



Retrospective Case Series on Biome Homoeoprophylaxis (HPx)

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Abstract

This retrospective case series analysed the short and long-term health outcomes of a novel Healthy Biome HPx Program and built homoeopathic clinical indications for each nosode used in the program. Insight into the remedy responses were obtained from the degree and nature of the individual's response to the nosode and their preexisting health profile. The program registered 65 families of which 11 participated in this study. Nine nosodes in 1M potency were given under the supervision of a certified HPx practitioner. One respondent had marked improvement of all health conditions; 55% responded with significant improvement of health and resolution of most issues, 18% reported a relapse of symptoms after six or seven months, 18% noted some improvement, and 9% did not experience any improvement in health. No adverse effects were reported. The findings indicate when the individual and their biome is in balance, marked improvements in wellbeing and vitality are experienced. This suggests that the sequential dosing of nosodes related to the microbiome has advantageous effects. The Healthy Biome HPx Program warrants further research to garner deeper understanding of the clinical indications and potential beneficial role each nosode plays in the health of the individual.

Keywords: microbiome, dysbiosis, bowel nosodes, homoeoprophylaxis, homeopathy

Introduction

The basis of human vitality arises from a healthy biome as does the vitality and functionality of every system in the body (Madhogaria, Bhowmik, and Kundu 2022). Poor diet,

pesticide-sprayed food, and overuse of antibiotics and similar medicines have far-reaching dysbiotic effects on human health (Ramirez et al. 2020). Most especially antibiotics are of concern in the health of infants when exposed during gestation or childbirth (Beharry et al. 2023). As mammals depend on lacto-fermenting bacteria in the gut, human health depends on maintaining a robust population of beneficial microbes. These bacteria play a crucial role in digestion and immune function, making their presence essential for well-being (Woychik 2024).

Commensal bacteria are not only responsible for maintaining the bioenergetics of the human body, but they also contribute to multiple functions within the human system including, but not limited to: creation of folate, B vitamins, and tryptophan essential for neurulation of the human foetus and activation of the glutathione pathway (detoxification); metabolism and digestive processes; regulation of the intestinal lining; hormone regulation; immune system function; neurotransmitter production and regulation; blood clotting; immune health; and are foundational to normal foetal and childhood development (Birch 2019, 71-77). Additionally, bacteria on the skin enables it to heal and prevent opportunistic infections from invasive species. Strategies such as probiotic supplementation, a healthy organic diet, and homoeopathic bowel nosodes have been proposed to support biome health. Nosodes are defined by the Food and Drug Administration's (FDA) Homoeopathic Pharmacopoeia of the United States (HPUS) as homoeopathic "attenuations" of pathological organs and/or tissues, causative agents, or disease products from infected individuals, such as discharges, excretions, and secretions (HPUS n.d.).

The gut flora itself appears to function like an endocrine organ where the short-chain fatty acids (SCFAs: acetic acid, lactic acid, etc.) and other compounds produced act like hormones, directing the functionality of multiple systems (Hampel and Starka 2020). Collectively, in health and disease, these communicate with the APUD (Amine Precursor Uptake and Decarboxylation) cell system via the Rhodopsin-like Guanine-Protein Coupled Receptor Sites (GPCPs) to affect not only the entire endocrine system within the body, but also to connect the being to nature and the infinite (Birch 2019, 36, Mandal and Tudu 2018). For example, GPCP receptor sites in the pineal gland are activated or suppressed by sunlight, cosmic and telluric influences, and mental and emotional stimuli. Finally, optimal immune health is maintained by the Microbiome Mucosal Immune Protection System (MMIPS). This mechanism provides a built-in feedback loop between microbiome influence on the Peyer's patch in the small intestine and T cells in the lungs which become activated to affect immune system responses relative to the state of dysbiosis in the intestines (Clancy 2024b). Accordingly, due to the complex relationship humans have with bacteria and enteroviruses, it is expected that optimising microbiome health with dysbiotic and commensal nosodes has the potential for comprehensive effects towards overall health.

Method

The Healthy Biome HPx Program consists of nine nosodes, all in 1M potencies, to be dosed once a week for nine weeks.

The program can be repeated as often as indicated to correct and maintain biotic health.

Through participant enrolment under the supervision of a certified HPx practitioner, and the evaluation of their program readiness through the Inclusion/Exclusion process, they were provided with the Biome HPx Kit and the All HPx Programs Booklet and included dosing table (Birch 2025). Upon completion participants were invited to complete an online survey of their experience.

Parameters of research

1. Consent to participate in the Health Biome HPx Program and the Retrospective Research Survey was obtained from all respondents.
2. All Free and Health Children International (FHCi) practitioners who oversee HPx programs in research are trained and certified in Ethics and Research on Human Subjects (HHS NIH Clinical Center n.d.-a).
3. Data protection: Publication of the data removed all Personal Health Information (PHI) from the survey except for the following:
 - a. age
 - b. gender
 - c. health outcomes
 - d. nosode responses
4. Control: No control group was used
5. Blinding: There was no blinding method built into the study
6. Standardisation of Treatment: All registrants were instructed to take the same sequence of doses. If needed, based on activation of symptom expression supportive remedies or additional doses were suggested.
7. Testing: No formal GI testing was included in the retrospective study, and there was no microbiome health profile measured before or after this HPx Program.

Table 1 has the schedule and order of nosodes provided to registrants. Instructions were to take a single dose of each nosode on Sundays in the order listed for nine consecutive weeks. Reasons for selecting these nosodes for this program: *Polio* (Enterovirus) – down-regulating

zonulin resulting in narrowing of the tight junction gap; *Streptococcinum A-G* (Streptococcal bacteria A-G strains) – commensal lacto-fermenting bacteria for mucus membrane integrity; *Staphylococcinum* (Staphylococcal bacteria) commensal lacto-fermenting bacteria for integrity of the skin; *Pneumococcinum* (Streptococcus pneumoniae) – commensal lacto-fermenting bacteria for integrity of the alveolar surface; *Gardnerella vaginalis* (Gardnerella bacteria) – commensal lacto-fermenting bacteria for vaginal lining integrity; *Candida albicans* (Candida albicans) – dysbiotic yeast of the skin, mucus membranes, and systemic; *Clostridium difficile* (Clostridium difficile) – dysbiotic bacteria of the intestines; *Poly Bowel* (compilation of dysbiotic bacteria) – invading the colon; *Lactobacillus* (Lactobacillus) – commensal lacto-fermenting bacteria for integrity and functionality of the intestinal lining.

Table 2 identifies the age, sex, and number of times the program was repeated. Of the 11 individuals, 2 males and 9 females were identified. The youngest respondent was in the 7-months to 3-year range (2-years old). There were 3 respondents in the age group 18-29 years of age, of which 2 repeated the program twice and 1 repeated three times. A total of 16 series of the program were noted counting for at least 144 doses taken.

Table 2 Age and sex of participants and number of times the program was repeated.

Age range	Age	Male	Female	Number of repetitions
0-6 months	0			
7 months-3 years	1	1		3
4-9 years	0			
10-17 years	0			
18-29 years	3		3	2, 2, 1
30-39 years	0			
40-49 years	1		1	2
50-59 years	3		3	1, 1, 1
60+ years	3	1	2	2, 1, 2
Total	11	2	2	

Table 1 Healthy Biome HPx Program dosing table: name of nosode, potency, and code on vial label

Dosing on Sunday	Remedy	Potency	Label	Date	Initials	Check: list responses Pg. 20-21
Week 1	<i>Polio</i>	1M	C-2			
Week 2	<i>Streptococcinum A-G</i>	1M	S-2			
Week 3	<i>Staphylococcinum</i>	1M	HHH-2			
Week 4	<i>Pneumococcinum</i>	1M	B-2			
Week 5	<i>Gardnerella vaginalis</i>	1M	JJ-2			
Week 6	<i>Candida albicans</i>	1M	JJJ-2			
Week 7	<i>Clostridium difficile</i>	1M	LLL-2			
Week 8	<i>Poly Bowel*</i>	1M	MMM-2			
Week 9	<i>Lactobacillus</i>	1M	NNN-2			

*Poly Bowel contains these bowel nosodes: *Sycotic co.* (Streptococcus faecalis), *Dysenteriae co.* (Shigella), *Mutabilis* (intermediary between Coli bacilli and Lactobacillus), *Gaertner* (Salmonella), *Proteus* (Enterobacteria), *Morgan* (non-lacto-fermenting bacteria).

Table 3 Health profiles of registrants before and after the Healthy Biome HPx Program

File number	Reasons for taking the Healthy Biome HPx Program?	Did the Healthy Biome HPx Program resolve any of the issues?	Please describe overall benefit	Any final comments on the Healthy Biome HPx Program	Were there any unexpected negative results?	Number of previous rounds of antibiotics
1.1	We as a full family were suffering from an imbalance in our biome, e.g. thrush, fungal infection on skin, irregular bowel movement etc. But when my youngest son was born, he had allergies which led to eczema and really bad inflammation all over the body, so I am mainly filling in this about his progress as the rest of us only did the program once and we are doing well after. He had significant improvement after the 2nd round but were instructed to repeat the program 3 times to secure the positive effects.	There is a marked difference. Conditions that were unrelated resolved with this program	Family is feeling much better. My son looks and behaves very much normal now before he was in agony with his skin inflamed and itchy all the time. He was extremely cranky and didn't have much appetite, he was being evaluated for rickets due to extremely low calcium levels. But now his appetite has increased drastically and he's very happy and more like a normal baby. He still has allergies, (90% better) but he has managed to introduce a lot more into the diet. He used to be afraid of food, now he loves eating and trying new foods. His calcium levels have gone up with the capacity to eat a wider range of food without aggravating any of the symptoms.	Overall, I cannot be grateful enough for this program as I have seen such a massive difference in my child's health and our overall family's health, too. I cannot recommend it enough for anyone suffering from similar experiences as we did. Thank you!		0
2.1	Better health and less sickness	There is a marked difference		No sickness		9-20
3.1	1. SIBO 2. GI issues 3. Stress	Conditions are worse with some improvement	No significant change.	Digestive issues have not been resolved. However, a few weeks after the regimen, I began having foul-smelling and soft stools with urgency and a complete system purge daily. This lasted 4-5 days and has recurred at least once a week.		20+
4.1	1. Bloating 2. Food allergies 3. History of IBS	Not at all	No benefit			20+
5.1	To test the program	Some improvement	Better overall			4-8
6.1	First pregnancy and wanted healthy microbiome. At 28 weeks pregnancy I tested positive for non-specific vaginitis and GBS at week 6 of the first round. These results prompted the second round of the HPx program.	All conditions have resolved	GBS positive test and non-specific vaginitis resolved at 37 weeks by week 4 of the second round, with the addition of <i>Streptococcinum Tilch</i> .	Great alternative to antibiotics		

File number	Reasons for taking the Healthy Biome HPx Program?	Did the Healthy Biome HPx Program resolve any of the issues?	Please describe overall benefit	Any final comments on the Healthy Biome HPx Program	Were there any unexpected negative results?	Number of previous rounds of antibiotics
6.2	Chronic constipation	All conditions have resolved	Relieved constipation, more regular bowel movements. The second round, with adding Polio 30c triple dose each week plus probiotics was much more effective.	The first biome program relapsed one- two weeks later. The second round, with adding Polio 30c triple dose each week, plus probiotics was much more effective. Unfortunately, 7 months later, I relapsed to original constipation symptoms.		
6.3	1. Gas, belching, flatulence daily 2. Bloating 3. Acid reflux 4. Regurgitation of food after chewing and swallowing 5. Hiccups and belching during and after eating	All conditions have resolved	All issues resolved with the first round but started returning one-two weeks later. The second round, with adding Polio 30c triple dose each week plus probiotics was much more effective.	Benefit lasted 6 months		
6.4	1. Bloating 2. Gurgling and growling stomach noises 3. Sometimes stools are pale and float 5. Low stomach acid	All conditions have resolved	No longer needed homoeopathic remedies for gas/bloating. My stomach is flat and silent. I was able to wean off digestive enzymes. Firmer, darker stools that sink immediately.	First round resolved issues but didn't last. For the second round, adding polio 30c triple dose on Saturday was a game changer. Also added probiotics.		9-20
7.1	1. Overall wellness 2. Acne	There is a marked difference	Acne improved. Overall immune system felt stronger, sleep was better, energy was better.	Felt a "balancing" effect, both in me and my daughter.		20+
8.1	1. Bloating 2. Lactose intolerance	Some improvement	Still lactose intolerant but bloating has improved		Chronic acne is worse	4-8

Results

FHCi registered 65 families, totalling 98 individuals for the Healthy Biome HPx Program from August 2023 to August 2025. FHCi had asked for a separate survey submission for each participant registered. 36 family members were identified in the 11 survey responses submitted. However, the responses analysed represent the experiences of the person who completed the form. 6 out of 11 survey respondents were

over 50 years of age, all of whom had identified more severe gastro-intestinal issues. 50% of these respondents reported having taken 9-20 rounds of antibiotics, 50% reported 20+ rounds. All respondents followed the suggested 9-week dosing schedule for each repetition of the program.

Table 3 identifies individual reasons for taking the program, any improvements or deterioration in the issues previously mentioned, overall health benefits, and final comments. Of

the 11 respondents, respondent 1.1 had marked improvement of all health conditions. 55% responded with significant improvement of health, 18% noted some improvement, and 18% did not experience any improvement. Of the 4 that were still experiencing symptoms, repeating the program, with some modifications and addition of probiotics improved the effect. 2 respondents noted that previous conditions relapsed after 6 or 7 months. These individuals had previously undertaken 4-8 and 9-20 rounds of antibiotics respectively. When compared with the number of previous rounds of antibiotics, the 2 who did not experience any benefit, 3.1 and 4.1, had indicated they had taken 20+ previous rounds of antibiotics.

Table 4. lists the nosodes and the number of responses noted by respondents. For each nosode, 1-4 respondents described their responses. From a total of 24 responses declared, 4 were not described. 64% of the respondents had declared a response to Polio, of which, only 4 described a response, 3 did not.

Of the 144 total doses taken not a single adverse event was reported as defined by the U.S. Department of Health and Human Services National Institutes of Health Clinical Center (HHS NIH Clinical Center n.d.-b).

Discussion

Homoeoprophylaxis (HPx) is normally described as the use of potentised homoeopathic nosodes to activate mild, short-lived immune responses to stimulate immunity to its relative infectious agent. Past research on HPx, in small- and large-scale applications, has demonstrated the safety and efficacy of nosodes and improved long-term outcomes and have set a precedence for further research (Birch et al. 2019, Birch et al. 2020, Birch et al. 2021, Golden 2019, Uchiyama-Tanaka 2018).

Building on the successes of FHCi developed the Healthy Biome HPx Program, primarily to establish a healthy biome for gestating mothers and infants to ensure vibrant health in preparation for the childhood homoeoprophylaxis program. This retrospective study has demonstrated a wider use for also treating mild to chronic dysbiotic conditions in all ages.

The schedule of this program was designed to keep the above in mind. Historically oral polio vaccine, when given to infants has life-long positive health benefits (Stabell Benn 2019). *Polio* is one of a group of enteroviruses that all have effect on zonulin levels (Birch 2019, Birch 2021). Thus, in this program the first nosode, Polio, was intended to activate down regulation of the tight junctions to secure the integrity of the semi-permeability of the intestinal lining, without which the individual is prone to leaky gut and subsequent system-wide inflammation and failure of the discharge pathways. The sequence of the following four commensal bacteria nosodes are intended to "inoculate" the system to invite those bacterial populations to thrive on their relative surface membranes. The next three nosodes of potentially pathogenic candida/bacteria are intended to "displace" these, as Edward Bach describes in his work on bowel nosodes (O'Sullivan 2010, Patterson 2017). The program ends with *Lactobacillus* as the final inoculation to maintain the benefit that all previous nosode doses had activated.

Clinically it has been observed that to establish a healthy population of lacto-fermenting bacteria on surface membranes, sometimes more than probiotics are needed. Viability of bacterial populations is relative to multiple factors, including the attunement of the vital force of the individual (Pitcairn 2023). Sometimes, to establish residency of such populations, or to dispel dysbiotic bacteria, the quality of the vital force is what needs to be addressed (O'Sullivan 2010).



Table 4 Number of participants who responded to each nosode.

Nosode	Number of responses declared	Response descriptions
1. <i>Polio nosode</i>	7	<p>Huge changes after <i>Polio</i>, within 5 days all wheezing stopped, and systemic body inflammation came down. The nosode <i>Torula</i> was needed to help mitigate some of the systemic reactivity of his skin (enzyme issues). Also, after <i>Polio</i>, it was like his body knew how to liberate internal phlegm through the lungs like the <i>Polio</i> has made the lung and intestinal lining work better.</p> <p>4.1 IBS symptoms became activated, spasm in back, tight, bloated, gas.</p> <p>6.1 No response noted.</p> <p>6.2 No response noted.</p> <p>6.3 No response noted.</p> <p>6.4 I didn't know what I was missing. On <i>Polio</i> 1M felt an energetic movement, an opening within my body which connected me to the universe. Like a column of golden light came in and down from my crown chakra to my solar plexus. It felt like I was a kid again and attached myself again to my life, like when I was young. Feels energising, reconnecting, communicating, flowing in a repeated loop. Liberating and empowering. My head and body are back online operating together.</p> <p>8.1 I have no idea/don't remember when my body started feeling any different</p>
2. <i>Streptococcinum A-G</i>	2	<p>1.1 The first dose brought on a fever. After the fever his skin started cleaning up throughout the week.</p> <p>2.1 I felt sleepy with a slight sore throat.</p>
3. <i>Staphylococcinum</i>	2	<p>1.1 After <i>Staphylococcinum</i>, he developed a cough and looser expectoration.</p> <p>3.1 Soft stool, stiff hands, slightly swollen glands, post-nasal drip.</p>
4. <i>Pneumococcinum</i>	2	<p>1.1 Breathing issues that were a response to the allergens have resolved quite a lot.</p> <p>3.1 Swollen glands and seal bark cough.</p>
5. <i>Gardnerella vaginalis</i>	3	<p>1.1 Asthmatic symptoms came back with this nosode after taking of camel milk. During the third series, this was the only remedy that activated the asthmatic symptoms, repeated dosing abated the symptoms.</p> <p>3.1 Swollen glands and sore throat.</p> <p>5.1 Increased libido.</p>
6. <i>Candida albicans</i>	2	<p>1.1 The eczema patches on his face and body started to clear up in round one. Again, in the third-round skin is calmer once again after aggravation from the previous remedy. Breathing has resolved.</p> <p>3.1 Gained 8lbs since start of program.</p>
7. <i>Clostridium difficile</i>	1	<p>1.1 Aggravation of skin, eczema, head to toe. Itchy face, anger and crying. By the second and the third series all skin symptoms had cleared.</p>
8. <i>Poly Bowel</i>	2	<p>1.1 The bowel movement looked and smelt normal no longer sour smelling or constipated.</p> <p>3.1 Increase in gas and flatulence.</p>
9. <i>Lactobacillus</i>	3	<p>1.1 After second round he became slightly itchy again on the nape, which is the only chronic eczema patch left to clear out. He had increased stool after this dose.</p> <p>3.1 Increase in gas/flatulence.</p> <p>7.1 No response noted.</p>
Total nosode responses: Declared/Described	24/20	



HPx, as it relates to this program, broadens the definition to include the concept of “energetic inoculation” and “biotic displacement.”

This is similar to the concept of healthy faecal transplants introduced by Clancy, yet, energetic in nature rather than material dose (Clancy 2024a). Moreover, surface membranes around the body must maintain specific pH levels to optimise that environment to their respective lacto-fermenting bacteria. Thus, from the improved health of the surface membranes reported it is possible that this energetic inoculation of these nosodes might be acting to optimise the pH balance of their respective surface membranes as well.

There are a variety of remedy responses reported with possible interpretations below:

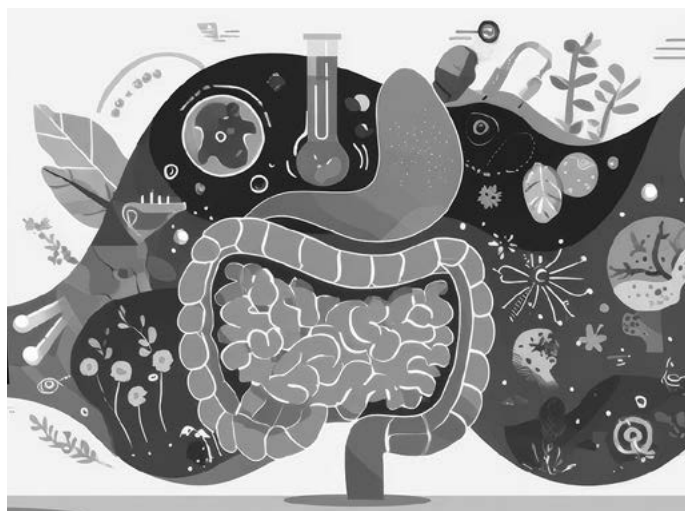
For example:

- Transient (proving like) symptoms: Proving response, or return of old symptoms that passed, such as the sore throat of 2.1 after *Streptococcinum*, or increased libido of 5.1 after *Gardnerella vaginalis*.
- Aggravation of existing symptoms followed by amelioration: (which could be interpreted as homoeopathic aggravation towards cure) as in most responses generated by respondent 1.1. in relation to *Polio* and several other nosodes.
- Exonerative discharge: As noted by 1.1 after *Lactobacillus*, and in the final comments of 3.1 in Table 3.
- Improvement of health: As noted by 6 respondents in their general comments in Table 3: 1.1, 2.1, 6.2, 6.3, 6.4, and 7.1
- Prevention of disease: Prevention of Group B Streptococcal disease (GBS) as per respondent 6.1

- Immune system activation: As noted by the febrile response 1.1 generated after *Staphylococcinum*.
- Activation of the vital force: As described in the Organon of Medicine in Aphorism §9 below and noted by the response 6.4 had to *Polio*.

In the healthy human state, the spirit-like life force (autocracy) that enlivens the material organism as dynamis, governs without restriction and keeps all parts of the organism in admirable, harmonious, vital operation, as regards both feelings and functions, so that our indwelling, rational spirit can freely avail itself of this living, healthy instrument for the higher purposes of our existence (Hahnemann 1996, 65)

The neutral results of those who had increased usage of antibiotics also demonstrate that when these are more frequently used, increased gastrointestinal issues arise, and suggest that for best effect, this HPx Program may need to be repeated several times, along with additional remedies, dietary changes, and probiotics for sustained improvement. These individuals also could have had undocumented maintaining causes that resulted in a relapse of their symptoms after about 6-7 months of completing the program.



Review of the initial reasons for undertaking this program, cumulative effects, and remedy responses to the individual doses, demonstrate all-around changes and improvements in multiple systems of the body: overall energy; vitality and wellbeing; activation of healthy immune system function (fever), and reduced allergic and histamine levels, reduction in opportunist infections, GBS reduction, sore throat, autoimmune conditions, and improved lymphatic drainage; reduction in systemic inflammation; increased movement of interstitial and extracellular fluids; improved digestion and gastrointestinal conditions including increased stomach acid, fermentation process, and more efficient lactic acid metabolism, reduced leaky gut, increased tight junction control, less vagal nerve activation, reduction in acid reflux; improvement in the liver and gall bladder process, increased stool, improvement in the metabolism of fats, normalisation of pH throughout the body; enhanced experience through the endocrine glands and chakra system, increased drainage through the sinuses, and reduction of cutaneous and musculoskeletal conditions.

Comments on the Healthy Biome HPx Program study design and dosing structure

Submitted survey responses, when compared to clinical case notes were not as complete as they could have been. We also missed key questions as to diet and probiotic use. Previous case taking or the capture a previous biome health profile was not included in the study design.

This HPx Program was never intended to be used to treat chronic bowel conditions due to its simplicity as compared to the complexity of chronic bowel disease. However, as some individuals with chronic bowel disease submitted responses, the interpretation of responses suggest a few modifications that could increase the program's efficacy, sustainability, and minimise aggravations.

Stool and zonulin level testing before and after the program was not used, but results would have clinically verified what we can only assume through the remedy responses activated and resolved, and the cumulative effect of the program.

Some suggestions we have noted for program structure:

- Ensure respondents are taking pre- and pro-biotics, eating a healthy organic diet.

- As for the schedule and remedy additions: to possibly include *Polio* 30C as a triple dose, weekly on Saturdays, prior to the regular dosing day of Sundays, to sustain regulated tight junctions throughout the program.
- Include *Torula* 1M (*Saccharomyces cerevisiae*) week 6 after *Candida* to modulate these populations and resultant enzyme deficiencies,
- Switch out *Candida albicans* 1M for a combination *Candida albicans/parapsilosis* 1M to broaden the reach.
- Add *Natrum phosphoricum* 9X Monday to Friday to help neutralise pH throughout, optimise liver and gall bladder drainage, and support lactic acid metabolism.
- Add a conjunctive 6-week program of *Streptococcinum Tilch* all potencies (C5 preparation) to dose Monday to Friday for one week at each potency 10C, 40C, 220C, 1.3M, 7.78M, 46.66M to deepen the effect of reconciling this unique relationship with Streptococcal bacteria for the entire being.

Conclusions

This Healthy Biome HPx Program, and the nosode responses activated, appears to have potential benefits in most biologic systems of the human body. Accordingly, by review of symptoms and over all the effects reported, the sequential application of biome nosodes for the age groups identified, has been found to be safe and effective in activating mild, short-lived symptoms which served to activate detox elimination pathways. Moreover, as several respondents reported the amelioration or resolution of a significant number of preexisting symptoms and a newly emergent health, this suggests promising results from widespread use of this HPx Program. Further research is needed to develop a broader and deeper understanding of the potential role each biome nosode plays in human health and disease.

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Artificial Intelligence use in Article

AI was not used in the writing of this article, in the research, survey tool creation, analysis of the data, or any other aspects of this project.

Author Contribution Statement

All authors assert a collaborative and equal contribution to the analysis of data, results, and conclusions.

Kate Birch: Healthy Biome HPx Program nosode selection and dosing schedule, survey design and questions answered, layout and final review of paper.

Miran Farah: Formatting, data verification, copy editing.

Pamela Brown: References, formatting, copy editing.

Conflict of Interest

Nil

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