



## The 2014 AACC Annual Meeting is History!

### A conversation with Carmen Wiley

2014 Annual Meeting Organizing Committee Chair

**History Division:** Congratulations, Carmen on a great annual meeting. How do you think it went?

**Carmen Wiley:** Really well! We will be looking at the program evaluations and other measures, but it had the highest number of attendees so far, except for some of the recent meetings in California. I have also been told by many members that the scientific component was very strong.

**HD:** What was the most memorable moment for your committee?

Welcome to the new History Division Newsletter!

We are adding coverage of recent “history” that we hope will appeal to all of the AACC membership.

**CW:** Without question, the cancellation of our Thursday plenary speaker at the last minute.

Dr. Sharon Lewin from Melbourne, Australia lost several friends and colleagues in the crash of Malaysia Airlines flight 17. She needed to deal with many issues at the HIV/AIDS meeting in New Zealand to which they were headed and could not come to the U.S.

Dr. Amrita Cheema from Georgetown University, who was scheduled to speak at a “hot topics” session about her group’s recent findings regarding levels of plasma phospholipids and the risk of Alzheimer’s disease, graciously stepped in and gave a great plenary talk.

**HD:** How did the exhibitors feel about the expo this year?

**CW:** All of the exhibitors that I spoke to said that they saw good attendance and felt that the people visiting their booths

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were all “serious” customers. They especially liked the New Products “wall” at the entrance to the convention center where attendees could preview new products using enormous flat screens.

**HD:** Yes, that “blue monster” (after the “green monster” at Fenway Park) was cool.

**CW:** Very cool. The attendees started by putting in their badge number so many exhibitors knew in advance how much interest there was in some of their products. They also liked the new registration format and said that providing free box lunches on Wednesday and Thursday really helped to bring more people into the exhibit hall.

**HD:** What advice do you have for Dr. Corrine Fantz, who will be the chair of the AMOC next year?

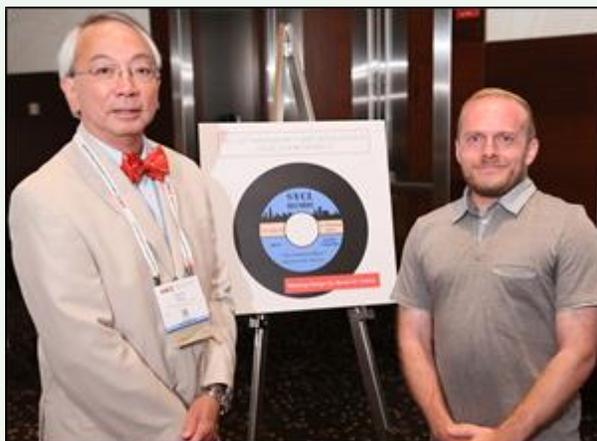
**CW:** It is very important to keep all of the members of the committee involved in all of the areas of the meeting. The annual meeting is really a team effort, including the AACC staff (especially Gail Mutnik). We dealt with each problem and issue together.

**HD:** OK. Thanks for speaking with us and we hope that you and your team are all enjoying some well-deserved rest.

*Carmen Wiley PhD is Scientific Director, Pathology Associates Medical Laboratories, Spokane WA.*

*Annual meeting attendees at the New Products “wall”.*

## SYCL’s 10<sup>th</sup> Anniversary is a “Hit”



The Society for Young Clinical Laboratorians (SYCL) was founded in 2004. To mark its 10<sup>th</sup> anniversary at the annual meeting in Chicago, there was a T-shirt contest. The winner was Dr. **Steven Cotten** (above right, with AACC President Steve Wong). He is Assistant Professor of Pathology and Associate Director of Chemistry & Toxicology at Ohio State University’s Wexner Medical Center in Columbus, Ohio.

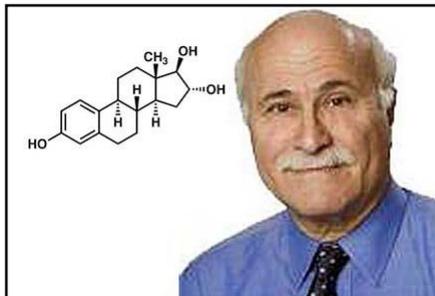
Dr. Cotten said that he got his inspiration for the design by thinking about things associated with Chicago. “My first idea was deep-dish pizza, but then I thought of the blues. As I was already thinking of something round, the idea of a 45 rpm record came to me”, he said. The song (on Side B) is the “Test Utilization Blues”, something Dr. Cotten thought would resonate with everyone these days.

Dr. Cotten did his clinical chemistry training at University of North Carolina Chapel Hill and has been at Ohio State for two years now.



## Transitions

### Jack Canick 1944 - 2013



Jacob (Jack) Canick PhD (above with the hormone estriol) died suddenly while at Heathrow Airport in May, 2013. He was on his way to participate in a course on the prenatal diagnosis of inherited disorders. He was 68 years old.

Jack grew up in New York City. He went to Brandeis University and settled in the Boston area, getting his PhD from the University of Rhode Island. Jack lived in a suburb of Boston and he loved to listen to classical music during his commute back and forth to work. He was a clever scientist and a delightful friend and colleague.

His PhD thesis involved the trophic effects of ACTH, but the focus of his life's work was steroid hormones.

Jack was a laboratory director at the Women & Infants Hospital in Rhode Island, and made many important contributions to maternal screening for chromosomal disorders. He hypothesized that maternal blood levels of unconjugated estriol (uE3) would be low in pregnancies affected by Down syndrome due to the immaturity of the fetus. His laboratory was the first to implement the "triple" test (AFP, hCG and uE3) for the detection of Down syndrome.

Jack loved to teach and he was extremely helpful to me when I was implementing maternal screening at Beth Israel Hospital in Boston. His sense of humor brought spice to his presentations, and he participated in courses organized by the Foundation for Blood Research in Maine, the Wolfson Institute in London, and AACC. He was also keeping up with new approaches to maternal screening, and he recently helped to develop guidelines for the validation of prenatal screening using fetal DNA.

There is a very nice tribute to Jack (written by Nick Wald, Geralyn Lambert-Messerlian and Glenn Palomaki) in a recent issue of the journal *Prenatal Diagnosis* (33:813-814, 2013).

- Jim Faix

## Kricka's Corner

telegram  
telephone  
telex, ....?

Peter Wilding recently dropped into my office and asked me to look at some AACC documents to see if they were worth archiving. Among them was the 1992 AACC Directory. Those of us with a lengthy professional perspective can remember the days before personal computers, the internet, e-mail, etc. I was curious to see when AACC adopted this emerging form of communication.

Electronic mail dates back to MAILBOX at Massachusetts Institute of Technology from 1965, and ARPANET in the late 1960s. The now familiar @ symbol to denote sending messages from one computer to another was chosen by Ray Tomlinson, one of the ARPANET contractors.

In the 1970s and 1980s there were proprietary 'dial-up' systems (e.g., MCI Mail, EasyLink, Telecom Gold, CompuServe, AppleLink), but the systems did not transmit messages from one system to another. The creation of the World Wide Web by Tim Berners-Lee in 1989 laid the foundation for easily accessible email as we know it today.

The "information for contributors" for *Clinical Chemistry* first mentions the

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requirement for “E-mail address of the corresponding author” in the February issue of 1995 and an actual email address first appears in this section in the January 1996 issue. I did find an earlier reference to e-mail in an advertisement for TaqStart by Clontech (below) in the October 1994 issue, but it gives the e-mail address as “Clontech.com”.



An email address for CLN ([cln@aacc.org](mailto:cln@aacc.org)) first appears in the CLN “Sales” information section in the January 1996 issue (replacing the Telex number provided in the same section of the December 1995 issue).

Email is not without controversy, and one issue centers on who should be credited with the invention of email. V.A. Shiva Ayyadurai has been credited with inventing the first email system in 1978 at the University of Medicine and Dentistry in Newark, New Jersey and more on his work and on this controversy can be found on-line ([http://vashiva.com/inventing\\_email.asp](http://vashiva.com/inventing_email.asp)).

In the second decade of the third millennium, e-mail has become the dominant form of communication. In 2013, the total number of worldwide e-mail accounts was over 3.8 billion, and the total number of e-mails sent or received worldwide is estimated to be over 150 billion per day! But nearly 70% of them are spam – as we all well know.

- Larry Kricka

“Those who cannot remember the past  
are condemned to repeat it.”

- George Santayana

**Join the AACC History Division!**

**CITATION  
CLASSICS**  
*Illustrated*

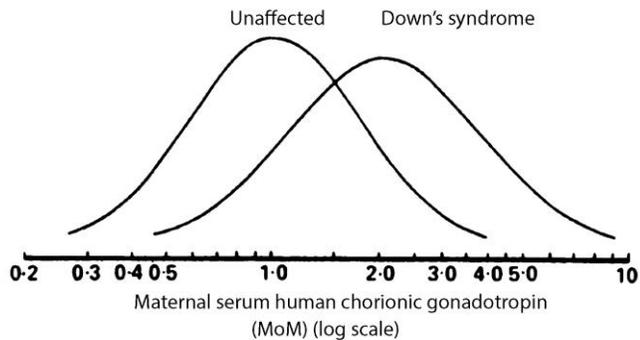


Image from Wald NJ et al, BMJ 297:883-887, 1988

In the January 2014 issue of *Clinical Chemistry*, Nick Wald discussed the report in which he and his colleagues verified that hCG levels (expressed as “MoMs”) were elevated in women carrying fetuses with Down syndrome. This led to the creation of the “triple screen” for chromosomal abnormalities.

In his essay, Wald remarked how this was a significant paradigm shift. The laboratory’s “result” was no longer the level of an analyte but a risk estimate, based on the levels of several analytes, as well as the maternal age. This foreshadows “black box” algorithmic testing currently on the FDA’s radar. But, more importantly, it points out the need to find other areas in which we can provide “information” - instead of just “data”.

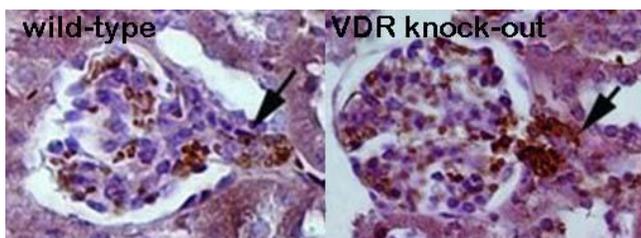


Image from Li et al, J Clin Invest 110:229-238, 2002

In the March 2014 issue, Yan Chun Li described how murine bed-wetting led him to

discover a new role for vitamin D. Vitamin D receptor knock-out mice had a marked increase in renin production (shown using anti-renin immunohistochemistry), Elevated levels of angiotensin II induced increased thirst. More importantly, it also produced hypertension.

In his essay, Li discussed how suppression of renin helped to explain the relationship between vitamin D deficiency and cardiovascular disease. If only we had similarly documented explanations for the many disorders supposedly associated with vitamin D deficiency!

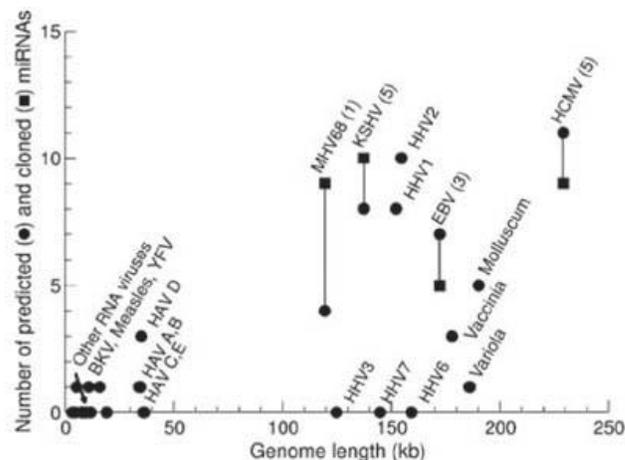


Image from Pfeffer S et al, Nat Methods 2:269-276, 2005

In the May 2014 issue, Sebastien Pfeffer described confirmation of the presence of microRNAs in the herpesvirus family. The figure above shows the number of predicted (using computational software) and cloned miRNAs. They were found in DNA viruses, but not in RNA viruses (lower left).

In his essay, Pfeffer described how miRNAs help DNA viruses modulate pathways in the host genome to promote their replication. There are more than 400 known viral miRNAs and over 2000 known human miRNAs. The latter are probably much more likely to be developed as clinical tests. There is an excellent review of miRNAs with potential to be biomarkers of cancer, cardiovascular disease and other disorders in the September 2014 issue of *Clinical Chemistry*.

- Jim Faix