Methylmalonic Acidemia (mutase) >18 years

Clinic Visits:

☑ At least yearly

Laboratory studies:

- ☑ Monitoring of diet
 - plasma amino acids and methylmalonic acid levels at least yearly
- ☑ Yearly
 - Comprehensive metabolic panel
 - Urine analysis for protein
 - Blood pressure check
 - o Serum carnitine
 - Plasma amino acids
 - Urine organic acids
 - o Quantitative urine/plasma methylmalonic level
 - o Prealbumin /albumin
 - Plasma ferritin, transferrin, or iron studies
 - Amylase and Lipase
 - Possible B-type Natriuretic peptide (heart)
 - o Possible CBC, hemoglobin, and hematocrit
 - o Consider folate and Vitamin B12
 - Consider other nutritional testing depending on formula (Zinc, selenium, vitamin D, essential fatty acids, and lipid profile).
 - Possible 24 hour urine creatinine clearance and protein

During illness:

- ☐ Call Metabolic Clinic to alert them that you are sick
 - o Poor feeding, fever, vomiting, lethargy
- ☐ Take glucose gel or polymer solution if needed (or instructed to do so)
- ☑ If you are not able to keep down glucose containing fluids, you will need to go to the emergency room for IV 10% dextrose (glucose)
- ☑ Be sure to bring Emergency Room letter with you to the hospital
- ☑ Labs during illness include: comprehensive metabolic panel, phosphate, CBC, urine analysis for ketones, amylase/lipase (risk of pancreatitis), possible ammonia, possible Btype Natriuretic peptide (heart), possible plasma amino acids, and possible methylmalonic acid
- ☑ IV carnitine will be given to you
- ☑ Possible cardiac monitoring while in the hospital
- ☑ Please alert the Metabolic Clinic if you need surgery
- **☑** Wear Medic Alert Bracelet!!!

Evaluations:

- ☑ DEXA scan (bone health) at18 years old
- ☑ Possible neurology or rehab evaluation if needed
- ☑ Possible renal evaluation (kidneys) if needed

Topics:

☑ Review of biochemistry and genetics of methylmalonic acidemia

- ☑ Complications
 - o Bone marrow and immune suppression
 - o Pancreatitis
 - o Kidney disease
- ☑ Diet/management
 - o Propiongenic amino acid restricted diet
 - o Importance of medical formula
 - Use of low protein foods
 - o Possible B12 injections
 - o Carnitine
 - o Possible use of antibiotics to reduce gut flora
 - Possible transplant of liver and/or kidney
 - Avoid fasting
 - Management during illness

Please make sure you have clinic visits and levels done on time. Call the IMD	clinic at
to make an appointment, schedule a blood draw, or with any other	er questions. If
you urgently need to reach a Metabolic physician, call and as	k to page the
Metabolic physician on call.	

Thank You, Your Metabolic Team