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Mobile phones of paediatric senior physicians are highly contaminated with viral genomes of several epidemic viruses during the winter season

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Background: Mobiles phones (MP) routinely used by health care professionals are potential reservoirs of nosocomial bacteria, but few data are available concerning viruses. A first study performed in our centre (Pillet et al., Clin Microbiol Infect 2016) that recorded the contamination by viral genome at a single day showed that rotavirus RNA can be detected on MP, notably in paediatric emergency and paediatric departments.

Objectives: To correlate the circulation of epidemic viruses with the contamination by RNA and DNA viruses on MP used by paediatric senior physicians during all the winter season.

Study design: Ten digital enhanced cordless telephones (DECTs) were selected and wiped each week from December 15 2015 to May 3 2016 with a 480CE e-swab (Copan, Brescia, Italy). The swabs, placed in transport medium, were frozen at −320°C before virological analysis. A volume of 200 μL of transport medium was extracted by using the Specific B protocol on the NUCLISENS easyMAG instrument (bioMérieux, Marcy l’Étoile, France) under an elution volume of 50 μL. Respiratory viruses (respiratory syncytial virus (RSV) A et B, influenza A et B, adenovirus, metapneumovirus, coronavirus 229E, NL63 and OC43, parainfluenza virus 1, 2, 3 and 4, bocavirus, enterovirus and rhinovirus) and gastro-intestinal viruses [norovirus GI and GII, rotavirus A, adenovirus F (serotype 40/41), astrovirus and sapovirus] were detected by RT-qPCR by using Anyplex™II RV16 Detection kit and Allplex™ Gastrointestinal Full Panel Assay (Seegene, Eurobio, Courtaboeuf, France) respectively, according to the manufacturer’s instruction. A questionnaire was filled-in by the professionals before and after the study in order to record their behavioural pattern in the use of MP and the hygienic measures that they apply to these devices.

Expected results: Determination of the prevalence for all infectious agents enrolled in the current study, analysed by gender, age, geographic distribution, and also regarding the socio-economic factors.

Expected outcomes: The expected outcomes are to improve the knowledge on the immunity profile of the Portuguese population concerning VPD and provide population-based health information to support the evaluation of the current National Vaccination Program and also the implementation of national guidelines regarding the prevention of sexually transmitted infections.

Acknowledgements: This project is funded by Iceland, Liechtenstein and Norway through the EEA Grants.

http://dx.doi.org/10.1016/j.jcv.2016.08.219

Abstract no: 275
Presentation at ESCV 2016: Poster 180

National serological survey – Portugal 2015–2016: Rubella seroprevalence in a population-based sample of childbearing age women resident in the North, Lisbon and Algarve

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Background: In Portugal, three different strategies for prevention of congenital rubella have been implemented. The first started in 1982 with the immunization of adolescent girls (aged 11–13 years) and non-immune women. The second began in 1987 with a single dose of measles, mumps and rubella vaccine (MMR) for boys and girls aged 15 months, followed by the introduction in 1990 of the two MMR doses at 15 months and 11–13 years respectively.

Presently, rubella vaccine is routinely available as MMR; the first dose is given at 12 months and the second at 4–6 years of age.

Aim: Determination of rubella IgG seroprevalence in a representative sample of women aged 20 to 44 years residents in three territorial units (NUTIII) of Portugal mainland.

Material and methods: Study population: The population-based sample of women at childbearing age was collected in the framework of the project National Serological Survey – Portugal 2015–2016 (project funded by Iceland, Liechtenstein and Norway through the EEA Grants) and was calculated to be nationally representative and corresponding to 42 women in the North and Lisbon.