

## RSC Communicable and Respiratory Disease Report for England

### Key Statistics:

Week Number/Year..... 23/2024  
 Week Starting - Ending..... 03/06/2024 - 09/06/2024  
 No. of Practices..... 1,597  
 Population..... 16,314,424

### National (England)

- **Acute Respiratory Infections:** increased from 188.3 in week 22 to 222.4 in week 23.
- **Influenza-like illness:** increased from 1.6 in week 22 to 1.9 in week 23.
- **Exacerbations of Chronic Lung Disease:** increased from 12.3 in week 22 to 16.3 in week 23.
- **Lower Respiratory Tract Infections:** increased from 68.5 in week 22 to 78.2 in week 23.
- **Upper Respiratory Tract Infections:** increased from 113.2 in week 22 to 135.4 in week 23.
- **COVID-19:** increased from 2.7 in week 22 to 3.2 in week 23.

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

- **Acute Respiratory Infections:** increased from 145.9 in week 22 to 174.0 in week 23 in the London region, increased from 223.6 in week 22 to 269.6 in week 23 in the North region, increased from 171.1 in week 22 to 196.4 in week 23 in the South region, and increased from 208.0 in week 22 to 245.8 in week 23 in the Midlands And East region.
- **Influenza-like illness:** increased from 2.1 in week 22 to 2.8 in week 23 in the London region, decreased from 1.9 in week 22 to 1.7 in week 23 in the North region, increased from 1.4 in week 22 to 1.9 in week 23 in the South region, and increased from 1.1 in week 22 to 1.4 in week 23 in the Midlands And East region.
- **Exacerbations of Chronic Lung Disease:** increased from 7.2 in week 22 to 9.0 in week 23 in the London region, increased from 16.5 in week 22 to 23.5 in week 23 in the North region, increased from 11.7 in week 22 to 14.6 in week 23 in the South region, and increased from 12.9 in week 22 to 16.8 in week 23 in the Midlands And East region.
- **Lower Respiratory Tract Infections:** increased from 42.1 in week 22 to 48.1 in week 23 in the London region, increased from 86.7 in week 22 to 99.5 in week 23 in the North region, increased from 64.7 in week 22 to 71.9 in week 23 in the South region, and increased from 75.0 in week 22 to 88.0 in week 23 in the Midlands And East region.
- **Upper Respiratory Tract Infections:** increased from 98.7 in week 22 to 120.4 in week 23 in the London region, increased from 128.8 in week 22 to 158.3 in week 23 in the North region, increased from 100.6 in week 22 to 116.9 in week 23 in the South region, and increased from 125.4 in week 22 to 148.3 in week 23 in the Midlands And East region.
- **COVID-19:** increased from 2.2 in week 22 to 2.6 in week 23 in the London region, increased from 2.9 in week 22 to 3.4 in week 23 in the North region, increased from 2.9 in week 22 to 3.3 in week 23 in the South region, and increased from 2.7 in week 22 to 3.2 in week 23 in the Midlands And East region.

### Comment:

Overall presentations of acute respiratory infections (ARI) have increased this week to approximately 222 first or new cases in 100,000 people though they are below values during the weeks before the bank holiday (page 6). Rates of influenza-like illness (ILI) have also increased with the seasonal trend (page 2). Rates of COVID-19 increased a little across all regions and age bands except the population aged under 1 and 65 years and over (page 5). We anticipate hay fever/allergic rhinitis (page 13) peaking in the coming weeks.

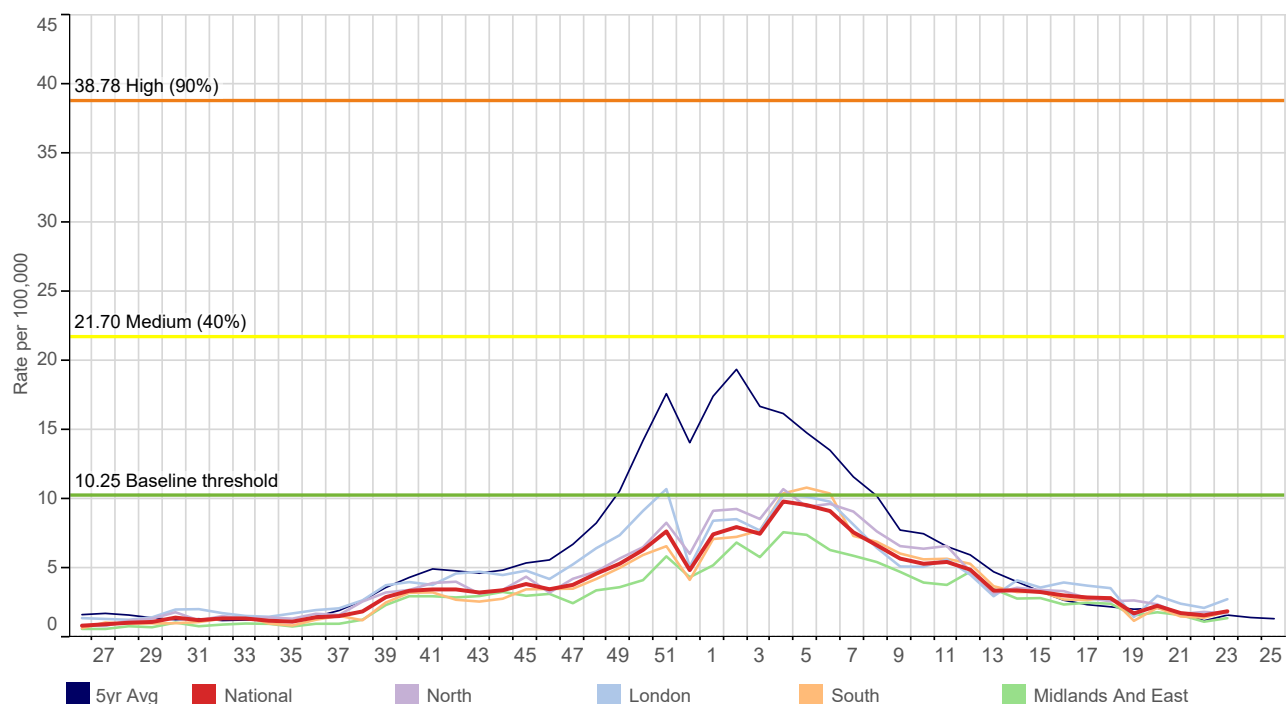
Rates remain elevated and above the seasonal average for measles and whooping cough (page 14), and scabies (page 15).

This report includes a respiratory virology update. SARS-CoV-2, influenza and RSV are the predominant circulating viruses detected by the UK Health Security Agency (UKHSA) Reference Virology Lab.

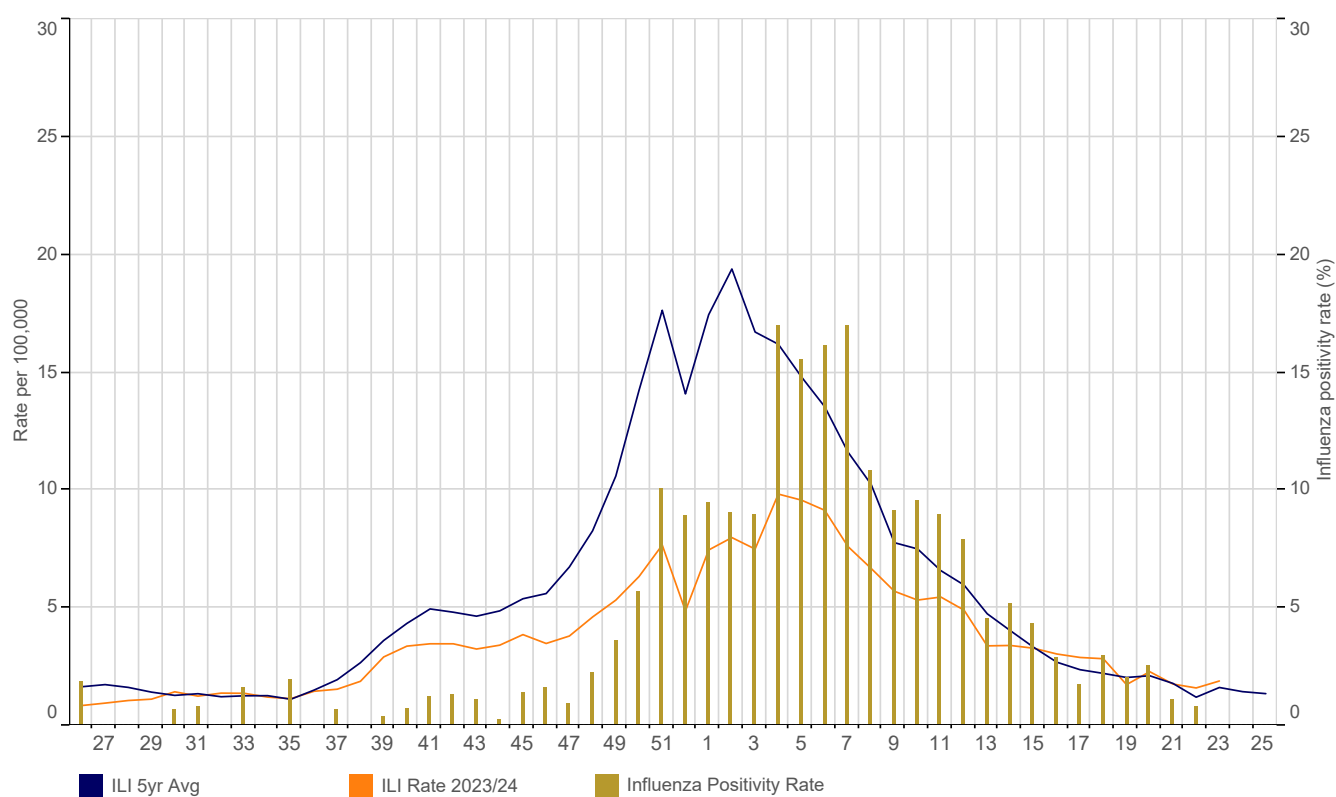
## 2023/24 Focus

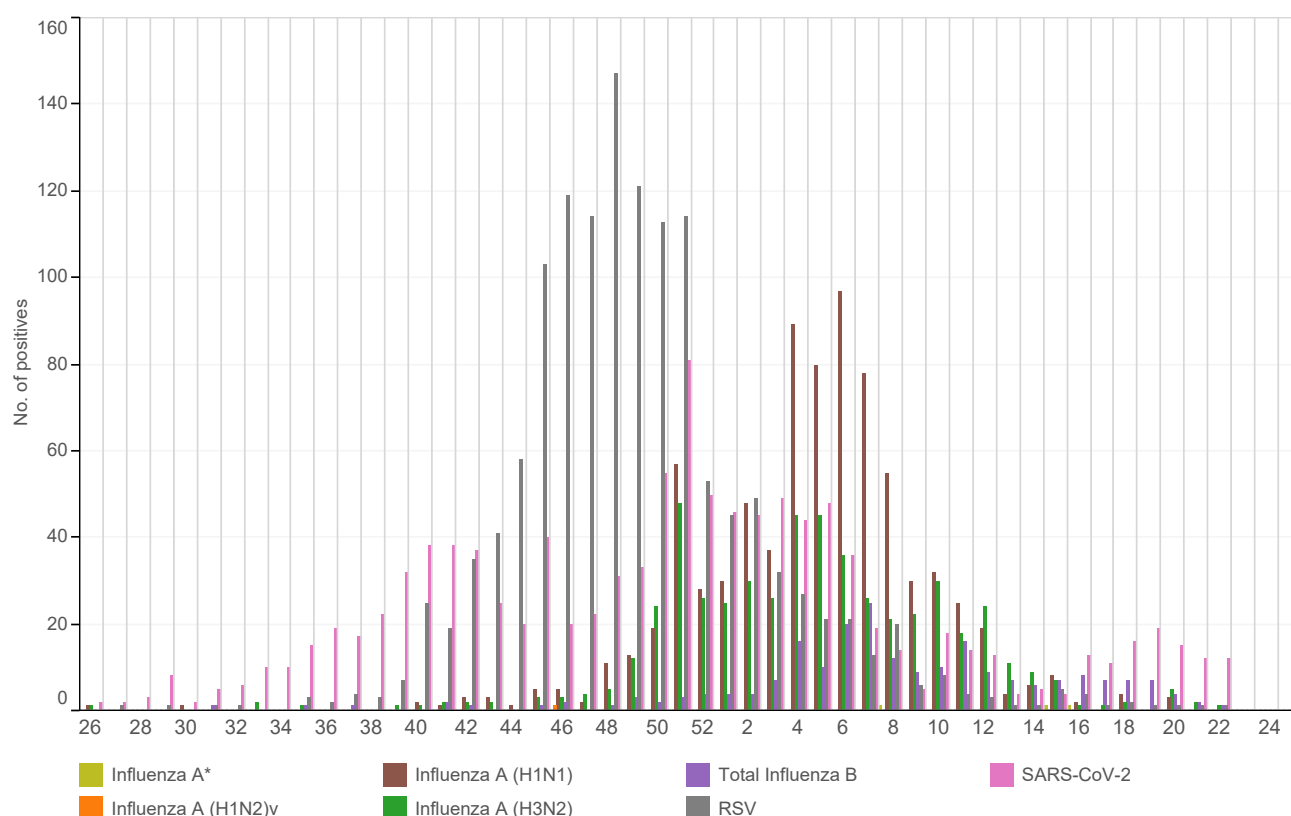
Please see page 19 for explanatory notes on the data.

### (A) Influenza-like illness: national incidence rate 2023/24 by region



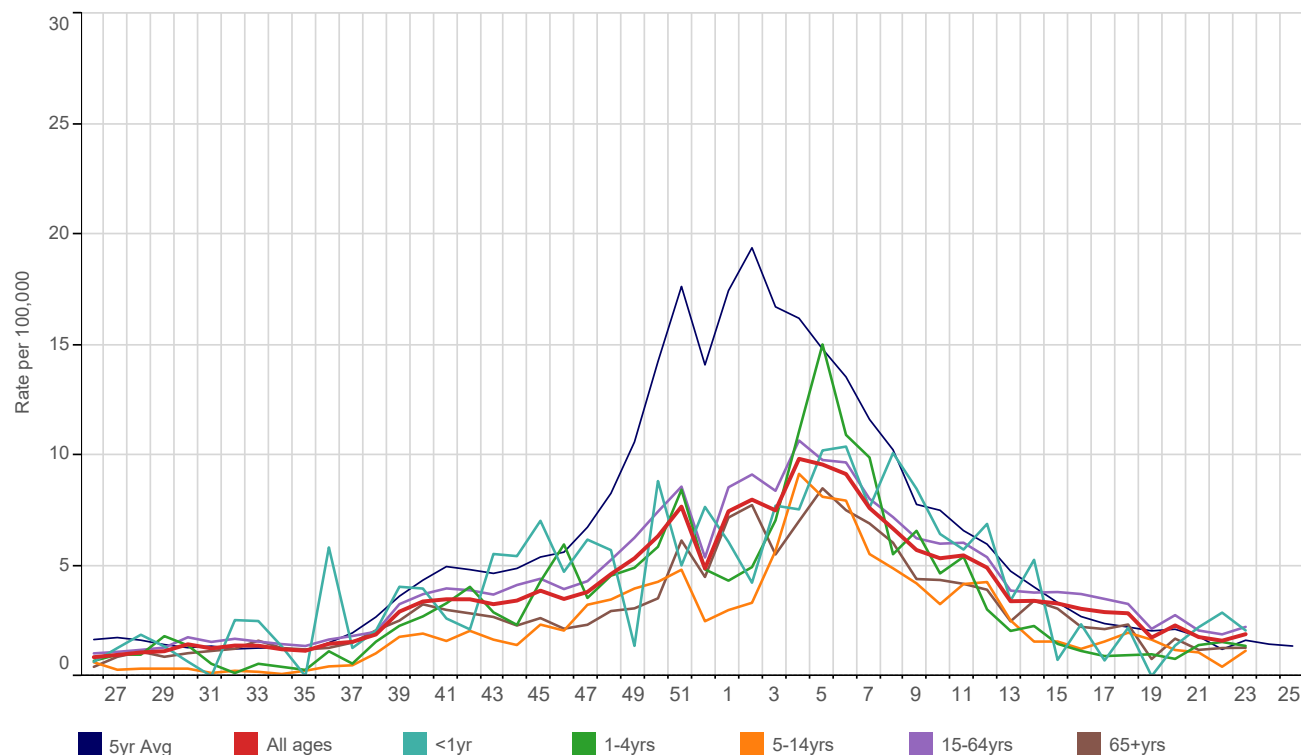
### (B) RCGP/UKHSA Influenza Virology Swab Surveillance 2023/24



**(C) RCGP/UKHSA RSV, Influenza and SARS-CoV-2 Virology Swab Surveillance 2023/24 by viral strain**

The weekly virology samples displayed are offset from the ISO Week (Graph C).

\*No specified subtype, or coinfection with H1N1 and H3N2.

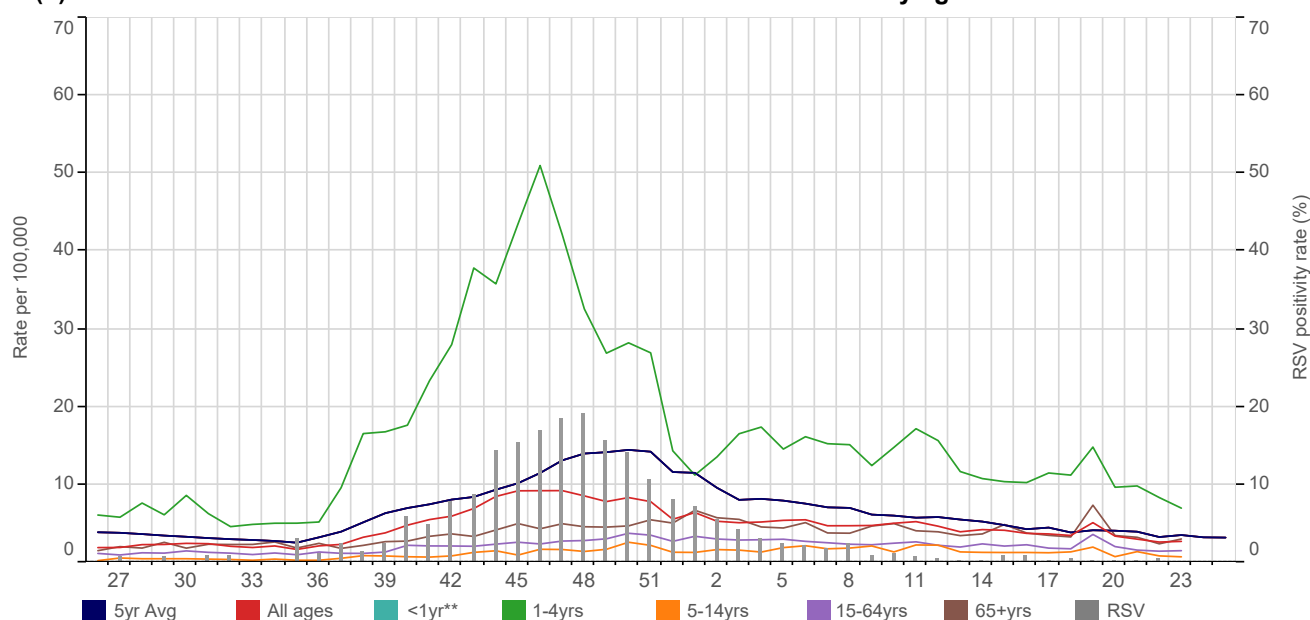
**(D) Influenza-like illness: national incidence rate 2023/24 by age band**

**(E) Influenza-like illness: national incidence rate 2023/24 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 - the ranges are shown in the table Threshold levels by age band.

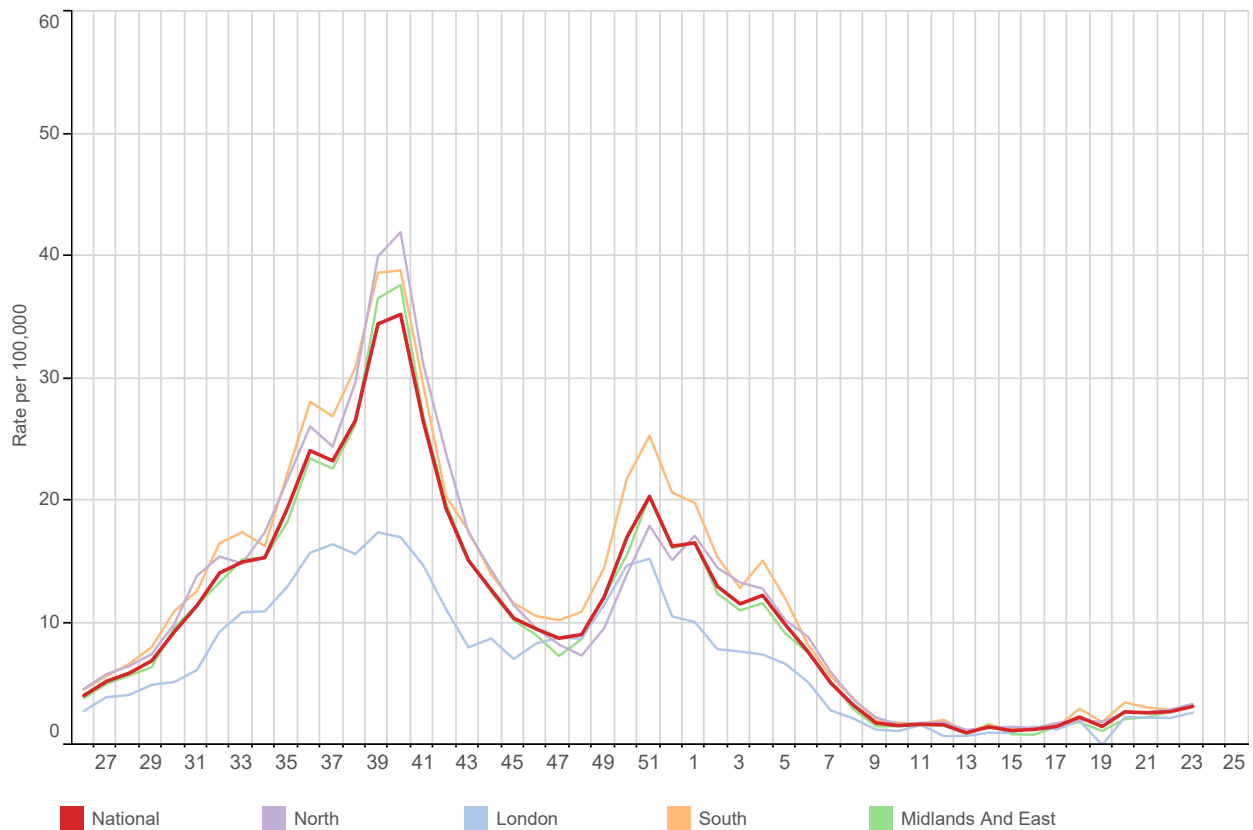
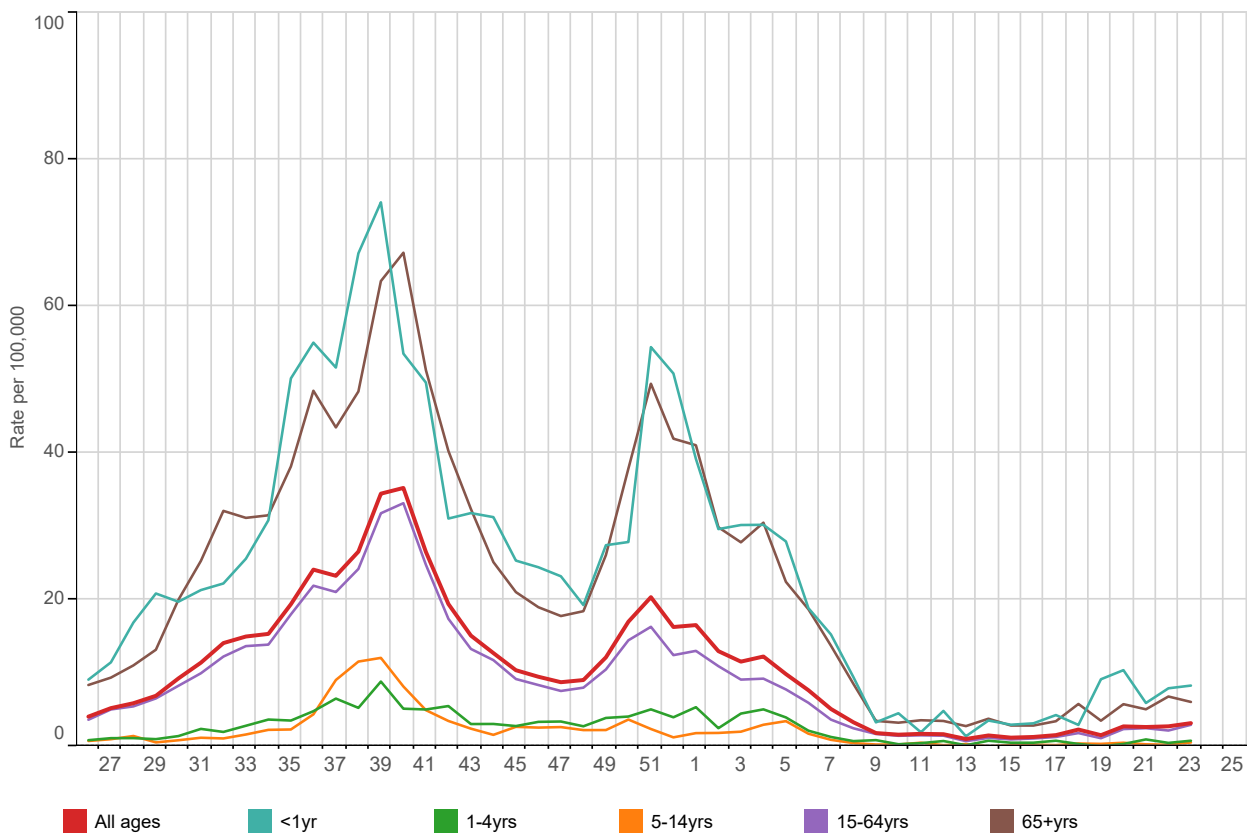
Table 1	42	43	44	45	46	47	48	49	50	51	52	1	2	3	4	5	6	7
1-4yrs	4.0	2.9	2.3	4.3	6.0	3.5	4.5	4.9	5.9	8.4	4.8	4.3	4.9	7.1	11.1	15.0	10.9	9.9
5-14yrs	2.1	1.7	1.4	2.3	2.1	3.2	3.5	4.0	4.3	4.8	2.5	3.0	3.3	5.7	9.2	8.1	7.9	5.5
15-64yrs	3.9	3.7	4.1	4.4	3.9	4.3	5.3	6.3	7.4	8.6	5.4	8.6	9.1	8.4	10.7	9.8	9.7	8.0
65+yrs	2.8	2.7	2.3	2.6	2.1	2.3	2.9	3.1	3.5	6.1	4.5	7.2	7.7	5.5	7.0	8.5	7.5	6.9
All ages	3.5	3.3	3.4	3.9	3.5	3.8	4.6	5.3	6.3	7.7	4.9	7.5	8.0	7.5	9.8	9.6	9.1	7.6
	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25
1-4yrs	5.5	6.6	4.7	5.4	3.0	2.0	2.3	1.5	1.1	0.9	0.9	1.0	0.8	1.4	1.5	1.4		
5-14yrs	4.9	4.2	3.3	4.2	4.3	2.5	1.6	1.6	1.2	1.6	2.0	1.7	1.2	1.1	0.4	1.1		
15-64yrs	7.2	6.2	6.0	6.0	5.4	3.9	3.8	3.8	3.7	3.5	3.3	2.1	2.8	2.1	1.9	2.2		
65+yrs	6.0	4.4	4.4	4.2	3.9	2.5	3.4	3.1	2.2	2.1	2.3	0.8	1.7	1.2	1.3	1.3		
All ages	6.7	5.7	5.3	5.5	4.9	3.4	3.4	3.3	3.0	2.9	2.8	1.7	2.3	1.8	1.6	1.9		

Table 2	Below Threshold <sup>1</sup>	Threshold to Medium <sup>2</sup>	Medium to High <sup>3</sup>	High to Very High <sup>4</sup>	Above Very High <sup>5</sup>
1-4yrs	<8.05	8.05 to 15.57	15.58 to 23.50	23.51 to 28.19	28.20+
5-14yrs	<6.53	6.53 to 15.55	15.56 to 32.18	32.19 to 44.39	44.40+
15-64yrs	<12.23	12.23 to 24.53	24.54 to 45.08	45.09 to 58.99	59.00+
65+yrs	<9.62	9.62 to 16.69	16.70 to 35.98	35.99 to 50.52	50.53+
All Ages	<10.25	10.25 to 21.69	21.70 to 38.77	38.78 to 50.11	50.12+

**Threshold levels**<sup>1</sup>Below baseline threshold<sup>2</sup>baseline threshold breach to < 40th percentile<sup>3</sup>40th to <90th percentile<sup>4</sup>90th to <97.5th percentile<sup>5</sup>97.5th+ percentile**(F) Acute Bronchitis and Bronchiolitis: national incidence rate 2023/24 by age band****Weekly Influenza-like illness and Acute Bronchitis and Bronchiolitis incidence rates per 100,000 persons**

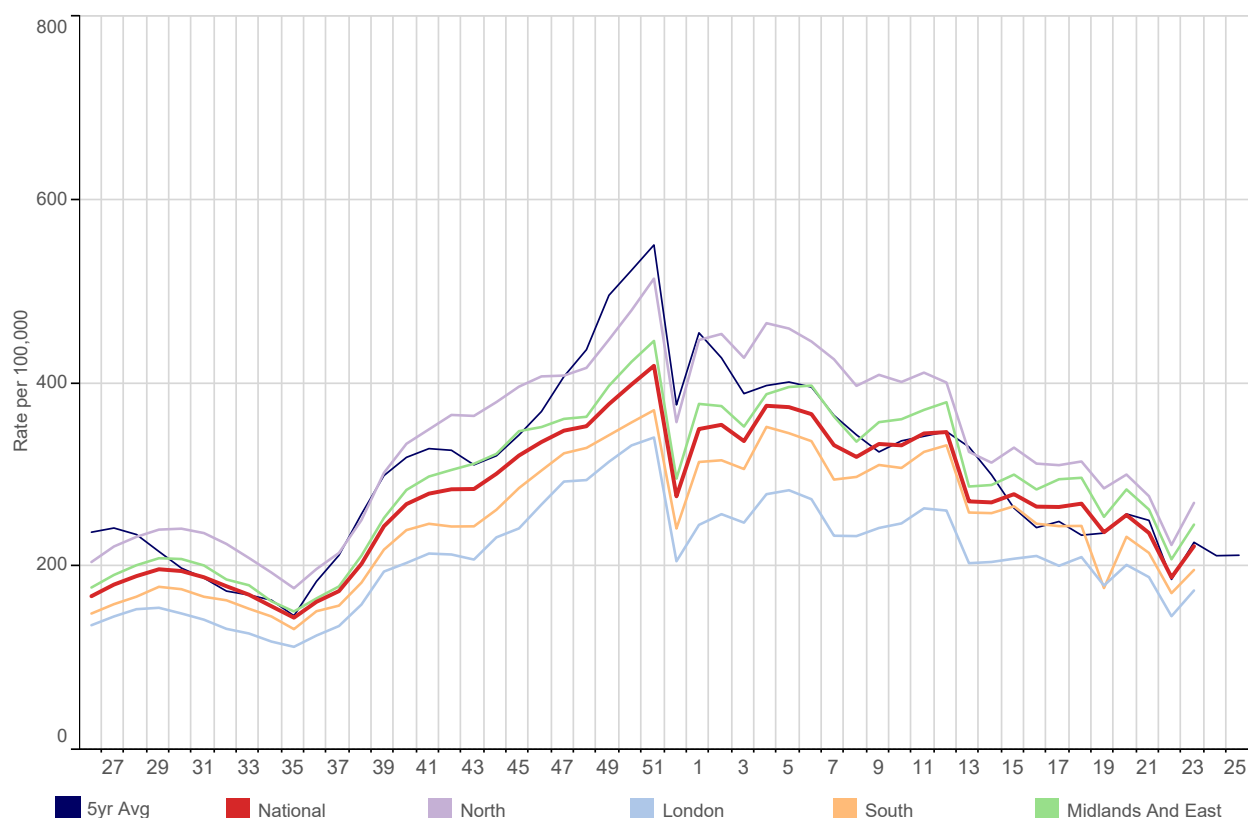
Influenza-like illness		Acute Bronchitis and Bronchiolitis		Influenza-like illness		Acute Bronchitis and Bronchiolitis	
<1yr	2.1	91.8	London	2.8	2.0		
1-4yrs	1.4	7.0	North	1.7	3.2		
5-14yrs	1.1	0.7	South	1.9	2.2		
15-24yrs	1.6	1.0	Midlands And East	1.4	3.5		
25-44yrs	2.7	1.4	National	1.9	2.7		
45-64yrs	2.0	1.9					
65-74yrs	1.7	2.7					
75-84yrs	1.1	3.6					
85+yrs	0.5	2.8					
All ages	1.9	2.7					

\*\*The <1yr age band is not presented (Graph F).

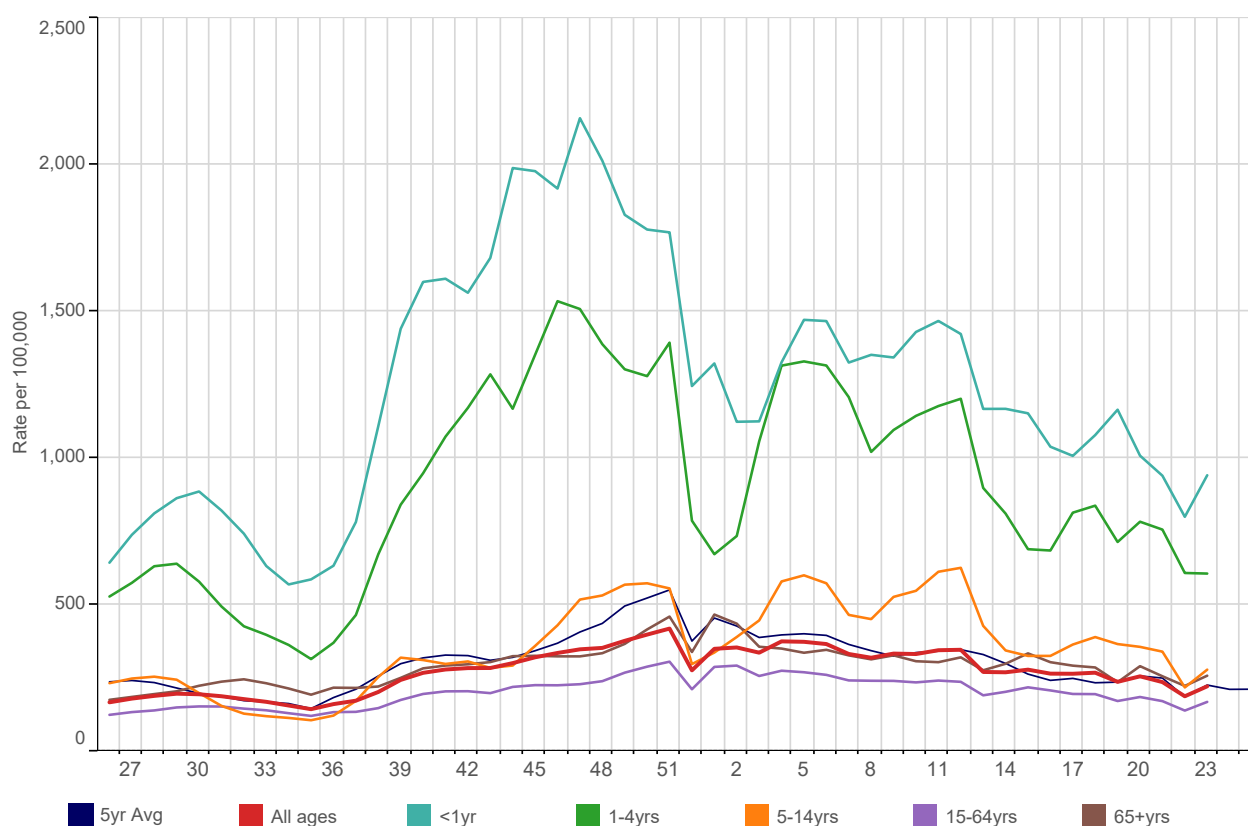
**(G) COVID-19: national incidence rate 2023/24 by region****(H) COVID-19: national incidence rate 2023/24 by age band**

# 1. Respiratory Infections

## (I) Acute Respiratory Infections (ARI): national incidence rate 2023/24 by region



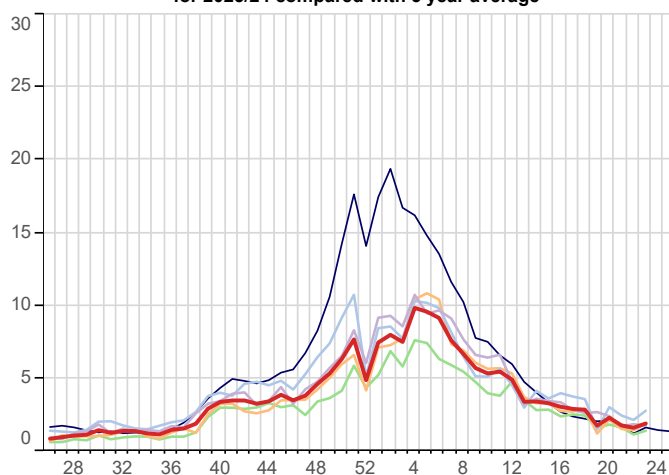
## (J) Acute Respiratory Infections (ARI): national incidence rate 2023/24 by age band



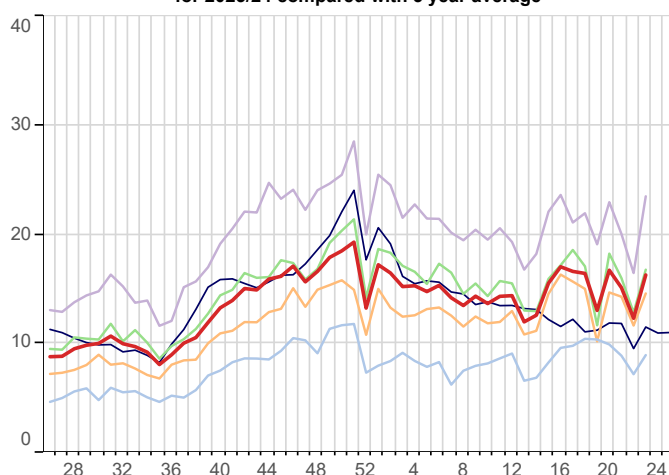
1. Respiratory Infections - *by region*

5yr Avg    National    South  
 North    Midlands And East  
 London

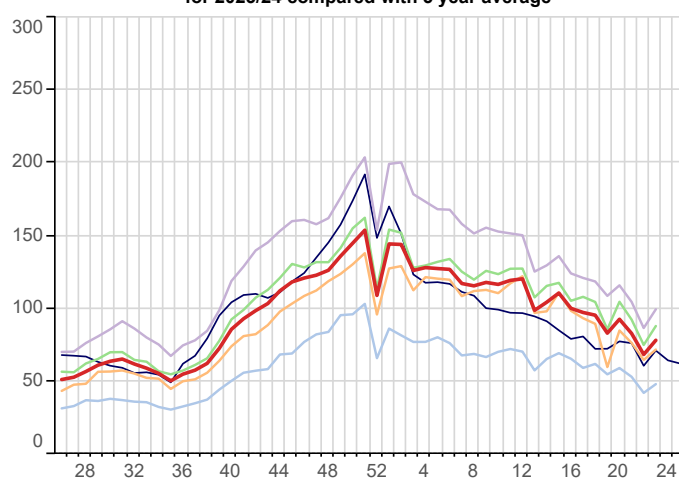
**Influenza-like illness (ILI)**  
 Weekly incidence (per 100,000 all ages) by region  
 for 2023/24 compared with 5 year average



**Exacerbations of Chronic Lung Disease (ECLD)**  
 Weekly incidence (per 100,000 all ages) by region  
 for 2023/24 compared with 5 year average

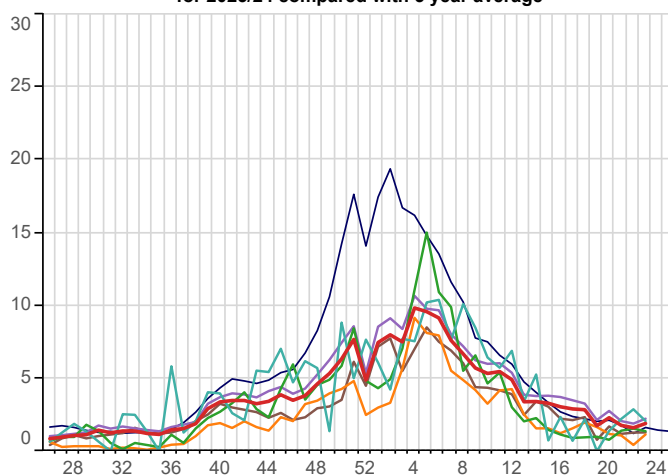


**Lower Respiratory Tract Infections (LRTI)**  
 Weekly incidence (per 100,000 all ages) by region  
 for 2023/24 compared with 5 year average

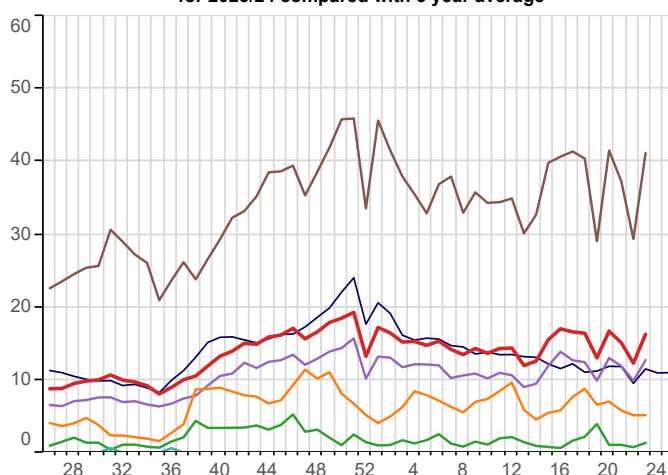
1. Respiratory Infections - *by age band*

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

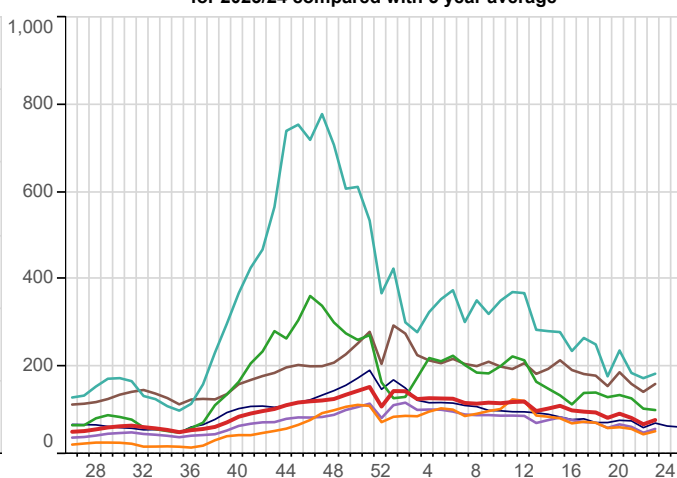
**Influenza-like illness (ILI)**  
 Weekly incidence (per 100,000 all regions) by age band  
 for 2023/24 compared with 5 year average



**Exacerbations of Chronic Lung Disease (ECLD)**  
 Weekly incidence (per 100,000 all regions) by age band  
 for 2023/24 compared with 5 year average



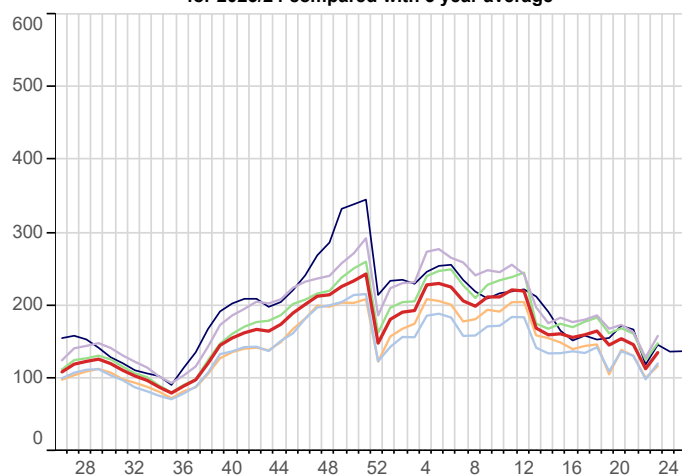
**Lower Respiratory Tract Infections (LRTI)**  
 Weekly incidence (per 100,000 all regions) by age band  
 for 2023/24 compared with 5 year average



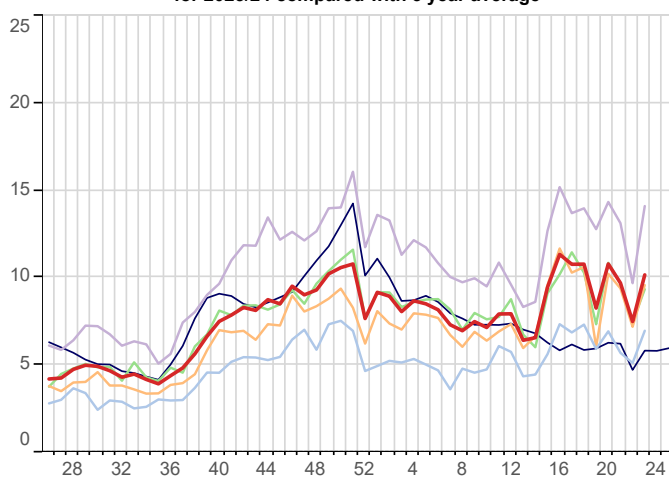
1. Respiratory Infections - *by region*

5yr Avg   National   South  
 North   Midlands And East  
 London

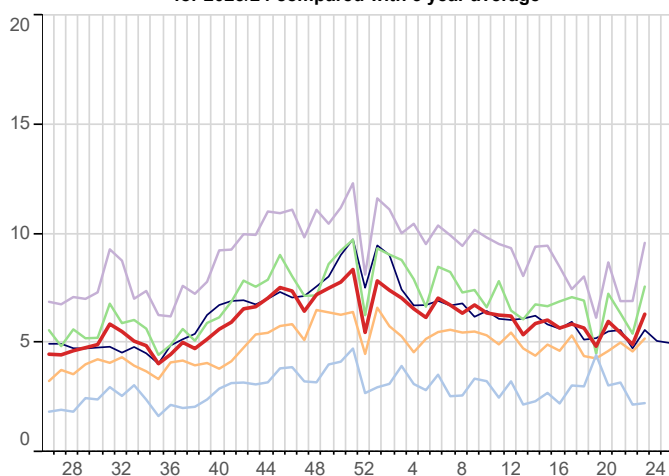
**Upper Respiratory Tract Infections (URTI)**  
 Weekly incidence (per 100,000 all ages) by region  
 for 2023/24 compared with 5 year average



**Exacerbations of Chronic Lung Disease (ECLD) - Asthma Exacerbations**  
 Weekly incidence (per 100,000 all ages) by region  
 for 2023/24 compared with 5 year average

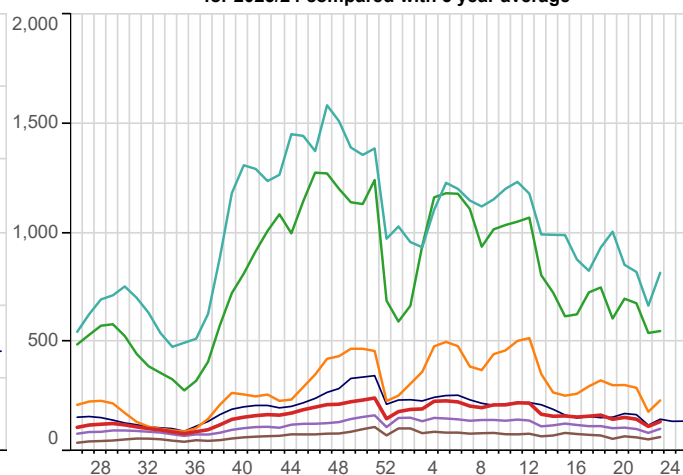


**Exacerbations of Chronic Lung Disease (ECLD) - COPD Exacerbations**  
 Weekly incidence (per 100,000 all ages) by region  
 for 2023/24 compared with 5 year average

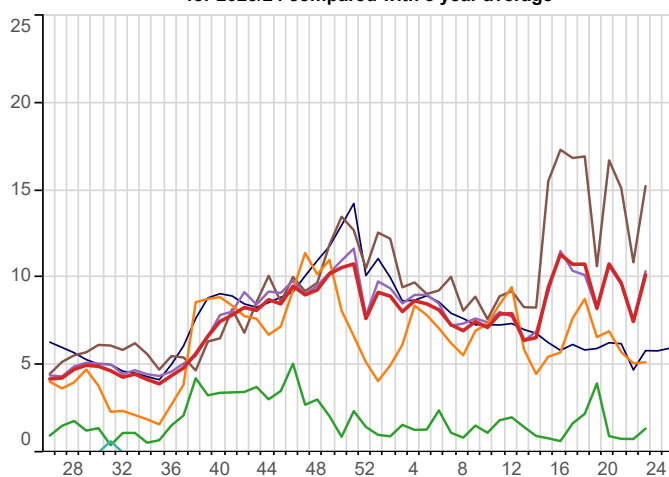
1. Respiratory Infections - *by age band*

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

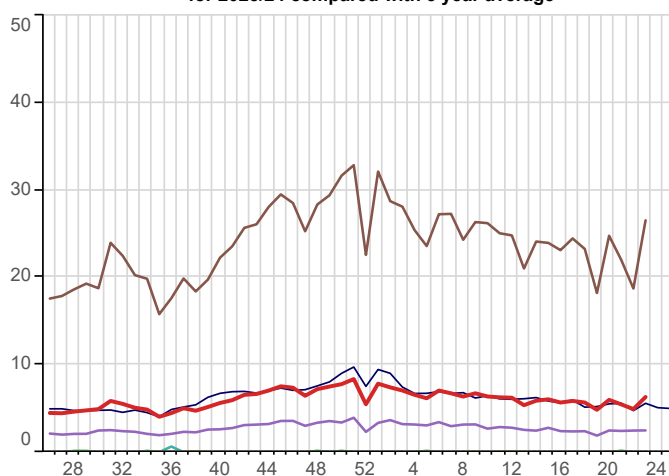
**Upper Respiratory Tract Infections (URTI)**  
 Weekly incidence (per 100,000 all regions) by age band  
 for 2023/24 compared with 5 year average



**Exacerbations of Chronic Lung Disease (ECLD) - Asthma Exacerbations**  
 Weekly incidence (per 100,000 all regions) by age band  
 for 2023/24 compared with 5 year average



**Exacerbations of Chronic Lung Disease (ECLD) - COPD Exacerbations**  
 Weekly incidence (per 100,000 all regions) by age band  
 for 2023/24 compared with 5 year average

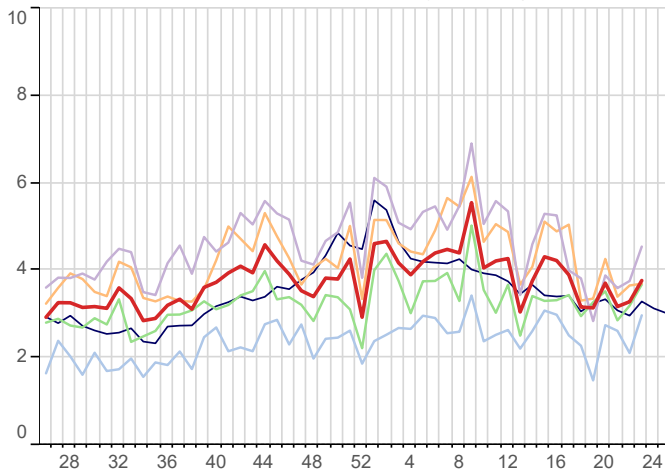




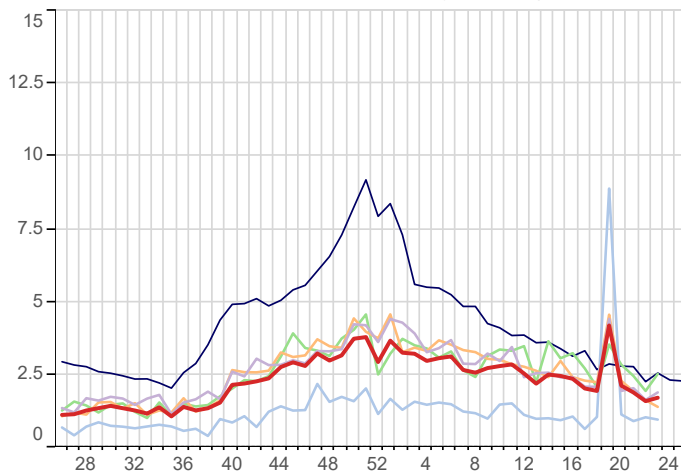
## 1. Respiratory Infections - *by region*



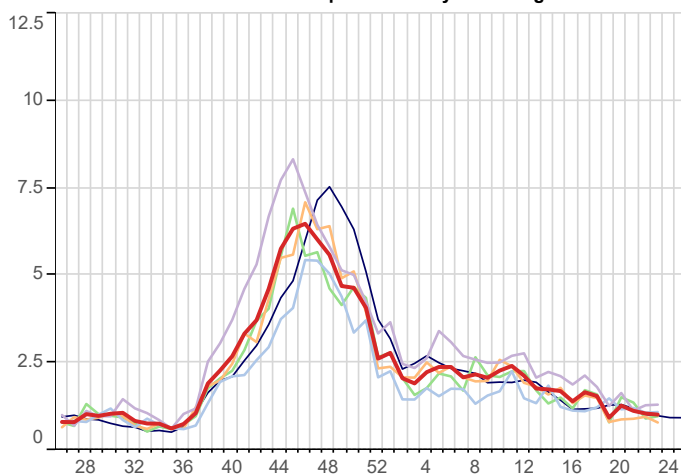
**Lower Respiratory Tract Infections (LRTI) - Pneumonia**  
Weekly incidence (per 100,000 all ages) by region  
for 2023/24 compared with 5 year average



**Lower Respiratory Tract Infections (LRTI) - Acute Bronchitis**  
Weekly incidence (per 100,000 all ages) by region  
for 2023/24 compared with 5 year average



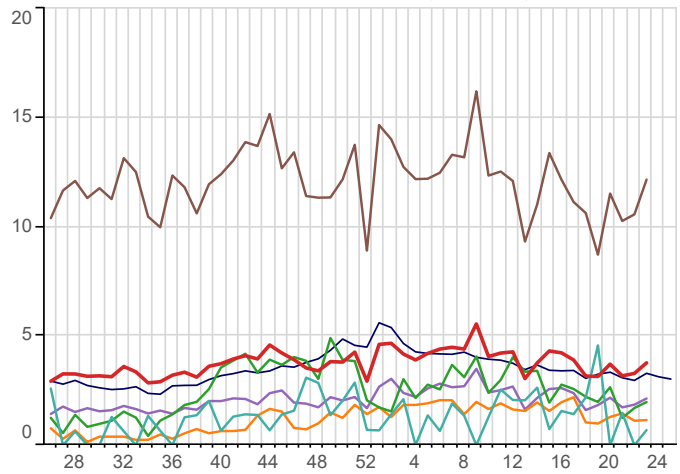
**Lower Respiratory Tract Infections (LRTI) - Bronchiolitis**  
Weekly incidence (per 100,000 all ages) by region  
for 2023/24 compared with 5 year average



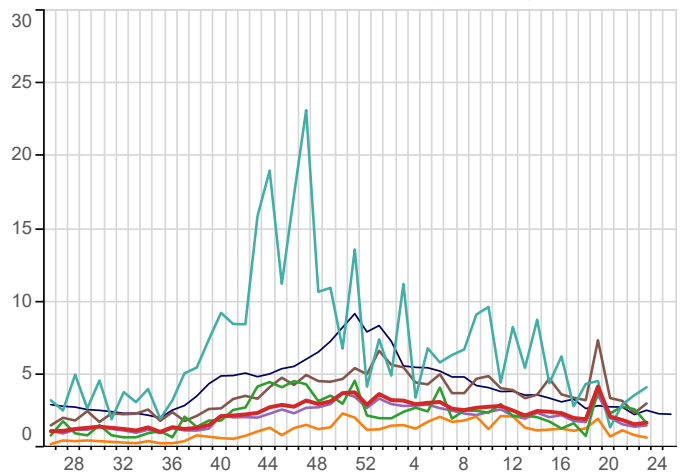
## 1. Respiratory Infections - *by age band*



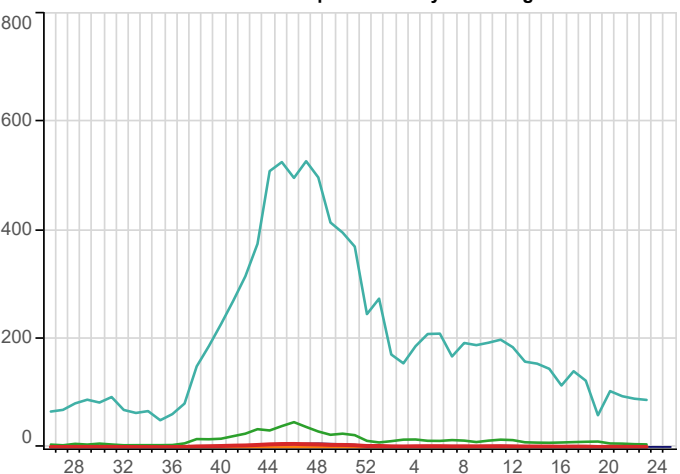
**Lower Respiratory Tract Infections (LRTI) - Pneumonia**  
Weekly incidence (per 100,000 all regions) by age band  
for 2023/24 compared with 5 year average



**Lower Respiratory Tract Infections (LRTI) - Acute Bronchitis**  
Weekly incidence (per 100,000 all regions) by age band  
for 2023/24 compared with 5 year average



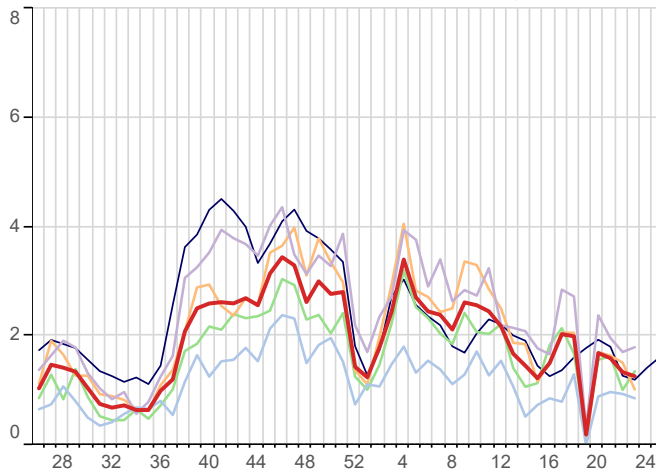
**Lower Respiratory Tract Infections (LRTI) - Bronchiolitis**  
Weekly incidence (per 100,000 all regions) by age band  
for 2023/24 compared with 5 year average



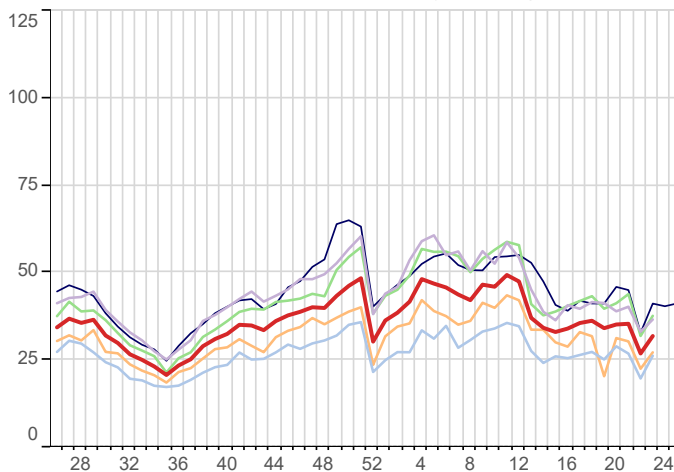
# 1. Respiratory Infections - *by region*



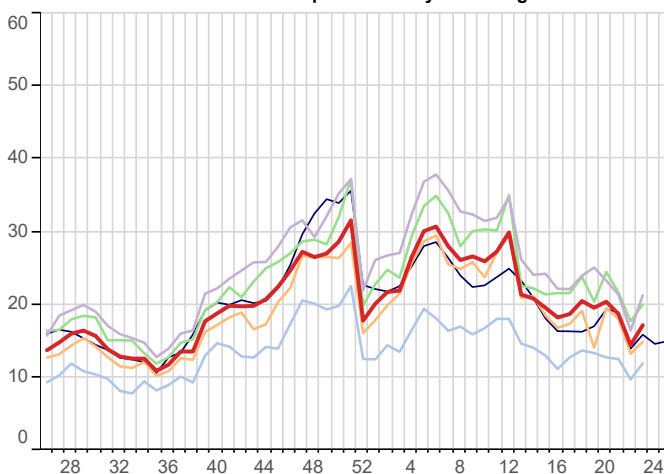
**Upper Respiratory Tract Infections (URTI) - Croup**  
Weekly incidence (per 100,000 all ages) by region  
for 2023/24 compared with 5 year average



**Upper Respiratory Tract Infections (URTI) - Tonsillitis/Pharyngitis**  
Weekly incidence (per 100,000 all ages) by region  
for 2023/24 compared with 5 year average



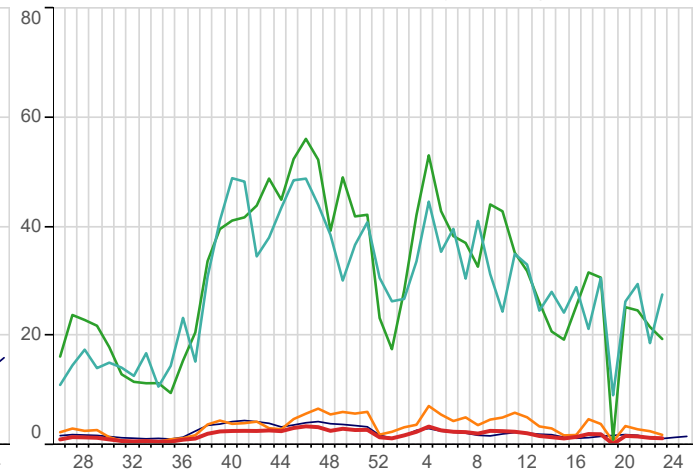
**Upper Respiratory Tract Infections (URTI) - Otitis Media**  
Weekly incidence (per 100,000 all ages) by region  
for 2023/24 compared with 5 year average



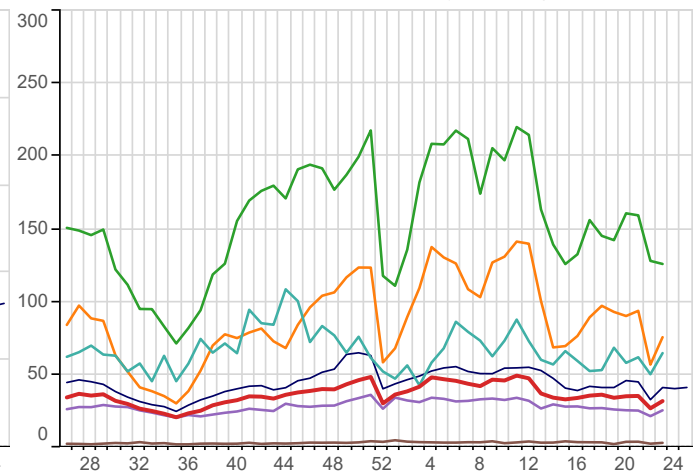
# 1. Respiratory Infections - *by age band*



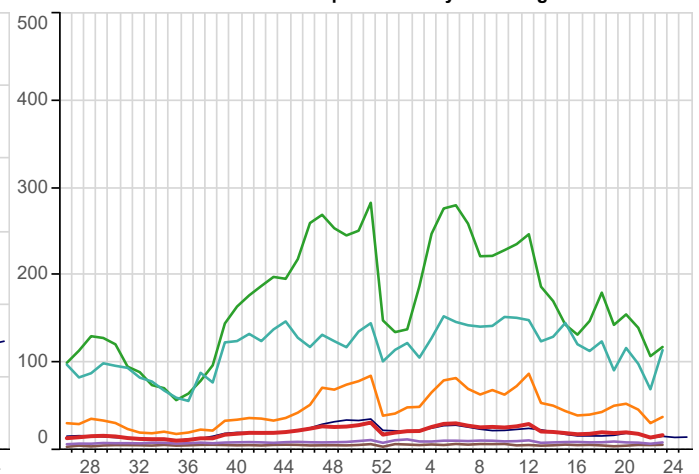
**Upper Respiratory Tract Infections (URTI) - Croup**  
Weekly incidence (per 100,000 all regions) by age band  
for 2023/24 compared with 5 year average



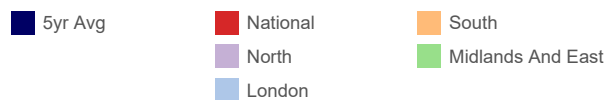
**Upper Respiratory Tract Infections (URTI) - Tonsillitis/Pharyngitis**  
Weekly incidence (per 100,000 all regions) by age band  
for 2023/24 compared with 5 year average



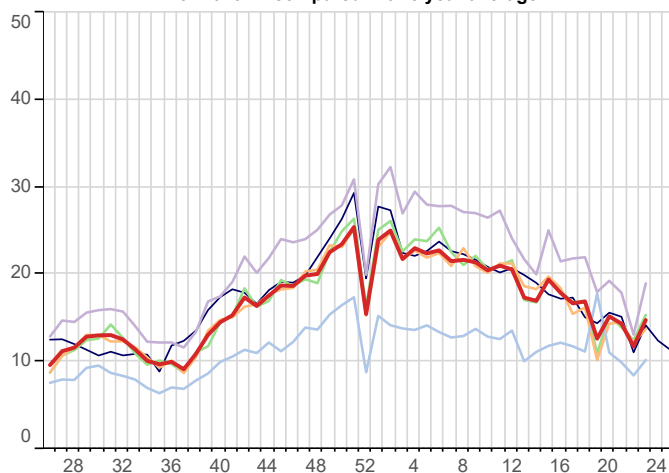
**Upper Respiratory Tract Infections (URTI) - Otitis Media**  
Weekly incidence (per 100,000 all regions) by age band  
for 2023/24 compared with 5 year average



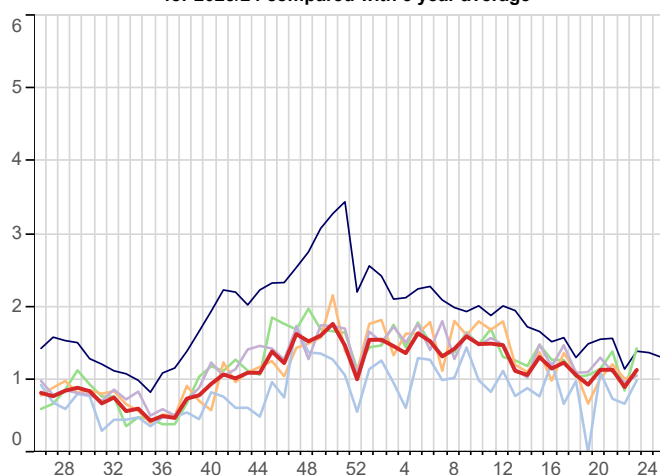
## 1. Respiratory Infections - *by region*



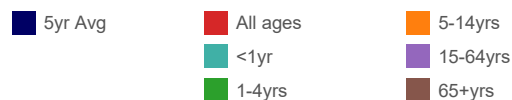
**Upper Respiratory Tract Infections (URTI) - Sinusitis**  
Weekly incidence (per 100,000 all ages) by region  
for 2023/24 compared with 5 year average



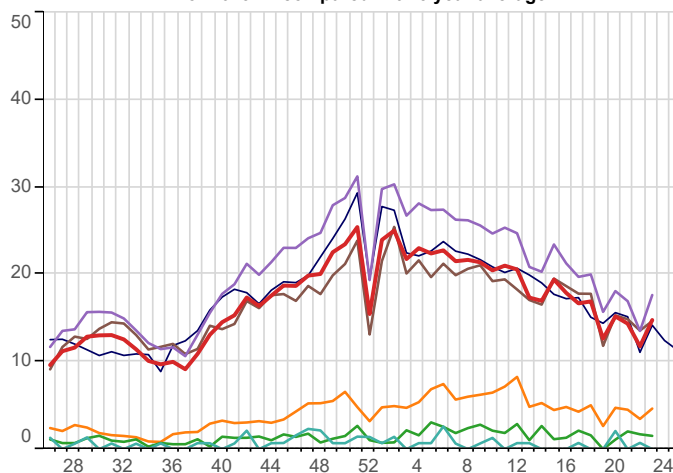
**Upper Respiratory Tract Infections (URTI) - Laryngitis**  
Weekly incidence (per 100,000 all ages) by region  
for 2023/24 compared with 5 year average



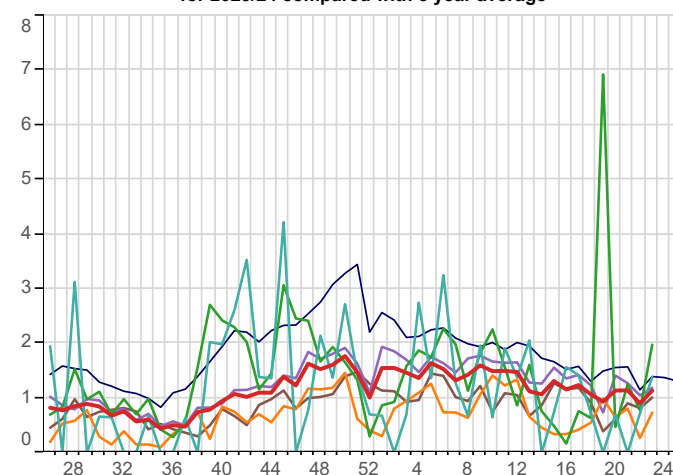
## 1. Respiratory Infections - *by age band*



**Upper Respiratory Tract Infections (URTI) - Sinusitis**  
Weekly incidence (per 100,000 all ages) by region  
for 2023/24 compared with 5 year average



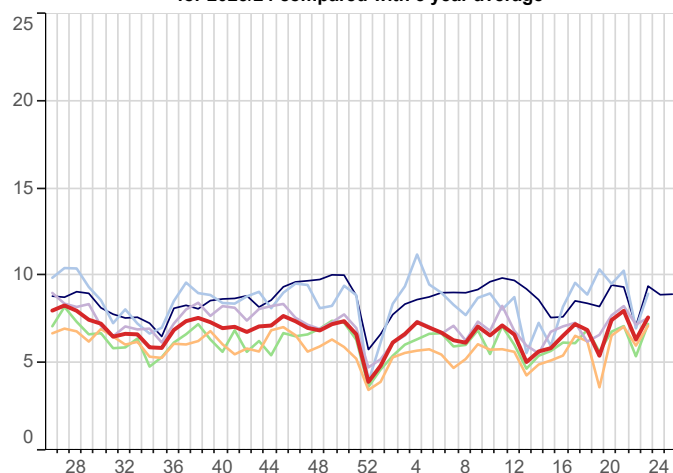
**Upper Respiratory Tract Infections (URTI) - Laryngitis**  
Weekly incidence (per 100,000 all ages) by region  
for 2023/24 compared with 5 year average



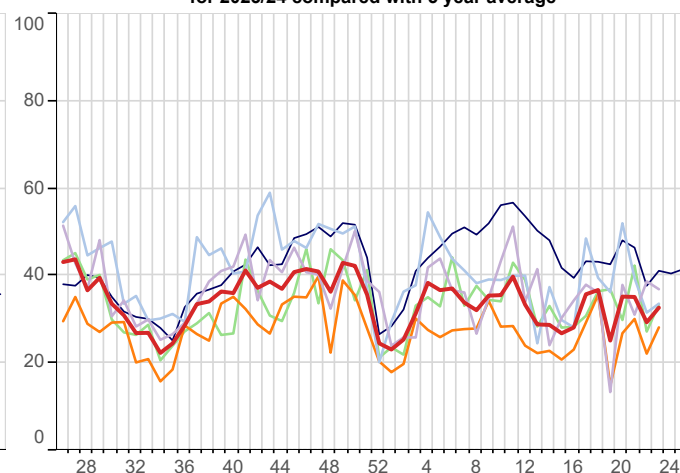
## 2. Water & Food Borne Disorders

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

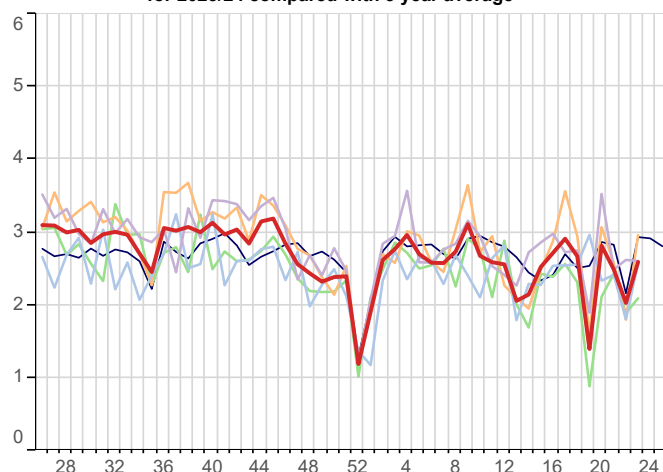
**Infectious Intestinal Disease (ICD10: A00-A09)**  
Weekly incidence (per 100,000 **all ages**) by region  
for 2023/24 compared with 5 year average



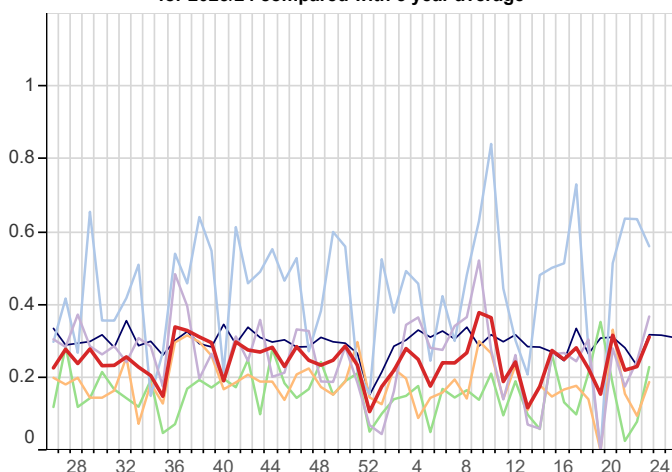
**Infectious Intestinal Disease (ICD10: A00-A09)**  
Weekly incidence (per 100,000 **0-4 years**) by region  
for 2023/24 compared with 5 year average



**Non-Infective Enteritis & Colitis (ICD10: K50-K52)**  
Weekly incidence (per 100,000 **all ages**) by region  
for 2023/24 compared with 5 year average



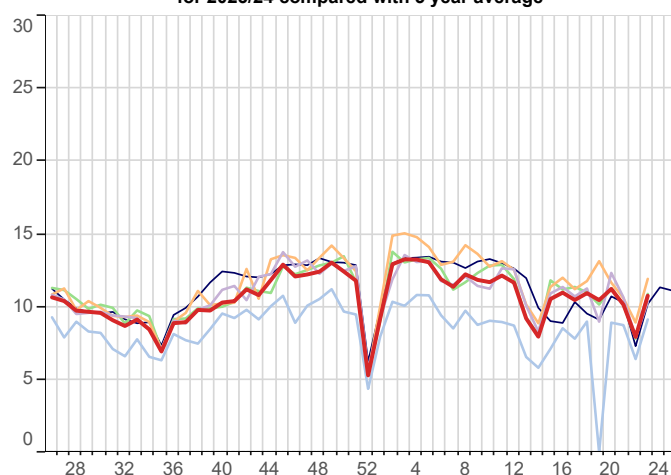
**Viral Hepatitis (ICD10: B15-B19)**  
Weekly incidence (per 100,000 **all ages**) by region  
for 2023/24 compared with 5 year average



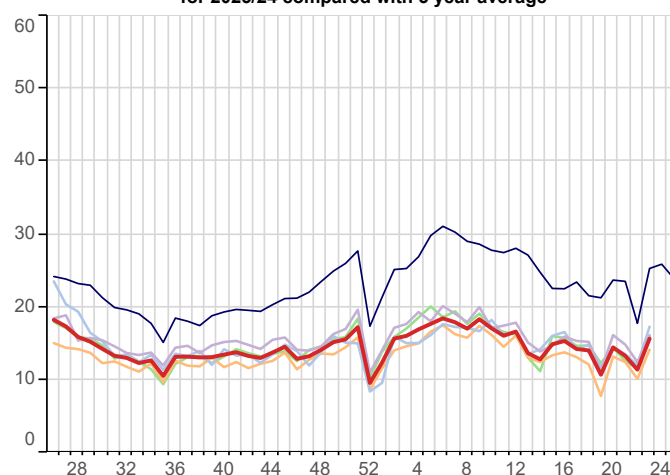
### 3. Environmentally Sensitive Disorders

5yr Avg   National   North   London   South   Midlands And East

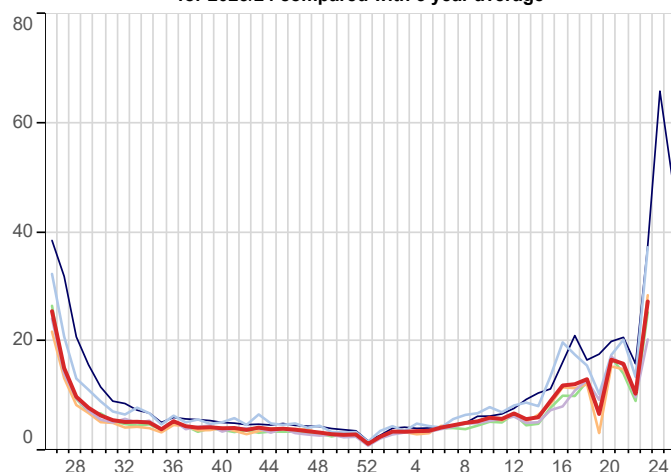
**Asthma (ICD10: J45-J46)**  
Weekly incidence (per 100,000 all ages) by region  
for 2023/24 compared with 5 year average



**Disorders of Conjunctiva (ICD10: H10-H13)**  
Weekly incidence (per 100,000 all ages) by region  
for 2023/24 compared with 5 year average



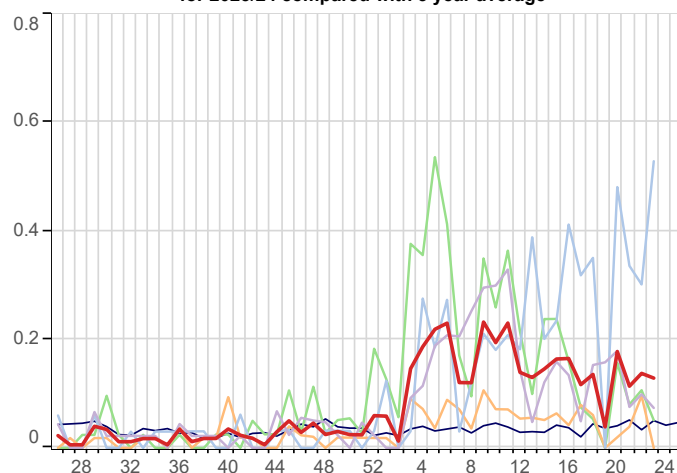
**Hayfever/Allergic Rhinitis (ICD10: J30)**  
Weekly incidence (per 100,000 all ages) by region  
for 2023/24 compared with 5 year average



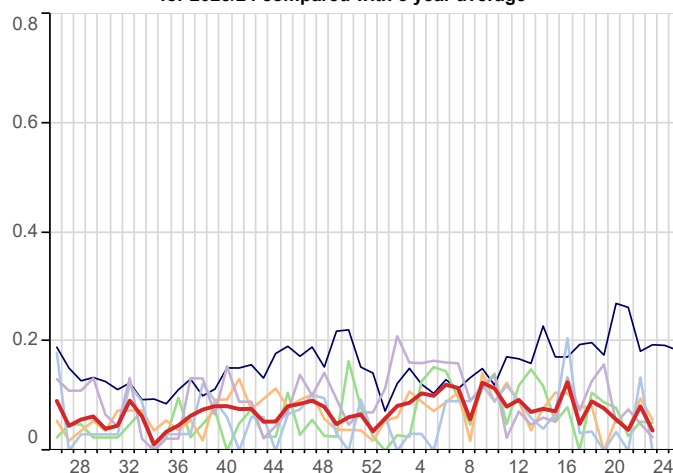
## 4. Vaccine Sensitive Disorders

5yr Avg   National   North   London   South   Midlands And East

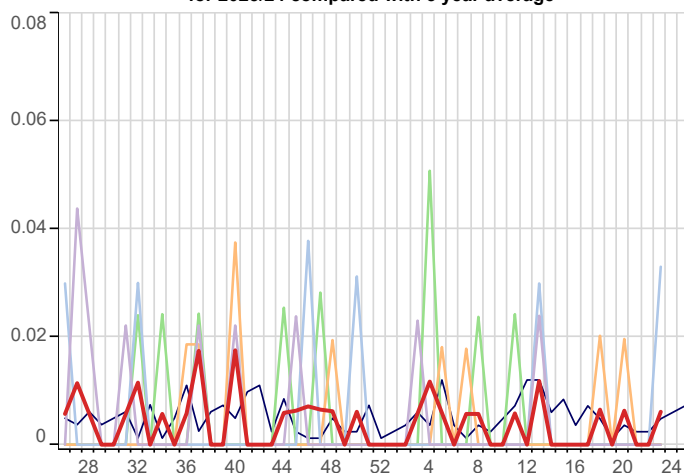
**Measles (ICD10: B05)**  
Weekly incidence (per 100,000 all ages) by region  
for 2023/24 compared with 5 year average



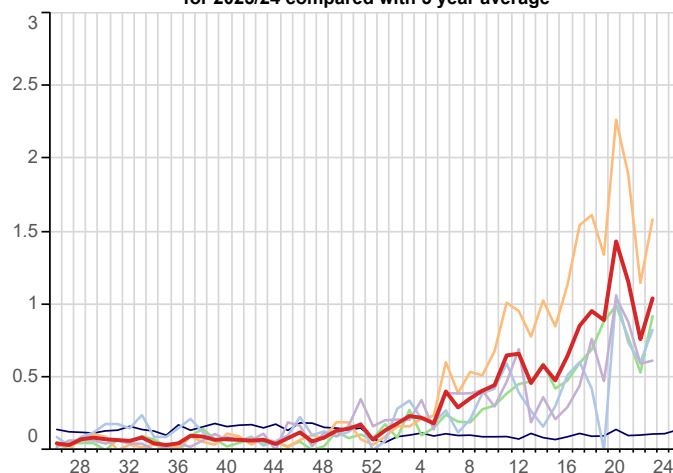
**Mumps (ICD10: B26)**  
Weekly incidence (per 100,000 all ages) by region  
for 2023/24 compared with 5 year average



**Rubella (ICD10: B06)**  
Weekly incidence (per 100,000 all ages) by region  
for 2023/24 compared with 5 year average

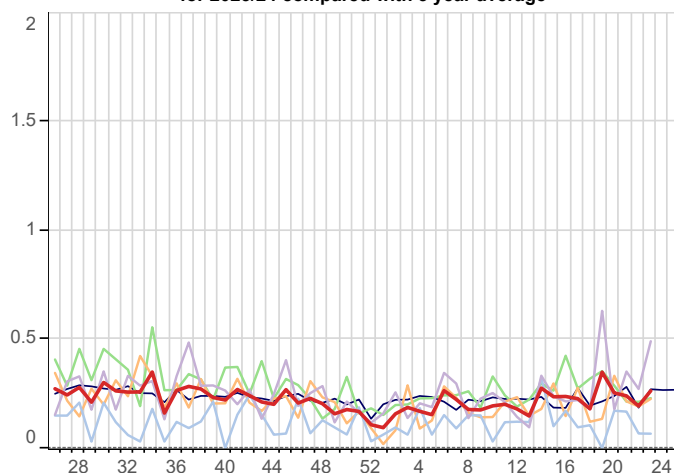


**Whooping Cough (ICD10: A37)**  
Weekly incidence (per 100,000 all ages) by region  
for 2023/24 compared with 5 year average

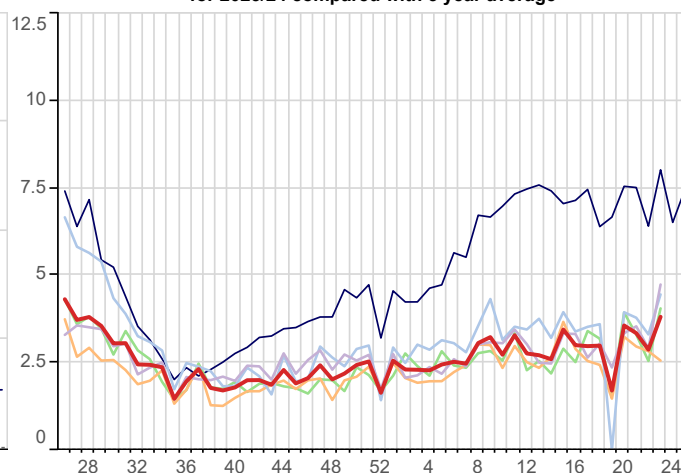


## 5. Skin Contagions

**Bullous Dermatoses (ICD10: L10-L14)**  
Weekly incidence (per 100,000 all ages) by region  
for 2023/24 compared with 5 year average



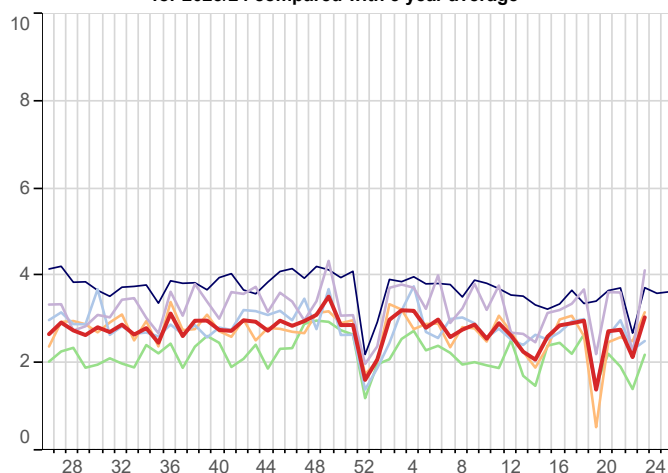
**Chickenpox (ICD10: B01)**  
Weekly incidence (per 100,000 all ages) by region  
for 2023/24 compared with 5 year average



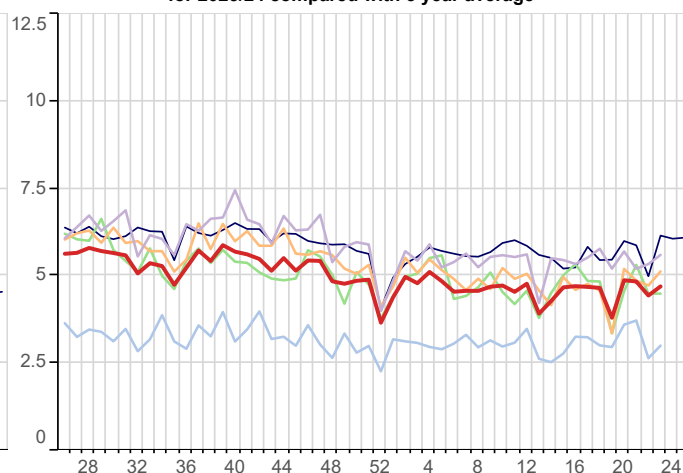
## 5. Skin Contagions (Continued)

5yr Avg   National   North   London   South   Midlands And East

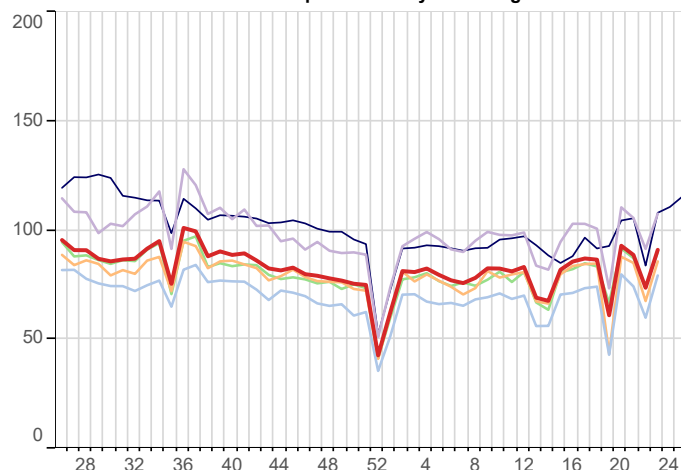
**Herpes Simplex (ICD10: B00)**  
Weekly incidence (per 100,000 all ages) by region  
for 2023/24 compared with 5 year average



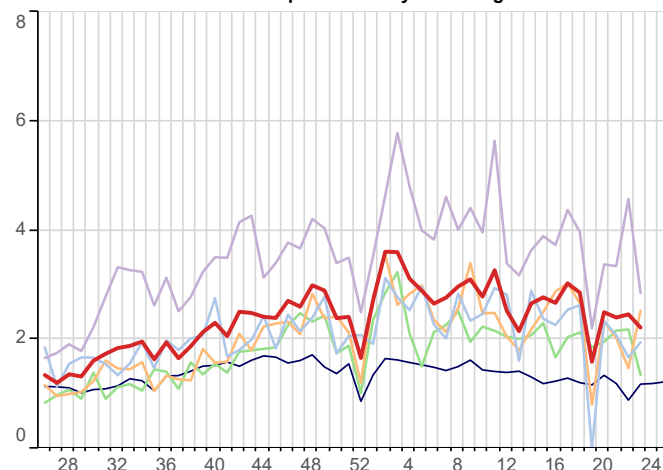
**Herpes Zoster (ICD10: B02)**  
Weekly incidence (per 100,000 all ages) by region  
for 2023/24 compared with 5 year average



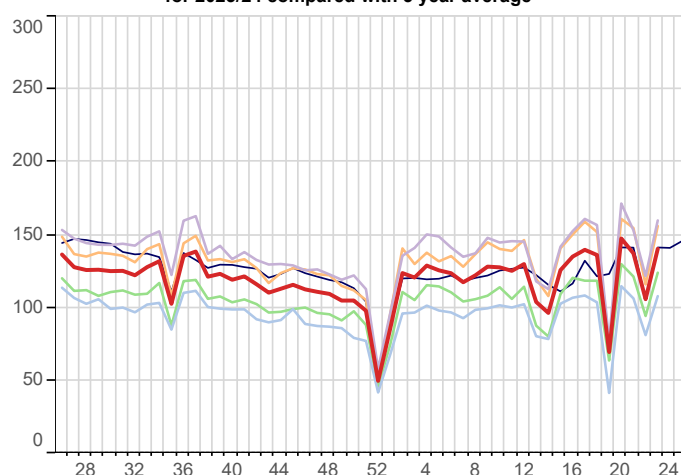
**Infections of Skin & Subcutaneous Tissue (ICD10: L00-L08)**  
Weekly incidence (per 100,000 all ages) by region  
for 2023/24 compared with 5 year average



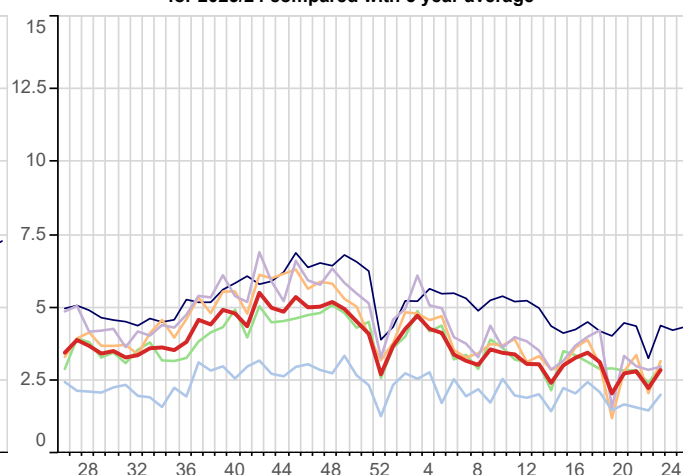
**Scabies (ICD10: B86)**  
Weekly incidence (per 100,000 all ages) by region  
for 2023/24 compared with 5 year average



**Symptoms involving Skin & Oth Integument Tiss (ICD10: R20-R23)**  
Weekly incidence (per 100,000 all ages) by region  
for 2023/24 compared with 5 year average



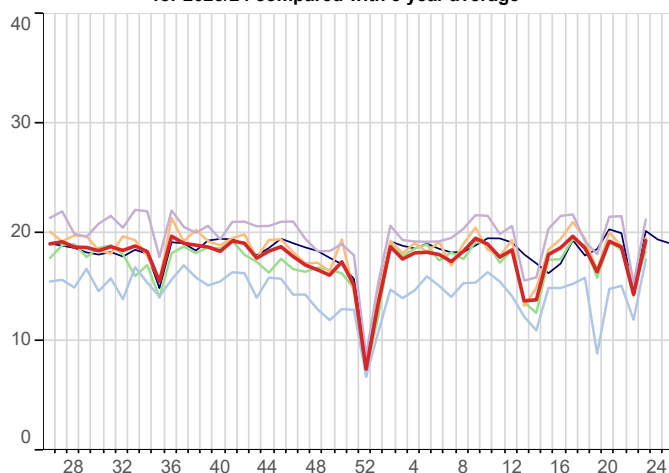
**Impetigo (ICD10: L01)**  
Weekly incidence (per 100,000 all ages) by region  
for 2023/24 compared with 5 year average



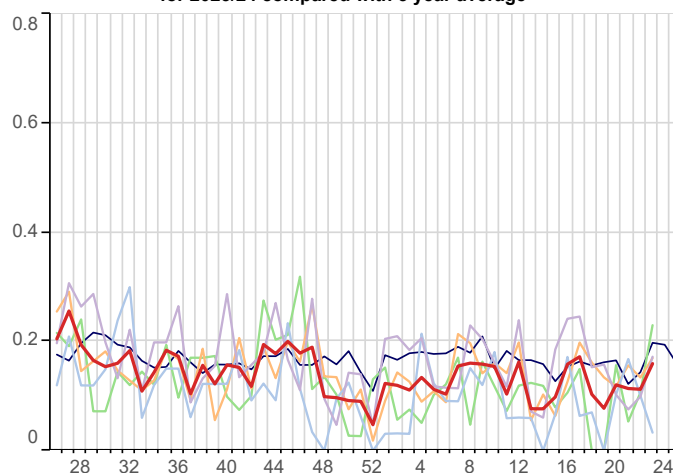
## 6. Disorders Affecting the Nervous System

5yr Avg   National   North   London   South   Midlands And East

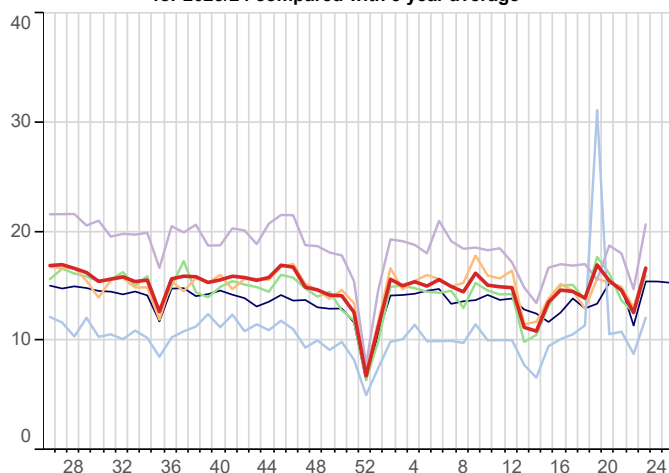
**Disorders of The Peripheral Nervous System (ICD10: G50-G64,G70-G72)**  
Weekly incidence (per 100,000 all ages) by region  
for 2023/24 compared with 5 year average



**Meningitis/Encephalitis (ICD10: A170-A171,A390,A38-A85,A87,G00-G05)**  
Weekly incidence (per 100,000 all ages) by region  
for 2023/24 compared with 5 year average

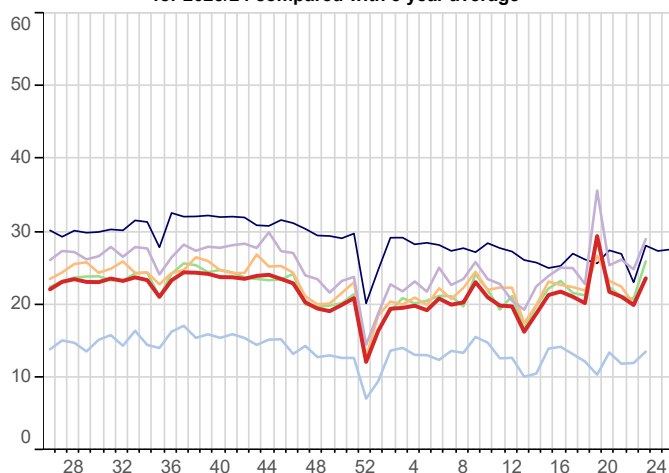


**Symptoms Involving Nervous & Musculoskeletal (ICD10: R25-R29)**  
Weekly incidence (per 100,000 all ages) by region  
for 2023/24 compared with 5 year average



## 7. Genitourinary System Disorders

**Urinary Tract Infection/Cystitis (ICD10: N30,N390)**  
Weekly incidence (per 100,000 all ages) by region  
for 2023/24 compared with 5 year average

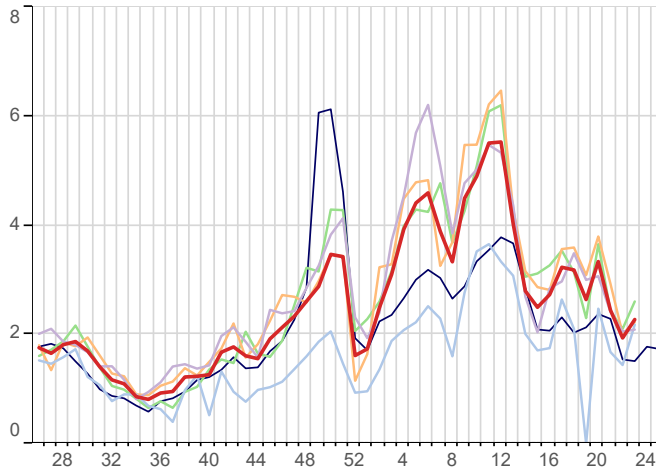




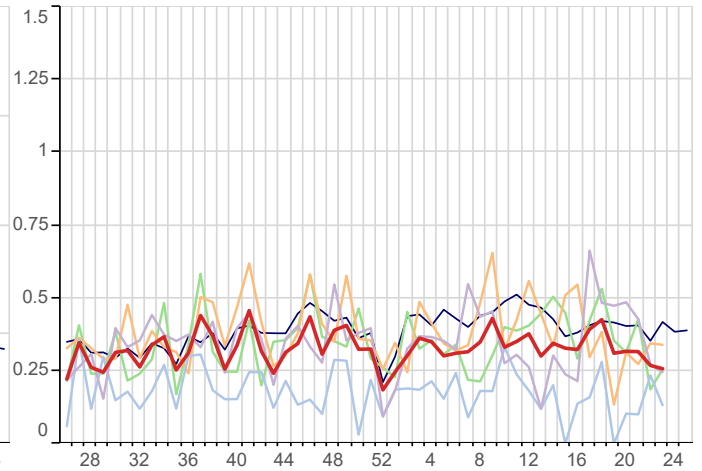
## 8. Other Disorders

5yr Avg   National   North   London   South   Midlands And East

**Strep Sore Throat, Scarlatina and Peritonsillar Abscess (ICD10: A38,J020,J36)**  
Weekly incidence (per 100,000 all ages) by region  
for 2023/24 compared with 5 year average



**Infectious Mononucleosis (ICD10: B27)**  
Weekly incidence (per 100,000 all ages) by region  
for 2023/24 compared with 5 year average



## 8. Tabular Summary by Disease

Disease Name	Week beginning Week ending		03/06/2024 09/06/2024		27/05/2024 02/06/2024		20/05/2024 26/05/2024		13/05/2024 19/05/2024	
	Rate	Numer	Rate	Numer	Rate	Numer	Rate	Numer	Rate	Numer
Acute Bronchitis	1.7	279	1.6	255	1.9	299	2.1	335		
Acute respiratory infections (ARI)	222.4	36,276	188.3	30,159	236.7	37,449	256.3	40,413		
Allergic Rhinitis	27.3	4,459	10.4	1,671	15.9	2,518	16.7	2,627		
Asthma	10.8	1,758	7.9	1,273	10.2	1,608	11.2	1,773		
Bronchiolitis	1.0	166	1.0	168	1.1	178	1.3	201		
Bullous Dermatoses	0.3	43	0.2	31	0.2	38	0.3	40		
Chickenpox	3.8	623	2.9	461	3.4	530	3.6	563		
Conjunctival Disorders	15.7	2,554	11.4	1,826	13.3	2,103	14.5	2,280		
COVID-19	3.2	515	2.7	436	2.6	416	2.7	428		
Croup	1.3	206	1.3	214	1.6	252	1.7	266		
ECLD - Asthma exacerbations	10.2	1,659	7.5	1,201	9.7	1,535	10.8	1,702		
ECLD - COPD exacerbations	6.3	1,031	4.9	790	5.5	865	6.0	944		
Exacerbations of chronic lung disease	16.3	2,658	12.3	1,973	15.1	2,393	16.7	2,637		
Herpes Simplex	3.1	498	2.1	343	2.8	438	2.7	431		
Herpes Zoster	4.7	767	4.4	711	4.8	766	4.9	769		
Impetigo	2.9	467	2.2	359	2.8	446	2.7	433		
Infectious Intestinal Diseases	7.6	1,244	6.4	1,018	8.0	1,266	7.5	1,179		
Infectious Mononucleosis	0.3	42	0.3	43	0.3	50	0.3	50		
Influenza-like illness	1.9	310	1.6	257	1.8	280	2.3	362		
Laryngitis	1.1	185	0.9	144	1.1	180	1.1	179		
Lower respiratory tract infections	78.2	12,766	68.5	10,963	82.9	13,119	92.7	14,614		
Measles	0.1	21	0.1	22	0.1	18	0.2	28		
Meningitis and Encephalitis	0.2	26	0.1	18	0.1	18	0.1	19		
Mumps	0.0	6	0.1	13	0.0	6	0.1	9		
Non-infective Enteritis and Colitis	2.6	423	2.0	325	2.5	394	2.8	444		
Otitis Media	17.2	2,800	14.4	2,313	18.7	2,958	20.4	3,216		
Peripheral Nervous Disease	19.2	3,139	14.3	2,293	18.7	2,951	19.2	3,024		
Pneumonia	3.8	615	3.3	526	3.2	502	3.7	585		
Rubella	0.0	1	0.0	0	0.0	0	0.0	1		
Scabies	2.2	362	2.5	394	2.4	380	2.5	394		
Sinusitis	14.8	2,412	11.8	1,884	14.4	2,273	15.2	2,396		
Skin and Subcutaneous Tissue Infections	91.1	14,856	73.7	11,801	88.7	14,035	92.9	14,653		
Strep Throat and Peritonsillar Abscess	2.3	371	1.9	310	2.4	387	3.3	526		
Symptoms involving musculoskeletal	16.7	2,719	12.6	2,016	14.6	2,316	15.5	2,445		
Symptoms involving Skin and Integument Tissues	140.5	22,923	105.9	16,962	137.4	21,737	147.6	23,274		
Tonsillitis/Pharyngitis	31.9	5,206	26.9	4,309	35.4	5,602	35.2	5,551		
Upper respiratory tract infections	135.4	22,087	113.2	18,124	146.3	23,139	154.5	24,361		
Urinary Tract Infections	23.6	3,853	20.0	3,195	21.1	3,336	21.8	3,433		
Viral Hepatitis	0.3	51	0.2	37	0.2	35	0.3	50		
Whooping Cough	1.0	170	0.8	122	1.2	183	1.4	226		
<b>Practice Count</b>		<b>1,597</b>		<b>1,566</b>		<b>1,551</b>		<b>1,550</b>		
<b>Denom</b>		<b>16,314,424</b>		<b>16,013,291</b>		<b>15,819,344</b>		<b>15,767,730</b>		

## FURTHER INFORMATION:

### About the report

#### Focus

The first two pages of data within this report focus on influenza-like illness and virology data, in order to provide information about seasonal influenza and early warnings of any epidemic.

#### Rate calculation

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

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

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

#### Five-year averages

Weekly rates are set against a five-year average (navy blue lines), previously we reported against a ten-year average. The change to a five-year average was made because longer-term trends in the incidence of disease have led to weekly rates for certain diseases becoming increasingly divergent from their ten-year average. The use of five-year averages lessens this effect and enables more meaningful comparison.

#### Threshold calculation for influenza-like illness (ILI)

We are now using the Moving Epidemic Method (MEM) to calculate threshold and intensity levels for influenza-like illness (Graph A, page 2 and Table E, page 4 of this report). MEM works by identifying seasonal epidemic peaks and then calculates thresholds and intensity levels based on the pre and post epidemic values. This allows us to report the severity of ILI against multiple thresholds, rather than a simple comparison with the five-year average as the wide variation in ILI year on year, especially during the seasonal peak, makes the average less representative.

In addition to the All Ages thresholds, we have also calculated thresholds for four age bands: those aged 1-4, 5-14, 15-64 and those aged 65 and over. ILI incidence rates vary among different age bands, and the age-specific thresholds allow us to highlight epidemics where ILI disproportionately affects a particular age band.

This methodology is used by the European Centre for Disease Prevention and Control to standardise reporting of influenza activity across Europe, and is also in use by the UK Health Security Agency. Full details of the methodology can be found in: Vega *et al.* (2012) Influenza surveillance in Europe: establishing epidemic thresholds by the moving epidemic method. Influenza and Other Respiratory Viruses 7(4), 546–558.

Both the *all-ages* thresholds and the *age-specific* thresholds are shown in Table E, page 4. Five years of data were used for *all-ages* and *age-specific* thresholds calculation (winter seasons 2015/16, 2016/17, 2017/18, 2018/19 and 2022/23, excluding 2019/20, 2020/21 and 2021/22).

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

### Acknowledgement:

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

### What we do

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

The RSC data and analytics hub is housed at the Oxford-Royal College of General Practitioners Research and Surveillance Centre.

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

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

### Our data extraction process and information governance

Data are extracted twice weekly from practice systems by Magentus data management and EMIS-X Analytics (EXA) on the RCGP's behalf. Patients who have withheld consent for data sharing are excluded from the extraction process.

Data are pseudonymised as close to source as possible. Data are held on secure servers at the RCGP data and analytics hub at the Oxford-Royal College of General Practitioners Research and Surveillance Centre. Both Magentus data management and the University of Oxford are Registered and compliant with the Data Protection Act and fully compliant with all relevant NHS Digital data information governance best practice.

### What the data is used for

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

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

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

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

### For further information

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

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