

COVID-19 EPIDEMIOLOGICAL UPDATE

19 January 2023 / N° 150

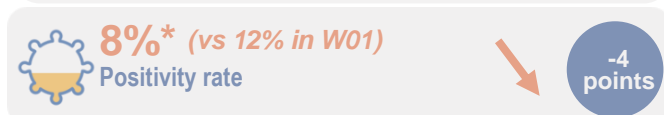
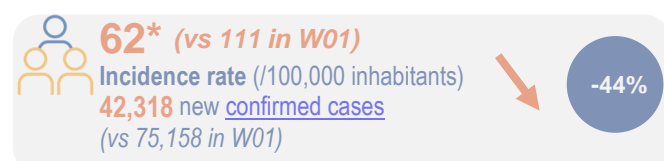
As part of its surveillance, alert, and prevention missions, Santé publique France analyses and publishes COVID-19 data obtained from its network of partners¹ as well as its own studies and surveys. This report is based on data submitted to Santé publique France up to 18 January 2023.

Following strike actions taken in some private medical laboratories from 2 to 10 January 2023, the incidence rate and screening rate are underestimated for this period; 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 the other data sources used for surveillance, which are not affected.

Key numbers

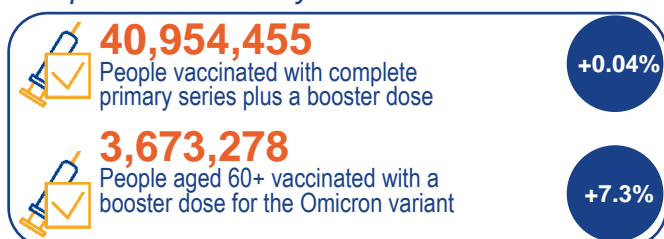
In week 2 (9-15 January 2023)

Compared to week 1 (2-8 January 2023)



On 17 January 2023

Compared to 9 January 2023



Key points

Epidemiological situation

In week 2, all indicators continued to improve at national level. The incidence rate dropped further, except among 0-9 year-olds where it remained stable at a low level. Hospital admissions and deaths continued to decrease.

- Metropolitan France:
 - Decline in incidence and positivity rates for all tests combined (antigen and PCR) across all regions
 - Decrease in hospital and intensive care admissions in most regions
 - Number of deaths in decline
- Overseas France:
 - Decrease in incidence and hospital admission rates in most regions

Variants

- BA.5 omnipresent (93% of sequences in week 52 Flash Survey on 26 December 2022); among its sub-lineages, BQ.1.1 appears to stabilise (71% vs 68% in week 51 Flash Survey)
- All Omicron sub-lineages currently identified present similar characteristics

Prevention

- Vaccination on 17 January 2023 (Vaccin Covid data):
 - 19.3% of 60-79 year-olds had received a booster dose adapted to the Omicron variant (24.2% among those eligible); 22.2% of 80+ year-olds had equally received this booster dose (25.9% among those eligible);
 - 30.1% of 60-79 year-olds and 22.0% of 80+ year-olds are considered protected by vaccination.
- Given that SARS-CoV-2 and winter viruses remain in active circulation, continued compliance with preventive measures is necessary:
 - 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 series, and flu vaccination;
 - self-isolation in case of a positive test and/or symptoms;
 - continued application of precautionary measures, including wearing a face mask (particularly around vulnerable people and in enclosed spaces favourable to transmission such as public transport), hand washing and ventilation of enclosed spaces.

*Data difficult to interpret. **W02: unconsolidated data. Revised values for these indicators will feature in the next Epidemiological Update.

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

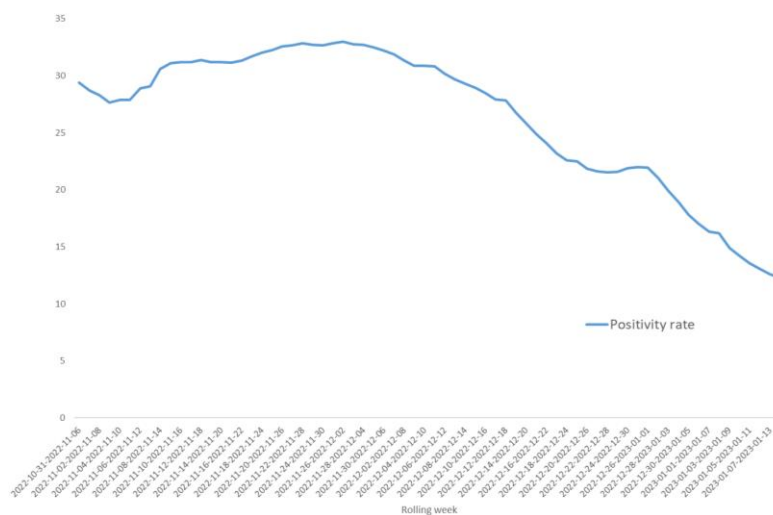
Some private medical laboratories have halted diagnostic procedures or transmission of their results, which has disrupted Santé publique France's virological indicators. These indicators must therefore be interpreted with caution for weeks 42-2022, 43-2022, 46-2022, 48-2022, 01-2023 and 02-2023.

As a result, from 21 October onwards, analysis of the virological indicators produced with SI-DEP data is based on antigen tests, mainly performed by pharmacies, as well as on RT-PCR tests performed by those laboratories that continue transmissions.

Impact analyses carried out by Santé publique France show that the dynamics of indicators produced using antigen tests alone (which represent more than 50% of total tests) largely correlate with those of all tests, allowing us to continue assessing the evolution of the epidemic. However, these indicators must be interpreted with caution given the 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.

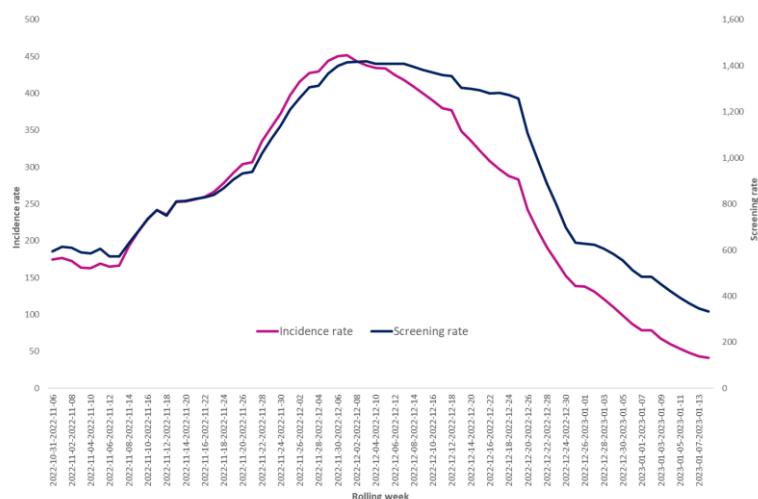
Furthermore, Santé publique France wishes to emphasise that since March 2020, monitoring of the COVID-19 epidemic dynamics relies on multi-source, integrated surveillance to assess changes based on indicators other than those produced solely from laboratory data. These indicators include emergency department 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. Virological indicators from antigen tests show a downward trend, consistent with the indicators from these other surveillance systems.

Evolution of positivity rate from antigen tests, France



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

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



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

Week 2 (9 to 15 January 2023)

SITUATION UPDATE

In week 2, the analysis of virological indicators from SI-DEP was still disrupted due to the strike actions taken by certain private medical laboratories. However, the majority of these indicators, as well as those for healthcare use, remained coherent and showed that the epidemic continued to decline. On 17 January, only 19.3% of 60-79 year-olds and 22.2% of 80+ year-olds had received a booster dose adapted to the Omicron variant. Given the active circulation of several respiratory viruses, reinforcing vaccination coverage for COVID-19 and the flu among eligible persons remains necessary. Greater adherence to preventive measures is also needed. Compliance with other recommended measures is equally necessary in case of symptoms or a positive test.

Incidence, screening and positivity rates based on antigen tests and those calculated on all tests were again decreasing. Incidence and screening rates based on all tests were stable at a low level among 0-9 year-olds, with a slight increase observed for the same age group according to indicators based on antigen tests alone. The positivity rate calculated from antigen tests and all tests decreased across all age groups, but remained stable among 0-9 year-olds. Indicators of healthcare use for suspected COVID-19 in SOS Médecins networks and emergency departments continued to decrease, as did hospital admissions, intensive care admissions and deaths. In metropolitan France, the incidence rate and hospital admission rate were falling in all regions except Nouvelle-Aquitaine where a stabilisation of intensive care admissions was observed, although numbers remained low. In overseas France, incidence rates were also in decline and remained stable in Mayotte at a low level. The number of hospital admissions was falling, except in Martinique where it was stable.

Since the emergence of Omicron in late 2021, significant and rapid genetic diversification has been observed within this variant and its successive sub-lineages. However, all Omicron sub-lineages described so far retain very similar characteristics, hence they all remain within the Omicron variant. In metropolitan France, more than 200 Omicron sub-lineages are in circulation, originating from BA.5 but also from BA.2. It is BA.5 (all further sub-lineages combined) that continues to dominate, accounting for 93% of interpretable sequences in the Flash Survey for week 52* (based on just 838 interpretable sequences). Among these sub-lineages, detection of BQ.1.1 (including all further sub-lineages) seems to stabilise, with 71% of interpretable sequences in the week 52 Flash Survey (vs 68% for the week 51 Flash Survey). Enhanced surveillance of travellers from China was implemented in early January 2023 across Europe and particularly in France. To date, the variants identified in these travellers are consistent with the data published by China and have all circulated previously in the rest of the world (including France) without any particular impact. More information is available in the [risk assessment of 11 January 2023](#).

The level of booster vaccination was still increasing slowly. On 17 January 2023, 19.3% of 60-79 year-olds and 22.2% of 80+ year-olds had received a booster dose adapted to the Omicron variant (24.2% and 25.9% among those eligible, respectively**). At that date, 30.1% of 60-79 year-olds were considered protected by vaccination (most recent dose within the last 6 months), as were 22.0% of 80+ year-olds (most recent dose within the last 3 months)***. Vaccination coverage among health professionals for the primary vaccination series, the first booster dose and the booster adapted to the Omicron variant is estimated respectively at 95.6%, 86.2% and 11.5% for those working in nursing homes; 97.7%, 88.9% and 12.8% for those working in private practice; 96.6%, 88.3% and 13.1% for those working in health institutions****.

*The Flash Survey for week 1 could not yet be analysed due to the low number of sequences. **Method described in COVID-19 Epidemiological Update N° 145. ***All COVID-19 vaccines included. These proportions do not take into account people infected with SARS-CoV-2 during this time. ****Method described in COVID-19 Epidemiological Update N° 147.

Graphs and tables

[InfoCovidFrance](#)

The dashboard gives direct access to the indicators presented as graphs and tables and a complementary weekly report covering:

- [hospital indicators](#)
- [long-term care facility indicators](#)
- [virological data at national level](#)
- [virological data at regional level](#)
- [data on variants](#)
- [data on vaccination coverage](#)

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](#)