Normal Labs but Still Bloated? The Gut Tests Doctors Skip (A Doctor Explains) Transcript

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They missed this

They missed this. Your blood work came They missed this. Your blood work came back normal. Maybe your colonoscopy, back normal. Maybe your colonoscopy, too. But you're still bloated, tired, too. But you're still bloated, tired, foggy, and no one can tell you why.

foggy, and no one can tell you why. Normal isn't an answer. There are six Normal isn't an answer. There are six tests that I run in my practice that tests that I run in my practice that most doctors never order. Number six most doctors never order. Number six isn't about your gut at all. It's about isn't about your gut at all. It's about your heart.

your heart. If no one runs them, then you'll keep If no one runs them, then you'll keep hearing everything looks fine, and this hearing everything looks fine, and this can go on for years. Remember Jen from can go on for years. Remember Jen from last week? Rosacea for years, two last week? Rosacea for years, two dermatologists, creams, antibiotics, dermatologists, creams, antibiotics, lasers, but no one ran one simple test.

lasers, but no one ran one simple test. It's number three on this list, and when It's number three on this list, and when we ran it, it came back positive. So, we ran it, it came back positive. So, save this video, screenshot it, and take save this video, screenshot it, and take it to your next appointment. Let's start it to your next appointment.

Standard vs functional gut workup

Let's start with what your doctor usually orders. with what your doctor usually orders. Now, I want to tell you the difference Now, I want to tell you the difference between a standard workup and a between a standard workup and a functional gut workup. Standard blood functional gut workup. Standard blood work, you know, the CBC, CMP, all these work, you know, the CBC, CMP, all these things, maybe a simple thyroid scan.

things, maybe a simple thyroid scan. Most likely a colonoscopy is what Most likely a colonoscopy is what they'll do. All of these are important, they'll do. All of these are important, and but none of them evaluate the most and but none of them evaluate the most important: your microbiome, your gut important: your microbiome, your gut lining integrity, your food lining integrity, your food sensitivities, your bacterial sensitivities, your bacterial overgrowth, your digestive function, the overgrowth, your digestive function, the gut-specific inflammation markers. As a gut-specific inflammation markers. As a functional medicine doctor, the medicine functional medicine doctor, the medicine that I like to do is everything above, that I like to do is everything above, plus the tests that actually explain why plus the tests that actually explain why you feel the way you feel. So, let me to you feel the way you feel.

Test #1: Comprehensive stool analysis

So, let me to walk you through each one of them. The walk you through each one of them. The first test is the comprehensive stool first test is the comprehensive stool analysis. This is the foundation of any analysis. This is the foundation of any gut evaluation that I do. It's not just gut evaluation that I do. It's not just checking for blood or parasites, you checking for blood or parasites, you know, a standard stool test would do. A know, a standard stool test would do. A comprehensive stool analysis shows your comprehensive stool analysis shows your microbiome microbiome microbiome diversity, which bacteria are beneficial diversity, which bacteria are beneficial that are there, and which ones are that are there, and which ones are harmful that could be overgrowing and harmful that could be overgrowing and causing problems. I like to look at the causing problems. I like to look at the digestive markers. Are you producing digestive markers. Are you producing enough enzymes? Is fat being properly enough enzymes? Is fat being properly broken down and absorbed name a few.

broken down and absorbed name a few. Inflammatory markers like calprotectin Inflammatory markers like

calprotectin and lactoferrin. These tell me if your and lactoferrin. These tell me if your gut is inflamed even when standard blood gut is inflamed even when standard blood tests look normal. I'll look at immune tests look normal. I'll look at immune markers. Is the gut immune system markers. Is the gut immune system activated? I'll look at yeast and activated? I'll look at yeast and parasites, a much more thorough parasites, a much more thorough evaluation than a standard stool culture evaluation than a standard stool culture can do. This single comprehensive stool can do. This single comprehensive stool test gives me more information about test gives me more information about your gut health than most standard your gut health than most standard workups combined. And you can't get workups combined. And you can't get these at standard labs. These are sent these at standard labs.

Test #2: Zonulin (the leaky gut marker)

These are sent to specialized functional labs that look to specialized functional labs that look at all this. The second test that I like at all this. The second test that I like is zonulin. This is the leaky gut is zonulin. This is the leaky gut marker. Remember in week one when I marker. Remember in week one when I talked about the tight junctions holding talked about the tight junctions holding your gut lining together? Zonulin your gut lining together? Zonulin release opens up those tight junctions, release opens up those tight junctions, and when zonulin is elevated, it means and when zonulin is elevated, it means your gut lining is permeable. Things are your gut lining is permeable. Things are leaking through into your body that leaking through into your body that shouldn't be getting from your gut. This shouldn't be getting from your gut. This is one of the most important test that is one of the most important test that almost nobody orders because if your gut almost nobody orders because if your gut is leaky, it's driving inflammation, is leaky, it's driving inflammation, immune activation, and potentially immune activation, and potentially autoimmune disease. And you can't fix autoimmune disease.

Test #3: SIBO breath test

And you can't fix what you haven't identified. The third what you haven't identified. The third test is the SIBO breath test, SIBO. We test is the SIBO breath test, SIBO. We covered SIBO in week three. That means covered SIBO in week three. That means small intestinal bacterial overgrowth.

small intestinal bacterial overgrowth. The breath test is simple. You drink a The breath test is simple. You drink a sugar solution and breathe into a sugar solution and breathe into a collection device over two or three collection device over two or three hours. It measures things like hydrogen hours. It measures things like hydrogen and methane gases, and even some can do and methane gases, and even some can do sulfur. These are produced by the sulfur. These are produced by the bacteria and the yeast that are bacteria and the yeast that are overgrown. If there is an overgrowth in overgrown. If there is an overgrowth in the small intestine, those gases will the small intestine, those gases will show up early before they should. This show up early before they should. This test is for anyone that has chronic test is for anyone that has chronic bloating, irritable bowel symptoms, bloating, irritable bowel symptoms, rosacea of the face, probiotics that rosacea of the face, probiotics that they take that makes them feel worse.

they take that makes them feel worse. And yet, most gastroenterologists don't And yet, most gastroenterologists don't even routinely order it. Actually, they even routinely order it. Actually, they might even order the wrong type of this might even order the wrong type of this test and not do the comprehensive one.

test and not do the comprehensive one.

Test #4: Food sensitivity panel

And then test four is food sensitivity And then test four is food sensitivity panel. This is different than a food panel. This is different than a food allergy test. The food allergies are IgE allergy test. The food allergies are IgE mediated. They're immediate and mediated. They're immediate and dramatic, like say if you eat a peanut dramatic, like say if you eat a peanut um and then your throat swells. That's um and then your throat swells. That's an immediate IgE reaction. I'm talking an immediate IgE reaction. I'm talking about food sensitivities that are about food sensitivities that are delayed, the IgG mediated ones.

delayed, the IgG mediated ones. Sometimes this could be delayed 24 to 72 Sometimes this could be delayed 24 to 72 hours, 3 days later. And the symptoms hours, 3 days later. And the symptoms can be subtle, like bloating, fatigue, can be subtle, like bloating, fatigue, brain fog, joint pain, skin issues, or brain fog, joint pain, skin issues, or other things. You may even eat a food on other things. You may even eat a food on Monday and then feel the effects on Monday and then feel the effects on Wednesday and never even connect the Wednesday and never even connect the two. A food sensitivity panel identifies two. A food sensitivity panel identifies which specific foods are driving the which specific foods are driving the immune activation in your body. This is immune activation in your body.

Test #5: Organic acids test (OAT)

This is personalized and it's not a generic list personalized and it's not a generic list from the internet. And then test five, from the internet. And then test five, organic acid test. We call it the oat organic acid test. We call it the oat test, OAT. This is an urine test that test, OAT. This is an urine test that gives a metabolic snapshot. It can gives a metabolic snapshot. It can identify if there's yeast overgrowth, identify if there's yeast overgrowth, like even candida markers, bacterial like even candida markers, bacterial overgrowth markers, mitochondria overgrowth markers, mitochondria function, neurotransmitter metabolites, function, neurotransmitter metabolites, nutrient deficiencies, detoxification nutrient deficiencies, detoxification capacity. It's one of the most capacity. It's one of the most comprehensive single test in functional comprehensive single test in functional medicine. And most conventional doctors medicine. And most conventional doctors have never even heard of it. And test have never even heard of it.

Test #6: TMAO (the one about your heart)

And test six, TMAO, six, TMAO, trimethylamine n oxide. This is one that trimethylamine n oxide. This is one that surprises people. It's technically a surprises people. It's technically a blood test, not a gut test, but it's blood test, not a gut test, but it's produced entirely by your gut bacteria.

produced entirely by your gut bacteria. Here's how it works. If you eat red Here's how it works. If you eat red meat, egg yolks, or certain fish, your meat, egg yolks, or certain fish, your gut bacteria breaks down these compounds gut bacteria breaks down these compounds called choline and carnitine into this called choline and carnitine into this byproduct that's called t m a. Your byproduct that's called t m a. Your liver then converts that into t m a o.

liver then converts that into t m a o. Research has linked the elevated t m a o Research has linked the elevated t m a o to higher cardiovascular risk and plaque to higher cardiovascular risk and plaque build up in your arteries. Two people build up in your arteries. Two people can eat the exact same meal and produce can eat the exact same meal and produce very different t m a o levels because it very different t m a o levels because it depends on which bacteria you're depends on which bacteria you're carrying. This is one of the clearest carrying. This is one of the clearest examples of your gut affecting an organ examples of your gut affecting an organ that has nothing to do with digestion.

that has nothing to do with digestion. It has to do with your heart. The It has to do with your heart. The research on t m a o is still evolving, research on t m a o is still evolving, but I still use it as one of the pieces but I still use it as one of the pieces of the picture of the puzzle, and not of the picture of the puzzle, and not just a standalone diagnosis. But it's a just a standalone diagnosis.

Inflammation markers: CRP, ferritin, homocysteine, insulin

But it's a piece that most doctors never think to piece that most doctors never think to check. Next is inflammation markers. check. Next is inflammation markers.

Beyond the gut specific tests, I also Beyond the gut specific tests, I also evaluate systemic inflammation in the evaluate systemic inflammation in the body. The c r p, c reactive protein, is body. The c r p, c reactive protein, is a general inflammation marker. Ferritin a general inflammation marker. Ferritin is not just an iron marker. Ferritin is is

not just an iron marker. Ferritin is actually an acute phase reactant, which actually an acute phase reactant, which means that it rises with inflammation, means that it rises with inflammation, whether or not you're iron deficient.

whether or not you're iron deficient. So, a normal ferritin can actually So, a normal ferritin can actually sometimes be masking iron deficiency if sometimes be masking iron deficiency if there's inflammation driving it up. And there's inflammation driving it up. And a low ferritin is one of the earliest a low ferritin is one of the earliest signs of iron deficiency, often from signs of iron deficiency, often from poor absorption of the gut. So, I look poor absorption of the gut. So, I look at ferritin alongside the c r p. I know at ferritin alongside the c r p. I know whether what I'm looking at, if there's whether what I'm looking at, if there's a true iron status problem, or if a true iron status problem, or if inflammation could be covering something inflammation could be covering something up. And then homocysteine, this is up. And then homocysteine, this is linked to cardiovascular risk, brain linked to cardiovascular risk, brain health like dementia, and methylation. I health like dementia, and methylation. I also like to check the fasting insulin, also like to check the fasting insulin, one of the earliest markers of metabolic one of the earliest markers of metabolic dysfunction, often abnormal for years dysfunction, often abnormal for years before blood sugar problem shows up. And before blood sugar problem shows up.

What a real gut evaluation looks like

And these are simple tests that should be these are simple tests that should be part of every workup, but often aren't part of every workup, but often aren't in with most doctors, but it's something in with most doctors, but it's something that it's part of my comprehensive that it's part of my comprehensive panel. So, here's what a real evaluation panel. So, here's what a real evaluation of our practice looks like. I do a gut of our practice looks like. I do a gut evaluation, and it's not a 15-minute evaluation, and it's not a 15-minute appointment or just one lab order. It's appointment or just one lab order. It's a comprehensive look at your gut, your a comprehensive look at your gut, your stool analysis, zonulin, maybe SIBO, stool analysis, zonulin, maybe SIBO, food sensitivities, TMAO, to name a few.

food sensitivities, TMAO, to name a few. I also look at your hormones, the full I also look at your hormones, the full panel, the thyroid say, not just the panel, the thyroid say, not just the TSH, but the free T3, free T4, thyroid TSH, but the free T3, free T4, thyroid antibodies, reverse T3. I'll look at antibodies, reverse T3. I'll look at your inflammation markers, CRP or the your inflammation markers, CRP or the HS-CRP, HS-CRP, HS-CRP, homocysteine, fasting insulin, your homocysteine, fasting insulin, your nutrients, B12, folate, vitamin D, iron, nutrients, B12, folate, vitamin D, iron, magnesium, omega-3s, just to name a few.

magnesium, omega-3s, just to name a few. I look at your lifestyle, how you're I look at your lifestyle, how you're sleeping, your stress levels, your diet, sleeping, your stress levels, your diet, your movement, and I also look at your your movement, and I also look at your environment. What toxins have you been environment. What toxins have you been exposed to? Where have you lived? Where exposed to? Where have you lived? Where are you living now? Have you had a water are you living now? Have you had a water leak in your building causing maybe leak in your building causing maybe mycotoxin mold toxicities? Are you mycotoxin mold toxicities? Are you exposed to heavy metals? I'll look in exposed to heavy metals? I'll look in your mouth at your amalgams and look at your mouth at your amalgams and look at different things in in your mouth and different things in in your mouth and your teeth. This is just a few of the your teeth.

The four pillars

This is just a few of the things that I mentioned that I do in my things that I mentioned that I do in my comprehensive workup, but I'll look at comprehensive workup, but I'll look at all four pillars all at once. And then I all four pillars all at once. And then I make a plan that's specifically make a plan that's specifically personalized to you, not a generic personalized to you, not a generic protocol from the internet. And but I protocol from the internet. And but I really look at the whole person and make really look at the whole person and make a road map and really see what we can a road map and really see what we can direct more naturally and with this root direct more naturally and with this root cause and really put all the pieces cause and really put all the pieces everything together. This continuity everything together. This continuity care, not the silo medicine from each care, not the silo medicine from each specialist. I take all of that specialist. I take all of that information, put it together and help information, put it

together and help you understand exactly what's going on.

you understand exactly what's going on. But I'd like to start, like I said, the But I'd like to start, like I said, the gut because that's the window to the gut because that's the window to the body, but I'll look at everything else body, but I'll look at everything else as well. This is what I call my early as well. This is what I call my early detection longevity medicine. It's a detection longevity medicine. It's a personalized program that really is personalized program that really is geared towards you and finding out your geared towards you and finding out your root causes. I look at the full picture, root causes. I look at the full picture, finding what others miss and intervening finding what others miss and intervening before it becomes a diagnosis. I want to before it becomes a diagnosis.

8 weeks of the gut series

I want to take a step back because over the last 8 take a step back because over the last 8 weeks on this gut series, we've covered weeks on this gut series, we've covered a lot. We talked about leaky gut, a lot. We talked about leaky gut, autoimmune disease, bloating, brain fog, autoimmune disease, bloating, brain fog, anxiety, depression, and the 5R healing anxiety, depression, and the 5R healing protocol, skin conditions, weight protocol, skin conditions, weight resistance. And today, today was about resistance. And today, today was about testing. But this series was never just testing. But this series was never just about gut health. It was about a about gut health. It was about a different way of thinking about your different way of thinking about your body. It's the belief that your symptoms body. It's the belief that your symptoms are not random. They're not just aging are not random. They're not just aging and it's not just all in your head. They and it's not just all in your head. They are your body talking to you and when are your body talking to you and when someone finally listens and when someone someone finally listens and when someone finally looks at the full picture, when finally looks at the full picture, when somebody connects the dots, that's when somebody connects the dots, that's when healing begins. That's what I do. That's healing begins. That's what I do. That's what early detection longevity medicine what early detection longevity medicine means. And whether you've ever walked means. And whether you've ever walked through my door or not, my hope is that through my door or not, my hope is that this series gave you the language, the this series gave you the language, the framework, and the confidence to framework, and the confidence to advocate for yourself. If you watched advocate for yourself.

Where to start

If you watched this entire series, all 8 weeks, thank this entire series, all 8 weeks, thank you. That really means something to me. you. That really means something to me.

If you're just finding this video, the If you're just finding this video, the full gut health playlist is linked right full gut health playlist is linked right here. You can start with week one. Each here. You can start with week one. Each week builds on the last. If you're ready week builds on the last. If you're ready to find out what's actually going on, to find out what's actually going on, take my assessment. The link is in the take my assessment. The link is in the description. It's the same starting description. It's the same starting point I use with every patient. And if point I use with every patient. And if you want to work with someone who looks you want to work with someone who looks at the full picture, hormones, gut, at the full picture, hormones, gut, lifestyle, environment, digging deeper, lifestyle, environment, digging deeper, finding the root cause, not just one finding the root cause, not just one number, not just one symptom, here's the number, not just one symptom, here's the link for that, too. Everything I do, link for that, too. Everything I do, every protocol, every patient, every every protocol, every patient, every video runs through one belief. I'm Dr.

video runs through one belief. I'm Dr. Myra Reed, helping you to live smarter, Myra Reed, helping you to live smarter, stronger, longer. Don't let your first stronger, longer. Don't let your first