

Microbiome Information for: Small Intestinal Bacterial Overgrowth (SIBO)

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

These are *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

Best practise for making microbiome adjustments is to obtain the individual's 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 is received.

In the USA

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

[Our Facebook Discussion Page](#)

Bacteria being reported because of atypical values.

These bacteria were reported atypical in studies of Small Intestinal Bacterial Overgrowth (SIBO)

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
Christensenellaceae family	High		990719	Salmonella	genus	High	590
Enterobacteriaceae family	High		543	Staphylococcus	genus	High	1279
Oscillospiraceae	family	High	216572	Streptococcus	genus	High	1301
Desulfovibrio	genus	High	872	Acinetobacter baumannii	species	High	470
Enterococcus	genus	High	1350	Bifidobacterium longum	species	Low	216816
Fusobacterium	genus	High	848	Enterococcus faecium	species	High	1352
Klebsiella	genus	High	570	Escherichia coli	species	High	562
Methanobrevibacter	genus	High	2172	Klebsiella pneumoniae	species	High	573
Prevotella	genus	High	838	Methanobrevibacter smithii	species	High	2173
				Pseudomonas aeruginosa	species	High	287

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.

alcoholic beverages	lividomycin (antibiotic)s
amphotericin	L-proline
aspartame (sweetner)	macrolide ((antibiotic)s)
Bile Acid Sequestrant	Miso
bisphenol a (bpa)	navy bean
carob	non-starch polysaccharides
chestnut tannins	oligosaccharides (prebiotic)
colinfant e.coli probiotics	paromomycin (antibiotic)
dairy	penicillin-moxalactam (antibiotic)
dibekacin (antibiotic)s	proton-pump inhibitors (prescription) 60 mg/day
d-ribose 10 gram/day	Pulses
fat	Pumpkin
fluorine	raffinose(sugar beet)
fruit/legume fibre	red alga Laurencia tristicha
grape polyphenols	red wine 250 ml/day
green-lipped mussel	rice bran
high fiber diet	rifampicin (antibiotic)s
high-fat diets	Slippery Elm
iron 400 mg/day	smoking
isepamicin (antibiotic)s	sodium butyrate
kanamycin (antibiotic)s	spectinomycin dihydrochloride (antibiotic)
ku ding cha tea	β -glucan 500 mg/day
lactose	streptomycin (antibiotic)s
lactulose	symbioflor 2 e.coli probiotics
	Vitamin C (ascorbic acid) 30 g/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
amoxicillin (antibiotic)s[CFS]
ampicillin (antibiotic)s[CFS]
benzylpenicillin sodium (antibiotic)
ceftazidime (antibiotic)s
cinnamon (oil, spice)
ciprofloxacin (antibiotic)s[CFS]
Curcumin
fluoroquinolone (antibiotic)s
foeniculum vulgare,fennel

gentamicin (antibiotic)s
imipenem (antibiotic)s
lactobacillus plantarum (probiotics)
meropenem (antibiotic)s
oregano (origanum vulgare, oil) |
piperacillin-tazobactam (antibiotic)s
syzygium aromaticum (clove)
thyme (thymol, thyme oil)
tigecycline (antibiotic)s
trimethoprim (antibiotic)s
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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Gastroesophageal reflux disease (Gerd) including Barrett's esophagus
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giant cell arteritis
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hyperglycemia
Hyperlipidemia (High Blood Fats)
hypersomnia
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Hypothyroidism
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Inflammatory Bowel Disease
Insomnia
Intelligence
Intracranial aneurysms
Irritable Bowel Syndrome
Juvenile idiopathic arthritis
Liver Cirrhosis
Long COVID
Low bone mineral density
Lung Cancer
ME/CFS with IBS
ME/CFS without IBS
membranous nephropathy
Menopause
Metabolic Syndrome
Mood Disorders
multiple chemical sensitivity [MCS]
Multiple Sclerosis
Multiple system atrophy (MSA)
myasthenia gravis
neuropathic pain
Neuropathy (all types)
neuropsychiatric disorders (PANDAS, PANS)
Nonalcoholic Fatty Liver Disease (nafld) Nonalcoholic
NonCeliac Gluten Sensitivity
Obesity
obsessive-compulsive disorder
Osteoarthritis
Osteoporosis
pancreatic cancer
Parkinson's Disease
Polycystic ovary syndrome
Postural orthostatic tachycardia syndrome
Premenstrual dysphoric disorder
primary biliary cholangitis
Psoriasis
rheumatoid arthritis (RA),Spondyloarthritis (SpA)
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Schizophrenia
scoliosis

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Sleep Apnea

Small Intestinal Bacterial Overgrowth (SIBO)

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