



TO LEARN MORE ABOUT  
NUTRIGENOMIX® CONTACT:  
[info@nutrigenomix.com](mailto:info@nutrigenomix.com)



**NUTRIGENOMIX** 

PERSONALIZED NUTRITION & FITNESS REPORT



Hello Caroline:

Nutrigenomix is pleased to provide you with your Personalized Nutrition and Fitness Report based on your individual genetic profile. Your recommendations are based on the most current evidence-based scientific research that has been published in peer-reviewed journals and reviewed by our team of world-renowned experts in the field of nutrigenomics.

Our laboratory has used state-of-the-art genetic testing procedures to analyze your DNA sample. We examined your genetic code to determine how your genes can influence recommendations related to weight management, body composition, cardiometabolic health, food intolerances, eating habits, fitness performance and injury risk. Based on these results, we developed a series of nutrition and fitness recommendations that are aligned with your genetic profile and gathered additional genetic insights for you and your healthcare provider to consider. As new discoveries in the field of nutrigenomics are made, you will have the opportunity to access this information to further fine-tune your personalized nutrition and fitness plan.

You and your healthcare professional can now use the personalized recommendations contained in this report to help you achieve optimal nutritional status and fitness level. In this way, you can create a plan to maximize your genetic potential and overall health and start to *eat according to your genes!*



Ahmed El-Soheemy, PhD  
Chief Scientific Officer

# The Science Behind Nutrigenomix

*One man's food is another man's poison – Lucretius*

Nutrition is one of the most important lifestyle factors affecting your risk for developing certain diseases and has a significant impact on overall well-being. Over the past decade, there has been growing recognition of the importance of how genes influence our nutritional status, which directly impacts our health. The human genome consists of about 25,000 genes and virtually all can exist in different forms. The variations in our genes make us unique from one another. Genetic variation determines not only the color of our eyes and hair, but how we metabolize and utilize the foods, nutrients and supplements we ingest. Nutrigenomics is the science that applies genomic information and advanced technologies to uncover the relationship between genes, nutrition and human health. The term nutrigenomics refers to both the study of how the food, beverages and supplements we consume affects our genes and how our genes can influence our body's response to what we consume.

Different versions of a gene can make us respond differently to certain components in food such as the lactose in milk, the gluten in bread, the caffeine in coffee, along with carbohydrates, fats, proteins vitamins and minerals found in various foods. We are all familiar with people who are lactose intolerant or cannot eat gluten. These differences between individuals can be explained by gene variations within the population. Through science and research we have learned that genetic variations in the population and between individuals affect a wide variety of responses to key components of the human diet. For instance, some individuals may benefit from limiting their consumption of caffeine or increasing their intake of omega-3 fat, while others can follow the general recommendation for either or both. Your best diet depends on the specific variants you have for these nutrient-related genes. Understanding your genetic profile and its implications on your unique response to the foods, supplements and beverages you consume will provide you with the tools needed to make the best dietary choices.

The science of how specific genes change how we respond to dietary components enables us to use nutrition to its fullest potential to prevent, manage or improve various health issues. These personalized diets can optimize an individual's nutritional status and empower them to focus on preventing diet-related diseases or conditions. A healthy, balanced diet should provide enough energy and nutrients to support optimal health, reduce the risk of disease and maintain a healthy body weight. While general dietary recommendations might be prudent to follow, the one-size-fits-all approach to nutritional advice could limit some individuals from reaching their full potential for health and wellness. By tailoring one's nutritional needs to their genetic profile, the benefits of nutrition on health status can be maximized.



# Table of Contents

Summary of Results ..... 2

NUTRIENT METABOLISM

Vitamin A (Beta-Carotene) ..... 6

Vitamin B<sub>12</sub> ..... 7

Vitamin C ..... 8

Vitamin D ..... 9

Vitamin E ..... 10

Folate ..... 11

Choline ..... 12

Calcium ..... 13

Iron Overload ..... 14

Low Iron Status ..... 15

FOOD INTOLERANCES AND SENSITIVITIES

Lactose ..... 16

Gluten ..... 18

Caffeine and Anxiety ..... 20

CARDIOMETABOLIC HEALTH

Caffeine and Cardiometabolic Health ..... 21

Whole Grains ..... 22

Sodium ..... 23

Omega-6 and Omega-3 Fat ..... 24

Physical Activity for Cardiometabolic Health ..... 25

WEIGHT MANAGEMENT AND BODY COMPOSITION

Physical Activity for Weight Loss ..... 26

Energy Balance ..... 27

Protein ..... 28

Total Fat ..... 29

Saturated Fat ..... 30

Saturated and Unsaturated Fat ..... 31

Monounsaturated Fat ..... 32

EATING HABITS

Fat Taste Perception ..... 33

Sugar Preference ..... 34

Eating between Meals ..... 35

EXERCISE PHYSIOLOGY, FITNESS AND INJURY RISK

Motivation to Exercise ..... 36

Exercise Behavior ..... 37

Power and Strength ..... 38

Endurance ..... 39

Muscle Damage ..... 40

Pain ..... 41

Bone Mass ..... 42

Achilles Tendon Injury ..... 43

Additional Genetic Insights for Health and Wellness ..... 44

International Science Advisory Board ..... 46

# Summary of Results

## Nutrient Metabolism

Dietary Component	Gene, rs Number	Risk Variant	Your Variant	Your Risk	Recommendations
Vitamin A	BCMO1, rs11645428	GG	GG	Elevated	Focus on consuming preformed sources of vitamin A.
Vitamin B <sub>12</sub>	FUT2, rs601338	GG or GA	GA	Elevated	Focus on consuming bioavailable sources of vitamin B12.
Vitamin C	GSTT1, rs2266633	Del	Ins	Typical	Meet the RDA for vitamin C daily.
Vitamin D	CYP2R1, rs10741657	Algorithm	GA	Elevated	Consume 1000 IU (25 mcg) vitamin D daily.
	GC, rs2282679		GG		
Vitamin E	COMT, rs4680	GG	GA	Typical	Meet the RDA for vitamin E daily from food sources rich in vitamin E.
Folate	MTHFR, rs1801133	CT or TT	TT	Elevated	Meet the RDA for folate daily.
Choline	MTHFD1, rs2236225	Algorithm	GG	Elevated	Meet the Adequate Intake (AI) level for choline daily.
	PEMT, rs12325817		CG		
Calcium	GC, rs7041	Algorithm	TG	Elevated	Consume 1200 mg of calcium daily.
	GC, rs4588		CA		
Iron Overload	SLC17A1, rs17342717	Algorithm	CC	Low	Follow the recommendations provided in the Low Iron Status section.
	HFE, rs1800562		GG		
	HFE, rs1799945		CC		
Low Iron Status	TMPRSS6, rs4820268	Algorithm	GA	Elevated	Meet the RDA for iron and consume sources of vitamin C with iron-rich foods.
	TFR2, rs7385804		CA		
	TF, rs3811647		AA		

## Food Intolerances and Sensitivities

Dietary Component	Gene, rs Number	Risk Variant	Your Variant	Your Risk	Recommendations
Lactose	MCM6, rs4988235	CC or CT	CT	Slightly Elevated	Limit dairy intake if you experience gastrointestinal symptoms.
Gluten	HLA, rs2395182	Algorithm	GT	Medium	Medium risk for gluten intolerance.
	HLA, rs7775228		TT		
	HLA, rs2187668		CT		
	HLA, rs4639334		GG		
	HLA, rs7454108		TT		
	HLA, rs4713586		AA		
Caffeine	ADORA2A, rs5751876	TT	CT	Typical	Follow the recommendations provided by the CYP1A2 gene section of this report.

## Cardiometabolic Health

Dietary Component	Gene, rs Number	Risk/Response Variant	Your Variant	Your Risk/Response	Recommendations
Caffeine	CYP1A2, rs2472300	GA or AA	AA	Elevated	Limit caffeine intake to 200 mg/day.
Whole Grains	TCF7L2, rs12255372	TT or GT	GT	Elevated	Consume most grain products as whole grains.
Sodium	ACE, rs4343	GA or AA	AA	Elevated	Limit sodium intake to the Adequate Intake level.
Omega-6 and Omega-3 Fat	FADS1, rs174547	CC or CT	TT	Typical	Meet the RDA for omega-6 LA fat and omega-3 ALA fat.
Physical Activity	LIPC, rs1800588	TT or CT	CT	Enhanced	Aim for 150 to 300 min/week of cardio and at least 2 days/week of muscle-strengthening activities.





1 in 5

People with Risk Variant

## Your Results

Gene	Marker
GSTT1	Ins or Del
Risk Variant	Your Variant
Del	Ins

Your Risk

Typical

## Recommendation

Since you possess the Ins variant of GSTT1, there is no increased risk of vitamin C deficiency. Therefore, following the RDA guidelines for vitamin C is sufficient for you. The RDA for vitamin C is 75 mg per day for women and 90 mg per day for men. Smokers require an additional 35 mg per day. Citrus fruits and juices, strawberries, tomatoes, red and green peppers, broccoli, potatoes, spinach, cauliflower and cabbage are examples of foods that are good sources of vitamin C.

Meet the RDA for vitamin C daily.

# Vitamin C

Vitamin C is an essential nutrient and powerful antioxidant. Vitamin C also aids in the absorption of non-heme (plant) iron, and supports immune function and the formation of collagen, a protein used to make skin, connective tissue, and blood vessels, along with supporting bone and tissue repair. Low blood levels of vitamin C have been associated with an elevated risk of cardiovascular disease, type 2 diabetes and cancer. Research has shown that the amount of vitamin C absorbed into the blood can differ between people even when the same amount is consumed. Some people do not process vitamin C from the diet as efficiently as others and are at a greater risk of vitamin C deficiency. Studies have shown that the ability to process vitamin C efficiently depends on a gene called GSTT1.\*

\*Cahill LE et al. Functional genetic variants of glutathione S-transferase protect against serum ascorbic acid deficiency. American Journal of Clinical Nutrition. 2009;90:1411-7.  
Horska A et al. Vitamin C levels in blood are influenced by polymorphisms in glutathione S-transferases. European Journal of Nutrition. 2011;50:437-46.

## GSTT1

The GSTT1 gene produces a protein for the glutathione S-transferase enzyme family. These enzymes play a key role in the utilization of vitamin C. The GSTT1 gene can exist in one of two forms. The insertion ("Ins") form is considered functional while the deletion ("Del") form is not functional. The different versions of this gene influence the way vitamin C is utilized in the body. A deletion version of the gene results in a reduced ability to process vitamin C. This means that people who possess the deletion version (Del) will have lower blood levels of vitamin C at a given level of vitamin C intake compared to people who possess the insertion version (Ins) of the gene.

## Sources of Vitamin C

	Amount (mg)
Red pepper (1 pepper)	216
Strawberries (1 cup)	96
Pineapple (1 cup)	92
Brussels sprouts (1 cup)	90
Orange juice (1 cup)	86
Broccoli (1 cup)	82
Grapefruit (1 fruit)	78
Mango (1 fruit)	75
Kiwi (1 fruit)	70

Source: TACO (UNICAMP), Canadian Nutrient File and USDA Nutrient Database

# Vitamin D

Vitamin D is essential to calcium metabolism and promotes calcium absorption in the gut. Low levels of vitamin D are associated with decreased bone mineral density and an increased risk of fractures. Vitamin D also contributes to normal functions of most cells in the body. Vitamin D can be synthesized by the skin from UV light or it can be obtained from the diet. Low blood levels of vitamin D can result in weak, brittle bones, poor muscle function, and decreased immunity. Life-long vitamin D insufficiency has also been linked to accelerated cognitive decline, autoimmune disorders, neuro-degenerative diseases and cardiovascular disease. Vitamin D deficiency is diagnosed by measuring the most common form of vitamin D in the blood, which is 25-hydroxyvitamin D. Research shows that variations in the CYP2R1 and GC genes can affect your risk for low circulating 25-hydroxyvitamin D levels.\*

\*Slater NA et al. Genetic Variation in CYP2R1 and GC Genes Associated With Vitamin D Deficiency Status. Journal of Pharmacy Practice. 2015;1-6.  
Wang TJ et al. Common genetic determinants of vitamin D insufficiency: a genome-wide association study. Lancet. 2010;376:180-88.

## CYP2R1 & GC

Vitamin D 25-hydroxylase is the key enzyme that activates vitamin D from its pre-formed type, which is obtained through sun exposure and the diet. This enzyme is encoded by the CYP2R1 gene and a variant of this gene has been associated with an increased risk of low circulating levels of vitamin D. The GC gene encodes the vitamin D-binding protein, which binds vitamin D and transports it to tissues. A variant in this gene has also been associated with an increased risk of low circulating levels of vitamin D.

## Sources of Vitamin D

	Amount (IU)
Sockeye salmon (75g)	680
Whitefish (75g)	448
Sardines, canned in oil (1/2 can)	254
Rainbow trout (75g)	192
Smoked salmon (40g)	168
Halibut (75g)	144
Fortified plant-based beverage (1 cup)	124
Arctic char (75g)	112
Milk (1 cup)	104
Orange juice, fortified with vitamin D (1/2 cup)	50

Source: Health Canada's Nutrient Value of Some Common Foods and Canadian Nutrient File



6 in 7

People with Risk Variant(s)

## Your Results

Genes	Markers
CYP2R1 GC	rs10741657 rs2282679
Risk Variant	Your Variants
Algorithm	GA GG

Your Risk

Elevated

only when vitamin D intake is low

## Recommendation

Since you possess one or more elevated risk variants, you are at an increased risk for low circulating vitamin D levels, so getting enough vitamin D is important. Aim for 1000 IU (25 mcg) vitamin D per day. This can help to maintain and/or improve your bone health, muscle and brain function, immunity, and heart health. Since it may be challenging to get enough vitamin D in the diet, supplementation may be beneficial. Do not exceed 2000 IU (50 mcg) per day without first having your blood levels of vitamin D assessed and monitored by a healthcare professional.

Consume 1000 IU (25 mcg) vitamin D daily.



1in5

People with Risk Variant

Your Results

Gene	Marker
ADORA2A	rs5751876
Risk Variant	Your Variant
TT	CT

Your Risk

Typical

Recommendation

Since you possess the CT or CC variant of the ADORA2A gene, you have a typical risk for an increase in feelings of anxiety after caffeine consumption. Aim to follow your DNA-based caffeine intake recommendations for the CYP1A2 gene included in your report.

Follow the recommendations provided by the CYP1A2 gene section of this report.

Caffeine

Anxiety

Many commonly consumed foods and beverages, such as coffee, tea, soft drinks and chocolate, as well as functional beverages such as energy drinks, contain caffeine. There are also hidden sources of caffeine found in pain medications, weight loss supplements, as well as chocolate or coffee-flavored beverages and food products. Caffeine is widely used to promote wakefulness and vigilance, reduce sleepiness and mitigate fatigue related to various shift-work occupations or travel across time zones. In the brain, the effects of caffeine are primarily due to its blocking action of adenosine, a neuromodulator that increases drowsiness and builds up over the day as bedtime approaches. Despite its widespread use, caffeine may cause anxiety in some people. A common variation in the ADORA2A gene contributes to the differences in subjective feelings of anxiety after caffeine ingestion,\* especially in those who are habitually low caffeine consumers.\*\*

\*Childs E et al. Association between ADORA2A and DRD2 polymorphisms and caffeine-induced anxiety. Neuropsychopharmacology. 2008 Nov;33(12):2791-800  
Aisene K et al. Association between A2a receptor gene polymorphisms and caffeine-induced anxiety. Neuropsychopharmacology. 2003 Sep;28(9):1694-702.  
\*\*Rogers RJ, et al. Association of the anxiogenic and alerting effects of caffeine with ADORA2A and ADORA1 polymorphisms and habitual level of caffeine consumption. Neuropsychopharmacology. 2010. (9):1973-1983.

ADORA2A

The ADORA2A (adenosine A2A receptor) gene encodes one of the main receptors for adenosine. Adenosine has many functions in the body, including promoting sleep and calmness and suppressing arousal. Caffeine blocks adenosine receptors, resulting in the stimulating effects of coffee, tea, chocolate and other caffeinated food products and supplements. Individuals who possess the TT variant of the ADORA2A gene are more sensitive to the stimulating effects of caffeine and experience greater increases in feelings of anxiety after caffeine intake than do individuals with either the CT or CC variant.

Cardiometabolic Health

Caffeine is the most widely consumed stimulant in the world and coffee is the most significant source of caffeine, with tea, soda and chocolate also contributing to intakes. Research has shown that caffeine can influence cardiovascular health. However, the reported effects of coffee on the cardiovascular system have been inconsistent and at times have appeared contradictory. Some studies reported a link between high coffee consumption and an elevated risk of high blood pressure and heart disease, while other studies have shown no effect or even a protective effect with moderate intake. Two landmark studies\* have now shown that the effect of coffee on cardiovascular disease depends on a variation in a gene called CYP1A2.

\*Cornelis et al. Coffee, CYP1A2 genotype, and risk of myocardial infarction. Journal of the American Medical Association. 2006;295:1135-41.  
Palatini P et al. CYP1A2 genotype modifies the association between coffee intake and the risk of hypertension. Journal of Hypertension. 2009;27:1594-1601.

CYP1A2

The CYP1A2 gene produces an enzyme called cytochrome P450 1A2 (CYP1A2), which is the main enzyme responsible for breaking down caffeine in the body. Variations in the CYP1A2 gene affect the rate at which caffeine is broken down, which determines the impact of caffeine on heart health. Individuals who possess the GA or AA variant of CYP1A2 break down caffeine more slowly and are at greater risk of high blood pressure and heart attack when caffeine intake is high. Those who have the GG variant actually have a lower risk of heart disease with moderate coffee consumption than those who consume no coffee at all.

Sources of Caffeine

	Amount (mg)
Coffee (1 cup)	100
Energy drinks (1 cup)	80
Espresso (1 shot)	85
Black tea (1 cup)	50
Green tea (1 cup)	45
Cola (1 can)	26
Chocolate, dark (40g)	27
Decaf coffee, espresso, tea (1 cup)	0-15
Herbal tea (1 cup)	0

Source: Canadian Nutrient File and USDA Nutrient Database



1in2

People with Risk Variant

Your Results

Gene	Marker
CYP1A2	rs2472300
Risk Variant	Your Variant
GA or AA	AA

Your Risk

Elevated  
only when caffeine intake is high

Recommendation

Since you possess the AA or GA variant of the CYP1A2 gene, there is an increased risk of high blood pressure and heart attack if consuming more than 200 mg of caffeine daily, which is approximately 2 small cups of coffee. Limit caffeine consumption to no more than 200 mg per day in order to reduce this risk. Caffeine occurs naturally in coffee, tea, cocoa, kola and guarana. It is also manufactured synthetically and added to cola, energy drinks, and certain over the counter cold remedies.

Limit caffeine intake to 200 mg/day.





Sample

This report is for information purposes only and is not intended to be used as medical advice. The advice in this report is not intended to treat, diagnose or cure any medical condition or disease. It is intended for general health and wellness purposes only and is not specific to clients who require a specific nutrition care plan based on a certain disease or condition. Clients with medical conditions should not change or stop their medications or medical care without consulting with their physician first. The advice in this report is not intended for children or for women who are pregnant or nursing. The Nutrigenomix Health and Wellness panel has not been cleared or approved by the United States Food and Drug Administration. If you have any questions, please ask your healthcare provider or contact us at [info@nutrigenomix.com](mailto:info@nutrigenomix.com). For Terms of Use and Privacy information please visit our website at [www.nutrigenomix.com](http://www.nutrigenomix.com).

© Copyright 2023 Nutrigenomix Inc. All rights reserved.



TO LEARN MORE ABOUT  
NUTRIGENOMIX® CONTACT:  
[info@nutrigenomix.com](mailto:info@nutrigenomix.com)



NUTRIGENOMIX<sup>®</sup>

© COPYRIGHT 2023 NUTRIGENOMIX INC.  
ALL RIGHTS RESERVED.

PERSONALIZED SPORT  
NUTRITION & PERFORMANCE  
REPORT



Hello Caroline:

Nutrigenomix is pleased to provide you with your Personalized Sport Nutrition and Performance Report based on your individual genetic profile. Your recommendations are based on the most current evidence-based scientific research that has been published in peer-reviewed journals and reviewed by our team of world-renowned experts in the field of nutrigenomics.

Our laboratory has used state-of-the-art genetic testing procedures to analyze your DNA sample. We examined your genetic code to determine how your genes can influence recommendations related to weight management, body composition, cardiometabolic health, food intolerances, eating habits, various performance-related elements and injury risk. Based on these results, we developed a series of nutrition and performance-related recommendations that are aligned with your genetic profile and gathered additional genetic insights for you and your healthcare provider to consider. As new discoveries in the field of nutrigenomics are made, you will have the opportunity to access this information to further fine-tune your personalized nutrition and training plan.

You and your healthcare or fitness professional can now use the personalized recommendations contained in this report to help you optimize dietary and other performance-related strategies for achieving athletic excellence. You can create a plan to maximize your genetic potential to give you an edge above the competition by starting to *eat according to your genes!*



Ahmed El-Sohemy, PhD  
Chief Scientific Officer



# The Science Behind Nutrigenomix

*One man's food is another man's poison – Lucretius*

Nutrition is a key factor that contributes to success in sport. The foods, fluids and supplements you choose in training and competition will impact your performance, adaptations to training, body composition, and risk of illness or injury. Whether you are a weekend warrior or an Olympian, in competitive sports an athlete's nutritional strategies are vital to athletic success. Dietary and supplement strategies in both training and competition should be individually assessed and guided. Knowing about your genes and following tailored sport nutrition guidelines aligned with your personal genetic profile can assist you in optimizing athletic performance while decreasing injury risk.

Over the past decade, there has been growing recognition of the importance of how genes influence our nutritional status, which directly impacts our health and performance. The human genome consists of about 25,000 genes and virtually all can exist in different forms. The variations in our genes make us unique from one another. Genetic variation determines not only the color of our eyes and hair, but how we metabolize and utilize the foods, nutrients and supplements we ingest. Nutrigenomics is the science that applies genomic information and advanced technologies to uncover the relationship between genes, nutrition and human health. Sport Nutrigenomics takes this a step further and aims to help athletes gain an edge in training and competition by maximizing their genetic potential. The term nutrigenomics refers to both the study of how the food, beverages and supplements we consume affects our genes and how our genes can influence our body's response to what we consume.

Different versions of a gene can make us respond differently to certain components in food such as the lactose in milk, the gluten in bread, the caffeine in coffee, along with the carbohydrates, fats, proteins, vitamins and minerals found in various foods. We are all familiar with people who are lactose intolerant or cannot eat gluten. These differences between individuals can be explained by gene variations within the population. Through decades of science and research we have learned that genetic variations in the population and between individuals affect a wide variety of responses to key components of the human diet. For instance, some individuals may gain health, body composition or performance benefits from limiting their consumption of caffeine or saturated fat or increasing their intake of vitamin D or protein, while others can follow the general recommendation for either or both. Your best performance diet depends on the specific variants you have for these

nutrient-related genes. Understanding your genetic profile and its implications on your unique response to the foods, supplements and beverages you consume, will provide you with the tools needed to adopt the best dietary strategies for optimal athletic performance.

The science of how specific genes change how we respond to dietary components enables us to use nutrition to its fullest potential to optimize athletic performance. These personalized diets can enhance an individual's nutritional status and empower them to better focus on the nutrition they need to support optimal health and performance. General dietary recommendations or the one-size-fits-all approach to nutritional advice will limit individuals from reaching their full genetic potential. By tailoring an athlete's nutritional needs to their genetic profile, the benefits of nutrition for optimal health and athletic performance can be maximized.



# Table of Contents

Summary of Results ..... 2

NUTRIENT METABOLISM

Vitamin A (Beta-Carotene) ..... 6

Vitamin B<sub>12</sub> ..... 7

Vitamin C ..... 8

Vitamin D ..... 9

Vitamin E ..... 10

Folate ..... 11

Choline ..... 12

Calcium ..... 13

Iron Overload ..... 14

Low Iron Status ..... 15

FOOD INTOLERANCES AND SENSITIVITIES

Lactose ..... 16

Gluten ..... 18

Caffeine and Anxiety ..... 20

CARDIOMETABOLIC HEALTH

Caffeine and Athletic Performance ..... 21

Whole Grains ..... 22

Sodium ..... 23

Omega-6 and Omega-3 Fat ..... 24

Physical Activity for Cardiometabolic Health ..... 25

WEIGHT MANAGEMENT AND BODY COMPOSITION

Physical Activity for Weight Loss ..... 26

Energy Balance ..... 27

Protein ..... 28

Total Fat ..... 29

Saturated Fat ..... 30

Saturated and Unsaturated Fat ..... 31

Monounsaturated Fat ..... 32

EATING HABITS

Fat Taste Perception ..... 33

Sugar Preference ..... 34

Eating between Meals ..... 35

EXERCISE PHYSIOLOGY, FITNESS AND INJURY RISK

Motivation to Exercise ..... 36

Exercise Behavior ..... 37

Power and Strength ..... 38

Endurance ..... 39

Muscle Damage ..... 40

Pain ..... 41

Bone Mass ..... 42

Achilles Tendon Injury ..... 43

Additional Genetic Insights for Health and Wellness ..... 44

International Science Advisory Board ..... 46



# Summary of Results

## Nutrient Metabolism

Dietary Component	Gene, rs Number	Risk Variant	Your Variant	Your Risk	Recommendations
Vitamin A	BCMO1, rs11645428	GG	GG	Elevated	Focus on consuming preformed sources of vitamin A.
Vitamin B <sub>12</sub>	FUT2, rs601338	GG or GA	GA	Elevated	Focus on consuming bioavailable sources of vitamin B12.
Vitamin C	GSTT1, rs2266633	Del	Ins	Typical	Meet the RDA for vitamin C daily.
Vitamin D	CYP2R1, rs10741657	Algorithm	GA	Elevated	Consume 1000 IU (25 mcg) vitamin D daily.
	GC, rs2282679		GG		
Vitamin E	COMT, rs4680	GG	GA	Typical	Meet the RDA for vitamin E daily from food sources rich in vitamin E.
Folate	MTHFR, rs1801133	CT or TT	TT	Elevated	Meet the RDA for folate daily.
Choline	MTHFD1, rs2236225	Algorithm	GG	Elevated	Meet the Adequate Intake (AI) level for choline daily.
	PEMT, rs12325817		CG		
Calcium	GC, rs7041	Algorithm	TG	Elevated	Consume 1200 mg of calcium daily.
	GC, rs4588		CA		
Iron Overload	SLC17A1, rs17342717	Algorithm	CC	Low	Follow the recommendations provided in the Low Iron Status section.
	HFE, rs1800562		GG		
	HFE, rs1799945		CC		
Low Iron Status	TMPRSS6, rs4820268	Algorithm	GA	Elevated	Meet the RDA for iron and consume sources of vitamin C with iron-rich foods.
	TFR2, rs7385804		CA		
	TF, rs3811647		AA		

## Food Intolerances and Sensitivities

Dietary Component	Gene, rs Number	Risk Variant	Your Variant	Your Risk	Recommendations
Lactose	MCM6, rs4988235	CC or CT	CT	Slightly Elevated	Limit dairy intake if you experience gastrointestinal symptoms.
Gluten	HLA, rs2395182	Algorithm	GT	Medium	Medium risk for gluten intolerance.
	HLA, rs7775228		TT		
	HLA, rs2187668		CT		
	HLA, rs4639334		GG		
	HLA, rs7454108		TT		
	HLA, rs4713586		AA		
Caffeine	ADORA2A, rs5751876	TT	CT	Typical	Follow the recommendations provided by the CYP1A2 gene section of this report.

## Cardiometabolic Health

Dietary Component	Gene, rs Number	Risk/Response Variant	Your Variant	Your Risk/Response	Recommendations
Caffeine	CYP1A2, rs2472300	GA or AA	AA	Elevated	Monitor performance after caffeine intake, and limit intake to 200 mg/day.
Whole Grains	TCF7L2, rs12255372	TT or GT	GT	Elevated	Consume most grain products as whole grains.
Sodium	ACE, rs4343	GA or AA	AA	Elevated	Limit sodium intake to the Adequate Intake level.
Omega-6 and Omega-3 Fat	FADS1, rs174547	CC or CT	TT	Typical	Meet the RDA for omega-6 LA fat and omega-3 ALA fat.
Physical Activity	LIPC, rs1800588	TT or CT	CT	Enhanced	Aim for 150 to 300 min/week of cardio and at least 2 days/week of muscle-strengthening activities.



1in5

People with Risk Variant

## Your Results

Gene	Marker
GSTT1	Ins or Del
Risk Variant	Your Variant
Del	Ins

Your Risk

Typical

## Recommendation

Since you possess the Ins variant of GSTT1, there is no increased risk of vitamin C deficiency, and supplementation is discouraged, as it may be potentially counter-productive to training. Therefore, following the RDA guidelines for vitamin C is sufficient for you. The RDA for vitamin C is 75 mg per day for women and 90 mg per day for men. Smokers require an additional 35 mg per day. Citrus fruits and juices, strawberries, tomatoes, red and green peppers, broccoli, potatoes, spinach, cauliflower and cabbage are examples of foods that are good sources of vitamin C.

Meet the RDA for vitamin C daily.

# Vitamin C

Vitamin C is an essential nutrient and a powerful antioxidant. This water soluble vitamin can aid in the reduction of exercise-induced free-radical production, which can damage healthy tissues and cause premature fatigue during exercise. Vitamin C also aids in the absorption of non-heme (plant) iron, supports immune function and is required for the formation of collagen, a protein used to make skin, connective tissue, and blood vessels, along with supporting bone and tissue repair. However, too much vitamin C as a supplement may interfere with an athlete's adaptations to exercise training. Research has shown that the amount of vitamin C absorbed into the blood can differ between people even when the same amount is consumed. Some people do not process vitamin C from the diet as efficiently as others and are at a greater risk of vitamin C deficiency. Two recent studies\* have shown that the ability to process vitamin C efficiently depends on a gene called GSTT1.

\*Cahill LE et al. Functional genetic variants of glutathione S-transferase protect against serum ascorbic acid deficiency. American Journal of Clinical Nutrition. 2009;90:1411-7.  
Horska A et al. Vitamin C levels in blood are influenced by polymorphisms in glutathione S-transferases. European Journal of Nutrition. 2011;50:437-46.

## GSTT1

The GSTT1 gene produces a protein for the glutathione S-transferase enzyme family. These enzymes play a key role in the utilization of vitamin C. The GSTT1 gene can exist in one of two forms. The insertion ("Ins") form is considered functional while the deletion ("Del") form is not functional. The different versions of this gene influence the way vitamin C is utilized in the body. A deletion version of the gene results in a reduced ability to process vitamin C. This means that people who possess the deletion version (Del) will have lower blood levels of vitamin C at a given level of vitamin C intake compared to people who possess the insertion version (Ins) of the gene.

## Sources of Vitamin C

	Amount (mg)
Red pepper (1 pepper)	216
Strawberries (1 cup)	96
Pineapple (1 cup)	92
Brussels sprouts (1 cup)	90
Orange juice (1 cup)	86
Broccoli (1 cup)	82
Grapefruit (1 fruit)	78
Mango (1 fruit)	75
Kiwi (1 fruit)	70

Source: TACO (UNICAMP), Canadian Nutrient File and USDA Nutrient Database

# Vitamin D

Vitamin D is essential to calcium metabolism and increasing calcium absorption. Low levels of vitamin D are associated with decreased bone mineral density and an increased risk of stress fractures. Vitamin D also seems to play an important role in heart health, immune function, neuromuscular function, and may help in muscle growth and recovery after damaging exercise. Vitamin D can be synthesized by the skin from UV light or it can be obtained from the diet. Vitamin D deficiency is diagnosed by measuring the most common form of vitamin D in the blood, which is 25-hydroxy vitamin D. Research shows that variations in the CYP2R1 and GC genes can affect your risk for low circulating 25-hydroxyvitamin D levels.\*

\*Slater NA et al. Genetic Variation in CYP2R1 and GC Genes Associated With Vitamin D Deficiency Status. Journal of Pharmacy Practice. 2015;1-6.  
Wang TJ et al. Common genetic determinants of vitamin D insufficiency: a genome-wide association study. Lancet. 2010;376:180-88.  
Wilson-Barnes SL et al. Effects of vitamin D on health outcomes and sporting performance: Implications for elite and recreational athletes. Nutrition Bulletin. Open Access <https://doi.org/10.1111/nbu.12413>

## CYP2R1 & GC

Vitamin D 25-hydroxylase is the key enzyme that activates vitamin D from its preformed type, which is obtained through sun exposure and the diet. This enzyme is encoded by the CYP2R1 gene and a variant of this gene has been associated with an increased risk of low circulating levels of vitamin D. The GC gene encodes the vitamin D-binding protein, which binds vitamin D and transports it to tissues. A variant in this gene has also been associated with an increased risk of low circulating levels of vitamin D.

## Sources of Vitamin D

	Amount (IU)
Sockeye salmon (75g)	680
Whitefish (75g)	448
Sardines, canned in oil (1/2 can)	254
Rainbow trout (75g)	192
Smoked salmon (40g)	168
Halibut (75g)	144
Fortified plant-based beverage (1 cup)	124
Arctic char (75g)	112
Milk (1 cup)	104
Orange juice, fortified with vitamin D (1/2 cup)	50

Source: Health Canada's Nutrient Value of Some Common Foods and Canadian Nutrient File



6in7

People with Risk Variant(s)

## Your Results

Genes	Markers
CYP2R1 GC	rs10741657 rs2282679
Risk Variant	Your Variants
Algorithm	GA GG

Your Risk

Elevated

only when vitamin D intake is low

## Recommendation

Since you possess one or more elevated risk variants, you are at an increased risk for low circulating vitamin D levels, so getting enough vitamin D is important. Aim for 1000 IU (25 mcg) vitamin D per day. This can help to maintain and/or improve your bone health, muscle and brain function, immunity, and heart health. Since it may be challenging to get enough vitamin D in the diet, supplementation may be beneficial. Do not exceed 2000 IU (50 mcg) per day without first having your blood levels of vitamin D assessed and monitored by a healthcare professional.

Consume 1000 IU (25 mcg) vitamin D daily.





1in5

People with Risk Variant

Your Results

Gene	Marker
ADORA2A	rs5751876
Risk Variant	Your Variant
TT	CT

Your Risk

Typical

Recommendation

Since you possess the CT or CC variant of the ADORA2A gene, you have a typical risk for an increase in feelings of anxiety after caffeine consumption. Aim to follow your DNA-based caffeine intake recommendations for the CYP1A2 gene included in your report.

Follow the recommendations provided by the CYP1A2 gene section of this report.

Caffeine

Anxiety

Many commonly consumed foods and beverages, such as coffee, tea, soft drinks and chocolate, as well as functional beverages such as energy drinks, contain caffeine. There are also hidden sources of caffeine found in pain medications, weight loss supplements, as well as chocolate or coffee-flavored beverages and food products. Caffeine is widely used to promote wakefulness and vigilance, reduce sleepiness and mitigate fatigue related to various shift-work occupations or athlete travel and competition across time zones. In the brain, the effects of caffeine are primarily due to its blocking action of adenosine, a neuromodulator that increases drowsiness and builds up over the day as bedtime approaches. Athletes that are more prone to general or performance anxiety may increase their risk for feelings of anxiety depending on their level of caffeine use and which variant of the ADORA2A gene they possess. A common variation in the ADORA2A gene contributes to the differences in subjective feelings of anxiety after caffeine ingestion\*, especially in those who are habitually low caffeine consumers.\*\*

\*Childs E et al. Association between ADORA2A and DRD2 polymorphisms and caffeine-induced anxiety. Neuropsychopharmacology. 2008 Nov;33(12):2791-800.  
Alsen K et al. Association between A2a receptor gene polymorphisms and caffeine-induced anxiety. Neuropsychopharmacology. 2003 Sep;28(9):1694-702.  
\*\*Rogers PJ, et al. Association of the anxiogenic and alerting effects of caffeine with ADORA2A and ADORA1 polymorphisms and habitual level of caffeine consumption. Neuropsychopharmacology. 2010. (9):1973-1983.

ADORA2A

The ADORA2A (adenosine A2A receptor) gene encodes one of the main receptors for adenosine. Adenosine has many functions in the body, including promoting sleep and calmness and suppressing arousal. Caffeine blocks adenosine receptors, resulting in the stimulating effects of coffee, tea, chocolate and other caffeinated food products and supplements. Individuals who possess the TT variant of the ADORA2A gene are more sensitive to the stimulating effects of caffeine and experience greater increases in feelings of anxiety after caffeine intake than do individuals with either the CT or CC variant.

Athletic Performance

Supplementation with caffeine has been shown to acutely enhance many aspects of exercise performance, including aerobic and muscular endurance, some aspects of anaerobic performance as well as a wide range of sport-specific actions. Although coffee is one of the most significant sources of caffeine, many athletes use caffeine supplements in the form of capsules, tablets, pre-workout formulas, energy drinks and caffeinated gels and chews. Research shows that 2-6 mg of caffeine per kg of body mass is beneficial for many but not all athletes and exercisers. Caffeine can influence cardiovascular health as well as athletic performance differently between individuals. Specifically, the cardiovascular health and endurance performance effects of caffeine depend on an individual's variant of the CYP1A2 gene.\*

\*Guest N et al. Caffeine, CYP1A2 Genotype, and Endurance Performance in Athletes. Med Sci Sports Exerc. 2018; 50:1570-1578.  
Womack CJ et al. The influence of a CYP1A2 polymorphism on the ergogenic effects of caffeine. J Int Soc Sports Nutr. 2012 Mar 15;9(1):7. doi: 10.1186/1550-2783-9-7.  
Cornelis et al. Coffee, CYP1A2 genotype, and risk of myocardial infarction. Journal of the American Medical Association. 2006;295:1135-41.

CYP1A2

The CYP1A2 gene produces an enzyme called cytochrome P450 1A2 (CYP1A2), which is the main enzyme responsible for breaking down caffeine in the body. Variations in the CYP1A2 gene affect the rate at which caffeine is broken down, which determines the impact of caffeine on cardiovascular health and athletic performance. Individuals who possess the GA or AA variant of CYP1A2 break down caffeine more slowly and are at greater risk of high blood pressure and heart attack when caffeine intake is high. These individuals do not appear to experience endurance performance benefits from caffeine. Furthermore, caffeine may diminish endurance performance in individuals with the AA variant. Those who have the GG variant actually have a lower risk of heart disease with moderate coffee consumption. Caffeine is also more effective at improving endurance performance in athletes with the GG variant.

Sources of Caffeine

	Amount (mg)
Coffee (1 cup)	100
Energy drinks (1 cup)	80
Espresso (1 shot)	85
Black tea (1 cup)	50
Green tea (1 cup)	45
Cola (1 can)	26
Chocolate, dark (40g)	27
Decaf coffee, espresso, tea (1 cup)	0-15
Herbal tea (1 cup)	0

Source: Canadian Nutrient File and USDA Nutrient Database



1in2

People with Risk Variant

Your Results

Gene	Marker
CYP1A2	rs2472300
Risk Variant	Your Variant
GA or AA	AA

Your Risk

Elevated  
only when caffeine intake is high

Recommendation

Since you possess the AA or GA variant of the CYP1A2 gene, you are a slow metabolizer of caffeine and are less likely to benefit from the endurance performance-enhancing effects of caffeine. Additionally, there is an increased risk of high blood pressure and heart attack if you are consuming more than 200 mg of caffeine per day. Limit caffeine consumption to no more than 200 mg per day in order to reduce your risk of heart disease. If you have the AA variant, monitor your response to caffeine in training and competition as caffeine may worsen your performance. Caffeine occurs naturally in coffee, tea, cocoa, kola and guarana. It is also manufactured synthetically and added to cola, energy drinks, and certain over the counter cold remedies.

Monitor performance after caffeine intake, and limit intake to 200 mg/day.

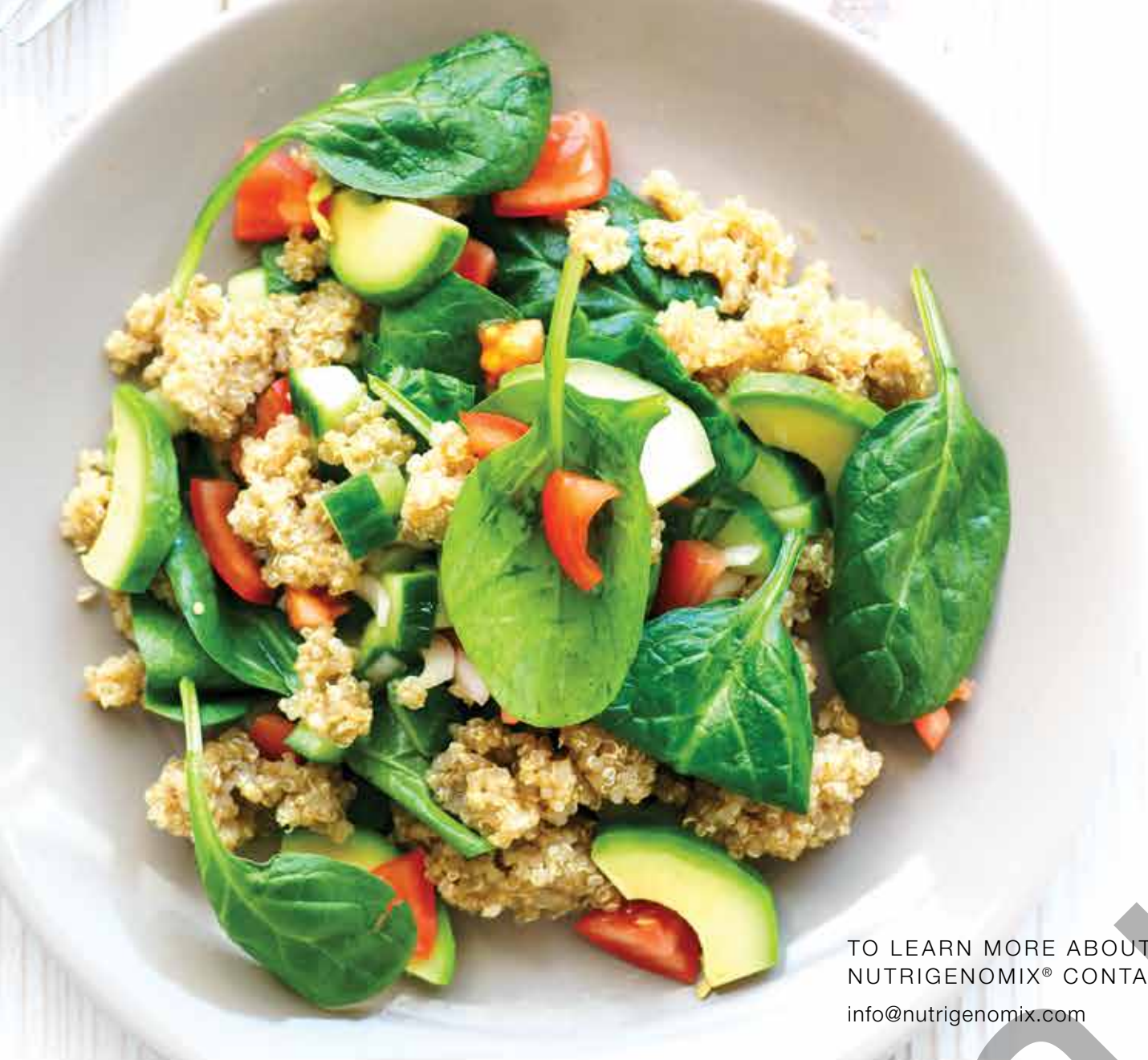


Sample

This report is for information purposes only and is not intended to be used as medical advice. The advice in this report is not intended to treat, diagnose or cure any medical condition or disease. It is intended for general health and wellness purposes only and is not specific to clients who require a specific nutrition care plan based on a certain disease or condition. Clients with medical conditions should not change or stop their medications or medical care without consulting with their physician first. The advice in this report is not intended for children or for women who are pregnant or nursing. The Nutrigenomix Sport Nutrition & Performance panel has not been cleared or approved by the United States Food and Drug Administration. If you have any questions, please ask your healthcare provider or contact us at [info@nutrigenomix.com](mailto:info@nutrigenomix.com). For Terms of Use and Privacy information please visit our website at [www.nutrigenomix.com](http://www.nutrigenomix.com).

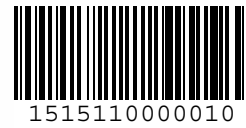
© Copyright 2023 Nutrigenomix Inc. All rights reserved.





PLANT  
BASED  
VEGAN  
FRIENDLY

TO LEARN MORE ABOUT  
NUTRIGENOMIX® CONTACT:  
[info@nutrigenomix.com](mailto:info@nutrigenomix.com)



NUTRIGENOMIX®

PLANT-BASED PERSONALISED NUTRITION & FITNESS REPORT



© COPYRIGHT 2023 NUTRIGENOMIX INC.  
ALL RIGHTS RESERVED.





Hello Caroline:

Nutrigenomix is pleased to provide you with your vegan friendly Plant-Based Personalised Nutrition and Fitness Report based on your individual genetic profile. Your recommendations are based on the most current evidence-based scientific research that has been published in peer-reviewed journals and reviewed by our team of world-renowned experts in the field of nutrigenomics.

Our laboratory has used state-of-the-art genetic testing procedures to analyse your DNA sample. We examined your genetic code to determine how your genes can influence recommendations related to weight management, body composition, cardiometabolic health, food intolerances, eating habits, fitness performance and injury risk. Based on these results, we developed a series of nutrition and fitness recommendations that are aligned with your genetic profile and plant-based lifestyle, and gathered additional genetic insights for you and your healthcare provider to consider.

You and your healthcare professional can now use the personalised recommendations contained in this report to help you achieve optimal nutritional status and fitness level. In this way, you can create a plan to maximise your genetic potential and overall health and start to *eat according to your genes!*

A handwritten signature in black ink, appearing to read 'Ahmed El-Soehmy', located below the main text block.

Ahmed El-Soehmy, PhD  
Chief Scientific Officer



# The Science Behind Nutrigenomix

*One man's food is another man's poison – Lucretius*

Nutrition is one of the most important lifestyle factors affecting your risk for developing certain diseases and has a significant impact on overall well-being. Over the past decade, there has been growing recognition of the importance of how genes influence our nutritional status, which directly impacts our health. The human genome consists of about 25,000 genes and virtually all can exist in different forms. The variations in our genes make us unique from one another. Genetic variation determines not only the colour of our eyes and hair, but how we metabolise and utilise the foods, nutrients and supplements we ingest. Nutrigenomics is the science that applies genomic information and advanced technologies to uncover the relationship between genes, nutrition and human health. The term nutrigenomics refers to both the study of how the food, beverages and supplements we consume affects our genes and how our genes can influence our body's response to what we consume.

Different versions of a gene can make us respond differently to certain components in food such as the gluten in bread or the caffeine in coffee, along with carbohydrates, fats, proteins vitamins and minerals found in various foods. We are all familiar with people who cannot tolerate gluten. These differences between individuals can be explained by gene variations within the population. Through science and research we have learned that genetic variations in the population and between individuals affect a wide variety of responses to key components of the human diet. For instance, some individuals may benefit from limiting their consumption of caffeine or increasing their intake of omega-3 fat, while others can follow the general recommendation for either or both. Your best diet depends on the specific variants you have for these nutrient-related genes. Understanding your genetic profile and its implications on your unique response to the foods, supplements and beverages you consume will provide you with the tools needed to make the best dietary choices.

The science of how specific genes change how we respond to dietary components enables us to use nutrition to its fullest potential to prevent, manage or improve various health issues. These personalised diets can optimise an individual's nutritional status and empower them to focus on preventing diet-related diseases or conditions. A healthy, balanced diet should provide enough energy and nutrients to support optimal health, reduce the risk of disease and maintain a healthy body weight. While general dietary recommendations might be prudent to follow, the one-size-fits-all approach to nutritional advice could limit some individuals from reaching their full potential for health and wellness. By tailoring one's nutritional needs to their genetic profile, the benefits of nutrition on health status can be maximised.



# Table of Contents

Summary of Results ..... 2

NUTRIENT METABOLISM

Vitamin A (Beta-Carotene) ..... 6

Vitamin B<sub>12</sub> ..... 7

Vitamin C ..... 8

Vitamin D ..... 9

Vitamin E ..... 10

Folate ..... 11

Choline ..... 12

Calcium ..... 13

Iron Overload ..... 14

Low Iron Status ..... 15

FOOD INTOLERANCES AND SENSITIVITIES

Lactose ..... 16

Gluten ..... 18

Caffeine and Anxiety ..... 20

CARDIOMETABOLIC HEALTH

Caffeine and Cardiometabolic Health ..... 21

Glycaemic Index ..... 22

Sodium ..... 23

Omega-6 and Omega-3 Fat ..... 24

Physical Activity for Cardiometabolic Health ..... 25

WEIGHT MANAGEMENT AND BODY COMPOSITION

Physical Activity for Weight Loss ..... 26

Energy Balance ..... 27

Protein ..... 28

Total Fat ..... 29

Saturated Fat ..... 30

Saturated and Unsaturated Fat ..... 31

Monounsaturated Fat ..... 32

EATING HABITS

Fat Taste Perception ..... 33

Sugar Preference ..... 34

Eating between Meals ..... 35

EXERCISE PHYSIOLOGY, FITNESS AND INJURY RISK

Motivation to Exercise ..... 36

Exercise Behaviour ..... 37

Power and Strength ..... 38

Endurance ..... 39

Muscle Damage ..... 40

Pain ..... 41

Bone Mass ..... 42

Achilles Tendon Injury ..... 43

Additional Genetic Insights for Health and Wellness ..... 44

International Science Advisory Board ..... 46



# Summary of Results

## Nutrient Metabolism

Dietary Component	Gene, rs Number	Risk Variant	Your Variant	Your Risk	Recommendations
Vitamin A	BCMO1, rs11645428	GG	GG	Elevated	Meet the RDA for vitamin A daily.
Vitamin B <sub>12</sub>	FUT2, rs601338	GG or GA	GA	Elevated	Meet the RDA for vitamin B12 daily.
Vitamin C	GSTT1, rs2266633	Del	Ins	Typical	Meet the RDA for vitamin C daily.
Vitamin D	CYP2R1, rs10741657	Algorithm	GA	Elevated	Consume 1000 IU (25 mcg) vitamin D daily.
	GC, rs2282679		GG		
Vitamin E	COMT, rs4680	GG	GA	Typical	Meet the RDA for vitamin E daily from food sources rich in vitamin E.
Folate	MTHFR, rs1801133	CT or TT	TT	Elevated	Meet the RDA for folate daily.
Choline	MTHFD1, rs2236225	Algorithm	GG	Elevated	Meet the Adequate Intake (AI) level for choline daily.
	PEMT, rs12325817		CG		
Calcium	GC, rs7041	Algorithm	TG	Elevated	Consume 1200 mg of calcium daily.
	GC, rs4588		CA		
Iron Overload	SLC17A1, rs17342717	Algorithm	CC	Low	Follow the recommendations provided in the Low Iron Status section.
	HFE, rs1800562		GG		
	HFE, rs1799945		CC		
Low Iron Status	TMPRSS6, rs4820268	Algorithm	GA	Elevated	Meet the RDA for iron and consume sources of vitamin C with iron-rich foods.
	TFR2, rs7385804		CA		
	TF, rs3811647		AA		

## Food Intolerances and Sensitivities

Dietary Component	Gene, rs Number	Risk Variant	Your Variant	Your Risk	Recommendations
Lactose	MCM6, rs4988235	CC or CT	CT	Slightly Elevated	You have a slightly elevated risk of experiencing lactose intolerance symptoms after consuming lactose.
Gluten	HLA, rs2395182	Algorithm	GT	Medium	Medium risk for gluten intolerance.
	HLA, rs7775228		TT		
	HLA, rs2187668		CT		
	HLA, rs4639334		GG		
	HLA, rs7454108		TT		
	HLA, rs4713586		AA		
Caffeine	ADORA2A, rs5751876	TT	CT	Typical	Follow the recommendations provided by the CYP1A2 gene section of this report.

## Cardiometabolic Health

Dietary Component	Gene, rs Number	Risk/Response Variant	Your Variant	Your Risk/Response	Recommendations
Caffeine	CYP1A2, rs2472300	GA or AA	AA	Elevated	Limit caffeine intake to 200 mg/day.
Glycaemic Index	TCF7L2, rs12255372	TT or GT	GT	Elevated	Consume most grain products as whole grains.
Sodium	ACE, rs4343	GA or AA	AA	Elevated	Limit sodium intake to the Adequate Intake level.
Omega-6 and Omega-3 Fat	FADS1, rs174547	CC or CT	TT	Typical	Meet the RDA for omega-6 LA fat and omega-3 ALA fat.
Physical Activity	LIPC, rs1800588	TT or CT	CT	Enhanced	Aim for 150 to 300 min/week of cardio and at least 2 days/week of muscle-strengthening activities.



1in5

People with Risk Variant

## Your Results

Gene	Marker
GSTT1	Ins or Del
Risk Variant	Your Variant
Del	Ins

Your Risk

Typical

## Recommendation

Since you possess the Ins variant of GSTT1, there is no increased risk of vitamin C deficiency. Therefore, following the RDA guidelines for vitamin C is sufficient for you. The RDA for vitamin C is 75 mg per day for women and 90 mg per day for men. Smokers require an additional 35 mg per day. Citrus fruits and juices, strawberries, tomatoes, red and green capsicums, broccoli, potatoes, spinach, cauliflower and cabbage are examples of foods that are good sources of vitamin C.

Meet the RDA for vitamin C daily.

# Vitamin C

Vitamin C is an essential nutrient and powerful antioxidant. Vitamin C also aids in the absorption of non-heme (plant) iron, and supports immune function and the formation of collagen, a protein used to make skin, connective tissue, and blood vessels, along with supporting bone and tissue repair. Low blood levels of vitamin C have been associated with an elevated risk of cardiovascular disease, type 2 diabetes and cancer. Research has shown that the amount of vitamin C absorbed into the blood can differ between people even when the same amount is consumed. Some people do not process vitamin C from the diet as efficiently as others and are at a greater risk of vitamin C deficiency. Studies have shown that the ability to process vitamin C efficiently depends on a gene called GSTT1.\*

\*Cahill LE et al. Functional genetic variants of glutathione S-transferase protect against serum ascorbic acid deficiency. American Journal of Clinical Nutrition. 2009;90:1411-7.  
Horska A et al. Vitamin C levels in blood are influenced by polymorphisms in glutathione S-transferases. European Journal of Nutrition. 2011;50:437-46.

## GSTT1

The GSTT1 gene produces a protein for the glutathione S-transferase enzyme family. These enzymes play a key role in the utilization of vitamin C. The GSTT1 gene can exist in one of two forms. The insertion ("Ins") form is considered functional while the deletion ("Del") form is not functional. The different versions of this gene influence the way vitamin C is utilised in the body. A deletion version of the gene results in a reduced ability to process vitamin C. This means that people who possess the deletion version (Del) will have lower blood levels of vitamin C at a given level of vitamin C intake compared to people who possess the insertion version (Ins) of the gene.

## Sources of Vitamin C

	Amount (mg)
Red capsicum (1 capsicum)	216
Strawberries (1 cup)	96
Pineapple (1 cup)	92
Brussels sprouts (1 cup)	90
Orange juice (1 cup)	86
Broccoli (1 cup)	82
Grapefruit (1 fruit)	78
Mango (1 fruit)	75
Kiwi (1 fruit)	70

Source: TACO (UNICAMP), Canadian Nutrient File and USDA Nutrient Database

# Vitamin D

Vitamin D is essential to calcium metabolism and promotes calcium absorption in the gut. Low levels of vitamin D are associated with decreased bone mineral density and an increased risk of fractures. Vitamin D also contributes to normal functions of most cells in the body. Vitamin D can be synthesised by the skin from UV light or it can be obtained from the diet. Low blood levels of vitamin D can result in weak, brittle bones, poor muscle function, and decreased immunity. Life-long vitamin D insufficiency has also been linked to accelerated cognitive decline, autoimmune disorders, neuro-degenerative diseases and cardiovascular disease. Vitamin D deficiency is diagnosed by measuring the most common form of vitamin D in the blood, which is 25-hydroxyvitamin D. Research shows that variations in the CYP2R1 and GC genes can affect your risk for low circulating 25-hydroxyvitamin D levels.\*

\*Slater NA et al. Genetic Variation in CYP2R1 and GC Genes Associated With Vitamin D Deficiency Status. Journal of Pharmacy Practice. 2015;1-6.  
Wang TJ et al. Common genetic determinants of vitamin D insufficiency: a genome-wide association study. Lancet. 2010;376:180-88.

## CYP2R1 & GC

Vitamin D 25-hydroxylase is the key enzyme that activates vitamin D from its pre-formed type, which is obtained through sun exposure and the diet. This enzyme is encoded by the CYP2R1 gene and a variant of this gene has been associated with an increased risk of low circulating levels of vitamin D. The GC gene encodes the vitamin D-binding protein, which binds vitamin D and transports it to tissues. A variant in this gene has also been associated with an increased risk of low circulating levels of vitamin D.

## Sources of Vitamin D

	Amount (IU)
Fortified soy beverage (1 cup)	124
Fortified oat, rice, or almond beverage (1 cup)	85
Fortified orange juice (1/2 cup)	50

Source: Health Canada's Nutrient Value of Some Common Foods and Canadian Nutrient File

6in7

People with Risk Variant(s)

## Your Results

Genes	Markers
CYP2R1 GC	rs10741657 rs2282679
Risk Variant	Your Variants
Algorithm	GA GG

Your Risk

Elevated

only when vitamin D intake is low

## Recommendation

Since you possess one or more elevated risk variants, you are at an increased risk for low circulating vitamin D levels, so getting enough vitamin D is important. Aim for 1000 IU (25 mcg) vitamin D per day. This can help to maintain and/or improve your bone health, muscle and brain function, immunity, and heart health. Since it may be challenging to get enough vitamin D in the diet, supplementation may be beneficial. Do not exceed 2000 IU (50 mcg) per day without first having your blood levels of vitamin D assessed and monitored by a healthcare professional.

Consume 1000 IU (25 mcg) vitamin D daily.





1in5

People with Risk Variant

Your Results

Gene	Marker
ADORA2A	rs5751876
Risk Variant	Your Variant
TT	CT

Your Risk

Typical

Recommendation

Since you possess the CT or CC variant of the ADORA2A gene, you have a typical risk for an increase in feelings of anxiety after caffeine consumption. Aim to follow your DNA-based caffeine intake recommendations for the CYP1A2 gene included in your report.

Follow the recommendations provided by the CYP1A2 gene section of this report.

Caffeine

Anxiety

Many commonly consumed foods and beverages, such as coffee, tea, soft drinks and vegan chocolate, as well as functional beverages such as energy drinks, contain caffeine. There are also hidden sources of caffeine found in pain medications, weight loss supplements, as well as chocolate or coffee-flavoured beverages and food products. Caffeine is widely used to promote wakefulness and vigilance, reduce sleepiness and mitigate fatigue related to various shift-work occupations or travel across time zones. In the brain, the effects of caffeine are primarily due to its blocking action of adenosine, a neuromodulator that increases drowsiness and builds up over the day as bedtime approaches. Despite its widespread use, caffeine may cause anxiety in some people. A common variation in the ADORA2A gene contributes to the differences in subjective feelings of anxiety after caffeine ingestion,\* especially in those who are habitually low caffeine consumers.\*\*

\*Childs E et al. Association between ADORA2A and DRD2 polymorphisms and caffeine-induced anxiety. Neuropsychopharmacology. 2008 Nov;33(12):2791-800  
Aisene K et al. Association between A2a receptor gene polymorphisms and caffeine-induced anxiety. Neuropsychopharmacology. 2003 Sep;28(9):1694-702.  
\*\*Rogers PJ, et al. Association of the anxiogenic and alerting effects of caffeine with ADORA2A and ADORA1 polymorphisms and habitual level of caffeine consumption. Neuropsychopharmacology. 2010. (9):1973-1983.

ADORA2A

The ADORA2A (adenosine A2A receptor) gene encodes one of the main receptors for adenosine. Adenosine has many functions in the body, including promoting sleep and calmness and suppressing arousal. Caffeine blocks adenosine receptors, resulting in the stimulating effects of coffee, tea, chocolate and other caffeinated food products and supplements. Individuals who possess the TT variant of the ADORA2A gene are more sensitive to the stimulating effects of caffeine and experience greater increases in feelings of anxiety after caffeine intake than do individuals with either the CT or CC variant.

Cardiometabolic Health

Caffeine is the most widely consumed stimulant in the world and coffee is the most significant source of caffeine, with tea, soda and vegan chocolate also contributing to intakes. Research has shown that caffeine can influence cardiovascular health. However, the reported effects of coffee on the cardiovascular system have been inconsistent and at times have appeared contradictory. Some studies reported a link between high coffee consumption and an elevated risk of high blood pressure and heart disease, while other studies have shown no effect or even a protective effect with moderate intake. Two landmark studies\* have now shown that the effect of coffee on cardiovascular disease depends on a variation in a gene called CYP1A2.

\*Cornelis et al. Coffee, CYP1A2 genotype, and risk of myocardial infarction. Journal of the American Medical Association. 2006;295:1135-41.  
Palatini P et al. CYP1A2 genotype modifies the association between coffee intake and the risk of hypertension. Journal of Hypertension. 2009;27:1594-1601.

CYP1A2

The CYP1A2 gene produces an enzyme called cytochrome P450 1A2 (CYP1A2), which is the main enzyme responsible for breaking down caffeine in the body. Variations in the CYP1A2 gene affect the rate at which caffeine is broken down, which determines the impact of caffeine on heart health. Individuals who possess the GA or AA variant of CYP1A2 break down caffeine more slowly and are at greater risk of high blood pressure and heart attack when caffeine intake is high. Those who have the GG variant actually have a lower risk of heart disease with moderate coffee consumption than those who consume no coffee at all.

Sources of Caffeine

	Amount (mg)
Coffee (1 cup)	100
Energy drinks (1 cup)	80
Espresso (1 shot)	85
Black tea (1 cup)	50
Green tea (1 cup)	45
Cola (1 can)	26
Vegan chocolate, dark (40g)	27
Decaf coffee, espresso, tea (1 cup)	0-15
Herbal tea (1 cup)	0

Source: Canadian Nutrient File and USDA Nutrient Database



1in2

People with Risk Variant

Your Results

Gene	Marker
CYP1A2	rs2472300
Risk Variant	Your Variant
GA or AA	AA

Your Risk

Elevated  
only when caffeine intake is high

Recommendation

Since you possess the AA or GA variant of the CYP1A2 gene, there is an increased risk of high blood pressure and heart attack if consuming more than 200 mg of caffeine daily, which is approximately 2 small cups of coffee. Limit caffeine consumption to no more than 200 mg per day in order to reduce this risk. Caffeine occurs naturally in coffee, tea, cocoa, kola and guarana. It is also manufactured synthetically and added to cola, energy drinks, and certain over the counter cold remedies.

Limit caffeine intake to 200 mg/day.



Sample

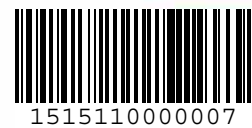
This report is for information purposes only and is not intended to be used as medical advice. The advice in this report is not intended to treat, diagnose or cure any medical condition or disease. It is intended for general health and wellness purposes only and is not specific to clients who require a specific nutrition care plan based on a certain disease or condition. Clients with medical conditions should not change or stop their medications or medical care without consulting with their physician first. The advice in this report is not intended for children or for women who are pregnant or nursing. The Nutrigenomix Plant-based Nutrition & Fitness panel has not been cleared or approved by the United States Food and Drug Administration. If you have any questions, please ask your healthcare provider or contact us at [info@nutrigenomix.com](mailto:info@nutrigenomix.com). For Terms of Use and Privacy information please visit our website at [www.nutrigenomix.com](http://www.nutrigenomix.com).

© Copyright 2023 Nutrigenomix Inc. All rights reserved.





TO LEARN MORE ABOUT  
NUTRIGENOMIX® CONTACT:  
[info@nutrigenomix.com](mailto:info@nutrigenomix.com)



NUTRIGENOMIX®



PERSONALIZED NUTRITION FOR FERTILITY REPORT





Hello Caroline:

Nutrigenomix is pleased to provide you with your Personalized Nutrition for Fertility Report, based on your individual genetic profile. Your recommendations are based on scientific research that has been published in peer-reviewed journals and reviewed by our team of world-renowned experts in the field of nutrigenomics.

Our laboratory has used state-of-the-art genetic testing procedures to analyze your DNA sample. We examined your genetic code to determine how your genes can influence nutrition recommendations related to fertility, through nutrient metabolism and requirements, cardiometabolic health, weight management, body composition, food intolerances, eating habits, and fitness performance. Based on these results, we have developed a series of nutrition and fitness recommendations that are aligned with your genetic profile and gathered additional genetic insights for you and your healthcare provider to consider. As new discoveries in the field of nutrigenomics are made, you will have the opportunity to access this information to further fine-tune your personalized nutrition and fitness plan.

You and your healthcare professional can now use the personalized recommendations contained in this report to help you achieve optimal nutritional status and enhance fertility. In this way, you can create a plan to maximize your reproductive potential and overall health and start to *eat according to your genes!*



Ahmed El-Sohemy, PhD  
Chief Scientific Officer

# The Science Behind Nutrigenomix

*One man's food is another man's poison – Lucretius*

Nearly 50 million couples worldwide experience infertility. Although the causes of infertility are often complicated and difficult to identify, health and lifestyle factors affect the ability of both men and women to reproduce. In women, older age, inability to produce ova (mature oocytes), and presence of endometriosis or polycystic ovarian syndrome (PCOS) can play a large role in infertility. Among men, sperm count and quality are variable and play an important role in successful fertilization. For both sexes, factors known to affect fertility include the viability of gametes (in women, oocytes, and in men, sperm), hormonal imbalances, presence of sexually transmitted infections (STI's), substance use, over- or under-weight, and past or present chronic disease. Clearly, many contributing factors must align for healthy fertilization and pregnancy to occur. One of these factors is nutrition. There is mounting evidence to support the relationship between various dietary components and fertility, but the effects of nutritional interventions on fertility remain unclear because of variations in response to those interventions across individuals.

Over the past decade, there has been growing recognition of the importance of how genes influence our nutritional status, which directly impacts our health. The human genome consists of about 25,000 genes and virtually all can exist in different forms. The variations in our genes make each person unique. Genetic variation determines not only the color of our eyes and hair, but how we metabolize and utilize the foods, beverages and dietary supplements we consume. The science of nutrigenomics applies genomic information and advanced technologies to uncover the relationship between genes, nutrition and health. The term nutrigenomics refers to both the study of how the food, beverages and supplements we consume affect our genes, and how our genes can influence our body's response to what we ingest. This response can affect virtually all bodily functions, including reproduction.

Different versions of a gene can cause us to respond differently to certain components in foods such as the lactose in milk, the gluten in bread, the caffeine in coffee. We may also respond differently to carbohydrates, fats, proteins, vitamins and minerals as well as certain dietary patterns based on our genetic make-up. We may be familiar with people who are lactose intolerant or cannot eat gluten. These dietary sensitivities that differ between individuals can usually be explained by gene variations within the population. Through science and research, we have learned that genetic variations in the population and between individuals affect a wide variety of responses to key components of the human diet. For instance, some individuals

may benefit from limiting their consumption of caffeine or increasing their intake of omega-3 fat, while others can follow the general recommendation for either or both. The optimal diet for you depends on the specific variants you have for these nutrient-related genes. Understanding your genetic profile and its implications on your unique response to the foods, supplements and beverages you consume will provide you with the tools needed to make the best dietary choices.

The science of nutrigenomics enables us to use nutrition to its fullest potential to improve health and optimize fertility. While general dietary recommendations might be prudent to follow, the one-size-fits-all approach to nutritional advice could limit some individuals from reaching their full fertility potential. By tailoring one's nutritional needs to their genetic profile, the benefits of nutrition on reproductive outcomes can be maximized.





# Table of Contents

Summary of Results ..... 2

NUTRIENT METABOLISM

Vitamin A (Beta-Carotene) ..... 6

Vitamin B<sub>12</sub> ..... 7

Vitamin C ..... 8

Vitamin D ..... 9

Vitamin E ..... 10

Folate ..... 11

Choline ..... 12

Calcium ..... 13

Iron Overload ..... 14

Low Iron Status ..... 15

FOOD INTOLERANCES AND SENSITIVITIES

Lactose ..... 16

Gluten ..... 18

Caffeine and Anxiety ..... 20

CARDIOMETABOLIC HEALTH

Caffeine and Cardiometabolic Health ..... 21

Whole Grains ..... 22

Sodium ..... 23

Omega-6 and Omega-3 Fat ..... 24

Physical Activity for Cardiometabolic Health ..... 25

WEIGHT MANAGEMENT AND BODY COMPOSITION

Physical Activity for Weight Loss ..... 26

Energy Balance ..... 27

Protein ..... 28

Total Fat ..... 29

Saturated Fat ..... 30

Saturated and Unsaturated Fat ..... 31

Monounsaturated Fat ..... 32

EATING HABITS

Fat Taste Perception ..... 33

Sugar Preference ..... 34

Eating between Meals ..... 35

EXERCISE PHYSIOLOGY, FITNESS AND INJURY RISK

Motivation to Exercise ..... 36

Exercise Behavior ..... 37

Power and Strength ..... 38

Endurance ..... 39

Muscle Damage ..... 40

Pain ..... 41

Bone Mass ..... 42

Achilles Tendon Injury ..... 43

Additional Genetic Insights for Health and Wellness ..... 44

International Science Advisory Board ..... 46

# Summary of Results

## Nutrient Metabolism

Dietary Component	Gene, rs Number	Risk Variant	Your Variant	Your Risk	Recommendations
Vitamin A	BCMO1, rs11645428	GG	GG	Elevated	Focus on consuming preformed sources of vitamin A to meet the RDA. Do not exceed 3000 mcg RAE per day.
Vitamin B <sub>12</sub>	FUT2, rs601338	GG or GA	GA	Elevated	Focus on consuming bioavailable sources of vitamin B12.
Vitamin C	GSTT1, rs2266633	Del	Ins	Typical	Meet the RDA for vitamin C daily.
Vitamin D	CYP2R1, rs10741657	Algorithm	GA	Elevated	Consume 1000 IU (25 mcg) vitamin D daily.
	GC, rs2282679		GG		
Vitamin E	COMT, rs4680	GG	GA	Typical	Meet the RDA for vitamin E daily from food sources rich in vitamin E.
Folate	MTHFR, rs1801133	CT or TT	TT	Elevated	Meet the RDA for folate daily. If you are pregnant, consume a 400 mcg folic acid supplement daily.
Choline	MTHFD1, rs2236225	Algorithm	GG	Elevated	Meet the Adequate Intake (AI) level for choline daily.
	PEMT, rs12325817		CG		
Calcium	GC, rs7041	Algorithm	TG	Elevated	Consume 1200 mg of calcium daily.
	GC, rs4588		CA		
Iron Overload	SLC17A1, rs17342717	Algorithm	CC	Low	Follow the recommendations provided in the Low Iron Status section.
	HFE, rs1800562		GG		
	HFE, rs1799945		CC		
Low Iron Status	TMPRSS6, rs4820268	Algorithm	GA	Elevated	Meet the RDA for iron and consume sources of vitamin C with iron-rich foods. If you are pregnant, consume a 16-20 mg iron supplement each day.
	TFR2, rs7385804		CA		
	TF, rs3811647		AA		

## Food Intolerances and Sensitivities

Dietary Component	Gene, rs Number	Risk Variant	Your Variant	Your Risk	Recommendations
Lactose	MCM6, rs4988235	CC or CT	CT	Slightly Elevated	Limit dairy intake if you experience gastrointestinal symptoms.
Gluten	HLA, rs2395182	Algorithm	GT	Medium	Medium risk for gluten intolerance.
	HLA, rs7775228		TT		
	HLA, rs2187668		CT		
	HLA, rs4639334		GG		
	HLA, rs7454108		TT		
	HLA, rs4713586		AA		
Caffeine	ADORA2A, rs5751876	TT	CT	Typical	Follow the recommendations provided by the CYP1A2 gene section of this report.

## Cardiometabolic Health

Dietary Component	Gene, rs Number	Risk/Response Variant	Your Variant	Your Risk/Response	Recommendations
Caffeine	CYP1A2, rs2472300	GA or AA	AA	Elevated	Limit caffeine consumption to 100 mg/day.
Whole Grains	TCF7L2, rs12255372	TT or GT	GT	Elevated	Consume most grain products as whole grains.
Sodium	ACE, rs4343	GA or AA	AA	Elevated	Limit sodium intake to the Adequate Intake level.
Omega-6 and Omega-3 Fat	FADS1, rs174547	CC or CT	TT	Typical	Meet the RDA for omega-6 LA fat and omega-3 ALA fat.
Physical Activity	LIPC, rs1800588	TT or CT	CT	Enhanced	Aim for 150 min/week of cardio and at least 2 days/week of muscle-strengthening activities.





1 in 5

People with Risk Variant

## Your Results

Gene	Marker
GSTT1	Ins or Del
Risk Variant	Your Variant
Del	Ins

Your Risk

Typical

## Recommendation

Since you possess the Ins variant of GSTT1, there is no increased risk of vitamin C deficiency. Therefore, following the RDA guidelines for vitamin C is sufficient for you. The RDA for vitamin C is 75 mg per day for women who are not pregnant (85 mg per day for pregnant women), and 90 mg per day for men. Smokers require an additional 35 mg per day. Citrus fruits and juices, strawberries, tomatoes, red and green peppers, broccoli, potatoes, spinach, cauliflower and cabbage are examples of foods that are good sources of vitamin C. Vitamin C can also be taken in supplement form and is found in most multivitamins and prenatal vitamins. However, consuming vitamin C from natural food sources is preferable.

Meet the RDA for vitamin C daily.

# Vitamin C

Vitamin C is a powerful antioxidant. Antioxidants play a key role in reproduction. Both sperm and oocytes are vulnerable to oxidative stress. Therefore, gonads require antioxidants for optimal fertility. In fact, as much as 10 times the amount of vitamin C is present in semen and follicular fluid as in the remainder of the body.\* In women, higher intake of vitamin C may reduce time to establish pregnancy.\*\* Vitamin C also aids in the absorption of non-heme (plant) iron and supports immune function, both of which are required for healthy reproductive function. Research has shown that the amount of vitamin C absorbed into the blood can differ between people, even when the same quantity is consumed. Some people do not process vitamin C from the diet as efficiently as others, and they are at a greater risk of vitamin C deficiency. Studies have shown that the ability to process vitamin C efficiently depends on a gene called GSTT1.\*\*\*

\* Agarwal A et al. The role of antioxidant therapy in the treatment of male infertility. Human Fertility. 2010;13(4):217-225.  
\*\* Ruder E, Hartman T, Reindollar R, Goldman M. Female dietary antioxidant intake and time to pregnancy among couples treated for unexplained infertility. Fertility and Sterility. 2014;101(3):759-766.  
\*\*\* Cahill LE et al. Functional genetic variants of glutathione S-transferase protect against serum ascorbic acid deficiency. American Journal of Clinical Nutrition. 2009;90:1411-7.  
Horska A et al. Vitamin C levels in blood are influenced by polymorphisms in glutathione S-transferases. European Journal of Nutrition. 2011;50:437-46.

## GSTT1

The GSTT1 gene produces a protein for the glutathione S-transferase enzyme family. These enzymes play a key role in the utilization of vitamin C. The GSTT1 gene can exist in one of two forms. The insertion ("Ins") form is considered functional while the deletion ("Del") form is not functional. The different versions of this gene influence the way vitamin C is utilized in the body. A deletion version of the gene results in a reduced ability to process vitamin C. This means that people who possess the deletion version (Del) will have lower blood levels of vitamin C at a given level of vitamin C intake compared to people who possess the insertion version (Ins) of the gene.

## Sources of Vitamin C

	Amount (mg)
Red pepper (1 pepper)	216
Strawberries (1 cup)	96
Pineapple (1 cup)	92
Brussels sprouts (1 cup)	90
Orange juice (1 cup)	86
Broccoli (1 cup)	82
Grapefruit (1 fruit)	78
Mango (1 fruit)	75
Kiwi (1 fruit)	70

Source: TACO (UNICAMP), Canadian Nutrient File and USDA Nutrient Database

# Vitamin D

Vitamin D can be synthesized by the skin from UV light or it can be obtained from the diet, and it plays an important role in fertility and reproduction. Vitamin D is essential for calcium metabolism and promotes calcium absorption in the gut, which is required for fertilization as described in the Calcium section of this report. Higher levels of vitamin D been linked to higher in vitro fertilization (IVF) success rates and contribute to a healthy immune system and reduced risk for endometriosis, both of which impact embryo implantation in the endometrium. Vitamin D deficiency has been linked to higher risk of spontaneous abortion during the first trimester.\* In men, vitamin D promotes sperm motility and viability.\*\* Low blood levels of vitamin D can negatively impact immune function and, in turn, fertility. Vitamin D deficiency is diagnosed by measuring the most common form of vitamin D in the blood, which is 25-hydroxyvitamin D. Research shows that variations in the CYP2R1 and GC genes can affect your risk for low circulating 25-hydroxyvitamin D levels.\*\*\*

\* Slater NA et al. Genetic Variation in CYP2R1 and GC Genes Associated With Vitamin D Deficiency Status. Journal of Pharmacy Practice. 2015:1-6.  
Hou W, Yan X, Bai C, Zhang X, Hui L, Yu X. Decreased serum vitamin D levels in early spontaneous pregnancy loss. European Journal of Clinical Nutrition. 2016;70(9):1004-1008.  
\*\* Blomberg Jensen M et al. Vitamin D is positively associated with sperm motility and increases intracellular calcium in human spermatozoa. Human Reproduction. 2011;26(6):1307-1317.  
\*\*\* Wang TJ et al. Common genetic determinants of vitamin D insufficiency: a genome-wide association study. Lancet. 2010;376(9736):180-88.

## CYP2R1 & GC

Vitamin D 25-hydroxylase is the key enzyme that activates vitamin D from its preformed type, which is obtained through sun exposure and the diet. This enzyme is encoded by the CYP2R1 gene and a variant of this gene has been associated with an increased risk of low circulating levels of vitamin D. The GC gene encodes the vitamin D-binding protein, which binds vitamin D and transports it to tissues, including the endometrium and testes. A variant in this gene has also been associated with an increased risk of low circulating levels of vitamin D.

## Sources of Vitamin D

	Amount (IU)
Sockeye salmon (75g)	680
Whitefish (75g)	448
Sardines, canned in oil (1/2 can)	254
Rainbow trout (75g)	192
Smoked salmon (40g)	168
Halibut (75g)	144
Fortified plant-based beverage (1 cup)	124
Arctic char (75g)	112
Milk (1 cup)	104
Orange juice, fortified with vitamin D (1/2 cup)	50

Source: Health Canada's Nutrient Value of Some Common Foods and Canadian Nutrient File



6 in 7

People with Risk Variant(s)

## Your Results

Genes	Markers
CYP2R1 GC	rs10741657 rs2282679
Risk Variant	Your Variants
Algorithm	GA GG

Your Risk

Elevated

only when vitamin D intake is low

## Recommendation

Since you possess one or more elevated risk variants, you are at an increased risk for low circulating vitamin D levels, so getting enough vitamin D is important. Aim for 1000 IU (25 mcg) vitamin D per day. This can help to maintain and/or improve your likelihood of conceiving by enhancing calcium absorption and metabolism, immune function, and sperm or oocyte viability. Since it may be challenging to get enough vitamin D in the diet, supplementation may be beneficial. Do not exceed 2000 IU (50 mcg) per day without first having your blood levels of vitamin D assessed and monitored by a healthcare professional.

Consume 1000 IU (25 mcg) vitamin D daily.





1in5

People with Risk Variant

Your Results

Gene	Marker
ADORA2A	rs5751876
Risk Variant	Your Variant
TT	CT

Your Risk

Typical

Recommendation

Since you possess the CT or CC variant of the ADORA2A gene, you have a typical risk for an increase in feelings of anxiety after caffeine consumption. Aim to follow your DNA-based caffeine intake recommendations for the CYP1A2 gene included in your report.

Follow the recommendations provided by the CYP1A2 gene section of this report.

Caffeine

Anxiety

Many commonly consumed foods and beverages, such as coffee, tea, soft drinks and chocolate, as well as functional beverages such as energy drinks, contain caffeine. There are also hidden sources of caffeine found in pain medications, weight loss supplements, as well as chocolate or coffee flavored beverages and food products. Caffeine is widely used to promote wakefulness and vigilance, reduce sleepiness and mitigate fatigue related to various shift-work occupations or travel across time zones. However, caffeine consumption can also have an impact on fertility and risk of pregnancy complications. In the brain, the effects of caffeine are primarily due to its blocking action of adenosine, a neuromodulator that increases drowsiness and builds up over the day as bedtime approaches. Despite its widespread use, caffeine may cause anxiety and restlessness in some people. A common variation in the ADORA2A gene contributes to the differences in subjective feelings of anxiety after caffeine ingestion,\* especially in those who are habitually low caffeine consumers.\*\*

\*Childs E et al. Association between ADORA2A and DRD2 polymorphisms and caffeine-induced anxiety. Neuropsychopharmacology. 2008 Nov;33(12):2791-800  
Alsen K et al. Association between A2a receptor gene polymorphisms and caffeine-induced anxiety. Neuropsychopharmacology. 2003 Sep;28(9):1694-702.  
\*\*Rogers PJ, et al. Association of the anxiogenic and alerting effects of caffeine with ADORA2A and ADORA1 polymorphisms and habitual level of caffeine consumption. Neuropsychopharmacology. 2010. (9):1973-1983.

ADORA2A

The ADORA2A (adenosine A2A receptor) gene encodes one of the main receptors for adenosine. Adenosine has many functions in the body, including promoting sleep and calmness and suppressing arousal. Caffeine blocks adenosine receptors, resulting in the stimulating effects of coffee, tea, chocolate and other caffeinated food products and supplements. Individuals who possess the TT variant of the ADORA2A gene are more sensitive to the stimulating effects of caffeine and experience greater increases in feelings of anxiety after caffeine intake than do individuals with either the CT or CC variant.

Cardiometabolic Health

Caffeine is the most widely consumed stimulant in the world and coffee is the most significant source of caffeine, with tea, soda and chocolate also contributing to intakes. Research has shown a link between caffeine and fertility, with high coffee consumption being associated with an elevated risk of suboptimal sperm motility, delayed conception, infertility, and poor assisted reproductive therapy outcomes.\* Research shows that an individual's caffeine metabolizing capability, and cardiovascular health associated with coffee consumption, depends on a variation in a gene called CYP1A2.\*\*

\*Cornelis et al. Coffee, CYP1A2 genotype, and risk of myocardial infarction. Journal of the American Medical Association. 2006;295:1135-41.  
Palatini P et al. CYP1A2 genotype modifies the association between coffee intake and the risk of hypertension. Journal of Hypertension. 2009;27:1594-1601.  
\*\*Minelli A, Bellezza I. Methylxanthines and reproduction. Handb Exp Pharmacol. 2011;200:349-72.  
Palatini P, Benetti E, Mos L, Garavelli G, Mazzer A, Cozzio S, Fania C and Casiglia E. (2015). Association of coffee consumption and CYP1A2 polymorphism with risk of impaired fasting glucose in hypertensive patients. European Journal of Epidemiology. 30(3), pp.209-217.

CYP1A2

The CYP1A2 gene produces an enzyme called cytochrome P450 1A2 (CYP1A2), which is the main enzyme responsible for breaking down caffeine in the body. Variations in the CYP1A2 gene affect the rate at which caffeine is broken down. Individuals who possess the AA or GA variant of CYP1A2 break down caffeine more slowly. This may influence the way that caffeine affects reproductive functions and fertility, in comparison to individuals who possess the GG variant of the CYP1A2 gene. Those who have the GG variant actually have a lower risk of heart disease with moderate coffee consumption than those who consume no coffee at all.

Sources of Caffeine

	Amount (mg)
Coffee (1 cup)	100
Energy drinks (1 cup)	80
Espresso (1 shot)	85
Black tea (1 cup)	50
Green tea (1 cup)	45
Cola (1 can)	26
Chocolate, dark (40g)	27
Decaf coffee, espresso, tea (1 cup)	0-15
Herbal tea (1 cup)	0

Source: Canadian Nutrient File and USDA Nutrient Database



1in2

People with Risk Variant

Your Results

Gene	Marker
CYP1A2	rs2472300
Risk Variant	Your Variant
GA or AA	AA

Your Risk

Elevated  
only when caffeine intake is high

Recommendation

Since you possess the AA or GA variant of the CYP1A2 gene, you are considered a slow metabolizer of caffeine. Therefore, excessive caffeine consumption may incur hypertension or prediabetes, which can cause complications during pregnancy. Limit caffeine intake to 100 mg/day. Caffeine occurs naturally in coffee, tea, cocoa, kola and guarana. It is also manufactured synthetically and added to cola, energy drinks, and certain over the counter cold remedies.

Limit caffeine consumption to 100 mg/day.





Sample

This report is for information purposes only and is not intended to be used as medical advice. The advice in this report is not intended to treat, diagnose or cure any medical condition or disease. It is intended for general health and wellness purposes only and is not specific to clients who require a specific nutrition care plan based on a certain disease or condition. Clients with medical conditions should not change or stop their medications or medical care without consulting with their physician first. The advice in this report is not intended for children or for women who are pregnant or nursing. The Nutrigenomix Fertility panel has not been cleared or approved by the United States Food and Drug Administration. If you have any questions, please ask your healthcare provider or contact us at [info@nutrigenomix.com](mailto:info@nutrigenomix.com). For Terms of Use and Privacy information please visit our website at [www.nutrigenomix.com](http://www.nutrigenomix.com).

© Copyright 2023 Nutrigenomix Inc. All rights reserved.