

# At a Glance Methylmalonic/Propionic Acidemia

**Deficient enzyme**: MMA-methylmalonyl-CoA mutase (mut<sup>o</sup> or mut<sup>-</sup>) PROP- propionyl-CoA carboxylase

**Cofactor:** MMA- Adenosylcobalamin (Vitamin B<sub>12</sub>) PROP- Biotin

Toxic Metabolite: MMA- Methylmalonic Acid PROP- Propionic Acid

Restricted Amino Acids: Valine, Isoleucine, Methionine, Threonine

**Clinical presentation in untreated patients**: acute: poor feeding, vomiting, lethargy, tachypnea, acidosis, respiratory distress, coma; longer-term: neurologic complications, optic atrophy, renal dysfunction (MMA), cardiomyopathy (PROP)

\*Goal Treatment Range: Plasma amino acids- maintain within normal range

Age	Intact Protein	Total Protein	Energy		
	g/kg/d	g/kg/d	kcal/kg/d		
0-3 mo	0.9 – 1.5	1.5 – 1.8	72 - 109		
3-6 mo	0.9 – 1.5	1.5 – 1.8	72 - 109		
7-12 mo	0.7 – 1.2	1.2 – 1.4	64 - 97		
1-3 yrs	0.6 - 1.05	1.05 – 1.3	66 - 99		
4-8 yrs	0.6 – 0.95	0.95 – 1.1	56 - 88		
9-13 yrs	0.6-0.95	0.95-1.1	39-65		
14-18 yrs	0.5-0.85	0.85-1.0	30-53		
19->70 yrs	0.5-0.8	0.8-1.0	Varies		

# **Nutrient Needs by Age<sup>\*</sup>**

\*Adapted from SERN/GMDI PROP Nutrition Management Guidelines; <u>https://southeastgenetics.org/ngp/guidelines.php</u>

\*\* See SERN/GMDI PKU Management Guidelines for recommended nutrient needs during pregnancy and lactation

## **Starting a Diet**

- 1. Determine goals for Intact Protein (g), Total Protein (g), Energy (kcal).
- 2. Calculate amount of intact protein source (breast milk, infant formula, age-appropriate formula, food) needed to meet intact protein (g) goal.
- 3. Calculate amount of medical food required to provide remaining protein to meet total protein goal.
- 4. Calculate energy intake from intact protein and medical food sources to ensure total calorie needs are met.

# Methylmalonic/Propionic Acidemia

	Abbott abbottnutrition.com	Mead Johnson hcp.meadjohnson.com	Nutricia nutriciametabolics.com	<b>Vitaflo</b> <u>vitafloUSA.com</u>
Infant (0-1 yr)	Propimex <sup>®</sup> -1	OA 1	MMA/PA Anamix <sup>®</sup> Early Years	
Toddler & Young Children	Propimex-1 Propimex-2	OA 1 OA 2	MMA/PA Anamix Early Years MMA/PA Anamix Next	MMA/PA express <sup>®</sup> 15 MMA/PA cooler <sup>®</sup> 15
Older Children & Adults	Propimex-2	OA 2	MMA/PA Anamix Next MMA/PA Maxamum®	MMA/PA express 15 MMA/PA cooler 15

### Nutrition Supplementation (doses may vary)

\*L-Carnitine: 100-300 mg/kg/d; divided 2-4 doses per day; goal to maintain plasma free carnitine in normal range

\*MMA- Hydroxycobalamin: 1.0-2.0 mg intramuscular hydroxycobalamin daily to weekly for those who are vitamin B<sub>12</sub> responsive (these patients may need little to no dietary restriction)

To determine responsiveness: 1.0 mg (IM or IV) hydroxycobalamin x 5 days; reduction in MMA levels of  $\geq$ 50% indicates responsiveness

\*\*PROP- Biotin: 5-40 mg/d during initial diagnostic work-up; once PROP confirmed, can be discontinued

\*Sowa, M. Nutritional Management of Propionic and Methylmalonic Acidemia. In LE Bernstein, F Rohr, S van Calcar (Eds.) Nutritional Management of Inherited Metabolic Diseases (2<sup>nd</sup> Edition). Springer: 2021

\*\*Jurecki E et al. Nutrition management guideline for propionic acidemia: An evidence- and consensus-based approach. Mol Genet Metab. 2019;126(4):341-54

#### **Medical Therapy**

Carbaglu (carglumic acid) (<u>www.recordati.com</u>) Carglumic acid (generic) (<u>www.etonpharma.com</u>)

Dose for acute hyperammonemia (pediatric and adults) 150 mg/kg patients  $\leq$  15 kg; 3.3 gm/m<sup>2</sup> patients > 15 kg

### Laboratory Monitoring\*

Plasma Amino Acids<sup>1</sup> Serum Methylmalonic Acid<sup>1</sup> Carnitine (Free and Acyl)<sup>1</sup> Ketones<sup>5</sup> CBC, Albumin<sup>2</sup> Prealbumin<sup>2</sup> Propionic Acid<sup>3</sup> Cystatin C<sup>6</sup> Urine organic  $acids^3$ 25-OH Vitamin D<sup>4</sup> Folate, ferritin, B<sub>12</sub>, B<sub>6</sub>, zinc, selenium Complete Metabolic Panel (CMP)<sup>4</sup>

<sup>1</sup> Monthly to every 3 months in infancy; at every clinic visit or every 6 months to annually thereafter

<sup>2</sup> Every 6 to 12 months in infancy; annually thereafter, except prealbumin every 6 to 12 months up until age 18

<sup>3</sup> Baseline then every 6 months in infancy; annually as indicated thereafter

<sup>4</sup> Annually or as indicated

<sup>5</sup> Daily to establish baseline, then weekly or more frequent if clinically unstable in infancy; monthly or daily when clinically unstable thereafter

<sup>6</sup> Every 6 months to monthly as indicated \*\*

\*SERN/GMDI PROP Nutrition Management Guidelines; <u>https://southeastgenetics.org/ngp/guidelines.php</u>

\*\*Forny, P et al. Guidelines for the diagnosis and management of methylmalonic acidaemia and propionic acidaemia: First revision. J Inherit Metab Dis. 2021;44(3):566-92