# Laboratory Standards and Procedures Subcommittee Report

September 20, 2013

Kellie Kelm, Ph.D. – Chair Susan Tanksley, Ph.D. – Co-chair

#### **Priorities for Lab Subcommittee**

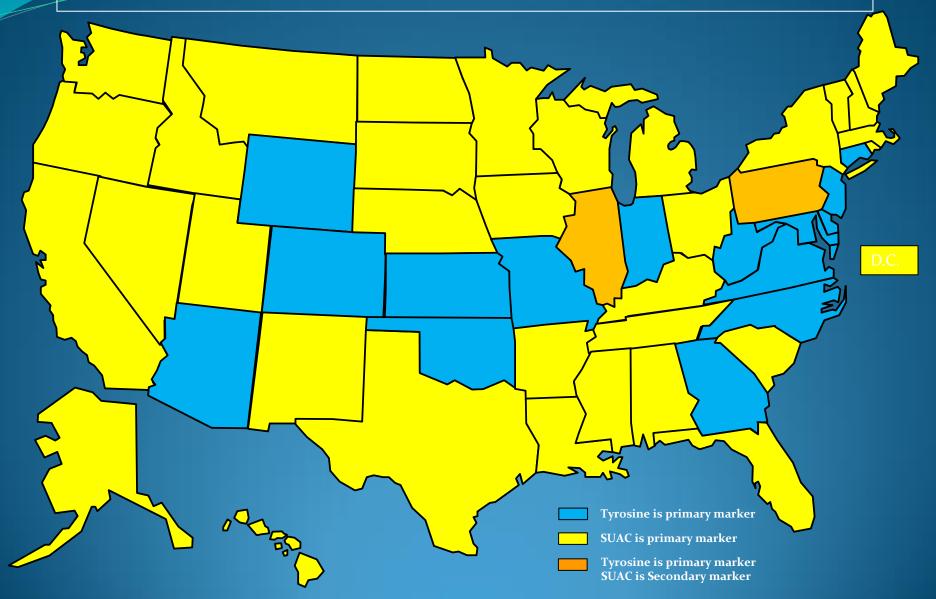
- Priority A: Review new enabling/disruptive technologies
  - SUAC Implementation Survey
- Priority B: Provide guidance for state NBS programs in making decisions about lab implementation, integration, follow-up (FU), and quality assurance (QA)
  - SCID Slide Deck
  - APHL Updates
- Priority C: Establish process for regular review and revision of the Recommended Uniform Screening Panel (RUSP)
  - No update at this time

### **SUAC Implementation Survey Results**

#### **SUAC Implementation Survey Results**

- Tyrosine is not a specific marker for TYR I, but also elevated in:
  - Tyrosinemia type II
  - Tyrosinemia type III
  - Transient benign hypertyrosinemia
  - Liver disease
- Succinylacetone is a specific marker for TYR I, but not detectable by routine newborn screening.

## NBS for TYR I in the USA



#### Survey: All U.S. Newborn Screening Laboratories

- Response: 31/38 laboratories (82% response rate)
- Only domestic NBS programs participated in survey
- Does your laboratory measure succinylacetone (SUAC) in dried blood spots?
  - Yes 16
  - No 15
- Survey tailored next questions based on this answer

#### Conclusions

- TYR I should remain in RUSP
- 51 of 51 US NBS programs screen for TYR I
- CDC provides QA/QC/PT for TYR I (incl. SUAC)
- Survey revealed limitations of NBS for TYR I using SUAC in the USA
- Several NBS labs indicated strong pushback for SUAC testing using a specific kit/method
- Potential barriers: Funding, infrastructure, staff, technical expertise
- 8 out of 15 states surveyed stated that a recommendation from DACHDNC/HHS would not influence their NBS programs to adopt SUAC as primary screen for TYR I

## Updates

#### Updates

- SCID slide deck: Monthly calls ongoing
- APHL
  - 50 year NBS celebration and activities
  - NewSTEPs
    - Website updates to include case definitions, quality indicators, and limited state profiles
    - MOUs on data collection
  - MPS 1 public health impact review
  - Survey states to access implementation/uses of recommendations for biochemical genetic testing



**Consensus Committee on Immunology and Ligand Assay** 

Standing
Subcommittee on
Newborn Screening

Document Development Committee(s)

Working Group(s)



#### **Newborn Screening Document Library and New Numberings**

NBS01 – A6 (LA04) – Blood Collection on Filter Paper for Newborn Screening Programs

NBS02 – A2 (I/LA27) – Newborn Screening Follow-up

NBS03 – A (I/LA31) – Newborn Screening for Preterm, Low Birth Weight, and Sick Newborns

NBS04 – A (I/LA32) – Newborn Screening by Tandem Mass Spectrometry

NBS05 – A (I/LA35) – Newborn Screening for Cystic Fibrosis

NBS06 – A (I/LA36) – Newborn Blood Spot Screening for Severe Combined Immunodeficiency by Measurement of T-cell Receptor Excision Circles

NBS07 – A *New* – Newborn Blood Spot Screening for Pompe Disease by Lysosomal Acid Alpha-Glucosidase Activity Assays

Coming soon – Terminology harmonization

## Questions?