

Panel of investigations for Motor Neurone Disease

Suspected MND-Essential Tests

Blood test	Imaging	Neurophysiology
<ul style="list-style-type: none"> • FBC • Plasma viscosity and ESR • U&Es • Creatine kinase • Calcium and phosphate • Protein and LFTs • B12 and Folate • Blood sugar • Serum protein electrophoresis • Thyroid function • Vitamin D • ANA and ANCA • HIV and Syphilis screen 	<p>Magnetic resonance imaging (MRI)</p> <ul style="list-style-type: none"> • Head • Cervical spine • Thoracic • Lumbosacral <p>Chest x-ray</p> <p>ECG</p> <p>Pulmonary function test</p>	<p>Electromyography</p> <p>Nerve conduction studies</p>

Suspected MND-Additional Tests for Atypical Presentations

Blood test	Imaging	CSF analysis	DNA analysis																	
<ul style="list-style-type: none"> • White cell enzymes (Serum hexosaminidase A & B) • Borrelia titres • Anti-GM1 ganglioside Ab's • Anti-MAG antibodies • Blood and urine lead • Tumour markers • Very long chain fatty acids(<i>adrenomyeloneuropathy</i>) • Acid alpha-1,4 glucosidase (acid maltase) [<i>Pompe's disease</i>] • Paraneoplastic antibodies(cerebellar antibodies screen) 	<p>Single Photon Emission Computed Tomography (SPECT) (Mill's syndrome)</p> <p>Base of skull imaging (CT+/-MRI)</p> <p>CT chest/abdomen/pelvis</p>	<p>Protein</p> <p>Cells</p> <p>Glucose</p> <p>Oligoclonal bands</p> <p>Cytology</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center;">Gene</th> <th style="text-align: center;">Disease</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">SOD1 gene mutations</td> <td style="text-align: center;"><i>Familial autosomal dominant MND</i></td> </tr> <tr> <td style="text-align: center;">Androgen receptor mutation</td> <td style="text-align: center;"><i>Kennedy's syndrome</i></td> </tr> <tr> <td style="text-align: center;">Spastin and other HSP-related genes</td> <td style="text-align: center;"><i>Progressive UMN syndromes</i></td> </tr> <tr> <td style="text-align: center;">Neurofilament light chain gene mutations</td> <td style="text-align: center;"><i>Charcot-Marie-Tooth type 2E</i></td> </tr> <tr> <td style="text-align: center;">SMN gene mutations</td> <td style="text-align: center;"><i>Late onset SMA (Spinal muscular atrophy)</i></td> </tr> <tr> <td style="text-align: center;">Dynactin gene mutations</td> <td style="text-align: center;"><i>Familial LMN disorder</i></td> </tr> <tr> <td style="text-align: center;">Hexosaminidase gene mutations</td> <td style="text-align: center;"><i>Juvenile or early onset MND</i></td> </tr> </tbody> </table>	Gene	Disease	SOD1 gene mutations	<i>Familial autosomal dominant MND</i>	Androgen receptor mutation	<i>Kennedy's syndrome</i>	Spastin and other HSP-related genes	<i>Progressive UMN syndromes</i>	Neurofilament light chain gene mutations	<i>Charcot-Marie-Tooth type 2E</i>	SMN gene mutations	<i>Late onset SMA (Spinal muscular atrophy)</i>	Dynactin gene mutations	<i>Familial LMN disorder</i>	Hexosaminidase gene mutations	<i>Juvenile or early onset MND</i>	
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Confirmed MND- For patients taking Riluzole

Blood test

- FBC
- U&E
- LFT

Monthly for the first 3 months, followed by 3 monthly for the following 9 months and annually thereafter.

Stop Riluzole if the ALT is 5 times the normal limit

For MNDA Leeds website and ordercom panel of investigation for LTHT