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3-6 October 2012

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2-year grant in the value of \$ 100'000

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President's Corner

Dear friends,

October is approaching quickly, and we all look forward to our Florence meeting. As you can see in the final program, we were able to gather the best people in our field to present their work, both in basic research as well as clinical work.

I am sure we are going to have a fantastic meeting and we at the board of ESID are doing the best to ensure its success.

I encourage all of you to submit abstracts to the meeting, which will be published in the Journal for Clinical Immunology.

We thank Baxter Company for their continuous support for our fellowship program and you still have time to apply for this prestigious grant - Deadline 1st of May 2012.

During the month of September the electronic poll, for various positions in ESID board, will take place and I urge you to suggest candidacy for these important jobs (please go to our website for more information.)

During the last ESID board meeting it was decided to allocate money for research in the various aspects of the field of primary immunodeficiency (according to our working parties). We can support several grants up to 5000 EUR. You can directly contact the chairperson of the working party, you want to apply for.

I look forward to meet you all in Florence where we for sure will hear about new genes, new syndromes, improved therapy and much more.

FLORENCE here we come!!



Amos Etzioni - ESID President



Biennial Meeting
of the European Society
for Immunodeficiencies | FLORENCE ITALY
October 3-6, 2012



Secretary's Corner

Dear ESID members,

The **Biennial ESID meeting** is just finished and all of us have enjoyed great science, the wonderful and perfect venue. Congratulations to Eleonora Gambineri for this great success!!

Our ESID family is now increased: 710 ESID members, 235 out of them are Junior members that means a lot of energy and new ideas.

During the **General Assembly**, we have announced the results of ESID board vote. Two new ESID Board members have been elected:

- **Despina Moshous** (Hospital Necker-Enfants Malades, Paris) who will chair the Clinical Working Party
- **Andrew Gennery** (Great North Children's Hospital, NewCastle) who will be the Chairperson of the WP Bone Marrow and Gene Therapy

They will replace **Klaus Warnatz** and **Bobby Gaspar** respectively at the end of their mandate. I wish them four years of intensive work and at the same time I take the occasion to thank Klaus and Bobby for their important contribution during these four years.

Finally, **Andrew Cant** (Great North Children's Hospital, NewCastle) has been elected as "President Elect" when Amos Etzioni will conclude his mandate.

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During the General Assembly (GA) several **issues have been raised:**

- **ESID website:** Three different options have been presented to the GA: the first one proposed by JL Casanova was to maintain the current website; the second choice was to improve ESID website and third possibility was the generation of a new ESID website. The GA has voted the second option. Marta Rizzi will be in charge of the new website restyling with the final aim to make it more attractive and user friendly. Marta will show the new version of ESID website next ESID board meeting that will be hold next January.

During the GA, Desa Lilic from NewCastle has suggested the **introduction into the website of a new topic describing the list of European Centers offering new assays used for the diagnosis of PID.**

I encourage members to send their suggestions that are important to design a website that can satisfy the needs of every member.

- **ESID Endorsed Meeting:** ESID will provide the logo to educational activities that fulfill the scope of ESID's mission and objectives. You can find all the details on the website.

Briefly, the main points are as follows:

- The details of the meetings (name/venue/dates organizer)
- The organizers are active ESID members
- The Preliminary Scientific Programme, including invited speakers

The candidate should submit the proposal to the ESID Board at least three months in advance to give enough time to the Board members to examine and understand whether the endorsement is appropriate.

During the ESID board meeting held in Florence, the Board **has approved to endorse:**

- 2nd Workshop on Diagnostics of Immunodeficiencies 2013 organized by Dr. Klaus Warnatz held in Freiburg next June.
- 3rd Meeting on Primary Immunodeficiencies for residents and fellows organized by Dr. Pere Palacin in Barcelona next May.

Importantly, financial support will be offered by ESID only to Societies such as ASID and PAGID to support travel tickets of invited ESID board members.

Finally, the President has informed ESID members about the interest of **Clinical Immunology Society (CIS) to have a dedicated corner to ESID in Journal Clinical Immunology.**

Call for Next Biennial meetings:

As Bids for biennial meetings take place four years in advance, during the General Assembly we have illustrated the three applications received from :

- Barcelona
- Manchester
- Moscow

The vote is now open until November 10th 2012 until 12:00 noon (CET).

We count on your participation to help us identifying the destination to our 2016 Biennial meeting!

Please let me know if you have any comments or suggestions. Our society is the result of your contribution!

Anna
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Treasurer's Report

Dear all,
the organization of the **ESID 2012 biennial meeting**
is rising to the top!
We are getting close to October now and the following months will be very exciting!

First of all the **abstract submission deadline is approaching - May 16th.**
[Click here to submit an abstract](#)

Therefore, don't miss the opportunity to present your work in Florence.
There will be several slots for oral presentation and in addition from this year ESID has organized also poster walks where you will have the chance to present your results to an active audience and possibly to win an award!

Moreover ESID is offering 10 **travel grants of € 1,000** each for ESID Junior members.
Please visit the ESID website section for more details.

Finally the social happenings will be stunning with breathtaking locations. The meeting will be a perfect combination between cutting edge science and enjoyable networking!

Therefore stay tuned and visit the Florence meeting official website for the most recent updates [click here](#) !

I am looking forward to seeing you in Florence!
Best wishes,

Eleonora Gambineri
ESID 2012 Congress President

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15th Biennial Meeting
of the European Society
for Immunodeficiencies | **FLORENCE | ITALY**
October 3-6, 2012



News: ESID Working Parties

BMT & Gene Therapy

Dear All

I would like to update you on a number of issues relating to the working party;

1. As you know the ESID BMT and GT WP shares a common membership and purpose with the Inborn Errors Working Party of EBMT and has for most of its existence had a common chair. Recently there has been a move to try and incorporate the IEWP WP with a larger general Paediatric diseases working party, which would have resulted in the loss of focus on transplantation of immunodeficiencies.

We were extremely concerned by this and asked for members to communicate their concerns and support for retaining the independence of the WP. I am happy to say that in January, a

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decision was made by EBMT to retain the IEWP as an independent WP within EBMT. This is an excellent decision for us but at the same time we must take the opportunity to increase our efforts in looking at the outcomes of HSCT for PID, creating guidelines and undertaking excellent clinical research through collaboration in this area.

2. The EBMT meeting was held in Geneva in April this year. As always there was an IEWP session and a number of talks from a number of experts in the field;

Jaap Boelens – iv Busulfan conditioning in management of Inborn errors
Paul Veys – Benefits of cord blood transplants in primary Immunodeficiencies
Michael Albert – Management of DOCK8 deficiency
Marina Cavazza-Calvo – Gene therapy for inherited blood disorders - future prospects
Waseem Qasim – Virus specific T cell therapies - benefits and risk

The session was extremely informative and very well received and I once again thank the speakers for their time and input.

3. The Autumn WP meeting will be in Barcelona this year between November 2nd – 4th. The meeting will be held at the beautiful Casa Convalescència. This is the first meeting of the WP in mainland Spain and I hope this will attract physicians, nurses and scientists from the Iberian Peninsula to the meeting. If you are interested to receive further details please contact me and I can send you further practical details. We will be preparing the actual programme very shortly and as always if you have suggestions, please let me know - h.gaspar@ucl.ac.uk

Best wishes,
Bobby Gaspar
Chairperson ESID WP BMT&Gene Therapy

Clinical

Dear all,
My term will end with the upcoming biennial meeting. I would like to thank you for having entrusted me with the clinical working party head for the last 4 years.

Many projects are still in progress, see below.
Please consider whether you or somebody you know would like to take on the leadership of the clinical working party. It will be important to encourage, support and connect the activities of the different members in this field in order to live ESID and not just see each other every two years. It will always require the activities of a few, supported by all in order to improve our knowledge in PID. In my eyes, the main task is to facilitate these activities. If you have questions about the tasks, please don't hesitate to contact me.

Ongoing activities:

- **Development of SOP for diagnostic criteria in PID and CVID:** The project has been postponed for personal reasons, but will be finalized in 2012.

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- **Diagnostic workshops:** Diagnostics are continuing to be the second important step after awareness. I can highly recommend establishing diagnostic workshops in your country. If you plan any activity in your country please let us know we are happy to endorse meetings focussing on diagnostics of immunodeficiency and support you with our experience. On the upcoming ESID biennial meeting in Florence we will focus the Workshop of the Clinical Working party on “Diagnostics in combined immunodeficiency”.
- **ESID endorsement is now available for meetings on PID!**

You are now able to request ESID endorsement for your meeting (logo usage etc. but no financial support) year round. The right to organise ESID-Endorsed Meetings is one of the benefits of ESID membership. Requests should be sent to the ESID Administrative Office by e-mail (esid.admin@kenes.com) at least 3 months prior to the event and are subject to the approval of the ESID Board.

For details - [Click here](#)

The decision on potential financial support by ESID for activities of working parties in the field of PID has been taken. In the future it will be possible to ask for start up funds for projects. Currently the exact requirements and the available funds are to be defined. Look out at the website or the upcoming meeting for details.
- **BCGitis in PIDD:** The survey has been closed and the data evaluated and are currently prepared for publication.
- **Splenectomy in CVID:** The manuscript was submitted and was rejected. Currently we address the reviewers comments before resubmitting.
- **NEMO study:** The multi-institutional survey of the CLINICAL and Immunological PHENOTYPE of NEMO-deficient patients by Capucine Picard, Jordan Orange and Jean Laurent Casanova is recruiting, please contribute all your NEMO patients.
- **PBSCT in CVID:** The survey has been prepared and introduced at the last EBMT meeting beginning this month. Marta Rizzi and Claudia Wehr (CCI Freiburg) will retrospectively collect all available data on indication, management and outcome of PBSCT performed in adult CVID patients. A survey form is soon to be released. Please contribute your patients.
- **Good syndrome:** The new survey has been proposed for the clinical and basic immunological evaluation of patients with Good syndrome by:
Anna Simon, M.D. Ph.D.
Dept. of Internal Medicine, 463, University Medical Centre St. Radboud
P.O. Box 9101, 6500 HB Nijmegen, The Netherlands
e-mail: a.simon@AIG.umcn.nl
Please contact Anna for further details.

Thanks again to all of you who have supported this work. Hope to hear from you if you have questions regarding the Clinical working party election. See many of you in Florence.

With best regards

Klaus Warnatz
Chairperson ESID WP Clinical

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Education

Dear ESID members,

Within the Educational Working Party, we are already looking forward towards the organisation of the ESID Summer School 2013. First thing to decide is the location.

Dear ESID members,

Within the Educational Working Party, we are already looking forward towards the organisation of the ESID Summer School 2013. First thing to decide is the location. This should be pleasant, a bit secluded, not too expensive, close to an international airport, have a nice climate in September / October, and be suited to 40-45 participants + faculty members... Well, if anyone has suggestions, please let me know at esid@estherdevries.nl !

The Educational Day & Educational Breakfast Sessions for ESID juniors in Florence in October have all been planned. A lot of well-known speakers promise to make these into exciting and very 'educational' events. Please feel free to come when you attend the Florence meeting, but do realise that juniors come first! They will sit in the front rows, and will be the ones who will get the opportunity to talk during discussions.

Whether you are an ESID junior or senior member, or something in between: please join the [ESID junior's group on Facebook](#), and share your thoughts and ideas within the ESID juniors community .

Best regards,
Esther de Vries
Chair Educational Working Party

ESID Grant Reports

Kindly find the reports of the 2010/2011 ESID grant awardees below:

ESID Short-term grants

REPORT ON EDUCATION IN GENE SEQUENCING FOR PRIMARY IMMUNODEFICIENCIES by A. Merkler

 [A Merkler - Report](#) (58k)

2010 Short-term fellowship report - London, UK by A. Barroeta

 [Reporty by A. Barroeta](#) (148k)

ESID Long-term grants

2010 Long-term fellowship report by L. Schimke:

Function and phenotype of a novel IêBá mutation in anhidrotic ectodermal dysplasia with immunodeficiency

 [Report by L. Schimke](#) (324k)

2011 Long-term fellowship report by H. Bax

 [Report by H. Bax](#) (45k)

Registry

Registry Steering Committee

To discuss the future development of the ESID registry, a workshop was held in Freiburg on December 1 and 2, 2011 (A report on this workshop was published in the last ESID newsletter).

During the workshop, the participants agreed that an international "steering committee" for the ESID registry should be implemented. This steering committee should support the chairman of the ESID Registry working party in the management and further development of the Registry project.

It was decided that the steering committee should have no more than one representative per country, should include representatives from all countries where larger national registry activities have been developed and should not have more than 10 members to allow effective work. One representative each from PPTA and the patient organisation IPOPI as well as the persons who operate the registry, should also be members of the steering committee without entitlement to vote.

The members suggested by the workshop attendants were:

Stephan Ehl (Germany), Nuria Matamoros (Spain), Merlijn van den Berg (Holland), Beata Wolska (Poland), Annarosa Soresina (Italy), Vojtech Thon (Czech Republic), Nizar Mahlaoui (France), David Edgar (United Kingdom), Albert Farrugia (PPTA), Jose Drabwell (IPOPI), Gerhard Kindle and Benjamin Gathmann (Germany).

The steering committee met for the first time at Frankfurt Airport on February 3, 2012.

The ESID board has approved of the following constitution for this steering committee:

ESID registry steering committee

In an endeavour to improve the data quality and scientific value of the ESID registry, fundamental changes shall be introduced to the database under the guidance of a newly formed steering committee.

The following goals shall be achieved:

- Provide a simple 1 page dataset for a one point registration
- Provide a 2 page dataset specific for each of the 8 IUIS categories that provides more specific information on clinical manifestations, lab values and treatment and can be used as a yearly follow-up sheet.
- Patients shall be motivated to self-report quality of life data using simple evaluated QOL tools.
- Improve the technical structure of the database to make the system more user-friendly.

Composition of the steering committee

1. All countries that have created national registry initiatives collecting their data in or transferring their data to the ESID registry can name a national representative who is eligible to become member of the steering committee.
2. The number of national representatives in the steering committee with entitlement to vote shall not exceed 10 members.
 - a. The countries with the largest registries (Germany, Spain, Italy, France and United Kingdom) will have a permanent representative in the steering committee. The Chairperson of the ESID registry working party is a member of the steering committee, serving also as a representative of his country.
 - b. The (up to) 5 additional members will be appointed for a period of 2 years. Applications can be submitted to the Chairperson of the ESID registry working party. A decision for appointment will be made by the ESID registry steering committee by majority vote during the biannual ESID meeting.

- c. The following persons are members of the steering committee without entitlement to vote: as long as financial support for the registry is provided by PPTA, a representative from PPTA; a representative from a patient organization; up to two persons from the team that operates the registry; guests invited by the steering committee (e.g. representatives from other PID registries)

Meetings of the steering committee

1. The registry steering committee convenes twice per year, either in person or via telephone conference.
2. A protocol of the meetings is prepared by the Chairperson of the ESID registry.

Tasks of the steering committee

1. The registry steering committee has the following tasks:
2. Assignment of tasks to develop datasets to specialists in respective disease areas
3. Review and approval of new datasets
4. Review of suggestions for changes and improvements in the database
5. Approval of studies that wish to make use of the ESID registry for data acquisition
6. Approval of studies that wish to make use of data gathered in the ESID registry
7. Establish rules for publications (authorships) using data from the registry
8. Interaction with other international registries

Redesign of datasets

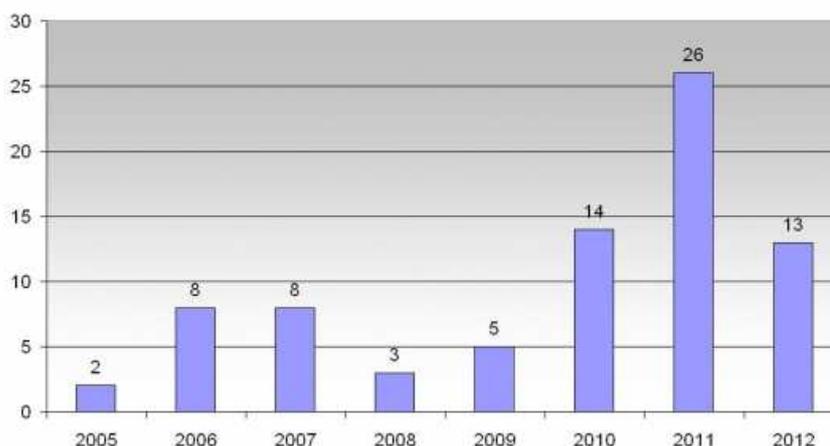
As a result of the Registry workshop (see above), the steering committee is now working on new datasets for the ESID registry. An expert for each IUIS category has been appointed who drafts a category-specific extended dataset. These drafts will then be made publicly available via the ESID website so that documenting centres and other ESID members can actively contribute to this process and give their comments.

The new database structure will be presented at the upcoming ESID Meeting in Florence (Oct 2012).

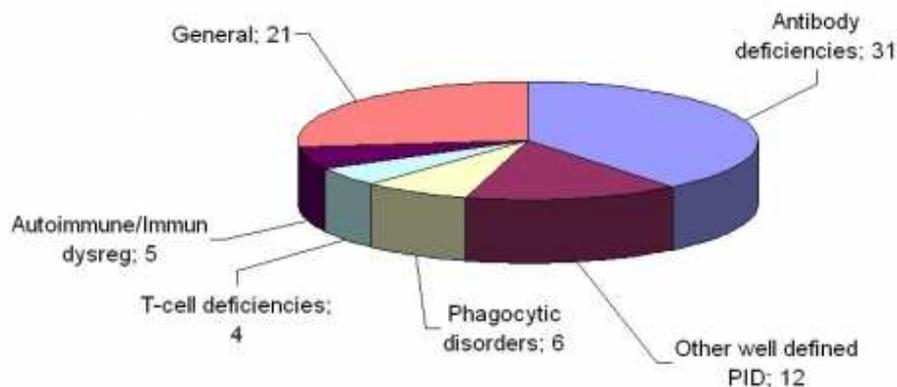
Research requests to the ESID Registry

Over the past years, we have received an increasing number of research requests to the ESID Registry. In many cases, researchers are looking for patients with specific features for collaborative research or the application of a new diagnostic tool. There have also been initiatives for retrospective and prospective studies of registry data, such as the PedPAD study (E. de Vries) or the Chest CT study (U. Baumann). The following charts give an idea of the registry research activities:

Requests by years (N=79)



Requests by main PID category (N=79)



Prof. Stephan Ehl
Chairperson ESID Registry

ESID Juniors

Dear ESID Juniors,
the winter was long and cold, but finally a sunny and colorful spring is replenishing our energy and enthusiasm!

Great learning and networking opportunities are ahead of us, all in the spirit of ESID Juniors. We are waiting in Freiburg for the 13th to the 16th of May, 31 international Juniors PhDs and Postdoc from 21 countries for the workshop 'Methods in Primary immunodeficiency'.

We organized a highly interactive event where methods and approaches to research PID will be the focus of discussion. Excellent faculty will guide us through the secrets of B, T, Innate cells, diagnostics and genetics: Andrea Cerutti, Francesco Annunziato, Taco Kuijpers, Chiara Bacchella, Bodo Grimbacher and Hermann Eibel. In the spirit of the sociability we'll also spend free time together enjoying the old city of Freiburg and hopefully a good local beer!

Anna Sediva is hosting the 11th Prague spring meeting, the 14th and 15th of May, where many Juniors will have the opportunity to present their clinical and research data and discuss in a well known informal and beautiful setting. Both events are booked out and I am glad to see that we can foster so much interaction and learning for Juniors! Thanks a lot to the organizers and to the motivated mentors!

The 15th of June, as every year, is the dead line for our short (up to 1 month), medium (3 to 6 months) and long (6 months to 1 year). You can use the map of center tool in our website (<http://www.esid.org/fellowship-centers>) and see if you can find something that stimulate your curiosity and push you out of your usual environment to go and learn, meet and network somewhere else in Europe, with the help of ESID. Just get this chance and apply for the fellowship!

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The most important up-coming event will be the educational day at the ESID biannual meeting in Florence, the 2nd of October. Educational talks from outstanding faculty and educational workshops are awaiting the Juniors willing to deepen their knowledge in PID. Juniors have the opportunity to submit their abstract as [‘educational abstracts’](#)

This will undergo a separate reviewing process, and will be discuss in a poster walk session in the educational day. Use this incredible opportunity to show and discuss your data submitting your work for the educational day! Deadline 16th of May, hurry up!

In the spirit of exchanging experiences and information I remind you our facebook closed group [‘ESID Juniors’](#)

where we can discuss and ask questions. Let’s meet there and organize for the coming ESID biannual meeting in Florence a ‘ESID Juniors’ networking event. Be active and participate!

It is a really exciting time, and I am looking forward to meet all of you in the workshop in Freiburg, and surely in Florence!

We’ll rock the house! I promise!

Marta Rizzi

Chairperson ESID Juniors

Young Researcher’s Corner

Report by Immacolata Brigida

HOW TO STUDY APOPTOSIS IN IMMUNODEFICIENCY

Apoptosis is an active and defined process of cells, which plays an important role in the development, regulation and maintenance of cell populations in tissues upon physiological and pathological conditions.

The majority of the developing lymphocytes are subjected to negative selection during genetic rearrangements of antigen receptor in order to control the pool of highly efficient and functional but not self-reactive immune cells and at the same time keeping lymphocyte numbers relatively constant. Necrosis is the process at which variation of physiological conditions, such as hypothermia or hypoxia, causes damage to membrane. It begins with an impairment of the cell’s ability to maintain homeostasis, leading to an influx of water and extracellular ions.

Due to the ultimate breakdown of the plasma membrane, the cytoplasmic contents including lysosomal enzymes are released into the extracellular fluid. Therefore, in vivo, necrotic cell death is often associated with extensive tissue damage resulting in an intense inflammatory response.

Apoptosis is most often found during normal cell turnover and tissue homeostasis, embryogenesis, induction and maintenance of immune tolerance, development of the nervous system and endocrine-dependent tissue atrophy.

Cells undergoing apoptosis show characteristic morphological and biochemical features likely chromatin aggregation, nuclear and cytoplasmic condensation and formation of apoptotic bodies containing ribosomes, mitochondria and nuclear material. The apoptotic bodies are engulfed by macrophages and thus are removed from the tissue without causing an inflammatory response.

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Thus, dysfunction or dysregulation of the apoptotic program is implicated in a variety of pathological conditions. Defects in apoptosis can result in cancer, autoimmune diseases and spreading of viral infections, while neurodegenerative disorders, AIDS and ischemic diseases are caused or enhanced by excessive apoptosis.

Among pathways able to induce cell death, caspase family or the activation of death receptors likely the tumor necrosis factor receptor (TNFR) gene superfamily, including TNFR-1, Fas/CD95, and the TRAIL receptors DR-4 and DR-5, are the main players of the process. Moreover, genes like the Bcl2 family member Bid and the proapoptotic Bax and Bak induce cytochrome c release into the cytosol. Bcl-2 is the first example of an oncogene that inhibits cell death rather than promoting proliferation. Bcl-2 was the first apoptosis-related gene that was recognized to play a role in tumorigenesis, and indeed, Bcl-2 is overexpressed in a variety of cancers, contributing to cancer cell survival through direct inhibition of apoptosis.

Mutations in the death receptor Fas results in increased survival of activated lymphocytes and the development of autoimmune lymphoproliferative syndrome (ALPS), in which both splenomegaly and lymphadenopathy are caused by accumulation of CD4-CD8- T cells.

During years, different methods were developed to study apoptosis. In the past, radioactive methods were mostly used to measure indirectly the relative amount of membrane disintegration through the leakage of cytoplasm from dying cells. Cons for the method were relatively hazardous for the operator. A simple method generally applicable also to small samples, such as those of SCID patients, is Annexin V flow cytometry staining, able to bind to phosphatidylserine (PS) that translocates from the inner side of the plasma membrane to the external surface.

Annexin V has a strong, Ca^{2+} -dependent affinity for PS and therefore can be used as a probe for detecting apoptosis. The combination of Annexin V with either propidium iodide (PI) or 7-Aminoactinomycin D (7-AAD) allows an in depth analysis of apoptotic and necrotic cells directly ex-vivo or after in vitro stimulation. Generally the staining consists in isolation of PBMC or the population of interest. The cells could be stained directly after isolation or after in vitro stimulation. At specific time point the cells are harvested, stained for specific surface markers and after classical staining, marked for Annexin V.

The use of direct antibody allows the detection of early phases of apoptosis before loss of cell membrane integrity. In order to verify membrane integrity, PI that intercalates in the DNA could be added to identify cells with disrupted membrane. The cells resulting negative for both annexin V and PI are the live cells, while cells positive only for annexin V resulted in the early stage of apoptosis as they exhibit the translocation of the phospholipid, so their membrane is almost intact. The cells positive for both annexin V and PI are in the late stage of apoptosis while the ones resulting positive only for PI will be the necrotic ones, as there will be only breakage of the plasma membrane. Propidium iodide signal is generally strong, and difficult to compensate on the flow cytometer. For this reason, 7-AAD is generally preferred for apoptotic studies because it does not readily pass through intact cell membranes and integrates only in the cells with permeabilized or disrupted membrane.

Thus, staining for apoptosis is a useful tool for the investigation of T or B cell defects or the possible implication of these cells in autoimmunity, because in the context of tissue damage or immunodeficiency, the release of self-antigens into the intracellular space and their presentation mediated by DC may prime the naive autoreactive T cell population, that were not eliminated for anergy or apoptosis.

Apoptotic cells still remain the best candidate source of self-antigens, in fact the impaired clearance of apoptotic cell debris and dsDNA by macrophages might activate TLR signaling in autoreactive B cells, leading to autoimmunity.

Immacolata Brigida

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PID Care in Development

Report on actions, first quarter 2012

Writing ESID newsletter contribution on February 29th, designated Rare Disease Day, is quite symbolic, particularly for ESID PID Care in Development WP. Final goals of this WP and Rare Disease Day are very alike and aim at the improvement of awareness, access to diagnosis and treatment for patients with rare disease where the majority of PIDs belongs.

Writing ESID newsletter contribution on February 29th, designated Rare Disease Day, is quite symbolic, particularly for ESID PID Care in Development WP. Final goals of this WP and Rare Disease Day are very alike and aim at the improvement of awareness, access to diagnosis and treatment for patients with rare disease where the majority of PIDs belongs.

The situation in PID field is specifically difficult in Eastern European countries, however, with continuous effort and awareness campaigns this starts to gradually change. This is well apparent on "Europe Immunoglobulin Map", new activity led by ESID PIDCD WP together with ESID Clinical WP and others. "Europe Immunoglobulin Map" gives clear demonstration on an access to treatment in individual countries. With a plan for yearly updates it provides a nice tool for mapping the situation on European level and gives everybody, and particularly to Eastern European Countries, clear data for their negotiations with respective authorities. ESID PIDCD WP thanks all representatives from all participating countries for their information.

Here you can find attached two summary slides for IVIG and SCIG situation in 2011. Both slides demonstrate clear progress in an availability of immunoglobulins for Eastern Europe, but in the same way delay in an introduction of newer SCIGs for their patients. We are currently preparing new updated questionnaire and we are looking forward to 2012 edition, with the help of each European country.

The situation is also going to improve with continuous effort of J project. Steering Committee of J project was held in January 2012 in Budapest. The meeting showed great progress and a real impact J project has on Eastern Europe. In 2012 the project goes through a transformation to more professionally functioning group and is further expanding. More information might be found here

[JProject Website](#)

Together with ESID we are looking forward to 2012 main event, our congress in Florence. ESID PIDCD

NEWS @



WP participates also in preparation of a workshop “Increasing Awareness of PID Worldwide”, organized by ESID educational WP. We welcome all your suggestions for that event and we hope that ESID 2012 will create an impulse for further improvement of situation in PID field.



Anna Sediva, M.D., Ph.D.
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University Hospital Motol
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150 06 Prague
Czech Republic



NEWS @



ESID 2016 Biennial Meeting - Call for bids

Dear friends & colleagues,

We are pleased to invite you to actively participate in this year's ESID Call for bids. Your commitment as a member of ESID is of vital importance to the Society, and we strongly count on your support in helping us shape the future of ESID.

ESID 2016 Call for bids

As you know bids for ESID Biennial Meetings take place four years in advance. In the light of this we would like to ask your nominations regarding the 2016 Biennial meeting!

The President and the location for the 2016 Biennial Meeting will then be decided by electronic voting after a presentation of the bid at the ESID General Assembly in Florence.

The agreement between ESID and Kenes – our core PCO from 2012-, will make it easy for you to host ESID biennial meeting. The agreement will delegate much of the organisational burden and the labour of soliciting and receiving abstracts to Kenes. Kenes will also take over the scores of publishing programs and abstracts, and the major work of arranging hotels, meeting rooms, and so forth. The scientific program will be the joint responsibility of ESID and the local Organising Committee. Your active participation in the bidding process is important for us!

The following information may serve as a guideline for the bidding process:

- The Host must be a full member of ESID
- Include details of the proposed city and venues - including description of facilities, travel connections and clear indications of restrictions for entering the country; include availability of hotel rooms in the proposed city;
- Propose dates (preferably for October)
- Include suggested programme outline
- Include possible social events
- Finances/provisional budget and information on local tax rules

Deadlines for bidding: 1st of August 2012

Send us your letter of intent and application to esid_admin@kenes.com. We would like to thank you for your continuous support and see you in Florence!



Biennial Meeting
of the European Society
for Immunodeficiencies | FLORENCE | ITALY
October 3-6, 2012



5th Biennial Meeting - Florence, Italy

ABSTRACT BOOK

The abstracts of the 15th Biennial Meeting of the ESID are being published in an online supplement of the [Clinical Immunology Journal](#) published by Springer.

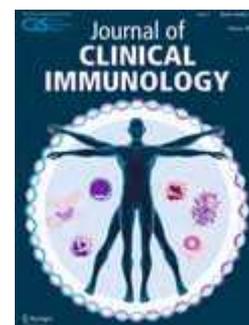
A printed copy of the Abstract Book has been handed out to participants during the meeting.

TRAVEL GRANTS

Congratulations to our successful ESID 2012 Travel Grant Awardees!

Zheng Jie
Moncada Marcela
EIFeky Reem
Makatsori Melina
Maggadottir Solrun Melkoka

Chinnabhandar Vasant
Abolhassani Hassan
Barbosa Rita
Kampitak Thatchai
Myles Ian



NEWS @



ESID Secretariat

PROGRAM

[Click here to view the program](#)

Meet the faculty

[Access information and CVs here](#)

CERTIFICATES OF ATTENDANCE & CME ACCREDITATION (20 Credits)

Contact us:

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1-3 Rue de Chantepoulet
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CH-1211, Geneva 1
Switzerland
Tel: +41 22 908 0488
Fax: +41 22 906 9140
E-mail: esid@kenes.com

ORAL AND POSTER AWARDS

If you have not received your claim form yet or have any questions, kindly contact Susanne Schmitt under esid.admin@kenes.com

Photo Gallery

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CME Certificate

Coming Soon



Baxter-ESID SCHOLARSHIP PROGRAM 2013 Fellowship Award

The European Society for Immunodeficiencies (ESID) and Baxter BioScience are pleased to announce the second time Fellowship Award, which offers an award to one individual for a 2 year fellowship program with a concentration or focus on primary immunodeficiency. The 2013 Fellowship Award will provide one individual with a two-year grant in the amount of \$100,000 in total.

The objective of the grant is to support the development of academic clinical immunology research careers of advanced fellows-in-training who have demonstrated a commitment to the study of primary immunodeficiency as a career path in Europe. Funding is to support the education and research endeavors of this individual.

The deadline for the award application is May 1, 2012 (12:00 pm CET) APPLICATIONS CLOSED

NEWS @



Guidelines and application form can be found below.

For further information or questions, kindly contact:

Susanne Schmitt (ESID Administrative Office)
esid.admin@kenes.com

Instructions & Guidelines

 [Baxter ESID Fellowship Award 2013 Instructions Guidelines FINAL](#) (100k)

Application Form

 [Baxter ESID Fellowship 2013 Application Form FINAL](#) (103k)



Figure 1: Congratulations to Dr. Margje Haverkamp