Transcript of “James Baber: Toxic Mold: The Hidden Dangers - #198”

Bulletproof Radio podcast #198
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Dave: Hey, everyone. It's Dave Asprey with Bulletproof Radio. Today's cool fact of the day is that I just received a new shipment of some certain samples. I can't tell you what they are, but I'm amazed that they made it through, because they look suspicious. It's me testing out the new supplements and whatever's going to happen. That's not really that cool of a fact of the day. It's just cool that they arrived five seconds before we started the podcast.

Today's cool fact of the day is that mold will eat almost anything. It'll eat wood, fabrics, plastic, concrete, and there's even mold that will eat metal. Of course, not all those are toxic molds. Some of them are. Some of them aren't. It's annoying if mold eats your bumper, which isn't that likely, either. Bread specifically, usually within three days, 72 hours, starts to grow mold. Actually, it grows a little bit before that, but you don't really see it.

Mold won't eat something like a McDonald's Happy Meal, including that bun. That's because there's a long laundry list of ingredients, but one of them is a preservative called calcium propionate, which is what keeps it looking super fresh. There are some other things that don't sound so good, like calcium peroxide. That's actually not that big of a deal. Calcium, we're okay. Peroxide, it's like hydrogen peroxide. Your immune system uses that. It's not going to hurt you in normal amounts. It also has things like azodicarbonamide, which probably isn't a great idea for you to be eating on a regular basis, or at all, if you can avoid it. That's cool. Mold eats everything, but not Happy Meals. Actually, that might be a good rule for you.

Today's guest is James Baber. James is an unusual kind of guest because he's not a rock star or a health researcher. He's a really successful executive who's spent about almost 20 years doing technology product management. He's worked for 20 of the Fortune 500 as a consultant, and he's directed almost a quarter-billion dollars in software and hardware products. What makes him interesting, aside from the fact
that he's just generally a cool guy, is that he's also a toxic mold exposure survivor. He was exposed about there years ago, and he is one of the people who came onto my new documentary Moldy talking about his experience.

The reason that I've invited James on the show today, and the reason that I made the whole documentary, is that there are tons of people like this, and there are tons of people like this to some degree who don't have any idea about it. In fact, it's a problem affecting, I'm guessing, 100 million people genetically in the U.S., just based on statistics. We have experts in the movie talking about how 50 to 70 percent of homes have water damage that can lead to these problems. This is a hidden source of kryptonite that no one knows about. Our guest today, James, has basically been knocked over by this kryptonite, but he picked himself back up, the same way I did. It's really cool to hear the story. James, welcome to the show.

James: Thank you very much.

Dave: It's good to chat again since we first were filming a few months ago for Moldy. It's come a long way. I can't wait to give you one of the very first cuts without all the final edits and all that just to let you see how you look, because it's not easy for someone who's a successful business executive type to stand up and be like, "This strange thing happened to me." What was your experience with mold, and why are you comfortable telling people about it? It's almost like, if you have herpes, you don't talk about it, but if your house has mold, do you talk about that? You're out of the closet, man. Tell me your story.

James: I am indeed out of the mold closet. That's a good thing. My story goes, I spent a long career doing consulting, doing a lot of product management, and so forth. There's probably not a person in the United States who hasn't worked on a product that I have built, or built the software for, or sourced, or something like that. If you've ever been to an IKEA or a CVS to get a prescription, and so forth, it's a product that I actually developed.
In the last four years, five years, something like that, a couple things happened to me. One was I had elected to do a shoulder surgery. I broke my collarbone in 2000 snowboarding, and I thought, "You know what? I'm still pretty young. I've got a little bit of money saved aside. I'm just going to have my collarbone repaired." Famous last words.

Five surgeries later, an E. coli infection from the hospital, and a number of other things, and I wound up with just a number of symptoms that I couldn't quite put my finger on, to the point where ... I was living out what I thought was my life's dream. I finally got an apartment on 5th Avenue, Central Park views, very expensive, very nice, everything that I wanted, brand-new place. About three months after living there, I was diagnosed with chronic fatigue. I could not get out of bed for more than ... It was about two hours a day, was about all I could do. As you can imagine, I had just struck out on my own. I was growing my own consulting practice, and I was hiding behind the fact that I wasn't awake most of the business day. I wasn't awake most of the time.

Rewind a little bit to that surgery, one of the five surgeries that I had as a continued attempt to fix an initial mistake. I had two situations occur at the same time, just to confound everything. I had the shoulder surgery done. I got the E. coli infection in the third surgery. About seven days prior to that surgery, I was living in a place ... I had a temporary place in Philadelphia. It was an extreme rainstorm. The roof flooded. It was one of those flat roofs that retain water at the top. It poured into my bathroom.

Within about three days, there was so much mold that the paint was peeling off the walls, and you could see strips of just green mold everywhere. I called the landlord. I said, "This is obviously a problem." It smelled significantly of mold. He didn't do anything, didn't do anything, didn't do anything. Then I had to go into surgery. At that point, I said, "You know what? Hold off. I've got to go to surgery, so I don't want you in here sanding and cleaning and painting, and all good stuff."

I had the surgery. I came back. It's unsure as to whether I actually had E. coli. You know how statistics go and the testing samples. I had all these crazy symptoms. There was some evidence that maybe I had E. coli, but
nobody took into account, nobody that I went and talked to, any doctor, would believe anything about the mold that was growing in my bathroom. I stayed in that place for another ... They cleaned it up. I recovered very, very slowly. Then my health just went completely downhill from there. I would have bouts back and forth where I felt okay. I moved back to New York, and it was in an apartment, a brand-new, LEED Gold-certified apartment that I just-

Dave: Explain ...

James: What's that?

Dave: Explain LEED. For people who don't know what LEED is who are listening in their cars, just tell them what that is, because that's an amazing standard.

James: LEED is an amazing standard. I don't know all the details. I used to know more about it. One of the main things is they have to flush out a certain volume of cubic feet per air per second into the building to push out things like bio-aerosols, chemicals, and things like that. I'm sure there's a number of other, more green parts to it, if you have anything to add.

Dave: Basically, it's the highest standard for making a building that's environmentally correct, where it's a healthy building for people inside. It's targeted to make people who live there feel good, and it's targeted to save power and energy, and not waste anything, and to use nontoxic paint. Basically, pardon me for just saying this, but it's like a hippie building. Not made out of thatched huts and recycled stuff, but like a rich hippie building, do I say that? Sorry, David Gottfried. You were on the show talking about this. He's the father of LEED, basically. Anyway. It's a remarkable standard that says "high-quality building." That's basically what I'm trying to say.

James: The problem with this particular building is that in the way they built the HVAC system, they would draw external air, which is absolutely appropriate. They would force volumes of that air into the building at a specific time. However, I'm not sure if this building didn't follow the code properly, or the construction wasn't done well, but they did not
condition the air before putting it into the building. If it's a hot New York summer, and it's 95 degrees outside and it's 90 percent humidity, 95 degrees inside the hallways with 90 percent humidity, to the point where I could drag my hand along the wall, and I would have water on my fingers from the paint inside the hallway. This building was, at this time, three months old.

I'm skipping ahead a little bit. Needless to say, after starting to get this massive fatigue, pain, headaches, you name it, about 150 symptoms, I started looking for a doctor to see what exactly was going on. You can imagine this, I'm sure. Out of every doctor that I talked to, pretty much everyone said that I was absolutely insane. "You're wrong. Mold doesn't do anything. It's absolutely something else."

Dave: How many of them tried to give you Prozac or another antidepressant? It's a real question.

James: Three. Yeah.

Dave: I only had two.

James: I went to 10 doctors. The 11th actually said, he said straight up, he said, "First of all, James, you have no respiratory symptoms." I looked perfectly fine. I looked like a marathon runner. He said, "You look perfectly fine. Let's sit down for a second. I just need to tell you something." That's when he said basically, "This is completely in your head. I really think that you should accept this psych evaluation from me." That's where I stood after 10 doctors.

It wasn't shortly after that that I finally discovered Dr. Shoemaker. I actually read a little bit of what you had put together. I at that point didn't know that it was mold. I knew that there was something very wrong with my building. It was shortly thereafter that I started to realize this might be mold. I had an ERMI test, if you know ERMI?

Dave: I do. Do you want me to explain it, or do you want to explain it?

James: Go ahead.
By the way, if this stuff is fascinating to you, like, "Oh, there's kryptonite I don't know about," check out bulletproofexec.com/moldy. That's just the signup list, so I'll email you as soon as the movie's ready. We talk about ERMI, and we interview some of the experts who helped put it together. Environmental Relative Mold Index.

This is what I had done in the kitchen that made me sick most recently, where I had a leaking dishwasher for two years. In my case, we found 88 times more ... at that time, it was Penicillium, I believe, or Aspergillus. I'd have to look at my notes ... in the indoor air than you find outdoors. If you're finding more mold, or worse, more toxic mold like I did, indoors versus outdoors, then you cannot say, "Oh, it's just because there's moldy leaves outside." It's because there's a different species, and there's tons of it in the air you breathe in your house. When you find that, that's actual data, and it's hard to argue that, "Oh, there's nothing going on there," because you can show that. That's ERMI.

Correct. The test that I had done wasn't the typical simple cheap mold test from a generic source. This is defined by the EPA. It is extremely objective data. It's done by PCRs. They do DNA analysis. They can tell you exactly what mold species it is. I'm a pretty data-objective guy. I felt like this would be a pretty good test, so I had the test done. My ERMI score was a 13. I think that means something like only 10 or eight percent of other homes in the United States have more bad mold than mine. Brand-new building, 5th Avenue, Central Park, and I'm living in, in three months in a brand-new building, it is moldier than 92, 3, something percent of homes in America, that of the bad mold types.

After learning that, I was actually able to get in touch with Dr. Shoemaker. As you know, he's retired, doing research now, so I had to find a doctor who was willing to prescribe or to write a requisition for the blood labs that he specifically looks at ...

Just a quick side note for people listening. We have a podcast, one of the episodes ... I don't have the number memorized ... with Dr. Shoemaker, who was one of the keynote speakers at the Bulletproof Conference earlier this year. He's a physician who's the author of Surviving Mold. If
this is interesting, you might want to read that book. It's got all sorts of science.

Here's the problem. You have any autoimmune condition, you might want to look at what environmental exposure to mold does for every kind of autoimmunity. In fact, you have a problem with only some kinds of wheat and not others, ... like when you go to Europe, you can eat ... that also can be a mold sensitivity. It's different molds, different countries. It's remarkable how much this is a part of our life. It's invisible, so we ignore it, or, even worse, like the doctors we had both dealt with, you just think that it's because you're crazy. It's not. There's things in the environment that we can control that we can measure that affect our ability to think long before they make us as sick as James or I got.

Anyway. Sorry to go off on a tangent there, James, but that's who Dr. Shoemaker is. He's the pioneer in this field. His work is groundbreaking for a lot of conditions, like Lyme and mold. People don't know they have some neurotoxins just floating around in their house.

James: That took over about nine months of trying to determine what I had. I actually again just, being a guy who works in data and technology, I took an approach to look at exactly what my symptoms were. This was before I discovered Dr. Shoemaker. This was before I knew anything about mold. About three months into all of what was going on, I cleared out everything in the living room in the apartment, and I started printing out ... It's basically a differential diagnosis. You're proving what you might have by proving what you definitely don't have.

I started stapling on the wall things that showed what a blood lab produced or showed that I did not have. I was stapling on the wall things that my tests and symptoms and so forth showed that I might have. I was working on basically a differential diagnosis, putting on what I knew and what I didn't know, and what was right and what was wrong about the different blood labs that I had had done to date.

At the very end of it ... I still have the piece of paper printed out. At the very end of doing my own version of a differential diagnosis, I had a
sheet of paper that said something like pulmonary aspergillosis. I just looked at that piece of paper, and I felt like an idiot. I'm like, "There's no way this is anything to do with mold, because I specifically moved into a LEED building. I specifically moved into a brand-new building. This is not accurate." I think I actually ripped it up, put that aside, and I said, "That's BS."

I was not a believer in mold as a problem, either. It actually took a long time for me to come around and recognize that this actually is legitimately something that is a problem, and there's absolute objective evidence showing that it is an issue with people.

Dave: One of the physicians that I interviewed for the movie, Dr. Scott McMahon, I asked him, "How many physicians are actively treating mold toxin symptoms in the U.S. today?" He looked at me for a second, and he said, "All of them. They just don't know it." It's that big of an issue, where you hit an extreme, but if the levels were lower and you just had half your capacity, and you were like, "I'm tired. I'm sick a lot. I've gained 30 pounds, but I'm not quite disabled," you could do that for 20 years. At a certain point, are you grateful that you stuck with it, even though you got really sick, but it gave you the incentive to dig through it and figure out this was something that was limiting you in ways you probably didn't understand?

James: Absolutely. I consider myself extremely lucky. I'm lucky in the fact that I had the financial means to go through the umpteen thousand dollars' worth of tests and things that insurance wouldn't cover, and so forth, to actually uncover this. Absolutely. I hope to some degree that I can be an advocate for showing that people who say there's environmental problems or walk into a room and feel like they've been knocked over, they're not crazy. I don't think I'm crazy.

Not to be stereotypical, but I'm not the guy who has dreadlocks and dirty clothes and leaning over on the side of the street, complaining about something's bothering me. I've taken, again, a very objective stand to this. I firmly believe in it, and I believe it's the only reason that I'm standing up and still working today, is that I believed in it and worked at trying to make it better.
Dave: You're not just standing up and working. If memory serves, you also recently ran a half marathon, right?

James: Maybe four.

Dave: Nice.

James: Yeah. You know what? I think the interesting thing about that is I had not exercised for four years, because I felt so bad. One day, I woke up and ran 13.1 miles. That begs the question, are people having a problem with the amount of training they're doing, or something like that, or are they just living in an unhealthy environment?

Dave: It's always both. The whole model, the one from The Bulletproof Diet, just all of my learning about biohacking is that the things that take away performance matter enormously, and they're usually hard to see. The things that add performance matter enormously, but if you just took away all the stuff that's holding you back, you'd perform amazingly well, even if you didn't eat the perfect fuel and snort powdered grass-fed liver, or whatever the latest trend is. They both help. To focus only on the good stuff and ignore the bad stuff, it hasn't worked for me.

There's the old coal miners with the canary. Genetically, about one in three of us are canaries for specific types of neurotoxins that are made by Mother Nature. They're made by Mother Nature because we pissed her off. We influenced the toxicity of the species of relatively harmless soil fungi that became much more harmful as we used more aggressive farming techniques and certain chemicals and all. Now they're basically coming back to bite us.

One of the others reasons that I think this is worthy of everyone's consideration is, in that building where you were, I'm guessing there were a few other people who were probably not feeling so good.

James: Absolutely, yes.

Dave: Some of them probably had chronic fatigue or Lyme disease, or one of the other many things that are all commonly clustered around mold. Were there other people there who were just like, "I'm having bad
allergies this year," or "I'm just a little more tired"? Did you notice a clustering of things that weren't as severe as yours around there?

James: I did. At least at the time, that was confusing to me. I'm sure you've experienced this, as well. Everybody has a self-defense mechanism about things they don't understand. "It's the New York allergy season." It didn't matter if it was cold or hot. Everybody has a reason for the problems that they're experiencing. I would talk to other people in the building at the gym or something like that, just anywhere around the building. A lot of people complaining about various things, coughing and so forth, but everybody had a reason for why they had a specific problem.

This is what I do a lot in the work that I do, looking at big data and using statistics. If someone looked at that as a whole, they would say, "It's statistically significant that you have a problem, and you, and you, and you, and you, and you, and you," and everybody in the next building over having a great summer. There's got to be something there, absolutely.

Dave: This is one of the reasons, incidentally, that I'm such a fan of the Quantified Self movement and this whole wave of censors, because if we had heart rate variability during sleep for everyone in your building, ... which could happen if mattresses were so enabled. Mine is ... we would actually see that all of you had stress events during sleep. It would be such an obvious, bright, burning ember on any sort of data visualization software that we could say, "We don't know what it is. It could be that the wrong color moonbeam is shining on this building. We don't know, but we know that there is an unnatural clustering of stress. Let's find out what it is." That's where science comes from.

It seems like what's happened with so many of the people that I interviewed for the movie, and just people who have approached me because I'm pretty open about the fact that ... Not the only reason, but one of the reasons that I gained the weight I gained was that I grew up in a basement with toxic mold in it. I didn't know it at the time. No one did. When I look back at my genetics and I look back at the clustering of symptoms, there's only one thing that it points to. What are some of the
other symptoms, though, that you had that were ... You said 150 symptoms, but name the top 10 most obvious things that you found were tied to these neurotoxins and the inflammation that mold causes.

James: Sure. That's a great question. It is a very long list. It varies by whatever time of day it is or what ... In reality ...

Dave: By species.

James: ... it just depends on where I am.

Dave: Yeah, because of the species of the mold in your environment.

James: Yeah. Exactly. A side note. I was always known on our trips ... I have a group of buddies. Every year, we attempt to do something. We go skiing, or we go hiking. I was always known as the guy who, wherever we went, I would have just the most random medical problems. It became a joke. Every year, it's like, "Oh, I wonder what James is going to get this time." The reality was, especially going to ski lodges, where you take snowy boots in to carpeted areas, ... I know you need carpets for your ski boots so you don't fall. Absolutely terrible ... and condos up in the mountains. For as good as the air is up there and good as I feel when I'm not in those buildings, those have been, ski lodges and ski condos, have been some of the absolute worst places I've ever been. That's why I know, looking back, I wasn't just inventing this. Mold isn't something new in my life. I've obviously been encountering it for a long time.

Dave: It's remarkable that you mention that. My parents had this dream when they retired. They were going to go up to Alaska and live there for a couple years. I have no idea why that was their dream. It's cold in Alaska. By the way, Alaska's awesome. They went up there, and they rented this house. They both started falling over a lot, like way more vertigo ... dozens of times. My parents don't generally fall over that often. Then my mother was getting all these nosebleeds. Classic sign. If you start getting nosebleeds and you don't always have nosebleeds, you are in a moldy environment. It is so obvious. I grew up, 10 times a day, every day, it was just part of my life, because I slept next to paneling that had mold behind it. I was just a kid who got nosebleeds,
and was fat. Oops. Oh, and had asthma, and all these other things that are related.

In my parents' house, or in the rental they had, what had happened was the owners of the place who built it 20 years earlier ... It's dry in Alaska when you burn a fire. What do you do to make it better? You put a kettle on top, and you make steam so the air is moist. The walls are cold. The air is moist. Condensation inside the walls. I went up to visit them, and it took me two months to feel like myself again. Literally, it's like this giant wet blanket of anger comes over your head. It's your brain swelling up and leaking fluid. You would probably be the same there.

My parents were clearly addled. When they moved out, they eventually got better, but my dad actually had a heart attack after that. Yeah, I could point to the studies that look at increases in calcification that happen with response to environmental exposure to toxic mold. Is there a correlation there? I believe there is. Is there a causation? Probably. We got some studies that support the idea, but it's not absolutely proven.

Same thing. Skiing? I don't want to go skiing, because there's always condensation stuff, and there's always wet stuff in those condos. I basically stay in a nice hotel if I go there, where the problem doesn't exist, even though it's more expensive. Does that mean that we're wackos? No, it means that we know something. It also means that if you go skiing and you beat yourself up on the slopes all day having a great time, and then without being as sensitive as we are, you sleep in a moldy environment, and then you come back to work and you feel hungover, "I'm just tired. I'm just not doing as well. I got a cold."

Okay, you're fine a week later. You just caused cumulative DNA damage, and you increased your risk of cancer and probably the risk of some other chronic diseases. You may have triggered some autoimmunity that won't hit you for 10 years. We call that lupus. All of these are correlated. It's so cool that you mentioned the ski thing, because I've never actually talked about that before. I've noticed the same correlation. It's awesome to know it.
What this means is that when you go somewhere, pay attention. You walk in. If it smells like a sock, don't just open the window. Go back and say, "Can I have a different room?" It's little things like that that could keep you from getting a cold, or cancer.

James: Right. For my symptom list, I would say, number one, brain fog. That's easy. It goes brain fog, lack of clarity, loss of recalling specific words. Proper names, for me, that's the first to go, absolutely. If I continue to stay in the environment, it goes into chronic fatigue at some point, where I actually just can't get out of bed. The second one is visual distortions. Primarily for me, it looks like someone dropped milk into my eyes. I get this just slight cloud. The third definitely is numbness in my toes and my fingers. That's the easiest one to say there's restricted blood flow going on here. Something vascular is ... There's an issue. For me, that is absolutely correlated with encountering mold.

From a symptom list, the roster just goes on so long. I can't even think of everything right now. Weird pains, joints, muscle pain, aching, tight cramps. I now have arthritis ... imagine that, by the way, an autoimmune disorder ... in one of my toes. That's another like it's a bellwether. When that starts throbbing, I just have to absolutely get out of the area, especially since, as I feel that, I'm starting to feel it in other toes when I'm in other areas. I guarantee you that's just ... although we don't know exactly how it works, but that's some sort of progression of that arthritis in my toes.

Any collections of symptoms, even just walking into an area, I'll have a mood change, which a lot of people ... That's when people start saying, "That's a little crazy." I can just notice my mood change as I walk into a room, which I absolutely firmly believe is associated to these various biotoxins.

Dave: There is absolutely such a thing as mold rage. Have you experienced it? You know what I'm talking about?

James: Maybe. Maybe.
Dave: Okay. I'll walk through it. I asked a bunch of people who'd been exposed to mold, including physicians and college professors and successful entrepreneurs like you, people who are leading successful lives, and suddenly are like, "I walked into a wall of kryptonite. I either have extricated myself or I am doing it, but I really would like other people to know about this, because it's so common yet so hard to see."

Mold rage is something that happens. In fact, I'll tell my most recent one. This is very rare. I used to walk around. I would have road rage, pretty much, quite often. This is many years ago. I've done my meditation and all that. I don't have even that visceral response. I don't have to suppress it. It's gone. I've hacked that. About five months ago, I was in San Diego. I was giving a talk at this conference for entrepreneurs about human performance. They put me up in this nice hotel that is overlooking the beach. I went in. The room didn't smell bad at all. It was a nice hotel. I didn't worry about it.

I was there for five minutes. I went out, and I got on the phone with the general contractor I'm working with on building the biohacking facility here. The guy goes, "You know, we're having a problem with these doors," and blah, blah, blah. I'm like, "We already made a deal. We signed a contract. The guy's doing the doors for this much money, and he wants to charge us twice as much or he's just going to give us no doors? This is absolutely uncool." It was uncool, and it wasn't a good situation. My response was, at this guy, "As a matter of fact, I don't care about this anymore. Just throw a match on the whole thing, burn it down. I don't want to pay any more attention to this. I just can't handle this."

Okay, I don't talk like that. I don't act like that. I don't think like that. I don't feel like that. That is not me. Right after that happened, I was like, "Pretty sure I got something going on here that's addled my system, because this isn't normal behavior." I went into the room, and I stood on a ... I should post the photo. I still have it. I stood on a chair, and I looked at the register for the air conditioner coming into the room. It has this square bracket around it, covered in black, fluffy mold. That was mold rage. I was a dick, without my permission or consent to be a dick,
because a psychoactive chemical in the environment affected my brain, my neurotransmitters, something else.

This is something you'll hear quite often, nightmares. Did you ever have weird dreams in these buildings?

James: I either couldn't sleep at all or I had absolutely weird, terrifying dreams. Absolutely, yes.

Dave: Yeah. If you go somewhere new, and you have weird, terrifying dreams, and you didn't have something horrible happen to you that day, ask yourself a question: what did it smell like? This just sounds too weird, except ... We don't really know each other that well. We've talked for the documentary. The symptoms are here. There's one in three people have the genes that make them basically permanently affected after this exposure. That's 100 million people in the U.S. The rest of us just have these other things. That's why I think it's actually courageous that you're willing to come out here and say, "I'm a successful guy. This happened, even though I had crazypants symptoms, but I'm not crazy." Did you go back to any of the doctors who said it was in your head? Did you say, "Here's my results. Here's what fixed me"?

James: I haven't, no. I've thought about it many, many a time. There's one doctor who, in my opinion, should not be practicing medicine. That just unfortunately happens to be the way that our medical system is right now. You get your degree 40 years ago, and anything that you say is absolute truth, although it's a little strange that medicine can give me 11 different diagnoses for the same thing. I don't call that exactly objective. Absolutely.

I hope at some point, or how about I just mail this tape to these guys? Because there is something more to the diagnostic protocol than they're going through. There are certainly people who, like a lot of successful people, even in medicine, have a big ego and believe that the body of knowledge that they have, in their opinions, are absolutely the truth. At least in my case, nothing that anybody else prescribes or suggested ever showed any problem whatsoever. It's a conditioning mechanism. "I think James is crazy. I gave him 10 blood labs. His 10 blood labs came
back perfect. I'm right. He's wrong. He's crazy. He's perfectly fine." Hopefully, with the documentary, absolutely, more people and more doctors will recognize this as something legitimate.

Dave: It's interesting, because thousands of doctors listen to Bulletproof Radio. I get emails from them about this, or they're using the Bulletproof Diet. I know they don't believe everything I say, and that's good. What's cool is I'm asking them to think about these things and to look at the research.

If you're listening and you're a physician or a care provider, if someone who generally has a pretty good track record of success comes in, and they're acting wacky and they have 25 symptoms, before you call them a hypochondriac, even though somehow they magically have been able to become an amazing painter, an amazing artist, an amazing mom, an entrepreneur, a sports professional, whatever they do, if they're good at that and they're showing a healthy, functioning person who now has all these crazy symptoms, you owe it to your patients to just take a look at this and ask them a few questions about it, or maybe even run some labs.

I think this is going to change medicine, because even at the most extreme edge of, say, Olympic-athlete performance, take Olympic athletes, put them in a moldy ski lodge, and watch the changes in, what's that called, visual contrast sensitivity. This is actually something that Shoemaker uses to test whether you've been exposed. What happens is your eyes can't see subtle changes in gray. Imagine you're doing 60 miles an hour on skis down a ski slope, and you can't see that subtle change of gray on the mogul in front of you. That's the difference between a gold medal and no metal.

These neurotoxins aren't just hitting people who have this chronic inflammatory response after exposure. They're hitting all of us. Some of us are better at filtering than others, but there isn't a hormetic or a healthy dose that makes you stronger. They damage your tissues, and you have to undo the damage if you can. Some of the DNA damage, we don't know how to undo that yet. It's cool. If you're listening to this and you're a doctor, no, this is real stuff.
James: I have something to add on that. This goes into the "everybody thinks I'm crazy." I'll be completely honest. I don't tell most people, unless I can see obvious signs that maybe they're having an issue, as well. I tell my family and friends. I would say a moderate percentage of my family maybe believes me. A high percentage of my friends don't believe me whatsoever, including one friend who's had ... I wouldn't say that he doesn't believe me. He's actually gone through and done a number of the blood labs and work and proven that he has it. In his view, mold is everywhere, and gosh, it's just too hard to deal with. Meanwhile, everyone in his family on his father's side has died of some inflammation-related disease, which just terrifies me.

When I ask myself, "Why is that?", and I ask other doctors, "Why do you think that mold is not a problem?", what I've been told back is ... There was a mold scare, I think, in the early '90s or something like that. A lot of companies made a lot of money off of that scare by remediating homes, really not doing too much. I think the scientific community at that point said, "We need to push this down, because this is getting out of hand. This is no longer scientific." I think it just became a little bit taboo to even mention the fact that mold can be a problem, up to the point where ...

You may have read this. I think it's a excellent article by a guy, I think it's David Armstrong, in The Wall Street Journal a few years ago. He did investigative journalism looking at these mold litigation cases. He discovered a very important point. It really is a smoking gun. That is, there are two primary physicians' organizations. Many physicians belong to a organization that helps prop them up or helps certify them in terms of various things that they do. They're important organizations. Some of them are social. A lot of them, just like politics, will publish views on various things.

There are two very key organizations. One of them is well known. One of them is extremely well known. They both put out position papers showing or stating that mold is not a problem. Mold cannot cause chronic inflammation or chronic disorders. Come to find out the writers of those papers were not actually physicians themselves. Maybe they were. I forget the exact details. The writers actually were people who
had for a long time been on the defense of mold cases. They were expert witnesses who made millions of dollars on mold litigation. They themselves also wrote the papers for these organizations that these organizations then published.

When you go talk to a doctor, a doctor might say, "Look, I belong to this very reputable organization. They have made a statement. Here's the evidence they present." Meanwhile, they don't look at all the objective evidence, a lot of which Dr. Shoemaker has presented in scientific studies, as well. They present this front like it's not something true. Meanwhile, the same guys took those papers that they wrote, and then started using them in new mold cases that they won as a result. In law and other things like scientific papers and so forth, you are required to state conflicts of interests. That's the key legal point here. These guys did not state that there was a conflict of interest.

Here you have an entire body of medical knowledge and doctors across the United States who say, "You know what? I read a paper. Mold isn't a thing, because these papers said so." I think it's people like you who have to tell the rest of the world, "No, that was wrong. There really is legitimately a problem."

Dave: One of the favorite interviews in Moldy was with a physician. It was one of my favorites because she was married to a physician. She got really sick in a moldy house, and he didn't. They spent two years using every Western ... It was like biopsying every organ in her body, which is horribly painful. No answer. At the end of two years of hell, basically, instead of saying she was crazy ... because she had a temperature from the mold. They believed she wasn't crazy. There was an objective symptom that we could all measure instead of just "I'm tired all the time," which you can't measure. Then she figured it out what it was. Now she treats patients with that.

The idea that two well-trained medical professionals could miss this for two years, that ought to help the rest of medicine, like, "Wait, there's something missing here." Not everything is caused by toxic mold, but autoimmunity is caused by toxic mold. Is it only caused by toxic mold? No, it's not. Cancer is caused by toxic molds. All doctors know that,
because aflatoxin is a mold toxin, and it's the most cancer-causing substance we know of.

We go down this path of being very binary. It either is, or it isn’t. It's always this, or it's never that. In medicine and in law and everything else, it’s almost never that binary. Only in computer science, and even then, it's getting less binary with quantum. What happens is, sometimes it's an issue. It might not even be the only issue, but it matters. If you do that "Well, the general consensus is that it can have no effect," then you've removed it from the universe of possibilities, and you're a worse diagnostician.

The scientific thinking for that is a panel of experts who may or may not be independent, as all panels of experts are today. There are issues with corporate sponsorship of things. That is their opinion. It is a learned opinion, and it's worth the statistical weighting, but it isn't perfect. If you then say, "Okay, there's this other body of knowledge, but I'm going to ignore the knowledge using the logic" ... this is the same logic that says that you can't eat butter because it’s bad for you ... "'It can't be; therefore, it's not.'" That is not scientific.

If you look at a patient and you say, "This guy has 25 symptoms, and he says he thinks it's mold. It's not mold, because it can't be," versus ... Even if it is, you've basically done that weird loop, versus saying, "All right, I'm going to do the science, and I'm going to say, 'Is it possible that it is?' I'm going to rule that out." I would get off the soapbox here. You and I and hundreds of thousands of other people have gone through multiple doctor's appointments without getting any results, with a ton of frustration and just a ton of suffering, for lack of a better word, because of papers like those two, which have educated well-meaning doctors to say that they should call you crazy instead of run a lab test to see if you have a certain toxin in your blood.

Any lab test that stood out for you, like something you should talk about? I know you’re not a doctor, but you're a guy who hacked himself to get around a substantial problem. You used data to do it. That's what makes all this interesting. What were the most important tests to be aware of?
James: I'll answer that in two ways. I can tell you that the majority of tests that doctors order, including for me hs-CRP, perfect. I look like a rock star. In that regard, you get a lot of this confirmation bias. You get this, "I've done a smattering of tests, James, and you look perfectly fine." My CBC is fine. My comprehensive metabolic panel is perfectly fine. My cholesterol is fine.

When you start looking at inflammation markers, which ... this is another issue that I have ... the medical community might not know about, but the PhD research medical community does know about and has known about for a long time. The biomarkers that come up for me, off the bat, something called TGF beta 1, transforming growth factor beta 1. C4a, another inflammation marker. Both of those, by all means, when I'm doing very poorly, are off-the-charts high.

VIP, vasoactive intestinal polypeptide, was so low for me that they could not record it in my blood, which, VIP does a number of things, one of which is part of that vascularity, like the constriction of blood vessels. Capillary hypoperfusion, I think it is. Can be helped by VIP and something called VEGF, vascular endothelial growth factor, if I remember. Those have a tendency to, if you're not doing well in those biomarkers, that's when the blood flow stops. That's when the brain fog comes in. That's when you can measure at 40 percent of the blood volume to your brain goes away. You're operating at 60 percent or less of the capacity that you can. Other are MSH, melanocyte-stimulating hormone, and then something called ETHO, which you might know from Lance Armstrong. That is also just absolutely significantly low for me.

Those are generally what I go in to test, generally on a maybe every-three-months basis, as well as I had an MRI done with something called NeuroQuant, which is starting to be used for diagnosing early-stage Alzheimer's. What you can do with that, or what Dr. Shoemaker and some other researchers found, is that these mold toxins and the impact of mold basically ... I'm going to describe it completely inaccurate, but that's all right. I'm not a medical guy ... do something like what they call leaky gut. It's like leaky brain. It increases the permeability of the brain, whereby additional toxins can get into it.
I have … admit this to everyone … I have significant left caudate atrophy. When you go to Wikipedia and you look up what happens if you have left caudate atrophy, you'll find a description of James Baber, by all means. On the other hand, I have swelling in other components of the brain, the forebrain parenchyma, as an example. On a standard deviation, I'm three standard or four standard deviations out of an enlarged prefrontal cortex and other various components of the forebrain.

As you go through the protocol that I'm working on, and you ensure that you're healthy, and you've got a good environment, and you're eating very well, and you're following all these things that you speak of, I can objectively show a renewal of those blood labs that are completely off the charts. You can actually see a normalization of the brain structures. I take this information in to doctors, and they're like, "Mm-hmm (affirmative). Okay. I think you have tuberculosis."

Dave: It's really funny how putting a name on it is so important, because that's how we drive our diagnosis. It's such a strong thing. You know the correlations there. One of the things that I've noticed over the, really, probably, dozen years since I've figured out what was really going on with me and what had triggered some of these things, and then how to undo those things, was it helped me understand things like the relationship between VIP and things like leptin, and then things like insulin, and how one of the reasons that I was really obese was because of inflammation.

Then when I go to people who clearly can walk into the buildings that, for me, I'm like, "This place is moldy. I can tell you for sure. If I don't get out of here in the next breath, I'm probably going to feel crappy for a couple hours." Okay, maybe I'm just crazy, except other people who've been exposed to mold know it's the same place. We get out of there, but the guy who goes in there, he also has symptoms. They aren't the same as mine. They aren't as severe as mine. When he uses protocols that help his body clear the neurotoxins more quickly, his performance goes up.
I have tested that even for coffee in the book. "Okay, this is moldy coffee. This is not moldy coffee." People who aren't mold sensitive magically perform better without the toxins. I view the world as basically like there's a smearing of toxins. Some of them are mold. Some of them are man-made. Some of them are other chemicals. Those things slow you down. There's a smearing of good stuff, and that stuff speeds you up.

For everyone out there, when you clean up the air in your house, when you make sure you have proper drainage in your house, your quality of life goes up. Your number of sick days goes down, whether or not you're going to have VEGF and your prefrontal cortex having no metabolic activity, like mine for a while. That was on a SPECT scan from Daniel Amen, not on the NeuroQuant.

These types of things are just great measuring sticks, because all of the great biohacking sources of information, like professional extreme sports, military, hospital operating rooms, astronauts, all of those are extremes of environments for ... even like freediving. What happens at the edges and what happened to you is at the edge of what happens to someone who's really exposed to mold. The rest of us are still able to learn from that and steer our environment to make it better. The other thing that ... I don't know if you know much about this. Do you have any familiarity with mold in schools?

James: I'm definitely aware of it, yes.

Dave: Anything you can say to share with people who are listening in their cars now? Is that just not an area where you've paid much attention to it?

James: I have not personally. I can't say that I personally experienced a problem with it. I just have read a lot in the literature about issues where children's parents recognize that they're having a problem. They call it autism. They call it ADD. They do an ERMI test. They find that it's absolutely off the charts. They take the child out. The child goes through a healthy protocol.
Then, ... because at least at the time, they didn't know the objective labs ... they had to put the child back in the school for four days and then show that it just wrecked their bodies, which, if you ask me, that mechanism ... This was for many law cases, lawsuits. That's called child abuse, I think, by putting that child back in. That's ridiculous. I'm lucky because I started high school in a absolutely brand-new building. I can't tell you that I personally experienced any of those problems.

Dave: You're definitely fortunate there. It's a known problem that schools have no budgets for crayons, so they certainly don't have it for building maintenance. The number of moldy schools, it's very high. You imagine adults like me, who ... I meditate a lot. I'm a grounded guy. If I can get to the "I don't care about this biohacking facility, throw a match in it and get me the hell out of here" in 20 minutes, I can't imagine trying to be 12 years old with raging hormones in a moldy building, and at all sane.

When I look at these kids with all sorts of conditions going on, you got to look at the environment, because it's maybe even more important than the food. I'm hoping that this kind of awareness that you've just shared here will get a lot of parents ... I don't know. If this is an average episode, 50,000 the first week ... paying attention and saying, "Wow, I wonder if little Johnny, if this is something we should think about for him." Some of the time it is, and some of the time it's not, but it should be in your universe.

James, we're down to the end of the podcast. I appreciate you just being willing to share how things are going, but there's one more share. What are your top three recommendations for people who want to perform better? Not just as a mold survivor. You've been a successful entrepreneur. You live in a great city, in New York. You've led an interesting life aside from having dealt with this for three years. What have you learned that everyone should know?

James: Things I've learned in my life. The absolute first thing that I can say is I'm the person who did everything wrong first, at least three times wrong first, and then recovered from that and took that as a lesson. I've built my life around maybe some pretty hard lessons. At the end, learning from what I did wrong, what hurt me, what hurt other people,
recognizing that is really a very important step of moving forward. I would say that's probably the key thing that's contributed to the success in my career.

The second thing is ... I know this isn't for everyone, but I always think of life, this is potentially your last day. If I'm thinking about what I would regret on my deathbed, then how do I live my life? Would I take that vacation to Australia? Would I go to the Antarctic? Would I do these things personally? It's, again, not for everybody.

I would do those things because it's important for me to ensure that I'm doing the things that I want, that I'm going the places that I want, that I work hard to try to achieve those things, which is why I work so hard, that I'm helping other people in the ways that I can, so that at the end, hopefully goes quickly, but I'm not sitting on my deathbed regretting the things that went through my life. This is a personal note, but I went through that with my father's death about two years ago. At the end, for about three weeks, it was three weeks of just talking about what he wished he had done and what he wished he hadn't have done. I can't live that life. Not for me.

The third thing is ... This is going to be an obvious one, but your body really is a temple. You've got to take care of it. You've got to eat well. You've got to exercise. This is what I try to do. This is the only reason that I got out of the house. I made myself, in those two hours that I was able to be awake, I made myself go out to the park and at least walk. It was the last thing that I felt like doing, but I knew that if at least I could do that, that the next day wouldn't be as hard or at least mentally wouldn't be as hard. That's just an internal mechanism that I use to try to push myself forward and stay motivated.

Dave: Awesome advice. Thank you. If you enjoyed today's show of Bulletproof Radio, please do me a favor. Just click on over to iTunes and say you liked it and share a positive review. That helps other people find the show, and it keeps me motivated to put two of these out every week, like I have for almost two years now straight. It is an enormous undertaking for me, but I feel like this knowledge is helping millions of people now. It doesn't always directly apply to you, but one in three
people have the genes that make them susceptible to what you heard about today. That means if you look to your left and you look to your right, one of those three of you is going to get way worse than the other two when you walk into a moldy building. If it's your building, you got to clean it up.

That's it. Thanks for listening. Check you out next time.

**Featured**

James Baber (LinkedIn)

**Resources**

The Molding of the World Part 1: How We Made Mycotoxins into the Health Disaster They Are Today

Escherichia coli (E. coli)

Chronic Fatigue Syndrome (CFS)

LEED certified

Prozac (Fluoxetine)

Environmental Relative Moldiness Index (ERMI) testing

Penicillium

Aspergillus

Surviving Mold: Life in the Era of Dangerous Buildings by Dr. Ritchie Shoemaker

Differential diagnosis
Pulmonary aspergillosis

Dr. Scott McMahon

Canary test

Lyme disease

Quantified Self

Heart Rate Variability (HRV) training

Hypochondria

Visual Contrast Sensitivity (VCS) APTitude screening test

Hormesis

Amid Suits Over Mold, Experts Wear Two Hats by David Armstrong (The Wall Street Journal)

The medical effects of mold exposure (American Academy of Allergy, Asthma and Immunology)

Centers for Disease Control and Prevention (CDC) Facts about Stachybotrys chartarum and Other Molds

Aflatoxin

Binary

Mold Diagnosis Lab Tests List

High Sensitivity C-reactive Protein (hs-CRP) test

Complete Blood Count (CBC) test

Transforming Growth Factor Beta-1 (TGFβ1)
C4A beta-marker

Vasoactive Intestinal Polypeptide (VIP) test

Capillary hypoperfusion

Vascular endothelial growth factor (VEGF)

Melanocyte-Stimulating Hormone (MSH)

Erythropoietin (EPO)

NeuroQuant

Leaky gut (Dr. Andrew Weil)

Left carotid atrophy

Forebrain perynchama

Leptin

**Bulletproof**

Moldy Documentary

David Gottfried: Explosion Green and Finding Your Impact – #135

Dr. Ritchie Shoemaker: Surviving Mold – #126

Bulletproof Diet Book

Bulletproof Conference

Upgraded Coffee