



# 5<sup>th</sup> EUROPEAN CONGRESS OF CHEMOTHERAPY AND INFECTION

17-20 OCTOBER 2003 RHODES - GREECE

**FESCI**



HELLENIC SOCIETY  
FOR INFECTIOUS DISEASES



HELLENIC SOCIETY  
FOR CHEMOTHERAPY



HELLENIC SOCIETY  
FOR MICROBIOLOGY



*Programme  
Abstract Book*

## Welcome to Greece



Dear Colleagues and Friends,

It is my very great pleasure and privilege to welcome you and thank you all from Europe and outside Europe, North and South America, the Far East and from Africa for attending the 5<sup>th</sup> European Congress of Chemotherapy and Infection.

The Congress is held in the Aegean island of Rhodes where the ancient and medieval culture meet our world's history and civilization.

For the last year we worked hard to prepare a high quality and well-balanced programme and we believe that you will exploit the opportunity to exchange thoughts and scientific information presented by the fore-runners in our field. We also hope that you will discover the legendary Greek hospitality, along with the historical venues of the island, which will make your visit to Rhodes unforgettable.

On behalf of Greece, I welcome you to my country and I wish you to enjoy every moment of your stay in Rhodes Island.

**Professor Helen Giamarellou**  
President ECC-5

We are very pleased that our affiliated societies in the Hellenes have been deeply involved in organising this Congress. The Greek colleagues are well experienced in putting on high quality meetings and ensure that every Congress held in Greece is a memorable event in our lives.

The European Societies affiliated to the International Society of Chemotherapy are rightly proud of producing the Fifth in this series of Congresses. The programme is, as ever, of outstanding scientific merit and the ISC shares the pride in the continuing success of the European Congresses of Chemotherapy.



**Bernard Rouveix**  
President FESCI



**Jean-Claude Pechère**  
President, ISC

## Organising Committee

(The Congress is a collaboration among European Societies of Chemotherapy and Infection (FESCI) and hosted by the Hellenic Societies for Infectious Diseases, for Chemotherapy and for Microbiology)

### Honorary President of ECC-5

GK Daikos (Athens)

### Organising Committee Officers

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patients were registered, with annual average morbidity of 20 on 100,000 inhabitants. The highest morbidity was in 1992 (44.2). In some districts the morbidity was extremely high (Radovis 870, Valandovo 725 on 100,000). In some villages over 10% of population got brucellosis. The disease had professional character. Rural population was affected four times more than urban, males get sick three times more than females. The highest morbidity was in group over 50 years old. The contact route of infection was more frequent than alimentary. The disease was exceptionally seasonal, with maximum in May. Conclusion: After the take in the brucellosis in the Republic of Macedonia, the disease spread all over the country and became an endemic disease.

Sat 130

**Clinical and epidemiological aspects in childhood brucellosis**

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The findings in 48 (19%) children out of a total of 250 patients with brucellosis treated at the Clinic for Infectious Diseases in Skopje during 1999-2002 are presented. Sixty percent were males, 54% infected through direct contact. In 65% duration of illness before therapy was up to 1 month. Clinical form was acute in 77% cases, sub-acute in 23%. Predominant symptoms were: fever in 79% patients, arthralgia in 63%, malaise and sweating in 50%. Hepatomegaly was present in 63% of the patients, 19% were anaemic. Peripheral arthritis was noted in 58%, and up to 33% manifested as monoarticular arthritis. Hip was the most affected joint (86%). Brucella hepatitis was noted in 40% of the examinees. In 63% children the disease was moderate; in 14% it was severe. Regimen with doxycycline/rifampin/ cotrimoxazole for 45 days was carried out in 69%. For the rest of the group different therapeutical protocols were used. Relapses were detected in 12.5% cases. Complete recovery was achieved in 85% and 15% manifested transiting postbrucella arthralgia. Early detection of illness in children living in endemic areas as well as adequate therapy is crucial for successful treatment with no sequelae.

Sat 131

**Epidemiology of human brucellosis in western Greece and the importance of the ongoing control of animal brucellosis**

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Brucellosis continues to be an important source of morbidity primarily in the Mediterranean region. The purpose of this study was to determine the incidence of brucellosis in a rural area in Western Greece before and after the implementation of a brucellosis control programme and to examine, if there is an effect on the incidence of human brucellosis. The study comprised all newly diagnosed human brucellosis cases between January 1997 and January 2003. In the time period from January 1999 till August 2002 a vaccination programme against animal brucellosis was realised by the Veterinary Service of the Ministry of Agriculture and included the gradually vaccination of all not pregnant female sheep aged over 3 months in the specific region. Descriptive methods were used to calculate age- and gender specific incidence rates before and after the implementation of the vaccination programme. The overall incidence was found to be 1140/100,000 per year in the period 1997-1999, while for the period 2000-2003 there was a significant fall to 160 cases respectively. The study reveals an overall decline in the incidence of human brucellosis after the vaccination programme and underlines the importance of an ongoing control of animal brucellosis in the prevention of human brucellosis

Sat 132

**Brucellosis and the genitourinary system**

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Infection with the microorganisms of the genus *Brucella* that is transmitted to humans by domesticated animals, is endemic in Albania, as it is in the Balkan region. Various genitourinary infections have been attributed to *Brucella*, including unilateral or bilateral epididymo-orchitis. We describe 12 cases of genitourinary involvement in the course of brucellosis, presenting as unilateral (10 cases) or bilateral (2 cases) epididymo-orchitis, seen in our hospital from 1997-2001. Majority of cases had a history of professional exposure to a possible source of infection. Clinical manifestations included systemic symptoms (fever, sweating, arthralgia) and local signs (scrotal oedema). Laboratory results included: pyuria (92%), leucocytosis (58%), increase of sedimentation rate (100%). Results of agglutination test for were positive in all cases. Antimicrobial treatment included combination of antibiotics: doxycycline and rifampin (75%), or doxycycline and aminoglycoside (25%) for 6 weeks.

Sat 133

**Brucellosis among medical patients of a Greek urban hospital in a six year period**

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Aim: To assess the incidence of brucellosis among the admissions of a Greek urban hospital in a six year period Patients-methods: All patients on anti-infectives had all their epidemiology, clinical and bacteriology data entered in PC, by EPI5-Info (WHO/CDC, 1993) programme. We screened these data for indication or discharge diagnosis of brucellosis from 1997 to 2002, as well as the notification forms filed. Re-admission of the same patient, for any reason, was not included Results: There were 24 (M: 10, F: 14, m. age: 51.9±16.9 yrs) patients out of 9038 admissions (0.26% per year) with the diagnosis of brucellosis. Most common symptom on admission was fever, followed by malaise, weight loss or bone/joint aches. Animal contact or unpasteurised milk/cheese consumption was elicited in history of almost all. In 13/20 patients (65%) blood cultures yielded *Brucella* (12 *meliensis*, 1 *abortus*) Mean stay: 9.8 days, all favourable outcome, retained at long term follow-up for most, as in four bone involvement was present. There was one case of reversible cotrimoxazole related agranulocytosis among them. Conclusion: Brucellosis formed a small, but considerable, part of medical admissions. Prompt clinical suspicion by history and establishing diagnosis by appropriate means, therapy, and prolonged follow-up.

Sat 134

**Alterations of serum calcium and protein concentration in patients with acute brucellosis during chemotherapy**

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Purpose: Twenty patients suffering from acute brucellosis were prospectively assayed for serum calcium, albumin, total proteins, C reactive protein (CRP) and anti-*Brucella* antibody titre at time of diagnosis, one month and two months after chemotherapy had been started (doxycycline plus rifabicine). Twenty healthy persons living in a non-endemic area used as controls. Results: At time of diagnosis, the serum ionised calcium was (mean (95% C.I.)), 2.52 (2.43-2.61) mmol/l, and total serum proteins 7.42 (7.24-7.60) g/dl, both significantly higher than controls (p<0.001). Calcium and total proteins concentration remained high one and two months after the onset of chemotherapy. On the other hand, albumin concentration was lower in patients with acute brucellosis (3.91, 3.76-4.06 mg/dl) when compared to controls (p<0.01) but restored after two months. CRP levels were elevated in brucellosis patients (22.12, 12.36-31.89) at time of diagnosis and subsequently decreased to normal levels (p>0.05).