



Communications and Publications Division (CPD) of the IFCC Editor: Katherina Psarra, MSc, PhD IFCC Office, Via C. Farini, 81 20159 Milano, Italy E-mail: enews@ifcc.org

International Federation of Clinical Chemistry and Laboratory Medicine



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EDITORIAL

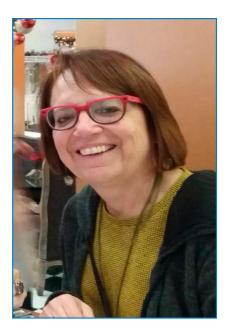
Message from the eNews Editor

by Katherina Psarra eNews Editor

Dear colleagues,

I hope you are all well and at least enjoying the autumn colours in the countryside when you are not working in the labs all over the world, trying to cope with the unprecedented new situation. Nature can relieve the burden posed on our shoulders by COVID-19 and its consequences at work and at home.

And when you cannot be near nature what could be an antidote to these difficult times? Education can play this role. IFCC is offering education to all of you through the well-known tools like eAcademy or professional exchange programs. Nowadays, when face to face meetings and conferences seem distant in the future, live webinars will play a central position in education. You have already attended, and you can revisit on demand the first really successful one on COVID-19 testing in the labs. The second one on lab quality will be presented on October 15th, 2020. Don't miss the opportunity of more education. A lot of information about IFCC educational plans can be found in our President's inspiring article.



In this eNews issue go through the news of the French and the Spanish societies, read the new COVID era article by Bernard Gouget: "Life with the virus", how interesting and full of information! A new young colleague from Turkey is also presenting her educational stay in Australia for the inspiration of young colleagues, inviting all of them to take advantage of the IFCC professional exchange programs.

Katherina Psarra

News from the IFCC Website



WORLDLAB Seoul 2021 has been rescheduled

The IFCC Executive Board, in consultation with the Korean Society of Clinical Chemistry and MZ Organising Secretariat, has arrived at the difficult and undesired decision to reschedule the upcoming WORLDLAB Congress to 2022 because of the uncertainties and the revolving scenarios with regards to COVID-19 in the coming months, including major international travel restrictions.

The 24th International Congress of Clinical Chemistry and Laboratory Medicine will now be held on 26-30 June 2022. The venue remains the same: the Coex Convention and Exhibition Center in SEOUL, South Korea.

Read more



IFCC President's message – September 2020



Prof. Khosrow Adeli PhD, FCACB, DABCC, FAACC

My cordial greetings and compliments of the Fall season to you all in the IFCC family. 2020 continues to be a tough year for all of us around the world as the infection rates and COVID-19 cases remain high and increasing in many regions globally. But on a positive note, clinical laboratory professionals have become directly and intimately involved in the fight against this growing pandemic and are playing a vital role in diagnosis and monitoring of viral infection and exposure, as well as laboratory monitoring of hospitalized patients with COVID-19.

Due to the ongoing pandemic and travel restrictions, many of our international and regional conferences are being postponed and, in some cases, replaced with virtual events. The 2021 WorldLab Congress has now been postponed to June 2022 and a new virtual conference is being planned on COVID-19 in February 2021.

by Khosrow Adeli IFCC President

Despite our inability to hold physical conferences and events at this time, IFCC has been very busy planning and delivering many new programs to enhance communication links among the IFCC membership as well as to initiate new and novel programs in support of the membership and the field of clinical laboratory medicine. Below is a summary of our most recent activities and future plans:

New IFCC Testing Guidelines on Covid-19

In response to the current pandemic, IFCC established a COVID-19 Task Force, with the primary objective of providing recommendations for harmonizing use and evaluation of laboratory tests worldwide during the COVID-19 pandemic. The taskforce has recently developed a series of interim guidelines to support clinical laboratories around the world as they support the ongoing fight against the COVID-19 pandemic, with particular focus on the needs of clinical laboratories in developing countries. Three guideline documents have been developed and will be published in peer-reviewed literature as well as on the IFCC website over the next few weeks:

- IFCC Guidelines on Molecular Testing of SARS-CoV-2 Infection (in press in CCLM)
- IFCC Guidelines on Serological Testing of Antibodies against SARS-CoV-2 Infection (in press in CCLM)
- IFCC Guidelines on Biochemical & Hematological Monitoring of COVID-19 patients (*in press in CCLM*)

These guidelines provide practical recommendations on the intended use, selection, evaluation and implementation of laboratory tests used in the diagnosis of SARS-CoV-2 infection and management of COVID-19. They also discuss the various analytical and clinical considerations required prior to test implementation, along with test result interpretation. These guidelines have been developed by critically reviewing published peer-reviewed evidence available to date and establishing a consensus of experts from the IFCC COVID-19 Task Force and other experts in the field.

The international authorship of this guideline document represents medical/clinical biochemists, clinical microbiologists/virologists, together with scientists representing the in vitro diagnostics industry. The guideline group took into consideration the global applicability of recommendations in various resource settings, providing practical recommendations that can be of immediate impact worldwide.

New IFCC Live Webinar Series

As part of our new communication and eLearning strategy, IFCC has started a new live webinar program. Our first IFCC live webinar on COVID-19 had over 3000 registrations from over 100 countries around the world which clearly indicates the wide interest in such educational programs across the IFCC world. The next IFCC Live Webinar will be focused on "Advancing Internal and External Quality Assurance on a Global Scale" and will be presented on October 15, 2020 (9 AM Eastern Standard Time; 3 PM European Time; 11 PM Sydney) by three eminent speakers, Professor Sverre Sandberg, Professor Mario Plebani, and Professor Graham Jones. At this international webinar the speakers will present on current challenges advances in Internal and external guality assurance in clinical laboratories around the world, the critical need for a new international strategy to support internal quality assurance and EQA in developing countries, and the IFCC's strategic plans to develop a global program to support both iQC and EQA around the world. I encourage you all to register and attend this webinar and be part of the discussion on how the IFCC can contribute to improved laboratory quality assurance globally over the coming years.

Upcoming live webinars in November will be focused on "Global Newborn Screening" on November 4th and

"Value and Impact of Laboratory Medicine in Patient Care: Developing the Evidence" on November 26th.

IFCC Virtual Conference on COVID-19 Diagnostic Testing in February 2021

A new fully virtual conference (over 2-3 days) has been planned for early next year to bring together scientific and industry leaders from around the world to present on the latest advances in COVID-19 diagnostics as well as public health authorities and medical experts to present on rapidly growing list of therapeutics and vaccines being developed to control and hopefully eliminate the current pandemic.

The theme of the conference will be: *Critical Role of Clinical Laboratories in Covid-19 Pandemic.* The program will include:

- Scientific Symposia: At least 4 scientific symposia including presentations by:
 - Scientific and industry members of the IFCC Taskforce on Covid-19
 - Expert representatives from each of six regional federations to present on Covid-19 management in all regions around the world,
 - Public health and regulatory authorities including WHO, CDC, FDA, and others
 - Eminent global experts to present on laboratory management and pathophysiology of Covid-19.
- A virtual poster session for IFCC members and young scientists from around the world
- Virtual Industry Workshops
- Virtual Industry Exhibits

The conference registrations details will be available soon and I encourage all of you to try to participate.

I look forward to seeing many of you (virtually!!) at our upcoming webinars and the IFCC Virtual Conference. Feel free to email me at: president@ifcc.org with your feedback, questions, or concerns.

Till next time ☺ Khosrow **IFCC Webinars**



www.ifcc.org



October 15, 2020

Advancing Internal and External Quality Assurance on a Global Scale

Speaker Panel: Prof. Sverre Sandberg (Norway), Prof. Mario Plebani (Italy), Prof. Graham Jones (Australia)

Chair/Moderator: Prof. Khosrow Adeli (Canada)

- S What information can External Quality Assurance (proficiency testing) give? (Sverre Sandberg)
- Are we really measuring the quality of laboratory services? (Mario Plebani)

QC vs QA – Are both necessary? (Graham Jones)
 Schedule: 20 min per speaker plus 20 min panel discussion

Click on this link to register and participate in this event. A limit of 5000 attendees. Certificates of participation will be available.

News from the IFCC Website

Sign up for the next IFCC Live Webinar on 15 October, 2020: Advancing Internal and External Quality Assurance on Global Scale



Sverre Sandberg [Norway] Director of the Norwegian Quality Improvement of Laboratory Examinations (NOKLUS) Haraldsplass Deaconess Hospital



What information can External Quality Assurance (proficiency testing) give? [Italy] Full Professor of Clinical Biochemistry and Clinical Molecular Biology Medical School, Univ.of Padova, Director, Dept of Laboratory Medicine, University-Hospital, Padova

Mario Plebani



Are we really measuring the quality of laboratory services?

Chair: Khosrow Adeli [Canada] Professor of Clinical Biochemistry, University of Toronto President IFCC

Graham Jones [Australia] Chemical Pathologist at St Vincent's Hospital, Sydney, Australia and a Conjoint Associate Professor at the University of New South Wales



QC vs QA – Are both necessary?

Read more

IFCC Live Webinar Series – fall 2020

IFCC Webinars



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mistry

News from the IFCC Website

Recording now available to view On Demand

IFCC COVID-19 Guidelines on Molecular, Serological and Biochemical/Hematological Testing was broadcast on 23rd September 2020

On Demand content is now available

Speaker Panel: Giuseppe Lippi (Italy), Rita Horvath (Australia), and Khosrow Adeli (Canada).

Chair: Khosrow Adeli

- IFCC Guidelines on Molecular Diagnostic Testing of SARS-CoV-2 Viral Infection (Giuseppe Lippi))
- IFCC Guidelines on Serological Testing of Anti-SARS-CoV-2 Antibodies (Khosrow Adeli)
- IFCC Guidelines on Biochemical and Hematological Monitoring of Patients with COVID-19 (Andrea Rita Horvath)

For those who registered to the event, the recording is now available to view On Demand by clicking on this link.

If you have not registered, register first at:

https://www.workcast.com/Register?cpak=6827351465814213

IFCC Webinars

The IFCC is pleased to present the **IFCC Live Webinar Series** starting in the fall 2020: a series of scientific webinars offered freely by the IFCC on a number of important topics delivered by subject matter experts from around the world.

After the first live webinar, that was successfully held on September 23, 2020 on:

New IFCC Guidelines on Molecular and Serological Testing of SARS-Cov-2 and

Live Series Fall 2020

S Biochemical and Hematological Monitoring of COVID-19 patients.

Mark on your agenda future IFCC free Live Webinars Details for the next three webinars will be available in due time. **IFCC Webinars**



www.ifcc.org



November 4, 2020

IFCC Newborn Screening (NBS) Initiative: Reducing Infant Mortality Through Early Diagnosis

- Worldwide Gaps and Challenges in NBS
- A New IFCC Strategy on Global NBS
- Proposed model for NBS Implementation in Developing Countries

IFCC Webinars



www.ifcc.org



November 25, 2020

Value and Impact of Laboratory Medicine in Patient Care: Developing the Evidence

- Critical role of the clinical laboratory in healthcare delivery: What is the Evidence?
- The Essential Need for New Retrospective and Prospective Outcome Studies
- A New IFCC Strategy to Develop the Evidence in Key Areas of Clinical Medicine

News from the IFCC Website



eJIFCC Vol 31 n°3 - September 2020

eJIFCC Vol 31 n° 3 is now available!

The issue starts with the call for submission for a thematic eJIFCC, an issue on "Measurably Better Healthcare", followed by an imaginary conversation between SARS-CoV and SARS-CoV-2 and another one considering scholarly pressure in COVID-19 times, and by a reflection on the vogue for naming reactions and methods. We find then an article on Leptin levels and Q223R leptin receptor gene polymorphism in obese Mexican young adults; a systematic review on Extra-analytical clinical laboratory errors in Africa; an analysis on Vitamin D deficiency impact on PSA reference ranges in a general university hospital; and an article on trends in laboratory testing practice for diabetes mellitus. The issue is completed by two

case reports on an Anti-tuberculosis treatment, and on pediatric septic arthritis of the hip.

Read more

The Journal of the International Federation of Clinical Chemistry and Laboratory Medicine



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Call for manuscript submissions for a thematic eJIFCC issue on "Measurably Better Healthcare"

Guest Editors for the special issue: Ellie Dow and Tim James

The clinical laboratory has always played an essential role in high quality healthcare. Appreciating the link between clinical data and medical decision making has been widely communicated for decades. Less frequently recognized, however, is the power of the clinical laboratory to drive measurable benefits for patients, payers and entire health systems.

Best practices of measurably better healthcare exist across the globe, and tend to involve coordinated, cross-disciplinary, and evidence-based collaborations for the implementation and activation of new clinical care pathways.

- Have you partnered with clinical colleagues to achieved measurably improved outcomes?
- What key performance indicators (KPIs) were improved and how?
- Who received the benefit and how was it measured?

This is your chance to publish your best practice

- How did laboratory data improve patient outcomes?
- What clinical algorithms helped identify at-risk individuals before they become "patients"?
- What biomarker-guided processes have enabled new strategic approaches to diagnostic optimization, disease management, therapeutic intervention, care optimization or improved population health?

Submit a paper on "Measurably Better Healthcare" to be published in this thematic issue of the eJIFCC that is a PubMed listed, platinum open access journal with a CiteScore of 0.8

Important deadlines and Next Steps

- Deadline for all submissions (original articles, critical reviews and case studies): November 15, 2020
- Manuscripts to be submitted by e-mail to ejifcc@ifcc.org with a copy to ejifccspecialissue@gmail.com

Guest Editors

- Ellie Dow, LRCP, MRCS, Ph.D., FRCPath, Consultant in Biochemical Medicine, Blood Sciences, NHS Tayside, Dundee, Scotland
- Tim James, Ph.D., Head Biomedical Scientist, Clinical Biochemistry Department, John Radcliffe Hospital, Oxford, England



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Autoimmune

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Fertility FSH LH HCG/β-HCG 💷 PRL (Prolactin) Estradiol Testosterone free Testosterone DHEA-S Progesterone free Estriol 17-OH Progesterone AMH SHBG

Androstenedione *PIGF *sFlt-1

Hepatic Fibrosis

HA PIIIP N-P CIV Laminin Cholyglycine

TORCH

Toxo IgG Toxo IgM Rubella IgG Rubella IgM CMV lgG CMV IgM HSV-1/2 lgG HSV-1/2 IgM HSV-2 lgG *HSV-2 IgM *HSV-1 IgG *HSV-1 IgM

Tumor Markers AFP CEA Total PSA f-PSA CA 125 CA 15-3 CA 19-9 PAP CA 50 CYFRA 21-1 CA 242 CA 72-4 NSE S-100 SCCA TPA-snibe ProGRP HE4 HER-2 *PIVKA-II

Prenatal Screening

AFP (Prenatal Screening) Free β-HCG PAPP-A free Estriol

Glyco Metabolism

C-Peptide Insulin **GAD 65** Anti-IA2 ICA IAA (Anti Insulin) Proinsulin

Cardiac CK-MB Troponin I Myoglobin hs-cTnl H-FABP NT-proBNP BNP D-Dimer Lp-PLA2 *MPO

Metabolism

Pepsinogen II Gastrin-17 GH (hGH) IGE-I IGFBP-3

Infectious Disease HBsAg Anti-HBs HBeAg

Anti-HBe Anti-HBc Anti-HCV Syphilis Anti-HAV HAV IgM HIV Ab/Ag Combi Chagas HTLV I+II H.pylori IgG H.pylori IgA H.pylori IgM 2019-nCoV lgG 2019-nCoV IgM SARS-CoV-2 S-RBD IgG *Anti-HBc IgM

Monitoring hs-CRP PCT (Procalcitonin) IL-6 (Interleukin 6) *SAA (Serum Amyloid A)

С

Hypertension

Direct Renin Aldosterone Angiotensin I Angiotensin II Cortisol ACTH

Anemia Vitamin B12 Ferritin Folate (FA) *RBC Folate

Drug Monitoring

Digoxin CSA (Cyclosporine A) FK 506 (Tacrolimus)

Kidney Function β₂-MG Albumin *NGAL

EBV

EBV EA IgG EBV EA IgA EBV VCA laG EBV VCA IaM EBV VCA laA EBV NA IgG EBV NA IqA

Bone Metabolism

Calcitonin Osteocalcin 25-OH Vitamin D 🕮 Intact PTH *β-CrossLaps (β-CTx) *total P1NP

Immunoalobulin **IgM IgA** IgE lqG

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Inflammation

IFCC: THE PEOPLE

Open positions within IFCC



The following calls for nominations are currently open within the:

EDUCATION AND MANAGEMENT DIVISION

- Committee on Point of Care Testing (C-POCT): one corporate member position
 - \Box Time in office 2021-2023.
 - Deadline to receive nominations and supporting documents has been extended to December 10, 2020.

EMD nominations should be sent to Silvia Cardinale at the IFCC office (cardinale@ifcc.org).

TASK FORCES

- S New IFCC Taskforce on Global Newborn Screening (TF-NBS): a Chair and 4 full members
 - □ Time in office 2021-2023
 - □ Deadline to receive nominations and supporting documents is October 30, 2020.
- S New IFCC Taskforce on Global Lab Quality (TF-GLQ): a Chair and 4 full members
 - $\hfill\square$ Time in office 2021-2023.
 - □ Deadline to receive nominations and supporting documents is October 30, 2020.

Above Task Forces nominations should be sent to Paola Bramati at the IFCC office (paola.bramati@ifcc.org)

For any further information on nominations, please refer to your National or Corporate Representative for information on procedures for nominations.

To find your representative click here.



VIRTUAL CONFERENCE

CRITICAL ROLE OF CLINICAL LABORATORIES IN COVID-19 PANDEMIC

THE PROGRAM WILL INCLUDE

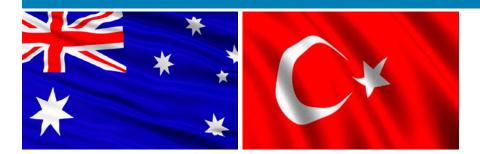
- Scientific symposia including presentations by: IFCC Taskforce on Covid-19, Representatives of 6 regional federations on Covid-19 management in regions around the world Public health and regulatory authorities Invited experts from around the world on laboratory management and pathophysiology of Covid-19
- Virtual poster session for presentation by IFCC members and young scientists from around the world
- Virtual Industry Workshops
- Virtual Industry Exhibition

FEBRUARY 2021

IFCC: THE YOUNG SCIENTISTS

IFCC Professional Scientific Exchange Programme (PSEP)

My experience at the Ingham Institute, Australia



by Huriye Erbak Yilmaz Katip Çelebi University Atatürk Training and Research Hospital Izmir, Turkey

"Our True Mentor in Life is Science"

Mustafa Kemal Ataturk (1881-1938) - the founder of the Republic of Turkey

It was science that brought me to the Ingham Institute from a country far away. My name is Huriye Erbak Yilmaz and in Turkey I work as a medical doctor specialised in Clinical Biochemistry at the Izmir Katip Çelebi University Atatürk Training and Research Hospital. In addition to my clinical practice, I'm undertaking a PhD focusing on cancer at the Izmir International Biomedicine and Genome Center. As part of my PhD, I have investigated the latest technical advancements in cancer research including the emerging and exciting field of liquid biopsy. The concept of liquid biopsy is extremely fascinating to me. It involves the study of cancer from a circulating tumour DNA perspective and applies the acquired information to the clinic to achieve individualised patient treatment or "precision oncology". To further develop my understanding of liquid biopsy, I investigated who and what institutions were conducting this research and discovered the Thomas Ashworth CTC & Liquid Biopsy Symposium led by Associate Professor Kevin Spring. I was inspired by the scope and focus of the Symposium and contacted him to learn more. Associate Professor Spring has since supported me for a research placement at the Ingham Institute. I applied for and was awarded a Professional Scientific Exchange Programme Fellowship from the International Federation of Clinical Chemistry (IFCC). This prestigious award supported me financially for my placement in Australia.

Liquid biopsy is a highly promising approach that can be potentially used in clinical biochemistry laboratories in the management of cancer patients. I was incredibly pleased to be involved in a project that uses liquid biopsy to monitor recurrence in colorectal cancer patients. Participation in this research has given me the opportunity to learn and understand different aspects of research, including development of protocols, patient recruitment, longitudinal blood sampling and techniques such as circulating tumour DNA and tissue DNA isolation, circulating tumour cell isolation, nucleic acid fragment analysis and the application of high sensitivity assays including ddP-CR and next generation sequencing (NGS). These methods are highly advanced technologies in cancer research and it was a great opportunity for me to gain such an experience.

Two weeks after arriving at the Ingham institute, the World Health Organization (WHO) announced the Covid-19 pandemic. I was worried about my research program and about living in a different country during a pandemic,



L-R: Prof. Kevin Spring, Medical Oncology Group Leader; Dr. Huriye Erbak Yilmaz, IFCC-PSEP Fellow; Aditya Tangriala, Honour Student

but, as it transpired, my concerns were unnecessary. I was very well looked after and I would like to thank Associate Professor Spring for skilfully managing my time and research during this extraordinary pandemic. He is a great mentor and teacher, he taught me many new research skills and I now feel even more confident in my research journey.

I feel my time was well spent and I have established an important network for my future as a clinician researcher and look forward to an enduring connection with the Ingham Institute. First, I would like to thank the International Federation of Clinical Chemistry that offers this perfect opportunity to the young researchers. I

am grateful to Associate Professor Kevin Spring who always supported me. Lastly, I would like to thank the Ingham Institute and all the wonderful colleagues I have worked with – they made me remember Australia with great fondness.

News from the IFCC Website



The IFCC is pleased to publish an online resource providing key information on laboratory guidelines, biosafety, and other important resources to assist member societies around the world and their clinical laboratories as they face the challenges posed by the COVID-19 outbreak.

The page is constantly updated with the most recent information.

The next update will be available on 13 October 2020, and updates will continue on a biweekly basis.

IFCC Information Guide on COVID-19 – a Summary of the Guide in Spanish and Czech is also available

Coronavirus disease 2019, abbreviated to COVID-19, is an emerging global pandemic caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2). As the number of individuals infected with COVID-19 continues to rise globally and healthcare systems become increasingly stressed, it is clear that the clinical laboratory will play an essential role in this crisis, contributing to patient screening, diagnosis, monitoring/treatment, as well as epidemiologic recovery/surveillance. This guide aims to organize relevant available information on laboratory screening, testing protocols, diagnosis, and other general information on COVID-19 for laboratory professionals, including links to helpful resources and interim guidelines. It will be continually updated as new guidelines and literature become available.

Read more

CONTRIBUTE TO THE IFCC eNEWS

Countdown to November 16, 2020

Care teams around the world endeavor to improve healthcare delivery every single day. Last year, the UNIVANTS of Healthcare Excellence Award Program recognized twelve teams who have achieved measurably better healthcare with innovative best practices. Details about those winners and the Award program can be found on www. univantshce.com.

The prestigious and global UNIVANTS of Healthcare Excellence award program promotes and recognizes integrated care teams who have achieved remarkable outcomes in healthcare by developing targeted solutions to meet gaps in care. By maximizing laboratory insights to solve unmet needs, the award-winning teams unify across disciplines to make a significant, positive impact on key stakeholders including patients, clinicians, health systems, and payors. Some of the benefits achieved include reduced clinical uncertainty, improved patient care wellness, increased clinical confidence, enhanced reputation, and decreased costs.

The award program has been made possible through strategic collaborations among eight global healthcare industry leaders, including Abbott, International Federation of Clinical Chemistry and Laboratory Medicine (IFCC), AACC, European Health Management Systems Society (EHMA), Modern Healthcare, Health Information and Management Society (HIMSS), the National Association for Healthcare Quality (NAHQ), and the Institute of Health Economics (IHE). With a shared mission to celebrate healthcare excellence and share best practices, the program is intended to inspire healthcare professionals globally. All partners, excluding Abbott, are currently evaluating qualified applications to select global and area winners.

In the meantime, you can explore success stories, best practices, and valued articles of each of the previous winning teams on the program website, or follow the program on social media, including #UNIVANTS on LinkedIn. The 2020 outcomes will be revealed globally this November.

The next award cycle will begin in the summer of 2021 and is open to all healthcare professionals and professional teams, regardless of their affiliation with program partners. As more healthcare teams unite and an "all-handson-deck approach" is taken, more best practices will materialize, enabling the highest quality care delivery.



For more details on the UNIVANTS of Healthcare Excellence Award program, visit <u>www.UnivantsHCE.com</u>



UNIFY FOR SOMETHING GREATER



The **UNIVANTS** of Healthcare Excellence Award program celebrates teams who have achieved measurably better outcomes in healthcare.

If you are a team of **UNIFIERS** who have applied AVANT-GARDE approaches to achieve better healthcare outcomes, learn more and apply at UnivantsHCE.com.



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Life with the virus: a new norm



Chair-IFCC Committee on Mobile Health and Bioengineering in Laboratory Medicine (C-MHBLM) co-Chair IFCC -TF on History SFBC-International Committee President-Human Health Care Committee-Cofrac President-National Committee for selection of the French Reference Laboratories, Ministry of Health

by Bernard Gouget

At the end of the summer in the northern hemisphere and of the winter in the southern hemisphere, COVID 19 has completed its first lap. In the early days of the pandemic, some Presidents exhorted their citizens to wage war against the coronavirus. Having abandoned hopes of eradicating the virus or developing a vaccine within weeks, today, their message is to learn how to live with the virus. Many countries have opted for coexistence as infections keep rising. Summer recedes into a risk-filled autumn and the possibility of a second wave haunts the continents. The WHO predicts a higher mortality this fall. New infections have soared in recent weeks, the jump is not surprising since the overall number of tests being performed.

Dr. Bernard Gouget

Those infected now tend to be younger, the virus is still circulating freely, we are controlling poorly the chain of infections, and inevitably high-risk people will end up being affected. It is not possible to stop the virus. It is about maintaining equilibrium and we only have a few tools available for us to do that. Uncertainty is everywhere and it leaves us with a profoundly unsettled feeling. It is a return to the world in « protective » mode.

The workplace is shaken up: tele-meetings, teleworking, relocations, e-commerce, etc. The health crisis is accelerating business reorganization, overturning care structures and threatening the cohesion of social groups. The difficulty in access to testing, the wait for vaccines, the crucial question of patient treatment and triage faced with whether to go to intensive care, reinforces concerns. COVID suspends our initiatives and requires caution everywhere.

The pandemic requires us to move forward in an uncertain system. Many digital projects have been initiated during this crisis. A strong increase in the recreational and occupational use of streaming films, video games, news sharing on social networks, videoconference meetings, and so on, can be observed. By accentuating the dependence on online approaches, lockdown has also reinforced inequalities in digital access. Furthermore, the health crisis has hindered the necessary discussions that conferences allow. However, the health challenges faced require cohesion and communication: ensuring the continuity of care, rethinking education, maintaining the links between community members, ensuring the sustainability of research projects, etc. Adapting to this situation is a major challenge! E-conferences, e-workshops, e-congresses, webinars, the virtual offerings are vast, technical and complex. Everything has the feeling of a video game: the camera overlooks the conference center towards the lobby entrance, where participants crowd into the conference room via their avatars. We are virtually side by side while thousands of miles apart.

Our travel volume and our methods of communication will never be the same. Our procedures, travel, meetings and celebrations are suspended for a higher purpose: protecting life. So, adjusting to vital priorities requires navigating without knowing all the facts.

COVID 19 carries its share of stigma, including segregation of those infected, shifting between responsibility and guilt for having spread the virus. In the absence of a vaccine or effective treatments, contact tracing combined with isolation of positive cases is an effective prevention tool, but it must be accompanied by education and considered as a tool for understanding and protection. Despite everything, it is possible to hope that the excess mortality observed in the spring will not reoccur in such proportions. The progress made in management of patients with severe forms by oxygen therapy or corticosteroid therapy has reduced mortality rates by 21%. While we wanted to eliminate all hazards, even moral ones, here we need to learn to navigate without guideposts. The protection of life is now our guiding principle. Biosphere limits are our collective challenge. The challenge of this return to normal life is to accept these limits, not by losing freedom but by renewing possibilities. Everything must be done to live with the virus.

Politicians and medical scientists are undertaking a balancing act, given the great uncertainty about the trajectory that the epidemic could follow in the weeks to come. Just because cases are increasing does not mean that we must return to complete lockdown. However, it can be noted that Israel is reimposing a national lockdown which should be finished by the end of Sukkot. Facing an alarming spread of cases, Jakarta has installed partial lockdown. According to the WHO, the numbers should be analyzed, and strategies compared to see what measures are the best suited to maintain an acceptable transmission level. We must therefore be prepared to wear a mask and adhere to the preventive measures for a while.

In the second half of the nineteenth century, in 1846, Ignaz Semmelweis released the hygiene theory of handwashing. Louis Pasteur who hated to shake hands, was a big fan of handwashing, even if it meant being "pretentious"! Hand hygiene still has the same goals. These goals remain the prevention of cross contamination, prevention of infection or colonization of patients or caregivers, and prevention of environmental contamination. Many authors have

demonstrated the value of hand hygiene in reducing HAIs or the risk of spreading MDRB, whether by descriptions of epidemics, before-after studies or time series analyses. The SARS CoV-2 epidemic has proven that hygiene freaks are right, these handwashing and hydro-alcoholic sanitizer obsessives, who have sworn by handwashing for years, are finally recognized as pioneers. Of course, some of us have already been converted by the H1N1 epidemic in 2009 to prevent flu and gastroenteritis. But today, the use of hand sanitizer is widespread. It has become obligatory to enter a business or public place. Any surface or object touched must be suspect and lead to hydro-alcoholic gel use. While rubbing yourself with a hand sanitizer gel or solution is as effective as with soap, you still must do it correctly: at least 20 seconds between your fingers and with the right product capable of eliminating viruses and bacteria.

The hydro-alcoholic formula validated by the WHO is unpatented in order to prevent its distribution from being limited. Many thanks to Didier Pittet, Swiss epidemiologist and infectious disease specialist, who promoted its usage since 1995 to fight nosocomial infections. Since then, an incalculable number of people have been saved by means of this very simple process. But today still, the WHO estimates that every year, 5 to 8 million lives could be saved with better hygiene.

Hand sanitizer is one of the indispensable preventative measures to slow SARS CoV-2 contamination and protect the most vulnerable, in the same way as hand washing, mask wearing and physical distancing. The precious virucidal fluid has taken a leading and sometimes excessive role in daily rituals, bordering on obsessive compulsive disorder (OCD). In the anxiety-inducing context of the pandemic, faced with the desire to protect yourself and others, it is normal to feel more vulnerable and to latch onto the first bottle that comes along, like a protective amulet. People with true OCD are rare, but intensive use can reveal the existence of background anxiety that was already present, anchored somewhere in our unconscious and amplified by the collective fear of contamination. With SARS CoV-2, every object and every individual become a potential contaminator and threat.

Recent sociological studies have shown that when you enter a shop or administrative building, anointing your hands is reminiscent of the purification rites practiced in places of worship. Like holy water, sanitizer purifies us and keeps us away from the impure, where there is a risk of contamination and therefore of death, as if the sanitizer, an invisible film, was preventively protecting others. Sanitizer also demonstrates good and bad behavior, so many questions formerly decided by religion, once again at the heart of social interactions.

Obviously, the civilization of social distancing, the advent of "untact" culture and the digital technological revolution are destabilizing everyone. Sanitizer generates ambivalence and uncertainty in interactions: masks prevent us from reading other people's smiles, and we sometimes shake hands by reflex before quickly dousing ourselves with sanitizer. How do we rediscover predictability in our social relations that keep our exchanges amicable and avoid underlying aggression that we can see in public spaces or on public transportation? We try to wear masks from the base of the eyelashes to the glottis, we greet our neighbor wisely with joined hands with Thai compunction, but we often allow our noses to escape and forget preventative measures in the spirit of conviviality.

Paradoxically, contemporary society, so quick to expose the body as an object, finds itself confronted with physical separation and the pain of not touching. Regardless of the utility of screens in our lives and the virtual realities to which they give access, nothing is better than embodied reality. The depth of human relationships is felt in experience and contact, which cannot be completely replaced by hitting "like". Touch, the most important of the senses, is also a victim of the epidemic since, by definition, touch does

not allow any intermediary, nothing can touch without being touched. Likewise, masks upset our relationships with others. We struggle to avoid misunderstandings, we seek out the emotional cues that once guided us, and we watch for narrowing of the eyes or the shadow of a glance. No further sign comes to soften a clumsy gesture or seal a fleeting complicity. Often, we would like to drop our masks to experience again the lost spontaneity. Nothing is worse than the man with no expression, a masked man whose intentions and emotions cannot be guessed. We need the smiles of others to smile ourselves. Smiles show our way of reacting to the world, of inhabiting it, in short, of existing. Despite everything that it deprives us of, a mask makes us realize what we need from the other and, at the same time, makes visible to us the absolute and mysterious distance that separates us from them. Social interaction is essential in humans; the presence of one person conveys something of the truth of our world to another. This is why, despite legitimate health injections, outbursts of affection drive people to those they love.

The countries are putting to use the hard-won lessons from the pandemic's initial phase: the need to wear masks, handwash and practice social distancing, the importance of testing and tracing, the critical advantages of reacting nimbly and locally. All those measures, tightened or loosened as needed, are tools for success against the pandemic.

But will we sustainably ingrain these measures in our habits? Will contactless society become the norm? Hopefully if the epidemic recedes, we will return to our previous behaviors with a little more caution. This is no reason to wash your hands of them!



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NEWS FROM REGIONAL FEDERATIONS AND MEMBER SOCIETIES



The European Union selects the Galiat Study as a model of innovative management

SEQCML chosen for presenting an innovative "four helix" management approach

SEQCML

SEQC^{ML} has been chosen for presenting an innovative "four helix" management approach, which involves public institutions, industry, research, and citizens

The European Union selects the Galiat Study, which assesses the health effects of the Atlantic diet, as a model of innovative management

- ➡ The study is considered of interest by the Spanish Society of Laboratory Medicine (SEQC^{ML}), as it was led by clinical laboratory professionals
- The initiative is considered by the Interreg Atlantic Area program of the European Union as an open and user-centered innovation ecosystem, based on co-creation and co-learning and capable of transferring progress to the everyday life

Participants in the 'Galiat' clinical trial on the impact of a diet based on the traditional Galician diet experienced an improvement in their metabolic health

MADRID, JULY 1, 2020:

The Interreg Atlantic Area Program of the European Union, which covers various transnational cooperation projects between European countries and regions in the Atlantic area, has selected the Galiat Study as a model of innovative 4H management. The inclusion of this study within the framework of the



Dr. Mar Calvo from the Clinical Analysis Department of Hospital Clínico Universitario de Santiago de Compostela, coordinator of the Galiat Study and member of the Communication Committee of the SEQC^{ML}

4H, or "four-helix", model implies that the European program considers the Galiat Study as an open and user-centered innovation ecosystem, based on co-creation and co-learning and integrating research, health improvement, and innovation processes in real-life communities and settings.

The Galiat Study is part of the Galiat 6 + 7 Project, a public-private alliance between six Galician food

companies and seven public research organizations to address the study of agri-food and marine resources in northwestern Spain and their effects on health.

The original idea came from the Viticulture group of Misión Biológica de Galicia-CSIC, which successfully managed scientific coordination between research groups and companies for more than 50 months. The project had the financial support of the Feder-Innterconecta program of the European Union.

The Galiat Study, a randomized, controlled, nutritional intervention clinical trial designed to evaluate the effects of the Atlantic diet in 250 families, has already received several awards. The research team was coordinated by Dr. Mar Calvo, from the Clinical Analysis Department of the Hospital Clínico Universitario de Santiago, and a member of the Communication Committee of the SEQC^{ML}, for whom this is a very important recognition, "since only eight European projects carried out during the 2014-2020 period were selected".

Throughout its development, the Galiat Study was considered of interest and closely followed by the Spanish Society of Laboratory Medicine (SEQC^{ML}), as it was led by professionals from the Clinical Laboratory.

According to Mar Calvo, "already in 2013 the general project was designed with the involvement of public institutions, researchers and health professionals, companies, and citizens. In our group we de facto anticipated the current model of the Galician public health system, uniting in a single team the health professionals of primary and specialized care, involving the public, promoting the scientific/technical training of all participants, and converting the town of A Estrada, where the clinical trial was carried out, into an authentic Living Lab".

"There are very few studies with a clinical trial design that evaluate preventive community interventions aimed at the general population", explained Dr. Calvo to highlight the importance of this trial so that Laboratory Medicine would be provided with scientific evidence when assessing the balance of a diet in people's health.

The clinical trial involved 250 families from the Pontevedra town of A Estrada (720 people, between children and adults), who were randomly divided into two groups, one of intervention (127 families) and the other as a control (123 families). For six months, the families of the intervention group participated in a nutritional and gastronomic education program and were given typical foods of the Atlantic diet. "In other words, our Galician diet, is healthy, economical, tasty, respectful with the environment, and congruent with our gastronomic cultural heritage", according to the doctor. In the A Estrada Health Center where the field work was carried out, more than 50 professionals acted as collaborating researchers. In addition, the City Council, a Hospitality School, local restaurants, local companies, the local press were involved.

A MODEL OF INNOVATIVE MANAGEMENT

One of the highly valued factors in this initiative is its multidisciplinary nature, a public-private collaboration and an innovative management model designed so that all players would work in the same direction.

"With so many professionals, many of them outside our organization, an efficient management model was essential. We drew up a work plan with all the activities, work procedures, responsibilities, necessary materials, and a schedule for the healthcare personnel involved and local collaborators.

Once the study was finished, the interaction between healthcare and community services crystallized in the approval of a Local Health Plan that incorporates family nutritional education with a traditional diet", explains Dr. Calvo.

"From the science-business collaboration, research and innovation were promoted as part of the strategic management of food companies, something that in addition to improving the nutritional and organoleptic characteristics of the products, is also a key factor in promoting a healthy, sustainable and culturally appropriate diet in the population, and is in line with the UN Sustainable Development Goals.

The coordination between the companies and the research groups was the responsibility of Dr. Carmen Martínez Rodriguez, from the Misión Biológica de Galicia-CSIC, and was one of the key aspects in the selection of our study", says Dr. Calvo.

All these factors were taken into account by the European entity, as they are aligned with the four-helix model (4H).

Interreg Atlantic Area also highlighted the very deliberate and intense transparency throughout the project, something that undoubtedly helped to build trust and overcome the barriers that might arise between healthcare professionals and companies. This recognition, therefore, highlights a management model based on innovation, competitiveness, transparency, knowledge, and teamwork.

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

The Spanish Society of Laboratory Medicine (SEQC^{ML}) -founded in 1976- is an active member of IFCC and EFLM. The SEQC^{ML} currently encompasses more than 2,500 professionals, and its main objectives are to bring together all scientists interested in the field of



Laboratory Medicine, promote the dissemination of scientific and technical publications, organize meetings, courses and congresses of national and international character, cooperate with other Scientific Societies, and defend and promote the specialties of the field of Laboratory Medicine as well as those of its members. Likewise, the Society wishes to contribute to studying and recommending methods and guides, and to establishing guidelines and recommendations for training in the field of Laboratory Medicine.

More information at: www.seqc.es.

 @SEQC_ML Residentes del Laboratorio Clínico - SEQC

 SEQC-ML

 Seqresidentes

JIB 2020: Innovation, cultural changes and redesigning lab medicine in the COVID era

by Dr. François Blanchecotte JIB 2020 President Prof. Virginie Ferre President COC

Dr. Bernard Gouget

Chair, IFCC-CMHBLM JIB International Program Coordinator Chair, EFLM Task Group "European Medical Laboratory Day" (TG-EMLD)

On November 4-5 2020, the 63rd JIB edition will take place at the Palais des Congrès, Porte Maillot, Paris (FR). As the largest conference dedicated to medical biology in France, JIB 2019 attracted 3,600 participants from over 20 countries covering the latest breakthroughs in new biomarkers, research translation, early diagnosis, IVD and biomedical devices development and clinical applications in the field of lab medicine. With institutional partnerships such as the French Ministry for Health and Ministry of Higher Education, Research and Innovation, the auspices of the International Federation of Clinical Chemistry and Laboratory Medicine (IFCC), the European Federation of Clinical Chemistry and Laboratory Medicine (EFLM) and, with the collaboration of IVD corporate members, JIB's international reach grows each year and now includes an English track. Additionally, some French sessions are translated simultaneously into English.

This major event will bring you to a daily dose of what's up in cutting edge technologies and promising new biomarkers developments with the aim to improving the biological diagnostic and patient care. JIB 2020 is a unique networking opportunity for R&D teams to

meet directly with scientists, biologists, doctors and other healthcare professionals. The conference serves a good purpose: disseminating knowledge, cohering a specialty around best practices for diagnosis and care, discussing professionals affairs and, importantly, giving younger specialists in lab medicine, trainees, and students a chance to meet and to interact physically or virtually with those at the top of their field.

This year, the COVID-19 has forced an even more rapid adoption of new technologies, which are being fasttracked to battle the global pandemic and the French Health authorities has put into practice "regulatory agility" to move new IVD and biomedical products through regulation, realizing the need to get new innovations out as quickly as possible. In response to the needs of the moment, the scientific program will include a dedicated SARS CoV2 track.

During these two days, you will have top motivational speakers discussing real-life medical and biological case studies to help you implementing value-based biological diagnostics in healthcare. The opening will focus on how AI can be used in lab medicine and how data, digital technology and AI can improve population health, and transform our professional exercise, and healthcare systems from being reactive to becoming proactive and even predictive.

The key topics of the congress include: the exciting and maturing area of genomic medicine; Rare vascular diseases; Point-of-Care screening for Hepatitis C Virus Infection; HIV rapid diagnostic test (RDT) and self-tests; Cervical cancer: markers, vaccine and screening campaign; Inflammatory biomarkers; Hemostasis; Biotherapies in myelodysplasias; Difficult blood group types, Highly sensitive troponins; Early diagnosis of chronic liver diseases; Fertility and society; Antibiogram and antibiotic resistance, Immunology and cancer, Prostate Cancer and prostatic diseases, etc. The IFCC C-MH-BLM is presenting two sessions: first the survey on how medical biologists are using mobile technologies and how they are recognizing the perks and benefits of mobile health; the second session on e-cardiology will identify, the pertinent evolution of eHealth technologies in cardiovascular fields relevant to daily practice. In addition, many staff associations and trade unions workshops will be organized to discuss on the evolution of the profession in France, Europe as well as in the French-speaking Arab countries.

With the SARS CoV 2, it is very important to remain alert and to respect both the barrier measures and the remaining restrictions. The COVID-19 is leading to new ways of working in addition with the physical scientific meetings. This is the reason why the format of the JIB 2020 will be totally new and innovative, evolving with a hybrid format in relation with the sanitary situation. Of course, the face-to-face sessions allow to achieve our primary goals of sharing and discussing data and insights on the evolution of lab medicine, to save the personal-interaction aspect, keeping the community together and generating new ideas through unplanned interactions. But, given the fact that it is desirable to have flexible exchanges, the organizers pointed out that many adjustments will be made introducing virtual participation. JIB 2020 will interplay between the physical world, virtual world and cloud continuum that are currently quite separate. These flexible exchanges with both, face to face and virtual sessions will maintain benefits in dialogue and scientific exchange with the lab medical community while protecting the health and safety of the attendees and technical staffs.

There are a lot of advantages to hybrid congress formats and we're going to see more of them in the future. Online meetings don't have to mean a lack of serendipitous interactions and networking. This year, the JIB' organizers will be able to replicate a lot of content online and there will still be physical components and on-site meetings for those who can travel. With the hybrid meeting, audio recordings and slides of some talks will be made available online, as well as PDF files of posters. Attendees can ask questions on online chat rooms. Corporate exhibitors will have also virtual booths where they can show films. Online workshops will be held live, with attendees asking questions on-screen text boxes, and can also be viewed later at participants' leisure.

Join JIB 2020 to share knowledge, ideas and innovations. The following link provides additional information about JIB events: https://jib-innovation.com/en_US/.

We look forward to being connected with you and we will be delighted to have you present at the JIB 2020!



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IFCC WELCOMES A NEW CORPORATE MEMBER

Megalab, JSC

ControlCont

Megalab was founded in 2017 by "Georgian Healthcare Group". It is the first multidisciplinary laboratory in the region, combining clinical and pathological departments.

The laboratory is designed according to the JCI (Joint Commission International) standard, which is the highest accreditation body for medical institutions in the United States. 20 million GEL was invested in the creation of Megalab.

Foreign partners took part in the creation of "Megalab", which will continue to actively participate in the process of quality development and maintenance. Among them, there are such international brands as Labpon (Netherlands), BioLab (Jordan).

In Megalab you can find equipment from well-known manufacturers such as Siemens, Leika, Carl Zeiss, Thermofisher, BioMérieux and more.

It is a laboratory hypermarket where it is possible to perform any test necessary for humans, including newly introduced high-tech areas: digital and molecular diagnostics and also analysis of any type of biological material.

The laboratory has about 150 highly qualified staff. Among them are leading Georgian specialists working in Europe. Megalab constantly strives to improve the qualifications of its staff with the help of various international or local trainings. In addition, Megalab promotes the upbringing of the next generations, the education and employment of students and residents, as part of the development of corporate social responsibility.

Since January 2019, the laboratory has been cooperating with about 100 medical institutions, including leading hospitals. Today Megalab already serves more than 3.000 patients a day, although the capacity of the laboratory exceeds 6 million different profile tests per year.

Website:

www.megalab.ge.

IFCC'S CALENDAR OF CONGRESSES, CONFERENCES & EVENTS

We advise readers to keep up-to-date about the evolving situation and possible rescheduled dates. Contact organizing secretariats for updates on upcoming events.

Calendar of IFCC Congresses/Conferences and Regional Federations' Congresses

| Oct 15, 2020 | Live Series Fall 2020 | IFCC Live Webinar Series – Fall 2020: Advancing Internal and External Quality Assurance on a Global Scale | IFCC Live webinar |
|-------------------|--|---|----------------------|
| Nov 4, 2020 | Live Series Fall 2020 | IFCC Live Webinar Series – Fall 2020: IFCC Newborn Screening (NBS) - Initiative: Reducing Infant Mortality Through Early Diagnosis | IFCC Live webinar |
| Nov 25, 2020 | Live Series Fall 2020 | IFCC Live Webinar Series – Fall 2020: Value and Impact of Laboratory Medicine in Patient Care: Developing the Evidence | IFCC Live webinar |
| May 16 - 20, 2021 | EUROMEDLAB 2021 MUNICH | XXIV IFCC - EFLM EuroMedLab Munich 2021 | Munich, DE |
| May 27 -29, 2021 | ARAB FEDERATION OF CLINICAL BIOLOGY AFCB | AFCB Congress 2021 | Beirut, LB |

| Sep 23 - 25, 2021 | A Statement of Clinical Control of Clinical Co | AFCC Congress 2021 | Lusaka, ZM |
|----------------------|--|---|------------|
| Dec 6 -7, 2021 | International Federation of Clinical Chemistry and Laboratory Medicine | IFCC-ICHCLR Workshop on overcoming challenges to global standardization of clinical laboratory testing: reference materials and regulations | Paris, FR |
| Mar 28 - Apr 2, 2022 | COLABIOCLI | XXV COLABIOCLI Congress | Leon, MX |
| June 26 - 30, 2022 | FFEE WorldLab | XXIV IFCC WorldLab Seoul 2022 | Seoul, KR |
| Oct 15 - 18, 2022 | | XVI APFCB Congress 2022 | Sydney, AU |
| May 21 - 25, 2023 | EUROMEDLAB ROMA 2023 | XXV IFCC - EFLM WorldLab EuroMedLab - Rome 2023 | Rome, IT |
| New date TBA | Emerging Technologies in Pediatric Laboratory Medicine | International Congress of Pediatric Laboratory Medicine | TBA |

| February 2021 Date TBA | International Federation of Clinical Chemistry and Laboratory Medicine | Critical Role of Clinical Laboratories in COVID-19 Pandemic | Virtual conference |
|----------------------------------|--|--|-----------------------|
| New date TBA | International Federation of Clinical Chemistry and Laboratory Medicine | IFCC Forum for Young Scientists | TBA |

| Corporate Member events with IFCC auspices | | |
|--|--|--|
| Oct 13 - 14, 2020 | Ten Million Reasons to Defeat Cancer, Abbott Global Oncology Summit | APAC, China, Japan online event |
| Oct 14 - 15, 2020 | Ten Million Reasons to Defeat Cancer, Abbott Global Oncology Summit | US, EU, Middle East, Latin America online event |

Other events with IFCC auspices

We advise readers to keep up-to-date about the evolving situation and possible rescheduled dates. Contact organizing secretariats for updates on upcoming events.

| Feb 20 - Nov 15, | Virtual Diploma in Control of Analytical Quality | Mexico - online |
|-------------------------------|--|------------------------|
| 2020 | in the Clinical Laboratory | series of lectures |
| Jun 3, 2020 - | Virtual Postgraduate Course | Mexico |
| Jan 3, 2021 | of Clinical Biochemistry | virtual page |
| Jul 1, 2020 - | International Diploma in Quality Management | Mexico |
| Apr 30, 2021 | According to ISO 15189 | online event |
| Sep 3, 2020 - Dec 15, 2020 | Course on Analytical Quality Control from ABC to SIGMA | Mexico online event |

| Oct 15 - 17, 2020 | XIII Uruguayan Congress of Clinical Biochemistry | Uruguay online event |
|------------------------------|--|------------------------------|
| Oct 15 - 17, 2020 | 18th Greek Society National Clinical Chemistry Congress | Athens, GR online event |
| Oct 16, 2020 | Symposium on "Standardisation and Harmonisation in Clinical Chemistry" | Athens, GR online event |
| Oct 23, 2020 | Pathology and Laboratory Medicine: The Promise, The Hope, The Peril | Padova, IT |
| Oct 27 - 28, 2020 | AACB Virtual Conference | Australasia online event |
| Nov 2, 2020 - Jul 4, 2021 | Virtual Diplomat in Selected Topics of Diagnostic Hematology for the Laboratory (Advanced Level) | Mexico online event |
| Nov 4 - 5, 2020 | Journées de l'innovation en biologie (JIB 2020) | Paris, FR |
| Nov 9 - 11, 2020 | 16th National and 7th International Congress of Biochemistry and Molecular Biology | Iran online event |
| Nov 10 - 19, 2020 | The Fourth International Congress on Biomedicine | Iran online event |
| Dec 1 - 5, 2020 | 6th Annual Meeting (virtual), Saudi Society for Clinical Chemistry | Saudi Arabia online event |
| Dec 3 - 4, 2020 | IX Molecular Cytopathology - Across the Ocean | Italy online event |
| Dec 7 - 8, 2020 | 6th Serbian Biomarker Symposium (SERBIS): Lipid Metabolism in Health and Disease | Belgrade, SRB |
| Dec 9 - 10, 2020 | 7th Serbian Biomarker Symposium (SERBIS): Biomarkers of gastrointestinal diseases | Belgrade, SRB |
| Feb 17 - 19, 2021 | 1st EFLM-AFCB Conference – Laboratory Medicine for Mobile Societies (LM4MS) – 34th National Days of Clinical Biology | Hammamet, TN |
| Mar 4 - 5, 2021 | XVIII Meeting of the SEQCML Scientific Committee | Madrid, ES |
| Mar 15 - 16, 2021 | POCT: Making the point | Rome, IT |

| Apr 14 - 16, 2021 | XXII Serbian Congress of Medical Biochemistry and Laboratory Medicine and 16th Symposium for Balkan Region | Belgrade, SRB |
|-------------------|--|---------------|
| May 24 - 27, 2021 | 10th Santorini Conference "Systems medicine and personalized health and therapy" – "The odyssey from hope to practice: Patient first – Keeps Ithaca always in your mind" | Santorini, GR |
| May 27 - 29, 2021 | II National Meeting Conquilab and Technological | Mazatlan, MX |
| Jun 10 - 11, 2021 | 8th International Symposium on Critical Care Testing and Blood Gases | Biarritz, FR |
| Oct 6 - 8, 2021 | 4èmes Journées Francophone de Biologie Médicale | Rennes, FR |
| Oct 7 - 10, 2021 | 46th ISOBM Congress | Bled, Sl |
| Feb 10 - 11, 2022 | International Congress on Quality in Laboratory Medicine | Helsinki, Fl |
| New date TBA | The 13th International & 18th National Congress on Quality Improvement in Clinical Laboratories | Tehran, IR |
| New date TBA | VI Jornadas Bioquímicas de Cuyo 2020 | San Luis, AR |
| New date TBA | LabMed Next | Rome, IT |
| New date TBA | 24th International Conference on Laboratory Medicine and Pathobiology: An Expert Forum on Innovation in Clinical and Laboratory Medical Sciences | Samos, GR |
| New date TBA | 14th CIRME International Scientific Meeting "Implementation of metrological traceability in laboratory medicine: where we are and what is missing" | Milan, IT |
| New date TBA | 54 èmes Journées de Biologie Praticienne - JBP | Paris, FR |

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Regional Federations

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India: Association of Medical Biochemists of India (AMBI)
Iran: Iranian Association of Clinical Laboratory Doctors (IACLD)
Jordan: Society for Medical Technology & Laboratories (SMTL)
Kazakhstan: Public Association - Federation of Laboratory Medicine (FLM)
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)

Turkey: Society of Clinical Biochemistry Specialists (KBUD) Ukraine: Association for Quality Assurance of Laboratory Medicine (AQALM)







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Editor

Katherina Psarra, MSc, PhD Department of Immunology - Histocompatibility Evangelismos Hospital, Athens, Greece E-mail: enews@ifcc.org

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