

Acute respiratory infections

Week 48 (27 November to 3 December 2023). Publication: 6 December 2023

NATIONAL EDITION

This week's trends

Acute respiratory infections (ARI). Activity rising in general practice and in hospitals.

Bronchiolitis. Epidemic continues: all regions of mainland France except Corsica in epidemic phase, with bronchiolitis-related activity in general practice tending to stabilise. Three overseas regions also remain in epidemic phase.

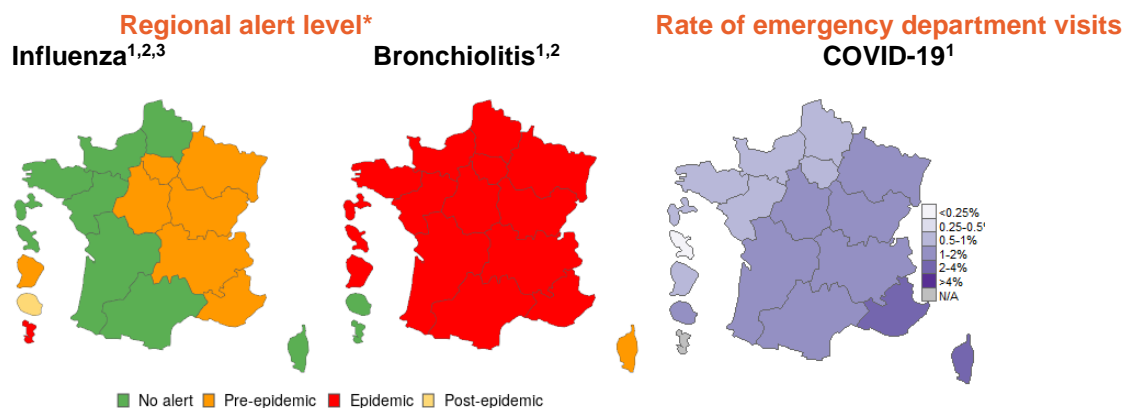
COVID-19. Further increase in most indicators.

Influenza. Indicators for influenza/influenza-like illness in mainland France rising in general practice. Regions of Bourgogne-Franche-Comté, Centre-Val de Loire and Grand Est, as well as French Guiana, entered pre-epidemic phase.

Key indicators

Syndromic indicators

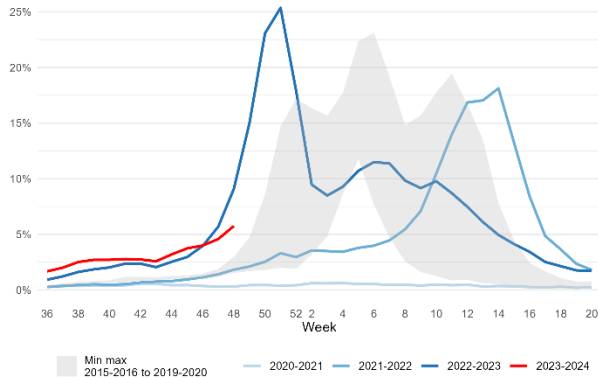
Share of pathology among	Lower ARI*		Influenza		Bronchiolitis (<2 years)		COVID-19	
	W48	W48 vs W47	W48	W48 vs W47	W48	W48 vs W47	W48	W48 vs W47
SOS Médecins consultations	19.9%	+2.6 pts	5.8%	+1.2 pts	11.8%	0 pts	4.0%	+0.8 pts
Emergency department visits (OSCOUR®)	7.1%	+1.0 pts	0.4%	+0.1 pts	24.1%	+1.0 pts	1.2%	+0.2 pts
Admissions post-emergency department visit (OSCOUR®)	12.7%	+1.6 pts	0.2%	+0.1 pts	44.9%	+1.1 pts	2.7%	+0.5 pts



*Methodology explained in the [appendix](#). Source: ¹OSCOUR® network, ²SOS Médecins, ³Sentinelles network

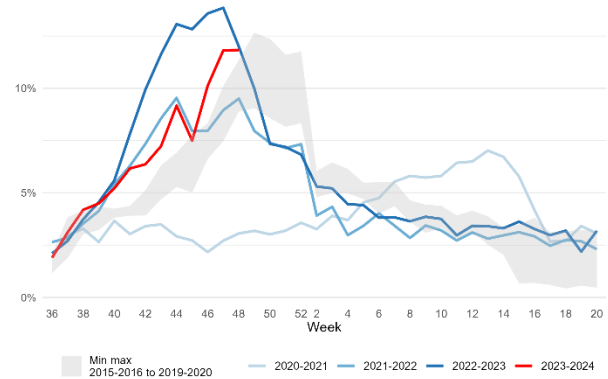
See the [regional bulletins](#) (French only) by Santé publique France for the epidemiological situation in each region.

Share of influenza-like illness among SOS Médecins consultations



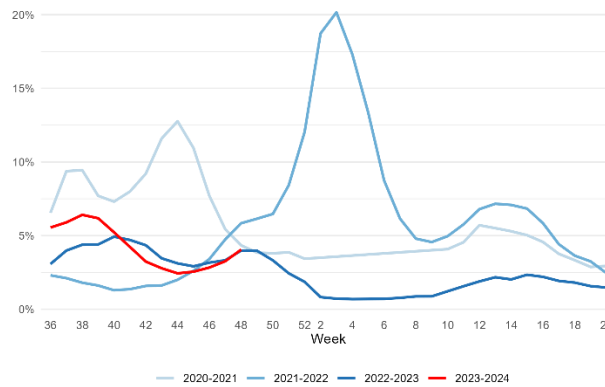
Source: SOS Médecins

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	
	W48	W48 vs W47	W48	W48 vs W47	W48	W48 vs W47
General practice (Sentinelles network, National Reference Centres)	5.1%	+1.7 pts	16.4%	-5.4 pt	22.5%	-2.3 pts
Hospitals (RENAL network, National Reference Centres)	1.5%	+0.6 pts	15.3%	+1.1 pts	18.2%	+2.7 pts

	SARS-CoV-2	
	W48	W48 vs W47
Positivity rate of tests in medical laboratories	27.1%	+2.8 pts
Wastewater surveillance (SUM'Eau)*	12,715	+24%

*Ratio of SARS-CoV-2 viral concentration to ammoniacal nitrogen concentration.
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 48, indicators for acute respiratory infections were increasing in general practice and in hospital settings. All regions of mainland France, except Corsica, were above the epidemic threshold, with bronchiolitis-related activity tending to stabilise in general practice. Activity linked to COVID-19 increased slightly in general practice and in hospitals, particularly among people above the age of 65 years. Indicators for influenza/influenza-like illness (ILI) were on the rise in general practice and stable overall in hospitals. The circulation of SARS-CoV-2, respiratory syncytial virus (RSV) and rhinovirus remained very active, and detection of influenza viruses has increased in recent weeks. Against this backdrop, and in the run-up to family gatherings over the festive season, it is vital that people at risk protect themselves by getting vaccinated against seasonal influenza and COVID-19, and that everyone continues to take precautionary measures.

The bronchiolitis epidemic continues in mainland France, with the exception of Corsica, which remains in the pre-epidemic phase. Indicators tended to stabilise in general practice, while increases in emergency department visits for bronchiolitis and hospitalisations post-visit were smaller than in the previous week. If confirmed, these trends suggest that the epidemic could pass its peak in the coming weeks. RSV positivity rates tended to stabilise in general practice but were rising in hospitals. Other viruses likely to cause bronchiolitis continued circulating, notably rhinoviruses. In overseas France, three regions remained above the epidemic threshold: Guadeloupe, Martinique and French Guiana.

For COVID-19, the upward trend in syndromic indicators continued in both general practice and hospital settings, particularly among people aged 65 and over. The positivity rate fell in general practice but rose in hospitals. An increase in virological indicators from tests carried out in medical laboratories was observed in all age groups among the population tested. In addition, there was a sharp increase (+24%) in the level of SARS-CoV-2 detected in wastewater this week, indicating an active circulation of the virus in mainland France.

Indicators for influenza/ILI were on the rise in general practice for all age groups. The number of emergency department visits and the proportion among all-cause visits rose slightly, but hospital admissions remained stable. In mainland France, the regions of Bourgogne-Franche-Comté, Centre-Val de Loire and Grand Est entered the pre-epidemic phase this week, bringing the total number of regions in this phase to six. Virological data were also on the increase in both general practice and hospital settings. In overseas France, French Guiana crossed the epidemic threshold this week. Mayotte is in an epidemic phase since week 44 and Reunion Island is in a post-epidemic phase since week 45.

In long-term care facilities (care homes), episodes of ARI clusters were almost exclusively due to COVID-19. After decreasing since the beginning of October, the number of ARI clusters occurring in long-term care facilities has been on the rise again since week 46. Particular attention is paid to this population because of the potentially severe impact of ARI on vulnerable individuals.

At the end of week 48, COVID-19 vaccination coverage within the autumn 2023 campaign among people aged 65+ was 23.9% (17.5% of 65–69 year-olds, 22.0% of 70–74 year-olds, 28.4% of 75–79 year-olds and 28.7% of 80+ year-olds). Since 17 October 2023, 33.5% of COVID-19 vaccinations for people aged 65+ have been carried out at the same time as an influenza vaccination.

Against this backdrop, and in addition to vaccination against influenza and COVID-19, it is essential for everyone to systematically adopt barrier measures, in particular wearing a mask when symptomatic, in crowded places and in the presence of vulnerable people. These measures remain an effective way of protecting against respiratory infections and their complications, by limiting the risk of transmitting these viruses to others, particularly people at risk.

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 *Infections respiratoires aiguës* bulletin, which contains further indicators, graphs and analysis based on data gathered through 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, resuscitation and emergency medicine, CNAM, INSERM and INSEE.

For more information (French only):

Integrated ARI surveillance

Surveillance of influenza, bronchiolitis and COVID-19

SURSAUD@ syndromic surveillance

Surveillance in long-term care facilities

Surveillance in general practice: Sentinelles Network (INSERM – Sorbonne University)

Virological surveillance

Genomic surveillance: Variant risk analysis

Regional trends: see Regional Bulletins

Open data indicators: Géodes, data.gouv.fr

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