Opening and Podcast Introduction

when you have a scenario where you had to deliver the message to someone that their house is killing them. Literally the place you go to be safe, the places you got to heal and repair and rest is responsible for your illness.

That is one of the hardest messages to delivery and it's also from the perspective of patient because when I was hearing the messages, I'm in denial. It's one of the hardest messages to accept.

Like when our mold inspector said, you've got such a big problem, I was like, no way, there's no, it's brand new house. You go through all these rejections in your mind and it can be tough to hear.

This why I try to be as objective as I can because I don't want to go on a witch hunt for mold, but I also don' want miss it where it would impact somebody's life in such negative way.

Welcome to the Functional Edge. I'm Dr. Julia Ward, and this is where science meets real-world strategies for living healthier, sharper and stronger. From uncovering hidden environmental toxins to unlocking peak performance and mental clarity, we cover it all.

Ready to take control of your health and thrive? Let's dive in. Okay, welcome to the Functional Edge podcast. I'm your host, Dr. Julia Ward, medical director and founder of Balanced Body Function Medicine.

Today we're honored to welcome Dr Peter Osborne to this show. Dr Osbourne is a functional medicine physician, best-selling author and internationally recognized expert in environmental toxicity, gluten sensitivity, and chronic inflammatory illness.

Dr. Osborne's Mold Illness Story

In this episode, he shares both his personal and professional experience with mold and mycotoxin illness, discussing how mold can impact the brain, immune system, nervous system and overall health.

He also offers practical insights into recognizing mold-related illness avoiding common treatment mistakes and helping patients recover from complex chronic conditions.

So stay tuned for an engaging conversation that promises to empower and inspire your path to wellness. Welcome. Thank you so much for being here. Thanks for having me.

Yeah. So you've spoken openly about your family's experience with mold illness. Can you share that story and how it changed your perspective as a physician?

You know, I've been practicing 25 years, my background, originally chiropractic, and that's morphed over the years into a lot of functional care and nutrition.

But we've seen mold for, oh, probably 20 years. I mean, the first case I saw was a school teacher who had rheumatoid arthritis as a result of her mold exposure.

come to find out the school building, the classroom that she worked in had a carpet thick, black mold growing above her desk. So that was probably my first experience.

And so I'd treated it for a number of years. I think I was missing the boat for lot of people. We learn as we grow and

we learn. When my family was stricken by mold-related illness, It was a very, very different experience than how I had perceived it through the eyes of patients.

I'll say it that way. You can have empathy for a person's illness, but going through it is just a whole nother realm of struggle. So ours started with construction.

We built a new home. And our biggest concern with the builder at the time was that we had a meeting about it. We don't want mold. Like, let's please make sure that things are done in the right way.

And they ensured us, of course, as every builder does, oh, we've never built a house with mold, what happened was they made so many construction errors.

During the build process, they had improperly laid down the moisture vapor barrier for our foundation. So our foundations, certain parts of it were actually emanating.

There's one area that I think, I don't quote me on this, it was like 80% humidity on the floor. We measured it. They had not wrapped the house properly.

The Tyvek wrap, which is a vapor barrier wrap around the framing of the House, did not go all the way down to the foundation and wrap underneath the base.

So we had a gap of where moisture could come in about that tall at the Base of our house all around. They also didn't put enough vents in our attic. They're called ridge vents.

And so they go across the roof line because, you know, in homes, when you don't have an air-conditioned attic space, and most homes don, air pulls in from soffit holes along the rooftop line into the attic's space.

Then there's vents along that ridge so that air can move out freely, right? Otherwise, we get this warm, texas, moist, humid air coming into your attic And if there's not enough vintage, then it gets pushed down into your wall cavity.

And that's part of what was happening. They didn't install adequate ridge ventilation. Then they installed our HVAC system raw. We had purchased a top of the line with the best filters you can have, but also a centralized independent dehumidification system.

So like separate from the HFAC. The unit was never actually even connected. The wires were never even connect. When we had a forensic HVAC expert come in to do the analysis, this thing was not even even connecting.

Oh, wow. So the house wasn't capable of dehumidification. Air conditioning units were also improperly installed beyond the dehumanification aspect. The units themselves were improper installed.

And then the brickwork lacked what are called weep holes, which are finished straight at holes at the base of the windows and a base all the way around the foundation where because bricks not waterproof.

water seeps in behind the brick and then it falls down behind a brick wall and there's holes at the base so that that water can go away from your house, right?

And there is an air gap between the bricks and your actual home so you don't get a bunch of water from rain permeating into your home. And then that vapor barrier around the home also is another layer of protection.

So ours wasn't installed properly. We didn't have any weep holes in our brick. They were actually very manipulative about it because it looked like there were weep holes.

They had gone like 50, 60% through the mortar, but they had to stop them short. Somebody was just being lazy. And so that water, as it would rain, would come in.

There would be no place for it to go, But it just kind of emanate toward the house. The HVAC system couldn't handle all the humidity. And so we had spontaneous sporation of mold spores in our wall cavity.

Some of our walls cavities were as high as a quarter million spore counts per cubic meter, which for those of your audience who may not know much about mold counts on an air test, usually if you have a species, a single species that's 650 or higher, that is considered positive.

Or if you have a total mold count above 2000, that's typically considered positive. We had quarter million. And every wall cavity that was measured had at least, I think, 30,000. So it was universal ubiquitous that we had mold spiration and mold and mycotoxins in our wall cavities.

As we were living in this home over the course of a year, we initially noticed that our little Yorkie, she's a little nine pound Yorkie, she's our family dog, right?

We love her like she was my only daughter, because I have sons. But she starts getting like really tired where she just wants to lay around all day and then we noticed that she's bumping into things like her vision's going.

And then she starts throwing up a lot and it's like a really greenish yellow discoloration. Then she quits eating altogether. The vets couldn't find anything wrong with her.

We took her to the vats and their solution was exploratory surgery. You're not gonna rip her open and explore. But they didn't have any solution. We ultimately, we had to put her down because she was suffering so severely.

But that was our first victim in the house, right? She was kind of like your canary in a coal mine. She was, we just didn't understand it to be mold at the time, right?

This is like step one of the clues that as they were coming in, I can look back with hindsight really quite easily and see it that when you're in it, it was a little more challenging.

Then, you know, my son would have rashes, like really strange raches. And so what we would find is, his skin would break out randomly. He'd have rashes on his feet, on this butt, his abdomen, and his torso.

At first, we thought maybe they're infectious in nature. We could take them to a facility where they did infectious disease testing and couldn't find anything.

But that was part of what he would experience, and then he'd experience severe gut pain. And he was depressed a lot. Just wasn't his normal, you know, happy self.

My wife was, she's phenomenal. She's got a brain and she cross-fit, so she exercises. So physically, very physical person, we live on a farm, So she is always taking care of the animals and doing something, something physical.

exercising. And then in this house, we get set many months in and she's super tired. Like she just really wiped out most of the time. Then she starts getting really, really severe brain fog to the point where her word recall, it was awful.

I'd have to try to figure out what she was trying to say. And then I would try to inject the right word for her. We'd been married 25 years plus, so we know each other really well.

So that was how our conversations were going. It was me trying to basically predict what her next words were gonna be because she couldn't get them out, she could find them.

And then it got to a point where she was most days, she would sleep all day. I mean, and just so tired that she had a really hard time. She really struggled in a lot of ways to just even get up and function.

And, then my German Shepherd, he was losing weight. He's a big dog. he's 100 pound dog and down to 85

pounds. Wow. So, those were kind of… You know, again, and this wasn't like overnight, this is not like one day I'm exercising and the next day, I am on the couch or one thing, you know complete coherent and cognitively functional and then next thing I like demented.

It was such a subtle process over many, many months. And for me, it was, And it was like, why am I gaining weight? I was actually, one of the mycotoxins we were exposed to called Ziazrelenone is an estrogen-mimicking mycotoxin.

And so for me, it actually started, I started to develop breast tissue. I had started develop male breast issue, right, gynecomastia. Never had that problem before.

It started be really weepy. Was crying a lot, was super emotional, didn't know why. Couldn't get out of bed in the morning. Just, you know, my 5 a.m., sometimes even 4.30, ready to go.

I was struggling at 730 in the morning to peel out of bed at the depth of our, the height of mold exposure. So it was kind of all these things were happening.

And then, you know, we had this gift that occurred. I say gift, I came in through the door one day and around the foundation base, it just looked wet.

It was like, what is this? What is water? should be the water coming from the house, like that. And it was under an awning, so it wasn't like it rained and it made it wet.

It was something was making it. Wet. So anyway, one of the things that had gone wrong was that the builders had installed an ice. We had an icemaker and they had install it, but there was a leak in the icemaker.

And that was one area, that's where we've initially found mold. So that like, was the first time we found mould in this house. And it was massive amounts of mold growing behind a pony wall.

It had just been from a leaking ice maker that they had failed to attach properly. That was all remediated. We got all that remedied. They did it as far as we know, they rem mediated it properly, like they brought out and they created a barrier and sealed everything so they didn't contaminate the whole home and everything.

But when they came back out to test whether or not the remediation was successful, they kept picking up mold. They were like, remediations have failed.

And at the time, we're like well, it's just mold in the ice maker. Like we thought it was an isolated incident. We didn't realize it a systemic problem in that house, right?

But the mediation failed, and so then their solution was to scrub the air back into the walls and then immediately come out and do another air test, resample, then it passed.

But after that point, we were smelling a must, and we're smelling like a musk deodorant. Oh, I was like, this is coming out of the walk cavity. This is going out to the wall cavity, We had a pocket door in our bathroom.

And when you walk by that pocket, it's a hollow. It's the door that pushes into the walking, right? So we should walk through that arch. she could smell the mold and she kept telling the builder, it's in the wall cavity, so they popped open the cavity but not in that location but in other locations and they couldn't see any visible mold.

You could see it under the right lighting but it wasn't like the classic pictures that you see online where it was like you know, that much black mold growing behind a wall because there's a water infiltration that's so massive, right?

Ours was just humidity. Predominantly our problem wasn't like a, water event outside of the ice maker. It was definitely just elevated humidity problems.

the elevated humidity in the wall cavity. The wall cavities unique because the back of your sheetrock is made out of paper. It's Mold Love's favorite, his favorite food, cellulose.

At any rate, she kept smelling it. We brought the mold inspectors back out and they started doing testing some more and their finding high levels of mold in our air.

So again, twice. They came out, they remediated by air scrubbing and by vacuuming the walls and ceilings with a HEPA vacuum, but they never, They claim they've never found the source.

But that was their solution. And I share that because this is what happens to a lot of people. I've seen this happen with many patients over the years as well.

You always, number one rule with mold remediation is you have to know why it's there. you can know that it is there, But if you don't know, why is it there?

You can't remediate it. Like if you don't know the source, you can clean the air, and you might get a negative result one day, but wait another month and that air is, if the moisture continues to come, If you fix the core of the problem, which it's always water, water or moisture, then the problems just keeps coming back.

And that's what happened in our home. The problem kept coming and as it was coming, now we're aware, we are also getting sicker. And so now there's a fire under us to really try to figure this out because our health is declining and deteriorating.

And, so, the last instance where our builder came out, we had a meeting with them because we weren't happy. We were like, you said you remedied the mold you didn't.

You came back here and said we were clear. The house is obviously you can't turn off an air scrubber and then do an ear test ethically, right? And then clear a hole.

Like that's not an okay thing to do. So what is going to be the solution? Their solution for us was to scrub the air again and come out and do another test.

They didn't have a better idea than that. And so we ended up having to sue them. I mean, we actually went to hire an attorney and had to actually sue to them and they still haven't made it right.

This has been almost six years, and we're actually going to have our day in court in January of this year. So what we did is we moved out. We had a third party inspector come out who wasn't hired by the mold company.

And within five minutes, he had photographic evidence of mold growth behind our wall cavity, hundreds of pictures. that he ultimately took and wall cavity samples.

And that's how we know we had such high levels of mold in our wall cavities. He took surface samples and we found mycotoxins on the surfaces of a lot of our furnishings and things of that nature.

So it made sense. When he found all that and he told us you have a hell of problem, we left. The very next day we walked out of her house, clothes on her back only.

You go to Walmart, you buy some sweatpants. We ended up shacking up in a temporary stay hotel with a little kitchenette and we stayed there for two months.

But in that time, it's like everybody became a different person. Our energy returned, our minds returned.

Lessons From Personal Mold Exposure

It was just a very big experience, but it was scary in the sense that the body's failing you. It's scary to experience

that firsthand. It is scary also to walk away from your house.

And I know I'm going to lose my whole house because we didn't know at the time we were going lose our whole. We didn' know yet. At this point, we've hired all the forensic investigators so we actually know why it all happened.

But at the time, we didn't. So we were just taking a leap of faith, leaving the house, based on our third-party mold inspection and the way we felt. And we thought at, the very least, if we don't feel better, or we can ask different questions, but if feel we better leaving house we'll have some answers, and we got better.

We really felt better within the first few weeks. But not fully. It took every two months to kind of get the mind thinking clear again. But yeah, that was our experience and we didn't wish it on anyone.

But yeah, what would you say was the biggest lesson you learned from experiencing that personally rather than just simply treating it professionally? I think the big thing is, you know, I've had many, many complex cases in my practice over the years where we found mold, had mold remediated, tried to treat the person for mold that didn't get better, right?

So what I learned form that experience is the experts You have to be careful about how much of an expert they actually are. So what I mean by that is like the mold inspector.

Are they really a mold-inspector expert? In Texas, you need a week in class and you can get certified. How does a weekend class qualify anybody to being an experts?

And the answer is doesn't. But I didn't know that, right? I did know through my entire clinical practice, I had no idea that there was such a gaping hole in the government's regulatory oversight on mold.

The government refuses to even define what high levels of mold mean. I learned that through this whole process. You have to be, if you think you have a patient with chronic mold, you has to ever diligent and as objective as possible because you can't rely on subjectivity.

Subjectivity just creates confusion and it creates an inability for somebody to take action. that if they don't take it, it might end up hurting them.

It might even end killing them, right? Because if you're in mold and you are getting sicker and sickier and it can kill you. I'm not an emergency doctor, but it's one of the few things I've seen kill my patients.

And it's a slow poison. It's typically not a fast poison." So what I learned is that you have to be objective with the patient. So when the patients coming in and you're like, okay, are you in mold or are not in a mold?

And how can we discern that as objectively as possible? One, you to have a good, thorough history of the inpatient. You have have good thorough of their home if it is available.

But you also have to have good lab parameters. And there are a number of labs that can be measured that give us objective clarity. For example, we can measure mycotoxins.

We can also measure antibodies to mycotoxin. that we find is positive in probably 90% of mold patients is ferritin, right? Ferritine as a measurement is a, if it's low, it an indicator for iron deficiency, but if its high, its an indicated for liver damage or liver inflammation, because it is an acute phase protein.

So a lot of our mold clients will find inadvertently, sometimes they're in mold by having a ferritin test as a pre-screen. We'll see that it's high, their symptoms are matching, we'll confirm that with possibly some mycotoxin testing, and then we will confirm now one more time with a home mold inspection.

I'll make a recommendation for somebody to get a whole mold infection. And today, what I've learned is that you don't just call somebody out of the phone book or off of internet and have them come out and do the inspection.

So I have actually created an entire criteria list. These are the things that save my family's life. And I don' t say that lightly. I think we would have been dead if we had stayed in that house.

That's not how pertly. But I've created a criteria of what a mold inspector should do and what an old inspector shouldn't know and one of them old inspectors should not do.

And so what we now do is we give those criteria to patients. and say, whatever you do, don't go hire the first person. You need to make sure that you ask all these questions and you get good clarity.

Because the cost of a mold inspection is not really different whether you hire somebody who's really good or whether your hire someone who is just going to run a simple air test.

But we do that because we want to protect the patient. We want the integrity of what's happening. If somebody comes out and says, I didn't find mold, but the patients has all of these mold symptoms, and then they also have findings of mycotoxins and mold allergy and other impact, then we know at that point that we have to re-evaluate who did that mold inspection.

One of the things I'll have them do is send me the mold inspections so that I can read it, so I could read exactly what it says, exactly, what they measured, the criteria, then I can let the patient know you really didn't have a thorough mold inspection.

So you could very well be still in mold. It could be a false negative. inspection, but that to me was the biggest takeaway from all this clinically, like as a doctor seeing people.

The biggest take away for me personally and spiritually is that it's one of the hardest situations that a person will ever go through when you have a scenario where you to deliver the message to someone that their house is killing them.

Literally the place you go to be safe, the places you got to heal and repair and rest is responsible for your illness. That is one of the hardest messages to deliver.

And it's also from the perspective of patient, because when I was hearing the message, I wasn't in denial. It's one the the hardest messages just to accept.

Like when our mobile inspector said, you've got such a big problem. I'm like, no way, there's no it, it is a brand new house. rejections in your mind, and it's like, it can be tough to hear.

That's why I try to be as objective as I can because I don't want to go on a witch hunt for mold, but I also don' want it to miss it where it would impact somebody's life in such a negative way.

Yeah. What do you think are some of the most common ways that mold illness gets missed or misdiagnosed in conventional medicine? The entire spectrum of autoimmunity.

How Mold Drives Autoimmunity

When we ask what autoimmunity is, look at the statistics for heart disease. If you look, number one killer in the US, cancer number two, at least that's statistically what they say.

When you add heart diseases up, it's a lot of different kinds of diseases. It's stroke, heart attacks, also vascular complications, complications of diabetes, you know, glycemic overload, et cetera.

So, but they categorize that and they clump it all together and then put it in a category, right? When they do the same thing with cancer, they put all the cancers in the category.

I think the only category that's not included in mortality rates for cancer is skin cancer. But all of the other cancers

are included. With autoimmune disease, they parse them out.

It is 140, I think, known at this point, auto-immune conditions. But statistically, you don't clump them together the way they do cardiovascular disease and cancer.

So it gets missed. And it get under-appreciated, right? Well, not that many people suffer from RA, and not many suffer LUPUS, And not so many from Hashimoto's, Not so much from Addison's.

You know what I mean? But add them all up. and you have the number one cause of death in females under the age of 65, for sure, we know that already, but add them all up, and we probably have number cause one of deaths, statistically speaking.

It would trump the others. But quantitatively, how much money do we spend on the investigation and the science of understanding autoimmune disease? It's almost nothing compared to heart disease and cancer.

Let me back up. Because people think about auto-immune diseases as that the immune system is attacking the body, The immune system is having appropriate reactions.

The system has never wronged. Your body's not wrong. You're body is have appropriate reaction to an abnormal environment and the consequence of that is auto antibody formation that creates the destruction of tissue, right?

Any tissue with mold. I mean one of the most common tissues destroyed by mold toxins is nerve tissue. This is why so many people have grain fog. This why some of the people are diagnosed in that category of ME.

You know, this is so why many have neuropathy type symptoms when they're in mold. These direct neurotoxin, when you're breathing it in, it can actually penetrate through your olfactory, through the finish, you know as your old factory nerve comes through, the fenestrations in your sinus cavity, You get access to the brain.

Mycotoxins are 0.3 microns in size, so they can absorb right in. and hit the blood, go past the Blood Brain Barrier and go right in. And, you know, the EPA studies have shown that, once a mycotoxin enters the body, it has systemic access to everywhere.

So it's not isolated to one area in the bottom. Once you absorb it, It can go anywhere and affect the tissue. Right. Backing up to answer your question, that mycotoxins are the main culprit that drive this process of autoimmunity that we call auto immunity.

Mm-hmm. All it really is, if we really wanna simplify it, and I'm gonna oversimplify it here, but autoimmunity is when your immune system perceives a threat from the environment, it appropriately creates antibodies in an attempt to protect your body from that threat.

But in the process of that threat, usually a threat is short-lived. So like we might have a thread for a moment, like a virus or a cold or flu, you get a treat for little while, your body creates an antibody response, it creates a bunch of inflammation, that wipes out that virus, and then you move on, the threat goes away, right?

The threat has conquered. But without immune disease, the threat is not conquered. Your immune system is just chronically being activated to try to neutralize these toxins that are leaking into your body that you don't even know exist, because no one's measured it or asked the question.

So your immune systems appropriately responsive to a chronic immune assault. And the symptoms of that manifest as what's called hypersensitization. You're immune, system starts becoming hypersoncetized to everything, everything coming in looks like a threat because it's been so under assault and so, under attack for so long.

And so now you start to see people develop hypersensitized reactions to food. They start collecting food allergies. Everything they eat, it becomes problematic, except for meat.

We don't know why yet, but we think it has to do with the microbiome because mycotoxins act as antibiotics. So they decimate the micro biome. That's where penicillin comes from.

It's a micro toxin, right? So the most classic of all antibiotics. And so we think that micro toxins, whether inhaled or absorbed through the skin or consumed through food, act as antibiotics on the GI tract and destroy the microbial diversity.

So it makes it hard for people to properly process their food so they start becoming allergic to it. But meat, it doesn't tend to do that with meat. We think it's because the favorable profile of the microbiome still allows those individuals to digest meat and this is one of reasons why I believe the carnivore diet has gained in popularity because so many people actually have a mold problem and gone carnival has been a solution for their hypersensitivity to all the different foods.

Yeah, yeah. But autoimmune, so go back to answer your question. Autoimmune disease is the most overlooked issue because it's complicated because there's more than one kind.

And so when a person gets a diagnosis, like maybe you get the diagnosis of lupus, most people get online and they'll go do their research on lopus. Most websites will say it is an idiopathic disease of unknown cause and you need to be on steroids or you to need be biologics or whatever the drugs are.

And the patient never really asks the next question, and the doctors don't ask the question. To me, the Next question with any disease doesn't matter what it is.

What are the triggers? Because the human body is designed to be healthy. So what are triggers to the disease for the person who's experiencing the symptomatic profile that we're labeling?

And if you understand that mold and mycotoxin exposures can very much be a trigger for autoimmunity, and that it doesn't matter what the autoimmune diagnosis is.

That's the thing we're learning as time rolls out. There's now research that mycotoxins contribute to multiple sclerosis in Parkinson's and Lou Gehrig's, and dementia, even autism behavior in children.

And this is all neurological, right? These are all neurologic auto-immune conditions. I mean, some of the best human research we have shows neurological damage, shows antibodies being produced against neurological tissue and people who are being exposed to mold and mycotoxins.

So I think we're going to see more researchers over the course of the next 10 years piece more and more together. I mean, I've seen no less than 100 cases of RA that were mold-induced.

Yeah, yeah. Yeah. So, you know, it definitely affects the brain and the autonomic nervous system. And I think, that's why we see so many patients who have symptoms that are we calling POTS or dysautonomia, anxiety, panic.

What role do you think that the limbic system dysfunction and nervous-system dysregulation play in this whole recovery from the mold illness? It's like PTSD.

once your brain is in fight or flight mode, which is turned on, right? Your limbic system is on and your parasympathetic system gets shut down and you're sympathetic nervous system takes the front stage.

Because your body is, again, this goes back to your bodies right. Your body's perceiving a threat and not dealing with it. So now those things will change unless you get out of the exposure.

This is why so many people seek symptomatic relief. They don't realize they're being exposed. And so the only thing they can do is symptomatic relief.

But yeah, I mean, what you have to do, is you've got to calm down. You've gotta calm the nervous system.

Nervous System Dysregulation and Recovery

or that can support it, like choline and vitamin B1 and CoQ10. If you're into like therapeutic herbs or therapeutic amino acids, theanine is a great one to use, and GABA is great neurochemical that's like a B vitamin that could be used, B12 and folate and B6 can all be helpful.

But at the end of the day, those things are like band-aids. You know, if the person is still being exposed to the threat, then the alarm bells are going to keep going off.

And how do you determine or help patients determine whether their symptoms are due to ongoing exposure versus a nervous system that's just become stuck in a chronic threat response?

Yeah, that a great question. And sometimes it's a challenging thing to do. But the number one thing is that you confirm if they were in mold, you either confirm that they're out of it.

Okay, that they've left the environment where the exposure took place before you confirm that the remediation process was successful. And this is why it's so important to stay objective and not pull up short.

A lot of people want to pull it short here and say, well, they came out and remediated my home. we're all better now, we are all done. Now you have to have what's called post remediation clearance checking, right?

So if you think that house was properly remediated, now it's the job of the mold inspector who found it in the first place to come back out and do a post assessment to clear your house and to make sure that your family and yourself are safe.

Because when your body's in a safe environment, We can allow that parasympathetic nervous system to kind of kick back on. And there are cases too where a person's And they've just been under fight or flight for so long, they need some type of help to come out of that.

And there are a number of modalities that can be helpful in that regard. I've seen one of my favorite modality is actually float tanks. where you, sensory deprivation therapy, it was actually studied originally by the military on soldiers who would come home from war, and they had PTSD trauma.

Well, they would put them in tanks, in the tanks. The reason it's called sensory depravation is because they'd wear blinders, so they couldn't see. They would wear earplugs so that they could hear.

It would lie in water that was the same temperature as the body, 98.6, that minimized any kind of sensory skin input. The water was loaded with about a thousand pounds of magnesium, so they would float in the water, they were buoyant, and so there was no gravitational force, you took away proprioceptive input.

You're taking away movement input, skin input and vision input… and hearing input, and they're lying in the tank thinking, how stupid is this? This is a waste of time.

And I did it, I know I've done it. But after about 10 minutes, your brain waves change. The best way I can describe it is like meditation on steroids.

Cause I can never meditate just by sitting down to meditate. My mind is just too, uh, we'll just say skeptical about it. So I was never able to get into a meditative state just through thought, but floating allowed that very, very much.

And a lot of people find tremendous benefit in it and if you couple it with things like GABA or theanine. and vitamin B1 and choline and magnesium mixed.

Like you can really get calmative because what magnesium and GABA and theanine and even glycine can do is

they act as NMDA receptor antagonists. So these receptors in the brain are the ones that are triggering the excitability.

They're the one that's staying on all the time and pushing, and that drives neurotoxicity. So if you can inhibit those receptors naturally, you kind of start to see somebody calming down.

And then there's other things too. There's NMDR and other forms of biofeedback. And some people do really well with psychotherapy and some do well certain kinds of medications.

Now there is research coming out on ketamine and mushroom-based compounds that really help to rewire the limbic system in the brain. So there are a lot of options in today's world.

Nice. When you identify mold as a contributor to a patient's illness, what's the first steps that you take before jumping into detoxification? I mean, the number one rule of detoxication is get out of mold.

That's it. Yeah. Number two is detox slowly. We're not in a rush because you're already detoxing. Like everybody watching this should understand your body detoxes every day.

I mean, detox is not a magic thing that supplements cure. Detox is something your liver does. It's something that your kidneys do. Something your GI tract does, and what we try to do is make sure that those things are activated before we just throw the kitchen sink at somebody.

So if they're constipated, it's the wrong time. You've got to get the bowels moving. If they can't sweat or won't, you really want to start working on low-level heat exposure slowly over time, start You want to make sure this person's on electrolytes and staying really hydrated, but also drinking enough fluid to flush the kidneys.

So those things are all very, very important after they're out of the mold to prime those pathways so that when you do do things like binders or glutathione or cysteine or lipoic acid, that you're not just mobilizing a bunch of toxins into the bloodstream.

They can't handle it. Right, right. You know, prepare the body first. Yeah, absolutely. So if someone listening suspects that mold may be affecting their health, what are the first three things you would recommend that they do?

Get tested immediately. I'd say the three first things get tested, get testing, and when you get test, a couple of caveats to that. So I always recommend if you suspect mold and you're that sick, do not do it alone.

This is not a do-it-yourself at home project. You see somebody who's an expert in it. because there's nuance to it. And let me just give you a nuance of it, you can now do some of the testing, labs will offer direct to consumer testing.

Testing, Detox, and First Steps

But like for mycotoxin testing what's a nuanced to that? You have to be on a special diet before you do the test. If you're not, you could be eating mycotoxins.

If your eating micro toxins and you have a positive urinary myco toxin test, it doesn't mean your house has mold, right? And so now you are going on a witch hunt looking for mold that may not be there, maybe in your food.

But grain is the most contaminated source of mycotoxin on the planet. I mean 30% of our grain crop is contaminated. So you have to follow a special diet to prep for that type of test so that you haven't understanding that your exposure is coming from your environment and not from what you're putting in your mouth.

That's just one nuance of a thousand nuances when you are dealing with mold. But getting appropriate testing allows you to make the right decisions and to the make intelligent decisions that are necessary with mould because

one of the things that mould does to brain is it makes it hard to make great decisions because you're so static and you are so, we call it the cloud or the fog or shroud of mold because it just makes a person unwilling and unwanting to making a decision because all decisions feel overwhelming.

So it's just easier to do nothing, but it is not. We want to be sure that a persons getting tested first because from objective measurement, all your decisions that come next will be founded to the right path.

Yeah. And what do you wish every physician understood about mold illness that they probably were not taught about in medical school? I interviewed like 60 physicians for my documentary and asked that question to every one of them.

Were you trained in school, were you training medical schools to understand mycotoxicosis or mold, environmentally mold-acquired illness? And the answer in all 60 was zero, no training.

I wish they would get trained. I mean, honestly, I wished what they wouldn't know is that mold is not just this allergy. There is mold allergy and a lot of people have it.

And I think it's 22% of the population has at least one mold, allergy, but mold allergies, not the same thing as mold toxin poisoning, right? They're very different things.

Most physicians recognize mold algae universally as a potential problem and then we'll treat it with anti-allergy medicines, they'll treated with. allergy shots or drops or they'll treat it with antihistamines and other medications designed to suppress symptoms, but mycotoxins can't be treated with pharmaceuticals.

Again, you can give biologics and they do a great job of suppressing the immune system's mechanisms so that a person can be less symptomatic, even with biologists.

They don't work forever and they generally will cause cancer if you're on them long enough. I wish doctors understood mycotoxicosis. That to me is a really important differentiator.

If they understood that, they would be able to help a lot of people. Okay. Well, what is one message of hope you'd like to give someone who's been struggling with mold related illness for years and feels like they're running out of options?

You're never out options. You only out have options if you tell yourself you're out about options, right? I mean, I've heard it all. I can't afford to move.

Can't leave my house. can afford treatment. understand all of those things. It's expensive and I get it. Those things I understand. Number one thing is get out the mold and you have a tent, you can pitch it in your backyard.

I mean, you have a cousin, an aunt, and uncle, a nephew, or family member that you could potentially go and stay with, but if you're sick and mold, then you better get out of it.

There's always an option. Yeah. It's never not an options. Yes. If you tell yourself there's not a option, I've interviewed many mold-ill patients, not just within my clinic, again, we're putting the documentary together.

Hope, Resources, and Closing Remarks

One of the craziest things I have seen was a gentleman who He went to a national park and he got a tent, went into a National Park and lived there for several months to recover.

And he did. He recovered in fresh air. You can recover, but it requires a lack of exposure. A lot of people aren't willing to give up the modern conveniences and the life of technology and electricity and everything else that we have.

But if you really want to get better, there's always hope. You have to be able to think a little radically sometimes. If you have financial options that are limited, because anybody can get out of mold if have endless money and you can just build a new house or buy a house.

But that's not the case for the vast majority of people who are in it. Right. Well, how can people get in touch with you or find out more information about your clinic?

Yeah, so they can go to origins-wellness.com. That's our website for our clinic. And if you want to learn more about mold, we have free resources. It's moldjacked.

com. M-O-L-D-J-A-C-K-E- D dot com We have mold guides. We've had a prevent mold from growing in your house guides we Everything you can imagine, we have a mold quiz there.

So if your audience wants to try to determine whether mold might even be part of their problem, there's a quiz they can take that might give them some insight.

Yeah. I like starting with a Mold Quiz first before jumping to testing, because if you're not scoring high enough, it may not be worth it to test. Well, definitely put those in our show notes for everyone for future reference.

Thank you so much for joining me on this. This has been very informative. And thank you everyone for joining me on The Functional Edge. I hope today's episode gave you fresh insights and practical tools to level up your life.

If you found this conversation helpful, I'd love for you to subscribe, share it with someone who might benefit, and leave a review. It truly helps us reach more people and continue bringing meaningful root cause health insights to those who need them the most.

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