How Do I Know if Mold Is Causing My Headaches? Transcript

(Transcripts are generated by AI and may contain errors)

Introduction and podcast mission

Hi there. I'm doctor Amelia Scott Barrett. I'm a neurologist and specialist in headaches with a background in functional medicine and biohacking. My own personal journey has brought me to truly understand what it means to live with migraines.

So I know that what we all really want is to heal from those underlying conditions that are causing the headaches, so that we can get back to the life and the people that we love.

Because of this, it's been my life's mission to empower others to take charge of their health. Join me today as we interview leading experts to uncover the latest cutting edge medical techniques and the most actionable health insights to power your health journey.

This podcast is reaching you thanks to Doctor Talks. Doctor talks aims to empower 1 billion people to get educated about their serious health conditions.

Visit them today at Doctor Talk's dot com slash calendar to learn about upcoming summits. Hi everybody. Welcome to the Reboot Your Brain podcast. I am Doctor Amelia Scott Barrett.

I'm a neurologist and I specialize in helping patients with headaches with high tech solutions. When medications aren't working and I am super excited about my guest today, Doctor Lauren Tessier, because she specializes in mold.

And I think that this is really an under-recognized cause of headaches in conventional medicine.

Meet Dr. Lauren Tessier and mold exposure basics

It's not something we test for, it's not something we treat, but it is something that is contributing to headaches for an awful lot of people. So super excited to be able to share this information with you.

So, Doctor Lauren, tell us a little bit about yourself and, the work that you do. Absolutely. And of course, thank you for having me here. I'm very excited to be here today. It's an honor.

So a little bit about myself. I am a licensed natural path acquisition, licensed by the beautiful state of Vermont. I have been in practice here for just under ten years and seeing mold cases, realistically, for for that amount of time, I became, certified in, the sirs chronic inflammatory response mold world.

Beyond that, I became involved in a international, educational nonprofit for practitioners that teaches practitioners how to go out and treat, environmentally acquired illness.

So essentially, illnesses that are a direct result of the things in our environment. And I find that so many people don't know if they have been exposed to mold or not.

So I am a perfect example. I did, my a small kitchen remodel just replace the countertop. Two years ago. And when they took out the counter, they saw mold behind the kitchen sink.

There had not been, a backsplash when I first moved into the house. I was all excited. I was going to make my own backsplash. Well, I had three kids at the time.

The backsplash never happened. And so what happened instead was water dripped down behind my countertop and there was mold all along the wall boards. Behind my kitchen sink.

I never would have known. Never would have had a clue. It's behind the, you know, the back wall of the kitchen cabinets. So there was no way to see it.

So I feel like there's so many people out there who may have mold exposure and they don't even know. And so if somebody is having headaches, are there any clues that they can use based on their symptoms to figure out if they should go get tested for mold?

And for me, clinically speaking, the most common symptom is the brain fog and fatigue. And the headaches get rolled into there. And the headaches can either be like a sinus pressure headache or a tension headache, or migraine is headache.

They kind of pop up in a lot of odd ways, but really the big cornerstones are, it's the, the brain fog and the fatigue. And brain fog is such an unfortunate, such an unfortunate term for all the different things that we can see for people.

I've seen everything from difficulty with word recall, word finding, short term memory. Sometimes even a little bit of, like depersonalization, deep realization where someone feels like they're kind of, out of touch, out of tune with how they normally move through life.

Symptoms that suggest mold-related illness

You know, even simple arithmetic. I've done, a period of time where I was doing, Montreal cognitive assessments on people doing the mock ups for mini mental status exams, and I was floored by some of the things we were seeing.

So, yeah, a lot of the neurocognitive things are really the corners stone to what I see in my practice and what I end up treating a lot in my practice.

Okay. And that makes sense because mold is really more of a systemic, a global kind of, condition as opposed to just something that's causing one thing.

And I do want to point out that people with chronic headaches or having headaches almost every day or every day are definitely going to have some element of brain fog and fatigue, especially if you're not sleeping at night, if your headaches are keeping you up or if you can't sleep.

And that's what causes your headaches either way. There can certainly be that element of it, but I think it's a matter of degree. Right? So like if you're headaches are here and your cognition is kind of here in terms of what's bothering you, that may not be as suggestive as if your headaches are here and your cognition is here in terms of what's bothering you.

Like they're both bothering you a lot. It sounds like that may be a symptom that you really shouldn't blow off. You need to pay attention to that and go in and get checked out on my hearing.

You right. Yeah. So, absolutely. And one of the things that you just triggered for me to recall and share is that there can be a, a period and a timing.

And so if you're someone where, let's say so, for example, 85% of commercial buildings in the United States have either a current or past history, a current or past water damage issue, 85%.

And so what you'll end up seeing is that someone will come home on Friday. They really just like knock down drag out, go to bed Saturday. They do their stuff around the house.

By Sunday night they're feeling clearheaded. They're feeling great. They get back to work. 9 a.m. on Monday. By noon time, they are back in the pits again and they just drag all throughout the week.

So there is timing and curiosity that can definitely inform, a lot of this. Granted, not unlike other toxin issues, you can eventually carry an internal burden of these toxins in your body.

You can put them into storage, which can kind of, cause an ongoing exposure. But oftentimes at early onset, or early in this issue, you can see the patterning in interiority.

So that's really another kind of thing for people to look forward to or look, look at. In addition to the headaches and the brain fog sets the big symptoms.

That is a really good point. So if people are noticing that they feel worse every time they go to the same building, that could be another tip off that more might be an issue.

Yeah, that's a good one because I find that people with migraines are really observant. I mean, they really want to get better. They just, you know, they just need the information, the data about what kind of things to track.

And one thing that comes to mind for me is if it is a work exposure, you know, from one of those 85% of buildings that have current or past, water damage.

You know, these people may be thinking, I hate my job. I have to just leave my spot. You know, it actually is like a physical exposure to mold that's causing the problem. So.

Testing for mycotoxins and environmental exposure

All right, good to know that we need to pay attention to that. All right. So let's say that, you know, you have noticed this, you know, disproportionate amount of brain fog and fatigue.

You have noticed maybe that there are places where it seems to get worse. You decide you want to go get checked out. Obviously you need to find a good provider, but then what kind of tests might that person be running?

Or what are your favorites? Like, if there's really one type of test that I use the most in my practice, it is the urine, urinary mycotoxins testing. And that's because it lets us understand if there is a body burden of urine mycotoxins, we can't tell where they came from.

We can't actually tell how much is in the body, but we can use it as a screening to say, hey, this stuff's coming out of your body, let's track it, let's treat it, and let's watch and make sure that the numbers go down and correlate with an improvement in their symptoms.

So it's usually the urine mycotoxins test is the most common in my practice, paired with some type of environmental testing. And probably the more difficult thing between those two things is finding someone to appropriately test your home, your workspace.

That can be a really big rate limiting step in treatment. Interesting. I just want to rewind for a second to what you said about checking urine mycotoxins, because you're not saying check for mold than the urine.

You're saying check for mycotoxins. Can you tell us a little bit about that distinction? Yeah. Thank you for for asking for that clarification. So mold is the, organism.

It's the little living component, the little living unit of matter of fungi. Whereas mycotoxins are the toxins that are produced by that particular fungi.

And so there's there's a lot of, understandable misspeaking around this field. When people say, I have mold and it's, well, do you have mold growing inside of you or do you have the toxic reaction to what the mold is making?

So, in my practice, what I see the most is that toxic reaction. So I'm going to be testing for those toxic metabolites, which are the mycotoxins themselves.

Okay. So just to be totally clear, the toxins are made by the mold, not by your body's reaction. Exactly. So it gotcha. It's like the way the yeast that you use to make beer is going to make alcohol.

And that alcohol is toxic. Gotcha, gotcha. Okay. So then a urine mycotoxins test might be something that people would be looking at. And then I just want to go back to the environmental testing.

What does that usually look like? I know you mentioned that it can be difficult. What what are sort of the options there? What are your thoughts about how you rank different types of environmental tests?

Tell us a little bit more about that. So thankfully I get to talk about this here. So to kind of preface this for people, I do have a, YouTube video that's called How to Find a Good IEP.

So if they go to YouTube and they type in life after mold and the letters IEP, there'll be a ten minute video about how to find a good one. And an IEP is an indoor environmental professional.

If someone who's going to come in, they're going to do a visual inspection of the space, but they're going to come in with a lot of tools, with thermal imaging, with, thermometers, with, humidity meters, lots of different things to kind of get a really good grasp on what's happening in a space.

Yeah. It sounds like this could be a very big project, finding somebody and working with them. So I'm just curious. Tell me what you think the pros and cons are of something like dust testing.

You can get those kits anywhere. They're pretty cheap. Tell me your perspective on those. There's there's a few aspects to it. Depends on what type of lab processing that they're using.

Some labs will only use micro copy where they'll take whatever they catch on the dust. They'll put it under a microscope, they'll look at it and they go, okay, that looks a lot like Aspergillus and Penicillium.

And so a lot of people who do, home testing, they'll get their testing back and I'll say, you know, 3000 spores for ASP pen, Aspergillus and Penicillium.

Treatment, avoidance, and detox support

Well, those two geniuses are huge. They're huge, and a lot of them are nontoxic. But there's some really big toxic ones in there, like Aspergillus fumigatus, Aspergillus Niger in that group that can be tucked in there.

So you might have a 3000 spore count, but you don't know if it's a toxic one, or maybe a little bit more of an allergenic one. And so there's certain limits to dust testing.

There's another type of dust testing that uses, technology called miscue PCR. And the most common test that they have is called an army Army. And the army has some limitations because it only tests for the 37 most common molds in an environment.

And the limitation there is, well, if they're not testing for it and you catch something that is not part of the test, it will come back positive. If you're going to look at those, PCR tests to move gently with the overall score, pay attention to spore count.

But more importantly, pay attention to the species that are there and really understand if you're being presented with more of, a toxic picture of these molds or more of an allergenic picture with these molds, that sounds like the best niche for this, because it's a very inexpensive test, very accessible, to people.

And it sounds like really the best use of it is to figure out if there's any bad mold. And let's say this person who is having headaches, lots of brain fog, lots of fatigue, goes in, gets a urine mycotoxins test, something shows up, they do a dust test on their house or they have an IEP come in.

They do have some concerning types of mold in their house. Can you just give me kind of a bird's eye view of what treatment might look like, how long it might take?

I totally understand that. You know, different people are different. But what's kind of been involved, like, do you take in do you take it like an antibiotic for mold or what do you do?

So the cornerstone to treatment, and this is this can isolate is the hardest part is avoidance is avoidance. And that could be temporary avoidance. That could be leaving and staying in a different space for a period of time.

It could be remediating the place fully. So that way you can live in it safely. So essentially getting out of the mold that you were exposed to when you became sick, that will always be the cornerstone for treatment.

Usually I do a pre detox with people where I prepare them to do a detox push with a lot of heavy duty anti-oxidants and Bluetooth I and NAC, but a lot of people can't have that, liberation of those things from storage into their system.

And so I do a lot of pre detox work. So that way people can then move into that part where we are actively detoxing them. We're pushing on those detox pathways.

Got it. Okay. So it ends up being supplements gut health those sorts of things that help people. I guess you're really helping your own body clear the, effects of the mycotoxins, right?

Yeah. And very rarely I'll use an anti-fungal. But we have such a growing issue with antifungal resistance. And I find that you don't need antifungals as often as some people do.

I usually find that people's toxic burden is coming from their environment rather than like a sinus colonization.

Prevention resources and closing remarks

But probably, you know, a handful of cases do really well with an antifungal. Do you have any resources for people who would like to learn more about how to prevent mold from impacting their lives?

Yeah, absolutely. So on my website, Life after mold.com, if you had there, there'll be a little pop up there that'll say, hey, do you want my mold prevention 101 booklet?

And what that booklet does is it walks you through your home and all the common places where you could bump into water damage. And so it really gives you, a nice tangible to, to say, okay, these are the spots I should look out for, or even these are the spots I should track for my home health.

Or these are the spots that if I'm feeling crummy, I should go investigate to see if there's an issue there right now. So that is the, more prevention 101, mini booklet available on my website.

Awesome. Thank you so much for sharing that. Well, thank you so much for being here today as well, Doctor Laura. And it was, very educational, and helpful, I think, for a lot of people with headaches to learn about when they should think about mold, how to get tested, and what treatment might look like.

So thank you so much for sharing your expertise here today. Thank you for having me. It's been a pleasure. Take care.