



Royal College of
General Practitioners

RSC Communicable and Respiratory Disease Report for England

Key Statistics:

Week Number/Year.....**35/2016**
 Week Starting - Ending.....**29/08/2016 - 04/09/2016**
 No. of Practices.....**148**
 Population.....**1428697**

National (England)

- **Allergic Rhinitis** : decreased from **8.4** in week 34 to **7.0** in week 35.
- **Asthma** : decreased from **12.1** in week 34 to **9.3** in week 35.
- **Common Cold & URTI NOS** : decreased from **34.2** in week 34 to **29.7** in week 35.
- **Infectious Intestinal Diseases (IID)** : increased from **7.6** in week 34 to **9.4** in week 35.
- **Respiratory System Diseases** : decreased from **158.1** in week 34 to **144.8** in week 35.

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

- **Allergic Rhinitis** : decreased a little from **13.0** in week 34 to **12.6** in week 35 in the London region, decreased from **9.9** in week 34 to **4.7** in week 35 in the North region, increased from **3.9** in week 34 to **6.4** in week 35 in the South region, and decreased from **7.7** in week 34 to **5.7** in week 35 in the Midlands And East region.
- **Asthma** : decreased from **11.2** in week 34 to **7.8** in week 35 in the London region, decreased from **13.1** in week 34 to **7.7** in week 35 in the North region, increased from **9.5** in week 34 to **11.7** in week 35 in the South region, and decreased from **16.4** in week 34 to **10.0** in week 35 in the Midlands And East region.
- **Common Cold & URTI NOS** : decreased a little from **42.5** in week 34 to **40.9** in week 35 in the London region, decreased from **37.6** in week 34 to **31.6** in week 35 in the North region, decreased from **26.9** in week 34 to **22.5** in week 35 in the South region, and decreased from **29.8** in week 34 to **25.3** in week 35 in the Midlands And East region.
- **Infectious Intestinal Diseases (IID)** : increased from **7.2** in week 34 to **9.2** in week 35 in the London region, increased from **11.3** in week 34 to **12.8** in week 35 in the North region, increased from **4.6** in week 34 to **7.6** in week 35 in the South region, and increased a little from **6.2** in week 34 to **6.5** in week 35 in the Midlands And East region.
- **Respiratory System Diseases** : decreased a little from **150.3** in week 34 to **145.1** in week 35 in the London region, decreased from **178.7** in week 34 to **157.8** in week 35 in the North region, decreased from **136.3** in week 34 to **128.1** in week 35 in the South region, and decreased from **167.9** in week 34 to **149.8** in week 35 in the Midlands And East region.

Comment:

The rate of hay fever / allergic rhinitis decreased this week; though is continuing at seasonally expected levels. We are at or near the low point of the year, in the rate of presentation of respiratory and chest conditions to primary care.

Most other conditions are at or below seasonally expected levels.

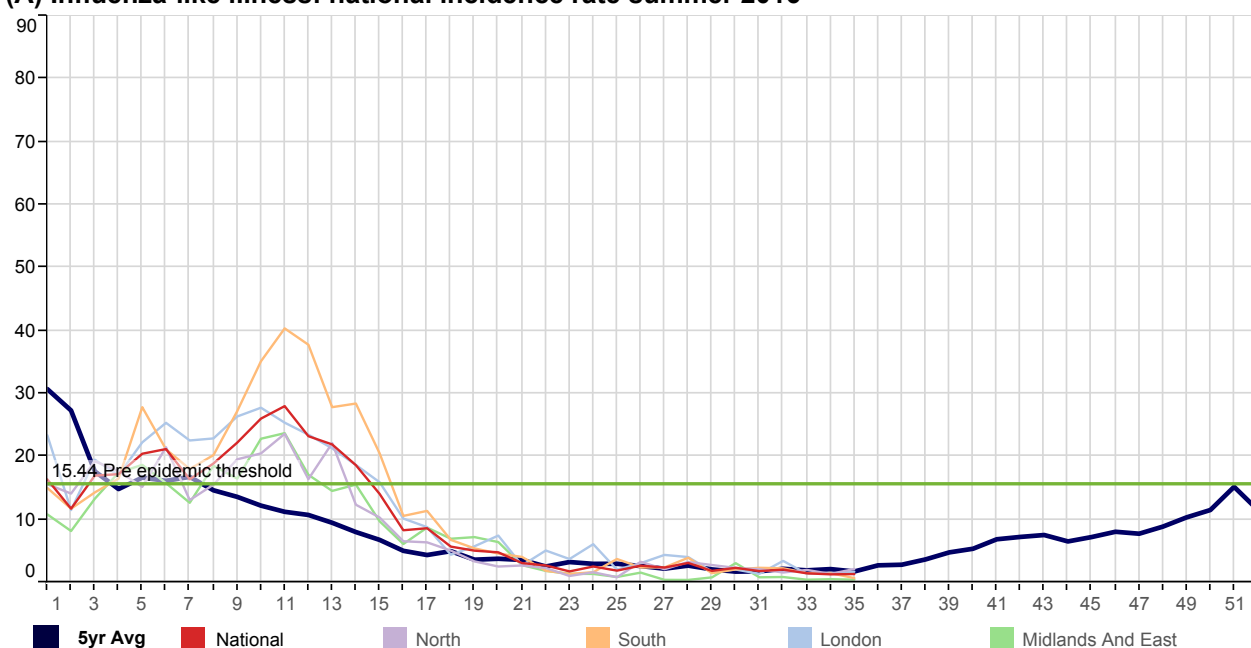
Spring/Summer Focus 2016

Please see page 13 for explanatory notes on the data.

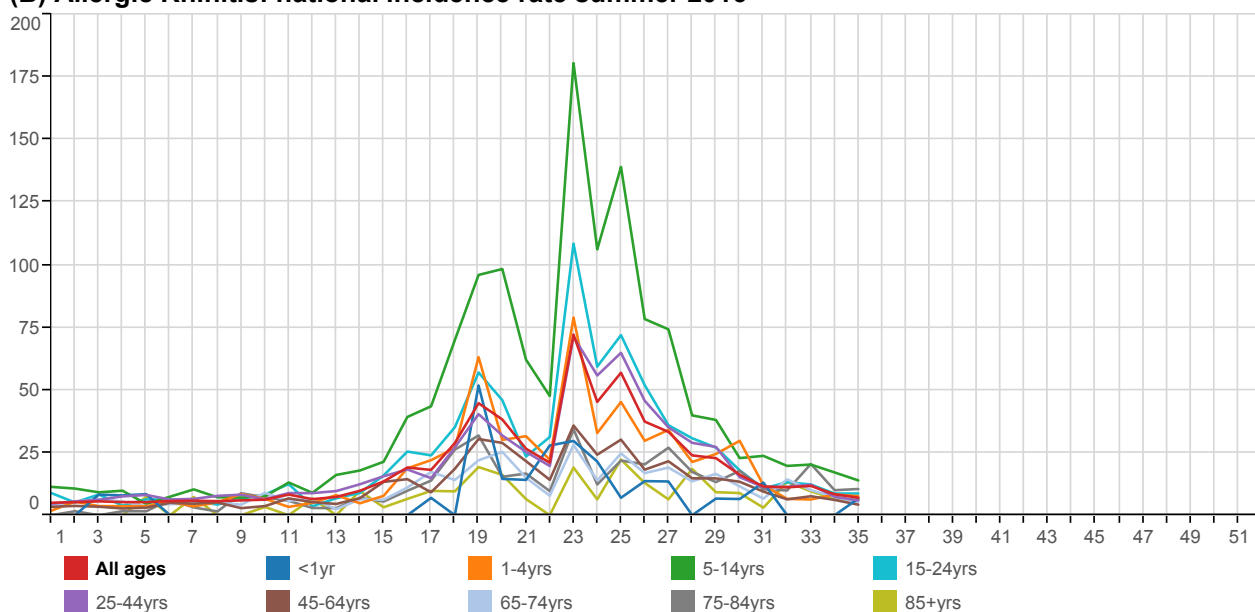
Weekly influenza-like illness and bronchitis incidence rates per 100,000 persons

	Bronchitis	Influenza-like illness		Influenza-like illness	Bronchitis
<1yr	39.9	0.0	London	1.7	23.8
1-4yrs	42.5	0.0	North	2.1	40.3
5-14yrs	8.2	0.0	South	0.7	31.2
15-24yrs	14.6	1.6	Midlands And East	0.4	40.1
25-44yrs	19.2	1.2	National	1.3	34.1
45-64yrs	39.7	2.3			
65-74yrs	54.3	1.5			
75-84yrs	94.2	1.3			
85+yrs	149.4	0.0			
All ages	34.1	1.3			

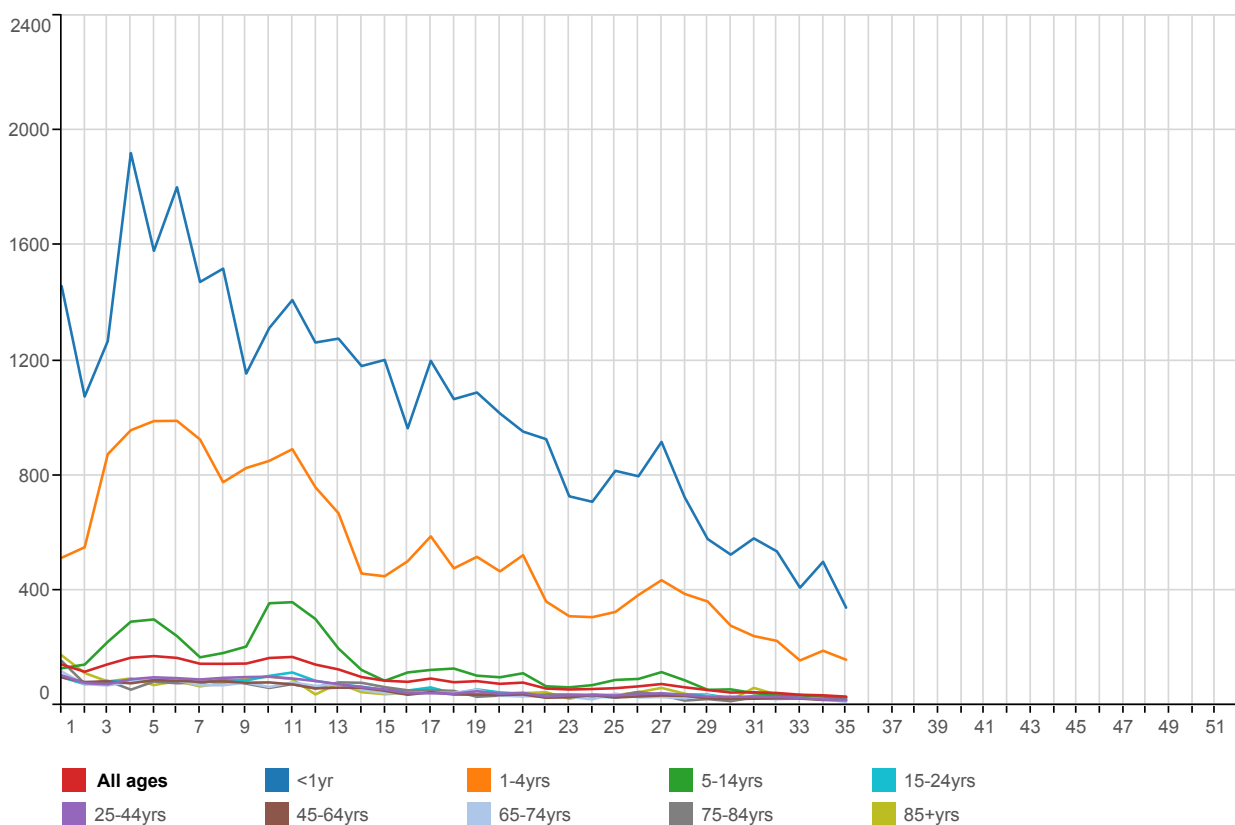
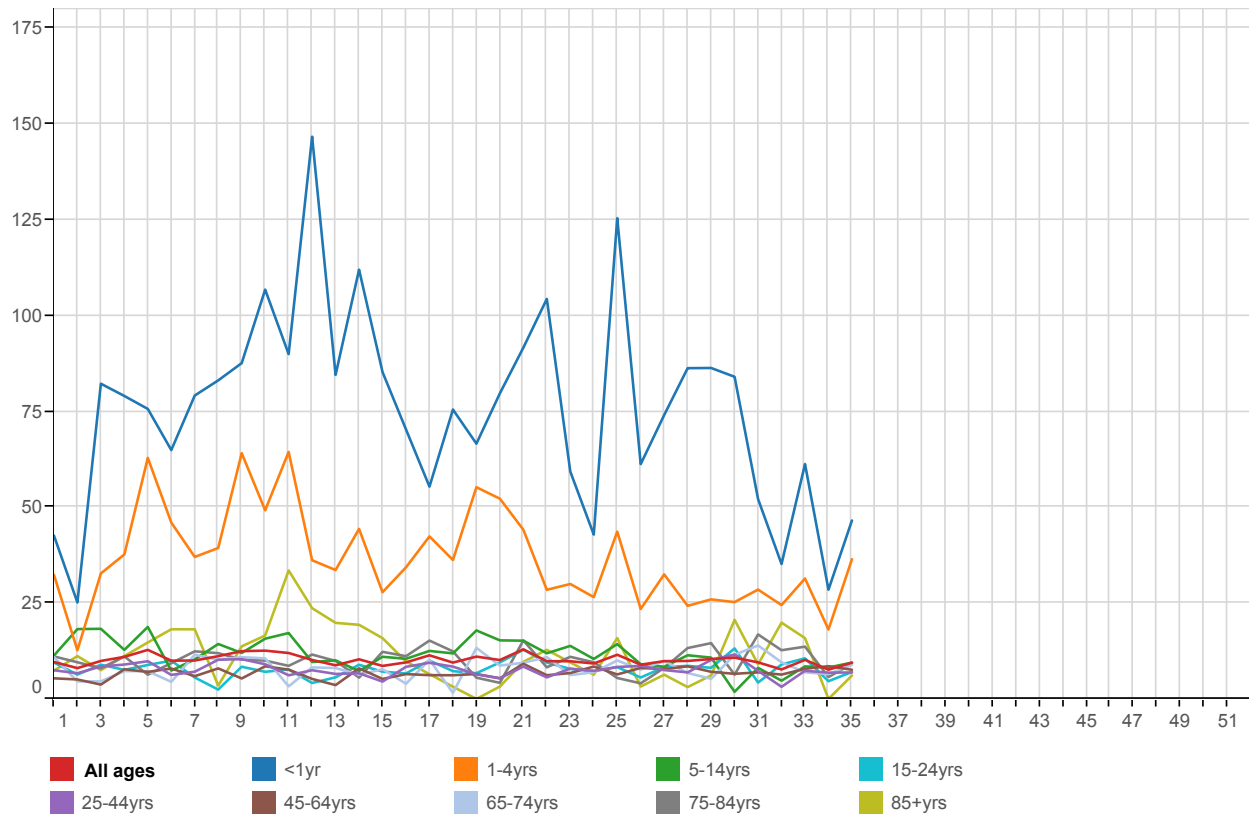
(A) Influenza-like illness: national incidence rate summer 2016*



(B) Allergic Rhinitis: national incidence rate summer 2016*



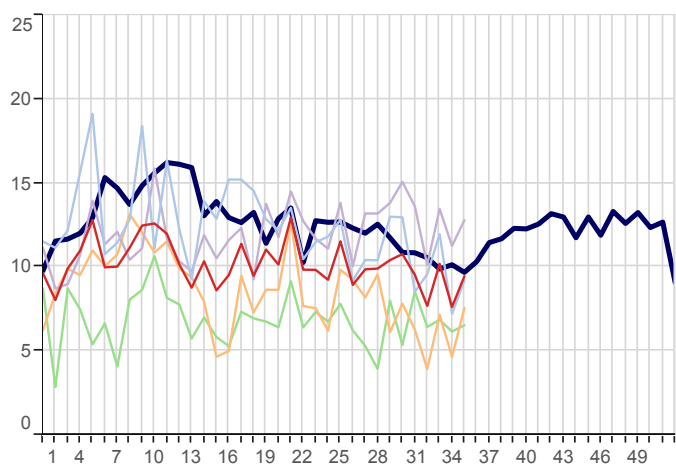
* The thresholds used are the agreed RCGP/ Public Health England levels for 2016. The rolling average line (blue) is based on 5 year historic RCGP RSC level.

(C) Common Cold & URTI NOS : national incidence rate 2016 by age group***(D) Infectious Intestinal Diseases : national incidence rate 2016 by age group***

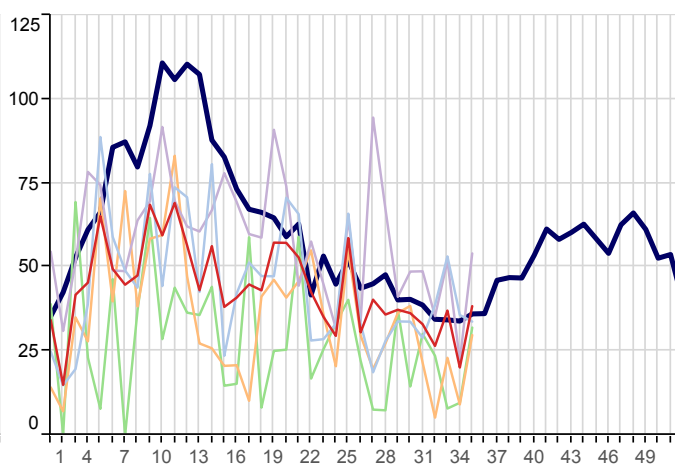
1. Water & Food Borne Disorders:

5yr Avg National London North South Midlands And East

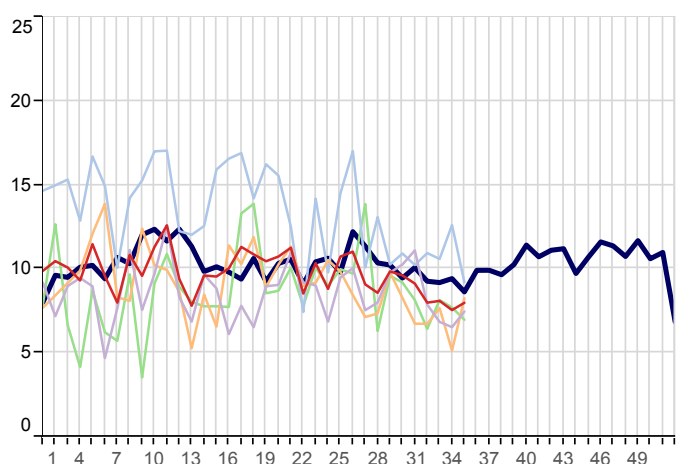
Infectious Intestinal Disease (ICD10: A00-A09)
Weekly incidence (per 100,000 **all ages**) by regions
for 2016 compared with 5 year average



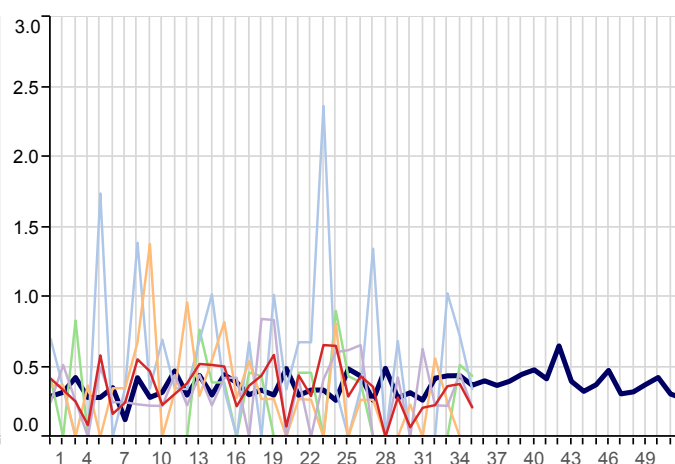
Infectious Intestinal Disease (ICD10: A00-A09)
Weekly incidence (per 100,000 **0-4 years**) by regions
for 2016 compared with 5 year average



Non-Infective Enteritis & Colitis (ICD10: K50-K52)
Weekly incidence (per 100,000 **all ages**) by region
for 2016 compared with 5 year average



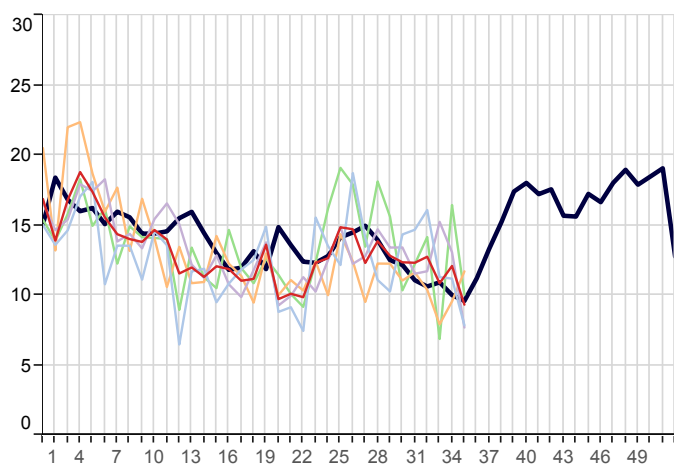
Viral Hepatitis (ICD10: B15-B19)
Weekly incidence (per 100,000 **all ages**) by region
for 2016 compared with 5 year average



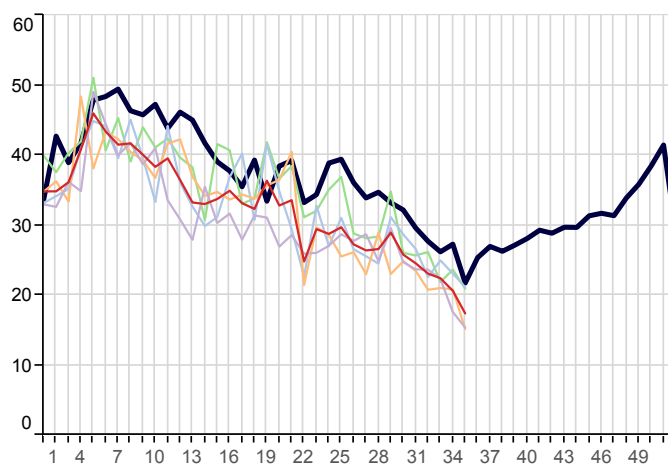
2. Environmentally Sensitive Disorders:

5yr Avg National London North South Midlands And East

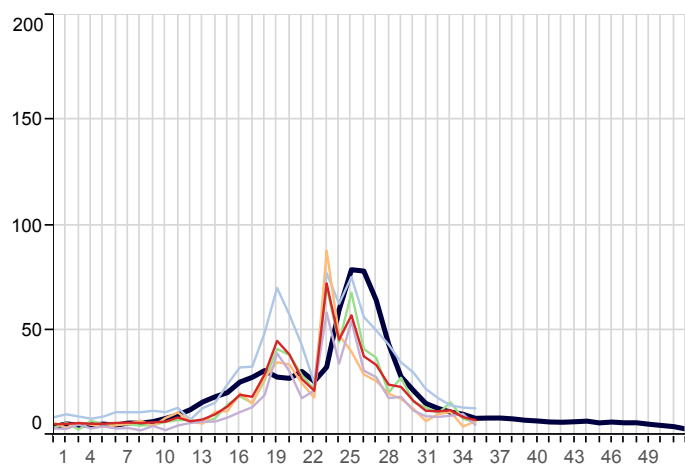
Asthma (ICD10: J45-J46)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



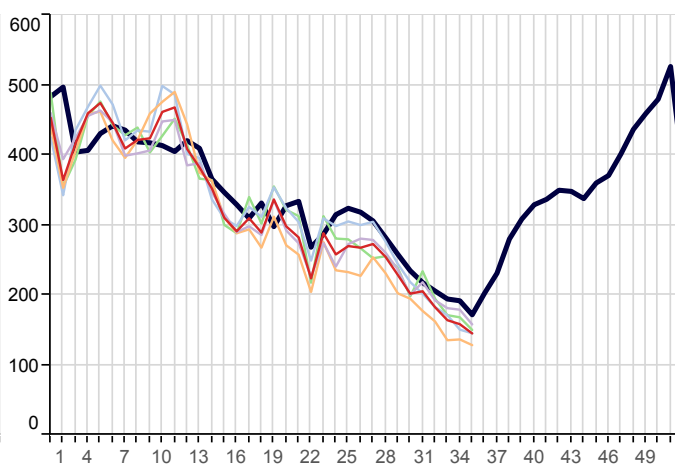
Disorders of Conjunctiva (ICD10: H10-H13)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



Hayfever/Allergic Rhinitis (ICD10: J30)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



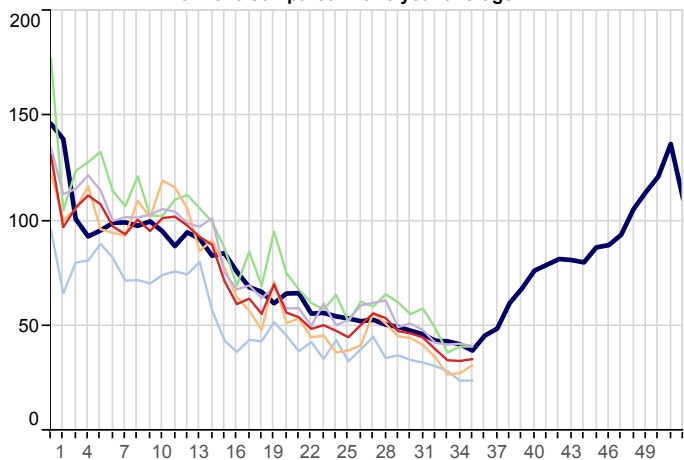
Symptoms involving Respiratory & Chest (ICD10: R05-R07,R09)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



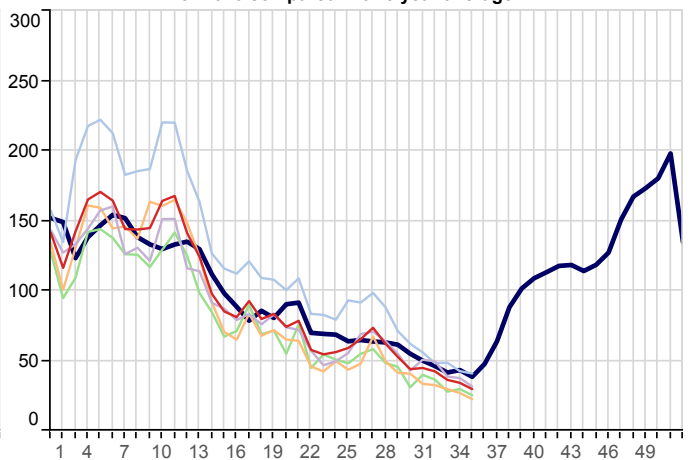
3. Respiratory Infections:

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

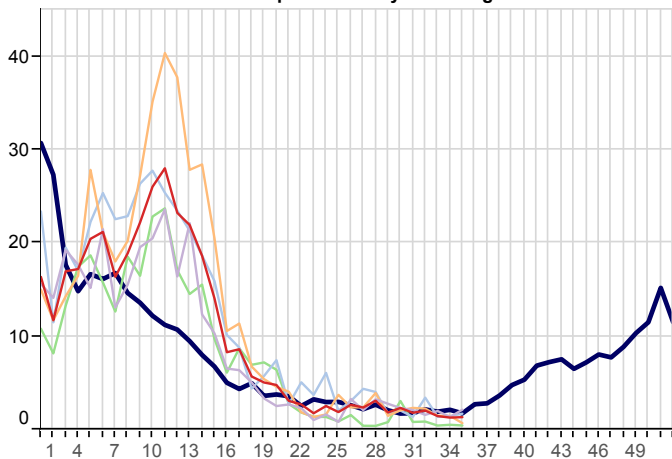
Acute Bronchitis (ICD10: J20-J21,J40)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



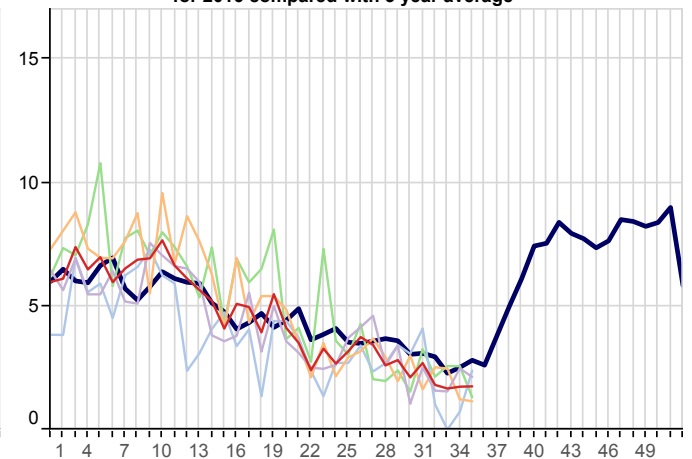
Common Cold (ICD10: J00,J06)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



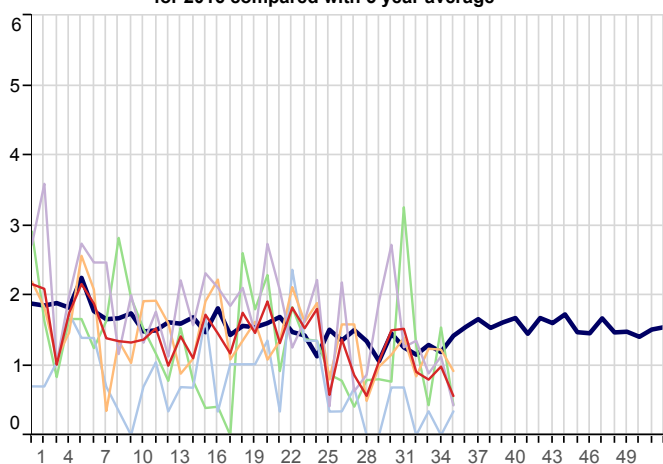
Influenza-Like Illness (ICD10: J09-J11)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



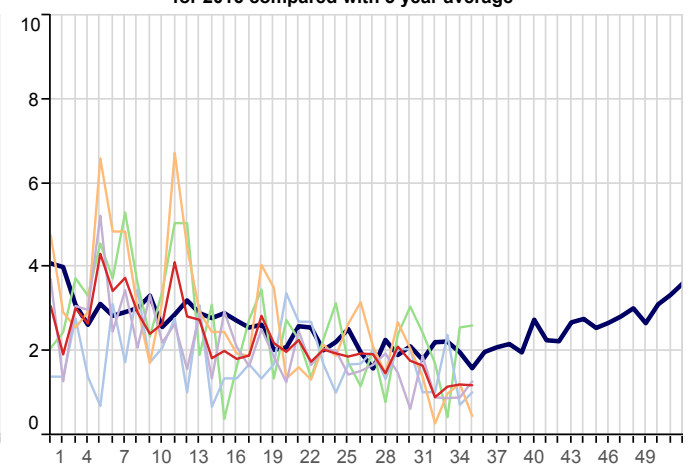
Acute Laryngitis/Tracheitis (ICD10: J04)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



Pleurisy (ICD10: R091)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



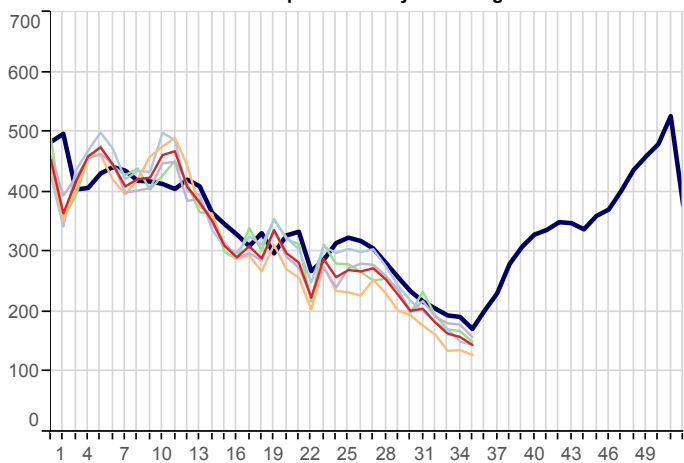
Pneumonia/Pneumonitis (ICD10: J12-J18)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



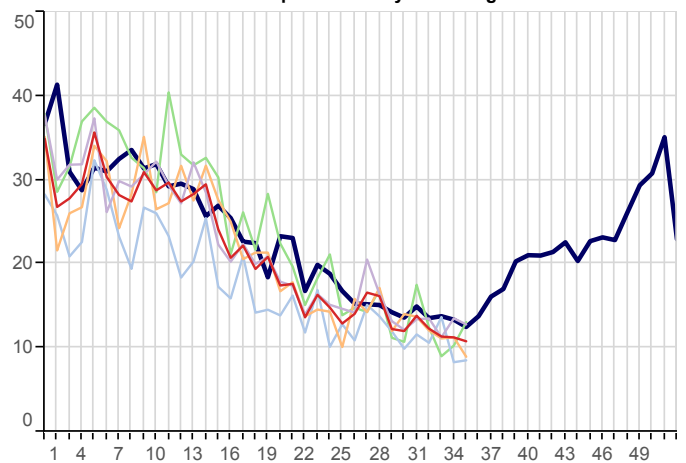
3. Respiratory Infections(Continued):

5yr Avg National North South London Midlands And East

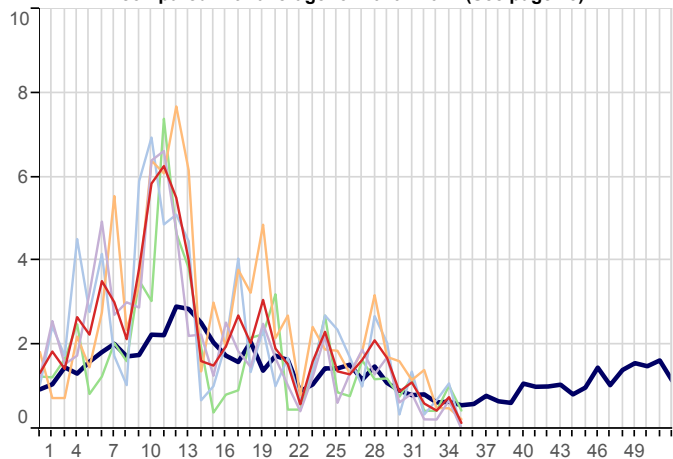
Respiratory System Diseases (ICD10: J00-J99)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



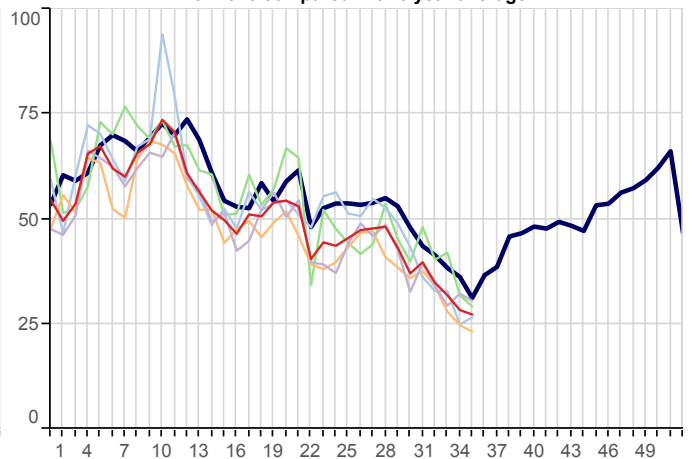
Acute Sinusitis (ICD10: J01)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



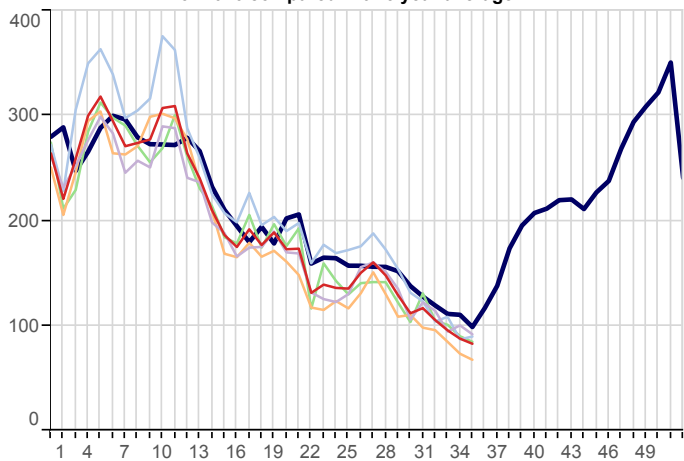
Strep Sore Throat, Scarletina and Peritonsillar Abscess (ICD10: A38,J02,J36)
Weekly incidence (per 100,000 all ages) by region for 2015
compared with average for 2010 - 2012 (See page 13)



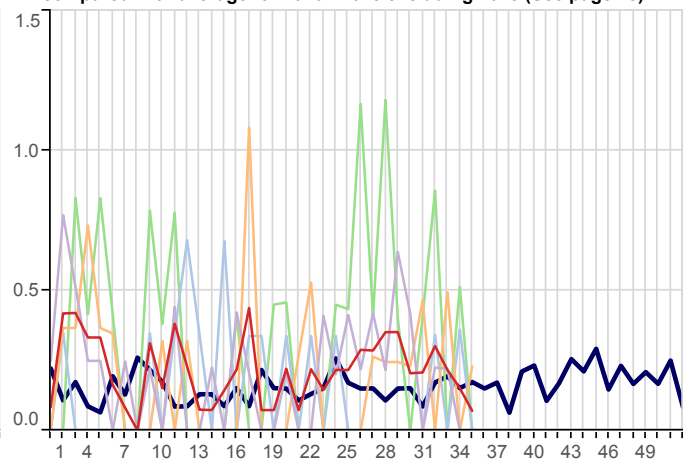
Acute Tonsillitis/Pharyngitis (ICD10: J02-J03)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



Upper Respiratory Tract Infections (URTI)(ICD10: J00-J06)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



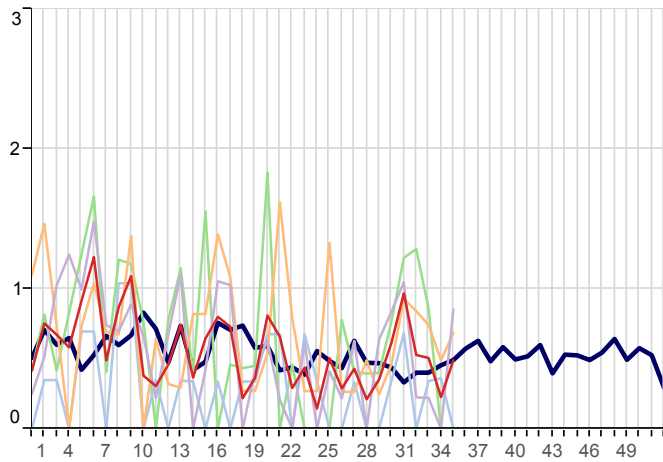
Whooping Cough (ICD10: A37)
Weekly incidence (per 100,000 all ages) by region for 2015
compared with average for 2010 - 2015 excluding 2013 (See page 13)



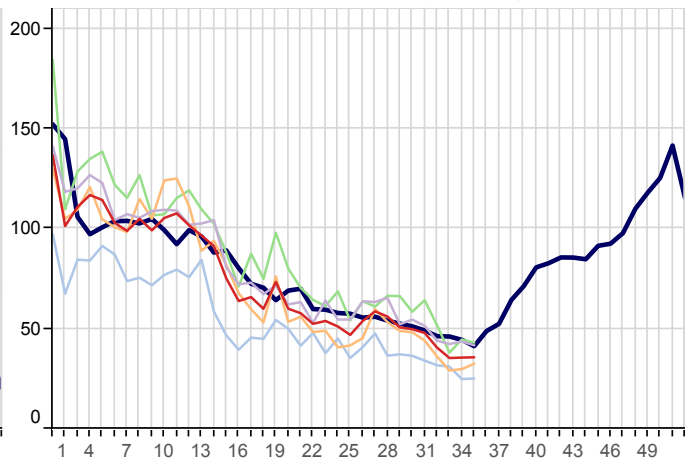
3. Respiratory Infections(Continued):

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

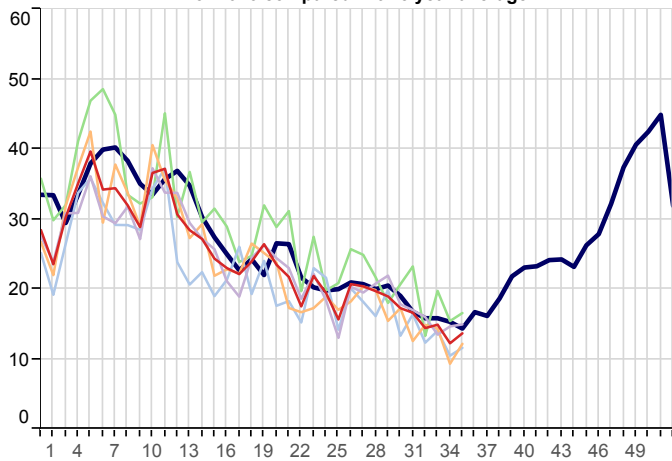
Infectious Mononucleosis (ICD10: B27)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



Lower Respiratory Tract Infections (LRTI)(ICD10: J20-J22)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



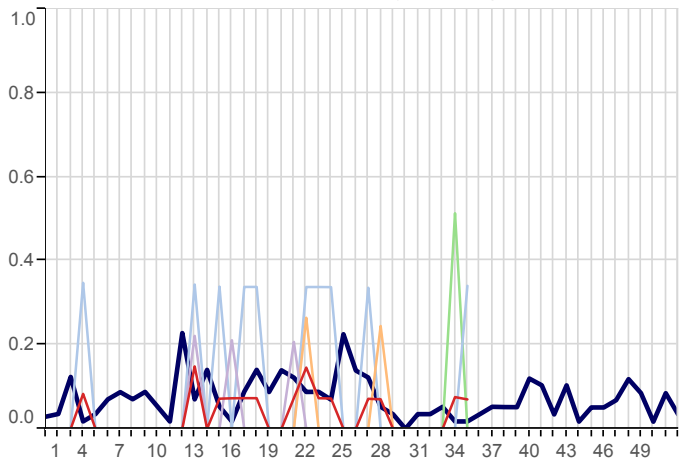
Acute Otitis Media (ICD10: H650-H651,H660,H669)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



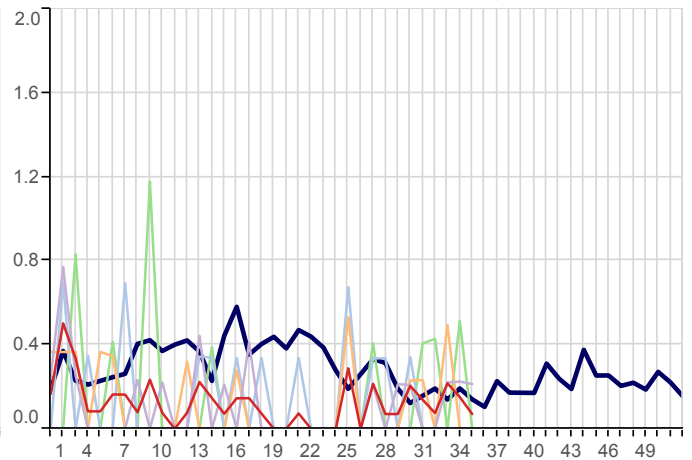
4. Vaccine Sensitive Disorders

5yr Avg National North South London Midlands And East

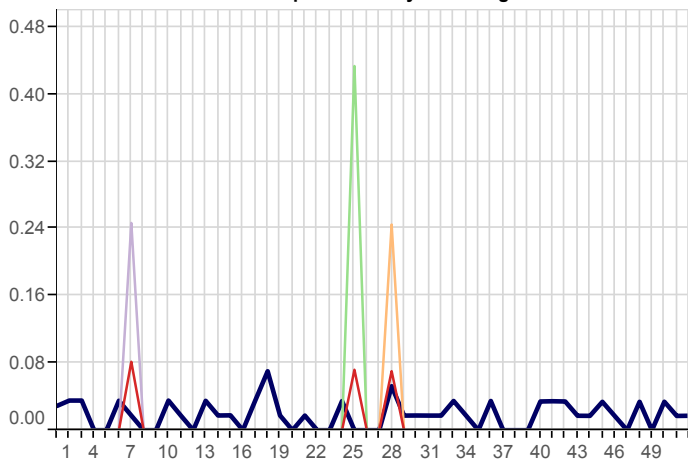
Measles (ICD10: B05)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



Mumps (ICD10: B26)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average

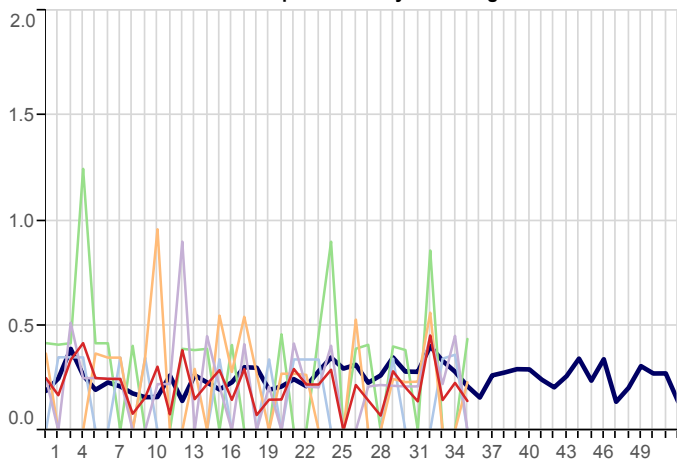


Rubella (ICD10: B06)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average

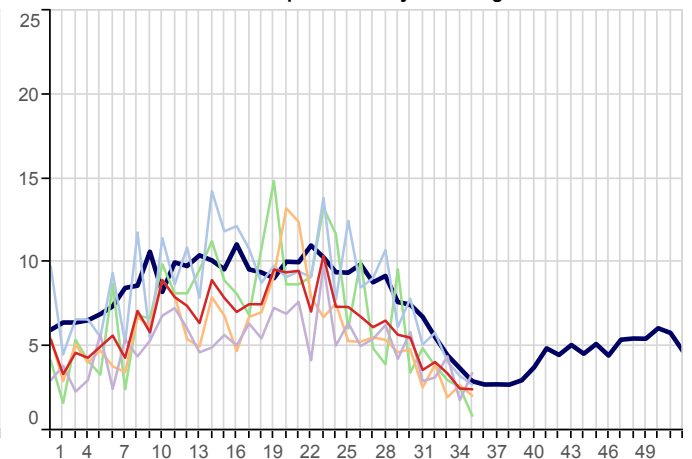


5. Skin Contagions

Bullous Dermatoses (ICD10: L10-L14)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



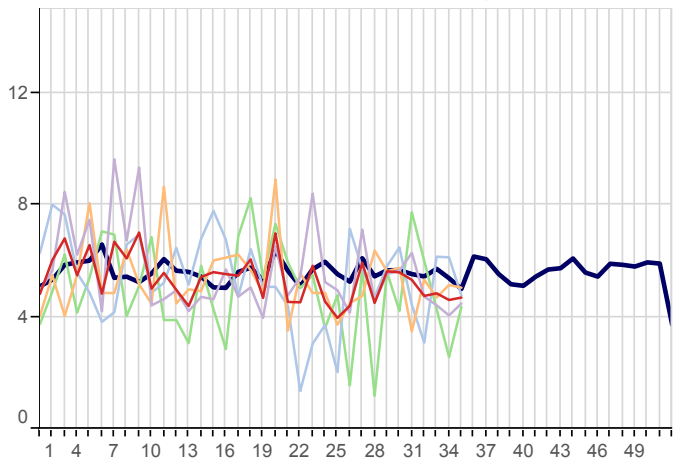
Chickenpox (ICD10: B01)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



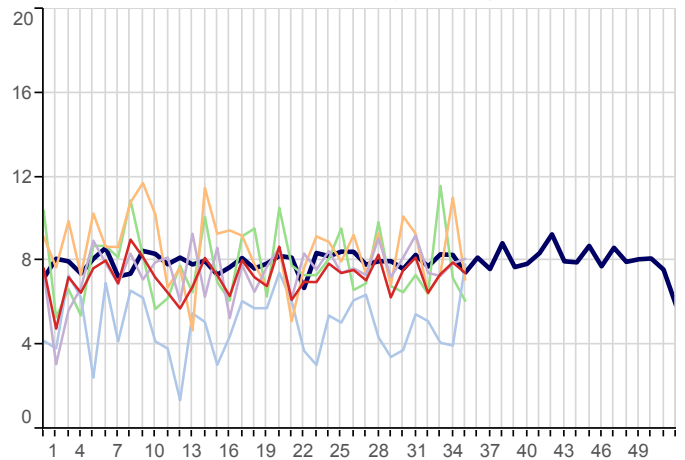
5. Skin Contagions (Continued)

5yr Avg National North South London Midlands And East

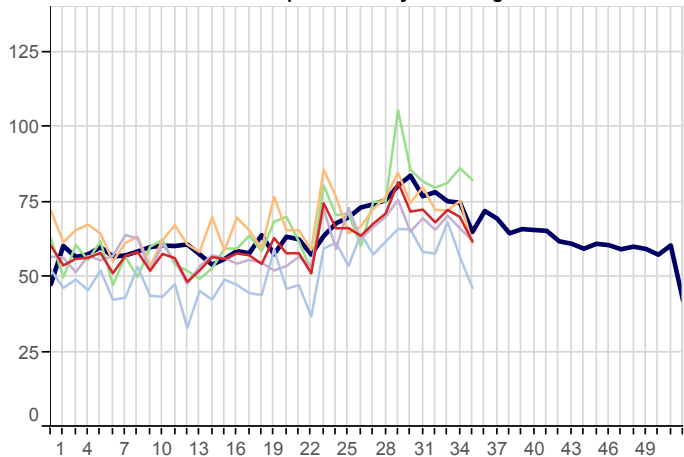
Herpes Simplex (ICD10: B00)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



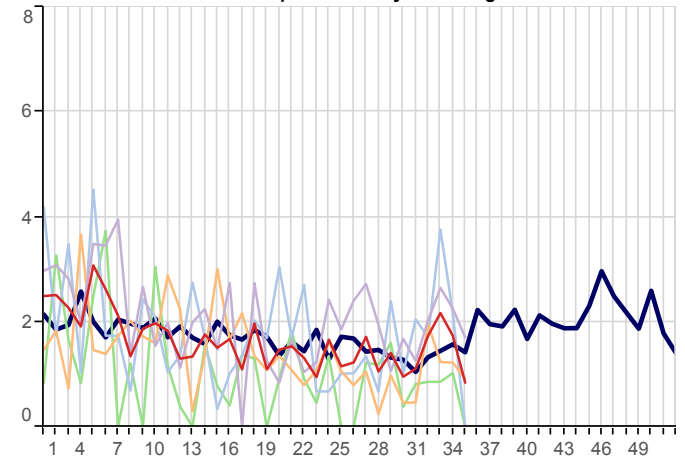
Herpes Zoster (ICD10: B02)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



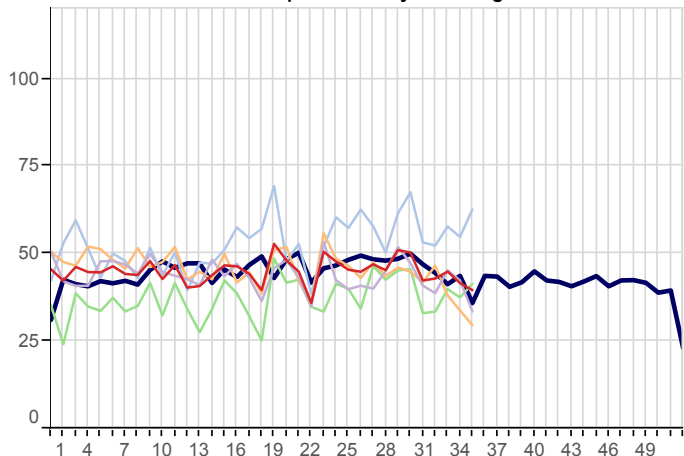
Infections of Skin & Subcutaneous Tissue (ICD10: L00-L08)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



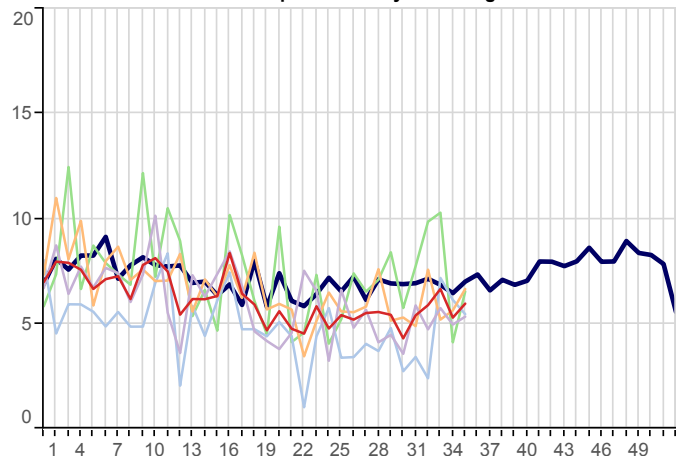
Scabies (ICD10: B86)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



Symptoms involving Skin & Oth Integument Tiss (ICD10: R20-R23)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



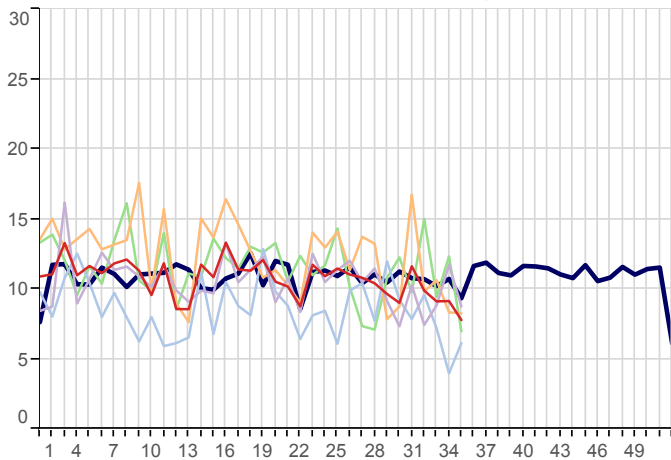
Impetigo (ICD10: L01)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



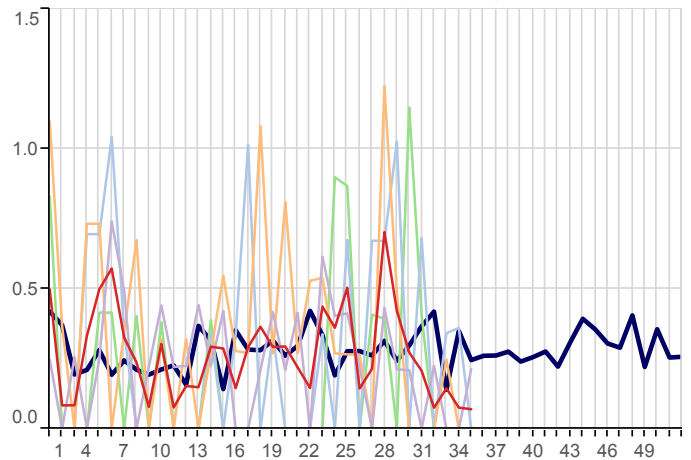
6. Disorders Affecting the Nervous System

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

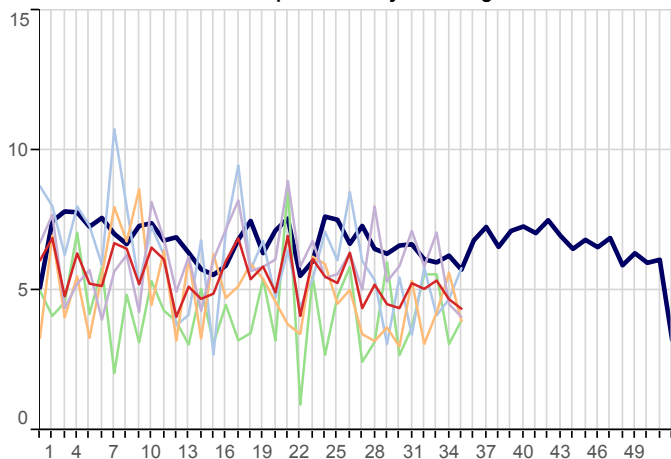
Disorders of The Peripheral Nervous System (ICD10: G50-G64,G70-G72)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



Meningitis/Encephalitis (ICD10: A170-A171,A390,A38-A85,A87,G00-G05)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average

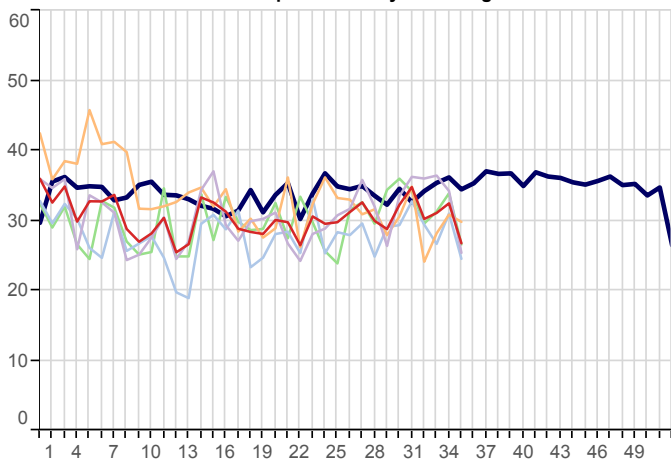


Symptoms Involving Nervous & Musculoskeletal (ICD10: R25-R29)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



7. Genitourinary System Disorders

Urinary Tract Infection/Cystitis (ICD10: N30,N390)
Weekly incidence (per 100,000 all ages) by region
for 2016 compared with 5 year average



8. Tabular Summary by Disease

Disease Name	Week beginning Week ending		29/08/2016 04/09/2016		22/08/2016 28/08/2016		15/08/2016 21/08/2016		08/08/2016 14/08/2016	
	Rate	Episodes	Rate	Episodes	Rate	Episodes	Rate	Episodes	Rate	Episodes
Allergic Rhinitis	7.0	100	8.4	111	11.7	162	11.2	148		
Asthma	9.3	133	12.1	160	10.8	150	12.7	169		
Acute Bronchitis	34.1	487	33.2	440	33.5	464	38.8	515		
Bullous Dermatoses	0.1	2	0.2	3	0.1	2	0.5	6		
Chickenpox	2.4	35	2.5	33	3.4	47	4.1	54		
Common Cold	29.7	424	34.2	453	36.3	502	42.3	562		
Conjunctival Disorders	17.4	248	20.6	273	22.4	310	23.1	306		
Herpes Simplex	4.7	67	4.6	61	4.8	67	4.7	63		
Herpes Zoster	7.4	106	7.9	105	7.4	102	6.5	86		
Impetigo	5.9	85	5.3	70	6.6	92	5.9	78		
Infectious Mononucleosis	0.5	7	0.2	3	0.5	7	0.5	7		
Influenza-like illness	1.3	19	1.3	17	1.4	20	2.0	27		
Infectious Intestinal Diseases	9.4	135	7.6	101	10.2	141	7.7	102		
Laryngitis and Tracheitis	1.7	25	1.7	23	1.7	23	1.8	24		
Lower Respiratory Tract Infections	35.8	511	35.6	472	35.4	490	40.6	539		
Measles	0.1	1	0.1	1	0.0	0	0.0	0		
Meningitis and Encephalitis	0.1	1	0.1	1	0.1	2	0.1	1		
Mumps	0.1	1	0.2	2	0.2	3	0.1	1		
Non-infective Enteritis and Colitis	8.0	114	7.5	100	8.1	112	8.0	106		
Otitis Media Acute	13.6	195	12.2	162	14.9	206	14.4	191		
Peripheral Nervous Disease	7.8	111	9.1	121	9.1	126	9.9	131		
Pleurisy	0.6	8	1.0	13	0.8	11	0.9	12		
Pneumonia and Pneumonitis	1.2	17	1.2	16	1.2	16	0.9	12		
Respiratory System Diseases	144.8	2,069	158.1	2,095	163.7	2,266	182.3	2,420		
Rubella	0.0	0	0.0	0	0.0	0	0.0	0		
Scabies	0.8	12	1.7	23	2.2	30	1.7	23		
Sinusitis	10.8	154	11.2	149	11.3	157	12.3	163		
Skin and Subcutaneous Tissue Infections	61.8	883	69.9	927	72.3	1,001	68.2	905		
Strep Throat and Peritonsillar Abscess	0.1	2	0.8	10	0.4	6	0.6	8		
Symptoms involving musculoskeletal	4.3	62	4.7	62	5.3	74	5.0	67		
Symptoms involving Respiratory and Chest	15.5	222	18.9	250	17.7	245	16.9	224		
Symptoms involving Skin and Integument Tissues	39.5	565	41.6	551	44.9	621	42.9	569		
Tonsillitis and acute Pharyngitis	27.2	389	28.3	375	31.8	440	34.8	462		
Upper Respiratory Tract Infections	82.7	1,181	87.5	1,160	95.4	1,321	105.2	1,396		
Urinary Tract Infections	26.7	382	32.4	430	31.1	430	30.2	401		
Viral Hepatitis	0.2	3	0.4	5	0.4	5	0.2	3		
Whooping Cough	0.1	1	0.2	2	0.2	3	0.3	4		
Practice Count		148		141		146		143		
Denom		1,428,697		1,325,313		1,384,048		1,327,209		

FURTHER INFORMATION:

About the report

Summer focus

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

Rate calculation

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

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

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

Five-year averages

Weekly rates are set against the five-year average, calculated from data for the calendar years 2011-2015. Previously we reported against a ten-year average. The change to a five-year average was made because longer-term trends in the incidence of disease have led to weekly rates for certain diseases becoming increasingly divergent from their ten-year average. The use of five-year averages lessens this effect and enables more meaningful comparison.

For two diseases, years with exceptionally high incidence have been excluded from the averages: for Whooping Cough, data from 2012 has been excluded; for Strep Sore Throat, Scarletina and Peritonsillar Abscess, data from 2013 and 2014 have been excluded so that similar rates in the future will appear as exceptional rather than normal in comparison.

Threshold calculation for Influenza-Like Illness (ILI)

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

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

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

What we do

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

The RSC data and analytics hub is housed in the Section of Clinical Medicine and Ageing at the University of Surrey.

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

<http://www.rcgp.org.uk/clinical-and-research/our-programmes/research-and-surveillance-centre.aspx>

Our data extraction process and information governance

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

Data are pseudonymised as close to source as possible. Data are held on secure servers at the RCGP data and analytics hub in the Section of Clinical Medicine and Ageing at the University of Surrey. Both Apollo and the University of Surrey are registered and compliant with the Data Protection Act, and fully compliant with all relevant HSCIC and NHS 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 Public Health England. The bulletin can be found at the following URL:

<https://www.gov.uk/government/publications/syndromic-surveillance-summary>

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

<http://www.rcgp.org.uk/clinical-and-research/our-programmes/research-and-surveillance-centre.aspx>

For further information

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

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