

## EDITORIAL

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### To Our Readers:

As many of you know from the welcoming note to all of you from David Bull, Director of Journals at Palgrave Macmillan, which appeared in Volume 25 Number 3/4, the *Journal of Public Health Policy* has a new publisher. This issue is the first product of our collaboration. We are particularly pleased with this relationship for several reasons. Palgrave will afford readers the option of an electronic subscription – in addition to, or in place of, the print version – as explained on the Palgrave/*JPHP* website [<http://www.palgrave-journals.com/jphp>].

A number of libraries have inquired about electronic subscriptions and we hope *JPHP*'s new electronic presence will better serve institutions worldwide that wish to manage their collections electronically.

*JPHP online* also offers new possibilities for those in locations without reliable postal service – or in resource-poor settings where market prices have inhibited engagement with potential readers who wish to participate fully in the global scientific and policy communities. Palgrave has agreements in place with the International Network for the Availability of Scientific Publications [INASP: <http://www.inasp.info/>], the Programme for the Enhancement of Research Information [PERI: <http://www.inasp.info/peri/index.html>] and the Journal Donation Project [<http://www.newschool.edu/centers/jdp/>].

This issue begins with a special article we commissioned – on the crucial topic of preparing to protect populations around the world from pandemic influenza with adequate supplies of appropriately designed and formulated vaccines. We urge our readers to take up this debate: write to the Editors of *JPHP* [at [jphp@umb.org](mailto:jphp@umb.org)] with

your comments on the science, strategy, and implications of what influenza vaccine expert David Fedson argues forcefully in the following pages. We will publish noteworthy responses in the next issue. As a commissioned article, this submission did not undergo peer review. The author dedicates his manuscript to the late John R. LaMontagne, another world-class influenza expert. We join in dedicating this provocative article to the memory of Dr. LaMontagne, and add our own brief eulogy to him.

IN MEMORIAM  
JOHN R. LAMONTAGNE

The substance of John R. LaMontagne's extraordinary scientific career has been ably recounted elsewhere (see [http://www.niaid.nih.gov/events/in\\_memoriam/lamontagne.htm](http://www.niaid.nih.gov/events/in_memoriam/lamontagne.htm)). Since his sudden death in the Mexico City airport on US election night, 2 November 2004, John has been remembered by family, friends, and colleagues at a funeral and memorial services. Most of us just cannot stop talking about him. David Fedson's article on pandemic influenza in this issue offers a poignant example why this will be true for years and years to come.

Like hundreds of us, David Fedson had instant e-mail access to John LaMontagne, Deputy Director of the US National Institute of Allergy and Infectious Disease. When Fedson posed a serious, world-challenging question to John – how can we best prepare ourselves to stem a pandemic of influenza and its unimaginable consequences for health, economic, and social stability everywhere on the Globe? – John made a date to discuss it at length, only two weeks later in Geneva. John did not live to pursue the debate that he and Fedson launched on the telephone. He never made it to their Geneva meeting two weeks later.

David shared with us his e-mail to John from 22 October 2004, “If my arguments are wrong, you must tell me why they are wrong. If you think they are impractical, you must tell me why they are impractical. But when you do, you must also tell me what you will say if a pandemic comes within the next year and people ask you why, given what is already known, NIAID failed to undertake research on a low-dose HA, alum-adsorbed pandemic vaccine”.

LaMontagne began to answer, characteristically prefacing his argument “You know that I always respect your views on influenza, especially so in the area of influenza vaccination. I also understand and appreciate your criticisms of us. I agree with much of what you say, but also disagree with some points you make...” and proceeded to enumerate these. Now the substance of their disagreement is best carried on among those able to address this threat.

What was so characteristic of John was the openness, humanity, directness, and willingness to engage – right away. Fedson explains that in the e-mails, John, being a remarkable human and a good Texan “...went on to give a string of Texas folk sayings...” We still laugh over these, easily imagining how John would use gentle humor to keep an intense controversy more manageable with his affable, heart-felt humility.

At the Global Forum for Health Research in Mexico, which attracts scientists principally from developing countries, just days after John’s death in the same city, we found ourselves time and again in discussions about John. Colleagues from all over the world offered remembrances, notably personal stories like the Fedson–LaMontagne engagement on influenza – and about other “easy” topics like the global epidemics of HIV/AIDS and malaria.

Every one volunteered how John LaMontagne represented the best face of the United States – someone who gave rather than grabbed; listened carefully and long, then responded fully and respectfully. At the funeral, John’s two brothers told stories from family history, at the Forum others told of his public health career. By the end of the month, it was hard to distinguish among these affectionate perspectives on the man. He was the best of brothers and the most humane, competent, and conscientious scientist/diplomat. His legacy is that consistency, all the more moving at a time when the US government is gaining a frightening consistency of quite another quality.

THE EDITORS