EHA-SWG Annual Report 2017

MAIN SECTIONS (NOTE: sections 1-4 will be used for publication on EHA website)

1. Name of the SWG: Infections in Hematology

2. Focus and mission of the SWG (this section will be published also as SWG short presentation on the EHA website)

   The Infection in Hematology SWG was founded in Q4 2017 and initially follows three main goals:
   1. Develop and share clinically useful tools: Many hematologists create checklists and pathways for quick and easy reference. Since many of us share similar clinical needs, the SWG provides a repository where such material can be shared.
   2. Facilitate access to guidance documents: Whilst other groups are highly active in developing guidelines, our group focusses on access to such guidelines. We provide tables of links to existing guidance documents of national, European, and international organizations.
   3. Reinforce networking opportunities for those who manage infections in adult and pediatric hematology.

3. SWG highlights of past calendar year

   Future Plans
   1. Clinical trials
      a) Set up and maintain a visible EHA Clinical Trial Sites Network for infectious diseases
      b) Improve access of EHA members to interventional and non-interventional clinical trials
      c) Conduct clinical trials on unmet medical needs
      d) Develop a trusted process to endorse clinical trials of other academic groups or industry

4. Chair and affiliations: Prof. Oliver Cornely, MD, ECMM Educational Officer, Director & Chair | Translational Research | CECAD Cluster of Excellence | University of Cologne, Germany

5. Board members and terms:

   Prof. Antonio Pagliuca
   Prof. Stephane Bretagne
   Prof. Rafael Duarte
   Prof. Oliver A. Cornely
   Prof. Livio Pagano
6. Conflicts of interest of the board:

7. Membership list with names and email addresses:

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8. List of scientific activities

N/A SWG founded in Q4 2017

9. List of publications from or related to the SWG

7. Wiesmuller GA, Heinzow B, Aurbach U, et al. Abridged version of the AWMF guideline for the medical clinical diagnostics of indoor mould exposure: S2K Guideline of the German Society of Hygiene, Environmental Medicine and Preventive Medicine (GHUP) in collaboration with the German Association of Allergists (AeDA), the German Society of Dermatology (DDG), the German Society for Allergology and Clinical Immunology (DGAKI), the German Society for Occupational and Environmental Medicine (DGAUM), the German Society for Hospital Hygiene (DGKH), the German Society for Pneumology and Respiratory Medicine (DGP), the German Mycological Society (DMykG), the Society for Pediatric Allergology and Environmental Medicine (GPA), the German Federal Association of Pediatric Pneumology (BAPP), and the Austrian Society for Medical Mycology (OGMM). Allergo journal international 2017; 26(5): 168-93.


36. Salzer HJ, Cornely OA. Awareness of predictors of mortality may help improve outcome in chronic pulmonary aspergillosis. The European respiratory journal 2017; 49(2).


68. Mellinghoff S, Cornely OA. Isavuconazole shortens the QTc interval: Two cases. Mycoses 2017; 60: 22-.


176. Alanio A, Bretagne S. Pneumocystis jirovecii detection in