Pandemic positives – a seroepidemiology consortium has formed and significant A(H1N1)pdm09 research continues to flow and demand journal pages

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The writing and refining of pandemic preparedness plans prior to the 2009 pandemic was undertaken largely incorporating scenarios based on the pandemics of the 20th century and influenced by the perceived threat of a severe pandemic due to H5N1 influenza. Responses at the national and international level have received some criticism due in part to a relative lack of flexibility and what was seen as a failure to implement a response proportional to the actual pandemic severity. However, timely assessment of severity was largely absent in 2009. Rapid determination of any preexisting immunity in the population and its age distribution, and a measure of attack rate and rate of asymptomatic infection in the early stages of the outbreak can contribute to this assessment. This can best be achieved by seroepidemiology conducted quickly, widely, and consistently using standardized protocols. This is the thrust of a new consortium for the standardization of influenza seroepidemiology 'CONSIZE' formed to address the deficiencies recognized in the wake of the pandemic and reported in a paper in this issue of the journal (*Influenza and Other Respiratory Viruses* 2013; 7:231–234.). One of the aims of the network is to adopt a common framework for influenza seroepidemiological studies, which include standardizing epidemiological and laboratory methodology and methods of reporting. However, the protocols developed for influenza outbreaks also have great potential value for outbreaks caused by other respiratory viruses. At the time of writing, CONSIZE has now begun modifying the

protocols to create protocols specific to the investigation of the epidemiology, serology, and virology of close contacts of confirmed and probable patients of the novel coronavirus (nCoV) which has recently emerged in the Middle East. These protocols will be offered to the World Health Organization.

A quite separate consequence of the 2009 pandemic has been the explosion in the influenza literature—a simple PubMed search with the term 'influenza' shows a virtual doubling of publications in the 4 years since the appearance of the A(H1N1)pdm09 virus compared with the preceding 4 years. *IORV*, like many other journals, has been overwhelmed with H1N109-related manuscripts reporting observations and studies of sufficient interest, novelty, and merit to justify publication in an international journal. While our publisher indulged us with a 'stretching' of our page budget for the journal in 2012 and again this year by including additional A(H1N1)pdm09-related online pages, there remains a backlog of accepted H1N1 pandemic manuscripts. The International Society for Influenza and other Respiratory Virus Diseases (*isirv*), founder and sponsor of the journal, has undertaken to fund an additional page budget for the journal through 2013 that will allow us to substantially reduce this backlog and to publish the H1N109 articles in a timely manner without impacting on other manuscripts. These will appear as part 2 of this and a subsequent issue of the journal this year.