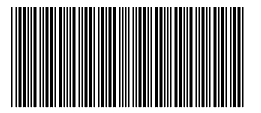


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● Proteobacteria Phylum ● Bacteroidota Phylum ● Firmicutes Phylum ● Fusobacteriota Phylum ● Spirochaetota Phylum ● Ascomycota Phylum



25283-0024

Lab ID
Patient ID PAT-100009
Ext ID 25283-0024

Test Patient

Sex: Male • 45yrs • 01-Jan-80
123 Home Street, Test Suburb Vic 3125

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LOW ORAL pH:

A low saliva pH is associated with increased risk of dental decay, halitosis and periodontitis and may indicate acidemia. Chronic acidemia can be a causative factor for a multitude of diseases affecting the whole body. Reduce consumption of acidic foods, increase water intake and review oral hygiene and health. Further investigation from a oral health specialist may be required.

C. gingivalis is a facultatively anaerobic bacteria constituting part of the oral microflora, but can be considered a opportunistic pathogen. Elevation is linked with increased risk of gingivitis, periodontitis can cause bacteremia in immunocompromised patients.

Streptococcus mutans is the primary etiological agent of dental decay. Elevation indicates a high risk of developing caries. The oral cavity can serve as a reservoir for systemic dissemination of pathogenic bacteria and their toxins, leading to infections and inflammation in distant body sites. Elevated levels have also been implicated in extra-oral conditions such as cardiovascular diseases, in adverse pregnancy outcomes, Inflammatory Bowel Disease or Colorectal Cancer.

Treponema denticola is one of the main pathogenic agents associated with periodontitis. The oral cavity can serve as a reservoir for systemic dissemination of pathogenic bacteria and their toxins, leading to infections and inflammation in distant body sites. Elevated levels have been implicated in extra-oral conditions such cardiovascular diseases, in adverse pregnancy outcomes or Organ Abscesses.

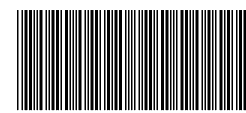
Dental plaque has been shown to serve as a reservoir for respiratory pathogens, fostered by poor oral hygiene and periodontal diseases. Elevated Oral Colonization of *Pseudomonas aeruginosa* has been associated with increased risk of respiratory illnesses.

Dental plaque has been shown to serve as a reservoir for respiratory pathogens, fostered by poor oral hygiene and periodontal diseases. Elevated Oral Colonization of *Acinetobacter* species has been associated with increased risk of respiratory illnesses.

The presence of *Candida* species in the oral cavity is usually found to be positively correlated with poor oral hygiene and high carbohydrate intake. Elevated levels of *Candida* species have been associated with increased risk of dental caries and nosocomial pneumonia. Elevated levels of *Candida*, alongside symptoms of white lesions on tongue or cheeks, redness or burning of gums, tongue and cheeks, bleeding and/ or loss of taste may indicate oral candidiasis (thrush). Treatment advice from an Oral Health Specialist should be followed and may include oral antifungals, salt-water rinses, use of probiotics and adjustment of diet to avoid alcohol, sugars and foods which contain mould and yeasts.

The presence of Oral Lactobacillus reduces pathogenic bacteria population; supports tooth and gum health by improving resistance to cavities; produces sufficient hydrogen peroxide to kill certain bacterial species; and improves halitosis. Low levels increase risk of infections and dental health conditions. Probiotic bacteria can be reintroduced into your oral cavity by taking oral probiotic supplements. Low Lactobacillus levels may also indicate gut microbiome imbalance. Further investigation may be considered.

Amended Report • Issued 12-Jun-26 10:13am • Test Codes: 2200



Dr Test Doctor (Test Doctor) Test Clinic. 123 Test Street, Test Suburb Victoria 3125

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Methodology

Quantitative PCR (qPCR), pH Electrode