P-245 - NEWBORN SCREENING OUT OF A PROGRAM IN ARGENTINA

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INTRODUCTION: Newborn screening (NBS) involves more than a single laboratory test; it’s a program in which the detection of patients at risk is just one link in a chain. In Argentina, the public health system runs a National Strengthening Program but both the city and the Province of Buenos Aires have different programs for children born in public hospitals. Private hospitals, conversely, do not run any program and reduce NBS to a single lab test without proper confirmation or patients’ follow-up. Our Center, as a reference institution in the diagnosis of inborn errors of metabolism (IEM) has been informally taking the role of confirmatory center for patients with inconclusive NBS results generated in the private sector. OBJECTIVE: Describe the consequences of not being part of a universal screening program in the population consulting our center. MATERIALS AND METHODS: Revision of medical records from 2007 to 2018. RESULTS: We received 15 neonates with inconclusive NBS results: 7 were false positives (FP) for PKU, 1 FP for MSUD, and 7 were true positives for PKU. On the other hand we evaluated 11 children from 2 months to 11 years with signs or symptoms of IEM, all of them were false negative (FN) for PKU. All patients were screened at birth in private labs or maternities. DISCUSSION: There is no control of NBS in private institutions in Argentina but children born in public institutions are covered by the NBS program. Families coming to our Center with non-specific NBS results are filled with anguish about this proceeding. The NBS program should include all Argentine children alike.