

LONDON
SCHOOL of
HYGIENE
& TROPICAL
MEDICINE



Coker, R; Mounier-Jack, S (2006) Further thoughts on the limitations of a recently published review of national influenza pandemic plans in Europe. *Euro surveillance* , 11 (5). E060504.3. ISSN 1025-496X

Downloaded from: <http://researchonline.lshtm.ac.uk/11772/>


DOI:


Usage Guidelines


Please refer to usage guidelines at <http://researchonline.lshtm.ac.uk/policies.html> or alternatively contact researchonline@lshtm.ac.uk.


Available under license: <http://creativecommons.org/licenses/by/2.5/>


Search

 Submit article

 RSS Feed

 Follow us on Twitter

 Subscribe

 Unsubscribe

 Contact

 Sitemap

Announcements

**EUROSURVEILLANCE IN
OPEN ACCESS
DIRECTORIES**

Eurosurveillance remains in the updated list of the Directory of Open Access Journals (DOAJ). It was first added to the DOAJ on 9 September 2004.

Eurosurveillance is also listed in the Securing a Hybrid Environment for Research Preservation and Access / Rights Metadata for Open archiving (SHERPA/RoMEO) [2], a database which uses a

Home ▶ Eurosurveillance Weekly Release 2006: Volume 11/ Issue 18 ▶ Article 3

[◀ Back to Table of Contents](#)

[◀ Previous](#)

[Tweet Next ▶](#)

Eurosurveillance, Volume 11, Issue 18, 04 May 2006

Articles

Citation style for this article: Coker R, Mounier-Jack S. Further thoughts on the limitations of a recently published review of national influenza pandemic plans in Europe. Euro Surveill. 2006;11(18):pii=2953. Available online: <http://www.eurosurveillance.org/ViewArticle.aspx?ArticleId=2953>

Further thoughts on the limitations of a recently published review of national influenza pandemic plans in Europe

R Coker (Richard.coker@lshtm.ac.uk), S Mounier-Jack

London School of Hygiene and Tropical Medicine, London, United Kingdom

In their critique of our analysis of national pandemic influenza preparedness plans in Europe, Nicoll and Kaiser raise a number of issues [1,2,3]. Through combining the findings of preparedness, developed by use both of indicators and country visits, they concluded that 'expert opinion at the European Centre for Disease Prevention and Control (ECDC) coincides with many of the overall points made by the researchers.' This suggests that our results are robust.

Nevertheless, they highlighted a number of limitations to our research. First, the delay in reporting our findings and the 'snapshot' nature failed to note the progress that countries have made over the past six months. We noted this latter limitation in our analysis. However, we

In this issue

- ▶ First cluster of *C. difficile* toxinotype III, PCR-ribotype 027 associated disease in France: preliminary report
- ▶ Outbreak of low pathogenicity H7N3 avian influenza in UK, including associated case of human conjunctivitis
- ▶ Further thoughts on the limitations of a recently published review of national influenza pandemic plans in Europe
- ▶ European Food Safety Authority recruiting statistician

Related articles

- ▶ Weighing serological evidence of human exposure to animal influenza viruses – a literature review
- ▶ Clinical severity of human infections with avian influenza A(H7N9) virus, China, 2013/14
- ▶ A comparison of rapid point-of-care tests for the detection of avian influenza A(H7N9) virus, 2013
- ▶ Surveillance of avian influenza A(H7N9) virus infection in humans and detection of the first imported

colour-coding scheme to classify publishers according to their self-archiving policy and to show the copyright and open access self-archiving policies of academic journals. Eurosurveillance is listed there as a 'green' journal, which means that authors can archive pre-print (i.e. pre-refereeing), post-print (i.e. final draft post-refereeing) and archive the publisher's version/PDF.

FIFTH EUROSURVEILLANCE SCIENTIFIC SEMINAR

ESCAIDE participants are invited to the fifth Eurosurveillance scientific seminar on 30 November 2016

TWITTER

Follow Eurosurveillance on Twitter:
[@Eurosurveillanc](https://twitter.com/Eurosurveillanc)

ZIKA VIRUS INFECTION

Read our articles on Zika virus infection

EXPRESSION OF CONCERN

Note of concern published for 'Epidemiological investigation of MERS-CoV spread in a single hospital in South Korea, May to June 2015', <http://bit.ly/29QFXPp>

➔ [All announcements](#)

concluded our analysis of plans and submitted the draft manuscript for fast-track publication to The Lancet in mid-January 2006. The subsequent months were taken up by the peer review process – a necessary, if time-consuming, hurdle to getting research findings into the policy arena. During this period, we presented the findings to key national and international policy makers, including the European Commission, the European Parliament, and Chief Medical Officers of Europe. Copies of our research findings were also forwarded in confidence to the ECDC and the World Health Organization (WHO). Our intention was to facilitate the use of our research findings at an early stage in the policy and planning arena without jeopardising academic publication.

A second limitation to our analysis, again noted in our paper, was that 'looking at plans alone often gives an incomplete and sometimes misleading picture of a country's state of preparedness.' National stakeholders have reported that our analysis helped. The comparative nature of the analysis meant that, in some cases, public health officials were able to persuade politicians of the need for greater resources in planning, including addressing the gaps that we highlighted in their plans. Our research helped shift the balance of domestic debates. The independent nature of our analysis meant that objective comparisons could be made between countries, encouraging constructive lessons to be drawn from the gaps and strengths of other countries' plans. This has been a feature of the discussions with high level policy makers in recent months. [4]. While the audience for plans is viewed primarily as domestic, there are advantages to making plans accessible so that other countries are able to draw from them and plan coherently. In translating existing plans into a common language (English), we created a resource for others to use.

A third limitation mentioned and acknowledged in our paper, was that simply reading a country's plans may give an incomplete picture of a country's state of preparedness.' We made a similar point when we stated that plans are only one element of preparedness. The test of countries' preparedness will be the effectiveness of their response. This can be supported by a robust plan, but will also be affected by many other factors, foreseen and unknown. Indeed, to evaluate complex interventions in complex health systems we have argued consistently that innovative multidisciplinary approaches are needed if the complexities of context are to be effectively accounted for [5,6,7]. In their country visits, the ECDC and WHO drew upon knowledge provided by epidemiologists, laboratory and communication experts. In evaluations of communicable disease control, we have considered broader health system impediments to effective control, including legal frameworks, financial processes, and governance arrangements. We believe that these may be important when a highly pressing single disease threat demands rapid transformation of health systems.

[human case in Taiwan, 3 April to 10 May 2013](#)

➔ [Epidemiological link between exposure to poultry and all influenza A\(H7N9\) confirmed cases in Huzhou city, China, March to May 2013](#)



Nicoll and Kaiser note that 'countries were neither visited nor contacted by the experts, and the detailed country-specific results were not fed back to the countries for discussion before publication.' However, our research framework was an analysis of 'published plans in the public domain'. Following presentations of our findings at meetings ahead of publication, a number of public health officials requested that we include their updated plans, which we could not do because of the design of our study. However, this highlights the importance of repeating this evaluation at a future date, although resources and time are limited.

The central messages of our research are that Europe is moderately prepared for pandemic influenza, that unnecessary inconsistencies exist, and that countries need to fill the gaps that we have identified, while learning from the strengths of others. We hope that the editor of The Lancet is wrong when, reflecting on our research, he recently suggested that our 'message is being dismissed as little more than scaremongering.' [8]

Editorial note: Eurosurveillance does not usually publish letters responding to previously published articles in our weekly release section, although we aim to develop this format in 2007. The editors considered that this response to the article of 27 April by the authors of the analysis added further interesting points to the discussion of the very topical subject of pandemic influenza preparedness planning.

References:

1. Mounier-Jack S, Coker RJ. How prepared is Europe for pandemic influenza? An analysis of national plans. *Lancet* 2006; 367: 1405-11.
2. Mounier-Jack S, Coker RJ. How prepared is Europe for pandemic influenza? An analysis of national plans. (<http://www.lshtm.ac.uk/ecohost/projects/pandemic/>) [Accessed 1 May 2006]
3. Nicoll A, Kaiser R. Limitations of recently published review of national influenza pandemic plans in Europe. *Euro Surveill* 2006;11(4):E060427.3. (<http://www.eurosurveillance.org/ew/2006/060427.asp#3>)
4. Flu Pandemic: Scores of Europe's emergency contingency plans just above the average, study reveals. Antonios Trakatellis MEP. Brussels, 27th April 2006. EPP-ED/GR
5. Coker RJ, Atun R, McKee M. Untangling Gordian knots: improving tuberculosis control through the development of 'programme theories'. *Int J Health Plann Mgmt* 2004; 19: 217-26
6. Atun R, McKee M, Drobniewski F, Coker R. Analysis of how the health system context shapes responses to the control of human immunodeficiency virus: case-studies from the Russian Federation. *Bull WHO* 2005; 83: 730-8.
7. Atun RA, Lennox-Chhugani N, Drobniewski F, Samyshkin YA, Coker RJ. A framework and toolkit for capturing the communicable disease programmes within health systems tuberculosis control as an illustrative example. *Eur J Public Health* 2004; 14: 267-73.
8. Horton R. The birds and the bureaucrats. *The Guardian*, 20 April 2006. (http://commentisfree.guardian.co.uk/richard_horton/2006/04/why_europe_could_save_our_live.html) [Accessed 27 April 2006]

[back to top](#)

[↑ To top](#) | [▶ Recommend this page](#)

[The publisher's policy on data collection and use of cookies.](#)

Disclaimer: The opinions expressed by authors contributing to *Eurosurveillance* do not necessarily reflect the opinions of the European Centre for Disease Prevention and Control (ECDC) or the editorial team or the institutions with which the authors are affiliated. Neither ECDC nor any person acting on behalf of ECDC is responsible for the use that might be made of the information in this journal. The information provided on the *Eurosurveillance* site is designed to support, not replace, the relationship that exists between a patient/site visitor and his/her physician. Our website does not host any form of commercial advertisement. Except where otherwise stated, all manuscripts published after 1 January 2016 will be published under the [Creative Commons Attribution \(CC BY\) licence](#). You are free to share and adapt the material, but you must give appropriate credit, provide a link to the licence, and indicate if changes were made. You may do so in any reasonable manner, but not in any way that suggests the licensor endorses you or your use.

Eurosurveillance [ISSN 1560-7917] - ©2007-2016. All rights reserved.



This site complies with the [HONcode standard for trustworthy health information](#):
[verify here.](#)