



#### OUR BEST FOOT FORWARD

## What to expect as South Carolina begins testing for Krabbe Diseases:

In May 2023, South Carolina joined the list of other states that currently screen for Krabbe Disease as part of their Newborn Screening (NBS) panel. The 10 other states screening for Krabbe Disease include NY, MO, KY, OH, TN, IL, IN, NJ, PA, and GA.

Krabbe Disease (KD), also known as globoid cell leukodystrophy, is a progressive neurodegenerative condition caused by the loss of myelin, the protective sheath around axons. The severity and age of onset varies widely. It is initially caused by a decrease in the level of an enzyme called galactocerebrosidase (GALC). Without enough GALC, individuals with Krabbe disease cannot break down psychosine, a naturally occurring toxin found in brain cells. Psychosine builds up and damages the brain's myelin. Although there is no cure, there is treatment available called hematopoietic (or blood) stem cell transplant (HSCT). KD has a prevalence of approximately 1 in 100,000. Two forms of KD have been described: infantile (IKD) and late onset. IKD is the most severe and comprises at least 85% of known cases. Patients typically present with symptoms including irritability, muscle weakness, feeding difficulties, fever of unknown origin, abnormal posturing and/or developmental delays within the first year of life.

#### What terms should you be familiar with?

- Leukodystrophy ("luke-o-dis-tro-fee"): a group of inherited genetic diseases that damage the myelin, or white matter, of the brain.
- Psychosine ("sigh-co-seen"): a toxic substance that builds up in individuals with Krabbe disease. Psychosine collects in the brain and spinal cord and damages myelin.
- Myelin ("my-len"): also known as white matter, forms a
  protective coating around nerves and helps them quickly
  carry information from one part of the brain and spinal
  cord to another.
- Other names for Krabbe Disease ("Crab-Ay"): Krabbe Leukodystrophy, Globoid Cell Leukodystrophy, GALC Deficiency. Krabbe is a type of Lysosomal Storage Disorder (LSD) and Leukodystrophy.

# What will an outside acceptable limit screening result look like on the lab report?

First tier screening will be performed at the South Carolina (SC) Public Health Laboratory (PHL) using a quantitative test for ß-galactocerebrosidase (GALC), the enzyme that is deficient in newborns affected with Krabbe disease.

The screening assessment will be based on the daily median of GALC results. The expected range will be ">15% of the daily median". Results will be reported as "Within Acceptable Limits" or "Outside Acceptable Limits."

Additionally, GALC screening results that are reported as "Outside Acceptable Limits" (≤15% of the daily median) will include the calculated percentage of the daily median. Initial specimens reported as, "Outside Acceptable Limits" will be sent to a reference lab for 2<sup>nd</sup> tier psychosine testing.

#### What is the notification process for an abnormal result?

The SC Department of Health and Environmental Control's (DHEC) Maternal and Child Health (MCH) NBS staff will provide notification of *abnormal psychosine results* to the primary care provider and/or physician indicated on the NBS specimen collection form by phone, fax, and/or mail.

#### What are the next steps that should be taken?

When you receive an abnormal GALC result on the newborn screen, you should **WAIT** for the **psychosine** result prior to taking the next steps and providing clinical guidance.

If the psychosine is within acceptable limits, provide genetic education and counseling. No further blood spots are needed.

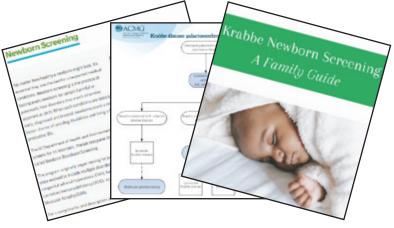
If the **psychosine** is abnormal, you should take the following IMMEDIATE actions:

- If Psychosine is > 1 nmol/L, consult with and refer to a
  pediatric metabolic specialist. A list of metabolic specialists
  will be provided with the notification documentation.
- If Psychosine is ≥ 10 nmol/L, along with a referral to a
  pediatric metabolic specialist, consult with and refer to a
  pediatric transplant specialist the SAME DAY.
- All abnormal psychosine results will be further reflexed for GALC molecular sequencing to confirm the diagnosis.
- Contact the family and inform them of the newborn screening results.

- Evaluate the newborn with particular attention to neurologic dysfunction.
- Provide the family with basic information about Krabbe disease.
- Report all clinical outcomes to the newborn screening program.

#### Are there resources available? Yes! See links below:

DHEC Newborn Screening Website, ACMG Newborn Screening ACT Sheets, and the Hunter's Hope website.



Sources: (1) ACMG ACT Sheets and Algorithms [Internet]. Bethesda (MD): American College of Medical Genetics and Genomics; 2001-. Authors. Available from: https://www.ncbi.nlm.nih.gov/books/NBK55829 (2) Krabbe newborn screening - lysosomal storage disorders. Hunter's Hope. (2022, November 3). https://www.huntershope.org/newborn-screening/krabbenewborn-screening/



#### Would you like to be a part of our Newborn Screening team?

We are growing and currently have job opportunities in the Newborn Screening Follow-up Program, First Sound (EHDI hearing screening) Program, and the Public Health Laboratory!

Please check the DHEC careers <u>website</u> for all newborn screening job postings!!

# WELCOME TO THE NEW STAFF MEMBERS ADDED TO THE SC NEWBORN SCREENING TEAM:

Hailey Selander, BS: laboratory Technologist II.

#### ON THE RUN

#### What's NEW in 2023?

We have 3 new disorders being added to the SC NBS Test panel in 2023:

#### **MAY 2023**

Krabbe: <u>huntershope.org/newborn-screening/nbs-family-guide/</u>

#### **FALL 2023**

- Argininemia: <u>babysfirsttest.org/newborn-screening/conditions/argininemia</u>
- X-Linked Adrenoleukodystrophy (X-ALD): <u>babysfirsttest.org/newborn-screening/conditions/</u> adrenoleukodystrophy

#### **Vital Records Matching Project:**

Did you know the DHEC Public Health Laboratory and Maternal and Child Health Bureau have partnered with the vital records department to locate infants without newborn screening specimens? This project began last year and has been a collaborative effort between these areas to match newborn screening demographics with birth certificate data. The findings for 2022 identified 306 newborns with birth certificates that were not matched to a newborn screening test or refusal form. Of the 306 newborns, 168 were born in South Carolina hospitals and 138 were home births. Babies born in hospitals were not matched often due to name and address changes, religious exemptions, out of state hospital transfers, and infant mortality. The 138 home births were babies born through midwifery groups, home birth centers, and unexpected home deliveries. Based upon these findings, the South Carolina Newborn Screening Team is targeting outreach efforts to ensure that a newborn screening specimen is obtained for every baby born in the state of South Carolina, It's the law!

#### What are some things you can do to help:

- 1. Ensure parents are educated about newborn screening via the NBS brochure and website.
- 2. Ensure the information filled out on the newborn screening card matches the information filled out on the birth certificate.
- 3. If a parent/guardian religiously objects to the newborn blood spot screen, they must fill out and sign DHEC form 1804 and submit it to DHEC.

#### **Parental Refusal by Religious Objection:**

Do you know what to do if a parent/legal guardian refuses to allow you to collect a newborn screen?

- 4. Complete the Religious Objection Form: DHEC 1804, Newborn Screening Program, Parental Statement of Religious Objection:
  - \*\*Form can be found here: <a href="https://scdhec.gov/sites/default/files/media/document/Newborn-Screening-Manual-Appendix-20220428.pdf">https://scdhec.gov/sites/default/files/media/document/Newborn-Screening-Manual-Appendix-20220428.pdf</a>
- 5. Include the parent's demographic information to assist the DHEC NBS program with parent notification of the refusal.
- Fax the refusal form to DHEC NBS program at (F) 803-898-0337, email to newbornscreening@dhec.sc.gov or mail to: DHEC Newborn Screening Program 2100 Bull St. Columbia, SC 29201

#### The 7-Spot Card

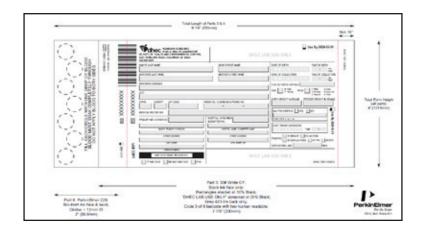
In April, SC NBS changed to a new 7-spot NBS collection card. By minimizing text on the cards and reorganizing the position of the pre-printed circles, the SC NBS Lab was able to add two additional pre-printed circles to the cards without compromising the size of the circles. An example of the new 7-spot card is pictured below. The NBS Lab has started sending these out with all new requests.

The addition of two new spots on the collection card will allow for additional blood, which is needed as the number of tests increases over time.

blood spot screening in order to detect silent, I certify that this refusal is based on religious reason for refusal under South Carolina law, I understand that my child may suffer beain c and be detected by blood spot screening is no lessened or prevented by early diagnosis and usually silent and may be present in a child t I understand that the blood spot screening ter	famage, other bodily harm, or death if a disease that of diagnosed. I understand that such harm can be treatment. I understand that these diseases are
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usually silent and may be present in a child t I understand that the blood spot screening ter	
	at is the best way to detect these disorders early, and
	I understand that this testing is quick, easy and that this testing has been the standard of care for all
children born in South Carolina and the rest	
I have been fully informed of and fully under	estand, the possible devastating consequences to m
	lone. I have been fully informed of, and fully
	specimen storage. I have been given the brochure
	of Health and Environmental Control that describes
	available and explains the benefits of testing and
blood specimen storage.	•
I also understand that my child would have b	seen tested for these conditions except for my
	to ask questions concerning this testing and these
conditions, and all of my questions have been	n fully answered to my satisfaction.
	na Department of Health and Environmental
	h the birth occurred, the person(s) responsible for
	er person or entity relying on this objection, for any
	g the death of my child, which may result to my
child as the result of my refusal of blood spo	t screening.
Parent:	Date:
Witness:	
Wildress.	

\*For refusal questions please see: Neonatal Screening for Inborn Metabolic Errors and Hemoglobinopathies Sections 44-37-30: section A of the South Carolina Code of Laws: add a link to the law <u>here</u>

The new 7-spot card is also an effective tool in decreasing the number of unsatisfactory specimens received at the lab. The mission is to reduce the number of cards submitted without enough blood (quantity insufficient or QNS), which is the primary type of unsatisfactory specimen received. In 2022, 4.6% of newborn screening specimens submitted were unsatisfactory, with 36.5% of those being QNS. The 5-spot cards can continue to be used until they expire, or you run out, whichever comes first.



#### ON THE SPOT

The birthing facilities listed below were the top 5 performers who achieved the lowest average percentage of unsatisfactory newborn screening specimens for 2022:

Hospital Name	2022 Unsatisfactory Percentage (%)
Prisma Health: Oconee Memorial Hospital	0.18
Newberry County Memorial Hospital	0.51
Beaufort Memorial Hospital	0.57
MUSC- Orangeburg	0.77
Saint Francis Eastside	1.23



The birthing facilities below were the most improved in 2022 for NBS specimen collection to received turn-around time (C-R TAT):

Hospital Name	Annual average for collection-to- received turn-around-time (TAT)*
Lexington Medical Center	0.75 day
Hilton Head Hospital	0.92 day
Carolina Pines Regional Medical Center	0.96 day
McLeod Health Dillon	0.96 day
MUSC - Orangeburg	1 day

#### **Newborn Screening Diagnosed Cases**

To date, the following hospitals collected newborn screens that led to these confirmed diagnosed cases in 2022:

#### **Congenital Adrenal Hyperplasia**

McLeod Regional Medical Center MUSC Shawn Jenkins Children's Hospital

#### **Congenital Hypothyroidism**

AnMed Health

Beaufort Memorial Hospital Colleton Medical Center East Cooper Medical Center Grand Strand Medical Center Lexington Medical Center

McLeod Health Dillion

McLeod Health Medical Center

MUSC Health Lancaster Medical Center

MUSC Shawn Jenkins
Prisma Health Baptist
Prisma Health Greenville
Prisma Health Laurens
Prisma Health Patewood
Prisma Health Richland

Prisma Health Tuomey Hospital

Saint Francis Eastside Self Regional Healthcare Spartanburg Medical Center Summerville Medical Center

#### **Cystic Fibrosis**

AnMed Health

Lexington Medical Center McLeod Health Loris Prisma Health Baptist Prisma Health Greenville Prisma Health Patewood Prisma Health Richland Prisma Health Tuomey Hospital Spartanburg Regional

#### **Hemoglobin Disorders**

Aiken Regional Medical Center

AnMed Health

Bon Secours St. Francis Hospital: Xavier Carolina Pines Regional Med Center

CHS: Pineville

Coastal Carolina Hospital Colleton Medical Center East Cooper Medical Kershaw Health Lexington Medical Center

McLeod Health

McLeod Health Clarendon McLeod Health Dillon

McLeod Health Medical Center

MUSC Health Florence MUSC Shawn Jenkins Prisma Health Baptist

Prisma Health Baptist Parkridge

Prisma Health Greenville Prisma Health Laurens Prisma Health Richland Prisma Health Tuomey Piedmont Medical Center Regional Medical Center Self Regional Healthcare

Spartanburg Regional Medical Center

Summerville Medical Center Tidelands Waccamaw

#### **Lysosomal Storage Disorders**

Pompe

Spartanburg Regional Medical Center Lexington Medical Center

MPS1

Prisma Health Richland

#### **Metabolic Disorders**

 Biotinidase Deficiency Coastal Carolina

PKU

Prisma Health Patewood MUSC Shawn Jenkins Children's Hospital

MCAD

Lexington Medical Center

- 3-MCC

Prisma Health Richland

GA-1

Prisma Health Patewood

Galactosemia

Prisma Health Richland

#### **Spinal Muscular Atrophy (SMA)**

Prisma Health Richland

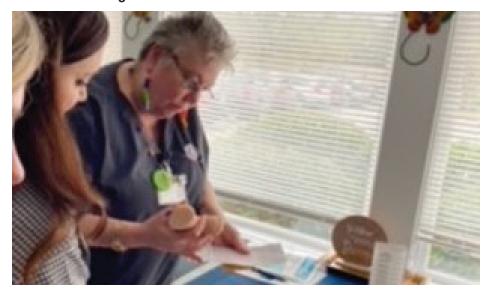
Spartanburg Regional Medical Center

#### SCID/T-Cell Lymphopenia

MUSC Health Lancaster

#### FIRST TIME EVERY TIME!

Would you like for your staff to be trained on how to collect an adequate newborn screen? Please email harrelcl@dhec.sc.gov to be added to the 2023 NBS training schedule.





## **WE ENJOY HELPING OUR PARTNERS PUT THEIR BEST FOOT FORWARD!**

#### **CONTACT US. WE'RE HERE TO HELP!**

#### **DHEC Newborn Screening Program:**

(803) 898-3192

#### **Newborn Screening Lab:**

(803) 896-0891

#### Keep us on our toes.

Please give us feedback on what you would like to see in our next Footnotes Edition. Email newbornscreening@dhec.sc.gov with your suggestions.

### **EDUCATIONAL INFORMATION:**

#### Are you educating parents about **Newborn Screening?**

Visit our website at scdhec.gov/ health-professionals/lab-certificationservices/newborn-screening to find our updated newborn screening brochure and educational handouts for parents and providers.

#### Are you in need of NBS brochures (ML-000032, Eng. and ML-025096, Spa.)?

Please go to: <a href="mailto:scdhec.gov/about-dhec/">scdhec.gov/about-dhec/</a> educational-materials-library-product-

Are you in need of NBS collection forms? You can now email PHLsupply@dhec. sc.gov to receive collection forms for your office or facility or call 803-896-0913.



batch of filter paper expires on 09-30-2024!