Our laboratory has been working on the biochemical diagnosis of MPS for the past 10 years. During this extensive study, it has been found that MPS III is the most prevalent MPS type in our population. Hence an in depth study of MPS III was undertaken. The present study has covered a lot of aspects of MPS III A and a lot more remains to be covered. The future research should be in the following lines.

a. Enzyme assays should be standardized for MPS IIIC and MPS III D. So that all 4 MPS III subtypes can be identified directly by enzyme assays and time consuming analysis can be avoided.

b. The carrier detection in the case of MPS III B should be checked with a large study group. So that the assay of α-N-acetyl glucosaminidase can be used with confidence in the detection of MPS III B carriers.

c. Since there is no cure for this disorder at present, molecular characterization of this disorder, which has been initiated in our laboratory, should be continued more extensively to detect all prevalent mutations in our population. This will help not only in genotype-phenotype correlation, but also in the area of patient selection for therapy protocols.

d. These studies should also be extended to carrier detection of MPS III C and III D and also to prenatal diagnosis since at present there is no other way to alleviate human suffering.