



# 9<sup>th</sup> AMIT INTERNATIONAL CONGRESS

## Topics in Infectious and Tropical Diseases



**March 16<sup>th</sup>-17<sup>th</sup>, 2023**

Castiglioni Palace - Corso Venezia 47 - Milan

**Presidents**

Marco Tinelli, Antonella Castagna

[www.amit-italia.it](http://www.amit-italia.it)

# The cover

The AMIT Congress traditionally displays on the cover some ancient documents from a private collection which represents important moments in the history of Medicine and of Infectious Diseases. The choice of displaying historical prints, edicts, etc. aims to remind us how close are the links among what happened in the past, what is going on now and what may occur again in the future. Typical examples are epidemics which unfortunately, even in a technology era, recur periodically. In these periods methods of infections transmission containment are often the same already described in past centuries. Historical documents are like an archive of memento to remember to us and governments not to forget what has already happened and which must not be repeated in the future.



## «Lignum Febrium-The Tree of the Fever»

This figure represents «*Lignum Febrium-The Tree of the Fever*» from the book «*Therapeutice specialis ad febres periodicas perniciosas*» written by Francesco Torti in 1769.

In 1756 Francesco Torti defined a new standard of care for the use of Peruvian bark. In the drawing of the Lignum Febrium tree, Torti used bark-covered branches to represent the conditions by which cinchona was effective. Barkless, leafless branches were used to represent the conditions by which cinchona was ineffective. Conditions. His elegantly illustrated publication showed that only intermittent fevers were responsive to treatment with cinchona bark.

In this important study the term 'malaria' is coined and disseminated and the discovery of the cure for intermittent pernicious fevers by quinine or china-china is disclosed. This book received an extraordinary favour throughout Europe.

## The precautions against cholera in England - 1848

Cholera was a new and exotic disease from Asia and brought into sharp relief the two major theories of the time about the pattern and spread of infectious diseases. In miasma theory, it was believed that diseases were caused by the presence in the air of a miasma, a poisonous vapour in which particles of decaying matter were suspended, that was characterised by its foul smell. This theory originated in the Middle Ages and endured for several centuries.



The advocates of contagion theories believed that an infective agent was spread from person to person, which would explain why those who cared for the sick often fell sick themselves. Measures to prevent and control the spread of infectious diseases were based on these two theories. Sanitation and good hygiene practices such as washing walls and floors, removing the foul-smelling sources of miasmas - decaying waste and sewage - were miasmatic measures. Quarantine and restriction of movement preventing direct contact with potentially infected people, were the main containment measures.





### Bonaparte Visiting the Plague Victims of Jaffa

The capture and the violent sack of Jaffa by the French army under Bonaparte on 7<sup>th</sup> March 1799 were rapidly followed by an outbreak of bubonic plague, identified in January 1799, which decimated the army. On 11<sup>th</sup> March, Bonaparte made a spectacular visit to his sick soldiers and touched them. It was considered to be either magnificent or suicidal, according to one's point of view on the Napoleonic legend or of the terrors in an age of plagues. The Napoleonic army requested the help of the priests from the Armenian monastery who provided medicine that was able to cure some of the soldiers. Napoleon personally thanked the Armenian patriarch and gifted him with his own tent and sword.

### “Reflections on the usefulness of smallpox graft on vaccinated people”

The first experiment (14<sup>th</sup> May 1796) of smallpox vaccination was made by Edward Jenner upon James Phipps, a boy in whose arm a little Vaccine Virus was inserted taken from the hand of a young woman who had been accidentally infected by a cow.... On his being inoculated some months afterwards, it proved that it was secure....

Before Jenner’s experiment the roots of smallpox in antiquity have been argued, as have efforts to control it. The practice of variolation - inoculation with a small amount of material from a pustule or scab of a smallpox patient - had long been known in Asia and it was introduced into Europe and North America in the early 1700s. But it was not widely practiced because of the risk for disease or death to the inoculated person and the risk for creating new outbreaks.

The book *“Riflessi sopra l’utilità dell’innesto del vajolo e sopra gli innestati - Reflections on the usefulness of smallpox graft on vaccinated people”* was written by Dr. Gian Francesco Guadagni, Medical Director of the Hospital of Brescia in Italy. It was presented to the health stakeholders of Brescia in the same day of its engraving on 21<sup>st</sup> May 1770.

This book describes one of the first practice of variolation performed in Italy. It is recommended the usefulness and importance of this vaccination through injected material from a cow pustule. A lot of learned and detailed descriptions of materials and methods how to best perform this vaccination are represented in the chapters of the book.



# Patronage

- ISS

Istituto Superiore di Sanità



# Presentation

The primary goal of the 9<sup>th</sup> AMIT Congress, following its own tradition, is to update the health care workers on clinical and therapeutic management of infectious diseases due to multidrug-resistant bacteria (MDR) and viruses.

The last three years have been characterized by SARS-CoV-2 pandemic. At present, it is unthinkable to declare the COVID era over despite there having been key changes since the beginning of the pandemic until the present day. We have learned a lot in this period about evolution and knowledge of the SARS-CoV-2 virus. A better management of prevention and therapeutic approaches have been set up.

SARS-CoV-2 pandemic focused our attention from 2020 but unfortunately other infections have not disappeared at all. In the same period MDR infections have increased both in hospital and community settings causing millions of deaths all over the world. MDR infections have been called a "silent pandemic" because very little is known by population and underrepresented by media. Frail and immunocompromised patients, mostly if they have been infected by SARS-CoV-2, have higher risk factors for getting often, life threatening MDR infections. HIV infection is not defeated and other new epidemics have emerged through an intricate and complex biological process known as "spillover" i.e. the passage of pathogenic microorganisms from animals to humans.

A striking example occurred, fortunately limited, with Monkeypox infections which reminded us of the past scourge of smallpox declared eradicated by the WHO in 1980. For these reasons both at present and in the near future we cannot exclude emerging or re-emerging pathologies due to "spillover".

International and national institutions (WHO, CDC, ECDC, ISS) will have increasingly to face not only current pandemics (SARS-CoV-2, MDR, HIV, etc.) but also need to prevent incoming potential serious risks for the population by globally shared rapid alert mechanisms and response models.

The AMIT Congress will consider all the mentioned risks of infections through presentations given by a leading panel of infectious diseases specialists and scientists. The most innovative therapeutic tools for eradicating infections such as gene therapy, new preventive strategies for vaccination and incoming therapeutic approaches both for bacterial and viral infections will be the main topics of the Congress.

The 9<sup>th</sup> AMIT Congress is once again committed to giving the best contribution of knowledge to clinicians to ensure the best quality of life for patients and the population.



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# Thursday, March 16, 2023

## AUDITORIUM

Welcome Coffe

- 07.45-08.45 Registration of participants
- 08.45-09.00 Opening remarks
- 09.00-09.20 Chairpersons: **Antonella Castagna, Marco Tinelli**  
**Lecture** - Public engagement in COVID-19 and MDR bacterial infections: the Italian experience  
**Giovanni Rezza**

### SESSION 1 - Microbiology and epidemiology of bacterial infections

Chairpersons: **Anna Teresa Palamara, Francesco Luzzaro**

- 09.20-09.50 Epidemiology of multidrug resistance microorganisms in Italy  
**Monica Monaco**
- 09.50-10.10 Genomic guided diagnosis for an optimal antimicrobial therapy  
**Gian Maria Rossolini**
- 10.10-10.20 Discussion

### SESSION 2 - New treatment strategies in bacterial infections

Chairpersons: **Claudio Maria Mastroianni, Spinello Antinori**

- 10.20-10.40 Place in therapy of new antibiotics in the pipeline  
**Matteo Bassetti**
- 10.40-11.00 Antibiotic treatment of bloodstream infections in immunocompromised patients  
**Marco Falcone**
- 11.00-11.20 Upgrade on antifungal treatment  
**Mario Tumbarello**
- 11.20-11.30 Discussion

### ROUND TABLE - Pandemic infectious diseases: are they a growing threat to human health in the near future?

Chairpersons: **Arnaldo Caruso, Cristina Mussini**

- 11.30-11.50 How COVID-19 has changed hospital epidemiology and infection prevention and control  
**Alessandro Cassini**
- 11.50-12.10 From animal to human spillover: the Monkeypox experience  
**Fausto Baldanti**





# Thursday, March 16, 2023

- 12.10-12.30 COVID-19 vaccine revisited: alone or in association?  
**Sergio Abrignani**
- 12.30-12.50 The "silent pandemic" of MDR: can it be faced by the upcoming new Italian Plan of antibiotic resistance control ?  
**Silvio Brusaferrò**
- 12.50-13.00 Discussion
- 13.00-13.20 **Poster Session Displayed and on site**
- 13.20-14.30 **Lunch**

## **SESSION 3: Virology**

Chairpersons: **Andrea Gori, Antonella D'Arminio Monforte**

- 14.30-14.50 Prevention of HIV infection  
**Jean Michel Molina**
- 14.50-15.10 The long acting treatment in HIV  
**Antonella Castagna**
- 15.10-15.30 HIV reservoir: towards the cure  
**Francesco R. Simonetti**
- 15.30-15.50 Discussion

## **SESSION 4: Selected oral communications by young researchers**

Chairpersons: **Antonio Davì, Massimo Crapis**

- 15.50-16.05 Molecular characterization of Carbapenemase-producing-*Klebsiella pneumoniae* isolates resistant to ceftazidime-avibactam, from intestinal carriage of hospitalized elderly patients  
**Maria Giufrè**
- 16.05-16.20 Clinical characteristics, antibiotic treatment and outcome of patients with *Stenotrophomonas maltophilia* infections: prospective observational study  
**Giusy Tiseo**
- 16.20-16.35 Role of evidence synthesis in the management of infections by key pathogens: updates on *Stenotrophomonas*, *Enterococcus* and *Aspergillus*  
**Alberto E. Maraolo**
- 16.35-16.50 Cardiac implantable electronic device infections: impact of antimicrobial timing in patients undergoing device removal  
**Marco Ripa**
- 16.50-17.05 Structure and Immunity of the gastrointestinal tract in the pathogenesis of HIV infection  
**Camilla Tincati**
- 17.05-17.20 Discussion



## AUDITORIUM

- Welcome Coffe
- 09.00-09.30 Chairperson: **Adriano Lazzarin**  
**Lecture** - Gene therapy: current advances and new perspectives for genetic engineering of cells by gene transfer and gene editing  
**Luigi Naldini**

### **SESSION 5: Vaccines and antibiotic strategies facing infectious diseases**

Chairpersons: **Massimo Galli, Mario Venditti**

- 09.30-09.50 Shaping EU vaccines and antibiotic regulation in the post COVID-19 era  
**Marco Cavaleri**
- 09.50-10.10 Variations in the consumption of antimicrobial in Europe  
**Dominique L. Monnet**
- 10.10-10.30 Clinical impact of the new guidelines for antibiotic treatment to face multidrug-resistant bacteria  
**Pierluigi Viale**
- 10.30-10.50 G20 call to action on AMR. Are we moving towards a future international pandemic treaty?  
**Michela Sabbatucci**
- 10.50-11.00 Discussion

### **SESSION 6: Infection prevention and antibiotic stewardship**

Chairpersons: **Francesco Menichetti, Anna Cattelan**

- 11.00-11.20 Preventing transmission of multidrug resistant microorganisms in hospitalized patients  
**Nico Mutters**
- 11.20-11.40 Infectious diseases within the continuity of care  
**Marco Tinelli**
- 11.40-12.00 Shift of antibiotic therapy from hospital settings to primary care: the Italian experience  
**Agnese Cangini**
- 12.00-12.30 Discussion

### **Poster Session Displayed and on site**

- 12.30-14.00 **Lunch**



# Friday, March 17, 2023

## **SESSION 7: Update on infectious diseases management - 1**

Chairpersons: **Pasquale Giuri, Roberto Parrella**

- 14.00-14.20** Update on sexually transmitted diseases  
**Silvia Nozza**
- 14.20-14.40** Handling and treatment of devices-related infections  
**Paolo Grossi**
- 14.40-15.00** Update on *Clostridioides difficile* infection management  
**Ed Kujper**
- 15.00-15.20** Update on osteoarticular infection management  
**Silvio Borrè**
- 15.20-15.40** Discussion

## **SESSION 8: Update on infectious diseases management - 2**

Chairpersons: **Ettore Concia, Giovanni Cenderello**

- 15.40-16.00** Update on skin and soft-tissue infections antibiotic treatment  
**Daniele Roberto Giacobbe**
- 16.00-16.20** Update on the management of TB infection  
**Delia Goletti**
- 16.20-16.40** Shortening antibiotic treatment: is it always the right strategy?  
**Carlo Tascini**
- 16.40-16.50** Discussion
- 16.50-17.00** Conclusive remarks  
**Antonella Castagna, Marco Tinelli**
- 17.00-17.10** CME Questionnaire compilation



# Scientific Committee

**Antonella Castagna**, Milan

**Marco Falcone**, Pisa

**Marco Tinelli**, Milan

**Mario Venditti**, Rome

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# General Information

## **DATE AND CONGRESS VENUE**

**March 16<sup>th</sup> -17<sup>th</sup> 2023**

Castiglioni Palace - Corso Venezia 47 - Milan

Fermata Metro: Palestro

## **SCIENTIFIC TECHNICAL EXHIBITION**

The Congress will provide spaces for companies to meet with participants.

## **OFFICIAL LANGUAGES**

Languages: Italian and English.

Simultaneous translation will not be provided.

## **PARTICIPATION CERTIFICATE**

The certificate of participation will be issued personally to all participants regularly registered, at the Desk of the Organizing Secretariat, at the end of the Congress.

## **BADGE**

Each participant, duly registered, will be delivered with the act of the registration a name badge that must be worn for the duration of the event and that will be necessary for access to the congress area and for participation in social events.

## **PROJECTIONS AND COMPUTERIZED AUDIOVISUAL CENTER**

Computerized projection is provided with the assistance of technicians. If technical material other than that communicated is required, Please contact the Organizing Secretariat directly Nadirex International. Speakers are requested to provide files in electronic format only. Speakers who had the their presentation on the laptop will have to go to the Slide Center well in advance to allow technicians to duplicate it.



# General Information

## RESIDENTIAL CONGRESS: REGISTRATION FEE

€ 244,00 (€ 200,00 + 44,00 VAT 22%)

The registration fee includes:

- Participation in scientific works
- Congress kit
- Teaching materials
- Certificate of participation and CME certificate
- Coffee station and business lunches as per program

## RESIDENTIAL REGISTRATION METHOD

The Residential Congress can have a maximum of 300 participants.

Registration deadline: 14<sup>th</sup> March 2023

The secretariat reserves the right to reconfirm registrations.

Registrations must be done online at [www.amit-italia.it](http://www.amit-italia.it)

## VAT EXEMPTION REQUEST (ART. 10 PARAGRAPH 20 OF D.P.R. 637/72)

Public Bodies that want to request VAT exemption on payment of the registration fee for their employees are required to make such request by ticking and stamping the appropriate space on the registration form.

Unstamped requests are not recognised for tax purposes. You cannot request reimbursement of VAT and issuance of the relative credit note after payment has been made. For administrative reasons, registrations received with incorrect fees or without the required declaration will not be validated.

## PAYMENT METHODS

You may pay the registration fee as follows:

- Bank transfer to: NADIREX INTERNATIONAL S.r.l.  
c/o Intesa Sanpaolo, Filiale di Pavia, Viale Cesare Battisti 18  
IBAN IT66L0306911310100000069654 - BIC: BCITITMM
- Credit card: Visa, MasterCard, American Express are accepted

Fill out the registration form with your credit card information.

Registrations received without payment will be rejected.

## E-LEARNING CONGRESS: REGISTRATION FEE

€ 244,00 (€ 200,00 + 44,00 VAT 22%)

The Online Congress can have a maximum of 1000 participants.

Registration deadline: 14<sup>th</sup> March 2023

The secretariat reserves the right to reconfirm registrations.

Registrations must be done online at [www.amit-italia.it](http://www.amit-italia.it)



# CME Information

## **Accredited CME (Continuous Medical Education) event**

The request for CME credits will be submitted to the Italian Ministry of Health

**Professions: Physicians, Psychologists, Biologists, Nurses, Obstetricians, Pharmacist**

Medical disciplines: Interdisciplinary

Psychological disciplines: Psychotherapy, Psychology

Biological disciplines: Biologist

Nursing discipline: Nurse

Obstetrical discipline: Obstetrician

Pharmacist disciplines: Hospital Pharmacy, Territorial Pharmacy

## **RESIDENTIAL CME ID 265-369393 - CREDITS: 9,1 - PARTICIPANTS: 200**

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To earn CME credits from the RESIDENTIAL event, you must:

- Participate in at least 90% of the learning activities
- Give correct answers to at least 75% of the questions on the CME questionnaire
- Fill out the perceived-quality form
- Fill out the needs survey
- Sign the sign-in sheet at the start and end of the Congress

## **E-LEARNING CME ID 265-369396 - CREDITS: 19.5 - PARTICIPANTS: 500**

To earn CME credits from the E-LEARNING event, you must:

- Participate in at least 90% of the learning activities
- Give correct answers to at least 75% of the multiple-choice questions (with double randomization) on the online learning questionnaire
  - a maximum of five attempts to pass the test are allowed
  - the questionnaire will be online for 3 (three) days after the event has ended
- Fill out the e-learning perceived-quality form
- Fill out the learning needs survey



## Under the unconditioned support of:

### Platinum



### Gold



### Silver



### Others

