

## Overview

### Useful For

Diagnosis of alpha-mannosidosis

This test is **not useful for** establishing carrier status for alpha-mannosidosis.

### Genetics Test Information

Alpha-mannosidosis is an autosomal recessive lysosomal storage disorder caused by reduced or absent acid alpha-mannosidase enzyme activity.

Determining enzymatic activity is the next step of the diagnostic workup for an individual clinically suspicious for an oligosaccharidosis with a positive screening result suggestive of alpha-mannosidosis.

### Special Instructions

- [Informed Consent for Genetic Testing](#)
- [Biochemical Genetics Patient Information](#)
- [Informed Consent for Genetic Testing \(Spanish\)](#)

### Method Name

Fluorometric

### NY State Available

Yes

## Specimen

### Specimen Type

Whole Blood ACD

### Ordering Guidance

If clinically suspicious of an oligosaccharidosis, screening tests are available. Order either OLIGU / Oligosaccharide Screen, Random, Urine or LSDS / Lysosomal Disorders Screen, Random, Urine which includes a combined analysis of ceramide trihexosides, mucopolysaccharides, oligosaccharides, sulfatides, and total and free sialic acid.

### Shipping Instructions

**For optimal isolation of leukocytes, it is recommended the specimen arrive refrigerated within 6 days of collection to be stabilized.** Pre-analytical processing is performed Monday through Friday and Sunday. This test may be canceled if specimens are outside of stability when processing occurs. Collect and package specimens for arrival on days when processing is performed.

**Specimen Required****Container/Tube:****Preferred:** Yellow top (ACD solution B)**Acceptable:** Yellow top (ACD solution A)**Specimen Volume:** 6 mL**Collection Instructions:** Send specimen in original tube. **Do not aliquot.****Forms**

1. **New York Clients-Informed consent is required.** Document on the request form or electronic order that a copy is on file. The following documents are available:

-[Informed Consent for Genetic Testing](#) (T576)

-[Informed Consent for Genetic Testing-Spanish](#) (T826)

2. [Biochemical Genetics Patient Information](#) (T602)

3. If not ordering electronically, complete, print, and send a [Biochemical Genetics Test Request](#) (T798) with the specimen.

**Specimen Minimum Volume**

5 mL

**Reject Due To**

Gross hemolysis	Reject
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**Specimen Stability Information**

Specimen Type	Temperature	Time	Special Container
Whole Blood ACD	Refrigerated (preferred)	6 days	YELLOW TOP/ACD
	Ambient	6 days	YELLOW TOP/ACD

**Clinical & Interpretive****Clinical Information**

Alpha-mannosidosis is an autosomal recessive lysosomal storage disorder caused by reduced or absent acid alpha-mannosidase enzyme activity. This enzyme is involved in glycoprotein catabolism, with absent or reduced activity resulting in the accumulation of undigested mannose-containing complex oligosaccharides in the lysosomes, disrupting the normal functioning of cells.

Clinical features and severity of symptoms are widely variable within alpha-mannosidosis but, in general, the disorder is characterized by skeletal abnormalities, immune deficiency, hearing impairment, and intellectual disability. Three clinical subtypes of the disorder have been described and vary with respect to age of onset and clinical presentation. Type 1 is generally classified by a mild presentation and slow progression with onset after 10 years of age and absence of skeletal abnormalities. Type 2 is generally a more moderate form with slow progression and onset prior to 10 years of age with skeletal abnormalities and myopathy. Type 3 is the most severe form with onset in early infancy, skeletal abnormalities

such as dysostosis multiplex, and severe central nervous system involvement. Although treatment is mostly supportive and aimed at preventing complications, hematopoietic stem cell transplant has been reported to be a feasible therapeutic option. The incidence of alpha-mannosidosis is estimated at 1 in 500,000 live births.

An initial diagnostic workup may include a screening assay for several oligosaccharides in urine, OLIGU / Oligosaccharide Screen, Random, Urine. If the urine oligosaccharide screening assay is suggestive of alpha-mannosidosis, enzyme analysis of acid alpha-mannosidase can confirm the diagnosis. Molecular analysis of the *MAN2B1* gene allows for detection of a disease-causing variant in affected individuals and subsequent carrier detection in relatives (see CGPH / Custom Gene Panel, Hereditary, Next-Generation Sequencing; specify *MAN2B1* gene list ID: IEMCP-MUMNLV).

### Reference Values

> or =0.54 nmol/min/mg protein

### Interpretation

Values below 0.54 nmol/min/mg protein are consistent with a diagnosis of alpha-mannosidosis.

### Cautions

No significant cautionary statements

### Clinical Reference

1. Malm D, Nilssen O. Alpha-mannosidosis. In: Adam MP, Ardinger HH, Pagon RA, et al, eds. GeneReviews [Internet]. University of Washington, Seattle. 2001. Updated July 18, 2019. Accessed June 10, 2025. Available at [www.ncbi.nlm.nih.gov/books/NBK1396/](http://www.ncbi.nlm.nih.gov/books/NBK1396/)
2. Thomas GH. Disorders of glycoprotein degradation: alpha-mannosidosis, beta-mannosidosis, fucosidosis, and sialidosis. In: Valle DL, Antonarakis S, Ballabio A, Beaudet AL, Mitchell GA eds. The Online Metabolic and Molecular Bases of Inherited Disease. McGraw-Hill; 2019. Accessed June 10, 2025. Available at <https://ommbid.mhmedical.com/content.aspx?sectionid=225545029>
3. Mynarek M, Tolar J, Albert MH, et al. Allogeneic hematopoietic SCT for alpha-mannosidosis: an analysis of 17 patients. Bone Marrow Transplant. 2012;47(3):352-359. doi:10.1038/bmt.2011.99
4. Guffon N, Tylki-Szymanska AT, Borgwardt L, et al. Recognition of alpha-mannosidosis in paediatric and adult patients: Presentation of a diagnostic algorithm from an international working group. Mol Genet Metab. 2019;126(4):470-474. doi:10.1016/j.ymgme.2019.01.024

### Performance

#### Method Description

The deficiency of alpha-D-mannosidase is demonstrable using the artificial substrate 4-methylumbelliferyl alpha-D-mannopyranoside. (Gehler J, Cantz M, Tolksdorf M, Spranger J, Gilbert E, Drube H. Mucopolysaccharidosis. VII. Beta-glucuronidase deficiency. Humangenetik. 1974;23[2]:149-158. doi:10.1007/BF00282212; Cowan T, Pasquali M. Laboratory investigations of inborn errors of metabolism. In: Sarafoglou K, Hoffman GF, Roth KS, eds. Pediatric Endocrinology and Inborn Errors of Metabolism. 2nd ed. McGraw-Hill; 2017:1139-1158)

#### PDF Report

No

**Day(s) Performed**

Preanalytical processing: Monday through Friday, Sunday

Assay performed: Friday

**Report Available**

2 to 8 days

**Specimen Retention Time**

WBC homogenate 1 month

**Performing Laboratory Location**

Mayo Clinic Laboratories - Rochester Main Campus

**Fees & Codes****Fees**

- Authorized users can sign in to [Test Prices](#) for detailed fee information.
- Clients without access to Test Prices can contact [Customer Service](#) 24 hours a day, seven days a week.
- Prospective clients should contact their account representative. For assistance, contact [Customer Service](#).

**Test Classification**

This test was developed and its performance characteristics determined by Mayo Clinic in a manner consistent with CLIA requirements. It has not been cleared or approved by the US Food and Drug Administration.

**CPT Code Information**

82657

**LOINC® Information**

Test ID	Test Order Name	Order LOINC® Value
MANN	Alpha-Mannosidase, Leukocytes	24053-1

Result ID	Test Result Name	Result LOINC® Value
35639	Alpha-Mannosidase, Leukocytes	24053-1
35640	Interpretation (MANN)	59462-2
35641	Reviewed By	18771-6