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**STATEMENT BY PROFESSOR HAN-IK CHO
REPRESENTATIVE, INTERNATIONAL COUNCIL FOR
STANDARDIZATION OF HEMATOLOGY (ICSH)**

Chairman, Your Excellencies and Distinguished Delegates:

Thank you very much for giving me this opportunity.

I am representing International Council for Standardization of Hematology.

This afternoon, I am very pleased to hear that many of representatives are emphasizing quality of health care system and medical practice for both communicable and noncommunicable diseases.

Quality care means evidence-based practice. I would like to remind you that more than 50% of evidence in medical practice are originated in your clinical laboratories.

Laboratory data should be reliable, enough to be evidences for quality medical care and health care management.

Then, how is the quality of laboratory data in this region? Reliable or unreliable?

We organized ANCIS (Asian Network for Clinical Laboratory Standardization) seven years ago, and had inaugural forum in Jakarta in year of 2000. After then we set up External Quality Assurance Programme, so-called Asian Quality Assessment Scheme (AQUAS) and have done once or twice proficiency tests during the last five years. And I have had a forum every year.

Currently the programme is covering eight countries in this region. Through this programme, we found my problems and obstacles that could affect laboratory reliability. Some test results are very poor in accuracy. Poor data means reliable one that resulted in malpractice. Some laboratory results are not enough to be a evidence of quality medical care.

For example the coefficient variation (CV) value in over 40%. It should be less than 10%. The AQUAS programme will be continued to improve laboratory performance and provide reliable evidences for quality health care in this region.

Thank you for your attention.