

ERNDIM - Quantitative Schemes Purines & Pyrimidines



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Annual Report ERNDIM-EQAS 2012

1. *Purpose*

The purpose of the ERNDIM External Quality Assurance Scheme for Quantitative Purines and Pyrimidines in Urine is the monitoring of the analytical quality of the quantitative assay of purines and pyrimidines in urine in laboratories involved in the screening and diagnosis of patients with inherited metabolic disorders. For details see www.erndim.org / www.ERNDIMQA.nl

2. *Participants*

57 Sample sets have been shipped to Laboratories from 24 countries. 1 Lab did not submit results and 6 labs did not submit sufficient results for data processing.

3. *Design*

The Scheme has been designed, planned and co-ordinated by Dr. Jörgen Bierau as scientific advisor and Dr. Cas Weykamp as scheme organiser, both appointed by the ERNDIM Board. The design includes samples and reports which are connected to provide information with a balance between short-term and long-term reports and between detailed and aggregated information.

Samples

The scheme consisted of 8 lyophilised samples, all prepared from the same basic urine but with various amounts of added analyte. The samples were identical two by two: the pairs, analytes and their source as well as the added amounts are in the table below.

Analyte	Source	Added Quantities in micromol/liter			
		Sample Pair 165-172	Sample Pair 168-170	Sample Pair 166-169	Sample Pair 167-171
5-OH methyluracil	Aldrich 852589	0	25	50	75
Adenine	Sigma A8751	0	50	150	250
Adenosine	Sigma A9251	100	0	25	75
AICAR	RI. Chemicals A1300	500	2000	0	100
Deoxy-adenosine	Sigma D7400	25	75	125	0
Deoxy-guanosine	Sigma D7145	50	100	125	0
Deoxy-inosine	Sigma D5287	100	0	25	75
Deoxy-uridine	Sigma D5412	200	0	75	150

Dihydro-thymine	Ikemi L01996	50	125	250	0
Dihydro-uracil	Sigma D7628	2000	5000	0	500
Guanosine	Sigma G6752	75	125	200	0
Hypoxanthine	Sigma H9377	0	75	150	250
Inosine	Sigma I4125	100	0	25	50
Orotic Acid	Sigma O2875	1500	3000	0	750
Orotidine	Sigma O9505	28	0	7	21
Pseudo-uridine	Berry & Ass 11080	50	150	200	0
Thymidine	Sigma T9250	0	25	50	100
Thymine	Sigma T0376	200	0	75	150
Uracil	Sigma U0750	500	1000	0	200
Xanthine	Sigma X4002	0	50	125	250

Reports

All data-transfer, the submission of data as well as request and viewing of reports proceeded via the interactive website www.erndimqa.nl which can also be reached through the ERNDIM website (www.erndim.org).

An important characteristic of the website is that it supplies short-term and long-term reports. Short-term reports are associated with the eight individual specimens, for each of which there has been a specific deadline in the year 2012. Two weeks after the respective deadlines participants could request their reports and as such had eight times up-to-date information on their analytical performance. Although technically not required (the website can work with a delay time zero) a delay time of 14 days has been chosen to enable the scientific advisor to inspect the results and add his comment to the report. Contrary to the fast short-term report is the annual long-term report. The annual report is based on the design-anchored connection between samples which enables to report a range of analytical parameters (accuracy, precision, linearity, recovery and interlab dispersion) once an annual cycle has been completed. The annual report is discussed below.

A second important characteristic of the website is the wide range in aggregation of results which permits labs to make an individual choice for detailed and/or aggregated reports. The most detailed report which can be requested from the website is the "Analyte in Detail" which shows results of a specific analyte in a specific sample (176 such Analyte-in-Detail-reports can be requested in the year 2012 cycle). A more condensed report is the "Current Report" which summarizes the performance of all analytes in a specific sample (8 such Current Reports can be requested in 2012). The highest degree of aggregation has the Annual Report which summarizes the performance of all analytes of all 8 samples (1 such Annual-Report can be requested in 2012). Depending on their position in the laboratory one can choose to have a glance at only the annual report (managers) or at all 176 detailed reports (technicians).

4. Discussion of Results in the Annual Report 2012

In this part the results as seen in the annual report 2012 will be discussed. Subsequently we will regard accuracy, recovery, precision, linearity, interlab CV and cross-sectional relations. Please print your annual report from the Interactive Website when you read the "guided tour" below and keep in mind that we only discuss the results of "all labs": it is up to you to inspect and interpret the specific results of your laboratory.

4.1 Accuracy

A first approach to describe the accuracy is comparison of your mean outcome in the eight samples with the mean of all labs. This is shown in the columns "your lab" and "all labs" under the heading "Accuracy", respectively. For Adenine the mean of all labs is 100 micromol/Liter with which you can compare the mean of your lab.

4.2 Recovery

A second approach to describe accuracy is the percentage recovery of added analyte. In this approach it is assumed that the recovery of the weighed quantities is the target value. The correlation between weighed quantities as added to the samples (on the x-axis) and your measured quantities (on the y-axis) has been calculated. The slope of the correlation multiplied with 100% is your recovery of the added amounts. Outcome for your lab in comparison to median outcome of all labs is shown in the column "Recovery" in the annual report. For all labs the recovery ranges from 87% for adenine to 103% for adenosine. The overall recovery is 98%.

4.3 Precision

Reproducibility is an important parameter for quality in the laboratory and is encountered in the schemes' design. Samples come in pairs which can be regarded as duplicates from which CV's can be calculated (Intra Laboratory CV as indicator for reproducibility). Outcome for your lab in comparison to the median of all labs is shown in the column "Precision" of the Annual Report. Precision ranges from 3.5% for creatinine to 15.7% for 5-OH methyluracil. The overall intralab CV is 8.7%.

4.4 Linearity

Linearity over the whole relevant analytical range is another important parameter for analytical quality. Again this is encountered in the schemes' design. With weighed quantities on the x-axis and your measured quantities on the y-axis the coefficient of regression (r) has been calculated. Outcome for your lab in comparison to the median of all labs is in the column "Linearity" of the annual report. It can be seen that the coefficient of regression ranges from 0.962 for 5-OH methyluracil to 0.999 for uric acid.

4.5 Interlab CV

For comparison of outcome for one patient in different hospitals and for use of shared reference values it is relevant to have a high degree of harmonization between results of various laboratories. Part of the schemes' design is to monitor this by calculating the Interlaboratory CV. This, along with the number of laboratories who submitted results, is shown in the column "Data All labs" in the Annual Report. It can be seen that most laboratories submitted results for hypoxanthine (49) whereas only 13 labs assayed dihydro-uracil. The Interlab CV ranges from 8.38% for adenosine to 46.4% for AICAR. The mean Interlab CV for all analytes is 20.5%.

4.6 Cross Sectional Relations

The various parameters as described above often have an interrelation: often more than one parameter directs towards good or bad analytical control. This pattern, clearly seen in the other ERNDIM schemes is less prominent in the Purines and Pyrimidines.

4.8 Your performance: red and green flags

After some years of discussion and planning a system to judge performance of individual laboratories is implemented starting from January 2009. In the annual report of an individual laboratory red flags indicate poor performance for accuracy,

precision, linearity and recovery. Analytes with satisfactory performance for at least three of the four parameters (thus no or only one red flag or no result) receive a green flag. Thus a green flag indicates satisfactory performance for analysis of that particular analyte while a red flag indicates that your laboratory has failed to attain satisfactory performance. Criteria for red flags can be found in the general information on the website (general information; interactive website, explanation annual report).

4.9 **Poor Performance Policy**

A wide dispersion in the overall performance of individual laboratories is evident. Table 2 shows the percentage of red flags observed. 26% of the laboratories have no red flag at all and thus have attained excellent overall performance. In contrast, at the other extreme there are also 4% of laboratories with more than 25% red flags. Following intensive discussion within the ERNDIM board and Scientific Advisory Board (SAB) and taking into account feedback from participants we have been able to agree on a harmonised scoring system for the various branches of the Diagnostic Proficiency schemes and qualitative schemes. We have also tested a scoring system for the quantitative schemes as described in our Newsletter of Spring 2009. In parallel to this the SAB has agreed levels of adequate performance for all the schemes and these will be re-evaluated annually. The scoring systems have been carefully evaluated by members of the SAB and have been applied to assess performance in our schemes from 2007 onwards. The ERNDIM Board has decided that the Scientific Advisor will judge the performance of the individual laboratories based on these levels of satisfactory performance and issue a letter of advice of failure to achieve satisfactory performance to those laboratories which do not achieve satisfactory performance. The letter is intended to instigate dialogue between the EQA scheme organiser and the participating laboratory in order to solve any particular analytical problems in order to improve quality of performance of labs in the pursuit of our overall aim to improve quality of diagnostic services in this field.

Table 2. Percentage Red Flags

% Red Flags seen in Annual Report	Percentage Labs In this Category	Cumulative Percentage Of Labs
>25%	4%	4%
20 – 25%	6%	10%
15 – 20%	4%	14%
10 – 15%	12%	26%
5 – 10%	16%	42%
0 – 5%	32%	74%
0%	26%	100%

4.10 **Certificates**

As for other schemes the performance as it is indicated by the red/green flags in the individual laboratories annual report is summarised in the new style of annual participation certificate. The certificate lists the total number of purines and pyrimidines in the scheme, the number for which results have been submitted and the number for which satisfactory performance has been achieved. It is important to bear in mind that the certificate has to be backed up by the individual annual report in the case of internal or external auditing.

5. **Summary**

The purpose of the ERNDIM scheme for Purines and Pyrimidines is the monitoring of the analytical quality of the quantitative assay of these compounds in urine. The interlaboratory CV has gradually decreased throughout the years. It used to be 30 to

40% in the beginning but dropped below 20% in recent years. We see especially improvement for the dihydropyrimidines. The results confirm the educational relevance of the scheme: participation in the scheme is associated with harmonisation between laboratories.

Nevertheless, each participant should re-validate the analytical method for those compounds for which the various parameters are not acceptable (e.g. acceptable means: precision $CV < 10\%$, linearity $r > 0.99$ and recovery $90 < \text{rec } \% < 110$). In case these goals cannot be achieved with the present method another method should be considered.

6. *Preview Scheme 2013*

The design of the 2013 scheme is essentially the same as in 2012.

7. *Questions, Remarks, Suggestions*

If you have any questions, remarks or suggestions please address to the scientific advisor Dr. Jörgen Bierau (jorgen.bierau@mumc.nl) or the scheme organiser Dr. Cas Weykamp (c.w.veykamp@skbwinterswijk.nl).