American College of Medical Genetics **ACT SHEET**

Newborn Screening ACT Sheet [Increased Leucine] Maple Syrup (Urine) Disease

Differential Diagnosis: Maple syrup urine disease (MSUD); hydroxyprolinemia (probably benign).

Condition Description: In MSUD, leucine, isoleucine, and valine (branched chain amino acids) cannot be metabolized further than their α -ketoacid derivatives. The amino acids and organic acids accumulate and produce severe toxicity.

YOU SHOULD TAKE THE FOLLOWING ACTIONS IMMEDIATELY:

- Contact family to inform them of the newborn screening result and ascertain clinical status (poor feeding, vomiting, lethargy, tachypnea).
- Consult with pediatric metabolic specialist.
- Evaluate the newborn (poor feeding, lethargy, tachypnea, alternating hypertonia/hypotonia, seizures). If any sign is present or infant is ill, transport to hospital for further treatment in consultation with metabolic specialist.
- Initiate timely confirmatory/diagnostic testing and management, as recommended by specialist.
- Provide the family with basic information about MSUD and dietary management.
- Report findings to newborn screening program.

Diagnostic Evaluation: In MSUD, plasma amino acid analysis reveals elevations of leucine, isoleucine, alloleucine, and valine (the branched chain amino acids); and urine organic acid analysis reveals abnormal branched-chain hydroxy- and ketoacids. In expanded screening, leucine/isoleucine and hydroxyproline cannot be differentiated, so if the baby has hydroxyprolinemia confirmatory amino acid analysis will show only increased hydroxyproline (a rare and likely benign entity).

Clinical Considerations: MSUD presents in the neonate with feeding intolerance, failure to thrive, vomiting, lethargy and maple syrup odor to urine and cerumen. If untreated, it will progress to irreversible mental retardation, hyperactivity, failure to thrive, seizures, coma, cerebral edema, and possibly death. Hydroxyprolinemia is probably benign.

Additional Information:

Emergency Protocols (New England Consortium of Metabolic Programs)

Gene Reviews

Genetics Home Reference

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Find Genetic Services

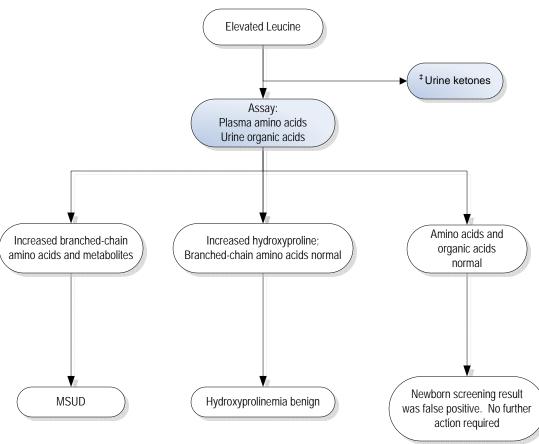
Referral (local, state, regional and national):

<u>Testing</u>
<u>Clinical Services</u>

Disclaimer: This guideline is designed primarily as an educational resource for clinicians to help them provide quality medical care. It should not be considered inclusive of all proper procedures and tests or exclusive of other procedures and tests that are reasonably directed to obtaining the same results. Adherence to this guideline does not necessarily ensure a successful medical outcome. In determining the propriety of any specific procedure or test, the clinician should apply his or her own professional judgment to the specific clinical circumstances presented by the individual patient or specimen. Clinicians are encouraged to document the reasons for the use of a particular procedure or test, whether or not it is in conformance with this guideline. Clinicians also are advised to take notice of the date this guideline was adopted, and to consider other medical and scientific information that become available after that date.







Actions are shown in shaded boxes; results are in the unshaded boxes.

Abbreviations/Key

MSUD = Maple (syrup) urine disease

‡ = When the positive predictive values of screening are sufficiently high and the risk to the baby is high, some initiate diagnostic studies at the same time as confirmation of the screening result is done.

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