Fenylketonurian seulonta Suomessa [Screening for phenylketonuria in newborn in Finland]  
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Record Status  
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Citation  

Authors' objectives  
To evaluate the cost effectiveness of phenylketonuria (PKU) screening in newborns in Finland, especially regarding PKU screening targeted at infants born to non-Finnish parents.

Authors' conclusions  
Early treatment may prevent irreversible brain damage caused by PKU. Finland does not have a national screening program since PKU incidence is only 1:100 000 to 1:200 000 (ie, significantly lower than elsewhere).

The Guthrie method, fluorometry, or tandem mass spectrometry (MS/MS) are used to screen for PKU, with MS/MS being the most specific method. The Guthrie method and fluorometry were found to be cost effective in many countries. MS/MS was cost effective only when combined with screening of at least one other metabolic disease. In 2000 to 2006, infants born to immigrant parents increased from 2.3% to 3.4% of all newborns. Annual costs for screening would be 96 000 euros for these infants, and 2.7 million euros for screening all infants. Twenty hospitals (representing 80% of all births) screened for PKU in newborns with immigrant parents. A single case of PKU was found by screening, and no other cases were identified in 7 years. The cost effectiveness of both universal and selective PKU screening in Finland is dubious. Targeted screening evokes ethical questions, eg, definition and identification of ethnic origin and acceptability as a public health strategy.

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