syndromic indicators include groupings such as acute respiratory tract infections, gastroenteritis and myocardial ischaemia
- syndromic indicators are based on:
    - the primary diagnosis for each attendance
    - other diagnoses may be recorded, but are not used for indicator grouping
    - diagnoses are based on signs/symptoms (not 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 **Notes and caveats**

Previous weekly bulletins from this system are available here.

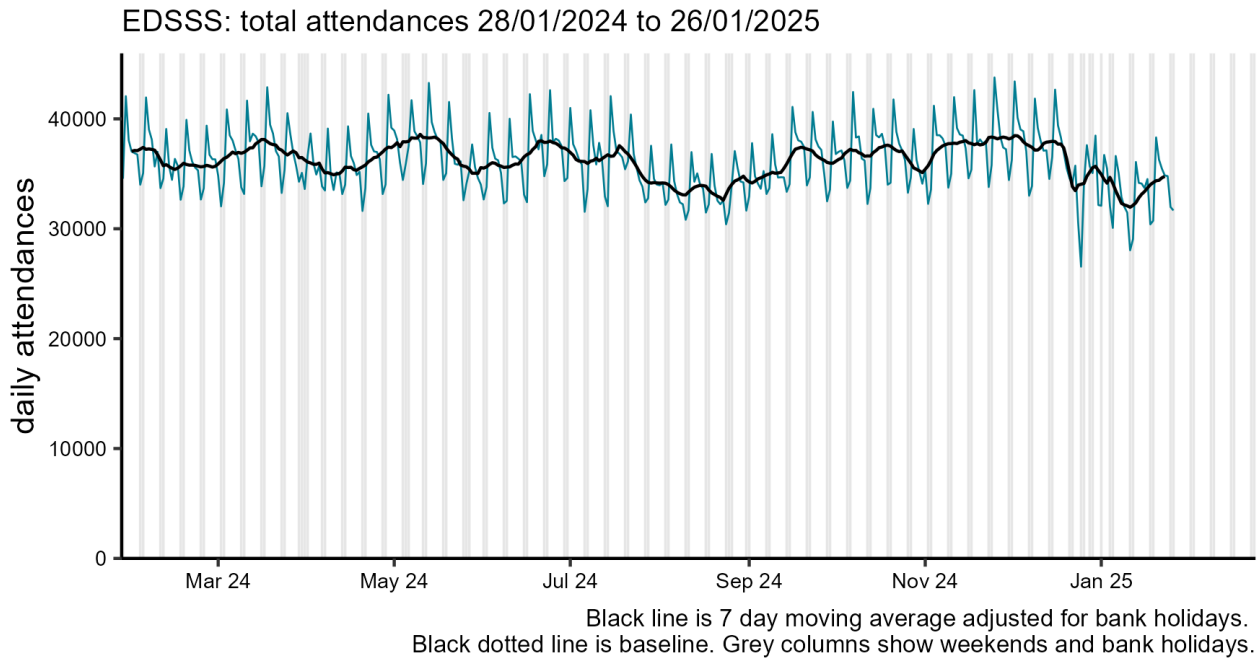
Data quality issues of note this week

See **Table 2** and **Table 3** for the numbers of EDs included this week.

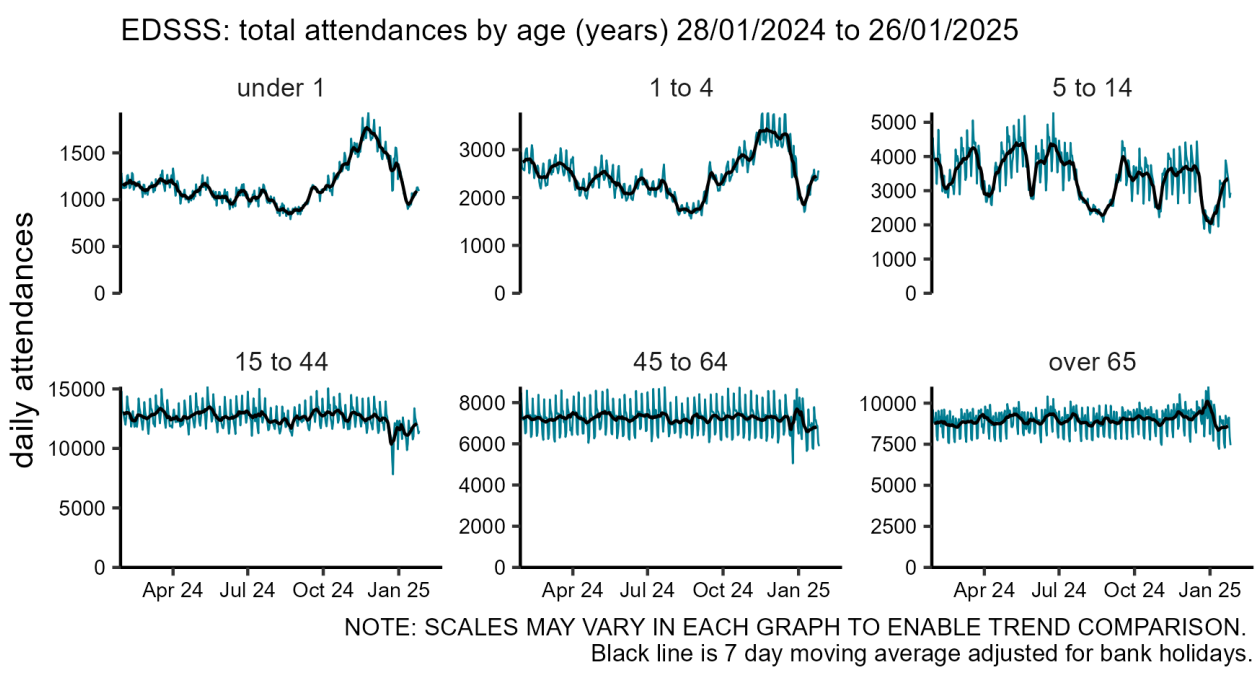
Total attendances

Figure 1: Daily number of ED attendances (and 7-day moving average adjusted for bank holidays) recorded in this sentinel syndromic surveillance system in England (a) nationally, (b) by age and (c) by UKHSA Region.

(a)



(b)



(c)

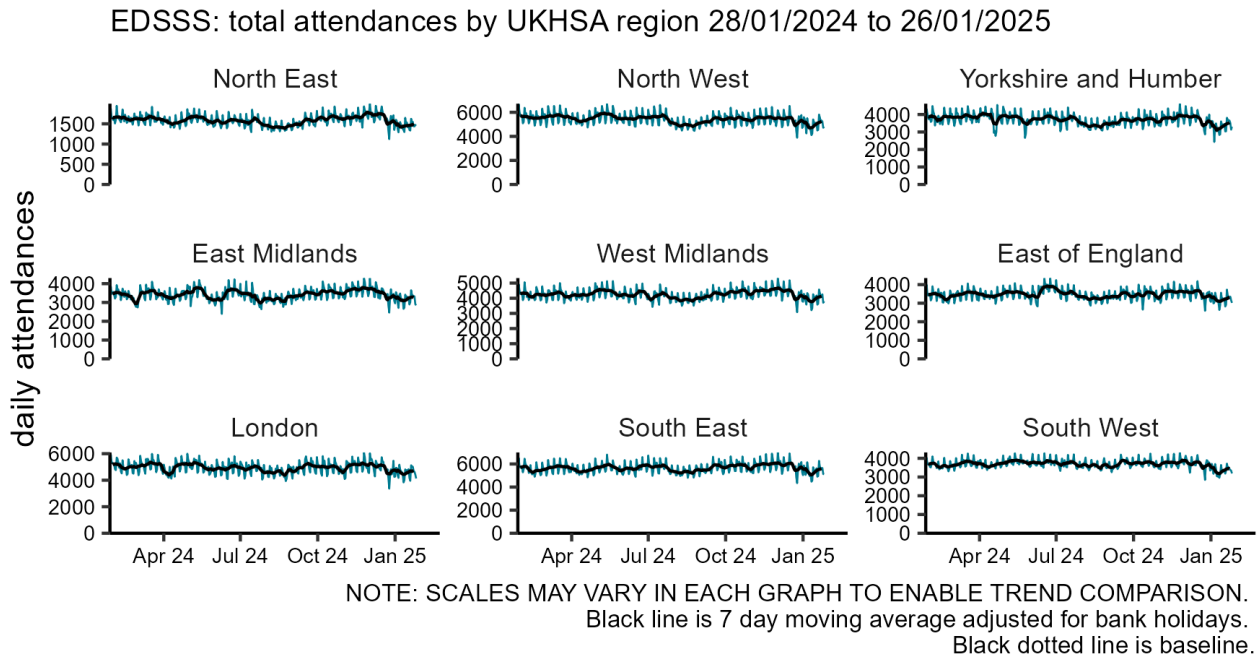


Table 2: The number of emergency department (ED) attendances and number with a diagnosis code included in surveillance each day during the most recent week.

Date	Total attendances[2]	Diagnoses included[2]
20 January 2025	38,315	23,100
21 January 2025	36,294	22,140
22 January 2025	35,473	21,491
23 January 2025	34,853	21,247
24 January 2025	34,792	20,901
25 January 2025	31,982	19,319
26 January 2025	31,664	19,570

Table 3: The number of EDs in total and in each UKHSA Region included in surveillance each day during the most recent week.

UKHSA Region	Number of EDs[2]
North East	6
North West	24
Yorkshire and Humber	14
West Midlands	15
East Midlands	10
East of England	13
London	18
South West	17
South East	21
Total	138

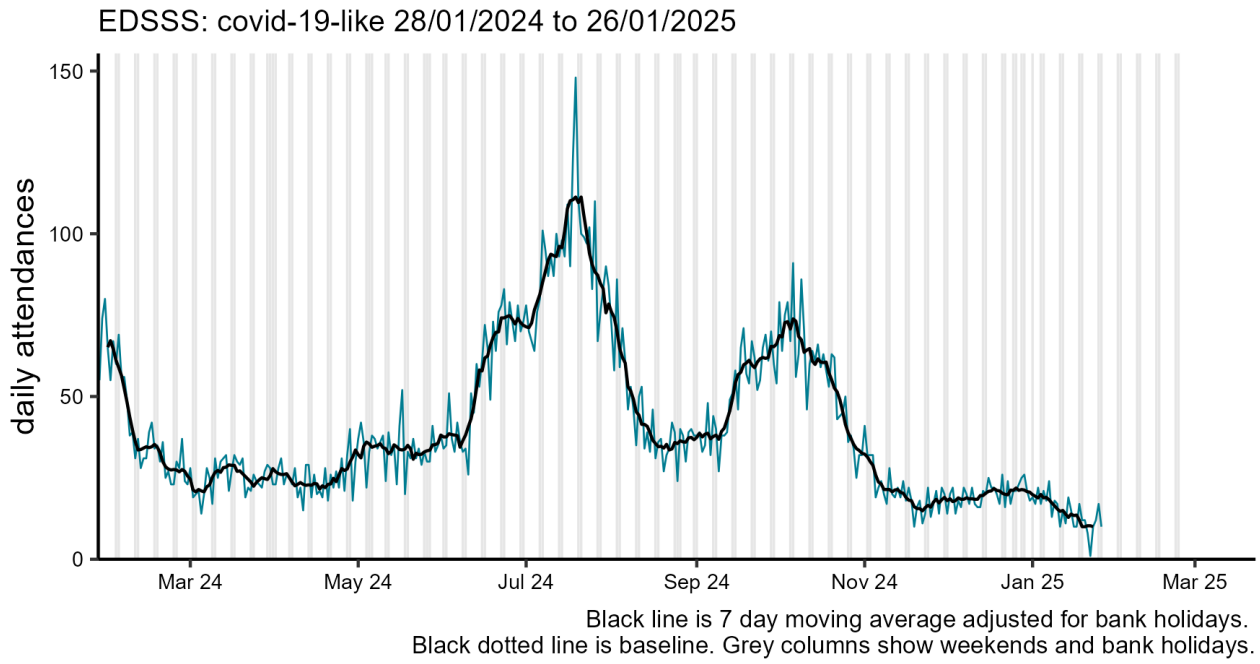
[2] only attendances from Type 01 EDs meeting the weekly reporting criteria are included in this report, for further details see **Notes and caveats**

Respiratory conditions

COVID-19-like

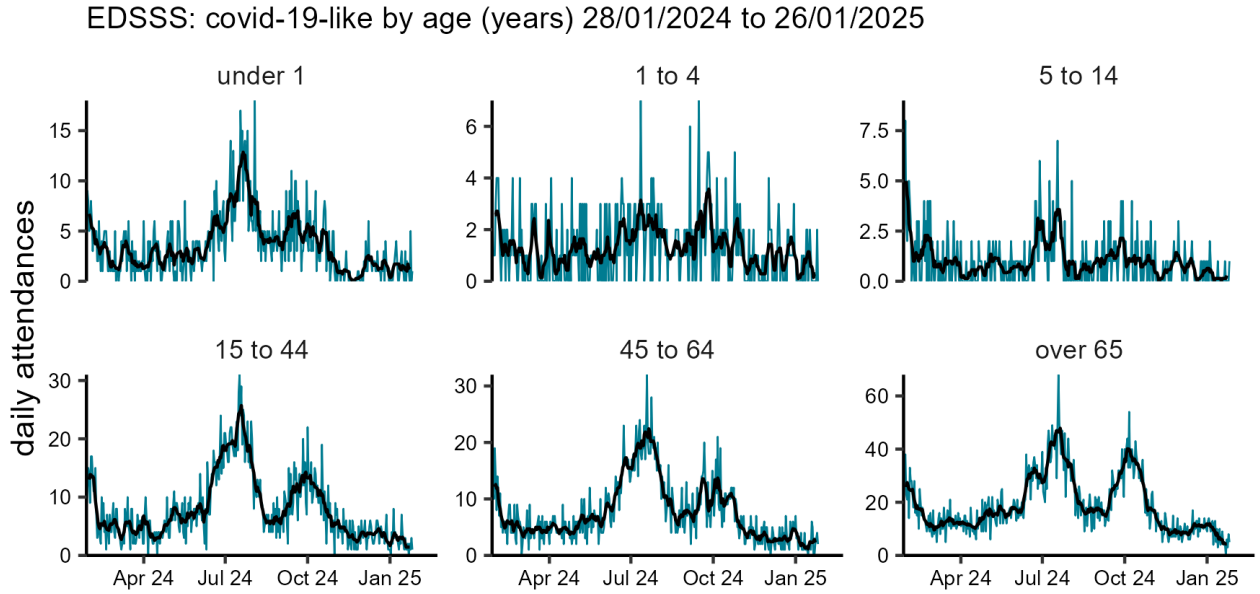
Figure 2: Daily number of COVID-19-like ED attendances (and 7-day moving average adjusted for bank holidays), England (a) nationally, (b) by age and (c) by UKHSA Region.

(a)



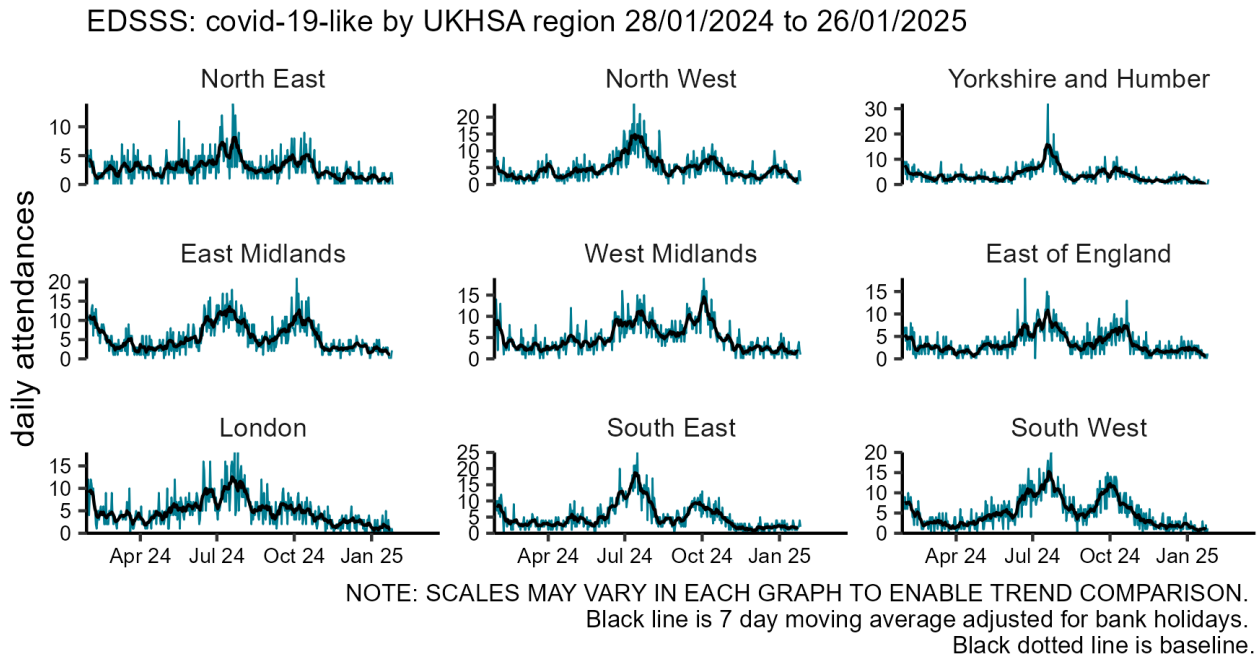
Black line is 7 day moving average adjusted for bank holidays.
Black dotted line is baseline. Grey columns show weekends and bank holidays.

(b)



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

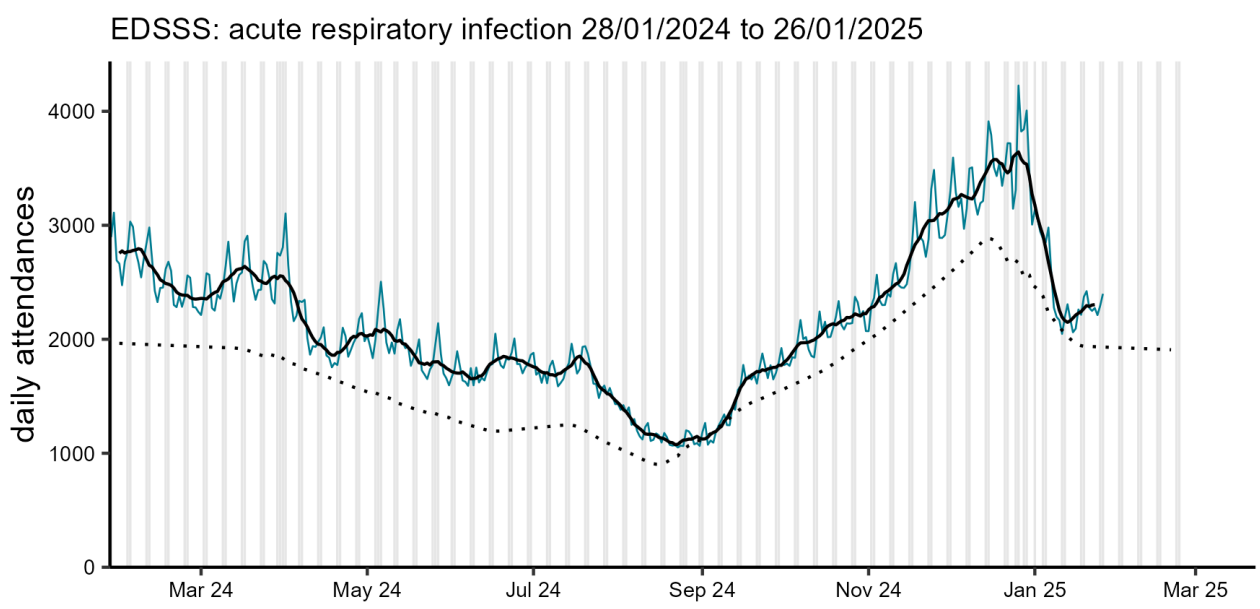
(c)


EDSSS: covid-19-like by UKHSA region 28/01/2024 to 26/01/2025
North East
North West
Yorkshire and Humber
East Midlands
West Midlands
East of England
London
South East
South West
daily attendances
Apr 24
Jul 24
Oct 24
Jan 25
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 respiratory infections

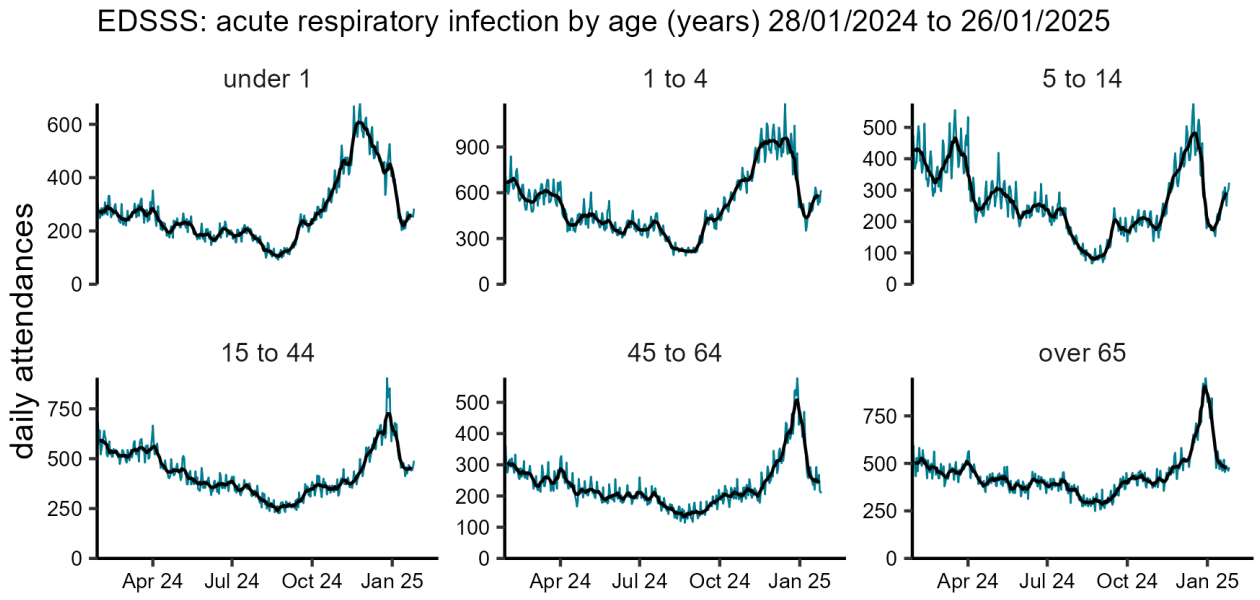
Figure 3: Daily number of acute respiratory infection ED attendances (and 7-day moving average adjusted for bank holidays), England (a) nationally, (b) by age and (c) by UKHSA Region.

(a)



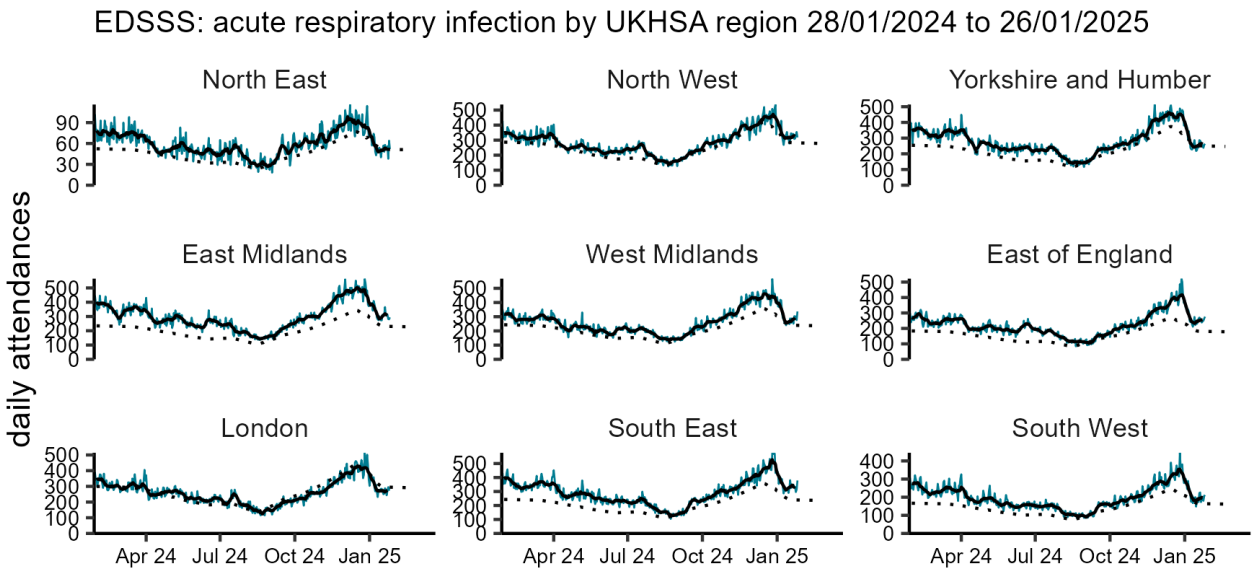
Black line is 7 day moving average adjusted for bank holidays.
Black dotted line is baseline. Grey columns show weekends and bank holidays.

(b)



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

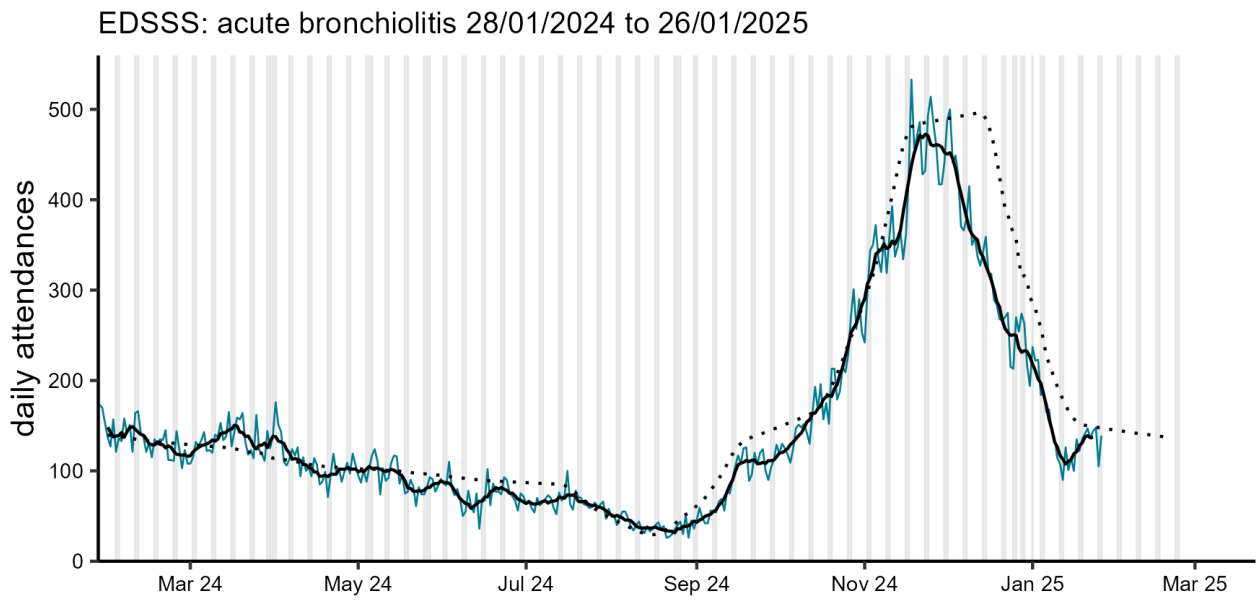
(c)


EDSSS: acute respiratory infection by UKHSA region 28/01/2024 to 26/01/2025
North East
North West
Yorkshire and Humber
East Midlands
West Midlands
East of England
London
South East
South West
daily attendances
Apr 24
Jul 24
Oct 24
Jan 25
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 bronchiolitis/bronchitis

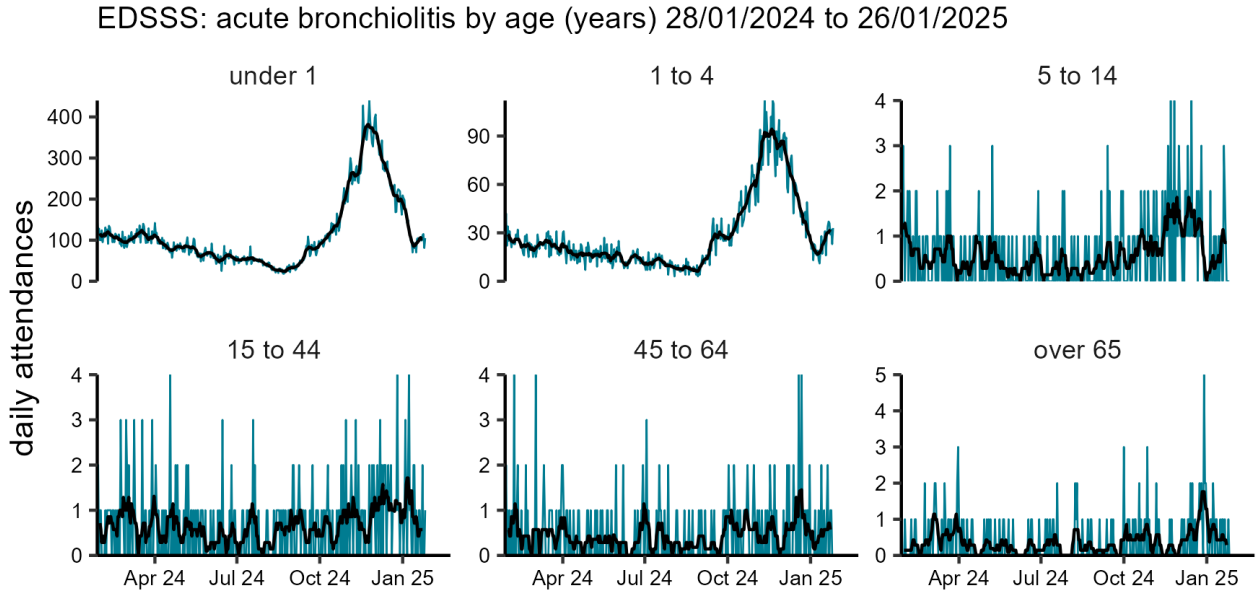
Figure 4: Daily number of acute bronchiolitis/bronchitis ED attendances (and 7-day moving average adjusted for bank holidays), England (a) nationally, (b) by age and (c) by UKHSA Region.

(a)



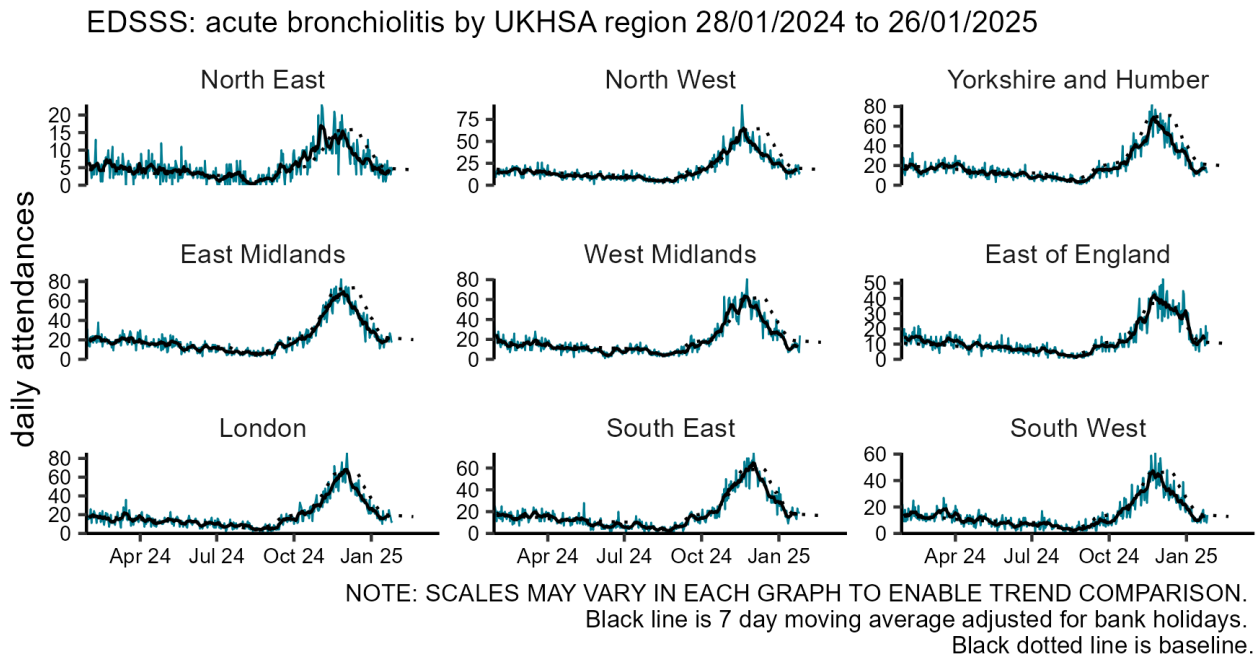
Black line is 7 day moving average adjusted for bank holidays.
Black dotted line is baseline. Grey columns show weekends and bank holidays.

(b)



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

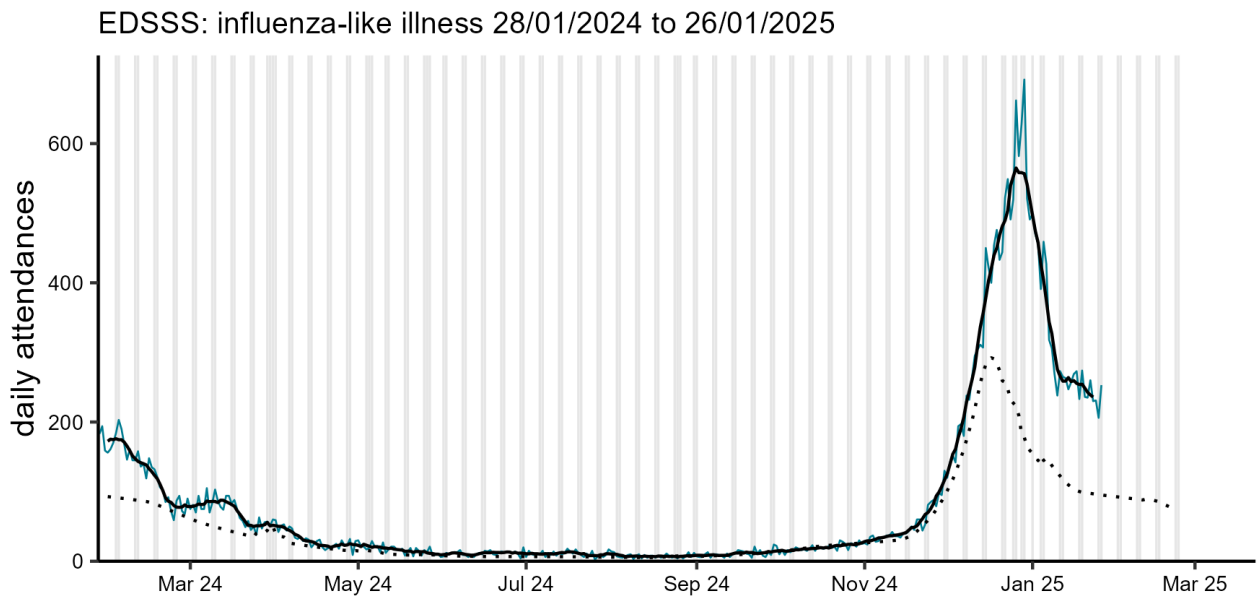
(c)


EDSSS: acute bronchiolitis by UKHSA region 28/01/2024 to 26/01/2025
North East
North West
Yorkshire and Humber
East Midlands
West Midlands
East of England
London
South East
South West
daily attendances
Apr 24
Jul 24
Oct 24
Jan 25
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.

Influenza-like illness

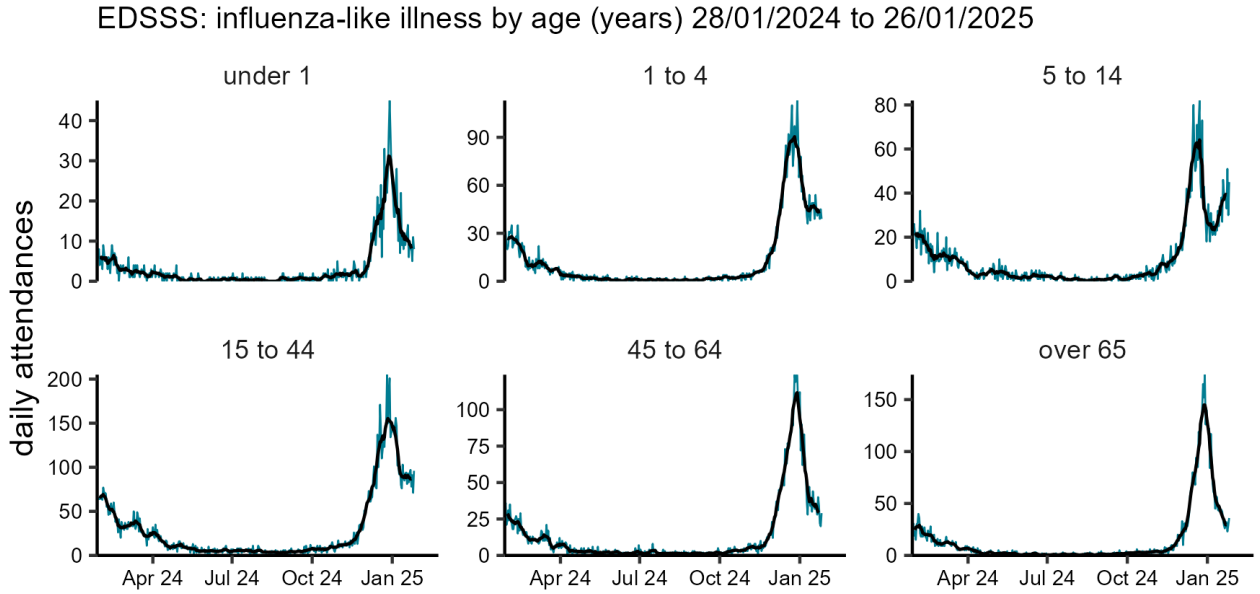
Figure 5: Daily number of influenza-like illness ED attendances (and 7-day moving average adjusted for bank holidays), England (a) nationally, (b) by age and (c) by UKHSA Region.

(a)



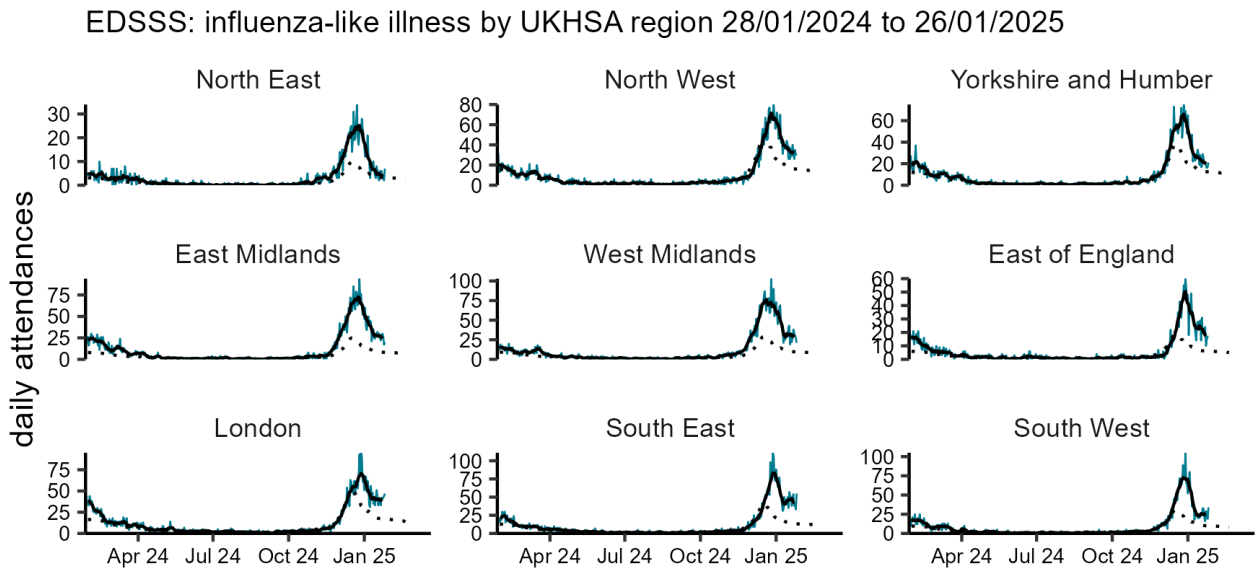
Black line is 7 day moving average adjusted for bank holidays.
Black dotted line is baseline. Grey columns show weekends and bank holidays.

(b)



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

(c)

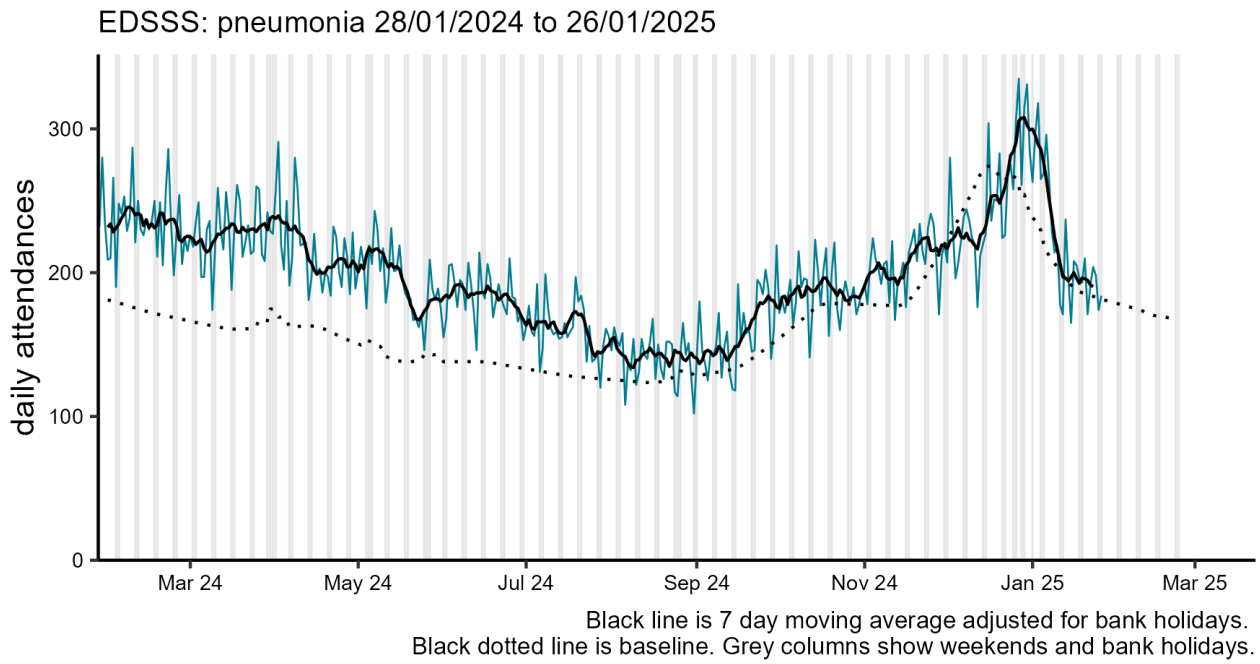


NOTE: SCALES MAY VARY IN EACH GRAPH TO ENABLE TREND COMPARISON.
Black line is 7 day moving average adjusted for bank holidays.
Black dotted line is baseline.

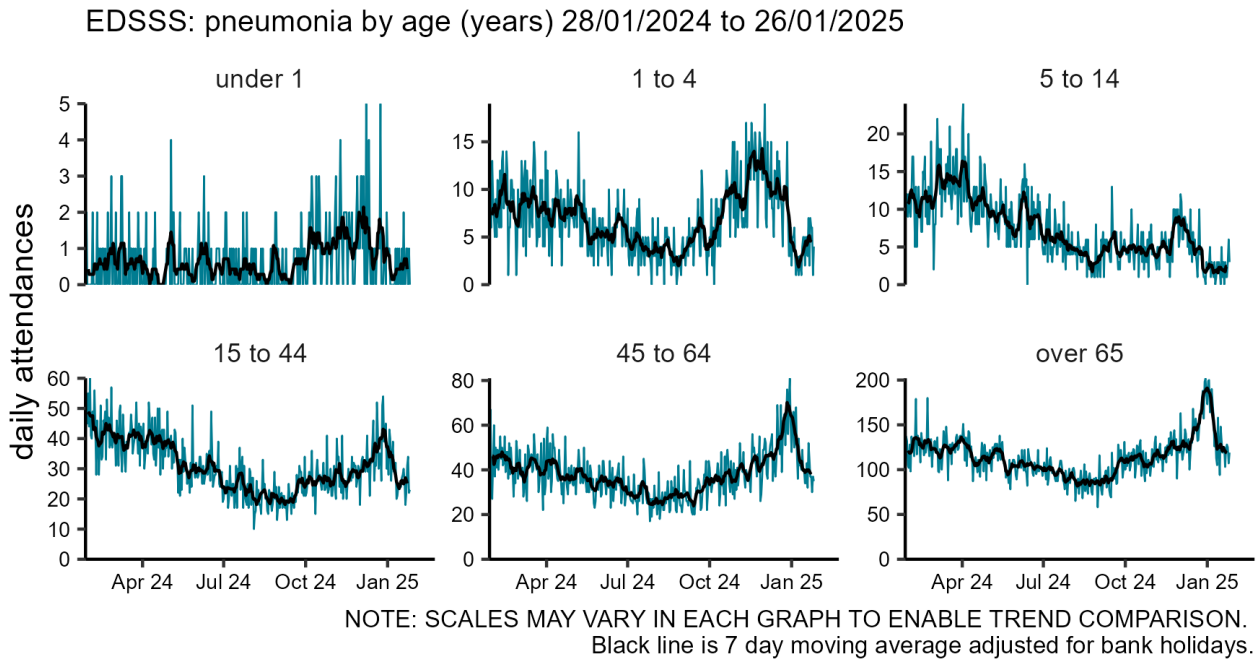
Pneumonia

Figure 6: Daily number of pneumonia ED attendances (and 7-day moving average adjusted for bank holidays), England (a) nationally, (b) by age and (c) by UKHSA Region.

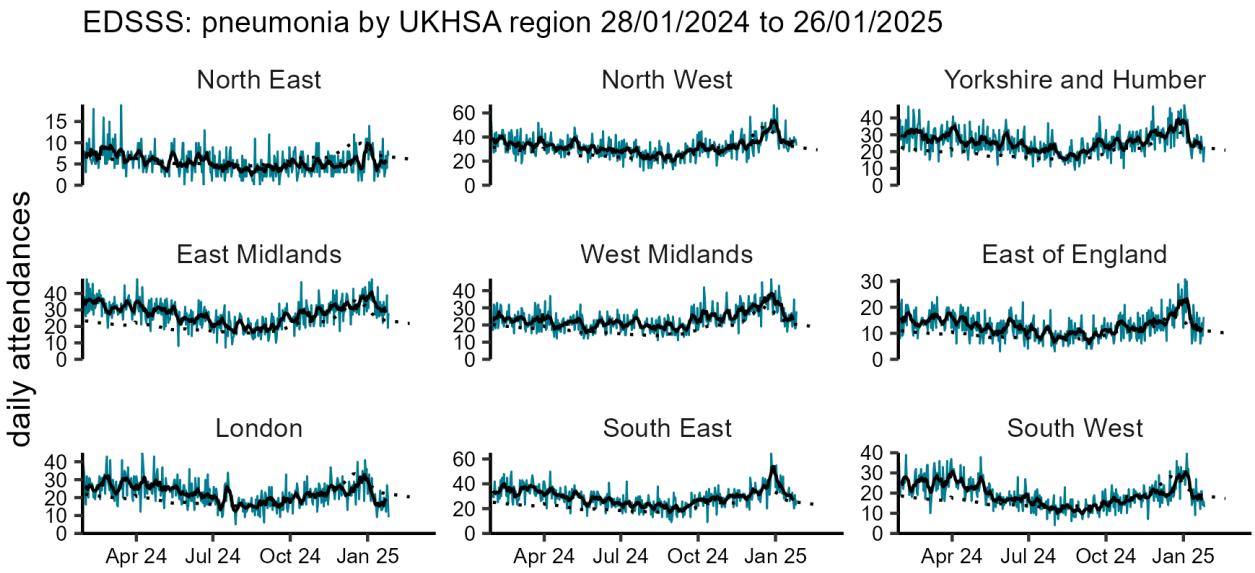
(a)



(b)



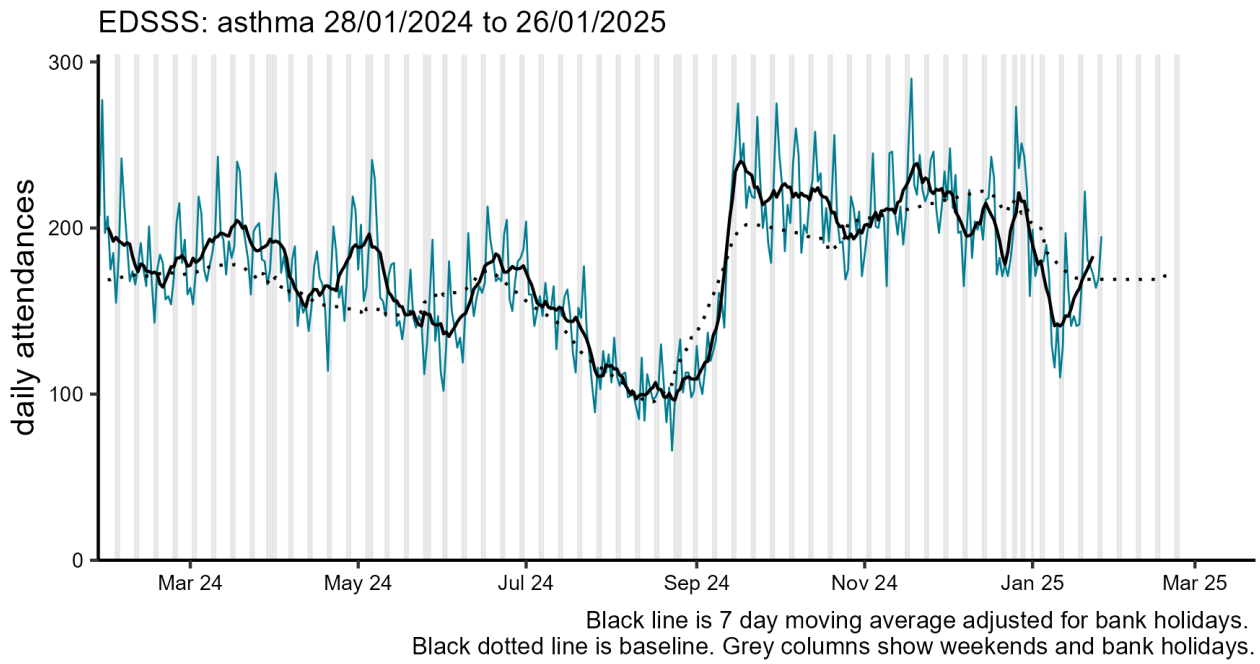
(c)


EDSSS: pneumonia by UKHSA region 28/01/2024 to 26/01/2025
North East
North West
Yorkshire and Humber
East Midlands
West Midlands
East of England
London
South East
South West
daily attendances
Apr 24
Jul 24
Oct 24
Jan 25
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.

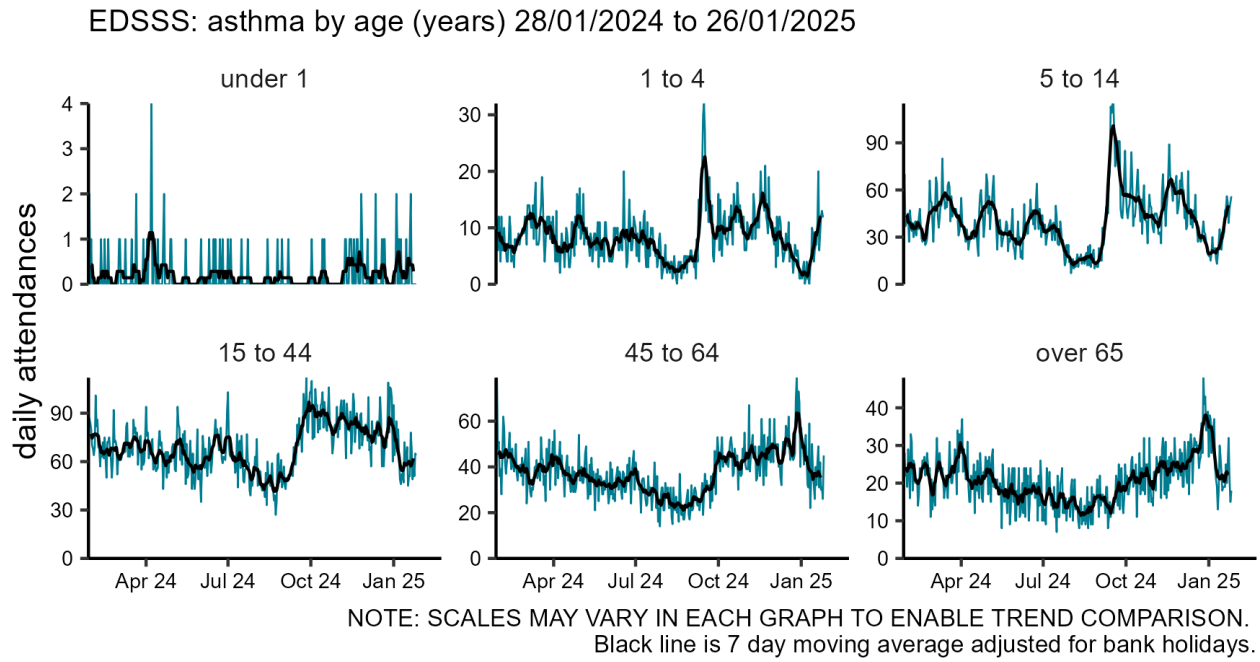
Asthma

Figure 7: Daily number of asthma ED attendances (and 7-day moving average adjusted for bank holidays), England (a) nationally, (b) by age and (c) by UKHSA Region.

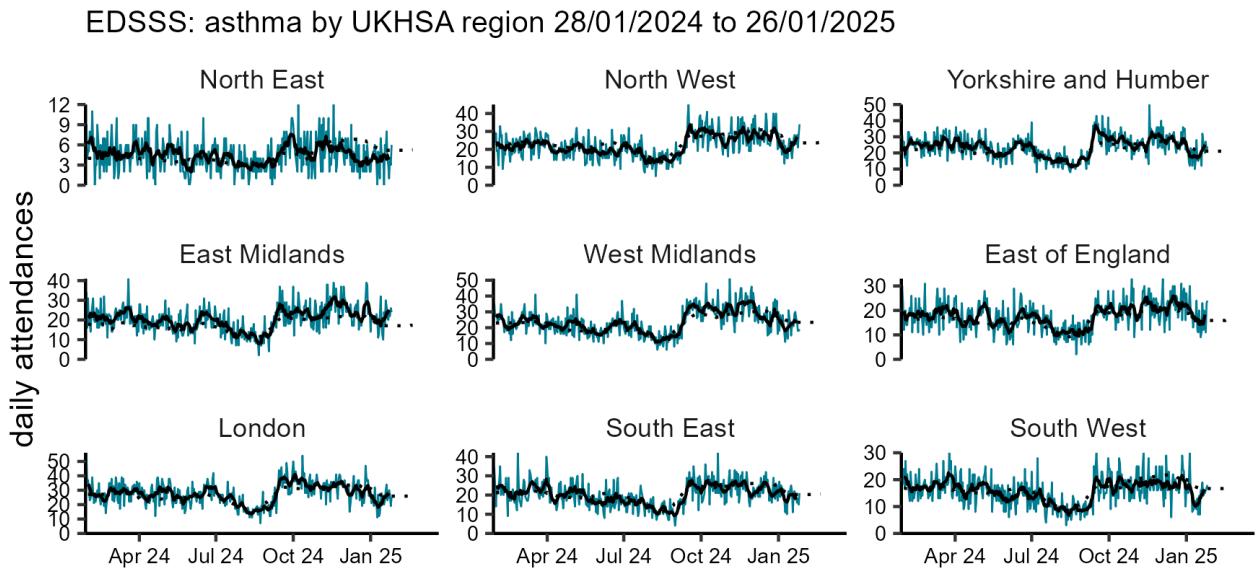
(a)



(b)



(c)

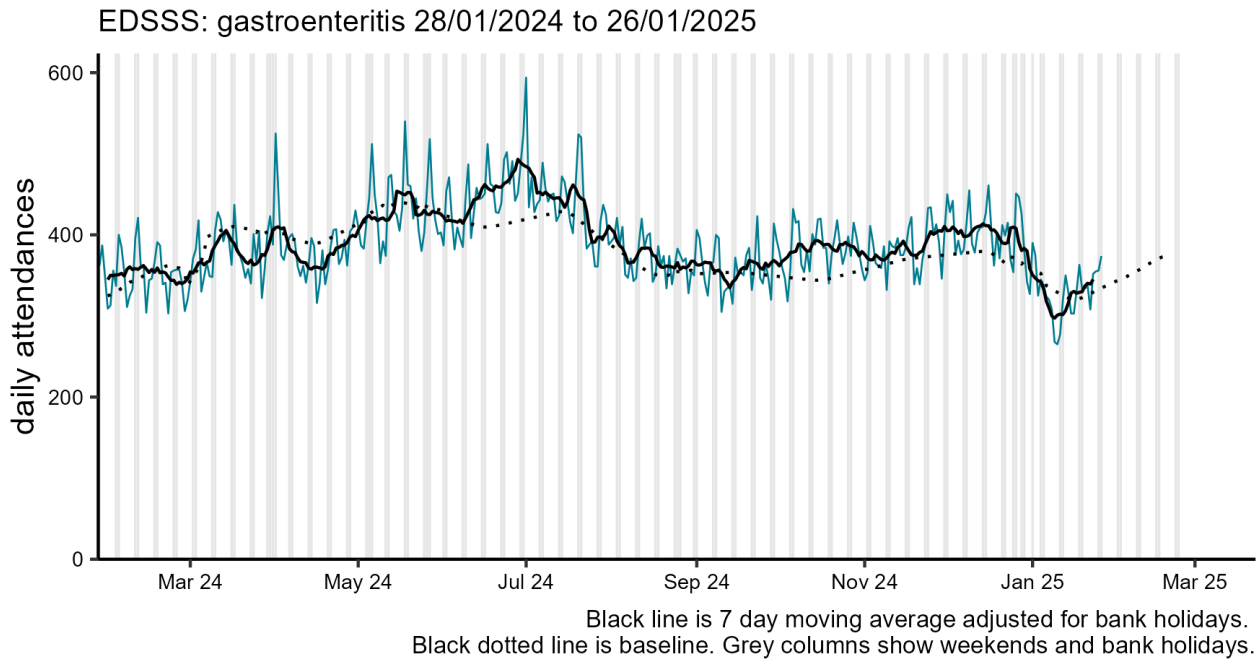

EDSSS: asthma by UKHSA region 28/01/2024 to 26/01/2025
North East
North West
Yorkshire and Humber
East Midlands
West Midlands
East of England
London
South East
South West
daily attendances
Apr 24
Jul 24
Oct 24
Jan 25
NOTE: SCALES MAY VARY IN EACH GRAPH TO ENABLE TREND COMPARISON.
Black line is 7 day moving average adjusted for bank holidays.
Black dotted line is baseline.

Gastrointestinal conditions

Gastroenteritis

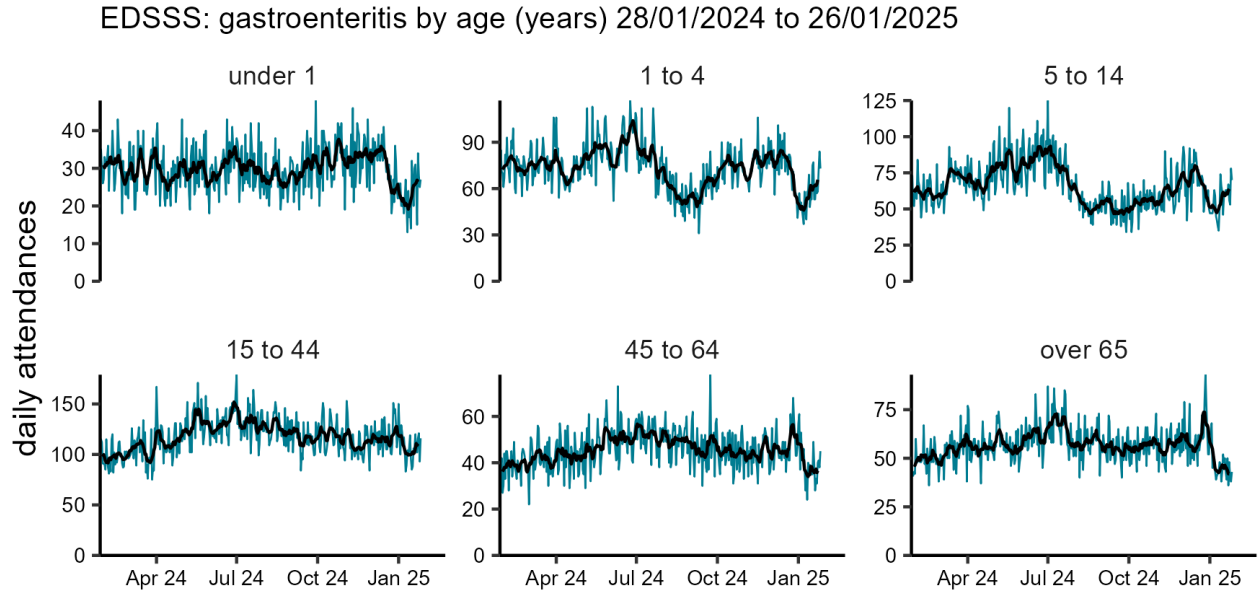
Figure 8: Daily number of gastroenteritis ED attendances (and 7-day moving average adjusted for bank holidays), England (a) nationally, (b) by age and (c) by UKHSA Region.

(a)



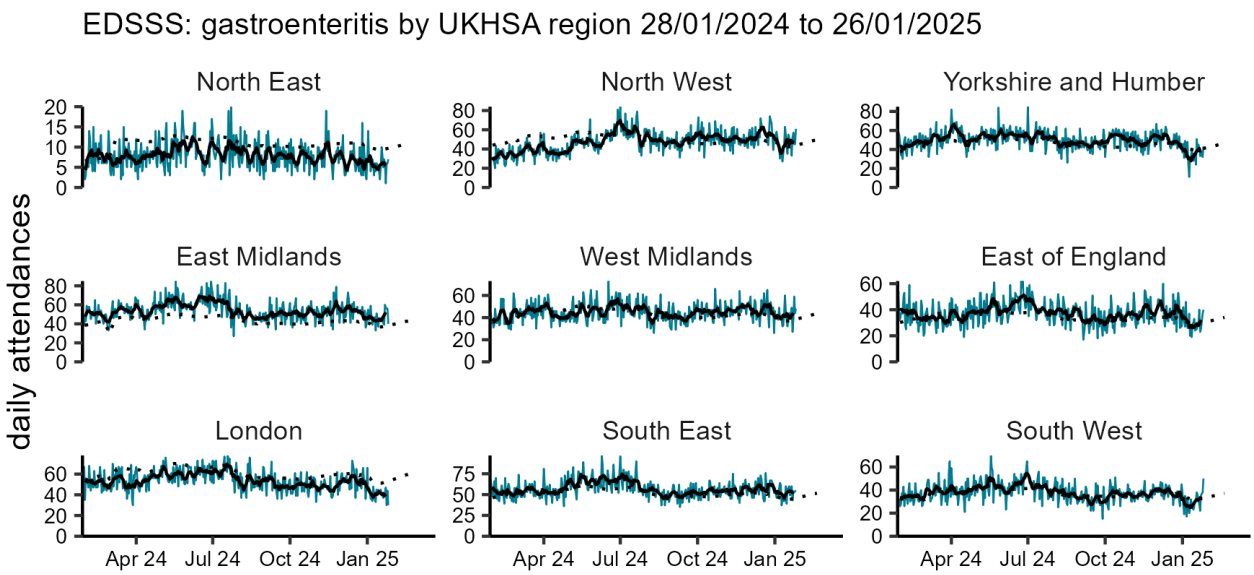
Black line is 7 day moving average adjusted for bank holidays.
Black dotted line is baseline. Grey columns show weekends and bank holidays.

(b)



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

(c)

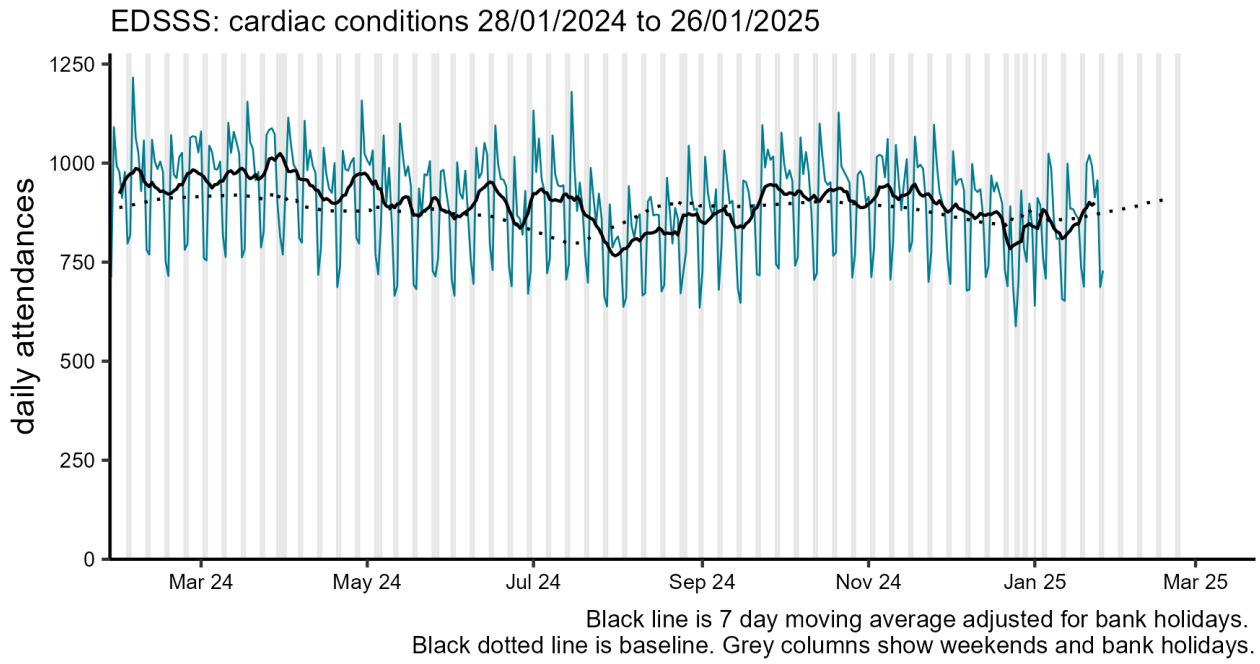

EDSSS: gastroenteritis by UKHSA region 28/01/2024 to 26/01/2025
North East
North West
Yorkshire and Humber
East Midlands
West Midlands
East of England
London
South East
South West
daily attendances
Apr 24
Jul 24
Oct 24
Jan 25
NOTE: SCALES MAY VARY IN EACH GRAPH TO ENABLE TREND COMPARISON.
Black line is 7 day moving average adjusted for bank holidays.
Black dotted line is baseline.

Cardiac conditions

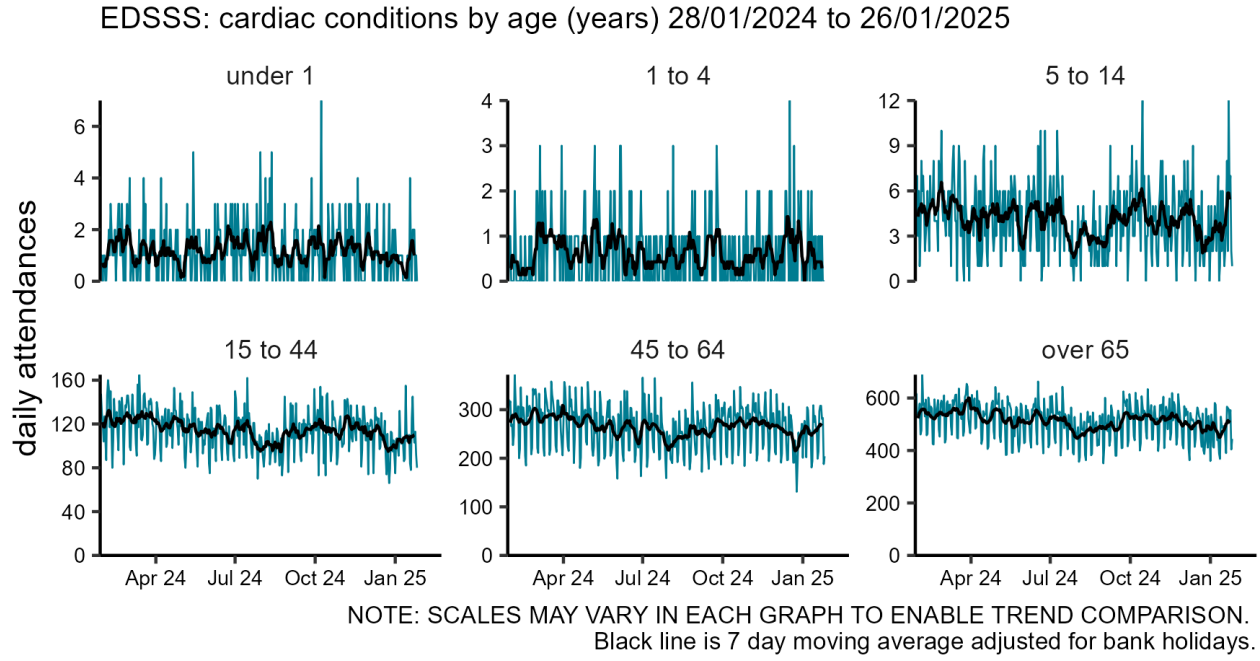
Cardiac

Figure 9: Daily number of cardiac ED attendances (and 7-day moving average adjusted for bank holidays), England (a) nationally, (b) by age and (c) by UKHSA Region.

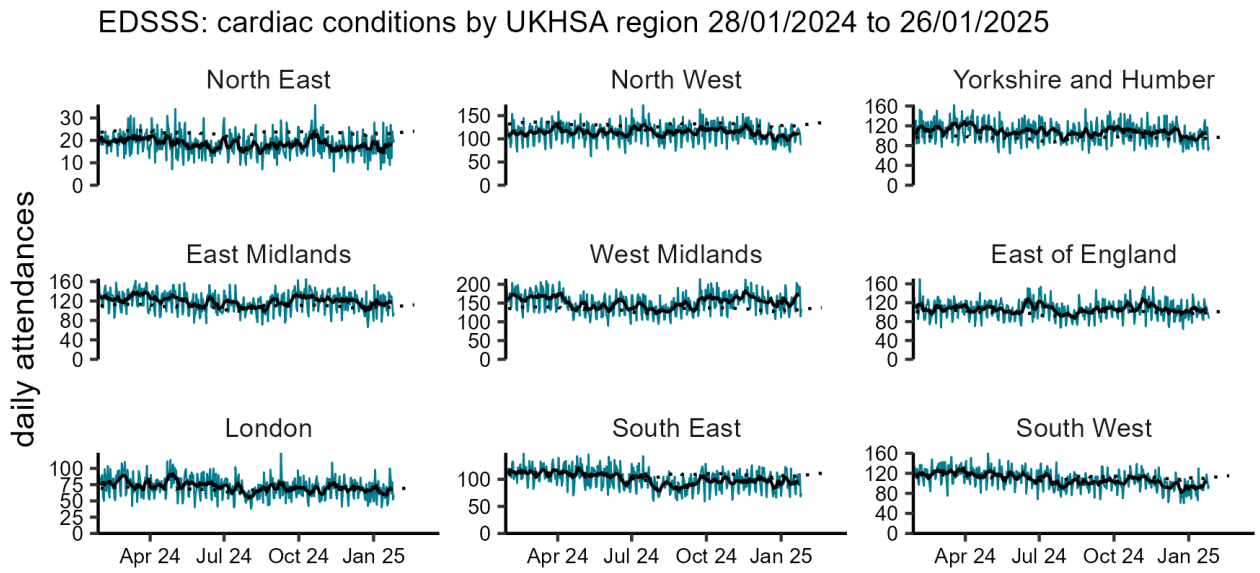
(a)



(b)



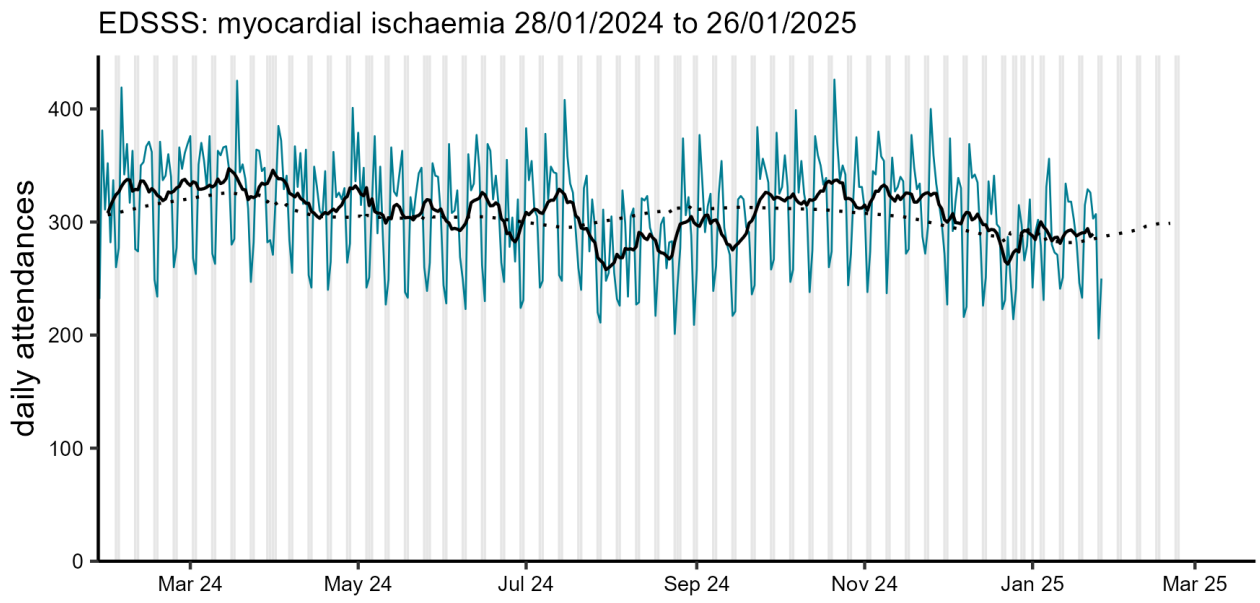
(c)


EDSSS: cardiac conditions by UKHSA region 28/01/2024 to 26/01/2025
North East
North West
Yorkshire and Humber
East Midlands
West Midlands
East of England
London
South East
South West
daily attendances
Apr 24
Jul 24
Oct 24
Jan 25
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.

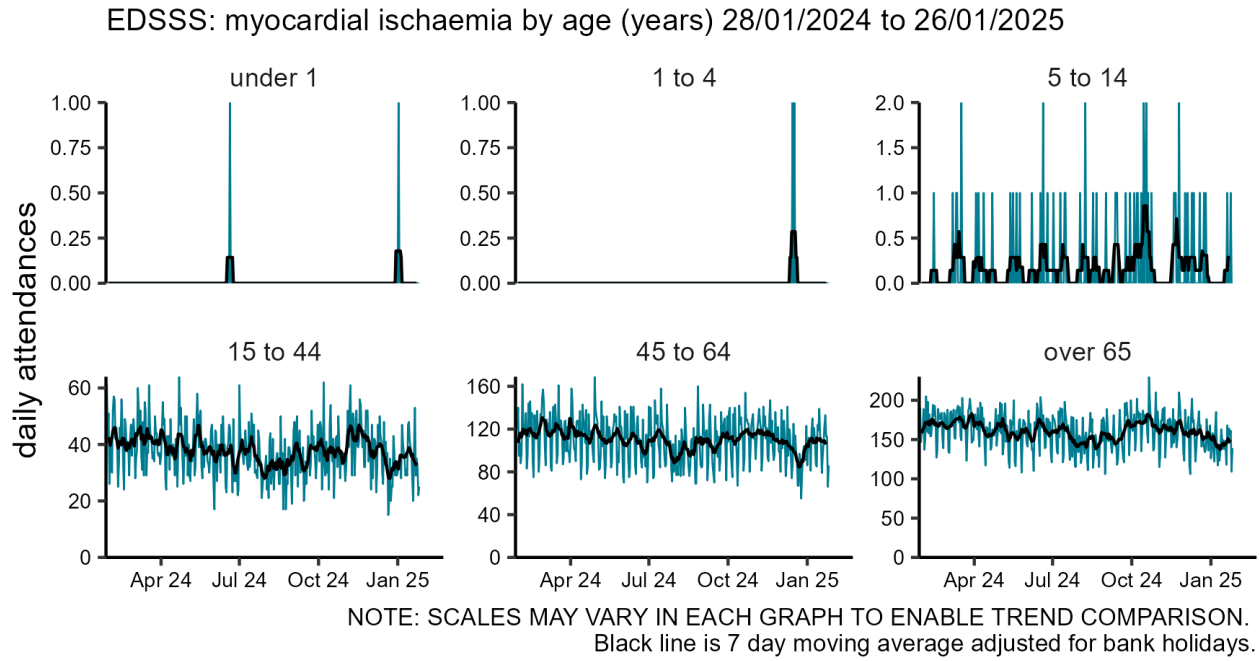
Myocardial ischaemia

Figure 10: Daily number of myocardial ischaemia ED attendances (and 7-day moving average adjusted for bank holidays), England (a) nationally, (b) by age and (c) by UKHSA Region.

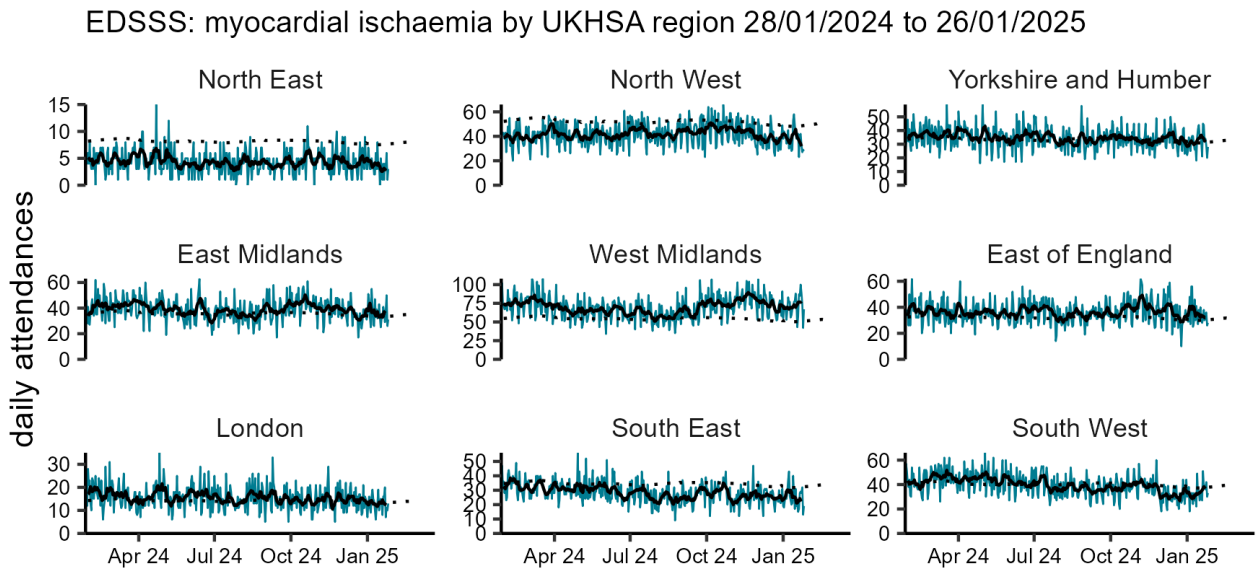
(a)



(b)



(c)

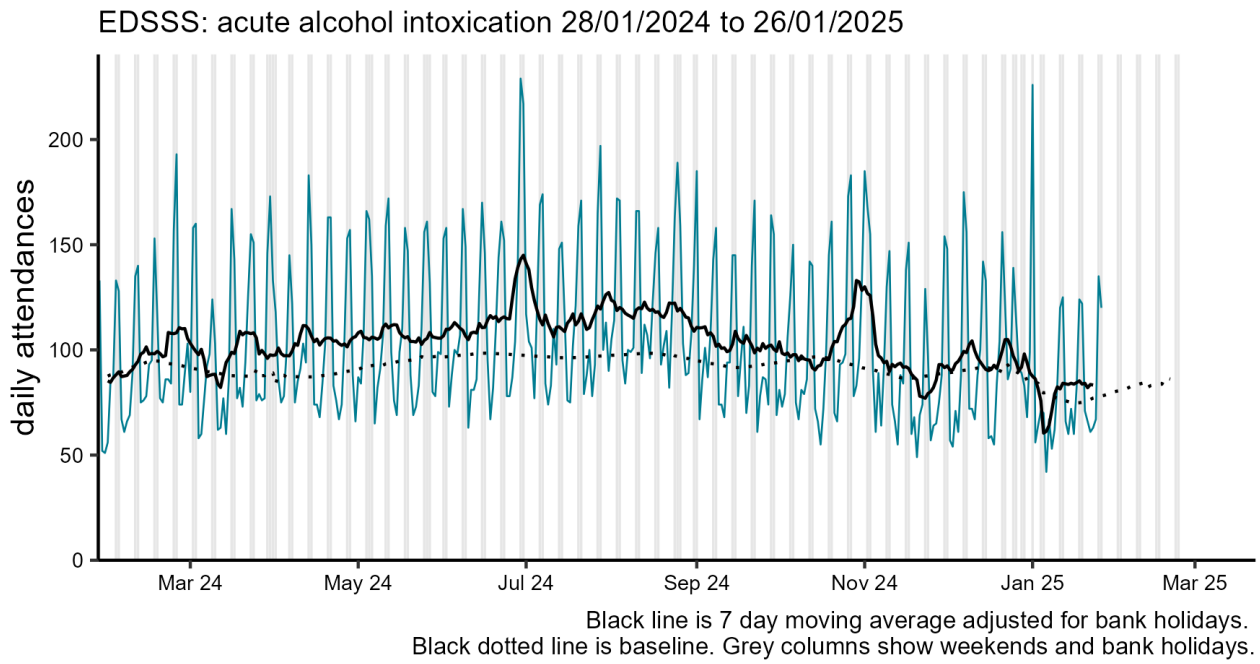

EDSSS: myocardial ischaemia by UKHSA region 28/01/2024 to 26/01/2025
North East
North West
Yorkshire and Humber
East Midlands
West Midlands
East of England
London
South East
South West
daily attendances
Apr 24
Jul 24
Oct 24
Jan 25
NOTE: SCALES MAY VARY IN EACH GRAPH TO ENABLE TREND COMPARISON.
Black line is 7 day moving average adjusted for bank holidays.
Black dotted line is baseline.

Other conditions

Acute alcohol intoxication

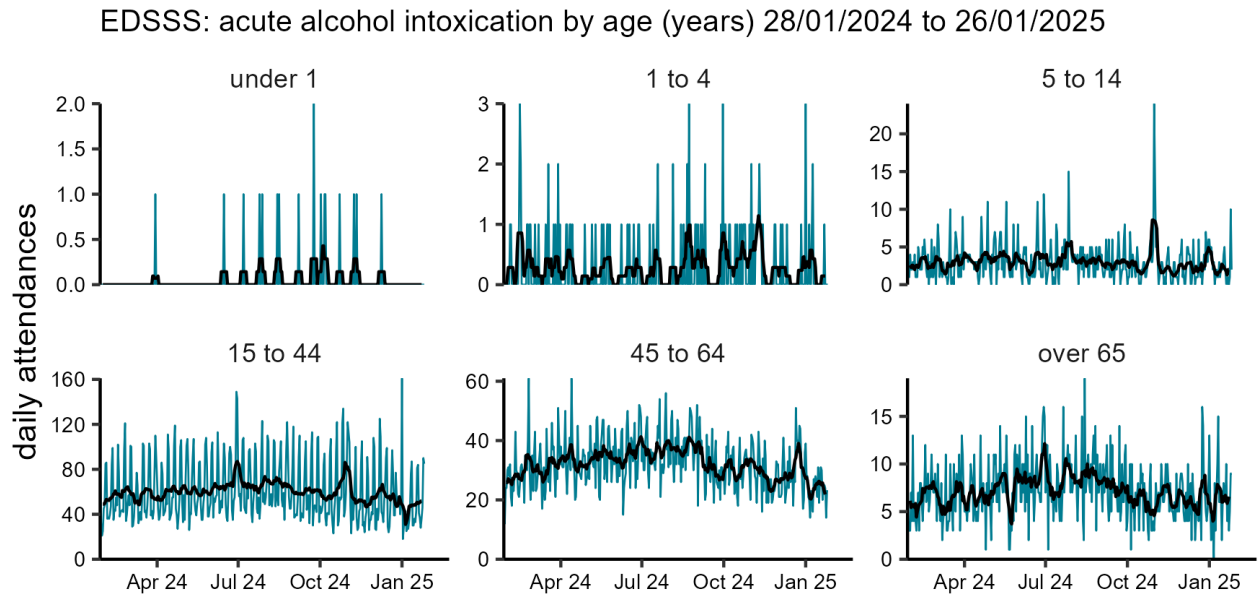
Figure 11: Daily number of acute alcohol intoxication ED attendances (and 7-day moving average adjusted for bank holidays), England (a) nationally, (b) by age and (c) by UKHSA Region.

(a)



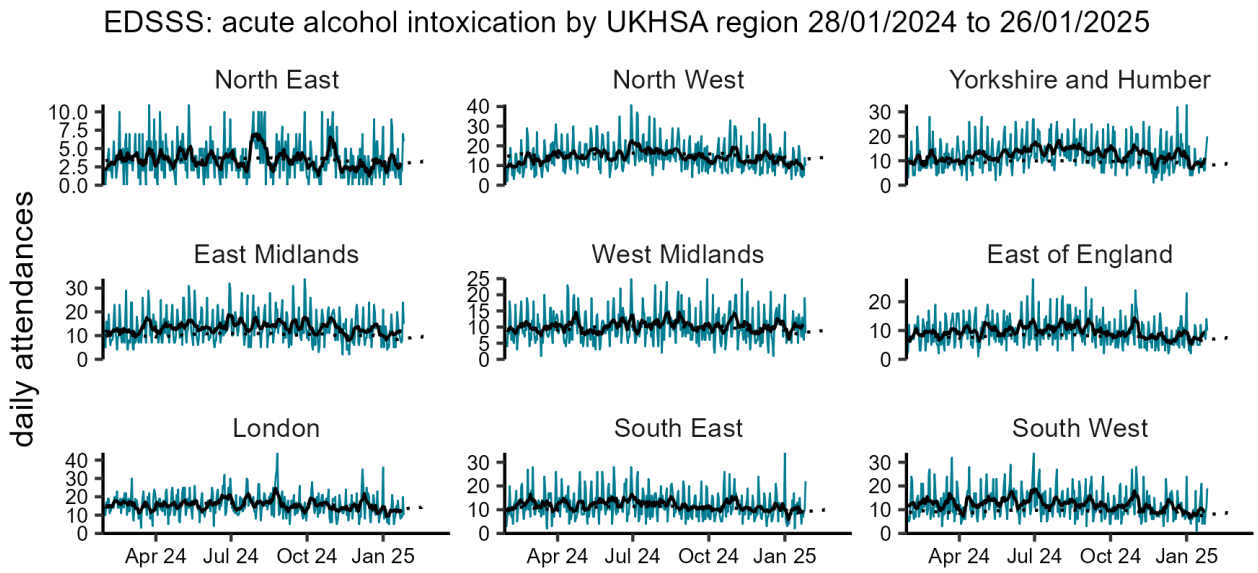
Black line is 7 day moving average adjusted for bank holidays.
Black dotted line is baseline. Grey columns show weekends and bank holidays.

(b)



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

(c)

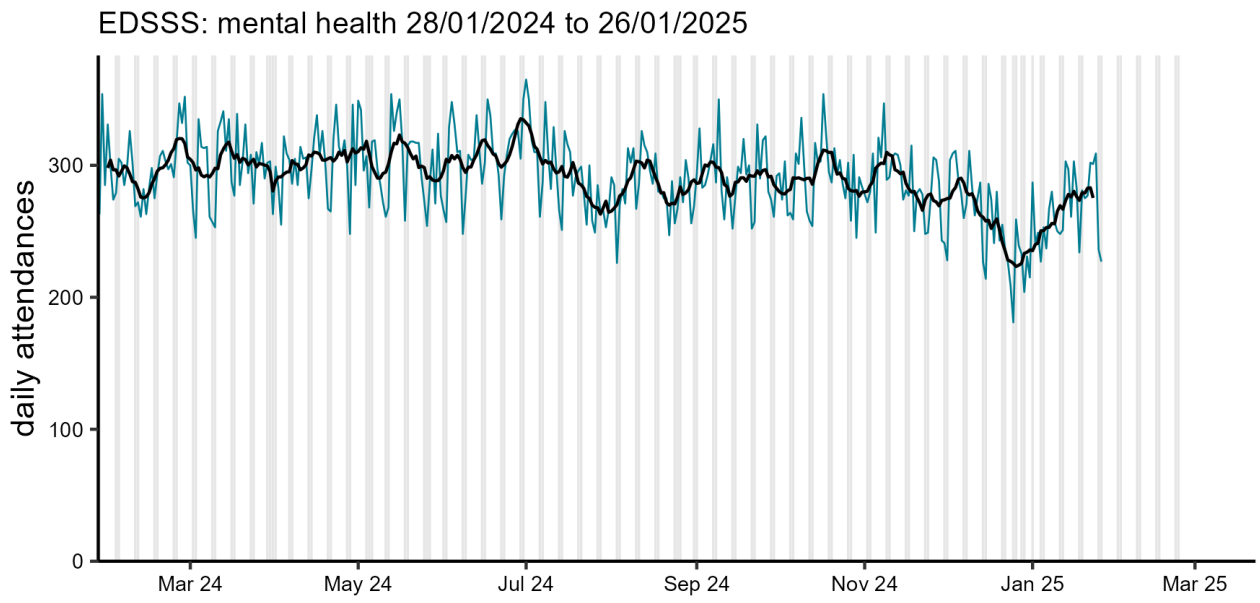

EDSSS: acute alcohol intoxication by UKHSA region 28/01/2024 to 26/01/2025
North East
North West
Yorkshire and Humber
East Midlands
West Midlands
East of England
London
South East
South West
daily attendances
Apr 24
Jul 24
Oct 24
Jan 25
NOTE: SCALES MAY VARY IN EACH GRAPH TO ENABLE TREND COMPARISON.
Black line is 7 day moving average adjusted for bank holidays.
Black dotted line is baseline.

Mental health

Figure 12: Daily number of mental health[3] ED attendances (and 7-day moving average adjusted for bank holidays), England (a) nationally, (b) by age and (c) by UKHSA Region.

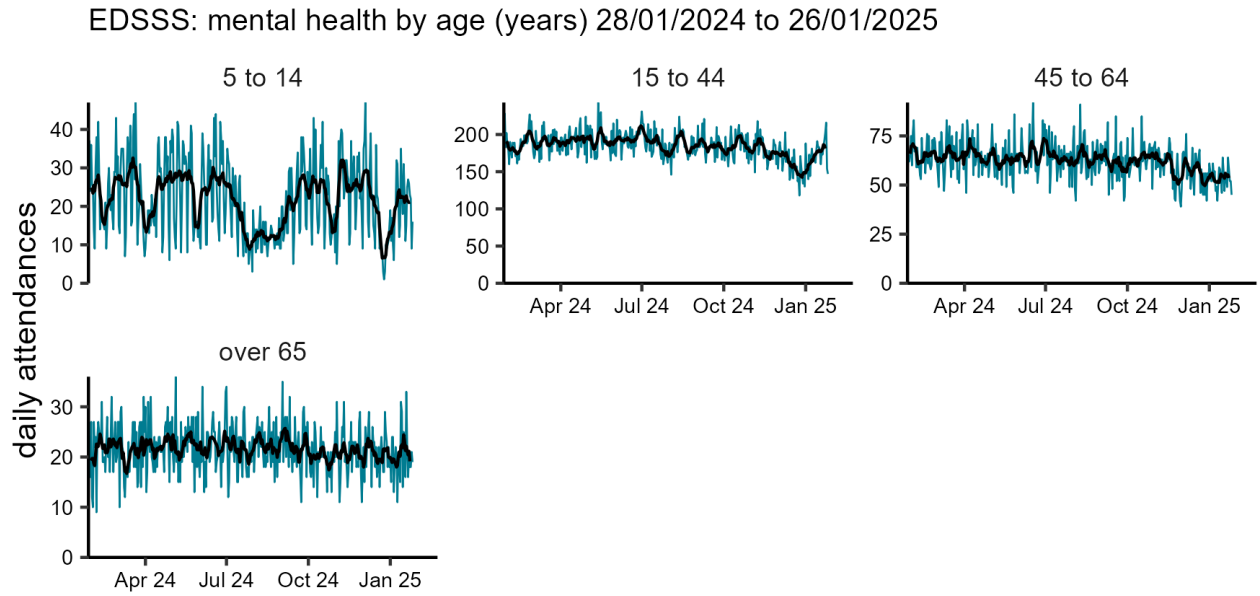
[3] mental health attendances reported here are those with a primary diagnosis in the ECDS mental health diagnosis grouping. Attendances where the primary diagnosis relates to overdose, alcohol use or self harm are not included.

(a)



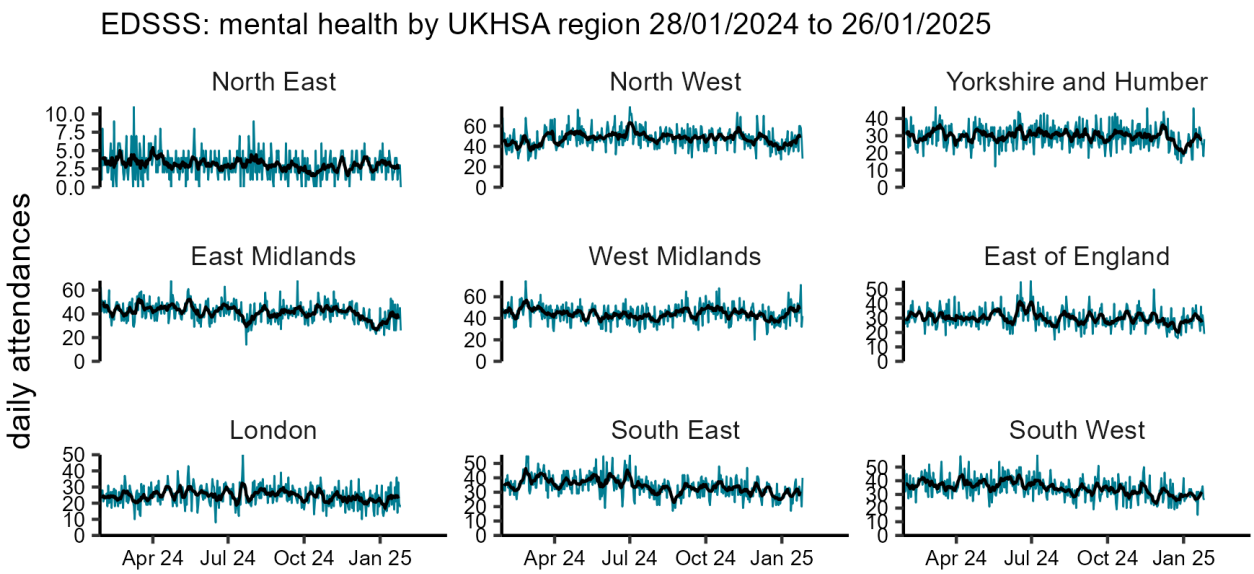
Black line is 7 day moving average adjusted for bank holidays.
Black dotted line is baseline. Grey columns show weekends and bank holidays.

(b)



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

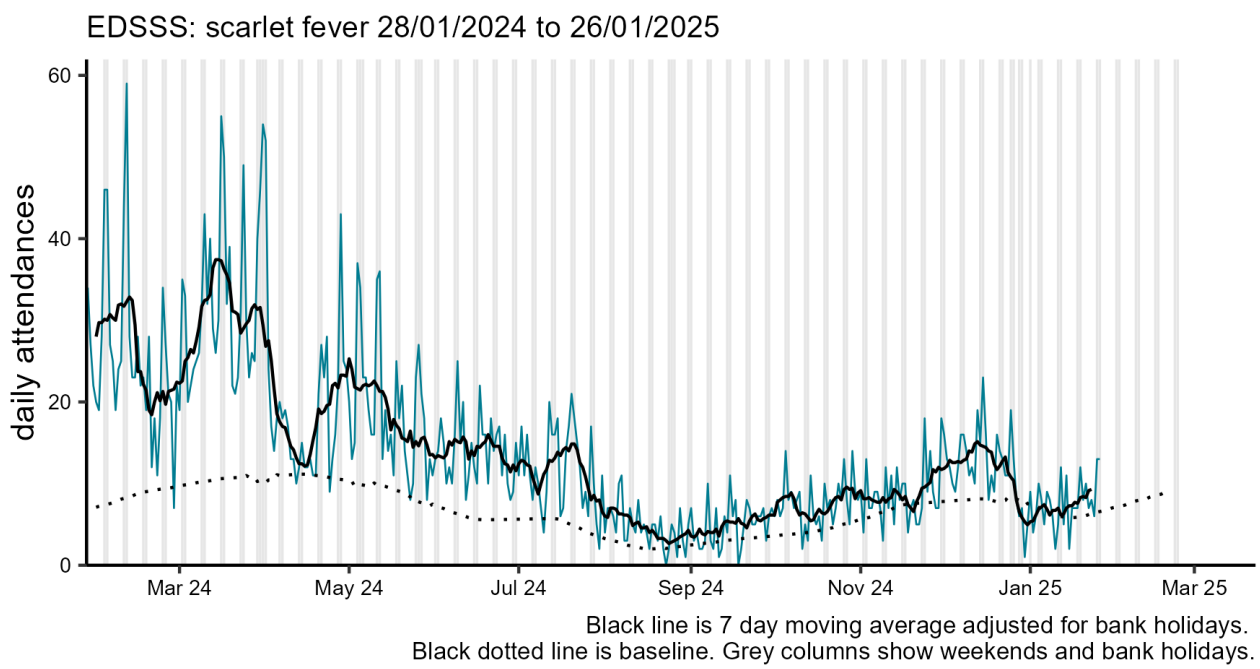
(c)


EDSSS: mental health by UKHSA region 28/01/2024 to 26/01/2025
North East
North West
Yorkshire and Humber
East Midlands
West Midlands
East of England
London
South East
South West
daily attendances
Apr 24
Jul 24
Oct 24
Jan 25
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.

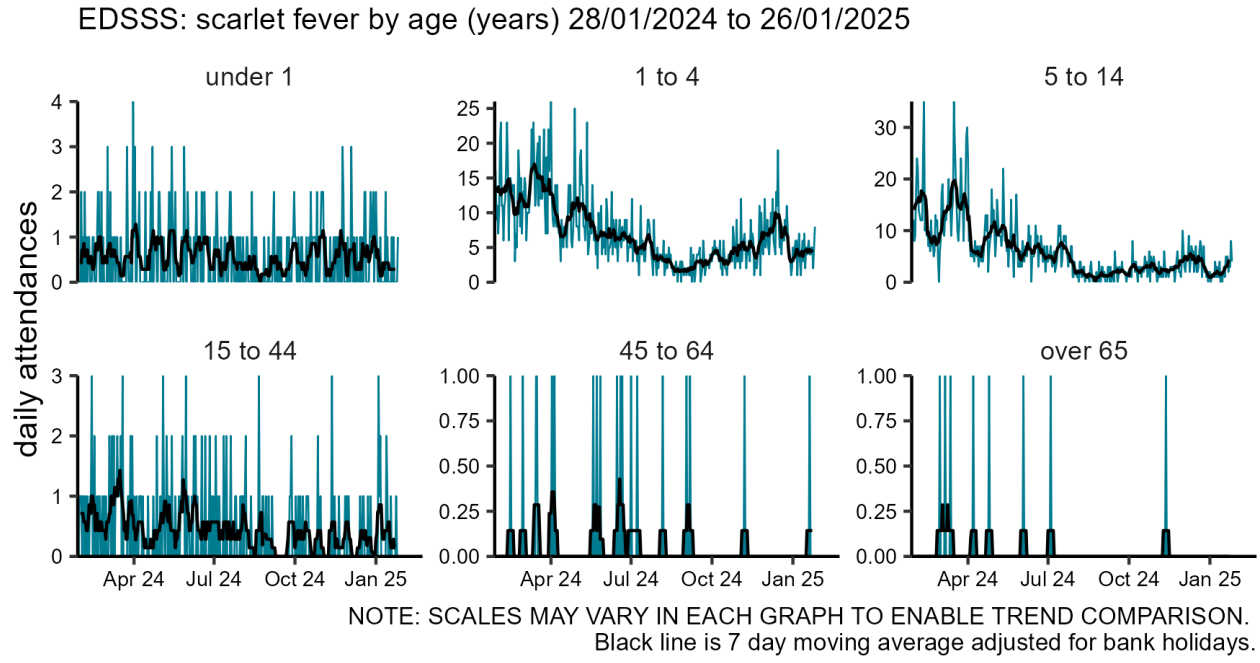
Scarlet fever

Figure 13: Daily number of scarlet fever ED attendances (and 7-day moving average adjusted for bank holidays), England (a) nationally, (b) by age and (c) by UKHSA Region.

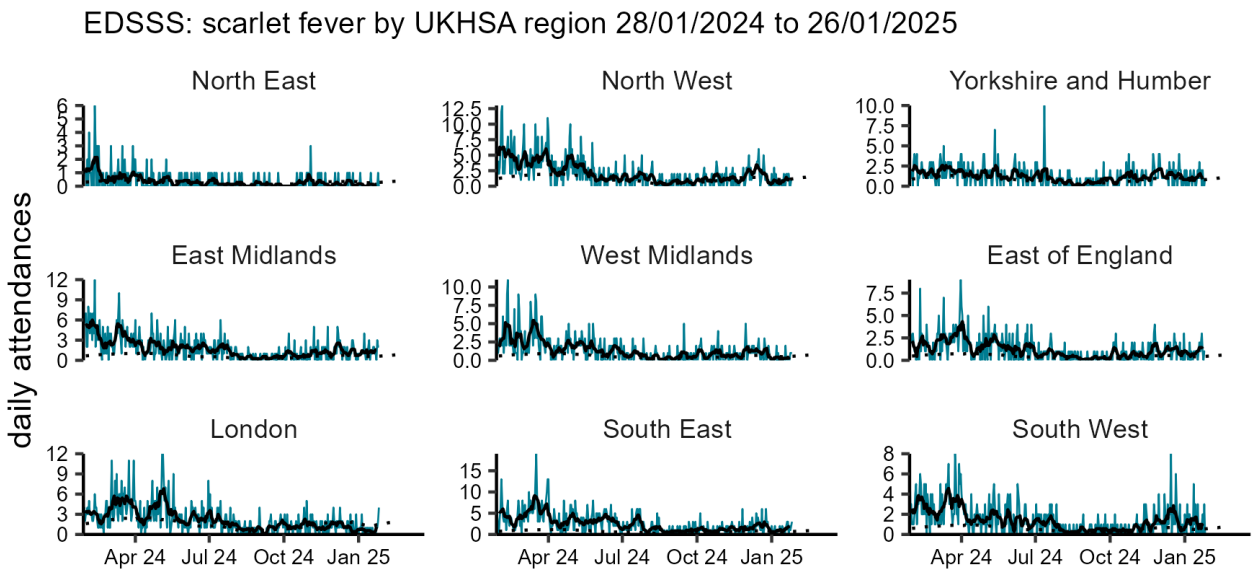
(a)



(b)



(c)


EDSSS: scarlet fever by UKHSA region 28/01/2024 to 26/01/2025
North East
North West
Yorkshire and Humber
East Midlands
West Midlands
East of England
London
South East
South West
daily attendances
Apr 24
Jul 24
Oct 24
Jan 25
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

UKHSA and the Met Office operate a weather-health alert system that includes both heat and cold weather alert periods. Syndromic indicators are used to monitor the impact of both extreme hot and cold weather in England during these periods and will be routinely 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 30 September

Highest weather alert level during the current reporting week:

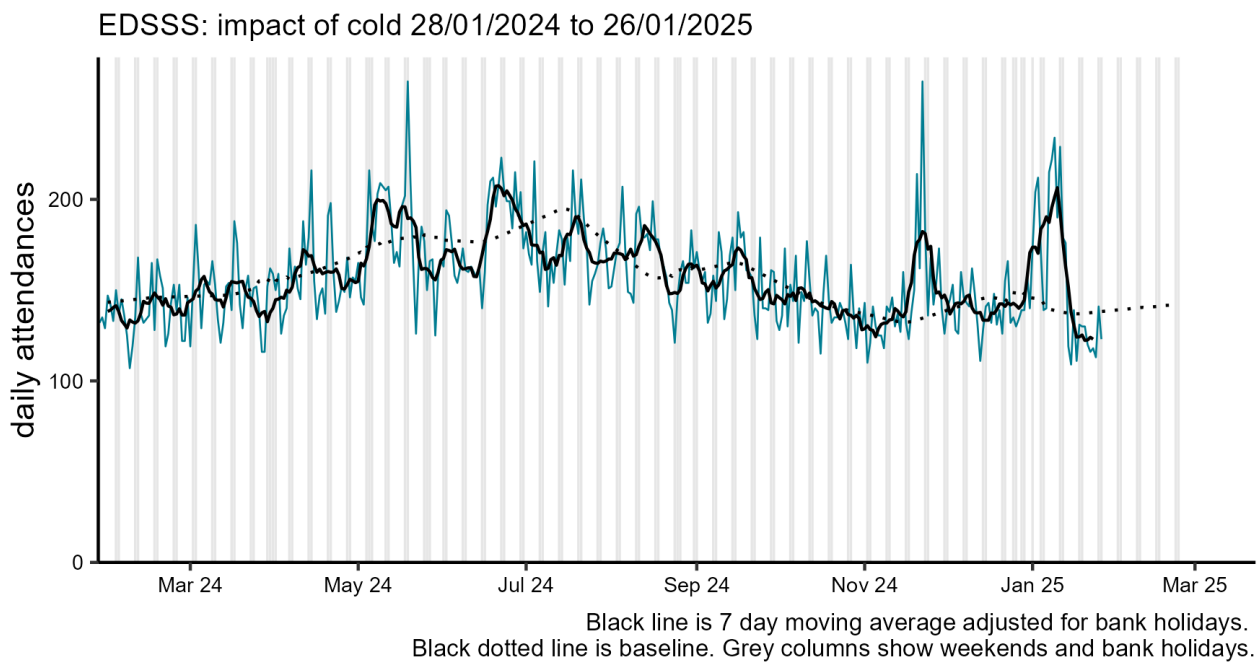
Yellow alert (cold weather response)

Impact of cold

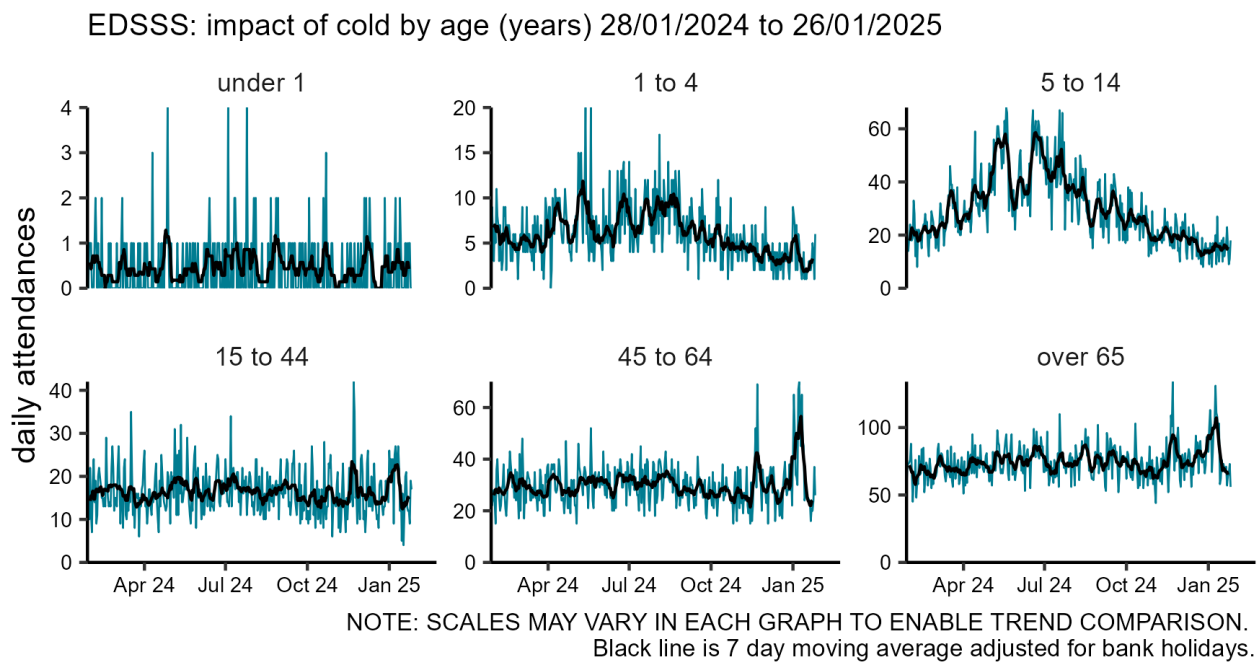
Figure 14: Daily number of impact of cold[4] ED attendances (and 7-day moving average adjusted for bank holidays), England (a) nationally, (b) by age and (c) by UKHSA Region.

[4] impact of cold attendances reported here are restricted to female attendances, with a primary diagnosis of fracture of the femur/wrist/forearm plus cold specific diagnoses of hypothermia, or cold injuries.

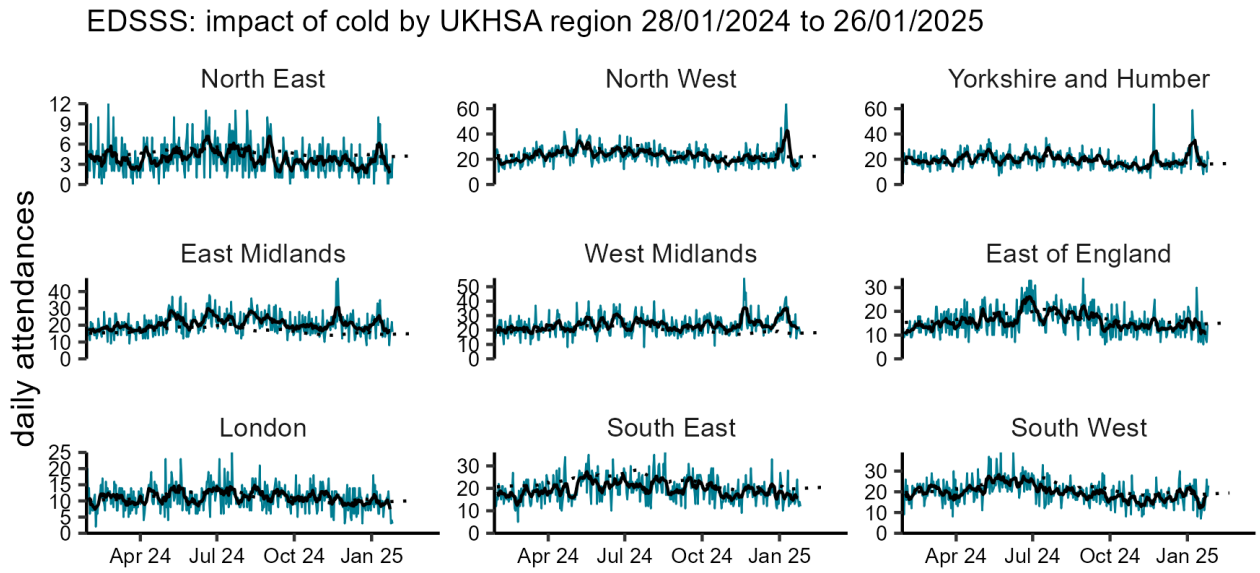
(a)



(b)



(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.

Notes and caveats

The following additional caveats apply to the UKHSA emergency department syndromic surveillance system:

- the data presented are based on a national syndromic surveillance system:
    - should be used to monitor trends not to estimate numbers of ‘cases’
    - an automated daily transfer of anonymised ED data is received from NHS Digital, from the Emergency Care Data Set (ECDS)
    - not all EDs currently provide data on a daily basis, EDs are eligible for inclusion in this report only where:
        - data relates to attendances at a type 01 ED
        - data for 7 of the 7 most recent days was received
        - data for those days was received within 2 calendar days of the patient arrival
    - when an ED meets these criteria, all historical data from that ED is included
    - EDs included each week is likely to change, which will affect the historical data inclusion
    - national coverage each week is included in **Table 2,**
    - the number of EDs in each region area is described in **Table 3**
- individual EDs will not be identified in these bulletins
- some syndromic indicators are hierarchical:
    - acute respiratory infections includes:
        - COVID-19-like
        - influenza-like illness
        - acute bronchitis or bronchiolitis
        - pneumonia
        - other and non-specific acute respiratory infections
    - cardiac conditions includes:
        - myocardial ischaemia
        - other and non-specific cardiac conditions
- baselines:
    - were last remodelled January 2023 (influenza-like illness baselines were refitted to influenza-like illness surveillance data during December 2023 to account for post-COVID-19 changes in health care seeking behaviour)
    - for asthma were last remodelled October 2024
    - are constructed from historical data since April 2018
    - 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 ED attendance levels

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.

About the UK Health Security Agency

UKHSA is responsible for protecting every member of every community from the impact of infectious diseases, chemical, biological, radiological and nuclear incidents and other health threats. We provide intellectual, scientific and operational leadership at national and local level, as well as on the global stage, to make the nation heath secure.

UKHSA is an executive agency, sponsored by the Department of Health and Social Care.

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