



Acute respiratory infections

Week 43 (23 to 29 October 2023). Publication: 02 November 2023

NATIONAL EDITION

This week's trends

Acute respiratory infections (ARI). Activity stable in general practice and increasing slightly in hospitals.

Bronchiolitis. Activity linked to bronchiolitis in children under 2 years rising in all regions.

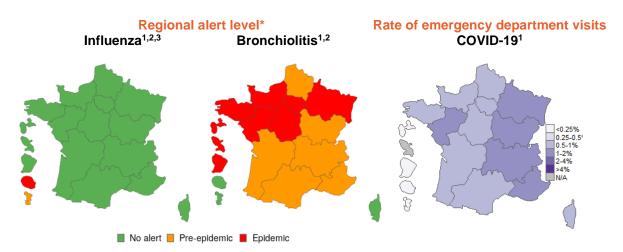
COVID-19. Decrease or trend towards stabilisation for most indicators.

Influenza. Influenza indicators stable at baseline levels in all regions except Reunion Island, which remained in an epidemic, and Mayotte, which was in the pre-epidemic phase.

Key indicators

Syndromic indicators

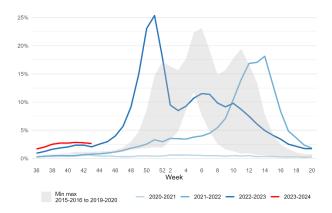
	Lower ARI*		Influenza		Bronchiolitis (< 2 years)		COVID-19	
Share of pathology among	W43	W43 vs W42	W43	W43 vs W42	W43	W43 vs W42	W43	W43 vs W42
SOS Médecins consultations	13.3%	+0.1 pts	2.6%	-0.1 pts	6.9%	+0.4 pts	2.9%	-0.5 pts
Emergency department visits (OSCOUR®)	4.3%	+0.5 pts	0.2%	0 pts	13.0%	+2.5 pts	0.9%	0 pts
Hospitalisations post-emergency department visit (OSCOUR®)	8.7%	+0.5 pts	0.1%	0 pts	27.6%	+3.9 pts	2.0%	-0.1 pts



*Methodology explained in the <u>appendix</u>. Source: ¹OSCOUR® network, ²SOS Médecins, ³Sentinelles network

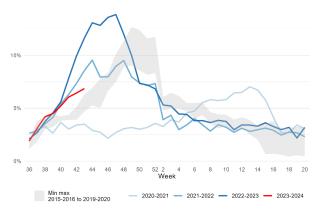
See the <u>regional bulletins</u> (French only) by Santé publique France for the epidemiological situation in each region.

Share of influenza-like illness among SOS Médecins consultations



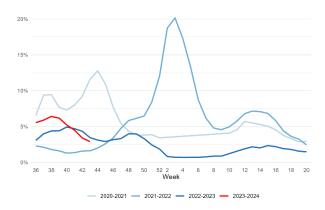
Source: SOS Médecins

Share of bronchiolitis among SOS Médecins consultations for children under 2 years



Source: SOS Médecins

Share of suspected COVID-19 among SOS Médecins consultations



Source: SOS Médecins

Virological indicators

	Influenza viruses		RSV		SARS-CoV-2	
Positivity rate of samples	W43	W43 vs W42	W43	W43 vs W42	W43	W43 vs W42
General practice (Sentinelles network, National Reference Centres)	1.1%	+1.1 pts	5.5%	+0.1 pts	24.2%	+8.0 pts
Hospital settings (RENAL network, National Reference Centres)	0.4%	+0.1 pts	5.0%	+1.0 pt	14.4%	-0.4 pts

	SAR	SARS-CoV-2		
	W43	W43 vs W42		
Positivity rate of tests in medical laboratories	21.8%	+0.2 pts		
Wastewater surveillance (SUM'Eau)*	**	**		

*Ratio of SARS-CoV-2 viral concentration to ammoniacal nitrogen concentration. **Incomplete data for W43. Methodology explained in the appendix

See the bulletin by the Sentinelles network (in English) for the epidemiological situation in general practice.

Situation update

In week 43, indicators for acute respiratory infections were stable in general practice and slightly increased in hospital settings, with disparities according to age. Activity related to bronchiolitis continued to rise in general practice and hospital settings for children under 2 years of age, with the Centre-Val de Loire and Grand Est regions entering the epidemic phase this week. A decrease in COVID-19 indicators was observed, except for a stabilisation in emergency department activity (visits and hospitalisations post-visit) and an increase in positivity rate within general practice. Influenza activity remained at baseline level in all regions except Reunion Island and Mayotte.

The increase in bronchiolitis-related activity observed in mainland France continued for all syndromic surveillance indicators: SOS Médecins consultations, emergency department visits and hospitalisations post-visit for bronchiolitis. Positivity rates of respiratory syncytial virus (RSV) in nasopharyngeal swabs taken from all age groups increased slightly in the hospital setting. However, these rates remained moderate in both general practice (4.1%) and hospitals (4.4%). Other viruses that may induce bronchiolitis are currently circulating, particularly rhinoviruses. In mainland France, the regions of Centre-Val de Loire and Grand Est entered the epidemic phase, bringing the total number of epidemic regions to six. The regions of Bourgogne-Franche-Comté, Auvergne-Rhône-Alpes and Provence-Alpes-Côte d'Azur have moved into the pre-epidemic phase, bringing the total number of pre-epidemic regions to six. In overseas France, three regions remained in the epidemic phase: Guadeloupe, Martinique and French Guiana.

With regard to COVID-19, syndromic indicators for all age groups were stable or decreasing (SOS Médecins, emergency department visits and hospitalisations post-visit). The positivity rate of samples was stable in the hospital setting, but an increase was observed in general practice. This trend will need to be confirmed next week due to the small number of samples taken this week during the holiday period.

The number of new ARI clusters in long-term care facilities has been decreasing since early October, but this trend will need confirmation in the coming weeks upon data consolidation. Particular attention is paid to this population due to the potentially severe impact of the virus on the most vulnerable.

Influenza indicators were stable and at baseline levels in mainland France, with sporadic detection of influenza cases as usually observed at this time of year. The situation was identical in the Antilles and French Guiana. In Reunion Island, an epidemic wave mainly due to the A(H3N2) virus has been underway since late August. In week 43, the indicators were down in the hospital setting for the second consecutive week, although still at an epidemic level. Mayotte has been in the pre-epidemic phase since week 42.

In this context, it is important to be particularly vigilant and to apply protective measures, especially around children under the age of 2 years, in order to prevent bronchiolitis. In addition, it is important that elderly and fragile individuals have access to COVID-19 and influenza vaccinations. These vaccinations can be given at the same time.

About this bulletin

This weekly bulletin provides key syndromic and virological indicators for acute respiratory infections (ARI) with an overview of recent epidemiological trends in the French territories (mainland and overseas). Santé publique France, the French public health agency, produces these indicators to help monitor COVID-19, influenza and bronchiolitis on a grouped or specific basis, and to better estimate their burden and impact on the healthcare system. The English version is an extract from the <u>Infections réspiratoires aiguës</u> bulletin, which contains further indicators, graphs and analysis based on data from France's integrated surveillance system.

Partners

Santé publique France acknowledges the large public health network that contributes to the surveillance of acute respiratory infections: healthcare professionals working in private practice and hospitals, emergency departments, hospital and private biology laboratories, learned societies for infectious diseases, intensive care, and emergency medicine, CNAM, INSERM, and INSEE.

For more information (French only)

Integrated <u>ARI</u> surveillance Surveillance of <u>influenza</u>, <u>bronchiolitis</u> and <u>COVID-19</u>

<u>SurSaUD®</u> syndromic surveillance Surveillance in long-term care facilities

Surveillance in general practice: Sentinelles network

Virological surveillance

Genomic surveillance: <u>variant risk analysis</u> Regional trends: see <u>regional bulletins</u> Open data indicators: <u>Géodes</u>, <u>data.gouv.fr</u>

Editorial team

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