Isovaleric Acidemia (IVA)
(metabolic condition: organic acid disorder)

Also known as:
• isovaleric acid-CoA dehydrogenase deficiency
• IVD deficiency
• isovaleryl-CoA dehydrogenase deficiency

What are organic acid disorders?
Organic acid disorders (sometimes called organic acidemias) are a group of inherited metabolic conditions in which certain components of proteins, for example amino acids, cannot be broken down. This leads to an accumulation of toxic metabolites in the body which can cause serious health problems.

What is IVA?
Isovaleryl-CoA dehydrogenase is an enzyme involved in the breakdown of the amino acid leucine, a component of all proteins. When this enzyme is missing, toxic metabolites accumulate.

What causes IVA?
IVA is caused by pathogenic variants in the gene for isovaleryl-CoA dehydrogenase resulting in absent or decreased enzyme activity.

How common is IVA?
IVA is a rare condition with an incidence of about 1 in every 100,000 to 200,000 infants born in Canada.

What are the clinical features of IVA?
Most infants with IVA present in the first few days of life with an acute metabolic crisis with lethargy, vomiting, acidosis and increased ammonia level, which may progress to seizures, coma and death. Infants may have a characteristic smell of sweaty feet. Some individuals with a less severe form present later with symptoms precipitated by a period of fasting or during a minor illness.

What is the screening test for IVA?
A specific pattern of organic acid metabolites is detected on the newborn blood spot screen. Newborn blood spot screening will not detect all infants with IVA. Infants with clinical symptoms need timely assessment and diagnostic testing even if their screen result is normal.

How is the diagnosis confirmed?
The diagnosis of IVA is confirmed by detecting specific metabolites in urine or on blood acylcarnitine analysis. Further testing may include enzyme analysis and/or molecular genetic analysis. The Clinical and Metabolic Genetics Program will arrange diagnostic testing.

How is IVA treated?
IVA is treated by avoidance of fasting and dietary supplementation with carnitine and glycine. A low protein diet and a special formula low in leucine are also recommended. Prompt treatment of a metabolic crisis with intravenous fluids of glucose and lipids is necessary. Treatment improves the outcome of HMG deficiency. However, some patient may develop neurological problems even with treatment. The treatment is lifelong.

Is IVA inherited?
IVA is inherited as an autosomal recessive disorder. Parents of a child with IVA are carriers of the condition and have a 1 in 4 chance of having another affected child in each subsequent pregnancy. IVA carriers are healthy. Genetic counselling is available to families with IVA.

Additional resources are available through:

Clinical & Metabolic Genetics Program (Edmonton)
8-53 Medical Sciences Building
8440 – 112 St. NW
Edmonton, AB T6G 2H7
Phone: 780-407-7333
Fax: 780-407-6845

Emergency consultations:
Phone 780-407-8822 and ask for the specialist on call for metabolic diseases.

Clinical & Metabolic Genetics Program (Calgary)
Alberta Children's Hospital
28 Oki Drive NW
Calgary, AB T3B 6A8
Phone: 403-955-7587
Fax: 403-955-3091

Emergency consultations:
Phone 403-955-7211 and ask for the specialist on call for metabolic diseases.

Condition Information for Parents
Visit ahs.ca/nms and under Quick Reference click on What conditions are screened for?

Early screening and follow-up care – every baby, every time
For more information about the NMS Program, visit www.ahs.ca/newbornscreening
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