

COVID-19 EPIDEMIOLOGICAL UPDATE

24 November 2022 / No.143

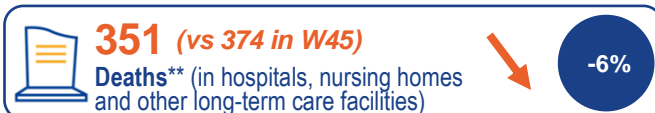
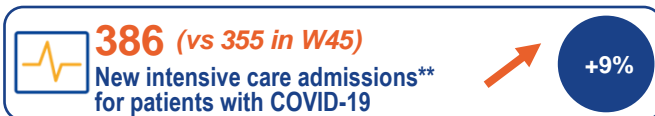
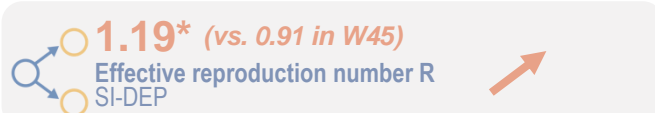
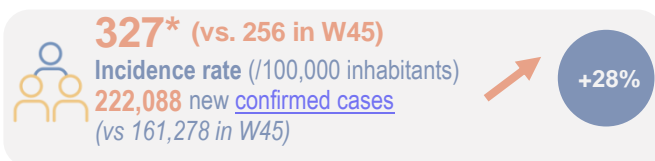
As part of its surveillance, alert, and prevention missions, Santé publique France analyses and publishes COVID-19 data obtained from its network of partners¹ as well as its own studies and surveys. This report is based on data submitted to Santé publique France up to 23 November 2022.

Following strike action by some private clinical laboratories, the incidence and screening rates are under-estimated as of 30 October; the positivity rate and effective R values are also affected. **Santé publique France remains mobilised to provide continuous monitoring of the epidemic based on the other data sources used for surveillance, which are not impacted.**

Key numbers

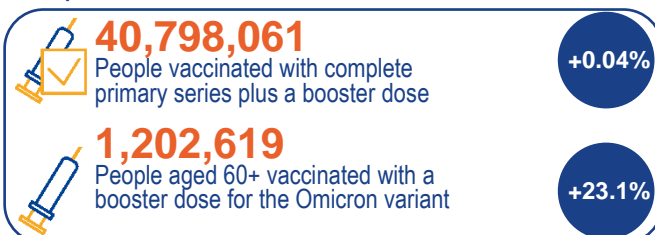
In week 46 (14-20 November 2022)

Compared to week 45 (07-13 November 2022)



On 21 November 2022

Compared to 14 November 2022



Key points

Epidemiological situation

In week 46, virological indicators (calculated based on antigen tests only and for all tests) along with the number of consultations showed that circulation of SARS-CoV-2 had resumed nationwide. Similarly, hospital indicators were up again.

- Metropolitan France:
 - Incidence rates rising
 - Positivity rates up
 - Upturn in new hospital and intensive care admissions
- Overseas France:
 - Increased incidence rates in most regions, particularly in French Guiana and Mayotte

Variants

- Omicron sub-lineages: mostly BA.5 with 93% of sequences in the Flash Survey W45 (07/11)***
- Among the BA.5 sub-lineages, BQ.1.1 continues to rise (39% vs 29% in the Flash Survey of week 43)

Prevention

- Vaccination on 21 November 2022 (Vaccin Covid data):
 - 6.1% of people aged 60-79 had received a booster dose for the Omicron variant (8.6% of those eligible). Currently, 31.2% of this age group are considered protected by the vaccine.
 - 7.9% of people aged 80+ had received a booster dose for the Omicron variant (9.7% of those eligible) and 12.0% are considered protected.
- Given the active circulation of SARS-CoV-2, compliance with combined measures remains crucial:
 - up-to-date COVID-19 vaccination, through a booster dose with a bivalent vaccine (against the initial strain and the Omicron variant of SARS-CoV-2) for eligible individuals who have received a primary vaccination series, self-isolation in the event of a positive COVID-19 test and/or symptoms;
 - continued precautionary measures, including wearing a mask (particularly around vulnerable people, in closed, crowded areas or at large gatherings), frequent hand-washing and ventilation of closed areas.

* non-interpretable data **W46: unconsolidated data ***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.

Virological indicators from SI-DEP

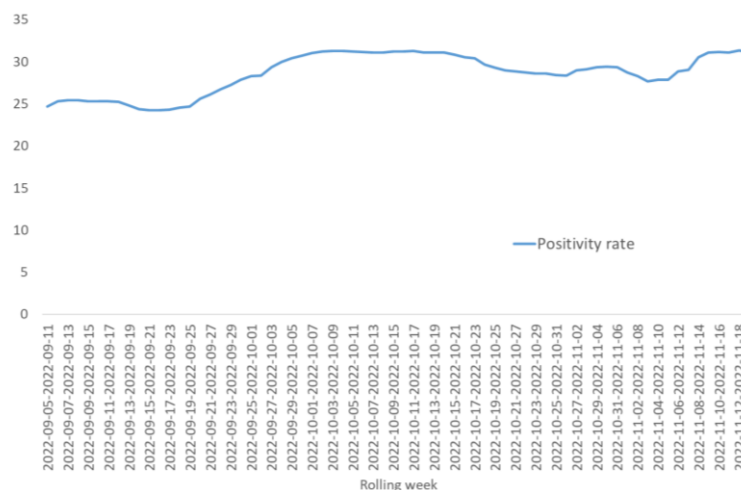
Suspended transmission of COVID-19 test results to SI-DEP databases from 27 October, and suspension of business by some private clinical laboratories between 14 and 17 November has disrupted the production of virological indicators by Santé publique France.

As a result, analysis of the virological indicators from SI-DEP produced from 28 October onwards is based on antigen tests, performed mainly by pharmacies, as well as RT-PCR tests from laboratories that continued transmitting results.

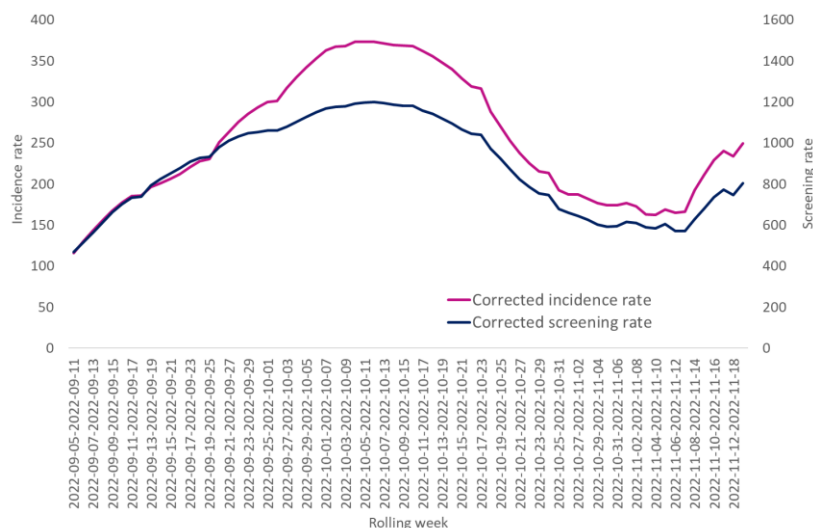
Impact analyses carried out by Santé publique France show that the dynamic of antigen tests alone (which represent over 50% of total tests) largely correlates to the dynamic of all tests, therefore allowing us to continue assessing the evolution of the pandemic. However, these indicators must be interpreted with caution given possible changes in people's use of testing. The figures below, given for information only, show the change in the positivity rate, as well as that of the incidence and screening rates (for antigen tests only). For the second figure, only the trends are to be interpreted. Changes in the incidence and positivity rates are calculated based on antigen tests over a sliding 7-day period (from Sunday to Saturday) and not by calendar week.

Furthermore, Santé publique France wishes to emphasise that the tracking of the epidemic trend of COVID-19 since March 2020 has involved multi-source, integrated surveillance to assess its evolution, based on indicators other than those produced from laboratory data alone. These indicators include emergency department visits, SOS Médecins consultations, hospital admissions (SI-VIC), deaths, and vaccine coverage estimates. These indicators are not impacted, guarantee continuity in the monitoring of epidemic trends, and will continue to feed the reports produced by Santé publique France.

Evolution of positivity rate from antigen tests, France



Evolution of incidence rate and screening rate (antigen tests only), France



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

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

SITUATION UPDATE

In week 46, analysis of virological indicators from SI-DEP is affected by the strike action of some private clinical laboratories. However, all virological indicators and consultations showed that circulation of SARS-CoV-2 had resumed; incidence and positivity rates from antigen tests alone increased, as did those calculated based on all tests. Similarly, SOS Médecins consultations and emergency department visits were up, as were new hospital and intensive care admissions. On 21 November, only 6.1% of people aged 60-79 and 7.9% of those aged 80+ had received a booster dose for the Omicron variant. Given the active circulation of SARS-CoV-2, vaccination levels must be increased through a booster dose with a bivalent vaccine (protecting against the initial strain and the Omicron variant of SARS-CoV-2) among eligible people who have received the primary vaccination series (at 3 or 6 months after the last injection according to the relevant recommendations). In addition, precautionary measures, including wearing a mask, remain essential to protect the most vulnerable. Compliance with other recommended measures also remains necessary in the event of symptoms, a positive test or high-risk contacts.

EPIDEMIOLOGICAL UPDATE

Following the various strike actions by private clinical laboratories, the analysis of SI-DEP indicators is disrupted. Nonetheless, changes in virological indicators calculated based on antigen tests alone or for all tests were consistent. The national incidence rate for all tests was up, as was the rate calculated based on antigen tests only, and for all age groups. However, the increase was less significant in the 90+ age group. Furthermore, the positivity rate (for all tests and for antigen tests) was also up.

In week 46, consultations for suspected COVID-19 were up again, with 2,732 consultations at SOS Médecins (+6%) and 3,097 emergency department visits (+13%) recorded. This increase concerned all ages groups in emergency departments, and only children and 15-44 year-olds in SOS Médecins associations.

After 4 weeks of decrease, hospital indicators rose in week 46, with 4,210 new hospital admissions recorded (+6%), including 386 (+9%) to intensive care. The number of deaths in hospitals and long-term care facilities continued to drop (351, i.e. -6%, unconsolidated data), but the drop was less significant than in previous weeks.

In metropolitan France, incidence rates calculated for all tests and for antigen tests only increased in all regions, particularly in Occitanie and in Provence-Alpes-Côte d'Azur. In parallel, a rise in the rate of new hospital admissions was observed for most regions in week 46. Provence-Alpes-Côte d'Azur and Occitanie regions also showed the sharpest increases.

In overseas France, a rise in incidence rates calculated for antigen tests only and for all tests was observed in most regions. It was particularly high in French Guiana and Mayotte. Moreover, hospital admission rates increased in Guadeloupe, Martinique and French Guiana. However, they remained stable in Mayotte and Reunion Island.

VARIANTS

Omicron is almost the only variant present in France and its BA.5 sub-lineage remains omnipresent. In metropolitan France, BA.5 (all sub-lineages) represented 93% of interpretable sequences in the week 45 Flash Survey (7 November, based on only 576 interpretable sequences). Data from the week 45 Flash Survey is not consolidated and must be interpreted with care, since results from the week 44 Flash Survey are not available due to the insufficient number of sequences available to calculate reliable and interpretable proportions, owing to strike action by certain laboratories. Among these sub-lineages, detection of the sub-lineage BQ.1.1 continues to increase, with 39% of interpretable sequences in the Flash Survey of week 45 (vs 29% for the week 43 Flash Survey). The BA.4 sub-lineage (all further sub-lineages combined) continues to circulate, but at lower levels, with 2% of interpretable sequences in the week 45 Flash Survey (vs 4% in week 43). The detection of mutations at position L452 in screening tests remains stable at high levels (91% in week 45 vs 93% in week 43) in line with the circulation of BA.5 observed in sequencing. More information is available in the [risk assessment of 16 November 2022](#).

PREVENTION

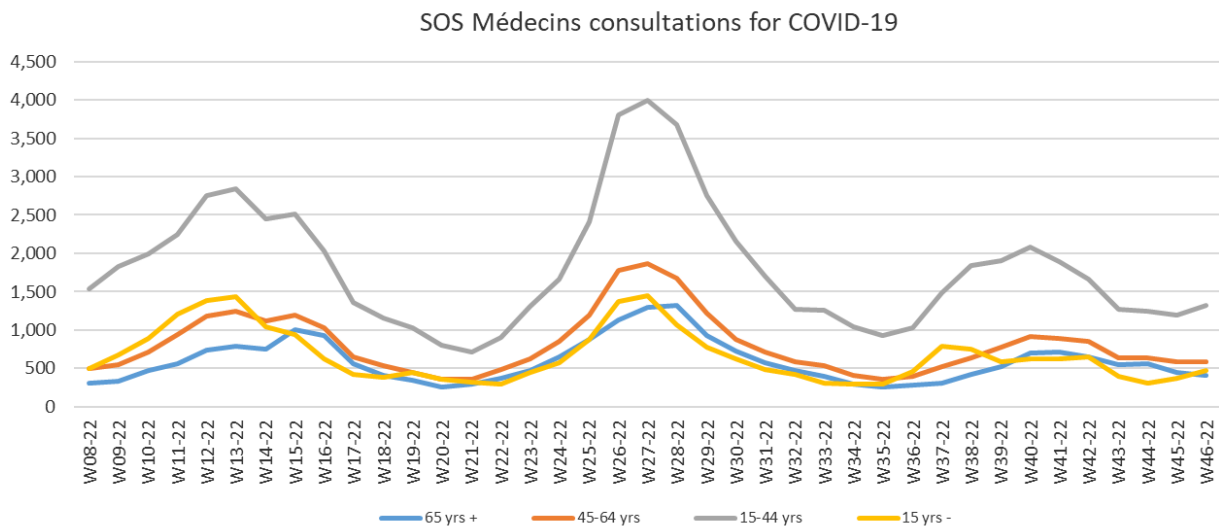
On 21 November, 82.7% of the population aged 65+ had received at least one booster dose. Furthermore, since the vaccines were made available, 6.1% of 60-79 year-olds and 7.9% of people aged 80+ had received a booster dose for the Omicron variant (8.6% and 9.7% of those eligible, respectively)*. In these age groups, 31.2% of 60-79 year-olds are considered to be protected by vaccination because they have received a dose in the last 6 months, as are 12.0% of people aged 80+ who have received a dose in the last 3 months. These proportions do not take into account people infected with SARS-CoV-2 during this time.

*Individuals that have received a booster dose for the Omicron variant are those vaccinated with a complete primary series plus a booster dose of bivalent vaccine (Pfizer original/Omicron BA.5 or Moderna original/Omicron BA.1), whether or not they had previously received any booster doses. This is recommended 3 months after the last vaccine injection for people aged 80+ and 6 months for those aged 60-79 or individuals at risk of developing serious forms of Covid-19. To allow time for eligible individuals to have their injection, eligibility is measured with one additional month since the last injection (4 months for those aged 80+r and 7 months for 60-79 year-olds).

SOS Médecins consultations

- Nationwide, SOS Médecins consultations for suspected COVID-19 for all age groups were on the increase (+6% or +160 consultations) in week 46. This increase was driven by children and by the 15-44 age group.
- Over the last days, indicators stabilised in the 45-64 age group, while they dropped slightly among those aged 65+.
- At regional level, SOS Médecins consultations for suspected COVID-19 were on the increase in most regions. The most significant increases were seen in Martinique (+88%, or +23 consultations), Centre-Val de Loire (+60%, or +6 consultations), Brittany (+59%, or +33 consultations), Occitanie (+48%, or +39 consultations) and Pays de la Loire (+42%, or +44 consultations).

Number of SOS Médecins consultations for suspected COVID-19

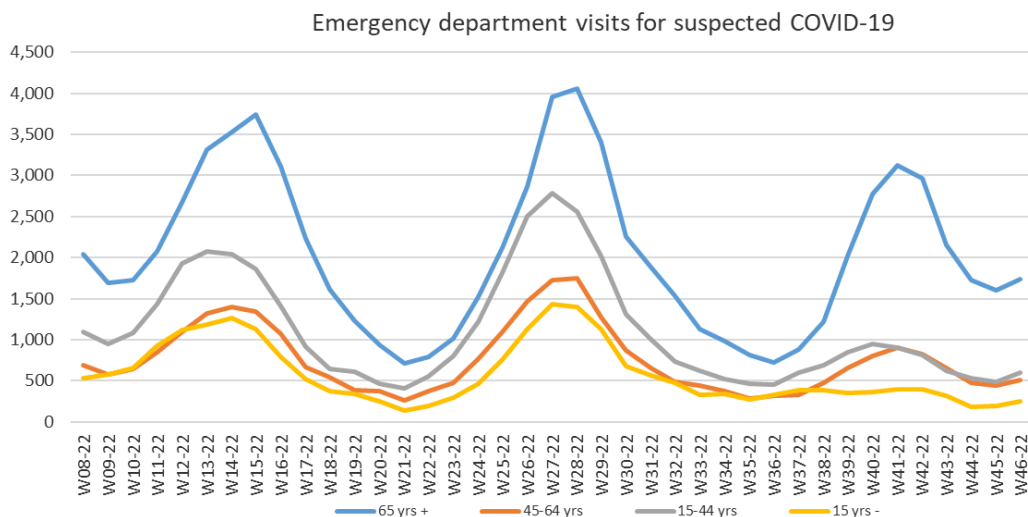


Source: SOS Médecins

Visits to OSCOUR® network emergency departments

- Nationwide, emergency department visits for suspected COVID-19 for all age groups were on the increase (+13% or +358 visits). This increase concerned all age groups.
- At regional level, visits to emergency departments were on the increase in nine metropolitan regions and two overseas regions. The most significant increases were seen in French Guiana (+264%, or +37 visits), in Occitanie (+38%, or +79 visits), in Reunion Island (+24%, or +4 visits), in Nouvelle-Aquitaine (+23%, or +53 visits), in Auvergne-Rhône-Alpes (+22% or +76 visits), in Provence-Alpes-Côte d'Azur (+21%, or +82 visits), in Corsica (+18%, or +5 visits) and in Brittany (+15%, or +8 visits).

Number of emergency department visits for suspected COVID-19



Source: OSCOUR®

Where to find the graphs and tables on InfoCovidFrance

Since 14 July 2022, the COVID-19 Epidemiological Update is produced in a condensed, 3-page format that provides an overview of the COVID-19 epidemic situation in France.

The graphs and tables presenting the indicators are available directly on [InfoCovidFrance](#), where a weekly report is published to supplement the dashboard:

HOSPITAL INDICATORS

- Weekly figures for COVID-19 patients newly admitted to hospital and intensive care units are available in the “Key numbers” tab under “Consultations / Hospital”. The different rates for these indicators are also presented in the “Hospital” tab.
- Weekly rates of COVID-19 patients newly admitted to hospital and intensive care, by age group, are available as two separate graphs in the “Hospital” tab.

LONG-TERM CARE FACILITY INDICATORS

The “Long-term care facilities” tab provides information on the following indicators:

- vaccination coverage among residents and staff of nursing homes and long-term care facilities;
- the weekly number of new confirmed cases among residents and staff of long-term care facilities;
- weekly deaths among residents of long-term care facilities.

VIROLOGICAL DATA AT NATIONAL LEVEL

- The graph “Incidence and screening corrected for public holidays” is available in the “Incidence” tab.
- The heat map “Weekly evolution of the incidence rate by age group” is available in the “Incidence” tab.

VIROLOGICAL DATA AT REGIONAL LEVEL

- The table “Evolution of the incidence, positivity, and screening rates by region” is presented in the form of regional and departmental-level graphs in the “Incidence” tab.

VARIANTS

- The graph “Evolution of the proportions for each classified variant in the Flash Surveys” is available in the “Variants” tab.

VACCINATION COVERAGE

- The graph “Vaccination coverage by age group” is available in the “Vaccination” tab.

For more information on COVID-19, the surveillance systems in place, and vaccination, consult the websites of [Santé publique France](#) and [Vaccination Info Service](#)
For more information on the regional data, see the [Regional Epidemiological Updates](#)
Find all the data in open access on [Géodes](#)

[Dashboard](#)

[InfoCovidFrance](#)

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