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A year has already passed in my presidency since the last ESCMID and I have much good news for ESCMID members from last year: From 16 to 17 October 2014 in Istanbul, ESCMID Executive Committee members attended a special two-day session discussing and preparing a strategic plan for 2014-2019. I would like to mention that our vision now includes that ‘ESCMID will be the biggest and strongest Society, including its congress, in the field of CM and ID by 2019’. Although it may seem like a bold and very ambitious statement, it is achievable with an enormous increase in our activities and efforts in many fields, including education, research, professional affairs and a variety of special services that we plan to offer.

In order to meet the expanding workload required for our activities, we have restructured our Executive Office in Basel: Ms Judith Zimmerman has been appointed Executive Director and Ms Chantal Britt as Manager for Communications. Both Judith’s experience, as a long-term ESCMID employee, and Chantal’s fresh perspective, as a newcomer, will reinforce our effectiveness and productivity in the Office.

In the previous ESCMID Yearbook, my editorial suggested three terms to define our priorities: networking, encouragement and synergy. I am very pleased that during the past year we observed many achievements under these headings: We recognize that our Society has its roots in Europe, but we also believe that our networking should extend outside this continent. ESCMID should become a point of attraction between international scientific communities. I am proud to announce that ESCMID operates on all continents, excluding Antarctica! The number of approved collaborative centres is approaching 90, including those in Australia, Africa, the US, South America, China and of course those in almost every country in Europe. More than 50 International societies are now affiliated with ESCMID and Professor Giuseppe Cornaglia, our newly appointed ‘International Affairs Director’, is working tirelessly and travelling around the globe to increase networking and cooperation between ESCMID and international organizations, institutions and societies. Several co-sponsored meetings and conferences have been organized in these locations in collaboration with local associations.

On the other hand, we are strengthening our already existing relationships between European institutions, such as WHO, ECDC and EMA, and societies operating in similar or allied fields. This year witnessed a major step in infection control activities in ESCMID as the Society established a new committee: European Committee on Infection Control (EUCIC), with ambitious targets, including harmonization of infection control activities in European countries, developing educational tools and guidelines and organizing research. Details are on our website and on the following pages.

Since ESCMID embraces a large number of excellent scientists from Europe, we believe the Society should secure a leading role in advocating health policies on the continent. As an example, we plan to set up a multidisciplinary online platform networking experts in collaboration with the UEMS-ID section alongside many other organizations in order to respond immediately to any emerging infectious threats as exemplified by the recent Ebola-epidemic.

ESCMID is now the world’s largest scientific event in the CM and ID fields, underpinned by its scientific excellence and extensive networking opportunities. I have no doubt that this year in Copenhagen the 25th ECCMID will be another record-breaking congress which will help us come one step closer to another ambitious target for 2019: an ESCMID with 20,000 attendees!

Space limitations will not allow me to touch upon every ESCMID activity, so I encourage you to go through all the pages of this Yearbook and discover what the Society can offer you. But, more importantly I appreciate your individual advice and feedback on how we can improve our work to serve you better in your scientific needs.

We are pleased to report that ESCMID has grown again and now have more members than ever – 6,385 – approximately 800 more than in 2014 (Figure 1). As seen in Figures 2 and 3, about three quarters of our membership are in Europe, yet we attract a significant number of members from North America, Asia and Africa. We are very proud to have members from 109 countries worldwide, proving that we are attractive not only to European professionals.

The congress, ECCMID, is the Society’s biggest annual event. It is the largest congress of its kind in the fields of CM and ID. Members may use their login credentials to register for ECCMID. We believe this has made the ECCMID registration process more user-friendly and it’s easier for participants to save on ECCMID registration fees by becoming a member beforehand. However, the Society has much more to offer than the annual congress!

To facilitate the professional life and careers of our young colleagues, we offer a variety of programmes that especially target members still at an early stage in their careers including:
- ESCMID Research Grants
- ESCMID Observerships, including special Observerships with ECDC and WHO
- ESCMID Summer School
- Travel grants for the annual congress – ECCMID
- Travel grants for more than 20 ESCMID courses, workshops and conferences
- ESCMID Online Lecture Library (OLL)
- Option to participate in the Trainees Association of ESCMID (TAE)
- Mentorship programme

Other core benefits of ESCMID membership include:
- ESCMID Collaborative Centre (ECC) programme
- Post-graduate courses and workshops providing continuing professional education
- ESCMID scientific conferences on special topics
- The Society’s two journals: CMI and NMNI
- ESCMID guidelines
- ESCMID Study Groups – expert research groups on specific topics

One of the Society’s main strengths is its facilitation of networking. ESCMID has 52 Affiliated Societies that provide input into our activities and whose members we regularly contact. Collaboration with ECDC and WHO has strengthened in recent years – both actively participate in several ESCMID and ECCMID activities. To reach out beyond Europe, we have established several ESCMID Collaborative Centres outside Europe (in South America, Africa and Asia) and our delegations regularly attend the most important scientific conferences and meetings all over the world. We invite you to visit our website and explore our many resources.
Organisational Chart

Executive Committee

Standing Members

- Murat Akova
  Ankara, TR
  President

- Maria Poljak
  Ljubljana, SI

- Cornelis Lao-Flik
  Innbruck, AT

- Annelies Zinkenagel
  Zurich, CH

- Jessica Rodrigues
  Baiao, ES

- Evelina Tacconelli
  Tübingen, DE

- Gunnar Kahlmeter
  York, UK

- Wilhelm V. Klem
  Freiburg, DE

- Michel Drancourt
  Marseille, FR

- Michael H. Hope
  Liverpool, UK

- Rafael Cid
  Madrid, ES

- Giuseppe Cornaglia
  Verona, IT

Executive Office

- Judith Zimmermann
  Executive Director

- Milena Goffitta
  Finance & Administration Manager

- Henri Swanz
  Science Manager

- Thomas Greif
  Education Manager

- Dianne White
  Membership & Professional Affairs Manager

- Chantal Britt
  Communications & Publication Manager

- Nora Nedic
  Project Manager Events

Ad hoc Members

- ECCMID Programme Director
  Dianne White

- Medical Guidelines Director
  Ursula Theuretzbacher

- International Affairs Director
  Adidas Abdulkhalek

General Affairs

- General Affairs
  Dianne White

- Finance
  Milena Goffitta

- Science
  Henri Swanz

- Education
  Thomas Greif

- Professional Affairs, CM/DD
  Dianne White

- Communications, Publications
  Judith Zimmermann

- European Council

  - Murat Akova
    Ankara, TR
    President

  - Maria Poljak
    Ljubljana, SI

  - Cornelis Lao-Flik
    Innbruck, AT

  - Annelies Zinkenagel
    Zurich, CH

  - Jessica Rodrigues
    Baiao, ES

  - Evelina Tacconelli
    Tübingen, DE

  - Gunnar Kahlmeter
    York, UK

  - Wilhelm V. Klem
    Freiburg, DE

  - Michel Drancourt
    Marseille, FR

  - Michael H. Hope
    Liverpool, UK

  - Rafael Cid
    Madrid, ES

  - Giuseppe Cornaglia
    Verona, IT

Scientific Affairs Subcommittee

- Evelina Tacconelli
  Tübingen, DE
  Chair

  - ID members
    - Nicholas J. Bescheff
      Liverpool, UK
    - Nur Benazzone
      Istanbul, TR
    - Maria-Adriana Catalde
      Rome, IT
    - Khaled Hussain
      Medellin, CO
    - Marco U. Mondelli
      Padova, IT
    - Leonardo Paganini
      Milan, IT
    - Pilar Retamal
      Seville, ES
    - Andrzej Szumowski
      Wroclaw, PL
    - Andrew D. Williams
      Wurzburg, DE

  - CM members
    - Giusto Antonelli
      Rome, IT
    - Petra Apfalter
      Linz, AT
    - Bridget Aiken
      Oxford, UK
    - Hiroyo Hattori
      Auckland, NZ
    - Doreen Heidler
      Wismund, DE
    - Mesut Kocak
      Trabzon, TR
    - Tracey M. Laurie
      Melbourne, AU
    - Amir Rezaei
      Tehran, IR

Professional Affairs Subcommittee

- Evelina Tacconelli
  Tübingen, DE
  Chair

  - ID members
    - Nicholas J. Bescheff
      Liverpool, UK
    - Nur Benazzone
      Istanbul, TR
    - Maria-Adriana Catalde
      Rome, IT
    - Khaled Hussain
      Medellin, CO
    - Marco U. Mondelli
      Padova, IT
    - Leonardo Paganini
      Milan, IT
    - Pilar Retamal
      Seville, ES
    - Andrzej Szumowski
      Wroclaw, DE

  - CM members
    - Giusto Antonelli
      Rome, IT
    - Petra Apfalter
      Linz, AT
    - Bridget Aiken
      Oxford, UK
    - Hiroyo Hattori
      Auckland, NZ
    - Doreen Heidler
      Wismund, DE
    - Mesut Kocak
      Trabzon, TR
    - Tracey M. Laurie
      Melbourne, AU
    - Amir Rezaei
      Tehran, IR

Education Subcommittees

- Jessica Rodrigues
  Baiao, ES
  Chair

  - Study Groups
    - Angela Hutter
      Geneva, CH
    - Dan-Georgiu Buia
      Bucharest, RO
    - Chsangtham Sreekanti
      Phuket, TH

  - Trainee Association of ECMM (TAM)
    - Joanna Cortois
      Cambridge, UK
    - Patriona Meier Vodrula
      Ljubljana, SI

Committees/Subcommittees

- General Affairs Science
  President-elect

- General Affairs Education
  General Secretary

- General Affairs Finance
  Treasurer

- Professional Affairs, CM/DD
  Manager

- Scientific Affairs Manager
  Henri Swanz

- Education Manager
  Thomas Greif

- Communications/Publications Manager
  Judith Zimmermann

- Professional Affairs CM/DD
  Dianne White
Cornelia Lass-Flörl
Treasurer
cornelia.lass-floerl@escmid.org

ESCMID had a very successful year 2014, after having gone through a period of profound transformation between 2011 and 2013, both organisationally and financially. In 2014, expenses for key activities increased EUR 0.2 million, or 10%. Expenses related to Scientific Affairs and Education, the areas that encompass our core competencies and that are important for the future of the Society, rose 10% and 25% respectively. Communications costs increased 34%, reflecting our continued efforts to raise the visibility of ESCMID and ECCMID.

The 2015 budget foresees expenditures of approximately EUR 3.5 million, mostly in the areas of Science, Professional Affairs and Education (Figure 2). ESCMID is proud to keep supporting previously successful projects and is committed to funding new scientific and educational activities, including Study Groups, conferences and workshops, medical guidelines, awards and grants.

Good reasons for membership:

- Society’s journals: CMI, NMNI
- Registration discounts for events
- Participation in Study Groups
- ESCMID Newsletter and Yearbook
- Discounts to other journals
- Access to the Online Lecture Library and Membership Directory
- Eligibility for ESCMID Awards, Research Grants, Observerships and Mentorships
- Right to vote and participate in ESCMID

Apply for Membership
Visit our website and join us now!

www.escmid.org/membership
What ESCMID can do for you around the clock

Awards and Grants 2015

ESCMID Award for Excellence in Clinical Microbiology and Infectious Diseases 2015

ESCMID Young Investigator Awards for Research in Clinical Microbiology and Infectious Diseases 2015

ESCMID Research Grants 2015

ESCMID TAE Awards for Training Achievements 2015

ESCMID Cubist Award on Antimicrobial resistance in Gram-Positive Bacteria 2015

Both recipients of the 2015 Trainee Association of ESCMID Awards for Training Achievements are completing their specialty training in Infectious Diseases: Nélia Neves Silva, (Porto, Portugal) and Nicole Pagani (Turin, Italy).

New this year is the ESCMID Cubist Award which has been awarded to both Marie Kempf and Markus Hilty.

Fourteen young colleagues received an ESCMID Research Grant 2015 to work on their proposed basic or applied research projects. The choice was again exceptionally difficult this year as we received a record number of 169 Research Grant applications of high quality compared to 145 the year before. With the ever increasing number of applicants for Research Grants, we set out last year to make the application and reviewing process more transparent and clearer for both the applicant and the reviewer with the ultimate goal to increase submission and review quality. A task force led by Barry Cookson (ESGNi) with Ed Kuiper (ESGCD), Rosemary Barnes (SAS) and François Vande- nesbécq (ESGS) – whom I hereby gratefully acknowledge – helped to bring the submission information and the reviewing system to a completely new level. I would also like to thank the experts/reviewers (listed on 60–61), who have done a tremendous job to get three independent expert reviews for each proposal. The optimization of the system is still ongoing with a special focus on all the helpful comments entered by the reviewers. Thanks also for that! As every year one of the Research Grant recipients is also awarded the ESCMID/FEMS Fellowship and this year it goes to Lidija Senerovic, Belgrade, Serbia.

In addition, ESCMID supports young colleagues with merit-based travel grants and free registration to enable them to attend ECCMID. We are giving 100 young scientists travel grants and free registration for ECCMID Copenhagen 2015, where they will present the results of their work. ESCMID also supports its members early in their careers with attendance grants for ESCMID conferences, the Summer School, post-graduate education courses and other educational and/or scientific events.

You can find details of all recipients of awards and research grants for 2015 on the following pages.

We are pleased to announce the recipients of awards and grants for the year 2015. ESCMID continues its strong commitment to the grant programmes, as evidenced by our support of 14 individuals for an ESCMID Research Grant as well as our generous allocation of funds for ECCMID travel grants. In 2014 attendance grant funding for courses, conferences and other scientific events as well as ECCMID travel grants totalling over EUR 210,000 demonstrates our commitment to continuous learning and exchange.

Marc Bonten (Utrecht, Netherlands) is the ESCMID Excellence awardee for 2015. His understanding of fundamental processes and outstanding skills, combined with his ability to bring many investigators together to integrate their collaborative effort, make him a very special, unique investigator and a most prominent leader in the field of hospital epidemiology and ICU infections. He has shown formidable productivity and published 398 articles in top refereed journals. He has coordinated, and still coordinates, several very large projects within the Framework Programmes of the European Commission, and is currently leading one of the largest public-private partnership programmes in the world to support the development of new drugs against resistant bacteria (the New Drugs for Bad Bugs, ND4BB, Programme). His energy seems to be endless.

Due to the large number of excellent Young Investigator applications this year, we found it especially difficult to select a winner and have chosen three recipients for 2015: Carolina Garcia-Vidal (Hospital de Llobrugat, Spain), Jason Roberts (Brisbane, Australia) and Roy Sleator (Cork, Ireland). Carolina Garcia-Vidal’s work is invaluable to the field of respiratory tract infection and in immunocompromised host infection research. Jason Roberts has developed large networks of researchers throughout the world to deliver seminal studies of antimicrobial therapy in ICU patients. And Roy Sleator’s work on the characterization and treatment of new and emerging gastrointestinal pathogens has had significant impact in the field.

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Annalies Zinkernagel
ESCMID Scientific Affairs Officer
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Marc J.M. Bonten

Marc studied and works in the Netherlands. He earned his MD (1991) and PhD (‘The role of colonization of the upper intestinal tract in the pathogenesis of ventilator-associated pneumonia’, 1994) at Maastricht University Medical School and completed his medical training at the UMC Utrecht, where he became Professor of Molecular Epidemiology of Infectious Diseases in 2002. Since 2008 he has run the Medical Microbiology department there and leads the Infectious Disease Epidemiology Research Group at the Julius Center of Health Sciences and Primary Care.

With experience of the full range of epidemiological study designs, his major contributions to the field include being the first to apply the cluster-randomized cross-over design in evaluating ecological interventions in ICU populations. He has been (co-)applicant of a large number of national and international research grants. His many roles include VICI laureate (2006) from the Dutch Science Association, Principal Investigator of the CAPITA study, coordinator of the EU-funded project R-GNOSIS and scientific coordinator of the IMI-funded consortia COMBACTE and COMBACTE-MAGNET.

His main interests include clinical epidemiology: antibiotic resistant bacteria including MRSA and ESBL-producing Enterobacteriaceae. His work has contributed to much of the current evidence of the ecological safety of antibiotic-containing infection prevention strategies such as SDD and SOD and preventing hospital-acquired infections. He uses mathematical modelling to investigate transmission of these bacteria in hospital settings and was among the first to describe the complex epidemiology of vancomycin-resistant enterococci. Keen to build (inter-)national relationships, Marc has participated in European research consortia, including MOSAR, SATURN, CONCORDE, EvoTAR and PREPARE. He is also instrumental in developing a high-quality European clinical trial network for the evaluation of new antimicrobial agents to combat antibiotic resistance and for large-scale European epidemiological studies, providing a platform for microbiology similar to the European Organisation for Research and Treatment of Cancer.

Marc Bonten will be presented with his award at the 25th ECCMID in Copenhagen by Gunnar Kahlmeter, ESCMID Past President, and Murat Akova, ESCMID President, on Sunday, 26 April 2015 from 11.30–12.30 in Hall A. During this ceremony he will give his recipient’s lecture: ‘The modern ICU: are antibiotics used to save the patients or to soothe the minds of the doctors?’

Carolina Garcia-Vidal

Carolina Garcia-Vidal completed her training in Internal Medicine in 2005 at the Hospital Universitari Mònica Terrassa and her fellowship in Infectious Diseases in 2007 at Hospital Universitari de Bellvitge. She achieved her PhD cum laude on the topic of ‘Improving the management of community-acquired pneumonia’, under the guidance of Professor Jordi Carratalà (Universitat de Barcelona) in 2009. She won the best PhD award from the Catalan Society of Internal Medicine as well as the Young Internist of the Year award for research by the Spanish Society of Internal Medicine (2009). She is currently employed as a consultant physician in infectious diseases at Hospital Universitari de Bellvitge, and works in IDIBELL (biomedical research institute), in the ‘Infections of the respiratory tract and in immunocompromised patients’ group.

Her research is focused on respiratory tract infections, especially within the immunocompromised host. Her work is based on clinical research and covers a large range of topics, including pneumonia, fungal infections, bacterial COPD exacerbations, tuberculosis, and infections in patients receiving biological therapies. She has produced more than 80 indexed publications in several prominent journals with more than 1,200 citations. Her present Hirsch Index is 20.

Carolina Garcia-Vidal will receive her award during the ESCMID Young Investigator Awards Session on 27 April 2015 from 14.30–15.30 in Hall B. During the session, she will give her presentation: ‘Clinical research on respiratory tract infection’

Jason Roberts

In his roles as professor and consultant clinical pharmacist, Jason has shown a strong interest in addressing the persistently poor outcomes of critically ill infected patients. Improving treatment of infections, including reducing the emergence of resistance, is work that urgently needs to be undertaken for our currently available antibiotics as the time until new antibiotics become available may be lengthy. A better understanding of dose-exposure and exposure-effect relationships for antibiotics using pre-clinical and clinical PK/PD research presents an excellent approach to addressing these problems.

Jason started his research pathway 10 years ago and has worked as a clinician-scientist throughout. In 2012 he was named Australian Clinical Pharmacist of the year by the Society of Hospital Pharmacists of Australia. He has a strong interest in clinical and research mentoring and enjoys the opportunity to interact with many like-minded people to share ideas on how best to treat infections in difficult-to-treat patients like the critically ill. He contributes to the critical review of guidelines, as an editor with several journals and convening numerous conferences. He has more than 170 career publications, has been awarded over USD 16 million in grants and supervises 16 higher degree students.

Jason Roberts will be presented with his award during the ESCMID Young Investigator Awards Session on 27 April 2015 from 14.30–15.30 in Hall B. During the session, he will present some of his research under the title: ‘Can PK/PD get us better outcomes for infected ICU patients?’

Roy Sleator

Roy Sleator graduated from University College Cork, Ireland, with a BSc in Microbiology, an MA in Education and a PhD in Molecular Biology, and holds a PG Cert in Bioinformatics from The University of Manchester, UK. In 2006 he was awarded the Society for Applied Microbiology’s WH Pierce Prize for his excellent contributions to the field of bacteriology and was a recipient of an ESCMID Research Fellowship in 2004, 2010 and again in 2013. He is a lecturer at the Department of Biological Sciences at Cork Institute of Technology as well as a Principal Investigator at both CIT’s BioExplore Research Centre and University College Cork’s Alimentary Pharmabiotic Centre. He is also founding Editor-in-Chief of the scientific journal Biosngineered, published by Taylor and Francis, New York, USA.

Roy Sleator’s main interests are the development of improved diagnostic approaches and novel therapeutic strategies for the identification and control of new and emerging pathogens; particularly those associated with the human gastrointestinal tract. His lab, which was named Pharmaceutical Laboratory of the Year at the Irish National Laboratory Awards in 2014, concentrates not only on academic excellence, but also on providing effective solutions to real world clinical problems.

Roy Sleator will receive his award during the ESCMID Young Investigator Awards Session on 27 April 2015 from 14.30 – 15.30 in Hall B. During the session, he will give his presentation: ‘Following my gut feelings…’
## ESCMID Research Grants 2015

The following ESCMID members have received a Research Grant in 2015 for the indicated project.

<table>
<thead>
<tr>
<th>Name</th>
<th>Institution</th>
<th>Project</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diana Angelica Aguilar-Ayala</td>
<td>Biochemistry and Microbiology, Ghent University, Ghent, Belgium</td>
<td>Project: Mycobacterium tuberculosis in a cholesterol and fatty acid rich environment: global response to dormancy and antibiotic resistance</td>
</tr>
<tr>
<td>Berend Jan Bosch</td>
<td>Department of Public Health and Infectious Diseases, University of Rome, Rome, Italy</td>
<td>Project: Comparative analyses on transcriptomes of anisakid pathogenic species</td>
</tr>
<tr>
<td>Serena Cavallero</td>
<td>Department of Infectious Diseases, Vrije Universiteit, Amsterdam, the Netherlands</td>
<td>Project: Propagation of enteric coronaviruses: no guts no glory</td>
</tr>
<tr>
<td>Joseph Meliades</td>
<td>Clinical Microbiology Laboratory, Athens University Hospital, Athens, Greece</td>
<td>Project: Determination of pharmacokinetic-pharmacodynamic breakpoints for voriconazole and posaconazole and Candida glabrata and Candida krusei in a multicentre study</td>
</tr>
<tr>
<td>Jasmina Nikoloski-Rundek</td>
<td>Medical Mycology Reference Laboratory, Belgrade, Serbia</td>
<td>Project: Development of biopolymeric formulation of antifungal polymers with medium chain length polylactide: validation against superficial mycoses</td>
</tr>
<tr>
<td>João Perdigão</td>
<td>Research Institute for Medicines, University of Lisbon, Lisbon, Portugal</td>
<td>Project: Transcriptomic profiling of clinical Mycobacterium tuberculosis strains: global transcriptomic response towards drug-exposure and metabolic shift towards latency</td>
</tr>
<tr>
<td>Ville Nikolai Pimenoff</td>
<td>Infections and Cancer, Catalan Institute of Oncology, Barcelona, Spain</td>
<td>Project: Evolutionary history of oncogenic human papillomavirus type 16 (HPV16) inferred from 1194 worldwide HPV16 variant isolates and 432 historical HPV16 isolates collected in the last 86 years in Europe: implications for the viral evolution after global HPV16</td>
</tr>
<tr>
<td>Margarida Saraiva</td>
<td>Life and Health Sciences Research Institute, Braga, Portugal</td>
<td>Project: Deciphering the candidate Mycobacterium tuberculosis molecular signatures of TLR2 vs TLR4 activation</td>
</tr>
<tr>
<td>Vicky Sender</td>
<td>Microbiology, Tumor and Cell Biology, Karolinska Institute, Stockholm, Sweden</td>
<td>Project: Influenza-induced modulations of TLR3 inhibitors: a mechanism contributing to enhanced susceptibility to secondary pneumococcal pneumonia</td>
</tr>
<tr>
<td>Lidija Senerovic</td>
<td>Laboratory for Microbial Molecular Genetics and Ecology, Institute of Molecular Genetics and Genetic Engineering, Belgrade, Serbia</td>
<td>Project: Structurally-guided identification of novel pharmacophores targeting pseudomonas aeruginosa quorum sensing and biofilm formation</td>
</tr>
<tr>
<td>Rita Sabrai</td>
<td>CRREM, FCT, UNL, Monte de Caparica, Portugal</td>
<td>Project: A new target inside an old molecule: glutamate amidation of peptidoglycan</td>
</tr>
<tr>
<td>Dirk Eggink</td>
<td>Medical Microbiology, Academic Medical Center, Amsterdam, the Netherlands</td>
<td>Project: Adaptive evolutionary pathways of highly pathogenic avian H5N1 influenza in humans</td>
</tr>
</tbody>
</table>

**ESCMID / FEMS Fellow 2015**

**ESCMID / FEMS Fellow 2015**
ESCMI TAE Awards for Training Achievements 2015

Nélia Neves Silva
São João Hospital Centre, Porto, Portugal
Infectious Diseases

Nicola Pugani
School of Infectious Diseases, Turin, Italy
Infectious Diseases

ESCMI Cubist Award on Antibiotic resistance in Gram-Positive Bacteria 2015

The ESCMID Cubist Award 2015 will be presented during the Young Scientists Reception at ESCMID.

Nea Maria Kempf
Hospital University of Angers, Angers, France

Marina Hilty
University of Berne, Berne, Switzerland

For Abstract: P017–Trends in antibiotic resistance and serotype distribution in invasive pneumococcal disease (IPD) in France from 2003 to 2013, on-going survey of the French Pneumococcus Network

M. Kempf (Angers, France), N. Brieu, E. Vernet, M. Ploy, A. Lepoutre, and the French Pneumococcus Network


C. Hauser, A. Kronenberg, M. Hilty (Berne, Switzerland)

www.escmid.org/science

A new start

The year has passed quickly – many great things have happened during this past year. I thank the Scientific Affairs Subcommittee (SAS) for their constant support during this time as well as Henri Saenz, the ESCMID Science Manager, for his constant support and for getting things done extremely efficiently.

Study Groups buzzing with activity

Central to the Scientific Affairs portfolio are of course the now 29 (!) ESCMID Study Groups (SGs). We have had two new additions at the frontiers of completely different fields (forensic/ post-mortem microbiology and veterinary microbiology, see page 16), which, excitingly, bring new aspects and new people to ESCMID. The already established SGs have been extremely active over the past year (see a list of their main activities on page 17–21) leading to the best SG evaluation – done by SAS – since the systematic evaluation was introduced in 2010. Congratulations to all our groups; you deserve acclaim! I cannot omit to highlight in particular our Immunocompromised Host Group, ESICHR, performing just excellently, and I highly recommend that you read their interesting article about how they were founded by bringing two groups together, their activities and exciting plans for the future on page 21.

Last year the focus was on the collaborative efforts for educational events. Thus I draw your attention to the collaborative efforts resulting in various interesting research projects. The number of these projects has continuously risen during recent years, from 24 projects run by 14 SGs in 2011 to 52 projects run by 23 SGs in 2014. In addition many SGs participate in projects with external funding such as CAESAR (WHO), DRIVE-AB (IMI), INCREMENT (ERDF), PREPARE (FP7) and TRICE (ECDUC).

SGs have also been involved in current topics of high interest, either by organizing expert conferences (‘New Life for Old Antibiotics’ to tackle antimicrobial resistance and ‘Vaccines for Mutual Protection’ to counter vaccine fatigue, see pages 52–55) or by uploading up-to-date information to our website, as was done for Ebola (www.escmid.org/Ebola). Many thanks to all of you!

Research Grants – a success story with a workload

Are you surprised to hear that our SGs have also been involved in the procedural revision of our Research Grant programme? At the last Scientific Affairs Meeting in Barcelona 2014 – where SAS and the chairpersons of all SGs met – it became clear that with the increasing number of applicants for Research Grants, we would have to make the application and reviewing process more transparent and clearer, both for the applicant and the reviewer, with the ultimate goal of improving submission and review quality. A task force of four volunteers from SAS and SGs was chosen, and they made thoughtful and practical recommendations on how to adapt the existing procedure (for details, see page 9) which we implemented for last year’s submissions and the review of the newly selected Research Grants for 2015. At this point, I would like to thank all the people who have contributed to this success story so far, especially the experts/reviewers listed on page 61–62. Of course, we are still optimizing this system, but the results are already amazing!

New year – new people

By the end of 2014, four long-serving SAS members completed their term of office: Maiken Cavling Arendrup, Birgitta Everngärd, Hakan Leblébicigoglu and Paul Savelkoul. I would like to express my heartfelt thanks for their commitment over the years. This opened the committee to fresh members, who joined SAS at the beginning of 2015: Luigi Gradoni, Gilbert Greub, Andreas Groll and Adriana Vince. Once again, a warm welcome to them! You will find their assigned fields in the box below.

Another year has started and I look forward to working on new plans with SAS, SGs and you!

www.escmid.org/science

For more information see www.escmid.org/science.

Research Grants Committee Meeting in 2014

[1 to 4, front] Birgitta Everngärd, Maiken Cavling Arendrup, Rosemary Barnes
[1 to 3, back] Germán Bou, Hervé Pelloux, Murat Akova [Scientific Affairs Officer until May 2014], William Hope (Guidelines Director), Henri Saenz, Hakan Leblébicigoglu, Paul Savelkoul, Maiken Cavling Arendrup

www.escmid.org/science
The ESCMID Study Group for Infections in Compromised Hosts (ESGICH) was created in December 2010 with the aim of promoting research and education in the field of infectious diseases in immunocompromised patients. The group emerged from an initiative by infectious disease specialists involved in the prevention and management of infections in oncology-haematological patients and in solid-organ transplant recipients, but who were also interested in other topics such as primary immunodeficiencies, infection in patients receiving novel biological therapies and HIV infection. Since then we have evolved to become a multidisciplinary and wide-ranging group including haematologists, oncologists, microbiologists and transplant physicians dedicated to the care of immunocompromised patients. There are currently 71 members in our Study Group.

The main focus of our activity is based in both educational and research endeavours. In that regard 2014 was a very productive year. We contributed to the writing of two important guidelines: the ‘First European recommendations on the prevention and management of infections in solid-organ transplant recipients’ (included in a supplement of Clinical Microbiology and Infection), and the ‘Fourth European conference on infections in leukaemia group’ (ECIL-4). This resulted in the publication of a total of 17 articles written and/or endorsed by our Study Group, including original research on the management of EBV-related post-transplant lymphoproliferative disorders, and on the epidemiology of invasive aspergillosis in kidney transplant recipients. In terms of educational activities, we organized a very successful educational programme on transplant infectious diseases in Sao Paulo, Brazil, with world-renowned experts in transplant infections from Europe and Latin America. We are heavily involved in collaborating with other societies with similar clinical interests, too. We jointly organized two symposia with the TIG group of the Transplantation Society (TTS) and the Immunocompromised Host Society (ICHS) before ECCMID and at the ICHS meeting respectively. Finally, our study group co-organized two educational workshops at ECCMID 2014 in Barcelona. We are very excited to carry on with an increasingly busy schedule for 2015. Our main current objective is to further develop a European research network for the study of infections in immunocompromised hosts. Giving the growing significance of infections due to multidrug-resistant organisms in our patient populations, our key interest is to create a comprehensive research project for assessing the epidemiology and management of infection due to multidrug-resistant pathogens at a European level. In that regard we have planned several research and educational activities on this topic for the coming months.

Should you have an interest in the field of infections in the immunocompromised host, we would like to encourage you to register as a member of ESGICH through the ESCMID website. Finally, we would like to take advantage of this opportunity to kindly invite you to attend ESGICH’s next educational activity, a cutting-edge symposium on transplant virology, jointly organized with ESGVH, which will take place next June in beautiful Lausanne, Switzerland.

The ESGICH Executive Committee
• Co-organized the Kyoto Global Consensus Conference on Gastritis with the Japanese Society of Gastroenterology (30 January – 1 February 2014; Kyoto, Japan). The consensus will be published in 2015. The outcome of this consensus is a breakthrough, because it states that *H pylori* gastritis per se is an infectious disease and must be treated as such.

• Runs the ESGAP/EPASG Study Group ‘Nebulized antibiotics’, study coordinator Volker Fingerle, Germany


• Celine Pulcini represents ESGAP on the European Committee on Infection Control (EUCIC) Stakeholder Committee

• Runs the Open Virtual Learning Community (OVLC, http://esgap.esmc.org), an open-access, web-based resource providing information and tools to promote Antimicrobial Stewardship among healthcare professionals

• Organized the ESMCID Conference ‘Reviving Old Antibiotics’, 22 – 24 Oct 2014, Vienna, Austria


• Running an IMI project in the ND4BB programme: DRIVE-AB (Re-investment in R&D and responsible antibiotic use), study coordinator Ursula Theuretzbacher

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**ESGAP**

European Society of Clinical Microbiology and Infectious Diseases

**ESGBIS**

European Society of Clinical Microbiology and Infectious Diseases

**ESGARS**

European Society of Clinical Microbiology and Infectious Diseases

**ESGAI**

European Society of Clinical Microbiology and Infectious Diseases

**ESGCR**

European Society of Clinical Microbiology and Infectious Diseases

**ESGCP**

European Society of Clinical Microbiology and Infectious Diseases

**ESGCD**

European Society of Clinical Microbiology and Infectious Diseases

**ESGEM**

European Society of Clinical Microbiology and Infectious Diseases

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**EPASG**

European Society of Clinical Microbiology and Infectious Diseases

**ESGCIP**

European Society of Clinical Microbiology and Infectious Diseases

**ESGEM**

European Society of Clinical Microbiology and Infectious Diseases

**ESGEM**

European Society of Clinical Microbiology and Infectious Diseases

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**ESGAP**

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European Society of Clinical Microbiology and Infectious Diseases

**ESGCR**

European Society of Clinical Microbiology and Infectious Diseases

**ESGCP**

European Society of Clinical Microbiology and Infectious Diseases

**ESGCD**

European Society of Clinical Microbiology and Infectious Diseases

**ESGEM**

European Society of Clinical Microbiology and Infectious Diseases

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**Published the article** ‘The dynamic changes of dominant *Borrelia burgdorferi sensu lato* populations in human blood in patients with Lyme borreliosis: a cohort study’, study coordinator Peter Chiodini, United Kingdom

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**Runs the medical guidelines project** ‘Diagnosis, prophylaxis and treatment of biofilm infections’, study coordinator Niels Hoiby, Denmark

**Runs an annual online course on biofilms, 1 Sep – 7 Nov 2014 (ESGB); advertised event on ESMCID website**

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**Coordinates the INCREMENT project** ‘An international consortium for the clinical study of bloodstream infections caused by multidrug-resistant Enterobacteriaceae’ (www.incrementproject.org)

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**Runs the study Group Research Grant project** ‘Prospective evaluation of incidence, risk factors, and outcomes for patients with ventilator-associated events in European intensive care units’, study coordinator Leonel Lagunes Luna, Spain

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**Presented the results of the ESGCP Survey 2013 on the ‘Def-inition and significance of salvage treatment in critically ill patients’ at ECCMID 2014. Submitted for publication in 2015**

Runs the European Implant Cohort Study (EICS), a multi-national research project established by the Foundation for Implant-Associated Infection (FIAI). Currently more than 100 centres have expressed their interest in participating.

www.europeanimplantcohort.org

Organized the 2nd ESGL Meeting, Barcelona, Spain, 16–19 September 2014

Published two articles on paediatric vaccination in CMI 2014; 20 (Suppl. 5)

Organized the 3rd ESCMID Conference on Vaccines – Vaccines for Mutual Protection, 6 – 8 March 2015, Lisbon, Portugal, organizing committee: Ron Dagan, Israel, Susanna Esposito, Italy and Mario Poljak, Slovenia

Published several articles about diagnosis and epidemiology of poliovirus in Eurosurveillance 2014;19(7)

Published the article ‘Charactertistics of prosthetic joint infections due to Enterococcus sp and predictors of failure: a multina
tional study’. Tomero E, Sensenive E, Euba G, Petersdorf S, Rodriguez-Pardo D, Lakatos B, Ferrari MC, Pilares M, Baha-
monde A, Trebe R, Benito N, Soitti L, Tord MD, Baraza-
extabaru JM, Rannas A, Riera M, Jover-Sáenz A, Palomino I, Ariza J, Soriano A; the ESCMID Study Group of Implant-Asso-
ciated Infections (ESGAMI). CMI 2015 Jan 21(1)

Runs the Study Group Research Grant project ‘The participa-
tion of the elderly in randomized controlled trials of antibiotic treatment’, study coordinator Mical Paul, Israel

Completed the study group research grant project ‘Novel adjuvant therapies in experimental meningococcal menin-

Published the ESCG cooperative study ‘Increase in hippocam-
al water diffusion and volume during experimental pneu-
monic meningitis is aggrigated by bacteremia’, Holler JGI, Brandt CT, Leib SL, Rowland JJ, Östergaard C, BMC Infect Dis. 2014 May 6;14:240

Runs guidelines project for diagnosis and treatment of bacte-
rial meningitis. The presentation of the guideline is planned for ECCMID 2015 in Copenhagen

ESGMI
European Society of Clinical Microbiology and Infectious Diseases

Organized a meeting during the 20th congress of the Interna-
tional Organization for Mycoplasmology (IOM), Blumenau, SC, Brazil, 1–6 June 2014

Runs project ‘International guidance on Mycoplasma pne-
moniae multi-locus variable-number tandem-repeat analysis (MLVA) has been agreed’, study coordinator Vicky Chalker, United Kingdom. Publication is underway

Runs project to study international resistance determination

and monitoring of macrolide resistance in M. pneumoniae
CAESAR Project

Nienke van de Sande
WHO Regional Office for Europe
NVS@euro.who.int

The CAESAR (Central Asian and Eastern European Surveillance of Antimicrobial Resistance) network is a joint initiative of the WHO Regional Office for Europe, ESCMID and the Netherlands National Institute for Public Health and the Environment (RIVM). CAESAR aims to support establishing or strengthening antimicrobial resistance surveillance in all WHO European Region countries that are not already part of the European Anti-
microbial Resistance Surveillance Network (EARS-Net) coordinated by the European Centre for Disease Prevention and Control (ECDC) in the European Union (EU).

Currently the following countries have initiatives at various stages of development to participate in CAESAR: Albania, Armenia, Azerbaijan, Belarus, Bosnia and Herzegovina, Georgia, Kyrgyzstan, Montenegro, the Republic of Moldova, the Russian Federation, Serbia, Switzerland, The former Yugoslav Republic of Macedonia, Turkey, Turkmenistan and Uzbekistan, in addition to stages of development to participate in CAESAR: Albania, Arm-
menia, Azerbaijan, Belarus, Bosnia and Herzegovina, Georgia, Kyrgyzstan, Montenegro, the Republic of Moldova, the Russian Federation, Serbia, Switzerland, The former Yugoslav Republic of Macedonia, Turkey, Turkmenistan and Uzbekistan, in addition to Kosovo (in accordance with United Nations Security Council resolution 1244 (1999)). To date five countries (Belarus, Serbia, Switzerland, The former Yugoslav Republic of Macedonia and Turkey) have submitted data to the CAESAR database.

CAESAR Project Group
- ESCMID – Christian Geise, Robert Skub
- RIVM – Tijlief Linsenstraat, Joines
- WHO Europe – Dora Leit Kesting, Janka Nenndorpg

CAESAR/Focal Points

Loredana Mola (Albania), Kristina Goguerean (Armenia), Nozita Mursalova (Azerbaijan), Leonid Titov (Belarus), Amela Gecic-Ljubovic and Aninka Pava Dimitrovska (Bosnia and Herzegovina), Paola Immazato (Georgia), Liu Ruka (Kosovo, in accordance with the United Nations Security Council Resolution 1244 (1999)), Batsigal Lamiakovska and Batnigal Kambarieva (Kyrgyzstan), Gulnurba Toreeva (The former Yugoslav Republic of Macedonia), Rudi Cacapaz (the Republic of Moldova), Georgina Mijovic (Montenegro), Roman Kotcor (Russian Federation), Zara Jelic (Serbia), Andreas Kronenberg (Switzerland), Giampietro Mazzini Sabatioso (Slovenia), Husnu Uzeir (Turkey), Gunhildur Sigurjonsdottir (Turkmenistan), Adyq Salimov (Ukraine), Sultana Abdulaheva (Uzbekistan)

For more information and for details of the CAESAR network’s upcoming activities, join us at the CAESAR Network meeting at ESMID, 25–28 April 2015, Copenhagen, Denmark. The meeting will take place on Monday, 27 April, 9.00–12.00 in Room N.

In 2014 national workshops took place in Albania, Belarus, Uzbekistan, Republic of Moldova and Georgia.

ESCIMD actively supports the publication of high-quality, ev-
idence-based guidance to support best medical practice in the diagnosis and management of infectious disease.

The process of developing ESCIMD Medical Guide-
lines has been reviewed and restrucured in 2014/2015 (see www.escmid.org/ep for the current Operating Procedures in this field). These changes were prompted by a desire of the ESCIMD Executive Committee (EC) to generate Guidelines that are clini-
cally useful, sustainable and that remain current. One significant change is that the EC will now directly commission all Medical Guidelines to ensure there is a core set that can be used in the care of European patients. This core set is currently being devel-
oped, in collaboration with the Scientific Affairs Subcommittee. ESCIMID is investigating ways to ensure that guidelines can be used at the bedside (e.g. develop dynamic webpages and apps); ESCIMID will insist on the use of GRADE, will promote collabo-
ration with other European societies wherever that is appropriate, and will promote the rapid incorporation of new knowledge to facilitate rapid translation to the clinic.

Guidelines produced by ESCIMID will be published in the Society’s journal Clinical Microbiology and Infection (CMI). The CMI leadership team will be involved at the early stage of guideline development to ensure a robust and seamless pathway to publication. Individual Study Groups will be free to produce position papers, and systematic reviews. Such activity will be acknowledged in the Study Group evaluation, but will free Study Groups from the requirement for ultimate approval by the EC.

Guideline
Infection control measures for MDR (Gram-negative bacteria in the healthcare setting
ESCMID
Published 2014

Diagnosis and treatment of emerging fungal diseases
ESCMID/ECMM (EFISG)
Published 2014

Treatment of Clostridium difficile – update
ESCOMD (ESGCD)
Published 2014

Diagnosis and treatment of emerging fungal diseases
ESCMID/ECMM (EFISG)
Published 2014

Treatment of Clostridium difficile – update
ESCMID (ESGCD)
Published 2014

Diagnosis of Clostridium difficile – update
ESCMID (ESGCD)
Published in 2015

Diagnosis, prophylaxis and treatment of biolum infections
ESCMID (ESGB) Publication planned in 2015

Diagnosis and treatment of Alpergillus diseases
ESCMID/ECMM/ERS/IAAC (EFISG) Publication planned in 2015

Diagnosis and treatment of bacterial meningitis
ESCMID (ESGB) Publication planned in 2015

HAP/VAP
ERS/ECMM/ESCMID Publication planned in 2015

The diagnosis and management of vertebral osteomyelitis
IBDA/ESCMID Publication planned in 2015

Clinical practice guidelines on leishmaniasis
IBDA/ESCMID/ASLMH Publication planned in 2015

Surviving sepsis campaign – revision 2016
ISF/ESCMID
Started 2014

Neutrobil Antibiotics
ESCMID (ESGPC) Started 2014

Nontuberculous mycobacteria
IBSA/ATC/ERS/ESCMID Started 2013

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Nienke van de Sande
WHO Regional Office for Europe
NVS@euro.who.int
The 24th ECCMID, held in Barcelona from 10 – 13 May 2014, exceeded all ESCMID’s expectations. It had the highest attendance of scientific participants and we received around 1,000 abstracts more than in the past. Furthermore, the quality of the abstracts presented was outstanding, showing the excellence of research in the fields of Clinical Microbiology and Infectious Diseases in Europe. The growth of the exhibition and sponsored integrated symposia surprised us positively. The Programme Committee devised a balanced scientific programme for both specialties, including bacteriology, virology, mycology, mycobacteriology, parasitology and infection control from the diagnostic, prevention and treatment points-of-view. All members of the Programme Committee must be thanked for their great efforts to set up such an interesting programme. Thanks also to the more than 250 reviewers, who conducted blind reviews of the abstracts, especially those who stepped in last minute over Christmas. As in every previous year, we had to reject a sizeable portion (less than 30%) of the 4,500 submitted abstracts (Figure 1). Time and space constraints will, inevitably, always force us to exclude many excellent abstracts but it also means that the quality of the presentations and posters is always extremely high.

The congress programme consisted of 20 educational workshops including the TAE Trainees Day, 10 keynote lectures, 19 meet-the-expert sessions, 58 official symposia, 36 oral sessions and 24 integrated symposia. The total number of speakers and chairpersons was 386. Figure 3 shows the wide distribution of the countries of origin of the speakers. The contact time during keynote lectures, symposia, educational workshops, meet-the-expert sessions and oral sessions hit an all-time high of more than 260 hours. Although over 65% of congress participants were, logically, from Europe, we were pleased to see high attendance of participants from North and especially South America, Asia and Africa (Figure 2). This trend reflects our Society’s efforts to extend our activities beyond Europe, especially into fast growing economic areas. All delegates who attend ECCMID are welcome to get in touch with us with any comments or criticism that can help improve the meeting.

This was my last ECCMID as the Programme Director and I would like to take this opportunity to thank all my colleagues and friends who have helped me organize the scientific programme during the last five years, from the members of the different scientific programme committees to all those working in the ESCMID office, without whom the success of previous ECCMIDs would not have been possible. The best thing about these five years is the great number of good friends that I have made.
Impressions ECCMID 2014
It has been an exciting year, taking over from Jordi Vila after ECCMID in Barcelona last year to prepare for ECCMID in Copenhagen. There are over thirty of us on the Programme Committee so it meant the chance to put faces to many distinguished names, establish new networks and refresh our enthusiasm for ECCMID, which means so much to all of us as ESCMID’s annual flagship conference.

Among the changes introduced for this year has been a scoring system to evaluate the scientific proposals for ECCMID. This enables the committee members to make a fairer and more objective decision in accepting or rejecting a proposal, based on the individual proposal’s merits, making the whole process more transparent. As always, the committee has been especially careful to ensure a balance within the programme is achieved in categories, topics and themes as well as gender and geographic distribution when choosing the faculty. Believe me, we had intense and most interesting discussions while attempting to build the most attractive and excellent scientific sessions – and fun.

ECCMID opens with the Educational Workshops, which have evolved to take full advantage of advances in technology and modern media. They will become more interactive, allowing participants to become actively involved and get the maximum benefit from the sessions. The 19 sessions explore a wide range of currently important topics. Organized by ESCMIDs Study Groups, the Trainee Association and EUCAST, the workshops offer superb networking opportunities in addition to their educational value. This is also true of the Meet-the-Expert sessions where we want to include more personal views and experience and want to see more direct interaction of participants with the expert. In more than a dozen sessions, experts help find practical solutions of how to deal with important issues. I will be very happy to listen to your feedback on the innovative ways to participate, and I am keen to hear ideas for new event formats and ways to increase interactivity even more!

While you read this, we’ll have already started preparing for ECCMID 2016 – isn’t that unbelievable? I am totally happy to be on board with this group of energetic and enthusiastic colleagues who enjoy ‘doing’ Microbiology or Infectious Diseases… and @Jordi: we still miss you.

As Programme Director, I am very grateful to the more than 400 reviewers who were involved in assessing around 4,000 abstracts this year. ECCMID is growing steadily every year so the pressure on all of us to ensure quality remains high is also rising. I also very much appreciate the great support of the Programme Committee members and the ESCMID office. Thank you all.
Visit the WHO Regional Office for Europe and discover their programmes!

A group of 10 observers (ESCMID members) are offered a 3-day programme at the WHO Regional Office for Europe, Division of Communicable Diseases, Health Security and Environment (DCE) in Copenhagen, Denmark.

Date of Observership: 6–8 October 2015
Applications accepted from: 15 May 2015, 10:00 CET
Selection: ‘First come, first served’ but ensuring CM, ID, gender and country balance.

To apply, visit the ESCMID website.
Deadline for applications: 30 May 2015, 16:00 CET
www.escmid.org/WHO_Observer
www.euro.who.int

ESCMID WHO Observership in 2015

ESCMID provides junior members to attend courses and workshops by offering them grants. Some of our colleagues early in their careers struggle financially, especially when practising in countries with a much lower cost of living than those where the courses are held. The course organizers, with the help of the ESCMID Executive Office, select the recipients. The Education Programme provides excellent opportunities for these members to develop professionally. So please encourage your less well-off and inexperienced colleagues to apply for courses and, where necessary, funding. While attending courses and workshops in person brings the most benefit, all members have access to the Online Lecture Library (OLL), which includes presentations of all our educational activities and is available to ESCMID members at www.escmid.org/OLL.

Outlook for 2015

ESCMID will continue to focus its ambition to undertake its educational activities in areas outside Europe. Among the 16 events planned for 2015 there will be courses in Tunis, Delhi and Beijing. The rest of the 11 postgraduate courses and five technical workshops will be held in different cities all over Europe. The programme promises to be very exciting. See the calendar section on the Society’s website for full details of the 2015 Education Programme at www.escmid.org/calendar.

This year’s Summer School will be held in Istanbul, Turkey, from 4 to 11 July 2015. Registration is open and details can be found online at www.escmid.org/summerschool2015.

We have already contacted all Study Groups and Affiliated Societies to ask for their ideas for the 2016 programme to be submitted by the end of May 2015 so we can meet our mid-July deadline for the full programme. Members are welcome to contact us with ideas for future courses and workshops and, of course, we highly recommend taking part in this year’s programme.

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ESCMID Courses and Workshops

Molecular Typing Methods for Pathogens
ESCMID Postgraduate Education Course
30 June – 4 July 2014, Lyon, France
Organized by the ESCMID Study Group for Epidemiological Markers (ESGEM) and Lyon East Medical School

Infections in the Elderly: Room for Improvement
ESCMID Postgraduate Education Course
2 – 3 October 2014, Annecy, France
Organized by the ESCMID PK/PD of Anti-Infectives Study Group (EPASG) and ESCMID Study Group for Infections in the Elderly (ESGIE)

Advanced Antimicrobial Pharmacokinetic and Pharmacoepidemiology
ESCMID Postgraduate Technical Workshop
6 – 8 October 2014, Liverpool, United Kingdom
Organized by the ESCMID PK/PD of Anti-Infectives Study Group (EPASG), University of Liverpool, Laboratory of Applied Pharmacokinetics (LAPK) Los Angeles, University of Southern California (USC) Los Angeles, and Monash University Melbourne

Mobility and Infection: Diagnosis and Management
ESCMID Postgraduate Education Course
16 – 17 October 2014, Dubrovnik, Croatia
Organized by the ESCMID Study Group for Infections in Travellers and Migrants (ESGTM), ESCMID Study Group for Infections in the Elderly (ESGIE), Croatian Society of Infectious Diseases of the Croatian Medical Association (CSID-CMA), Infectious Diseases and Clinical Microbiology Society of Turkey (EMKUD), University of Zagreb, School of Medicine and Andrija Stamper Kolar School of Public Health – WHO Collaborating Centre for Occupational Health

Training Course in Hospital Epidemiology
20 – 23 October 2014, Phuket, Thailand
Organized by ESCMID and the Society for Healthcare Epidemiology of America (SHEA)

Acute Infectious Encephalitis: Challenges in Clinical and Biological Diagnosis
ESCMID Postgraduate Education Course
29 – 31 October 2014, Grenoble, France
Organized by the ESCMID Study Group for Infectious Diseases of the Brain (ESGIB) and Societé de Pathologie Infectieuse de Langue Française (SPIFL)

How to Design and Perform your Clinical Studies in Infectious Diseases and Clinical Microbiology
ESCMID Postgraduate Education Course
7 – 8 November 2014, Tübingen, Germany
Organized by the ESCMID Study Group for Bloodstream Infections and Sepsis (ESGIBIS) and the ESCMID Study Group for Infections in the Elderly (ESGIE)

Laboratory Diagnosis of Human Parasitic Infections
ESCMID Postgraduate Technical Workshop
26 – 30 January 2015, Leiden, Netherlands
Organized by the Leiden University Medical Center (LUMC) – Department of Parasitology, Boehrhaave CME and University of Applied Sciences Leiden

Update on Implant-Associated Infections: Diagnosis and Management
ESCMID Postgraduate Education Course
12 – 14 February 2015, Budapest, Hungary
Organized by the ESCMID Study Group for Implant-Associated Infections (ESGIAI)

Advances in Diagnosis and Management of Viral Hepatitis
ESCMID Postgraduate Education Course
6 – 7 March 2015, Tunis, Tunisia
Organized by the ESCMID Study Group for Viral Hepatitis (ESGVH), Tunisian Society of Infectious Diseases (TSID) and Confédération Maghrébène de lutte contre les IST/SIDA (COMALISIDA)

New Perspectives in Infection Control
ESCMID Postgraduate Education Course
12 – 14 March 2015, Kayseri, Turkey
Organized by the ESCMID Study Group for Nosocomial Infections (ESGNI), Turkish Society of Hospital Infections and Control and Erciyes University

Diagnosis and Management of Fungal Infections Both in the West and the East
ESCMID Postgraduate Education Course
19 – 21 March 2015, Delhi, India
Organized by the ESCMID Fungal Infection Study Group (EFISG), Vallabhbhai Patel Chest Institute – University of Delhi and European Confederation of Medical Mycology (ECMM)

Management and Control of Health Care-Associated Bloodstream Infections
ESCMID Postgraduate Education Course
23 – 24 April 2015, Copenhagen, Denmark
Organized by the ESCMID Study Group for Antibiotic Policies (ESGAP), ESCMID Study Group for Bloodstream Infections and Sepsis (ESGIBIS) and ESCMID Study Group for Nosocomial Infections (ESGNI)

Infectious Diseases in the Mediterranean and the Middle East: Current Challenges
ESCMID Postgraduate Education Course
22 – 24 September 2014, Izmir, Turkey
Organized by the ESCMID Study Group for Antimicrobial Resistance Surveillance (ESGARS), ESCMID PK/PD of Anti-Infectives Study Group (EPASG), European Committee on Antimicrobial Susceptibility Testing (EUCAST) and analyse BioLab Linz

Inferno and the West and the East
ESCMID Postgraduate Education Course
19 – 21 March 2015, Delhi, India
Organized by the ESCMID Study Group for Bloodstream Infections (ESGBIS) and the ESCMID Study Group for Infections in the Elderly (ESGIE)

3rd Workshop on Antimicrobial Susceptibility Testing and Surveillance
ESCMID Postgraduate Technical Workshop
16 – 19 September 2014, Linz, Austria
Organized by the ESCMID Study Group for Antimicrobial Resistance Surveillance (ESGARS), ESCMID PK/PD of Anti-Infectives Study Group (EPASG), European Committee on Antimicrobial Susceptibility Testing (EUCAST) and analyse BioLab Linz

Infectious Diseases in the Mediterranean and the Middle East: Current Challenges
ESCMID Postgraduate Education Course
22 – 24 September 2014, Izmir, Turkey
Organized by the ESCMID Study Group for Clinical Pathology (ESGCP), Ege University School of Medicine Izmir, Turkish Society of Hydatidology (THD), Turkish Society of Infectious Diseases Specialists (EKMUD) and Turkish Society of Microbiology (TMC)

Anaerobic Bacteria: Next Generation Technology Meets Anaerobic Diagnostics
ESCMID Postgraduate Technical Workshop
29 September – 1 October 2014, Groningen, Netherlands
Organized by the ESCMID Study Group for Anaerobic Infections (ESGAI), ESCMID Study Group for Epidemiological Markers (ESGEM), University Medical Center Groningen and University of Szeged
13th ESCMID Summer School 2014

Emmi Andersson
13th ESCMID Summer School Co-Director
Stockholm, Sweden
demi.andersson@gmail.com

The 13th ESCMID Summer School took place in the small historic town of Sigtuna in Sweden, 5–12 July 2014. This was the first (but certainly not the last) time the Summer School was arranged in a Scandinavian country, and the participants were lucky to enjoy the very best of Swedish summer weather. The location of the venue, overlooking Lake Mälaren, made both swimming and canoeing after the sessions possible.

Emmi Andersson (Stockholm) and Tibor Pál (Al Ain) directed this year’s Summer School. The programme was, as always, comprehensive and covered a wide range of topics from Clinical Microbiology and Infectious Diseases to career advice lectures. The target audience of the Summer School is early-career MDs at the end of their specialty training as well as biologists, pharmacists, PhD students and postdoctoral fellows working in the infection field. A total of 58 students from 24 countries attended this year’s edition, and ESCMID financed 20 of them with an attendance grant.

Renowned faculty members from eleven countries were invited to share their expert knowledge and interact with these future specialists in the field. Both the former and the current president of ESCMID and other ESCMID committee members lectured during the course. The unique networking possibilities with junior and senior colleagues from all over the world is one of the main benefits of the Summer School.

All students contributed their own interesting presentations of cases from their clinical experience or studies they were involved in. This was a great opportunity to practice professional presentation in English, and to receive feedback from fellow participants and faculty. Everyone engaged heavily in discussions following the lectures, making the most of the presence of world leading experts. The interactivity was further enhanced by small group tutorials that were highly appreciated.

After an intense, inspiring and fun week with peers from all over the world we had all made new friends and networks, and it was a little sad to say goodbye. We all had new perspectives and experiences to take home and I am sure that we will meet again at many future ESCMID events!

This year’s Summer School will take place in Istanbul, Turkey, from 4–11 July 2015. Professor Sibel Ascioglu has prepared an exciting programme at a venue that even has wet lab possibilities. So do not hesitate, apply for Summer School or send your junior colleagues to learn and be inspired in the spirit of ESCMID!

14th ESCMID Summer School
Istanbul, Turkey
4 – 11 July 2015

Postgraduate and continuing medical education in clinical microbiology and infectious diseases.

Including:
• Viral infections
• Infections in immunocompromised hosts
• Multidrug-resistant bacteria
• Difficult questions in infectious diseases
• Career development

Please register at www.escmid.org/summerschool2015. Places are limited, apply by 5 June 2015!

Organized by the ESCMID Education Subcommittee
Hosted at «Acibadem University> in Istanbul, Turkey
Message from the CMI Editor-in-Chief

CMI appears monthly and includes peer-reviewed manuscripts, reviews and research notes. Each print and online issue includes a themed section, highlighting the key subjects reviews and research notes. Each print and online issue includes issues to cover ECCMID symposia and conferences sponsored

Among the noteworthy developments of the past year is that CMI has published articles from countries with emerging economies; Morocco for instance. This clearly confirms the willingness of the journal to be open to the world and not just advanced nations. It is also significant that China and Taiwan are among the top five countries submitting papers to CMI. However, while around a quarter of the papers submitted from China (the highest contributor) and the USA were accepted, the figure for those from India was only 2%. CMI editors continue to work with authors to improve the quality of papers coming from countries with economic, cultural or organizational difficulties, enabling them to reach the standard we have come to expect (Table 1).

We try to balance the topics covered by CMI. About a third of the journal concerns bacteriology, with epidemiology, virology and parasitic diseases accounting for 4%. The proportion of manuscripts submitted as original articles or as research notes (separate from invited reviews and editorials) is continually increasing (Table 2).

CMI achieved excellent results in the latest Journal Citation Reports®. Most significantly, the headline 2-year Impact Factor increased by 13% to 5.197, taking the journal above 5 for the first time. CMI’s Impact Factor has grown significantly over the last decade and is now high above the aggregate and median levels for both of its subject categories. The journal is now ranked 7 of 72 journals in infectious diseases, and 18 of 119 in microbiology. Likewise, the Eigen factor (up 4%) and article influence score (up 4%) both indicate the journal’s increasing prestige.

Figure 1. Number of full text downloads * provisional

Table 1. Most prolific contributors to CMI

<table>
<thead>
<tr>
<th>Author’s country</th>
<th>Number of manuscripts</th>
</tr>
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<tbody>
<tr>
<td>China</td>
<td>577</td>
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<tr>
<td>France</td>
<td>162</td>
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<tr>
<td>Spain</td>
<td>112</td>
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<td>Italy</td>
<td>100</td>
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<tr>
<td>Germany</td>
<td>95</td>
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<td>United States</td>
<td>54</td>
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<tr>
<td>Netherlands</td>
<td>52</td>
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<tr>
<td>Brazil</td>
<td>39</td>
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<tr>
<td>United Kingdom</td>
<td>38</td>
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<tr>
<td>India</td>
<td>35</td>
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Table 2. Number of submissions in 2014

<table>
<thead>
<tr>
<th>Manuscript type</th>
<th>Number of submissions</th>
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</thead>
<tbody>
<tr>
<td>Invited Reviews</td>
<td>154</td>
</tr>
<tr>
<td>Letters</td>
<td>61</td>
</tr>
<tr>
<td>Original Articles</td>
<td>864</td>
</tr>
<tr>
<td>Supplemental Article</td>
<td>11</td>
</tr>
<tr>
<td>Total</td>
<td>1493</td>
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</tbody>
</table>

Table 3. The two most downloaded articles in 2014

<table>
<thead>
<tr>
<th>Authors</th>
<th>Article Title</th>
<th>Vol</th>
<th>Issue</th>
<th>Downloads</th>
</tr>
</thead>
<tbody>
<tr>
<td>C. Pulcini and J.-L. Mainardi</td>
<td>Host genetics and infections.</td>
<td>s1</td>
<td>2015</td>
<td>1085</td>
</tr>
<tr>
<td>D. Raoult</td>
<td>Host genetics and infections.</td>
<td>s1</td>
<td>2015</td>
<td>1085</td>
</tr>
</tbody>
</table>

CMI once again achieved a major target in 2014: the millionth full-text download, achieving an all-time high of 1,800,000, up 64% on 2013 (see Figure 1). The two articles downloaded most frequently in 2014 can be found in Table 3. For the next two years we want to stabilize the current size of the journal in order to better assess its real impact on the scientific community.

We are of course aware of how important it is for researchers to have their findings published quickly. Publication online (Early View) in 2014 took 54 working days, while print publication takes 184 working days (roughly 6 months). We shall continue to streamline the process without compromising quality.

CMI strives to reflect ECCMID’s academic activities and, more generally, the world of infectious diseases and clinical microbiology, as well as to attract the best articles and reviews. It also aims to draw attention to emerging fields and to questions raised in the themed sections. As always, we welcome feedback on our efforts and look forward to the challenges ahead.

Monthly themed sections

<table>
<thead>
<tr>
<th>2014</th>
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<tbody>
<tr>
<td>January</td>
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<tr>
<td>Emerging technology in tracking contagion. P. Brouqui</td>
<td>Infection in the elderly. M. Paul</td>
</tr>
<tr>
<td>February</td>
<td>February</td>
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<tr>
<td>Systematic review or meta-analysis? Their place in the evidence hierarchy. M. Paul</td>
<td>Mass Gathering. P. Goubert</td>
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<td>March</td>
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<td>April</td>
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<tr>
<td>Parasitic diseases and immunosuppression. E. Botteau</td>
<td>Neuraminidase inhibitors for influenza: the new evidence. M. Paul</td>
</tr>
<tr>
<td>May</td>
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<tr>
<td>Emerging stories of bacterial epidemics. D. Raoult</td>
<td>Neglected zoonoses. S. Luther &amp; O. Ergonol</td>
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<td>June</td>
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<tr>
<td>Bioterrorism: reality or phantom. M. Grobusch and G. Greub</td>
<td>New diagnostic tools in parasitology. E. Botteau</td>
</tr>
<tr>
<td>July</td>
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<tr>
<td>New epidemiology of S. aureus infection. G. Lina</td>
<td>New vector transmitted pathogens. E. Awa Zayanc</td>
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<td>August</td>
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<tr>
<td>Norovirus. L. Kaiser and P. Pfaller</td>
<td>Acute diarrheaea: new perspectives. F. Albertberger</td>
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<td>September</td>
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<td>December</td>
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<tr>
<td>Host genetics and infections. A. Gould and E. Piddock</td>
<td>Infection control. E. Tacconelli</td>
</tr>
</tbody>
</table>

CMI Editor-in-Chief

Table 1. Most prolific contributors to CMI

Table 2. Number of submissions in 2014

Table 3. The two most downloaded articles in 2014

Invited Editorials 17
Manuscript type
Invited Reviews 61
Original Articles 867
Total 1435
Research Notes, online only 217

E. Tacconelli et al. | ECCMID guidelines for the management of the infection control measures to reduce transmission of multiresistant gram negative bacteria in hospitalised patients | s1 | 2015 | 1085

Didier Raoult
CMI Editor-in-Chief
didier.raoult@escmid.org
New Microbes and New Infections

Editor-in-Chief: Michel Drancourt

Latest research, focusing on new genomes, new microbes and new technology applied to the diagnosis of infectious and tropical diseases

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• Rapid publication guarantees fast dissemination of your important work

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Message from the NMNI Editor-in-Chief

Micr0bes and infections ignore frontiers but clinical microbiology does not. A recent survey by Didier Raoult, editor-in-chief of CMI, showed that papers from emerging countries are still under-represented in infectious diseases and clinical microbiology journals (1). This is a shame, not only for the scientists from these countries but also for ID/CM scientists at large, and it has a knock-on effect for health authorities and populations. The recent on-going Ebola virus infection epidemics illustrate this. Microbes and infections have always used the most advanced travel vehicles provided by humans to jump over frontiers and reach target populations. Therefore, it is of prime importance for us to leap over all boundaries and communicate as soon as possible any new event in clinical microbiology and infectious diseases because the evolution of microbes and outcome of infections is unpredictable.

New Microbes and New Infections serves the field as a peer-reviewed, open access journal for the rapid dissemination of the latest research, with a particular focus on new genomes, new microbes, and new technology applied to the diagnosis of infectious/tropical diseases. As Editor-in-Chief, I am pleased to report that New Microbes and New Infections is now indexed in PubMed Central, increasing the visibility of your contributions. Article categories include any country’s first descriptions of a microbe, first noted resistance or first case reports, new genomes and new technologies for diagnosis. The journal welcomes mini-reviews as well as full-length original articles. NMNI offers clinicians and researchers a rapid route to publication and the opportunity to circulate their work in a highly visible global forum.

Scientists and medical practitioners in emerging countries have a great deal to contribute and NMNI is at the forefront of addressing the imbalance in papers from these countries. One key characteristic of this new digital journal is to break language barriers by being multilingual. Authors may submit manuscripts not only in English but also in one of six other languages. Papers will be handled by the most appropriate member of the editorial board, taking language into consideration. Its members are Tahar Kermif (Arabic), Jónatas Santos Abrahão (Portuguese), Wanderley de Souza (Portuguese), Ruijia Yang (Chinese), Wuguo Chen (Chinese), Xavier de Lamballerie (French), Ogboroukui (Russian) and Miriam-José Alvarez Martinez (Spanish). First dual-language papers are in press. All articles published by NMNI are fully open access: immediately freely available to read, download and share.

New Microbes and New Infections – the title says it all and, to ensure the information is absolutely up-to-date, the editors strive for a one-month review period. NMNI – spread the word not infections!

Professional Affairs Overview

ESCMID’s involvement in Professional Affairs’ activities for both Clinical Microbiology (CM) and Infectious Diseases (ID) has continued to grow over the past year.

After ECCMID 2014 the ‘3rd ESCMID Workshop on Professional Affairs in CM & ID: The Future of Clinical Microbiology and Infectious Diseases in Europe’ took place in Ljubljana, Slovenia (please see page 50 and 51).

Many ESCMID members consider the ESCMID Collaborative Centre (ECC) and Observership programme, including those hosted by ECDC and WHO, to be one of the most original and successful activities of our Society, and its popularity is increasing. As of 13 March there are 81 ECC and 361 Observerships have taken by 1 January 2015. In 2014 and 2015 we welcomed 19 new ECCs in the following countries: Australia, China, France, Ireland, Israel, Italy, Romania, South Africa, Ukraine and the United Kingdom. More information can be found on pages 42 and 43.

The ESCMID Parity Commission (EPC) which, in addition to its ongoing initiatives to review and improve equal representation in professional life for clinical microbiologists and infectious diseases specialists, completed a qualitative survey on discrimination in the work place and reports on a study of gender impact in antibiotic prescribing in communities across Europe (page 45).

The Trainee Association of ESCMID (TAE) had an election in 2014 and the new leadership is actively working on new projects. For more information see the article on page 50.

The European Committee on Infection Control (EUCIC) was set up and started operating in 2014. For more details concerning the committee and its major goals see page 47.

The close and productive collaboration between the PA officer and UEMS continued towards the major goal to further harmonize and improve the quality of both specializations within European countries.

Finally, we would like to draw your attention to our EU Partner Search Platform and encourage you to make full use of it to find international research partners for your projects. The Jobs Platform on the ESCMID website regularly features new positions and potential employees in CM & ID.

www.escmid.org/profession_career/eu_partner_search

The EU Partner Search Platform is useful for finding new collaboration opportunities among European Research Centres.

www.escmid.org/profession_career/jobs_in_cm_id

The Jobs Platform is an easy way to find your next job or to fill an open position in CM and ID.

Details of the current activities within the Professional Affairs’ portfolios can be found on the following 12 pages.
ESCMID Collaborative Centres and Observerships

www.escmid.org/observerships

Evelina Tacconelli
Professional Affairs Officer for Clinical Microbiology and Infectious Diseases
evelina.tacconelli@escmid.org

The ESCMID Collaborative Centres (ECCs) and Observership Programme continued to be a popular Programme in 2014. Clinical Microbiology/Infectious Diseases centres of excellence in Europe and beyond welcome ESCMID members from abroad to learn about diagnostic and therapeutic procedures and the local organization of services, as well as to establish new contacts and foster international exchange. The ECC programme was launched in 2009 and currently lists 81 fully operating centres. The countries with the most ECCs are Spain (7), the Netherlands (7), the United Kingdom (7), Turkey (6), Italy (5) and Germany (5).

ESCMID’s plan to increase the number of ECCs outside Europe is underway. Just recently ESCMID welcomed ECCs from China, USA and another ECC in South Africa. The ECCs in distant regions of the world offers Observers a chance to gain experience of infections rarely seen in Europe and learn from local diagnostic approaches.

By 1 January 2015 more than 361 Observership visits had taken place since the programme began back in 2009. Approximately 95% of Observers rate their Observership visit excellent and 5% good. The Center for Musculoskeletal Surgery at the Charité - University Medicine in Berlin, Germany and Canisius Wilhelmina Ziekenhuis (CWZ) in Nijmegen, the Netherlands hosted the largest number of Observers in 2014.

We are pleased to announce that the two new Observership initiatives with ECDC and WHO continued and expanded in 2014. Details of calls for applications in 2015 are available on page 28.

Where ESCMID observers come from... and where they go!

Figure 2.

Distribution of the ECCs throughout Europe and beyond, (status: 13 March 2015) For a list of ECCs, please visit the website: www.escmid.org/profession_career/collaborative_centres_observerships

Figure 3. Gender of Observers in 2014

Female
Male

59%
41%

39%
61%

2%

Figure 4. Age distribution of Observers in 2014

20 – 29 years
30 – 39 years
40 – 49 years
50 – 59 years
60 – 69 years

59%
39%
2%

Figure 5. Length of Observership in 2014

1 day
2 – 10 days
11 – 30 days

Activities within the ESCMID Collaborative Centres and Observership Programme

European Network Corner at ECCMID

In recent years the European Network Corner had a dedicated area at ECCMID for ECCs to showcase their activities and connect with potential Observers. Likewise at this ECCMID, the European Network Corner will again have a dedicated area for ECCs to present themselves.

ECC activity in 2014

In the past year, ESCMID approved 15 new institutions as Collaborative Centres, increasing the number of operating ECCs to 81.

Observer visits in 2014

In 2014 a total of 87 Observership visits took place, up 14% on last year. The most popular duration was between one day and four weeks. Observers came from all over the world: 65 from various European countries and 22 from further afield (including Africa, Asia, Latin America and Oceania). For more details, see Figure 1.

The Observers’ reports are published on the ESCMID website at www.escmid.org/observership and testify to the usefulness of the programme for the Observers’ professional development.

Do you have a question about ESCMID Observerships? Consult our FAQ: www.escmid.org/observerships
ESCMID Observerships

Update and improve your clinical and laboratory skills!

The ESCMID Observership programme is an opportunity for ESCMID members to visit an ESCMID Collaborative Center and to learn good clinical and laboratory practice.

Apply anytime throughout the year for a visit in another country between one day and one month. Funding is guaranteed.

www.escmid.org/observerships

ESCMID Mentorships

Improve your career and skills and benefit from experienced professionals in the field of CM and ID.

ESCMID members can be mentored by an ESCMID Mentorship Centre for one or two years by a Mentor from our pool of Centres. Apply now!

www.escmid.org/mentorships

ESCMID Parity Commission

Evelina Tacconelli
Chairperson ESCMID Parity Commission (EPC)
evelina.tacconelli@escmid.org

The Parity Commission welcomed Chryssanthi Skeravits (Advocate for Minorities) and Angela Huttner (Advocate for Gender) to the committee in 2014, replacing Nur Benzonana and Titia Kortbeek. This past year the EPC worked actively with the ESCMID Scientific Officer in order to further increase the quality of ESCMID educational events, ensuring balance in gender and countries of origin of teachers and course participants. The EPC also contributed to the organization of ECCMID 2015 and the successful improvement in gender balance, the involvement of younger investigators and the range of countries covered.

The Parity Commission also completed two new projects in 2015. The first was a systematic review and meta-analysis to analyse the impact of gender and age on the use of antibiotics in the community. The study, including national data and published studies, showed that the prescribing of antibiotics was significantly influenced by the gender of the patients, even after adjusting for age and therapy indications. On average the risk of receiving an antibiotic was doubled for women between 25 and 75 years old.

The second project was the follow-up of the 2013 parity survey (Tacconelli et al., BMJ Open 2014). A qualitative survey had been run by experts in five European countries with the highest risk of discrimination in the work place in the fields of Infectious Diseases and Clinical Microbiology. In two selected hospitals in each country, interviews were conducted by experts and two focus groups involving, in a first phase, local personnel, were formed in order to define type of discrimination and major perceived problems. In a second phase decision makers were integrated in the discussion and proposals for solutions were offered and discussed. Overall there were 45 in-depth interviews, each of them lasting from 45 to 90 minutes, and 7 focus groups were formed. The results, currently in the final analysis, will be published and will be available online.

For further information about our work in general and this study in particular, please visit the Parity Commission webpages on the ESCMID website.

ESCMID Mentorships

Evelina Tacconelli
Professional Affairs Officer for Infectious Diseases & Clinical Microbiology
evelina.tacconelli@escmid.org

Being mentored is an excellent way for less experienced professionals to obtain appropriate advice and guidance from a trusted, reliable source. So ESCMID has launched a new initiative – the ESCMID Mentorship Programme. ESCMID members who are still at an early stage in their careers now have the opportunity to obtain guidance for research and career development for a maximum of two years from a senior ESCMID member, an expert from one of the newly established ESCMID Mentorship Centres (EMCs), usually departments of Infectious Diseases and/or Clinical Microbiology.

The ESCMID Mentorship Programme aims to provide a well-structured and organized professional environment where our members are guided by a caring expert for one to two years. Mentorships will be organized according to mentee needs and may be arranged as face-to-face meetings, an exchange of emails, telephone calls or internet video conversations.

Up to EUR 3,000 will be reimbursed against original receipts for costs incurred over the maximum two year period, including telephone bills, telephone conference invoices and travel costs (train, air ticket).

The selection of ESCMID Mentorship Centres has just started. If your centre has experience in mentorship or is a centre of excellence in a specific area of Infectious Diseases, Clinical Microbiology or infection control, please apply to be recognized as an ESCMID Mentorship Centre and contribute to the research and career development of up-and-coming scientists. Applications are easily submitted online at www.escmid.org/mentorship.

Mentorships are open to ESCMID members only (full membership and young scientist membership) and a member may only apply for one Mentorship. Applications have to be submitted at least three months before the intended Mentorship starts. There are no age or country restrictions. Every application is subject to review and approval by ESCMID and this process is undertaken by email, phone or in person at an EMC.

All mentees are obliged to submit a final report on conclusion of the Mentorship. These will serve to ensure the programme meets its objectives and indicate where improvements can be made. If the Mentorship is for two years, the mentee has to submit an interim report on completion of the first year.

Once the Professional Affairs Officer has approved this interim report, the mentee may proceed with the second year. Take advantage of this new programme to discover your strengths and fulfill your potential. Apply now.
Healthcare-associated infections (HAIs) are a leading cause of morbidity and mortality worldwide. Of even more concern, therapy of HAIs is becoming more difficult due to the increasing rate of antimicrobial resistance among common HAI pathogens. Over the last decade, multidrug-resistant organisms (MDROs) have been implicated in severe invasive infections, and their occurrence has increased steadily. Patients and healthcare providers alike are starting to see the rate of HAI and antibiotic resistance as an important indicator of quality of care.

In addition to well-known HAI risk factors, international migration, travel and cross-border transfer of patients are leading to a permanent, growing risk of the spread of MDROs. This means that the introduction and establishment of MDROs in previously unaffected or less affected regions is becoming more likely every day. Successful infection control (IC) can therefore no longer be established by individual hospitals at a local level alone but international cooperation has become an absolute necessity to control further spread of MDROs.

ESCMID has devoted resources to the fight against HAIs for many years. Study Groups and dedicated educational events, also in cooperation with other major international stakeholders, has significantly contributed to the current evidence on HAI and the implementation of measures to reduce the HAI burden. To further strengthen this effort, a new ESCMID Committee for IC was founded in 2014: the European Committee on Infection Control (EUCIC). Besides EUCAST, EUCIC is the second standing committee initiated by ESCMID.

The European approach to IC is still very inconsistent across different countries and sometimes also across different healthcare settings within the same country. Major goals of EUCIC are to contribute to the harmonization of IC and the standardization of procedures in Europe. This can only be successful if everyone involved develops new educational tools and promotes guidelines that meet current demands. These major objectives can only be achieved through strong cooperation between major European stakeholders together with several ESCMID sectors.

EUCIC wishes to create a new IC online network able to define the limitations of current IC approaches, outline mitigation actions, and engage representatives from major stakeholders and experts to develop consensus programmes and a homogenous approach to current and future IC strategies in Europe. Newly developed educational tools will focus on real life applicability and support of a new generation of IC specialists.

The Committee is aware of how ambitious the project is and therefore contributions and suggestions from the whole of ESCMID are essential for the success of the project.

We look forward to hearing from you with your comments and suggestions.
3rd ESCMID Professional Affairs Workshop

Mario Poljak
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168 professionals from 24 European countries met in June 2014 in Ljubljana, Slovenia for the 3rd ESCMID Professional Affairs Workshop to review the current state of our two specialties across Europe, Clinical/Medical Microbiology (CM) and Infectious Diseases (ID), and to discuss initiatives to improve the organizational basis for medical practice in the two disciplines.

The Scientific Programme of the 3rd ESCMID Professional Affairs Workshop was prepared in consultation with the ESCMID Professional Affairs Subcommittee, the Medical Microbiology and Infectious Diseases sections of UEMS, the Trainee Association of ESCMID (TAE), as well as in cooperation with the Slovenian Society for Clinical Microbiology and Hospital Infections of the Slovenian Medical Association and the Faculty of Medicine, University of Ljubljana, Slovenia. In the end 33 speakers from 17 European countries presented current major challenges in the field and moderated the discussion. In two days, over seven sessions, specialists in both fields from 24 countries throughout Europe (Austria, Belgium, Bosnia and Herzegovina, Croatia, Estonia, Finland, France, Germany, Greece, Hungary, Italy, Lithuania, Norway, Poland, Portugal, Romania, Russia, Slovenia, Spain, Sweden, Switzerland, The Netherlands, Turkey, and United Kingdom) discussed facts and ideas concerning professional development and cooperation.

In the first session, speakers presented a general overview of ESCMID as the unique scientific and professional society connecting CM and ID specialists, the state of the CM and ID specialties in 2014 throughout Europe, as well as ESCMID activities in the field of Infection Control, including the recently launched European Committee on Infection Control (EUCIC).

In the second session we identified and discussed our main likes and dislikes about our fellow CM and ID specialists. After a lively discussion, we concluded that modern Clinical Microbiology needs staff from diverse backgrounds and that improving the collaboration between CM and other medical specialists is key for the successful management of our patients. We all agreed that only united can we stand and survive all the challenges of 21st century medicine.

In the following head-to-head session, speakers provided the main pro and contra arguments for five burning questions:

- Is antimicrobial multidrug-resistance a great problem in Europe or not?
- Who should perform, read and interpret the results of microbiology point-of-care testing in intensive care units?
- When managing patients with diverse infectious diseases, does the stand-alone ID hospital or the ID department in a big hospital provide the better solution?
- Who should be in charge (ID or CM specialists or someone else?) of infection control, counseling, antibiotic stewardship and auditing?
- Who should be in charge (ID specialists, hepatologists or general practitioners?) of treating hepatitis C patients with revolutionary, direct-acting antiviral agents?

In the session entitled ‘Improving our practice’ four burning questions were addressed in detail:

- Do laboratory consolidation and personnel shortages represent significant problems in Europe or not?
- Is it possible for one person to be both a basic researcher and an ID clinician?
- Do different infection prevalence and rates of antimicrobial resistance across Europe reflect different cultures and different attitudes or something else?
- Should MICs be given to non-ID clinicians?

In the following session, we discussed the challenges of practicing CM/ID in a time of economic crisis, analysing the effects of financial cuts to health-care systems for communicable diseases in Europe. The Greek lesson shows how cuts in health-care programmes can produce dramatic decreases in the quality of care, which also resulted in the recent spread of HIV in marginal groups. The Trainee Association of ESCMID presented the main misfortunes of new generations of trainees and young specialists (in some countries known as the ‘lost generation’), including rapidly increasing antimicrobial resistance, repressive working conditions, over-qualification for the jobs at hand, unemployment, lack of professional standards and fiscal crisis. Presentations were followed by a critical discussion of these topics.

The subject of the last official session was the need for common Training requirements. Representatives of the Medical Microbiology and Infectious Diseases sections of UEMS presented a European curriculum and European medical exam in CM and ID respectively, and the current and future role of ESCMID in all these efforts was defined. Representatives of the UEMS Ophthalmology section showed us that both a European curriculum and European medical exam are possible. Several ways to make CM and ID more attractive for medical graduates were also presented.

In the afternoon of the second day, two focused breakout sessions were organized. The first breakout session, entitled ‘Towards equality based on merit’, critically reviewed and discussed recent achievements towards improvement of gender and geographical imbalance in all segments of our sphere, how to promote women in research and career advancement, the ESCMID Mentorship Programme, a common EU immunization schedule and what kind of advocacy we need to improve the poor visibility of CM. In the second breakout session we again critically discussed several issues related to the future common European curriculum and European exam in CM/ID: the results of the mock CM/ID exam performed by TAE, the British experience with curriculum content and delivery, the emerging concept “Train the trainers”, and the outdated concept of CM as part of Polyvalent Laboratory Medicine.

According to the feedback received, the 3rd ESCMID Professional Affairs Workshop was a great success. Several ideas and proposals raised and agreed in workshop need a close follow-up from both ESCMID and UEMS. All workshop presentations are freely available for ESCMID members in the ESCMID Online Lecture Library www.escmid.org/OLL.
Trainee Association of ESCMID (TAE)

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Founded in November 2009, the Trainee Association of ESCMID (TAE) represents a group of trainees and specialists who finished their training fewer than three years ago. The TAE has a Steering Committee (SC) consisting of six elected members, three of whom are active in the field of Clinical Microbiology (CM) and the other three in Infectious Diseases (ID). In 2013 the very first TAE Steering Committee handed over the baton to their successors. In 2014 two new members were elected in order to have an appropriate turnover of TAE SC members. With fresh motivation and youthful energy, we continue the initial idea of increasing efficiency and functioning of the network of CM and ID trainee representatives all over Europe.

At ECCMID 2014 in Barcelona, the TAE prepared the fourth ‘Trainees Day’, a special session dedicated to trainees with new, attractive and educational topics. The TAE was also involved in the co-organization of three other ECCMID sessions. This year at ECCMID 2015 the TAE will be actively involved in three Educational Workshops and will present a completely innovative format for the Trainees Day: ‘Everything you always wanted to discuss directly with an expert’ with round tables and recognized experts in ID and CM as discussion leaders.

A UEMS ID/TAE mock exam was launched in May 2014, composed of 30 multiple choice (best of five) questions; 68 participants completed the quiz and it enabled us to pilot a mock exam for ID doctors. The TAE was actively involved in the ESCMID Professional Affairs Workshop, held 5 – 6 June 2014 in Ljubljana, Slovenia, on ‘The Future of Clinical Microbiology and Infectious Diseases in Europe’ in proposing lectures and oral communications presented by a TAE SC member.

At the 10th TAE SC Meeting, held in Zagreb in December 2014, besides welcoming the new TAE SC members, preparations for future activities progressed. This included not only the ECCMID sessions we are organizing but also the upcoming survey on training conditions in Europe and beyond, maintaining a good working relationship with both the Medical Microbiology and Infectious Diseases sections of UEMS, and the TAE Award in Training Achievements. This year we have two outstanding awardees that have set excellent standards in their training (page 14).

Last but not least, we are working to establish a solid and efficient functioning network of CM and ID trainee representatives from all European countries and beyond. Together we can improve communication and cooperation among early-career ESCMID members and encourage trainees to get involved in the numerous ESCMID activities available to them, to share their knowledge among their peers, and to participate in the development of our specialties. The Trainee Association was also involved in the 3rd Professional Affairs Workshop described on the previous two pages.

Observership reports from WHO and ECDC

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Technical Officer AMR Communicable Diseases, Health Security, and Environment  
WHO Regional Office for Europe

WHO/ESCMID Observership Report 2014
Following the success of the first WHO Observership in 2013, the number of participants was doubled from five to ten, but two were sadly unable to attend. The organizers benefited from feedback from the first visit to further improve the experience. From September 30 – October 2 the second ESCMID-WHO Observership took place at the Division of Communicable Diseases, Health Security and Environment (DCE) of the WHO Regional Office for Europe in Copenhagen, Denmark. During the three day Observership, eight participants were introduced to WHO activities and programmes via presentations, case studies, a tour of UN city and further, more in-depth meetings with staff working on programmes for which the observers had indicated their specific interest. The Observers were: Anna Jarchow-MacDonald (UK), Charles Elkuwu (Nigeria), Aysegul Karahsah (Turkey), Zsuzia Bognár (Hungary), Marloes Heijne (The Netherlands), Mohamad Ibrahim (Lebanon), Prashant Purohit (Kuwait), and Lessandra Michelin (Brazil). The Observers received a broad overview of the scope of WHO, and had the opportunity to talk to many different WHO staff working in a variety of public health fields. As they did last year, the Observers prepared presentations on their impressions during the visit as well as opportunities for collaboration with WHO, which led to a fruitful discussion.

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European Centre for Disease Prevention and Control

ECDC/ESCMID Observership Report 2014
In September 2014 the European Centre for Disease Prevention and Control (ECDC) hosted ten ESCMID members as part of the ESCMID ECDC Observership initiative. Their visit took place jointly with Observers from the European Society for Clinical Virology (ECSV) and Fellows from the European Programme for Public Health Microbiology Training (EUPHEM). The five-day programme covered the core operations of ECDC and its activities, including surveillance and epidemic intelligence, antimicrobial resistance, vaccine-preventable diseases, sexually-transmitted infections, as well as cross-cutting areas such as burden of diseases and evidence-based approach to public health. This introduction to ECDC was complemented by several ‘hands-on’ exercises, e.g. producing a rapid risk assessment on an infectious disease threat, analysing EU molecular surveillance data, using data from the European Burden of Communicable Diseases project to make informed public health decisions, and others. They had an opportunity to observe the daily analysis of epidemic intelligence information and present and discuss their own work with guest speakers, peers and ECDC colleagues.

The ESCMID Observers to ECDC in 2014 were from Greece, Turkey, the Netherlands, Romania, the United Kingdom, Spain, Australia and Nepal (ESCMID ECDC Observership page). Their visit reports are available on ESCMID’s web pages (ECDC as an ESCMID Collaborative Centre). The 2015 ESCMID ECDC Observership is scheduled for 7 – 11 September 2015; the application period is 1 – 30 May.

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EUCAST in 2014–2015

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EUCAST provides breakpoints and antimicrobial susceptibility testing methodology. ESCMID provides the administrative, financial and scientific framework for EUCAST. The European Centre for Disease prevention and Control (ECDC) and ESCMID both supported EUCAST financially in 2014, and ESCMID supports the development of the EUCAST disk diffusion method.

EUCAST Steering Committee

The committee met five times in 2014, dealing with various aspects of breakpoints and susceptibility testing. ‘Visiting’ General Committee members, European Medicines Agency (EMA) representatives and ECDC representatives attended some meetings. Six groups from pharmaceutical companies presented data on new agents.

EUCAST General Committee

The annual meeting for national representatives was held during ECCMID and the preceding year’s activity was reviewed.

National Antimicrobial Susceptibility Testing Committees (NACs)

Most European countries have established NACs. The interest in EUCAST in countries outside Europe continues to be strong and NACs have been set up in Morocco and Brazil in the past year. As well as providing valuable national inputs to all aspects of EUCAST, NACs promote national strategies for susceptibility testing and help to implement EUCAST breakpoints and methods. A paper detailing the uptake of EUCAST breakpoints and methods and the establishment of NACs has recently been published in the Eurosurveillance journal. www.eurosurveillance.org/ViewArticle.aspx?ArticleId=21008

EUCAST breakpoints

Version 5.0 of the MIC and zone diameter breakpoint tables for bacteria, and QC tables were published on the EUCAST website in January 2015.

Breakpoints for new agents are set by EUCAST as part of the marketing authorisation process by the EMA. In the past year breakpoints have been set for dalbavancin and several other agents in process.

Nitrofurazone and temocillin breakpoints for Enterobacte- riaceae are currently under discussion. Linezolid breakpoints for staphylococci and enterococci, metronidazole breakpoints for anaerobes, fluoroquinolone breakpoints for Corynebacterium spp. and teicoplanin breakpoints for coagulase-negative staphyloco- cci were reviewed but no changes were justified. The method for telavancin MIC determination was revised and breakpoints adjusted. For Neisseria meningitidis the intermediate category for ciprofloxacin was removed. Carbapenem and tigecycline breakpoints for Enterobacteriaceae and fluoroquinolone breakpoints for various organisms are being reviewed. For Neisseria gonorrhoeae discussions with Magnus Unemo and Gianfranco Speriti (ECDC) have covered treatment, resistance, breakpoints and susceptibility testing issues.

A guidance note on breakpoints for topical agents has been published outlining the issues with topical agents and listing ECOFFs and systemic clinical breakpoints.

EUCAST disk diffusion method

Studies are undertaken at the EUCAST Development Laboratory (Växjö, Sweden) in collaboration with EUCAST Network Laboratories to develop susceptibility testing methods. Ongoing projects include zone diameter breakpoints for UTI agents, disk diffusion methods and breakpoints for Kingella kingae and Aerococcus spp., zone diameter breakpoints for fosfomycin and azithromycin disk diffusion tests for Salmonella spp. QC ranges have been established or studies are underway for a range of control stains and agents.

EUCAST website

There were approximately 54,000 visitors per month in 2014. Updates include new breakpoint tables, QC tables, reading guides and methodology sections and revised ‘Frequently asked questions’ ‘Compliance of manufacturers’ and ‘Validation of MIC and inhibition zone diameter correlations’ sections. ‘Translations’ and ‘Contacts’ sections have been added.

EUCAST MIC and zone diameter website

Additional MIC and zone diameter distributions and MIC-zone diameter correlations have been added and some changes made to simplify use of the MIC database.

EUCAST documents

SOPs have been published for preparation and handling of minutes (SOP 7.0), format and update of documents (SOP 8.0) and procedures for establishing zone diameter breakpoints and quality control ranges (SOP 9.0). The development of rationale documents giving the background data and the rationale for EUCAST breakpoints continues.

Antifungal Susceptibility Testing Subcommittee [AFST]

The AFST continued with their work on breakpoints and methods for antifungal agents. The General Committee met once in 2014, during ECCMID, and the Steering Committee met twice. The structure of the Steering Committee has been reorganized to ensure a core of members with expertise but also some rotation of members (SOP 4.1).

A new azole agent is currently in the breakpoint setting process. Amphotericin B, posaconazole and voriconazole breakpoints for Candida spp. are currently being reviewed and Cryptococcus will also be included.

The document ‘Method for the determination of broth dilution minimum inhibitory concentrations of antifungal agents for conidia forming moulds’, has been revised (E.Def 9.2) and the rationale document on itraconazole breakpoints for Candida spp. is now available. An updated table of breakpoints for antifungal agents, version 7.0, has been released.

Subcommittee on antimicrobial susceptibility testing by whole genome sequencing

This Subcommittee is currently being established (chair Alasdair MacGowan).

Veterinary Committee on Antimicrobial Susceptibility Testing [VETCAST]

This committee is currently being established (chair Dik Mevius).

EUCAST expert rules

These are being updated by the Steering Committee and proposals will be subject to wide consultation.

Guidelines for companies on data for new anti-mycobacterial agents

A workshop (chair Emmanuelle Cambau) between EUCAST, the ESCMID Study Group for Mycobacterial Infections (ESGMYC) and EMA, was held in November 2014 with the objective to develop guidelines for companies submitting new antimycobacterial agents.
In the face of rampant antimicrobial resistance development and the dwindling trickle of new antibacterial compounds, ESCMID arranged a three day conference on ‘Reviving Old Antibiotics’ in Vienna, Austria, between 22 and 24 October 2014. Almost 300 researchers, academics and representatives from WHO, EMA, ECDC and national medicines’ agencies as well as pharmaceutical companies reviewed the increasing threat of antimicrobial resistance (AMR), and explored the potential benefits and disadvantages of using old, off-patent antibiotics that may still be effective against some pathogens resistant to more modern treatments, with a view to creating an action plan to take these old antibiotics into the future.

“We had a very fruitful and productive conference,” said Ursula Theuretzbacher, founder of the Center for Anti-Infective Agents, Vienna, Austria, and Chair of the Scientific Programme Committee of this conference.

“It was the first of its kind to focus on the revival of old antibiotics as a viable tactic in confronting the threat of increasing AMR. We have known for some time that old generations of antibiotics, developed as long as 55 years ago, can be effective in certain clinical situations where multi-drug-resistance has been found.”

However, these old drugs were not developed according to current standards of science, research and practice. Without a solid strategy to re-develop these old drugs and rigorously test them according to today’s standards, harm may be done to patients or the development of multi-drug-resistance may be stimulated even further. There’s a pressing need to incorporate our current scientific knowledge into regulatory frameworks and practice that will make these old antibiotics properly effective as an interim measure, pending development of a whole new generation of drugs to tackle AMR. The conference aimed to create a roadmap for taking old antibiotics forward and putting them to work again, safely and effectively.

Over the course of the three-day conference delegates worked together to identify gaps in knowledge, reviewed ethical issues such as the problems of using antibiotic therapies on individual patients versus responsibility for the welfare of future society, clinical study issues; access to antibiotics in the developing world, availability and stewardship of old antibiotics, and the impact of AMR on public health.

Based on these discussions, conference delegates agreed a set of priorities for action:
• To identify and prioritize candidates that should be taken forward.
• For candidate antibiotics, to establish current quantities, global availability and dispersal, quality, appropriateness for human and non-human use, and to carry out the necessary studies to fill the knowledge gaps
• To engage in a co-ordinated effort to disseminate this information and communicate with all stakeholders – including governments, donors, academics, researchers, health professionals and the pharmaceutical industry - to build support and gain consensus on the need for rapid action to explore the benefits of using old antibiotics to tackle AMR.

“The ESCMID conference on reviving old antibiotics was very timely,” said Gunnar Kahlmeter, ESCMID Communications Officer and Past President. “The challenge now is to find much needed resources – time, finances, people – to fast track everything that needs to be done in terms of improving the knowledge of these potentially life-saving drugs and bringing it from research bench to bedside in record time.”

A full report from the conference, with recommendations and action plan, will be published.

ESCMID Conference: Reviving Old Antibiotics
The 3rd ESCMID Conference on Vaccines, which was primarily devoted to the topic "Vaccines for Mutual Protection," took place from 6–8 March 2015 in Lisbon, Portugal. Top vaccine experts from all parts of the world (36 speakers from 17 countries), presented findings to better understand and control a number of vaccine-preventable infectious diseases. More than 220 participants from 52 countries around the world exchanged ideas on new therapeutic approaches, recommendations and latest clinical data.

**Mutual protection – key to disease prevention**

During the opening symposium, key exponents from international organizations outlined the role mutual protection plays in disease prevention. Liz Miller, a UK epidemiologist at the Health Protection Agency in London who also acts as WHO consultant, showed how herd immunity may protect older generations against influenza and pneumococcal disease. She also highlighted the importance of being prepared for resurgences so that confidence in the benefit of vaccination programs would not be undermined.

Robb Butler from the WHO outlined the challenges of translating a global vaccine plan into a regional context to achieve a mutual response to shared threats in the European region. He presented the European Vaccine Action Plan (EVAP), which aims to address immunity gaps due insufficient access as well as vaccine hesitancy and refusal. Butler explained that the challenge is to make sure that the programme is integrated with other health interventions and changes in health systems.

Pier Luigi Lopalco, Head of ECDC’s Scientific Assessment Section, explained the role of surveillance in assuring mutual protection. Lopalco explained how data is collected and how outbreaks of vaccine-preventable diseases are detected and investigated. Lopalco urged participants to improve disease and vaccine monitoring, which not only means following up vaccine effectiveness during post-marketing, but also monitoring public confidence in immunization programs.

**Acceptance of vaccines – safety**

Trust, confidence and acceptance were also the buzz words in the session dedicated to safety issues in vaccines and their impact on mutual protection. Litjen Tan, Chief Strategy Officer at the Immunization Action Coalition and Co-chair of the United States Adult and Influenza Immunization Summit, outlined how vaccine confidence evolved in the US. He recommends involving parents in vaccination decisions and supporting those who vaccinate their children so they may act as advocates in their communities.

Pauline Paterson and Heidi Larson from the London School of Hygiene and Tropical Medicine warned that it is important to understand the reasons behind vaccine hesitancy. They concluded that strong confidence in vaccines can help sustain vaccination coverage and – if above herd immunity threshold – can also help protect the community, while low confidence may have a detrimental impact on public health.

Frederic Bounder from Maastricht University showed how the unvaccinated population impacts the community they live in as even the shadow of a doubt may be enough to undermine trust. Therefore providers have to understand and adapt risk communication to the perceived risks of the population and society’s worries, Bounder concluded.

**Fighting poliovirus and pertussis**

In the session on recent threats of poliovirus Jacob Moran-Gilad from the Ministry of Health and Ben-Gurion University of the Negev in Beersheba, Israel, described the public health response to a silent introduction of wild-type poliovirus 1 into Israel. Paloma Carrillo-Santistevé from the ECDC’s Vaccine Preventable Disease Programme outlined what is done to protect the population in Europe against polio. She concluded that there is no immediate risk, given the generally high levels of sanitation and hygiene in the EU. David Salisbury, a vaccination specialist at the UK Department of Health and the WHO, outlined the strategy on polio eradication and endgame, including a rationale and timetable for switching from IPV to OPV everywhere within a two-week period and strategies for containment.

In the pertussis session, top vaccine specialist Stanley Plotkin from the US outlined how pertussis is resurgent in many countries. The incidence of pertussis increased after the whole-cell vaccine had been replaced by an acellular vaccine, which may cause post-vaccination antibodies to wane faster, Plotkin said, adding that other reasons may include strain change decreasing effective transmission and transmission in childhood leading to less natural boosting and more susceptibility in older persons. Camille Locht shared his assessment of a new pertussis vaccine, a novel intranasal vaccine he is helping to develop at the Institut Pasteur in Lille, France. Susanna Esposito from the Paediatric Highly Intensive Care Unit at the University of Milan, Italy, showed that adults are an important source of infection for infants. She recommends antepartum and cocooning programmes to control the spread of disease.

**Lively debates**

The sessions on how to effectively fight pertussis, poliovirus, viral gastroenteritis, human papilloma virus (HPV) or varicella zoster virus in Europe – to name just a few – generated a great deal of interest. But the conference also featured discussions on pandemic vaccination, transmission of influenza as well as a session on how to achieve meningococcal control.

The most extensive discussions ensued in the two popular pro-con debates. In the session on indirect effects of pneumococcal conjugate vaccines Marc Bonten from the University Medical Centre in Utrecht argued that these vaccines are not only effective and safe; vaccination would also be highly cost effective, particularly if medium and high-risk individuals are targeted. Ron Dagan from the Pediatric Infectious Disease Unit at the Soroka University Medical Center in Beersheba, Israel, on the other hand, argued that there is a little benefit in countries with high immunization rates due to the relatively extensive indirect protection for adults from vaccinated children.

A similar discussion also took place on a universal varicella zoster virus (VZV) vaccination, which sparked a lively discussion in the closing session. Adam Finn from the Bristol Children’s Vaccine Centre presented hospitalization and mortality data showing that the VZV vaccine works, and that most complications occur in otherwise healthy children. As varicella can potentially be prevented for more than 30 years, it is time to prevent it, Finn concluded. Hanna Nohynek from the National Institute of Health and Welfare in Finland, however, reasoned that universal VZV vaccination is not advisable from a public health perspective because, despite the safety of the individual vaccines, uncertainty remains about its benefits, cost effectiveness and its potential to boost herpes zoster incidence. A comprehensive summary can be found on the conference website at www.escmid.org/research_projects/escmid_conferences/vaccines_conference.
Brazil – setting the stage

ESCMID’s goals for collaborating with Brazilian organizations are to include Brazilian CM/ID experts in ESCMID activities and for ESCMID to support Brazilian/South American activities.

The first step was to identify potential collaborative societies in the fields of:
- Tropical Medicine
- Clinical Microbiology
- Infectious Diseases
- Healthcare-associated Infections

With 279 Brazilian delegates attending ECCMID 2014 and currently 77 Brazilian ESCMID members, Brazil is well represented within ESCMID/ECCMID. We envision finding ways to link Brazilian project ideas to the ESCMID Study Groups ESGNI, ESGARS, EFWISG and ESGCD, focusing on nosocomial infections, resistance issues, food and water-borne infections and C. difficile, respectively.

Another way of developing ESCMID’s cooperation with South American CM/ID specialists is to participate in local conferences. A 2-hour joint symposium will be held at the Brazilian Congress of Infectious Diseases in Gramado, Brazil, 26–29 August 2015, where two Brazilian and two ESCMID speakers will give their talks.

Brazilian institutes are also very keen on becoming ESCMID Collaborative Centres and joining the new Mentorship initiative. We are expecting the first applications in 2015.

Russia – consultation activities

The Russian Federation has been consulting with ESCMID about experts in tuberculosis and antimicrobial resistance surveillance. In addition to ESCMID’s affiliation with IACMAC in Moscow, there have been active consultations with WHO-Russia and the Russian Ministry of Health. These are still ongoing and now represent an essential part of ESCMID’s strategy in that country.

China – joint conference

The ‘International Conference on Infections and their Prevention’ organized by ESCMID, International Society for Infectious Diseases (ISID), Lancet Infectious Diseases and the Chinese Medical Association (CMA), was held in Beijing (China) from 19–20 September 2014 and was very successful. Murat Akova, Mario Poljak, Jesús Rodríguez-Baño and Giuseppe Cornaglia actively contributed to the conference. In addition, a half-day conference ‘Best of ECCMID 2014’ was organized for 19 September 2014.

Several collaborative centres have recently been established in China and there are currently five fully approved centres with proven English language capabilities and the appropriate scientific background. A follow-up meeting with CMA and ESCMID to further develop their close cooperation is scheduled at ECCMID 2015. Furthermore, the EUCAST hybrid session involving live video streaming with simultaneous translation in China promises to be an exciting, cutting-edge event.

Future activities under discussion are:
- The translation of recent ESCMID guidelines into Chinese
- More Chinese sessions at ECCMIDs with possible video transmission to China and simultaneous translation
- An ESCMID Summer School 2016 in Beijing, China
- Organization of a EUCAST national antimicrobial susceptibility testing committee in China

Cuba – overview of activities

Rafael Canton participated in a one-day symposium at the VIII Congresso Cubano de Microbiologia y Parasitologia, in Havana, Cuba (14–16 October 2014).

He gave two talks on the following topics:
- Multiresistant Enterobacteriaceae, carbapenemase epidemiology and influence on therapeutics
- EUCAST versus CLSI: differences and similarities

Around 80 delegates attended the ESCMID-sponsored symposium with active participation during a questions and answer session. One of the main goals of his visit to Cuba was to influence the development of a national antimicrobial susceptibility testing committee (NAC) as was achieved in 2014 in Morocco.

Details of the International Affairs Subcommittee’s activities during 2014 are outlined on the following pages.
### Forthcoming Events

**Postgraduate Education Courses and Workshops**

- **Indigenous Parasitic Diseases in Europe**
  - 6 – 8 May 2015
  - Pavia, Italy
  - ESCMID Postgraduate Technical Workshop

- **Management of Infections in the Critically Ill Patients: a Hands-on Course on Current Challenges and Future Directions**
  - 8 – 9 May 2015
  - Grado, Italy
  - ESCMID Postgraduate Education Course

- **Educational Programme on Transplant Virology**
  - 11 – 12 Jun 2015
  - Lausanne, Switzerland
  - ESCMID Postgraduate Education Course

- **Clostridium Difficile: Practical Aspects of Diagnostics, Typing and Comparative Genomics**
  - 2 – 4 Sep 2015
  - Maribor, Slovenia
  - ESCMID Postgraduate Technical Workshop

- **Improving Patient Safety: the Neglected Impact of Age and Gender**
  - 2 – 4 Sep 2015
  - Barcelona, Spain
  - ESCMID Postgraduate Technical Workshop

- **Moving Antimicrobial Stewardship Forward in Special Population Settings**
  - 24 – 25 Sep 2015
  - Fieren-Voltaire, France
  - ESCMID Postgraduate Education Course

- **Carbapenemases in Enterobacteriaceae: Challenges and Preparedness**
  - 24 – 26 Sep 2015
  - Verona, Italy
  - ESCMID Postgraduate Education Course

- **Rapid NGS for Identification and Typing of ESBL and CRE**
  - 7 – 9 Oct 2015
  - Groningen, Netherlands
  - ESCMID Postgraduate Technical Workshop

- **Microbiology for Diagnosis of Infectious Diseases: ABC and XYZ**
  - 20 – 22 Nov 2015
  - Beijing, China
  - ESCMID Postgraduate Education Course

- **Improving the Dosage of Old Antibiotics**
  - 29 Nov – 1 Dec 2015
  - Nijmegen, Netherlands
  - ESCMID Postgraduate Education Course

**ESCMID Summer School**

- An intense one-week course covering diverse topics in the infection field. The high faculty-student ratio and the high level of interactivity make it so popular.

- 4 – 11 Jul 2015
  - 14th ESCMID Summer School
  - Istanbul, Turkey

**ESCMID Conferences**

- Get the latest news about your field of work delivered from selected experts. Exchange ideas with your colleagues on hot topics.

- 9 – 12 Mar 2016
  - ESCMID-ESGEM Conference
  - 11th International Meeting on Microbial Epidemiological Markers
  - ‘Navigating Microbial Genomes: Insights from the Next Generation?’

**Future ECCMIDs**

- 9 – 12 Apr 2016
  - 26th ECCMID
  - Istanbul, Turkey

- 22 – 25 Apr 2017
  - 27th ECCMID
  - Vienna, Austria

- 21 – 24 Apr 2018
  - 28th ECCMID
  - To be announced

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More detailed information can be found on the ESCMID website: [www.escmid.org](http://www.escmid.org)