



**Microbiome  
Center**

## *Autism (ASD)*



Anja Pietzsch

01.04.2025

# Specialized Practice for Diagnostics and Mitochondrial Therapy in the Rhine-Main Area



Heilpraktikerin | Cellsymbiosis® Therapist |  
Author and Lecturer | Certified Business Economist

## Main Treatment Areas:

- Neurological conditions
- Chronic diseases and pain
- Exhaustion/Burnout
- Post/Long-COVID
- Skin diseases, rashes, wound healing disorders
- Allergies, intolerances
- Digestive disorders, IBD



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# Microbiome Center



- Founded in **2018**
- Microbiome Center **supports practitioners** in chronic treatment of sick patients through **evidence-based personalized microbiome therapy** based on a patient's medical history and laboratory findings.
- **World-wide unique** in providing truly personalized treatments
- Network of **more than 800 doctors and practitioners** in the Netherlands, Germany, Italy, Austria, Switzerland, etc.
- **Cooperations:**
  - BIOVIS Diagnostics
  - Blumenau Pharmacy (Munich, Germany)
  - Van den Bergh pharmacy (Hilversum, The Netherlands)
  - Scientists, universities and patient associations



**800+**

Doctors /  
practitioners

**10+**

Countries

**12000+**

Patients

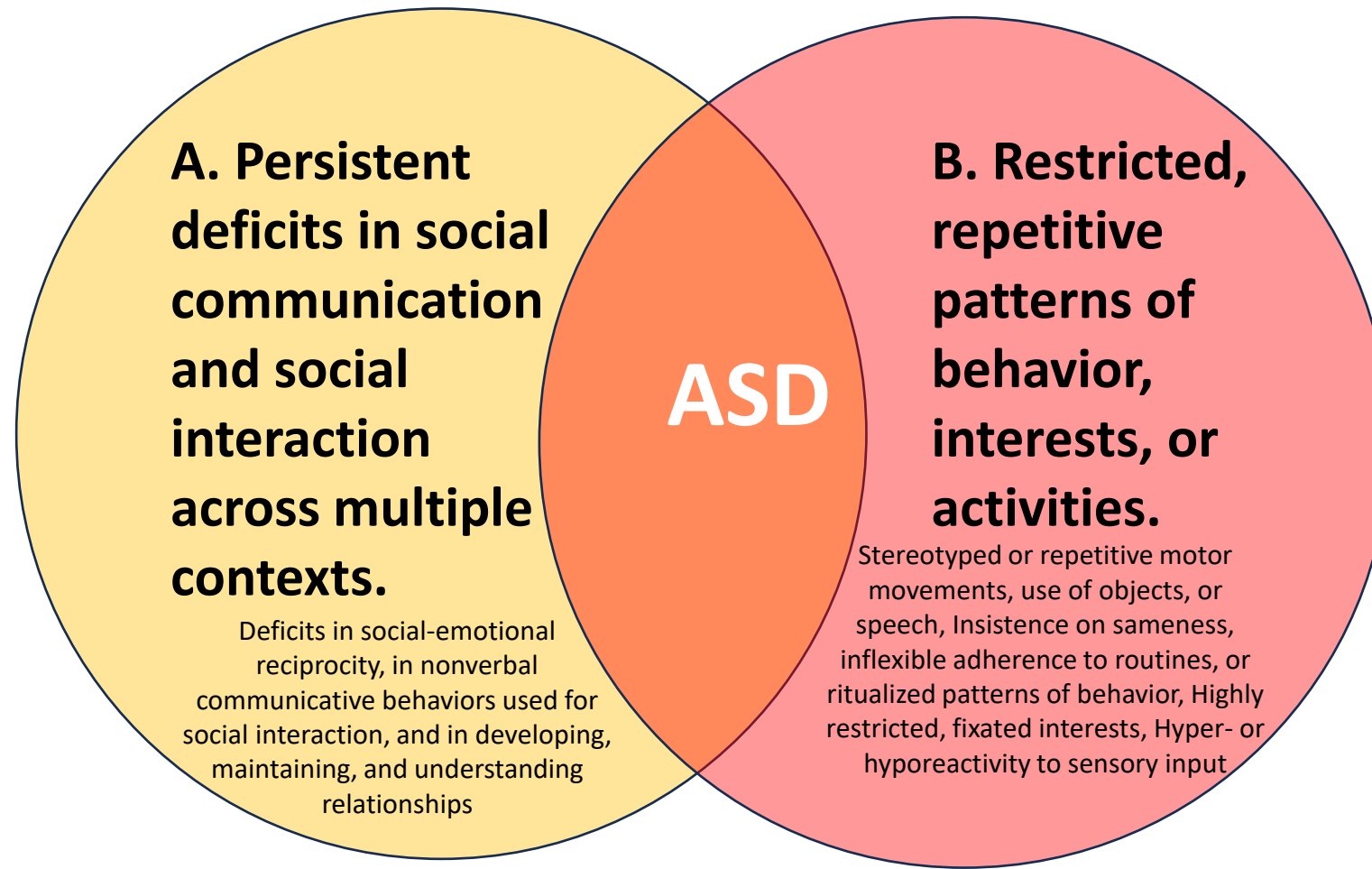
**72+**

Good or  
excellent effect

# **Autism and the gut microbiome What does the science say?**

# What is autism?

## DSM-5 diagnostic criteria<sup>1</sup>



- C. Symptoms must be present in the early developmental period.
- D. Symptoms cause clinically significant impairment in social, occupational, or other important areas of current functioning.
- E. These disturbances are not better explained by intellectual disability or global developmental delay.

1. DSM-5 (American Psychiatric Association, 2013)

# What is autism?<sup>1</sup>

## COMMON AUTISTIC TRAITS

Difficulty initiating and maintaining conversations



Differences in gestures, facial expressions, and eye contact



Intense focus on specific topics or objects



Repeated motor movements, speech, or routines



Over- or under-responsiveness to sensory input



Struggles with transitions or changes in routine



Challenges with understanding social norms



Differences in support needs



1. <https://www.simplypsychology.org/what-is-autism.html>



# What is autism?<sup>1,2</sup>

## AUTISTIC STRENGTHS



**VISUAL SKILLS**  
visual learning,  
detailed focus



**ATTENTION TO DETAIL**  
thorough &  
accurate



**CREATIVITY**  
unique way of  
thinking, novel  
solutions to problems



**INTEGRITY**  
honest &  
trustworthy



**DEEP FOCUS**  
concentration &  
responsiveness to  
structure



**CRITICAL THINKING**  
may question  
normative  
behaviour



**EXPERTISE**  
in-depth knowledge,  
high level skills



**MEMORY**  
excellent recall and  
memory



**OBSERVATIONAL SKILLS**  
learn by  
looking/doing &  
self-evaluate



**ANALYTICAL**  
problem-solve,  
identify patterns



**TENACITY & RESILIENCE**  
strength &  
determination, self-  
motivated



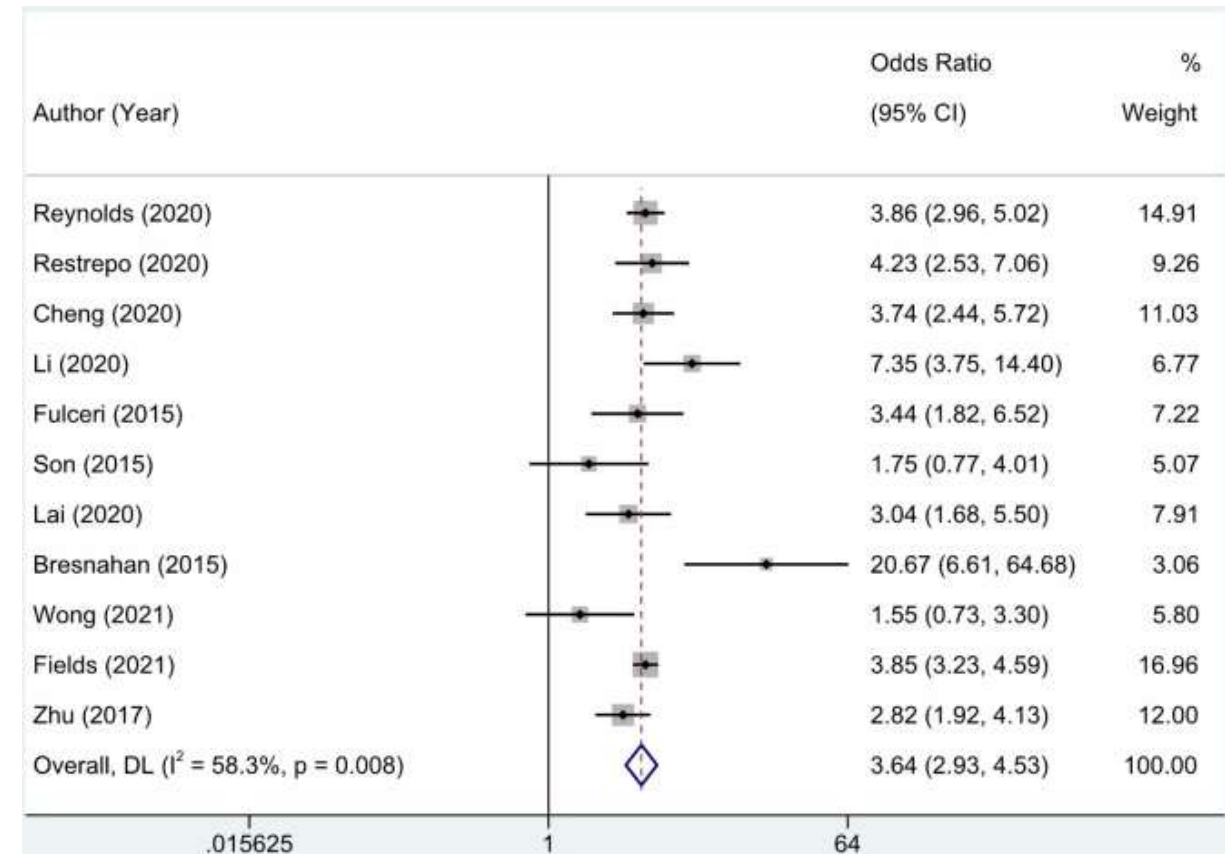
**KINDNESS**  
kind to others,  
acceptance of  
difference

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# Autism and GI problems

Multiple meta-analyses show that GI-problems occur much more often in children with ASD than in typical developing children<sup>1,2</sup>:

- Odds ratio of any GI problem: 3.64
  - Prevalence: 55% of all autistic kids
- Constipation, OR: 2.83, prevalence 37%
- Abdominal pain, OR: 2.60, prevalence 21%
- Diarrhea, OR: 3.27, prevalence 19%
- Vomiting, OR: 3.18, prevalence 8%
- Food allergy, OR: 1.76



1. Gan, H. et al. *Front Pediatr*.11,.1120728.(2023)

2. McElhanon, B. O. et al. *Pediatrics*.133,.872–883.(2014)



# Many autistic children are picky eaters<sup>1,2</sup>



1. Koomar, T. et al. *Front. Psychiatry*.12,(2021)
2. Sharp, W. G. et al. *J Autism Dev Disord*.43,,2159–2173.(2013)

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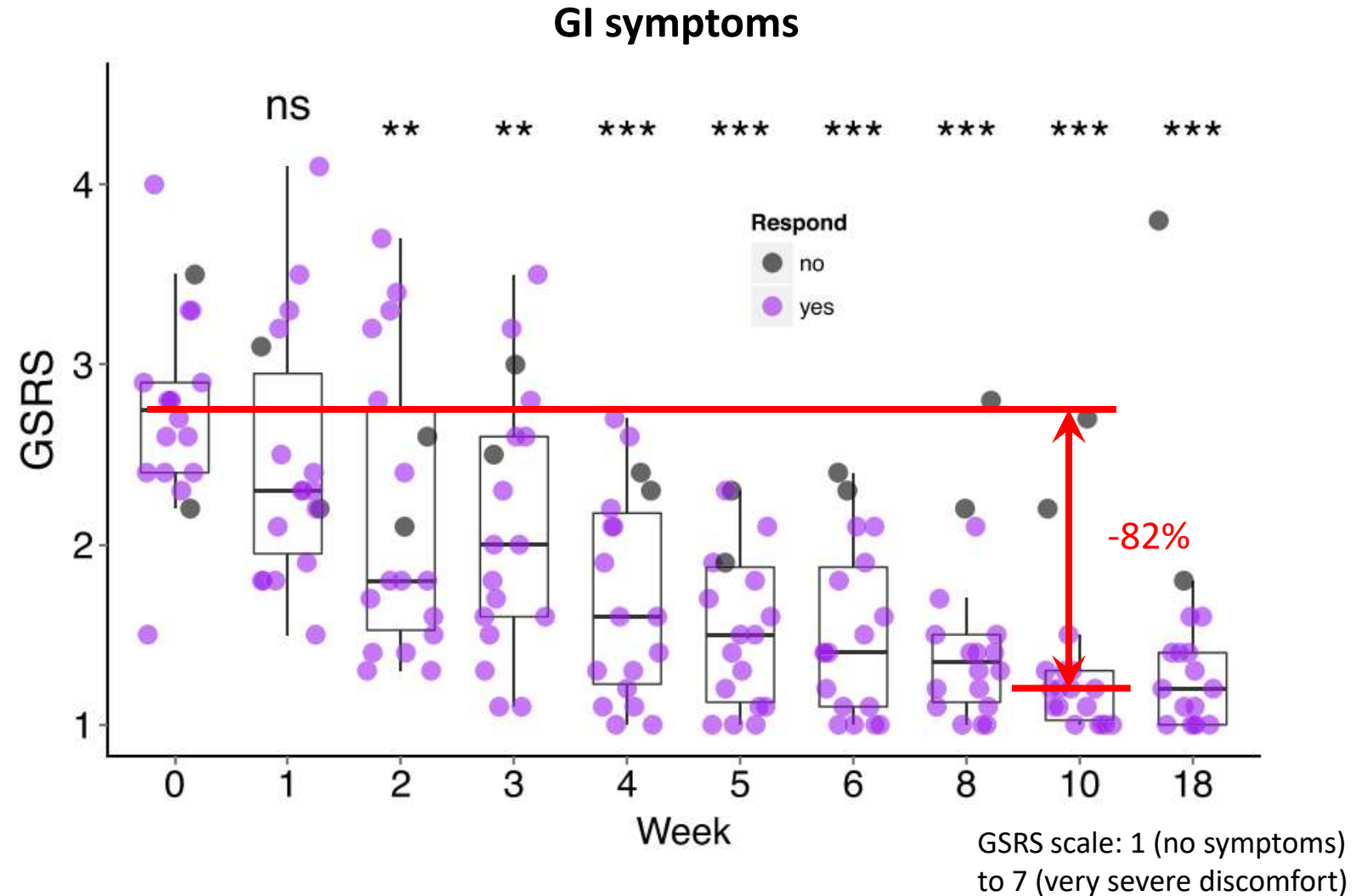
Image credits:  
<https://tacanow.org/family-resources/picky-eating-and-autism/>

## Evidence for involvement of microbiome



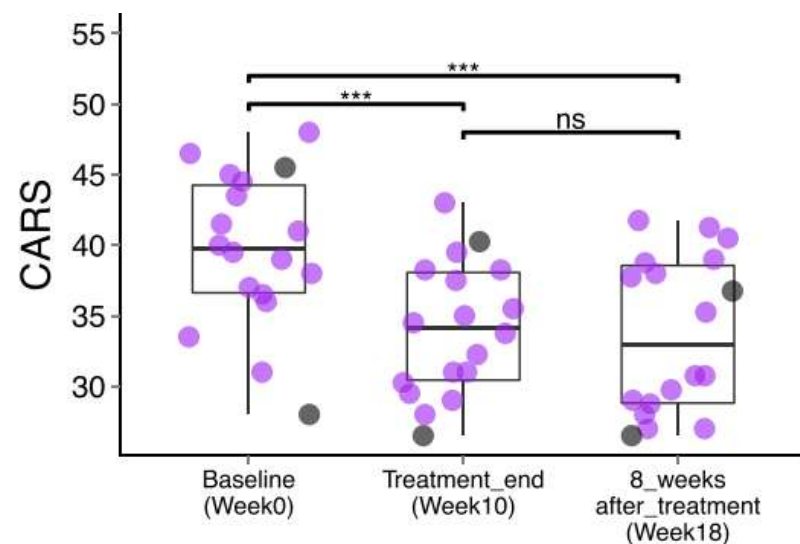
## Strong causal evidence:

- Fecal transplantation study<sup>1</sup>
- N=18
- Includes:
  - Measures of GI problems: GSRS and DSS
  - Autistic behavior score: ADI-R, PGI-III, CARS, ABC, etc...
- 10w microbiota transfer therapy, 8w follow-up
- Two-year follow-up<sup>2</sup>

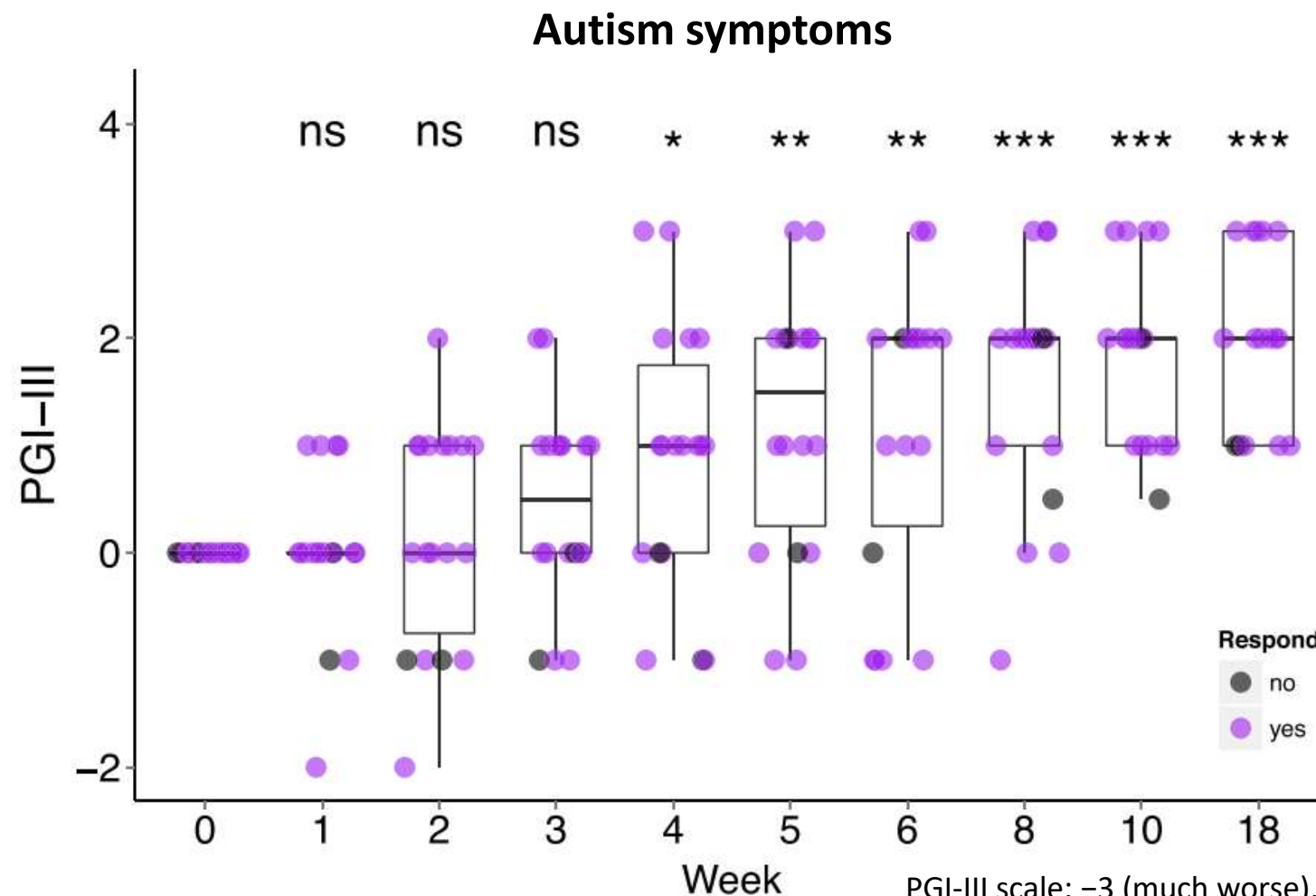


1. Kang, D.-W. et al. *Microbiome*.5.,(2017)
2. Kang, D.-W. et al. *Sci Rep*.9.,(2019)

# Evidence for involvement of microbiome



- 10w microbiota transfer therapy, 8w follow-up
- Two-year follow-up<sup>2</sup>

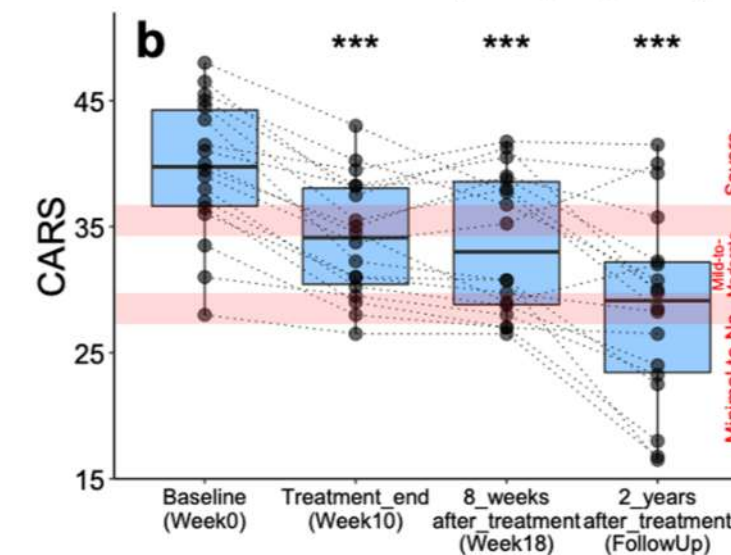
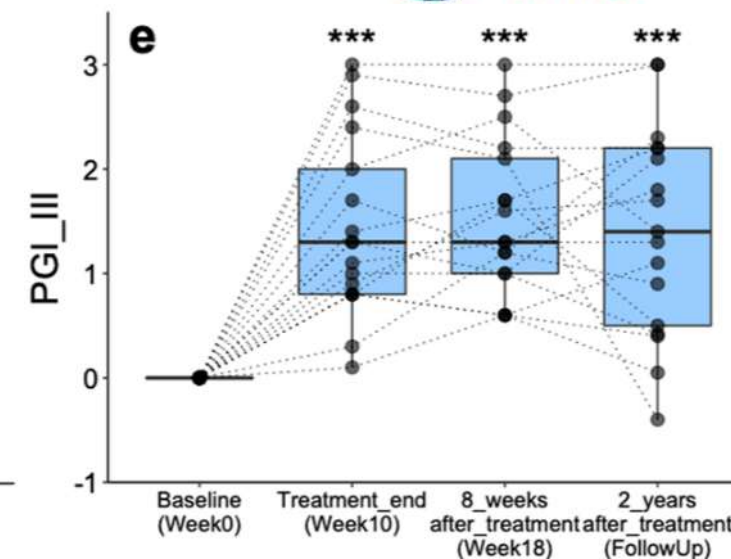
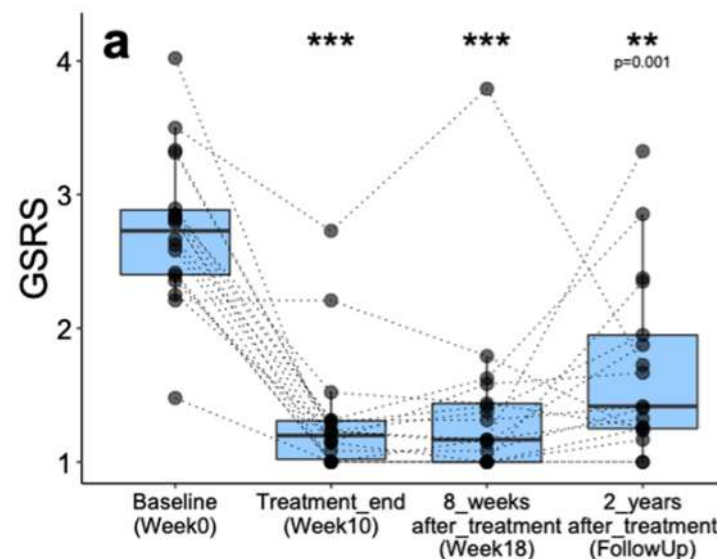


PGI-III scale: -3 (much worse), -2 (worse), -1 (slightly worse), 0 (no change), 1 (slightly better), 2 (better) to 3 (much better)<sup>11</sup>

# Evidence for involvement of microbiome

## Strong causal evidence:

- Fecal transplantation study<sup>1</sup>
- N=18
- Includes:
  - Measures of GI problems: GSRS and DSS
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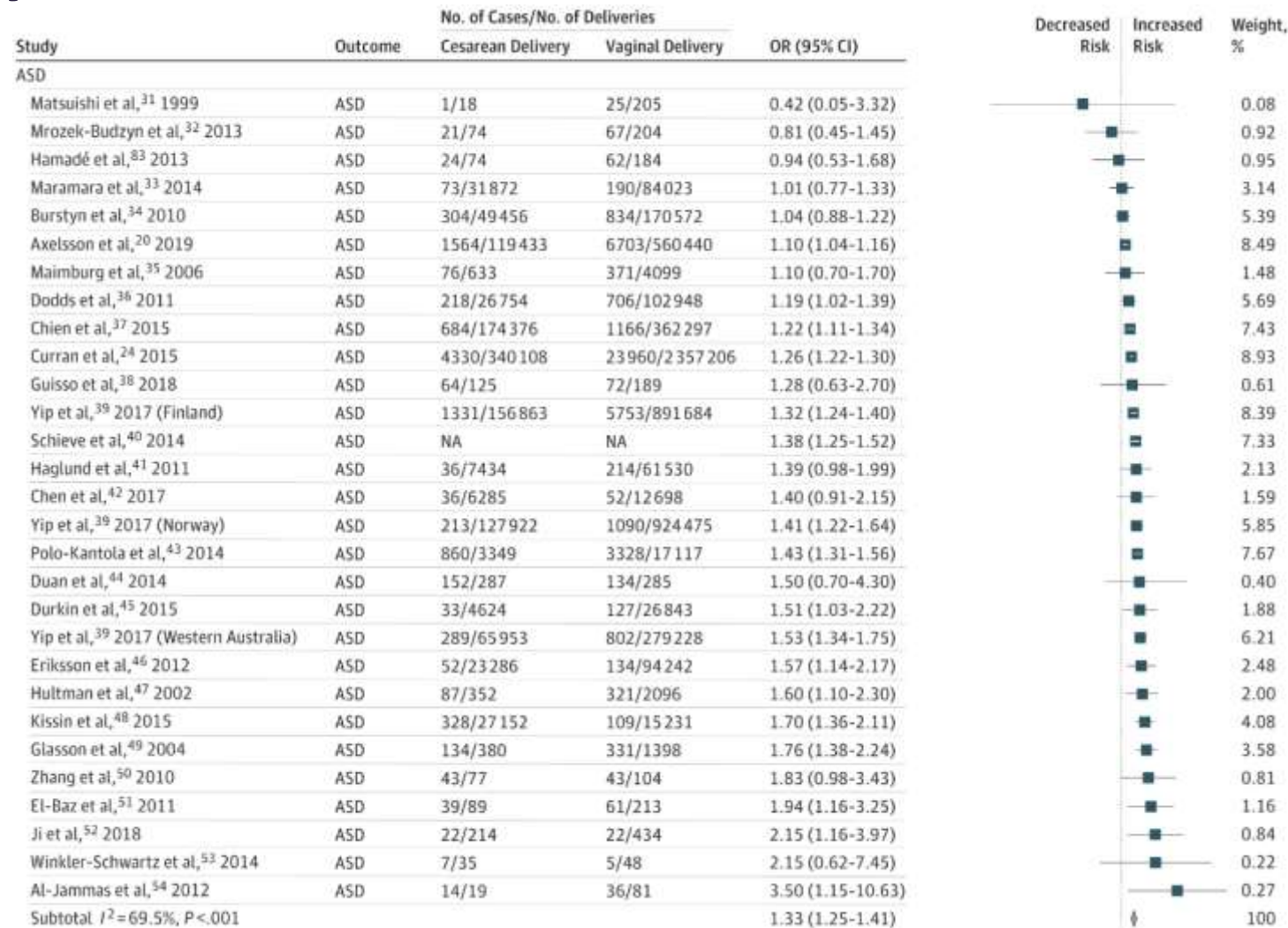


1. Kang, D.-W. et al. *Microbiome* 5, (2017)  
 2. Kang, D.-W. et al. *Sci Rep* 9, (2019)



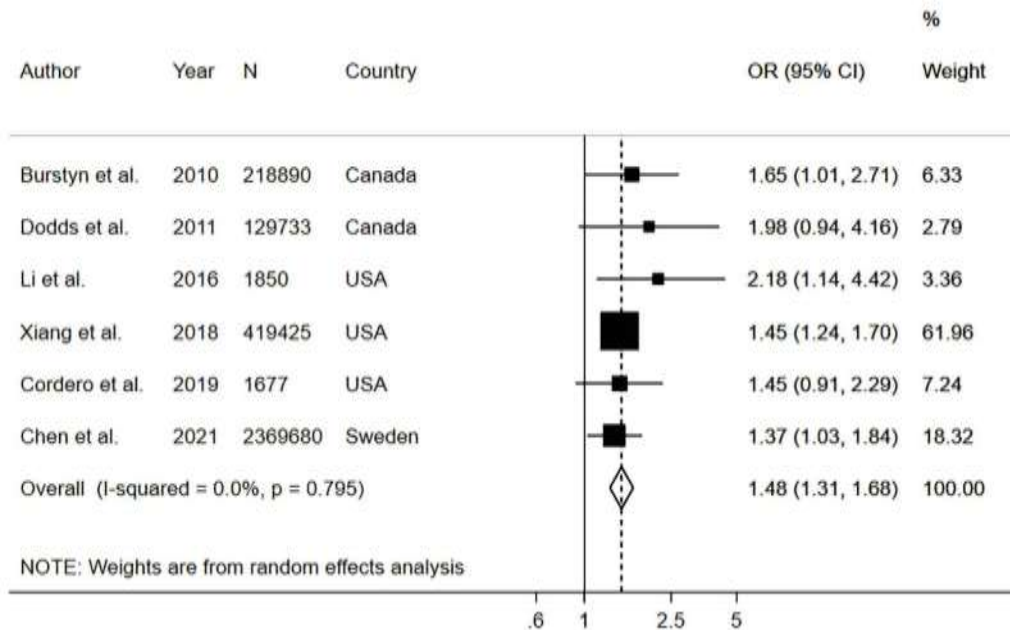
# Associative evidence: correlation of ASD with C-section

## Meta-analysis of >2 million births<sup>1</sup>

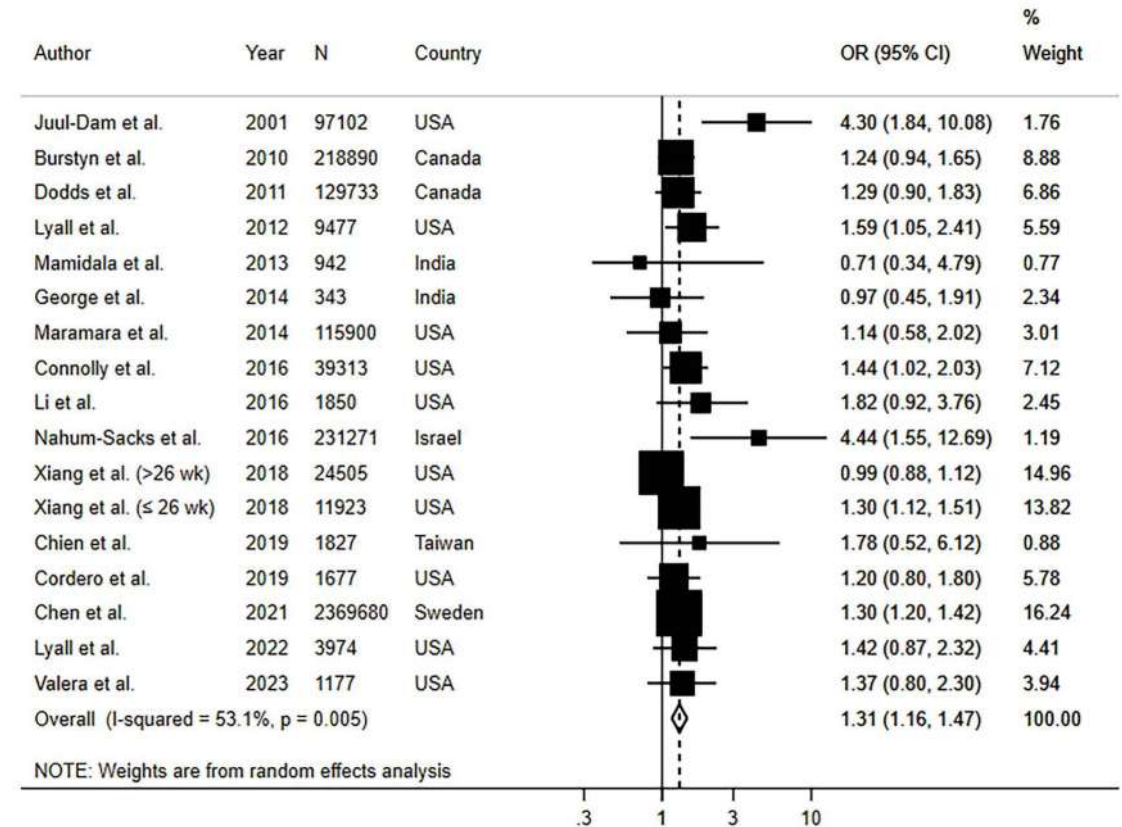


1. Zhang, T. et al. JAMA Network Open. 2, e1910236. (2019)

# Associative evidence: correlation between maternal diabetes and ASD<sup>1</sup>



Maternal type 2 diabetes



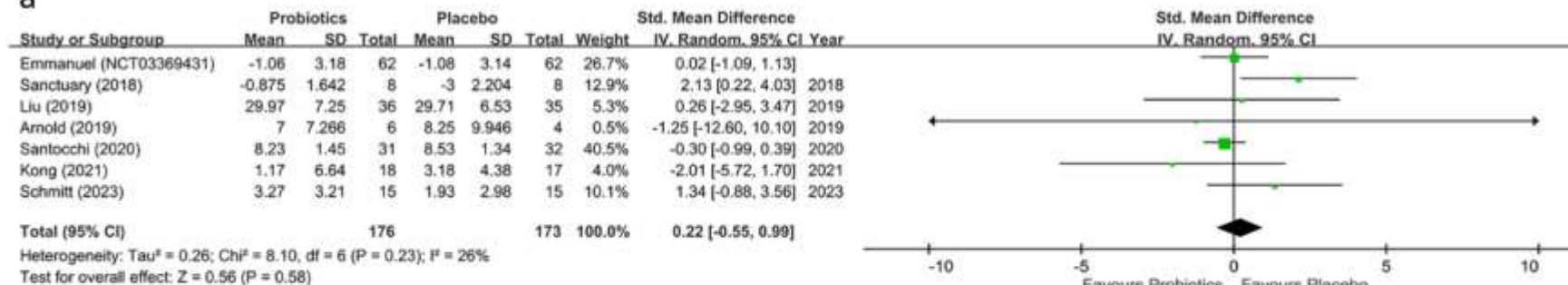
Gestational diabetes

1. Garza-Martínez, M. J. et al. *Journal of Psychiatric Research*.182,.100–115.(2025)

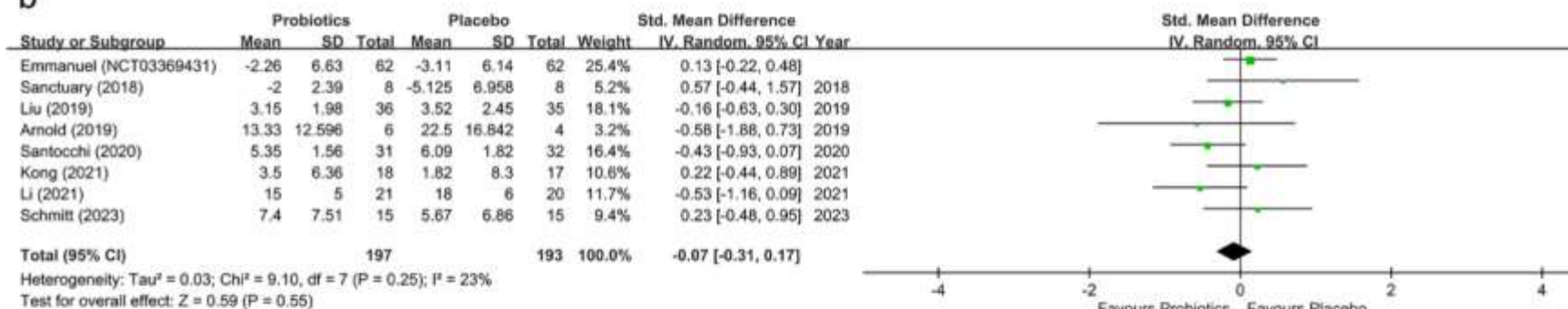


# Potential of probiotic interventions

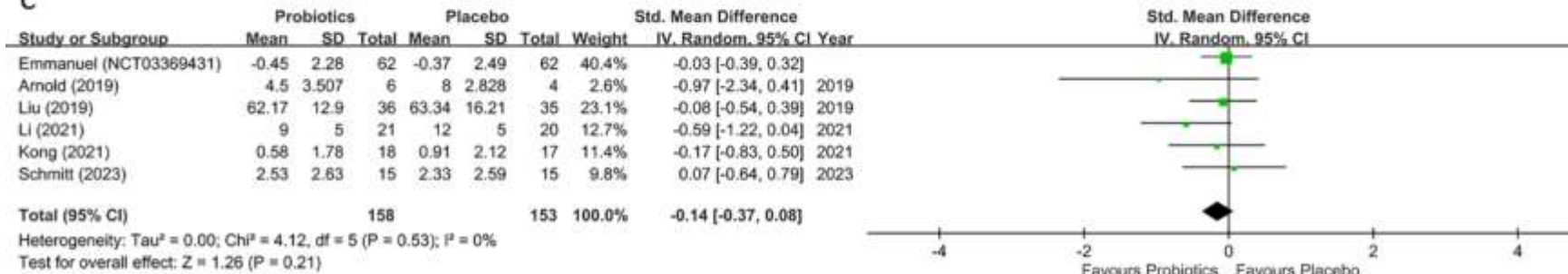
a



b



c



## Meta-analysis of RCTs<sup>1</sup>:

- restricted repetitive behaviors
- Social behaviors
- Communication

## Notes:

- Large variation between studies
- Effects are strain-specific
- No strong effects found

1. Lee, J.-C. et al. *Child and Adolescent Psychiatry and Mental Health*.18,.161.(2024)

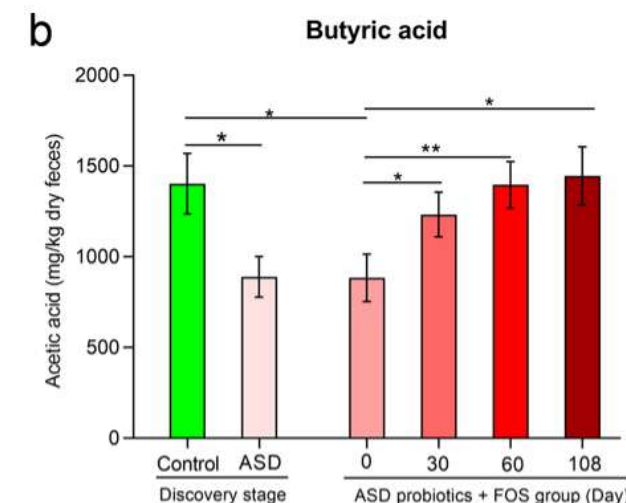
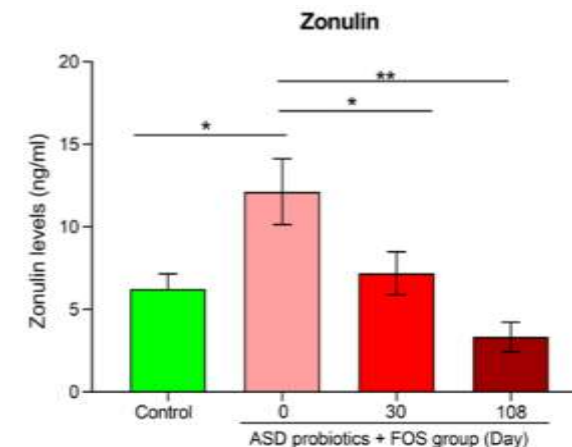
# Study including *L. paracasei* Lpc-37<sup>1</sup>

	ASD group probiotic supplementation (Baseline or 0 day)	ASD group after probiotic supplementation ( <i>P</i> value)		
		30 days	60 days	108 days
<b>ATEC subscales</b>				
Speech/language/communication	19.45 ± 1.26	17.25 ± 1.24 (0.23)	13.38 ± 1.41 ( <b>0.003</b> )	10.78 ± 1.07(< <b>0.001</b> )
Sociability	22.75 ± 1.96	19.0 ± 1.79 (0.17)	15.92 ± 1.67 ( <b>0.016</b> )	15.33 ± 1.80 ( <b>0.019</b> )
Sensory/cognitive awareness	21.25 ± 1.67	19.82 ± 1.61 (0.54)	17.54 ± 1.76 (0.14)	17.0 ± 2.26 (0.14)
Healthy/physical/behavior	21.63 ± 2.72	17.63 ± 2.29 (0.27)	20.85 ± 2.62 (0.84)	17.33 ± 2.91(0.32)
Total ATEC score	85.06 ± 5.72	73.70 ± 5.54 (0.16)	67.69 ± 5.51 ( <b>0.04</b> )	59.33 ± 6.52 ( <b>0.009</b> )
<b>6-GSI score items</b>				
Constipation	1.25 ± 0.25	0.50 ± 0.16( <b>0.017</b> )	0.38 ± 0.14( <b>0.008</b> )	0.22 ± 0.15 ( <b>0.008</b> )
Diarrhea	0.50 ± 0.16	0.25 ± 0.11(0.21)	0.08 ± 0.08 ( <b>0.03</b> )	0.00 ± 0.0( <b>0.03</b> )
Stool consistency	0.37 ± 0.20	0.13 ± 0.09 (0.26)	0.00 ± 0.0 (0.11)	0.0 ± 0.0 (0.18)
Stool smell	1.18 ± 0.16	0.56 ± 0.18( <b>0.01</b> )	0.54 ± 0.14( <b>0.007</b> )	0.44 ± 0.18 ( <b>0.01</b> )
Flatulence	1.18 ± 0.21	0.68 ± 0.22 (0.11)	0.62 ± 0.21(0.07)	0.67 ± 0.17 (0.10)
Abdominal pain	0.44 ± 0.16	0.18 ± 0.10 (0.19)	0.15 ± 0.10 (0.16)	0.11 ± 0.11 (0.16)
Total 6-GSI score	4.88 ± 0.43	2.31 ± 0.44 ( <b>0.002</b> )	2.39 ± 0.56( <b>0.001</b> )	1.44 ± 0.38(< <b>0.001</b> )

Study size: n=26

Design: RCT

Intervention: *B. infantis* Bi-26, *L. rhamnosus* HN001, *B. lactis* BL-04,  
*L. paracasei* LPC-37, FOS

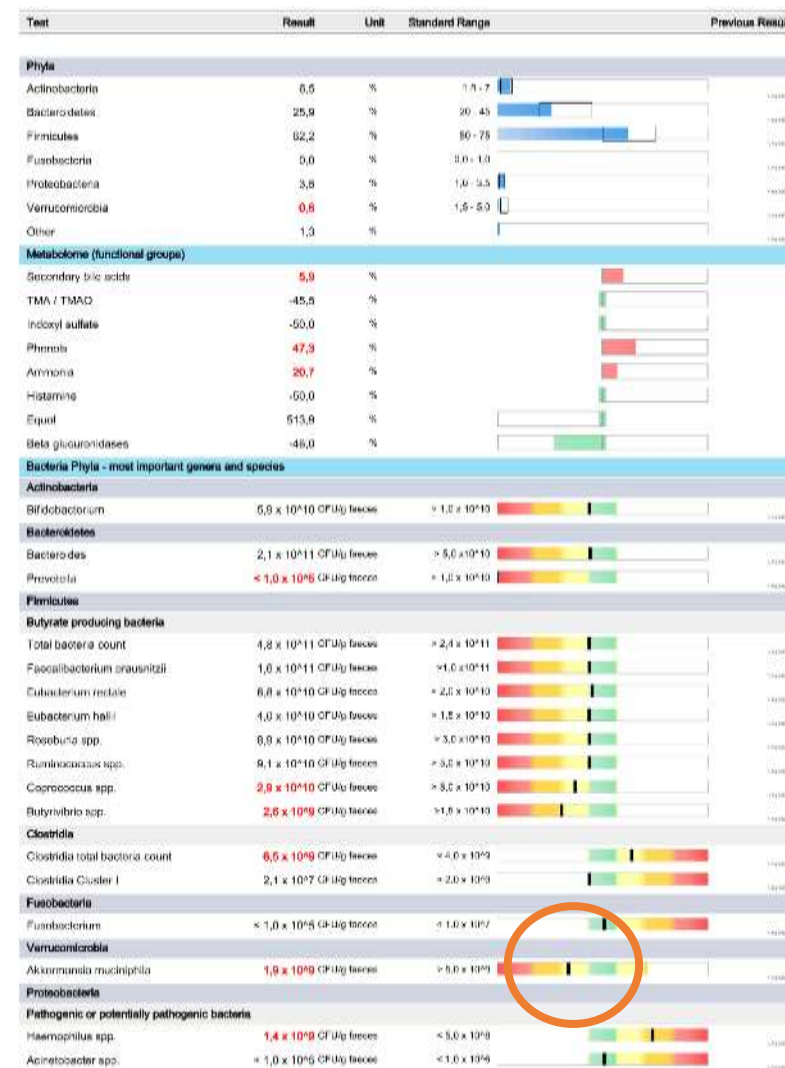
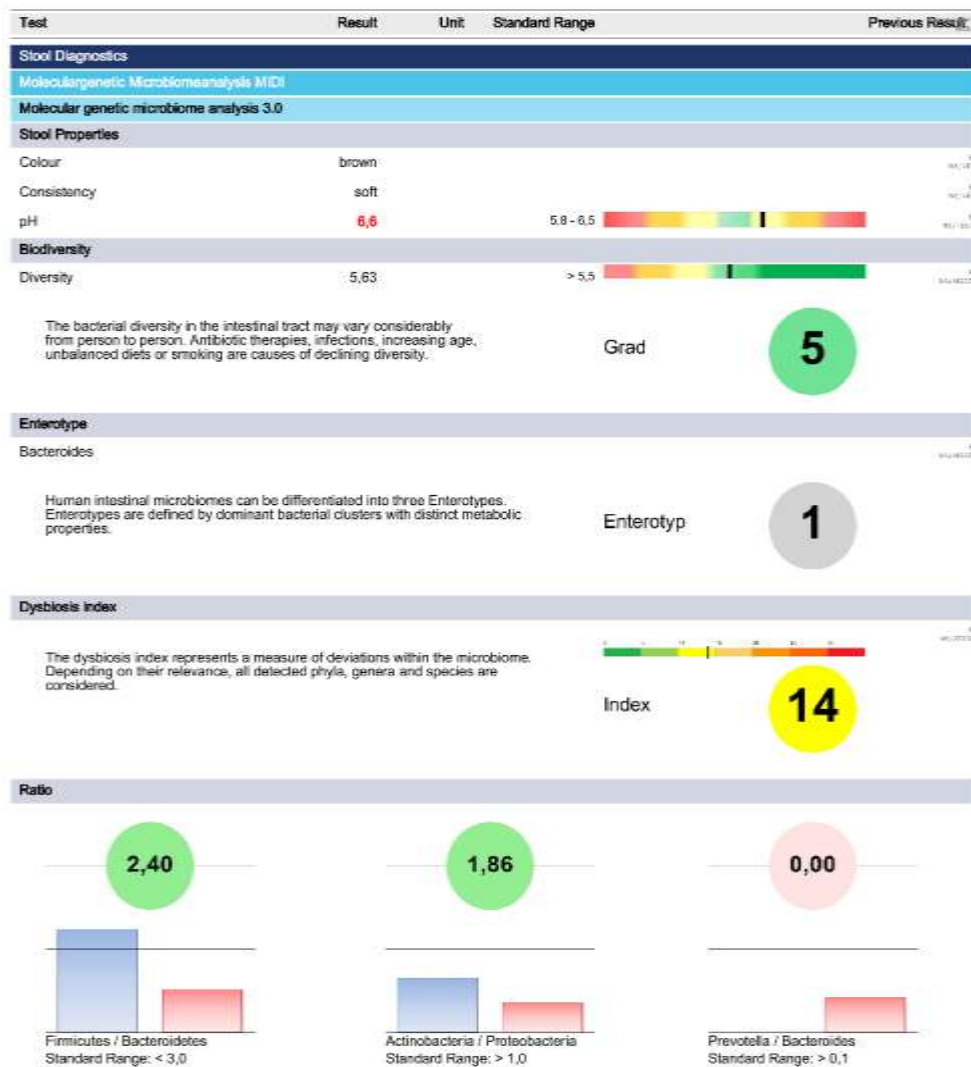


# Case report 1

# Case report 1: girl with ASD

- **Marie, born in 2018**, 6 years old at the start of therapy (November 2024)
- No bowel movement after birth, at some point it was said: **chronic constipation**
- Psychiatric treatment was of no use.
- Autism spectrum:
  - Social anxiety
  - Very quiet in unfamiliar surroundings
  - Eating behavior disorder: mini portions throughout the day, cravings for sugar and sweets

# Case Study Marie – Microbiome 11/2024 (1/3)





# Case Study Marie – Microbiome 11/2024 (2/3)

Test	Result	Unit	Standard Range	Previous Result
<b>Proteus spp.</b>	< 1,0 x 10 <sup>5</sup> CFU/g faeces		< 1,0 x 10 <sup>5</sup>	FA
<b>Klebsiella spp.</b>	< 1,0 x 10 <sup>5</sup> CFU/g faeces		< 1,0 x 10 <sup>5</sup>	FA
<b>Enterobacter spp.</b>	< 1,0 x 10 <sup>5</sup> CFU/g faeces		< 1,0 x 10 <sup>5</sup>	FA
<b>Serratia spp.</b>	< 1,0 x 10 <sup>5</sup> CFU/g faeces		< 1,0 x 10 <sup>5</sup>	FA
<b>Haflnia spp.</b>	< 1,0 x 10 <sup>5</sup> CFU/g faeces		< 1,0 x 10 <sup>5</sup>	FA
<b>Morganella spp.</b>	< 1,0 x 10 <sup>5</sup> CFU/g faeces		< 1,0 x 10 <sup>5</sup>	FA
<b>Citrobacter spp.</b>	< 1,0 x 10 <sup>5</sup> CFU/g faeces		< 5,0 x 10 <sup>4</sup>	FA
<b>Pseudomonas spp.</b>	< 1,0 x 10 <sup>5</sup> CFU/g faeces		< 5,0 x 10 <sup>4</sup>	FA
<b>Providencia spp.</b>	< 1,0 x 10 <sup>5</sup> CFU/g faeces		< 5,0 x 10 <sup>4</sup>	FA
<b>H2S production</b>				
<b>Sulphate reducing bacteria</b>	1,8 x 10 <sup>6</sup> CFU/g faeces		< 2,0 x 10 <sup>5</sup>	FA
<b>Desulfovibrio piger</b>	< 1,0 x 10 <sup>5</sup> CFU/g faeces		< 1,0 x 10 <sup>5</sup>	FA
<b>Desulfohalobium pigra</b>	< 1,0 x 10 <sup>5</sup> CFU/g faeces		< 1,0 x 10 <sup>5</sup>	FA
<b>Blifophia wadsworthia</b>	< 1,0 x 10 <sup>5</sup> CFU/g faeces		< 2,0 x 10 <sup>5</sup>	FA
<b>Immunogenicity / Mucus production</b>				
<b>Immunogenically effective bacteria</b>				
<b>Escherichia coli</b>	7,6 x 10 <sup>6</sup> CFU/g faeces		10 <sup>6</sup> - 10 <sup>7</sup>	FA
<b>Enterococcus spp.</b>	1,28 x 10 <sup>7</sup> CFU/g faeces		10 <sup>6</sup> - 10 <sup>7</sup>	FA
<b>Lactobacillus spp.</b>	1,1 x 10 <sup>5</sup> CFU/g faeces		10 <sup>5</sup> - 10 <sup>6</sup>	FA
<b>Mucin production / Mucosal barrier</b>				
<b>Akkermansia muciniphila</b>	1,8 x 10 <sup>9</sup> CFU/g faeces		> 5,0 x 10 <sup>8</sup>	FA
<b>Faecalibacterium prausnitzii</b>	1,6 x 10 <sup>11</sup> CFU/g faeces		> 1,0 x 10 <sup>11</sup>	FA
<b>Archaea</b>				
<b>Methanogens</b>				
<b>Methanobrevibacter spp.</b>	< 1,0 x 10 <sup>5</sup> CFU/g faeces		< 5,0 x 10 <sup>5</sup>	FA
ATTENTION: The new OncoSnap tube and the matrix enable even more effective sample disruption, especially with gram-positive bacteria. This results in slight shifts in the standard ranges. We ask you to take this into account.				
<b>Mycobiome: relevant yeasts</b>				
<b>Candida albicans (CA)</b>	< 1,0 x 10 <sup>3</sup> CFU/g faeces		< 1,0 x 10 <sup>3</sup>	FA
<b>Candida krusei (CK)</b>	< 1,0 x 10 <sup>3</sup> CFU/g faeces		< 1,0 x 10 <sup>3</sup>	FA
<b>Candida glabrata (CG)</b>	< 1,0 x 10 <sup>3</sup> CFU/g faeces		< 1,0 x 10 <sup>3</sup>	FA
<b>Candida dubliniensis (CD)</b>	< 1,0 x 10 <sup>3</sup> CFU/g faeces		< 1,0 x 10 <sup>3</sup>	FA
<b>Candida parapsilosis (CP)</b>	< 1,0 x 10 <sup>3</sup> CFU/g faeces		< 1,0 x 10 <sup>3</sup>	FA
<b>Candida tropicalis (CTp)</b>	< 1,0 x 10 <sup>3</sup> CFU/g faeces		< 1,0 x 10 <sup>3</sup>	FA
<b>Candida lusitanae (CL)</b>	< 1,0 x 10 <sup>3</sup> CFU/g faeces		< 1,0 x 10 <sup>3</sup>	FA
<b>Parasites</b>				
<b>Pathobionts</b>				
<b>Blasotocystis hominis</b>	negative		negative	FA
<b>Dientamoeba fragilis</b>	borderline		negative	FA
<b>Pathogenic intestinal protozoa</b>				
<b>Giardia lamblia</b>	negative		negative	FA
<b>Entamoeba histolytica</b>	negative		negative	FA
<b>Cryptosporidium species</b>	negative		negative	FA
<b>Cyclospora cayentanensis</b>	negative		negative	FA

Test	Result	Unit	Standard Range	Previous Result
<b>Maldigestion, malabsorption, MIS</b>				
<b>Digestive Residues</b>				
<b>Quantitative determination of fat</b>	3,54	g/100g	< 3,5	FA
<b>Quantitative determination of nitrogen</b>	0,63	g/100g	< 1,0	FA
<b>Quantitative determination of sugar</b>	2,95	g/100g	< 2,5	FA
<b>Quantitative determination of water</b>	77,01	g/100g	75 - 85	FA
<b>Determination of Maldigestion</b>				
<b>Pancreatic elastase</b>	420,02	µg/g	> 200	FA
<b>Bile acids in stool</b>	18,50	µmol/l	< 70	FA
<b>Detection of Malabsorption</b>				
<b>Calprotectin</b>	< 17,90	mg/l	< 50	FA
<b>Alpha1-Antitrypsin</b>	14,1	mg/dl	< 27,5	FA
<b>Special Request</b>				
<b>Secretory IgA</b>	903,4	µg/ml	510 - 2040	FA
<b>Food Allergies: EPX</b>	777,63	ng/ml	< 350	FA
<b>Zonulin</b>	88,32	ng/ml	< 55	FA



# Case Study Marie: treatment approach & early results



## Treatment approach:

- December 2024: MyOwnBlend
  - Low dose: 2x half spoon per day
- Gluten-free diet

## Early results, Mid-February (i.e. 2 months after start):

- Bowel movement is much better, she has to go to the toilet, that wasn't the case before!
- No longer has the extreme cravings for sweets.
- Success: digestion is regular and much better, cravings gone.

**Patient is still on MyOwnBlend, further results to follow**

Element	Tagesdosis
MyOwnBlend, Magistral-Preparat 2 Monaten (oral)	
PHGG	4
Bacillus coagulans Unique IS-2	2
Lactiplantibacillus plantarum DR7	2
S. Boulardii	1
DJ repair	3
Bifidobacterium lactis HNO 19	2
L. plantarum P-8	1

## Case report 2

# Case Study 2: Young Girl with ASD

- **Born in 2017**, 6 years old at the start of therapy (April 2024)
- Fila is a child from a **Bulgarian family**
- **Autism diagnosis** made by **University Hospital Frankfurt**
- Also monitored by **neurologists in Bulgaria**
- **Medications at the time of anamnesis:**
  - Omni-Biotic 9
  - Glialia 400 + 40 mg



# Anamnesis of Fila in April 2024

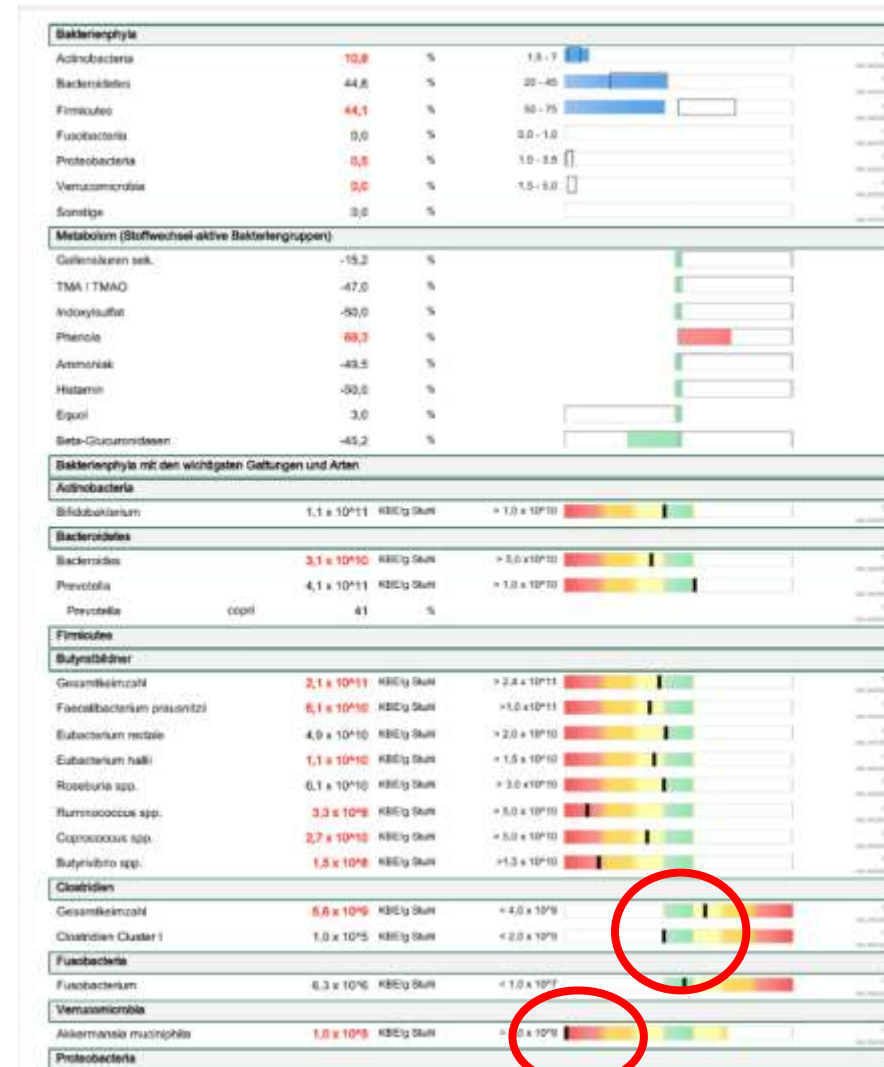
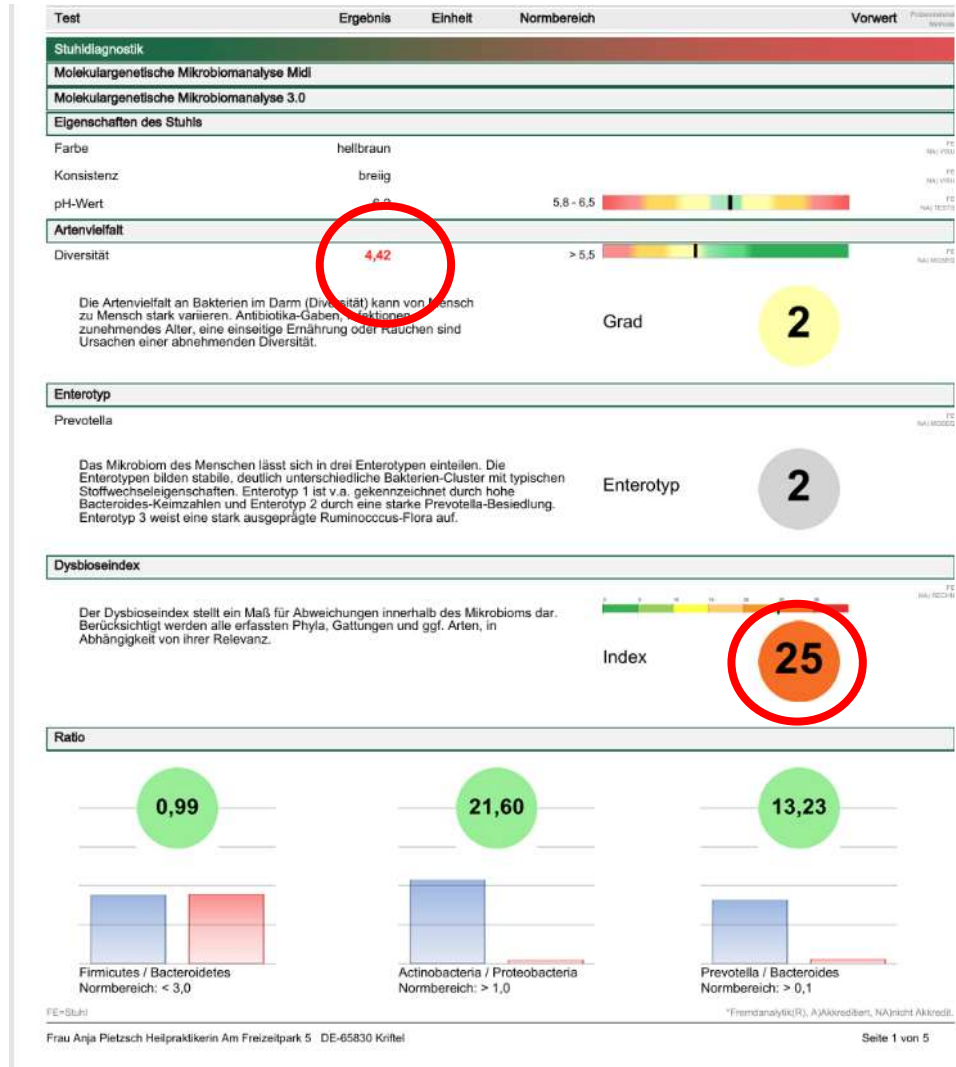
## Clinic and Autism Spectrum

- Constantly **bloated abdomen**
- **Uncontrolled eating**, craving for carbohydrates or sugar
- **No feeling of satiety**, can eat all day
- **Unbalanced, restless**
- Frequent toilet visits with **little stool output**
- **Constantly changing stool consistency**
- **Cannot speak properly**, only makes sounds

## Diagnostics

- **Microbiome analysis**

# Case Study Fila – Microbiome 04/2024 (1/3)



# Case Study Fila – Microbiome 04/2024 (2/3)

Proteobacteria				
Pathogene oder potentiell pathogene Bakterien				
Haemophilus spp.	$3,2 \times 10^{19}$	KBE/g Stuhl	$< 5,0 \times 10^6$	
Acinetobacter spp.	$< 1,0 \times 10^5$	KBE/g Stuhl	$< 1,0 \times 10^6$	
Proteus spp.	$< 1,0 \times 10^5$	KBE/g Stuhl	$< 1,0 \times 10^6$	
Klebsiella spp.	$< 1,0 \times 10^5$	KBE/g Stuhl	$< 1,0 \times 10^7$	
Enterobacter spp.	$< 1,0 \times 10^5$	KBE/g Stuhl	$< 1,0 \times 10^6$	
Serratia spp.	$< 1,0 \times 10^5$	KBE/g Stuhl	$< 1,0 \times 10^7$	
Halma spp.	$< 1,0 \times 10^5$	KBE/g Stuhl	$< 1,0 \times 10^6$	
Morganella spp.	$< 1,0 \times 10^5$	KBE/g Stuhl	$< 1,0 \times 10^6$	
Citrobacter spp.	$6,3 \times 10^6$	KBE/g Stuhl	$< 5,0 \times 10^8$	
Pseudomonas spp.	$6,3 \times 10^7$	KBE/g Stuhl	$< 5,0 \times 10^7$	
Providencia spp.	$< 1,0 \times 10^5$	KBE/g Stuhl	$< 5,0 \times 10^7$	
H2S-Bildung				
Sulfid reduzierende Bakterien	$2,4 \times 10^8$	KBE/g Stuhl	$< 2,5 \times 10^9$	
Desulfovibrio piger	$< 1,0 \times 10^5$	KBE/g Stuhl	$< 1,0 \times 10^9$	
Desulfomonas pigra	$< 1,0 \times 10^5$	KBE/g Stuhl	$< 1,0 \times 10^9$	
Blautia wadsworthii	$< 1,0 \times 10^5$	KBE/g Stuhl	$< 2,0 \times 10^9$	
Immunogenität/Mucusbildung				
Immunogen wirkende Bakterien				
Escherichia coli	$9,4 \times 10^6$	KBE/g Stuhl	$10^6 - 10^7$	
Enterococcus spp.	$1,40 \times 10^6$	KBE/g Stuhl	$10^6 - 10^7$	
Lactobacillus spp.	$9,4 \times 10^6$	KBE/g Stuhl	$10^6 - 10^7$	
Mucusbildung/Schleimhautbarriere				
Akkermansia muciniphila	$1,0 \times 10^5$	KBE/g Stuhl	$> 5,0 \times 10^9$	
Fascolibacterium prausnitzii	$6,1 \times 10^{10}$	KBE/g Stuhl	$> 1,0 \times 10^{11}$	
Archaea				
Methanogene				
Methanobrevibacter spp.	$< 1,0 \times 10^5$	KBE/g Stuhl	$< 5,0 \times 10^8$	
ACHTUNG: Das neue Covid-19-Prüfkit und die darin enthaltene Matrix ermöglichen einen noch effektiveren Probennachweis, vor allem bei den grampositiven Bakterien. Dadurch ergeben sich leichtere Verschiebungen in den Numberebenen. Wir bitten dies zu berücksichtigen.				
Mykobium: relevante Arten				
Candida albicans (CA)	$< 1,0 \times 10^3$	KBE/g Stuhl	$< 1,0 \times 10^3$	
Candida krusei (CK)	$< 1,0 \times 10^3$	KBE/g Stuhl	$< 1,0 \times 10^3$	
Candida glabrata (CG)	$< 1,0 \times 10^3$	KBE/g Stuhl	$< 1,0 \times 10^3$	
Candida dubliniensis (CD)	$< 1,0 \times 10^3$	KBE/g Stuhl	$< 1,0 \times 10^3$	
Candida parapsilosis (CP)	$< 1,0 \times 10^3$	KBE/g Stuhl	$< 1,0 \times 10^3$	
Candida tropicalis (CT)	$< 1,0 \times 10^3$	KBE/g Stuhl	$< 1,0 \times 10^3$	
Candida lusitanae (CL)	$< 1,0 \times 10^3$	KBE/g Stuhl	$< 1,0 \times 10^3$	

Pathobionten		
Blastocystis hominis	negativ	
Dientamoeba fragilis	negativ	
Pathogene Darmprotozoen		
Giardia lamblia	negativ	
Entamoeba histolytica	negativ	
Cryptosporidium spp.	negativ	
Cyclospora cayentensis	negativ	



# Case Study Fila – Microbiome 04/2024 (3/3)

Maldigestion, Malabsorption, MIS					A) MOLEX
Verdauungsrückstände					
Quant. Nachweis von Fett	4,30	g/100g	< 3,5		FE NA) PHOT
Quant. Nachweis von Stickstoff	0,40	g/100g	< 1,0		FE NA) PHOT
Quant. Nachweis von Zucker	4,40	g/100g	< 2,5		FE NA) PHOT
Quant. Nachweis von Wasser	81,10	g/100g	75 - 85		FE NA) PHOT
Nachweis einer Maldigestion					
Pankreaselastase im Stuhl	699,07	µg/g	> 200		FE A) ELISA
Gallensäuren im Stuhl	27,47	µmol/l	< 70		FE NA) PHOTO
Nachweis einer Malabsorption					
Calprotectin	33,45	mg/l	< 50		FE A) ELISA
Alpha 1-Antitrypsin	25,6	mg/dl	< 27,5		FE A) ELISA
Einzelparameter					
Sekretorisches Immunglobulin A (sIgA)	3332,5	µg/ml	510 - 2040		FE A) ELISA
Zonulin	83,36	ng/ml	< 55		FE A) ELISA

Grenzwertiger Alpha-1-Antitrypsin Wert

# Case Study Fila — Start of Therapy May 2024



## Recommendation

- **MyOwnBlend**
- but utilize the time until the preparation is available
  - **Pro Emsa Berry 15 ml + Omni Biotic 10 + Pro Präbioma 2 x ½ measuring spoon daily**

## Further Diagnostics

- **Test for Kryptopyrroluria** – unremarkable, no therapeutic consequence

Test	Ergebnis	Einheit	Normbereich	Vorwert	Problemmuster Methode
Spezielle Analytik					
Kryptopyrrol					
Kryptopyrrol im Urin	3,28	mg/g Krea	< 5		RU ALPHAC
Kryptopyrrolwerte zwischen 5,0 und 6,0 stellen einen Graubereich dar. Sollten klinische Symptome, z.B. ein ADHS bestehen, kann eine Therapie mit Vitamin B6 und Zink bereits bei diesen Werten sinnvoll sein.					
Kreatinin (Urin)	445	mg/l	290 - 2260		RU ALPHAC

# Case Study Fila – My Own Blend

Verstopfung	0	0	Gibt es Verstopfung? 0 = nein; 1 = ja, kann einen Tag aussetzen; 2 = ja, Stuhlgang alle 2-3 Tage; 3 = ja, Stuhlgang alle 3-4 Tage; 4 = ja, Stuhlgang alle 6 Tage oder länger
Diarrhö	3-4	0	Wie oft kommt Durchfall vor? 0 = nie; 1 = ein Mal alle zwei Wochen; 2 = ein Mal pro Woche; 3 = zwei-drei Mal pro Woche; 4 = vier-sechs Mal pro Woche; 5 = täglich.
Völlegefühl	3	0	Wie oft kommt es zu Völlegefühl? 0 = nie; 1 = einmal jede zwei Wochen; 2 = jede Woche; 3 = zwei-drei mal pro Woche; 4 = vier-sechs mal pro Woche; 5 = jeden Tag.
Blähungen	5	0	Wie oft kommt es zu Blähungen? 0 = nie; 1 = einmal jede zwei Wochen; 2 = jede Woche; 3 = zwei-drei mal pro Woche; 4 = vier-sechs mal pro Woche; 5 = jeden Tag.
Bauchschmerzen (Darm-bezogen)	2	0	Wie oft treten Bauchschmerzen auf? 0 = nie; 1 = ein paar Mal pro Monat; 2 = ein paar Mal pro Woche; 3 = täglich aber nicht den ganzen Tag; 4 = täglich den ganzen Tag.
Kognition	3	0	Gibt es Konzentrationsprobleme, Gedächtnisprobleme, Orientierungsprobleme oder sogenannter Brain Fog? 0 = nein; 1 = etwas; 2 = ziemlich; 3 = stark; 4 = sehr stark.
Düstere Stimmungen	3	0	Gibt es düstere oder depressive Stimmungen? 0 = nie; 1 = manchmal; 2 = weniger als die Hälfte der Zeit; 3 = mehr als die Hälfte der Zeit; 4 = die meiste Zeit; 5 = immer.
Stress	3	0	Gibt es einen erhöhten Stresspegel? 0 = nie; 1 = manchmal; 2 = weniger als die Hälfte der Zeit; 3 = mehr als die Hälfte der Zeit; 4 = die meiste Zeit; 5 = immer.
Ängstlich/angespannt	2	0	Gibt es Angst? 0 = nie; 1 = manchmal; 2 = weniger als die Hälfte der Zeit; 3 = mehr als die Hälfte der Zeit; 4 = meistens; 5 = immer.
Ermüdung	1	0	Wie stark war die Müdigkeit/Erschöpfung in den letzten Wochen? 0 = Symptom nicht vorhanden; 1 = leicht; 2 = mittel; 3 = schwer; 4 = sehr schwer.
Vaginale Beschwerden	4	0	Treten folgende vaginale Beschwerden auf: überliefender grauweißer Ausfluss, Juckreiz, Brennen? 0 = N/A, nie; 1 = manchmal; 2 = regelmässig; 3 = oft; 4 = ständig.
Akne	1	0	Gibt es Akne? 0 = überhaupt nicht (negativ); 1 = leichte Beschwerden (schwach positiv); 2 = mäßige Beschwerden (positiv); 3 = starke Beschwerden (stark positiv); 4 = schwere Beschwerden (sehr stark positiv).

## Formulation MOB

Start of use at the beginning of June 2024

Element	Tagesdosis	Betrag	Typ
MyOwnBlend, Magistral-Preparat 2 Monaten (oral)		275,00 €	Persoonlijke Bereiding
PHGG	3		Magistral compound
S. Boulardii	2		Magistral compound
Bacillus coagulans Unique IS-2	2		Magistral compound
Bifidobacterium lactis HN019	3		Magistral compound
Akkermansia muciniphila, pasteurisiertes	1		Magistral compound
Gut enricher	1		Magistral compound
Akazien-Faser	3		Magistral compound

# Case Study Fila – Therapy Progress – July / August 2024



## Progress Evaluation After 4 Weeks:

- Fila's bloating has improved
- Bowel movements are less frequent, now 2-3 times daily
- She is very balanced
- It seems like there is progress in her speech – she is starting to talk

## August 2024

- Fila is in Bulgaria with her parents
- Mother's email: "My daughter is doing very well, she is a bit nervous, but it's very hot here, I don't think it has anything to do with the probiotic."
- Neurological examination in Bulgaria

# Case Study Fila – Therapy Progress – August/September 2024

## Mother's Feedback via Email - End of August

- "Many of the symptoms and responses to the questions I filled out are currently in good condition."
- "The skin is soft, there are no small pimples. No yellow stains on the diaper."
- School enrollment in September, Fila is restless,
- Mother is afraid she might have to give medication.
- Recommendation: Lunafini by Heel



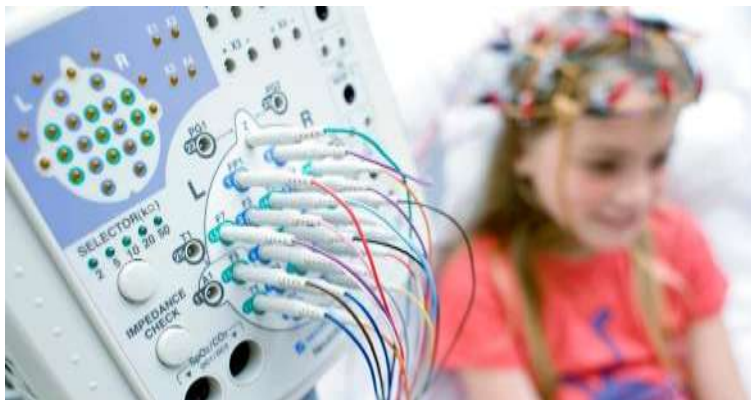
## Mother's Feedback - Mid-September

- Fila enjoys going to school, but there are situations where she is somewhat aggressive.
- It also takes time to adjust to a new environment. In general, she is calm! She has calmed down a lot since I started giving her Lunafini.

# Case Study Fila – Therapy Progress – End of August 2024

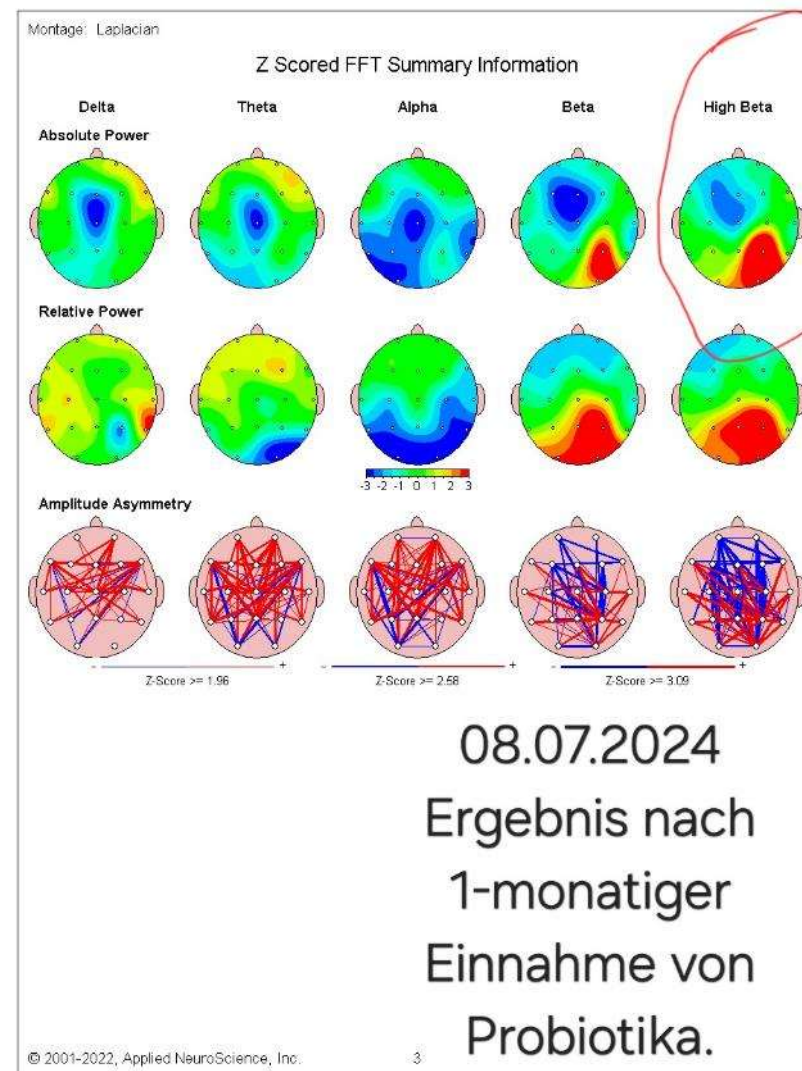
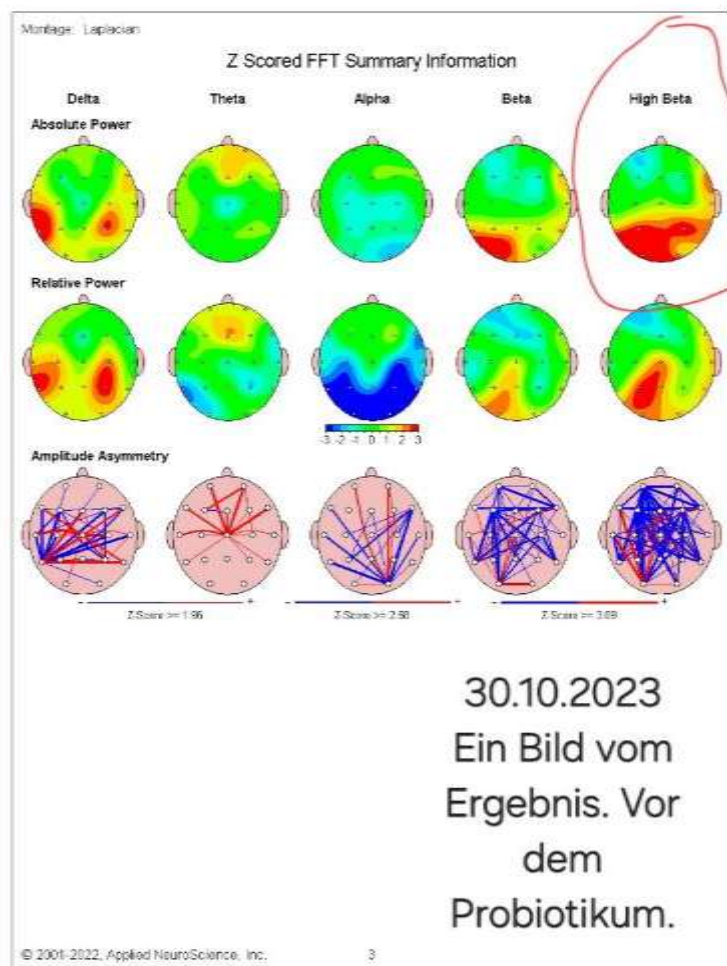
## Neurological Examination of the Head in Bulgaria

- "The doctor and I were very positively surprised... He is very glad that I found you and that we started the treatment together."





# Neurological Examination



# Case Study Fila – Ongoing Therapy Progress

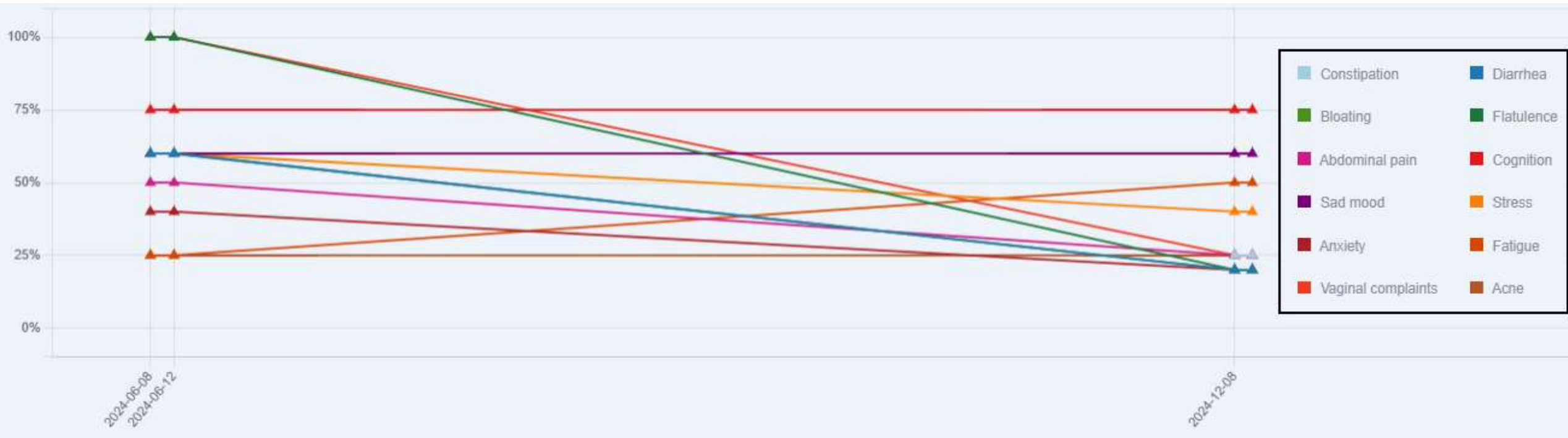
## Fall 2024

- Eating and drinking behavior has continued to normalize – Fila "is no longer constantly looking for food," no longer overeating
- She drinks when she is thirsty
- Skin is softer
- No longer looks "bloated"
- Immune system is strong
- Sleep is trouble-free

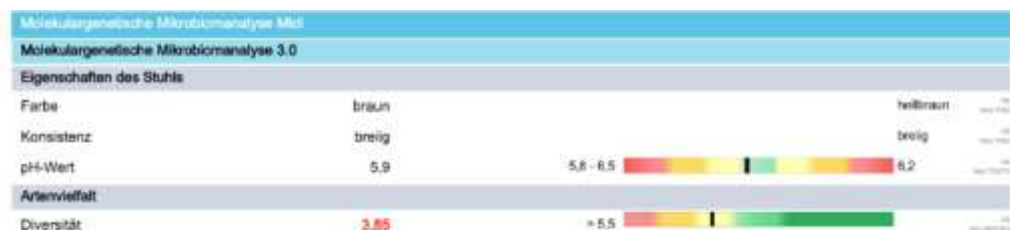
## Winter 2024

- Positive change in language
- When the mother asks a question, Fila thinks about which answer to give
- She understands everything much better
- She is not forgetting what she has learned at the moment. Previously, she couldn't learn.

# Case Study Fila – Ongoing Therapy Progress



# Case Study Fila – Microbiome 11/2024 (1/3)



Die Artenvielfalt an Bakterien im Darm (Diversität) kann von Mensch zu Mensch stark variieren. Antibiotika-Gaben, Infektionen, zunehmendes Alter, eine einseitige Ernährung oder Rauchen sind Ursachen einer abnehmenden Diversität.

Grad

1



Das Mikrobiom des Menschen lässt sich in drei Enterotypen einteilen. Die Enterotypen bilden stabile, deutlich unterschiedliche Bakterien-Cluster mit typischen Stoffwechselseigenschaften. Enterotyp 1 ist v.a. gekennzeichnet durch hohe Bacteroides-Keimzahlen und Enterotyp 2 durch eine starke Prevotella-Besiedlung. Enterotyp 3 weist eine stark ausgeprägte Ruminococcus-Flora auf.

Enterotyp

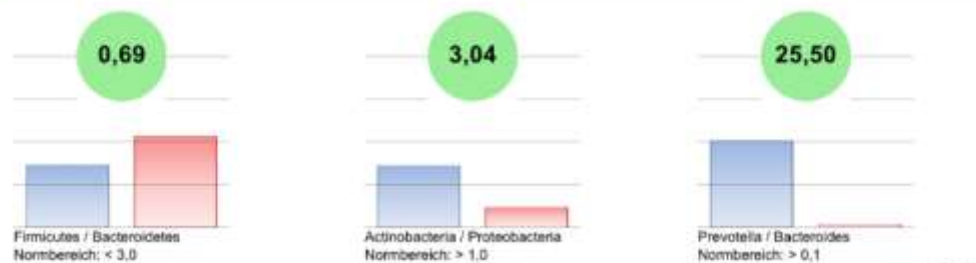
2



Der Dysbioseindex stellt ein Maß für Abweichungen innerhalb des Mikrobioms dar. Berücksichtigt werden alle erfassten Phyla, Gattungen und ggf. Arten, in Abhängigkeit von ihrer Relevanz.

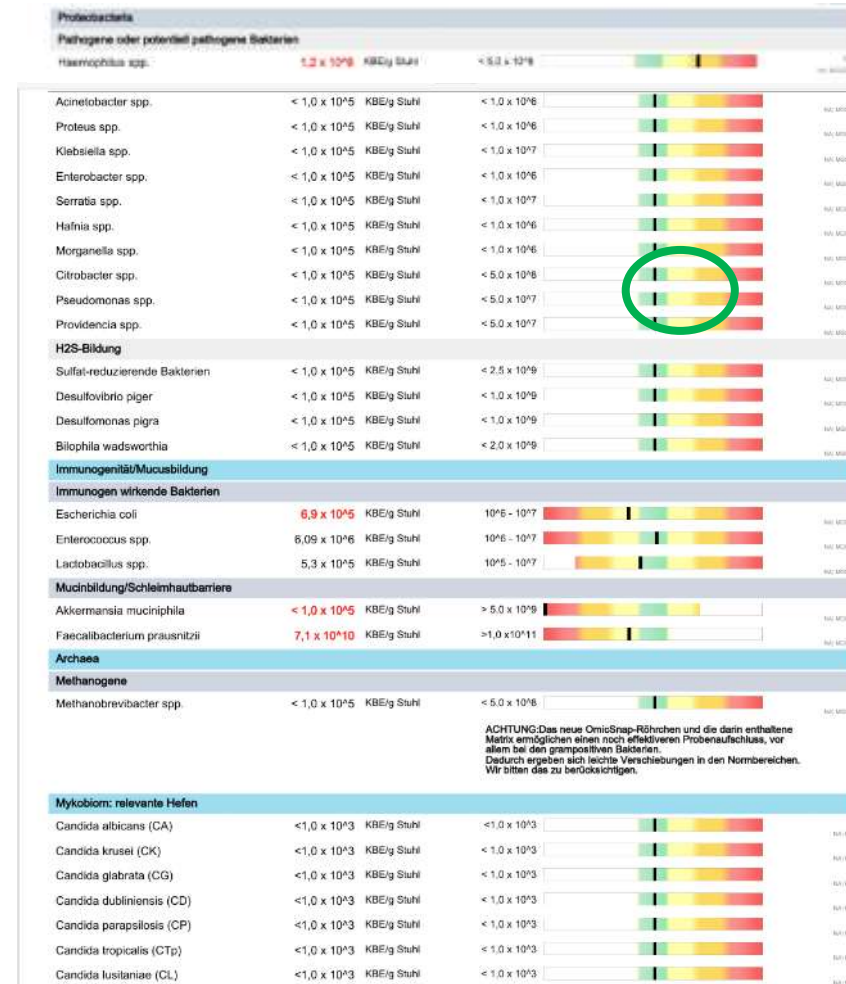
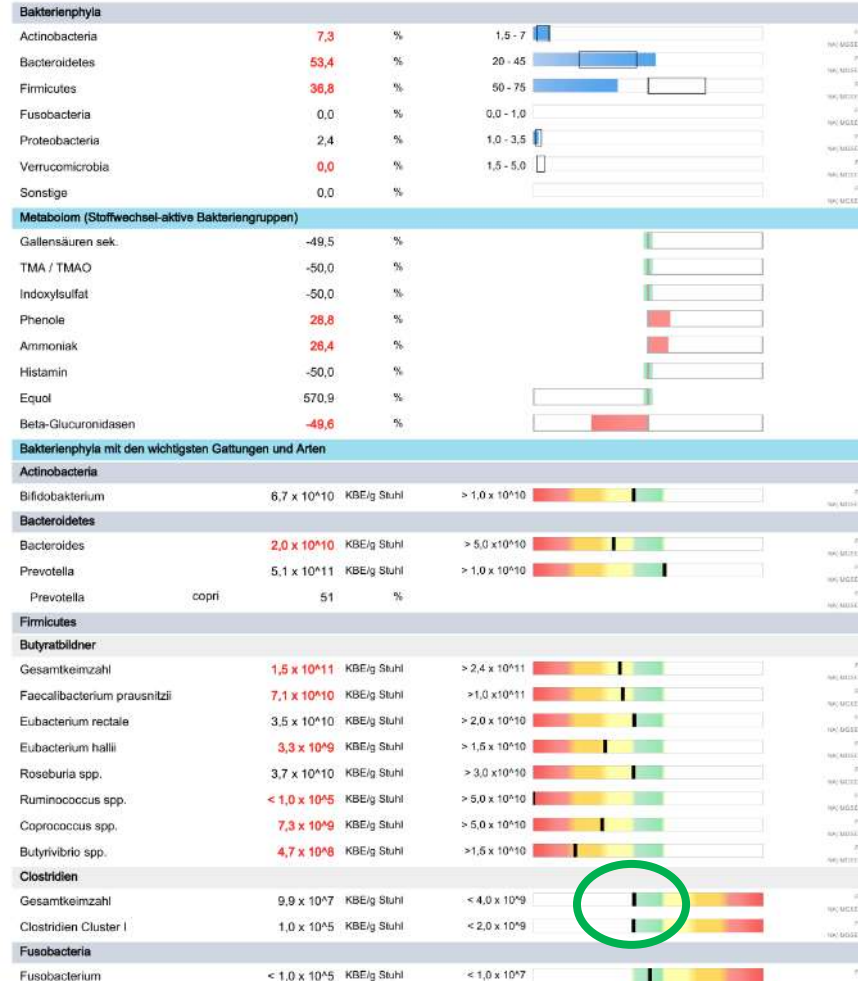


30






# Case Study Fila – Microbiome 11/2024 (2/3)





# Case Study Fila – Microbiome 11/2024 (3/3)

Parasiten				
Pathobionten				
Blastocystis hominis	negativ	negativ		negativ
Dientamoeba fragilis	negativ	negativ		negativ
Pathogene Darmprotozoen				
Giardia lamblia	negativ	negativ		negativ
Entamoeba histolytica	negativ	negativ		negativ
Cryptosporidium spp.	negativ	negativ		negativ

\*Fremdwärts(R), A(Aktiviert), NA(nicht Aktiviert), weitere Informationen zu den Abkürzungen entnehmen Sie unserem Leistungsmenü-CDR16

Maldigestion, Malabsorption, MIS					
Verdauungsrückstände					
Quant. Nachweis von Fett	4,21	g/100g	< 3,5		4,30
Quant. Nachweis von Stickstoff	0,69	g/100g	< 1,0		0,40
Quant. Nachweis von Zucker	4,04	g/100g	< 2,5		4,40
Quant. Nachweis von Wasser	76,20	g/100g	75 - 85		81,10
Nachweis einer Maldigestion					
Pankreaselastase im Stuhl	668,24	µg/g	> 200		699,07
Gallensäuren im Stuhl	16,41	µmol/l	< 70		27,47
Nachweis einer Malabsorption					
Calprotectin	29,39	mg/l	< 50		33,45
Alpha 1-Antitrypsin	18,1	mg/l	< 27,5		25,6
Einzelparameter					
Sekretorisches Immunglobulin A (sIgA)	2304,6	µg/ml	510 - 2040		3332,5
Zonulin	77,74	ng/ml	< 55		83,36
Spezielle gastroenterologische Diagnostik					
Glutenunverträgliche Enteropathie / Zöliakie					
Anti-Gliadin-AK im Stuhl	31,95	U/l	< 100		
Anti-Transglutaminase AK i. Stuhl	<50,00	U/l	< 100		

# Case Study Fila – New MOB Formula Dezember 2024

## MOB Formula

- Start of intake: December 2024

Element	Tagesdosis	
MyOwnBlend, Magistral-Preparat 2 Monaten (oral)		
Gut enricher	1	
L. rhamnosus GG	3	
2'-Fucosyllactose	4	
PHGG	3	
S. Boulardii	2	
Akkermansia muciniphila, pasteurisiertes	2	

# Case Study Fila – Ongoing Therapy Progress

## **Between 1<sup>st</sup> and 2<sup>nd</sup> MyOwnBlend:**

- Gap in intake: Immediate bowel problems (hard and very dark stools, constipation)
- Immediately prone to infections: had fever, cough, cold, sore throat

## **Winter 2024 / Early 2025**

- Intake error with new MOB formula in the amount. 2 x 1 scoop
  - Reaction: frequent bowel movements, soft, unpleasant smell
  - Has become more restless
- Adjustment of dosage – overall condition improved again
- Susceptibility to infections immediately regulated: maybe 1 day, recovers quickly and doesn't need medication; mother was very sick, Fila didn't catch it.

# Case Study Fila – Ongoing Therapy Progress

## January 2025

- Dietary change discussed, less gluten. Currently: often pizza, pretzels.
- Coverage of nutrient needs with La Vita (she loves it!) and Vitamin D3.

## Mother's Email from 09.02:

- "She feels very well. She is calm. Everything is fine at the moment."

# Case Study Fila – Take home messages

## Important observations:

- No treatment currently exists for autism
- Fila (and also Marie) had many GI problems
- This is in line with the scientific evidence

## There are multiple indications that the MyOwnBlend positively influenced the autism symptoms:

- The first MyOwnBlend showed effect on speech already after 4 weeks
- The neurologist found improvements in the brain scan
- Later, Fila's cognitive functioning improved as well
- When the first MyOwnBlend was finished, problems started to return.
- When taking the wrong dose of the second MyOwnBlend, complaints got worse
- When taking the correct dose of the second MyOwnBlend, Fila improved even further

## In conclusion:

- In autistic patients with GI problems, treating the microbiome may improve their symptoms



A petri dish containing various microbial colonies, including a large white one at the bottom and several streaks of yellow and white colonies.

Thank you for your attention!