

Summary of an evaluation provided by SKUP | cobas b 101 for measurement of HbA1c

<i>Manufacturer</i>	Roche Diagnostics GmbH
<i>Supplier</i>	Roche Diagnostics Norge AS in Norway* Roche Diagnostics A/S in Denmark*
<i>Launched in Scandinavia</i>	April 2013



Aim

The aim of the evaluation was to assess the analytical quality and user-friendliness of **cobas b 101 HbA1c**, when used under real-life conditions by intended users in primary health care centres (PHCCs). Assessment under optimal conditions was performed under a former evaluation (SKUP/2020/117). The quality goal for repeatability was fulfilled under optimal conditions (CV 1,4-3,4%), while the quality goal for accuracy was not (83%).

Evaluated parameters	Quality goals	Conclusions and results
Repeatability	CV $\leq 3,0$ %	Fulfilled under real-life conditions (CV 1,4-2,6 %)
Accuracy	≥ 95 % of the results should be within $\pm 3,0$ mmol/mol from the results of the comparison method at HbA1c concentration $< 35,3$ mmol/mol and within $\pm 8,5$ % at HbA1c concentration $\geq 35,3$ mmol/mol	Not fulfilled under real-life conditions (83 %)
User-friendliness	A total rating of "Satisfactory"	Not fulfilled

Background

<i>Measurement system</i>	In vitro diagnostic device for measurement of C-reactive protein (CRP), Haemoglobin A1c (HbA1c) and a Lipid Panel
<i>Intended users</i>	Health care professionals
<i>Sample material</i>	Capillary whole blood, or venous ethylenediaminetetraacetic acid (EDTA) or lithium-heparinised venous whole blood. Capillary whole blood was evaluated.

Material and methods

<i>Participants</i>	106 patients in PHCC's
<i>Comparison method</i>	A high performance liquid chromatography (HPLC) method implemented on D-100 HbA1c System (Bio-Rad Laboratories, Inc.)
<i>Analytical procedure</i>	The PHCC's received a demonstration of cobas b 101 HbA1c by Roche Diagnostics Norway. Analysis of fresh capillary whole blood samples from each participant on cobas b 101 HbA1c . The measurements were performed in duplicate, i.e. two separate finger sticks. Three lots of test discs were used. Analysis of venous samples (K ₂ -EDTA sample tubes) from the same individuals were measured in duplicate on the comparison method. The evaluation was carried out from June to December 2021.
<i>User-friendliness</i>	Assessed using a questionnaire with three given ratings; satisfactory, intermediate and unsatisfactory

Additional findings

<i>Bias</i>	Bias ($\approx +2$ mmol/mol) between cobas b 101 HbA1c and the comparison method
<i>Technical errors</i>	None

* Requesting company