For Immediate Release

PIDS RELEASES FIRST
JOURNAL OF THE PEDIATRIC INFECTIOUS DISEASES SOCIETY
Includes Articles on:
- California Pertussis Epidemic
- Healthcare Acquired Infections in Children
- Mother-to-Child Transmission of S aureus

ARLINGTON, VA, March 28, 2012—The Pediatric Infectious Diseases Society (PIDS) today released the first issue of its new Journal of the Pediatric Infectious Diseases Society (JPIDS), published by Oxford University Press. PIDS members are the scientific and medical authorities on the care and prevention of infectious diseases in children.

“As the leaders of pediatric infectious diseases in the global scientific and public health fields, we are pleased to launch JPIDS as an additional, credible source of information and clinical expertise which we can share with our medical colleagues and with the public in general,” said Janet A. Englund, MD, PIDS President and Professor of Pediatrics at the University of Washington.

Each peer-reviewed issue of JPIDS will share timely articles dedicated to perinatal, childhood, and adolescent infectious diseases. This high-quality source of original research articles, clinical trial reports, guidelines, and topical reviews of issues ranging from bench to bedside, will be edited by Theoklis E. Zaoutis, MD, MSCE, Associate Professor of Pediatrics at the Children’s Hospital of Philadelphia.

“We were very pleased with both the number and high quality of submissions for our first issues,” said Dr. Zaoutis. “We strive to deliver a publication that is chock-full of relevant, interesting and important information for the pediatric community.”

JPIDS is published quarterly, and PIDS members will receive an online and print subscription with their membership. The cost to purchase a subscription is $104. Media may opt-in to receive a “Table of Contents alert” by contacting Jodie Klein (703/528-3333) or Christy Phillips (703/299-9865).
The California Pertussis Epidemic 2010: A Review of 986 Pediatric Case Reports from San Diego County

More than 9100 pertussis cases were reported in California in 2010—more than in any year since 1947, when vaccinations became routine; the California Department of Public Health declared an epidemic in June 2010. Chan, et al, reviewed case reports of the 986 children suffering from pertussis in San Diego County to provide insight into the origins of and approaches to control what was the largest single outbreak of pertussis in 60 years.

The researchers found the highest morbidity (21.8 percent) in infants less than a year old, ten of whom died from the disease. Their findings support a prior CDC investigation that identified the primary source of infection in that age group as likely contact from someone in the home. In older children who received the acellular vaccine, waning immunity may have contributed to the epidemic. The authors note a “…striking increase in rates of pertussis for each year of life following the acellular pertussis booster (vs. the whole cell vaccine) provided at age 4-6 years.” They advise further investigation of possible decreasing efficacy of acellular pertussis vaccines. Sixty-nine children who were old enough to be vaccinated were not, 55 of those due to personal beliefs.

Healthcare-Associated Infections: One Size Does Not Fit All

Coffin and Huskins addressed the need for pediatric-specific data on healthcare-associated infections (HAI) and reviewed two articles in this issue of JPIDS that focused on high-risk populations of children. McCullers, et al, provided a picture of two and a half decades of pediatric cancer patients, finding a 2.5 times higher incidence of HAI in children with severe neutropenia compared to those with lesser degrees of neutropenia. They also noted common, community-associated viral pathogens, such as rotavirus and respiratory syncytial virus—diseases prevalent among young families that typically visit the pediatric wards.

Adler, et al, introduced an intervention bundle to reduce surgical site infections (SSI) in children undergoing cardiothoracic surgical procedures, many of which required delayed sternal closure. They demonstrated a dramatic decrease in SSI rates after implementing the bundle.

Predictors of Staphylococcus aureus Rectovaginal Colonization in Pregnant Women and Risk for Maternal and Neonatal Infections

Although Staphylococcus aureus infections are increasing among pregnant and postpartum women and their babies, risk factors are not well defined. Top, et al, studied 2702 women and 2789 infants retrospectively via electronic medical records to determine risk factors for S. aureus rectovaginal colonization and to assess whether colonization is a risk factor for infections among mothers and infants.

The authors identified mothers of multiples, those with positive HIV status, and those with government insurance to be at increased risk of S. aureus infection. While women with rectovaginal colonization of S aureus had a 3.5-fold greater
chance of infection, their babies did not appear to be at higher risk. The authors question the need for routine surveillance for MRSA colonization in pregnant mothers.

This issue of *JPIDS* also includes:

- *The Burden of Infant Meningococcal Disease in the United States*
- *Evidence of Endothelial Activation in Asymptomatic Plasmodium falciparum Parasitemia and Effect of Blood Group on Levels of von Willebrand Factor in Malaria*
- *Immunogenicity and Safety of 2 Dose Levels of a Thimerosal-Free Trivalent Seasonal Influenza Vaccine in Children Aged 6–35 Months: A Randomized, Controlled Trial*
- *Evaluation of an Interferon Gamma Release Assay to Detect Tuberculosis Infection in Children in San Diego, California*

ABOUT THE PEDIATRIC INFECTIONAL DISEASES SOCIETY

The Pediatric Infectious Diseases Society (PIDS) is the world’s largest professional organization of experts in the care and prevention of infectious diseases in children. PIDS membership encompasses leaders across the global scientific and public health spectrum, including clinical care, advocacy, academics, government, and the pharmaceutical industry. From fellowship training to continuing medical education, research, regulatory issues and guideline development, PIDS members are the core professionals advocating for the improved health of children with infectious diseases both nationally and around the world, participating in critical public health and medical professional advisory committees that determine the treatment and prevention of infectious diseases, immunization practices in children, and the education of pediatricians. For more information, visit [www.pids.org](http://www.pids.org).

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