Myth Busting:
Food Sensitivity Testing

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What are we covering today?

- Prevalence of adverse food reactions
- Immune complexes and the FIT Test
- Common myths
- Red flags
- 6-step workflow
- **BIG** announcement!
- Special offer
- Please ask questions as we go…

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Meet the UK Team

Charlotte Hunter
Head of KBMO UK

Linette Petrillo
Customer Services

Kelly Hutson
Events

Clare Kennedy
Operations Manager

Natasha Khan
Sales

Emily Birch
Clinical Support

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Patterns & Prevalence Food Allergy (PAFA) Report (2024)

Food Reactions in Adults

>30% of adults reported some types of adverse reactions when eating food - meaning they had an illness or trouble when eating a particular food.

Allergies in Adults

6% of the UK adult population are estimated to have a clinically confirmed food allergy. This equates to around 2.4 million adults in the UK

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Your thoughts on food sensitivity tests?

Unreliable
and inaccurate

I want
my clients
to eat more – not less!

Waste of money

They only
measure recent
consumption

Elimination
Diets are the
Gold standard

They are not
Scientific

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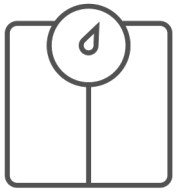
Why test food sensitivities?



Weight Loss & Thyroid Issues

Digestive & Skin

Fibroids, Endometriosis & PCOS

Digestive & Skin

Brain Fog, Fatigue & Migraines

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Dr Joel Evans

"The immune complexes and inflammation associated with foods are an underlying problem for all of the conditions I see daily."

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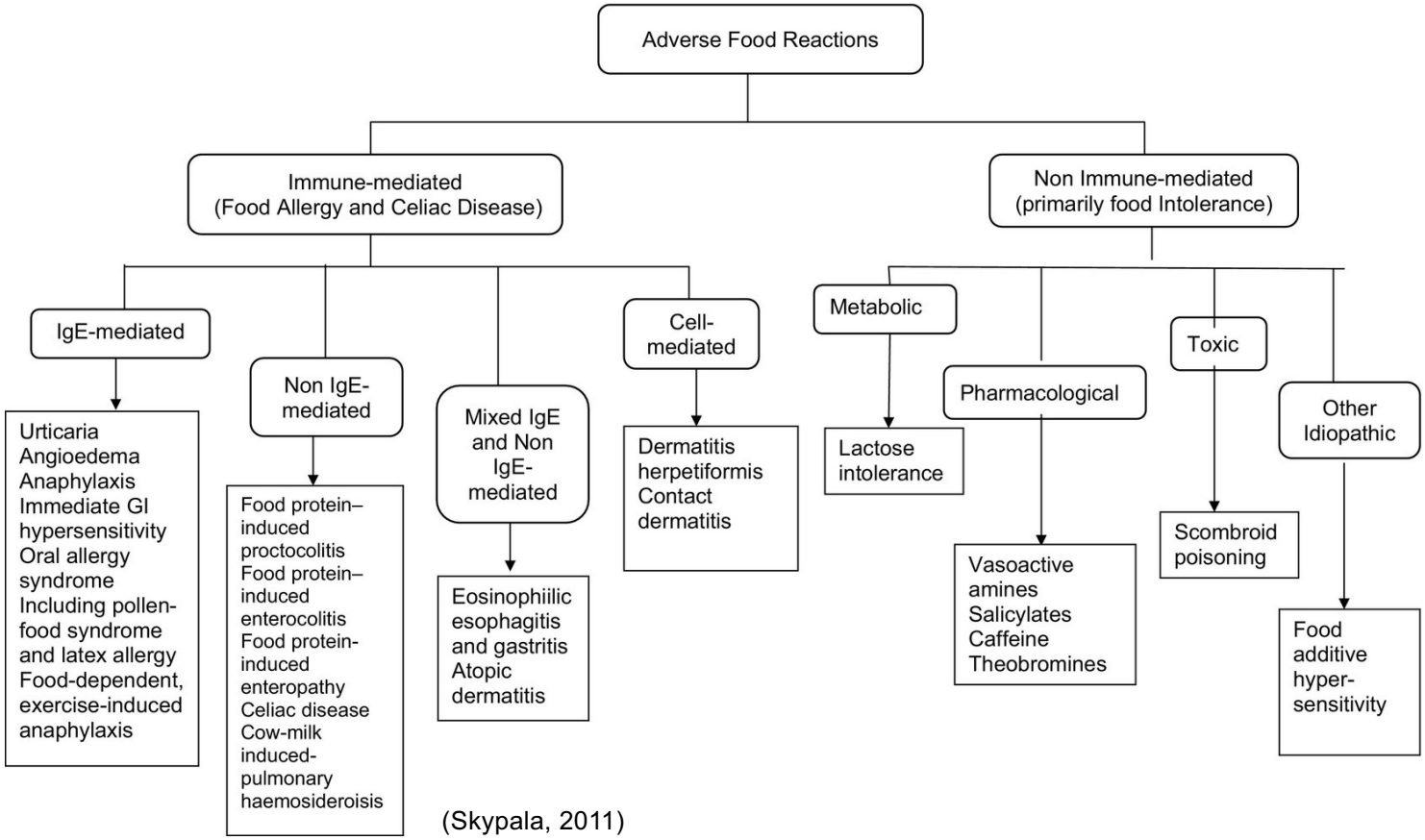
Classification of adverse food reactions



(Skypala, 2011)

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How do we broadly define food reactions?

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The Immune System

The immune system provides 3 levels of defence against disease causing organisms.

1. Barriers

Prevent Entry

- Skin & mucus membranes
- Stomach acid & digestive enzymes
- Beneficial bacteria that live in the colon (the gut microbiota)

2. Innate Immunnity

General Defence

- WBCs called neutrophils & macrophages engulf & destroy foreign invaders & damaged cells

3. Adaptive Immunity

Specific Defence

- WBCs (T lymphocytes or T cells) target & destroy infected or cancerous cells
- WBCs called B lymphocytes (B cells) & plasma cells produce antibodies that target & destroy infected /cancerous cells

(Informed Health, 2023 and Paludan et al., 2020)

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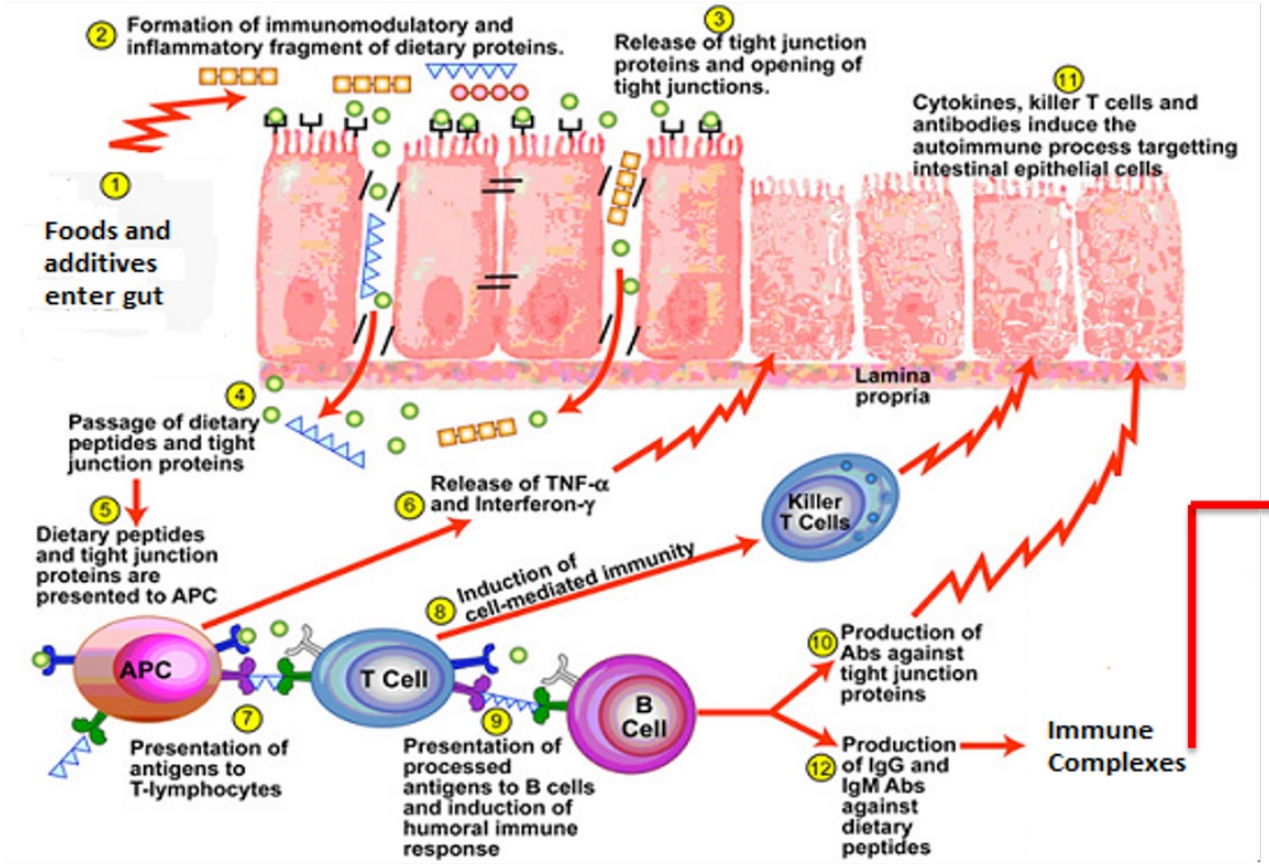
Immune Complexes



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The Food Inflammation Test (FIT)

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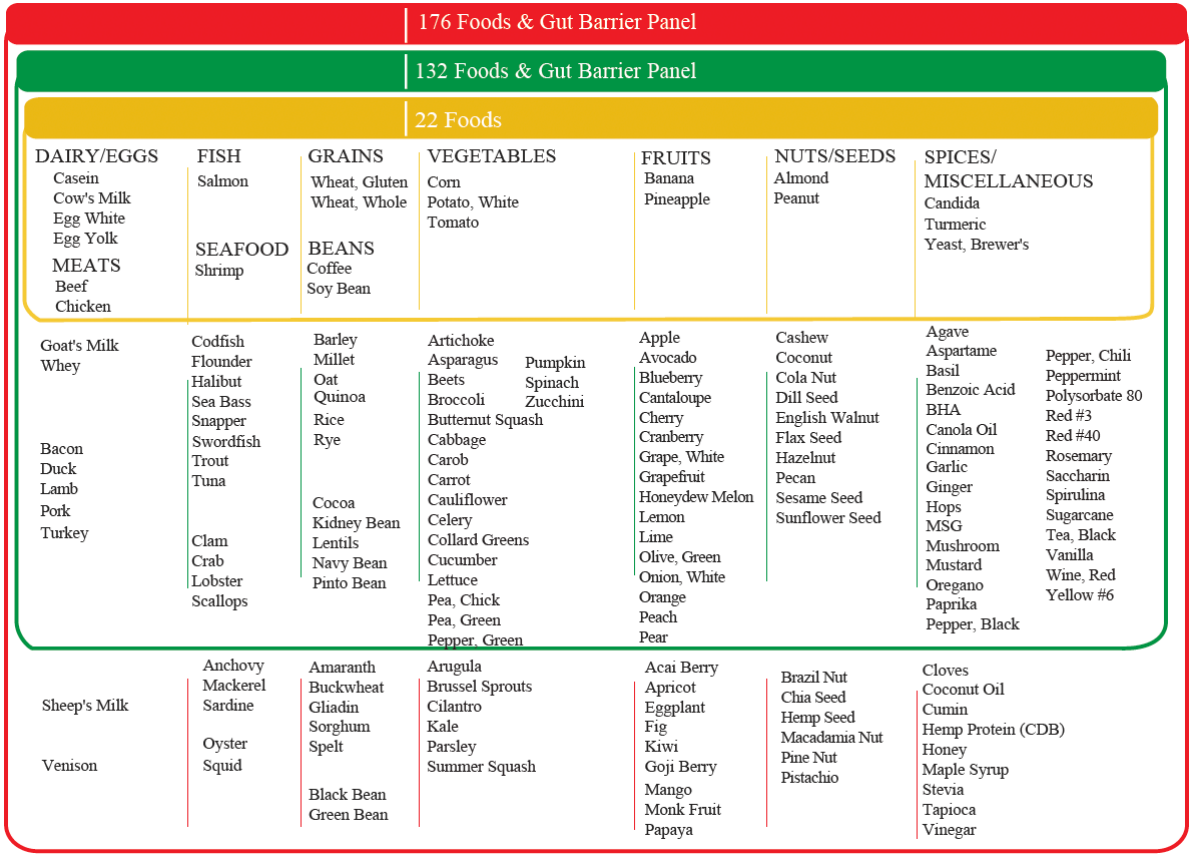
Foods We Test



Food selection contains ‘real-world’ foods, encompassing raw and cooked.

The FIT132 and FIT176 both include the Gut Barrier Panel.

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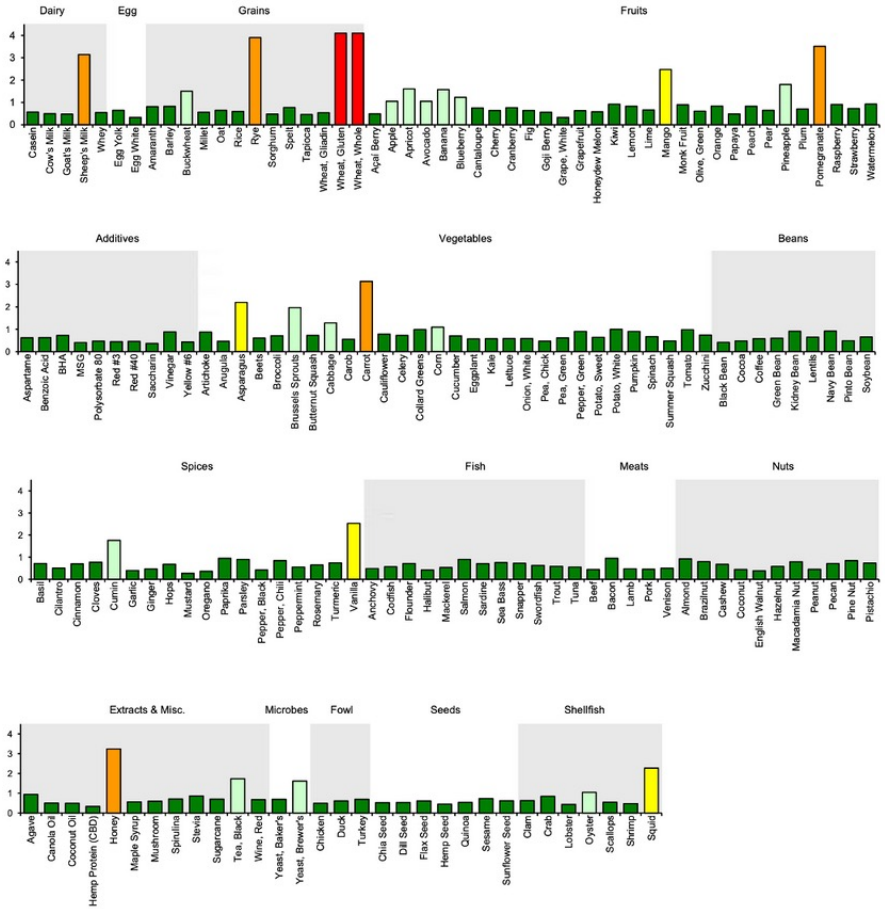
The Food Inflammation Test (FIT) Report



4+ Reactions:	Wheat, Gluten Wheat, Whole
3+ Reactions:	Sheep's Milk Rye Pomegranate Carrot Honey
2+ Reactions:	Mango Asparagus Vanilla Squid

- Easy to read
- Colour coded
- Client-friendly
- Easy interpretation
- Efficient practice
- Easy to repeat tests

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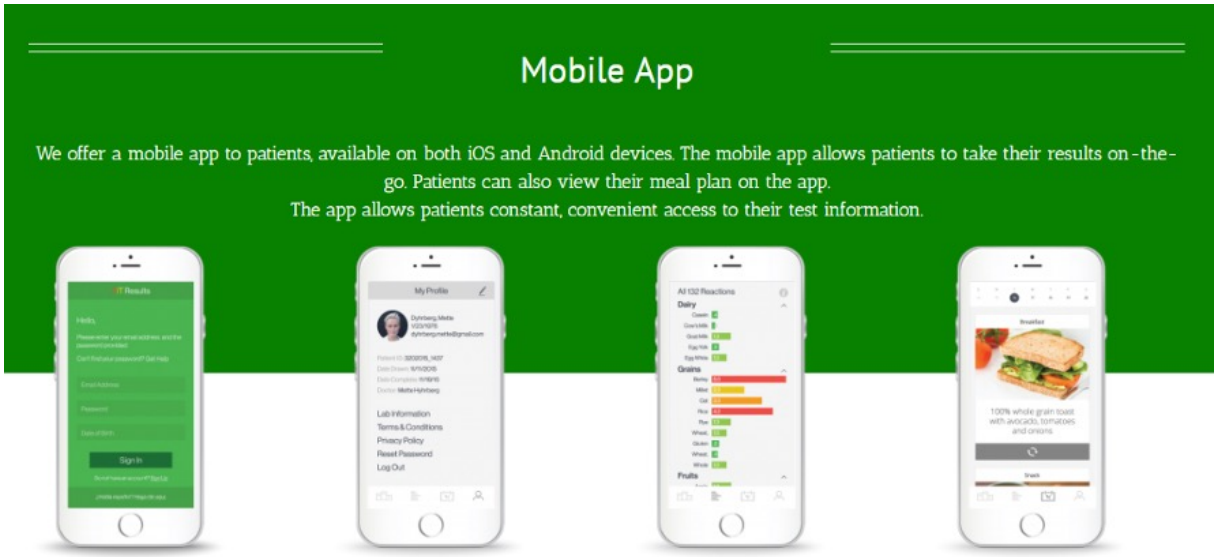
Compliance Tools



Available on the App Store

Get it on Google play

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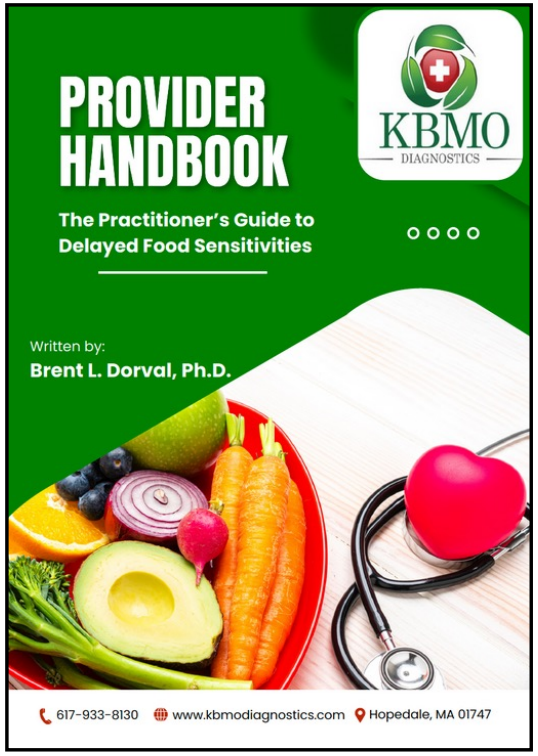
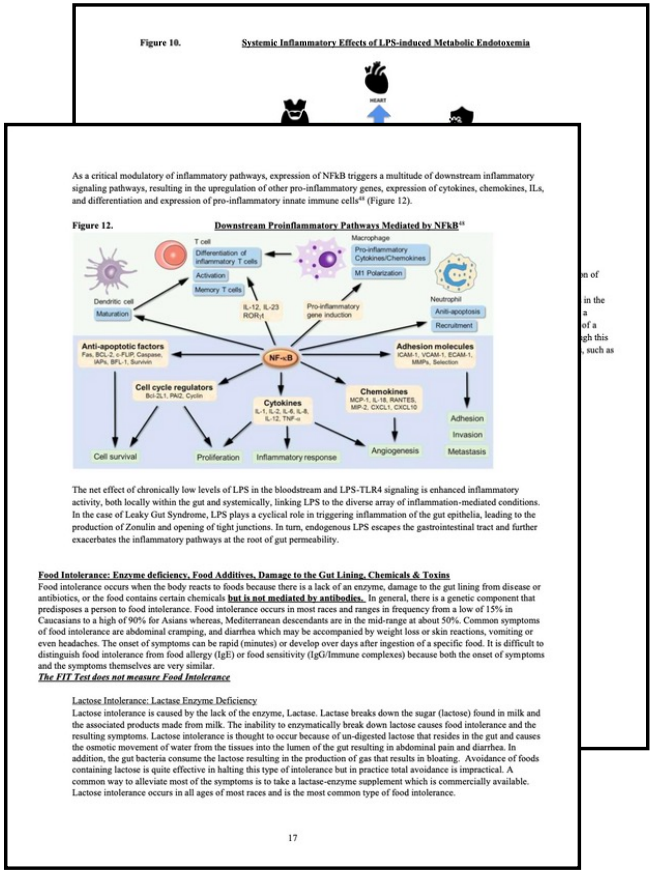
Practitioner’s Guide





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Supplement Guidance

Myth #1: IgG = Allergy

- IgG reflects exposure/tolerance, not allergy
- FIT is not for anaphylaxis or IgE allergy risk; use only in non-IgE symptom clusters
- IgG / IgG4 testing **ALONE** should not be used to diagnose food allergy or intolerance, due to lack of clinical correlation and potential for misinterpretation (Garmendia et al, 2025)

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Myth #2: No Evidence

- IBS RCTs: IgG-guided elimination improved symptoms (2004, 2025)
- Migraine RCTs: reduced attack frequency (2010, 2011 short-term)
- Open-label IBS-M: better QoL vs low-FODMAP (2021)
- Evidence is strongest for IBS & migraine subgroups

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Published Evidence

Randomized Controlled Trial > Headache. 2013 Mar;53(3):514-25.
doi: 10.1111/j.1526-4610.2012.02296.x. Epub 2012 Dec 6.

IgG-based elimination diet in migraine plus irritable bowel syndrome

Elif Ilgaz Aydinlar [1], Pinar Yalinay Dikmen, Arzu Tiftikci, Murat Saruc, Muge Aksu, Hulya G Gunsoy, Nurdan Tozun

> J Clin Med. 2021 Sep 23;10(19):4317. doi: 10.3390/jcm10194317.

Igg Food Antibody Guided Elimination-Rotation Diet Was More Effective than FODMAP Diet and Control Diet in the Treatment of Women with Mixed IBS-Results from an Open Label Study

Lucyna Ostrowska [1], Diana Wasiluk [1], Camille F J Lieners [2], Mirosława Gałęcka [2], Anna Bartnicka [2], Dag Tveiten [3]

Randomized Controlled Trial > Cephalalgia. 2010 Jul;30(7):829-37.
doi: 10.1177/0333102410361404. Epub 2010 Mar 10.

Diet restriction in migraine, based on IgG against foods: a clinical double-blind, randomised, cross-over trial

Kadriye Alpay [1], Mustafa Ertas, Elif Kocasoy Orhan, Didem Kanca Ustay, Camille Lieners, Betül Baykan

Randomized Controlled Trial > Gastroenterology. 2025 Jun;168(6):1128-1136.e4.
doi: 10.1053/j.gastro.2025.01.223. Epub 2025 Jan 31.

A Novel, IBS-Specific IgG ELISA-Based Elimination Diet in Irritable Bowel Syndrome: A Randomized, Sham-Controlled Trial

Prashant Singh [1], William D Chey [2], Will Takakura [2], Brooks D Cash [3], Brian E Lacy [4], Eamonn M M Quigley [5], Charles W Randall [6], Anthony Lembo [7]

Clinical Trial > Gut. 2004 Oct;53(10):1459-64. doi: 10.1136/gut.2003.037697.

Food elimination based on IgG antibodies in irritable bowel syndrome: a randomised controlled trial

W Atkinson [1], T A Sheldon, N Shaath, P J Whorwell

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Clinical Studies

Interlaboratory Reproducibility

Alanber-KBMO Gut Barrier Panel Interlaboratory Validation (n=39)				
	Zonulin IgG	Occludin IgG	Candida IgG	LPS IgG
Correlation	94.9%	100.0%	94.9%	100.0%
	Zonulin IgA	Occludin IgA	Candida IgA	LPS IgA
Correlation	97.4%	100.0%	94.9%	100.0%

- Accuracy of the FIT176 & GBP in dried bloodspot samples demonstrated across independent labs in Chengdu, China, New Delhi, India, and Hopedale, MA (KBMO)
- **FIT176 Test**: Average agreement of 98.8% among 176 food antigens (n=8)
- **GBP Test**: >90% for almost all analytes (Chengdu, n=39; New Delhi, n=16).
- Robust reproducibility under varying laboratory settings, sample and reagent shipment conditions, sample stability, etc.

Clinical Studies

FIT Test Food Elimination Studies

- IBS and Food Sensitivities: Single blinded randomized controlled study to assess how the FIT Test can improve clinical outcomes in IBS patients (2017)
  - -**14% hospitalization rate/ER use** and **-50% office visits** compared to control
  - **-126.89 IBS-SSS (FIT Test)** vs. -46 IBS-SSS (control)
  - Greater decreases in homocysteine and CRP compared to control
- Alanber Health Laboratory (2023):
  - 82% of the study population (n=74) reported decreases in symptoms (GI, dermatitis, joint pain, headache, fatigue, etc.) following a 3-month elimination diet
- Miyazawa, M.D. Clinical Study (2025):
  - Average change of +1.0 health score following 3-month elimination diet (1-10 scale)
  - Symptom improvement in 85% (n=13); Significant symptom improvement in 23% (n=13)
  - Food challenge testing demonstrated symptom recurrence upon reintroduction of identified foods

Myth #3: False Positives

- Assays differ in antigen libraries, subclasses, detection
- FIT is unique: IgG1–4 + C3d immune complexes
- C3d highlights complement-engaged foods
- May reduce false positives if IgG-only

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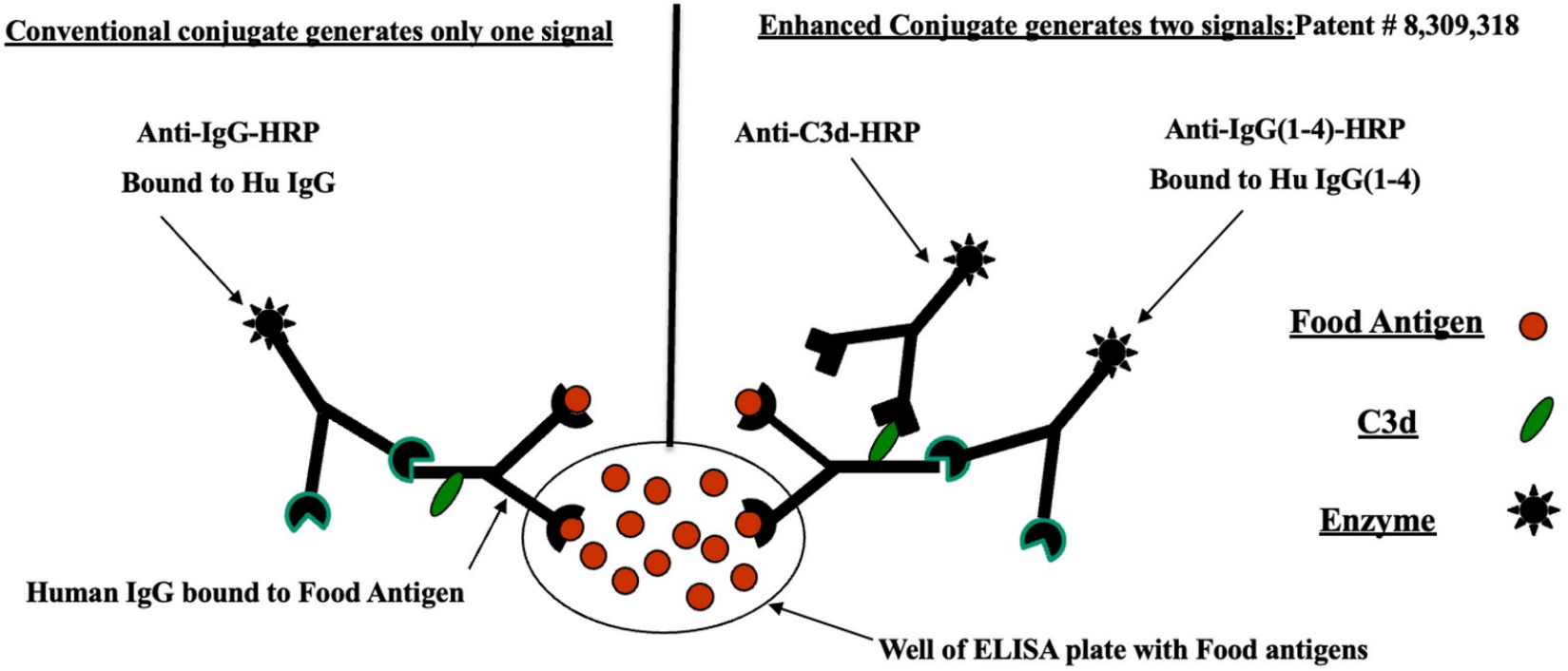
Technology for Enhanced Sensitivity



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Myth #4: Increased Restriction

- FIT-guided = targeted, nutrient adequate
- 6–8-week elimination, then structured rechallenge
- Rotation strategy to avoid long-term restriction
- Nutrition support ensures diversity & safety

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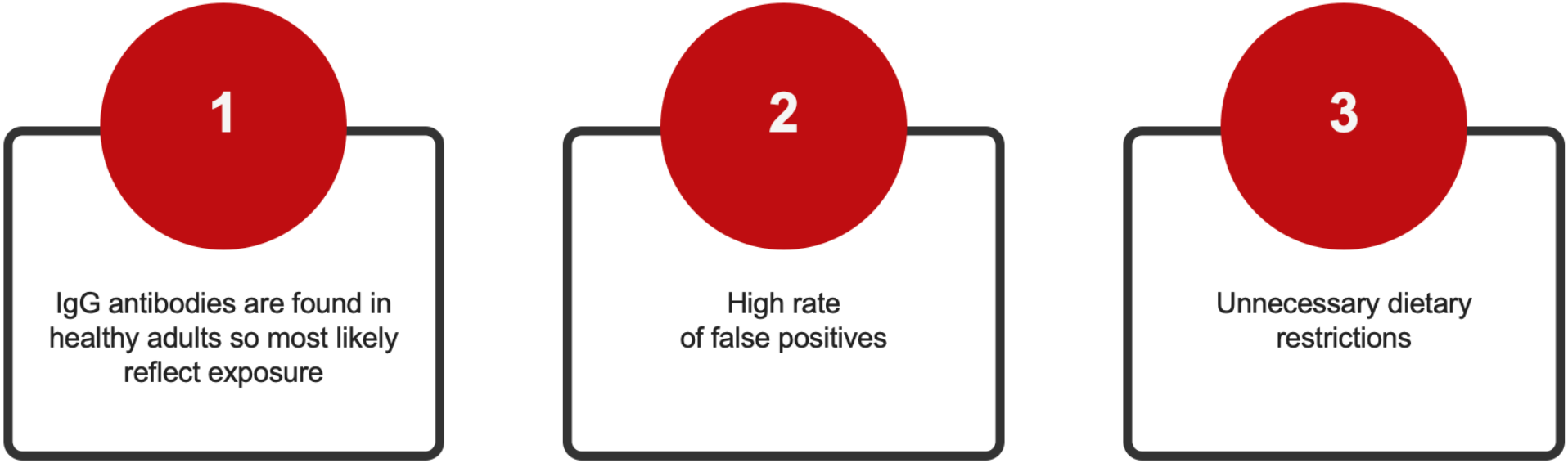
Why is isolated IgG testing problematic?



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Myth #5: Absence of Clinical Context

- Yes, IgG-only tests lack clinical context unlike the FIT
- Gut Barrier Panel includes zonulin, occludin, candida and LPS
- Adds mechanistic relevance: immune reactivity + barrier dysfunction
- Guides targeted interventions (e.g., diet + gut barrier support)

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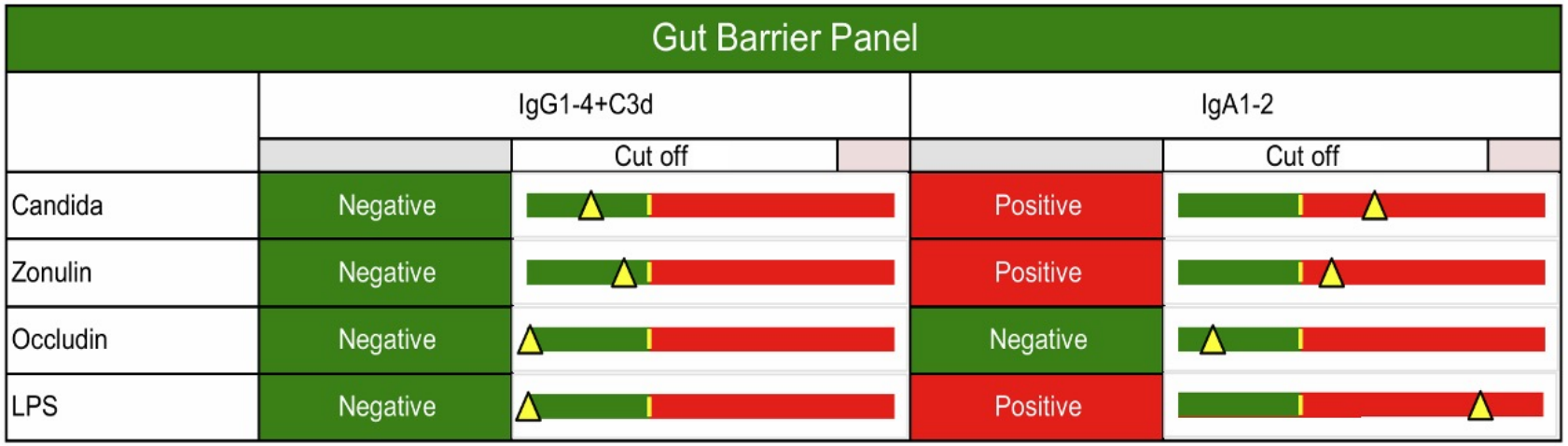
The Gut Barrier Panel

Gut Barrier Panel

KBMO has created a unique Gut Barrier Panel which in recognition that leaky gut occurs across a spectrum we have included the following gatekeeper markers: Candida, Zonulin and Occludin and LPS. For each marker, we measure IgG 1-4 /C3d in addition to IgA 1 and 2.



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Myth #6: Sensitivities are Permanent

- Reality: Many sensitivities are dynamic and reversible
- FIT reactivity can reduce after elimination + gut repair
- Structured rechallenge often allows safe reintroduction
- Goal = restore tolerance & dietary diversity, not restriction

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Case Study: Sensitivities Can Resolve

- 38-year-old woman, IBS-D, fatigue, skin flares
- Initial FIT Test: High reactivity to egg white, dairy, and almonds
- Gut Barrier Panel: elevated zonulin + LPS
- Intervention: 8-week elimination + gut repair (prebiotics, zinc carnosine, polyphenols)
- Re-test at 6 months: Egg white & dairy antibodies ↓ markedly
- Reintroduced successfully without symptoms
- Almonds remained reactive → continued rotation

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Myth #7: Not ‘scientific enough!’

- Patented methodology: US Patent 8,309,318 (immune complex detection)
- Measures IgG1–4 + C3d immune complexes (not IgG alone)
- Includes Gut Barrier Panel: zonulin, occludin, candida, LPS antibodies
- CLIA-certified, CAP-accredited laboratory testing standards
- Clinical evidence
- Results linked to immune mechanisms (complement, barrier integrity, tolerance)

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When to be cautious

- Not for IgE-mediated allergy or anaphylaxis risk
- Not for coeliac diagnosis
- Avoid in eating disorder risk
- Must always include elimination–rechallenge
- Use in clinical context only, not as standalone ‘diagnosis’

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6-Step Workflow

1. Pre-screen: rule out red flags (weight loss, bleeding, family history of IBD/CRC)
2. Order FIT ± Gut Barrier Panel
3. Elimination (6–8 weeks depending on context): remove only high-reactivity foods; maintain nutrient quality
4. Rechallenge: sequential reintroduction, symptom diary (IBS-SSS etc.)
5. Rotation: maintain dietary diversity; avoid unnecessary long-term restriction
6. Re-test selectively: only if ongoing symptoms or to support patient engagement

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The Hormone Insights Test (HIT)

Powered by the Advanced Urine Hormone Metabolites Test by ZRT

- Measures **44 hormone-related markers**
- 13 oestrogens, 8 androgens
- Diurnal cortisol & melatonin patterns
- Includes **BPA** (rarely assessed endocrine disruptor)

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The Hormone Insights Test (HIT)

- Provides insight into **metabolism & detoxification** of:
- Oestrogens, progesterone, androgens Cortisol, melatonin
- One of the **most detailed hormone metabolism tests** available
- Practitioner Price: £249
- Patient Price: £299

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Special Offer for You!

FIT176 (including the Gut Barrier Panel) for £180
instead of £300.

This is your opportunity to experience the test firsthand, explore the results, and see how it can transform your practice

Must be redeemed by Thursday 4th September 2025

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Thank You

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