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ISID NEWS

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Letter from the President



It is with great honor that I embark upon the task of leading the ISID over the next two years. Our contributions to important health care issues facing the developing world distinguishes our Society and membership. With ongoing efforts towards the Society's goals we will continue to make a difference in the prevention and control of infectious diseases globally.

For those fortunate to attend the recent successful 13th ICID in Kuala Lumpur, I hope you will concur that the meeting was unmatched for the setting, the science, and the chance to meet with our diverse group of colleagues. With that in mind, I invite you to join us at the 2nd International Meeting on Emerging Diseases and Surveillance (IMED 2009) to be held February 13–16 in Vienna, Austria and to save the date for the 14th ICID in Miami, USA on March 9–12, 2010.

Raul E. Isturiz, MD, FACP
President, International Society for Infectious Diseases



**International Meeting
on Emerging Diseases
and Surveillance**

Vienna, Austria • February 13–16, 2009

Emerging infectious diseases are at the center of the world's attention. The threats of pandemic influenza and bioterrorism, and the realization that new infectious diseases may be recognized at any time, in any place, have dramatically raised our awareness. What are the most important emerging disease threats? How can we quickly detect their occurrences in order to respond in a timely and appropriate way?

ProMED, the Program for Monitoring Emerging Diseases, is pleased to invite you to the **International Meeting on Emerging Diseases and Surveillance 2009**. Along with our cosponsors, the European Centers for Disease Control, the World Organization for Animal Health, the European Commission, and the Wildlife Conservation Society, we are developing a conference that will bring together the public health community, scientists, health care workers and other leaders in the field of emerging infectious diseases. The meeting will embrace the 'One Medicine, One Health' concept recognizing that, just as diseases reach across national boundaries, so do they transcend species barriers. We therefore welcome the full participation of both the human and animal health communities.

Centrally located in Europe, the beautiful host city of Vienna is rich in history and culture. Because of the enthusiastic response to the inaugural meeting, IMED 2007, which attracted over 600 participants from 65 countries, IMED 2009 will expand to 3 full days of sessions and include more opportunities for oral presentations of submitted abstracts.

With outstanding plenary speakers, symposia by expert panels, and both oral and poster presentations of submitted abstracts, IMED 2009 is certain to be the year's major conference for those involved in the detection, monitoring and study of emerging pathogens and to those in the front lines of response. We look forward to seeing you in Vienna.

Larry MADOFF, *Chair*

continued on page 2

■ **PLENARY LECTURES** ■

Avian Influenza—A Unique Opportunity for Public Health

Dynamic Trends in Global Health

New Pathogen Discovery

Foundations: Initiatives in Surveillance

■ **PLENARY SYMPOSIUM** ■

Implementing One World One Health

- Tracking Disease in Wild Animals
- Monitoring Domesticated Animals
- When Animal Diseases Strike Humans

■ **PARALLEL SYMPOSIA** ■

Vector-Borne Viruses in the 21st Century

- Dengue Transmission and Control
- Chikungunya Outbreaks
- Urbanization of Yellow Fever
- Zika Virus on Yap Island

Emerging Zoonoses

- Rift Valley Fever
- Rabies
- Crimean-Congo Haemorrhagic Fever

New Food-Borne Threats

- Chagas Disease
- Nipah Virus
- Hepatitis E

Antibiotic Resistance:

The Future is Now

- Antibiotics as a Limited Natural Resource
- Balancing Human and Animal Health
- A Worst Case Scenario: XDR TB

Surveillance Systems in Practice

- MECIDS: Cross Border Surveillance and Response in the Middle East
- CaribVET: Animal Disease Surveillance in the Caribbean
- Healthmap/ProMED

Feeling the Heat: Climate Change and Emerging Diseases

- Climate as a Driver of Emerging Diseases
- Climate Change and Infectious Disease: Checking the Horse before Hitching the Cart
- Vector-Borne and Zoonotic Diseases: Climate, Landscape and Transmission

Global Movements of Humans, Animals and Diseases

- Travelers as Sentinels of Emerging Diseases
- Diseases that Travel with Animals
- Globalization and Human Migration

Vaccines and Reemerging Diseases

- Dengue Vaccine Development
- H5N1 Flu Vaccines
- Clinical Development of a Cell-Culture (Vero) Derived Whole Virus Candidate H5N1 Vaccine
- Vaccines for Neglected Diseases

Communicating Disease Risks to the Public

- Crisis Communication: Lessons from SARS
- Social Aspects of Risk Perception: The Case of Mad Cow
- The Role of the Media
- Communication via Social Networks

Avian/Pandemic Influenza

- Pandemic Preparedness
- Intervention Strategies for Avian Flu Outbreaks
- Human Flu Outbreak Management Strategies
- Influenza Drug Resistance

■ **FOUR ORAL SESSIONS** ■

■ **TWO POSTER SESSIONS** ■

■ **PLENARY SPEAKERS** ■



Dr. Ilaria Capua • ITALY
Avian Influenza—A Unique Opportunity for Public Health



Dr. Hans Rosling • SWEDEN
Dynamic Trends in Global Health



Dr. W. Ian Lipkin • USA
New Pathogen Discovery

Reflections on the 13th International Congress on Infectious Diseases (ICID)

by Eric F. Summers MD, PhD • ISID Program Director

More than 3000 healthcare providers, scientists and public health officials from over 100 countries came together this past June in Kuala Lumpur, Malaysia to meet and share their knowledge and ideas during the 13th International Congress on Infectious Disease. The Kuala Lumpur Convention Center proved to be a perfect venue for the 13th ICID: The facilities were state of the art and the beautiful location on the perimeter of KLCC Park in the center of Kuala Lumpur was magnificent. In addition to the perfect setting, our Malaysian hosts and colleagues were incredibly inviting, helpful and friendly.

The 13th ICID was kicked off by welcome remarks from Christopher Lee, Chair of the Local Organizing Committee, Richard Wenzel, ISID President and Yasmin Malik, Chair of the Regional Advisory Committee for the Congress. The Deputy Minister of Health Malaysia, Datuk Dr. Abd Latiff Bin Ahmad, then presented a gracious opening address that was followed by award presentations, a wonderful display of Malaysian performing arts and a bountiful reception.

The scientific program of the 13th ICID was highlighted by six outstanding plenary lectures. Bruce Beutler and William Nauseef presented cutting edge science in clear language that invited audience members to share the most current understanding of immune system function. Satoshi Omura inspired the audience by describing a lifetime of work in natural product discovery that yielded drugs improving the health of millions of people around the world. The remaining plenary topics provided sobering insights into emerging infectious diseases past, present and future. David Heymann recounted years of WHO experience handling a variety of global disease outbreaks such as Monkeyox, Nipah, Ebola and SARS. Julie Gerberding brought the audience up to speed on current handling of infectious diseases threats such as influenza H5N1 and community acquired MRSA by the CDC and enforced the importance of accurate, timely communication to the public about these threats. Roy Anderson helped us all to understand mathematical models of disease outbreaks and the important implications we need to consider in managing future outbreaks that may impact all people on earth.

In addition to plenary lectures, invited speakers presented over 120 talks in 31 symposia on a wide range of topics related to public health, specific diseases, basic science and therapeutics. Several of the symposia in the program were organized together with cooperating organizations including

the Fogarty International Center, the Infectious Disease Society of Taiwan, the International Society of Chemotherapy, the International Society for Anaerobic Bacteria, the Japanese Association for Infectious Disease and the Western Pacific Society of Chemotherapy. Representing a key part of the program, over 1100 abstracts were selected for presentation in 32 poster sessions and four oral sessions. 525 abstracts were also selected for inclusion in the International Scientific Exchange publication distributed to all congress registrants. For those interested, abstracts from the 13th ICID can be accessed via the ISID website: www.isid.org.

ISID recognizes that merit-based awards and travel grants enrich the Congress tremendously. We therefore acknowledge all of the companies and organizations that provided such support. We thank the Bill and Melinda Gates Foundation for supporting the International Development Grants for Young Women that enabled 75 young women from countries in Africa, Asia and the Indian Subcontinent to attend the 13th ICID. We also thank Sanofi Pasteur for sponsoring the Sanofi Pasteur Awards and Travel Grants for Latin American Women and Physicians and Scientists and we thank Novartis for sponsoring the Novartis Vaccines Awards for Epidemiology and Infectious Diseases. We also want to thank all of the companies and institutions that sponsored the 13th ICID through educational grants and other support, in particular our premier sponsors GlaxoSmithKline Biologicals S.A., MSD, Pfizer and Wyeth. Without sponsor support it would not be possible for ISID to host the ICID. Finally, we thank the Malaysian Society of Infectious Diseases and Chemotherapy for their close collaboration in planning the program and the Ministry of Health Malaysia, official host for the Congress.

To follow the success of the 13th ICID, planning is already underway for the 14th ICID that will be held on March 9-12, 2010 in Miami, USA. Please mark your calendar and plan to join us for another exciting and educational meeting in a completely different area of the world. We look forward to meeting you in Miami! ❖



At the Opening Ceremony for the 13th ICID, Congress attendees were treated to a performance by the Malaysian Drum Symphony.



International Development Grants for Young Women to Attend 13th ICID

Seventy-five women from nearly 40 countries in Africa, Asia and the Indian Subcontinent attended the 13th ICID as part of the International Development Grant for Young Women supported by the Bill and Melinda Gates Foundation. Seven others attended with the support of the Sanofi Pasteur Travel Grants for Latin American Women Physicians and Scientists. ❖

2009 APPLICATION DEADLINES

Professional Development for Young Scientists From Developing Countries

ISID Scientific Exchange Fellowship

Applications are due March 1, 2009.

SSI/ISID Fellowship (Swiss Society for Infectious Diseases/ ISID Joint Infectious Diseases Research Fellowship)

Applications are due April 1, 2009.

Small Grants

Applications are due April 1, 2009.

Fall 2007 Small Grant Awardees

Dr. Diana Waturangi • Indonesia

Faculty of Biotechnology, Atma Jaya Catholic University
“Detection of virulence genes and class 1 integron associated gene cassettes in *Vibrio cholerae* isolated from ice of street foods in Jakarta, Indonesia”

Dr. Wanda Markotter • South Africa

Dept. of Microbiology and Plant Pathology, Faculty of Natural and Agricultural Sciences, University of Pretoria
“Diagnostics and molecular epidemiology of wildlife rabies in remote areas of the KwaZulu Natal province of South Africa”

Dr. Fanny Ita • Peru

Universidad Peruana Cayetano Heredia, Instituto de Medicina Tropical
“Alexander von Humboldt,” “HTLV-1-associated myelopathy/ tropical spastic paraparesis in the Peruvian Andes”

Spring 2008 Small Grant Awardees

Dr. Idedayo Adetifa • The Gambia

The Gambia, Bacterial Diseases Programme, Medical Research Council (UK) Laboratories
“A pilot study of nasopharyngeal carriage of *Streptococcus pneumoniae* in Nigerian children”

Dr. Cristina Guerra-Giraldez • Peru

Dept. of Microbiology, School of Science, Universidad Peruana Cayetano Heredia
“Adequate cultures of clinical isolates of *Trichomonas vaginalis* for molecular studies of virulence”

Mr. Jackson Onyuka • Kenya

Biomedical Science and Technology, School of Public Health and Community Development
“Evaluation of different methods for controlling fish-borne pathogenic microbes”

ISID Fellowships 2008

Ines Badano • Argentina

Facultad de Ciencias Exactas, Químicas y Naturales, Universidad Nacional de Misiones, Laboratorio de Biología Molecular Aplicada
“Analysis of Ethnic Differences in the Distribution of TNF SNPs and Human Papillomavirus (HPV) Infection” —**At the University of Pennsylvania, USA**

Elkin Lemos • Colombia

National University of Colombia, Faculty of Medicine & Public Health
“The economic impact of introducing HIV/AIDS guideline into Colombian National Drug Formulary. Costs-effectiveness and budget-impact analysis” —**At the University of Toronto, Canada**

SSI/ISID Fellowship Awardees 2008

Dr. Alain Kenfak • Cameroon

General Hospital of Yaoundé

Dr. Marina Macedo Viñas • Uruguay

Hospital Maciel, Ministerio de Salud Pública, Departamento de Bacteriología y Virología Instituto de Higiene, Facultad de Medicina

ISID Small Grants Program Final Report

by Adedayo Adeyemi, MD, MPH • Projects Director • Healthmatch International • Lagos, Nigeria

Antiretroviral Therapy Use, Clinical and Virologic Outcomes for a Cohort of HIV-Infected Adults in Mainland General Hospital, Lagos, Nigeria

A large scale antiretroviral therapy (ART) program was introduced in Nigeria by a variety of groups, including government, private organizations, and international donor agencies beginning in 2004. There were significant challenges posed by treatment and virologic outcomes as a result of drug resistance, adherence and adverse effects which may have had impact on the current national policy of first line treatment using stavudine or zidovudine, lamivudine and nevirapine. According to the report submitted in March 2006 to the Minister of Health by the National Committee on antiretroviral (ARV) drug resistance, it was discovered that HIV RNA levels had increased after 6–12 months on first line ARV, which is a threat to the success of current roll-out and future scale-up of the HIV treatment program.^{1,2} About 15,000 patients were enrolled in the government treatment program as of December 2005. World Health Organization 2007 report projected 636,000 people living with HIV and AIDS would need treatment by December 2006 in Nigeria.³ Unfortunately, less than 30% are on treatment.

Mainland General Hospital is a Lagos State secondary facility and is a referral center for treatment of infectious diseases including HIV/AIDS, tuberculosis and malaria. The hospital has over 4,000 HIV positive patients and a 150 bed capacity. Antiretroviral therapy has been in use in Mainland Hospital since March 2005 and was one of the early treatment centers in Nigeria. The hospital was chosen because of its leadership in the management of infectious diseases in Southwestern Nigeria. The hospital has a well-organized pharmacy with laboratory facility. The hospital does CD4 count, full blood count, liver function test and other auxiliary tests but has no facility for viral load within the hospital.

Consequently, in order to improve future provision of antiretroviral therapy (ART) in Nigeria, it is important to evaluate the present roll-out of ART and its impact on clinical and virologic outcomes among HIV positive patients. Additionally, the treatment program ought to be examined to appreciate adherence, drug resistance, and good laboratory and clinical practice towards effective treatment and care of HIV positive individuals. Likewise, there is a need for evidence based evaluation of the Lagos State treatment program⁴ using this ARV site as a pilot project. This is imperative since the country is involved in massive scaling-up⁵ of access to treatment. In order to improve the design for successful ARV program in Nigeria, more information and data on the impact of the current ARV provision is crucial—data on morbidity and mortality, treatment failure, level of adherence, tolerability, and the emergence of drug resistant strains are very important. Preliminary findings from this pilot program are important to deliver cost effective long-term⁶ and large scale treatment interventions.

The method used was a retrospective chart review of patients from the time of introduction of antiretroviral (ARV) drugs in March 2005, to March 2007 and was conducted from August 2007–November 2007. Patients enrolled in Mainland Hospital were sampled from medical records, and information was obtained to evaluate the virologic and immunologic outcomes. 460 patients were selected. 230 patients that were on treatment were randomly selected from the medical records and another 230 patients who were not on HIV treatment with CD4 count 200–700 cells/mm³ were selected as comparison group. As in the national guideline, ARV is commenced in Mainland Hospital with CD4 count less than 200 cells/mm³. Additionally, this research stimulated a clinical meeting to improve antiretroviral therapy and provide mentorship opportunity.

At the end of this study, improvement in both clinical and virologic outcomes as a result of antiretroviral use was ascertained, and the predictors of these outcomes were also assessed. Similarly, level immunological-virologic responses were ascertained with the current treatment.

In conclusion, it is possible to effectively and rapidly scale-up clinically effective antiretroviral therapy program in resource poor settings. Understanding challenges that may threaten successful optimal treatment outcomes is important in the planning. This study investigated the current level of treatment interventions. The lessons from this study will help in the design of future interventions to improve adherence and good clinical, pharmacologic and laboratory practices toward efficient and effective ARV program delivery in other or new treatment sites. Finally, future researches to investigate HIV drug resistance surveillance; effective therapy combination for HIV and TB; and best practices in the management of adverse effects should be promoted in Nigeria. The findings will be useful to both clinicians and policy makers to guide and assist future roll-out of successful ARV programs. ❖

References:

1. Federal Ministry of Health; National Policy on HIV/AIDS, 2006 Abuja: Federal Ministry of Health, 2006.
2. HIV/AIDS National Strategic Framework for Action 2005–2009; National Action Committee on AIDS.
3. World Health Organization Report 2007, www.who.int/hiv/HIVCP_NGA.pdf
4. Moore RD: Understanding the clinical and economic outcomes of HIV therapy: the Johns Hopkins HIV clinical practice cohort. *J Acquir Immune Defic Syndr Hum Retrovirol* 1998, 17(Suppl 1):S38–41.
5. Blower S, Bodine E, Kahn J, McFarland W: The antiretroviral rollout and drug-resistant HIV in Africa: insights from empirical data and theoretical models. *AIDS* 2005, 19:1–14.
6. Freedberg KA, Losina E, Weinstein MC, Paltiel AD, Cohen CJ, Seage GR, Craven DE, Zhang H, Kimmel AD, Goldie SJ: The cost effectiveness of combination antiretroviral therapy for HIV disease. *N Engl J Med* 2001, 344(11):824–831.



Adedayo Adeyemi, MD, MPH



Adedayo Adeyemi is the Projects Director at Healthmatch International, a research and outreach-oriented organization based in Lagos Nigeria that is concerned with HIV/AIDS prevention and research. He has a medical degree from University of Ilorin, Nigeria and Master of Public Health from Harvard University, US. He has ten years experience in HIV prevention and research. He is committed to adult HIV management, scale-up of prevention of mother to child transmission of HIV and infectious diseases epidemiology.



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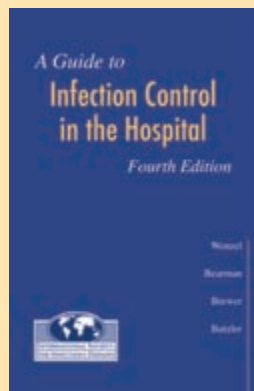
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Calendar of Events

2008

November 14–17, 2008

2nd Beijing Ditan International Symposium on Infectious Diseases

Location: Beijing, China

Venue: Beijing International Convention Center (BICC)

This Ditan international conference is one of the very first international conferences where thousands of experts and distinguished scholars around the world gather in the heart of China for information exchange.

The free flow of people has become a norm in the 21st century. However, the outbreak of SARS and avian flu has brought the world's attention to the globalization of infectious disease. There is no better way to prevent diseases than to enhance scientific exchange, information update and experience sharing between countries, which we aim to achieve in this 3-day conference.

Contact:

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Wan Chai, Hong Kong
Tel: (852) 2827 2090, Fax: (852) 2827 2220
Email: info@cosoman.com
Website: www.bjditan.org

December 2–4, 2008

3rd National Conference on Environmental Sampling and Detection for Bio-threat Agents

Location: Las Vegas, Nevada, USA

Venue: Las Vegas Hilton

The Third National Conference on Environmental Sampling and Detection for Bio-Threat Agents will provide a forum for dialogue between government, industry, academia, and first responders to address critical issues in environmental sampling and bio-detection. The conference will consist of three days of presentations, discussions, and exhibits to identify gaps and define next steps for sampling and detection.

This year, guest speakers will discuss their vision for environmental sampling and detection, as well as coordinating and documenting first responder needs. There will be a large exhibitor lounge where attendees may browse the latest in environmental sampling and detection equipment.

Contact:

Tel: (410) 297-2300
E-mail: info@sampling-conference.com
Website: <http://www.sampling-conference.com/>

2009

February 13–16, 2009

International Meeting on Emerging Diseases and Surveillance (IMED 2009)

Location: Vienna, Austria

Venue: Hilton Hotel

ProMED-mail, the Program for Monitoring Emerging Diseases, is pleased to invite you to the International Meeting on Emerging Diseases and Surveillance 2009. Along with our cosponsors, the European Centers for Disease Control, the World Organization for Animal Health, the European Commission, and the Wildlife Conservation Society, we are developing a conference that will bring together the public health community, scientists, health care workers, and other leaders in the field of emerging infectious diseases. The meeting will embrace the 'One Medicine, One Health' concept recognizing that, just as diseases reach across national boundaries, so do they transcend species barriers. We therefore welcome the full participation of both the human and animal health communities. IMED 2009 will be organized by the International Society for Infectious Diseases (ISID).

Contact:

Larry Madoff, MD
Chair, Scientific Organizing Committee
Editor, ProMED-mail
Email: info@isid.org
Website: <http://imed.isid.org>

March 20–24, 2009

13th International Symposium on Viral Hepatitis and Liver Disease (ISVHLD)

Location: Washington, DC, USA

Venue: Marriott Wardman Park Hotel

The 13th International Symposium on Viral Hepatitis and Liver Disease (ISVHLD) will bring together the entire community involved in viral hepatitis research, to promote better understanding of the viruses that cause hepatitis in humans, as well as the pathogenesis, natural history, complications, treatment, and prevention of the diseases they cause. The virology, immunology, epidemiology, diagnosis, treatment, and prevention of each hepatitis virus will be covered, along with a cross-cutting series on hepatocellular cancer, cirrhosis, HIV co-infection, and liver transplantation.

Contact:

Jay H. Hoofnagle, MD and David L. Thomas, MD
Website: <http://www.isvhld2009.org>
Call for Abstracts Deadline: October 14, 2008

April 4–9, 2009

Europe-Africa Frontier Research Conference Series: Infectious Diseases: From Basic to Translational Research

Location: Cape Town, South Africa

Venue: NH The Lord Charles Hotel

The first conference in this series will focus on various topics around infectious diseases, paying particular attention to tuberculosis, malaria and more neglected diseases such as Buruli ulcer, leishmaniasis, schistosomiasis and filariasis, along with emerging viral diseases.

The conference will concentrate on basic sciences in order to promote research and cooperation in an area that is generally regarded as of minor importance and therefore does not attract adequate funding in developing countries.

This meeting will focus on the basic mechanisms underlying infectious diseases and explore how they may be applied to drug development and other intervention strategies.

An 'open forum format' of plenary discussions and lively interactions both inside and outside the conference room will highlight excellence in European and African research.

A number of travel and conference grants will be made available.

ESF Contact:

Ms. Anne Blondeel-Oman, Conference Officer
Tel: + 32 (0)2 533 2024
Fax: + 32 (0)2 538 8486
Please quote 09-277 in any correspondence.
Website: <http://www.esf.org/conferences/09277>

June 9–12, 2009

27th Annual European Society for Paediatric Infectious Diseases—ESPID 2009

Location: Brussels, Belgium

Venue: Brussels Exhibition Centre (Brussels Expo)

The main theme of the 27th Annual European Society for Paediatric Infectious Diseases—ESPID 2009, will be "Serious Bacterial Infections." The high quality Scientific Program currently evolving through collaboration between local and international experts will open new insights and discussions into epidemiology, diagnosis, prevention, treatment, and clinical presentation of important paediatric diseases.

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2010

March 9–12, 2010

14th International Congress on Infectious Diseases

Location: Miami, Florida, USA

Venue: Miami Convention Center

Contact: International Society for Infectious Diseases

Email: info@isid.org
Website: <http://www.isid.org>

Calendar of Events



14th International Congress on Infectious Diseases
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