Associated Conditions

Acromegaly

Alcohol Consumption (moderate intake)

Anemia

Autism

Celiac Disease

Crohn's Disease

Chronic Fatigue Syndrome

CLL (Chronic Lymphocytic Leukemia)

Cystic Fibrosis

Diabetes

Diverticulitis

Erosive Esophagitis

Fibromyalgia

GERD (Gastroesophageal Reflux Disease)

H. Pylori Infection

Hypochlorhydria

Hypothyroid / Hashimoto's Thyroiditis

IBS (Irritable Bowel Syndrome)

Interstitial Cystitis

Lactose Intolerance

Leaky Gut

Liver Cirrhosis

Lyme Disease

Muscular Dystrophy (myotonic Type 1)

NASH / NAFLD

Obesity

Pancreatitis

Parasites

Parkinson's Disease

Prostatitis (chronic)

Restless Leg Syndrome

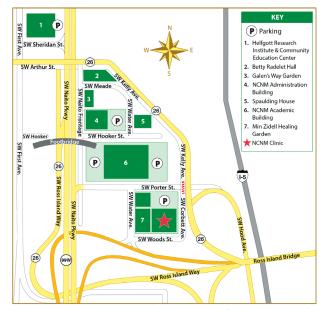
Rheumatoid Arthritis

Rosacea

Scleroderma

Ulcerative Colitis

SIBO is associated with many conditions, as an underlying cause or as an aftereffect of a pre-existing disease.

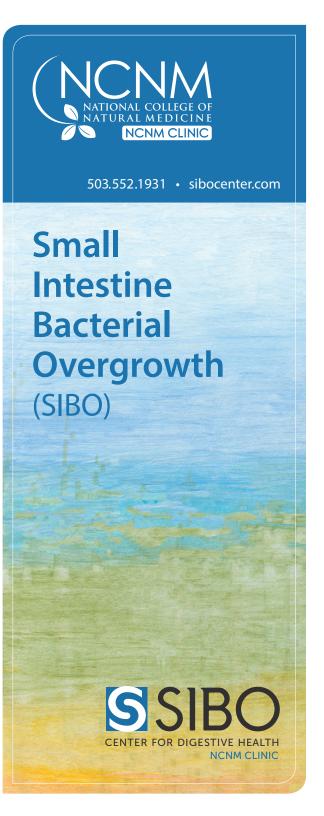


Important: You cannot reach our campus from southbound SW Naito Parkway. For detailed directions and bus route information, please visit our website at **ncnm.edu.**





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What is SIBO?

Small Intestine Bacterial Overgrowth is chronic overgrowth of bacteria in the small intestine. These bacteria normally live in the gastrointestinal tract, but not in such abundance.

The bacteria interfere with normal digestion and absorption of food, and are associated with damage to the lining or membrane of the small intestine.

SIBO symptoms

Bloating

Belching

Cramps

Constipation

Diarrhea

Heartburn (reflux or GERD)

Flatulence

Abdominal pain

Nausea

Food sensitivities

Headaches

Joint pain

Fatique

Skin rashes

Respiratory symptoms (such as asthma)

Mood symptoms (such as depression)

Brain symptoms (such as autism)

Eczema

Steatorrhea (fatty stools)

Iron deficiency anemia

Vitamin B12 deficiency

The information presented in this brochure is a collaborative effort using research provided by Dr. Allison Siebecker. More information is available on her website: www.siboinfo.com



How is the test done?

Breath testing measures the hydrogen and methane gas produced by bacteria in the small intestine that has diffused into the blood, then lungs, and expired. These are gases produced by bacteria, not by humans. The gas is graphed over three hours and compared to a research-derived baseline measurement. Patients drink a solution of lactulose after a one- or two-day preparatory diet. The diet removes much of the food that would feed the bacteria, allowing for a clear reaction to the sugar drink.

Is the test accurate?

Sampling the contents of the small intestine is challenging. Endoscopy only reaches into the top portion, and colonoscopy only reaches the last portion. The middle portion (about 17 feet) is not accessible, other than by surgery. Stool testing predominantly reflects the large intestine. False positives are rare and caused by improper preparation or collection. False negatives are avoided by measuring methane in addition to hydrogen.

How do I get tested for SIBO?

Ordering process

If you are a patient interested in doing the SIBO test—bring this brochure to your provider. A provider will determine if SIBO testing is appropriate for a patient. We must have an order from a provider to give patients a test kit.

If you are a provider interested in offering the test to your patients—please visit the SIBO Center website at sibocenter.com/ordering-a-sibo-test/ and email your request using the online form.

The kit will be shipped directly to the patient for home collection once the SIBO Center receives the order from the provider and payment information from the patient. Patients may also schedule an appointment to have the test administered at the NCNM Clinic.

For more information visit sibocenter.com or call 503.552.1931.