

## Microbiome Information for: cystic fibrosis

### For prescribing Medical professionals Review

The suggestions below are based on an Expert System (Artificial Intelligence) modelled after the MYCIN Expert System produced at Stanford University School of Medicine in 1972. The system uses over 1,800,000 facts with backward chaining to sources of information. The typical sources are studies published on the US National Library of Medicine.

Many recent studies has found that symptoms and symptom severity has strong associations to the microbiome for many conditions. Correcting the microbiome dysfunction is beleived to reduce the severity of symptoms. In some cases, this correction may cause symptoms to disappear.

These are a *a priori suggestions* that are predicted to independently reduce microbiome dysfunction. Suggestions should *only be done after a review* by a medical professional factoring in patient's conditions, allergies and other issues.

**This report may be freely shared by a patient to their medical professionals**

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Best practise for making microbiome adjustments is to obtain the individuals microbiome. The following are the best microbiome to use with this expert system model. The suggestions below are intended as temporary suggestions until a test result in received.

In the USA

Ombre (<https://www.ombrelab.com/>)

Thome (<https://www.thome.com/products/dp/gut-health-test>)

Worldwide: BiomeSight (<https://biomesight.com>) - Discount Code 'MICRO'

### Analysis Provided by Microbiome Prescription

A Microbiome Analysis Company

892 Lake Samish Rd, Bellingham WA 98229

Email: [Research@MicrobiomePrescription.com](mailto:Research@MicrobiomePrescription.com)

## Bacteria being reported because of atypical values.

These bacteria were reported atypical in studies of cystic fibrosis

*Nota Bena:* Many studies are done with a small sample size or mixtures of condition subsets which can greatly diminish the ability to detect bacteria shifts.

Bacteria Name	Rank	Shift	Taxonomy ID	Bacteria Name	Rank	Shift	Taxonomy ID
Oscillospiraceae	family	Low	216572	Faecalibacterium	genus	Low	216851
Bacteroides	genus	Low	816	Mycobacterium	genus	High	1763
Bifidobacterium	genus	Low	1678	Pseudomonas	genus	High	286
Burkholderia	genus	High	32008	Roseburia	genus	Low	841
Enterobacter	genus	High	547	Escherichia coli	species	High	562
Enterococcus	genus	High	1350	Pseudomonas aeruginosa	species	High	287
Escherichia	genus	High	561	Stenotrophomonas maltophilia	species	High	40324
				Pseudomonas aeruginosa group	species group	High	136841

## Substance to Consider Adding or Taking

These are the most significant substances that are likely to improve the microbiome dysfunction. Dosages are based on the dosages used in clinical studies. For more information see: <https://microbiomeprescription.com/library/dosages>. These are provided as examples only

Colors indicates the type of substance: i.e. probiotics and prebiotics, herbs and spices, etc. There is no further meaning to them.

Antibiotics annotated with [CFS] have been used with various degree of success with Myalgic Encephalomyelitis, Chronic Fatigue Syndrome, Chronic Lyme, Chronic Q-Fever and Long COVID conditions. Rotation of antibiotics with 3 weeks off between courses is recommended.

Dandelion

**dibekacin (antibiotic)s**

fluorine

gluten-free diet

grape polyphenols

high sugar diet

hydromorphone

ibuprofen

iron 400 mg/day

**kanamycin (antibiotic)s**

Lemon peel

**macrolide ((antibiotic)s)**

**paromomycin (antibiotic)s**

Parsley

**penicillin-moxalactam (antibiotic)s**

Piperine

proton-pump inhibitors (prescription) 60 mg/day

rhubarb

**ribostamycin sulfate salt (antibiotic)**

**sisomicin sulfate (antibiotic)**

**spectinomycin dihydrochloride (antibiotic)**

Sriracha sauce

sucralose 340 mg/day

**ymbioflor 2 e.coli probiotics**

vitamin a 25000 IU/day

Vitamin B9,folic acid 5 mg/day

## **Retail Probiotics**

Over 260 retail probiotics were evaluated with the following deemed beneficial with no known adverse risks.

**symbiopharm / symbioflo 2**

**Note: Some of these are only available regionally – search the web for sources.**

## Substance to Consider Reducing or Eliminating

These are the most significant substances have been identified as probably contributing to the microbiome dysfunction.

In some cases blood work may show low levels of some vitamins, etc. listed below. This may be due to *greedy* bacteria reported at a high level above. Viewing bacteria data on the Kyoto Encyclopedia of Genes and Genomes (<https://www.kegg.jp/>) may provide better insight on the course of action to take.

amikacin (antibiotic)s	imipenem (antibiotic)s
amoxicillin (antibiotic)s[CFS]	inulin (prebiotic)
ampicillin (antibiotic)s[CFS]	lactobacillus plantarum (probiotics)
benzylpenicillin sodium (antibiotic)	oregano (origanum vulgare, oil)
ceftazidime (antibiotic)s	piperacillin-tazobactam (antibiotic)s
ciprofloxacin (antibiotic)s[CFS]	thyme (thymol, thyme oil)
fluoroquinolone (antibiotic)s	trimethoprim (antibiotic)s
gentamicin (antibiotic)s	triphala
Human milk oligosaccharides (prebiotic, Holigos, Stachyose)	vancomycin (antibiotic)[CFS]

## Sample of Literature Used

The following are the most significant of the studies used to generate these suggestions.

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Bipolar Disorder  
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Chronic Fatigue Syndrome  
Chronic Kidney Disease  
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Histamine Issues From Ubiome  
Histamine Issues, Mast Cell Issue, DAO Insufficiency  
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hypersomnia  
hypertension (High Blood Pressure)  
Hypoxia

**IgA nephropathy (IgAN)**  
**Inflammatory Bowel Disease**  
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**Menopause**  
**Metabolic Syndrome**  
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**Multiple Sclerosis**  
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**Neuropathy (all types)**  
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**Nonalcoholic Fatty Liver Disease (nafld) Nonalcoholic**  
**NonCeliac Gluten Sensitivity**  
**Obesity**  
**obsessive-compulsive disorder**  
**Osteoarthritis**  
**Osteoporosis**  
**Parkinson's Disease**  
**Postural orthostatic tachycardia syndrome**  
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**rheumatoid arthritis (RA),Spondyloarthritis (SpA)**  
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