Long-term outcome of 30 patients with 6pyruvoyl-tetrahydropterin synthase deficiency

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Objective To evaluate the long-term outcome of patients with 6-pyruvoyl-tetrahydropterin synthase (PTPS) deficiency. Methods Patients were identified as tetrahydrobiopterin (BH4) deficiency based on the results of urinary pterin analysis, detection of dihydropteridine reductase (DHPR) activity in blood from a total of 550 patients with hyperphenylalaninemia (HPA), and then BH₄ loading tests in suspected patients with abnormal pterin profiles at our outpatient clinic since 1992. BH4 deficient Patients were treated with BH₄, levodopa and 5-hydroxytryptophan (5-HTP). Development and intelligence quotient (DQ/IQ) and magnetic resonance imaging (MRI) of the brain were followed up. Results: A total of 30 cases were diagnosed as BH₄ deficiency, all of them were revealed as PTPS deficiency. They were diagnosed at the age of 2.5~27 months and the follow-up duration was 36~118 months. The average full-scale DQ/IQ at diagnosis and after treatment of at least 3 years were 53 ± 16, 78 ± 15 respectively. The improvement of abnormalities in the white matter was also seen on the MRI of the brain after treatment. A significant negative correlation was observed between the level of the DQ/IQ and the age of treatment commenced (r=0.751, P<0.001). Conclusions: Long-term follow up demonstrates that outcome of patients with PTPS deficiency benefits from treatment as early as possible with three drugs combined.

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