Overview

Useful For
Screening children for catecholamine-secreting tumors with a 24-hour urine collection when requesting testing for only vanillylmandelic acid
Supporting a diagnosis of neuroblastoma
Monitoring patients with a treated neuroblastoma

Highlights
Vanillylmandelic acid (VMA) and other catecholamine metabolites such as homovanillic acid (HVA) measurement in urine are used for screening children for catecholamine-secreting tumors such as neuroblastoma and other neural crest tumors and monitoring those who have had treatment for these tumors.

More than 90% of individuals with neuroblastoma have elevated VMA and/or HVA.

VMA is not the analyte of choice for diagnosis of pheochromocytoma, which is better detected by testing for metanephrines.

Treatment with L-dopa can impact test results and should be discontinued 24 hours prior to collection. Bactrim can impact test results and should be noted at time of collection.

Special Instructions
- Urine Preservatives-Collection and Transportation for 24-Hour Urine Specimens

Method Name
Liquid Chromatography-Tandem Mass Spectrometry (LC-MS/MS)

NY State Available
Yes

Specimen

Specimen Type
Urine

Advisory Information
In the past, this test has been used to screen for pheochromocytoma. However, vanillylmandelic acid (VMA) is not the analyte of choice to rule out a diagnosis of pheochromocytoma. Recommended tests for that purpose include:

- PMET / Metanephrines, Fractionated, Free, Plasma
- META / Metanephrines, Fractionated, 24 Hour, Urine
- CATU / Catecholamine Fractionation, Free, 24 Hour, Urine

 Necessary Information
1. Patients age is required.
2. Collection duration and urine volume are required.

3. All patients receiving L-dopa should be identified to the laboratory when vanillylmandelic acid (VMA) and homovanillic acid (HVA) tests are ordered.

4. Bacitracin may interfere with detection of the analyte. All patients taking Bacitracin should be identified to the laboratory when VMA and HVA tests are ordered.

**Specimen Required**

**Patient Preparation:** Administration of L-dopa may falsely-increase vanillylmandelic acid results; it should be discontinued 24 hours prior to and during collection of specimen.

**Supplies:** Urine Tubes, 10 mL (T068)

**Specimen Volume:** 5 mL

**Collection Instructions:**

1. Collect a 24-hour urine specimen.

2. Add 25 mL of 50% acetic acid as preservative at the start of collection. If specimen is refrigerated during collection, preservative may be added up to 12 hours after collection. Use 15 mL of 50% acetic acid for children <5 years old. This preservative is intended to achieve a pH of between approximately 1 and 5. If necessary, adjust urine pH to 1 to 5 with 50% acetic or hydrochloric acid.

**Additional Information:** See [Urine Preservatives-Collection and Transportation for 24-Hour Urine Specimens](#) in Special Instructions for multiple collections.

**Forms**

If not ordering electronically, complete, print, and send an Oncology Test Request (T729) with the specimen.

**Urine Preservative Collection Options**

<table>
<thead>
<tr>
<th>Preservative</th>
<th>Required</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ambient</td>
<td>No</td>
</tr>
<tr>
<td>Refrigerate</td>
<td>No</td>
</tr>
<tr>
<td>Frozen</td>
<td>No</td>
</tr>
<tr>
<td>50% Acetic Acid</td>
<td>Preferred</td>
</tr>
<tr>
<td>Boric Acid</td>
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</tr>
<tr>
<td>Diazolidinyl Urea</td>
<td>No</td>
</tr>
<tr>
<td>6M Hydrochloric Acid</td>
<td>OK</td>
</tr>
<tr>
<td>6M Nitric Acid</td>
<td>OK</td>
</tr>
<tr>
<td>Sodium Carbonate</td>
<td>No</td>
</tr>
<tr>
<td>Thymol</td>
<td>No</td>
</tr>
<tr>
<td>Toluene</td>
<td>No</td>
</tr>
</tbody>
</table>

**Note:** The addition of preservative or application of temperature controls must occur within 4 hours of completion of the collection.
Test Definition: VMA
Vanillylmandelic Acid, 24 Hr, U

*If boric acid is used, note on specimen container. Also, verify that pH is in desired range (pH=1-5). If pH is outside of desired range, adjust pH with a stronger acid (acetic acid is preferred but other acids listed above could be used if available) in a dropwise fashion to bring pH into desired range.

**Specimen Minimum Volume**
2 mL

**Reject Due To**
All specimens will be evaluated at Mayo Clinic Laboratories for test suitability.

**Specimen Stability Information**

<table>
<thead>
<tr>
<th>Specimen Type</th>
<th>Temperature</th>
<th>Time</th>
<th>Special Container</th>
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<tbody>
<tr>
<td>Urine</td>
<td>Refrigerated (preferred)</td>
<td>28 days</td>
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<tr>
<td></td>
<td>Frozen</td>
<td>180 days</td>
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**Clinical and Interpretive**

**Clinical Information**
Vanillylmandelic acid (VMA) and other catecholamine metabolites (homovanillic acid [HVA] and dopamine) are typically elevated in patients with catecholamine-secreting tumors (eg, neuroblastoma, pheochromocytoma, and other neural crest tumors). VMA and HVA levels may also be useful in monitoring patients who have been treated as a result of 1 of the above-mentioned tumors.

**Reference Values**
<1 year: <25.0 mg/g creatinine
1 year: <22.5 mg/g creatinine
2-4 years: <16.0 mg/g creatinine
5-9 years: <12.0 mg/g creatinine
10-14 years: <8.0 mg/g creatinine
> or =15 years (adults): <8.0 mg/24 hours

**Interpretation**
Vanillylmandelic acid and/or homovanillic acid concentrations are elevated in most patients (more than 90%) with neuroblastoma; both tests should be performed. A positive test could be due to a genetic or nongenetic condition. Additional confirmatory testing is required.

A normal result does not exclude the presence of a catecholamine-secreting tumor.

Elevated values are suggestive of a pheochromocytoma, but they are not diagnostic.
Cautions
Values are more commonly elevated during a hypertensive episode.

Values may be normal in some individuals with pheochromocytoma.

Clinical Reference


Performance

Method Description
Vanillylmandelic acid (VMA) is measured by solid-phase extraction (SPE) of a 1-mL aliquot of urine. A known amount of stable isotope-labeled VMA internal standard (IS) is added to each urine specimen prior to SPE. VMA and IS are eluted from the SPE column with methanol. The methanol is evaporated and the VMA and IS are redissolved in liquid chromatography tandem-mass spectrometry (LC-MS/MS) mobile phase. A portion of this prepared extract is injected onto a LC column that separates VMA and IS from the bulk of any remaining specimen matrix. The VMA and IS are measured by mass spectrometry/tandem-mass spectrometry using the selected reaction monitoring mode. VMA is quantified using the ratio to IS versus urine calibrators. (Magera MJ, Thompson AL, Stoor AL, et al: Determination of vanillylmandelic acid in urine by stable isotope dilution and electrospray tandem mass spectrometry. Clin Chem 2003;49:825-826)

PDF Report
No

Day(s) and Time(s) Test Performed
Monday, Thursday; 8 a.m.

Analytic Time
2 days (not reported on Sunday)

Maximum Laboratory Time
4 days

Specimen Retention Time
1 week

Performing Laboratory Location
Rochester
 Fees and Codes

Fees
- Authorized users can sign in to Test Prices for detailed fee information.
- Clients without access to Test Prices can contact Customer Service 24 hours a day, seven days a week.
- Prospective clients should contact their Regional Manager. For assistance, contact Customer Service.

Test Classification
This test was developed and its performance characteristics determined by Mayo Clinic in a manner consistent with CLIA requirements. This test has not been cleared or approved by the U.S. Food and Drug Administration.

CPT Code Information
84585

LOINC® Information

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<tr>
<th>Test ID</th>
<th>Test Order Name</th>
<th>Order LOINC Value</th>
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<tbody>
<tr>
<td>VMA</td>
<td>Vanillylmandelic Acid, 24 Hr, U</td>
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<table>
<thead>
<tr>
<th>Result ID</th>
<th>Test Result Name</th>
<th>Result LOINC Value</th>
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<tbody>
<tr>
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<td>Vanillylmandelic Acid, Adult (&gt;14y)</td>
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<tr>
<td>3581</td>
<td>Vanillylmandelic Acid, Child (</td>
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<td>TM41</td>
<td>Collection Duration</td>
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<tr>
<td>VL39</td>
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