



Verisana LAB · c/o Brian Kalish · 818 N Quincy Street ·
Unit 806 · Arlington VA 22203

John Smith
1234 Main Street
ANYTOWN CA 98745

Surname, First name	Smith, John
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DOB	02/02/1979
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Sex	male
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Laboratory #	200111111
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Date collected	01/30/2016
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Date received	02/01/2016
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Report date	02/07/2016
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Laboratory report

Enclosed you will find the results of your laboratory examination. In addition to your results you will also receive a brief summary of the correlating effects, regarding the tested parameters. These are compiled without any knowledge on the clinical background and as such, may only be used as an interpretation aid. In case of health problems, please consult a doctor or practitioner for medical treatment and accompaniment for making the best decisions for your health. We explicitly warn against beginning, suspending or changing any medication or therapy without consulting your doctor or practitioner.

Test: Leaky gut test, Complete

Sample material: stool



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Analyte	Result	Reference range	Result
Aerobic Bacteria			
Escherichia coli	10 ⁶ -10 ⁷ KbE/ml	10 ⁶ -10 ⁷ KbE/ml	
Proteus spec.	< 10 ⁴	< 10 ⁴	
Citerobacter spec.	< 10 ⁴	< 10 ⁴	
Klebsiella spec.	10 ⁵ -10 ⁶	< 10 ⁴	
Other enterobacteriaceae	< 10 ⁴	< 10 ⁴	
Enterococci	10 ⁶ -10 ⁷	10 ⁶ -10 ⁷	
Pseudomonas spec.	< 10 ⁴	< 10 ⁴	
Anaerobic Bacteria			
Bacteroides spec.	10 ⁹ -10 ¹¹	10 ⁹ -10 ¹¹	
Bifidobacteria spec.	10 ⁹ -10 ¹¹	10 ⁹ -10 ¹¹	
Lactobacilli spec.	10 ⁴	10 ⁵ -10 ⁷	
Clostridia spec.	< 10 ⁵	< 10 ⁵	
Stool ph value			
Ph-Value	5,2	6,2-6,8	
Yeast/Fungi			
Candida albicans	< 10 ² cfu/ml	< 10 ² cfu/ml	
Candida spec.	< 10 ²	< 10 ²	
Geotrichum candidum	< 10 ³	< 10 ³	

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Mold	negativ	negative	
Mouth Swab	10 ⁵ -10 ⁶	< 10 ²	
Helicobacter pylori			
Helicobacter pylori antigen	1,5	negative: < 0,13 positive: >0,17	
Malabsorption			
Pancreatic elastase 1	81	> 200 µg E1/g	
Inflammation			
Alpha-1-antirypsin	50	< 40 mg/dl	
Gut Mucosal Immunology			
Secretory IgA	150	510-2040 µg/ml	
Zonulin			
Zonulin	112	<78ng/ml	

Klebsiella is a bacterium, which belongs to the Enterobacteriaceae family. Klebsiella can be found in the gastrointestinal tract of humans. Klebsiella overgrowth is commonly asymptomatic. Some strains of Klebsiella may cause diarrhea and some are enterotoxigenic. A low-starch diet may be helpful if high levels of Klebsiella are present.

Lactobacilli is a lactic acid forming bacteria, which produces large amounts of short chain fatty acids (SCFA). SCFAs lower the intestinal pH and thereby make the environment alkaline and unsuitable for microbial pathogens (e.g. yeast). In addition, Lactobacilli secrete antifungal and antimicrobial agents. Decreased Lactobacilli indicate disturbances of the intestinal flora.

With a balanced diet the fecal pH should lie between 6,2 and 6,8. Acid fecal pH indicates disorders of intestinal ecology. Please take note of the acid-base balance.

The enclosed mouth swab showed moderate amounts of facultative pathogenic yeasts.

The detection of Helicobacter pylori antigen in stool indicates an infection with this germ. Helicobacter pylori is the most common chronic bacterial pathogen in humans. It lowers stomach acid levels while

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damaging the mucosal protection within the stomach. It has therefore been attributed with causing stomach and duodenal ulcers.

Elastase findings can be used for the diagnosis or the exclusion of exocrine pancreatic insufficiency. Reduced pancreatic elastase in stool indicates insufficiency of exocrine pancreatic function. Pancreatic elastase 1 levels below 100 are strongly correlated with severe pancreatic insufficiency.

Alpha-1-antitrypsin is a glycoprotein, which is produced by the liver and cells of the gut. It belongs to the group of acute phase proteins and is a marker of protein loss and permeability of the gut. The measurement of Alpha-1-antitrypsin in stool reflects the permeability of the gut during inflammatory processes. Increased Alpha-1-antitrypsin indicates an increased permeability of the intestinal mucous membrane, which leads to an enteral loss of Alpha-1-antitrypsin.

Secretory IgA (sIgA) is an immune protein, which reacts anti-inflammatory. It coats the intestinal lining, especially the mucosal surfaces and is supposed to protect us from inside. As secretory IgA represents the first line of defense of the GI, immunological activity in the GI tract can be assessed using secretory IgA. Low levels of fecal sIgA increase the risk of leaky gut syndrome and promote the growth of microbial pathogens in the intestine. The risk of inflammatory immune reactions to undigested food and protein is also increased if low levels of sIgA are present. Low fecal IgA levels can result from physical or mental stress and/or inadequate nutrition.

Zonulin is a protein molecule involved in the regulation of intercellular tight junctions in the intestinal wall. When it binds to specific receptors on the cell surface, the tight junctions open and as a result increase the permeability of the intestinal epithelial cells. This can be caused by certain bacteria, an interrupted intestinal mucus layer, missing muconutritive flora or contact with gliadin. The influx of foreign antigens and cell components can trigger immunological reactions and dysregulation. Elevated levels can be found in type 1 diabetes, autoimmune diseases, celiac disease, multiple sclerosis, rheumatoid arthritis and other chronic conditions.

Yours sincerely,
Your laboratory team