



Submission Date: 13 May 2008 at: 9:20

Questionnaire about Institutions partners

SECTION 1

Official name¹

¹ Provide the name of the organization such as the Ministry of Health or Public Health Institute to which your unit belongs.

Unit²

² Department/Unit within the institutions involved in the Network, in charge of the surveillance of communicable diseases (especially in early warning and response system, vaccine preventable diseases and zoonotic infections).

Phone

Fax

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EpiSouth Focal Points:

a) Institution

E-mail

b) Institution

E-mail

c) Institution

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SECTION 2

Istituto Superiore di Sanità

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Mandate³ as described in the regulation enacting your organization

A maximum of 200 words is allowed

³ *The mandate defines the main functions of an organization and derives from outside and above an organization.*

SECTION 3

Describe your unit position within the organizational chart (organigram)⁴ of the larger institution you belong to

A maximum of 200 words is allowed

⁴ *An organizational chart for a whole organization shows the units who make up such organization and the relationships between them. Relationships refer to authority and communication lines.*

Upload a file for further informations:

SECTION 4

Describe your unit's organizational chart (organigram)⁵

A maximum of 200 words is allowed

⁵ *An organizational chart for a unit shows the managers and main professional roles who make up such unit and the relationships between them.*

SECTION 5

Illustrate the main roles and activities carried out by your organization in the field of infectious diseases prevention and control, specifically in the following areas:

a) Surveillance of infectious diseases

A maximum of 200 words is allowed

b) Epidemic Intelligence⁶

A maximum of 200 words is allowed

⁶ *Please, see: C. Paquet, D. Coulombier, R. Kaiser, M. Ciotti, Epidemic Intelligence: a new framework for strengthening disease surveillance in Europe in Eurosurveillance, 2006; 11 (12): 212–4.*

The Istituto Superiore di Sanità (ISS) is the leading technical and scientific public body of the Italian National Health Service. Its activities include research, control, training and consultation in the interest of public health protection.

The Istituto Superiore di Sanità (ISS) is divided in seven Departments and seven National Centres (NCs). The NCs are technical scientific structures which carry on research, control, training activities and consultation , also involving different departments within the ISS, and play a coordinating role with institutions outside the ISS. The National Centre for Epidemiology, Surveillance and Health Promotion (CNESPS) is one of the seven National Centres of ISS and is organized in 9 Units plus the Statistics and the Training and Communication Offices. The Communicable Disease Epidemiology Unit is one of the 9 Units of CNESPS.

Detailed informations are available in the organigram attached

Director + 9 senior researchers (most of whom are leaders of specific projects) + 6 junior/ guest researchers (projects support) + 6 Technical / Administrative staff

Surveillance of infectious diseases is responsibility of the Italian Ministry of Health. The Unit is in charge of setting up experimental surveillance systems, such as the network of sentinel paediatricians (SPES) and the network of microbiological laboratories (MICRONET); evaluation of existing surveillance systems; collaboration with national, regional and local authorities in the management and analysis of existing data. At present the Unit coordinates several surveillance systems with national coverage and international relevance (flu; verotoxin–producing enterobacteria, salmonellosis and other enteropathogens; legionellosis; bacterial meningitis and other invasive bacterial diseases by meningococcus, haemophilus influenzae and pneumococcus; child vaccine preventable diseases; antimicrobial resistance). The Unit is also engaged in international activities, promoted by the European Commission (e.g. EUVAC.NET and the surveillance networks as EWGLI, EARSS, Enternet, IBIS, etc.) and by the World Health Organization, and manages a research site in Uganda. The Unit leads the EpiSouth–EpiMed project which involves some 23 EU and non–EU Countries of the Mediterranean Basin in a network aimed at improving communicable diseases surveillance, communication and training across the countries of the Mediterranean and the Balkans.

The Epidemic Intelligence (EI) is a responsibility of the Ministry of Health. The Unit supports EI through its special surveillance systems and specific projects.

c) Monitoring of services delivery, including immunization of migrant populations
A maximum of 200 words is allowed

d) Zoonosis
A maximum of 200 words is allowed

e) Diagnostic services
A maximum of 200 words is allowed

f) Emergency preparedness
A maximum of 200 words is allowed

g) Training and education
A maximum of 200 words is allowed

h) Research
A maximum of 200 words is allowed

SECTION 6

Describe the alert procedure adopted by your organization and the conditions to which applies paying special attention to infectious diseases.
A maximum of 200 words is allowed

SECTION 7

Provide a brief account of your unit's professional staff mix⁷
⁷ The categories are mutually exclusive: please, assign only one profile to each unit's professional staff.

Staff mix	Senior	Junior	Total
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The Unit organises "ad hoc" surveys and studies to support the monitoring of services delivery (i.e. lab.diagnostic capacities, vaccine strategies etc). The Unit supports the monitoring of services delivery also through information and data produced with the management of special surveillance systems and through evaluation of vaccine programmes. In 2008 a study on vaccination coverage in ROM population living in urban permanent camps in Rome will be performed. The Unit leads the Venice Project, whose aim is to encourage collection and dissemination of knowledge and best practice relating to vaccination and to further develop collaboration and partnership between member states.

The Unit supports specific activities/projects in coordination with other Dept. of ISS (i.e. Food Safety and Veterinary Public Health), with external Veterinary Public Health Institutes and with the Ministry of Health.

None

The Unit supports the Italian Ministry of Health and International Organisations in the preparation of Emergency Plans. Recently Emergency Plans were prepared for chikungunya, influenza, SARS and bioterrorism threats.

The Unit is involved in the European training programme for field epidemiology (EPIET) and provides staff for courses in infectious disease epidemiology and vaccinology, mostly targeted to Italian National Health Service staff. The Unit also supports the Italian Field Epidemiology Training Programme (PROFEA)

Studies on the frequency of some infectious diseases and their determinants, through descriptive and analytical epidemiology (main topics are pertussis, measles, mumps, rubella, varicella, pneumococcal diseases, meningococcal diseases, legionellosis, malaria and HIV preventive interventions in sub-saharan Africa). Mathematical models on the spread of some infectious diseases to assess the impact of preventive interventions (e.g. varicella, pertussis, influenza, chikungunya), to improve public health policy in Europe (Polymod project) and to estimate the prevalence of HIV infection in the general population of sub-saharan Africa.

The Unit supports field investigations on outbreaks, upon request by the National Health Service or International Organizations. Monitoring of health threats is done through special and routine surveillance systems.

Epidemiologists	5	5	10
Infectious diseases specialists	0	0	0
Statisticians	2	1	3
Microbiologists	0	0	0
Biologists	1	0	1
Laboratory technicians	0	0	0
Information Technology Managers	0	0	0
Others (please, specify) <i>Public Health Projects Manager/Sociologist</i>	2	0	2

SECTION 8

Describe the content of and time span covered by the databases related to infectious diseases your organization manages.

Please select the number of databases you want to describe, insert their descriptions, and leave the drop-down menu with the number of databases you have compiled.

Number of databases:

10

Data-base	Content	Time span	Brief description
SPES	Cases Incidence/diseases by months and by italian regions	2000–on going	Sentinel surveillance network based on trends estim. for measles, rubella, varicella, bacterial meningitis, mumps, based on pediatriaciains www.spes.iss.it/
Measles and Rubella (congenital and in pregnancy)	Cases incidence	2007–on going	Individual cases are reported by the Regions to CDEU by e-mail or fax
Bacterial meningitis	Cases incidence	1994–on going	Hospitals send special notification of confirmed cases to the MoH and CDEU www.simi.iss.it/meningite_batterica.htm
Influnet: Italian surveillance Influenza Network	Cases incidence (clinical cases confirmed by positive specimen)	1999–on going	Surveillance system for influenza in Italy, based on epidemiological and virological data. The epidemiological system is based on a network of sentinel general practitioners (about 600) throughout Italy, reporting cases of influenza-like illness. www.iss.it/iflu/
Legionella Infections Register	Cases incidence	1983–on going	Individual cases notified by the Hospitals and local health units to CDEU www.iss.it/regi/cont.php?id=30b>
Enternet–Italy	Number and type of isolates identified by the national reference laboratories	1980–on going	Laboratory based surveillance of salmonellosis and verocytotoxin producing Escherichia coli (VTEC) O157, including antimicrobial resistance. All the italian regions are represented in the Network

AR-ISS: Antimicrobial Resistance Surveillance System	Data on antimicrobial resistance for S. aureus, S.pn., Ent. faec., E. coli, et al.	2001–on going	www.simi.iss.it/Enternet/index.asp National surveillance system, providing reference data on antimicrobial resistance for public health purposes through a network of 50 hospitals' laboratories www.simi.iss.it/antibiotico_resistenza.htm
Micronet	Data on infectious diseases, pathogens and antimicrobial resistance from microbiology Lab	2004–on going	Epidemiological surveillance of infectious diseases based on computerized and early collection and transmission of data on infectious diseases, pathogens and antimicrobial resistance from microbiology LIS (Laboratory Information System). http://micronet.cineca.it
SIMI: Surveillance of infectious diseases	Data on frequency of statutory notifiable infectious diseases in Italy	1994–on going	Individual notifications are collected through a computerised system that links the local health authorities to a national databank (SIMI), coordinated by the ISS. www.simi.iss.it/#Welcome
Causes of Mortality in Italy	Monthly Mortality data for pneumonia, influenza and all causes	1968–on going	Data derived from Italian National Institute of Statistics database

SECTION 9

Exemplify the main publications produced by your organization during the last three years.

Please select the number of publications you want to describe, insert their descriptions, and leave the drop-down menu with the number of publications you have compiled.

Number of newsletters:		1	
Title	Frequency (Yearly, monthly, etc.)		Web link (if available)
Epicentro	weekly		www.epicentro.iss.it/
Number of bulletins:		2	
Title	Frequency (Yearly, monthly, etc.)		Web link (if available)
BEN–National Epidemiological Bulletin	monthly		http://www.epicentro.iss.it/ben/english/whatiseng.htm
EpiSouth	quarterly		https://www.episouth.org/project_outputs.html
Number of reports:		5	
Title	Frequency (Yearly, monthly, etc.)		Web link (if available)
Rota M.C., Cano–Portero R., Che D., Caporali M.G., Hernando V., Campese C. Clusters of travel associated Legionnaires' disease in Italy, Spain and France, July 2002 June 2006.	Eurosurveillance 2007;12(11):1211–22		
Rizzo C., Di Bartolo I., Santantonio M., Coscia M.F., Monno R., De Vito D., et al. Epidemiological and virological investigation of a Norovirus outbreak in a resort in Puglia,	BMC Infectious Disease 2007;7:135		

Italy.

Luzzi I., Galetta P., Massari M., Rizzo C., Dionisi A.M., Filetici E., et al. An easter outbreak of salmonella typhimurium DT 104A associated with traditional pork salami in Italy.

Eurosurveillance 2007;12(4)

Filia A., Barale A., Malaspina S., Montù D., Zito S., Muscat M., et al. A cluster of measles cases in northern Italy: a preliminary report.

Eurosurveillance 2007;12(11)

Filia A., Curtale F., Kreidl P., Morosetti G., Nicoletti L., Perrelli F., et al. Cluster of measles cases in the Roma/Sinti population, Italy, June–September 2006.

Eurosurveillance 2006;11(10)

Number of research:

5

Title

Frequency (Yearly, monthly, etc.)

Web link (if available)

Rizzo C., Lunelli A., Pugliese A., Bella A., Manfredi P., Tomba GS., Iannelli M., Ciofi degli Atti ML. Scenarios of diffusion and control of an influenza pandemic in Italy.

Epidemiol Infect, 2008, feb 14, 1–8.

Rota M.C., Bella A., Gabutti G., Giambi C., Filia A., Guido M., et al. Rubella seroprofile of the italian population: an 8–year comparison.

Epidemiology and Infection 2007;135:555–62

Rizzo C., Bella A., Viboud C., Simonsen L., Miller M.A., Rota M.C., et al. Trends for influenza–related death during pandemic and epidemic seasons, Italy, 1969–2001.

Emerging Infectious Disease 2007;13(5):694–9

Fabiani M., Nattabi B., Pierotti C., Ciantia F., Opio A., Musinguzi J., et Declich S. HIV–1 prevalence and factors associated with infection in the conflict affected region of north Uganda.

Conflict and Health 2007;1(3)

Filia A., Brenna A., Panà A., Maggio Cavallaro G., Massari M., Ciofi degli Atti M.L. Health burden and economic impact of measles–related hospitalizations in Italy in 2002–2003

BMC Public Health 2007;7(169):1–9.

Others:

5

Title

Frequency (Yearly, monthly, etc.)

Web link (if available)

Seyler T., Rizzo C., Finarelli A.C., Po C., Alessio P., Sambri V., et al. Autochthonous Chikungunya virus transmission may have occurred in Bologna, Italy, during the summer 2007 outbreak.

Eurosurveillance 2008;13(3).

Epidemiological consultation team. Results from the integrated surveillance system for the 2006 winter olympic and paralympic games in Italy.

Eurosurveillance 2006;11(8).

D'Ancona F., Alfonsi V., Caporali M.G., Ranghiasi A., Ciofi degli Atti M.L. Pneumococcal conjugate, meningococcal C and varicella vaccination in Italy. **Eurosurveillance 2007;12(2)**

Ciofi degli Atti M.L., Rizzo C., Bella A., Massari M., Iannelli M., Lunelli A., et al. Modelling scenarios of diffusion and control of pandemic influenza, Italy. **Eurosurveillance 2007;12(1)**

Pebody R.G., Hellenbrand W., D'Ancona F., Ruutu P. Pneumococcal disease surveillance in Europe. **Eurosurveillance 2006;11(9)**

SECTION 10

Identify your main collaborating partners in each area.

Number of partners:

4

Partner name	Location	Surveillance of inf.diseases	Epidemic Intelligence	Monitoring of s. delivery	Zoonosis	Diagnostic Services	Emergency preparedness	Training and education	Research
<i>Italian Ministry of Health</i>	<i>National</i>	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>		<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
<i>EC/ECDC</i>	<i>Internat.</i>	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>		<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
<i>Italian Regions</i>	<i>Regional</i>	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>		<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
<i>WHO</i>	<i>Internat.</i>	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>		<i>Yes</i>	<i>Yes</i>	<i>Yes</i>

