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PEARLS OF LABORATORY MEDICINE

Biotinidase Deficiency

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DOI: [10.15428/CCTC.2019.316380](https://doi.org/10.15428/CCTC.2019.316380)



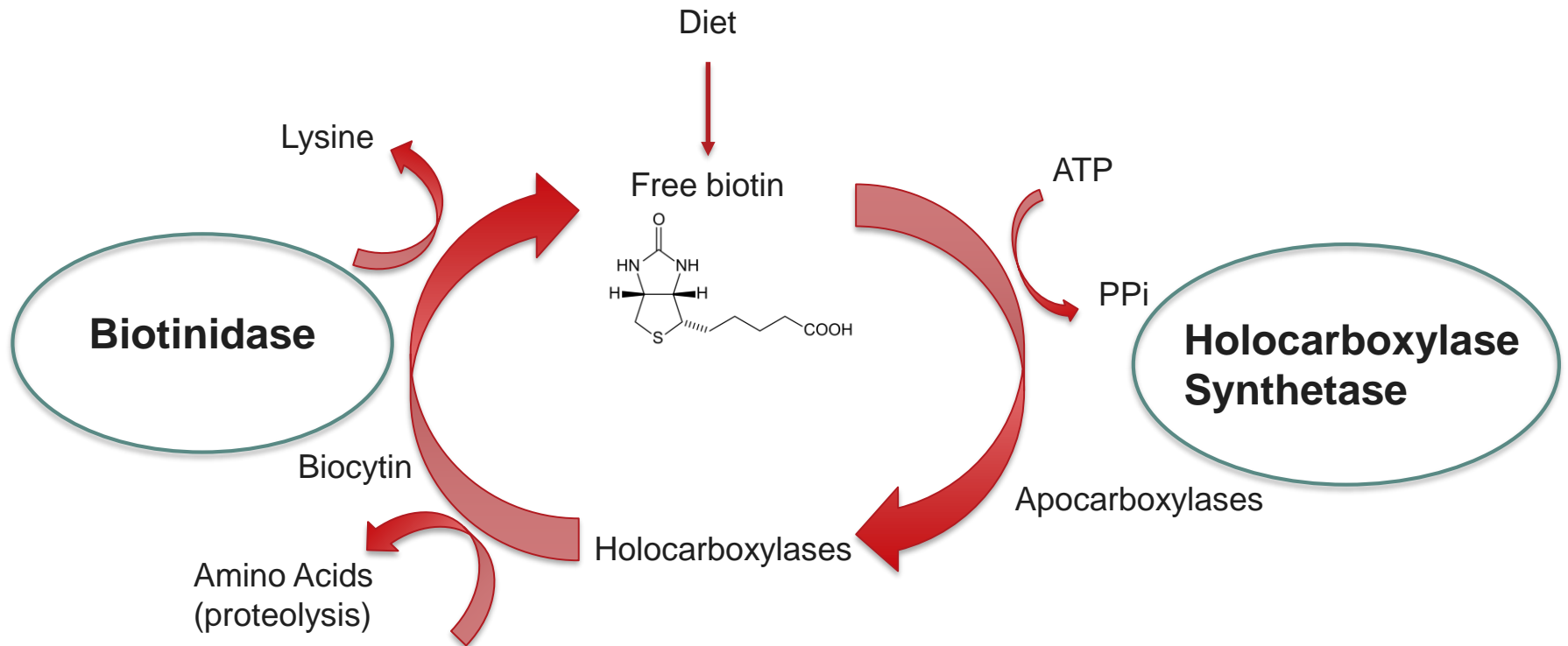
Biotinidase Deficiency- Lecture Overview

- Background
 - metabolic role and clinical features
- Clinical Testing
 - Targeted and screening tests
- Newborn screening- changing patient outcomes!



Background

- Inborn error of vitamin B7 (biotin) metabolism



Clinical Symptoms and Therapy

classic biotinidase deficiency- age of onset 2-5 months

- Alopecia
- Eczema
- Hearing/vision loss
- Acidosis
- Hyperammonemia
- Seizures
- Coma

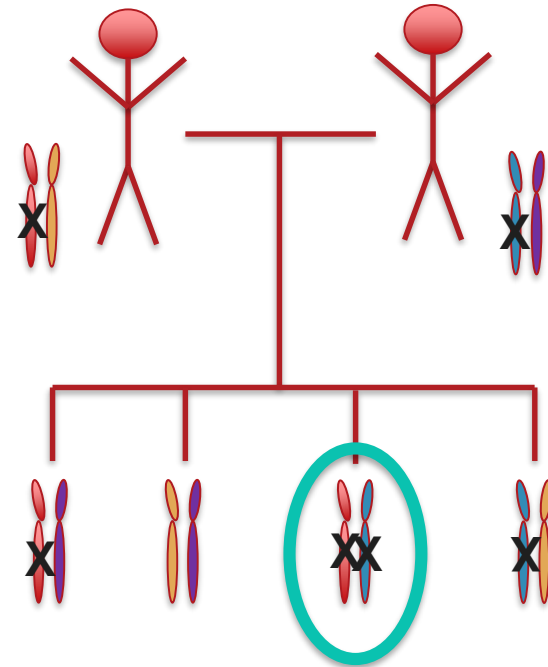
Treat with high dose oral biotin!

5-20 mg/day



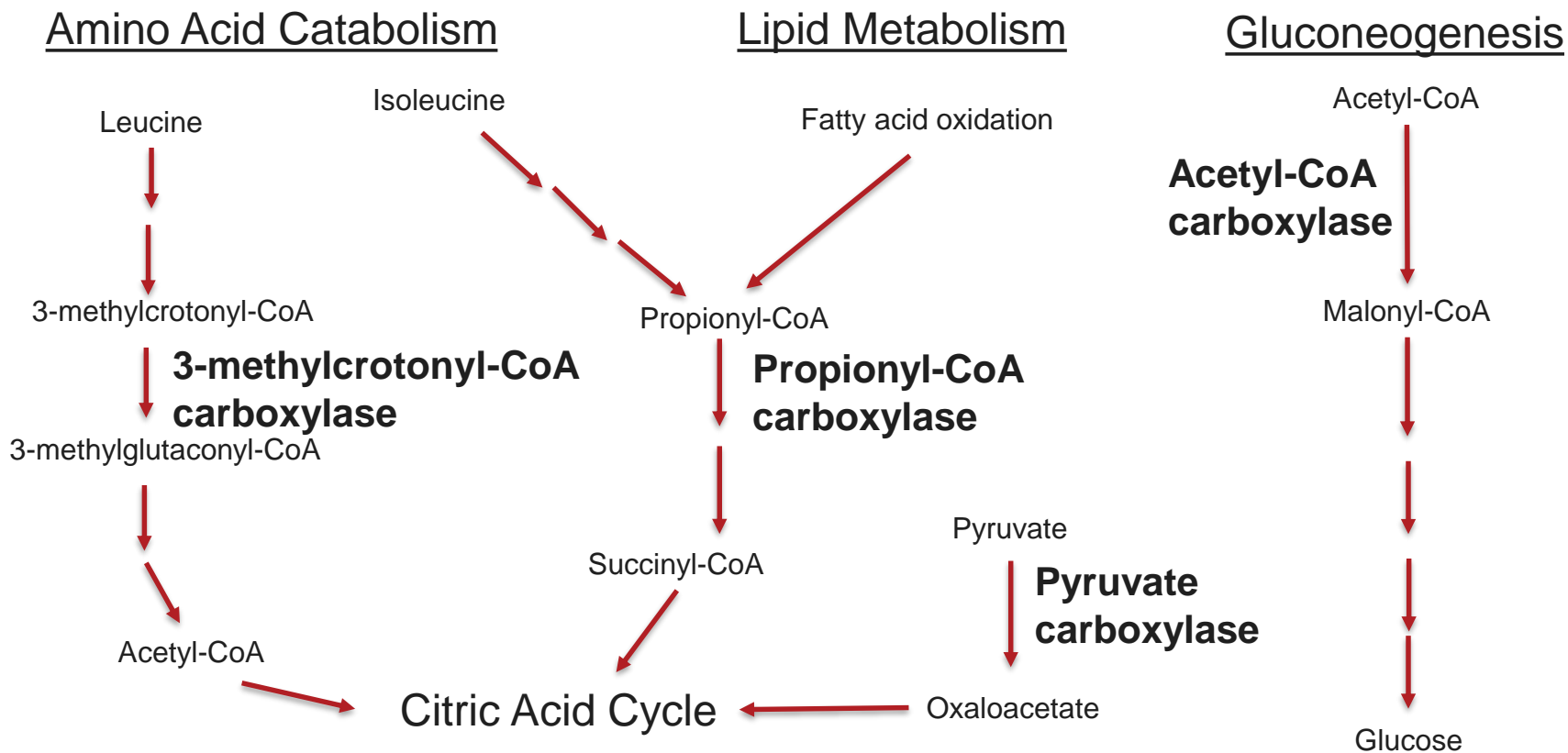
Inheritance and Disease Variation

- Autosomal recessive inheritance
- 1:30,000-80,000 estimated incidence
- Classic/profound deficiency <10%
- Partial deficiency 10-30%
 - Need to treat varies by patient



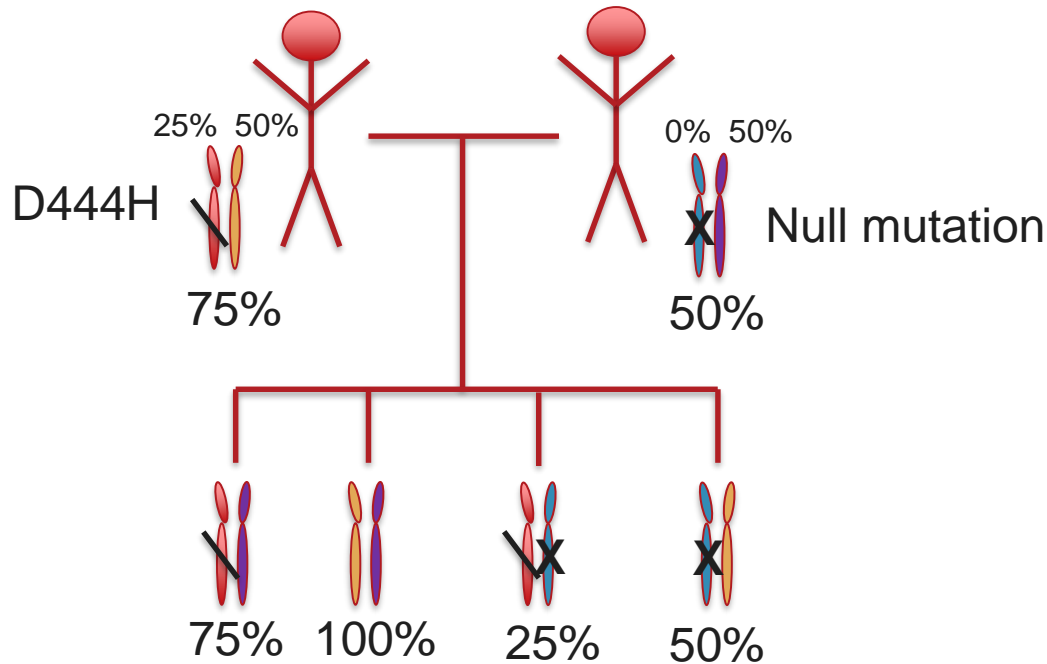
Metabolic Role

- Cofactor for 4 carboxylase enzymes



Clinical Testing

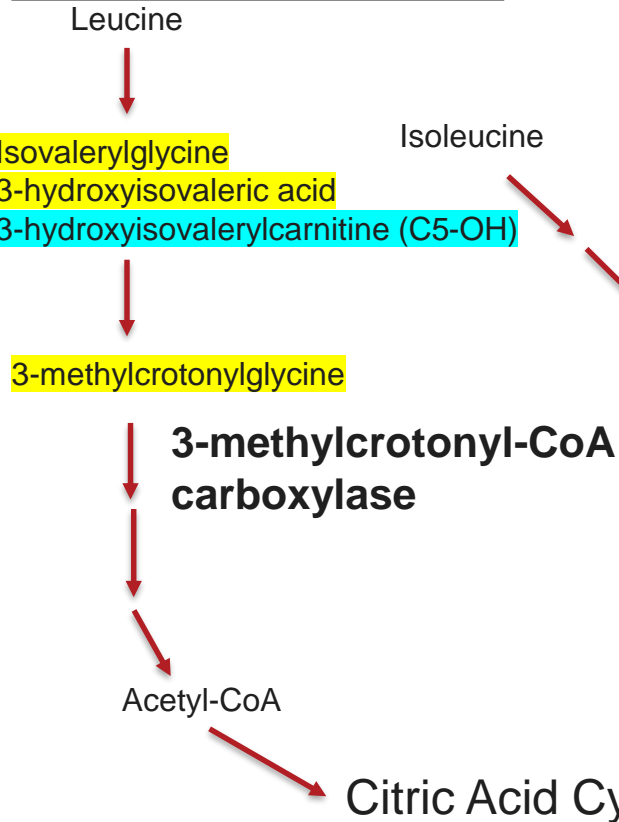
- Biotinidase enzyme analysis
- Urine organic acids
- Plasma acylcarnitine profile
- DNA sequencing
 - Common variant (Asp444His) -> 50% activity



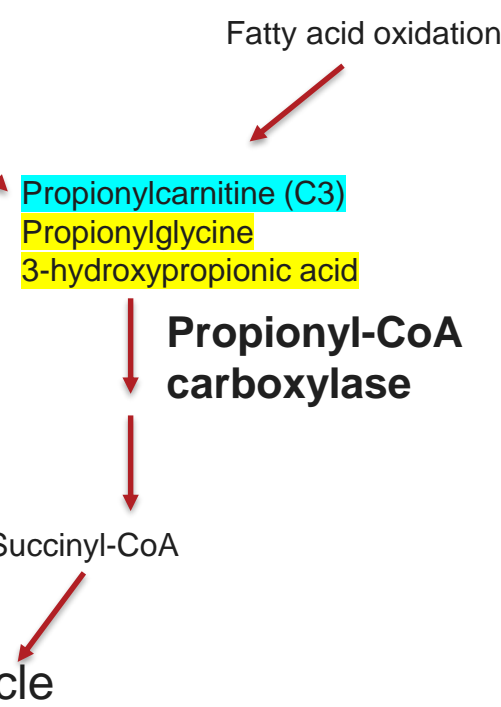
Untargeted Evaluation

- Urine organic acid analysis and Plasma Acylcarnitine Profile

Amino Acid Catabolism



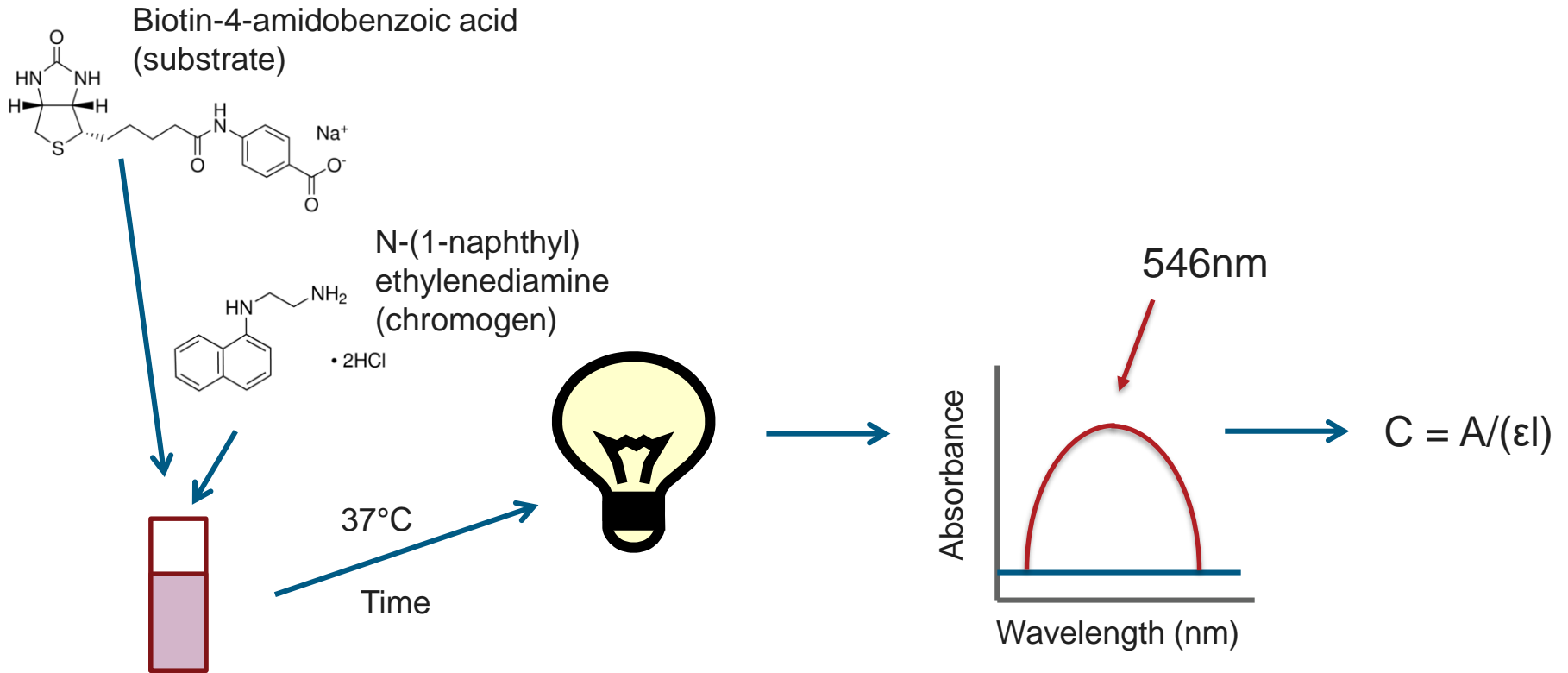
Lipid Metabolism



Enzyme Activity

Biotin-4-amidobenzoic acid + biotinidase → 4-amidobenzoic acid

4-amidobenzoic acid + Na nitrite + N-(1-naphthyl)ethylenediamine dihydrochloride → Mauve color!



- Batch controls
 - Normal
 - Deficient
 - Patient blanks (endogenous interference)
- Shipping/Sample Controls
 - 2nd individual (presumably normal)
 - Test 2nd enzyme

- Sample Handling
 - Excess heat/humidity
 - Incomplete drying of blood spot card
 - Delayed plasma processing
 - Repeat freeze/thaw cycles
- Artificially normal results
 - Blood transfusions
 - Sulfa drugs (sulfonamides)
- Fluorescence assay specific interference
 - Ampicillin
 - Bilirubin
 - Hemoglobin
 - Glutathione

Beware!!! High dose biotin supplementation interferes with other chemistry assays!!!

Biotinidase Deficiency is Ideal for Newborn Screening

Guiding Principles for Population Screening

1. Important health problem with known natural history
2. Suitable (aka easy) test
3. Accepted treatment for identified patients
4. Infrastructure to diagnose and treat
5. Cost effective
6. Testing acceptable to population



Main Points

- Biotinidase deficiency is a systemic enzyme defect that results in a variety of clinical features.
- The disease is completely treatable with oral biotin (vitamin B7) supplementation.
- Measuring enzyme activity in plasma is the most rapid and specific means of diagnosing a patient.



References

1. Strovel ET, Cowan TM, Scott AI, Wolf B. Laboratory diagnosis of biotinidase deficiency, 2017 update: a technical standard and guideline of the American College of Medical Genetics and Genomics. *Genet Med* 2017; online only.
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<https://www.ncbi.nlm.nih.gov/books/NBK1322/> (updated June 2016).
3. Colon PJ and Greene DN. Biotin Interference in Clinical Immunoassays. *J Appl Lab Med* 2018;6:941-951.
4. Dobrow MJ, Hagens V, Chafe R, Sullivan T, Rabeneck L. Consolidate principles for screening based on a systematic review and consensus process. *CMAJ* 2018;190:E422-E429.



Disclosures/Potential Conflicts of Interest

Upon Pearl submission, the presenter completed the Clinical Chemistry disclosure form. Disclosures and/or potential conflicts of interest:

- **Employment or Leadership:** Laboratory Director of Biochemical Genetics at Seattle Children's Hospital
- **Consultant or Advisory Role:** No disclosures
- **Stock Ownership:** No disclosures
- **Honoraria:** No disclosures
- **Research Funding:** The Seattle Children's Academic Enrichment Fund and The Mitochondrial Research Guild
- **Expert Testimony:** No disclosures
- **Patents:** No disclosures



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