

Metabolic Analysis Profile

sample type: **URINE**

This **Metabolic Analysis Profile** assesses urine metabolites in order to evaluate four critical areas of metabolism: gastrointestinal function, cellular energy production, neurotransmitter processing, and amino acid/organic acid balance as influenced by vitamin/mineral cofactors. Results can be used to address chronic systemic complaints ranging from fatigue and mood disorders to headaches, muscular/joint pain, and digestive problems.

The **Metabolic Analysis Profile** is a urinary assessment of 39 key organic acids grouped according to their primary roles in the following four central areas of metabolism.

1. Gastrointestinal Function

This profile measures eight markers that can reveal malabsorption and dysbiosis. These imbalances can be addressed to improve gut health and to help prevent or alleviate: **Chronic digestive problems, common causes of nutritional deficiency, yeast overgrowth, cognitive impairment, gastrointestinal distress, and degenerative conditions.**

2. Energy Production

This profile assesses metabolites that serve as important intermediates in the citric acid (Krebs) cycle. This cycle supplies the body with its primary energy needs, converting 90% of food energy into cellular energy. This subpanel also includes:

- Carbohydrate metabolites that can signal impaired glucose metabolism
- Markers that help evaluate the breakdown of fats and production of cholesterol
- A marker measuring the production of coenzyme Q10

Imbalances of cellular energy metabolites are linked with chronic fatigue, accelerated cell breakdown, and unhealthy aging.

3. Neurotransmitter Metabolites

A special grouping of neurotransmitter metabolites serve as important diagnostic indicators of abnormal metabolism that can underlie many key aspects of neuropsychiatric function. These markers are urinary metabolites of powerful neurotransmitters that act on the central nervous system, including: **Epinephrine, Dopamine, and Serotonin.** These substances can profoundly influence patterns of stress response, emotional well-being, cognition and sleep.

4. Assessment of Nutrient Sufficiency

This test provides a functional assessment of nutrient sufficiency and usage that covers a broad range of vitamins, coenzymes, elements, enzyme activators and other nutrients. An analysis of amino acid metabolites which require vitamin and mineral cofactors for their metabolism can hint at deficiencies of: **vitamins B6, B12 and C, magnesium, copper, iron, and various amino acids.**

Metabolic Analysis Testing

- All markers on the **Metabolic Analysis Profile** are measured in urine and ratioed to creatinine. This allows a single urine sample to be used for analysis.
- The test report includes an **in-depth interpretation** for abnormal results with a list of possible remedial nutrients. Customised vitamin & mineral formulas are available.
- The test is available with pediatric (ages 2-12) as well as adult reference ranges.

The **Metabolic Analysis Profile** is an important clinical tool for treating imbalances underlying metabolic, nutritional, and neurological disorders. Using test results, practitioners can design comprehensive, customised therapies to restore optimal metabolic health.

- **Analytes:**
Creatinine and 39 organic acids ratioed to creatinine including
8 gastrointestinal metabolites
13 cellular energy metabolites
4 neurotransmitter metabolites
14 amino acid metabolites
- **Specimen Requirements:**
First morning urine collection;
2 tubes (samples frozen)
- **Before Taking this Test:**
- Avoid taking creatine supplements (2 days before test)
- Check with healthcare provider about what other medications and supplements to avoid (4 days before test)
- Women should not collect urine during menses
- Arrange posting for Monday-Thursday
- See instructions inside test kit for details

Metabolic Analysis Profile



Genova Diagnostics
Europe

Innovative Testing for Optimal Health

Genova Diagnostics (Europe
Parkgate House
356 West Barnes Lane
New Malden
Surrey
KT3 6NB

Patient: **SAMPLE PATIENT**

Order Number:

Completed: March 28, 2006

Age: 40

Received: March 28, 2006

Sex: F

Collected: March 28, 2006

MRN:

Malabsorption and Dysbiosis Markers

Reference Range

Malabsorption Markers		mmol/mol creatinine
1. Indoleacetic Acid (IAA)	2.6	<= 9.0
2. Phenylacetic Acid (PAA)	<dl	<= 0.0
3. Dihydroxyphenylpropionic Acid (DHPPA)	2.6	<= 2.2
4. Succinic Acid	3.5	<= 20.0
Bacterial Dysbiosis Markers		mmol/mol creatinine
5. Citramalic Acid	2.3	<= 7.0
6. Indoleacetic Acid (IAA)	2.6	<= 9.0
7. Phenylacetic Acid (PAA)	<dl	<= 0.0
8. Dihydroxyphenylpropionic Acid (DHPPA)	2.6	<= 2.2
9. Benzoic / Hippuric Acids Ratio	0.02	<= 0.02
10. Succinic Acid	3.5	<= 20.0
Yeast / Fungal Dysbiosis Markers		mmol/mol creatinine
11. Arabinose	31.1	<= 42.3
12. Tartaric Acid	<dl	<= 14.1
13. Citramalic Acid	2.3	<= 7.0

Neurotransmitter Metabolites

mmol/mol creatinine

14. Vanilmandelic Acid (VMA)	2.0	1.2-5.9
15. Homovanillic Acid (HVA)	6.1	0.9-4.4
16. 3-Methyl-4-OH-phenylglycol (MHPG)	4.9	<= 16.7
17. 5-OH-Indoleacetic Acid (5-HIAA)	2.7	1.1-6.5

Cellular Energy and Mitochondrial Metabolites

mmol/mol creatinine

18. Lactic Acid	11.9	6.3-36.4
19. Pyruvic Acid	15.2	1.1-15.4

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1MP 1416 Rev 2

This test reveals important clinical information about:

- **Four critical areas of metabolism** – gastrointestinal function, cellular energy production, neurotransmitter processing, and amino acid-organic acid balance as influenced by nutrient cofactors
- **Metabolic imbalances** that may be underlying fatigue, neuromuscular problems, headaches, neurological dysfunction, mood disorders, delayed infant development or failure to thrive, personality disorders, gastrointestinal distress, recurrent skin rashes, and kidney/urinary problems
- **Individualized need for nutrients** to optimize metabolic function, including vitamins, elements (minerals), organic acids, amino acids, and other nutrients

For test kits, clinical support, or more information contact:

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More detailed publications with references are also available: www.GDXuk.net



The most complete line of endocrine testing

Adrenal Stress Profile

sample type: **SALIVA**

The **Adrenal Stress Profile** is a powerful and precise noninvasive salivary assay that evaluates bioactive levels of the body's important stress hormones, **cortisol** and **DHEA**. This profile serves as a critical tool for uncovering biochemical imbalances underlying anxiety, depression, chronic fatigue, obesity, dysglycaemia, and a host of other clinical conditions.

The adrenal hormones cortisol and DHEA function to influence:

- Metabolism
- Thyroid function
- Anti-inflammatory response
- Resistance to stress

Changing the amounts of cortisol and DHEA can profoundly affect:

- Energy levels
- Resistance to disease
- Emotional states
- General sense of well-being

Although both DHEA and cortisol are produced by the adrenal cortex, they exhibit many opposing actions.

Cortisol: Many of cortisol's physiological actions are geared toward the mobilisation of reserves. Cortisol is released in large amounts in response to physical, physiological, and/or psychological stress. When stressors persist, the secretion of glucocorticoids can be prolonged, leading to maladaptation of the adrenal cortex and adrenal hyperplasia.

Excess cortisol can adversely affect:

- Bone and muscle tissue
- Thyroid function
- Cardiovascular function
- Weight control
- Sleep
- Glucose regulation
- Immune defense (reduced SIgA)
- Aging

Over time, cortisol secretion can become impaired, resulting in an inability to respond to stress as demonstrated in conditions such as:

- Chronic fatigue
- Menstrual problems
- Allergies
- Arthritis

DHEA, in contrast to cortisol, exerts mostly anabolic actions and balances the body's stress response.

DHEA functions to:

- Provide substrate for the synthesis of sex hormones
- Guard against degenerative conditions associated with aging
- Influence immune function and energy production
- Affect insulin sensitivity, thyroid function, protein synthesis and others.

Imbalances of DHEA have been associated with:

- Impaired immunity
- Cancer
- Depression
- Panic disorder
- Insulin resistance
- Obesity
- Alzheimers disease
- Cardiovascular disease

- **Analytes:**
DHEA
cortisol
Secretory IgA (Comprehensive)

- **Specimen Requirement:**
4 (2ml) saliva samples collected at specific times over a 24-hour period

- **Before Taking this Test:**
- Avoid caffeine, alcohol, and nicotine (on day of test)
- Do not eat, brush or floss teeth, use mouthwash, or chew gum (1 hour before)
- Wash hands before collection
- See instructions inside test kit for details



Genova
Diagnostics®
Europe

Innovative Testing for Optimal Health

Accession No:



Comprehensive Adrenal Stress Profile (Saliva)

Patient Details

Ms Sample Report
 Parkgate House
 356 West Barnes Lane
 New Malden
 Surrey
 KT3 6NB

Practitioner Details

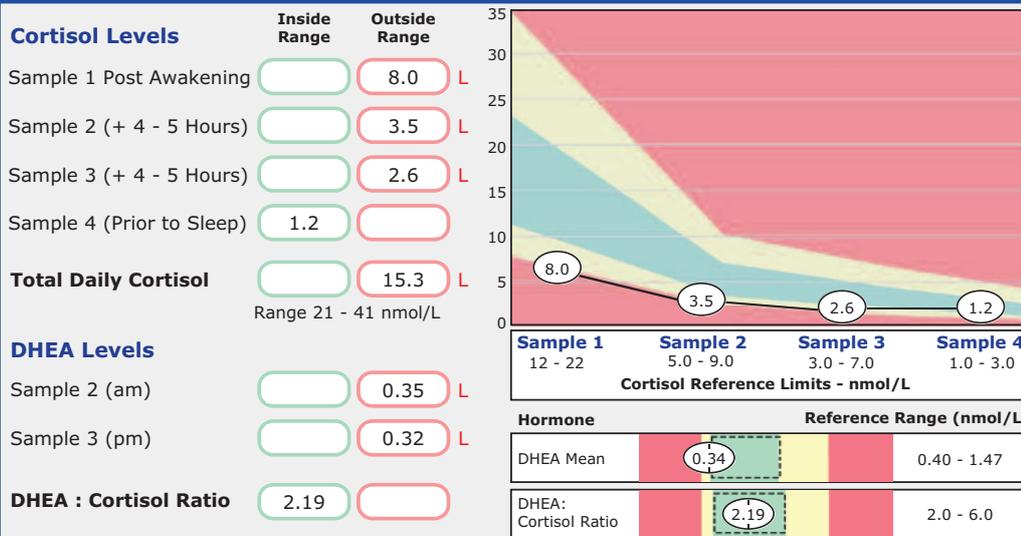
Genova Diagnostics (Europe)
 Parkgate House
 356 West Barnes Lane
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Client ID No: IWX500220
Accession No:
 Patients DOB: 02/03/1975
 Sample Date:
 Date Of Report: 08/05/2008

Clinical Significance:

- **Accurate measurement of cortisol and DHEA** is valuable in preventing illness and identifying contributing factors to chronic disorders.
- **Salivary assessment reflects the unbound, bioavailable fraction of hormone.** The ease of collection allows for multiple sampling throughout the day, enabling the practitioner to evaluate the circadian rhythm of cortisol.
- **Customised therapeutic programs** based on exercise, diet, stress reduction, and/or supplementation can be implemented based on laboratory results.

Salivary Cortisol and DHEA - Age Group 14 - 40



Adrenal Stress Stage

Exhaustion Stage: This is generally a state of insufficient production of adrenal hormones after multiple years of persistent stressors with insufficient coping mechanisms. Patients usually present with fatigue, poor energy and immune system hypofunction. They may exhibit chronic anxiety. In some patients this represents impaired response to shorter-term stressors (i.e. overreactivity to short term stress). Adrenal support and restoration measures, as well as identification and balancing of major stressors are indicated. This state should not be confused with Addison's disease, which is a near absence of adrenal hormones, and is a medical emergency.

Secretory IgA Results

Analyte	Result	Units	Normal Range	Optimal Range
Secretory IgA	75.2 L	µg/mL	118 - 641	130 - 471

Analyte	Reference Range (µg/mL)
SIgA Mean	75.2

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