LAB REPORT _

PETRA FRITZ-FAULAND (F) 27/01/2025

Patient Details

AGE (DOB): 05/12/1983 ORDER NUMBER: U9P8H28 SAMPLE ID: 2412300002 **Specimen Details**

TYPE: MENST. BLOOD/VAG. SWAB

RECEIVED: 02/01/2025

CONDITION: ACCEPTABLE (GOOD)

Partner Details

NAME: CHRISTIAN FAULAND AGE (DOB): 29/11/1981

GENDER: MALE

FEMALE MICROBIOME ANALYSIS

Pathogens & mycoplasmas	Uterine result	Vaginal result	Significance
CHLAMYDIA TRACHOMATIS	NOT DETECTED	NOT DETECTED	NORMAL
MYCOPLASMA GENITALIUM	NOT DETECTED	NOT DETECTED	NORMAL
MYCOPLASMA HOMINIS	NOT DETECTED	NOT DETECTED	NORMAL
UREAPLASMA UREALYTICUM/UREAPLASMA PARVUM	NOT DETECTED	NOT DETECTED	NORMAL
TRICHOMONAS VAGINALIS	NOT DETECTED	NOT DETECTED	NORMAL
NEISSERIA GONORHOEAE	NOT DETECTED	NOT DETECTED	NORMAL
Normal microflora			
LACTOBACILLUS SPP	VERY HIGH	VERY HIGH	NORMAL
Facultative anaerobic microorganisms			
ENTEROBACTERIACEAE	NOT DETECTED	NOT DETECTED	NORMAL
STREPTOCOCCUS SPP	NOT DETECTED	NOT DETECTED	NORMAL
STAPHYLOCOCCUS SPP	VERY LOW	VERY LOW	NORMAL
Obligate anaerobic microorganisms			
GARDNERELLA VAGINALIS/PREVOTELLA BIVIA/PORPHYROMONAS SPP	VERY LOW	VERY LOW	NORMAL
EUBACTERIUM SPP	VERY LOW	VERY LOW	NORMAL
SNEATHIA SPP/LEPTOTRIHIA SPP/FUSOBACTERIUM SPP	NOT DETECTED	NOT DETECTED	NORMAL
MEGASPHAERA SPP/VEILONELLA SPP/DIALISTER SPP	VERY LOW	NOT DETECTED	NORMAL
LACHNOBACTERIUM SPP/ CLOSTRIDIUM SPP	NOT DETECTED	NOT DETECTED	NORMAL
MOBILUNCUS SPP/CORYNEBACTERIUM SPP	VERY LOW	VERY LOW	NORMAL
PEPTOSTREPTOCOCCUS SPP	VERY LOW	NOT DETECTED	NORMAL
ATOPOBIUM VAGINAE	VERY LOW	NOT DETECTED	NORMAL
Fungi			
CANDIDA SPP.	NOT DETECTED	NOT DETECTED	NORMAL
Viruses			
HSV-1	NOT DETECTED	N/A	NORMAL
HSV-2	NOT DETECTED	N/A	NORMAL
EBV	NOT DETECTED	N/A	NORMAL
CMV	NOT DETECTED	N/A	NORMAL
HHV-6	NOT DETECTED	N/A	NORMAL

INTERPRETATION OF RESULTS AND RECOMMENDATIONS: LOW RISK (NORMAL)

DIAGNOSIS: NORMAL MICROBIOME COMPOSITION

DESCRIPTION: No sexually transmitted infections (STIs) or pathogens were detected in the samples. A robust and balanced normal

flora has developed within your microbiome, with lactobacilli dominance reaching up to 100% in both sample sets. . The

mixture and abundance of the bacterial flora identified align with expectations for a healthy microbiome.

TREATMENT: Given these findings, and unless the patient is experiencing specific symptoms that warrant further evaluation, we do not

recommend any additional actions at this time.

RETESTING: Retesting is not required.

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PETRA FRITZ-FAULAND (F) 27/01/2025

Patient Details

AGE (DOB): 05/12/1983 ORDER NUMBER: U9P8H28 SAMPLE ID: 2412300002 Specimen Details

TYPE: VAG. SWAB RECEIVED: 02/01/2025

CONDITION: ACCEPTABLE (GOOD)

Partner Details

NAME: CHRISTIAN FAULAND AGE (DOB): 29/11/1981 GENDER: MALE

FERTILYSIS INFLAMMATION INDEX ANALYSIS

Target gene	Gene expression levels (Ig), (rel. Units)	Interpretation	Ref. Range
IL1B	5.6		
IL10	1.6		
IL18	4.9		
TNFA	4.1		
TLR4	3.0		
GATA3	4.4		
CD68	4.4		
B2M	6.2	VALID	
TLR4/GATA3	0.036	NORMAL	
TNFA/IL18	0.15	HIGH	
IL10/IL18	0.49	NORMAL	
IL1B/CD68	17.1	HIGH	
INFLAMMATION INDEX	72.6% (H)	INFLAMMATION DETECTED	< 50

INTERPRETATION OF RESULTS AND RECOMMENDATIONS: HIGH RISK

DIAGNOSIS: HIGH LEVELS OF INFLAMMATION MARKERS DETECTED

DESCRIPTION:

Your inflammation index test revealed increased levels of inflammation markers. Excess levels of vaginal inflammation may lead to cellular damage and increased mucosal vulnerability to sexually transmitted (STIs) and viral infections. Furthermore, activation of local immunity is a marker for microbiome dysbiotic disorders leading to infertility such as implantation failure, chemical pregnancies and recurrent early pregnancy loss, as well as, pregnancy complications including premature rupture of the membranes and premature birth.

Non-infectious causes of vaginal inflammation include allergic reactions to chemical irritants like soaps, douches, and latex, as well as decreased estrogen levels (atrophic vaginitis) and postpartum dryness. Autoimmune disorders can also cause inflammation, along with physical trauma from activities like cycling, prolonged sitting, or wearing tight clothing and foreign objects such as tampons and contraceptive devices. Chemical exposure from medications or treatments like chemotherapy, and environmental factors like excessive heat and sweat, may also contribute to vaginal irritation and inflammation.

TREATMENT:

For women actively trying or planning to conceive, or undergoing preparation for IVF, and for women experiencing symptoms consistent with lower genital tract inflammation, bacterial vaginosis or vaginitis, we recommend further analysis and monitoring of the female genital tract by a Full Female Microbiome testing analysis for the diagnosis and treatment of vaginal and uterine infections and endometritis. In addition to treatment of reproductive tract infections (if applicable), various products to reduce vaginal inflammation include moisturizers and water-based lubricants to alleviate dryness, topical corticosteroids for severe inflammation, and probiotic supplements to balance the vaginal microbiome. Estrogen creams are helpful for women with atrophic vaginitis, while aloe vera-based gels provide natural soothing relief.

RETESTING: Following completion of treatment, retesting is recommended to evaluate therapeutic efficacy.

P.D. Venieratos Ph.D. Reproductive Biologist

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