



# **Indican Bowel Toxicity Test**

**Test Kit includes:** 

10 Indican Testing Tubes, 10 Pipette Droppers,

10 Urine Sample Cups with lids, 10 Description & Recommendation Cards & a detailed instruction sheet.

# **Indican**

(Potassium Indoxyl Sulfate)

#### Urinary Indican is a qualitative test. Results are reported from 0 to +4

The Obermeyer Urinary Indican Test screens you for the presence of harmful anaerobic bacteria and bowel dysbiosis. Dysbiosis is a toxic condition caused by a drop in the population of beneficial digestive bacteria. This can lead to malabsorption and to digestive and inflammatory symptoms.

The Urinary Indican's test will measure the presence and extent of 'Leaky Gut Syndrome', a measure of the breakdown of gut permeability and integrity. This test also provides invaluable information providing an indication for the Gut Regeneration and Repair Program.

#### **High urinary indican:**

The Indican Test guages the level of indoles in the intestine by looking for the product of their metabolism, indican, in the urine. Large amounts of indican are usually a sign of high bacteria counts in the upper intestine. Large amounts of bacteria in the upper intestine produce large amounts of polyamines.

Indican is derived from indol. It is absorbed and oxidized into indoxyl, which combines with sulfuric acid and potassium and is thus excreted. Under normal conditions, the amount excreted is small. It is increased by a diet rich in undigested protein.

Indican originates practically wholly from putrefactive processes.

It alone, can be taken as an index of such putrefaction. A marked increase is called indicanuria.

Increased level of indican is indicative in the following conditions.

#### Disease of the small intestine

Intestinal obstruction gives the largest amount of indican. Simple constipation and diseases of the large intestine alone rarely cause indicanuria.

#### Disease of the stomach

Can be associated with deficient digestion abilities caused by a lack of enzymes within the food, as chronic gastritis and gastric cancer. Diminished hydrochloric acid caused by enzyme deficiency favors intestinal putrefaction.

#### Diminished bile flow

Since the bile serves as a stimulant to peristalsis and in several ways retards putrefaction, a diminished flow from any cause favors occurrence of indicanuria.

Liver/Kidney fortification has shown to help.

#### Decomposition of exudates

Anywhere in the body, as in emphysema, bronchiectasis, and large tuberculous cavities.



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# Professional Testing Systems

# **Indican Test Procedure**

After receiving urine sample from patient (either brought in or taken at office), perform the analysis as described.

Indican: **USE CAUTION** when handling the reagents used in this test.

PREPARATION: It is important to use goggles and gloves while performing this procedure.

If reagents from tube come in contact with body, wash with soap and warm water immediately.

- 1. Have patient gather a urinalysis sample in container provided (can use small baby food jar).

  Unscrew the cap off of the Indican testing tube. Using the pipette provided, add 5 ml of urine sample into test tube.
- 2. Screw cap on end of tube securely and invert tube 2 times. Unscrew cap slightly and re-tighten after each inversion to relieve pressure from tube.
- 3. Let tube sit for 3-4 minutes.
- 4. Again invert tube 6 times, each time releasing pressure from tube after each inversion.
- 5. Wait 3 minutes and read color at bottom of test tube. Compare color with chart provided and make recommendations accordingly.

**Significance:** When protein is decomposed by bacteria, indole and skatol are formed, and these are absorbed, oxidized to indoxyl and skatoxyl, conjugated with sulfuric acid, and excreted as potassium salts. The indoxyl potassium sulfated is indican. Normally, there is not more than a trace in the urine. Pathologically, it is increased with increased intestinal putrefaction, with diminished peristalsis (high intestinal obstruction), and with protein decomposition anywhere in the body.

# DISCARD TEST AFTER COMPLETION -- DUMP CHEMICALS DOWN TOILET AND FLUSH. PUT LID BACK ON EMPTY TUBE AND THROW IN TRASH. DO NOT POOR DOWN SINKS BECAUSE OF CORROSIVE NATURE OF CHEMICALS.

Reference: Bray's Clinical Laboratory Methods, 6th Ed., 1962.

#### Additional References:

- 1. Todd J: Clinical Diagnosis and Management by Laboratory Methods. WB Saunders, Phil, Pa 1979. pp 592-3.
- 2. Greenberger N, Saegh S, and Ruppert R: Urine indican excretion in malabsorption disorders. Gastroenterol 55:204-11, 1968.
- 3. Curzon G and Walsh J: Value of measuring urinary indicant excretion. Gut 7:711, 1966.
- 4. Asatoor A, London D, Craske J, and Milne M: Indole production in Hartnup's disease. Lancet i:126-8, 1963.

### **Indican Test Result Recommendations**

Clear Negative "GREAT JOB" take Optimal Daily Nutrient Essential Pak for optimal health 1 Light Blue Low Level 2 Optimal Digestion with meals & 1 Optimal Flora Plus morning and night 2 Blue Moderate Level 2 Optimal Digestion & Flora Plus with each meal 3 Violet **High Level** Optimal Soft Cleanse Pak 1 morning & night, 2 Optimal Digestion at each meal 4 Black **Extremely High** Optima Half Day Cleanse & then 2 Optimal Digestion & 1 Optimal Flora Plus with each meal

Re-test between 3-5 weeks as directed by a health professional.

AFTER TESTING GETS TO CLEAR, START OR CONTINUE ON DNE CUSTOM PAK FOR LONGEVITY AND OPTIMAL HEALTH.
MAKE SURE OTHER TESTS ARE PERFORMED FOR DIFFERENT ORGANS AND BODILY SYSTEMS.