

Protocol of the "TropNetEurop Workshop" held in Basel on 13th Nov. 2010

Participants:

Steering committee member : Ron Behrens

Network members : August Stich, Blaise Genton, Emanuele Nicastrì, Gabriele Peyerl-Hoffmann, Georg Härter, Guido Calleri, Joannes Clerinx, Jorge Seixas, Thomas Jänisch, Thomas Zoller

Guest : Frank von Sonnenburg

Coordination team Swiss TPH : Christoph Hatz, Andreas Neumayr (protocol)

Occasion:

Workshop on the future of TropNetEurop (prospects, goals, functions) after the recent change of the coordination office from Tomas Jelinek to Christoph Hatz.

Agenda:

- Welcome of the members to the workshop and outline of the agenda by Christoph Hatz
- Outline of the plans concerning the network's restructuring as proposed at the TropNetEurop meeting in Leiden in October 2010 by Christoph Hatz (see attached presentation=
- Review and prospects of the ongoing study of i.v. Artesunate for the treatment of severe malaria by Thomas Zoller:
 - current situation
 - plans ahead & discussion:
 - The actual treatment protocol will be modified in the near future and distributed among the members.
 - After the current retrospective study a prospective study would be a major task.
 - TropNetEurop would be the ideal platform for this prospective study, but would demand the GMP-approval of Artesunate and the development of a uniform treatment protocol.
 - Dihydroartemisinin/Piperaquine (Eurartesim[®]) [EMA registration expected 03-04/2011] would be a interesting candidate for a phase IV study conducted by the network
- Johannes Blum (Swiss TPH) gives a short presentation of the ongoing study activities conducted by the LeishMan working group on diagnosis and management of (muco-)cutaneous leishmaniasis consisting of members and non-members of TropNetEurop:
 - The publication of the working group's currently composed recommendations for the treatment of cutaneous leishmaniasis is on the way
 - The established consensus-treatment protocols will be accessible to TropNetEurop members and non-members to evaluate the recommendations in prospective studies. Respective information will be distributed to the TropNetEurop members as soon as possible
- Discussion on key points of the proposed transformation of TropNetEurop:
 - Surveillance / Reporting:
Consensus, that reporting as it has been performed needs to be changed:
 - "Double reporting" (e.g. malaria, dengue, etc.) by TropNetEurop and EuroTravNet / Geosentinel is critical, as it uses the network's resources and does not add scientific value to the network's output.

- Agreement that a basic set of data (even ICD code was decided to be too complex) should be reported by the member sites on a regular base (yearly, "end of the year report") to generate information on the distribution and frequency of the travel and tropical medicine related diseases seen at the different sites:
 - to have own figures for guiding research questions
 - to have own figures when applying for funding/grants
 - to have own figures for decision-making in guideline development
 The provision of this information is supposed to be compulsory* to maintain the membership status and to join the network for new members. Passive membership should be discouraged for the benefit of the network. The yearly report should include figures about the frequencies of the established diagnoses (e.g. malaria, dengue, giardiasis,...), an overview of the common syndromes encountered (e.g. fever, diarrhoea, skin problems, respiratory infections...), number of in- and out-patients etc. (every year the sites will receive their last year's report for comparison and to guide the generation of the new report by the coordinating centre). A SOP concerning the yearly report will be compiled and distributed.
- Data collection within TropNetEurop should be limited to specific situations (outbreak investigations), active (targeted, focused) rather than passive, and defined by scientific questions, to simplify and perpetuate the data entering with adequate protocols.

Consensus of the workshop group, that the hitherto main focus "surveillance" - under which TropNetEurop was initially founded - will be changed. TropNetEurop shall be primarily a research and mutual support platform. Surveillance functions will be included according to the needs.

- Research:

Participation in research activity is supposed to replace *surveillance*, the former main link of smaller centres/sites to the network. The benefit for the network will be to obtain higher number of cases to conduct studies, the smaller centres/sites will benefit from participation in operational clinical research, access to expert support, and resources from bigger centres/sites.

 - The terms "clinical / patient oriented research" or "operational research" should be used
 - A "research committee/task force" will be set up (Blaise Genton, Thomas Zoller, Ron Behrens, Zeno Bisoffi, Guido Calleri, Jan Clerinx) to establish SOPs regarding the development of research questions, review proposed research projects, authorship-rights regarding joint publications within the network, and advising the different working groups on research related issues and questions.
- Funding:
 - Raising funds (ECDC, EU, national research foundations, etc.) is a necessity to conduct research

- An application for a FP7-fund has been submitted in November 2010 (Dengue in Travellers)
- Harmonization of national recommendations & guidelines:
An "evidence based" approach is the primary step on the way to a further harmonization of existing recommendations & guidelines. The focus will be on generating scientific evidence for the various interventions in the field of travel and tropical medicine by the network's research efforts.
- Teaching/Training: Options of teaching and training options within the network have been briefly outlined.
- Communication within the network:
 - The current existing web-page will be re-designed to fit the needs of the future network activities and to serve as an interactive communication platform for the members.
 - Electronic communication would be an ideal tool to avoid costly meetings (Skype-video-conferences for small sessions of up to 6 participants, e.g. within working-groups or the steering committee, are a good tool) and enable
 - contributions of even small centres not able to provide personal presence at meetings
 - fast contact to experts
 - Regarding the technical aspect of a real-time communication platform for more than 6 participants the "LSTMH distant learning program" has been discussed as an example. It will be investigated, whether it is possible to use the same technique for communication within TropNetEurop.
 - The necessity and usefulness of a yearly meeting of all network members is still agreed by all workshop participants.
 - The web platform will be divided in a open-access section for the public and a "members only" section.
 - The web platform will provide information to the members on relevant issues (e.g. where to obtain orphan drugs).
 - The web platform will provide travel medicine related information material in different European languages, which can be used in pretravel advice as hand-outs for travellers.
 - SOPs will be developed on communication issues.
 - The steering committee will report important decisions and issues to the network members via the internet-platform.
- Communication outside the network:
Consent, that collaboration with EuroTravNet is an important issue.
The development of an interface for this purpose is proposed.
- The workshop members proposed and agreed on the development of a new design of the TropNetEurop-logo, on the re-design of the website and the shortening of the name "TropNetEurop" to "TropNet".
- Tomas Jelinek will be asked to transfer the registered domain www.tropneteurop.net to Christoph Hatz.