



IGGI, 1 YEAR LATER

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Belgische vereniging voor infectiologie en klinische microbiologie



2014

- Need for digitalised up-to-date infectiology guidelines identified.
- No agreement with Antimicrobial Therapy Inc., collaboration halted.
- o Decision for BVIKM-SBIMC to act as editor of its own guidelines,
- Dutch and French version.
- 1 FTE.
- 2014 2017: preparatory work (± 50 MDs and pharmacists involved and scientific bodies).
- November 2017: IGGI launch.

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CURRENT CONTENTS

- O Prevention and treatment of:
 - bacterial diseases.
 - viral diseases.
 - fungal diseases.
 - parasitic diseases.
- Surgical prophylaxis.
- o Tuberculosis.
- Compilations: dosing in neonates, infants, children, adolescents, adults, patients with renal insufficiency, ...



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CURRENT CLIENTS

- 1/3 Belgian hospitals.
 - Flanders: UZA, UZ Leuven, UZ Ghent, UZ Brussels, GZA Antwerp, ZOL Genk, Sint-Jan Bruges,
 - Wallonia: ISPP Charleroi, CHR Namur,
 - Brussels: CHU Saint-Pierre, CHIREC, Cliniques de l'Europe,
- > 200 individual clients.



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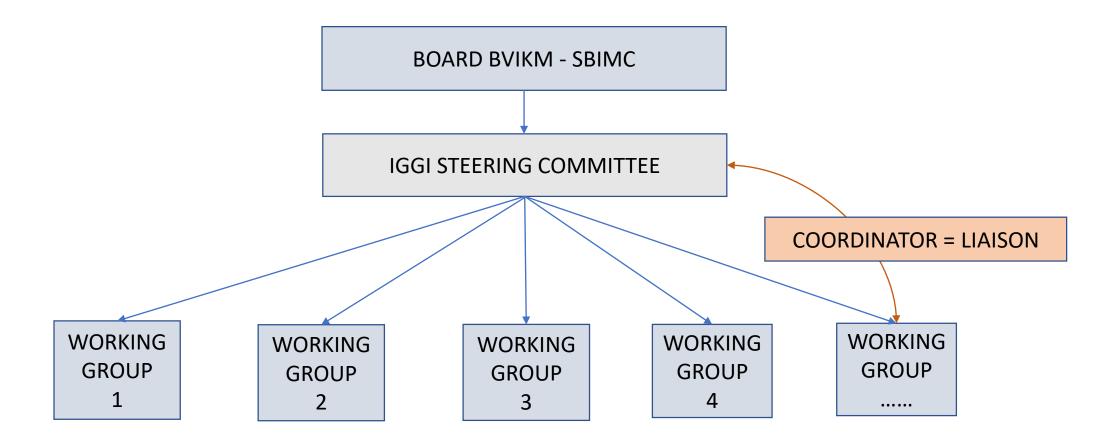
PLANS FOR THE COMING YEAR

- From http:// → https://
- Stepwise review of all current contents, starting with:
 - Osteo-articualr infections (Jean-Cyr YOMBI).
 - Urinary tract infections (Jerina BOELENS).
 - Surgical prophylaxis (Maya HITES, Jan DE WAELE).
 - Upper respiratory tract infections (TBD).
 - Sepsis (TBD).
 - Penicillin allergy and desensitisation (TBD).
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- Addition of new content.
 - Vaccination (Yves Van LAETHEM).
 - HIV infection (collaboration with BREACH).
 - OPAT (collaboration with VZA).
 - Foodborne infections (Denis PIERARD).
 - Mycobacterial infections, other than tuberculosis (Olivier DENIS, Paul DE MUNTER).
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WORKING GROUPS

- o Balanced mixture of (clinicians), microbiologists, at least 1 paediatrician.
- If relevant, a clinical pharmacist, othe specialists and a general practitioner will be invited to participate in the activities of the group.
- As the wotking group will also be responsible for delivering a correct (from a lingusitic point of view) tekst in Ditch and in French, the group must be composed of both native French and Dutch speakers.
- Gender must be taken into account.
- It is considered important that young colleagues be invited to participate in the activities of the working groups.

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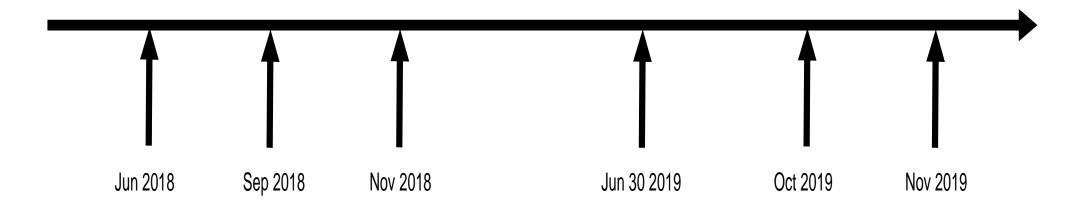
WORKING PRINCIPLES

- IGGI is not a textbook on infectiology, the content should be concise and presented in bullet points. The files should be as easy to read and as userfriendly as possible.
- The content of the reviewed files will be intended for the clinician non infectiologist implying that the information should be relevant and understandable for this group of professionals and not dive into the smallest details or deal with very exceptional clinical cases.
- The review of the content will be based on new relevant data: publications, guidelines, availability of anti-infectives, most recent resistance data, new techniques,
- For as far possible, validated guidelines edited by other Belgian scientific bodies will be taken into account and/or referred to. The same applies to best practices implemented in Belgian hospitals,
- Each working group defines its own ways of working.





PLANS FOR THE COMING YEAR



TIMELINE

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TIMELINE

- → November 2018: creation of steering committee, definition wyas of working, selection of chapters to be reviewed,
- November 22nd 2018: symposium BVIKM-SBIMC, plan presentation, call for collaborators,
- → December 2018: composition of working groups, 1st meeting.
- January → August 2019: reviewing process.
- September 2019: prefinalisation of reviewed chapters, selection of chapters for the coming year, nomination of working group coordinators, ...
- October 2019: extra BVIKM-SBIMC symposium on reviewed chapters, group discussions, amendments,
- November 2019: process finalised, launch of new working year.





IGGI NEEDS YOU



As a licensee (institutional or individual).

As a collaborator: member of a working group (volunteer at the IGGI desk).