

EDUW 23 - DIASORIN - Tuesday 23 June, 17.00 - 18.00

### **HOW EFFICIENT AND AUTOMATED CAN BE SEROLOGY AND STOOL TESTING?**

P. Huynen<sup>1</sup>

<sup>1</sup>*Laboratoire de Sérologie Infectieuse et de Virologie Médicale*

Today the laboratory has to face many challenges: constant increase of number of tests to be run, private labs that competes in reaching a lower TAT, disease outbreak that arises without the possibility of human control, like the recent mumps outbreak, the need to provide fast results in case of emergency or for transplants, the request to keep high level of traceability of all results, the accreditation of the lab, now mandatory, are just some examples.

With the same number of operators, year after year, new clinical needs have to be satisfied in a timely manner, with efficiency and without compromise in quality.

The solution for us has been, across several year, to look for innovation. Moving from Elisa to chemiluminescence and therefore from open systems to close and state of the art systems, it has allowed us to face with success all those challenges. The availability of more and more infectious disease markers on fully automated analyzers, with good level of performance, have let us to cope with all the changes that have happened across more than a decade. Indeed innovation and quality are fundamental to support properly the laboratory evolution that occurred since today and it is still occurring.

Innovation in our laboratory it is also represented by the introduction of automatized tests not only on serum and plasma specimens, but also on CSF (for Lyme disease diagnosis) and on stool matrix. In 2013 in fact we have introduced, among the assays already tested in our laboratory, two assays performed on this matrix, the *C. difficile* Toxin A&B and GDH, due to the possibility offered by the LIAISON® systems to run all of them on the same serology platform, without cross-contamination.

New markers will be available in the near future, and our laboratory will be always able to meet the next clinical needs.