Metabolomix+



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CLINICIAN INFORMATION

METABOLOMIX+: A NON-INVASIVE PERSONALIZED ASSESSMENT

Metabolomix⁺ is a urinary nutritional evaluation that includes key organic acids and amino acids to evaluate the functional need for antioxidants, B-vitamins, minerals, digestive support, and amino acids.

Metabolomix⁺ also includes the option of additional Essential & Metabolic Fatty Acids, Toxic and Nutrient Elements, plus Genomics.

The Metabolomix+ provides targeted nutrient therapeutics designed to give insight into:

- Mood disorders^{1,2}
- Cardiovascular disease^{3,4}
- Metabolic syndrome^{5,6}
- Fatigue^{7,8}

- Obesity and weight issues^{9,10}
- Cognitive decline11,12
- Athletic optimization^{13,14}
- Malnutrition¹⁵

Metabolomix+ consists of:

- Organic Acid Testing (OAT) providing insight into nutritional cofactor needs, digestive issues, cellular energy production, neurotransmitter metabolism, detoxification, and oxalates.
- Amino Acid Analysis features 37 urine amino acids. This assesses
 nutritionally essential and non-essential amino acids, as well as
 intermediary metabolites that augment an understanding of
 B vitamin need, and need for support of protein digestion and
 absorption.
- Oxidative Stress Analysis highlights the body's current state of oxidative stress and reserve capacity.

Why Use Metabolomix+?

Studies suggest that even a balanced diet may not provide all essential nutrients. Metabolomix⁺ can help to support you and your patients by:

- Identifying nutritional insufficiencies that may be at the root cause of complex chronic conditions
- Providing at-home specimen collection
- Offering an easy-to-use "Interpretation At-A-Glance" that provides patients with valuable information about the function of nutrients, their dietary sources, and the causes and complications of their deficiencies
- Giving insight into potential digestion and absorption abnormalities

The Metabolomix+ report offers functional pillars with a built-in scoring system to guide therapy in a systems-based fashion. The report also contains dynamic biochemical pathway charts for clearer understanding

Add-on Components

- -Bloodspot Essential Metabolic Fatty Acids
- -Urine Nutrient & Toxic Elements
- -Genomic SNPs









MOOD DISORDERS

WEIGHT ISSUES

Results Overview



63 Zillicoa Street Asheville, NC 28801 © Genova Diagnostics



Patient: SAMPLE **PATIENT**

DOB: Sex:

3200 Metabolomix+ - FMV Urine



Functional Imbalance Scores

Key



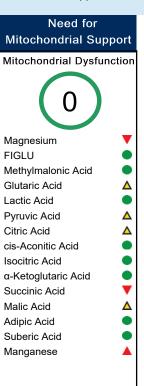
: Minimal Need for Support

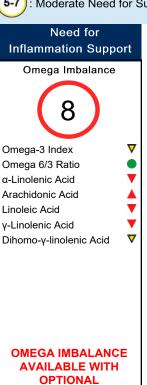
: Moderate Need for Support

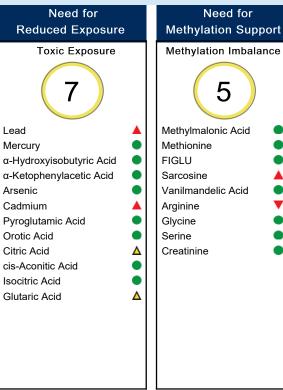
(8-10): High Need for Support

Need for **Antioxidant Support Oxidative Stress** Cystine Cysteine

Lipid Peroxides 8-OHdG Taurine Citric Acid cis-Aconitic Acid



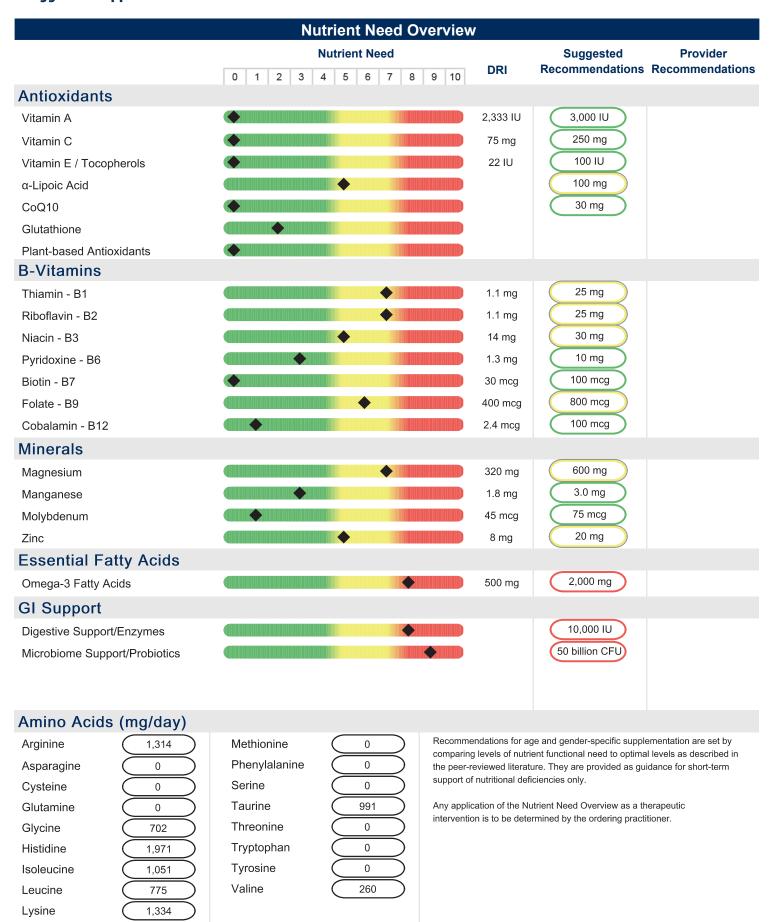




ADD-ONS



Suggested Supplement Schedule



Antioxidant Needs

Vitamin A





- Beta-carotene & other carotenoids are converted to vitamin A (retinol), involved in vision, antioxidant & immune function, gene expression & cell growth.
- Vitamin A deficiency may occur with chronic alcoholism, zinc deficiency, hypothyroidism, or oral contraceptives containing estrogen & progestin.
- Deficiency may result in night blindness, impaired immunity, healing & tissue regeneration, increased risk of infection, leukoplakia or keratosis.
- Food sources include cod liver oil, fortified cereals & milk, eggs, sweet potato, pumpkin, carrot, cantaloupe, mango, spinach, broccoli, kale & butternut squash.

Vitamin E / Tocopherols





- Alpha-tocopherol (body's main form of vitamin E) functions as an antioxidant, regulates cell signaling, influences immune function and inhibits coagulation.
- Deficiency may occur with malabsorption, cholestyramine, colestipol, isoniazid, orlistat, olestra and certain anti-convulsants (e.g., phenobarbital, phenytoin).
- Deficiency may result in peripheral neuropathy, ataxia, muscle weakness, retinopathy, and increased risk of CVD, prostate cancer and cataracts.
- Food sources include oils (olive, soy, corn, canola, safflower, sunflower), eggs, nuts, seeds, spinach, carrots, avocado, dark leafy greens and wheat germ.

CoQ10





- CoQ10 is a powerful antioxidant that is synthesized in the body and contained in cell membranes. CoQ10 is also essential for energy production & pH regulation.
- CoQ10 deficiency may occur with HMG-CoA reductase inhibitors (statins), several anti-diabetic medication classes (biguanides, sulfonylureas) or beta-blockers
- Low levels may aggravate oxidative stress, diabetes, cancer, congestive heart failure, cardiac arrhythmias, gingivitis and neurologic diseases.
- Main food sources include meat, poultry, fish, soybean, canola oil, nuts and whole grains. Moderate sources include fruits, vegetables, eggs and dairy.

Plant-based Antioxidants





- Oxidative stress is the imbalance between the production of free radicals and the body's ability to readily detoxify these reactive species and/or repair the resulting damage with anti-oxidants.
- Oxidative stress can be endogenous (energy production and inflammation) or exogenous (exercise, exposure to environmental toxins).
- Oxidative stress has been implicated clinically in the development of neurodegenerative diseases, cardiovascular diseases and chronic fatigue syndrome.
- Antioxidants may be found in whole food sources (e.g., brightly colored fruits & vegetables, green tea, turmeric) as well as nutraceuticals (e.g., resveratrol, EGCG, lutein, lycopene, ginkgo, milk thistle, etc.).

Vitamin C





- Vitamin C is an antioxidant (also used in the regeneration of other antioxidants). It is involved in cholesterol metabolism, the production & function of WBCs and antibodies, and the synthesis of collagen, norepinephrine and carnitine.
- Deficiency may occur with oral contraceptives, aspirin, diuretics or NSAIDs.
- Deficiency can result in scurvy, swollen gingiva, periodontal destruction, loose teeth, sore mouth, soft tissue ulcerations, or increased risk of infection.
- Food sources include oranges, grapefruit, strawberries, tomato, sweet red pepper, broccoli and potato.

α-Lipoic Acid





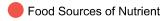
- α-Lipoic acid plays an important role in energy production, antioxidant activity (including the regeneration of vitamin C and glutathione), insulin signaling, cell signaling and the catabolism of α-keto acids and amino acids.
- High biotin intake can compete with lipoic acid for cell membrane entry.
- Optimal levels of α-lipoic acid may improve glucose utilization and protect against diabetic neuropathy, vascular disease and age-related cognitive decline.
- Main food sources include organ meats, spinach and broccoli. Lesser sources include tomato, peas, Brussels sprouts and brewer's yeast.

Glutathione





- Glutathione (GSH) is composed of cysteine, glutamine & glycine. GSH is a source of sulfate and plays a key role in antioxidant activity and detoxification of toxins.
- GSH requirement is increased with high-fat diets, cigarette smoke, cystinuria, chronic alcoholism, chronic acetaminophen use, infection, inflammation and toxic exposure
- Deficiency may result in oxidative stress & damage, impaired detoxification, altered immunity, macular degeneration and increased risk of chronic illness.
- Food sources of GSH precursors include meats, poultry, fish, soy, corn, nuts, seeds, wheat germ, milk and cheese.





B-Vitamin Needs

Thiamin - B1





- B1 is a required cofactor for enzymes involved in energy production from food, and for the synthesis of ATP, GTP, DNA, RNA and NADPH.
- Low B1 can result from chronic alcoholism, diuretics, digoxin, oral contraceptives and HRT, or large amounts of tea & coffee (contain anti-B1 factors).
- B1 deficiency may lead to dry beriberi (e.g., neuropathy, muscle weakness), wet beriberi (e.g., cardiac problems, edema), encephalopathy or dementia.
- Food sources include lentils, whole grains, wheat germ, Brazil nuts, peas, organ meats, brewer's yeast, blackstrap molasses, spinach, milk & eggs.

Riboflavin - B2





- B2 is a key component of enzymes involved in antioxidant function, energy production, detoxification, methionine metabolism and vitamin activation.
- Low B2 may result from chronic alcoholism, some anti-psychotic medications, oral contraceptives, tricyclic antidepressants, quinacrine or adriamycin.
- B2 deficiency may result in oxidative stress, mitochondrial dysfunction, low uric acid, low B3 or B6, high homocysteine, anemia or oral & throat inflammation.
- Food sources include milk, cheese, eggs, whole grains, beef, chicken, wheat germ, fish, broccoli, asparagus, spinach, mushrooms and almonds.

Niacin - B3





- B3 is used to form NAD and NADP, involved in energy production from food, fatty acid & cholesterol synthesis, cell signaling, DNA repair & cell differentiation.
- Low B3 may result from deficiencies of tryptophan (B3 precursor), B6, B2 or Fe (cofactors in B3 production), or from long-term isoniazid or oral contraceptive
- B3 deficiency may result in pellagra (dermatitis, diarrhea, dementia), neurologic symptoms (e.g., depression, memory loss), bright red tongue or fatigue.
- Food sources include poultry, beef, organ meats, fish, whole grains, peanuts, seeds, lentils, brewer's yeast and lima beans.

Pyridoxine - B6





- B6 (as P5P) is a cofactor for enzymes involved in glycogenolysis & gluconeogenesis, and synthesis of neurotransmitters, heme, B3, RBCs and nucleic acids.
- Low B6 may result from chronic alcoholism, long-term diuretics, estrogens (oral contraceptives and HRT), anti-TB meds, penicillamine, L-DOPA or digoxin.
- B6 deficiency may result in neurologic symptoms (e.g., irritability, depression, seizures), oral inflammation, impaired immunity or increased homocysteine.
- Food sources include poultry, beef, beef liver, fish, whole grains, wheat germ, soybean, lentils, nuts & seeds, potato, spinach and carrots.

Biotin - B7





- Biotin is a cofactor for enzymes involved in functions such as fatty acid synthesis, mitochondrial FA oxidation, gluconeogenesis and DNA replication & transcription.
- Deficiency may result from certain inborn errors, chronic intake of raw egg whites, long-term TPN, anticonvulsants, high-dose B5, sulfa drugs & other antibiotics.
- Low levels may result in neurologic symptoms (e.g., paresthesias, depression), hair loss, scaly rash on face or genitals or impaired immunity.
- Food sources include yeast, whole grains, wheat germ, eggs, cheese, liver, meats, fish, wheat, nuts & seeds, avocado, raspberries, sweet potato and cauliflower

Folate - B9





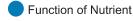
- Folate plays a key role in coenzymes involved in DNA and SAMe synthesis, methylation, nucleic acids & amino acid metabolism and RBC production.
- Low folate may result from alcoholism, high-dose NSAIDs, diabetic meds, H2 blockers, some diuretics and anti-convulsants, SSRIs, methotrexate, trimethoprim, pyrimethamine, triamterene, sulfasalazine or cholestyramine.
- Folate deficiency can result in anemia, fatigue, low methionine, increased homocysteine, impaired immunity, heart disease, birth defects and CA risk.
- Food sources include fortified grains, green vegetables, beans & legumes.

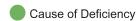
Cobalamin - B12





- B12 plays important roles in energy production from fats & proteins, methylation, synthesis of hemoglobin & RBCs, and maintenance of nerve cells, DNA & RNA.
- Low B12 may result from alcoholism, malabsorption, hypochlorhydria (e.g., from atrophic gastritis, H. pylori infection, pernicious anemia, H2 blockers, PPIs), vegan diets, diabetic meds, cholestyramine, chloramphenicol, neomycin or colchicine.
- B12 deficiency can lead to anemia, fatigue, neurologic symptoms (e.g., paresthesias, memory loss, depression, dementia), methylation defects or chromosome breaks.
- Food sources include shellfish, red meat, poultry, fish, eggs, milk and cheese.











Mineral Needs

Magnesium



- Magnesium is involved in >300 metabolic reactions. Key areas include energy production, bone & ATP formation, muscle & nerve conduction and cell signaling.
- Deficiency may occur with malabsorption, alcoholism, hyperparathyroidism, renal disorders (wasting), diabetes, diuretics, digoxin or high doses of zinc.
- Low Mg may result in muscle weakness/spasm, constipation, depression, hypertension, arrhythmias, hypocalcemia, hypokalemia or personality changes.
- Food sources include dark leafy greens, oatmeal, buckwheat, unpolished grains, chocolate, milk, nuts & seeds, lima beans and molasses.

Molybdenum





- Molybdenum is a cofactor for enzymes that convert sulfites to sulfate, and nucleotides to uric acid, and that help metabolize aldehydes & other toxins.
- Low Mo levels may result from long-term TPN that does not include Mo.
- Mo deficiency may result in increased sulfite, decreased plasma uric acid (and antioxidant function), deficient sulfate, impaired sulfation (detoxification), neurologic disorders or brain damage (if severe deficiency).
- Food sources include buckwheat, beans, grains, nuts, beans, lentils, meats and vegetables (although Mo content of plants depends on soil content).

Manganese





- Manganese plays an important role in antioxidant function, gluconeogenesis, the urea cycle, cartilage & bone formation, energy production and digestion.
- Impaired absorption of Mn may occur with excess intake of Fe, Ca, Cu, folic acid, or phosphorous compounds, or use of long-term TPN, Mg-containing antacids or laxatives.
- Deficiency may result in impaired bone/connective tissue growth, glucose & lipid dysregulation, infertility, oxidative stress, inflammation or hyperammonemia.
- Food sources include whole grains, legumes, dried fruits, nuts, dark green leafy vegetables, liver, kidney and tea.

Zinc





- Zinc plays a vital role in immunity, protein metabolism, heme synthesis, growth & development, reproduction, digestion and antioxidant function.
- Low levels may occur with malabsorption, alcoholism, chronic diarrhea, diabetes, excess Cu or Fe, diuretics, ACE inhibitors, H2 blockers or digoxin.
- Deficiency can result in hair loss and skin rashes, also impairments in growth & healing, immunity, sexual function, taste & smell and digestion.
- Food sources include oysters, organ meats, soybean, wheat germ, seeds, nuts, red meat, chicken, herring, milk, yeast, leafy and root vegetables.

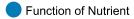
Essential Fatty Acid Needs

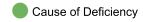
Need for Omega-3s

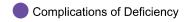


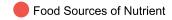


- Omega-3 (O3) and Omega-6 (O6) fatty acids are polyunsaturated fatty acids that cannot be synthesized by the human body. They are classified as essential nutrients and must be obtained from dietary sources.
- The standard American diet is much higher in O6 than O3 fatty acids. Deficiency of EFAs may result from poor dietary intake and/or poor conversion from food sources.
- EFA deficiency is associated with decreased growth & development of infants and children, dry skin/rash, poor wound healing, and increased risk of infection, cardiovascular and inflammatory diseases.
- Dietary sources of the O6 Linoleic Acid (LA) include vegetable oils, nuts, seeds and some vegetables. Dietary sources of the O3 a-Linolenic Acid (ALA) include flaxseeds, walnuts, and their oils. Fish (mackerel, salmon, sardines) are the major dietary sources of the O3 fatty acids EPA and DHA.











Microbiome & Digestive Support

Microbiome Support/Probiotics





- Probiotics have many functions. These include: production of some B vitamins and vitamin K; enhance digestion & absorption; decrease severity of diarrheal illness; modulate of immune function & intestinal permeability.
- Alterations of gastrointestinal microflora may result from C-section delivery, antibiotic use, improved sanitation, decreased consumption of fermented foods and use of certain drugs.
- Some of the diseases associated with microflora imbalances include: IBS, IBD, fibromyalgia, chronic fatigue syndrome, obesity, atopic illness, colic and cancer.
- Food sources rich in probiotics are yogurt, kefir and fermented foods.

Digestive Support/Enzymes





- Pancreatic enzymes are secreted by the exocrine glands of the pancreas and include protease/peptidase, lipase and amylase.
- Pancreatic exocrine insufficiency may be primary or secondary in nature. Any indication of insufficiency warrants further evaluation for underlying cause (i.e., celiac disease, small intestine villous atrophy, small bowel bacterial overgrowth).
- A high functional need for digestive enzymes suggests that there is an impairment related to digestive capacity.
- Determining the strength of the pancreatic enzyme support depends on the degree of functional impairment. Supplement potency is based on the lipase units present in both prescriptive and non-prescriptive agents.

Functional Imbalances

Mitochondrial Dysfunction





- Mitochondria are a primary site of generation of reactive oxygen species. Oxidative damage is considered an important factor in decline of physiologic function that occurs with aging and stress.
- Mitochondrial defects have been identified in cardiovascular disease, fatigue syndromes, neurologic disorders such as Parkinson's and Alzheimer's disease, as well as a variety of genetic conditions. Common nutritional deficiencies can impair mitochondrial efficiency.

Need for Methylation





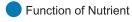
- Methylation is an enzymatic process that is critical for both synthesis and inactivation. DNA, estrogen and neurotransmitter metabolism are all dependent on appropriate methylation activity.
- B vitamins and other nutrients (methionine, magnesium, selenium) functionally support catechol-O-methyltransferase (COMT), the enzyme responsible for methylation.

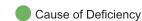
Toxic Exposure



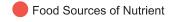


- Methyl tert-Butyl Ether (MTBE) is a common gasoline additive used to increase octane ratings, and has been found to contaminate ground water supplies where gasoline is stored. Inhalation of MTBE may cause nose and throat irritation, as well as headaches, nausea, dizziness and mental confusion. Animal studies suggest that drinking MTBE may cause gastrointestinal irritation, liver and kidney damage and nervous system effects.
- Styrene is classified by the US EPA as a "potential human carcinogen," and is found widely distributed in commercial products such as rubber, plastic, insulation, fiberglass, pipes, food containers and carpet backing.
- Levels of these toxic substances should be examined within the context of the body's functional capacity for methylation and need for glutathione.



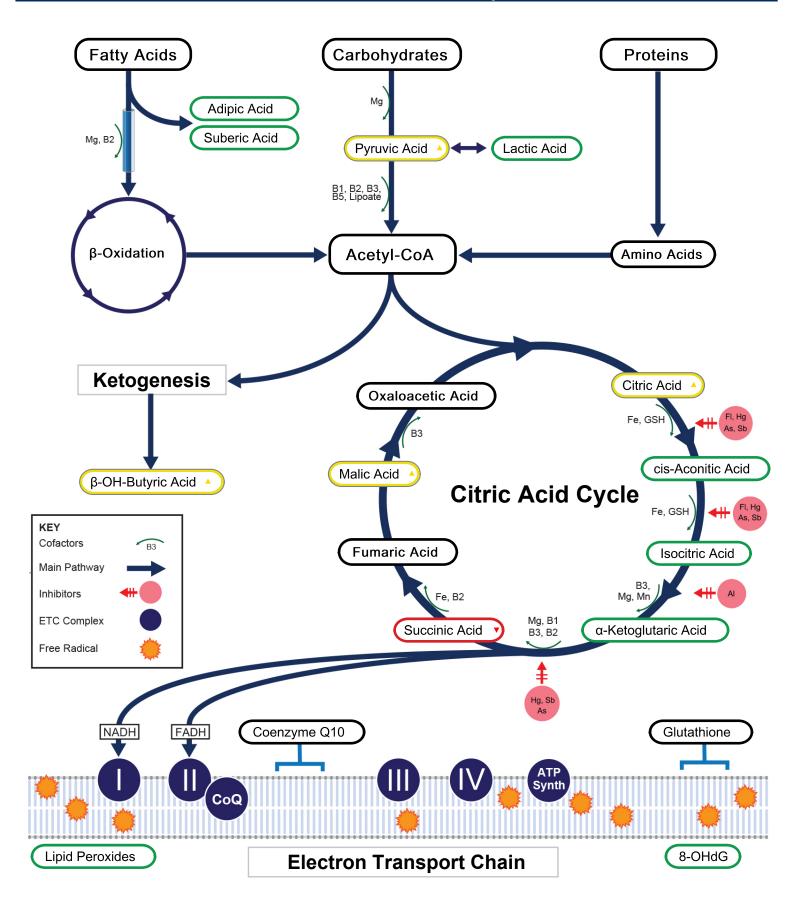




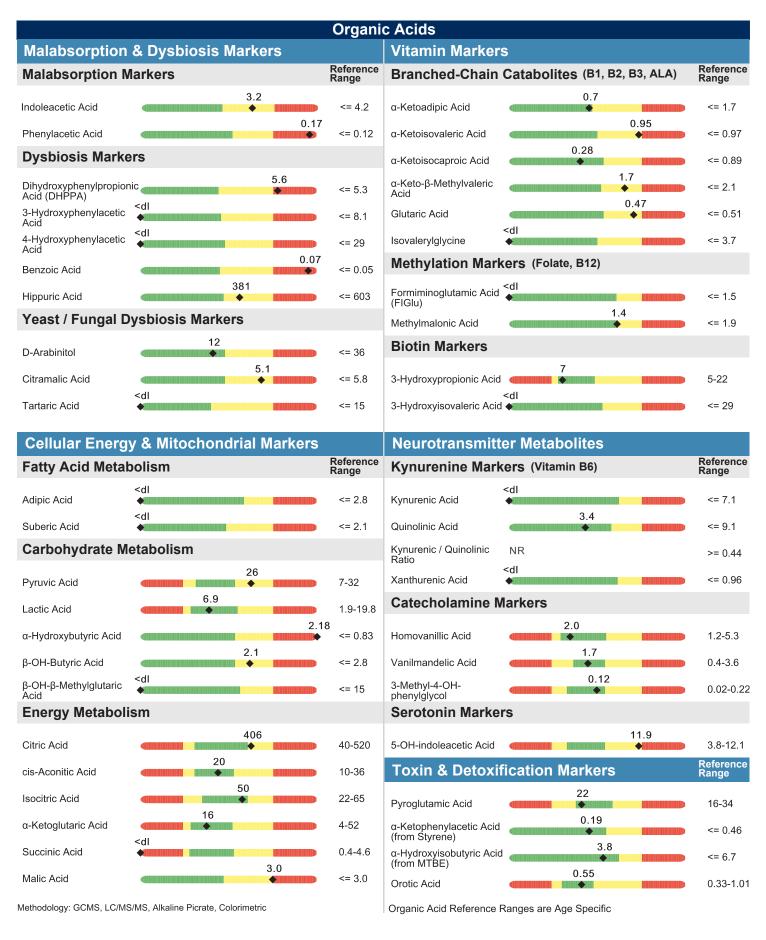




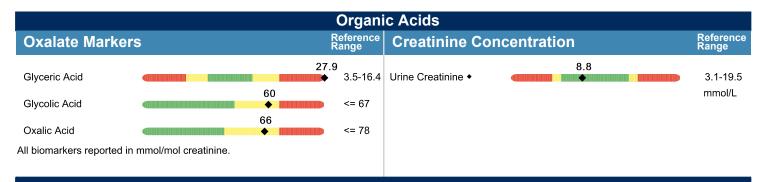
Oxidative Stress & Mitochondrial Dysfunction

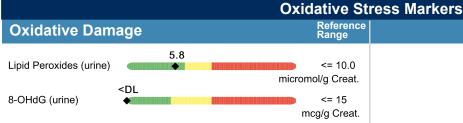






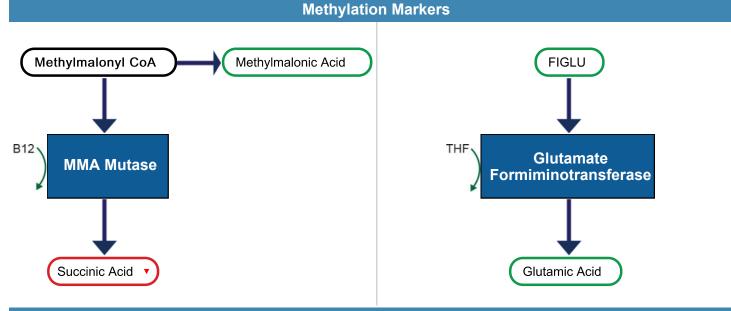
READER-FRIENDLY REPORTS



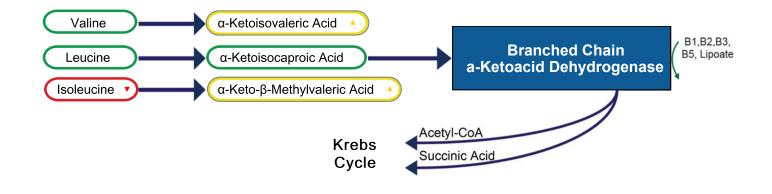


The Oxidative Stress reference ranges are based on an adult population.

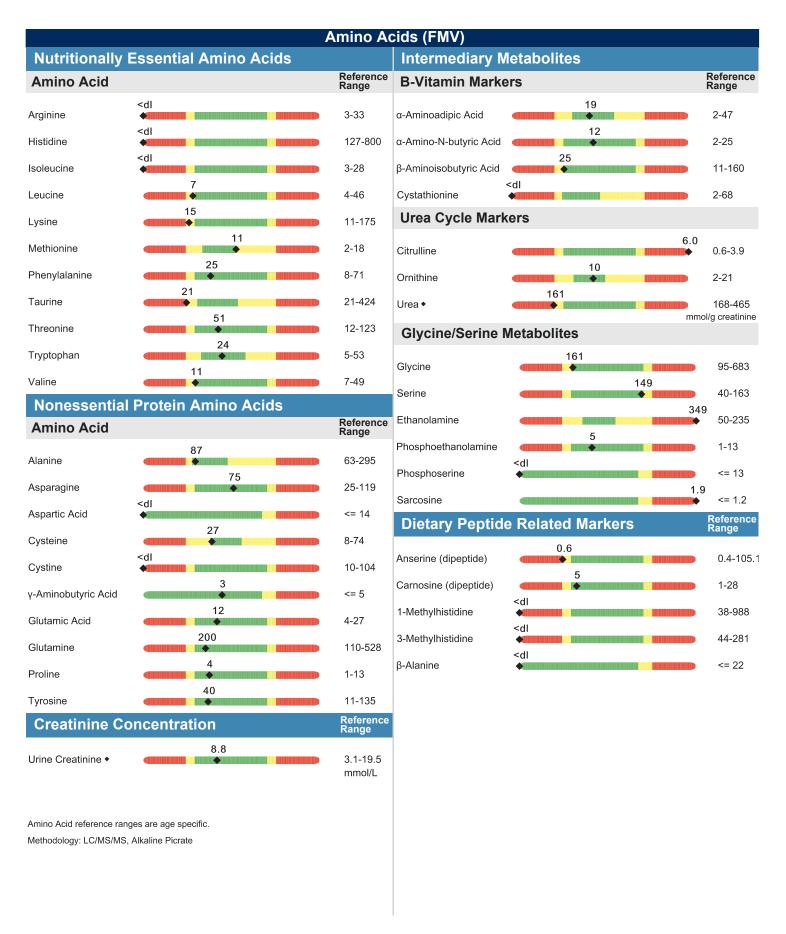
Pathways



Branch-Chain Amino Acid Metabolism





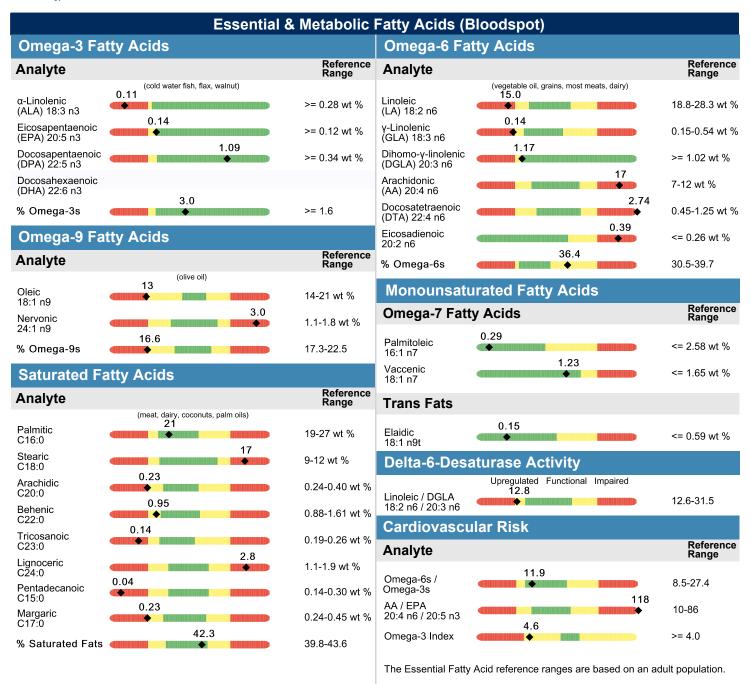


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Page 11

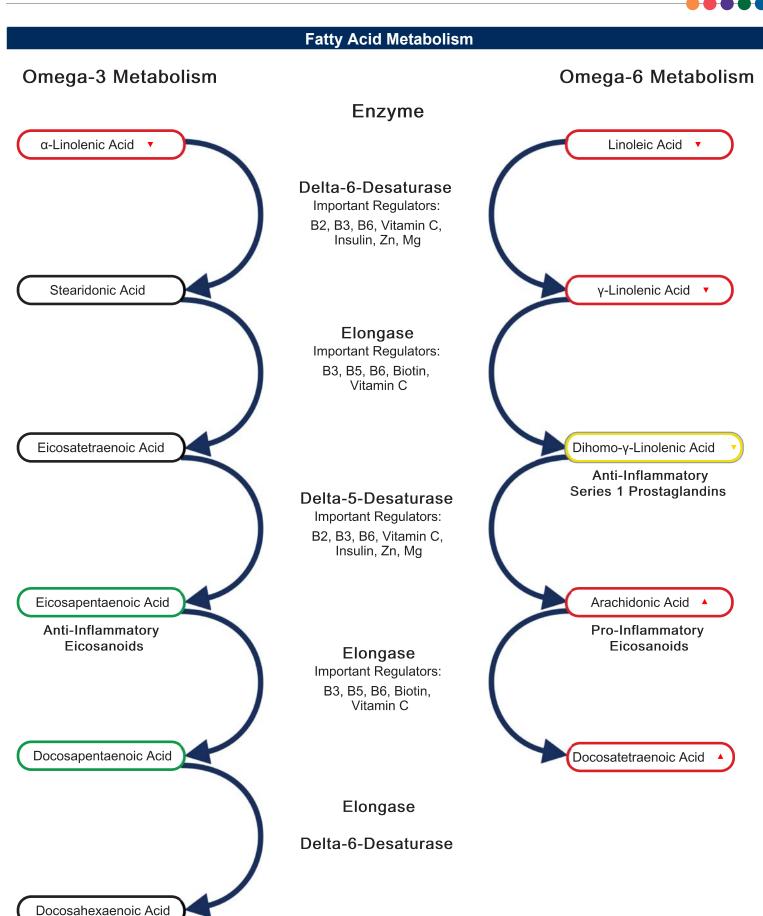
3202 Add-on Bloodspot Essential & Metabolic Fatty Acids - Bloodspot

Methodology: GCMS



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Page 12

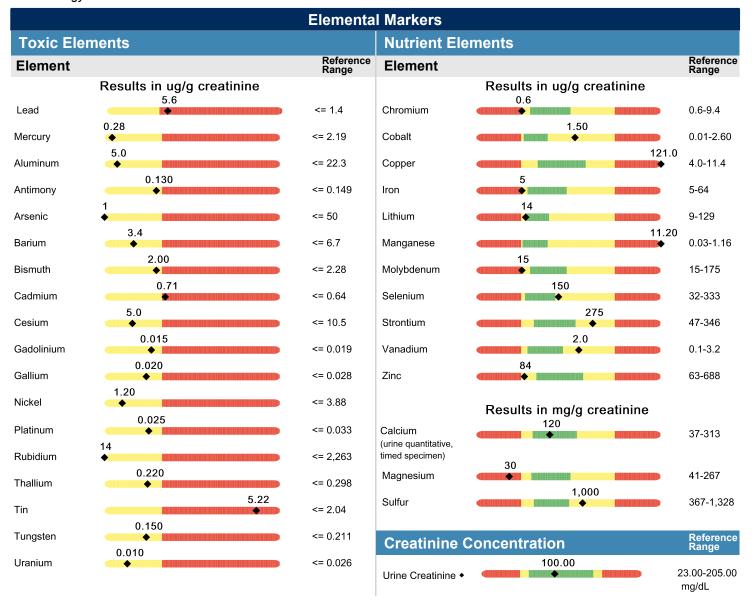


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Page 13

3204 Add - on Comprehensive Urine Elements - FMV Urine

Methodology: ICP-MS and Alkaline Picrate





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Metabolomix+ PROFILE									
Analytes reported		Analytes reported		Analytes reported		Analytes reported		Analytes reported	
Organic Acids		Organic Acids		Amino Acids		Add-on Fatty Acids		Add-on Elements	
Malabsorption and Dysbiosis		Vitamin Markers		Creatinine Concentration		Saturated Fatty Acids		Nutrient Elements*	
Malabsorption Markers		a-Ketoadipic Acid		Creatinine		Behenic Acid	+	Chromium*	+
Indoleacetic Acid (AA)	•	a-Ketoisovaleric Acid	•	Intermediary Metabolites		Tricosanoic Acid	+	Cobalt*	+
Phenylacetic Acid (PAA)		a-Ketoisocaproic Acid		B Vitamin Markers		Lignoceric Acid	+	Copper*	+
Bacterial Dysbiosis Markers		a-Keto-ß-Methylvaleric Acid	•	α-Aminoadipic Acid		Pentadecanoic Acid	+	Iron*	+
Dihydroxyphenylpropionic Acid (DHPPA)	•	Formiminoglutamic Acid	•	α-Amino-N-Butyric Acid	•	Margaric Acid	+	Lithium*	+
3-Hydroxyphenylacetic Acid	•	Glutaric Acid	•	Cystathionine		% Saturated Fats	+	Manganese*	+
4-Hydroxyphenylacetic	٠	Isovalerylglycine	•	β-Aminoisobutryic Acid		Omega 6 Fatty Acids		Molybdenum*	+
Benzoic Acid	•	Methylmalonic Acid	•	Urea Cycle Markers		Linoleic Acid	+	Selenium*	+
Hippuric Acid	•	3-Hydroxypropionic Acid	•	Citrulline	•	γ-Linolenic Acid	+	Strontium*	+
Yeast/Fungal Dysbiosis Markers	;	3-Hydroxyisovaleric Acid	•	Ornithine	•	Dihomo-γ-linolenic Acid	+	Vanadium*	+
D-Arabinitol		Toxin and Detoxification Markers		Urea		Arachidonic	+	Zinc*	+
Citramalic Acid		a-Ketophenylacetic Acid		Glycine/Serine Metabolites		Docosatetraenoic Acid	+	Calcium*	+
Tartaric Acid		a-Hydroxyisobutyric Acid		Glycine		Eicosadienoic Acid	+	Magnesium*	+
Cellular Energy and Mitochondrial Metabolites		Orotic Acid	•	Serine		% Omega 6s	+	Sulfur	+
Carbohydrate Metabolism		Pyroglutamic Acid •		Ethanolamine •		Monounsaturated Fats		Toxic Elements	+
Lactic Acid		Oxalates		Phosphoethanolamine		Omega 7 Fats		Lead	+
Pyruvic Acid		Glyceric Acid	•	Phospherserine		Palmitoleic Acid	+	Mercury	+
α-Hydroxybutyric Acid		Glycolic Acid		Sarcosine		Vaccenic Acid	+	Aluminium	+
β-Hydroxybutyric Acid •		Oxalic Acid •		Dietary Peptide Related Markers		Trans Fat	+	Antimony	+
ß-OH-ß-Methylglutaric Acid (HMG)		Amino Acids		Anserine	•	Elaidic Acid	+	Arsenic	+
Energy Metabolism		Nutritionally Essential Amino Acids		Carnosine •		Delta - 6 Desaturase Activity		Barium	+
Citric Acid		Arginine		1-Methylhistidine		Linoleic/DGLA ratio	+	Bismuth	+
cis-Aconitic Acid		Histidine		3-Methylhistidine		Cardiovascular Risk		Cadmium	+
Isocitric Acid		Isoleucine		ß-Alanine		Omega-6s/Omega-3s	+	Cesium	+
α-Ketoglutaric Acid (AKG)		Leucine		Oxidative Stress		AA/EPA	+	Gadolinium	+
Succinic Acid		Lysine		Lipid Peroxides (urine)		Omega-3 Index	+	Gallium	+
Malic Acid		Methionine	•	8-OHdG (urine)		Add-on Genomic Markers		Nickel	+
Fatty Acid Metabolism		Phenylalanine		Add-on Fatty Acids		APO E (C112R + R158C)	+	Platinum	+
Adipic Acid		Taurine	•	Omega 3 Fatty Acids		COMT (V158M)	+	Rubidium	+
Suberic Acid		Threonine		α-Linolenic Acid		MTHFR Combined	+	Thallium	+
Creatinine Concentration		Tryptophan		Eicosapentaenoic Acid		TNFA	+	Tin	+
Creatinine		Valine		Docosapentaenoic Acid				Tungsten	+
Neurotransmitter Metabolism Markers		Nonessential Protein Amino Acids		Docosahexaenoic Acid •				Uranium +	
Vanilmandelic Acid	•	Alanine	•	% Omega 3s				*NUTRIENT ELEMENTS AVAILABI	LE
Homovanillic Acid		Asparagine		Omega 9 Fatty Acids				ONLY IF ADD-ON COMPREHENS URINE ELEMENT PROFILE #3203	
5-OH-indoleacetic Acid		Aspartic Acid		Oleic Acid				ORDERED ORDERED	i J
3-Methyl-4-OH-phenylglycol		Cysteine		Nervonic Acid					
Kynurenic Acid		Cystine		% Omega 9s					
Quinolinic Acid		Gamma-Aminobutyric Acid		Saturated Fatty Acids					
Kynurenic / Quinolinic Ratio		Glutamic Acid		Palmitic Acid					
Xanthurenic Acid		Glutamine		Stearic Acid					
						i			



Arachidic Acid

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Proline Tyrosine