

## Inborn Errors of Metabolism

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**Definition/  
cut-off value**

Presence of inborn error(s) of metabolism diagnosed by a physician as self reported by applicant/participant/caregiver; or as reported or documented by a physician, or someone working under physician's orders.

Generally refers to gene mutations or gene deletions that alter metabolism in the body, including, but not limited to:

- phenylketonuria (PKU)
  - maple syrup urine disease
  - galactosemia
  - hyperlipoproteinemia
  - homocystinuria
  - tyrosinemia
  - histidinemia
  - urea cycle disorders
  - glutaric aciduria
  - methylmalonic acidemia
  - glycogen storage disease
  - galactokinase deficiency
  - fructoaldolase deficiency
  - propionic acidemia
  - hypermethioninemia.
  - medium-chain acyl-CoA dehydrogenase (MCAD)
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**Participant  
category and  
priority level**

**Category**

**Priority**

Pregnant Women	I
Breastfeeding Women	I
Non-Breastfeeding Women	III, IV, V, or VI
Infants	I
Children	III

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**Justification**

Appropriate dietary management, which may include the use of special formulas, can minimize the medical risk to individuals with inborn errors of metabolism.

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**References**

1. Institute of Medicine: WIC Nutrition Risk Criteria: A Scientific Assessment; 1996; pp. 181-183.
  2. Queen, PM and Land, CE: Handbook of Pediatric Nutrition; Aspen Publishers, Inc.; 1993; p. 342.
  3. The American Dietetic Association: Pediatric Manual of Clinical Dietetics; Table 2-Metabolic Disorders Amenable to Nutrition Therapy; 1998; p. 288.
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**Clarification**

If a participant has a physician's diagnosis of a condition not listed in the definition, but included in the table, they may be eligible. If after assessment by a CPA, it is determined that the inborn error of metabolism impacts nutritional health and the condition can be ameliorated by WIC participation, the participant can be certified using this risk code. Such case by case determinations of nutrition risk do not require Federal approval. However, if a specific condition, not listed in the definition, is frequently used as a certifying nutritional risk, than a request for approval to RISC must be submitted by the State agency.

Self-reporting of a diagnosis by a medical professional should not be confused with self-diagnosis, where a person simply claims to have or to have had a medical condition without any reference to professional diagnosis. A self-reported medical diagnosis ("My doctor says that I have/my son or daughter has...") should prompt the CPA to validate the presence of the condition by asking more pointed questions related to that diagnosis.

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