Unit of Infectious Diseases, University Hospital "12 de Octubre"

Institutional Setting

The University Hospital "12 de Octubre" is a 1,300-bed tertiary care medical centre located in Madrid, Spain, with more than 45,000 admissions per year.





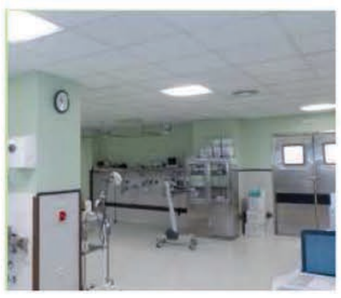
Our institution is an European leader in terms of transplantation and one of the few centres in Spain authorized to perform all the types of solid organ transplants (SOT).

The Unit of Infectious Diseases offers an in-patient consultation service for general infectious diseases and, particularly, for specialized consultations in SOT recipients, onco-hematological patients and other types of immunocompromised hosts, as well as abdominal, orthopedic and neurosurgery.

We also have daily contact with clinical microbiologists who provide us with the latest relevant results from both inpatients and outpatients.

Our medical activity is complemented with an extensive program of clinical sessions that includes discussion of clinical cases and patients' management, monographic sessions, literature reviews and conferences given by recognized experts.

We form part of the Spanish Network for the Research in Infectious Diseases (REIPI-RD12/0015), Instituto de Salud Carlos III, Madrid, Spain.





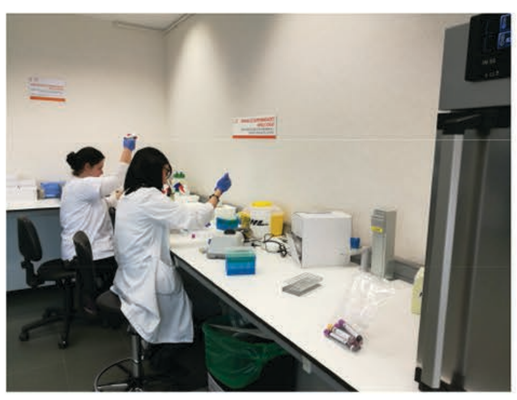


Basic & Translational Research

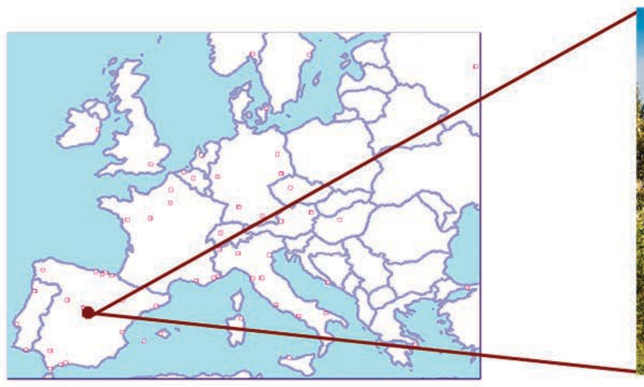
Our most important research activity is focused on the monitoring of the immunological response in SOT recipients and its impact on the individual susceptibility to infection.

For this purpose we have the support of a laboratory in which new techniques are progressively being incorporated: QuantiFERON-CMV, PCR for EBV and other viruses, Luminex technology *(multi-analyte profiling)* for cytokine and chemokine determination, and intracellular cytokine staining with flow citometry. We collaborate with the Hospital Clínico Universitario de Valencia (Prof. David Navarro) in numerous research projects.





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Scientific Production

More than 120 indexed publications over the last 5 years.

Most relevant papers…

Solid organ transplantation:

- López-Medrano F, *et al.* Clinical presentation and determinants of mortality of invasive pulmonary aspergillosis in kidney transplant recipients: a multinational cohort study. Am J Transplant 2016;16:3220-34.
- Origüen J, *et al.* Should asymptomatic bacteriuria be systematically treated in kidney transplant recipients? Results from a randomized controlled trial. Am J Transplant. 2016 Apr 18.
- López-Medrano F, *et al.* Risk factors associated with early invasive pulmonary aspergillosis in kidney transplant recipients: results from a multinational matched case-control study. Am J Transplant 2016;16:2148-57.
- Fernández-Ruiz M, *et al.* Low natural killer cell counts and onset of invasive fungal disease after solid organ transplantation. J Infect Dis 2016;213:873-4.
- Pérez-Jacoiste Asín MA, *et al.* Monitoring of intracellular adenosine triphosphate in CD4 T cells to predict the occurrence of cytomegalovirus disease in kidney transplant recipients. Transpl Int 2016;29:1094-105.
- San-Juan R, *et al.* Effect of delaying prophylaxis against CMV in D+/R- solid organ transplant recipients in the development of CMV-specific cellular immunity and occurrence of late CMV disease. J Infect 2015;71:561-70.
- Fernández-Ruiz M, *et al.* Association between individual and combined SNPs in genes related to innate immunity and incidence of CMV infection in seropositive kidney transplant recipients. Am J Transplant 2015;15:1323-35.
- San-Juan R, *et al.* Current preventive strategies and management of Epstein-Barr virus-related post-transplant lymphoproliferative disease in solid organ transplantation in Europe: results of the ESGICH Questionnaire-based Cross-sectional Survey. Clin Microbiol Infect 2015;21:604.e1-9.
- Silva JT, *et al.* Infectious complications following small bowel transplantation. Am J Transplant 2016;16:951-9.

Staphylococcus aureus bloodstream infection:

- San-Juan R, *et al.* High MICs for vancomycin and daptomycin and complicated catheter-related bloodstream infections with methicillin-sensitive *Staphylococcus aureus*. Emerg Infect Dis 2016;22:1057-66.
- Lalueza A, *et al.* Risk factors for metastatic osteoarticular infections after a long follow-up of patients with *Staphylococcus aureus* bacteraemia. Clin Microbiol Infect 2015;21:1010.e1-5.

Invasive fungal disease:

- Fernández-Ruiz M, *et al.* Impact of fluconazole susceptibility on the outcome of patients with candidaemia: data from a population-based surveillance. Clin Microbiol Infect 2017 Jan 29.
- Aguado JM, *et al.* Serum galactomannan versus a combination of galactomannan and polymerase chain reaction-based Aspergillus DNA detection for early therapy of invasive aspergillosis in high-risk hematological patients: a randomized controlled trial. Clin Infect Dis 2015;60:405-14.
- Fernández-Ruiz M, *et al.* Initial use of echinocandins does not negatively influence outcome in *Candida parapsilosis* bloodstream infection: a propensity score analysis. Clin Infect Dis 2014;58:1413-21.

Awards & Distinctions

• Prof. Jose María Aguado has been the chairperson of the ESCMID Study Group for Infections in Compromised Hosts (ESGICH) from 2014 to 2016.

•ESCMID SG Research Funding 2015 to the project: INCREMEN-SOT. An International Consortium for the clinical study of bloodstream infections caused by multidrug-resistant *Enterobacteriaceae* in Solid Organ Transplantation.

• ESCMID Young Investigator Award 2017 for Research in Clinical Microbiology and Infectious Diseases to Dr. M. Fernández Ruiz.

•Editorial to the paper published in the *American Journal of Transplantation* in 2016 "Should asymptomatic bacteriuria be systematically treated in kidney transplant recipients? Results from a randomized controlled trial".

• Editorial to the paper published in *Clinical Infectious Diseases* in 2015 "Initial use of echinocandins does not negatively influence outcome in *Candida parapsilosis* bloodstream infection: a propensity score analysis".

Contact Details

Prof. José María Aguado García

Unit of Infectious Diseases, Centro de Actividades Ambulatorias, 2ª planta, bloque D

University Hospital 12 de Octubre, Av. Córdoba, s/n. CP 28041. Madrid. Spain

E-mail address: jaguadog1@gmail.com

+34 913908000 ext. 4843

