

IEIP Brief

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An Update on Activities at the International Emerging Infections Program, Thailand

It is with a great deal of sadness that we report the death of our friend and colleague, Dr. Tamara Fisk. Tami died at home on March 4, after a long and courageous battle with melanoma. Tami was with us, in the trailer, at the very beginning of IEIP, and she continued to lead the febrile illness study through the next 3 years, splitting her time between IEIP and the infectious disease faculty at Emory University. Among her many accomplishments, she helped to identify a comprehensive range of pathogens responsible for fever in Thailand, assessed the effectiveness of a variety of control measures for leptospirosis, highlighted the strengths and weaknesses of a half dozen rapid diagnostic tests, and quantified the burden of zoonotic infections among children. But we will miss her most for her personal warmth, her faith, and her unusual talent for reaching across cultural barriers. – *Scott Dowell*



Dr. Tamara Fisk will be missed dearly by IEIP.

Surveillance

Both surveillance provinces are now under the administrative coordination of the Bureau of Epidemiology. The IEIP Steering committee at the Thai MOPH decided that combining both provinces under the same financial support and administrative system would greatly increase the efficiency of the system. Beginning February 14, 2005, Sa Kaeo was added to the cooperative agreement that has been funding Nakhon Phanom.

Research

The study of the infectious causes of fever in Thailand is nearing the end of its third and final year of enrollment. On track to enroll an unbiased sample of some 2300 febrile patients and 700 controls, it will have accumulated a valuable database and specimen bank, with 97% of patients providing acute and convalescent sera, blood clots, urine, and other specimens. We plan a final push to complete the laboratory testing and clean out the bulging freezers over the coming months, and would welcome proposals for collaborative investigations.

Outbreak Response

On December 26, a massive earthquake occurred off the coast of Indonesia. Within hours a tsunami had struck many countries in Southeast Asia and Africa causing widespread destruction and devastation (picture, left). Under the leadership of Dr. Rob Linkins, CDC staff in Thailand responded quickly, conducting a rapid needs assessment and other assistance as needed. IEIP staff member, Dr. Somsak Thamthitawat, worked closely with staff from the Bureau of Epidemiology to implement active surveillance for infectious diseases. No large outbreaks have been identified.



Post-tsunami devastation in Phuket, Thailand.

Training

IEIP, with the support of the PneumoADIP, has launched a full-scale effort to strengthen microbiology laboratory capacity, adding a new dimension to the pneumonia surveillance network. Thai clinicians will soon be able to request sensitive blood cultures as clinically indicated for patients with suspected pneumonia and children with possible sepsis. Automated blood culturing systems in the provincial laboratories will form the hub of a sensitive, high-throughput system, supported by specimen transport networks designed to move samples efficiently from the district to the provincial hospitals. The new capacity will help define the population-based incidence of invasive bacterial diseases such as *S. pneumoniae*, offering an opportunity to improve clinical care and to estimate the potential benefit of introducing pneumococcal vaccines to Thailand. Project partners have helped train laboratory technicians in the essentials of running a high-quality microbiology laboratory, and will soon complete a tireless campaign to engage staff in all 20 surveillance hospitals in making the best use of the new capabilities. Visiting Hubert Fellow Jessica Lin lent her assistance by evaluating clinicians' responses to the orientation sessions, an important step in shaping the next rounds of training, and designing educational materials in response to their concern.