

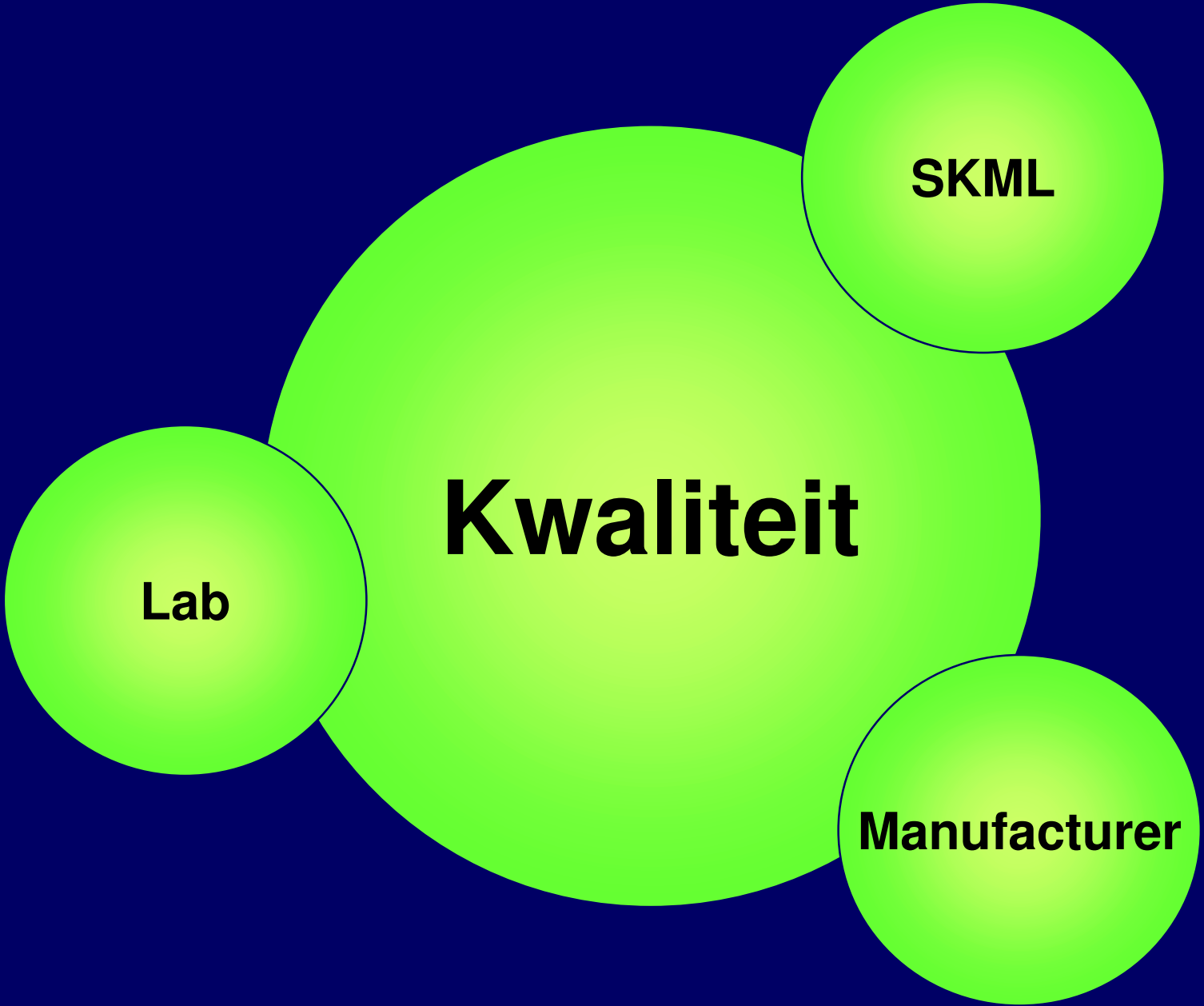
# Zwarte Pietenspel

*Nabespreking Combi Immuno Chemie*

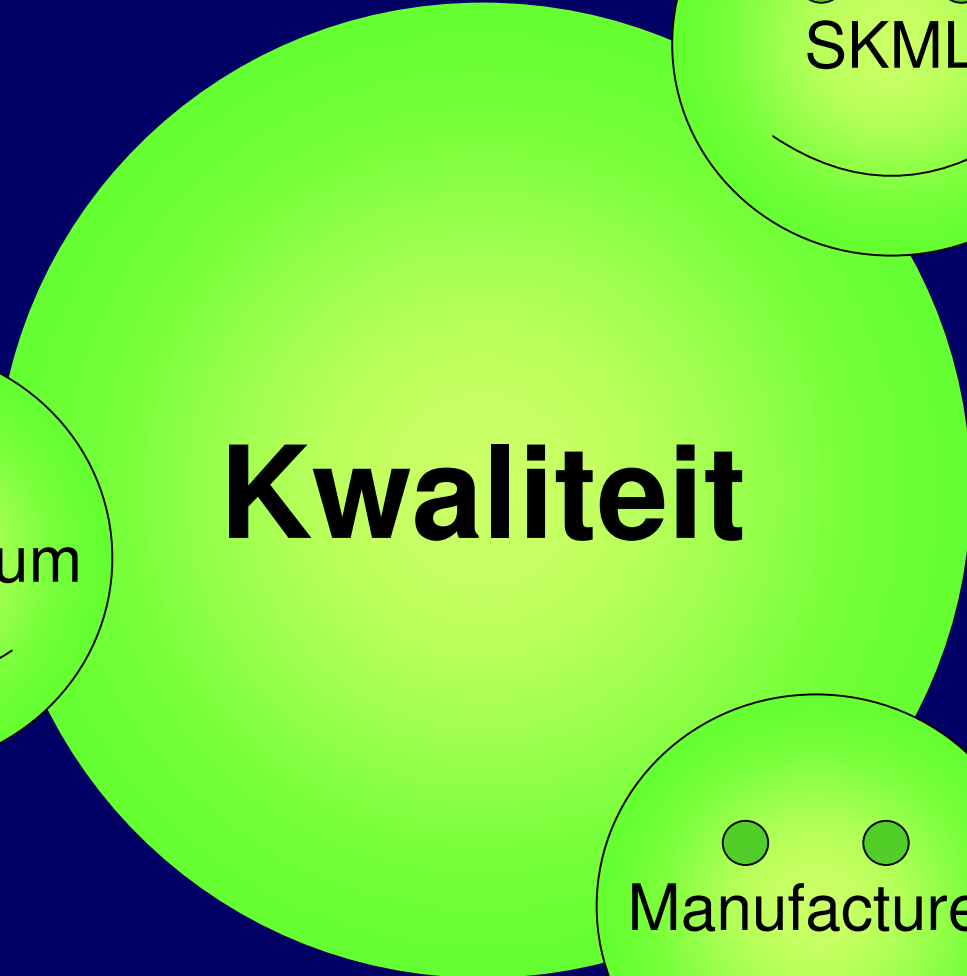


Cas Weykamp, Ina Klasen

*Sectie Humorale Immunochemie, Utrecht 19 januari 2010*

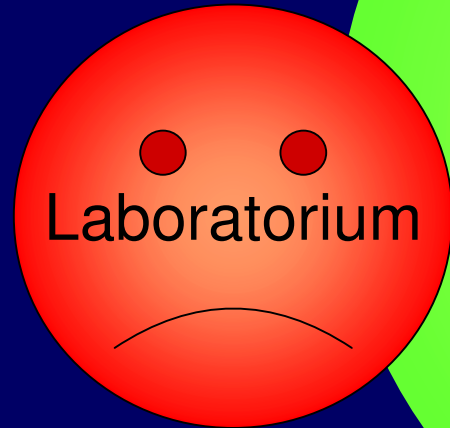
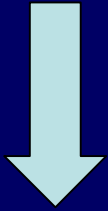


**Kwaliteit OK....**

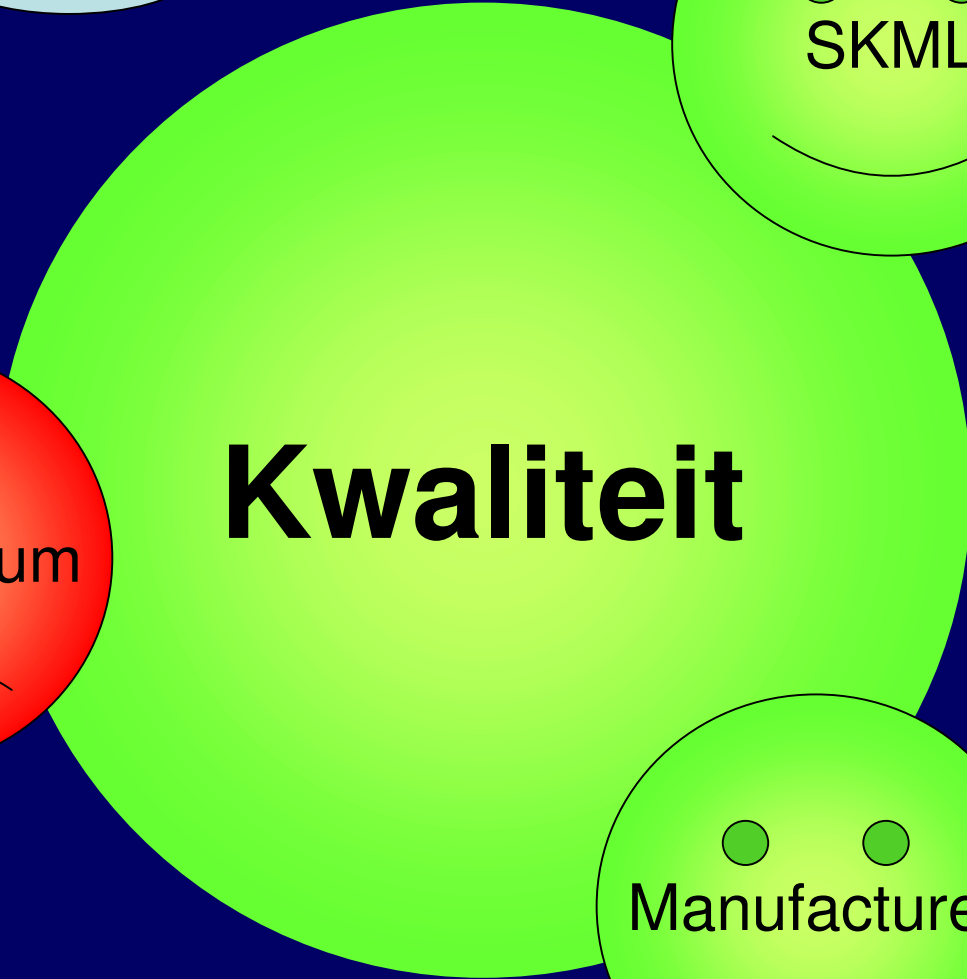


**....All  
Smile**

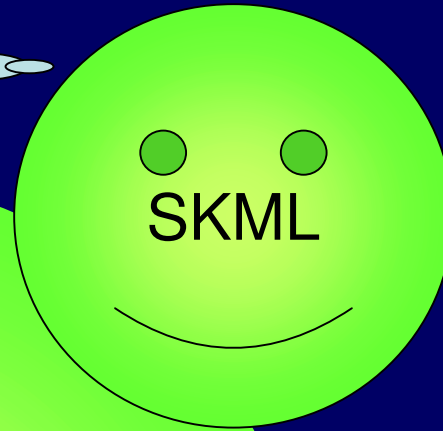
“U scoort slecht”



Laboratorium



**Kwaliteit**



SKML



Manufacturer

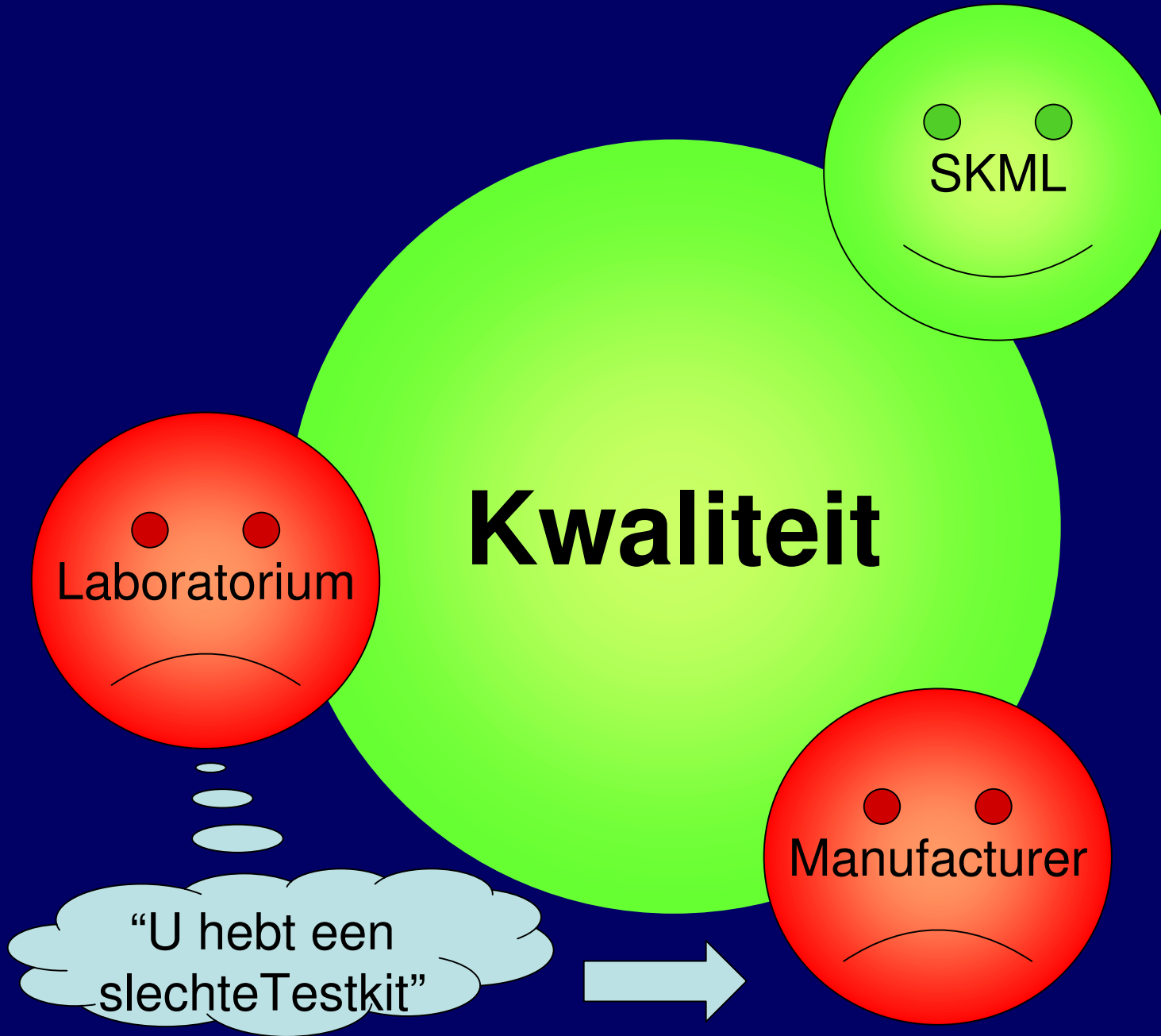
# Kwaliteit

Laboratorium

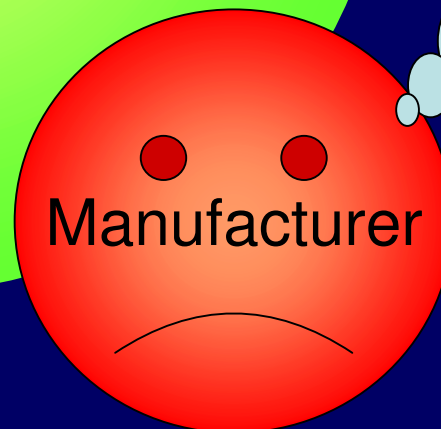
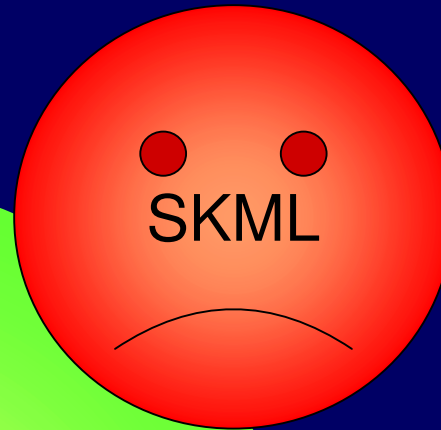
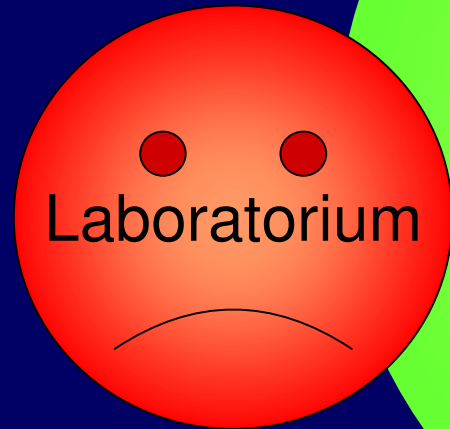
SKML

Manufacturer

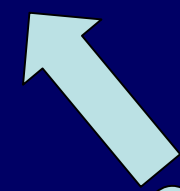
“U hebt een  
slechte Testkit”

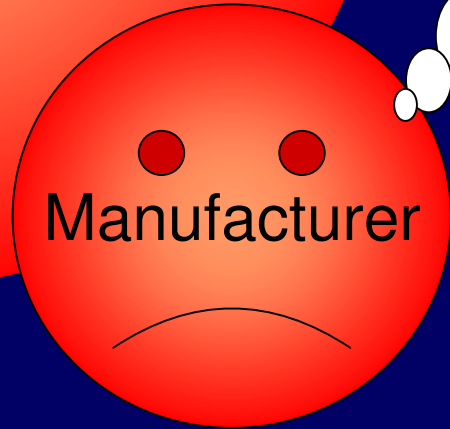
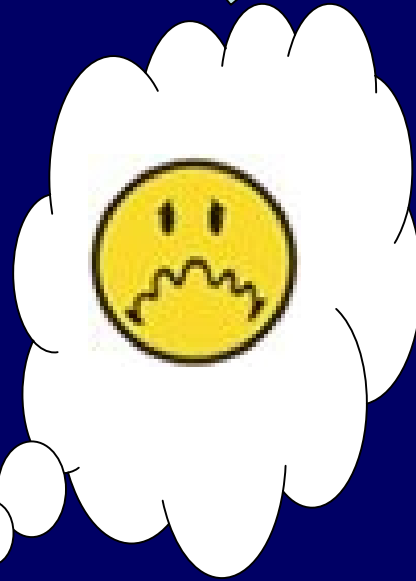
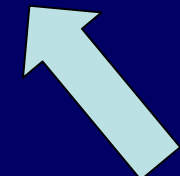
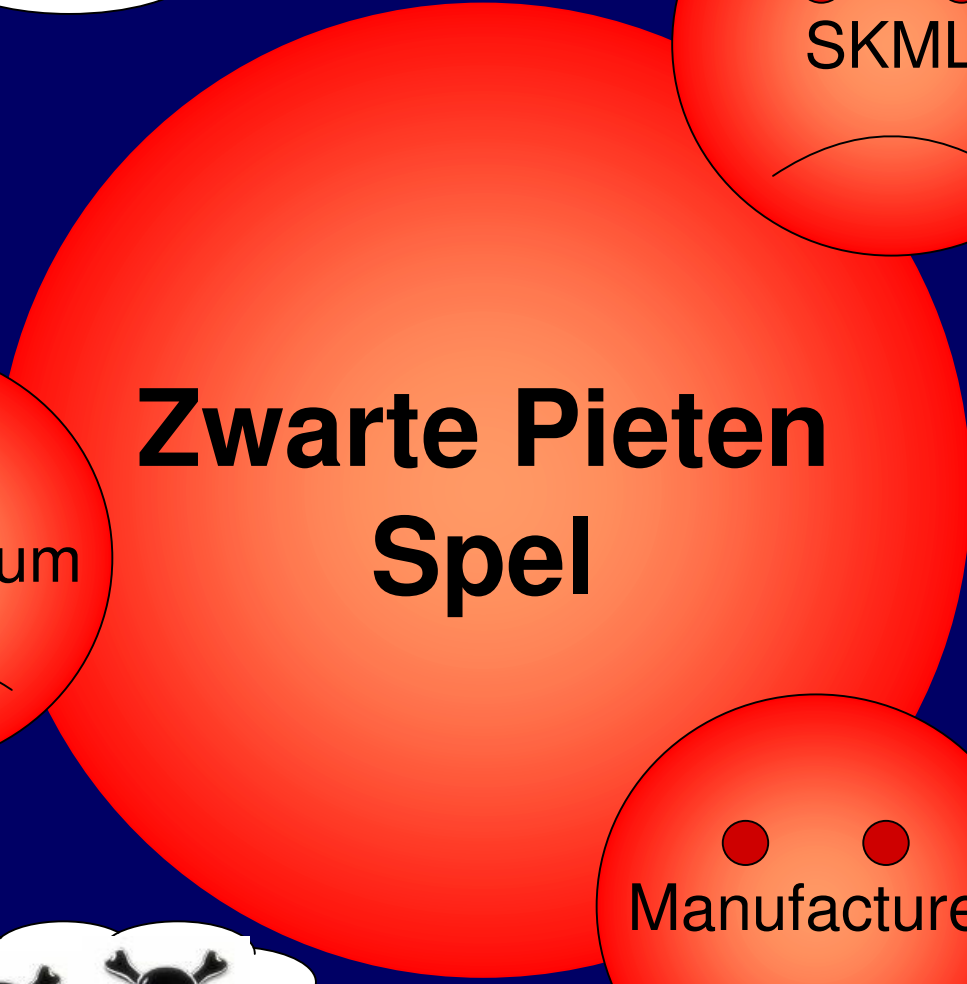
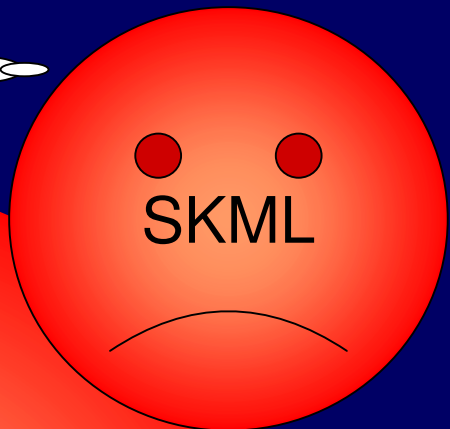
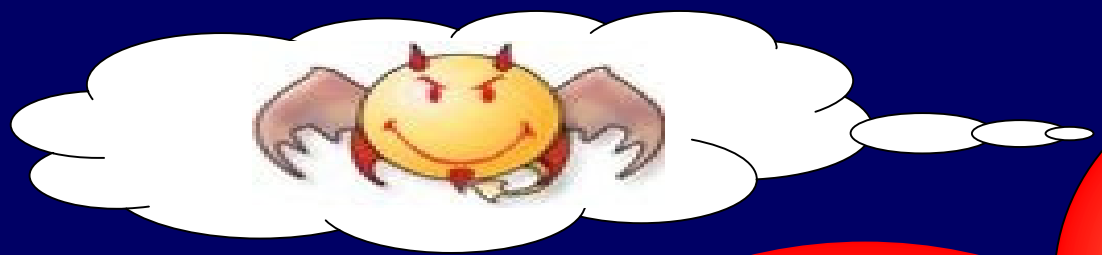


# Kwaliteit



"U hebt  
een  
Slechte  
Rond-  
zending





**Referee**

SKML

# **Kwaliteit**

**Referentie:**

- Laboratorium**
- Materiaal**

Laboratorium

Manufacturer



**Referee**

SKML

**Immuno Chemie  
Referentie: - Materiaal  
CRM-470**

Laboratorium

Manufacturer

# CRM 470

## Referentiemateriaal Eiwitten

*IRMM = Institute Reference Materials Methods*

Europese Unie

Wereldwijd erkend als referentie

o.a. door Abbott – Beckman – Roche – Siemens

α1 macroglobuline  
α1 Zure Glycoproteïne  
α1 Antitrypsine  
Albumine  
Complement 3C  
Complement 4

Haptoglobine  
IgG  
IgM  
IgA  
Transferrine  
Tranthyretine

# Experiment

2003: Gevriesdroogd Monster

Afgeijkt op CRM 470

In Rondzendingen 2006 en 2009

***Wordt de toegekende waarde  
Teruggevonden door de laboratoria?***

# Voorbeeld: IgG

**Afgeijkt CRM 470 in 2003: 13.0 g/L**

**Gemiddeld Gemeten in 2006: 12.7 g/L**

**Gemiddeld Gemeten in 2009: 13.5 g/L**

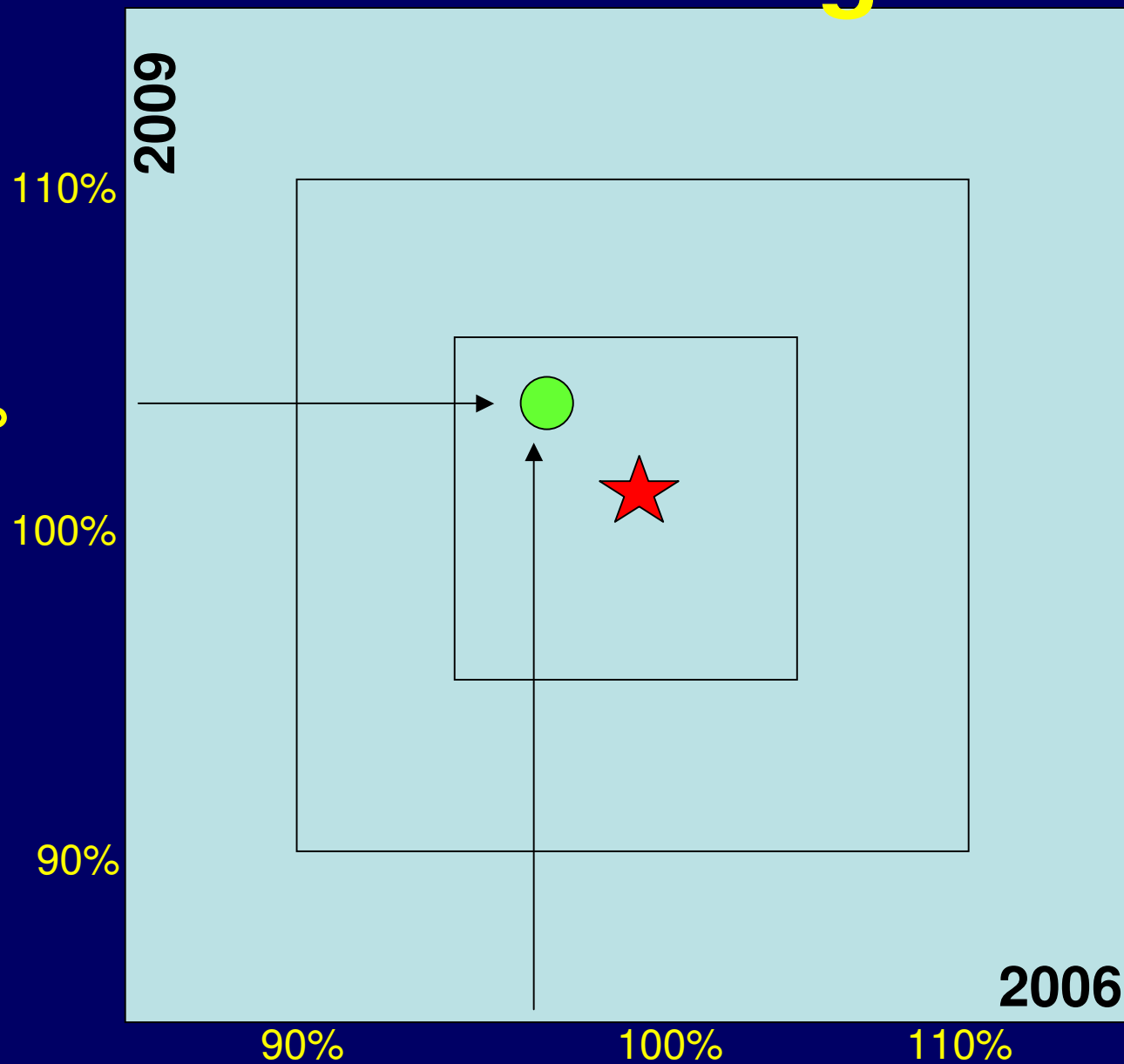
**Recovery 2006 =  $12.7/13.0 = 98\%$**

**Recovery 2009 =  $13.5/13.0 = 104\%$**

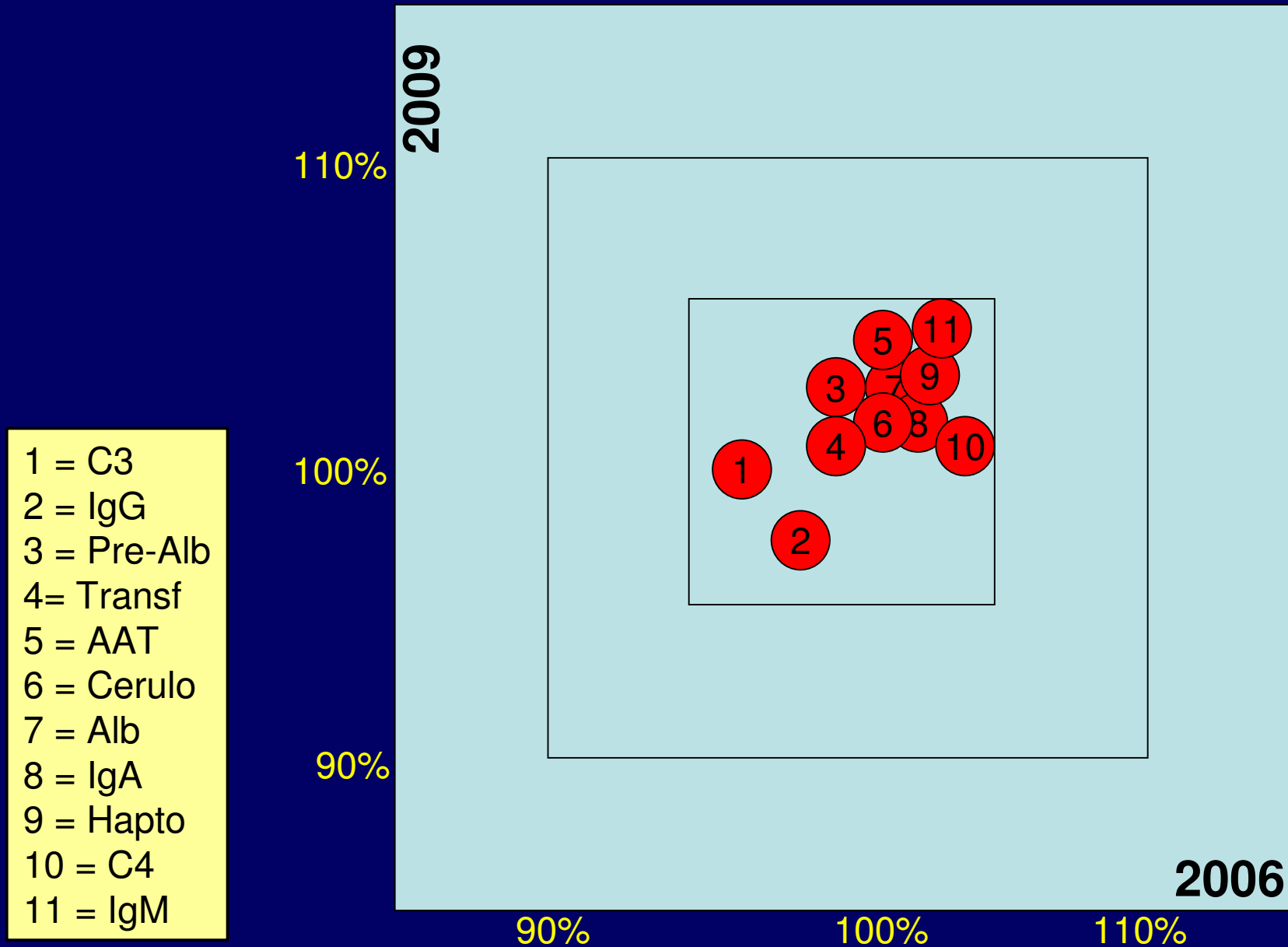
Methode	n	Recovery		Interlab CV	
		2006	2009	2006	2009
AAT	50	101	104	8%	7%
Albumine	49	101	104	5%	6%
C3c	43	97	101	5%	6%
C4	43	104	101	5%	8%
Cerulopl.	23	100	101	9%	13%
Hapto	79	101	104	5%	5%
Prealb	12	101	103	6%	4%
Transferr	84	100	100	4%	5%
IgG	92	98	98	4%	6%
IgA	89	103	101	7%	6%
IgM	89	104	103	6%	7%
Overall		101	102	6%	7%

# Voorbeeld IgG

**2006: 98%**  
**2009: 103%**



# Recovery 11 Eiwitten in 2006 en 2009: Gemiddelde Alle Labs



# Conclusie

**De gemiddelde recovery  
van alle laboratoria**

**Voor 11 eiwitten varieert in**

**2006: van 97 tot 104%**

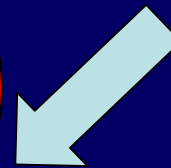
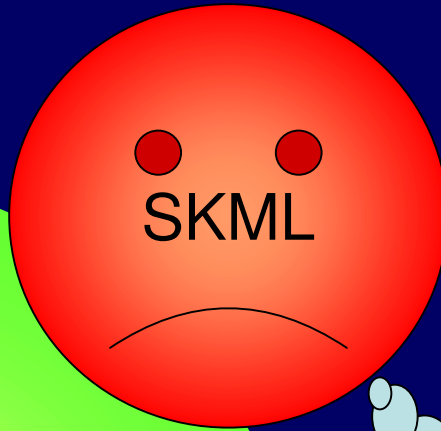
**2009: van 98 tot 104%**

**Excellent!**

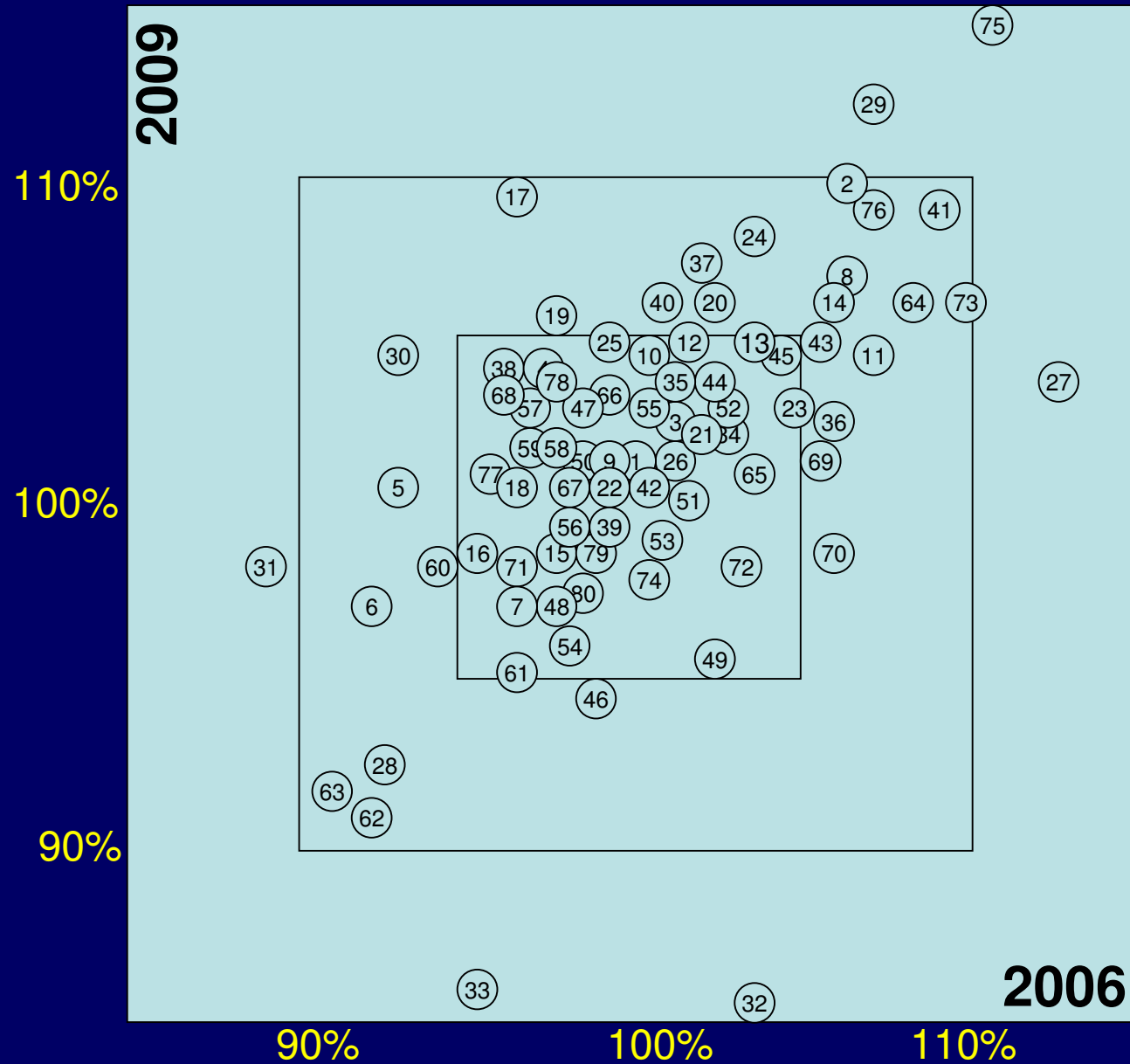
***Maar: Hoe per Methode?***



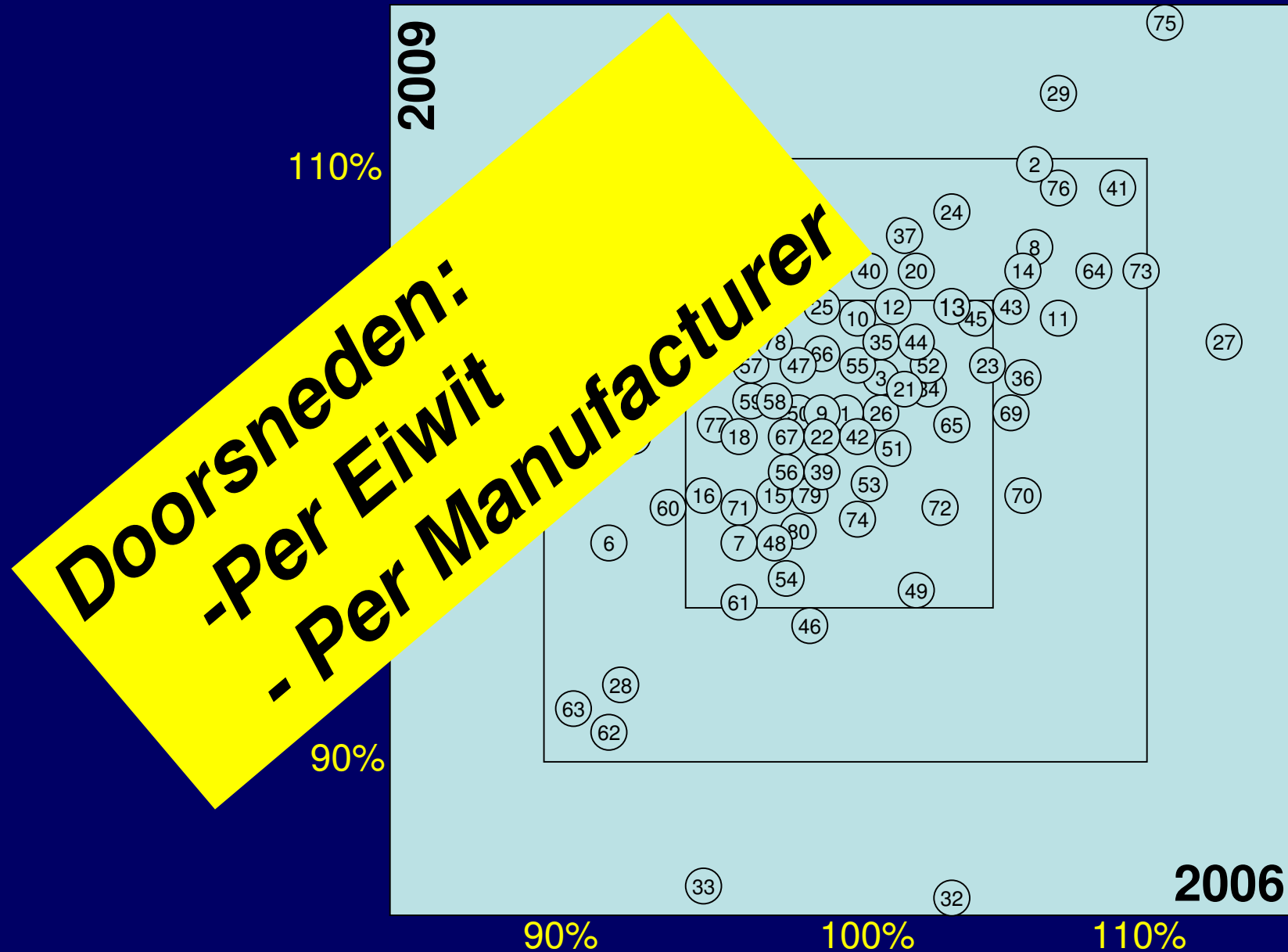
# Zwarte Pieten Manufacturers



# Recovery 2006 en 2009: Per Eiwit en Per Methode

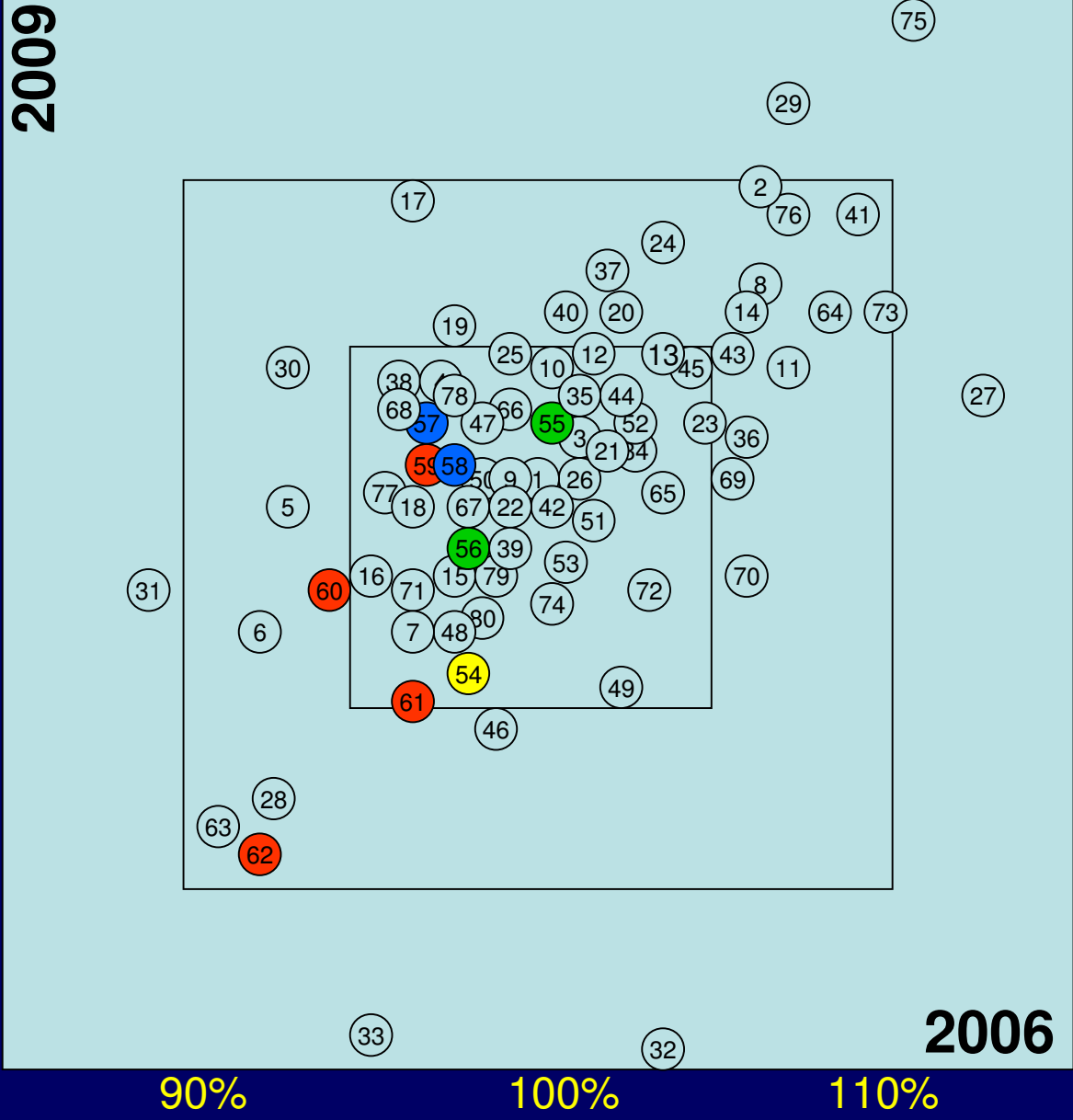


# Recovery 2006 en 2009: Per Eiwit en Per Methode

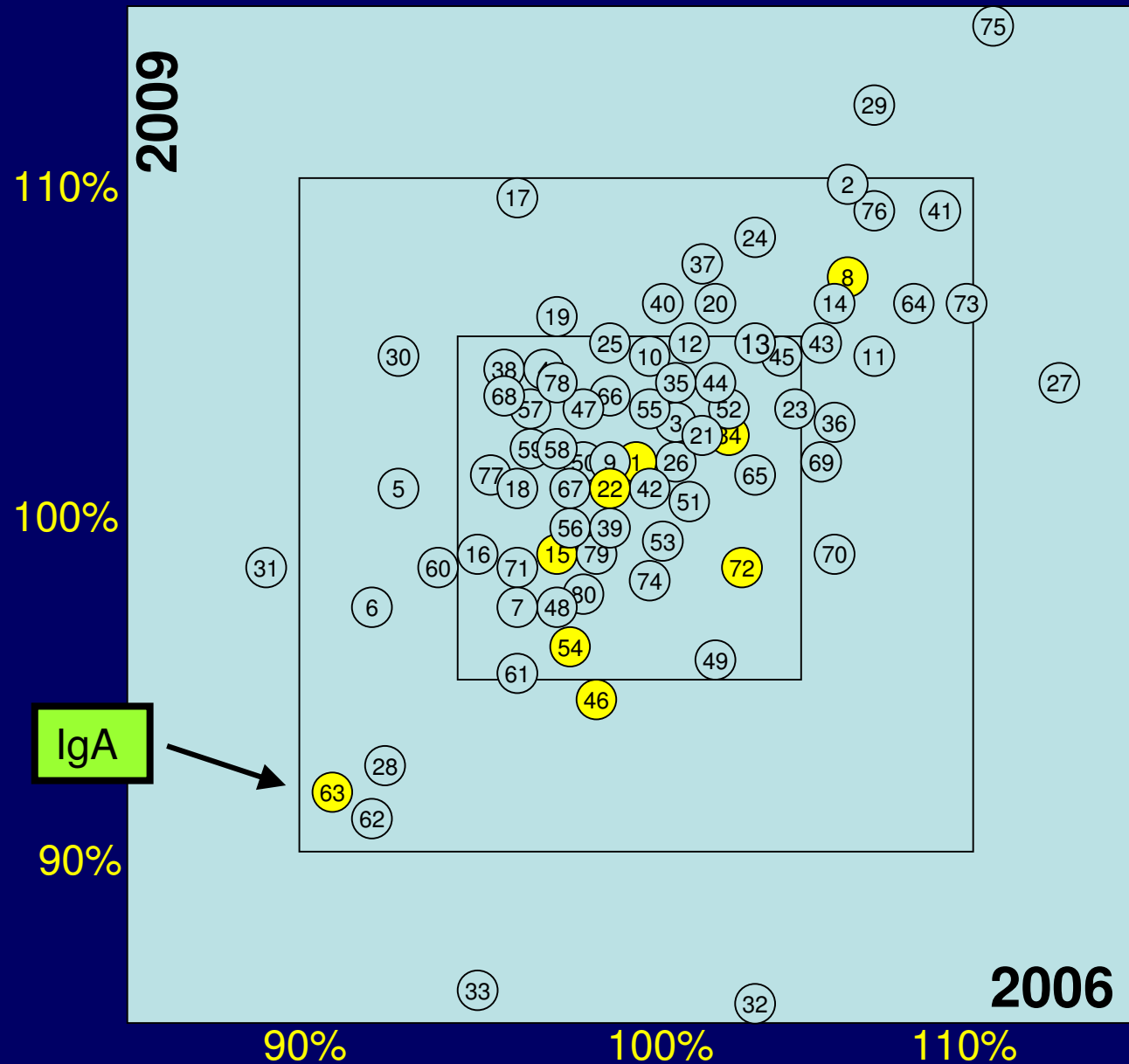


# Doorsnede per Eiwit: IgG

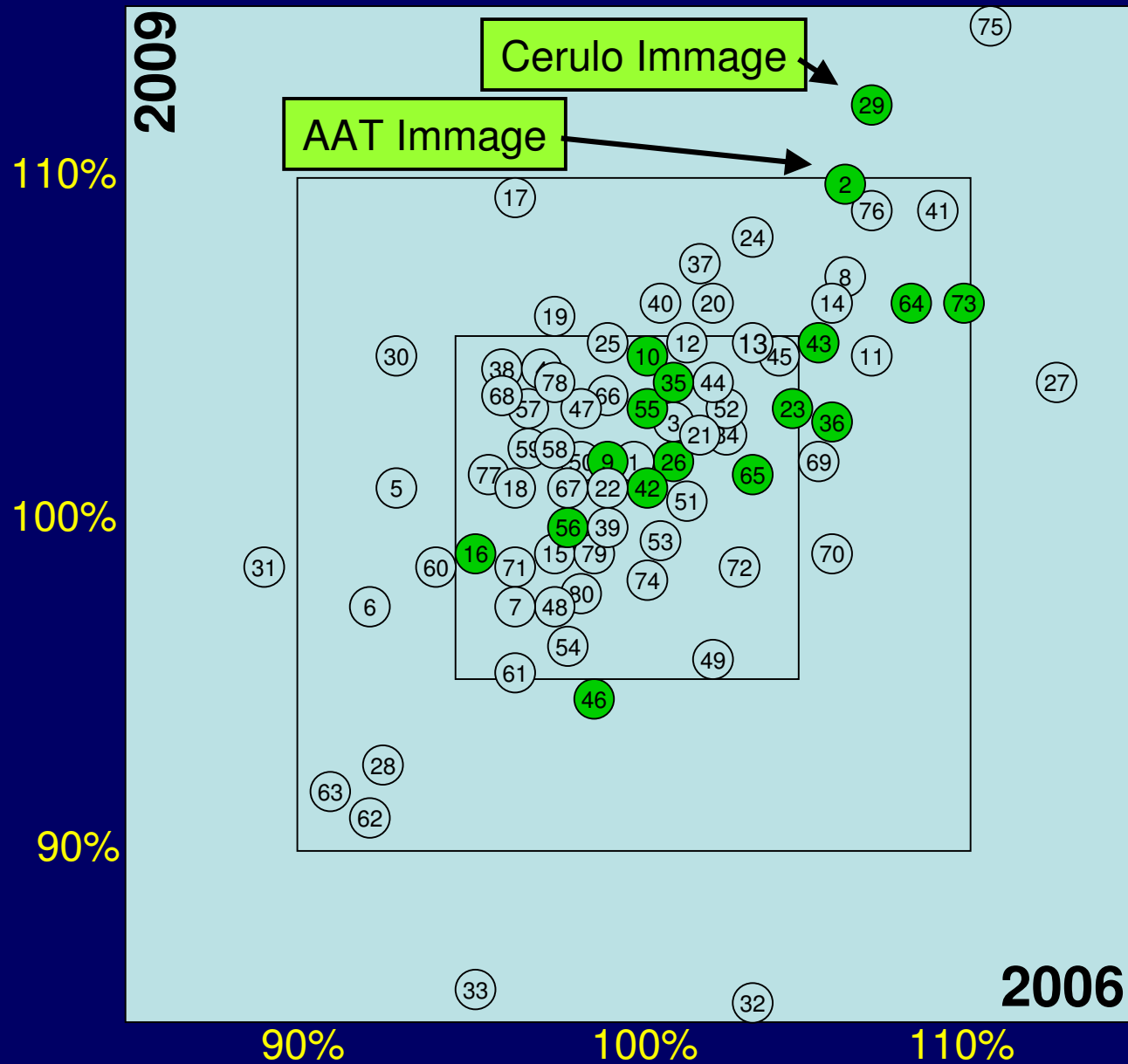
- 54 Abbott Arch 110%
- 55 Beckman Image
- 56 Beckman LX
- 57 Siemens BNII 100%
- 58 Siemens Pro Spec
- 59 Roche Integra
- 60 Roche Hitachi
- 61 Roche Modular 90%
- 62 Roche Cobas 6000



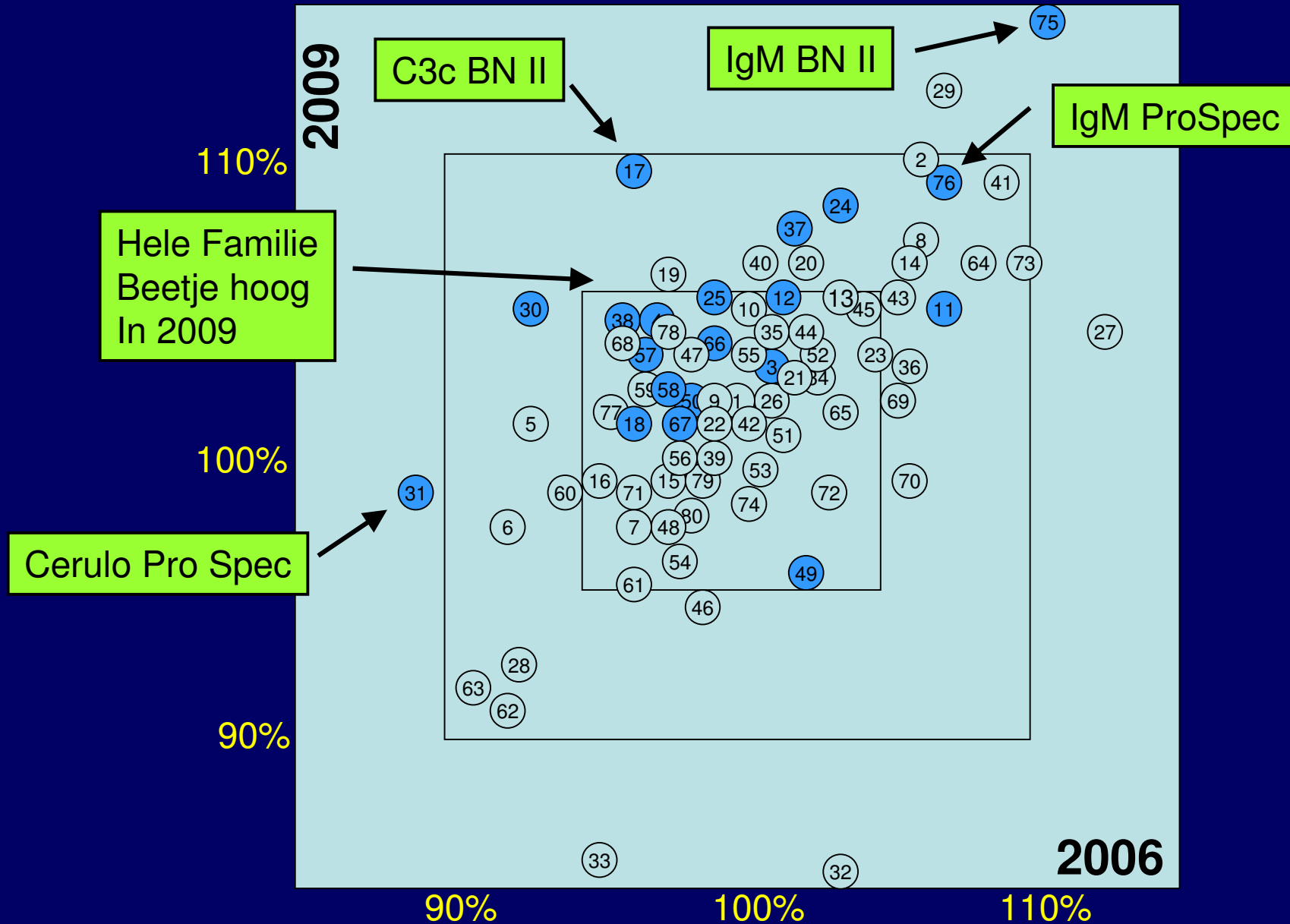
# Doorsnede per Manufacturer Abbott Architect



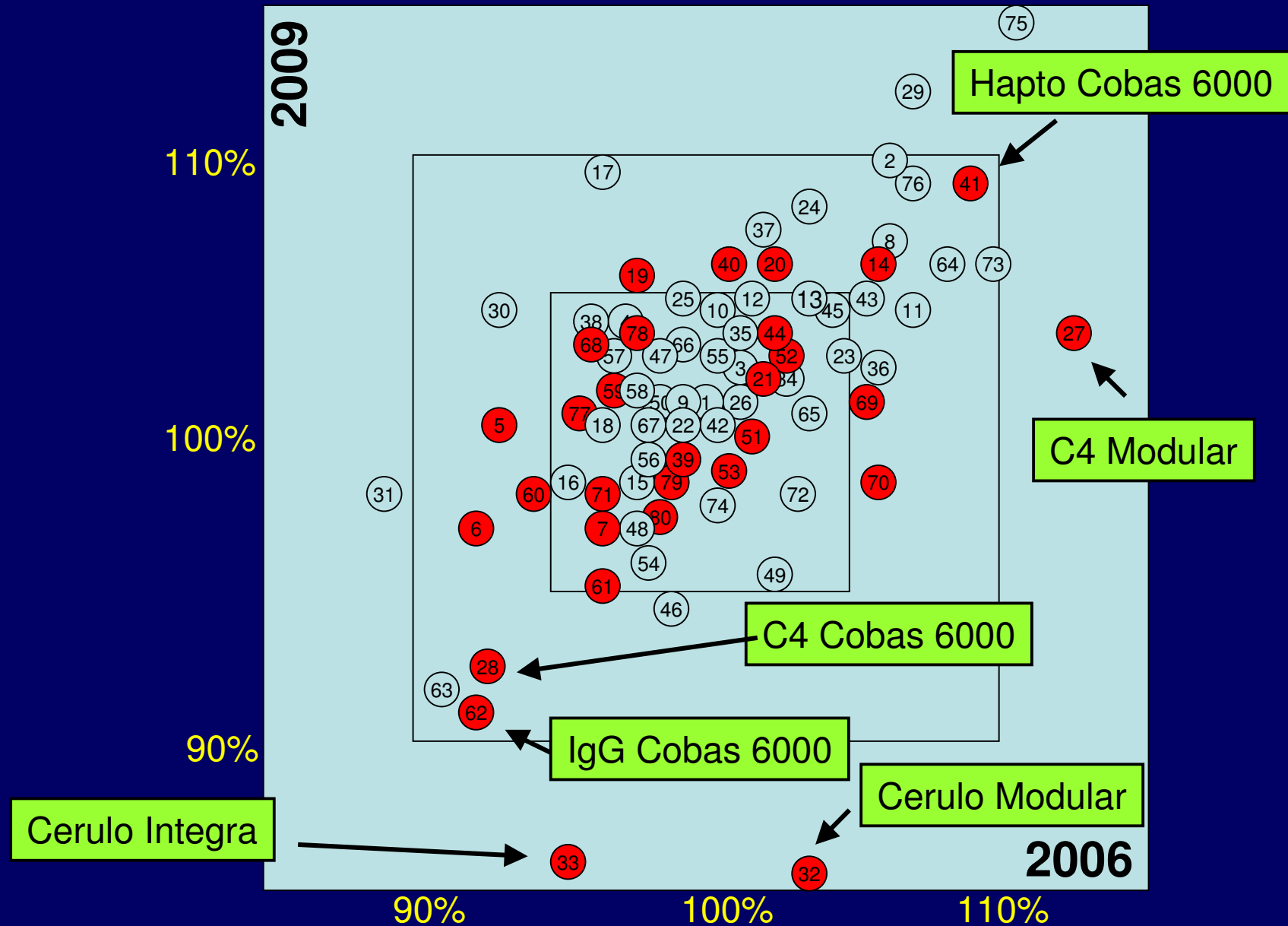
# Beckman Immage en LX



# Siemens Pro Spec en BN II



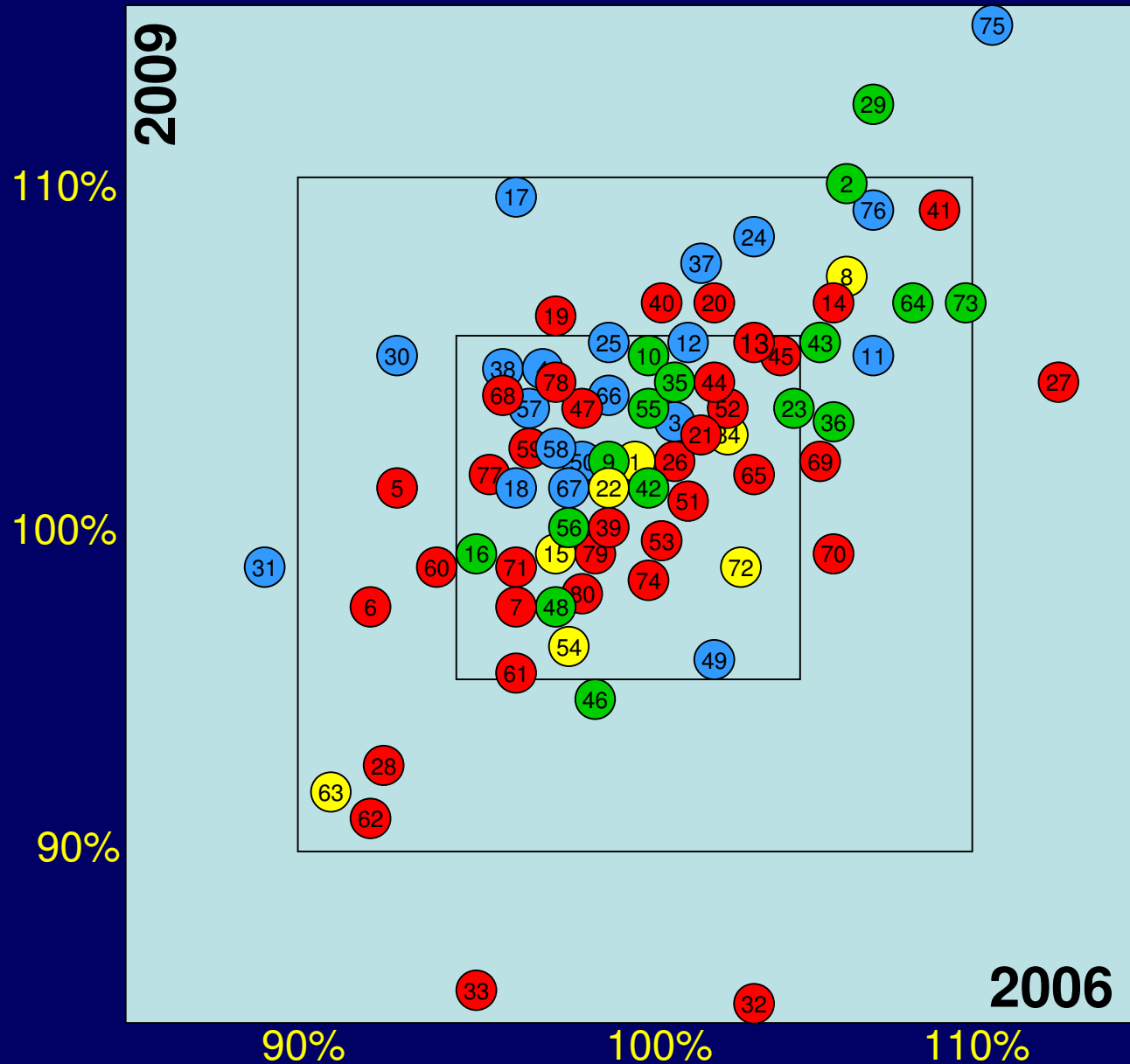
# Roche Modular – Integra – Cobas 6000 - Hitachi





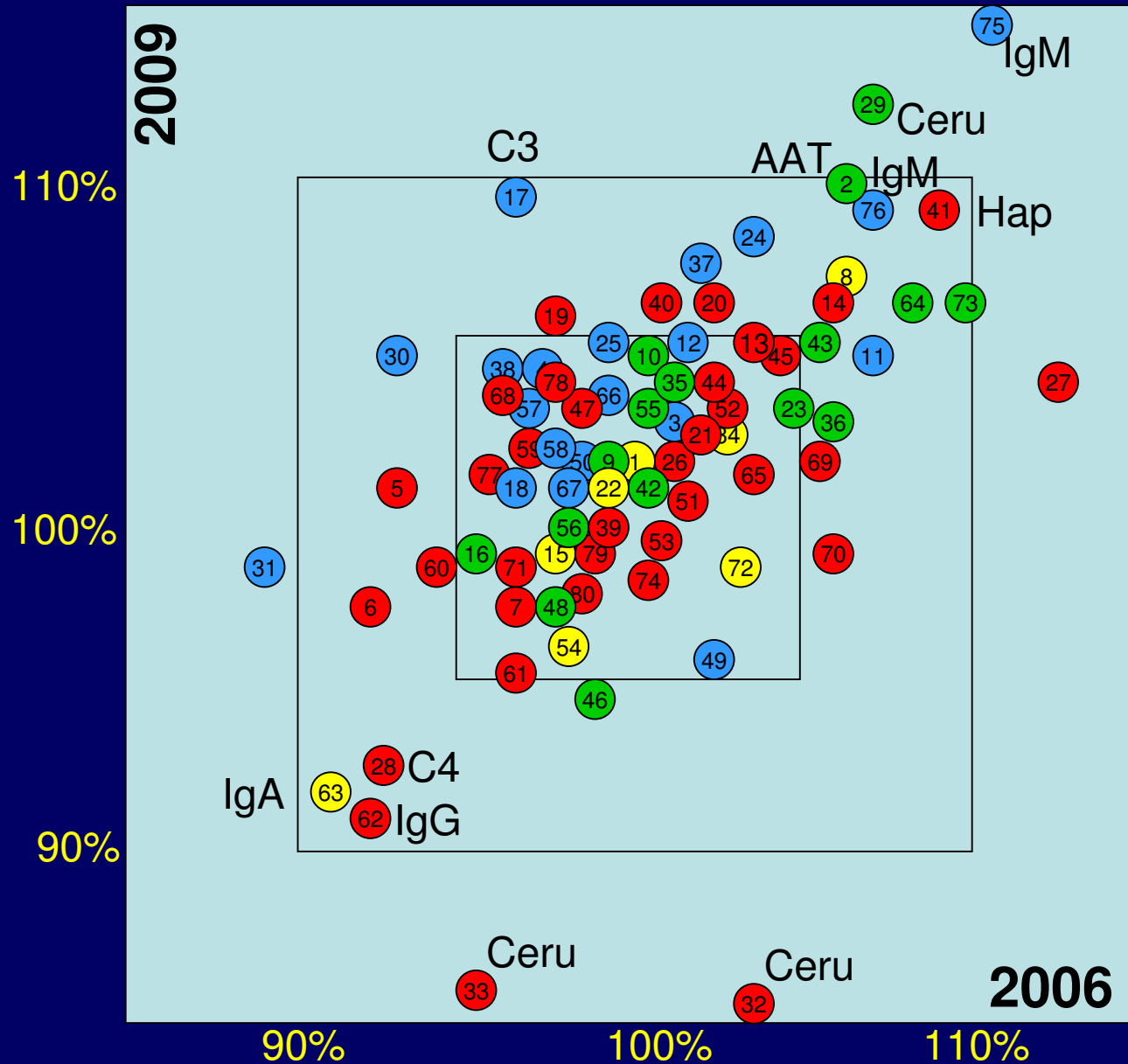
# 11 Eiwitten – Alle Methoden

- Abbott
- Beckman
- Siemens
- Roche

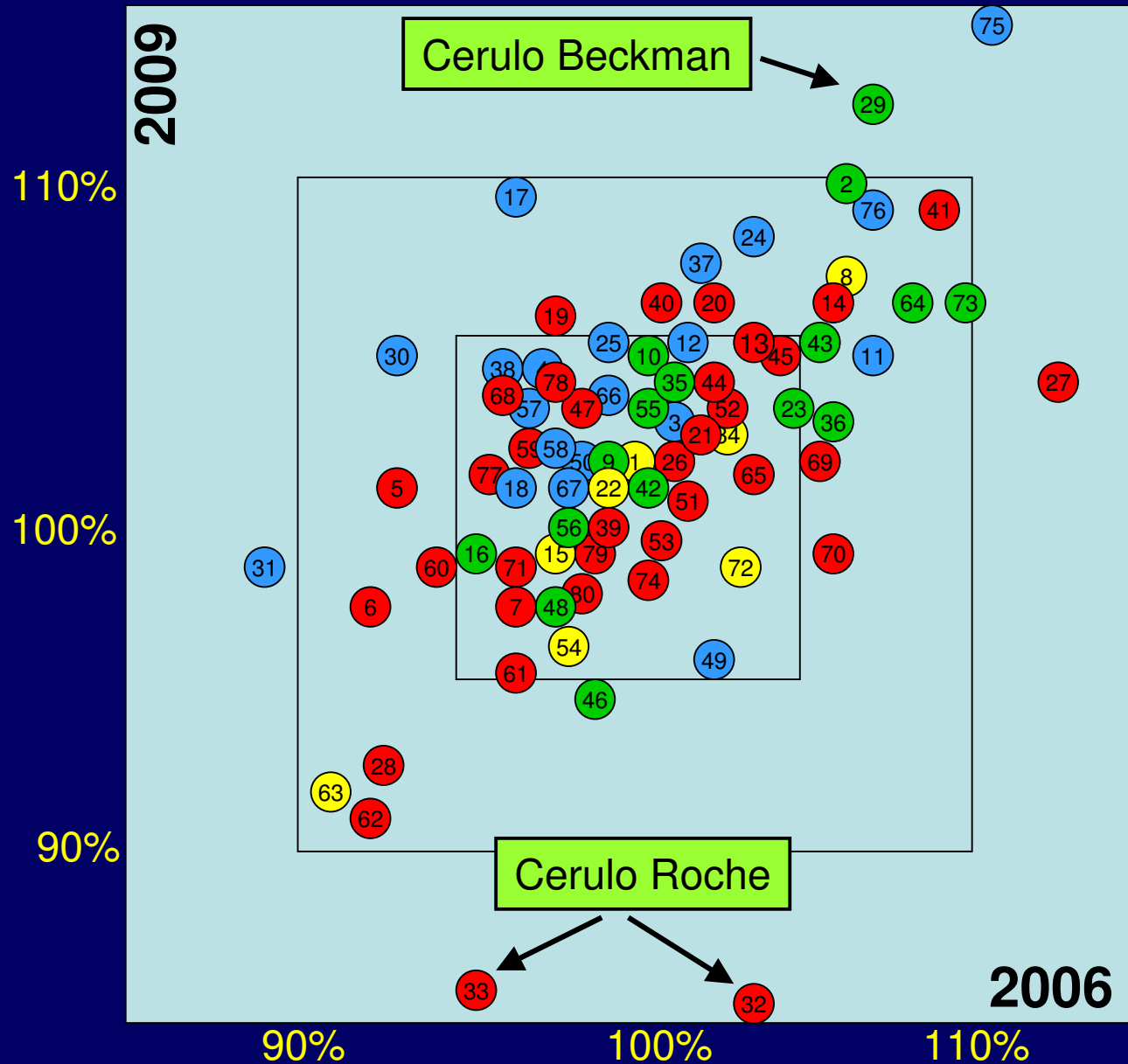


# 11 Eiwitten – Alle Methoden

- 27 Abbott
- 27 Beckman
- 27 Siemens
- 27 Roche



# 11 Eiwitten – Alle Methoden



# Conclusie

**75% minder dan 5% van de Doelwaarde**

**20% tussen 5 en 10% van de Doelwaarde**

**5% meer dan 10% van de Doelwaarde**  
**Ceruloplasmine Roche (laag) Beckman (hoog)**  
**IgM Siemens BNII**

# Conclusie

**75% minder dan 5% van de Doelwaarde**

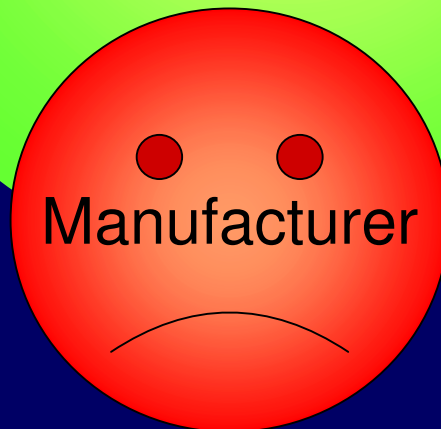
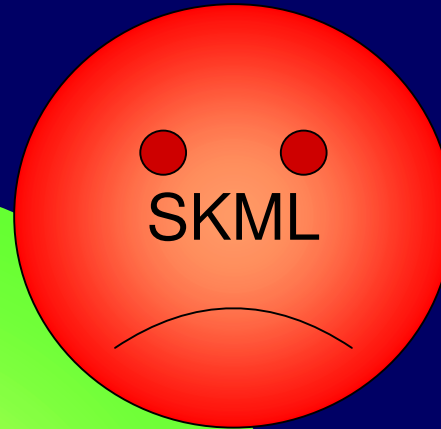
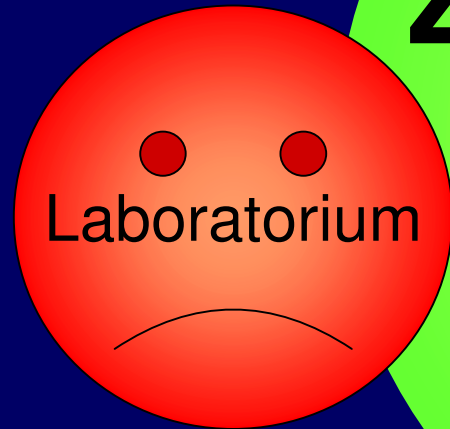
**20% tussen 5 en 10% van de Doelwaarde**

**5% meer dan 10% van de Doelwaarde**  
**Ceruloplasmine Roche (laag) Beckman (hoog)**  
**IgM Siemens BNII**

**Maar.....**



# Zwarte Pieten SKML



# Bram:

“Weet u zeker dat uw Rondzendmonster  
En CRM 470 geen gekookte eieren zijn?”

“Gedraagt uw Rondzendmonster zich als  
Een patientenmonster voor alle methoden?”

“SKML, zijn uw monsters  
Commuteerbaar?”

SKML, kijk eens naar jezelf



# Commuteerbaarheid

**2003:**

**Ina Klasen “SKML monsters OK”**

**2010:**

**SKML monsters: 2010.1F en 2010.4C**

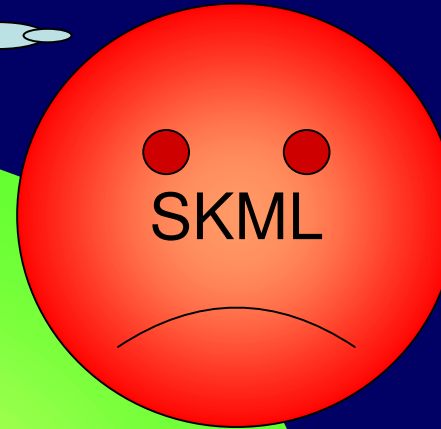
**Natieve Monsters**

**2010:**

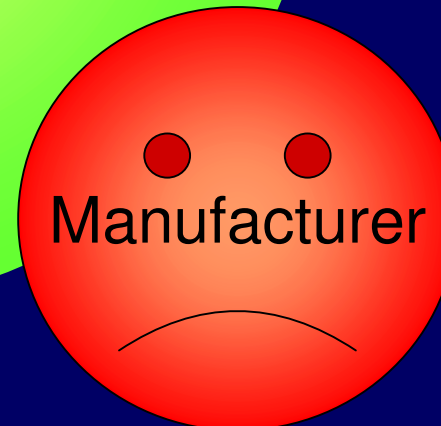
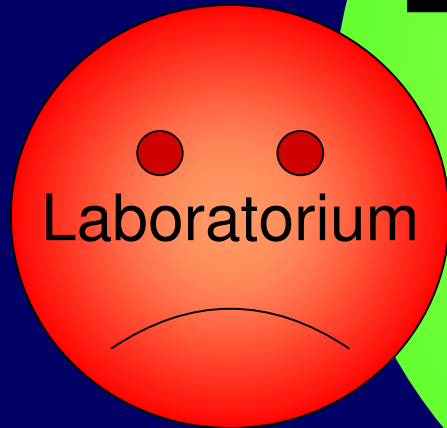
**CRM 470**

**Onderzoek door 6 ziekenhuizen**

“U scoort slecht”



# Zwarte Pieten Laboratoria



# “U scoort slecht”?

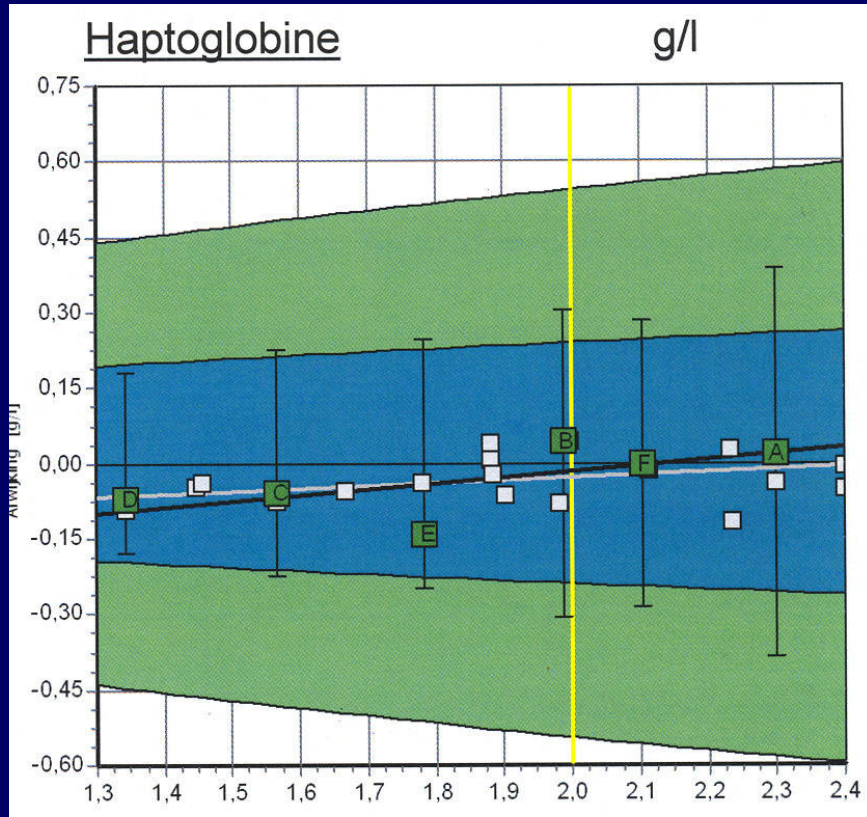
## *2 Criteria*

**In verhouding tot Klinisch Gebruik  
Basis “Biologische Variatie”**

**In verhouding tot prestaties Collegae  
Basis “State of the Art”**

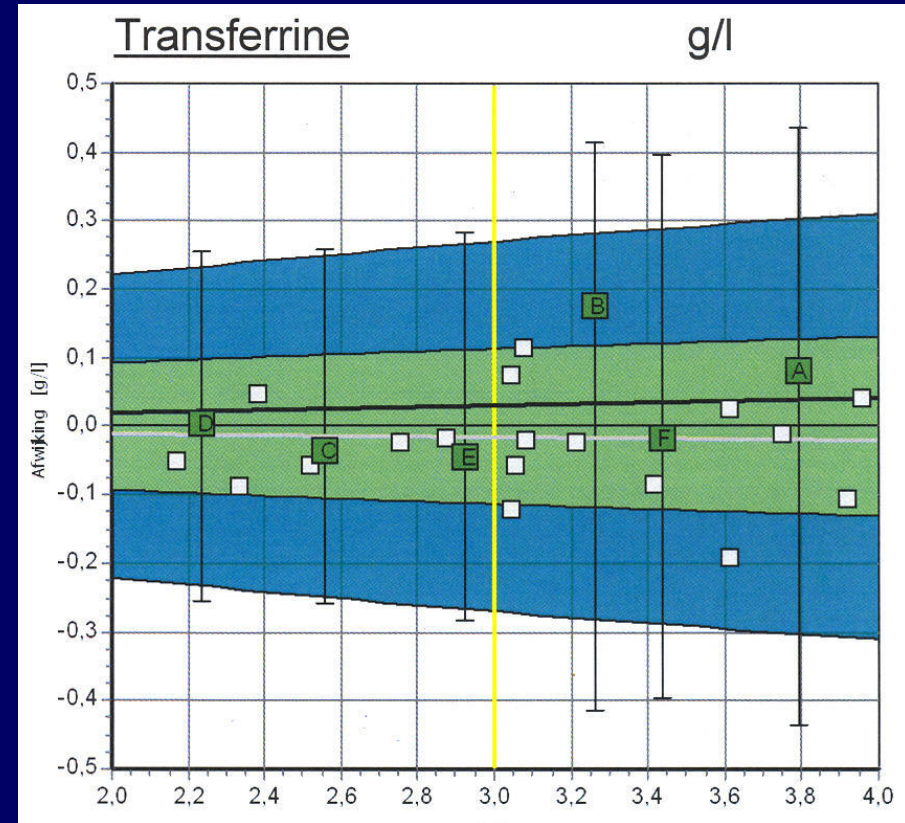
**Blauw: State of Art**

**Groen: Klinische Toepassing**



**State of Art > Klinische Toepassing**

**Labs zijn beter dan nodig is**



**State of Art < Klinische Toepassing**

**Labs zijn niet goed genoeg**

# SKML Rapporten Nu

*De SKML laat uw resultaten zien*

*In vergelijking tot*

*State of Art en Klinische Relevantie*

*De SKML doet geen expliciete uitspraak  
over “goed” of “slecht*

*De SKML verbindt geen consequenties  
aan een slechte prestatie*

# Toekomst

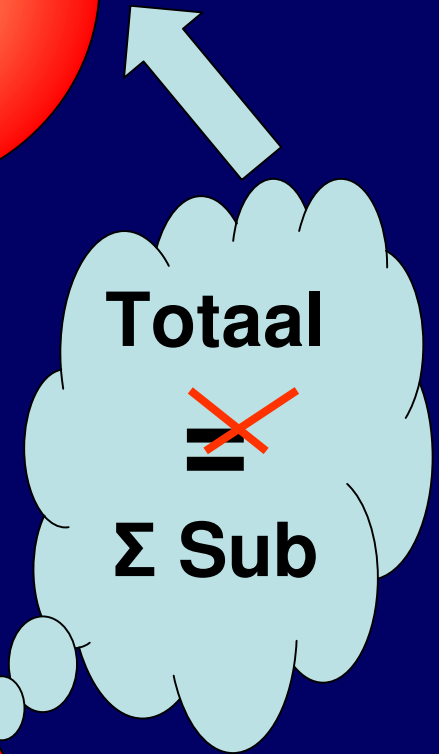
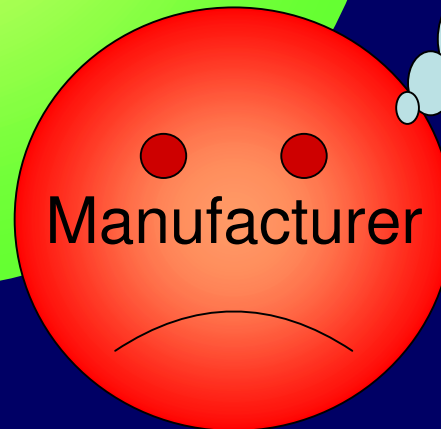
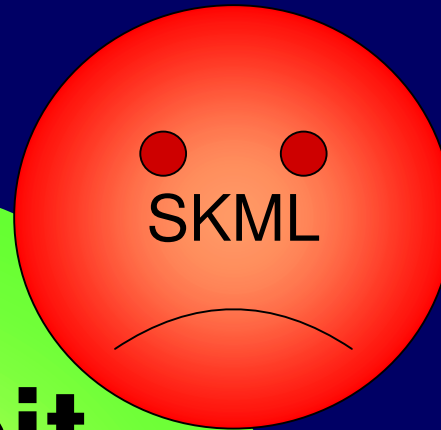
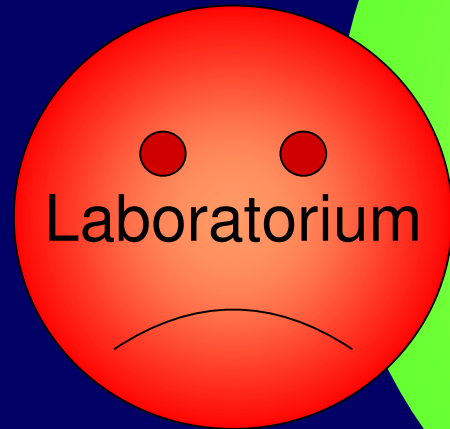
*De SKML wordt Geaccrediteerd*

*Voor Accreditatie is vereist:  
Score en Poor Performance Policy*

*Legitimiteit Score vereist:*

- \* Commuteerbaar Monster*
- \* Doelwaarde (Gemiddelde of Referentie)*
- \* Criteria (State of Art/Klinische Relevantie)  
hoeveel van 24 monsters mogen missen?*

# Kwaliteit IgG Subklassen

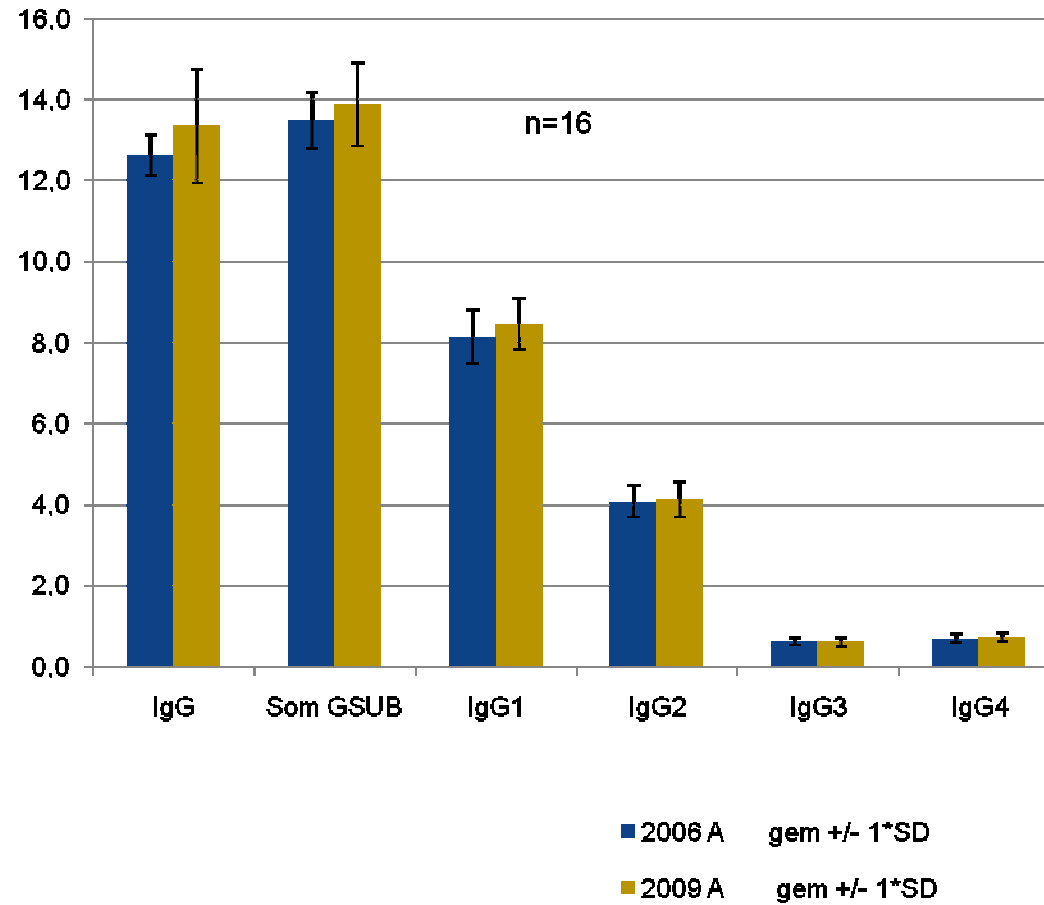


Totaal

~~=~~

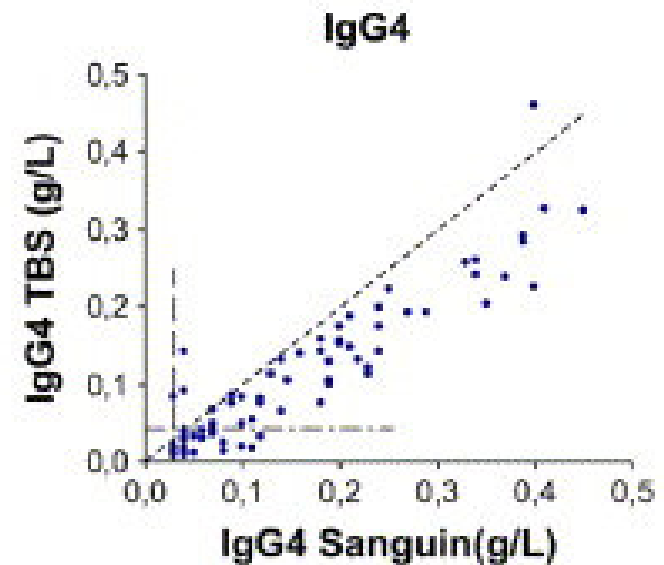
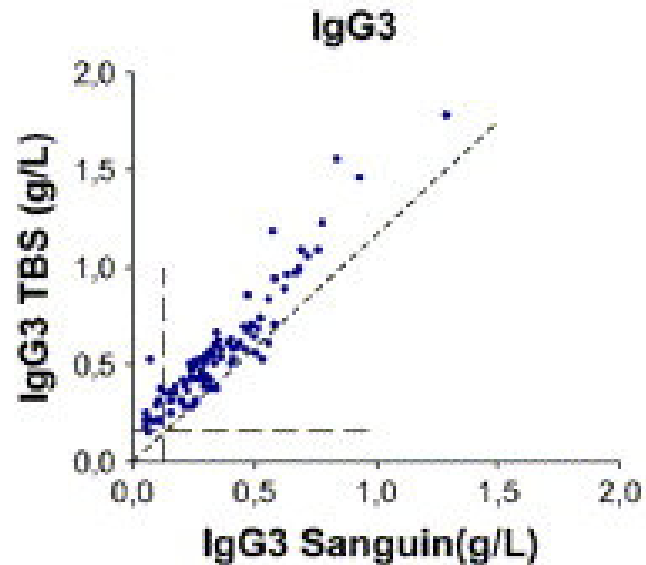
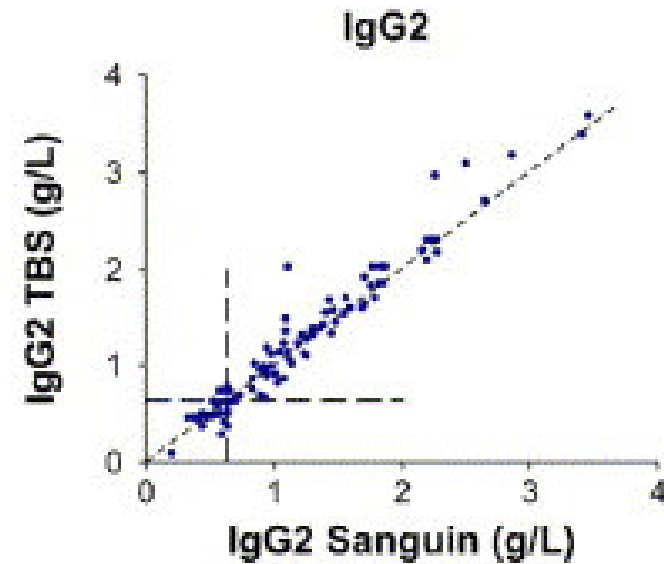
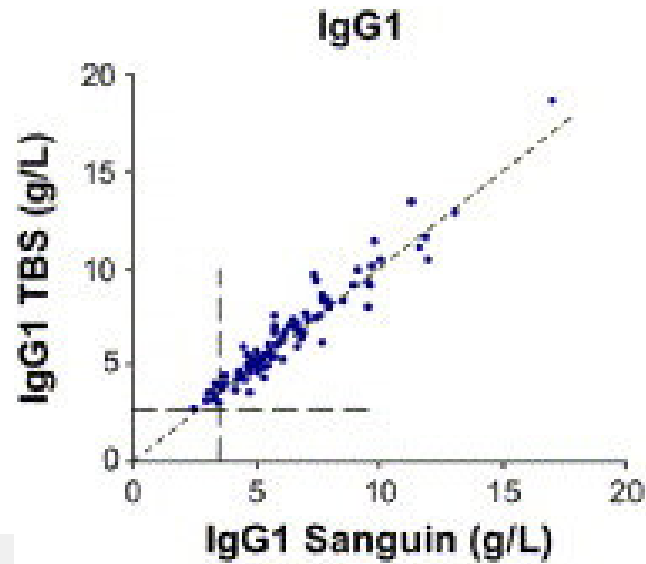
$\Sigma$  Sub

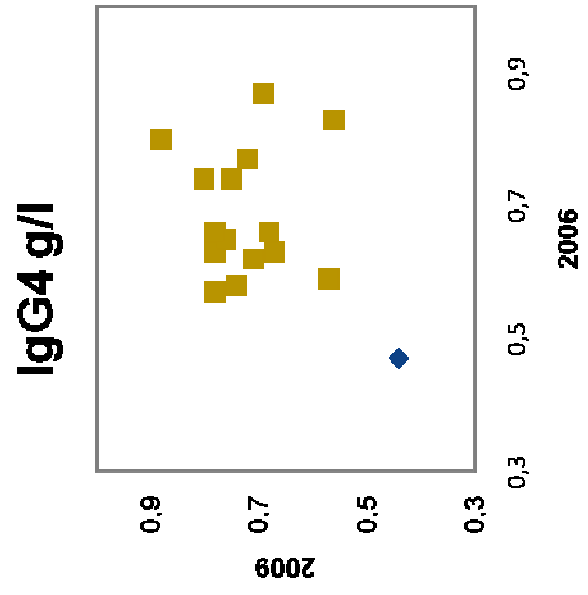
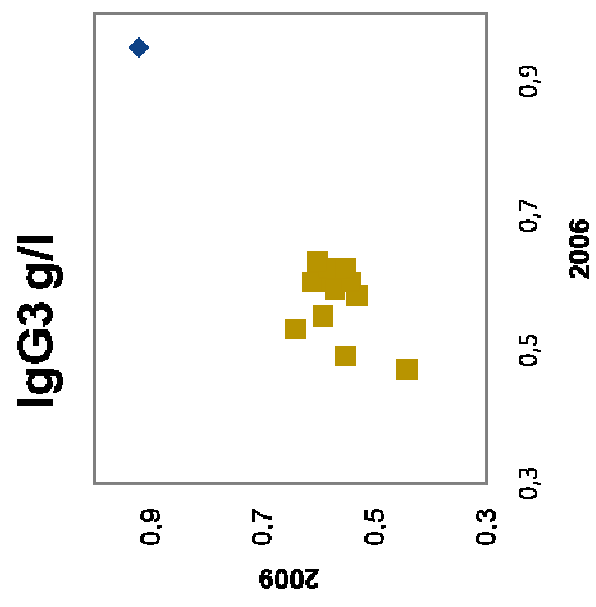
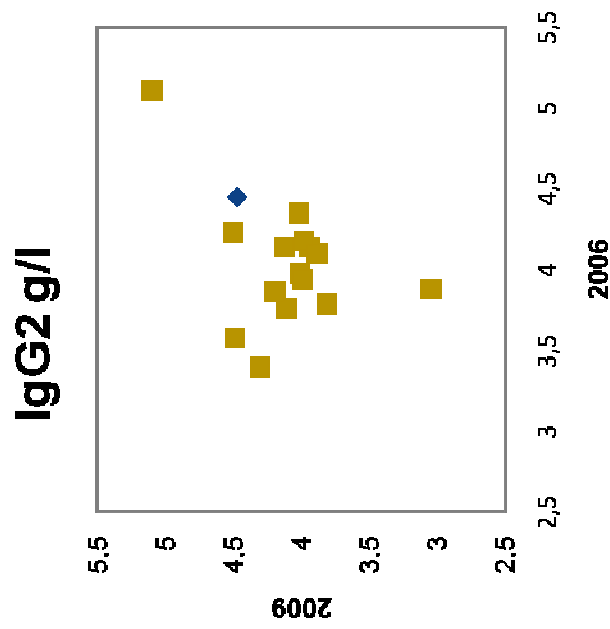
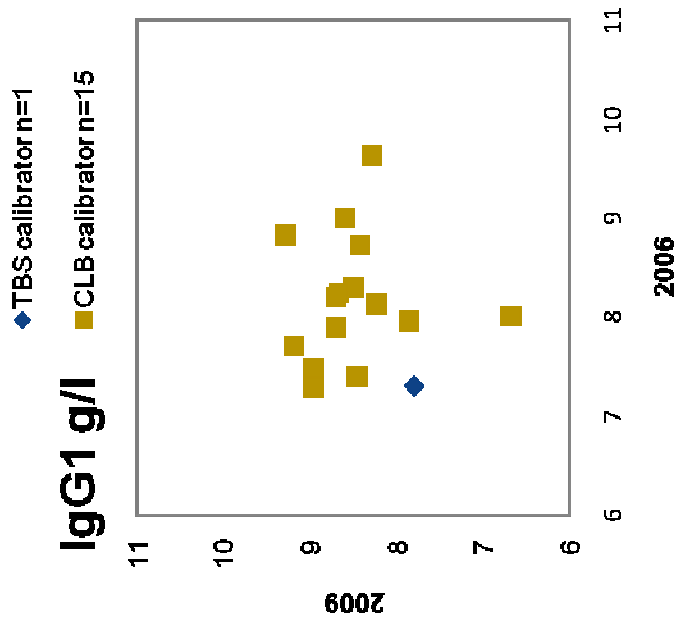
## IgG vs som GSUB bij SKML rondzending 2006A en 2009A





### Vergelijking subklassen TBS vs Sanquin

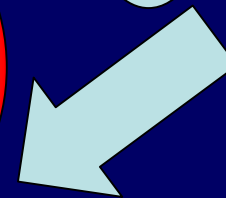
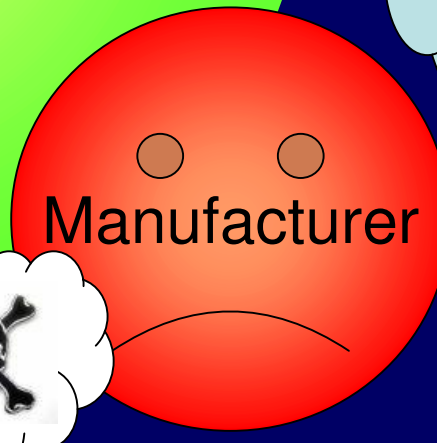
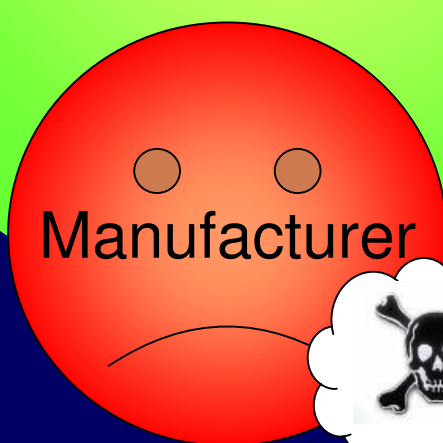
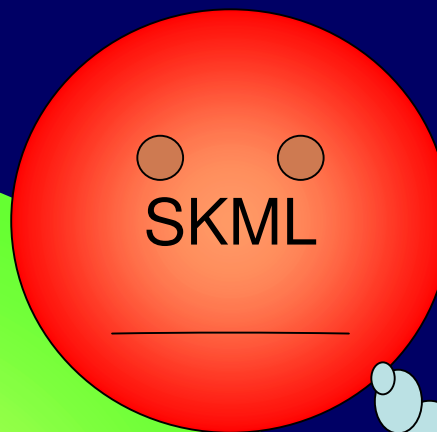
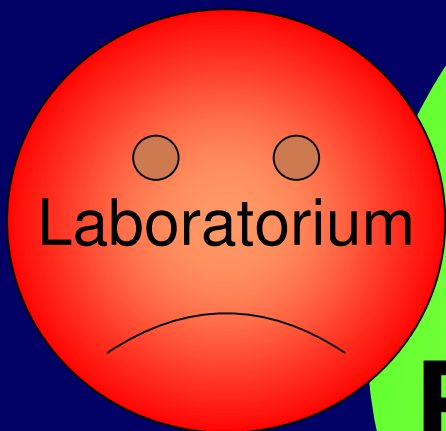




# Drie IgG subklasse rondzendingen

rondzending	gebruikers van
SKML	vnl. Sanquin
Sanquin	Sanquin
IMMPROVE (TBS)	TBS

# Zwarte Pieten Rondzendingen



# Samenvatting

- 1. Verbazingwekkend goede Gemiddelde Traceerbaarheid  
11-tal Eiwitten in 2006 en 2009**
- 2. Manufacturer Niveau: Niet perfect; niet dramatisch**
- 3. Standaardisatie Ceruloplasmine moet beter**
- 4. Zelfonderzoek SKML: Commuteerbaarheid**
- 5. Criteria Labs: Klinische Relevantie/ State of Art**
- 6. Toekomst SKML: Accreditatie en Score**
- 7. IgG Subklassen: Standaardiseren**

**Bedankt voor  
Uw Aandacht**

