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ESCMID Yearbook
Annual publication of the European Society of Clinical Microbiology and Infectious Diseases

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At the moment when this Yearbook goes to the printer, the Milan Convention Centre is not finished, yet. And the ongoing flow of last-minute information, programme fine-tuning, galley proofs and logistic adaptations is – as I write this Editorial – still so demanding to make one wonder whether in a few days everything will be actually worked out.

But, as usual, these hectic moments will not be perceived by all those attending our Congress once they will arrive to Milan to register for the busiest four days of the ESCMID year. And the figures about the abstracts received as well as the available projections about the number of attendees and countries represented both seem to show that this edition of our annual congress will be the most successful ever.

Given the scientific programme put together by Jordi Vila and his dream team, it will be no wonder if the Congress is also the most successful from the scientific side (clearly the most important one), this way matching and exceeding the expectations arisen after the last edition in Vienna.

That this occurs in these enduring times of economical crisis and in the most problematic year of our recent Society life, with the huge organizational problems put forward by the closing of ESCMID in Germany, is an unequivocal sign of vitality, success and prosperity.

The dissolution of ESCMID Germany, taking place right at the end of this Congress, will mark an obvious landmark, but everything has been done to make it smooth and almost not visible to all those enjoying our educational, professional and scientific activities. The next edition of this Yearbook will certainly certify whether this promise has been kept.

Italy is my country, although the pictures scattered throughout this yearbook show how often ESCMID drives me away from it... Thus, I am particularly glad that our success coincides with the ECCMID returning in Milan. And I am proud that my country can show how its involvement in infectious diseases does not consist only in spreading them but mostly in studying and combating them, consistently with a two-millennia-old tradition of excellence in microbiology, clinics and infection control.

Our ECCMID has now achieved the status of the largest congress worldwide in the Infection sciences field. It is at one time a scientific meeting, a get-together and an opportunity for socialising, a possibility for confrontation, an ideal venue for planning and debriefing...

We would love that – like it used to be during the ancient Olympics – it could be an opportunity for everybody to focus less on their hyper-competitive and stressful rhythms, and to plainly enjoy this unique opportunity for sharing and growing at ECCMID, facilitated by a first-class cultural environment and by the flawless organisation that is the worldwide reckoned hallmark of our annual meeting.
### Executive and Membership Offices

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**Didier Raoult**  
Marseille, FR  
Editor-in-Chief, *CMI*  

**Andrea Novelli**  
Florence, IT  
21st ECCMID / 27th ICC President  

**Johnathan Cohen**  
Brighton, UK  
22nd ECCMID President  

**Communication, Publications and Awards**  

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| **Judith Zimmermann**  
Finance and Administration, Secretary to the Board |        |               |           |
The Society

Since 1996, we have more than doubled our membership. Along with the members’ growth came the increase of participants at our annual congress, ECCMID. The growth of our society and its main congress allows us to collaborate with and support activities in many fields of clinical microbiology and infectious diseases. The ESCMID Study Groups serve as scientific expert bodies and contribute to educational activities, to the work of EUCAST and in the preparation of ESCMID Guidelines. Since the last Yearbook was published, ESCMID has incorporated three new Study Groups.

ESCMID participates in large European projects such as EUCAST and TROCAR. The Society is also expanding in the professional affairs arena addressing issues such as training, professional accreditation, professional networking and recently equal opportunities. All of these activities involve a large degree of interaction with other scientific or professional bodies. In the past year ESCMID has also been involved in various joint initiatives with other societies and organisations throughout the world, so our range of activities extends far beyond the borders of Europe.

ESCMID was again able to increase funding to support many research projects and scientific endeavours in 2010. Travel grants for ECCMID and other ESCMID activities, such as summer school, postgraduate courses and scientific meetings arranged jointly with other societies were generous. The ESCMID Observership and Collaborative Centre programmes have grown in popularity and more members take the opportunity to improve their practice in infectious diseases and/or clinical microbiology by visiting centers in other countries. For 2011, we have again increased our budget in that field, which allows additional colleagues to tackle important projects and to learn from partners abroad.

ESCMID membership following the closing of ESCMID Germany and the birth of ESCMID Switzerland

Following an electronic vote where almost all of the participating Society members (97.23% in favor) supported the dissolution of ESCMID e.V. the Executive has wrestled with a large number of legal issues pertaining to the closing of ESCMID Germany, securing our funds in Germany by establishing an ESCMID friendly society and opening a new Society in Switzerland. Difficulties looked almost insurmountable at times but over the last few weeks solutions have been brokered. Confidently we now enter a new ESCMID year and the closing of ESCMID Germany will be finalised following a lengthy legal procedure. Immediately after ECCMID Milan, ESCMID Switzerland will offer all members of ESCMID e.V. the chance to become members of ESCMID Switzerland with identical benefits. In addition, all ECCMID Milan attendees will be offered a free 2011 membership in ESCMID Switzerland giving them the right to vote in the upcoming election for new ESCMID Executive members in 2012. The free memberships can be upgraded to full memberships with all benefits at any time after that. Special membership packages for young members will be offered during the second half of 2011.

The Organisation

The Assembly of Members is the supreme body of the Society. All members in good standing are entitled to attend the annual Assembly which is held during the ECCMID. In addition, we have the chance to use electronic balloting for members’ consultation, which allows us to address the entire member group at once. The general strategy is defined by the Executive Committee, and then approved by the Assembly of Members. On a more practical level, the subcommittees act as specialist groups in their specific portfolios, while Study Groups are specialty boards each focusing on a scientific subject.

As a society for professionals, ESCMID has a broad range of activities in the following areas: medical education; scientific conferences and congresses; publications and communications; provision of awards and grants as well as the advancement of medical practice and professional affairs. This is made possible by the Executive Committee, the subcommittees and a large number of contributing individuals with a scientific or clinical focus.

This wide network of specialists reaches far beyond Europe. We have a large number of overseas members, contributing in various activities or enjoying benefits. We are still a European Society, but diseases are not stopped by borders or oceans. Globalisation has increased not only international travel and trade, but also the spread of diseases. ESCMID benefits from the same factors, since we can unite a truly global network of specialists to improve diagnosis and treatment of infection-related diseases.

On the operational side, staff members at the ESCMID offices proudly support members, subcommittees, European projects and the Executive Committee. Our multi-national group collaborates with member specialists in clinics and laboratories and external partners to successfully carry out various projects and initiatives. Staff members include scientists and business specialists alike, so we can cover all areas of ESCMID activities. Although run as a non-profit organisation, ESCMID’s honorary contributors and employed office staff aim to carry out the Society projects with utmost efficiency and effectiveness to the benefit of the Society. A large group of external partners supports us in various aspects such as website hosting, local course and congress organisation, and other services.
Introduction

Over the years, the ESCMID European Council has developed into a well-established and valuable resource for the Society. It includes European national and specialist societies, which have signed an affiliation agreement with ESCMID with the objective to promote the wider interests of both organisations. Affiliated societies are normally represented by their presidents or a nominee. These representatives make up the European Council which meets during ECCMID.

A list of affiliated societies can be found on Page 9 and on the website (www.escmid.org/council). Since last year, four new affiliated societies have joined, and now 66 societies representing clinical microbiology, infectious diseases, antimicrobial chemotherapy or specialised fields within one or several of the main fields are under the ESCMID umbrella. This is encouraging, and the affiliated societies now constitute a powerful body.

Several of ESCMID’s special programmes, ESCMID Collaborative Centres, ESCMID Observerships, travel grants and awards programmes, the Summer School and postgraduate courses, offer good opportunities for collaboration between affiliated societies and ESCMID.

European cooperation

During the past two years, in my role as Secretary General and Chairman of EUCAST, I have visited many European countries and national societies to form closer ties with ESCMID and to help broker a transition from previous susceptibility-testing standards to EUCAST standards. On invitation I have so far visited Austria, Belgium, Denmark, Estonia, Finland, Greece, Hungary, Ireland, Italy, Norway, Spain, the Netherlands, the UK, and Turkey. In the coming twelve months this work will continue.

ESCMID membership of affiliated societies and their members

With the opening of ESCMID Switzerland all affiliated societies are offered to sign up with the new ESCMID on equal terms as with ESCMID Germany, which is now closing. We are preparing to launch upgraded ‘affiliation membership packages’ during the second half of 2011 and will seek your opinion on these early in autumn. The affiliated societies constitute a potential member base of almost 30,000 professionals. International interaction between colleagues would be greatly facilitated by a common professional base through ESCMID, complementing our respective national bases.

National AST committees through ESCMID/EUCAST

ESCMID and EUCAST have encouraged European countries, often through national societies, to form national antimicrobial susceptibility-testing committees (NAC) to help structure national strategies for antimicrobial susceptibility testing, to liaise with EUCAST and take on education and training of staff at a national level. We are happy that many have heeded the call. See the separate article on ‘EUCAST’ on page 48.
European Council members

Austria
• Österreichische Gesellschaft für Hygiene, Mikrobiologie und Präventivmedizin
• Österreichische Gesellschaft für Infektionskrankheiten

Belgium
• Belgian Society of Infectious Diseases and Clinical Microbiology

Bosnia and Herzegovina
• Association of Infectiologists in Bosnia and Herzegovina

Bulgaria
• Bulgarian Association of Microbiologists

Croatia
• Croatian Society for Infectious Diseases
• Croatian Society for Medical Microbiology and Parasitology

Cyprus
• Cyprus Society of Chemotherapy and Infectious Diseases NEW!
• The Cyprus Microbiology-Biopathology Association NEW!

Czech Republic
• Czech Medical Society for Infectious Diseases
• Czech Society for Epidemiology and Microbiology

Denmark
• Danish Infectious Disease Society
• Danish Society for Clinical Microbiology

Finland
• Finnish Society for Clinical Microbiology
• Finnish Society for the Study of Infectious Diseases
• Infectious Disease Society of Finland

France
• Société Française de Microbiologie
• Société de Pathologie Infectieuse de Langue Française

Germany
• Deutsche Gesellschaft für Hygiene und Mikrobiologie
• Deutsche Gesellschaft für Infektologie
• Deutsche Vereinigung zur Bekämpfung der Viruskrankheiten NEW!

Greece
• Hellenic Society for Chemotherapy
• Hellenic Society for Infectious Diseases
• Hellenic Society for Microbiology

Hungary
• Hungarian Society of Infectious Diseases and Clinical Microbiology

Iceland
• Icelandic Infectious Diseases Society

Ireland
• Irish Society of Clinical Microbiology

Israel
• Israeli Society for Infectious Diseases

Italy
• Associazione Microbiologi Clinici Italiani
• Italian Society of Chemotherapy
• Italian Society for Microbiology
• Società Italiana di Malattie Infettive e Tropicali
• Società Italiana di Virologia

Latvia
• Association of Latvian Medical Microbiologists NEW!

Lithuania
• Lithuanian Society for Infectious Diseases

Macedonia
• Macedonian Infectious Diseases Society
• Society of Macedonian Microbiologists

Netherlands
• Dutch Society for Medical Microbiology
• Netherlands Society for Medical Mycology

Norway
• Norwegian Society of Infectious Diseases
• Norwegian Society for Medical Microbiology

Poland
• Polish Society of Epidemiology and Infectious Diseases
• Polish Society of Microbiologists

Romania
• Romanian Society for Medical Mycology and Mycotoxicology
• Romanian Society for Microbiology

Russian Federation
• Interregional Association for Clinical Microbiology & Antimicrobial Chemotherapy

Serbia
• Microbiology Section, Serbian Medical Association

Slovak Republic
• Slovak Society for Clinical Microbiology of the Slovak Medical Association

Spain
• Sociedad Española de Enfermedades Infecciosas y Microbiología Clínica

Sweden
• Swedish Society of Infectious Diseases
• Swedish Society of Medical Microbiology

Switzerland
• Swiss Society for Infectious Diseases

Turkey
• Infectious Diseases Society of Turkey
• Turkish Society of Clinical Microbiology and Infectious Diseases
• Turkish Society of Hospital Infection and Control
• Turkish Society for Infectious Diseases and Clinical Microbiology Specialty
• Turkish Society of Microbiology

United Kingdom
• British Infection Association
• British Society for Antimicrobial Chemotherapy
• Scottish Microbiology Association
• Welsh Microbiological Association

Austria/Germany/Switzerland
• Paul-Ehrlich-Gesellschaft für Chemotherapie

Europe
• European Meningococcal Disease Society

Scandinavia
• Scandinavian Society of Antimicrobial Chemotherapy
Number of members
As our biggest educational event, the European Congress of Clinical Microbiology and Infectious Diseases, is held later than usual this year, the waves of registrations washed new members into ESCMID in January and February 2011 instead of December 2010. Thus, the year-end figures are slightly lower than last year. The constantly high level of scientists actively benefitting from our wide range of offerings, such as Clinical Microbiology and Infection, our Online Library, many grant and support possibilities as well as our numerous educational events covering an enormous variety of topics, show the demand for such services.

Best represented countries
We currently have members from 107 countries, seven more than last year, which shows that ESCMID is reaching out far beyond Europe. Strongholds again are the UK, the Netherlands and Germany, followed by Italy, Greece and France, but many smaller countries are well represented, too.
Age repartition
We continue to see the steady increase in young members, confirming their need for support at an early stage in their career. The decade of smartphones brings us even more interest in our online offerings while the basic requirements of young and more senior members are quite similar, just the means they use are different. Access to information and interaction is highly valued and necessary for fast career advancement.

Distribution among continents
As in 2009, 79% of the ESCMID members live in Europe. Yet, the many members from areas outside of Europe indicate that ESCMID’s continued efforts to attract members worldwide has met with success.
ESCMI as a non-profit organisation must raise sufficient funding for all its activities and offerings. In the past years we were always willing and eventually able to increase our investment into science and education. As shown in Figure 1, the overall expenses increased substantially. For the year 2011, our budget foresees expenditures of almost EUR 1.5 million in the areas of science, professional affairs and education (Figure 2). With the new budget ESCMID will not only offer support for many known projects and affairs as done previously but also will increase funding for scientific and educational activities including Study Groups, conferences and workshops, practice guidelines, awards and fellowships.

Much of the funding in the past and in the future has been and will be possible through the continued income generated by our annual congress which is a great success in this era of economic crises. To maintain this level of activity we need highly professional personnel and a modern management and administration. We plan to find new co-workers in several areas in 2011 – 12. In particular, we need and plan to improve our information and communication services and capacity.

The year 2010 was a good year. The income was better than we had calculated in our budget. We were able to invest in manpower, our Online Lecture Library, Observerships and Grants. The year 2011 will be a special year. We have to develop an acceptable and efficient method to support the Society’s activities through the changes associated with the dissolution of ESCMID Germany and the new establishment of ESCMID Switzerland.

Our financial planning undergoes re-evaluations and adaptations both on the income and expense side. We are confident that our members, Affiliated Societies and corporate partners will continue to take advantage of the numerous ESCMID offerings.
The ESCMID Awards are conceived as an incentive for further research at the highest scientific level. Over the last years, the Society has increased both the type of award or funding and the overall number given. This commitment required a corresponding overall increase in funding, exceeding EUR 400’000 in 2010 with a six-fold increase as compared to only four years ago.

Rino Rappuoli is the Excellence Awardee for 2011. The Award reckons his life-long commitment to research and his outstanding results in the field of Vaccinology, also confirming the ESCMID growing interest in and commitment to this discipline.

The Young Investigator Awardees for 2011 are Surbhi Malhotra-Kumar and Annelies Zinkernagel. Their researches focus on cutting-edge diagnostics and on mechanisms of pathogenesis, respectively, thus witnessing how ESCMID interests and achievements span from basic to applied research with equally exceptional relevance.

Eighteen young colleagues received research grants to work on their proposed basic or applied research projects. Seven persons received training fellowships to carry out their projects in a foreign country and/or to get first-hand experience with best clinical or laboratory practice. We are pleased to present awardees and recipients of funding in 2011 below.

In addition to the above, ESCMID supports young colleagues with merit-based travel grants and/or free registration to enable them to attend ECCMID. For the ECCMID in Milan, 147 persons received travel grants and/or free registration to present results of their work (EUR 64’300). ESCMID supports its young members also with attendance grants for ESCMID conferences, the Summer School, Post-Graduate Educational Courses or other educational activities. In 2010 over EUR 125’000 was spent for this purpose.
**Award for Excellence in Clinical Microbiology and Infectious Diseases**

![Rino Rappuoli](image)

**Rino Rappuoli**
Born 1952 in Siena, Italy; Global Head Vaccines Research, Novartis Vaccines & Diagnostics, Siena, Italy.

In the past decade Rino Rappuoli has become one of the major experts in vaccines and vaccinology unanimously recognised worldwide. Thanks to his contributions and original thinking, he has changed the way vaccines are made and the way they are conceived in the research arena, and he has had a great impact on the public health perspective. His contributions in the field of vaccinology encompass broad areas. He characterised the non-toxic mutant of diphtheria toxin (referred to as CRM197) that is now utilised as a carrier molecule for many efficacious conjugate vaccines, such as those against pneumococci, *Haemophilus*, meningococci, etc. His original work paved the way to the genetic detoxification of bacterial toxins which led to the development of a novel vaccine against pertussis and to development of a family of strong mucosal adjuvants based on *Escherichia coli* heat-labile enterotoxin. He first conceived and applied the notion of reverse vaccinology, based on the systematic mining of microbial genomes. This novel experimental approach has allowed the development of a vaccine against group B meningococci which is showing now its efficacy in clinical studies in very young children. This new methodology is now being successfully applied to the development of vaccines to other bacteria, such as group A and B streptococci, pneumococci, etc. Last but not least, his work on the development of novel adjuvant allowed the registration of the first oil-in-water adjuvant (MF59) for human use with an influenza vaccine. This work represented the basis for the development of efficacious vaccines against pandemic influenza, both of avian and of swine origin. In addition to his active involvement in the private sector, he has always been actively involved in aspects related to development of vaccines for developing countries. For several years Rino Rappuoli served in and chaired various committees, including the Global Alliance for Vaccines and Immunization (GAVI), dealing with vaccine development. More recently, he was instrumental in the creation in 2008 of the Novartis Vaccines Institutes for Global Health (NVGH), whose mission is the development of vaccines against neglected diseases.

Rino Rappuoli is the author/co-author of more than 500 scientific publications, the majority in peer-reviewed journals. He has edited more than twelve books in various fields of vaccinology.

The excellence of his work has been recognised by a long series of international awards, such as the Paul Ehrlich and Ludwig Darmstaedter Prize in 1991, the European Federation of the Pharmaceutical Industries Association Award in 1992, the Arima Award for Applied Microbiology in 2002, the Gold Medal Award by the President of the Italian Republic in 2005, the Miami Nature Biotechnology Winter Symposium Special Achievement Award in 2007, the Albert B. Sabin Gold Medal Award in 2007, among others. In addition, in 2005 he was elected as a full member to the National Academy of Sciences of the USA.

Rino Rappuoli will be presented the ESCMID Excellence Award by Giuseppe Cornaglia, ESCMID President and Chairman of the Awards Subcommittee, on Sunday, 8 May 2011. During the ceremony he will give his award lecture: ‘Vaccines, medicine and public health in the XXI century’.
Young Investigator Awards for Research in Clinical Microbiology and Infectious Diseases

Surbhi Malhotra-Kumar
Born 1972 in Sirsa, India; PhD, Senior Research Fellow at the Laboratory of Medical Microbiology, Vaccine and Infectious Disease Institute, University of Antwerp, Belgium, in recognition of her outstanding achievements in bridging the gap between basic and ecologic research and in trying to link antibiotic use to the emergence and persistence of antibiotic resistance.

Surbhi Malhotra-Kumar will be presented her award during the ESCMID Young Investigator Awards Session on Tuesday, 10 May 2011. During the session, she will give a talk on ‘Changing perspectives on antibiotic therapy: from proving the obvious to exploring innovative strategies’.

Research Interests
Surbhi Malhotra-Kumar completed her Masters in Medical Microbiology in 1998, Masters in Molecular Biology in 2003; and a PhD in Medical Microbiology in 2005 under the supervision of Herman Goossens. The research of Surbhi Malhotra-Kumar has focused on the molecular epidemiology and genetics of resistance to common groups of antimicrobials in oral streptococci. Applying molecular biological techniques on oro-pharyngeal streptococcal flora in healthy individuals as a model, she demonstrated that antibiotic use is the single most important driver of antibiotic-resistance \textit{in vivo}, that antibiotics belonging to the same class can differ widely in resistance gene selection, and that differences in predominance of certain resistance genes in geographically distinct areas might be linked to the preferential use of specific antibiotic subclasses. Her current research interests include studying the impact of antibiotic use on the naso-oro-pharyngeal and intestinal microbiome, mechanisms of biofilm formation, animal models of infection, and developing rapid diagnostic assays for pathogens causing community-acquired and nosocomial infections.

Annelies Zinkernagel
Born 1972 in Basel, Switzerland, Attending Senior Physician, Division of Infectious Diseases and Hospital Epidemiology, University Hospital Zurich, Switzerland, in recognition of her impact on our understanding of critical aspects of the interaction between streptococci and staphylococci and the host innate immune system.

Annelies Zinkernagel will be presented her award during the ESCMID Young Investigator Awards Session on Tuesday, 10 May 2011. During the session, she will give a talk titled ‘Know your enemy – Group A streptococcal virulence factors’.

Research Interests
Annelies Zinkernagel completed her training in Internal Medicine (2002) and Infectious Diseases in 2005 at the University Hospital of Zurich, Switzerland, followed by a PhD in 2009 and postdoctoral fellowship in the laboratory of Victor Nizet in San Diego, California, USA. There she studied group A streptococcal virulence factors and how these allow the bacteria to evade the host’s innate immune system. Currently she combines her clinical and laboratory expertise and works as an attending infectious disease specialist at the University Hospital of Zurich, Switzerland, where she also leads an independent research group. Her translational research focuses on understanding bacterial virulence factors and corresponding innate immune response pathways. Improved knowledge on host pathogen interaction may allow to develop novel treatment options that can either neutralize the bacterial virulence factors or boost the host defense and improve outcome in patients suffering from infectious diseases.

The Young Investigator Awards are sponsored by Pfizer.
ESCMID Excellence Training
Awardees 2011

Axel Hamprecht, Cologne, Germany
During his medical studies he developed a keen interest in infectious diseases and tropical medicine and did internships in Botswana and at the WHO in Geneva. He pursued medical training in France, Switzerland and the UK and later completed his MD thesis at the Institute for Medical Microbiology of the Charité, Berlin. After his clinical term, Axel became a trainee in microbiology at the Institute for Medical Microbiology, Immunology and Hygiene of the University Hospital Cologne.

Hilmir Asgeirsson, Huddinge, Sweden
The recipient studied medicine at the Faculty of Medicine of the University of Iceland from September 1999 to June 2005. After his intern year he worked three months as a volunteer in Ethiopia. From January 2007 to January 2010 he did his residency in internal medicine at Landspitali University Hospital, Reykjavik, Iceland. During this time he was involved in epidemiological research on *S. aureus* bacteraemia resulting in published articles and poster presentations at international conferences. He has also published papers in other sub-specialities of internal medicine and has been involved in teaching clinical skills to medical students.

Since February 2010 he has continued his training in infectious diseases at the Department of Infectious Diseases of the Karolinska University Hospital in Sweden. Most recently, he participated in the Swedish-Ethiopian Course in Tropical Infectious Diseases 2010-2011 and has become a member of a competence group on tropical infections at the Karolinska University Hospital. He is expected to finish his training in December 2012.

Having a strong interest in mycology, he received further training in this field at the Pasteur Institute in Paris. He established an intense cooperation with colleagues in the department of infectious diseases at Cologne and mycologists in different European countries, resulting in different mycological projects. He also works in the Clinic of Travel Medicine and in a joint project with a hospital in Ivory Coast. He is very involved in the teaching of medical students and gives lectures and courses in microbiology and mycology. Currently, he is in the final year of his training in microbiology.
Valentina Mazzocato, Rome, Italy
She started her studies at the ‘La Sapienza’ University and from the beginning has carried out extracurricular activities focused on social medicine: She collaborated with SISM (Italian Secretariat Medicine Students) and joined the Caritas (Catholic Charity) voluntary programme for medicine students working at Caritas Immigrant Ambulatory. For her thesis work, she carried out research on the Immigrant Ambulatory at the ‘Umberto I Hospital’. In 2004 Valentina Mazzocato was enrolled in the SISM Research Exchange Programme in Hospital Sao Rafael, Brazil as a trainee student to improve her medicine competence in a tropical environment. In 2010 she participated in an Observership in Ankara at the Department of Infectious Diseases, Hacettepe University and Numune State Education and Research Hospital. Currently she is employed as a resident doctor at ‘Gemelli Hospital’ in Rome, in the infectious diseases and ambulatory units, where she also participates in projects and networking activities between her department disciplines and related specialties as well as in student groups and social campaigns for STD prevention. Her interests are on studies about ARV adherence, vaccinations, tuberculosis and clinical ultrasound.

Djin-Ye Oh, Berlin, Germany
She is currently training in pediatrics at Tufts Medical Center in Boston, USA. This training is in addition to her Microbiology training at Charité University Medical Center in Berlin, Germany. Her multifaceted teaching approach integrates basic science, laboratory medicine and clinical medicine. Her research experience includes studies on the molecular epidemiology of RNA viruses (Robert Koch-Institute, Germany), analyses on the impact of innate immune system genetic variation on RNA viral diseases (Charité University Medical Center) and the use of adjuvant for potential neonatal vaccines (Children's Hospital Boston/ Harvard Medical School). She has initiated and coordinated several collaborations between basic science labs and clinical research groups. Her clinical training and research efforts have strengthened her conviction that academic research and clinical medicine should exist as mutually supportive entities in the common service of promoting the human welfare. Therefore, she envisions an academic career that consistently integrates her scientific knowledge and laboratory skills with clinical experience.
Fuad Iraqi

Born on March 1st, 1961 in Tira City, Israel; Department of Clinical Microbiology and Immunology, Sackler Faculty of Medicine, Tel-Aviv University, Tel-Aviv, Israel, in recognition of his excellent abstract submitted for presentation at the 21st ECCMID/27th ICC 2011.

He will give a short oral presentation titled ‘The collaborative cross mouse genetic reference population as novel tool for dissecting host susceptibility to infectious diseases’ at the Sepsis Forum on Saturday, 7 May 2011.

Research Interests

Fuad Iraqi is a molecular geneticist who has worked for the last four years at the Tel-Aviv University. His research is focused on understanding diseases’ etiology and host susceptibility to infectious and chronic diseases including; *Klebsiella pneumonia*, *Aspergillus fumigatus* periodontitis, type-2 diabetes and modifiers for colon cancer. In addition he is working on a project for identifying the host genetic factors influencing immune response cell lineages in peripheral blood in the naive population, aiming to using this information in a predictive genetics approach. Following his graduation from the Hebrew University in Jerusalem in 1989, he worked for two years at the Hospital for Sick Children in Toronto, Canada, two more years at Michigan State University, USA, before working for thirteen years with ILRI in Nairobi, Kenya on mapping genes associated with host susceptibility to trypanosomiasis, gastrointestinal nematodes and malaria in target species and a mouse model.
Research Grants 2011

The following ESCMID members have received a Research Grant in 2011 for the indicated project.

Alain Bizzini
Institute of Microbiology, University Hospital Center Lausanne, Lausanne, Switzerland

Project: Study of the emergence and evolution of antibiotic heteroresistance by microcalorimetry in an experimental model of foreign-body infection

Dafne Bongiorno
Department of Microbiology, University of Catania, Catania, Italy

Project: Non-mutational resistance to linezolid: characterization of the plasmid-mediated methyltransferase cfr gene

Alessandra Bragonzi
San Raffaele Scientific Institute, Milano, Italy

Project: Tracking down virulence of Pseudomonas aeruginosa during chronic infection

Matthijs Christian Brouwer
Department of Neurology, Center of Infection and Immunity Amsterdam, Academic Medical Centre, University of Amsterdam, The Netherlands

Project: The plasminogen system in bacterial meningitis

Paola Brun
Department of Histology, Microbiology and Medical Biotechnologies, University of Padua, Padua, Italy

Project: Molecular mechanisms of neurotropic virus-mediated neuropahties in the gut

Sergio Filipe
Academic and Projects Office, Instituto de Tecnologia Quimica e Biologica, Deiras, Portugal

Project: Identification of bacterial cell wall components that interfere with peptidoglycan recognition by the host

Helen Louisa Leavis
Medical Microbiology, UMC Utrecht, Utrecht, The Netherlands

Project: Pathogenesis of Enterococcus faecium biofilm formation

Paolo Miotto
Emerging Bacterial Pathogens Unit, Division of Immunology, Transplantation and Infectious Diseases, Fondazione Centro San Raffaele del Monte Tabor, Milan, Italy

Project: The role of small RNAs in the stress response of Mycobacterium tuberculosis

Mariana Pinho
Academic and Projects Office, Instituto de Tecnologia Quimica e Biologica, Deiras, Portugal

Project: Study of the real-time response of individual Staphylococcus aureus cells to the presence of cell wall active antibiotics
Andrew James Stewardson  
Infection Control Program, University of Geneva Hospitals, Geneva, Switzerland  
Project: The household microbiome: a prospective observational study investigating household clustering of oral and intestinal microbiota and the impact of oral antibiotic exposure

Thamarai Schneider  
Centre for Infection and Immunity, Queen’s University Belfast, Belfast, United Kingdom  
Project: The frontline defense: sRNA-mediated mechanisms in antibiotic resistance

Andreas Reisner  
Biomedical Science, University of Applied Sciences, Graz, Austria  
Project: Prevalence and spread of bacterial silver resistance

Pierre Smeesters  
Bacterial Genetics and Physiology Laboratory, Free University of Brussels, Gosselies, Belgium  
Project: Host-pathogen interactions in a highly necrotising group A Streptococcus isolate

Eveline Snelders  
Medical Microbiology, Radboud University Nijmegen Medical Centre, Nijmegen, The Netherlands  
Project: The tandem repeat as a resistance mechanism in human and plant pathogenic fungi

Rita Sobral  
Laboratory of Molecular Genetics, Instituto de Tecnologia Quimica e Biologica, Oeiras, Portugal  
Project: The association of extracellular DNA to the Staphylococcus aureus surface: roles and mechanisms

Andrew James Stewardson  
Infection Control Program, University of Geneva Hospitals, Geneva, Switzerland  
Project: The household microbiome: a prospective observational study investigating household clustering of oral and intestinal microbiota and the impact of oral antibiotic exposure

Ronald van Rij  
Medical Microbiology, Radboud University Nijmegen Medical Centre, Nijmegen, The Netherlands  
Project: A high-throughput screen to identify small molecule inhibitors of Dengue virus

Nicolas Veziris  
Laboratoire de bactériologie, UPMC, Paris, France  
Project: In vivo evaluation of the benefit of adding moxifloxacin to drug regimens used against extensively drug-resistant tuberculosis
**Training Fellowships 2011**

**Vincent Cattoir**  
Department of Microbiology,  
Hôpital Côte de Nacre, Caen, France  

**Project:** Systems approach towards understanding post-transcriptional regulation of expression of *Pseudomonas aeruginosa* genes important for pathogenesis  

**Host:** Stephen Long, Harvard Medical School, Department of Microbiology and Molecular Genetics, Boston, USA

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**Maria Chiara Di Luca**  
Laboratory of Microbiology,  
School of Biosciences and Biotechnology,  
University of Camerino, Camerino, Italy  

**Project:** Clinical and molecular microbiology of group A Streptococcus  

**Host:** James M. Musser, The Methodist Hospital Research Institute, Department of Pathology and Laboratory Medicine, Houston, USA

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**Corine Geurts van Kessel**  
Department of Medical Microbiology and Infectious Diseases, Erasmus MC Rotterdam, Rotterdam, The Netherlands  

**Project:** A clinical fellowship in tropical infectious diseases in Bangladesh  

**Host:** Hubert Ph. Endtz, Department of Tropical Bacteriology and Director Laboratory Sciences Division, ICDDR'B, Dhaka, Bangladesh

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**Ioana Sabina Macovei**  
Laboratory of Anaerobic Bacteria,  
Cantacuzino Institute, Bucharest, Romania  

**Project:** *Clostridium difficile* and CDAD – laboratory typing methods and molecular epidemiology  

**Host:** Emilio Bouza, Department of Clinical Microbiology and Infectious Diseases, Hospital General Universitario Gregorio Marañón, University of Madrid, Spain

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**Ioana Raluca Mihailescu**  
National Institute of Infectious Diseases ‘Prof. Dr. Matei Bals’, Bucharest, Romania  

**Project:** Antimicrobial activity against vancomycin-resistant enterococci (VRE) biofilms in experimental implant-associated infections  

**Host:** Andrej Trampuz, Department of Infectious Diseases, University Hospital Lausanne, Department of Infectious Diseases – Septic Surgical Unit, Lausanne, Switzerland

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**Neven Papic**  
Department of Viral Hepatitis,  
University Hospital for Infectious Diseases,  
Zagreb, Croatia  

**Project:** Discovery of host antiviral genes regulating hepatitis C replication  

**Host:** Curt Hagedorn, Division of Gastroenterology, Hepatology and Nutrition, University of Utah School of Medicine and Huntsman Cancer Institute, Salt Lake City, USA
**Travel Grants for Training in a Foreign Institution**

These individuals received funding in 2010 or early 2011 to visit an institution in another country from a period of two weeks to three months and expand their knowledge. From now on the Training in Foreign Institution grants are integrated into the Observership programme.

<table>
<thead>
<tr>
<th>Name</th>
<th>Location</th>
<th>Project Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ricardo Baptista Leite</td>
<td>Parede, Portugal</td>
<td>Evaluation of Portugal’s national AIDS plan and of barriers to access for treatment and care for HIV and hepatitis in Portugal. World Health Organisation – Regional Office for Europe, Copenhagen, Denmark</td>
</tr>
<tr>
<td>Christine Jerop Boinett</td>
<td>Surrey, United Kingdom</td>
<td>Plasmid-mediated antimicrobial resistance – characterising extended-spectrum beta-lactamases in <em>E. coli</em> isolated from cattle. Central Veterinary Institute, Lelystad, The Netherlands</td>
</tr>
<tr>
<td>Lieke de Vrankrijker</td>
<td>Utrecht, The Netherlands</td>
<td>The effect of heparin treatment on the facilitating effect of RSV on <em>P. aeruginosa</em> lung infection in mice. Rigshospitalet, University Hospital Copenhagen, Copenhagen, Denmark</td>
</tr>
<tr>
<td>Joseph Fitchett</td>
<td>London, United Kingdom</td>
<td>Infant and maternal immune responses to bacille Calmette-Guérin (BCG) vaccination in Gambia. MRC Laboratories, Banjul, Gambia</td>
</tr>
<tr>
<td>Ana Friaes</td>
<td>Lisbon, Portugal</td>
<td>Resistance of genetically diverse isolates of <em>Streptococcus pyogenes</em> to neutrophil-mediated killing and the action of neutrophil extracellular traps. University of Veterinary Medicine Hannover, Hannover, Germany</td>
</tr>
<tr>
<td>Alicia Gomez Lopez</td>
<td>Majadahonda-Madrid, Spain</td>
<td>Training in PK/PD with antifungal agents. School of Medicine, University of Manchester, Manchester, United Kingdom</td>
</tr>
<tr>
<td>Minna Karden-Lilja</td>
<td>Helsinki, Finland</td>
<td>Vancomycin-resistant enterococci: S1 nuclease plasmid characterisation. University Hospital of North-Norway, Tromso, Norway</td>
</tr>
<tr>
<td>Jose Luis Navarro-Laredo</td>
<td>Madrid, Spain</td>
<td>Training in diagnosis of intestinal parasites and multidrug-resistant malaria. National Institute of Hygiene and Epidemiology, Hanoi, Viet Nam</td>
</tr>
<tr>
<td>Aamir Shahzad</td>
<td>Vienna, Austria</td>
<td>To study the <em>in vitro</em> model of virus latency and to study the effect of VZV proteins 63 and 70 on establishment of VZV latency. University of Colorado Denver, School of Medicine, Aurora, USA</td>
</tr>
<tr>
<td>Angela Somodevilla</td>
<td>Madrid, Spain</td>
<td>Identification and characterisation of pathogenicity factors in Spanish strains of <em>Helicobacter pylori</em>. La Princesa University Hospital, Madrid, Spain</td>
</tr>
<tr>
<td>Carina Valente</td>
<td>Oeiras, Portugal</td>
<td>Detection of multiple colonisation with <em>Streptococcus pneumoniae</em> by microarray. St. George University of London, London, United Kingdom</td>
</tr>
<tr>
<td>Jon van Aartsen</td>
<td>Leicester, United Kingdom</td>
<td>Characterisation of a <em>Klebsiella pneumoniae</em> genomic island bearing a novel type 1-like fimbrial operon. Statens Serum Institut, Copenhagen, Denmark</td>
</tr>
<tr>
<td>Claire van Nispen tot Pannerden</td>
<td>Rotterdam, The Netherlands</td>
<td>Tropical infectious diseases in immunocompromised patients. University Hospital of Santiago, Santiago, Chile</td>
</tr>
<tr>
<td>Suzanne Verhaegh</td>
<td>Rotterdam, The Netherlands</td>
<td>Molecular genetic events contributing to <em>M. catarrhalis</em> and <em>S. pyogenes</em> infections. Methodist Hospital Research Institute, Houston, USA</td>
</tr>
<tr>
<td>Kati Vuorennoja</td>
<td>Turku, Finland</td>
<td>S1 nuclease digestion followed by pulsed field gel electrophoresis and southern blot hybridisation. University Hospital of North-Norway, Tromso, Norway</td>
</tr>
</tbody>
</table>
When did the doctors become fomites?
E. Tacconelli

An Animal Farm Called ESBL: Antimicrobial resistance as a zoonosis
G. Pappas

The Haitian cholera epidemic: is searching for its origin only a matter of scientific curiosity?
B. Faucher and R. Piarroux

Measles, a re-emerging disease in France?
F. Freymuth and A. Vabret

Sometimes they come back—the return of influenza
G. Cornaglia and D. Raoult

First cases of autochthonous dengue fever and chikungunya fever in France: from bad dream to reality!
E. A. Gould, P. Gallian, X. De Lamballerie and R. N. Charrel

New Delhi metallo-beta-lactamase (NDM-1): towards a new pandemia?
J. M. Rolain, P. Parola and G. Cornaglia
Robert Read
ESCMID Scientific Affairs Officer
r.c.read@shef.ac.uk

Main activities
In general, the Scientific Affairs Officer (SAO) co-ordinates the activities of all Study Groups (SGs), our expert circles with a common focused interest. We ensure that they have adequate resources, support them both scientifically and financially, and work with them in setting up or collaborating on a research project and writing medical guidelines or other publications. We continue to increase SG support, such as the introduction of SG Research Grants (www.escmid.org/awards&grants) and of internal discussion fora. In addition, we encouraged the development of new SGs. This has led to exciting new projects within existing groups (see pages 26–30) and the foundation of three new groups (see page 25). The new groups will have their inaugural meetings at the ECCMID/ICC in Milan. To maximise the activity of all SGs, the Scientific Affairs Subcommittee (SAS) keeps a close eye on their productivity. Our analysis of SG activity in 2010 resulted in positive feedback and encouraging suggestions by the SAS.

Changes ahead
An issue we are currently tackling is the way to shape the scientific activities of ESCMID. ESCMID has to serve all its members, and we seek to provide a comprehensive portfolio of scientific endeavour which meets the needs of the whole spectrum of specialists in clinical microbiology and infectious diseases. For example, whilst we have a strong portfolio in antibiotic resistance research, we are relatively less active in other areas that might be of interest to our membership. This situation has arisen mainly because of the strengths of individuals working within SGs becoming very active in their own fields. We seek maintain this enthusiastic activity, whilst trying to coordinate a more systematic approach. To this end, ESCMID will now stratify its scientific activities into four Sections and has defined five major Themes of scientific endeavour (see box). In future, SG activities will be overseen and – most importantly – stimulated by dedicated SAS members with individual responsibility for a Section or Theme. In this way, responsibility for ESCMID’s scientific activity is devolved to a larger group of experts and members of the society, and lead hopefully to an expansion of activities in areas that have previously been less strong.

SG scientific meetings and joint conferences with other international organisations are another important activity in this portfolio, which the SAS also oversees. One of these longstanding collaborations is the ESCMID/FEMS Conference that sees the 7th edition in 2011. The SAO also cooperates with the ECCMID Programme Director in developing the scientific programme of ECCMID. Finally, members of the SAS participate in the Awards Subcommittee evaluating proposals for awards, grants and fellowships.

Outlook
Over the next year we will mainly focus on stimulating our SGs to apply for EU-funded projects. We know that this entails a considerable workload for the groups involved and are prepared to strongly support them with advice, logistics and funds, especially in the crucial project design and proposal writing phase. New operating procedures have just been published to guide interested groups on the way towards a successful project proposal (www.escmid.org/eop).

We encourage all our members to participate actively in our scientific activities and kindly request your feedback for the current and future activities.

ESCMID Sections
• Bacteria & Bacterial Diseases
• Fungi & Fungal Diseases
• Parasites & Parasitic Diseases
• Viruses & Viral Diseases

ESCMID Themes
• Pathogenesis & Immunology
• Epidemiology, Public Health & Vaccinology
• Clinics & Therapeutics
• Diagnostics
• Antimicrobial Resistance & Susceptibility Testing

For more information see www.escmid.org/science

Scientific Affairs Subcommittee meeting
In 2010
(l. to r.) Henri Saenz
Adrian Baumeyer
Maiken Cavling Arendrup
Marc Lecuit
Birgitta Evengård
Robert Read
Stefania Stefani
Harald Seifert
Hakan Leblebicioglu
Yehuda Carmeli
We are pleased to present the activities of the existing Study Groups for 2010/2011 and also to announce the establishment of three new Study Groups (SGs). Their inauguration will take place during ECCMID/ICC 2011 in Milan.

ESGBOR starts its activities in the field of Lyme Borreliosis. They plan to:
• continue to maintain the EUCALB website (European Union Concerted Action on Lyme Borreliosis) as an information resource, with full acknowledgment of ESCMID
• organise periodic meetings/workshops in collaboration with other ESCMID Study Groups to address diagnostic and treatment issues
• promote specific collaborative research following the networking rationale of the EUCALB project
• meet periodically to review and publish recommendations for the management of Lyme Borreliosis.

ESGICH starts its activities in the field of infections in solid organ transplant recipients and immunocompromised hosts. Activities and plans:

**Educational**
• Co-organisation of a meeting on infections in solid organ transplant recipients, 2010, Varese, Italy, organised by Paolo Grossi
• Planning of the ESCMID Conference on infections in the immunocompromised host, 17–18 November 2011, Istanbul, Turkey

**Research ideas**
• Planned project on resistance patterns in haematological wards: a survey of cases of bacteraemia in haematological patients (or in allogeneic SCT patients)

**Medical guidelines**
• Joint initiative with ECIL (European Conference on Infection in Leukemia) for a new guideline on the management of febrile neutropenia (meeting planned for September 2011)
• Guidelines for perioperative prophylaxis in solid organ transplantation
• Guidelines for the management of EBV infection and PTLD in solid organ transplant recipients
• Guidelines for prevention of donor-related infections in solid organ transplant recipients

ESGMYC starts its activities in the field of mycobacterial infections. Objectives are to improve the diagnosis, treatment and prevention of infection due to mycobacteria, including tuberculosis, leprosy and infections due to non-tuberculous mycobacteria. This will be achieved by promoting and supporting research, education, training, and good medical and microbiological practice. Detailed plans will soon be published on the SG website.
**Existing ESCMID Study Groups**

The existing ESCMID Study Groups have been active in the period from ECCMID 2010 to ECCMID / ICC 2011 by:

- presenting general information and news on their activities on 12 posters in the European Network Corner at ECCMID 2010
- contributing to the organisation of 7 official symposia and 11 educational workshops at ECCMID 2010
- organising 10 ESCMID Postgraduate Education Courses / Technical Workshops throughout Europe (for more details see the course and workshop list on page 36).

A selection of major achievements and plans of the individual SGs follows.

**EFISG**

- Production of European guidelines for the treatment of candidiasis to be presented in Milan
- Preparation for European guidelines for the treatment of rare fungal infections
- Co-organisation of the Zygomycosis Forum, Porto Heli, Greece, May 2010

![EFISG business meeting at ECCMID 2010 in Vienna](image)

**EHSG**

- Organisation of the 23rd International Workshop on *Helicobacter* and related bacteria in chronic digestive inflammation and gastric cancer, Rotterdam, NL, 17 – 19 September 2010
- Organisation (in collaboration with ESGMD) of a *Helicobacter* diagnostic and surveillance workshop, Rotterdam, NL, 16 September 2010
- Organisation of the conference on Guidelines for the Management of *Helicobacter Pylori* Infection (Maastricht-4), Florence, IT, November 2010
- Planning the 24th International Workshop on *Helicobacter* and related bacteria in chronic digestive inflammation and gastric cancer, Dublin, IE, September 2011
- Publication of guidelines on the management of *H. pylori* infection in children in the course of 2011
• Publication of a collaborative study: Cornelia Blaser, Matthias Klein, Denis Grandgirard, Matthias Wittwer, Heikki Peltola, Michael Weigand, Uwe Koedel and Stephen L. Leib. Adjuvant glycerol is not beneficial in experimental pneumococcal meningitis. *BMC Infect Dis.* 2010;10:84

• Meningococcal meningitis model in mice: A collaborative pilot study set up and started to evaluate correlates of a meningococcal meningitis model in mice. Work performed to exploit the complementary expertise of three EMESG partners (Siena, Munich, Bern). Preliminary data highly encouraging and joint grant applications ongoing including application for ESCMID funding.


• Symposium ‘Special PK/PD topics’ in collaboration with the International Society for Anti-Infective Pharmacology (ISAP), 13 April 2010, Vienna, Austria

• Organisation of the 6th International Meeting on Rickettsiae and Rickettsial Diseases, Heraklion, Greece, 5 – 7 June 2011

• SG publication: Nagy E, et al. Antimicrobial susceptibility of *Bacteroides fragilis* group isolates in Europe: 20 years of experience. *CMI* 2011, 17:371 – 379, as results of the third study on the antimicrobial susceptibility of *Bacteroides fragilis* group isolates in Europe

• SG members participating in EUCAST Subcommittee on Antimicrobial Susceptibility Testing of Anaerobic Bacteria. Subcommittee members are: Luc Dubreuil, Elisabeth Nagy, Arne Rodloff. A small group of the SG members are working on projects to help EUCAST to set break points for anaerobic bacteria (Ulrik Justensen, Denmark, Edit Urban and Gabriella Terhes, Hungary).
- Organisation of the pre-meeting workshop, ‘Antimicrobial Stewardship’, during the 50th ICAAC, Boston, US, 11 September 2010
- The online antibiotic consumption calculator tool ‘ABC Calc’ is updated and the new version to be published on the website
- Ongoing project ‘Forgotten antibiotics: an inventory in Europe, US, Canada and Australia’ to assemble an inventory on valuable older antibacterials that would be effective against resistant strains

- Planning of the second European Congress on Microbial Biofilms (EUROBIOFILMS), in Copenhagen, DK, 6 – 8 July 2011
- EU-Framework 7 project ‘The physiological basis of hypervirulence in Clostridium difficile: a prerequisite for effective infection control’ ongoing
- Definition of EUCAST breakpoints for Clostridium difficile antimicrobial agents
- Granted tender by ECDC: ‘Supporting capacity building for surveillance of Clostridium difficile infections at European level’; European kick-off meeting planned for June 2011

- Three SG articles on resistance detection, surveillance and therapeutic approaches published in 2010
- Workshop at the 4th Ditan International Conference on Infectious Diseases (DICID), Beijing, China, on 15 – 18 July 2010
- Symposium at the 5th Asian Congress of Pediatric Infectious Diseases (ACPID), Taipei, Taiwan, on 23 – 26 September 2010
- Organisation of two ESCMID National Language Courses in collaboration with EUCAST in Italy
- Retrieval of antimicrobial susceptibility data from invasive infections, urinary tract infections and lower respiratory tract infections – a pilot project involving Turkey and Israel. The project is funded (30’000 EUR), and 2011 aim to establish an interactive database

- Organisation of the pre-meeting workshop, ‘Antimicrobial Stewardship’, during the 50th ICAAC, Boston, US, 11 September 2010
- The online antibiotic consumption calculator tool ‘ABC Calc’ is updated and the new version to be published on the website
Ongoing project: Provide information about the prevalence of parasitic infections in different parts of Europe and provide information on clinical policies and practices within Europe. Questionnaire analysed, network building in progress

Ongoing project: Provide comparisons of diagnostic performances of different assays including quality control. Results from a series of reference and diagnostic labs received and in analysis

Establishment of an E-learning platform, in collaboration with European partners

Co-organisation of the IV International Congress on Congenital Toxoplasmosis: Marseille, FR, 28 – 30 October 2010

ESGCP business meeting at ECCMID 2010 in Vienna

ESGIAI business meeting at ECCMID 2010 in Vienna

ESGMD business meeting at ECCMID 2010 in Vienna

ESGEM business meeting at ECCMID 2010 in Vienna

ESGEM business meeting at ECCMID 2010 in Vienna

Assembly of several national medical guidelines on molecular diagnostics of infectious diseases to build European consensus

Organisation (in collaboration with EHSG) of a Helicobacter diagnostic and surveillance workshop, Rotterdam, NL, 16 September 2010

Co-organisation of the European Meeting of Molecular Diagnostics, Scheveningen, NL, in October 2011
• Participation in establishing a European network in infection control
• Survey on the prevalence of multiresistant *Acinetobacter baumannii* and associated infection control policies in European hospitals analysed, manuscript in preparation

ESGNI business meeting at ECCMID 2010 in Vienna, (l. to r.) Christian Ruef (CH), Barry Cookson (UK), Andreas Widmer (CH), Markus Dettenkofer (DE), Philippe Vanhems (FR)

• Planning to write a guideline on diagnosis and management for acute HCV in conjunction with ESCMID, ISC, the Japanese Society of Chemotherapy, EASL and industrial companies. Research to finance this activity is ongoing

ESGVH business meeting at ECCMID 2010 in Vienna

ESCMID Parity Commission

Further information:
www.escmid.org/parity or parity@escmid.org
H. Erdal Akalin, Coordinator for Clinical Practice Guidelines
eakalin@doruk.net.tr

The Institute of Medicine (IOM) of the National Academies defines clinical practice guidelines as "systematically developed statements to assist practitioner and patient decisions about appropriate healthcare for specific clinical circumstances". Evidence-based medicine is a coherent approach to clinical decision making. The IOM defines evidence-based medicine as the "integration of best researched evidence and clinical expertise with patient values". Well-developed guidelines have the potential to enhance the appropriateness of clinical practice, improve the quality of and suitability of care, lead to better patient outcomes, improve cost effectiveness, identify areas of further research needs, and serve as an educational tool. Practice guidelines are clinical documents of high methodological rigor, which facilitate evidence-based decision-making and incorporate group values and patient preferences. The development of these guidelines is intended to be evidence-based, transparent, and systematic.

There are several very important reasons for developing clinical guidelines: improve quality of clinical outcomes, decrease unproven and unnecessary utilisation of clinical practices, provide the best class of care with the most cost-effective practice and avoid medical errors.

Clinical guidelines when based on evidence-based knowledge, provide an excellent guide to physicians in their decision making process. Variations in clinical practices affect the quality of healthcare and medical expenditure. Use of clinical guidelines minimises the variations. Guidelines also help to develop critical pathways. These are very important tools to use in critical-care patients. Guidelines provide important criteria for performance evaluations.

Since spring of 2010, ESCMID instituted a new position, the Coordinator for Clinical Practice Guidelines, reporting directly to the Executive Committee (EC). He is responsible for coordinating the clinical practice guidelines development programme. The coordinator will consider guideline topic proposals from any ESCMID member. Proposed guideline topics will be chosen based upon the impact that they will have on the prevention, diagnosis and/or treatment of infectious diseases and clinical microbiology. All proposals and developed guidelines will be approved by the EC before being published as ESCMID guidelines.

Update 2010 – 2011
ESCMID has developed several clinical or microbiological practice guidelines over the years. Some of these were work of collaborative efforts by other organisations. The Society will continue these efforts in the future, too. The following table updates most recent developments in this area.

<table>
<thead>
<tr>
<th>Guideline</th>
<th>Owner</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Guideline for management of sore throat</td>
<td>ESCMID</td>
<td>completed, 2011</td>
</tr>
<tr>
<td>Treatment of Candida infections</td>
<td>ESCMID</td>
<td>completed, 2011</td>
</tr>
<tr>
<td>Diagnosis, prevention, and treatment of catheter-associated urinary tract infection in adults</td>
<td>IDSA/ESCMID</td>
<td>published, 2010</td>
</tr>
<tr>
<td>International clinical practice guidelines for the treatment of acute uncomplicated cystitis and pyelonephritis in women</td>
<td>IDSA/ESCMID/ISC</td>
<td>published, 2011</td>
</tr>
<tr>
<td>Treatment of lower respiratory tract infections</td>
<td>ERS/ESCMID</td>
<td>completed, 2011</td>
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<tr>
<td>Clinical practice guideline on leishmaniasis</td>
<td>IDSA/ESCMID/ASTMH</td>
<td>started, 2010</td>
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<tr>
<td>The diagnosis and management of vertebral osteomyelitis</td>
<td>IDSA/ESCMID</td>
<td>started, 2010</td>
</tr>
<tr>
<td>Infection control measures for multidrug-resistant Gram-negative bacteria in the healthcare setting</td>
<td>ESCMID</td>
<td>started, 2011</td>
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The 20th ECCMID from 10–13 April 2010 was a successful congress, with 7635 registered delegates attending, the second largest number of participants in ECCMID history (Table 1 and Figure 1). The total number of congress participants was over 8000 from 98 different countries. Figure 2 shows a breakdown of the participants by region.

Since ECCMID started in 1983, it continues to attract more participants from all over the world and more submitted abstracts with only some dips in the overall trend. For ECCMID 2010, we received 3180 abstracts from 91 different countries. A total of 217 reviewers conducted a blind review of abstracts. Each abstract was reviewed by 4 reviewers, and each reviewer gave the individual abstract a score from 1 to 6. The mean was calculated. Outliers were dealt with, for example if three reviewers give 3, 4 and 3 and a fourth reviewer 1, the abstract was looked at by several more reviewers and graded again and a mean point value calculated. This year, the number of rejected abstracts was slightly above 30 %. This high rejection rate contributed to the high quality of the presentations and posters. However, many good abstracts could not be accepted due to limited time and space.

The total number of speakers and chairs was 205 and 78, respectively. 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 increased to an all-time high of 257 hours.

On the evening of the first congress day, thousands of congress participants joined the opening ceremony that was memorable.

This success would not have been possible without the excellent work of Wolfgang Graninger, the 20th ECCMID President, and the very professional Programme Committee who helped put together the Scientific Programme.

Dear colleagues and friends – on behalf of the Society I thank you all in helping to make the 20th ECCMID possible. Let us come together again!

Table 1. Key ECCMID figures

| Number of participants: | 8019 from 98 different countries, thereof: 7635 delegates |
| Press: | 65 registered journalists |
| Exhibition: | 73 exhibiting companies |
| 384 accompanying persons |
| 1301 exhibitors’ personnel |
| 2883 m² net area |
| Countries with highest attendance: Spain, Greece, United Kingdom, Germany |
| 3 press releases |

Figure 2. Participants per geographic area in percent
Europe 78 %, Asia 7 %, North America 5 %, Middle East 5 %, South/Central America 2 %, Africa 2 %, Australia 1 %

Figure 3. Country of origin of the speakers
Figure 1. Number of delegates and received abstracts for the ECCMIDs since 1983.
ESCMID Educational Activities

Murat Akova
ESCMID Education Officer
makova@hacettepe.edu.tr

Main educational activities in 2010
Thanks to our very active Study Groups and Affiliated Societies, 2010 was a fruitful year with regard to educational courses and workshops. Selecting 13 new postgraduate courses from the more than 20 excellent applications was not an easy task for the members of the Education Subcommittee. For the first time we held a postgraduate course outside of continental Europe, in Sousse, Tunisia. The ESCMID Study Group for Coxiella, Anaplasma, Rickettsia and Bartonella and their Tunisian counterparts co-operated in the organisation of this very successful course on intracellular bacteria.

The rest of the courses were held at various locations across Europe, from Oslo to Palma de Mallorca and Izmir to Madrid. The number of participants varied according to the format of the course from 20 participants for certain lab-based workshops to over 100 for other formats.

The 9th Summer School took place in Cappadocia, Turkey with over 60 attendees from 21 different countries (see following page). As every year, ESCMID provided numerous attendance grants, especially for young scientists. Our Online Lecture Library (OLL) includes presentations from all our educational activities and is available to our members. Please visit the ESCMID OLL at: www.escmid.org/OLL.

Outlook 2011 and 2012
In 2011 we will organise 18 postgraduate courses and technical workshops across all of Europe. Details are available in the calendar on the Society’s website (www.escmid.org/calendar). This year’s Summer School will take place in Treviso, Italy from 2 – 9 July 2011. Registration is already open and the details can be found online at: www.escmid.org/summerschool.

New surprises are yet to come. Starting early summer 2011, the ESCMID Online Lecture Library will become more interactive and materials will be accessible much easier through new, powerful search tools. We will include materials from our postgraduate education programme, from conferences and from selected sessions at ECCMID/ICC in Milan, Italy.

We have already started to plan our educational activities 2012. A call was sent to all Study Groups and Affiliated Societies to send their proposals until end of May 2011 and the full programme will be available in July. We encourage all our members to participate actively in our educational events and kindly request your feedback for the current and future activities.

Education Subcommittee meeting in 2010
[l. to r.] Tibor Pal, Cornelia Lass-Flörl, Roberto Cauda, Anna Skaada, Patrice Nordmann, Souha Kanji-Sharara, Murat Akova, Mical Paul, Peter Chiodini, Henri Saenz, Adrian Baumeyer
Cappadocia was the venue for our 9th Summer School. The School’s directors were Souha Kanj, Beirut, LB, Jorge Garbino, Geneva, CH, and Murat Akova, Ankara, TR. Elif Hakko, Istanbul, TR, provided support by organising student presentations. Unfortunately, Jorge Garbino had to cancel his participation at the last minute due to personal reasons, but he contributed greatly to the School’s organisation for which he must be thankfully acknowledged.

The success of the Summer School undoubtedly owed to the faculty which included five international and 15 local speakers. Some of the faculty led the afternoon interactive sessions in addition to lecturing in the morning sessions. The scientific programme was similar to those of previous years, including topics about antimicrobial resistance, infection control and immunocompromised hosts among others. For the first time this year, in collaboration with the WHO First Global Patient Safety Challenge, we included an interactive session on infection control. Other hands-on and interactive sessions included a fungal quiz, principles to develop a clinical trial and interpretive reading of antimicrobial susceptibility testing data. Every day students presented their case studies which stimulated great discussions. Since there were 60 students from 21 countries and from three different continents, these presentations showed how interesting problems from different geographic locations can be.

As you may know, the region of Cappadocia is one of the historical and geographical wonders of Turkey. Cappadocia Vocational College, which hosted the Summer School, is located at an old establishment in a small village. Many of the historical buildings are used for educational purposes. Owing to the unique environment of the School’s venue, our students and faculty not only enjoyed the scientific programme, but also the local cultural attractions and fabulous sightseeing. As expected, the feedback from both the faculty and the attendees was extremely positive and stimulating as well.

All the scientific sessions of the 9th Summer School were voice-recorded. Webcasts and slide sets are available at our Online Lecture Library where you can also view a picture gallery from various activities. Please visit: www.escmid.org/oll.

With all the positive energy from this and past years’ experiences, we look forward to the 10th Summer School which will take place in Treviso, Italy from 2 to 9 July 2011. Registration is already open, and you can find all the information at www.escmid.org/summerschool. Please have a look and do not to be too late, available places are limited!
ESCMID Courses and Workshops

**Molecular Typing Methods for Bacterial Pathogens**
ESCMID Postgraduate Technical Workshop  
26 – 30 April 2010, Zagreb, HR  
Organised by the ESCMID Study Group for Epidemiological Markers (ESGEM)

**Postgraduate Course in Clinical Parasitology**
ESCMID Postgraduate Technical Workshop  
7 – 11 June 2010, Amsterdam, NL  
Organised by the ESCMID Study Group for Clinical Parasitology (ESGCP)

**8th Workshop «Professor V.J. Benedí»: Mechanisms of Antibacterial Resistance. A Practical Approach**
ESCMID Postgraduate Technical Workshop  
20 – 25 June 2010, Palma de Mallorca, ES  
Organised by ESCMID and the Spanish Society of Infectious Diseases and Clinical Microbiology (SEIMC)

**An Infection That Will Never Be out of Date: Influenza**
ESCMID Postgraduate Education Course  
2 – 4 September 2010, Istanbul, TR  
Organised by ESCMID and the Turkish Society of Microbiology

**Meningitis 2010**
ESCMID Postgraduate Education Course  
6 – 8 September 2010, Izmir, TR  
Organised by the ESCMID Meningitis Study Group (EMESG), the Turkish Society for Infectious Diseases and Clinical Microbiology Specialty (EKMUD) and the Turkish Society of Hospital Infections

**GRACE: Antimicrobial Chemotherapy in Daily Practice**
9th GRACE Postgraduate Education Course  
18 September 2010, Barcelona, ES  
Organised by ESCMID and the European Respiratory Society (ERS)

**Comprehensive Course in Hospital Epidemiology**
ESCMID Postgraduate Education Course  
21 – 25 June 2010, Port Douglas, AU  
Organised by ESCMID, the Society for Healthcare Epidemiology of America (SHEA) and the Australasian Society for Infectious Diseases (ASID)

**Antimicrobial Susceptibility Testing and Surveillance: from Laboratory to Clinic – The EUCAST and ESGARS Perspective**
ESCMID Postgraduate Education Course  
27 – 30 September 2010, Madrid, ES  
Organised by the ESCMID Study Group for Antimicrobial Resistance Surveillance (ESGARS) and the European Committee on Antimicrobial Susceptibility Testing (EUCAST)
Infectious Diseases in Pregnant Women, Fetuses and Newborns
ESCMID Postgraduate Education Course
3 – 7 October 2010, Bertinoro, IT
Organised by ESCMID, the Association of Italian Clinical Microbiologists (AMCLI) and the Italian Society of Infectious and Tropical Diseases (SIMIT)

Biofilms in Nosocomial Fungal Infections
ESCMID Postgraduate Education Course
31 January – 1 February 2011, Paris, FR
Organised by the ESCMID Fungal Infections Study Group (EFISG), the ESCMID Study Group for Biofilms (ESGB) and the Société Française de Microbiologie (SFM)

Intracellular Bacteria: from Biology to Clinic
ESCMID Postgraduate Education Course
2 – 5 November 2010, Sousse, TN
Organised by the ESCMID Study Group for Coxiella, Anaplasma, Rickettsia and Bartonella (ESCAR), the Société Tunisienne de Pathologie Infectieuse (STPI) and the Faculté de Médecine Ibn El Jazzar de Sousse (FMS)

Improving Antibiotic Prescribing in Hospitals
ESCMID Postgraduate Education Course
4 – 5 March 2011, Belgrade, RS
Organised by the ESCMID Study Group for Antibiotic Policies (ESGAP)

GRACE: Hot Topics in Lower Respiratory Tract Infections
GRACE Workshop
4 – 5 November 2010, Budapest, HU
Organised by ESCMID and the European Respiratory Society (ERS)

Clinical Implications of Antimicrobial Susceptibility Testing
ESCMID Postgraduate Technical Workshop
10 – 12 March 2011, Izmir, TR
Organised by ESCMID and the Turkish Society of Microbiology (Steering Committee for Standardization of Antimicrobial Susceptibility Testing)

Acute Infectious Encephalitis: Challenges in Clinical and Biological Diagnosis
ESCMID Postgraduate Education Course
30 March – 1 April 2011, Grenoble, FR
Organised by ESCMID and the Société de Pathologie Infectieuse de Langue Française (SPIFL)

Basic Parasitology
ESCMID Postgraduate Technical Workshop
11 – 15 April 2011, Ankara, TR
Organised by the ESCMID Study Group for Clinical Parasitology (ESGCP)
Clinical Microbiology and Infection

Monthly theme sections in 2010 and 2011

Since January 2009, each CMI issue now includes a section devoted to a particular theme. The remaining content of the issues comprise original research as submitted, not necessarily related to the theme.

### 2010

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<thead>
<tr>
<th>Month</th>
<th>Theme</th>
<th>Authors</th>
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<tr>
<td>January</td>
<td>Emerging and re-emerging issues in food-borne infection</td>
<td>P.T. Tassios and K.G. Kerr</td>
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<td>February</td>
<td>Carbapenemases in Gram-negative bacteria</td>
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<td>Infectious diseases in travellers</td>
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<td><strong>H1N1 Influenza pandemic</strong></td>
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<td>May</td>
<td>Pneumococcus</td>
<td>E. Varon, J.L. Mainardi and L. Gutmann</td>
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<td>Enterococcal infections</td>
<td>A. Sundsfjord and R. Willems</td>
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<td>July</td>
<td>Cystic fibrosis-related infection</td>
<td>R. Cantón and R. del Campo</td>
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<td>August</td>
<td>Hepatitis C</td>
<td>M. Drancourt</td>
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<tr>
<td>September</td>
<td>Invasive fungal infections in paediatric patients</td>
<td>E. Roilides and T.J. Walsh</td>
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<tr>
<td>October</td>
<td>Point-of-care testing</td>
<td>G. Antonelli</td>
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<tr>
<td>November</td>
<td>Diagnostic issues in the monitoring of HIV infection</td>
<td>G. Greub</td>
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<td>December</td>
<td>MALDI-TOF</td>
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### 2011

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<td>Hepatitis C virus</td>
<td>J.M. Pawlotsky</td>
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<td>Zoonotic infections</td>
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<td>June</td>
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<td>Infection and pregnancy</td>
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<td>August</td>
<td>Correlation between genetic resistance and clinical effect of antibiotics</td>
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<td>September</td>
<td>Recent trends in leishmaniases</td>
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<td>Control of malaria</td>
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<td>Filamentous fungi</td>
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The *CMI* journal has carried out an assessment report of its activities in the last three years which was published under the reference: *CMI* editorial report, 2011; 17, 1–4. It is freely accessible on the *CMI* website.

The journal’s scope is changing and welcomes more infectious disease and virology and less antibiotic and physiopathology activities. One of the future objectives is to publish more articles relating to parasitology and tropical diseases, associated with travel medicine, which are becoming highly important areas.

One of the recent changes implemented in 2009 has been the creation of ‘publications by theme’, the cover of each issue reflecting the month’s theme (see table, page 38). The 2010 issues included 12 themed editorials and 39 themed reviews.

*CMI’s* impact factor has increased to above 4.0 for the first time in the 2009 ISI Journal Citations Report, a result of the collective efforts of several Editors-in-Chief. Readership has increased in 2009 by 48% (see key *CMI* figures below).

In 2010, we reduced the backlog of papers awaiting publication by producing four issues with four times the number of original articles and we will evaluate, in future, if an increase in *CMI* articles per issue is feasible. The increased number of accepted published papers in 2010 will lead to a higher impact factor for 2010 but will be artificially accompanied by an apparent decline in the impact factor over the following two years. In contrast, the total number of citations of the journal is increasing dramatically. An important number of articles will probably only be published online (about 30%) in the coming years.

Also in 2010, we began including editorials on ‘hot’ topics such as the Haitian cholera epidemic and the first cases of autochthonous Dengue fever and Chikungunya fever in France. These editorials are published rapidly online and are freely accessible.

Our goal for 2011 is to have no more than a 4-month delay between the acceptance of an article and its publication in a printed issue. Since May 2009, accepted unedited articles are available online within 5 working days to make research results available as soon as possible. These turnaround times seem reasonable when compared to other journals. The objective is to give a rapid response in cases where a manuscript is immediately rejected and a response of sound substance in cases of refusal after peer review.

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**Message from the *CMI* Editor-in-Chief**

Didier Raoult
Clinical Microbiology and Infection
Editor-in-Chief
didier.raoult@gmail.com

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**Key CMI Figures**

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<td>Invited editorials</td>
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<td>Invited reviews</td>
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<td>2009 Full text downloads</td>
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<td>2010 Full text downloads</td>
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**CMI editorial meeting 2010**

[l to r] Panayotis T. Tassios, Gilbert Greub, Rafael Cantón, Verity Emmons, Didier Raoult, Mical Paul, Guido Antonelli, Emmanuel Rolides
ESCMID’s communications efforts and outreach continued to grow in 2010, building on our work and the previous years successes. The result was a year that saw the Society increase its profile in the media, both mainstream and specialist in Europe and globally.

ECCMID 2010 in Vienna produced strong European and global coverage, with a focus on H1N1 following the issuing of a press release looking at the situation and lessons learnt one year on. This was a joint press release with The Lancet Infectious Diseases, following up from the statement we collaborated with them on at ECCMID 2009 at the start of the H1N1 outbreak. There were an even larger number of press in attendance at ECCMID than the previous year, with some 60 journalists from both the mainstream press based in Vienna, and specialised media from around the world, which generated a large amount of press clippings and coverage.

To mark the 3rd International Day of Fighting infection, ESCMID issued a press release focused on hospital infection control which was picked up by some European media outlets. In August, ESCMID issued a press release on NDM-1 which generated a wide amount of very good media coverage. ESCMID was quoted in numerous articles and it was a great opportunity for the Society to react to a breaking news story with speed and expertise.

Another part of ESCMID’s communication strategy is the modernisation and expansion of our interactive website offerings. In 2010 a public discussion forum was launched which allows website users to discuss topics in an informal setting. In autumn of 2010 the Trainees Association of ESCMID started a sub-forum for trainees to exchange experiences and information on trainee’s issues in CM and ID.

The ESCMID Online Lecture Library is also being expanded (see page 34) and redesigned for quicker and more efficient navigation. In 2011 expert personnel will be hired to upgrade additional online interactive services for the Society.

Press releases in 2010 and until 1 May 2011

- 10 April 2010: ECCMID 2010 – Global scientific community meets in Europe to look at new and improved ways to tackle infectious diseases
- 10 April 2010: High-tech consortium on track to seek out and destroy Europe’s ‘superbugs’
- 12 April 2010: One year on experts look at the H1N1 response and lessons for the future
- 15 April 2010: Announcement of new President for ESCMID
- 23 April 2010: Infection control in hospitals is focus for experts on the 3rd International Day for Fighting Infection
- 11 August 2010: NDM-1 Evidence of new UK superbug emphasises ill-preparedness to meet this emerging public health challenge across Europe
- 12 August 2010: Report of new ‘superbugs’ emphasises ill-preparedness across Europe to meet this emerging public health challenge
- 06 January 2011: Impact of flu vaccine opt-out is being seen as A(H1N1) returns to Europe
- 01 April 2011: Experts gather to focus on the role of vaccines in public health at a time of increasing anti-vaccine rhetoric and complacency
- 07 April 2011: A World Health Day on antibiotic resistance is timely as human health is seriously being threatened by misuse and limited drug pipeline
This past year the Professional Affairs Officers have been working in close collaboration with the Professional Affair Subcommittee (PAS) by starting new projects and successfully continuing those already ongoing.

The number of Collaborative Centres continued to increase. Currently, 52 centers in 20 countries (as of 22 March 2011) are available to receive Observers and many others in various countries have applied for approval and are under review. Since the ECCMID 2010, 41 applications for Observerships were received and 35 already took place. Evaluation results of Observers are excellent and are now online for your review. Operating Guidelines were amended to facilitate collaborations between Collaborative Centres and Observers. Evaluation criteria of Collaborative Centres were introduced and will be applied every three years.

The EU Partner Search Platform on the ESCMID website is useful for finding new collaborations among European Research Centres. We will keep working on the improvement of this tool to facilitate exchanges and creation of new European networks of CM and ID specialists.

The Professional Affairs Subcommittee has been actively working with the ID and CM sections of the Union Européenne des Médecins Spécialistes (UEMS) to further harmonise and improve the quality of specialisations among European countries. After the Section of Medical Microbiology became a recognised independent specialty within UEMS, the curriculum and syllabus for training in CM has now been revised. It incorporates competence-based requirements for trainees. ESCMID also joined an UEMS project in the field of ID to establish structures which could enable the introduction of a European exit examination on ID (ECAMSQ programme) and to prepare a syllabus based on existing curricula and meet current standards laid down by the ‘educationalists’. The working group will consist of five members of the UEMS ID section, two ESCMID representatives and one Trainees Association of ESCMID (TAE) representative.

The TAE has been closely working with the PAOs on new projects. This year, for the first time, the ECCMID/ICC programme will include the European Trainees Day, a day of teaching dedicated to the unique needs of trainees. During the event the first four winners of the TAE Excellence Training Award (2 CM and 2 ID trainees) will be announced.

The two of us are particularly pleased to announce that the first survey of the Parity Commission, just founded in 2010, went online in March 2011. The survey is based on the three areas of the Parity Commission advocates: Minorities, Gender Balance and Geographic Balance. Its main goal is to determine, through a questionnaire, if and to what extent forms of discrimination exist with regard to the three areas among professionals in European hospitals and universities carrying out academic activities in the CM/ID fields.

An overview of the activities within our portfolios can be found on the following six pages.
The ESCMID Parity Commission (EPC) met for the first time on the 5th of September 2010 in Rome. The group was founded to review and improve representation of minorities and gender as well as geographic balance in the fields of clinical microbiology and infectious diseases. In addition to the ESCMID Professional Affair Officers of ID and CM, its members include Nur Benzonana (Turkey), ESCMID Advocate for Minorities, Laetitia Kortbeek (The Netherlands), ESCMID Advocate for Gender Balance, and Mario Poljak (Slovenia), ESCMID Advocate for Geographic Balance. During the meeting the aims of the EPC were defined: 1. to improve gender representation and geographic balance within ESCMID and in its educational activities; 2. to define the entity of career discrimination, if any, within European universities and hospitals; 3. to tutor young female scientists and scientists from resource-poor countries and from minority groups; and 4. to link up ESCMID and national societies to bridge the gap of gender and economical and minority status. In the first couple of years the Commission will focus on the first two objectives. For educational purposes, the EPC will closely collaborate with TAE, the ESCMID Education Officer and the ECCMID Programme Director concerning ESCMID educational activities (advisory role). In addition, the EPC plans to analyse the aspects of gender/sex differences in health-risk factors, biological mechanisms, clinical manifestations, and treatment of diseases and disorders in the fields of infection.

The Commission agreed on a number of activities for the initial months. The main project is to verify if and to what extent forms of discrimination with respect to country, gender and ethnicity among professionals in hospitals and universities carrying out academic activities in the CM/ID fields exist.

For this reason, the EPC designed a survey that investigates the dynamics of discrimination present in two different areas: a general area, pertaining to all trainees and professionals in the two specialisation sectors and an association area, applying to ESCMID members. The survey will have an educational purpose and the aim is to reach as many people as possible, be they ESCMID members or not.

The survey, open to ESCMID members and non-members, went online on 16 March 2011 (www.escmid.org/parity) and it has been distributed through the ESCMID mailing list, ESCMID-affiliated Societies, TAE, and the website. ECCMID/ICC participants will also have a chance to fill it out on-site during the meeting in Milan from 7 to 10 May 2011. The survey consists of 48 questions, divided into the following areas: socio-demographic, professional census and environment (discrimination culture and formal/informal behaviours, work-life balance), leadership (academic and hospital career paths, scientific communication positions), and access to management positions. Besides the online survey, a second strategy has been pursued to augment it, namely a documentation strategy to collect data which will be used to integrate into, to assess and to compare with the survey information.

Another project pursued in the last months from the EPC was a new classification of geographic regions for statistical purposes to ensure homogenous representation within ESCMID/ECCMID.

ESCMID will be strongly supporting the activity of the EPC in order to improve equal representation of its members in the Society and in its educational activities. We would also like to encourage all our members to participate in the survey and provide feedback for current and future activities of the EPC.
The TAE, founded in 2009, has been involved in numerous projects and has actively collaborated, under the Presidency of Nathalie van Burgel, with the Executive Committee members of ESCMID since its foundation. For the first time this year the ECCMID/ICC Programme will include the European Trainees Day, a day of teaching dedicated to the unique needs of trainees. During these sessions various topics in CM and ID will be discussed in a highly interactive way between trainees and experienced CM and ID specialists. A second but equally important aim of the day is to give trainees an opportunity to meet and network with each other. During the event the first four winners of the TAE Excellence Training Award (2 CM and 2 ID trainees) will be announced (see page 16 – 17 for details). A TAE Awards Subcommittee (Giulia De Angelis, Frieder Schaumburg, Judith Leitner and Tomas Kacergius) and two TAE Advisory Board members (Nicola Petrosillo and Mario Mondelli) evaluated many applications before selecting the winners. The purpose of the Award is to recognise and reward trainees in ID and CM with outstanding training resumes who have achieved one or more of the following: especially focused on constant improvement of personal education, had international education by spending a period of their training in another country, developed a project idea, made a special contribution to innovative training-cooperation and participated in programmes aimed to improve the quality of local, national or international education in their discipline.

During the last year, TAE actively collaborated with the Union Européenne des Médecins Spécialistes (UEMS) regarding education (see photo). In particular, ESCMID agreed to join the UEMS section of ID in a working group to prepare a syllabus based on existing curricula and meet current standards laid down by the 'educationalists'. In addition to UEMS members, the working group will include ESCMID Executive Committee members (myself and Murat Akova) and one TAE representative (Kate Adams). The TAE Discussion Forum on the ESCMID website has been implemented (http://forum.escmid.org) and facilitated exchange of experiences and proposals of new projects among trainees. The TAE Discussion forum is open not only to TAE members but also to interested trainees and professionals. The discussion topics are moderated by the TAE. Operational procedures of TAE were further developed. The Steering Committee (SC) must consist of one member per European region per speciality. SC members should represent preferably 10 different countries. When electing a new member a not-yet-represented country is preferable. A person from the same country should not be elected within the same discipline in two consecutive elections. To ensure equal representation of all countries, Europe has been classified into five main regions: Western, Northern, Eastern, South-western, and South-eastern Europe.

Future activities include definition of membership and new educational events held during the ECCMID as well as events not related to our main Congress. In particular, TAE will be busy creating a working network of European trainees as well as selecting local contact points for ID/CM trainees in European countries.
Figure 2. Distribution of the ECCs throughout Europe and beyond. Cities with more than one ECC are indicated by the number of Centres. For a list of ECCs, please visit the website (www.escmid.org/ecc).
Collaborative Centres programme

Since the launch of the ESCMID Collaborative Centre (ECC) programme at the beginning of 2009, altogether 52 institutions in Europe (larger sense) have decided to register and take part in this excellent possibility and provide opportunities for colleagues to visit their microbiological laboratories or infectious diseases departments. The highest number of ECCs per country is seven in the United Kingdom, six in the Netherlands and five in Spain. Many eastern, south-western and south-eastern European countries have not yet joined this initiative. One ECC is outside Europe (Tunisia), which makes it possible for visitors to get experience with some rare infections not seen in all European countries and also learn about their diagnostics. Figure 1 shows the distribution of ECCs per European region. Out of the 52 ECCs, 22 provide programmes in the fields of clinical/public health microbiology and ten in infectious diseases/infection control. Twenty ECCs give the Observer the option to get insight into both activities during one visit. Figure 2 shows the distribution of the ECCs throughout Europe and beyond. All information about the currently approved ECCs and an application form for prospective ECCs can be found on the ESCMID website at: www.escmid.org/ecc. To apply for this status a representative of the institution needs to provide a short description about their activities and give the name of two external references, one of which should be from another country. In a second step the representative is asked to describe the activities of the institution or department in more detail so potential ESCMID Observership applicants can find out what the Centre has to offer during an Observership.

Figure 1. Number of ESCMID Collaborative Centres per European region

Observers active in the field of clinical microbiology are expected to get an overview about modern methods in special fields of clinical and public health microbiology: to learn about typing methods and molecular diagnostic methods or how to diagnose rare parasitic or fungal infections. The aim is not only to learn diagnostic skills, but also to gain insight into the organisational structures of the different laboratories. For European diagnostic laboratories it would now be extremely interesting to introduce the EUCAST methodologies for antibiotic resistance determination to be able to collect valid and comparable data about the resistance levels of clinically important pathogens throughout Europe. This is already a requirement for the EU and ECDC (European Centre for Disease Prevention and Control). Quite a few ECCs offer, at present, the possibility to obtain knowledge in this field.

In the field of infectious diseases, institutions are sought with a high volume of patients with specific rare infections, or those which are difficult to diagnose or treat. Observers may also learn about the entire healthcare system of the country and about the varying degrees of collaboration between ID and CM specialists. Hospitals or healthcare centres are expected to sign up that have a special interest in treating tropical diseases, immunocompromised transplant patients or any patients with infections, which are considered difficult to treat.

We strongly encourage ESCMID members from countries where no ECCs exist yet to nominate their own institution as an ESCMID Collaborative Centre. This is an excellent opportunity to start collaboration and accept visitors from other countries.

ESCMID Observership programme

The ESCMID Observership programme started some time after the ECC programme and the first visits took place during the second part of 2009 and still continue. From 24 February 2010 to 31 March 2011 a total of 38 Observership visits took place. Of these, 11 were short visits (less than one week) and 27 lasted for a longer period (2 to 4 weeks). The highest number of Observership visits was in the Centre of Andrej Trampusz, Infectious Diseases Service, University Hospital (CHUV), Lausanne, Switzerland.

Observership visits may be of interest to those who are still in training in Clinical Microbiology or Infectious Diseases to see the differences in training programmes in other countries or to learn about methods or procedures which are not available in their own country. The past Observers found their visits in ECCs very useful. Those attending a clinical microbiology laboratory found it extremely rewarding to experience new techniques and to learn in depth about the organisation and daily functioning of a lab in another country. Those attending in infectious diseases enjoyed practicing in out-patient and travel clinics, as well as participating in ward rounds, infectious diseases board meetings, antibiotic stewardship programmes, student courses, and discussion of lab results. Both could experience the close and complemented work of infectious diseases specialists and microbiologists, being involved fully in the daily work, taking part in the current research, and preparing of studies and articles. Observers are asked to give a short presentation during their visit for the ECC staff about their own institute and activities.

The evaluation of both programmes has started and we plan to continue to evaluate their usefulness during the following years. Potential Observers must be ESCMID members. Staff of ESCMID Collaborative Centres is given priority. Applications for this financial support can be submitted online throughout the year (www.escmid.org/observership).
List of 38 Observership visits which have taken place between 24 February 2010 and 31 March 2011

<table>
<thead>
<tr>
<th>Name of Observer</th>
<th>ECC host</th>
<th>Length of visit</th>
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</thead>
<tbody>
<tr>
<td>Kristina Nadrah</td>
<td>Andrej Trampuz, University Hospital [CHUV], Infectious Diseases Service, Lausanne, Switzerland</td>
<td>12 days</td>
</tr>
<tr>
<td>Sameh S.H. Abu-Zahra</td>
<td>Piotr Kochan, Chair of Microbiology, Jagiellonian University Medical College, Department of Bacteriology, Microbial Ecology and Parasitology, Cracow, Poland</td>
<td>30 days</td>
</tr>
<tr>
<td>Tomislav Kostyanov</td>
<td>Patrice Nordmann, Hospital Bicetre – South Paris Medical School, Bacteriology-Virology, Le-Kremlin Bicetre, France</td>
<td>30 days</td>
</tr>
<tr>
<td>Betond Lakatos</td>
<td>Andrej Trampuz, University Hospital [CHUV], Infectious Diseases Service, Lausanne, Switzerland</td>
<td>27 days</td>
</tr>
<tr>
<td>Agnes Horton</td>
<td>Philippe Vanhems, Eudard Herriot Hospital, Epidemiology and Infection Control Departement, Lyon, France</td>
<td>5 days</td>
</tr>
<tr>
<td>Zehra Kocak Tufan</td>
<td>Elisabeth Nagy, University of Szeged, Institute of Clinical Microbiology, Szeged, Hungary</td>
<td>7 days</td>
</tr>
<tr>
<td>Gurania Kakisi</td>
<td>Jacques Schrenzel, Geneva University Hospitals, Central Lab of Bacteriology, Geneva, Switzerland</td>
<td>28 days</td>
</tr>
<tr>
<td>Peter D. Croughs</td>
<td>Andrej &amp; Olivier Trampuz &amp; Borens, University Hospital [CHUV], Infectious Diseases Service [A. Trampuz] &amp; Septic Surgical Unit [O. Borens], Lausanne, Switzerland</td>
<td>10 days</td>
</tr>
<tr>
<td>Adnan Karavelic</td>
<td>Niels Hoiby, Rigshospitalet, University of Copenhagen, Department of Clinical Microbiology, Copenhagen, Denmark</td>
<td>12 days</td>
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<tr>
<td>Sargysants Narina</td>
<td>Jesús Rodríguez-Baño, Hospital Universitario Virgen Macarena, Infectious Diseases, Seville, Spain</td>
<td>10 days</td>
</tr>
<tr>
<td>Cathy Voide</td>
<td>Yazdan Yazdanpanah, Centre Hospitalier B. Diron, Maladies Infectieuses et du Voyageur, Tourcoing, France</td>
<td>7 days</td>
</tr>
<tr>
<td>Klara Tarkanti</td>
<td>Indran Balakrishnan, Royal Free Hospital, Medical Microbiology, London, United Kingdom</td>
<td>26 days</td>
</tr>
<tr>
<td>Dzmitry Piskun</td>
<td>Roberto Cauda, Università Cattolica del Sacre Cuore, Infectious Diseases, Rome, Italy</td>
<td>25 days</td>
</tr>
<tr>
<td>Giuseppe A. Botta</td>
<td>Winfried Kern, Albert-Ludwig's University, Infectious Diseases &amp; Travel Medicine, Freiburg, Germany</td>
<td>7 days</td>
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<tr>
<td>Vasiliki Gogou</td>
<td>Winfried Kern, Albert-Ludwig's University, Infectious Diseases &amp; Travel Medicine, Freiburg, Germany</td>
<td>18 days</td>
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<tr>
<td>Valentina Mazzocato</td>
<td>Murat Akova, Hacettepe University School of Medicine, Ankara, Turkey</td>
<td>20 days</td>
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<tr>
<td>Lukas Murjda</td>
<td>Roberto Cauda, Università Cattolica del Sacre Cuore, Infectious Diseases, Rome, Italy</td>
<td>10 days</td>
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<tr>
<td>Farshid Fagaz Jahani</td>
<td>Emilio Bouza, Clinical Microbiology and Infectious Diseases, Hospital General Universitario Hospital Gregorio Maranon, Madrid, Spain</td>
<td>10 days</td>
</tr>
<tr>
<td>Aymen Mohammed Mohammed Salih</td>
<td>Piotr Kochan, Chair of Microbiology, Jagiellonian University Medical College, Medical College, Cracow, Poland</td>
<td>8 days</td>
</tr>
<tr>
<td>Name</td>
<td>Institution</td>
<td>Length of Visit</td>
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<tr>
<td>Valentina Mazzotta</td>
<td>Department of Infectious Disease, Università Cattolica del Sacre Cuore, Rome, Italy</td>
<td>30 days</td>
</tr>
<tr>
<td>Jesus Rodriguez Baño</td>
<td>Hospital Universitario Virgen Macarena, Infectious Disease, Sevilla, Spain</td>
<td></td>
</tr>
<tr>
<td>Gary Lane</td>
<td>Infectious Diseases, Western Health, Footscray, Australia</td>
<td>14 days</td>
</tr>
<tr>
<td>Philippe Vanhems</td>
<td>Edouard Herriot Hospital, Hygiene et Epidemiologie Hospitaliere, Lyon, France</td>
<td></td>
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<tr>
<td>Donna Kilmartin</td>
<td>Public Health, Merlin Park Hospital, Galway, Ireland</td>
<td>5 days</td>
</tr>
<tr>
<td>Dominique Caugant</td>
<td>Norwegian Institute of Public Health, Department of Bacteriology and Immunology, Oslo, Norway</td>
<td></td>
</tr>
<tr>
<td>Tatiana Filianova</td>
<td>Department Prevention of Infectious and Somatic Diseases, Vitbeisk, Belarus</td>
<td>5 days</td>
</tr>
<tr>
<td>Peter Kern</td>
<td>University Hospital Ulm, Infectious Diseases, Ulm, Germany</td>
<td></td>
</tr>
<tr>
<td>Antonio De Santis</td>
<td>Laboratorio Analisi Chimico Cliniche e Microbiologiche, Hospital San Paolo, Bari, Italy</td>
<td>15 days</td>
</tr>
<tr>
<td>Emilio Bouza</td>
<td>Hospital General Universitario Hospital Gregorio Maranon, Cinical Microbiology and Infectious Diseases, Madrid, Spain</td>
<td></td>
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<tr>
<td>Emma Johnson</td>
<td>Microbiology, Northern General Hospital, Sheffield, United Kingdom</td>
<td>30 days</td>
</tr>
<tr>
<td>Roberto Caula</td>
<td>Università Cattolica del Sacre Cuore, Infectious Diseases, Rome, Italy</td>
<td></td>
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<tr>
<td>Tamar Khuchua</td>
<td>Infectious Disease, Tbilisi State Medical University, Tbilisi, Georgia</td>
<td>6 days</td>
</tr>
<tr>
<td>Vasiliki Dimou</td>
<td>Microbiology Department, Hippokrateion General University Hospital, Thessaloniki, Greece</td>
<td>20 days</td>
</tr>
<tr>
<td>Ioana Raluca Mihailescu</td>
<td>National Institute of Infectious Diseases, Bucharest, Romania</td>
<td>7 days</td>
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<tr>
<td>Andrej Trampuz</td>
<td>University Hospital [CHUV], Infectious Diseases Service, Lausanne, Switzerland</td>
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<tr>
<td>Özlem Acicbe</td>
<td>Department of Clinical Microbiology and Infectious Diseases, Samsun, Turkey</td>
<td>28 days</td>
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<tr>
<td>Bridget Atkins</td>
<td>Nuffield Orthopaedic Centre NHS Trust, Bone Infection Unit, Oxford, United Kingdom</td>
<td></td>
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<tr>
<td>Sergio Beduschi Filho</td>
<td>Infectious Diseases, Hospital Nereu Ramos, Florianopolis, Brazil</td>
<td>30 days</td>
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<tr>
<td>Andrej Trampuz</td>
<td>University Hospital [CHUV], Infectious Diseases Service, Lausanne, Switzerland</td>
<td></td>
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<tr>
<td>Adedola Olayanika</td>
<td>Medical Microbiology, Ahmadu Bello University, Teaching Hospital, Shika-Zaria, Kaduna, Nigeria</td>
<td>6 days</td>
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<tr>
<td>Csaba Marodi</td>
<td>The James Cook University Hospital, Clinical Microbiology, Middlesbrough, United Kingdom</td>
<td></td>
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<tr>
<td>Blaz Pecavar</td>
<td>Department of Infectious Diseases, University Medical Center Ljubljana, Skofja Loka, Slovenia</td>
<td>12 days</td>
</tr>
<tr>
<td>Andrej Trampuz</td>
<td>University Hospital [CHUV], Infectious Diseases Service, Lausanne, Switzerland</td>
<td></td>
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<tr>
<td>Nurver Urg Toprak</td>
<td>Anaerobic Bacteriology, Marmara University, School of Medicine, Istanbul, Turkey</td>
<td>30 days</td>
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<tr>
<td>Elisabeth Nagy</td>
<td>University of Szeged, Institute of Clinical Microbiology, Szeged, Hungary</td>
<td></td>
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<tr>
<td>Jacques F.O.M. Meis</td>
<td>Department of Medical Microbiology and Infectious Diseases, Canisius-Wilhelmina Hospital, Nijmegen, The Netherlands</td>
<td>2 days</td>
</tr>
<tr>
<td>Andrej Trampuz</td>
<td>University Hospital [CHUV], Infectious Diseases Service, Lausanne, Switzerland</td>
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<tr>
<td>Aylekli Ntaikou</td>
<td>General Hospital of Athens, Athens, Greece</td>
<td>1 day</td>
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<tr>
<td>Yazdan Yazdanpanah</td>
<td>Centre Hospitalier G. Dron, Maladies Infectieuses et du Voyageur, Tourcoing, France</td>
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<tr>
<td>Ms Angeliki Margoni</td>
<td>Microbiology, Children’s General Hospital Aglaia Kyriakou, Athens, Greece</td>
<td>90 days</td>
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<tr>
<td>Patrice Nordmann</td>
<td>Hospital Bicetre – South Paris Medical School, Laboratory of Bacteriology, Virology, Parasitology, Paris, France</td>
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<tr>
<td>Stéphane Corvec</td>
<td>Chu de Nantes, Biology Institute, Department of Bacterology, Nantes, France</td>
<td>30 days</td>
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<tr>
<td>Andrej Trampuz</td>
<td>University Hospital [CHUV], Infectious Diseases Service, Lausanne, Switzerland</td>
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<tr>
<td>Daniela Talapan</td>
<td>Romanian Society of Microbiology, Bucharest, Romania</td>
<td>10 days</td>
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<tr>
<td>Andrej Trampuz</td>
<td>University Hospital [CHUV], Infectious Diseases Service, Lausanne, Switzerland</td>
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</table>
EUCAST in 2011

www.eucast.org

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Gunnar Kahlmeter, EUCAST Chairman,
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EUCAST is the European Committee on Antimicrobial Susceptibility Testing. It aims to provide common European breakpoints and antimicrobial susceptibility methodology. Over the years ESCMID has provided the administrative, financial and scientific framework for EUCAST, which is currently supported (3 years from September 2008) by ECDC.

EUCAST now has harmonised breakpoints for all widely used existing antibacterial agents. In addition, breakpoints have been set for several new agents as part of the licensing process by the European Medicines Agency (EMEA) and some breakpoints have been revised to meet the demands of new resistance mechanisms, extended indications or new administration forms or dosages. Breakpoints for various less common fastidious organisms are being developed in collaboration with European expert groups. Multiple ‘rationale documents’ giving the rationale for EUCAST breakpoints have been published and are available online (www.EUCAST.org/documents/rd).

All EUCAST breakpoints and documents are freely available from the EUCAST website, which also gives details of EUCAST organisation, activities and guidelines. From there users can access another webpage (www.eucast.org/mic) which presents MIC distributions of bacteria and fungi, with wild type populations highlighted and epidemiological cut-off values (ECOFFs) included for surveillance. The MIC website now includes collated data from over 22’000 MIC distributions from worldwide sources. The online information continues to be expanded with new sections on national antibiotic susceptibility testing committees (NACs, see below), frequently asked questions about EUCAST breakpoints and methods, and a table detailing changes to the website (Figure 1). In the last quarter of 2010 there were over 70’000 visitors to the EUCAST websites (Figure 2).

The EUCAST methodology and breakpoints for a disk diffusion method are available on the EUCAST website. The MIC website includes zone diameter distributions based on the new EUCAST disk diffusion method and MIC-zone correlations (e.g. Figure 3). EUCAST breakpoints continue to be implemented in various automated susceptibility testing systems and details of the current compliance of manufacturers with EUCAST breakpoints and methods are available on the website.

NACs are intended to provide a national strategy for antimicrobial susceptibility testing and to help implement EUCAST breakpoints and methods as appropriate. NACs are long established in some countries and more recently have been formed or are being set up in several countries where there was previously no such group (Figure 4). The EUCAST Statutes are being revised so that in the future representatives of NACs will constitute the EUCAST General Committee.

EUCAST is accepted as the European antimicrobial breakpoint committee by the profession, by national breakpoint committees in Europe, the European Medicines Agency (EMA), the European Centre for Disease Control (ECDC), the European Food Safety Authority (EFSA), the pharmaceutical industry and the susceptibility testing devices industry. In Europe, the trend from using other breakpoint guidelines to using EUCAST breakpoints and methods continues. EUCAST breakpoints have now been adopted by the majority of laboratories in several countries, and several more are in the process of changing or plan to change within the next year – the situation is changing rapidly (Figure 5). There has been considerable interest in EUCAST breakpoints from outside Europe and it has been agreed that countries in which a substantial proportion of laboratories follow EUCAST breakpoints may be represented on the EUCAST General Committee.

The EUCAST subcommittee dealing with antifungal agents (EUCAST-AFST) continues to work on breakpoints for antifungal agents and to investigate technical aspects of methods for fungi. The subcommittee on expert rules has completed an update to the published expert rules and a computer program to apply the rules has been developed. The anaerobe subcommittee advises the Steering Committee on breakpoints for anaerobes and is currently running a project on methods for susceptibility testing of anaerobes.

Figure 1. Eucast website
www.eucast.org/latest_changes/
Figure 2. Total number of visitors to EUCAST webpage per quarter from autumn 2009 through 2010

Figure 3. Zone diameter distribution and MIC-zone diameter correlation for E. coli with gentamicin. Numbers in circles are the numbers of bacterial isolates with the same results for both MIC and zone diameter.

Figure 4. Implementation of National Antimicrobial Susceptibility Testing Committees in Europe

Figure 5. Implementation of EUCAST breakpoints in Europe
TROCAR – Translational Research on Combating Antimicrobial Resistance

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About the project
The TROCAR project (Translational Research on Combating Antimicrobial Resistance) was started in 2009 as a consortium of 14 partners from ten different European countries in an attempt to provide specific answers to three main concerns:
1. Are certain resistant strains more epidemic than others? Are certain strains more prone to persist in the human environment? If so, why?
2. Do epidemic and persistent strains have specific virulence, physiological, colonisation or transmission-facilitating traits that non-epidemic strains do not have?
3. What is the origin and what are the mechanisms of acquisition of these fitness-increasing traits in resistant bacteria? Might the elucidation of these mechanisms provide new insights for prediction and intervention?

In this regard, the TROCAR project was meant to focus on three major strategic aims:
1. A definition for the major high-risk resistant clones circulating in Europe
2. The promotion of collaborative European research to investigate specific traits associated with virulence, transmission, persistence and resistance of epidemic clones in comparison with non-epidemic clones
3. The development of bio-informatic tools to fully exploit the genomics data and allow the rapid identification of resistant strains with heightened epidemic potential.

Results after two years
Halfway through the project, the consortium has achieved several important milestones that will contribute to completing the objectives of the original proposal. In this sense, the TROCAR members have agreed on the following definition of ‘high-risk clones’ (HiRiC). ‘High-risk’, resistant clones are those bacterial clones that associate: 1) mechanisms of resistance to antibiotics of critical clinical importance and 2a) the ability to be transmitted with high efficiency among hospitalised patients or 2b) with particular ability to produce severe or invasive infections; or 2c) the ability to efficiently colonise human hosts during long periods of time. The combined effort of the consortium members has resulted in the establishment of an inventory of strains for MRSA, VRE, A. baumannii, P. aeruginosa and extended-spectrum metallo- and acquired AmpC beta-lactamase (ESMAC-BL) producing Enterobacteriaceae according to their epidemiological impact and multidrug-resistant profiles. The addition of strains is expected to continue throughout the length of the project.

These catalogues, together with the epidemiological information provided by the partners, have been used to draw a map representing outbreaks of VRE from various hospitals in France, Germany and Finland, allowing the identification of the major VRE clones causing outbreaks in three participating European countries. Similarly, the geographical abundance of S. aureus/ MRSA clones has been displayed on a web-based mapping tool using a Google interface (publicly available at www.spatialepidemiology.net/srl-maps/), and a multi-locus sequence typing (MLST) database for S. aureus/MRSA has also been established.

The phylogeny of epidemic MRSA, which is widely disseminated in central Europe and attributed to clonal lineages ST22 and ST225, was reconstructed by means of genome-wide single nucleotide polymorphism analysis, which has allowed the identification of epidemic subpopulations in clonal complexes and has also shown that community-acquired MRSA from both clonal lineages represent separate subpopulations. We are also currently focusing on the development of summary statistics to describe geographic structuring on a continental scale.

The dynamics and persistence of E. faecium clones from bacteriemic patients have been studied as a model of the evolution of HiRiC, revealing dominance and persistence of related CC17 sequence types (STs). These STs, enriched in IS16 element and virulence/epidemicity markers (i.e. esp and hyl genes), might contribute to hospital adaptation and might have supplied a substrate for the emergence of vancomycin resistance.

On investigating the epidemiology of A. baumannii, TROCAR members have demonstrated the worldwide dissemination of OXA-23-producing strains. The resistome of A. baumannii is under investigation and the mechanisms of resistance to tigecycline and colistin have also been studied. The overexpression
the efflux pump AdeABC was associated with resistance to tigecycline, whereas resistance to colistin was related to changes in the lipopolysaccharide (LPS) and in the expression of some outer membrane proteins.

The TROCAR consortium has shown that biofilm formation increases the survival rate of *A. baumannii* on dry surfaces and may contribute to its persistence in the hospital setting, increasing the probability of causing nosocomial infections and outbreaks. The efflux-mediated resistance mechanisms in emerging *Acinetobacter* genomospecies have also been investigated.

The collection of ESMAC-BL-producing Enterobacteriaceae includes clinical isolates from Spain, France, the UK, Greece and Italy and the identification of the types of beta-lactamases circulating in Europe is being investigated. A pattern of sudden increases in the prevalence of isolates with particular extended-spectrum beta-lactamase (ESBL) types (especially of CTX-M family enzymes in the community) has been recognised in several European countries. Most of these genes are carried on a plasmid, and different plasmids such as those carrying CTX-M-14, TEM-24, VIM-1 and CTX-M-3 are being currently characterised. Moreover, plasmids carrying CTX-M-1, OXA-48 and SHV-12 have been selected for full sequence analysis.

The inventory of strains has also allowed the selection of five MRSA, two VRE, four *P. aeruginosa* and three *Acinetobacter* specific clones that fulfil the HiRiC criteria defined by the consortium. The genomes of these HiRiC clones are now being sequenced and will be compared with those of non-virulent counterparts to investigate candidate genetic elements involved in enhanced virulence and data produced during the first part of the project has already been published and it can be found on the TROCAR website (www.trocarproject.eu).
ESCMID Conference on the Impact of Vaccines on Public Health
1–3 April 2011

As a scientific society that reaches out to more than 33,000 microbiologists and infectious diseases specialists in Europe and around the world, ESCMID has always been advocating a multifaceted approach to infections that focuses first and foremost on containment at all levels.

On these grounds, ESCMID strives to promote vaccination, and worries that the current lack of correct information among both lay public and health care providers might seriously undermine the efficacy of current and future vaccine campaigns.

Thus, it was decided to organise a conference, to be held on 1–3 April 2011 in Prague, Czech Republic, bringing together world-leading experts to debate the many-sided correlations between vaccines, medicine and society at the dawn of the third millennium.

The conference was held in cooperation with all major societies in the field, namely the International Society for Infectious Diseases (ISID), the International Society of Chemotherapy (ISC), the Infectious Diseases Society of America (IDSA), the European Society for Paediatric Infectious Diseases (ESPID) and the European Respiratory Society (ERS), and it was supported by The Lancet Infectious Diseases.

The Programme highlighted the enduring threat of infectious diseases, with their major challenges and many unmet needs.

Vaccines for many categories of patients were reviewed, ranging from mothers and children to the elderly, and from influenza to HIV and malaria.

Special attention was paid to the hurdles vaccines have to overcome in the ever-changing society of the XXI century, namely, the travel boom as well as natural and man-provoked disasters, and to the problems of developing countries.

Important contributions were provided by both WHO-Europe and ECDC, highlighting their respective roles in this field.

The vaccine pipeline and the near-future perspectives were reviewed, with special interest paid to the vaccine-production process and the respective roles of the main key players (Industry, Researchers, Public-Health Authorities). How trust in immunisation can be built, nourished and maintained was extensively discussed.
Kathryn M. Edwards (IDSA), Francesco Blasi (ERS), Giuseppe Cornaglia (ESCMID), Keith Klugman (ISID)

**Opening Session** (l. to r.) Kathryn M. Edwards (IDSA), Marc Sprenger (ECDC), Giuseppe Cornaglia (ESCMID), Alena Steflova (WHO), Nedret Emiroglu (WHO), Alasdair Geddes (ISC)

Session: Vaccines facing the problems of XXI century  (l. to r.) Wendy Keitel, Philippe Gautret, Murat Akova, Michael Vit, Michel Van Herp, David Bloom  
[on screen, live from Harvard]

Session: Influenza  (l. to r.) Albert Osterhaus, Susanna Esposito, Jan Kyncl, Giuseppe Cornaglia, Francesco Blasi

Session: Meningococcal disease: recent developments and novel challenges  
[l. to r.] Jamie Findlow, Richard Maxon, Pavla Krizova, Robert C. Read, Matthew Snape

Session: Vaccines for special patients  (l. to r.) Kathryn M. Edwards, Birgit Weinberger, Per Ljungman, Vilma Maresova, Mario Poljak

Session: Vaccinology, an evolving science  (l. to r.) Fabienne Anjuère, Rino Rappuoli, Petr Pazdiera, Giuseppe Del Giudice
International Days for Fighting Infection

3rd International Day for Fighting Infection
Hospital acquired infections were the focus for the 3rd International Day for Fighting Infection, being marked on St. George’s Day, as experts met to look at the evolution of infection control in hospitals.

As usual, ESCMID celebrated this day by organising a one-day symposium on milestones in the history of infections.

The conference – ‘Hospitals and Infectious Patients throughout the Centuries’ – was held on 23 April 2010 in the wonderful scenario of Palazzo Vecchio in Florence and traced the evolution over the centuries of infection control in hospitals and of ad-hoc hospitals for infectious patients.

This event was organised in cooperation with the International Society of Chemotherapy (ISC) and the International Society of Infectious Diseases (ISID), and supported by The Lancet Infectious Diseases.

4th International Day for Fighting Infection
In 2011, the International Day for Fighting Infection was organised in Prague, Czech Republic, as an extension of the ESCMID Conference, ‘The Impact of Vaccines on Public Health’. As to be expected, the programme focused on milestones in the history of vaccination over the centuries.

Both the conference and the International Day for Fighting Infection were held in cooperation with all major societies in the field, namely the International Society for Infectious Diseases (ISID), the International Society of Chemotherapy (ISC), the Infectious Diseases Society of America (IDSA), The European Society for Paediatric Infectious Diseases (ESPID) and the European Respiratory Society (ERS), and were supported by The Lancet Infectious Diseases.

All presentations from both the 2010 and the 2011 edition of the International Day for Fighting Infection are available on the ESCMID Online Lecture Library (www.escmid.org/oll)
ESCMID and Infection Control in the Middle East

ESCMID participated in the 5th Annual Meeting of GCC (the Cooperation Council for the Arab States of the Gulf), held on 17–21 October 2010 in Riyadh, Saudi Arabia, organised by the King Saud bin Abdulaziz University for Health Sciences, National Guard Health Affairs, which was held in conjunction with the 5th SHEA Training Course for Infection Control.

Giuseppe Cornaglia was invited to present the Society, its international mission and its growing role in the field of infection control.

During the meeting, debates were held on relevant topics in infection control, as well as on emerging antimicrobial resistance from both a global and a regional perspective, as well as on some of the most important fevers recently emerging in the Arabian Peninsula.

The course informed attendees about methods to prevent and control potentially infectious hazards they face during their clinical practice, and to help assess their infection prevention and control programmes.

ESCMID Activities in South America

Following up previous activities in South America, ESCMID was invited to present the ‘Highlights of the ECCMID 2010’ during the Congress of the Argentinean Society of Infectious Diseases (SADI), which took place in Mar del Plata on 13 and 14 May 2010.

As before in Mexico and Venezuela, ESCMID was invited to organise a workshop about antimicrobial resistance by the SADI organisers, which took place just before SADI’s Congress with the active participation of the local microbiologists.

For the fourth consecutive year, ESCMID co-operated with the Asociación Panamericana de Infectología (API) to organise joint educational symposia and workshops during the XV Pan-American Congress on Infectious Diseases. A symposium on ventilator-associated pneumonia (VAP) was co-organised during the XV Pan-American Congress of Infectious Diseases, held in Punta del Este, Uruguay, on 7 – 10 April 2011. Jordi Rello (Barcelona, Spain) spoke on ‘Care bundles for prevention of VAP’ and George Daikos (Athens, Greece) discussed therapeutic approach and infection control of VAP due to carbapenemase-producing Gram-negatives.
The past year was characterised by important steps in the cooperation between ESCMID and major public health institutions in Europe.

Following the ECDC willingness to strengthen its links with the major Societies in Europe in the fields of microbiology and infectious diseases, ESCMID has participated in the meeting ‘Working together – ECDC and EU societies’, held in Stockholm on 17 January 2011 (see photo), together with the European Society for Clinical Virology, the European Federation of Parasitologists, and the European Society for Paediatric Infectious Diseases. The aim of the meeting was to define and further look into possible areas of cooperation, common interest and benefit.

The ECDC Influenza Digest has been periodically posted on the ESCMID website and newsletter, and a profitable cooperation has been established throughout the more severe part of the winter flu epidemics.

The cooperation between ESCMID and ECDC also led to a strong involvement of ECDC speakers in the ESCMID Conference on Vaccines, held on 1 – 3 April 2011 in Prague, Czech Republic, with Marc Sprenger, ECDC Director, highlighting the ECDC role in this field during the opening session.

On 1 July 2010, the ESCMID President visited the WHO Regional Office in Copenhagen for Europe together with Evelina Tacconelli, ESCMID-WHO Liaison Officer. The WHO Regional Director, Zsuzsanna Jakab, expressed her willingness to foster the cooperation with ESCMID with special reference to those countries that lie within the WHO EURO mandate but are not part of the EU and of its programmes.

In this framework, Nedret Emiroglu, WHO Regional Office for Europe, participated in the ESCMID Conference on Vaccines held in Prague, highlighting the role played by WHO during the recent polio outbreak in Tajikistan.

The ESCMID President, Giuseppe Cornaglia, was invited by the WHO Regional Director, Zsuzsanna Jakab, to participate in the World Health Day held on 7 April in Moscow, Russia, and addressing this year the problem of antimicrobial resistance and its global spread. On this occasion, Giuseppe Cornaglia gave a speech in the scientific seminar titled ‘No action today, no cure tomorrow’ in the presence of the Russian Deputy Minister of Health.

Group picture at meeting ‘Working together – ECDC and EU societies’ in Stockholm in January 2011
World Health Day in Moscow, Russia
(l. to r.) Zsuzsanna Jakab (WHO), Veronika Skvortsova (Russian Deputy Minister of Health and Social Development), Luigi Migliorini (Head, WHO Office in Moscow), Giuseppe Cornaglia (ESCMID)

Marc Sprenger, ECDC Director, (left picture) and Nadret Emiroglu from WHO (right picture) opening the ESCMID Conference on the Impact of Vaccines on Public Health
After the successful experience of last year’s edition, and following up our previous initiatives in this country, ESCMID endorsed also in 2010 the Ditan International Conference on Infectious Diseases (4th DICID) held in Beijing on 15 – 18 July. The theme of the 2010 conference was ‘The changing face of infectious diseases’.

DICID is the annual conference held in Beijing and co-organised by ESCMID together with the Beijing Ditan Hospital and the Global Chinese Association of Clinical Microbiology and Infectious Diseases (GCACMID).

As the largest developing country, China plays an important role in the control of the infectious diseases. The Beijing Ditan Hospital, as the major infectious diseases hospital in China, has taken responsibility to link up the Chinese medical community with the international and organised this annual conference for topical communication.

The mission of DICID is to serve as a platform for timely communication in order to control the spread of infectious diseases effectively. International professionals are invited to share their experience and research findings, obtaining at the same time updated information from China and a clearer picture of the country.

In 2010, ESCMID endorsed two DICID sessions, namely one on ‘Antimicrobial resistance in China and Europe’ and one presenting ‘The best from ECCMID 2010’.

A full-day workshop, also held in Beijing and co-organised with the ESGARS Study Group, preceded the 4th DICID. The workshop’s aim was to initiate in-depth discussion between experts from China and ESCMID, and to get Chinese scientists better acquainted with European protocols and guidelines. It covered bacterial infections, mechanisms of antimicrobial resistance and ecology of resistant bacteria, nosocomial and community-acquired infections, and antimicrobial susceptibility testing and surveillance. Drug discovery and policy in China which is now facing the increasing resistance of Gram-negative bacilli were also discussed. Apart from the general lectures, ‘Meet-the-professors’ luncheons allowed a face-to-face interactive discussion with the experts.

ESCMID is invited to officially co-organise the 5th DICID scheduled for 14 – 17 July 2011, and will endorse once again two sessions, one on antimicrobial resistance in China and Europe and a selection of highlights from ECCMID 2011. The motto of the 2011 DICID is ‘The Resistance Era, Focus on China, Impact on the World’.
ESCMID was invited to the 5th Asian Congress of Pediatric Infectious Diseases (ACPID), held in Taipei, Taiwan, on 23–26 September 2010 under the auspices of the Asian Society for Pediatric Infectious Diseases (ASPID).

ASPID was founded in 1994 in order to promote cross-border collaboration in scientific researches on pediatric infectious diseases of high priority through various scientific events.

Our Society co-organised two symposia, one involving the ESGARS Study Group and focusing on antimicrobial resistance, and one on acute sore throat illustrating the European Guidelines that an ESCMID task force led by Pentti Huovinen has prepared on this topic.
Continuing an established tradition, ESCMID is linking up with the Interregional Association for Clinical Microbiology and Antimicrobial Chemotherapy (IACMAC), chaired by Roman S. Kozlov, to organise scientific meetings in Russia.

The XII International IACMAC/ESCMID Congress on Antimicrobial Therapy was held on 18–20 May 2010 in Moscow, attended by over 1500 participants from 36 regions of the Russian Federation.

The ESCMID delegation was composed of Giuseppe Cornaglia, Paolo Grossi, Winfried Kern, and Robert Read.

IACMAC (www.iacmac.ru/iacmac/en), an ESCMID-affiliated Society, has established programmes of regional and interregional antibiotic-resistance monitoring in Russia. Most activities are organised by the Institute of Antimicrobial Chemotherapy (IAC), founded in 1999 by the late Leonid S. Stratchounski, at the Department of Clinical Pharmacology of Smolensk State Medical Academy and aimed at increasing the level of scientific research in clinical microbiology and antimicrobial chemotherapy.

To help IACMAC develop plans for further expanding their programmes at the national level, ESCMID also participated in two additional meetings, namely the Third Siberian Conference on Antimicrobial Therapy, held in Tomsk on 14–15 October 2010, and the Second Urals Conference on Antimicrobial Therapy, held in Yekaterinburg on 1–2 March 2011, both attended by roughly 1’000 participants.
Lecture at Third Siberian Conference on Antimicrobial Therapy
Upcoming ECCMIDs

22nd ECCMID
London, UK
31 March – 3 April 2012

23rd ECCMID
Berlin, Germany
27 – 30 April 2013
## Upcoming Events at a Glance

### Postgraduate Education Courses and Workshops

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<td>Infections in Critically Ill Patients</td>
<td>21 – 22 May</td>
<td>Athens, Greece</td>
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<td>Aspergillosis: from Allergy to Invasive Disease</td>
<td>25 – 26 May</td>
<td>Manchester, UK</td>
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<tr>
<td>Emerging Multidrug Resistance</td>
<td>6 – 7 Jun</td>
<td>Paris, France</td>
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<tr>
<td>Invasive Fungal Infections: Controversies and Lessons from Clinical Practice</td>
<td>23 – 24 Jun</td>
<td>Saint Petersburg, Russia</td>
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<td>Hospital Epidemiology</td>
<td>3 – 6 Sep</td>
<td>Brunnen, Switzerland</td>
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<tr>
<td>Clinical, Diagnostic and Therapeutic Aspects of Opportunistic Protozoal Infections</td>
<td>6 – 9 Sep</td>
<td>Barcelona, Spain</td>
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<tr>
<td>State-of-the-art in Emerging Fungal Infections</td>
<td>8 – 9 Sep</td>
<td>Cluj-Napoca, Romania</td>
<td>ESCMID Postgraduate Education Course</td>
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<tr>
<td>Cystic Echinococcosis: Burden of Disease in the EU and Clinical Management</td>
<td>23 – 25 Sep</td>
<td>Pavia, Italy</td>
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<tr>
<td>Quinolones: from Bench to Bedside</td>
<td>5 – 7 Oct</td>
<td>Santander, Spain</td>
<td>ESCMID Postgraduate Education Course</td>
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### ESCMID Summer School

- **Infection Control in Developing Countries: Problems and Solutions**
  - **Location:** Kayseri, Turkey
  - **Course Details:** ESCMID Postgraduate Education Course

- **Prevention, Diagnosis and Treatment of Healthcare-associated Infections in ‘Real’ Life**
  - **Location:** Rome, Italy
  - **Course Details:** ESCMID Workshop

- **Carbapenemase-producing Gram-negative Microorganisms: Detection, Epidemiology and Therapeutic Challenges**
  - **Location:** Athens, Greece
  - **Course Details:** ESCMID Postgraduate Education Course

### ESCMID Conferences

- **Helicobacter: from Basic Science to Clinical Issues**
  - **Location:** Villars-sur-Ollon, Switzerland
  - **Conference Details:** ESCMID/FEMS Conference

- **The Lancet / ESCMID Conference on Healthcare-Associated Infections and Antimicrobial Resistance**
  - **Location:** Beijing, China

- **Diagnosing Infectious Diseases: Future and Innovation**
  - **Location:** Venice, Italy
  - **Conference Details:** ESCMID Conference

- **Infections in Immunocompromised Hosts**
  - **Location:** Istanbul, Turkey
  - **Conference Details:** ESCMID Conference
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