

## SAMPLE REPORT 09-May-1990 Female

P: 1300 688 522 E: info@nutripath.com.au

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

LAB ID: 3863047

UR NO.:

Collection Date: 18-Jan-2023 Received Date:18-Jan-2023



3863047

## Oral Microbiome Mapping

Oral pH	7.10	6.70 - 7.30		•
Opportunistic Bacteria				
Campylobacter rectus	<dl< th=""><th>&lt; 1.00</th><th>x10^6 CFU/ml</th><th></th></dl<>	< 1.00	x10^6 CFU/ml	
Capnocytophaga gingivalis	3.70 *H	< 3.00	x10^4 CFU/ml	
Enterococcus faecalis	<dl< th=""><th>&lt; 1.00</th><th>x10^3 CFU/ml</th><th></th></dl<>	< 1.00	x10^3 CFU/ml	
Fusobacterium nucleatum	2.00	< 4.00	x10^6 CFU/ml	
Parvimonas micra	2.20	< 4.00	x10^6 CFU/ml	
Peptostreptococcus anaerobius	1.40	< 5.00	x10^6 CFU/ml	
Prevotella intermedia	3.00	< 5.00	x10^6 CFU/ml	
Streptococcus mutans	<dl< th=""><th>&lt; 1.00</th><th>x10^5 CFU/ml</th><th></th></dl<>	< 1.00	x10^5 CFU/ml	
Pathogenic Bacteria				
A. actinomycetemcomitans	<dl< th=""><th>&lt; 1.00</th><th>x10^5 CFU/ml</th><th></th></dl<>	< 1.00	x10^5 CFU/ml	
Porphyromonas gingivalis	5.60 *H	< 4.00	x10^6 CFU/ml	•
Tannerella forsythia	1.10	< 3.00	x10^4 CFU/ml	
Treponema denticola	2.20 *H	< 2.00	x10^4 CFU/ml	
Staphylococcus aureus	<dl< th=""><th>&lt; 1.00</th><th>x10^5 CFU/ml</th><th></th></dl<>	< 1.00	x10^5 CFU/ml	
Pseudomonas aeruginosa	<dl< th=""><th>&lt; 1.00</th><th>x10^6 CFU/ml</th><th></th></dl<>	< 1.00	x10^6 CFU/ml	
Acinetobacter species	<dl< th=""><th>&lt; 1.00</th><th>x10^4 CFU/ml</th><th></th></dl<>	< 1.00	x10^4 CFU/ml	
Haemophilus species	<dl< th=""><th>&lt; 1.00</th><th>x10^8 CFU/ml</th><th></th></dl<>	< 1.00	x10^8 CFU/ml	
Fungi				
Candida albicans	3.00 *H	< 1.00	x10^6 CFU/ml	
Candida species	5.00 *H	< 1.00	x10^6 CFU/ml	
Normal Oral Flora				
Streptococcus salivarius	8.00	> 5.00	x10^7 CFU/ml	
Lactobacillus species	0.50 *L	> 1.00	x10^5 CFU/ml	



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#### Comment

### ORAL pH:

In the oral cavity, the pH is maintained near neutrality by saliva by its flow and bufferic capacity. Acid produced by bacteria following sugar fermentation causes pH to fall below a critical value resulting in demineralization of tooth surfaces. This damage to the enamel favours the action of oral bacteria, which have better access to the dentine. Salivary pH can be affected by diet, oral hygeine and health.

#### **ELEVATED CAPNOCYTOPHAGA GINGIVALIS:**

C. gingivalis is a facultatively anaerobic bacteria constituting part of the oral microflora, but can be considered a opportunistic pathogen. Elevation is linked with increased risk of gingivitis, periodontitis can cause bacteremia in imunocompromised patients.

#### **ELEVATED PORPHYROMONAS GINGIVALIS:**

Porphyromonas gingivalis has been postulated as a keystone periodontal pathogen because of its low abundance and high virulence in the oral flora and is associated with periodontitis. The oral cavity can serve as a reservoir for systemic dissemination of pathogenic bacteria and their toxins, leading to infections and inflammation in distant body sites. Elevated levels have been implicated in extra-oral conditions such as cardiovascular diseases, in adverse pregnancy outcomes, rheumatoid arthritis or Organ Abscesses.

#### **ELEVATED TREPONEMA DENTICOLA:**

Treponema denticola is one of the main pathogenic agents associated with periodontitis. The oral cavity can serve as a reservoir for systemic dissemination of pathogenic bacteria and their toxins, leading to infections and inflammation in distant body sites. Elevated levels have been implicated in extra-oral conditions such cardiovascular diseases, in adverse pregnancy outcomes or Organ Abscesses.

#### **ELEVATED CANDIDA:**

The presence of Candida species in the oral cavity is usually found to be positively correlated with poor oral hygiene and high carbohydrate intake. Elevated levels of Candida species have been associated with increased risk of dental caries and nosocomial pneumonia. Eleveated levels of Candida, alongside symtroms of white leasions on tongue or cheeks, redness or burning of gums, tongue and cheeks, bleeding and/ or loss of taste may indicate oral candidiasis (thrush). Treatment advice from a Oral Heath Specialist should be followed and may include oral antifungals, salt-water rinses, use of probiotics and adjustment of diet to avoid alcohol, sugars and foods which contain mould and yeasts.

#### NORMAL ORAL FLORA COMMENT:

Factors such as a poor acidic diet (refined carbohydrates & soft drinks), stress, smoking, alcohol intake and anti-bacterial agents (incl. medication) can negatively impact on the diversity and balance of the oral microbiome. Oral health is significantly maintained with proper oral care/hygiene, a fibre-rich diet and regular dental cleans.

#### LOW LACTOBACILLI SPECIES:

The presence of Oral Lactobacillus reduces pathogenic bacteria population; supports tooth and gum health by improving resistance to cavities; produces sufficient hydrogen peroxide to kill certain bacterial species; and improves halitosis. Low levels increase risk of infections and dental health conditions. Probiotic bacteria can be reintroduced into your oral cavity by taking oral probiotic supplements. Low Lactobacillus levels may also indicate gut microbiome imbalance. Further investigation may be considered.