

COVID-19 EPIDEMIOLOGICAL UPDATE

8 December 2022 / N° 145

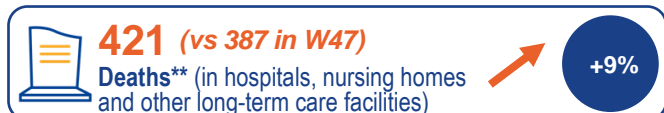
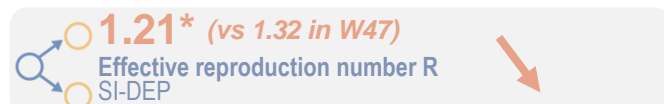
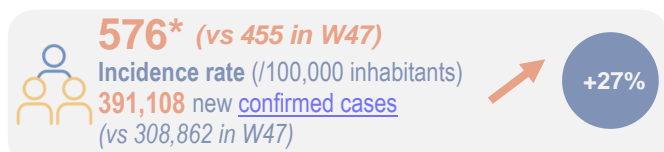
As part of its surveillance, alert, and prevention missions, Santé publique France analyses and publishes COVID-19 data obtained from its network of partners¹ as well as its own studies and surveys. This report is based on data submitted to Santé publique France up to 6 December.

Following strike action by some private medical laboratories, the incidence rate and screening rate are underestimated as of 30 October; the positivity rate and the effective R values are also affected. Santé publique France remains mobilised to provide continuous monitoring of the epidemic based on the other data sources used for surveillance, which are not affected.

Key numbers

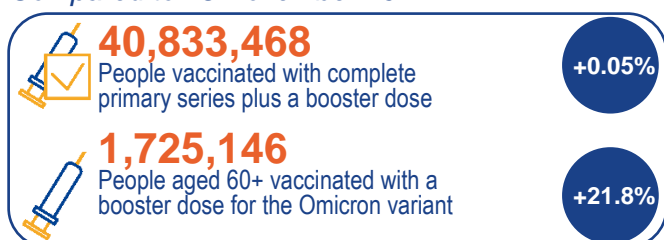
In week 48 (28 November-4 December 2022)

Compared to week 47 (21-27 November 2022)



On 5 December 2022

Compared to 28 November 2022



Key points

Epidemiological situation

In week 48, circulation of SARS-CoV-2 continued to increase at national level. Virological indicators (as calculated from antigen tests alone and from all tests) were rising, as were those for health care use. Hospital indicators were also on the rise.

- Metropolitan France:
 - Incidence rate still increasing in all regions
 - Hospital admissions up in majority of regions
 - Number of deaths rising
- Overseas France:
 - Incidence and hospital admission rates increasing in Guadeloupe

Variants

- Omicron sub-lineages: BA.5 omnipresent, accounting for 95% of sequences in the week 47 Flash Survey (21 November)
- Among BA.5 sub-lineages, BQ.1.1 continues to rise (58% in week 47 Flash Survey vs 54% in week 46 Flash Survey)

Prevention

- Vaccination on 5 December 2022 (Vaccin Covid data):
 - 8.8% of 60-79 year-olds had received a booster dose for the Omicron variant (representing 9.7% of those eligible), while 32.1% of this age group is considered protected by vaccination;
 - 11.2% of 80+ year-olds had received a booster dose for the Omicron variant (representing 12.8% of those eligible), while 14.4% of this age group is considered protected by vaccination.
- Amid SARS-CoV-2 and winter viruses in active circulation, it is necessary to increase compliance with preventive measures:
 - up-to-date COVID-19 vaccination, including a booster dose of bivalent vaccine (protecting against the original strain and the Omicron variant of Sars-CoV-2) for eligible individuals already vaccinated with a primary course, and vaccination against influenza viruses;
 - self-isolation in case of a positive COVID-19 test and/or symptoms;
 - continued application of precautionary measures, including wearing a face mask (particularly around vulnerable people and in enclosed spaces favourable to transmission such as public transport), hand washing and ventilation of enclosed spaces.

*Uninterpretable data. **W48: unconsolidated data.

¹Santé publique France acknowledges the large public health network that contributes to COVID-19 surveillance: healthcare professionals working in private practice and hospitals, emergency departments, hospital and private biology laboratories, learned societies for infectious diseases, resuscitation, and emergency medicine, CNAM, INSERM, and INSEE.

Virological indicators from SI-DEP

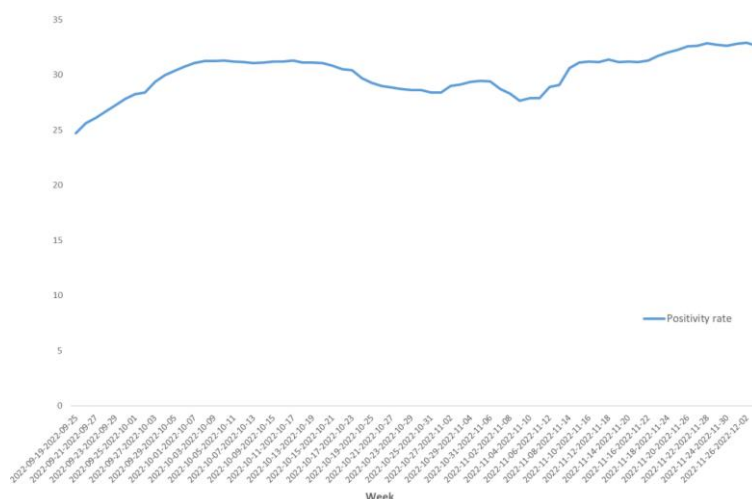
A number of private medical laboratories suspended transmission of COVID-19 test results to the SI-DEP database from 27 October to 3 November, then suspended all activity on 14-17 November and 1-2 December, consequently disrupting production of the Santé publique France virological indicators.

As a result, analysis of the virological indicators produced using SI-DEP data from 28 October onwards is based on antigen tests, mainly performed by pharmacies, as well as on the RT-PCR tests performed by laboratories that continued transmissions.

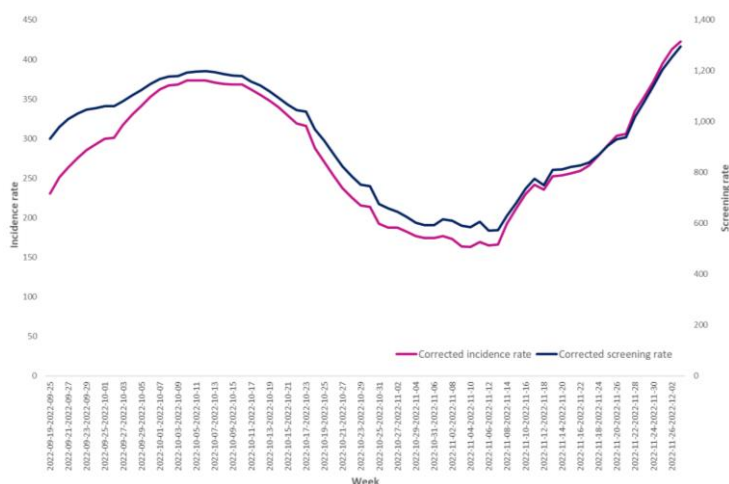
Impact analyses carried out by Santé publique France show that the dynamic of indicators based on antigen tests alone (which represent more than 50% of total tests) largely correlates with that obtained from all tests, allowing us to continue assessing the evolution of the epidemic. However, these indicators must be interpreted with caution given possible changes in people's use of testing. The graphs below, presented as a guideline, illustrate the evolution of the positivity rate, as well as that of the incidence and screening rates (for antigen tests alone). In the second graph, only the trends are to be interpreted. Changes in the incidence and positivity rates are calculated from antigen tests over seven rolling days (Sunday to Saturday) and not by calendar week.

Furthermore, Santé publique France wishes to emphasise that since March 2020, monitoring of the COVID-19 epidemic dynamics relies on multi-source, integrated surveillance to assess changes based on indicators other than those produced solely from laboratory data. These indicators include emergency department visits, SOS Médecins consultations, hospital admissions (SI-VIC), deaths, and estimates of vaccination coverage. These indicators are not impacted, guarantee continuity in the monitoring of epidemic trends, and will continue to feed the reports produced by Santé publique France.

Evolution of positivity rate from antigen tests, France



Evolution of incidence rate and screening rate (antigen tests only), France



Source: SI-DEP, data processing by Santé publique France

Source: SI-DEP, data processing by Santé publique France

SITUATION UPDATE

In week 48, the analysis of virological indicators from SI-DEP was again disrupted by the strike action of some private medical laboratories. However, the majority of these indicators, as well as those concerning healthcare use, remained coherent and showed that the epidemic was still growing. Incidence rates from antigen tests and all tests continued to increase, as did SOS Médecins consultations and emergency department visits. A rise was also observed in hospital indicators and the number of deaths (unconsolidated data). On 5 December, only 8.8% of 60-79 year-olds and 11.2% of 80+ year-olds had received a booster dose adapted to the Omicron variant. In view of this context and the active circulation of several respiratory viruses, it is necessary to reinforce vaccination against COVID-19 (particularly with the booster dose of bivalent vaccine adapted to the initial strain and Omicron), as well as vaccination against influenza, among eligible persons. In addition, greater adherence to preventive measures – including wearing a mask – is needed, particularly to protect the most vulnerable. Compliance with other recommended measures also remains necessary in case of symptoms or a positive test.

EPIDEMIOLOGICAL UPDATE

Following various strikes within private medical laboratories, the analysis of virological indicators from SI-DEP remains disrupted. However, the trends in these virological indicators, whether calculated from antigen tests alone or from all tests, remained coherent. The national incidence rate based on antigen tests alone continued to increase, as did the rate calculated from all tests. The increase in rates from antigen tests was observed in all age groups, although it was less pronounced among children under 10 years old. The positivity rate calculated from antigen tests stabilised but remained on the increase across all tests. However, a decrease was observed in the under-20 age group.

In week 48, the number of consultations for suspected COVID-19 continued to rise, with 3,257 consultations at SOS Médecins (+18%) and 4,485 emergency department visits (+29%) recorded. The increases concerned all age groups, except SOS Médecins consultations for children under the age of 4 years.

Hospital indicators were up in week 48 for the third consecutive week (unconsolidated data) with 6,102 new hospital admissions recorded (i.e. +7% vs +13% in week 47), including 544 (+6% vs +6% in week 47) admissions to intensive care. Regarding the number of deaths in hospitals and long-term care facilities, an increase was observed after several weeks of decline (421, i.e. +9%, unconsolidated data).

In metropolitan France, incidence rates increased in all regions, regardless of test type. The greatest increases were observed in Auvergne-Rhône-Alpes, Occitanie and Provence-Alpes-Côte d'Azur. These regions also showed the highest incidence rates. Hospital admission rates increased in almost all regions, particularly in Nouvelle-Aquitaine. The highest rates were observed in Provence-Alpes-Côte d'Azur, Corsica and Bourgogne-Franche-Comté.

In overseas France, an increase in incidence rates calculated from antigen tests alone and from all tests was observed in Guadeloupe and Reunion Island. Hospital admission rates were on the rise in Guadeloupe, where they were also the highest.

VARIANTS

Omicron circulates almost exclusively in France and its BA.5 sub-lineage remains omnipresent. In metropolitan France, BA.5 (all sub-lineages combined) represented 95% of interpretable sequences in the Flash Survey for week 47 (21 November, based on 959 interpretable sequences). Among these sub-lineages, detection of BQ.1.1 (including all further sub-lineages) continues to increase steadily, with 58% of interpretable sequences in the week 47 Flash Survey (vs 54% for the week 46 Flash Survey). The sub-lineage BA.4 (all sub-lineages combined) continues circulating but at low levels, with 1% of interpretable sequences in the Flash Survey for week 47 (vs 2% in week 46). The detection of mutations at position L452 in screening tests remains stable at high levels (91% in week 47 vs 90% in week 46), in line with the circulation of BA.4 and BA.5 observed in sequencing. Further information is available in the [risk assessment of 16 November 2022](#).

PREVENTION

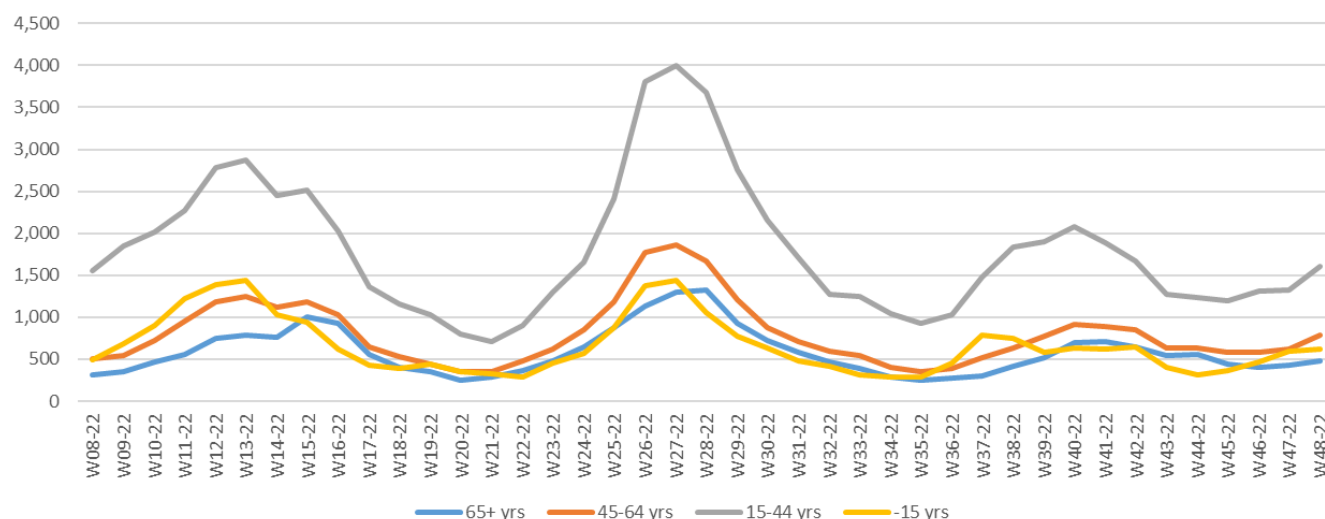
On 5 December, 82.8% of the population aged 65 years and over had received at least one booster dose. Since the vaccine was made available, 8.8% of 60-79 year-olds and 11.2% of 80+ year-olds had received a booster dose adapted to the Omicron variant (9.7% and 12.8% of those eligible, respectively)*. Still in these age groups, 32.1% of 60-79 year-olds are considered to be protected by vaccination because they received their most recent dose within the last 6 months, as are 14.4% of those aged 80+ who received a dose within the last 3 months (all vaccines combined). These proportions do not take into account people infected with SARS-CoV-2 during this time.

*Individuals that have received a booster dose for the Omicron variant are those vaccinated with a complete primary series plus a booster dose of bivalent vaccine (Pfizer original/Omicron BA.5 or Moderna original/Omicron BA.1), whether or not they had previously received any booster doses. This is recommended 3 months after the last vaccine injection for people aged 80+ and 6 months for those aged 60-79 or individuals at risk of developing serious forms of COVID-19. To allow time for eligible individuals to have their injection, eligibility is measured with one additional month since the last injection (4 months for those aged 80+ and 7 months for 60-79 year-olds).

SOS Médecins consultations

- **At national level**, SOS Médecins consultations for suspected COVID-19 were on the increase (+18% or +500 consultations). This trend was observed for all age groups, with the exception of children under 4 years old (-7%, or -149 consultations).
- **At regional level**, SOS Médecins consultations for suspected COVID-19 were on the increase in all regions, with the exception of Occitanie (stable), Normandy and Grand Est (down). The highest increases were observed in Martinique, Auvergne-Rhône-Alpes and Corsica.

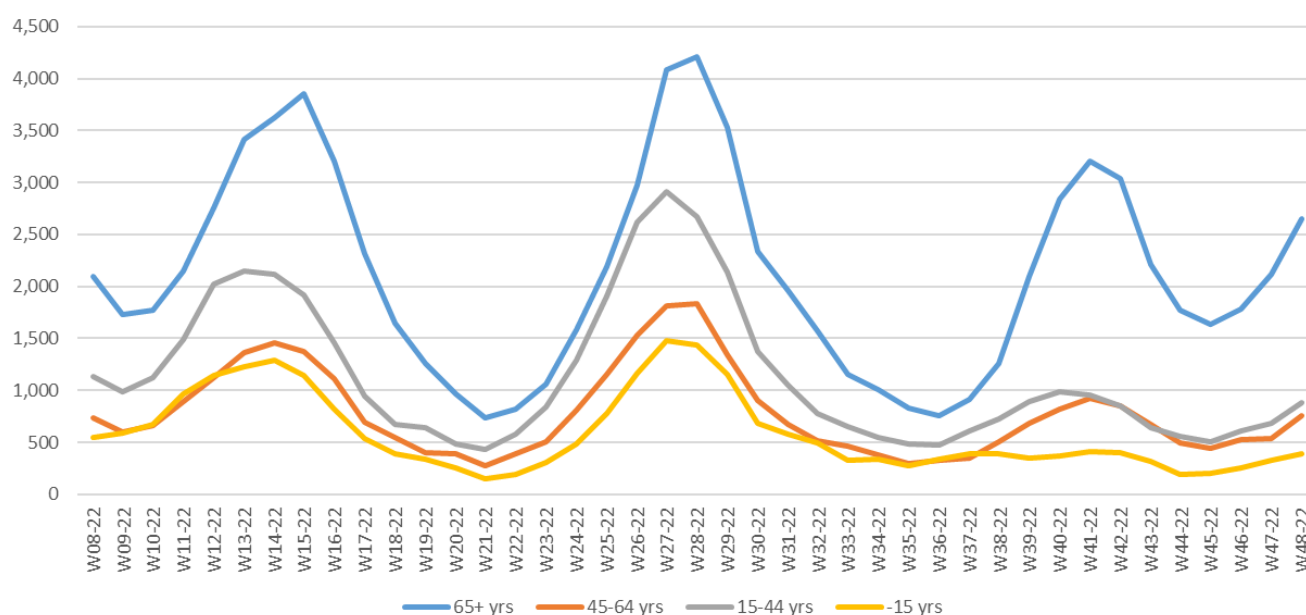
Number of SOS Médecins consultations for suspected COVID-19



Visits to emergency departments in the OSCOUR® network

- **At national level**, emergency department visits for suspected COVID-19 were up in all age groups (+29% or +1,020 visits).
- **At regional level**, emergency department visits for suspected COVID-19 increased in all regions, with the exception of Pays de la Loire, French Guiana and Mayotte (stable). The most pronounced increases were observed in Guadeloupe and Bourgogne-Franche-Comté.

Number of emergency department visits for suspected COVID-19



Where to find the graphs and tables on InfoCovidFrance

Since 14 July 2022, the COVID-19 Epidemiological Update is produced in a condensed format that provides an overview of the COVID-19 epidemic situation in France.

The graphs and tables presenting the indicators are available directly on [InfoCovidFrance](#), where a weekly report is published to supplement the dashboard:

HOSPITAL INDICATORS

- Weekly figures for COVID-19 patients newly admitted to hospital and intensive care units are available in the "Key numbers" tab under "Consultations / Hospital". The different rates for these indicators are also presented in the "Hospital" tab.
- Weekly rates of COVID-19 patients newly admitted to hospital and intensive care, by age group, are available as two separate graphs in the "Hospital" tab.

LONG-TERM CARE FACILITY INDICATORS

The "Long-term care facilities" tab provides information on the following indicators:

- vaccination coverage among residents and staff of nursing homes and long-term care facilities;
- the weekly number of new confirmed cases among residents and staff of long-term care facilities;
- weekly deaths among residents of long-term care facilities.

VIROLOGICAL DATA AT NATIONAL LEVEL

- The graph "Incidence and screening corrected for public holidays" is available in the "Incidence" tab.
- The heat map "Weekly evolution of the incidence rate by age group" is available in the "Incidence" tab.

VIROLOGICAL DATA AT REGIONAL LEVEL

- The table "Evolution of the incidence, positivity, and screening rates by region" is presented in the form of regional and departmental-level graphs in the "Incidence" tab.

VARIANTS

- The graph "Evolution of the proportions for each classified variant in the Flash Surveys" is available in the "Variants" tab.

VACCINATION COVERAGE

- The graph "Vaccination coverage by age group" is available in the "Vaccination" tab.

This week's survey

Updated data from [monitoring of COVID-19 cases among health professionals](#)

For more information on COVID-19, the surveillance systems in place, and vaccination, consult the websites of [Santé publique France](#) and [Vaccination Info Service](#)

For more information on the regional data, see the [regional epidemiological updates](#)

Find all the open access data on [Géodes](#)

Dashboard

[InfoCovidFrance](#)

Key figures and evolution of COVID-19 in France and worldwide