COMMONWEALTH LABORATORIES, INC.

Phone (800) 292-9019
FAX (781) 659-0705
commlabs@comcast.net

320 Washington Street
Norwell, MA 02061

Louis J. Traficante, Ph.D., DABFT
Laboratory Director

LACTOSE MALABSORPTION REPORT SHEET

Patient Name..... **DOE, JANE**
Patient Number..... **76767**
Date of Birth..... **8/5/1971**
Doctor..... **R. PHYSICIAN,MD**
Address..... **NORTHLAND, CA**
Date Samples Collected..... **4/5/2009**
Date of Assay..... **4/6/2009**

Analytical Results:

		ppm H_2		ppm CH_4		(f) CO_2
Control		32		0		1.39
1 Hour		104		0		1.20
2 Hour		103		0		1.12
3 Hour		67		0		1.12

Maximum H_2 Response- **72** Normal < 20ppm
Maximum CH_4 Response- **0** Normal < 12ppm
[H_2 + CH_4] Response- **72** Normal < 20ppm

GUIDE TO INTERPRETATION:

HYDROGEN RESPONSE SUGGESTS LACTOSE MALABSORPTION

LACTOSE MALABSORPTION IS NOT SUSPECTED FROM METHANE PRODUCTION ONLY

[H2 + CH4] EXCEEDS 20 PPM, SUGGESTING LACTOSE MALABSORPTION

Since Control Hydrogen > 30, the possibility of bacterial overgrowth should be considered.

Hydrogen (H_2) and Methane (CH_4) values are corrected for CO_2 content in the samples. The f(CO_2) is the correction factor; this value, when close to 1.00, indicates a good alveolar sample. A correction factor over 4.00 indicates a poor sample.

Moderate malabsorption is seen when the response is between 20-45 ppm for H_2 and/or CH_4, and may be controlled by limiting milk products. If it is over 45 ppm, it is considered to be severe malabsorption and may require avoiding milk products or using lactase dietary supplements.

These standards are for guidelines only. For diagnosis, the information must be supplemented with clinical information unavailable to the laboratory.