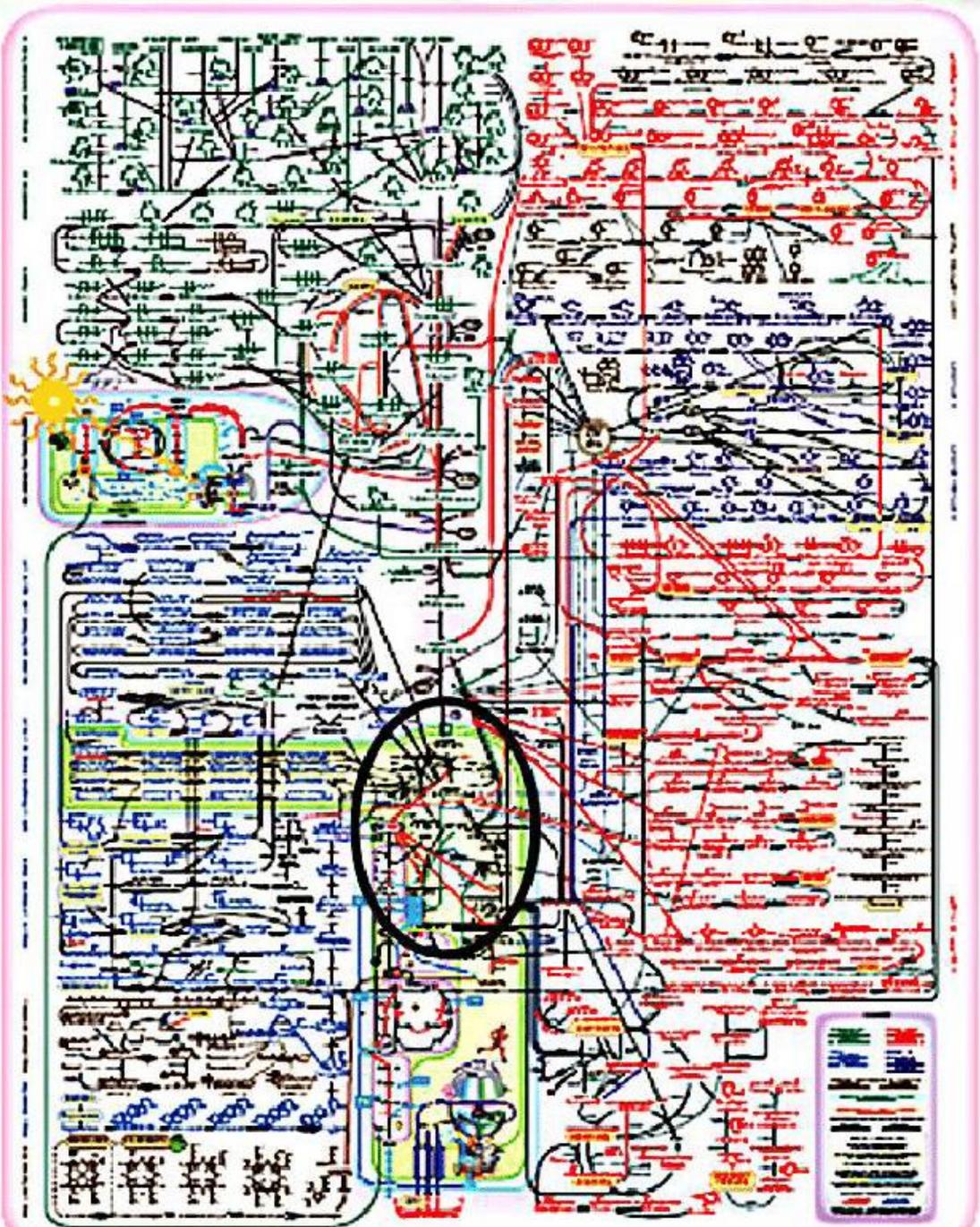
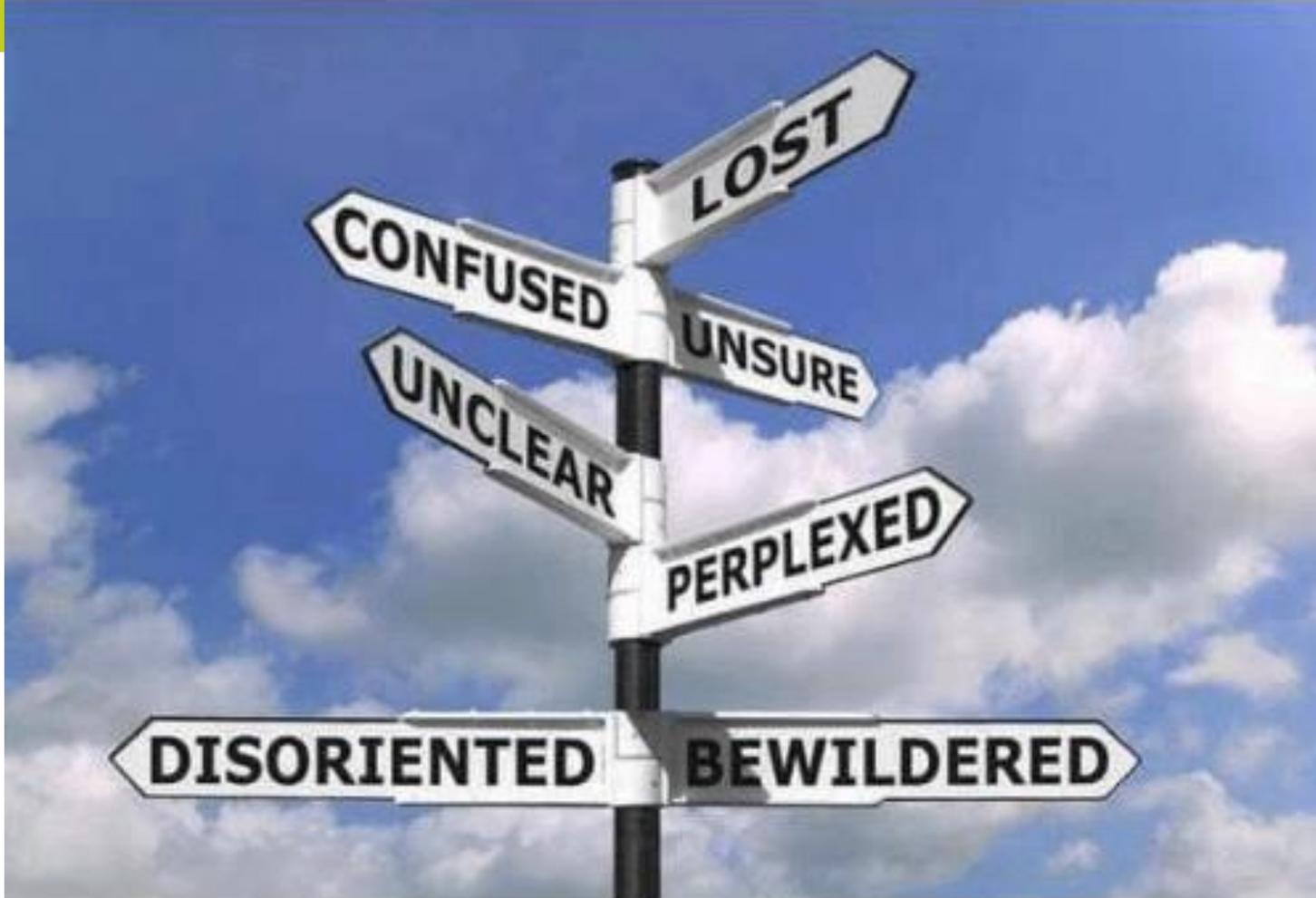


Fatty Acid Oxidation Disorders 101

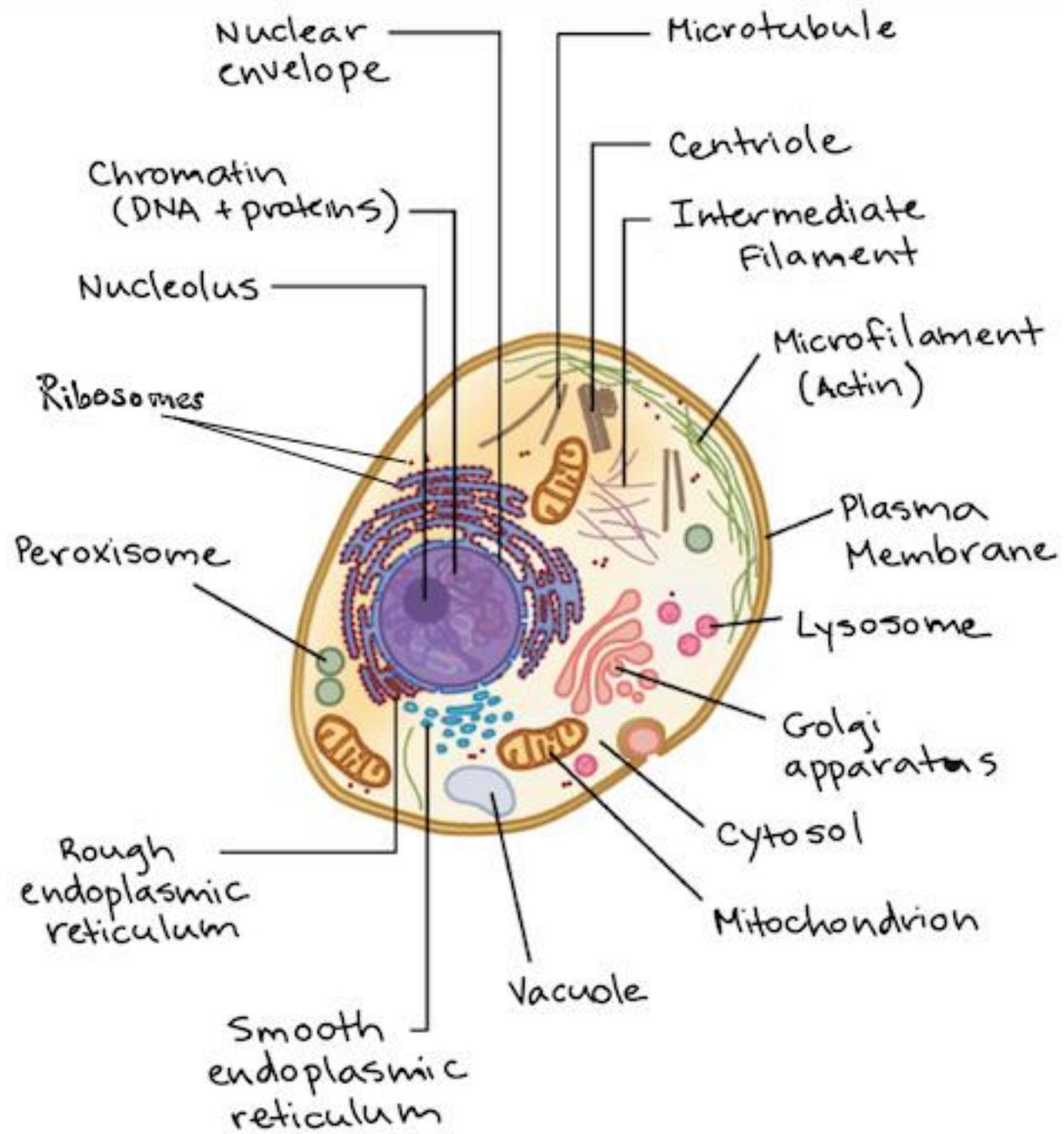
Georgianne Arnold, M.D.
Emerita Professor of Pediatrics
University of Pittsburgh







Don't Look Back
... You're Not
Going That Way





What is Fat?

- Fat is the most efficient energy source in the body
- Fat is made up of chains of carbons and hydrogens
 - Hydrocarbon
- Short chain fats have 4-6 carbons (mostly made from oxidation of longer chain FA or gut fermentation)
- Medium chain fats have 6-10 carbons (made from oxidation of longer chain FA, also coconut oil, palm oil, MCT)
- Long chain fats have 12-18 carbons (oils, fatty meat, nuts, etc)

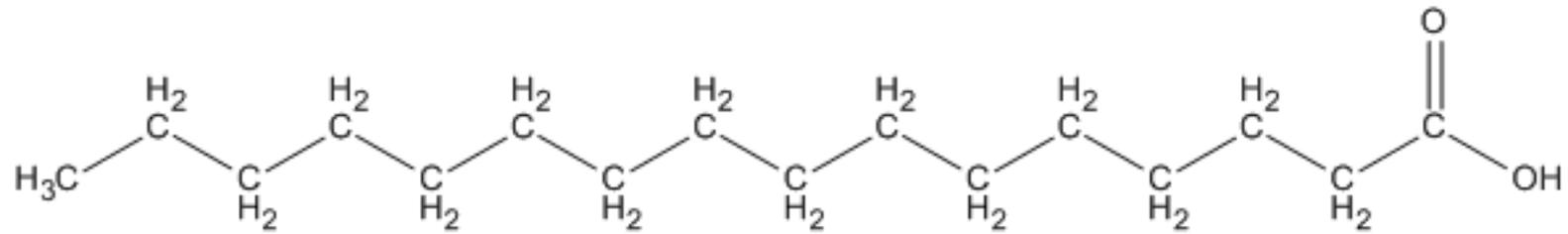


What is Fat?

- Fat is oxidized (burned to make energy) in the liver
- Each cycle of fat oxidation takes off 2 carbons that are burned for energy or turned into a ketone and exported out to be burned for energy in another organ
- The energy from fat metabolism is used to make glucose
- So, fatty acid oxidation disorders tend to present during fasting, with inadequate ketone formation (hypoketosis) and hypoglycemia
- Ketones are the preferred fuel for the heart

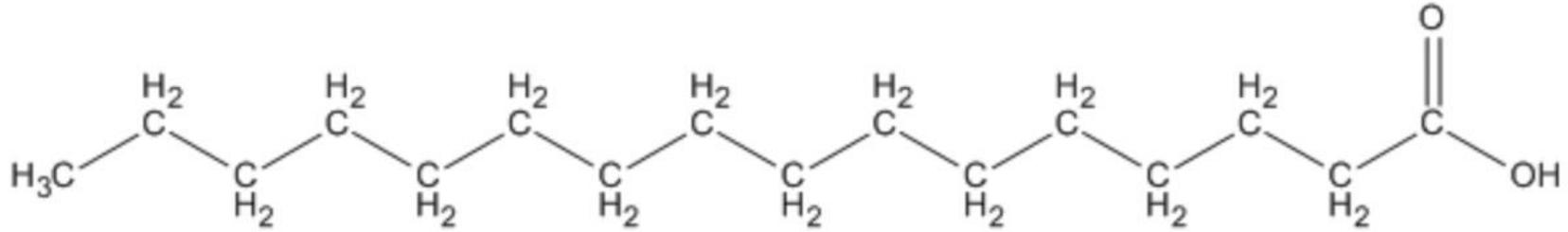


A Picture is Worth a Thousand Words



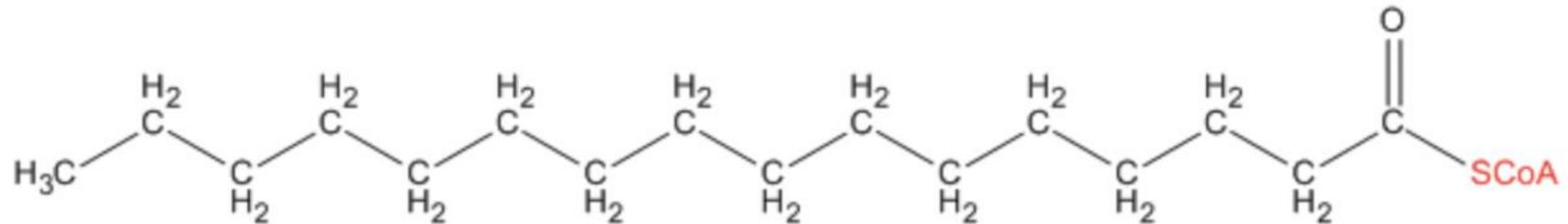


First, the fat has to be activated (by the addition of CoA (Coenzyme A))



A fatty acid is chemically not very reactive.

The enzyme fatty acyl-CoA synthetase associates a Coenzyme A to the fatty acid.

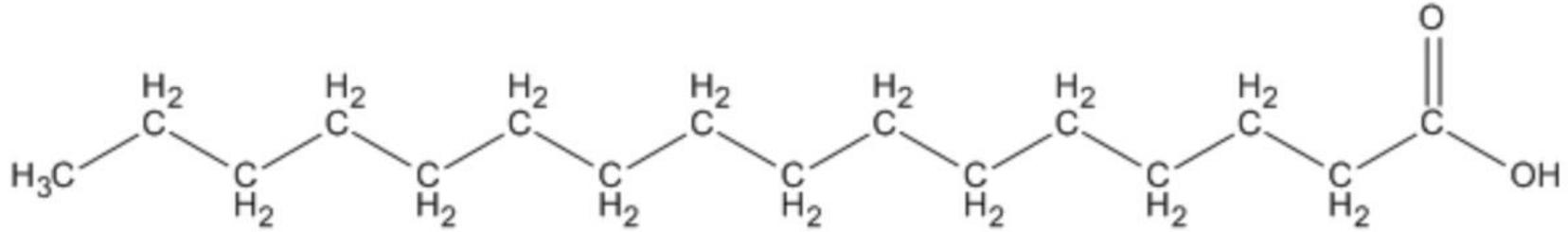


("activated fatty acid")



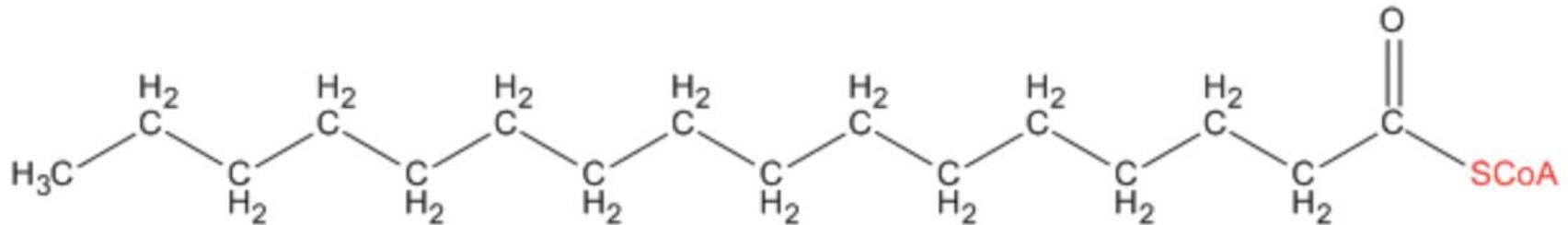


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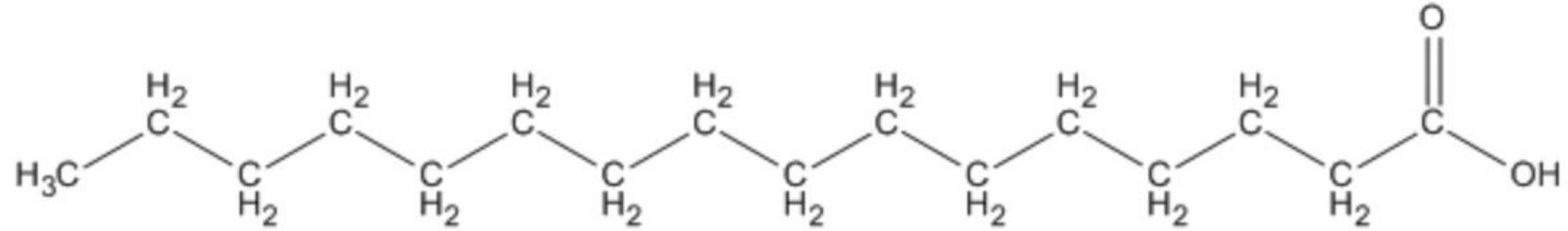
Acyl CoA

("activated fatty acid")



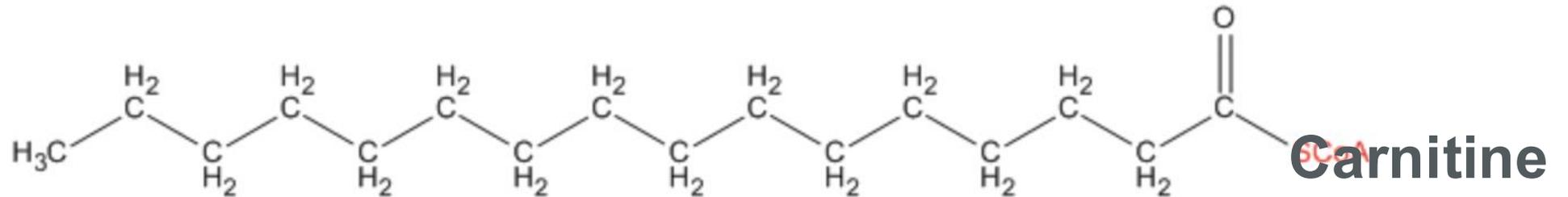


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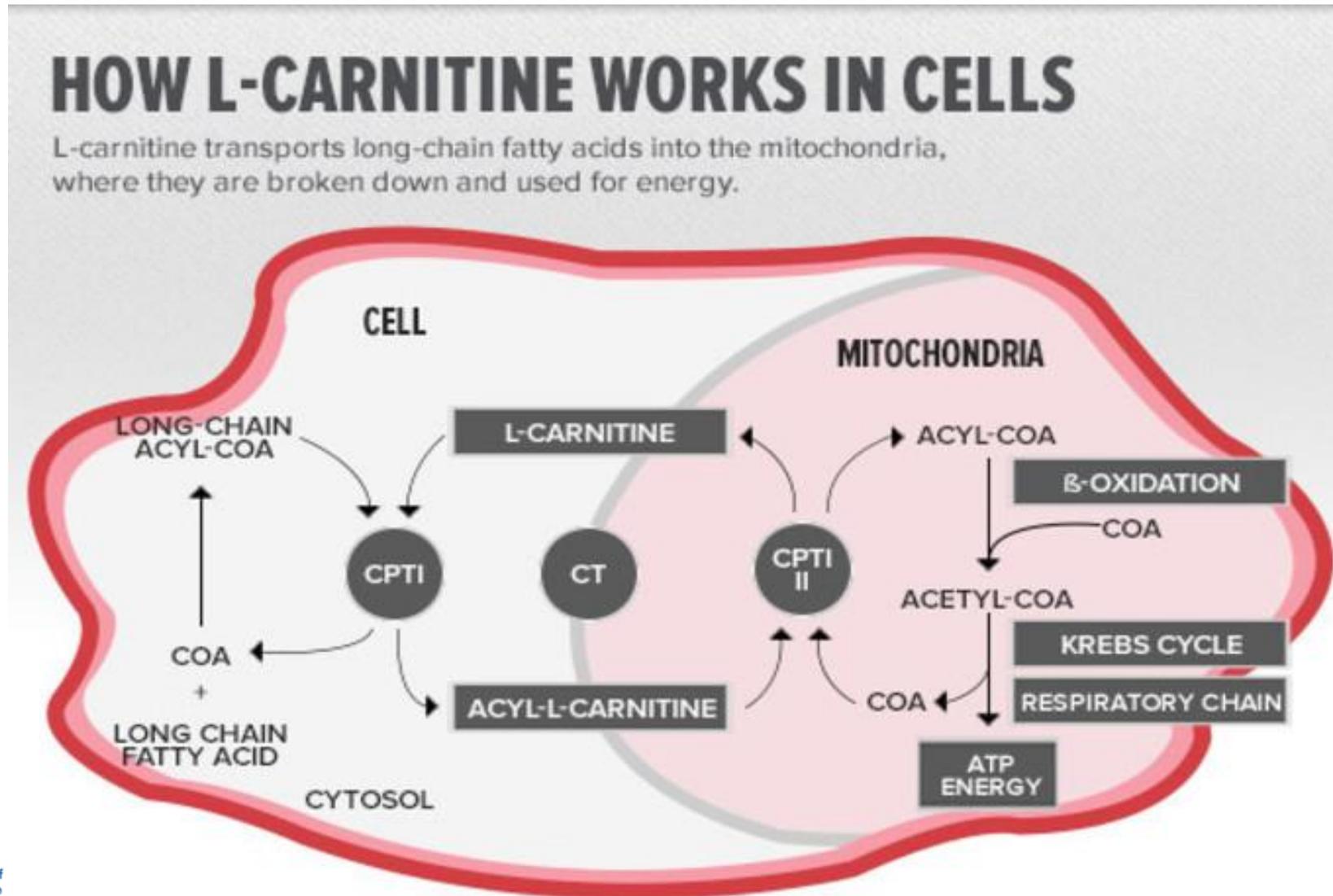
Acyl Carnitine

("activated fatty acid")





Long Chain Fat can't get into the mitochondria by itself – it has to first be attached to Carnitine





Carnitine Cycle FAOD

- **CPT1 deficiency (can't attach carnitine to the fat)**
- **CACT (translocase) deficiency – (can't pass the fat/carnitine compound (acylcarnitine) into the mitochondria)**
- **CPT II deficiency – (can't release the carnitine from the fat)**

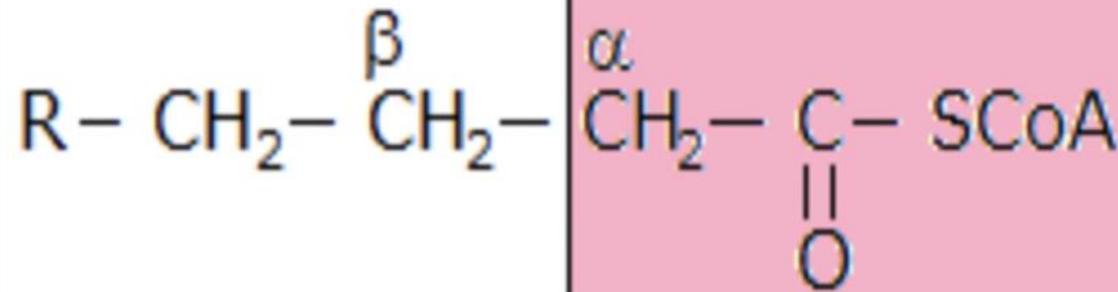


Carnitine Cycle Defects

- Share features with long chain FAOD
- Mild to Severe
- Fasting intolerance, Exercise intolerance, hypoketotic hypoglycemia
- Failure of high energy requiring organs, heart, liver, kidney

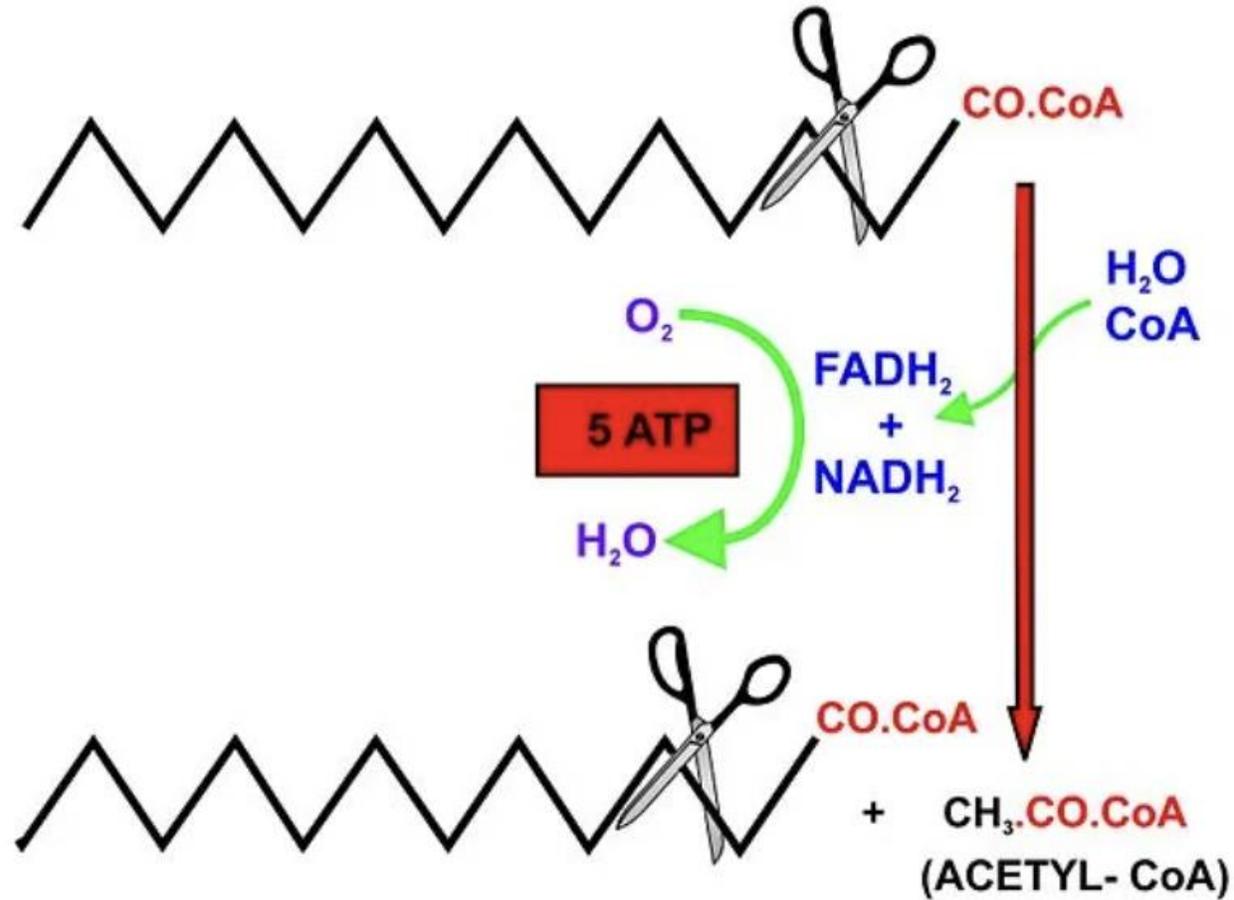


What is beta-oxidation?



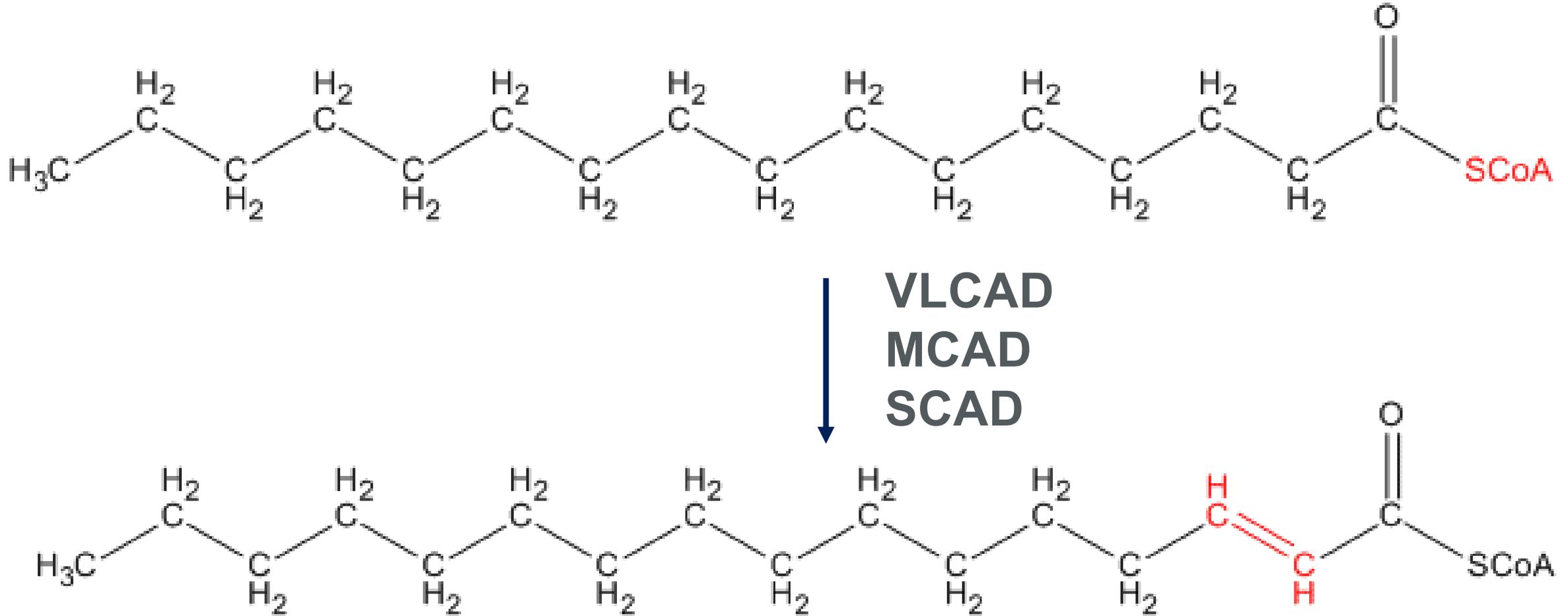


Beta-oxidation



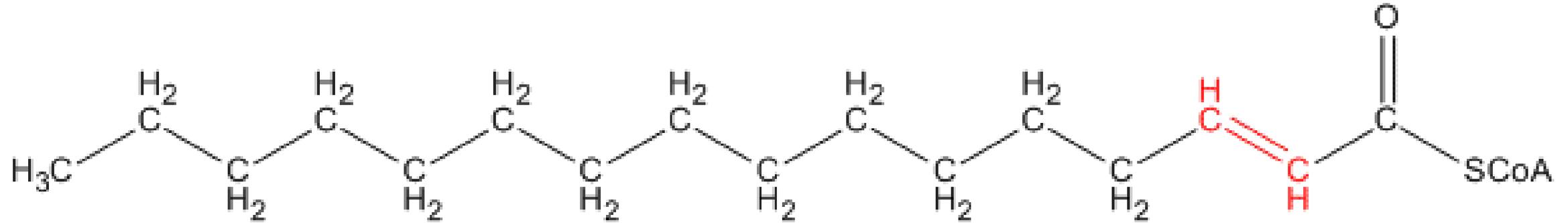


Beta-oxidation Step 1 – AcylCoA Dehydrogenase

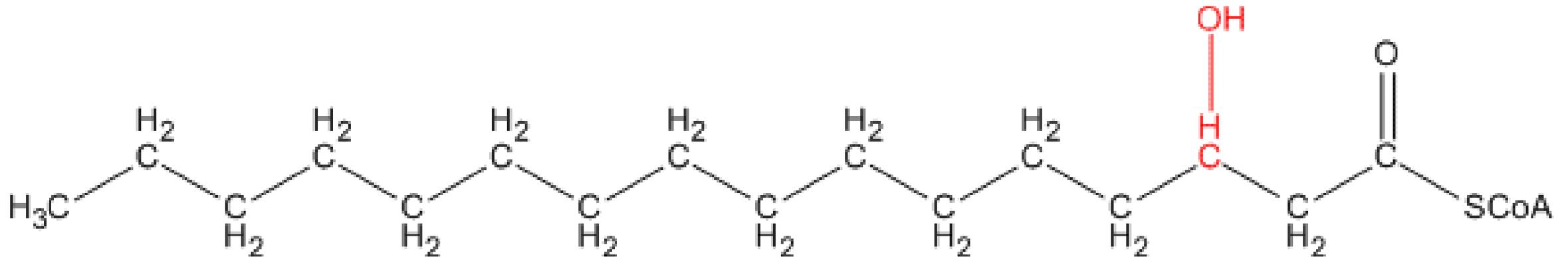




Beta-oxidation Step 2 – Hydratase

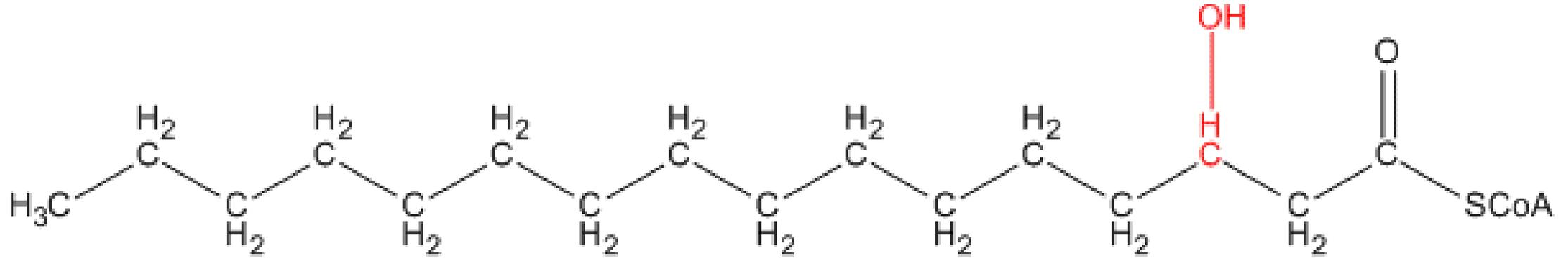


+H₂O

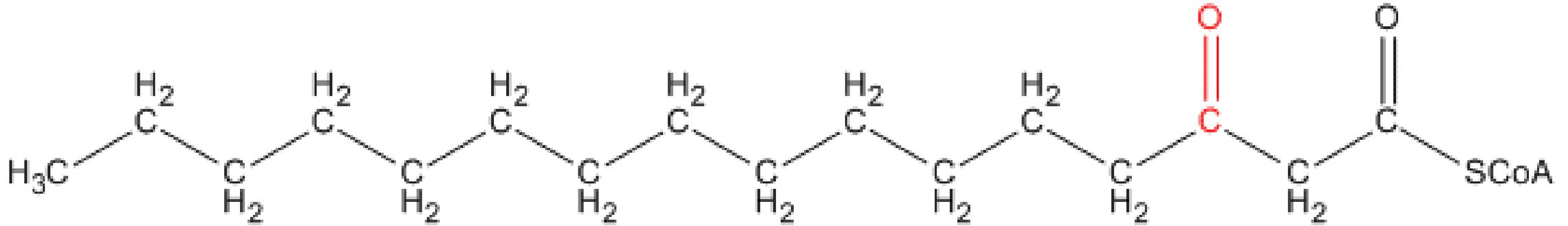




Beta-oxidation Step 3 – Hydroxy AcylCoA Dehydrogenase

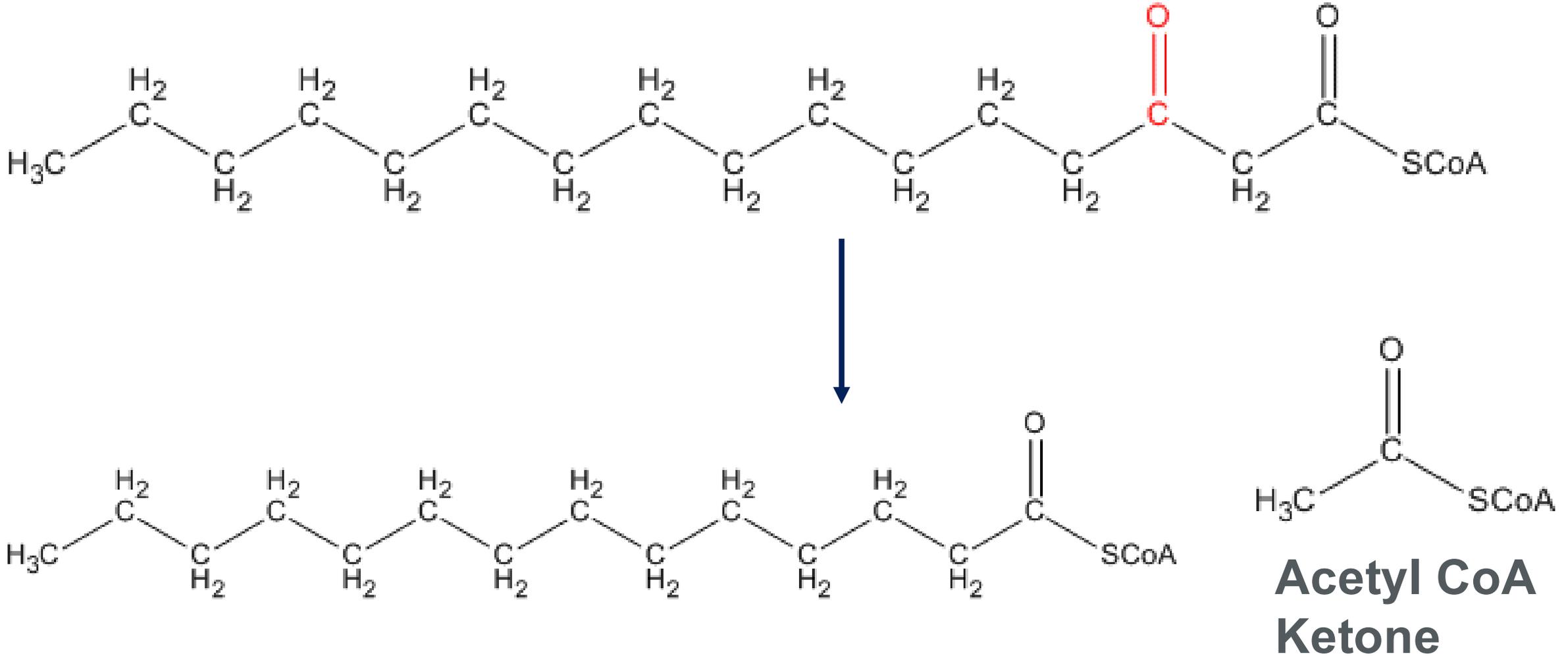


LCHAD (TFPD)





Beta-oxidation Step 4 – Thiolase



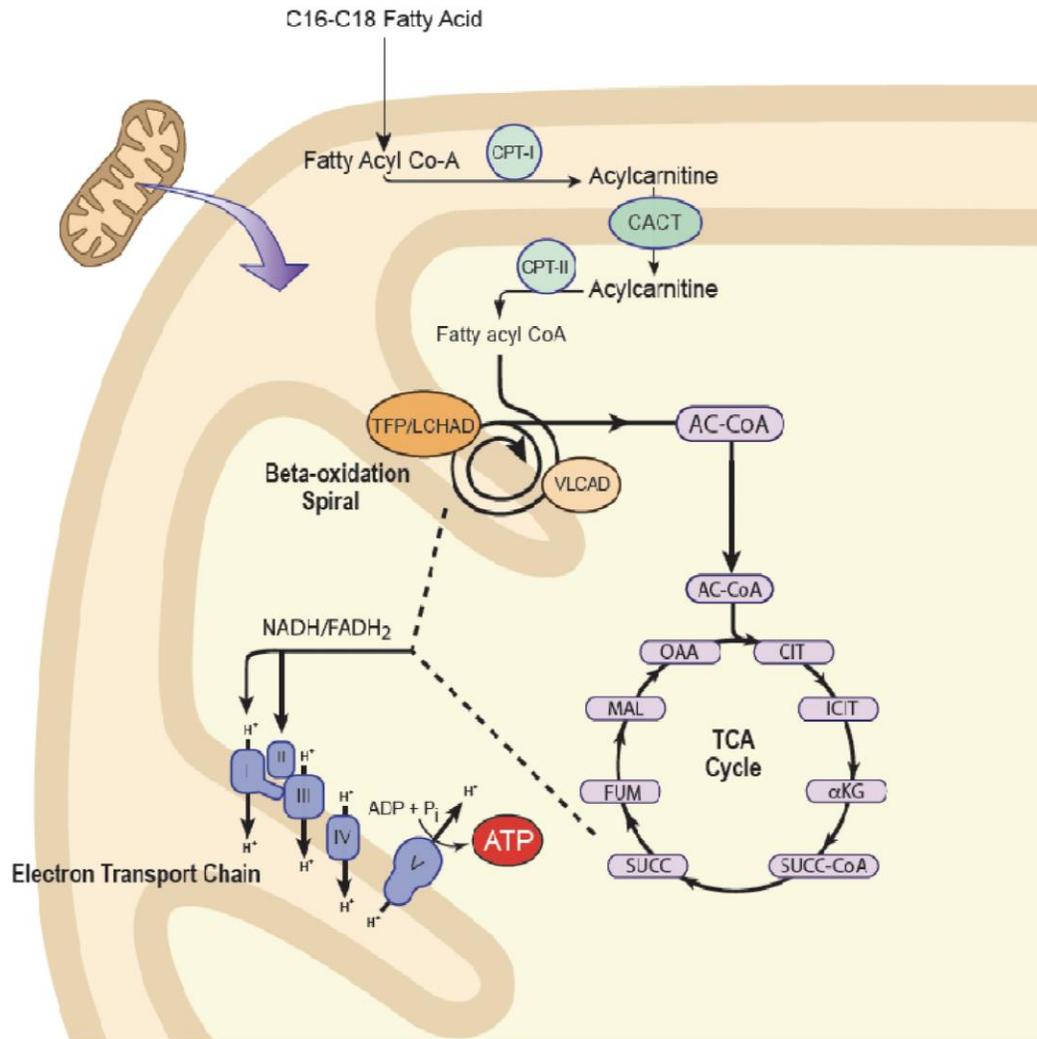


Beta Oxidation Disorders

- VLCAD Deficiency
 - Mild to Severe, Hypoglycemia, Rhabdomyolysis, Cardiomyopathy
- MCAD Deficiency
 - Hypoketotic hypoglycemia when fasting
- SCAD Deficiency
 - Significance is controversial
- LCHAD/TFP Deficiency
 - Variable severity, Hypoglycemia, Rhabdomyolysis, Retinopathy



Energy metabolism interactions

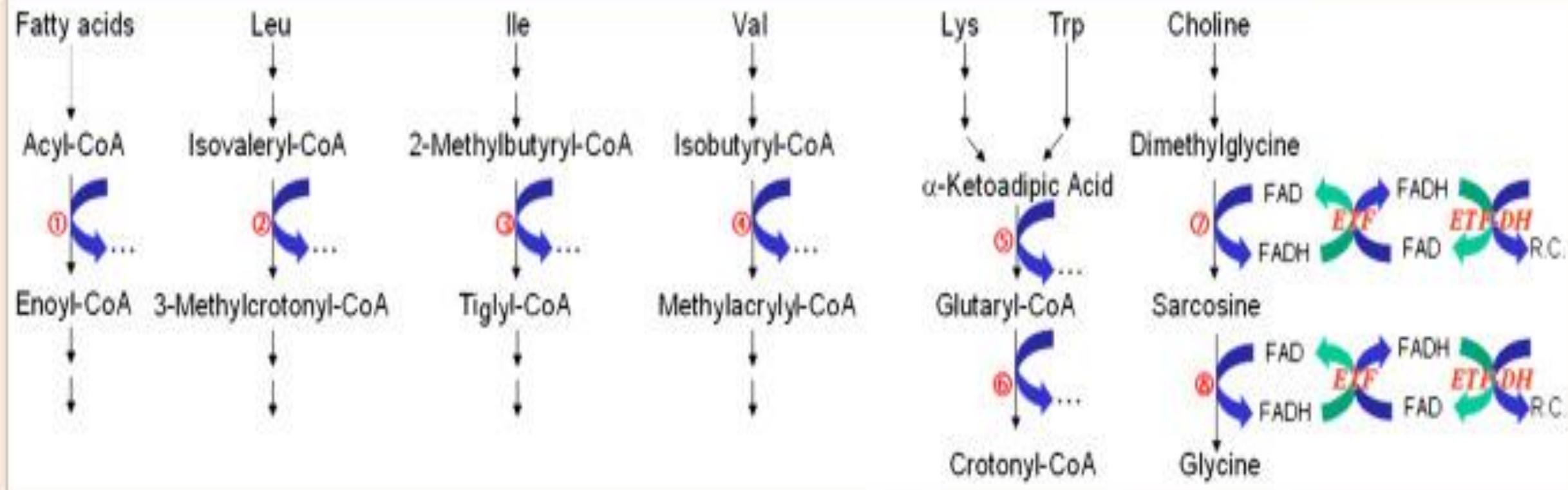


- Multiple pathways
- Functionally and physically interact
- Overlap in clinical symptoms
- Secondary symptoms may dominate clinical picture



Defects in Energy Production (MADD/GA2)

- Beta-oxidation sends electrons directly to the electron transport chain where the energy is actually made
 - AKA oxidative phosphorylation
 - Defect is in ETFCH, ETFA or ETFB
- Other acyl-CoA dehydrogenase enzymes share the same pathway
 - Glutaryl CoA dehydrogenase
 - Amino acids valine, leucine, isoleucine
 - Others
- Variable severity from neonatal lethal to adult onset muscle



① VLCAD,
MCAD,
SCAD

② IVD

③ SBCAD

④ ACAD8

⑤ α -ketoadipic DH

⑥ glutaryl-CoA DH

⑦ dimethylglycine DH

⑧ sarcosine DH



Treatment

Carnitine is a fickle lover and esterifies any FAO intermediate

Block in fat metabolism pathway



Buildup of acylcarnitines



**Evidence for cardiotoxicity
(in mice)**



Excretion of acylcarnitines



Carnitine deficiency



Decreased residual FAO



Treatment – Carnitine Cycle Disorders

- Prevent Fasting
- Supplement MCT
- Others as needed



Treatment- Long Chain FAOD

- Fasting Prevention
- Supplement MCT
- +/- Dietary Long Chain Fat Restriction
- Others as indicated

- Use of carnitine is controversial



Treatment- Medium Chain FAOD

- Fasting Prevention
- “Heart Healthy” Diet
- Occasional carnitine deficiency



Treatment MADD/GA2

- Dietary fat restriction
- Dietary protein restriction
- One or more of:
 - Riboflavin (vitamin cofactor for the ETF enzyme)
 - Coenzyme Q10
 - +/- Carnitine
- Fasting prevention



Riboflavin Tip

- Microencapsulated riboflavin is available
- Manufactured by Solace

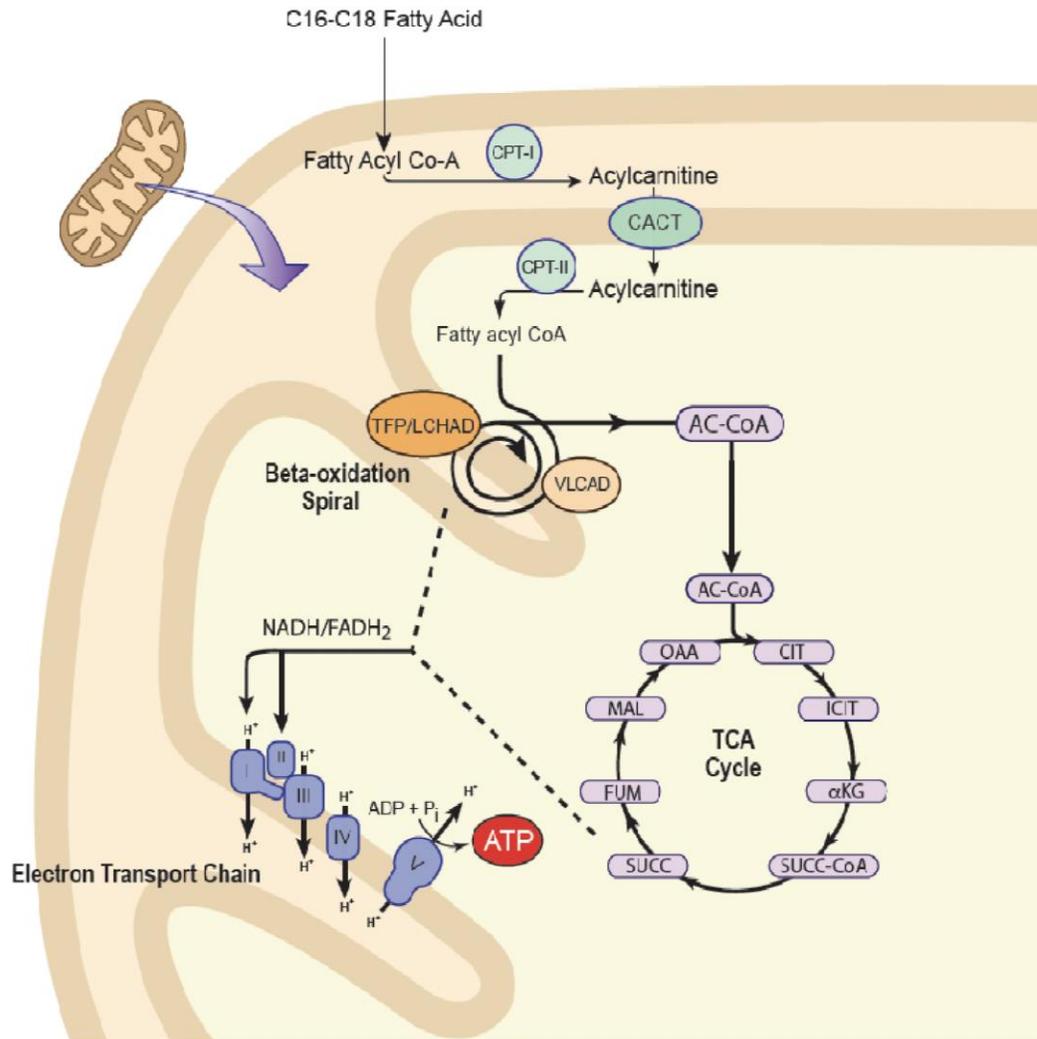


Even better MCT supplement for LCFAOD

- Triheptanoin (Doljovi)
- 7 carbon fat
- FAOD breaks the fat down down (7 carbons, 5 carbons, 3 carbons) until a 3 carbon piece is left
- This 3 carbon piece feeds metabolism by replenishing the Krebs's cycle
- Provides energy from fat metabolism plus replenishes other depleted intermediates
- Might make it easier for the body to make glucose



Energy metabolism interactions



- Multiple pathways
- Functionally and physically interact
- Overlap in clinical symptoms
- Secondary symptoms may dominate clinical picture



Thank you

Questions?

