

## RSC Communicable and Respiratory Disease Report for England

### Key Statistics:

Week Number/Year..... 12/2023  
 Week Starting - Ending..... 20/03/2023 - 26/03/2023  
 No. of Practices..... 508  
 Population..... 5,353,078

### National (England)

- **Acute Bronchitis** : increased from 6.1 in week 11 to 6.4 in week 12.
- **Asthma** : increased from 22.0 in week 11 to 25.9 in week 12.
- **Common Cold** : decreased from 2.4 in week 11 to 2.2 in week 12.
- **Influenza-like illness** : decreased from 4.1 in week 11 to 3.7 in week 12.
- **Respiratory System Diseases** : increased from 317.5 in week 11 to 325.3 in week 12.
- **COVID-19** : decreased from 53.5 in week 11 to 44.3 in week 12.

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

- **Acute Bronchitis** : increased from 2.8 in week 11 to 3.1 in week 12 in the London region, increased from 8.6 in week 11 to 10.2 in week 12 in the North region, decreased from 6.4 in week 11 to 5.7 in week 12 in the South region, and increased from 5.4 in week 11 to 5.8 in week 12 in the Midlands And East region.
- **Asthma** : increased from 19.0 in week 11 to 29.2 in week 12 in the London region, increased from 23.9 in week 11 to 31.2 in week 12 in the North region, increased from 23.2 in week 11 to 24.1 in week 12 in the South region, and decreased from 20.1 in week 11 to 18.0 in week 12 in the Midlands And East region.
- **Common Cold** : decreased from 3.0 in week 11 to 2.2 in week 12 in the London region, increased from 1.9 in week 11 to 2.0 in week 12 in the North region, decreased from 2.7 in week 11 to 2.4 in week 12 in the South region, and increased from 1.7 in week 11 to 2.2 in week 12 in the Midlands And East region.
- **Influenza-like illness** : decreased from 6.0 in week 11 to 3.7 in week 12 in the London region, increased from 4.5 in week 11 to 5.0 in week 12 in the North region, decreased from 3.1 in week 11 to 2.9 in week 12 in the South region, and was unchanged at 3.4 in week 11 and 3.4 in week 12 in the Midlands And East region.
- **Respiratory System Diseases** : increased from 260.1 in week 11 to 273.2 in week 12 in the London region, increased from 385.5 in week 11 to 402.7 in week 12 in the North region, increased from 300.5 in week 11 to 301.6 in week 12 in the South region, and increased from 320.7 in week 11 to 321.5 in week 12 in the Midlands And East region.
- **COVID-19** : decreased from 28.6 in week 11 to 23.8 in week 12 in the London region, decreased from 59.6 in week 11 to 50.9 in week 12 in the North region, decreased from 66.7 in week 11 to 50.0 in week 12 in the South region, and increased from 45.6 in week 11 to 46.4 in week 12 in the Midlands And East region.

### Comment:

Overall presentations of influenza-like illness (ILI) have decreased a little this week with rates declining in the London region, and in the population aged under 15 and 15 to 64 years.

Rates of COVID-19 have also decreased this week and with the reduction across all regions and age bands except the Midlands and East region.

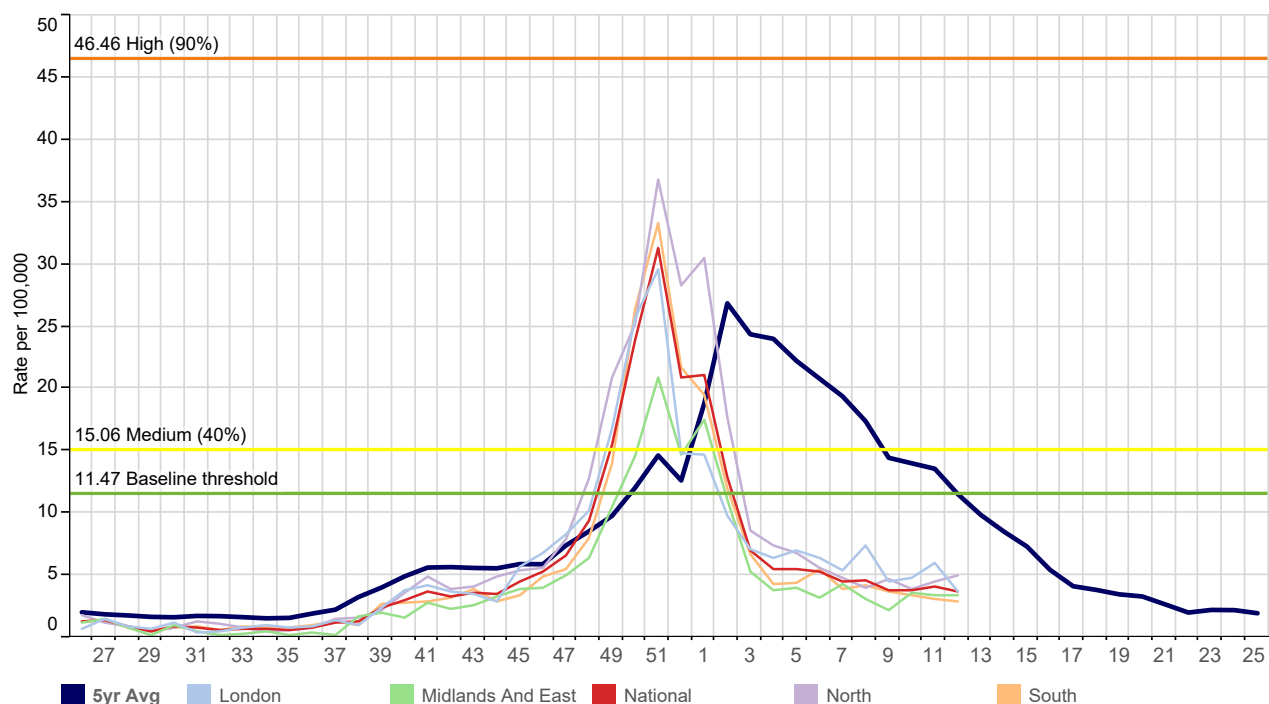
Asthma is above the RSC's five year rolling average (page 7).

This report includes a virology update. Circulating influenza A (H1N1, H3N2 and no specified subtype or coinfection), and influenza B, SARS-CoV-2 and RSV have also been detected.

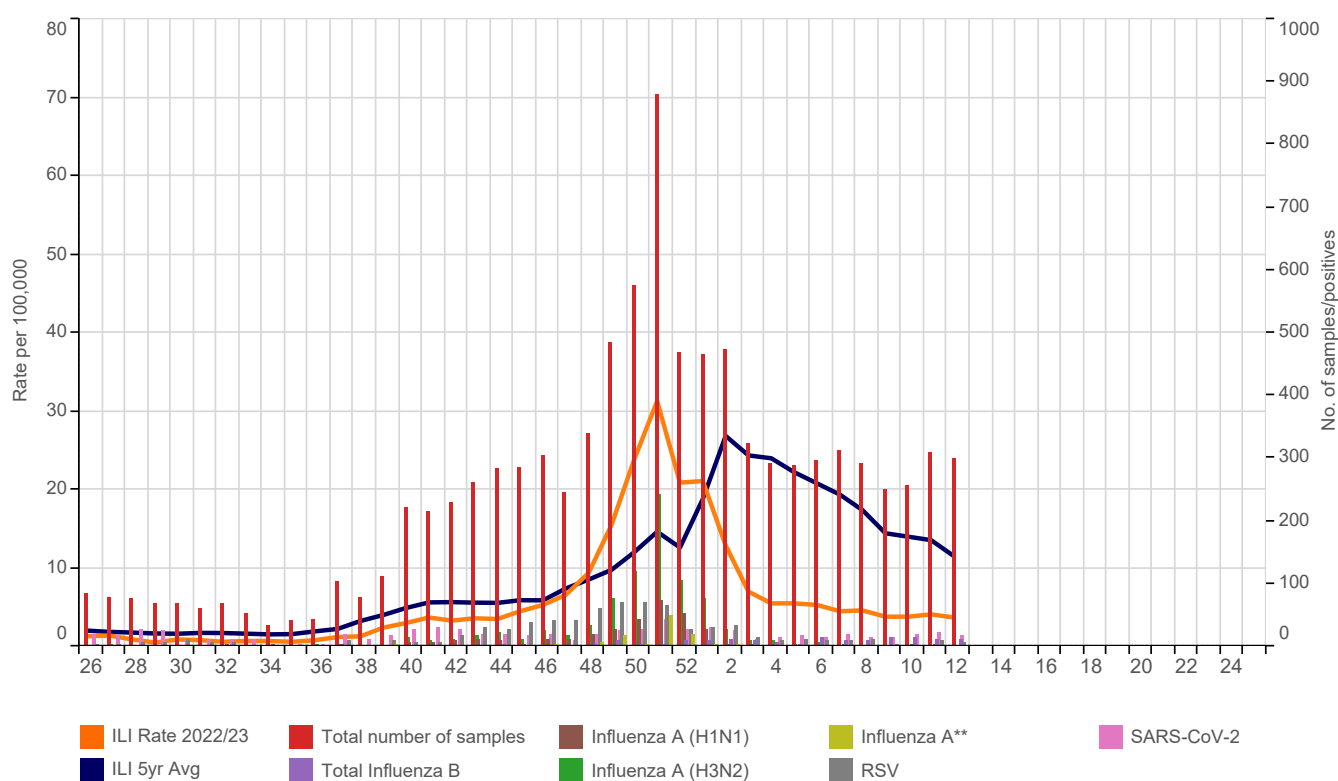
## Winter Focus 2022/23

Please see page 15 for explanatory notes on the data.

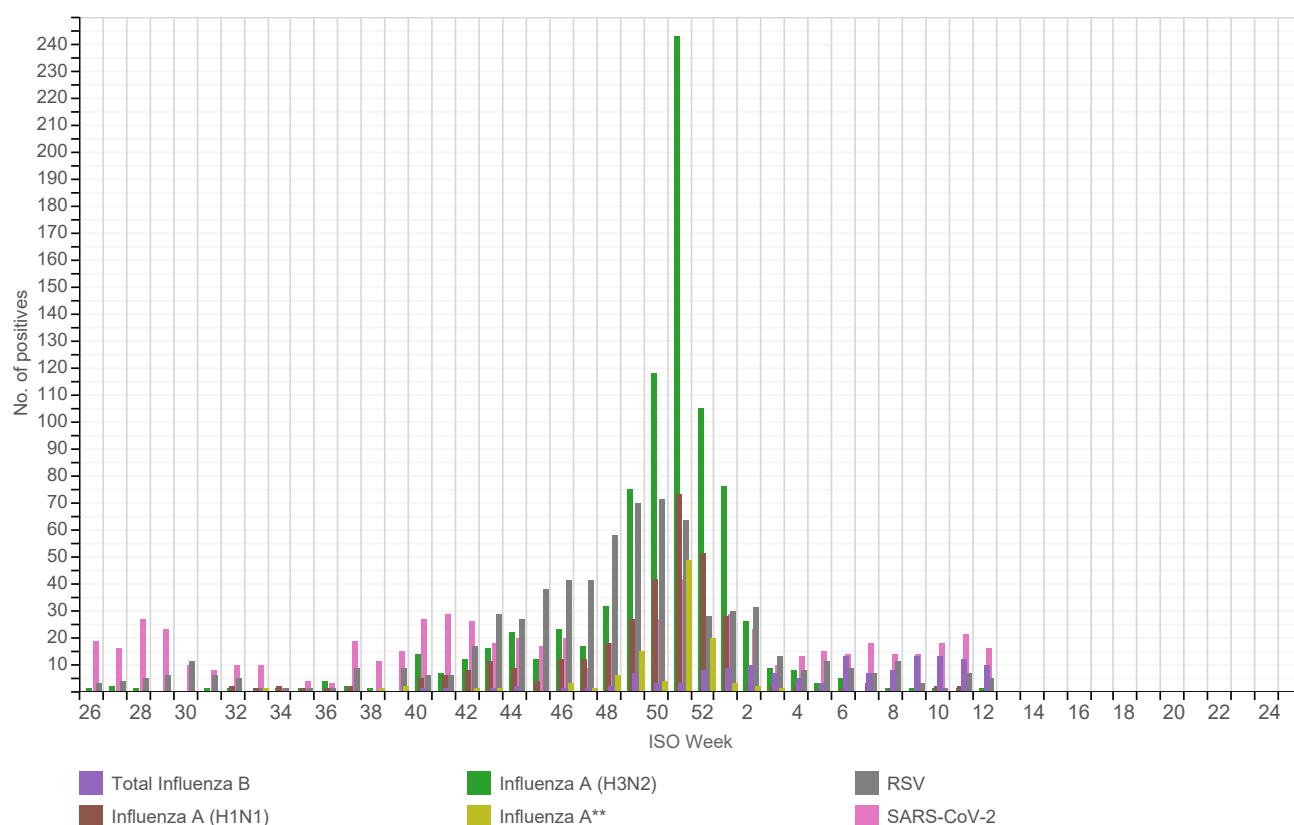
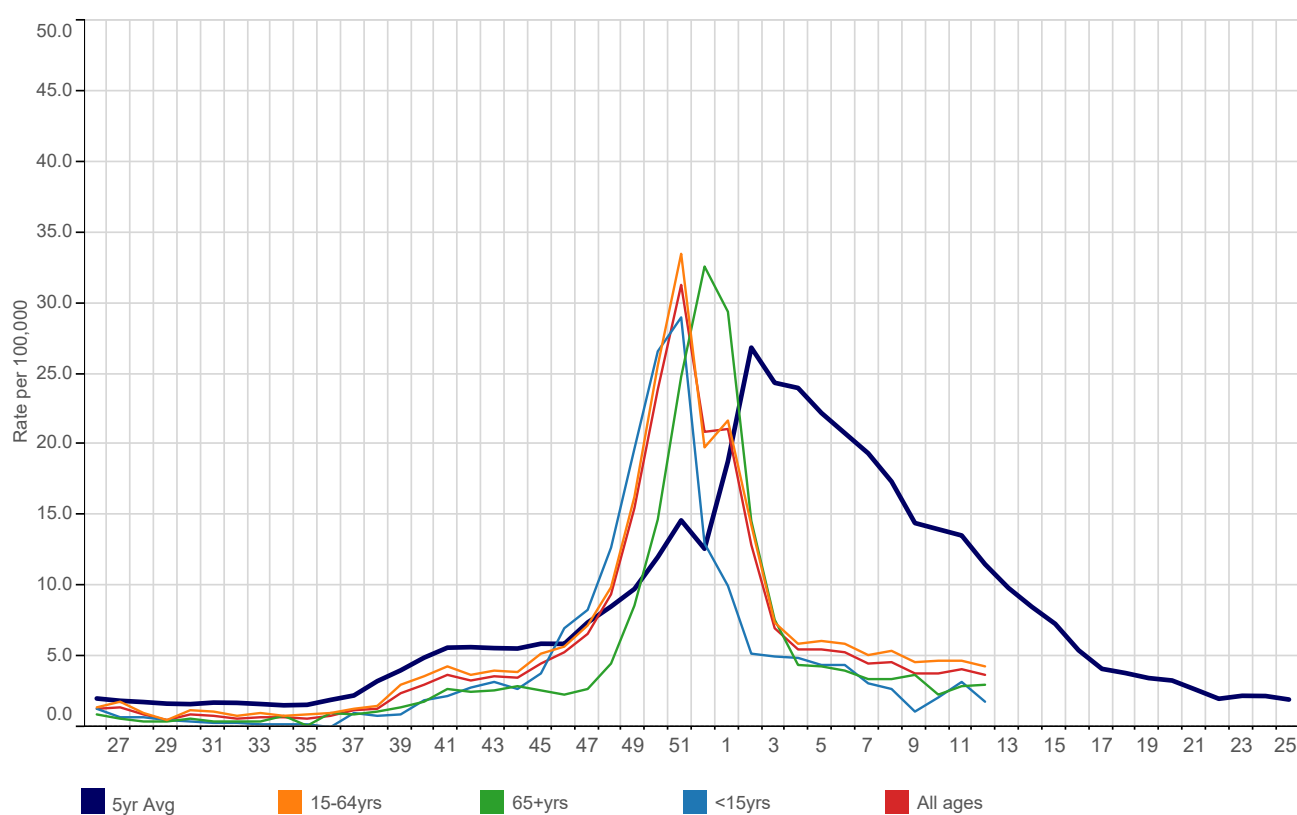
### (A) Influenza-like illness: national incidence rate 2022/23 by region\*



### (B) RCGP/UKHSA RSV, Influenza and SARS-CoV-2 Virology Swab Surveillance 2022/23\*



\* The seasonal average line (blue) is based on 5 year historic RCGP RSC data (Graph A & B). The weekly virology samples displayed are offset from the ISO Week (Graphs B & C). \*\*No specified subtype, or coinfection with H1N1 and H3N2.

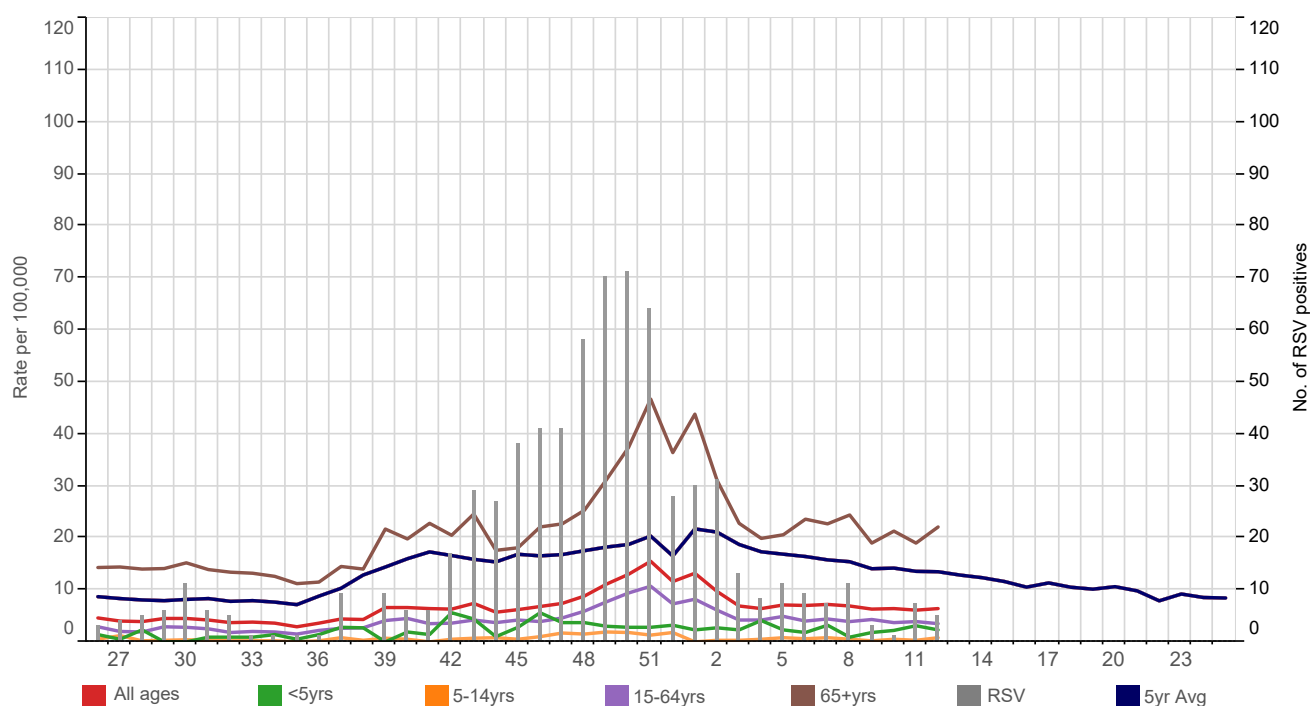
**(C) RCGP/UKHSA RSV, Influenza and SARS-CoV-2 Virology Swab Surveillance 2022/23 by viral strain\*****(D) Influenza-like illness: national incidence rate 2022/23 by age group\***

**(E) Influenza-like illness: national incidence rate 2022/23 by age group\***

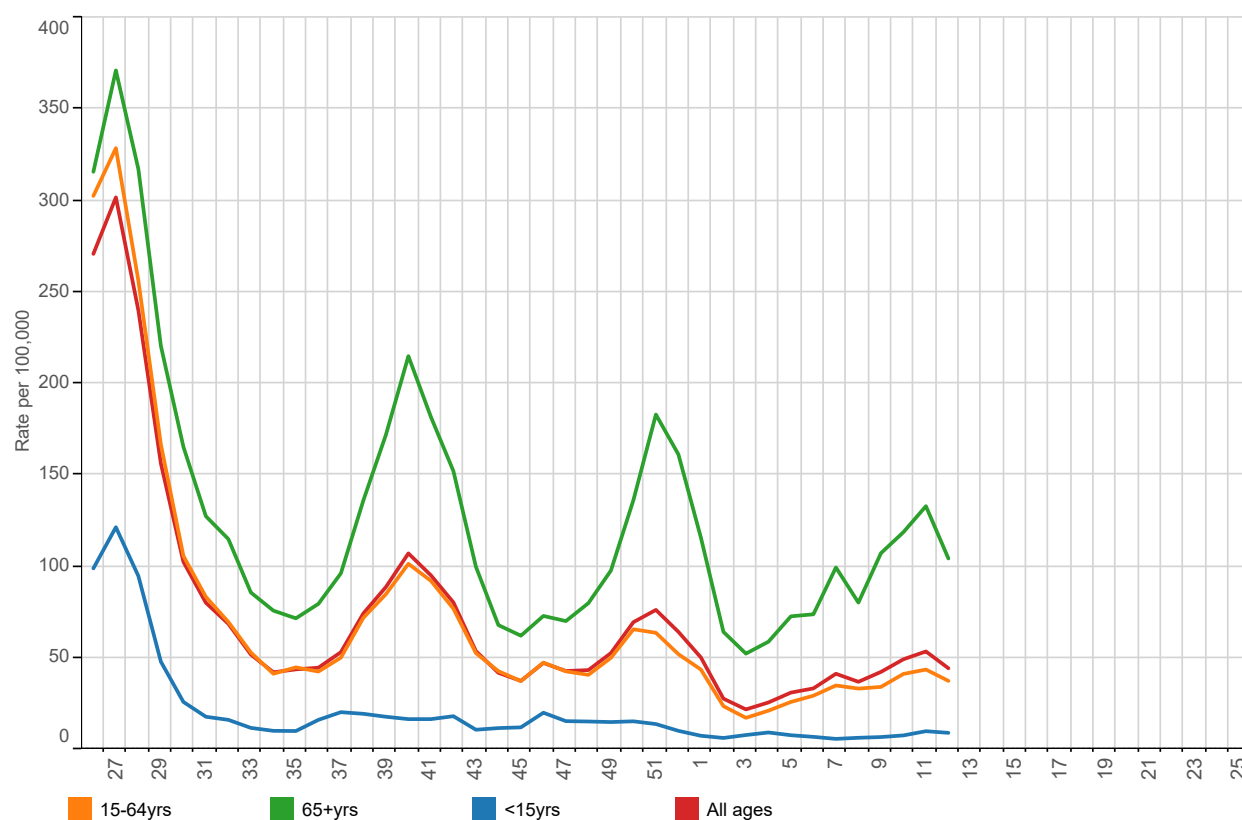
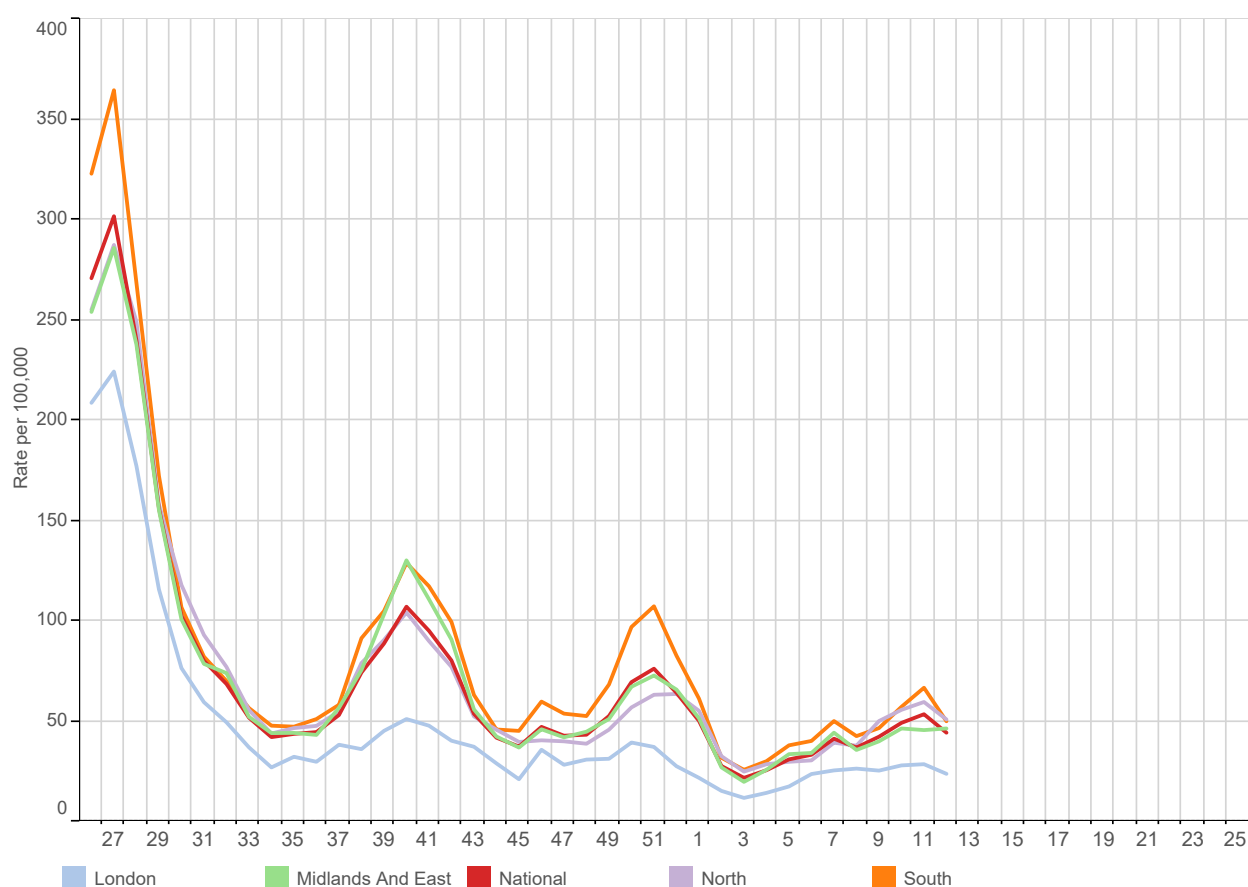
This table shows the level of intensity of ILI by age band. MEM thresholds have been calculated separately for each age band - the ranges are shown in the table Threshold levels by age band.

Table 1	42	43	44	45	46	47	48	49	50	51	52	1	2	3	4	5	6	7
15-64yrs	3.7	4.0	3.9	5.2	5.7	7.2	9.9	16.3	25.6	33.5	19.8	21.7	14.3	7.4	5.9	6.1	5.9	5.1
65+yrs	2.5	2.6	2.9	2.6	2.3	2.7	4.5	8.6	14.7	24.8	32.6	29.4	14.6	7.6	4.4	4.3	4.0	3.4
<15yrs	2.8	3.2	2.7	3.8	7.0	8.3	12.7	19.7	26.6	29.0	13.0	10.0	5.2	5.0	4.9	4.4	4.4	3.1
All ages	3.3	3.6	3.5	4.5	5.3	6.6	9.4	15.5	23.9	31.3	20.9	21.1	12.9	7.0	5.5	5.5	5.3	4.5
	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25
<15yrs	2.7	1.1	2.1	3.2	1.8													
15-64yrs	5.4	4.6	4.7	4.7	4.3													
65+yrs	3.4	3.7	2.3	2.9	3.0													
All ages	4.6	3.8	3.8	4.1	3.7													

Table 2	Below Threshold <sup>1</sup>	Threshold to Medium <sup>2</sup>	Medium to High <sup>3</sup>	High to Very High <sup>4</sup>	Above Very High <sup>5</sup>
15-64yrs	<14.62	14.62 to 16.81	16.81 to 60.16	60.16 to 105.70	105.70+
65+yrs	<12.54	11.03 to 12.54	12.54 to 45.79	45.79 to 81.19	81.19+
<15yrs	<8.05	8.05 to 13.38	13.38 to 30.96	30.96 to 44.85	44.85+
All Ages	<11.47	11.47 to 15.06	15.06 to 46.46	46.46 to 76.44	76.44+

**Threshold levels**<sup>1</sup>Below baseline threshold<sup>2</sup>baseline threshold breach to < 40th percentile<sup>3</sup>40th to <90th percentile<sup>4</sup>90th to <97.5th percentile<sup>5</sup>97.5th+ percentile**(F) Acute Bronchitis: national incidence rate 2022/23 by age group\*****Weekly Influenza-like illness and Acute Bronchitis incidence rates per 100,000 persons**

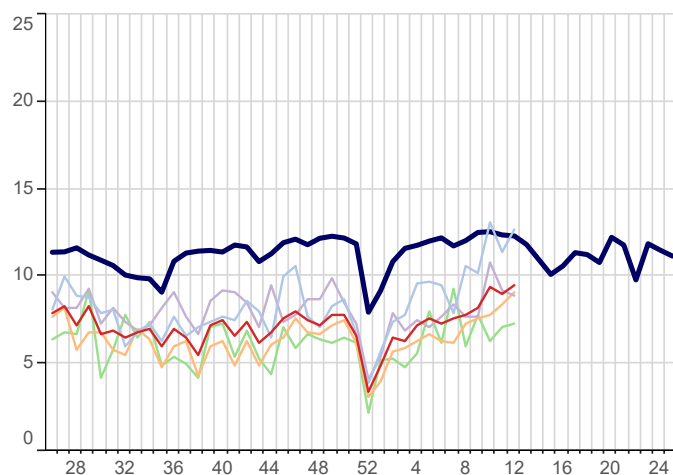
Influenza-like illness		Bronchitis	Influenza-like illness		Bronchitis
<1yr	4.3	2.1	London	3.7	3.1
1-4yrs	2.3	2.3	North	5.0	10.2
5-14yrs	1.5	0.8	South	2.9	5.7
15-24yrs	3.2	1.0	Midlands And East	3.4	5.8
25-44yrs	5.4	1.7	National	3.7	6.4
45-64yrs	3.6	6.7			
65-74yrs	3.0	19.7			
75-84yrs	3.3	26.8			
85+yrs	2.4	18.8			
All ages	3.7	6.4			

**(G) COVID-19 : national incidence rate 2022/23 by age group\*****(H) COVID-19 : national incidence rate 2022/23 by region\***

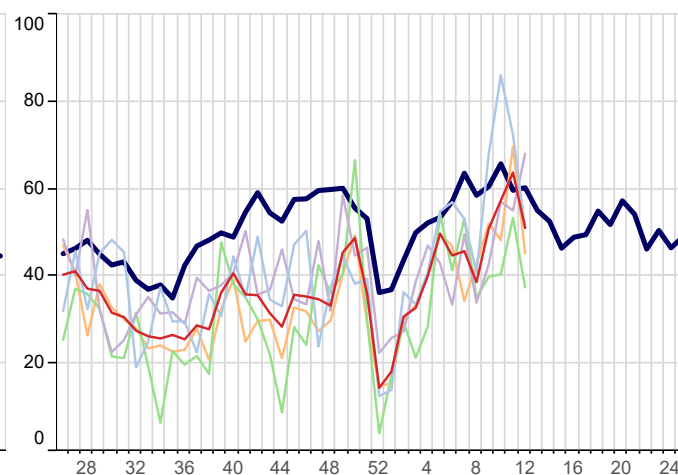
# 1. Water & Food Borne Disorders:

5yr Avg   National   London   North   South   Midlands And East

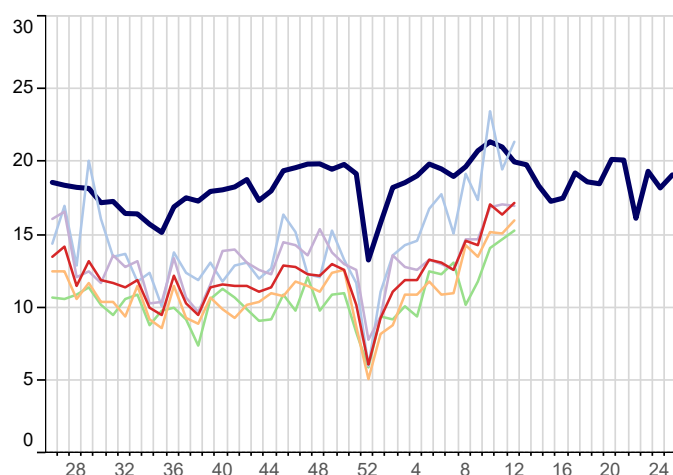
**Infectious Intestinal Disease (ICD10: A00-A09)**  
Weekly incidence (per 100,000 **all ages**) by regions  
for 2022/23 compared with 5 year average



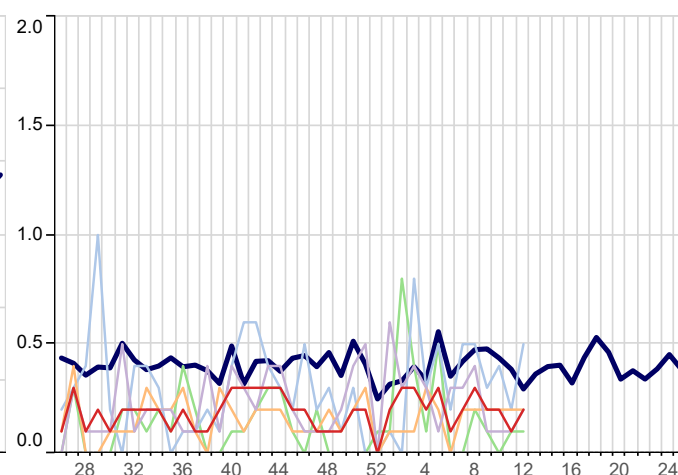
**Infectious Intestinal Disease (ICD10: A00-A09)**  
Weekly incidence (per 100,000 **0-4 years**) by regions  
for 2022/23 compared with 5 year average



**Non-Infective Enteritis & Colitis (ICD10: K50-K52)**  
Weekly incidence (per 100,000 **all ages**) by region  
for 2022/23 compared with 5 year average



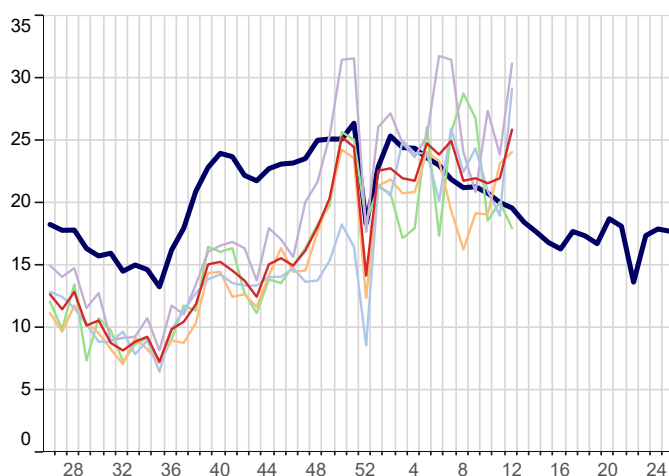
**Viral Hepatitis (ICD10: B15-B19)**  
Weekly incidence (per 100,000 **all ages**) by region  
for 2022/23 compared with 5 year average



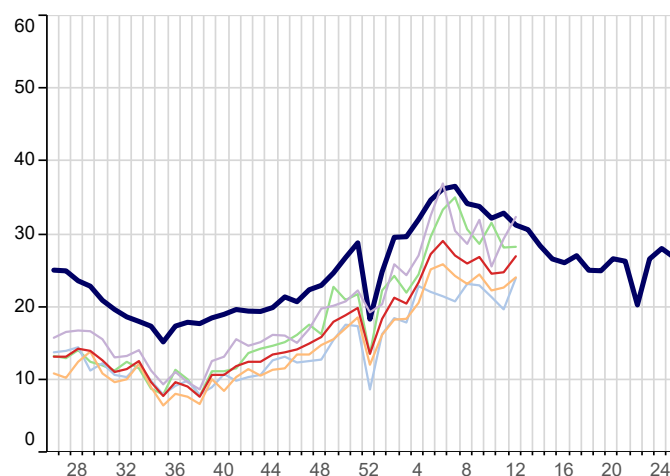
## 2. Environmentally Sensitive Disorders:

5yr Avg   National   London   North   South   Midlands And East

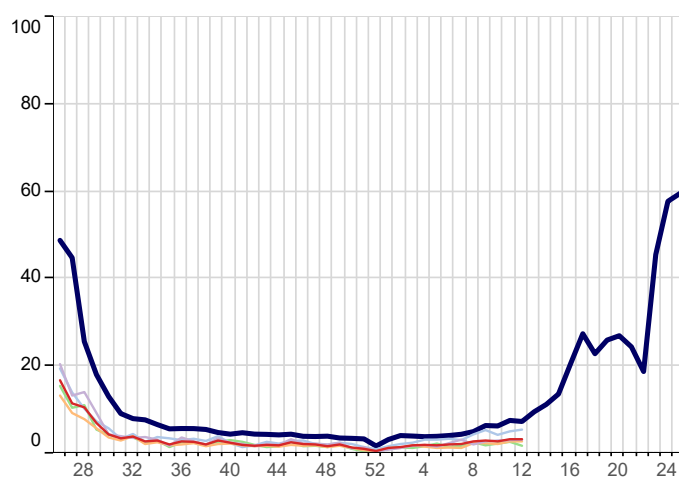
**Asthma (ICD10: J45-J46)**  
Weekly incidence (per 100,000 all ages) by region  
for 2022/23 compared with 5 year average



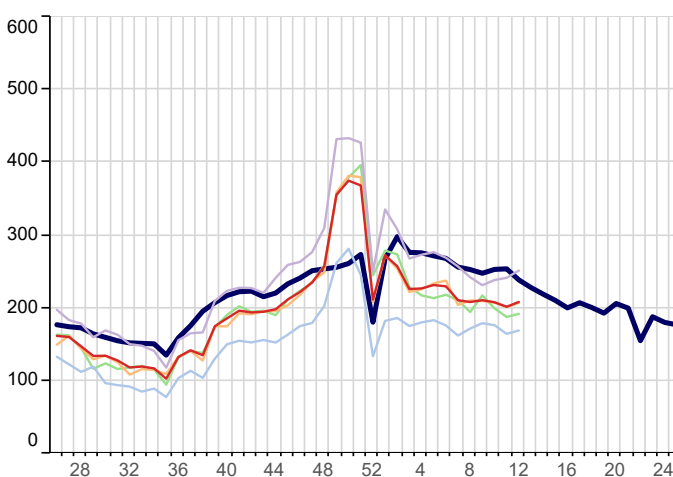
**Disorders of Conjunctiva (ICD10: H10-H13)**  
Weekly incidence (per 100,000 all ages) by region  
for 2022/23 compared with 5 year average



**Hayfever/Allergic Rhinitis (ICD10: J30)**  
Weekly incidence (per 100,000 all ages) by region  
for 2022/23 compared with 5 year average



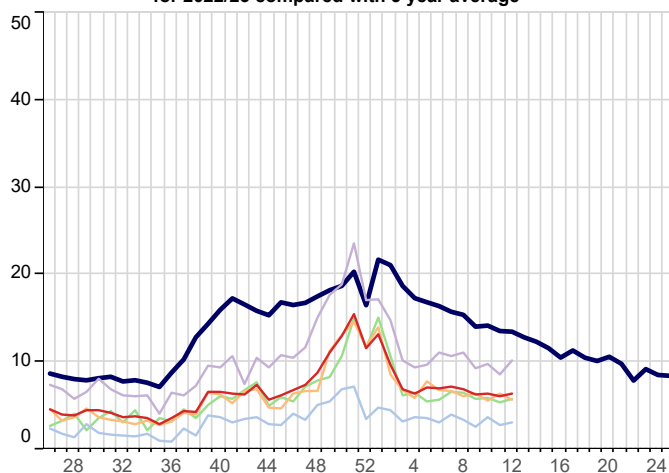
**Symptoms involving Respiratory & Chest (ICD10: R05-R07,R09)**  
Weekly incidence (per 100,000 all ages) by region  
for 2022/23 compared with 5 year average



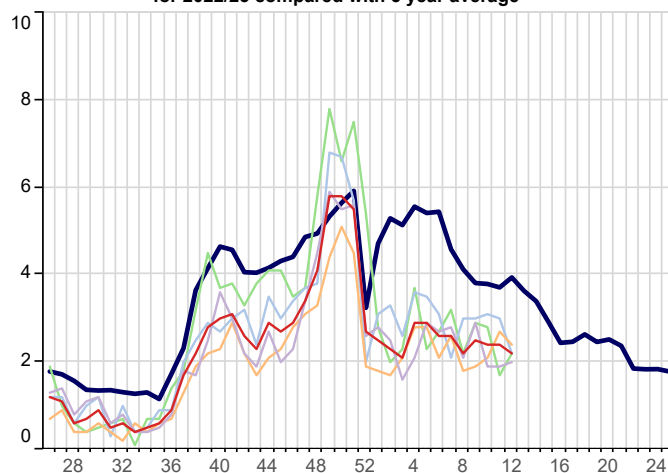
### 3. Respiratory Infections:

5yr Avg   National   London   North   South   Midlands And East

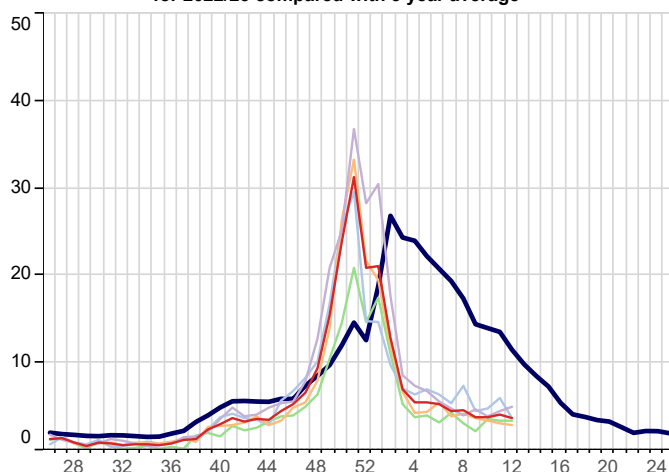
**Acute Bronchitis (ICD10: J20-J21,J40)**  
Weekly incidence (per 100,000 all ages) by region  
for 2022/23 compared with 5 year average



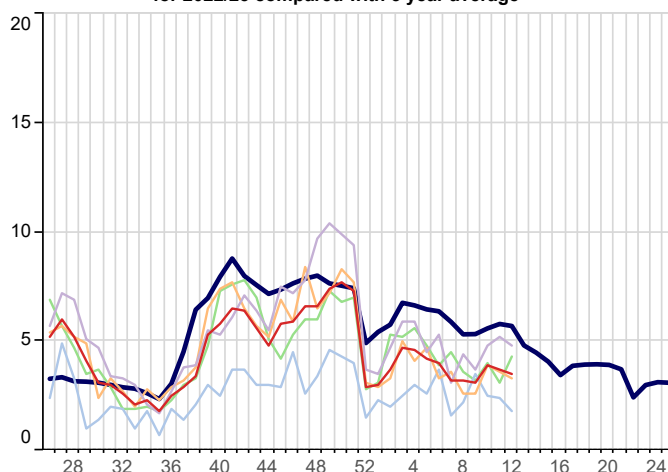
**Common Cold (ICD10: J00,J06)**  
Weekly incidence (per 100,000 all ages) by region  
for 2022/23 compared with 5 year average



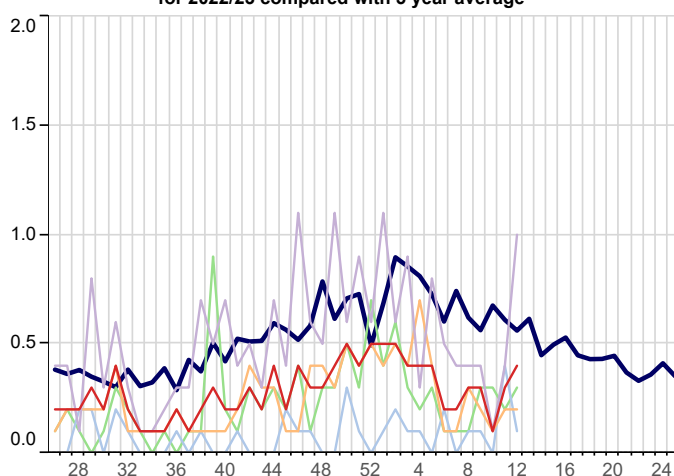
**Influenza-like illness (ICD10: J09-J11)**  
Weekly incidence (per 100,000 all ages) by region  
for 2022/23 compared with 5 year average



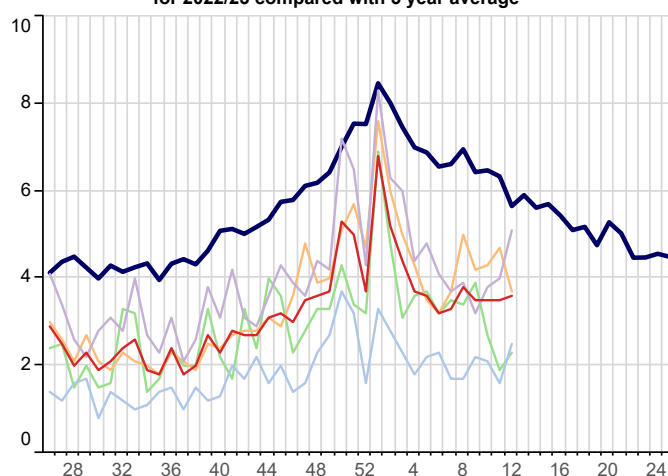
**Acute Laryngitis/Tracheitis (ICD10: J04)**  
Weekly incidence (per 100,000 all ages) by region  
for 2022/23 compared with 5 year average



**Pleurisy (ICD10: R091)**  
Weekly incidence (per 100,000 all ages) by region  
for 2022/23 compared with 5 year average



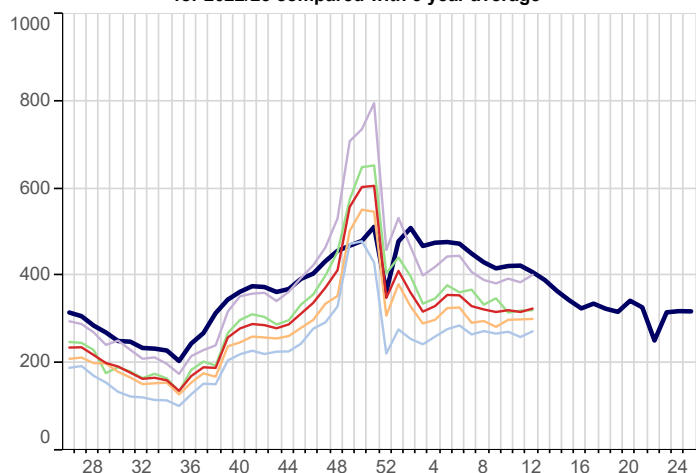
**Pneumonia/Pneumonitis (ICD10: J12-J18)**  
Weekly incidence (per 100,000 all ages) by region  
for 2022/23 compared with 5 year average



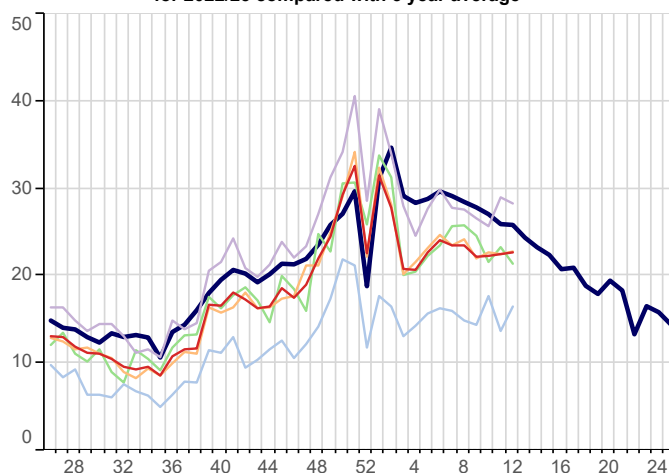
### 3. Respiratory Infections(Continued):

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

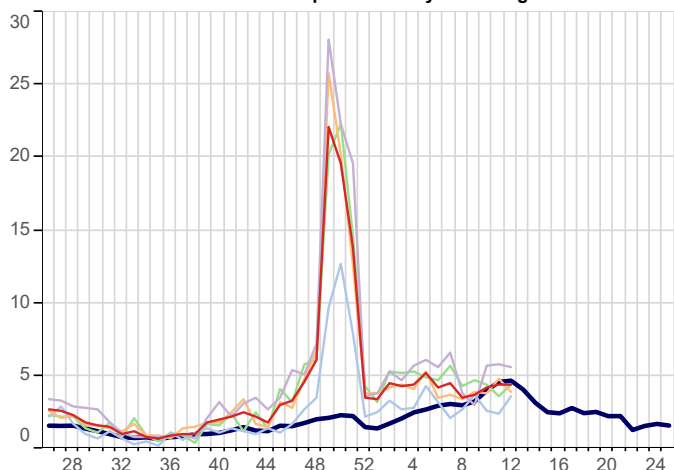
**Respiratory System Diseases (ICD10: J00-J99)**  
Weekly incidence (per 100,000 all ages) by region  
for 2022/23 compared with 5 year average



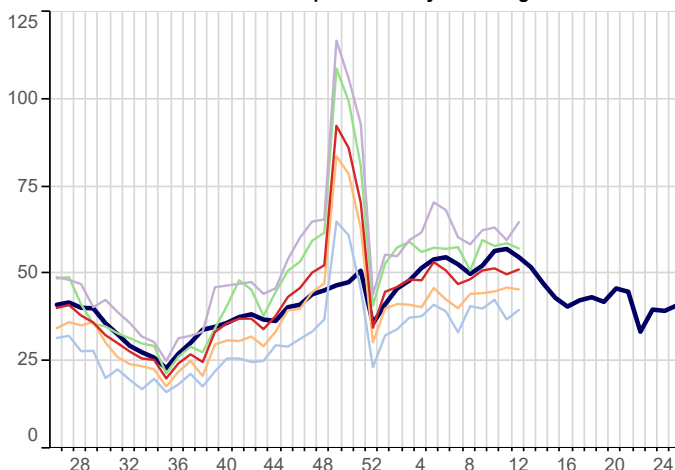
**Acute Sinusitis (ICD10: J01)**  
Weekly incidence (per 100,000 all ages) by region  
for 2022/23 compared with 5 year average



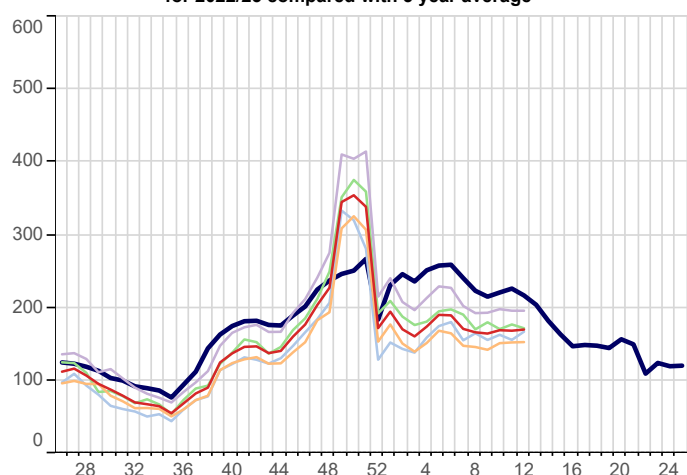
**Strep Sore Throat, Scarlatina and Peritonsillar Abscess (ICD10: A38,J020,J36)**  
Weekly incidence (per 100,000 all ages) by region  
for 2022/23 compared with 5 year average



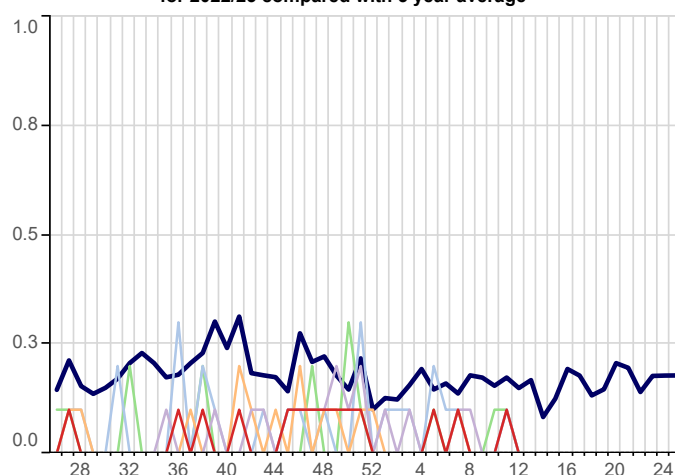
**Acute Tonsillitis/Pharyngitis (ICD10: J02-J03)**  
Weekly incidence (per 100,000 all ages) by region  
for 2022/23 compared with 5 year average



**Upper Respiratory Tract Infections (URTI)(ICD10: J00-J06)**  
Weekly incidence (per 100,000 all ages) by region  
for 2022/23 compared with 5 year average



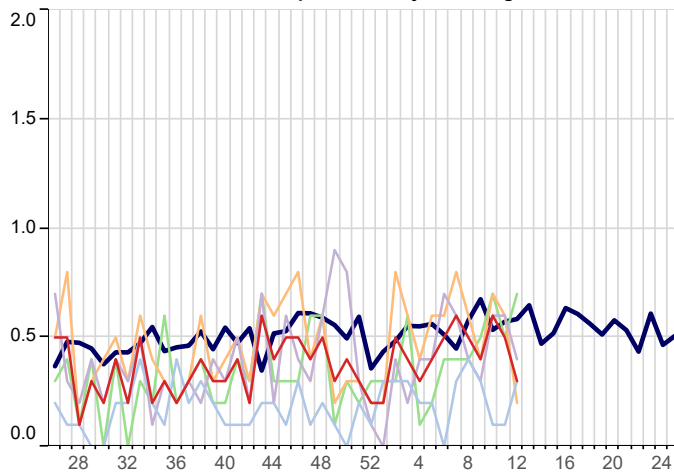
**Whooping Cough (ICD10: A37)**  
Weekly incidence (per 100,000 all ages) by region  
for 2022/23 compared with 5 year average



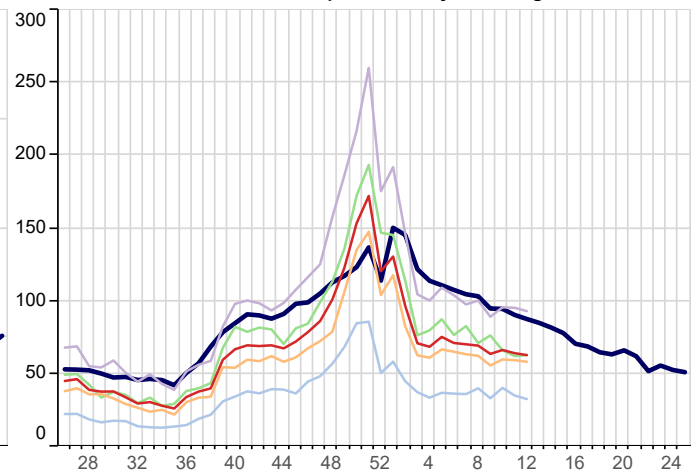
### 3. Respiratory Infections(Continued):

5yr Avg   National   London   North   South   Midlands And East

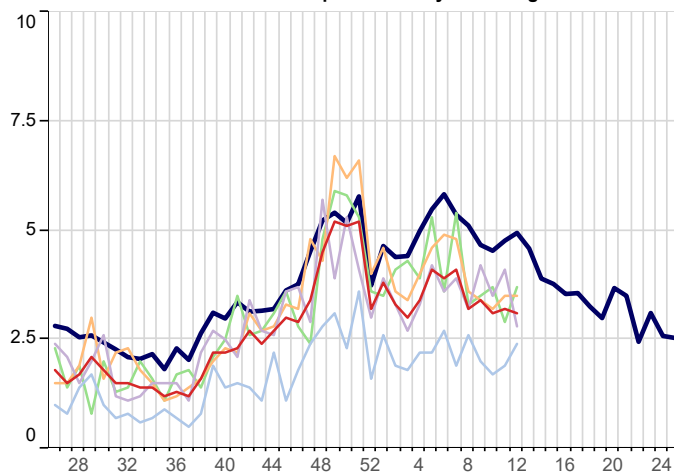
**Infectious Mononucleosis (ICD10: B27)**  
Weekly incidence (per 100,000 all ages) by region  
for 2022/23 compared with 5 year average



**Lower Respiratory Tract Infections (LRTI)(ICD10: J20-J22)**  
Weekly incidence (per 100,000 all ages) by region  
for 2022/23 compared with 5 year average



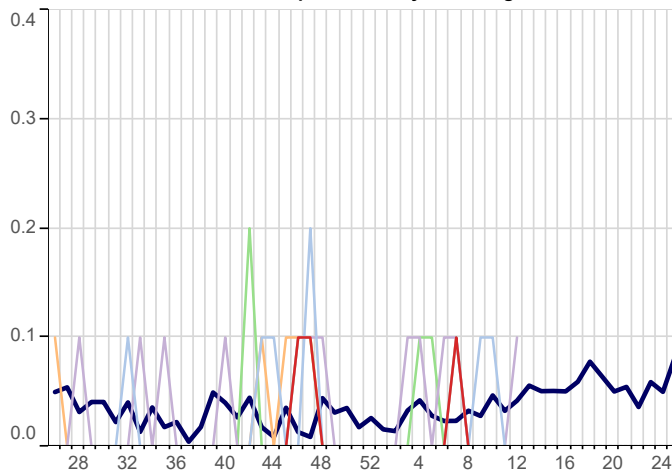
**Acute Otitis Media (ICD10: H650-H651,H660,H669)**  
Weekly incidence (per 100,000 all ages) by region  
for 2022/23 compared with 5 year average



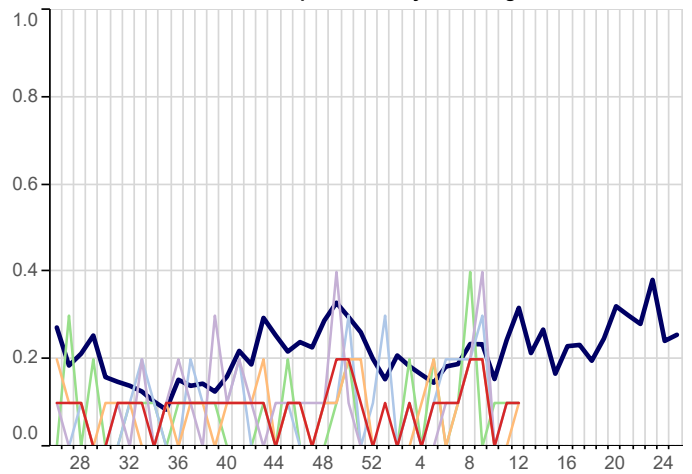
## 4. Vaccine Sensitive Disorders

5yr Avg   National   London   North   South   Midlands And East

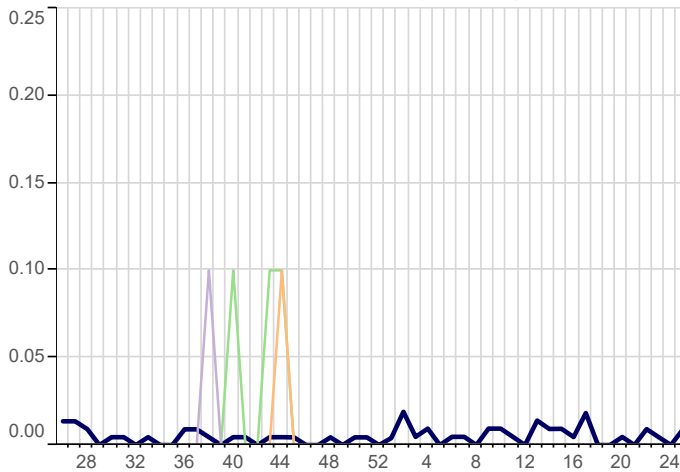
**Measles (ICD10: B05)**  
Weekly incidence (per 100,000 all ages) by region  
for 2022/23 compared with 5 year average



**Mumps (ICD10: B26)**  
Weekly incidence (per 100,000 all ages) by region  
for 2022/23 compared with 5 year average

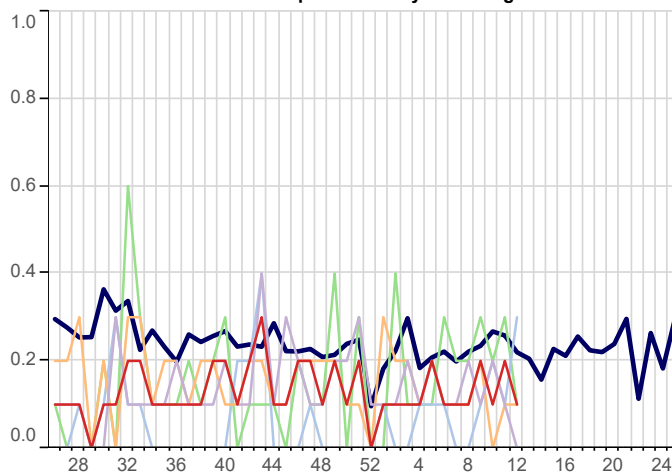


**Rubella (ICD10: B06)**  
Weekly incidence (per 100,000 all ages) by region  
for 2022/23 compared with 5 year average

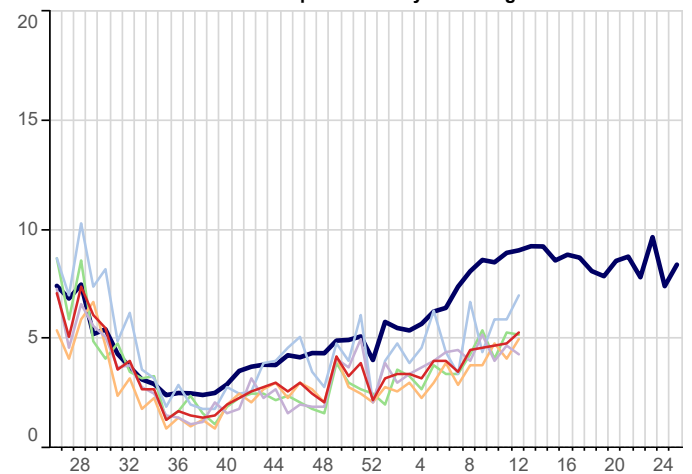


## 5. Skin Contagions

**Bullous Dermatoses (ICD10: L10-L14)**  
Weekly incidence (per 100,000 all ages) by region  
for 2022/23 compared with 5 year average



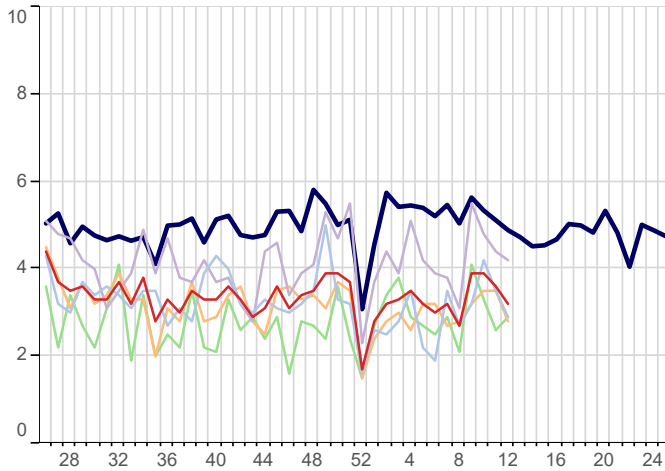
**Chickenpox (ICD10: B01)**  
Weekly incidence (per 100,000 all ages) by region  
for 2022/23 compared with 5 year average



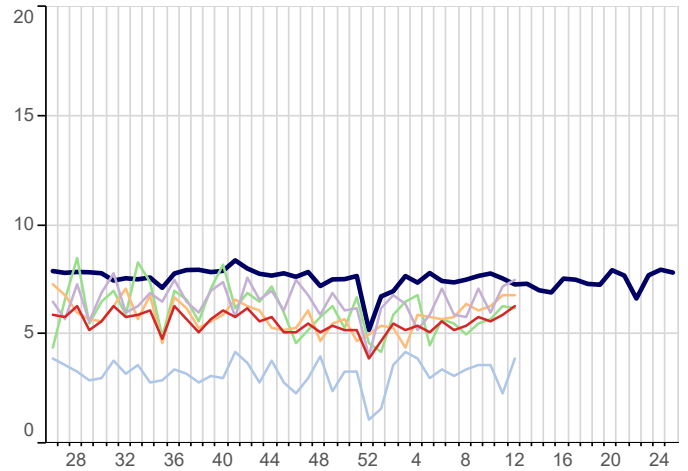
## 5. Skin Contagions (Continued)

5yr Avg   National   London   North   South   Midlands And East

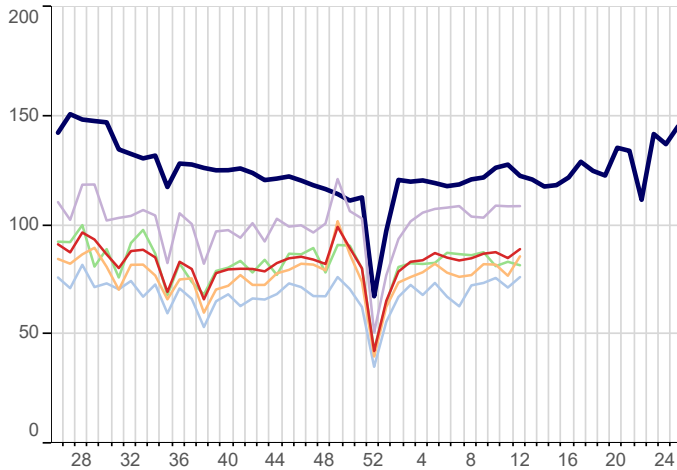
**Herpes Simplex (ICD10: B00)**  
Weekly incidence (per 100,000 all ages) by region  
for 2022/23 compared with 5 year average



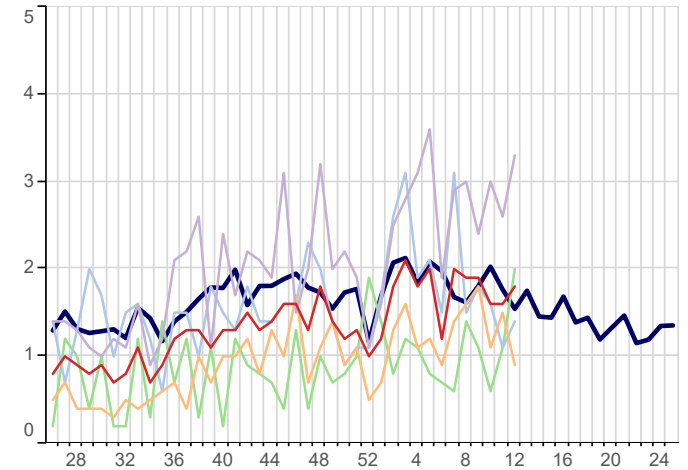
**Herpes Zoster (ICD10: B02)**  
Weekly incidence (per 100,000 all ages) by region  
for 2022/23 compared with 5 year average



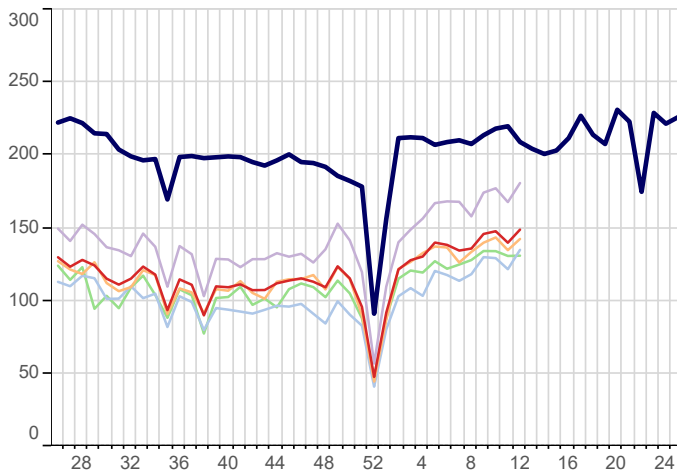
**Infections of Skin & Subcutaneous Tissue (ICD10: L00-L08)**  
Weekly incidence (per 100,000 all ages) by region  
for 2022/23 compared with 5 year average



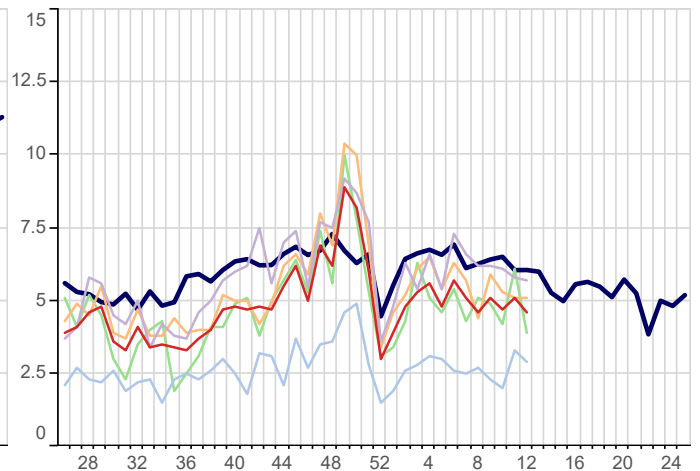
**Scabies (ICD10: B86)**  
Weekly incidence (per 100,000 all ages) by region  
for 2022/23 compared with 5 year average



**Symptoms involving Skin & Oth Integument Tiss (ICD10: R20-R23)**  
Weekly incidence (per 100,000 all ages) by region  
for 2022/23 compared with 5 year average



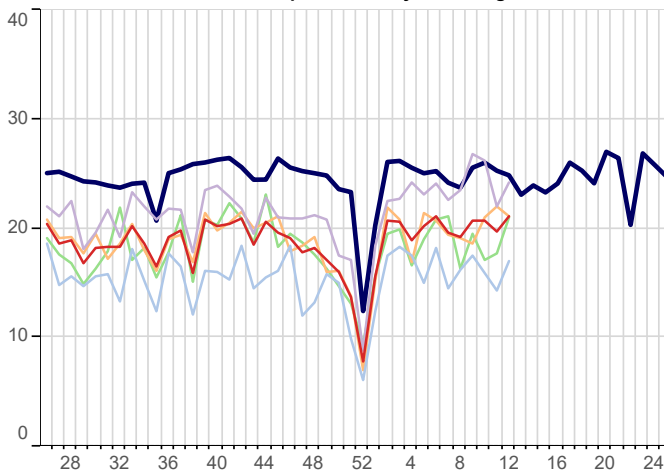
**Impetigo (ICD10: L01)**  
Weekly incidence (per 100,000 all ages) by region  
for 2022/23 compared with 5 year average



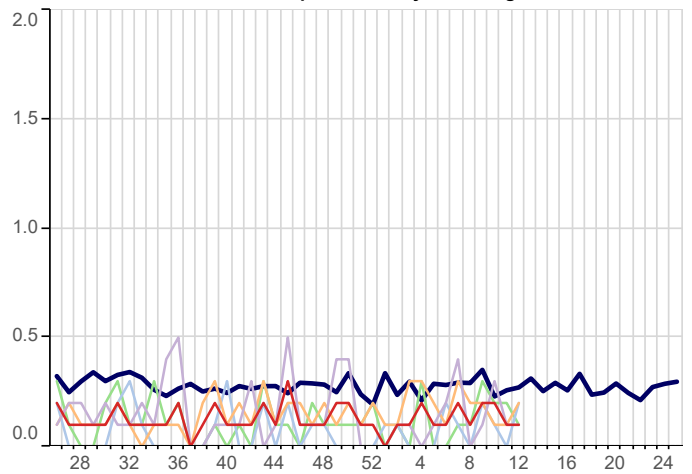
## 6. Disorders Affecting the Nervous System

5yr Avg   National   London   North   South   Midlands And East

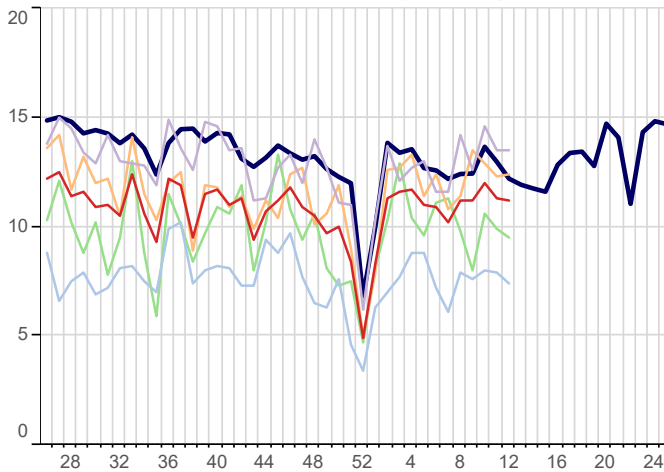
**Disorders of The Peripheral Nervous System (ICD10: G50-G64,G70-G72)**  
Weekly incidence (per 100,000 all ages) by region  
for 2022/23 compared with 5 year average



**Meningitis/Encephalitis (ICD10: A170-A171,A390,A38-A85,A87,G00-G05)**  
Weekly incidence (per 100,000 all ages) by region  
for 2022/23 compared with 5 year average

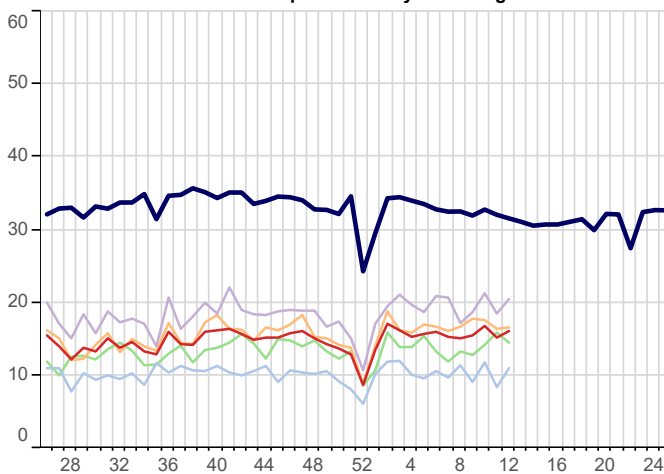


**Symptoms Involving Nervous & Musculoskeletal (ICD10: R25-R29)**  
Weekly incidence (per 100,000 all ages) by region  
for 2022/23 compared with 5 year average



## 7. Genitourinary System Disorders

**Urinary Tract Infection/Cystitis (ICD10: N30,N390)**  
Weekly incidence (per 100,000 all ages) by region  
for 2022/23 compared with 5 year average



## 8. Tabular Summary by Disease

Disease Name	Week beginning Week ending		20/03/2023 26/03/2023		13/03/2023 19/03/2023		06/03/2023 12/03/2023		27/02/2023 05/03/2023	
	Rate	Numer	Rate	Numer	Rate	Numer	Rate	Numer	Rate	Numer
Allergic Rhinitis	3.3	175	3.3	181	2.8	155	3.0	161		
Asthma	25.9	1,389	22.0	1,198	21.6	1,173	22.0	1,184		
Bronchitis	6.4	340	6.1	331	6.4	347	6.3	340		
Bullous Dermatoses	0.1	6	0.2	9	0.1	8	0.2	9		
Chickenpox	5.3	282	4.8	263	4.7	256	4.6	247		
Common Cold	2.2	119	2.4	130	2.4	130	2.5	136		
Conjunctival Disorders	27.0	1,443	24.8	1,349	24.6	1,338	26.9	1,450		
Herpes Simplex	3.2	171	3.6	194	3.9	214	3.9	213		
Herpes Zoster	6.3	337	5.9	321	5.6	304	5.8	311		
Impetigo	4.6	246	5.1	277	4.7	255	5.1	276		
Infectious Mononucleosis	0.3	17	0.5	26	0.6	30	0.4	20		
Influenza-like illness	3.7	197	4.1	224	3.8	209	3.8	207		
Infectious Intestinal Diseases	9.5	507	9.0	489	9.4	509	8.2	440		
Laryngitis and Tracheitis	3.5	189	3.7	199	3.9	212	3.1	169		
Lower Respiratory Tract Infections	62.9	3,366	64.2	3,496	66.4	3,615	63.7	3,433		
Measles	0.0	1	0.0	0	0.0	1	0.0	1		
Meningitis and Encephalitis	0.1	7	0.1	5	0.2	10	0.2	11		
Mumps	0.1	3	0.1	3	0.0	2	0.2	12		
Non-infective Enteritis and Colitis	17.2	923	16.4	895	17.1	929	14.3	769		
Otitis Media Acute	3.1	167	3.2	175	3.1	166	3.4	181		
Peripheral Nervous Disease	21.1	1,127	19.7	1,073	20.7	1,124	20.7	1,115		
Pleurisy	0.4	22	0.3	16	0.1	7	0.3	15		
Pneumonia and Pneumonitis	3.6	191	3.5	188	3.5	190	3.5	189		
Respiratory System Diseases	325.3	17,414	317.5	17,297	321.6	17,497	317.5	17,126		
Rubella	0.0	0	0.0	0	0.0	0	0.0	0		
Scabies	1.8	95	1.6	88	1.6	89	1.9	100		
Sinusitis	22.7	1,215	22.5	1,227	22.3	1,213	22.2	1,197		
Skin and Subcutaneous Tissue Infections	89.1	4,770	85.0	4,633	87.7	4,772	87.0	4,693		
Strep Throat and Peritonsillar Abscess	4.4	233	4.4	238	4.2	227	3.7	202		
Symptoms involving musculoskeletal	11.2	599	11.3	615	12.0	652	11.2	603		
Symptoms involving Respiratory and Chest	208.4	11,155	201.8	10,994	208.0	11,316	210.8	11,367		
Symptoms involving Skin and Integument Tissues	148.9	7,973	139.9	7,621	147.8	8,044	145.9	7,869		
Tonsillitis and acute Pharyngitis	51.3	2,748	49.9	2,720	51.6	2,806	51.0	2,749		
Upper Respiratory Tract Infections	170.1	9,108	168.5	9,179	169.2	9,205	164.6	8,880		
Urinary Tract Infections	16.1	863	15.2	829	16.8	916	15.5	836		
Viral Hepatitis	0.2	13	0.1	8	0.2	11	0.2	11		
Whooping Cough	0.0	0	0.1	3	0.0	1	0.0	1		
<b>Practice Count</b>		<b>508</b>		<b>511</b>		<b>516</b>		<b>513</b>		
<b>Denom</b>		<b>5,353,078</b>		<b>5,448,312</b>		<b>5,441,451</b>		<b>5,393,400</b>		

## FURTHER INFORMATION:

### About the report

#### Winter focus

The first two pages of data within this report focus on Influenza-like illness and COVID-19, in order to provide information about seasonal influenza and early warnings 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 a five-year average, 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.

#### 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 the UK Health Security Agency. 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 E, page 4.

Both the *all-ages* thresholds and the *age-specific* thresholds are shown in Table E, page 4. Ten years of data were used for *all-ages* and *age-specific* thresholds calculation (winter seasons 2011/12- 2021/22 excluding the pandemic year 2020/21).

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

### Acknowledgement:

Staff from the Data Science department at the National Physical Laboratory (<https://www.npl.co.uk/data-science>) assisted in the provision of and extension of the primary care national surveillance reports during the 2020 SARS-CoV-2 pandemic; as well as adding resilience.

### 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 at the Oxford-Royal College of General Practitioners Research and Surveillance Centre.

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

<http://www.rcgp.org.uk/rsc>

### Our data extraction process and information governance

Data are extracted twice weekly from practice systems by Wellbeing data management 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 at the Oxford-Royal College of General Practitioners Research and Surveillance Centre. Both Wellbeing data management and the University of Oxford 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 the UK Health Security Agency. The bulletin can be found at the following URL:

<https://www.gov.uk/government/collections/syndromic-surveillance-systems-and-analyses>

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/rsc>

### 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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