Automation in Threat Reduction and Infectious Disease Research: Needs and New Directions

April 29-30, 1999

A scientific colloquium entitled Automation in Threat Reduction and Infectious Disease Research: Needs and New Directions will be held in Washington, D.C., from April 29 to 30, 1999. Sponsors are the Association for Laboratory Automation; Centers for Disease Control and Prevention; Department of Energy; Department of Health and Human Services; Los Alamos National Laboratory; National Academy of Engineering; and University of California, Los Angeles.

The colloquium will focus on measuring, detecting, and monitoring in these areas: 1) recognizing and addressing established and emerging infectious diseases, 2) ensuring a safe food supply, 3) averting catastrophic bioterrorism and biowarfare, and 4) advancing human genetics and molecular medicine. It will also address automation, robotic, computer, information, Internet, and microscale laboratory methods available to address needs in these areas. The meeting's objective is to identify specific scientific needs, assess research practices and their limitations, and then consider strategic ways for integrating new high-throughput laboratory tools and methods. In addition, the 2-day program has an educational component designed for policy makers. The colloquium will emphasize a cross-cutting approach, which recognizes that new tools and methods from one scientific discipline can be applied to other scientific disciplines.

To obtain additional information or register for the colloquium, visit the following web sites:
http://www.nae.edu/colloquium
http://labautomation.org/colloquium/home.html

Emerging Pathogens Initiative: An Automated Surveillance System

The Veterans Health Administration, Department of Veterans Affairs (VA), debuted its nationwide computer-based Emerging Pathogens Initiative on October 1, 1998. The initiative is an automated surveillance system that collects data from all 171 VA medical centers (from 146 reporting sites) on 14 specific pathogens or diseases: vancomycin-resistant enterococcus, penicillin-resistant pneumococcus, *Escherichia coli* O157, *Candida* bloodstream infections, *Clostridium difficile*, *Cryptosporidium*, dengue, antibody-positive hepatitis C, Legionella, leishmaniasis, malaria, tuberculosis, group A streptococcus, and Creutzfeldt-Jakob disease. Other information (e.g., patient demographics, antimicrobial susceptibility where appropriate, co-morbidities, and number of patients by facility) is also collected and downloaded into a central database on a monthly basis. After aggregate reports are compiled, the 22 VA patient-care networks will receive network-specific data, along with national VA quartile rankings. For further information, contact Gary A. Roselle, M.D., program director for infectious diseases, VA Headquarters, at 513-475-6398.

Erratum Vol. 5, No. 1
In the article, "Genetic Diversity and Distribution of *Peromyscus*-Borne Hantaviruses in North America," by Martha Monroe et al., on page 85, reference 8 should read Mills JN, Ksiazek TG, Ellis BA, Rollin PE, Nichol ST, Yates TL, et al. Patterns of association with host and habitat: Antibody reactive with Sin Nombre virus in small mammals in the major biotic communities of the southwestern United States. Am J Trop Med Hyg 1997;56:273-84. We apologize to our readers for this error.