#### **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 Lvme 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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## Small Intestine Bacterial Overgrowth (SIBO)



#### 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) Fczema 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.