

-.RACHEL BALM (NPIN20) **ADVANCED FUNCTIONAL MEDICINE 4 ANTONY ST PALMYRA WA 6157** 

#### MAHLEIA-LUCA ARANCIBIA 07-Jan-2015 **Female**

12 KANUMBRA STREET **COORPAROO QLD 4151** 

LAB ID: 3954142 UR NO.: 6209106 Collection Date: 29-Jan-2024 Received Date: 02-Feb-2024



#### COMPLETE MICROBIOME MAPPING

General Macroscopic Description						
	Result	Markers				
Stool Colour	Brown	<b>Colour</b> - Brown is the colour of normal stool. Other colours may indicate abnormal gut health.				
Stool Form	Unformed	<b>Form</b> -Sample form is categorised using the Bristol stool chart. A comment on stool appearance can be found in the comments section.				
Mucous	Not Detected	<b>Mucous</b> - Mucous production may indicate the presence of an infection and/or inflammation.				
Occult Blood	Negative	<b>Blood (Macro)</b> - The presence of blood in the stool may be the result of several causes besides colorectal bleeding, including				

hemorrhoids or gastrointestinal infection.

Short Chain Fatty Acids	Result	Range	Units	
Short Chain Fatty Acids, Beneficial	43.8	> 13.6	umol/g	
Butyrate	22.3	10.8 - 33.5	%	
Acetate	57.8	44.5 - 72.4	%	
Propionate	16.6	0.0 - 32.0	%	•
Valerate	3.3	0.5 - 7.0	%	
IT Functional Markers	Result	Range	Units	
Calprotectin.	20.0	0.0 - 50.0	ug/g	
Pancreatic Elastase	240.0	> 200.0	ug/g	•
Secretory (slgA)	101.6 *L	510.0 - 2040	.0 ng/mL	

#### Zonulin 0.0 - 107.0ng/mL 31.7 Beta glucuronidase 1416.9 368.0 - 6266.0 U/g **Steatocrit** <1.0 0.0 - 15.0% 0.0 - 100.0 a-Transglutaminase IgA <20 units/L

#### Microbiome Mapping Summary

# **Parasites & Worms** Dientamoeba fragilis.

#### Bacteria & Viruses

Klebsiella species Fusobacterium species

# **Fungi and Yeasts**

Key Phyla Microbiota

Firmicutes:Bacteroidetes Ratio

0.71 < 1.00 **RATIO** 

Relative Commensal Abundance of the 6 Phyla groups can be found on page 4 of this report

Complete Microbiome Map Lab ID: 3954142 Patient Name: MAHLEIA-LUCA ARANCIBIA





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Parasites and Worms.	Result	Range	Units		
Parasitic Organisms					
Cryptosporidium species	<dl< td=""><td>&lt; 1.0</td><td>x10^5 org/g</td><td></td><td></td></dl<>	< 1.0	x10^5 org/g		
Entamoeba histolytica.	<dl< td=""><td>&lt; 1.0</td><td>x10^5 org/g</td><td></td><td></td></dl<>	< 1.0	x10^5 org/g		
Giardia intestinalis	<dl< td=""><td>&lt; 1.0</td><td>x10^5 org/g</td><td></td><td></td></dl<>	< 1.0	x10^5 org/g		
Blastocystis hominis.	<dl< td=""><td>&lt; 1.0</td><td>x10^5 org/g</td><td></td><td></td></dl<>	< 1.0	x10^5 org/g		
Dientamoeba fragilis.	<i>2.6</i> *H	< 1.0	x10^5 org/g		
Endolimax nana	<dl< td=""><td>&lt; 1.0</td><td>x10^5 org/g</td><td></td><td></td></dl<>	< 1.0	x10^5 org/g		
Entamoeba coli.	<dl< td=""><td>&lt; 5.0</td><td>x10^5 org/g</td><td></td><td></td></dl<>	< 5.0	x10^5 org/g		
Pentatrichomonas hominis	<dl< td=""><td>&lt; 1.0</td><td>x10^5 org/g</td><td></td><td></td></dl<>	< 1.0	x10^5 org/g		
Worms					
Ancylostoma duodenale, Roundwor	m Not Dete	ected			
Ascaris lumbricoides, Roundworm	Not Dete	ected	Necator an	nericanus, Hookworm	<b>Not Detected</b>
Trichuris trichiura Whinworm	Not Deta	acted	Entorobius	vormioularia Binwarm	Not Detected

Trichuris trichiura, Whipworm Not Detected **Enterocytozoon spp Not Detected** Strongyloides spp, Roundworm **Not Detected** 

Enterobius vermicularis, Pinworm Not Detected Hymenolepis spp, Tapeworm Taenia species, Tapeworm

**Not Detected Not Detected** 

Comment: Not Detected results indicate the absence of detectable DNA in the sample for the worms reported. NOTE: Reflex testing is performed on clinically indicated samples

portunistic Bacteria/Overgrow	th Result	Range	Units
Bacillus species.	<dl< th=""><th>&lt; 1.00</th><th>x10^4 CFU/g</th></dl<>	< 1.00	x10^4 CFU/g
Enterococcus faecalis	<dl< th=""><td>&lt; 1.00</td><td>x10^5 CFU/g</td></dl<>	< 1.00	x10^5 CFU/g
Enterococcus faecium	<dl< th=""><td>&lt; 1.00</td><td>x10^5 CFU/g</td></dl<>	< 1.00	x10^5 CFU/g
Morganella species	<dl< th=""><td>&lt; 1.00</td><td>x10^5 CFU/g</td></dl<>	< 1.00	x10^5 CFU/g
Pseudomonas species	<dl< th=""><td>&lt; 1.00</td><td>x10^4 CFU/g</td></dl<>	< 1.00	x10^4 CFU/g
Pseudomonas aeruginosa.	<dl< th=""><td>&lt; 3.00</td><td>x10^4 CFU/g</td></dl<>	< 3.00	x10^4 CFU/g
Staphylococcus species	<dl< th=""><td>&lt; 1.00</td><td>x10^3 CFU/g</td></dl<>	< 1.00	x10^3 CFU/g
Staphylococcus aureus	<dl< th=""><td>&lt; 5.00</td><td>x10^3 CFU/g</td></dl<>	< 5.00	x10^3 CFU/g
Streptococcus species	2.16	< 3.00	x10^6 CFU/g
Methanobrevibacter smithii	<dl< th=""><td>&lt; 3.50</td><td>x10^5 CFU/g</td></dl<>	< 3.50	x10^5 CFU/g
Desulfovibrio piger	<dl< th=""><td>&lt; 18.00</td><td>x10^7 CFU/g</td></dl<>	< 18.00	x10^7 CFU/g
Enterobacter cloacae complex.	0.19	< 5.00	x10^5 CFU/g
otential Autoimmune Triggers			
Citrobacter species.	<dl< th=""><td>&lt; 5.00</td><td>x10^4 CFU/g</td></dl<>	< 5.00	x10^4 CFU/g
Citrobacter freundii.	3.47	< 5.00	x10^4 CFU/g
Klebsiella species	<i>8.68</i> *H		x10^3 CFU/g
Klebsiella pneumoniae.	0.70	< 5.00	x10^5 CFU/g
Prevotella copri	<dl< th=""><td>&lt; 1.00</td><td>x10^9 CFU/g</td></dl<>	< 1.00	x10^9 CFU/g
Proteus species	<dl< th=""><td>&lt; 5.00</td><td>x10^5 CFU/g</td></dl<>	< 5.00	x10^5 CFU/g
Proteus mirabilis.	<dl< th=""><td>&lt; 1.00</td><td>x10^4 CFU/g</td></dl<>	< 1.00	x10^4 CFU/g
Fusobacterium species	<i>10.56</i> *H	< 10.00	x10^4 CFU/g
ngi & Yeast	Result	Range	Units
Candida species.	<dl< th=""><td>&lt; 5.00</td><td>x10^5 CFU/g</td></dl<>	< 5.00	x10^5 CFU/g
Candida albicans.	<dl< th=""><td>&lt; 5.00</td><td>x10^4 CFU/g</td></dl<>	< 5.00	x10^4 CFU/g
Geotrichum species.	<dl< th=""><td>&lt; 3.00</td><td>x10^2 CFU/g</td></dl<>	< 3.00	x10^2 CFU/g
Saccharomyces cerevisiae.	<dl< th=""><td>&lt; 3.00</td><td>x10^3 CFU/g</td></dl<>	< 3.00	x10^3 CFU/g
	<dl< th=""><td>&lt; 1.00</td><td>x10^3 CFU/g</td></dl<>	< 1.00	x10^3 CFU/g



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Bacterial Pathogens	Result	Range	Units
Aeromonas hydrophila.	<dl< th=""><td>&lt; 1.00</td><td>x10^3 CFU/g</td></dl<>	< 1.00	x10^3 CFU/g
Campylobacter species.	<dl< th=""><td>&lt; 1.00</td><td>x10^5 CFU/g</td></dl<>	< 1.00	x10^5 CFU/g
C. difficile, Toxin A	<dl< th=""><td>&lt; 1.00</td><td>x10^4 CFU/g</td></dl<>	< 1.00	x10^4 CFU/g
C. difficile, Toxin B	<dl< th=""><td>&lt; 1.00</td><td>x10^4 CFU/g</td></dl<>	< 1.00	x10^4 CFU/g
Enterohemorrhagic E. coli	<dl< th=""><td>&lt; 1.00</td><td>x10^5 CFU/g</td></dl<>	< 1.00	x10^5 CFU/g
Enteroinvasive E. coli/Shigella	<dl< th=""><td>&lt; 1.00</td><td>x10^3 CFU/g</td></dl<>	< 1.00	x10^3 CFU/g
Enterotoxigenic E. coli LT/ST	<dl< th=""><td>&lt; 1.00</td><td>x10^5 CFU/g</td></dl<>	< 1.00	x10^5 CFU/g
Shiga-like Toxin E. coli stx1	<dl< th=""><td>&lt; 1.00</td><td>x10^4 CFU/g</td></dl<>	< 1.00	x10^4 CFU/g
Shiga-like Toxin E. coli stx2	<dl< th=""><td>&lt; 1.00</td><td>x10^4 CFU/g</td></dl<>	< 1.00	x10^4 CFU/g
Salmonella species.	<dl< th=""><td>&lt; 1.00</td><td>x10^5 CFU/g</td></dl<>	< 1.00	x10^5 CFU/g
Vibrio species.	<dl< th=""><td>&lt; 1.00</td><td>x10^4 CFU/g</td></dl<>	< 1.00	x10^4 CFU/g
Yersinia species.	<dl< th=""><td>&lt; 1.00</td><td>x10^5 CFU/g</td></dl<>	< 1.00	x10^5 CFU/g
Helicobacter pylori	<dl< th=""><td>&lt; 1.0</td><td>x10^3 CFU/g</td></dl<>	< 1.0	x10^3 CFU/g

#### Comment: Helico Pylori virulence factors will be listed below if detected POSITIVE

H.pylori Virulence Factor, babA	Not Detected	H.pylori Virulence Factor, cagA	Not Detected
H.pylori Virulence Factor, dupA	Not Detected	H.pylori Virulence Factor, iceA	Not Detected
H.pylori Virulence Factor, oipA	Not Detected	H.pylori Virulence Factor, vacA	<b>Not Detected</b>
H.pylori Virulence Factor, virB	Not Detected	H.pylori Virulence Factor, virD	Not Detected

Units

Viral Pathogens	Result Range		
Adenovirus 40/41	Not Detected		
Norovirus GI/II	Not Detected		
Rotavirus A	Not Detected		
Sapovirus (I,II,IV,V)	Not Detected		
Astrovirus (hAstro)	Not Detected		

Normal Bacterial GUT Flora	Result	Range	Units	
Bacteroides fragilis	15.0	1.6 - 250.0	x10^5 CFU/g	
Bifidobacterium species	6546.0	> 6.7	x10^5 CFU/g	
Bifidobacterium longum	25.7	> 5.2	x10^5 CFU/g	
Enterococcus species	10.9	1.9 - 2000.0	x10^3 CFU/g	•
Escherichia species	2464.4	3.7 - 3800.0	x10^4 CFU/g	
Lactobacillus species	104.3	8.6 - 6200.0	x10^3 CFU/g	•
Lactobacillus rhamnosus	12.0	8.3 - 885.0	x10^3 CFU/g	•
Clostridium species	26.5	5.0 - 50.0	x10^7 CFU/g	
Oxalobacter formigenes	<dl *l<="" th=""><th>&gt; 5.00</th><th>x10^6 CFU/g</th><th></th></dl>	> 5.00	x10^6 CFU/g	
Akkermansia muciniphila	<i>54.67</i> *H	1.00 - 50.00	x10^7 CFU/g	•
Faecalibacterium prausnitzii	274.0	200.0 - 3500.0	) x10^6 CFU/g	•

#### Methodology:

GIT Functional markers performed by GCMS, EIA, FEIA.

Bacteriology, Virology, Fungi, Parasites & Worms performed by PCR, qPCR.

<dl = result below detectable limit.  $^*H$  = Result greater than the reference range.  $^*L$  = Result less than the reference range



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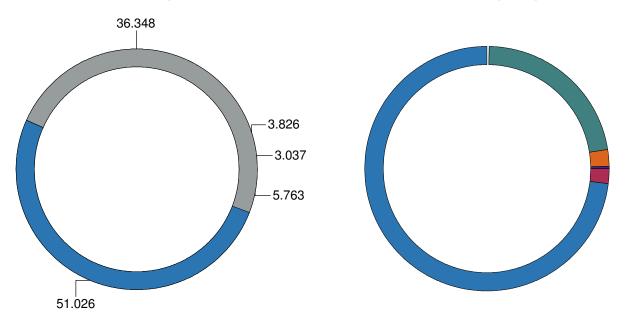
#### Introduction:

Your gut microbiome is a collective name for the 40 trillion cells and up to 1000 microbial species that include bacteria, viruses, fungi, parasites, and archaea and reside in our gut. The number of gut bacterial cells is approximately equal to the total number of human cells in our body, so if we consider only cell counts, we are only about half human. In terms of gene counts, the microbiome contains about 200 times more genes than the human genome, making bacterial genes responsible for over 99% of our body's gene content! Of all the microbial communities in the human body, the gut microbiome is by far the most dense, diverse, and physiologically important ecosystem to our overall health.

Re	lative Commensal Abunda	Range	Units	
	Bacteroidetes Phylum	51.026	50.000 - 95.000	%
	Firmicutes Phylum	36.348	3.500 - 40.000	%
	Actinobacteria Phylum	<i>5.763</i> *H	0.001 - 4.818	%
	Proteobacteria Phylum	3.826	0.500 - 12.500	%
	Verrucomicrobia Phylum	<i>3.037</i> *H	0.000 - 2.400	%
	Euryarchaeota Phylum	0.000	0.000 - 0.017	%

#### Your Phyla:

#### **Healthy Phyla:**



#### References

NOTE: Relative abundance reference ranges have been based on a healthy population study.

King CH, et., al. (2019) Baseline human gut microbiota profile in healthy people and standard reporting template. PLoS One. 2019 Sep 11;14(9):e0206484.



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#### Pathogen Summary:

#### **Macroscopy Comment**

BROWN coloured stool is considered normal in appearance.

 ${\tt UNFORMED/LIQUID} \ \ {\tt stools} \ {\tt may} \ {\tt indicate} \ {\tt the} \ {\tt presence} \ {\tt of} \ {\tt infection} \ {\tt and/or} \ {\tt inflammation}.$ 

Consider dysbiosis, food sensitivity, high dose vitamin C and magnesium, infection, intestinal permeability, laxative use, malabsorption, maldigestion, stress. Other causes: bacterial, fungal, viral and other parasitic infections.

Treatment:

- Investigate and treat possible underlying cause.
- Assess other gut markers (e.g pH, pancreatic elastase 1, etc).

Faecal Occult Blood Negative:

Faecal occult blood has not been detected in this specimen. If the test result is negative and clinical symptoms persist, additional follow-up testing using other clinical methods is recommended.

#### **Metabolism Comment**

In a healthy gut Short Chain Fatty Acids (SCFAs) exhibited in the following proportions; Butyrate, Acetate, Propionate (16%:60%:24%).

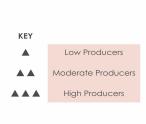
The primary SCFAs butyrate, propionate and acetate are produced by predominant commensal bacteria via fermentation of soluble dietary fibre and intestinal mucus glycans.

Key producers of SCFAs include Faecalibacterium prausnitzii, Akkermansia mucinphila, Bacteroides fragilis, Bifidobacterium, Clostridium and Lactobacillus Spp.

The SCFAs provide energy for intestinal cells and regulate the actions of specialised mucosal cells that produce anti-inflammatory and antimicrobial factors, mucins that constitute the mucus barriers, and gut active peptides that facilitate appetite regulation and euglycemia. Abnormal SCFAs may be associated with dysbiosis, intestinal barrier dysfunction and inflammatory conditions.

#### **SCFA PRODUCTION TABLE**

BACTERIA	BUTYRATE	PROPRIONATE	ACETATE
Akkermansia muciniphila		<b>A A A</b>	<b>A A</b>
Anaerostipes caccae	**		
Bacteroides spp.		<b>A A A</b>	
Bifidobacterium spp.		<b>A</b>	<b>A A A</b>
Blautia obeum		<b>A A</b>	**
Coprococcus eutactus	<b>A</b>		
Escherichia coli			<b>A</b>
Eubacterium rectale	<b>A A</b>		
Faecalibacterium prausnitzii	**		
Lactobacillus spp.	<b>A</b>	<b>A</b>	<b>A</b>
Roseburia homini	<b>A A</b>		
Ruminococcus bromii	<b>A</b>		<b>A</b>
Subdoligranulum variabile	<b>A</b>		





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#### **GIT Markers Comment**

PANCREATIC ELASTASE: Normal exocrine pancreatic function.

Pancreatic Elastase reflects trypsin, chymotrypsin, amylase and lipase activity.

This test is not affected by supplements of pancreatic enzymes.

Healthy individuals should be producing >500 ug/g of PE-1 under normal/healthy conditions.

PE-1 levels between 200 - 500 ug/g may indicate suboptimal production.

PE-1 levels <200 ug/g indicate clear inadequate production.

The clinician should therefore consider digestive enzyme supplementation if one or more of the following conditions is present: Loose watery stools, Undigested food in the stools, Post-prandial abdominal pain, Nausea or colicky abdominal pain, Gastroesophageal reflux symptoms, Bloating or food intolerance.

Testing performed by chemiluminescence immunosassay (CLIA).

#### CALPROTECTIN Normal:

Faecal calprotectin values <50 ug/g are not indicative of inflammation in the gastrointestinal tract. Subjects with low faecal calprotectin levels normally do not need to be further investigated by invasive procedures. In patients with strong clinical indications of intestinal inflammation, repeat testing may be useful.

Test performed by Phadia EliA Fluorescence enzyme immunoassay (FEIA).

#### LOW SECRETORY IGA:

Secretory IgA represents the first line of defence of the gastrointestinal mucosa and is central to the normal function of the gastrointestinal tract as an immune barrier.

Secretory IgA binds to invading microorganisms and toxins and entrap them in the mucus layer or within the epithelial cells, so inhibiting microbial motility, agglutinating the organisms, and neutralising their exotoxins and then assist in their harmless elimination from the body in the faecal flow. sIgA also 'tags' food as acceptable, so low sIgA leads to increased sensitivity to foods. Several studies link stress and emotionality with levels of sIgA. Production is adversely affected by stress, which is mediated by cortisol levels.

Often low levels of Secretory IgA correlates with low beneficial flora levels and an increase in pathogenic and parasitic organism being present.

Treatment: Investigate the root cause and rule out parasitic organisms or pathogenic bacteria. Consider the use of probiotics (saccharomyces boulardii), choline, essential fatty acids, glutathione, glycine, glutamine, phosphatidylcholine, Vitamin C and Zinc which are all required for efficient production of Secretory IgA.

PLEASE NOTE: A low Secretory IgA should be reviewed in conjunction with the stool formation. An artefactually low level may be due to fluid dilution effects in a watery or unformed/loose stool sample.

#### ZONULIN NORMAL:

Zonulin is a protein that modulates intestinal barrier function. This results is considered normal.

#### beta-GLUCORONIDASE NORMAL:

B-Glucuronidase is considered normal and is within reference range.

#### **Parasites/Worms Comment**

#### ELEVATED DIENTAMOEBA FRAGILIS LEVEL:

Dientamoeba fragilis appears to be extremely common and may have a cosmopolitan distribution, although there are large variations in prevalence. Dientamoeba fragilis has been linked to intestinal symptoms, especially in children. The most common symptoms associated with this organism are abdominal pain, intermittent diarrhoea, bloating and anorexia.

#### TREATMENT SUGGESTIONS:

Mild symptoms are self-limiting.

If treatment is warranted, metronidazole for 10 days or a single 2g dose of Tinidazole may be used. Tetracycline has also proven effective in adults.

Rule out allergy to above medication before prescribing/taking. Consult ID specialist if patient is showing severe symptoms or immunocompromised.

#### **Opportunistic Bacteria Comment**

METHANOBREVIBACTER SMITHII:

PHYLUM: Euryarchaeota

**DESCRIPTION:** 



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Methanobrevibacter smithii is a methane-producing microbe that plays an important role in the gut ecosystem by facilitating carbohydrate fermentation and production of short-chain fatty acids by commensal bacteria. Approximately 70% of the healthy cohort has below detectable levels of Methanobrevibacter smithii.

#### **Potential Autoimmune Comments**

KLEBSIELLA SPECIES ELEVATED:

PHYLUM: Proteobacteria

#### **DESCRIPTION:**

Klebsiella is a genus of Gram-negative, oxidase-negative, rod-shaped bacteria that is ubiquitous in the environment and part of the normal intestinal flora. However, they can also behave as opportunistic human pathogens. Overgrowth may cause diarrhea, gas, abdominal pain, and bloating. Klebsiella may cause histamine release and increased intestinal inflammatory activity. It also may be associated with antibiotic-associated haemorrhagic colitis.

#### TREATMENT SUGGESTIONS:

A practitioner may take into consideration a range of patient factors and symptoms to determine if treatment is necessary. Klebsiella appears to thrive in individuals on a high starch diet. Avoiding carbohydrates such as rice, potatoes, flour products and sugary foods may reduce the amount of Klebsiella in the gut. Resistance to common antibiotics is common and the use of herbal antimicrobials oregano (Origanum vulgare), sage (Salvia officinalis) or thyme (Thymus vulgaris) may be effective.

#### FUSOBACTERIUM SPECIES ELEVATED:

PHYLUM: Fusobacteriota

#### DESCRIPTION:

Fusobacterium species are gram-negative bacteria and are common members of the human oral and faecal microbiome. It has been demonstrated to promote the release of intestinal inflammatory factors and disrupt the intestinal barrier function. As such F. nucleatum elevation may contribute to the etiology of some gastrointestinal disorders, such as appendicitis, colon cancer, and inflammatory bowel disease (IBD). It may also induce an increase in secretory IgA and a decrease in beneficial bacteria levels such as Lactobacillus. Review this level with faecal calprotectin.

TREATMENT SUGGESTIONS: If treatment is warranted, effective antibiotics may include metronidazole or erythromycin. The use of herbal antimicrobials (Tea polyphenols- green and black tea extracts and peppermint) and probiotic treatment may also be effective. Rule out allergy to above medication before prescribing/taking.



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#### **Phyla Microbiota Comment**

ACTINOBACTERIA (PHYLUM) ELEVATED:

#### DESCRIPTION

Actinobacteria are a phylum of gram-positive bacteria and although representing a small percentage of gastrointestinal flora, are pivotal in the maintenance of gut homeostasis. Bifidobacterium is the most common species found in the gastrointestinal tract and are widely used as a probiotic, demonstrating beneficial effects in many pathological conditions and helps maintain the mucosal barrier and reduce lipopolysaccharide in the intestine. Increased actinobacteria colonisation is usually seen with probiotic use and may be associated with depressive disorders.

TREATMENT SUGGESTIONS: Probiotic use and dietary modification use my assist in the rebalancing of microbial flora.

VERRUCOMICROBIA (PHYLUM) ELEVATED:

#### **DESCRIPTION:**

Verrucomicrobia is a phylum of Gram-negative bacteria that contains only a few described species, found in the environment and gastrointestinal tract.

Akkermansia spp. is involved in gut membrane integrity and may be increased with polyphenols and prebiotics.

Verrucomicrobia aid in glucose homeostasis of the human gut and have anti-inflammatory properties that further aid in intestinal health.

TREATMENT SUGGESTIONS: Probiotic use and dietary modification use may assist in the rebalancing of microbial flora.

#### **Normal Bacterial Flora Comment**

LACTOBACILLUS SPECIES LOW NORMAL:

PHYLUM: Firmicutes

#### **DESCRIPTION:**

Lactobacillus species is below average.

Lactobacillus is a genus of Gram-positive rod-shaped, non-spore-forming bacteria which constitute a significantly important component of the human gastrointestinal system.

Lactobacillus exhibits a mutualistic relationship with the human body, as it protects the host against potential invasions by pathogens, and in turn, the host provides a source of nutrients. Lactobacilli are among the most common probiotic found in food such as yogurt, and it is diverse in its application to maintain gut health and to help treat ailments clinically such as diarrhea and obesity.

Lactobacillus species promote the anti-inflammatory response, thereby supporting the improvement of symptoms pertaining to asthma, chronic obstructive pulmonary disease, neuroinflammatory diseases, cardiovascular diseases, inflammatory bowel disease (IBD) and chronic infections in patients. Reduced levels increase the risk of infections and inflammation. Studies have also revealed that chronic psychological stress and alcohol use may be associated with a decrease in Lactobacillus species, as well as antibiotic / medication use.

TREATMENT SUGGESTIONS: Treatment may involve the use of Lactobacillus containing probiotics and treatment of any intestinal infections.

#### OXOLOBACTER FORMIGENES LOW:

PHYLUM: Proteobacterium

#### DESCRIPTION:

Oxalobacter formigenes is a Gram negative oxalate-degrading anaerobic bacterium. Oxolate is formed in the liver by amino acid catabolism as well as present in a wide range of foods including tea, coffee, chocolate and certain fruits and vegetables. High concentration of oxalate in the urine is related to the potential formation of calcium oxalate kidney stones. Oxolobacter Formigenes is the main known bacterial species involved in oxalate degradation in the gut and maintains oxalate homeostasis. Levels of O. Formigenes tends to decrease with age as well as with the use of antibiotics or other drugs. Low levels may be associated with calcium oxide stone formation, inflammatory bowel disease or Crohn's.

#### TREATMENT SUGGESTIONS:

Treatment options include probiotic treatment and low oxalate diet modification. Urinary oxalate levels may also need to be



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investigated.

AKKERMANSIA MUCINIPHILA ELEVATED:

PHYLUM: Verrucomicrobia

#### MAHLEIA-LUCA ARANCIBIA 07-Jan-2015 Female

12 KANUMBRA STREET COORPAROO QLD 4151

LAB ID : 3954142 UR NO. : 6209106 Collection Date : 29-Jan-2024 Received Date: 02-Feb-2024



3954142

#### **DESCRIPTION:**

Akkermansia muciniphila is a Gram-negative, strictly anaerobic, non-motile bacterium, often considered a human intestinal symbiont. There is growing evidence to suggest that the prevalence of this bacteria is associated with intestinal homeostasis, immunity, and a healthy gut. However, elevated colonisation may be associated with intestinal inflammation.

TREATMENT SUGGESTIONS: Treatment may involve the use of probiotics, treatment of any intestinal infections and dietary modification.



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### The Four "R" Treatment Protocol

	Using a course of	ANTIMICROBIAL	Oil of oregano, berberine, caprylic acid
	antimicrobial, antibacterial, antiviral or anti parasitic therapies in cases where organisms are present. It may	ANTIBAC TERIAL	Liquorice, zinc carnosine, mastic gum, tribulus, berberine, black walnut, caprylic acid, oil of oregano
REMOVE	also be necessary to remove offending foods, gluten, or	ANTIFUNGAL	Oil of oregano, caprylic acid, berberine, black walnut
	medication that may be acting as antagonists.	ANTIPARASTIC	Artemesia, black walnut, berberine, oil of oregano
	Consider testing IgG96 foods as a tool for removing offending foods.	ANTIVIRAL	Cat's claw, berberine, echinacea, vitamin C, vitamin D3, zinc, reishi mushrooms
		BIOFILM	Oil of oregano, protease
REPLACE	In cases of maldigestion or malabsorption, it may be necessary to restore proper digestion by supplementing with digestive enzymes.	DIGESTIVE SUPPORT	Betaine hydrochloride, tilactase, amylase, lipase, protease, apple cider vinegar, herbal bitters
ш	Pecolonisation with healthy, beneficial bacteria. Supplementation with probiotics, along with the use of prebiotics helps re-establish the proper microbial balance.	PREBIOTICS	Sippery elm, pectin, larch arabinogalactans
RENOCULA-		PROBIOTICS	Bifidobacterium animalissup lactise, lactobacillus acidophilus, lactobacillus plantarum, lactobacillus casei, bifidobacterium breve, bifidobacterium bifidum, bifidobacterium longum, lactobacillus salivarius sep salivarius, lactobacillus paracasei, lactobacillus rhamnosus, Saccaromyces boulardii
REBALANCE	Restore the integrity of the gut mucosa by giving support to healthy mucosal cells, as well as immune support. Address whole	INTESTINAL MUCOSA IMMUNE SUPPORT	Saccaromyces boulardii, lauric acid
REPAIR & REBAL	body health and lifestyle factors so asto prevent future GI dysfunction.	INTESTINAL BARRIER REPAIR	L-Glutamine, a loe vera, liquorice, marshmallow root, okra, quercetin, slippery elm, zinc camosine, Saccaromyces boulardii, omega 3 essential fatty acids, B vitamins
REP/		SUPPORT CONSIDERATION	Seep, diet, exercise, and stress management