# Automation in Histopathology



Michael Eden Histopathology Clinical Lead Together Safe Kind Excellent

June 2024

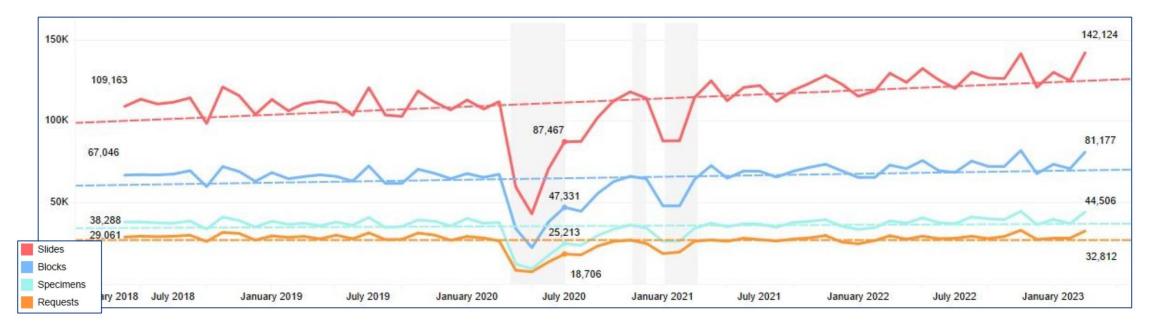


Why do we need to work with industry?

- 1. Workload is increasing (over 25% from pre pandemic levels), Increase is in amount and complexity (e.g. Genomics and Immunohistochemistry)
- 2. There is a local, national, and international staff shortage
- 3. It is not possible to meet the demands of the service
- 4. The current process is 150 years old
- 5. The process is not scalable
- 6. The system is inherently unsafe due to the potential for sample mix ups and crossovers.

# NHS CUH

# **Increased Activity**



Facts and Figures (change between 2018/19 and 2022/23)

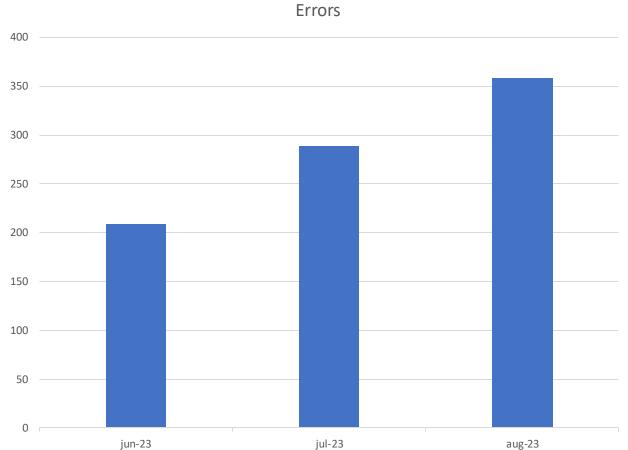
- 20% more slides and 14% more requests.
- 27% more slides produced for each cancer/urgent request.
- Increased activity per 100k population.
- Increase from 1,279 to 30,396 outsourced cases.
- 7% increase in slides between 21/22 and 22/23.

#### **Key Messages**

- Volume of work has increased significantly.
- The growth in volume is higher than growth in population .
- Complexity is increasing, with each request generating more work within the laboratory.

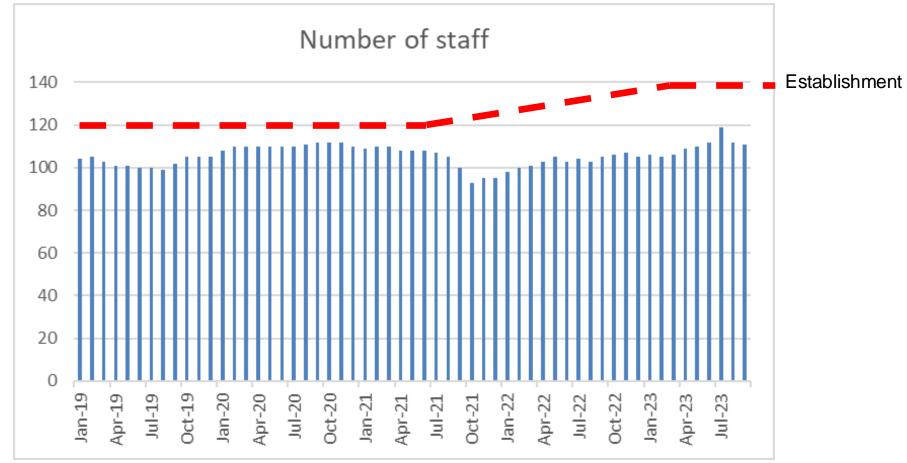
# Error rates are increasing





#### Workforce













**Biochemistry** 







Sample extraction/ Clinical Data



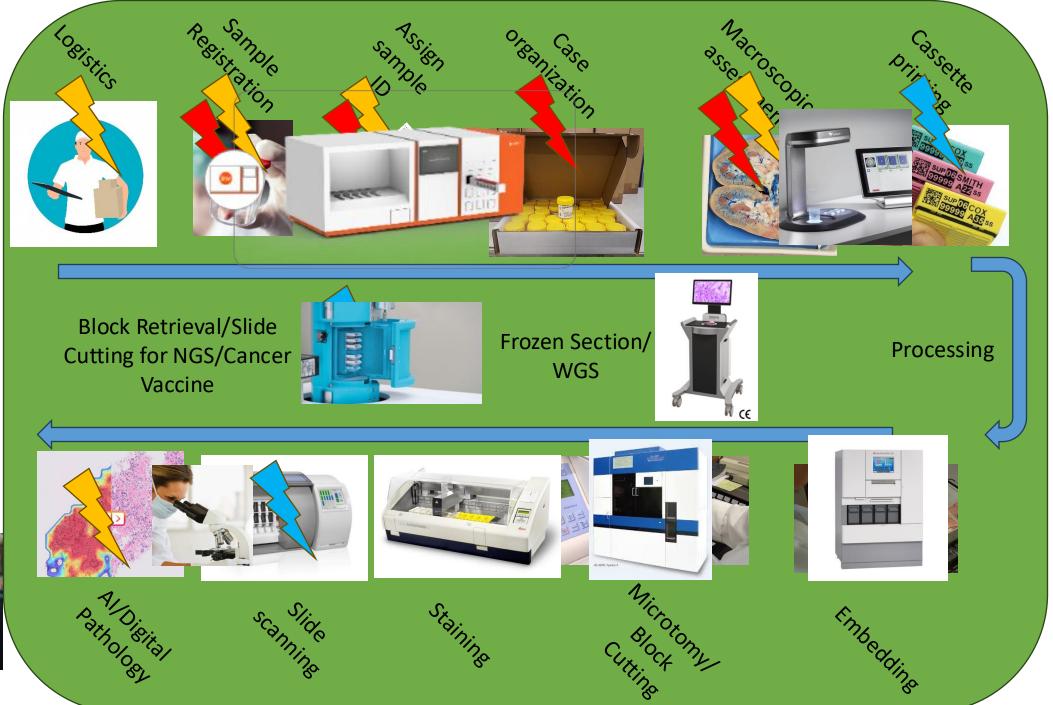
Commercial Product Widely Deployed



Prototype

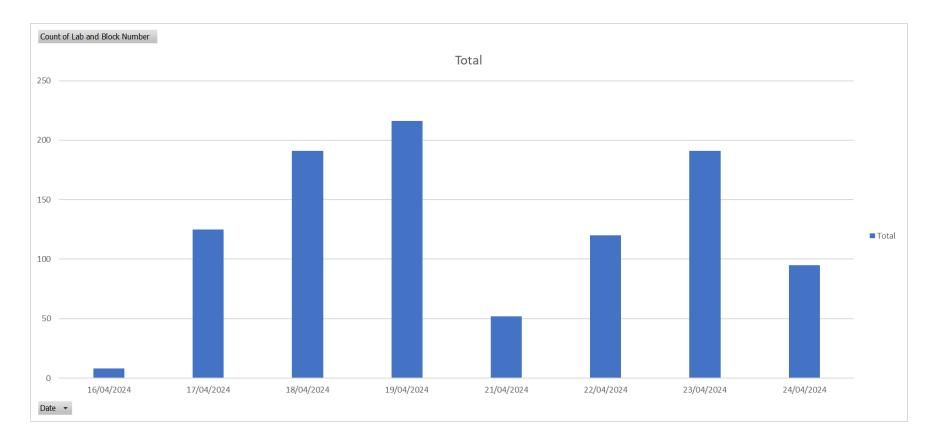


Diagnosis/Treatment

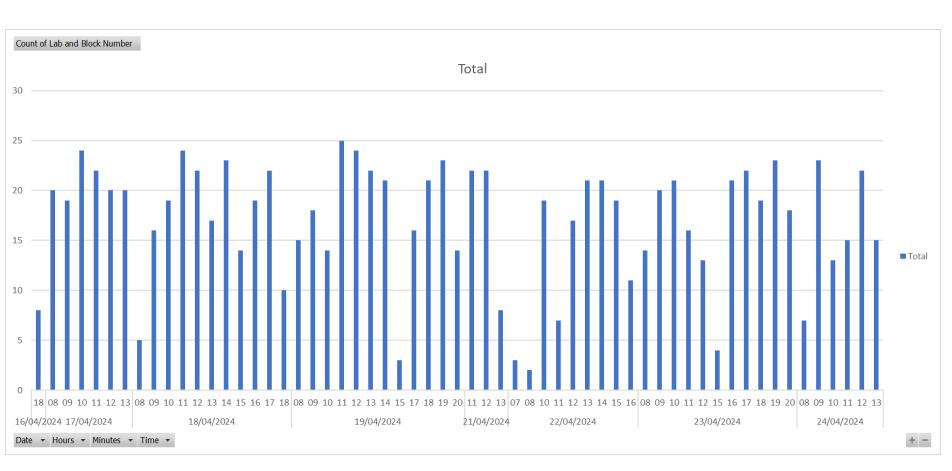


# NHS CUH

### AS-410 Automated Sectioner



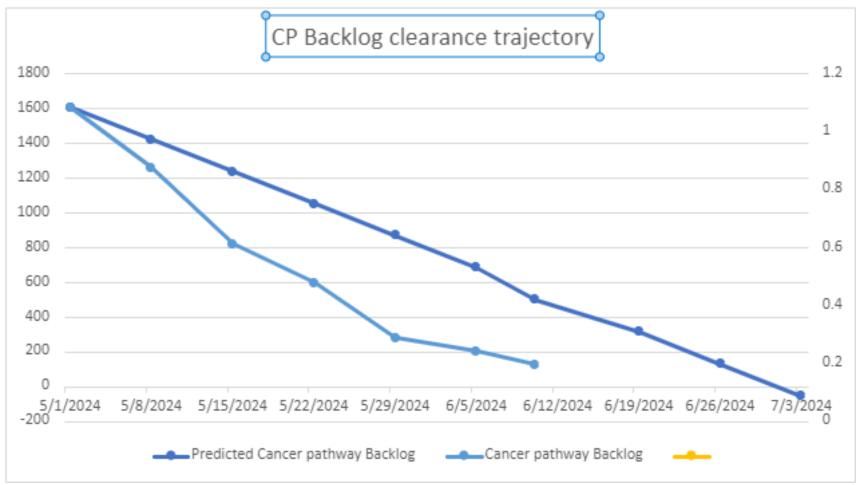
### AS-410 Automated Sectioner





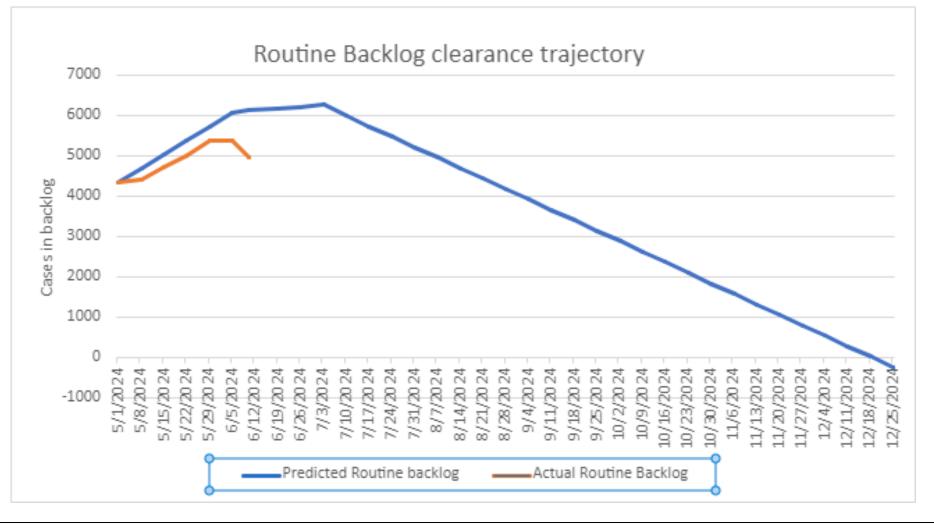
# Backlog

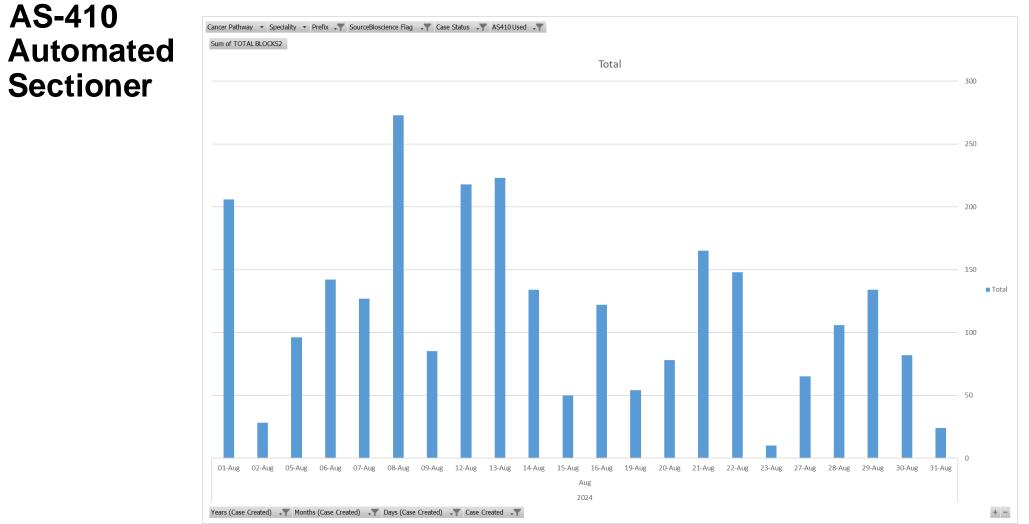




## Backlog





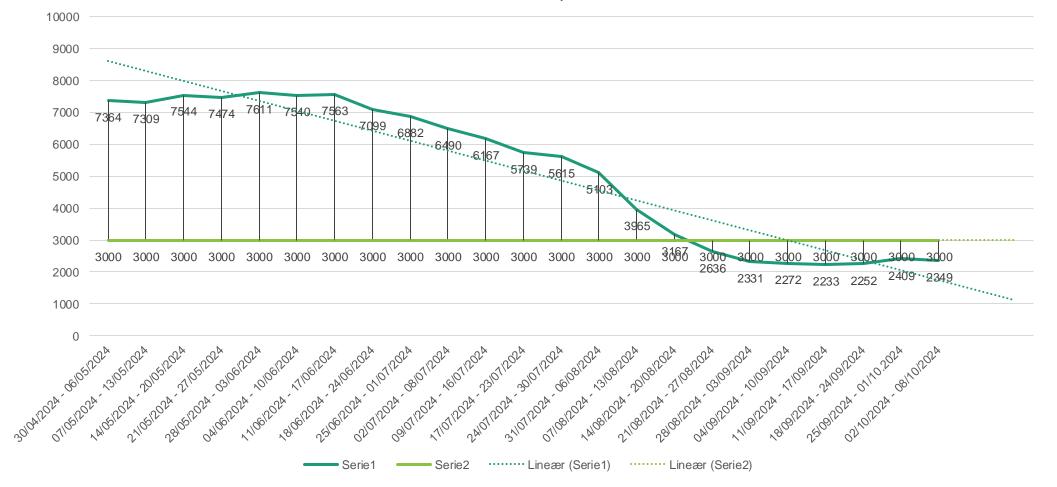


**AS-410** 

NHS CUH

### Backlog





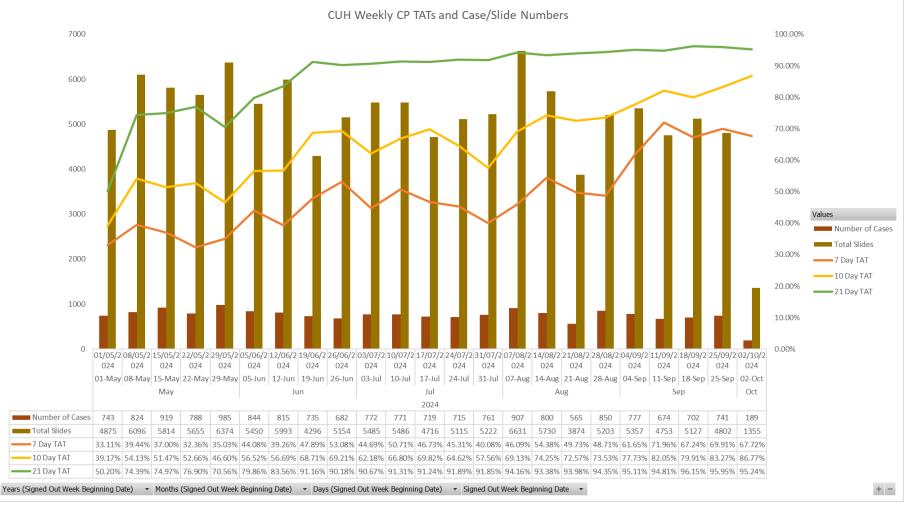
#### Case Trend in department

#### Turnaround Time

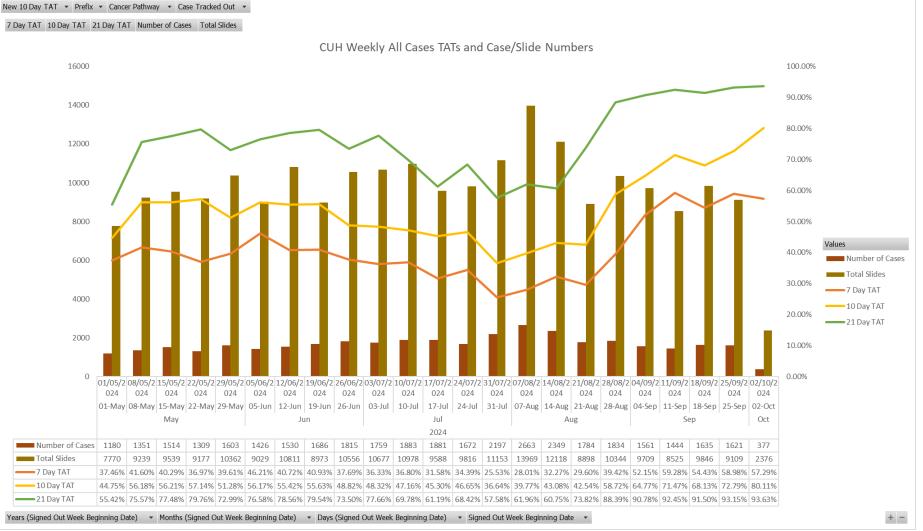


#### Prefix 🕂 Cancer Pathway 🕂

#### 7 Day TAT 10 Day TAT 21 Day TAT Number of Cases Total Slides



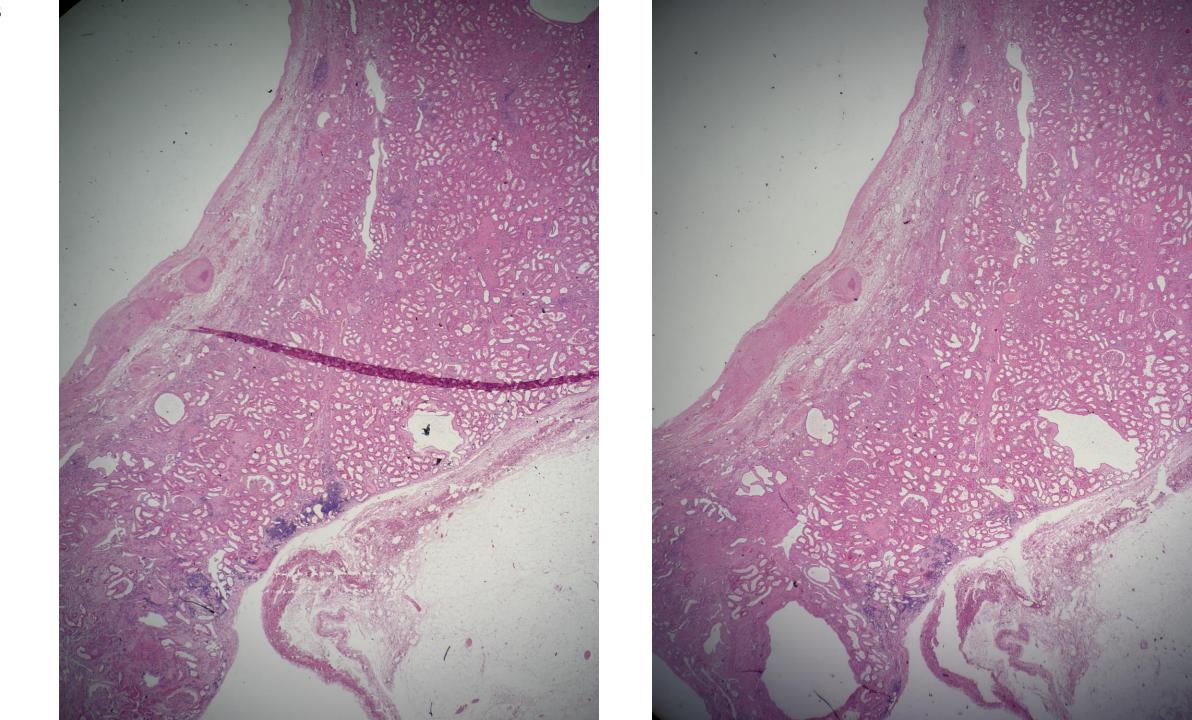
#### Turnaround Time

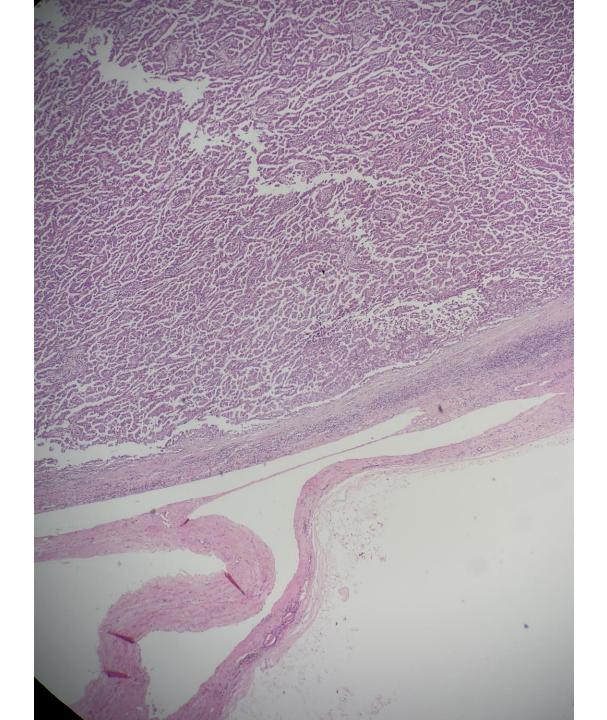


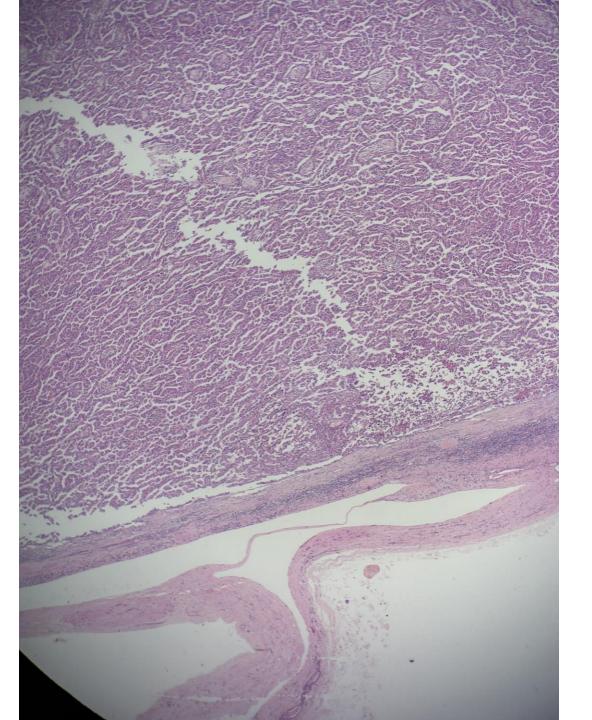
Spot the difference

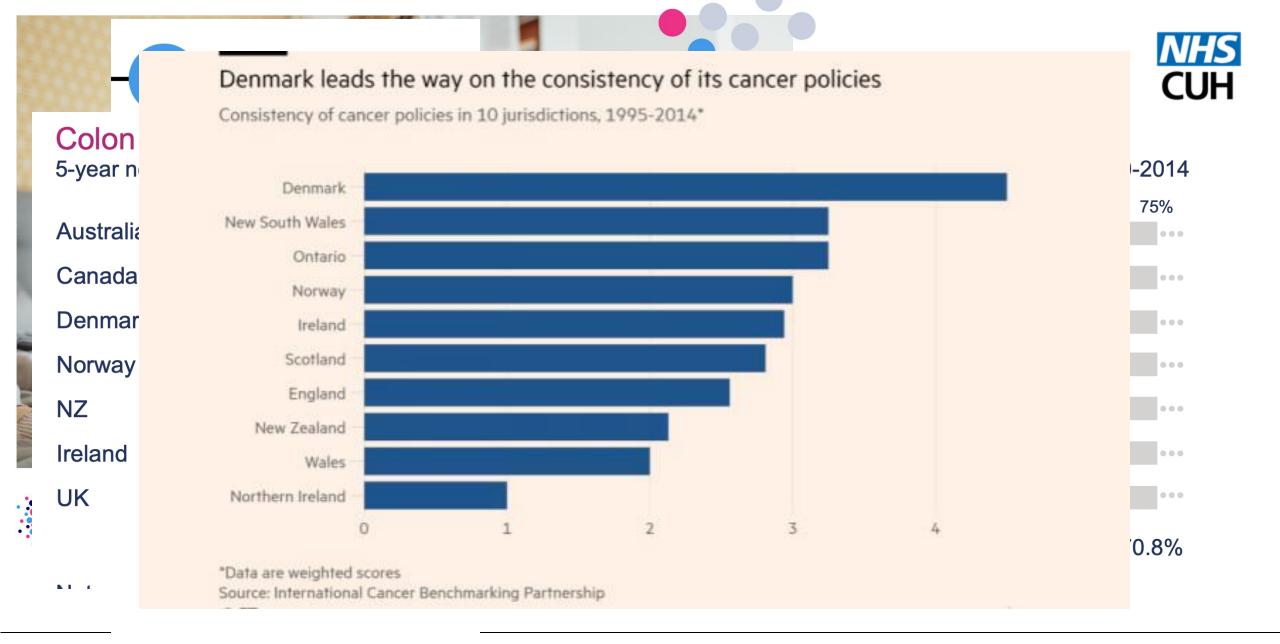


Automated or Manual?









#### **CRUK Manifesto**