Author's response to reviews

Title: The FIFA Women's World Cup in Germany 2011 - A practical example for tailoring an event-specific enhanced infectious disease surveillance system

Authors:

Anja Takla (TaklaA@rki.de)
Justus Benzler (BenzlerJ@rki.de)
Edward Velasco (VelascoE@rki.de)

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Author's response to reviews: see over
Submission of manuscript

Dear Editor,

I wish to submit in the name of all authors the manuscript entitled “The FIFA Women’s World Cup in Germany 2011 – A practical example for tailoring an event-specific enhanced infectious disease surveillance system” for consideration for publication as a Research Article in BMC Public Health.

Mass gatherings can be accompanied by a number of health risks – especially the increase in population density, the import and export of unusual pathogens, and temporary changes in services like provisional food stalls, all of which can increase the possibility for infectious disease spread. As a result, public health authorities have begun to develop strategies for prevention and response. For example, they enhance routine surveillance and/or introduce additional syndromic surveillance during mass gatherings to timely detect and react on adverse health events. Most previously published descriptions of enhanced surveillance concern recurring big-scale mass gatherings like the annual pilgrimage to Mecca, or sport events like the Olympics or FIFA Men’s World Cups. However, deciding on an adequate surveillance strategy for a medium-scale mass event can be difficult if an event is new, one or more of the influencing parameters are unclear or differ greatly to previous occasions, and no prior experience with similar events is available.

After having hosted the FIFA Men’s World Cup in 2006, Germany was then chosen to host the FIFA Women’s World Cup in 2011. However, publications on surveillance concepts during previous FIFA Women’s World Cups were not available, but it has been documented that the previous tournaments had fluctuated considerably in size (115,000 - 1.2 million tickets sold) over the past years. Positive experiences with enhanced surveillance during the Men’s Cup 2006 led to the decision of public health authorities to likewise enhance surveillance for the Women’s Cup. But as the women’s event was in comparison in many aspects anticipated to be considerably smaller, we deemed implementing all enhanced surveillance measures of the Men’s Cup as not appropriate and therefore needed to newly determine an adequate event-specific surveillance level.
The aim of our article was therefore to introduce an approach for tailoring an adequate enhanced surveillance for medium-scale mass gatherings, using the example of the FIFA Women’s World Cup 2011 in Germany. In our paper we describe in detail the approach we used: starting with a pre-event needs assessment with the involved public health stakeholders, then the implementation of the enhanced surveillance measures, and finally giving results of the post-event evaluation with the stakeholders regarding our approach and the specific implemented surveillance measures.

We believe that our articles contains valuable suggestions for health authorities in charge of enhanced surveillance in future medium-scale mass gatherings, and that some of our specific implemented measures might be helpful templates for other prospective health authorities to consider.

Journal Editorial Office comment:

Please can you state whether your research conformed to the Helsinki Declaration (http://www.wma.net/en/30publications/10policies/b3/), and to local legislation. Please add a paragraph in your methods section stating this, and name the ethics committee which approved the research. Please also indicate whether patients gave informed consent to participate in the study.

Please document within your manuscript whether the data retrieved from the statutory German infectious disease surveillance system is openly available or whether you received permission (and by who) to use the data.

→ We added a paragraph in the method section addressing involved experimental research on humans, ethical approval, informed consent, and permissions to use the data.

All authors contributed significantly to the work and have seen and agreed to the submitted version of the paper. The material has not been, and will not be submitted elsewhere as long as it is under your consideration. We do not have any financial or other potential conflict of interest to disclose.

Yours sincerely,

Dr. Anja Takla, MPH