

REPORT ON MY VISIT TO IFCC XII GENERAL CONFERENCE MADRID 2016

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The visit to the IFCC General Conference from 18-22nd March 2016 was most rewarding. On arrival, I was received by the Secretariat and soon met Young Scientists from AFCC, COLABIOCLI, NAFCC, EFLM and APFCB and exchanged notes, information and connected.

On the 19th of March 2016, I enjoyed the session on the IFCC Strategic Plan 2016-2017 and the IFCC EB reports. ZACB is trying to use the business model in developing a Strategic Plan for 2016-2018. The e-academy with 62 authors, 48 resources and 38 learning modules and Foundation of Emerging Nation (FEN) was a welcome development, which both the AFCC and ZACB could adopt.

The Treasure's report highlighted the importance of congresses in creating major finances as well as good relations with corporate and sponsors. The loss due to challenges in investment management reminds me that due care should at all times be instituted so that no losses occur of membership dues. The average annual income of IFCC at 399 million CHF is highly commendable.

The corporate members' report highlighted the code of ethics in business to improve co-operation from the private business who in turn expect some benefit from IFCC members eg. increased awareness of laboratory testing and new diagnostic tests, collaboration exhibition, networking and opportunity to present symposia. The member advised on new legal regulations governing industry sponsorship.

On IVD industry, I learnt that quality has a price tag and that R and D in industry eg of troponin test has long-term reward i.e.: 10 years to get value for investment (reimbursement). Due to harsh economic situations IFCC lost 7 and gained 2 new members ie. Helena and Ningbo.

I enjoyed the presentations of IFCC Federations' report highlighting the scientific and management activities of the six federations and the pertinent discussion that followed. For the AFCC it would be important to grow in numbers as we have 15 members out of 54 countries plus one territory. The AFCC can also benefit in providing various courses to its members and other federations, travelling lecturers' programme, travel and educational scholarships on the vast continent.

IFCC Committee presentations that followed were very interesting. The Cancer Genomics topic informed us of the course earmarked in Ethiopia in 2016. The Mentoring for Emerging Countries programme of the IFCC has started with financial expenditure via ICT. The developing relationship with clinical laboratory stand and institute is most welcome. The IFCC-VLP programme is to develop future scientific leaders and mentors. Developing quality competence in medical laboratories leads to laboratory accreditation in line with ISO 15189. The IFCC provides educational modules transferable and some can be found on e-distance learning.

The lack of reference methods was highlighted with HBA1c test and poor methods on POCT. Some methods have CV up to 20%. Over 100 methods are good, 20 methods are bad.

A change of 1% of CV causes a 10% variation in test value resulting in 21% DM related outcomes complications.

Highlights of the CPD were presented on new intuitive IFCC website, e-newsletter, e-Journal and IFCC e-Academy. The launch of IFCC mobile is commendable for iPhone and Android smartphones in i-Tunes and Google Play platforms. The PR committee has moved to e-media to develop communication among 90 members 52 corporates members in 6 federations. The value of clinical utility of laboratory testing was discussed and gaps identified. I learnt the clinical and economic data linking that improves clinical decision making and patient care.

The meeting was taken on a guided tour of the IFCC website of over 760 pages; representing all activities of the IFCC. Digital publishing was extensively discussed and a live demonstration with Apple i-Books being recommended.

The day ended with a dinner talk on “The Protective Role of Mediterranean Diet in Cardiovascular Disease, Risk in Environmental Health Protection”. The saturated fatty acids in diets are proportional to development of CHD.

Increased antioxidants lower CVD mortality by up to 40%. In blue zone Ikali Island of Greece people live well more than 100 years.

A session on corporate members highlighted how science and technology assist everyone to a better life, discussed rapid changes in law, use of ICT in diagnostics e.g. connected devices (IOT), self testing with POCT in glycaemia etc. New opportunities are opening as challenges arise such as drug resistances requiring innovations.

The Scientific Division presented the need for standardisation, decision limits and activities of its 6 committees and 14 working groups. ISO17511:2003 and ISO17511 were discussed showing the need of traceability, commutability and harmonisation in a systematic manner. The role of case studies in Thyroid Function Testing were discussed in standardization/harmonization of T4, TSH immunoassays including CSF proteins, eg.

A β 1-42 for Alzheimer’s disease; challenges of developing harmonizing auto-immune tests, humanoid robots, self-testing, e.g. contact lens, disposable stick-on sensors, P4 medicine, etc and the future disruption of several emerging technologies. Laboratory and clinical issues relating to cardiac biomarkers with high sensitivity cardiac troponin, existing cardiac troponin and population characteristics necessary in calculation of cardiac Troponin assays were discussed.

The scientific advancements were very beneficiary and needed more time allocation in my view.

Simultaneous interactive workshops stimulated participants in Precision, Personalised and Stratified Medicine, Critical Values in Paediatric Populations, Young–Scientist–Research Career. Compliance with QMS and QC, Increasing Clinical Effectiveness, Biochemistry Knowledge Management including Radio knowledge socialisation, Training in Clinical Chemistry and Laboratory Medicine, Biological variation and Safety, Demonstrating the

Value of Laboratory Medicine, POCT, Procedures on Proficiency Testing of Rare Analytes, IFCC activities and IVD Industry Support.

Future Congresses in Taipei 2016, EuroMedLab 2017, COLABIOCLI 2017, IFCC WorldLab Durban 2017, IFCC-EFLM Barcelona 2019 and WorldLab 2020 and need for ethics in curricula were presented.

The General Conference closed on a high note highlighting the achievements and feeding the future of IFCC with the many resolutions at the august meeting.

I thank all organisers of this conference for the excellent management of the Madrid 2016 IFCC XII General Conference and the many opportunities availed to me and many others to connect and learn advances in Laboratory Medicine first hand. I will share the experiences with ZACB.

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Prof Matarira with Daria from Russia