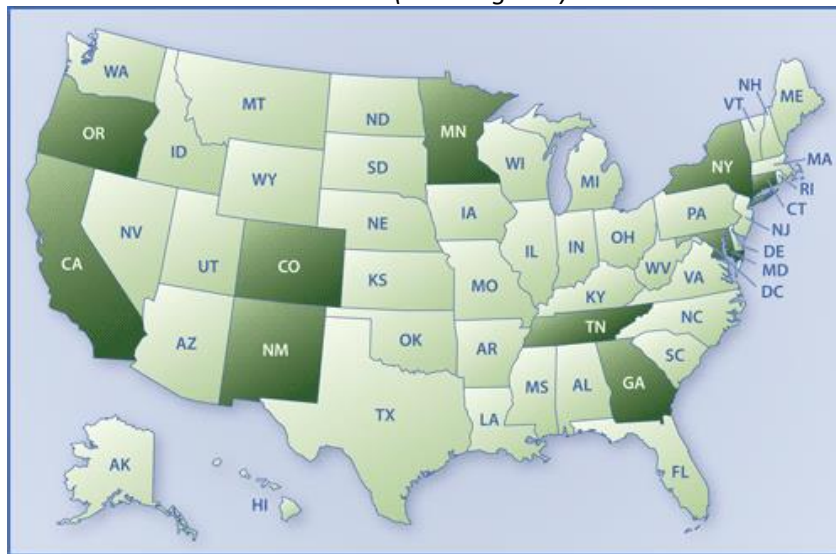


## Emerging Infections Programs

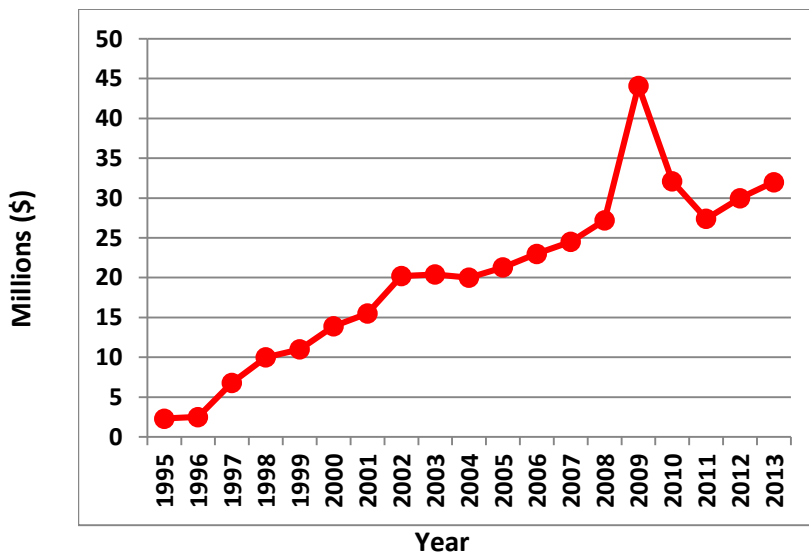
The Emerging Infections Programs (EIPs) are a population-based network of state health agencies and their collaborators, including (but not limited to) academic institutions, local health departments, public health and clinical laboratories, infection control professionals, and healthcare providers. EIP sites receive grants from the Centers for Disease Control and Prevention (CDC) to conduct surveillance and applied epidemiologic and laboratory research, implement and evaluate prevention and intervention projects, and respond quickly to new infectious disease issues. The unique strength of the EIPs lies in the network's ability to quickly translate surveillance and research activities into informed policy and public health practice.

EIP Sites (in dark green)



Source: Centers for Disease Control and Prevention

EIP Funding 1995-2013



### EIP Grant Funding Levels

Baseline funding for EIP has been between \$20-32 million since 2004, though overall program funding increased substantially in 2009 and 2010 due to investments from the American Recovery and Reinvestment Act, pandemic influenza funds, and the Affordable Care Act.

## EIP Grants Support Critical Infectious Disease Work in States

The EIPs were established in 1995 as a result of CDC's 1994 strategy, *Addressing Emerging Infectious Disease Threats: A Prevention Strategy for the United States*. A report from an external review conducted in 2006 referred to the EIPs as "a national resource" due to their proven ability to identify and address several key issues confronting public health.

## Activities Conducted Throughout the EIP Network

- **Active Bacterial Core surveillance (ABCs):** Active population-based laboratory surveillance for invasive bacterial disease. Pathogens included: groups A and B *Streptococcus*, *Haemophilus influenzae*, *Neisseria meningitidis*, *Streptococcus pneumoniae*, and methicillin-resistant *Staphylococcus aureus* (MRSA).
- **FoodNet:** Active population-based laboratory surveillance to monitor the incidence of foodborne diseases. Surveillance is conducted for seven bacterial and two parasitic pathogens: *E. coli* O157:H7, *Campylobacter*, *Listeria*, *Salmonella*, *Shigella*, *Yersinia*, *Vibrio*, *Cryptosporidium*, and *Cyclospora*.
- **Influenza surveillance:** Active population based surveillance for laboratory confirmed influenza-related hospitalizations.
- **Healthcare-Associated Infections - Community Interface (HAIC) projects:** Active population-based surveillance for *Clostridium difficile* infection and other healthcare-associated infections caused by pathogens such as MRSA, *Candida*, and multi-drug resistant Gram-negative bacteria.

Surveillance efforts of these core EIP activities generate reliable estimates of the incidence of certain infections and provide the foundation for a variety of epidemiologic studies to explore risk factors, spectrum of disease, and prevention strategies.

## Special Studies and Projects Conducted at Selected EIP Sites

- Monitoring the impact on disease burden of the most recent vaccines for pneumococcal and meningococcal disease, human papilloma virus, and pertussis.
- Active or enhanced surveillance for pertussis, unexplained deaths and critical illness, prion disease, and tickborne diseases.
- Training opportunities for professionals through fellowship programs, for partner organizations within the EIP area, and for states not participating in the network.

This complex network of active surveillance, applied research, and evaluation is currently conducting over 70 projects on a broad spectrum of infectious diseases.

<http://www.cdc.gov/ncezid/dpei/eip/index.html>