

Newborn Screening ACT Sheet

Pompe Disease (Glycogen Storage Disease II)

Condition Description: Pompe disease is a lysosomal storage disorder (LSD) caused by a defect in acid alpha-glucosidase (*GAA*), resulting in glycogen accumulation primarily in cardiac and skeletal muscle. There is wide variability in severity and age of onset. Pompe disease is an autosomal recessive disorder.

YOU SHOULD TAKE THE FOLLOWING ACTIONS:

- Consult with genetic metabolic specialist.
- Contact family to inform them of the newborn screening result.
- Evaluate the newborn with attention to hypotonia, feeding difficulties and clinical evidence of heart disease.
- Provide the family with basic information about Pompe disease.
- Report confirmatory findings to newborn screening program.

Diagnostic Evaluation: Confirmatory alpha-glucosidase enzyme assay. Patients with low enzyme activity should have *GAA* gene analysis and immediate assessment for cardiomyopathy.

Clinical Considerations: The clinical presentation of Pompe disease ranges from a rapidly progressive infantile form, which is uniformly lethal if untreated, to a more slowly progressive late-onset form. All forms of the disorder are eventually associated with progressive muscle weakness and respiratory insufficiency. Cardiomyopathy is associated almost exclusively with the infantile form. Enzyme replacement therapy (ERT) is available for both forms. ERT should be started as soon as possible for patients with the infantile form and at the first signs of muscle weakness in the late-onset form. ERT is highly complicated and should only be given under the guidance of a specialist with expertise in lysosomal storage disorders.

Additional Information:

[Genetics Home Reference](#)
[OMIM](#)

Referral (local, state, regional and national):

[Testing](#)
[Clinical Services](#)
[Find Genetic Services](#)

Disclaimer: This guideline is designed primarily as an educational resource for clinicians to help them provide quality medical care. It should not be considered inclusive of all proper procedures and tests or exclusive of other procedures and tests that are reasonably directed to obtaining the same results. Adherence to this guideline does not necessarily ensure a successful medical outcome. In determining the propriety of any specific procedure or test, the clinician should apply his or her own professional judgment to the specific clinical circumstances presented by the individual patient or specimen. Clinicians are encouraged to document the reasons for the use of a particular procedure or test, whether or not it is in conformance with this guideline. Clinicians also are advised to take notice of the date this guideline was adopted, and to consider other medical and scientific information that become available after that date.

LOCAL RESOURCES: Insert State newborn screening program web site links

State Resource site (insert state newborn screening program website information)

| | |
|----------|----------------------|
| Name | <input type="text"/> |
| URL | <input type="text"/> |
| Comments | <input type="text"/> |

Local Resource Site (insert local and regional newborn screening website information)

| | |
|----------|----------------------|
| Name | <input type="text"/> |
| URL | <input type="text"/> |
| Comments | <input type="text"/> |

APPENDIX: Resources with Full URL Addresses

Additional Information:

Genetics Home Reference

<http://ghr.nlm.nih.gov/condition/pompe-disease>

OMIM

<http://www.ncbi.nlm.nih.gov/omim/232300>

Referral (local, state, regional and national):

Testing

http://www.ncbi.nlm.nih.gov/sites/GeneTests/lab/clinical_disease_id/3166?db=genetests&country=United%20States

Clinical Services

<http://www.genetests.org/>

Find Genetic Services

<http://www.acmg.net/gis>

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