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# Sustenance the Executives of Phenylketonuria

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## Abstract

Phenylketonuria (PKU) poses a signi f cant challenge in the realm of metabolic disorders, necessitating a meticulous approach to sustenance management. This genetic condition hampers the body's ability to metabolize phenylalanine, an essential amino acid. Untreated, elevated phenylalanine levels can lead to severe neurological impairment.

This abstract delves into the intricacies of sustenance management for individuals with PKU. The cornerstone of this management is a strict low-protein diet, limiting phenylalanine intake while ensuring adequate nutrition. Innovative therapeutic approaches, such as medical foods and pharmacological interventions, play pivotal roles in optimizing metabolic control. The synthesis of dietary management with emerging technologies and personalized medicine is explored, highlighting the potential for tailored interventions. The challenges and advancements in PKU sustenance management are discussed, emphasizing the need for a multidisciplinary approach involving healthcare professionals, nutritionists, and patients. Through a comprehensive review of current literature and case studies, this abstract aims to contribute to the evolving landscape of PKU sustenance management, o f ering insights into e f ective strategies and future directions for improving the quality of life for individuals a f ected by this metabolic disorder.

**Keywords:** P ; D ; M ; P ; P

## Introduction

P (PK ) . 1 PK . E PK 2 PK . I PK . B PK .

A PK . O PK . I PK 3 F PK .

B PK 4 PK .

## Methods and Materials

P (PK ), 5 PK P PK . A N PK 6 .

C P M , MEDLINE, G 7 PK . I F PK

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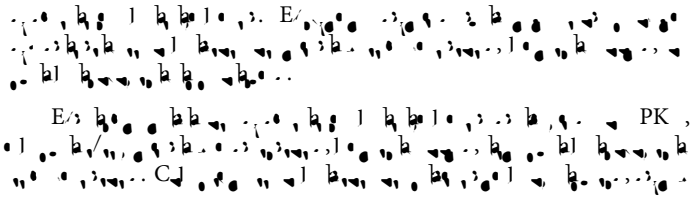

## Acknowledgement

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## Conflict of Interest

N

### References

1. Walker R, Belani KG, Braunlin EA, Bruce IA, Hack H, et al. (2013) Anaesthesia and airway management in mucopolysaccharidosis. J Inherit Metab Dis 36: 211-219.
2. Hampe CS, Eisengart JB, Lund TC, Orchard PJ, Swietlicka M, et al. (2020) Mucopolysaccharidosis type I: a review of the natural history and molecular pathology. Cells 9: 1838.
3. Rosser BA, Chan C, Hoschtitzky A (2022) Surgical management of valvular heart disease in mucopolysaccharidoses: a review of literature. Biomedicines 10: 375.
4. Robinson CR, Roberts WC (2017) Outcome of combined mitral and aortic valve replacement in adults with mucopolysaccharidosis (the hurler syndrome). Am J Cardiol 120: 2113-2118.
5. Dostalova G, Hlubocka Z, Lindner J, Hulkova H, Poupetova H, et al. (2018) Magner.Late diagnosis of mucopolysaccharidosis type IVB and successful aortic valve replacement in a 60-year-old female patient. Cardiovasc Pathol 35: 52-56.
6. Gabrielli O, Clarke LA, Bruni S, Coppa GV (2010) Enzyme-replacement therapy in a 5-month-old boy with attenuated presymptomatic MPS I: 5-year follow-up. Pediatrics 125: e183-e187.
7. Gorla R, Rubbio AP, Oliva OA, Garatti A, Marco FD, et al. (2021) Transapical aortic valve-in-valve implantation in an eM " Coppa + = Pediatrics 125: e183-e187.
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