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EDITORIAL

By Tahir Pillay - IFCC eNews Editor



Dear Colleagues,

Welcome to this first newsletter of 2013 and also my inaugural newsletter as the new Editor to succeed Prof Edgard Delvin. It is a great honour for me to take over from Professor Delvin. I am based in South Africa where I have worked in the academic and service side of Chemical Pathology/Clinical Biochemistry primarily, with a small role in the private sector. I was previously Professor of Chemical Pathology at the University of Cape Town and the University of KwaZulu-Natal. I have just been appointed as Professor and Head of the Department of Chemical

Pathology at the University of Pretoria. The challenges faced by laboratory medicine in South Africa, be it at the level of teaching, training and service are by no means unique and are very likely to affect all countries and it has always been highly informative to engage with international colleagues at the various IFCC meetings to learn how different societies and members deal with these. I have previously been secretary of the national association, the South African Association for Clinical Biochemistry, where I was responsible for the local newsletter and have worked with the last two Presidents of the national association, Professors Rajiv Erasmus (current president) and Vanessa Steenkamp (now also president of the AFCC and IFCC Board member). I am also discipline Editor for the Journal of Clinical Pathology, part of the BMJ group based in London.

I would like to continue the tradition of a vibrant IFCC newsletter and trust that the contributions from member societies will continue to be prolific and enthusiastic. The newsletter needs continuous contributions from all members and suggestions to improve the newsletter will be most welcome. I plan to ensure that international representation of societies is maintained in the IFCC newsletter by regularly soliciting contributions from the national societies and also, in turn, ensuring that the activities of the IFCC are regularly communicated to the national societies via the newsletter.

We would like to have more letters to the Editor from readers, expressing constructive views, opinions and suggestions on IFCC business. Although this is part of the remit of the newsletter, contributions have not been forthcoming. I would therefore like you to encourage you to contribute and to stimulate intellectual debate on matters pertaining to the IFCC and its scientific disciplines. There is current discussion taking place on the format of the newsletter and there have been suggestions to use newer online publishing methodologies. These discussions will continue in Milan, at Euromedlab.

We will continue to have regular features on IFCC events, events of member societies and associations and reports on the outcome of the various IFCC funded initiatives across the world. In this issue, we feature the awardees of the IFCC Roche Travel Scholarships, reports from recipients of the IFCC Professional Scientific Exchange Programmes and news from members across the globe.

I look forward to receiving your communications and contributions and engaging with you at future meetings.

Thanking you in advance

Regards

Tahir Pillay

ACTIVITIES OF THE IFCC COMMITTEE ON REFERENCE SYSTEMS OF ENZYMES (C-RSE)

Dr Ferruccio Ceriotti - C-RSE Chair



The most relevant “term of reference” of the C-RSE is the development of enzyme reference measurement procedures. In the past years, under the chairmanship first of Lothar Siekmann and then of Gerhard Schumann, the reference measurement procedures developed by IFCC in the eighties at 30 °C for AST, ALT, gamma-GT, CK, LDH, alfa-amylase and ALP were revised to adapt them at the measurement temperature of 37 °C. Apart from the change in measurement temperature, a series of other modifications were performed with the aim of providing reference methods directly applicable to routine analytical systems without the need of any modification. The main scope of this operation was to allow the definition of an uninterrupted traceability chain from the highest metrological level (for enzymes

represented by the reference measurement procedure) to the results of the patients' samples. These reference measurement procedures constitute the basis, through the use of commutable calibration material, for the harmonization of the results in clinical enzymology. A second task of the committee is the collaboration with the Institute for Reference Materials and Measurements (IRMM) of the European Community for the assignment of target values to secondary reference materials (Certified Reference Materials – CRM-) through the coordination of a network of reference laboratories. Reference materials and reference laboratories represent the second and third constituent of the Reference Measurement System for the measurement of enzyme catalytic activities. Unfortunately not all the manufacturers still took advantage of this reference measurement system and the consequently the standardization of results in clinical enzymology is still highly insufficient.

Among the enzymes currently measured in clinical laboratories the only one not yet standardized is pancreatic lipase. Currently the activity of the Committee is mainly directed towards the definition of a reference measurement procedure for this enzyme. The situation of pancreatic lipase is somewhat different from the previous enzymes because no method was previously endorsed by IFCC as reference. Pancreatic lipase is a peculiar enzyme that exhibits its catalytic activity at the oil-water interface. The method previously proposed as reference (Tietz (1)) used a pH-stat procedure difficult to perform and a substrate which preparation is very difficult to standardize; so the Committee decided to work on photometric methods employing soluble substrates. Two method principles are currently under evaluation: one uses as substrate 1,2-dioleoylglycerol (DODG) a diglyceride from which, with the help of a monoglyceride lipase as auxiliary enzyme, pancreatic lipase liberates free glycerol that is quantified by a series of auxiliary enzymes through the measurement of NADPH absorbance. The second method uses as substrate 1,2-O-dilauryl-rac-glycero-3-glutaric acid resorufin (DGGR). The pancreatic lipase cleaves the glutaric acid resorufin ester that spontaneously releases resorufin that is read at 572 nm. Several multicenter experiments were performed to test the two methods, but unfortunately both present some weakness. In particular the specificity for pancreatic lipase and the reproducibility in the substrate preparation (and consequently the transferability among reference laboratories) are the most challenging aspects. The members of the Committee are working to try to solve these problems that seem more demanding than the initial (optimistic) evaluation.

COMMITTEE MEMBERS

- Robert Rej (USA)
- F. Javier Gella (Spain)
- Jaen-Mark Lessinger (France)
- Shigeru Ueda (Japan)

PUBLICATIONS

1. Tietz NW, Astles JR, Shuey DF. Lipase activity measured in serum by a continuous-monitoring pH-stat technique – an update. Clin Chem 1989;35:1688-93.

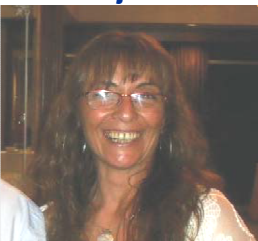
REPORTS FROM AWARDEES OF THE IFCC ROCHE TRAVEL SCHOLARSHIP



HIGHLIGHTS - The following quotes are taken from the reports received from the recipients of the awards

RECIPIENT

María Alejandra Arias



ASSOCIATION

Confederación Unificada Bioquímica de la República Argentina (CUBRA)

PERSONAL REFLECTION HIGHLIGHTS

"..opportunity to exchange views with different members of this family, always, taking me very positive contributions to my society, from the scientific to the institutional..."

Nairo M. Sumita



Brazilian Society of Clinical Pathology and Laboratory Medicine (SBPC/ML)

"The participation of the Brazilian Society of Clinical Pathology and Laboratory Medicine at the IFCC General Conference will assist in the development of the strategic planning based on the vision of the future presented and discussed during the conference. The event also provided an opportunity to learn about the activities undertaken by the IFCC and by the regional organizations".

Eduardo Aranda



Chilean Society of
Clinical Chemistry
(SCHQC)

"The highlights of these reports were to listen to the diverse experiences of IFCC Regional Federations. It was also very interesting to know the vision about clinical laboratories in the future from a professional perspective as well as from the diagnostic industry".

Mohamed Shaarawy



The Egyptian
Society of Clinical
Chemistry and
Clinical Laboratory
Sciences (ESCC)

"The exchange of Ideas and fruitful discussions between members attending IFCC General congress paved the way for creative ideas to all societies. I can't forget the birthday dinner and celebrations at the end of IFCC General Congress".

Gizachew Taddesse Akalu



Ethiopian Medical
Laboratory
Association (EMLA)

*"I was particularly interested on presentation topics like:
- Directions in Clinical Chemistry and Laboratory Medicine
- Strategic action plan and organogram of IFCC
- Influencing clinical outcomes
- The future of clinical chemistry and laboratory medicine
- Supporting laboratory medicine in the developing world
- Promoting evidence based practice
- Method standardisation and harmonization
and The IFCC Visiting Lecturer Programme. All these and others will impact upon the focus and activities of our National Society. With the ultimate objective of improving the health status of Ethiopians through the delivery of quality health care"*

Hera Yuliana Intantri



Indonesian
Association for
Clinical Chemistry
(HKKI)

"The conference was wonderful. I've got a lot of things from this conference, friends from other countries, opportunities to know about scientific field in each country, share experience about scientific action in every part of the world, to open our mind and know what we can do for our society".

Salwa Amarín



Jordan Society for
Medical Laboratory
Sciences (JSMLS)

"Being on the verge of presidency of a coming Jordanian Conference, to be held on the 23/03/2013, I found myself gaining new information which I added to my experience in my country, and will help and without doubt, in making my conference a success, as a result to this new information. Now, and after returning home, I try to deliver over this experience to the younger generations of scientists, and I have strong determination and with sincerity, to participate in as much of the future coming IFCC conferences, as possible".

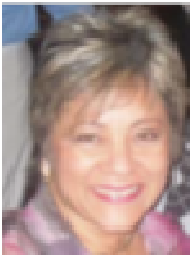
Adel Mastori



Lebanese Society of
Clinical Biology

"I learned a lot from this, bearing in mind that organizing successful and attractive scientific activities is an essential part of the work of any syndicate like ours. On the practical side, I greatly enjoyed the presentations made the first day by the President of IFCC and the chair persons of the different committees and working groups. That was very beneficial and quite inspiring. For once, I came to have a good idea about what exactly IFCC is about, its input, involvement and fields of interest. That was the opportunity to get closely acquainted with the vision, strategic planning and the action plans of such an esteemed organization".

Rosa I. Sierra-Amor



Asociación
Mexicana de
Bioquímica Clínica,
A.C. (AMBC)

"My particular interest in IFCC GC was to attend the workshops, which were very well organized, perhaps not too much time given, but at least we could meet the chairs and members of WG, Committees, Divisions and IFCC office ladies. The opportunity to explain our concerns about how IFCC is getting to the public, how to develop strong ties with health care and professional organizations, how to implement standardization programs such as the creatinine standardization program, that in the case of Mexico is going to be launched 2013. This activity will help Mexican laboratories to improve the quality of the service".

**Mohammed Touimi
Benjelloun**



Société Marocaine
de Chimie Clinique
(SMCC)

"I was very glad to be part of the IFCC general conference as a representative of the Moroccan society of clinical chemistry. All of the topics covered were of great significance in terms of quality, standardization of methods, and communication levels".

Binod Kumar Yadav



Nepal Association
for Medical
Laboratory Sciences
(NAMLS)

"It was really a great honour for me to establish Nepal flag among the different international flag in the IFCC community through the NAMLS. IFCC is providing the different opportunity to the medical laboratory professional of Nepal. This conferences provided the opportunity to discuss the new issues to the IFCC executive and committee chair and I got the opportunity to discuss the experiences of IFCC VLP program in Nepal last year and future plan of NAMLS in which I have proposed for the next IFCC VLP program on Laboratory management and laboratory accreditation in 2013. Most of the member were agreed and more probably we will be going to organize the next IFCC VLP workshop in Nepal next year and this is again one of the benefit of this general conference to NAMLS".

Mabel A. Charles-Davies



Association of
Clinical Chemists
Nigeria (ACCN)

"However, as the Nigerian Representative in the International Federation of Clinical Chemistry and Laboratory Medicine (IFCC), I decided to attend the interactive workshops on Management Issues that would be of benefit to my national society-The Association of Clinical Chemists of Nigeria (ACCN). These workshops - Supporting Laboratory Medicine in the Developing world, How can Members get more out of IFCC? and 'Labs are Vital' and other Public Relations were adequately handled. The interaction was good and we had good time asking and understanding issues that were vague. The lessons learnt would be used to improve the ACCN".

Adnan Mustafa Zubairi



Pakistan Society of
Chemical
Pathologists

"Major attraction was first hand interaction of my national society, Pakistan Society of Chemical Pathologists (PSCP), with the IFCC, the regional associations and all the national societies. This interaction was important to get the personal liaison with them, and meet the people which were only accessible on e-mails only".

Osama Najjar



PMTA President
(Palestine)

"The interactive workshops were great in its organization, presentation, and the discussed topics. These topics were an added quality to the General Conferences of the IFCC. In which it helped me to understand many items in the IFCC tasks and duties. One of them was "How can members get more out of IFCC", this workshop was so informative and very important".

Javier Barua Chamorro



Asociación de
Bioquímicos del
Paraguay (ABP)

"Perhaps most important was the opportunity to interact and share experiences and future projects with professionals from around the world in an atmosphere of camaraderie that allowed to make new friends. Paraguay is a developing country and as such, to achieve a level of excellence in health services, still must overcome many barriers".

Hemachandra Weerawarna



Association for
Clinical
Biochemistry, Sri
Lanka (ACBSL)

"My special attention was on the workshop 'Chronic kidney diseases – getting it right. The reason for selecting this topic was the present undiagnosed epidemic of Chronic Kidney disease prevailing in North Central Province of Sri Lanka of which the root cause has yet to be established. I also appreciate one of the ideas given during this session "Laboratories as the best vehicle for implementing a national program for the early detection of CKD" and to serve laboratories as the "hub" for information flow. While attending this work shop I conceived the idea of validating the e- GFR equation for Sri Lankan population".

Mohamad Kamel Kebbewar



Syrian Clinical Laboratory Association (SCLA)

"As to the things that I benefited from this meeting, here is a short summary:

- 1. The emphasis of laboratory management was an interesting topic that well presented, and this is an essential point that we needs to focus on in the coming year as part of the SCLA.*
- 2. The IFCC has programs that focus on advancing laboratories in developing countries. We would like to see a more mandatory programs that are encouraged in the developing countries".*

Laura Yametti



Asociación Bioquímica Uruguay (ABU)

"Attending to this event was an enriching experience that allowed me to get to know more in depth the objectives and functioning of the IFCC, as well as the regional experiences of member countries. this IFCC conference enabled me to get to know colleagues from around the world, their problems and concerns in the clinical laboratory area and allowed me to exchange opinions on the future approach to the solution of the presented problems. This event stood out for its nice environment and its interesting subject".

Pham Thien Ngoc



Vietnam Association of Clinical Biochemists (VACB)

"I learnt some good things from conference with position as a vice president and general secretary of VACB".

Hilary Lumano



Biomedical Society of Zambia (BSZ)

"As President of the Biomedical Society of Zambia (BMSZ) the opportunity allowed me to appreciate what other professional biomedical societies are doing in their respective countries and also in their respective regions. Having just been admitted as members of the IFCC attendance of the congress gave me further insight on what the organizations vision and mission are".

Hilda T. Marima-Matarira



Association of Clinical Biochemists in Zimbabwe (ACBZ)

"I was exposed to a high level of organizational skills of the IFCC and Laboratory Medicine Executive Board and Secretariat and the Malaysian Association of Clinical Biochemists; in the choice of accessible excellent venue, hospitality and efficiency of the conference management. This will be shared with the ACBZ".

IFCC PROFESSIONAL SCIENTIFIC EXCHANGE PROGRAMME (PSEP) REPORTS

PSEP AT DR. HUGO MENDIETA ZERÓN LABORATORY - CENTRO DE INVESTIGACIÓN EN CIENCIAS MÉDICAS CICMED, CENTRO DE INVESTIGACIÓN EN QUÍMICA SUSTENTABLE - UNIVERSIDAD AUTÓNOMA DEL ESTADO DE MÉXICO, UNIVERSIDAD NACIONAL AUTÓNOMA DE MÉXICO - TOLUCA- MÉXICO

*by Mr. Cristian Layton Bacteriologist - Colegio Mayor de Cundinamarca University
National of Bacteriology Colleague - Bogotá D.C, Colombia*

México- December, 2012

Dr. Graham BEASTALL

President International Federation of Clinical Chemistry and Laboratory Medicine (IFCC)

First of all I would like to express my deepest gratitude to the IFCC Professional Scientific Exchange Programme (PSEP) for having given me the opportunity to take part in this experience. I was very proud and excited when I received news that my application was accepted to attend in the programme in Research in Sustainable Chemistry Center (CIQS) of the National Autonomous of Mexico University (UNAM) and Autonomous of State of México University (UAEMEX).

It has been an important experience for my professional curriculum; I obtained answers to many long-standing questions in Clinical chemistry. I evaluated antimetabolic properties of the molecules obtained by organic synthesis in cell lines models and analyzed the intracellular signaling mechanism "*Advanced training in technical evaluation of molecules with antimetabolic properties obtained by organic synthesis in cell culture models*". It also offered me the possibility to meet colleagues from many countries and to discuss with them different subjects in Clinical chemistry and share our respective experiences in research.

The CIQS of the UNAM and CICMED of the UAEMEX are institutions engaged in the various processes that require interaction across sectors and sustainable set of institutions involved in the development of drug treatments, insurance, scientific and research potential in Latin America and continue the development of methodologies and organic molecules that represent a solution to the current problems of resistance and decrease in the effectiveness of conventional treatments.

The results of this project are going to contribute to the research of and to establishing measures in Public Health. The IFCC support has certainly been essential in the acquisition of new knowledge and learning.

Best regards,

Cristian Layton

Bacteriologist- Colegio Mayor de Cundinamarca University
National of Bacteriology Colleague
Bogotá D.C, Colombia

Complementary activities: Congress and Conferences

10th International Congress on Adolescent Health, University of the State of Mexico, SIEA, CICMED, Deusto University, National Institute of Psychiatry and School of Behavioral Sciences, Toluca, Mexico, November 5,6 and 7, 2012

1st Symposium Student and Clinical Laboratory Professionals Mexico State, University of the State of Mexico, Professionals Association of Clinical Laboratory of the State of Mexico, AC and the National Federation of Clinical Chemists, CONAQUIC, AC, Toluca, Mexico, November 11, 2012.

2nd Contest of Biochemistry Research, State Autonomous University of Mexico, School of Medicine, Toluca, Mexico, November 16, 2012.

Keynote - Cellular Reprogramming: induced pluripotent stem cells (iPS) Introducing LXI work with current issues in the clinical laboratory, Professionals Association of Clinical Laboratory of the State of Mexico, Mexico, October 25, 2012

Support activities carried out under the project:

“SOCS-3, JAK-2/STAT3, leptin and adiponectin detection in breast cancer”

Activities of search and literature review;

Reviewing inserts for determination of leptin and adiponectin through kits: "Human Adiponectin ELISA" and "96 Test ELISA Human Leptin" commercial household Genway blood sample project attached to breast cancer.

Laboratory of Human Genetics, Faculty of Medicine UAEM, Maternal Perinatal Hospital Pretelini Monica, Deputy Secretary of Health, Breast Cancer, CICMED Molecular Biology Laboratory, Department of Pathology (HMPMP).

Activities carried out between September and December 2012 in the Laboratory of Molecular Biology Research Center of Medical Science and Research Centre in Sustainable Chemistry, development of advanced research projects, in which I have been supporting and receiving training Technical skills and methodological: Blood sampling, Information management, patient reception and treatment, Transport and storage of biopsy samples, Cell culture and in suspension by explants, genotyping of human papillomavirus, Spectrophotometric Quantification of Nano- and Standard-Volume Samples, Real time PCR

Acknowledgements

Dr. Graham Beastall

President, International Federation of Clinical Chemistry and Laboratory Medicine (IFCC)

Dr. Hugo Mendieta Zerón

Medical Research Center (CICMED), Autonomous University of the State of Mexico (UAEMex); Materno Perinatal Hospital “Monica Pretelini” (HMPMP); Asociación Científica Latina (ASCILA) and Ciprés Grupo Médico (CGM) Toluca, Mexico.

Dr. Erik Cuevas Yañez

Sustainable Chemistry Research Center (CIQS) Autonomous University of the State of Mexico (UAEMex), National Autonomous University of México (UNAM).



PSEP AT PROFESSOR ANDREW MCKIE - IRON METABOLISM RESEARCH GROUP - KING'S COLLEGE, LONDON, UNITED KINGDOM

by Dr. Victor Manolov

Central Clinical Laboratory at Medical University "Alexandrovska" Hospital in Sofia, Bulgaria

I am working at Medical University's Hospital in Sofia. I am preparing my PhD work in the field of iron metabolism regulation and disorders. As a part of this I had a chance to visit the Iron Metabolism Group at the King's College London – to learn from the source of knowledge.

The scientific team I worked with are co-discoverers of iron membrane transporters ferroportin and duodenal cytochrome B. Ferroportin is inhibited by hepcidin, which binds to ferroportin and internalizes it within the cell. This results in the retention of iron within cells, and a reduction in iron levels within the plasma. This is especially significant in enterocytes which are shed at the end of their lifespan. The extra iron retained within them is not only prevented from entering the bloodstream but ends up being excreted into the faeces. Hepcidin is thus the "master regulator" of human iron metabolism. This is part of the mechanism that causes anaemia of chronic disease; hepcidin is released from the liver in response to inflammatory cytokines, namely interleukin-6, which results in an increased hepcidin concentration and a consequent decrease in plasma iron levels. Dcytb has been identified as the mammalian transplasma ferric reductase that catalyzes the reduction of ferric to ferrous iron in the process of iron absorption. Its mRNA and protein levels are up-regulated by several independent stimulators of iron absorption. Furthermore, its cDNA encodes putative binding sites for heme and ascorbic acid. Using Northern and Western blots, RT-PCR and confocal microscopy the expression and localisation of Dcytb in cell lines and tissues of CD1 mice was studied. Dcytb expression and function were modulated by iron. Dcytb and DMT1, both predominantly localised in the apical region of the duodenum were up-regulated in iron deficiency. Dcytb, the iron regulated ferric reductase may also utilize cytoplasmic ascorbate as electron donor for transmembrane reduction of iron. Dcytb expression was found in other tissues apart from the duodenum and its regulation and functions at these other sites are of interest in iron metabolism.

My reception at the Iron Metabolism Group at King's College London was warm and the support provided by Prof. Andrew McKie and Dr. G.O. Latunde-Dada enabled me to feel at home quickly. In spite of their daily work with students and postgraduates they shared with me their experience from department of Diabetes and Nutritional Sciences. During PSEP programme visiting the Iron Metabolism Group at King's College London and with reference to the project topic I used new and highly specific techniques such as extraction of RNA and protein, synthesis of cDNA. Protein quantification, ferric-reductase assay, nanodrop techniques and densitometric evaluation of results were used for characterization of K 562 cells. In order to complete the study I was taught to perform PCR, qPCR and Western Blot analyses; techniques which I will be able to use in my future work at Medical University in Sofia, Bulgaria, which is a part of my PhD work.

Mrs. Ester Lee, with Prof. McKie's support, arranged a visit to Kings College Hospital laboratory, where Dr. Sherwood showed me their new integrated system and shared his experience managing 450 staff.

Acknowledgement

I am grateful and indebted to IFCC for approving and supporting my application, especially to the Current President Dr. Graham Beastall. I want to thank to Mrs. Colli-Lanzi for her help through my IFCC communication. I extend my heartfelt gratitude to Prof. Andrew McKie and Dr. G.O. Latunde-Dada for hosting me and allowing me to access the Iron Metabolism Group knowledge and for also planning my project. I am also grateful to Mrs. Ester Lee for her help in making me feel at home in London. Also, thanks to Mrs. Vicky Clark from Kings College Hospital WEC reception for her support during my London visit. Thanks to Dr. Joe Varghese and Dr. Neeta Patel from Prof. McKie's group for their

assistance throughout my visit and laboratory work. I also acknowledge Dr. Roy Sherwood from Kings College Hospital Laboratory and Dr. Sukhi Bansal for their time and shared work experiences. Finally, I would like to thank Prof. Kamen Tzatchev and Bisera Atanasova from Medical University “Alexandrovska” Hospital, Sofia, Bulgaria for their support.

I would be glad to have another chance to visit Kings College London to continue my scientific project, as part of Prof. McKie’s Iron Metabolism Group.



Dr. G O Latunde-Dada & Dr. V. Manolov



Dr. V. Manolov at the King's College



Dr V. Manolov and Dr Joe Varghese

PSEP AT DEPARTMENT OF CLINICAL CHEMISTRY, GENT UNIVERSITY (BELGIUM)

By A.Sadiki KISHABONGO

***Catholic University of Bukavu, Department of Laboratory Medicine, DR Congo
santoinnes@yahoo.fr***

AFFORDABLE DIABETES DIAGNOSIS IN CENTRAL AFRICA

Being awarded the IFCC Professional Scientific Exchange Program scholarship, I had the opportunity to visit the Department of Clinical Chemistry, Gent University for three months, from 21 September to 21 December 2012. The main purpose of my visit was focussed on affordable diabetes diagnosis in developing countries. Diabetes is a major health and socioeconomic challenges in sub Saharan Africa. The prevalence of the disease is increasing in Africa owing principally to ageing and urbanization of population. The projected prevalence growth for sub-Saharan Africa is 98%, from 12.1 million in 2010 to 23.9 million in 2030. Our project was aimed at developing affordable diagnosis of diabetes based on the serum fructosamine assay and assaying glycated keratin in finger nails. In Central Africa, diagnosis is still limited to blood level glucose measurements because of the poverty of population and precariousness of the healthcare system. The reduced cost, simplicity and the lesser preanalytical requirements are major advantages and may give hope in diabetic populations from developing countries, particularly in DR Congo. Furthermore, as in Africa, since haemoglobinopathy disorders account for more than 70% of total haemoglobinopathies in the world, this method presents an advantage of not being affected by haemoglobin abnormalities.

In spite of the development of manual methods of diagnosis, diabetes was our main purpose-, I have learnt more about automated methods based on fructosamine assay and glycated hemoglobin A1C, which permitted us to make a comparison on practicability and the cost of these methods in developing

countries. I received theoretical and practical training about the process of glycation and deglycation which would explain some pathologic situations.

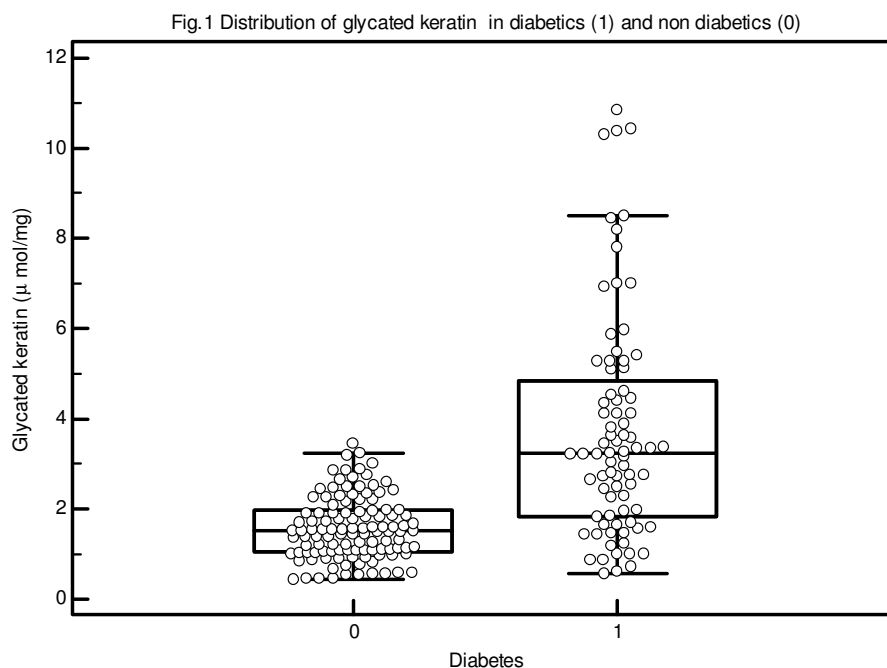
I also had the opportunity to participate in the “African platform congress” organized by Gent University (Dec 7, 2012), in which I presented a poster of our research and also the results explaining diabetes mellitus as the correlation of ferroportin Q248JH mutation in Bantu population and iron overload bio-availability in South Kivu (DR Congo). There was a moment to exchange experiences with other researchers from developing countries.

I am grateful to the International Federation of Clinical Chemistry and Laboratory Medicine for the financial support during my stay. Professor J. Delanghe, chief of Clinical Chemistry laboratory, has spent more useful time with us in the laboratory. I thank him so much for his personal contributions to my formation (photo 3). It is a pleasure to thank the staff of clinical chemistry laboratory for his kindness and technical support which facilitated my integration into this laboratory.

RESULTS

Initially, we developed an affordable method based on fructosamine determination in serum. This assay has included 236 diabetic and non diabetic patients from DR Congo. Fructosamine in the serum reacted well with NBT reagent forming a Schiff base, which was read spectrophotometrically at 530nm. Subsequently, commercial fructosamine assay was transferred to an automated analyzer. The correlation between the two methods ranged around 0,906 ($P < 0,001$). No significant analytical interferences due to uric acid and triglycerides were observed.

Secondly, our research focused on exploring the diagnostic possibilities of determination of glycated keratins in finger nails: 215 samples of clipped nails (99 diabetics, 116 non diabetic controls) .In Africa, there is an important threshold vs. preservation of blood. Therefore, analysing glycated keratins in nails could offer a psychologically more acceptable alternative for diagnosing diabetes. Glycated keratin reacted with NBT reagent. Results were expressed as μmol of glycated keratin / mg of nails. A t student test showed discrimination between diabetics and non diabetics (fig1). The receiver operating characteristic (ROC) curve revealed a specificity of 93% and a sensitivity of 65% ,with an area under curve of 0.801.



Because of their simplicity and the reduced cost, both methods may contribute to improvement of diabetes monitoring in developing countries.

CONCLUSION

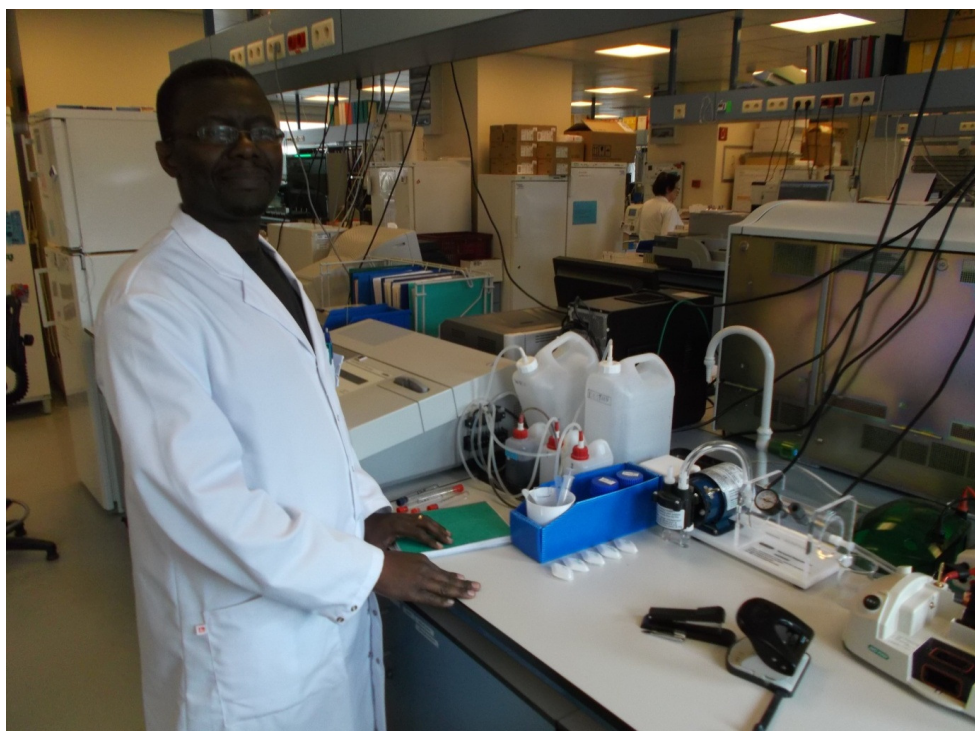
The visit to the laboratory of clinical chemistry of Gent University was beneficial not only for us but for African populations because the development of the methods of diagnosis diabetes mellitus will be applied in African countries. Fructosamine assay in serum will be implemented in the near future in the clinical chemistry lab at the Bukavu university hospital (South Kivu, DRC) as the equipment has recently become available. Implementing the new assays will contribute to better diabetes detection and treatment.



Professor J. Delanghe discussing with A. Sadiki in laboratory of Clinical Chemistry, Gent University Hospital



A. Sadiki working in laboratory of Clinical Chemistry, Gent University Hospital



A. Sadiki in Laboratory of Clinical Chemistry, Gent University Hospital

NEWS FROM REGIONAL FEDERATIONS AND MEMBER SOCIETIES

NEWS FROM SERBIA

Contributed by Snežana Jovičić

*Institute of Medical Biochemistry Clinical Centre of Serbia, Belgrade,
and Member of the IFCC eNews Working Group*

NEW OFFICERS APPOINTED IN THE SOCIETY OF MEDICAL BIOCHEMISTS OF SERBIA



Snežana Jovičić

The Executive Board of the Society of Medical Biochemists of Serbia (SMBS) on the meeting held 12 April 2012 appointed new officers for Society Board and Representations.

Prof. Dr Nada Majkić-Singh is appointed for National Representative and dr Zorica Šimarac for President of the Society of the Medical Biochemists of Serbia. According to the Statute of the SMBS, the Assembly of the Society is constituted of actual membership in the current year. Society is managed by the Executive Board whose work is controlled by the Supervising Board. Members of the newly elected Executive Board are Zorica Šumarac – President of SMBS, Nada Majkić-Singh - Past President, Tatjana Vodnik – Secretary General, Snežana Jovičić – treasurer, Svetlana Ignjatović – member, Jelena Ošap – member, and Velibor Canić – member. Three members constitute the Supervising Board, whose mandate is limited to only one term during which they cannot be members of other Committees of the SMBS. President of the Supervising Board is Emina Čolak.

Within the SMBS operate fifteen Committees with five to nine members. These are the Scientific Committee (which acts also as the Committee for Congress Activities); Committee for Publishing Activities; Committee for „Magistra Milica Marković“ Foundation; Committee for Laboratory Standardization; Committee for Laboratory Practice Organization; Committee for Medical Laboratory Accreditation; Committee for External Quality Control; Committee for Professional Engagement of Young Biochemists; Committee for IT Activities; Committee for Cooperation with IFCC, EFLM, BCLF and Related National Organizations; Committee for Cooperation with Industry; Ethical Committee; Awards Committee; and Committee for History of Medical Biochemistry.

Center for Continuous Medical Education of the SMBS works on developing and organizing courses of continuous medical education. It has the Program Council, constituted of Presidents of all the Committees of the SMBS, and the President of the Council is the Executive Director of the SMBS.

The terms of the new officers started 1 October 2012. We all hope that their work will be as successful as their predecessors'.



**Prof. dr Nada Majkić-Singh,
National Representative**



Dr Zorica Šumarac, President

SOCIETY OF MEDICAL BIOCHEMISTS OF SERBIA THE FIFTEENTH ANNUAL IVAN BERKEŠ CONFERENCE

Scientific Conference dedicated to the life of and work of the esteemed prof. dr Ivan Berkeš, one of the founders of medical biochemistry in Yugoslavia, is organized every year under the auspices of the Society of Medical Biochemists of Serbia (SMBS), Scientific Foundation „Professor Ivan Berkeš“, Institute for Medical Biochemistry of the Clinical Center of Serbia, and Institute for Medical Biochemistry of the Military Medical Academy. The Conference is the occasion when the best graduate students of the Faculty of Pharmacy, University of Belgrade are awarded by the Scientific Foundation „Professor Ivan Berkeš“.

The 2012 Annual Scientific Conference „Professor Ivan Berkeš“ was held on December 4th at Military Medical Academy in Belgrade. After the traditional welcoming address of colonel Prof. dr Marijan Novaković, Head of Military Medical Academy, and Prof. dr Zorica Vujić, Dean of Faculty of Pharmacy, the chair of the event, prof. dr Nada Majkić-Singh, together with the President of the SMBS, dr Zorica Šumarac, presented awards of the Foundation. This year's recipients were Marija Todosijević, Master of Pharmacy, and Mladen Stankov, Master of Pharmacy-Medical Biochemist. During the scientific part of the program, traditionally, this year's defended doctoral thesis at the Faculty of Pharmacy and Faculty of Medicine of the Universities of Belgrade and Niš were presented.

The opening lecture entitled „Enzymes: small machines in our life“ was presented by Prof. dr N. Nuray Ulusu from Ankara, Turkey. The four doctorates were presented by dr Zorica Šumarac (Faculty of Pharmacy, University of Belgrade), dr Radmila Obrenović (Faculty of Pharmacy, University of Belgrade), dr Sanja Stanković (Faculty of Pharmacy, University of Belgrade) and dr Zorica Dimitrijević (Faculty of Medicine, University of Niš), while dr Emina Čolak (Faculty of Pharmacy, University of Belgrade) presented her subspecialist thesis. The conference was closed with the promotion of the book „Clinical Enzymology“ by Prof. dr Nada Majkić-Singh.



Awarded best students from Faculty of Pharmacy with members of the Scientific Foundation "Ivan Berkeš". From left to right: Z. Šumarac, S. Ignjatović, N. Majkić-Singh, M. Stankov, M. Todosijević

NEWS FROM INDIA

Dr. Rajiv R Sinha, Secretary, ACBI

ACTIVITIES OF THE ASSOCIATION OF CLINICAL BIOCHEMISTS OF INDIA IN 2012

The year started with the newly elected office bearers elected at the General Body meeting of the Association of Clinical Biochemists of India held in Mumbai on December 5, 2011, taking up their office. The office bearers elected were :

President	Dr. Neelima Singh Professor & Head, Department of Biochemistry, G. R. Medical College, Gwalior, Madhya Pradesh - India.
Advisor	Dr. K. P. Sinha
Vice President	Dr. Abhay Pratap, Bokaro, Jharkand Dr. Jayashree Bhattacharya, New Delhi
Immediate Past President	Dr. Sucheta Dandekar, Mumbai, Maharashtra
General Secretary	Dr. Rajiv R. Sinha Associate Professor, Department of Biochemistry Nalanda Medical College - Patna-800001. Bihar. India
Joint secretary	Dr. Monika Gupta, Jaipur, Rajasthan Dr Sanjeev Singh, Gwalior, M.P.
Treasurer	Dr. K. R. Prasad, Patna, Bihar
Editor, IJCB	Dr. Praveen Sharma, Jodhpur, Rajasthan

REGIONAL MEETINGS:

During this year nine scientific activities were organized by State / Regional chapters of ACBI in different parts of the country.

- The Delhi State branch & Department of Biochemistry, Sir Ganga Ram Hospital, New Delhi organized a symposium on 21st. January 2012 titled :Opening New Horizon in Clinical Biochemistry” with Prof. L.M. Srivastav & Dr Anjali Manocha being the lead persons for the symposia.
- Dr.Shyamali Pal and Dr.Jayanta Dey, under the aegis of The West Bengal State Chapter organized a one day CME on 12th February,2011 in Kolkata on “Quality Assessment as per ISO 15189” . Dr. P. D. Sawant, Lead Assessor NABL and CAP Inspector was the Guest speaker of this CME.
- Department of Biochemistry, Kasturba Medical College, Mangalore, Karnataka in association with the local chapter of ACBI conducted a CME on “Glycomics” on October 8th 2011 at KMC, Mangalore. Over 150 delegates from different Medical Colleges in Karnataka attended the CME. The CME was followed by ACBI Mangalore chapter meeting where Dr. Poornima Manjrekar was elected President of the Mangalore Chapter.
- A CME on “Current Trends in Laboratory Practices” was conducted by the Department of Biochemistry, MGM Medical College, Navi Mumbai on 25th. November 2011 under the auspices of ACBI Maharashtra state chapter. Around 110 delegates from all over Maharashtra had registered for the programme. Dr. Padma Chavan was the organizing Secretary.
- The Department of Biochemistry & Immunology of Kokilaben Dhirubhai Ambani Hospital & Medical Research Institute, Mumbai in collaboration with the Association of Clinical Biochemists of India, Maharashtra Branch, hosted the ‘Total Quality Management Seminar’ on January 7, 2012. The Department of Biochemistry & Immunology of Kokilaben Dhirubhai Ambani Hospital & Medical Research Institute, Mumbai in collaboration with the Association of Clinical Biochemists of India, Maharashtra Branch, hosted the ‘Total Quality Management Seminar’, which was an attempt in reviving quality awareness. The event took place in the convention centre of Kokilaben Hospital on January 7, 2012. Dr. Barnali Das, organizing secretary of this seminar, started the scientific session by outlining the background and motivation behind this event. The technical programme included 7 presentations by distinguished national & international speakers from Quality Council of India (QCI), College of American Pathologists (CAP), NABH and NABL. Dr. Girdhar J Gyani, Secretary General, QCI & CEO, NABH elaborated the role of accreditation in improving patient safety and quality of care in his keynote address. Dr. Bharati Jhaveri, CAP Governor, delivered her keynote address on CAP accreditation overview. Dr. Ronald B Lepoff, CAP inspector, spoke about physical space & safety requirements from the view point of accreditation. Ms. Adrienne Malta, CAP inspector, detailed the methods for fulfilling CAP’s competency assessment requirements.
- A Seminar-cum-Workshop was organized by the Association of Clinical Biochemists of India (Kerala Chapter) on 29th of July 2012, at Hotel Casino, Trissur. The function was Presided by Dr T Vijayakumar, Former Dean and Director at School of Health Sciences, University of Calicut and was formally inaugurated by Dr D.M. Vasudevan, Former Dean of Amrita Institute of Medical Sciences and and Past President of ACBI. A special session on was a Hands on training and Workshop on “Equipment Calibration in Laboratory” by M/s Medical Engineering & Services, Trissur.
- A half a day CME-III meeting was conducted by **DR. R. Arivazhagan**, Associate Prof. & Head of the Clinical Bio Chemistry Dept., Cancer Institute, Adayar, Chennai, Tamil Nadu on **15th September 2012**.
- Haryana Chapter of the ACBI organized a Conference & CME under the guidance of Dr. Harbans Lal, Sr. Prof & Head, Department of Biochemistry, Maharaja Agrasen Medical College Agroha (Hisar), on 29th Sept 2012. Thirty-seven research papers were presented in the poster session. Five papers were given best paper awards.

39TH ANNUAL NATIONAL CONFERENCE OF ACBI (ACBICON 2012)

The year 2012 ended with the 39th Annual National conference of the Association, ACBICON 2012, at Ranchi, the capital of the lush green state of Jharkhand, which was successfully conducted during December 11 to 14, 2011 at Rajendra Institute of Medical Sciences and Khel Gaon Sports Complex, Ranchi with Dr. Abhay Pratap as Organizing Secretary. The conference was attended by about 650 delegates from India and abroad. Two Pre-conference CME's were held on 11th December on "New approaches to Medical Education in Biochemistry" & "Implementation of good laboratory practice". In the post-lunch session, the IFCC Task Force for Young Scientist held its session with the theme of "Clinical Chemistry to Clinical laboratory science". It was addressed amongst others, by Dr. Bernard Gouget, representing the IFCC on the panel. The main scientific session started on 12th. December 2012 with Revered Swami Sarvalokanandaji Maharaj, Ramakrishna Mission Hospital Kolkata, giving his blessings for the success of the conference and exhorting biochemists to do their best for the upliftment of society. This was followed by a plenary lecture on "Risk management beyond patient safety" which was delivered by Dr Endang Hoyaranda, Secretary, APFCB. The K. L. Gupta Memorial Oration was delivered by Dr. Raghunadharao, Professor of Medical Oncology at Nizam's Institute of Medical Sciences, Hyderabad, This was followed by the Taranath Memorial Popular lecture series Oration which was delivered by Dr. T. Venkatesh, Professor emeritus, St. Johns Medical College, Bangalore.



Inaugural Ceremony : Lighting the lamp

The Inaugural function was held in the evening and was inaugurated by Dr. Tulsi Mahato, Director, Rajendra Institute of Medical Sciences, Ranchi. During the inaugural function, ACBI-A.J. Thakur award, K.P.Sinha-P.S.Krishnan Award and Fellowship of ACBI were conferred. Also, Dr. Abhay Pratap was installed as the new President of the Association of Clinical Biochemists of India. The inaugural function also saw the felicitation of Dr. P. S. Murthy, Past president of the association and also former editor of Indian Journal of Clinical Biochemistry, for his immense contribution to the ACBI. This was followed by a beautiful cultural programme showcasing the different dance forms of Jharkhand, especially Chhau Dance.



CHhau Dance Form : during Inaugural Function

Scientific programme of the conference comprised of 6 oration lectures, 3 Industrial workshops, 46 symposia on various aspects of clinical biochemistry and laboratory medicine, 12 invited lectures, award paper presentation sessions, free paper sessions and a special session on "Lunch with Experts".

Dr. M. V. Kodliwadmath, Professor & Head,, Department of Biochemistry, Navodaya Medical College, Raichur, Karnataka, delivered the Dr. T. N. Pattabiraman Oration. Dr. Suman Bala Sharma, Professor of Biochemistry University College of Medical Sciences & GTB Hospital, Delhi delivered the Seth G.S. Medical College & KEM Hospital Oration. Dr. Nibhriti Das, Professor, Department of Biochemistry, All India Institute of Medical Sciences, New Delhi delivered the Mrs. & Dr. G. P. Talwar Oration.



Dr T Venkatesh delivering Taranath Oration

Four Industrial workshops were held during the conference. The first was held on 12th December which was sponsored by Johnson & Johnson-OCD Division where Dr. P. D. Sawant spoke on “Lean Labs”. The second workshop, which was sponsored by Nicholas Piramal, was on the topic of “Monitoring of Acute & Chronic Kidney dysfunction with Cystatin C, was delivered by Dr. Hektor. Dr. Barnali Das, of Kokilaben Dhirubahi Ambani Hospital, Mumbai delivered talk on “Essentials in prenatal Screening” which was sponsored by Roche. The “Lunch with Experts” session was quite successfully conducted by Dr. A. S. Kanagasabapathy with Dr. Endang Hoyaranda, Dr Bernard Gouget as experts. The symposia were held on various topics namely cardiovascular system related disorders, Free Radicals & anti-oxidants, Diabetes, Endocrine & Hematologic disorders, Instrumentation in Lab practices & Animal experiments, Maladies of Reproductive system & Topics associated with pregnancy and Functional Disorders and as many as 46 invited speakers of eminence in their respective fields delivered lectures in these symposia. Eight young scientists were awarded with different ACBI Best Paper awards & Travel Award.



Valedictory Function

The AFMC Quiz was a hotly contested event with Dr. Rajni Dawar of Lady Harding Medical College, New Delhi walking away with the First prize trophy & cash of Rs. 10,000/- . 14th December saw the curtain coming down on the 4 days of academic feast with the valedictory function where all the award winners were felicitated and delegates congratulated Dr Abhay Pratap and his team for organizing a great conference.

AWARDS:

1. Sri A. J. Thakur Distinguished Clinical Biochemist Award for the 2012 was given to Dr, R. Selvakumar, Professor & Head, Department of Clinical Biochemistry, Christian Medical College, vellore, Tamil Nadu
2. Fellowship of ACBI (FACBI) was awarded to Dr. Shyamali Pal from Kolkata.
3. Awadhesh Saran Memorial Oration Award was bestowed on Professor H. R. Nagendra, Vice-Chancellor, Yoga University, Bangalore
4. K. L. Gupta Memorial Oration Award was bestowed on Dr. D. Raghunadharao, Professor of Medical Oncology, Nizam's Institute of Medical Sciences, Hyderabad.
5. Seth G.S. Medical College & KEM Hospital Oration Award was bestowed on Dr. Suman Bala Sharma, Professor of Biochemistry University College of Medical Sciences & GTB Hospital, Delhi.

6. Mrs. & Dr. G. P. Talwar Oration Award was bestowed on Dr. Nibhriti Das, Professor, Department of Biochemistry, All India Institute of Medical Sciences, New Delhi
7. Dr. T. N. Pattabiraman Oration Award was bestowed on Dr. M. V. Kodliwadmth, Professor & Head,, Department of Biochemistry, Navodaya Medical College, Raichur, Karnataka
8. Taranath Memorial Popular Lecture Oration Award was bestowed on Dr. Thuppil Venkatesh, Emeritus Professor, Department of Biochemistry & Biophysics, National Referral Centre for Lead poisoning in India, St. John's National Academy of Health Sciences, Bangalore & Principal Advisor, Quality Council of India.

The next Annual conference of Association of Clinical Biochemists of India will be held at New Delhi (India) in November-December 2013 with Dr. Jayashree Bhattacharya, Principal, Vardhaman Medical College & Safdarjung Hospital, New Delhi as the Organizing secretary. More news will appear on website : www.acbindia.org.



Plenary Lecture – Dr Endang Hayoranda, Indonesia



Swami ji addressing the delegates

NEWS FROM THE AFCC

Prof Vanessa Steenkamp, President of the AFCC

In the two months since the General Conference in Malaysia the AFCC has already travelled some way down the long road. In December the president of the AFCC, Prof Vanessa Steenkamp attended the First international conference of the African Society for Laboratory Medicine. She co-convoked the symposium entitled “International collaboration with ASLM to strengthen laboratory medicine” with the CEO of ASLM, Dr Tsehaynesh Messele. The aim of the session was for attendants to appreciate the synergistic outcomes of effective global laboratory partnerships and to understand the vital role of international collaboration to strengthen laboratory medicine.



The CEO of ASLM, Dr Tsehaynesh Messele and Prof Vanessa Steenkamp, President of the AFCC

Prof Shaarawy, President of the Egyptian Society for Clinical Chemistry and representative of Egypt to the AFCC also participated in this session.

Prof Steenkamp delivered a talk entitled “Joining hands to improve laboratory medicine”. In order to achieve this she suggested:

- Addressing health priorities specific to the continent/country
- Improving quality of results
- Improving health outcomes
- Greater coherence on the continent (globally)

Furthermore, she mentioned that if these “goals” were to be realised the following were required: engagement in partnerships, a strategic plan with joint action, strengthening health systems with knowledge, science, technology as well as governance and leadership, dissemination of knowledge, to promote and monitor the implementation of standards and to provide technical support and build capacity.



Three more countries were welcomed to the AFCC family: Botswana, Egypt and Ethiopia. Both Egypt and Ethiopia have formal Clinical chemistry societies which are known as the Egyptian Society of Clinical Chemistry (represented by Prof Shaarawy) and the Ethiopian Medical Laboratory Association (represented by Prof Akalu), respectively. Currently Botswana, represented by Prof Ishmael Kasvosve, does not have any official society. We would like to congratulate Rwanda and especially Dr Pierrot Tugirimana on the successful formation of The Rwanda Society of Pathologists, earlier this year.

The website of the AFCC was launched at the end of January (www.afccafrica.org). The AFCC will be holding its 3rd congress in Cape Town, South Africa 28- 31 July, in conjunction with the Laboratory Medicine Congress (www.lmcongress.com). The abstract deadline has been extended to the 28 February 2013. The congress will be preceded by a Laboratory Management workshop as well as a hands-on 5 day Molecular Biology training course. Both courses are supported by the IFCC.



**6TH INTERNATIONAL CONFERENCE ON QUALITY SECOND EXPERTS MEETING FROM LATIN AMERICA
MEXICO CITY, JUNE 27-29, 2012**

By Rosa I. SIERRA-AMOR, Corresponding Member IFCC News.



To give continuity to the first expert meeting that took place in 2010 in Cancun, Mexico, the 6th International Conference on Quality hosted a three days Round Table discussions meeting with scientists from Argentina, Brazil, Colombia, Spain and Mexico chairing the sessions. Topics on Quality Control, Microbiology, Diabetes, Serology and Blood Transfusion were discussed extensively, allowing participants to listen to the expert's presentation and summary of a full day of activities on one day conference a day after that was transmitted by internet based connection along the region. In this occasion, 120 selected participants were invited to join the Round Table discussions as national experts and based on their field of expertise. The venue was the Tlatelolco University Centre, former Foreign Relations Building located in the northern part of Mexico City, in Mexico.

The welcome message was given by Octavio Zendejas, director BIO RAD Latin America; he encouraged participants to attend these kinds of scientific activities that in Latin America are emerging as the main source of continuing education. Immediately after and by Skype video conference from Glasgow, England, Prof. Graham Beastall, President of IFCC, gave a very charming and eloquent speech in Spanish to welcome the attendees located at the 38 sites all along Latin America. Prof Beastall congratulated the organizers, and was very pleased to see that topics on traceability, microbiology and blood transfusion were discussed. He congratulated the organizers for their vision

and commitment – with special thanks for the support of Bio-rad: “This is a topic and a model of delivery that deserves wider recognition and use”. And to finalize, Dr Rosa I. SIERRA-AMOR, the academic coordinator of the scientific activity thanked the invited speakers and attendees for making the 6th International Conference on Quality the IFCC activity of the year in Latin America.

Venues were located from north to south in Mexico, and in Argentina (Buenos Aires and Cordoba), Colombia (Bogota and Medellin), Chile, Ecuador (Quito and Guayaquil), Panama, Peru, Paraguay, Uruguay, Venezuela (Caracas, Táchira and Puerto Ordaz) and Dominican Republic. These three days of conferences, hold a total number of attendees from day to day, exceeding the organizers’ expectations of 2500 that divided by day, 1386 attendees were on day 1; 862 on day 2; and 1125 on day 3 respectively.

The first four Round Table discussions on Quality Control were on Traceability and Uncertainty in the clinical laboratory chaired by Prof. Javier GELLA from the University Autonomous of Barcelona, Spain; Tools to evaluate the analytical performance in the clinical laboratory by Dr Gustavo MACALLINI, from Laboratorio Hidalgo, Buenos Aires, Argentina; Validation and verification of measurements systems, by Dr Eduardo BRAMBILA, from the Benemerita Autonomous University of Puebla, Mexico; and Options to define metrological requirements in blood chemistry, by Prof. Xavier FUENTES-ARDERIU from University Hospital of Bellvitge, Barcelona, Spain.



Prof. Javier GELLA and participants of Round Table 1: Traceability and Uncertainty in the Clinical Laboratory

On day two, dedicated to Microbiology and Diabetes, the Round Table discussion were divided as follows: Identification of fungal opportunists on immunocompromised patients, by Jesus RESENDIZ, MS, from the Federico Gomez Children’s Hospital, México; Significance of nosocomial bacterial disease by Dr Alethse de la TORRE, from the National Institute of Nutrition and Medical Sciences SZ, Mexico; HbA1c standardization presented by Dr Aida PORRAS from Quik Bogota, Colombia, and Diagnostic tools on hemoglobinopathies by Dr Bertha IBARRA, from the Genetic Division, IMSS West National Medical Centre in Guadalajara, Mexico. A plenary conference was given by Dr Guillermo RUIZ-ARGUELLES, from Ruiz Clinic in Puebla, Mexico, who spoke about the Mytes and Realities of the Hemoglobinopathies in México.

During the third day of conferences, the morning sessions were chaired by Dr Amadeo SAEZ-ALQUEZAR from Brazil National EQAS Program on Serology discussing the topic on Internal and External Quality Control in Serology; and, Dr Jaime VASQUEZ, from the IMSS Blood Transfusion Unit in Coahuila, Mexico who discussed the topic on Blood safety in Serology. The afternoon topics were on fetal awareness and Rh variants presented by Ana-Claudia PERON from BIO RAD Brazil; and Dr Amadeo CORTES-BUELVAS, from the Blood Bank Unit at the Del Valle University Hospital in Cali, Colombia who also discussed the importance of serotyping in donors.

All Round Table discussions were presented as video conference live from Mexico City to all sites a day after, and with the help and sponsorship of BIO RAD distributors who organized locally their activities.

To conclude, Dr Hugo Baez Medina, Marketing director, BIO RAD Latin-American thanked all sites and participants, technical staff and Round Table discussions assistants for making the 6th International Conference on Quality a very successful event. Bio-Rad Latin America is a facilitating instrument of continuous education in quality, both in the clinical laboratory and now in transfusion medicine, and in other related topics such as Microbiology, and Diabetes.



Organizers and Speakers of the 6th International Conference on Quality: Hugo BAEZ (MX), Amadeo SAEZ (BR), Xavier FUENTES-ARDERIU(ES), Rosa SIERRA-AMOR (MX), Ana Claudia PERON (BR).

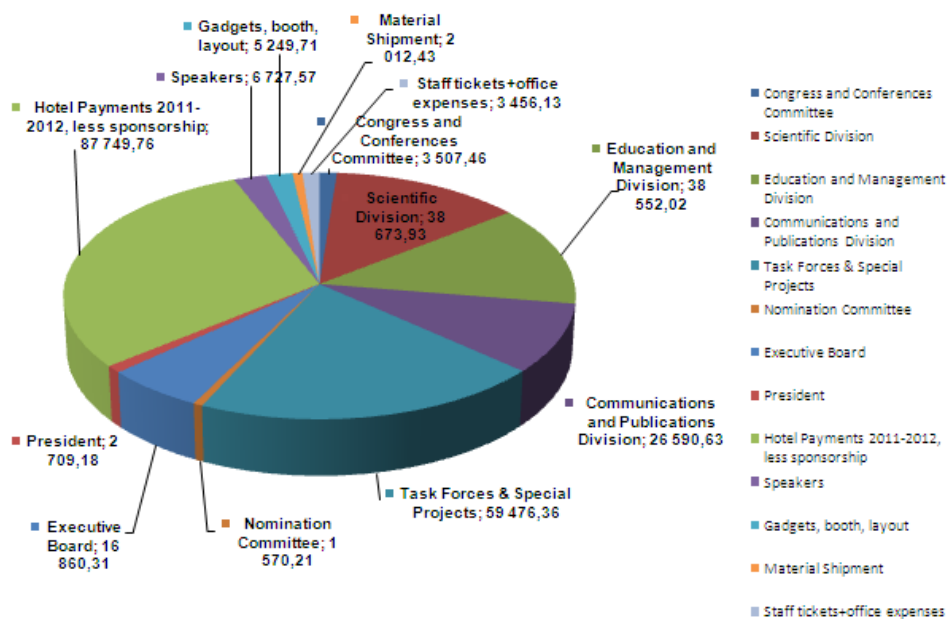
SUMMARY OF TREASURER'S REPORT

Contributed by Bernard Gouget, IFCC-Treasurer

Once again our warmest thanks to the previous treasurer, Ghassan Shannan (2006-2011), for his excellent services to the IFCC from 2006 to 2011.

In 2012, no revenue was expected from the IFCC congresses. The General Conference in Kuala Lumpur was the number one expense, excluding the fixed expenses.

Figure 1: General Conference grand total: CHF 293 135, 70



General Conference event budget - grand total	
Congress and Conferences Committee	3 507,46
Scientific Division	38 673,93
Education and Management Division	38 552,02
Communications and Publications Division	26 590,63
Task Forces & Special Projects	59 476,36
Nomination Committee	1 570,21
Executive Board	16 860,31
President	2 709,18
Hotel Payments 2011-2012, less sponsorship	87 749,76
Speakers	6 727,57
Gadgets, booth, layout	5 249,71
Material Shipment	2 012,43
Staff tickets+office expenses	3 456,13
	293 135,70

The estimated budget for 2012 showed a significant imbalance between total expenses (CHF1,739,409.00) and total income (CHF633,200.00), with a net loss of CHF1,106,209.00. Despite this, the actual cash flow amount in Credit Suisse, completed by the revenue generated by 2011 Worldlab / EuroMedlab, helped cover all expenditure. At the end of 2012, a loss of CHF 307.936 was lower than expected. Medium-term budget balance remains fragile; this first tax year was an opportunity for the in-depth analysis of the cash flow as well as scenarios for the optimization of the IFCC's finances.

Figure 2 shows the percentage of the total income of IFCC end of 2012 (CHF 838.654). We must thank the 86 full members for their regular payment of the annual fees, while we regret the suspension of 2 members due to non-payment of membership subscriptions for a period of three years.

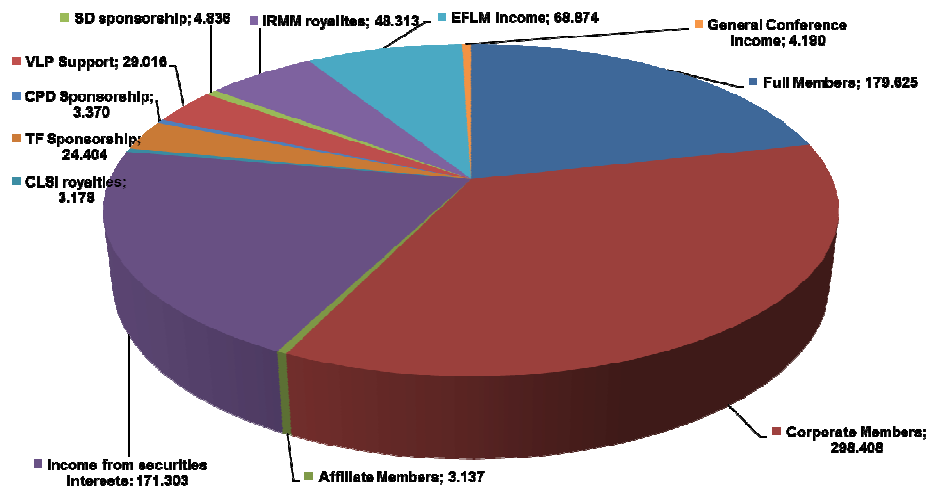
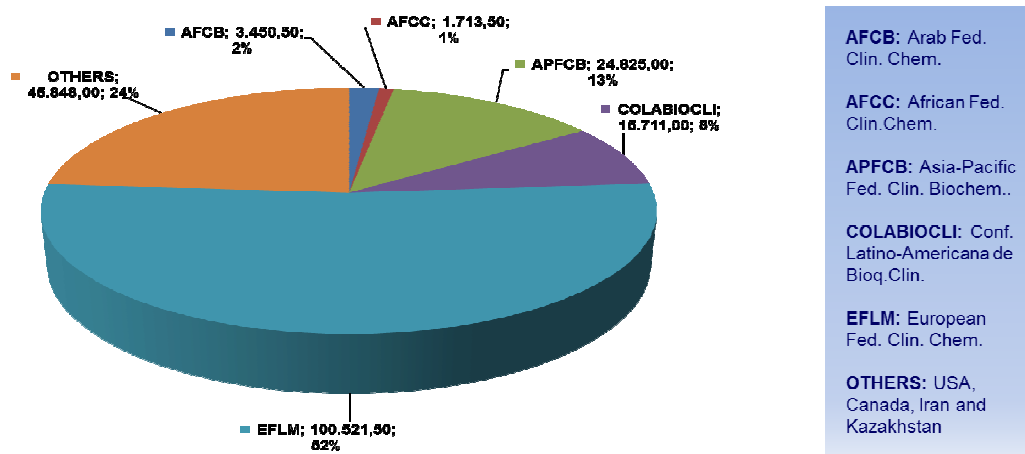


Figure 2: Total income by categories (CHF 838.654) at the end of 2012

Figure 3 reflects full member dues by region for a total amount of CHF 192.000. The decision to create 4 fee categories, in accordance with the World bank's criteria based on gross national income per capita, has proven to be judicious and effective (figure 4) and should encourage emerging countries as well as new scientific societies to join the IFCC.



AFCB: Arab Fed. Clin. Chem.

AFCC: African Fed. Clin. Chem.

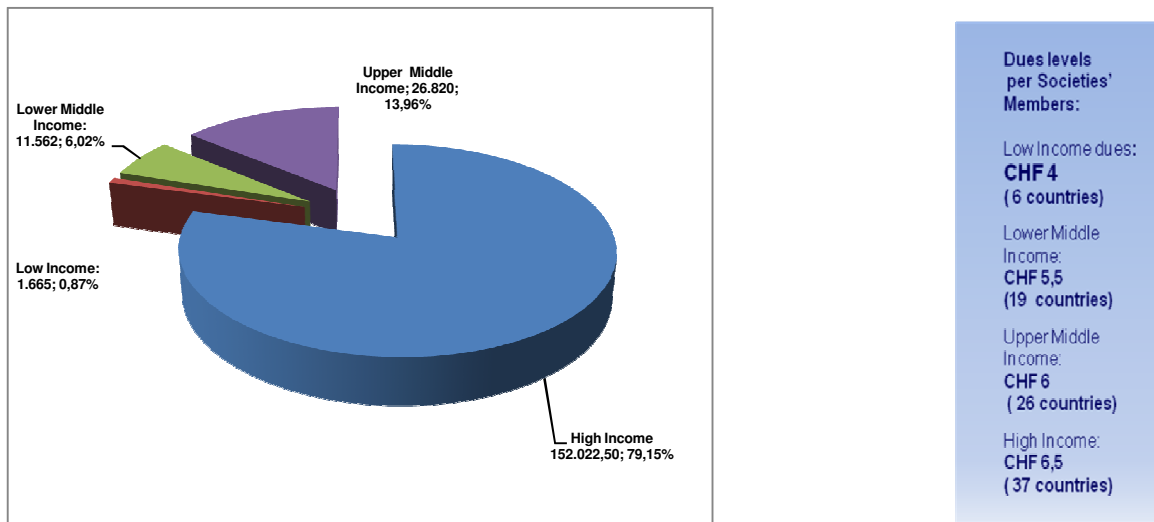
APFCB: Asia-Pacific Fed. Clin. Biochem..

COLABIOCLI: Conf. Latino-Americana de Bioq. Clin.

EFLM: European Fed. Clin. Chem.

OTHERS: USA, Canada, Iran and Kazakhstan

Figure 3: Full Members dues by regions, total 2012 dues: CHF 192.000



Dues levels per Societies' Members:

Low Income dues: **CHF 4** (6 countries)

Lower Middle Income: **CHF 5,5** (19 countries)

Upper Middle Income: **CHF 6** (26 countries)

High Income: **CHF 6,5** (37 countries)

Figure 4: Full Members dues by fees levels, total 2012 dues: CHF 192.000

To help the regions with their activities, the IFCC provides subsidies of up to CHF10, 000, except for the EFLM who receives additional dividends from Euromedlab's revenue. These subsidies should be modified via new contractual relations such as the signing of a Memorandum of Understanding between the IFCC and the Presidents of the IFCC regions as part of a win-win strategy.

Affiliate members contribute up to CHF3,600; this participation should increase with the new membership arrangements.

Figure 5 provides an overview of the expenditure by functional unit (CHF 1.146.637). the breakdown of which is largely stable. Our warmest thanks go to the Chairs of Divisions, committees and WGs who keep a vigilant eye on expenditure and were able to use their modern communication means to limit travel expenses and improve their work efficiency via the Internet. The 2013 budget was built after interactive discussion with the chairs of the IFCC divisions, it was asked to decide the annual budget for

their C and WGs in a realistic approach to have a 2013 total balanced IFCC budget. Thank again for their approval.

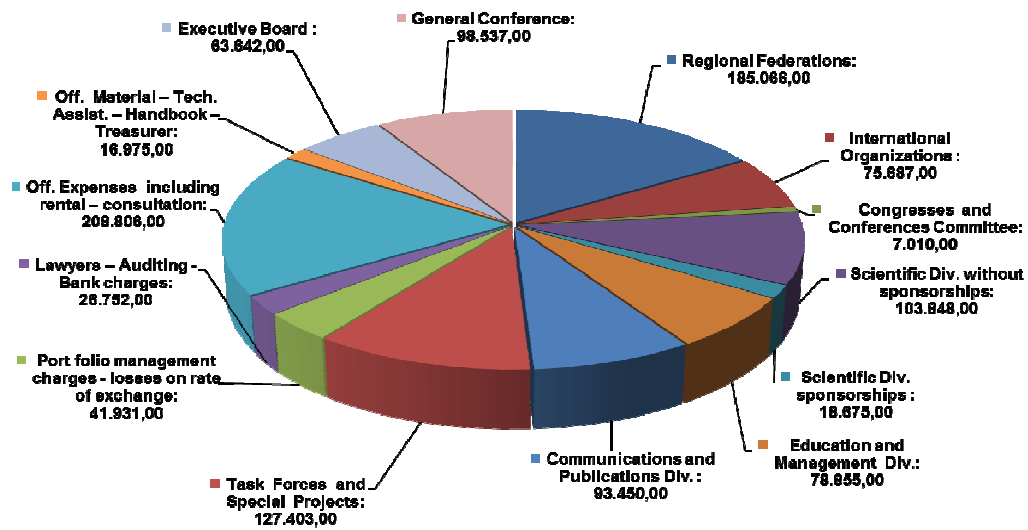


Figure 5: Overview of expenses by functional units budget (Total 1.146.637)

In the current context of economic crisis, Corporate members (51 in 2013) remain loyal and proactive.

1) While the number of members is increasing, company consolidation results in a slight drop in resources for the IFCC, from CHF296,000 in 2011 to CHF281,000 in 2012.

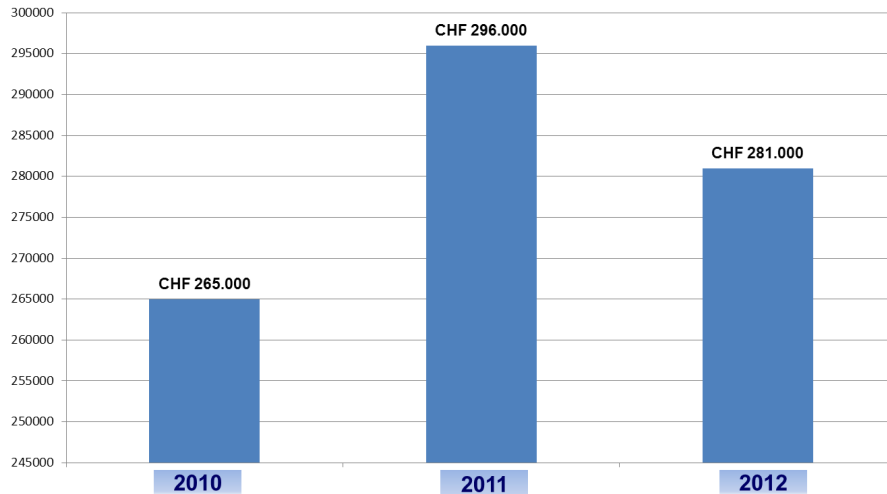


Figure 6: Corporate Members dues 2010-2012

According to the John Gates report

To validate the signatures of the IFCC President and Treasurer, Graham Beastall and Bernard Gouget accompanied by Paola Bramati, went to Geneva in January 2012 to meet our Swiss bank contacts and attempt to optimize cash flow, which remains fragile in the medium term, as well as improve our financial investments.

IFCC continues to maintain three accounts in Euro, USD and Swiss Franc at Credit Suisse and an investment account at LGT Group - Private Banking and Asset Management. In light of the loss recorded in 2011 and the portfolio management fees paid to LGT Group, a decision was made to change the profile of the portfolio, i.e. switch from a "growth" to a "balanced" profile with a view to increasing the proportion of bonds and limiting the risk posed by the high percentage of equities (figure 7).

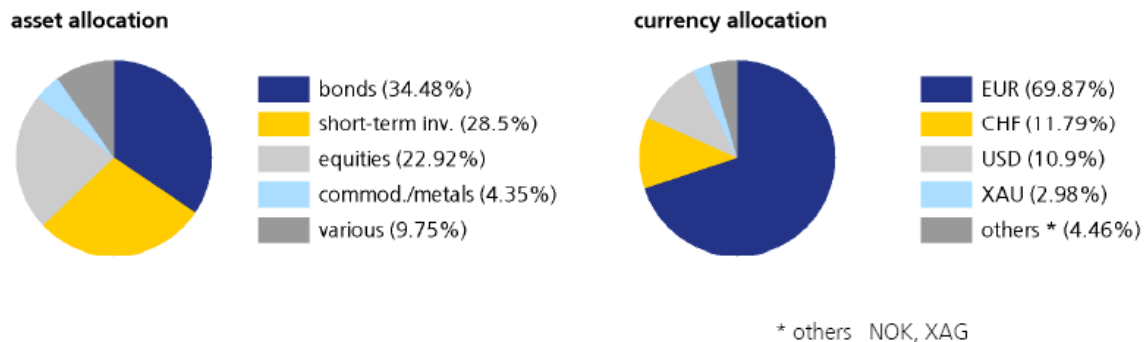


Fig. 7: The LGT asset balanced profile and currency allocation

This proved to be a successful strategy: at the end of 2011, the statement of assets was €1,984,652.43 to reach €2,113,513.47, at the end of 2012 i.e. a + 6.49% performance with a €128,861.54 profit, minus management fees (figure 8). The LGT fees are "all-inclusive fees" which include "administration, advisory and transaction costs". After negotiation, LGT granted us special conditions: 1.2% on the managed portfolio and 0% on the advisory portfolio (conference & congress). This gives an average of 0.94% for 2012, or €19,432.25. It is currently a good deal considering that the official fees for an actively managed "balanced" portfolio is 1.98%; and previously 2.28% for a "growth" model.

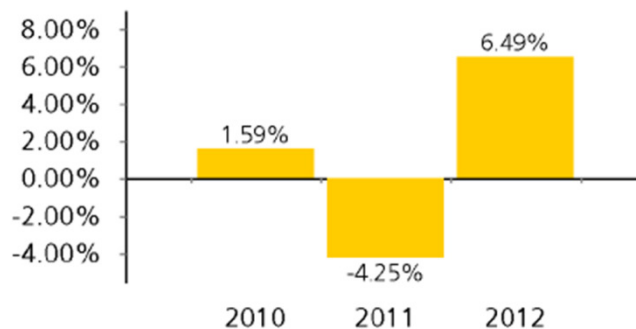


Fig. 8: LGT Portfolio Historic performance (2010-2012)

For the time being, LGT do not recommend a change in the investment profile, or investment of the liquidity part that is currently in the Money Market Funds. One reason is that the interest rates will remain very low in 2013; interest rates will not increase before 2014 or even 2015! This is positive for "niche" sectors, like inflation bonds, high yield bonds or emerging market bonds.

Regular contacts with the banks have, up until now, been fruitful and relationships based on trust and transparency have helped improve the assessment of our federation's financial risks.

As usual, the 2012 financial statements were certified by Mr John Gates, Partner with Humphreys and Gates Audital who provided valuable guidance and expertise.

IFCC WELCOMES FOUR NEW CORPORATE MEMBERS

BG Medicine

BG Medicine is a life sciences company focused on the discovery, development and commercialization of novel diagnostic tests based on biomarkers for high-value market opportunities in healthcare that we identify. Our lead product, the BGM Galectin-3® test for heart failure, is CE-marked and received FDA clearance in November 2010. Website: <http://www.bg-medicine.com/> and <http://www.galectin-3.com/>

ELGA LabWater

ELGA is an integral part of Veolia Water Solutions and Technologies, the world leader in water treatment. Veolia Water Solutions and Technologies has a global revenue of 2.5 billion Euros and worldwide team of 9,500 employees. It is renowned for its capabilities in providing water solutions of any size to customers throughout the entire water cycle. Our commitment to developing and providing purified laboratory water means that you can focus on obtaining accurate results. We specialise in the following markets:

- Research and Testing
- Healthcare
- Clinical Diagnostics

All systems are manufactured in the UK and we are accredited to ISO9001 and ISO14001 standards. We have our own R&D facilities and are always looking to provide products dedicated to providing the right water quality for your application. ELGA focuses exclusively on water and its treatment. We continually contribute to the unique technical and scientific applications expertise developed during the last 50 years. ELGA is experienced in meeting the challenges that arise during the development, installation and servicing of single point-of-use purification systems as well as large projects involving consultation with architects, consultants and clients. Website: <http://www.elgalabwater.com/home>

Wisplinghoff Laboratoriumsmedizin Köln

Wisplinghoff diagnostic services are backed by a strong team of 29 medical doctors and scientists in Cologne. We contribute to the overall progress of healthcare by leading collaborations with industry and academic institutions in order to develop new techniques, carry out research and promote synergies between our scientists, academics and colleagues in the industry. Website: <http://www.wisplinghoff.de/en>

PPD Inc.

PPD is a leading global contract research organization providing drug discovery, development and lifecycle management services. Our clients and partners include pharmaceutical, biotechnology, medical device, academic and government organizations. PPD laboratories including the Central Clinical Laboratories (US, Belgium, Singapore and China), Bioanalytical laboratories (VA. and WI) and Phase 1 Unit Clinical Laboratory (TX) provide a wide array of clinical laboratory testing services for clinical trial patients and bioanalytical assay development and specimen analysis in support pharmaceutical drug research and development. Website: www.ppd.com

UPDATED VERSION OF CLSI'S BEST-SELLING STANDARD-M100-S23-IS NOW AVAILABLE

Wayne, Pennsylvania, USA-January 2013-

Clinical and Laboratory Standards Institute (CLSI) is now shipping its recent release, M100-S23-Performance Standards for Antimicrobial Susceptibility Testing; Twenty-Third Informational Supplement. This document includes important information that laboratorians need to know about antimicrobial susceptibility testing (AST) and provides updated tables for the CLSI AST standards M02-A11, M07-A9, and M11-A8.

M100-S23 includes a dosage regimen for imipenem for *Pseudomonas aeruginosa* and new information for detection of inducible clindamycin resistance using the D-zone test or broth microdilution for *Streptococcus pneumoniae*. Also, the disk diffusion and minimal inhibitory concentration quality control frequency has been updated to include a new two-phase, 15-replicate (3 × 5 day) plan and flow chart. Expanded recommendations for testing fluoroquinolones and salmonella, and elimination breakpoints for beta-lactamase, other than oxacillin (cefoxitin), penicillin, and ceftaroline for staphylococci are included.

Jean B. Patel, PhD, D(ABMM), Deputy Director of the Office of Antimicrobial Resistance for the Centers for Disease Control and Prevention in Atlanta, Georgia, USA, and Vice-Chairholder of the CLSI Subcommittee on Antimicrobial Testing Standards, stated that, "There are a number of changes in this latest version of M100, but perhaps the most significant are the new ceftaroline interpretive criteria (or breakpoints) for several bacterial genera including *Staphylococcus aureus*, the new doxycycline, revised tetracycline breakpoints for *Streptococcus pneumoniae*, and the simplified *Staphylococcus spp.* table."

This January, instantly access M100-S23 with CLSI's new electronic product. eM100 is an interactive, searchable database for drug selection, interpretation, and QC procedures. Work more efficiently by providing the latest recommendations for detecting emerging resistance in an easy-to-use format. There is a version specifically designed for pharmacists to enhance the implementation of M100 information tailored to their organization.

The Clinical and Laboratory Standards Institute (CLSI) is a not-for-profit membership organization that brings together the varied perspectives and expertise of the worldwide laboratory community for the advancement of a common cause: to foster excellence in laboratory medicine by developing and implementing clinical laboratory standards and guidelines that help laboratories fulfill their responsibilities with efficiency, effectiveness, and global applicability. For additional information, visit the CLSI website at www.clsi.org or call 610.688.0100.

FORTHCOMING MEETINGS

MEETING	DATE	VENUE	INFORMATION
• 3rd Congress of the European Society of Predictive Medicine	March 9-10, 2013	Riolo Terme, Italy	www.euspm.org/2ndMeeting.php
• 3rd Jordanian Conference of Medical Technology	March 23-25, 2013	Amman, Jordan	contact: bo_amarin@hotmail.com
• IFCC Course in Laboratory Quality Management	March 25-26, 2013	Harare, Zimbabwe	Programme
• IFCC Course in Laboratory Quality Management	March 28-29, 2013	Lusaka, Zambia	Programme
• 2013 IFCC/ESCCA Beckman Coulter Flow Cytometry Course	April 11-13, 2013 -	St Etienne, France	Programme

- Annual Assembly of the Swiss Society of Clinical Chemistry & International Congress of Porphyrins and Porphyrins & International Meeting of Porphyrin Patients May 16-18, 2013 - Lucerne, Switzerland <http://www.porphyrinsandporphyrias.org/>
- EuroMedLab 2013 - 20th IFCC-EFCC European Congress of Clinical Chemistry and Laboratory Medicine May 19-23, 2013 Milano, Italy www.milan2013.org
- The 2nd European Conference of National Strategies for Chlamydia Trachomatis and Human Papillomavirus May 23-24, 2013 Berlin, Germany www.iecclm.com
- 7th European Symposium on Clinical Laboratory and In Vitro Diagnostic Industry: Molecular genetics in the clinical laboratory May 28-29, 2013 Barcelona, Spain www.acclcat/index.php
- Ortho PATHShala - Training course for Laboratory Technologists (4 modules) June-September 2013 Mumbai, India contact: spandya3@its.inj.com
- 2nd Congress of Romanian Association of Medical Laboratories (RAML) June 5-8, 2013 Brasov, Romania kara@iasi.mednet.ro
- XXV National Biochemistry Congress September 3-6, 2013 Izmir, Turkey www.biyokimyakongresi.org
- 5th International Congress of Biochemistry and Molecular Biology and 14th Iranian Congress of Biochemistry September 8-12, 2013 Tehran, Iran Contact: salami.si@gmail.com
- 21st Meeting of the Balkan Clinical Laboratory Federation and 1st Montenegrin Conference of Clinical Chemistry and Laboratory Medicine September 25-28, 2013 Budva, Montenegro [Announcement](#)
- 9th EFLM Symposium for Balkan Region "Integrative Algorithms in Patient Focused Laboratory Medicine" October 3-5, 2013 Belgrade, Serbia [Programme](#)
- 10th Annual Congress of the German Joint Society for Clinical Chemistry and Laboratory Medicine October 23-26, 2013 Dresden, Germany www.dgkl2013.de
- APCCB 2013 - 13th Asian Pacific Congress of Clinical Biochemistry October 27-30, 2013 Bali, Indonesia www.apccb2013.org
- COLABIOCLI 2013 - XXI Congreso Latinoamericano de Bioquímica Clínica October 29 - November 1, 2013 Lima, Peru <http://colabiocli-lima2013.org/>
- WorldLab 2014 - 21st International Congress of Clinical Chemistry and Laboratory Medicine June 22-26, 2014 Istanbul, Turkey www.istanbul2014.org