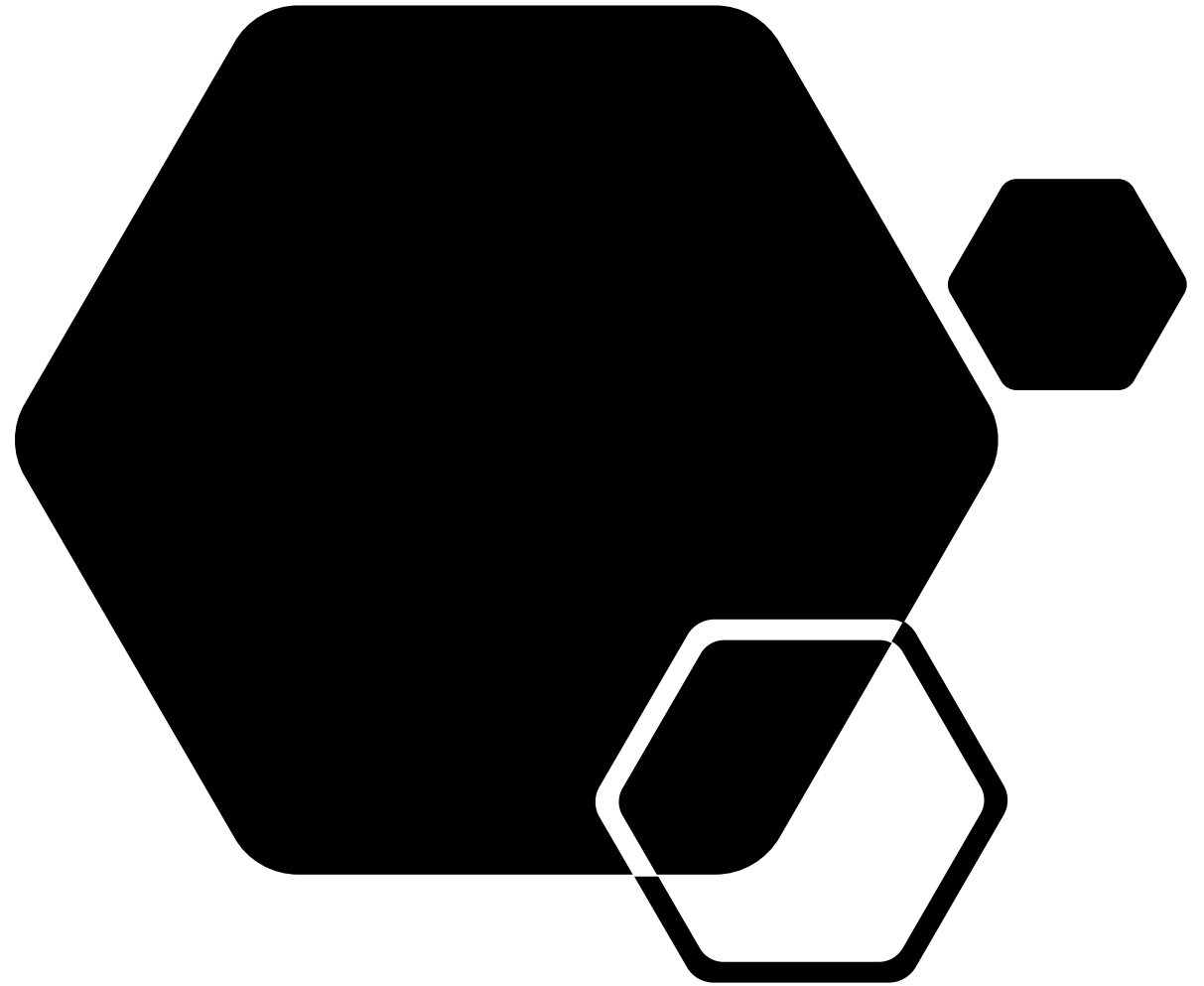


# MADD: Finding the Balance

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# Objectives

- Describe the difference between MADD and other FAOD
- Provide overview of treatment options
- Discuss diet management of MADD through the ages
- Describe the major roles of the different macro- and micronutrients in the diet
- Brief overview of monitoring laboratories

# Introduction

- The following presentation is intended for parents/caregivers of individuals with MADD or GAI.
- Specific recommendations for each person's diet are individual and based on their disease severity.
  - Always consult with your health care provider before making any changes to your diet or care.

# MADD Versus FAOD

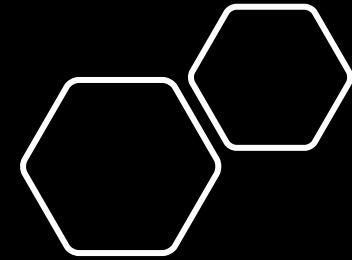
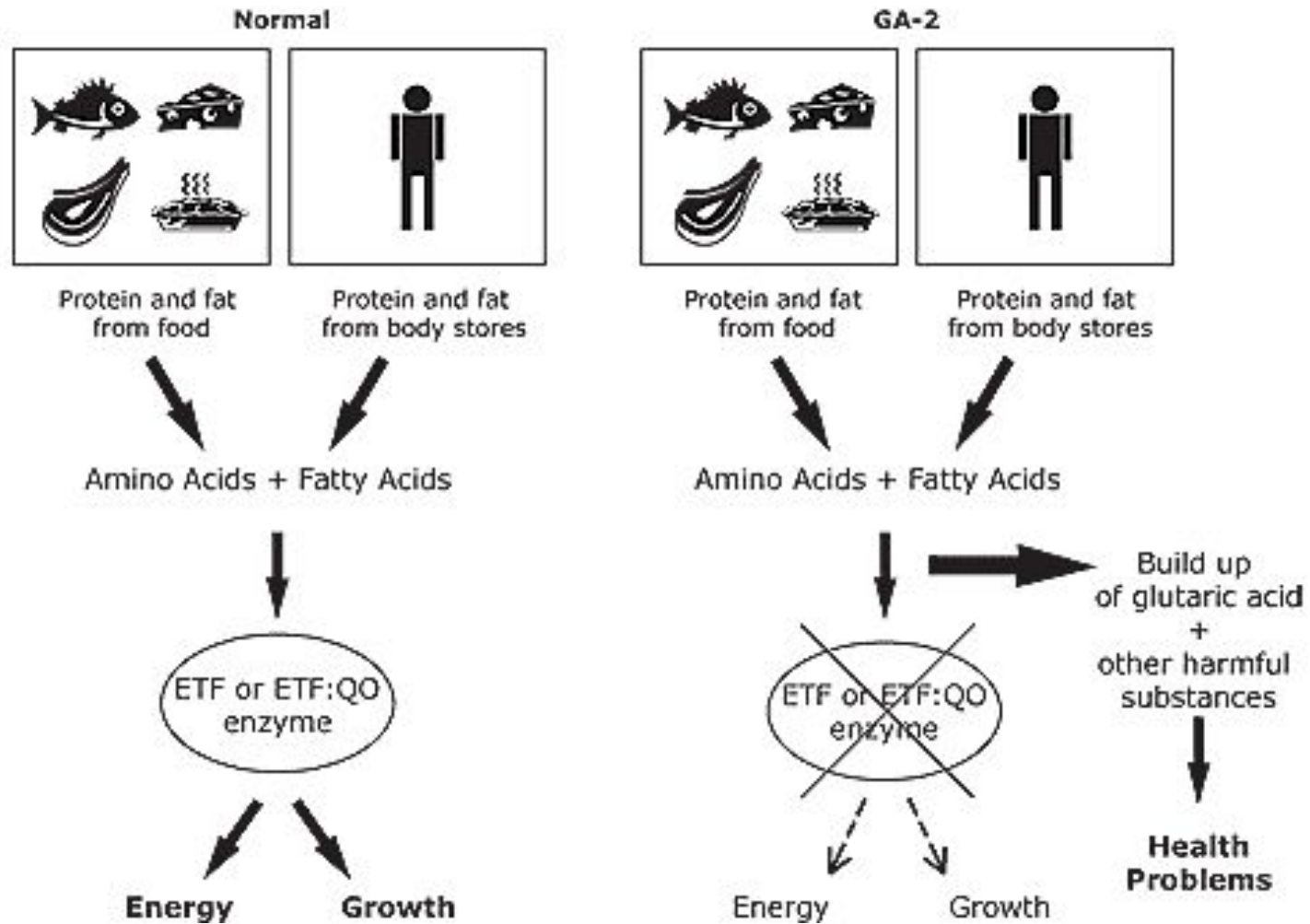
## MADD

- Energy metabolism disorder
- Must limit protein and fat intake
- More reliant on carbohydrates for energy

## FAOD

- Other FAOD include:
  - VLCAD
  - LCHAD
  - CPT1
  - CPT2
    - Limit intake of long chain fats, all other macronutrients can be eaten in unlimited amounts
- MCAD
  - Avoid concentrated sources of medium chain fats, other fats and macronutrients are not limited

## Glutaric Acidemia - Type 2 GA-2



# MADD Treatment Plan

## Fasting Precautions

- Fasting times change based on age
  - Babies – typically starting at 4 hours, increase by 1 hour per month
  - Children, teens, adults - ~12 hours fasting is acceptable
- \*will change in times of illness, check with your healthcare provider

## Diet

- High in carbohydrates and low in protein and fat
- Individual diet will vary based on age, severity and should be discussed with your healthcare provider

## Riboflavin, Carnitine and Glycine Supplements

- Help with energy metabolism
- Use of ketones

## Emergency Treatment

- Call your healthcare provider to discuss home care versus hospital care

# Macro- and Micronutrients and MADD



# Macronutrients



**Main nutrients that make up the foods we eat**



**Provide energy and the building blocks for growth**



**Used in large amounts (macro = large)**



**The three macronutrients are:**

Carbohydrates

Protein

Fat (lipids)



**Each macronutrient has a unique role and all three are part of a balanced, nutrient-dense diet**





# Carbohydrates

- Major role: main source of fuel for the body
- 4 calories per gram
- Three main types:
  - Sugars (simple carbohydrates): 1-2 sugar molecules, broken down quickly by the body
  - Starches (complex carbohydrates): long chains of sugar molecules, broken down slowly by the body
  - Fiber: a type of carbohydrate that the body cannot digest – fiber helps to regulate digestion and blood sugar, and promotes fullness and satiety

# Carbohydrates

## Sources of simple carbohydrates


- Table sugar, soft drinks, candy, white bread/pasta, baked goods

## Sources of complex carbohydrates

- Whole grains (bread, pasta, cereals), brown rice, oats, quinoa, sweet potatoes, beans/lentils, starchy vegetables

## Sources of fiber

- Fruits, vegetables, whole grains, beans, lentils



# Carbohydrates and MADD

- Primary source of calories so should be the base of intake
  - Still contain fats and proteins so read labels!
- Complex carbohydrates contain more fiber and slow digestion
  - Resistant starches – what are they and are they good?
  - Whole grain versions will have more protein
- Simple carbohydrates can still be included, typically contain more fat
- Get creative with fruits and vegetables by cutting into fun shapes, roasting in an air fryer, adding sauces (Walden Farms)

# Simplified Diet

## Uncounted Fruits

- |                               |                         |                         |
|-------------------------------|-------------------------|-------------------------|
| ✓ Apples – fresh and dry      | ✓ Grapes                | ✓ Papaya                |
| ✓ Apricots – fresh and dry    | ✓ Guava                 | ✓ Peaches               |
| ✓ Bananas                     | ✓ Jackfruit             | ✓ Pears – dry and fresh |
| ✓ Berries (all varieties)     | ✓ Kiwi                  | ✓ Persimmon             |
| ✓ Cherries                    | ✓ Lemons                | ✓ Pineapple             |
| ✓ Cranberries – fresh and dry | ✓ Limes                 | ✓ Plantains             |
| ✓ Dates                       | ✓ Mango                 | ✓ Plums                 |
| ✓ Figs                        | ✓ Melon (all varieties) | ✓ Pomegranates          |
| ✓ Grapefruit                  | ✓ Olives                | ✓ Prunes                |
|                               | ✓ Oranges*              | ✓ Raisins               |

## Uncounted Vegetables

- |                    |                           |  |
|--------------------|---------------------------|--|
| ✓ Acorn Squash     | ✓ Green Beans             | ✓ Radishes                               |
| ✓ Beets            | ✓ Eggplant                | ✓ Rutabaga                               |
| ✓ Bok Choy         | ✓ Jicama                  | ✓ Sauerkraut                             |
| ✓ Butternut Squash | ✓ Leeks                   | ✓ Spaghetti Squash                       |
| ✓ Cabbage          | ✓ Lettuce                 | ✓ Summer Squash<br>(zucchini and yellow) |
| ✓ Carrots          | ✓ Okra                    | ✓ Tomatoes                               |
| ✓ Cauliflower      | ✓ Onions                  | ✓ Turnips                                |
| ✓ Celery           | ✓ Parsnips                | ✓ Yucca (Cassava Root)                   |
| ✓ Chayote Squash   | ✓ Peppers (all varieties) |  |
| ✓ Cucumber         | ✓ Pumpkin                 |  |

Please remember your NO foods are still NO foods

For any questions on specific items, please contact your metabolic dietitian.

Developed by IMD Nutrition, Children's Hospital Colorado

# Fats

- Major role: provides energy and essential fatty acids, and aids absorption of fat-soluble vitamins
  - MVI timing
- 9 calories per gram
- Classified as saturated, unsaturated (monounsaturated or polyunsaturated), or trans
- Most of the fat in our diet contains long-chain fatty acids (LCFAs)
- Type of fat does not matter in MADD

# Maximize Your Fat

- Essential Fats
  - Must be consumed in the diet – cannot be synthesized
  - Good sources include: flax oil, walnut oil, soybean oil, vegetable oil, fatty fish (if allowed)
  - DHA supplement to maximize food fat
- Meal plan with allotted amounts of fat per meal, leave wiggle room
- Choose low fat carbohydrates and lean proteins to allow for added fats for cooking/flavoring
- Use low fat versions of foods to be able to incorporate more variety

# Protein

- Major role: cell and tissue growth
- 4 calories per gram
- Proteins are composed of many different amino acids linked together
- Two types of amino acids:
  - Essential: cannot be made by the body and must be consumed through the diet
  - Non-essential: can be made by the body
- Adequate protein intake is important during periods of growth or increased demand (infancy, childhood, adolescence, pregnancy, breastfeeding)

# Low Fat Protein Sources



Animal-based: lean meats and fish, low-fat or fat-free dairy (milk, yogurt, cheese, cottage cheese)



Plant-based: beans, lentils, peas, powdered peanut butter, protein powder, lite tofu

Always consult with your health care provider before introducing any new foods

Slide courtesy of Mary Sowa and Sandy Van Calcar



# Maximize Your Protein

1

Choose plant proteins over animal proteins

- Lower in fat and provide more bulk for amount of protein
- Jack fruit is a great low protein/fat meat alternative
- Essential amino acid supplements versus food protein

2

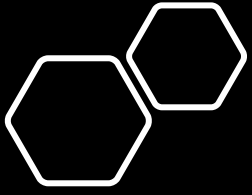
Use proteins as compliments to meals rather than main component

- Stir-fries, topping on salad, mixed with pasta and vegetables, ground turkey/beans with added vegetables for tacos

3

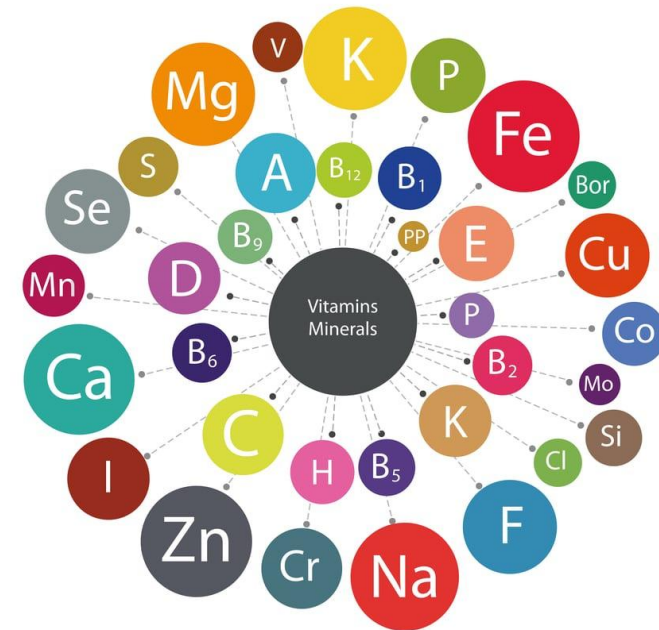
Iron needs – can be concerning with limited protein intake

- Use cast iron pans
- Incorporate dark leafy greens with source of Vit C (le: spinach salad with mandarin oranges)
- Supplements – slow-release options



# Micronutrients

- Vitamins and minerals needed in small amounts (micro = small)
- Major roles: essential for production of enzymes, hormones, and other substances required for normal growth, development, and function
- Micronutrient deficiencies can cause visible and dangerous conditions, but may also cause more subtle/mild impacts on health
- Important to stay in close contact and provide accurate diet records to your healthcare provider to ensure adequate intake



# Other Thoughts...

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- Focus on meal planning
- Snacks – low fat, gluten free
- Recipe modification – use your dietitian! That's what we are here for
  - Replacing a portion of the protein with vegetables to reduce protein and fat
- Transitioning from g-tube to oral intake
  - Swallow study – will help with tolerated texture and safety
  - Work with a feeding therapy specialist!
  - Offer foods prior to next feed

# Foods to Change It Up

## Meal Ideas

- Walden Farms sauces/dips
- Rice noodles
- Mung bean noodles
- Portabella mushroom burger
- Curry with lite coconut milk
- Different spices to add flavor
- Great creative with fruits and vegetables by cutting into fun shapes, roasting in an air fryer, adding sauces

## Snack Ideas

- Air popped popcorn
- Dairy Free Go-Gurt
- GF bread with jelly
- GF cereal with rice milk
- Rice cakes
- Juicy Gels
- Cook and serve pudding with rice milk
- Fat free whipped topping on fruit
- Fruit snacks
- Pretzels (GF, crisps, etc)
- Apple chips

# Laboratory Monitoring

- Quantitative serum amino acids – used to ensure adequate protein intake
  - Low – need additional protein
  - High – need to assess protein intake as well as energy intake
- Urine organic acids – used in diagnosis but not quantitative so not used for ongoing management
- Ketones – measured 90 minutes after consumption to ensure adequate dosing
- Other possible labs – comprehensive metabolic panel, complete blood count, prealbumin

# References and Kudos

- <https://www.newbornscreening.info/ga-2-glutaric-acidemia-type-2-2/>
- Image: <https://smpnutra.com/what-are-vitamins-and-minerals>
- Special thanks to Mary Sowa, Sandy Van Calcar and Aaina Kochhar for their expertise on this topic

# Questions?

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