

CYCLICAL OR RECURRENT VOMITING AND METABOLIC DISEASE

A metabolic disorder is often suspected in patients with recurrent episodes of vomiting as vomiting is a prominent feature of many inborn errors. Investigation between attacks is often demanding and there is always the concern that a disorder might be overlooked. If appropriate investigations are done *early in an attack* it is generally simpler and it is unlikely an inborn error will be missed. The history is also helpful. The episodes in cyclical vomiting are all very similar whereas in metabolic disorders the episodes are much more variable, some being mild and others being much more severe. The disorders that particularly need to be considered are any disorder associated with hyperammonaemia including urea cycle disorders and organic acidaemias. Cortisol deficiency is also included as this is easily missed in the early stages.

Please do the following investigations:

- Blood gases
- Blood lactate
- Plasma urea, electrolytes and creatinine
- Liver function tests
- Plasma ammonia
- Blood glucose
- Plasma cortisol
- Blood spot acyl carnitine profile (Guthrie card)
- Plasma aminoacids (quantitative)
- Urine ketones
- Urine organic acids and orotic acid

This should be sufficient and only occasionally will other tests be necessary.

Last reviewed Jan 2013