

Dr.TEST DOCTOR
TEST HEALTH CENTRE
123 TEST STREET
BURWOOD VIC 3125

TEST PATIENT 01-Jan-1958

1 TEST CRT BURWOOD VIC 3125

LAB ID: 3822147

UR NO.:

Collection Date: 15-Jun-2022 Received Date: 15-Jun-2022

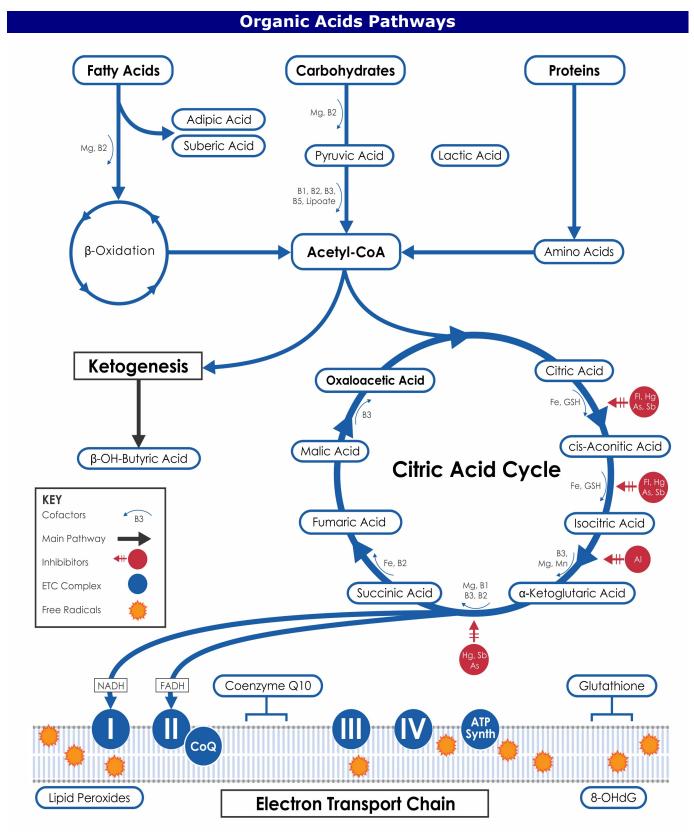


3822147

Female

ORGANIC ACIDS METABOLOMIC MAPPING

Method: LCMS/MS/MS





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Nutrient Markers

URINE, SPOT

KETONE/FATTY ACID Metabolites

(Carnitine & B2)

(/			
1.	Adipic Acid.	3.60	0.00 - 11.10 ug/mgCR	
2.	Suberic Acid.	2.10	0.00 - 4.60 ug/mgCR	
3.	Ethylmalonic Acid	4.10	0.00 - 6.30 ug/mgCR	
4.	Pimelic Acid	12.0	5.9 - 31.8 nmol/mg Cr	•
5.	Methyl-Succinic Acid	5.50	3.20 - 21.10 nmol/mg Cr	•

CARBOHYDRATE Metabolism/Glycolysis

(B1, B3, Cr, Lipoic Acid, CoQ10)

6.	Pyruvic Acid.	6.60 *H	0.00 - 6.40 ug/mgCR	
7.	Lactic Acid.	23.50 *H	0.00 - 16.40 ug/mgCR	
8.	b-OH-Butyric Acid	8.60	0.00 - 9.90 ug/mgCR	•
9.	Glucose (OA)	1.1	0.3 - 1.1 mmol/L	•

CITRIC ACID CYCLE Metabolites.

(B Comp., CoQ10, Amino Acids, Mg)

10.	Citric Acid.	450.00	56.00 - 987.0g/mgCR	
11.	cis-Aconitic Acid.	29.00	18.00 - 78.00g/mgCR	•
12.	Isocitric Acid.	49.00	35.00 - 143.0g/mgCR	•
13.	a-Ketoglutaric Acid.	21.00	0.00 - 35.00 ug/mgCR	
14.	Succinic Acid	9.50	1.10 - 20.90 ug/gCR	
15.	Fumaric Acid.	1.10	1.10 - 1.35 ug/mgCR	•
16.	Malic Acid.	2.90	0.00 - 3.10 ug/mgCR	•
17.	b-OH-b-Methylglutaric Acid	1.20	0.00 - 5.10 ug/mgCR	

B-Complex Vitamins & Amino Acid Markers

(B1, B2, B3, B5, B6, Biotin)

18.	a-Ketoisovaleric Acid	0.24	0.00 - 0.49 ug/mgCR	
19.	a-Ketoisocaproic Acid	0.30	0.00 - 0.52 ug/mgCR	
20.	a-Keto-b-Methylvaleric Acid	0.95	0.00 - 1.10 ug/mgCR	•
21.	Xanthurenic Acid	0.2	0.0 - 0.5 ug/mgCR	
22.	beta-Hydroxyisovaleric Acid	5.50	0.00 - 11.50 ug/mgCR	

METHYLATION COFACTORS

(B12, Folate)

	lethylmalonic Acid.	2.90	0.00 - 2.30	ag/mgort		
24. F	ormiminoglutamic Acid	1.4	0.0 - 2.2	ug/mgCR		

Cell Regulation Markers

NEUROTRANSMITTER METABOLISM

(Tyrosine, Tryptophan, B6, Antioxidants)

(-)	,, p, = 2,				
25.	Homovanillic Acid (HVA)	5.00	1.40 - 7.60	ug/mgCR	•
26.	Vanillylmandelic Acid (VMA)	4.60	1.20 - 5.30	mmol/molCr	•
27.	5-Hydroxyindoleacetic Acid (5HIAA)	9.60	1.60 - 9.80	ug/mgCR	•
28.	Kynurenic Acid.	1.1	0.0 - 1.5	ug/mgCR	
29.	Quinolinic Acid (OA)	4.70	0.00 - 5.80	ug/mgCR	
30.	Picolinic Acid	10.0	2.8 - 13.5	ug/mgCR	
31.	Cortisol (OA)	<i>555.0</i> *H	166.0 - 507	. @ mol/L	•



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Oxidative Damage/AntiOxidant Markers

(Vitamin C and Other Antioxidants)

32.	ParaHydroxyphenyllactate	0.57	0.00 - 0.66 ug/mgCR	•
33.	8 OH-deoxyguanosine	3.8	0.0 - 7.6 ug/mgCR	

Toxicants and Detoxification

DETOXIFICATION INDICATORS

(Arg, NAC, Met, Mg, Antioxidants)

34.	2-Methylhippuric Acid	<dl< th=""><th>0.00 - 0.19 ug/mgCR</th><th></th></dl<>	0.00 - 0.19 ug/mgCR	
35.	Orotic Acid.	0.96	0.00 - 1.01 ug/mgCR	•
36.	Glucaric Acid.	5.6	0.0 - 10.7 ug/mgCR	
37 .	a-OH-Butyric Acid	0.77	0.00 - 0.90 ug/mgCR	•
38.	Pyroglutamic Acid.	33.00	28.00 - 88.00g/mgCR	•

Compounds of Bacterial or Yeast/Fungal Origin

BACTERIAL	DYSBIOSIS	MARKERS
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39.	Benzoate (OA)	18.00 *H	0.00 - 9.30	ug/mgCR	
40.	Hippurate (OA)	944	0.0 - 1070	ug/mgCR	•
41.	Phenylacetate	<i>5.6</i> *H	0.0 - 0.2	ug/mgCR	
42.	Phenylpropionate	2.3 *H	0.0 - 0.1	ug/mgCR	
43.	ParaHydroxyBenzoate	<i>3.5</i> *H	0.0 - 1.8	ug/mgCR	
44.	p-HydroxyPhenylacetate	24.0	0.0 - 34.0	ug/mgCR	•
45.	Indoleacetic Acid	57.00	0.00 - 90.0	0 ug/mgCR	•
46.	Tricarballylate	0.95	0.00 - 1.41	ug/mgCR	

L. acidophilus/General Bacteria

47. D-Lactate 0.9 0.0 - 4.1 ug/mgCR

CLOSTRIDIAL SPECIES

48.	Dihydroxyphenylpropionic Acid	0.1	*H	0.0 - 0.1	ug/mgCR	
49.	4-Cresol	11.0		0.0 - 75.0	mmol/molCr	
50.	3-OH-Proprionic Acid	20		0.0 - 208.0	mmol/molCr	

YEAST/FUNGAL DYSBIOSIS MARKERS.

51.	Arabinitol	5.0	0.0 - 73.0	ug/mgCR	
52 .	Citramalic Acid	3.1	0.0 - 3.6	mmol/molCr	
53.	Tartaric Acid	4 0	00-70	ua/maCR	

53 .	Tartaric Acid.	4.0 0.0 - 7.0 ug/mgCF	3
		Oxalate Metaboli	tes
	0 " 4 "	= 00 0 77 7 00 ·····/0F	

	Oxalate Metabolites							
54.	Oxalic Acid	5.60	0.77 - 7.00 ug/mgCR		•			
55.	Glyceric Acid	21.0	16.0 - 117.0 mmol/molCr	•				
56.	Glycolic Acid	14.0	6.8 - 101.0 mmol/molCr	•				
			Nutritional Markers					
57.	Pyridoxic Acid (Vit B6)	5.0	0.0 - 34.0 mmol/molCr	•				
EO	Dentethenia Asid (Vit DE)	6.0	0.0 10.0 mmal/malCr					

57.	Pyridoxic Acid (Vit B6)	5.0	0.0 - 34.0	mmol/molCr	
58.	Pantothenic Acid (Vit B5)	6.0	0.0 - 10.0	mmol/molCr	
59.	Glutaric Acid (Vit B2)	0.2	0.0 - 0.4	mmol/molCr	
60.	Ascorbic Acid (Vit C)	<i>9.0</i> *L	10.0 - 200	mmol/molCr	•
61.	CoEnzyme-Q10 (CoQ10)	15.00	0.17 - 39.0	0 mmol/molCr	•
62 .	N-Acetylcysteine (NAC)	0.14	0.00 - 0.28	mmol/molCr	



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Nutritional Guide

Nutrient	Adult Dose Range	Units	Clinician Notes
Vitamin-C	450.0	mg	
Vitamin-B1	15.0	mg	
Vitamin-B2	17.0	mg	
Vitamin-B3	13.0	mg	
Vitamin-B5	10.0	mg	
Vitamin-B6	5.0	mg	
Vitamin-B12	450.0	ug	
Chromium .	3.0	ug	
Magnesium .	140.0	mg	
Acetyl-L-Carnitine.	20.0	mg	
N-Acetylcysteine.	5.0	mg	
Glutathione.	4.6	mg	
Glycine .	5.0	mg	
Methionine.	6.0	mg	
Ornithine.	10.0	mg	
Serine.	5.0	mg	
Taurine .	6.0	mg	
Tryptophan.	8.0	mg	
Lactobacillus	1.0	billion CFU	
Probiotics (Multistain)	1.0	billion CFU	
D-Lactate-free probiotics	1.0	billion CFU	

Disclaimer:

Supplement recommendations are based on the Organic Acid test results. The prescribing health practitioner must take into consideration the age, weight, sex, and pregnancy or lactation state. In addition, consider clinical state, medication regime, associated drug-nutrient depletion and allergies. The doses listed above are considered optimal, based on lab results and do not apply to specific disease conditions where doses may need to be altered. The vitamins, minerals or amino acids listed are elemental quantities. Use clinical discretion when choosing the right salt with the guidance of your compounding health professional. For example, Magnesium may be prescribed as a glycinate for its calming effect or threonate may be used for a Magnesium that crosses the blood-brain-barrier.

References

Laboratory Evaluations for Integrative and Functional Medicine by Richard Lord. J.Alexander Bralley; Textbook of Nutritional Medicine by Alan Gaby.



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Laboratory Comments

Organic acids provide functional markers for the metabolic effects of micronutrient adequacy, toxic exposure, neuroendocrine activity, intestinal bacterial and fungal overgrowth. Organic acid testing indicates the need for nutrients, diet modification, detoxification, antioxidant protection or further testing.

In a healthy state, organic acids are excreted in the urine at low concentrations. Low range results may be associated with hypometabolic compensatory states. Compensatory responses include hormonal secretions and cytokine responses that can slow or reverse deviations from median or normal physiologic states.

The Krebs cycle is a process of conversion of fats, carbohydrates and protein to mitochondrial energy, ATP.

Metabolic blocks in the Krebs cycle due to insufficient enzymes or cofactors will result in the elevation of organic acids that accumulate and spill into urine.

Carbohydrate Metabolism and Glycolisis

Dietary carbohydrates are broken down into Glucose and other sugars where carbohydrate breakdown products, pyruvate and lactate are formed. Pyruvate enters the Krebs cycle via dehydrogenase enzymes which require vitamin B1 (thiamine), Vit B2 (riboflavin), vitamin B3 (niacin), vitamin B5 (pantothenic acid), and lipoic Acid to function correctly. Review Vitamin B Levels in conjunction with Pyruvate and Lactate levels.

In the absence of these nutrients, lactate builds up leading to lactic acidosis. Elevated pyruvate and lactate can indicate a need for lipoic acid.

Pyruvate

Elevated pyruvate is associated with increased exercise, bacterial, shock, inborn error of metabolism and anaemia.

Consider Vitamin B1 (thiamine), Vitamin B2 (riboflavin), Vitamin B3 (niacin), Vitamin B5 (pantothenic acid), and lipoic Acid.

Methylmalonate (MMA)

Methylmalonyl-Co-A (MMA) is produced from breakdown of isoleucine, Valine, methionine and threonine. MMA is converted into succinic acid via a B12 dependent enzyme Methylmalonyl-Co-A mutase. Elevations in MMA is associated with vitamin B12 deficiency, pernicious anaemia, GI bacterial metabolism, malabsorption or gastroenteritis.

Consider: Vitamin B12.

Bacterial- Dysbiosis

Benzoate and hippurate are metabolically related as substrates and products of the glycine conjugation system. Urinary benzoate and hippurate are functional markers of a common genetic weakness in glycine conjugation.

Benzoate

Benzoate was one of the compounds first found to be elevated in urine from patients with intestinal bacterial overgrowth and a metabolic product of free intestinal phenylalanine. Benzoates are found in jams and foods containing paraben preservatives.

Hippurate

Hippurate is the most abundant marker of dysbiosis because its precursor, benzoate is the principal product of intestinal bacterial metabolism of dietary polyphenols.

Consider a Microbiome assessment to determine microbial overgrowth.

Phenylacetate, Phenylpropionate, p-Hydroxybenzoate, p-Hydroxyphenylacetate

One or more of the phenyl compounds may be elevated due to overgrowth of intestinal bacteria involved in their production from dietary polyphenols or undigested phenylalanine.

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