



In the Name of God, the Compassionate, the Merciful

Address by

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to the

BIENNIAL INTERCOUNTRY MEETING FOR PUBLIC HEALTH

LABORATORY DIRECTORS

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Your Excellency, Distinguished Guests, Dear Colleagues, Ladies and Gentlemen

It is with great pleasure that I welcome you to the biennial intercountry meeting for public health laboratory directors. I would like to extend a special welcome to His Excellency Professor Dr Mohammed Awad Afifi Tag El-Din, Egyptian Minister for Health and Population, and to thank him for inaugurating this meeting. I would also like to extend my hearty thanks to Dr Paul Kleihaus, Director, International Agency for Research against Cancer, for joining us at this meeting, which focuses this year on the diagnosis of noncommunicable diseases, some of the most challenging of which are neoplastic and pre-neoplastic disorders.

I would like to take this opportunity to express my thanks and appreciation to our colleagues in WHO headquarters, and to our consultant experts who have kindly joined us, and to all participants whose contribution will enrich the deliberations of our meeting.

Ladies and Gentlemen,

On April 7th this year, we celebrated World Health Day 2002, the theme of which was “Move for Health”. Existing evidence strongly associates sedentary life with noncommunicable diseases; other risk factors include unhealthy diet, obesity, environmental pollution and smoking, which will all be discussed in this meeting. Most of the countries of the Region are undergoing rapid changes in lifestyle and social conditions and are going through epidemiological and demographic transitions. Consequently, mortality and morbidity due to communicable diseases are decreasing and life expectancy is on the rise. At the same time, evidence indicates that many countries of the Eastern Mediterranean Region, nevertheless, still suffer from a high prevalence of malnutrition and continue to battle with the burden of communicable diseases. An increasing trend in noncommunicable diseases in the near future will place a double burden of disease on these countries.

It goes without saying that prevention and control of noncommunicable disease starts before a person is born. In fact, research has proved that a mother’s lifestyle is crucial: a high cholesterol diet, smoking and a sedentary lifestyle can affect her fetus’s blood vessels adversely with atherosclerosis, as early as the intrauterine stage of life.

Ladies and Gentlemen,

Since 1983, when these meetings of directors of public health laboratories started in the Region, there has been excellent input from the Member States, and the programme has continued to flourish, with a view to achieving high performance levels in health laboratory services. As you are well aware, the improvement of health laboratory services in countries of the Region is high on the agenda of systems and services development. Such commitment is reflected in national plans of action formulated in the framework of a regional plan to strengthen laboratory development in the Eastern Mediterranean

Region of WHO. The meetings of directors of public health laboratories offer a golden opportunity for sharing experiences among Member States and for updating national plans.

With the start of the new biennium, the Regional Office will continue to focus on quality assurance, quality management including standard operating procedures, accurate job descriptions for laboratory personnel, appropriate procurement and maintenance of equipment, standardization and local production of reagents, auditing systems, laboratory information systems, laboratory safety and biohazard containment.

In this context, I wish to refer to the plan of action developed in the 1998 meeting, which particularly emphasized the need to develop national laboratory standards at all levels, from primary health care laboratories, including those in disaster areas of the Region, to the most sophisticated state-of-the-art central laboratories; as well as to develop indicators to measure the achievement of national programmes in various technical areas.

I would like to congratulate the Member States who have started such endeavours, and encourage others to follow in their footsteps. The Regional Office, with the collaboration of WHO headquarters, has given its full support to these initiatives as well as to international external quality assurance schemes, recent attempts at development of regional external quality assurance schemes, and intensive training and follow-up on laboratory surveillance of infectious disease outbreaks and epidemics and training on the WHONET antimicrobial resistance surveillance software for several countries. It is however, the role of these countries to implement these activities, and provide adequate feedback to the Regional Office, so that it can tailor its future technical collaboration accordingly.

Dear Colleagues,

Returning to the theme of this year's meeting, I cannot adequately emphasize the human toll, and the economic and financial toll, to national health systems and to nations, that noncommunicable diseases cause. Atherosclerosis and its complications, as well as

most lipid disorders, are preventable; osteoporosis, diabetes mellitus and other hormonal disorders are to a great extent controllable; early detection of neoplastic disorders and causes of renal failure may be life-saving. Morbidity and mortality due to these diseases, in our Region, as I previously mentioned are increasing, and the quality of life of patients suffering from them is highly compromised. Public health laboratories have a major role in the diagnosis and management of such infirmities, starting from the surveillance of mother and child for anaemia, at the primary health care level, to the development of cancer registries, at central level.

The success in these fields could not be achieved completely without a strong partnership with private laboratories, which play an important role in the health system and which should complement the public laboratory network. In this respect, public health laboratories could be relieved of some expensive testing that the more affluent population groups can afford, while using their scarce resources to strengthen public health functions, such as standard setting, surveillance and environmental control. As you are all aware, full technical supervision from governmental authorities is essential, with regulatory functions and legislative support ensuring quality of performance of these laboratories.

Ladies and Gentlemen,

Again, welcome to the Eastern Mediterranean Regional Office. I offer you my best wishes for a fruitful meeting, and an enjoyable stay in Cairo, a city which offers history and culture as well as kind hospitality. I look forward to receiving the recommendations of your meeting, and your updated plans of action.

Thank you.