



# Diagnostic Proficiency Testing Discussion common sample 2011

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# Patient information



The patient is a 7-year old girl with developmental retardation, in particular speech delay. She has epilepsy, for which she is treated with valproic acid.

## First metabolic workup:

	<b>Guanidinoacetate</b>	<b>Creatine</b>	<b>Creatinine</b>
<b>Urine</b> (Ref. values)	<b>640</b> mmol/mol (0-129)	15 mmol/mol (0-754)	2.0 mmol/L -
<b>Plasma</b> (Ref. values)	<b>28.8</b> $\mu$ mol/L (0.5-3.6)	<b>14</b> $\mu$ mol/L (17-109)	31 $\mu$ mol/L (31-68)

Mutation analysis GAMT

# Diagnosis and target values



## Guanidinoacetate methyl transferase (GAMT) deficiency

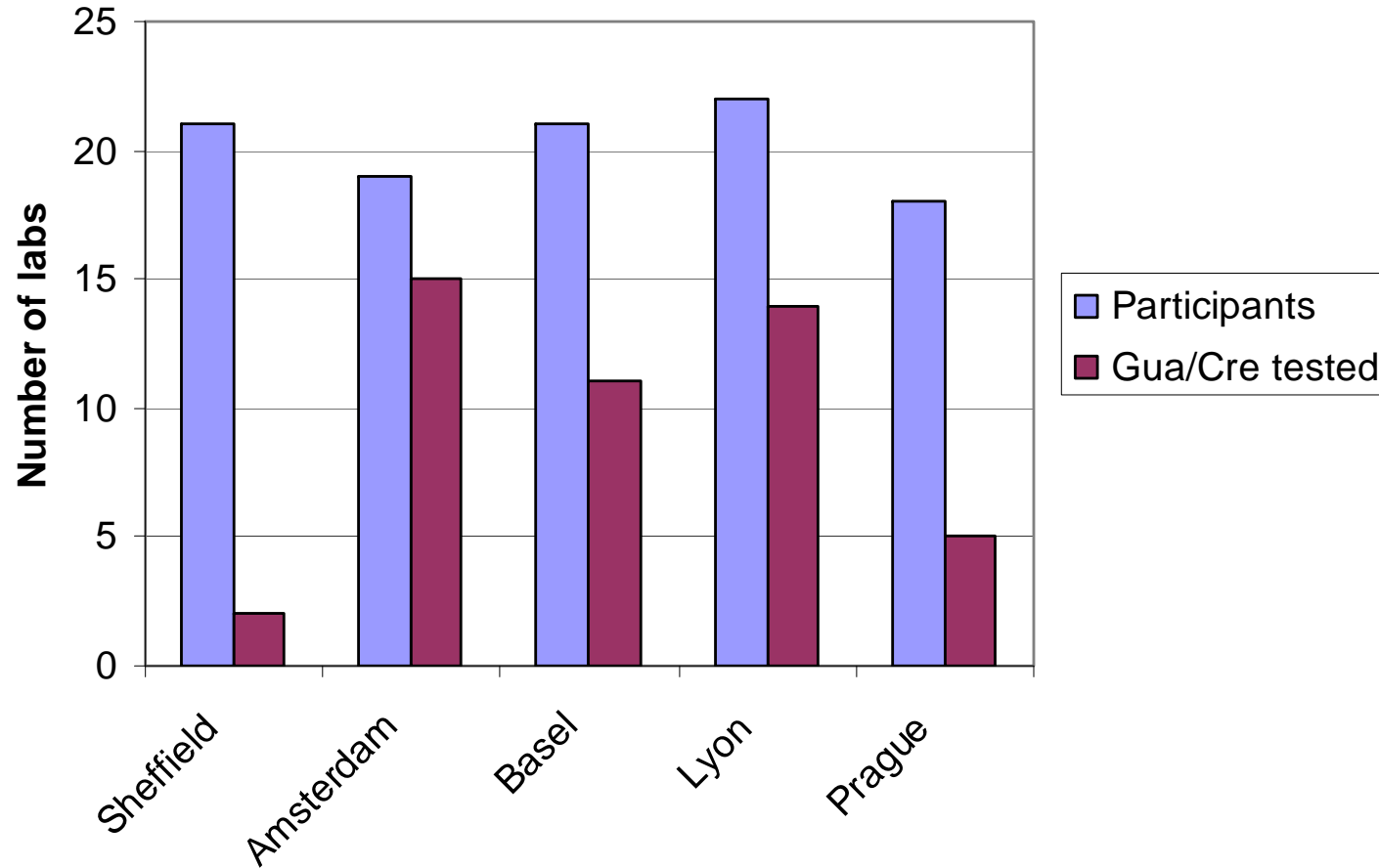
### Target values:

Analytical: Elevated guanidinoacetate  
(Low creatine)

Interpretation: GAMT deficiency

Advice: Urine/plasma/CSF guanidinoacetate, creatine  
and/or  
GAMT enzyme assay  
and/or  
GAMT mutation analysis

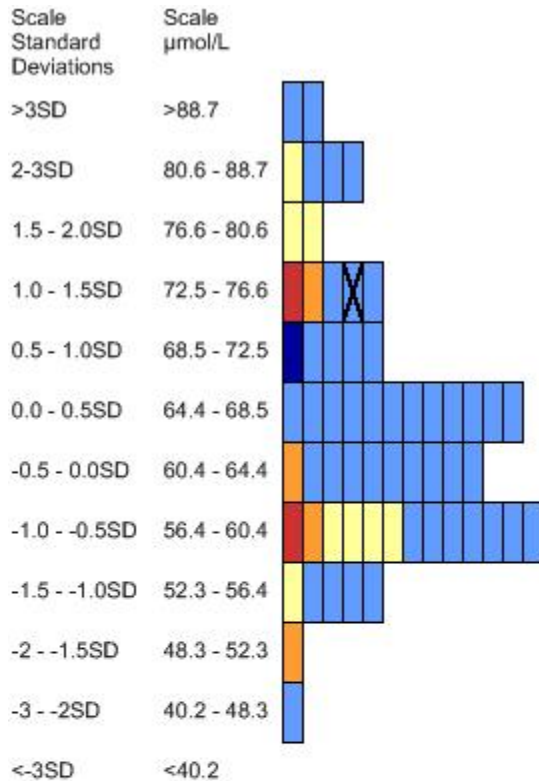
# Laboratories with Gua/Cre test results



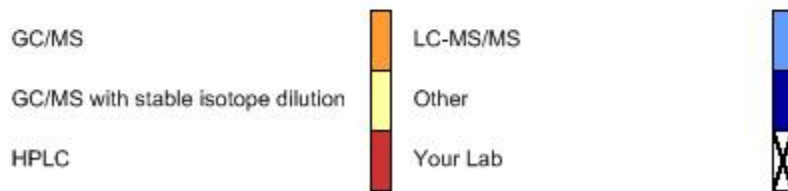
DPT participants: 101

Gua/Cre tested: 47

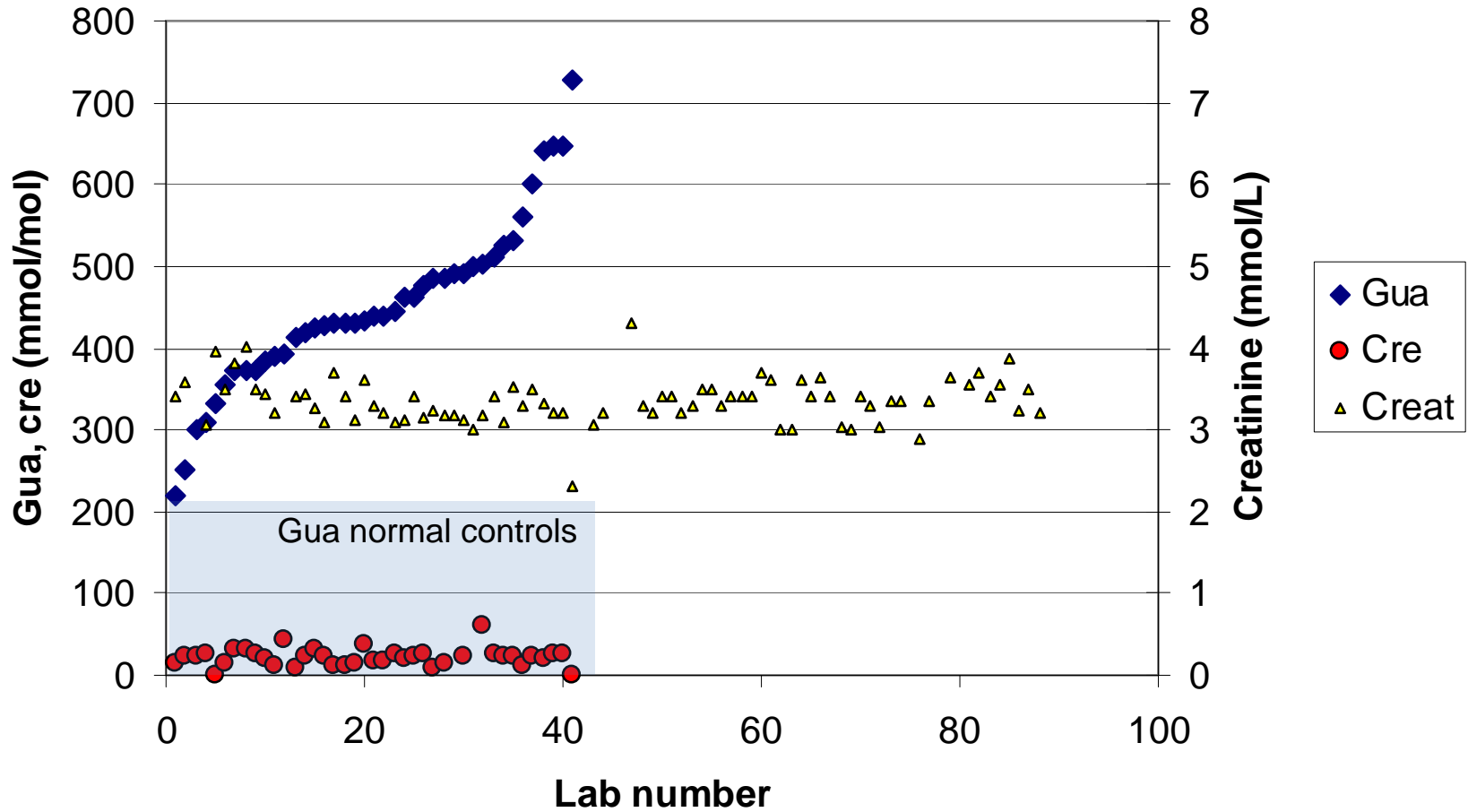
# Gua/Cre analytical methods



SA urine:  
 Gua/Cre: 60 participants  
 45 LC-MS/MS (75 %)  
 12 GC-MS (20 %)

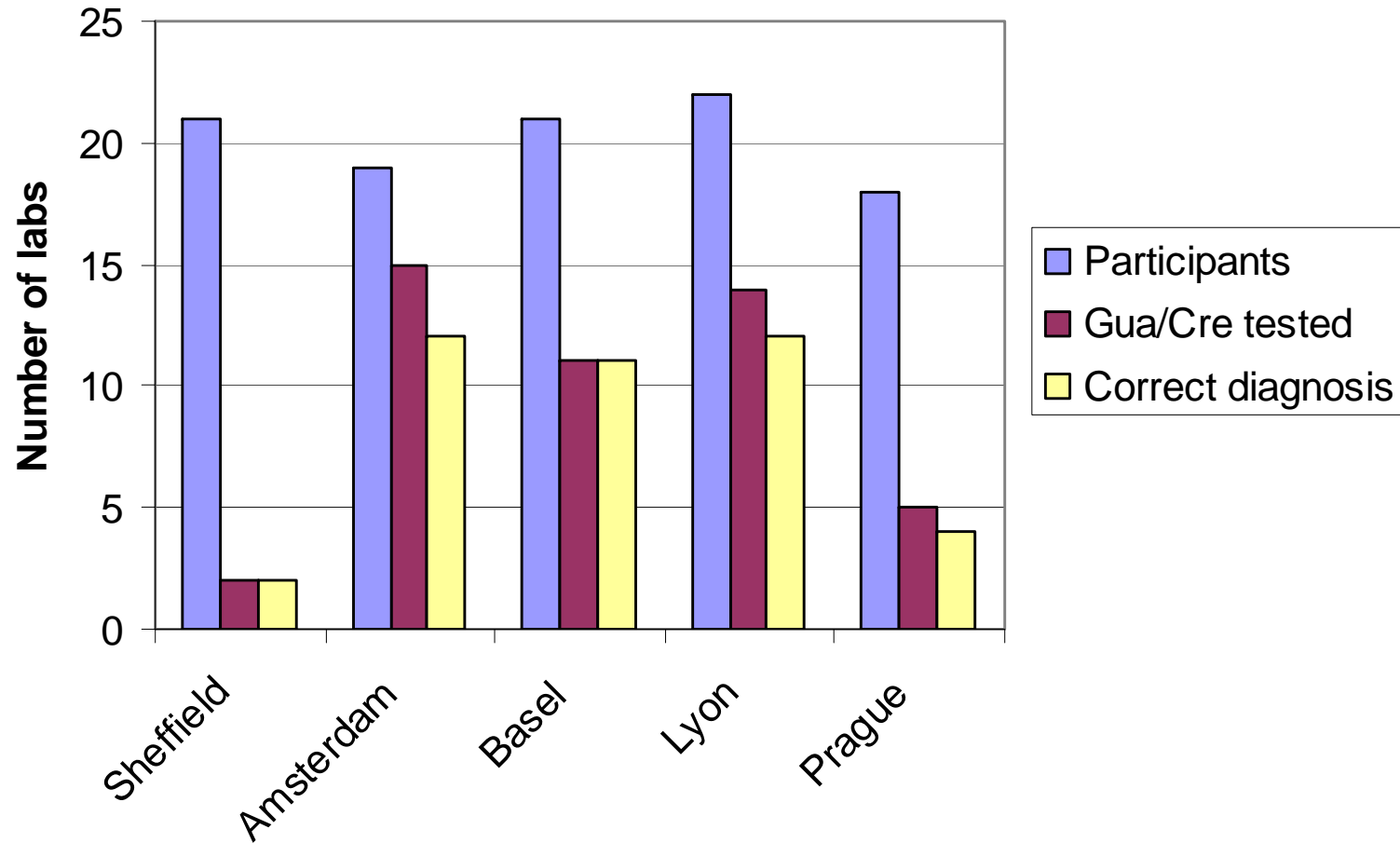


# Gua/Cre test results



Gua:  $452 \pm 105$  mmol/mol (CV 23 %)

# Diagnostic proficiency

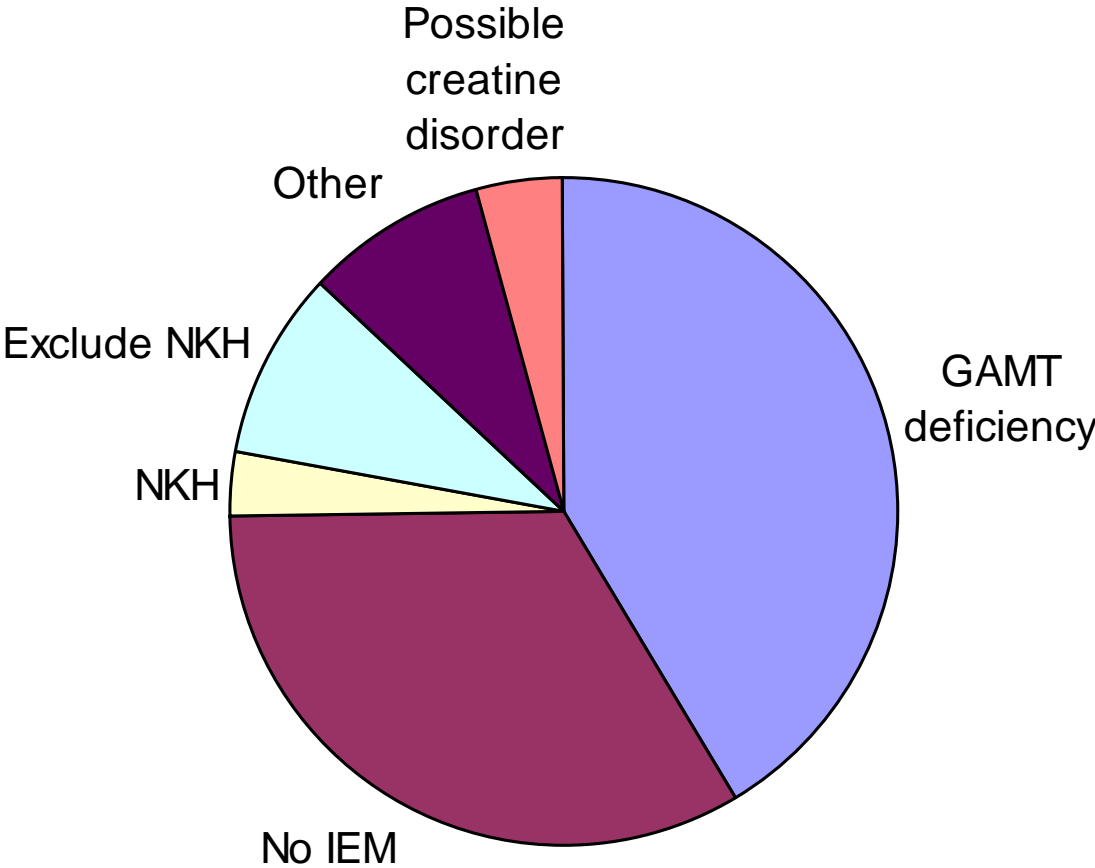


DPT participants: 101

Gua/Cre tested: 47

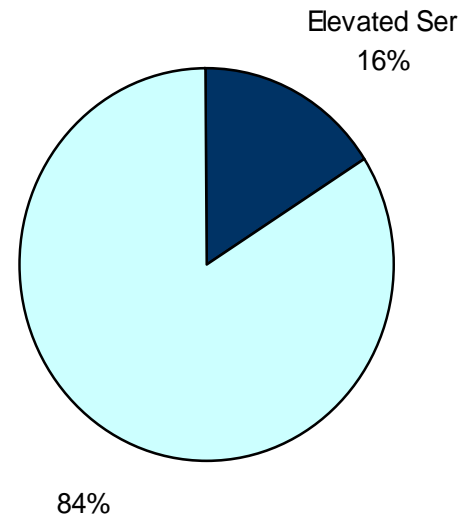
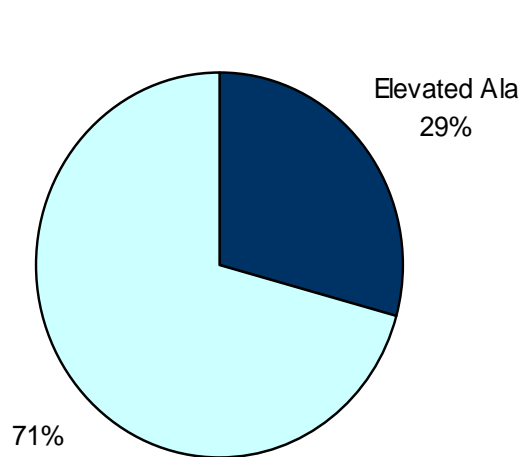
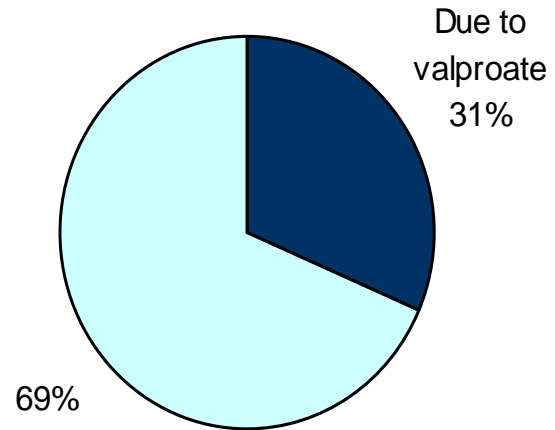
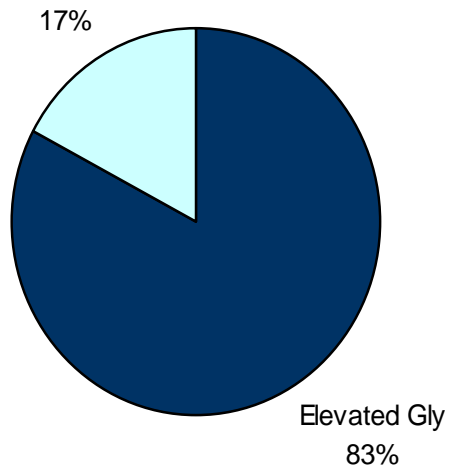
Correct diagnosis: 41

# Diagnoses summary

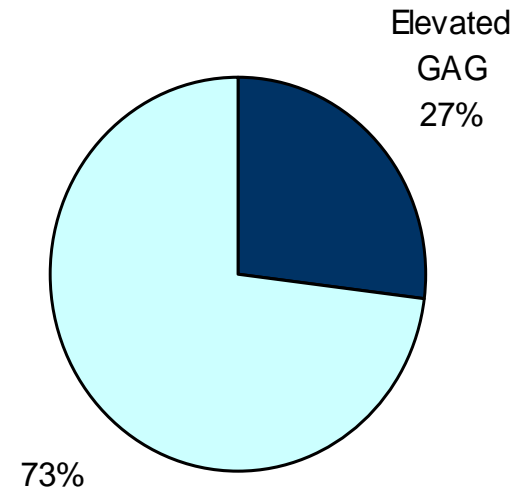
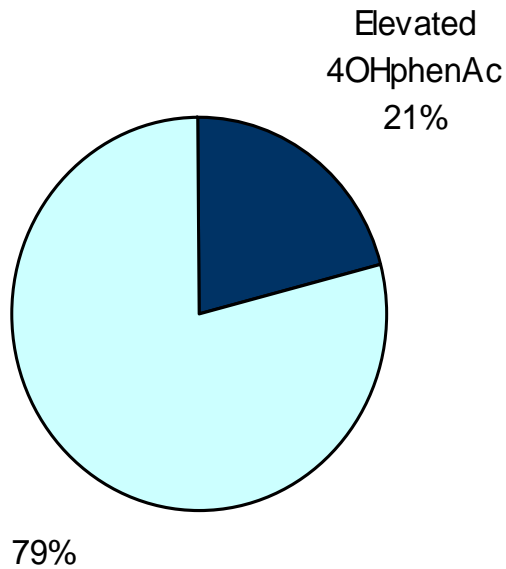
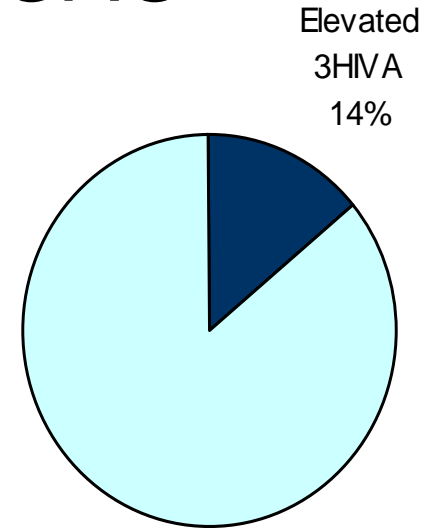
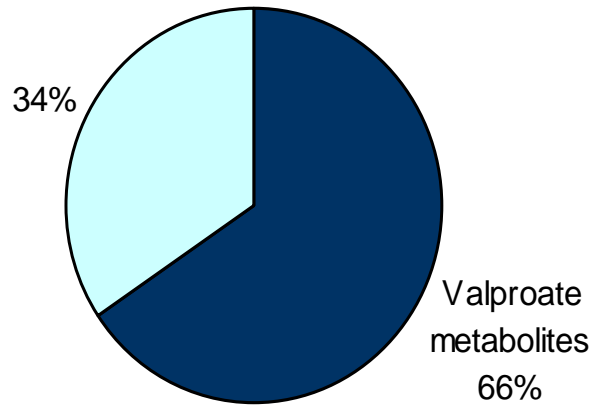




# Amino acids



# Organic acids, quantitative GAG



# Creatinine



Elevated levels of Ala, Ser, 4OHphenAc, GAG due to decreased creatinine?



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Clinica Chimica Acta 361 (2005) 1–9



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Review

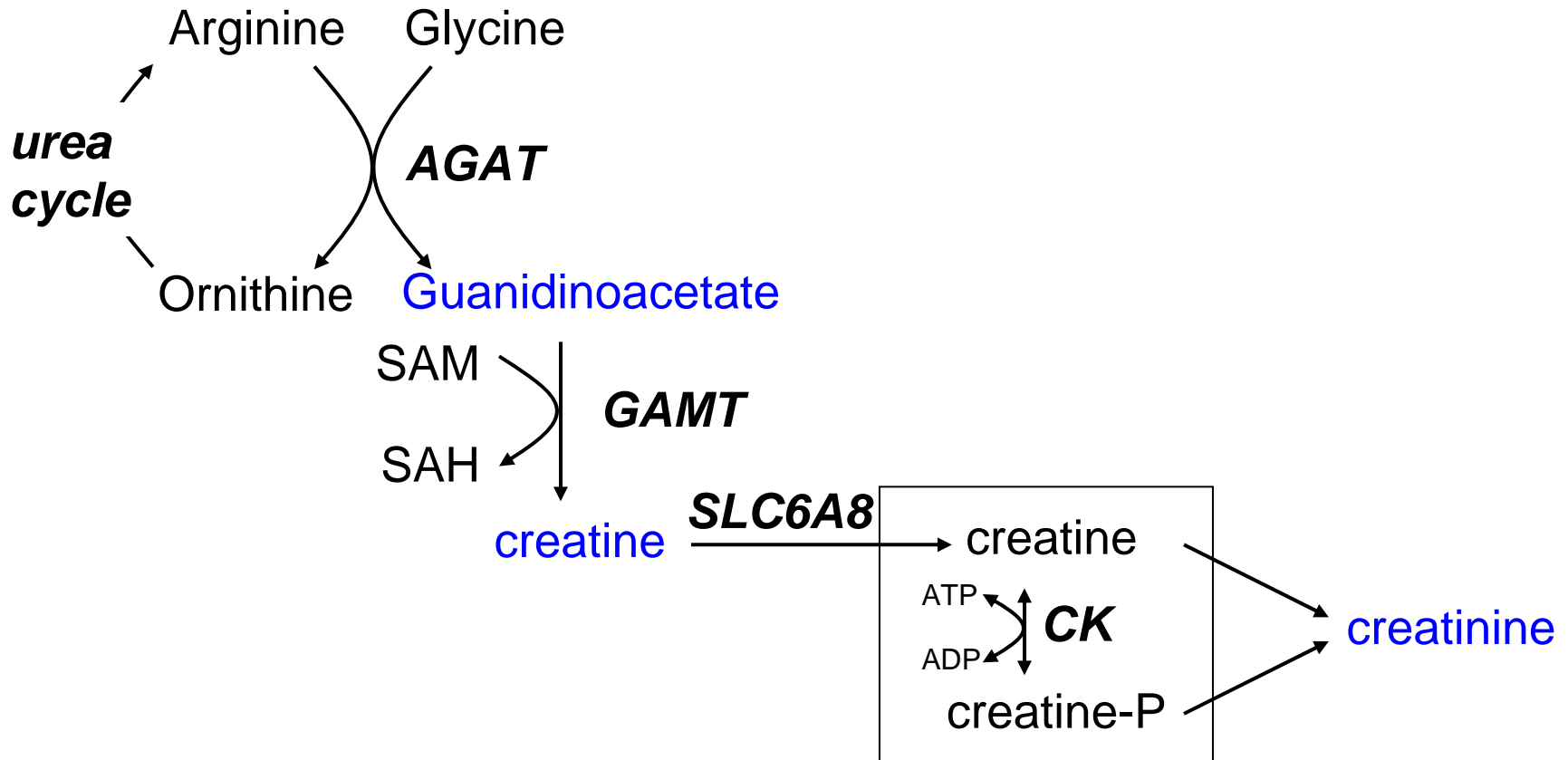
## Laboratory diagnosis of defects of creatine biosynthesis and transport

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Received 25 January 2005; received in revised form 5 April 2005; accepted 12 April 2005

# Creatine biosynthesis



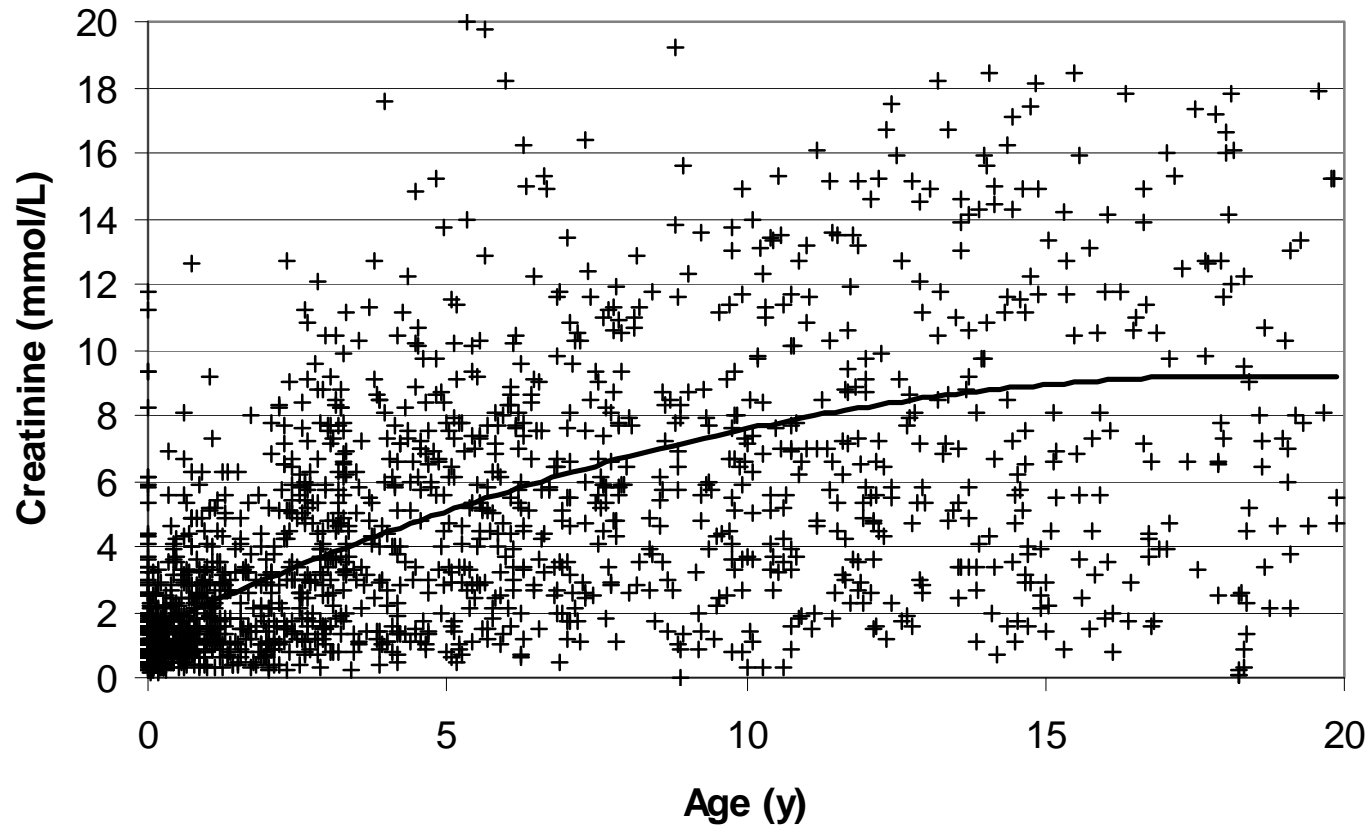
**AGAT** = Arginine:glycine amidinotransferase

**GAMT** = Guanidinoacetate methyltransferase

**SLC6A8** = Creatine transporter

**CK** = Creatine kinase

# Creatinine vs. age (n=1768)



Children 6-8 y

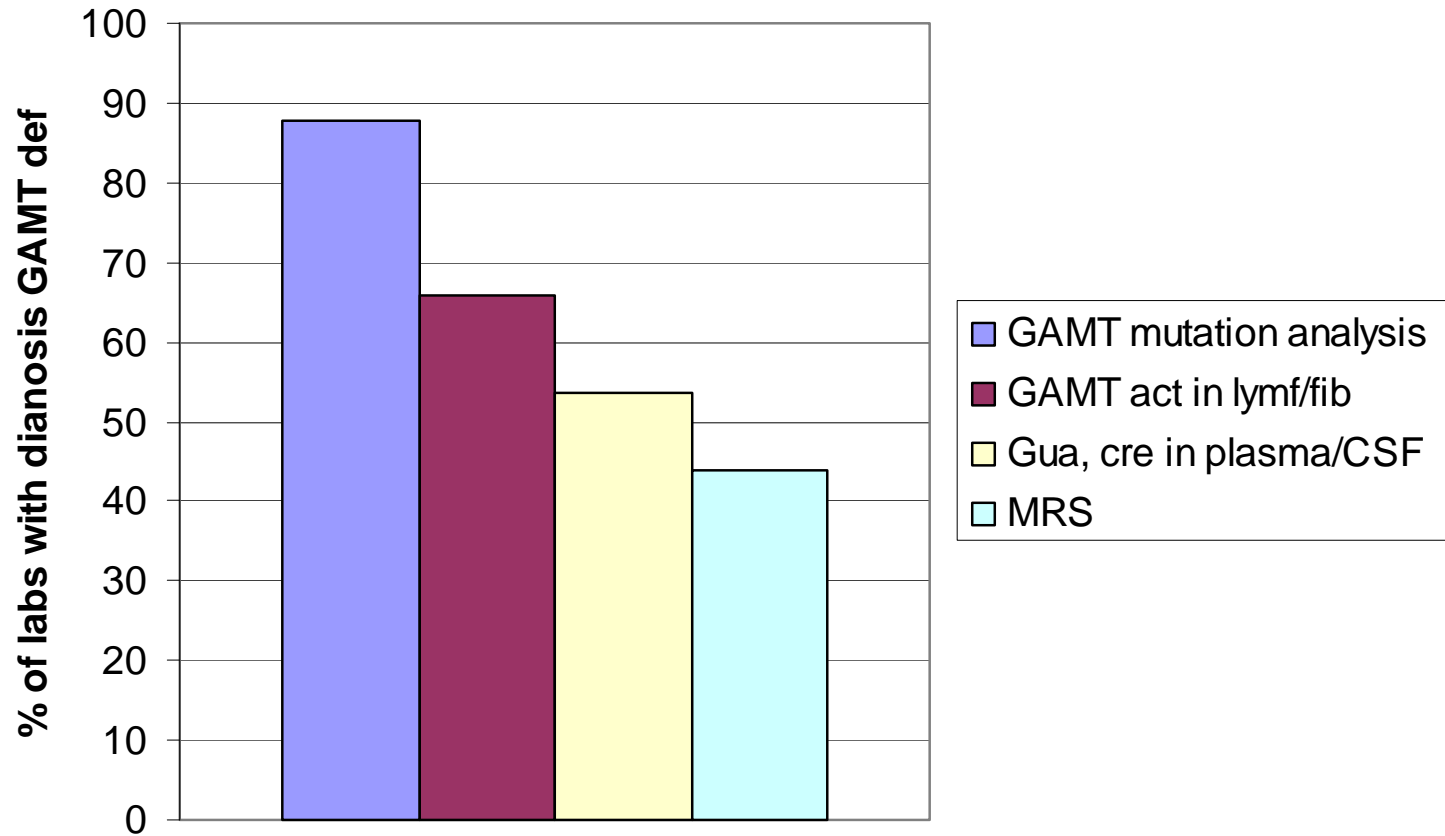
Creatinine	average	6.5 mmol/L
	SD	3.9
	n	147

# Secondary changes Gua /Cre



	Gua	Cre
Duchenne muscular dystrophy	n	↑
Hyperornithinemia	↓	↓-n
Hyperargininemia	↑	↑
Urea cycle defects	↓	n
Ketosis (?)		↑

# Advice for further investigations



# Response to treatment



Mercimek-Mahmutoglu et al, Neurology 2006, 67:480-484

23 / 27 patients: creatine-monohydrate

5 / 23 patients: creatine plus arginine restricted diet, ornithine suppl

<b>Improvement of:</b>	<b>no.of patients</b>	<b>(%)</b>
Intellectual disability	0/23	(0)
Epileptic seizures	19/21	(90)
Movement disorder	7/12	(58)

## **Decrease of Gua concentration in**

urine	0-83 %
plasma	57-99 %
CSF	50-84 %



# Conclusions



- Increased guanidinoacetate with low creatine: GAMT deficiency
- Gua/Cre tested by 47 of 101 participants
- Correct diagnosis by 41 participants
- Elevated levels of Ala, Ser, GAG, 4OHphenylacetate possibly due to relatively low creatinine
- Number of GAMT patients: ~100
- GAMT is a treatable disorder