

# Modulating the Gut Microbiome: The Role of Probiotics & Prebiotics

Presented by:  
Stephen Olmstead, MD



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Medical Education Specialist - Asheville



## **Stephen Olmstead, MD**

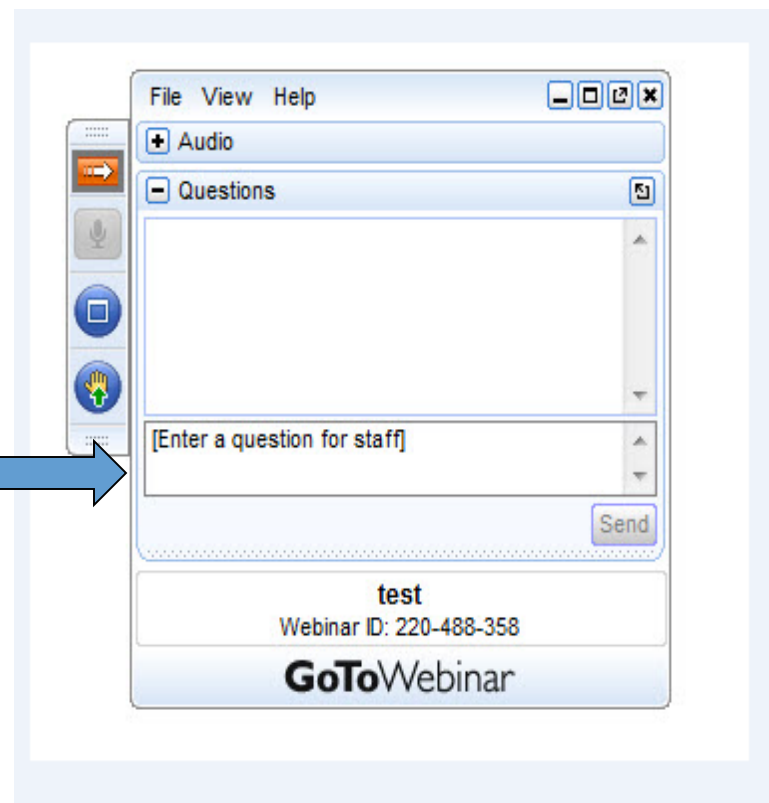
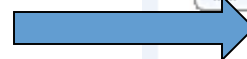
**Chief Science Officer  
ProThera Inc.**



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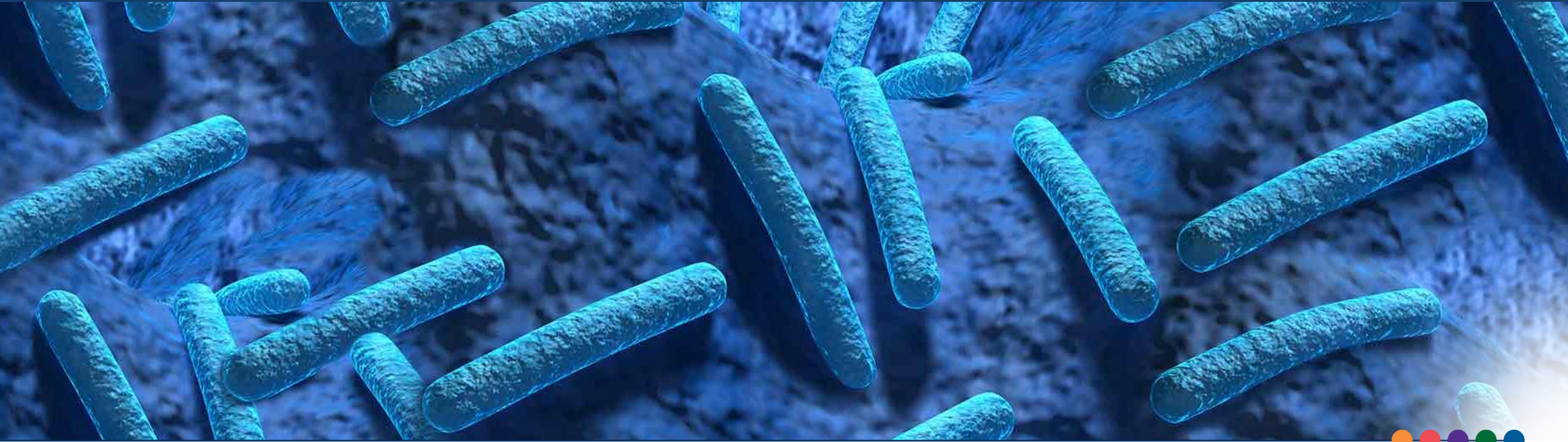
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# The Human Intestinal Microbiota

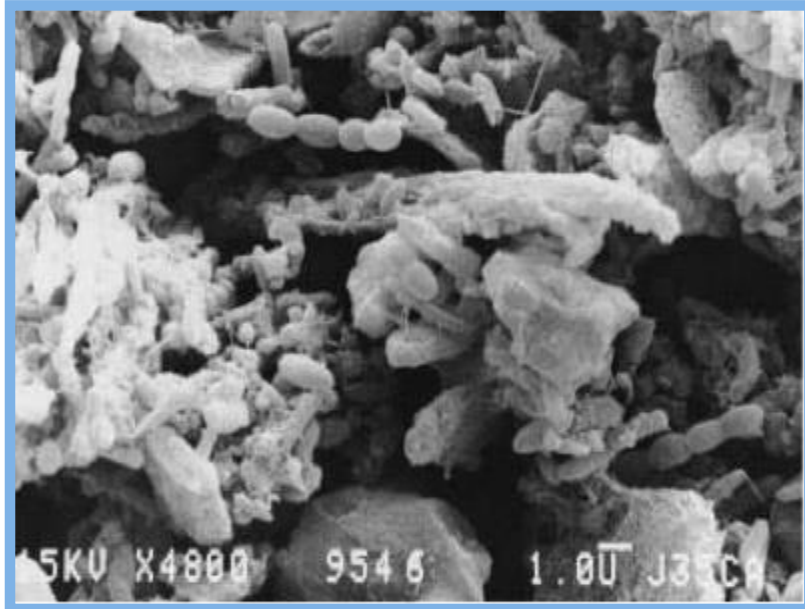


**Human Colon**  
false color barium enema

- **100 trillion microorganisms**
- **10 x number human cells**
- **>150 x number human genes**
- **>1800 genera by rRNA**
- **15,000-36,000 species by rRNA**
- **>500 cultured species**
- **Dominated by 2 divisions**
  - **Firmicutes (64%)**
  - **Bacteroidetes (23%)**
- **99% anaerobic**



# The Intestinal Microbiota Organ



**Colonic mucosa**  
scanning electron microscopy

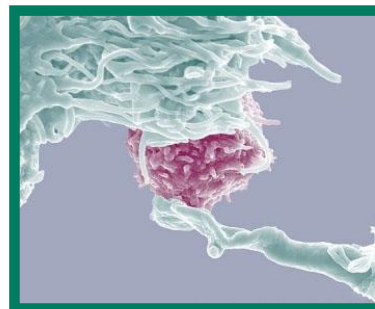
- **Unique & vital organ**
- **Weighs 1.5 Kg**
- **Metabolic activity rivals liver**
- **Immune & GI maturation**
- **Normal CNS development**
- **Colonization resistance**
- **Immune system modulation**
- **Metabolic modulation**





# Transfer of Maternal Microbiota

Maternal microbiota  
secreted in breast  
milk



Maternal microbiota  
transferred to lymphocytes



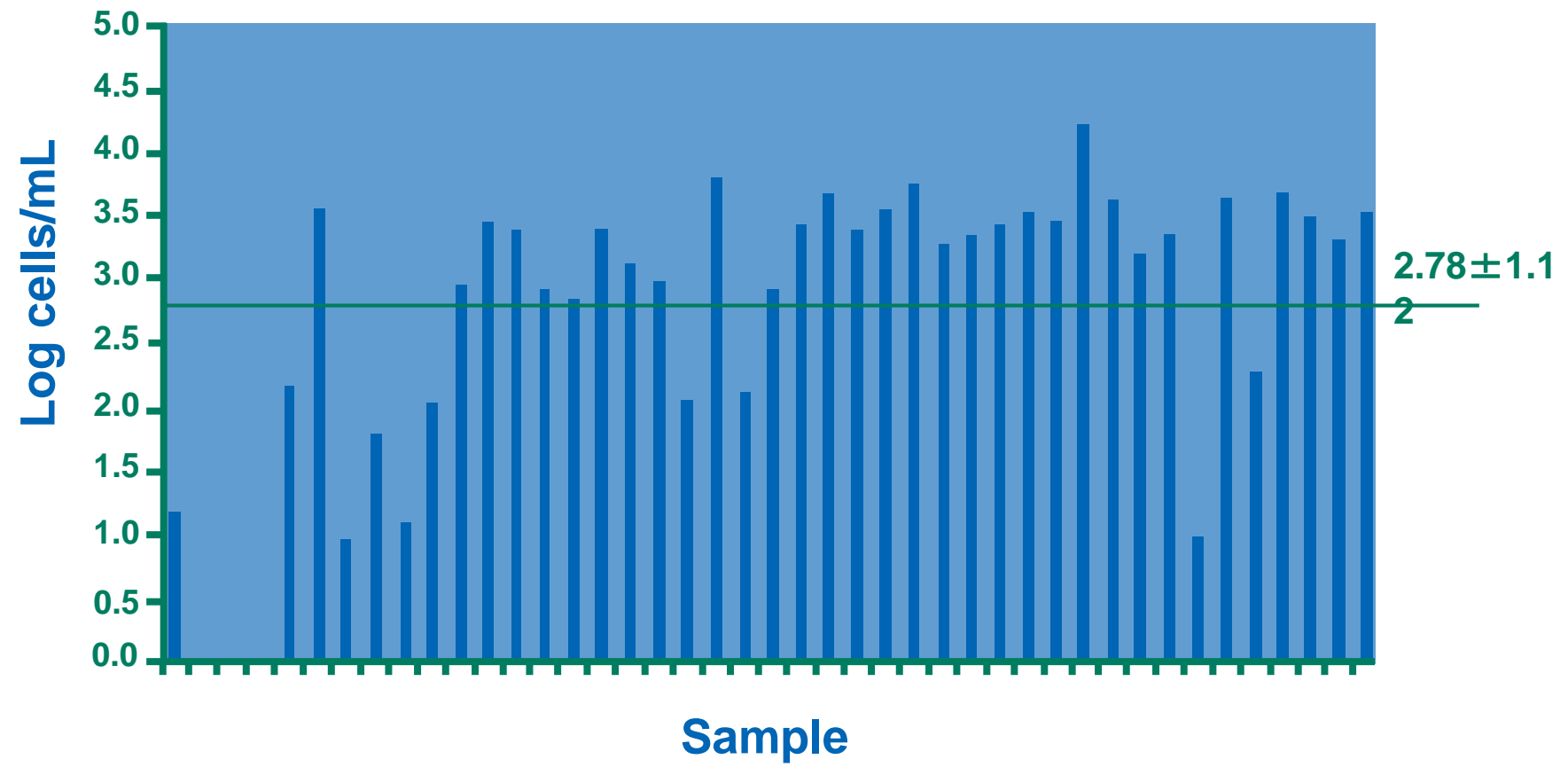
Dendritic cells  
sample maternal microbiota





# Breast Milk *Bifidobacterium* Content

## Quantitative Real-Time PCR 43 Nursing Mothers





# Prenatal Microbial Exposure

Bacteria Isolated from Amniotic Fluid & Meconium

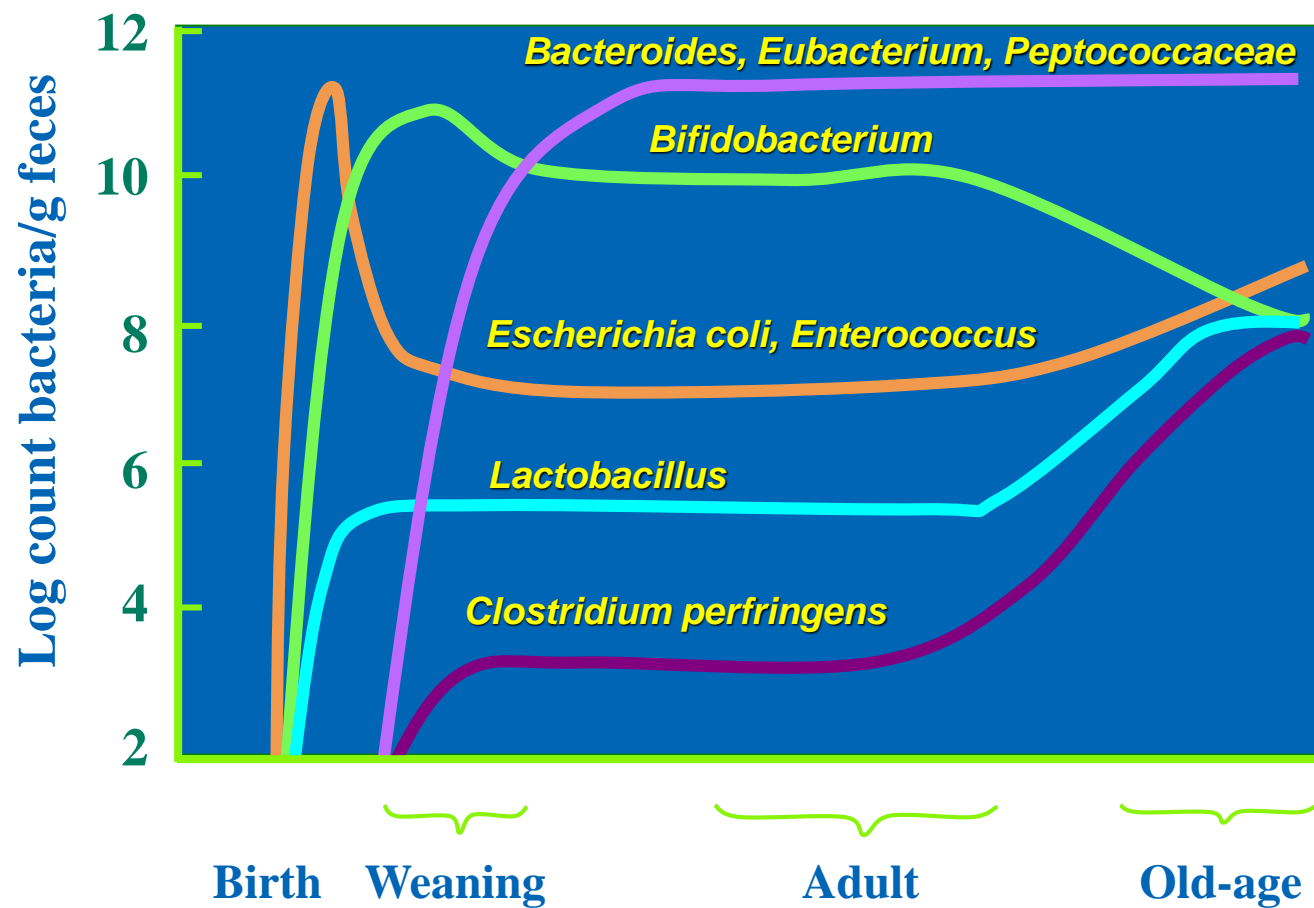


Fetal ultrasound

- *Enterococcus*
- *Staphylococcus*
- *Streptococcus*
- *Leuconostoc*
- *Bifidobacterium*
- *Rothia*
- *Enterobacter*
- *Klebsiella*
- *Parabacteroides*
- *Bacteroides*



# Changes in Microbiota with Age





# GI Microbiota – A Balanced Microecosystem

## Potentially Harmful Bacteria

- Diarrhea/constipation
- Pain
- Infections
- Production of Toxins
- Inflammation

*Pseudomonas*

*Proteus*

*Staphylococci*

*Clostridia*

## Potentially Helpful Bacteria

- Inhibition of exogenous and/or harmful bacteria
- Modulation of immune functions
- Aid in digestion and/or absorption
- Stimulate GI motility
- Synthesis of vitamins

**Potential Probiotic Bacteria**

*Enterococci*

*E. coli*

*Lactobacilli*

*Streptococci*

*Eubacteria*

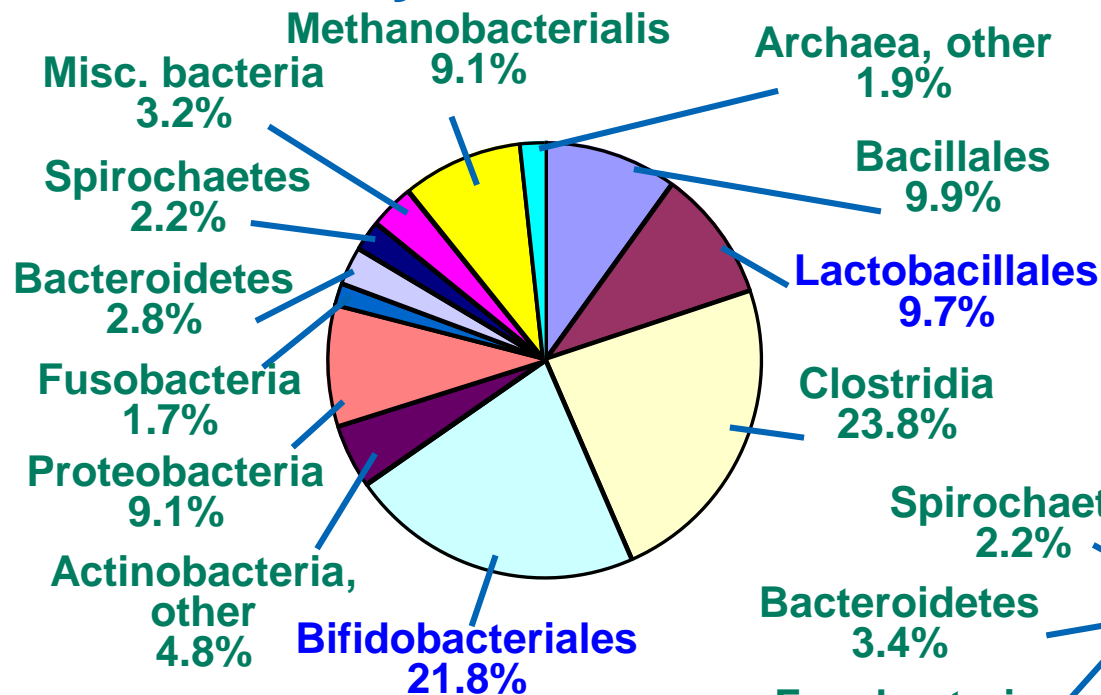
*Bifidobacteria*

*Bacteroides*



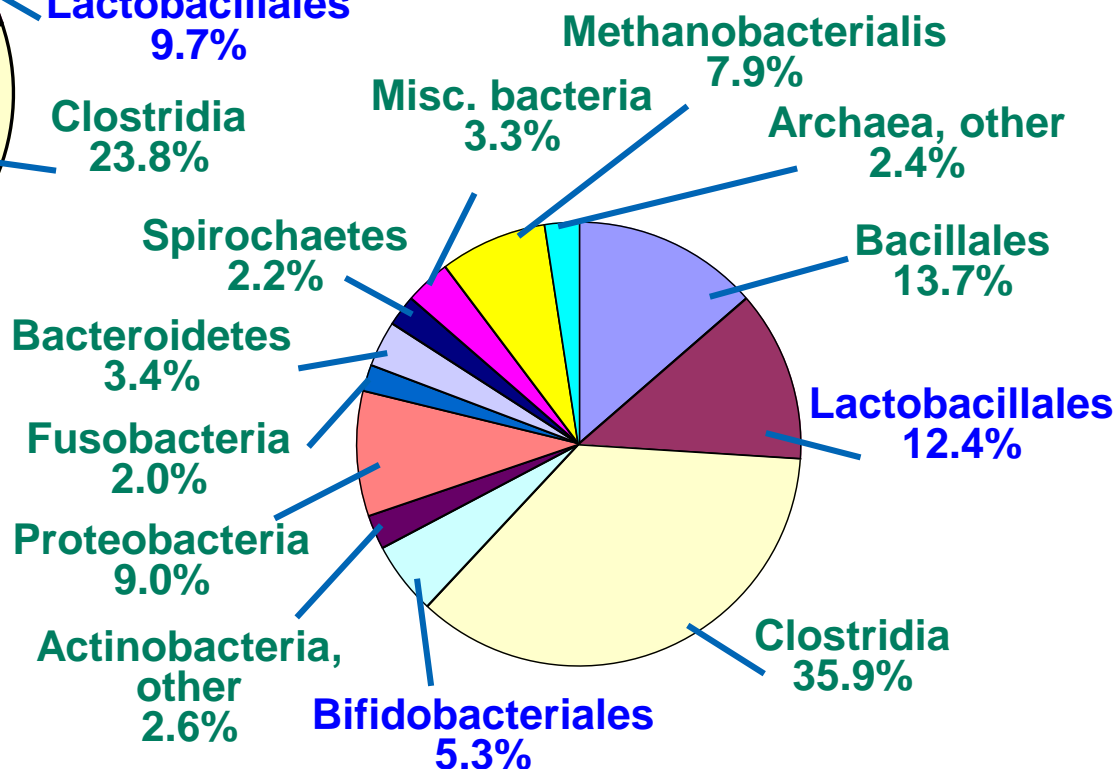
# Metagenomic Analysis of the Human Distal Gut Microbiome

## 28-y/o female



Direct blastX contig analysis of DNA sequencing ~78 million base pairs

## 37-y/o male

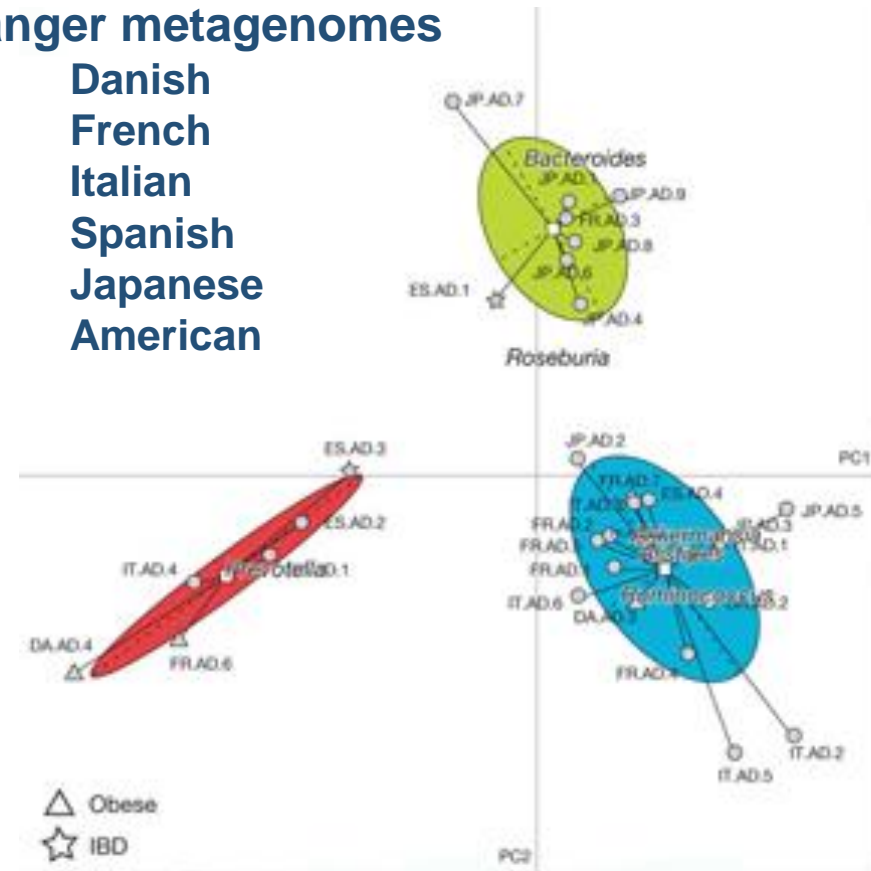




# Gut Microbiota Enterotypes

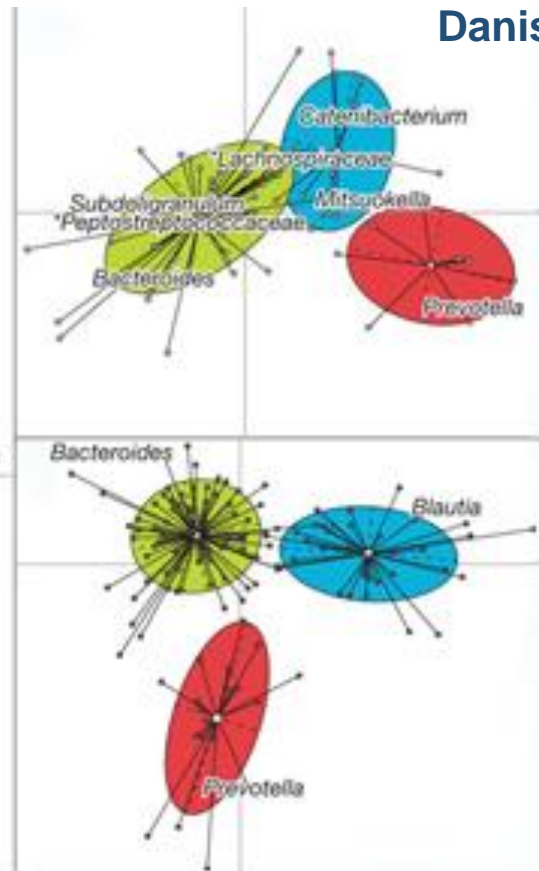
33 Sanger metagenomes

- Danish
- French
- Italian
- Spanish
- Japanese
- American



85 Sanger metagenomes

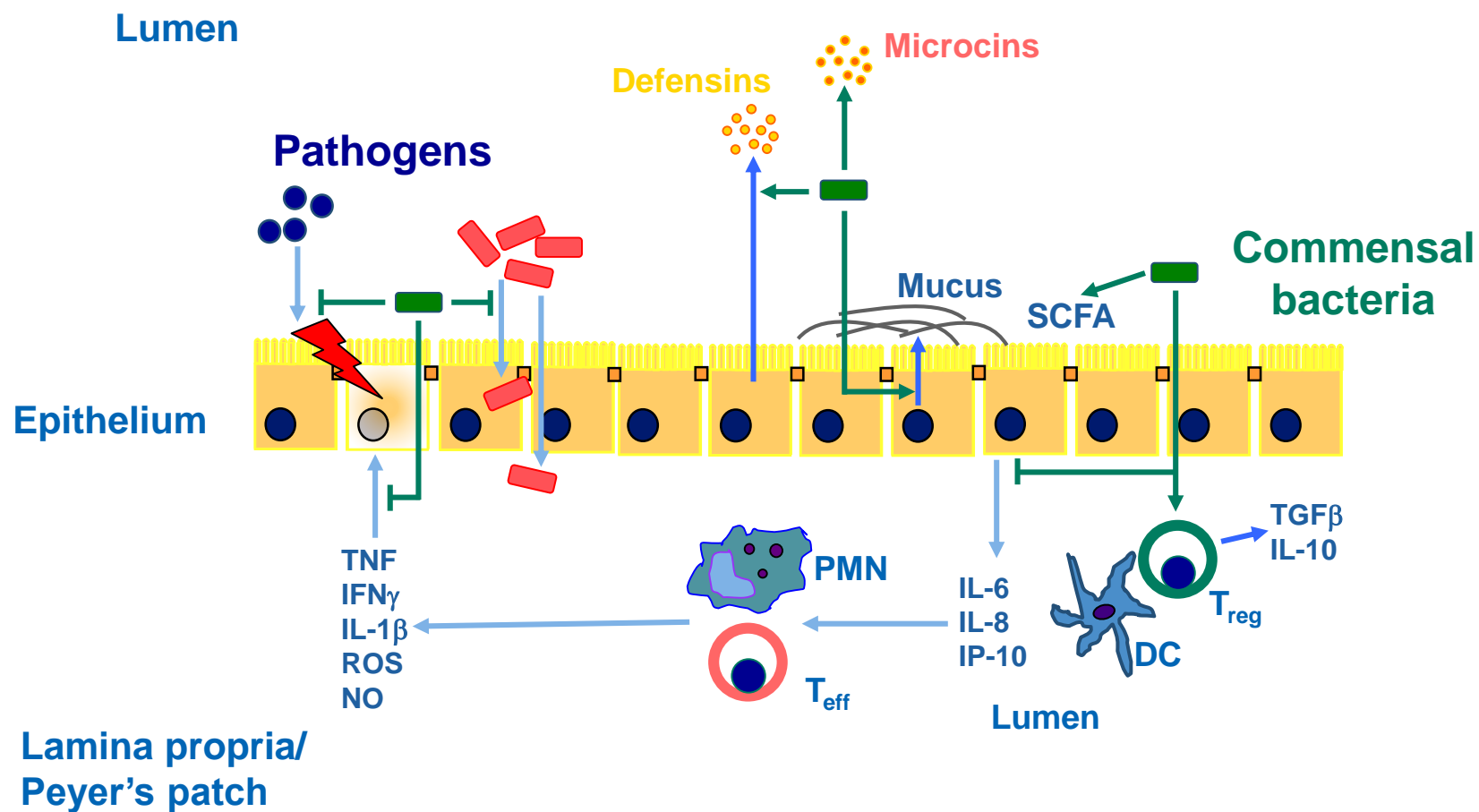
Danish



154 pyrosequenced 16S sequences  
American females



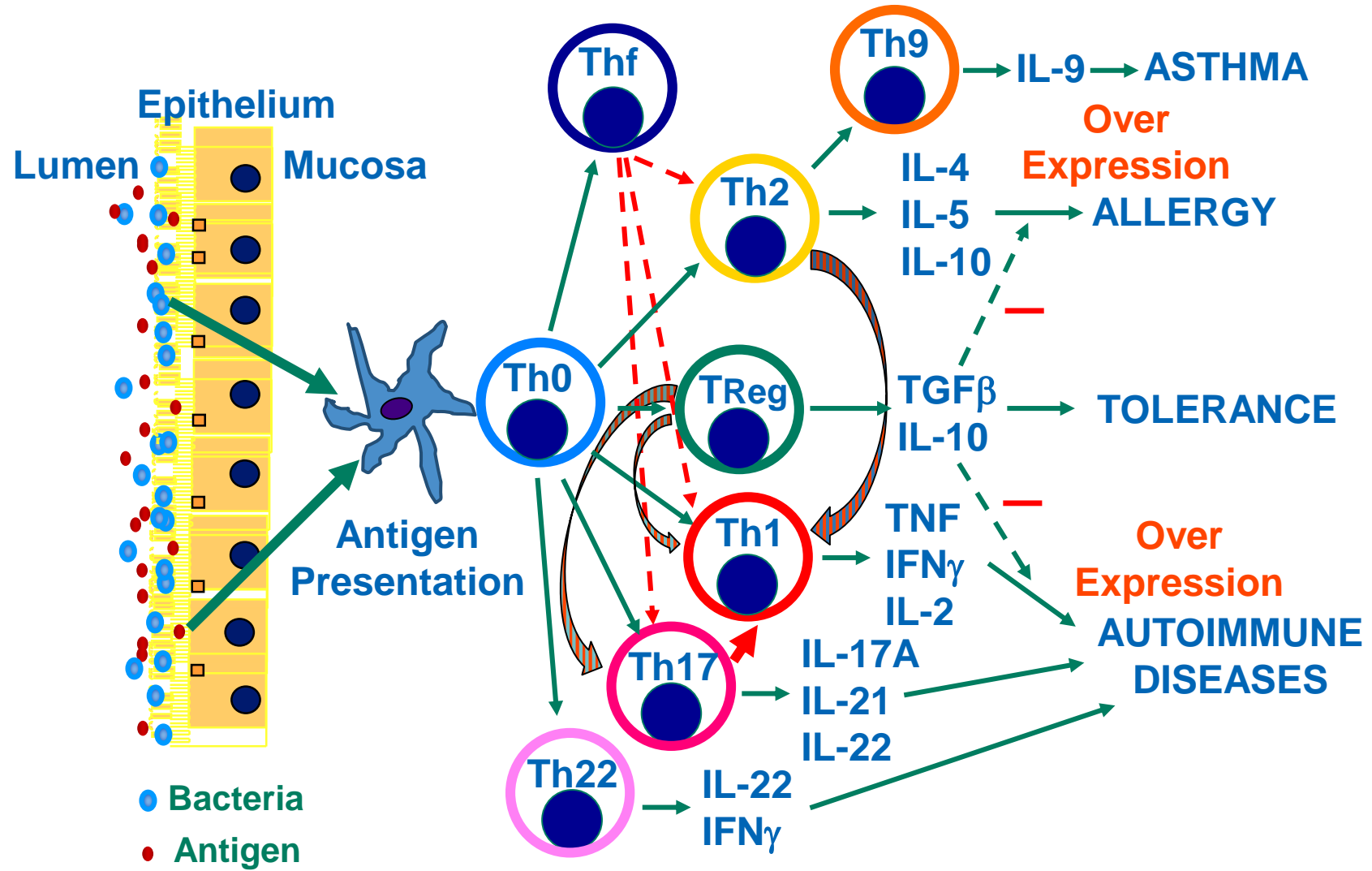
# Microbiota Maintains Intestinal Integrity







# Gut Associated Lymphatic Tissue T Cell Activation & Differentiation





# Modulating the Gut Microbiome

- **Diet**
- **Probiotics**
- **Prebiotics**
- **Antibiotics**
- **Fecal transplantation**



# Definitions

## Probiotics

- 1965 Lilly & Stillwell - microbe produced growth promoting factors
- 1989 Fuller - live microbial feed supplements, which benefit the host by improving intestinal microbial balance
- 2001 “viable microbial food supplements which beneficially influence the health of humans.”  
International Life Sciences Institute Europe, consensus document



# Definitions

## Prebiotics

Gibson & Roberfroid - non-digestible substances that stimulate the growth and/or metabolic activity of selected GI microbes leading to health benefits

## Synbiotics

Gibson & Roberfroid - a food or supplement that combines pro- & prebiotics



# Probiotics - A Brief History



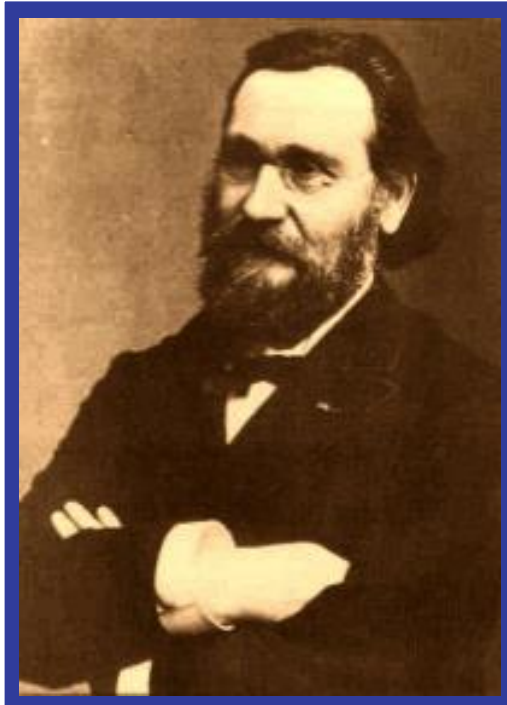
**Cacik**

**Turkish yogurt dish**

- Essential probiotics
- Probiotics on fruit & vegetables
- 10,000 BCE fermented beverages
- 3,000 BCE yogurt
- Hippocrates (460-370 BCE)  
Sour milk for GI disorders
- Pliny the Elder (23-79 CE)  
Health benefits of sour milk
- Francis I (1476-1531)  
Cured of dysentery by yogurt



# The Godfather of Probiotics



“The dependence of the intestinal microbes on the food makes it possible to adopt measures to modify the flora in our bodies and replace the harmful microbes with useful microbes.”

*The Prolongation of Life 1907*

Eli Metchnikoff  
Nobel laureate 1908  
1848-1916



# Types of Probiotics

- **Lactic acid bacteria**

  - Lactobacillus* species

  - Bifidobacterium* species

  - Streptococcus thermophilus*

  - Enterococcus faecium*

  - Lactococcus* species

  - Leuconostoc* species

  - Pediococcus* species

- **Non-lactic acid bacteria**

  - Bacillus* species

  - Propionibacterium* species

  - E. coli* Nissle 1917

- **Non-pathogenic yeast**

  - Saccharomyces boulardii*



# *Lactobacillus* Characteristics

- Gram-positive, non-sporulating rods or coccobacilli
- Homofermentative (primarily lactic acid)
- Heterofermentative  
(lactic acid, CO<sub>2</sub>, ethanol & acetic acid)
- Digest & metabolize proteins & carbohydrates
- Synthesize B vitamins & vitamin K
- Catabolize bile salts
- Enhance innate & acquired immunity
- Inhibit pro-inflammatory mediators
- Antimicrobial activities against array of pathogens:
  - *Pseudomonas*, *E. coli*, *Staph. aureus*, *Salmonella*,
  - *Shigella*, *C. difficile*, *Candida* & *Helicobacter pylori*





# *Lactobacillus* Probiotics

- *L. acidophilus*
- *L. brevis*
- *L. bulgaricus*
- *L. casei*
- *L. crispatus*
- *L. fermentum*
- *L. gasseri*
- *L. helveticus*
- *L. jensenii*
- *L. johnsonii*
- *L. paracasei*
- *L. plantarum*
- *L. reuteri*
- *L. rhamnosus*
- *L. salivarius*





# *Lactobacillus acidophilus*

- Prototypic probiotic
- Many strains reclassified
- Transient GI species
- Obligate homofermentative; DL-lactate isomers
- Resistant to acid, bile, pepsin & pancreatin
- >20 known peptidases; breaks down casein & gluten
- Ferments lactose, other sugars & polysaccharides
- Antagonizes array of pathogens
- Reduces GI concentrations of carcinogenic enzymes





# *Lactobacillus rhamnosus*



- Most studied probiotic
- Relatively fragile
- Transient GI species
- Facultative heterofermentative; L(+)-lactate isomer
- Excellent colonic mucosal adherence
- More peptidases than any other *Lactobacillus*
- Enhances innate & acquired immunity
- Inhibits proinflammatory cytokines
- Antagonizes rotavirus & *C. difficile*
- Suppresses enterohemorrhagic *E. coli* internalization



# *Lactobacillus casei*



- Hardy, adaptive probiotic
- Closely related to *L. rhamnosus*
- Transient species
- Proline-specific peptidases
- Facultative heterofermentative; L(+)-lactate isomer
- Critical for dendritic cell differentiation
- Augments number intestinal IgA-producing cells
- Decreases proinflammatory cytokines secretion
- Inhibits EHEC intestinal cell adherence & invasion



# *Lactobacillus plantarum*



- Ubiquitous on plants
- Lacking in modern diets
- Transient GI species
- Facultative heterofermentative; DL-lactate isomers
- Highly resistant to acid & bile
- Facilitates induction IL-10, central regulatory cytokine
- Decreases production of inflammatory mediators
- Supports intestinal barrier function
- Reduces translocation of gut flora
- Antagonizes *C. difficile*



# *Bifidobacterium* Characteristics

- Gram-positive, non-sporulating rods or Y-shaped
- Strictly anaerobic & fastidious
- Unique metabolic hexose pathway – “Bifidus shunt”
- All metabolize lactose
- Ferment non-digestible oligosaccharides
- Synthesize B vitamins & vitamin K
- Enhance innate & acquired immunity
- Inhibit proinflammatory mediators
- Inhibit pathogens via organic acids & H<sub>2</sub>O<sub>2</sub>



# *Bifidobacterium* Probiotics

- *B. adolescentis*
- *B. animalis*
- *B. bifidum*
- *B. breve*
- *B. infantis*
- *B. lactis*
- *B. longum*
- *B. thermophilum*





# *Bifidobacterium longum*

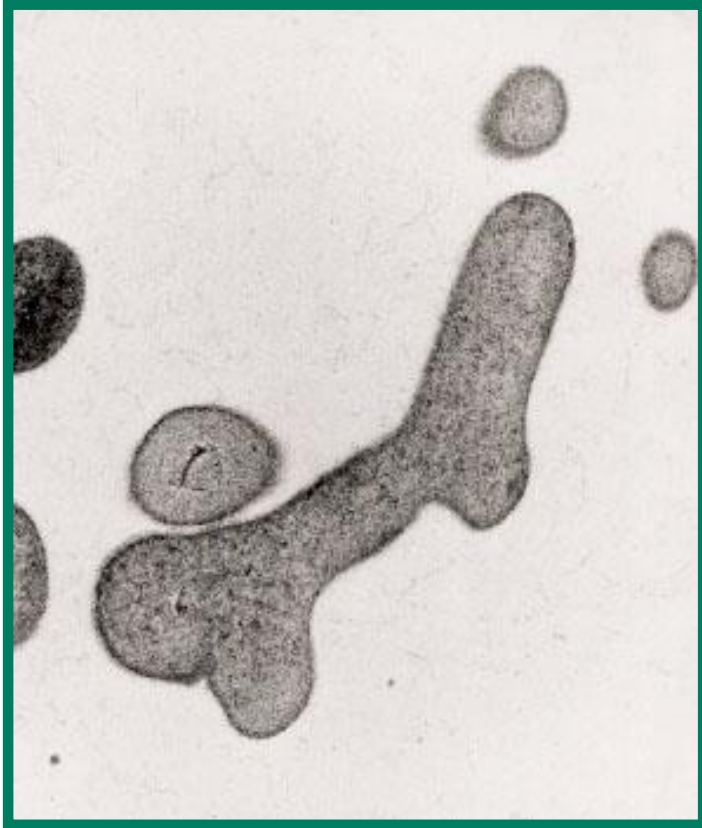
- Often dominant GI bifidobacteria
- Ferments array of oligosaccharides
- Resistant to bile salts
- Inhibits enterotoxigenic *E. coli* receptor binding & translocation
- Inhibits *Clostridium* proliferation
- Enhances GI sIgA response to dietary antigens
- Modulates cytokine response to respiratory antigens







# *Bifidobacterium bifidum*

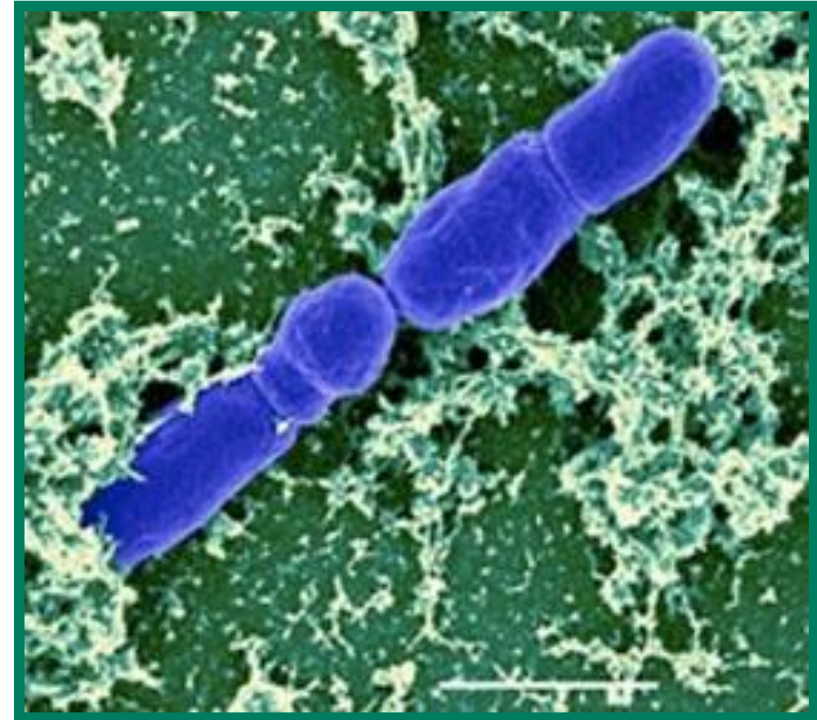


- Present in large numbers
- Reduced in allergic infants
- Populations decline with age
- Suppresses total & antigen-specific IgE production
- Enhances IgM & IgG responses to select antigens
- Activates B cell IgA secretion
- Enhances IgA response to *C. difficile* toxin A
- With *L. acidophilus*, supports normal flora during antibiotic Rx; reduces (+) *C. difficile* toxin A testing



# *Bifidobacterium infantis*

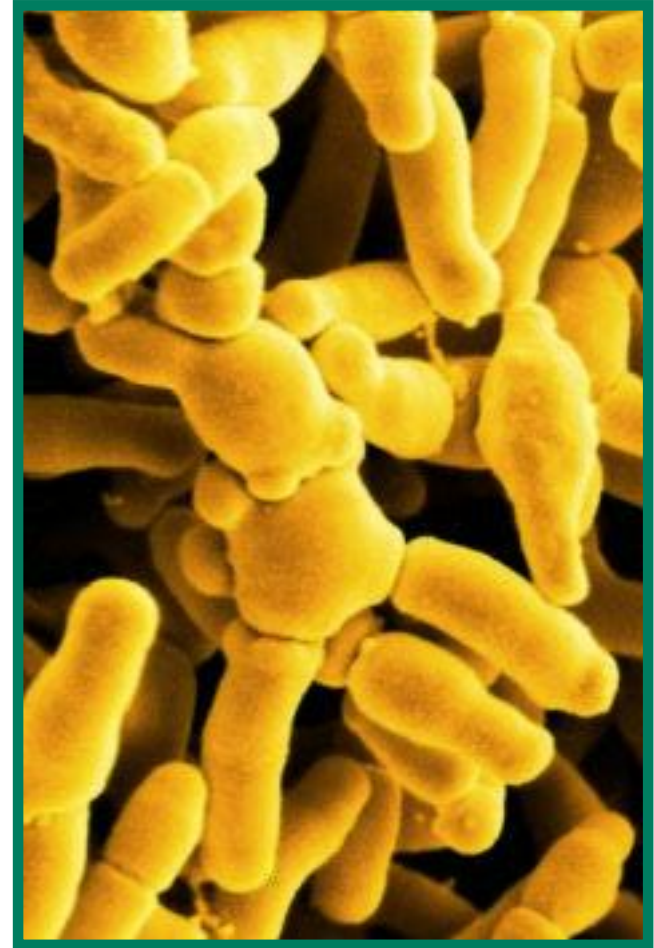
- Frequent in infants
- Rare in adults
- Suppresses populations of *Bacteroides vulgaris*
- Reduces proinflammatory cytokine production
- Improves cytokine ratios in IBS
- With *L. acidophilus*, reduces risk of necrotizing enterocolitis in very low birth weight infants
- Promotes normal microbiota in children with diarrhea





# *Bifidobacterium breve*

- Reduces *Bacteroides fragilis* & *C. perfringens* populations
- Improves weight gain in very low birth weight infants
- Stimulates Peyer's patch B cell proliferation
- Resistant to acid, bile, pepsin & pancreatin
- Enhances B cell antibody production
- Eliminates *Camphylobacter jejuni*
- Antagonizes rotavirus & decreases rotavirus shedding





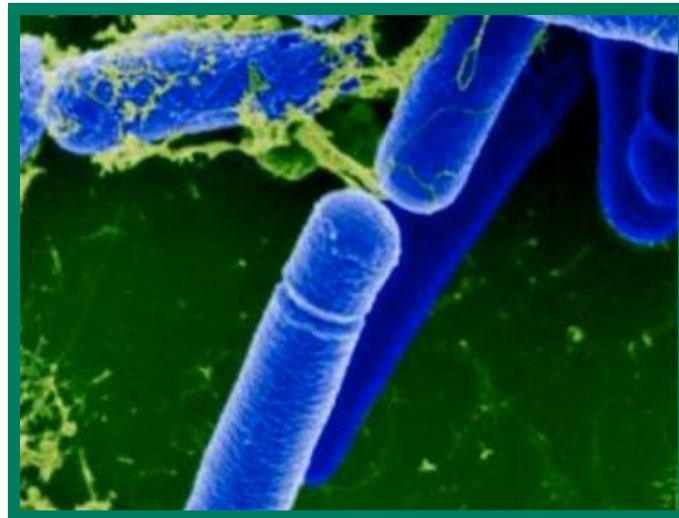
# *Bacillus* Characteristics

- Gram-positive, sporulating rods
- Facultative anaerobes
- Fermentation end products include lactate, acetate, ethanol, acetoin, 2,3-butandiol
- Transient commensals
- Used in traditional fermented fish, manioc, soy foods
- Enhance innate & acquired immunity
- Inhibit pathogens via bacteriocins & lipopeptides
- Promote colonocyte health via heat shock proteins



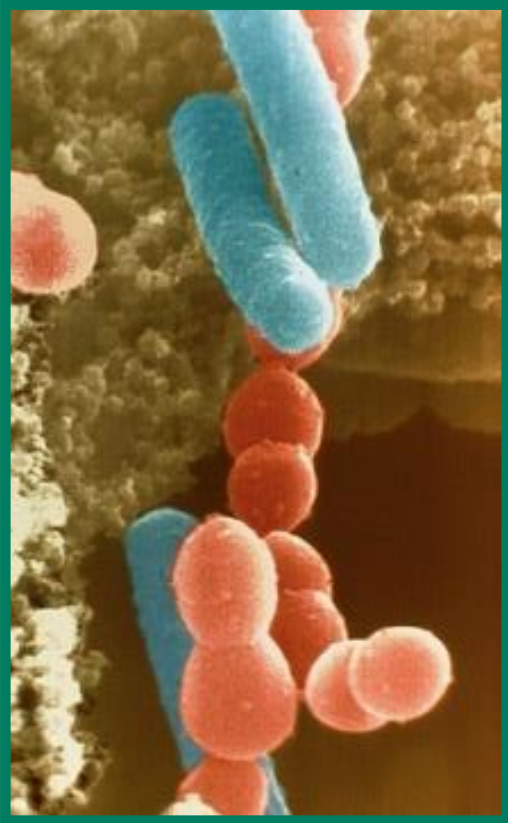
# Bacillus Probiotics

- *B. cereus*
- *B. clausii*
- *B. coagulans*
- *B. laterosporus*
- *B. licheniformis*
- *B. pumilus*
- *B. subtilis*





# *Streptococcus thermophilus*

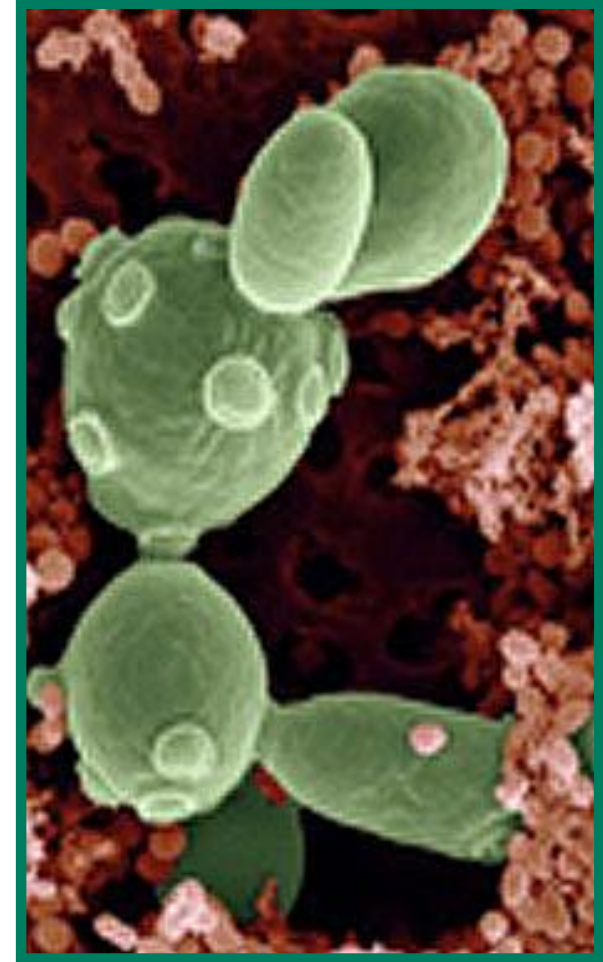


- Yogurt & cheese starter
- Highly adapted to lactose
- Transient GI species
- Protocooperation with *L. bulgaricus*
- Formate, acetoin, acetylaldehyde, diacetyl & acetate
- Inhibits pathogen proliferation
- Reduces DNA damage & premalignant lesions
- Clinical uses from rotavirus to ulcerative colitis
- Protection from pathogenic *Streptococcus* spp.



# *Saccharomyces boulardii*

- Transient, non-pathogenic yeast
- Heat & pH resistant
- Active ingredient in Asian medicinal teas
- Increases brush border enzyme activities
- Secretes leucine aminopeptidase;  
    supports against dietary protein allergies
- Increases gut short-chain fatty acid concentrations
- Increases intestinal sIgA; crypt cell Ig receptors
- Protease that inhibits *C. difficile* toxins A & B
- Antagonizes *Candida albicans* in the gut
- Effective against *Entamoeba histolytica* & *Giardia*





# Probiotics - Documented Uses

- Antibiotic-associated diarrhea
- *C. difficile*-associated diarrhea
- Community acquired diarrhea
- Traveler's diarrhea
- Inflammatory bowel disease
- Irritable bowel disease
- Vaginal dysbiosis
- Urinary tract infections
- Allergies, atopic dermatitis, eczema
- Lactose intolerance
- Hyperlipidemia





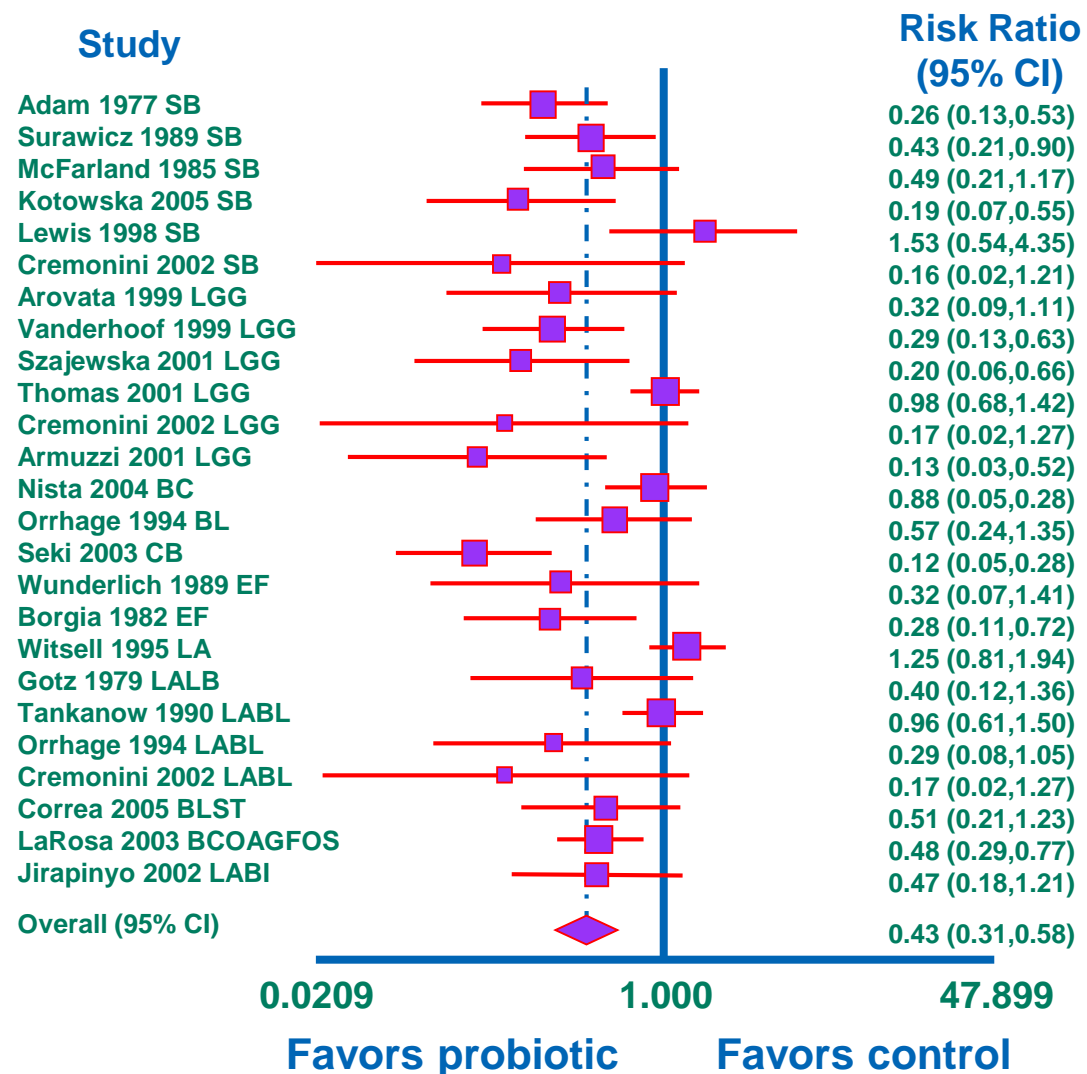
# Antibiotic-associated Diarrhea



- Disrupted GI microbiota
- Associated with ↓ short-chain fatty acids (SCFA)
- Occurs in 5-39% of adults; 11-50% of children
- Up to 50% of cases due to *Clostridium difficile*
- High relapse rate with *Clostridium difficile*
- Onset up to 2 mos. post antibiotics



# Meta-analysis: Probiotics & Antibiotic-associated Diarrhea



**Of 25 RCT:**

**Overall RR= 0.43  
(95% CI 0.31- 0.58)**



# Probiotics, Prebiotics & Antibiotics

- Use *Saccharomyces boulardii* 10 billion CFU/d
- Use *Lactobacillus rhamnosus* 5 billion CFU/d
- Use multistrain formulation with *Bifidobacterium*
- Consider prebiotics to increase SCFA-producing populations - *Eubacterium*, *Roseburia*
- Use during antibiotic Rx
- Take 1 hr before or 2 hrs post antibiotic dose
- 30 day total duration



# Inflammatory Bowel Disease (IBD)

- Crohn's disease
- Ulcerative colitis
- Pouchitis
- Abnormal response to certain commensal bacteria
- High numbers of *Bacteroides*, *Enterobacteriaceae*, & *Peptostreptococcus*
- Low numbers of *Bifidobacterium*



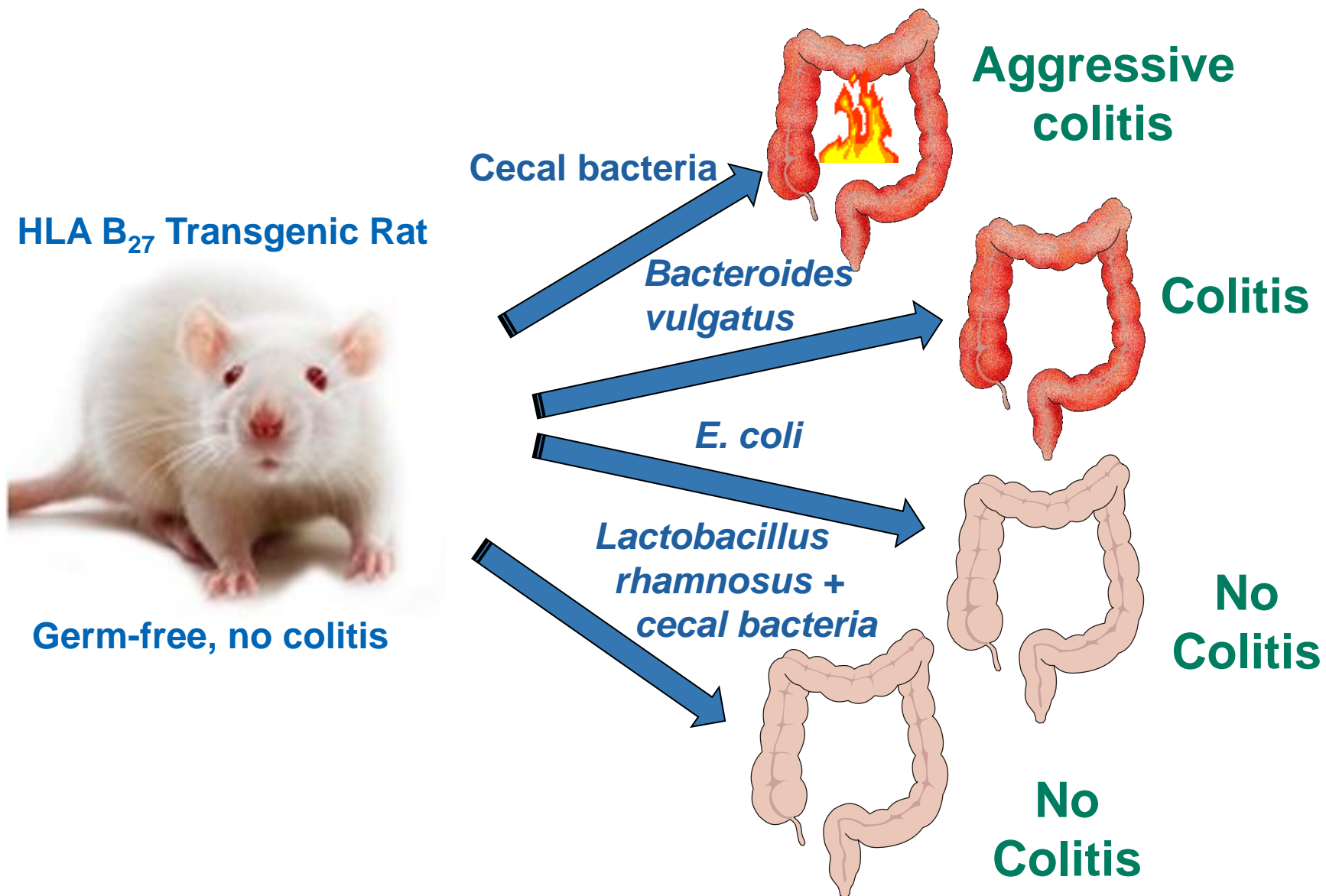
**Colitis**



**Normal colon**

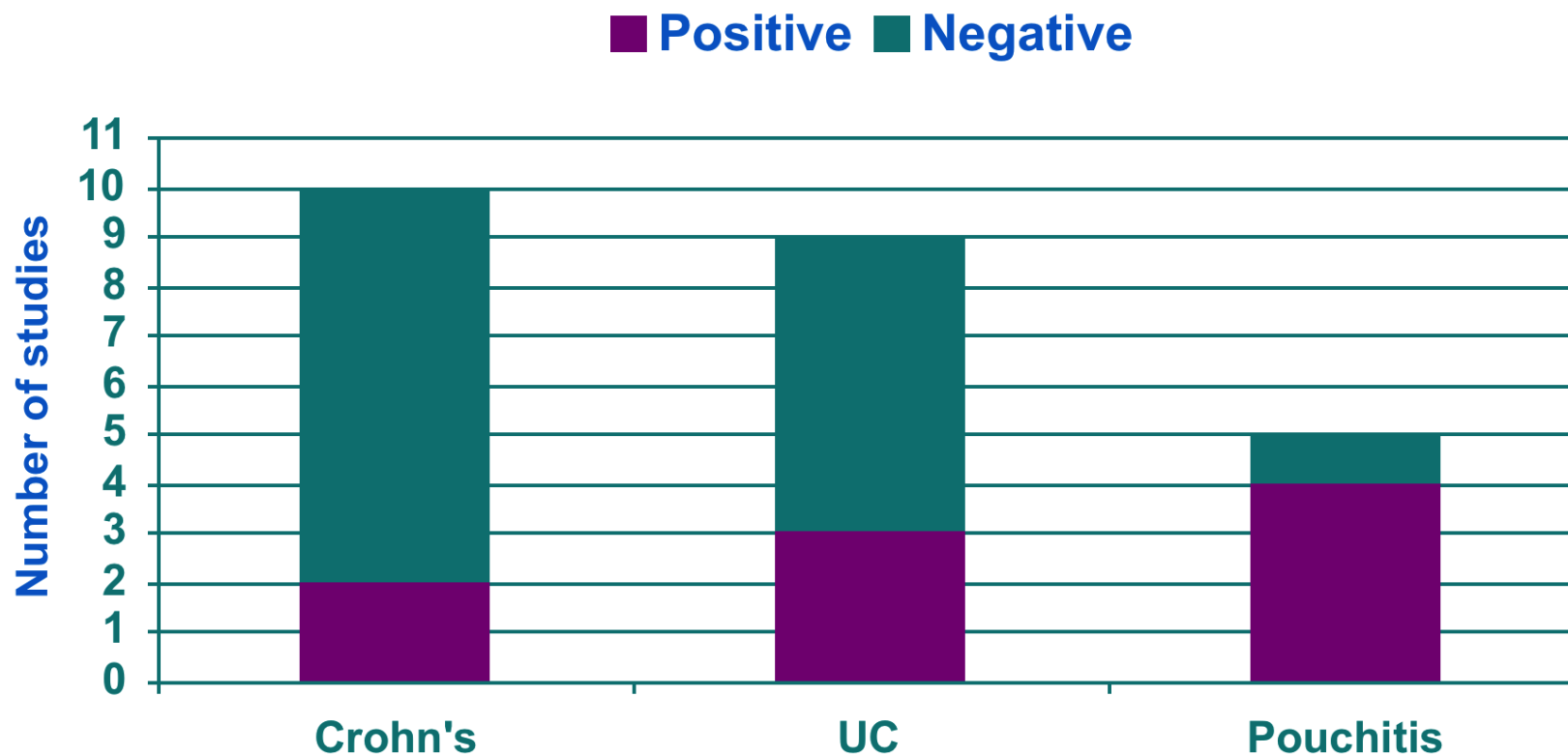


# IBD Animal Model





# Summary of 25 RCTs of Probiotics for IBD



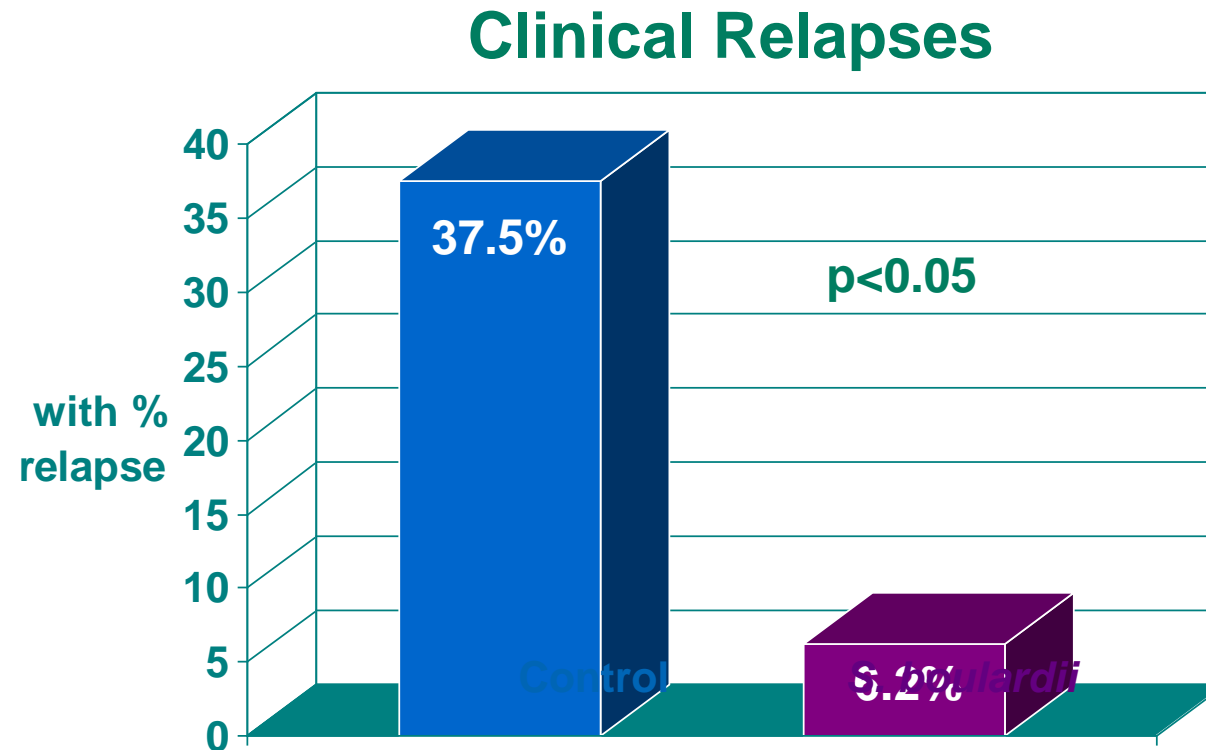


# Treatment of Crohn's Disease by *S. boulardii*

32 patients with CD in remission

Mesalamine (3 g/d) vs. mesalamine (2 g/d) & *S. boulardii* ( $2 \times 10^{10}$ /d)

6 mos. Rx



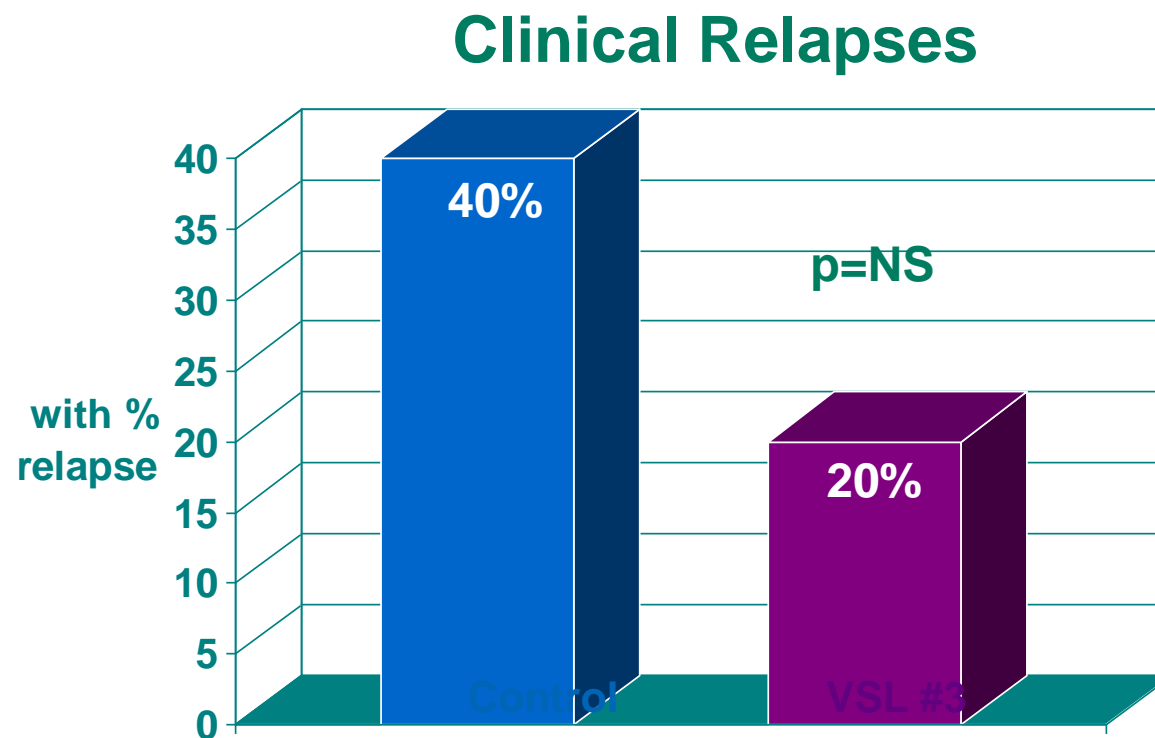


# Prevention of Post Operative Crohn's Disease by VSL #3

40 patients with CD in remission

Mesalamine (4 g/d) vs. VSL #3 ( $3 \times 10^{11}$ /d) after rifaximin

9 mos. Rx







# Treatment of Pouchitis by VSL #3

## Gionchetti 2000

- 40 adults ( $2 \times 10^{12}$  CFU/d)

## Mimura 2004

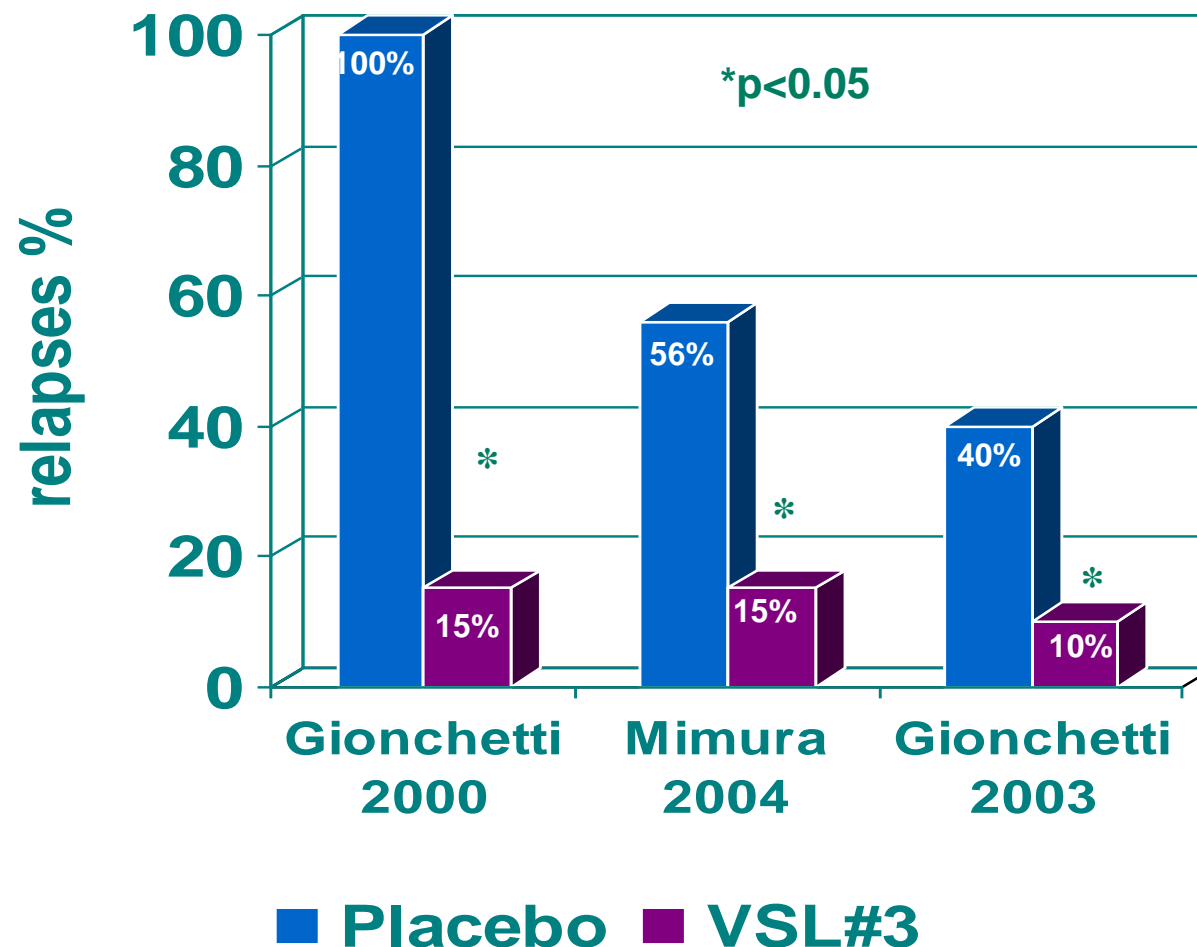
- 36 adults ( $3 \times 10^{12}$  CFU/d)

## Gionchetti 2003

- 40 adults ( $9 \times 10^{11}$  CFU/d)

Followed for relapses  
(9-12 months)

## Clinical Relapses





# Prebiotic Trials in IBD

Design	Substrate	Dose	Methods	Results	References
DBRCT	Inulin	24 g/d	Ileal pouch-anal anastomosis. Pts. (20) with pouchitis randomized for 6 wks & assessed clinically, endoscopically & histologically	Inulin lowered pH, increased butyrate, reduced <i>B. fragilis</i> , decreased inflammation, & effectively treated pouchitis	Welters et al. <i>Dis Colon Rect</i> 2002;45:621-7
Open Label	Inulin/FOS	15 g/d	Pts. (10) with active Crohn's disease assessed clinically and by laboratory findings.	Significant clinical improvement. Increased <i>Bifidobacterium</i> . Increased DC TLR4 expression.	Lindsey et al. <i>Gut</i> 2006;55:348-55
DBRCT	Inulin/FOS + <i>B. longum</i> 2x10 <sup>11</sup> /d	6 g/d	Pts. (18) with active ulcerative colitis randomized for 1 mo. & assessed clinically, sigmoidoscopically & histologically	Significant clinical improvement. Improved sigmoidoscopy scores. Decreased tissue inflammation. Increased healing.	Furrie et al. <i>Gut</i> 2005;54:242-9



# Probiotics, Prebiotics & IBD

- Crohn's Disease

- Use *Saccharomyces boulardii* 10 B CFU/d
- 3 mos on/1 mo off indefinitely
- Inulin-based prebiotics 6-15 g/d
- Multispecies probiotics (200-400 B CFU/d)

- Ulcerative colitis

- Use *Saccharomyces boulardii* 10 B CFU/d
- Multispecies probiotics (400-800 B CFU/d)
- Inulin-based prebiotics 6-15 g/d

- Pouchitis

- Multispecies probiotics (200-400 B CFU/d)
- Inulin-based prebiotics 6-15 g/d



# Irritable Bowel Syndrome (IBS)

- Common (10-20% adults) benign disorder(s)
- Abdominal pain, bloating, diarrhea/constipation
- Intestinal transit disturbances
- Heightened visceral sensitivity
- Altered GI microbiota
  - Decreased *Lactobacillus*, *Collinsella*
  - Increased *Clostridium*, *Ruminococcus*, *Veilonella*



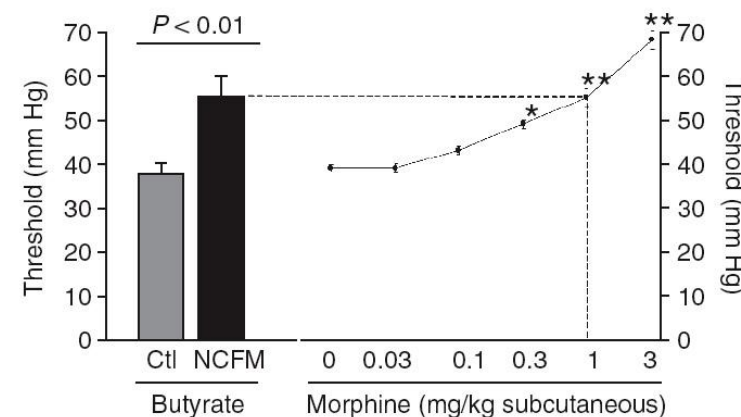
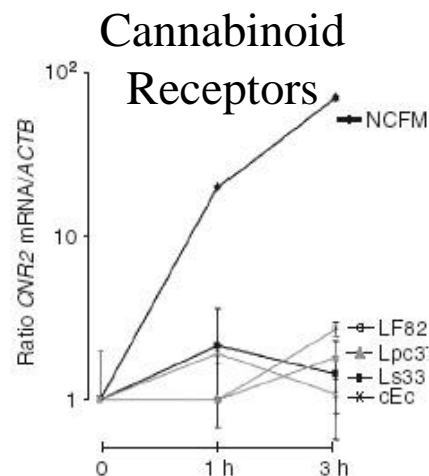
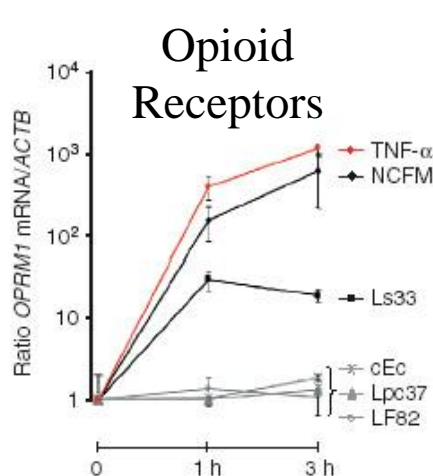
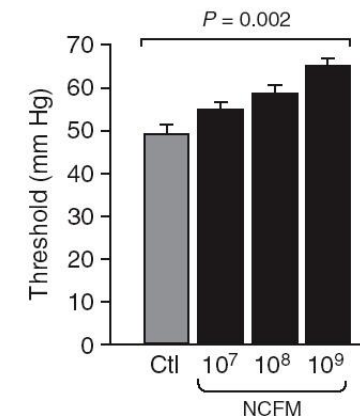
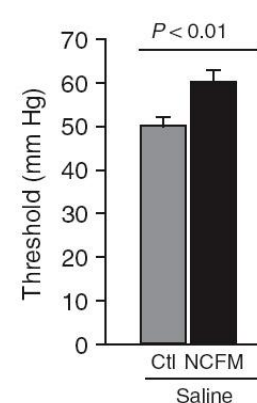


# Lactobacillus acidophilus & Gut Pain

NATURE MEDICINE VOLUME 13 | NUMBER 1 | JANUARY 2007

## *Lactobacillus acidophilus* modulates intestinal pain and induces opioid and cannabinoid receptors

Christel Rousseaux<sup>1-3</sup>, Xavier Thuru<sup>1-3,10</sup>, Agathe Gelot<sup>4-6,10</sup>, Nicolas Barnich<sup>7</sup>, Christel Neut<sup>1-3</sup>, Laurent Dubuquoy<sup>1-3</sup>, Caroline Dubuquoy<sup>1-3</sup>, Emilie Merour<sup>1-3</sup>, Karen Geboes<sup>8</sup>, Mathias Chamaillard<sup>1-3</sup>, Arthur Ouwehand<sup>9</sup>, Greg Leyer<sup>9</sup>, Didier Carcano<sup>9</sup>, Jean-Frédéric Colombel<sup>1-3</sup>, Denis Ardid<sup>4-6</sup> & Pierre Desreumaux<sup>1-3</sup>





# Meta-analysis of Probiotics & IBS

- 19 RCTs; 1650 Pts
- Probiotics significantly better than placebo
- RR =0.71 (95% CI 0.57-0.88)
- NNT = 4 (95% CI 3-12.5)
- Efficacious organisms/formulas
  - *Bifidobacterium infantis*
  - *Lactobacillus plantarum*
  - High-dose, multispecies formula
- Difficult population to study



# Probiotics & IBS

- High-dose (200-400 B CFU/d) multispecies probiotic
- Consider inulin-based prebiotic 10-15 g/d
- If there is a response, indefinite therapy
- Assess for food allergies/sensitivities
- Rule out gluten sensitivity
- Consider digestive enzymes



# Allergies, Asthma & Dermatitis

- Pandemic effecting >20% of world's population
- Incidence of asthma ↑ by 50% from 1980 to 2000
- Related to post industrial lifestyle (Old Friends)
- Altered GI microbiota is implicated







# Probiotics Inducing Immunotolerance

- *L. casei*
- *L. bulgaricus*
- *L. paracasei*
- *L. rhamnosus*
- *B. bifidum*
- *B. breve*
- *S. thermophilus*



T cell & dendritic cell



# Probiotics & Atopic Dermatitis/Eczema

- 10 RCT
- 90% show significant reduction in incidence/severity
- Effective at prevention when given to pregnant women
- Effective given to breast-feeding women
- Effective given to infants in formula
- Protection up to 4 (RR=0.57) & 7 yrs (RR=0.64)
- Probiotics shown to be effective
  - *L. rhamnosus*, *L. acidophilus*, *B. lactis*, *L. reuteri*
  - Combination formulae effective



# Probiotics & Allergic Rhinitis

- Probiotics reduce Sx & improve QOL measures
- Probiotics shown to be effective
  - *L. bulgaricus*, *L. paracasei*, *S. thermophiles*
  - Combination formulae effective





# Prebiotics & Allergies

- GOS & oligofructans increase regulatory T cells
- Prebiotics upregulate sIgA
- GOS/oligofructans ↓ atopic dermatitis in infants
- GOS/oligofructans ↓ allergies to cow's milk
- GOS/oligofructans ↓ allergies, eczema & wheezing up to 18 mos post Rx
- beta-Glucans (1→3; 1→6) reduce allergic rhinitis
- beta-Glucans (1→3; 1→6) reduce IgE levels



# Prebiotics, Probiotics & Allergies

- Consider pre- & probiotics for pregnant women
  - Multispecies, broad spectrum 50-100 B CFU/d
- Consider low D(-)-lactate probiotics for infants
  - Multispecies Infant Formula 10-20 B CFU/d; doses up to 110 B CFU/Kg safe
- Consider GOS/beta-glucan for bottle-fed infants
  - Use 225-550 mg/d until weaned
- Multispecies, broad spectrum for children & adults
  - 50-100 B CFU/d indefinitely if response
- GOS/beta-glucans for children & adults
  - 5-10 g/d indefinitely if response



# Probiotic Formulation Selection

- Monostrain probiotics
- Multistrain probiotics
- Multispecies probiotics
- Protooperation & synergism
- ? antagonisms among species - no evidence
- Efficacy of multispecies formulation for ADD, IBS, URI, UC & pouchitis



# Are Probiotic Benefits Strain-specific?

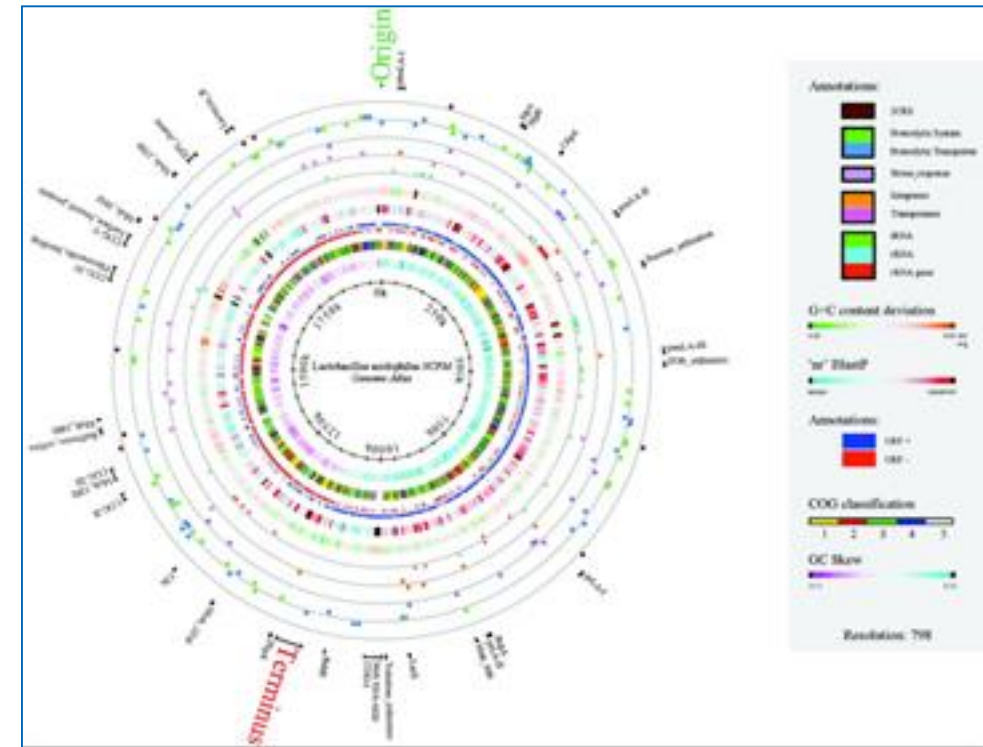
- Strain-specific benefits a marketing claim
- Uncritically echoed by academics & regulators
- Validity requires head-to-head studies - Rare
- *L. rhamnosus* GG has unique pili
- Pili not linked to clinical benefit
- Multiple strains & species have benefit in studies
- Toxicity definitely strain-specific



# *Lactobacillus acidophilus* Gene Sequencing

No significant differences between patented *L. acidophilus* NCFM & *L. acidophilus* La-14

- Genome 99.98% identical
- Single 416-bp deletion in ABC transporter
- 16 single-base pair indels
- 95 SNPs



*L. acidophilus* NCFM Genome





# Probiotic Dosing

- Start low – 10-25 billion CFU/d
- Go slowly – increase dose weekly or as tolerated
- Minimizes gas, abdominal discomfort, diarrhea



# Probiotic Dosing



With or without food?

Stomach pH: fasting: 0.8 – 1.5

with food: 5 – 7

Transit time: 30 min – 1 hr

**Take with food.**



# Probiotic Safety

- Daily doses >1 trillion CFU safe in adults;  
110 billion CFU/Kg in infants
- *Lactobacillus* bacteremia rare; usually endogenous
- *Bifidobacteremia* only in bowel perforation or PID
- *S. boulardii* fungemia in Pts w/ CV catheters
- Probiotics safe in immunosuppressed patients
- Probiotics safe in hospitalized & surgical patients



# Conclusions: Modulating the Gut Microbiome

## The Role of Prebiotics & Probiotics

- Use of multispecies probiotics supported for a variety of GI conditions
- Use of *S. boulardii* supported for AAD, CDAD, IBD, & traveler's diarrhea
- Use of multispecies probiotics supported for prevention & treatment of allergic disorders
- Prebiotics show benefit for IBD and allergies
- Clinical trials to document formulation efficacy
- Outcomes studies - aging, cancer prevention



**Moderator:**  
**Michael Chapman, ND**



**Presenter:**  
**Stephen Olmstead, MD**

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*for more information and  
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# *Questions?*



# Additional Education Materials:

## WWW.GDX.NET

Sample Reports,  
Support Guides,  
Kit Instructions, FAQs,  
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The screenshot shows the Genova Diagnostics website homepage. At the top, the Genova Diagnostics logo is on the left, and navigation links for 'HOME', 'CLINICIANS', and 'PATIENTS' are on the right. The 'CLINICIANS' link is circled in red. Below the navigation is a banner for 'NutrEval® with Genomics' featuring a man and a woman in a kitchen. A 'LEARN MORE' button is present in the banner. Below the banner are three main content blocks: 'Getting Started' with a 'NEW USERS' button, 'Test Menu' with a 'SEARCH TESTS' button, and 'MYGDX Login' with a 'LOG IN' button. The 'LOG IN' button is circled in red. At the bottom, there is an 'Online Education' section with a 'LEARN NOW' button, which is also circled in red. The text in the 'Online Education' section reads: 'Visit our Medical Education section for access to LIVE GDX Webinars, Educational Modules, Conferences, and LEARN GDX – short learning modules that demonstrate the clinical utility and diagnostic significance of key biomarkers. The modules are absolutely free to view!' and 'Start Using These Free Resources Today!'.



# Additional Questions?

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**Please schedule a complimentary appointment with one of our Medical Education Specialists for questions related to:**

- Diagnostic profiles featured in this webinar
- How Genova's profiles might support patients in your clinical practice
- Review a profile that has already been completed on one of your patients

***We look forward to hearing from you!***



# Upcoming <sup>LIVE</sup> GDX Webinar Topics

## October 2016

*–Using the Elimination Diet in Clinical Practice*

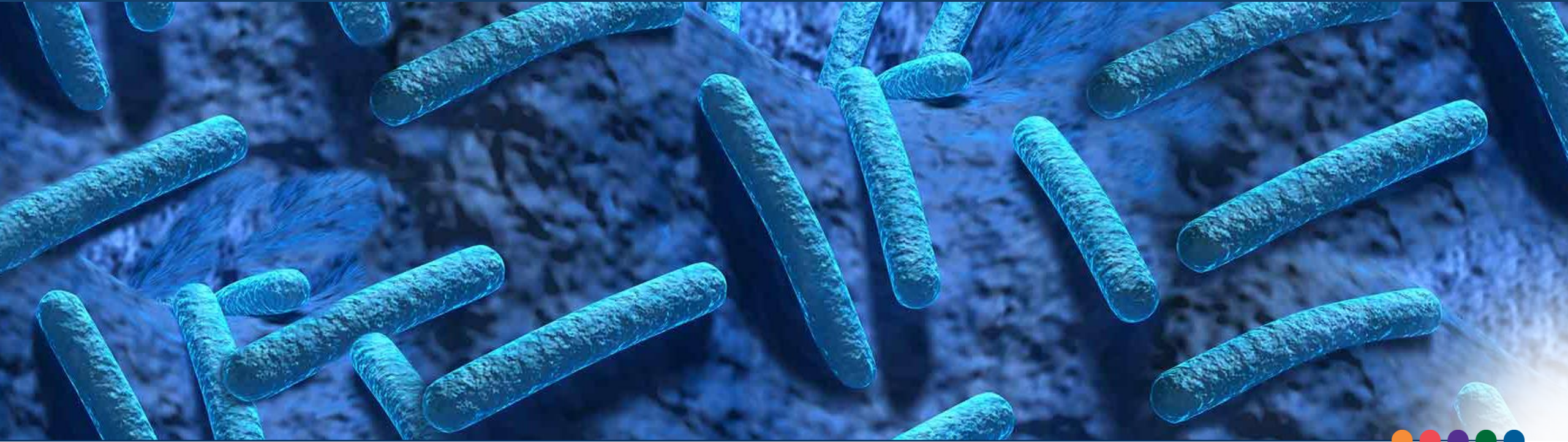
- Kathy O’Neil-Smith, MD

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# Modulating the Gut Microbiome: The Role of Probiotics & Prebiotics

Presented by:  
Stephen Olmstead, MD



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