

Carta do Prof. Lefèbvre Respeitante ao Teste da Hb A1c

No passado mês de Julho receberam a SPD e a APDP (como sócios da IDF) uma carta do Prof. J. Lefèbvre, presidente da IDF ("International Diabetes Federation"), referente à necessidade de padronização da metodologia do teste da Hemoglobina A1c. Como se poderá inferir da leitura da carta, que em seguida transcrevemos, existe o desejo por parte da EASD, ADA e IDF de adaptar a nova metodologia de doseamento da Hb A1c mas introduzindo uma nova nomenclatura mais compreensível para os doentes e de modo a não provocar confusões e erros graves na interpretação dos resultados. Esse nome será o de Média da Glicemia ou Glicemia Média aguardando-se, ainda para este ano a divulgação dos primeiros resultados de um estudo multinacional que pretende estabelecer uma correlação entre a Média da Glicemia e os novos valores da Hb A1c determinados pelo método da IFCC. Serve também a carta para apelar à IFCC para que tenha em conta a posição das sociedades científicas referenciadas e da IDF e alertar para o verdadeiro risco para a Saúde Pública que a tomada de medidas pelos Laboratórios de Análises Clínicas desinseridas da prática clínica podem assumir. A propósito do potencial conflito de posições entre bioquímicos e clínicos e dos perigos de uma má adopção da nova metodologia de referência (IFCC), que reduz em cerca de aproximadamente 2 % os valores de A1c, sem a respectiva comparação com os valores obtidos pelos métodos clássicos, a SPD tomou já posição em consonância com o INS Ricardo Jorge no âmbito da Comissão de Acompanhamento do programa Nacional da Diabetes e dela damos conhecimento no nosso site e publicámo-la no nº1 da RPD (Março de 2006, vol.1 Nº1 p.47).

Rui Duarte

Transcrição da Carta do Prof. Lefèbvre Respeitante ao Teste da Hb A1c

"We are writing to inform you of some recent developments in the Glycated Haemoglobin (HBA1C or A1C) test. The International Federation of Clinical Chemists has (IFCC) developed a new reference method for the measurement of A1C test, which is more accurate than all the current methods. Given the importance of this new method, an international consultation group called the A1C Standardization Working Group was set up with members from the American Diabetes Association (ADA) and European Association for the Study of Diabetes (EASD) under the chairmanship of the International Diabetes Federation (IDF), with participation from the IFCC and other groups to study the problem

This Working Group recommended in its meeting held in London on 20 January 2004 that the IFCC reference method should become the global reference standard ("anchor"),

and that all manufacturers should now adopt the new method. However such adoption tentatively implies that the reported A1C numbers would be 1-2% lower than those currently reported, i.e. the "cut-points" for what is normal, or good/poor control would shift downward. Over the past two years, there has been considerable discussion within the Working Group and the international diabetes community as to the best way to move forward with the new assay without negatively impacting the current value of the A1C test in assessing glycaemic control and setting treatment goals. Given that the very name of the test - "A1C" or "haemoglobin A1C" - was confusing both to clinicians and especially patients who do not always understand its connection to glucose / diabetes (since the name suggests a blood disorder) and that the small numbers (e.g. 7%, 9%) do not readily convey to patients that even a 0.5-1% change has a major effect on health, the Working Group saw the opportunity to redefine the entire assay.

More specifically, the Group decided to set up a study to look at the relationship between mean blood glucose (MBG) and A1C. If this relationship can be confirmed by the study, then we will have the opportunity to report the new IFCC figures as to mean blood glucose. Hence the A1C test will have a new name (MBG), a new range (in familiar glucose units), and a more direct and recognizable link to glucose levels for people with diabetes and their healthcare professionals. This multi-site multi-million dollar study has been started in several representative countries around the world. The first results of the study might be available at the 19th World Diabetes Congress of the International Diabetes Federation in December this year in Cape Town, South

Against this background, we have recently been faced with an obstacle to the smooth running of the process from the IFCC who has recently issued a recommendation to their members to vote to change the name of the current test and create new units, both of which do not have a clear relationship to blood glucose values. Such a change will simply create havoc for both patients and healthcare professionals. The international diabetes community's efforts to increase diabetes awareness and improve care will be greatly damaged by the IFCC recommendations.

The Presidents of the ADA, EASD and IDF have written a joint letter to the IFCC President and Executive suggesting that the IFCC recommendation be delayed until the outcome of our study is known. Given the confusion that such a recommendation will create in the international diabetes community and the devastating effect that it will have on diabetes care worldwide, we are writing to ask you to join in united action by forwarding your support of our position to the IFCC. You should address your letters to:"