RESEARCH & SURVEILLANCE CENTRE

RSC Communicable and Respiratory Disease Report for England

Week Number / Year	Population
40 / 2025	**18,463,320**
Dates	**No. Practices**
29/09/2025 - 05/10/2025	**1,760**

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

Rates of acute respiratory illness (ARI) continue to increase this week in all regions, page 7.

Rates of influenza-like illness (ILI) also continue to climb nationally and are a little above the rates expected for this time of the year, pages 3 to 4. However, ILI incidence rates by age band remain within the MEM threshold, page 5.

Rates of COVID-19 continue to increase nationally, although rates again may have peaked in the very young <1, page 6.

Of note, rates of exacerbation in chronic lung disease (ECLD), page 8; ECLD – asthma exacerbation, page 9; ECLD – COPD exacerbation, page 9; URTI – sinusitis, page 12 all remain above the seasonal average for this time of year.

Other comments:

• Rates of measles (page 15) and scabies (page 16) remain above the seasonal average.

• Rates of meningitis/ encephalitis (page 17) and symptoms of nervous & musculoskeletal systems (page 17) remain above the seasonal average.

• Rates of urinary tract infection/ cystitis (page 18) 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 (^ or v), while a change of more than 10% is marked with a double arrow (^^ or vv). A flat line (—) indicates the rate was stable, changing less than 5%.

Region Breakdown

	Acute respiratory infections (ARI)			Influenza-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	190.1	175.5	^ 14.5	4.0	3.6	^^ 0.4	10.3	8.9	^^ 1.4
Midlands And East	260.6	235.0	^^ 25.6	3.5	3.1	^^ 0.4	19.2	16.5	^^ 2.7
North	312.2	281.0	^^ 31.3	5.8	3.7	^^ 2.1	27.5	22.9	^^ 4.6
South	212.2	185.7	^^ 26.5	3.6	2.9	^^ 0.7	17.0	14.0	^^ 3.0
National	**243.9**	**219.1**	**^^ 24.9**	**4.2**	**3.3**	**^^ 0.9**	**18.8**	**15.8**	**^^ 3.0**

	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	42.9	37.1	^^ 5.7	138.0	129.8	^ 8.2	2.1	1.9	^ 0.2
Midlands And East	81.2	69.2	^^ 12.1	165.0	152.1	^ 12.9	4.5	3.1	^^ 1.3
North	106.0	87.8	^^ 18.2	185.1	177.0	— 8.1	4.7	4.8	— -0.1
South	70.0	59.4	^^ 10.6	128.9	114.9	^^ 14.0	5.3	4.0	^^ 1.3
National	**76.2**	**64.5**	**^^ 11.8**	**153.0**	**142.0**	**^ 11.0**	**4.3**	**3.6**	**^^ 0.7**

Age Group Breakdown

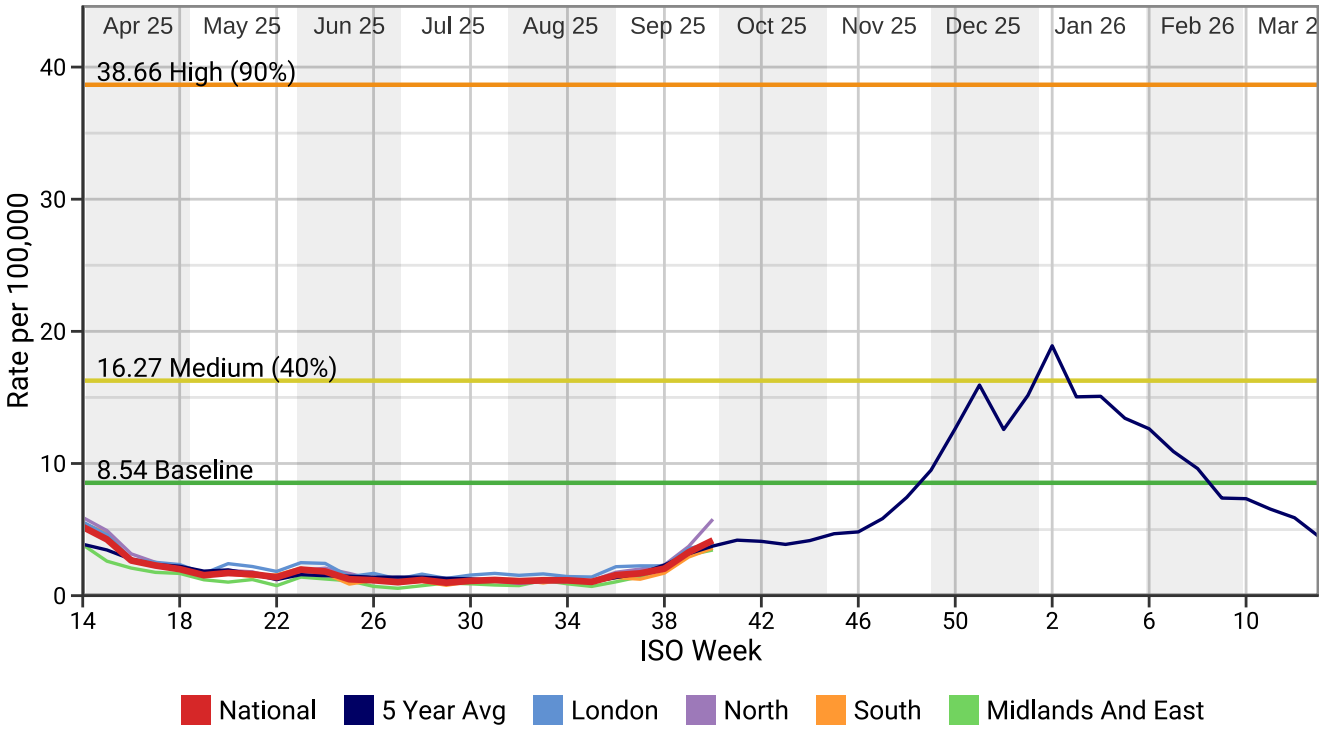
	Acute respiratory infections (ARI)			Influenza-like illness (ILI)			Exacerbations of chronic lung disease (ECLD)		
	This week	Last week	Change since last week	This week	Last week	Change since last week	This week	Last week	Change since last week
<1yr	1,291.3	1,362.1	v -70.8	3.1	5.1	vv -2.0	0.6	0.0	^^ 0.6
1-4yrs	855.6	771.7	^^ 83.9	3.2	2.5	^^ 0.7	1.8	1.9	v -0.1
5-14yrs	263.9	270.1	— -6.2	2.8	2.2	^^ 0.6	9.5	10.0	v -0.5
15-64yrs	181.3	157.2	^^ 24.2	4.8	3.7	^^ 1.1	14.8	12.1	^^ 2.6
65+yrs	275.6	237.2	^^ 38.4	3.1	2.7	^^ 0.4	44.1	36.8	^^ 7.4
All ages	**243.9**	**219.1**	**^^ 24.9**	**4.2**	**3.3**	**^^ 0.9**	**18.8**	**15.8**	**^^ 3.0**

	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
<1yr	228.6	222.9	— 5.7	1,121.3	1,199.7	v -78.4	10.0	11.5	vv -1.5
1-4yrs	141.7	114.9	^^ 26.8	756.3	686.1	^^ 70.2	1.1	0.7	^^ 0.4
5-14yrs	34.1	36.1	v -2.0	226.9	228.8	— -2.0	0.7	0.5	^^ 0.2
15-64yrs	55.2	44.8	^^ 10.4	112.3	101.0	^^ 11.3	3.6	2.8	^^ 0.8
65+yrs	158.8	135.9	^^ 22.9	75.4	67.0	^^ 8.4	9.8	8.7	^^ 1.1
All ages	**76.2**	**64.5**	**^^ 11.8**	**153.0**	**142.0**	**^ 11.0**	**4.3**	**3.6**	**^^ 0.7**

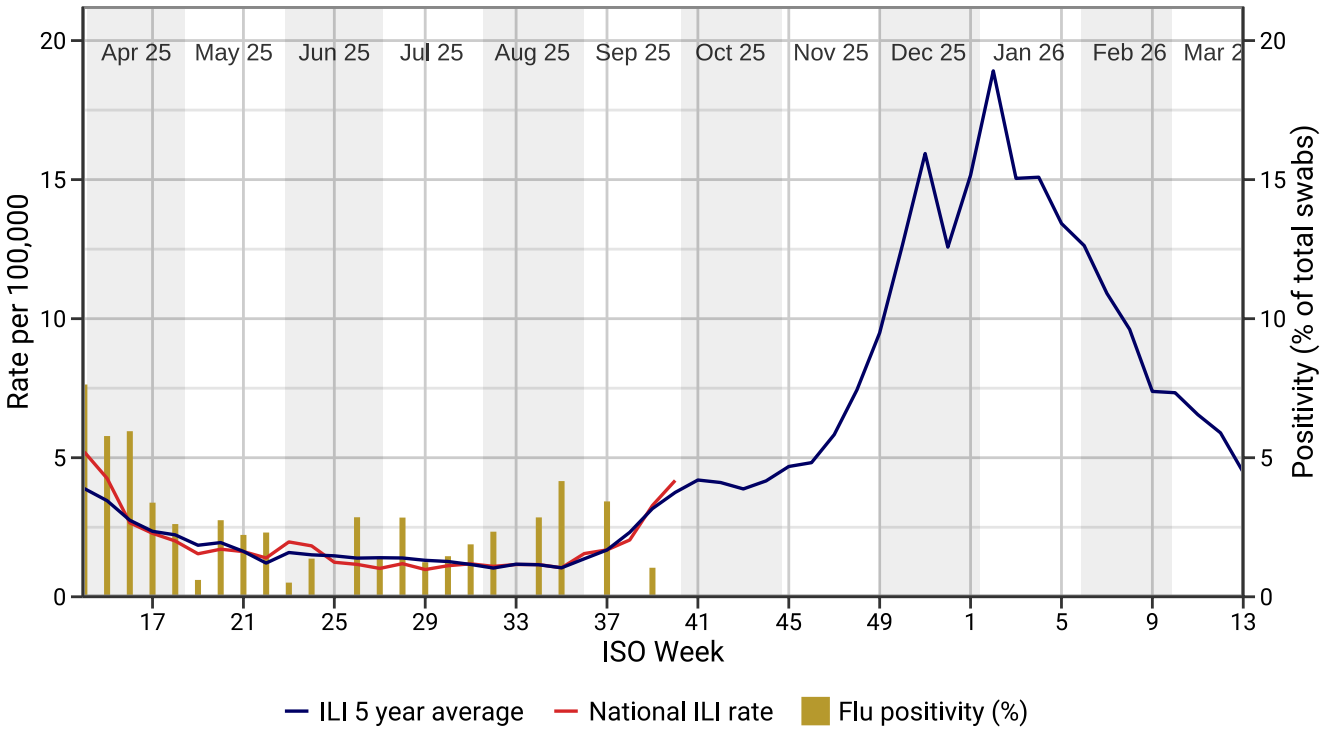
2024/25 Focus

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

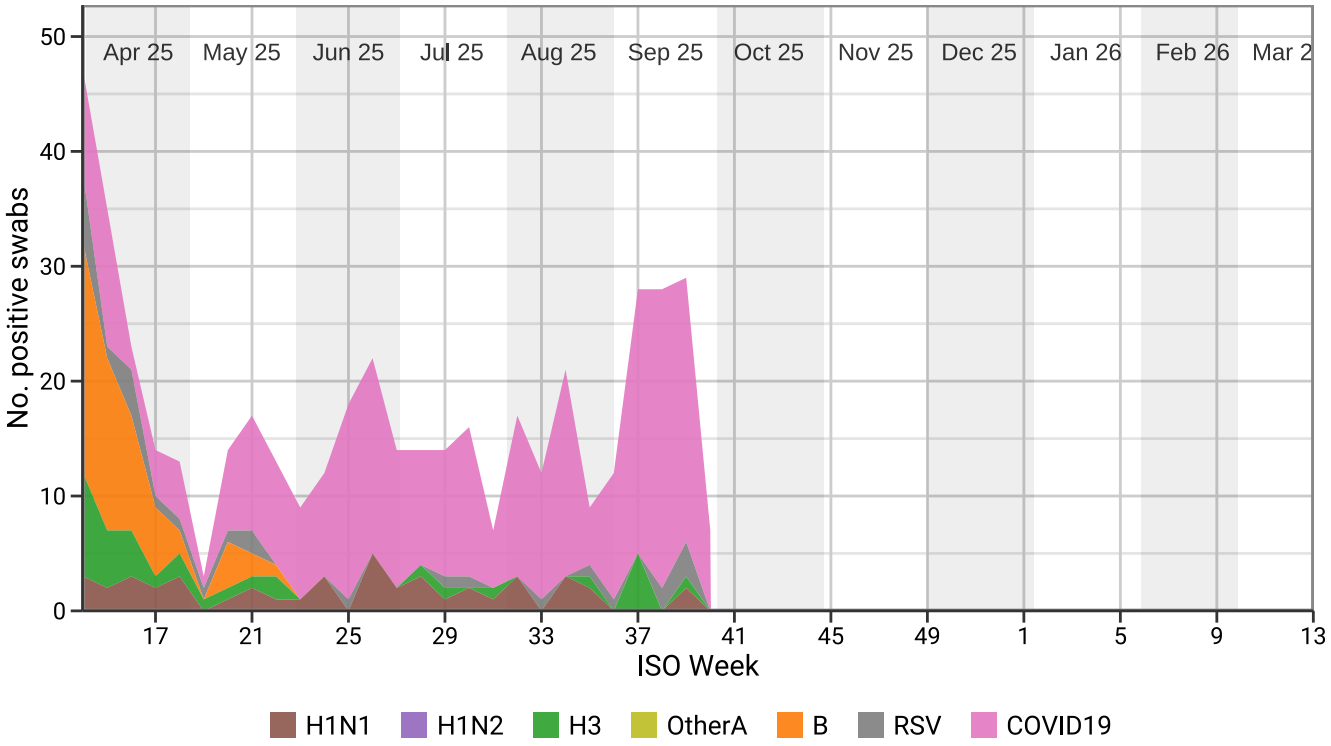
The horizontal lines in the following graph are thresholds derived from the Moving Epidemic Method (MEM) model. See p20 for more information.



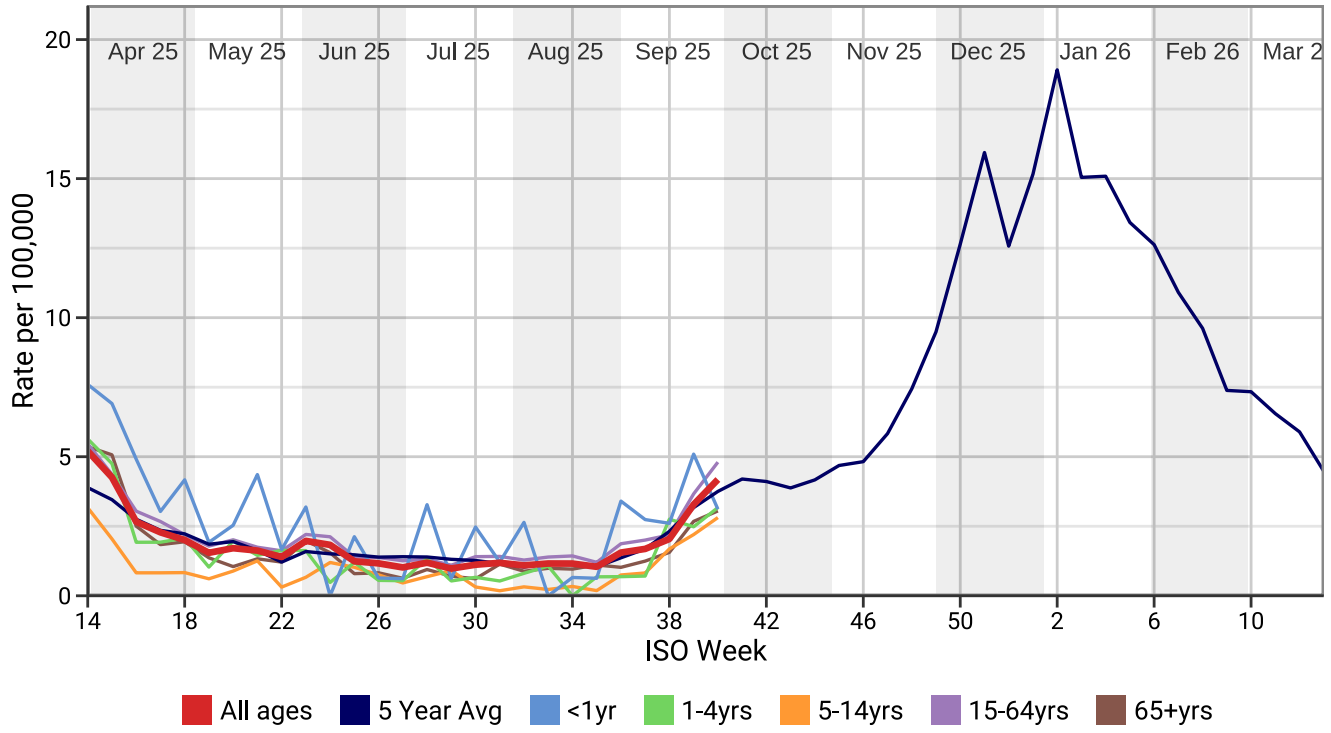
(B) RCGP/UKHSA influenza virology swab surveillance



(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.

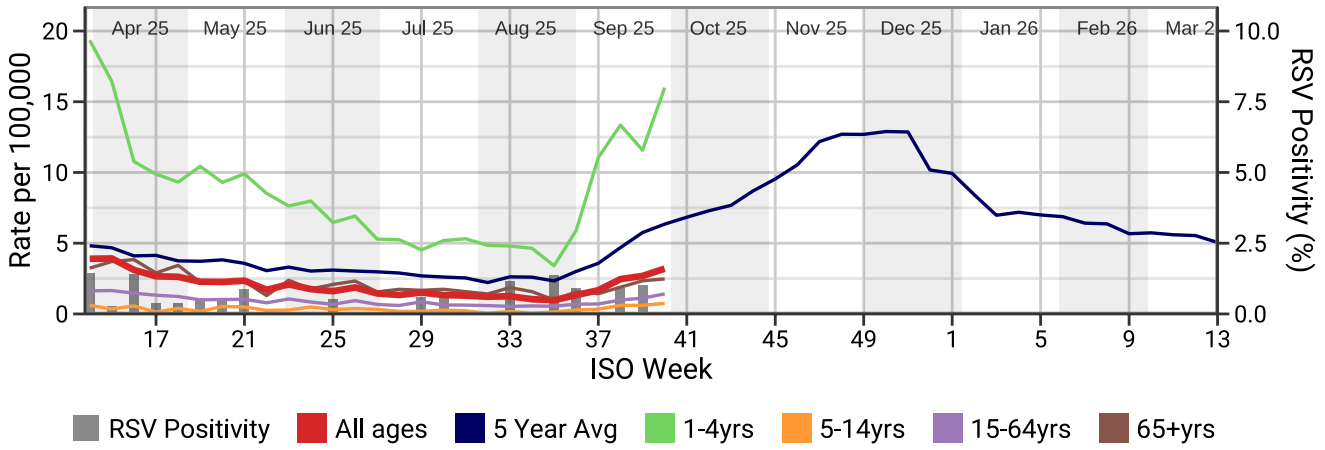
	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22
1-4yrs	26.6	20.7	15.7	12.9	7.9	11.1	8.4	6.7	6.8	5.6	4.8	1.9	1.9	2.1	1.0	2.0	1.5	1.6
5-14yrs	14.9	12.1	10.4	7.0	5.2	5.2	5.1	5.4	4.7	3.2	2.0	0.8	0.8	0.8	0.6	0.9	1.3	0.3
15-64yrs	15.1	13.8	12.6	12.0	11.1	9.3	7.9	7.3	6.5	5.5	4.4	3.0	2.7	2.2	1.8	2.0	1.7	1.6
65+yrs	11.1	9.6	9.3	7.7	6.5	5.8	4.9	4.5	4.5	5.4	5.1	2.5	1.8	1.9	1.4	1.0	1.3	1.2
All ages	14.8	13.2	11.9	10.8	9.5	8.3	7.1	6.6	5.9	5.2	4.3	2.7	2.3	2.0	1.5	1.7	1.6	1.4

	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40
1-4yrs	1.6	0.5	1.2	0.6	0.5	1.3	0.5	0.7	0.5	0.8	1.1	0.0	0.7	0.7	0.7	2.8	2.5	3.2
5-14yrs	0.7	1.2	1.0	0.8	0.5	0.7	0.9	0.3	0.2	0.3	0.2	0.3	0.2	0.7	0.8	1.7	2.2	2.8
15-64yrs	2.2	2.1	1.4	1.4	1.3	1.3	1.1	1.4	1.4	1.3	1.4	1.4	1.2	1.9	2.0	2.2	3.7	4.8
65+yrs	2.0	1.5	0.8	0.8	0.6	0.9	0.7	0.6	1.1	0.9	1.0	1.0	1.1	1.0	1.2	1.6	2.7	3.1
All ages	2.0	1.8	1.2	1.2	1.0	1.2	1.0	1.1	1.2	1.1	1.2	1.2	1.0	1.6	1.7	2.0	3.3	4.2

	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.

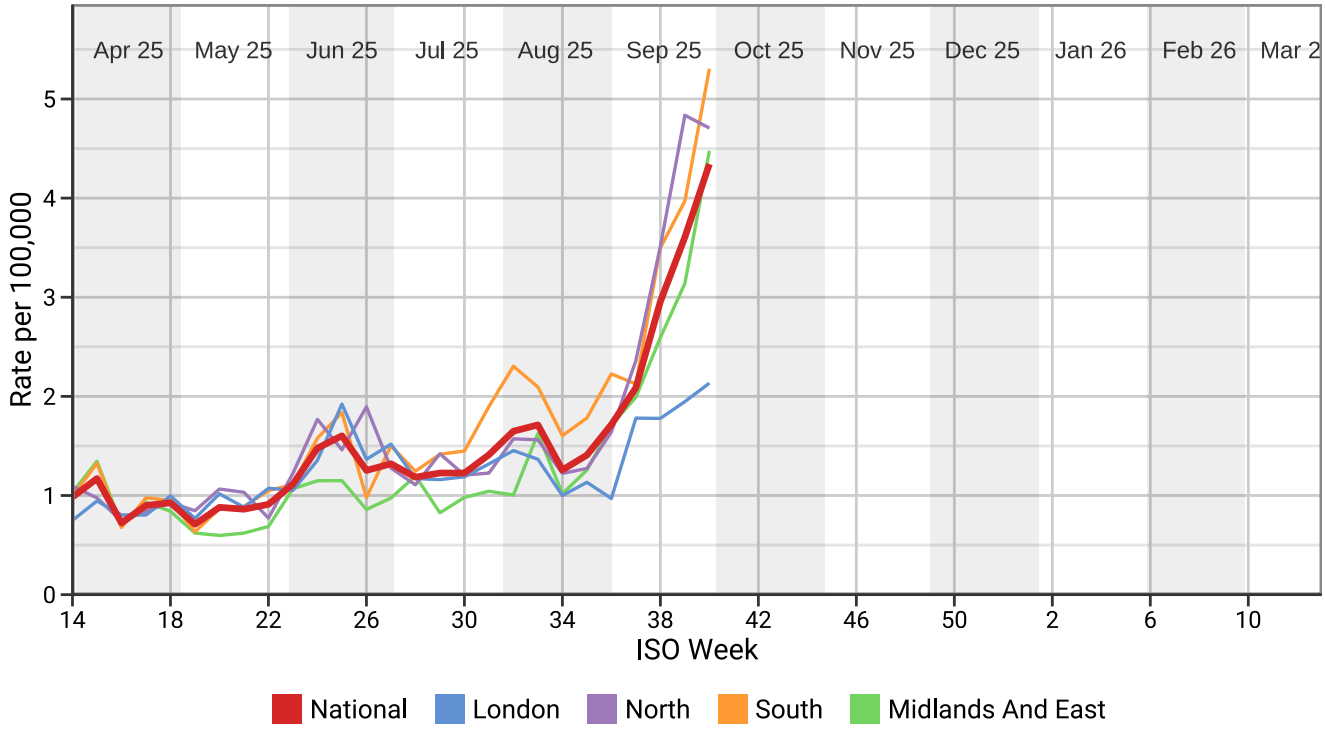


Weekly incidence rates of influenza-like illness, and acute bronchitis and bronchiolitis (per 100,000)

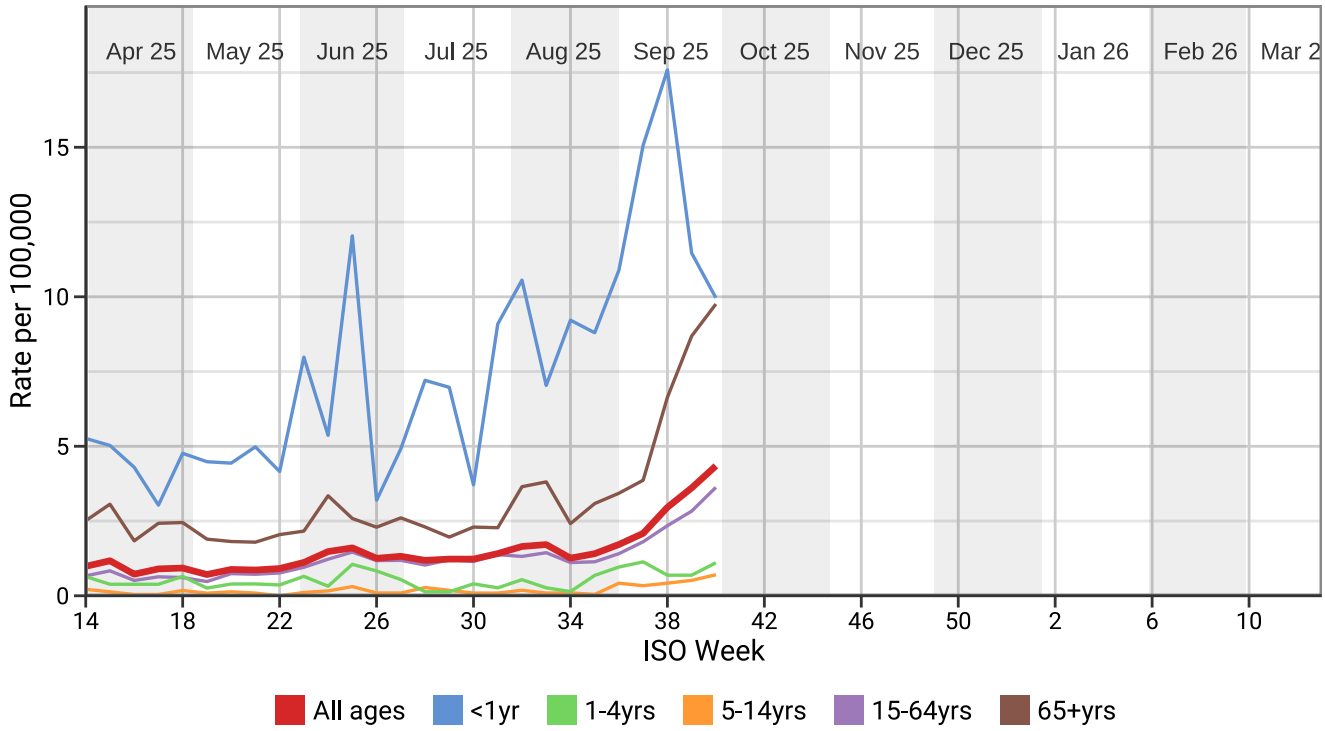
	Influenza-like illness (ILI)	ARI-Bronchitis and Bronchiolitis
<1yr	3.1	127.7
1-4yrs	3.2	16.0
5-14yrs	2.8	0.7
15-24yrs	6.5	1.0
25-44yrs	4.6	1.4
45-64yrs	4.2	1.6
65-74yrs	2.4	1.9
75-84yrs	3.1	3.0
85+yrs	5.5	3.1
All ages	4.2	3.2

	Influenza-like illness (ILI)	ARI-Bronchitis and Bronchiolitis
London	4.0	2.1
Midlands And East	3.5	3.2
North	5.8	4.3
South	3.6	3.0
National	4.2	3.2

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

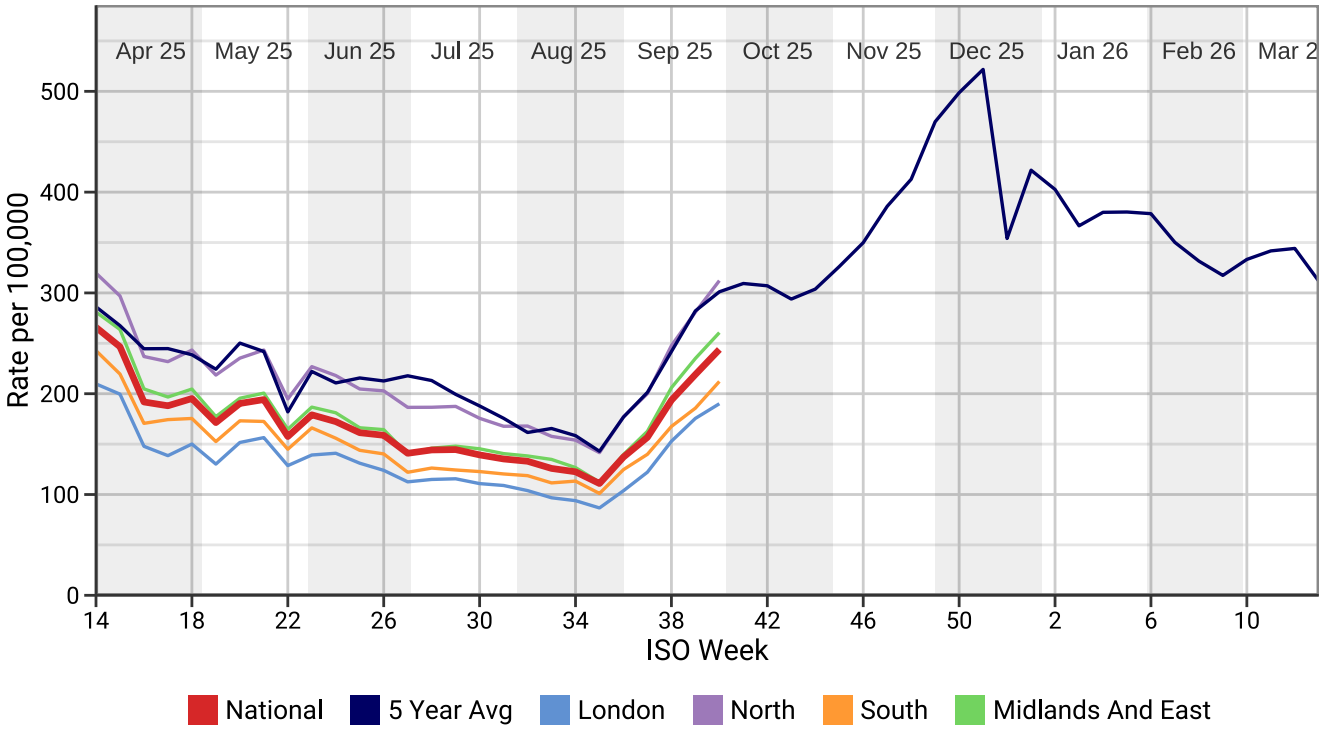


(H) COVID-19: national incidence rate by age band

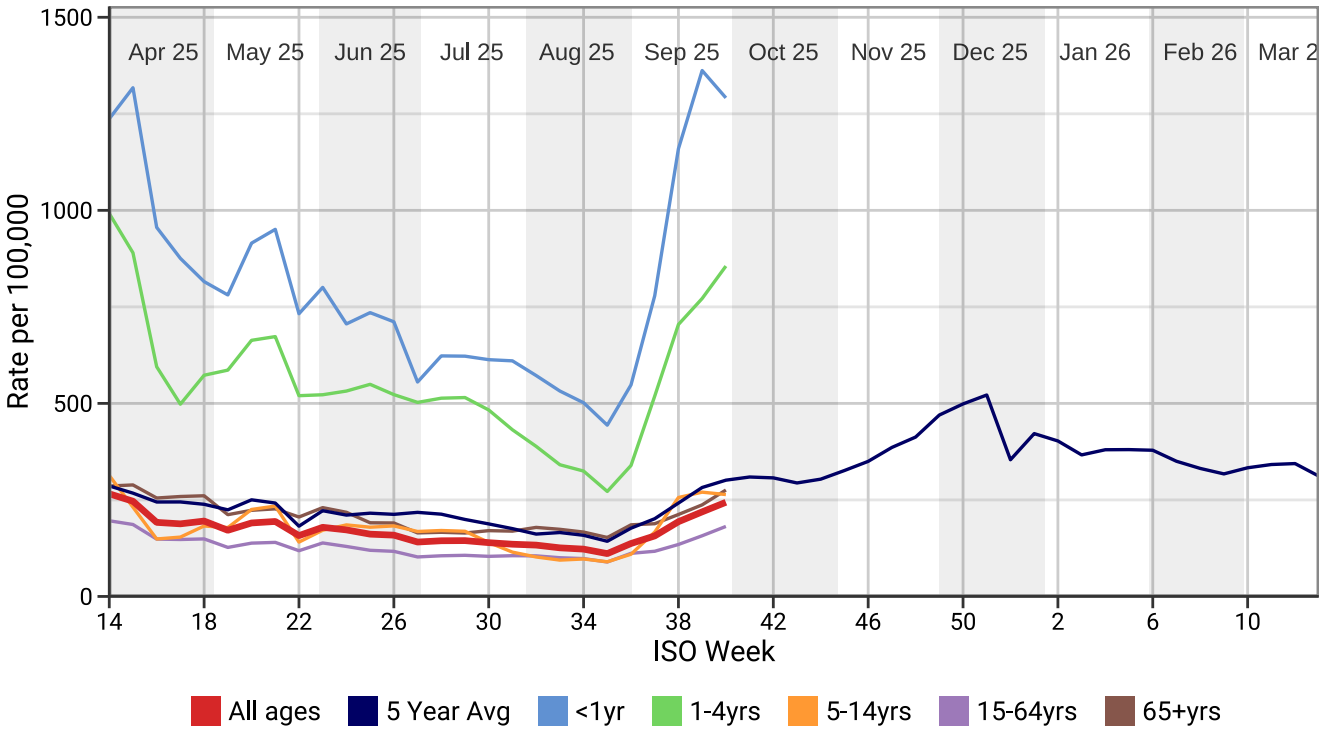


1. Respiratory Infections

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



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



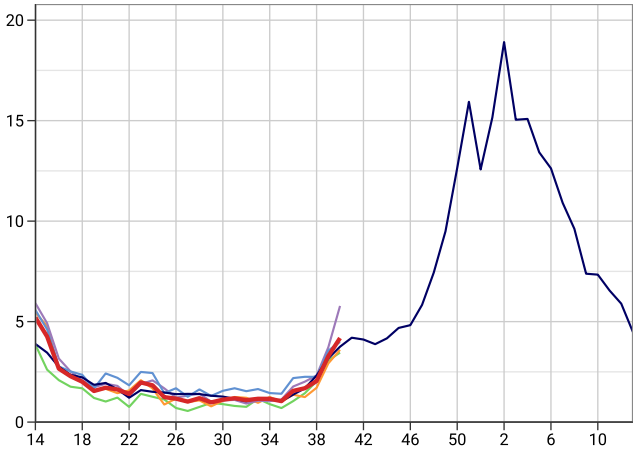
Respiratory Infections - by region

National
London
South
5 Year Avg
North
Midlands And East

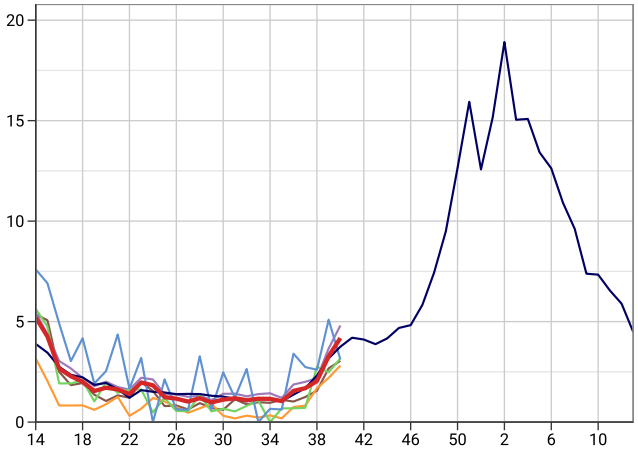
Respiratory Infections - by age band

All ages
<1yr
5-14yrs
65+yrs
5 Year Avg
1-4yrs
15-64yrs

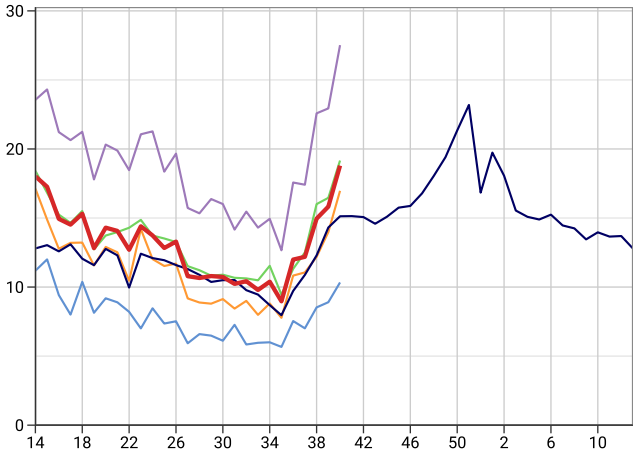
Influenza-like illness (ILI)
Weekly incidence (per 100,000 all ages) by region for 2025/26 compared with 5 year average



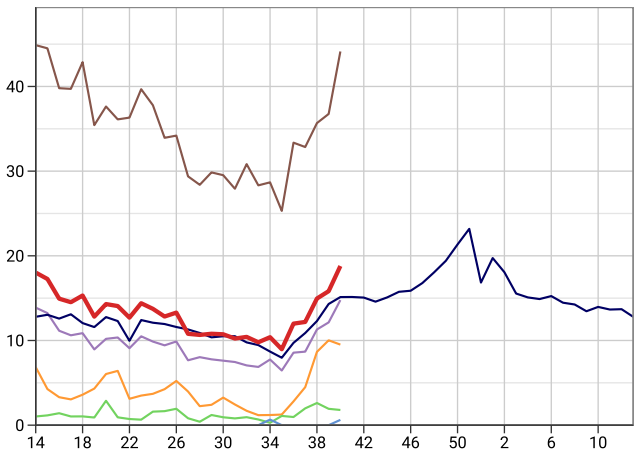
Influenza-like illness (ILI)
Weekly incidence (per 100,000 all ages) by age band for 2025/26 compared with 5 year average



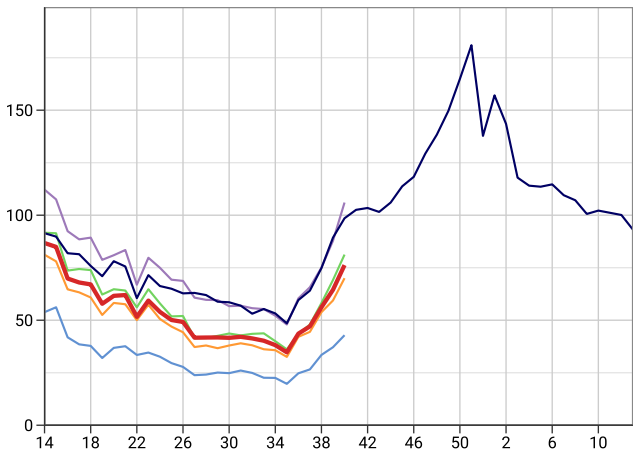
Exacerbations of Chronic Lung Disease (ECLD)
Weekly incidence (per 100,000 all ages) by region for 2025/26 compared with 5 year average



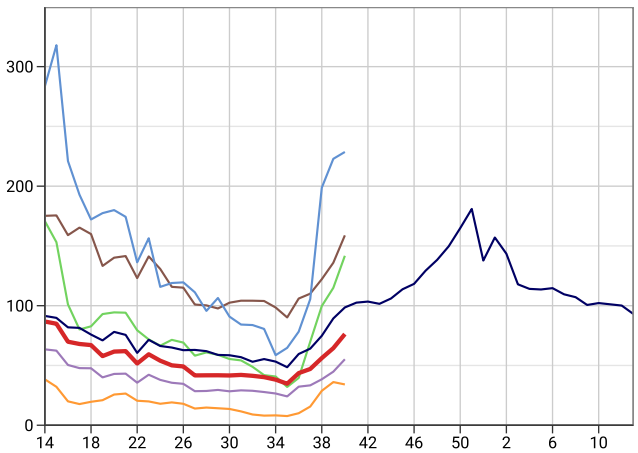
Exacerbations of Chronic Lung Disease (ECLD)
Weekly incidence (per 100,000 all ages) by age band for 2025/26 compared with 5 year average



Lower Respiratory Tract Infections (LRTI)
Weekly incidence (per 100,000 all ages) by region for 2025/26 compared with 5 year average



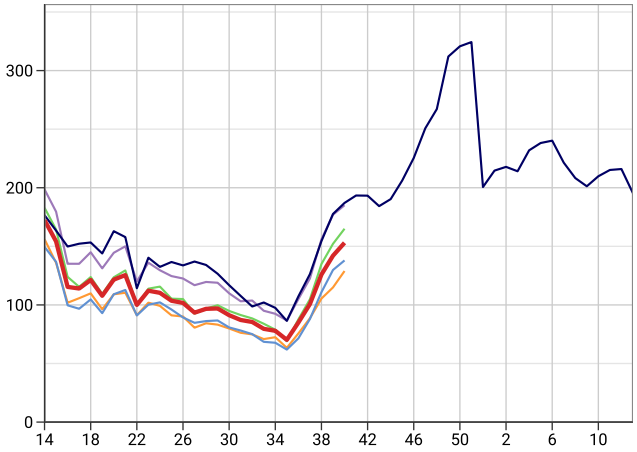
Lower Respiratory Tract Infections (LRTI)
Weekly incidence (per 100,000 all ages) by age band for 2025/26 compared with 5 year average



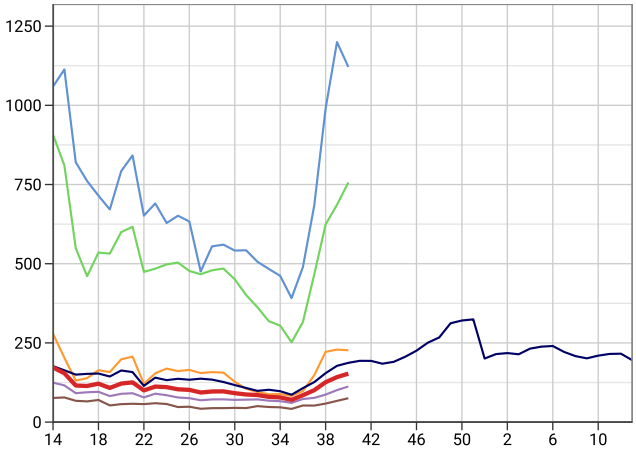
Respiratory Infections - by region

Respiratory Infections - by age band

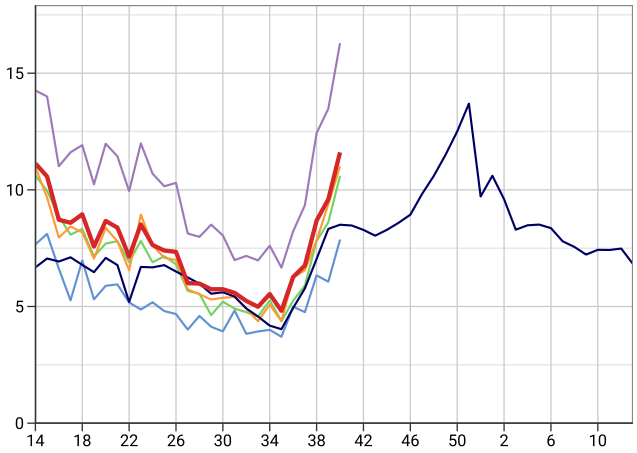
Upper Respiratory Tract Infections (URTI)
Weekly incidence (per 100,000 all ages) by region for 2025/26 compared with 5 year average



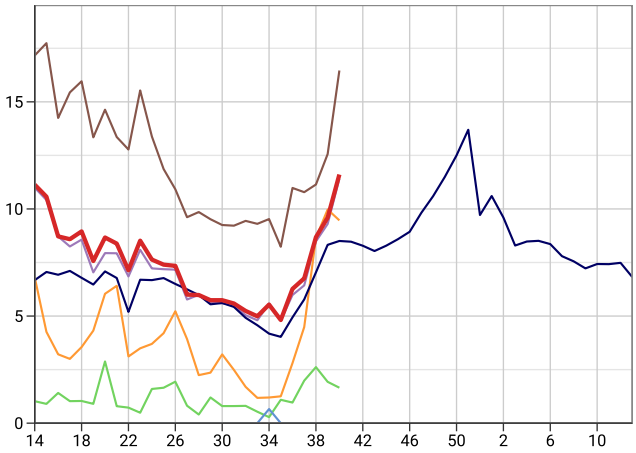
Upper Respiratory Tract Infections (URTI)
Weekly incidence (per 100,000 all ages) by age band for 2025/26 compared with 5 year average



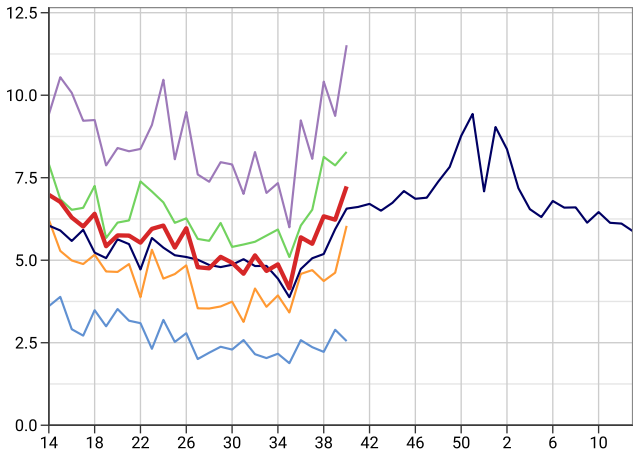
ECLD - Asthma Exacerbations
Weekly incidence (per 100,000 all ages) by region for 2025/26 compared with 5 year average



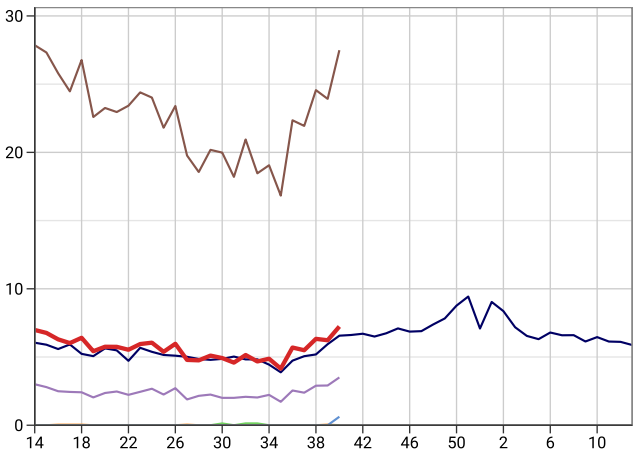
ECLD - Asthma Exacerbations
Weekly incidence (per 100,000 all ages) by age band for 2025/26 compared with 5 year average



ECLD - COPD Exacerbations
Weekly incidence (per 100,000 all ages) by region for 2025/26 compared with 5 year average



ECLD - COPD Exacerbations
Weekly incidence (per 100,000 all ages) by age band for 2025/26 compared with 5 year average



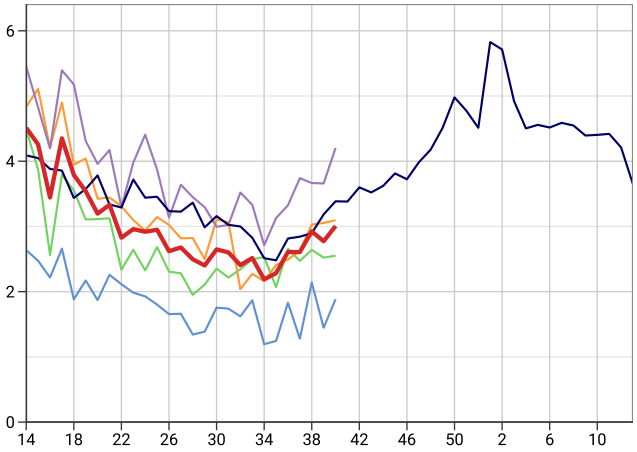
Respiratory Infections - by region

National
London
South
5 Year Avg
North
Midlands And East

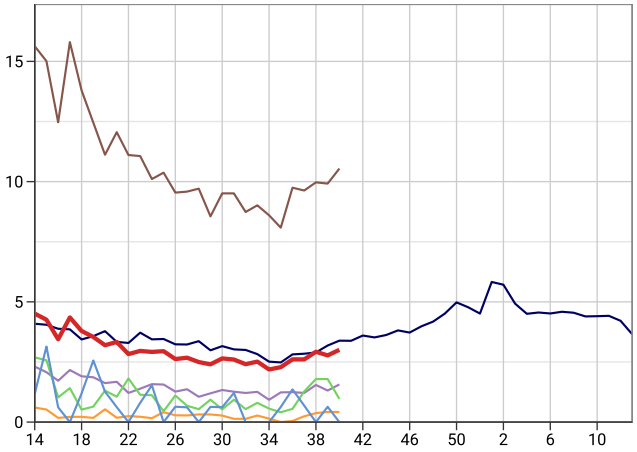
Respiratory Infections - by age band

All ages
<1yr
5-14yrs
65+yrs
5 Year Avg
1-4yrs
15-64yrs

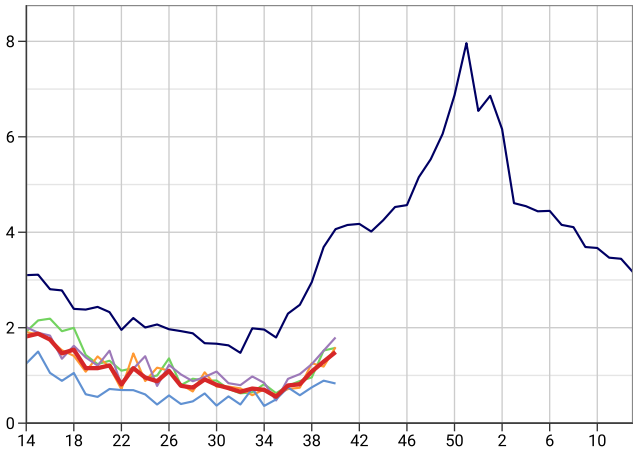
LRTI - Pneumonia
Weekly incidence (per 100,000 all ages) by region for 2025/26 compared with 5 year average



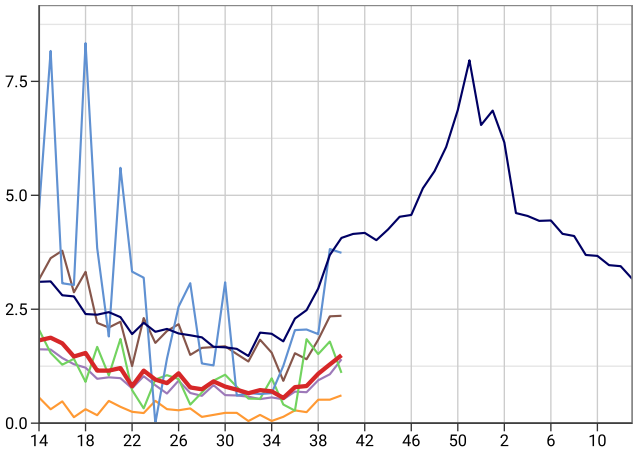
LRTI - Pneumonia
Weekly incidence (per 100,000 all ages) by age band for 2025/26 compared with 5 year average



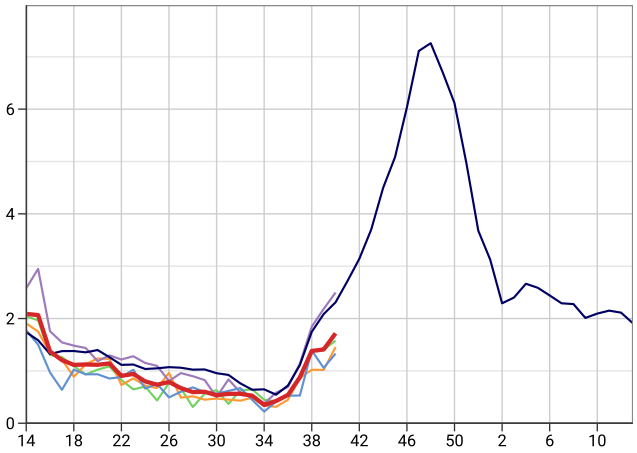
LRTI - Acute Bronchitis
Weekly incidence (per 100,000 all ages) by region for 2025/26 compared with 5 year average



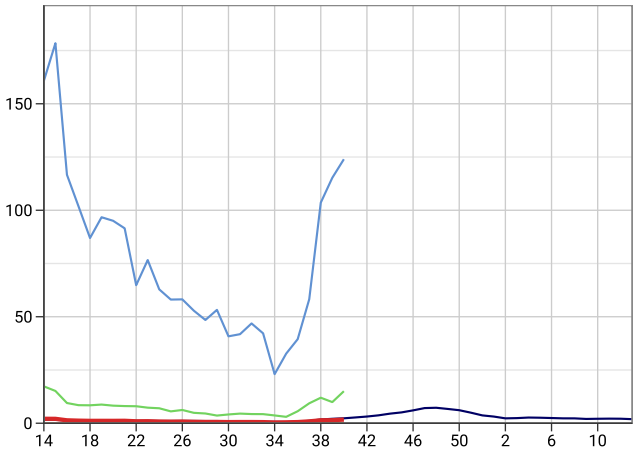
LRTI - Acute Bronchitis
Weekly incidence (per 100,000 all ages) by age band for 2025/26 compared with 5 year average



LRTI - Bronchiolitis
Weekly incidence (per 100,000 all ages) by region for 2025/26 compared with 5 year average



LRTI - Bronchiolitis
Weekly incidence (per 100,000 all ages) by age band for 2025/26 compared with 5 year average



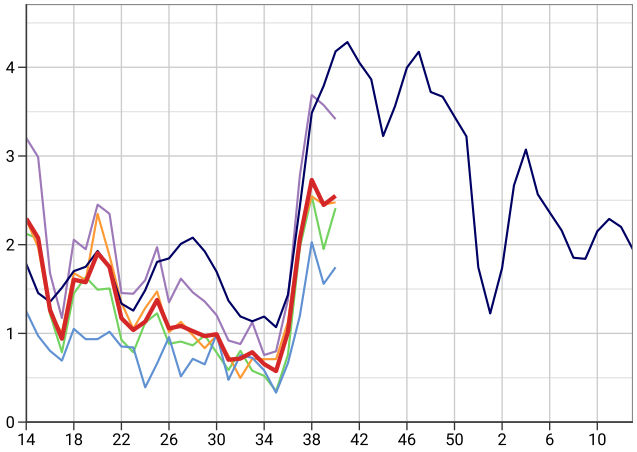
Respiratory Infections - by region

National
London
South
5 Year Avg
North
Midlands And East

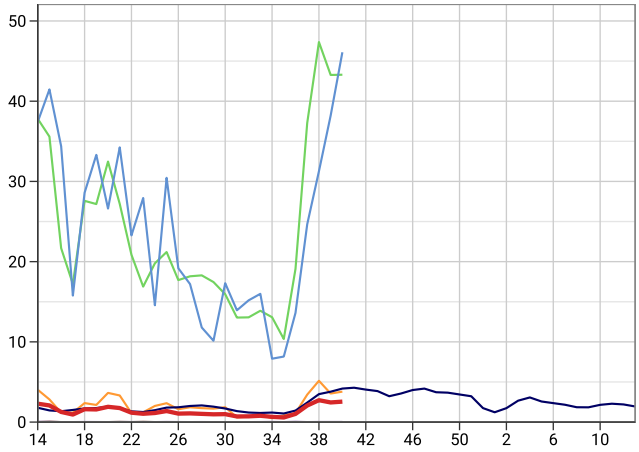
Respiratory Infections - by age band

All ages
<1yr
5-14yrs
65+yrs
5 Year Avg
1-4yrs
15-64yrs

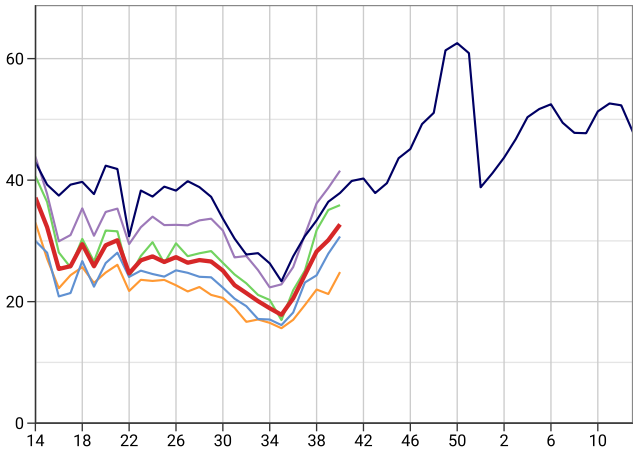
URTI - Croup
Weekly incidence (per 100,000 all ages) by region for 2025/26 compared with 5 year average



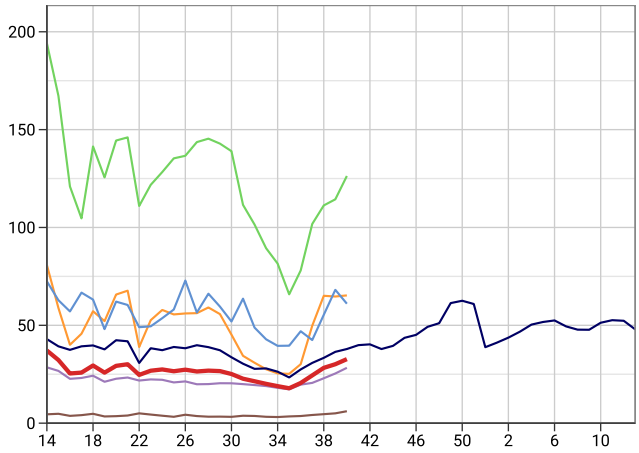
URTI - Croup
Weekly incidence (per 100,000 all ages) by age band for 2025/26 compared with 5 year average



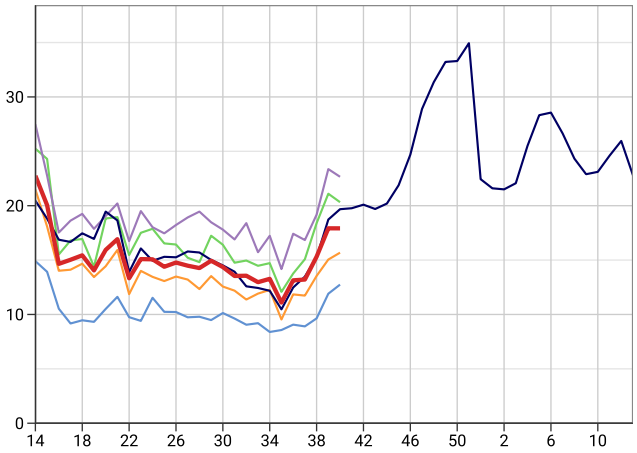
URTI - Tonsillitis/Pharyngitis
Weekly incidence (per 100,000 all ages) by region for 2025/26 compared with 5 year average



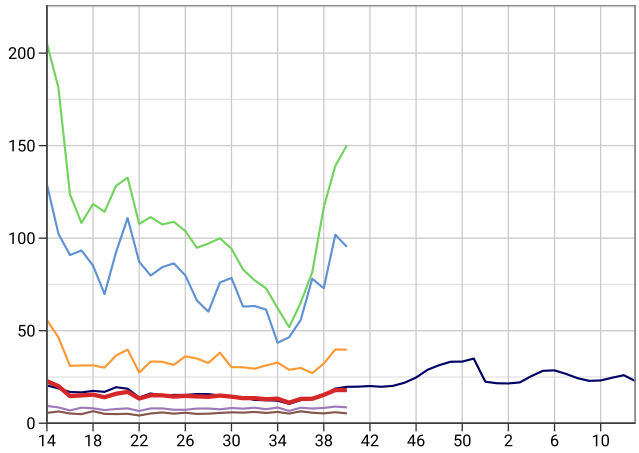
URTI - Tonsillitis/Pharyngitis
Weekly incidence (per 100,000 all ages) by age band for 2025/26 compared with 5 year average



URTI - Otitis Media
Weekly incidence (per 100,000 all ages) by region for 2025/26 compared with 5 year average



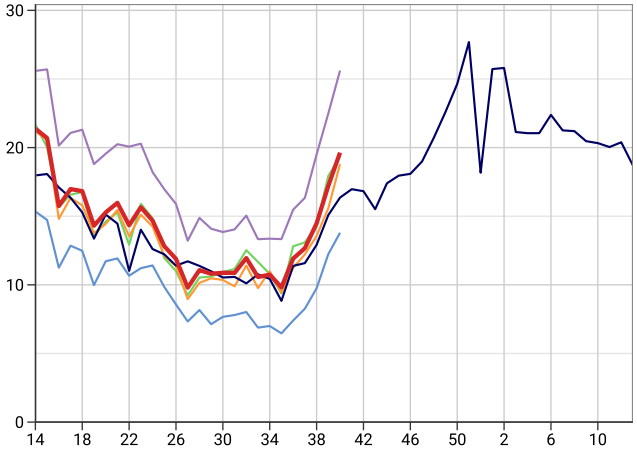
URTI - Otitis Media
Weekly incidence (per 100,000 all ages) by age band for 2025/26 compared with 5 year average



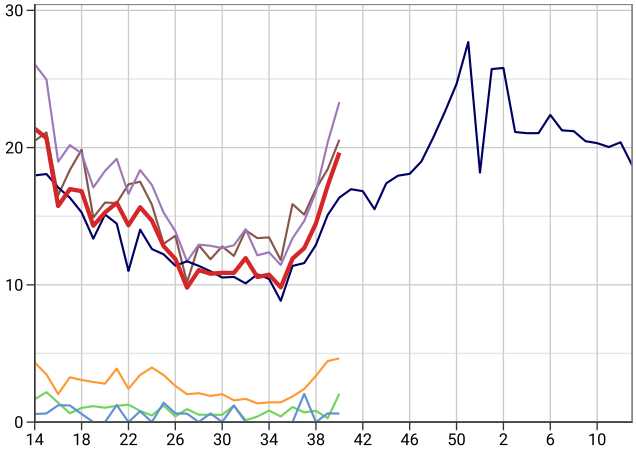
Respiratory Infections - by region

Respiratory Infections - by age band

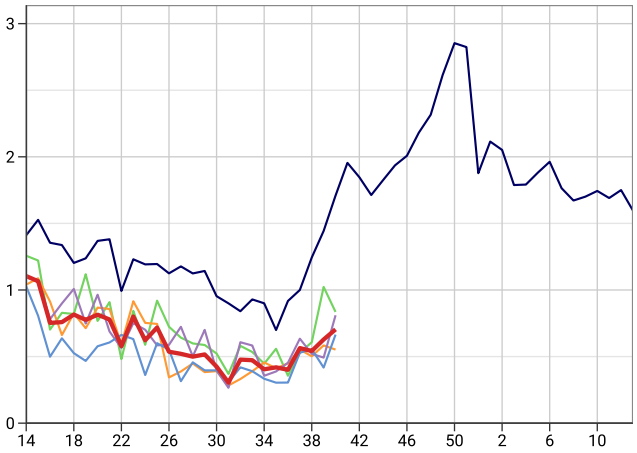
URTI - Sinusitis
Weekly incidence (per 100,000 all ages) by region for 2025/26 compared with 5 year average



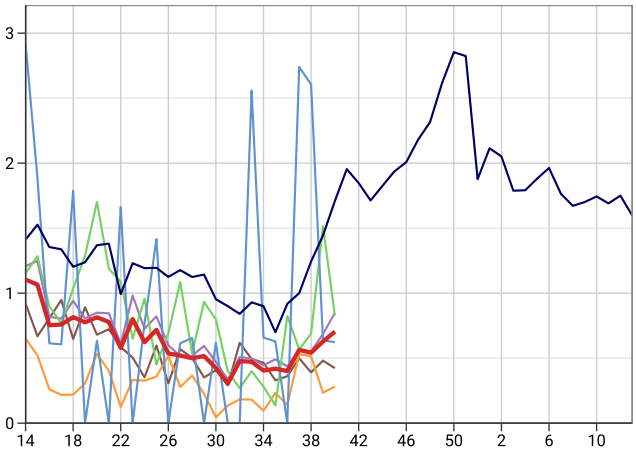
URTI - Sinusitis
Weekly incidence (per 100,000 all ages) by age band for 2025/26 compared with 5 year average



URTI - Laryngitis
Weekly incidence (per 100,000 all ages) by region for 2025/26 compared with 5 year average



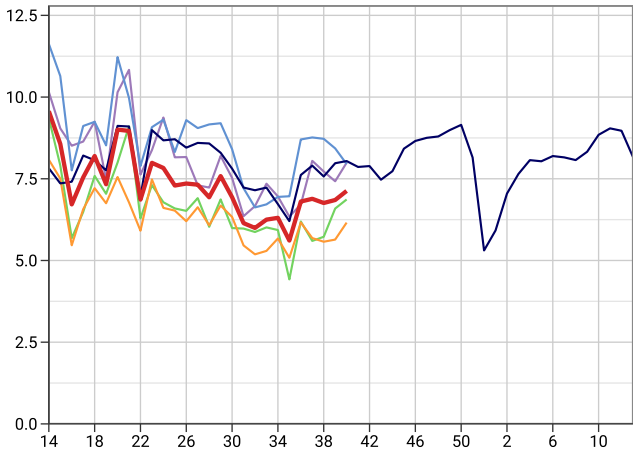
URTI - Laryngitis
Weekly incidence (per 100,000 all ages) by age band for 2025/26 compared with 5 year average



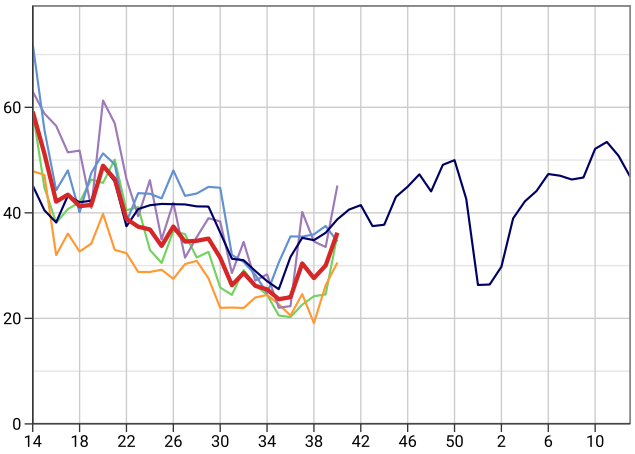
2. Water and Food Borne Disorders

National 5 Year Avg London North South Midlands And East

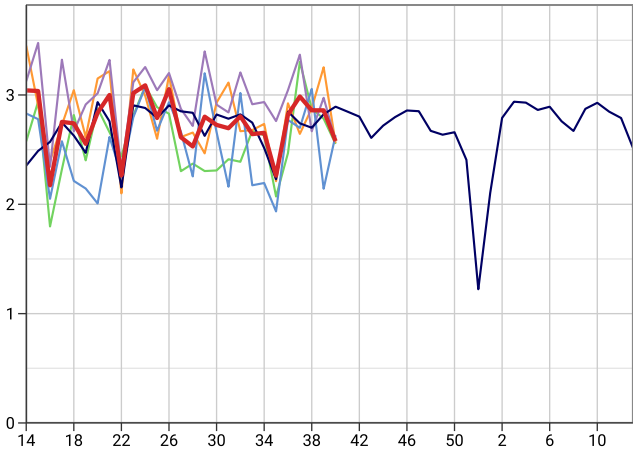
Infectious Intestinal Disease (ICD10: A00-A09)
Weekly incidence (per 100,000 all ages) by region for 2025/26 compared with 5 year average



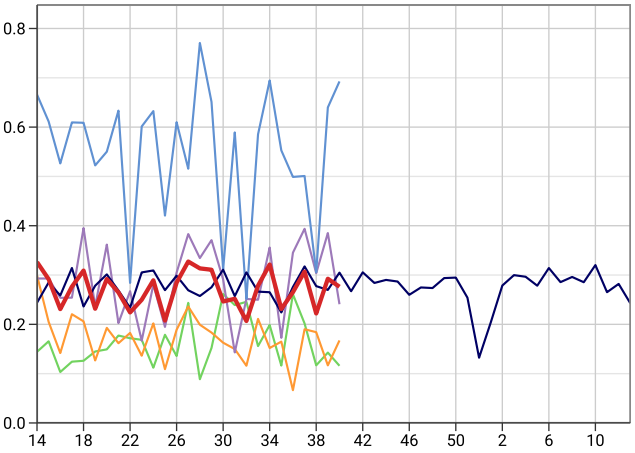
Infectious Intestinal Disease (ICD10: A00-A09)
Weekly incidence (per 100,000 0-4 years) by region for 2025/26 compared with 5 year average



Non-Infective Enteritis and Colitis (ICD10: K50-K52)
Weekly incidence (per 100,000 all ages) by region for 2025/26 compared with 5 year average



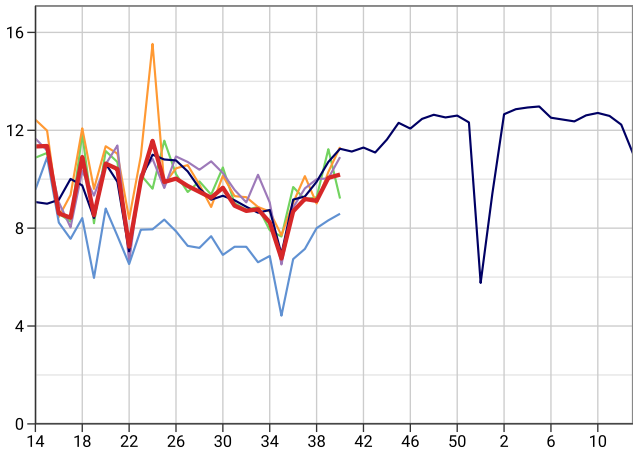
Viral Hepatitis (ICD10: B15-B19)
Weekly incidence (per 100,000 all ages) by region for 2025/26 compared with 5 year average



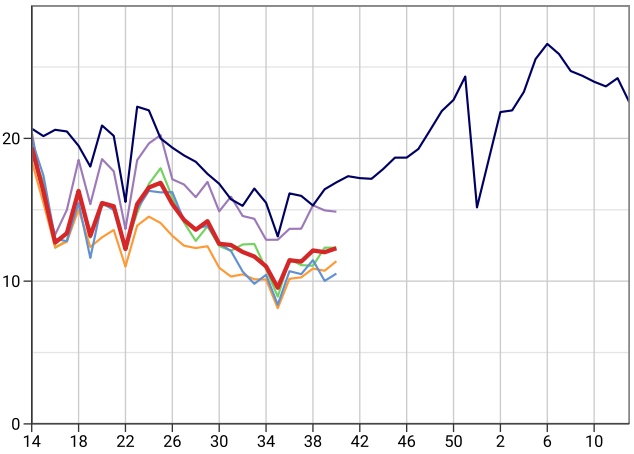
3. Environmentally Sensitive Disorders

National 5 Year Avg London North South Midlands And East

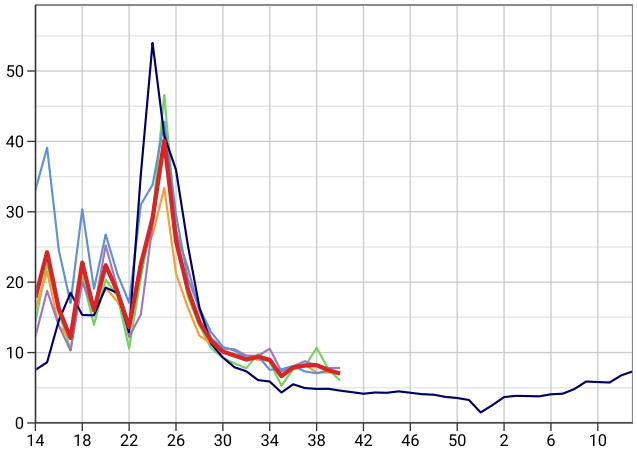
Asthma (ICD10: J45-J46)
Weekly incidence (per 100,000 all ages) by region for 2025/26 compared with 5 year average



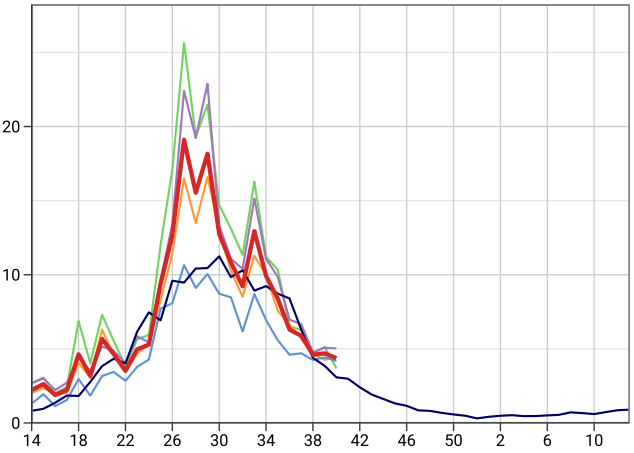
Disorders of Conjunctiva (ICD10: H10-H13)
Weekly incidence (per 100,000 all ages) by region for 2025/26 compared with 5 year average



Hayfever / Allergic Rhinitis (ICD10: J30)
Weekly incidence (per 100,000 all ages) by region for 2025/26 compared with 5 year average



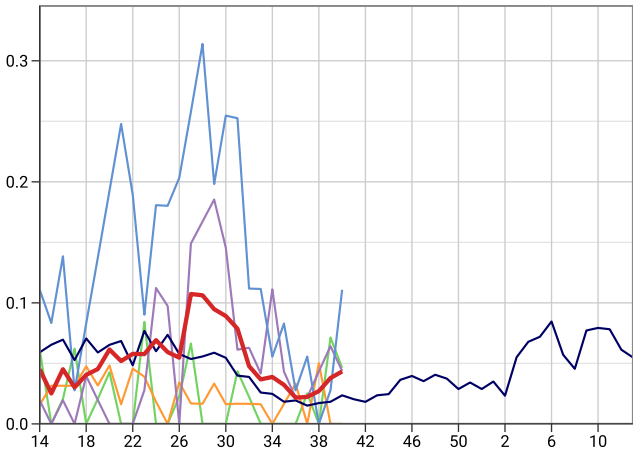
Infected Insect Bites
Weekly incidence (per 100,000 all ages) by region for 2025/26 compared with 5 year average



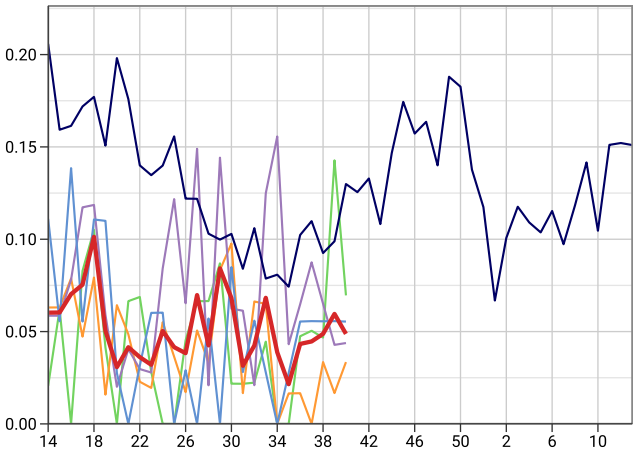
4. Vaccine Sensitive Disorders

National 5 Year Avg London North South Midlands And East

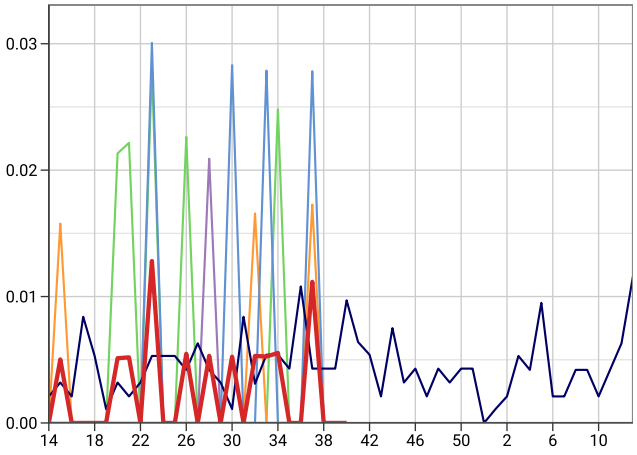
Measles (ICD10: B05)
Weekly incidence (per 100,000 all ages) by region for 2025/26 compared with 5 year average



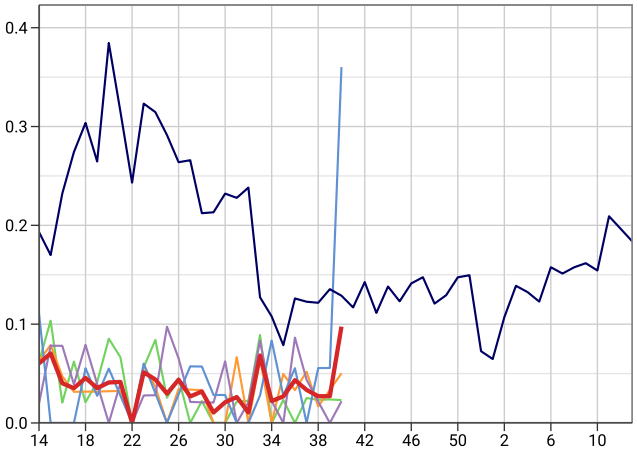
Mumps (ICD10: B26)
Weekly incidence (per 100,000 all ages) by region for 2025/26 compared with 5 year average



Rubella (ICD10: B06)
Weekly incidence (per 100,000 all ages) by region for 2025/26 compared with 5 year average



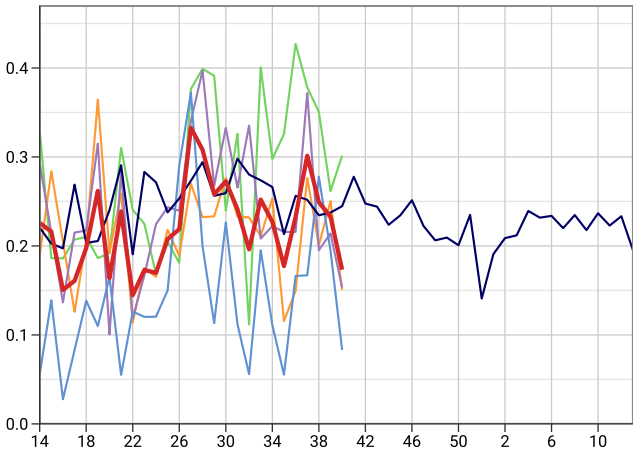
Whooping Cough (ICD10: A37)
Weekly incidence (per 100,000 all ages) by region for 2025/26 compared with 5 year average



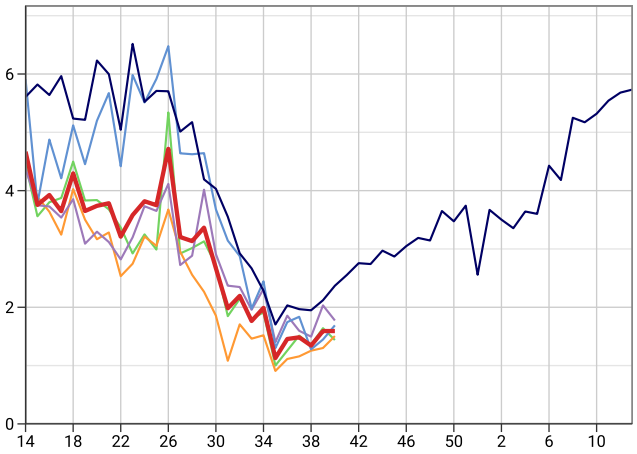
5. Skin Contagions

National 5 Year Avg London North South Midlands And East

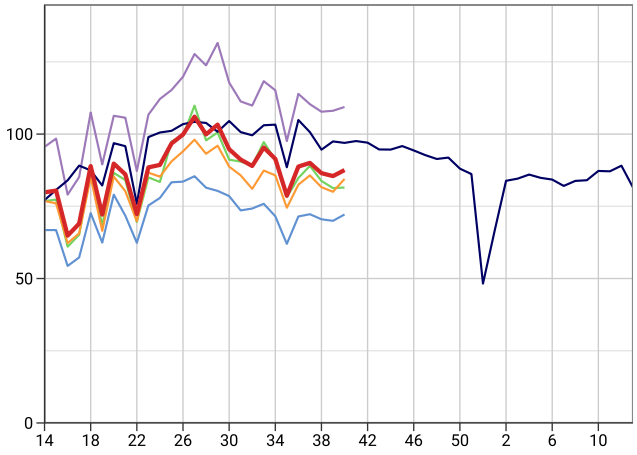
Bullous Dermatoses (ICD10: L10-L14)
Weekly incidence (per 100,000 all ages) by region for 2025/26 compared with 5 year average



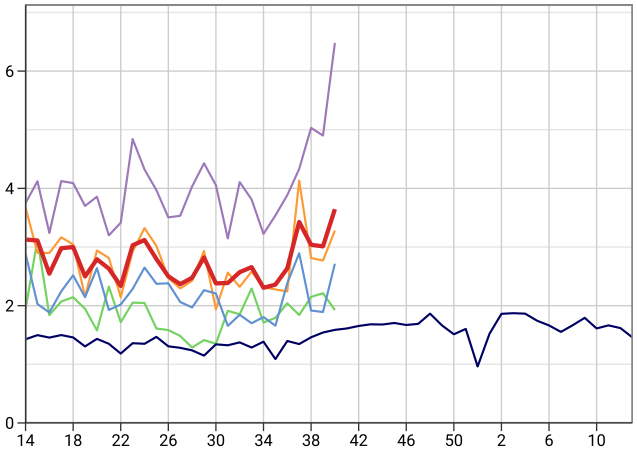
Chickenpox (ICD10: B01)
Weekly incidence (per 100,000 all ages) by region for 2025/26 compared with 5 year average



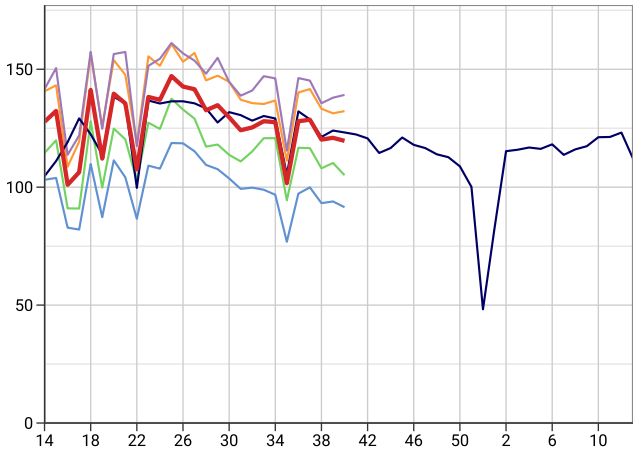
Infections of Skin & Subcutaneous Tissue (ICD10: L00-L08)
Weekly incidence (per 100,000 all ages) by region for 2025/26 compared with 5 year average



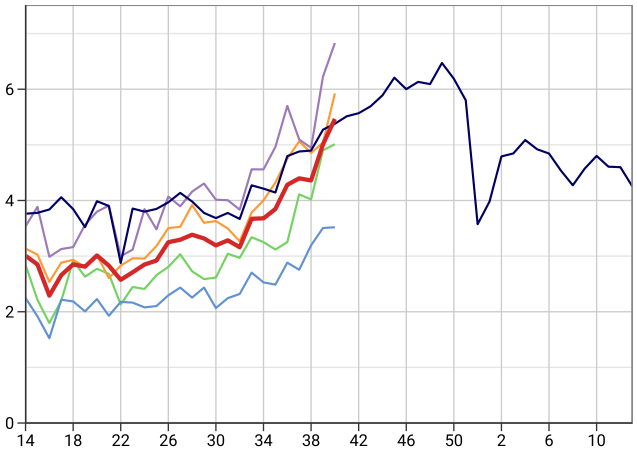
Scabies (ICD10: B86)
Weekly incidence (per 100,000 all ages) by region for 2025/26 compared with 5 year average



Symptoms of Skin & Integument Tissue (ICD10: R20-R23),
Weekly incidence (per 100,000 all ages) by region for 2025/26 compared with 5 year average

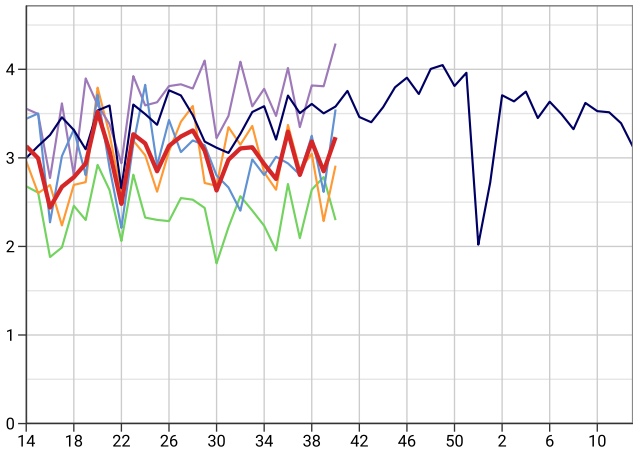


Impetigo (ICD10: L01)
Weekly incidence (per 100,000 all ages) by region for 2025/26 compared with 5 year average

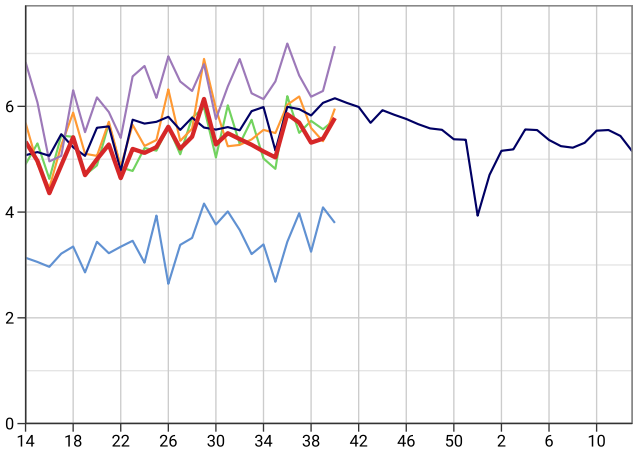


National 5 Year Avg London North South Midlands And East

Herpes Simplex (ICD10: B00)
Weekly incidence (per 100,000 all ages) by region for 2025/26 compared with 5 year average

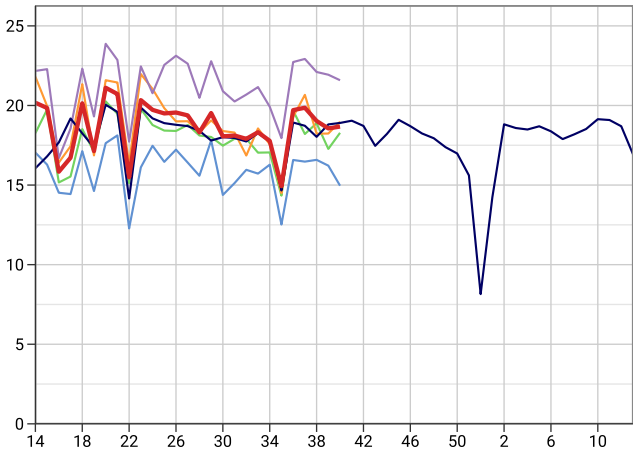


Herpes Zoster (ICD10: B02)
Weekly incidence (per 100,000 all ages) by region for 2025/26 compared with 5 year average

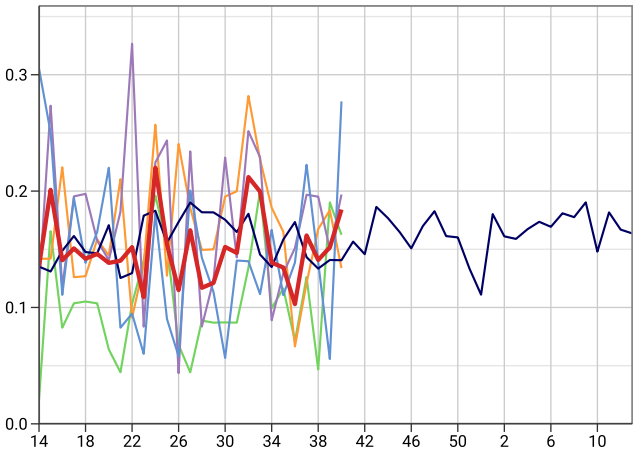


6. Disorders Affecting the Nervous System

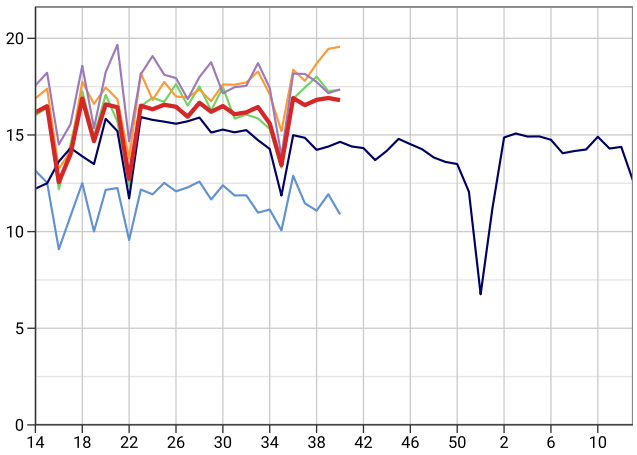
Disorders of Peripheral Nervous System (ICD10: G50-G64,G70-G72), Weekly incidence (per 100,000 all ages) by region for 2025/26 compared with 5 year average



Meningitis/Encephalitis (ICD10: A170-A171,A390,A38-A85,A87,G00-G05), Weekly incidence (per 100,000 all ages) by region for 2025/26 compared with 5 year average



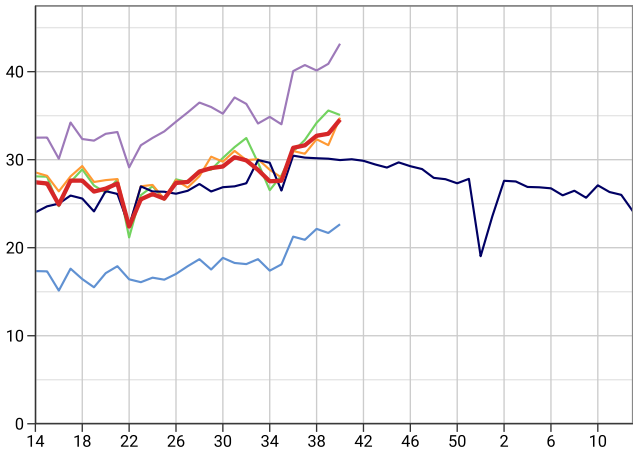
Symptoms of Nervous & Musculoskeletal Systems (ICD10: R25-R29), Weekly incidence (per 100,000 all ages) by region for 2025/26 compared with 5 year average



7. Genitourinary System Disorders

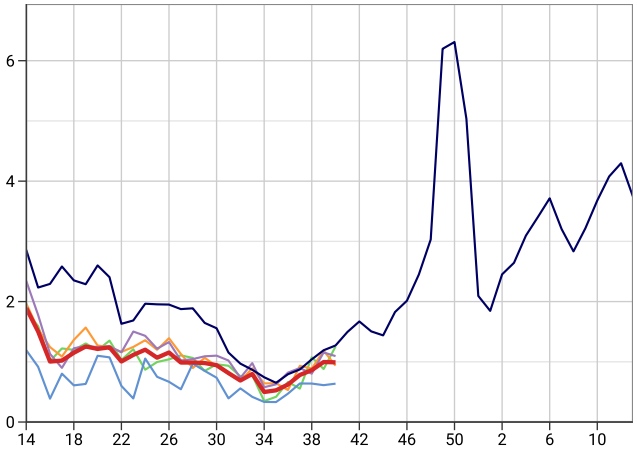
National 5 Year Avg London North South Midlands And East

Urinary Tract Infection/Cystitis (ICD10: N30,N390)
Weekly incidence (per 100,000 all ages) by region for 2025/26 compared with 5 year average

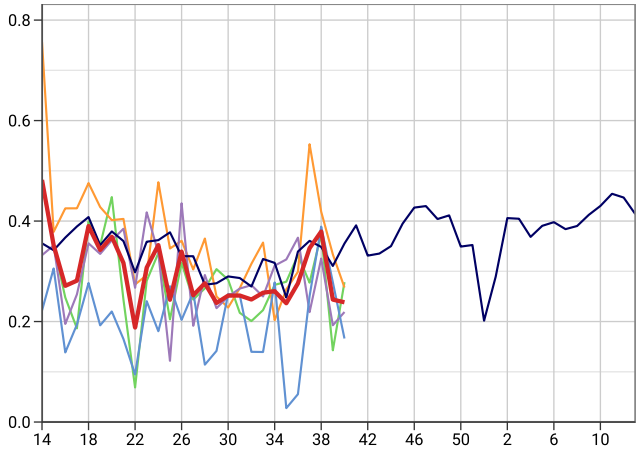


8. Other Disorders

Strep Sore Throat, Scarlatina and Peritonsillar Abscess (ICD10: A38,J020,J36), Weekly incidence (per 100,000 all ages) by region for 2025/26 compared with 5 year average



Infectious Mononucleosis (ICD10: B27)
Weekly incidence (per 100,000 all ages) by region for 2025/26 compared with 5 year average



9. Tabular Summary by Disease

	Week 37	Week 38	Week 39	Week 40
Dates	08/09/2025 - 14/09/2025	15/09/2025 - 21/09/2025	22/09/2025 - 28/09/2025	29/09/2025 - 05/10/2025
Population	17,917,722	18,463,704	18,465,583	18,463,320
Practice Count	1,715	1,767	1,763	1,760

	Week 37		Week 38		Week 39		Week 40	
Disease	Rate	Count	Rate	Count	Rate	Count	Rate	Count
Acute Bronchitis	0.8	146	1.1	200	1.3	238	1.5	275
Acute Respiratory Infections (ARI)	156.7	28,085	193.6	35,744	219.1	40,449	243.9	45,033
Allergic Rhinitis	8.2	1,463	8.2	1,516	7.5	1,385	7.0	1,296
Asthma	9.2	1,647	9.1	1,683	10.1	1,857	10.2	1,881
Bronchiolitis	0.9	157	1.4	255	1.4	260	1.7	317
Bullous Dermatoses	0.3	54	0.2	46	0.2	43	0.2	32
COVID-19	2.1	374	3.0	546	3.6	666	4.3	802
Chickenpox	1.5	266	1.3	248	1.6	294	1.6	294
Conjunctival Disorders	11.4	2,037	12.1	2,243	12.0	2,221	12.3	2,272
Croup	2.1	370	2.7	504	2.4	452	2.6	471
ECLD - COPD exacerbations	5.5	985	6.3	1,169	6.2	1,150	7.2	1,336
ECLD - asthma exacerbations	6.8	1,211	8.7	1,603	9.6	1,772	11.6	2,143
Exacerbations of chronic lung disease (ECLD)	12.2	2,184	15.0	2,761	15.8	2,922	18.8	3,470
Herpes Simplex	2.8	503	3.2	588	2.8	526	3.2	597
Herpes Zoster	5.7	1,020	5.3	981	5.4	995	5.8	1,067
Impetigo	4.4	788	4.4	805	5.0	925	5.5	1,009
Infected Insect Bites	5.9	1,054	4.6	850	4.7	867	4.4	807
Infectious Intestinal Diseases	6.9	1,234	6.8	1,248	6.9	1,265	7.1	1,316
Infectious Mononucleosis	0.3	62	0.4	70	0.2	45	0.2	44
Influenza-like Illness (ILI)	1.7	302	2.0	377	3.3	606	4.2	772
Laryngitis	0.6	101	0.5	100	0.6	116	0.7	130
Lower respiratory tract infections (LRTI)	47.1	8,433	56.2	10,369	64.5	11,907	76.2	14,075
Measles	0.0	4	0.0	5	0.0	7	0.0	8
Meningitis and Encephalitis	0.2	29	0.1	26	0.2	28	0.2	34
Mumps	0.0	8	0.0	9	0.1	11	0.0	9
Non-infective Enteritis and Colitis	3.0	535	2.9	528	2.9	528	2.6	476
Peripheral Nervous Disease	19.9	3,558	19.0	3,513	18.6	3,427	18.7	3,448
Pneumonia	2.6	467	2.9	540	2.8	512	3.0	555
Rubella	0.0	2	0.0	0	0.0	0	0.0	0
Scabies	3.4	614	3.0	561	3.0	556	3.6	673
Sinusitis	12.7	2,270	14.5	2,673	17.2	3,179	19.6	3,625
Skin and Subcutaneous Tissue Infections	90.0	16,130	86.5	15,966	85.5	15,780	87.5	16,162
Strep Throat and Peritonsillar Abscess	0.8	140	0.9	159	1.0	184	1.0	183
Symptoms involving Skin and Integument Tissues	128.6	23,045	120.2	22,189	120.9	22,329	119.6	22,091
Symptoms involving musculoskeletal	16.5	2,964	16.8	3,105	16.9	3,123	16.8	3,102
Tonsillitis and Pharyngitis	24.4	4,371	28.3	5,217	30.1	5,562	32.7	6,040
Upper respiratory tract infections (URTI)	100.7	18,046	125.9	23,249	142.0	26,222	153.0	28,251
Urinary Tract Infections	31.6	5,668	32.7	6,041	32.9	6,083	34.6	6,380
Viral Hepatitis	0.3	55	0.2	41	0.3	54	0.3	51
Whooping Cough	0.0	6	0.0	5	0.0	5	0.1	18

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

RC GP RESEARCH & SURVEILLANCE CENTRE

UNIVERSITY OF OXFORD