



CEQA AGAR — A CANADIAN NATIONAL INITIATIVE IN LABORATORY STANDARDS
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THE FOLLOWING STATEMENTS ARE ALL TRUE.

- ◆ Antibiotic resistance in bacteria is becoming an increasingly significant concern for health care givers, the media and the Canadian general public. Governments across Canada are recognizing the need to monitor antibiotic resistance.
- ◆ The national government has voiced interest in the area of national standards in a number of key areas, including health care. Health care is however a provincial matter.
- ◆ In Canadian medical laboratories we do not have a tradition for developing *national* guidelines, and tend to rely primarily on programs outside Canada to develop and iterate standards.
- ◆ In a survey performed earlier this year, CMPT participants reported the need for national guidelines for the reporting of Vancomycin Resistant Enterococci, and suggested that a national agency would be the best institution to charge with the responsibility of creating them.

In 1997 two events occurred to address the need for laboratory standards. To ensure that laboratories reporting to national databases were consistently using the same methods for detection, identification, and reporting of organisms such as, but not limited to, VRE and MRSA a group of interested persons (under the auspices of the Laboratory Centre for Disease Control) convened in April to investigate whether a national code of standards on detection and reporting of antibiotic resistance should be developed in Canada. After much discussion, a new group was constituted. Because its origins were based on the need for quality and proficiency, the group developed the name **Canadian External Quality Assessment Advisory Group on Antibiotic Resistance**, resulting in the lengthy microbiological acronym **CEQA AGAR**.

In May a national consensus conference was convened that brought together the full constituency of professional groups with concern about antibiotic resistance: family practitioners, nurses, microbiologists, technologists, infectious disease physicians, epidemiologists, pharmaceutical industry representatives, and food industry representatives, and government. What was clear was the need for a **Canadian Coordinating Committee on Antibiotic Resistance** to ensure that the efforts of all these groups could be kept on track.

So where are we now, some 16 months later? CEQA AGAR has been convened with antimicrobial experts, both technologists and microbiologists from each province, along with representation from the national external quality assessment groups, accreditation groups, and government. The group has worked hard and long creating guidelines for Canadian laboratories but at the same time making sure they were not re-inventing the wheel — several of the CEQA AGAR members also sit on NCCLS committees. Through meetings, writings, electronic transfer and fax, four guidelines have been created:

1. Guidelines for the detection and reporting of Methicillin Resistant *Staphylococcus aureus*.
2. Guidelines for the detection and reporting of Vancomycin Resistant *Enterococci*.
3. Guidelines for the detection and reporting of Penicillin Resistant *Streptococcus pneumoniae*.
4. Guidelines for the detection and reporting of Extended Spectrum Beta-lactamase Producers.

At the present time these guidelines are being translated, and being prepared for circulation to all laboratories in Canada. These guidelines will be in your hands soon.

But what will this mean to the majority of Canadian laboratories that don't participate in national database programs? These guidelines were written with the full spectrum of laboratories in mind. Irrespective of to whom results are reported, all laboratories, regardless of size, require well written standards to follow as good practices. CEQA AGAR guidelines provide clarity and a valuable basis for all laboratories.

Once the new standards are published, printed and circulated, CMPT will adopt CEQA AGAR standards as the basis for grading challenge samples that include detection, identification and reporting of antibiotic resistance.

Volume 2, Number 4 Winter 1999
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