



Even if your patients are eating a "balanced" or healthy diet and taking supplements, their bodies could still lack vital and necessary nutrition. The **ONE** will help you understand your patients' individual diet and supplementation needs.

• Analytes

Metabolic Analysis

Creatinine and 46 organic acids ratioed to creatinine including 10 gastrointestinal metabolites 12 cellular energy metabolites 6 neurotransmitter metabolites 11 vitamin markers 4 detoxification markers 2 tyrosine metabolites

Amino Acids Analysis

30 analytes for: -Nutritionally essential and Semi-essential amino acids -Dietary peptide-related markers -Non-essential protein amino acids -Intermediary metabolites and Diagnostic markers -Urine representativeness

Oxidative Stress

Lipid peroxides 8-OHdG

Specimen Requirements: Urine specimens required. Refer to Patient kit instructions for details

• Before Taking this Test:

-Discontinue non-essential medications (4 days before test) -Refer to clinician instructions About what other medications And supplements to avoid (4 days Before test)

-Patients must fast overnight -Arrange posting for Monday-Thursday -See instructions inside test kit For details

• Turn-Around Time: 16 Days

This unique profile:

- Requires only one first morning void urine sample with easy patient at-home collection
- Evaluates overall nutritional status of your patient
- Assesses the functional need for vitamins and minerals
- Includes an innovative "Interpretation-at-a-Glance"
 - Concise-Easy Interpretation
 - Provides clear, personalised recommendations for supplementation
 - Anti-oxidants
 - B-vitamins
 - Minerals
 - Amino acids

The ONE consists of:

Metabolic Analysis measuring 46 key organic acids to evaluate gastrointestinal function, cellular energy production, neurotransmitter processing, and functional need for vitamins, minerals, and co-factors.

Amino Acid Analysis measuring 30 amino acids to evaluate dietary protein adequacy, digestion, absorption, amino acid transport, metabolic impairments, and nutritional deficits; including essential vitamins, minerals, and amino acids.

Oxidative Stress Analysis is a sensitive tool to evaluate the body's anti-oxidant reserves and the presence of oxidative injury.



ONE-PAGE TEST DESCRIPTION



Antioxidants

ID: D4280029

Vitamin C

pepper, broccoli and potato.

α-Lipoic Acid

Glutathione

toxins

►

toxic exposure.

seeds, wheat germ, milk and cheese

Function

Food Sources

1,000 mg

200 mg

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500 mg

250 mg

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.

teeth, sore mouth, soft tissue ulcerations, or increased risk of infection

Deficiency can result in scurvy, swollen gingiva, periodontal destruction, loose

Food sources include oranges, grapefruit, strawberries, tomato, sweet red

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(including the regeneration of vitamin C and glutathione), insulin signaling, cell

Optimal levels of lipoic acid may improve glucose utilization and protect against

Lipoic acid plays an important role in energy production, antioxidant activity

High biotin intake can compete with lipoic acid for cell membrane entry

diabetic neuropathy, vascular disease and age-related cognitive decline.

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

GSH requirement is increased with high-fat diets, cigarette smoke, cystinuria,

chronic alcoholism, chronic acetaminophen use, infection, inflammation and

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

Key

Complications of Deficiency

Causes of Deficiency

Main food sources include organ meats, spinach and broccoli. Lesser sources

signaling and the catabolism of a-keto acids and amino acids

include tomato, peas, Brussels sprouts and brewer's yeast.

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This Innovative "Interpretation at a Glance":

- Highlights individualised nutritional recommendations
- Anti-Oxidants
- B-Vitamins
- Minerals

Provides insight into disease risk and treatment options

- Gastrointestinal Dysfunction
- Detoxification & Methylation
- Neurotransmitter Imbalance
- Need for Probiotics

Interpretation At-A-Glance Nutritional Needs



- 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		I	X	1 1
	100 IU		200 IU	400 IU

- 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		K	
	30 mg	60 mg	90 mg

- 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.



- 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 nutriceuticals (e.g., resveratrol, EGCG, lutein, lycopene, ginkgo, milk thistle, etc.).

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More detailed publications with references are also available: www.GDXuk.net