

Sebia Focus - N°5

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capillarys
sebia flex piercing

Interview - Feedback from the HbA1c BIORHIN Laboratory (68) "Why I stopped using HPLC"

Véronique Bihl is a biological pharmacist. She is an associate in the new BIORHIN organization and is head of finance. With her associates, she chose SEBIA over a competitor (HPLC) and all the staff were quickly convinced of the soundness of this choice.

Can you describe the BIORHIN laboratory to us and its activities?

The Specibio laboratory was formed in 2005 to house the immunoanalysis and biochemistry technical support centre for our MCS. In 2012, the members of the MCS (Mean Civil Society) were grouped into multi-site laboratories under the name BioRhin. We also updated and consolidated much of our equipment and our lab computer system at the same time. We process around 800 patients per day in our centralised technical support centre, in addition to cases referred by the medical biology laboratories in the Mulhouse region. Our peripheral sites, however, still perform some of the analysis (including bacteriology, and some of the less automated techniques).

We conduct around 35,000 tests per year on the HbA1c lab bench and have two SEBIA instruments in daily use to date.

What was your problem with this lab bench? What led the BIORHIN laboratory to seek a new solution for its HbA1c analysis?

We were operating two Tosoh HPLC instruments. One of the two, the oldest, was due for replacement in early 2012.

When we came to replace it, we decided to reorganize the HbA1c bench around the EDTA tube; reducing the number of instruments wherever possible; to free up some space in the laboratory, improve the computer connections and cut back on technician time. This would allow us to operate more efficiently.

Why did you choose the SEBIA HbA1c assay with the CAPILLARYS 2 Flex Piercing instrument?

I came across SEBIA at the 2011 JIB (Journées Internationales de Biologie / International Day of Biology, Paris – France) and it seemed like a good idea to try to find an innovative solution with them. SEBIA introduced us to the CAPILLARYS 2 Flex Piercing technique for HbA1c testing and the

presentation was very convincing. The price of the solution was in line with the targets we had set and the quality of the analysis seemed better than the method we were using. Furthermore, I was already aware of the reliability of SEBIA equipment and I therefore had no doubts about the capillary electrophoresis technique. We also really appreciated the fact that SEBIA is very attentive to its customers.



Compared to our previous HPLC systems, we have noticed a gain in terms of traceability and the detection of abnormal haemoglobins.

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We were attracted by the possibility of analysing our HbA1c on their new CAPILLARYS 2 Flex Piercing instrument for all of these reasons.

After giving it some thought, and given the large volume of HbA1c tests we carry out, we reached an agreement with them to dedicate the CAPILLARYS 2 Flex Piercing to carrying out this test and to process proteins on the two CAPILLARYS already in use in our lab, both instruments are controlled by two networked PCs so they can share a common database.

We were completely satisfied with the support that SEBIA gave us with the reorganization.

The capillary electrophoresis technique for measuring HbA1c is new, so what evidence did SEBIA provide that convinced you?

SEBIA sent us the results of studies conducted at different assessment sites and a team meeting also helped to convince our colleagues of the importance of this development.

After 7 months of use, has HbA1c testing on the SEBIA CAPILLARYS 2 Flex Piercing instrument met with your expectations?

The installation was completed in April 2012, so it's been seven months since we started using the CAPILLARYS 2 Flex Piercing instrument. The learning process was easy and getting started with the instrument was plain sailing as we already had a CAPILLARYS instrument. The CAPILLARYS 2 Flex Piercing device is very user-friendly for the lab technicians who do not miss our old HPLC at all.

Compared to our previous HPLC systems, we have noticed a gain in terms of traceability and the detection of abnormal haemoglobins.

The new device produces graphs that can be analysed remotely as they can be associated with the patient files via our IT system and therefore allow clearer diagnosis of haemoglobinopathies. Comparisons and correlations are therefore also far easier to make.

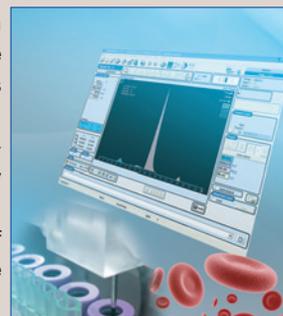
In terms of diabetes care, the real difference comes with patients with abnormal haemoglobin. We can now screen and monitor these patients better, compared with the old method.

How have your colleagues reacted to this new method? How have you convinced them? Do they appreciate the added medical value of this new technology?

Our colleagues attended the presentation meeting organised by SEBIA. We did not feel any reluctance in committing ourselves, particularly as we were able to stay

on track in terms of cost. In fact, price was one of the key factors in choosing this technique.

In addition, test CV repeatability and reproducibility matched our expectations. We wanted to make sure of this before switching to the new method.



What are the key points that would prompt you to recommend the SEBIA HbA1c assay with the CAPILLARYS 2 Flex Piercing instrument to other laboratories?

We were able to integrate the lab bench thanks to the CAPILLARYS 2 Flex Piercing instrument. In fact, there is less maintenance to do on a single device which combines different techniques. Also, less time is required to set up fewer items of equipment on-site and handling is made easier for lab technicians. Capillary electrophoresis has been widely accepted technique for quite some time now, but adapted to this type of analysis, it was an innovation that we wanted to take advantage of in our laboratory. It is also a great idea for SEBIA to distribute it, as many laboratories are already equipped with a CAPILLARYS. It is ambitious to try to replace the HPLC technique and this will not happen overnight.

This purchase has enabled us to prove that we can do more with an inexpensive device. The device detects more factors and the analysis is more accurate, which is a step forward. We sold off our HPLC devices without regret and we would be prepared to take a second CAPILLARYS 2 Flex Piercing as a backup.

As far as we are concerned, it is a durable and reliable solution that provides better quality of analysis at comparable cost to the HPLC.

