P-255 - RETROSPECTIVE REVIEW STUDY ON THE IMPLEMENTATION OF INBORN ERRORS OF METABOLISM SCREENING IN THE COLOMBIAN CAPITAL: A STUDENTS' DISSATISFACTORY POINT VIEW

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INTRODUCTION: In 2013, the Ministry of Health of Colombia published a Clinical Practice Guide (GPC) which focuses on the early detection of congenital anomalies in neonates at term; by recommending the screening of the following inborn errors of metabolism (EIM): congenital hypothyroidism, congenital adrenal hyperplasia, phenylketonuria, biotinidase deficiency, galactosemia, medium-chain acyl-CoA dehydrogenase deficiency, propionic and methylmalonic acidemia. OBJECTIVE: To discuss the degree of knowledge and the perception of metabolic neonatal screening implementation by undergraduate students of Medicine in the fourth year of the Military University of Nueva Granada (Bogotá, Colombia). MATERIALS AND METHODS: Descriptive qualitative study to assess the degree of knowledge regarding the neonatal screening of EIM, in addition to the perception of their implementation in centers of hospital practice (CPH) of the Colombian capital, that through a virtual survey filled by undergraduate students. The survey was applied to 173 students in three academic semesters in the years 2014, 2015 and 2018. One analysis was withdrawn due to inconsistencies in the information, for a total of 137 participants. RESULTS: The degree of knowledge about screening was categorized subjectively into “poor”, “sufficient” and “detailed” giving as results: 4.4%, 21.2%, and 74.2% respectively. 94.2% of students commented that in their care rotations at CPH, the implementation of metabolic screening is incorrectly performed. It was found that only congenital hypothyroidism was evaluated at birth, without testing for other pathologies. CONCLUSIONS/DISCUSSION: In the medical and teaching CPH medical students describe that the recommendations and algorithms of the Colombian CPG do not apply. The screening tests of seven EIMs are omitted and only performed for congenital hypothyroidism in umbilical cord blood samples. The results obtained in 2018 are similar to those observed in the first year after the publication of the CPG. In retrospect, it can be concluded that efforts should be increased from the academy both in the theoretical and practical component in the training of health professionals. On the other hand, a real commitment is required in the generation of public policy for the implementation of EIM screening.