AM I AT RISK?

A medical diagnosis of IBS can be made by a physician. You may have IBS, **FODMAP** malabsorption and/or SIBO if you constantly

experience these symptoms:



High risk groups for FODMAP malabsorption

- Medically diagnosed IBS or functional gut disorder
- Coeliac disease or non-coeliac gluten-sensitivity
- Inflammatory bowel disease (Crohn's disease and ulcerative colitis)
- Family history of malabsorption
- A higher prevalence of lactose intolerance occurs in Asian, Latino, and Indian ethnic groups
- Children diagnosed with recurrent abdominal pain of childhood
- Chronic fatique syndrome

High risk groups for SIBO

- Disorders of certain gut mechanisms, e.g. achlorhydria (stomach acid), pancreatic exocrine insufficiency
- Anatomical abnormalities of the small bowel, e.g. Crohn's disease, small intestinal obstruction, previous ileo-caecal resection
- Conditions causing motility disorders, e.g. scleroderma, diabetes
- Medically diagnosed IBS or functional gut disorder
- · Leaky gut syndrome
- Chronic fatigue syndrome
- Chronic pancreatitis or liver cirrhosis

WHAT TO DO?

Seek a diagnosis and management plan.

A physician is able to rule out other serious causes of your gut problems.

A proper diagnosis of IBS, FODMAP malabsorption and/or SIBO will provide answers, and guide targeted management leading to improved health outcomes.

Take the pain out of IBS with a Hydrogen/Methane Breath Test.



Convenient home breath test kits are available, which can be performed at home or work. A great option for busy people or those who cannot attend a clinic.



Australia's largest provider of hydrogen/methane breath testing to diagnose FODMAP malabsorption and small intestinal bacterial overgrowth.

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More information and resources for physicians and patients is available on our website. Share this information with your family/friends and your health professional.



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Do you have **IRRITABLE BOWEL SYNDROME?**

IBS affects 1 in 5 Australians

and causes chronic gut symptoms



Return back to normal

with a simple test today!

FIND A WAY OUT OF IRRITABLE BOWEL SYNDROME (IBS)



How common is IBS?

Around 1 in 10 GP visits and almost half the visits to Gastroenterologists are to do with IBS.

IBS affects men and women, adults and children. Typical symptoms include:

- abdominal bloating, flatulence
- abdominal pain/discomfort
- altered bowel habits (diarrhoea/constipation).

Around 90% of IBS sufferers identify food as a trigger for their symptoms.

Yet the contribution of a true food allergy and/or food chemical sensitivity is very low (<5%).

IBS is a complex disorder which can be caused by various factors. There is no cure for IBS and symptoms can be frustrating to control. Overall, management of IBS symptoms using over-the-counter treatments and prescription medications only provides short-term temporary relief, with variable effectiveness.

What are the leading causes of IBS symptoms?

IBS patients are chronic sufferers seeking answers, many never seek medical attention.

Even though there may be many causes of IBS symptoms, research shows that **malabsorption of FODMAPs**, and **small intestinal bacterial overgrowth**, are leading causes of IBS symptoms.

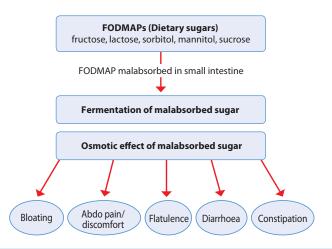
What are FODMAPs?

FODMAPs are naturally occurring sugars found in milk and dairy products, fruits and vegetables, cereals and processed foods.

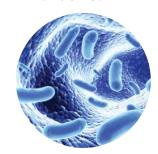
Common FODMAPs include fructose, lactose, sorbitol, mannitol, as well as sucrose.

These dietary sugars are poorly

absorbed in the gut, and can cause gut symptoms in IBS patients, as well as in some patients with coeliac disease and inflammatory bowel disease. Following a diagnosis of malabsorption, restricted intake of FODMAPs has been shown in clinical studies to provide long-term symptom relief in approximately 75% of IBS sufferers.



What is SIBO?



In health there are relatively few bacteria living in the small intestine. Overgrowth of these bacteria, known as small intestinal bacterial overgrowth (SIBO) in certain individuals causes symptoms almost identical to IBS. Patients with SIBO may also have unexplained weight loss and less frequently, nutritional deficiencies (such as vitamin B12 and vitamin D deficiency).

HYDROGEN/METHANE BREATH TEST

Why should I take the test?

This is a simple, painless and non-invasive test to accurately diagnose FODMAP malabsorption and SIBO. Bacteria in the colon (large intestine) produce either hydrogen and/or methane gas when ingested sugars are not completely absorbed in the small intestine. The gas is absorbed into the bloodstream from the bowel and travels to the lungs where it is breathed out, allowing detection by an analyser.

Breath testing is very accessible at Gastrolab, available at many clinic locations Australia—wide, or via convenient home test kits.



FAQs

Why don't I just remove suspected foods from my diet?

There are many problems with this approach:

- An elimination diet is not scientific and doesn't provide accurate proof of malabsorption. It is also not advisable to arbitrarily withdraw certain foods from your diet without objective evidence.
- An elimination diet can be protracted and it can be impractical to keep a food diary. Strict adherence to an elimination diet can also be difficult, especially when it is not justified.
- An elimination diet cannot reliably detect mild or borderline malabsorption.
- Self-reporting is subjective and suffers from known placebo effects.
- Not all FODMAPs trigger symptoms in all patients.

Breath testing should always precede dietary intervention. Results allow dietary intervention to be personalised, without leading to an overly restrictive diet and possible nutritional inadequacy.

Is malabsorption the same as food allergy?

No, malabsorption (also called intolerance) and food allergy are two different medical conditions. They each require different diagnoses & clinical management.

Food allergy affects mostly children, is relatively uncommon, is caused by a few trigger foods, and symptoms are typically immediate. Food intolerance affects all ages, is relatively common, is caused by many trigger foods, and symptoms are delayed.

Is a doctor's referral required for breath tests?

A doctor's referral is not required. Patients can self-refer. Allied/alternative health professionals can also refer.

Can the breath test be performed on children?

Yes, breath testing is safe in children. Young children can be tested as long as they are able to cooperate with the test preparations and instructions (generally from 5 years of age and over).

Why should I choose Gastrolab for my breath tests?

Not all breath test providers are the same. Gastrolab is Australia's largest provider, operating through a national network of NATA-accredited laboratories. We provide both hydrogen **and** methane breath testing, all our results are validated by trained pathologists, and we are trusted by GPs, specialists, dietitians/nutritionists, alternative health professionals and patients alike.