

# INFECTION CONTROL NEWSLETTER

## Proceedings of the Fourth Malta Conference on Infection Control & Antibiotic Therapy



The Infection Control Conference was held at the Hilton Malta on the 3<sup>rd</sup> December 2002 and attracted a total of 380 participants. The delegate constitution was purposefully a mix of medical practitioners of all grades working in both government and private health care as well as nurses and other paramedical staff.

The conference was opened by the Hon. Dr. L. Deguara, Minister for Health who underlined the ever increasing threat of antibiotic resistance which has led to concerted efforts even at political level, to improve antibiotic consumption. Dr. Deguara described the initiatives taken over recent months in Malta including the establishment of a National Antibiotic Committee

The key note lecture was delivered by Mr. M. Hayter from the University of Sheffield who dealt with the global HIV epidemic. Mr. Hayter emphasised that HIV remains a major global health problem of epidemic proportions citing the fact that 14,000 new infections occur every day but that the problem was particularly severe in developing countries which account for more than 95% of incidence. More than half of these cases occur between the ages of 15 to 24. The global epidemiology indicate sub-Saharan Africa as the major area of prevalence with 29.4 million estimated to be HIV positive in 2002. In these countries AIDS has had a major impact on childhood mortality and life expect-

tancy with an average attributable reduction of at least 15 years in many countries of the region.

Mr. Hayter emphasised that prevention remains the only viable approach to the problem especially in underdeveloped countries and cited a number of instances where educational campaigns have had considerable success including Uganda and Thailand. Looking to the future, he predicted that whilst in the developed world AIDS will remain under control due to the availability of treatment, albeit at the possible expense of complacency and less emphasis on prevention, the developing world will continue to face major public health challenges from HIV which are likely to get worse before they get better. Whilst the global epidemic of HIV is controllable, it requires economic, social, cultural and sexual behaviour changes which do not happen overnight.

Dr. Tonio Piscopo then dealt with the local epidemiology of HIV in Malta. He said that an average of 10 new cases of HIV are diagnosed in Malta every year with the number of AIDS cases declining consistently since their peak in the early 1990's. The mode of transmission is predominantly sexual with the vast majority being males between the age of 21 – 49. Thanks to the availability of HAART, mortality rates have declined appreciably together with hospital bed stay.



Issued by the Infection Control Unit - St. Luke's Hospital  
Tel: 21235447, 2595-1747; E-mail: [infection.control@gov.mt](mailto:infection.control@gov.mt)  
Editor: Dr. M.A. Borg - Consultant (Hospital Infection Control)



Dr. Michael Borg reviewed the risks for HIV in the nosocomial setting and identified needlestick injuries as a major risk to health care workers. Dr. Borg indicated that the incidence of such injuries in the government healthcare settings has shown a slight increase which appears to be attributed to increased notifications from medical personnel which could however be due to the increased awareness of the need to report following past campaigns. However the noted trend for a peak in notifications amongst newly graduated doctors shows no signs of abating and indicates the need for practical assurance in venepuncture prior to neo-graduates taking on house-officer duties. A positive trend has been the decrease in needlestick injuries reported by cleaning and ancillary personnel demonstrating better individual needle disposal and adherence to the principle of "Your needle, Your responsibility".

Dr. Christopher Barbara looked into the possibility of development of an HIV vaccine and identified several possible avenues of approach including DNA vaccines, live attenuated vaccines, live infectious vector vaccines, peptide vaccines and recombinant sub-unit vaccines. A number of these vaccines were already in phase 2 trials. However Dr. Barbara emphasised the challenges posed by the HIV virus, including its polymorphism and ability to hide in cells, which make the production of a vaccine exceedingly difficult.

Dr. Charles Mallia Azzopardi concluded the morning plenary session by a review of HIV therapy. He identified the success of HAART as being crucial to the improved quality and duration of life amongst HIV sufferers but at the same time stated that this treatment is not without its complication. Side effects of the medication include fat atrophy, hyperlipidaemias and pancreatitis. The challenge ahead, according to Dr. Mallia Azzopardi, lies in improving durability, compliance and the side effect profile.

The conference resumed after lunch with simultaneous breakout workshops on the following topics:

- Correct I V I management
- Food hygiene in hospitals
- Counselling in HIV
- Hepatitis C.

A final presentation by Ms. M. Muscat dealt with Clinical Governance as the key towards improving health care standards. She emphasised the need to achieve a framework for accountability for continuous improvement of quality of service and standards of care. This would only be obtained through interventions at both management and clinical functional level by a commitment to quality and to learn from the mistakes of the past.

The congress was concluded by a summary from the Chair, Dr. J. M. Cachia.



The individual speakers' presentations can be accessed at: <http://slh.gov.mt/ICUnit/icu2.asp>