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-.JAMIE-LEE TAYLOR **NATU WELLBEING 7 JUNE SQUARE RINGWOOD NORTH VIC 3134**

DANNY PERAIC Male 02-Nov-1972

7 SALINA RISE FERNTREE GULLY VIC 3156

LAB ID: 3880212 UR NO.: 6185551 Collection Date: 29-Mar-2023 Received Date: 30-Mar-2023



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	Unformed	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	Negative	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	30.8	> 13.6	umol/g	•
Butyrate	19.3	10.8 - 33.5	%	•
Acetate	63.2	44.5 - 72.4	%	•
Propionate	14.5	0.0 - 32.0	%	
Valerate	3.0	0.5 - 7.0	%	•

GIT Functional Markers	Result	Range	Units	
Calprotectin.	<5.0	0.0 - 50.0	ug/g	
Pancreatic Elastase	>500.0	> 200.0	ug/g	
Faecal Secretory IgA	859.0	510.0 - 2010.	.0 ug/g	•
Faecal Zonulin	104.0	0.0 - 107.0	ng/g	•
Faecal B-Glucuronidase	3154.6	337.0 - 4433.	.0 U/g	
Steatocrit	2.0	0.0 - 15.0	%	
anti-Gliadin IgA	<20	0.0 - 100.0	units/L	

Microbiome Mapping Summary

Firmicutes:Bacteroidetes Ratio

Fungi and Yeasts **Parasites & Worms Bacteria & Viruses** Streptococcus species Key Phyla Microbiota

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

0.40

< 1.00

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Parasites and Worms.	Result	Range	Units	
Parasitic Organisms				
Cryptosporidium.	<dl< th=""><td>< 1.0</td><td>x10^6 org/g</td><td></td></dl<>	< 1.0	x10^6 org/g	
Entamoeba histolytica.	<dl< th=""><td>< 1.0</td><td>x10^4 org/g</td><td></td></dl<>	< 1.0	x10^4 org/g	
Giardia intestinalis	<dl< th=""><td>< 1.0</td><td>x10^3 org/g</td><td></td></dl<>	< 1.0	x10^3 org/g	
Blastocystis hominis.	<dl< th=""><td>< 1.0</td><td>x10^3 org/g</td><td></td></dl<>	< 1.0	x10^3 org/g	
Dientamoeba fragilis.	<dl< th=""><td>< 1.0</td><td>x10^5 org/g</td><td></td></dl<>	< 1.0	x10^5 org/g	
Endolimax nana	<dl< th=""><td>< 1.0</td><td>x10^4 org/g</td><td></td></dl<>	< 1.0	x10^4 org/g	
Entamoeba coli.	<dl< th=""><th>< 5.0</th><th>x10^6 org/g</th><th></th></dl<>	< 5.0	x10^6 org/g	
Pentatrichomonas hominis	<dl< th=""><th>< 1.0</th><th>x10^2 org/g</th><th></th></dl<>	< 1.0	x10^2 org/g	
Worms				

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

Not Detected Not Detected 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

pportunistic Bacteria/Overgrowth	Result	Range	Units
Bacillus species.	<dl< th=""><th>< 1.00</th><th>x10^5 CFU/g</th></dl<>	< 1.00	x10^5 CFU/g
Enterococcus faecalis	<dl< th=""><td>< 1.00</td><td>x10^4 CFU/g</td></dl<>	< 1.00	x10^4 CFU/g
Enterococcus faecium	<dl< th=""><td>< 1.00</td><td>x10^4 CFU/g</td></dl<>	< 1.00	x10^4 CFU/g
Morganella species	<dl< th=""><td>< 1.00</td><td>x10^3 CFU/g</td></dl<>	< 1.00	x10^3 CFU/g
Pseudomonas species	<dl< th=""><td>< 1.00</td><td>x10^4 CFU/g</td></dl<>	< 1.00	x10^4 CFU/g
Pseudomonas aeruginosa.	1.67	< 3.00	x10^2 CFU/g
Staphylococcus species	<dl< th=""><th>< 1.00</th><th>x10^4 CFU/g</th></dl<>	< 1.00	x10^4 CFU/g
Staphylococcus aureus	<dl< th=""><th>< 5.00</th><th>x10^2 CFU/g</th></dl<>	< 5.00	x10^2 CFU/g
Streptococcus species	6.60 *H	< 3.00	x10^3 CFU/g
Methanobacteriaceae	0.72	< 5.00	x10^9 CFU/g
Desulfovibrio piger	<dl< th=""><td>< 18.00</td><td>x10^7 CFU/g</td></dl<>	< 18.00	x10^7 CFU/g
Oxalobacter formigenes	17.00	> 15.00	x10^7 CFU/g
Potential Autoimmune Triggers			
Citrobacter species.	<dl< th=""><th>< 5.00</th><th>x10^5 CFU/g</th></dl<>	< 5.00	x10^5 CFU/g
Citrobacter freundii.	<dl< th=""><th>< 5.00</th><th>x10^5 CFU/g</th></dl<>	< 5.00	x10^5 CFU/g
Klebsiella species	<dl< th=""><th>< 5.00</th><th>x10^3 CFU/g</th></dl<>	< 5.00	x10^3 CFU/g
Klebsiella pneumoniae.	<dl< th=""><th>< 5.00</th><th>x10^4 CFU/g</th></dl<>	< 5.00	x10^4 CFU/g
Prevotella copri	<dl< th=""><th>< 1.00</th><th>x10^7 CFU/g</th></dl<>	< 1.00	x10^7 CFU/g
Proteus species	<dl< th=""><th>< 5.00</th><th>x10^4 CFU/g</th></dl<>	< 5.00	x10^4 CFU/g
Proteus mirabilis.	<dl< th=""><th>< 1.00</th><th>x10^3 CFU/g</th></dl<>	< 1.00	x10^3 CFU/g
Fusobacterium species	0.14	< 10.00	x10^7 CFU/g
ungi & Yeast	Result	Range	Units
Candida species.	<dl< th=""><th>< 5.00</th><th>x10^3 CFU/g</th></dl<>	< 5.00	x10^3 CFU/g
Candida albicans.	<dl< th=""><th>< 5.00</th><th>x10^2 CFU/g</th></dl<>	< 5.00	x10^2 CFU/g
Geotrichum species.	<dl< th=""><th>< 3.00</th><th>x10^2 CFU/g</th></dl<>	< 3.00	x10^2 CFU/g
Saccharomyces cerevisiae.	<dl< th=""><th>< 3.00</th><th>x10^3 CFU/g</th></dl<>	< 3.00	x10^3 CFU/g
			x10^3 CFU/g



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Bacterial Pathogens	Result	Range	Units
Aeromonas hydrophila.	<dl< th=""><td>< 1.00</td><td>x10^3 CFU/g</td></dl<>	< 1.00	x10^3 CFU/g
Campylobacter species.	<dl< th=""><td>< 1.00</td><td>x10^3 CFU/g</td></dl<>	< 1.00	x10^3 CFU/g
C. difficile, Toxin A	<dl< th=""><td>< 1.00</td><td>x10^3 CFU/g</td></dl<>	< 1.00	x10^3 CFU/g
C. difficile, Toxin B	<dl< th=""><td>< 1.00</td><td>x10^3 CFU/g</td></dl<>	< 1.00	x10^3 CFU/g
Enterohemorrhagic E. coli	<dl< th=""><td>< 1.00</td><td>x10^3 CFU/g</td></dl<>	< 1.00	x10^3 CFU/g
Enteroinvasive E. coli/Shigella	<dl< th=""><td>< 1.00</td><td>x10^3 CFU/g</td></dl<>	< 1.00	x10^3 CFU/g
Enterotoxigenic E. coli LT/ST	<dl< th=""><td>< 1.00</td><td>x10^3 CFU/g</td></dl<>	< 1.00	x10^3 CFU/g
Shiga-like Toxin E. coli stx1	<dl< th=""><td>< 1.00</td><td>x10^3 CFU/g</td></dl<>	< 1.00	x10^3 CFU/g
Shiga-like Toxin E. coli stx2	<dl< th=""><td>< 1.00</td><td>x10^3 CFU/g</td></dl<>	< 1.00	x10^3 CFU/g
Salmonella species.	<dl< th=""><th>< 1.00</th><th>x10^4 CFU/g</th></dl<>	< 1.00	x10^4 CFU/g
Vibrio species.	<dl< th=""><th>< 1.00</th><th>x10^5 CFU/g</th></dl<>	< 1.00	x10^5 CFU/g
Yersinia species.	<dl< th=""><td>< 1.00</td><td>x10^5 CFU/g</td></dl<>	< 1.00	x10^5 CFU/g
Helicobacter pylori	<dl< th=""><td>< 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 Not Detected** H.pylori Virulence Factor, cagA H.pylori Virulence Factor, dupA **Not Detected Not Detected** H.pylori Virulence Factor, iceA H.pylori Virulence Factor, oipA **Not Detected** H.pylori Virulence Factor, vacA **Not Detected** H.pylori Virulence Factor, virB **Not Detected Not Detected** H.pvlori Virulence Factor, virD

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	Pecult Pange Units	

Normal Bacterial GUT Flora	Result	Range	Units	
Bacteroides fragilis	60.0	1.6 - 250.0	x10^9 CFU/g	
Bifidobacterium species	597.9	> 6.7	x10^7 CFU/g	
Bifidobacterium longum	11.1	> 5.2	x10^6 CFU/g	•
Enterococcus species	6.8	1.9 - 2000.0	x10^5 CFU/g	• 100
Escherichia species	214.9	3.7 - 3800.0	x10^6 CFU/g	•
Lactobacillus species	167.3	8.6 - 6200.0	x10^5 CFU/g	•
Lactobacillus Rhamnosus	<i>0.5</i> *L	8.3 - 885.0	x10^4 CFU/g	•
Clostridium species	40.0	5.0 - 50.0	x10^6 CFU/g	
Enterobacter species	4.0	1.0 - 50.0	x10^6 CFU/g	•
Akkermansia muciniphila	43.63	1.00 - 50.00	x10^3 CFU/g	•
Faecalibacterium prausnitzii	950.8	200.0 - 3500.0) x10^3 CFU/g	

Note: Testing performed by qPCR <dl = Result below detectable limit

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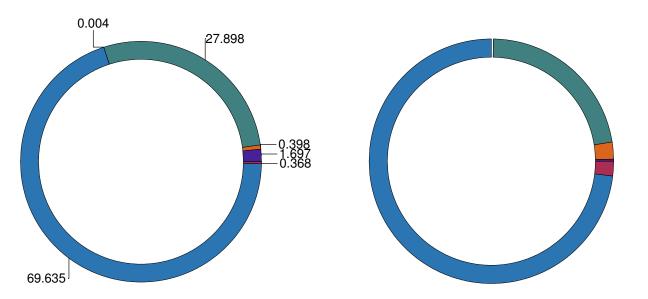
Introduction:

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 Resu	ult R	lange	Units
Bacteroidetes Phylum 69.635	35 5	0.000 - 95.000	%
Firmicutes Phylum 27.898	8 <mark>3</mark>	.500 - 40.000	%
Verrucomicrobia Phylum 1.697	7 0	.000 - 2.400	%
Proteobacteria Phylum 0.398	98*L 0	.500 - 12.500	%
Actinobacteria Phylum 0.368	8 0	.001 - 4.818	%
Euryarchaeota Phylum 0.004	4 0	.000 - 0.177	%

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.

UNFORMED/LIQUID stools may indicate the presence of infection and/or 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		A A A	A A
Anaerostipes caccae	**		
Bacteroides spp.		A A A	
Bifidobacterium spp.		A	**
Blautia obeum		A A	**
Coprococcus eutactus	A		
Escherichia coli			A
Eubacterium rectale	A A		
Faecalibacterium prausnitzii	**		
Lactobacillus spp.	A	A	A
Roseburia homini	A A		
Ruminococcus bromii	A		A
Subdoligranulum variabile	A		





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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 produce on average 500 ug/g of PE-1. Thus, levels below 500 ug/g and above 200 ug/g suggest a deviation from optimal pancreatic function.

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).

SECRETORY IGA NORMAL:

Secretory IgA is within range.

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. Review this level with other pathogenic bacteria and normal commensal flora. Lower levels within reference range should be interpreted clinically.

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

STREPTOCOCCUS SPECIES ELEVATED:

PHYLUM: Firmicutes

DESCRIPTION:

Streptococcal species are a genus of gram-positive cocci which are normally diverse in the intestinal microbial community. Streptococcus spp. are involved in the fermentation of sugars, yielding lactic acid as their predominant fermentation end product. Elevated gut streptococci may be associated with diseases such as inflammatory bowel disease, liver cirrhosis or hypertension.

Higher levels in the intestine may result from low stomach acid, PPI use, reduced digestive capacity, SIBO or constipation; Elevated levels may also be indicative of intestinal inflammatory activity, and may cause loose stools.

TREATMENT SUGGESTIONS:

Treatment of streptococcus in gut flora is not always recommended. A practitioner may take into consideration a range of patient factors and symptoms. The 4R treatment protocol at the end of this report may be considered.

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

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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.

LACTOBACILLUS RHAMNOSUS LOW:

PHYLUM: Firmicutes

DESCRIPTION:

Lactobacillus Rhamnosus is a Gram-positive anaerobic bacterium and is one of the most widely used probiotic strains, of which various health effects are well documented including the prevention and treatment of gastro-intestinal infections and diarrhea and even preventing certain allergic symptoms.

Decreased Lactobacillus rhamnosus colonisation has been shown to decrease gastro-intestinal health, increasing the risk of gastro-intestinal infections and diarrhea as well as extra-intestinal infections including oral and respiratory health. 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.



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The Four "R" Treatment Protocol

	Using a course of antimic robial, antibacterial, antiviral or anti parasitic therapies in cases where organisms are present. It may	ANTIMICROBIAL	Oil of oregano, berberine, caprylic acid
		ANTIBACTERIAL	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	Recolonisation 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
RENOCULATE		PROBIOTICS	Bifidobacterium animalissup lactise, lactobacillus acidophilus, lactobacillusplantarum, lactobacillus casei, bifidobacterium breve, bifidobacterium bifidum, bifidobacterium longum, lactobacillus salivariussep salivarius, lactobacillusparacasei, lactobacillus rhamnosus, Saccaromyces boulardii
ANCE	×	INTESTINAL MUCOSA IMMUNE SUPPORT	Saccaromyces boulardii, lauric acid
조		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
REPAIR		SUPPORT CONSIDERATION	Seep, diet, exercise, and stress management