



MSGERC

MYCOSES STUDY GROUP

EDUCATION & RESEARCH CONSORTIUM



MSGERC 10th Anniversary
Report 2024

MYCOSES STUDY GROUP EDUCATION AND RESEARCH CONSORTIUM (MSGERC)

461 Cochran Road, #246
Pittsburgh, PA 15228 USA

headquarters@msgerc.org

MSGERC 10th Anniversary Annual Report

Report from Dr. Luis Ostrosky-Zeichner, MSGERC President (2022-2024)



The 2024 Biennial meeting of the Mycoses Study Group Education & Research Consortium (MSGERC) has special significance, as it marks the 10th anniversary of our organization. This organization could not function without the support of our industry partners. Based on feedback from participants, including sponsors at the 2022 Biennial Meeting, we have de-densified the meeting, with an emphasis not on everyone's pet talks, but on contemporary/ hot topics in medical mycology, growth/mentoring activities for our early career members, ample time for networking, and we brought back dedicated time to work on the next generation of MSGERC studies in outbreak groups. The MSGERC has emerged as a major international think tank in medical mycology, focusing non-branded education and driving/executing the scientific agenda in our field, while also branching out into support of other smaller mycology organizations and patient advocacy. As a sponsor, you will have ample educational and networking opportunities with the top and rising physicians, scientists, and investigators involved in medical mycology from around the globe.

Welcome from Dr. Dimitrios Kontoyiannis, incoming MSGERC President (2024-2026)



Dear Colleagues,

It is my distinct pleasure and honor to serve as the president-elect of MSGERC for 2024-2026. Having just come back from the highly successful 10th MSGERC meeting in Colorado Springs, CO one would agree that this is an exciting moment in our illustrious society. As our organization commemorates its 10th anniversary, this is a pivotal crossroad to reflect on our past and celebrate all the prior leaders who have contributed to making MSGERC what it is today.

MSGERC has been experiencing a “renaissance” in all mission areas of education, research, scholarship and patient advocacy and I am convinced that is destined to soar to even higher heights and become more influential than ever, in view of the continuous expansion of immunocompromised patients. In a National Health Interview Survey in USA (JAMA 2013), 3% of US adults self-reported that were immunosuppressed. Furthermore, new immunosuppressive and/or immunomodulating drugs have been constantly developed and their use expanded beyond the traditional areas of oncology, transplantation, and rheumatology, into fields like aging, metabolic disorders, and neurology. The avalanche of mega-data and genomic profiling, microbiome/mycobiome and personalized risk assessment, contributions of fungi to tumorigenesis, post viral induced impairments with fungal immunity, as the COVID19 epidemic taught us, the revolution of biomaterial research, all create great areas of research, education, and discussion in our field. This excitement is amplified by the introduction of several very promising new antifungals and great strides in fungal diagnostics and immunotherapeutic strategies, that seek to address major changes in the epidemiology of invasive fungal infections, including the ever-evolving antifungal resistance.

MSGERC is already considered a major, if not the premiere, think tank in translational and clinical mycology, advocacy and awareness, the latter been an impediment in assuring that fungal disease gets the appropriate attention by the funding agencies, media, and the public. In the next 2 of years, I will work feverishly to further increase the “buzz” about our society through efforts to increase our membership and thoughtful interactions with other relevant in scope societies in US and beyond, so our footprint as an organization reaches new heights. As our impact has risen beyond traditional clinical, epidemiological, and diagnostic trials, our evolution needs to continue and further accelerate. Central to this need is the infusion of new talent to the organization. Thus, I will work with zeal on creating new opportunities for mentorship and leadership for our members of the “Early Career MSGERC” committee and volunteering opportunities through task forces/interest groups, so the next generation of medical mycologists shapes the agenda and the future of our organization. There has never been a time more exciting to be a member of the MSGERC. (see all the notable benefits of becoming an MSGERC member in <https://msgerc.org/membership-application/>).

I provide a link of my president’s acceptance talk entitled “[The Future of MSGERC](#)” where I lay my thoughts about where we are as a society and think I hope to be able to work on. I am open to any suggestions by *all* members on how to improve *our* MSGERC and how to work together to further flourish MSGERC!

With gratitude,

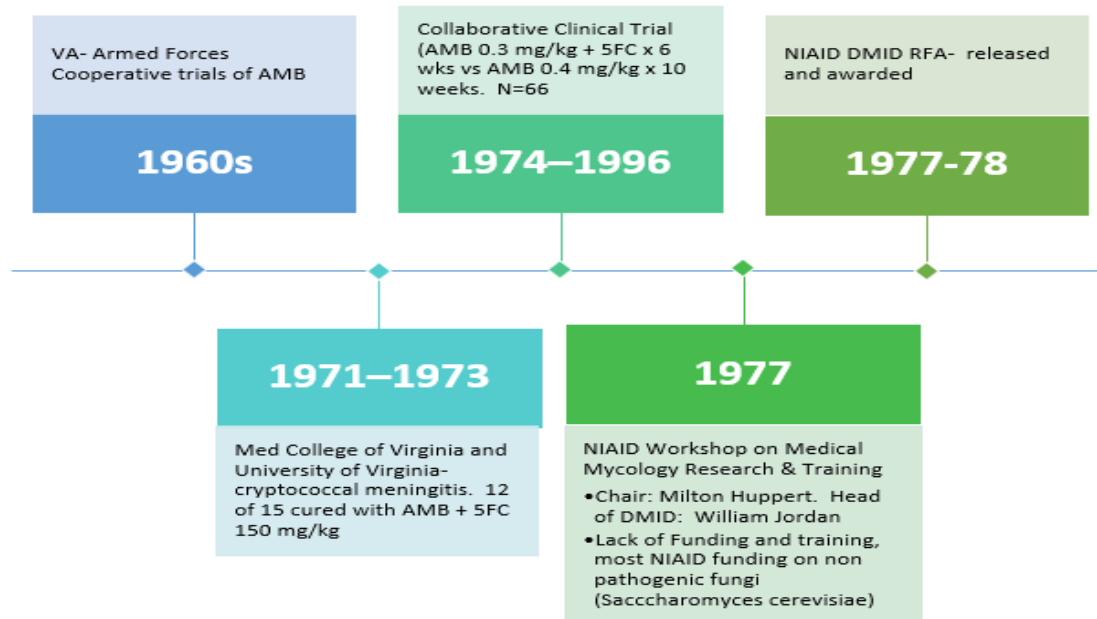
Dimitrios P. Kontoyiannis, MD, ScD, PhD (Hon), FIDSA, FAAM, FAAAS, AAP

Robert C Hickey Chair in Clinical Care
Deputy Head, Division of Internal Medicine
President-Elect Mycoses Study Group Education and Research Consortium
ECMM Diamond Excellence in Mycology Center/www.ecmm.info
University of Texas/MD Anderson Cancer Center
dkontoyi@mdanderson.org

Brief Historical Overview

Before the MSG, the history of the emergence of Multicenter Clinical Trials in Mycology is illustrated in the timeline below:

Figure 1: Timeline Pre-MSG



The MSG was originally formed in 1978 through the NIAID competitive contract mechanism to Dr. William Dismukes, UAB Division of Infectious Diseases: (NO1-AI 82570; N01-AI-52562; N01-AI-15082; N01-AI-65296, N01-AI-15440)

1978 - 1989

- Focused on rare mycoses: cryptococcosis and endemic mycoses
- Conducted the first randomized controlled trial of invasive mycoses

1990s

- Focus on candidemia, cryptococcosis in HIV and empiric therapy in febrile neutropenic patients
- Large, pivotal randomized controlled trials comparing 2 antifungal agents for invasive candidiasis and cryptococcosis in AIDs and febrile neutropenia

By end of 1990s

- Over 40 clinical trials in mycology, more than any NIH-sponsored group

2005-2014

- NIH funding ended 2005 N01-AI-15441 (BAMSG) & expansion of CDC relationship
- TRANSNET – focused on epidemiology (host and disease) guidelines
- At end of grant – NIH funding ended at completion of ongoing studies

2013 to Present

In 2013, the Mycoses Study Group investigators sought to form and organize a non-profit charitable organization named the Mycoses Study Group Education and Research Consortium

(MSGERC) to continue its collective mission as key leaders in clinical mycology and is representative of over 160 physicians and scientists from leading national and international universities. The MSGERC was awarded 501(C)(3) status by the United States Internal Revenue Service in December 2014.

Figure 2: MSG Initial Publication Year on New Drug Development for IFI

Ketoconazole	1983
AMB + 5FC	1987
Itraconazole	1990
Fluconazole	1992
SCH39304	1992
Flu + AMB	1993
Liposomal AMB	1999
Itraconazole Oral Solution	1999
Voriconazole	2002
AmBisome	2003
TRANSNET	2003
Caspofungin	2007
Posaconazole	2021
Ibrexafungerp	2022

The MSGERC Central Unit remains at the University of Alabama at Birmingham for the purpose of project management of the clinical research studies being implemented through MSG, including tracking clinical research activities, especially those studies designated as MSG studies.

Carolynn Thomas Jones, DNP, MSPH, RN has served the MSGERC as Executive Director since its 2013 early formation and has a long history of working with the earlier MSG Central Unit from 1990-2000. In 2016, the MSGERC began working with Kassalen Meeting and Events, LLC (KME) to assist us with our initial Biennial meeting at the Asilomar Conference Grounds in Monterey, California. The Kassalen group continues to offer unique Association Management

assistance, including setting up our many focused Zoom conference calls. They additionally offer us financial management support. This administrative support transformed the operations of the MSGERC.

The MSGERC scaffolds support for the educational, research and scholarship functions of the group in tandem with the MSGERC Central Unit. In addition to Education and Research, the Scholarship of the group will embark on leadership that champions fungal stewardship and patient advocacy and continues to explore novel translational approaches to drug development and disease treatment.

Accomplishments for Dr. Ostrosky-Zeichner's tenure (2022-2024)

- ✓ Expand outreach to early career investigators
- ✓ Expand the number of specific committees to tackle important issues, including an early career committee
- ✓ Develop a policy for MSGERC endorsements
- ✓ Develop an ECMM/MSGERC Collaborative Group to re-define evidence-based clinical trial endpoint/outcomes across invasive fungal disease areas.
- ✓ Plan the 2024 Biennial Meeting using more interactive opportunities for participants
- ✓ Consolidate financial management of MSGERC bank accounts with MSGERC Headquarters (Kassalen Group)
- ✓ Promote the MSGERC to the NIH
- ✓ Continue to support the Educational Mission of the MSGERC through Webinars and the work of the Cooperative Agreement with CDC

MSGERC Organization Mission Statement and Aims

Quadripartite Mission

In the new era of clinical research, the MSGERC Education and Research Consortium will continue to champion evidence-based diagnoses, prophylaxis, treatment and management of invasive fungal infections through its quadripartite mission.

Education: Championing excellence and innovation in the development and delivery of evidence-based medical knowledge in invasive fungal disease management for patients globally.

Research: Translational thought leadership for the development of diagnostics and medicinal antifungals for invasive fungal infections.

Scholarship: Scholarly work to promote antifungal stewardship, investigational outbreak tracking, implementation science, publications, and leadership.

Advocacy: MSGERC will work to advocate for the study and development of antifungal therapies and diagnostics, especially addressing public health issues related to diseases impacted by environmental changes and resistance. Additionally, MSGERC will provide space that includes patient advocacy so that we meet the needs of our patients worldwide.

Board of Directors

2022-2024 MSGERC Board of Directors



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 Vice Chairman for Healthcare Quality, Department of
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 Chief, Division of Infectious Diseases
 McGovern Medical School
 Medical Director of Epidemiology
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 Peter MacCallum Cancer Centre
 University of Melbourne
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 Director, Antimicrobial Subcommittee and
 Antimicrobial Stewardship Program
 Director, Infectious Disease Translational Research Unit
 Medical College of Georgia/Augusta University
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 Robert C. Hickey Chair in Clinical Care & Deputy Head,
 Division of Internal Medicine
 University of Texas MD Anderson Cancer Center
 Houston, Texas, USA



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 Associate Professor of Medicine
 Division of Infectious Diseases
 Department of Medicine
 Duke University School of Medicine
 Durham, North Carolina, USA



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 Director, Transplant/Immunocompromised Host
 Fellowship Program
 Section Head, Clinical Mycology Laboratory
 Professor of Medicine and Pathology
 Duke University
 Durham, North Carolina, USA



Member at Large
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 Professor of Medicine, Division of Infectious Diseases
 Director, Transplant and Oncology Infectious Diseases
 Johns Hopkins University School of Medicine
 Baltimore, Maryland, USA



Member at Large
Tom Patterson, MD
 Professor and Chief, Infectious Diseases
 University of Texas HSC San Antonio
 San Antonio, Texas, USA



Member at Large
George R. Thompson, MD, FIDSA, FECMM
 Professor of Medicine
 Department of Medicine, Division of Infectious Diseases
 Department of Medical Microbiology and Immunology
 UC-Davis Medical Center
 Sacramento, California, USA

Non-Voting:



Executive Director
Carolynn Jones, DNP
 Associate Professor of Clinical Nursing
 The Ohio State University
 UAB School of Nursing
 Birmingham, Alabama, USA



Scientific Chair
Peter Pappas, MD
 Professor
 University of Alabama
 at Birmingham
 Birmingham, Alabama, USA



CDC Liaison to Board
Tom Chiller, MD
 Chief, Mycotic Diseases
 Centers for Disease Control
 Atlanta, Georgia, USA

Thank you to our Outgoing 2022-24 Board Members:

- Past President John Perfect
- Members at Large Barbara Alexander
Sharon Chen
Minh-Hong Nguyen

2024-2026 MSGERC Board of Directors

- Past President Luis Ostrosky-Zeichner
- President Dimitrios Kontoyiannis
- President-Elect George R. Thompson, Jr.
- Treasurer Marisa Micelli*
- Secretary Ilan Schwartz*
- Members at Large John Baddley*
Julia Messina
Tom Patterson*
Andrej Spec
Monica Slavin*
Jose Vazquez*
Paschalis Vergidis
Tom Walsh

*Re-elected

Welcome MSGERC Incoming and Newly Elected Board Members



Dimitrios Kontoyiannis, MD
President



George R. Thompson, MD
President-Elect



Luis Ostrosky-Zeichner, MD
Past President



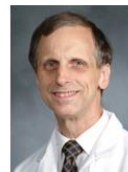
Julia Messina, MD
Member-At-Large



Andrej Spec, MD
Member-At-Large



Paschalis Vergidis, MD
Member-At-Large



Tom Walsh, MD
Member-At-Large

Treasurer Report



Treasurer: Marisa Miceli

- MSGERC is classified as a non-profit 501(c)3 corporation
- MSGERC Fiscal Year runs: January – December
- MSGERC’s financial records are professionally managed by accountant at our Management Company, Kassalen Meetings and Events, LLC (KME)
- All bank accounts and credit card transactions are reconciled at the end of each month
- The Board is provided financial reports such as Balance Sheet, Profit and Loss Statement, Actual vs Budget, Profit and Loss Details
- An independent certified tax accountant reviews MSGERC financial accounts annually and processes tax forms prepared by KME to the IRS.
- The MSGERC Treasurer, Board and KME use historical data and planned initiatives to develop a budget for the upcoming year.
- MSGERC relies on sponsor support for its Biennial Meeting. KME also applies for sponsor grants for the Biennial Meeting.
- MSGERC balances may reflect funds that are earmarked for Biennial Meeting or specified working groups and may include earmarked sponsor funds.
- In 2024, the MSGERC consolidated its checking and savings accounts into PNC bank for clarity of tracking and coverage. Accounts include Checking, money market savings and an investment account.

Scientific Committee



Chair: Peter G. Pappas

Committee Members

Peter Pappas, Chair. Barbara Alexander, Mohanad M. Al-Obaidi, Neil Ampel, David Andes, David Boulware, Sharon Chen, Oliver Cornely, Fariba Donovan, Martin Hoenigl, Dimitrios Kontoyiannis, Jessica Little, Marisa Miceli, Luis Ostrosky-Zeichner, Tom Patterson, John Perfect, Nate Permpalung, Andrej Spec, GR Thompson, Tom Walsh

Ex-Officio (Non-voting) Members: Tom Chiller, Lisa Tushla,Carolynn Jones

Administrative Staff: Jenny Cox, Debbie Zaparoni

Areas of Responsibility: Clinical Trials, Other Research, Evidence-Based Practice, Epidemiology, Diagnostics. Study DRCs. Applies for external grants for investigator-initiated studies.

Goals: Review and approve studies, designate MSG study numbers, form advisory committees for sponsor needs; perform Data Review Committees (DRCs).

MSGERC Studies & Publications

A list and update on status of all MSGERC Studies are found below, including culminating publications.

MSG-01

A randomized double-blind placebo control trial of caspofungin prophylaxis followed by preemptive therapy for invasive candidiasis in high-risk adults in the critical setting.

PI: Luis Ostrosky Zeichner

Sponsor: MERCK

NCT: NCT01045798

This trial enrolled 222 adult ICU patients (ventilated, received antibiotics, central line and additional risk factors for candidiasis) treated with caspofungin prophylaxis vs. those who did not. Endpoints were proven or probable candidiasis using a preemptive therapy approach.

Ostrosky-Zeichner et al. Clin Infect Dis 2014 May;58(9):1219-26. Doi: 10.1093/cid/ciu074.

PMID: 24550378

MSG-02

Impact of treatment strategy on outcomes in patients with candidemia and other invasive candidiasis: a patient level quantitative review

PI: David Andes

Sponsor:

This was a quantitative review of randomized trial for treatment of invasive candidiasis to assess impact of host-, organism, and treatment-related factors on mortality and clinical cure. Data were collected from 1915 patients across 7 trials.

Andes et al, Clin Infect Dis 2012 Apr;54(8): 1110-22. Doi: 10.1093/cid/cis021. PMID: 2241255

MSG-03

Invasive Aspergillosis Combination Study

PI: Kieren Marr

Sponsor: Pfizer

NCT: NCT00431479

This trial was completed on February 22, 2011 with a total of 459 patients enrolled and 454 patients dosed. A poster was presented at ECCMID in London in April 2012.

Marr K et al., Ann Intern Med. 2015;162(2):81-89. doi:10.7326/M13-2508

MSG-05

A re-analysis of the voriconazole versus amphotericin B followed by other licensed antifungal therapy for invasive aspergillosis trial (Herbrecht et al. NEJM 2002; 347: 408-15)

PI: Raoul Herbrecht

Sponsor: Pfizer

The purpose of this project was to reanalyze the existing database from the pivotal study comparing voriconazole to amphotericin B followed by OLAT for primary treatment of invasive aspergillosis. The analysis was presented at ICAAC 2012).

Herbrecht R et al., *Clin Infect Dis.* 2015 Mar 1;60(5):713-20. doi: 10.1093/cid/ciu911

MSG-06

The Phaeohyphomycosis Registry

PIs: Sanjay Revanker, John Baddley, Sharon Chen

Sponsors: Merck, Gilead, Astellas

Enrollment began on October 31, 2012 and closed on 12/31/2015. A total of 99 cases were evaluated between January 1, 2009 and December 31, 2015. Eighteen sites participated and enrolled cases in South America, Australia and North America. This project captured all relevant clinical, diagnostic, mycological and treatment/outcome information relating to this uncommon mycosis. The specimen repository was maintained at the CDC with Confirmation and AF susceptibility performed at Wayne State.

Revanker et al OFID Fall2017, 4(4) ofx200. <https://doi.org/10.1093/ofid/ofx200> PMID: 29766015

MSG-07

Cryptococcosis Combined Analyses (International Retrospective Cryptococcosis Case Review)

PIs: John Baddley, Sharon Chen, Emilio DeBess, Eleni Galanis, Julie Harris, Nicola Marsden-Haug, John Perfect, Peter Phillips, Peter Pappas

Sponsor: Merck, CDC

This retrospective study evaluated archived cases of *C neoformans* and *C gattii* from UAB, Duke, Australia, Canada (BC), Washington, and Oregon. Over 800 well-defined cases have been identified yielding approximately 70% *C neoformans* and 30% *C gattii*. UAB has obtained signed data use agreements with participating sites and has received data from each site. Data has been analyzed and manuscript is in progress, with a second manuscript under consideration. Publication is targeted for fall 2019.

Baddley et al., *Clinical Infectious Diseases* 2021 Oct 5;73(7): 1133-1141 PMID: 33772538

MSG-08

Epidemic Mold Infections (Meningitis) in U.S.

PIs: Carol Kauffman, Anu Malani, Tom Chiller, Peter Pappas

Sponsors: CDC, Gilead, Merck

MSG received funding from Merck, Gilead, and the CDC to support this project based on capturing the detailed, long-term clinical and therapeutic features of this outbreak. MSG's role included site selection, electronic case report form development, data management and analysis. Nine sites provided case data gathered over 12 months of follow up. Enrollment began in September 2013 and all data collection was complete by February 2016. Current enrollment includes 456 cases entered in the REDCap electronic database.

Kauffman CA, Malani AN. *Microbiol Spectr.* 2016 Apr; 4(2) doi: 10.1128/microbiospecEL10-1004-2015. PMID: 27227303

MSG-09

Prospective study of cryptococcosis among non-HIV infected patients (CINCH)

PI: Kieren Marr, MD

Sponsor: NIAID

This observational, prospective study started enrollment of patients with cryptococcosis who are HIV negative on March 14, 2014. This study captures all relevant epidemiology, clinical and therapeutic data. In addition, immunologic and genetic studies are being performed on each study participant to explore host response to infection and genetic predispositions to disease expression.

Marr et al Clin Infect Dis. 2020 Jan2; 70(2): 252-261 doi: 10.1093/cid/ciz193. PMID: 30855688

MSG-10

A Prospective, Multicenter, Open-Label, Randomized, Comparative Study to Estimate the Safety, Tolerability, Pharmacokinetics, and Efficacy of Oral SCY-078 vs. Standard of Care Following Initial Intravenous Echinocandin Therapy in the Treatment of Invasive Candidiasis (Including Candidemia) in Hospitalized Non-neutropenic Adults

PI: Peter Pappas, MD

Sponsor: Scynexis

This phase 2 open-label RCT. The primary focus of the trial is safety and PK; efficacy is a secondary endpoint given the small sample size (150 patients) and the trial design is a step-down strategy for candidemia. Study findings were presented at ECCMID in 2017.

Spec et al J Antimicrob Chemother. 2019 Oct 1; 74(10): 3056-3062 PMID: 31304536

MSG-11

Cryptococcal Infections in Non-HIV Infected Hosts: A Prospective International Study

PI: Peter Pappas, MD

Sponsor: Gilead

This international observational study is actively enrolling in Australia, Canada (BC), Europe, Taiwan, and India. Peru and France are expected to be enrolling by early summer 2019. Study design is similar to MSG-09, which was performed as a domestic US study. Thus far 46 non-HIV infected patients with cryptococcosis have been enrolled of the 100 intended over a 36-month period. This study will close for data analysis to begin in Spring 2020.

Publication in Process

MSG-12

Retrospective review of candidemia outcomes in a large US cohort utilizing the Premier database

PI: Brian Fisher, MD, Theo Zaoutis, MD, Luis Ostrosky-Zeichner, MD

Sponsor: CHOP

This study was initiated by Drs. Fisher and Zaoutis at CHOP following their purchase of aspects of the Premier database. The purpose of this study was to analyze treatment and outcomes among a large cohort (approximately 2000 patients) across the US with *Candida* BSI. The first analysis was presented at ICAAC 2015 as an abstract in clinical mycology.

Chiotos K, et al. J Antimicrob Chemo. 2016 Dec;71(12): 3536-3539

doi:10.1093/jac/dkw305. PMID 27494929

MSG-13

A Multi-Center, Case Control Study of a Lateral Flow Assay for the Diagnosis of Histoplasmosis (2R42-AI096945-03)

PI: Peter Pappas, MD, Andrej Spec, MD

Sponsor: IMMY/NIH Small Business Grant

The MSGERC and MSG Coordinating Center have joined efforts with IMMY to develop and manage this multi-center, pre-510k case-control study to test investigational assays for diagnosing histoplasmosis (Lateral Flow Assay and Enzyme Immunoassay). This study closed in April 2018 with 164 evaluable subjects including cases and controls. Specimens were processed at the IMMY laboratory in Oklahoma. Clinical data was captured using the REDCap electronic database.

No publication

MSG-14

Prophylaxis Surveys

PIs: John Baddley, MD, Tom Patterson, MD, Oliver Cornely, MD, Julian Lindsay, MD; Orla Morrissey, MD; Eric Bow, MD; and Ricardo LaHoz, MD

Sponsor: Mayne Pharma Pty Ltd.

A survey of physicians to determine current treatment patterns and challenges to treatment across patient populations including Lung Transplant, Lymphoma and BMT/HSCT. To date over surveys have completed: Lung 52 of 124 recipients; Lymphoma 23 of 423 recipients; HSCT 100 of 148 recipients. The survey is hosted on REDCap and data analysis completed.

Presented at TIMM. No publication.

MSG-15

SUBA-itraconazole vs conventional itraconazole for endemic mycoses: randomized, open-label international study

PI: GR Thompson, MD, Peter Pappas, MD, Andrej Spec, MD

Sponsor: Mayne Pharmaceuticals Pty Ltd

NCT: NCT03572049

This prospective, multi-center, randomized, open-label parallel arm study involving patients with proven or probable invasive endemic fungal infection evaluates pharmacokinetics, safety, efficacy, tolerability and health economics of oral SUBA-itraconazole compared to conventional itraconazole. Enrollment has been completed at 88 participants (51 Histo; 17 Blasto; 13 Cocci; 5 Sporo). Largest endemic study conducted in decades.

Spec et al OFID 2024 Jan29;11(3): ofae010 doi: 10.1093/ofid/ofae010 PMID: 38440302 online first ; Pappas et al OFID 2021 Nov;8(Suppl 1): S72. Doi: 1093/ofid/ofab466.120 (Abstract published)

MSG-16

Natural History of Antifungal Failure in IC in the US: A multicenter Study (NATURE-US)

PI: Luis Ostrosky-Zeichner, MD

Sponsor: Scynexis, Inc.

The aim of this study is to describe the frequency and reasons for antifungal failure as well as current treatment strategies and outcomes for enrolled subjects. The study will include both retrospective and prospective cohort observations at approximately six sites in the US. A total of 125 subjects with culture-proven Candidemia or invasive candidiasis with suspected antifungal therapy failure were enrolled at 5 centers. Study will be managed by UT-Houston. Completed.

Publication in process; Abstract sent to ESCMID 2025

MSG-17

COVID-19 Associated pulmonary aspergillosis (CAPA) and other invasive fungal infections

PI: Peter Pappas, MD

Sponsor: Astellas and CDC

The aim of this study is to determine the cumulative incidence of pulmonary aspergillosis in a cohort of COVID-19 positive patients with acute respiratory failure requiring mechanical ventilation for 72 hours or more. Other IFIs were included. A total of 221 cases from 7 sites were enrolled at 7 sites. The study was managed by the UAB MSG Central Unit.

Thompson, et a., OFID 2020 Jun19;7(7):ofaa242 doi: 10.1093/ofid/ofaa232 PMID 32754626

MSG 18

Re-Evaluation of Existing Dataset for Epidemiologic study MSG-05: Applying DOOR criteria.

PI: A. SPEC, T. Walsh

Sponsor: MSGERC, other sponsorship

Using existing data, reviewed outcome data and applying RECIST DOOR Criteria to reevaluate outcomes. Aims include validating the DOOR tool and informing future Aspergillosis studies.

In Process

MSG 19

COVID-19 and Cryptococcus Registry

PI: Jeremy Walker, MD

Sponsor: MSGERC

This was a rapid online registry that did not collect PHI, in an effort to understand patient cases of COVID-19 and Cryptococcus. Social media posts and emails were used to collect patients. A total of 70 cases were collected. The study was managed at the UAB MSG Central Unit.

Walker et al, Clin Infect Dis. 2024 Feb 17;78(2):371-377 doi:10.1093/cid/ciad551. PMID 37713207 and Jones CT et al, Am J. Nurs. 2024 Apr1;124(4):36-41 doi: 10.1097/01.NAH.0001010572.96486.87. PMID 38511708

MSG 20

A Phase 3, Randomized, Double-blind study for patients with invasive candidiasis treated with IV Echinocandin followed by either Oral Ibrexafungerp or oral fluconazole (MARIO).

PI: Luis Ostrosky

Sponsor: Scynexis

NCT: NCT05178862

This is an international clinical trial seeking 220 randomized participants. MSGERC advisory team assisted with protocol design. Scynexis is managing the study. Recruitment is underway. MSGERC and UAB Central Unit contributing to recruitment with a small grant to MSGERC.

Study temporarily suspended by Scynexis, restarting first quarter 2025.

MSG 21

Radiographic evolution of invasive Mould Disease.

PI: G. Thompson, D. Kontyiannis

Sponsor: Astellas provided all data.

Review of > 2000 images. UCDavis – Chest radiologist will overread. There are 3 reviewers. If a 4% change, they will have a tie breaker, like a DRC. REDCap data capture. (Nodule, halo, internal diameter of cavity- summative value, volume, diameter- and correlations to outcomes.

Does GM correlate. Consolidation will be measured (volume) is also being measured. After first 10 will review data thoroughly-plan to over data capture! 20% of pts are co-infected, All pts in study had proven or probable disease. Significant # have isolates; the others had GM. (Aspergillus, Mucor, Brain, Sinus, Lung) RECIST used for pulmonary mould infections- stand alone paper- how to tell radiologists to do this.

In Process

U01 Studies approved as MSG studies:

*Several additional studies in the U01 Study Pipeline.

MSG 22

Prospective Nationwide Online Registry of Endemic Mycoses

PI: Michael Pullam, David Boulware

Sponsor: CDC U01: UAB/MSGERC & external R01 funding

Mining of social media data for endemic mycoses, launched September 2024. Prospective cohort and cross-sectional study. As of end of 2024, 8 patients enrolled, ~65 screened. IRB amendment expected to facilitate ease of enrollment (many were enrolling too late after diagnosis).

In process

MSG 23

Short Course Antifungal Therapy (SCAT) for Uncomplicated Candidemia

PI: J. Vazquez

Sponsor: CDC U01: UAB/MSGERC, other external sponsor

This study will randomize patients to a short course of echinocandin therapy (7 days) compared to 14 days of therapy. N=120. 1:1 randomization.

Final protocol in process, launching first quarter 2025

Current Consulting:

Revimmune (IL-7)

A. Spec. Reviewed previous studies conducted by Revimmune, discussions with sponsor about new protocol concepts, protocol development.

In process

Peter Williamson crypto Study (Steroids)

Interventional trial using steroids- for persons with non-HIV crypto. They are using steroids as adjunctive tx- want to expand it to a broader group- of non-HIV pts. Surveyed a number of centers- (CINCH studies) Interventional study- SOC with AMB & F5C. +/- steroids- want MSG to administer the study- they will do an extramural grant- months in future. NIND- target funder. IRIS type response. Measure of success is prevention of neurologic damage secondary to paradoxical damage.

Discussions in process

Previous Consulting:

Minnetronix Medical. Collaborations with Minnetronix Medical are underway for protocol development for an upcoming study of an innovative technology product Neurapheresis™ Therapy, a minimally invasive procedure to filter CSF. Originally approved for post-aneurysmal subarachnoid hemorrhage patients, the MSGERC has been exploring utility for clearance of fungus. Protocol development is underway with additional information available during Summer 2019.

Patient Reported Outcomes and Desirability of Outcome Response (DOOR)

A Delphi Study of Desirability of Outcome Ranking (DOOR) in IFI

PI: J. Portugal Gonzales

Sponsor:

Using a series of consensus surveys a Delphi approach among MSGERC members to identify DOOR criteria for invasive fungal infections was undertaken.

In Process

F2G PRO study

MSGERC helped to review. UK group generated plan with contributions also with UC Davis. (See MSG 18)

Response to Fungal Outbreak in Mexico

Smith et al. [Update on Outbreak of Fungal Meningitis Among US Residents who Received Epidural Anesthesia at Two Clinics in Matamoros, Mexico. *Clin Infect Dis.* 2023 Sep22:ciad570](#)
doi:10.1093/cid/ciad570 PMID:37739479

WHO Fungal Priority Pathogens

On October, 25 2022, the World Health Organization published the [WHO Fungal Priority Pathogens List to Guide Research, Development and Public Action Plan](#). “This is the first global effort to systematically prioritize fungal pathogens, considering their unmet R&D needs and perceived public health importance”, says the WHO. The publication has created its list in three categories: Critical Priority, High Priority and Medium Priority. This is a significant contribution to Medical Mycology and the launch of this report has been featured in UN News, The Guardian, NPR, Sky News, Fox News, Axios among others. We are proud of the members of the MSGERC who contributed and the broad contributions of global mycology societies.

ECMM/MSGERC Consensus Group for Fungal and Clinical Trial Outcomes



Initiated in late 2023, this project sought to create a collaborative consensus approach by MSGERC and ECMM to redefining the fungal outcomes for invasive fungal disease clinical trials. This update will include new evidence-based clinical and diagnostic approaches. The prior published outcomes work was dated in 2008.

- Brahm H. Segal, Raoul Herbrecht, David A. Stevens, Luis Ostrosky-Zeichner, Jack Sobel, Claudio Viscoli, Thomas J. Walsh, Johan Maertens, Thomas F. Patterson, John R. Perfect, Bertrand Dupont, John R. Wingard, Thierry Calandra, Carol A. Kauffman, John R. Graybill, Lindsey R. Baden, Peter G. Pappas, John E. Bennett, Dimitrios P. Kontoyiannis, Catherine Cordonnier, Maria Anna Viviani, Jacques Bille, Nikolaos G. Almyroudis, L. Joseph Wheat, Wolfgang Graninger, Eric J. Bow, Steven M. Holland, Bart-Jan Kullberg, William E. Dismukes, Ben E. De Pauw, [Defining Responses to Therapy and Study Outcomes in Clinical Trials of Invasive Fungal Diseases: Mycoses Study Group and European Organization for Research and Treatment of Cancer Consensus Criteria](#), *Clinical Infectious Diseases*, Volume 47, Issue 5, 1 September 2008, Pages 674–683, <https://doi.org/10.1086/590566>

Executive Committee

MSGERC: Luis Ostrosky-Zeichner, John Perfect, Peter Pappas

ECMM: Neil Gow, Martin Hoenigl, Oliver Cornely

Steering Committee

MSGERC: Luis Ostrosky-Zeichner, Peter Pappas, John Perfect, George R Thompson, Dimitrios Kontoyiannis, Monica Slavin, Marisa Miceli,Carolynn Jones

ECMM: Neil Gow, Martin Hoenigl, Oliver Cornely, Johan Maertens, Jean-Pierre Gangneux, Connie Lass-Florl, Patricia Munoz

Key Staff: Jennifer Cox, Debbie Zapparoni, Carolynn Jones

Working Groups: (Chairs from MSGERC and ECMM)

[Aspergillus/Moulds Group](#) Co-Chairs: M. Slavin/M. Hoenigl

[Candida Group](#) Co-Chairs: J Vazquez/Sevtap Arikan

[Endemic/Cocci Group](#) Co-Chairs: GR Thompson/Ana Alastruey Izquierdo

[Crypto Group](#) Co-Chairs: D. Boulware/Tihana Bicanic

Listening Sessions

- **Completed:** January 8, 2024 & May 8, 2024

Preliminary results were shared at the MSGERC 2024 Biennial Meeting. Publications will be in process following future listening sessions with patient groups.

Sponsorship

We are grateful to the following companies for their financial support of this endeavor: Basilea, F2G, Pulmocide, Shionogi, and Mundipharma.

CDC Cooperative Agreement:

“Improving clinical and public health outcomes through national partnerships to prevent and control emerging and re-emerging infectious disease threat” #CDC-RFA-CK20-2003, PI, Peter G. Pappas

Steering Committee: Peter Pappas, George R. Thompson, III, John W. Baddley,Carolynn Thomas Jones, Lisa Tushla, Tom Davis

Content Development Committee: Andrej Spec, Daniel Kelmenson, Dimitrios Kontoyiannis, Ilan Schwartz, Kimberly Hansen, Latesha Elope, P. Lewis White, Luis Ostrosky-Zeichner, Melissa D. Johnson, Minh-Hong Nguyen, Scott Kopf, Sharen Chen, Thomas F. Patterson, Jose A Vazquez

Goals: Create a Care Step Pathway for Covid and Pulmonary Aspergillosis; Generate educational webinars, infographics, continuing education, twitter events and publications on key invasive fungal infection and cutaneous fungal infections. Explore antifungal stewardship and health equity issues for invasive fungal infections. Conduct interviews of patients/providers. Engage early career in projects. The group also engaged in development of evidence-based algorithms, CME and quality improvement projects. Patient advocacy activities including an emphasis on health equity, patient/provider webinars and seminars and promoting the formation of an IFI Patient Advocacy group (MYCARE). Posters of the many accomplishments of the Cooperative Agreement will be shared at the MSGERC 2024 Biennial Meeting. The poster illustrated below indicates the traffic estimates as of September 2024 across projects being > 250,000 users.

Websites: <https://covidandfungus.org>; <https://funguseducationhub.org>; <https://fightfungus.org/>

As illustrated below, deliverables included: 1 CAPA Care Step Pathway; 6 OpenMYCs, 5 C. auris case-based courses; 11 grand rounds webinars; 12 ISHAM Clinical Mycology Cases; 11 Infographics; 6 peer-review publications; 3 Latin American Webinars; 7 Faces of Fungal Infection patient/provider interviews; 12 CME Activities; 2 Quality Improvement Initiatives and 9 CAPA Case Studies.



1 CAPA Evidence-Based Care-Step Pathway	6 OpenMyCs	5 C. auris Case-Based Courses	11 Grand-Rounds Webinars <i>Exploring important fungal issues</i>
12 ISHAM Clinical Mycology Cases	11 Infographics <i>Various disease states, TDM, resistance, etc</i>	6 Publications	3 Latin American Webinars
7 Faces of Fungal Infection <i>Provider/Patient Interviews</i>	12 CME Activities	2 Quality Improvement Initiatives <i>(Endemics)</i>	8 CAPA Case Studies

Subset of Website Features	Users March 2024
Patient Caregiver Education	18,018
TMVii Infections	3,705
ISHAM Case-Based Courses	8,029
Matamoros Outbreak Guidance	8,560
C. auris Courses	1,022
Fungal Color Code Document	2,910
Grand Rounds Webinar: Superficial implantation mycoses	592
Call for Cases (from Covid)	2,349
Latin American Webinar	294 live 363 archived
C auris Q/A Webinar	308 live 408 archived
Traffic Estimates to Date (FungusEducationHub):	>250,000 since launch

Key Contributors

- 1- Terranova Medica, LLC
- 2- UAB
- 3- MSGERC
- 4- The Ohio State University
- 5- CDC

This educational initiative was funded in part by a cooperative agreement with the Centers for Disease Control and Prevention (CDC-RFA-CK20-2003) to the University of Alabama at Birmingham (UAB). UAB is collaborating with Terranova Medica, LLC and MSGERC on a variety of educational initiatives geared to clinicians and the general public. The contents of this resource center do not necessarily represent the policy of CDC or HHS and should not be considered an endorsement by the Federal Government.

uab.edu

CDC U01: “Clinical and Applied Research Strategies for the Prevention and Control of Fungal Diseases” U01CK000692, PI: Peter G. Pappas; Administrator: Shayna Bryan, shaynabryan@uabmc.edu)

Steering Committee: Neil Ampel, *Barbara Alexander, *John Baddley, *David Boulware, Tom Chiller, David van Duin, Ashraf Ibrahim, Carolynn Jones, *Dimitrios Kontoyiannis, Thuy Le, *Todd McCarty, Jerry McGwin, *Marisa Miceli, *Minh-Hong Nguyen, *Luis Ostrosky-Zeichner, *Peter Pappas, *Tom Patterson, John Perfect, Ilan Schwartz, Andrej Spec, *GR Thompson, *Jose Vasquez, *Tom Walsh, Nathan Wiederhold, Sean Zhang
*voting member

Working Groups

- **Invasive Candidiasis Group:** (Ostrosky/Nguyen) (Walsh/Vazquez)
- **Aspergillus/Moulds Group:** (Baddley/Miceli) (Patterson/Ibrahim)
- **Endemic/Crypto:** (Boulware/Thompson) (Perfect/Galgiani)
- **Special Hosts:** (Alexander/McCarty) (Kontoyiannis/Van Duin)
- **Laboratory RNA based BAL diagnostics**
- **Candida Diagnostics Capacity Survey** (Permpalung / Al-Obaidi)
- **Social Media and Endemic Mycoses** (Pullen / Boulware)

Education Committee



Immediate Past Chair: George R. Thompson, Jr.



Incoming Co-chairs (commencing 2025): Nate Bahr, Jessica Little

Committee Members

Neil Ampel, David Andes, John Baddley, David Boulware, Oliver Cornely, Daniel Friedman, Justin Hayes, Carolynn Jones, Dimitrios Kontoyiannis, Bart-Jan Kullberg, Marisa Miceli, Luis Ostrosky-Zeichner, Peter Pappas, Tom Patterson, John Perfect, Matt Pullen, Ilan Schwartz, Julie Steinbrink, Geetha Subramanian, Neeraja Swaminathan, GR Thompson, Lisa Tushla, Joe Vazquez, Paschalis Vergidis

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Chair: Dimitrios Kontoyiannis

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Dimitrios Kontoyiannis, Luis Ostrosky-Zeichner, Ilan Schwartz, John Perfect, Marisa Miceli, Peter Pappas, Stephanie Smith, Todd McCarty, Carolynn Jones

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Immediate Past Chairs: Todd McCarty, Stephanie Smith



Incoming Chair (Commencing 2025): Daniel Friedman

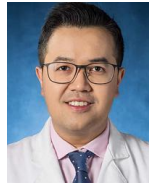
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Mohanad Al-Obaidi, Nathan Bahr, Jose Guillermo, Pereira Brunelli, Sung-Yeon Cho, Fariba Donovan, Lourdes Eguiguren, Lara Fernanda-Gonzalez, Justin Hayes, Teny John, Ahmad Lafi, Kathleen Linder, Jessica Little, Diana Eugenia Perales Martinez, Patrick Mazi, Laura Neilsen, Akshatha Ravindra, Sarah Sansom, Ilan Schwartz, Michael Sclarici, Geetha Sivasubramanian, Julie Steinbrink, Neil Stone, Neeraja Swaminathan, Gabriel Vilchez, Jeremy Walker, Sebastian Wurster, Hyunah Yoon

MSGERC Executive Director:Carolynn Jones

Administrative Staff: Jennifer Cox, Debbie Zaparoni

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Administrative Staff: Jennifer Cox, Debbie Zaparoni

Doctor Fungus Subcommittee



Editor-in-Chief: Matt Pullen

Members: George Thompson, Nathan Wiederhold, Daniel Friedman, Diana Eugenia Perales Martinez, Duane Hospenthal, Fariba Donovan, Geetha Sivasubramanian, Joe Vazquez, Justin Hayes, Mohanad Al-Obaidi, Neeraja Swaminathan

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Co-chairs: Jose Vazquez, Julie Steinbrink

Committee Members: David Andes, Daniel Friedman, Jessica Little, Diana Eugenia Perales Martinez, Geetha Sivasubramanian, GR Thompson

MSGERC Executive Director:Carolynn Jones

Administrative Staff: Jennifer Cox, Debbie Zaparoni

MSGERC Study Publications

MSG 01

Ostrosky-Zeichner L, Shoham S, Vazquez J, Reboli A, Betts R, Barron MA, Schuster M, Judson MA, Revankar SG, Caeiro JP, Mangino JE, Mushatt D, Bedimo R, Freifeld A, Nguyen MH, Kauffman CA, Dismukes WE, Westfall AO, Deerman JB, Wood C, Sobel JD, Pappas PG. [MSG-01: A randomized, double-blind, placebo-controlled trial of caspofungin prophylaxis followed by preemptive therapy for invasive candidiasis in high-risk adults in the critical care setting](#). Clin Infect Dis. 2014 May;58(9):1219-26. doi: 10.1093/cid/ciu074. Epub 2014 Feb 18. PMID: 24550378.

MSG 02

Andes DR, Safdar N, Baddley JW, Playford G, Reboli AC, Rex JH, Sobel JD, Pappas PG, Kullberg BJ; Mycoses Study Group. [Impact of treatment strategy on outcomes in patients with candidemia and other forms of invasive candidiasis: a patient-level quantitative review of randomized trials](#). Clin Infect Dis. 2012 Apr;54(8):1110-22. doi: 10.1093/cid/cis021. Epub 2012 Mar 12. PMID: 22412055.

MSG 03

Marr KA, Schlamm HT, Herbrecht R, Rottinghaus ST, Bow EJ, Cornely OA, Heinz WJ, Jagannatha S, Koh LP, Kontoyiannis DP, Lee DG, Nucci M, Pappas PG, Slavin MA, Queiroz-Telles F, Selleslag D, Walsh TJ, Wingard JR, Maertens JA. [Combination antifungal therapy for invasive aspergillosis: a randomized trial](#). Ann Intern Med. 2015 Jan 20;162(2):81-9. doi: 10.7326/M13-2508. Erratum in: Ann Intern Med. 2015 Mar 17;162(6):463. Erratum in: Ann Intern Med. 2019 Feb 5;170(3):220. PMID: 25599346.

MSG-04 *No publication. Study closed closely after initial launch.*

MSG-05

Herbrecht R, Patterson TF, Slavin MA, Marchetti O, Maertens J, Johnson EM, Schlamm HT, Donnelly JP, Pappas PG. [Application of the 2008 definitions for invasive fungal diseases to the trial comparing voriconazole versus amphotericin B for therapy of invasive aspergillosis: a collaborative study of the Mycoses Study Group \(MSG 05\) and the European Organization for Research and Treatment of Cancer Infectious Diseases Group](#). CID. 2015 Mar 1;60(5):713-20. doi: 10.1093/cid/ciu911. Epub 2014 Nov 19. PMID: 25414266.

Re-analysis of: Herbrecht R, et al. [Voriconazole versus amphotericin B for primary therapy of invasive aspergillosis](#). N Engl J Med. 2002 Aug 8;347(6):408-15. doi: 10.1056/NEJMoa020191. PMID: 12167683.

MSG-06

Revankar SG, Baddley JW, Chen SC, Kauffman CA, Slavin M, Vazquez JA, Seas C, Morris MI, Nguyen MH, Shoham S, Thompson GR 3rd, Alexander BD, Simkins J, Ostrosky-Zeichner L, Mullane K, Alangaden G, Andes DR, Cornely OA, Wahlers K, Lockhart SR, Pappas PG. [A Mycoses Study Group International Prospective Study of Phaeohiphomycosis: An Analysis of 99 Proven/Probable Cases](#). Open Forum Infect Dis. 2017 Sep 26;4(4):ofx200. doi: 10.1093/ofid/ofx200. PMID: 29766015; PMCID: PMC5946886.

MSG 07

Baddley JW, Chen SC, Huisinigh C, Benedict K, DeBess EE, Galanis E, Jackson BR, MacDougall L, Marsden-Haug N, Oltean H, Perfect JR, Phillips P, Sorrell TC, Pappas PG. [MSG07: An International Cohort Study Comparing Epidemiology and Outcomes of Patients With Cryptococcus neoformans or Cryptococcus gattii Infections](#). Clin Infect Dis. 2021 Oct 5;73(7):1133-1141. doi: 10.1093/cid/ciab268. PMID: 33772538; PMCID: PMC8473583.

MSG 08

Kauffman CA, Malani AN. [Fungal Infections Associated with Contaminated Steroid Injections](#). Microbiol Spectr. 2016 Apr;4(2). doi: 10.1128/microbiolspec.E110-0005-2015. PMID: 27227303.

Malani AN, Kauffman CA, Latham R, Peglow S, Ledtke CS, Kerkering TM, Kaufman DH, Triplett PF, Wright PW, Bloch KC, McCotter O, Toda M, Jackson BR, Pappas PG, Chiller TM. [Long-term Outcomes of Patients with Fungal Infections Associated With Contaminated Methylprednisolone Injections](#). Open Forum Infect Dis. 2020 May 9;7(6):ofaa164. doi: 10.1093/ofid/ofaa164. PMID: 32528999; PMCID: PMC7275232.

Centers for Disease Control and Prevention (CDC). [Multistate outbreak of fungal infection associated with injection of methylprednisolone acetate solution from a single compounding pharmacy – United States, 2012](#). MMWR Morb Mortal Wkly Rep 2012; 61:839–42.

MSG 09

Marr KA, Sun Y, Spec A, Lu N, Panackal A, Bennett J, Pappas P, Ostrander D, Datta K, Zhang SX, Williamson PR; Cryptococcus Infection Network Cohort Study Working Group. [A Multicenter, Longitudinal Cohort Study of Cryptococcosis in Human Immunodeficiency Virus-negative People in the United States](#). Clin Infect Dis. 2020 Jan 2;70(2):252-261. doi: 10.1093/cid/ciz193. PMID: 30855688; PMCID: PMC6938979.

MSG 10

Spec A, Pullman J, Thompson GR, Powderly WG, Tobin EH, Vazquez J, Wring SA, Angulo D, Helou S, Pappas PG; Mycoses Study Group. [MSG-10: a Phase 2 study of oral ibrexafungerp \(SCY-078\) following initial echinocandin therapy in non-neutropenic patients with invasive candidiasis](#). J Antimicrob Chemother. 2019 Oct 1;74(10):3056-3062. doi: 10.1093/jac/dkz277. PMID: 31304536.

MSG 11 *Publication in process.*

MSG 12

Chiotos K, Vendetti N, Zaoutis TE, Baddley J, Ostrosky-Zeichner L, Pappas P, Fisher BT. [Comparative effectiveness of echinocandins versus fluconazole therapy for the treatment of adult candidaemia due to Candida parapsilosis: a retrospective observational cohort study of the Mycoses Study Group \(MSG-12\)](#). J Antimicrob Chemother. 2016 Dec;71(12):3536-3539. doi: 10.1093/jac/dkw305. Epub 2016 Jul 27. PMID: 27494929; PMCID: PMC5181395.

MSG 13 *No publication.*

MSG 14 *No publication. Presented at TIMM 2019*

MSG 15

Spec A, Thompson GR, Miceli MH, Hayes J, Proia L, McKinsey D, Arauz AB, Mullane K, Young JA, McGwin G, McMullen R, Plumley T, Moore MK, McDowell LA, Jones C, Pappas PG. [MSG-15: Super-Bioavailability Itraconazole Versus Conventional Itraconazole in the Treatment of Endemic Mycoses-A Multicenter, Open-Label, Randomized Comparative Trial](#). Open Forum Infect Dis. 2024 Jan 29;11(3):ofae010. doi: 10.1093/ofid/ofae010. PMID: 38440302; PMCID: PMC10911225.

MSG 16 *Publication in process*

MSG 17 *Publication in Process*

MSG 18 *Study ongoing*

MSG 19

Walker J, McCarty T, McGwin G, Ordaya EE, Vergidis P, Ostrosky-Zeichner L, Mammadova M, Spec A, Rauseo AM, Perfect J, Messina J, Vilchez G, McMullen R, Jones CT, Pappas PG; [Mycoses Study Group Education and Research Consortium \(MSGERC\) Cryptococcal Registry Cohort. Description of Cryptococcosis Following SARS-CoV-2 Infection: A Disease Survey Through the Mycosis Study Group Education and Research Consortium \(MSG-19\)](#). Clin Infect Dis. 2024 Feb 17;78(2):371-377. doi: 10.1093/cid/ciad551. PMID: 37713207; PMCID: PMC10874270.

Jones CT, Walker J, McMullen RL, Pappas PG. [Developing Crowdsourced Clinical Registry Studies](#). Am J Nurs. 2024 Apr 1;124(4):36-41. doi: 0.1097/01.NAJ.0001010572.96486.87. Epub 2024 Mar 21. PMID: 38511708; PMCID: PMC11146667.

MSG 20 *Study Ongoing*.

MSG 21 *Study Ongoing*

MSG 22 *Study Ongoing*

CDC Collaborations

CARE STEP PATHWAY FOR SUSPECTED PULMONARY COVID-19-ASSOCIATED IFI

Baddley JW, Thompson GR 3rd, Chen SC, White PL, Johnson MD, Nguyen MH, Schwartz IS, Spec A, Ostrosky-Zeichner L, Jackson BR, Patterson TF, Pappas PG. [Coronavirus Disease 2019-Associated Invasive Fungal Infection](#). Open Forum Infect Dis. 2021 Nov 16;8(12):ofab510. doi: 10.1093/ofid/ofab510. PMID: 34877364; PMCID: PMC8643686.

Carolynn T. Jones, R. Scott Kopf, Lisa Tushla, Sarah Tran, Caroline Hamilton, Meghan Lyman, Rachel McMullen, Drashti Shah, Angela Stroman, Eryn Wilkinson, Daniel Kelmenson, Jose Vazquez, Peter G. Pappas; [A Care Step Pathway for the Diagnosis and Treatment of COVID-19-Associated Invasive Fungal Infections in the Intensive Care Unit](#). *Crit Care Nurse* 1 December 2022; 42 (6): 36–46. doi: <https://doi.org/10.4037/ccn2022237>

Thompson iii GR, Cornely OA, Pappas PG, Patterson TF, Hoenigl M, Jenks JD, Clancy CJ, Nguyen MH. [Invasive Aspergillosis as an Under-recognized Superinfection in COVID-19](#). Open Forum Infect Dis. 2020 Jun 19;7(7):ofaa242. doi: 10.1093/ofid/ofaa242. PMID: 32754626; PMCID: PMC7337819.

ANTIFUNGAL RESISTANT ONYCHOMYCOSIS SURVEY

Benedict K, Gold JAW, Jones CT, Tushla LA, Lipner SR, Joseph WS, Tower DE, Elewski B, Pappas PG. [Concerning rates of laboratory-confirmed antifungal-resistant onychomycosis and tinea pedis: An online survey of podiatrists, United States](#). Health Sci Rep. 2023 Nov 24;6(11):e1694. doi: 10.1002/hsr2.1694. PMID: 38028688; PMCID: PMC10667959.

FUNGAL OUTBREAK IN MATAMOROS MEXICO

Smith, D. J., Gold, J. A. W., Chiller, T., Bustamante, N. D., Marinissen, M. J., Rodriguez, G. G., Cortes, V. B. G., Molina, C. D., Williams, S., Vazquez Deida, A. A., Byrd, K., Pappas, P. G., Patterson, T. F., Wiederhold, N. P., Thompson Iii, G. R., Ostrosky-Zeichner, L., & Fungal Meningitis Response Team. [Update on Outbreak of Fungal Meningitis among U.S. Residents who Received Epidural Anesthesia at Two Clinics in Matamoros, Mexico](#). *CID* 2024 June 14;78(6): 1554-1558. Doi 10.1093/cid/ciad570.

MYCARE- PATIENT ADVOCACY

Rob Purdie, Lisa A Tushla, Jonathan Ferretti, Gonzalo (Kiko) Castro, Ricky Watson, Thomas Davis, Brianna Raborg, Patrick B Mazi, Angela Stroman, Carolynn Thomas Jones, Thomas J Walsh, Tom M Chiller, Peter G Pappas, John Meyer, Andrej Spec, [Shared Vision for Improving](#)

[Outcomes for Serious Fungal Diseases: Report of a Patient, Caregiver, and Clinician Summit](#), *Open Forum Infectious Diseases*, 2024; ofae226.

TESTING GUIDELINES FOR COMMUNITY-AQUIRED PNEUMONIA & IFI

Dallas J Smith, George R Thompson, John W Baddley, Peter G Pappas, Lisa A Tushla, Tom Chiller, [Clinical Testing Guidance for Histoplasmosis in Patients With Community-acquired Pneumonia for Primary and Urgent Care Providers: Commentary on Enzyme Immunoassay Histoplasma Antibody Testing](#), *Clinical Infectious Diseases*, 2024; ciad795, <https://doi.org/10.1093/cid/ciad795>

Dallas J Smith, Rebecca J Free, George R Thompson, John W Baddley, Peter G Pappas, Kaitlin Benedict, Jeremy A W Gold, Endemic Mycoses Diagnostic Algorithm Subject Matter Expert Group , Lisa A Tushla, Tom Chiller, Brendan R Jackson, Mitsuru Toda, [Clinical Testing Guidance for Coccidioidomycosis, Histoplasmosis, and Blastomycosis in Patients With Community-Acquired Pneumonia for Primary and Urgent Care Providers](#), *Clinical Infectious Diseases*, 2023; ciad619, <https://doi.org/10.1093/cid/ciad619>

HEALTH EQUITY TOPICS IN IFI

Jenks, J. D., Prattes, J., Wurster, S., Sprute, R., Seidel, D., Oliverio, M., Egger, M., Del Rio, C., Sati, H., Cornely, O. A., Thompson, G. R., Kontoyiannis, D. P., & Hoenigl, M. (2023). [Social determinants of health as drivers of fungal disease](#). *EClinicalMedicine*, 66, 102325.

NON-MSG Studies (MSG Contributions)

Thompson, G. R., 3rd, Soriano, A., Honore, P. M., Bassetti, M., Cornely, O. A., Kollef, M., Kullberg, B. J., Pullman, J., Hites, M., Fortún, J., Horcajada, J. P., Kotanidou, A., Das, A. F., Sandison, T., Aram, J. A., Vazquez, J. A., & Pappas, P. G. (2023). [Efficacy and safety of rezafungin and caspofungin in candidaemia and invasive candidiasis: pooled data from two prospective randomized controlled trials](#). *The Lancet. Infectious diseases*, March 2024(3), P319-328.

Nguyen, M. H., Ostrosky-Zeichner, L., Pappas, P. G., Walsh, T. J., Bubalo, J., Alexander, B. D., Miceli, M. H., Jiang, J., Song, Y., & Thompson, G. R., 3rd (2023). [Real-world Use of Mold-Active Triazole Prophylaxis in the Prevention of Invasive Fungal Diseases: Results From a Subgroup Analysis of a Multicenter National Registry](#). *Open forum infectious diseases*, 10(9), ofad424.

Pappas, P. G., Vazquez, J. A., Oren, I., Rahav, G., Aoun, M., Bulpa, P., Ben-Ami, R., Ferrer, R., Mccarty, T., Thompson, G. R., Schlamm, H., Bien, P. A., Barbat, S. H., Wedel, P., Oborska, I., Tawadrous, M., & Hodges, M. R. (2023). [Clinical safety and efficacy of novel antifungal, fosmanogepix, for the treatment of candidaemia: results from a Phase 2 trial](#). *The Journal of antimicrobial chemotherapy*, 78(10), 2471–2480.

Yasinskaya, Y., Bala, S., Waack, U., Dixon, C., Higgins, K., Moore, J. N., Jjingo, C. J., O'Shaughnessy, E., Colangelo, P., Botgros, R., Nambiar, S., Angulo, D., Dane, A., Chiller, T., Hodges, M. R., Sandison, T., Hope, W., Walsh, T. J., Pappas, P., Katragkou, A., ... Farley, J. (2023). [Food and Drug Administration Public Workshop Summary-Development Considerations of Antifungal Drugs to Address Unmet Medical Need](#). *Clinical infectious diseases : an official publication of the Infectious Diseases Society of America*, 77(3), 380–387. <https://doi.org/10.1093/cid/ciad195>

Thompson, G. R., 3rd, Soriano, A., Cornely, O. A., Kullberg, B. J., Kollef, M., Vazquez, J., Honore, P. M., Bassetti, M., Pullman, J., Chayakulkeeree, M., Poromanski, I., Dignani, C., Das, A. F., Sandison, T., Pappas, P. G., & ReSTORE trial investigators (2023). [Rezafungin versus caspofungin for treatment of candidaemia and invasive candidiasis \(ReSTORE\): a multicentre, double-blind, double-dummy, randomized phase 3 trial.](#) *Lancet (London, England)*, 401(10370), 49–59.

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Staff and Contacts

Carolynn Thomas Jones	Executive Director	jones.5342@osu.edu
Jennifer Cox	KME Coordinator	headquarters@msgerc.org
Debbie Zaparoni	KME Vice President	headquarters@msgerc.org
Beth Kassalen	KME President	beth@kassalen.org
Shayna Bryan	UAB Central Unit Administrator	shaynabryan@uabmc.edu
Drashti Shah	UAB Central Unit Coordinator	dkshah@uabmc.edu