Dr. Sandeep Gupta is joined by Lyme expert Dr. Nicola McFadzean Ducharme about some practical tips and tools you can use if you have both Lyme-like illness/stealth infections and mold illness/chronic inflammatory response syndrome (CIRS).

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Dr. Sandeep: Okay, welcome everybody to this webinar on tools for dealing with Lyme and mold related illnesses. My name is Dr. Sandeep Gupta and I’m very pleased to have Dr. Nicola McFadzean Ducharme here with me today. How are you today Dr. Nicola?

Dr. Nicola: I’m doing great, thank you so much. It’s so wonderful to be with you.

Dr. Sandeep: Thank you for joining us. I think this is going to be a really important webinar, because there’s a lot of information out there regarding these illnesses but sometimes it’s the practical points where many of our clients and patients can get stuck, and sometimes these fine points of dealing with Lyme-related illnesses or mold are some of the things that aren’t talked about in as much detail. So hopefully we can cover some of those points today and give people some practical pointers which will help them to move forward in their journey with these illnesses.

We have a disclaimer here: this webinar is for general information only and not intended to diagnose, treat, or cure any medical condition. It assumes that you are under the care of a licensed health practitioner, and also we should make it clear that the information given in this webinar and the terms used are outside the parameters of conventional medicine, and fall under the scope of integrative medicine.

This webinar will be describing supportive therapies for Lyme disease, Lyme-like, other stealth infections, and
what we colloquially call mold illness, the more technical term is chronic inflammatory response syndrome due to water damaged buildings (CIRS-WDB). That’s a mouthful. It doesn’t go into the diagnosis or primary treatment of these conditions and the exact protocol. Just to disclose, there may be a small affiliate referral fee for the courses that the reader purchases related to Lyme-Ed and so on.

0:02:54 - About Dr. Sandeep Gupta

Okay. A little bit about me. So those who have been tuning into these webinars are probably sick about hearing about me already, but really as you would know, I’m a physician from Australia. I graduated from the University of Queensland in 1999 and worked in a hospital intensive care for around five years in the city of Brisbane, Australia. I now have a private holistic medicine practice in the Sunshine Coast and also in Sydney, and also do Skype consultations worldwide for those who are looking for help with these sort of conditions. I was the author of the Surviving Mold Down Under paper which luckily helped people in Australia break ground regarding finding resources and tests and for chronic inflammatory response syndrome (CIRS), which at the time was a very new condition. Also I was lucky enough to be the co-author of The Physician’s Consensus Statement with doctors Ackerley, Berndstson, Rapaport, McMahon, and Shoemaker, which was in 2015. I’ve also launched a teaching institute which I’ve named The Lotus Institute of Holistic Health last year, and also have joined the new society, which is known as the International Society for Environmentally Acquired Illness, or ISEAI.

0:04:27 - About Dr. Nicola McFadzean Ducharme

Dr. Sandeep: Dr. Nicola, would you like to introduce yourself a little bit to the viewers?

Dr. Nicola: I qualified as a naturopath in Australia, and then I moved to the United States. So, I still call Australia home for you Aussies listening in, but I’ve lived here for 20-something years. I got my doctorate of naturopathic medicine from Bastyr University and went into private practice in 2003. I spent a couple of years really specializing in autism spectrum disorders and then was starting to see parents of kids with autism and testing them, and I was very much into functional medicine, which is evaluating the imbalances in the body that can contribute to health issues. Whether or not it’s termed disease is another whole thing. So I started working with Lyme patients in about 2005 and just found it came up time and time again on the radar. So that’s really been my speciality since then. Now I would say 99.5% of my practice is Lyme.

I’ve written four books on Lyme disease, The Lyme Diet which is coming up on 10 years ago now, which feels crazy to me, Lyme Disease in Australia, The Beginner’s Guide to Lyme Disease, and then Lyme Brain which was published a couple of years ago.

I’ve recently released a course, Lyme-Ed, which has a patient-based version and also a practitioner-based version, just trying to, again, help educate patients and practitioners in the treatment of chronic Lyme disease.

Dr. Sandeep: Great! Thank you for that introduction.

0:06:02 - Why do Lyme and mold illness often co-exist?

Starting to talk a little bit about Lyme-like illness and mold-related illness, and one of the big conundrums for many people who are starting to investigate these conditions is trying to understand why these conditions
often coexist. I guess one of the big things, Dr. Nicola, is that it seems that there’s a certain genetic susceptibility that many of these patients share. Do you find that you notice that patients have a genetic susceptibility to both these conditions?

**Dr. Nicola:** Yeah, I do. I think there is a genetic susceptibility, a sort of predisposition, and then I think it’s also this perfect storm idea where if the immune system is taken out by one thing, then it’s so busy and stressed trying to handle that, and potentially suppressed to handling one big issue, being chronic infections or mycotoxin illness, whatever, then anything else is just above and beyond. So I think it is a genetic predisposition and then I think there’s a total load issue of how much can any one immune system be expected to handle.

**Dr. Sandeep:** That’s right. When the immune system gets hit by one insult, if you like, it can be like for instance if one gets a tick bite this can create a cytokine storm, which means a series of inflammatory chemicals that can be released in the system and that can actually affect the expression of these genes which we call HLA genes and make us susceptible to water-damaged buildings or mold, even if you may not have been prior. I find that to be a really interesting interaction actually, how that works. I’ve seen that many times in clinical practice where people say, for instance, I was living in a moldy building but it wasn’t until I had a tick bite that all of a sudden then I started really noticing it was affecting me, so that’s a really, really interesting interaction that seems to occur.

Both seem to involve biotoxins, meaning these small, negatively charged particles that are released from mold species such as Aspergillus and Chaetomium, and Stachybotrys, and so on, and also from tick-borne organisms such as Borrelia and Babesia. It seems that these biotoxins in many cases are what seems to trigger this chronic inflammatory response, and in our course, Mold Illness Made Simple, we refer to that as the silent fire of inflammation which is occurring in people’s body. It seems that sometimes there can be multiple triggers that contributes to the silent fire of inflammation. Have any thoughts regarding that, Dr. Nicola?

**Dr. Nicola:** Well I agree. I think inflammation is such a big deal, and I feel like a lot of attention is paid to detoxification and I don’t disagree with that, I think detoxification is huge and I’m a big proponent of it, and it’s the first thing I do with my patients, I think we detox before we do anything else, but I slightly feel that inflammation and that inflammatory cascade is a huge piece of what our patients experience, whether it be - Lyme, mold, or both, heavy metals, whatever - some of these big triggers. So I think that inflammatory cascade is a huge part. And I realized that when I wrote Lyme Brain and I was evaluating these things - people have brain fog, people have cognitive dysfunction, memory loss, word finding issues, all of these different things, like what’s going on in the brain? Is it all infection? Is it toxicity? And really there are a few things I feel going on but one of the big ones is inflammation.

I think that needs to be one of our primary considerations up there with detoxification. I feel like inflammation is a little bit second fiddle.

**Dr. Sandeep:** I know what you mean by that, actually. I think this work by [Dr. Ritchie Shoemaker](http://www.ritchieshoemaker.com) seemed to really bring the importance of inflammation right into the forefront a little bit more, and for me it seemed to be quite practice-changing.

An additional point; one concept I originally had was that if a person had a stealth infection such as a Lyme-like illness, and one had inflammation, that it was simply a matter of treating the infection and the inflammation should go away. However, interestingly what appears to happen practically in some patients is
that one actually needs to address the inflammation as part of it, or maybe even first for the infection to go away. It actually seems to create a block to some degree in and of itself, which is very, very interesting.

**Dr. Nicola:** Yeah, and I think when people think about Herxheimer reactions, which we talk about certainly in Lyme-like illness and treatment with antimicrobials, we all talk about Herx reaction, and I think again there’s a common thread that Herx means you need more detox. Well yes, I think Herx does mean you need more detox, but Herx also means there’s an inflammatory cascade and we need to cut through that and get to the root of that, and I feel like that’s so much of what’s happening with the mold illness and I’m interested to hear your thoughts, because what comes up for me a lot is do we treat Lyme first? Do we treat mold first? And for me it feels a bit contextual in that people come to me as a Lyme expert and we’re treating Lyme, and then along the way we’re looking at what else is getting in the way? So then I’m looking at heavy metals, I’m looking at adrenals, thyroid, hormone imbalance, like reproductive hormones, oral infections, EMF sensitivities, I mean all these different factors that we’re trying to evaluate along the way, and a big one now, huge for me in the last two-three years, is the realization that mycotoxin illness is massive, and probably the biggest hindrance of recovery from Lyme and related infections.

I think one of the common threads is the inflammatory reaction, and yes, and you and I as clinicians, but also our patients, need to be considering how can we reduce inflammation as well as supporting detox in terms of bridging the gap between treating Lyme and treating mold.

**0:12:51 – 10 biggest mistakes people make with Lyme & mold**

**Dr. Sandeep:** So now just changing gears a little bit, I thought it would be great for us to start talking a little bit about what are some of the 10 biggest mistakes people might be making on their journey towards Lyme and mold. I and Dr. Nicola have both put our lists together here. Just before we start talking about it I want to make the point that many would say in a philosophical sense that there’s no such thing as a mistake, there’s only learning. I’m a believer in that statement, that really this is all just part of our learning. So it’s also very important that we don’t beat ourselves up around little things that we’ve missed along the way, and really we just take them as positive influences or positive learning that we take along the journey.

For instance, I want to make the point that when I was suffering from mold-related illness and I realized that I and my partner at the time were living in a very water-damaged building, one of the things we did was just immediately find a new building that was quite pristine from a mold perspective, but what we did was we moved all of our furniture that was contaminated to the new residence. So we did one of the 10 biggest mistakes. But on the other hand, if I hadn’t made that mistake I wouldn’t have realized the importance of that step and I wouldn’t have been such a big advocate of that for other people. So in a sense I just wanted to make that point that there’s a beautiful learning that we make every time that we make a mistake. I don’t want to frame this negatively. They’re just little learnings that we have had as clinicians because we’ve dealt with lots of people and we’ve looked at lots of cases.

1. So jumping right into it, my 10 biggest mistakes in dealing with mold and Lyme are not addressing the inflammatory side of the illnesses, and we’ve talked a lot about that already.
2. Putting no or little emphasis on diet. Sometimes I’ve found that people can get so focused on this condition of Lyme or mold or whatever it might be, that all the attention is on seeing it as an external invader and finding out how they can find the next best supplement or medication or bit of information about that, but some of the basics like eating well get missed along the way. So I want you just to bring
that into the awareness, and if that’s something that you might be doing, it’s simply a matter of just shifting the awareness a little bit and just seeing what little things can you do to improve your diet so you have even better a foundation for your healing program for Lyme or mold.

3. Not having a regular detoxification program, and I think that’s pretty self-evident. Obviously through the treatment program there is going to be a lot of metabolites you that are coming through your system, and if you don’t have any detoxification program such as infrared saunas or colonics, or coffee enemas, or anything like that, then that may cause a block for you in moving forward.

4. Putting no or little emphasis on emotional release techniques, and generally people take a while to twig as to the importance of emotions on this journey, and I’ll go into this later a little bit further, but really just realizing that one part that can be a major block on the journey of healing from Lyme or mold is the stuck emotions in our system and not having any way of addressing those on a regular basis can definitely pose a block on your journey towards wellness.

5. Not having a solid and healthy lifestyle that supports healing. So an example of that would simply be not getting enough sleep. For instance if you’re up really, really late on the internet and reading all about your illness, even though it’s really great to inform yourself and so on, that can be counterproductive. We want to make sure that you’re getting the basic lifestyle in place and getting enough sleep, getting enough water, et cetera. Just making sure you’ve got those basics in place. Getting some regular exercise, getting some fresh air, getting some sunshine. All of these are just really basics of a healthy lifestyle.

6. Not staying on antimicrobials for long enough. I’ll leave that one to Dr. Nicola to talk about, but that’s an important one with regard to Lyme.

7. Not totally getting out of mold exposure. That’s a really, really important one and I think it’s pretty self-explanatory, that if you’re still getting exposed on an ongoing basis it’s going to be very difficult to totally disarm your inflammatory process.

8. Moving contaminated possessions to a new, clean residence. I did it myself, as I said before and it’s a major trap. So really that’s just a piece of knowledge that when you remediate, or you move to a new residence you need to make sure that any contaminated items are dealt with along the way and that’s a really important point, otherwise you can contaminate your new residence.

9. Not addressing MARCoNS. MARCoNS stands for multiple antibiotic resistant coagulase negative staph. They’re often found in the deep nasal passages. If you don’t look at them they can be another inflammatory trigger that can still be lighting the fire of inflammation in your body, and that can be one little nail that you haven’t pulled out along the way. Very simple to check for with a nasal swab sent off to Microbiology DX. Any practitioner can order it.

10. Not using toxin binders such as cholestyramine, et cetera. Occasionally you find some people even in the mold world who are working just with antimicrobials and just with mold-killing agents, and often that is not going to be enough in my opinion.

Those are my 10 biggest mistakes that I see. I’d like to head over to Dr. Nicola for her talking about what are her 10 biggest mistakes.

**Dr. Nicola:**

What I like about this is that some of our biggest mistakes or challenges, or hurdles are definitely consistent.

1. For me, number one is putting little or no emphasis on diet. I am such a huge advocate for people adjusting their diet and doing whatever dietary modifications they can, because in my mind one of the
key drivers of inflammation is the foods you’re eating. Gluten is the number one inflammatory food, dairy is also fairly inflammatory. Sugar has its own issues which are more sort of in my view immune suppressive and feeding Candida and things like that, but for me, if you’re sitting there and you’re at home and you’re unwell and you’re dealing with all these chronic burdens on your health, why now work with what you have the most control over? Because it’s the day to day changes that you make and
that you can facilitate in your own life that are ultimately going to make the most
difference. Practitioners like Sandeep and myself, we’re absolutely committed to your health and absolutely committed to making a difference in your life, and we’ll do everything that we can but we need you to do your stuff too. To me, the nutritional element, the dietary element, my patients that really just go for it and make those dietary modifications by far do better in the long run, by far. Even in the short run, I mean, people are so profoundly impacted. I’m a huge advocate of that. I wrote *The Lyme Diet* 10 years ago, it’s still very popular today, I’ve been so honored and so blessed by that. But what it tells me is, people want this information. They want to know what can they do for themselves. Because I feel like mold illness and Lyme, they’re so impairing. They’re chronic illnesses, they’re challenging. There’s a lot of things to overcome and dietary modifications are one thing that people can take into their own hands and really sort of take command of. So I would really encourage you if you’re listening to just take that to heart. It makes a huge difference. I get it’s hard. I realize how big of a change this is that we’re asking you to make, but I promise you it’ll be worth it. So that’s my number one.

2. **Not having detox strategies in place before doing antimicrobials,** I feel that’s a big mistake, I always do that with my patients, I start detoxing first, even if it’s only a week before. Just make sure that sort of those things are in place and there are some supplements and herbs that can really help. I’m a massive fan of glutathione, and we’ll talk about these a little bit later in the webinar, but just making sure that those bases are covered I think is big.

3. **I agree, not putting enough emphasis on emotional release and healing,** I feel like is huge. Again, don’t get me wrong, I’m not suggesting for a minute that this illness is all in your head or you’re just depressed or just anxious and need to deal with those elements. That’s not it. We know that these are very real physical issues, physiological problems that you’re facing, and there are emotional things that keep us all stuck. It’s all of us. I think working on those things can just help that release and help bring those bubbles up to the surface so that they’re not getting in the way of recovery.

4. **Not adjusting lifestyle to support healing,** I’ve seen this a lot, people doing too much. You can’t burn the candle at both ends you need to allow your body that parasympathetic response to rest and digest. So when you’re in sympathetic nervous system response, that’s your fight or flight, fight or freeze. You’re go, go, go. You’ve gotta figure it out. You’ve gotta make it work. You’ve gotta keep going. You’ve gotta hang tough. That all puts your body in sympathetic nervous system response, which is not your healing nervous system response. Your healing nervous system response is parasympathetic, but that requires you to slow down, it requires you to take some deep breaths. It requires you to find those mindfulness techniques, and that can be like trying to do too much, and especially, Sandeep I don’t know if you agree with me, when people get a little bit of recovery and they just go out, like hog wild, to do everything they used to do because they’re feeling well enough. But the body needs extra time, it needs healing time.

5. **Staying on antimicrobials long enough.** I agree with that. To treat these infections adequately we have to give it a good amount of time. We have to treat two months beyond resolution of symptoms. It doesn’t always mean two months on medication, but two months on some kind of antimicrobials to make sure that we’ve got the job done.

6. **Not addressing all three forms of the Borrelia bacteria.** So this is quite Lyme specific, but it’s one of the things I’m really big on. Borrelia bacteria can exist in three different forms, spirochete, cell-wall
deficient and cyst form. If you’re doing an antibiotic to address one form only, in my opinion you’re missing the boat. We have to be comprehensive in the different forms of antibiotics or antimicrobials to make sure. Now that’s more related to antibiotics, less related to herbal medicines, but my view is if patients are on antibiotics we have to be hitting all three forms.

7. We have to be hitting co-infections. If we’re missing co-infections that will also hinder recovery. I’ve seen lots of people treated for Lyme that target Borrelia but miss co-infections.

8. Similar for biofilm. Biofilm is a sticky goo that bacteria hang out in. They create it, they live in it, they’re protected by it. Think of it like slime. I have a four-year-old daughter, so it’s slime all day long in my house. I think of it like that. It’s like slime that bacteria exist in.

9. Mold exposure, which obviously is Sandeep’s specialty, evaluating that, getting out of current exposure which can be really, really hard but necessary, and then using binders and other agents to address those mycotoxins, and then all the other stuff.

10. It’s a lot and it can be really overwhelming and it’s a process that happens over time. But heavy metals, adrenals, oral health like amalgam fillings, cavitations that can harbor bacteria. There’s so many things that can come into play. I’ve recently been looking a lot at EMF sensitivity and the impact of EMFs on our health, and how we can remediate that. So they’re all different pieces of the puzzle that this is where it gets overwhelming potentially, but if we can be systematic and if you can have a health care practitioner that can help walk you through the different pieces of that puzzle, I think that’s where it gets really important.

0:26:15 - Inflammation, immune and pain support

Dr. Sandeep: Right, thank you for that. Hopefully, that was really helpful for people just identifying some possible mistakes or areas where you could be tripping up along the way on your healing journey. We’re going to jump through this pretty quickly because we’ve already covered it in a fair bit of depth. Really just talking a little bit more about how we can address inflammation, and help your immune system, and deal with the pain.

- One of the key things is to reduce the exposure to mold (and other) toxins. Particularly, that’s going to come in really trying to remediate your home environment and also, try to just avoid any building exposure that may trigger you from a mold perspective. From the Lyme perspective we’re more looking at avoiding tick bites and really just lowering the amount of exposure we’re getting to these bacteria. Then, binding the toxins with binders such as cholestyramine, bentonite clay, zeolite, charcoal, et cetera. All of those can really greatly help to reduce the burden of toxins.

- Number two; treat other conditions. So, there can be a whole bunch of associated conditions with Lyme and mold and some of them include what we call pyroluria. And there’s a lot of information for that on the web if you want to look that up. Electromagnetic frequencies (EMF) can be an issue for many people. Heavy metals, as Dr. Nicola already mentioned, MARCONs as I mentioned. Dental issues can be a big issue. If you haven’t had an assessment with a holistic dentist at some point I highly recommend that. Methylation can be an issue for some people. For some of us doing one of the panels on methylation can be extremely helpful. Looking at mast cell activation syndrome or MCAS can be a really, really important part of this. Especially for people who are finding they’re not able to tolerate any of the treatments, and who are getting a lot of rashes and flushing and reactions to food that can be a really important thing. For some people that needs to be addressed before they can tolerate any type of pharmaceutical or even natural supplement treatment. And then also, looking at hormonal imbalances.

- Then there are some specific herbs and pharmaceutical agents, but mainly herbs actually that seem to be very helpful for reducing inflammation. Some of these include curcumin, resveratrol, and boswellia.
I’m sure these are supplements you use regularly Dr. Nicola. And proteolytic enzymes can be extremely helpful for lowering inflammation. There’s one product called Cytoquel from Research Nutritional that we find to be particularly helpful. There’s various forms of vitamin C which can very immune modulating and beneficial. Particularly, I’m a fan of whole food vitamin C. There’s various transfer factor products that can really help with certain aspects of the immune system and boosting the natural killer cells. Beta-glucans are a supplement which come from medicinal mushrooms which can be really, really helpful. Astragalus, Colostrum, et cetera. This is a whole alphabet soup where, I guess, working with a practitioner can really come in handy to help you know which particular supplements may be helpful in your case.

*From a more pharmaceutical point of view, low dose naltrexone (LDN). This is a medication which is actually used for alcohol withdrawal at full dose. But is used in a much lower dose in these sort of situations, usually around 4.5 milligrams taken last thing at night. It can be a very beneficial supplement for boosting the immune system and helping inflammation. PEMF is a new kid on the block. It’s also called Post Electromagnetic Field Therapy. Hyperbaric oxygen therapy (HBOT), ozone therapy, cold therapies. Also one of the really key things in the mold protocol is the VIP (vasoactive intestinal polypeptide) nasal spray which really has a very profound effect on down regulating many of the inflammatory related genes.

*Looking at the gut can also be very important such as choosing an anti-inflammatory diet. As Dr. Nicola said, not taking in foods which are going to be accentuating or worsening the inflammation process is very, very important. Looking for food sensitivity. So, many people get food sensitivities when they’re dealing with these syndromes and one of the reasons is that leaky gut is so common. You may like to look back to our webinar that we did with Dr. Rahbar earlier this year where we talked about leaky gut and SIBO in the context of mold illness. Making sure you have a good source of filtered water or spring water. That’s another really important thing. Treating microbes such as parasites in the gut, making sure you don’t have small intestinal bacterial overgrowth (SIBO) and just looking at bacterial imbalances in the gut. I guess that’s going to be particularly important if you’ve had antibiotic therapy at some point which is really is going to have an effect on your gut flora and mean there’s going to be a big need for re-balancing it. Okay, so that was a huge download there in a couple of minutes. Anything you’d like to add to all that, Dr. Nicola?

**Dr. Nicola:** Well, I mean, I agree with all of it. I think with the inflammation, the low dose naltrexone is actually something I’ve had really good results with. I really am a big fan of LDN. Sadly it doesn’t work great for everybody but the side effect profile I think is quite low, some people just don’t seem to have a positive response but what I like is it’s an immune modulator but it also can help with pain, energy, mood, and sleep which are really four of the big things that our folks deal with. For inflammation I lean first towards the herbs like the white willow, boswellia. I use a lot of frankincense essential oil for inflammation which I really like.

Sort of secondarily I use proteolytic enzymes. I think we’re on the same page Sandeep, today saying that inflammation and detoxification are two things that are essential to Lyme and mold. They’re the things that are in common: reducing inflammation, helping detox, and binding.

**Dr. Sandeep:** Great, thank you so much. We’ll add one website that people may like to look up which is LDNResearchTrust.org if you want to look into low dose naltrexone a little bit more. So, jumping along here and talking a little bit more about supporting detox and elimination and would you like to maybe talk about this one, Dr. Nicola? And some of the things you recommend?
0:33:20 - Supporting detox & elimination

**Dr. Nicola:** Detox is looking at liver support, phase one and phase two. And then, elimination is the other half of detox. So, you can detox all day long but if toxins aren’t getting out of the body then that’s a problem. So, we have to make sure the bowels are working, the kidneys working. That our sweating is good with sauna and things of that nature. We want to help the liver. I’m a huge fan of glutathione, the antioxidants are good for phase one so ACEs, selenium, zinc. Then, I feel for phase two some of the herbs are great like dandelion, milk thistle, things of that nature, artichoke. Liposomal glutathione is really a core of many of my protocols. The one thing people can do at home that makes the most difference in my view is coffee enemas. I’ve said to lots of patients now. I’m sorry but everyone says coffee enemas help and they’re like, “Oh, really? Oh, okay.” And then they come back and they go, “Oh, you were right. Coffee enemas definitely help.”

I have found that the ionic cleanse foot bath has been superb for detox. Because it not only pulls the positively charged toxins but it also pulls some of negatively charged. So, ammonium, mycotoxins, glyphosate which is a massive problem in our society I feel. So, anything like that. Skin brushing. Any Epsom salts baths. Things like that that people can do really simply at home for not a lot of money are really big detox helpers. Then, you’ve got to get the bowels moving. If the bowels aren’t moving it’s all over. So, vitamin C and magnesium are two of the sort of natural ways to do that. Ground flax seed. Psyllium husk is a little bit more irritating but use it if need be. Just anything whatever it takes fiber wise, vegetables, things like that to get the bowels moving. Vitamin C and magnesium, bulking agents, you’ve got to get that elimination otherwise it’s only half the equation.

**Dr. Sandeep:** Thank you for that. I would second that the information on the coffee enema. And most people when I mention it they think, “You’re going to do what with coffee?”

It’s such a bizarre sounding thing at first pass. What I suggest is do a bit more reading on it. Particularly look at what Ralph Moss PhD has written about it and he’s done quite a lot of specific research on it. For instance it was found to significantly increase bile flow and it’s been found to increase an enzyme called glutathione S-transferase by 500%. So, it really does have a science behind it. It actually seems to work as a natural dialysis for the liver and it greatly increases the amount of fat soluble waste that are able to be detoxified. So, please do a bit of research on that. There’s also a lot of YouTube videos about it. So, check it all out and try to understand the science a little bit more and consider giving it a go.

**Dr. Nicola:** I agree. And I think there’s a detox element. There’s also a lot of people now who are talking about parasites and helminths and you know coffee enemas are a way to clear some of the mess that can be overgrown in the bowel. So, I think there’s so many different benefits. And I’m actually going to look up that resource. I have found Dr. Wilson has a very good article about it so that’s where I send people too. Just Google “Dr. Wilson coffee enemas”.

**Dr. Sandeep:** Yeah, Lawrence Wilson. I think the site is [drlwilson.com](http://drlwilson.com).

0:37:46 - Diet and Nutrition

**Dr. Sandeep:** Okay, so jumping into diet a little bit more. I think we’re not going to go into a huge amount of specifics here other than to mention that there’s a whole bunch of diets around but there are some real basics. If you feel overwhelmed by all the different dietary options sometimes the best thing is just take it back to first principles again. The first principle is you want an anti-inflammatory diet. Some of the key things that are
going to cause inflammation in your diet are processed foods of any kind.

Secondly, gluten of any kind but particularly wheat products. Really if there’s one simple thing you can do is to try and simply exclude as much as possible wheat and gluten products and artificial additives as Dr. Nicola said. That’s a really good place to start. It’s important to realize you don’t have to perfect and it’s what you do the majority of the time that makes the difference. The reason I say this is that I don’t want you guys to feel too overwhelmed about diet and just leave it. Rather if you can make some simple steps to improve your diet and keep improving, all of a sudden you’ll realize that you’ve made a huge difference that you probably didn’t even think you could with your diet. So, as far as possible with regard to your animal products and actually all foods, if you can get organic foods as much as possible. Now, yes they are a bit more expensive but if you go farmers markets for instance often you can find organic foods that are at the same price as conventional produce.

Also if you Google the dirty dozen you’ll find the 12 foods that are the most sprayed by pesticides, so they’re the foods that are the most important to have organic. Then, there’s also the clean fifteen, these are least sprayed and the foods that you can continue to get from the conventional store to start with. Just focus on making sure you get the dirty dozen organic. That can be a really good way of just transitioning over to more organic foods in the diet. It’s a simple thing. The other thing that’s really important is to limit corn and soy and canola oil, which I’m hoping that you’re not having anyway. But they’re going to be the foods that are almost always genetically modified. So, it’s really important with those foods to make sure that you’re always getting organic.

Almost all studies have found that getting a high amount of vegetables tends to help with inflammation and tends to help with longevity. That’s partly related to the phytonutrients which are in vegetables particularly such as resveratrol and lycopene and a whole other range of amazing plant based nutrients that really feed the genes of your body. Number four is low sugar or a diet that’s generally low in refined carbs is generally going to be the way to go. There’s a whole bunch of reasons for this but without going into too much depth.

One simple way of putting this is that everyone in the population is somewhere on the road to diabetes. It’s not that some people have diabetes and some people don’t, rather it’s a spectrum. We call that the spectrum of insulin resistance. And if your suffering from any of these kind of stealth infection or inflammatory illnesses you’re gonna be more likely to move along the spectrum towards the diabetes end. It’s also the end where you’re much more likely to get obesity and fatty liver and polycystic ovarian syndrome and high blood pressure and a whole bunch of other conditions.

Now the very simple way of reducing your risk and coming back down to the other end of the spectrum is taking as much processed and refined sugar out as you possible can. And that includes refined carbohydrates as well. So, that’s my little spiel on sugar. And I think that’s another really simple thing that people can do. If you’re used to having a teaspoon of sugar in your cup of tea try simply switching it over to xylitol. If you can get all stevia. I’m not saying that necessarily those foods are the absolute ideal but that’s a simple way in which you can switch over in the first instance and then later on you may even not feel a need for it so much. And then, the last thing is in general try to lower in omega 6 fatty acids and high in omega 6’s and omega 9’s if you don’t know what I’m taking about put google into some good use and please punch it in there and find out exactly what I mean by this.

But these are different types of fats that are found in food. And generally omega-6’s are found in vegetable oils and in nuts particularly and basically processed foods in general are gonna be much much higher in
omega-6’s. While omega-3’s is particularly found in fish and chia seeds, flax seeds, walnuts, and also wild game, wild meats particularly apparently is where you find omega-3’s. And then, omega-9’s are particularly found in things like olive oil and avocados and other foods like that. So, really emphasizing those healthy fats and really what we’re saying and most of you probably know this by now is that fat in and of itself is not bad it’s actually very very healthy but it’s more a matter of making sure you’re getting the healthy form of fats. So, that’s my little spiel on some of the basics. I don’t know if you’d like to maybe jump into a little bit about specific diets, Nicola? Maybe just quickly?

Dr. Nicola: Yeah. So, people say, “Okay, what should I do with my diet?” And I’m like, “Okay. So, step one no gluten. Step two no sugars. Step three no dairy. Like in that order priority.” So, I mean that takes some learning and adjustment but that’s how I prioritize things. The other things I know about sugar are firstly it’s an immune suppressant. So, one teaspoon of sugar can suppress your immune system for up to 16 hours. So, that’s a big deal. We need our immune system to fight for us especially for those of you dealing with chronic infections and micro toxin illness and things like that. You want to optimize your immune functions so sugar can really just kind of knock that down. The other thing sugar promotes is candida overgrowth because yeast feeds on sugar. So, fruit sugar for those that don’t have a significant candida issue fruit sugar is sort of a natural sugar so fruit has vitamins and minerals in fruit there’s fiber the sugar is more slow to absorb so it’s not as problematic as sort of white refined sugar.

That’s my mentality on sugar - it doesn’t do the immune system any favors. I second that, like inflammatory foods, it’s a massive source of inflammation in the body and we don’t want inflammation in the body. We’re trying to reduce inflammation on the body so use your food eat the anti-inflammatory fats which in my view are the omega-3s your flax oil your fish, fish oil, things like that, supplement if you need to. Have lots of the healthy fats like olives and olive oil and avocados, coconut oil is actually a really good one for a number of different reasons that we don’t have time to get into right now. But yeah, just really work on getting the gluten out and reducing the sugar. And I promise when you stop eating sugar your body will stop wanting sugar. You may feel like that’s impossible it may seem like that’s not gonna happen for me anytime soon.” But I promise it will happen.

Dr. Sandeep: Great. We’ll probably skip over this but there’s a bunch of Lyme and mold diets you can look into, particularly Dr. Nicola has the book called the Lyme diet which I recommend checking out. The standard, I guess, is a paleo or autoimmune paleo or bulletproof style diet. It’s worth knowing about the Know the cause diet which specifically focuses on eliminating mycotoxins, the ketogenic diet specifically focuses on going for a high fat content and a very low carbohydrate content in the diet. It’s very useful for lowering insulin resistance. Then, there’s the raw food diet which really aims on massively increasing phytonutrients in the system. It’s a very cleansing diet that can be very beneficial at certain stages of your health journey. It may not always be useful for long term. So, these are definitely good to look at.

0:46:51 - Sleep, lifestyle and exercise

Dr. Sandeep: We already talked about this to a fair degree but maybe just some very quick brush strokes around sleep, exercise, and lifestyle. As we said just realizing that life style plays a very important part in your recovery from Lyme or mold related illnesses is probably the underlying point here. And really just taking it back to the idea that this all about you and your life. It’s not just about the microbe or the illness and that’s really that’s the bedrock of the holistic approach to these illnesses. Therefore, doing some gentle exercise within your limits and realizing that many people who are suffering from these chronic inflammatory illnesses
will have a point that you can hit with exercise, and for some people that point is any exercise.

There’ll often be a point that you will hit where you may start to crash. That’s what we call hitting your anaerobic threshold where your cells are no longer able to use oxygen properly. There’s a bunch of scientific reasons for that but what we’re talking about, generally speaking, is more gentle exercises. You may like to try yoga, rebounding, walking, Pilates, cycling, swimming et cetera. Sometimes those who are into very extreme forms of exercise like Thai boxing or kickboxing and so on, may find they have to tone it down a bit. That comes under the general theme of toning things down in life in general.

The universe likes to give us these messages in many different ways and one of the ways in which it does it is in the form of illness. That’s a really important way to think about it, it’s not just an inconvenience or it’s not just a microbe which has come in and ruined our life. This is actually about us and our interaction with the universe, or the divine, or God or whatever term you like to use. I’m really a big fan of trying to think of it that way and take the whole holistic approach and really using the thought that “this is a chance for a whole life revamp”. That’s what most people have to go through in recovering from these illnesses.

Stress reduction and management’s really important. I recommend yoga, meditation, mindfulness. If you’re interested there’s certain things called flotation tanks where you can float in an antigravity situation in water and magnesium. That’s a very profound experience. You may care to check out my recent blog article at LotusHolisticMedicine.com.au. Then just really making sure you’re getting good quality and quantity sleep. I would say, I don’t know what you think Dr. Nicola, but that would be one of the most underestimated factors in recovery in my view.

One of the keys things is just going to bed early in my view. Making sure you’re not using electronic devices late at night in general. You might like to look into getting some blue blocking glasses, supplementing with melatonin, magnesium, sometimes magnesium threonate can be more useful for people. I can’t say I’ve had a huge amount of luck with it but some practitioners have. But various forms of magnesium can be helpful. Then there’s herbs such as valerian, passion flower, and hops, and other things like that which can also be helpful for relaxing.

0:50:37 – Psycho-emotional aspects and tools

Dr. Sandeep: Psycho-emotional aspects, would you like to touch in on this one, Nicola?

Dr. Nicola: I think it’s big. We talked about it a little bit before that by no means are we saying that these illnesses are all in your head and they’re just you hanging onto this baggage and depression anxiety. That’s not what we’re saying at all. But we do encourage patients to certainly look at this as, “What could be getting in the way? What is there that could either be stressing, taxing the adrenals? Or just kind of stuck?” We all have our worrying we have our neuro patterning. If our neural pathways are stuck in trauma or stuck in negative thoughts or stuck in things from the past.

It influences our whole brain wiring and everything starts in the brain. That’s how, especially our limbic system, which is this seed of emotions that can also influence physiological functions in the body. Just looking at those psycho-emotional aspects is really important. Step one is just stress reduction because that not only balances the brain’s frequencies and patterns but also helps the adrenals which get so trampled on in chronic illness. The limbic retraining I have seen to be quite profound like the DNRS and similar things.
I’m a big fan of energy psychology. I love EFT, which is emotional freedom technique, tapping technique. It’s something that you can learn at home for absolutely nothing. There’s all kinds of tutorials online. It’s such a good tool that can be practiced within a couple of minutes to diffuse anxiety, or to diffuse pain cycles, or to diffuse negative thinking or hopelessness. I feel like mindset is so important.

I feel like part of it is clearing the emotional traumas and the things that keep us stuck. The other part is being able to embrace a positive outlook because nobody wants you to pretend everything’s okay when it’s not. I will also say that a positive outlook and that outlook of, “I’m going to be healed and I’m going to recover and I’m going to stay positive about that,” I’ve seen it make a huge difference in my patient’s outcomes.

Dr. Sandeep: Thank you. Yeah, I agree that emotional aspects to the journey are very big. We have done previous webinars on this and I recommend checking out the previous webinar with Dr. Samantha Clark if you haven’t heard that already, where we really go into that.

We’ll skip over relationship aspects, but it’s also really important to realize that these illnesses can have an important effect on your relationships. There can be certain tips that can help you to get through this, but that might be a topic for a future webinar.

Dr. Nicola: I feel like that’s a whole webinar into itself.

0:53:32 – Mold Illness Made Simple course

Dr. Sandeep: Most who have been listening to these webinars already will be quite familiar, but there’s a course called “Mold Illness Made Simple,” which I have developed. It’s an eight week, online course that’s on demand. You can do it at any time. There’s 18 video lectures and slides which come with that, that you can listen to, watch, and download to get a really thorough explanation of how mold illness works and what the path to recovery is.

It’s not a course for everyone. I think you need to really be committed to doing at least a few hours a week for at eight weeks and devoting somewhere around 16 to 20 hours of work to getting through this course. However, if you do devote that time, I can guarantee from the feedback I’ve had so far, that you will feel a lot more clear and that your level of overwhelm will go down significantly. I believe from my experience in this illness so far, in treating this illness, that those two factors are very important in getting to recovery. Because when you’re feeling confused and you’re feeling overwhelmed, you’re in fight or flight response. You’re working in the limbic system and that’s part of the illness.

A really big part of recovering is getting to the stage where you feel that you have a good grasp on what’s going on and what you need to do to recover. That’s what the course offers. The people who have spent the time to go through the course and complete it have said that it’s been extremely useful. I believe that for the majority of people, it will be. I really do have a heart for people suffering from this illness because it can be very devastating. It can put you in a place in your life where you feel extremely stuck. I want to see people getting through this illness, moving forward, and becoming beacons of life for other people who are also starting to suffer from this illness. It’s really getting to the stages of almost being an epidemic. Where I’m coming from is really wanting people to move through overwhelm and get to a place of clarity. I’d like to hand over to Dr. Nicola to talk a little bit about her course, which is called “Lyme-Ed.”
0:56:40 - Lyme-Ed course

Dr. Nicola: I created “Lyme-Ed” because I feel like as much as I love my patient interactions and one on one contact with people, there’s a lot of people out there that are looking for information. I wanted to present a really integrative kind of approach. “Lyme Ed” is really every single thing I know about Lyme disease is in a course. It’s 25 hours with 10 different modules. I first created a patient version of “Lyme Ed,” which it covers everything from signs and symptoms, how to test, what other tests to run, antibiotic protocols, herbal protocols, ten things that can hamper recovery, emotional strategies for recovery. There’s a whole module on digestive issues and Lyme. A whole module on hormonal imbalance and Lyme. It’s really as comprehensive as I could possibly make it.

There is a practitioner version as well because I think that’s one of the things that’s so crucial, is to get more practitioners trained and familiar with Lyme and chronic Lyme and what that entails. The practitioner version offers more ongoing support and training for practitioners. Essentially my heart is for my Lyme folks. I love my patients and just wanted to get my knowledge and experience out to a broader base and so, that’s where “Lyme Ed” was birthed. I just made it as comprehensive as I could. One of the things, without being braggish, is I’m able to break things down into manageable chunks. I’m able to make information relatable to people. Even though it is very content dense, it’s all broken down by module. It’s all broken down by lesson. It’s lifetime access and so it’s all there and available on an ongoing basis.

Dr. Sandeep: I do highly recommend Dr. Nicola’s course for those who are trying to understand Lyme-like illnesses and really getting good versing on what’s going on. For the next 48 hours if you use this coupon on either course, so the coupon will work with either, and we’ll have the link below the YouTube page here, so you can click on that and get a significant discount. The “Mold Illness Made Simple” course just had the one price of $199 and that’s discounted to $159.20. And Dr. Nicola’s course there’s the patient version or the practitioner version. And so, the patient version is discounted from $197 to $157.60 and the practitioner course from $397 to $317.60.
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QUESTIONS AND ANSWERS

1:00:20 - Order of treatment, Lyme or mold first?

Dr. Sandeep: Let’s jump in before we take any from the audience, would you like to talk a little bit, and we started with this at the start, Dr. Nicola, about what would you say is the best order of treatment if someone appears to be suffering. Let’s say they’re living in a water-damaged building and they’ve also had a tick bite and tested positive for their condition with Igenex for instance. Which of the two conditions would you suggest they start addressing first? Or do you feel that it’s really just a matter or working out for them which is a bigger priority?

Dr. Nicola: Yeah. I slightly do. To just put it in context, and I don’t know if you feel the same way, when people come to me they come to me for Lyme treatment. So, they’re coming for Lyme treatment and then we’re evaluating other things along the way. But I feel like what’s important, and this is really what I hope people take home from our webinar today, is to look at what is in common with those two things. Looking at the inflammatory cascade. Looking at detoxification. Looking at what to do with nutrition and lifestyle. There are things that are consistent between mold illness, or Lyme infection, or heavy metal toxicity, or oral infections. I think one of the most important things is to look at the common ground first. And say, “What can we do to help move things?” Well, we can reduce inflammation. We can use binders to bring down the toxin load. I’m a little bit more skewed to Lyme treatment because that’s what I do. I think in some ways the
practicality of it is that does influence how we treat people. They come to us for this, this is our expertise, this is what we provide, as we’re looking at different things that can be stresses for them. I think bottom line is look for the common ground. Look for the things that are going to help both.

1:02:13 - Home remediated and okay mold levels but still reacting

Dr. Sandeep: Okay, great. “If your home has been remediated and air mold and swab testing has been done and shows low level of mold and bacteria, but I still have a reaction from only five minutes in the home that will last for hours or days. What would we suggest is the next approach?”

My response to that one is that really it’s your response that’s most important, not the testing. If you’re finding that you’re having a reaction, then that in a sense is the most important thing because that is a clinical response. Ultimately testing is only a guide. Air testing and swab testing are have significant limitations to them. Actually, all testing has some limitations to it. But most likely I’d recommend, in that situation, to look at doing ERMI testing.

Also having the basic work up done for chronic inflammatory response syndrome, which includes visual contrast testing, and the symptom cluster analysis, and possibly the HLA gene testing as a first point of call.

I don’t know where this person lives, but I would recommend starting there. And if you’re finding that there are some significant species on the ERMI and you’ve got positive tests for CIRS, then you need to go further with further investigation with an IEP or Indoor Environmental Professional, to look at what possible water damage may be present in your house. So, certainly I would not take the air and swab testing as being full reassurance that your house is fine.

1:04:22 - MCAS worsening many treatments

Dr. Sandeep: Second question we have is, “Can you talk more about mast cell activation syndrome. Because I’ve spent thousands of dollars on treatment for CIRS and Lyme and have gotten nowhere, and then diagnosed with MCAS. A lot of this info make MCAS worse.” So, really just some basics on MCAS. Is there anything you’d like to share about, Dr. Nicola?

Dr. Nicola: I think again, diet can play a role with a low histamine diet and there’s some other supplements in terms of vitamin C, and quercetin, and some mast cell stabilizers, and then some medications that can make a difference. But. If that seems to be a dominant issue for someone, then that needs to be addressed first because then we can see even these histamine responses to herbs and things like that. One comment I would make is I’ve seen NAET (Nambudripad’s Allergy Elimination Technique) work quite well for reducing that overall histamine reaction and sensitivity.

Dr. Sandeep: Great. I do recommend people also listen to the previous webinar with Dr. Jill Carnahan. You can get onto all of these webinars by subscribing to my YouTube channel.

1:05:46 - Will the immune system address Lyme and co-infections when mold illness is resolved?

Dr. Sandeep: Okay, number three. “Can one expect the immune system to address Lyme of co-infections
when mold is resolved?” Do you have any thoughts or experience around that particular question?

**Dr. Nicola:** Yes. I feel like if the mold issue is resolved and one is out of an environment where there’s further mycotoxin exposure and that seems to be a done deal, then we can ask the immune system to work better. I always feel that realistically, if somebody has chronic infections like Lyme, [inaudible 01:06:26], and all of those common infections, that it’s to be of a task for the immune system to clean it up all by itself in the beginning. One still has to do anti-microbial therapy to get the load down. Whether that’s ozone, whether that’s antibiotics, whether it’s herbs, because illness feel like we have to bring the microbial load down in order for the immune system to be in a place where it can be like, “Okay. Now I got it.”

But I feel like taking one of the factors like mold away, it definitely helps free up some space on the hard drive, if you will. But in Lyme illness I still feel like anti-microbial therapy is important to get the pathogen load down, so that then the immune system can regulate in the long term. I feel that just dealing with mold if Lyme is there, is not enough. I feel like the Lyme still needs to be treated specifically.

1:07:20 – Does MARCoNS colonize in the lungs?

**Dr. Sandeep:** Great, thank you. Next question is, “Is it possible to have MARCoNS in the lungs?”

I can answer that one. So far MARCoNS have been identified in the nasal passages, in the throat, in the teeth, and in vaginal swabs. So far, it has not been reported in the lungs. However, if you have that suspicion, there is no reason you cannot send some sputum to Microbiology DX and have it cultured. If you do find it, please let me know by emailing us at info@MoldIllnessMadeSimple.com because I’d really be very interested in that and I would want to write that up as a case.

1:08:00 – Can you use coffee enemas with MCAS?

**Dr. Nicola:** “Are coffee enemas okay if you mast cell activation syndrome?” Do we know?

**Dr. Nicola:** I have a couple of patients who had mast cell activation syndrome who do coffee enemas and still get benefit. I’m not saying that’s going to be true for everybody. I haven’t had enough experience with those two things together to be able to say conclusively. But I have had a couple of patients that I know of who’ve had that and still did well with coffee enemas.

1:08:36 – How long does it take to get relief from mold illness?

**Dr. Sandeep:** Great. Yeah, that’s my impression too. “How long does it take to see relief from mold exposure after integrating the steps to get better?” I can take that one quickly. Look, the answer is that there is no particular exact time course. It really does just depend on how many blocking factors you have. There’s a whole bunch of factors actually, but if you’re only problem is mold exposure and you’re not a very severe case, I would say that it should happen fairly quickly if you totally get out of mold exposure. If you do not find that you have great relief, that’s where you need to start looking for other factors. And certainly then, going to toxin binders such as cholestyramine, looking at MARCoNS and then looking for other causes of your illness is going to be very important if you’re not finding the resolution that you expected.
1:09:37 - Ozone therapy in treating Lyme

**Dr. Sandeep:** Next question “How useful is ozone therapy in Lyme and Lyme-like illness?”

**Dr. Nicola:** I’m actually a huge fan of ozone. I like oxygen therapies overall. I like hyperbaric oxygen. Illness like ozone therapy. It cause pretty big herxers, they’re a distinct possibility, and we often start with only 1-3 passes to see how people respond, so sensitive people need to go slow in the beginning. Depending on the type of ozone therapy being done there is few factors that we check first. We look at ferritin, we look at G6PD, which is an enzyme that’s required in the body. So, there’s some precautionary things to look at first, but overall I feel like ozone is a positive thing. Even with Babesia, which there’s an argument that it likes oxygen, so would we do ozone? Would we do hyperbaric oxygen?

I feel like those therapies can be helpful, so long as the Babesia has been treated and we’ve knocked it down. Ozone can be still a very healing modality overall.

1:11:00 - Most reliable Lyme test

**Dr. Sandeep:** Okay, and maybe our final question here because there’s a fair bit of talking around this, “What is the most reliable Lyme test when one has HLA-DR haplotypes? I found a study that shows that some forms of HLA-DR haplotypes do not allow for the ability to make antibodies to Borrelia.”

**Dr. Nicola:** Well, this is the million dollar question, isn’t it? With testing for Borrelia and related co-infections, I like to do a couple of different things now. I’ve always been a fan of Igenex, I love their Western Blot, understanding that a lot of Lyme patients are immune-suppressed and the antibody response isn’t going to be sufficient to trigger a positive result. So, testing always has to be correlated with clinical presentation and history. I have now been using a combination of the IgeneX basic Lyme panel, which is an IFA and the western blot. They’re all antibody responses. Then I combine that with a DNA connexions Lyme panel, which is a PCR urine panel that covers Borrelia and co-infections.

I feel like those two things together cover some of those bases. That if one is immune-suppressed you’ve got the second chance for a PCR. The DNA Connexions must be provoked, either with exercise or deep tissue massage or something like that just to get the metabolism working, which I wasn’t really sure about in the beginning, but now I’ve seen what happens when people do provoke it and when people don’t provoke it. So, I can vouch that that is an important step. That’s what I do. Even with those two things, you put it together with clinical presentation and history. Sometimes I treat and then response to treatment is part of my diagnostic workup as well.

**Dr. Sandeep:** Yeah, that’s right. I think part of it is just that clinical experience side and the assessment. Still, I think what I learned from teaching is that ultimately Lyme disease and other tick borne illnesses are still a clinical diagnosis. I still would go back to that rather than the idea that there’s a perfect test. Really having a good clinician often will be one of the best ways in which you can identify the problem. And sometimes the response to therapy. For instance, the person that asked about how quickly will I get relief from getting away from mold exposure. Well, some of those things are what can actually give a clinical a clue to whether you still have a Lyme-like infection there, for instance is if you don’t have a complete response to therapy for mold illness, that can be a very strong pointer to the fact that there is some kind of stealth infection. We find that quite commonly. And I guess you, from the other side of the table...
Dr. Nicola: ...exactly the opposite.

Dr. Sandeep: You’re treating Lyme and finding you’re not getting a response with that in some way’s going to be as useful as any test for mold or...

Dr. Nicola: Put it in reverse, absolutely. Like if my client focused on getting better with all the best treatment I can give them, then I’m like, “Okay, what else is going on here? What’s getting in the way?” And mold is number one things that I look at now. The other thing I do is a co-infection provocation. I start a herb for Borrelia, then for herb for Babesia a herb for Bartonella. It’s not a perfect science. There’s no one herb in nature that’s absolutely specific for one bacteria. But over the years that’s a process I’ve developed. And I teach that in the Lyme-Ed course, actually, of trying to nut out the co-infection piece. Is Lyme present? What co-infection is dominant? What’s playing what role? What’s contributing to what symptoms? I have found that be equally good to a lab test in terms of assessing Lyme and co-infections.

Dr. Sandeep: Great. That’s right. Sometimes the challenge can be another really useful way to do it. The other thing I’ll mention is the EliSpot testing. Particularly with ArminLabs in Germany. Which is actually not specifically testing antibodies, but rather it’s checking for the T-Cell response. In some cases, that can be a particularly useful test. They also test for co-infections, particularly micro-plasma, chlamydia, and also I’ll just throw viruses into the equation as well. And particularly looking for things like chronic Epstein-barr virus, chronic CMV.

1:16:00 – Closing and links

Dr. Sandeep: Really this has been a really interesting discussion today and I think there’s just so much interesting research on this field of Lyme and mold that’s coming out. However I really would like to emphasize just this idea of the holistic approach. Taking a holistic approach to these illnesses often will give you the best long term solution.

Dr. Sandeep: I want to do a quick plug for a training that we have coming up in San Diego as part of the Functional Diagnostic Nutrition (FDN) training for health practitioners. And that is going to be on the 26th and 27th of August 2018. (TICKETS) I’d like to invite you guys to join the Facebook group Mold Illness Made Simple, where we will post the information about that two day course. Also, please sign up to our newsletter because we do have regular offers and regular notifications of upcoming webinars. Is there anything you would like to mention in closing, Nicola? If people want to keep in touch with you and your work?

Dr. Nicola: Yeah, if people want to go to RestorMedicine.com, that’s my practice website. Sign up for my newsletter and you’ll get our notifications of webinars and blog posts and things like that that come out.

Dr. Nicola: Oh, you’re so very welcome. Thank you. That’s so great to be with you today.

Dr. Sandeep: Great. And also a big thank you Caleb Rudd for content and technical support. We certainly could not do these webinars without him. So, everyone enjoy the rest of your day and I really, really hope you’ve got some beneficial information out of this webinar today and I hope you stay tuned for further
webinars with us at Mold Illness Made Simple. Thank you so much.

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