



# Tropical Medicine Hygiene News

Volume 52 Number 4

May-June 2003

## Letter from the President of the ASTMH

Dear Members,

The ASTMH Council just concluded their mid-year meeting in Washington, DC today. I thought it a good time to get you up to speed with where our Society stands in 2003. Financially we are in a good position with net assets of 1.9 million dollars (audited financial position as of 12/31/02). This represents a net loss of \$96,000 from a year ago. This is the first time we have had a loss in several years time. Part is a decrease in our long-term investments of \$56,000 and similar sized losses from the Annual Meeting and Certification Exam. (Most of the Annual Meeting loss represents our continuing support of a travel awards program for students and developing country scientists to the Annual meeting despite the loss of grant support). Therefore while the Society assets can easily absorb the loss this year, in order to prevent future red ink the Council made several decisions, including an increase in the registration fee for the Annual Meeting, a move to hold the Certification exam only once every two years, and savings in the Journal by asking members to use the electronic version (when it goes on-line in September), a move that could save over \$100,000 annually over paper copies.

The financial position of the Society makes clear our current inability to do many of the good things central to our scientific, educational and clinical missions. These include career development programs such as travel grants to the annual meeting and support for students, fellows and developing country scientists to conduct tropical medicine research abroad and in the US. In addition core activities such as the Journal and Annual Meeting are under continued pressure to meet their expenses while maintaining accessibility. For that reason we have embarked on an exploratory study of fund raising. Over the next 3 months we will work with CTE Associates, a consulting firm, to assess our capability to raise the level of funding required to make a difference in tropical medicine and hygiene. Please contact me with your ideas about this, including if you think this is a good idea, what activities should we be soliciting funding for, and what directions or sources we should move towards to raise the necessary funding. Expect also to receive a brief e-mail questionnaire on this subject in the near future.

The Journal will launch its on-line version in September. It has an impact factor of 2.1; this is higher than any of the competing tropical medicine journals. For comparison impact factors of related journals include *Infection & Immunity* (4.2), *American Journal of Epidemiology* (3.9), *Journal of Infectious Diseases* (4.9), and the *New England Journal of Medicine* (29). Submissions were back up to > 400 last year with the acceptance rate stable at 65%. Electronic submissions and review will start soon with the Journal staff to undergo training with the new software this spring. Cathi Siegal and Jim Kazura are to be congratulated for getting the Journal through a tumultuous change of publish-

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ers and now on-line publication. The Newsletter is now published only on-line, which has allowed Kate Aultman to save tens of thousands of dollars on printing and postage and increase the number of issues from 6 to 12 annually.

All is on track thanks to Ed Ryan and the Program Committee for the 2003 Annual Meeting in Philadelphia Marriott Downtown, which will be held on a different schedule, starting on a Wednesday (December 3<sup>rd</sup>) and ending on a Sunday (Decemthere will be a special evening banquet as well as historical vignettes throughout the meeting. There will be a pre-meeting course on the current management of tropical diseases. Future Annual meetings will be at Miami Beach (11/7-11/11/04), Washington D. C. (12/11-12/15/05), and Atlanta (2006, exact dates to be determined). The Society will also continue to offer an "Update" course in tropical medicine at the Annual Meeting of the Infectious Diseases Society of America.

Our lobbyist group, Capitol Associates, has been active this year, helping to keep the biodefense research in NIAID and out of the new Department of Homeland Security. Steve Hoffman testified on May 15, 2003 to the Senate Committee on Appropriations, Subcommittee on Defense in support of DoD's Military Infectious Disease Research Program (MIDRP), HIV Research Program and the Global Pathogen Surveillance Act. We continue to broadly support funding for the CDC (which suffered a 2.2% cut in FY '03), NIH (where the doubling of the budget is nearing completion and only a 2.5% budget increase is slated in the President's budget for FY'04) and DoD and are joining the Infectious Diseases Society in opposing use of NIH research funds to purchase anthrax vaccine. We are also working to modify the Select Agent Program of the Patriot Act (42 CFR Part 1003: Possession, Use, and Transfer of Select Agents and Toxins – Interim Final Rule) to remove some of the more onerous aspects of the federal background checks.

At ASTMH Headquarters in Chicago there has been a change in the leadership, with Joyce Paschall returning to ASTMH as Executive Director. We also remain in good hands with Judy DeAcetis as the Administrative Director, a position she has held since the Sherwood Group was contracted to manage the Society nearly a decade ago. Total membership of the Society stands at 3,830.

It is an honor for me to represent you as Society President in 2003. We are bonded together by a mission to combat tropical infectious diseases that is scientifically and ethically of unparalleled importance.

Sincerely,

Bill Petri

## Tropical Medicine & Hygiene News

*Official Bulletin of the American Society of Tropical Medicine and Hygiene*

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**All submissions for publication in Tropical Medicine and Hygiene News should be sent to the Editor at 4818 Ponderosa Dr., Annandale, VA 22003 USA, Fax: 301/402-0659, [tmh-editor@ix.netcom.com](mailto:tmh-editor@ix.netcom.com).**

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## Annual Meeting News

**2003 Pre-Meeting Course.** This year's course, "Current Topics in Clinical Tropical Medicine and Travelers' Health," will be held December 2-3, 2003 at the Philadelphia Marriott Downtown in Philadelphia, Pennsylvania. This course will focus on current topics and new developments in clinical tropical medicine and travelers' health. Course details will be included in the annual meeting registration brochure, to be mailed this summer. Request information from [astmh@astmh.org](mailto:astmh@astmh.org).

**ASTMH 52nd Annual Meeting and Centennial Celebration.** This year's annual meeting will be held December 3-7, 2003 at the Philadelphia Marriott Downtown in Philadelphia, Pennsylvania. This year marks the 100<sup>th</sup> anniversary of the formation of ASTMH's parent society, the American Society of Tropical Medicine. The meeting will feature invited speakers, historical exhibits, symposia and special tours to commemorate the last 100 years in tropical medicine.

**Latebreaker Abstract Submissions.** The ASTMH abstract web site at <http://abstract.cornetser.com> is accepting latebreaker abstract submissions through November 14, 2003. Notification of abstract acceptance will be emailed to submitters in late November. **Abstract Submission Deadline.** Please submit your abstract for the ASTMH 53rd Annual Meeting to <http://astmh.cornetser.com> by **June 1, 2003**. Acceptance notices will be posted on this web site in late August. Submissions received after June 1 will be considered for latebreaker presentations.

**Travel Awards.** Limited funding is available to support travel of selected outstanding investigators from developing countries and students from the United States to participate in this year's annual meeting. The application deadline is **June 1, 2003**. Download an application from <http://www.astmh.org>.

**Young Investigator Awards.** The application deadline is **June 1, 2003**. Download an application from <http://www.astmh.org>.

**Student Book Award.** The Clinical Group, in conjunction with Oxford University Press, will award a Student Book Award to recognize excellence in research presented by a student at the annual meeting. The application deadline is **September 1, 2003**. Download an application at <http://www.astmh.org>.

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Pennsylvania. The course focuses on current topics and new developments in clinical tropical medicine and travelers' health. Join us for an in-depth review and update of management dilemmas and new or emerging issues. Topics will be selected in part by the ability of experts in the field to synthesize available information into practicable and clinician-friendly recommendations that can be used in the day-to-day practice of medicine. Speakers are internationally recognized authorities on clinical tropical medicine and travelers' health.

## Society Awards

**2003 Awards Nominations.** Nominations for the Joseph Augustin LePrince, Bailey K. Ashford and Ronald MacKay medals are being accepted through **June 1, 2003**. Send your letter of nomination, including candidate's CV, to ASTMH, 60 Revere Drive, Suite 500, Northbrook, IL 60062, fax 847/480-9282, email [astmh@astmh.org](mailto:astmh@astmh.org). Awards will be presented at the ASTMH 53rd Annual Meeting in Philadelphia.

**Burroughs Wellcome Fund-Ellison Medical Foundation-ASTMH Postdoctoral Fellowship in Tropical Infectious Diseases.** These postdoctoral fellowships provide support for individuals to conduct research in tropical infectious diseases. Funding is available for a twelve-month period, at least three months of which must be spent working on research in a tropical or developing area. These fellowships do not provide funding for overseas clinical electives or experiences. The purpose of these fellowships is to stimulate or sustain interest in research in tropical infectious diseases, and they are designed to encourage individuals who are planning on a career in infectious disease research relevant to tropical or developing areas of the world. The application deadline is September 15, 2003. Request an application from [atmh@astmh.org](mailto:atmh@astmh.org) or download information from <http://www.astmh.org/funding.asp>.

**Gorgas Memorial Institute Research Award.** This award is designed to enhance and facilitate the development of scientific linkages between Panama, nations of Central America, tropical and sub-tropical South America and the Caribbean Islands, and the United States through support of short-term travel for young research investigators from these regions. The application deadline is **August 1, 2003**. Request an application from [atmh@astmh.org](mailto:atmh@astmh.org) or download information from <http://www.astmh.org/funding.asp>.

**Pfizer Centennial Travel Award in Basic Science Tropical Disease Research.** The purpose of this award is to facilitate international collaboration in basic

science aspects of tropical infectious diseases and to provide interested physicians or scientists the opportunity to obtain hands-on field experience in, in combination with laboratory studies of, parasitic, bacterial or viral infectious diseases in endemic developing countries. The application deadline is September 1, 2003. Request an application from [astmh@astmh.org](mailto:astmh@astmh.org) or download information from <http://www.astmh.org/funding.asp>.

### Other Society News

**Intensive Update Course in Clinical Tropical Medicine and Travelers' Health.** This course will be held October 7-8, 2003 at the Manchester Grand Hyatt Hotel in San Diego, California, immediately preceding the IDSA annual meeting. Course details will be available soon. Request information from [astmh@astmh.org](mailto:astmh@astmh.org).

**Society will begin charging for advertisements in the News, on the web as well as in the Journal** At its mid-year Council meeting a decision was made to begin charging for advertisements that appear in the News and on the web, as well as in the Journal. In the past, job ads and notices appeared in both the News and on the web; in future, individuals may choose to have their information published on any one or all of these media, and the default will be all three. Although some details remain to be worked out, the fee structure will be standardized on the charges that are applied by the Journal, with a substantial discount for members. They can be found at <http://www.astmh.org/journal/adkit.rtf> To submit an advertisement, information can be sent to any of the following: [tahn-editor@ix.netcom.com](mailto:tahn-editor@ix.netcom.com); [cbs15@cwru.edu](mailto:cbs15@cwru.edu); [woodall@compuland.com.br](mailto:woodall@compuland.com.br) or [astmh@astmh.org](mailto:astmh@astmh.org).

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## CURRENT TRENDS

### Legislative News

**Advocates call for \$7.9 billion total CDC funding in FY 2004 compared to President's \$6.5 billion proposal** Congress should support the Centers for Disease Control and Prevention as an agency instead of rushing to infuse individual programs and initiatives on a crisis-by-crisis basis. That was the message conveyed to House appropriators on May 14<sup>th</sup> by the representatives of the CDC Coalition. American Public Health Association Executive Director Georges Benjamin urged Congress to provide sustained, adequate support to [create] a robust public health system with built-in surge capacity. American Society for Microbiology President Ronald Atlas also supported full funding for the agency. Sen. Arlen Specter, R-PA took DHHS Secretary Tommy Thompson to task at a March Senate L/HHS hearing for Administration underfunding of the agency. Specter questioned whether CDC funding should be reduced at a time when bioterrorism preparedness and emerging infectious disease efforts are ramping up. The CDC Coalition advocates funding the agency at a minimum \$7.9 billion in FY 2004, "a very modest request given the current public health environment," noted Benjamin. The President has proposed \$6.6 billion, an 8.5% cut from the \$7.2 billion Congress appropriated the agency in FY 2003. Of particular concern to ASM is the President's proposal for infectious disease activities. The proposed \$332 million to fund the CDC infectious disease control program would be a decrease of \$3 million from FY 2003, Atlas testified. Atlas urged that Congress instead provide an additional \$93 million in FY 2004, an amount he said would "enable CDC investigators to meet critical goals" outlined in the agency's plan for "Preventing Emerging Infectious Diseases." ASM also recommends an additional \$9 million to enable CDC for global infectious disease activities under the agency's 2002 Global Infectious Disease Strategy.

**HHS Releases CDC, HRSA Guidelines For Bioterrorism Funding** The Department of Health and Human Services (HHS) has released guidelines for its \$1.4 billion bioterrorism cooperative agreement program for states, territories and municipalities. The program will help state and local governments upgrade public health infrastructure and health care systems to better prepare for and respond to bioterrorism and other public health emergencies. The cooperative agreements are awarded by the Centers for Disease Control and Prevention (CDC) and the Health Resources and

Services Administration (HRSA). CDC administers public health preparedness awards, which total \$870 million. HRSA funds the hospital preparedness cooperative agreements, totaling \$498 million. The CDC's guidance this year focuses on seven areas: preparedness planning and readiness assessment; surveillance and epidemiology; laboratory capacity for handling biologic agents; laboratory capacity for handling chemical agents; health alert network and information technology; communicating health risks and health information dissemination; and education and training. Smallpox preparedness activities are included in these areas of focus. The HRSA guidelines for cooperative agreements outline six priority areas: governance; regional surge capacity to handle terrorism victims; emergency medical services; hospital linkages to public health departments; education and preparedness training; and terrorism preparedness exercises. Last week HHS released \$100 million to help states better prepare for a possible smallpox attack and strengthen the public health infrastructure. The funds, administered by the CDC, are immediately available. These funds are in addition to the \$1.4 billion available through HHS's cooperative agreements for FY 2003. Information: For CDC guidelines go to <http://www.bt.cdc.gov/planning/continuationguidance/index.asp>, for HRSA guidelines go to <http://www.hrsa.gov/bioterrorism/bhppguidance.htm>

### Organizational Trends

**IDSA Opens Preregistration for the 41st Annual Meeting of IDSA in San Diego, October 9 – 12, 2003.** Please visit the IDSA website at [www.idsociety.org/me/am2003/toc.htm](http://www.idsociety.org/me/am2003/toc.htm) for complete program details on state-of-the-art information on SARS, West Nile virus, smallpox vaccination, HIV treatment and prevention as well as other timely ID topics. **Preregister** for the 41st Annual Meeting (early, discounted preregistration deadline is Wednesday, **July 16, 2003**). Remember to submit your **abstract** by **May 13, 2003**. Remember to submit your **case report** by **July 31, 2003**. Program Committee Choice Awards: Four best, accepted abstracts in an open, overall category will receive \$2,500 each. IDSA's Annual Meeting Program Committee will select the recipients based on outstanding scientific research (applicants must be a maximum of six years out of fellowship). Visit the IDSA website for additional information on these awards.

**WHO/TDR Research Training Grants 2003** During the 28th meeting of the Research Strengthening Group (RSG), 10-14 February 2003, the RSG reluctantly agreed that TDR postpone the award of new research

training grants for 2003. The discussions centred around the need to review and revise the application and selection criteria for training grants and re-entry grants so as to better reflect TDR's strategic direction and vision for capacity building 2002-2005. Both degree training and re-entry grants applications will be reviewed based on a clear career development perspective. As in the past year, priority will be given to applicants from the least developed countries (LDC) and only in exceptional cases will non-LDC applications be considered. A revised Call for Applications for Research Training Grants 2004 will be available in the near future on the web site.

**30 Million Research Effort To Develop New Tests For Deadly Infectious Diseases** In response to the critical need for new tools to detect infectious diseases, the UNDP/World Bank/WHO Special Programme for Research and Training in Tropical Diseases (TDR) and the Bill & Melinda Gates Foundation today announced a new initiative focused on developing new diagnostic tests for the world's most deadly diseases. The Foundation for Innovative New Diagnostics (FIND) will work in collaboration with WHO/TDR, the diagnostics industry and other organizations to apply the latest biotechnology innovations to develop and validate affordable diagnostic tests for diseases of the developing world. The Gates Foundation has committed up to \$30 million over the next five years to the initiative. Building on the accomplishments of TDR's Tuberculosis Diagnostics Initiative, FIND will focus initially on TB, speeding up the development and evaluation of new tests to detect the disease, including drug resistant forms. TB was chosen as the first target for FIND because of the magnitude of the problem and the ability of existing health systems to treat cases once they are detected. Today's standard TB detection method, examining sputum under a microscope, was developed over a century ago. It is time-consuming and frequently inaccurate. While the success of the Global Drug Facility and other treatment programmes have improved the access of TB patients to effective therapy, diagnostics are now recognized as a primary stumbling block in TB control and patient care. FIND will work with private industry, WHO, and other technical agencies to ensure that the tools in development match public health needs. FIND will foster cooperation between private industry, the international health community, and the governments of affected nations. This kind of public-private partnership is essential to bringing the latest health technologies to bear on the diseases of the developing world." FIND is an independent non-profit foundation based in Geneva. The FIND secretariat will be governed by a board composed of public health experts, business leaders, influential scientists and patient representatives. A scientific advisory committee will provide scientific support to review proposals from both public and private

collaborating parties. FIND will work in close collaboration with WHO/TDR. Its non-profit status will also enable FIND to work closely with industry to invest in the most promising diagnostics to meet public health needs. In addition to developing and evaluating tests, FIND will fund demonstration projects to determine the potential impact of newly developed products and improve their use in developing countries. WHO/TDR will be a key player in the interaction with researchers, in setting up clinical trials and carrying on the implementation research required during the introduction of the new diagnostic tools by the health services of disease-endemic countries. FIND findings will provide input to the WHO on standard setting for diagnostics and regulatory harmonization.

## DEATHS

**Charles Janeway, MD** April 15, 2003. Dr. Janeway was Professor of Immunobiology at Yale University School of Medicine and of Molecular, Cellular, and Developmental Biology at Yale University. He received his B.A. and M.D. degrees from Harvard College and Harvard Medical School and did scientific training at the National Institute for Medical Research, London, England; the National Institutes of Health; and the Biomedical Center, Uppsala, Sweden. Dr. Janeway was a member of the National Academy of Sciences. He recently completed the fifth edition of his textbook, *Immunobiology: The Immune System in Health and Disease*. The renowned immunobiologist at the Yale medical school often referred to as the father of the understanding of innate immunity, the human body's first line of defense against infection, died of cancer April 12 at his home in New Haven, Connecticut. In 1989, in his opening lecture at the annual Cold Spring Harbor symposium on quantitative biology, Janeway made a groundbreaking presentation that helped give birth to the field of innate immunity. Although based entirely on theory, his speech accurately speculated about the existence of special receptors on immune cells that trigger the body's response to infection by disease-causing organisms called pathogens. At the time, Janeway explained that T-cells, which protect against pathogens, forming the body's adaptive immune response, must first be instructed to mount their defensive attack by the activation of specific receptors on immune cells that line the body's surface and recognize foreign microorganisms. Less than 10 years later, Janeway and a colleague, Dr. Ruslan Medzhitov, identified a toll-like receptor as the crucial component of innate immunity that orchestrates the series of responses intended to fight infection. They pointed out that a

closely related receptor also exists in a wide range of other animals, plants and invertebrates, suggesting that innate immunity is an ancient system of natural defense common among a variety of multicellular organisms.

**Elizabeth O'Hern**, a retired microbiologist, died on February 19, 2003. Dr. O'Hern worked at the National Institutes of Health from 1968 to the mid-1980s, where she was a program administrator genetics research grants at the National Institute of General Medical Sciences. She was a member of a microbiology delegation to China in 1983. Dr. O'Hern published a book, *Profiles of Pioneer Women Scientists* and wrote for professional journals about microbiology and women in science. She was born in Richmondville, New York and graduated from the University of California at Berkeley and the University of Washington. Before joining the NIH she taught at SUNY Downstate Medical Center in Brooklyn and at George Washington University. She was also involved with antimalarial drug research at Bionetics Research Laboratory in Kensington, Maryland. Dr. O'Hern was president of the Washington Chapter of the American Association of University Women, and a fellow of the American Academy of Microbiology.

**Kendall G. Powers, Ph.D.** a longstanding member of the Society, died suddenly on July 19, 2002. *This obituary was prepared by Allen Cheever, a longtime colleague.* It was always a memorable experience and a pleasure doing collaborative experiments with Ken Powers. He was always enthused and well organized and did more than his share of the work, his performance of which was always meticulous and cheerful. Ken received his Ph.D. in Parasitology from the University of Wisconsin in 1961. He was Chief, Parasitology Research for Schering Corporation before coming to the NIH in the Laboratory of Parasitic Chemotherapy in 1963 and did bench science for that laboratory and the Laboratory of Parasitic Diseases until 1975 when he became Head of the Veterinary Parasitology Program of the Food and Drug Administration. From 1982 to 1990 he helped administer extramural contracts and the AIDS review group at NIH. After retiring from the NIH Ken consulted widely for scientific review groups until 1996. His scientific interests varied widely from chemotherapy of malaria to schistosomiasis and filariasis. His committee assignments cover several pages of typescript and include many years advising on veterinary anthelmintics. He served in the U.S. Marine Corps from 1948 to 1952 and thereafter in the Naval Reserve Naval Medical Command where he received numerous honors including the Meritorious Service Medal in 1987. He retired as a Captain in 1990. Ken served as President of the Tropical Medicine Association of Washington in 1973-4 and of the Helminthological

Society of Washington in 1976-7. Kendall is survived by his wife Dr. Marcelina B. Powers and his son Scott T. Powers.

## PEOPLE

Microbiologists **William Petri And Barbara Mann** Microbiologists were named U.Va Patent Foundation Inventors of the Year: William Petri and Barbara Mann have been named joint recipients of the 2003 Edlich-Henderson Inventor of the Year Award by the University of Virginia Patent Foundation. Society President Petri, who is incidentally also a Professor of Medicine, Microbiology and Pathology, and Mann, Associate Professor of Medicine and Microbiology, were recognized for their collaborative work in developing a clinical test to diagnose amoebiasis, an intestinal infection that is a leading cause of death in children in developing countries. Their diagnostic test has proven to be important in detecting and treating a debilitating children's disease. The researchers' work will enable health care workers to treat children and adults suffering from diarrhea and dysentery by identifying the infecting agent. Until Petri and Mann developed a relatively easy-to-use, inexpensive (less than \$10 each) kit, there was no easy way to specifically identify the *Entamoeba histolytica* organism. After developing three versions of the test kit – each one more sensitive and simple to use than the one before – the researchers plan to develop a dipstick test that can show in minutes whether the *E. histolytica* organism is present. Still, challenges facing the test remain, especially, expanding distribution through the developing world's rudimentary health care systems and reducing the cost of the test to pennies apiece. Petri and Mann are generous in sharing the credit for their work. In particular, they note the contributions of U.Va. colleagues William Sutherland, and Martin Chapman, professor of medicine. They also collaborated with Blacksburg-based microbiologists Tracy Wilkins and David Lyerly, co-founders of TechLab Inc., a small spin-off company from Wilkins' research at Virginia Tech, which makes clinical diagnostic tests for diseases of the human colon.

**Duane Gubler**, former President of the ASTMH and Director of the CDC's Division of Vector Borne Infectious Diseases has accepted a position as Professor and Director of the Asian-Pacific Institute for Tropical Medicine and Infectious Diseases at the University of Hawaii Medical School, effective January 1, 2004. As part of this transition, Dr. Gubler will be stepping down as Division Director effective July 14 to devote his remaining 6 months at CDC to continuing the effort to develop a new international program called the Pediatric

Dengue Vaccine Initiative. Dr. Gubler has been the Director of DVVID since March 1989.

On April 26, 2003 at the annual meeting in Chicago, ASTMH members **Stephen L. Hoffman** (Sanaria), **James Kazura** (Case Western Reserve), and **Mary Wilson** (University of Iowa) were inducted into the Association of American Physicians. <http://www.aap-online.org/>

**David Fleming, MD New Director of Global Health Strategies for the Bill and Melinda Gates Foundation.** Dr. Fleming will be responsible for a broad range of programs addressing cross-cutting public health issues such as global immunizations, maternal and child health, nutrition, surveillance and health technology delivery systems, training and leadership, and novel implementation and financing mechanisms for global health. Dr. Fleming's longstanding association with CDC began in 1984 when he became an Epidemic Intelligence Officer, and he officially joined CDC in 2002. Dr. Fleming moves to the Foundation from the CDC, where he played a pivotal role at the agency, first as Deputy Director for Science and Public Health from 2000 to 2002, then as Acting Director for CDC and Acting Administrator for ATSDR from April to June 2002, and as Deputy Director for Public Health Science since July 2002.

**Sandra Lehrman, MD** has been named Director of the Therapeutics Research Program, in the Division of AIDS at the National Institute of Allergy and Infectious Diseases. Dr. Lehrman's professional career began as a Biologist in the Laboratory of Infectious Diseases at NIAID/NIH, after which she returned to Brown University to attend medical school, and then completed an internship and residency in pediatrics at the Massachusetts General Hospital. Upon completion of her medical training, she joined the faculty at Duke University Medical Center's Department of Pediatrics. In 1983, she joined the Burroughs Wellcome (BW) Co. While at BW, Sandi worked with the Virology team to develop strategies for the identification and development of antiviral agents to treat HIV/AIDS, most importantly AZT, the first licensed antiretroviral drug. Sandi led the development team for AZT from the laboratory bench through preclinical development, clinical trial phases, to FDA approval. She also contributed substantially to the use of acyclovir for the management of *Herpes simplex* and *Varicella zoster* viral infections. In 1994, she became the Vice President and General Manager of BW Manufacturing Inc., a biopharmaceutical production subsidiary, while also serving as the International Director of Biotechnology with Wellcome PLC in London. Sandi has served as a member of AIDS Research Advisory Committee, and as Director of the Rhode Island Center

for Cellular Medicine. She is currently a member of the Whitehead Institute Board of Associates and Brown University Corporation Committee for Biomedical Affairs.

## FUNDING OPPORTUNITIES

### One-Time Solicitations

#### AMANET WORKSHOP ON HEALTH RESEARCH

**ETHICS IN AFRICA** Biotechnology Centre, Younde 1 University, Cameroon, September 2003 *Call For Applications* Applications are invited from African physicians/scientists in the employment of African health research, control, and/or training institutions. Applicants must at least be middle to senior level investigators, key members of ethics (or scientific) review committees, study monitors, members of data safety monitoring boards, sponsors of research involving human subjects, members of regulatory bodies or writers/editors of biomedical journals. **Workshop Contents:** 1. Introductions, Course Content and House-Keeping, 2. History of Ethics in Health Research, 3. Ethics Codes and Guidelines, 4. Ethics Review Boards/Committees, 5. Beneficence/Mal-beneficence in Research, 6. Respect of Subjects, 7. Informed Consent in Research, 8. Justice in Research 9. Issues in Study Design: Randomized Control Trials and Placebos, 10. Traditional Medicine and Standard Therapy 11. Ethics Issues in International Research 12. Community Benefits and Protections 13. Archived Specimens. Instructions will mainly be in English, although two of the facilitators will be bilingual (English/ French ). Selected participants will be awarded scholarships by the African Malaria Network Trust (AMANET), which will cover costs for economy class airfares, tuition and full board. Participants should meet all their other costs. Applicants wishing to participate in this Workshop should forward the following by e-mail to the addressee below by **1 July 2003**. All applications must be received by: 1 July 2003 by e-mail at the address below: Managing Trustee, AMANET, Tanzania Commission for Science and Technology Building, Ali Hassan Mwinyi Road, Kijitonyama, P O Box 33207, Dar es Salaam, Tanzania. Tel: 255-22-270 0018, Fax: 255-22-270 0380, E-mail: [info@amanet-trust.org](mailto:info@amanet-trust.org)

**TDR Research Capacity Strengthening Programme Grants** *Call For Letters Of Intent - 2004* **Deadline: 15 July 2003** The UNDP/ World Bank/ WHO Special Programme for Research and Training in Tropical Diseases (TDR) supports long-term institutional capacity building projects for research in tropical diseases in the least developed countries (LDCs) [<http://www.unesco.org/ldc/list.htm>] and in other low income

and high disease-burden countries with limited capacity for research. The RCS Programme Grant will support long-term proposals for institutional, development programmes designed to foster research capacity. The grant will provide support to develop leadership in research, scientific expertise in biomedical and/or social sciences, managerial skills, and institutional infrastructure. The support is expected to facilitate access to training opportunities and scientific information, and improve communication systems. The programme grant also fosters opportunities for collaboration with scientists and institutions in more advanced developing countries and industrialized countries. RCS staff will assist in the development of proposals which will be reviewed on the basis of a sound, scientific institutional development plan, relevant research project(s) and explicit expected outcomes. Successful research proposals will address areas on the interface between laboratory-oriented research and applied field research, with the aim of extending, where possible, research findings into policy and practice. Selected proposals will be funded for an initial period of three years, subject to annual reviews and satisfactory progress, with annual budget up to US\$50,000. The funding level for each year should be fully justified according to the activities proposed. Long-term support will be considered on a case-by-case basis for successful projects which have a high-impact potential. Proposals for a Programme Grant will initially be selected from Letters of Intent. A 3-5-page letter of intent should provide a brief outline of the institutional development plan highlighting its potential scientific contribution and relevance to reducing the burden of disease. A description of the technical and operational feasibility, interaction/collaboration with control programmes, as well as team and research capacity-building perspectives are necessary for the review. A one page summary CV of the Principal Investigator and a supporting letter from the Institution Director. An external panel will select the most promising letters to be invited to prepare full proposals for RSG consideration. TDR will assist in the development of final proposals . Please email your letter of intent to [rcstdr@who.int](mailto:rcstdr@who.int). The letter of intent should be marked, "Programme Grant 2004". Where required, the TDR secretariat and external consultants will provide assistance to ensure proposals with a clear plan of research, capacity building component, and including timelines, milestones, and indicators. **Deadline for submission of letters of intent : 15 July 2003** For additional information, contact Dr Fabio Zicker Coordinator, Research Capability Strengthening, UNDP/World Bank/ WHO Special Programme for Research and Training in Tropical Disease (TDR), World Health Organization, 1211 Geneva 27 Switzerland. Fax: (41-22) 791-4854; E-mail: [rcstdr@who.int](mailto:rcstdr@who.int); Web site: <http://www.who.int/tdr> . **Child Health And Nutrition Research Research On Low Birth Weight** This announcement invites institu-

tions, particularly in low- or middle-income countries, to express their interest in conducting research on low birth weight. More specifically, proposals are expected for population-based studies to: (a) define the burden of low birth weight, i. e. prematurity and IUGR, and assess risk factors; and/or (b) explore the relationship between prematurity and IUGR and neonatal morbidity and causes of death. The Child Health and Nutrition Research Initiative[1] (CHNRI), supported by the Global Forum for Health Research, was established to stimulate and support the expansion of research on priority child health and nutrition issues on a global basis, especially in the developing world. The specific objectives of CHNRI are: to promote priority research discussions within a broadened approach to child health, nutrition and development; to expand global knowledge on childhood disease burden and the cost-effectiveness of interventions; to ensure adequate inclusion of developing country institutions and scientists in the setting of priorities and formulation of plans for child health and nutrition research; to promote appropriate research capacity development in low and middle income countries for participation in these activities; to stimulate donor participation by proposing clearly defined and focused research activities and a plan of action, and to increase funding for child health and nutrition research. Important areas of research identified by Child Health and Nutrition Research Initiative partners concern (a) the role of low birth weight (LBW) i.e. prematurity and intrauterine growth retardation (IUGR); (b) the relation between prematurity and IUGR on the one hand, and causes of neonatal death on the other hand; and (c) interventions related to LBW and their evaluation, including interventions in or preceding pregnancy, or special interventions for LBW babies. This announcement calls for proposals to conduct population-based studies to: (a) define the burden of low birth weight, i. e. prematurity and IUGR, and assess risk factors; and/or (b) explore the relationship between prematurity and IUGR and neonatal morbidity and causes of death. Proposals should address (a) and/or (b), and should guide the development of potential interventions/programmes. In addition to describing the biological relationships, the study must analyse the availability and utilization of health and nutrition services that would affect the risk of prematurity and IUGR and their consequences. A key criterion in selecting studies will be that these could lead to the implementation of realistic interventions/programmes at high coverage in community settings, possibly using existing health infrastructure. The expected duration of work should not be more than 24 months with at least 12 months of data collection. Interim reports will be expected every six months. Institutions, research groups and individual scientists from developing (low- and middle-income) countries[2] are eligible to apply for this grant. Developing-country institutions and researchers may apply

alone or in collaboration with institutions in the developed world. However, such collaborating institutions/ individuals cannot be principle investigators. Individuals from UN organizations may provide technical assistance but cannot be the recipients of funds. An amount of some US\$400,000 is currently available for CHNRI's research programme. It is anticipated that between two and four proposals will be selected and funded within this framework. The deadline for proposals is **15 August 2003**. Review will take place and selection of groups be announced by October 2003. It is expected that projects will begin by January 2004. In the proposal it will be important to include a detailed description of how the findings will be translated into action. Applicants are requested to send in a proposal of no more than 10 pages including an executive summary (excluding appendices which should also not exceed 10 additional pages) covering the following sections: Cover letter (detailing mailing and email address) Investigators whose proposals have been selected may be invited to submit a more detailed research project. Proposals will only be accepted in English. Proposals should be received by 15 August 2003 at the Child Health and Nutrition Research Initiative Secretariat (attention Walter Gulbinat) Global Forum for Health Research c/o World Health Organization, 20 avenue Appia, 1211 Geneva 27, Switzerland. Telephone: +41 22 791 4497; Fax: +41 22 791 4394; Email: [gulbinatw@who.int](mailto:gulbinatw@who.int). Please note: Institutions and research organizations are cautioned that there will be no extension on the above-stated timeframes. Applicants should carefully consider their capacity to deliver the products on time. For more information on CHNRI please contact Dr Adnan Hyder, Interim Secretary ([hydera@who.int](mailto:hydera@who.int)) and visit [www.globalforumhealth.org](http://www.globalforumhealth.org)

### Recurring or Open Solicitations

**SARS Research** (Addendum To Pa-03-080: Biodefense And Emerging Infectious Diseases Research Opportunities) The National Institute of Allergy and Infectious Diseases (NIAID) is amending PA-03-080 at <http://grants.nih.gov/grants/guide/pa-files/PA-03-080.html> to include basic research on the newly recognized Severe Acute Respiratory Syndrome (SARS) Coronavirus. While the long term public health significance of SARS is not known, its recent emergence, ease of transmission, and disease severity warrant an immediate response from the biomedical research community. To this end, NIAID is amending PA-03-080 to include support for basic research on SARS as an emerging infectious disease. This amendment permits the submission of proposals to conduct basic research on SARS coronavirus including, but not limited to, the

following areas: pathogenesis, immunity, treatment, prevention and diagnosis. Details of the scientific priorities addressed in this notice are available at: <http://www.niaid.nih.gov/biodefense/falplat.htm>. Investigators are strongly encouraged to review this information prior to submission. NIAID will continue to assess its SARS research program and will inform the biomedical community should future initiatives replace this program announcement in soliciting SARS grant applications. We encourage inquiries concerning this notice and welcome the opportunity to answer questions from potential applicants. Direct inquiries regarding SARS programmatic issues to: Linda Lambert, Ph.D., Program Officer, National Institute of Allergy and Infectious Diseases, Rm 5051; 6610 Rockledge Dr. Bethesda, MD 20817 Telephone: 301/496-5305 FAX: 301/496-8030 E-mail: [LL153p@nih.gov](mailto:LL153p@nih.gov) or Christopher Taylor, Sc.D. Program Officer National Institute of Allergy and Infectious Diseases Rm 5045; 6610 Rockledge Dr. Bethesda, MD 20817 Telephone: 301/496-5305 FAX: 301/496-8030 E-mail : [ctaylor@niaid.nih.gov](mailto:ctaylor@niaid.nih.gov). Direct inquiries regarding biodefense programmatic issues to: Sam Perdue, Ph.D. Program Officer, Rickettsial and Related Diseases National Institute of Allergy and Infectious Disease Room 4115; 6610 Rockledge Dr. Bethesda, MD 20817 Telephone: 301/402-5083 Fax: 301/402-2508 Email: [sp189u@nih.gov](mailto:sp189u@nih.gov)

#### **Indo-US Program On Contraception And Reproductive Health Research**

RELEASE DATE: April 22, 2003 NOTICE: NOT-HD-03-009 National Institute of Child Health and Human Development (NICHD) (<http://www.nichd.nih.gov/>) In November of 1997, the governments of India and the United States, the former represented by the Department of Biotechnology (DBT), Ministry of Health and Family Welfare, Indian Council of Medical Research (ICMR), and the Council of Scientific and Industrial Research (CSIR), the latter represented by the Department of Health and Human Services (DHHS) and the United States Agency for International Development (USAID), mutually agreed to support Indo-U.S. collaborative research and related activities on contraception and reproductive health research (CRHR). Program Structure: The Indo-U.S. Program on Contraception and Reproductive Health Research (CRHR) is administered by a Secretariat consisting of staff from the U.S. and Indian nodal agencies. The nodal agencies for this program are the U.S. National Institute of Child Health and Human Development (NICHD) of the National Institutes of Health (NIH), U.S. Department of Health and Human Services, and the Department of Biotechnology (DBT) of the Indian Ministry of Science and Technology. In addition to the Secretariat, the overall scientific goals and procedures are overseen by a Joint Working Group (JWG) consisting of independent U.S. and Indian investigators and staff from participating agencies with expertise covering the range of topics to be addressed

by the CRHR program. Scope of the Program The goal of the CRHR program is to "build upon previous research cooperation by drawing on the expertise of Indian and US scientists and institutions to promote and support collaborative research that will result in expanded contraceptive options and improved reproductive health." To address shared concerns in contraception and reproductive health, Indian and U.S. scientist will undertake a coordinated program that will involve participation in collaborative, peer-reviewed research projects, scientific workshops and conferences, research training, and technology transfer. This cooperation will be based on mutual benefit, trust, and a shared commitment to the advancement of scientific knowledge and its application to improve health. Procedures: The CRHR program will fund supplemental grants to existing NIH-funded projects. Priority will be given to investigative collaborations with U.S. investigators currently funded by NICHD. Awards to U.S. investigators will generally be limited to \$50,000 per year in direct costs for up to three years. Applications with budget requests exceeding this amount will be reviewed by the U.S. Secretariat on a case-by-case basis for appropriateness. U.S. investigators interested in participation in the CRHR program should contact the US Secretariat at the address listed below and request submission materials. Please note that applications from U.S. investigators for supplemental funding to existing grants must be submitted by the grantee institution on behalf of the grant's Principal Investigator. All materials regarding participation in the CRHR program must be submitted to both the U.S. and the Indian Secretariat. U.S. investigators must send inquiries to the U.S. Secretariat at the address listed below; the Indian collaborator(s) must submit identical materials to the Indian Secretariat at the address listed below. After the initial inquiry has been reviewed by both Secretariats and agreement reached on proposal responsiveness to program areas listed above, both U.S. and Indian investigators will be provided with instructions for submission of proposals that will be jointly reviewed via an ad hoc review conducted simultaneously by both U.S. and Indian Secretariats. The deadline for the submission of full proposals is July 15, 2003. DBT- and NICHD-constituted review panels will review all full proposals for scientific merit. Final decisions about funding under the CRHR program will be made by the JWG of the Indo-U.S. CRHR program. For further information, contact: U.S. Secretariat CRHR, Daniel J. Raiten, Ph.D., Office of Prevention Research and International Programs, National Institute of Child Health and Human Development, National Institutes of Health, 6100 Executive Boulevard, Room , MSC 7510, Bethesda, MD 20892-7510; Telephone: (301) 435-7568; Email: [raitend@mail.nih.gov](mailto:raitend@mail.nih.gov); Indian Secretariat CRHR, B.M. Gandhi, Adviser, Department of Biotechnology,

Block-2, 7th Floor, CGO Complex, Lodhi Road, New Delhi-110003, Telephone: 4360984 Fax: 4380984, 4362884 Email: [Gandhi@dbt.nic.in](mailto:Gandhi@dbt.nic.in)

### **Indo-US Program On Maternal And Child Health And Human Development Research** RELEASE

DATE: April 22, 2003 NOTICE: NOT-HD-03-010 The Indo-U.S. Program on Maternal and Child Health and Human Development Research (MCHDR) is administered by a Secretariat consisting of staff from the U.S. and Indian nodal agencies. The nodal agencies are the U.S. National Institute of Child Health and Human Development (NICHD) of the National Institutes of Health (NIH), U.S. Department of Health and Human Services, and the Indian Council for Medical Research (ICMR) of the Ministry of Health and Family Welfare. Indian collaborating agencies involved in support of this program include the Department of Women and Child Development, Ministry of Health and Family Welfare, the Department of Biotechnology, Ministry of Science and Technology, and the National AIDS Control Organization. U.S. collaborating agencies include other NIH Institutes and Centers, other Department of Health and Human Services agencies, the U.S. Agency for International Development (USAID), and the Agricultural Research Service (ARS) of the U.S. Department of Agriculture (USDA). In addition to the Secretariat, the overall scientific goals and procedures are overseen by a Joint Working Group (JWG) consisting of independent U.S. and Indian investigators and staff from participating agencies with expertise covering the range of topics to be addressed by the MCHDR program. Indian and U.S. scientists will undertake collaborative, peer-reviewed research projects, scientific workshops and conferences, research training, and technology transfer. Building on a history of productive biomedical and behavioral research collaboration, this cooperation will be based on mutual benefit, trust, and a shared commitment to the advancement of scientific knowledge and its application to improve health. *Procedures:* The MCHDR program will fund supplemental grants to existing NIH-funded projects. Priority will be given to investigative collaborations with U.S. investigators currently funded by NICHD. Awards to U.S. investigators will generally be limited to \$50,000 per year in direct costs for up to three years. Applications with budgetary requests exceeding this amount will be reviewed by the U.S. Secretariat on a case-by-case basis for appropriateness. U.S. investigators interested in participation in the MCHDR program should contact the US Secretariat at the address listed below to request submission materials. Please note that applications from U.S. investigators for supplemental funding to existing grants must be submitted by the grantee institution on behalf of the grant's Principal Investigator. All materials regarding participation in the MCHDR program must be submitted to both U.S. and Indian Secretariats. U.S. investigators

must send inquiries to the U.S. Secretariat at the address listed below; the Indian collaborator(s) must submit identical materials to the Indian Secretariat at the address listed below. After the initial inquiry has been reviewed by both Secretariats and agreement reached on proposal responsiveness to program areas listed above, both U.S. and Indian investigators will be provided with instructions for submission of proposals that will be jointly evaluated via an ad hoc review conducted simultaneously by both U.S. and Indian Secretariats. The deadline for the submission of full proposal is July 15, 2003. ICMR- and NICHD-constituted review panels will review all full proposals for scientific merit. Final decisions about funding under the MCHDR program will be made by the JWG of the Indo-U.S. MCHDR program. For further information, contact: U.S. Secretariat MCHDR, Daniel J. Raiten, Ph.D., Office of Prevention Research and International Programs, National Institute of Child Health and Human Development, National Institutes of Health, 6100 Executive Boulevard, Room 4, MSC 7510, Bethesda, MD 20892-7510 Telephone: (301) 435-7568 Email: [raitend@mail.nih.gov](mailto:raitend@mail.nih.gov) Indian Secretariat MCHDR, N.C. Saxena, Deputy Director General, Chief, Division of Reproductive Health and Nutrition, Indian Council of Medical Research, Ansari Nagar, New Delhi 110029

**International Travel Fellowship** The Institute for Genomic Research (TIGR) is proud to announce an International Travel Fellowship. The Fellowship is designed to provide a unique opportunity for senior researchers from developing countries, especially those with an interest in computational genomics, to interact with TIGR scientists as well as to participate in one of our co-sponsored scientific conferences. The objective of this program is to foster collaborative relationships in genomics research. We solicit your help in disseminating this notice and request that you forward this e-mail to your colleagues. The first Fellowship is for the Sixth Annual Conference on Computational Genomics, which will be held in Boston, Massachusetts, U.S.A. in October 2003. The process of application and the Fellowship is described in greater detail on the TIGR website [<http://www.tigr.org/edutrain/fellowship/>].

## **ITEMS OF INTEREST**

### **Genes & Genomes Infection Biology In The Tropics**

Three-week course arranged in collaboration between the Karolinska Institutet, Stockholm, Sweden and Makerere University, Kampala, Uganda. November-December 2003 This 3 week course is a collaborative effort between Karolinska Institutet in Stockholm, Sweden and Makerere University in Kampala, Uganda.

Teachers from the two universities have in collaboration generated a course spanning from cutting edge molecular techniques to field studies. The course is divided into lectures, discussions and very advanced practicals including bioinformatics. It will be at Makerere University during November/December 2003. The lectures will cover general topics of importance in genomic studies as well as medically important protozoa with a focus on malaria. *C. elegans* as a model system and different aspects of pathogenic helminths and bacteria will be presented. Practical areas to be covered are bioinformatics, proteomics and diagnostic PCR. The 16 students will be from primarily Makerere University and Karolinska Institutet but other students may also be accepted. The course is financed by SIDA (SAREC), Karolinska Institutet and the Infection & Vaccinology programme. Contact : Dr. Johan Lindh at [johan.lindh@smi.ki.se](mailto:johan.lindh@smi.ki.se) or Dr. Fred Kironde at [kironde@starcom.co.ug](mailto:kironde@starcom.co.ug) **Application deadline: July 1, 2003.**

**Biomaterials Available to Endemic Country Scientists** ATCC has been awarded a grant by the Ellison Medical Foundation to provide biomaterials at no cost to scientists in regions of the world most heavily burdened by AIDS/HIV and other infectious diseases. We encourage you to order biomaterials from ATCC and reference the Ellison Medical Foundation/ATCC Fund on the order. As a recipient of the subsidized materials, you must agree to allow the ATCC and/or the Ellison Foundation to identify you as a recipient. All restrictions, requirements, and limitations with respect to use, safety, and compliance with United States law will apply to orders accepted under this program. Scientists in the following countries may be eligible for these funds: Benin, Burkina Faso, Burundi, Cambodia, Cameroon, Central African Republic, Chad, Comoros, Congo, Djibouti, Equatorial Guinea, Eritrea, Ethiopia, Gabon, The Gambia, Ghana, Guinea, Guinea-Bissau, Haiti, Kenya, Laos, Lesotho, Madagascar, Malawi, Mali, Mauritius, Mozambique, Namibia, Nepal, Niger, Nigeria, Papua New Guinea, Senegal, Sierra Leone, South Africa, Swaziland, Tanzania, Togo, Uganda, Zambia, Zimbabwe. ATCC is a biological resource center that distributes cell lines, bacteria, DNA clones, viruses, fungi, and protozoa to researchers around the world. We also offer media, kits, and other laboratory products. To search our online catalog, visit our Web site at [www.atcc.org](http://www.atcc.org). You must have an approved, current ATCC account to place an order. Ask us for an account application or download it from [www.atcc.org/Order/CreateNewAccount.cfm](http://www.atcc.org/Order/CreateNewAccount.cfm).

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from leaders in medicine, government, and health that address them. [www.academicmedicine.org](http://www.academicmedicine.org)

**Chronic Wasting Disease Report Available** A report of a recent workshop on surveillance for chronic wasting disease in free-ranging cervids has been placed on the USGS-National Wildlife Health Center website: [http://www.nwhc.usgs.gov/research/chronic\\_wasting/chronic\\_wasting.html](http://www.nwhc.usgs.gov/research/chronic_wasting/chronic_wasting.html). This document covers aspects of disease detection, including testing and sample collection methodology and sample size considerations. Another very interesting document on supplemental feeding of wildlife is available at the Canadian Cooperative Wildlife Health Center website: <http://wildlife.usask.ca/english/content.htm>

## BOOKS

**Updates in Emergency Medicine**, edited by John D. Cahill, MD. *Updates in Emergency Medicine* is the ultimate portable reference for the busy emergency physician or internist. It introduces principles and practices of emergency medicine, and addresses academic controversies within the discipline. This concise, organized pocket guide is packed with the essential important clinical information and is available in both hardcover and paperback editions. Key Features include: Updates in Bioterrorism, High Risk Aspects of Emergency Medicine, Advanced Trauma Support, Regional Anesthesia, Advanced Cardiac Support, Psychiatric Emergencies, Detailed Pediatric Section. ISBN # 0-306-47470-0 (Paperback) \$49.95 0-306-47713-0 (Hardcover) \$110.00 Publication Date: December 2002 For a full table of contents and information on how to order the book, please visit [www.wkap.nl/prod/b/0-306-47713-0](http://www.wkap.nl/prod/b/0-306-47713-0)

## JOBS

### Around the Globe

**India** Mitraniketan Hospital *Physician*. The Mitraniketan Hospital is situated in the mountains of Kerala, Cardamon Hills, in India, at a height of 1000 m near Tea-Plantations. (Buses from Palai 1½ hours) It is a Rural Hospital with a simple set up. We have 60 beds and daily about 50-80 out-patients. Except Major Surgery we are treating patients in Medicine, Paediatrics, Obstetrics (about 400 deliveries per year) and Minor Surgery. Out patients come from the lower income group, i.e. plantation workers, coolies, small farmers etc. There is one Senior Doctor permanent, one Junior Doctor (if available). Nurses : 7 Senior Nurses - Midwives, 6 Students. Lab and x-ray facilities are available. Nearest referring hospital : 32 km away a Private Hospital, 70 km away Medical College, Kottayam. Food

and Accommodation in the Staff Quarters near the Hospital. One month holiday per year, one day off per week. The MITRANIKETAN SOCIAL SERVICE SOCIETY (Registered under Travancore-Cochin Literary, Scientific & Charitable Societies Act XII of 1955) Reg. No. K. 360/1980 MITRANIKETAN HOSPITAL VAGAMON P.O. 685 503 KERALA, S. INDIA Ph 0482-299305 Date September 2002 For additional information contact Dr. Hilda Sina, MITRANIKETAN HOSPITAL, VAGAMON P.O. 685 503, KERALA, S. INDIA Phone: +91-0482-2299305

**Norway** European Malaria Vaccine Initiative (EMVI) *Project Manager* University of Bergen - Faculty of Medicine Centre for International Health Norway *Duties:* To assist the Director of Clinical and Regulatory Affairs in implementing projects approved by the EMVI Board. Extensive travelling in Europe, and to a lesser extent in Developing Countries, primarily Africa to be expected. To assist the Executive Director in implementing pharmaceutical and clinical development contracts. *Areas of Responsibility:* The Project Manager will participate in: EMVI product and clinical development establishing and monitoring EMVI-sponsored clinical trials in Europe and Africa developing and managing of documentation for regulatory authorities reporting to the EMVI Director of Clinical and Regulatory Affairs *Qualifications:* MD or pharmacist, alternatively a PhD in Biology. Degree in Epidemiology, Immunology or Clinical Research would be an asset. *Experience:* Three to five years experience in clinical development, preferably in the pharmaceutical industry at the level of Project Manager, or clinical research physician. Knowledge of Microsoft Project, Microsoft Office, Microsoft Access and statistical software is desirable. Fluency in English is mandatory while knowledge of another European language would be an advantage. *Duration/salary:* Contract period will be three years. Attractive salary conditions to be offered. *Commencement Date:* As soon as possible. *Deadline for Applications:* **15 July 2003** Applications should be sent to: Centre for International Health, Attn: Professor Bernt Lindtjørn, Armauer Hansen's Building, Haukeland University Hospital, N-5021 Bergen, Norway For further information, please contact: Professor Bernt Lindtjørn, Phone: +47 55 97 49 82, e-mail: , or Dr. Odile Leroy, Director of Clinical and Regulatory Affairs, Phone: +33 1 47 95 17 81.

**Peru** Postdoctoral Position in Tropical Ecology A postdoctoral position is available to study the ecology of zoonotic, vector-borne viral diseases in the Amazon basin of Peru as part of an ongoing project on the effect of deforestation on arboviruses. This is a unique opportunity to join a multidisciplinary team of mammal and insect ecologists, virologists and epidemiologists to study arbovirus ecology in the Iquitos region, an ecologically fascinating, tropical setting. Although a

postdoctoral fellow is desired, applicants at other stages of career development will also be considered. Expertise in one or more of the following areas is desirable: use of remote sensing and other spatial tools for landscape ecology and/or epidemiology; ecology and/or Systematics of small Neotropical mammals; ecology and/or Systematics of Neotropical bats; field studies of zoonotic diseases. Interested persons should contact one of the following individuals:

- **Scott C. Weaver, Ph.D.**, Director for Tropical and Emerging Infectious Diseases, UTMB Center for Biodefense and Emerging Infectious Diseases, Professor, Departments of Pathology, Microbiology & Immunology, University of Texas Medical Branch, 4.128 Keiller Building, Galveston, Texas 77555-0609, USA. Email: [sweaver@utmb.edu](mailto:sweaver@utmb.edu); Office phone 409-0747-0758; lab 747-2440; FAX 409-747-2415; <http://www.utmb.edu/pathology/weaver.html>; <http://microbiology.utmb.edu/faculty/weaver/homepage.htm>.
- **Michael R. Willig, Ph.D.**, Ecology Program, Department of Biological Sciences, Texas Tech University, Lubbock, Texas 79409-3131, USA. Email: [michael.willig@ttu.edu](mailto:michael.willig@ttu.edu); 806-742-2590 (Office); 806-742-2658 (Lab); 806-742-2715 (Department); 806-742-2963 (Facsimile); <http://www.biol.ttu.edu/faculty/FacPages/willig/MRWilligpage/index.htm>.
- **L. Philip Lounibos, Ph.D.**, Florida Medical Entomology Laboratory, 200 9th Street S.E., Vero Beach, Florida 32962, USA, Email: [Lounibos@ufl.edu](mailto:Lounibos@ufl.edu); Phone: (772) 778-7200; FAX: (772) 778-7205; <http://fmed.ifas.ufl.edu/>. Current address (until Dec. 2003): Division of Biological Sciences, Section of Ecology and Evolution, 2320 Storer Hall, University of California, Davis, California 95616-8755, Phone: (530)-752-0676; FAX: (530)-752-1449.

**South Africa** The Center for International Health and Development of the Boston University School of Public Health *Study Coordinator* The Center for International Health and Development (CIHD) of the Boston University School of Public Health (BUSPH), a multidisciplinary research unit with a focus on applied field research, has an opening for an experienced researcher with expertise in epidemiology, demography, and/or data management to coordinate a longitudinal, household-based study in KwaZulu Natal, South Africa. This is a one-year (renewable) project appointment beginning in mid-2003. The CIHD and its collaborating institution in South Africa, the Health Economics and AIDS Research Division (HEARD) of the University of Natal-Durban, have received a five-year grant from the National Institute of Child Health and Development to carry out research on the welfare of AIDS orphans in the Ladysmith District of

KwaZulu Natal. The purpose of the research is to identify and quantify the consequences of a parental death from AIDS for the welfare of AIDS orphans and of other children in the households that care for orphans. Data on economic welfare, health, and educational attainment will be collected through a longitudinal household survey following a cohort of approximately 500 orphaned and non-orphaned children over a period of three years. Community consultation and qualitative research will be integrated into all phases of the study to ensure that both the survey process and the findings are acceptable and valuable for community members, as well as for policy makers. In addition, the project will assist HEARD to build a team of researchers with skills and experience in primary data collection and analysis. On-the-job training for these researchers will be integrated with each stage of the study. Responsibilities of the study coordinator The study coordinator will have primary responsibility for implementing the household survey. Responsibilities in the first year will include:

- In close collaboration with HEARD, establish and manage the field office in Newcastle, in the Ladysmith Region of KwaZulu Natal.
- Build relationships with government officials, school administrators and teachers, NGO staff, and other community leaders and elicit local participation in the design of the study.
- Develop the sampling frame and identify children and households to be surveyed.
- Train the data enumerators.
- Coordinate the local research team.
- Pilot the survey instrument.
- Implement the first full round of the household survey.

The study coordinator will be based in the study area, most likely in the town of Newcastle, which is approximately halfway between Johannesburg and Durban. Requirements: A master's or doctoral degree in public health, economics, education, or a related field; Expertise in epidemiology, demography, biostatistics, or a related field; Long-term experience living and working in a rural community in sub-Saharan Africa; Strong, demonstrated organizational skills and experience managing organizations and/or research projects; Ability to interact with a wide range of stakeholders, including adults and children in rural households, community leaders, government officials, and scientists; A willingness to study the local language in the Ladysmith Region (isiZulu). Interested candidates should send letter and résumé to the Center for International Health, Boston University School of Public Health, 715 Albany Street, 710, Boston, MA, 02118, USA. Applications can be submitted by fax to (617) 414-1261 or by e-mail to [archcih@bu.edu](mailto:archcih@bu.edu). Boston University is an affirmative action / equal opportunity employer. Women and minorities are encouraged to apply.

**Thailand** Center for Education and Population Activities (CEDPA) *Senior Advisor for HIV/AIDS, USAID/Thailand* Located in Bangkok, Thailand. The Senior Technical Advisor for HIV/AIDS programs in the region will provide technical, management and policy advisory services to the HIV/AIDS Health Office (HHO) and to the region. S/he will work with missions, the Asia/Near East Bureau in Washington, the AID/Washington and USAID's implementing partners to: develop regional programs to address the most important epidemiologic needs, focusing on severe sub-epidemics among the most at-risk populations and implement cross-border activities and other programs to deal with migrant populations; provide support to non-presence countries as needed; ensure scientifically sound analysis of the epidemic that goes beyond country borders; assist basic and priority countries' USAID staff to develop programs that are scientifically sound and incorporate USAID policies and lessons learned; and, partner with other donors, multilaterals, foundations and the Global Fund for AIDS, TB and Malaria (GFATM), and assist individual countries to develop proposals for these other funding sources.

**Qualifications:** Advanced degree required, with a specialization in one of the following areas and knowledge of other areas: public health or related field; epidemiology; health program planning and management; behavior change communication; social science research, monitoring and evaluation. Ten years of professional experience managing and implementing public health programs in developing countries, with at least three years' experience in HIV/AIDS, preferably in Asia. Demonstrated ability to work collaboratively and effectively with multiple partners, including developing country program managers and policy makers, NGOs and other implementing partners, other donors and international and regional institutions. Understanding of HIV/AIDS prevention, care, treatment and support programs in resource-poor settings is essential. An understanding of the situation in Asia and in mobile populations is desirable. Strong interpersonal skills and proven ability to work effectively in a multi-cultural setting and as part of a multi-national and multi-disciplinary team. Strong working knowledge of USAID operations, rules, regulations, procedures and policies required; previous working experience with USAID is desirable. Ability to work independently, as a team leader or member, and as a mentor. Must be able to undertake field travel. Applicants must be U.S. Citizens. Qualified candidates send resume and [Biodata Form](#) (MS Word document) with salary history to: Helen Farinella, CEDPA, 1400 16th Street, NW, Suite 100, Washington, DC 20036, E-mail: [CEDPA TAACS Jobs Mailbox](#)

**Zambia** Center for Education and Population Activities (CEDPA) *HIV/AIDS Multisectoral Team Leader, USAID/Zambia* Located in Lusaka, Zambia *Background:*

USAID/Zambia has integrated HIV/AIDS activities throughout the entire Mission program. It has also set up a specific strategic objective (SO-9) to deal with the multisectoral aspects of HIV/AIDS. The SO-9 team will be responsible for: 1) monitoring, evaluating, and reporting on HIV/AIDS activities for the Mission; 2) providing technical assistance in HIV/AIDS to all SO Teams; and 3) managing programs that cut across several SO areas such as Orphans and Vulnerable Children (OVCs), HIV/AIDS Workplace programs, and Cross Border High Risk activities. We anticipate that the SO9 team will have a budget between \$15-\$20 million/year. The SO9 team leader will lead the SO Team and be responsible for providing overall policy, planning, and implementation oversight. High level interactions with Ambassadors, Ministers, and Civic Leaders will be a key role of the team leader. Team Leader will directly supervise a team of five staff and lead a strategic objective team of 12 professionals. **Qualifications:** At least a Master's degree in development studies, management, communications, economics, education, health, social work, business, agriculture, law, natural/biological sciences, environmental studies or related fields. Formal management and/or conflict management training. At least 10 years experience working in development, preferably in HIV/AIDS. Good organizational skills and the ability to work across a number of topical and subject areas. Skills for consensus-building across teams at different levels is essential. Possess team leadership skills, conflict management skills, program management experience and experience with HIV/AIDS programs, including sectors outside of Health. Qualified candidates should send resume and [Biodata Form](#) (MS Word document) with salary history to: Helen Farinella, CEDPA, 1400 16th Street, NW, Suite 100, Washington, DC 20036, E-mail: [CEDPA TAACS Jobs Mailbox](#)

### Positions Available within the United States

**New Mexico** The Department of Pathology at the University of New Mexico Health Sciences Center School of Medicine is seeking a general surgical/cytopathologist. Academic rank and tenure status will be determined based on qualifications and experience. Service responsibilities will consist of general surgical pathology and cytopathology in an academic tertiary care center with a growing regional outside consult service. Minimum Requirements: 1) board certification or board eligibility in Anatomic Pathology, 2) fellowship training in surgical pathology or other surgical pathology subspecialty and/or one year of service-related experience in surgical pathology, 3) experience and/or training in cytopathology, including fine needle aspirations 4) MD or equivalent, 5) eligible to work in the United States. Desirable qualifications: 1) Sub-specialty

expertise in Surgical Pathology in areas such as dermatopathology, gastrointestinal, liver, or breast pathology, 2) willingness or experience training pathology residents in surgical pathology and cytopathology, 3) experience teaching in an undergraduate medical curriculum and 4) evidence of research productivity. For more information about the department visit our web site at: <http://hsc.unm.edu/pathology/>. For best consideration, please apply by **June 1, 2003**, applications will be accepted until the position is filled. To apply please provide a signed cover letter stating professional goals and ability to meet the minimum requirements and desirable qualifications. *Curriculum vitae* and three references must be sent to Nancy Joste, M.D., Co-chief of Anatomic Pathology, c/o LeeAnn Martinez, Faculty Services Representative, Department of Pathology, University Of New Mexico, MSC 08 4640, BMSB Rm 335, Albuquerque, NM, 87131. The University of New Mexico is an Equal Opportunity/Affirmative Action Employer and Educator.

**New Mexico** Department of Biology, University of New Mexico, Albuquerque *Post Doctoral Position In Study Of Immunity in an Invertebrate* The Department of Biology, University of New Mexico, Albuquerque New Mexico, USA. Internal defense capabilities of the gastropod *Biomphalaria glabrata* will be studied through comparative analysis of EST-based gene expression profiles collected from snails after exposure to various immune challenges (schistosome parasites/bacteria). Selected snail sequences will be characterized further using molecular techniques. The candidate for this position must have a PhD in biological sciences and experience with modern molecular biology and computer-aided sequence analysis. Additional computer skills (webpage, database management) are a plus and interests in parasitology and/or comparative immunology are preferred. *Salary:* \$35,000. Appointment intended by no later than mid 2003. Send letter of application including brief statement of research interests, CV and e-mail addresses of three references to Coenraad M. Adema, Department of Biology, University of New Mexico (UNM), NM 87131 USA, phone + 1 505 277 2743, e-mail [coenadem@unm.edu](mailto:coenadem@unm.edu). UNM is an equal opportunity/affirmative action employer and educator.

**Washington, D.C.** Center for Development and Population Activities (CEDPA) *Senior Technical Advisor for Immunization, Research Utilization, & Technology Development & Introduction*, USAID/GH/HIDN/MCH in Washington, D.C. The incumbent in this position will provide technical leadership and managerial assistance for the Global Health Bureau's technical programs in immunization, technology development & introduction, research utilization, and other assigned technical areas related to CS. The successful applicant will: serve as

the Agency's technical leader for immunization activities & USAID support and contributions to GAVI, including coordination & technical guidance for the Agency participation on the GAVI Board and other GAVI activities; serve as lead technical expert for USAID's grant to The Vaccine Fund; serve as a member of the research team in the Maternal and Child Health Division; monitor & analyze USAID program progress; participate occasionally in country-level activities; liaise with other US government agencies & international partners; keep abreast of new developments & emerging issues that affect USAID's health priorities; and visit/provide technical assistance to USAID's overseas missions. *Required qualifications:* Doctorate in the health sciences, a terminal degree in a field related to international public health or equivalent experience in international public health practice, minimum three years of relevant experience in international public health practice, some experience living & working in developing countries; ability to develop, implement, monitor & evaluate donor-funded international assistance, collaborate with multiple partners including UN agencies/multilateral organizations, other bilateral donors, NGOs, universities, foundations, etc. Knowledge of current issues in the areas of international PHN policy, research & program implementation with special reference to immunization programs & vaccines, excellent oral, written communication and computer skills; and ability to spend up to 30% of the time in international travel. For a complete job description visit the website at [www.cedpa.org/jobs/taacs/index.html](http://www.cedpa.org/jobs/taacs/index.html) Send resume/CV and cover letter to: [taacsjobs@cedpa.org](mailto:taacsjobs@cedpa.org). CEDPA, a nonprofit international organization, is under contract with USAID to provide Technical Advisors in AIDS and Child Survival & Basic Education (TAACS) to USAID offices overseas and in Washington. The successful applicant must be a U.S. citizen and will be subject to a government security investigation and must meet eligibility requirements for access to classified information.

## CALENDAR

Provided by Karl Western, MD, DTMH

**International Congress on Toxoplasma -Biology, Clinical Practice and Public Health** (Copenhagen: June 23 – 25, 2003) The Congress can be accessed at [www.toxo2003.ics.dk](http://www.toxo2003.ics.dk)

**BioAfrica Workshop on "Virus Evolution and Molecular and South African HIV/AIDS Treatment Management"** (Durban, South Africa: July 2-6, 2003). Contact: Prof. Sharon Cassol, South African Medical Research Council. E-mail: [scassol@mrc.ac.za](mailto:scassol@mrc.ac.za);

Internet: <http://www.bioafrica.net/africanworkshop.html>.  
**Gordon Research Conference on "Malaria: Epidemiology of Malaria"** (Oxford, UK: July 6-11, 2003). Co-Chairs: Brian Greenwood and Andy Waters. Contact: Gordon Research Conferences, PO Box 984, West Kingston, RI 02892-0984. Phone: 401/783-4011 (ext. 100); Fax: 401/783-7644; E-mail: [grc@grc.org](mailto:grc@grc.org); Internet: <http://www.grc.org/attend.htm>.

**American Society of Microbiology (ASM) Conference on "Bio-, Micro-, and Nanosystems"** (New York City: July 7-10, 2003). Contact: ASM Conferences, 1752 N Street, NW, Washington, DC 20036. Phone: 202/942-9261; Fax: 202/942-9340; E-mail: [conferences@asmusa.org](mailto:conferences@asmusa.org); Internet: <http://www.asmusa.org/mtgssrc/conferences.htm>.

**II International AIDS Society (IAS) on "HIV Pathogenesis and Treatment"** (Paris: July 13-16, 2003). Contact: Ms. Robin Sappe, JCD Conference Secretariat, 4 Villa d'Orleans, 75014 Paris, France. Phone: (33-1)-5394-6011; Fax: (33-1)-4064-2050; E-mail: [ias2003@jdconseil.com](mailto:ias2003@jdconseil.com); Internet: <http://www.ias2003.org>.

**Gordon Research Conference on "Microbial Population Biology"** (Andover, NH: July 20-25, 2003). Contact: Gordon Research Conferences, PO Box 984, West Kingston, RI 02892-0984. Phone: 401/783-4011 (ext. 100); Fax: 401/783-7644; E-mail: [grc@grc.org](mailto:grc@grc.org); Internet: <http://www.grc.org/attend.htm>.

**VIII International Workshop on "Opportunistic Protists"** (Hilo, HI: July 25-29, 2003). Contact: Edna S. Kanishiro, Department of Biological Sciences, University of Cincinnati, Cincinnati, OH 45221-0006. Phone: 513/556-9712; Fax: 513/556-5280; E-mail: [edna.kanishiro@uc.edu](mailto:edna.kanishiro@uc.edu).

**Gordon Research Conference on "Molecular Mechanisms of Microbial Adhesion"** (Newport, RI: July 27-August 1, 2003). Contact: Gordon Research Conferences, PO Box 984, West Kingston, RI 02892-0984. Phone: 401/783-4011 (ext. 100); Fax: 401/783-7644; E-mail: [grc@grc.org](mailto:grc@grc.org); Internet: <http://www.grc.org/attend.htm>.

**LXXIII Annual Meeting of the American Society of Parasitologists (ASP)** (Halifax: August 1-5, 2003). Contact: Dr. David Cone, ASP 2003 Meeting, Department of Biology, Saint Mary's University, Halifax, Nova Scotia B3H 3C3, Canada. Phone: 902/420-5644; Fax: 902/491-8620; E-mail: [david.cone@stmarys.com](mailto:david.cone@stmarys.com).

**VIII International Workshop on "Opportunistic Protists"** (Hilo, HI: July 25-29, **IV Wilderness Medical Society (WMS) World Congress on "Wilderness Medicine"** (Whistler, BC: August 9-13, 2003). Contact: WMS, 3595 East Fountain Boulevard (Suite A-1), Colorado Springs, CO 80910. Phone: 719/572-1372; Fax: 800/967-7494; Internet: <http://www.wms.org>.

**VIII International Course on "Dengue and Dengue Hemorrhagic Fever: Still a Menace to the Americas"** (Havana: August 11-22, 2003). Contact: Prof. Maria G. Guzman, "Pedro Kouri" Institute, Autopista Novia del Mediodia, Km. 6, P.O. Box Mnao 13, Ciudad Habana, Cuba. Phone: (53-7)-202-0450; Fax: (53-7)-202-0633; E-mail: [lupe@ipk.sld.cu](mailto:lupe@ipk.sld.cu).

**Conference on "Malaria: A Global Challenge"** (Prague: August 11-14, 2003). Contact: Amphibia, Ltd., Ostra Agatan 51, 75322 Uppsala, Sweden. E-mail: [Anthony.binder@amphibia.org](mailto:Anthony.binder@amphibia.org).

**European Molecular Biology Organization (EMBO) Workshop on "Molecular and Population of Mosquitoes"** (Koymbari, Crete: August 13-19, 2003). Contact: E-mail: [louis@imbb.forth.gr](mailto:louis@imbb.forth.gr); [http://skonps.imbb.forth.gr/embo\\_meeting](http://skonps.imbb.forth.gr/embo_meeting).

**Cambridge HealthTech Institute (CHI) Conference on "Research, Technologies, and Applications in Biodefense"** (Washington, DC: August 27-28, 2003, 2003). Contact: CHI, 1037 Chesnut Street, Newton Upper Falls, MA 02464. Phone: 617/630-1300; Fax: 617/630-1325; E-mail [chi@healthtech.com](mailto:chi@healthtech.com); Internet: <http://www.healthtech.com>.

**VI American Society for Microbiology (ASM)-European Society of Clinical Microbiology and Infectious Diseases Meeting on "Microbial Epidemiological Markers"** (Les Diablerets, Switzerland: August 27-30, 2003). Contact: ASM Conferences, 1752 N Street, NW, Washington, DC 20036-2904. Phone: 202/942-9261; Fax: 202/942-9340; E-mail: [conferences@asmusa.org](mailto:conferences@asmusa.org); Internet: <http://www.asmusa.org/conferences.htm>.

**Gordon Research Conference on "Tuberculosis Drug Development"** (Oxford, UK: August 31-September 5, 2003). Contact: Gordon Research Conferences, PO Box 984, West Kingston, RI 02892-0984. Phone: 401/783-4011 (ext. 100); Fax: 401/783-7644; E-mail: [grc@grc.org](mailto:grc@grc.org); Internet: <http://www.grc.org/attend.htm>.

**American College of Epidemiology (ACE) Annual Meeting** (Chicago: September 7-9, 2003). Contact: ACE, 1500 Sunday Drive (Suite 102), Raleigh, NC 27607. Phone: 919/861-5573; E-mail: [info@aceepidemiology.org](mailto:info@aceepidemiology.org); Internet: <http://www.aceepidemiology.org>.

**XLIII Interscience Conference on Antimicrobial Agents and Chemotherapy (ICAAC)** (Chicago: September 14-17, 2003). Contact: Meetings Department, ASM, 1752 N Street, NW, Washington, DC 20036. Phone: 202/942-9261; Fax: 202/942-9340; E-mail: [conferences@asmusa.org](mailto:conferences@asmusa.org); Internet: <http://www.asmusa.org>.

**Gordon Research Conference on "Global Aspects of Technology Transfer: Biotechnology"** (Big Sky, MT: September 21-26, 2003). Contact: Gordon Research Conferences, PO Box 984, West Kingston, RI

02892-0984. Phone: 401/783-4011 (ext. 100); Fax: 401/783-7644; E-mail: [grc@grc.org](mailto:grc@grc.org); Internet: <http://www.grc.org/attend.htm>.

**XVI Congreso Latinoamericano de Parasitologia FLAP** (La Paz Bolivia: Octubre 1-3, 2003) The Hotel Radisson, Contact [www.flap.org.bo](http://www.flap.org.bo) Postal address 446 La Paz Bolivia. Telefono / Fax (591-2)2227184, Dr. Rene Angles Presidente FLAP

**"Biofilms" American Society of Microbiology (ASM) Conference** (Victoria, British Columbia, Canada: November 1-6, 2003). Contact: ASM Conferences, 1752 N Street, NW, Washington, DC 20036. Phone: 202/942-9261; Fax: 202/942-9340; E-mail: [conferences@asmusa.org](mailto:conferences@asmusa.org); Internet: <http://www.asmusa.org/mtgssrc/conferences.htm>.

**IV International Conference on "AIDS in India"** (Chennai: November 9-12, 2003). Contact: Prof. N.M. Samuel. E-mail: [demaids@yahoo.com](mailto:demaids@yahoo.com).

**CXXXI American Public Health Association (APHA) Annual Meeting** (San Francisco: November 16-20, 2003). Contact: Coordinator, APHA Annual Meeting, APHA, 800 I Street, NW, Washington, DC 20001. Phone: 202/777-2477; Fax: 202/777-2530; E-mail: [donna.wright@apha.org](mailto:donna.wright@apha.org); Internet: <http://www.apha.org>.

**VII International Congress on "AIDS in Asia and the Pacific" (ICAAP7)** (Kobe, Japan: November 27-December 1, 2003). Contact: 7<sup>th</sup> ICAAP Secretariat, c/o Convention Linkage, Inc., Edobori-KN Building, 1-25-29 Edobori, Nishi-ku, Osaka 550-0002, Japan. Phone: (81-6)-6225-2077; Fax: (81-6)-6225-2079; E-mail: [icaap7@secretariat.ne.jp](mailto:icaap7@secretariat.ne.jp).

**IV Seminar on "Food- and Water-Borne Parasitic Zoonoses"** (Bangkok: December 2-4, 2002). Contact: Dean, Faculty of Tropical Medicine, Mahidol University, 420/6 Rajvithi Road, Bangkok 10400, Thailand. Phone: (66-2)-246-9000; Fax: (66-2)-246-9013; E-mail: [deamtm@mahidol.ac.th](mailto:deamtm@mahidol.ac.th); Internet: <http://www.tm.mahidol.ac.th>.

**VIII World STI/AIDS Congress/XIV Panamerican STI/AIDS Contress** (Punta del Este, Uruguay: December 2-5, 2003). Contact: Local Secretariat, STI-AIDS 2003, c/o Congresos & Reuniones. Cerrito 307, Montevideo CP 11000, Uruguay. Phone: (598-2)-916-0900; Fax: (598-2)-916-8902; E-mail: [stiaids@rohssa.com](mailto:stiaids@rohssa.com); Internet: <http://www.congresos-rohr.com>.

**Global Forum for Health Research (GFHR) Annual Forum** (Geneva: December 2-5, 2003). Contact: Louis Currat, Executive Secretary, GFHR, Geneva, Switzerland. Internet: <http://www.globalforumhealth.org>.

**C American Society of Tropical Medicine and Hygiene (ASTMH) Annual Meeting** (Philadelphia: December 3-7, 2003). Contact: ASTMH, 60 Revere Drive, Suite 500, Northbrook, Illinois, 60062. [astmh@astmh.org](mailto:astmh@astmh.org); Phone: 847-480-9592; Fax: 847-

480-9282; web: [www.astmh.org](http://www.astmh.org).

**American Society of Microbiology (ASM) Conference on "DNA Repair and Mutagenesis"**

(Southampton, Bermuda: December 7-13, 2003). Contact: ASM Conferences, 1752 N Street, NW, Washington, DC 20036. Phone: 202/942-9261; Fax: 202/942-9340; E-mail: [conferences@asmusa.org](mailto:conferences@asmusa.org); Internet: <http://www.asmusa.org/mtgsrc/conferences.htm>.

**2004**

**XI International Conference on "Infectious Diseases"** (Cancun, Mexico: March 4-7, 2004). Contact: International Society for Infectious Diseases (ISID), 181 Longwood Avenue, Boston, MA 02115. Phone: 617/277-0551; Fax: 617/731-1541; E-mail: [info@isid.org](mailto:info@isid.org); Internet: <http://www.isid.org>.

**XIII International Symposium on "HIV and Emerging Infectious Diseases"** (Toulon: June 3-5, 2004). Contact: Alain Lefeuvre, AVPS, Department of Infectious Diseases, Chalucet Hospital, 83000 Toulon, France. Phone: (33-4)-9422-7740; Fax: (33-4)-9492-6747; E-mail: [hiv2003@club-internet.fr](mailto:hiv2003@club-internet.fr); Internet: <http://www.avps.org>.

**XIV European Congress of "Clinical Microbiology and Infectious Diseases (ECCMID)"** (Prague: May 1-4, 2004). Contact: 14<sup>th</sup> ECCMID 2004, ESCMID Executive Office, P.O. Box 6, CH-4005 Basel, Switzerland. Phone: (41-61)-686-7799; Fax: (41-61)-686-7798; E-mail: [info@escmid.org](mailto:info@escmid.org); Internet: <http://www.escmid.org>.

**XIII International Centers for Tropical Disease Research Annual Meeting** (Bethesda, Maryland: May 17-21, 2004) Contact Mitzi Sereno, National Institute of Allergy and Infectious Diseases, [msereno@niaid.nih.gov](mailto:msereno@niaid.nih.gov); Phone: 301 496 2544; Fax 301 402 0659.

**CI American Society of Tropical Medicine and Hygiene Annual Meeting** (Miami Beach, FL: November 7-11, 2004). Contact: ASTMH, 60 Revere Drive, Suite 500, Northbrook, IL 60062, fax 847/480-9282, email [astmh@astmh.org](mailto:astmh@astmh.org).

**CXXXII American Public Health Association (APHA) Annual Meeting**

(Washington, DC: November 7-11, 2004). Contact: Coordinator, APHA Annual Meeting, APHA, 800 I Street, NW, Washington, DC 20001. Phone: 202/777-2477; Fax: 202/777-2530; E-mail: [donna.wright@apha.org](mailto:donna.wright@apha.org); Internet: <http://www.apha.org>.

**2005**

**CXXXIII American Public Health Association (APHA) Annual Meeting** (New Orleans: November 6-10, 2005). Contact: Coordinator, APHA Annual Meeting, APHA, 800 I Street, NW, Washington, DC 20001. Phone: 202/777-2477; Fax: 202/777-2530; E-mail: [donna.wright@apha.org](mailto:donna.wright@apha.org); Internet: <http://www.apha.org>.

**CII American Society of Tropical Medicine and Hygiene Annual Meeting** (Washington, DC: December 11-15, 2005). Contact: ASTMH, 60 Revere Drive, Suite 500, Northbrook, IL 60062, fax 847/480-9282, email [astmh@astmh.org](mailto:astmh@astmh.org).

**2006**

**XI International Congress of Parasitology (ICOPA)** (Glasgow: August 2006). Host: British Society of Parasitology. Contact: Dr. D. Rollinson, Natural History Museum, Cromwell Road, London SW7 5BD, UK. Phone: (44-20)-7492-5181; Fax: (44-20)-7942-5518; E-mail: [d.rollinson@nhm.ac.uk](mailto:d.rollinson@nhm.ac.uk).

**CXXXIV American Public Health Association (APHA) Annual Meeting** (Boston: November 12-16, 2006). Contact: Coordinator, APHA Annual Meeting, APHA, 800 I Street, NW, Washington, DC 20001. Phone: 202/777-2477; Fax: 202/777-2530; E-mail: [donna.wright@apha.org](mailto:donna.wright@apha.org); Internet: <http://www.apha.org>.

**2007**

**CXXXV American Public Health Association (APHA) Annual Meeting** (Washington, DC: November 4-8, 2007). Contact: Coordinator, APHA Annual Meeting, APHA, 800 I Street, NW, Washington, DC 20001. Phone: 202/777-2477; Fax: 202/777-2530; E-mail: [donna.wright@apha.org](mailto:donna.wright@apha.org); Internet: <http://www.apha.org>.