

RSC Communicable and Respiratory Disease Report for England

Key Statistics:

Week Number/Year..... 8/2023
 Week Starting - Ending..... 20/02/2023 - 26/02/2023
 No. of Practices..... 516
 Population..... 5,433,955

National (England)

- **Acute Bronchitis** : decreased from 7.2 in week 7 to 6.9 in week 8.
- **Asthma** : decreased from 25.0 in week 7 to 21.8 in week 8.
- **Common Cold** : decreased from 2.6 in week 7 to 2.2 in week 8.
- **Influenza-like illness** : increased from 4.5 in week 7 to 4.6 in week 8.
- **Respiratory System Diseases** : decreased from 330.9 in week 7 to 323.3 in week 8.
- **COVID-19** : decreased from 39.7 in week 7 to 33.1 in week 8.

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

- **Acute Bronchitis** : decreased from 4.0 in week 7 to 3.4 in week 8 in the London region, increased from 10.7 in week 7 to 11.1 in week 8 in the North region, decreased from 6.7 in week 7 to 6.1 in week 8 in the South region, and decreased from 6.6 in week 7 to 6.5 in week 8 in the Midlands And East region.
- **Asthma** : decreased from 26.0 in week 7 to 22.5 in week 8 in the London region, decreased from 31.5 in week 7 to 24.1 in week 8 in the North region, decreased from 19.4 in week 7 to 16.3 in week 8 in the South region, and increased from 25.7 in week 7 to 28.8 in week 8 in the Midlands And East region.
- **Common Cold** : increased from 2.1 in week 7 to 3.0 in week 8 in the London region, decreased from 2.8 in week 7 to 2.1 in week 8 in the North region, decreased from 2.6 in week 7 to 1.8 in week 8 in the South region, and decreased from 3.2 in week 7 to 2.2 in week 8 in the Midlands And East region.
- **Influenza-like illness** : increased from 5.4 in week 7 to 7.4 in week 8 in the London region, decreased from 4.8 in week 7 to 4.0 in week 8 in the North region, increased from 3.9 in week 7 to 4.2 in week 8 in the South region, and decreased from 4.3 in week 7 to 3.1 in week 8 in the Midlands And East region.
- **Respiratory System Diseases** : increased from 266.1 in week 7 to 273.7 in week 8 in the London region, decreased from 409.1 in week 7 to 390.8 in week 8 in the North region, increased from 292.8 in week 7 to 296.9 in week 8 in the South region, and decreased from 368.6 in week 7 to 334.3 in week 8 in the Midlands And East region.
- **COVID-19** : decreased from 24.9 in week 7 to 23.9 in week 8 in the London region, decreased from 37.9 in week 7 to 34.3 in week 8 in the North region, decreased from 47.5 in week 7 to 37.6 in week 8 in the South region, and decreased from 42.9 in week 7 to 32.3 in week 8 in the Midlands And East region.

Comment:

This week the overall rate of influenza-like illness (ILI) has increased a little. The increase in ILI rates is of note in the London and the South region. The rate of presentations with asthma, and scarlet fever, are above the seasonal average for this time of year.

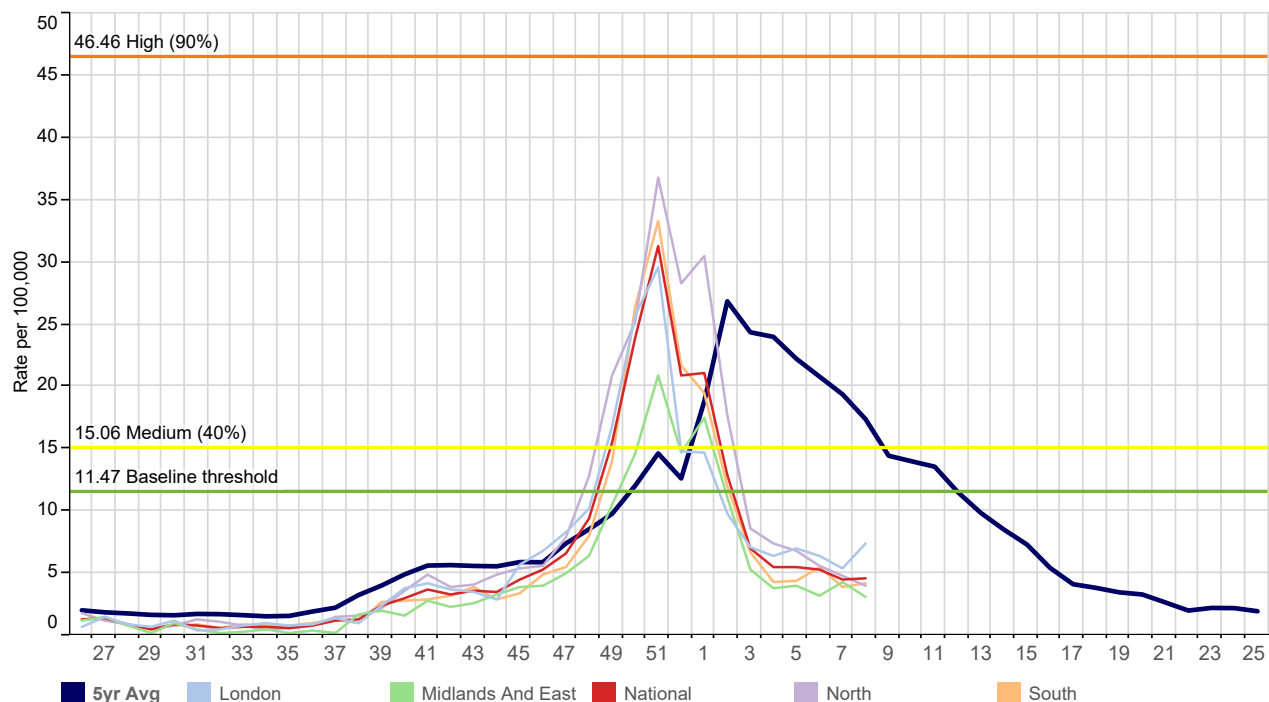
The overall rate of COVID-19 has decreased this week though rates have increased in the population aged under 15 years in contrast to ILI. Since our previous mpox (monkeypox) report on the 1st of February 2023, we have detected an additional 4 cases of mpox across the RSC network, the total number of cases detected since the 19th of May 2022 is 358 (cases across the wider RSC population of 19 million).

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

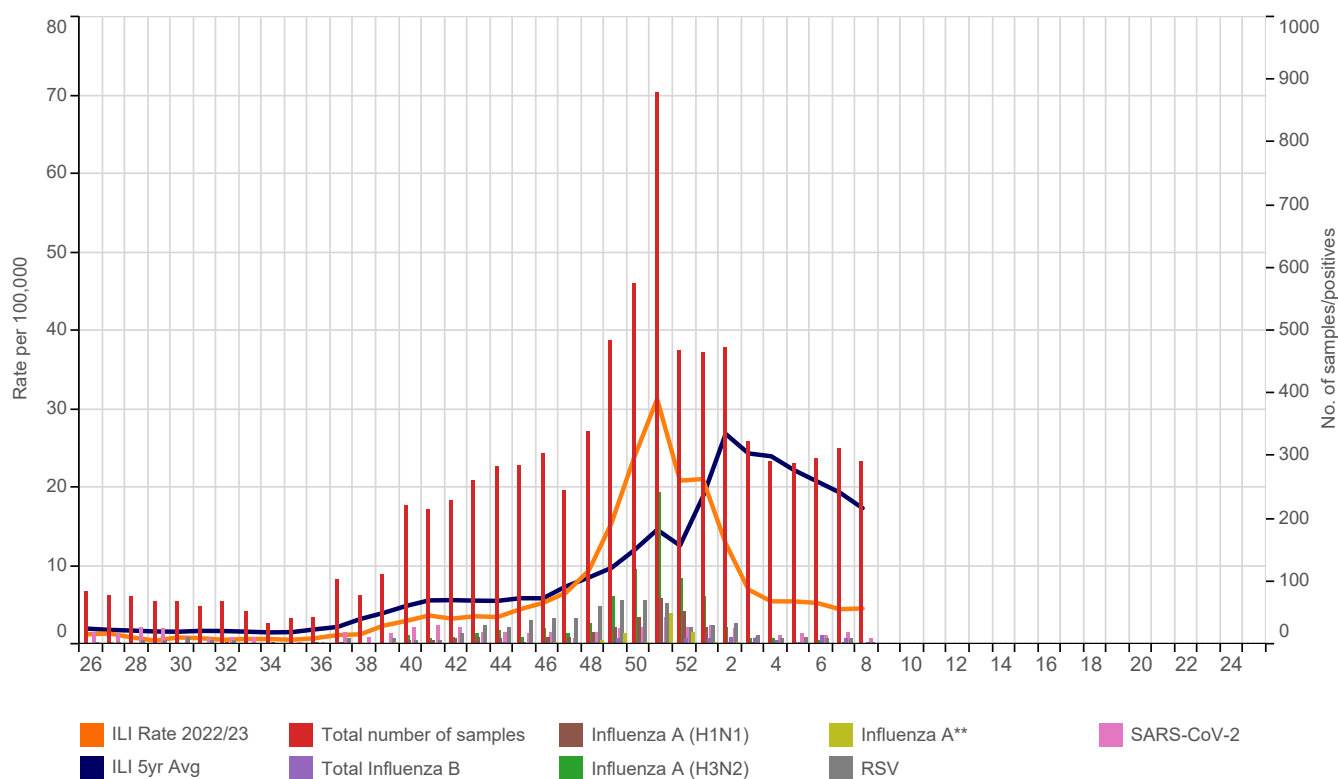
Winter Focus 2022/23

Please see page 15 for explanatory notes on the data.

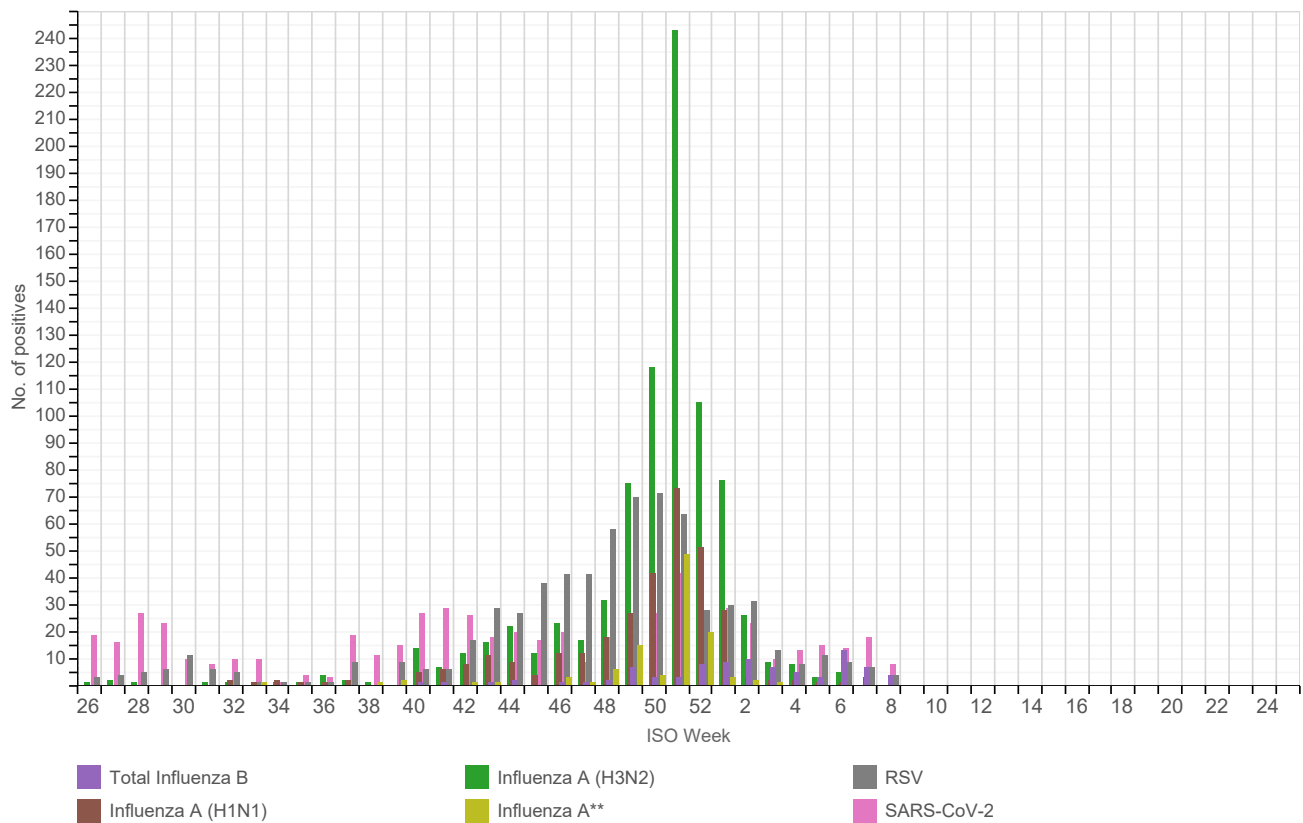
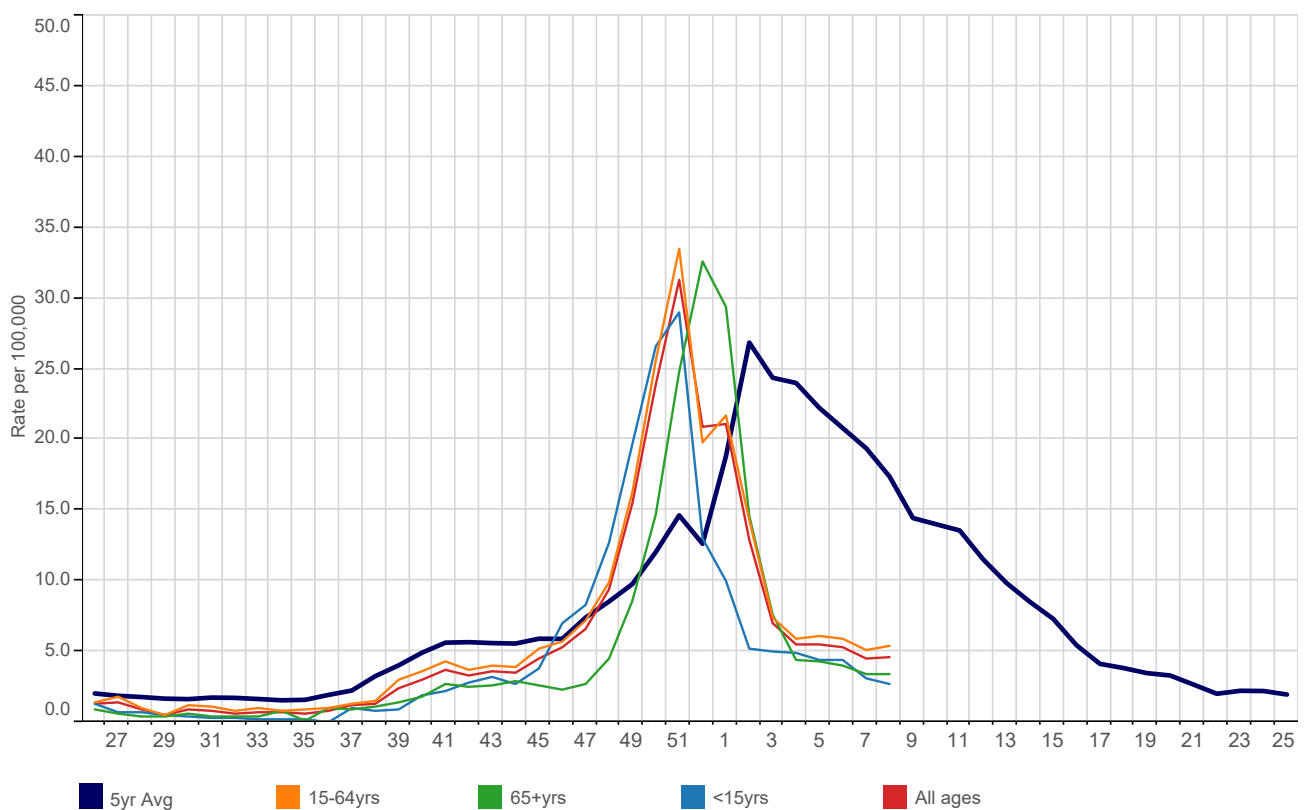
(A) Influenza-like illness: national incidence rate 2022/23 by region*



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



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

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

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

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

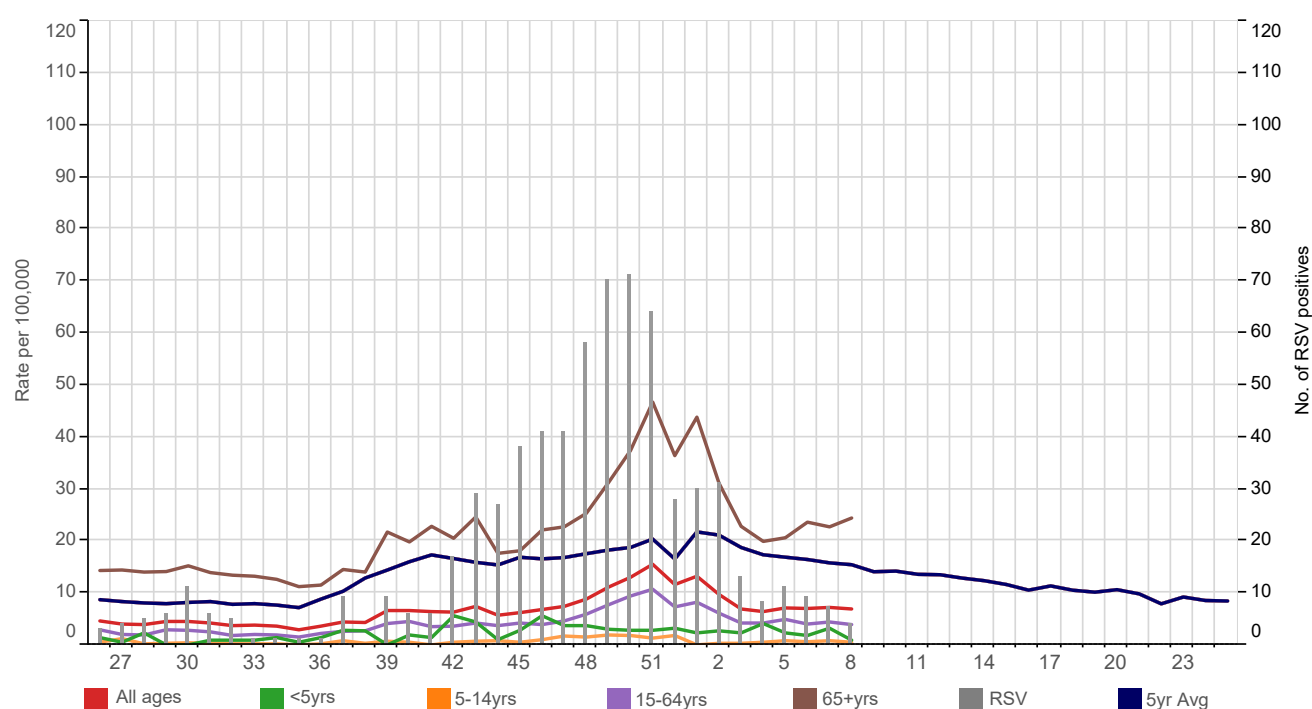
Table 1	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43
15-64yrs	1.4	1.8	1.0	0.5	1.2	1.1	0.8	1.0	0.8	0.9	1.0	1.3	1.5	3.0	3.6	4.3	3.7	4.0
65+yrs	0.9	0.6	0.4	0.4	0.6	0.4	0.4	0.4	0.8	0.1	1.0	0.9	1.1	1.4	1.8	2.7	2.5	2.6
<15yrs	1.3	0.7	0.7	0.5	0.4	0.3	0.3	0.2	0.2	0.2	0.0	1.0	0.8	0.9	1.9	2.2	2.8	3.2
All ages	1.3	1.4	0.9	0.5	0.9	0.8	0.6	0.7	0.7	0.6	0.8	1.2	1.3	2.4	3.0	3.7	3.3	3.6

	44	45	46	47	48	49	50	51	52	1	2	3	4	5	6	7	8	9
<15yrs	2.7	3.8	7.0	8.3	12.7	19.7	26.6	29.0	13.0	10.0	5.2	5.0	4.9	4.4	4.4	3.1	2.7	
15-64yrs	3.9	5.2	5.7	7.2	9.9	16.3	25.6	33.5	19.8	21.7	14.3	7.4	5.9	6.1	5.9	5.1	5.4	
65+yrs	2.9	2.6	2.3	2.7	4.5	8.6	14.7	24.8	32.6	29.4	14.6	7.6	4.4	4.3	4.0	3.4	3.4	
All ages	3.5	4.5	5.3	6.6	9.4	15.5	23.9	31.3	20.9	21.1	12.9	7.0	5.5	5.5	5.3	4.5	4.6	

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

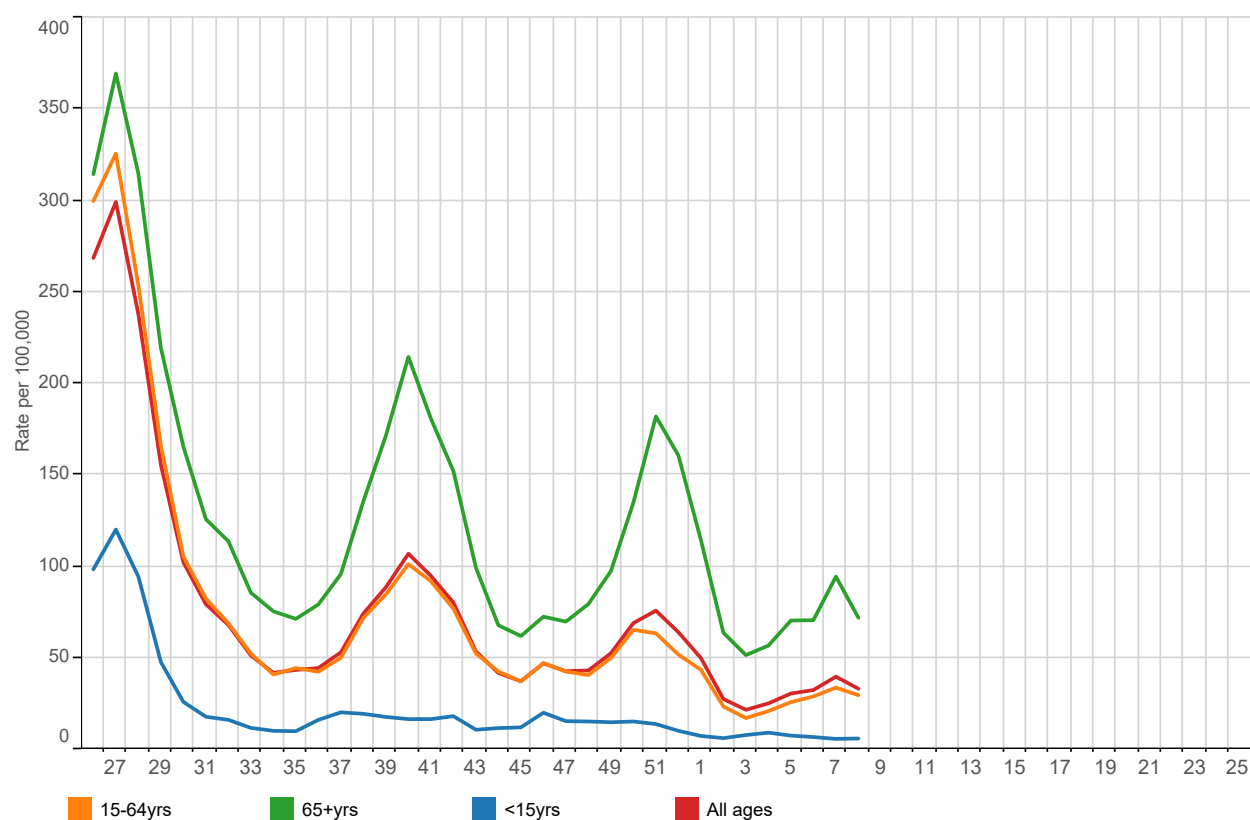
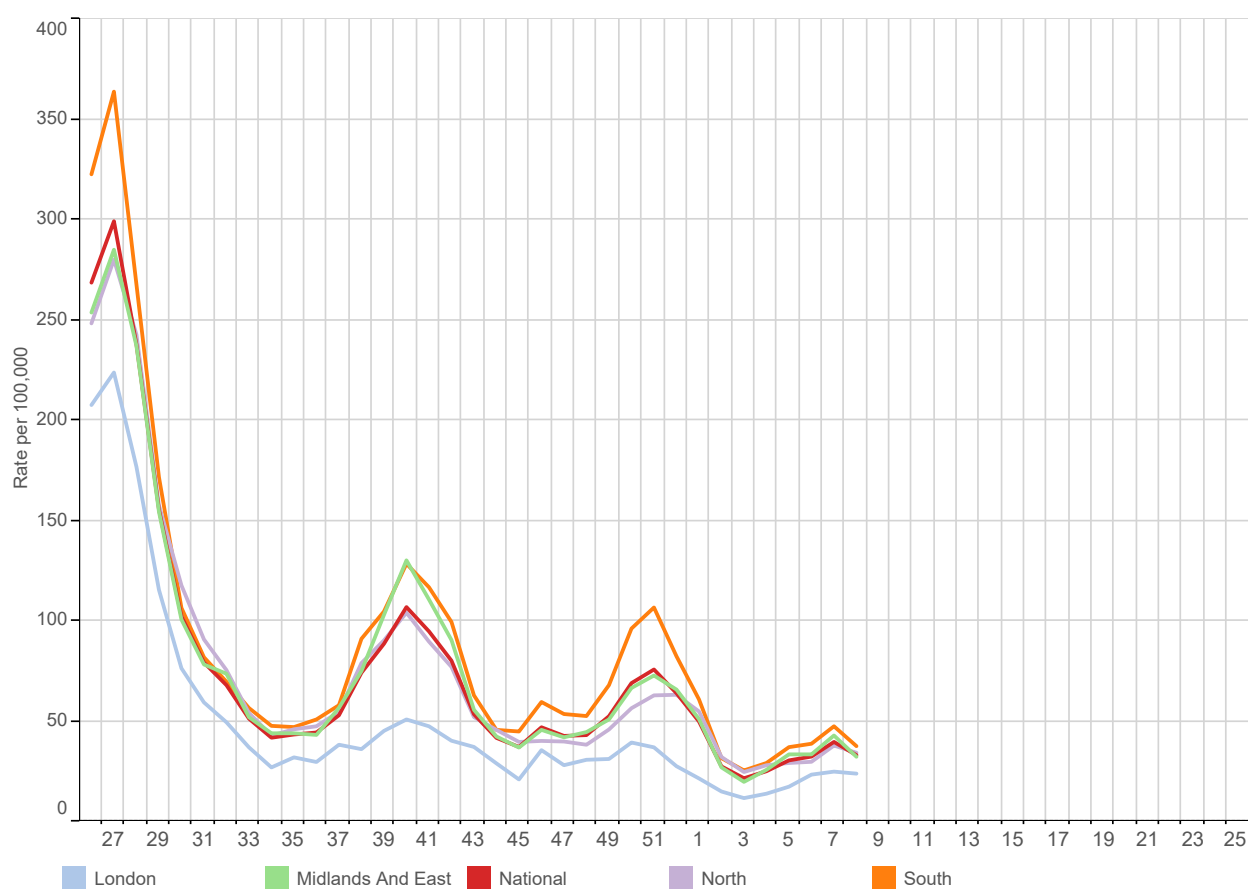
Threshold levels

¹Below baseline threshold
²baseline threshold breach to < 40th percentile
³40th to <90th percentile
⁴90th to <97.5th percentile
⁵97.5th+ percentile

(F) Acute Bronchitis: national incidence rate 2022/23 by age group***Weekly Influenza-like illness and Acute Bronchitis incidence rates per 100,000 persons**

Influenza-like illness		Bronchitis	
<1yr	8.3	6.2	
1-4yrs	2.7	0.9	
5-14yrs	2.2	0.5	
15-24yrs	6.8	1.3	
25-44yrs	6.0	1.3	
45-64yrs	3.9	8.1	
65-74yrs	3.9	24.1	
75-84yrs	3.0	27.0	
85+yrs	2.3	18.6	
All ages	4.6	6.9	

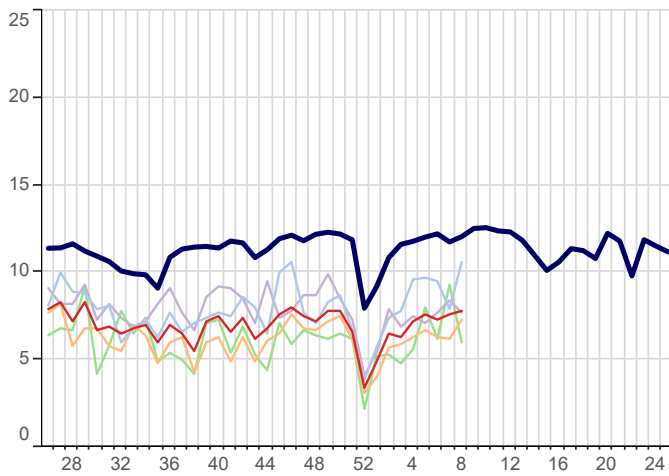
Influenza-like illness		Bronchitis	
London	7.4	3.4	
North	4.0	11.1	
South	4.2	6.1	
Midlands And East	3.1	6.5	
National	4.6	6.9	

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

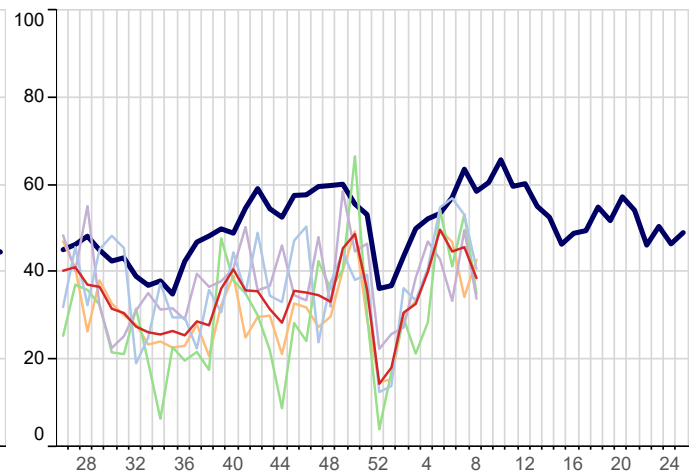
1. Water & Food Borne Disorders:

5yr Avg National London North South Midlands And East

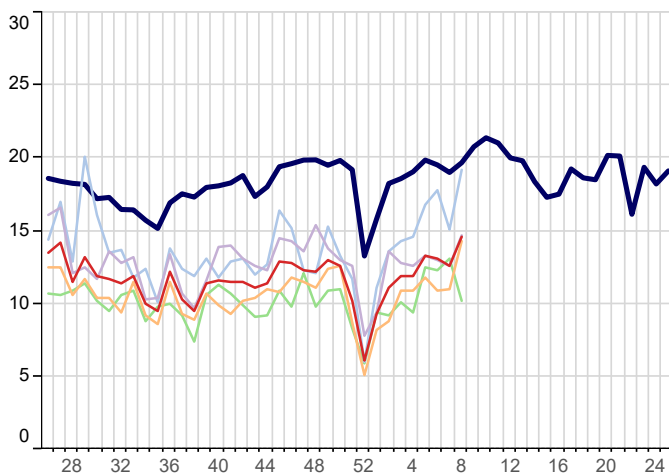
Infectious Intestinal Disease (ICD10: A00-A09)
Weekly incidence (per 100,000 **all ages**) by regions
for 2022/23 compared with 5 year average



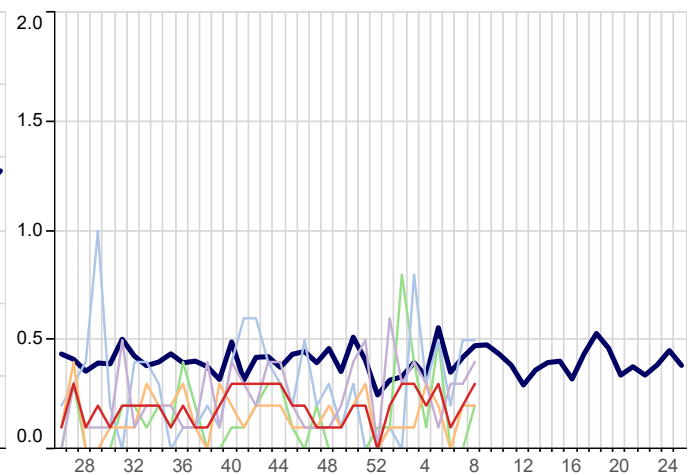
Infectious Intestinal Disease (ICD10: A00-A09)
Weekly incidence (per 100,000 **0-4 years**) by regions
for 2022/23 compared with 5 year average



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



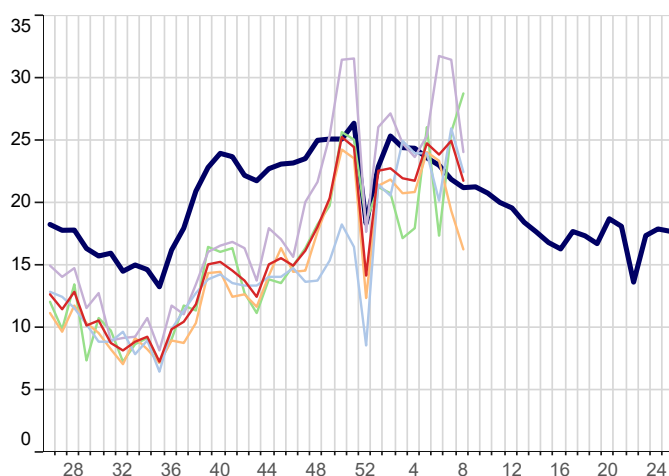
Viral Hepatitis (ICD10: B15-B19)
Weekly incidence (per 100,000 **all ages**) by region
for 2022/23 compared with 5 year average



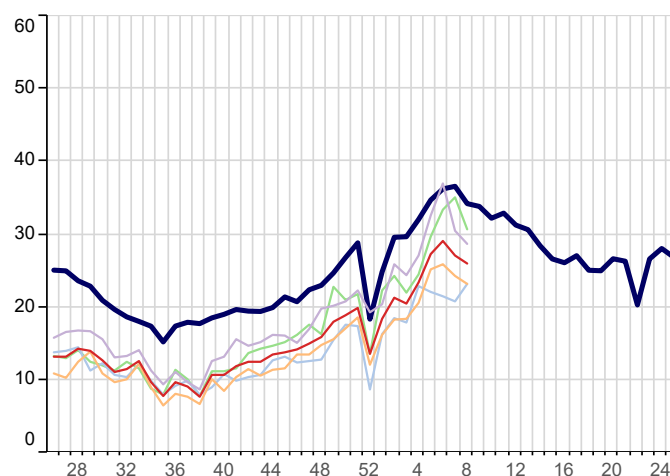
2. Environmentally Sensitive Disorders:

5yr Avg National London North South Midlands And East

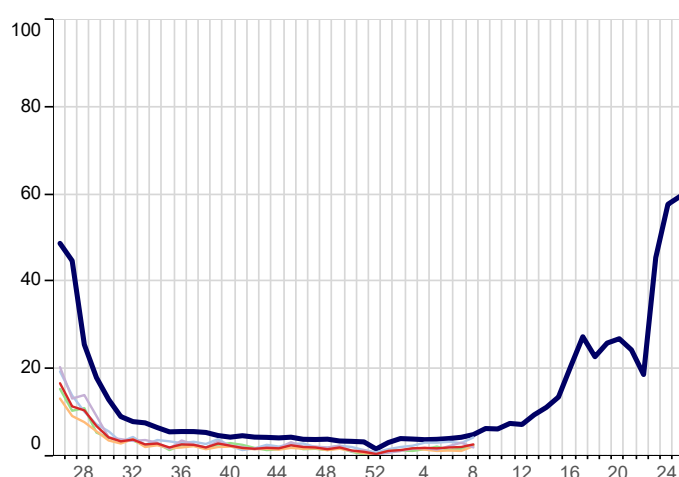
Asthma (ICD10: J45-J46)
Weekly incidence (per 100,000 all ages) by region
for 2022/23 compared with 5 year average



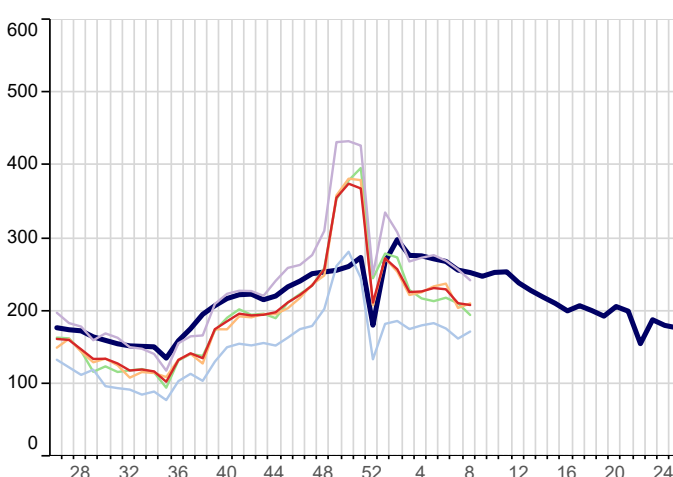
Disorders of Conjunctiva (ICD10: H10-H13)
Weekly incidence (per 100,000 all ages) by region
for 2022/23 compared with 5 year average



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



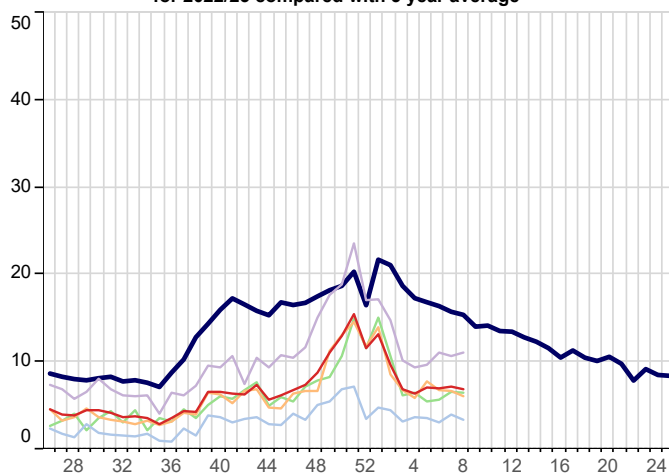
Symptoms involving Respiratory & Chest (ICD10: R05-R07,R09)
Weekly incidence (per 100,000 all ages) by region
for 2022/23 compared with 5 year average



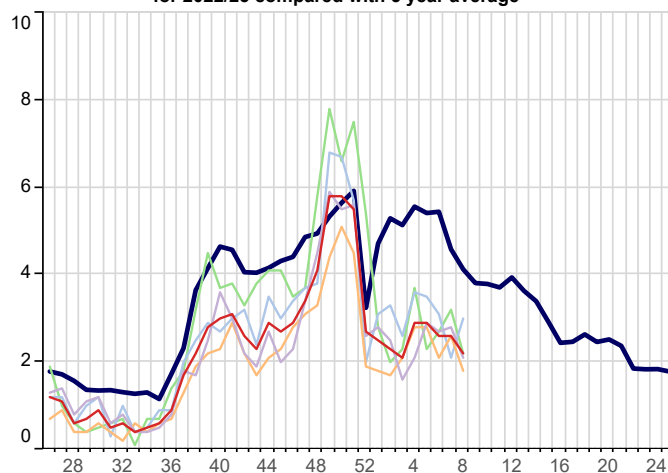
3. Respiratory Infections:

5yr Avg National London North South Midlands And East

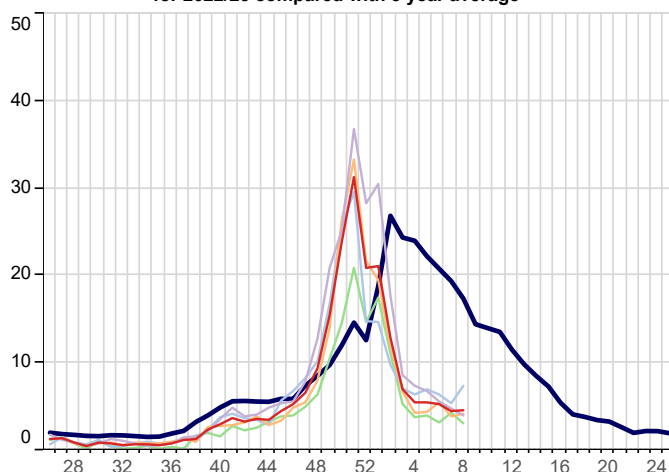
Acute Bronchitis (ICD10: J20-J21,J40)
Weekly incidence (per 100,000 all ages) by region
for 2022/23 compared with 5 year average



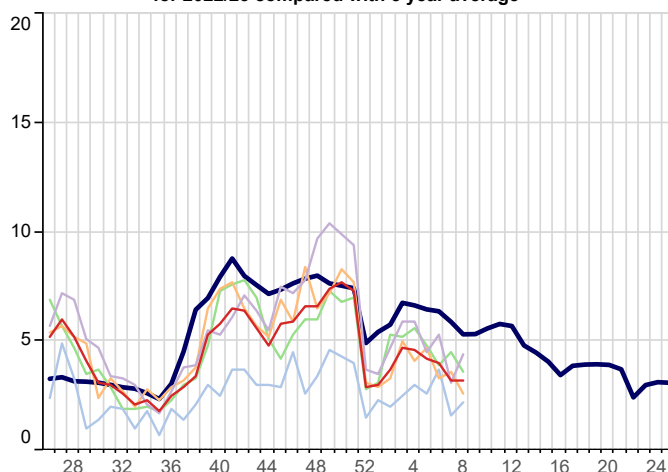
Common Cold (ICD10: J00,J06)
Weekly incidence (per 100,000 all ages) by region
for 2022/23 compared with 5 year average



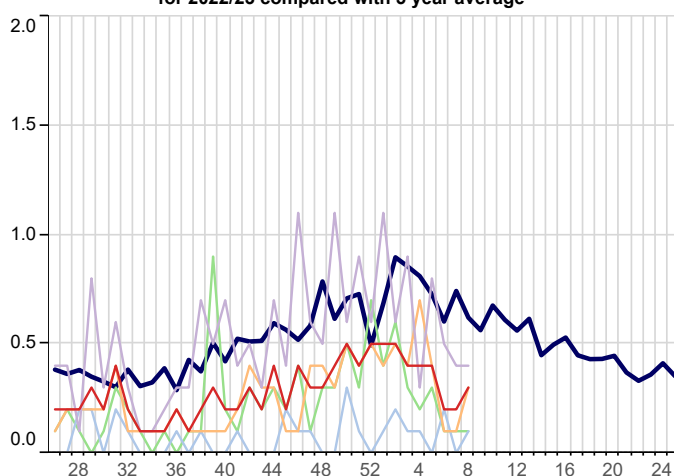
Influenza-like illness (ICD10: J09-J11)
Weekly incidence (per 100,000 all ages) by region
for 2022/23 compared with 5 year average



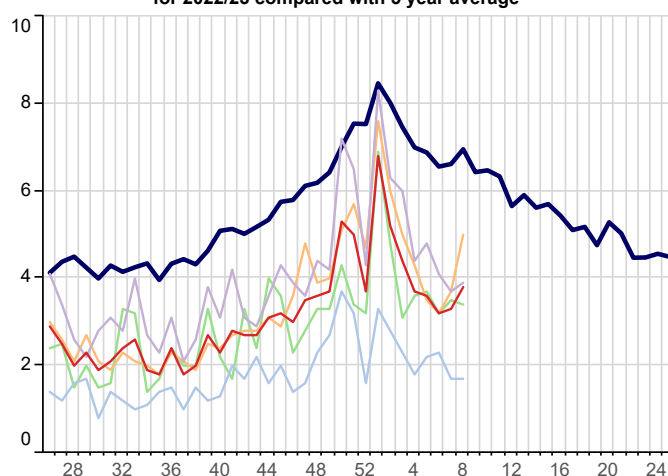
Acute Laryngitis/Tracheitis (ICD10: J04)
Weekly incidence (per 100,000 all ages) by region
for 2022/23 compared with 5 year average



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



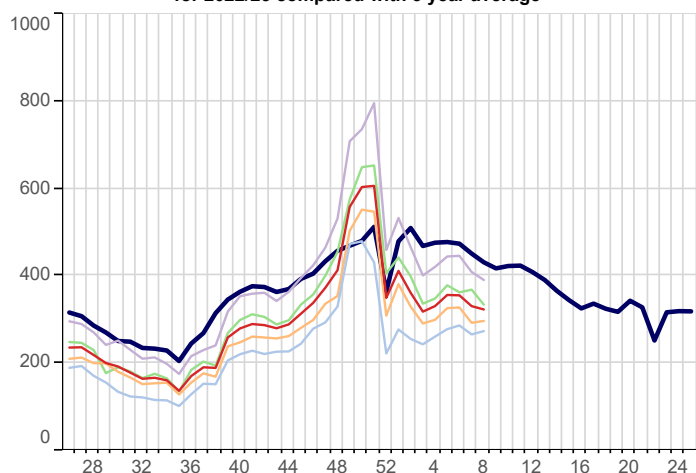
Pneumonia/Pneumonitis (ICD10: J12-J18)
Weekly incidence (per 100,000 all ages) by region
for 2022/23 compared with 5 year average



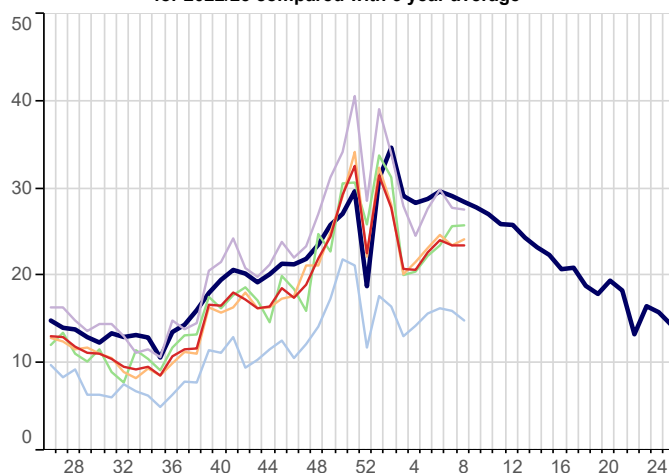
3. Respiratory Infections(Continued):

5yr Avg National London North South Midlands And East

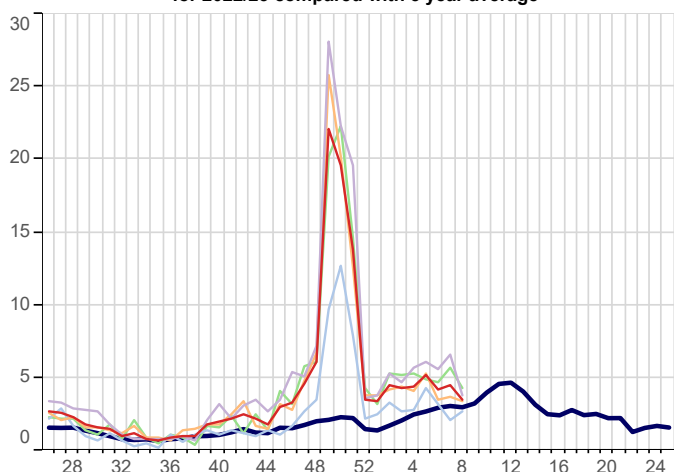
Respiratory System Diseases (ICD10: J00-J99)
Weekly incidence (per 100,000 all ages) by region
for 2022/23 compared with 5 year average



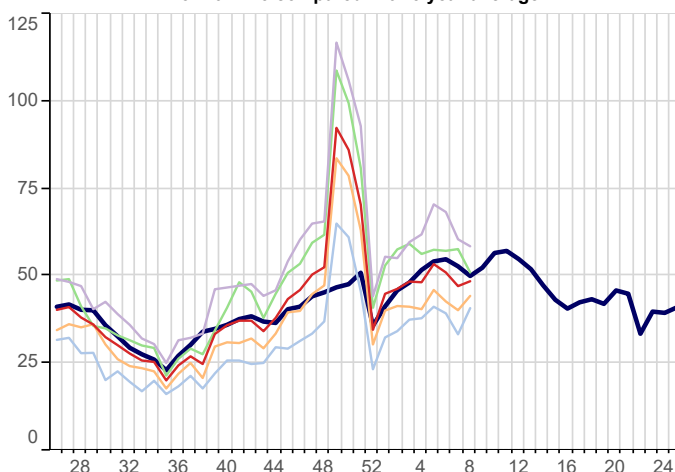
Acute Sinusitis (ICD10: J01)
Weekly incidence (per 100,000 all ages) by region
for 2022/23 compared with 5 year average



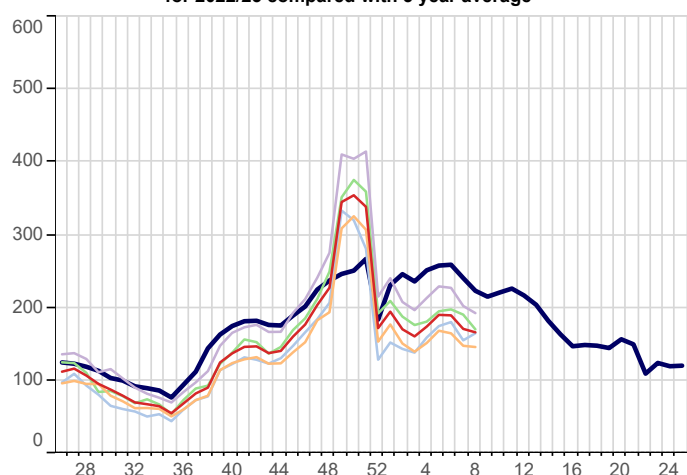
Strep Sore Throat, Scarlatina and Peritonsillar Abscess (ICD10: A38,J020,J36)
Weekly incidence (per 100,000 all ages) by region
for 2022/23 compared with 5 year average



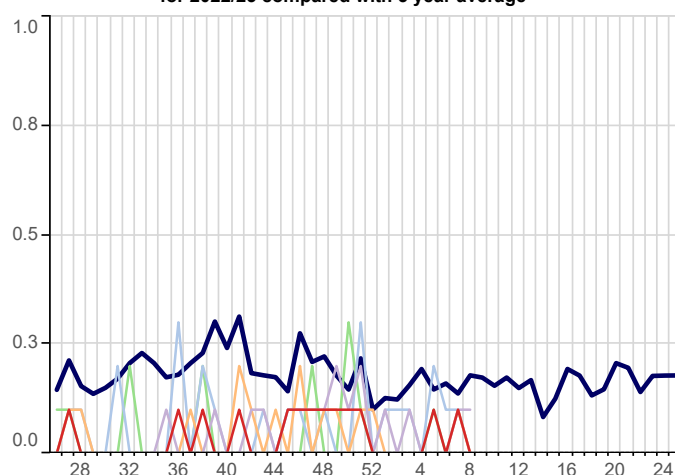
Acute Tonsillitis/Pharyngitis (ICD10: J02-J03)
Weekly incidence (per 100,000 all ages) by region
for 2022/23 compared with 5 year average



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



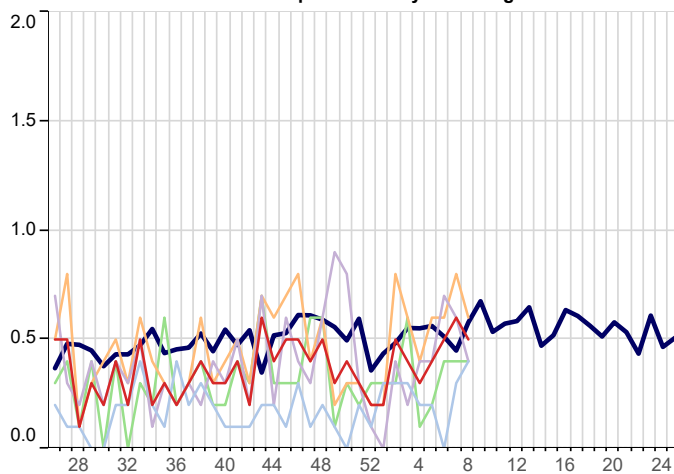
Whooping Cough (ICD10: A37)
Weekly incidence (per 100,000 all ages) by region
for 2022/23 compared with 5 year average



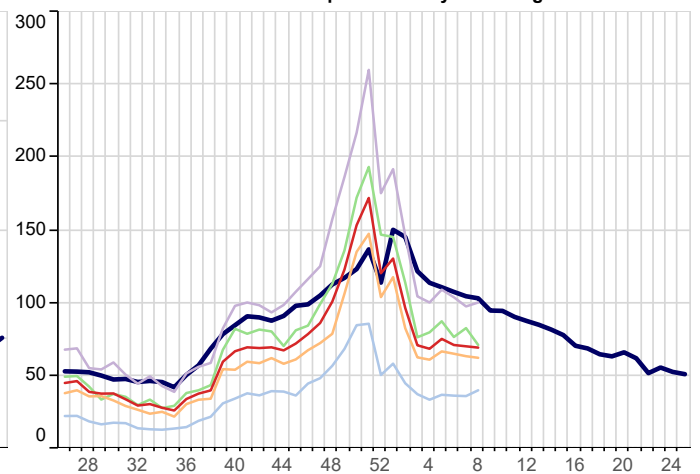
3. Respiratory Infections(Continued):

5yr Avg National London North South Midlands And East

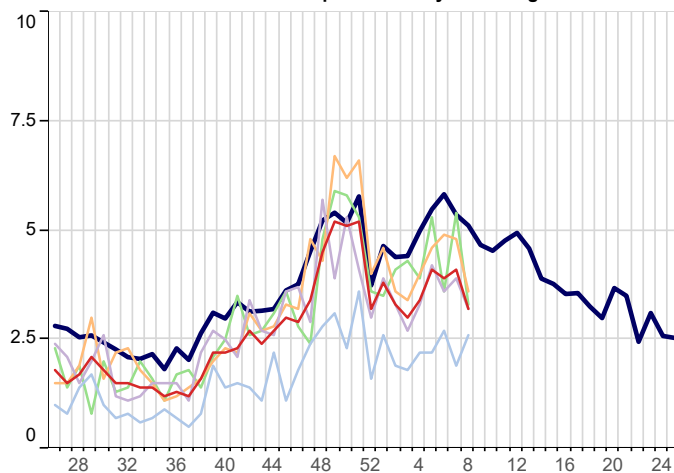
Infectious Mononucleosis (ICD10: B27)
Weekly incidence (per 100,000 all ages) by region
for 2022/23 compared with 5 year average



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



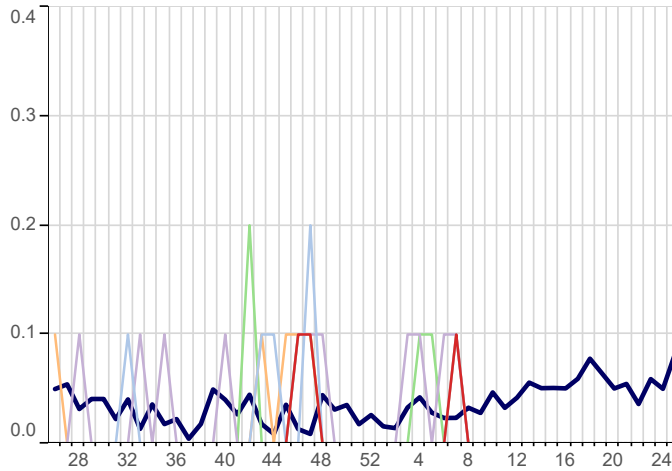
Acute Otitis Media (ICD10: H650-H651,H660,H669)
Weekly incidence (per 100,000 all ages) by region
for 2022/23 compared with 5 year average



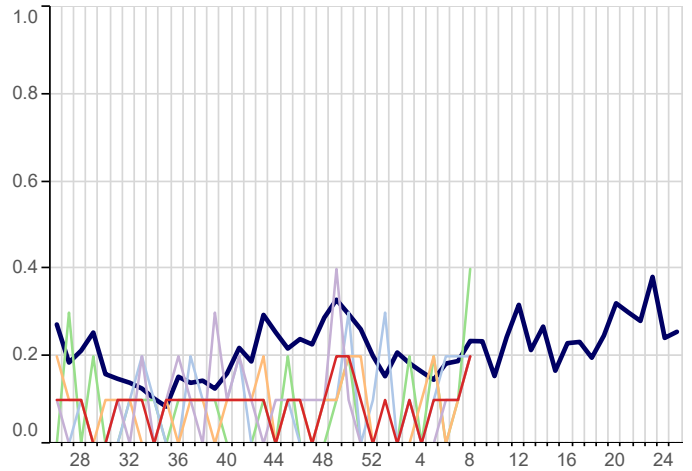
4. Vaccine Sensitive Disorders

5yr Avg National London North South Midlands And East

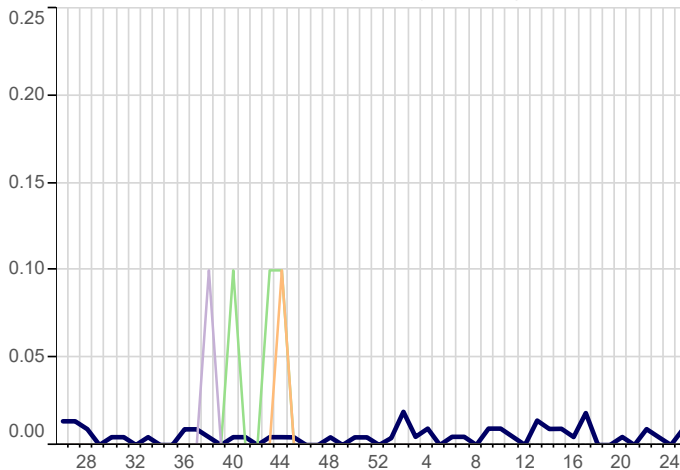
Measles (ICD10: B05)
Weekly incidence (per 100,000 all ages) by region
for 2022/23 compared with 5 year average



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

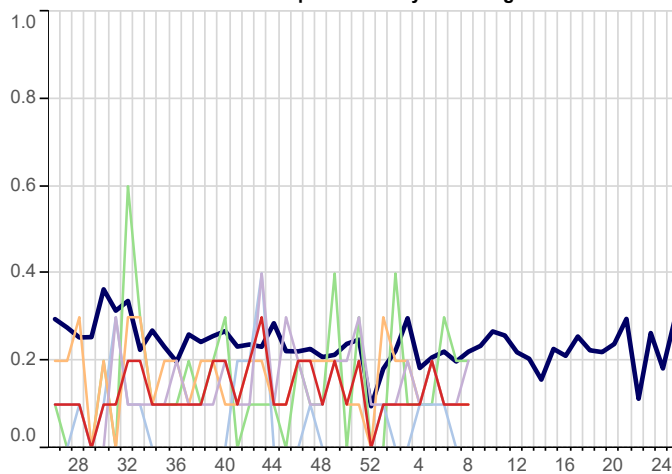


Rubella (ICD10: B06)
Weekly incidence (per 100,000 all ages) by region
for 2022/23 compared with 5 year average

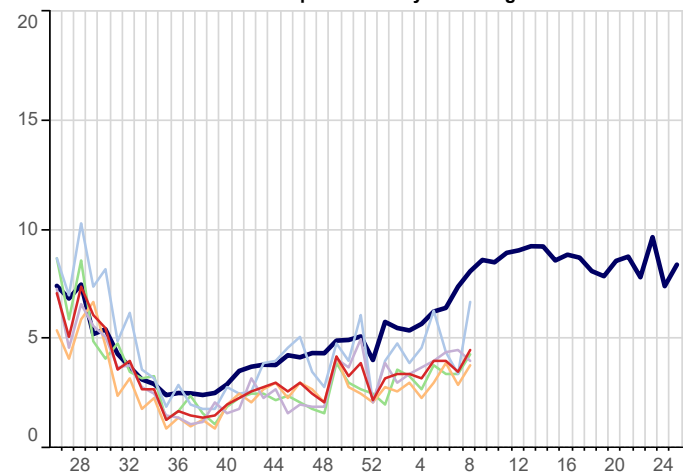


5. Skin Contagions

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



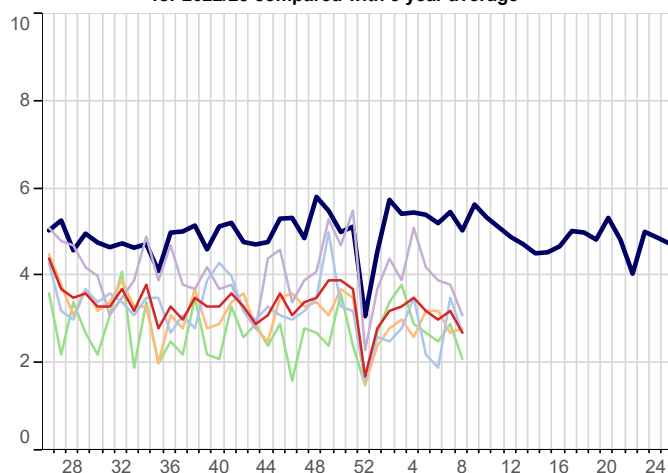
Chickenpox (ICD10: B01)
Weekly incidence (per 100,000 all ages) by region
for 2022/23 compared with 5 year average



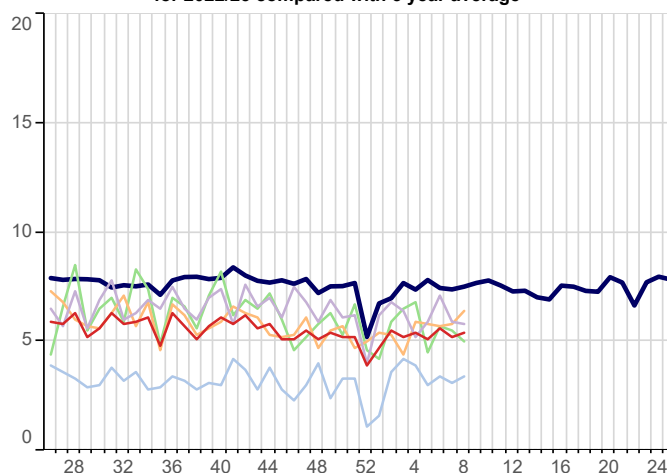
5. Skin Contagions (Continued)

5yr Avg National London North South Midlands And East

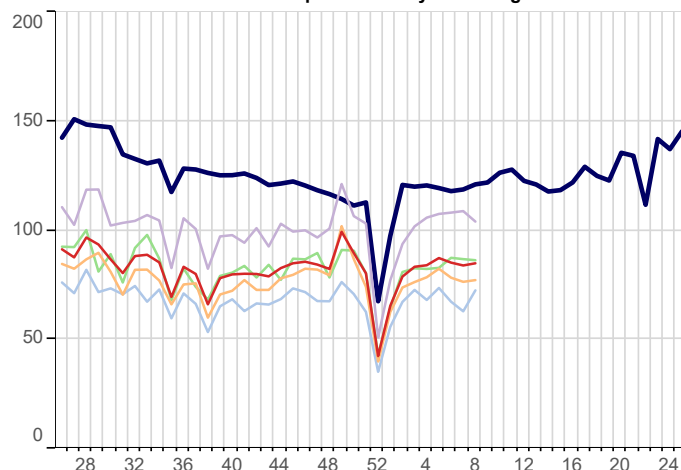
Herpes Simplex (ICD10: B00)
Weekly incidence (per 100,000 all ages) by region
for 2022/23 compared with 5 year average



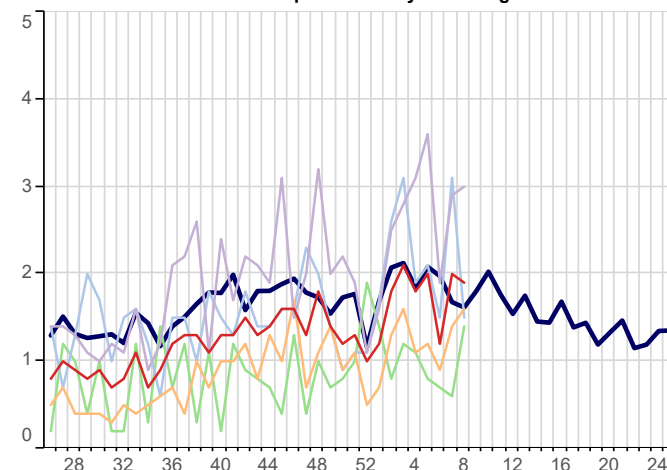
Herpes Zoster (ICD10: B02)
Weekly incidence (per 100,000 all ages) by region
for 2022/23 compared with 5 year average



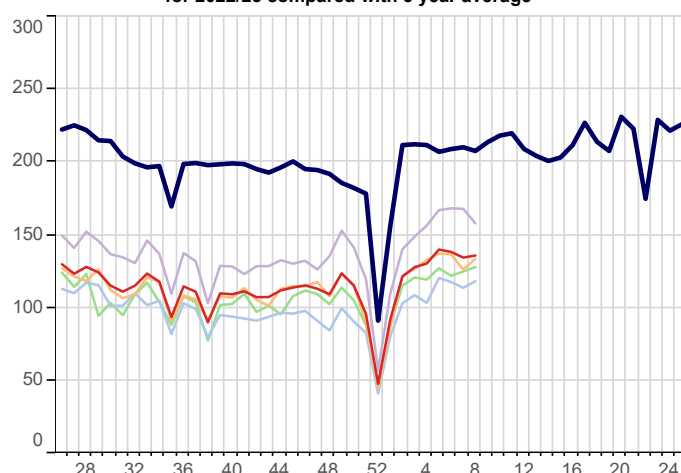
Infections of Skin & Subcutaneous Tissue (ICD10: L00-L08)
Weekly incidence (per 100,000 all ages) by region
for 2022/23 compared with 5 year average



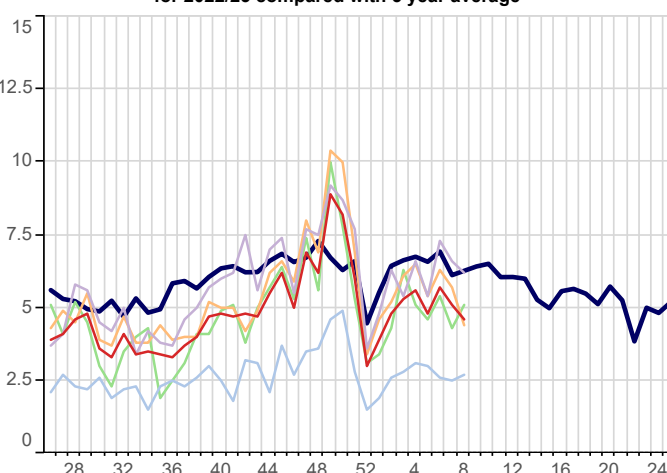
Scabies (ICD10: B86)
Weekly incidence (per 100,000 all ages) by region
for 2022/23 compared with 5 year average



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



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



6. Disorders Affecting the Nervous System

5yr Avg

National

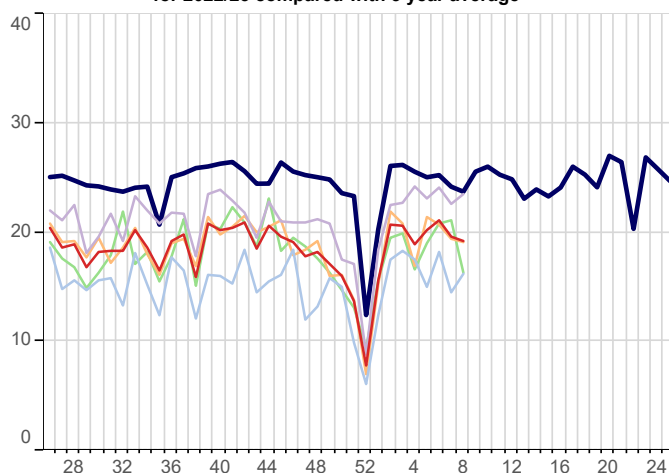
London

North

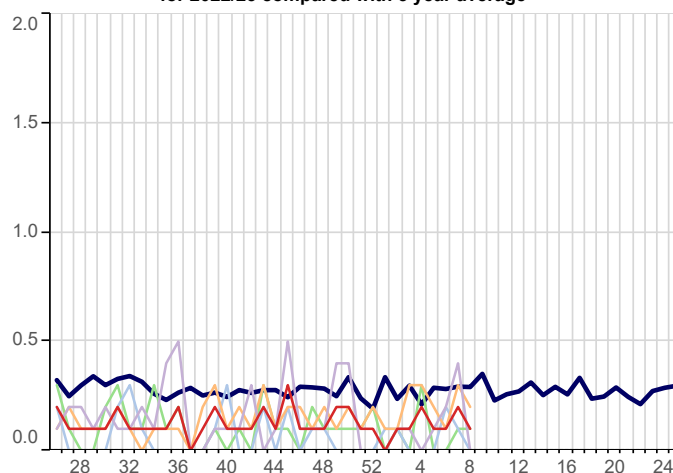
South

Midlands And East

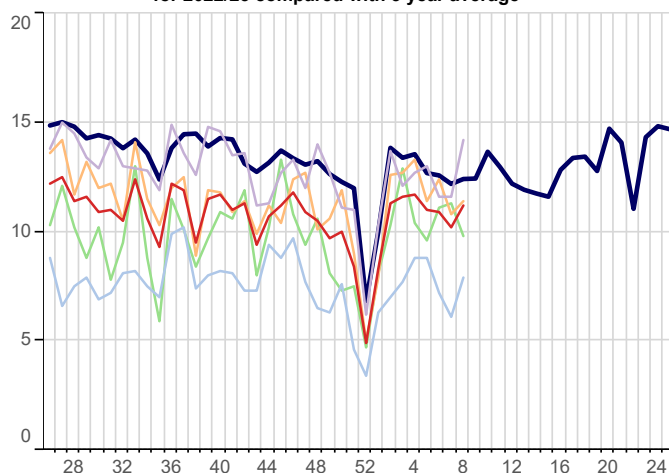
Disorders of The Peripheral Nervous System (ICD10: G50-G64,G70-G72)
Weekly incidence (per 100,000 all ages) by region
for 2022/23 compared with 5 year average



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

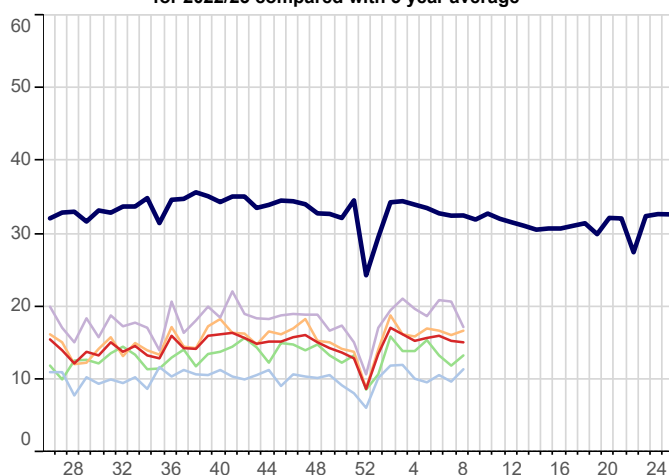


Symptoms Involving Nervous & Musculoskeletal (ICD10: R25-R29)
Weekly incidence (per 100,000 all ages) by region
for 2022/23 compared with 5 year average



7. Genitourinary System Disorders

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



8. Tabular Summary by Disease

Disease Name	Week beginning Week ending		20/02/2023 26/02/2023		13/02/2023 19/02/2023		06/02/2023 12/02/2023		30/01/2023 05/02/2023	
	Rate	Numer	Rate	Numer	Rate	Numer	Rate	Numer	Rate	Numer
Allergic Rhinitis	2.8	151	2.2	121	2.1	112	1.9	102		
Asthma	21.8	1,184	25.0	1,354	23.9	1,292	24.8	1,303		
Bronchitis	6.9	377	7.2	390	7.0	376	7.1	371		
Bullous Dermatoses	0.1	7	0.1	6	0.1	8	0.2	8		
Chickenpox	4.5	246	3.5	190	4.0	218	4.0	213		
Common Cold	2.2	117	2.6	143	2.6	139	2.9	152		
Conjunctival Disorders	26.0	1,412	27.1	1,467	29.1	1,575	27.3	1,436		
Herpes Simplex	2.7	148	3.2	172	3.0	163	3.2	166		
Herpes Zoster	5.4	293	5.2	283	5.6	302	5.1	266		
Impetigo	4.6	252	5.1	275	5.7	306	4.8	252		
Infectious Mononucleosis	0.5	25	0.6	31	0.5	25	0.4	20		
Influenza-like illness	4.6	248	4.5	243	5.3	288	5.5	289		
Infectious Intestinal Diseases	7.8	426	7.6	414	7.3	395	7.6	401		
Laryngitis and Tracheitis	3.2	173	3.2	174	4.0	217	4.2	223		
Lower Respiratory Tract Infections	69.4	3,772	70.3	3,808	71.2	3,852	75.4	3,968		
Measles	0.0	0	0.1	4	0.0	1	0.0	1		
Meningitis and Encephalitis	0.1	5	0.2	12	0.1	7	0.1	6		
Mumps	0.2	12	0.1	6	0.1	4	0.1	6		
Non-infective Enteritis and Colitis	14.6	795	12.6	682	13.1	707	13.3	700		
Otitis Media Acute	3.2	176	4.1	222	3.9	212	4.1	216		
Peripheral Nervous Disease	19.2	1,041	19.6	1,060	21.1	1,140	20.2	1,061		
Pleurisy	0.3	14	0.2	9	0.2	12	0.4	22		
Pneumonia and Pneumonitis	3.8	205	3.3	177	3.2	175	3.6	189		
Respiratory System Diseases	323.3	17,570	330.9	17,927	355.6	19,237	356.5	18,758		
Rubella	0.0	0	0.0	0	0.0	0	0.0	0		
Scabies	1.9	104	2.0	107	1.2	67	2.0	103		
Sinusitis	23.5	1,277	23.5	1,274	24.1	1,304	22.7	1,195		
Skin and Subcutaneous Tissue Infections	84.9	4,613	83.9	4,547	85.2	4,610	87.3	4,595		
Strep Throat and Peritonsillar Abscess	3.5	192	4.5	243	4.2	225	5.2	276		
Symptoms involving musculoskeletal	11.2	607	10.2	550	10.9	590	11.0	578		
Symptoms involving Respiratory and Chest	208.3	11,318	210.8	11,420	229.9	12,437	231.6	12,188		
Symptoms involving Skin and Integument Tissues	135.9	7,385	134.5	7,284	138.4	7,486	140.0	7,369		
Tonsillitis and acute Pharyngitis	48.5	2,634	47.1	2,553	51.0	2,761	53.4	2,812		
Upper Respiratory Tract Infections	166.3	9,036	171.0	9,261	189.6	10,258	190.3	10,014		
Urinary Tract Infections	15.1	823	15.3	830	16.0	863	15.7	825		
Viral Hepatitis	0.3	16	0.2	12	0.1	7	0.3	14		
Whooping Cough	0.0	1	0.1	4	0.0	2	0.1	3		
Practice Count		516		515		514		499		
Denom		5,433,955		5,417,318		5,409,375		5,262,329		

FURTHER INFORMATION:

About the report

Winter focus

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

Rate calculation

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

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

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

Five-year averages

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

Threshold calculation for Influenza-Like Illness (ILI)

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

In addition to the All Ages thresholds, we have also calculated thresholds for three age bands: those aged under 15, 15-64 year olds and those aged 65 and over. ILI incidence rates vary among different age groups, and the age-specific thresholds allow us to highlight epidemics where ILI disproportionately affects a particular age group.

This methodology is used by the European Centre for Disease Prevention and Control to standardise reporting of influenza activity across Europe, and is also in use by the UK Health Security Agency. Full details of the methodology can be found in: Vega *et al.* (2012) Influenza surveillance in Europe: establishing epidemic thresholds by the moving epidemic method. Influenza and Other Respiratory Viruses 7(4), 546–558. For ease of graphical representation, the final threshold (Very High) is not included in Graph A, page 2, but it is part of Table E, page 4.

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

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

Acknowledgement:

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

What we do

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

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

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

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

Our data extraction process and information governance

Data are extracted twice weekly from practice systems by Wellbeing data management on the RCGP's behalf. Patients who have withheld consent for data sharing are excluded from the extraction process.

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

What the data is used for

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

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

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

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

For further information

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

RCGP Research & Surveillance Centre
Policy, Research and Campaigns
Royal College of General Practitioners
30 Euston Square, London, NW1 2FB
Tel: switchboard 020 3188 7400

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

University of Oxford
Nuffield Department of Primary Care Health
Sciences
Eagle House
7 Walton Well Road
Oxford OX2 6ED

