

Acute respiratory infections

Week 7 (12 to 18 February 2024). Publication: 21 February 2024

NATIONAL EDITION

This week's trends

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

Influenza. Continuation of the epidemic in mainland France with a sharp decrease in all indicators in general practice and in hospitals.

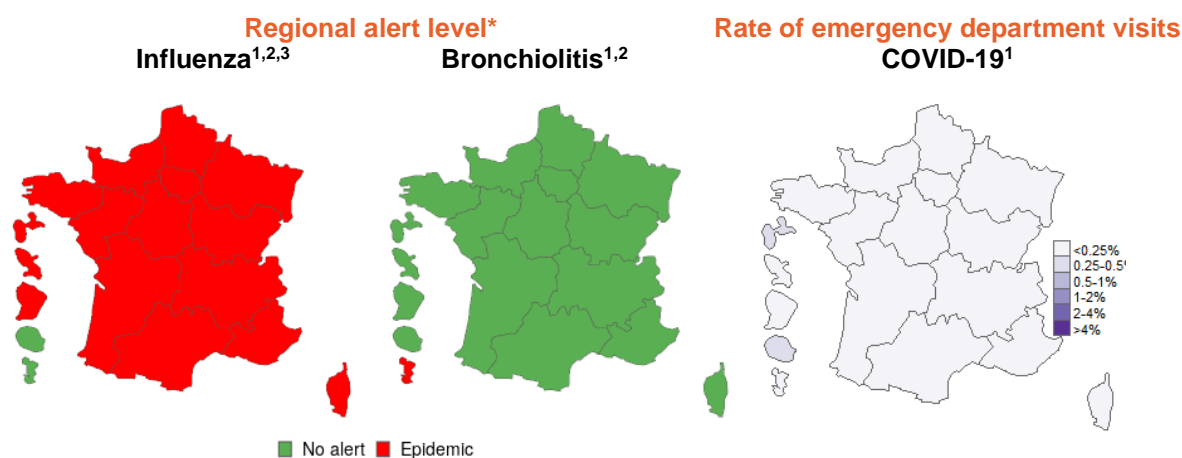
Bronchiolitis. End of the epidemic in mainland France. Mayotte remains in epidemic phase.

COVID-19. Majority of indicators in decline and at low levels.

Key indicators

Syndromic indicators

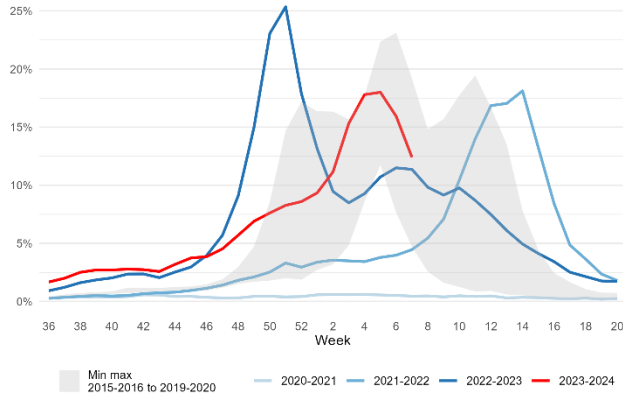
| Share of pathology among | Lower ARI* | | Influenza | | Bronchiolitis (< 2 years) | | COVID-19 | |
|--|------------|------------|-----------|------------|---------------------------|------------|----------|------------|
| | W07 | W07 vs W06 | W07 | W07 vs W06 | W07 | W07 vs W06 | W07 | W07 vs W06 |
| SOS Médecins consultations | 20.2% | -4.0 pts | 12.4% | -3.5 pts | 4.0% | -0.1 pts | 0.4% | -0.1 pts |
| Emergency department visits (OSCOUR®) | 5.7% | -0.9 pts | 2.2% | -0.7 pts | 7.5% | +0.4 pts | 0.2% | -0.1 pts |
| Admissions post-emergency department visit (OSCOUR®) | 9.6% | -1.4 pts | 2.2% | -0.8 pts | 15.2% | +0.6 pts | 0.4% | -0.2 pts |



* Methodology explained in the [appendix](#). French Antilles: W06 alert level. Source: ¹ OSCOUR® network, ² SOS Médecins, ³ Sentinelles network

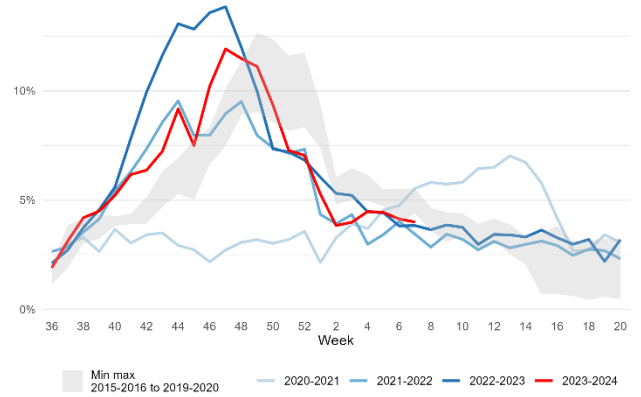
Read the [regional bulletins](#) (French only) by Santé publique France for the epidemiological situation in each region.

Share of influenza-like illness among SOS Médecins consultations



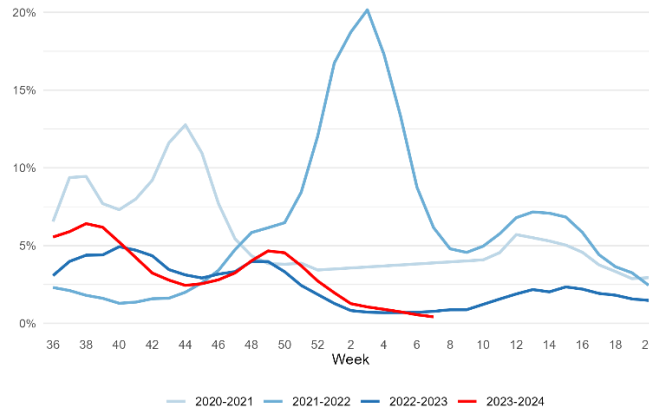
Source: SOS Médecins

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

| Positivity rate of samples | Influenza viruses | | RSV | | SARS-CoV-2 | |
|--|-------------------|------------|------|------------|------------|------------|
| | W07 | W07 vs W06 | W07 | W07 vs W06 | W07 | W07 vs W06 |
| General practice (Sentinelles network, National Reference Centres) | 48.6% | -1.4 pts | 0.0% | 0 pts | 2.1% | -0.3 pts |
| Hospitals (RENAL network, National Reference Centres) | 14.9% | -2.9 pts | 1.1% | -0.4 pts | 3.7% | -1.0 pts |

SARS-CoV-2

| | W07 | W07 vs W06 |
|--|-------|------------|
| Positivity rate of tests in medical laboratories | 3.5% | -0.9 pts |
| Wastewater surveillance (SUM'Eau)* | 2,212 | +6.7% |

* Ratio of SARS-CoV-2 viral concentration to ammoniacal nitrogen concentration. Methodology explained in the [appendix](#)

Read the bulletin by the [Sentinelles network](#) (in English) for the epidemiological situation in general practice.

Situation update

In week 7, indicators for acute respiratory infections were decreasing in both general practice and hospital settings. In mainland France, the flu epidemic continued but this week there was a sharp decrease in indicators in both general practice and hospital settings. However, the circulation of influenza viruses remained at a high level. The majority of COVID-19 indicators were decreasing and at low levels, reflecting moderate circulation of SARS-CoV-2. With regard to bronchiolitis, the indicators had returned to baseline level in all regions of mainland France. In overseas France, only Mayotte remained in the epidemic phase. Against this epidemiological backdrop, and in addition to vaccination against COVID-19 and influenza, the systematic use of protective measures by all remains important in crowded places or in the presence of people at risk, particularly wearing a mask if symptomatic.

The influenza epidemic continued in mainland France but all indicators decreased sharply this week in general practice and hospitals, in all age groups. In general practice, the share of SOS Médecins activity accounted for by influenza-like illness went from moderate to low for all ages. In hospitals, the proportion of admissions post-emergency department visit went from high to moderate for all ages. In the French overseas departments and regions, French Guiana and the Antilles remained in the epidemic phase.

Syndromic and virological indicators of COVID-19 were declining and at low levels. The positivity rate was stable in general practice and declining in hospitals. In wastewater, detection of SARS-CoV-2 was slightly up.

For bronchiolitis in mainland France, all indicators remained at low levels in all regions. In the French overseas departments and regions, Mayotte remained in the epidemic phase.

In long-term care facilities (care homes), the number of ARI clusters reported has been stable at a moderate level since the beginning of January. The share of clusters due to influenza, on the rise since mid-December (week 51), accounted for the majority since mid-January (week 2). Due to the potentially severe impact of ARI on vulnerable individuals, specific monitoring of this indicator remains in place.

Estimates of influenza vaccination coverage at 31 December 2023 among people at risk targeted for vaccination were 45.9% overall, or 52.7% among people aged 65+ and 24.5% among those under 65 at risk of severe influenza. This vaccine coverage is lower than that estimated for the 2022–2023 season on the same date (50.0% for all at-risk individuals targeted by vaccination, with 54.7% among those aged 65+ and 30.0% among those aged under 65 at risk of severe influenza).

At the end of week 7, COVID-19 vaccination coverage within the autumn 2023 campaign among people aged 65+ was 30.1% (21.6% of 65–69 year-olds, 27.4% of 70–74 year-olds, 35.9% of 75–79 year-olds and 36.8% of 80+ year-olds). Since 17 October 2023, 29.2% of COVID-19 vaccinations for people aged 65+ have been carried out at the same time as an influenza vaccine.

In the current context, and in addition to vaccination against COVID-19 and influenza, it remains important for everyone to systematically adopt protective measures, particularly wearing a mask when symptomatic, in crowded places or in the presence of people at risk, and to wash hands and frequently air interiors. These measures remain an effective way of protecting against respiratory infections and their complications by limiting the risk of transmitting these viruses to close contacts, 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 *Bulletin des infections respiratoires aiguës*, which contains further indicators, graphs and analysis based on data gathered through France's integrated ARI 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 (National Reference Centre for Viral Respiratory Infections)

Genomic surveillance: Variant risk analysis

Regional trends: see Regional Bulletins

Open data indicators: Géodes, data.gouv.fr

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