



**3rd
European
Conference on
Infections in
Leukemia**

ECIL 1, 2 and 3 Introduction

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September 25 - 26 2009, Juan-les-Pins - France



The ECIL is the European Conference on Infections in Leukemia

The ECIL is a common initiative of:

- the Infectious Diseases Working Party of the EBMT
- the Infectious Diseases Group of the EORTC
- the Supportive Care group of the European LeukemiaNet
- the Immunocompromised Host Society



ECIL 1: Juan-les-Pins, France, Sept 30-Oct 1, 2005

59 experts from 24 European countries and one representative from Australia

ECIL 2: Juan-les-Pins on Sept 28-29, 2007

53 experts from 24 European countries and one representative from Australia

ECIL 3: Juan-les-Pins, France, Sept 25-26, 2009

57 experts from 18 European countries, 2 from Russia



Objectives

- Elaborate European guidelines on prophylaxis, and treatment of infectious complications in leukemic patients
- Obtain information about what are current management strategies in Europe
- Favor communication between groups
- Define new areas of clinical research

ECIL 1 - 2005: Six topics were addressed

- I Fluoroquinolone prophylaxis in neutropenic patients
- II Aminoglycosides in febrile neutropenia
- III Glycopeptides and other antiGram+ antibiotics in febrile neutropenia
- IV Empirical antifungal treatment for persistent fever in neutropenic patients
- V Antifungal prophylaxis
- VI Antifungal therapy (*Aspergillus* and *Candida*)

Working Groups of ECIL 1 - 2005

Quinolones	<i>C Viscoli, G Bucaneve, E Castagnola, L Leibovici, F Menichetti,</i>
Aminoglycosides	<i>F Menichetti, G Bucaneve, L Drgona, M Paul, P Furno, C Viscoli</i>
Anti Gram+	<i>A Cometta, T Calandra, O Marchetti</i>
Empirical Antifungal	<i>O Marchetti, T Calandra, C Cordonnier</i>
Antifungal prophylaxis	<i>J Maertens, O Cornely, P Frère, W Heinz, C Lass-Flörl</i>
Antifungal therapy	<i>R Herbrecht, B Gachot, U Fluckiger, P Ribaud, A Thiebaut</i>

ECIL 2 - 2007

- **Three topics of ECIL1 were updated:**
 - Empirical antifungal therapy
 - Antifungal prophylaxis
 - Antifungal treatment of Aspergillus and Candida infections
- **Two new topics were addressed:**
 - Management of Herpes virus infections:
4 sets of slides: HSV, VZV, CMV and HHV6 and 7, EBV
 - Management of other viral infections:
Respiratory viruses, Influenza virus
Polyoma, Parainfluenza virus

Working Groups of ECIL 2 - 2007

Empirical Antifungals <i>Update</i>	<u>O Marchetti</u> , T Calandra, C Cordonnier
Antifungal prophylaxis <i>Update</i>	J Maertens, O Cornely, P Frère, W Heinz, C Lass-Flörl
Antifungal therapy <i>Update</i>	R Herbrecht, B Gachot, U Fluckiger, P Ribaud, A Thiebaut
Herpes virus	P Ljungman, R de la Camara, D Engelhard, H Einsele, P Reusser, J Styczynski, K Ward
Other virus	W Heinz, S Cesaro, O Cornely, H Hirsch, P Shaw

METHODS (I)

1 – Questions proposed by the organization committee and redefined by each group

2 – Population explored: Leukemic, adults, neutropenic (<500/mm³), Auto- and Allo SCT recipients

Key words: leukemia, neutropenia ... MeSH

Sources: Medline, PubMed, Cochrane Library, Abstracts of ASH, ICAAC, ASCO, ECMID, and EBMT (limited to the 4 previous years for abstracts).

3 – Endpoints: overall mortality, mortality due to infections, breakthrough infections, safety, emergence of resistant organisms, costs ± others/group

METHODS (II)

4 – Literature review:

Randomized trials, meta-analyses, open studies ,
review articles, treatment guidelines

5 – Grading the level of evidence and level of recommendation:

CDC grading system

6 – Presentation, discussion and revision of the guidelines till consensus

CDC Grading system used for ECIL 1 and ECIL 2, and update ECIL 3

Quality of evidence	Strength of recommendations
<p>I Evidence from at least one well-executed randomized trial</p> <p>II Evidence from at least one well-designed clinical trial without randomization; cohort or case-controlled analytic studies (preferably from more than one center); multiple time-series studies; or dramatic results from uncontrolled experiments</p> <p>III Evidence from opinions of respected authorities based on clinical experience, descriptive studies, or reports from expert committees</p>	<p>A Strong evidence for efficacy and substantial clinical benefit Strongly recommended</p> <p>B Strong or moderate evidence for efficacy, but only limited clinical benefit Generally recommended</p> <p>C Insufficient evidence for efficacy; or efficacy does not outweigh possible adverse consequences (e.g., drug toxicity or interactions) or cost of chemoprophylaxis or alternative approaches Optional</p> <p>D Moderate evidence against efficacy or for adverse outcome Generally not recommended</p> <p>E Strong evidence against efficacy or of adverse outcome Never recommended</p>

Publications subsequent to ECIL 1 and 2 meetings

ECIL 1

Eur J Cancer, 2007 suppl. 5

ECIL 2

Update of the antifungal guidelines on the slide sets available on the websites of the 4 involved bodies

Ljungman et al. BMT 2008: CMV, HHV6

Styczynski et al. BMT 2009: HSV, VZV, EBV

Objectives of ECIL 3 - 2009

- **Topics of previous ECILs to be updated**
 - Antifungal prophylaxis
 - Empirical antifungal therapy
 - Antifungal treatment of *Aspergillus* and *Candida* infections
 - Management of herpes virus infections (CMV, HHV6, 7, 8 *and* HSV, VZV, EBV)
- **New topics**
 - Zygomycosis
 - Non-invasive procedures of invasive fungal infections

Working Groups of ECIL 3 - 2009

Empirical Antifungals*	<i>O Marchetti, C Cordonnier , T Calandra,</i>
Antifungal prophylaxis	<i>J Maertens, O Cornely, P Frère, W Heinz, C Lass-Flörl</i>
Antifungal therapy	<i>R Herbrecht, B Gachot, U Fluckiger, P Ribaud, A Thiebaut</i>
CMV, HHV6 and EBV	<i>P Ljungman, R de la Camara, D Engelhard, H Einsele, P Reusser, J Styczynski, K Ward</i>
Zygomycosis §	<i><u>G Pettrikos</u>, A Skiada, F Lanternier, A Groll, Raoul Herbrecht, L Pagano, S Zimmer, O Lortholary</i>
Classical diagnostic procedures of IFI	<i>J Bille, M Arendrup, E Dannaoui, C Kibbler, M Ruhnke, C P Heussel</i>
Non-invasive diagnostic procedures for Aspergillus	<i>S Bretagne, P Verweij, J Loeffler, J Maertens, P Donnelly, RM Barnes, T Lernbecher, L White, M Cuenca-Estrella</i>
Non-invasive diagnostic procedures for yeasts	<i>C Viscoli, M Mikulska, T Calandra, M Sanguinetti, J Ponton, D Poullain</i>
βéta-D glucane	<i>O Marchetti, F Lamothe, M Cruciani, E Castagnola, O Lortholary, M Richardson</i>



•In white: Updated topics from previous ECILs

•§ In yellow: New ECIL 3 2009 topics

CDC Grading system used only for NEW topics of ECIL3

Quality of evidence	Strength of recommendations
<p>I Evidence from ≥ 1 properly randomized, controlled trial</p> <p>II Evidence from ≥ 1 well-designed clinical trial, without randomization; from cohort or case-controlled analytic studies (preferably from >1 center); from multiple time-series studies; or from dramatic results from uncontrolled experiments</p> <p>III Evidence from opinions of respected authorities, based on clinical experience, descriptive studies, or reports of expert committees</p>	<p>A Good evidence to support a recommendation for or against use</p> <p>B Moderate evidence support a recommendation for or against use</p> <p>C Poor evidence to support a recommendation</p>

The ECIL Slides are available at



EBMT, Infectious Diseases Working Party



EORTC Infectious Diseases Group



European Leukemia Net



Immunocompromised Host Society



The logo in the upper right corner of a slide means that recommendations have been updated with either a change of grading, an addition or a confirmation of a previous grading:

- At ECIL 2, in 2007: UPDATE ECIL-2 2007

- At ECIL 3, in 2009: UPDATE ECIL-3 2009

On behalf of the ECIL Organization Committee

*T Calandra, H Einsele, R Herbrecht, P Ljungman, J Maertens, O Marchetti,
P Donnelly, C Viscoli and C Cordonnier*

WE SINCERELY THANK ...

The sponsors of ECIL1, 2005

*Astellas Pharma, BMS, Gilead Sciences, Glaxo Smith Kline, Merck Sharp & Dohme, Pfizer,
Schering Plough, Wyeth and Zeneus Pharma*

The sponsors of ECIL 2, 2007

*Astellas Pharma, Cephalon, Gilead Sciences, Glaxo Smith Kline, Merck Sharp & Dohme,
Novartis, Pfizer, and Schering Plough*

And the sponsors of ECIL 3, 2009

Astellas Pharma, Gilead Sciences, Merck Sharp & Dohme, Pfizer, and Schering Plough

And KOBE, Groupe GL Events, Lyon, for organizing the conferences

