



ISID NEWS

An Official Publication of the International Society for Infectious Diseases

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ISID NEWS

181 Longwood Avenue
Boston, MA 02115-5804 USA
Telephone: (617) 277-0551
1 (800) 779-8998
Fax: (617) 731-1541
E-mail: info@isid.org
<http://www.isid.org>



ProMED-mail ~ News on our Russian Initiatives in the Newly Independent States

In order to improve ProMED's ability to foster transparency in the reporting and discovery of emerging disease outbreaks, we have focused our efforts on developing regional networks in areas of the world where due to cultural and language barriers outbreak information is sparse. Our programs in Latin America (ProMED-ESP and ProMED-PORT) and Southeast Asia (ProMED-MBDS) have served the dual purpose of improving communication of infectious disease news within these areas and, at the same time, allowing ProMED to get earlier warnings from these regions to the rest of the world.

In November 2003, the International Society for Infectious Diseases (ISID) received funding from the Nuclear Threat Initiative to create a pilot Russian-language based outbreak-reporting system in conjunction with ProMED-mail. An essential step to containing outbreaks or bio-terrorist attacks is to get reliable information rapidly to those in a position to respond. The detection of potential epidemics or biological weapons attacks requires global networks capable of identifying and reporting outbreak events rapidly and accurately.

Our first step was to hire four physician scientists from the Newly Independent States (NIS) to staff the Russian language reporting system. Dr. Nilufar Rakhmanova of Tashkent, Uzbekistan, a pediatrician with experience in international health and fluent in English, Russian, Uzbek and

Tajik/Persian became the program's Russian language moderator. Dr. Vadim Melnik from Donetsk Medical University in Donetsk, Ukraine, Dr. Alexander Peredkov from the Kyrgyz Republic Ministry of Health, in Bishkek, Kyrgyz Republic and Dr. Natalia Pshenichnaya from Rostov State Medical University, Rostov-on-Don, Russia assumed responsibilities as correspondents. The NIS moderator has had the opportunity to interact with ProMED-mail staff both in person and in a virtual context, a factor that has been crucial to the growth and development of the Russian language program.

We have created a Russian language reporting web site that is freely accessible by anyone with access to the Internet. The web site includes basic information related to ProMED-mail and its Russian services, a listing of posts in Russian, access to an archive of Russian-language posts that is fully searchable in Russian and information on how to submit reports to ProMED-mail. The ProMED-RUS staff and their contact information are included in English on the Who's Who page of the main ProMED-mail web site.

An e-mail service that distributes information on emerging and infectious disease outbreaks in Russian has been constructed with 68 subscribers from 10 NIS enrolled to participate. Implementation of the ProMED-RUS web site, though complicated by the necessity of translation into a non-Roman alphabet, was accomplished working with Oracle, the software company that hosts the ProMED-mail

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The screenshot shows the Russian Home Page of ProMED-mail. The browser address bar displays: http://www.promedmail.org/pls/promed/f?p=2400:1090:12320351808313727393::NO::FSP_LANGUAGE_PREFERENCE::. The page features the ISID logo and navigation links for 'about ISID', 'membership', 'programs', 'publications', 'resources', '11th ICID', and 'site map'. A main section titled 'свежая ProMED-RUS корреспонденция' (Fresh ProMED-RUS correspondence) lists several news items with dates and locations, such as '25-ОКТ-2005 / PRO/RUS > Гепатит А в Нижнем Новгороде (04)'. Below this is a 'Posting from last 30 days...' section. At the bottom, there is a copyright notice: '©2001 International Society for Infectious Diseases All Rights Reserved. Read our privacy guidelines. Use of this web site and related services is governed by the Terms of Service.'

News on our Russian Initiatives *continued from page 1*

website. Not all reports on the ProMED-RUS email list will appear in English on ProMED-mail, nor do all of the English reports appear on the Russian website. Decisions about which posts are relevant and therefore translated are made by Dr. Rakhmanova along with the ProMED-mail editors.

Since initiation of the program, the NIS editorial staff has identified approximately 190 outbreak reports from the former Soviet Union region that have been translated from Russian and disseminated to the 30,000+ subscribers on the worldwide ProMED-mail system. Outbreaks that previously may have gone unnoticed by public health surveillance organizations or others because the reports appeared only in Russian are now available globally in English via ProMED-mail. All of these reports are stored in the ProMED-mail archives, allowing for ability to examine trends in NIS regional outbreaks by disease, location or time.

Among the reports from the NIS, nearly 60 involved outbreaks of agents of potential bioweapons importance including anthrax, plague, toxins, Ebola, and other hemorrhagic fevers (agents included in the CDC select agents list). While none of these were thought to be actual incidents of bioterrorism or biological warfare, they underscore the ability of the ProMED-RUS system to identify outbreaks caused by these agents. ❖

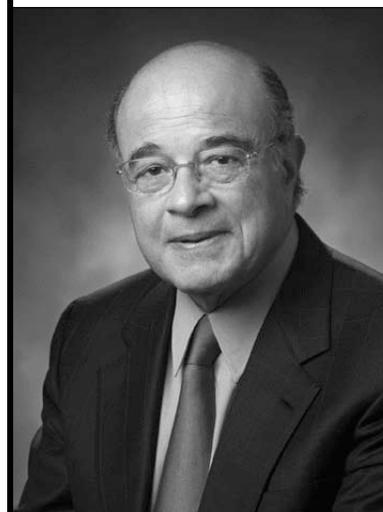


The 12th ICID in Lisbon

We are pleased to announce that Dr. Adel Mahmoud will be a plenary speaker at the 12th International Congress on Infectious Diseases in Lisbon, Portugal from June 15–18, 2006. Dr. Mahmoud, along with the four other exciting plenaries highlighted in previous issues of the ISID NEWS, will provide participants with state-of-the-art updates on a topics of special interest.

Adel A.F. Mahmoud, M.D., Ph.D. is president of Merck Vaccines at Merck & Co., Inc. He formerly served Case Western Reserve University and University Hospitals of Cleveland as Chairman of the Department of Medicine and Physician-in-Chief from 1987 to 1998. He also is an adjunct Professor of Medicine at Case Western Reserve University, Cleveland, Ohio. Dr. Mahmoud conducted pioneering investigations on the biology and function of eosinophils in helminthic infections. He also established clinical and laboratory investigations in Kenya, Egypt and the Philippines in order to examine the determinants of infection and disease in schistosomiasis and other infections. This work led to the development of innovative strategies to control those infections, which have been adopted by the World Health Organization as selective population chemotherapy. In recent years, Dr. Mahmoud turned his attention to developing a comprehensive set of responses to the problems associated with emerging infections and the need to expand immunization programs in the developing world.

Dr. Mahmoud is a fellow of the American College of Physicians and a member of the Expert Advisory Panel on Parasitic Diseases of the World Health Organization. He served on the National Advisory Allergy and Infectious Diseases Council and is a past-president of the Central Society for Clinical Research and the International Society for Infectious Diseases. Dr. Mahmoud's plenary lecture is titled, "A New Era for Immunization in Public Health." ❖



Adel Mahmoud, MD, PhD

PLENARY LECTURES

Adel MAHMOUD, United States
**A New Era for Immunization
in Public Health**

Bonnie BASSLER, United States
**Bacterial Crosstalk: Implications
for Pathogenesis And Treatment**

Edward FEIL, United Kingdom
**Bacterial Microevolution:
Relevance to the Clinician**

Antoni TORRES, Spain
**Severe Community-acquired
Pneumonia—A Genetic
Predisposition?**

**Bernhard SCHWARTLÄNDER,
Switzerland**
**The Impact of the Global Fund
to Fight AIDS, Tuberculosis and
Malaria after Five Years**

Confirmed Speakers as of September 27, 2005

AMARAL, Leonard (PORTUGAL)
ANDERSEN, Peter (DENMARK)
ASHLEY, Elizabeth (THAILAND)
AYLWARD, Bruce (SWITZERLAND)
BARRY, Clifton (USA)
BASSLER, Bonnie (USA)
CERCENADO, Emilia (SPAIN)
COHEN, Jon (UNITED KINGDOM)
CRUBEZY, Eric (FRANCE)
DABIS, Francois (FRANCE)
DAGAN, Ron (ISRAEL)
DE LENCASTRE, Herminia (PORTUGAL)
DRANCOURT, Michel (FRANCE)
DUSE, Adriano (SOUTH AFRICA)
EREMIN, Sergei (RUSSIA)
ETIENNE, Jerome (FRANCE)
FARRELL, David (UNITED KINGDOM)
FEDSON, David (FRANCE)
GAVALDA, Joan (SPAIN)
GIAQUINTO, Carlo (ITALY)
GODFREY-FAUSSETT, Peter (UNITED KINGDOM)
GOLEBOCK, Douglas (USA)
GRAYBILL, John (USA)
HEYMAN, Sally (USA)
HILL, Adrian (UNITED KINGDOM)
HIMMICH, Hakima (MOROCCO)
HIRSH, Aaron (USA)
IBRAHIM, Salah (SUDAN)
JOHNSTON, Margaret (USA)
KLUGMAN, Keith (USA)
KNOBEL, Hernando (SPAIN)
KULKANYA, Chochephaibulkit (THAILAND)
LILJESTROM, Peter (SWEDEN)
LINDE, Hans-Joerg (GERMANY)
LOW, Don (CANADA)
LUCET, Jean-Christophe (FRANCE)
LUZURIAGA, Katherine (USA)
MADHI, Shabir (SOUTH AFRICA)
MAERTENS, Johan (BELGIUM)
MAHMOUD, Adel (USA)
MANSINHO, Kamal (PORTUGAL)
MAYXAY, Mayfong (LAOS)
MCINTOSH, Ken (USA)
MEHTAR, Shaheen (SOUTH AFRICA)
MEMISH, Ziad (SAUDI ARABIA)
MERTSOLA, Jussi (FINLAND)
MIRA, Jean-Paul (FRANCE)
MIRO, Jose Maria (SPAIN)
MITCHELL, Tim (SCOTLAND, UK)

12th International Congress on Infectious Diseases • Symposia

June 15–18, 2006 • Lisbon, Portugal

The following symposia are being organized ~ Updated September 27, 2005.

Pediatric Respiratory Tract Infections: Old problems, New Insights

- Infections and Asthma: Understanding the Relationships
- Tuberculosis: Recognition and Management in Children With and Without HIV
- Pertussis: Increasing Old Problem
- Measles: The Sudanese Experience

New Developments in Institutional MRSA Control

- Worldwide MRSA Spread: The Bridge Between Molecular Biology and Healthcare
- Evidence: What Works, What does not Work for MRSA Control?
- Successful Control of Endemic MRSA: Is it Possible?
- Rapid Screening for MRSA: Myth or Reality?

Antibiotic-Resistant *S. pneumoniae*: Antibiotic Restriction and Pneumococcal Vaccines

- Do PD/PK Parameters Predict Emerging Resistance?
- New Antibiotics and New Antibiotic-resistance Mechanisms in pneumococci
- What Have We Learned from Trends in Antibiotic Resistance After Introduction of PCVs?
- Do Interventions in Antibiotic Use Influence Antibiotic-resistant *S. pneumoniae*?

Septic Shock

- Innate Immunity: Friend or Foe?
- Are All Hosts Equal? Do Genetics Matter?
- Antibiotic Choice in Sepsis: A Forgotten Art
- Steroids Good or Bad—A Critical Appraisal

Modern Identification of the Outbreaks of the Past

- Plague and Black Death
- Spanish Influenza
- Mycobacterium Disease at the Origins of Urban Life in Egypt
- Human Louse Infestations: Past and Present
- Pre-Columbian Syphilis

Pandemic Influenza: Are We Ready Yet?

- The Molecular Virology of Influenza Vaccines and Its Implications for the Next Pandemic
- Pandemic Influenza Preparedness at the National and International Level
- Prevention and Control of the Next Pandemic with Vaccines and Antivirals: Prospects for an Equitable Global Supply
- The Political Dimensions of the Next Influenza Pandemic: A Threat to Global Health Security

New Directions in Malaria Treatment

- How PD/PK Characteristics and Resistance Affect Treatment Strategies
- Assessing Treatment Efficacy in Vivo: What Should We Follow?
- Treating Resistant Malaria in Pregnancy
- New Antimalarial Agents and New Therapeutic Combinations

Preventing the Big Three: Vaccines for Malaria, TB, and HIV

- Cell-mediated Immunity: Challenges for Developing Effective Vaccines
- Update on Malaria Vaccines: In the Field and the Laboratory
- Tuberculosis Vaccines: Ready for Prime Time?
- The Status and Future Directions of HIV Vaccine Development

Tuberculosis and HIV Infection

- Treatment of Tuberculosis in HIV-infected Patients
- Treatment of Latent Tuberculosis Infection in HIV-infected Patients
- Strategies to Improve Patient Adherence to Tuberculosis Treatment
- Infection Control and Treatment of Latent Infection in Patients with Multidrug-resistant Tuberculosis

Hepatitis C in Patients With HIV

- Epidemiology And Natural History of HIV-HCV Coinfection
- HCV And Risk Of Hepatotoxicity With HAART
- Therapeutic regimens for hepatitis C in HIV-infected patients
- Liver Transplantation In HIV-infected Patients

Update on Pneumococcal Vaccines

- Update on PCV Effect on *S. pneumoniae* and Invasive Infections (US, Europe, Latin America)
- The Replacement Phenomenon in PCV—What are the Implications?
- Pneumococcal Protein-based Vaccines: The Next-Generation Pneumococcal Vaccines?
- Global Pediatric Pneumococcal Vaccination Implementation: Where Are We in 2006?

Challenges in Infection Control in Low-Resource Countries

- Quality Improvement in Infection Control in Resource Limited Setting
- Surveillance for the Detection and Control of Multiple Drug Resistant Nosocomial Pathogens in the Middle East
- Establishing Effective Control Programs for Surgical Site Infections
- Dealing with Formidable and Novel Pathogens in Minimally-resourced Settings

12th International Congress on Infectious Diseases • Symposia

June 15–18, 2006 • Lisbon, Portugal

The following symposia are being organized ~ Updated September 27, 2005.

Optimizing Care for Invasive Fungal Infections

- Diagnosing Fungal Infections: What Test Strategies Improve Outcomes?
- Fungal Infections in the ICU: When and What Empiric Therapy?
- Pro: Is Combination Anti-Fungal Therapy the New Standard for Invasive Fungal Infections
- Con: Is Combination Anti-Fungal Therapy the New Standard for Invasive Fungal Infections

Vaccines for Children: New Strategies

- Present and Future of Rotavirus Vaccines
- Hepatitis A: Experiences with Universal Immunization
- Polio: Defining the Optimal Vaccine Strategy
- Vaccination for Premature Infants: What Vaccines When?

Tuberculosis: Past, Present and Future

- Genetic Evolution of Tuberculosis: Co-Travelers in Global Migration
- Diagnosing Tuberculosis: Options for High and Low Resource Areas
- Tuberculosis Drug Development: Where Are We in 2006?
- Tuberculosis Control Beyond DOTS: What Do We Know?

The Role of Women in Infectious Diseases

- The Current Role of Women in Families in the Global Prevention and Control of Infections
- Women as High-Risk Victims of Infection
- Women as Leaders in the Effort to Control Infections
- The Relation Between Women's Rights and Infectious Diseases

Beyond Institutions: MRSA in the Community

- Clonal Epidemiology Worldwide
- Prevalence and Risk Factors
- Treatment Options for Community-acquired Staphylococcal Infections: End of Beta-lactam Era?
- Control Strategies

HIV Treatment Challenges in High- and Low-Resource Settings

Confronting Hepatitis: Progress and Problems

Interactive Clinical Cases

Advances in Microbiology: Science Improving Care

**12th ICID Satellite Symposium
Added Value of Adjuvant Systems in Flu
Vaccines for Pandemic Preparedness and
Beyond—Sponsored by Chiron Vaccines**

Confirmed Speakers *continued*

MORENO, Santiago (SPAIN)
MULLIGAN, Connie (USA)
MUMCUOGLU, Kosta (ISRAEL)
MUTABINGWA, Theonest (BANGLADESH)
O'BRIEN, Kate (USA)
O'RYAN, Miguel (CHILE)
ODIO, Carla (COSTA RICA)
PINEDA, Juan Antonio (SPAIN)
RAOULT, Didier (FRANCE)
REED, Steve (USA)
RELMAN, David (USA)
SARMENTO E CASTRO, Rui (PORTUGAL)
SCHRENZEL, Jacques (SWITZERLAND)
SHIBL, Atef (SAUDI ARABIA)
SPRUNG, Charles (ISRAEL)
STOHR, Klaus (SWITZERLAND)
STONE, Sheldon (UNITED KINGDOM)
TAUBENBERGER, Jeffery (USA)
TAUBENBERGER, Jeffery (USA)
TEMMERMAN, Marleen (BELGIUM)
TURNIDGE, John (AUSTRALIA)
VALADAS, Emilia (PORTUGAL)
WHITE, Nicholas (THAILAND)
WOLF, Michel (FRANCE)

The ICID Preliminary Program is now available online at http://www.isid.org/12th_icid/

ISID would like to acknowledge the following

COLLABORATING AND COOPERATING ORGANIZATIONS

12th International Congress on Infectious Diseases • Lisbon, Portugal • June 15–18, 2006

Collaborating Organizations:

Portuguese Society of Infectious Diseases (SPDI)

Spanish Society of Infectious Diseases and Clinical Microbiology (SEIMC)

Cooperating Organizations:

Association of Medical Microbiologists (United-Kingdom)

Brazilian Society of Infectious Diseases (SBI)

Croatian Society of Infectious Diseases

Danish Society for Clinical Microbiology (DSKM)

European Society of Clinical Microbiology and Infectious Diseases (ESCMID)

Finnish Society for Clinical Microbiology

French Infectious Diseases Society (SPILF)

German Society of Infectious Diseases

Hellenic Society for Infectious Diseases

Norwegian Society of Medical Microbiology

Pan American Association of Infectious Diseases (API)

Swiss Society for Infectious Diseases

Turkish Microbiological Society (TMC)

World Organization for Animal Health (OIE)





Samie Amidou



Mr. Samie Amidou holds an MSc in Microbial Biochemistry and is a PhD candidate in Microbiology at the University of Venda, South Africa. His research is focused on the Molecular characterization of African isolates of *Entamoeba histolytica* and *Campylobacter* spp as well as their pathogenicity and antibiotic resistance mechanisms. He is presently a research fellow at the Center for Global Health, University of Virginia working with Professor R. Guerrant.

ISID Small Grants Program Final Report

by Samie Amidou, PhD Candidate • University of Venda • Limpopo • South Africa
Research Fellow • Center for Global Health, University of Virginia • Charlottesville • USA

Molecular epidemiology of *Entamoeba histolytica* in the Venda region of South Africa, and antimicrobial activities of local medicinal plants

Infections due to *E. histolytica* affect nearly 500 million people throughout the world annually leading to about 110,000 deaths. Amebiasis is more common in tropical and developing regions of the world and less-resourced people are generally the most affected. However, the epidemiology of this disease is not clearly defined and information on its prevalence in most rural African areas is missing. The Venda region, situated in the northern part of South Africa is mostly rural and previous studies have demonstrated that water used by the population is of poor quality suggesting that water sources might be contaminated by various organisms which may include *E. histolytica*. The Vha-Vendas have a strong tradition of using medicinal plants to cure different ailments and to prevent diarrhoea in children. Although few studies have investigated the antimicrobial activities of medicinal plants used in Venda, none has addressed the activity of the medicinal plants on *Entamoeba histolytica*. The objectives of this study were to determine the prevalence of intestinal parasites with particular attention to *E. histolytica* in order to understand the distribution patterns of infection in the community, and to determine the capacity of the plants used by the population to kill the *Entamoeba* cells grown in vitro in a xenic environment mimicking the natural situation in the intestine.

A total of 528 stool samples were collected from the three main hospitals visited by the general population and 295 from two primary schools. The samples were analysed by light microscopy, staining, ELISA and PCR for the detection of *E. histolytica* and other intestinal parasites. A survey was also conducted through the use of questionnaires amongst university students in order to determine the hygienic habits of the population. Information on the traditional use of medicinal plants was sought from local traditional healers and from the literature. A total of 18 plants were collected from the villages, dried, ground into fine particles, extracted with different organic solvents and evaporated to dryness using a rotary evaporator at 40°C. The crude extracts were then tested for activity using the microdilution method against fifteen different bacterial species and a strain of *E. histolytica* isolated from a patient with bloody diarrhoea and characterised by PCR.

The most identified organisms in hospital samples were *Cryptosporidium* spp (21.2%) followed by *E. histolytica/dispar* (17%), *S. mansoni* (14.4%), Hook worm (11.1%) and *G. lamblia* (10.2%).

At the Primary schools, the most prevalent parasitic organisms were *S mansoni* (30.5%) followed by *Cryptosporidium* spp (18.9%), *G. lamblia* (10.8%), Hookworms (10.6%) and *E. histolytica/dispar* (9.1%). The ELISA test was conducted on a total of 282 samples from the hospitals and 92 samples from the Primary Schools and indicated a general prevalence of 11.3% in the hospitals and 2.17% at the primary schools. The nested PCR results indicated that, most cases were mixed infections with *E. histolytica* and *E. dispar* and represented 68% of all infections. The results of the survey indicated poor hygienic habits amongst university students as nearly 80% of the students who answered the questionnaires occasionally washed fruits before eating and 67% occasionally washed their hands after going to the toilets. From the 18 plants tested, all were active against at least one bacterial species with MICs varying from 0.03mg/ml to 12mg/ml. Against the *E. histolytica* clinical isolate, three plants were found active at different concentrations varying from 2.5mg/ml to 12mg/ml.

This study has demonstrated that infections due to *E. histolytica* as well as other intestinal parasites are common in a rural area of previously unknown rate of parasitic infections. HIV infection was associated with *E. histolytica* infections particularly among the females. Medicinal plants appeared to be effective in the control of different intestinal bacteria and *E. histolytica* and could be of great help at this time when HIV infections constitute a serious threat to the populations in sub-Saharan Africa. This research thus provides baseline data that could be useful for the development and implementation of control policies in the region in order to improve the life of the community living in the concerned areas. Isolates obtained from this study will be characterised for genetic diversity and pathogenic profiles in order to advise on the possible drug targets as well as potential antigens that could be used for vaccination strategies. ❖

This research is part of my PhD project and I am very grateful to the ISID for its support. This project has provided the basic data to be used for further studies and has strengthened my research capacity with the help of my supervisor Professor CL Obi and my HOD Professor EO Igumbor. I have been able to obtain a research fellowship at the University of Virginia to further my investigations.

ISID Small Grants Program Final Report

by Dr. Grace Olusola Gbotosho, Senior Lecturer • College of Medicine
University of Ibadan • Ibadan, Oyo State • Nigeria

Identification of candidate single nucleotide polymorphisms (SNPs) in *Plasmodium falciparum* isolates showing false negative results using the ParaSight®-F dipstick.

Research Team

Dr. Grace Olusola Gbotosho,

Principal Investigator

Dr. Christian Happi,

Co-Principal Investigator

Mr. Ernest Tambo, *Investigator*

Miss. Oyindamola Akinniranye, *Investigator*

Dr. Yetunde Onimode, *Investigator*

Mrs. F. Adepoju, *Investigator*

Objectives

Evaluation of the sensitivity, specificity, efficiency and predictive value of ParaSight®-F dipsticks by comparison with standard microscopy and polymerase chain reaction.

Investigate whether the persistence of some HRPII antigens in circulating blood following parasite clearance is associated with persistent sub patent parasitemia and thus associated with drug resistance.

Identification of single nucleotide polymorphisms (SNPs) in coding and flanking regions of the HRPII gene in isolates of *Plasmodium falciparum*

Collation diagnostic outcome of patients' samples using the ParaSight®-F dipstick with presence or absence of SNPs in both coding and flanking regions of the HRPII genes of field isolates of *Plasmodium falciparum* in southwest Nigeria.

Background and Rationale of the Project

The recent development of rapid non-microscopic tests based on detection of *Plasmodium falciparum* histidine rich protein II (HRPII) antigens have been useful in diagnosis in many endemic countries. However, it has been reported that some isolates of *Plasmodium falciparum* do not express HRPII antigens (WHO, 2000) which may contribute to false negative results. The presence of Single nucleotide polymorphisms (SNPs) within coding and non-coding regions sequence of the parasite genome can result in a change in the structure and function of the protein encoded by the corresponding gene. In view of the potential implication of SNPs in plasmodium genome, efforts in the proposed research was devoted to ascertaining the existence of candidate SNPs in HRPII gene of *Plasmodium falciparum* isolates in Ibadan, Nigeria.

Patients aged 6 months to 12 years with clinical symptoms of acute uncomplicated malaria and microscopically confirmed *P. falciparum* infections were recruited into the study following informed consent from the parents/guardians. Enrolled patients were treated with dihydroartemisinin (4mg/kg for 5 days) and amodiaquine (25mg/kg body weight for 3 days) combination. Each patient was followed up for clinical and parasitological response to treatment on days 3, 7, 14, 21 and 28. Parasitological response was monitored by ParaSight-F dipstick and microscopic examination of Giemsa stained thick blood films.

Filter paper blood samples were collected for extraction and analysis of parasites' DNA prior to treatment and during the follow period. Microscopic assessment was compared with HRPII-based results. In case of discordance between these two diagnostic methods, PCR was performed for verification of the presence parasites in the blood sample. PCR amplification of HRPII genes in *P. falciparum* isolates with positive microscopy and negative HRP-II diagnostic result were performed using *P. falciparum* HRPII gene forward and reverse primers sequences. Sensitivity, specificity, negative and positive predictive values of microscopy and HRPII-based dipstick methods were determined.

Fifty patients were enrolled. Cure rate for dihydroartemisinin/amodiaquine was 94%. Using microscopy as the gold standard, the sensitivity and specificity of HRPII-based dipstick to diagnose malaria at enrollment were 94% and 100% respectively. The HRPII dipstick showed positive and negative predictive values of 100% and 94.4% respectively. The sensitivity of the dipstick reduced from 100% at enrollment to 32% and 0% on days 21 and 28 post-treatment respectively. The positive predictive value of the dipstick significantly reduced from 100% at enrollment to 0% on day 28 post-treatment.

Samples from five patients were positive by microscopy and negative with HRPII-based dipstick at enrollment. Parasitemia ranged from 468 to 2769 parasites/ microlitre blood in these patients. The five samples were positive by PCR (using the locus of msp2 gene). HRPII gene in

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Dr. Grace Olusola Gbotosho



Dr. Grace Olusola Gbotosho is a senior lecturer in the Department of Pharmacology and Therapeutics, College of Medicine, University of Ibadan, Nigeria. Her area of research focus is in antimalarial drug development and diagnostic agents.

by Dr. Grace Olusola Gbotosho, Senior Lecturer • Nigeria



The Small Grants Program

is designed to fund pilot research projects by young investigators in developing countries. The goal is to support and foster the professional development of young individuals in the field of infectious diseases research by helping them to acquire additional skills and data to apply for other grants.

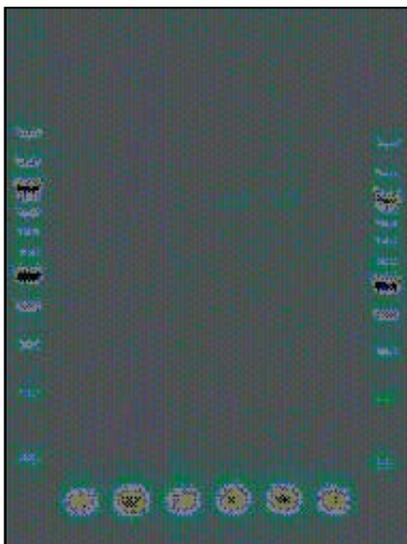


Fig.1. Gel electrophoresis of *P.falciparum* HRPII gene amplification. PCR amplification of the gene in field isolates and Controls DNA (*P.falciparum* strain K1 and 3D7) were seized against a 100bp DNA ladder (lanes 1 and 8). HRPII gene amplification in field isolates did not yield any product (lanes 2, 3, 4 and 7), while amplification of the controls DNA resulted in 900bp fragment (lanes 5 and 6).

these samples was not amplifiable by PCR for further sequencing and SNPs identification in flanking or coding regions. However the control DNA yielded positive results by PCR (Fig.1). It has previously been suggested that some field isolates of *P. falciparum* have the HRPII gene deleted (WHO 2000; New perspectives in malaria Diagnosis. WHO/CDS/RBM/2000.14). The lack of amplification of the HRPII gene of the 5 field isolates of *P. falciparum* for the identification of SNPs in the flanking and coding regions, is suggestive of deletion of this gene in the samples. However, further studies are needed to confirm this observation. The persistence of HRPII antigens in circulating blood despite the fast clearance of parasite by the combination of dihydroartemisinin-amodiaquine is also a serious concern for the use of this kit to monitor patients' responses to antimalarial drug treatment. ❖

For more information on the ISID Small Grants Program please see <http://www.isid.org>

In Memoriam

Dear Colleagues,

I am sorry to tell you that the Society recently learned that Leonid Strachounsky, Council member from Russia, died an untimely death this past June. He was 53 years old. Leonid was a leader among the emerging Russian infectious disease scientific community, and a valuable colleague and friend. He was an active supporter of the Society and the ICID, participating in scientific programs and supporting younger colleagues to attend the meeting. Leonid was responsible for having the Society's Guide to Infection Control in the Hospital translated into Russian, securing funding from USAID to get the Guide published and insuring that the Guide was distributed to hundreds of individuals throughout Russia and Eastern Europe.

Leonid founded a leading Center for Antibiotic Research in Smolinsk, and was at the forefront of bringing state of the art scientific techniques and information to Russia. Equally important, he was an excellent mentor to a new generation of Russian infectious disease scientists, providing essential support for their efforts to obtain grants and present at international and regional meetings. His untiring energy, warmth, and engaging personality will be missed by all.

Sincerely,

Keryn Christiansen

Kudo for ProMED-mail

To: Larry Madoff, Editor, ProMED-mail

Date: Thu, 29 Sep 2005 09:29:45 -0400

Larry;

I think you ProMED folks are doing such an important service on the avian influenza front. Dr. Pringle's comments (below) from Avian influenza, human—East Asia (136): Indonesia underscore how much confusion there is over what's going on there and how critical it is to have someone knowledgeable—and not given to breathlessness—attempting to analyze what's going on and sort rumor from fact.

Just wanted to say thanks.

Helen Branswell
Medical reporter
The Canadian Press



[In the past 24 hours, the number of suspected cases of avian influenza in Indonesia has increased from 42 to 57 in one report, or 54 in the other report. The total number of deaths attributed to avian H5N1 influenza virus infection remains unchanged at 6, a total which includes a patient whose samples gave conflicting results and whose status remains unresolved. 3 of 20 suspected avian influenza virus cases have tested negative and are about to be discharged. It is not certain that these 20 suspected cases are new cases or are included in the suspected total, but the difference of 3 between the 2 reports could be accounted for by subtraction of these m3 negative-test patients. The results of confirmatory tests in the WHO-accredited laboratory in Hong Kong are awaited to provide an accurate assessment of the current disease situation in Indonesia. —Mod.CP]

Larry Madoff, MD
Editor, ProMED-mail

2005 ISID HIV/AIDS Training Program

The annual 2 week long HIV/AIDS Training Program educates clinicians from developing and transitional countries in clinical, therapeutic, epidemiological and public health issues. Sixteen participants from 12 countries attended the course that was held this year at three sites: the National Institutes of Health in Bethesda, Maryland; Memorial Sloan-Kettering Cancer Center in New York City; and University California at San Francisco. ❖



NIH Participants:

Dr. Hadiza Khamofu, Nigeria;
Dr. Plamen Konstantinov, Bulgaria;
Dr. Anna Kostova-Konstantinova,
Bulgaria; Dr. Henry Masur, NIH;
Melissa Harris, NIH;
Dr. Kenny Kapembwa, Namibia;
Dr. Aida Asmelash, Botswana;
Dr. Patricia Wright, Washington, DC;
Dr. Anne Cardile, Washington, DC.



The *International Journal of Infectious Diseases* is the official publication of the ISID.

The journal aims to provide a source of information relevant to professionals involved in the epidemiology, clinical diagnosis, treatment and control of infectious diseases with particular emphasis placed on those diseases that are most common in less-developed countries.

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The ISID and the Swiss Society for Infectious Diseases (SSI) jointly sponsor the SSI/ISID Infectious Diseases Research Fellowship Program.

The purpose of this 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 objectives of the Fellowship Program are:

- to train promising young physicians and scientists from developing countries for clinical and research positions in infectious diseases,
- to foster partnerships between Fellows and infectious disease leaders in Switzerland, and
- to increase scientific research capacity in low income/high disease burden countries.

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