

Setting up a National Serosurveillance Programme in Ireland Using Residual Sera Sourced from General Practice – Pilot Evaluation

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BACKGROUND

- Timely serosurveillance is needed to inform public health policy
- HPSC proposed a National Serosurveillance Programme (NSP) using residual GP specimens (fig 1)

AIM

- To evaluate a pilot of the NSP to determine feasibility, acceptability and practicality of proposed processes (fig 2)

METHODS

- Expression of interest (EOI) sent to all adult hospital laboratories
- Virtual meeting with interested laboratories
- One week collection of 100 specimens
- Qualtrics survey evaluation of laboratories
- Virtual workshop evaluation with NVRL and HPSC

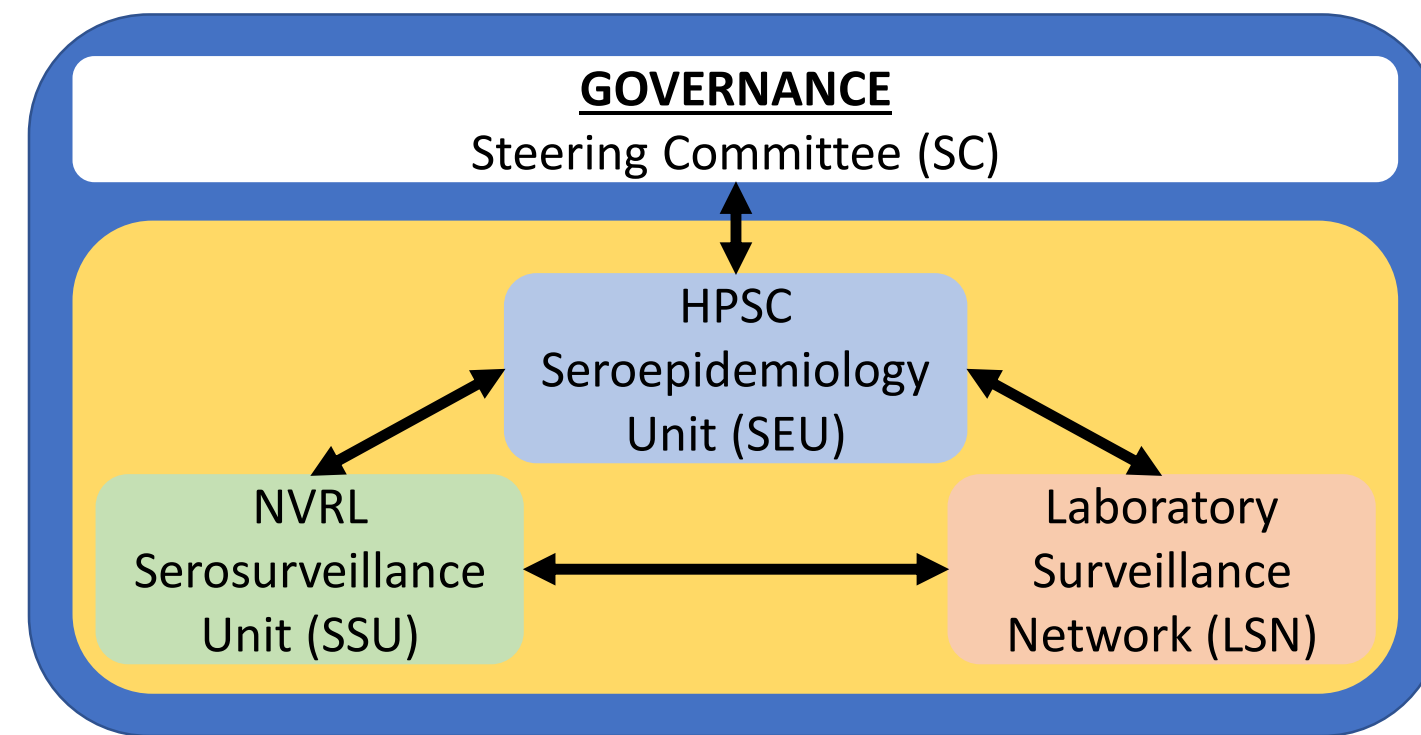


Figure 1. Structure of the National Serosurveillance Programme. Each stakeholder colour corresponds to the processes below.

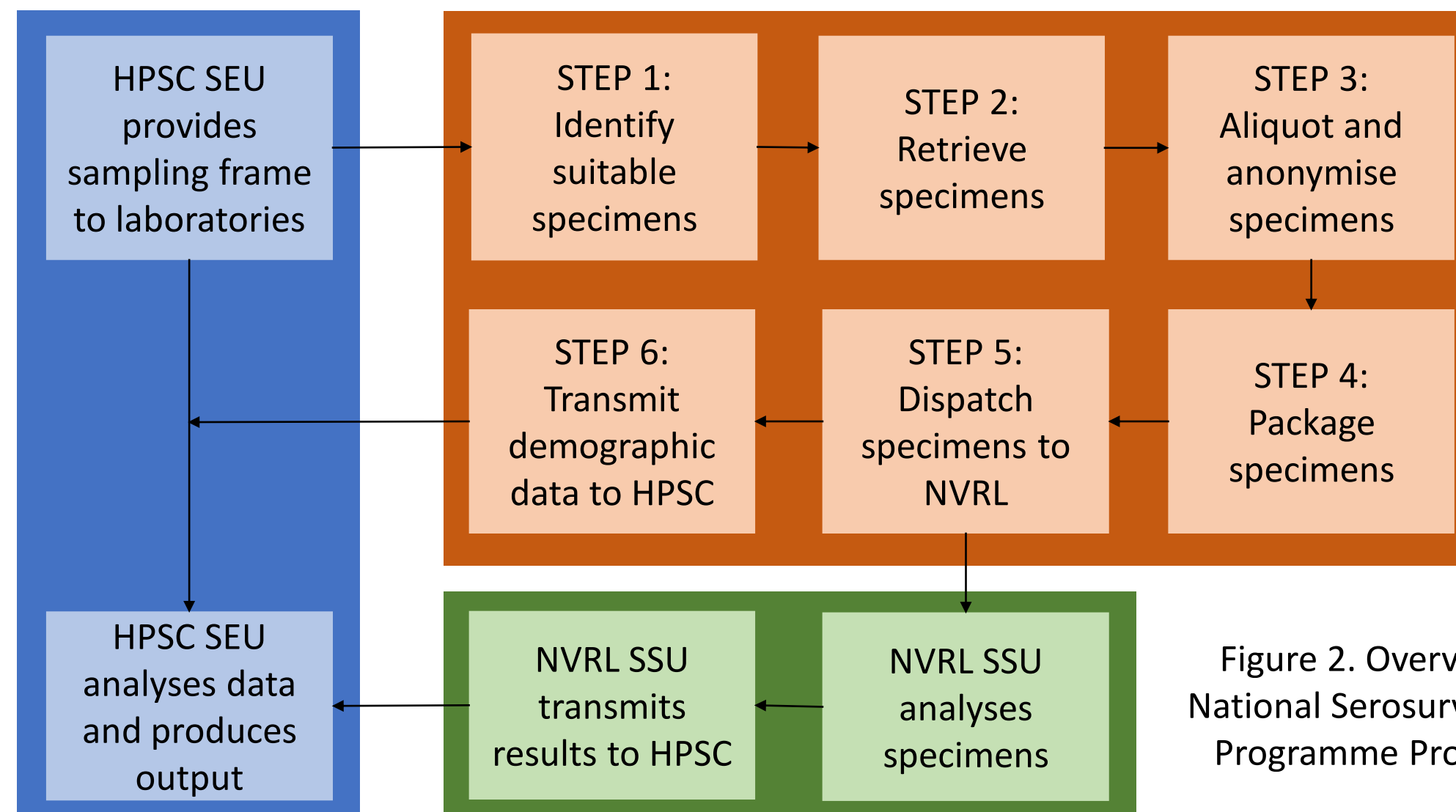


Figure 2. Overview of National Serosurveillance Programme Processes

RESULTS

- **18/39** laboratories responded to EOI
- **Eight** laboratories participated in pilot
- **791** specimens received (800 expected)
- **€528** – average cost per 100 specimens
- **18 hours** – average number of person hours needed to process 100 specimens
- **150 specimens** – average number of specimens feasible per collection cycle
- Largest **challenge** was **laboratory staffing** due to manual process of specimen anonymization

DISCUSSION

- Pilot successfully showed that residual sera serosurveillance viable alternative to population based serosurveys
- National Serosurveillance Programme implemented, with 4th collection cycle commencing end May 2022

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