



COMPLETE MICROBIOME MAPPING

General Macroscopic Description

	Result	Markers
Stool Colour	Brown	Colour - Brown is the colour of normal stool. Other colours may indicate abnormal gut health.
Stool Form	Formed	Form - Sample form is categorised using the Bristol stool chart. A comment on stool appearance can be found in the comments section.
Mucous	Not Detected	Mucous - Mucous production may indicate the presence of an infection and/or inflammation.
Occult Blood	POSITIVE	Blood (Macro) - 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	79.6	> 13.6	umol/g	
Butyrate	17.3	10.8 - 33.5	%	
Acetate	65.7	44.5 - 72.4	%	
Propionate	15.0	0.0 - 32.0	%	
Valerate	2.0	0.5 - 7.0	%	

GIT Functional Markers	Result	Range	Units	
Calprotectin.	40.0	0.0 - 50.0	ug/g	
Pancreatic Elastase	>500.0	> 200.0	ug/g	
Secretory (slgA)	222.3 *L	510.0 - 2040.0	ng/mL	
Zonulin	79.0	0.0 - 107.0	ng/mL	
Beta glucuronidase	5731.7	368.0 - 6266.0	U/g	
Steatocrit	<1.0	0.0 - 15.0	%	
a-Transglutaminase IgA	40.0	0.0 - 100.0	units/L	

Microbiome Mapping Summary

Parasites & Worms	Bacteria & Viruses	Fungi and Yeasts
	Pseudomonas aeruginosa.	

Key Phyla Microbiota

Firmicutes:Bacteroidetes Ratio

0.41

< 1.00

RATIO



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





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Parasites and Worms.

Parasitic Organisms

Result	Range	Units	
<dl	< 1.0	x10 ⁶ org/g	●
<dl	< 1.0	x10 ⁴ org/g	●
<dl	< 1.0	x10 ³ org/g	●
<dl	< 1.0	x10 ³ org/g	●
<dl	< 1.0	x10 ⁵ org/g	●
<dl	< 1.0	x10 ⁴ org/g	●
<dl	< 5.0	x10 ⁶ org/g	●
<dl	< 1.0	x10 ² org/g	●

Worms

Ascaris lumbricoides, Roundworm	Not Detected	Necator americanus, Hookworm	Not Detected
Trichuris trichiura, Whipworm	Not Detected	Enterobius vermicularis, Pinworm	Not Detected
Enterocytozoon spp	Not Detected	Hymenolepis spp, Tapeworm	Not Detected
Strongyloides spp, Roundworm	Not Detected	Taenia species, Tapeworm	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

Opportunistic Bacteria/Overgrowth

Result	Range	Units	
<dl	< 1.00	x10 ⁵ CFU/g	●
<dl	< 1.00	x10 ⁴ CFU/g	●
<dl	< 1.00	x10 ⁴ CFU/g	●
<dl	< 1.00	x10 ³ CFU/g	●
<dl	< 1.00	x10 ⁴ CFU/g	●
30.19 *H	< 3.00	x10 ² CFU/g	●
0.10	< 1.00	x10 ⁴ CFU/g	●
<dl	< 5.00	x10 ² CFU/g	●
2.80	< 3.00	x10 ³ CFU/g	●
2.30	< 3.50	x10 ⁹ CFU/g	●
<dl	< 18.00	x10 ⁷ CFU/g	●
<dl	< 5.00	x10 ⁶ CFU/g	●

Potential Autoimmune Triggers

<dl	< 5.00	x10 ⁵ CFU/g	●
<dl	< 5.00	x10 ⁵ CFU/g	●
<dl	< 5.00	x10 ³ CFU/g	●
<dl	< 5.00	x10 ⁴ CFU/g	●
<dl	< 1.00	x10 ⁷ CFU/g	●
<dl	< 5.00	x10 ⁴ CFU/g	●
<dl	< 1.00	x10 ³ CFU/g	●
0.26	< 10.00	x10 ⁷ CFU/g	●

Fungi & Yeast

<dl	< 5.00	x10 ³ CFU/g	●
3.96	< 5.00	x10 ² CFU/g	●
<dl	< 3.00	x10 ² CFU/g	●
<dl	< 3.00	x10 ³ CFU/g	●
<dl	< 1.00	x10 ³ CFU/g	●



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Bacterial Pathogens	Result	Range	Units	
Aeromonas hydrophila.	0.16	< 1.00	x10 ³ CFU/g	
Campylobacter species.	<dl	< 1.00	x10 ³ CFU/g	
C. difficile, Toxin A	<dl	< 1.00	x10 ³ CFU/g	
C. difficile, Toxin B	<dl	< 1.00	x10 ³ CFU/g	
Enterohemorrhagic E. coli	<dl	< 1.00	x10 ³ CFU/g	
Enteroinvasive E. coli/Shigella	<dl	< 1.00	x10 ³ CFU/g	
Enterotoxigenic E. coli LT/ST	<dl	< 1.00	x10 ³ CFU/g	
Shiga-like Toxin E. coli stx1	<dl	< 1.00	x10 ³ CFU/g	
Shiga-like Toxin E. coli stx2	<dl	< 1.00	x10 ³ CFU/g	
Salmonella species.	<dl	< 1.00	x10 ⁴ CFU/g	
Vibrio species.	<dl	< 1.00	x10 ⁵ CFU/g	
Yersinia species.	<dl	< 1.00	x10 ⁵ CFU/g	
Helicobacter pylori	<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	Not Detected
H.pylori Virulence Factor, virB	Not Detected	H.pylori Virulence Factor, virD	Not Detected

Viral Pathogens	Result	Range	Units
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	87.0	1.6 - 250.0	x10 ⁹ CFU/g	
Bifidobacterium species	220.3	> 6.7	x10 ⁷ CFU/g	
Bifidobacterium longum	60.1	> 5.2	x10 ⁶ CFU/g	
Enterococcus species	658.5	1.9 - 2000.0	x10 ⁵ CFU/g	
Escherichia species	1688.0	3.7 - 3800.0	x10 ⁶ CFU/g	
Lactobacillus species	2735.2	8.6 - 6200.0	x10 ⁵ CFU/g	
Lactobacillus Rhamnosus	15.0	8.3 - 885.0	x10 ⁴ CFU/g	
Clostridium species	83.0 *H	5.0 - 50.0	x10 ⁶ CFU/g	
Oxalobacter formigenes	42.58	> 15.00	x10 ⁷ CFU/g	
Akkermansia muciniphila	40.00	1.00 - 50.00	x10 ³ CFU/g	
Faecalibacterium prausnitzii	606.4	200.0 - 3500.0	x10 ³ 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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ROBERT FAKES
08-Sep-1957 **Male**

40 PATERSON ROAD
YATALA QLD 4207







LAB ID : 3906147
UR NO. : 6204372
Collection Date : 14-Jul-2023
Received Date: 19-Jul-2023



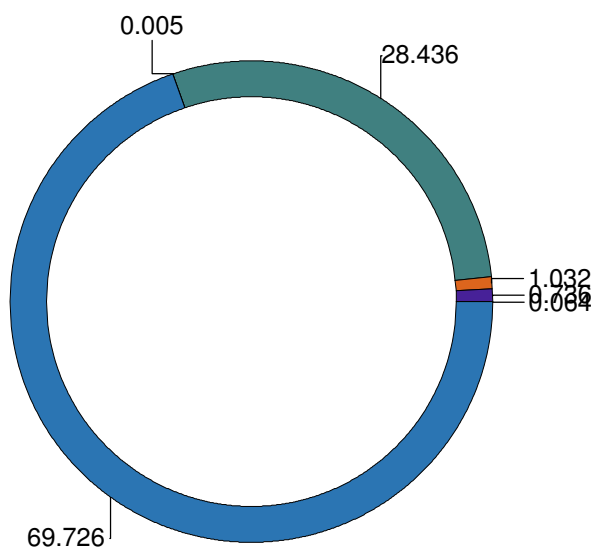
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Introduction:

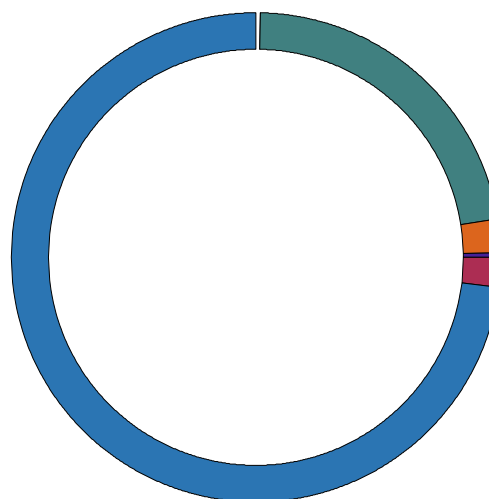
Your gut microbiome is a collective name for the 40 trillion cells and up to 1000 microbial species that include bacteria, viruses, fungi, parasites, and archaea and reside in our gut. The number of gut bacterial cells is approximately equal to the total number of human cells in our body, so if we consider 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.

Relative Commensal Abundance	Result	Range	Units
 Bacteroidetes Phylum	69.726	50.000 - 95.000	%
 Firmicutes Phylum	28.436	3.500 - 40.000	%
 Proteobacteria Phylum	1.032	0.500 - 12.500	%
 Verrucomicrobia Phylum	0.736	0.000 - 2.400	%
 Actinobacteria Phylum	0.064	0.001 - 4.818	%
 Euryarchaeota Phylum	0.005	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.

FAECAL OCCULT BLOOD POSITIVE:

Faecal occult blood has been detected in this specimen. The presence of blood in the stool may be the result of several causes besides colorectal bleeding, including hemorrhoids or gastrointestinal infection. Results should be considered with other clinical information available to the physician.

Please note: A positive result indicates that the sample likely contains a human haemoglobin concentration >20ng/ml (Limit of detection).

Review this result with other inflammation markers such as calprotectin.

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 muciniphila*, *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	PROPIONATE	ACETATE
<i>Akkermansia muciniphila</i>		▲▲▲	▲▲
<i>Anaerostipes caccae</i>	▲▲▲		
<i>Bacteroides</i> spp.		▲▲▲	
<i>Bifidobacterium</i> spp.		▲	▲▲▲
<i>Blautia obeum</i>		▲▲	▲▲▲
<i>Coprococcus eutactus</i>	▲		
<i>Escherichia coli</i>			▲
<i>Eubacterium rectale</i>	▲▲		
<i>Faecalibacterium prausnitzii</i>	▲▲▲		
<i>Lactobacillus</i> spp.	▲	▲	▲
<i>Roseburia homini</i>	▲▲		
<i>Ruminococcus bromii</i>	▲		▲
<i>Subdoligranulum variabile</i>	▲		

KEY

▲ Low Producers

▲▲ Moderate Producers

▲▲▲ High Producers



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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.

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 HIGH NORMAL:

Zonulin is a protein that modulates intestinal barrier function and can also be considered as a potential inflammatory marker. Although this result is within range, the result should be interpreted with patient clinical symptoms as well as reviewing the presence of other proteobacteria that may be the result of increased Zonulin.

Beta-GLUCORONIDASE NORMAL:

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

Opportunistic Bacteria Comment

PSEUDOMONAS AERUGINOSA ELEVATED:

PHYLUM: Proteobacteria

DESCRIPTION:

Pseudomonas aeruginosa is a gram-negative, aerobic, non-spore forming bacteria that can cause a variety of infections in both immunocompetent and immunocompromised hosts. It is commonly found in the environment, particularly in freshwater, hot tubs, and swimming pools. Chronic gastrointestinal colonization is acknowledged to be an important component of P. aeruginosa diarrheal disease and systemic infections. Since disruption of the normal flora by antibiotics can reduce colonization resistance and promote pathologic colonization with P. aeruginosa, enterocolitis due to P. aeruginosa may also be considered to be an antibiotic-associated gastroenteritis.

Pseudomonas aeruginosa in the gastrointestinal tract can cause inflammation, epithelial barrier dysfunction, tight cell junction interruption, and intestinal permeability.

TREATMENT SUGGESTIONS:

If treatment is warranted, Pseudomonas is usually susceptible to antipseudomonal penicillins, aminoglycosides, carbapenems, 3rd generation cephalosporins and gentamycin. Plant-derived anti-biofilm products identified against P. aeruginosa include alkaloids,



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organosulfur compounds, flavonoids, phenolic compounds and terpenoids. Rule out allergy to above medication before prescribing/taking.

Normal Bacterial Flora Comment

BIFIDOBACTERIUM SPECIES LOW NORMAL:

PHYLUM: Actinobacteria

DESCRIPTION:

Bifidobacterium is a genus of gram-positive, nonmotile anaerobic bacteria that are ubiquitous inhabitants of the gastrointestinal tract and considered a probiotic. Bifidobacterium species prevent diarrhea and intestinal infections, alleviate constipation, and stimulate the immune system. Whilst, the Bifidobacterium species level is in range, it is below the average mean.

Lower levels may result from low fibre intake or reduced mucosal health. Additionally, Lower levels may be associated with irritable bowel syndrome or with pathogenic bacteria infection.

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

CLOSTRIDIUM SPECIES ELEVATED:

PHYLUM: Firmicutes

DESCRIPTION:

Clostridium is a genus of anaerobic, Gram-positive bacteria found in the environment and the intestinal tract. This genus includes several species and can utilize large amounts of nutrients that cannot be digested by host and produce short-chain fatty acids (SCFAs), which play a noticeable role in intestinal homeostasis. Colonisation of Clostridium species may be affected by diet (carbohydrate and protein in diet) and general health and may be protective against inflammation and infection. However, some species may act as potential pathogens. Elevated Clostridium species may indirectly damage the intestinal epithelial cells. Another symptom may include constipation.

TREATMENT SUGGESTIONS: Treatment may involve the use of probiotics, treatment of any intestinal infections and dietary modification (reduce consumption of different fibres, such as inulin, oligofructose, arabinoxylan, guar gum and starch).



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The Four “R” Treatment Protocol

REMOVE	Using a course of antimicrobial, antibacterial, antiviral or anti parasitic therapies in cases where organisms are present. It may also be necessary to remove offending foods, gluten, or medication that may be acting as antagonists. Consider testing IgG96 foods as a tool for removing offending foods.	ANTIMICROBIAL	Oil of oregano, berberine, caprylic acid
		ANTIBACTERIAL	Liquorice, zinc carnosine, mastic gum, tribulus, berberine, black walnut, caprylic acid, oil of oregano
		ANTIFUNGAL	Oil of oregano, caprylic acid, berberine, black walnut
		ANTIPARASITIC	Artemesia, black walnut, berberine, oil of oregano
		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
REINOCULATE	Recolonisation with healthy, beneficial bacteria. Supplementation with probiotics, along with the use of prebiotics helps re-establish the proper microbial balance.	PREBIOTICS	Slippery elm, pectin, larch arabinogalactans
		PROBIOTICS	Bifidobacterium animalis subsp lactis, lactobacillus acidophilus, lactobacillus plantarum, lactobacillus casei, bifidobacterium breve, bifidobacterium bifidum, bifidobacterium longum, lactobacillus salivarius subsp salivarius, lactobacillus paracasei, lactobacillus rhamnosus, Saccharomyces boulardii
REPAIR & REBALANCE	Restore the integrity of the gut mucosa by giving support to healthy mucosal cells, as well as immune support. Address whole body health and lifestyle factors so as to prevent future GI dysfunction.	INTESTINAL MUCOSA IMMUNE SUPPORT	Saccharomyces boulardii, lauric acid
		INTESTINAL BARRIER REPAIR	L-Glutamine, aloe vera, liquorice, marshmallow root, okra, quercetin, slippery elm, zinc carnosine, Saccharomyces boulardii, omega 3 essential fatty acids, B vitamins
		SUPPORT CONSIDERATION	Sleep, diet, exercise, and stress management