



Communications and Publications Division (CPD) of the IFCC

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International Federation of Clinical Chemistry and Laboratory Medicine





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EDITORIAL

Message from the eNews Editor

by Katherina Psarra
eNews Editor

Dear colleagues,

Already at the end of the first month of 2022 we would like to wish you a slightly belated Happy New Year. It will be full of in person and much anticipated meetings to which our president Prof K Adeli welcomes our whole community. Let's hope and believe that they will be realized.

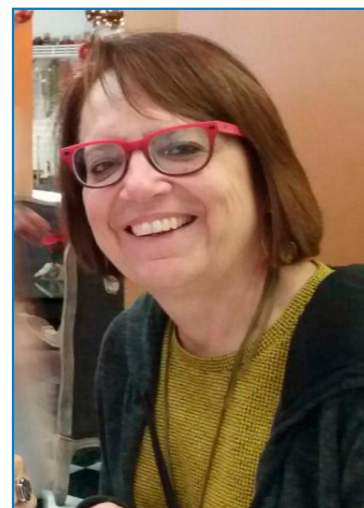
In this issue we are (as always) celebrating laboratory medicine. You will find many articles about the proof of how important laboratories are in the management of COVID-19 all over the world. In addition, several national societies are introducing themselves and their latest news, while some underline the importance of speaking the profession in their own respective languages.

The contribution of laboratories in the management of the refugees' crisis in the countries where a lot of these people looking for a better life arrive, is described by the presenters during les Journées de l'Innovation en Biologie 2021.

Don't forget to go through Dr Per Hyltoft Petersen's life, a life dedicated to analytical quality.

Dear colleagues, celebrate Laboratory medicine in your own ways and go through our eNews to honour it even more.

Katherina Psarra



Katherina Psarra, MSc, PhD

The image features a dark blue background with a network of white lines and dots, resembling a molecular or data structure. In the center, the EFLM logo is displayed in blue, with the text 'EUROPEAN FEDERATION OF CLINICAL CHEMISTRY AND LABORATORY MEDICINE' below it. The main title '6th EFLM CONFERENCE ON PREANALYTICAL PHASE' is written in large, bold, white and orange letters. Below the title, the subtitle 'Preanalytical Quality an interdisciplinary journey' is written in a smaller, white, italicized font. At the bottom, the dates '15-18 March 2022' are displayed in a white font. The background also shows faint images of a hand holding a pen and a calculator.

6th EFLM CONFERENCE ON PREANALYTICAL PHASE

Preanalytical Quality an interdisciplinary journey

15-18 March 2022

THE VOICE OF IFCC

IFCC President's message – January 2022



Prof. Khosrow Adeli
PhD, FCACB, DABCC, FAACC

by Khosrow Adeli
IFCC President

Happy New Year to everyone in the IFCC family! Moving into 2022, the IFCC is eager to continue its mission of “advancing excellence in laboratory medicine for better healthcare worldwide”. Several major events are planned this year by IFCC including the EuroMedLab conference in Munich in early April, the WorldLab Congress in Seoul in June, and the IFCC General Conference in Brussels in October. I am optimistic that we will be able to come together again and hold successful in person/hybrid events as pandemic restrictions are likely to ease in many parts of the world after Spring.

Now that the framework for several new initiatives has been built (and the new taskforces are already active), we will be taking a fresh look at divisional activities and planning for the future. To this end, IFCC Division Chairs will come together with the IFCC Executive Board soon for an in person/hybrid IFCC Strategic Meeting to discuss divisional structure and strategic planning.

A key goal is to carefully evaluate each functional group (committees, working groups, taskforces), reviewing their mandate and progress to-date, ensuring that the IFCC structure is appropriately positioned to meet its scientific, educational, and global responsibilities over the coming years.

IFCC has also launched a new important initiative, the **IFCC Global Lab Medicine Week (GLMW)**, to celebrate the pivotal role of laboratory medicine and laboratory professionals in both public health and patient care. The 2022 focus/theme will be “The Laboratory’s Vital Role in the Global Fight Against the COVID-19 Pandemic”. A **Global Lab Week Working Group** has been formed with representations from IFCC regional federations and they are hard at work planning the official launch of this program in April of this year during the EuroMedLab Congress in Munich. For this initiative, IFCC would like to collaborate closely with regional federations, national societies, and corporate members to support their activities around the world. To this end, calls for nominations have been circulated for **1) IFCC Corporate Member Representatives** to serve on a Corporate Member Advisory Group to the Global Lab Week and **2) National Lab Week Champions** to assist with the promotion of GLMW and the vital role our profession plays in their country/region.

In other news, IFCC has been working to create a request for proposals to identify a new IT partner to redevelop/upgrade the current **IFCC website** and associated platforms as well as provide ongoing technical and operational support. In an increasingly virtual world, it is more important than ever to further establish and improve IFCC’s online presence, increasing engagement, knowledge translation, satisfaction, and so much more within the IFCC community and beyond. This will be particularly useful to support initiatives such as GLMW, eAcademy, Global Reference Interval Database (GRID), Global Lab Quality (GLQ), and others. We are also planning the development of an **IFCC Virtual Platform** for all future virtual and hybrid events, both smaller meeting and larger conferences. Stay tuned!

As always, please feel free to email me at president@ifcc.org with any feedback, questions, or concerns you may have.

Till next time ☺
Khosrow

Schedule for the election of the next IFCC Executive Board for the term 2024-2026

by Leslie Lai

Chair, IFCC Nominations Committee

This article is a short summary of the timelines for the election of the next IFCC Executive Board for the term 1st January 2024 till 31st December 2026.

The IFCC EB creates an ad hoc Nominations Committee and appoints the Chair. It is the responsibility of the Nominations Committee to invite, receive and process nominations for the next Executive Board. It undertakes this role independently of the EB. Candidates must be nominated by the Full Member Association of the country where the member works and not by another Association of which the candidate is a member. Members of the Nominations Committee cannot be nominees.

The Nominations Committee then recommends a slate of valid nominations comprising one or more candidates for each vacancy. The Nominations Committee does not have any role in shortlisting candidates and does not function as a search committee.

The election of the new EB will be conducted by electronic ballot. The Nominations Committee oversees each ballot in collaboration with the IFCC Office and announces the result of each ballot.


The members of the Nominations Committee for the next EB are:

Name	Position	Country	Term	Time in Office
Leslie Lai	Chair	MY	1 st	2021 05 – 2023 12
Graham Beastall	Past Chair	UK	1 st	2021 01 – 2023 12
Osama Najjar	AFCB Regional Federation Rep.	PS	2 nd	2021 06 – 2023 12
Angela Amayo	AFCC Regional Federation Rep.	KE	2 nd	2021 06 – 2023 12
Endang Hoyaranda	APFCB Regional Federation Rep.	ID	2 nd	2021 06 – 2023 12
Rosa Sierra-Amor	COLABIOCLI Regional Federation Rep.	MX	1 st	2021 06 – 2023 12
Klaus Kohse	EFLM Regional Federation Rep.	DE	1 st	2021 06 – 2023 12
Nathalie Lepage	NAFCC Regional Federation Rep.	CA	2 nd	2021 06 – 2023 12

The table below shows the schedule for the election of the next Executive Board.

Article continued on next page

Schedule for Election of Next Executive Board 2024-2026

2022												2023				21 May 2023: COUNCIL		
	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR		
President elect		CALL FOR NOM.	NC	LOBBYING	BALLOT	RESULTS							President elect term begins					
Treasurer						CALL FOR NOM	NC	LOBBYING c/o NR	BALLOT	RESULTS								
Secretary						CALL FOR NOM	NC	LOBBYING c/o NR	BALLOT	RESULTS								
Corp. Memb.								CALL FOR NOMINATIONS	NC	LOBBYING c/o CR	BALLOT	RESULTS						
6 Regional Reps								CALL FOR NOMINATIONS	NC	LOBBYING c/o NR	BALLOT	RESULTS						

LEGEND

CALL	Call for nominations
NC	Nomination Committee evaluation
LOBBYING	Distribution to NR/CR-lobbying
BALLOT	Electronic ballot
RESULTS	Results announced

New calendar, new guidelines for the IFCC Congresses

While waiting for the return to normalcy, the IFCC Executive Board has taken the opportunity to review and revise its conference schedule. Going forward, the IFCC will have one main international conference each year, alternating between the IFCC EuroMedLab in Europe and the IFCC WorldLab in the other regions. This new schedule offers consistency, prevents overlap, and ultimately will make it easier for all of IFCC members and regions to regularly attend and participate in these important scientific events. In line with this new conference schedule, the Executive Board has also decided to include all regional federations as conference partners.

The new guidelines for all future IFCC EuroMedLabs and WorldLabs to aid in the planning, organization, and execution of these events, thus enhancing the conference experience for all attendees, are already available in the IFCC website, at <https://www.ifcc.org/ifcc-congresses-and-conferences/auspices-and-congresses-guidelines/>, along with the related application forms.



Participants at IFCC Congresses

The New IFCC Task Force on Global Reference Interval Database on the move

*by Dr. Jakob Zierk
TF- GRID Chair
Universitätsklinikum Erlangen
Kinder- und Jugendklinik
Erlangen, Germany*



IFCC Task Force on Global Reference Interval Database (TF- GRID) meeting

On December 01, 2021, the newly created TF-GRID (IFCC Task Force on Global Reference Interval Database, chaired by Jakob Zierk from Germany) came together for their first meeting in a virtual conference call. The task force's overarching goal is the establishment and dissemination of digital IFCC reference interval resources to be used by scientists and clinicians worldwide. Specifically, the task force has identified five major tasks within their scope and mandate, which will be led by small subgroups within the task force:

- First, an IFCC website which provides an overview of all major global and local reference interval studies and initiatives will be developed. The aim of this website is to provide an IFCC-sponsored entry point to clinicians and scientists looking for reference intervals. This task will be led by M. K. Bohn (Member/YS, CA), P. Ridefelt (Member, SE), R. Müller (Corp. Rep., Abbott, DE), J.M. Rhea-McManus (Corp. Rep., US, Siemens), A. Al-Farwi (Corr. Member, SCLA), S. Sharma (Corr. Member, ACBI), and E. C. Cheung Wong (Member, US).

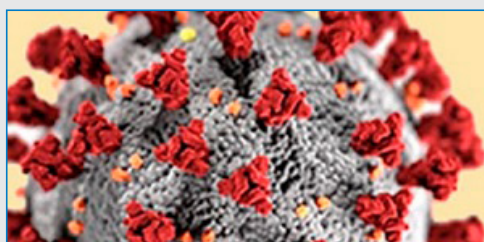
- Second, the task force will create a global IFCC reference interval database. This database will give end users access to specific reference intervals, stratified by the relevant covariates and also allow comparison of patient's test results to existing reference intervals. (Both websites from the first and second task will be mobile-friendly.) The members leading this task are M. K. Bohn (Member/YS, CA), P. Ridefelt (Member, SE), P. Christensen (Corr. Member, DSKB), J.M. Rhea-McManus (Corp. Rep., Siemens, US), E. C. Cheung Wong (Member, US), and E. Kupatadze (Corr. Member GLMA).
- Third, the task force will create web-based tools to allow end-users to calculate reference intervals using various direct and indirect methods. This task is led by A. B. Leichtle (Member, CH), A. Coskun (Member, TR), L. Franzon (Corr. Member, ISLM), and H. Marques Tiburcio (Corr. Member, DSKB).
- Fourth, the task force will analyze existing global reference interval data to assess opportunities for reference interval harmonization, and to identify areas where reference interval studies are needed most. N. Mayanskiy (Member, RU), E. A. Chaler (Corr. Member, CUBRA) and R. Müller (Corp Rep, Abbott, US) are leading this task.
- Fifth, a workshop on indirect reference intervals is planned, with the aim to disseminate both theoretic and practical knowledge on indirect reference interval approaches. This task is led by A. B. Leichtle (Member, CH), A. Coskun (Member, TR), and A. Al-Farwi (Corr. Member, SCLA).

The task force's first in-person meeting is currently scheduled for the EuroMedLab meeting in Munich, until then the group is having monthly virtual meetings.

For further information about the TF activities, please visit: <https://www.ifcc.org/executive-board-and-council/eb-task-forces/task-force-on-global-reference-interval-database-tf-grid/>.

News from the IFCC Website

IFCC Information Guide on COVID-19 - 2022 Updates



[Click here](#) and access the IFCC online resource about COVID-19 providing critical information on laboratory guidelines, biosafety, and other important resources to assist member societies worldwide and their clinical laboratories as they face the challenges posed by the COVID-19 outbreak.

The Sections on Molecular Testing - Antigen Testing - Serology Testing, as well as the Vaccines Section have been updated with new publications.

The page is updated continuously with the most recent information on a monthly basis.

Call for manuscript submissions for a thematic eJIFCC issue on “Laboratory aspects of COVID-19 disease”

Guest editor for the thematic issue: Béla Nagy Jr.

Since the outbreak of the Coronavirus disease 2019 (COVID-19) pandemic in December 2019, the importance of clinical laboratory tests has emerged to manage the hospitalization of patients with different severity of COVID-19 related disorders, to distinguish severe and non-severe clinical conditions and to predict the outcome of the disease. For these purposes, a vast number of clinical studies has recently been conducted to validate the potential role of various laboratory tests. In parallel, the effect of COVID-19 vaccines has also been evaluated. However, due to the rapid accumulation of this enormous amount of patient data, we need to raise the questions where we are now and where we should be heading?

We would like to offer some new insights into the usefulness of routinely available and novel laboratory biomarkers in the still demanding COVID-19 as well as for monitoring of vaccination with an eJIFCC issue dedicated to this disease. We invite you to submit a paper on “**Laboratory aspects of COVID-19 disease**” to be published in this thematic issue. Submitted papers will be peer-reviewed according to the regular procedure of the eJIFCC Journal.

Important deadlines

- Deadline for submission of the tentative title (to the Guest Editor): **April 1, 2022**
- Deadline for submission of the manuscript: **May 15, 2022**

Potential types of articles

- Original Article
- Critical Reviews
- Case studies

Manuscripts need to be submitted by e-mail

- to the Editor-in-Chief: ejifcc@ifcc.org
- with a copy to the Guest Editor: nagy.bela@med.unideb.hu

Guest editor

Béla Nagy Jr., MD, PhD
Department of Laboratory Medicine,
Faculty of Medicine, University of Debrecen,
Debrecen, Hungary



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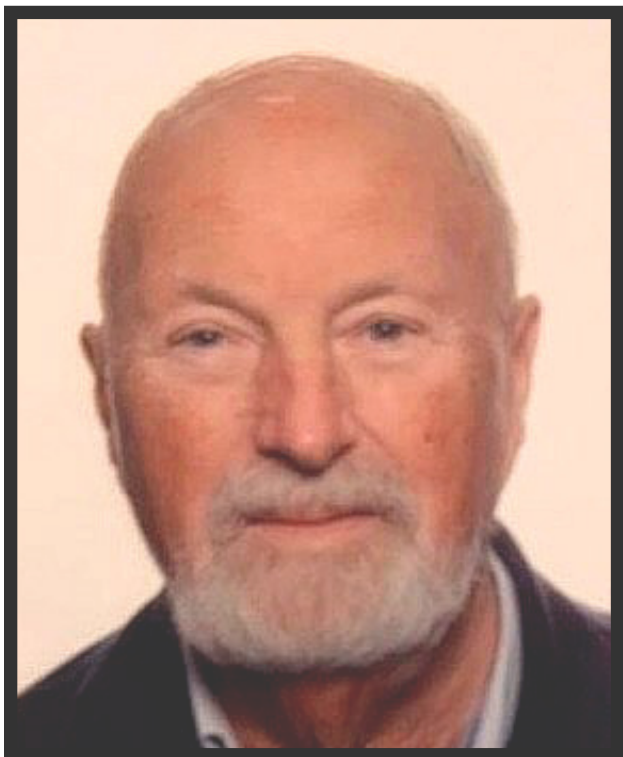
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IFCC: THE PEOPLE

Dr. Per Hyltoft Petersen: an appreciation

*by Callum G. Fraser
Sverre Sandberg*



Dr. Per Hyltoft Petersen

Sadly, Dr. Per Hyltoft Petersen from Odense in Denmark, passed away on 15 January 2022. Ever since the early 1980s, Dr. Petersen was involved in investigations on how the analytical quality achieved affected clinical outcomes, and this continued throughout his professional life. In the 1990s, along with many others interested in this particular aspect of laboratory medicine, including Mogens Horder, Callum Fraser, Jim Westgard, Rainer Haeckel, Carmen Ricos, Sverre Sandberg, and many other internationally well-known collaborators, Dr. Petersen continued his work on setting analytical goals and generating and applying data on the components of biological variation. Throughout this period, definition of what was then generally termed analytical goals was addressed by several professional groups including the European Group on Evaluation of Laboratory Tests (EGE-Lab) and the European External Quality Assessment (EQA) Organisers Working Groups, of which Dr. Petersen was a very active member. Much controversy grew about the appropriate means to set analytical goals and he, along with Drs. Callum Fraser, Anders Kallner and Desmond Kenny organised the 1999 Stockholm Consensus Conference on Setting Global Analytical Quality Specifications in Laboratory Medicine, inviting all colleagues who had published on this topic to present (and publish) their views. The consensus achieved was a hierarchy of the known strategies for setting analytical quality specifications with the effect of performance on clinical decision-making as the best and the state-of-the-art achieved as the least advantageous. This hierarchy was based on the proposal advocated in an Editorial by Fraser and Petersen in *Clinical Chemistry*. The hierarchy was widely adopted throughout laboratory medicine. However, by the 2010s, it became clear that the hierarchy warranted review. In consequence the European Federation for Clinical Chemistry and Laboratory Medicine (EFLM) held the 1st Strategic Conference of the European Federation of Clinical Chemistry and Laboratory Medicine in 2014. Dr. Petersen was a member of the organising group, presented a summary of his work on analysis of the effect of analytical performance on clinical decision-making using his well-known and highly regarded graphical approaches, and participated in the preparation of the consensus statement, a simplification of the hierarchy established by the Stockholm Conference, a paper which has been cited more than 350 times already. Much interest was generated at the Strategic Conference on the assessment and uses of data on biological variation, a subject to which Dr. Petersen had contributed much over his career. His inspiration has contributed to the

sus Conference on Setting Global Analytical Quality Specifications in Laboratory Medicine, inviting all colleagues who had published on this topic to present (and publish) their views. The consensus achieved was a hierarchy of the known strategies for setting analytical quality specifications with the effect of performance on clinical decision-making as the best and the state-of-the-art achieved as the least advantageous. This hierarchy was based on the proposal advocated in an Editorial by Fraser and Petersen in *Clinical Chemistry*. The hierarchy was widely adopted throughout laboratory medicine. However, by the 2010s, it became clear that the hierarchy warranted review. In consequence the European Federation for Clinical Chemistry and Laboratory Medicine (EFLM) held the 1st Strategic Conference of the European Federation of Clinical Chemistry and Laboratory Medicine in 2014. Dr. Petersen was a member of the organising group, presented a summary of his work on analysis of the effect of analytical performance on clinical decision-making using his well-known and highly regarded graphical approaches, and participated in the preparation of the consensus statement, a simplification of the hierarchy established by the Stockholm Conference, a paper which has been cited more than 350 times already. Much interest was generated at the Strategic Conference on the assessment and uses of data on biological variation, a subject to which Dr. Petersen had contributed much over his career. His inspiration has contributed to the

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impressive body of work done in the last decade by the EFLM groups concerned with biological variation, which have contributed so much to contemporary laboratory medicine.

Since the Strategic Conference, Dr. Petersen and colleagues from Scandinavia and Scotland have published a series of papers up to 2019 on the assessment of means to develop reference change values, another long-held interest of Dr. Petersen to which he contributed significant insights. Although Dr. Petersen was situated in Odense, for more than 20 years he was engaged in the work of the Norwegian organisation for quality improvement of laboratory examinations (Noklus) and worked as an Adjunct Professor at the University of Bergen. In NOKLUS he engaged, inspired, and supervised many PhD and MSc students and all looked forward to his visits in Bergen with anticipation. In addition to his publications, Dr. Petersen was a captivating speaker and was invited to present his work at many conferences and meetings too countless to detail, but from every country in Scandinavia, through Milan, Antwerp, Padua, Jackson Hole: Colorado (at the invitation of the College of American Pathologists), Kobe: Japan (resulting in a book "Maintaining a Healthy State within the Individual"), Bratislava, Barcelona, Kuwait (giving a two-week course in selection and evaluation of analytical methods for the Ministry of Health, with Callum Fraser), and many others, including Australia. Together with Linda Thienpont, Dietmar Stöckl, Kristian Linnet and Sverre Sandberg, over many years, he toured around the world presenting a comprehensive course in medical statistics. A great scientist, innovator, and communicator, who contributed so much to the development of the numerical aspects of laboratory medicine, Per Hyltoft Petersen had great ambitions for the discipline: in contrast, his ambitions on his own behalf were small.

IFCC Call for Nominations

The IFCC invites nominations for the following position:



Education & Management Division (EMD)

➔ *Committee on Clinical Laboratory Management (C-CLM)*

- Two Member positions
- Deadline to send nominations and supporting documents: 10th February 2022.

➔ *Committee on Evidence-Based Laboratory Medicine (C-EBLM)*

- One Member position
- Deadline to send nominations and supporting documents: 28th February 2022.

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

- One Member position
- Deadline to send nominations and supporting documents: 6th March 2022.

EMD Nominations should be sent to the IFCC Office (cardinale@ifcc.org).

Scientific Division (SD)

➤ *Nomenclature, Properties and Units (C-NPU) in collaboration with International Union of Pure and Applied Chemistry (IUPAC)*

- One Member position

➤ *Reference Intervals and Decision Limits (C-RIDL)*

- Two Member positions

➤ *Molecular Diagnostics (C-MD)*

- Two Member positions

Deadline to send nominations and supporting documents: 20th February 2022.

SD Nominations should be sent to the IFCC Office (paola.bramati@ifcc.org).

Task Force Corporate Members (TF-CM)

- One Member position

Deadline to send nominations and supporting documents: 1st March 2022.

TF-CM Nominations should be sent to the IFCC Office (paola.bramati@ifcc.org).

Task Force for Young Scientists (TF-YS)

- One Member position

Deadline to send nominations and supporting documents: 28th February 2022.

TF-CM Nominations should be sent to the IFCC Office (colli-lanzi@ifcc.org).

Refer to your National Representative or Corporate Representative for information on procedures for nominations - contacts are available [here](#).

IFCC Webinars

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Live Series

2022
www.ifcc.org


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of Clinical Chemistry
and Laboratory Medicine

New IFCC Live Webinars to come in 2022!

Impact of SARS-CoV-2 Variants and Mutations on COVID-19 Diagnostics, and COVID-19 and Laboratory Medicine Role; Neurofilament Light Chain; A Global Perspective on Health Inequities in Laboratory Medicine; D-Dimers; Preanalytical Phase; Laboratory Diagnosis of Endocrine Diseases; Data-driven Operations and Machine Learning Applications in Clinical Laboratories; Clinical Application of Single Cell and Spatial Transcriptomics.... and more to come!

Watch out for IFCC Live Webinars 2022!

Don't miss to participate into the 2022 series!

Article continued on next page

In 2021:
22 webinars,
80 presentations,
30 hours,
60+ speakers,
66.000+ participants,
130+ countries

All IFCC Webinars are available in:



IFCC Webinars

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Live Series

2022
www.ifcc.org



Register to the IFCC Complimentary Live webinar 16th February 2022
"Impact of SARS-CoV-2 variants and mutations on COVID-19 diagnostics"

IFCC Live Webinar

Impact of SARS-CoV-2 variants and mutations on COVID-19 diagnostics



➤ Moderator

➤ Impact of SARS-CoV-2 variants and mutations on serological immunoassays



Prof. Khosrow Adeli
[Canada]

Full Professor of Clinical Biochemistry at the Hospital for Sick Children, University of Toronto. President of the International Federation of Clinical Chemistry and Laboratory Medicine (IFCC)

➤ Update on SARS-CoV-2 variants and mutations



Prof. Giuseppe Lippi
[Italy]

Full Professor of Clinical Biochemistry & Director of Laboratory Medicine Service, University Hospital of Verona (Italy). President, School of Medicine, University of Verona

➤ Impact of SARS-CoV-2 variants and mutations on molecular assays



Dr. Brandon M. Henry
[USA]

Physician-scientist and a world-renowned expert on COVID-19 and leader of multiple international studies investigating COVID-19. Serves as an advisor on COVID-19 response to multiple public health agencies around the world.

Date: February 16, 2022

Time: 9 am (Eastern Standard), 3pm (Central European), 10pm (Beijing)



2022
10-14 APRIL

ICM MUNICH
GERMANY



HAVE YOU ALREADY SCHEDULED YOUR PARTICIPATION?

ABSTRACTS

The Scientific Programme Committee would like to give another opportunity to all delegates to submit new abstracts of their scientific work for presentation as a free communication at Euromedlab Munich 2021.

Abstract submission deadline:
10 February 2022

[Submit your abstract](#)

REGISTRATIONS

The online registration system is open!

REGISTRATION FEES
Until 31 March 2022

Full Registration € 840,00
Young Registration (≤ 35 years) € 450,00
Day Registration € 360,00

[Register now](#)



ORGANISING SECRETARIAT

MZ EVENTS
Milan (ITALY)

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Mobile Phone +39 389 8905891

info@euromedlab2021munich.org

www.euromedlab2021munich.org

IFCC: THE MEMBERS

Mexican Association of Clinical Laboratory Sciences (CMCLabC)



**Colegio Mexicano de Ciencias
de Laboratorio Clínico, A.C.**

*by Rosa Sierra-Amor, PhD
Member WG eNews CPD
Former Regional IFCC EB*

On behalf of the CMCLabC, we wish you a healthy and prosperous New Year 2022.

And thanks to Dr. Katherina Psarra, Chair eNews WG for inviting us to write a summary of our activities based on the following questions:

➤ ***What is the name of your society?***

Our society was legally registered under the law at the Secretary of Education number F-412 with the name of Mexican Association of Clinical Laboratory Sciences (CMCLabC): www.cmclabc.org.

➤ ***How many members?***

The membership of 153 professionals when it was founded, has not grown lately unfortunately. The reasons are obvious, scientists and laboratory personnel focused their activities in providing new tests and resources to identify patients with COVID 19, and moving forward helping others professionals as well. At this moment, the membership holds 101 associates, mostly clinical chemists, and researchers or university professors with doctoral degrees, several are members of the National Program of Sciences and Technology Council (CONACyT SNI I, II, III). The CMCLabC has also organized groups of students of clinical chemistry, with membership categorized under Chapters, that all together formed the national membership. The chapters are in Mexico City, and in Hidalgo, Tlaxcala, Veracruz, and Yucatan States.

➤ ***When was it founded?***

The CMCLabC was founded in 2013, by a new generation of scientists and professionals involved not only in clinical chemistry but in other areas of laboratory medicine, such as Hematology, Microbiology, Blood bank, Informatics, Molecular Diagnostics, Toxicology, Immunohematology, POCT, to mention some of the several other sciences in laboratory medicine that are covered by our national healthcare system.

➤ ***Describe one or two of the society accomplishments for 2021 and what you are expecting for 2022. Perhaps attach a photo, or a picture.***

In 2021, and due to COVID-19, several activities moved to digital or internet based conferences, webinars, and workshops. It was obvious that audience increased in attendance allowing other health care professionals to interact closely with clinical chemists. Thanks to the internet base communications, free webinars, conferences, conservatories, courses, and many other activities could reach a wider audience. Interesting activities helped professionals not to be disrupted and left behind due to COVID pandemic. <http://www.cmclabc.org/actividades.php?modulo=colegio>.

Article continued on next page



Since late 2020 and during all 2021, the CMCLabC congress organizing committee has been involved in the organization of the **XXV Latin American Congress of Clinical Biochemistry**, an IFCC regional congress, the biannual congress of COLABIOCLI that had to be moved a year ahead. It seemed giving extra time for the organization, but it has taken a lot of efforts and hard work in having IDV companies committing in participating with workshops and booths at the laboratory exhibition. Even it is understandable, this congress being a regional one, the organizing committee has been very keen to having the majority of the companies and distributors engaged in presenting and providing laboratory devices and equipment up to date to fulfill the needs of the audience that are attending this year again a face-to-face meeting. <https://colabiocli2022.com/en/home-2/>.

During 2020, Laboratories, private and public focused their attention mostly to COVID19 testing, patients have stopped coming to the lab for regular testing, reagents delivery sometimes was delayed due to lack of productivity worldwide. In Mexico, unfortunately, most of the material and reagents are imported, this is a high risk factor to maintain resources on stock. The 2021 year was not so different, although laboratories were adjusted better to COVID 19 pandemic in order to maintain their services and personnel running.

In 2022, our first objective is to host the **XXV Latin American Congress of Clinical Biochemistry** with the aim to fill the gap in knowledge that COVID- 19 has created. Nevertheless, we hope that in 2022, despite the fact of Omicron or any other COVID 19 variant, laboratory medicine keeps playing a key role in the management of laboratory services at the healthcare system, providing reliable results and information for the medical diagnosis.

- **Write in your language and letters the phrase:**
"Laboratory medicine is very important for healthcare system."

"La medicina laboratorial es muy importante para el Sistema de Salud."

Cyprus Association of Clinical Laboratory Directors, Biomedical and Clinical Laboratory Scientists (ACL CY)

IFCC eNews member and IFCC National Representative: Ms. Spyroula Christou

Cyprus (CY)



Association of Clinical Laboratory Directors, Biomedical and Clinical Laboratory Scientists

Website: <https://www.aclcy.org/>

- **Write in your language and letters the phrase:**
"Laboratory medicine is very important for healthcare system."

"Η ΕΡΓΑΣΤΗΡΙΑΚΗ ΙΑΤΡΙΚΗ ΕΙΝΑΙ ΕΞΑΙΡΕΤΙΚΑ ΣΗΜΑΝΤΙΚΗ ΓΙΑ ΤΗ ΔΗΜΟΣΙΑ ΥΓΕΙΑ."

Association of Medical Biochemistry of India (AMBI)

*by Sudhesna Mohapatra, MD, DHM
IFCC eNews Member
Life member of AMBI*

Association of Medical Biochemists of India (AMBI), established in the year 1991, is dedicated to promoting and advancing medical biochemistry and allied sciences. It aims to provide leadership in public education about the importance of laboratory medicine, devise a uniform policy and provide inputs with regards to medical education and medical administration. Presently it has more than 3200 members who are MBBS with post-graduate studies in Medical Biochemistry.

In 2021, despite the raging pandemic AMBI managed to have multiple virtual state conferences as well as the hybrid national conference. AMBI also continued to give active representations in the NMC and worked towards revival of state chapters. The conferences had many hands-on workshops to impart practical knowledge to the budding post-graduates and practicing biochemists. There was an increase in the number of issues released by the association journal from two to three. In 2022, AMBI will continue to strive to be the cohesive force to unite the medical biochemistry fraternity and give young laboratorians a platform to present their work.

Laboratory Medicine is undoubtedly the backbone for healthcare. As there are more than 22 scheduled Indian languages, it is difficult to write in any specific script without ignoring the others. Therefore, we prefer to use English as our uniform language for communication.



Pre-Corona Times- AMBI Silver Jubilee Annual Conference in 2017, Mysore Karnataka

Turkish Biochemical Society

➤ **What is the name of your society?**

Turkish Biochemical Society

➤ **How many members?**

1879 Members

➤ **When was it founded?**

It was founded in 1975 in Ankara, Turkey

➤ **Describe one or two of the society accomplishments for 2021 and what you are expecting for 2022. Perhaps attach a photo, or a picture.**

Turkish Biochemical Society education and scientific activities continued throughout the Covid pandemic. We held online meetings, courses (molecular, flow cytometry, biostatistics, education, etc.) and in October 2021 a face-to-face congress of 550 people. The Turkish Journal of Biochemistry is on the right track, its impact factor has increased and it has become open access.

We hope to have more innovative activities for the year 2022 with a structure and concept related to what we learned during the Covid-19 pandemic.

➤ **Write in your language and letters the phrase:
“Laboratory medicine is very important for healthcare.”**

“Laboratuvar tıbbı sağlık hizmeti için çok önemli.”

by Aylin Sepici Dinçel

IFCC eNews Corresponding Member

Professor of Biochemistry

Department of Medical Biochemistry

Gazi University, Faculty of Medicine

Ankara, Turkey



During Pandemic



Two years after pandemic

Nepal Association for Medical Laboratory Science (NAMLS)

*by Dr. Binod umar Yadav
Ex-president, NAMLS
Member, eNews-IFCC*

➤ **Name of society, its establishment and member status:**

Nepal Association for Medical laboratory Science (NAMLS)

NAMLS is a non-political medical laboratory professional association in Nepal, was established and registered in chief district office (CDO), Ministry of Home affairs, Govt. of Nepal, May 1998. NAMLS is working for the betterment of laboratory medicine and laboratory medicine professional in Nepal. It has more than 1000 professional members and all of them are actively working in health sector Nepal. Some of them are also working abroad.

➤ **NAMLS 2021 activities:**

NAMLS played a significant role in the management of COVID-19 in Nepal by being one the active members in formulating the policy of COVID-19 management and actively involved in the diagnosis of COVID-19. Most of NAMLS's members are involved in managing the COVID-19 PCR lab throughout the country. Some of the NAMLS members worked as members in monitoring and evaluation team of Nepal health research council (NHRC) to inspect the COVID-19 PCR laboratory to strengthen the COVID-19 diagnosis.

Article continued on next page

NAMLS has also supported the Nepalese Medical Laboratory Student Society (NMLSS) in their webinar series. Similarly, NAMLS participated in the webinar series of some universities laboratory course work.

Almost all the provincial public health laboratory (PPHL) in Nepal is run by the NAMLS active members and it is the pride of Nepal that most of them are headed by NAMLS active members. In brief, NAMLS played a significant role in managing the COVID-19 in Nepal in 2021 and continuing in 2022. If time and situation of COVID-19 allows, NAMLS is planning to organize its annual meeting in 2022 and to conduct a scientific workshop in 2022.

➤ ***Laboratory medicine is very important for healthcare.***

Laboratory medicine is a vital part for health care as it is integral to many clinical decisions on prevention, diagnosis, treatment and management of patient disease. Laboratory medicine and medical laboratory professionals provide clinical information and services that contribute to the effective delivery of care in current complex healthcare system. They are indispensable partners in providing patient-centered care and in improving health outcome and overall public healthcare. Laboratory medicine provides attending doctors with information necessary to offer high-quality, safe, effective and appropriate care to patients (1). The often quoted “70% claim” according to which laboratory medicine data affect ~70% of medical decisions, ~70% of clinical diagnoses are dependent on laboratory medicine and ~70% of the information in the medical record consists of laboratory medicine results is, however, quite anecdotal, as systematic evidence of the laboratory medicine contribution to the overall process of diagnosis and management of patients is hard to produce (2, 3).

Laboratory medicine plays a direct impact on many aspects of patients care, especially in disease diagnosis, in patients length of stay, patients safety, resource utilization, innovation in care, customer satisfaction and finally patients outcome. The best example in the current scenario is the role playing by laboratory medicine and laboratory professional in the control and management of COVID-19 pandemic. From the first step of COVID-19 diagnosis to patients discharge,

Laboratory medicine is playing a vital role. There are several emerging and re-emerging diseases, pandemic and epidemic surveillance are ongoing in the world and in each case, laboratory medicine offers significant support. Without laboratory medicine, none of the disease surveillance is complete (1).

The 21st century is the era of evidence-based medicine that means all the procedure and treatment in medicine is dependent of diagnostic evidence and laboratory medicine is one of the core units which provide the evidence in managing the patients. Laboratory medicine as diagnostic is one of the fundamental components of health care and an integral component of health care system. However, the clinical doctors first approach the patients clinically. Clinical history, family history, review of symptoms and physical examination remain the mainstay of clinical medicine, and guide further evaluation including laboratory medicine diagnostic testing, and in many situations they are all that is needed to treat patients. Many diseases and conditions cannot be distinguished or diagnosed based solely on clinical diagnosis (4, 5).

Laboratory medicine is supporting the diagnosis and treatment of several diseases directly and the best example of this is the COVID-19 infection, which cannot be accurately diagnosed without the use of laboratory medicine and without proper diagnosis, it cannot be further treated and managed. Another best example is managing a complex disease like AIDS which is also neither diagnosed nor treated or managed without the use of laboratory medicine with simple tests like HIV serology test and CD4 and CD8 counts. Similarly, the effective treatment of cancer is not possible without the use of laboratory medicine and its diagnostic testing (6). Laboratory medicine is critical for detection of emerging infectious diseases, surveillance for diseases within populations, and for monitoring the evolution of antimicrobial resistance (7,8). As we move slowly into an era of targeted and patient-specific therapy, often referred to as precision medicine, the importance of laboratory medicine as accurate diagnostics tool will only increase (9). The era of personal or precision medicine is approaching everywhere and in-fact some part of world has already started the precision medicine where the modern art

of diagnostic tools are available. A country like Nepal is also utilizing the modern art of technology in laboratory medicine and COVID-19 created the better platform for the laboratory medicine throughout the world and in-fact in Nepal too. During this COVID-19 pandemic period, more than 100 real-time PCR testing centers, 2-3 sequencing centers and more than ten “A” graded laboratories have been established in Nepal and all are providing the best services by utilizing the modern art of technology of laboratory medicine. Thus, it is trusted that the 21st century will witness changes in the environment of health care, in the nature of medical practice, in the development of new technology, and in the practice of laboratory medicine.

Currently, world is behind in maintaining the Global health – a healthy global population which needs quality laboratory medicine facilities and dedicated laboratory professionals. It’s the responsibility of every nation to stay abreast of the issues, to stay active in advancing the field, and to educate those in healthcare, public health, and policy formation about what laboratory medicine can do to maintain a healthy global population.



Dr. Binod umar Yadav
IFCC WG eNews member

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Inside a national society: the Royal Belgian Society of Laboratory Medicine

by Prof. Damien Gruson

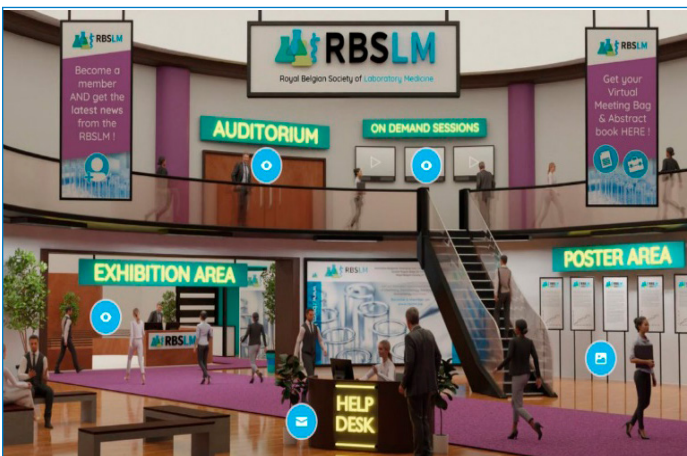
IFCC eNews member

Belgium

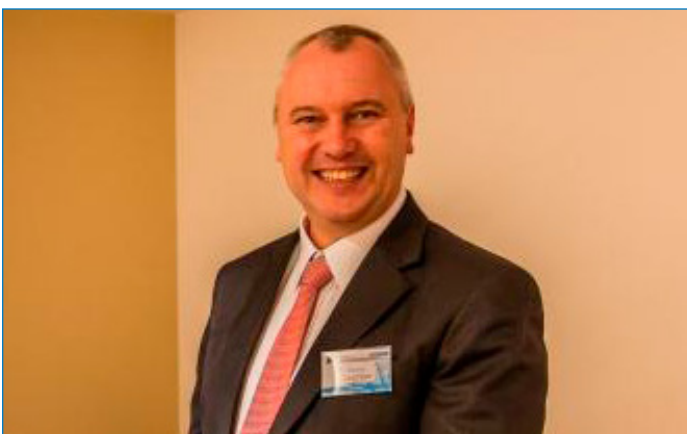
damien.gruson@uclouvain.be



1. The hybrid meeting focusing on "Women's health"



2. The efficient virtual platform by RBSLM & Humacom



3. RBSLM President, Prof. Etienne Cavalier

The Royal Belgian Society of Laboratory Medicine (<https://www.rbslm.be>) aims at representing and promoting the scientific and clinical interests of laboratory medicine in Belgium as well as clinical biology, biochemistry, hematology, microbiology and related new disciplines.

This Society was created in order to promote science and improve knowledge, guidelines, technical and medical innovations, standardization, quality, patient safety, theoretical and practical training in laboratory medicine.

The goal of the RBSLM is to represent the profession as a single scientific reference group and as a group of experts with regard to the Belgian institute of Health (SCIENSANO), clinical laboratories, the medical-diagnostic and pharmaceutical sector and associations of general practitioners and medical specialists.

RBSLM has a role of representing the Belgian clinical chemistry and laboratory medicine within the International Federation of Clinical Chemistry and Laboratory Medicine and European Federation of Laboratory Medicine.

The RBSLM proposes and disseminates cutting-edge knowledge in this area via scientific conferences and educational initiatives, websites, social media and internet forums, subscriptions to professional scientific journals.

RBSLM tries to partner with clinical societies to trigger exchanges between physicians and specialists in laboratory Medicine through joint meeting. The partnerships were with the Belgian Lipid Club in 2017, the Belgian Thyroid Club in 2018, the Belgian Pediatric Society in 2019 and the Belgian Society for

Gerontology and Geriatrics in 2020. The 2021 edition was a hybrid meeting focusing on “women’s health: from puberty to menopause”. (photo 1)

RBSLM with its partners Humacom also developed a very efficient virtual platform. (photo 2)

RBSLM also officially publishes scientific papers and practical guidelines in the journal Acta Clinica Belgica, and we are active in international working groups of IFCC and EFLM and the editorial boards of these Societies’ official journals Clin Chim Acta and Clin Chem Lab Med

Prof. Etienne Cavalier (photo 3) is driving the Society as President, with help among other things by Prof. Pieter Vermeersch as Past President, Prof. Hugo Neels as Treasurer, Dr. Matthijs Oyaert as Secretary, Prof. Michel Langlois as EFLM representative and Prof. Joris Delanghe as IFCC representative.

Greek Society of Clinical Chemistry - Clinical Biochemistry (GSCC-CB)



*by Dr. Alexander Haliassos, MD, PhD, EurSpLM
President of GSCC-CB*

*Evgenia Konsta, MSc, PhD, EurSpLM
General Secretary of GSCC-CB*

We would like to thank Dr. Katherina Psarra, Chair eNews WG for inviting us to write a summary of our activities based on the following questions:

➤ *What is the name of your society?*

Greek Society of Clinical Chemistry – Clinical Biochemistry (GSCC-CB, www.eekx-kb.gr/index_en.html) is member of the international Federations IFCC and EFLM and collaborates very actively with universities and other Scientific Societies.

➤ *How many members?*

The society members are now more than 450 including clinical chemists, clinical biochemists, MDs, pharmacists and biologists working in public or private clinical chemistry laboratories. The executive board has six members and Dr. Alexander Haliassos is the president.

➤ *When was it founded?*

The GSCC-CB was founded in 1987 and has two main activities: continuous education of clinical laboratory professionals and clinical laboratory quality assurance.

Regarding continuous education for Greek laboratory professionals, the GSCC-CB organizes a national congress annually with more than 600 delegates including many students. In addition, the education committee organizes 1–2-day seminars on a single topic once or twice a year. The themes of these seminars vary, *e.g.* laboratory and infectious diseases, metabolic diseases or psychiatric diseases. During the pandemic the seminars continued to be organized as webinars.

The GSCC-CB collaborates very actively with universities by providing an educational program for undergraduate and/or postgraduate students for free. The students attend seven 2 hours lessons where they also have the possibility to operate some laboratory equipment. This way the GSCC-CB increases knowledge of clinical chemistry laboratories among the students and consequently promotes clinical laboratories as attractive future working places. About 110 students per year attend these seminars.

Regarding clinical laboratory quality assurance, since 1994, ESEAP (www.eseap.gr) offers proficiency testing schemes for clinical laboratories in Greece. The ESEAP is a nonprofit organization and operates under the auspices of the GSCC-CB, which is its major shareholder. In 2008 it obtained the ISO 9007 certification and in 2012 it has been accredited, by the Greek accreditation body ESYD, according to the ISO/IEC 17043:2010 standard. The proficiency testing programs include clinical chemistry, HbA1c, cardiac damage markers, therapeutic drugs monitoring, coagulation factors, thyroid hormones, reproduction hormones and anemia markers, tumor markers, specific proteins, immunology and autoimmunity, viral markers and, in cooperation with the DEQAS UK, vitamin D.

- ***Describe one or two of the society accomplishments for 2021 and what you are expecting for 2022. Perhaps attach a photo, or a picture.***

As mentioned before, in 2021, and due to COVID-19, several activities transitioned to digital or internet-based conferences, webinars, and workshops. For this purpose, the education committee organizes 1-2 hours webinars for the last 2 years for free in order to increase knowledge of clinical chemistry.

In 2022, we decided to co-organize our National Congress with the BCLF (Balkan Clinical Laboratory Federation) and a specialized conference on Laboratory Medicine for Mobile Societies along with AFCB (Arab Federation for Clinical Biology) and EFLM (European Federation for Laboratory Medicine) at fall in Heraklion, Creta. Nevertheless, we hope that in 2022 laboratory medicine keeps playing a key role in the management of laboratory services at the healthcare system, providing reliable results and information for the medical diagnosis.

- ***Write in your language and letters the phrase:
“Laboratory medicine is very important for healthcare system.”***

“Η εργαστηριακή ιατρική είναι πολύ σημαντική για το σύστημα υγείας”



CONTRIBUTE TO THE IFCC eNEWS

Update on the *in vitro* Diagnostic Medical Devices Regulation

by Prof. Damien Gruson

IFCC Emerging Technologies Division Executive Committee Member

Service de Biochimie Médicale

Département des Laboratoires cliniques

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The *in vitro* Diagnostic Medical Devices Regulation (EU) 2017/746 (IVDR) establishes a new regulatory framework for *in vitro* diagnostic medical devices. The IVDR will replace the current Directive 98/79/EC on *in vitro* diagnostic medical devices from 26 May 2022 and introduce substantial changes in the sector.

The objective of the new regulation is to ensure a high level of protection of public health, patients and users and the smooth functioning of the European internal market taking into account the high number of small and medium-sized enterprises active in the sector of IVD.

One of the most important changes with the new IVDR is to increase the involvement of independent conformity assessment bodies ('notified bodies'). Currently, under Directive 98/79/EC, only a relatively small number of high-risk devices (about 8% of all *in vitro* diagnostics on the market) is subject to notified body control. Under the IVDR, about 80% of IVD devices will be under the control of notified bodies.

The IVDR introduces also a set of common rules for in-house devices (manufactured and used in the same health institution). The new rules include requirements for justification for the use of these devices and rules to ensure their safety and performance, such as an appropriate quality management system.



Because of the unprecedented challenges of the COVID-19 pandemic and considering the related lack of resources as well as a serious shortage of notified body capacity, the European Commission has proposed a progressive roll-out of the new IVDR to prevent disruption in the supply of these essential healthcare products.

The proposal does not change any requirements of the IVDR but only changes the transitional provisions to allow the Regulation's progressive rollout. The length of the proposed transition periods depends on the type of device: higher risk devices such as HIV or hepatitis tests (class D) and certain influenza tests (class C), have a transition period until May 2025 and 2026, whilst lower risk ones such as class B and A sterile devices, will have a transition period until May 2027.

Source: www.ec.europa.eu.

NEWS FROM REGIONAL FEDERATIONS AND MEMBER SOCIETIES



32nd Symposium of the Croatian Society of Medical Biochemistry and Laboratory Medicine

by *Petra Filipi*

*University Hospital Centre Split
Member of the Organizing Committee*

Croatian Society of Medical Biochemistry and Laboratory Medicine (CSMBLM), in collaboration with University Hospital Centre Split, organized an annual Symposium. Title was covering currently the most interesting topic - laboratory medicine in pandemic of coronavirus disease. This year, for the second time, due to ongoing pandemic and restrictions, Symposium was virtual. The Symposium was attended by 163 participants from Croatia.

There were eight lectures: introduction: 'COVID-19 is much more than an acute respiratory disease', point-of-care testing, changes in the morphology of peripheral blood cells and in iron metabolism, why interleukin 6 can be used as prognostic factor in the severity of the disease and role of the growth differentiation factor 15 in hospitalized patients. At the end of the Symposium, case report of an ICU-patient with Guillain-Barre syndrome after COVID-19 disease, was reported and a lecture about possible influence of the disease on fertility and assisted reproduction was presented.

The abstracts will be available in the next issue of [Biochemia Medica Journal](#).

The Organizing Committee would like to thank all the participants for interest in the Symposium and all the lecturers who contributed to its success.

The screenshot shows the program for the 32nd Symposium of HDMBLM and KBC Split. The title is 'LABORATORIJSKA MEDICINA U PANDEMIJI COVID-19'. The program is divided into two parts (1.dio and 2.dio) with various lectures and a discussion (RASPRAVA) and a break (PAUZA). The lecturers listed include prof. prim. dr. sc. Ivo Ivić, dr. Žana Rubić, Branka Krešić, doc. dr. sc. Leida Tandara, Petra Filipi, doc. dr. sc. Daniela Šupe-Domić, doc. prim. dr. sc. Sanda Stojanović Stipić, and doc. dr. sc. Marijan Tandara.

Time	Topic	Lecturer
9:35 – 9:55	COVID-19 je puno više od akutne respiratorne bolesti	prof. prim. dr. sc. Ivo Ivić, spec. infektologije (Klinika za infektologiju, KBC Split)
9:55 – 10:15	Point-of-care testovi za otkrivanje SARS-CoV-2 infekcije	dr. Žana Rubić, spec. med. mikrobiologije i parazitologije (Klinički zavod za mikrobiologiju i parazitologiju, KBC Split)
10:15 – 10:35	Uzrokuje li COVID-19 promjene u morfologiji stanica periferne krvi?	Branka Krešić, spec. med. biokemije i lab. medicine (Zavod za medicinsko laboratorijsku dijagnostiku, KBC Split)
10:35 – 10:55	Promjene metabolizma željeza u infekciji SARS-CoV-2: nutritivni imunitet ili nešto više?	doc. dr. sc. Leida Tandara, spec. med. biokemije (Zavod za medicinsko laboratorijsku dijagnostiku, KBC Split)
10:55 – 11:05	RASPRAVA	
11:05 – 11:25	PAUZA	
11:25 – 11:45	Interleukin 6 kao prognostički faktor težine tijekom bolesti COVID-19	Petra Filipi, spec. med. biokemije i lab. medicine (Zavod za medicinsko laboratorijsku dijagnostiku, KBC Split)
11:45 – 12:05	Faktor diferencijacije rasta 15 u bolesnika hospitaliziranih zbog bolesti COVID-19	doc. dr. sc. Daniela Šupe-Domić, spec. med. biokemije (Zavod za medicinsko laboratorijsku dijagnostiku, KBC Split)
12:05 – 12:25	Guillain-Barreov sindrom nakon COVIDA-19: 61 dan borbe u JIL-u	doc. prim. dr. sc. Sanda Stojanović Stipić, spec. anesteziologije, reanimatologije i intenzivne medicine (Klinika za anesteziologiju, reanimatologiju i intenzivno liječenje, KBC Split)
12:25 – 12:45	Mogući utjecaj COVID – 19 na plodnost i potpomognutu oplodnju	doc. dr. sc. Marijan Tandara, mag. med. biokemije (Poliklinika "Sparac")
12:45 – 12:55	RASPRAVA	

The Organizing Committee of the Symposium



News from the Japan Society of Clinical Chemistry (JSCC): the 2021 JSCC Academic Award

by Hideo Sakamoto, PhD

International Exchange Committee of JSCC



Yutaka Suehiro, MD, PhD

The Academic Award of the Japan Society of Clinical Chemistry (JSCC) is given to persons who have made outstanding academic research in clinical chemistry. In 2021, Yutaka Suehiro, MD, PhD and Kazuhito Gotoh MD, PhD were winners of the Academic Award. At the 61th Annual Meeting of JSCC in Fukuoka, Japan from November 5-7, 2021, award winners Dr. Suehiro and Dr. Gotoh were congratulated by Dr. Takashi Miida, President of JSCC for their outstanding work in clinical chemistry.

In this issue, we would like to introduce one of the winners of Academic Award to distribute his outstanding work.

Yutaka Suehiro, MD, PhD (Department of Oncology & Laboratory Medicine, Yamaguchi University Graduate School of Medicine) is the winner of the 2021 Academic Award, entitled with “Development of a highly sensitive methylation assay”.

The main approach to colorectal cancer (CRC) screening throughout the world is the fecal immunochemical test for haemoglobin (FIT). Although the sensitivity of the FIT for the diagnosis of colorectal neoplasia is 65.8%–73.8% for colorectal cancer, it decreases to 23.8%–27.1% for the detection of advanced adenoma. To improve the sensitivity of FIT for the detection of advanced adenoma, more sensitive and specific screening methods are required. One solution is faecal DNA tests. As Yutaka Suehiro found TWIST1 methylation is specific to colorectal neoplasia, he

thought detection of TWIST1 methylation from samples might be useful for colorectal neoplasia screening. However, because the content of human DNA in faeces is very small, it was very difficult to detect TWIST1 methylation by conventional bisulphite-based methylation assays. Therefore, he developed a new methylation assay without bisulphite treatment, the combined restriction digital PCR (CORD) assay and evaluated its sensitivity and specificity in combination with and without the FIT for colorectal neoplasia detection from faeces samples.

For the CORD assay, faecal DNA was treated with three methylation-sensitive restriction enzymes and an exonuclease, followed by measurement of TWIST1 methylation level by droplet digital PCR. Although the FIT alone had a sensitivity of 32.3% (41/127) for advanced adenoma, the combination of FIT and CORD assay improved the sensitivity to 68.5% (87/127). For morphological subtypes of advanced adenoma, the sensitivity of FIT was only 28.2% (20/71) for polypoid type and 16.1% (5/31) for nonpolypoid type, whereas the combination test increased the sensitivities to 64.8% (46/71) and 71.0% (22/31), respectively.

The combination of the faecal DNA test with FIT seemed to be useful to detect colorectal neoplasia and, especially, advanced adenoma of the nonpolypoid type. He wants that someday the CORD assay is used all over the world to contribute to colorectal neoplasia screening.

News from the Confederación Unificada Bioquímica de la República Argentina (CUBRA)



Confederación Unificada Bioquímica de la República Argentina

PERSONERÍA JURÍDICA RESOLUCIÓN I.G.J. 358467 | Representaciones Nacionales:

IFCC

International Federation of Clinical Chemistry and Laboratory Medicine

COLABIOCLI

Confederación Latinoamericana de Bioquímica Clínica

The Confederación Unificada Bioquímica de la República Argentina, CUBRA, is happy to announce the new Executive Committee for the term of 2021- 2023:

EXECUTIVE COMMITTEE

President: Dr. María Cecilia López (Chaco)

Vicepresident: Dr. Gustavo F. Videla (Santiago del Estero)

Secretary: Dr. Javier I. Baabdaty (San Juan)

Prosecutor: Dr. Nicolás Castiglione (Buenos Aires)

Treasury: Dr. Natalia A. Russo (Chubut)

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Revisor de Cuentas Suplente 1º: Dr. Fernando D. L. Barale (Córdoba)

Revisor de Cuentas Suplente 2º: Dr. Alejandro F. Sturniolo (San Luis)

Revisor de Cuentas Suplente 3º: Dr. Guillermo Liboa (La Pampa)



Dr. María Cecilia López
CUBRA President

COLABIOCLI – IFCC Regional Congress: Final Announcement

March 30th to April 2nd, 2022



Organized by the Mexican Association of Clinical Laboratory Sciences (**CMCLabC**),

And the Latin American Confederation of Clinical Biochemistry (**COLABIOCLI**)

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News from the Spanish Society of Laboratory Medicine (SEQC^{ML})

Chronic kidney disease and the importance of laboratory tests

SEQC^{ML}

Between November 7 and 13, 2021, the XV edition of the National Clinical Laboratory Congress (LabClin 2021) was held virtually, organized by the three national clinical laboratory societies, the Spanish Society of Laboratory Medicine (SEQC^{ML}), the Spanish Association of Medical Biopathology-Laboratory Medicine (AEBM-ML), and the Spanish Clinical Laboratory Association (AEFA).

One of the topics discussed at this congress was the approach to chronic kidney disease (CKD), in which clinical laboratory professionals play an essential role, in the opinion of Dr. Sílvia Gràcia, specialist in Clinical Biochemistry, member of the SEQC^{ML} and associate of the Laboratory Service of the Puigvert Foundation (Barcelona). She considers CKD to be a silent disease with very few symptoms and for which the result of laboratory tests is crucial for the detection, prognosis, and follow-up of patients.

Dr. Pastora Rodríguez, president of the organizing committee of LabClin 2021, highlights the broad representation in the Congress of speakers from all specialties of Laboratory Medicine, but also from many other clinical specialties such as Nephrology, Gynecology, Endocrinology, Intensive Medicine, Oncology, Pediatrics, and Allergy. Clinical laboratories are in constant contact with other services for innovation, participation in clinical care, and clinical decisions.

CKD is the progressive and irreversible deterioration of kidney function and is defined by the presence, over a period of more than three months, of alterations in kidney structure or function with health consequences, regardless of the original cause. This disease affects 1 in 7 adults in Spain (15.1% of the population), a higher prevalence than that estimated in previous studies in our country and similar to that observed in other countries such as Great Britain or the United States. These results support the importance of the health problem posed by CKD, according to Dr. Gràcia.

The specialist in Clinical Biochemistry warns us that if it is not diagnosed and treated in time, the most important consequence of CKD is the increase, both very significant and from the initial stages, in morbidity and mortality, mainly of cardiovascular cause, both in at-risk populations and in the general population. On the other hand, replacement treatment (dialysis or kidney transplantation), although affecting only 1% of patients, entails a marked reduction in life expectancy and constitutes one of the most expensive treatments for chronic diseases.

Regarding the population most at risk of developing CKD, Dr. Gràcia specifies that they are patients with diabetes or high blood pressure. Other susceptible populations are individuals with a family history, glomerulonephritis, pyelonephritis, lithiasis, and autoimmune diseases, but the range is very wide.

LABORATORY TESTS FOR CHRONIC KIDNEY DISEASE

Dr. Gràcia notes that the laboratory tests performed to detect CKD are fundamentally two: the serum creatinine measurement accompanied by an equation for estimating glomerular filtration (currently the CKD-EPI-2009 equation), and the albumin / creatinine ratio in the first morning urine. These tests make it possible to classify patients into prognostic categories, and determine guidelines for action and criteria for referral to Nephrology.

The specialist from the Puigvert Foundation delves into this, explaining that laboratories are a fundamental pillar in the diagnosis of CKD by incorporating glomerular filtration estimated by means of an equation into laboratory reports. However, the analytical quality of the creatinine measurement methods must be improved, as the results of the SEQC^{ML} Quality Control Program with switchable material have been reflecting for a long time. This improvement would entail the replacement of Jaffé methods by enzymatic methods, which are the only ones that meet quality specifications based on biological variability criteria.

Regarding the involvement of the SEQC^{ML} in the study of renal function, Dr. Gràcia affirms that the Society has actively participated in the elaboration and updating of consensus documents and recommendations for the evaluation of renal function with other scientific societies, such as the Spanish Society of Nephrology (SEN), the Spanish Association of Pediatric Nephrology (AENP), and the AIDS Study Group (GeSIDA). Recently, it has also participated in updating the SEN Consensus Document on CKD together with eight other scientific societies.

Spanish Society of Laboratory Medicine (SEQC^{ML})

The Spanish Society of Laboratory Medicine (SEQC^{ML}) —founded in 1976— is an active member of the international and European Federations of Clinical Laboratory, IFCC and EFLM. It currently encompasses almost 3,000 professionals and its main objective is to bring together all interested scientists in the Clinical Laboratory field, promote the dissemination of scientific and technical publications, organize national and international meetings, courses and congresses, and cooperate with other scientific societies. Likewise, the Society wishes to contribute to studying and recommending standardized methods and establishing guidelines and recommendations for training in the field of Laboratory Medicine.

For more information: www.seqc.es.



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Strengthening the frontline: how the medical lab professionals of Kosovo cope with the COVID pandemic

by Dr. Gramos Begolli, MD

Specialist of Clinical Biochemistry,

University Clinical Center of Kosovo-Pristina (XK)

National Representative of Kosovo Association of Clinical Chemistry (KACC)

Kosovo IFCC National Representative

~ Presented at the JIB round table (64th Edition) 22/11/21,

hosted by Bernard Gouget, IFCC TF Hlstory and François Blanchecotte, President JIB 2021 ~



Dr. Gramos Begolli, MD

The swift and massive shock of the coronavirus pandemic and shutdown measures to contain it have plunged the world into a severe contraction. The pandemic is taking a heavy human and economic toll in the small and poor countries. Kosovo deeply felt these consequences and faced the challenge of ensuring that its health services are affordable, accessible, equitable, and of high quality as much as possible.

Health services in Kosovo are provided through a network of health institutions organized into three levels: primary (PHC), secondary (SHC) and tertiary (THC). All three levels of healthcare are provided through the institutions established under the Law on Health, within which a hospital, outpatient, diagnostic, therapeutic, rehabilitation services, emergency transportation, dental care and regional public health services were included. The system of healthcare in Kosovo is established under the principle that it shall be accessible to all citizens from all communities.

Throughout the country, there are seven regional public hospitals, and one University Hospital located in Pristina. Numerous private clinics and hospitals coexist with public health institutions in Kosovo, providing a spectrum of services from general to specialized. Private health clinics are still a popular choice for persons seeking medical treatment in Kosovo, despite being more expensive than public health centers. Those who can afford it consider that going to a private hospital or clinic over a public institution provide more streamline services.

In the covid-19 era, the worldwide nations and Kosovo relied on well-established public health concepts and procedures such as early monitoring, testing, contact tracing, quarantine, and clinical management and smart vaccination strategy. The COVID19 crisis demonstrated the importance of placing the primary health care and the medical laboratory at the core of health system.

The efforts of doctors, medical staffs, logistic operators, and all other individuals produced effective and humanitarian results. Multi-disciplinary teams were organized with innovative roles for health professionals, integrated within community health services, and working with well-designed incentive. They helped to deliver a successful health system response to tackle the situation. Mobile technologies have been widely used. Clinical Biochemists in Kosovo demonstrated their great organizational adaptability and capacity to fulfill emergency health requirements. After a long wait the Kosovo started vaccinating healthcare workers at the end of March 2021.

Article continued on next page

As of 20 December 2021, based on the latest data from our National Institute of Public Health, a total of 1.656.207 doses of vaccine have been administered. 777.730 (43.0 %) persons have been vaccinated with both doses and 874.600 (49.0 %) with the first dose. Application of third dose has been started to be administered from December 2021.

By December 21 2021, in Kosovo with population over 1.7 million, from 3 January 2020 to 20 December 2021, there have been 161 222 confirmed cases of COVID-19 with 2 979 deaths, reported to WHO. Worst period with COVID 19 in Kosovo was during August this year, with record 36.621 new infected persons and September with 451 deaths per month caused from coronavirus. During November the situation was much better, and the number of infected persons and deaths fell and average number of infected per week was 9 persons. Kosovo benefits from a relatively young population and a reasonably high rate of immunization. On November 2, Kosovo approved vaccination from the age of 12. Even if Kosovo is in mild period, this lull should be used to prepare for the possibilities of dealing with other waves of new variants in the coming weeks.

The Kosovo Association of Clinical Chemists (KACC) was not directly approached to participate in political decision-making about the pandemic and in the elaboration of the national guidelines which are mainly in accordance with the World Health Organization (WHO) guidelines. Nevertheless, as IFCC/EFLM full member, the KACC benefited of the information produced by the IFCC Task Force on COVID. The KACC is also interconnected with international organizations. Since the beginning of the outbreak, laboratories have been crucial to the adequate



From the left: Dr. Gramos Begolli, Prof. Zana Baruti, Dr. Shemsi Veseli, Prof. Valdete Topciu, Dr. Sheremet Thaci

organization of care. We reorganized our work and tasks in order to support other clinical units, playing a pivotal role ranging from diagnosis of infection by the identification of the virus in airway specimens until the provision of evidence for adequate follow-up, prognosis, and decision making.

After more than 18 months of the emergence of the Covid-19 pandemic, the expertise of the specialists of lab medicine is recognized and the laboratory was acknowledged as a reliable location for conducting diagnostic testing. However, emergency management still needs improvement. The crisis has accelerated the use of modern techniques for healthcare purposes as well as a growth of using digital technology in the field of clinical chemistry. However, the majority of the work in Kosovo laboratories is still performed using conventional methods as a large workforce is comfortable with traditional methods.


The profession has a high chance of evolving to a great future in the upcoming few years. Laboratory medicine is a fertile soil for disruptive innovations because this medical specialty is heavily reliant on technology. Disruptive innovations have resulted in a revolution of our diagnostic ability and will take laboratory medicine to the next level of patient care.

Kosovo clearly still has a great deal of work to do in terms of bettering both its healthcare system, the network of medical labs and the living standards of its citizens. Kosovars have demonstrated their capacity for improvement repeatedly throughout their history. Kosovo continues to face many challenges in its overall development, not the least of which is the COVID-19 pandemic. The country has already come so far, so improvements in health-care in Kosovo seem possible in the decades to come.


On-demand content available: IFCC Live Webinar on 2nd February, 2022 "Neurofilament Light Chain (NfL), Troponin for the Brain: Measurement and Applications in Multiple Sclerosis and other Neurological Conditions"

IFCC Live Webinar


Neurofilament Light Chain (NfL), Troponin for the Brain: Measurement and Applications in Multiple Sclerosis and other neurological conditions




- Moderator
- Blood Neurofilament light chain (NfL), a novel biomarker for neuronal damage: Analytical aspects
- Neurofilament light chain in clinical practice.
- Assessing disease severity and prognosis: Utility of Neurofilament light chain



Prof. Ronald Booth
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Dr. Sharmilee Gnanapavan
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Consultant Neurologist at Barts Health and Princess
Alexandra Hospital NHS Trust and Honorary Senior
Clinical Lecturer in the Department of Neuroscience &
Trauma, Queen Mary University of London



Prof. Mark Freedman
[Canada]
Professor of Neurology, University of
Ottawa, Department of Medicine and the
Ottawa Hospital Research Institute

Date: February 2, 2022
Time: 10 (Eastern Standard), 4pm (Central European), 11pm (Beijing)



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Portugal: citizen's self-discipline, solidarity and unity in the COVID times

by João Faro Viana

*Director, Serviço de Patologia Clínica,
Centro Hospitalar de Lisboa Ocidental, Lisboa
President SPLM, Portugal*

*~ Presented at the JIB round table (64th Edition) 22/11/21,
hosted by Bernard Gouget, IFCC TF History and François Blanchecotte, President JIB 2021, Paris ~*



João Faro Viana

Scientific conferences have been a primary modality for disseminating updated information and presenting results of new research. As a result of COVID-19, this model has been dramatically disrupted. The “Journées de l’Innovation en Biologie 2021”, (JIB 2021 Paris-December 1-2) were organized in a hybrid format due to travel restrictions and unstable sanitary situation. Portugal was invited once again to participate at the second edition of the European/International e-round table organized in virtual presence with colleagues from different part of Europe at large (Belgium, Czech Republic, France, Germany, Greece, Israel, Italy, Kosovo, Portugal, Serbia, Slovenia) and more (Lebanon, Syria and Mexico). The zoom session was held few days before the face-to-face JIB edition at the Palais des Congrès. The interactive virtual European session JIB 2021 focused at the COVID-19’s impact on Health and the role of Lab medicine. The goal was to compare the evolution of the health situations in different European countries in terms of epidemiology, diagnostic strategies and measures taken by health authorities as well as to discuss the role and

capacity of medical biologists to meet public health needs. While the number of COVID 19 cases soar across the continent, these moments of exchange between colleagues and friends were precious especially since most of the events were canceled and the winter months are potentially going to be difficult.

Portugal is located at the Iberian Peninsula in the southwest corner of Europe, next to Spain. its neighbor. Portugal is considered a high-income country. In 2020, its population was 10,31 million people. The Portuguese healthcare system is composed of three co-existing systems: the national health service (Serviço Nacional de Saúde, SNS), the special social program of health insurance for certain professions (subsystems of the state), the private sector based on a voluntary health insurance. Portugal was a country hard-hit during the eurozone crises and has shown during the last decades a great level of commitment towards improving quality and efficiency of its health system while maintaining a universal public system. The goal is to reduce the inequalities and to guarantee a better coordination between primary and secondary care levels. In 2018, the Euro Health Consumer Index ranked the Portuguese healthcare system as the 13th best in Europe.

Portugal became Europe’s coronavirus exception despite an elderly population and a health care system under stress. The country managed better than most to limit the damage caused by the virus. The pandemic erupted

Article continued on next page

in a country with political stability and underfunded health system. The rapid spread of coronavirus disease was a public health challenge. The Portuguese have understood very well that if they want to survive to COVID 19, they must do more than others.

The State of Emergency entered into force on 19 March 2020 and was declared with grounds in the occurrence of a situation of public calamity in Portugal, caused by the COVID-19 virus international pandemic. The Portuguese people have respected the restrictions and politicians have decided to unify in a common struggle for a return to normality. Portugal faced the first phase of the pandemic with exceptionally low casualties. Eight weeks after the first case, its coronavirus mortality rate drifted just above four per cent (Statista 2020). Portugal was internationally praised as an outstanding example, particularly when compared to other South European countries, considering the number of diseases and the fatality rate. Everyone shown great solidarity. Beyond the proactiveness and centralization of policy responses, focused on flattening the epidemic curve to avoid overloading hospitals and to preserve jobs and family income, political parties and the social dynamics were also relevant variables.

In the beginning of February 2020, one month before the first Portuguese case, the Ministry of Health and the National Reference Laboratory, started to organize the Public Laboratory network (mainly Hospital based). In Portugal, the private labs have a contract and are paid by the state. They are performing most of the lab testing for primary care. They very quickly adapted the increasing demand for both testing and sample collection. At the same time, research and academic Labs developed an in-house RT-PCR test and joined the testing force.



The Laboratory response was coordinated by the National Reference Laboratory (INSA) in cooperation with the private Labs for Primary Care and with the public Hospital Labs for Secondary Care and Public Health necessities (nursing homes, schools, etc.). Some local or regional networks were organized also to coordinate efforts.

The Medical Laboratories were rapidly equipped with molecular Lab testing automation despite difficulties to purchase reagents and some equipment. The molecular testing staff was reinforced to ensure 24/24h and 7/7d. The programmed activity was temporally stopped. New facilities were organized, as for example: new oncology dedicated and isolated pathways, tents for SARS-CoV-2 collection settings. The samples collection of outpatients and for health professionals were also planned. The results were directly sent to the patients beside clinicians. To cope with the growing demand for tests, technicians from other disciplines joined the “COVID” units, some routine lab sites were closed. Collaborations were immediately established with research laboratories.

In Portugal, there was already in place an electronic automatic reporting system for test results concerning mandatory notification diseases in all the clinical Labs, both public and private called SINAVE (only academic and research Labs were not connected). SARS-CoV2 reporting was quickly added to this system, and this allowed for the results to be sent almost immediately to the national Public Health department (DGS) and to an Internet based platform for the follow-up of patients and the tracing of contacts called Trace-Covid, that is used by clinicians Public Health, Primary Care and Hospital Care clinicians. Results were also sent to patients by SMS and mail (mHealth). This use of digital solutions was very helpful in managing, preventing, and overcoming the further spread of infectious disease outbreaks.

At the end of 2021, Portugal, which was devastated earlier this year by the Delta strain, now has the highest Covid-19 immunization rate in Europe which is the envy of public-health experts worldwide and provides an example of a country grappling with what appears to be an endemic virus. Portugal is bringing back some tight pandemic restrictions, less than two months after scrapping most of them when the goal of vaccinating 88% of the population against COVID-19 was reached.

In Portugal, from January 3rd, 2020 to December 27th, 2021, 1279785 confirmed cases of COVID-19 with 18874 deaths, were reported to WHO. As of 19th December 2021, a total of 19048187 vaccine doses were administered. By now, more than 10 million people are fully vaccinated against the coronavirus, and booster shots are well underway. Portugal has one of the top vaccinations rates but is not taking chances with Omicron. Scientists are watching how Portugal and other highly vaccinated countries fight against the coronavirus’ Omicron new variant. Nevertheless, Omicron has become the dominant strain in Portugal where over 1200 daily COVID 19 cases were registered on Christmas day. At the same time, Portugal has made work from home compulsory, closed bars and discos, and made face masks mandatory indoors. New variants will appear if much of the world is unvaccinated. We are not safe unless everyone is safe, it’s not a cliché. It’s reality, and it’s also a warning.

The pandemic context demonstrated that the Medical Laboratory is playing a critical role in the detection, management and disease surveillance in the fight against the COVID 19 as well as a component very important in public health and vital in public health emergency. We should reward the enormous self-discipline that the Portuguese have shown demonstrating unity in the fight for the good of the country. The medical laboratories are playing a critical role in the detection, management, disease surveillance and control in provision of accurate health data for national planning and decision making and COVID-19 is not an exception. The pandemic demonstrated that the specialists in Laboratory medicine are at the front line and that lab medicine is a pillar of the foundation of innovation in medicine.

An IFCC world awareness day dedicated to the profession will bring a better visibility of our unique role in COVID-19 and in health in general.



Regulation of the medical science workforce in Malawi

by Elias Chipofya

IFCC National Representative

Bright Mpote and Anthali Munthali

Members, Malawi Association of Medical Laboratory Scientists (MAMLS)



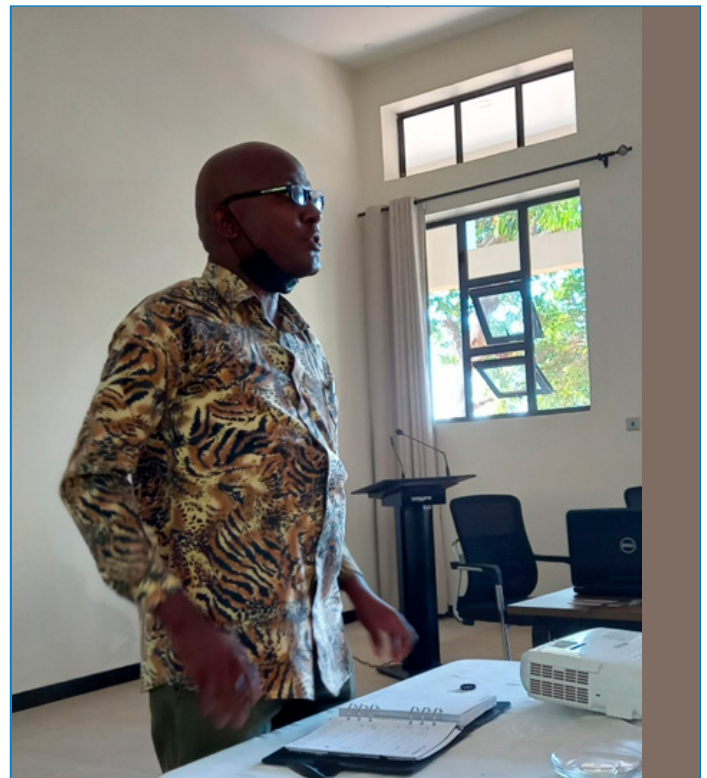
The Malawi Association of Medical Laboratory Scientists (MAMLS) and the Ministry of Health (MoH), with funding from the Clinton Health Access Initiative (CHAI), organized a two-day workshop (16th to 17th December 2021) with the aim of developing and reviewing the medical laboratory professional regulatory framework in the country. In attendance were representatives from MAMLS; MoH; the Medical Council of Malawi (MCM); the Ministry of Labour of Malawi; the pharmacy and medicine regulatory authority; as well as academia.

The meeting was officially opened by Mrs. Theresa Msikuwanga (Assistant Deputy Director for MoH-HTSS-diagnostics) and it was chaired by Mr. Jonathan Majamanda (MAMLS Vice President).

Currently, the professional regulatory body (MCM) only regulates medical laboratory assistants, medical laboratory technicians and medical laboratory technologists. Medical laboratory scientists are unregulated.



Mrs. Msikuwanga delivering an opening note



Mr. Joseph Bitilinyu Bango, the deputy director MoH HTSS-D making closing remarks

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Recently, the MCM has been receptive to the importance of regulation of other health professions and has supported the proposed review of the Medical Practitioners and Dentist Act, 1987. This support is an essential step in the regulation process for medical laboratory scientists in Malawi.

The MCM is mandated to review the curricula of all medical training programmes including those for medical laboratories.

The MCM is also mandated to ensure that continuing medical education (CME) or continuing professional development (CPD) is available to all practitioners. Currently, CME or CPD is not expected in all workplaces, and in those with little resources, it may neither be expected nor encouraged. There is no requirement for external verification and no professional or statutory demand for accreditation of qualifications or competencies.

MAMLS believes that medical laboratory professionals have an obligation to act professionally and ethically throughout their career. Therefore, participants explored the possibilities of mandatory CPD and competency assessment for re-registration to prevent compromise of healthcare services delivery in Malawi.

The meeting was an important step towards improved regulation of the medical science workforce.



Attendants posed for a group photo.

Note: Mr. Jonathan Majamanda, (MAMLS vice president), standing front row third from left.

Mr. Elias Chipofya (IFCC country representative), standing front row fourth from left.

Mrs. Theresa Msikwanga (Assistant deputy director MoH HTSS-D), standing second row seventh from left.

Safeguarding migrants' health by common efforts



by Bernard Gouget, Chair IFCC-TF History (FR), SFBC Int. Committee

Myrna Germanos-Haddad, President SDBL (LB)

Alexander Haliassos, President GSCC-CB, IFCC Treasurer (GR)

Marco Ciotti, University Tor Vergata (IT)

Sergio Bernardini, Chair IFCC ETD and President WorldLab Roma 2023 (IT)

François Blanchecotte, President JIB 2021, Paris (FR)

The United Nations High Commissioner for Refugees (UNHCR) estimates there are many millions of stateless people globally. Refugees and migrants are confronted with several challenges to access health care. They remain among the most vulnerable members of society. They are often confronting language and cultural differences, institutional discrimination and restricted use of health services, which shape their interactions with the host country's health system and health workforce. The presence of migrants as a phenomenon of globalization forces the various world health systems to face up to the problem of inequality penalizing this population. Access to health services is a critical issue.

The impact of a hazardous migration journey can expose individuals in addition of non-communicable disease to significantly greater risks of contracting infectious diseases through issues such as overcrowding, poor living conditions and inadequate hygiene services. The COVID-19 pandemic has posed additional challenges both in terms of increased risk of infection and death experienced by refugees and migrants. It highlighted the existing inequalities in the access and use of health services. Refugees and migrants have also suffered the negative economic impact of lockdown and travel restrictions.

In advance of the United Nations International Migrants day (December 18, 2021) devoted to "Harnessing the potential of Human Mobility", an international session was organized on the occasion of the Journées Internationales de Biologie (JIB 2021) in Paris (FR), to

discuss situation in Lebanon and illustrate initiatives in Italy and Greece to identify key findings, health and medical laboratory needs and responses regarding the health of refugees and migrants in different contexts and clinical settings.

For nearly two years now, Lebanon has been assailed by compounded crises, specifically an economic crisis, followed by COVID-19 and, finally the explosion at the Port of Beirut on August 4, 2020. These add to Lebanon's long-term structural vulnerabilities, which include substandard infrastructure; a dysfunctional electricity sector, water supply shortages, and inadequate management of solid waste and wastewater as well as inefficient management of public finances and deterioration of health and social indicators.

Lebanon has a current population of 6,779,751 as of Friday, December 31, 2021, based on Worldometer's compilation of the latest United Nations data. It has become the country with the highest concentration of refugees per capita worldwide with around 1.5 million Syrian refugees. More than half of them are women and children who are in urgent need for healthcare service. Many refugees have been settled in the poorest and most underserved areas in Lebanon creating social tensions and competition for access to basic healthcare services. The Lebanese Healthcare system is suffering from limited capacities characterized by insufficient staff, medications and equipment. High rates of non-communicable diseases (NCD) as hypertension, chronic lung diseases, diabetes, cancer,

arthritis, are reported among adults, cardio-vascular diseases (CVDs) being the major cause of deaths.

Specialists in laboratory medicine have taken steps to provide primary health care services through primary health care centers and mobile units, but due to limited funding (and sometimes lack of reagents or electricity), doctors and laboratory professionals are not always able to provide comprehensive coverage especially for chronic illnesses, like kidney failure, except for life-threatening cases. The refugees are suffering from an immense burden of cancer and, it is more difficult to diagnose through primary care centers alone. The access to medication for NCD is also critical due to financial constraint. Lebanon is making remarkable efforts to respond to the healthcare needs of the refugee's population on its territories. Providing high-quality lab medicine tests and health services remains challenging in light of the high burden of COVID-19 and communicable and non-communicable diseases that requires adequate laboratory diagnosis and costly medications. Unfortunately, they are suffering from funding shortfalls. Continuity of care is also critical, but laboratories and service providers often do not have a full picture of their patient's health history.

Greece is hosting many of the third country migrants in Europe. At the same time, it deals with the pandemic and the impacts of years of austerity. Asylum seekers and those stranded in Greece have problems accessing health services in remote parts of the country (islands), and COVID-19 is making the situation worse. A recent law saw the distribution of a *Temporary Healthcare and Social Insurance Number for Alien Citizens* (PAAYPA, Law 4636, O.G. 55.2/01.11.2019) which has reduced these difficulties in accessing health care services. Greece has seen a dramatic drop in arrivals since 2015, when it was at the center of a refugee crisis – with more 800 000 people coming from the Aegean Sea. Its proximity to Turkey still makes it a popular route for those in Africa, Asia and the Middle East fleeing war, poverty and persecution. Beginning of December, Athens' government announced that asylum procedures for first-time applicants would only be permitted in state-run reception centers. Migrants living in open hosting centers in Greece showed that the prevalence of HIV, tuberculosis and non-communicable diseases is higher among the non-European

migrant population. However, it is difficult to compare across countries, as studies focused on specific health conditions and ethnic groups.

Migrant and refugee children present distinct clinical problems and certain laboratory abnormalities. Some of these health issues differ according to their migration status, age and geographic area of origin. A Greek study on child migrants by Ioanna D. Pavlopoulou demonstrated that overall, 79% children presented unknown vaccination status, and 21% dental issues. Latent Tuberculosis Infections (LTBI) were diagnosed. Anaemia, low serum ferritin, eosinophilia, and protective antibodies were also diagnosed. Children from Europe or Africa presented decreased probability of elevated blood lead levels (EBLLs) compared to those from Asia. These findings provided evidence to assist the optimal approach of this vulnerable young population.

Removing the need for Social Insurance Number would encourage testing for COVID-19 among migrants and refugees in Greece. This in turn would contribute to controlling the pandemic in the country. Contact tracing among migrants and refugees should be done without them risking being prosecuted for any legal matters connected to their stay in the host country. This will encourage people testing positive to Covid-19 to step forward and make their close contacts known.

The Mediterranean Sea or Balkan route are still the principal corridors for migrants trying to enter the European Union and, Italy is in effect its front door. Hundreds of thousands of people have attempted this risky maritime route, often paying a deadly toll. In Italy, these vulnerable people are hosted in camps or shelters, often overcrowded, where they are at risk of acquiring infections by transmissible pathogens such as *mycobacterium tuberculosis* or SARS-CoV2 responsible for the current COVID-19 pandemic. Therefore, it is important to monitor their health conditions upon arrival.

The lack of clinics and laboratories inside the camps makes this task not easy. Point-of-Care Testing (POCT) could be a valid alternative to the laboratory hospital-based testing. Currently validated POC assays are reliable, sensitive and specific and can run on-demand. They do not require well trained and skilled personnel, use unprocessed samples, avoid the possible errors

linked to the pre-analytical phase, and deliver results in real-time (from 90 min to < 60 min).

Several studies showed the high level of agreement between hospital-based assays, designed for batch testing of multiple specimens within a run, and POC assays, designed for the detection of transmissible agents such as HBV, HCV and HIV. These POC assays can be used not only for detecting the presence of the virus but also for monitoring their viral load if antiviral treatment is started. Reliable POC assays are also available for the detection of mycobacterium tuberculosis and its resistance to rifampicin, high-risk human papillomaviruses, *chlamydia trachomatis*, *Neisseria gonorrhoeae* and *trichomonas vaginalis*. Finally, accurate, rapid (<60 min) validated POC assays are available for the diagnosis of SARS-CoV-2 allowing immediate isolation of the infected individual.

POCT allows screening of numerous people in real-time without the need of shipping the samples to centralized hospital-based laboratories. The availability of test results in real-time allows to take immediate clinical decisions without delays with positive effects on the individual health. A limitation of this new

technology is represented by the cost of the assays, which is usually higher than standard laboratory assays. Innovative financing to ensure access to health services for refugees and service delivery models that guarantee access to health care are essential and could be the difference between life and death.

Fighting against the barriers which limit access to healthcare for migrants is a global priority. The current debates regarding the stigmatization of the migrants and refugees' population, which is already precarious, making it more difficult for migrants to access healthcare, and generally, weaken national social cohesion. The health professionals have a vital role in providing people-centered health services and building the resilience of health systems to respond to the health needs of refugees and migrants. It is critical for ensuring that they have access to a variety of medical professionals, who are needed in order to truly provide a multidisciplinary approach, overcoming medical assistance shortage in emergency contexts. It is our responsibility as medical biologists to contribute in order to provide them safe, effective and culturally sensitive health services.



L to R: Francois Blanchecotte (FR), Alexander Haliassos (GR), Bernard Gouget (FR), Myrna Germanos-Haddad (LB) and Christian Haddad (LB)



News from the Society of Medical Biochemists of Serbia (SMBS)

III Congress of the Team of Medical Biochemists (TMB-BPSA)

by *Teodora Tumbas*
TMB-BPSA Coordinator

~ *Female endocrinological disorders of the 21st century* (PCOS, Insulin resistance, Hashimoto's thyroiditis) ~

Team of Medical Biochemists – Belgrade Pharmacy Students' Association - BPSA (TMB-BPSA) organized a congress named "Women endocrine disorders of XXI century" on 6–7 November, at the Faculty of Pharmacy University of Belgrade, Serbia. The TMB Congress was held for the first time in 2017 as the first such congress among students of pharmacy-medical biochemistry at the national level. Since then, congresses are organized biannually.

The aim of the third congress was to provide students and graduates of all biomedical sciences the opportunity to learn more about the current topics of female health, and how to apply the new knowledge in future practice as healthcare professionals. It contained a theoretical and practical part, both held at the Faculty of Pharmacy, respecting all epidemiological measures. We felt that the topic should be given the additional attention because the pathology is widespread nowadays, in general female population as well as among students. The theoretical part of the congress had four sessions on the first day of the congress, with lectures about Preanalytical variations (Specialist of medical biochemistry, Violeta Stanojević), Preparation of a patient for blood and urine sampling for hormone analysis (Dr. Snežana Polovina), Laboratory diagnosis of Hashimoto thyroiditis (Specialist of medical biochemistry Ana Petrović Mucok), Laboratory diagnosis of Insulin resistance and syndrome of polycystic ovaries (Prof. Dr. Aleksandra Zeljković), Panel of laboratory tests for women in reproductive period (Teaching assistant, specialist of medical biochemistry Biljana Glišić). On the second day followed the lectures on Examination of ovarian reserve (Prof. Aleksandra Stefanović), Hashimoto thyroiditis (Prof. Miloš Žarković), Meaning of healthy reproductive system in reproductive period of women (Prof. Đuro Macut), A balanced diet in the treatment of PCOS (mr. ph. med. biochem. Marija Milanović) and Decoding the role of exposome in endocrine health (Prof. Aleksandra Buha Đorđević), with which the theoretical part of the congress was closed. Within the practical part, the students of pharmacy – medical biochemistry had the opportunity to analyze clinical cases in relation to the presented topics. Also, on the first day of the congress the panel discussion "When I grow up, I will be a medical biochemist" was organized, where graduated students explained to the young student colleagues in more detail the journey from graduation to the employment, together with all the experiences and skills the



Closing ceremony, with Society of Medical Biochemists of Serbia giving an Annual award for the best students in front of the Scientific Foundation "Professor Ivan Berkeš".
L-R: mr. ph. med. biochem. Suzana Savić (Awarded), Prof. Dr. Nada Majkić-Singh, Teodora Tumbas, Prof. Dr. Nataša Bogavac Stanojević, mr. ph. Andrea Atanasov (Awarded)

students should acquire during studies. During the closing ceremony the best students were awarded by the Society of Medical Biochemists Serbia (SMBS) and the "Professor Ivan Berkeš Foundation". The awards were presented by Prof. Nada Majkić-Singh, President of the Foundation and Executive Director of the SMBS.

TMB-BPSA is grateful to the Faculty of Pharmacy University of Belgrade, and to all the sponsors and partners who helped in the organization of this project.

For more information on students' projects, you may visit the pages on social networks @bpsa_beograd or the website www.napsr.org.



Day 1. Grand opening with Teodora Tumbas, coordinator of the project giving a welcome speech



Panel discussion "When I grow up, I want to be a medical biochemist".

(L-R) Medical biochemists: Branko Subošić, Lidija Kostadinov, Sanja Erceg, Nebojša Korićanac, Sandra Cvitak, Tamara Gojković



Organizing committee of Third Congress of Team of medical biochemists (TMB-BPSA).

L-R: Tamara Lukić, Anđela Marković, Jelena Pavić, Katarina Krsmanović, Aleksandra Karić, Maša Veljković, Zorica Lučanović, Isidora Crnčević, Teodora Tumbas, Anđela Aćimović, Tamara Stojković, Stanislava Glišović, Sajma Bačevac



Day 2. Auditorium of congress and Professor Dr. Miloš Žarković with his lecture



News from the Association of Medical Biochemistry of India (AMBI)

28th National AMBICON 2021

*by Jasbinder Kaur MD, Hon. Secretary AMBI
Sudhesna Mohapatra MD, DHM (Member WG eNews CPD)*

The Department of Biochemistry, AIIMS, Raipur organized a three day 28th National AMBICON under the aegis of the Association of Medical Biochemists of India, from 2nd – 5th December, 2021, with the theme “**Molecular ingress in the realm of molecular diagnostics**” under the competent leadership of Head, Department of Biochemistry, AIIMS Raipur & Organizing Chair- AMBICON 2021, Prof.(Dr). Eli Mohapatra and Organizing Secretary Dr. Rachita Nanda.

The conference was organized in hybrid mode in which nearly 800, national and international delegates, participated through both physical and online mode. Pre-conference hands on workshops were organized in the department on 2nd December, 2021 on Immunofluorescence Techniques, High-Performance Liquid Performance (HPLC), Cell Culture Technique, Molecular Diagnostics and Flow cytometry.

The mega event was inaugurated on 3rd December, by the **Governor of Chhattisgarh**, who praised the encouraging work done by the office bearers of AMBI (Dr Govindraju -Head Office-AMBI, Dr. Anju Jain-President, Dr. Shanthi Naidu-Secretary Gen., Dr. Jasbinder Kaur-Hon Secretary, Dr. Navjot Kaur-President Elect).

6 orations were awarded to eminent scientists of medical biochemistry for their commendable work Dr. S. Gopalakrishnan Oration Award- Prof. (Dr.) Lal Chandra (MAMC, Delhi), Dr. B. Sadasivudu Oration Award -Prof. (Dr.) Kunzang Chosdol (AIIMS, Delhi), Dr. Akhouri Surya Shekar Sinha Oration Award (Presidential)-Prof. (Dr.) Anju Jain (LHMC, Delhi), Dr. Ajit Singh Saini Oration Award -Prof. (Dr.) Nitin, M. Nagarkar (Director & HOD-ENT, AIIMS, Raipur) and Dr. Chintala Sita Devi Oration Award- Prof. (Dr.) Pramila Mishra. Four fellowships were also awarded to Dr. Pramod Ingale, Dr. Shivani Jaswal, Dr. MK Mandal and Dr. Soma Gupta.

Many eminent international and guest speakers from various institutes of national importance briefed their extensive work on various aspects of molecular biology and diagnostic approach. The International Speakers presented on the following topics: “The Biology Behind PD-1 Checkpoint Blockade” (Prof. Arlene Sharpe, Boston), “Reporting of Serum Calcium: total, albumin adjusted or free?” (Dr. Sutirtha Chakraborty, Norway), “Molecular diagnostics in lymphoproliferative disorders” (Dr. Sunita D. Nasta, Philadelphia), “Immunoassay Interferences; What need to know?” (Dr. Sridevi Devaraj, Texas).

Some of the focused topics of interest included Artificial Intelligence with cardiac biomarkers – a technology driven integration, Nuances of molecular diagnosis of inborn errors of immunity, Tumor Marker Discovery: Candidate gene vs OMICS Approach, Reading and writing the genome with precision Molecular Diagnosis in Inborn Metabolic Disorders – Beta Thalassemia and Spinal Muscular Atrophy, Personal genomes to population genomes for public Health-Experience from India and Genetics of cystic fibrosis – An overview of CFTR.

The program also covered topics related to laboratory and automation, non-communicable diseases, endocrinology and metabolism and a total 35 such lectures were organized. Posters (116) and Oral paper presentations (116) were held where more than 150 postgraduate students participated. Papers were also presented by the faculty. A National Quiz for the Postgraduate Students was conducted. Lectures abstracts were published in the AMBI journal. A cultural extravaganza was put forth which had artistes showcasing the culture of Chhattisgarh that was appreciated by the delegates.



Inauguration of the annual AMBI conference



Presentation to panel members during the AMBI conference

The Australasian Association for Clinical Biochemistry and Laboratory Medicine: Closing the year 2021 and looking ahead with optimism towards a better 2022

*by Dr. Fernando San Gil, MSc PhD MAACB ARCPA
Chief Executive Officer, Australasian Association
for Clinical Biochemistry and Laboratory Medicine*



Throughout 2021 AACB activities have met the challenges presented by COVID. At the core of the AACB's vision is ongoing professional development for its members and the wider pathology community. To this end, AACB Branch meetings were held almost monthly, albeit in virtual format quite often. National activities, such as the annual RCPA-AACB Chemical Pathology Course and the AACB 58th Annual Scientific Conference, were also undeterred by COVID obstacles. Both national meetings were highly successful, and aside from the excellent scientific content, showcased that the AACB and its members could adapt and overcome almost any adversity. The “year that was” commenced on a very positive note, with Dr Samuel Vasikaran receiving the highly prized Geoffrey Kellerman Award (for commitment to education in the profession) in 2021.

Toward the end of 2021, AACB invited members to participate in a satisfaction survey. The results showed overwhelmingly that members had adapted to the “new” normal of webinars and virtual meetings. The survey responses also provided the AACB with valuable information on which to plan future activities and disseminate event information to its members. The format for meetings will undoubtedly evolve over the coming year, but webinars and other virtual activities have been readily embraced by members.

The year 2022 has begun optimistically. Locally, registrations are currently open for the RCPA-AACB Chemical Pathology, to be held virtually in February. This event is a significant learning opportunity for both experienced medical and non-medical professionals and trainees. Planning is also underway for the AACB 59th Annual Scientific Conference to be held in October in Perth, Western Australia (currently being advertised on the AACB [website](#)). This is planned to be a face-to-face meeting with the option of virtual participation for those who cannot travel. The theme of the meeting is very appropriately entitled “From disruption to innovation”. It's a theme that comprehensively captures our experiences over the last 2 years. As always, this is the premier meeting for the Association each year and brings together many colleagues and friends with an interest in Clinical Biochemistry and laboratory medicine. It's hoped that other popular events, such as the Roman travelling lectureship, workshops etc. can recommence this year.



News from the Greek Society of Clinical Chemistry - Clinical Biochemistry (GSCC-CB)

by *Dr. Andriani Grigoratou*
Editor-in-Chief, GSCC-CB eNewsletter

19° ΠΑΝΕΛΛΗΝΙΟ
ΣΥΝΕΔΡΙΟ
ΚΛΙΝΙΚΗΣ ΧΗΜΕΙΑΣ

EEKX-KB
ΕΛΛΗΝΙΚΗ ΕΤΑΙΡΙΑ ΚΛΙΝΙΚΗΣ ΧΗΜΕΙΑΣ
ΚΛΙΝΙΚΗΣ ΒΙΟΧΗΜΕΙΑΣ

IFCC
International Federation
of Clinical Chemistry
and Laboratory Medicine

EFLM
European Federation
of Clinical Chemistry
and Laboratory Medicine

4-6 Νοεμβρίου 2021
HYBRID CONGRESS
ΑΘΗΝΑ, Πολυτεχνικό Μουσείο eekx-kb2021.gr

The 19th National hybrid Congress of Clinical Chemistry - Clinical Biochemistry (GSCC-CB) was held between November 4-6, 2021, in Athens. The Congress was under the auspices of the International Federation of Clinical Chemistry and Laboratory Medicine (IFCC) and the European Federation of Clinical Chemistry and Laboratory Medicine (EFLM).

The first round table on COVID-19 included four lectures “SARS-Co V-2: Pathophysiology and therapies targeting its clinical complications” by Prof. I. Trougkos, National and Kapodistrian University of Athens (NKUA), “Kinetics of anti-Spike-RBD Ig G and SARS-Co V-2 Neutralizing Antibodies (NAbs) Development after Vaccination with the BNT 162 b2 m RNA Covid-19 Vaccine” by Prof. Ev. Terpos, NKUA, “Biomarkers of inflammatory thrombosis and endothelial dysfunction in patients with COVID-19” by Prof. Gr. Gerotziapas, Sorbonne Université, France and “The effect of environmental factors on the epidemiology of COVID- 9 infection” by Prof. Th. Psaltopoulou, NKUA.

During the Opening Ceremony the Congress Keynote Lectures were given by Prof. Giuseppe Lippi, University Hospital of Verona, Secretary of European Federation of Clinical Chemistry and Laboratory Medicine (EFLM) and Chair of IFCC Task Force on COVID-19, on “Laboratory Medicine in the era of COVID-19” and by Prof. Sergio Bernardini, University of Rome “Tor Vergata”, Chair IFCC Emerging Technologies Division Executive Committee (ETD -EC) on “The “*race*” of serological tests during Covid-19 pandemic”.

The next day’s morning round table focused on Liver Disease, including lectures from Prof. George Dalekos, University of Thessaly, about “The contribution of clinical laboratory to the diagnosis and prognosis of autoimmune liver diseases”, Prof. Em. Hadziyannis, NKUA, on “New insights on Viral Hepatitis” and Prof. Maria Tzetis, NKUA, about “Wilson Disease and Other Hereditary Diseases of the Liver”.

The following round table reviewed Liver Biomarkers. Prof. Ioannis Elefsiniotis, NKUA, referred to “Non-alcoholic fatty liver disease: Biomarkers and laboratory diagnosis”, Prof. Evi Lianidou, NKUA, talked on “Precision medicine: The Potential of Liquid Biopsies in Gastrointestinal Cancer”, Prof. Sp. Manolakopoulos, NKUA, talked on “Biomarkers for the diagnosis and prognosis of hepatocellular carcinoma” and Prof. Ev. Kassi, NKUA, continued on “Hepatic Fibrosis Biomarkers”.

The final day initiated with a round table to reinforce our knowledge on “The Gut-Brain Axis”. Prof. George Chrousos, NKUA, UNESCO Chair on Adolescent Health Care, referred to “Stress and the Gut-Brain Axis: Regulation by the Microbiome”, then Prof. Chr. Kanaka-Gantenbein, NKUA, spoke on “The Gut-Brain Axis Connection with Diabetes and Metabolic Syndrome”, then Nic. Nicolaidis, “Aghia Sophia” Children’s Hospital, Athens, spoke on “The Gut-Brain Axis and its Omics” and Prof. Chr. Tsatsanis, University of Crete, continued on “Recent Insights into the Role of the Microbiome in Malignant and Benign Hematologic Diseases”.

The last round table highlighted the “Inflammatory Bowel Diseases”. The topics discussed were “Idiopathic Inflammatory Enteropathies”, by Ger. Mantzaris, Head of Gastroenterology Dept., Evangelismos Hospital, Athens, “The Clinical Significance of Fecal Calprotectin Determination”, by Prof. El. Bairaktari, University of Ioannina, Greece, “New Insights on Celiac Disease Biomarkers” by Alex. Tsirogianni, Head of Immunology & Histocompatibility Dept., Evangelismos Hospital and “The multiparametric immunophenotypic study of lymphocyte subpopulations in the differential diagnosis of inflammatory bowel disease” by Dr. Marianna Tzanoudaki, Department of Immunology & Histocompatibility, Aghia Sophia, Children’s Hospital, Athens.

In the Snibe Satellite Meeting Dr. Tyllianakis and Prof. D. Rizos, NKUA, highlighted “SARS-CoV-2 Infection-induced and Vaccine-induced Antibodies”. During ESEAP Satellite Symposium Dr. Al. Haliassos presented “The Westgard Rules in Internal Quality Control” and Dr. Evi Konsta covered “The External Quality Control”. The Roche Satellite Symposium focused on the “Hepatocellular Carcinoma”. The topics discussed were “Cancer Markers in Hepatocellular carcinoma” by Prof. A. Papapanagiotou, NKUA, and “Systemic Therapy in the First-Line Treatment of Advanced Hepatocellular Carcinoma” by Prof. G. Papatheodoridis, NKUA. In the Leriva Satellite Lecture Prof. Chr. Tsatsanis, referred to the “Levels of IL-6 as a predictive factor of Covid-19”.

The Congress was declared closed by Alexander Haliassos and by Ioannis Papassotiriou (Clinical Biochemistry, “Aghia Sophia” Children’s Hospital, Athens).

Our Congress was attended by more than 1030 participants, clinical scientists, laboratory specialists, health professionals and students. We would like to thank the Congress President, Dr. Ioannis Papassotiriou, the soul of



Prof. Grigoris Gerotziafas (GR)



Prof. Ioannis Trougakos (GR)

the Congress, as well as the organizing committee (President Dr. Evi Konsta), the scientific committee (President Mar. Stamouli, Biochemistry Lab., Athens Naval Hospital), the speakers, all colleagues and participants for their contribution to a successful, interesting, excellent quality and up-to-date Congress. They created, under the present difficult circumstances due to the SARS-CoV-2 pandemic, the best opportunity for sharing knowledge and exchanging scientific ideas.

We hope, we will meet again next year, during the next GSCC-CB Congress, in Crete, a beautiful Greek island, famous for its history, culture and hospitality.



Prof. Sergio Bernardini (IT)



Dr. Alexander Haliassos (GR)



Prof. Christos Tsatsanis (GR)



Dr. Ioannis Papassotiriou (GR)

IFCC WELCOMES A NEW CORPORATE MEMBER

Autobio Diagnostics Co., Ltd



Autobio Diagnostics Co., Ltd was founded in 1998, headquartered in Zhengzhou, China. As a leading provider of comprehensive solutions for medical laboratories, Autobio specializes in R & D, production, marketing and service of clinical diagnostic products. Focusing on immunoassay, molecular, microbiology and POCT fields, Autobio helps healthcare professionals tailor treatment with fast, reliable and accurate diagnosis solution for various diseases and dysfunctions.

Autobio has a strategic vision to establish a world class technology-based operation that is committed to manufacturing and marketing products that adhere to global standards in both quality and care. Currently, Autobio has 529 product registration certificates, 322 CE marked and 528 patents. In overseas markets, Autobio's products have performed enormous potential, exporting to over 80 countries and regions.

Always taking product quality and sophisticated manufacturing as the first priority, Autobio's fully Automated Chemiluminescence Immunoassay (CLIA) Analyzer and Assays have entered more than ten thousands medical institutions all over the world. From ELISA to CLIA system based on Microparticles, Autobio is among the top IVD enterprises capable of providing comprehensive immunoassay solutions.

With profound accumulation in microbiology field, Autobio also take predominant position in blood culturing, identification, and antibiotic susceptibility testing. Among them, the Automated Mass Spectrometry Microbial Identification System Autof ms1000 ranks first in growth rate in China and maintains vigorous upward trend in overseas market by virtue of the ability to obtained identification results within 0.1 seconds. The function of Autof ms1000 system is mainly to collect the ribosomal protein fingerprints of cultured microorganisms, and to diagnose the pathogenic microorganisms that cause infection through analysis and database comparison.

In the field of molecular detection, Autobio has launched the automatic nucleic acid purification and real-time fluorescent PCR analysis systems AutoMolec 3000 and AutoMolec 1600, which innovatively realizes random access and full automation of extraction and amplification. The SARS-CoV-2 reagent has obtained the CE certification. In addition, other molecular detection reagents such as respiratory tract and HPV will also be launched this year. In the future, Autobio will put more investment into the R&D of random automated molecular detection devices and broader assays. The analyzer improves the way in molecular diagnostic and makes your molecular diagnostic more accurate, convenient and flexible.

Visit <https://en.autobio.com.cn/> for more info.

IFCC'S CALENDAR OF CONGRESSES, CONFERENCES & EVENTS

Calendar of IFCC Congresses/Conferences and Regional Federations' Congresses

Mar 30 - Apr 2, 2022	 COLABIOCLI	<i>XXV COLABIOCLI Congress</i>	Leon, MX
Apr 10 - 14, 2022		<i>XXIV IFCC - EFLM EuroMedLab Munich 2021</i>	Munich, DE
June 25 - 26, 2022	 International Federation of Clinical Chemistry and Laboratory Medicine	<i>IFCC Forum for Young Scientists</i>	Seoul, KR
June 26 - 30, 2022		<i>XXIV IFCC WORLDLAB Seoul 2022 XVI APFCB Congress Seoul 2022</i>	Seoul, KR
May 21 - 25, 2023		<i>XXV IFCC - EFLM WorldLab EuroMedLab - Rome 2023</i>	Rome, IT
New date TBA		<i>AFCB Congress 2022</i>	Beirut, LB

Calendar continued on next page

Other events with IFCC auspices

Aug 2, 2021 - Apr 3, 2022	<i>Virtual Diplomat in Selected Topics of Diagnostic Hematology for the Laboratory (Advanced Level) Second Generation</i>	Mexico Online course
Feb 15 - 18, 2022	<i>The International Laboratory Diagnostics Congress</i>	Iran Online event
May 15 - 18, 2022	<i>6th EFLM Preanalytical Conference: Preanalytical quality an interdisciplinary journey</i>	Online event
May 18 - 20, 2022	<i>National Congress II Virtual Analysis of Quality Assurance in clinical laboratory CONAQUIC 2022</i>	Mexico Online event
Apr 20 - 21, 2022	<i>International Congress on Quality in Laboratory Medicine</i>	Helsinki, FI
May 18 - 21, 2022	<i>13th International & 19th National Congress on Quality Improvement in Clinical Laboratories</i>	Teheran, IR
May 23 - 26, 2022	<i>10th Santorini Conference "Systems medicine and personalized health and therapy" – "The odyssey from hope to practice: Patient first – Keeps Ithaca always in your mind"</i>	Santorini, GR
Jun 5 - 8, 2022	<i>CSCC 2022 Annual Conference</i>	Niagara Falls, CA
Sept 28 - Oct 1, 2022	<i>10th Congress of the Croatian Society of Medical Biochemistry and Laboratory Medicine</i>	Zagreb, HR
Oct 4 - 9, 2022	<i>FEBS Advanced Course: 360-degree Lysosome; from structure to genomics, from function to disease-update</i>	Izmir, TR
Oct 14 - 17, 2022	<i>46th ISOBM Congress</i>	Bled, SI
New date TBA	<i>XXII Serbian Congress of Medical Biochemistry and Laboratory Medicine & 16th Symposium for Balkan Region</i>	Belgrade, SRB

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Mexico: Federación Nacional de Químicos Clínicos (CONAQUIC A.C.)
Nepal: Nepalese Association for Clinical Chemistry (NACC)
Philippines: Philippine Council for Quality Assurance in Clinical Laboratories (PCQACL)
Romania: Order of the Biochemists, Biologists, Chemists in Romanian Health System (OBBCSSR)
Serbia: Serbian Society for Clinical Laboratory Medicine and Science (SCLM)
Spain: Andalusian Society for Clinical Analysis and Laboratory Medicine (SANAC) Asociación Española de Farmacéuticos Analistas (AEFA)
Sri Lanka: College of Chemical Pathologists of Sri Lanka (CCPSL)
Turkey: Society of Clinical Biochemistry Specialists (KBUD)
Ukraine: Association for Quality Assurance of Laboratory Medicine (AQALM)
United Arab Emirates: Genetic Diseases Association (UAEGDA)

Regional Federations

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)

Publisher

**Communications and Publications
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N° 6 – June: *by mid May*

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N° 10 – October: *by mid September*

N° 11 – November: *by mid October*

N° 12 – December: *by mid November*

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