Intro and podcast disclaimer

And we also see more insulin resistance when people are exposed to mycotoxins. You know, I had a patient that was an insulin-dependent type 2 diabetic and he was living in some mold and that got remediated and we actually, he wanted to go on sporenex.

He didn't want to do the herbs. But after he completed that round, he cut his insulin requirement by half. It was pretty crazy. He was like so excited about it.

But little things like that, that the environment can play such a role on our health. And yes, sometimes it's frustrating and it takes a long time and it's expensive, but we're looking at long-term health.

We want to make sure that when you're 60, 70, 80, that you're able to play with your grandchildren, you're able to go on vacations, that you're mentally still feeling good.

We want longevity, not just aging or living longer. We want to age well. you know, environmental exposure and hormones have so much to do with. You've tried everything.

You've changed your diet. You've detoxed. You've even moved homes. And yet, you still feel sick. Headaches, brain fog, fatigue that no one can explain.

What if it's not you? What if it's your environment? Welcome to Mold Microtoxins and More. I'm John Borden. Each week, I sit down with experts uncovering how mold, microtoxins, and environmental exposures affect your health and what real recovery looks like.

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As always, if you think you have a medical emergency, call your doctor or 911 immediately. By listening to the MolePros podcast, you acknowledge that you understood this disclosure.

Welcome to another episode of Mold Microtoxins and More. I'm your host, John Bodie, and today we have a truly exceptional guest joining us, Dr. Jen Flegar.

Dr. Jen, as many of you know her, is a double board certified physician in emergency and integrative medicine. She earned her medical degree from Lake Erie College of Osteopathic Medicine and completed her residency at

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Vincent's Mercy Hospital and a fellowship at the Andrew Weill Center for Integrative Medicine. She believes true wellness thrives when the body, the mind, and the spirit are aligned with God's design.

Diagnosed with Hashimoto's, she became passionate about autoimmune healing, hormone balance, and root cause medicine. Dr. Jin co-authored Eat, Sleep, Move, and Breathe.

and also serves on the board of the Invisible Disabilities Association, American Board of Integrative Medicine. And through her practice, Healthy, by Dr.

Jan, she provides virtual care and shares education as at-integrative Dr. Bom. She lives on Minnie Farm in Tennessee with her husband, four children, which sounds amazing, and a few guineas, as we may hear in the background.

She loves cheering at her kids' games, lifting weights and reading scripture and tending to her chickens. Her newest book, an international bestseller, The Paraminopause Reset, was written on a mission to change the health of 500,000 women navigating paraminopause, empowering them with faith-based, science-backed strategies to reclaim their energy, clarity, and joy.

Dr. Jen's path into integrative medicine

Dr. Jin, welcome to Mold Microtoxins and More. Glad to have you. Hi. Thank you so much, John. Super excited to talk more about mold. I love talking about it.

Fantastic. It seems to be pervasive throughout. But I'd like to get started. Tell our listeners a little bit about your journey in the integrated medicine and what led you to write your most recent book.

Thanks for asking. Well, went through conventional medicine school and residency in emergency medicine. I wanted to be a DO, treat the body as a whole.

The founder of DO Medicine, he was an MD, Dr. A. T. Still. He really wanted to heal the body and go back to homeostasis with the body. He was a Christian, you know, thought that our body could heal itself without pharmaceuticals and all the nonsense.

I was all for that and then became really disillusioned with conventional medicine, even as a DO working in the ER and seeing chronic disease. These patients were doing everything, everything I learned in medical school.

And the crazy thing was in the ER, I was just seeing all these chronic things. I thought I would be in the ER in and out, you know, helping people, doing some osteopathic techniques if they had the flu or a headache.

And then I wouldn't see them again because it was the emergency room. But no, I saw chronic disease, chronic patients, fertility problems, miscarriages.

And I'm like, wow, there's root causes for this. This is not how God designed our body to be sick all the time. And I told my husband that I had to go back and do a fellowship in integrative medicine.

And it was really important to me to become board certified and to do a two-year fellowship. And since then, I've done a lot of hormone certifications through medical schools and everything.

And I am a lifelong learner. I will never know everything. just had a brick and mortar practice that I just shut down last December actually coming up on a year now.

I know I'm virtual but in that adventure for a decade I was still working in the ER seeing patients in my practice and I was seeing the same mostly perimenopausal women the bulk of my practice.

Now I would also see a lot of weird things because I was the only one practicing that kind of medicine in the area, but these women were broken in perimenopause because they had all these symptoms and They were just getting gaslit at their doctors.

They were put on birth control and an antidepressant, which is not fixing the root cause. And it was just so frustrating. The other thing that's really interesting is we can compensate.

Our body is very resilient and can compensate for a really long time. So, but when you hit this perimenopause space, which is midlife for women, can start in their early 30s even.

We're seeing symptoms start more and more. But your body just can't compensate anymore. Your mitochondria are exhausted. And then we see these symptoms and conventional medicine just doesn't know what to do with it.

And these poor women are not feeling good. So this is kind of where and why I wrote the book. just really on a mission to help these women feel heard and also help them heal and find the root cause of why they're feeling this way.

For those of us who may not be lying, can you explain what is paraminopause? And why is that phase is so critical for women's health? Yeah, so perimenopause is before menopause.

So it's that space before total cessation of your cycles or periods. So women have a monthly cycle, and this is for fertility, the goal of getting pregnant.

And we have the follicular phase, that first half of the cycle from bleeding to ovulation. And then we have the luteal phase from ovulation until the next cycle.

And what happens during perimenopause is that cycle gets shortened. So usually it's the luteal phase that gets shortened because we have decline of progesterone is kind of the first sign of perimenopause.

And what also happens is we have erratic estradiol. And sometimes this can be caused to an ovulatory or we're not ovulating certain phases. Sometimes the egg quality isn't as good as we age.

So all of this is leading up to the stopping of our cycles, the stopping of ovulation, because we don't have any eggs left, any oocytes left, because we are ceasing being fertile, right?

Now, this usually happens mid-50s, but the time before that is a roller coaster. do not feel like themselves because we're having that decline of progesterone, erratic estradiol, and then that comes with a slew of problems that cortisol comes into play, insulin, all our hormones are just off balance.

And what happens with these women They go to their doctor or they push harder. So they start gaining weight and they actually do all the things they did in their 20s or early 30s to lose weight and it's not working.

It's making things worse. As I spoke about earlier, the things that their body was compensating for like like gut health problems. Now in perimenopause, their body is less resilient.

So then that actually is showing like more symptoms, they're more tired. So it's this vicious cycle. But the good news is, is that we can fix all of that.

And it's actually not hard. And I have so many perimenopausal women that came to me broken, and then they're rocking it and feeling good.

Understanding perimenopause and hormone shifts

So we can actually feel better in our 40s than in our 20s, because we have more wisdom and knowledge. So, you know, we're not staying up all night trying to cram for a test or eating bad food or binge drinking, right?

We're not doing those things because we have more wisdom. So we just need a little bit more wisdom around our hormones and the right story, like the right actual stories, the right books, the right places to go to podcasts like this to help guide us.

You talk about reset. Can you explain what that context means as it relates to paramedicopause? And then are there certain key pillars in your approach?

Yeah, so in the book, it's called a reset because a lot of women, they feel stuck. So we kind of need a reset. We need to kind of reset what we're eating, you know, our gut health and the body.

So we need to fix what's going on in the body, like liver health toxins, you know, mycotoxins are included in that. We need to just reset the food we're eating and how we're eating and we can also apply that to our cycle.

So we're working with our body and not forcing against our body and making our body angry and our cortisol increase. We also have to look at the environment.

So our environment is really important. And when we look at aging and longevity, The environment plays such a role in aging our bodies. So aging our mitochondria, aging our cells, our organs, that environmental factor, it really accelerates aging.

So if we look at things in the environment, mold can be one of them. Radon, if you've never heard of radon, I talk about that in the book because that's something that people can miss.

We look at what we're putting on our body because we absorb toxins in our body. If we're eating perfect, but we're putting on lotion that has estrogen mimicers or endocrine disruptors, that is going to cause problems.

We look at our environment of who we're surrounding ourselves around or what we're watching. I don't even watch the news because no, it's all negative.

So that's another part. And then spiritually, my personal story was, when I had always done yoga and then I really like doubled down on new age practices such as yoga when I went through my fellowship.

I was pretty deceived in it. It was darkness disguised as light. So we need to look at what we're filling our mind with. Should we be meditating and emptying our mind?

Probably not. We should be filling our mind with positive things like scripture. our spiritual component is big. And this can also be, who are you surrounding yourself around?

Not that we need to cut everyone toxic out, we just need to maybe limit it, but also be around people that are going to push us to be healthier and support us that way.

And then also something like music, the music we listen to. raunchy and gross or is it good? And then also, for example, like TV shows, like me personally, I don't watch violent shows anymore.

I don't watch that stuff, especially not before bed. And we know that if we are watching it, our brain perceives it as real and that's going to affect our autonomic system, which is our sympathetic fight or flight and parasympathetic rest and digest.

So if we're always in fight or flight and always feel like there's a threat, that's going to impact our hormones, our cycle, even belly fat through cortisol.

Like, we don't live in rest and digest as much as we should. I mean, it's everything from LED lights, which I'm staring at right now, you know, doing this podcast.

But right, dose that makes the, it's the dose that makes the poison. So in my house, we have incandescent, we can

still buy them. So we need to just look at all these things and is it overwhelming?

Super overwhelming, right? But my chapter 12 is not your chapter one. So, you know, you have to, you're not going to start sprinting. You're going to start with walking and then jogging.

So that's why, you know, the book, we go through it slow. It's kind of like a whole handbook and you do a little couple things at once. In 28 days, we hope to have a reset because We actually know with some of the new longevity studies coming out, they looked at people for just three months of changing habits and it decreased their biological age by, I think the average was like five years.

So we know that in a month time, in three months, if we do little changes, it impacts our longevity, our hormones, our mitochondria. So that's kind of why it's like a reset because it's a positive thing.

Kind of like how you reboot a computer or a cell phone when it starts acting sluggish. Sometimes our body needs that too. I think that's such a great approach because I would imagine with a lot of our clients as we're going through and we're trying to ascertain or assess what the environmental exposures are and they're going down this journey, it is so overwhelming.

But it sounds like your approach in the book is to just add some layers to where it's not so overwhelming. You can make progress incrementally as they go through that process.

Yeah, you know, and I'll tell a story about a patient because it's fresh in my mind that I spoke with her yesterday, and she's been my patient for four years.

We had her Hashimoto's engraves in remission, and then it just went out of remission. Her graves came back. last like May. And she was really frustrated.

And I'm like, you know, we haven't done everything yet. Because she hadn't approached her limbic system, her vagal nerve system, the autonomic nervous system, and EMDR, which is a kind of therapy which heals trauma, because if your body doesn't feel safe, it's going to keep getting triggered.

So it took, and we've been working on our gut health, working on cortisol, everything, but it was that, that's like the missing piece, you know, which is a pillar of health, you know, your body feeling safe.

And she told me yesterday that she made an appointment for EMDR and I could have cried because it took four years for her to do that. I can't force patients to.

The reset approach: diet, environment, and spirituality

to do things right that we know will help them they have to be ready for it so it was really beautiful so remember that like it's not it's not instant gratification like being healthy remediating mold detoxing your body from mold it's not instant gratification like everything else is supposed to be in this world, right?

Like it's usually if it's ending gratification, it's not gonna last long and it's not good for you. So just keep that in mind if anyone's listening out there and they just found mold in their home or they're ready to take this journey but they feel overwhelmed by social media, just it's gonna take time but there's also beauty in the waiting, okay?

Like and lots of learning in the waiting too. And, and I don't know about you, John, but me personally, type a recovering type a personality. I want everything done and I want it done fast and I'm very, um, yeah, like I'm high functioning.

Like I'm like, I want this done yesterday. Why is it taking so long? And really like the Lord has shown me with this move and with my business just, Hey, it's It's okay if things take time.

Slow down, enjoy your children, enjoy the guinea fowl, making their noises, the rooster. Enjoy it. This is what is

meant to happen. It's supposed to be slow.

That's also a dopamine reset, which is a whole other podcast. Yeah, so just like keep that in mind if you're listening and you feel overwhelmed like back off because you're fighting your body if you're if you're pushing too hard, you're not going to get the results you want anyway.

Very good. You talked a little bit about mold and mycotoxins and those impacts. What type of exposures have you seen in your clinical practice that molds or mycotoxins can have when it comes to disrupting hormones for your patients?

You've cleaned, repainted, and replaced filters. And still, you're not getting better. Headache, fatigue, brain fog? The doctors can't explain it, but your environment can.

At The Mold Pros, we specialize in uncovering what's hidden in plain sight. Our environmental testing looks beyond surface mold, identifying bacteria, volatile organic compounds, and even micro toxins in the air that you breathe.

Then we correlate those results with your clinical data, showing how your space may be affecting your health. Next, we use our patented remediation process to safely remove toxins, restore balance, and prevent them from returning.

It's more than just a cleanup. It's a science-based system designed to help your body heal by healing the environment first. If you're ready to breathe freely again, visit TheMoldPros.com and schedule your free consultation.

Because wellness doesn't start in the doctor's office, it starts where you live. Yeah, well, we have to think of mycotoxins as a terrain disruptor. Okay, so they're stressing the body, but they're also disrupting gut health and in that whole terrain.

So there's germ and terrain theory, right? So taking out the mycotoxins is important, like taking, getting out of the exposure, remediating, fixing all that.

But then we also have mycotoxins in the nose, in the gut, colonized. So we have to also deal with those. So the thing is when mold colonizes in the gut or in the nasal area, then they're producing mycotoxins in the body.

And then if you're also living with mold in the house, that's producing mycotoxins. They're kind of VOCs, like how we get low to no VOCs paint because they cause problems that we know.

So these are chemicals and they're invisible. Like sometimes you can smell that musty smell, that's a blessing because then you know something's going on but you you don't always smell it and then we know there's there's other mycotoxins or other things growing like as you know like asynomyces and stuff so this is like bad stuff you know we don't want a damp humid environment we don't want mold to grow so what happens mycotoxins so our body can get rid of these, can detoxify mycotoxins, okay?

We eat blue cheese, which has mycophenilic acid in it. We have patients that are on medications that have mold in them, mycophenilic acid for if they've had a kidney transplant or something because it's immune suppressive.

So our body can metabolize and handle these mycotoxins, but not in large, large doses. Not the worst cases I've seen, and I'm sure John, you can attest to this, is when it's in the bedroom, right?

In the bedroom window or in the crawl space, leaking up in the bedroom because we're spending so much time there. I mean, I've also had patients where it's been really rough, including my middle son was exposed to a lot of mycotoxins in his preschool when someone's at school or work.

So it's not just home that we have to worry about, it's school and work. So these mycotoxins, they get metabolized through the liver. So liver metabolizes them excreted in the urine.

That's why a lot of the urine testing for mycotoxins works well to know if we have an exposure. I have seen people so toxically burdened that they aren't even excreting well.

It's getting stuck in the liver as toxic metabolites and they're having problems excreting because they don't have cofactors needed for full detoxification.

So the problem is twofold with mycotoxins. Some mycotoxins act as endocrine disruptors or xenoestrogens and actually bind to estrogens, alpha and beta estrogen receptors in the body and actually make the body think that there's like estrogen dominance, more estrogen.

So we have that problem. And then we also have the problem of the mycotoxins clogging up the liver. Like if you have a drain that won't clog, you know, in your sink and there's like all that hair stuck in there.

It's draining really slow. So you have to wait, you know, for it to go down and it's disrupting your life. Well, that's what's happening with estrogen detoxification.

And we're seeing these patients more clinically as estrogen dominant. And then, you know, that's a shorter cycle. that's sore breasts, that's, you know, raging before their cycle, that's anxiety, that's palpitation.

So it's all these things, fertility problems. So these mycotoxins are really bad for the body in excess, okay? This is where we have to treat the mold exposure.

So I like to say you get patients first, remove them from the mold. Okay, I don't treat mold unless they're out of mold. If they are living in mold, well, we can do things to support that detoxification, like glutathione or NAC.

We can bind up the mycotoxins to help them get eliminated. We can support the liver with certain herbs like milk thistle, or dandelion root and make sure they have enough B vitamins to support phase one and phase two detoxifications.

And then we want to make sure their gut health is good for elimination too. Like I said, binding up and estrogen needs bound up there and eliminated. So when we look at these mycotoxins, if you're living in them and you're stuck, because this happens all the time with patients, then we can just support the elimination of them.

And that sometimes is really helpful. if you can get out of them, then we treat the nose if there's colonizations or there's some sort of Marcon's infections going on there, and we treat gut colonization, okay?

And those things are really important to do. And it's interesting because sometimes I will have a patient that has had a childhood exposure to mold, and they've been kind of living with it for a long time, you know, and they're still excreting mycotoxins, and it's not they're not living in it now.

And that happens a lot. I actually had a patient that I took, and I'm like, oh, this will be easy.

How mold and mycotoxins disrupt hormones

When she first told me what was going on, I'm like, this is just like, she just needs progesterone. She was in perimenopause, wouldn't stop gaining weight.

And I'm like, she just needs to get on my glucose reset, get her insulin better, and some progesterone, some adaptogens. Easy, done. No, not at all. So during, she had already tried progesterone.

She had already tried to like do keto and all these diets. So when I was doing her intake, we traced mold exposure back to her childhood home and her parents still live there and it still smells musty.

And it was kind of her body compensated it for a while. And then when she hit perimenopause, she just would not stop gaining weight. Like wasn't eating anything, you know, like nothing at all.

And it was pretty cool because we treated, we determined she wasn't living in any active mold and started treating the mold. colonization. And she was like, I feel my cheekbones for the first time in 10 years.

Like she was just so inflamed. So still working with her, still balancing hormones. But it's really important that when we look at hormones in women, and men too, that we don't just say, oh, it's a hormone problem.

No, it could be a terrain problem, an environmental problem. Because you have to get to the root cause. And this is my only concern. I mean, I'm sure, John, you've seen that there's all these just like hormone online clinics popping up where they're just handing it all out, right?

Or they're handing out GLP ones like candy. Yeah. And they're not fixing the root cause because they don't have doctors that have the gestalt and the experience in functional and integrative medicine.

Everyone just calls themselves that now. So, I mean, I know you probably work with a lot of functional and integrative doctors and know it's very nuanced.

Yeah, there's so much to unpack there. A couple of thoughts, and I'm going to circle back. in a moment where you talked about these issues, environmental issues that can impact hormone.

So I'd like to understand, is there a way as a clinician you can say, okay, we think this is caused by environmental exposure other than, or this is maybe just kind of natural hormone changes.

So I'd like you to talk about that. From the environmental side, there's so many things. You mentioned the mycotoxins in the home and in the work. We've done a lot of environmental mycotoxin testing in vehicles as well, especially for those folks that have a long commute and may spend an hour in their car each way to actually test that vehicle.

And it's amazing how many Aspergillus or penicillium related mycotoxins, ochratoxin, aflatoxins, glios that you can actually find in a vehicle. Things you just can't think about.

Okay. That's interesting. Yeah. Where are you seeing it? Like in the air conditioning, like AC unit or? Mycotoxins, as you know, are extremely small, much smaller, much finer particulate than even a mold spores.

So it's to the gaseous level. So it's going to grow on a surface in the car. One area that we see it frequently is we leave the windows down, we wind up getting mold growth.

That happened to me. I forgot to put my sunroof open or left it open in my expedition and then boom, I go back in the back row, I have these little fine gray hairs growing out of my carpet.

Well, fortunately, I can treat it, right? So just getting that moisture into a vehicle and it can grow on the surfaces and we've seen blooms in cars. So getting it tested, the surfaces and then test it why the AC is running is really helpful.

Yeah, that's a good point is not everyone thinks about cars. And yeah, they get really, they're not temperature controlled all year round. So yeah, definitely with you being in Florida, that would be a big source if they're in their car a long time.

But here's also the thing. You said long commutes. If you have a short commuter, you're not in your car all the time, or you stay in a hotel room one night and you know it has mold because most hotels do, these are short exposures.

I don't want people to freak out and be crazy about mold. I'm pretty crazy about mold. last my husband. But if we're at a hotel or something, you know, and I think it's like really bad, then, you know, take a binder or something, you know, support your liver a little bit more.

So, you know, we don't want to like scare people, but it's really the chronic exposure. So yeah, the long car rides are interesting to think about for sure.

And I think it's the approach that we take and we start, obviously the name of our company is the mold pros and we do a lot with mold. And then we, we started with, with mycotoxins years and years ago.

We're about 17 years and helping folks with environmental illness. And then awareness became, it became more aware that there's other exposures that you mentioned actinose or endotoxins.

the VOCs. So we're actually able now we go in and we can test for heavy metals and we can also go in and test the amount of chemical exposure, whether it's formaldehyde or benzene or tie weight or on and on and on inside of a home that we're constantly being bombarded with that we don't even think about.

So we always encourage everyone to have a really good data-driven approach, find out what's going on, take that back to your healthcare provider, correlate what they're seeing And we think that that collaborative approach generally has the best outcomes for the patient.

Getting back to my question from just a little bit ago, is there a way to determine, hey, it's just environmental exposures or is it just, hey, it's just a natural change?

We're getting older and this is what it is. Well, it's usually both. I mean, the amount of environmental toxic exposures, you know, they're coming out with different sprays all the time.

It's, it's big. I mean, we always have to look at environmental exposures, but if we know that there's always environmental exposures, right, you know, things in the air, mycotoxins, you know, all that, obviously if it's something that we can remediate and fix, we want to, but also we have to make sure the body is just like running well, like a car running well, you know, we, we want to make sure that our liver and gallbladder are working well.

Our gut health is working well. And, you know, there's supplements that can do that. Our diet has to do that. There's peptides that can support that because it's kind of like you got to think there's always arrows fired at us and we have to have a good shield.

We have to have good pillars of health for that. So, I would say it's just being accelerated. I mean, there was a study where they questioned a bunch of women, and the average age that women were starting to show perimenopausal symptoms was age 32.

And that's a lot younger than it used to be. And this was I think from 2024. So it's very interesting because there's so much more environmental toxins, stress, you know, we're living in fight or flight, we're, you know, on phones with notifications all the time, which is stressing out the body.

And then we're not even able to deal with mycotoxins and other environmental toxins as well. And then our gut is being disrupted more and there's a lot of lipopolysaccharide, LPS causing inflammation.

I think we have to really come at this approach as we have to prepare our body for daily battle and do things in habits and take supplements that are preventative.

Testing, treatment, and root-cause evaluation

So then when something does come at us or affect us or we get sick that our body is more able to deal with it. It's just kind of like When flu season starts, you know, it's literally in October.

And it doesn't matter if you live in the cold or live in, you know, Florida. If you're in Ohio or Florida, it doesn't matter. But what happens in between there?

We're eating so much more sugar with, you know, Halloween. and Thanksgiving and Christmas, right? I mean, we're just like letting ourselves just indulge more in alcohol and sugar, and then that is affecting our immune system.

And if we've already were compromised a little bit, then that will be even more of a problem. So yeah, so I think it's honestly, it's both like we know the hormones are declining, but it's happening, it's getting worse.

And it's starting earlier is what I've noticed in the last like, two decades of practicing medicine, like things are just more rapid. So it's nice we can use all of these, you know, hacks and tools to fix it, but really we have to go back to the pillars of health with it, which is nutrition, movement, meditation, breath work, and sleep.

So if someone, you know, is listening and those four pillars of health are not good, then go back to that. Or at least focus on three of them, because then at least your chair will stand.

But like I tell, you know, new mothers, for example, yes, sleep is not going to be a good leg to stand on when you are Yeah, like, you know, like, because we have to be realistic.

And that's one thing that I, I just feel so blessed that I've had all of these experience. I'm a mother of four, I've had a miscarriage, I've had pregnancies, you know, I've breastfed, like, I get it, like, I'm in there.

So we have to be realistic that if you're like a postpartum mom, you which that's a whole tricky situation with mold to deal with, but it is doable. I have one mama breastfeeding right now where we're dealing with mold.

And She's getting remediated, we're doing some supplements, and she's doing so much better, and she was having palpitations, brain fog, almost like seizure-like activity, and she's doing better.

So, yeah, so it can be good. But, you know, you're missing sleep there. Or say someone has kids that are sick with the GI bug for a week. So your sleep is crap.

Okay. But you have to stay dialed down on nutrition, do your meditation, prayer, breath work and move your body. Okay. So I think if we get, you know, go back to the basics, yes, all the supplements and all the biohacking are fun, but if we're doing all that, but not doing the basics, it's, it's just not going to work.

There's no foundation. Yeah, no, it makes perfect sense. If you have a patient or someone that comes to you and they're, hey, Dr. Jan, I'm not feeling well, can you walk us through what your first step recommendations are?

What's that process look like? And I'm sure that recovery will be dependent upon the individual and it's different for almost everyone, I would imagine.

But what are your initial recommendations for that individual and what's that process look like? Yeah. Do they know they have mold already or it's just they're just coming to me?

What we found is a lot of folks don't think that they have an environmental issue because they're great housekeepers. They don't see anything and maybe they've never had water damage per se in their home, it oftentimes gets overlooked that we can get significant mold growth just with humidity.

And so a lot of folks just, it's not my house, it can't be that. So we'll make the assumption that they don't have any inkling that there's an environmental exposure.

Yeah, well, I'll tell you, when we moved down to Tennessee, even with our AC running, it was still very humid. I mean, it gets humid in Ohio, but we had to put an extra dehumidifier in our kitchen, and it runs to keep it low, because the humidity went up, and I was freaking out.

I'm like, mold's going to grow. I mean, if you guys ever see my husband, he he blesses heart because the mold stuff like he just knows because i've seen it not ruin people's lives because they get better but impacts so many lives i've been an expert witness on multiple court cases with mold i mean it is so hard but they get better so that's what i want everyone to know okay so someone comes to me usually you know midlife mama but i've i've had A man come to me with chronic hives on immunosuppressant drugs for his hives.

Guess what it was? Mold. Guess what is not on anymore? Pharmaceutical medications that are $10,000 a month. So this is why, and John, I commend the work you're doing, because this is why mold is not talked about.

at the bigger levels or, you know, this should be on the news. It's not, it's not because it causes so many problems that, you know, the drug companies are profiting off of, you know, and our taxpayer money is paying for.

But so someone comes to me, they get a long intake form. I mean, we go through ACE scores from their childhood if they've had trauma. We talk about mold.

Has your basement ever flooded? Does your house smell musty? Does anything smell musty? I mean, we go through it all. And sometimes I'll even if they say no to those, I'll be like, but are you sure?

Did you live in a dorm room? And sometimes if my gestalt like while talking to them or while asking them questions. If anything triggers that, sometimes I'll add on a mycotoxin test.

Sometimes I'll just do an organic acids test, and if they have mold colonization, I'm like, whoop, there we go. But yeah, I'll ask them environmental questions, you know.

Was your basement tested for radon if they live in an area that is a concern? What kind of products do you use? You know, sometimes by the time people come to me, they are already leaning towards, you know, I switched out my conditioner.

I'm not heating up my food in, you know, plastic anymore. I don't have a nonstick pan, but sometimes they still do. So I'm going to meet them where they're at while assessing the environmental toxins.

And then I like to test and not guess. So women, men were testing hormones were depending not, you know, they could be super fit looking or they could be overweight.

I'm still checking a home IR score where I'm checking them for insulin resistance because sometimes appearances can lie. know, we're just checking things like ferritin and white blood cell count, which if they have a mycotoxin, a mold, chronic exposure, they have low white counts, low WBC.

So that's a big indication a lot because like I said earlier, they use mold, they use mycophenolic acid as immunosuppressive for people that have had organ transplant that need their body to be immunosuppressed.

With kids, when I see them, if they're getting sick all the time, sometimes that can be a flag for environmental toxins or pans and pandas, neuroinflammation.

That's what happened to my middle son from mold exposure. He got a lot of brain inflammation from that. We're gonna be walking through all of that. And this is why functional and integrative medicine, your first appointment is not five or 10 minutes, it's longer.

And we're just talking and I let them tell their story. Honestly, usually my patients know what's going on and I just have to ask them a few questions to bring it out.

And then we can start from there with some appropriate testing. And then sometimes we add supplements on. If they're not on basic supplements to support methylation, detoxification, liver health, gut health, we ask if they're pooping.

and how much, and what does it look like? I love to know what their stool looks like, and you should be looking at your poop. And my husband still doesn't believe this, but your poop should not smell like something died.

It should not smell bad. Like, it's funny, right? But I'm like, yeah, if my poop smells really bad, it's because something's off and I have to bring it in and maybe take some things to help with that.

Longevity, family impact, and where to find Dr. Jen

you know it you shouldn't have bad gas and stuff like that and it's funny because i'm dealing with a teenage son right now and i like i talked to him about that i'm like your poop should not smell like your gut health is off like focus on your nutrition i mean he has to figure that out himself but i i told him i'm like if you if you think a girl is pretty and you are passing bad gas like that is they're not gonna want to talk to you like so But yeah, I mean, we really want to focus on, you know, exploring like what the body's doing.

I mean, this is something in my fellowship, we did a lot of motivational interviewing. So this plays a role to get the patient to be encouraged on making health changes because it's hard to change habits.

And also letting them focus more on their symptoms. When do they feel worse during their cycle? Why are they craving carbs certain times? Or why are they more tired?

a lot of journaling and keeping track, and a lot of times a continuous glucose monitor is helpful because they can monitor nutrition more. And we also see more insulin resistance when people are exposed to mycotoxins.

I had a patient that was an insulin dependent type two diabetic and he was living in some mold and that got remediated and we actually, he wanted to go on sporenex.

He didn't want to do the herbs, but he, after he completed that round, he cut his insulin requirement by half. It was pretty crazy. He was like so excited about it.

But little things like that, that the environment can play such a role on our health. And yes, sometimes it's frustrating and it takes a long time and it's expensive, but we're looking at long-term health.

We want to make sure that when you're 60, 70, 80, that you're able to play with your grandchildren, you're able to go on vacations, that you're mentally still feeling good.

We want longevity, not just aging or living longer. We want to age well. And environmental exposure and hormones have so much to do with that. I think it's really important.

You've touched on it a couple of times. I just want to kind of call it out. Obviously, your book is written with the focus of helping women, but these same environmental factors, they also impact men.

The hormone issues impact men as well. It's the household. And so I think it's really important that it's not just a female issue at all. It impacts the entire family.

Yeah, and men should read the book because it's going to help them too. And they should know what part of the cycle that their wife, girlfriend, you know, is in because it's going to play such a role with how you interact and support because when we look at marriage disruption I mean it happens so much during perimenopause like I challenge you if you know anyone that is divorced or separated it happened when the woman was in perimenopause and then you ask the man what happened they're like well she went crazy and I'm like She didn't, but it's that lack of progesterone.

I mean, before I just finally like, okay, supplements aren't kicking in anymore, I'm going to add in progesterone during my luteal phase, I was getting more snappy and emotional.

And I would even warn my family like, I'm late luteal, like, hey, But then I was like, okay, it's time to start progesterone. And it's like, my mood is so stable now.

And it makes me so mad. Like, it's such a disservice. And I've also seen, and I talk about this in my book, that the enemy, you know, the devil, attacks women impairing menopause.

So they're already feeling crazy, and then they feel even more alone and isolated, and then they're attacked. And

when you feel attacked, what do you do?

You lash out at the ones you love. So I feel like men should read this book too, or at least just check out some free resources I have. and really dig in to support your wife during perimenopause.

And it's like a 10-year transition, right? But it's also like they can kick it, like they can be in the best shape of their life, they can mentally feel the best they've ever had if they work with their body.

and go through it correctly and fix those root causes. It's really actually a great time. Like I personally love my 40s. Like I think it's, it's fabulous.

And I want other women to feel that way and their spouses to enjoy this time with their, with their wives. Yeah. You're going to go through it together, right?

So that's important. Your book, is it, is it available on audio book, paperback? How would someone find your book and how would they connect with you to learn more about your work?

Yes. Okay. Well, John, now I feel convicted. I don't have the audio book out yet. That is on my 2026. So maybe that will be some motivation because I've had other people ask.

So that will be coming soon. But for right now, you can go to Dr. Jen Book, D-R-J-E-N. book.com or healthy by Dr. Jen and grab it. It's also on Amazon, but that takes you through a direct link.

And then I hang out on Instagram at integrative Dr. Mom and YouTube. Yeah, I'm, I'm on social media a little bit, especially if you watch my stories, I do a lot of my farm life on there and I'm trying to post more on YouTube because it's, it's hilarious.

Like just having a mini farm, but Yeah, lots of free resources there to connect and have fun too. I don't know where you find the time with mini farm, the practice, writing books.

You're a very busy lady. I don't watch TV really, but we can all, we can all like slim down on stuff. I'm still trying to like slim down on stuff, but, um, I do rest and take time with family and friends, but, but yeah, it's, it's good.

It's good to slow down. It's important. Well, I really appreciate your carving out time. It's been a blessing. Great to have you. We have to have you back and talk about and do deeper dives on some of these other topics.

Thank you so much and God bless and we will talk with you soon. Thank you. Thank you. You've been listening to mold, mycotoxins and more with John Bodie.

If you're ready to take the next step towards a healthier home, follow the show and visit TheMoldPros.com for your free consultation. Because clean air is the first step to true healing.