Hidden Mold in Your Home: Why Inspections Miss It and What to Do Transcript

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Podcast Introduction

A lot of inspectors don't really know how to read that data very well, to be real candid. They'll look at the bottom line and say, okay, it's less than what's on the exterior, so you're fine.

But it could be a whole different type of mold that's only inside. We should have what is known as a relative distribution of bioaerosols. And we should roughly the same types of molds on inside versus the outside, and roughly, the percentages.

Unfortunately, most inspectores don' understand how read those reports accurately. Hi and welcome to the Lime Bites podcast, where we shine a light on the misunderstood science of Lyme and other vector-borne diseases, as well as the truths that many still miss.

I'm Dr. Mariah Hinchey, naturopathic physician and fellow of the Medical Academy of Pediatric Special Needs. I specialize in treating chronic Lyme disease, as well as other complex inflammatory conditions.

In this podcast, we break down what's working and what is not. We share the facts that most people miss, challenge outdated thinking, and give both patients and practitioners the tools to heal smarter.

So let's get into it and change the way we heal Lyma. Welcome back to Line Bites. Rebuilding immunity, reversing inflammation and redefining recovery.

Water damage buildings and environmental toxins are some of the most overlooked drivers of immune dysfunction.

Water-Damaged Buildings and Mold Basics

Fueling chronic inflammation, disrupting detoxification pathways and creating a terrain where vector borne infections and complex chronic illness can persist despite adequate treatment.

Today I'm joined by John Bodie, founder of The Mold Pros, a nationwide leader in mold inspection, testing, and remediation with over 15 years of experience.

John's here to expose where traditional systems fall short and what actually needs to change to protect human health. Welcome, John. Thank you so much for being here with me today.

Well, thank you for having me. Glad to be here. Great. So let's start out by talking just very fundamentally about what happens in a water damaged building.

And therefore, what do we need to be looking for? Yeah, great question. So when we have, and we'll break that down actually into two parts. There's water damaged buildings, which we're all trained to look for.

When we a moisture event, like a burst pipe or a sump pump failure in the basement, or I live in Florida, so we get hurricanes. We'll create a water damage building.

I'd also like to expand that to start thinking about moisture affected buildings because it's not always a Water Event. It could be elevated humidity.

In fact, that's probably the most common thing that we see. So we start talking about moisture-affected buildings. I think that I've been trying to get that nomenclature adopted industry-wide because these humidity issues cause a

lot of problems.

But to answer your question, what happens when we have this moisture event? It creates this microbial soup, if you will. We have bacterial growth that is in there.

And obviously those two things can cause lots of issues for the occupants. So we have mold, which we're going to get into, but mold having fragments or spores, fragments, mycotoxins, et cetera, and then bacteria with their endotoxin and all of their other effects.

And a lot of times the two of them are going be competing with each other too, right? For like existence in the environment, Which just makes the whole situation even worse.

You, you've nailed it right on the head. So we have, when we talk about the mold spores, so that's the fruiting body or the reproductive side of a mold colony.

Then we had this hyphal growth. If we stop and think about that, that the vegetative growth, So if we were to use the metaphor of, of the plant, the roots, stems, leaves, etc.

That's that hypha structure. in the spores of the fruiting body that's there. Now, the mycotoxins, molds will create secondary metabolites and mycotoxin are one of those secondary metabolism.

Why Mold Inspections Miss Problems

And there's a thought process that what happens when there is that soup and there was that bacteria and that mold, that certain molds have developed the ability to create these toxins to kind of stake their territory, claim their area.

to kill off other molds, other bacteria, the microbial growth, The occupants just become kind of collateral damage. So what is the biggest way that traditional, and I would even go beyond traditional because there have been some, you know, inspectors that have failed some of my patients that were supposed to be like these specialized, like very well-educated inspectores.

But like, why do a lot of these home mold inspections fail when we have people that are in this category of illness that we're talking about? What's the Are you ready to revolutionize your approach to diagnosing and healing complex chronic inflammatory illnesses in both adults and children?

The Lime Bites Symposium is your gateway to cutting-edge education, groundbreaking research, and innovative therapeutic solutions. Join us at LIME BITES SYMPOSIUM.

at the Fort Lauderdale Marriott Pompano Beach Resort and Spa. Lion Bites is the premier functional medicine conference on complex, chronic, infection-driven inflammatory illnesses.

This year's meeting is jam-packed with leading industry experts discussing lung COVID, mycotoxin illness, Pans Pandas, as well as Lyme and other vector-borne diseases.

This conference will arm you with the knowledge, clinical pearls, and practical solutions that you can implement immediately into your practice Monday morning that will literally change your patient's lives and get them on their path to true healing.

So join us at Pompano Beach or virtually from anywhere. Register now at limebites.com. That's L-Y-M-E-B- Y-T- E-S dot com. Yeah, that's a great question.

I would say there's probably two. One is education. So the restoration industry is designed to restore homes that have been water damaged. It's more so that structural addressing the water damage problems, and there really is a lack of understanding as it relates to the health side.

And so we've always maintained that how we started our company was that The traditional restoration industry, whether it's the inspection side or the mediation side, really doesn't do a very good job for those with environmental illness.

So first thing is the understanding. And with that, The level of inspection isn't very good, unfortunately. They'll come in, they'll grab air samples.

The don't dig. You have to be an investigator on site. That inspection should take hours. It should be invasive. it should pulling everything out from underneath the sinks.

And it shouldn't have layers of sampling, whether it's air, samples are fine. they have a value to provide, but there's also inter-cavity samples, surface samples There's polymers chain reaction samples, there's mycotoxin samples.

There is endotoxins. So there is more than just one data point that you should look at. So I can't tell you how many times I've had a patient do a dust test.

You know, we typically are using the dust tests is just what we recommend, but I know there are multiple other of Hermes and Hertzmes and things like that.

So, I have had, a multitude of patients where their dust has come back at like a level five, which is the highest it can be. and they have found someone who they thought has been a reputable inspector and the inspector is like, everybody has mold in their house or they can't find the mold.

I've had patients go through literally four or five inspectors end up getting like the mold sniffing dog or finally the sixth inspector comes and finds the true issue, which I mean, we could sit here for the rest of the day going over all of these crazy stories where, you know, there was a nail through the main sewage line and the nail had degraded and a whole pipe was covered with black mold and whole column inside, but like five other mold inspectors missed that.

And it seems to be, you know, since I've become mold literate, like it's seems more of the norm than actually the exception, which is really, really scary when I have a database of all of these pictures of things that finally the fifth, sixth, seventh, or the mold dog, found.

So how do you explain how does this keep happening over and over again? It is, in all fairness to the inspectors, houses are big. There's lots of nooks and crannies, and it is not an easy job.

especially if you're coming in and you are not spending hours within a structure. And just like most things, a mold inspection, you do get what you pay for.

We've had the drywall screw that hits the pecs on the supply side that deteriorates three years later. A good inspector is going to use some tools to help find those things like infrared thermography.

It can help you determine if there's thermal anomalies, which could be moisture anomalities inside of a home.

Remediation Mistakes and Bacterial Contamination

They're going to use moisture meters. Boroscopes, where we can see behind walls. So just that level, what you're paying for a lot of your inspection isn't just the lab fees, but it's the inspector spending hours in your home crawling in your crawl space, you're looking in you attic, looking at your basement, and looking for those sorts of things.

And then also I think it starts with a good interview upfront. So when we get one of your patients that would call us or a client that calls us, it's okay, let's talk about the home.

There's an intake call. Help me understand what's going on in the areas in home where you are more reactive than others, but just really trying to get a good baseline of what's going on.

Any prior testing, any prior remediation. And then you develop a protocol to go into that home and really try to slew things out. So what would be red flags that listeners could look out for to know that their home was not properly inspected?

Number one, and then number two, what sort of like the checklist, the bare minimum of the things that a Good Inspector would do in contrast? So, um, all right.

The telltale is folks that say, okay, I was in my home and then we went away on vacation and everything was great. I got back and we're not feeling well again.

So that's the first thing that, that Hey, maybe there's something that that going on, but there is a, there was a really good, you know, we start a good inspection starts on the exterior of the home, looking for things like negative slope or looking from penetrations that can allow moisture into the hole.

so it starts from the outside. Looking for shingles that may be lifted or those sorts of things. And then you go inside the home and you start that moisture assessment first.

We're not trying to be nosy, but we want to look in every room, we're going to in underneath every sink, look behind your washer and dryer, looking for all those things using this infrared thermography.

There are certain things, if there's nail popping on drywall, underneath the windows, we can see where maybe there has been some moisture at one point in time.

So we're going to look for those sorts of things as well. And then if, say, there is dry wall that appears to have been damaged or water stained, that's where that intra-cavity sample comes in to find out what's going on behind that dry-wall without actually removing the dry walls unnecessarily.

So, and again, we ask our clients, are there areas in the home that you're picking up on malodors or you just don't feel well? You're reacting. So that can be helpful as you are trying to diagnose that.

And so do many of these homes just pass the standard mold inspection because they're mostly just doing air sampling or just a visual inspection? Are you suffering from Lyme disease or another complex chronic illness and aren't sure who to trust when it comes to herbal supplements?

Hi. I'm Dr. Mariah Hinchey, founder of Lime Core Botanicals. As a naturopathic physician specializing in complex, chronic, infection-driven illnesses like Lyme disease, I needed herbal medicine I could truly trust.

That's why I formulated LIME Core botanicles. where our herbal tinctures are handcrafted in small batches right here in Connecticut. We use the whole herb, never isolates, to preserve the full spectrum of medicinal compounds.

Every single step from sourcing to extraction is done with precision to ensure maximum purity, potency, and consistency. These are the same herbal formulas I used to heal myself and have used for years to help my patients and family members heal too.

And now I'm making them available to practitioners and patients everywhere. Lyme Core Botanicals, herbal medicine you can trust from a doctor who lives this work.

Learn more at LymencoreBotanicles.com Yeah, I think there's a core, so the visual inspection is the first part and then you do the sampling. So to answer your question again, it's two parts.

One, a lot of inspectors don't really know how to read that data very well, to be real candid. They'll look at the bottom line and say, okay, it's less than what's on the exterior, so you're fine.

But it could be a whole different type of mold that's only inside. We should have what is known as a relative distribution of bioaerosols. What that means is we should roughly the same types of molds on inside versus the

outside and roughly same percentages.

Unfortunately, most inspectors don't understand how to read those reports accurately. And then there's an over-reliance on air sampling. Molds don't grow in the air, they grow on surfaces.

That's where that surface inspection is so important in surface sampling, molds go through sporulation cycles, just like flowers go to blooming cycles.

And so not always sporulating, so they may not catch those spores in air because it's off cycle. Or it could be airflow restrictions or things like that.

So that data is just one component to a good assessment. So once you've found the mold and you're going through remediation, what are some of the most common mistakes that you see done during remedation that actually makes the home environment even more unhealthy after?

Yeah, great question. So the biggest thing is really lack of engineering controls. A good mold remeditation is going to be removing building materials which cannot be effectively treated.

That's per the EPA. And so if you have to do that, then you're, you want to pull up good containments, install air filtration devices, like commercial HEPA air scrubbers, uh, and put those engineering controls in place.

That way you don't make it worse before you make better. Whenever you mechanically disturb, it does get worse. And we have, we see a lot of the clients that will work to a, a DIY or they'll hire a handyman.

and that's unfortunately the outcome. The other thing is the EPA says that even dead mold has health concerns. And so we use an enzyme and botanical approach because those enzymes act as a catalyst to rapidly biodegrade the mold and it's clinically proven effective on mycotoxins.

So that's really important. If you come in, a lot of remediators will use bleach, hydrogen peroxide, or even things less caustic like thieves oil, I've seen proposals where they're just using dish soap to treat your home and water, and they charge an arm or leg for it.

But dead is dead. The goal should be to remove as much of those fungal contaminants as possible, whether you're using it through filtration, which is part of it, in addition to that, maybe an enzyme like we use for myodegradation.

So I just had this scenario happen with a patient. They took their entire home down to the studs. they had mold there, they treated it appropriately with something that was going to completely get rid of the mold, rebuilt the entire house, just did another dust test on it, as well as, I mean, actually did like three different evaluations.

The mold is almost gone. It's like down to a one, but now the actinomyces and the endotoxins and all of these other bacteria counts are off the charts.

So is this something that you commonly see in kind of like a botched remediation?

Choosing the Right Inspector and Testing Protocols

And how do we stop it from happening? Yeah. Great questions. And the answer is a little more complex. So when we talk about actinos, we're talking about bacteria as opposed to molds, right?

And those are bacteria grow a heck of a lot quicker than what molds do and some within hours. And so oftentimes with actinos, so it's a separate type of remediation.

That is more of sanitization as supposed to mold remedation. Um, and so the goal is to kill off all the bacteria at that point, right? And bacteria is go rather quickly.

Sometimes a lot of our Actino issues can be lifestyle driven. So if you have pets in the home, homes that have toddlers or children in them have more Actinos than other homes, that do not.

And so really. with the actinose, it's a matter of understanding why the, well, not much different than mold. So why is the mold there? You have to go back and say, why are the Actinos there.

What we do when we have those bacterial issues, in addition to running that Actino test, which a lot of our clients will do, but they don't understand where it is coming from.

We use adenosine triphosphate or ATP surface sampling. to understand, okay, and it doesn't tell if it's mold or bacteria, but it tells us we have microorganisms in certain locations.

So then we pinpoint in the home, here's where my bacterial problems or these microorganism are growing. Then we treat those and we kind of know the homeowners knows where those hotspots are so they can manage it on their own thereafter.

So it's not a situation where it is like the actinose were there in the beginning and so was the mold and then the mould was treated. So now the Actinos is overgrowing because of the way the mode was was treat.

That was always my understanding. Am I incorrect? I don't know that you're incorrect. I would from what we've seen is that it can be oftentimes two separate issues.

Okay. Is that something that you are looking for though, as an inspector? Like, are you looking at Actinose in the beginning, like before the remediation would even start?

And are your looking it in in end? Yeah, so that's where that intake call comes in. If we have someone that is following, say, Dr. Richie Shoemaker protocol, where Actino's is part of that protocol for SERS patients, then absolutely.

That's going to be part If we're working with a more functional medicine doctor that doesn't follow the actinose or use that as part of their equation, then that's going to be something that is not part our standard testing.

There's so many things. We do a lot of VOC testing for chemicals because a line of patients are chemically sensitive. That's where that intake call is really important so we can start out with the right diagnostic test without overwhelming the pocketbook.

Well, that's good. So you're doing more than just the mold and bacteria testing. Oh, you have to. We've launched due to demand heavy metals now inside of a home as well.

Yeah, it's really listening to what's going on with the client and in their house and then starting out the testing appropriately to address those issues.

That's great. So what advice would you give homeowners that suspect their environment is affecting their health? But again, they keep getting normal test results.

Yeah, talk with an IEP that's an indoor environmental professional that is perhaps referred by your health care provider that understands environmental illness and then interview them.

Do some good vetting. Ask them what type of tools that they take. What's the inspection include? Is there a protocol? A good inspection is going to tell us the what, the where, and the why.

And then the protocols, how to fix the problem. So address it upfront. Then the second to that, I guess, as we mentioned before, you get what you pay for.

Make sure in a good Inspection is pennies on the dollar to a remediation. The worst thing you want to do is make

health decisions or decisions for your family based on bad data.

So get a good inspection with good data with a Good Inspector. It's going to cost you more in the long run, if you have to keep searching and searching.

And I mean, there's nothing, I means, costing you your health is like the ultimate cost. Yeah, All right. So we've danced around it, but I want you to kind of like just put it straight out there.

What would a truly health focused remediation look like compared to standard remedial practices? Yeah. It's going to use, first of all, a product that is not a biocide, and it's gonna be right sized to the inspection protocol.

In other words, You don't go in and just treat everything. You want to take a surgical approach, right? Based on data. We try, we encourage all of our clients to make data-driven decisions.

Sometimes that can be a little, a bit difficult to do, but based on what the science tells you, this is the area that needs to be treated. And so we're going to recommend using a non-toxic product.

It's some, so many of the, uh, remediers in the industry use toxins to get rid of a toxic problem and that makes absolutely zero sense to me. So make sure that the, and most, most homeowners don't ask what they're putting in their home to solve the problem.

so ask, get the material safety data sheet and then understand the filtration. A lot of these, there's a fine particulate cleaning which goes down to 0.3 microns, which is HEPA, but a lot these contaminants are much smaller than 0.3 Microns.

And so it has to be a specialized remediation to get to the result that you're looking for. And then, I mean, just to kind of go off on a little tangent, but this is also going to ring true then for like these air purifiers and air detoxifiers that you're going be using in the future too.

Like they have to be specialized to able to pick up the fragments, right? That are going potentially still be airborne. So HEPA isn't good enough in a lot of cases.

If you are trying to filter out contaminants that are less than 0.3 microns, you absolutely right. And with these machines, and I have some myself, I keep one in the bedroom and one of my office, that's where I spend a lot of time.

But remember, those are treating the symptom. So if you have these contaminants, it's important to get a good remediation to remove, as we said, molds don't grow in air, so they're helpful, but they are not the be all end all for sure.

Do you a have a brand or a technology that you like? I'm looking at some things. Funny that you mentioned that I have a zoom call scheduled next week with the manufacturer that has a product that goes below 0.3.

Protecting Belongings During Remediation

And so we're looking at, we want to make sure it's well vetted before we put our stamp of approval on it. But there are some machines out there. We've been doing this for 17 years now and the advancements have been tremendous.

So we are really excited about some of the newer technology that's coming out. I'll have more for you in that one probably in a week or so. OK, great.

OK. So beyond doing the remediation right, obviously, and following the certain protocols, how do people or patients themselves protect themselves throughout the remediation?

And then I want you to also comment on the steadfast rule that if it's porous, it needs to be ditched. And if its non-porous then it can be saved. So walk us through self-protection and then walk as through like how do you deal with parting with a lot of your belongings and especially clothing and things like that because I can't tell you how many patients are like, no, we bought this special thing to wash our clothes with and so you know.

So I think it's important to understand fungal ecology and there's a couple of things. There's settled spores, which as we go to our cars, molds are ubiquitous and they're going to land on us.

And that's a settled sport issue. Probably not a problem. Um, and if we can launder those things and our clothes and be absolutely fine, they'll rinse out.

Then we have where there's mold growth and that, that that a whole nother thing. So if have these porous items like paperback novels or books or those sorts of things.

Then you just discard those. Now there is a protocol. We've treated wedding albums, things that have maybe not a lot of monetary value, but are extremely important.

And so we've, treated those as well. There's a, protocol to treat those, you, just have to make a decision. Is it worth the cost? So is there an ROI to a return on investment for doing that?

A lot of those things there can be. If it's other items such as furniture, wooden items, oftentimes those can get braided or sanded if they have growth on them and treated effectively.

There are protocols for that as well. But by and large, yeah, if it is a porous item that has bold growth, you're just going to have to discard it. The other side of that, it breaks my heart when we see people who literally gut their homes and throw everything away for no reason.

Again, a good restoration company should be able to walk you through that advice and explain the logic behind those decisions. Should you keep it or should you not?

So your company had roughly 40 inspectors across the entire United States. Is that correct? That's right. And that's continuing to grow. We have an inspector network throughout the U S and every state except for New York.

Okay. And how do you make sure that all of these inspectors are well-educated, following the same protocols, are a trusted inspector? Yeah, great question.

So again, it starts with the interview process with a client. And so we know what testing needs to be done. Then we have certified inspectores that will say, OK, we're going to go to Mary Smith's house.

It's a two-story home. And we need at least XXX testing here and here, and we'll do an environmental mycotoxin sampling. And then we have technology that when they're on site, we can actually see the pictures and videos.

We can kind of virtually be there to help out or manage that process. Then of course we get the laboratory data back and the inspector makes notes. So.

We train the inspectors on our protocols, and then we digitally or virtually be there. If it's not in a location where we have an office and we just send one of our inspectores, our company full-time employee inspector's out.

Okay. So if anyone needs a good inspector, which there are so many people in need, how would they reach you one your offices or find one you're great inspecters?

Yeah, just go to our website, it'll be at dot demodepros, T-H-E-M-O-L-D-P-R- O-S dot com.

Inspection Networks, Post-Testing, and Final Advice

There's a contact form that you can fill out or there's, uh, toll free number. You can call and go. They'll go, to a live employee and they can walk you through that process.

Office hours are typically eight to five and we span four time zones. So generally there is someone that could get them taken care of. That's great. I'm glad that a live person answers.

That is nice. And so to be clear, you go through the inspection process, the remediation process and then the sort of re-inspection and signing off on it.

So you have kind of like a one-stop drop, so-to-speak? We can. You brought up a really good point that I was going to talk about on the remediation. When you do that remediation, one of the things that I oftentimes see people do is they don't want to do a post-test.

We're pretty good at what we do, but we don' get it every time. Sometimes you get a stubborn colony. So you want that same data. A post test is really important to have done.

we use independent third parties to go out and do our post testing to kind of check our homework. But that is a critical part of that whole process for sure.

Yeah. And I think it's really important to have an inspector involved through the entire process. I have so many patients where they've had the inspector-involved in the beginning, and then they find the remediator, then that's it.

It's just in hands of the remediator for the whole rest of time. Wait, who's making sure that things were done correctly? you know, and that your home is safe to go back into and to bring new belongings into or your belongings that you have appropriately cleaned and whatnot.

I can't tell you how many people that I've had moved back in to a house that has still been contaminated and have to through the whole thing again. It's heartbreaking.

Thank you so much, John, for being here. Any last words of advice for our listeners? Yeah. So I would just say, again, make good data-driven decisions.

It doesn't always have to be scary. it doesn' always to have be extremely expensive either. There are projects that can be several hundred dollars and there's projects, that could be 20 or $30,000, but the thing is just to know.

Um, and so get, get that data, to get the understanding and then make the best decision for you and your family. At the MoPros, we will give, you mentioned some of your patients will have a DIY testing, the runner hurts me or an army or what have you.

And so we'll provide a free 30 minute consultation. If they have that data, if they're willing to send it over to us, We can walk them through it and consult and make recommendations at that point at no charge.

That's wonderful. What a great service to have. Very good. Okay. Well, thank you again for being here and to all of our listeners at home. If you found this episode helpful and valuable, please share it with a friend who's in need.

And remember together, we all heal stronger. We'll see you next time. If this episode gave you an answer, brought you new insight, or made you think differently, subscribe to the Lime Bites podcast and share with someone who's ready to take control of their healing journey.

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