

ORGANIC ACID TESTS WITH DUTCH - FAQs

What is the difference between DUTCH Complete and DUTCH Plus?

The difference between the DUTCH Complete and the DUTCH Plus has to do with the cortisol and cortisone reporting and getting the cortisol awakening response with saliva for the DUTCH Plus kit. The DUTCH Complete is done only with dried urine and gives sex hormones metabolites, adrenals, 8-OHdG, melatonin and OATs, with a 4-point graph of cortisol and cortisone in urine. The DUTCH Plus offers all the same things for the dried urine, sex hormones metabolites, adrenals, 8-OHdG, melatonin and OATs. However, we give you the cortisol awakening response, from the saliva samples, on a 5-point graph. The patients collect the saliva at wake, 30 min after wake, 60 min after wake, evening and bedtime. This gives providers a chance to see exactly how fast their cortisol is responding at those exact time points in the morning. Then you should see a nice decline at the evening and bedtime hours.

Here are links to both videos: <https://dutchtest.com/video/introduction/>
<https://dutchtest.com/video/introduction-to-dutch-plus/>

How long should a patient be off the birth control pill before running the DUTCH test?

We would suggest patients be off birth-control for 2-3 cycles prior to testing. Please let me know if you have any further questions or if there is anything else I can help you with.

Is there a practitioner training booklet that accompanies DUTCH reports? Are there more resources I can access to understand how to interpret and apply the information better?

We have several tutorial videos on our website. I have provided a link to the DUTCH Complete report, and there are several more reporting videos you can view at your leisure. <https://dutchtest.com/video/dutch-plus-report-overview/> These are great for walking through and understanding the reporting. One of the benefits that we do offer to all our providers is the option to consult with one of our clinical consults over specific DUTCH reports. These are 30-minute pre-scheduled sessions and they will go over your patients results with you. This is a free benefit to all providers that have a provider account with us. Also, something that Dr. Jones is working on is creating a DUTCH training/education plan to help providers understand our testing and reporting. This is underway, but still in the works.

How does B6 lower Xanthurenate?

Refer to the Kynurenine pathway slide. B6 is strongly needed to go from tryptophan straight down to Kynurenine. If there is minimal B6, it makes xanthurenate instead that doesn't need as much B6.

Clarify does estrogen, cortisol, etc. push the Kyeurinine pathway to greater than 95% or the other pathway?

The Kynurenine pathway is already about 95% in favor of that direction from tryptophan. The estrogen, cortisol, etc. push it even more.

You explained how an organic acid is made but then it became confusing when you showed slide of 5HIAA being high is congruent with Serotonin being high became confusing rather than thinking high 5HIAA and serotonin low - maybe show the pathway again. Is the title of the slide referring to the organic acid being high (like 5HIAA) or what it reflects being high (serotonin) or both?

Serotonin itself can be high or low and then 5-HIAA can be high or low because of the serotonin or because of something else (ex. Genetics and co-nutrients). As an example, if serotonin cannot make melatonin then it becomes 5-HIAA. The general description of what an organic acid is, primarily dealt with the nutritional organic acids. These acids back up in the system with a deficiency (like B12 and MMA). The neurotransmitter metabolites are simply end products, so that description is not accurate entirely for what causes them to be low or high.

What about taking pregnenolone and DHEA sublinguals and taking the DUTCH test?

Both pregnenolone and DHEA supplementation will affect the DUTCH test. Pregnenolone does not raise progesterone itself but it does raise progesterone metabolites due to the first pass effect. We recommend skipping oral or sublingual pregnenolone for 3 days and sublingual DHEA for one day.