

The A to Zs of ID

Reducing Burdens Across the Board

IDSA
FOUNDATION



| | | | | | | |
|--|----------------------------------|--|---|--------------------------|------------------------------------|----------------------------------|
| A Aspergillosis | B Blastomycosis | | | | | X Disease X |
| D Dengue | E Ebola Virus Disease | | | | F Fascioliasis | K Kala-azar |
| H HIV Infection | I Influenza | J Japanese Encephalitis | | | M Malaria | O Onchocerciasis |
| R Rabies | S SARS-CoV-2 Infection | V Varicella Zoster Infection | C Clostridium difficile C. diff | L Lyme Disease | N Neisseria Meningitidis | P Pertussis |
| W West Nile Virus Encephalitis | Y Yellow Fever | Z Zika | G Gonorrhea | Q Q Fever | T Tuberculosis | U Ureaplasma Infection |



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2021 ANNUAL REPORT

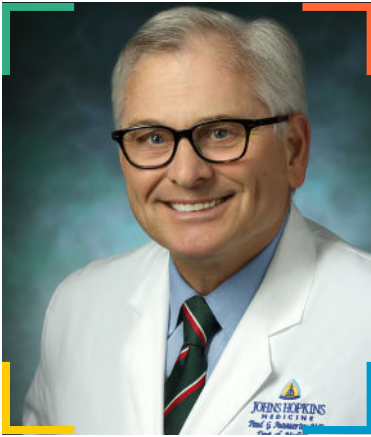
Front Cover Background Photo Courtesy of University of Alabama Birmingham



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Message from the Board Chair



*...the work of ID
and other health
professionals during
these trying past two
years has been nothing
short of heroic...*

From the common cold to the COVID-19 pandemic, infectious diseases affect everyone, ranging from nuisances to life-threatening illnesses. The COVID-19 pandemic pushed infectious diseases to the forefront, with many Americans seeing ID experts publicly engaged for the first time. Infectious diseases have been fundamental to global health long before the SARS-CoV-2 virus. The pandemic has served as a stark reminder that new threats may emerge, and existing problems – including antimicrobial resistance, tuberculosis and HIV – remain prominent perils for human health.

While the work of ID and other health professionals during these trying past two years has been nothing short of heroic, the progress that has been made against other infectious diseases in the wake of COVID-19 is also essential for saving and improving lives. Other conditions didn't stop during the pandemic. It's vital to advance work toward life-changing treatments or preventions for all disease states to lessen their burden on our communities and health care systems.

Better public understanding of infectious diseases is the first step to understanding ID professionals' life-saving impact on society and the need to meet workforce shortages by attracting medical students and residents. That's why the IDSA Foundation's newest initiatives aim to bring greater awareness to attract more trainees to the field.

Other fundamental initiatives of the Foundation focus on providing opportunities to facilitate the pathway toward building impactful careers for ID investigators and professionals who labor in research, education, clinical practice, public health and policy. We hope to address the A to Zs of ID – from Aspergillosis to Zika virus.

When you support the IDSA Foundation, you support the next generation of ID professionals. By ensuring a diverse and talented ID workforce today and in the future, we all wish for better preparation for future pandemics while diagnosing and treating infections we must face daily.

We hope the pages that follow will inspire you to see the sizeable impact your investment makes in the lives of trainees, ID specialists and the public at large. Your support is what got us here, and it's what will allow us to continue to grow, advancing our mission to reduce the burdens of all infectious diseases worldwide.

Regards,

A handwritten signature in black ink, appearing to read "Paul Auwaerter". The signature is fluid and cursive.

Paul Auwaerter, MD, MBA, FIDSA

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Our Investment

How the IDSA Foundation Is Contributing

The IDSA Foundation is the nation's leading nonprofit dedicated exclusively to growing, developing and empowering the essential field of ID medicine. With our sights set on reducing the burdens of infectious diseases worldwide, we ignite, support and sustain interest in ID research and medicine among medical students, residents and fellows – the future leaders of this critical subspecialty.

\$2.7 million invested in ID research in 2021

An increase of **\$1.7 million** compared to 2019 and 2020

More than **600 research opportunities** funded

1,500 early-career and aspiring ID professionals

benefitted through professional development and mentorship opportunities

ID Breadth: By the Numbers

IN 2019:



3 of the top 10
global causes of death were
infectious diseases.¹



3.4 million
emergency room visits
in the U.S. with infectious diseases
as the primary diagnosis.²



7.2 million physician
office visits in the U.S. with
infectious diseases as the primary diagnosis.²

In **2020, COVID-19 was the**
3rd leading cause of death in the U.S.,
behind only heart disease and lung cancer.²

THANKS TO ID PROFESSIONALS..



- The global impact of infectious diseases **decreased by about 40%** between 1990 and 2016.⁵
- There are **25 vaccine-preventable diseases**.¹
- **More than 4.8 billion people** have received at least one **COVID-19 vaccine dose**.³
 - More than 10.1 billion doses have been given total.³
- **2 infectious diseases** have been **eradicated** worldwide.¹
- An estimated 30+ million deaths globally have been averted in the last 20 years thanks to the **measles vaccine**.¹
- Global deaths from diarrheal diseases fell by more than 1 million between 2000 and 2019.¹

AS OF FEBRUARY 2022:



More than **385 million COVID-19**
cases reported worldwide.³

More than **5.7 million people**
died after contracting COVID-19.³

ANTIMICROBIAL RESISTANCE:



Responsible for more than **1.2 million**
deaths globally in 2019.⁴

Associated with **~4.95 million**
deaths globally in 2019.⁴

¹WHO

²CDC

³Our World in Data: COVID-19 Data Explorer (Feb. 3, 2022)

⁴Global Burden of Bacterial Antimicrobial Resistance in 2019: A Systematic Analysis (*The Lancet*, Jan. 19, 2022)

⁵Our World in Data: Burden of Disease

Infectious Diseases A to Z

Reducing Burdens Across the Board

Even amid a global pandemic, infectious diseases specialists continue to make progress against diseases that burden millions of people every day. Infectious diseases can be ever-moving targets, but ID detectives around the world dedicate their lives to unpacking the unknown, even when it leads to more questions that demand answers.

When ID professionals commit to working in the field, they take on an unspoken responsibility to do all they can to save and improve lives – even as things evolve and their own health is on the line. COVID-19 has shown us that the work of ID specialists is perhaps among the most important across research, patient care and public health policy, and this work is never done.

But as ID professionals fulfill their obligation to pour into their work for the benefit of people everywhere, it's critical to remember that this public duty also falls on the doorsteps of businesses, organizations and individuals. ID specialists provide us with the tools and knowledge we need to protect ourselves and others – but it's up to everyone to put them to use.



*Michelle S. Cespedes, MD, MS
Vice Chair, HIV Medical Association
Associate Professor of Medicine
Division of Infectious Disease
Mount Sinai Icahn School of Medicine*



Infectious Diseases A to Z: HIV

HIV: Building a workforce to advance prevention and treatment delivery

It's no secret that huge, life-saving strides have been made in HIV treatments over the last few decades, but a highly trained workforce is crucial to continue building on this existing progress. Unfortunately, attracting new medical professionals to the field remains an ongoing challenge.

“When I became a medical student, there were very few treatments for HIV and even fewer medical professionals who were willing to devote their time and care to the treatment of HIV,” said Michelle Cespedes, MD, MS, vice chair of the HIV Medicine Association and an associate professor of medicine in the Division of Infectious Disease at Icahn School of Medicine at Mount Sinai. “I got to see what HIV looked like before there were great treatments, and that experience to this day has changed my life.”

HIV infection was the leading cause of death¹ among all Americans ages 25-44 when Dr. Cespedes headed off to medical school in 1994. Today, an infection that used to be considered a “death sentence” at diagnosis can be treated so effectively that it can become undetectable by tests, thanks to the life-saving work of ID specialists.

Things that Dr. Cespedes used to think were synonymous with HIV, such as Kaposi sarcoma and other opportunistic infections, are now so rare that the fellows she trains have never seen them. Dr. Cespedes takes that as a sign that ID and HIV specialists have been doing a good job combatting the virus over the last decades.

Now that people with HIV are living fuller, healthier lives, research and treatment efforts have shifted to improving their quality of life. Dr. Cespedes identified three key areas of focus that demonstrate the need for keeping the HIV subspecialty alive:

- Treatment delivery;
- Prevention;
- Expanding a highly trained workforce.

“An active ID workforce is critical to make sure we’re ready and primed to deal with outbreaks and advance the science.”



Improving treatment delivery and implementation

In the 1990s, the guidelines for some HIV medications did not specify a length of time for treatment because people were not recovering. Today, people with HIV who adhere to treatment have a lifespan comparable to that of people without HIV, requiring an adjustment to the ways in which cases are managed.

“We went from no hope, to medicines aren’t great, to medicines are good enough to start thinking about how to best implement them to give the best quality of life,” said Dr. Cespedes. “Now we’ve shifted to thinking about treatment delivery.”

Current research efforts aimed at improving treatment delivery include possible ways to

reduce the number of regimens combined in medications, extend the length of time between medication doses and produce the fewest side effects possible. These efforts are also important for treatment adherence, which is necessary to maintain a good immune system and prevent transmission.

Approaching prevention with education, access and vaccine development

For Dr. Cespedes, prevention for HIV means making sure everyone who is at risk of acquiring HIV has access to prevention tools, especially among populations that are disproportionately affected by the infection.

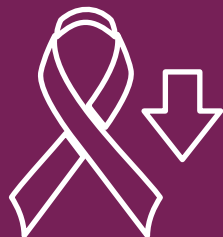
In 2019, Black people represented 13% of the U.S. population but accounted for 44% of new HIV diagnoses.² Similarly, people who identified as Hispanic or Latinx represented 18% of the U.S. population but accounted for 30% of new HIV diagnoses.² Reaching communities with high rates of transmission remains a priority.

Improved education is another focus to increase the acceptance of treatments. This means dispelling common misconceptions to make sure people know the facts. For example:

- Women with HIV can have an uninfected child;
- People with HIV can prevent transmitting it to their partner;
- A full, healthy life is possible with treatment.

These efforts are closely intertwined with advocacy for grant money to ensure people have access to low- or no-cost STD and HIV tests in their state.

New technology and advanced genetic research also means a future vaccine isn’t out of the question.



DID YOU KNOW?

New HIV infections declined by 8% between 2015 and 2019,² but HIV continues to disproportionately impact certain populations, particularly racial and ethnic minorities and men who are gay or bisexual or who have sex with other men.

“I think it would be impossible to say that there would never be a vaccine, or at this rate, even a cure using some of the new gene science and technology that is being developed,” said Dr. Cespedes..

Expanding an active workforce

There’s a shortage of infectious diseases specialists nationwide, which impacts access to HIV specialty care. According to the latest data, there was only one active ID physician for every 34,214 people in the U.S. in 2019,³ and nearly 80% of counties⁴ had no ID specialists. Work is being done to improve access to trained HIV specialists and to increase awareness among patients of resources like telehealth or hotlines that they may not know exist.

As part of her role with HIVMA, Dr. Cespedes advocates for loan repayment programs to encourage medical professionals to either stay in the workforce or consider entering it if financial issues may have been a deterrent, as compensation rates are relatively lower for ID practitioners compared to other specialties.

“An active ID workforce is critical to make sure we’re ready and primed to deal with outbreaks and advance the science,” said Dr. Cespedes. “ID specialists come in handy when there’s a pandemic, but we also help to prevent and improve care for ongoing epidemics.”

In partnership with HIVMA, the IDSA Foundation offers the HIVMA Clinical Fellowship Program, which provides grants to support one year of HIV clinical training to physicians who are not trained in ID at institutions that predominantly serve communities of color. Through mentorship and career development opportunities, the IDSA Foundation is developing a diverse pipeline of ID professionals to meet the challenges of today and tomorrow.

“The **HIVMA CLINICAL FELLOWSHIP PROGRAM** has allowed me to take courses in motivational interviewing and mindfulness-based stress reduction... This fellowship has helped lay my **FOUNDATION FOR A CAREER** in HIV and social medicine.

– Sunny Lai, MD, MPH



¹CDC

²HIV.gov

³Association of American Medical Colleges

⁴Where Is the ID in COVID-19? (Annals of Internal Medicine, October 2020)



*Paul Auwaerter, MD, MBA, FIDSA
Clinical Director
Division of Infectious Diseases
Johns Hopkins University
Chair, IDSA Foundation Board of Directors*



Infectious Diseases A to Z: Lyme Disease

Lyme disease: Advancing research to improve quality of life

Despite its commonality, Lyme disease remains full of mysteries that, if solved, could fill gaps in knowledge and improve people's quality of life. In their hunt for answers, ID detectives are making great strides in understanding and identifying the disease – even as it continues to evolve.

Lyme disease has grown both geographically and in case counts over the last two decades, as it has expanded beyond its more traditional confines of the Northeast and Pacific Northwest toward the South and Midwest. While the exact reasons for this expansion are unknown, some theories point to:

- A growing tick population caused by reforestation;
- Increasing popularity of suburbs and rural living, where the risk of exposure is higher;
- Less hunting and, consequently, fewer predators for reservoirs of *Borrelia*, such as mice and tick-carrying animals like deer.

“Trying to figure out why cases are rising is like trying to figure out exactly what causes climate change,” said Paul Auwaerter, MD, MBA, FIDSA, Sherrilyn and Ken Fisher professor of medicine and clinical director of the Division of Infectious Diseases at Johns Hopkins University School of Medicine. “There are a lot of potential factors.”

Dr. Auwaerter, a national clinical expert on Lyme disease, first became interested in Lyme disease as a young faculty member when he realized it was his most common outpatient consultation in a suburban Maryland clinic. The fact that it was understudied made it fascinating and left him with many ways to make an impact.

According to Dr. Auwaerter, there are three key focus areas where additional research is essential to reduce case counts and restore patients' quality of life:

- New prevention strategies;
- Earlier and more accurate diagnostics;
- A better understanding of people whose symptoms don't improve after antibiotics.



Vaccine-based prevention

Historically, prevention strategies for Lyme disease have focused heavily on public health education, reinforcing the importance of checking oneself for ticks after outdoor activities, applying insect repellent and wearing long sleeves and pants in wooded or grassy areas. While important, these efforts have not stanching the advancement of Lyme disease. An estimated 450,000 new infections occur annually. These numbers are a clarion call for better approaches.

But recently, efforts have picked up steam on a promising new vaccine for those at highest risk of developing the disease, such as landscapers, foresters, people who heavily engage in outdoor recreation or even people who sleep with their dogs, which could carry ticks. The vaccine will soon enter Phase III clinical trials to prove safe and effective prevention, following encouraging Phase II results demonstrating safety and efficacy.

“People are looking for answers. We’ve tried to harness the best of the available evidence, but there’s still more work to do to improve both the care and treatment of this relatively common infection.”

Narrowing the diagnostic window

Current testing for Lyme disease relies on antibodies, which may not appear until some weeks after infection. This makes it difficult to diagnose early Lyme disease if the characteristic skin lesion erythema migrans (also known as bull’s-eye rash) is absent. Often people recover entirely without antibiotic therapy but go on to more severe manifestations afflicting the heart, nervous system or joints.

“If you don’t have the tell-tale signs of Lyme disease, such as the signature skin rash, our current serologic testing may not pick it up,” said Dr. Auwaerter. “Even in people who develop the rash, the blood tests are negative early in the infection. At other times, people are unaware they have a tick bite that could be in a difficult-to-see location, such as on their back or behind their knee. This presents a challenge considering 30% of people don’t have additional symptoms initially other than a rash and feel otherwise well.”

According to Dr. Auwaerter, several new diagnostic strategies are currently undergoing evaluation. One looks to measure cell stimulation responses characterized by interferon-gamma release, a small molecule that plays an essential role in inducing an immune response. This would enable a diagnosis before developing antibodies, narrowing the window from infection to the start of antibiotic therapy, or potentially missing out if a negative antibody test dissuades consideration of a Lyme disease diagnosis. Other approaches include finding specific T-cell responses that indicate infection seen earlier than antibody responses.



DID YOU KNOW?

Lyme disease is the most common vector-borne illness in the United States, affecting approximately 476,000 people annually¹ with fevers, headaches, skin rashes and more.

Dr. Auwaerter also hopes a future test might signal a microbiological cure to confirm when treatment has worked, even if people remain with persistent symptoms such as fatigue or pain. This type of test could also be advantageous to identify whether a person has developed Lyme disease again, as current serological tests often remain positive for decades after successful treatment.

Understanding a lack of antibiotic response

While antibiotics are generally successful at curing Lyme disease, roughly 10-20% of people who have the infection do not fully respond.² This means symptoms can persist for months – or even years – becoming what is known as post treatment Lyme disease syndrome.

The use of additional antibiotics doesn't seem to help, but it's unclear why they don't help or how to make people feel better. More research is underway on the pathology of these patients to uncover alternative treatment strategies.

In the meantime, Dr. Auwaerter hopes more physicians will be willing to take the time needed to comprehensively evaluate people who have hard-to-diagnose-and-treat symptoms, such as pain and fatigue.

“People are looking for answers. We’ve tried to harness the best of the available evidence, but there’s still more work to do to improve both the care and treatment of this relatively common infection,” said Dr. Auwaerter. “It’d be great to have more resources to help engage more scientists and researchers. We want to widen the net of people interested in helping these patients get better.”

The significant funding targeted to understand the post-infectious condition in some COVID-19 patients (so-called “long-haul” COVID) will hopefully garner new knowledge that leads to breakthroughs in other post-infectious conditions, including post-Lyme disease.

While gaps in knowledge remain when it comes to preventing, diagnosing and treating Lyme disease, infectious diseases experts are hard at work unraveling each mystery for the benefit of patients. Recognizing that research is where medical breakthroughs begin, the IDSA Foundation is committed to investing in research with the potential to yield groundbreaking discoveries that could increase the quality of life for people around the world.

¹CDC

²Stationary Phase Persister/Biofilm Microcolony of *Borrelia burgdorferi* Causes More Severe Disease in a Mouse Model of Lyme Arthritis: Implications for Understanding Persistence, Post-Treatment Lyme Disease Syndrome (PTLDS), and Treatment Failure, (Discovery Medicine, March 2019)

*Cynthia Sears, MD, FIDSA
Professor of Medicine and Oncology
Johns Hopkins University
Professor of Molecular Microbiology & Immunology
Bloomberg School of Public Health*



A green square graphic with a white border. Inside the square, there is a large white letter 'C'. Below the 'C', the text "Clostridium difficile" is written in white, and below that, "C. diff" is written in white.

Infectious Diseases A to Z: C. diff

C. diff: Shortening the time from onset to relief

Even after decades of tireless research, many questions about *Clostridium difficile* infections remain unanswered, including who is most at risk of recurrence, whether there are effective treatments outside of antibiotics and why only some people develop symptoms. Work being done by infectious diseases specialists to identify these missing puzzle pieces could reduce the amount of time people are affected by debilitating symptoms and prevent the infection from returning.

While *C. diff* infection remains a major problem in hospitals, it has also begun to spread among healthy people who have not recently been in an inpatient health care setting, presenting additional challenges that warrant a new approach.

“*C. diff* is no longer just associated with the hospital, which is where it started,” said Cynthia Sears, MD, FIDSA, professor of medicine and oncology at the Johns Hopkins University School of Medicine and professor of molecular microbiology and immunology at the Bloomberg School of Public Health. “Now we have to think about it in any setting where individuals are receiving antibiotics.”

Dr. Sears first became passionate about better understanding *C. diff* in the early 2000s, when she saw a massive bloom of the infection and the burden it was bringing to hospital systems. She notes ID specialists have come a long way in understanding the disease and who is most at risk, yet the infection still acts as a moving target.

“*C. diff* is fascinating. We learn a lot and then you realize there’s still so much more to learn,” said Dr. Sears.

According to Dr. Sears, critical efforts are underway in three key areas where improvements are needed to reduce the disease’s burden on both patients and health care systems:

- Accurate diagnoses;
- Prevention;
- Access to effective treatments.



Diagnosics and testing

While ID specialists have come a long way in recognizing C. diff, Dr. Sears said it can sometimes be difficult to tell the difference between those who are asymptomatic and those who get sick. Polymerase chain reaction (PCR) tests can be too sensitive, while enzyme immunoassays, which are tests used to measure the presence of C. diff toxins (that induce colon disease) in stool, aren't always sensitive enough. This can make accurate diagnoses a challenge, especially in patients who may have other underlying conditions.

Another challenge has been raising awareness among physicians of when a C. diff test may be appropriate. Because of its prevalence, tests are often conducted simply because a hospitalized patient has diarrhea, which could lead to false positives or missing another cause for the symptoms.

Testing for C. diff has slowed during the COVID-19 pandemic, however, due to concerns about samples carrying the SARS-CoV-2 virus, which is known to enter the GI tract.

Prevention: Antibiotic stewardship

Much progress has been made in identifying those who are at higher risk for C. diff, but according to Dr. Sears, there's still a need to better understand and prevent recurrence. About one in six people who have had C. diff will become infected again,¹ and the overuse of antibiotics reduces the chance of a cure.

For this reason, C. diff infections are intertwined with the increase in antimicrobial resistance. Namely, excess antibiotic use increases risk for both C. diff and antimicrobial resistance. Much work is being done in the ID field to educate and encourage providers to use narrow-spectrum antibiotics that target specific bacteria for shorter periods of time.

Advancements in treatment

Antibiotic treatment of C. diff has a high cure rate, but recurrent C. diff is common, and people who experience multiple recurrences may need other options.

“We have some pretty crude ideas of who is at greater risk for reoccurrence, but we don't have a lot of ways to identify which patients should immediately be given a long taper of antibiotics to help their microbiota recover and keep the C. diff

“The challenges of infectious diseases never go away. That’s why, from a public health perspective, we have to improve our processes and prevention strategies to try to protect patients going forward.”



DID YOU KNOW?

Clostridium difficile, or *C. diff*, is an infectious bacterium that can cause diarrhea, fever, stomach pain and more serious intestinal conditions like colitis. It's estimated that *C. diff* affects more than half a million Americans each year.¹

knocked back,” said Dr. Sears. “Establishing ways to be smarter up front about how to best manage these patients is an area of great interest.”

Case reports make it seem like fecal transplant may be the answer to tough cases of recurrence, but these data can be biased and may make fecal transplant seem more effective than it is, said Dr. Sears. She believes better quality control products are needed to diminish the practice of putting one person's stool into another person (fecal transplant). Fecal transplant is a crude process, leaving, for example, uncertain if unknown or undetected pathogens will be transferred to a patient.

New drugs have shown promise, but high costs and low insurance coverage make it difficult for patients to access them. ID specialists like Dr. Sears won't halt their efforts until the best therapies become available to all patients.

“The challenges of infectious diseases never go away,” said Dr. Sears. “That's why, from a public health perspective, we have to improve our processes and prevention strategies to try to protect patients going forward.”

C. diff is just one example of an area where ID specialists have been improving lives for decades. Yet with the COVID-19 pandemic, many people are learning about the field of ID for the first time. Through efforts targeting public health education, the IDSA Foundation is increasing understanding of infectious diseases and the life-changing impact the work of ID specialists like Dr. Sears can have.



¹CDC

Our Strategic Imperatives

Cultivating a Diverse Workforce for Today and Tomorrow

We engage and activate new and seasoned ID talent through initiatives based on these strategic imperatives:



Workforce Development

The pipeline for training ID physicians lags behind other specialties even as the global trend of ID outbreaks is on the rise. We are working to even the odds in the ongoing battle against ID threats by developing a robust pipeline of ID professionals ready to meet today's ongoing ID challenges and those yet to come.



Diversity & Inclusion

We envision an ID workforce that mirrors our communities in terms of race, ethnicity, gender, socioeconomic background and other demographic

markers to increase health equity and provide trusted, culturally competent care across diverse patient populations. We make proactive efforts to recruit more women and historically underrepresented minorities into the field.



Pandemic Preparedness & Response

Science and history tell us the next pandemic is already on the way. We are working to build the capacity to save lives on a grand scale – and to preserve our mental, emotional and economic security in the process – now and for future generations.

Key Focus Areas

Aligning Our Efforts With the Potential for Impact

Our programs are strategically designed around four mission-driven focus areas with the highest potential for impact: life-saving research, recruitment, mentorship and public health education. By focusing on these key areas, our work ensures there will be a next generation of ID leaders to identify, mitigate and eradicate disease outbreaks.



Life-Saving Research

The IDSA Foundation helps bring new treatments and prevention strategies of infectious diseases to market by funding complex, life-saving research through fellowships and grants.



Mentorship

Our mentorship program creates a more diverse ID workforce to address the burdens of infectious diseases worldwide and cultivates the next generation of ID researchers, leaders of public health programs and clinicians on the front lines to provide life-saving care.



Recruitment

We work to widen the pathway to impactful careers in the field of ID for professionals who will work across ID research, education, clinical practice, public health, policy and more to address the A to Zs of ID.



Public Health Education

Public health education is fundamental to the work of the IDSA Foundation. Public understanding of infectious diseases is the first step to understanding the life-saving impact ID professionals have on all of society, as well as careers in the field of ID.



CLNP GQTU

IDSA Foundation in Action

Programs to Educate, Mentor, Recruit
and Lead Discovery

IDSA Foundation in Action: Life-Saving Research

Funding to Support Breakthrough Discoveries

Unraveling a Potential Link Between Infection and Alzheimer's: Microbial Pathogenesis in Alzheimer's Disease Grant

In 2021, we increased grant funding from nearly \$1.3 million to \$2.3 million for investigators across disciplines who are searching for evidence that infection may play a role in the causation of Alzheimer's disease. Compared to 2020's grant cycle, this year saw a 33% increase in the number of applications received, and 90% of applicants were not IDSA members.

Laura Cox, PhD, a 2020 grant awardee, recently received an RO1 grant of \$1.25 million in direct costs over five years to extend the pilot project she was able to start with the IDSA Foundation's grant funds. She hopes her studies, which focus on specific bacteria strains that may influence Alzheimer's disease, could one day be used to develop diagnostic screening tests and novel therapeutics.

"The IDSA Foundation's Microbial Pathogenesis in Alzheimer's Disease Grant provided critical startup funds to help explore a new potential infectious trigger of Alzheimer's disease focusing on Bacteroides fragilis. These findings helped me generate preliminary data that led to an additional five years of funding to study this in depth. I am so appreciative that the IDSA Foundation funded our studies in the early stages, which made a big impact in helping us investigate a potential root cause of AD."



Laura Cox, PhD

2020 Microbial Pathogenesis in Alzheimer's Disease Grant awardee
2021 Review Panel member



2021 Program By the Numbers:

\$1.71 million awarded



78 applicants



11 grant recipients



18 expert reviewers



2021 Grant Recipients:

Ilia Baskakov, PhD,

University of Maryland, Baltimore (\$250,000)

Elizabeth Bradshaw, PhD,

The Trustees of Columbia University (\$250,000)

Colette Cywes-Bentley, PhD,

Brigham and Women's Hospital (\$250,000)

Pinghui Feng, PhD,

University of Southern California (\$250,000)

Kristen Funk, PhD,

University of North Carolina at Charlotte (\$250,000)

Mark Hicar, MD, PhD,

University at Buffalo (\$100,000)

Xueyi Li, PhD,

Massachusetts General Hospital (\$100,000)

Jason Tchieu, PhD,

Cincinnati Children's Hospital Medical Center (\$100,000)

Richard Thompson, PhD,

University of Cincinnati (\$100,000)

Ravinder Nagpal, PhD,

Florida State University (\$30,000)

Kevin Zvezdaryk, PhD,

Tulane University (\$30,000)

2021 Review Panel:

David Andes, MD, (co-chair),

University of Wisconsin School of Medicine

Cindy Sears, MD, (co-chair),

Johns Hopkins School of Medicine

Brian Balin, PhD,

Philadelphia College of Osteopathic Medicine

Barbara Bendlin, PhD,

University of Wisconsin

Laura Cox, PhD,

Brigham and Women's Hospital

Bhanu Priya Ganesh, PhD,

UTHealth McGovern Medical School

Lindsay Kalan, PhD,

University of Wisconsin

Angela Kamer, DMD, MS, PhD,

New York University

Edward MocarSKI, PhD,

Emory University School of Medicine

Rodrigo Morales, PhD,

UTHealth McGovern Medical School

Phillip Pellett, PhD,

Wayne State University

George Perry, PhD,

University of Texas at San Antonio

Federico Rey, PhD,

University of Wisconsin

Sangram Sisodia, PhD,

University of Chicago

Christopher Thaiss, PhD,

University of Pennsylvania

Tyler Ulland, PhD,

University of Wisconsin

Venu Venna, PhD,

UTHealth McGovern Medical School

Richard Whitley, MD,

UAB School of Medicine

IDSA Foundation in Action: Life-saving Research

Advancing Groundbreaking Ideas in ID

Encouraging Innovation and Improvement: IDEa Incubator

A pitch-style competition, IDEa Incubator enables innovators and early-stage ventures with original inventions, products and ideas for improving ID care to share them with the ID community and receive feedback from industry experts. The program provides up to \$17,500 in funds annually. In 2021, the program saw a 108% increase in applications compared to 2020.



In 2021, the Foundation collaborated with Johnson & Johnson Innovation – JLABS for a second year on the competition. For the first time, applicants had an opportunity to also apply for BLUE KNIGHT™ residency as part of their IDEa Incubator application. Blue Knight is a joint initiative between JLABS and the Biomedical Advanced Research and Development Authority that aims to stimulate innovation and incubation of science and technologies that may improve global health security and preparedness.



“Many great ideas that could transform the world of infectious diseases never make it into clinical practice. There is an urgent need to promote innovation in infectious diseases, and efforts like IDEa Incubator have a significant impact in this field. By allowing clinician-scientists to share their work, receive feedback and obtain support on how to move it forward, the IDSA Foundation through IDEa Incubator supports the development and implementation of creative solutions to infectious diseases.”

Alvaro Ordonez, MD,
2021 IDEa Incubator first-place finalist

**2021 First-Place Innovation:
Molecular Imaging of Bacterial Infections (\$10,000)**

*Presented by: Sanjay Jain, MD; Filipa Mota, PhD;
and Alvaro Ordonez, MD, of Johns Hopkins University*

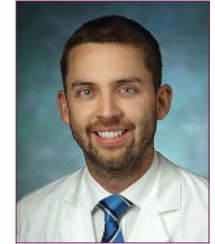
The team developed F-FDS, a patent-pending, bacteria-specific PET imaging technology that differentiates Gram-negative bacterial infections from other diseases, such as cancer metastases and tumors. Unlike more traditional diagnostic approaches, F-FDS does not require surgery or biopsy, it has nearly 100% specificity and it can detect infections anywhere in the body with same-day results.



Sanjay Jain, MD



Filipa Mota, PhD



Alvaro Ordonez, MD

**2021 Second-Place Innovation:
Cell-Based Bio-Electric Biosensor for the Detection of the
SARS-CoV-2 S1 Spike Protein Antigen (\$5,000)**

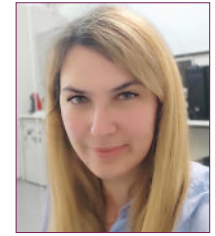
*Presented by: Kyriaki Hatziagapiou, MD, PhD;
Spyridon Kintzios, PhD; and Sofia Mavrikou, PhD*



*Kyriaki
Hatziagapiou, MD, PhD*



*Spyridon
Kintzios, PhD*



*Sofia
Mavrikou, PhD*

**2021 Third-Place Innovation:
Neonatal Antibiotic Stewardship App (\$2,500)**

*Presented by: David Kaufman, MD; and Josh Odrich,
University of Virginia*



David Kaufman, MD



Josh Odrich

Judges:

Erik Douglas, PhD,
Director of Digital Device Innovation,
J&J Consumer Products U.S.

Holly Frost, MD,
Pediatrician and Assistant Professor,
Denver Health and University of
Colorado School of Medicine

Kris Khalil,
Executive Director,
New Orleans BioInnovation Center

Courtney Law, PhD,
Managing Partner,
Biolocity

Pejman Naraghi-Arani, PhD,
Technical Advisor,
Biomedical Advanced Research &
Development Authority

IDSA Foundation in Action: Recruitment

G.E.R.M. Program Provides Medical Students Opportunities for Exploration of Careers in ID

Forty-one medical students with an interest in ID became the latest recipients of the 2021 G.E.R.M. awards. G.E.R.M., which is short for Grants for Emerging Researchers/Clinicians Mentorship Program, provides resources to medical students in support of a clinical or research project for up to a year while matching them with an IDSA or HIVMA mentor to provide encouragement and advice in implementing their project.

The goals of the program are simple: to increase interest in post-graduate training or a career in ID or HIV medicine. Awardees are given access to an experienced mentor who can share their expertise in ID and HIV research. Having this type of exposure while in medical school, the program aims to increase the number and diversity of ID and HIV research and clinical learning opportunities available to students.

The G.E.R.M. Program is a collaboration between the IDSA and HIVMA and replaces the previous IDSA Medical Scholars and HIVMA Medical Students Programs. This program is supported through its corporate partners, ViiV Healthcare and Merck.



2021 G.E.R.M. Program Award Winners

Aidin Alejo

University of North Carolina
at Chapel Hill
Mentor: Ross Boyce, MD
"Improving the Diagnosis of Human Monocytic Ehrlichiosis in Central North Carolina"

Sierra Atwater

Duke University School of Medicine
Mentor: Debra Lugo, MD
"Optimizing Clostridium Difficile Diagnoses in High-Risk Hospitalized Pediatric Patients With Hematologic Malignancies or Undergoing Hematopoietic Stem Cell Transplantation"

Rachel Bailey

University of Maryland
School of Medicine
Mentor: Mark A. Travassos, MD, MSc
"Serological Insights Into the Role of Surface Antigens in Protection Against Malaria in Malian Children With Hemoglobinopathies"

Greta Becker

The University of Iowa
Mentor: Robert Blount, MD
"The Effect of Air Pollution Particles on Airway Surface Liquid Killing of Bacille Calmette-Guerin"

Joshua Bloomstein

UC Davis School of Medicine
Mentor: Charles Langelier, MD, PhD
"Comparative Host Immunoprofiling and Viral Dynamics in COVID-19 Patients With and Without Underlying Immunocompromising Diseases"

Omid Cohensedgh

Columbia University Vagelos
College of Physicians and Surgeons
Mentor: Magdalena E. Sobieszczuk, MD, MPH
"Assessment of Sexual Behaviors, PrEP Usage, and Engagement in Sexual Health Services During the COVID-19 Pandemic in NYC"

Kyleigh Connolly

USCSOMG
Mentor: Jennifer Grier, MD
"Intracellular Survival and Immune Evasion of Distinct Acinetobacter Baumannii Isolates in a Fatal Necrotizing Fasciitis Infection"

Bailee Cummings

University of Arkansas for
Medical Sciences
Mentor: Juan Carlos Rico
Crescencio, MD
"Examining the Implementation of a Mobile Phone Intervention Method to Improve Health Outcomes in Patients with HIV/AIDS"

Carolina Duque

Johns Hopkins University
School of Medicine
Mentor: Robert Gilmas, MD
"Transcriptomic Identification of Biomarkers for Chagas Disease Progression"

Chesley Ekelem

Vanderbilt University
School of Medicine
Mentor: Aima Ahonkhai, MD
"The Role of Peer Support in the PEER/Naija mHealth Adherence Intervention for Vulnerable Youth Living With HIV in Nigeria"

Joshay Ford

University of Colorado
School of Medicine
Mentor: John-David Beckham, MD
"Post-Translational Modifications of Alpha-Synuclein During Acute Viral Encephalitis in Brain Tissue"

William Ford

Weill Cornell Medicine
Mentor: Matthew Simon, MD
"Cost-Effectiveness of Preventing Disseminated Strongyloidiasis in COVID-19 Patients"

Samir Kamat

Icahn School of Medicine
at Mount Sinai

Mentor: Matthew Akiyama, MD
"Facilitators and Barriers to Accessing
Hepatitis C Treatment Among Justice-
Involved Individuals During and After
Incarceration: A Qualitative Study"

Emily Kelly

University of California, San Francisco
Mentor: Jeffrey Whitman, MD &
Caryn Bern, MD

"Multicenter Study of Chagas Disease
Diagnostic Practices in California"

Rohan Khazanchi

University of Nebraska Medical Center

Mentor: Kathleen McManus, MD
"Examining ACA Marketplace Qualified
Health Plans' Insurance Benefit Design
for People with HIV"

Lauren Kim Sing

California University of Science
and Medicine

Mentor: Kaihong Su, PhD
"Comparison of Antibody Immune
Response to COVID-19 Infection and
Vaccination"

Asha Kodan

University of Maryland
School of Medicine

Mentor: David Riedel, MD
"Cancer in Patients With and Without
HIV Infection in the National Cancer
Registry of Rwanda"

Rebecca Kruc

University of Minnesota
Mentor: Mark Schleiss, MD

"Cytomegalovirus Viral Load
Epidemiology from a Universal
Screening Study"

Vicky Vi Le

University of Washington
Mentor: Paul Drain, MD

"Elucidating the Relationship Between
HIV and Syphilis Co-Infection in the
Umlazi Township of South Africa"

Amanda Liberman

Yale School of Medicine
Mentor: Frederick Altice, MD

"Evaluation of a Screening, Brief
Intervention, & Referral to Treatment
(SBIRT) Program in the Kyrgyz Republic
For Incarcerated People With Opioid
Use Disorder Transitioning to the
Community"

Eric Lin

David Geffen School of Medicine
at UCLA

Mentor: Jeffrey D. Klausner, MD, MPH
"Global Algorithms to Predict Ceftriaxone
Resistance in *N. Gonorrhoeae*"

Jessica Lindner

University of Kentucky
Mentor: James Keck, MD

"Evaluation of Nursing Home Wastewater
Surveillance for SARS-CoV-2"

MacKenzie MacRae

Tufts University School of Medicine

Mentor: Ramnath Subbaraman
MD, MSc
"Developing and Evaluating a Treatment
Literacy Intervention for Improving
Tuberculosis Treatment Outcomes in
India"

Monica Manglani

Penn State College of Medicine
Mentor: Jessica Ericson, MD, MPH

"Etiology of Neonatal Sepsis in the
Age of Coronavirus"

Erin McDonnell

Rutgers Robert Wood Johnson
Medical School

Mentor: Martin Blaser, MD
"Understanding Predictive Clinical
Parameters to Aid in COVID-19
Prognosis"

Matthew Melton

University of Kentucky
Mentor: Alice Thornton, MD

"COVID-19 Patient Medical Care Using
Telemedicine: A Retrospective Analysis
to Analyze the Efficacy of Telemedicine
Care and Early Admission During Acute
Phase Covid-19 Disease Progression"

Charissa Obeng-Nyarko

Florida State University
College of Medicine

Mentor: Asim Jani, MD, MPH, FACP
"Microlearning Tool for Dermatologic
Manifestations of Infectious Diseases"

Joshua Olson

University of California San Diego
School of Medicine

Mentor: Erlinda Ulloa, MD
"EDTA as Adjunctive Therapy for Drug
Resistant Staphylococcal Infections"

Katelyn Parsons

University of Minnesota
Mentor: Mark Schleiss, MD

"Investigating CMV Pathogenesis and
Breast Milk Transmission in Premature
Infants Who Acquire CMV Viremia"

Rachel Patel

Rutgers Robert Wood Johnson
Medical School

Mentor: Susan Boruchoff, MD
"Vaccine Education for Medical Students"

Sonya Prasad

Icahn School of Medicine at Mount
Sinai

Mentor: Esther Freeman, MD
"Investigating the Cutaneous
Manifestations of Long COVID Infection"

Namita Raghavan

Virginia Commonwealth University
Mentor: Priya Soni, MD

"Evaluating Viral Shedding and
Development of Immunity in Mother-
Infant Pairs affected by SARS-CoV-2"

Nicole Robertson

University of Kentucky
College of Medicine

Mentor: James Zachary Porterfield
MD, PhD

"Inflammatory Response of COPD in
People Living With HIV in Uganda"

Coulter Small

University of Florida
Mentor: Norman L. Beatty, MD

"Knowledge, Attitudes and Practices
for Chagas Disease Among Providers
in Florida"

Hannah Tierney

University of California, San Francisco
Mentor: Phyllis Tien, MD, MSc

"Trends in Alcohol and Substance Use
During the COVID-19 Pandemic Among
People Living With or at Risk for HIV
infection in the United States"

Christine Tzelios

Harvard Medical School
Mentor: Ruvandhi Nathavitharana,
MD

"Evaluating the Diagnostic Accuracy of
Digital Chest X-ray as a Triage Test to
Identify Patients with TB Presenting to a
Healthcare Facility in Lima, Peru"

Diya Uthappa

Duke University School of Medicine
Mentor: Chris Woods, MD

"Utilizing Environmental Surveillance
of SARS-CoV-2 as a Marker for Disease
Transmission in the Classroom Setting:
An Observational, Prospective Cohort
Pilot Study"

Claire Weinstein

University of Cincinnati
College of Medicine

Mentor: Senu Apewokin, MD
"In Vitro Characterization of Human
Host Intestinal Defenses Against
Chemotherapy Associated Clostridioides
Difficile Infection"

Julian Weiss

Yale School of Medicine
Mentor: Serena Spudich, MD

"Longitudinal Analysis of Synaptic
Density in People Living with HIV"

Grant Wilson

Johns Hopkins University
School of Medicine

Mentor: Cynthia Sears, MD
"Association Between Antibiotic Use and
Clinical Outcomes of Cancer Patients
Treated With Immune Checkpoint
Inhibitors"

Devon Zander

NYU - Grossman School of Medicine
Mentor: Vanessa N. Raabe, MD

"A Telephone Survey on the Knowledge,
Attitudes, and Practices of Caregivers
Regarding Childhood Vaccination
During the COVID-19 Pandemic"

IDSA Foundation in Action: Recruitment

Igniting Interest in ID Career Paths

Cultivating Interest in ID Through Hands-On Education: ID Student Interest Groups Grant Program

Designed to elevate the profile of ID careers, the ID Student Interest Groups Grant Program engages medical students and residents outside of their traditional classroom setting with hands-on education about the field of ID. All groups benefit from the support of a mentor sponsor who is active in the field.

The fall 2021 semester saw a **56% increase** in completed applications compared to the spring 2021 semester.

Students used the funds to:

- Cover the cost of marketing and supplies for mobile, on-campus vaccine clinics;
- Launch new ID student groups and begin hosting activities;
- Host expert panels on vaccine hesitancy, HIV and other topics within their medical school;
- And more!



ID Student Interest Groups Spotlight: Johns Hopkins University

Carolina Duque is a second-year medical student at Johns Hopkins University and co-president of the institution's ID Student Interest Group.

How have the funds from the IDSA Foundation made an impact on your group over the past few years?

The funds have greatly helped our student group carry out various events, both for our IDSIG and the medical student body as a whole. This has allowed us to promote learning and interest in infectious diseases to many students at Johns Hopkins. Recently, we hosted a well-attended multidisciplinary panel on substance use, which included its risk for infections and strategies to mitigate the risks associated with substance use and infection.

Why do you feel student interest groups are important in the field of ID?

Student interest groups allow students to connect with mentors in the field, explore their interests and further their classroom learning through the additional activities hosted by IDSIGs. This is particularly important in ID since it is a subspecialty that tends to be overlooked by incoming students and should be better promoted. ID is also a field that is harder to get exposure to.

How has your participation in your IDSIG impacted your own career interests?

Through my time in my IDSIG I have been able to explore various aspects of ID that I had not previously delved into. I have also been able to connect with many incredible ID faculty members that have taught me so much and have served as invaluable mentors for my future career.

“With the advent of COVID-19, more students than ever are becoming aware of ID medicine and are curious about the field. Our event will introduce them to ID very early on in their medical career.”

Erika Schneider-Smith
Second-Year Medical Student,
Washington University in St. Louis School of Medicine

IDSA Foundation in Action: Recruitment

AAMC Virtual Specialty Forum: Providing Equitable Access to Specialty Exposure

In March 2021, the IDSA Foundation participated in the Association of American Medical Colleges virtual specialty forum hosted by the Careers in Medicine Program. This national, no-cost forum provided equitable access to specialty exposure, where first- and second-year medical students could view resources, chat with specialty representatives and attend live presentations with Q&A sessions.

To encourage medical students to explore ID as their subspecialty, we presented on the breadth of career path options that make up the field, and our virtual booth offered insight to define career goals, gain the required knowledge and stay engaged through related opportunities.

ID Career Paths Initiative: Matching Student Interests With Vital ID Roles

No matter your interests, there's a critical role you can play in reducing the burdens of infectious diseases. That's the message we're sending to medical students and residents as they consider the subspecialty that best fits their goals.

In 2021, the IDSA Foundation launched an initiative focused on the variety of ID career paths to provide information on the many paths of an ID career to the next generation of medical professionals. These resources aim to help students and trainees not only develop their careers but get excited about the impact they can make through a career in ID.

Available online, this site outlines training and funding opportunities, organizations to join, ways to gain experience and things to consider when exploring the following ID careers. Examples of featured areas within ID include:

- **Clinical practice:** Infectious diseases specialists who work in a clinical environment are on the front lines of the latest ID challenges, whether it's treating COVID-19 patients or managing the complex care required to treat HIV.
- **Transplant ID:** Transplant ID is a relatively new subspecialty in which ID specialists help to manage and treat infections in organ and stem cell transplant recipients.
- **Pharmaceutical industry:** From developing life-saving vaccines and diagnostics to ensuring equitable access to treatment, there are plenty of ways to make a difference that align with your career interests.
- **Public health:** People who are trained in public health can work in a variety of settings, including in state and local health departments, universities, nonprofits, corporations, within the CDC and beyond.
- **Medical education:** A career in medical education provides opportunities to mentor, train and inspire medical students and trainees.
- **Global health:** In an increasingly interconnected world, infectious diseases can spread more easily than they ever have before. Careers in global health span clinical care, policy, research and public health.
- **Antimicrobial stewardship:** Antimicrobial stewardship is the effort to protect patients by improving the treatment of infections, avoiding the overuse of antibiotics and reducing microbial resistance.

For more information about the many directions a career in ID can take, visit the ID Career Paths Initiative at www.idsafoundation.org/ID-Career-Paths/

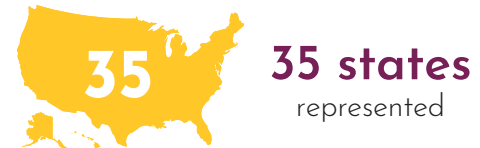
IDSA Foundation in Action: Mentorship

Providing Access to Leaders in the Field

Fostering Meaningful Relationships: IDWeek Mentorship Program

Our 2021 IDWeek Mentorship Program, held virtually, solicited applications from a diverse range of mentees and mentors across the country with varied career interests and levels of training. Mentees expressed interest in clinical practice, public health, clinical and lab-based research, pediatrics and pharmaceuticals and were paired with mentors whose careers best aligned with their professional goals.

2021 PROGRAM STATS:



Mentor
experience
levels ranged from

>5 to
20+
years

Mentees

varied in levels of training:



28 medical students

23 residents

3 PharmD students

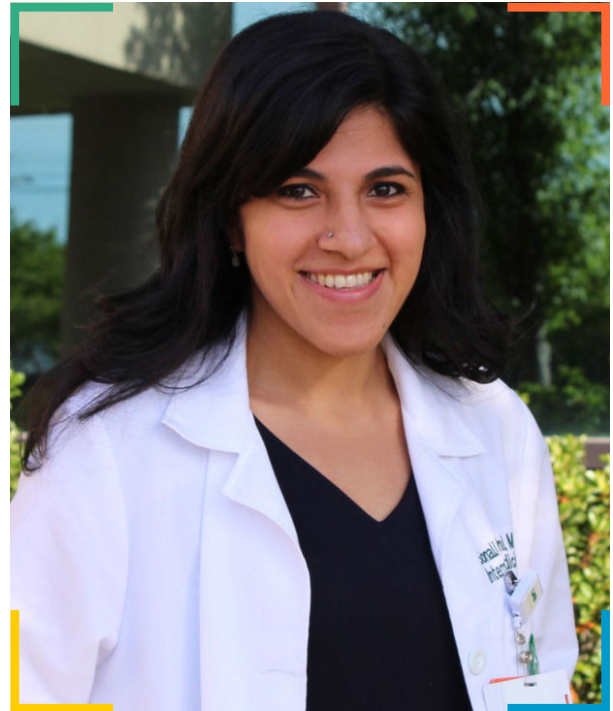
6 PharmD residents

From Mentee to Mentor

Sonali Advani, MBBS, MPH, first participated in the IDWeek Mentorship Program as an internal medicine resident in 2015, when she was matched with mentor **Helen Boucher, MD, FACP, FIDSA**. Now co-medical director for the Duke Infection Control Outreach Network and an assistant professor of medicine in Duke University's Division of Infectious Diseases, Dr. Advani passes on what she gleaned from Dr. Boucher and other mentors by serving as a mentor herself.

What influence did your IDWeek mentor have on you?

As a woman in medicine, it was great to be paired with a female mentor. Dr. Boucher advised me on important matters related to negotiation and contract review for jobs, as well as encouraged me to network and reach out to ID faculty outside my institution, collaborate with them and eventually form mentoring relationships. Dr. Boucher's advice led me to where I am today, with ID faculty from different academic institutions serving as mentors, almost like a board of directors, helping me make the best decisions for my career and professional growth.



Sonali Advani, MBBS, MPH

“The most rewarding part is being able to pay it forward and advocate for others.”

What have you found most rewarding about being a mentor in ID?

The most rewarding part is being able to pay it forward and advocate for others. I hope to continue to help my mentees achieve their goals by serving as a cheerleader and champion while teaching them to advocate for themselves.

As someone who has seen the program from all sides, why do you think programs like the IDWeek Mentorship Program are important in the field of ID?

The IDWeek Mentorship Program is the cornerstone of the IDSA Foundation's and IDSA's efforts to promote the recruitment and retention of trainees while focusing on diversity and equity. This program is especially important to recruit and support racial and ethnic minority individuals like me by providing tools and opportunities to succeed and level the playing field.

IDSA Foundation in Action: Public Health Education

Celebrating an ID Workforce That Mirrors Our Communities

Diversifying the Field: Celebrating Hispanics in ID

During the virtual Hispanic Heritage Month celebration October 14, the IDSA Foundation announced the dedication of its new Hispanics in ID Executive Conference Room. The dedication serves to celebrate and recognize the achievements of current and former Hispanic trailblazers while also raising critical funds to support the next generation of Hispanics in the field of ID.

“Recent census data suggest that about 16% of the population is Hispanic, and that number is growing rapidly. Yet out of the more than 90,000 students in U.S. medical schools, only 6.6% are Latinx or Hispanic,” said Carlos del Rio, MD, FIDSA, president-elect for the IDSA Board of Directors Executive Committee and executive associate dean at Emory School of Medicine at Grady Health System. “The physicians and health care providers who care for this population are not growing as fast, so there’s an important role for us to inspire the next generation and to attract more Hispanics into medicine, including infectious diseases.”

The funds raised through the conference room will be directly invested into opportunities for Hispanic medical students. Each year the Foundation will host an abstract competition specifically for Hispanic medical students and award top applicants with grants to cover travel and other costs associated with attending IDWeek, the annual conference featuring the latest science and bench-to-bedside approaches in prevention, diagnosis, treatment and epidemiology of infectious diseases across the lifespan.

The Foundation will also honor an individual who demonstrated a deep commitment to mentorship and engagement of Hispanic medical students throughout

their career. The 2021 inaugural dedication is in memoriam of infectious diseases physician Francisco Marty, MD.

About Francisco Marty, MD

Dr. Marty was an associate physician at Brigham and Women’s Hospital and an associate professor of medicine at Harvard Medical School. While he practiced for more than 20 years, he was most recognized for his thought leadership in transplant infectious diseases and his critical role in testing the drug remdesivir during the early days of the COVID-19 pandemic. His clinical trials were among several studies that led the U.S. Food and Drug Administration to expand its emergency use authorization of the drug to include the treatment of all patients hospitalized with COVID-19.

Liliana Gamboa, sister of Dr. Marty, said his impact in the field of ID was best described by his colleagues in a eulogy written in May, which stated that “because of his brilliance and drive, he had a tremendous and durable impact in so many areas of infectious diseases, with seminal, practice-changing contributions in how we care for patients with CMV, COVID-19, influenza, respiratory syncytial virus, parainfluenza virus, human herpesvirus-6 infections, invasive aspergillosis, mucormycosis and other invasive fungal diseases, and composite tissue transplantation.”

“Having Francisco as the first Hispanic doctor recognized by the IDSA Foundation makes us very proud and is absolutely aligned to how he always acted,” said Gamboa. “He was an immigrant from Venezuela and was very attuned to the additional challenges immigrants, foreign-born physicians, minorities and women face in embarking on their careers in medicine in the United States.”



Francisco Marty, MD

“Francisco always went out of his way to support the career goals of immigrants, minorities and women, using his funds and looking for grants to support additional training and coursework,” said Gamboa. “The scholarships created by the IDSA Foundation to grant opportunities for Hispanic students and future ID doctors will be something he would feel elated about.”

IDSA Foundation in Action: Public Health Education

Celebrating an ID Workforce That Mirrors Our Communities

Diversifying the Field: Women of ID Program

Beginning in 2019, the IDSA Foundation asked for nominations of women who had led the charge in the field of ID. Throughout 2019 and 2020, 10 women leaders, mentors and pioneers were recognized. Their achievements in research and clinical care have made advancements within ID possible and encouraged and inspired other women in the ID field.

Throughout 2021, the Foundation continued the Women in ID program by spotlighting six additional women making meaningful contributions in the world of ID. Highlighted during 2021, these ID leaders include:

- Adaoira Adimora, MD, MPH, FIDSA
- Liise-anne Pirofski, MD, FACP, FIDSA
- Helen Boucher, MD, FACP, FIDSA
- Cynthia Sears, MD, FIDSA
- Anne Gershon, MD, FIDSA
- Upinder Singh, MD, FIDSA

While celebrating the many achievements of women in the field, the Women of ID Program also highlights opportunities for further diversifying the field.



DID YOU KNOW?

Recent census data suggest that roughly 16% of the U.S. population is Hispanic, yet only 6.6% of the more than 90,000 students in U.S. medical schools are Latinx or Hispanic.

IDSA Foundation in Action: Public Health Education

Your Health: Increasing Public Awareness

In November, the IDSA Foundation launched Your Health, a platform designed to educate about infectious diseases through informational content and webinars with industry experts.

Infectious Diseases A to Z

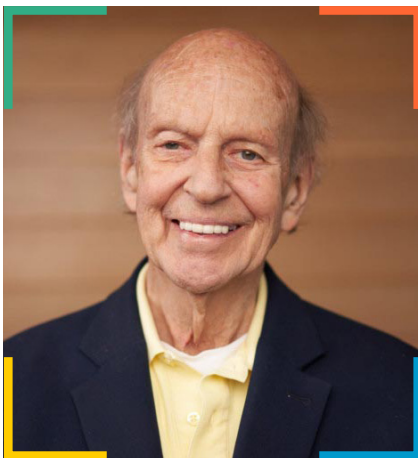
Housed within the Your Health platform, the Infectious Diseases A to Z initiative offers a video series and glossary of A-to-Z terms to provide a glimpse into the vast world of ID.

To kick off the initiative, the Foundation launched a social media campaign to inform and engage the public on the global impact of infectious diseases by highlighting one disease for each letter of the alphabet. The campaign ran weekly from June through November and earned more than 37,800 impressions, nearly 1,700 engagements and 188 link clicks across multiple platforms.

Dr. John G. Bartlett Education Series

Dedicated to the thought leadership and groundbreaking work of ID pioneer John G. Bartlett, MD, FIDSA, this series features lectures by esteemed ID professionals and patient advocates in the areas of C. diff, HIV, antimicrobial drug resistance and more. Our inaugural lecture, C. diff Talk, was launched in partnership with Seres Therapeutics and included more than 170 participants.

The Dr. John G. Bartlett Education Series also includes previously recorded talks by Dr. Bartlett on topics such as the story behind the elimination of smallpox, now only a historic footnote due to a successful vaccination program.



Founding Sponsor: Seres Therapeutics



SERES
THERAPEUTICS

Your Support Is an Investment in the Future of ID Medicine

For more than 20 years, the IDSA Foundation has worked to widen the pathway to impactful careers in the field of ID for professionals who will become tomorrow's leaders in ID research, education, clinical practice, public and global health, policy, pharmaceuticals and more. Through mentorship, research funding and fellowship grants, we invest hundreds of thousands of dollars each year toward opportunities for a diverse pool of trainees and early-career investigators, then cultivate this next generation of ID heroes to help them be the best they can be. In recent years, this investment has increased to more than \$2 million.

This work is supported by individual donors, Industry Partners and corporate and institutional grants, whose generosity makes it possible for us to ignite and sustain interest in ID research and medicine.

When you donate to the IDSA Foundation, you:

- Elevate the profile of ID as a vibrant career choice;
- Facilitate additional grants for research;
- Expand mentorship opportunities for medical students and residents;
- Support our efforts to recruit women and historically underrepresented populations to the field;
- Ensure that the public knows the impact ID heroes make on our personal lives every day.



Expanding Our Impact

Strength in Numbers

The growth in our impact is a direct result of the growth we've experienced in our individual and corporate supporters. Because of you, more aspiring and seasoned ID professionals are receiving the support they need, whether that's through mentorship, research funding or career development.

GROWTH IN DONATIONS OVER TIME

Total amounts raised (individual giving):



2021 Fundraising Campaign Totals:

- Summer Match: **\$49,434**
- End-of-Year Campaign: **\$65,013**
- Thank a Pandemic Hero: **\$1,377**



Breakdown of 2021 Gifts:

- Visionary Society: **\$121,786**
- Leadership Society: **\$94,828**
- One-Time Unique Gifts (Online): **\$147,674**
- Direct Mail: **\$102,506**
- Membership Renewal Gifts: **\$244,900**
- IDWeek Registration Gifts: **\$26,465**

Ways to Support: Individual Giving

2021: The Impact of Individual Support

Every donor who gifted...

\$5

per month

covered the cost of an annual IDSA membership for a medical student.

\$20

per month

covered the annual cost of the Mentorship Program's mentoring, learning and engagement platform for six mentor/mentee pairs.

\$42

per month

provided grant support for an ID Student Interest Group.

\$125

per month

provided three travel grants for a medical student or resident to attend IDWeek.

Donor Trends

Increases occurred between 2021 and 2022

83%

increase in the number of individual monthly donors

40%

increase in the number of individual donors who gifted \$5,000 and above (Visionary Society)

64%

increase in the number of individual donors who gifted \$500 and above (Leadership Society)

~10%

increase in total donations

In 2021, **28%** of IDSA members donated to the Foundation, an increase from **24%** of members who donated in 2020.

Ways to Give

The IDSA Foundation is the grateful recipient of gifts from individual donors from around the world. Every gift to the Foundation is creating positive change for the future of the ID profession, and it is also creating a meaningful experience for the individuals responsible for making the gift.

To learn more about creating your own meaningful gift experience, contact Allison Brouillette, director of philanthropy, at abrouillette@idsafoundation.org.

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Invest in the next generation of infectious diseases specialists and join our mission to reduce the burdens of infectious diseases worldwide.

The IDSA Foundation offers several ways to showcase your company as a world-class leader invested in public health and the health of your employees, customers and the communities you serve.

The IDSA Foundation can also work with your company to design a customized package to best meet your goals.

Thank You to Our Industry Partners

In 2021, the IDSA Foundation's Industry Partners provided a critical \$851,800 in financial support to further the future of ID medicine. Our 2021 Industry Partners included:



Partner With a Purpose

To Reduce the Burdens of Infectious Diseases Worldwide

Business leaders understand that ID is not only a public health issue – it's also a core business issue, since preventing the spread of ID ensures a healthier workforce, healthier consumers, a healthier economy and a healthier bottom line.

Become an Industry Partner today!

- Support recruitment and mentorship of emerging ID professionals;
- Fund trailblazing research and IDea innovation;
- Build a more diverse pipeline of ID specialists;
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Contact our team of experts today to learn more or get started:

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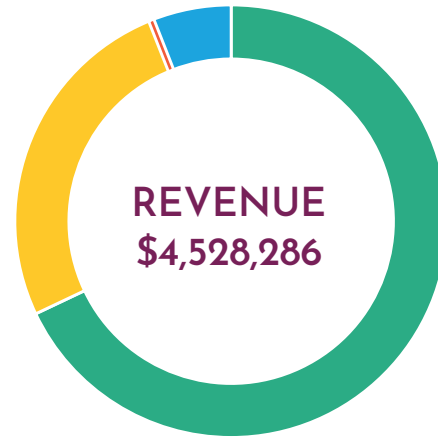
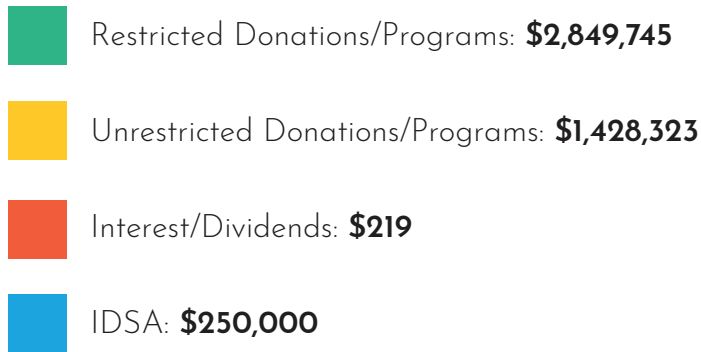


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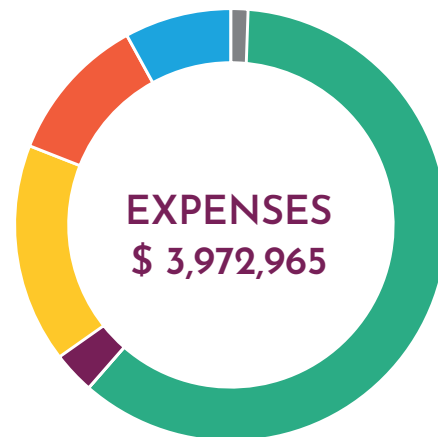
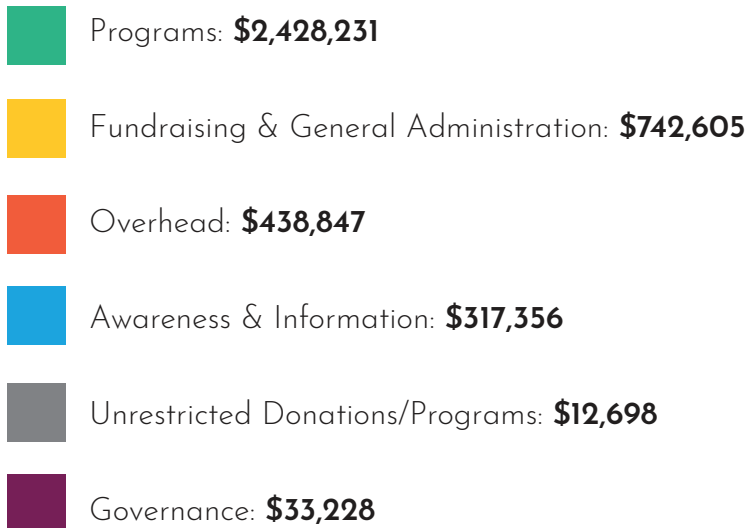
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Financial Information: 2021

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Message From the CEO & Executive Director

A diverse, talented and ever-growing infectious diseases workforce is essential to build on the progress of today's ID heroes and to reduce the burdens of infectious diseases in communities across the world – including our own. But as the global population grows, the number of ID professionals is forecasted to decrease, worsening existing gaps in access to ID specialty care. As the COVID-19 pandemic has shown us, access to the knowledge of ID professionals can directly impact treatment and prevention outcomes, and it could possibly even be the difference between life and death.

At the IDSA Foundation, we recognize that without a strong, diverse pipeline of ID leaders to come, we won't have the workforce needed to develop treatments, preventive care and strategies for the next ID threat. That's why we're committed to recruiting and mentoring future ID professionals who are ready to help overcome the ID challenges we face today and prepared to take on those to come.

Each year, we invest hundreds of thousands of dollars toward ID research funding and fellowship grants for trainees and early-career investigators to help them be the best they can be. In recent years, we've increased this investment to more than \$2 million. We're proud to celebrate 20 years of this impactful work, but we're even more energized to look ahead at all that we can accomplish together.

Your generous donations help improve the quality of life of those affected by infectious diseases of all shapes and sizes and ensures this life-saving work will continue long into the future. We all benefit from the tireless work, dedication and drive of ID heroes – help us show appreciation by giving them the opportunities they need to grow and thrive.



Christopher Busky, CAE

Chief Executive Officer
Infectious Diseases Society of America

Infectious Diseases Society of America Foundation



Stephen E. Peeler, CFRE, FCEP

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