

## Paris 2024 Olympic and Paralympic Games

Health surveillance weekly report  
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NATIONAL EDITION

## Week 36 (2 to 8 September 2024)

### Key points

#### Syndromic surveillance

- In week 36, emergency department visits and SOS Médecins consultations remained stable compared with the previous week in all age groups, except for an increase in the under-15 age group, as expected at the start of the new school term.
- Also as expected for this time of year, the number of emergency department visits and SOS Médecins consultations for respiratory pathologies continued to rise.

#### Surveillance of emergency medical services

- In week 36, the daily number of calls to the emergency medical services (SAMU) at the national level did not exceed alert thresholds on any day.

#### Wastewater surveillance

- In week 36, the overall upward trend in SARS-CoV-2 circulation levels in wastewater continued, although circulation was still of low intensity.

### Heat Warning System (SACS)

*The aim of the Heat Warning System (SACS) is to identify periods of high temperatures that may have a major impact on public health, so that preventive and management measures can be put in place quickly. In the event of an orange warning (heatwave) or red warning (extreme heatwave), health surveillance is adapted in order to provide a coordinated response.*

### Departments with orange or red heatwave warnings

No departments were on orange or red alert for heatwaves in the last 7 days.

## Syndromic surveillance (SurSaUD®)

*The SurSaUD® system monitors activity in French emergency departments and in the SOS Médecins network of general practitioners, as well as all-cause mortality and mortality by cause. Syndromic health surveillance is based on non-specific data collected by the networks in relation to their activity.*

*By monitoring activity in emergency departments (OSCOUR® surveillance network) and in general practice consultations (SOS Médecins network) on a daily basis, the type of symptoms (all causes combined) affecting the population can be identified at departmental level.*

### Evolution of activity in emergency departments (OSCOUR® network) and in general practice (SOS Médecins network)

In week 36 (2 to 8 September 2024), emergency department visits and SOS Médecins consultations remained stable compared with the previous week in all age groups, except for an increase in the under-15 age group in both networks (up 5% and 8% respectively), which is as expected at the start of the new school term.

In week 36, also as expected for this time of year, emergency department visits and SOS Médecins consultations for respiratory pathologies (asthma attacks, coughs and acute lower respiratory tract infections) continued to rise in the under-15 and 15–64 age groups, with lesser rises seen in the 15–64 age group, who are more often referred to the SOS Médecins network. Finally, in the SOS Médecins network, there was an increase in the number of consultations for dyspnea/acute respiratory failure in the under-15 age group and influenza/influenza-like illness in all age groups. Consultations for coughs were also high compared with previous years.

The increase seen in SOS Médecins consultations for gastroenteritis and vomiting in the under-15 age group was comparable to levels seen in the last 3 years.

After 2 weeks of decline, emergency department visits for fever and rash rose in the under-15 age group and to a lesser extent in the 15–64 age group, reaching a slightly higher level than in previous years. At levels comparable to or lower than in previous years, consultations for dizziness increased in the under-15 age group in the SOS Médecins network and consultations for fainting increased in children and, to a lesser extent, in adults in both networks.

At slightly higher levels than in previous years, emergency department visits for chest pain rose in the under-15 age group and to a lesser extent in adults. Consultations also increased for cardiological symptoms/chest pain in the 16–64 age group in the SOS Médecins network, but remained within the usual margin of fluctuation.

Among adults, there was an increase in emergency department visits for alcohol poisoning, addiction and drug use. Visits for stress also increased, as did SOS Médecins consultations for anxiety in all age groups.

Regarding pertussis (whooping cough), consultations in the SOS Médecins network continued to rise for the second week running in people aged 15–64, but remained stable or fell in other age groups and in terms of emergency department visits. The number of consultations for pertussis remained higher than in the previous 3 years in all age groups and in both networks.

Syndromic group	Source*	Consultations			Proportion of activity		
		Number W36	Number W35	Variation W35 (%)	Share (%)	Variation W35 (%)	Trend**
Dyspnea, acute respiratory failure	OSCOUR	3,524	3,264	+8.0	1.09	+8.6	↗
	SOS	55	47	+17.0	0.07	+13.7	↗
Asthma	OSCOUR	3,316	2,049	+61.8	1.02	+62.9	↗
	SOS	1,003	730	+37.4	1.32	+33.5	↗
Cough	OSCOUR	1,824	1,787	+2.1	0.56	+2.7	▬
	SOS	8,350	7,433	+12.3	10.95	+9.1	↗
Acute lower respiratory infection	OSCOUR	6,786	6,969	-2.6	2.09	-2.0	▬
	SOS	6,599	5,866	+12.5	8.66	+9.3	↗
Influenza, Influenza-like illness	OSCOUR	367	371	-1.1	0.11	-0.5	▬
	SOS	1,541	1,283	+20.1	2.02	+16.7	↗
Pertussis	OSCOUR	265	266	-0.4	0.08	+0.3	▬
	SOS	406	475	-14.5	0.53	-17.0	↘
Measles	OSCOUR	5	4	+25.0	0.00	+25.8	▬
	SOS	1	2	-50.0	0.00	-51.4	▬
Gastroenteritis	OSCOUR	4,033	4,294	-6.1	1.24	-5.5	↘
	SOS	4,546	4,244	+7.1	5.96	+4.1	▬
Vomiting	OSCOUR	2,367	2,527	-6.3	0.73	-5.7	↘
	SOS	557	488	+14.1	0.73	+10.9	↗
Food poisoning	OSCOUR	109	112	-2.7	0.03	-2.1	▬
	SOS	275	272	+1.1	0.36	-1.8	▬
Headache, migraine and other neurological symptoms	OSCOUR	8,954	8,822	+1.5	2.76	+2.1	▬
Headache, migraine	SOS	810	789	+2.7	1.06	-0.3	▬
Dizziness	SOS	636	608	+4.6	0.83	+1.6	▬
Meningitis	OSCOUR	31	56	-44.6	0.01	-44.3	↘
	SOS	9	9	+0.0	0.01	-2.8	▬
Myocardial ischaemia	OSCOUR	964	993	-2.9	0.30	-2.3	▬
	SOS	26	26	+0.0	0.03	-2.8	▬
Chest pain	OSCOUR	11,198	10,505	+6.6	3.45	+7.3	↗
	SOS	622	583	+6.7	0.82	+3.7	▬
Drowning	OSCOUR	23	54	-57.4	0.01	-57.1	↘
Injury	OSCOUR	88,475	90,919	-2.7	27.26	-2.1	▬
	SOS	3,383	3,547	-4.6	4.44	-7.3	↘
Fainting	OSCOUR	11,760	11,827	-0.6	3.62	+0.1	▬
	SOS	258	233	+10.7	0.34	+7.6	↗
Acute fever	OSCOUR	4,118	4,220	-2.4	1.27	-1.8	▬
	SOS	960	1,008	-4.8	1.26	-7.5	↘
Burn	OSCOUR	1,274	1,455	-12.4	0.39	-11.9	↘
	SOS	101	137	-26.3	0.13	-28.4	↘
Fever and rash	OSCOUR	277	227	+22.0	0.09	+22.8	↗
Dermatological symptoms	OSCOUR	1,203	1,351	-11.0	0.37	-10.4	↘
	SOS	997	1,119	-10.9	1.31	-13.4	↘
Conjunctivitis	OSCOUR	925	1,015	-8.9	0.28	-8.3	↘
	SOS	826	896	-7.8	1.08	-10.4	↘
Hyperthermia and heat stroke	OSCOUR	26	86	-69.8	0.01	-69.6	↘
	SOS	16	43	-62.8	0.02	-63.8	↘

Syndromic group	Source*	Consultations			Proportion of activity		
		Number W36	Number W35	Variation W35 (%)	Share (%)	Variation W35 (%)	Trend**
Acute alcohol poisoning	OSCOUR	2,576	2,314	+11.3	0.79	+12.0	↗
	SOS	44	46	-4.3	0.06	-7.1	↘
Acute intoxication due to drugs or other substances (excluding alcohol)	OSCOUR	326	296	+10.1	0.10	+10.8	↗
Stress, anxiety	OSCOUR	566	517	+9.5	0.17	+10.2	↗
	SOS	1,515	1,300	+16.5	1.99	+13.2	↗

\*OSCOUR: emergency department visits in the network of participating hospitals. SOS: urgent consultations with a general practitioner in the SOS Médecins network.

\*\*Based on epidemiological interpretation taking into account fluctuations in indicators in recent weeks.

— Usual fluctuation; ↗ Increase; ↘ Decrease.

## Evolution in the number of emergency department visits and SOS Médecins consultations directly associated with the Paris 2024 Olympic and Paralympic Games (OPG-labelled consultations)

Over the past week, 43 emergency department visits (vs 45 in the previous week) and 5 SOS Médecins consultations (vs 6 in the previous week) were directly associated with the Paris 2024 Olympic and Paralympic Games. The majority of emergency department visits were recorded in the Ile-de-France region (97.6%), with SOS Médecins consultations in the regions of Nouvelle Aquitaine (4 consultations) and Normandy.

OPG-labelled consultations	Number in W36 (W-1)	Number in W35 (W-2)	W32 vs. W33 (%)	Trend*
OSCOUR	43	45	(-4.4%)	—
SOS	5	6	(-16.7%)	—

## Mortality surveillance

Mortality data is based on civil registration data from the French National Institute for Statistics and Economic Studies (INSEE) and on electronic death registrations submitted by doctors.

At national level, the number of deaths from all causes based on data provided by INSEE remained within the usual margin of fluctuation up to week 35.

Based on electronic certification of deaths, the number of deaths from all causes in week 36 fell slightly compared with the previous week for all age groups, although it increased in the 45–64 age group.

There was a slight increase during week 36 in deaths involving cancer and in deaths involving infarction in the 45–64 age group.

## Emergency medical services (SAMU)

*These data relate to interventions by the emergency medical services (SAMU). The SAMU operates call centres that respond to the health needs of the population 24-hours a day.*

*The SI-SAMU crisis management portal is an information system that lists and qualifies exceptional events in connection with emergency calls, including the Paris 2024 Olympic and Paralympic Games.*

### Summary of data on SAMU interventions

#### Number of emergency calls

Over the past week, the volume of calls at national level did not exceed the alert thresholds on any day. At departmental level, only the SAMU in Hauts-de-Seine (92) reported an excess of calls on 2 September, with 1,958 calls recorded, compared with an expected 1,524. This increase was related to the start of the new school term. Call volumes returned to normal levels in the following days.

#### Patients treated in connection with a Paris 2024 Olympic and Paralympic Games event

Over the past week, a total of 8 patients treated by the SAMU were directly associated with the Paris 2024 Olympic and Paralympic Games, with equal numbers in Centre-Val de Loire and Île-de-France (n=4). These patients were all suffering from minor injuries and 7 were transported to a health facility.

## Wastewater surveillance

*Wastewater surveillance, as a tool used for monitoring the population's health, is carried out using the system SUM'EAU (SURveillance Microbiologique des EAux Usées). Monitoring the circulation of SARS-CoV-2 in wastewater at national level is performed using data from a network of 12 wastewater treatment plants.*

### Trends in SARS-CoV-2 circulation in wastewater at national level

In week 36, the overall upward trend in SARS-CoV-2 circulation levels in wastewater continued (12 out of 12 wastewater treatment plants produced interpretable results), although this circulation is still of low intensity.

**This bulletin is a summarised version of the national weekly bulletin published in French.**

**For more information (French only)**

Weekly national and regional bulletins

SurSaUD® bulletins

Heat Warning System (SACS)

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