Evvy

Vaginal Health Test

169 Madison Ave #2064
New York, NY 10016
support@evvy.com

Evvy Vaginal Health Test

Microbiome Summary

Patient Name: [redacted]
Test ID: [redacted]
Sample taken on: [redacted]

Based on your patient's results and symptoms, an Evvy-affiliated clinician did not diagnose them with a vaginal infection. However, their results contain certain microbes that are suboptimal for achieving pregnancy.

BREAKDOWN OF MICROBES IDENTIFIED

The Community State Type (CST) associated with these results is **Type 4-B**.

96% disruptive 1% variable 3% unknown

No Reported Symptoms At Sample Collection

RELEVANT CONTEXT FROM HEALTH HISTORY

Trying to conceive

MICROBIOME DIAGNOSIS

An Evvy-affiliated clinician has provided this information based on the patient's results and reported symptoms from [redacted].

Aerobic Vaginitis	N76.0	NEGATIVE	Aerobic Vaginitis (AV) is a type of vaginitis that occurs when disruptive (aerobic) bacteria overgrow in your vaginal microbiome. When diagnosing a patient with AV, Evvy-affiliated clinicians typically look for greater than 2% AV-associated bacteria in combination with AV-associated symptoms. AV symptoms often include redness, swelling, inflammation, pain with sex, thick yellow discharge, and rotten odor. Research suggests 7-12% of people with vaginas experience AV. Due to how frequently vaginal infections are misdiagnosed, many clinicians believe conditions like AV are more common than research suggests. References: A comprehensive guide to Aerobic Vaginitis What is the Vaginal Microbiome? Donders 2003
Bacterial Vaginosis	N76.0	NEGATIVE	Bacterial vaginosis (BV) is a type of vaginitis that occurs when disruptive (anaerobic) bacteria overgrow in your vaginal microbiome. When diagnosing a patient with BV, Evvy-affiliated clinicians typically look for over 2% BV-associated bacteria (or PCR presence of key BV pathogens) alongside known BV symptoms, such as fishy odor, thin gray discharge, and irritation. This infection is common and treatable — 30% of people with vaginas have BV each year. References: About Bacterial Vaginosis What is BV? What is the Vaginal Microbiome?

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Chlamydia	A74.9	NEGATIVE	Chlamydia is a bacterial STI that often has no symptoms but can cause inflammation in the cervix and disrupt the microbiome. It is important for you to treat a detected STI as soon as possible. Leaving STIs untreated can have serious health implications.
Gonorrhea	A54.9	NEGATIVE	Gonorrhea is a bacterial STI that can infect the cervix, disrupt the microbiome, and cause inflammation. It is important for you to treat a detected STI as soon as possible. Leaving STIs untreated can have serious health implications.
Mycoplasma genitalium	A49.3	NEGATIVE	*Mycoplasma genitalium* is a bacterial STI that can infect the cervix and endometrium, causing inflammation. It is important for you to treat a detected STI as soon as possible. Leaving STIs untreated can have serious health implications.
Trichomonas	A59.9	NEGATIVE	Trichomoniasis is a parasitic STI that can cause vaginal irritation, increased discharge, and microbiome imbalances. It is important for you to treat a detected STI as soon as possible. Leaving STIs untreated can have serious health implications.
Vaginitis	N76.0	NEGATIVE	Vaginitis is a category of vaginal infections that cause symptoms like discharge, odor, itching, or discomfort. Evvy-affiliated clinicians typically diagnose a patient with vaginitis when they present with vaginal symptoms and more than 2% disruptive bacteria, but the combination of symptoms and microbes don't meet the specific criteria for Bacterial vaginosis or Aerobic vaginitis. Vaginitis is extremely common and treatable—affecting nearly everyone with a vagina at some point. References: Vaginitis, The Cleveland Clinic What is the Vaginal Microbiome?
Yeast Infection	B37.31	NEGATIVE	Yeast infections occur when there is an overgrowth of Candida in the vaginal microbiome. Evvy-affiliated clinicians typically diagnose a patient with a yeast infection when they have candida in their results and present with known symptoms of a yeast infection such as itching, redness, soreness, pain with sex, yeasty smell, and thick, clumpy, white discharge. Yeast infections are common and treatable — up to 75% of people with vaginas will get a yeast infection at least once in their lifetime. References: Vulvovaginal Candidiasis What is a yeast infection? What is the Vaginal Microbiome?

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Patient [redacted]

Specimen Swab

Physician [redacted]

Test ID [redacted]

DOB [redacted]

Sample taken [redacted]

Physician NPI [redacted]

Completed [redacted]

Evvy Expanded Vaginal Health Test

Key Vaginal Microbes Detected

OVERALL SAMPLE
Microbial load: Med

MICROBE	RELATIVE ABUNDANCE [1]	MICROBIAL LOAD [2]	GRAM STAIN [3]
Gardnerella swidsinskii	50%	N/A	+
Fannyhessea (Atopobium) vaginae	13%	N/A	+
Prevotella timonensis	8%	N/A	−
Gardnerella vaginalis	5%	Medium	+
Gardnerella piotii	5%	N/A	+
Gardnerella leopoldii	3%	N/A	+
Megasphaera lornae	2%	N/A	N/A
Porphyromonas uenonis	2%	N/A	N/A
Prevotella bivia	1%	Medium	−
Aerococcus christensenii	1%	N/A	+
Lactobacillus iners	1%	N/A	+

[1] Relative abundance refers to the relative amount of a microbe, as determined by metagenomic sequencing (mNGS). N/A refers to microbes not detected by mNGS. Relative abundance threshold of 0.75% with 93.9% sensitivity, 94.1% specificity.

[2] Microbial load refers to the absolute number of DNA copies found in a sample, reported for the overall sample as well as any of the 11 microbes detected in the initial PCR assay. N/A refers to microbes not included or not detected in the initial PCR panel. *Low = $<10^5$, Med = 10^5 to 10^7, High = $>10^7$*

[3] Gram Stain was not performed in laboratory. This information came from reference or published literature. Gram stain for each microbe is reported as gram-negative (—), gram-positive (+), unknown (U), or not applicable (N/A).

Some microbes are excluded from this report due to a lack of known clinical correlation. For more information, view the Methods & Limitations.

[redacted]

[redacted]

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Sample taken
[redacted]

Physician NPI
[redacted]

Completed
[redacted]

Evvy Expanded Vaginal Health Test

Key Vaginal Microbes Detected

OVERALL SAMPLE
Microbial load: Med

MICROBE	RELATIVE ABUNDANCE [1]	MICROBIAL LOAD [2]	GRAM STAIN [3]
Prevotella disiens	1%	N/A	N/A

[1] Relative abundance refers to the relative amount of a microbe, as determined by metagenomic sequencing (mNGS). N/A refers to microbes not detected by mNGS. Relative abundance threshold of 0.75% with 93.9% sensitivity, 94.1% specificity.

[2] Microbial load refers to the absolute number of DNA copies found in a sample, reported for the overall sample as well as any of the 11 microbes detected in the initial PCR assay. N/A refers to microbes not included or not detected in the initial PCR panel. *Low = $<10^5$, Med = 10^5 to 10^7, High = $>10^7$*

[3] Gram Stain was not performed in laboratory. This information came from reference or published literature. Gram stain for each microbe is reported as gram-negative (—), gram-positive (+), unknown (U), or not applicable (N/A).

Some microbes are excluded from this report due to a lack of known clinical correlation. For more information, view the Methods & Limitations.

[redacted]

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[redacted]

Completed
[redacted]

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Key Vaginal Microbes Not Detected

MICROBE	STATUS [1]
Candidatus Lachnocurva vaginae (BVAB-1)	Not Detected
Candida glabrata	Not Detected
Candida albicans	Not Detected
Candida parapsilosis	Not Detected
Candida tropicalis	Not Detected
Enterococcus faecalis	Not Detected
Escherichia coli	Not Detected
Klebsiella pneumoniae	Not Detected
Lactobacillus crispatus	Not Detected
Lactobacillus gasseri	Not Detected
Lactobacillus jensenii	Not Detected
Lactobacillus mulieris	Not Detected
Lactobacillus paragasseri	Not Detected
Mageeibacillus indolicus	Not Detected

MICROBE	STATUS [1]
Metamycoplasma (Mycoplasma) hominis	Not Detected
Mobiluncus curtisii	Not Detected
Mobiluncus mulieris	Not Detected
Prevotella amnii	Not Detected
Prevotella buccalis	Not Detected
Sneathia vaginalis (amnii)	Not Detected
Sneathia sanguinegens	Not Detected
Staphylococcus aureus	Not Detected
Streptococcus agalactiae (group B)	Not Detected
Ureaplasma parvum	Not Detected
Ureaplasma urealyticum	Not Detected

[1] Microbes on this list were not detected by PCR or metagenomic sequencing (above a relative abundance threshold of 0.75%). The sensitivity and specificity in identifying the reported organisms was 100% and 95.2-100% for PCR, 93.9% and 94.1% for NGS, respectively.

Some microbes are excluded from this report due to a lack of known clinical correlation. For more information, view the Methods & Limitations.

[redacted]

[redacted]

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[redacted]

Completed
[redacted]

Evvy Expanded Vaginal Health Test

Sexually Transmitted Infections

INFECTION	STATUS [1]
Chlamydia trachomatis	Negative
Mycoplasma genitalium	Negative
Neisseria gonorrhoeae	Negative
Trichomonas vaginalis	Negative

[1] Detection reported for the presence of four STI-related microbes as determined by PCR. For more information, view the Methods & Limitations.

[redacted]

[redacted]

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Patient [redacted]	**Specimen** Swab	**Physician** [redacted]	**Test ID** [redacted]
DOB [redacted]	**Sample taken** [redacted]	**Physician NPI** [redacted]	**Completed** [redacted]

Evvy Expanded Vaginal Health Test

Antimicrobial Resistance

RESISTANCE	STATUS [1]
Macrolide	Detected
Tetracycline	Detected
Aminoglycoside	Not Detected
Bactrim	Not Detected
Beta-lactam	Not Detected
Carbapenem	Not Detected
Extended-Spectrum Beta-Lactamase	Not Detected
Methicillin	Not Detected
Quinolone	Not Detected
Vancomycin	Not Detected

[1] Resistance genes for 10 antimicrobial classes were included in the PCR panel, and detected genes are reported here. For more information, view the Methods & Limitations page.

[redacted]

[redacted]

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Methods

The Evvy Vaginal Health Test is a laboratory developed test that was developed and validated by the CLIA #45D1086390 and CAP #7214171 accredited high complexity U.S. laboratory.

The test is performed on microbial DNA that is extracted from the vaginal swab sample and analyzed using quantitative PCR analysis and shotgun metagenomics next-gen sequencing (mNGS).

mNGS: The Evvy Vaginal Health Test screens for all bacteria and fungi that have been isolated from the urogenital tract, excluding reportable organisms (e.g. STIs). The organisms are reported based on their relative abundance. Bioinformatic methods are used to identify the microorganisms' genetic signatures and the estimated percentage (relative abundance) of organisms present in the specimen. The test reports the presence of organisms detected above a relative abundance threshold of 0.75%. The sensitivity and specificity of the mNGS assay in the Vaginal Health Test in identifying the reported organisms was 93.9% and 94.1%, respectively.

PCR: Polymerase chain reaction (PCR) is used to analyze each sample for commonly found bacteria, fungi, STIs, and antimicrobial resistance genes in clinical vaginal samples. Bacterial and fungal amounts are reported as semiquantitative values based upon standard curves for each target specific organism. The sensitivity and specificity of the PCR assays in the Vaginal Health Test in identifying the reported organisms was 100% and 95.2-100%, respectively. Antimicrobial classes reported as resistant are based on the detected resistance genes included in the qPCR and the published activity and spectrum of resistance for each gene. This test looked for resistances for the following antimicrobial classes: Vancomycin, Tetracycline, Methicillin, Quinolone, Beta-lactam, Macrolide, Aminoglycoside, Bactrim, Carbapenem, and Extended-Spectrum Beta-Lactamase. The test looked for the following organisms: Candida albicans, Gardnerella vaginalis, Lactobacillus crispatus/acidophilus, Lactobacillus gasseri, Mobiluncus curtisii, Mobiluncus mulieris, Mycoplasma hominis, Prevotella bivia, Streptococcus agalactiae, Ureaplasma parvum, Ureaplasma urealyticum.

Results & Interpretation

This report is intended to provide a snapshot of the vaginal microbiome at a single time point, including information detailing the relative abundance of bacteria and fungi detected. Microbes that have not been specifically validated and/or do not have known clinical correlations are not included in the front-page lab report.

Please note that the presence of a potentially-pathogenic bacteria, by itself, is not diagnostic of a disease state. Evvy's Vaginal Health Test is intended to provide additional information for a clinician to use in the context of other clinical signs and symptoms to aid in patient management decisions.

Limitations

It is important that the collection, transport, and storage of samples be performed in accordance with provided instructions as poor sample quality may adversely affect the accuracy of results.

The Evvy Vaginal Health Test does not test for all sexually transmitted infections (e.g. Syphilis, HIV) and is not intended for use as a screening or diagnostics test for STIs that are not explicitly listed on the STI page of the report. Patients presenting with symptoms of an STI should seek care by a medical provider for a physical exam and further testing. This test is not a substitute for a PAP smear or annual exam.

This test may not detect all organisms related to a given disease or condition. Reference ranges have not yet been established for all organisms detected in the vaginal microbiome. The interpretation of these results may change as more is learned about which microbes are related to a given disease.

Evvy's Vaginal Health Test is a Laboratory Developed Test (LDT) and has not been reviewed by the Food and Drug Administration.

If you have any questions for our clinical team, please contact us at providers@evvy.com.

[redacted]

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Evvy Expanded Vaginal Health Test

Patient Name: [redacted]
Test ID: [redacted]
Sample taken on: [redacted]

Next Steps to Consider

Below is the list of steps to consider that were presented to the user based on their results, symptoms, and the published literature. *Please note: while Evvy has included potential interventions and associated research sources below for your consideration, Evvy is not a healthcare provider and all treatment decisions will remain at all times solely within the professional, clinical judgment of you or the patient's healthcare provider.*

NOTE: TREATMENT AVAILABLE THROUGH EVVY
Your patient is eligible for treatment through Evvy! Through the Evvy platform, your patient can be matched to a licensed healthcare provider who can prescribe treatment for your patient based on their results, health profile, and insights from Evvy's unique data. All treatments prescribed through Evvy are prescription-grade and custom compounded with the ingredients research shows are most likely to improve each patient's results & symptoms. Patients can opt into care by going to the "care" tab in their portal. If your patient opts into care, you will be notified through the Evvy provider portal and you will be able to download their treatment program. Certain treatments are only available within 21 days of test results.

GOAL	STEP TO TAKE	DESCRIPTION
Reduce Disruptive	**1. Talk to your doctor about boric acid**	Research suggests that some of the disruptive microbes found in your vaginal microbiome can produce biofilm, a sticky web formed by disruptive microbes in order to resist treatment and keep a hold within your vagina. Many vaginal health experts believe that biofilm formation in the vaginal microbiome is one of the key reasons why vaginal infections persist and/or recur. To help break down any potential biofilm, you may want to talk to your doctor about boric acid. Boric acid is a home remedy that many individuals have used for years, with thousands of positive reviews online. That said, not everyone should use boric acid, and research suggests it's often a bandaid vs. a root cause solution. Additionally, research on boric acid is still emerging. It is recommended by the CDC for yeast infections caused by *Candida glabrata*, but there is minimal research regarding boric acid's impact on BV. That said, it is often used by clinicians because of its potential for disrupting biofilms. **Please note: boric acid can exacerbate burning symptoms and may not be right for you if you have underlying vaginal atrophy or increased vaginal burning. Additionally, if you are trying to conceive, note that boric acid is NOT safe in pregnancy. You should always discuss new treatments with your provider to determine if they are appropriate for you.** *Reichman 2009*, *Surapaneni 2021*, *Orna 2009*

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Reduce Disruptive	**2. Talk to your doctor about reducing disruptive microbes for fertility**	Antibiotics aren't typically prescribed for those without vaginal symptoms. That said, there is a large body of research suggesting that reducing disruptive microbes in the vaginal microbiome may improve fertility outcomes. Since you're trying to conceive, we encourage you to talk to your doctor about proactively treating asymptomatic vaginitis with antibiotics to prepare your microbiome for fertility. If you're eligible for Evvy's Clinical Care, our providers can tailor a treatment plan to support your fertility goals based on your medical history. Keep in mind that different microbes respond differently to antibiotics, and some may impact beneficial lactobacilli—so maintaining a healthy balance is key. We've linked research on antibiotic use here for reference. PSA: If you're sexually active while on antibiotics, it's generally advised to avoid intercourse during treatment to ensure effectiveness and prevent reinfection. *van den Tweel 2024*, *Skafte-Holm 2021*, *Austin 2005*
Promote Protective	**3. Consider taking lactoferrin**	Lactoferrin is an iron-binding protein naturally made by your immune system that may inhibit the growth of harmful bacteria and promote the growth of *Lactobacillus*. You can consider taking Lactoferrin to provide your microbiome with additional support. Please note that lactoferrin contains dairy and is not suitable for vegans. You should always seek advice from a healthcare provider to ensure the appropriate dose and duration of use for you. *Jeng 2020*, *Valenti 2018*
Promote Protective	**4. Promote protective lactobacilli**	Lactobacilli are protective bacteria that serve as the "local heroes" of the vagina. Research suggests that taking a probiotic rich in these strains of bacteria can give the lactobacilli an edge in repopulating in the vagina and increase the overall number of protective bacteria in your microbiome. However, not all probiotics are created equal. Many "vaginal probiotics" on the market do not include bacterial strains that are shown to positively impact the vaginal microbiome. Research on probiotics that include vaginally supportive strains have had consistently promising results. It is important to select a probiotic that includes strains that specifically target the vaginal microbiome, versus "typical" probiotics which focus on strains that are beneficial for the gut. Research suggests that brands that include one of the two combinations would be most effective, due to the results of these strains in research trials: - *L. rhamnosus* GR-1 and *L. reuteri* RC-14 - *L. rhamnosus* HN001, *L.acidophilus* GLA-14 + lactoferrin *Russo 2018*, *Jeng 2020*
Maintenance	**5. Retest to see if lactobacilli levels increase**	After making the above changes to your vaginal care, you can retest in three months to see if your vaginal microbiome has rebalanced. Ideally, we hope to see your levels of disruptive microbes go down and levels of protective microbes increase. Across tests, we can start to understand how your vagina is changing across time and in response to different strategies.

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Patient Name: [redacted]
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Sample taken on: [redacted]

Next Steps to Consider (continued)

Below are additional steps to consider that were presented to the user based on their results, symptoms, and the published literature. *Please note: while Evvy has included potential interventions and associated research sources below for your consideration, Evvy is not a healthcare provider and all treatment decisions will remain at all times solely within the professional, clinical judgment of you or the patient's healthcare provider.*

STEPS TO CONSIDER	DESCRIPTION
Choose a fertility-friendly lubricant	Many lubricants can make conception harder by affecting sperm motility. Semen is naturally alkaline (pH 7.2–8.0), but many commercial lubricants are too acidic or have high osmolality, which can harm sperm movement and survival. Acidic lubricants slow sperm down, while high-osmolality formulas can dehydrate them. To support fertility, choose sperm-friendly lubricants with a pH similar to semen and cervical mucus. Avoid those with glycerin, parabens, or silicone, as they can be toxic to sperm and reduce the chances of fertilization. Good Clean Love's **BioGenesis™ Fertility Lubricant** and **Premom's Fertility Lubricant** are great options. **Note:** While a healthy vaginal environment is typically acidic to maintain a balanced microbiome and prevent infections, during conception, the priority is ensuring a sperm-friendly environment. This is why choosing the right lubricant with a pH closer to semen's is essential in this context. *Steiner 2023*
Consider condoms	You probably knew using a condom helps reduce the risk of STIs, but research demonstrates that it can also significantly reduce your risk for vaginal infections. Condoms are useful for two key reasons. First, they can prevent disruptive microbes from entering the vaginal microbiome from your partner. They also prevent semen from entering the vagina, which is important because semen can disrupt your vaginal pH as well as carry its own bacteria (semen actually has more bacteria in it than sperm!). If you are dealing with an imbalance or infection, using condoms consistently may help. Remember to look for condoms, lubricant, and other substances that avoid spermicides, fragrances, nitrosamines, benzocaines, parabens, and glycerin, all of which may impact the vaginal microbiome (particularly yeast-related issues). Read more on condoms and infections here: link *Fethers 2008*, *Hutchinson 2007*, *Jewanraj 2020*, *Farahani 2020*

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Lifestyle changes to support your hormonal health while trying to conceive

Your lifestyle choices directly impact your hormonal health. Here are three topics to keep in mind when you're trying to conceive:

Diet: Omega-3 fatty acids, found in salmon, walnuts, and flaxseeds, play a key role in reproductive health by improving egg quality, regulating ovulation, and reducing inflammation—essential for implantation and early pregnancy. Limiting caffeine to under 200 mg per day can also support fertility, while avoiding alcohol, especially after ovulation, may improve implantation success by maintaining hormonal balance and endometrial receptivity. Since implantation typically occurs 6–12 days post-ovulation, skipping alcohol during this window can help create the best conditions for conception. By nourishing your body with the right nutrients and making mindful lifestyle choices, you can optimize your reproductive health and support a healthy pregnancy.

Limit exposure to environmental toxins: Certain chemicals may impact hormonal balance and, in turn, fertility. Phthalates (found in scented products) and BPA (in plastics) can interfere with hormone regulation, while flame retardants (PBDEs) and persistent pollutants (PCBs) have been linked to longer times to conception. PFAS (commonly found in non-stick cookware) may disrupt estrogen, and pesticides like organophosphates and organochlorines could affect reproductive health.

The good news? Small swaps can make a difference. Opting for fragrance-free products, BPA-free containers, organic produce, and safer cookware can help reduce exposure—supporting your hormones, fertility, and overall well-being.

Quality sleep and stress management: Sleep and stress play essential roles in supporting fertility by regulating reproductive hormones and maintaining hormonal balance. Consistently getting 7–9 hours of restful sleep helps optimize estrogen, progesterone, and luteinizing hormone (LH), all of which are crucial for ovulation and implantation, while poor sleep has been linked to a diminished ovarian reserve and lower conception rates. Chronic stress can also elevate cortisol levels, potentially disrupting ovulation and making it harder to conceive, so finding ways to manage stress—whether through meditation, deep breathing, yoga, or activities that bring joy—is key.

Wesselink 2018, *Fan 2017*, *Pan 2024*, *Rao 2022*, *Puche-Juarez 2023*

Consider male partner treatment if you're trying to conceive

A **groundbreaking study** in the New England Journal of Medicine showed that treating male partners with oral and topical antibiotics significantly reduced the recurrence of bacterial vaginosis for female partners. It's important to note that previous studies have not shown this effect, and that many of the men in this study were uncircumcised. That said, given you're trying to conceive, you may want to consider sharing this study with your doctor to discuss treatment options. Male Partner Treatment is now available **through Evvy** (for those eligible).

Vodstrcil 2025

Understand Your Fertility from Every Angle

Go beyond the microbiome with a science-backed, personalized Fertility Analysis. This medical report is tailored to your body and may include insights into key hormone levels (like AMH, FSH, and TSH), ovarian reserve, and potential underlying conditions such as PCOS or thyroid disorders. It's a deeper look at your reproductive health—designed to help you make more informed decisions on your path to parenthood.

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Support Egg Quality with Clinical-Grade Prenatals	These tiny cells have a big job to do when it comes to getting pregnant. Support them with Bird&Be's doctor-formulated supplements, featuring research-backed ingredients at clinical doses, including many that other prenatals skip. You'll also be building up stores of nutrients needed in the earliest stages of fetal development, and helping your body feel its best during treatment. Bonus: Get it all in a convenient daily sachet—bye-bye bottle clutter.

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Fertility Insights

Patient name: [redacted]
Test ID: [redacted]
Sample taken on: [redacted]

Below are the fertility insights presented to the user, based on their results and published literature. These reflect key microbial patterns associated with fertility outcomes, informed by the latest research and Evvy's dataset.

SUMMARY

METRIC	RESULT	SUMMARY
Fertility Disruptors	89.43% / 100% ELEVATED	**You have higher levels of fertility disruptors in your vaginal microbiome. Research associates lower levels with positive fertility outcomes.** This is a total sum of pathogens in your microbiome that research has associated with fertility outcomes. This includes Fannyhessea vaginae, Prevotella, Sneathia, Gardnerella, and Ureaplasma. See full list of fertility disruptors below
Protective Score	0% / 100% LOW	**Your *Protective Score* is low. Research associates higher levels of protective bacteria with positive fertility outcomes.** Protective bacteria, like *Lactobacillus*, help maintain vaginal pH, reduce inflammation, and naturally defend against pathogens.Research associates higher levels of protective bacteria with improved fertility outcomes, including higher implantation rates and greater success with fertility treatments like IUI and IVF. Research status: Established References: Väinämö 2023 Koort 2023 Koedooder 2019 Amato 2019 Skafte-Holm 2021 van den Tweel 2024
Diversity Score	1.75 / 4 HIGH	**Your *Microbiome Diversity Score* is high. Research associates lower diversity scores with positive fertility outcomes.** Your Microbiome Diversity Score (also known as “Shannon Diversity Score”) is a measure of the number of different bacteria in your vaginal microbiome — and in the vagina, fewer bacteria is better. Research associates lower Microbiome Diversity with improved fertility and IVF outcomes. Research status: Emerging References: Kong 2020 Haahr 2019 Chopra 2024
STI status	NEGATIVE	**Your Expanded PCR results were negative for STIs.** This includes STI's that research has associated with fertility outcomes, including Gonorrhea, Chlamydia, Mycoplasma genitalium, and Trichomonas. See full breakdown of STI results below

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Fertility Insights

Patient name: [redacted]
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Sample taken on: [redacted]

FERTILITY DISRUPTORS

METRIC	RESULT		SUMMARY
Fannyhessea vaginae	13.84% / 100%	HIGH	**Your *Fannyhessea vaginae* levels are elevated. Research associates lower levels with positive fertility outcomes.** *Fannyhessae vaginae* (also known as *Atopobium vaginae*) is a type of bacteria linked to infections like bacterial vaginosis (BV).Research suggests high levels of Fannyhessae may impact fertility and IVF outcomes. Research status: Emerging References: Kong 2020 Souza 2023 Chopra 2024 Souza 2023
Gardnerella	65.22% / 100%	HIGH	**Your *Gardnerella* levels are elevated. Research associates lower levels with positive fertility outcomes.** *Gardnerella* is a common bacteria in the vaginal microbiome often linked to infections like bacterial vaginosis (BV).Research suggests high levels of *Gardnerella* may impact fertility and IVF outcomes. Research status: Emerging References: Väinämö 2023 Ravel 2021 Chopra 2024 Kong 2020 Graspeuntner 2018
Prevotella	10.37% / 100%	HIGH	**Your *Prevotella* levels are elevated. Research associates lower levels with positive fertility outcomes.** *Prevotella* is a common bacteria in the vaginal microbiome often linked to infections like bacterial vaginosis (BV).Research suggests high levels of *Prevotella* may impact fertility outcomes, including a higher likelihood of needing IVF to achieve pregnancy. Research status: Emerging References: George 2024 Chopra 2024 Chen 2024 Souza 2023
Sneathia	0% / 100%	LOW	***Sneathia* was not detected, which research associates with positive fertility outcomes.** *Sneathia* is a type of bacteria found in the vaginal microbiome that has been linked to dysbiosis.Research suggests high levels of *Sneathia* may be associated with infertility and recurrent implantation failure (RIF). Research status: Emerging References: Gao 2020 Graspeuntner 2018
Ureaplasma	0% / 100%	LOW	***Ureaplasma* was not detected, which research associates with positive fertility outcomes.** *Ureaplasma* is a type of bacteria found in the vaginal microbiome that is often found alongside other pathogens.Research suggests high levels of *Ureaplasma* may impact fertility outcomes, although this research is still emerging. Research status: Novel References: Ma 2021 Sameni 2022

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Fertility Insights

Patient name: [redacted]
Test ID: [redacted]
Sample taken on: [redacted]

STI STATUS

METRIC	RESULT	SUMMARY
Gonorrhea	NEGATIVE	**Your results were negative for Gonorrhea.** Gonorrhea is a bacterial STI that can infect the cervix, disrupt the microbiome, and cause inflammation.If left untreated, it can contribute to pelvic inflammatory disease (PID), which may impact fertility outcomes. Research status: Established References: Chemaitelly 2020 Reekie 2018
Chlamydia	NEGATIVE	**Your results were negative for Chlamydia.** Chlamydia is a bacterial STI that often has no symptoms but can cause inflammation in the cervix and disrupt the microbiome. If left untreated, it can contribute to pelvic inflammatory disease (PID), which may impact fertility outcomes. Research status: Established References: Mania-Pramanik 2012 Rodrigues 2025
Mycoplasma genitalium	NEGATIVE	**Your results were negative for Mycoplasma genitalium.** *Mycoplasma genitalium* is a bacterial STI that can infect the cervix and endometrium, causing inflammation.If left untreated, it can contribute to pelvic inflammatory disease (PID), which may impact fertility outcomes. Research status: Established References: Yu 2023
Trichomonas	NEGATIVE	**Your results were negative for Trichomonas.** Trichomoniasis is a parasitic STI that can cause vaginal irritation, increased discharge, and microbiome imbalances.If left untreated, Trichomoniasis may impact fertility outcomes, although more research is needed. Research status: Emerging References: Hashemi 2021 Zhang 2022

Gardnerella swidsinskii DISRUPTIVE 50.47%

- *Gardnerella swidsinskii* (Renamed from *Gardnerella vaginalis*) are Gram variable anaerobic bacteria that can be present in both healthy and disrupted vaginal microbiomes.
- When present in disrupted vaginal microbiomes, *Gardnerella* may be associated with bacterial vaginosis.
- It can also develop biofilm (a sticky, strong layer of infection cells) leading to difficult-to-treat BV. This biofilm created by *Gardnerella* often plays a role in helping other disruptive bacteria grow, such as *Atopobium* or *Prevotella*.
- Symptoms of the presence of this bacteria include abnormal discharge such as gray color or watery texture.
- Even though *Gardnerella* is one of the most commonly detected vaginal organisms, only in 2020 did we realize that it has enough genetic differences to be broken into FOUR different species!
- Up until now, we've treated them all the same and we don't know much about the different roles they play in the vagina yet. We will keep your results updated as we learn more!

Fannyhessea (Atopobium) vaginae DISRUPTIVE 13.84%

- *Fannyhessea vaginae* (previously named *Atopobium vaginae*) are Gram positive anaerobic bacteria associated with bacterial vaginosis.
- This bacteria may be associated with bacterial vaginosis (BV), and is often characterized by abnormal vaginal discharge, elevated pH, and inflammation.
- When *F. vaginae* teams up with *Gardnerella vaginalis*, they are usually viewed as prime suspects for BV.
- *G. vaginalis'* ability to form a biofilm (a sticky, strong layer of infection cells) makes it possible for *F. vaginae* to flourish as well as strengthen the biofilm layer. Together, they can be difficult to treat or fully get rid of.
- In 2018, this microbe was reclassified from *Atopobium vaginae* to *Fannyhessea vaginae* — but don't worry it is the same old *A. vaginae* that you know, just now with a new name!

Prevotella timonensis DISRUPTIVE 8.56%

- *Prevotella* are one of the most commonly found bacteria in the vagina, and *Prevotella timonensis* (*P. timonensis*) are the most well studied species within this group.
- While *P. timonensis* has been found in the vaginas of both in healthy and symptomatic women, research has shown that it may be associated with dysbiosis and biofilm creation.
- When vaginal pH increases (which can happen due to semen, menstrual blood, and vaginal infections), *P. timonensis* is able to flourish. Studies have shown *P. timonensis* may be more prevalent during menstruation due to this.
- Studies demonstrate that *P. timonensis* is one of the first BV-associated bacteria to increase prior to a BV diagnosis.
- Symptoms associated with *P. timonensis* include higher pH, degraded mucus, and odor.
- Research suggests that this bacteria produces specific compounds that can contribute to vaginal malodor.

Gardnerella vaginalis DISRUPTIVE 5.97%

- *Gardnerella vaginalis* are Gram variable anaerobic bacteria that can be present in both healthy and disrupted vaginal microbiomes.
- When present in disrupted vaginal microbiomes, *Gardnerella* may be associated with bacterial vaginosis.
- It can also develop biofilm (a sticky, strong layer of infection cells) leading to difficult-to-treat BV. This biofilm created by *Gardnerella* often plays a role in helping other disruptive bacteria grow, such as *Atopobium* or *Prevotella*.
- Symptoms of the presence of this bacteria include abnormal discharge such as gray color or watery texture.
- Even though *Gardnerella* is one of the most commonly detected vaginal organisms, only in 2020 did we realize that it has enough genetic differences to be broken into FOUR different species!
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Up until now, we've treated them all the same and we don't know much about the different roles they play in the vagina yet. We will keep your results updated as we learn more!

Gardnerella piotii DISRUPTIVE 5.73%

- *Gardnerella piotii* (Renamed from *Gardnerella vaginalis*) are Gram variable anaerobic bacteria that can be present in both healthy and disrupted vaginal microbiomes.
- When present in disrupted vaginal microbiomes, *Gardnerella* may be associated with bacterial vaginosis.
- It can also develop biofilm (a sticky, strong layer of infection cells) leading to difficult-to-treat BV. This biofilm created by *Gardnerella* often plays a role in helping other disruptive bacteria grow, such as *Atopobium* or *Prevotella*.
- Symptoms of the presence of this bacteria include abnormal discharge such as gray color or watery texture.
- Even though *Gardnerella* is one of the most commonly detected vaginal organisms, only in 2020 did we realize that it has enough genetic differences to be broken into FOUR different species!
- Up until now, we've treated them all the same and we don't know much about the different roles they play in the vagina yet. We will keep your results updated as we learn more!

Gardnerella leopoldii DISRUPTIVE 3.06%

- *Gardnerella leopoldii* (Renamed from *Gardnerella vaginalis*) are Gram variable anaerobic bacteria that can be present in both healthy and disrupted vaginal microbiomes.
- When present in disrupted vaginal microbiomes, *Gardnerella* may be associated with bacterial vaginosis.
- It can also develop biofilm (a sticky, strong layer of infection cells) leading to difficult-to-treat BV. This biofilm created by *Gardnerella* often plays a role in helping other disruptive bacteria grow, such as *Atopobium* or *Prevotella*.
- Symptoms of the presence of this bacteria include abnormal discharge such as gray color or watery texture.

- Even though *Gardnerella* is one of the most commonly detected vaginal organisms, only in 2020 did we realize that it has enough genetic differences to be broken into FOUR different species!

- Up until now, we've treated them all the same and we don't know much about the different roles they play in the vagina yet. We will keep your results updated as we learn more!

Megasphaera lornae DISRUPTIVE 2.94%

- *Megasphaera lornae* are Gram negative anaerobic bacteria associated with recurrent vaginitis.

- *Megasphaera* is commonly found in BV, and is even used as a biomarker for BV in PCR based tests.

- Research suggests that this bacteria produces specific compounds that can contribute to vaginal malodor.

- Research into this organism is ongoing. We will keep your results updated as the science progresses.

Coriobacteriaceae UNKNOWN 2.71%

- *Coriobacteriales* are an order of Gram positive anaerobic bacteria.

- This is a very poorly characterized group of organisms and this high level of classification (to the family level instead of the species) means that we have detected an uncharacterized member of this bacterial group.

- Related bacteria have been identified as disruptive — but that doesn't mean they all are!

- We will keep your results updated as the science progresses.

Porphyromonas uenonis DISRUPTIVE 2.47%

- *Porphyromonas uenonis* (*P. uenonis*) are Gram negative anaerobic bacteria found in healthy vaginas as well as those with bacterial vaginosis (BV). It is often found alongside *Prevotella*.

- Research has shown that *P. uenonis* can break down mucin and other protective components of the vaginal wall, which can increase the risk of vaginitis and other associated conditions.
- Research on the specific function and role of this bacteria in the vagina is still emerging, and we will keep your results updated as we learn more.

Aerococcus christensenii DISRUPTIVE 1.58%

- *Aerococcus christensenii* are Gram positive anaerobic bacteria bacteria.
- This bacteria is frequently detected in the vagina, but it's role in vaginal health is unclear. Research suggests that it might be involved in BV, and in rare cases can cause opportunistic infections on its own.
- We will keep your results updated as the science progresses.

Prevotella DISRUPTIVE 0.91%

- *Prevotella* are Gram negative anaerobic bacteria commonly found in the gut and vagina, both in healthy women and those suffering from an infection.
- Research has shown that it may be associated with dysbiosis and biofilm creation.
- When vaginal pH increases (which can happen due to semen, menstrual blood, and vaginal infections), *Prevotella* is able to flourish. Studies have shown *Prevotella* may be more prevalent during menstruation due to this.
- Studies demonstrate that *Prevotella* is one of the first BV-associated bacteria to increase prior to a BV diagnosis.
- Symptoms associated with *Prevotella* include higher pH, degraded mucus, and odor.
- Research suggests that this bacteria produces specific compounds that can contribute to vaginal malodor.

Prevotella bivia DISRUPTIVE 0.91%

- *Prevotella* are one of the most commonly found bacteria in the vagina, and *Prevotella bivia* (*P. bivia*) are the most well studied species within this group.
- While *P. bivia* has been found in the vaginas of both in healthy and symptomatic women, research has shown that it may be associated with dysbiosis and biofilm creation.
- When vaginal pH increases (which can happen due to semen, menstrual blood, and vaginal infections), *P. bivia* is able to flourish. Studies have shown *P. bivia* may be more prevalent during menstruation due to this.
- Studies demonstrate that *P. bivia* is one of the first BV-associated bacteria to increase prior to a BV diagnosis.
- Symptoms associated with *P. bivia* include higher pH, degraded mucus, and odor.
- Research suggests that this bacteria produces specific compounds that can contribute to vaginal malodor.

Lactobacillus iners VARIABLE 0.86%

- *Lactobacillus iners* (*L. iners*) is the most common lactobacilli found in the vaginal microbiome and can be found thriving alongside both protective and disruptive bacteria.
- *L. iners* take up space on the vaginal wall and produce L-lactic acid, both of which help limit the growth of pathogens.
- However, L-lactic acid is not the most effective at maintaining an acidic environment, so a higher number of *L. iners* are required in order to maintain a healthy pH and prevent infections.
- Consequently, *L. iners* may be less protective compared to the other *Lactobacillus* strains. To learn more see the AskEvvy blog