



THE ADVANTAGE OF THE NUTRISCAN DIFFERENCE

**Your dog has itchy skin, a leaky gut?
Read on...**

	NUTRISCAN	OTHER FOOD TESTS
What is the test?	Intolerance+ Sensitivity	Hypersensitivity (Allergy)
Fluid tested	Saliva	Serum
Antibody measured	IgA and IgM	IgE or IgG
How performed	Home use or Vet visit	Veterinary visit required
Addressing food issues	Delayed and long term food issues; excellent clinical correlation	Immediate food issues ; poor clinical correlation to delayed food reactions
Which foods	24 antigens	Varies
Price	\$298	Varies – about \$100 to \$500

- Vets and pet owners need to concentrate on more long term control of food-related health issues, rather than the more immediate acute hypersensitivities. Otherwise overall health will not be maintained.
- The patented NutriScan test is the only reliable way to provide this clinical information on food intolerance.

Canine Food Intolerance Diagnostic Test

TEST FOR CANINE FOOD SENSITIVITY & INTOLERANCE USING SALIVA

Diet is a long recognized cause of hypersensitivity-like skin reactions in dogs, cats, & people. Immediate hypersensitivity occurs within minutes to hours; whereas delayed sensitivity occurs in hours to days. Delayed sensitivities occur 2-72 hours after eating; so it can be more difficult to connect symptoms with foods eaten. There is a high correlation of delayed sensitivity with the amount and frequency of food eaten.

Food intolerance is the third most common after flea bite sensitivity and atopy (inhalant allergy), and food intolerance makes up 1-10% of all allergic skin disease. It mimics other skin syndromes. Food intolerance has no age, breed, or sex predilection. Most affected animals have been eating the offending foods for more than 2 years. The major complaint is pruritus (itching), which is bilateral, and there is often inflammation of the external ear canals (otitis externa). Secondary skin disease such as seborrhea (dry or oily) and pyoderma is common.

■ Food Sensitivity (Allergy) -- Previous Testing

Typically based on IgE, IgG and immune complexes with complement, these tests have high sensitivity but lower individual specificity. Measures only more immediate-type reactions. The "gold standard" for food allergy testing in the dog has previously been the food elimination trial and allergen provocation. But, testing for this disorder uses expensive and unsightly skin patch testing or serum allergy screening that lacks specificity.

However, there is poor correlation between serum IgE and IgG antibody testing and clinical experience in resolving disease in both humans and dogs, despite the fact that dogs with atopic and GI tract disease have higher levels of serum IgE and IgG antibodies than normal dogs, and the antigen causing the reaction is contained in the diet.

■ Food Sensitivity /Intolerance -- Newer Testing

Saliva testing for food sensitivity and intolerance in animals differs significantly from all other food allergen tests available for use in animals. It is highly reproducible and clinically relevant. In serum, the food antigen or peptide being tested, and any specific IgA or IgG antibody in serum bind to each other and then fix complement. In saliva, the food antigen or peptide being tested reacts directly with the IgA or IgM antibody in the test animal's saliva.

Newer tests can use saliva or feces in a simple ELISA format or other immunoassay platforms. They identify IgA or IgM antibodies to foods in saliva or feces. Antibodies to foods appear in saliva several months before the GI tract diagnosis of IBD (inflammatory bowel disease) or the "leaky gut syndrome" (intestinal dysbiosis). Saliva testing can thus reveal the latent or pre-clinical form of food sensitivity. Using saliva and looking at secretory immune responses to IgA and IgM in people, a direct correlation between results and clinical allergic reactivity has been described.

IgA, especially, but also IgM, are the important antibodies generated by immunological reactions and are expressed as secretory immunity in saliva, as well as other body fluids like tears, sweat and breast milk. IgE serology has been found to offer no advantage for diagnosis in dietary trials, because it had a sensitivity of 14%, specificity of 87%, positive predictive value of 40% and negative predictive value of 61%. Thus, this form of serum food allergy testing is inadequate for clinical diagnostic purposes.

