

# EFG Senior - Influenza burden assessment in adults aged of 65 years and more visiting a general practitioner for acute respiratory illness in France

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## Général

### Identification

Nom détaillé	Influenza burden assessment in adults aged of 65 years and more visiting a general practitioner for acute respiratory illness in France
Sigle ou acronyme	EFG Senior
Numéro d'enregistrement (ID-RCB ou EUDRACT, CNIL, CPP, etc.)	CNIL : 908370

### Thématiques générales

Domaine médical	General practice Infectious diseases Pneumology
Autres, précisions	Influenza
Mots-clés	elderly subjects, epidemiology

### Responsable(s) scientifique(s)

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Laboratoire	Laboratoire GSK

### Collaborations

### Financements

Financements	Private
Précisions	GSK laboratory

## Gouvernance de la base de données

Organisation(s) responsable(s) ou promoteur LABORATOIRE GSK

Statut de l'organisation Secteur Privé

## Contact(s) supplémentaire(s)

## Caractéristiques

### Type de base de données

Type de base de données Study databases

Base de données issues d'enquêtes, précisions Longitudinal study (except cohorts)

Origine du recrutement des participants An administrative base or a register

Le recrutement dans la base de données s'effectue dans le cadre d'une étude interventionnelle No

Informations complémentaires concernant la constitution de l'échantillon All of the general practitioners in the GROG network monitoring the age group of patients aged 65 years and older can participate. Each investigator will have to include, during the entire epidemic period (equivalent to the period of inclusion), the first 7 patients that meet the eligibility criteria.

### Objectif de la base de données

Objectif principal Describe and compare the burden of acute respiratory infections (IRA) linked to influenza virus, in terms of morbidity and medical consumption, according to the vaccinal status, in those 65 years and older spontaneously consulting in general practice

Critères d'inclusion ? Patient aged 65 years or older  
? Patient having an acute respiratory infection defined as a clinical presentation combining the abrupt appearance of respiratory signs (coughing, rhinitis, coryza) in the context of acute infection (fever, asthenia, headache, myalgia, etc.), in less than 48h.  
  
? For patients 80 years and older, the clinical presentations can associate other general signs

(mental confusion, dehydration, anorexia, digestive disorders, general malaise, body aches, headache) and respiratory signs (from rhinitis to pneumopathy)

## Type de population

Age Elderly (65 to 79 years)  
Great age (80 years and more)

Population concernée Sick population

Sexe Male  
Woman

Champ géographique National

Détail du champ géographique France

## Collecte

### Dates

Année du premier recueil 2008

Année du dernier recueil 2010

### Taille de la base de données

Taille de la base de données (en nombre d'individus) < 500 individuals

Détail du nombre d'individus 93

## Données

Activité de la base Data collection completed

Type de données recueillies Clinical data  
Declarative data  
Biological data

Données cliniques, précisions Direct physical measures  
Medical registration

Données déclaratives, précisions Paper self-questionnaire  
Phone interview

Données biologiques, précisions nasal sample

Existence d'une bibliothèque No

Paramètres de santé étudiés

Health event/morbidity  
Health care consumption and services

Consommation de soins,  
précisions

Hospitalization  
Medical/paramedical consultation  
Medicines consumption

## Modalités

Mode de recueil des données

Each investigator will have to include, during the entire epidemic period (equivalent to the period of inclusion), the first 7 patients that meet the eligibility criteria. The investigator will inform patients who have accepted the study, of the objectives of the study using the information notice and will have them sign an explicit consent form. He will then complete the doctor's inclusion questionnaire and will remit the follow-up logbook to the patient, explaining to the latter how to complete this logbook. He must notify the logistics center of the inclusion via fax. The investigator will take a nasal sample and will send it to the reference laboratory according to the study's sampling protocol. In order to control any bias in the selection of patients, a non-inclusion registry will be set up. The investigating doctor will be asked to complete this registry, for all of the patients that meet the eligibility criteria who are not included in the cohort and to fill in the reason for non-inclusion, whatever it may be.

Suivi des participants

Yes

Détail du suivi

Patient follow-up will take place by telephone (or during a visit) between 7 and 10 days and between 28 and 31 days after the inclusion visit, by the investigator, regardless of the patient's vaccinal status and the result of the virological tests. A questionnaire at the end of the study will also be completed by the investigator at the end of the period of the epidemic period, in order to follow any complications and/or superinfections linked to the influenza, and to inform the patients who have left the study. As for the patients, they will, starting on the day of their inclusion in the study, a follow-up logbook until they are cured or up to 28 days

Appariement avec des sources  
administratives

No

Valorisation et accès

Valorisation et accès

## Accès

Charte d'accès aux données  
(convention de mise à  
disposition, format de données  
et délais de mise à disposition)

Publications are planned

Accès aux données agrégées

Access on specific project only

Accès aux données individuelles

Access on specific project only