P-240 - QUALITY INDICATORS IN A PROGRAM OF METABOLIC DISEASES

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INTRODUCTION: The Metabolic Diseases Program (PEM) has been in place for 9 years, performing studies for the prevention of endocrine-metabolic diseases, in compliance with the laws in force. To ensure the quality and efficiency of the post-analytical stage, indicators are used to monitor compliance with the process.

OBJECTIVE: To analyze the most relevant indicators in the post-analytical stage, such as: response time (TAT), index of recall (IR), recovery percentage of recall (RR) and diagnostic time (DT).

MATERIALS AND METHODS: We analyzed 151788 samples on filter paper from 2013 to 2018, with a processing frequency of 2 days a week for phenylalanine (fluorometric), thyrotropin (DELFIA), immunoreactive trypsin (ELISA), 17OHProgesterone (DELFIA), biotinidase (colometric) and galactose (fluorometric). The following quality indicators were calculated: 1) TAT: time between receiving the sample in the laboratory and sending the result, 2) IR: Number of recalls/Number of total samples, 3) RR%: Total number of recalls/Number of recalls received*100, 4) DT: time between the date of birth and the diagnosis of the disease evaluated.

RESULTS: The average TAT obtained was 72 hours, the general recall rate 1.7% and the recovery percentage 95%. The age of newborns at diagnosis of the diseases were: Congenital hypothyroidism 10 ± 2 days, Congenital adrenal hyperplasia 10 ± 2 days, Phenylketonuria 12 ± 2 days, Galactosemia 12 ± 2 days, Cystic fibrosis 16 ± 2 days and Biotinidase deficiency 15 ± 2 days.

CONCLUSIONS: According to the results obtained, the response time was acceptable. A stable total recall index has been achieved over the years that has allowed us to detect methodological and/or sample quality related deviations. The recall percentage received was very good, which allows us to achieve a high attendance rate. The age of newborns at treatment starting for each disease was optimal allowing newborns to receive their treatment in a timely manner. We consider that the use of these indicators is extremely important to evaluate the Metabolic Disease Program in a comprehensive manner in order to implement corrective actions for continuous improvement.