The Right Way to Find and Fix Hidden Mold Problems Transcript

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Introduction to Mold and Environmental Illness

Welcome to another episode of the Healing Lyme Summit 3.0. I'm your host, Doctor Marie Hinchey. Welcome back to Line Bites. Rebuilding immunity, reversing inflammation and redefining recovery.

Water damage, buildings and environmental toxins are some of the most overlooked drivers of immune dysfunction, fueling chronic inflammation, disrupting detoxification pathways, and creating a terrain where vector borne infections and complex chronic illness can persist despite adequate treatment.

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

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

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

And therefore what do we need to be looking for? Yeah. Great question. So when we have and we'll break that down actually into two parts, there's water damaged buildings, which we're all trying to look for when we have a moisture event like a burst pipe or a sump pump failure in the basement, or I live in Florida, so we get hurricanes.

What Happens in Water-Damaged Buildings

So we that's, you know, we'll create a water damage building. I'd also like to expand that to start thinking about moisture affected buildings, because it's not always a water event.

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

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

We have mold growth that's in there. And obviously those two things can cause lots of issues for the occupants. So we have mold which we're going to get into.

But mold having fragments are spores fragments mycotoxins etc. and then bacteria with their endotoxins and all of their other effects. And a lot of times the two of them are going to be competing with each other to write for like existence in the environment, which just makes the whole situation even worse.

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

And we have this high level growth. If we stop and think about that that's the vegetative growth. So if we were to use the metaphor of a plant, so that's the roots, the stems, the leaves, etc., that's that high fill structure and the spores of the fruiting body that's there.

Now the mycotoxins molds will create secondary metabolites. And mycotoxins are one of those secondary metabolites. And there's a thought process that what happens when there is that soup and there's that bacteria and there's that mold that certain molds have developed.

The ability to create these toxins to kind of stake their territory, their claim, claim their area, to kill off other molds, other bacteria, other microbial growth.

The occupants just become kind of collateral damage, right. So what is the biggest way that traditional.

Why Mold Inspections Often Miss the Problem

And I would even go beyond traditional because there have been some, you know, inspectors that have failed some of my patients that were supposed to be like these specialized like very well educated inspectors, but like, why do a lot of these home mold inspections fail when we have people that are in this category of illness that we're talking about?

What's the biggest mistake? Yeah, that's a great question. I would say there's probably two. One is education. So the restoration industry is designed to restore homes that have been water damaged.

So it's it's more so that structural addressing the water damage problems. And there really is a lack of understanding as it relates to the health side.

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

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

They don't dig. You have to be an investigator on site that inspections should take hours. It should be invasive. It should be pulling everything out from underneath the saints.

And it should have layers of sampling, whether its air samples are fine, the they have a, a value they provide. But there's also inter cavity samples, surface samples.

There's polymerase chain reaction samples, there's mycotoxins samples. There's endotoxin. So there's there's more than just one data point that you should look at.

So I can't tell you how many times I have had a patient do a dust test. You know, we typically are using the dust test is is just what we recommend. But I know there are multiple other of, Hermes and Hertz mes and things like that.

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

I've had patients go through literally 4 or 5 inspectors end up getting like the mold sniffing dog, or finally the six inspector comes and finds the true issue, which, I mean, I could we could sit here for the rest of the day going over all of the crazy stories where, you know, there was a nail through the main sewage line and the the nail had degraded and the whole pipe was covered with black mold and the whole column inside, you know, but like five other mold inspectors missed that.

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

Yeah. So how do you know? Explain how does this keep happening over and over and over again. It is in all fairness to the inspectors, houses are big. There's lots of nooks and crannies and it is not an easy job, especially if you're coming in and you're not spending hours within a structure.

And just like most things, the mold inspection you do get what you pay for. And so if you there's something we've had the the nail, the drywall screw that hits the PEX on the supply side that deteriorates three years later, we've had that.

So a good inspector is going to use some tools to help find those things, like infrared thermography can help you determine if there's thermal anomalies, which could be moisture anomalies inside of a home.

They're going to use moisture meters Boris ghost where we can see behind walls. So just that level what you're paying for a lot of your inspection isn't just the lab fees, but it's the inspector spending hours in your home, crawling in your crawlspace.

You're looking in your attic, looking in your basement, looking for those those sorts of things. And then also, I think it starts with a good interview upfront.

So when we get one of your patients that would call us or a client that calls us, it's okay, let's let's talk about the home. There's an intake call. Help me understand what's going on in the areas in the home where you're more reactive than others, but just really trying to get a good baseline of what's going on.

Any prior testing, any prior remediation.

Common Remediation Mistakes and Hidden Contamination

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

Number one. And then number two, what's sort of like the checklist, the bare minimum of the things that a good inspector would do in contrast. So, all right, the telltale is folks who say, okay, I was in my home and then we went on vacation and everything was great.

I got back and we're not feeling well again. So that's the first thing that that hey, maybe there's something that that's going on, but there's a there's a really good, you know, we start a good inspection starts on the exterior of the home looking for things like negative slope, looking for penetrations that could allow moisture into the home.

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

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

There are certain things if there's no popping on drywall, if it's underneath the windows, if we're, we can see where maybe there's been some moisture at one point in time.

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

So, and again, we ask we ask our clients, are there areas in the home that you're picking up on mal odors or you just don't feel well, you're reacting.

So that can be helpful as as you're trying to diagnose that build. And so do many of these homes. Just pass the standard mold inspection because they're mostly just doing air sampling or a just a visual inspection.

Yeah I think there's a port. So the visual inspection is the first part. And then you do the sampling. So to answer your question again it's two parts.

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

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

But most folks, unfortunately, most inspectors don't understand how to read those reports accurately. And then there's an overreliance on air sampling.

Molds don't grow on the air. They grow on surfaces. That's where that surface inspection is so important. And surface sampling molds go through spallation cycles, just like flowers go through blooming cycles.

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

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

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

That's that's per the EPA. And so if you have to do that then you want to pull it up. Good. Containments install air filtration devices like commercial Hepa air scrubbers.

And put those engineering controls in place that way you don't make it worse before you make it better. Whenever you mechanically disturb, it does get worse.

And we have we see a lot of the class that will work to do a DYI, or they'll hire a handyman. And that's unfortunately the object. The other thing is, you know, the EPA says even dead mold has health concerns.

And so we use an enzyme and botanical approach, because those enzymes act as a catalyst to rapidly biodegrade the mold. And it's clinically proven effective on mycotoxins.

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

The goal should be to remove as much of those fungal contaminants as possible, whether you use it through filtration, which is part of it, or using the, in addition, that maybe an enzyme like we use for bio degradation.

Right. So I just had this scenario happen with a patient.

Actinobacteria, ATP Testing, and Broader Home Contaminants

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

The mold is almost gone. It's like down to a one. But now the act in a mix and the endotoxins and all of these other bacteria counts are off the chart.

So is this something that you commonly see in kind of like a botched remediation? And how do we stop it from happening? Yeah. Great questions. And the answer is a little more complex.

So when we talk about actin ohs, we're talking about bacteria as opposed to molds. Right. And those are bacteria grow a heck of a lot quicker than what molds do and someone within hours.

And so oftentimes with actos so it's a separate type of remediation. So that is more of a sanitization as opposed to a mold remediation. And so the goal is to kill off all the bacteria at that point.

Right. And bacterias grow rather quickly sometimes a lot of our no o issues can be lifestyle driven. So if you have pets in the home, homes that have toddlers or children in them have more active nose than other homes that do not.

And so really, with the activos, it's a matter of understanding why they're not much different than mold. So why? Why is the mold there? You have to go back and say why they actin was there.

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

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

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

Gotcha. So it's not a situation where it's like the actor knows where they're in the beginning, and so is the mold. And then the mold was treated. So now the active nose is over growing because of the way the mold was was treated.

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

Okay. Is that something that you are looking for though, as an inspector, like are you looking for active zones in the beginning like before the remediation would even start and are you looking for it in the end?

Yeah. So that's where that intake call comes in. If we have someone that's following, say, a doctor Ritchie Shoemaker protocol or action those is is part of that protocol for service patients then.

Absolutely. That's that's going to be part of that. If we're working with a more functional medicine doctor that that doesn't follow, back to nose or use that as part of their equation.

And that's going to be something that's not part of our standard testing. We cast. There's so many things. So like we do a lot of VOC testing for chemicals for because a lot of Lyme patients are chemically sensitive.

And so that's where that intake call is really important. So we can start out with the right diagnostic test without overwhelming the pocketbook. Right.

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

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

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

Yeah. Talk with an IEP. That's an indoor environmental professional that is perhaps referred by your health care

provider that understands environmental illness.

How to Choose a Qualified Inspector

And then interview them. Do some good vetting. Ask them what type of tools that they take. What's the inspection include. Is there a protocol, a good inspection is going to tell us the what the where in the why and then the protocols, the how to fix the problem.

So address it upfront. And then that's the second to that. I guess as we mentioned before, you get what you pay for. So make sure and a good inspection is pennies on the dollar to a remediation.

The worst thing you want to do is make health decisions or decisions for your family based on bad data. So get a good inspection with good data, with a good inspector, it's going to cost you more in the long run if you have to keep searching and searching.

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

So what would a truly health focused remediation look like compared to standard remediation practices. Yeah. So it's going to use first of all a product that is not a biocide.

And it's going to be right sized to the inspection protocol. In other words, you don't go in and just treat everything you want to take a surgical approach.

Right. Based on data. And we try we encourage all of our clients to make data driven decisions. Sometimes that could be a little a little difficult to do, but based on what the science tells you, this is area that needs to be treated.

And so we're going to recommend using a nontoxic product. It's some so many and remediation in the industry use toxins to get rid of a toxic problem. And that makes absolutely zero sense to me.

So make sure that the and most, most homeowners don't ask what they're putting in their home to solve the problem. So ask, get the materials safety data sheet and then understand the filtration.

A lot of these, there's a fine particulate cleaning which goes down 2.3 microns, which is Hepa. But a lot of these contaminants are much smaller than point three microns.

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

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

If you're if you're trying to filter out contaminants that are less than 0.3 microns, you're absolutely right. And with these machines and I have some myself, I keep one of the bedroom on one of my office.

That's where I spend a lot of my time. But remember, those are treating the symptom. So if you have these contaminants, it's important to get a good remediation to remove.

As we said, molds don't grow in the air. So they're helpful. But they're not the the be all end all for sure right. Do you have a brand or a technology that you like?

I'm looking at have some things. Funny that you mentioned that. I have a, zoom call scheduled next week with a manufacturer that, has a product that goes below 0.3.

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

Health-Focused Remediation and Air Filtration

And so we're really excited about some of the newer technologies coming out. I'll have more for you on that one probably in a week or so. Okay. Great.

Okay. So beyond, you know, doing the remediation. Right. Obviously. And following, you know, the certain protocols, how do people or patients themselves like, protected themselves throughout the remediation?

And then I want you to also comment on the sort of like steadfast rule that, like if it's porous, it needs to be ditched, and if it's non-porous, then it can be saved.

So walk us through self protection and then walk us through like how do you how do you deal with parting with a lot of your belongings and especially clothing and things like that?

Because I can't tell you how many patients are like, no, we bought this special thing to wash our clothes with. And so, you know, so I think it's important to understand fungal ecology.

And there's there's a couple things. So there's a, there's settled spores, which as we go to our cars, molds are ubiquitous and they're going to land on us.

And that's a settled spore issue. Probably not a problem. And we can launder those things and our clothes and be absolutely fine. They'll they'll rinse out and then we have where there's mold growth and that's, that's, that's a, that's a whole other thing.

And so if we have these porous items like paperback novels or books or those sorts of things, then you just discard those. Now there is a protocol. We've treated wedding albums, things that have maybe not, a lot of monetary value, but are extremely important.

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

While those things there can be, if it's other items such as furniture, wooden items, oftentimes those can be abraded or sanded if they have growth on them and treated effectively.

There are protocols for that as well. But by and large, yeah, if it's a porous item, it has mold growth on it. You're just going to have to discard it.

The other side of that, it breaks my heart when we see people who literally gut their homes and throw everything away for no reason. Yeah. And so again, a good a restoration company should be able to walk you through that advice and explain the logic behind those decisions.

Should you keep it or should you not. All right. Okay. So your company had roughly 40 inspectors across the entire United States. Is that correct? That. That's right.

And that's continuing to grow. But we have Inspector Network throughout the U. S. and every state except for New York. Okay. And how do you make sure that all of these inspectors are well-educated, following the same, you know, same protocols are a trusted inspector.

Yeah. Great question. So again, it starts with the interview process with the client. And so we know what testing needs to be done. And then we have certified inspectors that will say, okay, we're going to go to Mary Smith's house.

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

Protecting Belongings and Post-Remediation Verification

We can kind of virtually be there to help out or manage that process. Then of course, we get the laboratory data back. And the inspector makes notes. So we train the inspectors on our protocols, and then we digitally or virtually be there.

If it's not at a location where we have an office and we just send one of our inspectors, our company, full time employee inspectors out. Gotcha. Okay.

So if anyone needs a good inspector, which there are so many people in need, how would they reach you? One of your offices or find one of your great inspectors?

Yeah. Just, go to our website, be it dot the mold. Pros mobile, the pros.com. There's a contact form that you can fill out, or there's a toll free number you can call and go to, they'll go to, a live employee and, they can walk you through that process.

You can talk to a real human. Office hours are typically 8 to 5, and we span four time zones. So generally there's a lot that could get up taken care of.

That's great. I'm glad that a live person answers. That's nice. And so to be clear, you go through the inspection process, the remediation process, and then the sort of re inspection and and signing off on it.

So you have kind of like a one stop shop so to speak. We can that's you brought up a really good point that I was going to talk about on the remediation.

When you do that remediation, one of the things that I oftentimes see people do is they don't want to do a post-test work pretty good at what we do, but we don't get it every time.

Sometimes you get a stubborn call me and so you want that same data. So a post-test is really important, to have that. We use independent third parties to go out and do our processing to kind of check our homework.

Yeah. But, that that is a critical part of the whole process for sure. Yeah. And I think it's really important to have an inspector involved through the entire process.

I have so many patients where they've had the inspector involved in the beginning, and then they find the mediator, and then that's it. It's just in the hands of the mediator for, you know, the whole rest of the time.

And it's like, wait, like, who's making sure, you know that things were done correctly, you know, and that your home is safe to go back into and to bring new belongings into or your belongings that you have appropriately cleaned and whatnot.

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

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

It doesn't always have to be scary. It doesn't always have to be extremely expensive either. Your projects that can be several $100. There's projects that can be 20 or $30,000.

But the thing is just to know, and so get that data, get that understanding, and then make the best decision for you and your family at the mall. Pros we will give you mentioned some of your patients will have, DUI testing, a run a

Hertz me or an Army or what have you.

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

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

And remember, together we all heal stronger. We'll see you next time. Thank you.