



# KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT

## NEWBORN SCREENING ACT SHEET

**SCREEN FOR:** ABSENT BIOTINIDASE ACTIVITY

**CONDITION:** BIOTINIDASE DEFICIENCY (BIOT)

**DIFFERENTIAL DIAGNOSIS:** Biotinidase deficiency

**METABOLIC DESCRIPTION:** *Biotinidase deficiency results from defective activity of the biotinidase enzyme.*

### ACTION TO BE TAKEN IMMEDIATELY:

- ◆ Contact family to inform them of the newborn screening result and ascertain clinical status (poor feeding, lethargy, hypotonia).
- ◆ See and evaluate infant.
- ◆ Consultation/referral to a metabolic specialist to determine appropriate follow-up.
- ◆ If infant can not be seen immediately at metabolic specialist, undertake confirmatory testing in consultation with metabolic specialist.
- ◆ Emergency treatment if symptomatic.
- ◆ Report findings to newborn screening program.

**CONFIRMATION OF DIAGNOSIS:** Enzyme assay for biotinidase reveals low or absent activity. Plasma acylcarnitine analysis may show normal or increased 3-hydroxyisovaleric acid and 3-methylcrotonyl-glycine. C5-OH acylcarnitine may be high but lack of an abnormal acylcarnitine profile does not rule out biotinidase deficiency.

**CLINICAL EXPECTATIONS:** The neonate is usually asymptomatic but episodic hypoglycemia, lethargy, hypotonia and mild developmental delay can occur at any time from the neonatal period through childhood. Untreated biotinidase deficiency leads to developmental delay, seizures, alopecia, and hearing deficits. Biotin treatment is available and highly effective.

**REPORTING:** Report diagnostic result to family and Kansas NBS program.

### SPECIALISTS:

Bryce Heese, MD  
Biochemical Genetics  
Children's Mercy Hospital- Kansas City, MO

Clinic phone: 816-234-3771  
Hospital Operator: 816-234-3000  
Office Fax: 816-302-9963