



Royal College of
General Practitioners
Research and Surveillance Centre

RSC Communicable and Respiratory Disease Report for England

Key Statistics:

Week Number/Year.....13/2017
Week Starting - Ending.....27/03/2017 - 02/04/2017
No. of Practices.....155
Population.....1533167

National (England)

- **Acute Bronchitis** : was unchanged at **60.2** in week 12 compared with **62.0** in week 13.
- **Asthma** : increased a little from **13.8** in week 12 to **14.3** in week 13.
- **Common Cold** : was unchanged at **87.3** in week 12 compared with **89.9** in week 13.
- **Influenza-Like illness** : decreased from **5.0** in week 12 to **3.8** in week 13.
- **Respiratory System Diseases** : increased from **285.1** in week 12 to **299.5** in week 13.

Regional (London, North, South and Midlands And East)

- **Acute Bronchitis** : was unchanged at **56.1** in week 12 compared with **56.5** in week 13 in the London region, was unchanged at **65.1** in week 12 compared with **63.7** in week 13 in the North region, increased from **49.1** in week 12 to **52.5** in week 13 in the South region, and increased from **77.4** in week 12 to **84.9** in week 13 in the Midlands And East region.
- **Asthma** : increased from **14.3** in week 12 to **15.3** in week 13 in the London region, was unchanged at **14.4** in week 12 compared with **14.8** in week 13 in the North region, increased from **10.8** in week 12 to **14.8** in week 13 in the South region, and decreased from **17.8** in week 12 to **11.2** in week 13 in the Midlands And East region.
- **Common Cold** : was unchanged at **121.9** in week 12 compared with **125.4** in week 13 in the London region, was unchanged at **86.1** in week 12 compared with **88.0** in week 13 in the North region, increased from **67.7** in week 12 to **72.0** in week 13 in the South region, and was unchanged at **81.2** in week 12 compared with **82.8** in week 13 in the Midlands And East region.
- **Influenza-Like illness** : decreased from **10.9** in week 12 to **5.0** in week 13 in the London region, was unchanged at **3.3** in week 12 compared with **3.3** in week 13 in the North region, increased from **3.2** in week 12 to **3.7** in week 13 in the South region, and decreased from **4.1** in week 12 to **3.3** in week 13 in the Midlands And East region.
- **Respiratory System Diseases** : was unchanged at **343.0** in week 12 compared with **348.1** in week 13 in the London region, increased from **277.3** in week 12 to **296.2** in week 13 in the North region, increased from **232.6** in week 12 to **258.2** in week 13 in the South region, and was unchanged at **324.6** in week 12 compared with **324.6** in week 13 in the Midlands And East region.

Comment:

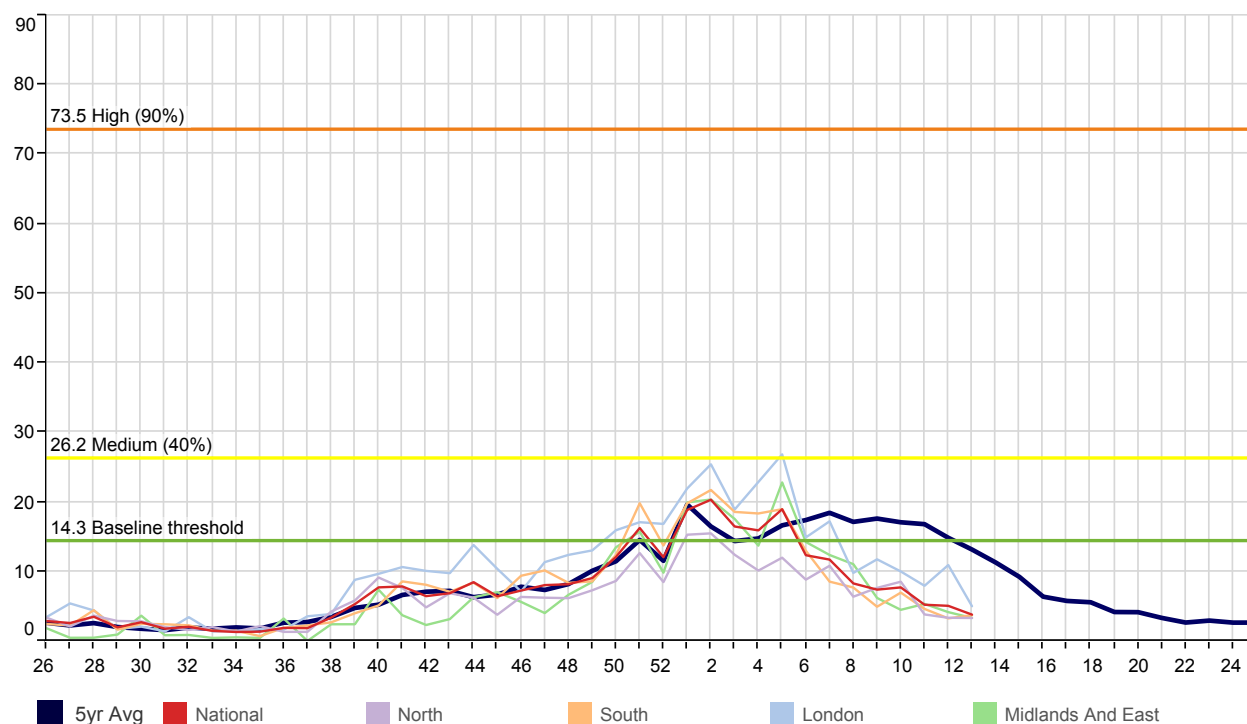
The rate of respiratory conditions increased slightly this week, but it remains below seasonally expected levels.

Presentations of influenza-like illness in primary care decreased, and are below the baseline threshold.

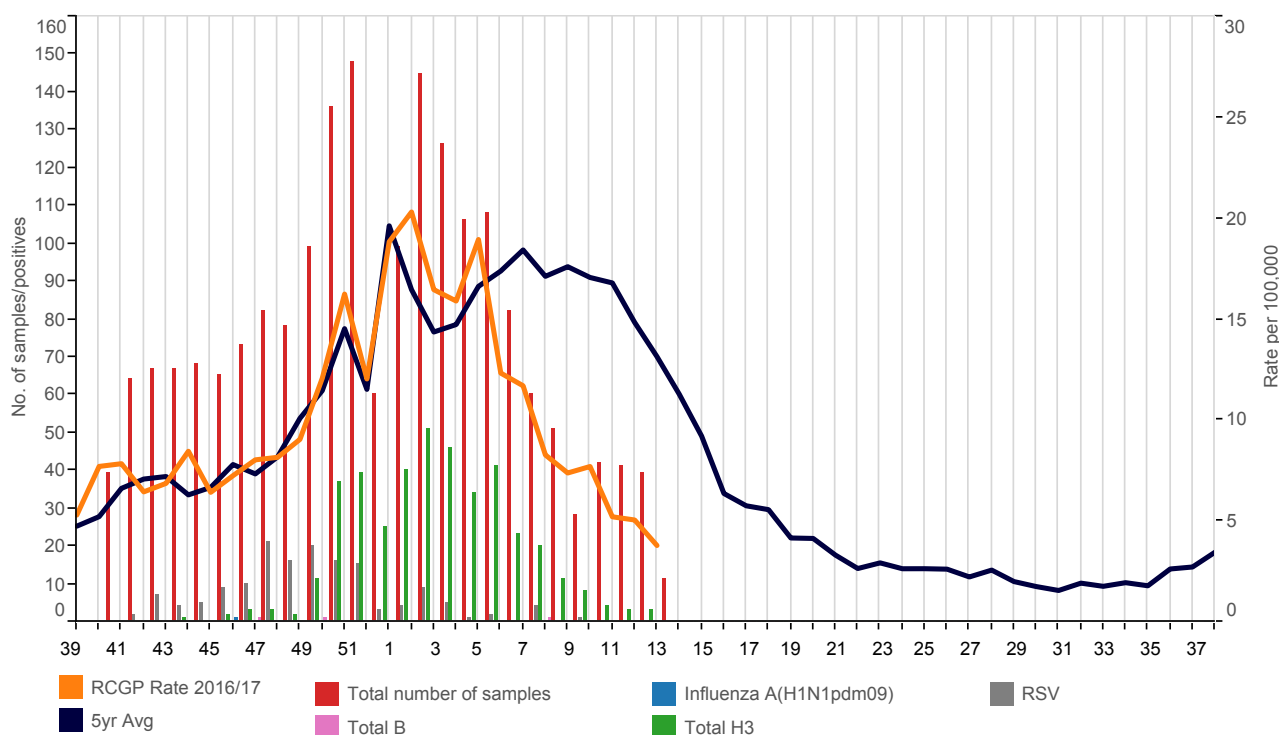
Winter Focus 2016/17

Please see page 13 for explanatory notes on the data.

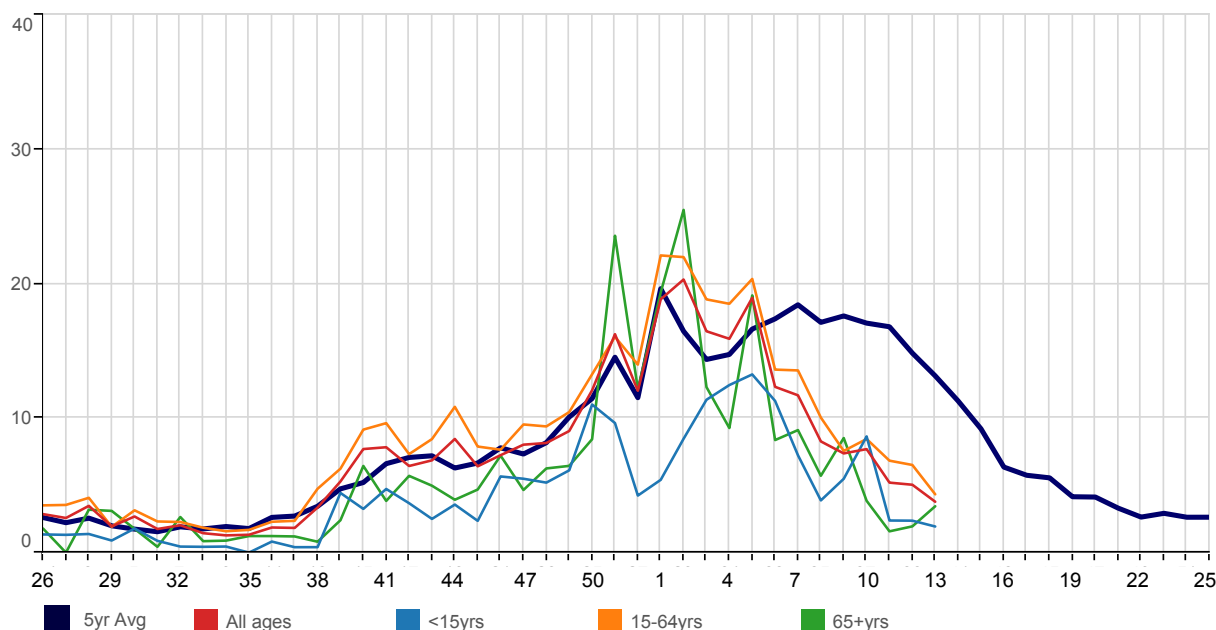
(A) Influenza-like illness: incidence rate winter 2016/17*



(B) RCGP/PHE RSV and Influenza Virology Swab Surveillance 2016/17(all ages, gender & regions combined)*



* The thresholds used are the agreed RCGP/ Public Health England levels for 2016/17. The rolling average line (blue) is based on 5 year historic RCGP RSC level.

(C) Influenza-like illness: national incidence rate 2016/2017 by age group***(D) Influenza-like illness: national incidence rate 2016/2017 by age group***

This table shows the level of intensity of ILI by age band. MEM thresholds have been calculated separately for each age band - the ranges are shown in the table Threshold levels by age band.

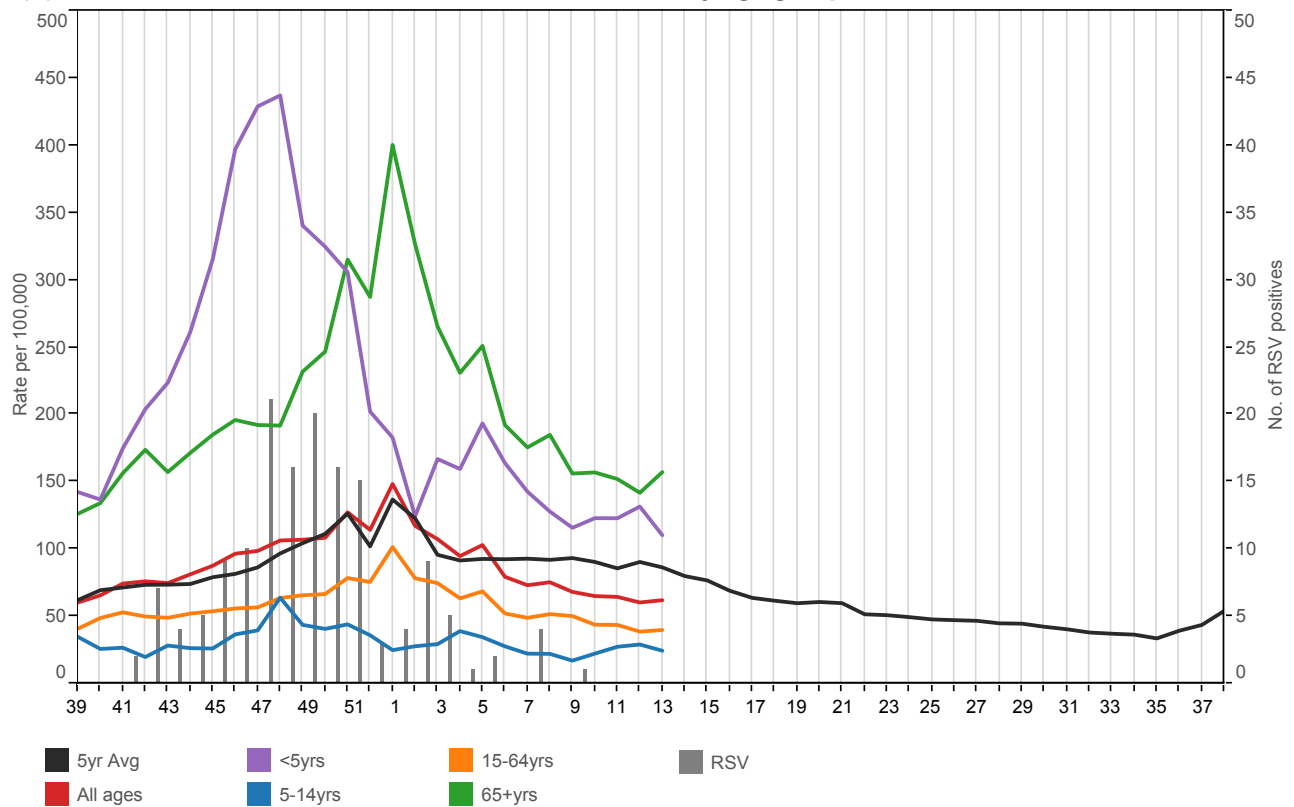
Table 1	41	42	43	44	45	46	47	48	49	50	51	52	1	2	3	4
<15yrs	4.73	3.68	2.51	3.57	2.36	5.66	5.49	5.21	6.12	11.01	9.64	4.24	5.41	8.47	11.37	12.46
15-64yrs	9.63	7.33	8.44	10.84	7.89	7.65	9.53	9.39	10.45	13.26	16.05	13.98	22.10	21.98	18.83	18.50
65+yrs	3.84	5.71	4.98	3.93	4.69	7.21	4.66	6.26	6.45	8.43	23.57	12.16	19.35	25.49	12.31	9.27
All ages	7.84	6.44	6.86	8.45	6.42	7.25	8.03	8.15	9.04	12.07	16.24	12.04	18.84	20.31	16.46	15.90

	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
<15yrs	13.25	11.28	7.24	3.88	5.49	8.64	2.39	2.38	1.94							
15-64yrs	20.35	13.61	13.55	10.04	7.56	8.45	6.84	6.52	4.34							
65+yrs	19.13	8.37	9.11	5.72	8.52	3.85	1.58	1.95	3.45							
All ages	18.95	12.33	11.70	8.27	7.38	7.70	5.21	5.05	3.78							

Table 2	Below Threshold ¹	Threshold to Medium ²	Medium to High ³	High to Very High ⁴	Above Very High ⁵
0-14	<11.0	11.0 to <18.0	18.0 to <55.3	55.3 to <90.7	90.7+
15-64	<14.6	14.6 to <28.2	28.2 to <63.1	63.1 to <90.1	90.1+
65+	<11.1	11.1 to <14.6	14.6 to <32.8	32.8 to <46.8	46.8+
All Ages	<14.3	14.3 to <26.2	26.2 to <73.5	73.5 to <116.1	116.1+

Threshold levels¹Below baseline threshold²baseline threshold breach to < 40th percentile³40th to <90th percentile⁴90th to <97.5th percentile⁵97.5th+ percentile**Weekly influenza-like illness and bronchitis incidence rates per 100,000 persons**

Influenza-like illness		Bronchitis	Influenza-like illness		Acute Bronchitis
<1yr	0.0	212.1	London	5.0	56.5
1-4yrs	5.7	88.3	North	3.3	63.7
5-14yrs	0.6	24.4	South	3.7	52.5
15-24yrs	4.0	21.1	Midlands And East	3.3	84.9
25-44yrs	3.9	33.9	National	3.8	62.0
45-64yrs	5.0	56.2			
65-74yrs	2.8	107.7			
75-84yrs	4.9	187.9			
85+yrs	2.9	288.4			
All ages	3.8	62.0			

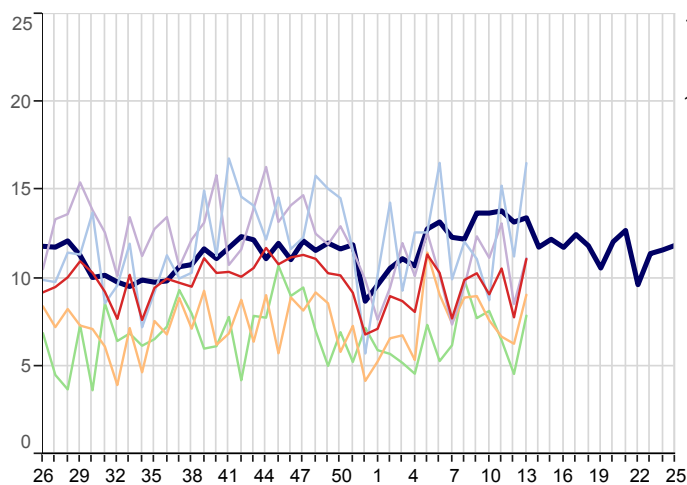
(E) Acute Bronchitis: national incidence rate 2016/2017 by age group***Weekly Influenza-like illness and Acute Bronchitis incidence rates per 100,000 persons**

	Influenza-like illness	Acute Bronchitis
<5yrs	4.7	110.2
5-14yrs	0.6	24.4
15-64yrs	4.3	39.8
65+yrs	3.4	157.1
All ages	3.8	62.0

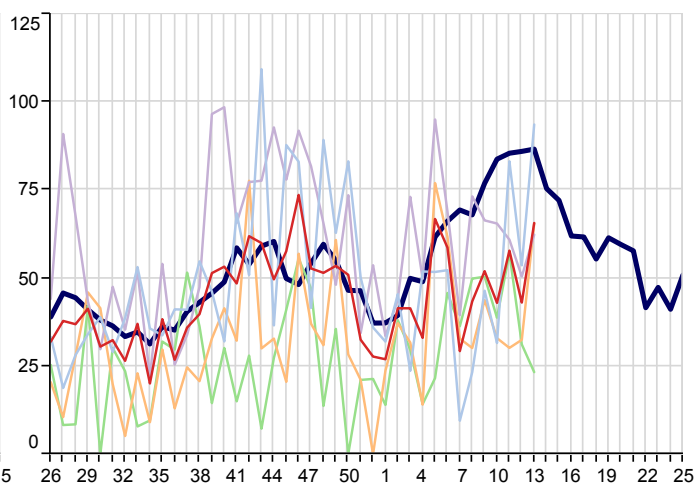
1. Water & Food Borne Disorders:

5yr Avg National London North South Midlands And East

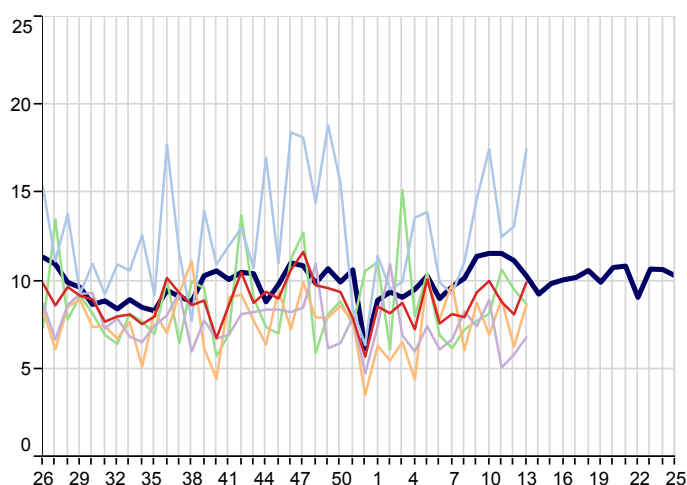
Infectious Intestinal Disease (ICD10: A00-A09)
Weekly incidence (per 100,000 **all ages**) by regions
for 2016 compared with 5 year average



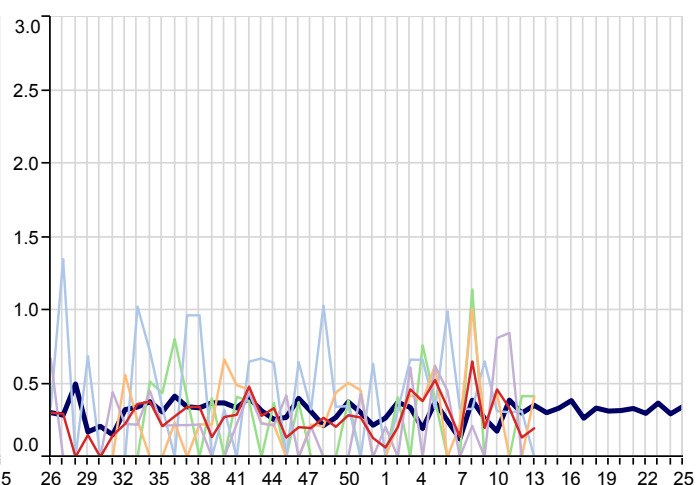
Infectious Intestinal Disease (ICD10: A00-A09)
Weekly incidence (per 100,000 **0-4 years**) by regions
for 2016 compared with 5 year average



Non-Infective Enteritis & Colitis (ICD10: K50-K52)
Weekly incidence (per 100,000 **all ages**) by region
for 2016 compared with 5 year average



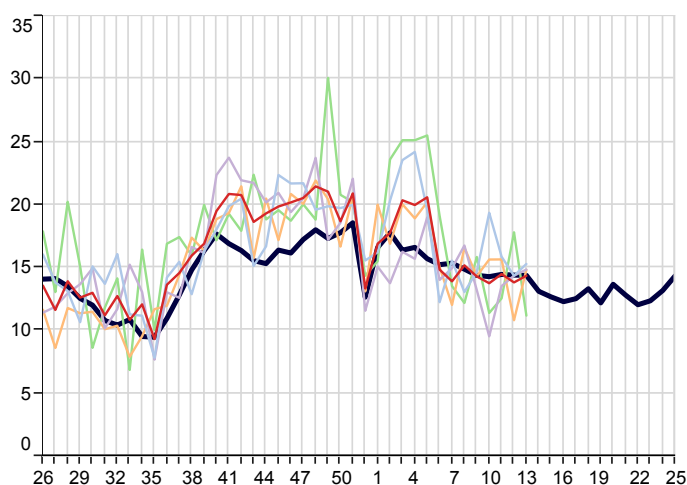
Viral Hepatitis (ICD10: B15-B19)
Weekly incidence (per 100,000 **all ages**) by region
for 2016 compared with 5 year average



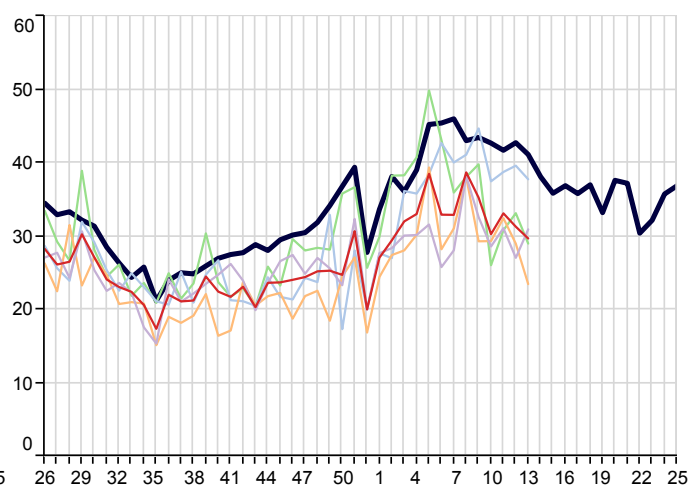
2. Environmentally Sensitive Disorders:

5yr Avg National London North South Midlands And East

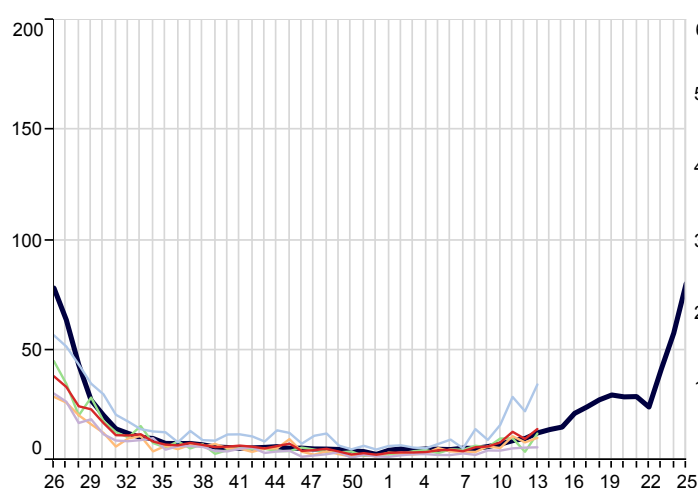
Asthma (ICD10: J45-J46)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



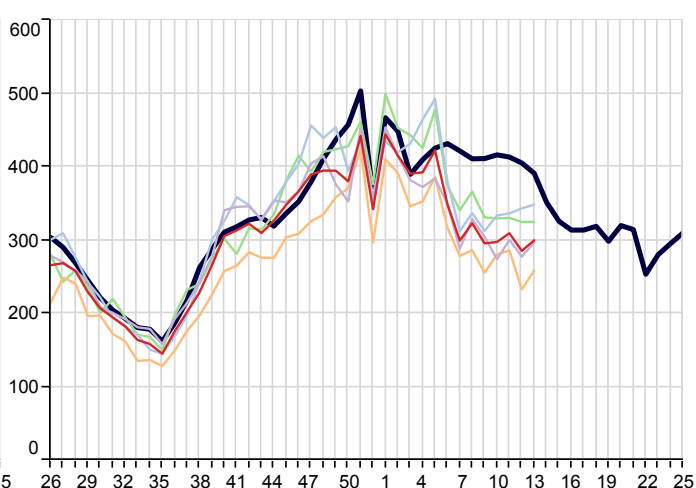
Disorders of Conjunctiva (ICD10: H10-H13)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



Hayfever/Allergic Rhinitis (ICD10: J30)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



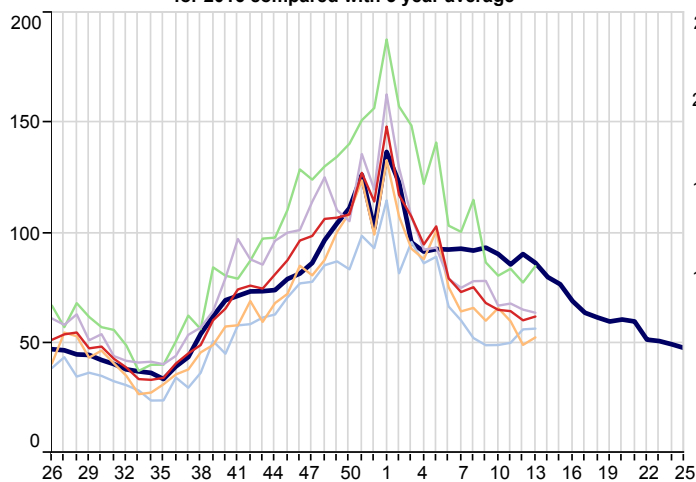
Symptoms involving Respiratory & Chest (ICD10: R05-R07,R09)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



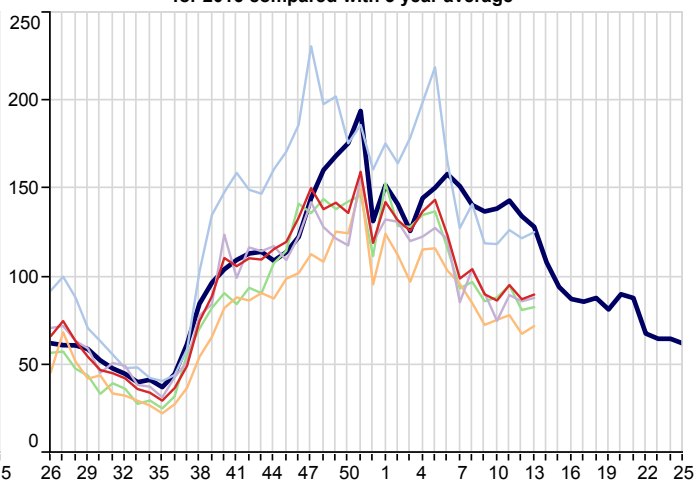
3. Respiratory Infections:

5yr Avg National North South London Midlands And East

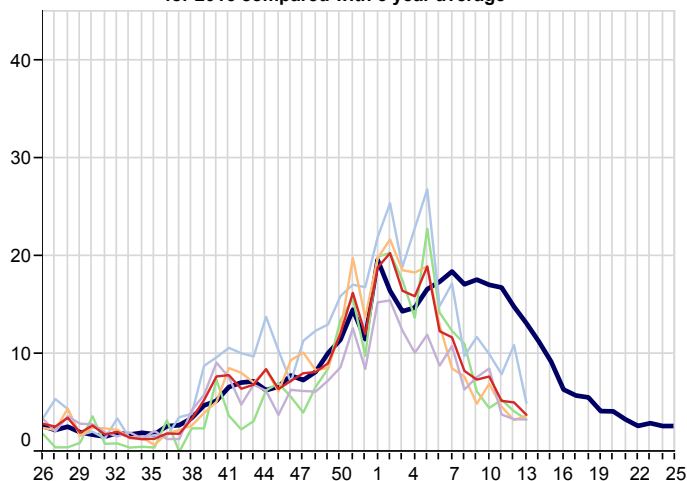
Acute Bronchitis (ICD10: J20-J21,J40)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



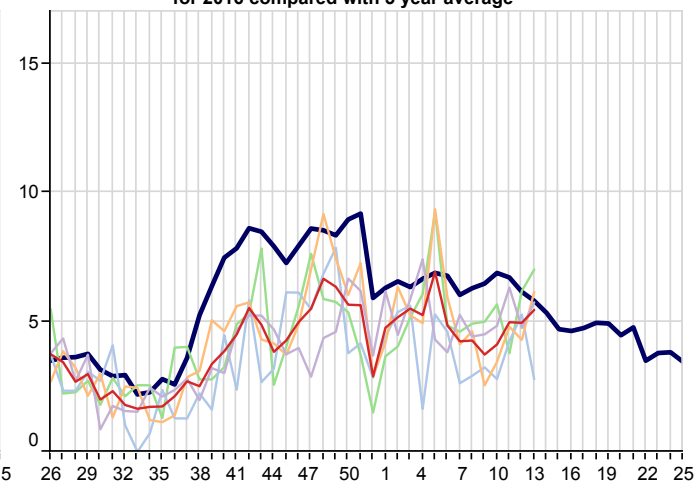
Common Cold (ICD10: J00,J06)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



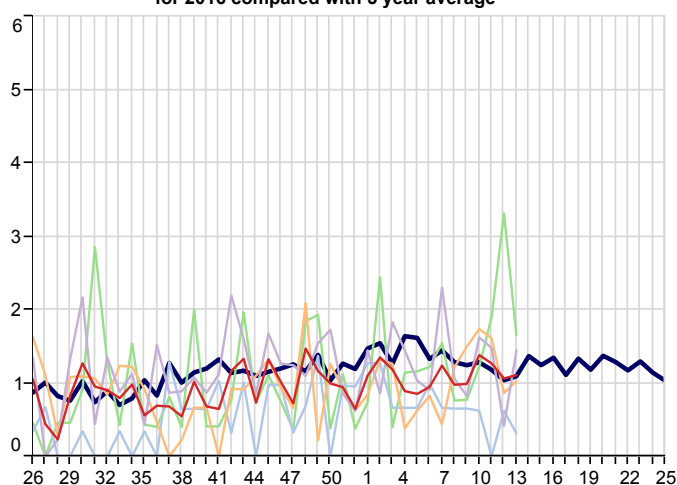
Influenza-Like Illness (ICD10: J09-J11)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



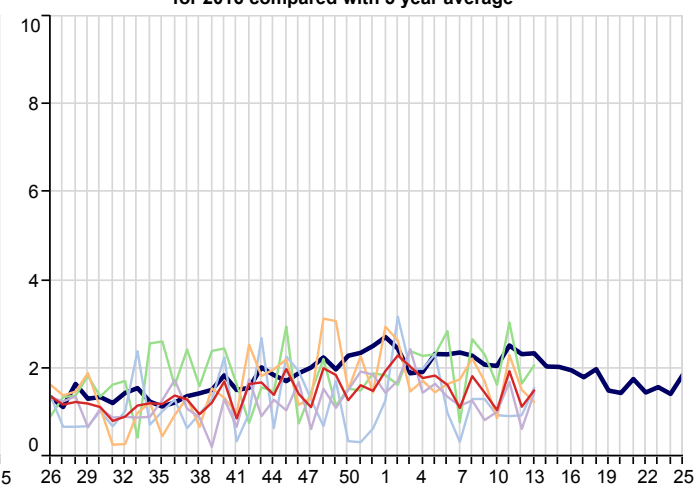
Acute Laryngitis/Tracheitis (ICD10: J04)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



Pleurisy (ICD10: R091)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



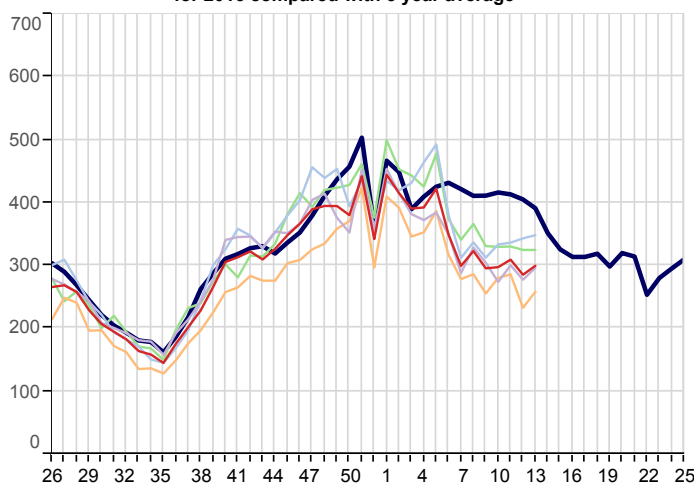
Pneumonia/Pneumonitis (ICD10: J12-J18)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



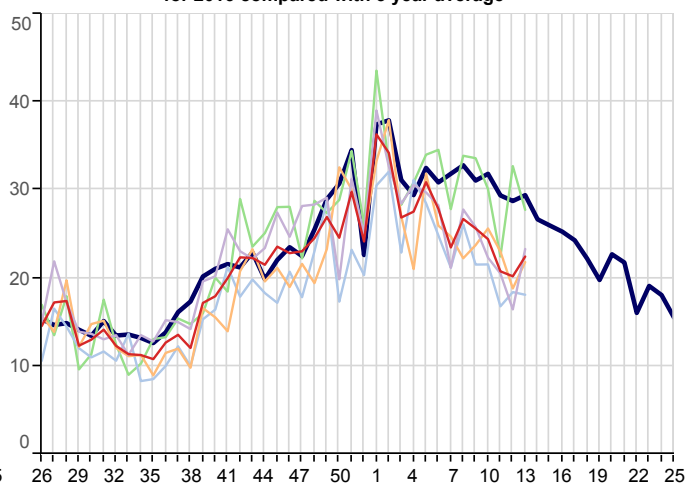
3. Respiratory Infections(Continued):

■ 5yr Avg ■ National ■ North ■ South ■ London ■ Midlands And East

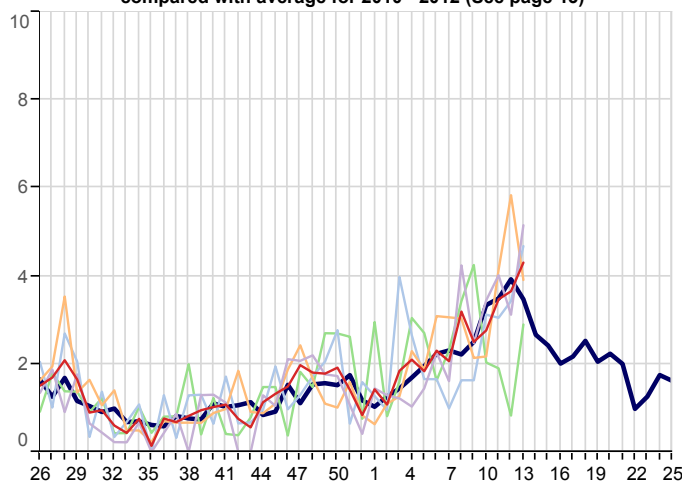
Respiratory System Diseases (ICD10: J00-J99)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



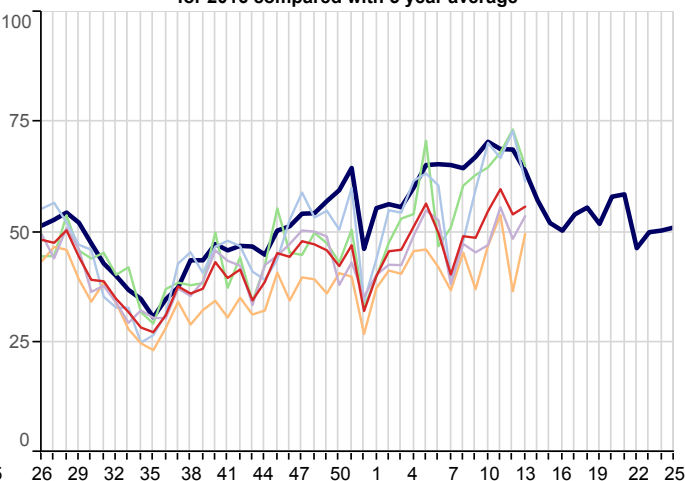
Acute Sinusitis (ICD10: J01)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



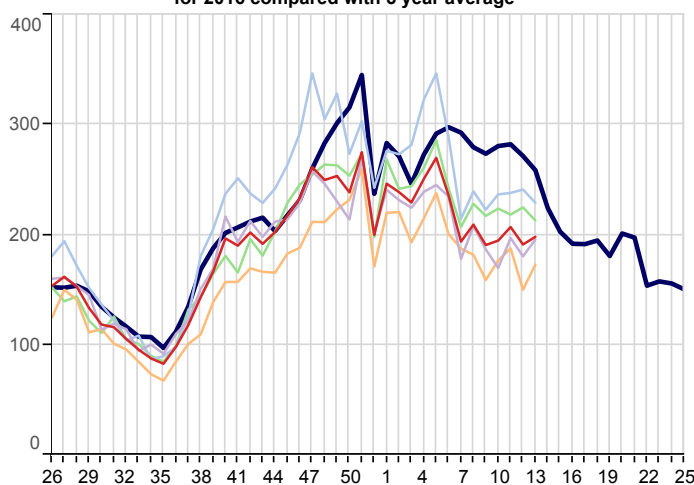
Strep Sore Throat, Scarletina and Peritonsillar Abscess (ICD10: A38,J020,J36)
Weekly incidence (per 100,000 all ages) by region for 2016
compared with average for 2010 - 2012 (See page 13)



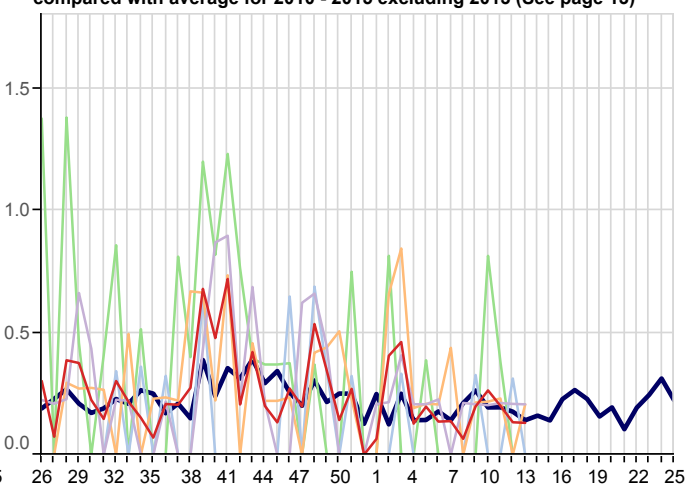
Acute Tonsillitis/Pharyngitis (ICD10: J02-J03)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



Upper Respiratory Tract Infections (URTI)(ICD10: J00-J06)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



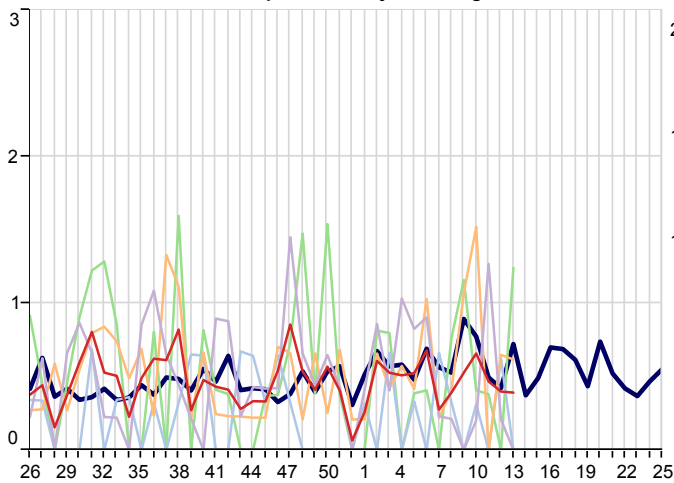
Whooping Cough (ICD10: A37)
Weekly incidence (per 100,000 all ages) by region for 2016
compared with average for 2010 - 2015 excluding 2013 (See page 13)



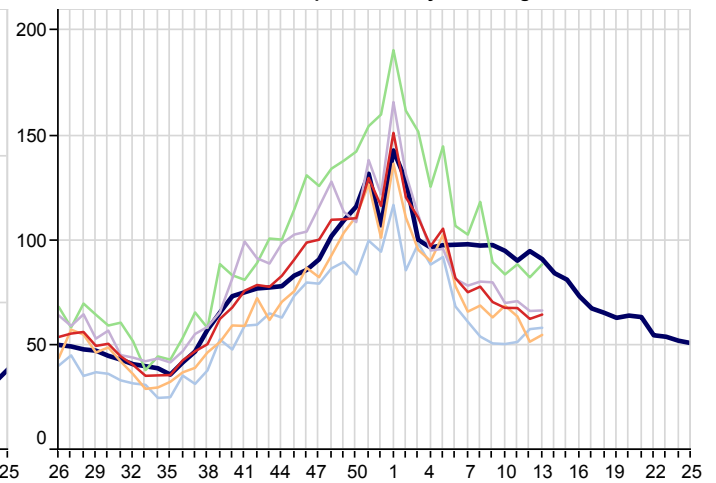
3. Respiratory Infections(Continued):

5yr Avg National North South London Midlands And East

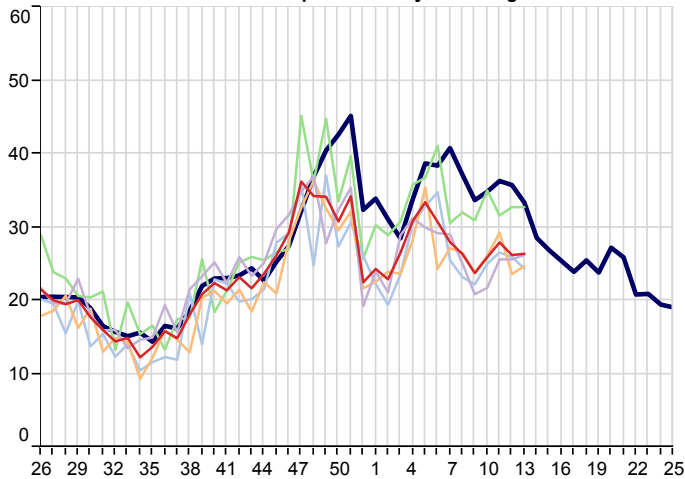
Infectious Mononucleosis (ICD10: B27)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



Lower Respiratory Tract Infections (LRTI)(ICD10: J20-J22)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



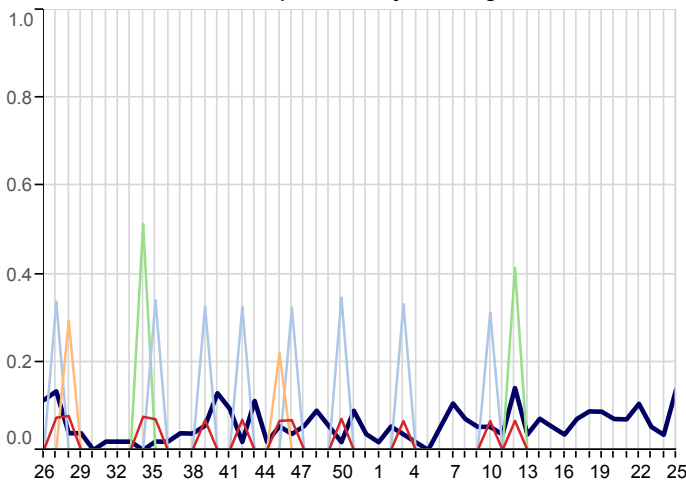
Acute Otitis Media (ICD10: H650-H651,H660,H669)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



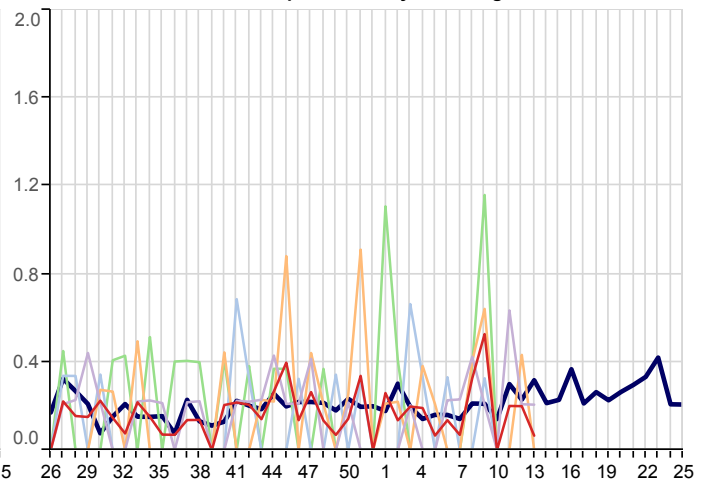
4. Vaccine Sensitive Disorders

5yr Avg National North South London Midlands And East

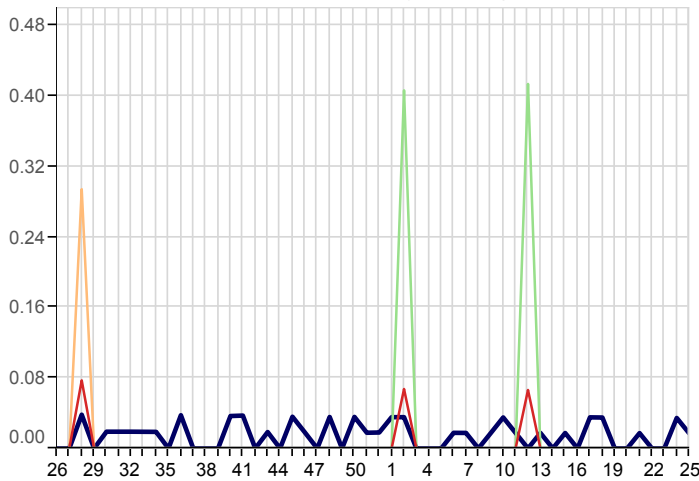
Measles (ICD10: B05)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



Mumps (ICD10: B26)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average

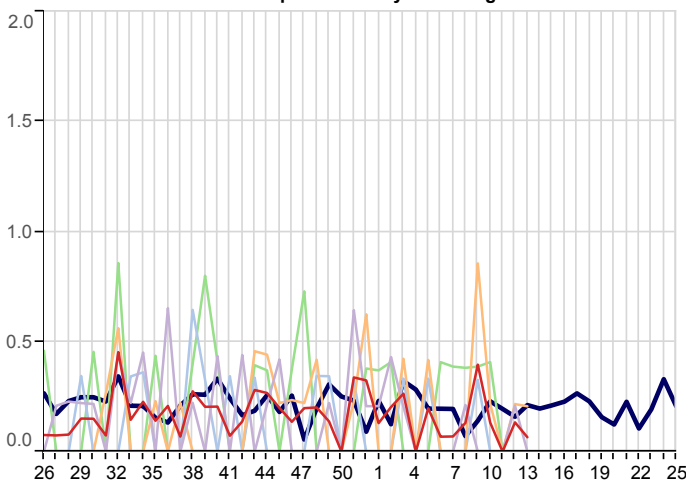


Rubella (ICD10: B06)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average

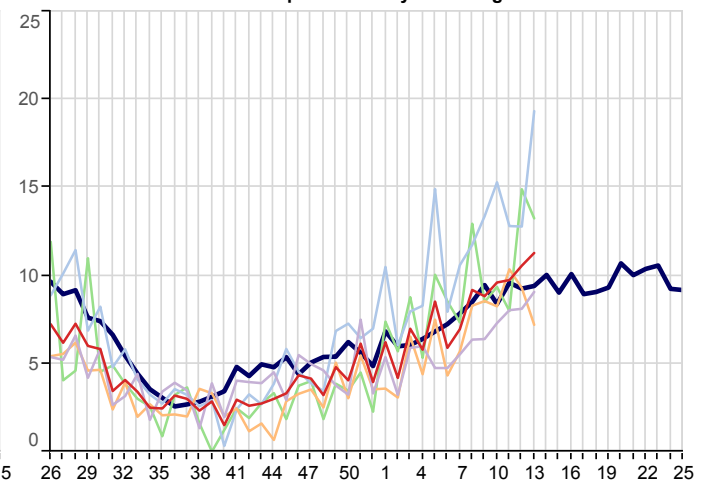


5. Skin Contagions

Bullous Dermatoses (ICD10: L10-L14)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



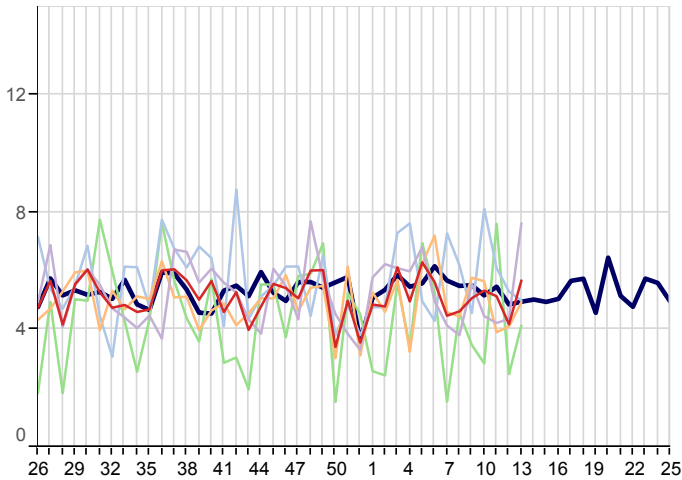
Chickenpox (ICD10: B01)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



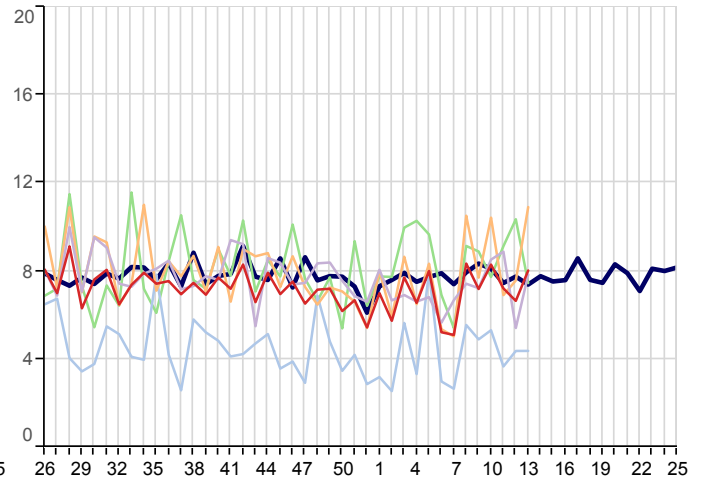
5. Skin Contagions (Continued)

■ 5yr Avg ■ National ■ North ■ South ■ London ■ Midlands And East

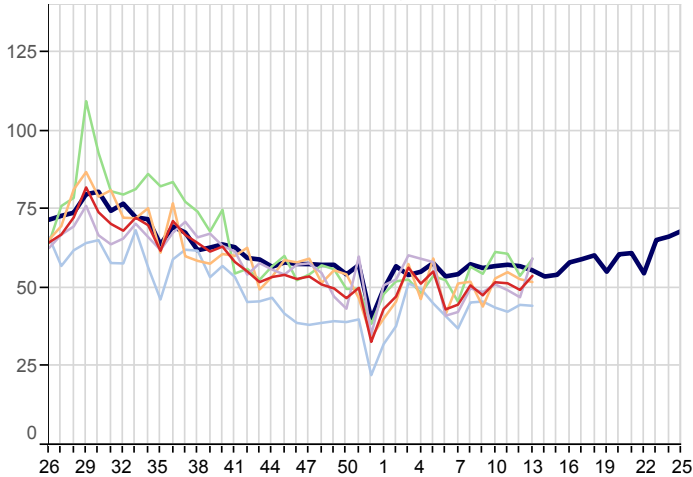
Herpes Simplex (ICD10: B00)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



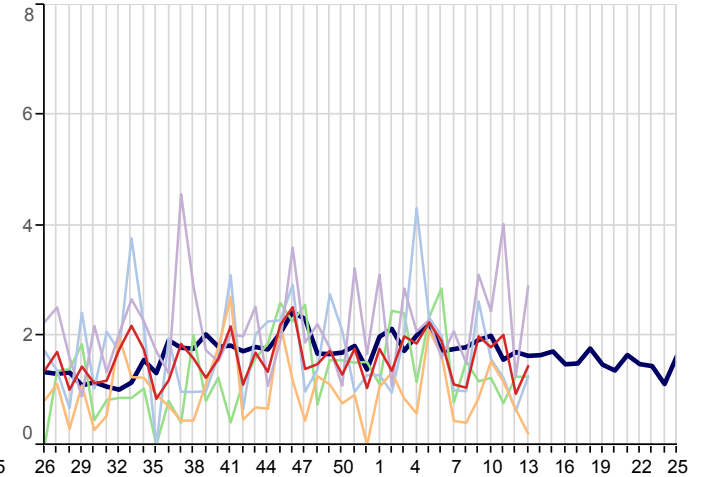
Herpes Zoster (ICD10: B02)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



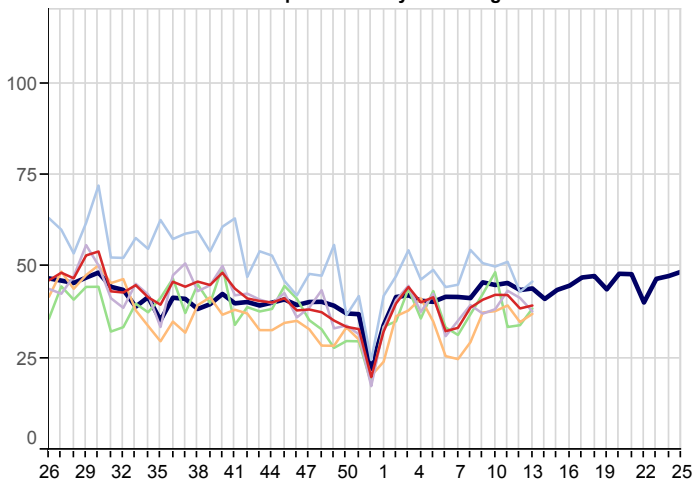
Infections of Skin & Subcutaneous Tissue (ICD10: L00-L08)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



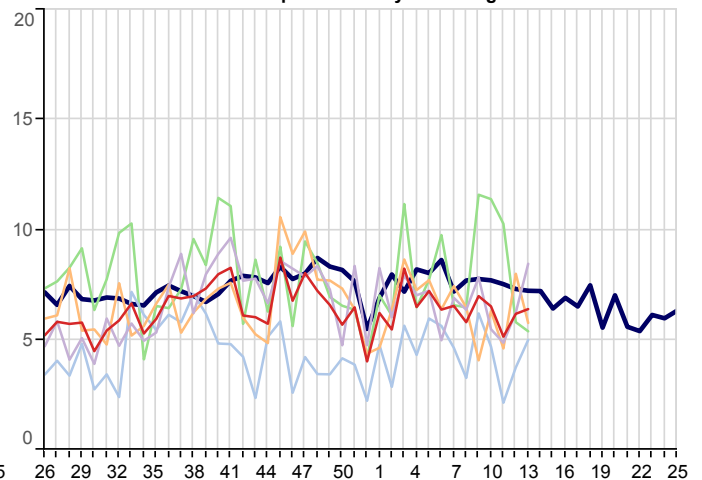
Scabies (ICD10: B86)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



Symptoms involving Skin & Oth Integument Tiss (ICD10: R20-R23)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



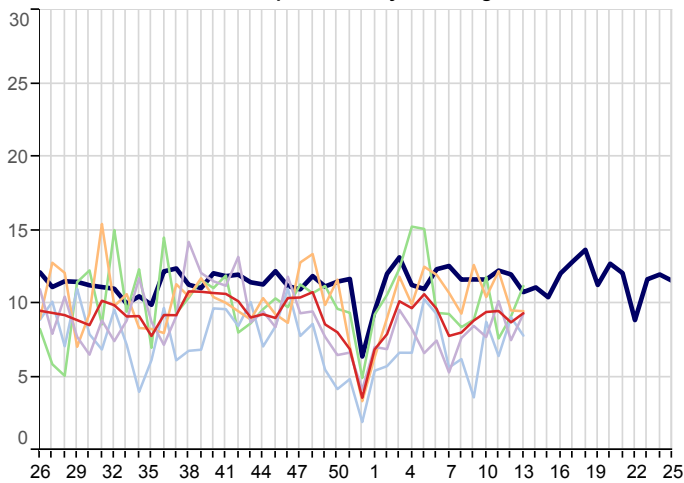
Impetigo (ICD10: L01)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



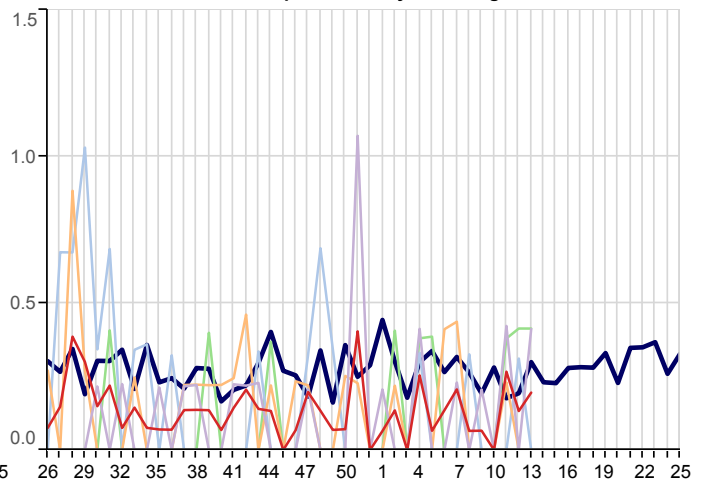
6. Disorders Affecting the Nervous System

5yr Avg National North South London Midlands And East

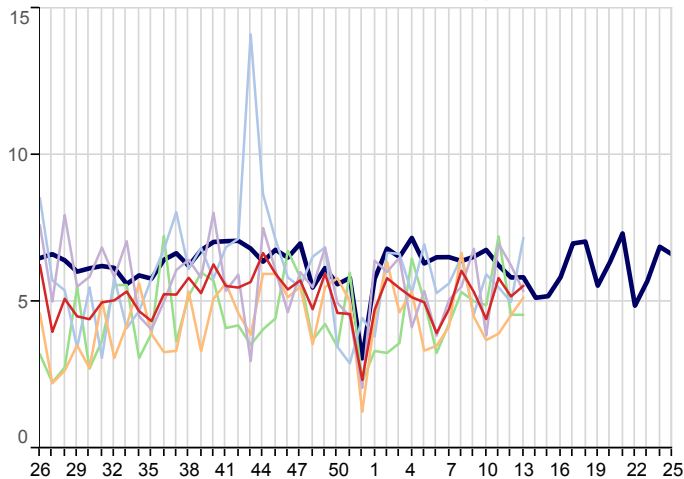
Disorders of The Peripheral Nervous System (ICD10: G50-G64,G70-G72)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



Meningitis/Encephalitis (ICD10: A170-A171,A390,A38-A85,A87,G00-G05)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average

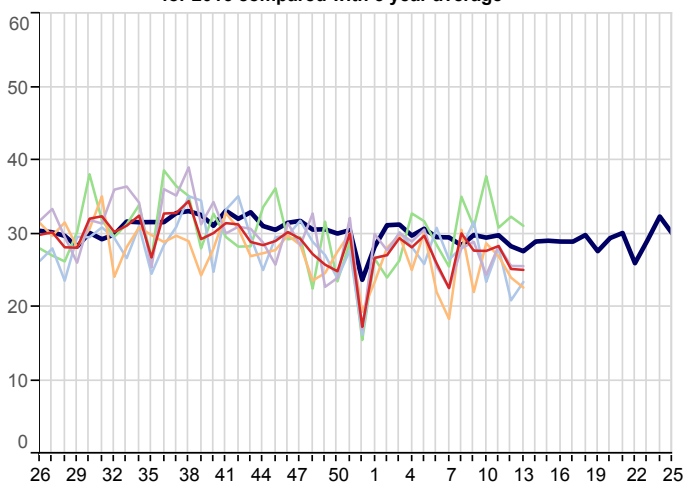


Symptoms Involving Nervous & Musculoskeletal (ICD10: R25-R29)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



7. Genitourinary System Disorders

Urinary Tract Infection/Cystitis (ICD10: N30,N390)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



8. Tabular Summary by Disease

Disease Name	Week beginning Week ending		27/03/2017 02/04/2017		20/03/2017 26/03/2017		13/03/2017 19/03/2017		06/03/2017 12/03/2017	
	Rate	Numer	Rate	Numer	Rate	Numer	Rate	Numer	Rate	Numer
Allergic Rhinitis	14.1	216	9.6	144	12.8	192	8.0	121		
Asthma	14.3	220	13.8	208	14.5	217	13.8	209		
Acute Bronchitis	62.0	950	60.2	907	64.4	965	65.0	988		
Bullous Dermatoses	0.1	1	0.1	2	0.0	0	0.1	2		
Chickenpox	11.3	173	10.6	159	9.7	146	9.6	146		
Common Cold	89.9	1,379	87.3	1,314	95.4	1,429	86.5	1,315		
Conjunctival Disorders	29.7	455	31.3	471	33.1	496	30.3	460		
Herpes Simplex	5.7	87	4.2	63	5.1	77	5.3	81		
Herpes Zoster	8.0	123	6.6	100	7.2	108	8.3	126		
Impetigo	6.4	98	6.2	93	5.1	77	6.5	99		
Infectious Mononucleosis	0.4	6	0.4	6	0.5	7	0.7	10		
Influenza-like illness	3.8	58	5.0	76	5.2	78	7.7	117		
Infectious Intestinal Diseases	11.1	170	7.8	117	10.5	158	9.1	138		
Laryngitis and Tracheitis	5.5	84	5.0	75	5.0	75	4.1	63		
Lower Respiratory Tract Infections	64.6	991	62.6	942	67.7	1,015	67.8	1,031		
Measles	0.0	0	0.1	1	0.0	0	0.1	1		
Meningitis and Encephalitis	0.2	3	0.1	2	0.3	4	0.0	0		
Mumps	0.1	1	0.2	3	0.2	3	0.0	0		
Non-infective Enteritis and Colitis	9.9	152	8.1	122	8.8	132	10.0	152		
Otitis Media Acute	26.4	404	26.2	394	27.9	418	25.9	393		
Peripheral Nervous Disease	9.3	143	8.7	131	9.5	142	9.4	143		
Pleurisy	1.1	17	1.1	16	1.3	19	1.4	21		
Pneumonia and Pneumonitis	1.5	23	1.1	17	1.9	29	1.1	16		
Respiratory System Diseases	299.5	4,592	285.1	4,293	309.1	4,632	297.3	4,518		
Rubella	0.0	0	0.1	1	0.0	0	0.0	0		
Scabies	1.4	22	0.9	14	2.0	30	1.8	27		
Sinusitis	22.4	344	20.2	304	20.8	311	24.4	371		
Skin and Subcutaneous Tissue Infections	53.8	825	49.4	743	51.5	771	51.8	787		
Strep Throat and Peritonsillar Abscess	4.3	66	3.7	55	3.5	52	2.8	42		
Symptoms involving musculoskeletal	5.5	85	5.2	78	5.8	87	4.4	67		
Symptoms involving Respiratory and Chest	21.9	336	20.1	303	22.0	329	20.3	309		
Symptoms involving Skin and Integument Tissues	39.3	603	38.5	580	42.2	632	42.2	642		
Tonsillitis and acute Pharyngitis	55.8	855	54.0	813	59.7	895	54.7	832		
Upper Respiratory Tract Infections	198.1	3,037	191.1	2,877	207.0	3,101	194.6	2,958		
Urinary Tract Infections	25.0	384	25.2	379	28.3	424	27.6	420		
Viral Hepatitis	0.2	3	0.1	2	0.3	5	0.5	7		
Whooping Cough	0.1	2	0.1	2	0.2	3	0.3	4		
Denom	1,533,167		1,505,560		1,498,342		1,519,796			
Practice Count	155		153		154		157			

FURTHER INFORMATION:

About the report

Winter focus

The first two pages of data within this report focus on Influenza-Like Illness, in order to provide information about the on set of seasonal influenza and early warning of any epidemic.

Rate calculation

Each weekly incidence rate is presented per 100,000 population. All presentations are for males and females, and for all age groups, unless otherwise stated.

The denominator used for this report is taken from our most recent extract of data from GP practice systems, and includes all patients currently registered with eligible practices. The denominator varies week-on-week as patients register and deregister; it may also be the case that all patients from an individual practice are excluded because of problems with the data extraction from that practice in a specific week. As stated above, patients who have withheld consent for data-sharing are excluded.

In addition to the national rate, we present data for the four NHS England regions: North; Midlands and East; South; and London.

Five-year averages

Weekly rates are set against the five-year average, calculated from data for the calendar years 2011-2015. Previously we reported against a ten-year average. The change to a five-year average was made because longer-term trends in the incidence of disease have led to weekly rates for certain diseases becoming increasingly divergent from their ten-year average. The use of five-year averages lessens this effect and enables more meaningful comparison.

For two diseases, years with exceptionally high incidence have been excluded from the averages: for Whooping Cough, data from 2012 has been excluded; for Strep Sore Throat, Scarletina and Peritonsillar Abscess, data from 2013 and 2014 have been excluded so that similar rates in the future will appear as exceptional rather than normal in comparison.

Threshold calculation for Influenza-Like Illness (ILI)

We are now using the Moving Epidemic Method (MEM) to calculate threshold and intensity levels for Influenza-Like Illness. MEM works by identifying seasonal epidemic peaks and then calculates thresholds and intensity levels based on the pre and post epidemic values. This allows us to report the severity of ILI against multiple thresholds, rather than a simple comparison with the five-year average as the wide variation in ILI year on year, especially during the seasonal peak, makes the average less representative.

In addition to the All Ages thresholds, we have also calculated thresholds for three age bands: those aged under 15, 15-64 year olds and those aged 65 and over. ILI incidence rates vary among different age groups, and the age-specific thresholds allow us to highlight epidemics where ILI disproportionately affects a particular age group.

This methodology is used by the European Centre for Disease Prevention and Control to standardise reporting of influenza activity across Europe, and is also in use by Public Health England. Full details of the methodology can be found in: Vega *et al.* (2012) Influenza surveillance in Europe: establishing epidemic thresholds by the moving epidemic method. *Influenza and Other Respiratory Viruses* 7(4), 546–558. For ease of graphical representation, the final threshold (Very High) is not included in Graph A, page 2, but it is part of Table 3, page 3.

Both the *all-ages* thresholds and the *age-specific* thresholds are shown in Table 2, page 3. Ten years of data were used for *all-ages* and *age-specific* thresholds calculation (winter seasons 2004/05- 2014/15 excluding 2009/10).

About the Royal College of General Practitioners (RCGP) Research and Surveillance Centre (RSC)

What we do

The RCGP RSC was established in 1957, with the current name in use since 2009. The Centre is an internationally renowned source of information, analysis and interpretation concerning the onset, patterns, prevalence and trends over time of morbidity in primary care. The RSC is an active research and surveillance unit that collects and monitors data; its most important research is the surveillance of influenza and the monitoring of vaccine effectiveness.

The RSC data and analytics hub is housed in the Section of Clinical Medicine and Ageing at the University of Surrey.

Further information about the RSC can be found on our website:

<http://www.rcgp.org.uk/clinical-and-research/our-programmes/research-and-surveillance-centre.aspx>

Our data extraction process and information governance

Data are extracted twice weekly from practice systems by Apollo Medical Software Solutions on the RCGP's behalf. Patients who have withheld consent for data sharing are excluded from the extraction process.

Data are pseudonymised as close to source as possible. Data are held on secure servers at the RCGP data and analytics hub in the Section of Clinical Medicine and Ageing at the University of Surrey. Both Apollo and the University of Surrey are Registered and compliant with the Data Protection Act and fully compliant with all relevant NHS Digital data information governance best practice.

What the data is used for

The RCGP RSC has been providing reports weekly about health and disease, called the Weekly Returns Service (WRS) since 1964. The WRS monitors the number of patients consulting with new episodes of illness classified by diagnosis in England and provides weekly incidence rates per 100,000 population for these new episodes of illness. It is the key primary care element of the national disease monitoring systems run by Public Health England. The bulletin can be found at the following URL:

<https://www.gov.uk/government/publications/syndromic-surveillance-summary>

In addition to the WRS, the data is used for other research studies. Any other uses of the data for research follow ethical approval or agreement from NIHR proportionate review, and where relevant Health Research Authority Confidential Advisory Group advice that further approval is not needed. Full details can be found on our website:

<http://www.rcgp.org.uk/clinical-and-research/our-programmes/research-and-surveillance-centre.aspx>

For further information

For further information about the work of the RSC, or if you would like to be included on our email notification list, please contact:

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