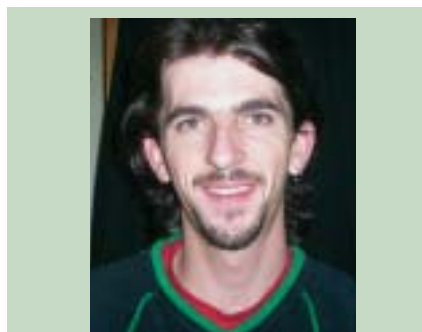




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In this issue of EM, we feature the projects of two PhD students – Allen Cheng from the Northern Territory with his timely project on Melioidosis, and Andrew Brown from Victoria with his nearly finished project on milk spoilage *Pseudomonas* spp.

Since EM started, towards the beginning of this year, the EM team have had the opportunity to discover, and appreciate, the huge range of PhD topics being undertaken nationally. Unfortunately, EM has finished for this year but, after a short break, we will be back at the beginning of next year.

We hope that you have enjoyed this new section and we will endeavour to keep you updated with the wonderful diversity and intelligence of Australia's microbiology students.

If you would like to add any comments about this section, or you know of someone who you think would be an excellent candidate to have their work presented in this section, please do not hesitate to contact one of us.

Milk spoilage *Pseudomonas* spp.: siderophore-mediated iron acquisition, exogenous iron-source utilisation and the potential for inhibition by specific antibodies

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About Andrew

I am interested in the study of scientific topics of agricultural significance, especially those concerning microbiology or the dairy industry. This interest helps to combine science, a liking for investigating novel ideas and a rural background. My studies at La Trobe University, including a Bachelor of Agricultural Sciences and a PhD, have focused upon providing me with a strong background to undertake a research career that matches my interests.

My PhD is almost ready for final submission. It is entitled *Milk spoilage Pseudomonas spp.: siderophore-mediated iron acquisition, exogenous iron-source utilisation and the potential for inhibition by specific antibodies*.

Siderophores are low-molecular-weight iron-chelating agents that are released by bacteria and fungi under conditions of growth-limiting availability of iron. Siderophores increase the availability of iron, by either increasing the solubility of insoluble iron compounds or removing iron from host iron-binding proteins (i.e. transferrin). The ferric iron-siderophore complex re-enters the cell by a specific membrane receptor, before either reduction of the iron or destruction of the siderophore releases the iron from the siderophore.

The importance of siderophore-mediated iron-uptake during conditions of iron-limitation appears to make it a potential target for the control of bacterial growth. The siderophore-mediated iron-uptake mechanisms of the *Pseudomonas* spp. responsible for the spoilage of milk had previously not been studied, meaning that there were many new areas to explore. The results of the research will hopefully be published in two papers in the near future.

Rather than focusing on a single aspect of the topic, I chose to take a broad overview. This approach to my PhD had both disadvantages and advantages. The disadvantages were that some topics were treated superficially and interesting possible diversions were ignored. The



advantages were that many different approaches could be tried, which allowed a broad range of skills to be developed. In addition to microbiological skill, I was able to obtain a wide array of protein chemistry and molecular biology skills, which were useful while job hunting.

I am currently employed as a Protein Chemist. My employer is Murray Goulburn Co-operative Co Ltd, the large dairy company responsible for brands like Devondale. Though not sounding like

very exciting or scientific work, in some cases the food industry is really the application of biotechnology on a grand scale.

My work includes a mixture of quality assurance and research and development related tasks. The R&D component of my work involves trying to improve products currently manufactured by the co-operative and bringing new high-value products to market. From my perspective, another benefit of employment with

Murray Goulburn is that it has allowed me to undertake employment that utilises my scientific skills, without requiring me to reside in a capital city.

Finally, I would like to thank my PhD supervisor Dr Richard Luke for his assistance (La Trobe University) and Dairy Australia (formerly the Dairy Research and Development Corporation) for providing a scholarship during my PhD.



Melioidosis: epidemiology, pathophysiology and management

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About Allen

I am an infectious diseases physician based in Darwin currently engaged in a PhD under the supervision of Prof Bart Currie and A/Prof Nick Anstey. I completed my medical degree in 1993, a Graduate Diploma in Clinical Epidemiology in 2000, and advanced training in infectious diseases in 2002. I have worked in a diverse range of places, including metropolitan and rural centres

in Victoria, Papua New Guinea, the United States and the Northern Territory.

My interests currently focus on melioidosis, but also include clinical infectious diseases and snake envenomation. Research in the Territory allows me to bring the resources available in Australia to a problem that primarily affects disadvantaged populations in the rural tropics. On a personal level, I have enjoyed the contrast between laboratory research, clinical research in Thailand and clinical work in remote Australian communities.

Introduction

Melioidosis, the disease caused by *Burkholderia pseudomallei*, is endemic to northern Australia and southeast Asia. It is the commonest cause of fatal community-acquired pneumonia in the Top End and is also common in northeastern Thailand where mortality approaches 50%. Melioidosis may affect many sites in the body; pneumonia is the most common presentation but also intra-abdominal suppuration, prostatic abscesses, skin and soft tissue infection, encephalomyelitis and septic arthritis are also seen.

Our interest focuses on the role of granulocyte colony stimulating factor (G-CSF) as an adjuvant to therapy; in Darwin, use of G-CSF was associated with a fall in mortality from 95% to 10% in patients with septic shock¹.

Laboratory studies

Initially, we examined the role of G-CSF in a mouse model; G-CSF gene knockout mice were demonstrated to be susceptible to infection with *B. pseudomallei*. However, administration of short-term exogenous G-CSF replacement did not restore resistance to infection, an unexpected result that has been difficult to explain.

In vitro work, using a whole blood bactericidal assay, failed to demonstrate differences between the whole blood of patients with risk factors for melioidosis, such as those with diabetes or renal failure, and healthy controls. Further, *in vitro* co-incubation with G-CSF did not improve the bactericidal activity of whole blood².

Clinical studies

The Darwin experience with G-CSF was reviewed; although the dramatic fall in mortality was observed with the use of G-CSF, a number of potential confounding factors were apparent¹. Most significantly, these included the appointment of an intensivist and the earlier use of meropenem in therapy [Cheng AC, Antimicrobial Agents and Chemotherapy, in press].

Attempts were made at risk-stratifying patients by the use of clinical and biochemical markers. The use of C-reactive protein [Cheng AC, American Journal of Tropical Medicine and Hygiene, in press] and a more complex scoring system was reviewed [Cheng AC,



Transactions of the Royal Society of Tropical Medicine and Hygiene, in press], but these markers did not improve on clinical definitions of septic shock. Ethical issues involved in performing a placebo-controlled trial were explored³; I am currently supervising a clinical trial of G-CSF in Thailand – in collaboration with the Wellcome Trust-Mahidol University-Oxford University Research Unit and the Sapprasithprasong Hospital. A second trial of G-CSF in septic shock excluding patients with melioidosis has also recently commenced in Darwin.

Epidemiological studies

The epidemiology of melioidosis was reviewed using notifiable diseases data in

WA, the NT and in Queensland⁴. Further work is focussed on the molecular epidemiology of *B. pseudomallei*; preliminary results indicate that strain variation, defined by pulsed field gel electrophoresis, does not appear to be as important to determining the pattern or severity of disease as host or environmental factors. Ongoing collaborations are confirming these findings using multilocus sequence typing and other sequence-based techniques.

Outbreaks of melioidosis have been defined using geographical information systems and appear to be related to a site of environmental contamination, such as drinking water supplies, or to severe weather events such as cyclones or floods.

However, the characteristics of drinking water supplies in the Top End, such as chlorination, did not appear to influence the baseline rate of melioidosis [Cheng AC, Transactions of the Royal Society of Tropical Medicine and Hygiene, in press].

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ASM Affairs

Branch activity reports

New South Wales

Things are getting revved up in NSW for National Conference in September. There's a definite buzz and anticipation about 2004. Nothing like a bit of pressure.

NSW Branch organised numerous activities during 2003-4. In September CAPSIG-NSW examined *When it hits the fan...* which seems to have a lot flying about given the great turn up. Also in September there was an E-test users group meeting with Peter Ward at Prince of Wales Hospital. The clinical meeting for this year was held on 22 October at The Royal North Shore Hospital. Around 70 people attended a well catered and organised meeting.

October also saw a very well attended joint meeting with the AIFST and NSW ASM FOODSIG at Food Science Australia

with a *Campylobacter* update. We had our Branch Christmas meeting in November with a special focus on seafood and quality rock and roll music. A great time was had by the 117 that attended. CAPSIG, NSW also had a great turn up of nearly a 100 members at its Christmas seminar in December with a well received presentation by Dr Joanne Clark from Macquarie University who spoke on *Drugs from bugs*.

The year started off with David Ellis' talk and meeting with the Branch on 25 February at the WaterFront Restaurant, Circular Quay was well attended and a great night was had by all. A Serology Special Interest Group meeting was well attended at Mayne Pathology on 2 March.

On 16 March a multiple SIG meeting was held at Rodd Island in Sydney Harbour. The night was a sell out with a hundred attendees. Dr Tom Gottlieb from

Concord Hospital gave a magnificent and entertaining talk on the history of TB, with the island and sights of the harbour being absorbed by all who attended. The Mycology SIG meeting was held at Royal North Shore Hospital on 14 April, and again very well attended.

Even though a large number of the branch is involved in asm2004, you can see that there hasn't been a lull in branch activities. On reflection it's been surprisingly busy. At this stage we're looking forward to the BD Awards evening, which will be held at the University of New South Wales on 13 July. The Branch Annual General Meeting will be held on 10 August at Curzon Hall. At least one SIG meeting is planned for every month this year except September and October, around the conference. That's all for now, Tom Olma (on behalf of the NSW Branch of ASM).



ASM 2004 Educators' Workshop

The EDSIG workshop will be held on Sunday 26 September, from 10-4 pm at the conference site at Homebush. Morning and afternoon teas and lunch will be provided. The cost to participants will be \$50. Attendance certificates and other handouts will be provided. Note that, in the interest of achieving as broad a representation as possible, Workshop attendees do not have to be members of the ASM, nor do they have to be registered to attend the conference.

The Workshop will consist of two sessions each with selected speakers but with substantial time allowed for audience participation.

The morning session will be chaired by Julian Cox and will explore the topic *Strategies for engaging students*, in particular international students and those for whom microbiology is not a major discipline. Speakers include Margaret Deighton, Peter New, Danilla Grando and Trish Newstead.

The afternoon session will be chaired by Kathy Takayama and will explore *Future directions in microbiology education*, in particular the importance of maintaining an inquiry-based approach to our teaching.

Any questions?

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Call for nominations

Awards for scientific excellence for junior and senior researchers

The Australian Academy of Science is a private organisation of some 370 of Australia's leading research scientists, elected for their personal contributions to science.

The Academy recognises research excellence by conferring medals and awards on younger scientists and recognises lifetime contributions to specific disciplines by more senior scientists.

You are invited to nominate candidates for the prestigious awards of the Australian Academy of Science, with closing date of 30 August 2004.

Information about the awards is available at <http://www.science.org.au/awards>

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Standing Committee on Clinical Microbiology

This column will make a regular appearance in *Microbiology Australia* to keep members abreast of what this Standing Committee of ASM is doing.

Dear Fellow Microbiologists – The following issues have been (or are being) dealt with by the ASM Standing Committee on Clinical Microbiology.

Supervision of clinical diagnostic microbiology laboratories

This issue came to the committee as a result of seeing a draft of the new agreement on 'Pathology manpower, quality and output' between the Commonwealth of Australia and the three bodies that negotiate this agreement:

- The Royal College of Pathologists of Australia (RCPA).
- The Australian Association of Pathology Practices Inc. (AAPP).
- The National Coalition of Public Pathology (NCOPP).

These bodies represent pathologists in both public and private practice and their professional body. Scientists (including microbiology scientists) are not represented on these three organisations. The pathologist bodies recommended to the government that only pathologists (and not scientists) be permitted by law to supervise diagnostic laboratories of certain categories (GX and GY).

The Australian Institute of Medical Scientists (AIMS) and the Australian Association of Clinical Biochemists (AACB) objected to this recommended change and asked ASM if they wished to make a submission about the matter. Hence the issue was referred to the ASM Standing Committee on Clinical Microbiology for discussion and determination. The committee members discussed (via email) the pros and cons and decided not to take an official ASM view on this matter.

The comments by pathologist members of ASM were that pathologists should supervise these laboratories. The comments by scientist members of ASM were that scientists should supervise these laboratories. This outcome was not surprising! To avoid alienating our diverse membership, the ASM Standing Committee decided that ASM should not have an official view on this matter. Individuals are free to express their opinions through other professional bodies to which they may belong.

Measurement of uncertainty in diagnostic microbiology laboratories

The National Association of Testing Authorities (NATA) has formally requested that ASM consider the issue of measuring uncertainty in diagnostic microbiology laboratories.

At this stage, the ISO/IEC 17025 requirement for the estimation of 'uncertainty of measurement' only applies to quantitative tests. This includes tests where a numerical value is reported as a qualitative result, such as:

- a) Microscopic examination of clinical specimens.
- b) Specialised antibiotic procedures.
- c) Detection of microbial DNA/RNA.
- d) Serology.

The ASM Special Interest Group in Serology and Nucleic Acid Technology (Convenor: Robyn Wood) has already set up a Working Party to review c) and d) above. They are also setting up a review group on which Dr Jenny Robson will sit. Jenny is a member of the Standing Committee on Clinical Microbiology. The ASM also plans to set up a working party to review a) and b) above. This is likely to be an ongoing issue for some time. Any interested ASM members who would like to be involved in this discussion should contact me please.



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Quality control on the bio-Mérieux mycoplasma IST 2 test for the identification of *Mycoplasma hominis* and *Ureaplasma urealyticum*

NATA requested our opinion on how laboratories should do in-house quality control (QC) on this test. We advised that strains of *M. hominis* and *U. urealyticum* need to be maintained in those labs using the assay, so as to do routine QC. While this is difficult, because the bacteria concerned are not easy to grow and maintain, it is necessary so as to ensure that the assay is working correctly.

Synovial fluid Quality Assurance Programme (QAP)

The Royal College of Pathologists of Australasia (RCPA) synovial QAP was criticised by a diagnostic lab that declined a NATA requirement to enrol in this programme. ASM was asked for an opinion. We recommended that laboratories testing synovial fluids should enrol in a synovial fluid QAP, particularly if so required by NATA. If the programme is considered to be sub-optimal, then NATA should make a formal request to RCPA-QAP for improvement in the QAP or seek an alternative supplier.

In conclusion, the ASM Standing Committee on Clinical Microbiology seems to be functioning reasonably well. Feedback from ASM members on any of the above issues is always welcome and should be sent to me at the address above.



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Meetings

Contributions listing relevant meetings are welcome. Please send to:
<pbishop@nursing.usyd.edu.au>

2004

31 August – 3 September
National Convention Centre,
Canberra

4th Australasian Hepatitis C
Conference

2-4 September
National Convention Centre,
Canberra

The 16th Annual Conference of the
Australasian Society for HIV
Medicine

Details for both of the above can be obtained at
Web: www.ashm.org.au/conference2004

19-23 September
Chesapeake Bay, Maryland

An ASM Conference
Extremophiles 2004:
5th International Conference on
Extremophiles

26 September – 1 October
Sydney SuperDome

ASM 2004 National Conference
Conference Manager: Janette Sofronidis
Australian Society for Microbiology
E-mail: janette@theasm.com.au
Chair, Local Organising Committee:
Tom Olma
E-mail: tomo@icpmr.wsahs.nsw.gov.au
Web: www.ASM2004.org

6-9 October
Portland, Oregon
ASM Conference on
Functional Genomics and
Bioinformatics Approaches to
Infectious Disease Research

This ASM conference will

- Highlight new developments in genomics & bioinformatics technologies.
- Address the challenges of data storage, interpretation and sharing.
- Describe recent application of such technologies to infectious disease research.

The conference will bring leaders in the functional genomics and bioinformatics fields together with microbiologists, virologists and immunologists who use or intend to use such approaches.

2005

8-9 July
Mirambeena Resort, Darwin

2005 TriState
Chair: Andrew Lawrence
Conference Manager: Janette Sofronidis,
Australian Society for Microbiology
E-mail: janette@theasm.com.au
Website: under construction

29-30 July
Hamilton Island, Great Barrier Reef
2005 Mycology MasterClass

Following the success of the inaugural 2003 Mycology MasterClass, also held on Hamilton Island. Places strictly limited. To avoid missing out, e-mail your expression of interest today to reserve your place!
Head of Faculty: David Ellis
Conference Manager: Janette Sofronidis,
Australian Society for Microbiology
E-mail: janette@theasm.com.au
Website: under construction

25-29 September 2005
National Convention Centre,
Canberra
ASM 2005, Canberra
Annual Scientific Meeting &
Exhibition for the Australian Society
for Microbiology

Chair: George McLean
Conference Manager: Janette Sofronidis
Australian Society for Microbiology
E-mail: janette@theasm.com.au
Website: under construction

2006

2-6 July
Gold Coast Convention & Exhibition
Centre, Gold Coast

ASM 2006, Gold Coast
Annual Scientific Meeting &
Exhibition for the Australian Society
for Microbiology

Chair: Phil Giffard
Conference Manager: Janette Sofronidis
Australian Society for Microbiology
E-mail: janette@theasm.com.au
Website: under construction

15-18 October
Amsterdam, Netherlands
6th International Conference of the
Hospital Infection Society

Contact: Congress Secretariat
HIS 2006, Concorde Services Ltd
4B/50 Spiers Wharf, Glasgow G4 9TB
Tel: (44) 141 331 0123
Fax: (44) 141 331 0234
E-mail: info@his2006.com
Web: www.his2006.com

29 October – 1 November
Crown Promenade Hotel,
Melbourne
VTEC 2006

The 6th International Symposium on
Shiga Toxin (Shiga toxin
(Verocytotoxin) producing
Escherichia coli infections
Chair: Elizabeth Hartland
Conference Manager: Janette Sofronidis
Australian Society for Microbiology
E-mail: janette@theasm.com.au
Website: under construction