EDITORIAL

AIMS OF IFCC AND MY OWN GOALS

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It is always good to introduce a topic such as the organisation of the IFCC with a little history. You will see my plans for the future of the IFCC at the end of this paper.

In July of 1952 an international body of emerging national associations of clinical chemistry was organized under the auspices of the International Union of Pure and Applied Chemistry (IUPAC) by Prof. E. J. King of the Royal Postgraduate Medical School in London, U.K. It was in this institution that I received some of my early training in clinical biochemistry. I knew Prof. King, who was an excellent scientist and a very enthusiastic and dynamic man. He, unfortunately, died prematurely of a massive heart attack.

In 1955 the name of the organization was formally changed to The International Federation of Clinical Chemistry, and, in 1997, Laboratory Medicine was added to the name.

The aims of the IFCC were, and remain:

- To complement and enhance the activities of the member national societies.
- To transcend the boundaries of individual nations or single corporations in developing the field of clinical chemistry and laboratory medicine.
- To provide a forum for excellent standardisation.
- To disseminate information on "best practices" at various levels of technology.
- To promote a vision of clinical chemistry and laboratory medicine that extends beyond traditional narrow perceptions of the field.

The IFCC has three categories of Members: Full, Affiliate and Corporate.

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Full Members are recognized and established national societies or associations of clinical chemistry and laboratory medicine. There are currently 75 such members. They pay dues based on the number of members in their organisation.

Affiliate Members are allied international or national societies interested in the practice of laboratory medicine. Such organisations pay a flat fee, currently CHF 400 per year.

Corporate Members are companies concerned with the field of clinical laboratory practice. Such Members pay dues based on worldwide sales.

There are several regional organisations recognized within the IFCC. These include: The Arab Federation of Clinical Biology (AFCB), The Asian-Pacific Federation of Clinical Biochemistry (APFCB), The Federation of European Societies of Clinical Chemistry (FESCC), and The Latin American Federation of Clinical Biochemistry (COLABIOCLI). In addition, there are countries whose societies do not fall into any of the aforementioned groups.

The IFCC Members that are part of the AFCB include the Egypt, Jordan, Kuwait, Lebanon, Morocco, Syria and Tunisia.

The IFCC Members that are part of the APFCB are Australia, China Beijing, China Taiwan, Hong Kong, India, Indonesia, Korea, Malaysia, Pakistan, Thailand and Vietnam.

The IFCC Members that are part of the FESCC are Austria, Belgium, Bulgaria, Croatia, Czech Republic, Denmark, Estonia, Finland, France, Germany, Greece, Hungary, Iceland, Israel, Italy, Latvia, Lithuania, Luxembourg, Macedonia, The Netherlands, Norway, Poland, Portugal, Romania, Russia, Serbia & Montenegro, Slovak Republic, Slovenia, Spain, Sweden, Switzerland, Turkey and the United Kingdom.

The IFCC Members that belong to COLABIOCLI are Argentina, Brazil, Columbia, Cuba, Chile, Costa Rica, Dominican Republic, Ecuador, Honduras, Guatemala, Mexico, Paraguay and Uruguay.

IFCC Full Members that do not belong to any regional organisation are Bosnia-Herzegovina, Canada, Iran, Kenya, Nigeria, South Africa and the United States.

There are five Affiliate Members from Spain, Russia, Cyprus, Brazil and Eritrea, although we have recently learned that the Affiliate Member in Cyprus plans to merge with the Full Member.

There are currently 37 Corporate Members. This number has grown substantially in the last few years, and their contributions to the IFCC are impressive.

The organisational structure of the IFCC is shown below.

The governing body is the Council that is composed of one representative appointed by each Full Member (voting), Affiliate Member (non-voting), and Corporate Member (non-voting). The Council meets once every three years at the International IFCC/LM Congress.

Between meetings, the business of the IFCC is conducted by the Executive Board (EB). Important questions, such as approval of recommendation of changes to the IFCC's statutes, are decided by mail ballot of the Full Member representatives, voting on behalf of their societies.

The EB is constituted of the President, Past President, Vice-President, Secretary, Treasurer and three members, all of whom are elected, plus an additional member representing all Corporate Members.

The IFCC carries out much of its business through Divisions

and Committees. Divisions include: Communications and Publications (CPD), Congress and Conference (CCD), Education and Management (EMD), and Scientific (SD). Each Division reports to the EB.

Special Task Forces are appointed from time to time, and these also report to the EB. Currently there are three such groups: (1) Global Campaign on Diabetes; (2) Ethics; and, (3) Pediatric Laboratory Medicine.

The EB also appoints a Nominating Committee to prepare a slate of candidates for the EB positions, and an Award Committee to select recipients of the IFCC's various awards.

There is a Financial Advisory Committee that reports directly to the EB. This Committee, headed by the Treasurer, helps in the reviewing of the financial situation of the IFCC, recommends fiscal policy, and carries out financial planning for the future.

As the name implies, the CPD manages our internet activities, which includes our website, computer educational courses, and web-based publications. It also publishes IFCC's journal and newsletter.

The CCD is responsible for the general administration and management of IFCC meetings, such as congresses, conferences and symposia, as well as for approval of conferences that are not organised by the IFCC but want to obtain IFCC auspices.

The EMD fosters educational activities and managerial skills. It offers critiques, advice and cutting-edge expertise on issues related to laboratory management, teaching and education.

The SD investigates and promotes theoretical and practical developments in standardisation in clinical laboratories. It is involved in many key scientific such as research areas of relevance, identifying and investigating problems, transferring technical innovations to the clinical laboratory and to the clinician, facilitating the development and implementation of diagnostic strategies, establishing standards for scientific and technical aspects of good laboratory practice, participating in the scientific programs of IFCC congresses and conferences, and ensuring the quality of IFCC scientific documents. This committee is involved in many critical developments in the field of clinical chemistry and laboratory medicine.

All of the divisions described above are concerned with many aspects of our field. Their projects are too numerous to list

here, but you can read about them on our web site, www.ifcc.org.

My goals for the IFCC are outlined below. I am currently working with the EB to decide what we should tackle first and what are the most important factors for our future success.

- Encourage the EB to do more visionary thinking and to set priorities.
- Continue the excellent scientific work of the IFCC.
- Determine the need of developing countries, and meet what we can of these needs. Two such programs are already underway: Visiting Lecturers' program; and the Professional Scientific Exchange program.
- Improve communications.
- Increase the public's awareness of IFCC by working through our Members.

- Examine ways to take actions that reflect our commitment to all branches of laboratory medicine.
- Encourage both scientific and educational articles in e-JIFCC.
- Set up in the IFCC Office an organised record of all contracts, agreements, etc.

I encourage you to contact me directly at president@ifcc.org with any specific questions or ideas that you might have. I will look forward to hearing from you.

REFERENCES:

IFCC Handbook 2003-2005. The next edition, 2006-2008, will be ready shortly.