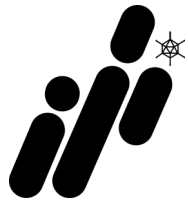


# Pediatric Infectious Diseases Society

**Pediatric Infectious Diseases Society**  
**May 3–6, 2003 – Washington State Convention and Trade Center**

Saturday, May 3	Sunday, May 4	Monday, May 5	Tuesday, May 6
<p><b>9:30am – 11:30am</b>  <b>PAS Educational Workshops</b></p> <hr/> <p><b>12:00 noon – 3:00pm</b>  <b>Mini Courses &amp; Educational Workshops</b></p> <p><b>3:15pm – 5:15pm</b>  <b>PAS/PIDS Original Science Abstracts</b>            ~ Infectious Diseases and/or Neonatal Infectious Diseases Abstract Session</p> <p><b>5:15pm – 7:15pm</b>  <b>PAS/PIDS Poster Session I, Exhibits &amp; PAS Opening Reception</b>            ~ Neonatal Infectious Diseases and/or Infectious Diseases Posters I</p>	<p><b>7:00am – 8:00am</b>  <b>PAS Meet the Professors Breakfast</b>            TICKETED EVENT            ~ Infectious Diseases</p> <p><b>8:00am – 10:00am</b>  <b>PAS/PIDS Topic Symposium</b>            ~ Smallpox and Bioterrorism Preparedness Planning</p> <hr/> <p><b>11:45pm – 1:45pm</b>  <b>PAS/PIDS Poster Session II &amp; Exhibits</b>            ~ Neonatal Infectious Diseases and/or Infectious Diseases Posters II</p> <p><b>2:30pm – 4:00pm</b>  <b>PAS/PIDS State of the Art Plenary</b>            ~ Neonatal Herpes Simplex Virus (HSV) Infections: Current Controversies</p> <p><b>4:15pm – 6:15pm</b>  <b>PAS/PIDS Topic Symposium</b>            ~ Current Research Issues in STDs and Adolescents: Chlamydia, Genital Herpes and Human Papillomavirus Infection</p>	<p><b>8:00am – 10:00am</b>  <b>PAS/PIDS Original Science Abstracts</b>            ~ Neonatal Infectious Diseases and/or Infectious Diseases Abstract Session</p> <hr/> <p><b>1:00pm – 2:45pm</b>  <b>March of Dimes Prize in Developmental Biology Lectures</b></p> <p><b>3:00pm – 5:00pm</b>  <b>PAS/PIDS Topic Symposium (PIDS Symposium)</b>            ~ Vaccines—2003</p> <p><b>5:00pm – 6:00pm</b>  <b>PIDS Business Meeting</b></p> <p><b>6:15pm</b>  <b>PIDS Annual Dinner &amp; Awards Banquet</b></p>	<p><b>8:00am – 10:00am</b>  <b>PAS/PIDS Original Science Abstracts</b>            ~ Related Infectious Diseases Abstract Session</p> <p><b>10:15am – 11:45am</b>  <b>PAS/PIDS State of the Art Plenary</b>            ~ New Directions in Newborn and Pediatric Sepsis and Multiple Organ Failure</p>



Join us in Seattle, where the Pediatric Infectious Diseases Society (PIDS) and the Pediatric Academic Societies (PAS) will host tightly aligned programs again this year. PIDS symposia, joint symposia and original science will all be held at the Washington State Convention and Trade Center. Contact Christy Taylor at the PIDS Office for information regarding the PIDS Dinner and Awards program on Monday evening, May 5<sup>th</sup>.

### Registration and Contact Information

As in the past, there will be a single registration fee for the meeting set at the PAS registration fee schedule. Register by March 7<sup>th</sup> for substantial savings. Refer to page 69 of this guide for details.

### Housing Information

PIDS attendees may reserve accommodations at any of the hotels identified on page 66. Housing may be reserved online at [www.pas-meeting.org](http://www.pas-meeting.org) or refer to the housing form on page 68.

### Contact for other PIDS information:

Christy Taylor, PIDS Staff Manager  
PIDS Headquarters  
66 Canal Center Plaza, Suite 600  
Alexandria, VA 22314  
Phone: 703-299-6764 Fax: 703-299-0473  
Email: [ctaylor@idsociety.org](mailto:ctaylor@idsociety.org)  
URL: [www.pids.org](http://www.pids.org)

### Contact for housing, registration and general information:

PAS Program Office  
3400 Research Forest Dr., Ste. B-7  
The Woodlands, TX 77381  
Phone: 281-419-0052 Fax: 281-419-0082  
Email: [info@pas-meeting.org](mailto:info@pas-meeting.org)  
URL: [www.pas-meeting.org](http://www.pas-meeting.org)

### Continuing Education Credit

Continuing Education is through the PAS. See page 4 for complete information.

## Saturday, May 3, 2003

9:30am – 11:30am

### PAS Educational Workshops

See the PAS Program, beginning on page 32 for details.

12:00pm – 3:00pm

### Mini Courses & Educational Workshops

See the PAS Program, beginning on page 32 for details.

3:15pm – 5:15pm

### Infectious Diseases and/or Neonatal Infectious Diseases Abstract Session PAS/PIDS Original Science Abstracts

5:15pm – 7:15pm

### Neonatal Infectious Diseases and/or Infectious Diseases Posters I Poster Session I, PAS Opening Reception & Exhibits PAS/PIDS Original Science Abstracts

## Sunday, May 4, 2003

7:00am – 8:00am

### Meet the Professor Breakfasts

#### TICKETED EVENT

- Advance Sign Up Required.
- Attendance is limited to maintain the intimate interactive format and only 25 tickets will be assigned to each of these special sessions. These sessions will fill quickly.
- To register, use the registration form on page 69

### 4052 Infectious Diseases

#### PAS Meet the Professor Breakfast

#### The Challenges of Clinical Research in Infectious Diseases; The Good, The Bad and the Ugly

*Kathryn M. Edwards, Vanderbilt University School of Medicine, Nashville, TN*

In this session the speaker will use a randomized placebo controlled vaccine efficacy trial to demonstrate the needed elements of a well conducted clinical trial. In addition to discussing the fundamental elements of a clinical trial, the speaker will also discuss the practical implications of clinical research in one's career, how one integrates clinical studies into the broader context of academic life and how one prepares for such a career. Ample time for discussion will be available to the participants about all phases of the presentation.

8:00am – 10:00am

### 4102 Smallpox and Bioterrorism Preparedness Planning

#### PAS/PIDS Topic Symposium

*Chair: John F. Modlin, Children's Hospital at Dartmouth/Dartmouth Medical School, Lebanon, NH*

This program will give a "pediatric perspective" to smallpox bioterrorism preparedness planning efforts now under way within federal, state and local public health agencies. It will include a review of smallpox epidemiology, clinical disease, smallpox (vaccinia) vaccine and lessons learned from the WHO Smallpox Eradication Program. The nature of the current threat and responses to that threat will be discussed.

#### Smallpox Epidemiology and Clinical Disease

*Walter A. Orenstein, National Immunization Program, Centers for Disease Control and Prevention, Atlanta, GA*

#### Control and Eradication of Smallpox

*J. Michael Lane, Emory University School of Medicine, Atlanta, GA*

#### Smallpox (Vaccinia) Vaccine: Efficacy and Complications

*John M. Neff, Children's Hospital and Regional Medical Center, Seattle, WA*

#### Smallpox Bioterrorism Preparedness Planning

*John F. Modlin, Children's Hospital at Dartmouth/Dartmouth Medical School, Lebanon, NH*

*Sponsored jointly with the Pediatric Infectious Diseases Society and the Pediatric Academic Societies*

11:45am – 1:45pm

### Neonatal Infectious Diseases and/or Infectious Diseases Posters II PAS Poster Session II & Exhibits PAS/PIDS Original Science Abstracts

2:30pm – 4:00pm

### 4731 Neonatal Herpes Simplex Virus (HSV) Infections: Current Controversies

#### PAS/PIDS State of the Art

*Chair: Richard J. Whitley, University of Alabama at Birmingham, Children's Hospital, Birmingham, AL*

This State of the Art Plenary will be of interest to practitioners, generalists, neonatologists and infectious diseases specialists and will explore current controversies in the diagnosis and management of neonatal HSV infection. Speakers will present maternal factors that may allow interruption of maternal-fetal transmission of the virus, the latest strategies for diagnosis and treatment of newborns, and the potential prevention

of neonatal HSV by use of pre-emptive antiviral therapy and vaccines.

#### **Maternal-Fetal Transmission: Risks and Opportunities**

Ann M. Arvin, Stanford University School of Medicine, Stanford, CA

#### **Diagnosis and Treatment of Neonatal HSV**

Richard J. Whitley, University of Alabama at Birmingham, Children's Hospital, Birmingham, AL

#### **Prevention of Neonatal HSV Infection: Are Vaccines the Answer?**

Lawrence R. Stanberry, University of Texas Medical Branch, Galveston, TX

#### **Discussion**

Questions from the Audience and Answers from the Experts

#### **Audience Moderators:**

Gail J. Demmler, Baylor College of Medicine, Houston, TX and Larry Givner, Wake Forest University, Winston-Salem, NC

*Sponsored jointly with the Pediatric Infectious Diseases Society and the Pediatric Academic Societies*

4:15pm – 6:15pm

#### **4850 Current Research Issues in STDs and Adolescents: Chlamydia, Genital Herpes and Human Papillomavirus Infection**

PAS/PIDS Topic Symposium

*Chair: Donald E. Greydanus, Michigan State University Kalamazoo Center for Medical Studies, Kalamazoo, MI*

This session reviews current research principles in selected sexually transmitted diseases. First, clinical epidemiology and prevention issues for *Chlamydia trachomatis* are considered, emphasizing rescreening (delayed retesting of infected persons), novel strategies for assuring partner treatment and the role of male screening in disease control. Then, new directions in public health and prevention aspects of genital herpes are outlined. An update of the HSV vaccine is presented. Finally, human papillomavirus (HPV) is considered, including new recommendations in human papillomavirus testing, triage of abnormal Pap smears and the current status of HPV vaccines. Questions are encouraged from the audience.

#### **Chlamydia**

H. Hunter Handsfield, University of Washington and Public Health - Seattle & King County, Seattle, WA

#### **Genital Herpes**

Anna Wald, University of Washington Virology Research Clinic, Seattle, WA

#### **Human Papillomavirus Infection**

Anna-Barbara Moscicki, Glaser Pediatric Research Network, University of California, San Francisco, CA

#### **Epidemiology of STDs in Children and Adolescents: Perspectives from the World Health Organization**

Nathalie Broutet, World Health Organization, Geneva, Switzerland

*Sponsored jointly with the Pediatric Infectious Diseases Society and the Pediatric Academic Societies*

### Monday, May 5, 2003

8:00am – 10:00am

#### **Neonatal Infectious Diseases and/or Infectious Diseases Abstract Session**

PAS/PIDS Original Science Abstracts

1:00pm – 2:45pm

#### **March of Dimes Prize in Developmental Biology Lectures**

3:00pm – 5:00pm

#### **5654 Vaccines—2003 PAS/PIDS Topic Symposium**

*Chair: Stanley A. Plotkin, Aventis Pasteur and the University of Pennsylvania, Doylestown, PA*

This symposium covers four issues in vaccination. The American Academy of Pediatrics and CDC currently are moving toward a recommendation for universal annual vaccination of infants with killed or live influenza vaccine. Why is this? Now that Rotashield is off the market, a new rotavirus vaccine is needed and may be on the way. Despite good protection of children by vaccination, pertussis infections are rising in adolescents and adults. Can they be controlled? Recent disruptions in vaccine supply have caused pediatricians significant problems. What are the causes and solutions?

#### **Universal Influenza Vaccination in Children**

W. Paul Glezen, Baylor College of Medicine, Houston, TX

#### **New Rotavirus Vaccines: After Rotashield**

Paul A. Offit, Children's Hospital of Philadelphia, Philadelphia, PA

#### **Adolescent and Adult Pertussis Vaccination**

Kathryn M. Edwards, Vanderbilt University School of Medicine, Nashville, TN

#### **Vaccine Shortages: Causes and Effects**

Walter A. Orenstein, National Immunization Program, Centers for Disease Control and Prevention, Atlanta, GA

*Sponsored jointly with the Pediatric Infectious Diseases Society and the Pediatric Academic Societies*

5:00pm – 6:00pm

#### **PIDS Business Meeting**

6:15pm

#### **5955A PIDS Annual Dinner & Awards Banquet**

Grand Hyatt Seattle

### Tuesday, May 6, 2003

8:00am – 10:00am

#### **Related Infectious Diseases Abstract Session**

PAS/PIDS Original Science Abstracts

10:15am – 11:45am

#### **6302 New Directions in Newborn and Pediatric Sepsis and Multiple Organ Failure**

*PAS/PIDS State of the Art*

*Chair: Joseph A. Carcillo, University of Pittsburgh School of Medicine, Pittsburgh, PA*

Severe sepsis is an important and relatively neglected public health problem in the United States. National estimates show that more children die with severe sepsis than die with cancer. Despite improving national outcomes (10% mortality in 1995 and 9% mortality rate in 1999), the burden of severe sepsis continues to increase in the US with an estimated associated annual cost of 4 billion dollars.

There is cause for continued optimism in the field. In 1968, 96% of children with severe gram negative sepsis died. Early recognition and aggressive fluid resuscitation has been credited with improved outcomes from septic shock (St. Mary's Hospital reported a 5% mortality rate in meningococcal septic shock/purpura fulminans, and investigators in Vietnam reported a 0% mortality rate in Dengue shock in 2001). Unlike adults, who die of vascular failure, newborns and children who die of fluid refractory septic shock do so from cardiac failure. The American College of Critical Care Medicine published age-specific evidence-based guidelines for management of newborn and pediatric shock in 2002.

Understanding of the pathophysiology and potential treatment of sepsis-induced multiple organ failure is also rapidly advancing. Thrombocytopenia associated multiple organ failure has been further characterized as a thrombotic microangiopathy. Twenty percent of these patients have disseminated intravascular coagulation pathophysiology (unopposed tissue factor activity and consumptive coagulopathy), but 80% have thrombotic thrombocytopenic purpura pathophysiology (increased ultra large vWF multimers and decreased vWF cleaving protease activity). This has great



therapeutic implications because recombinant technology is rapidly producing human coagulation-related proteins (e.g., activated protein C, vWF cleaving protease, tissue plasminogen activator), and prolonged plasma exchange therapy is a proven therapy that reverses TTP pathophysiology. Up to 80% of children who die with sepsis do so with multiple organ failure and uneradicated infection. Primary and acquired immunodeficiency states contribute to most of these poor outcomes. Prolonged neutropenia, lymphopenia, and hypogammaglobulinemia are readily measured in the clinical laboratory but research measurements (monocyte HLA-DR expression, and ex vivo whole blood TNF a response to LPS stimulation) are required to diagnose prolonged monocyte deactivation and immunoparalysis. Diagnosis of these immunodeficiency syndromes can have great therapeutic implications as tapering of immune suppression and use of recombinant growth factors (e.g., G-CSF, GM-CSF, interferon) and prophylaxis strategies can improve outcome in these children.

**Newborn and Pediatric Sepsis and Multiple Organ Failure**

Joseph A. Carcillo, University of Pittsburgh School of Medicine, Pittsburgh, PA

**Hypodynamic Septic Shock: The Heart as an Innate Immune Response Organ**

Brett P. Giroir, University of Texas Southwestern Medical Center, Dallas, TX

**Thrombocytopenia-Associated Multiple Organ Failure: The Role of ADAMTS13**

Trung Nguyen, University of Pittsburgh School of Medicine, Pittsburgh, PA

**Prolonged Monocyte Deactivation and Unresolving Multiple Organ Failure: A T<sub>H</sub>2-Like Paradigm**

Mark Hall, Ohio State University School of Medicine, Columbus, OH

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Visit  
the  
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at  
[www.pids.org](http://www.pids.org)

