

Last Name, First Name:

Gender: female

ID number: 222952

Date of birth:

Specimen collection: 14.09.2020

Received at lab.: 17.09.2020

Date of result: 23.09.2020



CTL & Ortholabor | Anemonenweg 3a | 26160 Bad Zwischenahn

IMUPRO HEALTH ROMANIA

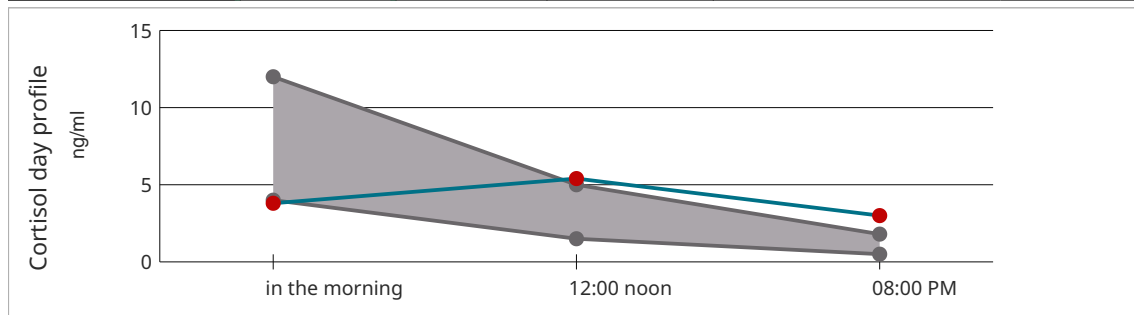
0007936

14, Gafencu Street, Cector 1
Bucharest Romania

RESULTS

▼ Result ■ Reference range ■ Outside of reference range

Tested parameter	RESULT	Reference range	Unit	Assessment	Preliminary finding
Serotonin	213	100 - 225	µg/g creatinine	normal	not available
GABA	5.0	1,5 - 8,0	µmol/g creatinine	normal	not available
Glutamate	17.0	8 - 30	µmol/g creatinine	normal	not available
Creatinine	27.8	-	mg/dl	Reference value	not available
Catecholamines					
Dopamine	239	125 - 250	µg/g creatinine	normal	not available
Noradrenaline	28	25 - 55	µg/g creatinine	normal	not available
Adrenaline	6.5	3 - 12	µg/g creatinine	normal	not available
NADR/ADR quot.	4.3	3 - 7	-	normal	not available
Cortisol diurnal profile					
Cortisol (morning)	3.8	4,0 - 12,0	ng/ml	diminished	not available
Cortisol (12 noon)	5.4	1,5 - 5,0	ng/ml	elevated	not available
Cortisol (8 p.m.)	3.0	0,5 - 1,8	ng/ml	elevated	not available
DHEA diurnal profile					
DHEA (morning)	270.0	34 - 230	pg/ml	elevated	not available
DHEA (8 p.m.)	226.2	15 - 100	pg/ml	elevated	not available



NEUROSPOT Plus | CTL & Ortholabor GmbH | ID number: 222952 # Patient: Bacauanu, Anca *25.06.1954 | 17.09.2020 09:44



Last Name, First Name:

Gender: female

ID number: 222952

Date of birth:

Specimen collection: 14.09.2020

Received at lab.: 17.09.2020

Date of result: 23.09.2020



OVERALL ASSESSMENT / OPINION ON MEDICAL HISTORY

Clinical information:

No clinical information

The present results show a non-intact diurnal cortisol curve with a diminished level at morning. This can be associated with symptoms such as difficulty to get up and get alert in the morning, fatigue during the first half of the day in spite of getting enough sleep, passivity and apathy, lack of energy, concentration issues, forgetfulness and reduced capability to handle acute stress.

Furthermore, the diurnal cortisol curve is at noon and in the evening over the normal range which indicates stress throughout the day. In the full presentation, elevated cortisol levels can lead to symptoms such as sleep disorders, jumpiness, metabolic disorders with excess weight, increased abdominal fat, elevated cholesterol levels, elevated blood pressure and susceptibility to infection.

DHEA is a direct cortisol antagonist and helps balance the stress reactions triggered by cortisol. Thus, DHEA can help maintain stress resistance.

Further diagnostic approaches

Basically, the following differential diagnostic starting points arise in cases of a neurotransmitter imbalance:

Certain micronutrients and amino acids are indispensable cofactors for neurotransmitter synthesis. Likewise, stress often leads to gastrointestinal dysfunction. Thus, a neurotransmitter deficiency may be a result of nutrient absorption disorders. This is how intestinal health plays a central role in any stress and neurotransmitter imbalance therapy. Especially where intestinal issues are present in cases of reduced neurotransmitter levels, intestinal repair should be considered (see also: Therapeutic Orientation Aid, Intestinal Repair).

Indication	Diagnostics	Medium	Parameters	Procedure
IgG food allergy / chronic inflammation	ImuPro Complete	Serum	specific IgG antibodies against foods	ELISA
Histamine intolerance	HIT	Serum	Diamine oxidase concentration	ELISA

The correlations depicted above are not tailored to any present results and apply generally. According to individual results as well as the patient's symptoms, it is at the discretion of the treating therapist to decide which of the options mentioned above may be the next advisable step.

Last Name, First Name:

Gender: female

Date of birth:

Received at lab.: 17.09.2020

ID number: 222952

Specimen collection: 14.09.2020

Date of result: 23.09.2020



EXPLANATION OF PARAMETERS

Creatinine

The creatinine measurement is a necessary reference value in the laboratory analysis of various parameters and is of no diagnostic significance in these findings. Inference of a potential dysfunction is not possible from this.

DHEA

The hormone DHEA is made from cholesterol, mainly in the adrenal gland.

The production of DHEA decreases continually as we age, from age 25 on. The lowered DHEA level is responsible for a number of degenerative processes in the body. That is why the DHEA level can be used so well to determine the biological age of a human. Not only that, DHEA is also the precursor for the sex hormones testosterone and oestrogen.

DHEA has a short half-life period of only about 10 to 15 minutes. For this reason it is mainly only detected in the storage form DHEA-S, which is turned into DHEA when needed.

DHEA is a direct counteragent to cortisol and balances the stress reaction caused by cortisol and thus helps in dealing with stress. It has a muscle formation enhancing effect and increases HDL cholesterol which reduces the fat deposits in the vessels. This way, it counteracts an atherosclerosis. DHEA has an anti-inflammatory effect and activates the immune system.

Your DHEA levels are elevated throughout the day

Excess DHEA:

An excess of DHEA does not have any negative symptoms and therefore does not require any therapeutic treatment.

Cortisol

Cortisol, also called the "stress hormone", generally effects the body's adaptation to stimuli. It is secreted in response to stress and plays an important role in the complex regulation of other messenger substances involved in coping with stress. Its varied effects include increased metabolism and blood glucose for energy production, controlling the distribution of fat in the body (accumulation of fat in the abdominal region), increased appetite, lowered sensitivity to pain, altered emotional sensitivity, inhibition of growth processes, decreased immunity and inhibition of inflammation. On the other hand, in case of a continuously high cortisol level, inflammatory activity in the body can be increased.

The production of cortisol from cholesterol takes place in the cortex of the suprarenal gland and is subject to a circadian rhythm. While sleeping, during the second half of the night, the body produces the most cortisol, so that in the morning, shortly after getting up, the cortisol level is at its highest. It quickly drops by the early afternoon and then slowly drops further until the late evening. During the course of the second half of the night it increases again greatly. Within this basic rhythm, the level of cortisol rises briefly and slightly in case of acute stresses during the day.

However, in case of chronic stress, this rhythm can go haywire. Therefore, the deviations of the level of cortisol from their normal course are a good indicator of the current stress load.

In acute stress situations, the morning-time outpouring of cortisol increases and normalises in the course of the day. In the case of continuous stress, the entire daily curve shifts upward, meaning that the cortisol level is

Last Name, First Name:

Gender: female

Date of birth:

Received at lab.: 17.09.2020

ID number: 222952

Specimen collection: 14.09.2020

Date of result: 23.09.2020



elevated permanently. If the stress load remains and turns into chronic stress, the daily rhythm may become "chaotic", meaning that the level of cortisol moves outside of the normal values for the time of day. If the chronic stress persists even longer, then, at some point, the production of cortisol ceases and cortisol level drops below the normal level. Lowered cortisol values are being measured in, for example cases of burnout syndrome.

People who exercise regularly have a lower level of cortisol than those who do not exercise. This is also true during acute stress: short term spikes in cortisol are less pronounced in individuals who exercise regularly. In the elderly, the body's stress reaction is also much more pronounced.

Your cortisol level is elevated from lunchtime on

Your cortisol level is diminished in the morning

Cortisol deficiency:

A cortisol deficiency can lead to difficulty waking in the morning, constant fatigue despite sufficient sleep, passivity and apathy, lack of energy, difficulty concentrating, forgetfulness, reduced ability to cope with acute stress, sweet cravings, diabetes. In case of Addison's disease, a severely diminished cortisol level is usually present.

Chronic stress can be the cause of a cortisol deficiency. The negative effect of chronic stress can be worsened by a nutrient-poor and irregular diet, eating and drinking to overcome tiredness, a lack of exercise, a lack of good social contacts, and/or by loneliness, too few activities that provide joy, infections, traumatic experiences (e. g. loss of a beloved person, an accident, surgery, abuse), a lack of sleep, too high demands put on oneself (perfectionism).

Excess cortisol:

An elevated cortisol level leads to symptoms such as difficulty sleeping, tenseness, metabolic disorders with weight gain, increased abdominal fat, elevated cholesterol values, hypertension, and susceptibility to infection.

Acute stress and the beginnings of chronic stress can be the cause for elevated cortisol.

Last Name, First Name:

Gender: female

Date of birth:

Received at lab.: 17.09.2020

ID number: 222952

Specimen collection: 14.09.2020

Date of result: 23.09.2020



PARAMETERS OF NEUROSPOT FUNCTIONS AND SYMPTOMS AT A GLANCE

Parameters	Responsible for	Symptoms at elevated level	Symptoms at diminished level
Serotonin	Mood Appetite Sleep	Rarely - except within the context of medication and serotonin syndrome	Depression Anxiety Sleeping difficulty Excessive appetite Headache Hot flashes Obsessive compulsive disorders
Dopamine	Good mood Joy and feeling well Satisfaction Voluntary muscle coordination Digestion Memory	Dyspepsia Developmental delay Attention disorders / concentration difficulty Mental disorders Autisms	Addiction problems Food craving attacks Motor disorders Restless legs syndrome Parkinson's Disease
Noradrenaline	Attention / focus Alertness Emotional stability Emotional memory Endocrine function	Anxiety Hyperactivity Hypertension Post-traumatic stress disorder ADHD	Lack of energy Concentration difficulty Loss of motivation Abjection Impaired sensitivity to pain
Adrenaline	Energy Motivation Concentration States of agitation	Sleeping difficulty Anxiety Attention disorders	Fatigue / exhaustion Problems concentration Difficulties in losing weight
GABA	Rest and relaxation Learning Memory	Counter-regulation of increased excitatory neurotransmitters while under anaesthesia/tranquilizers	Uncontrolled fear Hyperactivity Sleeping difficulty
Glutamat	Learning Memory States of agitation	Disquiet Abjection Cramps Immune disorders Obsessive compulsive disorders Autisms	Fatigue / exhaustion Impaired perception Schizophrenia
DHEA	Decreases greatly with age Helps in dealing with stress Activation of the immune system Motivation	No symptoms	Increased susceptibility to stress Malaises Depression Lack of sex hormones PMS Menopausal problems
Cortisol	Adaption to increased requirements due to stress Elevation of blood glucose level Inhibition of immune response Increased appetite Lowering of pain threshold	Sleeping difficulty Metabolic disorders with overweight Increased abdominal fat Elevated cholesterol values Hypertension Susceptibility to infection	Difficulty getting up in the morning Fatigue Passivity Apathy Increased sensitivity to pain Forgetfulness

Last Name, First Name:

Gender: female

Date of birth:

Received at lab.: 17.09.2020

ID number: 222952

Specimen collection: 14.09.2020

Date of result: 23.09.2020



LABORATORY SUPERVISION

The examination of _____, born on _____, was carried out under my direction.

A handwritten signature in blue ink, consisting of a large, stylized initial 'L' followed by a smaller 'G' and a horizontal stroke.

Dr. med. Ludwig Grüter

This finding was generated electronically and has been medically validated.

CTL & Ortholabor GmbH
Labordiagnostik
Anemonenweg 3a
Bad Zwischenahn

Last Name, First Name:

Gender: female

Date of birth:

Received at lab.: 17.09.2020

ID number: 222952

Specimen collection: 14.09.2020

Date of result: 23.09.2020



THERAPEUTIC ORIENTATION AID

How should this therapeutic orientation aid be read?

A QUICK START

At first glance the therapy for an imbalance of messenger substances appears to be highly complex. For a better understanding, please observe the following fundamental principles of this therapeutic orientation aid. They may be able to facilitate the successful application.

The first therapy step is regulation of the serotonin level

Serotonin has higher-level control functionality with regard to the interplay of NeuroSpot parameters. Therefore, an appropriately high serotonin level has a balancing effect on other stress parameters. The optimum serotonin level differs in individual cases and can also be located very far in the upper normal range or sometimes even above this. Both with a measured serotonin deficiency as well as with levels within the normal range, it is often helpful during therapy to concentrate on increasing the serotonin level in the first step until the serotonin deficiency symptoms and general condition improve. In the next step the other parameters are regulated following a control NeuroSpot.

You can find the corresponding information in the therapeutic orientation aid whenever increasing the serotonin level seems appropriate as the initial therapeutic action.

The therapy is essentially geared to the symptoms

The stipulation of any therapy approach is: therapy is primarily geared to the condition of the patient. This therapeutic orientation aid is created based exclusively on the NeuroSpot measured values. As a consequence, various therapy approaches are defined in the therapeutic orientation aid that are geared to different symptoms. Please select the most suitable approach for your patient.

The choice is yours

We act independently of the manufacturers of all named therapeutic substances and we also follow no commercial interests in our recommendations of specific medicines. As a result, several preparations, usually based on different therapeutic options, are listed in the case of many treatment goals. Please select the suitable preparation at your discretion and in accordance with your preferences, your own therapy focus and experience.

Last Name, First Name:

Gender: female

Date of birth:

Received at lab.: 17.09.2020

ID number: 222952

Specimen collection: 14.09.2020

Date of result: 23.09.2020



Vitamin C

In case of stress, the vitamin C demand is increased additionally.

Mental and physical stress go along with oxidative stress. For protection against free radicals, the brain – in particular – needs additional vitamin C because it has a neuro-protective effect and is important for stress tolerance.

Furthermore in case of chronic stress, a chronic infection is triggered via the increased production of inflammation markers.

INFUSION THERAPY

To counteract the damaging effects of stress in general, a high dosage vitamin C therapy (e.g. Pascorbin by Pascoe) is recommended as an infusion treatment to support the immune system, the pituitary gland and the adrenal glands, as well as to protect the brain from oxidative stress.

Duration and dosage: 1 – 2 times per week 7.5g of vitamin C, a total of ca. 4 – 6 infusions.

A vitamin C therapy is particularly recommended in case of the following measured values:

Increased cortisol level

Since cortisol has an immunosuppressive effect, vitamin C can be helpful in supporting the immune system and in counteracting an excessive cortisol production caused by inflammation. Vitamin C leads to a faster normalisation of the cortisol level in the blood subsequent to having been burdened by stress and, as such, promotes stress tolerance.

Reduced cortisol level

Since the synthesis of cortisol is vitamin C-dependent, vitamin C can have a supportive effect.

Reduced serotonin level

Serotonin deficiency is typically owed to inflammatory processes which can be counteracted with vitamin C.

Regulation of cortisol levels with regard to symptoms

Essentially, cortisol therapy is oriented to symptoms.

In cases of fatigue symptoms or concentration/memory disorders, a therapy designed to support cortisol is advisable.

In cases of disordered diurnal rhythms, the objective should be to restore them. That means preparations should be taken at times when cortisol levels are not in line with the diurnal rhythm.

Last Name, First Name:

Gender: female

Date of birth:

Received at lab.: 17.09.2020

ID number: 222952

Specimen collection: 14.09.2020

Date of result: 23.09.2020

In cases of nervous agitation

Passiflora extract has a balancing effect on states of nervous agitation and can support cortisol level regulation. Suitable preparations, amongst others, are:

Active ingredient	Preparation
Passiflora extract	e. g. Pascoflair (Pascoe) or Passiflora (WALA)

Remarks on administration and dosage as well as recommendations on combinations with other products can be found in the manufacturer's information.

The exact dosage with regard to age, sex, body weight and overall patient disposition is at the discretion of the treating therapist.

In cases of fatigue

In cases of fatigue symptoms, excitatory messenger substance support may be done with irregular, even with elevated cortisol levels. Suitable preparations, amongst others, are:

Preparation	Dosage	Remarks
For NEUROaktiv (MITOCare) ingredients see www.mitoshop.de	Initially: 1 - 1 - 0 After two weeks: 2 - 2 - 0	Contains essential nutrients which support adrenal gland function, cortisol synthesis cofactors as well as adaptogens such as maca and rhodiola. Contains 5-HTP
Phyto Cortal (Steierl)		Adrenal gland support
Phyto C (Steierl)		Increase dosage gradually, as required

Remarks on administration and dosage as well as recommendations on combinations with other products can be found in the manufacturer's information.

The exact dosage with regard to age, sex, body weight and overall patient disposition is at the discretion of the treating therapist.

Adaptogens for cortisol level regulation

Adaptogens are active ingredients which restore overall balance. They aid the individual in adapting to stress and have a balancing effect on the nervous system and neurotransmitter as well as cortisol synthesis. Thus, they can be used for states of deficiency as well as excess. Some examples of adaptogens are: Rhodiola rosea, schisandra, withania somnifera, ginseng, ginkgo biloba, eleutherococcus.

The complex preparation NEUROadapt (MITOCare) also contains well-dosed amounts of all these adaptogens and thus naturally promotes cortisol level balancing.

Recommended dosage: 2-0-2

Detailed information on ingredients can be found at www.mitoshop.de

Last Name, First Name:

Gender: female

Date of birth:

Received at lab.: 17.09.2020

ID number: 222952

Specimen collection: 14.09.2020

Date of result: 23.09.2020



Stress management

Elevated values for stress messenger substances (dopamine, noradrenaline, adrenaline, glutamate, cortisol) indicate a high level of stress.

At the onset of stress, stress messenger substance levels (dopamine, noradrenaline, adrenaline, cortisol) are elevated. If the stress persists, large quantities of the stress messenger substances are required in the long run. In cases where necessary recovery phases are lacking, they can no longer be produced in sufficient quantities, which means they are used up eventually. This becomes evident in reduced messenger substance levels. They indicate that the stress may already have persisted for a while and has already resulted in a significant messenger substance imbalance. In such instances, professional stress management is advisable in order to prevent a total depletion of messenger substances and the possible symptoms mentioned in the individual assessment earlier in the diagnostic findings.

In the first instance, stress is a physiological reaction of the body in situations of increased pressure which helps the individual to cope with said situations. A promising treatment approach for stress-related symptoms is therefore the determination of causes for stress and the elimination of those causes, where possible. Drug therapy alone is often not sufficient for lasting improvements. We recommend sustainable stress management tailored to individual living circumstances with the help of an expert.

Professional stress management may focus on reducing perceived pressure in order to increase the patient's well-being as well as his/her capacities. The basis thereof is a detailed analysis of causes for stress created together with the patient. It yields techniques suitable for each patient which can be used to reduce perceived pressure. Those techniques may be time management, yoga, hypnosis, autogenic training, progressive muscle relaxation, mindfulness training, physical exercise, dietary changes, communication training, personal demand management or psychotherapy, amongst others.

The choice of techniques should always happen together with the patient and tailored to his/her individual needs. Temporary intensive supervision by the stress therapist and regular result testing for the chosen techniques are also part of a professional stress management.

Increased micronutrient requirements in situations of stress

Due to stress, requirements in terms of micronutrients contributing to maintaining normal immune functions and protection against oxidative stress may multiply. Through dietary supplements the supply of vitamins, micronutrients and polyphenols essential for the human body can be supported.

DHEA level regulation

Elevated DHEA levels do not lead to negative symptoms. Therapy is not necessary.

Last Name, First Name:

Gender: female

Date of birth:

Received at lab.: 17.09.2020

ID number: 222952

Specimen collection: 14.09.2020

Date of result: 23.09.2020



Intestinal Repair

It is not uncommon for chronic stress to cause inflammation in the intestinal mucous membrane. However, intestinal health is crucial for an individual's neurotransmitter balance. Only a healthy bowel can absorb the micronutrients required for neurotransmitter synthesis sufficiently. Due to the close connection between the ENS (enteric nervous system) and the CNS (central nervous System), also referred to as the gut-brain axis, gastro-intestinal dysbiosis also causes adverse psychological effects. Especially in cases of present intestinal complaints pointing to a likely disturbed bowel function, intestinal repair can effectively support and supplement neurotransmitter regulation therapies.

For example, the following preparations are suitable to this end:

Preparation	Dosage	Remarks
Flora Balance (MITOcare)	20 ml in the mornings, ca. 6 - 18 months	Contains 24 probiotic bacterial strains (10 ¹¹ germs per 100 ml), select digestive bitter compounds and plant extracts.
AND		
Flora Immun PLUS (MITOcare)	3 measuring spoons in the evenings, ca. 6 - 18 months	Contains 8 bacterial strains (ca. 10 ¹⁰ germs per daily portion), colostrum, glutamine and psyllium seed husks.
Pro Emsan (Tisso)	15 - 30 ml, ca. 6 - 18 months	
Pro Basan Complete (Tisso)	1 - 2 g powder, ca. 6 - 18 months	
Pro Mucosa (Tisso)	6 - 12 capsules, ca. 6 - 18 months	In case of mucous membrane-cleansing therapy resistance and persistently low serotonin levels.
Omni Biotic Stress Repair (Allergosan)	1 sachet in the mornings and / or evenings	
Omni Biotic Power (Allergosan)		
Symbioflor (Symbiopharm) according to the following formula:		
Weeks 1 - 4 (month 1) Pro-Symbioflor	2 x 5 drops/day. Increase daily, towards 2 x 20 drops/day	
Weeks 5 - 24 (months 2 - 6) Symbioflor 1	2 x 30 drops/day	
Weeks 17 - 24 (months 4 - 6) Symbioflor 1 and additionally Symbioflor 2	2 x 30 drops permanently 2 x 5 drops/day Increase daily, towards 2 x 20 drops/day	

Remarks on administration and dosage as well as recommendations on combinations with other products can be found in the manufacturer's information.

The exact dosage with regard to age, sex, body weight and overall patient disposition is at the discretion of the treating therapist.

NOTE: Fundamentally, the treating therapist's orders should be observed for all preparations specified in this therapeutic orientation aid. Recommendations regarding administration and dosage can be found in the manufacturer's information.

Last Name, First Name:

Gender: female

Date of birth:

Received at lab.: 17.09.2020

ID number: 222952

Specimen collection: 14.09.2020

Date of result: 23.09.2020



Therapy control

We recommend a laboratory diagnostic therapy control using NeuroSpot ca. 6 weeks after the start of the therapy and, as the case may be, appropriate treatment adjustments. In cases of severe neurotransmitter deficiency, however, it may be reasonable to control levels only after 3 months, since the body takes a certain amount of time to balance the deficiency.

Sources of supply:

Mitocare products: www.mitoshop.de or in pharmacies

Tisso products: <https://shop.tisso.de>

All other products mentioned are available in pharmacies or online.