Inborn Errors in Metabolism

General Labs: Glucose, Ammonia, Lactate, UA General Management: NPO, MIVF with D10

High Ammonia

Not Acidotic



Acidotic

Urea Cycle Defect

- **Ammonia**
- **BUN**
- pH (resp alkalosis)
- *OTC deficiency is most common type
- *Occurs when you give protein
- *Treat with:
 - L-arginine (Catalyzes urea cycle)
 - Sodium Benzoate (nitrogen scavenger)

Organic Aciduria

- **♦** pH
- ↑ Ammonia
- **↓** Bone marrow suppression
- *Gluteric Aciduria Type 1: Chronic subdurals, NAT look alike
- * Dx: Urine and serum organic acids

ow Glucose

Not Acidotic



Acidotic

Fatty Acid Oxidation d/o

- Glucose
- **Ketones**

- Glycogen Storage Dz
- **↓** Glucose
- pH
- Lactate
- Liver size
- *MCAD most common inborn error of metabolism
- *Occurs when fasting
- * Dx: Serum acylcarnitine profile

* Can develop HCC

Galactosemia

- **↓**Glucose
- **↑**Urine Reducing Substances
- **↑**Bilirubin
- *Occurs when you give lactose (no more boob)
- *E.Coli Sepsis
- *Give Abx if presenting sick
- *Cataracts develop

Ketotic Hypoglycemia

- **↓** Glucose
- pH
- **↑** Ketonuria
- *Most common cause of low Glucose
- *Occurs in toddler to school age kids
- *Occurs when fasting

Crashing Neonate

Hypoglycemia

Testing Accucheck

Treatment
Give 30 mL of D10W

Response time: Minutes

NAT

Testing
CT head, Bone Survey

Treatment
NeuroSx consult, SW,
Forensics consult, Police

Response time: Immediate to hours/days

IEM

Testing
Accucheck, ammonia,
pH, UA, CMP

Treatment NPO, D10W

Response time:

Sepsis

Testing
CBC, CMP, BCx, UA,
UCx, LP

Treatment Antimicrobials

Response time: Hours to days



Testing CXR, hyperoxia

Treatment
PGE1
(0.05 mcg/kg/min)

Response time: Minutes

Abdominal Catastrophe

Testing KUB, upper GI

Treatment
Surgery consult

Response time: Fast

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