

## **Outbreak, Surveillance and Investigation Reports (OSIR)**

is an online publication on epidemiological works of health professionals in Asia and the Pacific.

### **Background**

Few journals regularly publish outbreak investigations or surveillance analyses and those that do have limited coverage of Asia and the Pacific. The Morbidity and Mortality Weekly Report (MMWR) is one journal that publishes such works but MMWR's primary focus is the United States. Just 2 months after an article in MMWR described 2 U.S. scombroid outbreaks with a total of 11 cases, the world's largest reported scombroid outbreak – involving 92 cases - occurred in Southeast Asia. Most public health professionals were unaware of this outbreak; although an informative investigation report was completed, it was written in an Asian language and had limited circulation. This is the impetus behind OSIR, a publication devoted to public health reporting in Asia and the Pacific.

Many applied epidemiology training programs in Asia and the Pacific collectively conduct hundreds of investigations and dozens of surveillance analyses annually. Most are routinely documented in structured reports; however, circulation of the findings has been incomplete. The findings in these reports represent an impressive body of work and many of these reports have the potential to change approaches to disease control, not only in their countries of origin but also in other countries.

### **Significances of OSIR**

Outbreak, Surveillance and Investigation Reports (OSIR) is a free online publication of the epidemiological works of public health professionals in Asia and the Pacific.

The OSIR articles are published mainly in English, and also support in native languages of the authors so that more people are able to access the articles and understand similarities and differences of investigation and surveillance in the region without any language barrier. The OSIR articles are illustrated with more graphics to overcome language barrier in the region.

The OSIR published one issue with three articles per year in 2008 and 2009. The publication was increased to two issues per year in 2010-2012. With the further development in 2013, an issue is published every 3 months in March, June, September and December, with three articles in each issue. The OSIR articles mainly focus on surveillance, investigation, epidemiological study and field project of public health professionals in Asia and the Pacific.

The articles are peer-reviewed by two experts with double-blind review. We also obligate editorial support for authors from applied epidemiology training programs. We enlisted external editors from various countries in the region to conduct the review of the publication. The editors are public health experts from applied epidemiology programs in the region from various countries such as China, Malaysia, Philippines, Taiwan, Thailand and Vietnam, and international organizations such as WHO and US CDC. The OSIR Editorial Board includes the Chief Editors, the OSIR Editors and the Associate Editor.

## **Posters**

Posters presented in the conferences are also posted on the OSIR Journal website. Publishing the posters on the website gives authors another chance to display their posters and share the works with the world. The posters are published on the website quarterly.

## **Goal**

To encourage and facilitate communication of health information and disease reporting across Asia and the Pacific through the use of a freely available e-journal

## **Objectives**

1. To disseminate outbreak reports and surveillance analyses relevant to Asia and the Pacific in an open-source e-journal
2. To facilitate communication of health information across the region by increasing the number of publications from FETPs trainees/alumni
3. To strengthen capacity building of applied epidemiology training programs by promoting quality of publications
4. To understand similarities and differences of investigation and surveillance in the region

Website : <http://www.osirjournal.net/index.php>

## **Guideline for OSIR Publication**

Articles submitted to OSIR should be between 1200 and 2200 words. Target audience is Asian public health practitioners, and those who understand basic epidemiologic methods.

Abstract is non-structured abstract and may not exceed 200 words in length. This word count does not include the title, author list, information in the heading and key words.

### **(1). Title**

(Suggested length: no more than 75 characters)

Your title may either describe the study or pose a question expressing your primary objective. Please include:

- Disease or event
- Time occurred
- Place occurred

### **(2). Introduction**

(Suggested length: 150 – 300 words)

This section describes why you conducted your study.

1. Context

- General information about the significance of the disease
  - Occurrence of disease in region
  - Surveillance data or other information on disease burden and risk factors (susceptible population)
  - Worldwide magnitude of disease (number of cases, rank on scale of morbidity/mortality)
    - \* Regional/National magnitude
    - \* Provincial magnitude
  - Historical Perspective (disease trend, emerging or re-emerging)
  - Typical demographics of cases
  - Prevention and control strategies currently in use (i.e., vaccination, vector control, etc)
  - Availability and type of diagnostic testing
2. Biological Information (great detail is not necessary)
- Microbiology/pathophysiology
  - Natural history of an infection
  - Clinical presentation of infection
  - Seasonality of the disease
  - Mode of transmission
  - Reservoirs
3. Gap in Knowledge that Made this Work Necessary
- Information that is currently missing and the reason you needed to conduct your study.
4. Objective(s)
- Verification of an outbreak
  - Determination of disease's etiology
  - Risk factors of the disease
  - Determination/effectiveness of control measures
  - Route of transmission
  - Cite evidence that supports, refutes, or questions related hypotheses
  - Describe natural history of disease

### **(3). Methods**

(Suggested length: 350 – 500 words)

This section describes how you conducted your study. A comprehensive methods section would provide enough information to allow someone in a similar situation to replicate exactly what you did.

1. Location and Timeframe

- Map of the province and country
- Urban vs. rural setting
- Population of study area
- Unique characteristics of population and geography
- Duration of the study and dates of initiation, completion, other relevant dates
- Time of year

2. Study Population

- Case definition
- How were cases identified and recruited?

3. Study Design

- Descriptive
- Case-control
- Cohort
- Cross-sectional
- Ecologic

4. Data Collection

- Data source and survey instrument
- Type of interview
- Biological/chemical samples
- Environmental samples

5. Analysis

- Type of analysis
- Statistical tests and software program
- Significance level

**(4). Results**

(Suggested length: 250 – 550 words)

This section describes what your study found. Key results from the analyses which support the conclusion should be reported. We strongly encourage using graphics to display your findings; even more so than you would in a peer-reviewed journal.

### 1. Graphics/Tables

- Graphics and tables should be simple, clear-cut and easily understandable
- Avoid pie charts and 3-D graphics
- For more information: [Edward Tufte's books](#).

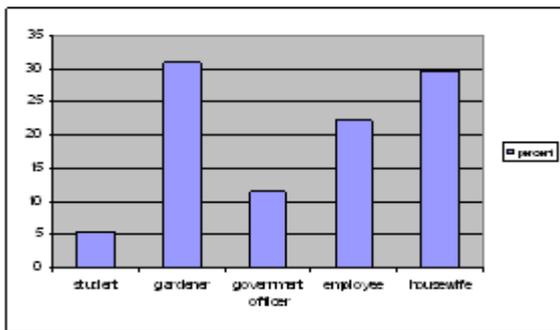


Figure 1. Draft

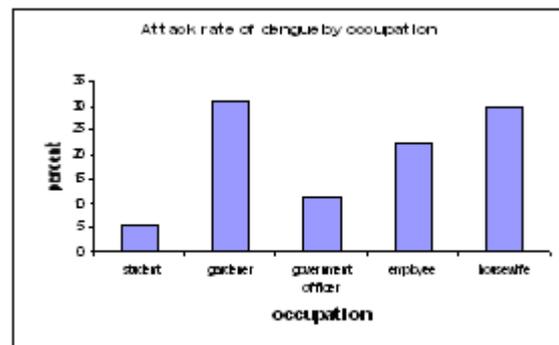


Figure 2. Edited

### 2. Response Rate

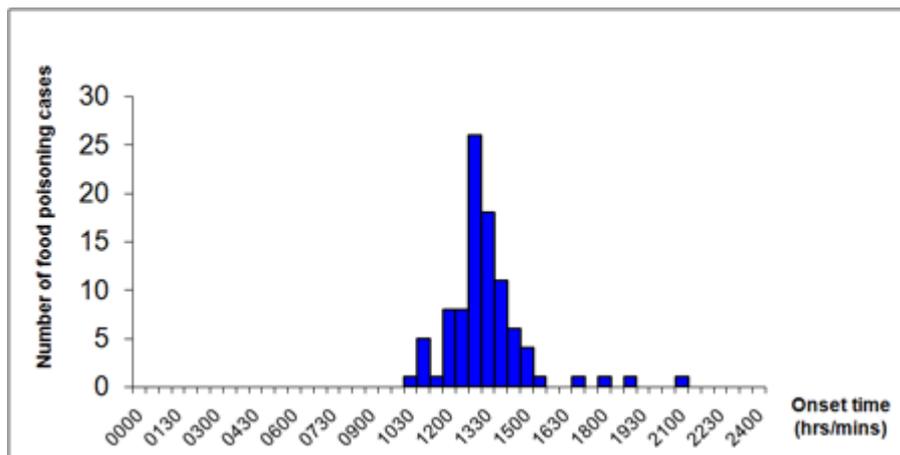
- Were you able to obtain information from most of your cases?
- Define denominator

### 3. Characteristics of Cases/Sample Population

- Describe by person, place and time

### 4. Epi Curve

- [CDC Guidance on creating Epi Curve](#):



### 5. Primary Outcome

- Findings of the primary analysis you proposed in your methods section, and findings that address the objective of your work
- Univariate and/or multivariate analyses
- Measures of association, descriptive analyses and 95% confidence intervals, and significance level

### 6. Lab Results

- Type of sample
- Lab test used
- Reference level
- Sensitivity and specificity of lab tests
- Reference for lab method

### 7. Further Analysis

- Secondary analysis
- Environmental result

## (5). Discussion

(Suggested length: 300 – 500 words)

This section explains the findings of your study. All of your findings should not repeat here - just refer to them as needed to discuss them.

- Summarize the key findings
- Compare findings with literature. Agree or disagree?
- If disagree, explain why
- Limitations

- Significance of findings

## **(6). Public Health Action and Recommendations**

(Suggested length: 150 – 350 words)

- This is where practical information is provided to your readers and where your work can have the greatest impact on controlling disease.
- Data must support the action and recommendation.
- Follow up

## **(7). References**

- Vancouver style
- [Guidance on Vancouver style:](#)