



COASTAL
DIGESTIVE
HEALTH

HYDROGEN BREATH TESTING

A background image of dandelion seeds floating against a dark green gradient. The seeds are white and feathery, with some showing the brown seed head. They are scattered across the frame, with a higher concentration on the left side.

WHAT *will the tests cost?*

Lactulose is a compulsory control test. \$85
You need this test to perform all other testing.

Fructose Fructose malabsorption \$85

Lactose Lactose malabsorption \$85

Sorbitol Sorbitol malabsorption \$85

Glucose Assess for SIBO \$85

Cost of testing is \$65 for persons with valid pension, student, veteran and health care card holders. Unfortunately these tests are not covered by Medicare or private health insurance.

Cancellation Policy

\$50 cancellation fee applies if you fail to follow diet

\$50 cancellation fee applies if you fail to attend

WHAT is *Hydrogen Breath Testing*?

Hydrogen Breath Tests are used to identify fructose, lactose, and sorbitol malabsorption, as well as small intestinal bacterial overgrowth (SIBO).

All tests are non-invasive, safe and simple.

Safe for people with diabetes, pregnant women and children older than 5yrs.

Each Test will take between 2-3 hours.

Allow at least one day between tests for bowels to return to normal.

What *Breath TESTS* are available?

1. ***Lactulose*** is malabsorbed by 100% of the population and a compulsory control test
 - Provides information to compare responses with the other tests
 - Determines gut transit time
 - Gives evidence of small intestinal bacterial overgrowth (SIBO)
2. ***Fructose*** Fructose malabsorption
3. ***Lactose*** Lactose malabsorption
4. ***Sorbitol*** Sorbitol malabsorption
5. ***Glucose*** Assess for SIBO

WHO should have a *Hydrogen Breath Test*?

Should be considered if there are unexplained abdominal symptoms particularly after eating.

Contraindications

Hereditary fructose intolerance, Post-prandial Hypoglycaemia, and patients with an Ileostomy.

*Patient preparation, **WHAT** you need to do*

You **must** follow these instructions before each test to ensure accurate and reliable results. Patients who do not follow these instructions may be **refused testing** or may have to reschedule. Please tell staff if you are diabetic before preparing for the test.



FOUR WEEKS *before the test*

- ✕ No bowel prep
- ✕ No colonoscopy, fluoroscopy or barium meal/enema
- ✕ No oral or IV antibiotics

TWO WEEKS *before the test*

- ✕ No probiotics

ONE FULL DAY *before the test*

- ✕ No dairy: lactose-free milk, soy/rice/almond/coconut milk is OK
- ✕ No canned or dried fruit
- ✕ No fruit juice, soft drinks or honey
- ✕ Restrict high fibre foods (ie. beans, oats, corn)
- ✕ No vitamins, minerals, laxatives or anti-diarrhoeal agents
- ✕ No onions, leeks, garlic, cabbage, beans or pickled vegetables
- ✕ No fibre supplements (ie. Metamucil)
 - All other foods and medications can be taken as normal
 - Follow diet information on next page



12 HOURS *before the test*

- Start fasting 12 hours before the test
- Small amount of water allowed during this period, but avoid large quantities of water

MORNING *of the test*

- ✗ No smoking
- ✗ No wearing perfume or aftershave
- ✗ No wearing lipstick
- ✗ No exercising
- ✗ Do not use denture adhesive
- Brush teeth as normal (no mouthwash)
- Continue to fast
- Take medications as normal (unless diabetic)

DURING & AFTER *the test*

- ✗ Avoid sleeping and drinking during the test
- Please tell staff if you need a sip of water during the test period
- Please record any gastrointestinal symptoms
- Abdominal discomfort, flatulence or diarrhoea may be experienced up to a day following the test

INSTRUCTIONS *to ensure reliable results*

RESTRICT milk and dairy products.

Lactose-free milk, soy/rice/almond/coconut milk are OK.

RESTRICT canned and dried fruit, fruit juices, soft drinks & honey.

NO fibre supplements (eg. Metamucil®).

NO laxatives.

MEAL IDEAS *for the day before your hydrogen breath tests*

Breakfast

Cornflakes/rice bubbles with lactose-free milk, rice milk or soy milk
White/Gluten-free bread with margarine/vegemite/peanut butter
Eggs and bacon on toast (White/Gluten-free bread)
Piece of banana, kiwifruit or berries

Lunch

White/Gluten-free bread sandwich with margarine/mustard and ham/
chicken/tuna/salmon and lettuce/tomato/cucumber/avocado
Rice crackers/crispbread with tomato and cucumber
Cooked potato, capsicum, tomato, cucumber, pine nuts,
tuna with olive oil and balsamic vinegar
Sushi/sashimi/rice paper rolls

Dinner

Steak/Chicken/Fish grilled with either one or more of the following:
Salad (lettuce, tomato, cucumber); mashed potato; vegetables
(broccoli, carrot, bok choy, eggplant, zucchini, capsicum, pumpkin)
Stir fry vegetables cooked with oil, soy sauce, oyster sauce
served with rice or rice noodles

Snacks and Drinks

Piece of banana, kiwifruit or berries
Water, Tea, Coffee with lactose free milk, rice milk
or soy milk with or without sugar



CHECKLIST

- ☐ I do not have any of the contraindicated conditions mentioned

Past 4 WEEKS

- ☐ No bowel prep
- ☐ No colonoscopy, fluoroscopy or barium meal/enema
- ☐ No oral or IV (injected) antibiotics

Past 2 WEEKS

- ☐ No probiotics

Past WEEK

- ☐ No laxatives

Past 24 HOURS

- ☐ No fibre supplements
- ☐ No vitamins, minerals, laxatives or anti-diarrhoea medication
- ☐ Followed diet for 24 hours

Past 12 HOURS

- ☐ Fasted for 12 hours
- ☐ No fluids for 12 hours
- ☐ No smoking on the morning of the test
- ☐ No exercise
- ☐ Do not wear lipstick, aftershave or perfume

Test _____ Date/Time _____

Test _____ Date/Time _____



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