

4685 Centennial Blvd. Colorado Springs, CO 80919

Telephone: 888-843-5832 Fax: 719-548-8220 TIN: 47-2642690 CLIA#: 06D2019763

Lab Director: Leslie Douglas, PhD, HCLD(MD), ABB

Patient: Samply, Sally (1/27/64) **Provider: Jane Doe, MD** 

**Propensity Test** 

Sample CollectedSample ReceivedSample TestedTest Reported02/26/202503/03/202503/07/202503/10/2025

Sample type: **Super Floss – Full Mouth**Test performed by: L. Douglas

Test ID: 42979

**Results:** 

The highlighted organisms have been detected in the sample provided:

|   | Card Spage | AL Diggs Sign | Steeling | S. Stores | Oet Gerita | de legis | Q di de  | O' N'S SE |
|---|------------|---------------|----------|-----------|------------|----------|----------|-----------|
| Aggregatibacter<br>actinomycetemcomitans  | <b>/</b>   | <b>/</b>      | 1        | <b>√</b>  | 1          | <b>√</b> |          |           |
| Campylobacter rectus                      |            |               |          |           | 1          |          |          |           |
| Capnocytophaga ochracea                   |            |               |          |           | ✓          |          |          |           |
| Dialister pneumosintes                    |            |               |          |           | ✓          | ✓        |          |           |
| Filifactor alocis                         |            |               |          |           |            |          | <b>√</b> |           |
| Fusobacterium nucleatum ss vincentii      |            | <b>✓</b>      | <b>✓</b> | ✓         | ✓          | ✓        |          | ✓         |
| Fusobacterium nucleatum ss<br>polymorphum |            | <b>✓</b>      | <b>√</b> | <b>√</b>  | <b>√</b>   | ✓        |          | ✓         |
| Fusobacterium nucleatum ss nucleatum      |            | ✓             | ✓        | ✓         | ✓          | ✓        |          | ✓         |
| Porphyromonas gingivalis                  | ✓          | ✓             | <b>✓</b> | ✓         | ✓          | ✓        | ✓        | ✓         |
| Prevotella interm <mark>e</mark> dia      | ✓          |               | 1        |           | ✓          |          |          |           |
| Prevotella nigrescens                     |            |               | ✓        |           |            |          |          |           |
| Staphylococcus aureus                     | ✓          |               |          |           |            | ✓        |          | ✓         |
| Staphylococcus warneri                    | ✓          |               |          |           |            | ✓        |          | ✓         |
| Streptococcus gordonii                    | ✓          |               |          |           |            | ✓        |          | ✓         |
| Streptococcus intermedius                 | ✓          |               |          |           |            | ✓        |          | ✓         |
| Streptococcus mitis                       | ✓          |               |          | <b>√</b>  |            | ✓        |          | ✓         |
| Streptococcus mutans                      | ✓          |               |          |           |            | ✓        |          | ✓         |
| Tannerella forsythia                      | ✓          | ✓             | ✓        | ✓         | ✓          |          | <b>✓</b> |           |
| Treponema denticola                       | ✓          | ✓             |          | <b>✓</b>  |            |          | ✓        |           |

The DNA Connexions Propensity Test utilizes the polymerase chain reaction (PCR) technology to detect the presence of targeted microbial DNA. Sensitivity of the test is 1 to 10 microbes with a specificity exceeding  $5 \times 10^{18}$ .

The DNA Connexions Propensity Panel identifies 19 of the most common bacterial species not only involved in periodontal diseases, but also those microbes which have been implicated in the progression of a variety of chronic, systemic conditions. The ongoing presence and chronic inflammation caused by these microbes can lead to their release and spread throughout the body. Ongoing research is identifying relationships between periodontal microbes and systemic diseases, including cardiovascular disease, gastrointestinal cancers, diabetes, cognitive disorders, respiratory issues and complications relating to pregnancy, among others.

## REFERENCES

Bui, F., et al. (2019). Association Between Periodontal Pathogens and Systemic Disease. Biomedical Journal:27-35.

Guven, D.C., (2019). Evaluation of Cancer Risk in Patients with Periodontal Diseases. Turk J Med Sci. 49:826-831.

Hajishengallis, G. and R.J. Lamont. (2012). Beyond the Red Complex and Into More Complexity: the Polymicrobial Synergy and Dysbiosis (PSD) Model of Periodontal Disease Etiology. Molecular Oral Microbiology. 27(6): 409-419.

Hashim, N. T. (n.d.). Oral Microbiology in Periodontal Health and Disease. In Oral Microbiology in Periodontitis. doi: http-J/dx.doi.org/10.5772/intechopen.75709.

Michaud, D.S., et al. (2017) Periodontal Disease, Tooth Loss, and Cancer Risk. Epidemiologic Reviews, Volume 39, Issue 1; 49-58.

Mitsuhasi, K., et al. (2015) Association of *Fusobacterium* species in pancreatic cancer tissues with molecular features and prognosis. Oncotarget; 6(9): 7209-7220.

Paddock, C. (n.d.). Mouth Bacteria Linked to Esophageal Cancer. Medical News Today.

Rajesh, K.S., et al. (2013). Poor Periodontal Health: A Cancer Risk? J Indian Soc Periodontal. 17(6): 706-710.

Rousee, J. M., et al. (2002). *Dialister pneumosintes* Associated with Human Brain Abscesses. Journal of Clinical Microbiology, Oct. 3871-3873.

Shao, J., et al. (2018). Periodontal Disease and Breast Cancer: A Meta-Analysis of 173,162 Participants. Front Oncol.8:601.

Suzuki, N., et al. (2013). Mixed Red-Complex Bacterial Infection in Periodontitis. International Journal of Dentistry. 1-6.

Wong, Sunny H., et al. (2019). Clinical Applications of Gut Microbiota in Cancer Biology. Seminars in Cancer Biology. 55, 28-36.

Interpretation of Results Disclaimer: DNA Connexions is not a clinical diagnostic laboratory and cannot provide a diagnosis for disease and/or subsequent treatment. These results are from DNA PCR testing, and indicate the presence of targeted foreign DNA. The information is supplied as a courtesy to health care providers to aide in an overall assessment. This information alone should not be used to diagnose and/or treat a health problem or disease. All reported results are intended for research purposes only and consultation with a qualified health care provider is required.