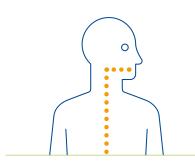


Hydrogen and Methane Breath Tests FAQs for Healthcare Professionals





FAQs



How long are breath samples stable for?

The breath test samples are stable for up to two weeks across a wide temperature range -20°C to 40°C. Any samples received after two weeks of collection will be invalid.



Can I buy kits for use in my private practice?

Yes. You can buy kits from us for use in your private practice, all we need is to set you up on our system and for you to provide us with a PO number.

Is there any preparation my patients need to do before the test?

Yes. Your patients will need to stop certain medication, follow a restricted diet and fast. See all the details below:

- For four weeks before the test, patients need to stop taking antibiotics.
- For one week before the test, patients need to stop taking any laxatives or stool softeners, stool bulking agents and probiotics.
- The day before the test, patients need to follow the 'white food' diet as described in the kit instructions.
- Patients must fast for 12 hours before the test.
- On the day of the test, patients should not eat or drink anything, they can have small sips of water (300 ml) until the start of the test. Essential medication can be taken with water but nothing that would affect the bowel.

Can the kits be used by the NHS?

Yes. There are several NHS hospitals already using the kits as they have significant benefits for both patients and the hospital:

- Patient-centric option as the test can be done at home or in an outpatient setting if preferred
- No capital outlay or ongoing maintenance costs
- Reduction in waiting lists
- Reduction in staff burden
- Cost of the kit is well within the current NHS tariff



For more information please contact us at admin@functionalgutdiagnostics.com

*Our kits are compliant with the requirements of the Hydrogen and Methane-based Breath Testing in Gastrointestinal Disorders: The UK Consensus – Association of GI Physiologists and the British Society of Gastroenterology. Four kits available - SIBO (lactulose), SIBO (glucose), Lactose & Fructose.





FAQs

What is the difference between glucose and lactulose substrates for testing for SIBO?

Glucose is absorbed by the digestive tract so it will not be able to detect SIBO that is further along in the small intestine (distal jejunum/ileum). If patients have had any bariatric or intestinal/bowel surgery, we would recommend using glucose as transit times may be quicker.

Lactulose is not absorbed by the digestive tract and will therefore travel through the entire gastrointestinal track, providing a complete picture for all intestinal segments.

What reporting criteria do you use for SIBO?

There are two main consensus documents that people follow when interpreting SIBO breath test results, the North American Consensus 2017 and the European Guidelines published by Ledochowski.

European SIBO cut off values \geq 10 ppm rise in hydrogen above baseline within 60 minutes.

North American SIBO cut off values ≥ 20 ppm rise in hydrogen above baseline within 90 minutes.

We provide a report using both the above as consultants have their own preferences as to which parameters they prefer to use.

Most patients come out either positive for both parameters or negative for both parameters, but in instances where the results are conflicting, we will look at patient symptoms during the test to inform the borderline result or recommend a follow-up glucose test to provide clarity.

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