SENATE BILL REPORT

SB 5455

AS OF JANUARY 15, 1992

Brief Description: Requiring screening of newborn infants for galactosemia.

SPONSORS: Senators Saling, West, Rinehart, Murray, Stratton, L. Smith and Anderson.

SENATE COMMITTEE ON HEALTH & LONG-TERM CARE

Staff: Sarena Seifer (786-7417)

Hearing Dates: February 12, 1991; January 15, 1992

BACKGROUND:

Galactosemia is an inherited metabolic disease resulting from an inability to digest milk sugar. To avoid illness, disability or death, affected individuals must avoid milk and foods containing milk throughout their life. Approximately one in 70,000 babies born in Washington will have galactosemia.

According to medical literature, the most severe form of galactosemia results in life threatening illness and death early in infancy. Surviving infants may suffer from physical and developmental disabilities. These symptoms are lessened by early diagnosis and treatment. Galactosemia can be detected through newborn screening tests.

The Department of Health is directed to require screening for all newborns prior to hospital discharge "for the detection of phenylketonuria and other heritable or metabolic disorders leading to mental retardation or physical defects as defined by the state board of health." Newborn screening tests for phenylketonuria and other metabolic or genetic diseases hypothyroidism, congenital (congenital hyperplasia and hemoglobinopathies including sickle cell disease) Department of Health's authorized through the Newborn Screening Program. Galactosemia screening can be performed on the same specimen collected for these other disorders.

Thirty-six states and the District of Columbia currently screen newborns for galactosemia.

SUMMARY:

Galactosemia is included in the state's policy encouraging early detection and prevention of inherited disorders resulting in developmental disabilities or physical defects. The Department of Health (DOH) is directed to require galactosemia screening tests of all newborns prior to hospital discharge.

Positive galactosemia tests must be reported to DOH by laboratories, attending physicians, hospital administrators or other parties who perform or request such tests.

Appropriation: none

Revenue: yes

Fiscal Note: requested