

醫檢師的過去現在與未來

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檢驗醫學

- Laboratory analysis was intended to confirm a tentative diagnosis based on clinical or radiological information.
- Laboratory studies serve to provide diagnoses, to detect increased risks of disease, clinical responsibilities, the progress of therapy (decrease in signs of infection or decline in tumor markers) and early detection of side effects and complications (monitoring of liver and kidney parameters during chemotherapy).



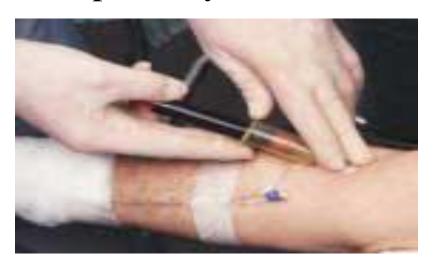


檢驗醫學

- Laboratory medicine is a relatively young medical science.
- Its foundations were laid in the 19th century.
- It was only in the 1930s that it began to develop as a clinical discipline.

抽血

- ♦ In the 20th century phlebotomy was introduced as a diagnostic tool
- ◆ Prior to that it was considered to be curative
- ♦ Venipuncture is in widespread by 1920.





檢驗儀器: 1920

A modern 200-300 bed hospital in the USA would be well equipped if it had

- ♦ A balance
- **♦** A microscope
- **♦** A centrifuge
- ♦ A Bunsen burner
- **♦** A Duboscq colorimeter





臨床生化儀器

- 1950 手工檢驗 (玻璃年代)
- 1965 半自動檢驗

Continous flow

Discrete system

Centrifugal analyzer system

Thin-film analyzer system

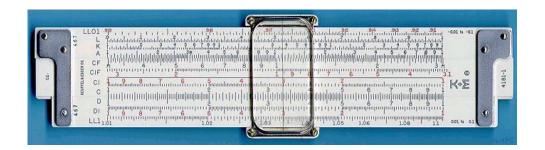
Ion selective electrode analyzer system





Technicon SMA autoanalyzer (1970)

- ♦ There were no calculators. Slide rules were used!
- No automation
- ♦ No sophisticated quality control
- ♦ No fax machines
- No laboratory information systems





Hematology

- 手工計數Hemocytometer
- 1956 半自動電阻
- 1968 Coulter血球分類
 - Pattern recognition
 - Flow cytometry







資訊系統

- 1983 LIS
- 1997
- Sample automation
- Analytical automation
- Data processing automation
- 2006

Total laboratory automation (TLA)



檢驗室之過去





全自動分析系統



ARCHITECT Workcells (Abott & Toshiba)

Input Output Module, Centrifuge Module, Decapper Module, Instrumentation (2 Clinical Chemistry, 2 Immunoassay).



醫技人員

- 1918, John Kolmer published "The Demand for and Training of Laboratory Technicians," which included a description of the first formal training course in medical technology.
- By 1920, clinical laboratories in large hospitals were distinct administrative units of service. They usually consisted of four or five divisions, including biochemistry, clinical pathology, bacteriology, serology/immunology and radiology.



台灣醫事技術學系的緣起

- 用以診斷病症之病理、細菌、血清、生化、生理、X光等 各部門檢驗,以往多由醫師自己去做,後來所需各種檢驗 越來越多且又複雜,致使醫師研究診斷及治療的時間大為 減少,影響其工作至鉅,因此開辦短期訓練班訓練技術員。
- · 美國國際合作署中國安全分署醫學教育顧問杜克大學醫學院院長Dr. Davison建議台大醫學院,設立醫技系以培養檢驗技術員。



醫事技術學系的創建

- 45年 台大醫技系
- 54年 北醫、元培、輔英醫技科
- 55年 中山、中台醫技科
- 58年 中華醫技科
- 68年 陽明醫技系
- 70年 高醫、中國醫技系
- 78年 成大、長庚醫技系
- •83年 慈濟醫技系



醫學技術學系

- 共同必修課程
- 基礎醫學課程
- 臨床專業課程
- 醫院實習課程

Laboratory experiment Clinical practice



檢驗醫學之臨床需求

- 實驗室品管
- 檢驗流程
- 檢驗效益
- 法規倫理
- 實驗室管理
- 認證評鑑

學校 實習 臨床



現階段檢驗醫學

- Point-of-Care Testing
- Molecular diagnostics
- ◆ Consolidation of testing on a single platform
- Consolidation of reference laboratories
- Sophisticated equipments (Tandem Mass Spectrometry)



Non invasive testing



GLUCOWATCH



MALDI TOF/TOF MS





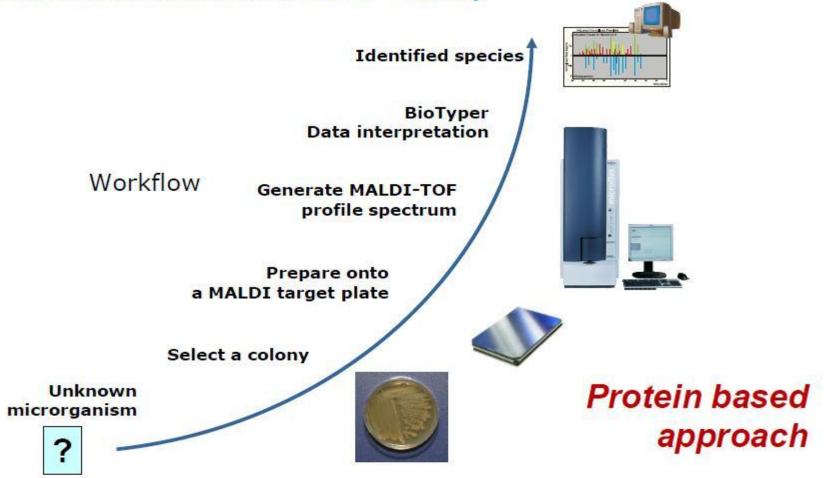




Bruker Daltonics

MALDI Biotyper

Microbial Identification for the 21st Century





分子診斷

- Cytogenetics: the study of all aspects of cytology, including the structure of chromosomal material, involves a broad and in-depth analysis of hereditary information derived from chromosomal materials.
- Flow cytometry: Fow cytometry is a technique for counting, examining, and sorting microscopic particles suspended in a stream of fluid.
- Molecular genetics: The field of molecular-genetics has evolved from a few scientists and researchers just 30 years ago.
- **HLA/immunogenetics**: The human leukocyte antigen system (HLA) is the name of the human major histocompatibility complex (MHC), a group of genes that resides on chromosome 6 and encodes cell-surface antigen-presenting proteins and many other genes.



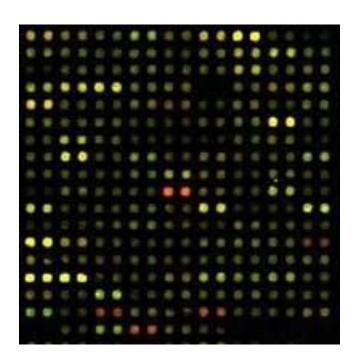
分子診斷未來的發展

• 感染性疾病的偵測

• 腫瘤的診斷與偵測

Chip Plateform

- DNA chip
- Protein chip
- Combine all testing needs on one platform
- Cost-per-test decreases
- Test flexibility can meet increasing test demands
- Technologist time is reduced
- One workstation





個人化檢驗醫學

The shift from the use of traditional diagnostics and treatment to delivering personalized medicine based on "omics" techniques may translate into early diagnoses and tailored treatments of human diseases.

Proteomics
Pharmacogenomics
Physiogenomics
Nutrigenomics



GENOME-WIDE ASSOCIATION STUDIES

- Collecting DNA samples from populations whose clinical characteristics are well defined.
- Doing cost effective genotyping and sophisticated statistical analysis.
- ➤ These resources represent an essential component in establishing genes relevant to a particular disease.

Genetics----Diseases



檢驗資訊

- >IT needs to be the backbone of healthcare
- ➤ It can lead to a better understanding of unnecessary tests
- ➤ It allows the development of evidence-based protocols
- Leads to an understanding of the "best" laboratory tests for the diagnosis of disease



未來趨勢

PERSONALIZED MEDICINE

PREVENTIVE MEDICINE



NO LONGER "ONE SIZE FITS ALL!



檢驗醫學的未來

- In the era of molecular medicine, more and more diagnoses will be made by laboratory tests in asymptomatic patients.
- The goal is to make the diagnosis before clinical signs or symptoms resulting from organ damage become evident



檢驗醫學未來發展

- 核酸檢測相關產品將可大幅取代傳統檢驗方式
- 多種類的蛋白質晶片,在個人化藥物方面,標的藥物基因研究方面,如何將藥物治療作為研究目標的新知識,用基因試驗來確認,對藥物具不良反應者或無療效的人,製藥廠可經由的基因風險暴露來防範藥害,在基因診斷、試驗和治療方面,對傳染病和癌症的治療也漸轉變為基因診斷、這些進展都有助於醫院病人安全維護以及臨床醫療效能的提昇。
- 基因診斷、試驗和治療方面,對傳染病和癌症的治療也漸轉變為基因診斷、這些進展都有助於醫院病人安全維護以及臨床醫療效能的提昇。
- 分子生物檢驗技術、免疫生物感測技術、奈米生醫技術、預防醫學 檢驗、生醫微機電技術等未來均會有長足的進展。
- 保健與老年檢測、小型家用檢驗自動儀器增加,非侵入性檢測以及 食品衛生、環境毒素之檢測量均會提昇。



檢驗醫學未來發展

- Increased automation and standardization have far outpaced the laboratory professional involvement in assuring optimal test utilization and interpretation.
- The productivity of 'commodity' testing (商品化檢驗) increases, the value of laboratory services seems to decrease contextually.
- It remains the translation of laboratory data into valuable information for improving patient's outcomes.
- An effective strategy to encompass translation into integrated, multidisciplinary care, in which appropriateness in test request and interpretation.



未來醫檢師必要的技能

- Laboratory professionals have to become the patient's best source of information about laboratory results, concerning patient preparation guidelines, preanalytical issues, and interpretative counseling (檢驗諮詢).
- They have to expand the consultative assistance for physicians as regards appropriateness and interpretation, also developing practice guidelines for the appropriate use of laboratory services and in closer cooperation with the stakeholders.
- They have to assure the quality of laboratory testing, irrespective of where they are performed (e.g., POCT), expanding the governance throughout the total testing process, to embrace all steps from test request to result utilization.



未來醫檢師必要的技能

- We have to better communicate the quality of laboratory data by introducing information on the assay performance (e.g., the total error) in laboratory reports, thus making the analytical uncertainty a more understandable concept for clinicians, and the reference change value for serial results.
- Laboratory professionals with a medical background must maintain a close interaction with the clinical context, assuming a direct responsibility in patient management, participating in multidisciplinary teams and initiatives for defining diagnostic pathways and improving the global quality of healthcare.
- Clinical laboratories should enhance efficiency and reduce costs by forming alliances and networks; consolidating, integrating, or outsourcing; and more importantly.

Reflex and reflective testing

Table 1 Reflex and diagnostic thresholds applied prospectively

Scenario	Reflex rules	Exclusion criteria	Diagnostic threshold
Hypovitaminosis D	Calcium ≤2.10 mmol/L And Alkaline phosphatase >150 lU/L Age >55 y	25-hydroxy-vitamin D measured within previous 90 days	25-hydroxy-vitamin D <50 nmol/L
Hypomagnesaemia	K ⁺ <2.5 mmol/L Or Albumin-adjusted calcium <1.80 mmol/L	None	Magnesium < 0.70 mmol/L
Hypothyroidism	TSH $>$ 4.0 mU/L	None	Free thyroxine <11.0 pmol/L
Hyperthyroidism	TSH < 0.10 mU/L	None	Free thyroxine >22.0 pmol/L
Hereditary haemochromatosis	50 < ALT < 200 U/L (women) 60 < ALT < 200 U/L (men) Age 18-40 y	Hospital inpatients, outpatients Iron studies measured within previous 90 days	Transferrin saturation (%): >50% (women) >55% (men)

TSH, thyroid-stimulating hormone; ALT, alanine aminotransferase



醫檢師

- 過去: 檢驗流程的操作者
- 現在:檢驗儀器的管理者
- 未來: 檢驗醫學的設計者與應用者



醫檢教育

- 學校: 提供檢驗醫學的基礎
- 實習: 提供檢驗技術的基本訓練 (選修)
- 見習: 提供檢驗流程與臨床溝通的基本訓練
- 初階醫檢師: 特定專業檢驗的操作
- 中階醫檢師: 檢驗數據的判讀
- 高階醫檢師:檢驗流程的設計及檢驗諮詢

醫檢師培育

- 專業技術之訓練
- 品管知識之培育
- 資訊發展之應用
- 醫學資料之熟悉
- 專才----全才
- 專業性
- 競爭力





醫檢師未來發展

- 高階醫檢師
- 檢驗醫學的研究
- 檢驗儀器的發展
- 檢驗資訊的規劃
- 參考實驗室的提供