

COVID-19 EPIDEMIOLOGICAL UPDATE

15 December 2022 / N° 146

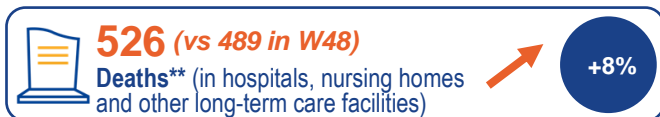
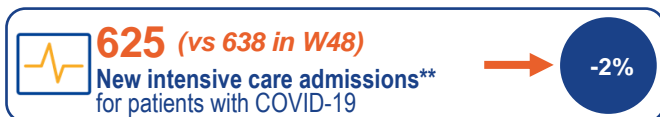
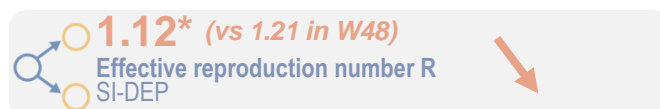
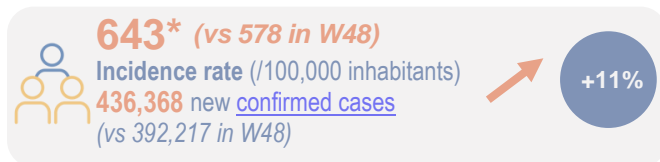
As part of its surveillance, alert, and prevention missions, Santé publique France analyses and publishes COVID-19 data obtained from its network of partners¹ as well as its own studies and surveys. This report is based on data submitted to Santé publique France up to 13 December.

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

Key numbers

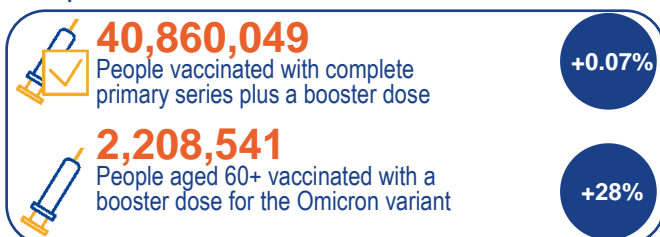
Week 49 (5-11 December 2022)

Compared to week 48 (28 Nov.-4 Dec. 2022)



On 12 December 2022

Compared to 5 December 2022



Key points

Epidemiological situation

In week 49, circulation of SARS-CoV-2 continued to increase, although less markedly, with a slight decrease in positivity rate at national level. While the overall incidence rate was on the rise, it was declining in the under-20 age group, with a trend towards stabilisation or more moderate levels of increase in other age groups. Hospital admissions and deaths remained on the rise.

Metropolitan France:

- Incidence rates for all tests combined still rising throughout the country, but less markedly in most regions
- Contrasting situation in hospitals, where admissions continue to rise in more than half of French regions
- Number of deaths rising

Overseas France:

- Incidence rate and hospital admission rate increasing in Reunion Island

Variants

- Omicron sub-lineages: BA.5 omnipresent, accounting for 92% of sequences in the week 48 Flash Survey (28 November)
- Among BA.5 sub-lineages, BQ.1.1 continues to rise (62% in the Flash Survey for week 48 vs 60% in week 47)

Prevention

- Vaccination on 12 December 2022 (Vaccin Covid data):
 - 11.4% of 60-79 year-olds had received a booster dose for the Omicron variant (representing 12.6% of those eligible), while 33.4% of this age group is considered protected by vaccination;
 - 14.0% of 80+ year-olds had received a booster dose for the Omicron variant (16.0% of those eligible), while 16.7% of this age group is considered protected by vaccination.
- The active circulation SARS-CoV-2 and winter viruses in the run-up to the end-of-year festivities calls for increased compliance with preventive measures:
 - up-to-date COVID-19 vaccination, including a booster dose of bivalent vaccine (protecting against the original strain and the Omicron variant) for eligible individuals already vaccinated with a primary course, and influenza vaccination;
 - self-isolation in case of a positive COVID-19 test and/or symptoms;
 - continued application of precautionary measures, including wearing a mask (particularly around vulnerable people and in enclosed spaces favourable to transmission such as public transport), hand washing and ventilation of enclosed spaces.

*Uninterpretable data. **W49: unconsolidated data.

¹Santé 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

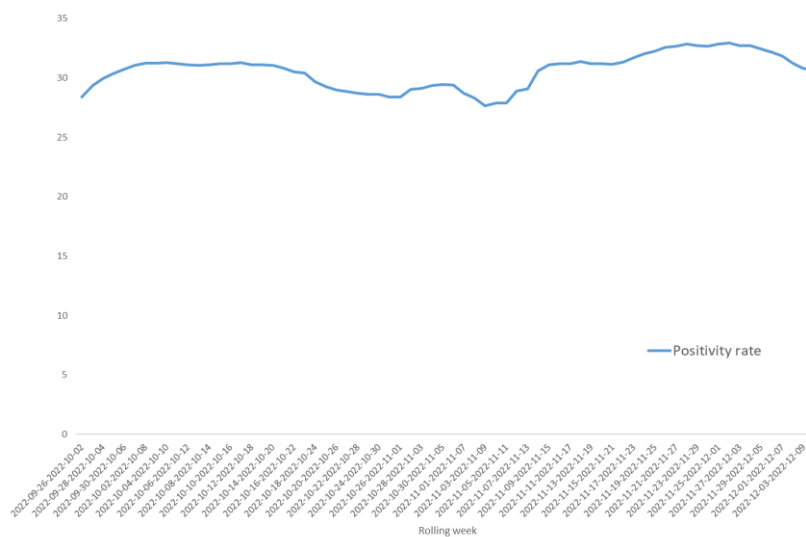
A number of private medical laboratories suspended transmission of COVID-19 test results to the SI-DEP database from 27 October to 3 November, then suspended all activity on 14-17 November and 1-2 December, consequently disrupting certain virological indicators produced by Santé publique France.

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

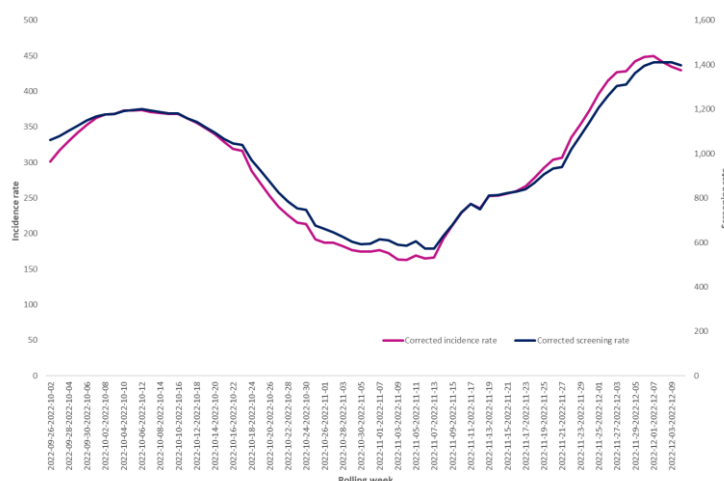
Impact analyses carried out by Santé publique France show that the dynamic of indicators based on antigen tests alone (which represent more than 50% of total tests) largely correlates with that of all tests, allowing us to continue assessing the evolution of the epidemic. However, these indicators must be interpreted with caution given possible changes in people's use of testing. The graphs below, presented as a guideline, illustrate the evolution of the positivity rate, as well as that of the incidence and screening rates (for antigen tests alone). In the second graph, only the trends are to be interpreted. Changes in the incidence and positivity rates are calculated from antigen tests over seven rolling days (Sunday to Saturday) and not by calendar week.

Furthermore, Santé publique France wishes to emphasise that since March 2020, monitoring of the COVID-19 epidemic dynamics relies on multi-source, integrated surveillance to assess changes based on indicators other than those produced solely from laboratory data. These indicators include emergency department visits, SOS Médecins consultations, hospital admissions (SI-VIC), deaths, and estimates of vaccination coverage. 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 49, comparison of the virological indicators from SI-DEP with those of the previous week was again disrupted due to strikes by certain private medical laboratories lasting until week 48. However, the majority of these indicators, as well as those concerning healthcare use, remained coherent and showed that the epidemic was still growing, although less markedly than in the previous week. Positivity rates based on antigen tests and on all tests were decreasing. The number of SOS Médecins consultations stabilised, while the number of emergency department visits, new hospital admissions and deaths continued to increase, but to a lesser extent than in the previous week. On 12 December, only 12.6% of 60-79 year-olds and 16.0% of 80+ year-olds had received a booster dose adapted to the Omicron variant. In view of this context and the active circulation of several respiratory viruses, it is necessary to reinforce COVID-19 vaccination coverage (particularly with the booster dose of bivalent vaccine adapted to the initial strain and Omicron), as well as influenza vaccination, among eligible persons. In addition, given that multiple viruses are in high circulation, greater adherence to preventive measures such as wearing a mask is needed, particularly to protect the most vulnerable and in view of the end-of-year festivities. Compliance with other recommended measures also remains necessary in case of symptoms or a positive test.

EPIDEMIOLOGICAL UPDATE

The national incidence rate based on antigen tests stabilised while the incidence rate based on all tests continued to increase, but to a lesser extent than in the previous week. A decrease in the incidence rate based on antigen tests was observed in the under-20 age group. This indicator continued to increase slightly among 20-29 year-olds as well as in the 60+ age group, and stabilised among 30-59 year-olds. The national incidence rate based on all tests was also decreasing in the under-20 age group, but increasing in all other age groups. The positivity rates calculated from both antigen tests and all tests tended to decrease. The positivity rate calculated from antigen tests alone continued to increase among 70-89 year-olds, but decreased in the other age groups. When calculated from all tests, the positivity rate was decreasing in the under-60 age group and continued to increase in the 60+ age group.

In week 49, the number of emergency department visits for suspected COVID-19 continued to increase, reaching 5,194 (+17%). This trend was observed for all age groups, with the exception of 15-44 year-olds. Consultations for suspected COVID-19 were globally stable in SOS Médecins networks, with 3,582 consultations (+4%), but increasing in the under-15 and 65+ age groups.

The number of new hospital admissions continued to rise in week 49 (7,475, i.e. +2%, unconsolidated data) although to a lesser extent compared to the previous three weeks (+20% in week 48). In addition, 625 admissions to intensive care were recorded (unconsolidated data, i.e. -2% vs +18% in week 48). Regarding the number of deaths in hospitals and long-term care facilities, an increase was observed (526, i.e. +8%, unconsolidated data).

In metropolitan France, the incidence rate based on antigen tests was stable or increasing in the majority of regions, while the rate based on all tests remained on the rise throughout the country, although less markedly in most regions. The highest increases were observed

in Hauts-de-France, Brittany, Normandy and Pays de la Loire. The highest incidence rates were observed in Provence-Alpes-Côte d'Azur, Occitanie and Auvergne-Rhône-Alpes. Hospital admission rates continued to increase in more than half of metropolitan regions. The highest rates were observed in Provence-Alpes-Côte d'Azur, Bourgogne-Franche-Comté and Auvergne-Rhône-Alpes. In overseas France, an increase in incidence rates persisted in Reunion Island where hospital admission rates were on the rise.

VARIANTS

Omicron circulates almost exclusively in France and its BA.5 sub-lineage remains omnipresent. In metropolitan France, BA.5 (all sub-lineages combined) represented 92% of interpretable sequences in the Flash Survey for week 48 (28 November, based on 1,213 interpretable sequences). Among these sub-lineages, detection of BQ.1.1 (including all further sub-lineages) continues to increase steadily, with 62% of interpretable sequences in the week 48 Flash Survey (vs 60% for the week 47 Flash Survey). Further information is available in the [risk assessment of 16 November 2022](#).

PREVENTION

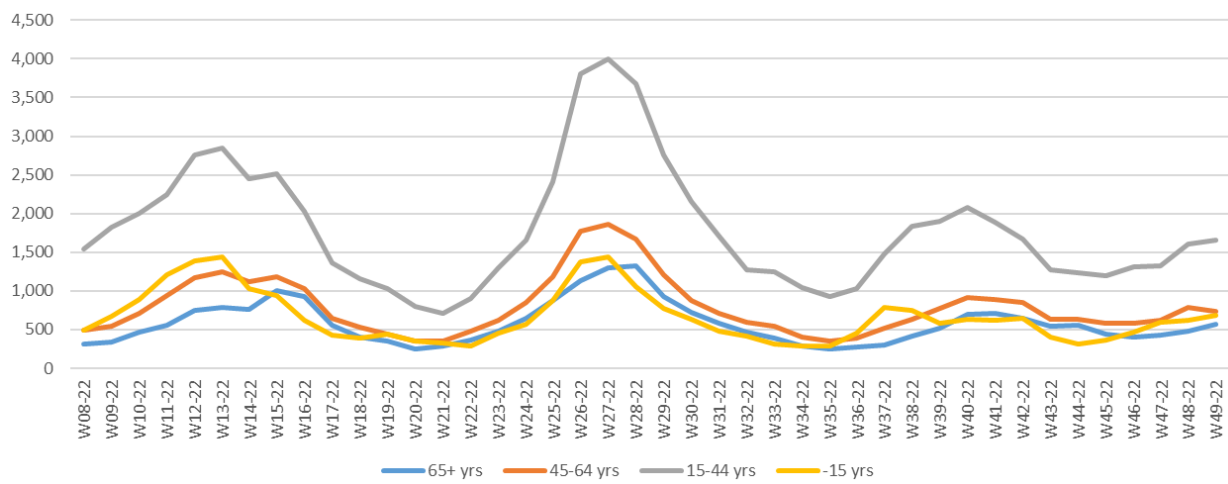
On 12 December, 11.4% of 60-79 year-olds and 14.0% of 80+ year-olds had received a booster dose adapted to the Omicron variant (12.6% and 16.0% of those eligible, respectively)* since it became available. Still in these age groups, 33.4% of 60-79 year-olds are considered to be protected by vaccination because they received their most recent dose within the last 6 months, as are 16.7% of those aged 80+ (those who received a dose within the last 3 months, all vaccines combined). These proportions do not take into account people infected with SARS-CoV-2 during this time. Vaccination coverage among health professionals for the booster adapted to the Omicron variant is estimated at 7.3% for those working in nursing homes, 8.3% for those working in private practice and 8.4% for those working in health institutions**. These regional and departmental indicators will soon be published as open data.

*Method previously described in issue N° 145. **Vaccination coverage is estimated for healthcare professionals working in nursing homes via database matching established by the National Health Insurance Fund (CNAM) in September 2021, linking the Shared Directory of Professionals Working in the Healthcare System (Répertoire Partagé des Professionnels intervenant dans le système de Santé) and ADELI (Automatisation DES Listes) directories with the Vaccin Covid database. Only doctors, pharmacists, midwives, physiotherapists, dentists and nurses are identified in these directories.

Consultations SOS Médecins

- **At national level**, SOS Médecins consultations for suspected COVID-19 were stable (+4% or +149 consultations). However, a rise was observed among 0-4 year-olds (+23% or +37 consultations), among 5-14 year-olds (+5% or +24 consultations) and in the 65+ age group (+22% or +101 consultations).
- **At regional level**, SOS Médecins consultations for suspected COVID-19 were up in Grand-Est (+50%, i.e. +112 consultations), Provence-Alpes-Côte d'Azur (+49%, i.e. +184 consultations), Martinique (+32%, i.e. +20 consultations), Brittany (+13%, i.e. +13 consultations), Nouvelle Aquitaine (+8%, i.e. +42 consultations) and Normandy (+7%, i.e. +12 consultations). They were stable or decreasing in the other regions.

Number of SOS Médecins consultations for suspected COVID-19

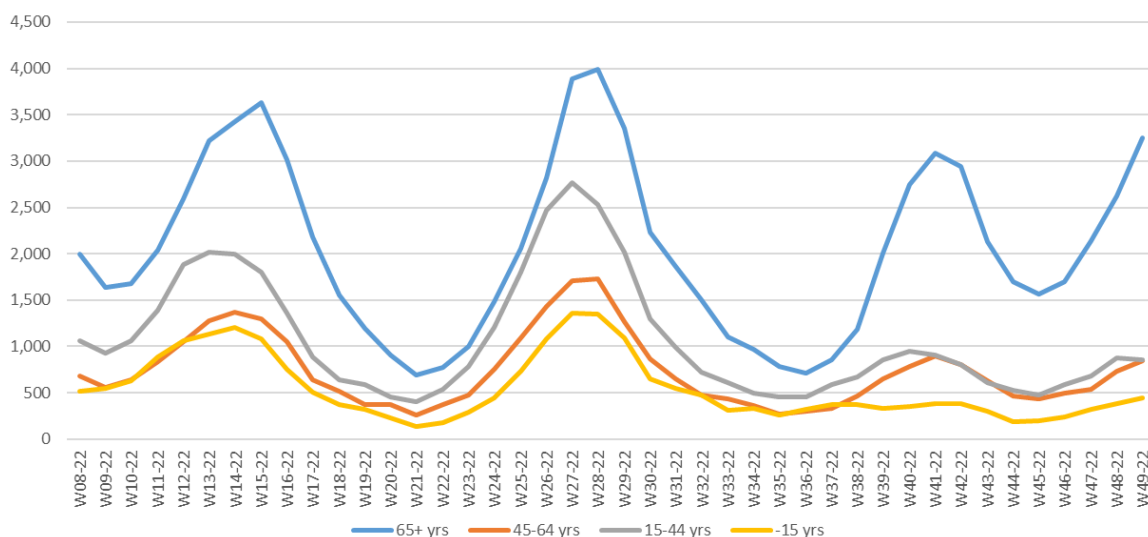


Source: SOS Médecins

Visits to emergency departments in the OSCOUR® network

- **At national level**, emergency department visits for suspected COVID-19 were on the increase (+17% or +762 visits). This trend was observed for all age groups, with the exception of 15-44 year-olds (-3% or -25 visits).
- **At regional level**, emergency department visits for suspected COVID-19 were on the increase in all regions, with the exception of Nouvelle Aquitaine, French Guiana, Guadeloupe, Provence-Alpes-Côte d'Azur and Mayotte, where they remained stable, and Corsica, where they were down. The highest increases were observed in Brittany (+55% or +69 visits), Pays de la Loire (+52% or +67 visits), Hauts de France (+31% or +98 visits) and Auvergne-Rhône-Alpes (+30% or +197 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 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 open access data on [Géodes](#)

Dashboard

[InfoCovidFrance](#)

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