When Mold Exposure Complicates Menopause Symptoms Transcript

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Podcast Introduction and Disclaimer

As we get exposed to microtoxins, they are, then they dysregulate our immune system. They are highly inflammatory. they need to be detoxified. The body needs to get rid of on top of, you know, the medications we take or we already have, an impaired detoxification function.

And that's why it can get so complicated because All these symptoms we have in perimenopause can be caused by environmental toxins or micro toxins. You've tried everything, you've changed your diet, detoxed, 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 is your environment? Welcome to Mold Microtoxins and More. I'm John Borden.

Each week I sit down with experts uncovering how mold, microtuxins, environmental exposures affect your health and what real recovery looks like. Let's get into today's conversation.

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Welcome to another episode of Mold Microtoxins and More, where we explore the environmental factors that may influence chronic illness and bring together leading physicians, researchers, and industry experts to discuss the science behind healthier homes and healthier lives.

I'm your host, John Bode, co-founder of The Mould Pros. Today's episode focuses on a question many women ask during midlife. Are my symptoms really just menopause, or could something else be contributing?

Fatigue, brain fog, anxiety, poor sleep, weight gain, and low energy are often attributed to paramineopause or menopaus. While hormone changes are certainly part of the picture, what happens when hormone therapy and healthy eating and exercise and stress management still don't provide the answers?

Well, joining us today is Dr. Christina Ensman, a board-certified gynecologist and menopause specialist who helps women identify the root causes behind persistent midlife symptoms using advanced laboratory testing and personalized treatment strategies.

Through our clinical experience, Dr. Insman has found that environmental factors, including mold exposure and mold toxins, can sometimes play an important role in the overall health picture.

Today, we'll discuss how environmental toxic burden may affect hormone balance, mitochondrial function, gut health, and why looking beyond hormones can make a meaningful difference for some women.

Dr Insmen, welcome to Mold Microtoxins and More. Hey, John. Thanks for having me. Hello. Good to have you. Thanks for carving outside. It's a really important subject and I just can't wait to really tear into it.

But before we do so, can you share a little bit about yourself and your practice and what originally drew you into functional medicine and women's health?

Yes, absolutely. So originally I'm from Germany. I am not just saying this because everyone is going to wonder where is that accent coming from. But I've been in the U. S.

since 20 years. And I have been a board certified gynecologist and have, you know, been working in U S for a long time.

Dr. Ensmanu2019s Background and Functional Medicine Journey

A faculty member at a big university and I was a menopause specialist early on. Got my certification with the Menopaus Society. You know, practice traditional menopause care, you know.

HRT is very en vogue again, but we really did this since 20 years. It has never really gone. So I've been, long been doing that. However, as I approach then, perimenopausal myself on the earlier side, because I was stressed to the zoo, right, working for a big hospital.

So then suddenly like the answers that conventional medicine really gave us were not good enough anymore, right? Like, yes, you have the GI issues and you're stressed and there's some weight gain, like live with it.

So that's when I started to really use the toolbox of functional medicine. because there was these things I observed, even my traditional practice still back then, like all these menopausal women, they seem to have GI issues, really.

And they would get their colonoscopies and they all would kind of come back with that non-specific diagnosis of IBS, and not even myself. They were also wondering, why do I have I-IBS?

And I was wondering why all of you have IVS suddenly? So there were all this things. And now I left corporate medicine, I have my own private practice where I see insurance-based patients mostly for HRT and vulva vaginal disease, and then the deep detective work.

So when these women, we start them, so I started to see more complex patients like the ones who are on hormones, already started on it, continue with symptoms.

They continue to have GI symptoms. They are just dysregulated and don't feel better on HRT. So that's how I started to, you know, deplore more and more like the functional medicine toolbox, which has, basically, deeper testing.

Because as you now, most women are dismissed, they are told, well, your labs look normal, might be happening to men too. It's just, I wouldn't know because I only treat women.

Labs look normally, and you're good, but they don' feel good. They have brain fog. They, you know, they have this fatigue that doesn't go away. So that's how I build, I looked for these tests that really now give me this deep insight into gastrointestinal health and to food sensitivities.

into mitochondrial function, oxidative stress, and ultimately also environmental toxin testing and some genetic screening I do too. And this is really to finally understand.

As I did that, this how we get together. This is how I found what these unbelievable things in these environmental toxins tests. In women, many women who are already living healthy, particularly the ones who have very educated, well aware, they eat healthy.

They move and they have these environmental toxins in their body and then learning how that really confabulates that picture impairment or pause. It's interesting as they're doing and a lot of our clients they do all the kind of the right things, right?

So they are eating right. reduce a lot of the plastic in the, in all the things they're supposed to do. And yet they still have these issues. So it's, it, I'd like to really dive into a little bit more what I think it is fascinating that you do environmental testing.

I've never heard of someone that specializes as a gynecologist, woman, that side of it. But we know that the body is a complex system and it all interrelated.

What have you found as it relates to environmental microtoxin exposure and how that relates into, say, chronic inflammatory illness or symptoms for your patients?

Yeah. So basically these, I always say estrogen is like this fire extinguisher that we have on board for our reproductive life because it tries, you know, everything is improved by estrogen.

It tries to keep the inflammation out of our joints and keeps our brain sharps and makes us, go the extra mile because in the end, the women are the ones who keeps like the species of the humans going, right?

So if we would give up earlier, not good. So I think we women, we just come with that health baggage arrive in midlife. So not all of us, but most of have things accumulated that estrogen and some of the oxytocin that helps us out.

And then comes the mid-life and these two, that estrogen particularly that really goes away. It's not bad. Nature wants us to have a great life, as stressed as we are and as exposed, that estrogen turns out to be very, very effective and very necessary for us.

So an estrogen is also an immune mediator. It helps our gut, it helps out metabolic health, It's really helping everything out. That goes away.

How Environmental Toxins Affect Midlife Symptoms

Our body has to find a new balance and we already know in this perimenopause it becomes this neuroendocrine metabolic event. And all this has a lot to do with detoxification in the end.

Also, if we take hormones, we need a good liver detoxication system. So now if put environmental toxins in that pot, so our body is already trying to readjust in this midlife and some women do it better, some do worse because we know now the stress plays a big role, our stress axis.

So now all of this is now intermingled with environmental toxin. Because in the end, we are not feeling well, regardless what's causing us, because our mitochondria are working properly.

We are fatigued, We have this fatigue that is, you know, no sleep can fix. we have oxidative stress. And the question is what is driving that? And yes, sure, gut inflammation can be driving, that stress is definitely the big overrider that can drive everything.

But now we had this environmental toxin. Or mold exposure. This is now turning like it's like putting gasoline on that

fire or on this dysregulation. So now it can get really confusing because yes, in perimenopause, we have the brain fog and we are fatigued and you know, our gut is not working.

We have weird joint issues or the immune issues. So yes, and this can all be caused by that hormonal shift and maybe it's just some GI issue has to do with this overall.

change in midlife driven by cortisol. But now comes microtoxins or other environmental toxins. Not only can they mimic estrogenic function, so they can, what we call non-scientifically estrogen dominance, it can make that all worse, but it also can also make mitochondrial dysfunction worse.

It can even make inflammation worse so these are really the women now They are on hormones and they still have symptoms. They have brain fog to the end of it, they can't think straight, can sleep.

So these environmental toxins, that basically keeping that cortisol fire up. And I think most people now have heard from social media, this cortisol is this big overriding driver.

As we get exposed to micro toxins. They dysregulate our immune system. They are highly inflammatory. they need to be detoxified. The body needs to get rid of on top of, you know, the medications we take or we already have, not impaired.

detoxification function. And that's why it can get so complicated because all these symptoms we have in perimenopause can be caused by environmental toxins or micro toxins.

It's just a little bit worse, I would say. Interesting. So what I heard you say was not only can these environmental toxins kind of exacerbate or make the situation worse, they can actually almost mimic some of the issues associated with with menopause.

Yeah. I mean the typical, you know, mold symptoms. You know mold can really cause all symptoms, but the typically thing is like it affects the immune system.

So if you get frequent infections, if have the stuffy nose, like all the histamine type symptoms the headaches, the rashes, all of it. And of course the deep fatigue.

GI issues ultimately. So yes, mold is like the big mimicker of everything. And that makes it complex in midlife. 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, even microtoxins 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. make sense. You know, the podcast is mold, mycotoxins, and more. And so it's not always mold and it is not mycotoxin.

We understand there are other environmental toxins. In fact, we haven't talked about this, but we'll go into a structure and not only test for environmental myco-toxins but will also test other harmful chemicals like maybe formaldehyde or benzene or things like that.

Do you see that it's oftentimes more than just mycotoxins or molotoxin, that there's other toxins that you find prevalent? Yes, definitely. I find a lot of environmental toxins, so pesticides, volatile organic compounds.

Super interesting. People who have a printer at home or had a pharmacist who was just working in a little pharmacy and had all this printing going on.

And of course, BPAs and phthalates, you know, often we have a hard time even figuring out where it comes from because again, many of my patients are well-educated, so you really have to figure out, where is it coming from?

I mean, phalates I think that is something many people don't want to realize. That's just everything that we haven't our, yeah, Americans are very attached to their, their fibres and their air fresheners and oh my God, They have scented candles.

I mean, sometimes I really, literally I make people a hundred percent better, but having this brief conversation, do you have centered candles and tell them to throw it away?

And sometimes that's all it's needed. So I think that it is also important to say, it not always like, you know, Sometimes the fix is really easy because that exposure, is what we get every day.

And then of course that stuff that accumulates and you're the expert on how to figure out what is, What is what really from the things we find? It's amazing to me.

We'll go into a structure and we'll test, we test for over 500 different chemicals for our VOC testing. Yeah. I think you brought up a really great point.

we bring in a lot of these fresh smelling sorts of things. And that's one of the days that we tested for. It is amazing how much VOCs load we'd bring into our home unnecessarily.

Whether it's just cleaning products or some of uh, products that kind of mask odors and that, that kinda thing. So, um, by the way, the candle back there, I'm going to put my shoulder over it that way people can't see it.

Mold, Mycotoxins, and Other Hidden Exposures

It's, it's essential oil. There's no, there's not harmful chemicals, but, uh. How often do you see with your patients that you come in and you think, okay, we have maybe some concerns or some issues around menopause.

And you find that it is something that's actually just much more complex. What, if you had to a percentage to it, how common is that? Yeah. Well, I have like, of course, a selection bias, right?

Because I'm not doing the environmental toxin on everyone, but the moment someone tells me they have fatigue, the deep fatigue that's when I am like this is what we need to do.

Otherwise, we just have a blind eye. You know, some people just come with some GI issues. I do some simpler stuff. But the moments I hear fatigue You know, histamine problems, those relentless headaches, sniffles all day long.

I'm like, I, um, kind of insisting or really heavily recommending it. And as you know most people don't remember any exposure, right? Sometimes I am lucky and they're like oh yeah, there was this moldy, you But usually they don't remember nothing because they think they live healthy and they probably do very well compared to other people because we don' know where the exposure was.

So yeah, so the fatigue is the one that pushes me over it. And then, however, since you asked for the number, I would say I find something in 95%. I mean, I really, even would say like, you know, not all mold, but between the mold and the heavy metals, the environmental toxins, yes, 95 to 100%. Yes.

That is, which also makes me think, well, we are clearly all exposed. So, You know I always try to tell people, Well, it's, We have to help the body to get rid of it.

We can't avoid all exposure. But once, you know, merged with the clinical symptoms, with, the fatigue and the brain fog, all of this, then we know okay, we have, to really address that.

Yeah, we've talked for listeners on this podcast before about this kind of fulcrum of this teeter-totter. When we have so much environmental exposure or stressors in our life and all of a sudden when it gets to this point, that's kind when the wheels fall off, right?

We can take so many. The body's amazing. We could take this load and we could deal with it, but then there comes a point where we can't and that becomes extremely problematic.

I'd like to dig in, you know, we've talked a little bit about how the, even this chronic environmental exposure doesn't just affect one, You know organ system, it can influence the entire body's stress response.

So let's dig into a bit more about the cortisol stress axis and mitochondrial function, what that is and why does this seem to hit kind of midlife women particularly harder than maybe others.

Yes. So, you know, as this cortisol, I think is really super important for how we transition from menopause. And, when the conversation started a couple of years ago, it was all about the hormones, right?

And as we learn more and dig deeper the community, and now really like the cortisol connection, kind of restarted understanding maybe three years and it seems like it's like 10 years because things develop so fast.

But basically I saw this in my patients, like people who have stress, they are not doing well in perimenopause. So today we know the stress axis is really central to all of this, because estrogen is kind of, it's this stress axis modulator, it kind of calms the stress access down.

So that falls away. This now means all the stresses, and here I think it's important just to mention it, obviously, because we think stress, well, the husband and the work, but no, not just, you know, It's the environmental stressors, environmental toxin, over too much exercise, Not eating enough when many women arrive.

And then of course, yes, GI, so inflammation, gut inflammation, all of this really plays a role. So, and mold, right, infection, so that turns on that cortisol fire.

But first of all, go back to the cortisol. So once this is out of whack, then we stop sleeping well. Our progesterone goes well, so the circadian rhythm pulsating is not working that well anymore.

Again, it's a shift and cortisol is already that gasoline on that fire a little bit. Women who have a very relaxed lifestyle, Also important to know, I have patients they have no issues with perimenopause.

I just want to mention this because right now it's like, oh, we are all like this. No, it is not terrible for everyone. There are some lucky ones that have figured it out, right?

So that does exist. However, if the cortisol is turned on, gut inflammations, the environmental stressors, we're not sleeping well, everything gets dysregulated.

We become insulin resistant, or it worsens that insulin resistance. So we get metabolically unhealthier. This by itself causes fatigue, sluggishness, worsening cardiometabolic markers.

All that is connected and environmental toxins and particularly also the micro toxins, they are highly inflammatory. So they're highly inflammatory and turn on this what we call HPA axis, the stress axis.

It puts the body under stress. so it really turns up the stressed volume and our body cannot bounce back anymore.

We start feeling less resilient. The same it's causing, you know, gut, microbiome gut inflammation, so it causes GI issues.

The immune system is in a way busy or attacked, right? So these women often get other opportunistic infections. So it's a very, it goes in all directions really.

And, but the body knows something is going on. That's why the stress axis is turned up. the same, obviously, body knows you and perimenopause, it realizes these hormones are not doing what they're supposed to do anymore, estrogen doesn't show up as it's supposed do, and that all, you know, adds to that complex symptomatology.

Yeah, I just, as I'm listening to you speak and I am thinking, oh my goodness, from a diagnostic standpoint, This is very complex. And so how do you kind of bifurcate or break this thing out on these are hormonal issues, which is part of this, this natural process and versus the toxicity, the environmental stressors that you talked about.

You know, I know that, you do some really advanced testing on your patients help get to the root cause. Do you want to talk a little bit about some of that?

Yeah, of course. So, functional medicine, we always say, you know, the gut is really the base of everything. And that's why I start with a gut and food sensitivity testing, because we want to hear the guts first.

Whatever we have to do, We have detox, to calm our neurotransmitters. We always want start out with the guts. I definitely do that. It's not just the got microbiome.

You want know how do you digest? What is the gap barrier doing? So that's the base and of course a very comprehensive regular blood chemistry, blood work, but really something very your primary care physician has never seen.

But yes, we can do that. And always I ask my patients, are you good with getting blood drawn? Because I always want to know how much I can take. That's being run through special software, really.

So that is really the base. However, anyone with fatigue, that's when I'm really start to do micronutrient testing. I really want see what do the cells really see?

What does that person need?

Stress Axis, Cortisol, and Mitochondrial Dysfunction

We can't take the greatest multivitamin. None of my best multivitamins is really giving them. the micronutrient support they need. So I often have to drop some extra in for a while to give the body what it needs under that situation under stress.

And that test also checks for mitochondrial function and oxidative stress, and I love that because if someone is fatigued, if they can't think, I kind of want to know what is it?

Where do I have look first or support? Are those the mitochondria? Is it more the oxidated stress? Is it methylation? So this is what you ask, what do I do when they come with all these things?

That's where I basically look so to know, let's see how I support this body first. And then I come to environmental toxin testing and genetic screening.

So I look, does this patient has problems in general with getting rid of toxins? Doesn't mean they have to do bad with this. It's just you have know to always support them regarding that.

And I do of course, a cortisol awakening response, which is like the most, you know, sensitive test for the stress axis because I want to know In what situation is that stress system right now?

Does it even allow me to do any detoxification at that moment? Or does that person really need a gentle support for a while, getting all the systems going to even be able to detox?

And some women, to be honest, if you actually support their own system, they detox themselves, They get rid of themselves. So it's very, you know, a gentle approach.

And I just always look exactly what's going on because as you might know many of these women, I always call them they are hyper sympathetic, right? So sympathetic opposite of parasympathetic.

They are not rested and digested. they're like never arriving at that. There are so turned up, there are anxious. The mind is never quiet. The whatever you give them they react to it so you can give you know all that coming that telling yes i tried this and i try that and it gives me anxiety and palpitations so again i look at the stress axis first to actually know what can i do to that.

to that human, to their body, through that organism at this point, what do we have to do next? So that's the testing I do. And then, you know, I guide them through it.

It's always personalized. Unfortunately, there is no one size fits all, really, unfortunately. We're all different. You know given your background, and you're a specialist in this for quite some time, how does I'm listening to what you do, which sounds very evidence-based.

So you get to the root cause, try to run the testing. You have the data so you can personalize that treatment protocol for that particular patient. That sounds amazing.

I guess how does that compare to. The textbook, what traditional medicine, how they approach it. It seems to me like once you hit this stage in life, then typically it's just a lot of hormone supplement therapy.

I have no beef with conventional medicine. Again, I want to, you know, have this board certification. I like conventional medicines for what it is, but it doesn't ask.

It's just a different question that they're trying to solve. And then comes, you know, the functional, as I say, this armamentarium that, okay, has to be used also with, it's not as board certification functional medicine.

I always want to make this clear. This is like a toolbox of tests. It's an education people can get, and it has be to used wisely. And conventional medicine is really, we have good data on all of this.

You're not going to recommend something that is personalized because everything we recommend in conventional medicines has to stand up to randomized controlled trials, which basically means if we 100 people with the same symptom, I give them all the A good amount is going to improve.

Let's say it very plain. And this just doesn't work if we look at it from, you know, from the personalized medicine standpoint, because, my itchy skin is not the same than your itchy skins.

The root cause is, not to say, and this is why that's where conventional medicine just, doesn' hold up, right? It's great if you have a heart attack and for many, million other things.

I wouldn't want to live in an era on this world where there weren't antibiotics around. And many other thing. Medicine really keeps populations healthy, avoids major illnesses that we can easily avoid with screenings that have been proven and proven they're effective.

That's that, and that's good. And then functional medicine, that is why we have our lab cut-offs. They are very rough in conventional medicine because we don't want to make big populations unnecessarily sick by, you know, You might call this good or bad, but you need a cutoff where you can say, now I have to intervene with a medication.

So this is not standards we are bound in functional medicine. We are looking at what are the optimal ranges of lab values. So that is that. And we can look at how do they relate to each other.

But that's nothing that, you know, in a conventional office, I open my lab panel and what is red is abnormal and the rest is normal. This is how functional medicines work.

You run this through special software. It takes a lot of time. that space to do that. And then of course in you know and then in functional medicine we have these tests that just really allow us to deeper dig into the pathophysiology physiology and biochemistry of the body.

So I would say this is not homeopathy. We are actually really trying to explore something and figure it out on a then very personally what is going on in that person.

But that's why it's really exciting. Yeah. It's as you started putting these are using these additional arrows that were in the quiver, right? To be able to help your patients.

What surprised you most once you start doing some of this more advanced testing? I think that there is. And again, I have a selection bias, right? So my patients are the ones who come with symptoms, but there is never some, there's never that I don't find, it's not that, you know, they're coming with symptom.

So because sometimes patients ask me, well, what if you find nothing? This just has never happened. You know? I always find something in terms of let's work on this and this explains your symptoms.

And then, of course, the amount of mitochondrial dysfunction I have in all these patients with fatigue, I think that is always fascinating. So the mount of oxidative stress, and it really correlates with their fatigue.

And, then of, course the environmental toxins that really kind of took me, you know, when I started doing that, it took a back.

Advanced Testing for Root Causes

I was like, wow, okay. Because again, in people who you wouldn't expect that. So yes, that environmental toxin exposure and how they get better once you attack that.

And on the other hand, I also learned if you don't address that, then you're really on an uphill battle. So there are sometimes patients they don't want to do the environmental toxin testing, but their symptoms, they are so bad.

And I'm like, look, if we don t know that piece, you know, I can give you whatever kind of supplements to try to help your mitochondria. If this is kind driving this, we need to know.

So the environment toxins has become a big piece in a way that I actually sometimes think I should use this as a base screen. You know, right now it's kind of a little bit further up in my more advanced packages and I'm always thinking I just should do this right away.

Maybe that would help me with many things much earlier. I don't know. It's in development. We're all products of our environment, you know, what, we, when we breathe, while we drink and what we eat.

So it's just, it seems almost like a natural approach to take, right? You have to fix the environment to get the, uh, to give the person well, oftentimes.

Uh, but it sounds like, I mean, your approach, they're coming. You're your gynecologist. Your specialist of menopause. But you're addressing hormone health, immunity, health gut health.

You know, some environmental issues. So it's a very comprehensive approach to overall wellness with your patients. When they have these menopause symptoms, how much easier does it make to, once you kind of settle

everything else out in the body that's happening.

How much easier for recovery, I guess, is the question, does that make it? Yeah. It's a really important piece. I mean, it goes back to detoxification.

So the body needs, you know, even if you give them hormones, well, they need to be able to detoxify that, so it really comes all back with the same bucket.

And I also have patients who don't want to take hormones which is perfectly fine. But in the end, once we are really making sure the buddy can detoxify, can methylate, and turn the good genes on and the bad genes off, get rid of the environmental toxins, whatever it's exposed to, they get better with or without hormones.

They actually get pretty fast sometimes. Sometimes it's really surprising. On the other hand, if there is continuing exposure to environmental toxins in the house, I don't know.

I'm telling them this needs to be remediated. You have to do something because you can't. If the body is basically under attack the entire time and we can come cortisol that way.

So that is always the first step to remove. Same like we do the gut protocol if we try to, you know, to to cure with dysbiosis in the gut. It's the first step is always remove, you know, remove whatever it's bothering.

So, but you're no question for you, because of course, when I say mold, patients are asking like, well, where? I have no mold. And then often comes the, some people are like well there's mold everywhere around us.

I'm like yeah, and I think once you said that, I really liked that to explain, the amount of exposure, like yes, a little mold outside is fine, inside is not so good.

And then this differentiation between the micro toxins and the spores. I don't know, I think this belongs in this episode that you give it some for my patients a little bit this understand.

Yeah. So you're absolutely right. Moles are ubiquitous. They're everywhere. There's going to be a certain amount of exposure that we get just from going into our cars each day or taking the dog for a walk or whatever, we're going be exposed.

And that's a normal environmental exposure. I think the difference comes in a couple of categories. Glad that you asked the question is we should never have mold growth inside of our homes.

that's a problem for many reasons, right? One, it's feeding on your home, your structure, wood rot, those sorts of things. That's no good. But also from a exposure to the occupants.

There are certain moles, of course, that can create histamine responses. And for those that have mold allergies, I being one of those, and I think it is about 20% of the population that has a histamine response.

and that is going to be with any mole. So that could be a But then I think the last data I saw, there's about 300 species of moles that are capable of producing toxins, uh, for, you know, aspergillus fumigatus or as pergillas, Flavus or Niger, or, You know stacking botryosarptum, what people call black mold.

And so obviously that's a, that a whole nother thing. So we always recommend it kind of like your approach with the good testing that you have with your patients.

That's exactly what we do on the environmental side. And so we'll go into a structure and understand, okay, what's the overall fungal ecology? Do we have elevations of any molds?

And then we will actually drill down using some pretty comprehensive polymers chain reaction testing or DNA testing. Do have toxicinic species? If so, just because we haven't doesn't mean actually producing toxins.

So we actually will test to see if they're producing environmental toxins as well. And Happy Path is where that environmental data overlays with that clinical data that you're doing.

We say, okay, well, they have ochratoxin A in their system. Guess what? We found aspergillus or penicillium in there home, and they actually have elevations of ochratoxin a in they're home.

Let's find out why the aspargills was there. And let's get that fixed so they can get on the road to wellness, right? So that's HappyPath. Then as I mentioned, chemical testing as well.

A lot of mold assessors just come in and do very basic testing. They don't look for that toxic load in the home, which can really be a burden for the occupants as well.

It creates the other things. Yeah. I think it's very difficult for patients to navigate, really to understand what to look in mold mitigation or in testing, do you want to say something about that?

And then I have another question for you. Okay. You know, I would, first of all, get somebody that I think there's a big difference between if you're having health concerns and who you go to do your inspection.

And we can talk a little bit about what that inspection should look like. Or, hey, am I in a home and I don't really have any health issues. I want just a generalized inspection, so if he have health First of all, we always recommend get a referral from a good environmental professional, from your healthcare provider who knows you and they've vetted that person out, right?

So I think our company does work for now about 150 practitioners nationwide. Someone who understands the health side of these environmental exposures, not just the building side, of, you know, hey, We have wet, dry wall and those sorts of things.

So, I If that answers your question. Yeah. And then so what, because he was asking what surprised me. I think I see, I have the impression there are many modes we are actually exposed to through crops.

So, you know, always look at when we find these and it always says like corn and mice and crops and nuts, even organic. Do you, is that correct? And then how do you distinguish what was now food exposure and what is house exposure, for example?

Conventional Medicine vs Personalized Functional Care

Yeah. Yeah, great question. So it kind of goes back to that clinical data. If you were in a, say a urine mycotoxin panel for one of your patients and it comes back with whatever those results may be, you know, gliotoxins, ochratoxin A or some of the fusarium myotoxines.

can come from, from grain. So then we go to the home and you can test the hall and see where that exposure is coming from. If we test that environment and there are no elevations of micro toxins in the whole, then maybe diets, a good place to look for.

Yeah. But the caveat with that is that what if it's our work? It's where we spend time. so for some of our, our clients will actually test. The cars we found.

heavy micro-toxic loads in vehicles and people don't think about that. But if you're near DC and you have an hour commute in your vehicle, you may get some exposure in you car or it could be from your office.

So we'll have the environmental and then you can go back and look for diet. Yeah. And do you, in terms of diet, like how do, you know, if it's from nuts, is there any labeling of food?

Is there even a way to avoid that? I understand not even organic is going to help you with that, maybe even worsen things. So can you say something about that.

Yeah, so, there are certain things that I am a problematic coffee drinker. I start at 5 a.m. and I keep going. You know, you only tell, it's almost bedtime, right?

So there are some coffee brands that we're going to lean to that have been tested for mycotoxins. But you're right. A lot of foods, the government is kind of, I'm glad you brought that up.

So a lot our foods get tested quote unquote acceptable levels of mycotoxin, so our grains, our milk, coffee, et cetera. What's acceptable? Because as you talked about earlier is that it's different for everybody.

It's personalized. And so what may be acceptable and how will you detox, there may need an accumulation in your system that may not affect somebody else.

It's a good question, it's little more difficult to answer. Yeah, that's good one, right? I'm wondering always. Hey, but we have to talk about your coffee habit because that cortisol axis of yours is not going to hold up like that.

Let's cover that the next time we do an episode. So, yeah, yesterday's episode we talked about You know, pill, penicillium roga-40 is, you know it's essentially not all species of molds, create these harmful toxins in us.

Penicilium roga- 40 we make blue cheese with and being a big fan of stinky cheese, that's my favorite species. And so the, the practitioner, doctor we had all said, ah, You might want to limit that a little bit, John.

So now if I lose my blue Cheese yesterday and my coffee today, it'll be a bad week. well, let's just do like, you know, in normal amounts. So, because I think blue, if you don't, we all have them, not microbiome, it's called microbiomes, right?

So we have the natural, and it is also important to know we also have natural fungi in our body together with the bacteria. I would say the blue cheese probably is something good.

But the amount of coffee, you know, man is going to give you some stress symptoms there, but in moderation, why not? And clearly I hear yours is, yours, is a micro toxin tested.

We'll try to better as much as possible. So I'll back a question for you. Um, since you're an expert in menopause, if there's one myth about menopus that you could eliminate, what would that be?

Okay. Well, I think it's really important to know this is a great phase of life. Okay? So recently someone I saw was posted like, you know, menopause is like this castration event for women.

This is kind of complete nonsense. No, this not what it is. So this was a natural phase that really nature designed for us to really make, make really space for better things.

And, you know, the women I know and I work with, they are all great women. They find lots of new things to explore, once the kids are gone. And the other thing I always say, I mentioned it earlier, like the estrogen keeps us going the entire time.

Even we should really rest. The oxytocin makes us deal with all this nonsense in life. We always want to please and this and that. If one thing that comes with menopause, it's kind of this, You have like no tolerance for nonsense anymore.

And you know, this is good. This is for yourself. It's good for, I think it's for my kids. You know? That's when all this nonsense stops and they just know mom is going to tell me right away how things are.

And they then figure that stuff out themselves. So it is a great phase of life. Its fantastic. The other thing is, first, you don't all need hormone replacement therapy.

If it individualizes, if it good to you, wonderful. And if you don't do it, it doesn't mean you're aging faster, you are

breaking your bones. I have patients coming to me crying because now they're mid-60 and they miss that window of opportunity.

Literally, they think they are going to get dementia and going break their bones, and I had to tell them, no, this is most likely not going happen and there are many other things you can do.

And de facto, I've had many patients who have spent decades on HRT. and still have osteoporosis or develop osteoperosis. So, and this is just to show there are so many, it's not just a black and white.

There are many other things that feed into that equation. Let's just take the bones. It's the inflammation. stressors, right? We know cortisol is going to rub your bones.

It's probably environmental toxins. So it's a big onion, I like to say.

Hope, Recovery, and How to Contact Dr. Ensman

You have to peel these layers away and they all work together and there's not a one time fits all. And it is a really great time for us women and men and post menopause.

The other thing I want to tell you When you still have cycles, you can't think, however, be without a cycle, but you don't only realize afterwards how this really, never know how you wake up in the morning.

You're in a good mood, in bad mood. you're wondering three days later, was I coming on? Is this why I was so nasty? And today I wake up every morning, I'm the same Christina, like a little bit more tired one day than another, but it's always that same very reliable personality.

And man, would not want to give that away again, ever. If you were to kind of distill it down, is there one biggest mistake you see that women make when they're trying to heal?

Not looking at the stress and not eating enough. Really? Not eating, that's the woman that have been, you know, try to squeeze for fit into their clothes, into the life.

So they arrive usually when they're the most symptomatic, they are under eating or over exercising or have other reasons for their stressors. I think that is something you should start looking in your mid-30s best to really Think about that and just be aware if you are not really adjusting to that stress and listen to your body.

Your body is going to make adjustments to you when you're in your 50s and you not going like it. So it's really important to start listening really early and really watch that.

Stress within all forms. It's coming. That's the most important thing. That's really good input or good advice. We always try to end, you know, we talk with so many people.

You know we're going on 20 years almost of helping folks that have environmental illness. And so as we have these clients we talked with them and we listened to their journeys to try and understand where they're coming from as were taking on their project.

You know, these roads are difficult roads sometimes, and it's a stressor on the family, et cetera. So we always like to end with hope because there is hope.

We don't have to accept the way things are as that's just our new normal. Is there a particular message of hope or a case that you've had that was a, a particularly tough, tough conditions for a patient that your actually able to help and get some recovery for?

that you'd like to share? Yes, hope, absolutely. With the right approach, you are all healable, literally. You have to be gentle and you have nowhere to start.

There's not one client. I have just so many patients. They come fatigued and the weight gain. The brain fog and, you know, within six months, actually I would say within three months they are like 80% better and at six month most of them, they're just fine.

They're graduating out of my program and I just sent them off and they have learned and understood what are their triggers. Environmental toxin elimination can take a little longer sometimes, but again, do they start feeling better?

Yes, it's not like it takes forever to see a difference. The moment you remove them out of that environment, I think that is the most important step, and then supporting the body in the detoxification.

It's so fast and it's often it right in front of the ice it just can't see because no one looked on no explains it up they don't believe it like no mold is everywhere why would that be a problem.

So so yes your body our body is meant to function and detoxify and feel well so if it is not doing that. That you just haven't looked under the right stone yet i wanna argue.

Yeah. No, that's, fantastic. I really appreciate you carving out time, Dr. Angeman. It's I think one of my biggest takeaways from today's conversation is that these persistent symptoms, they really deserve some thoughtful investigation and why, yeah, certainly for ladies that Menopause may be a natural transition, but it isn't the only reason to have, you know, fatigue and brain fog and forced sleep, declining resilience.

There's a reason behind it. So really doing really good investigation, good data-driven fact-finding in labs and that personalized approach, I think, is really fantastic.

The goal isn't to assume that everything's caused by mold or mycotoxins. It's not that always, but just really to deeply evaluate and understand so you can get the right treatment approach.

Thanks for sharing your experience and helping us better understand how functional medicine and environmental factors can work together to support your patients.

If someone wants to learn more about you and the work that you're doing is Can you share with us how to get a hold of you, your practice, you're clinic, those sorts of things?

You can send me first an email, contact at DrKristinaEnsmann.com. I also have a website, DrChristina Ensmann dot com. Send me a message, fill out the contact form online, tell me what you want me to ask me, I'm gonna get back to you.

Absolutely. Do you, are you able to provide consultations from like a telehealth or telemedicine center as well? Yes. So my practice is like really 95% really tele-health for the functional medicine part.

I mentioned earlier, I have, you know, small in-person practice, but this is really for straightforward HRT or global vaginal disease. The detective work I really do online, and I'm a physician in Maryland, so outside these states I am basically a health coach.

Say, you know, it, I do the same thing for you. Yes. Perfect. Wonderful. Well, we'll make sure that we get all those, all that information posted on the show notes.

That way, uh, everyone doesn't have to rewind and listen to it again. And we will make it available for them. For those who listen today, and certainly hope you've enjoyed the episode.

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