

# COVID-19 EPIDEMIOLOGICAL UPDATE

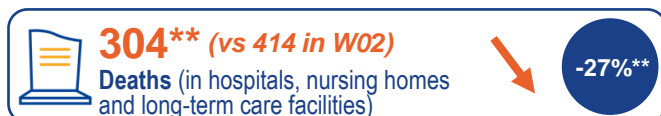
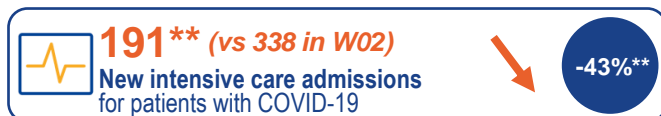
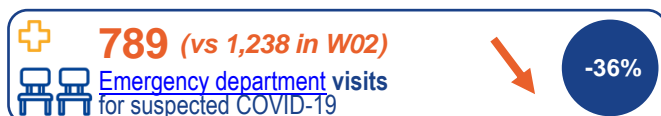
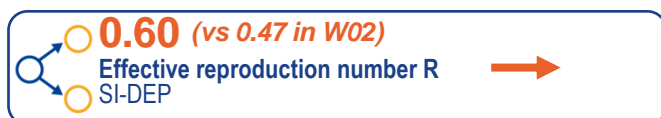
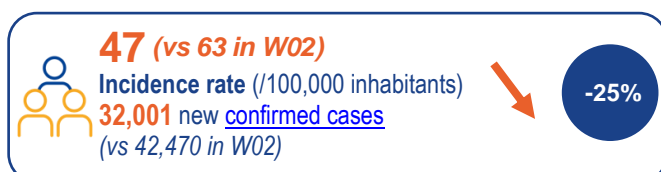
26 January 2023 / N° 151

As part of its surveillance, alert, and prevention missions, Santé publique France analyses and publishes COVID-19 data obtained from its network of partners<sup>1</sup> as well as its own studies and surveys. This report is based on data submitted to Santé publique France up to 25 January 2023.

## Key numbers

In week 3 (16-22 January 2023)

Compared to week 2 (9-15 January 2023)\*



On 24 January 2023

Compared to 17 January 2023



\*Following strike actions in some private medical laboratories from 2 to 10 January 2023, the incidence rate, screening rate and effective R are underestimated for this period; the positivity rate is also affected. \*\*W03: unconsolidated data. Revised values for these indicators will feature in the next Epidemiological Update.

<sup>1</sup>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.

## Key points

### Epidemiological situation

In week 3, the epidemic continued to decline, with virological and hospital indicators falling at national level.

#### Metropolitan France:

- Decline in incidence and screening rates across all regions
- Decrease in hospital admission rates and deaths across all regions

#### Overseas France:

- Incidence and positivity rates rising in Reunion Island and stable in Guadeloupe

### Variants

- BA.5 omnipresent (91% of sequences in week 1-2023 Flash Survey); among its sub-lineages, BQ.1.1 appears to stabilise (71%: stable compared to week 52-2022 Flash Survey)
- All Omicron sub-lineages currently identified present similar characteristics

### Prevention

- Vaccination on 24 January 2023 (Vaccin Covid data):
  - 20.3% of 60-79 year-olds had received a booster dose adapted to the Omicron variant (25.3% among those eligible); 23.2% of 80+ year-olds had equally received this booster dose (26.9% among those eligible);
  - 28.9% of 60-79 year-olds and 21.4% of 80+ year-olds had received their latest vaccine dose in the last 6 or 3 months, respectively.
- 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.

## Week 3 (16 to 22 January 2023)

### SITUATION UPDATE

In week 3, the epidemic continued to decrease with a drop in virological and hospital indicators at national level. On 17 January, only 20.3% of 60-79 year-olds and 23.2% 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 rates were falling in all age groups. The screening rate also decreased, except for the under-10s, where it was stable at a low level. The positivity rate was down in the majority of age groups, although less markedly among adults aged 50+, and remained stable among 10-19 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, virological indicators and hospital admission rates were falling in all regions. In overseas France, incidence and positivity rates were highest and rising again in Reunion Island. These indicators were down in Martinique and stable in Guadeloupe as well as in French Guiana and Mayotte, where the numbers remained very low. The number of new hospital admissions decreased in all these regions.

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 so far described retain very similar characteristics and therefore remain included within this variant. In metropolitan France, it is BA.5 (all further sub-lineages combined) that continues to dominate, accounting for 91% of interpretable sequences in the week 1-2023 Flash Survey (based on just 703 interpretable sequences). Among these sub-lineages, detection of BQ.1.1 (including all further sub-lineages) seemed to stabilise, with 71% of interpretable sequences in the week 1-2023 Flash Survey (stable compared to the week 52-2022 Flash Survey). In parallel to BA.5 and its sub-lineages, there is a stable circulation of BA.2 sub-lineages (6% of interpretable sequences in the Flash Surveys for weeks 52-2022 and 1-2023) and of the recombinant XBB (including further sub-lineages, 2% of interpretable sequences in the Flash Surveys for weeks 52-2022 and 1-2023). More information is available in the risk assessment of 11/01/2023.

The level of booster vaccination was still increasing slowly. On 24 January 2023, 20.3% of 60-79 year-olds and 23.2% of 80+ year-olds had received a booster dose adapted to the Omicron variant (25.3% and 26.9% among those eligible, respectively\*). At that date, 28.9% of 60-79 year-olds had received a vaccine dose within the last 6 months\*\*, and 21.4% of 80+ year-olds 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%, 86.3% and 12% for those working in nursing homes; 97.7%, 88.9% and 13.3% for those working in private practice; 96.6%, 88.3% and 13.7% for those working in health institutions\*\*\*.

\*Method described in *Epidemiological Update* N° 145. \*\*All COVID-19 vaccines included. \*\*\*Method described in *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](#)