Introduction to Dr. Jill Krista

So our next speaker, is a very special person, doctor. Jill. Krista is a pioneer. In the world of medicine. She's a natural doctor, bestselling author, devoted educator and creative innovator.

Her superpower is to make complex medical concepts, simple and really digestible for the average person. But the Jill's passion is to elevate the well-being of the planet via the well-being of her inhabitants as well.

Which is us, which is wonderful. Her books and memberships and online courses support so many people. Of those people who are really wanting for more concrete steps in the right direction of their ultimate health.

She focuses on conditions that causes injury to the brain and the nervous system, which is why she's on this summit, including mold and infections and infections, pans, pandas, lung disease and concussive injuries, and traumatic brain injuries.

So today we're getting into a lot of interesting topics, and I can't wait to bring her on. So we are going to bring her on right now. So I'm so excited to have you on because today's discussion will be something that very few people, understand or hear about, whether it's in the medical community or patients and whatnot.

So thanks for coming on, I appreciate you. Thank you. Thanks for the invitation. I'm excited to talk about this. Awesome. So, you know, we live in the toxic world, right?

There's a lot of toxins that are around that weren't here, just, you know, 150 years ago. Right? Right. And so those toxins can either come from infections that can come from pollutants and stuff like that.

Now I'm in Houston, Texas, and in 2017, Hurricane Harvey wrecked my life. Got flooded and had to remediate and and so this topic of mold is a big issue.

How Mold Exposure Affects the Body

Not just in Houston, but, you know, especially after Hurricane Harvey. And we've had, you know, for the floods after that as well, not as extensive. And so let's dive into this concept of should we really be worried about mold, and if so, how does that really affect humans.

Right. Yeah, a lot of people think of mold is just an esthetic issue like, oh, it's just kind of it looks gross. It makes the paint look weird. Let's just paint over it or caulk over it in the shower or something like that.

But it is so much more than an esthetic issue. Mold can affect your health in almost any system, almost any symptom. So it just which that, you know, that doesn't narrow down very well for people.

But it's important for people to understand that if you can see mold it's definitely affecting you, but it may be affecting you. Even if you can't see it, it could be trapped behind building material.

It's microscopic, and mold makes you sick with the spores, the spore fragments, which is when dead or dried. I don't like to say dead spores because any whole spore can become live again.

So when dried mold gets broken up into little pieces that one spore of mold can make up to 500 fragments. So it can make you sick with spores, spore fragments, chemicals that mold secretes when it's just actively living.

We can talk about some of those. And then the the thing that creates most the symptoms in my patient base is mycotoxins. And these are intentionally made by the mold to compete out other living things, other microbes.

So if it finds that sweet spot of a lot of humidity, a lot of clutter, a lot of the food that it likes, it doesn't even need to be a flood. It can actually just be high humidity that can grow mold indoors.

So it doesn't matter where you live now. It could be it doesn't matter if you're in a dry climate or a humid climate or, you know, on the coast or near a lake or up in the mountains, our indoor environments are all pretty much the same, because humans tend to like about the same temperature and about the same humidity, but we don't control our humidity well enough, so we are all potential movers just by the way we build our homes.

Mold a set of dirt. Yeah, it's a yeah, I kind of refer to it as like it's like an the Navy Seal of the microbe world. You know, it can just hunker down and wait out in a very stealth way until all of the growing conditions are perfect for it.

And it can just go, yeah, right. So let's talk about symptoms. What are the symptoms people experiencing the most common symptom is fatigue. That's the there's a lot of cases of chronic fatigue syndrome that are tied to mold exposure.

And that could have been mold exposure from 20 years prior. So the mold can kind of move into your body and you become the mold building. So you can be walking around with that moldy building in your body 20 years later, ten years later, five years later, and no one's connecting it to mold.

And so fatigue is really, really common. And that can be for a competitive athlete. Maybe their VO2 max is going down and they don't understand why. So it can fatigue you in any level that you're starting from.

So if you're starting from kind of your normal standard American diet, sedentary lifestyle, sitting in front of a desk all day and now, you know, sitting in front of zooms all day, that fatigue can start to look like fatiguing of the most metabolically active, tissues in the body, which, of course, is the brain.

You know, the brain. Then you're going to see that then as brain fog, cognition issues, learning difficulties, memory difficulties over long standing time, it can actually go into dementia.

And we see that with doctor Dale Bredesen, his work, he calls it inhalational Alzheimer's, because you can actually see those mycotoxins affect how the brain functions.

It can cause brain inflammation through the microglia and the microbiome. We can talk about that and anxiety or anxiousness. That's probably the most common symptom that I see in all my patients is that they have some level of I don't want to say anxiety, because that that conjures up an idea that it's like, oh, I don't have an anxiety disorder, I don't have panic attacks, but this is anxiousness.

So an inner sense of something isn't right, like something's not right. I'm unsettled, I can't rest, I feel anxious, I and that may translate into irritability.

That may translate into depression. It just depends on which side of the coin you you go, you know. So anxiousness is quite common. In the, in the brain, it can also be headaches.

We see a lot of migraine headaches, cluster headaches, vision problems. The eyes get hit really hard with mold. This is actually what the military uses.

They use a vision test to see if their soldiers have been exposed to bio toxins, similar to mold and mycotoxins. And Doctor Shoemaker has. I'm not shoemaker trained, but he has popularized this test, and it's a very effective test because of how hard the eyes are hit.

So you start to like you go get your eyes checked and get glasses, and two weeks later, like, I don't know what that eye doctor was doing. These glasses don't work.

And you go back and you get them checked and you go back and you get them checked, and you get them adjusted and get them adjusted. That's mold. If that if you're in that situation, then we can see ear ringing very

common.

So this is all the head stuff I'm talking about skin rashes. And of course sinusitis. So drippy nose post nasal drip sinusitis that won't necessarily happen if you're only exposed to the mycotoxins, but if you're exposed to the mold and mold spores, then you'll get more of the sinus symptoms and people will.

We'll describe like sore throat or kind of like congested throats.

Symptoms, Misdiagnosis, and Family Impact

Or they feel like that their lymph nodes are kind of swollen all the time. So that's just to hear. And then you can go all the way down. So there's gut problems.

There's of course lung problems, breathing issues, hypersensitive lungs. Asthma has been connected to mold exposure specifically the spores and fragments.

Lot of gut stuff. We you see Sibo, dysbiosis, food sensitivities. And then because the mycotoxins are toxins, we'll see toxin based problems like, chemical sensitivity, sensitivity to fragrances, not being able to fill your tank with gas because you get a headache from the fumes.

Suddenly you find that you're, you're losing. And more and more and more foods that are making your gut not feel good or your body not feel good. So as this is like as we're moving down the chain, you can see that it's that these spores, it's immune problems also bladder.

That's one of the most keynote symptoms with mold is irritable bladder. And that's because we get the mycotoxins out of our body by peeing them out. We also get a rhythm in stool too.

So that's why those two systems are so affected. And then a keynote also on the skin is going to be itchiness. So if somebody has just kind of I hear all the time, people say, I have this one itchy spot like right here.

It might be globally itchy like meaning all over their body, but commonly when there's at one single itchy spot, then I know that they have some kind of fungal overgrowth in the body and we go searching then to rule out mold.

Let me see if I got them all. There's so many. And that's so that's why it's getting missed because it's like it's kind of like Lyme disease where it's the great imitator.

So, but what I did in my practice is I created a questionnaire so that I could determine who these people were. I was starting working with Lyme patients, and then some of those Lyme people just weren't getting better.

When we would treat, treat the infection, you know, and I thought, when the world is going on with these guys, and in one of those patients, they found toxic black mold in his home.

And that's when I started doing all the research, like, oh, I wonder if mold is what's going on with these other people and these other people. And it turned out, yes, mold exposure.

So this questionnaire, if anybody wants it's on my website. It makes it so much easier to determine because you get a score. So that because as I just went through all those symptoms, you can see that that didn't really they didn't narrow it down, you know, because those are pretty general symptoms that could happen to anybody.

So getting an idea of like, okay, lots of people have gut problems from other things like like roundup, glyphosate, they have gut problems from motility issues and stress and that kind of thing.

When is it mold? That's when we do the clustering of the symptoms and then see. Yeah. And what is your website URL. So the listeners. Yes. You bet doctor.

Yeah. Save you the emails. All right doctor krista.com that's Dr. Christopher com. If you just do that slash questionnaire you can get the questionnaire from my book. Amazing.

So I know the people listening to this seems like, wow, there's just a lot of symptoms, you know, that are there. But I promise by the end of this, you'll know why they're actually there.

It's actually a lot more than people may think. So we'll break it down in just a second. But before we we get there, I want to talk about relationships.

I've seen relationships. Husband, wives, fathers, sons, etcetera, etcetera get really destroyed over this sort of the, the mold issue because a lot of people can't find solutions to it.

The doctors aren't really finding solutions to it. And so it becomes all it's all in your head sort of thing. And they get prescribing antidepressants, antipsychotics.

Now we see that a ton. Yes. Let's, let's, let's talk about how to, how to address this, in the listeners for a second. When you, see this, what are some of your best advice for the people going through this, plus their family members and friends?

Yes. It's so difficult because not everybody responds to the exposure the same way. And that is more the rule than the exception. So we we see all the time that the what we call the canary, you know, the one that would react first and, you know, would have been the one that killed over in the coal mine when the gases went high.

Those people we need to honor and listen to them because they're protecting the rest of us. If they are having the symptoms, we have to see them as the canary in the gift that they are, that those toxins and that mold will eventually affect everybody.

Militaries around the world are using mycotoxins for bio warfare. They wouldn't do that if it didn't affect everybody, right? In medicine, we use mold chemicals for immune suppressing drugs.

We use mold chemicals for mold mycotoxins as chemotherapy because they're so effective at killing certain tissues. So if they didn't harm everybody, we wouldn't use them.

Right? If it was like, oh, it's only this one. And the cancer areas are usually like somewhere in the 10 to 25% of the population are going to be the people that are going to react first.

And I would say react first, because there will be reaction of the other ones. And typically it's going to be women because the the mycotoxins are fat soluble and women just tend to have a higher body fat percentage can do to.

And that's totally normal. Non-judgmental is just fact. And so they're going to accumulate them more so than somebody who has a lower body fat percentage.

Genetics plays into it. Your previous exposure plays into it, your diet plays into it. So if you have a kid who is going to school and is eating junky diet at school, and the parents are like taking salads to work, well, the kid is going to react first and they may react to something like behavioral issues because like you said, people say this is all in your head.

Well, if it's certain mycotoxins, they are in your head, they do cross the blood brain barrier and even if they're not the ones across the blood brain barrier, there are some that can cause leaky gut, which causes leaky brain.

And then those micro toxins can get right in there, and then we can soak them into our sinuses. Our sinuses are an amazing place where things can soak into the brain.

So more of the exception that everybody reacts differently. And I commonly will ask, start to ask the non symptomatic people about some of the other things that we know those mycotoxins.

So let's say we found mycotoxins in one of the people that may or may not correspond to their current building issue. If it was a past exposure and they're bringing that old building with them, then it won't correlate.

But we do start. We do know certain mycotoxins past certain symptoms. And I will start to ask the other family members, are you having this go on? So classic one is the mom is sick.

We have a kid with behavioral issues and getting sick all the time, or not recovering from colds. And then the dad is irritable and says these two here are crazy because the rest of the kids are fine and I'm fine.

And I say, let's test your testosterone. And you know what? It's low all the time. So a lot of these molds are going to reduce testosterone. So the man doesn't necessarily feel it as a mold symptom.

But he's losing muscle mass. He's having sleep issues. He's having irritability and lack of patience. That's kind of the classic picture. And so when we start to like make those connections.

So this mycotoxins is hard on the kidneys in the liver or this mycotoxins is hard on the endocrine system, the hormones. Let's do some testing in those realms and see if you're being affected, even in a tiny way.

And sometimes then just doing lab testing, you know, because their body might not be reacting, but we can still see micro toxins. They're not reacting yet. And so for those who are seeing, we're seeing mycotoxins.

Why SEO toxins, not micro toxins. Really common misconceptions about the spelling. But the word micro amico actually means it's coming from mold. And what Doctor Krista said earlier about, chemo therapy, immunosuppressant drugs.

So there's a drug called Michael Finley. It's actually from muscle toxins. But that's not the only one. But the word is micro. Micro. So, you know, we now know, you know, I have an understanding of why some people are affected and why some people aren't.

So let me just tell you what I think. And we'll do a little back and forth, just a little observation. So I look at tons of brainwave data, EEGs, quantitative EEGs and whatnot.

So one of the things I noticed is, able to we're able to pick a, the mold effect on the brain pretty effectively. Nice. And, what I notice is that, almost every person who are susceptible to Monroe's, who has come into contact with mold, tend to have hypersomnia.

Hypersomnia means that the transition between awake to asleep so fast that people don't even notice. And if it's like, oh, I'm having some brain fog, or maybe just the brain farts, right?

And some attention issue. In adolescence, we're seeing something called high beta spikes, which basically means that when they get home from school, they're gonna be super giddy and not listen to you.

You know, similar to sort of the ADHD type of symptoms. And then we're able to see huge visual processing delays affecting the visual cortex, which is the area of the brain that there's, delayed, reception of light information and color information.

And then we're able to also see preferentially, these the areas that are affected are usually the areas that correlate with like chronic sinus disease, chronic societies and stuff like that.

Right. Yeah. So from a from a data analytics standpoint. So we call it correlated that data with symptoms. And there's a there's a few things that that pop up.

Why Mold Illness Is Often Missed

So those people with like obstructive sleep apnea and upper airway issues and tend to be affected than those

without as well. And so on. The brain map, the the, the mold toxicity looks like acute obstructive sleep apnea.

Yes, yes. That's what people then they go get a sleep study. You know, I sign up for a sleep study and they say, no, you don't have you don't have obstructive sleep apnea.

And I'm like, yeah, but you have you have, you know, sleep issues for sure. That's how I love now oral rings and things like that that people can track their sleep.

And it is amazing how you get someone out of their moldy environment. And the sleep corrects right away. It's like the body knows that is the most important thing for it to be doing to train its brain.

You know, we drain our brain while we sleep, so if it's full of toxins and inflammation, that's, you know, the can says, let's get to the sleep stuff, you know?

Absolutely. And on the cover, a couple other, interviews on the summit, we talk about this process, of lymphatic drainage and detoxification and a lot of people with like, narrow palates and upper airway issues and gum disease and stuff like that tend to have literally like impaired draining of toxins, from, from the brain, which we now call lymphatics, the lymphatic system.

At this point, static system, similar to the lymphatic system, actually is able to, you know, sequester a lot of the toxins coming in. And so what happens we see in people are just continue talks and build up.

And that's why it mimics a lot of other diseases and disorders, especially in mental health. You know, as well. And so one of the things I noticed, I don't know about you is that a lot of people waking up with neck pain even before the exposure.

So there's there's issues that were there previously. Right. Then they get it with mold and then all these other issues kind of accentuate you notice that as well. Yeah. Yeah.

Oh yeah I'm I, I say the mold just finds your Achilles heel and and runs with it. Yeah. And in children who are raised in moldy environments, they do get that.

They call it the allergic facies, which is, you know, narrower and more protruding nose and, you know, more mouth breathing. And they will develop narrower palates.

So part of the treatment is not only addressing colonization in the sinuses, but working with a holistic dentist that can work to broaden that palate out so we can get some not only increased airway but also increased lymphatic drainage from the brain.

Right. And then those kids and even adults with like tongue ties as well, have the tongue tethers so much to on the bottom of mouth they can't really occlude the top palate.

So there's less air coming into the nose and less air coming to the nose means there's less nitric oxide being produced. And nitric oxide is a natural detox.

Or in the mitochondrial stimulators, that helps people regenerate. And this is why, this this simple fact is, is one of the main reasons why, you know, I think mold is such a big issue.

It's not really talked about. Well, let's dive into, why is it not talked about like I didn't learn this and med school residency. What why is is not talked about?

And why is this something that is kind of pushed aside by, by a lot of, a lot of doctors and people? It's our system, our system based on randomized controlled clinical trials.

So you I just talked about all of these drugs that we use mycotoxins for, for oncology or cancer fighting for immune

suppression. We know they are carcinogenic.

We know they're toxic. We know they're teratogenic, meaning they cause birth defects. There's a lot we do know about them. And so what that does is it puts it in a class of we can't purposefully medical ethics wise, we can't purposefully expose people to the toxin to figure out what gets them better, because the ultimate solution for any toxic illness is avoidance.

You know, just don't be exposed to it. Well, in cases where you have been exposed to it, or especially if your sinuses are colonized, you're continuously being exposed to it a right up to your brain, right up writing that olfactory bulb, you know, and breathing them in.

So if you're already colonized, you are being exposed to them. So but we can't create or craft a study where we purposefully expose people to figure out what gets them better.

So there are no that's what I get a lot of kickback from, from doctors are like, you know, I, I'm on a mission to expand the definition of mold related illness.

If you look on the CDC, it's all spore based stuff allergies, asthma, hypersensitive pneumonitis, sinusitis. Okay, there's a lot more going on with mold illness.

And the because medicine isn't saying mycotoxins are a problem because we don't have randomized controlled clinical trials. Now, the industry the indoor environmental professionals also say, well then that's not a problem.

We don't need to test for those. So it's been really fun now to see things like real time lab where they have mycotoxins, dust testing. I wrote about that in my book.

That is a wonderful forensic test to find out if you have mold brewing, or if it was brewing at one time, to the point where they were making mycotoxins.

You can test this in your environment. We now have the ability to test it in a body as well, in different ways. Each test kind of has its strengths and challenges, and so we try to match the test to the patient and what they have going on and what question we're trying to answer.

And now we have ways to test this. And the more we can validate that, I'm working with a group to validate my questionnaire, and we're working to try to tie certain symptoms to certain mycotoxins.

The more data we get, that's going to be more observational, retrospective, I think would be better that we're never, ever going to be on the randomized clinical control part because we can't let's medical ethics.

So it's not taught. Right. Bureaucracies. Yeah I know let's let's stop doom and gloom here and create some hope. Yes. Let's talk about treatments, prevention and all that stuff like that.

What is your approach in to treatment and how do you decide who gets what? Yeah, it's a great question because this is individualized medicine. You know, we just talked about everybody reacts to it differently.

So everyone needs a slightly different treatment. But when I sat down to write my book, I was just looking at my total process and realized, wow, I kind of have a process.

You know, I kind of have a way that I do this and the way that I came up with in my mind, my visual mind was this is kind of like peeling an orange. Yeah.

You have to do the outer layer completely and then you can pick and choose the sections on the inside. So I have five basic steps. The first one is avoidance which we just talked about.

Treatment Approach and Structured Water

Second is fundamentals. Then protect then repair. And that's protecting repairing from all of the ways that mold can make you sick. And then fighting back the fungus.

So what happens when you've been exposed, exposed to a mycotoxins and mold environment is that the immune system starts to reduce to the point where you can't keep the fungus away.

You know, we all have fungus in our sinuses. You have it in yours. I have it in mind. Healthy people, sick people. It isn't the mere presence of the fungus in the sinuses, it's that the sick people who've been exposed to water damage, building their fungus is now making mycotoxins.

So they have mycotoxins in their nasal washings where healthy people do not. People chronic fatigue have mycotoxins in their knees. Washings healthy people do not.

So what we need to do is fight back the mold. The good news is avoidance takes care of 50% of the cases. And we see this from occupational studies. Probably works more if you're it's where you work rather than where you live, because you're not sleeping in it.

Because we do so much repair when we sleep. But it's the happy news. It's a coin flip. You know that half of the people that get out of that moldy environment, their body does all the rest of the rebalancing themselves.

Half of the people need some treatment. And so step two is fundamentals. This is all the stuff you do an idea. We talk about the kind of like in naturopathic medicine.

We call it basic treatment guidelines. You know, getting your sleep regulated on a circadian rhythm, getting your diet corrected, finding the diet that's right for you, the timing of eating it's right for you is intermittent fasting a better meal plan for you?

Moving your body some kind of spiritual or energetic practice, all the things, you know, get some counseling. If you have trauma, you got to work through.

So that's fundamentals. And then and water, water, water, water is so important, the kind of water that we drink. I found that things that more structured water helps pump these toxins out a lot more effectively.

So the fundamentals, this basic treatment, you know, basic clean living, when we do that fine structure water and what that is. Yes, I think I'm not an expert, but I love it.

I have a structured water machine for myself and I it's out of all of the things that I've ever done other than hyperbaric oxygen therapy. It has created such profound improvement in my energy.

And so I experiment on myself first. And I'm working with, you know, kids of pandas and pans. And it is amazing. You know, it helps them detox and sleep better and, you know, all the things that we're looking for are so structured water is there's a great book by I'm going to mess up his first name, Jared Pollock.

And it is the fourth phase of water. So water can be liquid, it can be frozen, it can be steam. And then there's this fourth phase, which is structured water.

And what this is, is basically if you it mimics what water does when it bounces down a, brook with rocks or comes over a waterfall or crushes over as waves, it organizes, it charges and organizes this water to become what they call an exclusion zone.

Water loves itself. It loves to be with itself. So if we give it the opportunity to charge enough and to bring more hydrogen, it's basically to oxygen is in three hydrogens instead of H2O.

And so we can get and actually I probably said that wrong because I think there's another H in there. That's why I said I'm not the expert in this. So I'm just me.

But this water will start to stack on itself. And it loves to be with itself. And what that does is it creates this beautiful toxin free hydrogen, hydrogen water that doesn't allow anything but water in there.

And it helps to hydrate our body in areas that are really difficult to get. Hydration to mycotoxins can get right in through the cell wall. They can get right in through into the mitochondria.

And that's why we use glutathione on a lot for treatment, because the mitochondria just get completely glutathione deficient, because that mycotoxins is sitting there.

When you add structured water, we can get that water into the cell. We can get that water to places that where it will be allowing in nutrients, but not allowing in toxins or actually in some cases, shoving those toxins out of the body.

Yeah. And those that are expert in structure water, probably listening to me and just cringing like a large you got so many things wrong. But that's the idea is it's the end goal is something that's pure something that repels a lot of toxins or negative charges.

Right? Yeah. And it's physics. It's actually, it's it's very it's it's relatively easy to understand when you understand that there's, there's repelling forces and attraction forces.

Yeah. For each other. And then the toxins also have a charge, especially mole toxins have a huge negative charge on the outside. They're not able to penetrate that.

And different places. So it's so cool. I'm also not a stretch of water, but I'm glad we're talking about it. It's one of the simpler things to actually do.

Totally. Yeah. I mean, when people look at the cost of machines to do this, I say, how many how much money you're spending on supplements every year, you know that we could you can get rid of a lot of them.

But just by getting the water, you know, I've seen the sickest of my mold. Patients are drinking reverse osmosis water. There's no life to it. There are no minerals to it, and it just dehydrates the body.

So I've said forever spring water, spring water, spring water. Now it's harder and harder to find clean spring water anymore. So now using a system that will filter it so we get clean and then structure it, which is mimicking a spring.

Yeah. Super cool. Yeah. With mold, a lot of our systems are hijacked, and we just want to take it back. You know, this is. Yeah, a lot of that actually does it.

You know, for us, it's great. And so, but let's talk about some other treatment and especially focus on intranasal treatment. I want to kind of get into this, my thoughts on this.

Well, the word intranasal, for those of you listening, basically means treatment of things that you put into your nasal cavities. So what? Why don't you start on that?

Yeah. When, Doctor Brewer's study in 2013 or 14, when they looked at the difference between a sick person and a healthy person. What? I was just saying, we all have fungus in our sinuses, but the sick people, they found mycotoxins there.

And that's when I just like I have been missing a part of treatment for my mold. Sick patients, you know, they were getting better, but it's like this, you know, and frustrating and timely and costly.

And I'm impatient. So, when I read that, I thought, oh, my goodness, the sinuses are a complete blockade for these people to be getting better. And it made total sense to me.

It made all kinds of things make sense. Why the brain, you know, because, like, I was just talking about the

olfactory bulb. That's a that's a brain nerve that reaches through our nose and through our, the mucosa.

So the the lining of our sinuses that reaches down so that we can smell well, those bare nerve fibers, mycotoxins can just slip right up in there. So there is this is a place where we don't have a blood brain barrier.

And so if you have colonized Asian, meaning you've become the moldy building. So the mycotoxins, over time, turn your happy sinus microbiome into a competitive pathogenic biofilm situation.

I call it bad guy biofilm. When you have that in your sinuses, now you are your own micro toxin factory. You're continuing to send those mycotoxins back into your brain.

That makes good decision making pretty tough. That makes keeping your mood balanced pretty tough. That makes having good sleep pretty tough because, you know, we're supposed to breathe through our nose while we sleep.

The body says, no, no, no, no, no. Wake up, wake up, wake up. You know, don't punch sleep. You're every time you breathe, you're giving me mycotoxins.

Wake up. And so you get a lot of a lot of this, you know, sleeping above the covers, as one of my patients says. So by treating this, I, I've done in the fight phase.

The phase is is whole body antifungals to try to get the body's microbial balance set again. I wasn't using intranasal till I read that study and when I added them, people got better. Boom!

So much faster. It was astounding to see the difference that that that makes. So yeah, we can use all kinds of different things in the nose for the less nasally affected patients.

We might just use probiotics. Maybe all they need is a little boost in their normal microbiome. For others that are more sick, we might use pharmacy articles antifungals in their nose.

So they do a nose spray, or they do a neti pot or these really cool machines that'll, you know, push, push it out up one nose and out the other nostril and in the large numbers.

Intranasal Therapies and Airway Health

Yeah, yeah. And then there's nasal and rhino or rhino clear. I'm, I'm forgetting all the names of them. But all these different devices are basically atomized stuff up into the nose.

We can use ozone, we can use essential oils, we can use honey. Manuka honey is fantastic. And one of the best ones in these times. These Covid times is propolis because it has activity against that as well.

It's an antifungal. It's an anti bacterial and an antiviral. So you're getting all of that colonization taken care of because rarely is it only a fungus problem.

When we get the most. So earlier you said you do using the formulas. But just be clear. Antifungals don't treat the mold issue. It just decreases your overall fungal species.

So your your immune system can, can do the rest of the work for us. Right. Exactly. Yep. And so let's, let's talk about at home things that people can kind of do.

And one of the things I always talk about is intranasal, treatments like I regularly recommend like in the box, you can put the little salt pods in there and clean the stuff out.

But I'll tell you something that's really interesting. So we've been working with the mold population for for a while in the practice. So, we started working, with an EMT doctor to actually work, terminate hypertrophy.

So for those who don't know, 20 shelving units in our face, that filters things out and every one of these patients has severe it's permanent hypertrophy.

And a lot of times they'll need science classes to open some of these, areas up and reduce the size. Not by stripping like the mold or the balsam, but by taking away what's called a sub mucosal layer.

So it just has a little more room for the air to go in at nighttime. And find that, that created this massive difference. But while they're doing that, he's also telling them to do the Novas and many parts beforehand and afterwards we're noticing a lot of these people got better, much faster.

And then when they do some of the intranasal treatments afterwards, whether it's for face probiotics and stuff like that, things just got, they get a whole lot better.

And so I think this, this idea that our body really requires, a very patent, airway into our sinus cavities and stuff like that is just remarkable, important for, for all disease states now.

And then we looked at Lyme disease data and we found the exact same thing. And then now if you look at the latest studies done on coronavirus, they're finding the exact same thing.

And so the correlation here is these are all toxin based illnesses right. That are there. And so the reason why I think a lot of there's a lot of symptoms are correlated with it is because it's just the way that our body sequesters toxins in different ways.

But if we're able to, to have this idea that, hey, we're. Yes, you can try to get rid of the mold as much as possible here in Houston. That's almost impossible here.

But also we have way to to figure out if your body's able to handle these, these toxins. I think that's where the sweet spot is. And that's why I don't want people to, like, kind of lose hope and stuff like that whenever it comes to to mold issues.

Because there's there's the solution. It just takes a lot of work to get there, you know? Yeah. And it can be easy, you know, I mean by using a systematic approach and really targeting the tissues that need it the most, like I write about in my mold book, you know, when people say, what should I take for this?

Which I take with that? I'm like, well, first we have to understand what's the most important nutrient for your body, and that is oxygen. We can go without food 30 days, water three days, oxygen, air three minutes.

What do you think's the most important thing we should be focusing on? So that's why I focus on this. You know, one of the one of the key things for shrinking germinates is to expand that palette.

Having an expanded palette will reduce permanent size as well. So having the dental sinus, you know, having that addressed is so important for for wellness.

Like it creates this massive interference field for for improvement. And I experience that in practice after reading Doctor Brewer's study and then applying that.

And now that is just gone on and on, you know, just proves itself over and over again all the time. Right. And what's the name of your book, by the way?

Break the mold. That's my mold book. And I have, should be out by the time this comes out. My new book called A light in the dark for Pandas and Pans.

I think it's right behind you. Is there a script? Yeah. Accidentally. Oh. How did that get there? No. Yeah. Yes. Continue placement. Yeah. So. So, So then the last, the last thing that we really touched on before we jump off is that, we how does, like, actual brain injury and concussions kind of factor into this, this whole picture?

Because that's a risk factor itself as well, right? Yeah. I am so glad you talked about that. Yeah. So any kind of TBI and it doesn't even have to be you got conked out unconscious.

This can be small bumps. They call it subconcussive if you have repeated subconcussive hits. So the classic, you know, soccer ball heading sports, you know, football across that kind of thing.

Motor vehicle accidents slips and falls on the ice. I mean, you don't have to be an athlete to have something like this happen. What that does is that puts the brain into a state of, of inflammation that gets kind of stuck, turned on, and that's that.

We're learning now a lot more about the microglia, which is the brain's immune system. Our brain is two thirds immune system, one third thinking parts.

Well that's wild isn't it? It's like now that tells you what's the most important thing that our body has decided that protecting our thinking parts is so important, that we're going to dedicate more tissue and cells to that.

The problem is when you've had, a TV or something, where which which chemicals can cause it, you know, mycotoxins can cause basically looking like you've had a, concussion.

But if a true blunt force trauma happens, those microglia can get triggered into the on phase. And they're supposed to if they're not in a soup of inflammation, they're supposed to.

Then when their job is done, trigger off into the office and then die and then let a new non triggered cell come into its place. Well, if you have a soup of mycotoxins or a soup of inflammation, because your body is loaded with mycotoxins, and once that microglia guy gets turned on, I joke in my pandas book, I call them the monkeys of the mind because normally when they're not triggered, they're just swinging around the branches of the nerve system in the brain, just looking for garbage and eating it up.

They do a really good job of keeping our brain clean, but once they get triggered and that trigger could be trauma to the head or chemicals they get turned on, and then there's not not enough anti-inflammatory in the brain to turn it off and get it out of the way.

And so they just sit there and scream like a monkey stuck in the tree, and the other monkeys come over, what do you what's going on? And then those monkeys get triggered and stuck in the tree.

They lose their appendages. They can't move around anymore. And so you get these localized areas of inflammation in the brain. And I'm sure you're seeing that on your scans that are really classically associated with where mycotoxins can go in the brain.

Brain Injury, Concussion, and Hormonal Effects

So if you have a previous concussion, you have previous sleep kind of trigger orrible microglia. And then you add the micro toxin and that easily triggers them.

Conversely, if you have a lot of mycotoxins in your brain because of the exposure you have is one of those that can get through the blood brain barrier.

Now you have that super inflammation that that blunt force trauma turns on the the microglia and they get stuck and they recruit others. And that's how we turn into a pandas and pans.

Right? Right. So for those of you listening to this, so this is supposed to happen. Our immune system supposed to do that. Because if it didn't we would basically be dead, if our system didn't trigger these things to happen.

So a lot of times, you know, we're, I think I think we feel like we can get through it. I'm gonna power through this, and I challenge everyone not to ignore your symptoms, because the later that gets dealt with, the worse it becomes

as well.

Yeah. So. And then there's, there's the, the endocrine fallout. I had a, peer reviewed article that I wrote for a publication. It's on my website. If anyone wants to see that there's a table in there I created, which is all of the hormones that having a brain injury can affect, because if a lot of our hormones are controlled from our brain and people don't think about that, you know, they're like, oh, it's an over thing or a thyroid thing.

Well, those are are taking orders from what's going on upstairs. Yeah, yeah. There's a recent study, looking at the sphenoid sinus, the venous sinus, for those who don't know, it sits right in front of you.

Pituitary gland. Your pituitary gland is the master switch for all hormones in the body from thyroid to adrenals, testosterone for melanin, progesterone, etc., etc..

And there's there's this correlation that those people have chronic sphenoid sinusitis basically filling up with gunk. Not necessarily more, but any mucus and gunk tend to have abnormalities within the pituitary that you can actually see on the MRI.

Whether that could be shrinking, whether that could be adenoma is basically all tumors, and that's one on them. And so this is brand new and it's and it's and it's shocking how correlative it is.

But I think it's not shocking because we understand that the sphenoid sinus is just part of our neural sinuses that's involved in detoxification and organism sequestering.

And that why would our hormones want to be balanced? Right. You our body's like, hey, shut down so you don't die. And that's why we're seeing so much like, you know, hypothyroidism and and, a lot of sleep disturbance and stuff like that.

Don't like, don't die but don't sleep. Yeah, yeah. Kind of fight off something. Right. And it becomes a sort of downhill spiral that we see a lot of people ensue.

But but it's it's, it's becoming more and more apparent now, over the last couple of years. And I'm glad we're, we're talking about and getting out there, you know.

Yeah. Yeah. I'm so impressed at the research. It's out there. That's that's part of what I'm doing now, is trying to translate the research into clinical practice and getting, you know, teaching doctors and that kind of thing because it's it's out there.

The researchers know it, and they keep doing more and more sophisticated research, which I haven't read the study. So I'm really fascinated. Thank you for sharing that.

But it makes sense. And the sphenoid is probably my favorite cranial bone ever. It's just so beautiful. It's, you know, shaped like this butterfly. And you know, it's a beautiful and very complicated bone.

But yeah, that that's, it all is playing into it. Like you said, the lime and the coronavirus, this is all our interface with that is our first field is the sinuses, our airway.

Yeah, absolutely. Well, last question I'm going to ask you, then we'll jump off is what do you know now that you wish you knew at the beginning of your professional training?

Wow. One thing, I've got a 40. Yeah, yeah. What do I wish? That is a great question. I think I, I probably breathing I mean, I know I, I mentioned it to patients a lot and before we had the science about it, I always felt like I was mentioning stuff just kind of, you know, and it's really important that you breathe.

You know, I didn't have the confidence to be like, listen, this has to get addressed. And now, you know, mindfulness and some breathing techniques have come up and we have more research and the aura rings and all

of those things, I wish I would have had more confidence on pushing for the simple things, like we were talking about the 33 three.

You know, that it's like it doesn't matter what supplement you're taking if you're not breathing. Yes, yes, I totally agree with, and and the concept of breathing and breath is reverberating throughout this entire summit.

Doesn't matter. I was a neurologist, psychiatrist and whatnot. Oh. That's cool. Yeah. And it's it's everyone's sort of moment. I was like, well, we didn't talk about breathing enough and every, every brain and mental health disease stay in disorder and mold is not no exception in Lyme is no exception.

So I thank you for coming on. This been an excellent discussion. I want to talk to you for a long time now, and, so real quick, how can people find you?

So your website is Doctor krista.com.

Closing Thoughts and Resources

Yep. You got it. Doctor krista.com. Yeah, I have a lot of information about mold on their video blogs that I put out. Nice and short for people with mold brain.

So you can learn a lot and, you know, and obviously this summit is going to be incredible for people. Yeah. And you have a question there on your website too, right?

Yes. The question the mold questionnaire is there. They can get their mold score and it gives them a probability of like, is this tipping toward mold or not.

And then you have some idea of whether you need to go down that road or amazing. Thank you for all the resources. Thank you for your expertise. And everyone.

This is Doctor Jill. Krista, I appreciate everyone listening. Thank you. Thank you.