Royal College of General Practitioners
Research and Surveillance Centre

RSC Communicable and Respiratory Disease Report for England

Key Statistics:

Week Number/Year…….33/2017
Week Starting - Ending……..…14/08/2017 - 20/08/2017
No. of Practices……...157
Population…….1593940

National (England)

- **Allergic Rhinitis :** decreased from **7.1** in week 32 to **6.0** in week 33.
- **Asthma :** was unchanged at **10.1** in week 32 compared with **9.8** in week 33.
- **Common Cold :** was unchanged at **43.9** in week 32 compared with **43.0** in week 33.
- **Infectious Intestinal Diseases (IID) :** increased from **7.8** in week 32 to **9.3** in week 33.
- **Respiratory System Diseases :** was unchanged at **184.7** in week 32 compared with **184.0** in week 33.

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

- **Allergic Rhinitis :** decreased from **10.8** in week 32 to **8.1** in week 33 in the London region, decreased from **7.0** in week 32 to **6.0** in week 33 in the North region, decreased from **5.0** in week 32 to **4.6** in week 33 in the South region, and decreased from **6.9** in week 32 to **6.4** in week 33 in the Midlands And East region.
- **Asthma :** increased from **8.4** in week 32 to **9.0** in week 33 in the London region, increased from **9.4** in week 32 to **10.4** in week 33 in the North region, was unchanged at **10.5** in week 32 compared with **10.5** in week 33 in the South region, and decreased from **13.3** in week 32 to **8.3** in week 33 in the Midlands And East region.
- **Common Cold :** increased from **56.0** in week 32 to **59.5** in week 33 in the London region, decreased a little from **44.0** in week 32 to **41.9** in week 33 in the North region, decreased from **40.2** in week 32 to **37.5** in week 33 in the South region, and was unchanged at **34.5** in week 32 compared with **34.0** in week 33 in the Midlan..
- **Infectious Intestinal Diseases (IID) :** increased from **11.1** in week 32 to **12.6** in week 33 in the London region, increased from **8.8** in week 32 to **11.0** in week 33 in the North region, increased from **5.9** in week 32 to **6.4** in week 33 in the South region, and increased from **5.5** in week 32 to **7.4** in week 33 in the Midlands And East region.
- **Respiratory System Diseases :** was unchanged at **182.9** in week 32 compared with **181.4** in week 33 in the London region, increased a little from **192.6** in week 32 to **199.9** in week 33 in the North region, was unchanged at **171.6** in week 32 compared with **171.6** in week 33 in the South region, and decreased from **202.4** in week 32 to **182.5** in week 33 in the Midlands And East region.

Comment:

Most conditions are at or below seasonally expected levels.

Spring/Summer Focus 2017

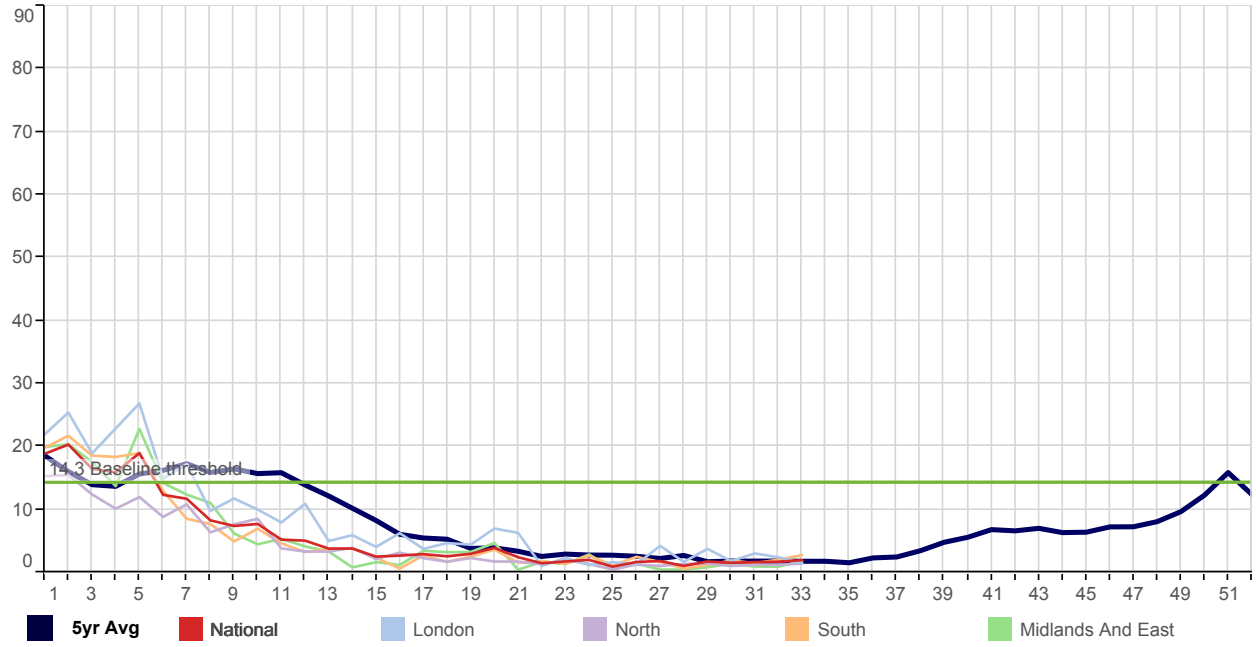
Please see page 13 for explanatory notes on the data.

Weekly influenza-like illness and bronchitis incidence rates per 100,000 persons

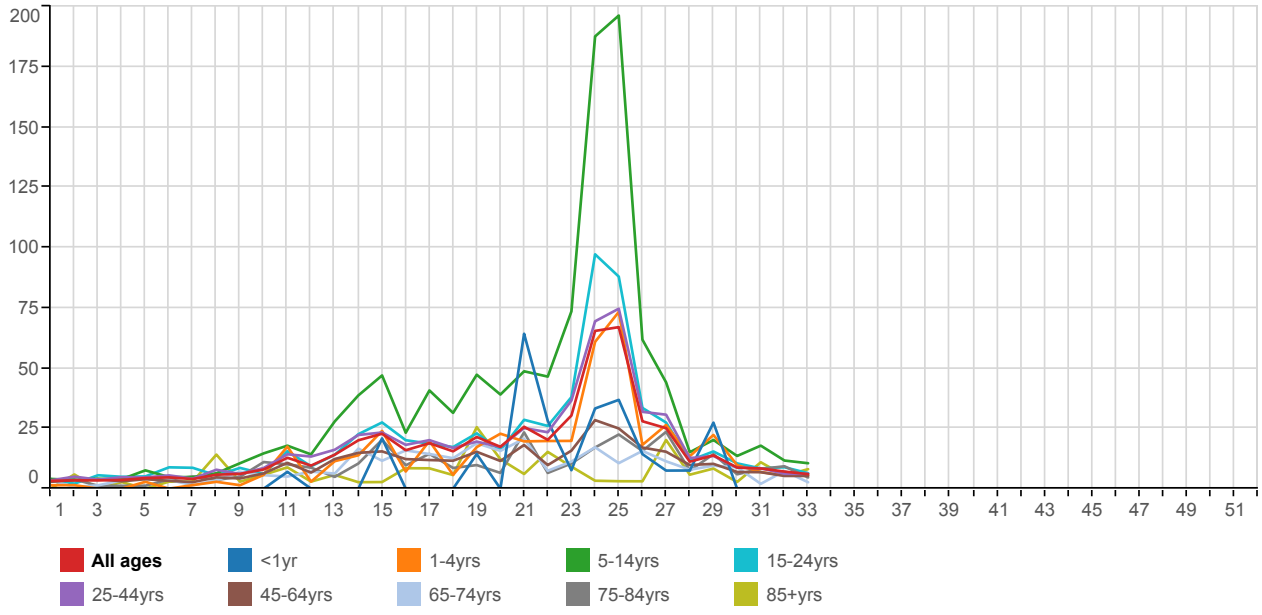
	Bronchitis	Influenza-like illness
<1yr	79.5	6.6
1-4yrs	46.7	1.4
5-14yrs	13.3	0.0
15-24yrs	20.3	1.5
25-44yrs	26.1	2.7
45-64yrs	46.3	2.5
65-74yrs	73.0	0.7
75-84yrs	125.4	2.3
85+yrs	213.1	2.7
All ages	44.5	1.9

	Influenza-like illness	Acute Bronchitis
London	1.5	34.5
North	1.4	53.5
South	2.8	39.1
Midlands And East	1.8	52.9
National	1.9	44.5

(A) Influenza-like illness: national incidence rate summer 2017*

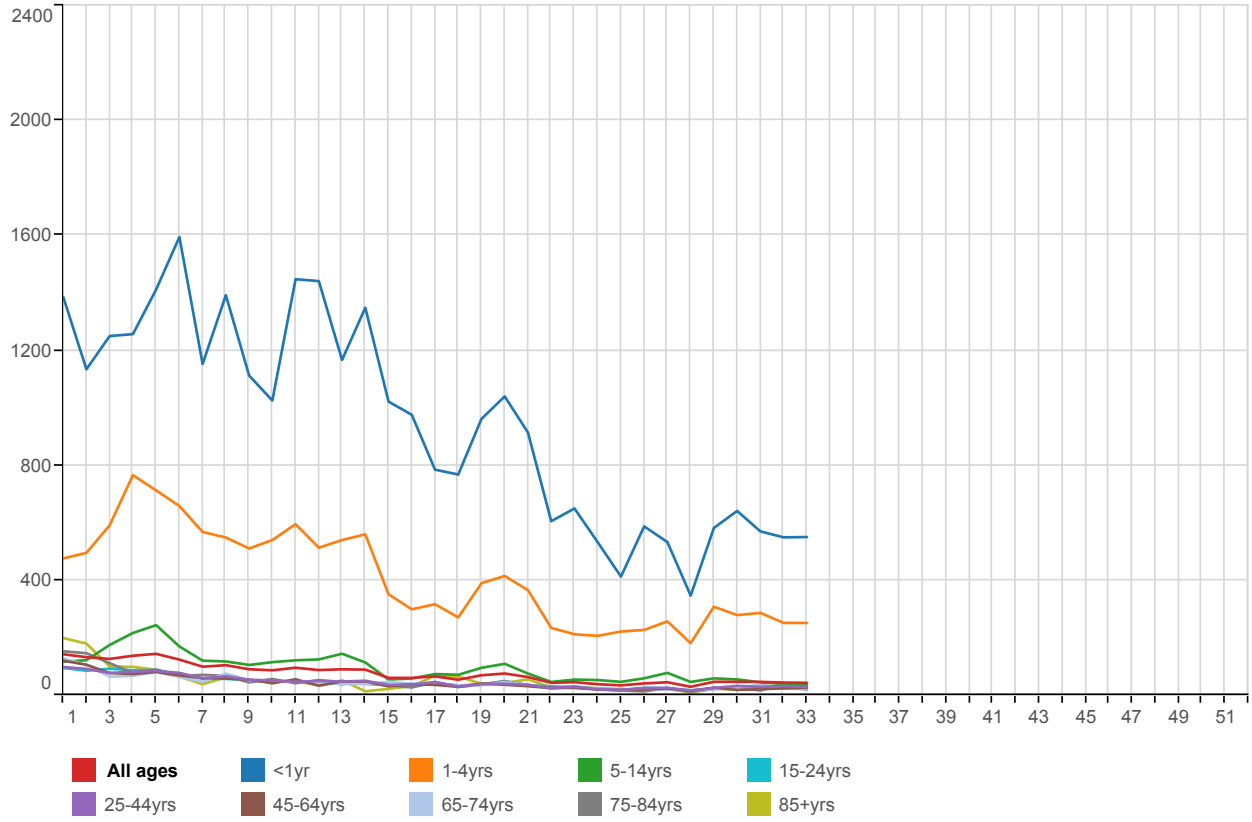


(B) Allergic Rhinitis: national incidence rate summer 2017*

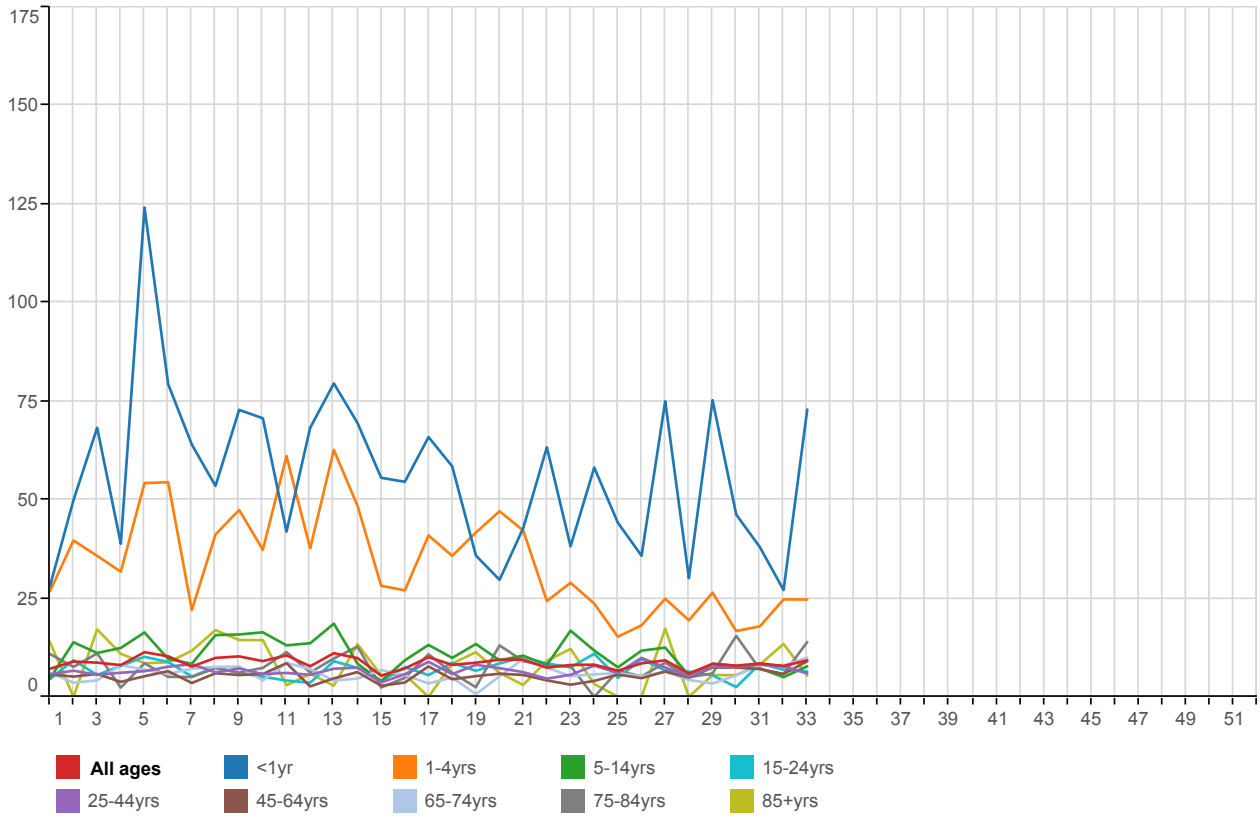


* The thresholds used are the agreed RCGP/ Public Health England levels for 2016. The rolling average line (blue) is based on 5 year historic RCGP RSC level.

(C) Common Cold : national incidence rate 2017 by age group*



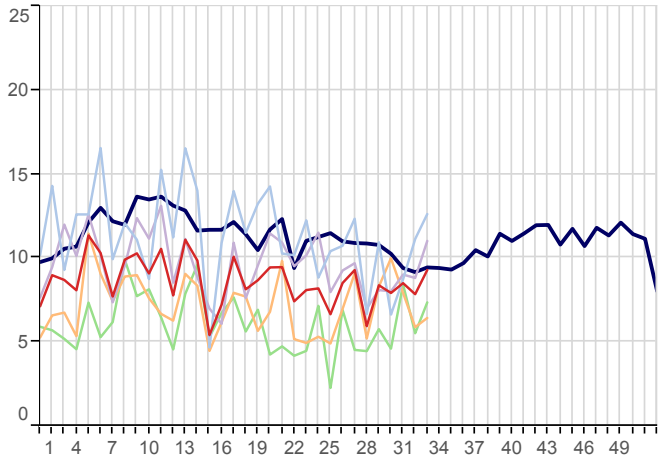
(D) Infectious Intestinal Diseases : national incidence rate 2017 by age group*



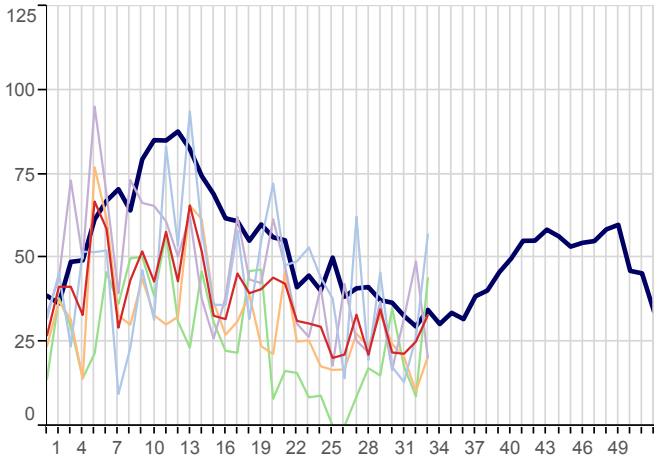
1. Water & Food Borne Disorders:

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

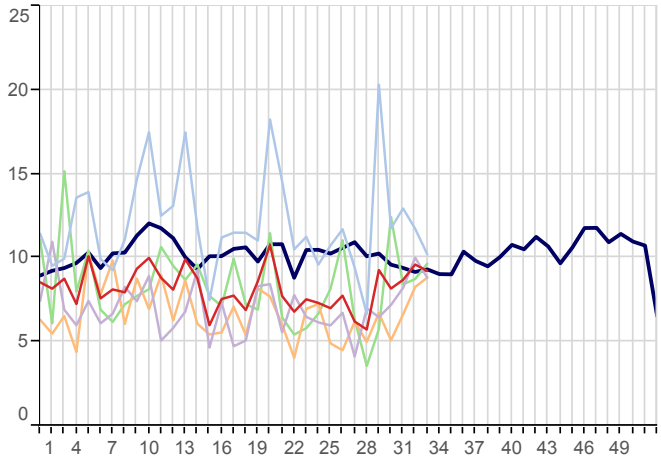
Infectious Intestinal Disease (ICD10: A00-A09)
Weekly incidence (per 100,000 all ages) by regions
for 2017 compared with 5 year average



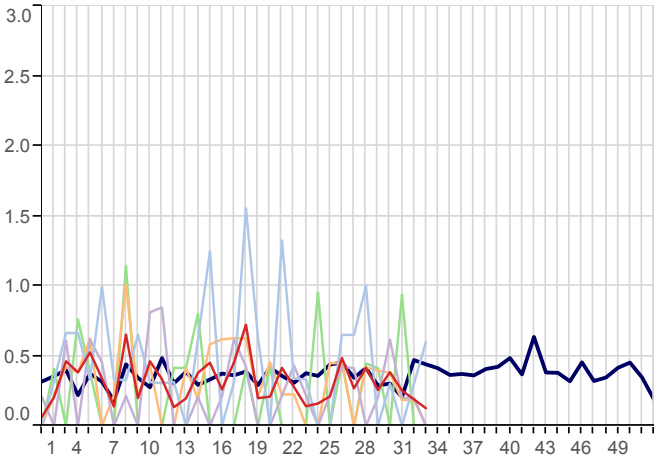
Infectious Intestinal Disease (ICD10: A00-A09)
Weekly incidence (per 100,000 0-4 years) by regions
for 2017 compared with 5 year average



Non-Infective Enteritis & Colitis (ICD10: K50-K52)
Weekly incidence (per 100,000 all ages) by region
for 2017 compared with 5 year average



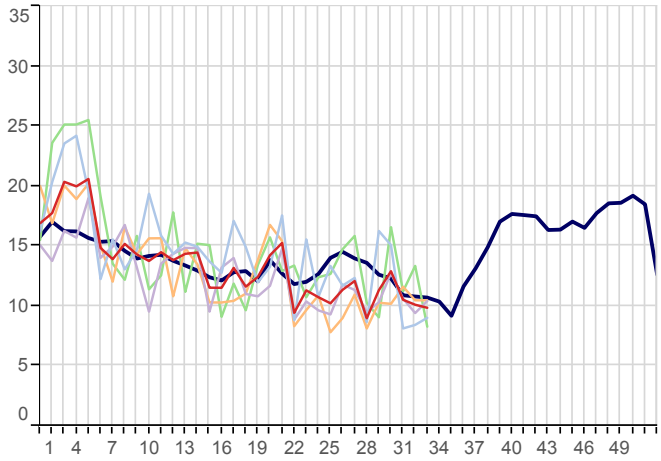
Viral Hepatitis (ICD10: B15-B19)
Weekly incidence (per 100,000 all ages) by region
for 2017 compared with 5 year average



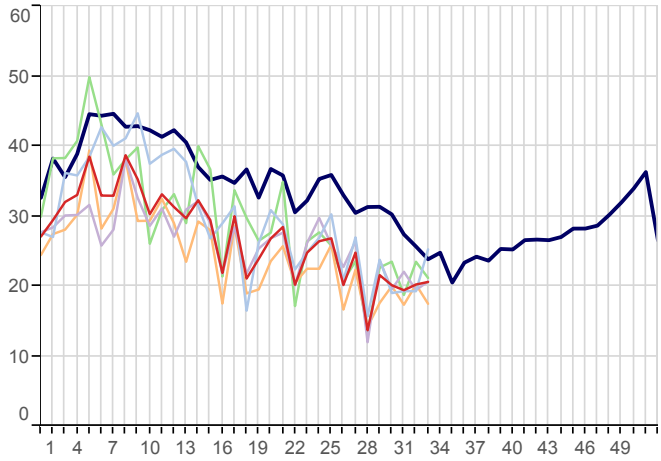
2. Environmentally Sensitive Disorders:

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

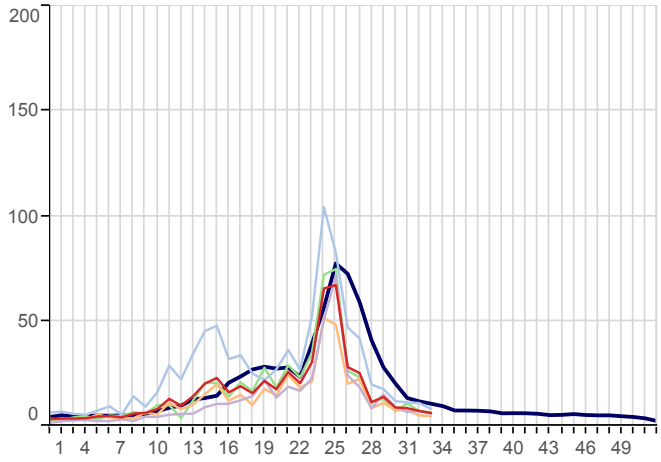
Asthma (ICD10: J45-J46)
Weekly incidence (per 100,000 all ages) by region
for 2017 compared with 5 year average



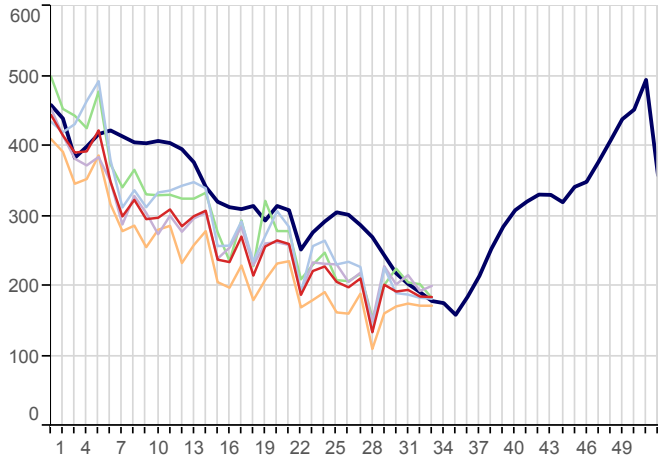
Disorders of Conjunctiva (ICD10: H10-H13)
Weekly incidence (per 100,000 all ages) by region
for 2017 compared with 5 year average



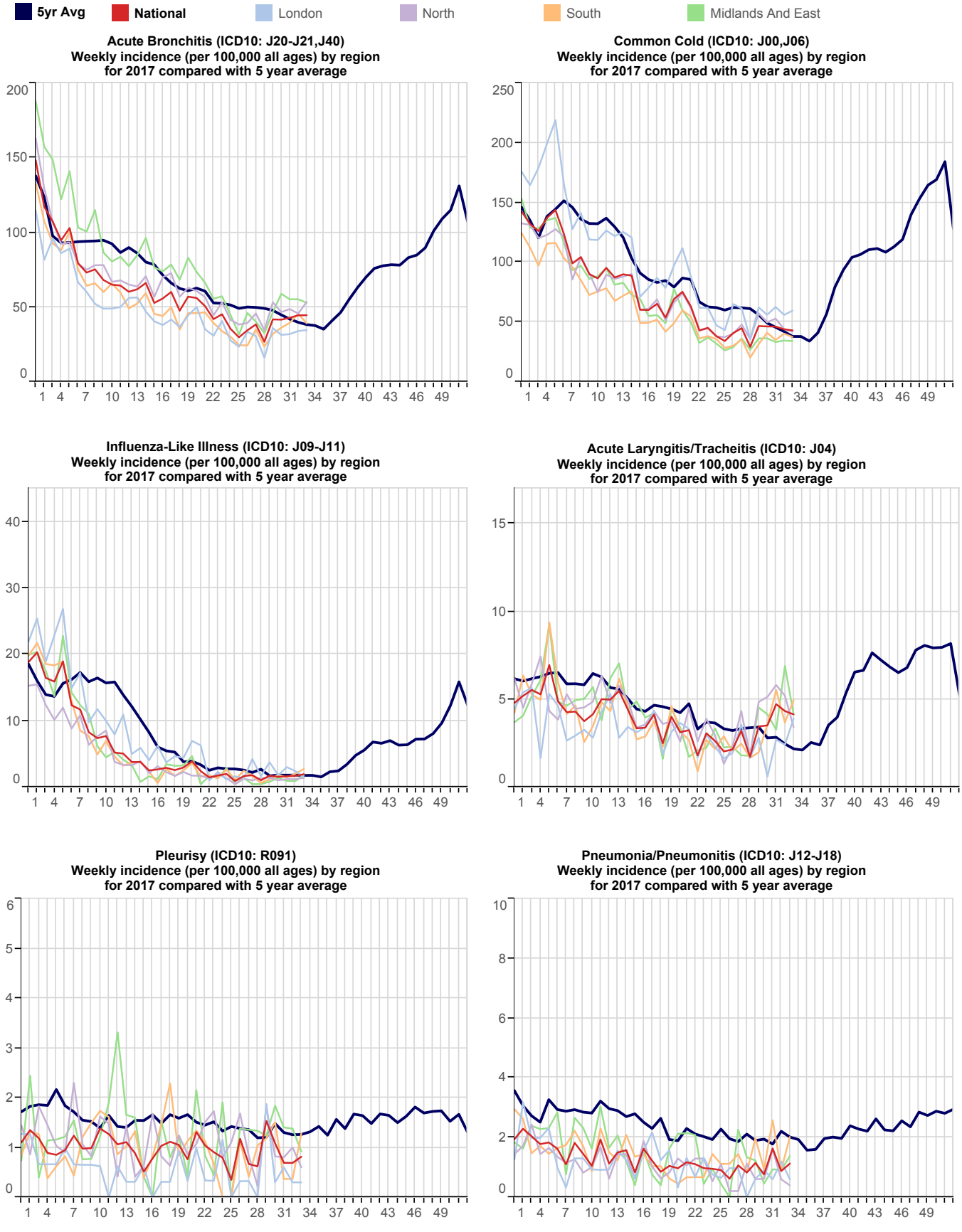
Hayfever/Allergic Rhinitis (ICD10: J30)
Weekly incidence (per 100,000 all ages) by region
for 2017 compared with 5 year average



Symptoms involving Respiratory & Chest (ICD10: R05-R07,R09)
Weekly incidence (per 100,000 all ages) by region
for 2017 compared with 5 year average

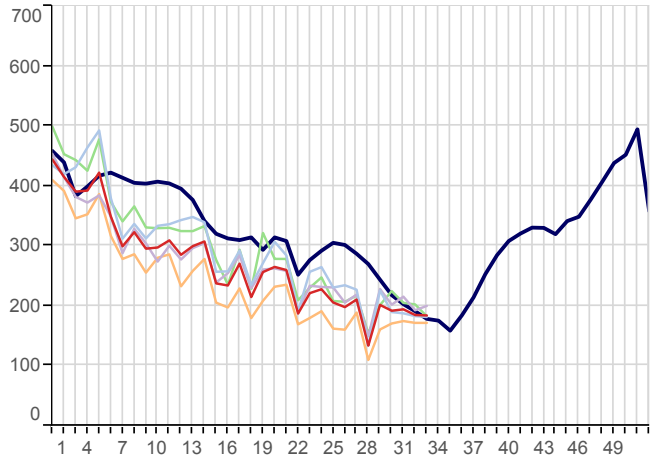


3. Respiratory Infections:

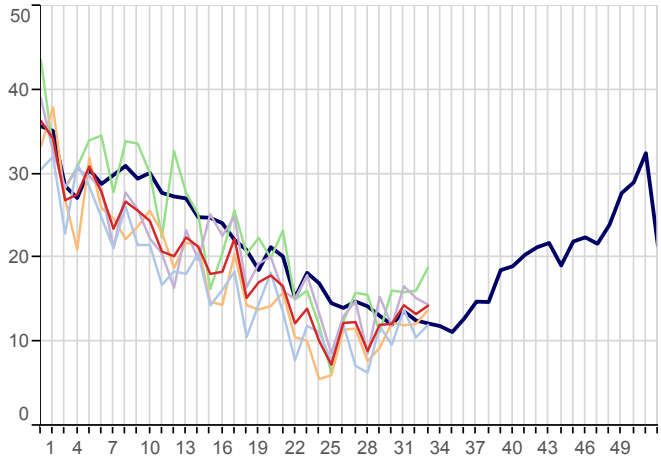


3. Respiratory Infections(Continued):

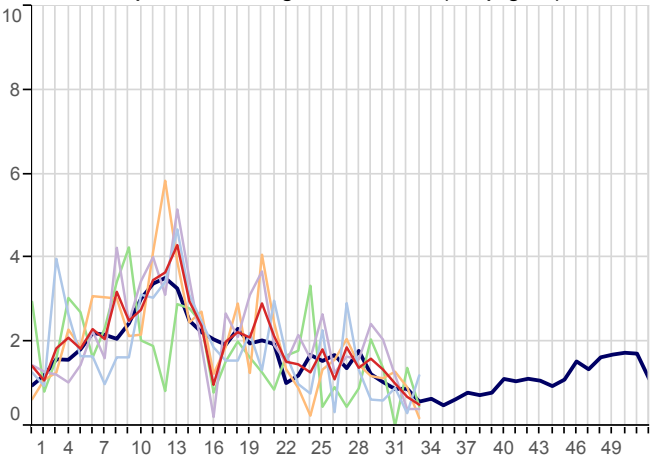
Respiratory System Diseases (ICD10: J00-J99)
Weekly incidence (per 100,000 all ages) by region
for 2017 compared with 5 year average



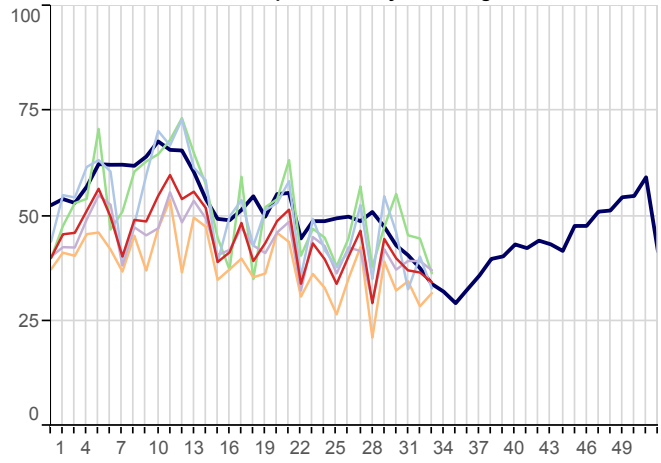
Acute Sinusitis (ICD10: J01)
Weekly incidence (per 100,000 all ages) by region
for 2017 compared with 5 year average



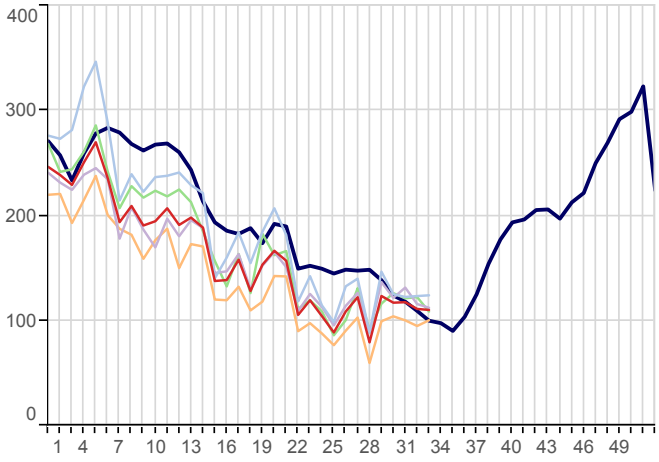
Strep Sore Throat, Scarlatina and Peritonsillar Abscess (ICD10: A38,J020,J36)
Weekly incidence (per 100,000 all ages) by region for 2015
compared with average for 2010 - 2012 (See page 13)



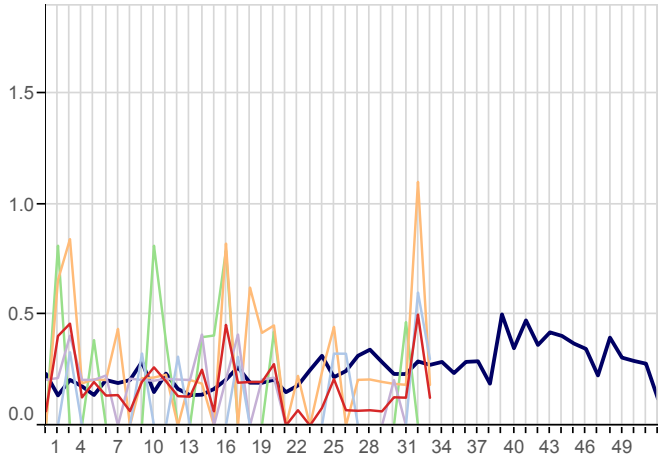
Acute Tonsillitis/Pharyngitis (ICD10: J02-J03)
Weekly incidence (per 100,000 all ages) by region
for 2017 compared with 5 year average



Upper Respiratory Tract Infections (URTI)(ICD10: J00-J06)
Weekly incidence (per 100,000 all ages) by region
for 2017 compared with 5 year average

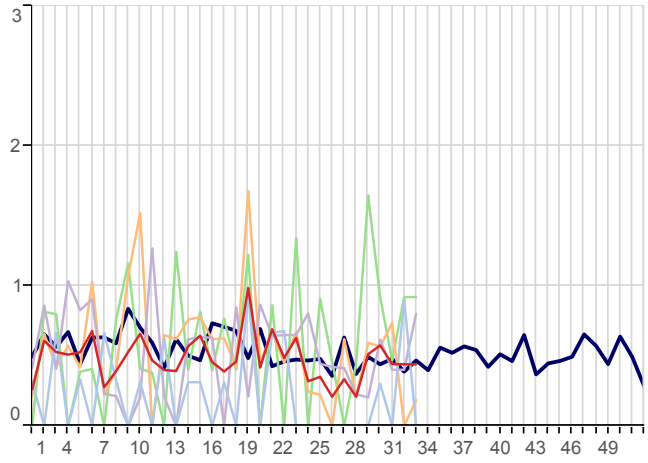


Whooping Cough (ICD10: A37)
Weekly incidence (per 100,000 all ages) by region for 2015
compared with average for 2010 - 2015 excluding 2013 (See page 13)

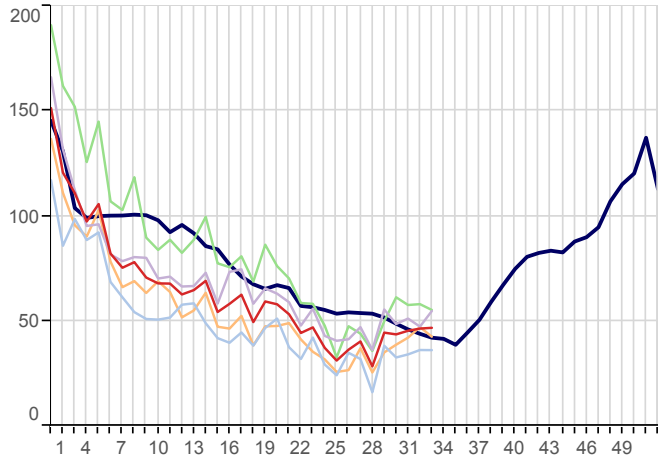


3. Respiratory Infections(Continued):

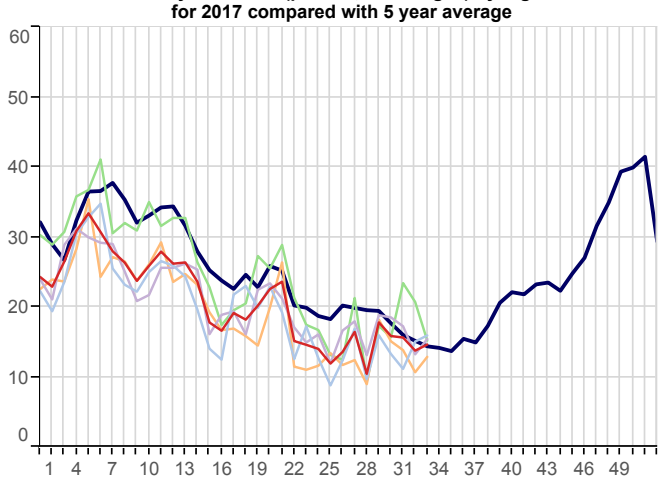
Infectious Mononucleosis (ICD10: B27)
Weekly incidence (per 100,000 all ages) by region
for 2017 compared with 5 year average



Lower Respiratory Tract Infections (LRTI)(ICD10: J20-J22)
Weekly incidence (per 100,000 all ages) by region
for 2017 compared with 5 year average



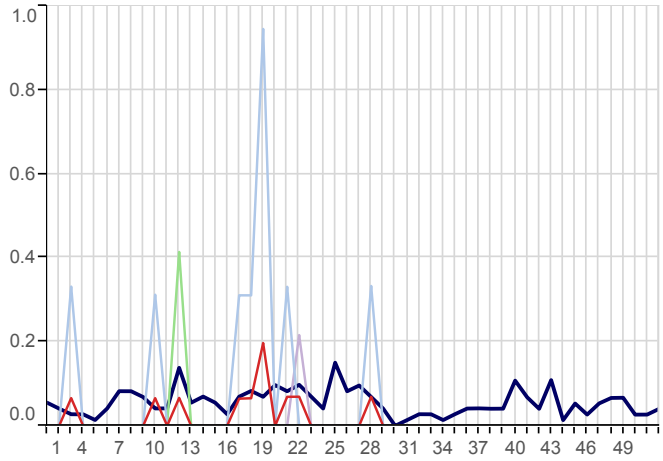
Acute Otitis Media (ICD10: H650-H651,H660,H669)
Weekly incidence (per 100,000 all ages) by region
for 2017 compared with 5 year average



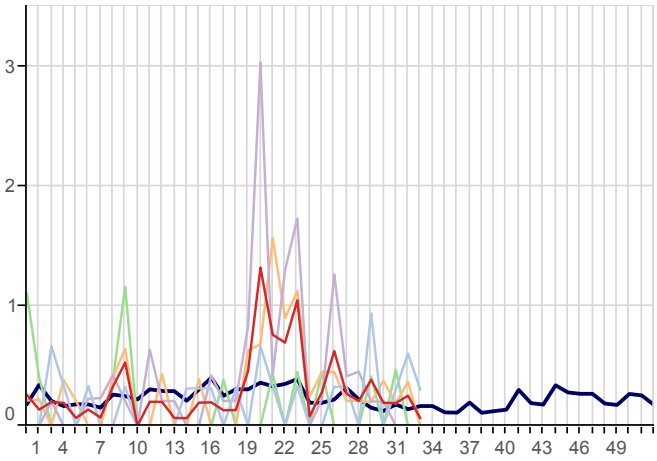
4. Vaccine Sensitive Disorders

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

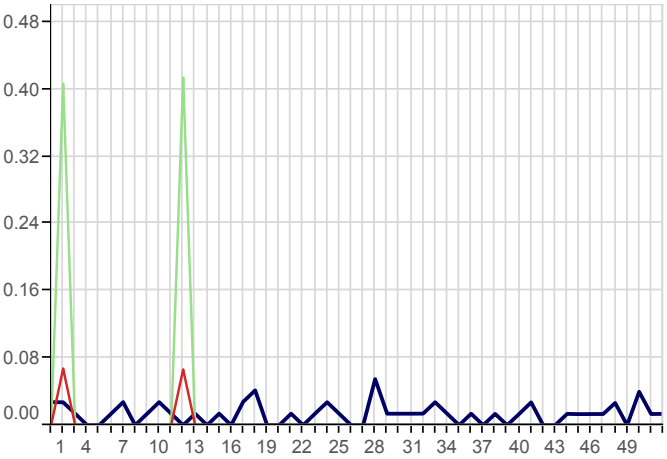
Measles (ICD10: B05)
Weekly incidence (per 100,000 all ages) by region for 2017 compared with 5 year average



Mumps (ICD10: B26)
Weekly incidence (per 100,000 all ages) by region for 2017 compared with 5 year average

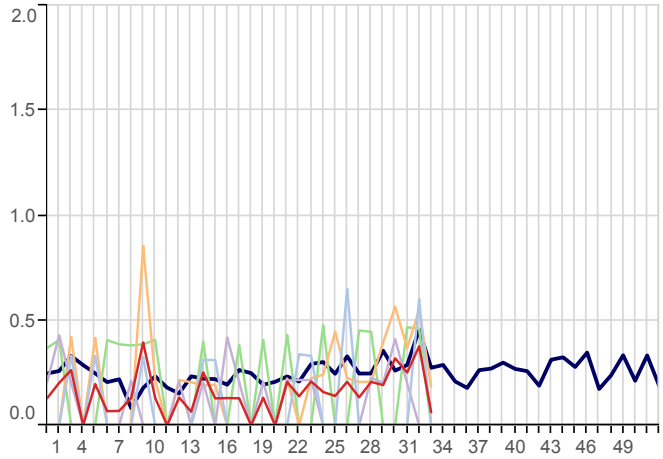


Rubella (ICD10: B06)
Weekly incidence (per 100,000 all ages) by region for 2017 compared with 5 year average

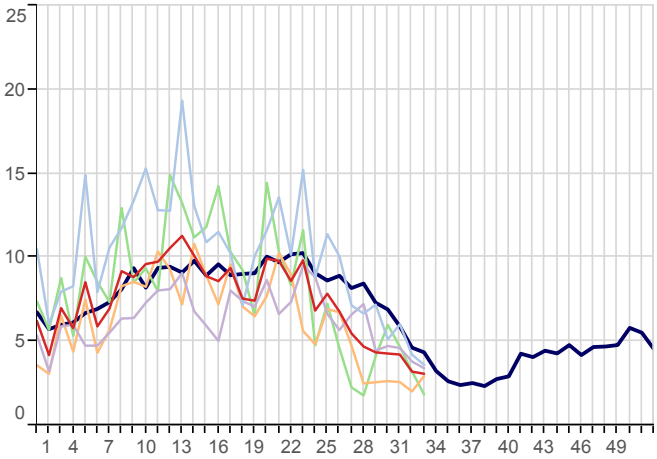


5. Skin Contagions

Bullous Dermatoses (ICD10: L10-L14)
Weekly incidence (per 100,000 all ages) by region for 2017 compared with 5 year average



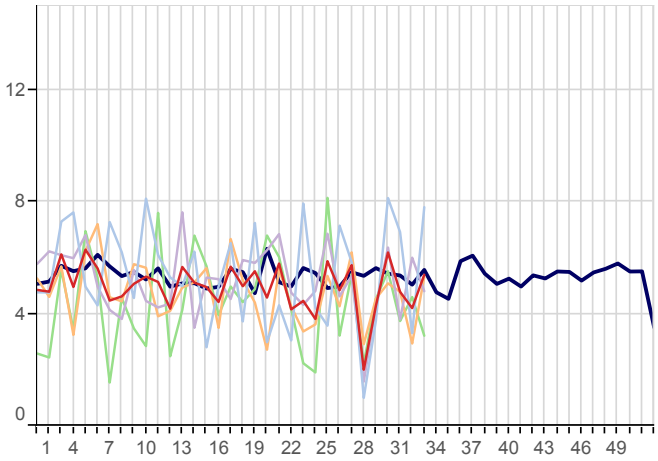
Chickenpox (ICD10: B01)
Weekly incidence (per 100,000 all ages) by region for 2017 compared with 5 year average



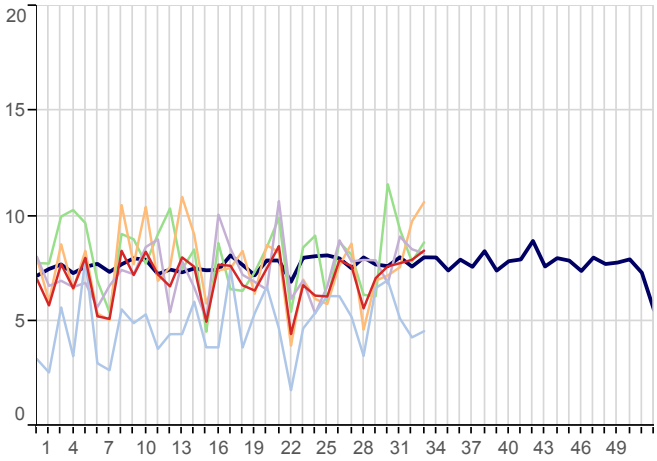
5. Skin Contagions (Continued)

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

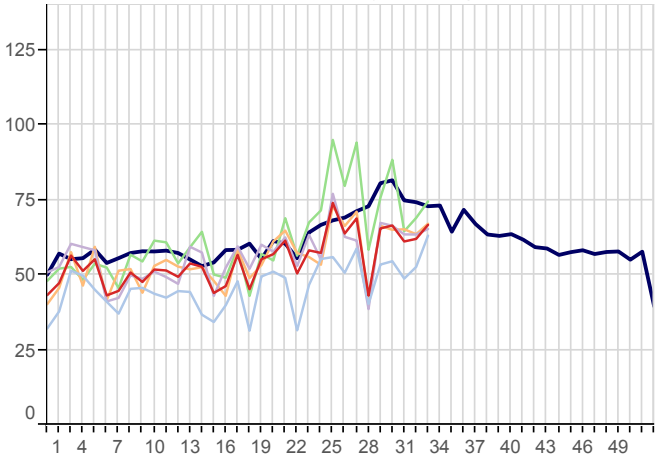
Herpes Simplex (ICD10: B00)
Weekly incidence (per 100,000 all ages) by region
for 2017 compared with 5 year average



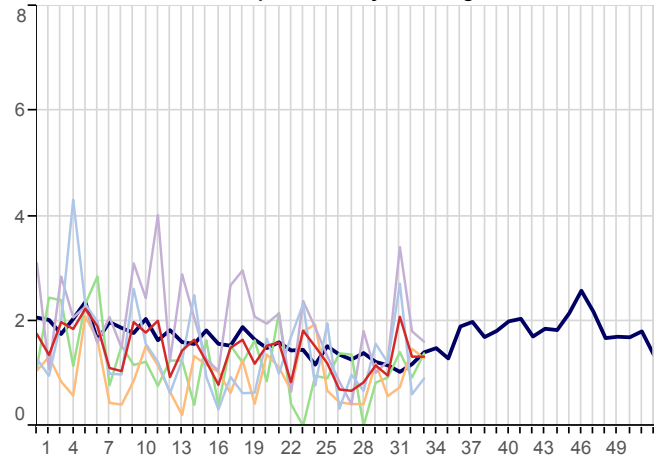
Herpes Zoster (ICD10: B02)
Weekly incidence (per 100,000 all ages) by region
for 2017 compared with 5 year average



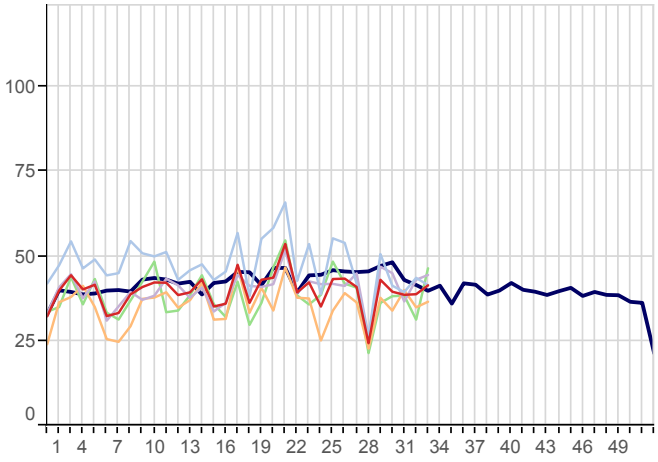
Infections of Skin & Subcutaneous Tissue (ICD10: L00-L08)
Weekly incidence (per 100,000 all ages) by region
for 2017 compared with 5 year average



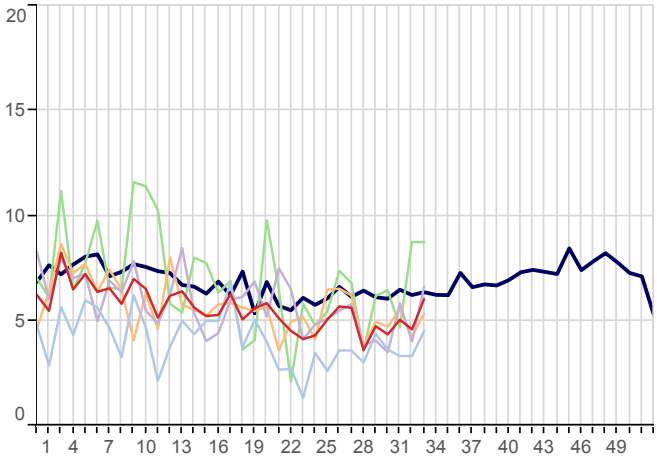
Scabies (ICD10: B86)
Weekly incidence (per 100,000 all ages) by region
for 2017 compared with 5 year average



Symptoms involving Skin & Oth Integument Tiss (ICD10: R20-R23)
Weekly incidence (per 100,000 all ages) by region
for 2017 compared with 5 year average



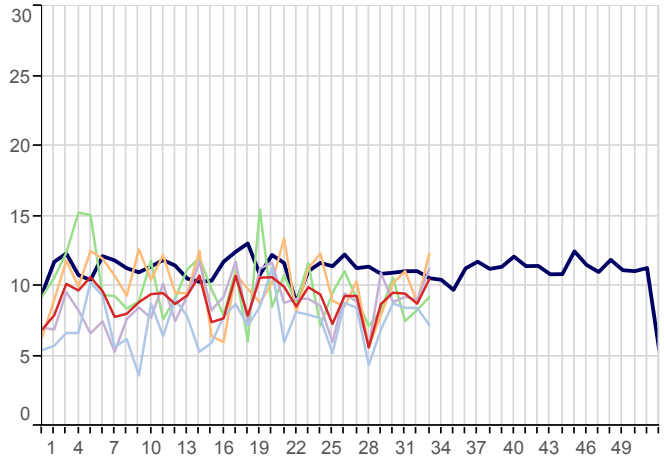
Impetigo (ICD10: L01)
Weekly incidence (per 100,000 all ages) by region
for 2017 compared with 5 year average



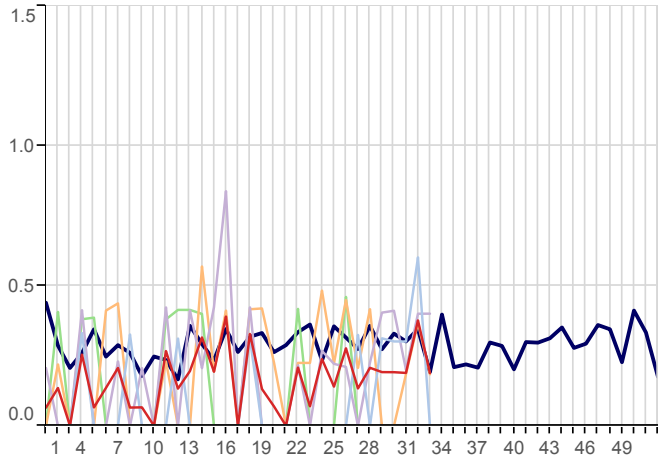
6. Disorders Affecting the Nervous System

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 2017 compared with 5 year average



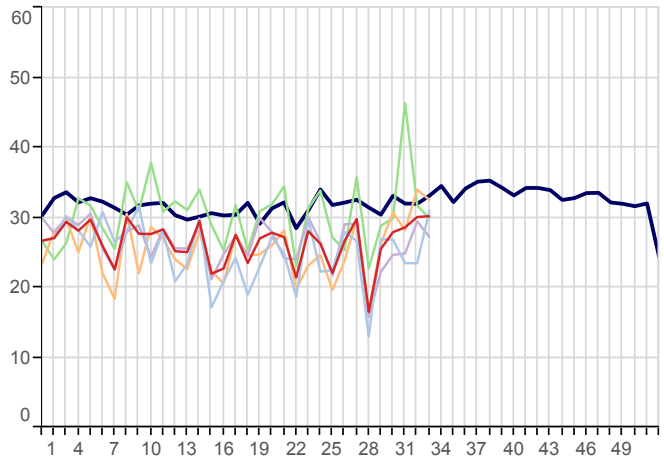
Meningitis/Encephalitis(ICD10: A170-A171,A390,A38-A85,A87,G00-G05)
Weekly incidence (per 100,000 all ages) by region
for 2017 compared with 5 year average



Symptoms Involving Nervous & Musculoskeletal (ICD10: R25-R29)
Weekly incidence (per 100,000 all ages) by region
for 2017 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 2017 compared with 5 year average



8. Tabular Summary by Disease

Week beginning / Week ending	14/08/2017 20/08/2017		07/08/2017 13/08/2017		31/07/2017 06/08/2017		24/07/2017 30/07/2017	
Disease Name	Rate	Numer	Rate	Numer	Rate	Numer	Rate	Numer
Allergic Rhinitis	6.0	96	7.1	113	8.4	133	8.7	137
Asthma	9.8	157	10.1	161	10.5	167	12.9	202
Acute Bronchitis	44.5	710	44.5	709	42.9	681	41.6	651
Bullous Dermatoses	0.1	1	0.4	6	0.3	4	0.3	5
Chickenpox	3.1	49	3.2	51	4.2	67	4.3	67
Common Cold	43.0	685	43.9	700	46.2	733	46.3	725
Conjunctival Disorders	20.6	328	20.2	322	19.4	308	20.1	315
Herpes Simplex	5.4	86	4.2	67	4.8	76	6.2	97
Herpes Zoster	8.3	133	7.9	126	7.7	123	7.6	119
Impetigo	6.0	96	4.6	73	5.0	80	4.3	68
Infectious Mononucleosis	0.4	7	0.4	7	0.4	7	0.6	9
Influenza-like illness	1.9	31	1.7	27	1.6	26	1.5	24
Infectious Intestinal Diseases	9.3	148	7.8	125	8.5	135	7.9	124
Laryngitis and Tracheitis	4.1	66	4.3	69	4.7	75	3.5	55
Lower Respiratory Tract Infections	46.7	744	46.3	738	45.3	719	43.5	682
Measles	0.0	0	0.0	0	0.0	0	0.0	0
Meningitis and Encephalitis	0.2	3	0.4	6	0.2	3	0.2	3
Mumps	0.1	1	0.3	4	0.2	3	0.2	3
Non-infective Enteritis and Colitis	9.2	147	9.6	153	8.7	138	8.2	128
Otitis Media Acute	14.6	233	13.7	219	15.6	248	15.8	248
Peripheral Nervous Disease	10.5	167	8.7	139	9.4	150	9.5	149
Pleurisy	0.8	13	0.7	11	0.7	11	1.1	17
Pneumonia and Pneumonitis	1.1	18	0.9	14	1.6	26	0.8	12
Respiratory System Diseases	184.0	2,933	184.7	2,944	194.2	3,084	191.9	3,005
Rubella	0.0	0	0.0	0	0.0	0	0.0	0
Scabies	1.3	21	1.3	21	2.1	33	1.0	15
Sinusitis	14.3	228	13.3	212	14.4	228	12.1	190
Skin and Subcutaneous Tissue Infections	66.7	1,063	62.0	988	61.1	971	66.5	1,041
Strep Throat and Peritonsillar Abscess	0.5	8	0.7	11	1.0	16	1.3	21
Symptoms involving musculoskeletal	4.2	67	4.3	68	3.8	60	4.2	66
Symptoms involving Respiratory and Chest	18.3	291	14.8	236	17.6	279	16.5	259
Symptoms involving Skin and Integument Tissues	41.4	660	38.8	618	38.6	613	39.5	619
Tonsillitis and acute Pharyngitis	34.2	545	36.5	582	37.0	588	39.9	625
Upper Respiratory Tract Infections	110.1	1,755	111.1	1,770	117.5	1,866	117.0	1,833
Urinary Tract Infections	30.2	481	30.1	479	28.6	454	27.9	437
Viral Hepatitis	0.1	2	0.2	3	0.3	4	0.4	6
Whooping Cough	0.1	2	0.5	8	0.1	2	0.1	2
Practice Count		**157**		**157**		**156**		**156**
Denom		**1,593,940**		**1,593,582**		**1,588,176**		**1,566,299**

FURTHER INFORMATION:

About the report

Summer focus

The first two pages of data within this report focus on the weekly incidence rates of Influenza-Like Illness, Allergic Rhinitis, Common Cold, and Infectious Intestinal Diseases.

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. 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, Scarlatina 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.

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.

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, relevance 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) since1964. 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 from the Health Research Authority (HRA), and, where relevant, HRA Confidential Advisory Group (CAG) 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:

RCGP Research & Surveillance Centre
CIRC, First floor
30 Euston Square
London NW1 2FB
Tel: +44 (0)203 188 7690

Medical Director: Professor Simon de Lusignan
MedicalDirectorRSC@rcgp.org.uk

RCGP Research & Surveillance Centre
University of Surrey
Section of Clinical Medicine and Ageing
GUILDFORD
GU2 7XH
Tel: +44 (0)1483 684802

Practice Liaison Officer: Ivelina Yonova
i.yonova@surrey.ac.uk
Tel: +44 (0)1483 682758