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Giuseppe Cornaglia
ESCMID President and Communications Officer

Single pictures can capture and crystallise a given instant; they can hardly shed light on how that instant has occurred or how it will evolve.

Thus the picture on this page simply shows the current ESCMID Executive Committee members, without saying much about their individual histories, and failing to take into account that most of these people will no longer be in office after the ECCMID we are attending.

Nonetheless, I thought this moment is worth immortalising as a landmark in the short history of ESCMID.

In 2011, ESCMID’s congress has become the largest congress worldwide in its field, and ESCMID’s journal has surpassed its most direct competitors in terms of impact factor. The APUA Leadership Award has consecrated ESCMID’s commitment to and achievement in fighting antimicrobial resistance. But the whole array of conferences, courses, and meetings illustrated in this Yearbook bear witness to another very dense and successful year for our Society.

This success could never have come about by chance or out of the blue. The last few years have witnessed huge changes in ESCMID’s structure and in the way we approach science and public health. And the measure of our success is matched only by the extent of our residual ambitions.

All the current members of the ESCMID Executive Committee have invested boundless energy and a great deal of time to achieve these goals. Re-founding the Society has entailed delicate decisions, enormous effort and conscious acceptance of all sorts of personal risks.

Our actions might have been, and actually have been a matter for criticism, but they have shaped the current success of our Society through a great deal of work and an unprecedented burden of responsibilities.

The personal profiles of the incoming EC members outlined in the next few pages, show that they come from diverse areas of interest, in the direction of which ESCMID has been expanding over the past few years, moving on from being an ‘exclusive club’ to becoming a multifaceted, modern scientific society in which everyone can find a place and play a role.

This is why I would ask all ESCMID members and all ECCMID attendees to pay tribute in the warmest terms to the outgoing EC members. They have been working for the future, and the future needs to remember their enduring contribution.
Organisational Diagram

Executive Committee

Standing Members

Elisabeth Nagy (Szeged, HU), Co-Chair
Evelina Tacconelli (Rome, IT), Co-Chair
Murat Akova (Ankara, TR), Chair
Nur Benzonana (Istanbul, TR)
Laetitia M. Kortbeek (Bilthoven, NL)
Mario Poljak (Ljubljana, SI)

Professional Affairs Subcommittee

Elisabeth Nagy (Szeged, HU), Co-Chair
Evelina Tacconelli (Rome, IT), Co-Chair
Bridget Atkins (Oxford, UK)
Arta Olga Balode (Riga, LV)
Nick J. Beeching (Liverpool, UK)
Nur Benzonana (Istanbul, TR)
Emmanuelle Cambau (Paris, FR)
John E. Degener (Smalle, NL)
Matthew Falagas (Athens, GR)
Hilary Humphreys (Dublin, IE)
Piotr Kochan (Cracow, PL)
Laetitia M. Kortbeek (Bilthoven, NL)
Truls Michael Leegaard (Leierskog, ND)
Endre Ludwig (Budapest, HU)
Mario Umberto Mondelli (Pavia, IT)
Nicola Petrosillo (Rome, IT)
Mario Poljak (Ljubljana, SI)
Elisabeth Nagy (Szeged, HU)
Giorgio Palù (Padova, IT)
Laura Piddock (Birmingham, UK)
Mario Poljak (Ljubljana, SI)
Didier Raoult (Marseille, FR)
Robert C. Read (Sheffield, UK)
Evelina Tacconelli (Rome, IT)
Christoph Tang (London, UK)
Andrej Trampuz (Lausanne, CH)
Françoise van Bambeke (Brussels, BE)
Johan Van Eldere (Leuven, BE)
Tom van Gool (Amsterdam, NL)

Education Subcommittee

Yehuda Carmeli (Tel Aviv, IL)
Maiken C. Arendrup (Copenhagen, DK)
Birgitta Evengård (Umea, SE)
Hakan Leblebicioglu (Samsun, TR)
Herve Pelloux (Grenoble, FR)
Paul Savelkoul (Amsterdam, NL)
Stefania Stefani (Catania, IT)

ECCMID Programme Committee 2012

Jose M. Aguado (Madrid, ES)
Murat Akova (Ankara, TR)
Benedetta Allegranzi (Geneva, CH)
Rosemary Barnes (Cardiff, UK)
Jesus Blázquez (Madrid, ES)
Judith Breuer (London, UK)
Emmanuelle Cambau (Paris, FR)
Peter Chiodini (London, UK)
Jonathan Cohen (Brighton, UK)
Giuseppe Cornaglia (Verona, IT)
René Courcol (Lille, FR)
Pepa Gastmeier (Berlin, DE)

European Council

Gunnar Kahlmeter (Växjö, SE)
President-elect, Secretary General (until April 2012)

Collaboration and Internal Matters

Winfried V. Kern (Freiburg, DE)
Treasurer (until April 2012)

Finance

Robert C. Read (Sheffield, UK)
Scientific Affairs Director (until April 2012)

Science

Jordi Vila (Barcelona, ES)
ECCMID Programme Director (until April 2012)

Study Groups

Parity Commission

Elisabeth Nagy (Szeged, HU), Co-Chair
Evelina Tacconelli (Rome, IT), Co-Chair
Nur Benzonana (Istanbul, TR)
Laetitia M. Kortbeek (Bilthoven, NL)
Mario Poljak (Ljubljana, SI)
Giuseppe Cornaglia  
Verona, IT  
President and Communications Officer  
[until April 2012]

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

Johnathan Cohen  
Brighton, UK  
22nd ECCMID President

Erdal Akalin  
Istanbul, TR  
Medical Guidelines Coordinator

Cornelia Lass-Flörl  
Innsbruck, AT

Mario Poljak  
Ljubljana, SI

Jesus Rodriguez-Baño  
Seville, ES

Communication, Publications and Awards

CMI  
ECCMID  
Medical Guidelines

Executive Office

Adrian Baumeier  
Education Manager

Chiara Bolognini  
Communication and Web Manager

Henri Saenz  
Science Manager & ECCMID Scientific Secretariat

Karin Werner  
Professional Affairs Manager

Dianne White  
Membership Manager

Judith Zimmermann  
Finance and Administration Manager, Secretary to the Board

Publication Subcommittee

Giuseppe Cornaglia (Verona, IT), Chair

Didier Raoult (Marseille, FR)

Verity Emmans (Oxford, UK)

Awards Subcommittee

Giuseppe Cornaglia (Verona, IT), Chair

Yehuda Carmeli (Tel Aviv, IL)

Robert C. Read (Sheffield, UK)

Stefania Stefani (Catania, IT)
ESCMID Executive Committee Elections  
Held in 2011

Elections to fill the vacancies in the ESCMID Executive Committee were held from 28 November to 19 December 2011 via a web-based platform. Our members had been asked to propose suitable candidates, all of whom were then included in the ballot. The Nomination Subcommittee selected additional candidates based on professional and geographical criteria to ensure a wide choice and a well-balanced and competent Executive Committee.

The new Executive Committee will be inaugurated at the Assembly of Members held during the 22nd ECCMID in London. The newly elected members of the ESCMID Executive Committee and their personal statements can be found below.

Cornelia Lass-Flörl
I joined ESCMID in 1999 and have enjoyed working for the Society ever since. I joined EFISG in 2003; I have worked hard to build up the group and have been a member of the EFISG Executive Committee since 2007. The 46th ESCMID Postgraduate Course was held in Innsbruck in November 2007. I joined the Education Subcommittee in 2009 and shall be organising the Summer School in Innsbruck in 2012. In addition, I have been a member of the EUCAST-AFST Subcommittee since 2003. I have worked very successfully with ESCMID for more than ten years, during which time I gained the experience needed in order to run for election as an Executive Committee member. ESCMID has given me the chance to develop and enhance my expertise, and I have gained ample recognition and made plenty of friends at ESCMID. I am anxious to apply all my energy and professional expertise with the overall aim of ensuring success and continuity at ESCMID.

Jesús Rodríguez-Baño
My involvement within the Committee will be focused in two areas: Firstly, I am keen to contribute to promoting educational, professional, and research activities that combine a basic and clinical approach, integrating the views of infectious disease and clinical microbiology specialists. Secondly, I am keen to support ESCMID’s activities in the area of patient care by assisting in the further development of clinical guidelines and to propose an initiative for devising and implementing European quality-of-care programmes for patients with infectious diseases. Finally, I would like to contribute to the expansion and influence of ESCMID as a scientific reference for ID and CM specialists and specialists in training around the world as well as help specialists from outside Europe to participate in ESCMID’s activities.

Cornelia Lass-Flörl, born on 24.10.1964  
Position and affiliation: Professor of Microbiology and Head of the Division of Hygiene and Medical Microbiology, Innsbruck Medical University, Innsbruck, Austria

Jesús Rodríguez-Baño, born on 16.05.1965  
Position and affiliation: Associate Professor of Medicine and Head of the Infectious Diseases Unit, Hospital Universitario Virgen Macarena and Department of Medicine, University of Seville, Seville, Spain
Mario Poljak

At this crucial time for Europe and the field of infection-related diseases in particular, I am particularly pleased and honoured to have been elected as a new member of the ESCMID Executive Committee. Given the international nature of our Society and as a founding member of the ESCMID Parity Commission and current ESCMID Advocate for Geographic Balance, I shall continue my efforts to gradually improve all ESCMID-related educational, professional and scientific activities and balance them by gender and country of origin. I strongly believe that we are a truly international Society and that no group should be underrepresented and no one discriminated against because of age or sexual orientation or for racial, regional, religious and/or political reasons in neglect of his or her personal achievements. I shall do my best to ensure that the best specialists from across Europe are selected for all ESCMID activities, with preference given to young scientists and women. I shall work hard together with the other members of the Executive Committee and all ESCMID members to further enhance current and develop new, innovative scientific, educational and professional initiatives within our Society with the goal of helping ESCMID become the most influential scientific, educational and professional society in the infection field with the right and power to address important issues not only within the scientific and professional community but on a much broader scale.

Evelina Tacconelli

I began working with the ESCMID Executive Committee in 2009, when I was co-opted Professional Affairs Officer (PAO) in Infectious Diseases, and I feel honoured to be an elected member of the new executive group. I believe that the Society would greatly benefit from broadening the basis of participation, as a result of which the ESCMID Parity Commission was formed, to play a key role in diversifying participation in the Society’s educational and scientific activities. In my opinion, nowadays, international scientific societies are fundamental for improving access for all scientists to the best available evidence in their discipline and for making research and work opportunities equally available throughout Europe. The Society should seek to bridge the gap between scientists at national level and the international scientific community. I cannot contemplate achieving these goals without the help and essential contribution of all ESCMID members.

Evelina Tacconelli, born on 26.11.1967
Position and affiliation: Assistant Professor of Infectious Diseases, Catholic University, Rome, Italy

Mario Poljak, born on 25.12.1965
Position and affiliation: Full Professor of Microbiology and Immunology at the Faculty of Medicine, University of Ljubljana, and Head of the Laboratory for Molecular Microbiology and of the Slovenian HIV/AIDS Reference Centre Institute of Microbiology and Immunology, Faculty of Medicine, University of Ljubljana, Slovenia
ESCMID reborn

In 2011, following the vote by members, the old society, ESCMID based in Germany, ceased to be and all its assets were placed in a new entity, ESCMID Förderverein – ‘The Society of Friends of ESCMID’ based in the old location near Munich. This organisation provides support to ESCMID, now based in Switzerland with its head office and competent staff in Basel. Each person on the staff has responsibilities matched to those of the respective Executive Committee members. You can meet them all in the picture to the right and by visiting the ESCMID stand at ECCMID in London. Take the opportunity to discuss your ESCMID membership and to obtain a copy of the new European Manual of Clinical Microbiology.

Please note below the new postal address of the ESCMID Basel office:

ESCMID, Executive Office
P.O. Box 214
4010 Basel
Phone +41 61 508 01 53
Fax +41 61 508 01 51

It is important for ESCMID to support clinical microbiologists and infectious disease specialists in Europe. It is especially important that we facilitate the professional life and careers of our young colleagues. And this we do by offering them ESCMID membership. There are many colleagues in Europe who are not yet members of ESCMID. They are often members of national societies of clinical microbiology or infectious diseases but may not yet have found their way to ESCMID. As members and sometimes senior colleagues, tell them about ESCMID and ECCMID, about our travel grants, ESCMID Observerships and Collaborative Centres and of the possibilities offered by ESCMID to visit colleagues in other countries. Tell them about ESCMID educational activities, about the Summer School and all the postgraduate courses. Tell them about CMI and ESCMID guidelines as well as about working groups and EUCAST. Tell them about our Parity Commission and its important work to ensure equality in science, in the workplace and in Europe. We have many issues that need our collaborative efforts – between our two specialities, across borders, in education and in specialisation.

Late 2011 a new web-based membership programme was developed and introduced on the website. Membership registration in our new society picked up. Membership is now for 365 days or multiples thereof instead of calendar years. The new programme is fully integrated with the ESCMID website and members logging onto the website are automatically reminded to update and/or upgrade their membership. Although automatic, membership handling needs friendly advice and sometimes hands-on assistance. For this, please contact escmidmembership@escmid.org.

Young scientist memberships (with the benefits of full membership but at half the cost) are available for anyone 35 years or younger. Others can choose between full membership and basic membership. The need for manual handling of membership is now greatly reduced. As usual, the looming ECCMID 2012 boosted membership and by mid-February 2012 ESCMID had over 2000 members.

During 2012 all members of affiliated national societies will be offered ESCMID membership as part of a major drive to attract members to our new society, ESCMID based in Switzerland.

The growth of our society and its main congress allow us to collaborate with and support activities in many fields of clinical microbiology and infectious diseases, both at national and international level.

Visit the ESCMID website at www.escmid.org. It is constantly growing, now under the competent hands of our new webmaster Chiara Bolognini.
European Council

Gunnar Kahlmeter
President-elect and Secretary General
gunnar.kahlmeter@escmid.org

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 science and education in clinical microbiology and infectious diseases at both national and international levels. Affiliated Societies are normally represented by their presidents or a nominee. These representatives make up the European Council, which meets during ECCMID. ESCMID is grateful for the valuable advice provided. A list of Affiliated Societies can be found on the website (www.escmid.org/council). From last year, all societies have been asked to reaffirm their affiliation with ESCMID, now based only in Switzerland. The new society is actively recruiting national societies in clinical microbiology, infectious diseases, antimicrobial chemotherapy or specialised fields within one or several of the main fields. Several of ESCMIDs 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
In my role as Secretary General and Chairman of EUCAST, I have visited many European and non-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. Last year I tried to list all of them but failed and this year would see at least 7 more countries added to the list. The travelling in itself is sometimes arduous, but the joy of meeting new and old friends and of seeing young colleagues enthusiastically make use of all the opportunities offered by the many collaborative programmes and courses more than make up for it.

ESCMID membership of Affiliated Societies and their members
With the opening of ESCMID Switzerland all Affiliated Societies were offered to sign up with the new ESCMID on the same terms as with ESCMID Germany, which is now closed. Should you not have done so, please contact our office in Basel. During ECCMID in London 2012, we aim to discuss a special membership offer to all members of Affiliated Societies. 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 international base through ESCMID, as a complement to our respective national bases.

Implementation of a European standard for antimicrobial susceptibility testing through national societies, national AST committees (NACs) and EUCAST, ESCMID and ECDC
EUCAST, ESCMID and ECDC have encouraged, through national societies, European countries to form national antimicrobial susceptibility testing committees (NACs) to help introduce national strategies for harmonised antimicrobial susceptibility testing, liaison with EUCAST and take on the education and training of staff at national level. Many have heeded the call. This work will continue. EUCAST and ESCMID have just signed a new contract with ECDC for the continued support of EUCAST activities. See the separate article on ‘EUCAST’ on page 50.
In June 2011 ESCMID and its president, Giuseppe Cornaglia, were selected by the Alliance for the Prudent Use of Antibiotics (APUA) to receive the 2011 APUA Leadership Award.

This annual award recognises extraordinary leadership from individuals and scientific or clinical organisations to ensure appropriate antibiotic use in order to maintain treatment effectiveness.

The APUA Awards Committee decided that ESCMID deserved special recognition for its tireless promotion of antibiotic resistance education and action to improve antibiotic access and use.

In particular, ESCMID’s efforts in establishing effective expert study groups and educational initiatives in developing countries were acknowledged. Thanks to these actions, prudent and efficient use of antibiotics has spread through myriad top-level educational activities on antibiotic use and its control, involving the organisation of dozens of postgraduate educational courses on all aspects of antibiotic usage, with special focus on the problems of Eastern Europe, China and Latin America. Many of the educational courses have been conducted in languages other than English and have been instrumental in liaising with national societies to become involved in the practical activities of the programme.

The leadership award was presented at APUA’s 30th anniversary celebration and reception, held on 18 September 2011 in Chicago, USA.
In 2011 ESCMID went through a period of profound transformation relevant to administration and financial matters. The new ESCMID with its seat in Switzerland had to plan its independent budget, financial transactions and administration without losing the ‘previous’ ESCMID remaining contributions to support clinical microbiology and infectious diseases in Europe.

The year 2011 was challenging. The new ESCMID did not yet have an income and therefore a loan was received from the ‘previous’ ESCMID to initiate its business. Almost EUR 0.5 million were spent for key activities in scientific and professional affairs, in education and for communication/publication (Figure 1). We needed to rebuild our membership and raise sufficient funding for all our activities and offerings, and we are now looking forward to seeing the financial figures of our annual congress ECCMID in London this year and its contribution to the funds available in 2012 and the coming years. With the establishment of the new ESCMID careful consideration was given to various administration expenses, and we believe that we will demonstrate our enhanced efficiency in these matters in the coming closing financial statement.

The 2012 budget foresees expenditures of approximately EUR 1.7 million in the areas of science, professional affairs and education (Figure 2). This amount is higher than it ever was in the past with the ‘previous’ ESCMID. ESCMID is proud to use its funds to continue to offer support for previously successful projects and affairs and to be able to increase funding for new scientific and educational activities including Study Groups, conferences and workshops, practice guidelines, awards and grants.

On a personal note, I need to say goodbye as the treasurer of ESCMID, but will serve on the committee responsible for the proper liquidation of the ‘previous’ ESCMID and try my best to guarantee completing of this process in the best interest of its previous members. To work on ESCMID’s Executive Committee and to reshape this organisation was a superb experience with cooperation and dialogue, vision and trust, friendship and leadership, which I am sure I will miss.

Winfried V. Kern
Treasurer,
kern@if-freiburg.de

Figure 1. Expenses 2011 for key activities

Figure 2. Budgeted expenses per portfolio for the year 2012
We are pleased to present the outstanding award and research grant recipients for the year 2012. ESCMID’s strong commitment to this programme is again evident this year by continuing awards funding and increasing in Research Grant funding, allowing us to support 21 individuals versus 18 in 2011.

Emilio Bouza (Madrid, Spain) is the ESCMID Excellence Awardee for 2012. The Award pays tribute to his more than 30-year contributions to the field for the benefit of internists, infectious disease specialists, microbiologists and basic scientists alike.

The Young Investigator Awardees for 2012 are Andrea Endimiani (Bern, Switzerland) and Christian Giske (Stockholm, Sweden). Their research focuses on various aspects of multi-drug-resistant (MDR) Gram-negative infections, thus certifying both the growing magnitude of the problem and the high level commitment of those involved in this field.

Twenty-one young colleagues received research grants to work on their proposed basic or applied research projects. We are pleased to present awardees and recipients of ESCMID funding in 2012 below.

In addition to the awards, grants and fellowships, ESCMID supports young colleagues with merit-based travel grants and/or free registration to enable them to attend ECCMID. For the ECCMID London, 120 persons received travel grants and/or free registration to present results of their work (EUR 73’600). In comparison with 2011, we increased spending by nearly EUR 10’000 to provide more young persons with a grant and free registration, making them more likely to be able to attend. ESCMID supports its young members also with attendance grants for ESCMID conferences, the Summer School, post-graduate educational Courses or other educational activities. In 2011 almost EUR 168’000 was spent for this purpose.
Emilio Bouza Santiago

Emilio Bouza is currently the Director of the Microbiology and Infectious Disease Division at the Gregorio Maranon Hospital in Madrid, Spain. He is also a full professor of the Department of Medicine at the Universidad Complutense of Madrid. Emilio Bouza is a specialist in Internal Medicine and Clinical Microbiology. He did his Internship and Residency at Hospital Puerta de Hierro Hospital in Madrid between 1971 and 1975 (Autonomous University of Madrid).

From 1975–1977, he did a post-doctoral training in Infectious Diseases at the Center for the Health Sciences of the University of California in Los Angeles (UCLA). His main mentors were William Hewitt, Sidney Finegold, Richard Meyer and Lowell Young.

In 1977 he founded one of the first modern Infectious Disease units in Madrid (Spain) at the Ramon y Cajal Hospital, integrating microbiologists and internists, in Fernando Baquero’s department. He remained leader of that unit until 1984.

Emilio Bouza was a founding member (1982) and former president of the Spanish Society for Clinical Microbiology and Infectious Diseases (SEIMC), created with the objective of bringing together clinicians and microbiologists for the better management and care of infectious diseases. Since 1984 he is the Director of the Department of Clinical Microbiology and Infectious Diseases in the Gregorio Maranon Hospital, a division that combines the work of internists, infectious disease specialists, microbiologists and basic scientists.

He has trained more than 30 rounds of residents in clinical microbiology and infectious diseases and has provided specific post-doc training to more than 500 physicians and clinical microbiologists from Spain and other countries. His centre is one of the ESCMID Collaborative Centres.

He held several positions within ESCMID, including elected Member of the Executive Committee and Secretary General of the Society. He was the Editor-in-Chief of Clinical Microbiology and Infection for a period of 4 years, following Professor Jacques Acar’s editorship. Emilio Bouza was the first Chairman of the Study Group of Nosocomial Infections (ESGNI) and during this period the group produced the ten initial ESGNI pan-European studies in fields such as bacteraemia, catheter-related infections, urinary-tract infections, ventilator-associated pneumonia and staphylococcal colonisation.

He has authored more than 500 indexed publications and is author of over 100 book chapters. His research interests lie in the diagnosis and treatment of nosocomial infections including ventilator-associated pneumonia, catheter-related infections, invasive fungal infections, bloodstream infections, endocarditis, staphylococcal infections and Clostridium difficile-associated diarrhoea. His present Hirsch Index is 44.

Emilio Bouza will be presented the ESCMID Excellence Award by Giuseppe Cornaglia, ESCMID President and Chairman of the Awards Subcommittee, on Sunday, 1 April 2012. During the ceremony he will give his award lecture: ‘Catheter-related infections: a link between clinicians and microbiologists’.
ESCMID Young Investigator Awards for Research in Clinical Microbiology and Infectious Diseases 2012

Andrea Endimiani

Andrea Endimiani received his MD board certification in Medical Microbiology and PhD in Immunopathology at the University of Insubria (Varese, Italy). He worked at the University of Pittsburgh (2006–2007) under the supervision of David Paterson and then at the Case Western Reserve University of Cleveland (2007–2010) under the direction of his mentor Robert Bonomo.

Andrea Endimiani will be presented his award during the ESCMID Young Investigator Awards Session on 3 April 2012. During the session, he will give his talk: ‘Antibiotic-resistant Gram-negative organisms of animal origin: an emerging problem for human health’.

Research Interests

Andrea Endimiani has constantly managed to combine basic microbiology, epidemiology, pharmacology, biochemistry and molecular tools for investigating and improving the outcome of multidrug-resistant (MDR) Gram-negative infections. Currently, he works as a clinical microbiologist at the Institute for Infectious Diseases of the University of Bern, Switzerland. He focuses on biochemistry, molecular biology and epidemiology of ESBLs, AmpCs and carbapenemases detected in Gram-negatives of human and animal origin. He is also developing novel diagnostic techniques to rapidly detect MDR organisms responsible for bacteraemia and is implementing an animal model of infection to evaluate new antibiotic strategies against MDR Gram-negatives.

Christian Giske

Christian Giske started his career in clinical microbiology approximately nine years ago as a resident at Karolinska University Hospital while also doing his PhD studies there. He is now a consultant physician and associate professor in Clinical Microbiology, and leader of a research group at Karolinska Institutet.

Christian Giske will be presented his award during the ESCMID Young Investigator Awards Session on 3 April 2012. During the session, he will give his talk: ‘Dissemination of acquired carbapenemases in Gram-negative bacilli: a story of successful clones’.

Research Interests

The research of Christian Giske focuses on multidrug-resistant Gram-negative bacilli, mostly K. pneumoniae and P. aeruginosa, including population biology studies using MLST. Several clinical studies are ongoing – one study of the duration and dynamics of fecal carriage of ESBL-producing Enterobacteriaceae, and another project exploring patient and bacterial factors decisive in clinical outcome in K. pneumoniae bloodstream infections. Among the major findings of his research group are the description of the highly epidemic K. pneumoniae clone ST258, and several epidemic clones of P. aeruginosa (CC111 and CC235). His research group played a key role in the detection of the carbapenemase NDM-1, and is at present involved in next generation sequencing of ESBL-plasmids.
ESCMID Excellence Training
Awardees 2012

For Clinical Microbiology

Meera Chand *
Health Protection Agency
Colindale, London, United Kingdom

Emma Jane Hutley *
Microbiology, University College London Hospitals,
Surrey, United Kingdom

Chrysanthi Skevaki
University of Athens
Second Department of Pediatrics,
Athens, Greece

* Joint Award

For Infectious Diseases

Lorenzo Guglielmetti
University of Verona Hospital
Unità Operativa di Malattie Infettive,
Verona, Italy

Koen Vanden Diessche
Radboud University
Nijmegen Medical Centre Paediatrics,
Nijmegen, The Netherlands
ESCMID Research Grants 2012

The following ESCMID members have received a Research Grant in 2012 for the indicated project.

**Giuliana Banche**
Public Health and Microbiology, University of Turin, Turin, Italy
Project: Phagocytes in multiple sclerosis: altered microbicidal functions related to the disease

**Agostinho Carvalho**
Experimental Medicine and Biochemical Sciences, University of Perugia, Perugia, Italy
Project: Genetic variants of PTX3 and invasive aspergillosis: from risk assessment to mechanistic insights

**Cristina Cigana**
Division of Immunology, Transplantation and Infectious Diseases, San Raffaele Scientific Institute, Milano, Italy
Project: Host response to *Pseudomonas aeruginosa* adaptation during airway chronic infection

**Julie Delaloye**
Infectious Diseases, Centre Hospitalier Universitaire Vaudois, Lausanne, Switzerland
Project: Role of macrophage migration inhibitory factor (MIF) as a regulator of plasmacytoid dendritic cell (pDC) function

**Karen Fitzmaurice**
Dept. of Immunology Oxford, University of Oxford, United Kingdom
Project: An analysis of the correlates of protective immunity in a single source outbreak of HCV infection

**Maddalena Giannella**
Clinical Microbiology and Infectious Diseases, Hospital General Universitario Gregorio Maranon, Madrid, Spain
Project: Pneumonia in solid organ transplantation (PISOT) study

**David Fewer**
Food and Environmental Sciences, University of Helsinki, Helsinki, Finland
Project: Novel therapeutic agents active against *Staphylococcus aureus*

**Stéphanie Matrat**
Animal Health Department, Veterinary Faculty, University Complutense of Madrid, Madrid, Spain
Project: Dissection of the SOS network to identify novel anti-microbial targets

**Jacob Moran Gilad**
Ministry of Health, Jerusalem, Israel
Project: Genomic analysis of carbapenem-resistant Acinetobacter strains associated with fatal hospital-acquired infections
**Georgia Sfyroera**
Institute of Radiisotopes and Radiodiagnostic Products, NCSR Demokritos, Agia Paraskevi, Athens, Greece

*Project:* Design and comprehensive evaluation of human antibodies against complement evasion proteins of *Staphylococcus aureus*: a novel approach towards targeted antimicrobial therapy

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**Alda Saldan**
Dept. of Histology, Microbiology and Medical Biotechnologies, University of Padua, Padova, Italy

*Project:* Evaluation of the CMV- and BKV-specific cellular immune response (CD4+ and CD8+ T-cells) in hematopoietic stem cell transplant patients

---

**Sara Maria Soto**
Barcelona Centre for International Health Research - CRESIB, Barcelona, Spain

*Project:* The role of the ibeA gene of *Escherichia coli* in amniotic membrane translocation. Detection of this gene as a potential screening tool to avoid preterm labor

---

**Leif Erik Sander**
Dept. of Infectious Diseases and Pulmonary Medicine, Charité University Hospital Berlin, Berlin, Germany

*Project:* Identification of cellular receptors for prokaryotic mRNA

---

**Elda Righi**
Infectious Diseases, Insubria University, Varese, Italy

*Project:* T-cell polarity and cytokine signatures in HIV-positive recipients of solid organ transplant

---

**Angela Novais**
Microbiology, REQUIMTE, Faculty of Pharmacy, University of Porto, Porto, Portugal

*Project:* Validation and optimization of high-throughput methods (MALDI-TOF, FT-IR) to identify and track *Escherichia coli* clinically relevant clones

---

**Thomas Pembroke**
School of Medicine, Cardiff University, Cardiff, United Kingdom

*Project:* Mechanisms of natural killer cell activation and evasion by hepatitis C virus

---

**Kenneth Segers**
Microbiology and Immunology, Rega Institute for Medical research, Catholic University of Leuven, Leuven, Belgium

*Project:* Evaluation of the preprotein translocation nanomotor of *Staphylococcus aureus* as a molecular target for the development of novel antibiotics

---

**Aranzazu Valverde de Francisco**
Microbiology, Hospital Universitario Ramón y Cajal, Madrid, Spain

*Project:* Enterobacteriaceae-producing carbapenemases from human, animal and environmental origins: a multilevel comparative approach
ESCMID Research Grants 2012 (cont.)

Ronald van Rij
Medical Microbiology,
Radboud University Nijmegen
Medical Centre,
Nijmegen, The Netherlands
Project: Host-pathogen interactions: a role for microRNAs in Dengue virus infection

Ulrich von Both
Paediatrics,
Imperial College London,
London, United Kingdom
Project: Childhood TB – a new acquired immune deficiency syndrome

Hilde van der Schaar
Medical Microbiology,
Virology Section,
Radboud University Nijmegen
Medical Centre,
Nijmegen, The Netherlands
Project: Identification of critical host factors in enterovirus replication

Marcia Boura
Instituto Medicina Molecular,
Unidade Microbiologia e Infecção,
Lisbon, Portugal

She will give a short oral presentation titled ‘Malaria Predisposes to Bacterial Sepsis: Is malaria pigment the key factor?’ at the Sepsis Forum on Tuesday, 3 April 2012.

ISF Sepsis Award 2012
Main activities

The Scientific Affairs Officer (SAO) coordinates the activities of all Study Groups (SGs), which represent the ‘engine room’ of ESCMID scientific activity. 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 forums. In addition, we encourage the development of new SGs. This has led to exciting new projects within existing groups (for a group overview see page 22–25) and the foundation of new groups (see page 21). The new groups will have their inaugural meetings at ECCMID in London. 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 2011 resulted in positive feedback and encouraging suggestions by SAS.

Changes ahead

ESCMID is reshaping its scientific activities. The society 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 who are working within SGs and becoming very active in their own fields. Over the last year ESCMID has begun the process of coordinating science in a more comprehensive manner. ESCMID now stratifies its scientific activities into four Sections and has defined five major Themes of scientific endeavour (see box). Starting in April 2012, 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 devoted to a larger group of experts and members of the society, and is hopefully leading 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 SAS also oversees. One of these longstanding collaborations is the ESCMID/FEMS Conference and 2012 will see the 8th in the series of very successful meetings. SAS also cooperates with the ECCMID Programme Director in developing the scientific programme of ECCMID. Finally, members of 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 current and future activities.

Finally I would like to thank all the members of SAS, particularly those members who will, like myself, stand down in 2012. I also welcome warmly the newly appointed members of the committee and wish them the very best of luck for the future.

ESCMID Sections (and responsible Section Leader)
- Bacteria & Bacterial Diseases [Stefania Stefani, Catania, IT]
- Fungi & Fungal Diseases [Maiken Cavling Arendrup, Copenhagen, DK]
- Parasites & Parasitic Diseases [Birgitta Evengård, Umea, SE]
- Viruses & Viral Diseases [Hakan Leblebicioglu, Samsun, TR]

ESCMID Themes (and responsible Theme Leader)
- Pathogenesis & Immunology [Hervé Pelloux, Grenoble, FR]
- Epidemiology, Public Health & Vaccinology [Rosemary Barnes, Cardiff, UK]
- Clinics & Therapeutics [Yehuda Carmeli, Tel Aviv, IL]
- Diagnostics [Paul Savelkoul, Amsterdam, NL]
- Antimicrobial Resistance & Susceptibility Testing [German Bou, La Coruna, ES]

For more information see www.escmid.org/science.
ESGCIP has started its activities in the field of infections in critically ill patients.
Planned activities:
• Organise workshops and other sessions during the ECCMID annual meetings and outside ECCMID
• Cooperate with ESICM during the annual European Conference of Critical Care Medicine
• Organise and disseminate a European survey through an electronic questionnaire to track background knowledge and beliefs of HCWs on the topic of infections by multidrug-resistant bacteria. This data will form the basis of educational activities of the SG.

ESGIE has started its activities in the field of infections in the elderly.
Planned activities:
• Organise an educational workshop on infections in the elderly at ECCMID
• Organise a free-standing (not linked to ECCMID) educational activity (postgraduate education course or technical workshop) to be held in 2013
• Perform a collaborative research project on the epidemiology of infections in the elderly
• Promote the development of a consensus document or clinical guidelines on the management of bacterial and viral infections in the elderly.

ESGLI has started its activities in the field of Legionella infections. Historically, ESGLI is a continuation of the highly active EWGLI group (European Working Group for Legionella Infections) with continuous support from ESCMID.
Planned Activities:
• In 2012 as well as 2013 a scientific meeting will be organised. Ideally, these meetings will take place in the same period and at the same venue as the yearly European Legionnaires Disease Surveillance Network (ELDSNet) meetings. The latter are organised by the European Centre for Disease Prevention and Control (ECDC). The 2012 Meeting will be held in Dresden, Germany, 4–7 September 2012.
• A collaborative study on the quality of urinary antigen assays will be undertaken and published.
Existing ESCMID Study Groups

**EFISG**
European Society of Clinical Microbiology and Infectious Diseases

Business meeting at ECCMID/ICC 2011 in Milan

**EFWISG**
European Society of Clinical Microbiology and Infectious Diseases

Business meeting at ECCMID/ICC 2011 in Milan

**EMESG**
European Society of Clinical Microbiology and Infectious Diseases

Business meeting 2009

**EPASG**
European Society of Clinical Microbiology and Infectious Diseases

Business meeting at ECCMID/ICC 2011 in Milan
Existing ESCMID Study Groups (cont.)

**ESGARS**
ESCMID Study Group for Antimicrobial Resistance Surveillance
European Society of Clinical Microbiology and Infectious Diseases

Business meeting at ECCMID/ICC 2011 in Milan

**ESGCP**
ESCMID Study Group for Clinical Parasitology
European Society of Clinical Microbiology and Infectious Diseases

Business meeting at ECCMID/ICC 2011 in Milan

**ESGCD**
ESCMID Study Group for Clostridium difficile
European Society of Clinical Microbiology and Infectious Diseases

Business meeting at ECCMID/ICC 2011 in Milan

**ESGICH**
ESCMID Study Group for Infections in Compromised Hosts
European Society of Clinical Microbiology and Infectious Diseases

Business meeting at ECCMID/ICC 2011 in Milan

**ESGEM**
ESCMID Study Group for Epidemiological Markers
European Society of Clinical Microbiology and Infectious Diseases

Business meeting at ECCMID/ICC 2011 in Milan
Business meeting at ECCMID/ICC 2011 in Milan
ESCMID Medical Guidelines

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 2011 – 2012
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>Treatment of acute uncomplicated cystitis and pyelonephritis in women</td>
<td>IDSA/ESCMID/ISG</td>
<td>published, 2011</td>
</tr>
<tr>
<td>Treatment of lower respiratory tract infections</td>
<td>ERS/ESCMID</td>
<td>published, 2011</td>
</tr>
<tr>
<td>Diagnosis and treatment of Candida infections</td>
<td>ESCMID</td>
<td>to be published, 2012</td>
</tr>
<tr>
<td>Guideline for management of sore throat</td>
<td>ESCMID</td>
<td>to be published, 2012</td>
</tr>
<tr>
<td>The diagnosis and management of vertebral osteomyelitis</td>
<td>IDSA/ESCMID</td>
<td>started, 2010</td>
</tr>
<tr>
<td>Clinical practice guidelines on leishmaniasis</td>
<td>IDSA/ESCMID/ASTMH</td>
<td>started, 2010</td>
</tr>
<tr>
<td>Infection control measures for MDR Gram-negative bacteria in the healthcare setting</td>
<td>ESCMID</td>
<td>started, 2011</td>
</tr>
</tbody>
</table>

H. Erdal Akalin
Coordinator for Clinical Practice Guidelines
eakalin@doruk.net.tr
Good reasons to join us:

- Subscription to the monthly issues and supplements of *Clinical Microbiology and Infection (CMI)*, in print and/or online
- Registration discounts for ECCMID, ESCMID Summer School and other scientific and educational events organised or endorsed by ESCMID
- Receipt of ESCMID Newsletter by email and ESCMID Yearbook by post
- Option to subscribe to several European journals at a preferential rate
- Access to ESCMID member-only webpages, including the Online Lecture Library, the Membership Directory and much more
- Eligibility for ESCMID Awards, Research Grants and Observerships
- Right to vote and actively participate in shaping the Society and European clinical microbiology and infectious diseases through participation in working groups committees, educational activities and much more

Apply for ESCMID Membership
Visit our website and join us now!

www.escmid.org/membership
At the 21st ECCMID/27th ICC joint meeting held in Milan from 7 to 10 May 2011, several factors converged to make for an outstanding congress: Firstly, the joint efforts of both Societies, ESCMID and the International Society of Chemotherapy (ISC); Secondly, the excellent collaboration with Teresita Mazzei (ISC president) and Andrea Novelli (Congress president); Thirdly, the work of the highly professional Programme Committee that put together the Scientific Programme.

This was a successful Congress in many ways, and we broke two records. Firstly, the number of registered scientific delegates attending the meeting was 8’231, the largest number of participants in ECCMID history (Table 1 and Figure 1). The total number of Congress participants was 9’991 from 106 different countries. Figure 2 shows a breakdown of the participants by region.

Secondly, we received 3’733 abstracts – the largest number ever. A total of 248 reviewers conducted a blind review of the abstracts. We always receive some complaints about specific abstracts being rejected. For those who are not familiar with the review system used, it is as follows: Each abstract is reviewed by four reviewers, and each reviewer gives the individual abstract a score from 1 to 6. The mean is calculated. Outliers are dealt with, for example, if three reviewers give 3, 4 and 3, and a fourth reviewer 1, the abstract is looked at by an expert member of the Programme Committee and graded again, and a mean point value is calculated. In 2011, the number of rejected abstracts was just above 30%. This high rejection rate contributed to the high quality of the presentations and posters. However, many good abstracts had to be rejected owing to time and space constraints. The most popular topics of accepted abstracts were: diagnostic/laboratory methods other than molecular (with 261 abstracts), resistance surveillance (222), molecular bacteriology (201), infection control (168) and clinical epidemiology of nosocomial infections (168).

The congress programme consisted of 18 educational workshops, 11 keynote sessions, 18 meet-the-expert sessions, 58 official symposia, 30 oral sessions and 21 integrated symposia. The total number of speakers and chairs was 294. Figure 3 shows the wide distribution of the countries of origin of the speakers. The contact time during keynote lectures, symposia, educational workshops, meet-the-expert sessions and oral sessions hit an all-time high of more than 260 hours.

I would like to take this opportunity to invite the delegates who attended ECCMID to get in touch with us with any comments or criticism that can help improve the meeting.

Dear Colleagues and Friends, on behalf of the Society, I would like to thank you all for helping make the 21st ECCMID/27th ICC possible. I look forward to our next meeting!

Table 1. Key ECCMID figures

<table>
<thead>
<tr>
<th>Number of participants:</th>
<th>Exhibition:</th>
</tr>
</thead>
<tbody>
<tr>
<td>9’991 from 106 different countries, of which: 8’231 scientific delegates</td>
<td>123 exhibiting companies</td>
</tr>
<tr>
<td>367 accompanying persons</td>
<td>3’061 m² net area</td>
</tr>
<tr>
<td>1’393 exhibitors’ personnel</td>
<td></td>
</tr>
<tr>
<td>Countries with highest attendance:</td>
<td>Press:</td>
</tr>
<tr>
<td>Italy, Spain, United Kingdom and France</td>
<td>61 registered journalists</td>
</tr>
<tr>
<td>2 press releases</td>
<td></td>
</tr>
</tbody>
</table>

Figure 1. Number of delegates and received abstracts for the ECCMIDs since 1983
Figure 2. Participants per geographic area in percent
Europe 73%, Asia 10%, North America 6%, Middle East 5%, South/Central America 3%, Australia 2%, Africa 1%
ESCMID Educational Activities

Main educational activities in 2011

2011 was an exceptional year with regard to educational courses and workshops. Our study groups and many of the affiliated societies worked hard so that ESCMID was able to organise the record number of 18 postgraduate educational courses and technical workshops. The high quality of the applications and the increased resources available at the office allowed the members of the Education Subcommittee to accept most applications.

The courses were held at various locations across Europe, from St. Petersburg to Izmir and Cluj-Napoca to Santander. The number of participants varied according to the format of the course, ranging from 20 participants for certain lab-based workshops to over 100 for other formats. The topics covered a wide range of Clinical Microbiology and Infectious Disease subjects, from fungal infections through antibiotic usage, infection control and parasitology to antibiotic resistance.

The 10th Summer School took place in Treviso, Italy, with more than 50 attendees from 26 different countries (see following page).

As every year, numerous young scientists were awarded attendance grants by ESCMID. The Society acknowledges the financial difficulties experienced by our young colleagues, especially those practising in countries with limited resources. The awardees are selected by the course organisers with the help of the ESCMID Executive Office. The grants provide an excellent opportunity for young fellows so please encourage your young co-workers to apply. For those who are unable to attend, our Online Lecture Library (OLL) includes presentations of all our educational activities and is available to our members at www.escmid.org/OLL.

100 ESCMID postgraduate courses

Over the past 20 years, ESCMID has organised 100 postgraduate education courses and technical workshops.

From the first ESCMID PGEC in Trabzon, Turkey, in September 1992 to the 100th in Zagreb, Croatia, in July 2012, these courses have taken place all over Europe. In total, 69 different cities have hosted ESCMID PGECs, from Oslo in Norway to Antalya in Turkey and from Oeiras in Portugal to Sochi in Russia. A few courses have even been organised outside Europe, for example in Almaty in Kazakhstan and Sousse in Tunisia.

More than 4’800 CM/ID professionals have attended the courses, and around 1’300 experts have committed themselves to be faculty members.

To date, the total duration of all the courses together has been 347 days with an average course length of three and a half days. Most of the courses have taken place in spring (49 between March and June) and autumn (41 between September and October).

On behalf of ESCMID, I would like to thank all the experts and organisers who have committed themselves to our highly successful Education Programme over the past 20 years. Without their invaluable contribution, the programme would not be what it is today. Thank you!

Outlook for 2012 and 2013

In 2012, we shall organise 13 postgraduate courses and technical workshops across Europe and further afield, including one in Al Ain, United Arab Emirates. Further details are available in the calendar on the Society’s website (www.escmid.org/calendar). This year’s Summer School will take place in Innsbruck, Austria, from 21 to 27 July 2012. Registration is already open and the details can be found online at www.escmid.org/summerschool.

We have already started planning our educational activities for 2013. A call has been sent to all Study Groups and affiliated societies to submit their proposals by the end of May 2012, and the full programme will be available in mid-July. We encourage all our members to participate actively in our educational events and kindly request your feedback for the current and future activities.
The 10th ESCMID Summer School took place in Treviso, Italy from 2 – 9 July 2011. The venue of the Summer School was the ‘Achille and Linda Lorenzon Center’ owned by the Catholic University. As an opening remark I would like to mention that this centre is located in a beautiful villa just outside of downtown Treviso and was given as inheritance by the countess Teresa Lorenzon Caetani to the Catholic University. The centre is dedicated to her parents and it has the mission to develop studies and cultural events on infectious diseases (AIDS), cancer and Parkinson’s disease. I do think that the 10th ESCMID Summer School has well fulfilled the mission of the centre.

The school directors were Giampiero Carosi, Patrice Nordmann and myself, and the Catholic University took care of most of the event organisation. The Summer School was attended by 54 participants from 26 nations (Australia, Austria, Belgium, Bulgaria, Denmark, France, Georgia, Germany, Greece, Hungary, Italy, Lebanon, Nepal, Oman, Pakistan, the Philippines, Poland, Portugal, Romania, Russia, Slovenia, South Africa, Spain, Switzerland, Turkey, United Kingdom). The faculty included 22 members from five countries (16 from Italy). 24 plenary lectures and five tutorials per day were held throughout the week. The Summer School covered the most critical and newest aspects of infectious diseases and microbiology including: hepatitis, HIV/AIDS, antibiotic resistance, severe bacterial infections, fungal infections and hospital infections. It is noteworthy that a substantial part of the Summer School has been devoted to the afternoon small group tutorials which focused on specific issues under the guidance of an expert of the field as well as to students’ presentations. There were 51 presentations, namely 45 case presentations and 6 pro-con presentations. These latter ones were particularly interesting and stimulated active discussions among faculty and participants. Thus, it is extremely important in my opinion, to maintain and possibly increase this highly interactive part of the Summer School, since this time it proved to be very well accepted and a great success among participants.

A special thank is due to the city of Treviso whose officials extraordinarily helped to organise the event and allowed us to use the beautiful Palazzo dei Trecento for the opening ceremony. I would not be completely honest if I did not recognise that the 10th Summer School received additional special support from the beautiful cities of Treviso and Venice where the students and the faculty spent their free time.

In conclusion, as one of the directors and the organiser of the 10th ESCMID Summer School, this event has fulfilled my expectations. I sincerely hope that the same applies for the students, the faculty and ESCMID.

Thank you again to all who collaborated to make this event possible and even more, very successful.
ESCMID Courses and Workshops

**Infections in Critically Ill Patients**
ESCMID Postgraduate Education Course
21 – 22 May 2011, Athens, Greece
Organised by the Hellenic Society of Infectious Diseases

**State-of-the-art in Emerging Fungal Infections**
ESCMID Postgraduate Education Course
8 – 9 September 2011, Cluj-Napoca, Romania
Organised by the Romanian Society of Medical Mycology and Mycotoxicology (RSMMM)

**Aspergillosis: from Allergy to Invasive Disease**
ESCMID Postgraduate Technical Workshop
25 – 26 May 2011, Manchester, UK
Organised by the ESCMID Fungal Infections Study Group (EFISG)

**Cystic Echinococcosis: Burden of Disease in the EU and Clinical Management**
ESCMID Postgraduate Education Course
23 – 25 September 2011, Pavia, Italy
Organised by the ESCMID Study Group for Clinical Parasitology (ESGCP) and the WHO Collaborating Centre for Clinical Management of Cystic Echinococcosis

**Emerging Multidrug Resistance**
ESCMID Postgraduate Education Course
6 – 7 June 2011, Paris, France
Organised by ESCMID Education Subcommittee

**Invasive Fungal Infections: Controversies and Lessons from the Clinical Practice**
ESCMID Postgraduate Education Course
23 – 24 June 2011, Saint Petersburg, Russia
Organised by the Interregional Association for Clinical Microbiology and Antimicrobial Chemotherapy (IACMAC) and the Italian Society for Infectious and Tropical Diseases (SIMIT)

ESCMID Postgraduate Education Course
28 – 30 September 2011
Primosten-Sibenik, Croatia
Organised by the Croatian Society of Infectious Diseases (CSID) and the Croatian Society of Medical Microbiology and Parasitology (CSMMP) of the Croatian Medical Association

**Clinical, Diagnostic and Therapeutic Aspects of Opportunistic Protozoal Infections**
ESCMID Postgraduate Technical Workshop
6 – 9 September 2011, Barcelona, Spain
Organised by the ESCMID Study Group for Clinical Parasitology (ESGCP)
Quinolones: from Bench to Bedside
ESCMID Postgraduate Education Course
5 – 7 October 2011, Santander, Spain
Organised by the ESCMID Study Group for
Antimicrobial Resistance Surveillance (ESGARS)

Update on Antibiotic Resistance – from Laboratory
to Clinical Practice
ESCMID Postgraduate Education Course
10 – 11 February 2012
Al-Ain, United Arab Emirates
Organised by the ESCMID Education Subcommittee

Infection Control in Developing Countries:
Problems and Solutions
ESCMID Postgraduate Education Course
27 – 28 October 2011, Kayseri, Turkey
Organised by the Turkish Society of Hospital
Infections and Infection Control

Problems in the Diagnosis and Treatment of
Invasive Fungal Infections: Recent Advances in
Their Management
ESCMID Postgraduate Education Course
2 – 3 March 2012, Athens, Greece
Organised by the ESCMID Fungal Infection Study
Group (EFISG) and the Hellenic Society of
Medical Mycology (HSMM)

Carbapenemase-producing Gram-negative
Microorganisms: Detection, Epidemiology
and Therapeutic Challenges
ESCMID Postgraduate Education Course
1 – 2 December 2011, Athens, Greece
Organised by the Hellenic Society for
Chemotherapy

Preparedness for Emerging Infectious Threats:
Avoiding Outbreaks in Europe
ESCMID Postgraduate Education Course
19 – 21 March 2012, Marseille, France
Organised by the Infectiopôle Sud Scientific
Foundation, Marseille, France and the
EuroTravNet Coordinating Center, ECDC,
Marseille, France

Antimicrobial Stewardship: Measuring, Auditing
and Improving
ESCMID Postgraduate Education Course
29 – 31 March 2012, London, UK
Organised by the ESCMID Study Group for
Antimicrobial Policies (ESGAP) and the British
Society for Antimicrobial Chemotherapy (BSAC)

Innovation in Severe Acute Respiratory Infections
(SARI)
ESCMID Postgraduate Education Course
13 – 14 January 2012, Sitges, Spain
Organised by the ESCMID Study Group for
Critically Ill Patients (ESGCIP)
As in the previous year, CMI carried out an assessment report of its activities in 2011, which was published in the March issue under the reference: CMI editorial report, 2012; 18, 205–212 and is freely accessible on the CMI website.

The journal’s scope is changing: initially focused mostly on bacteriology, physiopathology and resistance to antibiotics, it is now clearly open to clinical virology and mycology as well as tropical and travel diseases. In order to adapt ourselves to this evolution, the editorial board has been reinforced with three experts in virology: Guido Antonelli, Tatjana Avšič-Zupanc and Laurent Kaiser. A new Associate Editor, Emmanuel Bottieau (Antwerp, Belgium), was also recently hired to manage submissions in tropical and parasitic diseases, a growing discipline within CMI’s publication scope. Furthermore, several new experts on infectious diseases, tropical diseases, virology and bacteriology joined the Scientific Committee. Through this evolution, CMI better reflects the fields in which ESCMID, the publication’s owner, is active.

Since its implementation in 2009, the organisation of themed sections in each issue has been very successful. Organised by a guest editor and covering key topics, these consist of three to five invited reviews on the chosen topic, an editorial and related covers. These themed sections are also meant to highlight the fields and topics we wish to publish about, which in 2011 notably included virology, tropical medicine and parasitology. The quantity of submissions is permanently increasing; and the manuscripts come from a large variety of countries, which shows that the journal is sought after by many authors from all over the world; and the journal is particularly proud of welcoming works from emerging countries, as we believe that some of them are on the way to becoming protagonists on the global stage of science.

In 2010 and 2011, the size of the journal was provisionally increased to clear a backlog of the many articles waiting to be published. However, in order to keep both the journal’s volume and the delays before publication reasonable, we now publish in print only the reviews and classic-sized original articles, while research notes and long original articles (exceeding 2’500 words) are systematically published online. The online publications have the same citation rates and the same accessibility; therefore the authors are not penalised. This new policy was implemented from August 2011.

CMI’s impact factor has increased to 4.784 in the 2010 ISI Journal Citations Report, a result of the collective efforts of several Editors-in-Chief. Its Eigen Factor is also progressing in both fields of infectious diseases and clinical microbiology. According to these two criteria, CMI appears to be among the best journals of infectious diseases and clinical microbiology.

In 2011 we continued to appeal for feedback and reactions, from the editorial staff and from guests, on urgent topics that seem particularly interesting – such as the German outbreak of Escherichia coli or the recrudescence of malaria after the introduction of insecticide–treated nets. These constitute the editorial column entitled: ‘Infection Hot Topics’, which is rapidly published online and freely accessible. The most downloaded paper was a very early published Hot Topic, proving that this selection was immediately very successful.

Since 2009, accepted unedited articles have been available online within 5 working days to make research results available as soon as possible. Our goal for 2011 was to have no more than a 4-month delay between the acceptance of an article and its publication in a printed issue. After an average processing time of 4.6 months between acceptance and final publication over the last four years, this objective is currently achieved.
## Monthly theme sections in 2011 and 2012

### 2011

<table>
<thead>
<tr>
<th>Month</th>
<th>Theme</th>
<th>Author(s)</th>
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<tbody>
<tr>
<td>January</td>
<td>Pulmonary vascular disease and infection</td>
<td>N. Petrosillo</td>
</tr>
<tr>
<td>February</td>
<td>Hepatitis C virus: from discovery to eradication in 40 years?</td>
<td>J.M. Pawlotsky</td>
</tr>
<tr>
<td>March</td>
<td>Of mice and men: defining, categorising and understanding the significance of zoonotic infections</td>
<td>G. Pappas</td>
</tr>
<tr>
<td>April</td>
<td>Spirochaetes: past lessons to future directions</td>
<td>S. Cutler</td>
</tr>
<tr>
<td>May</td>
<td>Present and future automation in bacteriology</td>
<td>G. Lina</td>
</tr>
<tr>
<td>June</td>
<td>Tuberculosis: an unpredictable long-standing human companion still in need of rapid diagnostic tests</td>
<td>M. Drancourt</td>
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Let’s go European!

Giuseppe Cornaglia, ESCMID President, giuseppe.cornaglia@univr.it

René J. Courcol, SFM President, rene.courcol@chru-lille.fr

From a French handbook to a European manual: This was the challenge met (and won) in less than one year by the Editorial Board of and all those contributing to the European Manual of Clinical Microbiology.

Early in 2011, the Presidents of the European Society for Clinical Microbiology and Infectious Diseases and of the Société Française de Microbiologie, decided to publish a text of clinical microbiology. The template for this would be the widely popular French REMIC, which non-French authors would adapt and integrate in accordance with ‘European’ practices and the European body of knowledge. A number of microbiologists gathered at the ECCMID in Milano agreed to take on this challenge.

This new book, contains contributions by nearly one hundred experienced medical microbiologists, and is mainly intended for all those involved in medical microbiology. However, its style makes it suitable for clinicians, too, and as a reference text for residents and students. Diagnostic schemes and recommendations spring from the professional experience of internationally-recognised authors, and make large use of guidelines and consensus documents published by several international societies.

This is but the first edition of the Manual and, like all books, it is incomplete and not sufficiently up-to-date at the time of going to press. Future editions - possibly available in electronic format as well - will draw on an even broader participation of microbiologists from all over Europe, as well as on precious feedback of readers throughout Europe and beyond.
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- Anaerobes, L. Dubreuil - E. Nagy
- Borrelia burgdorferi sensu lato, B. Jaulhac - E. Ruizic Sadjo
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- Leptospire species, M. Picard - T. Pumara
- Listeria monocytogenes, A. Le Monnier - D. Natale
- Mycobacterium species, G. Delogu - J.L. Herrmann
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  J.L. Mainardi, J.E. Hugonnet, L. Gutmann and M. Arthur
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  M. Paul
- Acinetobacter Baumannii Resistant To Everything, What Should We Do?
  J. Vila, J. Pachón
- The 2011 Shiga Toxin-Producing Escherichia Coli O104:H4 German Outbreak:
  A Lesson of Genomic Plasticity
  Erick Denamur
- Nosocomial bacteremia: the most neglected causes of death in Europe?
  D. Raoult, H. Richet
Communication Strategy in 2011

Giuseppe Cornaglia
ESCMID President and Communication Officer
giuseppe.cornaglia@univr.it

ESCMID’s communication tools in 2011 were considerably exploited in order to provide members and all those interested in the Society with updated and thorough information and knowledge. The aim of an increased web presence meant to offer more communication options and interaction, and new ambitious projects are being realised in 2012. All this is – and will be accomplished – thanks to the presence of an ESCMID website and communication manager, whose addition to the Executive Office in Basel will nicely complement our activities and booster our ambitions for the near future.

In May, ECCMID 2011 in Milan confirmed again our congress as Europe’s largest conference on infectious disciplines with roughly 10'000 people gathering to share latest knowledge and practice to improve the fight against infectious diseases in Europe and around the world. The congress produced a joint press-release with The Lancet Infectious Diseases featuring the NDM-1 ‘superbug’ and the resultant alarming situation of antibiotic resistance on a global scale. The media fully covered ECCMID demonstrating the event’s enduring leadership over time.

Just before summer another ESCMID press release covered one of the hottest topics of the year, the E. Coli outbreak in Germany which caught the attention of press and generated a considerable amount of media coverage.

Finally in September, ESCMID was awarded with the 2011 Leadership Award by the Alliance for Prudent Use of Antibiotics (APUA) at the International Congress for Antimicrobial Agents and Chemotherapy (ICAAC) in Chicago. The APUA award represented a major global acknowledgment of the long-lasting ESCMID commitment in fighting antibiotic resistance, and it was announced by a joint ESCMID-APUA press release.

Projects of enhancement of web user friendliness and communication are constantly on-going according to the users’, readers’ and member’s emerging needs and new technology availability. That is the way to guarantee a constant and updated usability of the website as it is increasingly becoming the main ESCMID communication channel.

At the end of 2011 the re-launch of part of the ESCMID website was definitely planned and new resources were planned to reinforce the communication strategy development. A completely restyled homepage and news section as well as a revamped newsletter were already prototyped in October and will soon be implemented.

To measure up to the boom of social media, ESCMID and ECCMID profiles were created on the most popular social media platforms in the early 2012 ensuring interaction, immediate information and support to web users, members and ECCMID participants.

That said, the password for 2012 ESCMID communication strategy is clearly and absolutely modernisation.
In the past year ESCMID has continued to further increase its involvement in Professional Affairs activities for both specialities, Clinical Microbiology and Infectious Diseases. The two of us have greatly enjoyed working together on a number of new and continuing projects in close collaboration with the ESCMID Professional Affairs Subcommittee (PAS).

It’s only two years ago that the ESCMID Parity Commission (www.escmid.org/parity) was founded to review and improve the representation of minorities and gender, as well as the geographical balance in the professional fields of CM and ID, and we have accelerated our involvement in this important area with several major initiatives. We are particularly pleased to announce that the survey to assess the extent of discrimination among CM/ID specialists is now completed and that the results will be presented during ECCMID 2012 in London. Please do not miss the official symposium about this topic. The Parity Commission has also organised a symposium during the Conference focused on significant aspects of gendered medicine.

A further important project that involved the Parity Commission in the past year is the creation of the ESCMID guidelines on how to balance a scientific programme of ECCMID and ESCMID-related educational events in order to improve and balance them by gender and country of origin. The Parity Commission believes that an improved balance among the providers of the educational activities will be reflected by an overall significant increase in the quality of ESCMID related educational events.

We are also very pleased about the success of the ESCMID Collaborative Centre (ECC) and Observership (EOB) programmes and emphasise how beneficial it is to visit ECCs. These programmes were launched more than three years ago and we now have 58 institutions and centres in Europe and beyond who are approved as Collaborative Centres of ESCMID. The evaluation results of ESCMID members who visited those centres as Observers are excellent and can be found on the ESCMID website (www.escmid.org/observership). In order to further improve the programme, the ECCs need to provide a yearly activity report.

The Trainee Association of ESCMID (TAE) is successfully continuing its work on new and already ongoing projects. In the past year TAE further improved a working network among trainees and se-
lected local contact points for ID/CM trainees in the majority of European countries. In this context, new associations for trainees have been set up with the direct or indirect help of TAE SC members in the Netherlands, Denmark and Hungary. After the success of the first annual Trainees Day in Milan, this year TAE is running the second in London. TAE SC is also working on a second educational activity, which will be an online quiz with a combination of CM and ID questions in order to simulate a common European exam in CM and ID, and to give trainees the possibility to learn about European-wide policies of treatments and diagnostics in a playful way.

The PA officers have also been working closely with the Infectious Diseases and Medical Microbiology sections of the Union Européenne des Médecins Spécialistes (UEMS) to further harmonise and improve the quality of specialisation among European Countries. TAE also has representatives in both the Infectious Diseases and Medical Microbiology UEMS sections and is actively involved in helping them formulate the basic requirements of a European curriculum. The draft ID European curriculum has been posted on the TAE website forum to enable trainees from across Europe to view it and give feedback (http://forum.escmid.org/forum). The MM section will discuss the draft of a European curriculum during its meeting in London.

Finally, we would like to draw your attention to our EU Partner Search Platform and the Job Platform on the ESCMID website. The EU Partner Search Platform (www.escmid.org/eupartner) is useful for finding new collaboration opportunities among European Research Centres. The Job Platform (www.escmid.org/jobs) is an easy way to find your next job or to fill an open position in clinical microbiology and infectious diseases. Both platforms are constantly evolving, with the aim of meeting the needs of our members.

An overview of the activities within our portfolios can be found on the following 8 pages.
The ESCMID Parity Commission (EPC) was founded in 2010. The main project last year was to verify if, and to what extent, forms of discrimination exist with respect to country, gender and ethnicity among professionals in hospitals and universities, carrying out activities in the Clinical Microbiology (CM)/Infectious Diseases (ID) fields. For this reason, the EPC designed a questionnaire survey to investigate 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 associated area specifically applying to ESCMID members. The survey, open to ESCMID members and non-members, consisted of 61 questions divided into five areas (socio-demographic, professional census and environment, leadership and generic). It ran anonymously for nearly 3 months (from March 17 to June 7 2011) on the ESCMID website and was distributed through the ESCMID mailing list, ESCMID-affiliated Societies, TAE and during ECCMID/ICC 2011 in Milan.

We included 1’274 respondents, equally distributed by gender, CM/ID specialisation and European regions. The majority of respondents (68%) stated that discrimination is present in medical science. A quarter of them reported personal experience with discrimination, mainly associated with gender and geographic region. ID/CM specialists from south-west Europe reported events at a much higher rate (37%) than other EU countries. A clear imbalance in the number of women at the highest level of an academic career was observed. Women accounted on average for 36% of full professorship in ID/CM. However, the difference was more evident for ID than CM professionals (26% versus 48%; see Figures 1–2). The lowest participation in full professorship was observed for women in eastern Europe (5%). Participation in high-level decision making committees was also strongly influenced by gender and geographic origin (see Table 1). Overall, three main points might be derived from the survey results:

1. In the European CM/ID field, gender differences in career levels, both academic and professional, are significant and vary according to the social, cultural, normative and organisational features of specific regions and countries. However, if gender differences in achievement are measured through substantial indicators of scientific and professional success, such as publications, research funding and participation on boards and committees, large gaps are still recorded between men and women and are consistent among all European regions;

2. The majority of ID/CM professionals recognises the existence of discriminatory problems at their workplace. Perception of discrimination on the basis of the geographical region of work is more widespread among professionals from eastern and south east Europe;

3. The burden of family care also disproportionately weighs on the shoulders of women in the CM/ID professional field. A huge gap divides men and women who are able to find a satisfactory balance between their work and family commitments. Even though there are important differences in women’s situations in the different regions, the gap with men is always much wider in all regions, northern countries included. This proves that the problem is far from being solved in any country and is likely to heavily affect professional and scientific outcomes.

These results, though promising, might lead to excessive abstraction if not integrated with other approaches. To obtain a more accurate understanding of the CM/ID reality with reference to equality issues, other methodological approaches and sources of information should be added, such as direct observation, focus groups and qualitative interviews. It is also important to underline the tendency of professionals (both males and females) to see CM/ID scientific societies more involved than their own institutes in coping with parity issues. This tendency should be better verified, understood and explained. Actually, most of the issues related to parity conditions arise primarily at the local level (i.e., in the institutes and in universities), where professionals usually work. Therefore, it is apparent at the local level that they should be properly solved. However, respondents seem to value particularly the role societies could play, beyond scientific exchange, as professional networks with a major role in dealing with professional issues, including those related to work environment, work-life balance and career. Specific studies on scientific societies and parity issues should therefore be promoted in order to better understand these dynamics and to identify which are the real demands professionals express to societies and to institutes when parity issues are at stake.

We do believe our survey is just a first step in trying to improve representativeness and balance in career among ID/CM professionals in Europe. The EPC will be working with all Societies members to further define the next projects to be undertaken to reduce the areas of discrimination presently existing among the medical scientific community in Europe.

Therefore, we encourage all our members to send their feedback and proposals for current and future activities of the EPC to parity@escmid.org.
Figure 1. Proportion of different academic grades stratified by gender among 472 ID professionals working in university hospitals.

Figure 2. Proportion of different academic grades stratified by gender among 560 CM professionals working in university hospitals.

Table 1. Memberships among 1,274 ID/CM professionals stratified by geographic regions (in percent)

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<th>%</th>
<th>West Europe n = 593</th>
<th>North Europe n = 111</th>
<th>East Europe n = 135</th>
<th>South West Europe n = 262</th>
<th>South East Europe n = 174</th>
<th>TOTAL n = 1,274</th>
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<td>33.2</td>
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<td>6.9</td>
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Trainee Association of ESCMID (TAE)

TAE Steering Committee
tae@escmid.org
Kate Adams, Trainees Association
of ESCMID President, kate.adams@hey.nhs.uk

TAE is a group of trainees and young specialists (all of whom finished their training less than 3 years ago) from different countries across Europe. The steering committee is small, being made up of 10 members from both Clinical Microbiology (CM) and Infectious Diseases (ID). However, members from all across Europe for both specialties are recruited to form a large network of young, enthusiastic people to organise activities for trainees under the wings of ESCMID.

Activities of TAE in the last year:
Trainees Day at ECCMID/ICC 2011 on Saturday, 7 May 2011 in Milan
For the first time an event dedicated to trainees took place at last years’ ECCMID/ICC. This was the TAE organised Trainees Day, which took place on the first day of the Milan conference. This session was highly interactive, concentrating on basic topics, such as community acquired pneumonia, where trainee knowledge is often assumed but seldom taught. There was also time between each talk to enable delegates to talk to each other and encourage cross European networking.

TAE SC at ECCMID/ICC 2011 in Milan
The TAE Steering Committee members met at ECCMID/ICC for their fourth meeting.

TAE Excellence Training Awards 2011
The first TAE awards for Excellence in Training were given out at the Milan ECCMID trainees session. These awards are designed to recognise and reward outstanding trainees in ID and Clinical / Medical Microbiology. There were 4 awards – 2 each for ID and Clinical / Medical Microbiology-given to trainees who had done something particularly special during their training with regard to furthering their own education or that of colleagues. The following four trainees received their awards for their achievements:
- Valentina Mazzocato, Rome, Italy
- Djin-Ye Oh, Berlin, Germany
- Hilmir Asgeirsson, Huddinge, Sweden
- Axel Hamprecht, Cologne, Germany.

TAE SC met in Budapest, Hungary
On 17–18 November 2011 the fifth meeting of the TAE Steering Committee took place at the Semmelweis University in Budapest, Hungary.

Online Quiz in CM & ID
Plans are also well under way for a second educational activity. This will be an online quiz with a combination of ID and CM/MM questions. The questions will be time limited and there will be a prize for the trainee scoring the highest mark. The intention is to provide a novel way of testing your knowledge. Indeed, given that the MM and ID sections of UEMS are actively working on a European curriculum with a view to a European exam, this may be your first chance to have a practice run!

Trainees Day at ECCMID 2012
Saturday, 31 March 2012, London, United Kingdom
The second Trainees Day will take place in London on the afternoon of 31 March. All trainees in Clinical Microbiology and Infectious Diseases are strongly advised to attend this session, which will see world renowned speakers covering the topics of antimicrobial dosing and tropical medicine from both an infectious diseases and a clinical microbiological perspective.
ESCMID Observerships

Improve your clinical and laboratory skills!

Get financial support to visit our Collaborative Centres

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www.escmid.org/observerships
Since the launch of the ESCMID Collaborative Centre (ECC) programme in early 2009, a total of 58 institutions in Europe (in the broader sense) have decided to register. In doing so, they have taken advantage of this unique chance to provide colleagues with an opportunity to visit their microbiology laboratories or infectious diseases departments (Figure 1). The countries with the most ECCs are Spain (7), the Netherlands (7), the United Kingdom (7), Turkey (6) and France (5). Many eastern, south-eastern and south-western European countries have not yet joined this initiative (Figure 2). One of the ECCs is outside Europe (Tunisia), offering visitors a chance to gain experience of infections rarely seen in Europe and to learn about their diagnostics.

The ESCMID Observership Programme started some time after the ECC programme: the visits started in the second half of 2009 and are ongoing. A total of 103 Observership visits took place up to 1 February 2012. The Infectious Diseases Service at the University Hospital (CHUV) in Lausanne, Switzerland has hosted the largest number of Observers.
Figure 2: Number of ESCMID Collaborative Centers per region

Figure 3: Number of ESCMID Collaborative Centers per specialty

Figure 4: Origin of observers in 2011 (by region)

Figure 5: Age distribution of observers in 2011

Figure 6: Gender of observers in 2011
Activities within the Observership Programme

European Network Corner at ECCMID/ICC 2011 in Milan, Italy (7-10 May 2011)
As in 2010, the European Network Corner at ECCMID/ICC 2011 had a dedicated area for the ECCs to showcase their activities and connect with potential observers.

ECC activity reporting in 2011
In 2011, ESCMID approved seven new institutions as Collaborative Centres (one each in Austria, France and the Netherlands and two each in Spain and Turkey). Between December 2011 and January 2012, all approved ECCs were asked to complete a short questionnaire to report on last years’ activities within the Observership Programme.

Observer visits in 2011
In 2011, a total of 59 Observership visits took place at ECC hosts in Europe and beyond. Of these, 15 were short visits (less than 1 week) and 44 longer visits (between 1 and 4 weeks). Observers came from all over the world: 47 from Europe and 15 from non-European countries (Brazil, Egypt, Hong Kong, Indonesia, Iran, Iraq, Kenya, Pakistan, Qatar, Sudan and the Syrian Arab Republic). For more details, see Figures 4–6. The observers’ reports are published on the ESCMID website at www.escmid.org/observerships and testify to the usefulness of the programme for the observers’ professional development.

Evaluation of ECCs in 2012
In 2012, ESCMID will evaluate the activities of the Collaborative Centres during the past 2 years. One important evaluation criterion will be fulfilment of the requirement to host at least two observers in two years. If an ECC fails to comply, its ECC status will be reviewed and possibly revoked.

European Network Corner at ECCMID 2012 in London, UK (31 March – 3 April 2012)
At ECCMID 2012, the European Network Corner will again have a dedicated area for the ECCs to present their profiles. ECCMID participants are invited to visit the ECCs and to learn more about them.
Conference Objectives
This conference will address the most up-to-date knowledge on surveillance, epidemiology and molecular features of multidrug resistant high risk clones (HiRiC) currently disseminating over Europe. The conference aims to provide the scientific basis for an early warning system when specific isolates or mobile genetic elements of a particular epidemicity appear in the community and nosocomial settings.

Faculty Members
Rafael Cantón, Madrid, Spain • Yehuda Carmeli, Tel-Aviv, Israel • Edward Feil, Bath, UK • Hajo Grundmann, Groningen, Netherlands • Mark Holmes, Cambridge, UK • Roland Leclercq, Caen, France • Herminia de Lencastre, Lisbon, Portugal • Thierry Naas, Paris, France • Patrice Nordmann, Paris, France • Laurent Poirel, Paris, France • Gian Maria Rossolini, Siena, Italy • Patricia Ruiz-Garbajosa, Madrid, Spain • Alkiviadis Vatopoulos, Athens, Greece • Jordi Vila, Barcelona, Spain

Please register at www.escmid.org/Barcelona12. Places are limited, apply before 18 May 2012!
EUCAST in 2011–2012

www.eucast.org

EUCAST Steering Committee
Gunnar Kahlmeter, Chairman; Derek Brown, Scientific Secretary; Rafael Canton, Clinical Data co-ordinator; Claude-James Soussy or Luc Dubreuil, France; Christian Giske, Sweden; Alasdair MacGowan or Robin Howe, UK; Johan Mouton, The Netherlands; Martin Steinbakk or Arntfinn Sundsfjord, Norway; Petra Apfalter, General Committee (Austria); Marina Ivanova, General Committee (Estonia)

EUCAST is the European Committee on Antimicrobial Susceptibility Testing. It aims to provide common European breakpoints and antimicrobial susceptibility testing methodology. Over the years ESCMID has provided the administrative, financial and scientific framework for EUCAST. The European Centre for Disease prevention and Control (ECDC) is currently supporting EUCAST on another three year contract (2012–14), while ESCMID is supporting the development of the EUCAST disk diffusion method.

Version 2 of the EUCAST breakpoint tables was published on the EUCAST website (www.eucast.org) in December 2011. Breakpoints for new agents are set by EUCAST as part of the licensing process by the European Medicines Agency (EMA). Through this process breakpoints have been set in the past year for telavancin, and several other new agents are currently in process. Several breakpoints, including ceftibuten for Enterobacteriaceae and Streptococcus pneumoniae, fosfomycin for Pseudomonas spp., vancomycin for coagulase-negative staphylococci, nitrofurantoin for enterococci, phenoxymethylpenicillin and trimethoprim for group B streptococci, and amoxicillin, amoxicillin-clavulananate, chloramphenicol and rifampicin for Haemophilus influenzae, have been revised in the light of new information. Breakpoints for various less common fastidious organisms are being developed in collaboration with the relevant ESCMID Study Groups and through this process breakpoints for Clostridium difficile, Helicobacter pylori and Listeria monocytogenes have been added in version 2 of the tables. In addition, breakpoints for less common non-fermentative Gram-negative bacilli are under discussion. Several additional ’rationale documents’ giving the rationale for EUCAST breakpoints have been published on the EUCAST website. A paper explaining the role of pharmacokinetics/pharmacodynamics in the setting of clinical MIC breakpoints by EUCAST was published in Clinical Microbiology and Infection (Epub ahead of print, December 2011).

The EUCAST website continues to be developed and updated, and all EUCAST breakpoints and documents are freely available from the website. Under ‘Susceptibility Testing’ a new section has been added on ‘Calibration and Validation’ of the EUCAST disk diffusion method. In addition, there is a new section on ‘Projects and Data Submission’ where laboratories are invited to participate in specific projects to develop methods. The EUCAST methodology and breakpoints for a disk diffusion method are available on the EUCAST website and technical documents relating to the method have recently been updated. Automated susceptibility testing systems continue to be developed for EUCAST breakpoints, and details of the current compliance of manufacturers with EUCAST breakpoints and methods are periodically updated on the website. The ‘frequently asked questions’ section about EUCAST breakpoints and methods continues to be expanded as questions are received. The ‘News’ section on the Home page has been extended and users can now subscribe to the EUCAST website RSS feed. This means that EUCAST news items can be automatically presented on other websites or in the browsers of individual computers.

The EUCAST MIC and zone diameter website presents MIC and zone diameter distributions of bacteria and fungi based on a continually increasing number of distributions. Graphs showing MIC-zone diameter correlations also continue to be expanded. The distributions highlight wild type populations and give epidemiological cut-off values (ECOFFs).

New national Antimicrobial Susceptibility Testing Committees (NACs) have been established in several countries to help provide a national strategy for antimicrobial susceptibility testing, and implement EUCAST breakpoints and methods where appropriate. In Europe, the trend from using other breakpoint...
guidelines to using EUCAST breakpoints and methods continues. In the EARS-Net resistance surveillance external quality assessment exercise in May 2011, EUCAST breakpoints were used by around 50% of participating laboratories, compared with around 30% a year earlier. Several more countries are in the process of changing or plan to change to EUCAST in the near future. The interest in EUCAST breakpoints from outside Europe is highlighted by the first southern hemisphere country, Australia, joining the EUCAST General Committee. Changes to the organisation of the EUCAST Steering Committee are proposed, to make it easier for countries outside Europe to take part in Steering Committee meetings.

The Antifungal Susceptibility Testing (AFST) Subcommittee is a standing EUCAST subcommittee, dealing with all issues related to breakpoints and susceptibility testing for fungi. The AFST Steering Committee currently consists of Maiken C. Arendrup (chairman), William Hope (secretary), Cornelia Lass-Floerl, and Manuel Cuenca-Estrella. During the past year two Steering Committee meetings and two General Committee meetings have been held. The AFST has continued to work on the establishment of clinical breakpoints for antifungal agents. Rationale documents and technical notes for *Candida* spp. with amphotericin, posaconazole and anidulafungin, and for *Aspergillus* spp. with amphotericin, itraconazole and posaconazole are now available from the EUCAST website. A revised version of the EUCAST reference method for susceptibility testing of fermentative yeasts (EDEF 7.1) was recently posted on the EUCAST website for consultation. The revised version includes testing of *Cryptococcus* spp., reference anidulafungin MIC ranges for quality control strains and new recommendations concerning solvent for echinocandins and shelf-life for microdilution plates.

In April 2008 the first version of EUCAST expert rules was released on the EUCAST website. Since then the process of harmonisation of European breakpoints has been completed and the Expert Rules subcommittee immediately started work to ensure congruity between categorisations and recommendations in EUCAST breakpoint tables and recommendations in the expert rules. As a consequence, the Expert Rules Subcommittee and the EUCAST Steering Committee has updated the EUCAST expert rules. The new version was published in Clinical Microbiology and Infection (Epub ahead of print, October 2011). Major contributors were Roland Leclercq, Rafael Cantón, Derek Brown, Christian Giske, Peter Heisig, Alasdair MacGowan, Johan Mouton, Patrice Nordmann, Arne Rodloff, Gian Maria Rossolini, Claude-James Soussy, Martin Steinbakk, Trevor Winstanley and Gunnar Kahlmeter. Major modifications include, among others, the deletion of previous expert rules on extended spectrum β-lactamases and carbapenemases and rewording the expert rules on quinolones with *Salmonella* spp. and β-lactams with *Haemophilus influenzae*. The basis of all these modifications is explained in the publication. The subcommittee achieved its objectives and has now been disbanded.

The Anaerobe Subcommittee advised the Steering Committee on breakpoints for anaerobes and ran a project on methods for susceptibility testing of anaerobes. The subcommittee achieved its major objectives and has now been disbanded.

A new subcommittee on antimicrobial resistance mechanisms of clinical and/or epidemiological importance has recently been set up (chairman Christian Giske). The remit is to develop practical guidelines for the detection of resistance mechanisms.
The evolution of Clinical Microbiology is geared towards meeting clinical needs, and the ultimate goal of innovative tools is to provide a rapid and accurate diagnosis. In cooperation with TROCAR (FP7 project ‘Translational Research on Combating Antimicrobial Resistance’), ESCMID organised a conference on ‘Diagnosing Infectious Diseases: Future and Innovation’, which was held in Venice on 26–29 October 2011. It was attended by 102 delegates from 35 countries, with 24 speakers from 13 countries.

The first day of the conference featured an overview of new technologies combining genomics, proteomics and nanotechnology with bioinformatics. The conference also introduced the concept of ‘culturomics’, i.e. the way in which cultures are used to investigate microbiota, and highlighted the enduring advantages of this approach.

MALDI-TOF mass spectrometry is becoming increasingly popular in Europe for identifying bacteria, fungi and protozoa even directly from clinical samples. The use of SELDI-TOF for identifying and characterising markers to develop a better diagnostic test for acute tuberculosis was also presented.

The morning of the second day focused on genomics and transcriptomics and concluded with an overview of knowledge gaps in the aetiology of Infectious Diseases.

The afternoon was mainly devoted to new perspectives in antimicrobial susceptibility testing, and the third day was dedicated to the presentation of new tools for diagnosing tuberculosis, mycosis and parasitic diseases.

The main message of the conference was that Clinical Microbiology is currently at the forefront of major innovations and inventions and that we face a challenging but exciting future in which all these new tools will need to be integrated to redesign Clinical Microbiology practices and, ultimately, to improve the diagnosis of infectious diseases. Webcasts of all sessions are available for our members in the Online Library (OLL) at www.escmid.org/OLL.

Programme

Biotechnologies and modern microbiology.
Giorgio Palù, Padova, IT

Is classical microbiology dead? An introduction to ‘culturomics’.
Didier Raoult, Marseille, FR

Carbohydrate-active enzymes and the latent power of glycogenomics.
Bernard Henrissat, Marseille, FR

MALDI-TOF as a tool to identify and type microorganisms.
Jordi Vila, Barcelona, ES

Identification of biomarkers by SELDI-TOF.
Shea Hamilton, London, UK

FACS technology and antibody detection assays.
Alex Van Belkum, Lagnieu, FR

Viral metagenomics.
John Mokili, San Diego, CA, US

Multiplex PCR to detect respiratory viral infections.
Greet leven, Egegem, BE

The application of genomics to emerging zoonotic viral diseases.
Giovanni Cattoli, Padova, IT

MicroRNA as a biomarker for infectious diseases.
David Vilanova, Maurens-Scopont, FR

Gene transcript profiles to diagnose infectious diseases.
Matthew Berry, London, UK

Genetic markers for human susceptibility to infectious diseases.
Anne Puel, Paris, FR

Knowledge gaps in the aetiology of infectious diseases.
Jon Cohen, Brighton, UK

Biofilm detection: do we really need it in the clinical microbiology lab?
Niels Holby, Copenhagen, DK

Antimicrobial susceptibility in biofilm-producing bacteria.
Susanne Häussler, Hannover, DE

Susceptibility testing – what can we expect for the future?
Gunnar Kahlmeter, Varxo, SE

Diagnostic of Carbapenemase producers in Enterobacteriaceae, from bench to the bedside.
Patrice Nordmann, Paris, FR

Units of Surveillance: diagnostics for prevention of emergence and spread of antibiotic resistance.
Fernando Baquero, Madrid, ES

New aspects of TB diagnostics.
Tone Tonjum, Oslo, NO

New tools in mycology.
Tomas Freiberger, Brno, CZ

New tools in clinical parasitology.
Peter Chiidini, London, UK

IT aspects and laboratory automation.
Gilbert Greub, Lausanne, CH

POC in the clinical microbiology laboratory.
Michel Drancourt, Marseille, FR

Quality assessment methodology.
Anton van Loon, Utrecht, NL
(l. to r.) Susanne Häussler, Fernando Baquero, Niels Hoiby

(l. to r.) Gunnar Kahlmeter, Patrice Nordmann, Fernando Baquero

(l. to r.) Tone Tonjum, Peter Chiodini, Tomas Freiberger

(l. to r.) Anton van Loon, Michel Drancourt, Gilbert Greub

(l. to r.) Giorgo Palù, Bernard Henrissat, Didier Raoult, Jordi Vila

(l. to r.) Shaea Hamilton, Jordi Vila, Alex Van Belkum

(l. to r.) John Mokili, Greet Ieven, Giovanni Cattoli

(l. to r.) Anne Puel, Matthew Berry, David Vilanova
In response to increased population of patients with various immunosuppressive diseases, ESCMID recently paid special attention to infections in these patients. With the help of one of our most recent study groups (ESCMID Study Group on Infections in Compromised Hosts, ESGICH), the Society organised a Conference on 17–18 November 2011, in Istanbul, TR. Among the endorsing societies were ICHS, EORTC, EBMT, ECIL as well as all local Turkish Microbiology and/or Infectious Diseases Societies. Many aspects of severe bacterial, viral and fungal infections were debated in the presence of 28 distinguished international expert speakers and over 150 attendees from 30 different countries. Attendees were also able to discuss with the faculty during highly interactive, small group sessions. Webcasts of all sessions are available for our members in the Online Library (OLL) at www.escmid.org/OLL.
London, United Kingdom, 23 April 2012

5th International Day for Fighting Infection

The Antibiotic Days

Scientific Programme

- Mankind and diseases in the pre-antibiotic era
  Alasdair Geddes, Birmingham, UK
- Penicillin or serendipity
  Tony White, Newport, UK
- Cephalosporins or obstinacy
  Giuseppe Cornaglia, Verona, IT
- Quinolones, a systematic quest
  David Hooper, Boston, US
- The evolution of antimicrobial resistance
  Richard Sykes, London, UK
- Carbapenemases, the last threat
  Patrice Nordmann, Paris, FR
- ‘My’ Antibiotic Days: the ever-changing patterns of antimicrobial therapy. Emilio Bouza, Madrid, ES
- Antibiotics and environment: a holistic view
  Joakim Larsson, Gothenburg, SE
- Where should we look next for antimicrobial therapy?
  Jonathan Cohen, Brighton, UK
- Which future for antibiotics?
  Alasdair MacGowan, Bristol, UK

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THE LANCET Infectious Diseases

www.escmid.org/StGeorges
The ASM is the oldest and largest single life science membership organisation in the world, whose mission is to gain a basic understanding of basic life processes and to promote the application of this knowledge for improved health, economic and environmental well-being.

In the past years the relationship between ESCMID and ASM has constantly been evolving towards a collaborative partnership. The societies agreed that this development should be fostered and formalised by a Memorandum of Understanding, approved by the respective Executive Committees, and signed by the presidents of both societies.

Both organisations are committed to advancing basic and applied clinical microbiology in their home territories and beyond. To this end, ESCMID and ASM have agreed on a programme of joint workshops outside their home territories, addressing important educational needs of the medical community in the target area (typically emerging nations).

As a service to the scientific and medical community, ESCMID and ASM as two leading societies will occasionally run timely expert conferences on emerging infections, to be also disseminated through the internet.

ASM and ESCMID also agreed to exchange information about planned major congresses and conferences as soon as it becomes available in order to avoid conflicts. Mutual promotion of ECCMID and ICAAC is also envisaged.
The Haffkine Institute for Training, Research and Teaching in Mumbai is the India’s premiere research institute engaging in research primarily focusing on infectious diseases and public health. On 11–13 November 2011 an International Workshop on Antimicrobial Resistance took place at the Haffkine Institute. The workshop was jointly organised by ESCMID, ASM and the Indian Association of Medical Microbiologists (IAMM). The scientific sessions consisted of invited lectures, symposia, and laboratory practicals, in addition to the free paper and the poster sessions.

The global problem of antimicrobial resistance, with special attention to the Asian-Pacific region, surveillance detection methods, quality assurance and quality control and principally the elucidation of the CLSI and EUCAST guidelines were the core of the scientific programme of the international workshop.
The ESCMID Postgraduate Educational Course ‘Update on Antibiotic Resistance – from Laboratory to Clinical Practice’ was held on 10 to 11 of February 2012 and was organised by Tibor Pal, Faculty of Medicine and Health Sciences, UAE University, Al Ain, UAE. On this occasion ESCMID officials – Giuseppe Cornaglia, Gunnar Kahlmeter, Murat Akova and Jordi Vila – and key opinion leaders from different countries of the Gulf region attended a business meeting with the purpose of exploring how to strengthen the ties between the Society and regional professionals.

The representatives of the Society emphasized that individuals are encouraged and welcome to join the Society and its various Study Groups in order to eventually increase the integration of Middle East scientists into European research projects. The lack of regional and national societies dedicated to infectious diseases and microbiology has been so far a major obstacle to establish more formal contacts. However, it was unanimously agreed that organising educational courses and professional meetings in the region in association with ESCMID has and will have a catalysing effect in the formation and development of these professional bodies.
As follow up to the previous activities in South America and for the fifth consecutive year, ESCMID cooperated with the Asociación Panamericana de Infectología (API) to organise joint educational symposia and workshops. A symposium on ventilator-associated pneumonia (VAP) was co-organised during the XX Congreso Latinoamericano de Profesionales de laboratorio Clínico, held in Punta Cana, Dominican Republic on 24–27 November 2011.

Giuseppe Cornaglia and Jesús Feris Iglesias (API, Head Dept. of Infectious Diseases, Children’s Hospital “Dr. Robert Reid Cabral”, Santo Domingo)
The Ditan International Conference on Infectious Diseases, Beijing, China
Following up to our previous initiatives in China, ESCMID has endorsed also in 2011 the Ditan International Conference on Infectious Diseases (5th DICID), an 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).

This year’s conference was held on 14 – 17 July, and its theme was ‘Focus on China, impact on the world’, highlighting how China, the largest developing country, plays such an important role in the control of the infectious diseases.

Being the major hospital of infectious diseases in China, the Beijing Ditan Hospital has taken responsibility to link up the Chinese medical community with the International and to allow international colleagues to have a clearer picture of China.

In 2011 ESCMID endorsed two DICID sessions, namely one called ‘Antimicrobial resistance in China and Europe’ and one presenting the DICID attendees with a selection of highlights from ECCMID 2011.

As usual, the DICID was preceded by a full-day workshop, also held in Beijing and co-organised with the ESGARS Study Group to generate in-depth discussion between ESCMID and experts from China, 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.
Following an established tradition, ESCMID linked up with the Interregional Association for Clinical Microbiology and Antimicrobial Chemotherapy (IACMAC), by organising scientific events in the Russian Federation.

The XII International IACMAC/ESCMID Congress on Antimicrobial Therapy was held on 18 – 20 May 2011 in Moscow, attended by over 1’500 participants from 36 regions of the Russian Federation. The ESCMID delegation at the congress was composed of Giuseppe Cornaglia, Jonathan Cohen, Jesus Rodríguez-Baño, Claudio Viscoli and Johan Mouton.

Programmes of regional and interregional antibiotic resistance monitoring in Russia were established by IACMAC (www.iacman.ru/iacman/en), an ESCMID-affiliated Society. Most activities are usually 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 are aimed at increasing the level of scientific research in clinical microbiology and antimicrobial chemotherapy.

In order to support IACMAC in the expansion of the programmes at a national level, ESCMID also participated in the Second Central Russian on Antimicrobial Therapy, held in Yaroslavl on 14 – 15 October 2010, and in the special Conference on Antimicrobial Therapy held in Smolensk on 15 –16 March 2012—dedicated to the memory of Leonid Stratchounski on the occasion of his 60th birthday. Both events were actually attended by roughly 1’000 participants.
Upcoming ECCMIDs

European Congress of Clinical Microbiology and Infectious Diseases

Barcelona, Spain

10 – 13 May 2014

www.escmid.org/eccmid2014

European Congress of Clinical Microbiology and Infectious Diseases

Berlin, Germany

27 – 30 April 2013

www.escmid.org/eccmid2013
Forthcoming Events

Postgraduate Education Courses and Workshops

14 – 17 May 2012
Significance of Experimental Models for Studying Bacterial Meningitis and Sepsis
Siena, Italy
ESCMID Postgraduate Education Course

3 – 8 Jun 2012
Anaerobes in Health and Disease; How to Isolate, Identify and Look for Resistance in a Cost-Effective Way
Szeged, Hungary
ESCMID Postgraduate Technical Workshop

4 – 8 Jun 2012
Postgraduate Workshop in Clinical Parasitology
Amsterdam, The Netherlands
ESCMID Postgraduate Technical Workshop

17 – 20 Jun 2012
Antimicrobial Susceptibility Testing and Surveillance of Resistance in Gram-positive Cocci: Laboratory to Clinic
Zagreb, Croatia
ESCMID Postgraduate Technical Workshop

ESCMID Summer School

21 – 27 Jul 2012
11th ESCMID Summer School
Innsbruck, Austria

ESCMID Conferences

23 Apr 2012
5th International Day for Fighting Infection – St. George’s Day
The Antibiotic Days
London, United Kingdom

5 – 6 June 2012
Multidrug Resistant High Risk Clones (MDR-HiRIC): Features, Epidemiology and Detection
Barcelona, Spain

16 – 18 Jan 2013
2nd ESCMID Conference on Invasive Fungal Infections
Rome, Italy

22 – 24 Mar 2013
2nd ESCMID Conference on The Impact of Vaccines on Public Health
Prague, Czech Republic

More detailed information can be found on the ESCMID website: www.escmid.org

Medical Biofilm Techniques 2012
Copenhagen, Denmark
ESCMID Postgraduate Technical Workshop

2nd Workshop «Antimicrobial Susceptibility Testing and Surveillance: from Laborator to Clinic – the EUCAST, ESGARS and EPASG Perspective»
Madrid, Spain
ESCMID Postgraduate Technical Workshop

A Statistical Approach to PK/PD Analysis in Practice
Athens, Greece
ESCMID Postgraduate Technical Workshop

Infections in Returning Travellers: There Is No Border for Transmission of Infections
Istanbul, Turkey
ESCMID Postgraduate Education Course