

ISIDNEWS

An Official Publication of the International Society for Infectious Diseases

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ISID NEWS

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Plan now to attend the 11th International Congress on Infectious Diseases in Cancún, Mexico, March 4–7, 2004!



The scientific sessions and commercial exhibits will take place at the Cancún Convention Center and the Fiesta Americana Coral Beach Hotel. Hotel rooms have been reserved and further details will be available in the Preliminary Program. An attractive social program will be organized for participants and accompanying persons.

The Preliminary Program and Call for Abstracts will be available in April 2003. In order to receive the Preliminary Program you must return the registration card (back of the Newsletter) or send an e-mail to info@isid.org.

Those who are interested in submitting an abstract should do so by November 1, 2003.

The following symposia are being organized.

Please note that not all topics have been confirmed and that they are subject to change.

Controversies and New Developments in the Treatment of CNS Infections

- Bacterial Meningitis: New Trends in Epidemiology and Treatment
- Dexamethasone for Pediatric Bacterial Meningitis: Is it Beneficial in Developing Countries?
- Oral Glycerol versus Intravenous
 Dexamethasone for Childhood Bacterial
 Meningitis: Results of a Clinical Trial
- Developments in the Diagnosis and Management of Brain Abscess

Questions and Answers in Invasive Fungal Infections

- Do Patients Infected with Resistant Yeasts have Worst Clinical Outcomes?
- New Agents and New Strategies for the Treatment of Candida
- Treating Invasive Molds: What's Available and What's Coming
- The Role of Improved Serodiagnosis for the Identification of Systemic Fungal Infections

New Concepts in Infectious Diseases

- Bacteriophage Killing of Bacteria: A Weapon against *B. anthracis*
- Wolbachia and Filariasis: The Bacteria behind the Worm
- Free Amoeba as Trojan Horses for Pneumonia Pathogens
- Genetic Recombination and Intraerythrocyte Life to Escape the Immune System

New Developments in Severe Sepsis

- Pathogenesis of Sepsis
- Identifying Patients with Sepsis
- Novel Experimental Therapies for Sepsis
- Current Therapy of Sepsis

Controlling Multi-resistant Gram-Positive Cocci: Novel Antimicrobials and Existing Agents

- Understanding Mechanisms of Evolving Resistance in Gram-Positive Bacteria
- New Agents for the Treatment of Multiresistant Staphylococci and Enterococci
- Combination Therapy for VRSA and VRE
- Phytotherapeutics: Are They an Alternative?

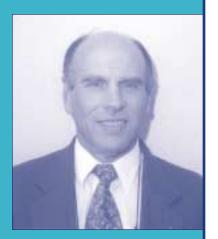
Problems Posed by Newly Identified or Transplanted Viruses

- Hendra Virus
- Nipah Virus: Bats to Pigs to Men
- Mayaro Virus
- Manifest Destiny? The Epidemiology of West Nile Virus in North America

Antimicrobial-Resistant Pathogens: Problems and Solutions

- Streptomycin-resistant (multi-resistant) *Y. pestis* (Madagascar)
- Strategies to limit Antimicrobial Resistance in the Community. What works?
- Fluoroquinolone-resistant *S. pneumoniae* (Hong Kong)
- Evidence-Based Control of Resistant Pathogens in the Hospital Setting

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Dennis L. Kasper, M.D. President International Society for Infectious Diseases

A Letter from the President

The International Society for Infectious Diseases (ISID) will hold the 11th International Congress on Infectious Diseases (ICID) in Cancún, Mexico from March 4-7, 2004. Let me take this opportunity to invite you to this informative and collegial gathering of researchers, clinicians, educators, and other persons interested in the field of infectious diseases.

The year 2002 marked the 20th anniversary of the Society's beginnings. In 1982, Ed Kass headed up an ad hoc committee whose purpose was to plan an International Congress on Infectious Diseases. The goal of that original congress, held in Vienna in 1983, continues to be the primary goal of the ISID today: to establish and maintain a global network that promotes the exchange of information, technology, and ideas among infectious disease professionals worldwide.

From these small beginnings, the ISID has evolved over time into a dynamic organization driving advances in treatment, prevention, and control of infectious diseases. Several landmarks along the way have marked the expansion of the Society's range of activities, influence, and effectiveness. These include the establishment of the ISID Fellowship Awards in 1993 as a source of support for the training of visiting scientists in specific laboratory techniques; the launching of the International Journal of Infectious Diseases in 1996 as a channel of communication among groups in infection control, professional development, and emerging diseases in 1997 as a means of applying the talents and skills of the Society's members to these key issues; and beginning in 1999 the operation of ProMED-mail a system for daily electronic dissemination of reliable information on disease outbreaks around the world.

Today, the ISID has 20,000 members from more than 100 countries. Each congress, with speakers, panelists, and attendees from diverse regions and backgrounds, offers a unique venue in which to focus on the ever-changing challenges and opportunities in our field. The 11th ICID will include plenary talks by world-renowned authorities on a variety of topics; daily poster sessions with time for informal discussions with presenters; and the popular "Meet-the-Professor" sessions, in which Congress participants have the chance to converse with expert faculty.

This meeting will provide members of the infectious diseases community with an extraordinary opportunity to share information and experiences and to gain insights into infectious disease problems and their potential solutions on a global scale. The beautiful city of Cancún will offer a relaxing backdrop for the Congress. Cancún is an exciting resort center with excellent beaches, nightclubs, shopping, and golfing. There are also places of great historical interest nearby, such as Chichén Itzá and Tulum.

We look forward to seeing you in Cancún at the 11th ICID.

Dennis L. Kasper, M.D.

President

International Society for Infectious Diseases

The 11th International Congress on Infectious Diseases in Cancún continued from page 1

Understanding Community-Acquired Pneumonia in Children

- Challenges to Diagnosing Pneumonia in Children
- What is the Gold Standard for the Diagnosis of Acute Respiratory Infections?
- The Value of X-Ray in Standardization of the Diagnosis of Pneumonia
- The Use of Vaccines to Determine the Etiology of Pneumonia

The Resistant Pneumococcus and Vaccination—Where are we in 2004?

- The Experience in the USA—4 Years after Introduction of the Vaccine
- Replacement Phenomenon and Antibiotic Resistance
- Pneumococcal Conjugate Vaccines and Antibiotic Use in Children—Are They Related?
- Expectations from Countries with High Rate of Antibiotic Resistance beyond the USA

Evolving Drug Resistance in Nosocomial Gram-negative Pathogens

- The Permeability Barrier in Gram-negative Pathogens
- Extended Spectrum of Beta-lactamase-mediated Resistance in *Enterobacteriaceae* and in Gram-negative Nonfermenters
- Zinc Carbapenemases as Emerging Resistance Determinants in Gram-negative Pathogens
- Antimicrobial Options for Treatment of Nosocomial Gram-negative Infections Caused by Multidrug-resistant Strains

Health Impact of Food-borne Pathogens

- WHO Program on Food-borne Infections
- Non-Typhoid Salmonella as a Food-borne Pathogen
- The Public Health Impact of Campylobacter
- Clinical and Epidemiological Aspects of *E. ωli* O:157:H7 in Latin America

Bioterrorism: Infectious Diseases as Weapons

- Emerging Techniques for Rapid Diagnosis of Agents of Bioterrorism
- Anthrax Vaccines: Where we Stand and Where we are Going
- Plague Surveillance as a Model for Identifying Bioterrorism Outbreaks
- Genetic Relationships and Virulence Genes of Orthopoxviruses

Confronting Pediatric HIV/AIDS Globally

- Consequences of HIV/AIDS on Child Survival with Emphasis on Latin America
- Managing Opportunistic Infections and HIV Complications in Low-resource Settings
- Strategies for Initial Therapies and Late Modifications in Children Infected with HIV
- Enabling AIDS Orphans to Achieve Healthy Productive Adulthood: Affordable Strategies that Work

Understanding Biofilms and their Role in Infectious Diseases

- Basic Molecular and Cellular Aspects of Quorum Sensing Involved in Biofilm Formation
- Clinical Correlations and Outcomes from Infections due to Biofilm-producing Bacteria
- Clinical Management and Therapy of Airway Biofilm Disease
- Role of Biofilm Polysaccharides in Infection and Prospects for Immunotherapeutic Control

Dengue: A Challenge for Science and Public Health in the New Millennium

- The Changing Global Epidemiology of Dengue
- Double-edged Sword: Dengue Immunology and the Pathogenesis of Disease
- Diagnosing Dengue: What is Available and What is Coming
- Dengue Vaccines

The Following Symposia are Under Development

Anatomy of an Outbreak: the SARS Story

- Recognizing and Initial Response to Novel Public Health Threats: The SARS Story
- Tracking the Terror: Clinical Spectrum and Management of Patients with SARS
- Identification of the SARS Pathogen
- Achieving Global Containment

The Effects of Antiretroviral Therapy on HIV Prevention: Intended AND Unintended Consequences

- Using HAART as a "Morning-after Pill" to Prevent HIV
- How Behavioral Strategies Around HIV Risk Change when HAART is Available
- Transmission of Resistant Virus
- Impact of HAART on Infectiousness

Mycotoxins

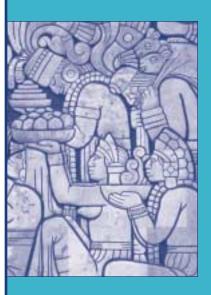
- Mycotoxins: A Review of their Potential Danger for Human Health
- Aflatoxins: An Update
- Occurrence of Mycotoxins in Food: Detection, Detoxification
- Food Standards and Mycotoxins

Advances and Challenges in the Management of Chronic Viral Infections in Lower Resource Settings

- Preventing Maternal-to-Child Transmission of HIV in Low-resource Settings: Moving from Clinical Trial to Community Practice
- Sexually Transmitted Diseases and HIV Co-infections: What Should Health Care Workers and Public Health Officials be Doing?
- Recognizing Drug Resistance and Cross-resistance: What is Realistic for HAART Programs in HIV Endemic Countries
- Therapeutic and Diagnostic Innovations for the Management of HCV Infection

Prosthetic Device Infections

- Physiopathology of Prosthetic Device Infections
- Therapy of Different Prosthetic Device Infections—The USA Experience
- An Algorithm for a Systematic Approach of Prosthetic Device Infections
- Cost-effectiveness of Different Approaches for the Therapy of Prosthetic Device Infections



Please visit our web site www.isid.org for more information on the 11th International Congress on Infectious Diseases as well as all of our programs and upcoming events.

Confirmed Speakers

Aidara-Kane Awa, Switzerland

Akira Shizuo, Japan

Braam Peter, Switzerland

Brook Itzhak, USA

Bush Karen, USA

Calandra Thierry, Switzerland

Cauda Roberto, Italy

Chua Kaw Bing, Malaysia

Cohen Jon, United Kingdom

Cravioto Alejandro, Mexico

Dagan Ron, Israel

Della Negra Marinella, Brazil

Dennis David, USA

Farmer Paul, USA

Fernandez Heriberto, Chile

Fischetti Vincent, USA

Friedlander Arthur, USA

Graybill John, USA

Gubler Duane, USA

Gutkind Gabriel, Argentina

Guzman María, Cuba

Hill Adrian, United Kingdom

Iglewski Barbara, USA

Klugman Keith, USA

Kobayashi Hiroyuki, Japan

Krčméry Vladimir,

Slovak Republic

Lepage Philippe, Belgium

Madhi Shabir, South Africa

Marr Kieren, USA

Molyneux Elizabeth, Malawi

Murray Barbara, USA

Odio Carla, Costa Rica

Opal Steven, USA

Palmer Guy, USA

Paterson David, USA

Petersen Lyle, USA

Pier Gerald, USA

Poole Keith, Canada

Raoult Didier, France

Riley Tom, Australia

Roine Irmeli, Chile

Rossolini Gian Maria, Italy

San Wellington, USA

Sepúlveda Jaime, Mexico

Smith Geoffrey,

United Kingdor

Taylor Mark, United Kingdom

Waldvogel Francis,

Switzerland

Whitney Cynthia, USA

The 11th International Congress on Infectious Diseases in Cancún continued from page 3

The Following Symposia are Under Development

- Advances in Malaria
- Tuberculosis
- Challenges to the Global Detection and Surveillance of Infectious Diseases

PLENARY LECTURES



Shizuo AKIRA, Japan Of Flies and Men: The Role of Toll-like Receptors in Innate Immunity

Shizuo Akira is now a professor at the Research Institute for Microbial Diseases at Osaka University, Japan. He received his M.D. in

1977 and Ph.D. in 1984 from Osaka University. After postdoctoral work in the Department of Immunology, University of California at Berkeley, he studied IL-6 gene regulation and signaling at the Institute for Molecular and Cellular Biology, Osaka University, and cloned transcription factors NF-IL6 (also known as C/EBP beta) and STAT3. His current research interests are molecular mechanisms of host defense and innate immunity, which he studies primarily by generating knockout mice.



Paul FARMER, USA
Overcoming Inequality to
Treat Multiple Drug
Resistant TB and HIV in
Low Resource Settings
Paul Farmer, M.D., Ph.D., is
the Maude and Lillian Presley
Professor of Medical Anthropol-

ogy at Harvard Medical School and Medical Director of the Clinique Bon Sauveur, a charity hospital in rural Haiti. An infectious disease physician as well as anthropologist, Dr. Farmer has worked in communicable-disease control in the Americas for over a decade. Along with his colleagues in the Program in Infectious Disease and Social Change in the Department of Social Medicine at Harvard Medical School, Dr. Farmer has pioneered novel, community-based treatment strategies for tuberculosis—and also sexually transmitted infections (including HIV) and drugresistant typhoid—in resource-poor settings. Dr. Farmer is Vice Chief of Brigham and Women's Hospital's Division of Social Medicine and Health Inequalities.



Adrian V.S. HILL, United Kingdom Genetic Susceptibility to Infectious Diseases

Professor Adrian V. S. Hill is a Wellcome Trust Principal Research Fellow at the Institute of Molecular Medicine and

Wellcome Trust Centre for Human Genetics at the University of Oxford. He qualified for Oxford Clinical School in 1982 and undertook a DPhil in human population genetics at the MRC Molecular Haematology Unit. Following clinical training, he returned in 1988 to the Institute of

- Update in STD
- STD Control in Latin America:
 Emerging Data from Clinical Trials
- Challenges to Polio Eradication
- Innate Immunity (joint with ESCMID)
- Infection Control

Molecular Medicine. With collaborators in Africa and Asia, he has made contributions to the genetics of susceptibility to several infectious diseases, especially malaria and tuberculosis, and to vaccine design and development. His group has recently been undertaking clinical trials of new T cell-inducing malaria vaccines. He is a Fellow of the Royal College of Physicians and of the UK Academy of Medical Sciences.



Rino RAPPUOLI, Italy Reverse Vaccinology: Using Genome Information to Develop New Vaccines

Rino Rappuoli is responsible for Chiron Vaccines Research. After earning his PhD in Biological Sciences from the University of

Siena, he studied at Washington University of St. Louis, Rockefeller University and Harvard Medical School. He is recipient of the Paul Ehrlich Prize and other prestigious awards and has authored or co-authored 257 original papers, 42 reviews, 31 chapters, and 97 congress proceedings and eight edited volumes. His field of expertise is vaccines, bacterial pathogenesis, and infectious diseases. Dr. Rappuoli is a member of several international societies and committees, including the European Molecular Biology Organization; K&D working group of the European Vaccines Manufacturers; Scientific Committee of the Paul Ehrlich Foundation; and External Advisory Group for "Control of Infectious Diseases" of the European Union. He is co-chairman of the R/D Task Force of the Global Alliance for Vaccines and Immunization (GAVI).



Jaime SEPULVEDA, Mexico Cholera in Latin America: The Paradoxical Benefits of the Last Pandemic

Jaime Sepúlveda is in his second term as the Director General of the National Institute of Public Health in Mexico. His priorities

have included two national surveys, the National Health Survey 2000, and the National Survey on Nutrition II, as well as the seroepidemiology of infectious diseases, effective strategies for the control of chronic diseases, and epidemiological surveillance. Involved in Mexican health care at the national level for nearly 20 years, he has also been active in health data collection, analysis, and educational campaigns. Dr. Sepúlveda is a founder of the National AIDS Council (CONASIDA), and the National Vaccination Council (CONAVA), which brought about the eradication of polio in México. He has played important roles internationally in the vaccine and prevention initiatives of such organizations as UNAIDS, WHO, and the CDC.

2002 ISID International HIV/AIDS Training Program: A Participant's Perspective

by Dr. Nanthalile Mugala, Zambia

Coming from a land where certain advances in science are widely thought to be non-existent, this training could not have come at a better time for me. It was very encouraging to find that HIV/AIDS, which was commonly thought to be a death sentence, can now be managed and administered very well in the developing world. My country, Zambia, is one of the countries most affected by HIV/AIDS, yet we lag behind the other countries in utilizing modern advances to treat this disease.

My training site was at the Memorial Sloan Kettering Cancer Center in New York City with Dr. Kent Sepkowitz as the course director and Ms. Melanie Carrow as the course coordinator. The program included lectures, conferences, clinics, and rounds. The lectures were compulsory, but the other activities were elective and each participant could attend what they felt was most useful and applicable in their line of work. The structure of the course thus allowed all of us to concentrate on our main interest. In my group, there were two paediatricians and two physicians.

Looking back on this training, I realize that the exposure and the experience I gained are irreplaceable. While the kinds of services that are being offered to patients with access to a well-organized and equipped health service and qualified medical and support staff are far from the situation at home, there is still a lot that can be done in Zambia.

I attended both the adult and the paediatric HIV/AIDS clinics. What was most impressive was the multidisciplinary approach to the problem. The patient or the caregiver had access not only to the clinicians, but also to the social workers, the nutritionists, etc. This multidisciplinary approach is, in my opinion, something that should be encouraged in our lower-resource setting. With a concerted effort, it could be achieved.

One of the problems in the management of HIV/AIDS is poor compliance with treatment regimens including antiretroviral drugs, despite their ready availability in places like New York. Therefore, while advocating for cheaper drugs, one still needs to think of ways to encourage patients to maintain good treatment compliance and regular follow-up. Some strategies have resulted in patients living longer, more productive lives. This success is what gives every physician the courage to go on.

Apart from the clinical aspect, the training offers a chance to meet other people working in a the field with whom long-term partnerships can be established. Because management of HIV/AIDS is dynamic, the exchange of information will have to continue after the training if it is to be fruitful. All of the physicians we met during the training both at the Memorial Sloan Kettering and in the Bronx were very willing to have discussions with us. These exchanges were very educational. These physicians were interested in our experiences, and I have no doubt that they also learned from us. •



Dr. Nanthalile Mugala

Calendar of Events

2003

April 6–8. Emergence and Control of Zoonotic Viral Encephalitis. Veyrier-du-Lac, France. Contact: Secretariat: Marlène CROZET, 17 rue Bourgelat – 69002 Lyon, France; tel, 33 4 72 40 79 75; fax, 33 4 72 40 79 50; e-mail, marlene.crozet@fondation-merieux.org; web, http://www.fondation-merieux.org

April 6–10. 11th International Symposium on Viral Hepatitis and Liver Disease (ISVHLD). Sydney, Australia. Contact: Tour Hosts Pty Limited, ABN 28 000 386 676, GPO Box 128, Sydney NSW 2001 Australia; tel, 61 2 9248 0800; fax, 61 2 9248 0894; e-mail, isvhld@tourhosts.com.au; web, www.tourhosts.com.au/isvhld

May 1–3. 4th International Symposium on Antimicrobial Agents and Resistance (ISAAR). Seoul, Korea. Contact: 50 Ilwon-dong, Kangnam-ku, Seoul 135-710 Korea; tel, 82-2-3410-0327; fax, 82-2-3410-0023; e-mail, susan@ansorp.org; web, www.ansorp.org

May 7–11. 8th Conference of the International Society of Travel Medicine. New York City, USA. Contact: CISTM8 c/o Laser Registration, 1200 G Street NW, Suite 800, Washington, D.C. 2005-3967; tel, 202-347-2227; fax, 202 347-1711; e-mail, CISTM8@Laser-Registration.com; web, http://www.talley.com/ISTM/istm.html

May 10–13. 13th European Congress of Clinical Microbiology and Infectious Diseases (ECCMID). Glasgow, Scotland. Contact: AKM Congress Service; tel, 41 61 686 77 11; fax, 41 61 686 77 88; e-mail, info@akm.ch; web, http://www.akm.ch/eccmid2003

June 7–10. 23rd International Congress of Chemotherapy (ICC).

Durban, South Africa. Contact: CONGREX Holland BV, A.J.

Ernststraat 595K, 1082 LD Amsterdam, The Netherlands;
tel: 31 20 5040 200; fax, 21 20 5040 225; e-mail, icc2003@
congrex.nl; web, http://www.congrex.nl/icc2003/

June 23–25, 2003. International Conference on Toxoplasmosis.
Copenhagen, Denmark. Contact: ICS A/S Copenhagen, PO Box 41, 2900 Hellerup, Denmark; tel, 45 3946 0500; fax, 45 3946 0515; e-mail, toxo2003@ics.dk; web, www.toxo2003.ics.dk

October 9–12. 41st Annual Meeting of Infectious Diseases Society of America (IDSA). San Diego, California, USA. Contact: IDSA, 66 Canal Center Plaza, Suite 600 Alexandria, VA 22314; tel, 703-299-0200; fax, 703-299-0204; e-mail, info@idsociety.org

October 17–21. 5th European Congress of Chemotherapy and Infection. Rhodes, Greece. Contact: Congrex Sweden AB, Attn: ECC-5, PO Box 5619, SE-114 86 Stockholm, Sweden; tel, 46 8 459 66 00; fax, 46 8 661 91 25; e-mail, ECC5@congrex.se; web, www.congrex.com/ecc5

November 19–21. Immunological Approaches for Control of Nosocomial Infections. Veyrier-du-Lac, France. Contact:
Organizing Committee: Michèle MICHAUD, 17 rue Bourgelat –
69002 Lyon, France; tel, 33 4 72 40 79 73; fax, 33 4 72 40 79 50;
e-mail, michele.michaud@fondation-merieux.org



Silvia V. Nates, Ph.D.



Laura C. Martínez

ISID Small Grants Program Final Report

by Silvia V. Nates, Ph.D., recipient of the grant; Laura C. Martínez, Biologist; associate researcher of the project.

Molecular biology of picobirnavirus: genomic characterization of strains circulating in Argentina.

Picobirnavirus (PBV) is the name of a recently identified group of viruses. "Pico" refers to the small size of the viral particles observed by electron microscopy (35 nm approximately) and "birna" to its bisegmented, double-strand RNA (dsRNA) genome discovered by polyacrylamide gel electrophoresis analysis. Current laboratory diagnosis relies upon electron microscopy (EM) and the detection of the dsRNA bisegmented genome by polyacrylamide gel electrophoresis (PAGE).

We began to work with PBV in 1995, at the Gastroenteritis Unit, Instituto de Virología "Dr. J.M. Vanella", Universidad Nacional de Córdoba, Argentina. The first stage of the study was designed to describe the circulation of PBV in Argentina in different human populations, including immunocompromised and immunocompetent adults and children with and without diarrhea. This investigation offered preliminary results on the prevalence of PBV in Argentina, supporting the hypothesis that PBV is associated with diarrhea in the HIV-infected population (AIDS & Human Retroviruses J, Vol. 15, 1427-32, 1999). In 2000, two sets of PBV-specific primers designed by Blair Rosen (Virology, 277 (2): 316-29, 2000) were kindly supplied by Dr. Roger Glass from the Centers for Disease Control and Prevention (CDC), Atlanta, Georgia, USA. This second stage of the PBV study was supported by the ISID Small Grant Program, from July 2001 until July 2002. During this study, fecal specimens from HIV-infected persons from a single location (Córdoba City, Argentina) during 1995-2000 were assayed for the presence of PBV by PAGE and RT-PCR. The efficacy of the available PBVspecific sets of primers was established; the products were molecularly characterized by nucleotide sequencing, and the phylogenetic relationships between PBV strains from Argentina, China, and the USA were determined. The results are summarized in the following statements:

1) Argentina PBV-positive samples by PAGE were analyzed by RT-PCR using primers derived from the genomic segment 2 of PBV-positive strains isolated in China and the USA. Primers derived from the Chinese strain had limited reactivity. Of the specimens screened, only a low proportion of samples (30.7%) produced amplicons of the expected size. On the other hand, no sample was revealed as positive with the primers derived from the USA PBV strain. Our results extend those reported by Rosen et al. (Virology, 277 (2): 316-29, 2000), supporting the hypothesis that PBV with gene 2 sequence variations may circulate in Argentina. Indeed, it could be suggested that the samples PBV/PAGE (+) that did not match any of the sets of available primers may belong to different genogroup/s with respect to those that gave RT-PCR positive reaction.

- 2) An unexpected finding was the extent of genetic diversity of PBV-Argentina strains isolated from a single location (Córdoba city) and from a homogeneous population, that is, from HIV-infected patients with diarrhea with CD4(+) lymphocyte cell counts less than 499/ml. The genetic variation is evidenced by up to 47.7% sequence difference among the strains analyzed. In spite of this, conserved regions of up to 81% identity were observed. These domains were all present also in PBV strains isolated in the USA and China.
- 3) The primers used in this study rendered an amplicon that involves the amino acid motif 1 (D-S-D) of the RNA-dependent RNA polymerase of dsRNA viruses; this motif was identified in all the PBV-Argentina samples analyzed.
- 4) The phylogenetic relationships between strains of PBV were determined on the basis of the partial-length genomic segment 2 sequences for PBV from Argentina with homologous published sequences from HIV- and non-HIV-infected persons from the USA, along with one PBV strain isolated from a non-HIV-infected person from China. The analysis of the data showed clusters that grouped together the US and Argentine strains as well as PBV-strains isolated from HIV-infected and non-HIV-infected individuals. Likewise, no PBV of one sequence type was observed in HIV- infected persons as opposed to persons not infected with HIV.
- 5) Comparison between the nucleic acid and deduced amino acid sequences the Argentine PBV-partial length genomic segment 2 and the sequences in the Gen Bank/NCBI database did not reveal extensive homologies with other known viruses. Therefore, PBV may represent a heterogeneous emerging group of viruses not related to the currently classified viruses.
- 6) PBV-negative stool samples by PAGE, also isolated from Argentina HIV-infected individuals with diarrhea, gave positive results by RT-PCR using the primers derived from the PBV Chinese strain. This finding increased the PBV prevalence up to 17.89% detected in Argentina HIV-infected patients with diarrhea versus those without diarrhea (0%) and non-HIV infected individuals (0%) (p<0.05). This further supports the potential association between PBV and the persistent diarrhea syndrome in adult individuals with severe immunosuppressive conditions.

I wish to express my sincere thanks to ISID for having selected me as a recipient of a grant under the Small Grants Program. It made it possible to continue the studies on PBV recently begun by our research team, especially helping Biologist Laura C. Martínez (associate investigator of this project) to pursue her Ph.D. work on molecular biology of PBV. ❖

SSI/ISID Infectious Diseases Fellowship Announces the First Fellows

Congratulations to the following Fellows, who are the first recipients of the Swiss Society for Infectious Diseases and the International Society for Infectious Diseases (SSI/ISID) Infectious Disease Research Fellowship Program. The Fellows are jointly funded 36,000 SF (approximately \$21,000 USD) for one year by the SSI and their sponsoring institutions.

The purpose of this new Fellowship Program is to support infectious disease physicians and scientists from developing countries through multidisciplinary clinical and laboratory training at select biomedical institutions in Switzerland. The specific objectives of the Fellowship Program are not only to train promising young physicians and scientists from developing countries, but to also foster partnerships between Fellows and infectious disease leaders in Switzerland and to increase the scientific research capacity of low-income countries with high burdens of infectious diseases.

SSI/ISID Fellows are placed at one of six collaborating research centers in Switzerland according to their skills and technical interests. Infectious diseases programs at each institution offer experience in clinical infectious diseases including HIV and in microbiology.

The 2003 Fellows



Dr. Andres Pascual, MD Fundación Centro de Estudios Infectológicos, Buenos Aries, Argentina

Dr. Pascual will conduct his research in collaboration with scientists from the Infectious Diseases Division in Lausanne, Switzerland.

Dr. Pascual completed his residency in Clinical Pediatrics at the Buenos Aires University School of Medicine, which is a tertiary care 500-bed county hospital. After his residency, Dr. Pascual began a Fellowship with FUNCEI, Fundacion del Centro de Estudios Infectológicos, in adult and pediatric infectious diseases. Dr. Pascual is now an attending physician in the pediatric infectious diseases division at the Hospital Materno Infantil de San Isidro.



Dr. Dongmi Li, MD, MSc The Clinical Laboratory of Shantou Central Hospital, Shantou, Guangdong Province, China

Dr. Li will conduct her research in collaboration with scientists from the Infectious Diseases Division in Geneva, Switzerland. Dr. Li is actually funded in full by the Infectious Diseases Division in Geneva.

Before moving to Geneva, Dr. Li was the Assistant Director of the Clinical Laboratory at the Shantou Central Hospital in Shantou, Guangdong Province, China. Some of her research projects included "Emergence and Dissemination in Chinese Hospitals of Strains of *Staphylococcus aureus* Heterogeneously resistant to Vancomycin," and "Molecular Epidemiology of Extended-Spectrum b-lacta-

mases-producing *Klebsiella pneumoniae* and *Escherichia coli* in Shantou." Dr. Li received her Medical Degree from the Lanzhou Medical College in Lanzhou, Gansu Province in China. She also has a Masters degree in Medical Microbiology from Dalian Medical College in Dalian, Liaoning Province, China.



Dr. Chaiwat Ungsedhapand, MD HIV-NAT, Thai Red Cross AIDS Research Center, Bangkok, Thailand

Dr. Ungdedhapand will conduct his research with scientists from the Infectious Disease Division in Basel, Switzerland.

Dr. Ungsedhapand received his residency training in Bangkok. At present, Dr. Ungsedhapand is a clinical research physician in the HIV Netherlands Australia Thailand Research Collaboration (HIV-NAT), and the Thai Red Cross AIDS Research Center in Thailand, which was established in 1996 by consensus of the directors of the National AIDS Therapy Evaluation Center (NATEC) in Amsterdam. He is also a member of the National Center in HIV Epidemiology

and Clinical Research (NCHECR) in Sydney and the Program on AIDS, Thai Red Cross Society (TRCS) in Bangkok to conduct and co-ordinate multi-center HIV-related clinical trials in Good Clinical Practice (GCP) standards in Thailand.

Details of the next Fellowship Program are posted on the ISID web site: http://www.isid.org.







A Letter from Larry Madoff, MD Editor of ProMED-mail

ProMED-mail has continued to grow and now counts more than 28,000 subscribers in over 160 countries.
Subscriptions have been growing at a nearly 12% annual rate. The past six months have been exciting on a number of fronts. Below are some of the exciting reports we've carried and some of the new developments at ProMED-mail in the past year and in the year to come.

" I couldn't do my job without it.

It gives me valuable information and I've learned a lot about diseases of which I knew little before. Especially the comments and moderation taught me how to 'think' when considering a disease outbreak."

Physician Institute of Tropical Medicine Berlin, Germany

Examples of Global Infectious Disease News in 2002 as reported in ProMED-mail

Severe Acute Respiratory Syndrome (SARS) Worldwide

On 10 February, ProMED-mail posted a query from a reader regarding an apparent outbreak of a lethal pneumonia in Guangdong, China. This was the first global publication concerning what would become known as the SARS outbreak. It has since spread across continents, afflicted thousands of individuals, and caused WHO to issue an unprecedented emergency travel advisory. ProMED-mail has continued to update the situation with extensive daily reports on the outbreak. While the etiologic agent remains under investigation, a novel coronavirus appears to be a likely candidate—this was reported directly via ProMED-mail by one of the investigating laboratories.

Hepatitis E in the Central African Republic In early October, ProMED-mail reported an epidemic of hepatitis E in the northern suburbs of Bangui, the capital of the Central African Republic (CAR). HEV, previously considered to be a calicivirus-like agent but now designated as a separate unassigned genus, can cause acute sporadic and epidemic viral hepatitis. Increases in HEV prevalence have recently been noted in some developed countries, but the reasons for this are not entirely clear. It seems that many of these patients have not traveled to endemic areas. Serologic evidence suggests that the virus may in fact be more widespread than originally believed.

Vancomycin-resistant Staphylococcus aureus (VRSA)

The first two clinical isolates of Staphylococcus aureus found to contain the vanA gene have appeared in the USA in recent months. The first VRSA strain, cultured from a patient in Michigan in June 2002, was fully resistant to vancomycin (MIC > 128 mg/mL) and teicoplanin (MIČ 32 mg/mL), as determined by a broth microdilution method. The second VRSA strain, which came from a patient in Pennsylvania in September 2002, appears to be unrelated to the first VRSA Michigan strain. As noted on ProMED, the first cases of VRSA infection and many cases of VISA (vancomycin-intermediate S. aureus) infection over the last five years or so have occurred in chronic renal failure patients treated with vancomycin for MRSA.

Internet-a-thon

From September 18th to the end of 2002, ProMED-mail successfully raised over \$33,000 via our Internet-a-thon from more than 500 individual donors in 36 different countries. I want to thank everybody who participated in this fund-raising event. During this time, we also benefited from corporate donations from Pfizer, Aventis, and Cubist, raising our total from this drive to over \$77,000. The funds from the Internet-a-thon provide financial support to ProMED-mail in order to provide reliable, independent reporting of emerging infectious diseases and outbreaks as they happen. Anyone who donated \$50 or more will receive the new ProMED-mail mouse pad. During this fund drive, 438 donors also became members of ISID.

Moderators Workbench

In order to take advantage of database technology to manage the flow of ProMED-mail information and to enable the content of outbreak reports to be used and presented in various formats, a "Moderator Workbench" is scheduled to launch in April 2003. The Workbench provides a common web-based platform for the ProMED-mail editorial staff to receive, track, comment upon, and post reports. This tool uses custom-built features to accommodate the unique information needs of ProMED-mail and will enable the program to handle a greater volume of reports more efficiently. ProMED-mail appreciates the generous support of the Oracle Corporation in the development of this important tool.

Mapping Geographic Information

We have recently begun a collaboration with the Center for Applied Microbiological Research in the U.K. (CAMR) to develop a real-time mapping interface for ProMED-mail reports. This will allow reports to be linked with world and regional maps and provide a user-friendly and intuitive mechanism for tracking the distribution of outbreaks and disease occurrence. CAMR has begun by 'geocoding' our 2002 reports. We plan to allow our staff to directly key reports with geographical data using the Moderator's workbench, thus allowing reports to be mapped automatically as they are posted. We hope to have this in operation by the end of 2003.

What's new for 2003

Collaboration with the Mekong Basin Disease Surveillance Project (MBDS)

The goal of the collaboration between ProMED-mail and the MBDS in Southeast Asia is to enhance the effectiveness of both networks and to assist MBDS in reaching its objectives. Specifically, ProMED-mail proposes to assist MBDS in establishing an electronic sub-regional surveillance and information exchange network for the priority diseases identified for prevention and control amongst the six participating countries (Cambodia, Yunnan Province in China, Lao PDR, Myanmar, Thailand, and Vietnam). ProMED-mail will provide technical, editorial, and educational support to the MBDS Data Integration Project in order to develop its capacities in data collection, management, and dissemination.

A similar collaboration with a disease surveillance group in East Africa (EAIDSNet) will be launched later this year connecting ProMEDmail to groups in Tanzania, Uganda, and Kenya.

Through regional contacts fostered by interactions with MBDS and EAIDSNet, ProMED-mail will gain greater understanding of the emerging infectious disease threats important in Southeast Asia and East Africa and will strengthen disease surveillance in the region.

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