



# Test Definition: AAMSD

Amino Acids, Maple Syrup Urine Disease  
Panel, Plasma

## Overview

### Useful For

Follow-up of patients with maple syrup urine disease

Monitoring of dietary compliance for patients with maple syrup urine disease

### Highlights

This test is appropriate for follow-up and dietary monitoring of patients with maple syrup urine disease.

### Method Name

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

Portions of this test are covered by patents held by Quest Diagnostics

### NY State Available

Yes

## Specimen

### Specimen Type

Plasma

### Ordering Guidance

Body fluids are not acceptable specimens for this test.

For testing urine specimens, order AAPD / Amino Acids, Quantitative, Random, Urine.

For testing spinal fluid specimens, order AACSF / Amino Acids, Quantitative, Spinal Fluid.

### Necessary Information

1. Patient's age is required.
2. Include family history, clinical condition (asymptomatic or acute episode), diet, and drug therapy information.

### Specimen Required

#### Patient Preparation:

**Fasting: 4 hours, required;** infants should have specimen collected before next feeding (2-3 hours without total parenteral nutrition if possible)

**Supplies:** Sarstedt Aliquot Tube, 5 mL (T914)

**Collection Container/Tube:** Green top (sodium heparin)

**Submission Container/Tube:** Plastic vial

**Specimen Volume:** 0.5 mL

#### Collection Instructions:

1. Collect specimen and place on wet ice. Note: Thrombin-activated tubes should not be used for collection.
2. Centrifuge immediately or within 4 hours of collection if specimen is kept at refrigerated temperature.
3. Being careful to ensure that no buffy coat is transferred, aliquot plasma into a plastic vial and freeze.

**Forms**

[If not ordering electronically, complete, print, and send a Biochemical Genetics Test Request \(T798\)](#) with the specimen.

**Specimen Minimum Volume**

0.3 mL

**Reject Due To**

Gross hemolysis	OK
Gross lipemia	OK
Gross icterus	OK

**Specimen Stability Information**

Specimen Type	Temperature	Time	Special Container
Plasma	Frozen	14 days	

**Clinical & Interpretive****Clinical Information**

Maple syrup urine disease (MSUD) is an inborn error of metabolism caused by the deficiency of the branched-chain alpha-keto acid dehydrogenase (BCKDH) complex. The BCKDH complex is involved in the metabolism of the branched-chain amino acids (BCAA): isoleucine, leucine, and valine. MSUD can be divided into 5 phenotypes: classic, intermediate, intermittent, thiamine-responsive, and dihydrolipoyl dehydrogenase (E3)-deficient, depending on the clinical presentation and response to thiamin administration. Classic MSUD, the most common and most severe form, presents in the neonate with feeding intolerance, failure to thrive, vomiting, lethargy, and maple syrup odor to urine and cerumen. If untreated, it progresses to irreversible intellectual disabilities, hyperactivity, failure to thrive, seizures, coma, cerebral edema, and possibly death.

Age of onset for individuals with variant forms of MSUD is variable and some have initial symptoms as early as 2 years of age. Symptoms include poor growth and feeding, irritability, and developmental delays. These patients can also experience severe metabolic intoxication and encephalopathy during periods of sufficient catabolic stress.

MSUD is a panethnic condition but is particularly prevalent in the Old Order Mennonite community in Lancaster, Pennsylvania with an incidence of 1:760 live births. The incidence of MSUD is approximately 1:185,000 live births in the general population.

Treatment of MSUD aims to normalize the concentration of BCAA by dietary restriction of these amino acids. Because

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BCAA are essential amino acids, the dietary treatment requires frequent adjustment, which is accomplished by regular determination of BCAA and allo-isoleucine concentrations. Orthotopic liver transplantation has been used with success and is an effective therapy for MSUD.

**Reference Values**

## Isoleucine

&lt;24 months: 23-149 nmol/mL

2-17 years: 26-150 nmol/mL

&gt; or =18 years: 29-153 nmol/mL

## Leucine

&lt;24 months: 59-213 nmol/mL

2-17 years: 51-216 nmol/mL

&gt; or =18 years: 79-217 nmol/mL

## Valine

&lt;24 months: 94-382 nmol/mL

2-17 years: 111-367 nmol/mL

&gt; or =18 years: 134-357 nmol/mL

## Allo-isoleucine

&lt;5 nmol/mL

**Interpretation**

The quantitative results of isoleucine, leucine, valine, and allo-isoleucine with age-dependent reference values are reported without added interpretation. When applicable, reports of abnormal results may contain an interpretation based on available clinical interpretation.

**Cautions**

Reference values are for fasting patients.

**Clinical Reference**

1. Chuang DT, Shih VE, Max Wynn RR. Maple syrup urine disease (Branched-chain ketoaciduria). In: Valle DL, Antonarakis S, Ballabio A, Beaudet AL, Mitchell GA. eds. *The Online Metabolic and Molecular Bases of Inherited Disease*. McGraw Hill; 2019. Accessed October 24, 2024.  
<https://ommbid.mhmedical.com/content.aspx?bookid=2709&sectionid=225084607>
2. Strauss KA, Puffenberger EG, Morton DH: Maple syrup urine disease. In: MP Adam, Feldman J, Mirzaa GM, et al, eds. *GeneReviews*[Internet]. University of Washington, Seattle; 2006. Updated April 23, 2020. Accessed October 24, 2024. Available at [www.ncbi.nlm.nih.gov/books/NBK1319](http://www.ncbi.nlm.nih.gov/books/NBK1319)
3. Diaz VM, Camarena C, de la Vega A, et al. Liver transplantation for classical maple syrup urine disease: Long-term follow-up. *J Pediatr Gastroenterol Nutr*. 2014;59(5):636-639. doi:10.1097/MPG.0000000000000469
4. Blackburn PR, Gass JM, Vairo FPE, et al. Maple syrup urine disease: mechanisms and management. *Appl Clin Genet*. 2017;10:57-66. doi:10.2147/TACG.S125962

## Performance

### Method Description

Quantitative analysis of amino acids is performed by liquid chromatography tandem mass spectrometry (LC-MS/MS). Patient samples are combined with isotopically labeled internal standard. Following protein precipitation, the supernatant is subjected to hydrophilic interaction liquid chromatography for the separation of isomers with MS/MS detection of the underivatized amino acids.(Unpublished Mayo method)

### PDF Report

No

### Day(s) Performed

Monday through Friday

### Report Available

3 to 5 days

### Specimen Retention Time

2 weeks

### Performing Laboratory Location

Mayo Clinic Laboratories - Rochester Main Campus

## Fees & 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 account representative. 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. It has not been cleared or approved by the US Food and Drug Administration.

### CPT Code Information

82136

### LOINC® Information

Test ID	Test Order Name	Order LOINC® Value
AAMSD	Amino Acid, MSUD Panel, P	94566-7

## Test Definition: AAMSD

Amino Acids, Maple Syrup Urine Disease  
Panel, Plasma

Result ID	Test Result Name	Result LOINC® Value
32446	Valine	94567-5
32447	Isoleucine	94568-3
32448	Leucine	94569-1
32449	Allo-isoleucine	94570-9
32450	Interpretation (AAMSD)	49247-0