COVID-19
EPIDEMIOLOGICAL UPDATE

Santé publique France

Weekly Report N° 122 / Week 25 / 30 June 2022

As part of its surveillance, alert, and prevention missions, Santé publique France analyses and publishes COVID-19 data obtained from its network of partners[1] as well as its own studies and surveys. This report is based on data submitted to Santé publique France up to 28 June.

Key numbers

In week 25 (20 June-26 June 2022)

Compared to week 24 (13-19 June 2022)

742 *(vs 483 in W24)*
Incidence rate (/100,000 inhabitants)
497,972 new confirmed cases
(vs 324,458 in W24)
+53%

28.1% *(vs 24.1 in W24)*
Positivity rate
+4.0 points

1.45 *(vs 1.39 in W24)*
Effective reproduction number R
SI-DEP

2,084 *(vs 1,384 in W24)*
SOS Médecins **consultations**
for suspected COVID-19
+51%

5,866 *(vs 4,098 in W24)*
Emergency department **visits**
for suspected COVID-19
+43%

4,486 *(vs 3,771 in W24)*
New hospital admissions*
for patients with COVID-19
+19%

418 *(vs 419 in W24)*
New intensive care admissions*
for patients with COVID-19
0%

225 *(vs 219 in W24)*
Deaths* (in hospitals, nursing homes and long-term care facilities)
+3%

On 27 June 2022

Compared to 20 June 2022

53,553,906
People vaccinated with complete primary series
+0.03%

40,155,480
People vaccinated with complete primary series plus booster shot
+0.2%

Key points

Epidemiological situation

In week 25, circulation of SARS-CoV-2 intensified throughout metropolitan France, as did new hospital admissions, particularly among the most elderly for whom vaccination coverage for the second booster shot remains insufficient.

- Metropolitan France:
  - Sharp increase in incidence rate in all regions and age groups
  - Hospital admission rate rising and particularly high in the 80+ age group
- Overseas France:
  - Virological indicators still at very high levels, although decreasing in Martinique
  - Increase in the incidence rate in Guadeloupe and French Guiana

Variants

- BA.2 gradually replaced by the now dominant BA.5 with 59% of interpretable sequences in the week 24 Flash Survey (13 June)
- Increased presence of the mutation at position L452 in screening (74% in week 25 vs 64% in week 24), connected with the increase in certain Omicron sub-lineages, including BA.5

Prevention

- Vaccination on 27 June 2022 (Vaccin Covid data):
  - Vaccination coverage for the booster shot remained stable at 74.6% in the population aged 18+ and 84.5% in the 65+ age group
  - Only 25.5% of 60-79 year-olds and 31.3% of 80+ year-olds eligible for the second booster shot had received it
- With the increasing circulation of SARS-CoV-2, adopting combined measures is essential, particularly to protect the most vulnerable populations:
  - It remains important to self-isolate in the event of symptoms or a positive test for COVID-19
  - It is crucial to apply individual precautions against infection, including wearing a mask (especially in closed areas, at large gatherings, around vulnerable people and on public transport), hand washing and frequent ventilation of enclosed spaces

**W25: unconsolidated data.*

[1] ***Santé publique France acknowledges the large public health network that contributes to COVID-19 surveillance:*** *healthcare professionals working in private practice and hospitals, emergency departments, hospital and private biology laboratories, learned societies for infectious diseases, resuscitation, and emergency medicine, CNAM, INSERM, and INSEE.*

Week 25 (20 to 26 June 2022)

SITUATION UPDATE

In week 25, circulation of SARS-CoV-2 intensified throughout metropolitan France. The incidence rate increased by more than 50%, in practically all age groups. New hospital admissions were on the rise in all age groups, with the highest rates observed in the 80+ age group. A further increase in the number of deaths was also observed for the second week running. In overseas France, the incidence rates increased in French Guiana and Guadeloupe. Vaccination efforts must be stepped up to improve vaccination coverage which is still insufficient among the most elderly, with only a third of those aged over 80 and eligible for the second booster shot having actually received it. As circulation of SARS-CoV-2 increases, taking protective measures is essential to limit epidemic spread and protect the most vulnerable populations. Compliance with other recommended measures remains crucial in the event of symptoms, a positive test or high-risk contacts.

EPIDEMIOLOGICAL UPDATE

In week 25, the sharp rise in incidence rate continued and reached 742/100,000 inhabitants, an increase of 53% (vs +29% in week 24). This increase affected all age groups and was particularly striking among the youngest (+65%, i.e. 305/100,000 among 0-9 year-olds) who also showed the most significant rise in screening rate (+53%). The incidence rate was particularly high among 30-59 year-olds, rising to over 900/100,000 inhabitants. The positivity rate continued to increase in all age groups, rising to over 30% among 40-69 year-olds.

In week 25, consultations for suspected COVID-19 were once again on the rise in SOS Médecins organisations (2,084, +51%) and emergency departments (5,866, +43%).

The increase in new hospital admissions continued in week 25 (4,486, +19%) after rising by 26% the previous week. Intensive care admissions were stable in week 25 (418, +0%); however, these data had not been consolidated. Given the 28% increase in week 24, this trend should be confirmed next week upon data consolidation. Hospital admission rates were particularly high among 80-89 year-olds (35.4/100,000) and in the 90+ age group (61.8/100,000).

The number of deaths in hospitals and long-term care facilities increased after declining for several weeks (225, +3%, unconsolidated data for week 25). The number of all-cause deaths remained within normal fluctuation margins in week 24.

In metropolitan France, the incidence rate showed a very sharp increase in all regions. It particularly increased in the South of France, with +73% in Provence-Alpes-Côte d'Azur (724/100,000), +68% in Corsica (698) and +64% in Occitanie (773). The highest incidence was again observed in Île-de-France (968, +50%). Hospital admission rates increased in all regions in week 24 (consolidated data). Similar trends were observed in week 25, except in Brittany and Grand Est where rates remained stable, although pending consolidation. A marked increase was observed in the number of intensive care admissions in Nouvelle-Aquitaine (+143%), Hauts-de-France (+27%) and Pays de la Loire (+22%).

In overseas France, the incidence rate remained very high in Martinique, although decreasing again in week 25 (1,477, -24%). It continued to rise in French Guiana (473, +11%) and was up again in Guadeloupe (721, +18%). The hospital admission rate declined or remained stable in all overseas regions.

VARIANTS

The BA.5 sub-lineage of the Omicron variant became dominant in the Flash Survey for week 24 (13 June), accounting for 59% of interpretable sequences and therefore, replacing the BA.2 variant which only accounted for 21%. BA.4 was detected in 6% of sequences. The presence of the mutation at position L452 in screening tests continued to rise (74% in week 25 vs 64% in week 24), connected to the increase in these sub-lineages.

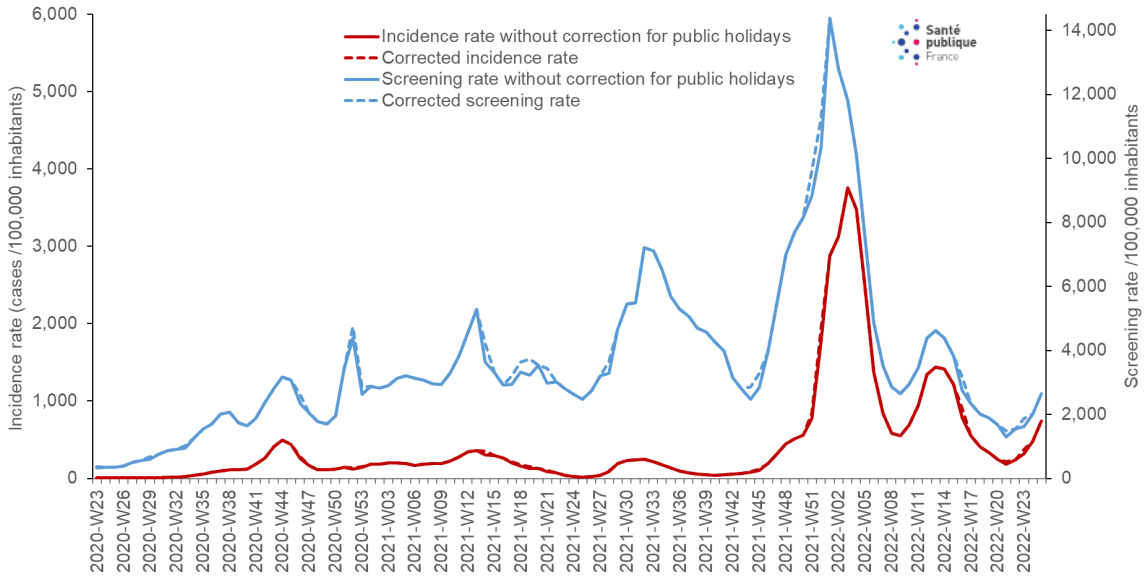
PREVENTION

On 27 June, vaccination coverage showed very little progress, reaching 84.5% (+0.1%) in the 65+ age group for the booster shot. Only 25.5% of eligible 60-79 year-olds and 31.3% of those aged 80 and over had received their second booster shot. Lastly, in nursing homes where a surge in the number of cases has been observed since week 22, vaccination coverage for the second booster shot reached only 40.6% among eligible individuals, calling for extra caution in this population particularly at risk of serious infection or decompensation of comorbidities due to COVID-19.

Confirmed cases, incidence, and screening

Nationally, the incidence rate sharply increased compared to the previous week (742/100,000 inhabitants vs 483 in week 24, i.e. +53%). A relatively substantial increase in the screening rate was also observed (2,638/100,000 vs 2,004, +32%); this trend was also observed for the positivity rate (28.1%, +4.0 points). Among the 1,590,135 tested individuals who reported their symptom status, 67% were asymptomatic, a slightly lower proportion compared to the previous weeks (70% in week 24, 72% in week 23). The positivity rate increased among both symptomatic people (58% vs 55% in week 24) and asymptomatic people (15% vs 12% in week 24). Among people that tested positive, the proportion experiencing symptoms remained stable at 66%.

Weekly evolution in incidence and screening rates, with or without correction for the effect of public holidays, since week 23-2020, France (data on 29 June 2022)



Source: SI-DEP, data processing by Santé publique France

Incidence and screening rates by age group

In week 25, the incidence rate increased sharply and fairly consistently in all age groups (by approximately 50%). These increases ranged from +47% in the 90+ age group to +65% among 0-9 year-olds. It exceeded 800/100,000 in the population aged 20-79 years and was highest among 30-39 year-olds (949, +57%) and 50-59 year-olds (949, +51%). The screening rate increased across all age groups: from +18% in the 80+ age group to +53% among 0-9 year-olds. It remained below 2,000/100,000 among 0-19 year-olds, despite the sharper increases observed in these age groups (+53% among 0-9 year-olds and +42% among 10-19 year-olds). It was highest among 30-39 year-olds (3,246, +35%) and 20-29 year-olds (3,199, +31%). The positivity rate was also on the increase in all age groups. It increased by more than 4 points among 20-39 year-olds and 50-89 year-olds, and more than 5 points among 60-79 year-olds. Positivity rates exceeded 30% among 40-49 year-olds (31.8%, +3.7 points), 50-59 year-olds (33.8%, +4.6 points) and 60-69 year-olds (30.7%, +5.4 points).

Among school-age children, the incidence rate increased across all age groups, particularly among 6-10 year-olds (409, +69%). It was highest among 11-14 year-olds (432, +48%), with a screening rate of 1,959 (+45%) and a positivity rate of 22.1% (+0.4 points).

Weekly evolution of the incidence rate (per 100,000 inhabitants) by age group since week 14-2022, France (data on 29 June 2022)

W14	W15	W16*	W17	W18	W19	W20	W21*	W22	W23*	W24	W25	
1419	1418	1172	733	456	318	206	174	178	241	312	459	90 yrs +
1198	1192	964	620	401	288	209	179	199	288	367	543	80-89 yrs
1458	1454	1170	736	504	389	312	293	314	435	548	831	70-79 yrs
1302	1277	1025	632	445	355	275	256	290	421	532	804	60-69 yrs
1604	1434	1095	662	475	377	289	258	315	490	628	949	50-59 yrs
1727	1440	1031	597	444	373	288	247	285	449	584	902	40-49 yrs
1696	1460	1079	636	483	402	298	251	287	464	604	949	30-39 yrs
1456	1263	971	575	400	325	246	218	270	451	584	898	20-29 yrs
1251	807	486	302	256	240	186	137	143	209	267	406	10-19 yrs
838	590	360	249	254	231	150	88	80	130	185	305	0-9 yrs
1412	1215	903	550	406	333	252	214	242	373	482	742	All ages

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20 50 100 200 500 800 3000

*rates corrected for the effect of public holidays

Source: SI-DEP, data processing by Santé publique France

Hospitalisations, intensive care admissions, and deaths

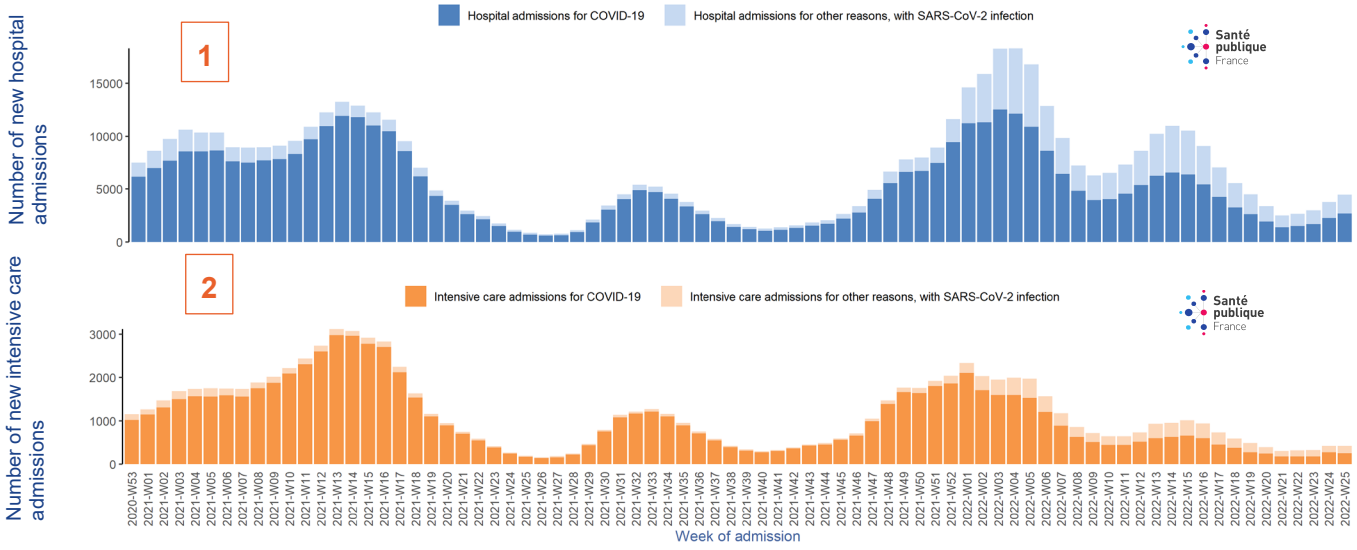
For a better interpretation of hospital indicators, new hospital and intensive care admissions are analysed by date of patient admission to hospital. New deaths (in hospitals and long-term care facilities) are analysed by date of occurrence. ***Data from week 25, collected up to 28 June 2022, are not yet consolidated and may be underestimated.***

On 28 June 2022, 15,572 COVID-19 patients were hospitalised in France (vs 14,410 on 21 June, i.e. +8%), including 912 in intensive care (vs 855 on 21 June, i.e. +7%)

Nationwide, the number of new hospital admissions was 4,486 in week 25, i.e. +19% compared with week 24 (unconsolidated data) vs +26% between weeks 23 and 24 (after consolidation). The number of new intensive care admissions reached 418 in week 25, remaining stable compared to week 24; however, these data have not been consolidated (vs +28% between week 23 and week 24). In week 25, 2,689 patients were admitted for COVID-19 management (+20%) and 1,797 patients with SARS-CoV-2 were admitted for other reasons (+17%). Regarding intensive care units, 248 patients were admitted for COVID-19 (-10%) and 170 for other reasons (+18%).

In week 25, the proportion of patients positive for SARS-CoV-2 but hospitalised for a reason other than COVID-19 remained stable for hospital admissions in all departments (40%) and for resuscitation unit admissions (33%), and increased for intensive care admissions (41%).

Weekly number of new hospital (1) and intensive care (2) admissions for COVID-19 patients since 28 December 2020, France (data on 28 June)



W25: unconsolidated data

Source: SI-VIC, data processing by Santé publique France

In week 25, the weekly rate of new hospital admissions increased in all age groups. The highest rates and sharpest increases were observed in the 80+ age group. New intensive care admission rates were stable in most age groups, declined slightly among 80-89 year-olds and increased slightly among 70-79 and 50-59 year-olds.

Weekly rate of new hospital (1) and intensive care (2) admissions per 100,000 inhabitants, by age group, from week 18 to week 25-2022, France

1

W18	W19	W20	W21	W22	W23	W24	W25	
85,4	66,0	51,7	38,2	35,2	41,1	54,8	61,8	90 yrs +
45,3	36,0	26,4	18,8	20,1	24,3	30,5	35,4	80-89 yrs
20,9	15,9	12,2	9,5	10,3	11,1	13,7	16,5	70-79 yrs
9,0	7,3	5,4	3,9	4,2	4,6	6,0	6,7	60-69 yrs
4,5	3,6	2,8	2,0	2,1	2,4	2,9	3,5	50-59 yrs
2,4	2,2	1,3	1,2	1,6	1,3	1,8	2,2	40-49 yrs
3,3	2,6	2,2	1,5	1,9	2,0	2,5	3,1	30-39 yrs
2,8	3,0	1,8	1,8	1,7	2,0	2,3	2,7	20-29 yrs
1,3	1,0	1,1	0,5	0,6	0,7	0,8	1,0	10-19 yrs
2,5	2,5	2,0	1,2	1,5	1,8	2,1	2,9	0-9 yrs
8,3	6,7	5,0	3,7	4,0	4,5	5,6	6,7	All ages

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0 | 2,5 | 5 | 10 | 20

2

W18	W19	W20	W21	W22	W23	W24	W25	
1,9	1,8	1,6	1,4	0,8	0,7	1,3	1,5	90 yrs +
3,5	2,4	2,1	1,6	1,3	1,8	2,7	1,6	80-89 yrs
2,9	2,2	1,7	1,3	1,7	1,8	2,0	2,2	70-79 yrs
1,6	1,5	1,0	0,7	0,8	0,7	1,1	1,0	60-69 yrs
0,7	0,7	0,6	0,4	0,5	0,4	0,5	0,7	50-59 yrs
0,3	0,3	0,4	0,3	0,3	0,2	0,3	0,3	40-49 yrs
0,3	0,2	0,1	0,2	0,2	0,2	0,2	0,2	30-39 yrs
0,2	0,2	0,1	0,2	0,1	0,2	0,1	0,2	20-29 yrs
0,2	0,1	0,1	0,1	0,0	0,1	0,1	0,1	10-19 yrs
0,3	0,3	0,2	0,1	0,2	0,2	0,2	0,3	0-9 yrs
0,9	0,7	0,6	0,4	0,5	0,5	0,6	0,6	All ages

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0 | 0,5 | 1 | 2 | 4

Source: SI-VIC, data processing by Santé publique France

In week 25 (unconsolidated data), 217 deaths in hospital were recorded nationwide (+1% compared to week 24 vs -12% between weeks 23 and 24). There were also 8 deaths recorded in long-term care facilities in week 25 (vs 5 in week 23).

Situation at the regional level

Incidence, positivity, and screening rates

In metropolitan France, the incidence rate increased sharply in all regions, from +46% in Grand Est to +73% in Provence-Alpes-Côte d'Azur. The highest rates were observed in Île-de-France (968, +50%), Brittany (779, +61%) and Occitanie (773, +64%). In week 25, rates higher than 500 were observed across all regions (vs one region in week 24). It even exceeded 700 in five regions. The screening rate was also on the rise across the country. It was highest in Île-de-France (3,689, +35%) and Provence-Alpes-Côte d'Azur (2,965, +35%). The positivity rate increased sharply across all regions, particularly in Provence-Alpes-Côte d'Azur, Corsica and Brittany where it rose by more than 5 points. It was highest in Brittany (37.3%, +5.2 points) and Pays de la Loire (35.8%, +5.0 points).

In week 25, the incidence rate increased in all departments. Hence, 77 departments had an incidence rate above 500 (vs 16 in week 24). The highest rates were observed in Paris (1,198, +48%), Hauts-de-Seine (1,132, +50%), Val-de-Marne (982, +54%) and Yvelines (949, +50%).

In overseas France, a decline continued to be observed in Martinique; however, the incidence rate remained very high (1,477, -24%). It increased in Guadeloupe (721, +18%) and in French Guiana (473, +11%). An upward trend was also observed in Reunion Island (217, +26%). Numbers remained very low in Mayotte (29 vs 20 in week 24).

Evolution of the incidence, positivity, and screening rates by region since week 20-2022, France (data on 29 June 2022)

Regions	Incidence rate for 100,000 inhabitants							Positivity rate (%)		Screening rate per 100,000 inhabitants	
	W20	W21*	W22	W23*	W24	W25	W25 vs W24 (%)	W25	W25 vs W24 (point)	W25	W25 vs W24 (%)
Auvergne-Rhône-Alpes	227	170	187	281	390	584	50	28.7	4.7	2,036	25
Bourgogne-Franche-Comté	221	166	183	277	370	548	48	28.3	4.1	1,938	27
Brittany	299	246	263	386	483	779	61	37.3	5.2	2,090	39
Centre-Val de Loire	254	195	213	333	418	643	54	32.1	4.2	2,006	34
Corsica	258	205	195	294	415	698	68	26.3	5.3	2,661	34
Grand Est	223	169	194	283	346	506	46	23.3	3.9	2,169	22
Hauts-de-France	255	195	202	320	390	612	57	25.8	4.5	2,374	29
Île-de-France	203	208	271	473	644	968	50	26.2	2.7	3,689	35
Normandy	251	200	212	330	390	593	52	30.6	3.9	1,940	32
Nouvelle-Aquitaine	198	174	207	324	422	666	58	32.3	4.9	2,061	34
Occitanie	205	191	220	346	473	773	64	30.3	5.0	2,551	37
Pays de la Loire	270	219	231	345	442	712	61	35.8	5.0	1,988	39
Provence-Alpes-Côte d'Azur	263	201	204	292	418	724	73	24.4	5.3	2,965	35
Guadeloupe	670	578	572	630	613	721	18	20.9	1.6	3,445	9
French Guiana	205	244	294	362	428	473	11	22.6	-0.5	2,096	13
Martinique	1502	1678	2293	2534	1954	1477	-24	31.2	-4.3	4,737	-14
Mayotte	21	31	34	28	20	29	42	3.1	0.7	925	11
Reunion Island	391	302	230	207	173	217	26	13.9	2.3	1,568	5

Data corrected for the effect of public holidays on 26 May and 6 June 2022

Source: SI-DEP, data processing by Santé publique France

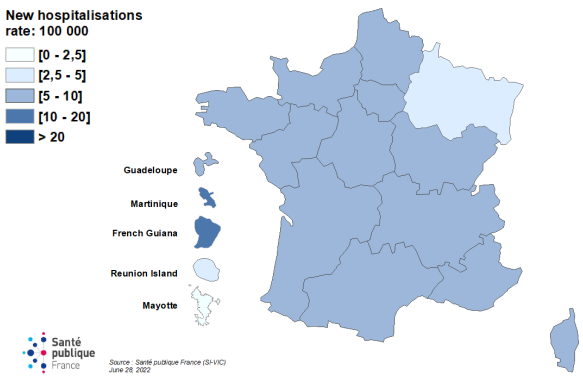
Hospital and intensive care admissions

In metropolitan France, the weekly rate of new hospital admissions increased across all regions except in Grand Est and in Brittany where it remained stable. The highest rates were observed in Corsica (9.3/100,000), Provence-Alpes-Côte d'Azur and Bourgogne-Franche-Comté (8.5, respectively).

The rate of new intensive care admissions was stable or on the rise in most regions. However, it declined in Grand Est, Provence-Alpes-Côte d'Azur, Normandy and Bourgogne-Franche-Comté.

In overseas France, the rate of new hospital admissions declined in Reunion Island, Martinique and Guadeloupe, and remained stable in French Guiana. The rate of new intensive care admissions remained low and continued to fall across all regions.

Weekly rate of newly hospitalised COVID-19 patients per 100,000 inhabitants, by region, in week 25-2022, France



Source: SI-VIC, data processing by Santé publique France

For further information on the epidemic situation in the regions, consult the Regional Epidemiological Updates.

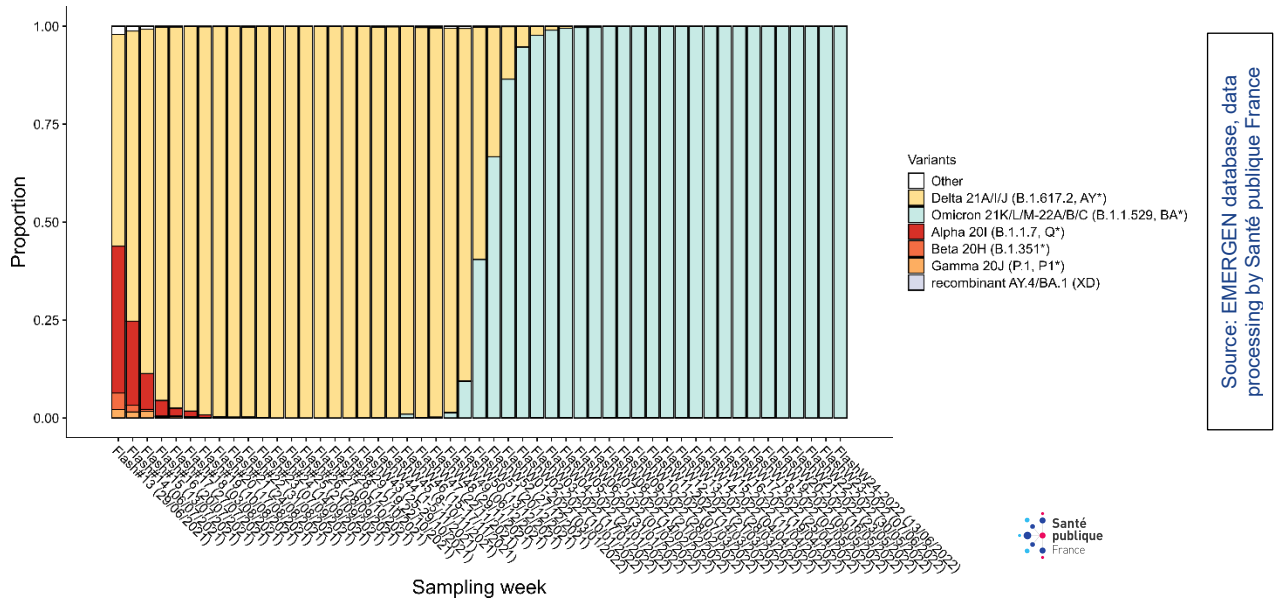
Variants

The screening strategy deployed in France aims to reactively detect mutations that impact the transmissibility, severity or immune escape of SARS-CoV-2. Certain mutation profiles suggest the presence of particular variants. In week 25, the proportion of samples in France with a **screening result compatible with Omicron was 99% for the D1 proxy** (vs 98% in week 24).

The proportion of detection of mutations at position L452 (L452R or L452Q, result of C1 screening) is continuing to increase, from 64% in week 24 to 74% in week 25. This increase is observed across all regions (metropolitan France and French overseas regions and departments), but on different levels. These mutations are being closely monitored since L452R was associated with increased transmissibility of Delta. These are now found in Omicron sub-lineages BA.4 and BA.5, but also in other sub-lineages of BA.1 and BA.2 (including BA.2.11 and BA.2.12.1). This increase in C1 screened samples corresponds to C1D1 screening results, confirming that these are Omicron sub-lineages carrying mutations in L452 position and not a resurgence of Delta.

Furthermore, sequencing data confirm the **dominance of Omicron in France**. In metropolitan France, it represented **100% of interpretable sequences in the week 24 Flash Survey** (from 13 June, based on only 1,190 interpretable sequences) and in week 23 (7 June, based on 2,772 interpretable sequences). In the French overseas regions and departments, Omicron is the only variant detected since the week 6 Flash Survey (07/02, based on a total of 2,624 interpretable sequences from the overseas regions and departments in Flash Surveys between weeks 6 and 24).

Evolution of the proportions for each classified variant (VOC, VOI, and VUM*) in Flash Surveys, metropolitan France (data on 27 June 2022; Flash Surveys from weeks 23 and 24 unconsolidated)



*VOC: variant of concern; VOI: variant of interest; VUM: variant under monitoring.

The Omicron variant includes five sub-lineages BA.1, BA.2, BA.3, BA.4 and BA.5, which are also subdivided into sub-lineages. **Gradual replacement of BA.2 by BA.5** has been observed for several weeks. **During the Flash Survey in week 24 (13 June), BA.2 accounted for 21% of interpretable sequences (35% including all of its sub-lineages)** vs **59% for BA.5,** whereas **the data observed** during the Flash Survey in week 23 **indicated 37% for BA.2 and 41% for BA.5**.

At the same time, the frequency of the detection of **Omicron sub-lineages BA.2.12.1 and BA.4** (also carrying mutations in L452 position) is also increasing, but at a slower rate: BA.2.12.1 accounted for 7% of interpretable sequences during the Flash Survey in week 24 (vs 5% during the Flash Survey in week 23). Likewise, BA.4 accounted for 6% of sequences during the Flash Survey in week 24 (vs 5% during the Flash Survey in week 23). More information is available in the variants risk analysis of 15/06/2022.

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Vaccination

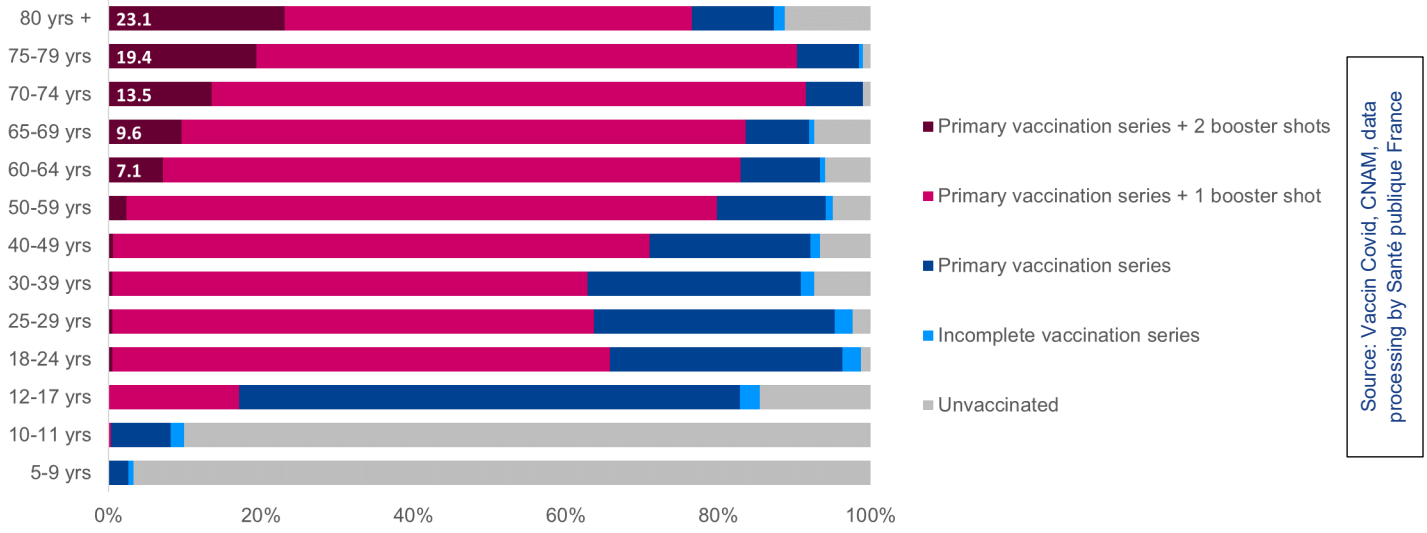
On 27/06/2022, vaccination coverage in France based on Vaccin Covid was 79.8% for a complete primary vaccination series* and 59.8% for the booster shot.

Vaccination coverage for the booster shot reached 74.6% among adults over 18 years of age and 84.5% in the 65+ age group. In addition, 9.9% of children aged 10-11 years had received a first dose of vaccine (3.3% for 5-9 year-olds).

People aged 80 years and over as well as residents of nursing homes and long-term care facilities are eligible for a second booster shot, from three months after the first booster shot, in accordance with the opinion of the *Conseil d'orientation de la stratégie vaccinale* (Vaccine Strategy Council) of 18 February 2022. In addition, following the recommendations of 7 April 2022, eligibility for the second booster shot was extended to people aged 60-79, to be given six months after the last injection.

In the 60-79 age group, 11.4% had received a booster shot (9.8% on 20/06/2022), representing 25.5% of those eligible** for it at the time. In the 80+ age group, 23.1% had received a second shot (22.2% on 20/06/2022), representing 31.3% of those eligible for it at the time.

Vaccination coverage, by age group, France (data on 27 June 2022)



On 27/06/2022, 93.6% of residents in nursing homes and long-term care facilities had completed a primary vaccination series, 75.1% had received one booster shot and 28.8% had received a second booster shot (27.9% on 20/06/2022). Among those eligible for the second booster shot at that date**, 40.6% had received it.

As regards health professionals, vaccination coverage for the booster shot was 79.6% for those working in nursing homes or long-term care facilities, 87.6% for professionals in private practice and 78.5% for employees in healthcare institutions.

Vaccination coverage of the booster shots among residents in nursing homes and long-term care facilities and among health professionals may be underestimated due to changes in the cohorts since their initial constitution (March 2021).

Data on vaccination coverage by department are published on Géodes; data concerning the second booster shot for people aged 60+ and residents of nursing homes or long-term care facilities are also available.

Dashboard

InfoCovidFrance

Key figures and evolution of COVID-19 in France and worldwide

To find out more about COVID-19, monitoring systems and vaccination refer to the file **Santé Publique France** and the website **Vaccination Info Service**
For more information on the regional data, see the **Regional Epidemiological Updates**
Find all the open access data on **Géodes**