

## eNews



**Communications and Publications Division (CPD) of the IFCC** 

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International Federation of Clinical Chemistry and Laboratory Medicine





# eNews



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#### In memory of Prof. Daniel Mazziotta, EB Member (2015-2016)

#### En memoria de Prof. Daniel Mazziotta, Miembro del Consejo directivo IFCC (2015-2016)

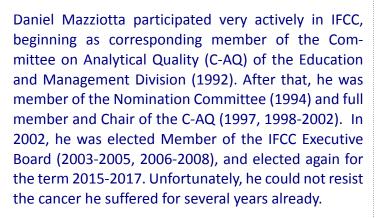
by Rosa Isabel Sierra-Amor

IFCC EB Member (Miembro del Consejo directivo IFCC)

The Latin American scientific community is deeply saddened by the death of Prof. Daniel Mazziotta from Argentina. Daniel passed away quietly in Buenos Aires on Sunday, February 14, 2016.

The IFCC has lost one of its brightest and sharpest specialists in lab medicine who contributed to worldwide IFCC reputation with a broad smile, spreading enthusiasm in promoting

Lab Medicine well beyond the Latin American borders.



Daniel was Professor of Clinical Chemistry at National University of La Plata (1989-), Director of the External Quality Assessment Program of the Argentine Biochemical Foundation (1987-) and Director of the Reference and Standardization Laboratory in Clinical Biochemistry of Argentine Biochemical Foundation (1997). He graduated in Chemistry (1974) and Biochemistry, Clinical Orientation (1976) at the National University of La Plata, Argentina. From 1974 to 1982, he served the Central Laboratory Service of the Hospital San Juan de Dios of La Plata working for the Intensive Care Unit and the Heart and Lung Functional Exploration Service. He became member of the Central Commission of External Quality Control of the Ministry



La comunidad científica de América Latina está profundamente triste por la muerte del Prof. Daniel Mazziotta de Argentina. Daniel falleció recientemente en Buenos Aires el domingo, 14 de febrero de 2016.

La IFCC ha perdido uno de sus más brillantes especialistas de laboratorio clínico que contribuyeron al reconocimiento de IFCC en todo el mundo y siempre con una amplia sonrisa, con

el entusiasmo de promover el laboratorio clínico mucho más allá de las fronteras de América Latina.

Daniel Mazziotta participó muy activamente en IFCC en un principio como miembro correspondiente de la Comisión de calidad analítica (C-AQ), de la división de educación y gestión (1992). Después de eso, fue miembro del Comité de nominaciones (1994) y miembro y Presidente del C-AQ (1997, 1998-2002). En 2002, fue elegido como miembro de la Junta Ejecutiva de la IFCC (2003-2005, 2006-2008) y electo nuevamente para el período 2015-2017. Lamentablemente, no pudo resistir el cáncer que sufría desde hace ya varios años.

Daniel fue profesor de química clínica en la Universidad Nacional de La Plata (1989-), Director del programa de evaluación externa de calidad de la Fundación Bioquímica Argentina (1987-) y Director del laboratorio de referencia y normalización de la Fundación bioquímica Argentina (1997). Se tituló como Licenciado en química (1974) y bioquímica, con orientación clínica (1976) en la Universidad Nacional de La Plata, Argentina. De 1974 a 1982, estuvo en el servicio de Laboratorio Central del Hospital San Juan de Dios de La Plata trabajando para la unidad de cuidados intensivos y corazón y en el servicio de exploración

of Health of Province of Buenos Aires (1978) and the organizer of External Quality Control Program for the same Ministry from 1980 to 1986.

He also participated very actively in other organizations, holding positions as member of the Executive Board of the Specialists on Biological Analyses Association (1984 and 1986), Secretary of the Biochemical Federation of the Province of Buenos Aires (1986 to 1992). Member of the Permanent Scientific Section of the Latin-American Confederation of Clinical Biochemistry since 1987. In addition, he was also National Representative of Argentina.

He contributed as member of the Editorial Board of Acta Bioquimica Clinica Latinoamericana, the official journal of the Latin-American Confederation of Clinical Biochemistry (COLABIOCLI), and Member of the Intercontinental Board of Accreditation and Quality Assurance journal. He received the American Association for Clinical Chemistry International Fellowship Award in 2000. He was Honorary National Member of the Argentine Medical Association and Member of Honour of the Cuban Society of Clinical Pathology. In 2006 he received an award for his Professional Career in Argentina after developing intensive post-graduate education courses on Quality Control around the country, as well as in many Latin-American countries, including Bolivia, Chile, Paraguay, Uruguay, Dominican Republic, Ecuador, Guatemala, Costa Rica, Honduras, Mexico, Venezuela and Brazil. He acted as advisor for the Pan-American Health Organization in Guatemala and Ecuador.

We express our appreciation to Daniel for his efforts promoting quality management and laboratory medicine worldwide.

Your friendship was of great value to all. Daniel, you will be missed with great respect!

(From Tahir Pillay, eNews Editor: We in the SAACB are grateful to have hosted Daniel Mazziotta in Cape Town, South Africa in 2008 at the annual Federation of South African Societies of Pathology meeting along with the IFCC Delegation including Jocelyn Hicks, Joseph Lopez and Ghassan Shannan)

funcional pulmonar. Se convirtió en miembro de la Central la Comisión de Control de calidad externo del Ministerio de salud de la provincia de Buenos Aires (1978) y fue organizador del programa de Control de calidad externo para el mismo Ministerio desde 1980 a 1986.

También participó muy activamente en otras organizaciones, ocupando cargos tales como miembro del Comité Ejecutivo de los especialistas de la Asociación de análisis biológicos (1984 y 1986), Secretario de la Federación bioquímica de la provincia de Buenos Aires (1986-1992). Miembro de la sección científica permanente de la Confederación Latinoamericana de bioquímica clínica since1987. Además, también fue representante nacional de la Argentina.

Colaboró como miembro de la Junta Editorial de Acta Bioquímica Clínica Latinoamericana, el diario oficial de la Confederación Latinoamericana de bioquímica clínica (COLABIOCLI) y miembro de la revista Intercontinental Junta de acreditación y aseguramiento de la calidad. Recibió el reconocimiento internacional de la Asociación Americana de química clínica (AACC) que le otorgo el Fellowship Award en 2000. Fue miembro honorario a nivel Nacional de la Asociación Médica Argentina y miembro de Honor de la sociedad cubana de patología clínica. En 2006 recibió en Argentina el premio a su trayectoria profesional, después de desarrollar cursos de formación postgrado intensivo en Control de calidad en todo el país, así como en muchos países más de América Latina, como Bolivia, Chile, Paraguay, Uruguay, República Dominicana, Ecuador, Guatemala, Costa Rica, Honduras, México, Venezuela y Brasil. También fue asesor de la Organización Panamericana de la salud en Guatemala y Ecuador.

Le agradecemos a Daniel todos sus esfuerzos en la promoción de la calidad y la gestión del laboratorio clínico en todo el mundo

Tu amistad fue de gran valía para nosotros. Daniel, ¡te extrañaremos mucho, todo nuestro respeto para vos!



## The IFCC Committee on Evidence-Based Laboratory Medicine (C-EBLM)

**by Chris Florkowski** C-EBLM Chair

Canterbury Health Laboratories, Christchurch, New Zealand

Current full members include Chris Florkowski (NZ, Chair), Hernan Fares-Taie (Argentina), Karina Rodriguez-Capote (Canada), Julien Wills (France) and Annie Zemlin (South Africa), supported by corresponding members including Nuria Gimenez (Spain). Each member offers different skills as well as regional perspectives from around the globe.

Our overall objective is to promote the rational use of scarce laboratory resources for optimal healthcare outcomes by promoting the tools of EBLM into daily practice. In particular, we seek to raise the profile of laboratory medicine as a value added resource. Our aims are to promote the understanding and the methodology of EBLM through educating laboratory professionals about finding, appraising and acting on the evidence. Specifically, we seek to raise awareness of how to perform (and critique) primary diagnostic studies, how to carry out systematic reviews and how to make and implement evidence-based guideline recommendations in laboratory medicine. At the

recent IFCC General Conference in Madrid, Hernan Fares-Taie, together with his young scientist son, Santiago presented all the media resources, including the Radio "El Microscopio" broadcasts with which they have successfully connected with large audiences in the Latin American world. The challenge is how to extend this more globally.

We have traditionally supported workshops and visiting lecturers over many years, as well as many conference symposia. Given the increasing challenges of supporting face-to-face activities, however,we are currently canvassing international opinions on how to better approach the learning of EBLM. We have developed an IFCC curriculum for EBLM and are actively contributing modules to the IFCC e-Academy. This will include specific learning objectives, together with questions and eventually the opportunity to provide evidence of having completed the learning activities. We are aiming to promote self-guided learning with truly global access.



From left to right: Annie Zemlin, Karina Rodriguez-Capote, Nuria Gimenez, Hernan Fares-Taie, Chris Florkowski (Chair), Julien Wils

#### Results of an international survey on laboratory terminology

by Graham Beastall IFCC Past-President gbeastall@googlemail.com

The NPU Terminology Steering Committee recently conducted a survey among the national society members of IFCC. The survey aimed to establish the extent to which there is a national system of laboratory terminology in use in each country. The headline findings from the survey are:

 Uncertainty about the status of laboratory terminology in many countries;

- Lack of education and training in laboratory terminology in most countries;
- Recognition of the importance of systematic laboratory terminology;
- → Agreement on arrange of educational support to improve knowledge and understanding.

The full results of the survey may be found *here*.



#### Roche Conference on Biomarkers in Alzheimer's Disease

by Sergio Bernardini IFCC Secretary

Neuropsychiatric Disorders and in particular, Alzheimer's Disease, are a tremendous challenge for the future; a human and social challenge and a challenge for sustainability on the part of the health system.

It is an extremely complex world.

Often, the clinical symptoms of these disorders are evident a long time prior and it is necessary to advance the diagnosis as early as possible to slow the progression of the disease. Sometimes the clinical, neuroimaging and pathologic phenotype may be heterogeneous and the coexistence of other pathologies can complicate the differential diagnosis.

From the laboratory point of view, it should be pointed out that to date the overall variability of available biomarkers (both diagnostic and pregression markers) remains too high to allow assignment of universal biomarker cut-off values for a specific intended use.

Moreover, the new approaches in biomarkers discovery (proteomics, mirromics, metabolomics) often showed conflicting results because of different analytical platforms, different matrices, different panel of metabolites studied, different clinical cohorts and pre-analytical confounding factors.

Harmonization and standardization between different methods are absolutely needed, including the creation of certified reference materials.

At the same time the Integration of the data from the Routine Laboratory with other laboratory techniques (Proteomics, Genomics, and Flow Cytometry) and diagnostic tools (Radiology, Pathology) is desirable.

Moreover, other roles of biomarkers have to be considered in clinical trials: for diagnostic accuracy, stratification of patients, to characterize the mechanism of action and the biochemical effects of drugs, to monitor disease progression and assess the response to treatment.

It is really a big challenge!

The aim of this Conference is to bring together Laboratory professionals neuroimaging experts, geneticists and Clinicians to debate the possible role of biomarkers in a sort of brainstorming.

I am confident that the Mexico City Conference would be an opportunity to shed new light on this challenging topic!



## Shaping the future of laboratory medicine: clarifying the vision

by Graham Beastall

IFCC Past-President, on behalf of the Executive Board

#### Introduction

This is the second of six articles written for e-News during 2016 that will address the IFCC Executive Board position on moving forward the 'Shaping the Future of Laboratory Medicine agenda.

In the previous issue of e-News (February 2016) a general update was provided. This short article will explain the exercise undertaken in January 2016 to dedicate quality time to determining how IFCC can best help to 'Shape the Future of Laboratory Medicine'.

#### **Strategy Workshop**

In fulfilment of one of the Action Points in its strategic plan (2015-17) the IFCC Executive Board undertook a two-day strategy workshop in Milan. Those invited to participate in the workshop comprised:

- The current IFCC Executive Board
- The Chairs of IFCC Divisions
- The Presidents of IFCC Regional Federations
- The staff team from the IFCC Office
- A former Corporate Member representative to the IFCC Executive Board

The workshop was facilitated by Fischer Group International, a company expert in supporting international organisations to develop future plans and priorities.

The workshop comprised a 'SWOT' analysis of IFCC in relation to the future of laboratory medicine. The results of the 'SWOT' analysis were evaluated and prioritised before being developed into:

- A new Vision statement for IFCC
- The adoption of Values for IFCC going forward
- The development of a detailed Action Plan with timelines

#### 'SWOT' Analysis

The 'SWOT' analysis is an established tool for providing the raw material that will be developed into the Vision, Values and Action Plan. In small groups the workshop participants produced understanding of the Strengths; Weaknesses; Opportunities and Threats that apply to IFCC in the changing world of laboratory medicine (see Figure).

The small groups came together to share and consolidate their thinking into four agreed tables of opinion – one each for Strengths; Weaknesses; Opportunities and Threats. These tables were then prioritised to produce the content for further development.

The next step in the process involved agreement through discussion to:

- Build on the Strengths
- Address the Weaknesses
- Maximise the Opportunities
- Mitigate the Threats

#### SWOT - a situation analysis











#### Strengths

Think of your unique culture, resources, capabilities, knowledge, operating system, values, staffing practice, etc.

#### Weaknesses

Consider your limitations, financial resources, ability to influence and to be effective in order to reach strategic objectives.

#### **Opportunities**

Relate to any favorable current or prospective situation in your external environment, such as a trend or overlooked need.

#### **Threats**

Observe any unfavorable situation, trend or impending change in your external environment that could damage your ability to perform.

Through a process known as Business Canvas Modelling these agreements were converted into a new Vision, Values and a detailed Action Plan.

#### **Vision**

The agreed Vision statement for IFCC going forwards is: 'We advance excellence in laboratory medicine for better healthcare worldwide'.

#### **Values**

The eight Values developed for IFCC in support of its Vision are:

- Apply science to promote harmonisation and innovation in laboratory medicine by drawing on worldwide expertise
- Develop and deliver educational programmes globally to foster expert laboratory medicine professionals
- Use evidence-based processes to define and promote the value of laboratory medicine in healthcare worldwide

- 4. Be responsive to the unique and regional needs of our Members
- Be open-minded and aware of innovations and new developments in the science of laboratory medicine
- 6. Strive for efficiency and effectiveness within our organisational structure
- 7. Be transparent and responsible in our financial affairs
- 8. Be mindful of the international ethical codes pertaining to our activities

#### **Action Plan**

A total of 22 Actions were agreed to help deliver the new Vision whilst adhering to the agreed Values. These Actions were placed in three bands, each with its own window of time:

#### **Priority 1 Actions**

9. Enable more effective and efficient IFCC Divisions, Committees, Working Groups and Task

Forces by establishing professional performance management, including the selection of people to act in certain roles

- 10. Respond to the new MedTech Europe code of ethical business practice and its impact on IFCC conferences
- 11. Present the new Vision so that it is clear, compelling and communicated
- 12. Promote the value of laboratory medicine in healthcare
- 13. Obtain detailed clarification of customer/user groups and their needs

#### **Priority 2 Actions**

- 14. Set up a cost reduction task force
- 15. Review the current IFCC organisational structure
- 16. Address the expected financial challenges
- 17. Demonstrate and communicate specific values generated and benefits received to all Member groups
- 18. Find ways to increase collaboration with other societies to increase the visibility, credibility and influence of laboratory medicine
- Increase collaboration with international clinical societies and other international stakeholders in healthcare
- 20. Generate more multi-language educational materials

#### **Priority 3 Actions**

21. Increase the focus on harmonisation and standardisation in laboratory medicine

- 22. Deliver a more extensive and professional customer/user-oriented media presence
- 23. Organise more specialised conferences stimulating new interests and membership
- 24. Expand educational opportunities through innovative e-learning and distance learning programmes
- 25. Find ways to improve the involvement of young scientists
- 26. Identify new and efficient ways to share best practices
- 27. Re-define the interfaces between IFCC and its Members to ensure effective communication
- 28. Review membership criteria to increase the number of Members
- 29. Expand the membership beyond clinical chemistry and laboratory medicine
- 30. Ensure fair representation and diversity in IFCC activities

#### **Invitation to Comment**

The IFCC Executive Board has agreed to meet the challenges laid down by the new Vision, the Values and the Action Plan. Delivery will require IFCC to be ever more inclusive. Therefore, all readers of this article are invited to comment on its content and to suggest ways in which it may be taken forward. Comments should be brief, specific in nature and include one or more recommendations for action by the Executive Board. Please address comments to <code>ifcc@ifcc.org</code> using the heading 'Shaping the Future of Laboratory Medicine'.



#### The Foundation for Emerging Nations (FEN)

by Graham Beastall
IFCC Past-President

IFCC was proud to launch the Foundation for Emerg-

ing Nations (FEN) at the General Conference in Madrid in March 2016. This short article aims to give readers information about the purpose and organisation of the FEN; how donations can be made;

and how applications for project funding may be submitted. Full details of the FEN may be found at: www.ifccfoundation.org.

#### What is the FEN?

The FEN is a non-profit making Charitable Trust established in 2016 under Swiss Law by the International

Federation of Clinical Chemistry and Laboratory Medicine (IFCC).

#### What is the purpose of the FEN?

"The Foundation is devoted to fund raising and to supporting programmes that help to improve the quality and delivery of laboratory medicine services, particularly in emerging nations."

#### Why is the FEN important?

A high percentage of all clinical decisions are influenced by the results of laboratory medicine investigations. Consequently, patient safety and clinical outcomes are dependent on the quality of laboratory medicine services. In developed countries laboratory medicine services are of high quality, and most are accredited against an international standard. In emerging nations there is scope for improvement in the quality of laboratory medicine services but educational support is required.

#### What projects are suitable for funding by the FEN?

The FEN is able to support projects in emerging nations that are organised by societies, groups or individuals, provided that the project will lead to an outcome that:

- can be assessed in terms of quality improvement, and/or
- provides a baseline for local support to continue the project.

Projects shall be educational in nature and may occur at undergraduate or postgraduate level. Suitable projects will be in line with the Mission, Aims and Overall Strategic Direction of IFCC, although the *FEN* is not restricted to supporting projects nominated by IFCC Members. Examples of suitable projects are given at *www.ifccfoundation.org*.

#### What are the governance arrangements for the FEN?

The *FEN* is governed in strict accordance with Swiss Charity Law, involving:

- An elected Board of Directors holding regular meetings with minutes
- Annual report and independently audited accounts in Swiss Francs
- Independent expert reviewers of project proposals

## Who are the elected Members of the FEN Board of Directors?

The inaugural Board of Directors comprises five persons with extensive experience of laboratory medicine and/or the operation of Charitable Trusts in healthcare:

- Dr Graham H Beastall (UK) Chair
- Prof Thomas Brinkmann (Germany)
- Dr Lucia Monaco (Italy)
- Professor Tomris Ozben (Turkey)
- Dr Michelle Rossier (Switzerland)

#### Who will provide financial support for the FEN?

IFCC has provided 'start-up' finance for the FEN. Further sponsorship may be provided by:

- Other Charitable Trusts active in healthcare
- Global commercial organisations active in healthcare
- National or international organisations with an interest in education in health
- Individual donors interested in improving patient safety in emerging nations.

#### How can donations be made to the FEN?

Potential donors to the *FEN* are encouraged to contact the Chair of the Board of Directors (*chair@ifcc-foundation.org*) to discuss their donation and how it may be used and acknowledged. All donations will be deposited into the *FEN* bank account, with the following details:

Bank: Credit Suisse, Geneva, Switzerland

**Account Name:** IFCC Foundation for Emerging Nations

Swift code: CRESCHZZ12A

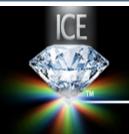
**IBAN:** CH33 0483 5158 8655 2100 0

**Account number**: 0251-1588655-21

## How can an application for project funding from the *FEN* be made?

The application form is available online and may be downloaded from <a href="https://www.ifccfoundation.org">www.ifccfoundation.org</a>. The deadline for receipt of applications is **31 May 2016**.

#### The Increasing Clinical Effectiveness (ICE) Award



#### INCREASING CLINICAL EFFECTIVENESS

Shifting Our Focus Beyond the Laboratory















by Graham Beastall
IFCC Past-President

#### **Background**

The October 2015 issue of IFCC e-News contained a brief article about the 2015/16 ICE Award. This article reports on the outcome of the 2015/16 ICE Award and invites readers to prepare for the 2016/17 ICE Award.

#### The ICE Award:

- ⇒ Is an initiative of the Clinical Laboratory Management Association (CLMA) in collaboration with a number of partners one of which is IFCC.
- ➡ Has been launched to encourage laboratory medicine specialists to collaborate with clinical colleagues to demonstrate that optimal use of the laboratory can have a measurable positive impact on patient outcomes.
- ⇒ Is open to any laboratory medicine specialist. He/ she is invited to submit an abstract that describes testing-related interventions and the quantifiable positive impact for patients that they produced.

The submitted abstracts should be a maximum of 750 words and comprise:

- Statement of problem and background (goal, context, rationale)
- ➡ Intervention/study plan/measures (intervention choice, study design, measure appropriateness)

- Data analysis and results (actual data, quality assessment of data, data Interpretation, limitations, findings)
- Discussion and lessons learned (conclusions, generalizability, implications for others)
- Detailed information and advice is available from www.ICE-lab.org

Abstracts are scored by independent experts according to a structured scoresheet, which is available on the above website. All abstracts that meet minimum standards are invited to display posters at an appropriate scientific meeting. The winning abstracts are presented as oral communications with speaker benefits provided.

#### The 2015/16 ICE Award

The closing date for the 2015/16 ICE Award was 11 December 2015. By that date 23 abstracts were received from 9 countries (USA 9; UK 5; Italy 2; Turkey 2; Ethiopia 2; Canada; India; Uganda). These abstracts were scored by eight international experts and 13 were adjudged to meet minimum standards and authors were invited to present posters at the CLMA Knowledge Lab meeting, which was held in Orlando, Florida in March 2016.

Three winners were selected and invited to present oral communications to the same meeting. The winners were:

- "High sensitivity cardiac troponin I enables early, safe discharge of patients". Royal Wolverhampton NHS Trust, UK (Clare Ford)
- "Improving stat 'Protime' turnaround to improve emergency department patient throughput". Kaiser Permanente South Sacramento Medical Center, US (Susan Traub)
- "Gene Expert MTB/RIF assay for the diagnosis for smear negative pulmonary tuberculosis". Jimma University, Jimma, Ethiopia (Mulualem Tadesse)

The main reason that ten abstracts failed to meet minimum standards was that they did not demonstrate clear linkage to patient outcomes and/or that clinical practice was not changed by the results of the study.

#### The 2016/17 ICE Award

The window for submitting abstracts for the 2016/17 ICE Award will open in June 2016 and close at the end of September 2016. The outcome will be announced at the end of October 2016. Exact dates will be available from <a href="https://www.ICE-lab.org">www.ICE-lab.org</a>.

Two winners will be invited to present an oral communication as part of an Increasing Clinical Effectiveness symposium, which will be held at the IFCC-EFLM EuroMedLab Athens 2017 congress in June 2017.

IFCC will distribute further information about the 2016/17 ICE Award in due course. However, <u>now</u> is a good time for laboratory medicine specialists to consider if they have a project that could be submitted for the award.

## World Accreditation Day: 9 June 2016 Accreditation: supporting the delivery of health and social care

by Graham Beastall
IFCC Past-President



June 9, 2016 marks World Accreditation Day as a global initiative, jointly established by the International Accreditation Forum (IAF) and the International Laboratory Accreditation Cooperation (ILAC), to raise awareness of the importance of accreditation.

This year's theme focuses on how accreditation can support the delivery of health and social care.

As in previous years the day will be celebrated across the world with the hosting of major national events, seminars and media coverage, to communicate the value of accreditation.

Details of World Accreditation Day, including a useful eight page brochure that explains the importance of accreditation in health and social care may be downloaded from: <a href="http://ilac.org/media-centre/world-accreditation-day/">http://ilac.org/media-centre/world-accreditation-day/</a>.

IFCC has a Memorandum of Understanding with ILAC and so is happy to promote World Accreditation Day. IFCC has produced a joint webinar with ILAC entitled 'What is medical laboratory accreditation and why is it important?' The webinar is freely available from the IFCC e-Academy: <a href="http://eacademy.ifcc.org/topics/quality-management-and-accreditation/?ctype=1154&cid=1473">http://eacademy.ifcc.org/topics/quality-management-and-accreditation/?ctype=1154&cid=1473</a>.



## Committee on Education in the Use of Biomarkers in Diabetes (C-EUBD)

**by Garry John**C-EUBD Chair

The new Committee on Education in the Use of Biomarkers in Diabetes (C-EUBD) sits within the IFCC Education and Management Division (EMD). This committee has been developed to build on the headline successes of its predecessor, the Task Force on Implementation of HbA1c Standardization (TF-HbA1c). The founding members of this new committee were drawn from experts in the field of diabetes monitoring and are; Garry John (UK; Chair), Emma English (UK), Rajiv Erasmus (SA), David Sacks (US) and Cas Weykamp (NL). In addition there are six corresponding members all uniquely qualified to support the team and bringing a wealth of expertise to the group.

#### **Aims**

The aims of the new committee were drawn up to be intentionally all encompassing, and explore the educational needs of different countries with regard to all diabetes biomarkers and develop innovative and accessible educational support and materials. This will be achieved through collaboration with global experts from international partner organisations and academic teaching institutes that are recognised for contributions to diabetes research with the objective being to deliver high quality, audience targeted, tailored support. The committee members will work closely with other IFCC committees and task forces in both the scientific and educational divisions in order to avoid duplication of efforts and ensure connectivity of diabetes related topics across the IFCC.

## Joint IFCC, WHO and IDF questionnaire on glucose and HbA1c provision

This project had its inception within the TF-HbA1c and brought together key, global authorities on diabetes care. The questionnaire was designed to provide an overview of the availability of glucose and HbA1c testing around the world and highlight areas for support and improvement in terms of diabetes testing

provision. The preliminary findings were presented at the IDF World Congress and the full findings will be submitted for publication in Spring 2016. Analysis of the data from the questionnaire will provide strategic direction for the development of global educational programmes to support diabetes diagnostics provision.

## Development of international quality standards for HbA1c measurement

Published in *Clinical Chemistry* in 2015, these guidelines based on sigmametrics are the first to define flexible quality standards to meet the service provisions needs of different users (clinical laboratory, EQA providers and manufacturers) of HbA1c measurement. The new committee will monitor the implementation and impact of these guidelines globally and along with the IFCC Reference Laboratory Network, will support countries to develop national quality schemes.

#### IFCC Reference Laboratory Network for HbA1c

The new committee will retain (from TF-HbA1c) the responsibility of providing a clinical steer to the network of laboratories that provide global standardisation of HbA1c. Members of the committee will provide expert guidance to support the Laboratory Network in achieving clinical goals to complement the Networks relationship with C-TLM.

#### **Future projects**

The scope of the committee covers all biomarkers associated with diabetes, which are at varying stages of evolution. The committee will commission projects to explore these emerging biomarkers and advise on their clinical and analytical use. These projects will be underpinned by sound academic methods in order to produce high quality, evidence-based guidance.

## Corporate social responsibility: heart-saving awareness campaign for women (Campagna di informazione salva-cuore per le donne)

#### An Abbott initiative



Heart disease is the biggest killer of women. Heart disease causes 1 in 3 women's deaths each year: nearly one woman every minute...! Women can experience coronary heart disease differently from men: the symptoms, progress and outcome of cardiovascular disease may not be the same. Women do not perceive CVD as the greatest threat to their health. This underestimation of the problem has clinical, social and economic relevance. The wrong knowledge and awareness of CVD in women is the worst enemy of the woman herself. Today it is possible to implement educational and preventive strategies that can change the behavior of women towards heart disease.

With this project, Abbott supports and proposes an innovative campaign of Corporate Social Responsibility with a gender-related approach to CVD in women.

The campaign is proposed as an "open source project" open to scientific input, ideas and support of partners who decide to join. The campaign will be launched at a conference in Rome with the key messages being the impact of heart disease in women, a survey on the trends in women's awareness using the web (http://www.viviconilcuore.it) and a mobile "app", the urgency to create an action plan that would help reduce the toll of heart disease in Italian women and the launch of the national communication campaign

#### **Creating a Women's Heart Disease Culture:**

- 1. Increase the awareness of heart disease in women over 40
- 2. Increase the ability to recognize "gender symptoms" of a major cardiovascular event
- 3. Encourage women over 40 to assess their overall risk of heart disease, with a series of community action and a simple tool, and take action to lower it with their physician
- 4. Raise awareness about women's heart disease amongst stakeholders

The primary target audience will be women from 40-60 years and the secondary audience being healthcare providers, Institutions, Scientific community, Media, Patient associations and the general public

Visit http://www.viviconilcuore.it for more information.

#### **NEWS FROM REGIONAL FEDERATIONS AND MEMBER SOCIETIES**



#### IFCC Support for education in clinical chemistry in Malawi

by Elias Chipofya

Malawi Association of Medical Laboratory Scientists (MAMLS)

It is essential for universities to keep collections of textbooks and journal subscriptions up to date, to the appropriate university education standards.

Many university libraries may hold extensive collections of older textbooks, but have been unable to purchase sufficient new textbooks. Although university libraries in Malawi do subscribe to electronic journals

and textbooks there is a still a need for current editions of printed materials, owing to the difficulties of accessing computers, internet and interruptions to power supplies.

MAMLS expressed a wish for support from IFCC to help in contributing toward quality of medical laboratory sciences by donating appropriate clinical chem-

> istry textbooks which are urgently required and greatly appreciated by the staff and students in Malawi.

> IFCC was pleased to agree to this request through its Developing Quality Competence in Medical Laboratories (DQCML) programme.

> Clinical Chemistry (by William Marshall), seventh edition textbooks were donated to the College of Medicine of the University of Malawi. Copies of Tietz Fundamentals of Clinical Chemistry and Molecular Diagnostics, seventh edition by Carl A. Burtis and David E. Bruns were donated to three institutions: Malawi Adventist University, Malamulo Campus, Malawi College of Health Sciences and Mzuzu University.



**COLLEGE OF MEDICINE BLANTYRE:** Medical Laboratory Sciences department staff receiving Marshall textbook donation.

Left to right: Mrs. Pauline Katundu, MLS Department Lecturer; Humphries Malata current Head of MLS; Mr. Victor G.L Makwinja, MAMLS representative; Mr. Jones Kadewere, MAMLS representative; Mr. Elias Chipofya, IFCC National representative; Mr. Daniel L.Banda, MLS Lecturer last to the far right, Dr. Elizabeth Kampira, Chemistry Department Lecturer



## News from the Medical Technology and Laboratory Society (MTLS) of Jordan

by Lina Assaf

Medical Technology and Laboratory Society, Jordan

Jordan has quite an advanced health care system which can be considered to be one of the most modern health care infrastructures in the Middle East. The high quality standards vouched for by the numerous international and domestic accreditations many hospitals and laboratories have earned, ensure that patients get only the best. In fact, Jordan was a pioneer country in Medical Technology amongst its neighbors. It was in 1953 that the first private medical laboratory was founded; the pioneers worked hard until the profession evolved and became well established.

The link between health and education in Jordan is prevalent in the area of medical personnel. Jordan boasts a high number of Medical Technologists and Laboratory Scientists and this concentration has led to obvious improvements in the quality and availability of laboratory services and health care. In 1984 the first alumnae of the Medical Technology and Laboratory analysis graduated from Yarmouk University. Currently, there are around 10 Jordanian universities which have allocated a special program for this specialty, with around 1000 graduates yearly. The estimated number of medical technology and laboratory analysts in Jordan is estimated to be more than 20000 workers, including laboratory professionals, specialists, technologists, and assistant technicians. Statistics indicate that the Jordanian Ministry of Health (MOH) has issued about 9200 practicing licenses in the last ten years only.

Considering the growing interest and the substantial awareness of the importance of this profession, many laws and regulations specifically related to the medical laboratory profession were promulgated by the Hashemite Kingdom of Jordan Ministry of Health.

## Establishment of the Medical Technology and Laboratory Society

The Medical Technology and Laboratory Society was founded in June 2014 by the initiation of a group of

medical laboratory technologists who were looking to upgrade the profession and the laboratory workers.

MTLS has been registered at the Ministry of Social Development according to local regulations as the only professional body representing the workers in this profession under the jurisdiction of the MOH. The mission of MTLS is to continuously improve the scientific and technical aspects of the profession in Jordan; to enhance the knowledge and proficiency of laboratory workers; and to keep them up-to-date with the new advancements in laboratory sciences. In addition, MTLS aims to create a cooperative interaction between laboratory professionals and laboratory workers in order to share and transfer experiences.

Although MTLS membership is voluntary, number of members is increasing spectacularly; during its first 18 months since established, it reached more than 400 members from various government and private sectors. MTLS members consist of Medical Laboratory Technologists, Laboratory Managers and Directors, Medical Laboratory specialists and Professionals and Academics who are specialists in different fields of Medical Laboratory Sciences, all of whom are certified by MOH as medical laboratory technologists/technicians.

#### MTLS achievements and goals

MTLS has had at least 14 scientific and social activities since it was established. These activities have varied between seminars, scientific lectures, various workshops and training courses;

- Training course on Molecular Biology and its techniques
- Two workshops on Microbiology
- Two workshops on Haematology
- Several seminars and scientific lectures on quality management in the medical lab., laboratory safety, trends on hematology, introduction to the (AS-CPi) exam, and others.

One of the important achievements of MTLS is the set up of the committee that pursues the establishment of a national professional Syndicate for workers in the medical laboratory analysis profession in Jordan with obligatory membership.

MTLS has a short-term plan to start a number of projects that are beneficial to workers in the laboratory

technology profession and medical analysis to develop their technical and scientific skills by organizing specialized workshops and seminars on a regular basis. In addition, MTLS has started contractual agreements with competent organizations and institutes to provide and contribute to these workshops and seminars. MTLS is working on having the allocated au-

thorities approve the reliability of these courses and provide certificates that are recognized locally and internationally.

MTLS is also working on establishing a specialized health magazine dealing with the affairs of the profession and professionals; it will include scientific and social news and topics that stimulate the request of knowledge and development.

Strengthening social connections among MTLS members is one of its goals. This is achieved by opening the headquarters for members to meet and discuss various issues and exchange views and knowledge. MTLS headquarters is also the right place for helping recent graduates seeking onhand training and looking for job opportunities.



On chairs, from right to left: Dr. Manal Abu Taha, Dr. Reem Abu-Ihmaid, Dr. Lina Assaf Standing, from right to left: Dr. Khaled Abu-Khadra, Dr. Rana Ayob, Dr. Aziza Khaled, Dr. Husain Hijawi

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#### **News from the IFCC Website**

DiV — February-April 2016

Disfruten del contenido de esta edición preparado exclusivamente para ustedes. DIAGNÓSTICO IN VITRO presenta el cambio de Directivos de la Confederación Latinoamericana de Bioquímica Clínica COLABIOCLI como así también el Himno de la COLABIOCLI. Un artículo sobre El Microscopio y otras noticias interesantes completan la edicion.

Enjoy the contents of this issue prepared exclusively for you. DIAGNÓSTICO IN VITRO presents the change of directors of the Latin American Confederation of Clinical Biochemistry COLABIOCLI as well as the Hymn of COLABIOCLI. An article on El Microscopio and other interesting news complete the issue.

Read More





## Status of clinical laboratories in Nepal: past and present

by Ram Vinod Mahato

Nepalese Association for Clinical Chemistry (NACC)

#### **History of clinical laboratories in Nepal**



Ram Vinod Mahato

The history of health laboratory services in Nepal goes back to the 1960s. Since then the country has achieved several milestones starting from the establishment of National Public Health laboratory (NPHL) to provide for different levels of health laboratories both in government and private

sectors. As a result, significant development has been observed in health laboratory services. However, a question of harmonizing laboratory services in the country for quality remains crucial and challenging especially with the increasing number of private sector health laboratories.

#### Types of clinical laboratories

- 1. Public Health Laboratory:
  - i. National Public Health Laboratory
  - ii. Regional Public Health Laboratory
  - iii. District Public Health office Laboratory
- 2. Hospital-based laboratory
  - (a) Government Hospital-based laboratory
    - Central Hospital-based laboratory
    - ii. Regional Hospital-based laboratory
    - iii. Zonal and Sub-Regional Hospital- based laboratory
    - iv. District Hospital-based laboratory
    - v. Primary Health Care Centre laboratory
    - vi. Health Post laboratory

(b) Private Hospital-based laboratory

- i. General Hospital-based laboratory
- ii. Specialized Hospital-based laboratory
- iii. Medical college/Teaching Hospital-based laboratory
- 3. Stand-alone laboratory is an independent laboratory
- 4. Polyclinic-based Laboratory is a laboratory which is a part of polyclinic service.
- 5. Medical centre for foreign employment health service-based laboratory
- Referral laboratory is an external laboratory within the country to which a biological sample is submitted for a supplementary or confirmatory examination procedure (Reference: ISO 15189:2012), or for testing not performed in the originating laboratory.
- Collection Centers for External Reference Laboratory is a centre which collects the samples that are sent outside the country to external reference laboratories

#### **Group E laboratories**

These laboratories are based at Health Post level of the government setting and are peripheral in nature. In context of private laboratories, equivalent criteria as designated for government laboratories must be fulfilled.

E1: Health Post-based Laboratory.

F2: Standalone Lab

#### **Group D laboratories**

These laboratories are based at Primary Health Care Center (PHC) level of the government setting and are peripheral in nature. In context of private laboratories, equivalent criteria as designated for government laboratories must be fulfilled.

D1: Primary Health Care Centre-based Lab

D2: Standalone Lab

#### **Group C laboratories**

These laboratories are based at district hospital or equivalent level of the government setting. In context of private laboratories, equivalent criteria as designated for government laboratories must be fulfilled.

C1: District Level Hospital-based laboratory

C2: Standalone/Polyclinic-based laboratory

C3: Private general hospital-based laboratory up to

100 beds

#### **Group B laboratories:**

B1: Zonal and Sub-regional hospital-based

**B2: Standalone laboratory** 

B3: Private general hospital-based

B4: Specialized hospital based laboratory which provide specialized services. (Oncology, Cardiology, Nephrology, Endocrinology, etc.)

#### **Group A laboratories (super-specialized laboratories)**

A1: Central hospital-based and regional hospital-based Lab

A2: Standalone Lab

A3: Laboratories based in Private Hospitals and Med-

ical Colleges

A4: Reference Lab

A4a: Reference lab in the country

A4b: Reference lab in the country plus collection

centers for international reference lab

A5: Super-specialized lab in any one field of laborato-

ry medicine

A6: Research Laboratory



#### EFLM Task and Finish Group on "Total Error" (TFG-TE)

by Wytze Oosterhuis EFLM TFG-TE Chair

**Chair: Wytze Oosterhuis** (The Netherlands)

Members: Dave Armbruster – USA; Hassan
Bayat – Iran; Patrick Bossuyt - The Netherlands;
Abdurrahman Coskun – Turkey; Peter Deman - The
Netherlands; Ana-Paula Faria – Portugal; Kathleen
Freeman – UK; Per Hyltoft-Petersen – Denmark;
Anders Kallner – Sweden; Dave Koch – USA; Finlay
MacKenzie – UK; Gabriel Migliarino – Argentina;
Matthias Orth – Germany; Hanna Ritzen – Sweden;
Marit Sverresdotter Sylte – Norway; Johan
Surtihadi – USA; Elvar Theodorsson – Sweden; Sten
Westgard – USA.

The Task and Finish Group "Total Error" (TFG-TE) set up after the 1st EFLM Strategic Conference, has the following terms of reference: to come up with a proposal for how to use the total error concept and how to possibly combine performance specifications for

bias and imprecision. The foreseen deliverable is a paper dealing with the topic.

The members of the TFG-TE have had one meeting during the Paris EuroMed-Lab congress in June 2015.

There has been an extensive discussion on the subject within the TFG-TE during the last year; an article by W Oosterhuis and E Theodorsson (1) in reply to the criticism on the outcomes of the



Wytze Oosterhuis

EFLM Strategic Conference raised by J Westgard (2) has been recently published, thus extending thus the debate to the public domain. Other articles are under way (3,4). In fact, the conventional method to calculate the analytical performances based on biological variation needs to be revised since it shows important limits (5).

In order to reach a consensus within the TFG-TE on the document to be issued, a Delphi procedure has been started as a method to structure the discussion. A list of statements was sent to the TFG-TE participants. In December the comments were completed and a revision of the document has been sent to the TFG members for a second round of commenting.

In parallel, a small committee consisting of H Bayat, E Theodorsson and W Oosterhuis has started writing a first draft of the consensus document.

The work of the TFG-TE is related to very basic concepts of error and measurement uncertainty. These concepts are fundamental in all professions dealing with measurement. The discussion on these concepts is still ongoing, as is illustrated by the new (4th) edition of VIM (International Vocabulary of Metrology) that is planned to be issued in 2018. It is the task of

the TFG-TE to find a practical translation of these concepts in the field of clinical chemistry and laboratory medicine.

- 1. Oosterhuis WP, Theodorsson E. Total error vs. measurement uncertainty: revolution or evolution? Clin Chem Lab Med 2016;54:235–9.
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- Coskun A, Oosterhuis WP, Serteser M, Unsal I. Sigma metric or defects per million opportunities (DPMO): the performance of clinical laboratories should be evaluated by the Sigma metrics at decimal level with DPMOs. Clin Chem Lab Med. 2016. Doi: 10.1515/cclm-2015-1219.
- 5. Oosterhuis WP. Gross overestimation of total allowable error based on biological variation. Clin Chem 2011;57:1334-6.



## Focus on the activity of the EFLM Working Group on Cardiac Markers (WG-CM)

**by Päivi Laitinen** EFLM WG-CM, Chair

Chair: Päivi Laitinen - Finland

Members: Paul Collinson - UK; Marja P. van Dieijen-Visser - The Netherlands; Angelika Hammerer-Lercher – Switzerland; Christopher Duff – UK; Consultant: Kari Pulkki- Finland.

Consultant: Karl Pulkki- Finland.

Corresponding members: Hannsjörg Baum –
Germany; Michel Langlois – Belgium; Kristin Moberg
Aakre – Norway; Sanja Stankovic – Serbia; Ana
Stavljenic-Rukavena – Croatia.

Working Group on Cardiac Markers was established originally as a Project Group under the European Communities Confederation of Clinical Chemistry (EC4) Working Group Guidelines for Investigating Disease in

2005. The members of Project Group were nominated by National Societies from 7 different countries. The aim of the was to take a practical approach for the use of cardiac markers in different countries by organizing surveys on the use of cardiac markers and their decision limits, interpretation of results and the effect on the patient outcome.

A preliminary survey on the used and implementation of cardiac markers was performed in the spring of 2006 as a pilot study in eight European countries. The study was named CARdiac MArker Guideline Uptake in Europe (CARMAGUE) study. The results of the preliminary survey have been published in 2 articles (1, 2) as well as several posters presented during

EUROMEDLAB in Amsterdam and AACC meeting in 2007 and in the Nordic Congress of Clinical Chemistry in 2008.

The Forum of European Societies of Clinical Chemistry (FESCC) and EC4 merged forming the European Federation of Clinical Chemistry and Laboratory Medicine in 2007. After the merger, all activities were re-organized. Also the EC4 Project Group was re-established and EFLM Working Group was formed continuing the work of the previous WG. The members of WG remained the same, but new corresponding members joined the team. The task of the WG was to perform a survey on the use and implementation of cardiac markers in European countries. The second survey was performed in 2009 and 2010 with the aim to document the situation of the use and implementation of cardiac markers of acute coronary syndrome and heart failure in European countries (http://www.carmague.fi/2/). These results have also been published in two papers (3,4).

WG Cardiac Markers has performed a third survey to check if the use and implementation of cardiac markers have changed over the years. This survey was expanded to North America to see if there are any differences between Europe and US/Canada. The results will be published soon.

The terms of WG Cardiac Markers are coming to an end, according to the EFLM Statute. This WG has been very successful in its work, having published 4 papers thus far with numerous presentations in several congresses. The work has provided a lot of enjoyment and many of the WG members have been involved for over 10 years and everybody has actively participated in the work. Annual WG meetings have been intensive working days spiced with good food and excellent company.

WG members hope to continue the studies in some form in the future. We feel that there is a lot to do in educating laboratories in the use and implementation of cardiac markers and clinicians for laboratory testing.

The main issue to be solved is that laboratories do not collaborate closely enough with clinicians (and vice versa).

#### References

- 1. Collinson P, Pulkki K, Suvisaari J, et al. How well do laboratories follow guidelines on cardiac markers? The cardiac marker guideline uptake in Europe study. Clin Chem 2008;54:448-9.
- 2. Pulkki K, Suvisaari J, Collinson P, et al. A pilot survey of the use and implementation of cardiac markers in acute coronary syndrome and heart failure across Europe The CARdiac MArker Guideline Uptake in Europe (CARMAGUE) study. Clin Chem Lab Med 2009;47:227-34.
- Collinson P, van Dieijen-Visser MP, Pulkki K, et al. Evidence-Based Laboratory Medicine: How well do laboratories follow recommendations and guidelines? The CARdiac MArker Guideline Uptake in Europe (CARMAGUE) Study. Clin Chem 2012;58:305-6.
- 4. Hammerer-Lercher A, Collinson P, van Dieijen-Visser MP, et al. Do laboratories follow heart failure recommendations and guidelines and did we improve? The CARdiac MArker Guideline Uptake in Europe (CARMAGUE). Clin Chem Lab Med 2013;51:1301-6.



From left to right:
Kari Pulkki, Hannsjörg Baum, Päivi Laitinen, Paul Collinson

#### **EFLM Walter Guder Award**



#### Walter Guder Preanalytical Award

Presented by EFLM Sponsored by BD





The EFLM Walter Guder Preanalytical Science Award will be granted to a young scientist for significant contribution to the improvement of the preanalytical phase. EFLM is very pleased to have partnered with BD on this award, through which we intend to achieve wider recognition of the importance of high quality research in the field of the preanalytical phase among laboratory professionals in Europe.

#### **Eligibility criteria**

The applicant must fulfill the following criteria:

- → Age under 40 years
- Member of an EFLM member country
- Study accepted for peer-reviewed publication by the submission deadline in which the nominee must be the first author

#### **Award timing**

The EFLM Walter Guder Preanalytical Science Award is awarded biannually. This year, the award will be presented at the 4th Joint EFLM-UEMS Congress "Laboratory Medicine at the clinical interface" to be held in Warsaw (PL) from 21 to 24 September 2016.

#### **Award details**

The selected young scientist will receive an award of € 5000 and the costs for attending the 4th Joint EFLM-UEMS Congress (economy class travel, reasonable accommodation and the meeting registration fee).

#### **Submission details**

The applicants should send the reprint of their article or a copy of the editor's letter indicating final acceptance for publication to the EFLM office at *eflm@eflm.eu*. Articles must have been published or accepted for publication between 1 January 2015 and 30 April 2016.



Prof. Walter G. Guder

Entries must be published in English in a peer-reviewed scientific journal. Applicants should also send a statement signed by all authors of the publication consenting to submission of the paper for the Award and to the conditions of entry. Submissions will be judged by an independent panel of experts. The nominee must be the first author and a

member of an EFLM member society. The Award will be presented to the first author, who is responsible for division of the award among his/her co-authors.

Applications deadline: April 30, 2016

Winner will be notified: May 31, 2016

For further information on the submission process please contact the Chair of the EFLM WG-Preanalytical Phase, Prof. Ana-Maria Simundic, by e-mail at: am.simundic@gmail.com.

**Prof. Mauro Panteghini** EFLM President



#### **EFLM**

European Federation of Clinical Chemistry and Laboratory Medicine – EFLM goals are to promote and improve science and education within the field of clinical chemistry and laboratory medicine, to improve patient outcomes and the quality and safety of patient care through the highest standards of laboratory medicine. The mission of the EFLM is to create academic, clinical and industrial links of communication for clinical laboratory scientists and physicians through highly qualified professional meetings which

the EFLM may support in a variety of ways. For more information visit: www.eflm.eu.

#### **BD**

BD is a global medical technology company that is advancing the world of health by improving medical discovery, diagnostics and the delivery of care. BD leads in patient and health care worker safety and the technologies that enable medical research and clinical laboratories.

The company provides innovative solutions that help advance medical research and genomics, enhance the diagnosis of infectious disease and cancer, improve medication management, promote infection prevention, equip surgical and interventional procedures, optimize respiratory care and support the management of diabetes. The company partners with organizations around the world to address some of the most challenging global health issues. BD has more than 45,000 associates across 50 countries who work in close collaboration with customers and partners to help enhance outcomes, lower health care delivery costs, increase efficiencies, improve health care safety and expand access to health. For more information on BD, please visit:

#### www.bd.com.

BD, The Danby Building Edmund Halley Road, Oxford Science Park Oxford 0X4 4DQ



## EFLM Bursary programme to attend the EFLM-UEMS Congress in Warsaw!

EFLM is promoting a bursary programme for young scientists attending the 4<sup>th</sup> joint EFLM-UEMS Congress to be held on 21-24 September 2016 in Warsaw http://www.eflm-uems.warsaw2016.eu/.

The bursaries will cover the cost of the travel, 3-night accommodation and registration fee for a maximum of Eur 1000. EFLM Bursary recipients will also receive a free on-line yearly subscription to the journal CCLM kindly offered by Walter de Gruyter.

Eligible candidates must come from an EFLM Member Society and meet the following criteria:

Young participants (≤35 years old at the date of the conference); → Having a poster abstract accepted as First Author (deadline for abstract submission May 15, 2016).

Applications must be submitted through the proper application form (downloadable from <a href="http://eflm.eu/index.php/EFLM-bursaries.html">http://eflm.eu/index.php/EFLM-bursaries.html</a>) and accompanied by the following documentation:

- 1. Copy of the ID or passport;
- 2. Document proving the membership to the National Society;
- Notification of poster acceptance (acceptance/ rejection will be sent by the congress organizers within June 15, 2016).

Applications have to be sent to: silvia.cattaneo@eflm.eu by June 30, 2016.



#### EFLM e-seminar 2016 (April-June)

by Daniel Rajdl

Chair, EFLM Working Group on Distance Education and e-Learning

EFLM e-seminars are scheduled on a regular basis and are open to all members of National Societies around the world. The participation is free!

For those who are not able to join the e-seminar on the scheduled day or for those attendants who want to recall presented ideas, it is possible to see the recording of the seminar from the section "e-learning" of the EFLM website <a href="http://www.eflm.eu/index.php/e-learning.html">http://www.eflm.eu/index.php/e-learning.html</a>.

26 APRIL 2016 at h. 18:00 CET

**Title: Rational use of laboratory tests** 

Speaker: Gustav Kovac (SK)

At the beginning of 2015 the monography "Rational Ordering of Laboratory Parameters" in Slovak language has been issued. The monography with 185 pages from 4 editors and 18 authors represents an attempt to create a common denominator contributing to the consensus between clinicians, laboratorians and financiers of laboratory diagnostics.

The principal editor of the monography is Prof. Gustav Kovac, president of the Slovak Society of Laboratory Medicine and Chair of the Institute of Biochemistry, Clinical Chemistry and Laboratory Medicine at the Slovak Medical University in Bratislava (Slovakia). He s also the Chair of the EFLM Working Group "Congresses and Post Graduate Education".

His deep expertise in internal medicine, clinical chemistry and laboratory medicine allows him to give truly interdisciplinary view on the rational ordering of laboratory parameters.

10 MAY 2016 at h. 18:00 CET

Title: The estimate of measurement uncertainty

Speaker: Ilenia Infusino (IT)

The estimate of measurement uncertainty is important in Laboratory Medicine because it is required for reference measurement laboratories to obtain/maintain the accreditation according to ISO 17025:2003 and ISO 15195:2005 and for clinical laboratories to obtain the accreditation according to ISO 15189:2012.

There are two approaches to estimate measurement uncertainty, the so-called 'bottom-up' and 'top-down' approaches.

Infusino Ilenia, BSc, is specialized in Clinical Biochemistry and Clinical Molecular Biology. She works at the Clinical Pathology Unit of the "Luigi Sacco" University Hospital in Milan, and she is the Quality Manager of the Centre for Metrological Traceability in Laboratory Medicine (CIRME) of the University of Milan. She published 21 articles in peer-reviewed journals.

#### 07 JUNE 2016 at h. 16:00 CET

Title: Consensus guideline on "Non-fasting lipid profiles: implications for lipoprotein measurement and reporting"

Speaker: Michel Langlois (BE)

For further information and registration: http://www.eflm.eu/index.php/e-learning.html



#### **News from the IFCC Website**

#### **Task Force on Geriatric Laboratory Medicine (TF-GLM)**

IFCC is glad to announce the new Task Force on Geriatric Laboratory Medicine. The Task Force is chaired by Dr Balion (CA). The TF-GLM aims to improve knowledge and understanding of key changes in physiology and pathophysiology that occur in elderly subjects and the impact that these may have on laboratory medicine parameters.

Read more

## IFCC PoCT International Symposium

16 - 17 November 2015 Cancun, Mexico

#### IFCC PoCT International Symposium slides available

An IFCC International Symposium on PoCT was held in Cancun, Mexico in November 2015. Presentations from the symposium are now available for download in pdf format.

\*\*Read more\*\*



## An outline history of European representation in IFCC

by Ian D Watson

Chair, EFLM History Task and Finish Group

#### The Beginnings

#### **FESCC**

In the 1970's a number of clinical chemists from a number of countries were concerned about the comparability of the profession in Europe. From this initiative a Directive was developed. In 1987 at the World Congress in the Hague a meeting of the European society Presidents was convened by Gerard Sanders, the NVKC President, from this a vocational training programme was developed. It was clear that collaboration was beneficial and that a European regional organisation had relevance and benefit; a Steering Committee under Prof. Valdique was formed which consulted Euro-

pean societies in 1992. In 1993 FESCC (Forum of European Societies of Clinical Chemistry) was formed with Hermann Wisser as the first President and was recognised by IFCC with the support of the IFCC President Gerard Siest. FESCC focused its efforts on education, being particularly active in the Balkans.

#### Presidents:

1987 - 1990 Hermann Wisser [Germany]

1991 - 1993 Pierre Valdique [France]

1993 - 1996 Josep Queralto [Spain]

1996 - 1999 Vladimir Palicka [Czech Republic]

2000 - 2007 Victor Blaton [Belgium]

#### EC4

While efforts to form FESCC reflected a desire for representation of the geographical continent of Europe,



First recipients of EC4 Registration Certificates

those societies whose nations were members of the European Economic Community recognised that there were particular issues, specifically the ease of movement between member countries; there was an informal meeting around 1977-8 chaired by Ad Jansen [Netherlands] as there was a need for comparable competencies to be defined and communicated to decision makers; after a quiescent period EC4 (European Communities Confederation of Clinical Chemistry) was re-launched at Euromedlab in Nice in 1993. Along with developing a syllabus, the required training periods and attainments were identified, forming the basis for a voluntary register with the post-nominal of Eur Clin Chem the first certificates were awarded in 1998.

#### Presidents:

1996 - 1999 Gerard Sanders [Netherlands]

1999 - 2005 Rob Jansen [Netherlands]

2005 - 2007 Mike Hallworth [United Kingdom]

#### **Post-Merger**

#### **EFCC/EFLM**

With the expansion of the EU there was increasing commonality between FESCC and EC4 it was clear that a single organisation would suffice; the FESCC and EC4 Presidents worked to form the European Federation of Clinical Chemistry and Laboratory Medicine (EFCC) at the 2007 Euromedlab in Amsterdam; the acronym changed to EFLM when registered as a not-for-profit organisation in 2013. The EC4 Register continued as an autonomous entity linked to EFLM.

#### Presidents:

2007 - 2008 Victor Blaton [Belgium]

2008 - 2009 Mike Hallworth [United Kingdom]

2009 - 2011 Andrea (Rita) Horvath [Hungary]

2011 - 2013 Ian Watson [United Kingdom]

2013 - 2016 Mauro Panteghini [Italy]

#### More Information!

The EFLM History Task and Finish Group would value recollections from those who have been involved with EFLM's predecessor organisations.

We would particularly value any documentation and photographs. Please contact me, Ian Watson, by e-mail at: *iandwat@me.com* or by phone: +44-7889324549.

An expanded version of this poster is available on the EFLM web-site:

www.eflm.eu

#### **Acknowledgement**

My thanks to past and present officers of FESCC, EC4, EFCC and EFLM for their recollections, documentation and photographs that have provided the background information.



Bogdan Solnica and Janet McMurray with poster explaining the merger of EC4 and FESCC to form EFCC



General Assembly delegates



The first EFLM Executive Board (from left): M. Pazzagli, K. Pulkki, R. Horvath, M. Hallworth, H. van Pelt, V. Blaton



## e-News



Communications and Publications Division (CPD) of the IFCC

Editor: Tahir Pillay, MB ChB, PhD, FRCPath (Lon), FCPath (SA)

Department of Chemical Pathology - University of Pretoria - Pretoria - South Africa - e-mail: enews@ifcc.org

## 2016 AD Pricelist for the IFCC eNews

The IFCC eNews is delivered to more than 15,000 laboratory medicine specialists throughout the world and also published on the IFCC website. Circulation includes laboratory directors, clinical chemists, and other clinical laboratory specialists and technologists, as well as leading manufacturers, distributors and dealers in the field.

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## EFLM General Meeting Madrid, 21 March 2016

by Ana-Maria Simundic EFLM EB Secretary

This is to inform that at the recent EFLM General Meeting held in Madrid on 21 March 2016, Prof. Sverre Sandberg (Norway) was elected as new President of EFLM.

For the election of the position as EFLM Vice-President, the two candidates Prof. Michael Neumaier (Germany) and Prof. Damien Gruson (Belgium, France) received the following votes:

Prof. Michael Neumaier: 16 votes Prof. Damien Gruson: 15 votes

We are pleased to announce the new composition of the Executive Board, as outlined below.

#### **EFLM Executive Board**

- President: Prof. Sverre Sandberg (Norway)
- Past-President: Prof. Mauro Panteghini (Italy)
- Vice-President: Prof. Michael Neumaier (Germany)
- Secretary: Prof. Ana-Maria Simundic (Croatia)
- Treasurer: Dr. Huib Storm (The Netherlands)
- Member-at-Large: Prof. Grazyna Sypniewska (Poland)
- Member-at-Large: Prof. Tomas Zima (Czech Rep)

A debt of gratitude to the outgoing EFLM President, Prof. Mauro Panteghini, for his successful mandate and to the outgoing EFLM Past President, Prof. Ian Watson, who finished his term in the Executive Board.



Prof. Michael Neumaier



Prof. Ana-Maria Simundic



Sypniewska



Prof. Sverre Sandberg



Prof. Mauro Panteghini



Dr. Huib Storm



Prof. Tomas Zima



#### News from the Turkish Biochemical Society (TBS) İzmir Branch organizes the 1st IVD Symposium in Turkey

by Dogan Yucel President, Turkish Biochemical Society and by Ebru Sezer

Secretary of the IVD Symposium & TBS İzmir Branch

The 1<sup>st</sup> Turkish *in vitro* Diagnostic (IVD) Symposium was carried out in İzmir-TURKEY between 18-20 February 2016. The symposium was organized by cooperation of Turkish Biochemical Society, Izmir Branch and Dokuz Eylul University Health Sciences Institute. The organization was especially sensational and attracted intense interest from different professions, as this was the first meeting on IVD in Turkey and it provided a platform for some provocative and outstanding discussions on the issue for the first time with a multidisciplinary approach.

Assoc. Prof. Ebru Sezer, secretary of the symposium reported that 120 participants gathered for the chance to discuss with the diligently chosen speakers who were well-known professionals and experts in their fields. Academicians of the field, medical

laboratory supervisors, specialists and doctors of science, representatives of Ministry of Health as a local authority, Turkish Standards Institution as a conformity assessment body, representatives of world's leading manufacturer enterprises, representatives of worldwide known enterprises manufacturing in Turkey, scientists performing considerable research on health technology in the fields of engineering, students and representatives from some of the non-governmental organizations attended as lecturers and participants. After the opening speeches given by the Co-Presidents of the symposium Prof. Hilal Koçdor and Assoc. Prof. Zubeyde Erbayraktar, the Scope and Objectives of the meeting were presented by Prof. Diler Aslan, the Scientific President of the symposium.



Symposium attendees' group photo

One of the remarkable notions discussed was that University-Industry cooperation is not adequate and efficient. In todays Turkey industrialists should establish more and more Research and Development (R&D) Departments within their companies and it is essential to be collaborating more efficiently with the universities in order to benefit from the scientists.

It was underlined that although, generally, the developing ideas on the R&D stage and project productions are at a promising level within the product life cycle of IVD, and the public supports give a varied and adequate appearance in general, a revalidation after the prototype production process and some obstructions on stages of quality-risk management has been observed. The underlying causes of these are lack of knowledge, project management problems, and lack of support for production. Therefore, even though you keep up with the technology and generate innovative ideas, you are unable to perpetuate this and

turn them into production. The support and training of the legal authority is hereby needed.

At the end of the symposium a final report covering designations, limitations and suggestions was prepared for presentation to the national authorities and for sharing on the website of the symposium for the field of IVD.

All presentations, discussions, opinions and suggestions were taken into consideration on the platform of this essential and sufficient IVD symposium, for the purpose of creating a strategy and policy for a national IVD medical device research & development, production, quality standards and innovation in Turkey.

Another gratifying outcome of the symposium announced by Turkish Biochemical Society, İzmir Branch was that the financial profit gained from the symposium will be directed to young scientists as registration bursaries to encourage their participation to the 41st FEBS Congress 2016 which will be held in Kusadası/TURKEY.



#### **News from the IFCC Website**

## TF YS: A guide to conducting research in laboratory medicine

Download and read the IFCC e-publication "A guide to conducting research in laboratory medicine"! Drawing on the experience of respected scientists from leading healthcare organisations, the Guide provides Young Scientists with wealth of information on how to conduct research in laboratory medicine.

Read more



#### **KBUD, IFCC New Affiliate Member**

The IFCC is happy to announce its 11th affiliate member: the Society of Clinical Biochemistry Specialists (KBUD), from Turkey. The mission of KBUD is to promote the professional recognition of the clinical laboratory, to contribute to the training and scientific knowledge of members, and to contribute to continuous training of Turkish laboratory professionals with diverse organizations through seminars, conferences and national/international congresses.

Read more

#### IFCC'S CALENDAR OF CONGRESSES, CONFERENCES & EVENTS

## Calendar of IFCC Congresses/Conferences and Regional Federations' Congresses

and Regional Federations Congresses					
May 20, 2016	BIOMARKERS IN ALZHEIMER DISEASE IN ALZHEIMER DISEASE IN ALZHEIMER DISEASE IN ALZHEIMER DISEASE IN ALZHEIMER DISEASE IN ALZHEIMER DISEASE IN ALZHEIMER DISEASE	IFCC Roche Conference Biomarkers in Alzheimer Disease	Mexico City, MX		
Nov 26 - 29, 2016		14th Asia-Pacific Federation for Clinical Biochemistry and Laboratory Medicine Congress	Taipei, TW		
Jun 11 - 15, 2017	EUROMEDLAB ATHENS 2017	IFCC-EFLM EuroMedLab 2017	Athens, GR		
Sep 17 - 20, 2017		XXIII COLABIOCLI Congress 2017	Punta del Este, UY		
Oct 22 - 25, 2017	IJOC WARLES.	XXIII IFCC WorldLab 2017	Durban, ZA		
May 19 - 23, 2019	BARCELONA EUROMEDLAB 2019	IFCC-EFLM EuroMedLab 2019	Barcelona, ES		
May 24 - 28, 2020	IFCC 100-bonation Grapus of the distribution of the control of the distribution of the control o	XXIV IFCC WorldLab 2020 Seoul	Seoul, KR		

	Calendar of events with IFCC auspices	
Apr 12, 2016	POCT COURSE: Importance, diagnostic application and accreditation	Mexico City, MX
Apr 19 - 22, 2016	The 9th International and 14th National Congress on Quality Improvement in Clinical Laboratories	Teheran, IR
Apr 20 - 22, 2016	10th International Conference of Clinical Laboratory Automation (Cherry Blossom Symposium 2016)	Seoul, KR
May 12 - 14, 2016	XIII Baltic Congress of Laboratory Medicine	Tartu, EE
May 12 - 13, 2016	XIV Meeting of the SEQC Scientific Committee	Madrid, ES
May 18 - 21, 2016	1st Conference of Romanian Association of Laboratory Medicine(RALM)	Cluj Napoca, RO
May 18 - 20, 2016	Congreso Nacional de Residentes Bioquimicos	Buenos Aires, AR
May 25 - 27, 2016	XX Congress of Medical Biochemistry and Laboratory Medicine	Belgrade, SRB
May 26, 2016	12th EFLM Symposium for Balkan Region	Belgrade, SRB
Jun 11 - 12, 2016	APPI 3rd Annual Conference	Mumbai, IN
Jun 14 - 17, 2016	35th Nordic Congress of Clinical Chemistry 2016	Odense, DK
Jun 15 - 18, 2016	XXV European Congress of Perinatal Medicine	Maastricht, NL
Aug 11 - 13, 2016	9th Palestinian Conference of Laboratory Medicine	Ramallah, Palestine
Aug 25 - 27, 2016	58th National Conference of the Hungarian Society of Laboratory Medicine	Szeged, HU
Sept 21 - 24, 2016	4th Joint EFLM-UEMS Congress: "Laboratory Medicine at the Clinical Interface"	Warsaw, PL
Sept 21 - 24, 2016	26th International CPOCT Symposium: the Benefits and Challenges of Point-of-Care Testing across the Clinical Spectrum	Copenhagen, DK
Sept 29, 2016	SBPC/ML&IFCC Joint Symposium	Rio de Janeiro, BR
Oct 4 - 6, 2016	2nd SIPMeL National Congress	Montesilvano, IT
Oct 20 - 22, 2016	Joint Meeting of the "3rd Congress on Controversies in Thrombosis & Hemostasis" together with the "8th Russian Conference on Clinical Hemostasiology and Hemorheology"	Moscow, RU
Oct 27, 2016	International Conference on Laboratory Medicine "Towards performance specifications for the extra-analytical phases of laboratory testing"	Padova, IT
Nov 9 - 11, 2016	EFLM Course: "Developing medical tests that improve patient outcomes"	Leiden, NL
Oct 20 - 22, 2017	XIV International Congress of Paediatric Laboratory Medicine	Durban, ZA

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#### **Regional Federations**

Zimbabwe (ZW)

Arab Federation of Clinical Biology (AFCB) African Federation of Clinical Chemistry (AFCC)

Asia-Pacific Federation for Clinical Biochemistry and

Laboratory Medicine (APFCB)

European Federation of Clinical Chemistry and

Laboratory Medicine (EFLM)

Latin America Confederation of Clinical Biochemistry (COLABIOCLI)

North American Federation of Clinical Chemistry and Laboratory Medicine (NAFCC)



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#### **Affiliate Members**

Brazil: Sociedade Brasileira de Patologia Clínica / Medicina Laboratorial (SBPC/ML)

India: Association of Medical Biochemists of India (AMBI)

Iran: Iranian Association of Clinical Laboratory Doctors (IACLD)

Jordan: Society for Medical Technology & Laboratories (SMTL)

Mexico: Federación Nacional de Químicos Clínicos (CONAQUIC A.C.)

Nepal: Nepalese Association for Clinical Chemistry (NACC)

Palestine: Palestinian Medical Technology Association (PALMTA)

Philippines: Philippine Council for Quality Assurance in Clinical Laboratories (PCQACL)

Russia: Regional Association for Clinical Laboratory Diagnosis, St. Petersburg

Spain: Asociación Española de Farmacéuticos Analistas (AEFA)

Turkey: Society of Clinical Biochemistry Specialists (KBUD)

Ukraine: Association of Clinical Chemistry & Laboratory Medicine of Ukraine (ACCLMU)





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**Communications and Publications** Division (CPD) of the IFCC

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#### March-April Edition

submission deadline: March 24

#### **May-June Edition**

submission deadline: May 19

#### **July-August Edition**

• submission deadline: July 14

#### **September-October Edition**

• submission deadline: September 22

#### **November-December Edition**

• submission deadline: November 22

If you want to submit an article or advertisement to be published in the eNews, send it to:

Tahir Pillay, Editor, IFCC eNews E-mail: enews@ifcc.org

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