Weekly update from Simon de Lusignan, **@Lusignan_S**

Director of Oxford RSC, **13th - 17th June 2022**, Issue 70

We need your help to meet the challenges of virology surveillance - Finding and Coding needed

There have been indications that flu and RSV are increasing. The Chief Medical Office (CMO) is relying on our data to decide whether they should authorise anti-virals.

We need more practices to:

ACTION:

1. Identify cases,
2. Code acute respiratory infections as 'problems' with an associated disease code

Influenza-like illness (ILI)
ILI is the main code we use to monitor flu outbreaks in our network. The RCGP RSC definition of flu is: an acute respiratory illness with a temperature measured/reported/plausibly ≥ 38 °C, and cough. Onset must be within the past 10 days. There are often symptoms suggestive of systemic upset e.g. myalgia, fatigue, malaise, headache etc. ILI cases should not have another more plausible diagnosis.

- **Code: 'Influenza-like illness' (finding) (SCTID: 95891005) as a 'problem'**

Bronchitis/Bronchiolitis (if under 5 years old)
Bronchitis/bronchiolitis are the main codes we use to monitor possible RSV outbreaks in our network. This is absolutely critical in children aged under 5 years old.

- **Code: 'Bronchitis (disorder)' (SCTID: 32398004)as a 'problem'**OR
- **Code: 'Bronchiolitis (disorder)' (SCTID: 4120002) as a 'problem'**

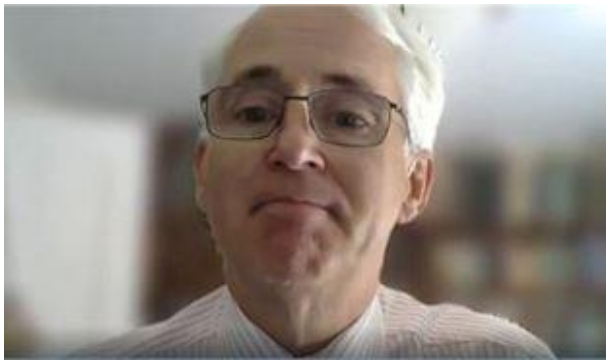
Please use your judgement, based on the balance of probabilities and probable diagnosis, to identify and code.

Please swab wherever possible!

If you are a swabbing practice, please really go for it! If you see a patient that fits the above cases, please take a sample. With low levels of background immunity following the covid-19 pandemic, we're really wanting to find out if these patients have influenza or RSV. If you would like to join virology surveillance, please contact practiceenquiries@phc.ox.ac.uk as soon as possible.

Please watch this special message from Prof Simon de Lusignan on why this is so important.

Oxford-RCGP RSC: The importance of swabbing for influenza-like illness and bronchitis/bronchiolitis



ClinT of the Week:

Other codes we monitor for virology surveillance

Upper Respiratory Tract Infection: Indicators may include otitis media, sinusitis, tonsillitis etc. **Code: 'Upper respiratory infection (disorder)' (SCTID: 54150009) as a 'problem'**

Lower Respiratory Tract Infection: Please code if the probably diagnoses is a chest infection. **Code: 'Lower respiratory tract infection (disorder) (SCTID: 50417007) as a 'problem'**

Suspected COVID-19: If you think COVID-19 is the likely cause. **Code: 'Suspected infectious disease (situation) (SCTID: 700217006) as a 'problem'**

Publication of the Week

Adherence to General Diabetes and Foot Care Processes, with Prompt Referral, Are Associated with Amputation-Free Survival in People with Type 2 Diabetes and Foot Ulcers: A Scottish National Registry Analysis

Aim: To compare different packages of care across care providers in Scotland on foot-related outcomes.

A retrospective cohort study with primary and secondary care electronic health records from the Scottish Diabetes Registry, including 6,845 people with type 2 diabetes and a first foot ulcer occurring between 2013 and 2017. We assessed the association between exposure to care processes and major lower extremity amputation and death.

Proportional hazards were used for time-to-event univariate and multivariate analyses, adjusting for case-mix characteristics and care processes. Results were expressed in terms of hazard ratios with 95% confidence intervals.

Click the link above for more details and to find out what our conclusions were.