

## 1 **Are You Missing Mold Illness?**

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## 2 **When Things Go Sideways**

- Are You Missing Mold Illness In Your Patients?
- Dr. Jill Crista

## 3 **When Things Go Sideways**

- Herx
- Exposure plan
- Travel tips
- Reintroduction
- Fortification
- What If's
- Cases

## 4 **How Mold Makes Your Job Harder**

- "Sensitive" patients~minute doses
- Counter-intuitive reactions
- Drug clearance~detox organs
- Immune depletion~chronicity
- Inflammatory reactions

- Sm vessel vasculitis & coagulation abnormalities~remedy delivery
- Cardiac~fatigue
- Neuro~"mold brain"
- Sleep
- ∴ Don't/can't stick to tx plan
- AND spiritually/energetically depleted

## 5 Peel The Orange

- 1 AVOIDANCE
- 2 FUNDAMENTALS
- 3 PROTECT
- 4 REPAIR
- 5 FIGHT

## 6 Orange Half Peeled?

## 7 Herx

## 8 The True Herx

- Jarisch-Herxheimer reaction
- Described over a century ago re: syphilis, induced by antibiotic tx
- Transient immunological phenomenon seen commonly in pts tx'd for spirochetal infxns
- Considered an adverse effect from antibiotic treatment
- Rarely fatal: neonates, LBW pregnancy
- "Complex interplay of its underlying patho-physiological mechanisms continues to elude modern medicine."
- PMID: 23632012, 28077740

## 9 The True Herx

- "Experimental evidence indicates it is caused by nonendotoxin pyrogen and spirochetal lipoproteins."
- Pro-inflam cytokines: TNF, IL-6, IL-8
- Accel phagocytosis of spirochetes by PMN leukocytes before rise in cytokines, but after antibiotic initiation

- Sxs ~  
Onset 24-hrs after initiating Abx  
Constitutional sxs resolve within hours  
Fever, chills, h/a, myalgias, exacerbation of existing cutaneous lesions
- PMID: 23632012, 28077740

## 10 Today's "Herx"

- Loosely defined & broadly applied
- Sx onset anywhere from hrs to days after initiating tx
- Self-resolves in 2-5 days
- Sxs ~  
Fatigue, h/a, cognitive/neuro, myalgias, n/v/d, exacerbation of existing skin sxs, rarely low-grade fever
- If longer than 2-3 days ~  
Tx too aggressive for pt  
Something else is going on

## 11 Mold "Herx"

- Induced by antifungals vs antibiotics
- Inhibit fungal sterol synth (impt fungal cell membrane component) vs intracellular Abs
- ↓ accel of phagocytosis → slower onset rxn
- ↑ ROS
- ↑ MC (metacaspases) - "executioners"  
Apoptosis, cytokine maturation  
Neurodegen & autoinflammatory disorders
- If mold senses ↑ threat → ↑ mycotoxin prod
- Mycotoxin vs nonendotoxin pyrogen
- ∴ think toxicity > microbial "guts"
- ∴ tx target is detox
- PMID: 10515900, 28983298, 18298652, 24415839

## 12 Herx Helpers

- 1st: Ask if tx needs adjusting  
Most common cause is iatrogenic

- 2nd: Fast
- 3rd: Take a salt bath
- 4th: Mega bioflavonoids
- 5th: Bamboo binding
- 6th: Consider fats & alkalization
- 7th: Consider enzymes
- Prep the tools and plan ahead
- Executive fxn during Herx = ☹

### 13 Fasting

- 12-24hrs minimum
- Fuel switch to fat-derived ketone bodies & free fatty acids
- “Induces adaptive cellular responses~  
Reduce ox damage & inflam  
Optimize energy metabolism  
Bolster cellular protection”
- ↓inflammasomes in steroid-naïve asthmatics, diminish airway epithelial cell cytokine prod
- Start immed at first sign of Herx
- During first 2-3 days of antifungal therapy for unstable pts or if need antifungals before you can fully peel the orange
- PMID: 24440038, 30021766

### 14 Epsom salts

- Prep by the tub, pre-arrange at supportive helper’s home w/tub
- Bath ~  
2-4 cups per bath x 20-30 min  
End w cool shower  
Caution: dehydration, abd cramping, bile duct spasm

- Poultice ~  
Mix 1 cup per 2 qts warm water  
Apply soaked towel to entire abdomen  
Cover w heat x 30 min  
End w cold scrub
- Practice before begin antifungals

## 15 **Bioflavonoids**

- ROS ~  
Less activity in mammals than plants, but still shown to be effective
- Protein kinases ~  
Substrates of active caspases  
Bioflavs inhibit
- SO pick a color, any color, make it liquid
- Lemon juice ~  
REAL lemons, squeezed & bluntly smash peel in container
- Tart dark cherry juice
- Carrot juice
- Wheat grass juice
- Onion soup broth
- Beiler's broth
- PMID: 23580885, 23434657

## 16 **Beiler's Broth**

- Recipe and additions

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- Recipe and additions

## 18 **Carbonized Bamboo**

- Well known in Japan

- Mild antifungal + antibacterial
- Porous nature ~ thirsty absorber (up to 10x more so than wood treated similarly)
- Research from Japan claims it emits ~  
FIR rays (thus improving circulation)  
Negative ions (shields from EMF's)
- Natural source of minerals (macro and trace) ∴ alkalizing
- Aborts the reaction, quicker return to normal
- Shown to be effective at binding aflatoxins\* (poss heavy metals)
- Contraindications ~  
Variegate porphyria
- PMID: 25014194

## 19 **Fats, Alkalizers & Enzymes**

- Lipid Rescue ~  
DHA 5-10 grams  
GLA 3 grams
- Alkalizers ~  
Alka-Seltzer Gold  
Tonic water
- Enzymes ~  
Lipase, protease  
Take away from meals
- Try any and all until better

## 20 **Herx or New Exposure?**

- Watch for signature trends
- Determine effect on ultimate survival of the being
- Hering's Law of Cure ~  
Revisit old symptoms
- Herx ~  
Better deep, worse surface  
Better mental, worse physical

- New exposure ~  
May look similar to Herx, BUT  
doesn't clear w Herx tx &/or reduction or d/c of tx

## 21 **Doc, What's Happening?**

- 
- Developed a terrible rash & sinus congestion, but anxiety is a little better.
- Is your patient getting better or was there a new exposure?

## 22 **Rationale**

- 
- What is the "deeper" issue, or the one which is more detrimental to wellbeing...
- skin rash or anxiety?  
sinus infection or anxiety?

## 23 **Anxiety!**

- May see skin rash or sinus infection at the resolution of deep-seated anxiety
- Most likely a "Herx"

## 24 **Exposure Plan**

## 25 **Exposures Will Happen**

- Cars, restaurants, shopping, school, church, travel
- 
- What to have along ~  
Nasal spray  
Bioflavonoid of choice  
Cholagogue  
Antifungal (if pt strong enough)  
Posse ready to support
-

## 26 Travel Tips

## 27 Travel Tips

- Rental cars ~  
A/C - turn on, off, on, watch for reaction, then don't use if poss  
Take time to be in car w closed windows before driving away
- Hotel ~  
Tell them mold sensitive at check-in  
Room inspection - water stains on ceiling, below A/C unit, below sink  
Request new filter for your room, BE THERE to avoid deodorizer  
Then don't use HVAC if poss

## 28 Reintroduction

## 29 Reintroduction

- Yes, you can get your life back after mold!
- 
- 
- Typical timeframe (selection bias) is 2 years to pre-mold norm
- 

## 30 Diet Reintroduction

- All foods tolerated before mold  
s/b tolerated after mold
- Add back slowly, q4-7 days
- 1st: Begin with Tier II foods if removed
- 2nd: Fermented foods/bevs
- 3rd: Foods that get moldy from growing/storing techniques
- 4th: Foods/bevs that promote yeast overgrowth
- 5th: Foods that are actual fungus

## 31 Fortification

## 32 Fortification

- Myco-Remediation ~  
Agarikon, Maitake, Shitake, Reishi, Ganoderma, Hericium, Trametes, Cordyceps (rebirth), etc...

- Paul Stamets, Mycologist
- Mycelium hyper-accum Se
- “Mycelial networks are the foundation of the food web, the interface organisms between life and death, and build soil.”  
Interview on WPR’s To The Best of Our Knowledge
- Imagine what they do for our soil

### 33 Immune Modulation

- Many well-researched immune modulating botanicals which also have anti-fungal action ~  
Pau D’arco, Garlic, Holy Basil, Cordyceps
- Botanical immune modulators ~  
Astragalus, Codonopsis, Eleutherococcus, Ligustrum, Panax ginseng, P. quinquefolius, Rhodiola, Schisandra, Withania
- PMC3915757, PMC3874089, PMC3909570

### 34 What If’s

### 35 What If... Can’t Leave the Mold?

- Is it even worth treating?
- YES!
- Protect tissues/cellular invasion ~  
DHA  
Bioflavonoids  
Milk thistle, turmeric, artichoke  
Green tea
- Protect genes ~  
[CoQ10 + L-carnitine +  $\alpha$ -tocopherol + Se]
- Minimize colonization ~  
Nasal spray

### 36 What If... Only MPA + But Symptomatic

- Key points, pt is symptomatic + not testing every mycotoxin
- Variables to note - duration of WDB exp & sx level/type
- Taking glutathione? ~

- May create false neg myco's  
(does exactly what we want it to do - detox)
- Neg test doesn't confirm no myco's bc symptomatic  
(note that MPA alone can still make pt sick - usually GI)
- If no glutathione ~
- 1st: still being exposed?  
Remediation didn't address "stuff" contamination
- 2nd: pt too toxic to detox myco's & dump in urine
- 3rd: processed myco's well, but has genetic snp impairing MPA clearance (Green tea & ECGC)  
BUT that's only probable if pt feeling overall much better
- Plan ~
- Proceed with the full mold tx until improvement in sxs, including systemic + nasal txs
- Don't be surprised on subsequent myco testing, start spilling mycotoxins

### 37 What If... Reaction to Antifungals

- Question your tx ~  
Too much?  
Too soon?  
Wrong choice?
- Prep done aka "peel the orange"?
- Still being exposed?
- Plan ~  
Impress on pt - no exposure!  
Reduce or pause antifungals  
Support weak system
- 
- 
- 

### 38 What If... Can't Tolerate Binders?

- What do you mean by binders?
  - Pharmaceutical
  - Fiber
  - Clay/charcoal
  - Food
- Why can't tolerate?
- Provoking bile?
- Plan ~
  - Start with steamed kale & bitters
  - Add 5-7 servings veg
  - Try charcoal
  - Try rice bran fiber
  - \*Binders are not necessary to getting better

#### 39 **What If... Can't Tolerate Glutathione?**

- Not uncommon!
- Unsupported detox ~
  - Not pooping
  - Need cofactors/coenzymes
- Other ways to boost GSH ~
  - NAD, B-vitamins
  - Selenium
  - ALA
  - Milk thistle
  - Turmeric

#### 40 **What If... Not Better Despite Full Avoidance?**

- Are you sure there's 100% avoidance???
- Consider viral load
  - EBV, HHV-6, Coxsackie
- Consider opportunists
  - Lyme, co-infections
- Consider other enviro toxins
- Consider food sensitivities

- Mitochondrial dysfunction
- Genetic snp support

#### 41 **Cases**

#### 42 **Aspects of a Comprehensive Plan**

- Avoidance avoidance avoidance
- Diet diet diet
- Bioflavonoids
- Good fats
- Bile movement
- Fiber binding
- Detox + mito support
- Immune support
- Antifungals

#### 43 **CASE | CPAP Dementia**

- Late 70s F, LT pt
- Concerned adult kids ~ mom's safety
- Beg signs of dementia, garage door open overnight
- Progressing confusion, balance issues, requiring cane
- HTN, constipation, C-PAP for RLS insomnia
- Sinusy voice normal for her
- Large historic home, "bad about dusting"
- Stopped using C-PAP "bc forgetful"

#### 44 **CASE | CPAP Dementia**

- Kid intervention - Monitor (aka force) C-PAP use, major dust/declutter & air filter in bedroom, found a little mold in basement - cleaned with bleach
- Husband's insomnia improved. Hers worsened, but naps ok in recliner ~ too far from her C-PAP to use
- Worsening sx's overall: High anxiety, fears, worry, night wandering, personality change, worsening confusion, forgetful
- Having new food reactions, so "forgets"/avoids eating

- BP on the rise, takes at home in am
- Kids have scheduled another sleep study, long wait time

**45**  **CASE | CPAP Dementia**

- P/E ~
- Vitals - bp 158/90, HR 104, RR 16, temp N  
Eczematous rash b/l ear canal, b/l pedal onychomycosis  
Arthritis - ankles, fingers/toes  
Blepharitis, anosmia, enlarged turbinates, pharyngeal cobblestoning  
Delayed capillary refill, dermatographism  
LU - harsh bronchial breath sounds
- HT - RRR, no adventitious sounds  
Abd - delayed BSAQ, bloating  
Neuro - all wnl
- Labs ~  
↑hs-CRP if not taking B-complex, B-12  
↑LDL  
Vit D 25-OH - 23

**46**  **CASE | CPAP Dementia**

- P/E ~
- bp
- Toenail fungus
- \* \* \*

**47**  **CASE | CPAP Dementia**

- P/E ~
- bp
- Toenail fungus
- \* \* \*

**48**  **CASE | CPAP Dementia**

- P/E ~
- bp

- Toenail fungus

• \* \* \*

49  **CASE | CPAP Dementia**

- P/E ~

- bp

- Toenail fungus

• \* \* \*

50  **CASE | CPAP Dementia**

- P/E ~

- bp

- Toenail fungus

• \* \* \*

51  **CASE | CPAP Dementia**

- NeuroQuant

Triage Brain Atrophy Report (TBAR)

- Compressed 3rd ventricle

surrounded by inflamed thalamus

- Assymetry

- Thalamus inflam

Site of mast cells MCAS

Limbic activation

52  **CASE | CPAP Dementia**

- NeuroQuant

Triage Brain Atrophy Report (TBAR)

- Cingulate inflammation

- Frontal atrophy

53  **CASE | CPAP Dementia**

- NeuroQuant

Triage Brain Atrophy Report (TBAR)

- Ventricular asymmetry (TBI?)
- Patchy asymmetry  
Inflammation, infection

**54**  **CASE | CPAP Dementia**

- “Oh yeah, mom had a fall” - many years prior
- Mold inspector ~ Minor fragments in basement. No obvious water intrusion. Issues with clutter, cardboard storage, humidity, dust.
- Recommended remediation - HEPA vac + wipe down surfaces, air filtration, replace all cardboard storage containers, better dust & humidity mgmt, duct cleaning
- Tested C-PAP machine ~ extremely high Aspergillus, +Endotoxins
- Wasn’t maintaining adequate cleaning schedule or replacing tubing

**55**  **CASE | CPAP Dementia**

- Tx ~
- CPAP: Cleaned machine appropriately, replaced tubing, SoClean ozone system. Home changes took a little longer, done by kids.
- Nat sulph 200c
- DHA 3gms daily, divided
- GLA 1 gm daily, divided
- Liposomal phosphatidyl choline 500mg bid
- Melatonin 3mg hs + 3mg sustained release
- Green drink - bid
- Resveratrol - 1gm divided
- Liposomal curcuma/resveratrol 400mg/150mg bid
- F/U in 3-4 weeks

**56**  **CASE | CPAP Dementia**

- 1st F/U ~  
Improved sleep, anxiety, confusion, joint pain

- Worsened constipation, food reactions
- Sinuses cleared at first, now congesting again
- Reduce DHA 2gms daily, divided
- Reduce GLA 500mg daily
- D/C added resveratrol, replaced with quercetin 600mg tid
- Cont greens, PC, curcuma/resveratrol, melatonin
- Add: Garlic tincture with Thymus & Holy Basil alternating 1 tsp bid-tid
- Intranasal ozone daily x 1 week, then 3-4x/week
- F/U 6 weeks, sooner if poor reaction to antifungals

#### 57 **CASE | CPAP Dementia**

- 2nd F/U ~  
Marked improvement in RLS, sleep maintenance, sinus congestion, BMs, food rxns
- Improvement in all dementia sxns, bp
- Anxiety still an issue, desires easier nasal tx
- Continue DHA, GLA (found a combo prod) - 2 gms divided
- Reduce PC 500mg daily
- Cont curcuma/resv, greens
- Reduce quercetin 600mg bid
- Cont melatonin 3mg hs, but d/c added 3mg sustained release
- Cont Garlic tincture with Thymus & Holy Basil alternating 1 tsp bid
- Replace Intranasal ozone with propolis nasal spray
- Limbic retraining via FSM
- F/U 3 months

#### 58 **CASE | CPAP Dementia**

- 3rd F/U ~  
Sustained improvement in dementia sxns, RLS, sleep maintenance, sinus congestion, BMs, food rxns, bp
- Anxiety - reducing but not as fast as desired
- Alternate DHA/GLA with PC

- Reduce quercetin 400mg bid, over time wean, watch sinus congestion
- Cont greens, curcuma/resv (may wean over time, watch joints)
- Use melatonin 3mg hs prn
- Cont Garlic tincture with Thymus & Holy Basil alternating  
1/2 tsp bid (wean over time)
- Cont nasal spray hs
- Limbic retraining via DNRS
- F/U 3 months
- Over time, dementia sxs continued to improve & now no longer an issue. Anxiety improved.  
Better about managing dust/humidity

#### 59 **CASE | Breathless & Anxious**

- Early 50s M, outwardly calm, conscientious, but suppressed
- Executive, accustomed to high pace & high functioning
- Remodeled a Frank Lloyd Wright home in "choice" neighborhood
- Relationship problems "this house killed my marriage", divorce
- Beginning breathing troubles around same time
- Describes "broken heart pain"
- Anxiety, insomnia, weeping
- Dx allergies, asthma, anxiety
- Rx steroid nebulizer, rescue inhaler, anxiolytic
- 

#### 60 **CASE | Breathless & Anxious**

- Worsening resp sxs
- Various specialists, no answers
- Worsening insomnia, new onset reflux, jock itch
- Allergist confirms mold allergy
- Rx antifungal cream w steroids, proton-pump inhibitors, statins\*
- \* \* \*

- All sxs worsening esp breathing issues, very distressing
- New onset tinnitus, pelvic pain, constip, jock itch wakes from sleep
- \* \* \*
- In desperation, comes to see the woo-woo doctor in town

61  **CASE | Breathless & Anxious**

- 
- ?

62  **CASE | Breathless & Anxious**

- 
- ?

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- Home inspection revealed mold covered over by remodelers
- \* \* \*

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#### 66 **CASE | Breathless & Anxious**

- Labs ~  
 Fe-def anemia, ↓WBC, ↑IgE, rising liver enzymes,  
 ↓Vit D 25-OH  
 Stool test - +Candida, (-)SIBO  
 Nares Culture +MRSA

- Tx ~ (pt request - "give me everything")
  - Home mold inspection
  - Already pristine diet, organic veggies, low animal protein
  - EVOO 1 Tbsp qid
  - Quercetin 600mg qid
  - Hawthorn solid extract 1/2 tsp tid
  - Lung tincture blend 1/2 tsp tid (Symplocarpus, Asafoedita, Eriodictyon, Verbascum)
  - Aloe juice 1 cup tid before meals
  - Bile salts with dinner, trial Betaine HCl
  - Emulsified vit D - 10,000 IU daily
  - Allicin swab nares bid
  - F/U 3 weeks after home report available

#### 67 CASE | Breathless & Anxious

- 1st F/U ~
  - Home loaded with mold, covered over by remodelers
  - Mild improvement in asthma, reflux, constipation. HCl too burny.
  - Excited, first sign of possibility of improvement
  - Request retest and antimicrobials
  - Tx ~
  - Move out while home remediated
  - Cont EVOO, Quercetin, Hawthorn, Lung formula, Aloe, Bile salts, D
  - Add psyllium husk fiber 1 Tbsp daily
  - Add Nebulized GSH (compounded) bid
  - Intranasal allicin bid
  - D/C statin
  - F/U 3 months, unless downturn, retest 2.5mo
- Antifungal combo as follows...

#### 68 CASE | Breathless & Anxious

- Step 1:  
Thyme tincture ~  
Loading dose x 1 week before Rx  
1 tsp tincture bid
- Step 2:  
Add pulsed Fluconazole - 200mg x 3-4d/wk
- Step 3:  
Add pulsed antifungal botanical on alt days (ie Pau D'Arco,  
Oil of Oregano)
- Step 4:  
Continue with botanicals x 1 addtnl mo, d/c fluconazole  
Thyme tincture ~ 1 tsp qd  
Pau D'Arco ~ 500mg caps qd-bid, pulsed varied (Neem, Monolaurin)
- Step 5:  
Continue pulsed rotating antifungals x 6-12mo or until neg mycotoxins

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#### 70 CASE | Breathless & Anxious

- 2nd F/U ~  
Marked improvement resp, GI, HT, jock itch  
Anxiety, mood issues, bloating, sweet cravings persist
- Tx ~  
Stay the course on supps, neb, intranasal  
Increase animal protein
- Replace steroid-containing antifungal w pure antifungal  
Alternate nostril breathing qd
- Retest mycotoxins, OAT, nares in time for appt  
F/U 3-4 mo unless downturn

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#### 75 **CASE | Breathless & Anxious**

- 3rd F/U ~  
Persistent MRSA, Candida on labs but asx  
Flaring when home, better work travel
- Tx ~  
Retest home, more to remediate?  
Cut all oral supps in half, one at a time, divided by 1-2 weeks, watch sxs  
Reduce nebulized GSH to qd  
Replace Intranasal allicin with e.o. blend, add intranasal xylitol
- Wean lung tincture, add NAC
- Cont antifungal combo plan, slow wean after neg mycotoxins
- Cont rotating biofilm txs, watch reactions
- Talk to gastroenterologist for plan to wean PPI

#### 76 **CASE | Breathless & Anxious**

- Resolved ~  
Acute breathing issues, allergies, "heart pain", weeping, reflux, jock itch
- Improved anxiety, insomnia, asthma
- D/c'd steroid nebulizer, proton-pump inhibitors, statins
- Retaining rescue inhaler
- Anxiolytic prn for occasional insomnia
- Residual tinnitus, pelvic pain lasted up to 2 additional years
- Asthma eventually resolved but keeps rescue inhaler on my request
- Remediation took 3 tries
- \* \* \*

## 77 **Review**

- Herx
- Exposure plan
- Travel tips
- Reintroduction
- Fortification
- What If's
- Cases

## 78 **Thank You**

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