Differential diagnoses to rule out MPS [1,2]

Dysostosis multiplex	Always consider MPS. Also consider other genetic storage disorders (ie, mucolipidoses, multiple sulfatase deficiency, carbohydrate deficient glycoprotein syndrome, GM1 gangliosidosis, and geleophysic dysplasia).
Nonclassical features	Consider alongside skeletal dysplasias such as MED, SED, and bilateral Legg-Calvé-Perthes disease. Other common misdiagnoses may include pseudoachondroplasia and Dyggve-Melchior-Clausen dysplasia.
Isolated features	Isolated skeletal features, such as kyphosis or scoliosis, should prompt consideration of MPS. Look for additional signs and symptoms of MPS.

Abbreviations: MED, multiple epiphyseal dysplasia; MPS, mucopolysaccharidosis; SED, spondyloepiphyseal dysplasia.

References: **1.** Lachman R, Martin KW, Castro S, Basto MA, Adams A, Teles EL. Radiologic and neuroradiologic findings in the mucopolysaccharidoses. *J Pediatr Rehabil Med*. 2010;3(2):109-118. doi:10.3233/PRM-2010-0115. **2.** Lachman RS, Burton BK, Clarke LA, et al. Mucopolysaccharidosis IVA (Morquio A syndrome) and VI (Maroteaux-Lamy syndrome): under-recognized and challenging to diagnose. *Skeletal Radiol*. 2014;43(3):359-369. doi:10.1007/s00256-013-1797-y.