

# RSC Communicable and Respiratory Disease Report for England

Week Number / Year

34 / 2025

Population

18,049,399

Dates

18/08/2025 - 24/08/2025

No. Practices

1,731

#### **Notes**

All rates in this report are given per 100,000 population presenting in the week of the report. A rolling 5-year average rate is also provided as a historical comparison. Rates are provided for four regions (North, South, Midlands and East, and London). For acute respiratory infections, a breakdown by age group is also provided.

Rates are presented on a weekly basis, using ISO week numbers.

Please see page 20 for further explanatory notes on the data.

#### **Comments**

Overall rates of influenza-like illness (ILI) are stable in all regions and are around the seasonal average for this time of year (pages 3 to 5). ILI rates are now below the threshold across all age bands: see Table (E), page 5.

Rates of acute respiratory infections (ARI) remain stable at or below the seasonal average, page 7.

Rates of COVID-19 are stable in all regions, page 6

This report includes a respiratory virology update: see Graph (C), page 4.

Other comments:

- Rates of infected insect bites (page 14) have decreased compared with last week but remain above the seasonal average.
- Rates of measles (page 15) remain above the 5 year average.
- Rates of scabies (page 16) remain above the seasonal average.

## **Seasonal Focus**

In the "Change since last week" column, a change in rate of 5% to 10% is marked with a single arrow ( $^{\diamond}$  or  $^{\diamond}$ ), while a change of more than 10% is marked with a double arrow ( $^{\diamond}$  or  $^{\diamond}$ ). A flat line ( $^{\leftarrow}$ ) indicates the rate was stable, changing less than 5%.

### Region Breakdown

	Acute	respirato (AR	ry infections I)	Influe	enza-like	illness (ILI)	Exacerbations of chronic lung disease (ECLD)			
	This week	Last week	Change since last week	This week	Last week	Change since last week	This week	Last week	Change since last week	
London	93.9⊠	96.8	<del>-</del> -2.9	1.4🛭	1.6	<b>&gt;</b> −0.2	6.0🛚	6.0🛚	<del>-</del> 0.0	
Midlands And East	126.7⊠	134.8	<b>∨</b> -8.1	0.9🛚	1.2🛭	<b>&gt;</b> −0.3	11.5⊠	10.5🛭	<b>☆</b> 1.1	
North	153.9⊠	157.7🛭	<del>-</del> -3.7	1.0⊠	1.1🛭	<del>-</del> 0.0	14.9⊠	14.3🛭	<del>-</del> 0.6	
South	113.3🛭	111.5🛭	<b>-</b> 1.8	1.2🛚	1.0🛚	<b>☆</b> 0.3	8.8	8.08	≈ 0.8	
National	122.6	125.9	<del>-</del> -3.3	1.2	1.2	- 0.0	10.4	9.8	<b>^</b> 0.6	
	Lower respiratory tract infections (LRTI)			Upper respiratory tract infections (URTI)			COVID-19			
	This week	Last week	Change since last week	This week	Last week	Change since last week	This week	Last week	Change since last week	
London	22.5🛚	22.6	<b>-</b> -0.1	67.7⊠	68.5🛚	<del>-</del> -0.8	1.0🛭	1.4🛚	<b>&gt;</b> −0.4	
Midlands And East	40.0⊠	43.8	<b>∨</b> -3.8	78.9⊠	83.9🛚	<b>∨</b> -5.1	1.0🛚	1.6	<b>&gt;</b> −0.6	
North	52.2🛭	55.3🛚	<b>∨</b> -3.1	92.4🛭	95.0⊠	<del>-</del> -2.6	1.2🛭	1.6	<b>&gt;</b> −0.3	

72.4

77.9

70.8

79.6

<del>-</del> 1.6

1.6

1.3

2.1

1.7

**>** −0.5

**⇒** -0.5

#### Age Group Breakdown

35.71

38.1

36.2

40.2

<del>-</del> -0.5

**∨** -2.1

South

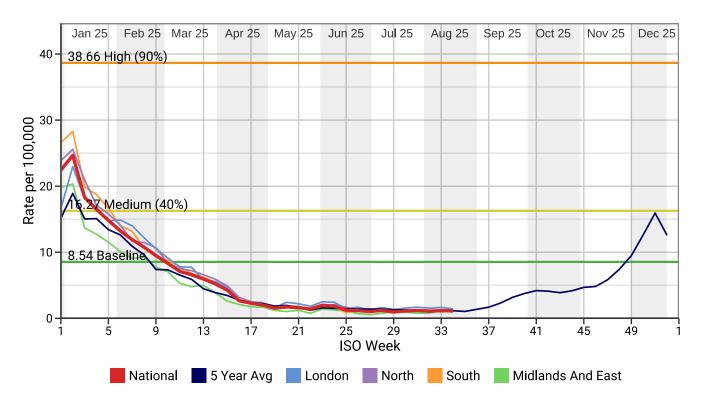
National

	Acute respiratory infections (ARI)			Influ	enza-like	illness (ILI)	Exacerbations of chronic lung disease (ECLD)			
	This week	Last week	Change since last week	This week	Last week	Change since last week	This week	Last week	Change since last week	
<1yr	501.7🛚	532.1🛭	<b>∨</b> -30.4	0.7🛚	0.0	<b>☆</b> 0.7	0.7🛚	0.0	<b>☆</b> 0.7	
1-4yrs	324.7⊠	341.1⊠	<del></del> -16.3	0.0	1.1🛭	<b>&gt;</b> −1.1	0.3🛭	0.7🛚	<b>&gt;</b> −0.4	
5-14yrs	97.0⊠	94.18	<del>-</del> 2.9	0.3🛭	0.21	<b>☆</b> 0.1	1.2🛭	1.2🛚	<del>-</del> 0.0	
15-64yrs	98.0⊠	100.3🛭	<del>-</del> -2.2	1.4🛭	1.4🛭	<del>-</del> 0.0	7.8	6.9⊠	<b>☆</b> 0.9	
65+yrs	166.7⊠	173.9⊠	<del>-</del> -7.1	1.0🛚	1.0⊠	<del>-</del> 0.0	28.7🛚	28.3⊠	<del>-</del> 0.4	
All ages	122.6	125.9	<del>-</del> -3.3	1.2	1.2	<b>-</b> 0.0	10.4	9.8	<b>^</b> 0.6	
	Lower re	spiratory t (LRT	tract infections I)	Upper re	spiratory t (URT	tract infections I)	COVID-19			
	This week	Last week	Change since last week	This week	Last week	Change since last week	This week	Last week	Change since last week	
<1yr	58.6	80.6	<b>&gt;</b> −22.0	461.5⊠	483.5⊠	<del></del> -21.9	9.2🛚	7.0🛚	<b>☆</b> 2.2	
1-4yrs	40.8	41.9⊠	<del></del> -1.1	304.6	318.5🛭	<del></del> -13.9	0.1🛭	0.3🛭	<b>&gt;</b> −0.1	
5-14yrs	8.2🛭	8.0🛚	<del>-</del> 0.2	88.6	87.6	<del>-</del> 1.0	0.1🛭	0.1🛭	<b>^</b> 0.0	
15-64yrs	26.5🛚	27.8	<del></del> -1.2	66.0⊠	67.6	<del></del> -1.5	1.1🛭	1.4🛭	<b>&gt;</b> −0.3	
65+yrs	98.5🛚	103.9🛚	<b>∨</b> -5.4	46.6	47.7⊠	<del>-</del> -1.0	2.4🛚	3.8	<b>&gt;</b> −1.4	
All ages	38.1	40.2	<b>∨</b> −2.1	77.9	79.6	<del></del> -1.7	1.3	1.7	<b>⇒</b> -0.5	

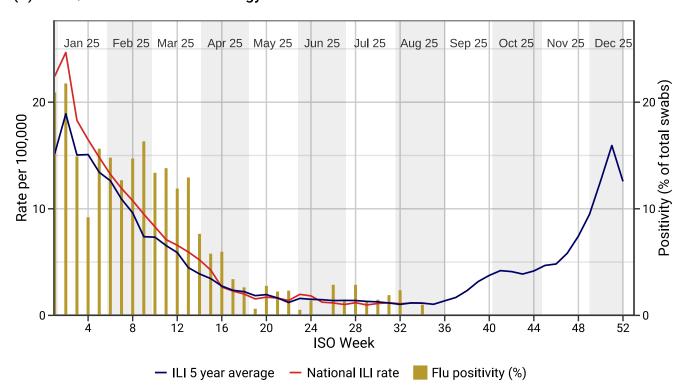
## 2024/25 Focus

#### (A) Influenza-like Illness: national incidence rate by region

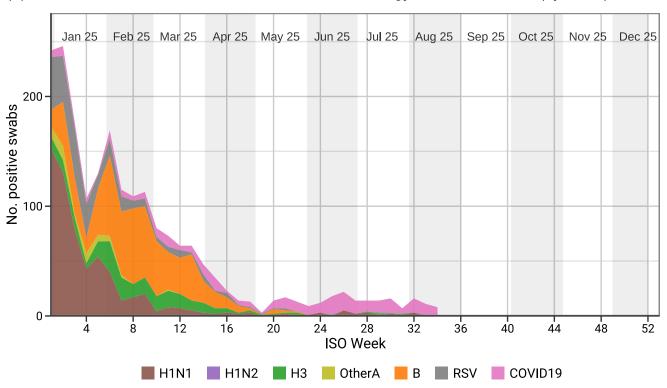
The horizontal lines in the following graph are thresholds derived from the Moving Epidemic Method (MEM) model. See p20 for more information.



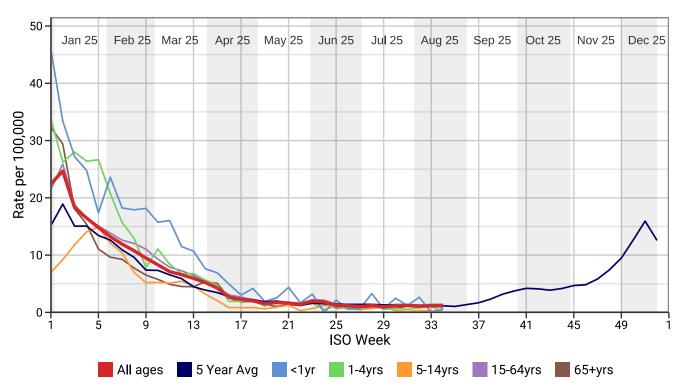
#### (B) RCGP/UKHSA influenza virology swab surveillance



### (C) RCGP/UKHSA RSV, influenza and SARS-CoV-2 virology swab surveilance (by strain)



### (D) Influenza-like Illness: national incidence rate by age band



#### (E) Influenza-like Illness: national incidence rate by age band

This table shows the level of intensity of ILI by age band. MEM thresholds have been calculated separately for each age band - thresholds are shown in the second table. Refer to page 19 for more information.

	51	52	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
1-4yrs	39.4	31.9	33.8	26.2	28.0	26.4	26.6	20.7	15.7	12.9	7.9	11.1	8.4	6.7	6.8	5.6	4.8	1.9
5-14yrs	16.0	9.2	7.0	9.2	11.8	14.0	14.9	12.1	10.4	7.0	5.2	5.2	5.1	5.4	4.7	3.2	2.0	0.8
15-64yrs	19.4	14.8	21.5	25.9	18.8	16.5	15.1	13.8	12.6	12.0	11.1	9.3	7.9	7.3	6.5	5.5	4.4	3.0
65+yrs	17.3	21.0	32.3	29.4	18.1	15.4	11.1	9.6	9.3	7.7	6.5	5.8	4.9	4.5	4.5	5.4	5.1	2.5
All ages	19.6	16.2	22.4	24.7	18.3	16.5	14.8	13.2	11.9	10.8	9.5	8.3	7.1	6.6	5.9	5.2	4.3	2.7
	17	18	19	20	21	22	23	24	25	26	27	28 :	29	30	31	32	33	34
1-4yrs	1.9	2.1	1.0	2.0	1.5	1.6	1.6	0.5	1.2	0.6	0.5	1.3	0.5	0.7	0.5	0.8	1.1	0.0
5-14yrs	0.8	0.8	0.6	0.9	1.3	0.3	0.7	1.2	1.0	0.8	0.5	0.7	0.9	0.3	0.2	0.3	0.2	0.3
15-64yrs	2.7	2.2	1.8	2.0	1.7	1.6	2.2	2.1	1.4	1.4	1.3	1.3	1.1	1.4	1.4	1.3	1.4	1.4
								4 -	0.0	0.0	0.6	0.0	0.7	0.6	1 1	0.0	4.0	10
65+yrs	1.8	1.9	1.4	1.0	1.3	1.2	2.0	1.5	0.8	0.8	0.6	0.9	U./	0.6		0.9	1.0	1.0

	Below Threshold	Threshold to Medium	Medium to High	High to Very High	Above Very High
1-4yrs	<7.9	7.9 to 12.6	12.6 to 26.2	26.2 to 36.1	36.1+
5-14yrs	<5.4	5.4 to 10.7	10.7 to 26.6	26.6 to 39.9	39.9+
15-64yrs	<9.8	9.8 to 17.9	17.9 to 43.0	43.0 to 63.4	63.4+
65+yrs	<9.3	9.3 to 15.0	15.0 to 38.8	38.8 to 59.0	59.0+
All Ages	<8.54	8.54 to 16.27	16.27 to 38.66	38.66 to 56.68	56.68+

#### (F) Acute Bronchitis and Bronchiolitis: national incidence rate by age band

Children under 1 year old are omitted from the following graph.

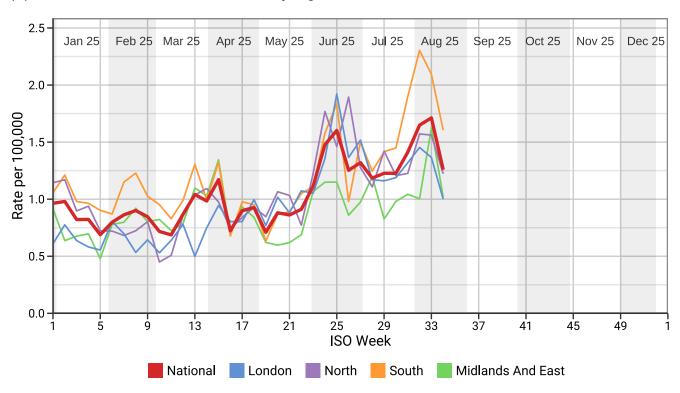


#### Weekly incidence rates of influenza-like illness, and acute bronchitis and bronchiolitis (per 100,000)

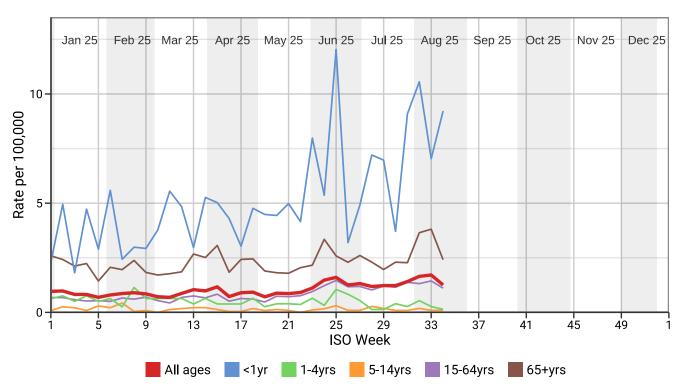
	Influenza-like illness (ILI)	ARI-Bronchitis and Bronchiolitis
<1yr	0.7🛚	23.7🛚
1-4yrs	0.0	4.6
5-14yrs	0.3🛚	0.0
15-24yrs	1.1🛭	0.4🛚
25-44yrs	1.6	0.4🛭
45-64yrs	1.4🛚	0.9🛚
65-74yrs	0.6	1.1🛭
75-84yrs	1.8	2.3🛚
85+yrs	0.2🛚	1.6
All ages	1.2🛚	1.0🛚

	Influenza-like illness (ILI)	ARI-Bronchitis and Bronchiolitis
London	1.4🛚	0.6
Midlands And East	0.9🛭	1.2
North	1.0🛚	1.2
South	1.2🛭	1.0🛚
National	1.2🛚	1.0🛚

#### (G) COVID-19: national incidence rate by region

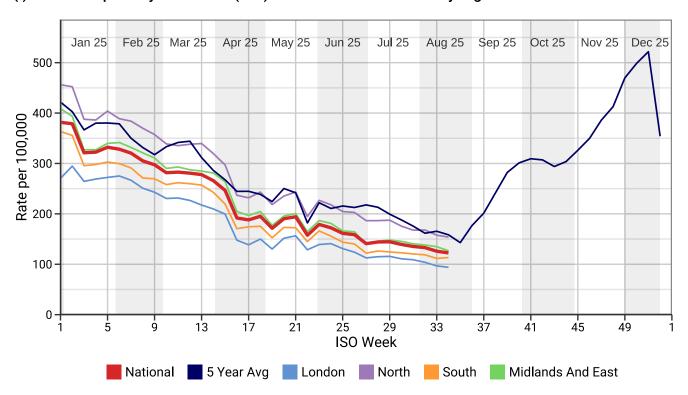


### (H) COVID-19: national incidence rate by age band



## 1. Respiratory Infections

#### (I) Acute Respiratory Infections (ARI): national incidence rate by region



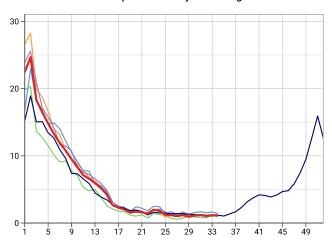
### (J) Acute Respiratory Infections (ARI): national incidence rate by age band



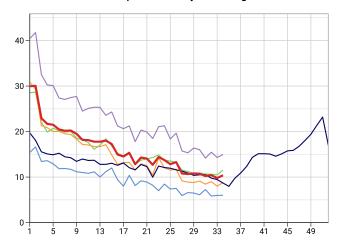
#### Respiratory Infections - by region

## National London South 5 Year Avg North Midlands And East

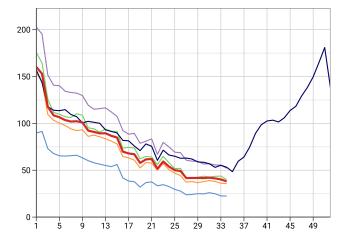
## Influenza-like illness (ILI) Weekly incidence (per 100,000 all ages) by region for 2024/25 compared with 5 year average



Exacerbations of Chronic Lung Disease (ECLD)
Weekly incidence (per 100,000 all ages) by region for 2024/25
compared with 5 year average



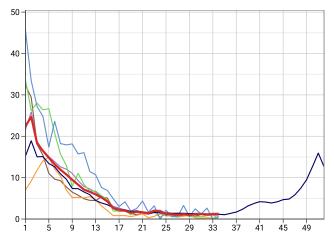
Lower Respiratory Tract Infections (LRTI)
Weekly incidence (per 100,000 all ages) by region for 2024/25
compared with 5 year average



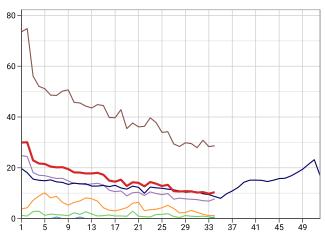
#### Respiratory Infections - by age band



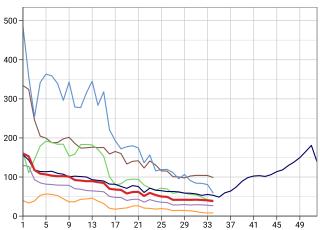
Influenza-like illness (ILI)
Weekly incidence (per 100,000 all ages) by age band for
2024/25 compared with 5 year average



Exacerbations of Chronic Lung Disease (ECLD)
Weekly incidence (per 100,000 all ages) by age band for
2024/25 compared with 5 year average



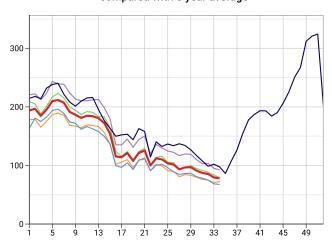
Lower Respiratory Tract Infections (LRTI)
Weekly incidence (per 100,000 all ages) by age band for
2024/25 compared with 5 year average



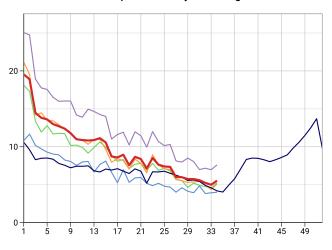
#### Respiratory Infections - by region

## National London South 5 Year Avg North Midlands And East

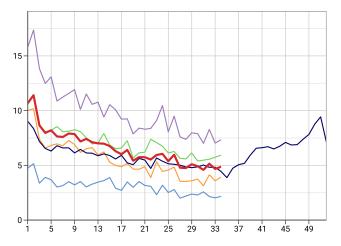
## Upper Respiratory Tract Infections (URTI) Weekly incidence (per 100,000 all ages) by region for 2024/25 compared with 5 year average



ECLD - Asthma Exacerbations Weekly incidence (per 100,000 all ages) by region for 2024/25 compared with 5 year average



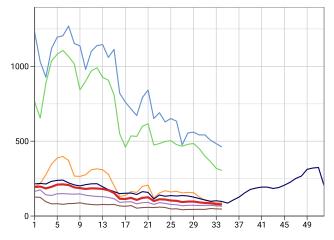
ECLD - COPD Exacerbations Weekly incidence (per 100,000 all ages) by region for 2024/25 compared with 5 year average



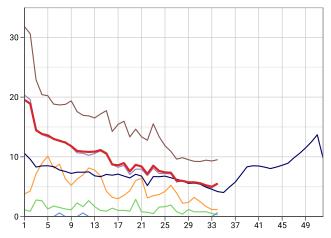
#### Respiratory Infections - by age band



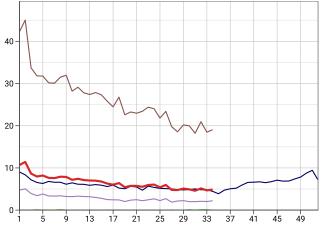
Upper Respiratory Tract Infections (URTI)
Weekly incidence (per 100,000 all ages) by age band for
2024/25 compared with 5 year average



ECLD - Asthma Exacerbations Weekly incidence (per 100,000 all ages) by age band for 2024/25 compared with 5 year average



ECLD - COPD Exacerbations Weekly incidence (per 100,000 all ages) by age band for 2024/25 compared with 5 year average



## Respiratory Infections - by region Respiratory Infections - by age band National London South All ages 5-14yrs 65+yrs 5 Year Avg North Midlands And East 5 Year Avg 1-4yrs 15-64yrs LRTI - Pneumonia LRTI - Pneumonia Weekly incidence (per 100,000 all ages) by region for 2024/25 Weekly incidence (per 100,000 all ages) by age band for compared with 5 year average 2024/25 compared with 5 year average 25 20 15 10 2 25 **LRTI - Acute Bronchitis LRTI - Acute Bronchitis** Weekly incidence (per 100,000 all ages) by region for 2024/25 Weekly incidence (per 100,000 all ages) by age band for 2024/25 compared with 5 year average compared with 5 year average 25 37 41 37 **LRTI - Bronchiolitis LRTI - Bronchiolitis** Weekly incidence (per 100,000 all ages) by region for 2024/25 Weekly incidence (per 100,000 all ages) by age band for 2024/25 compared with 5 year average compared with 5 year average 300 200 100

17 21 25 29 33 37

13

25

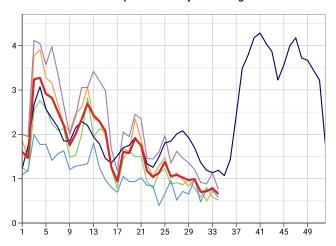
29 33

21

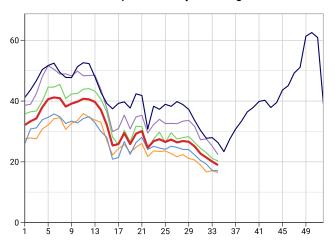
#### Respiratory Infections - by region

## National London South 5 Year Avg North Midlands And East

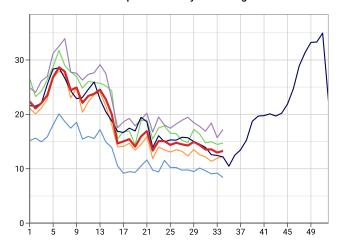
#### URTI - Croup Weekly incidence (per 100,000 all ages) by region for 2024/25 compared with 5 year average



URTI - Tonsillitis/Pharyngitis
Weekly incidence (per 100,000 all ages) by region for 2024/25
compared with 5 year average



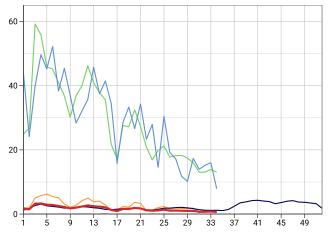
URTI - Otitis Media Weekly incidence (per 100,000 all ages) by region for 2024/25 compared with 5 year average



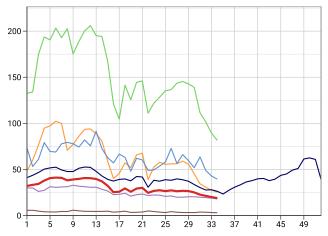
#### Respiratory Infections - by age band



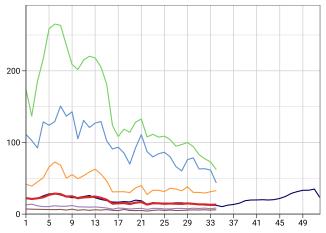
URTI - Croup Weekly incidence (per 100,000 all ages) by age band for 2024/25 compared with 5 year average



URTI - Tonsillitis/Pharyngitis
Weekly incidence (per 100,000 all ages) by age band for
2024/25 compared with 5 year average



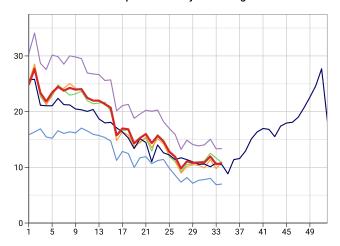
URTI - Otitis Media Weekly incidence (per 100,000 all ages) by age band for 2024/25 compared with 5 year average



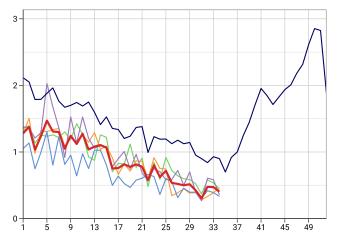
#### Respiratory Infections - by region

## National London South 5 Year Avg North Midlands And East

#### URTI - Sinusitis Weekly incidence (per 100,000 all ages) by region for 2024/25 compared with 5 year average



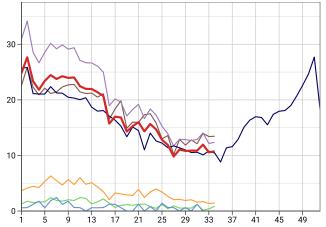
URTI - Laryngitis
Weekly incidence (per 100,000 all ages) by region for 2024/25
compared with 5 year average



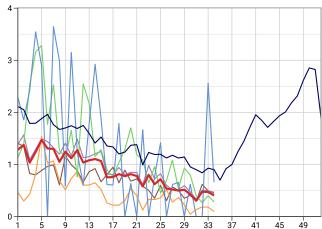
#### Respiratory Infections - by age band



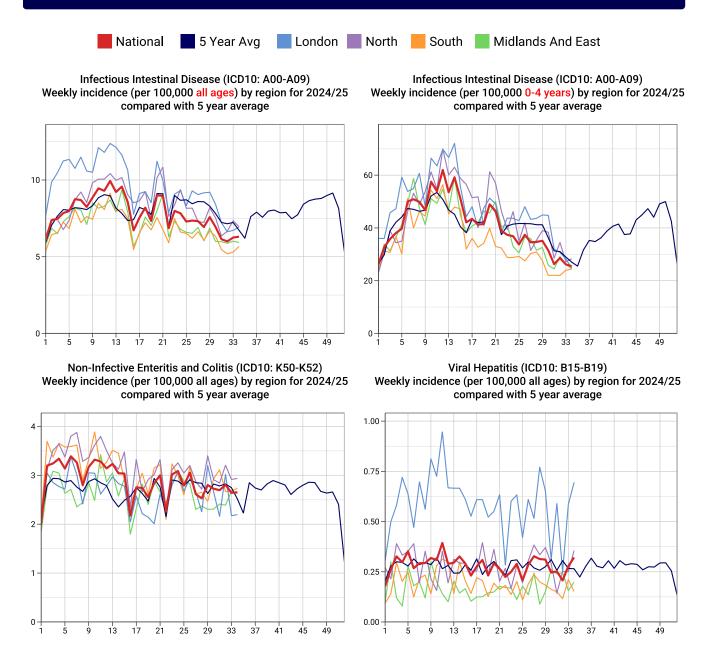
URTI - Sinusitis Weekly incidence (per 100,000 all ages) by age band for 2024/25 compared with 5 year average



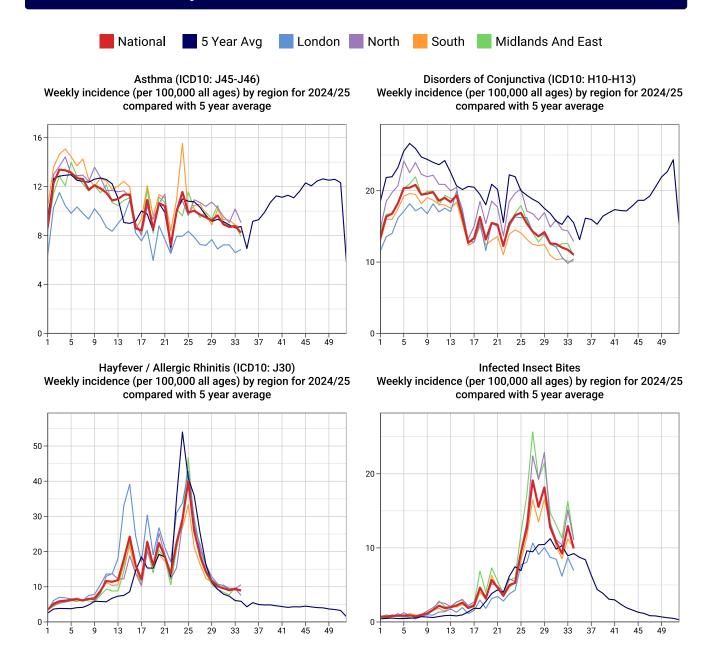
URTI - Laryngitis Weekly incidence (per 100,000 all ages) by age band for 2024/25 compared with 5 year average



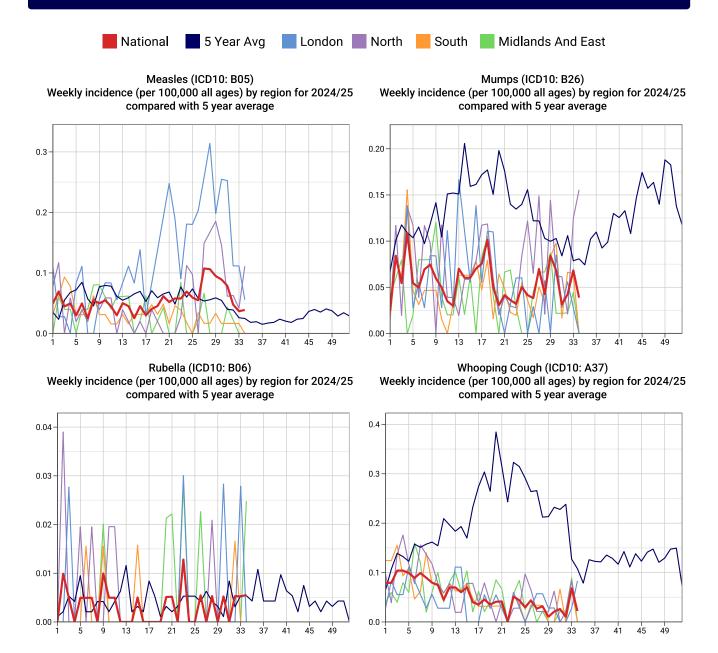
## 2. Water and Food Borne Disorders



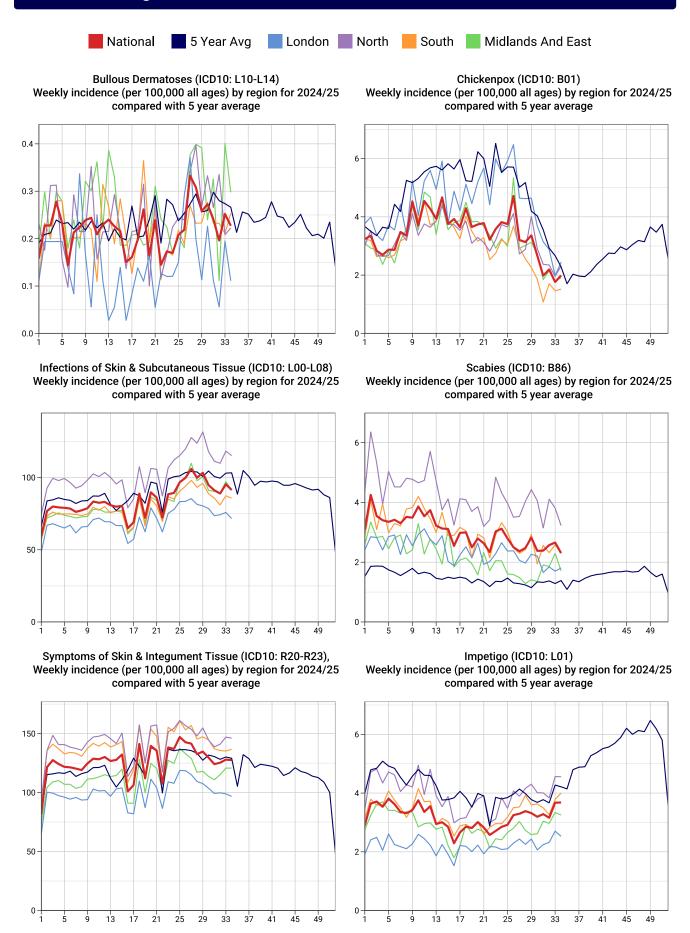
## 3. Environmentally Sensitive Disorders

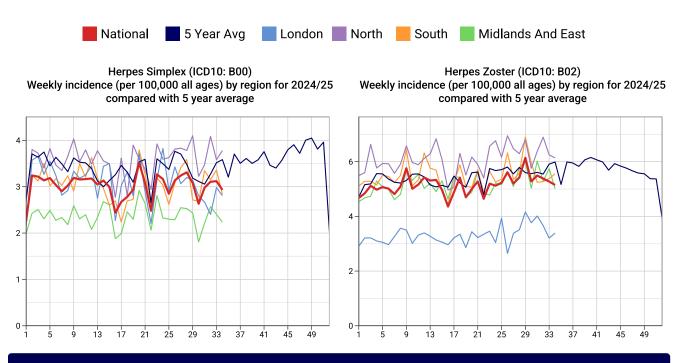


## **4. Vaccine Sensitive Disorders**



## 5. Skin Contagions

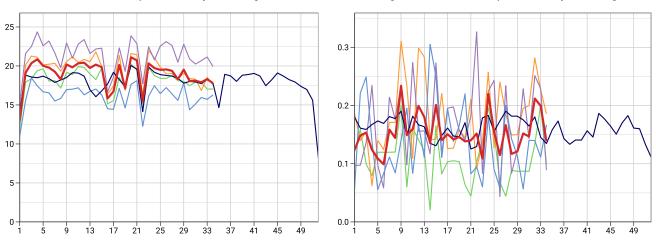




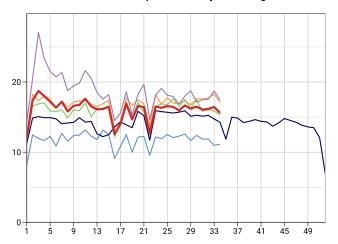
## 6. Disorders Affecting the Nervous System

Disorders of Peripheral Nervous System (ICD10: G50-G64,G70-G72), Weekly incidence (per 100,000 all ages) by region for 2024/25 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 2024/25 compared with 5 year average



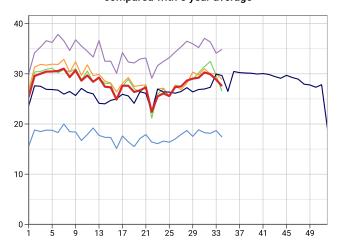
Symptoms of Nervous & Musculoskeletal Systems (ICD10: R25-R29), Weekly incidence (per 100,000 all ages) by region for 2024/25 compared with 5 year average



## 7. Genitourinary System Disorders

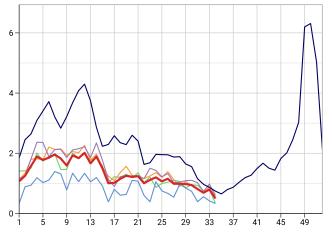


Urinary Tract Infection/Cystitis (ICD10: N30,N390)
Weekly incidence (per 100,000 all ages) by region for 2024/25
compared with 5 year average

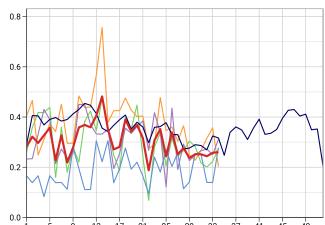


## 8. Other Disorders

Strep Sore Throat, Scarlatina and Peritonsillar Abscess (ICD10: A38,J020,J36), Weekly incidence (per 100,000 all ages) by region for 2024/25 compared with 5 year average



Infectious Mononucleosis (ICD10: B27)
Weekly incidence (per 100,000 all ages) by region for 2024/25
compared with 5 year average



## 9. Tabular Summary by Disease

	Week 31	Week 32	Week 33	Week 34
Dates	28/07/2025 - 03/08/2025	04/08/2025 - 10/08/2025	11/08/2025 - 17/08/2025	18/08/2025 - 24/08/2025
Population	19,065,083	18,862,601	19,039,700	18,049,399
Practice Count	1,803	1,787	1,811	1,731

	Wee	ek 31	Wee	ek 32	Wee	ek 33	Wee	ek 34
Disease	Rate	Count	Rate	Count	Rate	Count	Rate	Count
Acute Bronchitis	0.7	140	0.7	124	0.7	138	0.7	126
Acute Respiratory Infections (ARI)	135.3	25,789	133.0	25,084	125.9	23,966	122.6	22,121
Allergic Rhinitis	9.6	1,830	9.0	1,698	9.4	1,792	9.0	1,618
Asthma	8.9	1,700	8.7	1,642	8.8	1,670	8.2	1,487
Bronchiolitis	0.6	107	0.6	106	0.5	100	0.3	63
Bullous Dermatoses	0.2	46	0.2	37	0.3	48	0.2	41
COVID-19	1.4	269	1.6	311	1.7	326	1.3	227
Chickenpox	2.0	378	2.2	414	1.8	336	2.0	359
Conjunctival Disorders	12.5	2,389	12.0	2,272	11.7	2,232	11.0	1,992
Croup	0.7	134	0.7	135	0.8	150	0.7	118
ECLD - COPD exacerbations	4.6	875	5.1	971	4.7	890	4.9	880
ECLD - asthma exacerbations	5.6	1,065	5.2	988	5.0	950	5.5	999
Exacerbations of chronic lung disease (ECLD)	10.2	1,950	10.4	1,966	9.8	1,864	10.4	1,875
Herpes Simplex	3.0	568	3.1	586	3.1	594	2.9	529
Herpes Zoster	5.5	1,047	5.4	1,015	5.3	1,004	5.1	929
Impetigo	3.3	626	3.2	596	3.7	699	3.7	664
Infected Insect Bites	10.8	2,063	9.2	1,739	12.9	2,464	9.9	1,791
Infectious Intestinal Diseases	6.1	1,171	6.0	1,131	6.3	1,190	6.3	1,138
Infectious Mononucleosis	0.3	48	0.2	46	0.3	49	0.3	47
Influenza-like Illness (ILI)	1.2	226	1.1	206	1.2	221	1.2	209
Laryngitis	0.3	58	0.5	90	0.5	90	0.4	73
Lower respiratory tract infections (LRTI)	42.1	8,024	41.3	7,796	40.2	7,660	38.1	6,885
Measles	0.1	15	0.0	9	0.0	7	0.0	7
Meningitis and Encephalitis	0.1	28	0.2	40	0.2	38	0.1	25
Mumps	0.0	6	0.0	8	0.1	13	0.0	7
Non-infective Enteritis and Colitis	2.7	514	2.8	529	2.6	503	2.7	479
Peripheral Nervous Disease	18.1	3,453	17.9	3,377	18.3	3,488	17.8	3,209
Pneumonia	2.6	496	2.4	454	2.5	479	2.2	395
Rubella	0.0	0	0.0	1	0.0	1	0.0	1
Scabies	2.4	455	2.6	485	2.7	506	2.3	416
Sinusitis	10.9	2,072	11.9	2,254	10.6	2,012	10.7	1,939
Skin and Subcutaneous Tissue Infections	91.2	17,380	89.0	16,781	95.3	18,152	91.4	16,503
Strep Throat and Peritonsillar Abscess	0.8	155	0.7	130	0.8	152	0.5	90
Symptoms involving Skin and Integument Tissues	124.1	23,668	125.3	23,640	128.0	24,365	127.6	23,024
Symptoms involving musculoskeletal	16.1	3,064	16.2	3,050	16.4	3,131	15.6	2,815
Tonsillitis and Pharyngitis	22.7	4,330	21.4	4,039	20.1	3,824	18.9	3,414
Upper respiratory tract infections (URTI)	87.1	16,613	85.4	16,115	79.6	15,153	77.9	14,062
Urinary Tract Infections	30.3	5,773	29.9	5,644	28.8	5,492	27.5	4,972
Viral Hepatitis	0.3	48	0.2	39	0.3	53	0.3	58
Whooping Cough	0.0	5	0.0	2	0.1	13	0.0	4

### **Further Information**

#### Focus on winter respiratory infections and infections with epidemic or pandemic infection

A key role of the RSC is to monitor conditions that cause winter pressures on the NHS, as well as provide early warnings of outbreaks, epidemics, and pandemics. The RSC has been collecting data on infections since 1957, conducting sentinel surveillance since 1967 (with virology added in 1993), and serosurveillance from 2000.

Pages 2-6 of this report focus on influenza-like illness (ILI), virology data, and acute respiratory infections (ARI). ILI is the name given to clinically identified flu cases, around half of which will be due to the influenza virus (the other half will be due to other viruses).

#### Measuring the level of circulating influenza

The level of influenza-like illness (ILI) is reported using intensity thresholds (Graph A, page 2 and Table E, page 4). These are calculated using the Moving Epidemic Method (MEM). MEM works by identifying seasonal epidemic peaks and then calculating a baseline threshold and intensity levels based on pre- and post-epidemic rates. This provides a better measure of severity of ILI than simply comparing it to the five-year average rate.

The MEM intensity levels for ILI are defined as follows:

Threshold to Medium Below 40% percentile

Medium to High From 40% to below 90% percentile
High to Very High From 90% to below 97.5% percentile

Above Very High At or above 97.5% percentile

The MEM methodology is used by the UK Health Security Agency (UKHSA) and by the European Centre for Disease Prevention and Control (ECDC) to standardise reporting of influenza activity.

More information about MEM can be found at:

https://www.ecdc.europa.eu/en/news-events/acute-respiratory-infections-eueea-epidemiological-update-and-current-public-health

#### Rate of monitored conditions

Our monitored conditions are reported as the number of new cases each week per 100,000 population. We refer to this as the 'weekly incidence'. All conditions are shown with males and females combined.

The report's population, also called the denominator, is the registered population of RSC practices who share anonymised data for this report. The denominator varies weekly as patients register and deregister; additionally, a practice's data may not be included if there is an issue with data extraction.

#### Five-year averages

In addition to weekly incidence rates, we plot a five-year average for most conditions. Previously a ten-year average was used, but this window was shortened to reflect faster changes in seasonal variations and therefore enable a more meaningful comparison to relevant historic trends. COVID-19 pandemic years are excluded from this calculation for some conditions.

#### Regional rates of monitored conditions

In addition to a national rate, we present regional rates for all monitored conditions for four regions of England. The four RSC regions are aggregated NHS regions:

North NHS North East and Yorkshire, and North West regions

Midlands and East NHS East of England and Midlands regions

South NHS South East and South West regions

**London** NHS London region

#### Reporting of acute respiratory infections (ARI) by age band

In addition to regional rates, we report rates by age band for ARI. We display five age bands: those aged under 1 year, 1-4 years, 5-14 years, 15-64 years, and those aged 65 years and over. We subdivide ARI into four categories:

- influenza-like illness (ILI);
- exacerbations of chronic lung disease (ECLD), mainly asthma and chronic obstructive pulmonary disease (COPD);
- lower respiratory tract infections (LRTI), including bronchitis and pneumonia;
- upper respiratory tract infections (URTI), including tonsilitis and sinusitis.

More information about our classification of ARI can be found at:

https://www.eurosurveillance.org/content/10.2807/1560-7917.ES.2024.29.35.2300682

### **About the RCGP Research and Surveillance Centre (RSC)**

#### What we do

Established in 1957, the Oxford-Royal College of General Practitioners (RCGP) Research and Surveillance Centre (RSC) 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 provides weekly reports about health and disease: the Weekly Returns Service (WRS). The WRS has been produced since 1967, in collaboration with the UK Health Security Agency (UKHSA) and its predecessor bodies. The University of Oxford currently provides the WRS on behalf of RCGP and UKHSA.

The RSC is active in research and surveillance. In addition to the WRS, the RSC contributes data to UKHSA's Syndromic Surveillance system, and supports vaccine effectiveness studies. The role of general practice members of the RSC is set out in an annual commissioning letter.

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

www.rcgp.org.uk/representing-you/research-at-rcgp/research-surveillance-centre

#### Our data extraction process and governance

Data are extracted on behalf of the RSC from practice computerised medical record systems, twice a week by Magentus Data Management, or daily by EMIS-X Analytics (EXA).

Data are pseudonymised as close to source as possible. Data are held on secure servers at the Nuffield Department of Primary Care Health Sciences (NDPCHS) at the University of Oxford. Our systems meet the requirements of the General Data Protection Regulation (GDPR). Further information about the NHS England approval of the RSC's data security can be found at:

https://www.dsptoolkit.nhs.uk/OrganisationSearch/EE133863-MSD-NDPCHS

#### What the data is used for

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.

In addition to the WRS, the data are 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.

#### Get in touch

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

Director: Professor Simon de Lusignan (Simon.DeLusignanPA@phc.ox.ac.uk)

RCGP Research and Surveillance Centre Policy, Research and Campaigns Royal College of General Practitioners 30 Euston Square London, NW1 2FB Tel: 020 3188 7400 Nuffield Department of Primary Care Health Sciences Gibson Building Radcliffe Observatory Quarter Woodstock Road Oxford, OX2 6GG Tel: 01865 617855



