

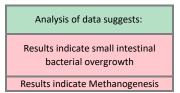
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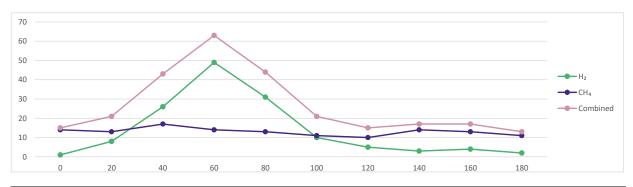
Small Intestinal Bacterial Overgrowth (SIBO) Report - Glucose Challenge

Customer ID:	123456789		
Requester/Doctor:	Regenerus Labs		
Patient Name:	Mrs Sample Report	Collection date:	19/02/2024
Date of Birth: Sample ID:	01/01/2005 24VHL999999	Received date: Answer report date:	20/02/2024 21/02/2024

Summary Report of Hydrogen and Methane Breath Analysis with Carbon Dioxide Correction

Gases Analysed	Patient Result 0 - 100 mins	Expected difference 0 - 100 mins		
Increase in Hydrogen (H ₂)	48	< 12		
Increase in Methane (CH ₄)	6	< 12		
Increase in Combined H ₂ & CH ₄	48	< 12		





Time (Min)	0	20	40	60	80	100	120	140	160	180
H ₂	1	8	26	49	31	10	5	3	4	2
CH₄	14	13	17	14	13	11	10	14	13	11
Combined	15	21	43	63	44	21	15	17	17	13
CO ₂ (%)	3.1	3.5	2.9	3.8	3.1	3.2	2.9	3.1	3.5	3.7
fCO ₂ ¹	1.77	1.57	1.90	1.45	1.77	1.72	1.90	1.77	1.57	1.49

Additional comments

CO2 Correction factor is a relative indicator for quality of the alveolar breath sample collected, where the closer to 1 the correction factor is the greater the concentration of breath. All reported results fall within acceptable breath CO2 levels ¹

Increases of Hydrogen(H₂), Methane (CH₄), or a combined increase in both gasses, of 12ppm within 100 minutes indicates Small Intestinal Bacterial Overgrowth (SIBO)².

Methane levels \geq 10ppm at any point are interpreted as positive for methanogenesis. Methane production at lower levels may be associated with constipation³.

References

1. European guideline on indications, performance, and clinical impact of hydrogen and methane breath tests in adult and pediatric patients: European Association for Gastroenterology, Endoscopy and Nutrition, European Society of Neurogastroenterology and Motility, and European Society for Paediatric Gastroenterology Hepatology and Nutrition consensus, 2021.

2. Protocols and Interpretation Help; Hydrogen/Methane Breath Tests, Quintron Instrument Company Inc, 2013.

3. Rezaie A, Buresi M, Lembo A, Pimentel M. et. Al. Hydrogen and Methane Based Breath Testing in Gastrointestinal Disorders: The North American Consensus, Am J Gastroenterol 2017 May;112(5):775784.