

UK NEQAS for Tumour Markers

Workshops in Portugal

Peter White

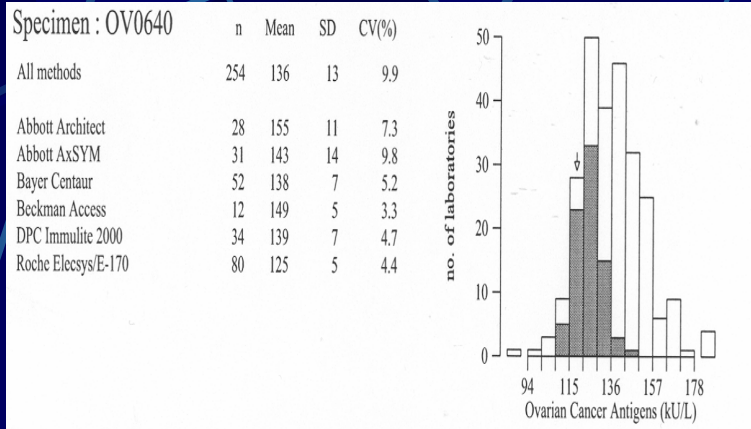
UK NEQAS for Immunology, Allergy and
Immunochemistry

Northern General Hospital, Sheffield

UK NEQAS for Tumour Markers

CA 125 Ovarian Markers

- Good agreement between methods
- Method imprecision often <5%



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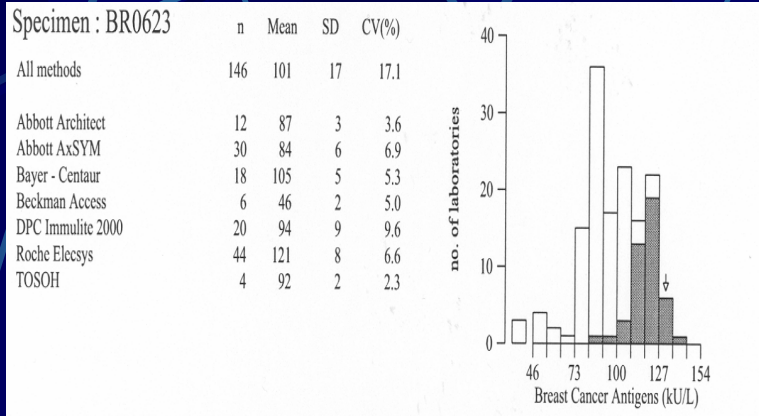
CA 15-3 Breast Markers

- Generally good agreement between methods

although Beckman Access significant
negative bias in relation to other methods

- Method imprecision <10%

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CA 19-9 Gut Markers

- Good agreement between some methods
eg. Abbott AxSYM and Roche Elecsys
Beckman Access and DPC Immunlite 2000

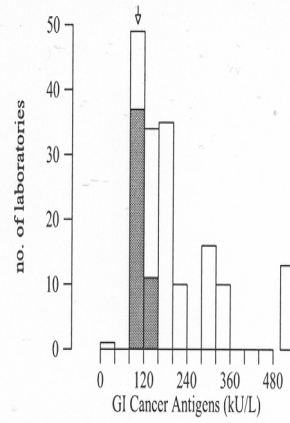
Consistent linear relationship between all methods

- Method imprecision usually <10%

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Specimen : G0644

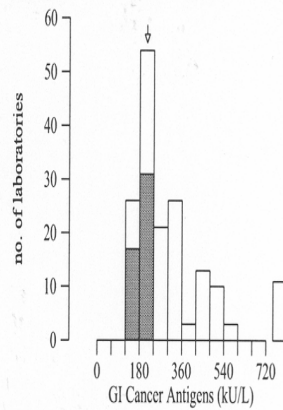
	n	Mean	SD	CV(%)
All methods	167	172	74	43.2
Abbott Architect	12	676	68	10.0
Abbott AxSYM	24	133	10	7.3
Bayer - Centaur	27	318	23	7.2
Beckman Access	10	181	20	10.9
DPC Immulite 2000	32	184	12	6.5
Roche Elecsys	48	116	6	5.3



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Specimen : G0645

	n	Mean	SD	CV(%)
All methods	166	276	112	40.7
Abbott Architect	11	1085	88	8.1
Abbott AxSYM	24	208	23	11.0
Bayer - Centaur	27	490	35	7.2
Beckman Access	10	295	39	13.3
DPC Immulite 2000	32	307	23	7.4
Roche Elecsys	48	184	9	5.0



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- Abbott XR recently introduced with significant positive bias in relation to AxSYM and all other methods

Degree of bias may be sample dependent but for samples manufactured from positive patient sera:

Architect versus AxSYM ratio 5.3

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Consistent relationship between all methods

CA199

Architect	676	1085	506	670	1643	427
AxSYM	133	208	88	117	319	90
Bayer-Centaur	318	490	253	325	697	242
Beckman Access	181	295	136	182	513	144
DPC Immulite 2000	184	307	137	181	523	135
Roche Elecsys	116	184	87	113	296	87

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Information about the programmes
can be found on website
www.immqas.org.uk

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