



## **Chronic Illness & Environmental Toxicants**

**Nafysa Parpia, N.D. interviewing  
Wendie Trubow, M.D.**



### **Nafysa Parpia, N.D.**

Welcome to this episode of the Mycotoxin and Chronic Illness Summit. I'm so happy to have with me today, Dr. Wendie Trubow. We're gonna talk about something that's very dear to both of our hearts. We both focus on patients who have chronic illness, but also a high environmental toxin load that goes with that. So not only mycotoxin illness, but the illnesses that come from a plethora of an environmental toxins, and we're gonna dive deep into that. But today, Wendie, I'll have you start by introducing yourself to our audience.

### **Wendie Trubow, M.D.**

Sounds good.. Thanks, Nafysa, it's great to be here. My name's Dr. Wendie Trubow and I am a functional medicine gynecologist. I am the president and co-owner of Five Journeys, which is a functional medicine practice in the Boston area, so we're on the East Coast, and we just published our book, "Dirty Girl: Ditch the Toxins, Look Great and Feel Freaking Amazing" because I think you and I have similar stories. We both had high levels of toxins and it was wreaking havoc on our health, one of which was mycotoxins. So I'm just delighted to be here to talk about that.



**MYCOTOXINS AND  
CHRONIC ILLNESS  
SUMMIT**

**Nafysa Parpia, N.D.**

Great, thank you, thank you very much. I'm excited about your book, it's been three months now, right?

**Wendie Trubow, M.D.**

Yeah.

**Nafysa Parpia, N.D.**

Three months this week, I think.

**Wendie Trubow, M.D.**

Last week, yeah, three months.

**Nafysa Parpia, N.D.**

Last week, yeah, very exciting. So let's talk about environmental toxicants and how they affect our health in general, and then we'll dial it down to our immune system. What do you know?

**Wendie Trubow, M.D.**

This is a huge topic.

**Nafysa Parpia, N.D.**

Yeah.

**Wendie Trubow, M.D.**

Right? So--

**Nafysa Parpia, N.D.**

Huge, yeah.



**Wendie Trubow, M.D.**

So, whenever we're talking about environmental toxins or toxicants, I use the words interchangeably, even though they're not technically the same, but basically anything in the environment goes into a number of categories. One is the heavy metals. And the ones we're typically paying closer attention to are lead, mercury and cadmium, those are the three biggies. Then there's... And feel free to interrupt me at any time if I skip something or if it's not clear and I can also get into what are the sources of each. I'm sure we'll get to that. And then the next category of toxins is mycotoxins and there's a whole long list of those. And those are the toxins put out by molds that end up in your body, they become toxins for you. And then there's the chemicals, that's plastics, VOCs, construction materials, paint, gasoline fumes, there's really almost styrene, there's like... I could go on and on. A lot of beauty products, thylates, it's a huge category. And those are things that either we're putting on our body or around us. And then there's the last category, which is the herbicides, pesticides, insecticides and the one that people know the most is glyphosate, which is otherwise known as Roundup, that's the most commonly used herbicide in the world and it's responsible for a whole host of issues, including being pro cancer, causing for a number of cancers and also for disrupting the microbiome, which makes it difficult to just get through the day when the gut doesn't work.

**Nafysa Parpia, N.D.**

Right, I absolutely. So we're looking at the same kinds of toxicants. So with respect to metals here in California, I'm seeing a lot more arsenic and aluminum than ever before. So I would add that to the list. And I think the reason we're seeing that more here is due to the fires here on the West Coast.

**Wendie Trubow, M.D.**

Yes, yes, that's been released.



**Nafysa Parpia, N.D.**

Right, right. And same with the VOCs, of course, and the thylates. So it's all there. And also in California, after the fires, all the water, right? That has been used to treat the houses, now people have more mold.

**Wendie Trubow, M.D.**

Yeah.

**Nafysa Parpia, N.D.**

So we're dealing with this whole constellation of toxins more on the West Coast. I'm sure over there on the East Coast, too, Wendie, even though there haven't been fires, but it's just is, there's a damp in environment down there more so than California and industrial.

**Wendie Trubow, M.D.**

Yeah, we've really... I think my husband always says, "We've really sort of trashed the earth." And I was listening to a report, you know, these things that you just sort of don't even come on your radar, but I love our local fire department. I don't know why it's right down the street from my house. I just really think at people who are firefighters and public servants, they do so much work and it's so often missed.

**Nafysa Parpia, N.D.**

Yes.

**Wendie Trubow, M.D.**

And so they did this report on how firefighters were being exposed to harmful levels of endocrine disruptors through the flame returns. And I was like, I never thought about that. In which--

**Nafysa Parpia, N.D.**

Right.



**Wendie Trubow, M.D.**

So we're exposed to all these toxicants in ways and it's almost sometimes invisible and then sort of take a step back and go, oh, that's not the healthiest thing for me. So I think it's great to dive into what are the ways that we can be exposed? And it's really is everywhere 'cause of what... The state of the earth.

**Nafysa Parpia, N.D.**

Exactly, it is. And so I have patients that come from all over the country, like I think you do too. And so I'm measuring their loads, their toxin loads, whether they're from Florida or New York or California, Washington, across the board I'm seeing these high levels. Though, again, in California, more I'm seeing metals, than in other states right now.

**Wendie Trubow, M.D.**

Yeah. So, I mean, given what's been released as the houses and the trees burn, that's understandable.

**Nafysa Parpia, N.D.**

Yeah.

**Wendie Trubow, M.D.**

Unfortunate, but understandable.

**Nafysa Parpia, N.D.**

Right, right. So, what kind of health issues are you seeing as a result of toxicants in your practice?

**Wendie Trubow, M.D.**

Right, so it's kind of a, let me count the ways, so--

**Nafysa Parpia, N.D.**

Right.



**Wendie Trubow, M.D.**

So for myself, this is one reason we wrote the book, "Dirty Girl" because I had such a struggle and I would say, you and I are very similar that we eat well, we live well, we take care of ourselves and yet all these toxins had essentially found a friendly home in me and were hanging out. And so when you really look at how humans respond, humans respond with inflammation. So inflammation can take any pathway and essentially inflammation goes into what your... I'll call it your Achilles' heel. So my Achilles heel is my gut. Whenever I go off the rails, I notice it first in my gut. But people can notice things head to toe, so let's go really broad and say, okay, hair loss, brutal hair, hair thinning, brain fog, confusion, memory loss, difficulty remembering things, anxiety, depression, any endocrine disorder, including thyroid dysfunction, autoimmune. And then when I say autoimmune Hashimoto's, I'm also talking about any autoimmune disease. So anything you can name, I would say, okay, that could be an issue with toxins--

**Nafysa Parpia, N.D.**

Absolutely.

**Wendie Trubow, M.D.**

Gut dysfunction, cardiovascular health, hypertension, high cholesterol. You can have gut issues up, down and backwards. So difficulty processing, absorbing nutrients, constipation, diarrhea, irritability, reflex guard, weight issues. I think for, particularly for women, weight is the thing that gets them. And what will happen is you, you know, these patients, they say, I eat right, I get enough sleep, I'm not a stress ball, I don't eat too little, I don't eat too much, I don't lose a pound. Anyone who has resistant weight loss is someone who I say, well, you probably have a toxins issue because they're stored in your fat, your bones and your organs. And so if you aren't excreting them properly, you're storing them. And the body knows it should not get rid of that fat because you'll be toxic. It can't deal with that toxic burden.

**Nafysa Parpia, N.D.**

Right, that's a big one.



**Wendie Trubow, M.D.**

So, anyone with weight issues, it's huge.

**Nafysa Parpia, N.D.**

Yeah, it's a huge one. And people don't know that they try all kinds of diets or they try intermittent fasting or keto, and I mean, that's supposed to work, right? But it doesn't. And in the toxin piece is a big overlooked piece with respect to weight loss and as well, hormone dysregulation and immune dysfunction. So I wanna talk a little bit about the immune system actually. So what I'm seeing in my patients is this hyperactive immune system and at the same time, a weakened immune system. And so hyperactive, meaning there's mass cell activation syndrome. So they're hypersensitive to everything, they're hypersensitive to all kinds of foods, to smells.

**Wendie Trubow, M.D.**

Yeah.

**Nafysa Parpia, N.D.**

To chemicals, they have autoimmune conditions, that's the hyperactive end. And at the same time, not able to mount an appropriate immune response to kill common infections.

**Wendie Trubow, M.D.**

Yeah.

**Nafysa Parpia, N.D.**

Like mold or tickborne diseases. These infections that we've lived side by side with since the beginning of humanity, we're not able to handle them, we're not able to deal with them. And I think a lot of that has to do with the immune system dysregulation as a result of environmental toxins.

**Wendie Trubow, M.D.**

I think that really does absolutely deserve a little bit of a deeper dive because when I was mentioning that these toxins cause an inflammatory state and when you're



talking about the dysregulation, the autoimmune issues, the, I mean, pretty much everything you named is a sign of a system being inflamed and simultaneously a system that's out of balance will not mount appropriate immune responses. So you can have immune dysregulation. And that either means you're always sick or you don't mount appropriate responses to things that you're exposed to. But then there's another nuance in there that I think we should highlight, which is that the system, which is your body, can only handle so much. And so you think of it like... The best way to think of it is a rain barrel. And over the course of your life and how you live and eat and think and sleep and what you're exposed to, those are all things that fill up your rain barrel and you start hopefully empty, although some people come into this world already somewhat sick. And so as you live, you add more exposures, stressors, toxins, and your rain barrel gets filled. And at some point you're gonna overflow your rain barrel and that system cannot handle anymore. So then when you layer on top of it and exposure, like you had a leak in your home that wasn't addressed properly, or you had a flood in your basement that wasn't mitigated right away, or you're living in a home and you do construction on it and happen to release lead dust into the air, or you get bitten by a tick, or you had that tickborne illness and your immune system is now so dysfunctional it cannot keep it at bay then you start having symptoms of whatever that thing is. It's like that one last drop breaks the surface tension and your system overflows.

**Nafysa Parpia, N.D.**

Right.

**Wendie Trubow, M.D.**

And it doesn't matter what that is. People say, "Well, I got in a car accident and all of a sudden I couldn't recover." And I'm like, well, that was the... That was that one thing that had you unable to compensate any longer.

**Nafysa Parpia, N.D.**

Right, I tell my--





**Wendie Trubow, M.D.**

So it's all about elasticity.

**Nafysa Parpia, N.D.**

Yeah, I tell my patients the same thing. This is a really, really important point because all of a sudden somebody can be walking around with chronic lime and they had a tick bite 20 years ago, but it's that the immune system was able to handle these things. And we were designed to be able to handle a tick bite or mold but for some reason we're not able to. And it is that, I call it layering, like layering of a cake even. There's the stress of maybe somebody's marriage or underneath that a childhood trauma. A lot of my patients have had that kind of trauma and we know that stress causes immune dysregulation. And maybe people didn't eat well when they were younger, it's just how they were brought up, on the standard American diet.

**Wendie Trubow, M.D.**

Child of the '70s.

**Nafysa Parpia, N.D.**

Right. And , but now they're older and they say, "My diet's pristine and I have these meditation techniques and I'm doing everything right, I don't understand. Why am I sick?" And I love that you bring in house renovations because I've had patients who, you know, they've lived in their house while it was being renovated so a really important point, or they themselves have renovated houses? And all of a sudden they're in a state of chronic illness and sudden chronic illness like they even bypassed the acute phase. And it has everything to do with like that rain barrel that you discuss or--

**Wendie Trubow, M.D.**

Yeah, when you ask too much from the system and it can no longer compensate, like stretching that rubber band way too far and it snaps.



**Nafysa Parpia, N.D.**

Right.

**Wendie Trubow, M.D.**

And that's the point where you start to have symptoms.

**Nafysa Parpia, N.D.**

Right, and they're the symptoms of a person who's been ill for a long time, even though it could be sudden, quite sudden, especially--

**Wendie Trubow, M.D.**

It's a pretty marking crash. I mean, people are like, I was fully functional, now what happened?

**Nafysa Parpia, N.D.**

What happened to me?

**Wendie Trubow, M.D.**

Just like that,

**Nafysa Parpia, N.D.**

The culmination of all these things, this is a very important point.

**Wendie Trubow, M.D.**

Yeah, yeah.

**Nafysa Parpia, N.D.**

Yeah, yeah.

**Wendie Trubow, M.D.**

I think it's important, Nafysa, to say at this moment, there's hope, right? It's fixable.



**Nafysa Parpia, N.D.**

Absolutely.

**Wendie Trubow, M.D.**

I don't think we should get to the end and say there's hope. I think--

**Nafysa Parpia, N.D.**

No.

**Wendie Trubow, M.D.**

So it's really critical to say if you're... If you've been either really great and all of a sudden aren't great, or you've been terrible and you really wanna stop feeling terrible, either of those scenarios, they're fixable. And what it requires is a really deep attention to what are those underlying factors. And I always say to people, you cannot do any sort of detox until you've handled the foundational behaviors. Like you said, you need to have pristine food. Nobody's perfect, but as good as you can, minimally processed, low sugar, pretty much no alcohol or low alcohol, enough sleep, move your body regularly, fix the gut, fix the adrenals.

**Nafysa Parpia, N.D.**

I'm so happy--

**Wendie Trubow, M.D.**

Those are the foundational things 'cause--

**Nafysa Parpia, N.D.**

I'm so happy you say this because a lot of times people jump into detox.

**Wendie Trubow, M.D.**

No, you can't.



**Nafysa Parpia, N.D.**

Or maybe at the yoga studio or the Pilates studio, there's this awesome detox program, right? Or even through the grocery co-op, I've seen people do this. They go in, they do this detox and they crash really, really hard and it's because they didn't prepare for the detox. So when you're detoxing, we're having suddenly mobilizing the toxins that were stored in the fat cells or in the cells of the organ or in the endocrine tissues, that's where they get stored. The metals get stored in the organs.

**Wendie Trubow, M.D.**

Yeah, and if you haven't fixed your gut and your adrenals, you won't be able to excrete it. But let's distinguish that too, Nafysa, because I'm a huge fan of... I don't think that anyone should be doing detox alone, no person is an island. Do it with a functional medicine provider. And then the other parts of that is that doing a detox is something you need to be doing supervised, get the data, understand how things shift with interventions. Doing a cleanse is something that you can do on your own, but it's not meant to be a detox, it's meant to reset you. So that's like you do a juice cleanse you'll have a reaction, but you shouldn't crash, you know? And it's 24 hours, do it one day a week. It's not meant to be the detoxing event, it's really meant to reset you, to get you refocused, reset your taste buds, reset your... Sort of go, okay, clap, now we're gonna reset, it's like that.

**Nafysa Parpia, N.D.**

Exactly.

**Wendie Trubow, M.D.**

It's different.

**Nafysa Parpia, N.D.**

And then if you do crash... Some people do crash even on that, that gives us so much insight. If you do crash, come to your functional medicine doctor and find out the reasons why. You didn't crash for no reason. People think, oh, I just got tired. No, there's something underneath that and we have to discover what that is. It's often a



combination of infections and toxins. But yes, the reset is very, very, very different than the detox. And so when you're doing detox with your functional medicine doctor, your doctor is gonna be looking at all kinds of data, what your environmental toxicant load is. They'll be looking at metals, all the toxins that Wendie brought up at the first... Beginning of our conversation. Mycotoxins, probably they'll look at infections. They're gonna cast a wide net. So now in medical school, we're taught don't over test 'cause if you over test, you're gonna find all kinds of information you don't need, right? Yes and no. But when in the acute model, of course, we don't need to over test, but in the complex chronic illness model, we do wanna to wide net of using fossil medicine testing.

**Wendie Trubow, M.D.**

Yeah, it's a very different... I mean, we're... I think that we wanna distinguish that when you have something like an appendix that's on its way to rupturing, that's a very different interaction than I've been I've been chronically ill for X period of time. I'm no longer able to function properly, as a result, I've had impairments in my relationships, my work life and now I'm getting some type of emotional imbalance, either anxiety, depression, OCD, whatever, that these have sort of domino effects. And that it's really less... The traditional approach is excellent for a surgical issue and then the wide net is appropriate for those people who have visited a million doctors and the, you know, the doctors say to them, "There's nothing wrong with you, you're just depressed." We had a patient in a wheelchair, she's in a wheelchair. And she said... She saw Ed, my husband. And he said, why you in a wheelchair? And she said, "Well, I was told I was depressed." He said, "Well, you probably are depressed at this point, but being depressed doesn't cause you to need a wheelchair."

**Nafysa Parpia, N.D.**

Exactly.

**Wendie Trubow, M.D.**

And she ended up having multiple strains of lyme in the co-infections, and is now walking. So it's that refusal to accept, oh, I'm just depressed.



**Nafysa Parpia, N.D.**

Exactly. And it's that people are not chronically ill because there's a lack of antidepressants or because they don't have enough antidepressants on board in their own protocol, right?

**Wendie Trubow, M.D.**

Right, right.

**Nafysa Parpia, N.D.**

Often they're still depressed even with the antidepressants. And that's when we have to dig deeper, that's when we have to cast that white net of diagnostics and then treatment, appropriate treatment.

**Wendie Trubow, M.D.**

Yeah, and I think it's important to point out that, you know, people think of detox as like, oh, like a weekend warrior.

**Nafysa Parpia, N.D.**

Right.

**Wendie Trubow, M.D.**

I did it for the weekend. And I'm like, well, it's not a sprint and it's not a marathon, it's more like around the world trip, it's gonna take a while.

**Nafysa Parpia, N.D.**

Yes, exactly.

**Wendie Trubow, M.D.**

It's a whole overhaul here. So we really to focus on how do you make it, A, sustainable, B, workable and C, not just devastate you because you can do detox too quickly and have symptoms and have the Herxheimer reactions and be worse actually, and we don't want that, that's not the goal. The goal is that it, yes, you'll have



some fatigue, you might have some gut irritability, you might have a little bit of brain fog, but generally, you should be functional while you're doing this detox.

**Nafysa Parpia, N.D.**

Exactly, a lot of patients come in and they'll say, "Well, if I'm crashing, isn't that a good thing? Cause it means I'm getting all the toxins out." No, we're not looking for that.

**Wendie Trubow, M.D.**

No, we're going too fast, let's back down.

**Nafysa Parpia, N.D.**

Exactly, exactly. 'Cause if we're going too fast, we can cause further immune dysregulation, we can increase our inflammation. And speaking of inflammation, patients get stuck in a loop of inflammation. When inflammation is part of the normal healing cycle, it should be transient.

**Wendie Trubow, M.D.**

Yeah.

**Nafysa Parpia, N.D.**

But when there's a lot of environmental toxins on board, when there's a lot of infections on board, when there's a lot of stress in our lives, then we get stuck in this loop of immune dysregulation, in this loop of inflammation and the patient just can't get out of it. So part of our job is understand where to cut that loop, how to stop that process even before we begin treatment.

**Wendie Trubow, M.D.**

Well, yeah, I think we're highlighting that. I always say to people, detoxifying your body from all of the things in it is a behavior that your body undertakes when it's no longer in fight, flight or freeze. If you're still in the fight, flight or freeze pathway, you are not gonna effectively do detox. So we need to take care of the foundational behaviors, fix your gut, fix your adrenals, get you on a good eating plan. And notice



they don't say diet 'cause it's not a temporary state, it's really something that you can maintain over time.

**Nafysa Parpia, N.D.**

Yes.

**Wendie Trubow, M.D.**

Get you sleeping, fix the relationship with yourself, fix your relationship with others, fix your thought process, those are the foundational behaviors. And then, and only then when you've handled that, can you move on to, what I'll call higher order level behavior, which is to get rid of the toxins so that you don't overwhelm the system, stress the system and then backslide. So detox, removing toxins is often not the first thing that I go to even though I'm a detox doc.

**Nafysa Parpia, N.D.**

Right?

**Wendie Trubow, M.D.**

I have to fix the foundations.

**Nafysa Parpia, N.D.**

Exactly, we have to prepare the person for detox and it can take time. But then patients have to begin to excited about it because they see their whole life changing before them, they're able to sleep. If you're not sleeping, you're not gonna detox. In fact, our brain detoxifies when we're sleeping. And if you're unhappy a lot, if you don't make those... Unhappy a lot, I mean, maybe due to a poor relationship or due to just lifestyle habits that need to be changed, then you're too inflamed to detox appropriately. So then people get excited when they make that commitment to changing the course of their lives. And what an honor it is to work with people when they're doing that.





**Wendie Trubow, M.D.**

Yeah, I mean, transformation occurs in the... A thought, a thought. Transformation occurs immediately and then transition occurs over time. And so when that person gets that moment of saying, oh, I had a patient sitting in my office yesterday and I said to her, I said, "I rarely ever see this, but you're gonna be that person on those two fingers and you're one of them, where I'm not sure what difference I can make until you either transform your marriage or get out of it because it is that toxic for you." And she said... She was like, "Yeah, I kind of know that." I said, "Have you done everything you can to fix your marriage?" She said, "I've done everything I can." I said that my recommendation clinically is that you get out because it's toxic for you. And we can't get to start, we can't get started on taking care of you and your weight loss until that toxic thing that's messing up your gut, your adrenals, your sleep, your mood, your hormones, we need to resolve that root cause issue. So that's relationship to self and relationship to others is a core part of that foundational approach.

**Nafysa Parpia, N.D.**

Right, and speaking of a poor relationship, right? That does affect our sleep. Of course, people stay up at night miserable when they're in a bad relationship. So then that affects the adrenals, in turn it affects the organs, then it causes more inflammation. So one difficult place in our life can cause this broad spectrum range of dysregulation in our system. From mental and spiritual to biochemical. And so making that one change, like fixing a bad relationship in whatever way you feel is right.

**Wendie Trubow, M.D.**

It's huge. I think it's also really important here to make a plug for managing our thoughts too, because the thoughts that we have will either send us into a pathway of restoration and repair or it can send us down the fight, flight, freeze pathway. And so just the thoughts we have influence what happens in our adrenals. So because our technology has advanced much more rapidly than our bodies have evolved. So typically it takes, you know, thousands of years to evolve and in the span of a couple hundred years, we've gone from being peasants to, you know, famine, to now we



have electric electric devices at our fingertips. And so that transition has been so rapid, but our adrenals are still very primitive. And so when we have a stressful thought, the same pathway happens with a thought about, hey, my boss is a jerk or my is calling me as the pathway of there's a bus or a lion about to eat me or a bus about to hit me. It's the same pathway, it will shut down your digestion, shut down liver detoxification focus on getting glucose to your big muscles so you can run from the lion.

**Nafysa Parpia, N.D.**

Right.

**Wendie Trubow, M.D.**

We're still very primitive. And so it's critical to make sure that our thoughts don't send us down that rabbit hole because that rabbit hole, it's like a dead end and there's a fox behind us, so it's never a good one. And so the thing I always talk with my patients about, one of my favorite examples is a patient said to me, she was going away for the weekend and she has two autistic kids. And she said to me, what if my kids... And her kids are old enough to stay alone? And she said to me, "What if they burn the house down?" I was like, "That is just so not the question I'd be asking." I said to her. So any question that starts with what if is a question that you're gonna wanna fire, okay? Those questions endlessly send you into disempowerment and anxiety. What if the house burns down? What if they die? What if someone murder... I mean, it's never good, right? And my fifth grade teacher used to say, "What if a big pink elephant sits on you?" And I just go, okay. So he sort of highlighted how ridiculous, what if is. And so I always say to my patients, let's work with that question. And anytime you have a what if, you're gonna wanna convert it into an action that your... Or a question that your brain can work on? So for example, instead of asking, what if they burn the house down, there's really two pathways. One pathway is what do I need to do to ensure that my kids are safe while I'm away? And what would I do if in the event, something bad happened, what safeguards and backup plans do I have set in place so that they're safe? Same kind of questions, except those two avenues give your brain the opportunity to come up with answers. What if questions



leave you down in a dead end rabbit hole and don't allow you to be empowered. So training the brain is critical because that impacts how your adrenals respond.

**Nafysa Parpia, N.D.**

Right.

**Wendie Trubow, M.D.**

So when I asked her that, she said, "Oh, well, I would do this and I would do that. I'll have my neighbor on call, I know one of my other children will be checking in on them, I'll make sure that they understand." So she really could dive into the act items needed to make sure that her kids were safe 'cause that's really the question she was asking, is how do I keep my kids safe while I'm not with them?

**Nafysa Parpia, N.D.**

Right. And I think you bring up a really important point here because people will have a way that their minds will loop just like the inflammation gets stuck in the loop. The mind can get stuck in a loop. Now, it could be that it's just mental patterning and it's the way that the mind has been trained, that we have trained our minds, right? To think a certain thought, maybe it even gives us comfort in some way to think these thoughts. So I work on patients to help calm their minds as well, I might give them cranial psychotherapy or teach the meditation techniques, grounding techniques. But another thing that's important is that a lot of patients might have OCD or anxiety or depression as a result of infections and toxins. So sometimes we're not able to get the mind under appropriate control until we treat the infections and the toxins. And so what do we do for that person? We just give them a lot of treatments to calm them down. It might be certain IVs, it might be certain supplements, maybe body work or acupuncture. And just calm the system down. And of course, those thoughts, the OCD, the anxiety, they'll bubble up, but it it'll happen, but we notice it coming back down again, treat, and then that helps change the patterning.



**Wendie Trubow, M.D.**

It's such a great point 'cause I always say to people, you know, 80% of the time, if we're on the right track, you're gonna start getting better. And it's those times that you don't respond that indicate that there's probably a toxin or infection that we've not yet addressed or covered. And so, the typical... A lot of people will respond to fixing the gut, fixing the adrenals, but if you don't, that's the time you go, "Oh, I probably have a toxin," probably have multiple toxins because it's smoke and fire, you know, where there's one, there's often others because the innate issue with detox is often genetic and liver function. And so if you can get rid of metals, you probably also have a hard time with other toxins, like the mycotoxins or the environmental. So it all... Or the chemicals, it all kind of starts to make sense.

**Nafysa Parpia, N.D.**

Right, I like to look at their genes of detoxification and match that with their toxin load. And very often I'm gonna see that they have a high load of toxins and they have a lot of mutations in their genes of detoxification. They're just not able, right? To detox. Yeah, yeah.

**Wendie Trubow, M.D.**

I always say to my patients, we're in this together, I'm loyal to my toxins too.

**Nafysa Parpia, N.D.**

Right.

**Wendie Trubow, M.D.**

Like I've sort of rolled out the welcome mat and made them nice and comfy and they don't wanna leave, they love me.

**Nafysa Parpia, N.D.**

Exactly. They don't wanna leave, so we have to let them off very, very gently, very slowly. Some people at a much slower process, some people, it can be a more regular pace, but a lot of my patients, not at the beginning, it's gotta be slow. Sometimes we



have to calm the nervous system first, work on the thought patterns first and then work on mass cells, work on inflammation more, maybe give some peptides and then we detox, then we kill infection. And I'm never gonna kill infections until I've begun detox first, because as we're killing infections, they release toxins, they release biotoxins and mycotoxins and parasites hang onto our metals. So then we kill parasites, they're gonna release metals. So now imagine, you know, patient-- I wanna start killing the infection now. And I say, wait a second, you've got too much, too many toxicants in your system. I'm gonna make you more toxic and more inflamed if start killing now. Not now . Okay, you know.

**Wendie Trubow, M.D.**

But it's so impactful to deal with the toxins and toxicants, it's so impactful, so people start to feel better.

**Nafysa Parpia, N.D.**

Right.

**Wendie Trubow, M.D.**

Which is great because--

**Nafysa Parpia, N.D.**

Yeah. And they're more able to handle killing off infections. A lot of times, if we try to kill infections before we've appropriately detoxed, it doesn't work or it backfires, people become worse. So there's an appropriate order to follow.

**Wendie Trubow, M.D.**

Yeah.

**Nafysa Parpia, N.D.**

Yeah.

**Wendie Trubow, M.D.**

Totally agreed.



**Nafysa Parpia, N.D.**

Yeah, yeah. So the link between persistent infections and environmental toxicants, tell me more about what you see, Wendie, on that.

**Wendie Trubow, M.D.**

I mean, I think it's so clear. So what happens in that state of inflammation that we talked about where there's the inflammation, the immune system is compromised and then the body essentially doesn't go down the right path or it goes... It doesn't understand where it's supposed to go and how it's supposed to work. So often what we're seeing is patients with mycotoxins, metals, chemicals, herbicides, pesticides, insecticides, this creates such a state for people that they can't then fight off the typical cold. And so they'll say, "Oh God, I'm always sick, I'm always sick."

**Nafysa Parpia, N.D.**

Right.

**Wendie Trubow, M.D.**

You know, if someone eight streets away gets sick, guess what? I get it too. And I'm like, "Oh, well, we gotta fix that."

**Nafysa Parpia, N.D.**

Right.

**Wendie Trubow, M.D.**

And again, we're gonna fix the adrenals, fix the gut, make sure the minerals, nutrients, the mitochondria, really sort of love and cuddle the system.

**Nafysa Parpia, N.D.**

Right, exactly.

**Wendie Trubow, M.D.**

Like TLC for the body.



**Nafysa Parpia, N.D.**

Yes.

**Wendie Trubow, M.D.**

The inner workings and then start to peel away. And I think it's important to note that there's a lot of ways to remove toxins from your body and it doesn't have to be all done at once. It's actually very meaningful to... I found it very meaningful to pick one thing and do it well because it can look like you're at the foot of a 50,000 foot mountain that's sheer in terms of its ability to scale and you can't do that. And so it's very meaningful to pick the pick something. And now this is where it gets into what is your clinical... What's happening? You know, if you've lost all the hair in your body, then I'm gonna go more for metals. But if you've got a really reactive body, you have asthma or you have mass cell activation, or you have lots of rashes, I'm gonna lean towards the mycotoxins if they're both present. And so it's prioritizing based on what your body's telling us, but it's often very impactful and meaningful to work on just one thing and do it well, as opposed to trying to spread the resources and attention over we have to do everything at once. 'Cause not everyone can have the resources, time, energy, and focus to be able to address multiple paths of toxins and toxicants at the same time.

**Nafysa Parpia, N.D.**

Right, or it might rotate--

**Wendie Trubow, M.D.**

And it's okay.

**Nafysa Parpia, N.D.**

Yeah, it might rotate. So we'll do, you know, a month of mycotoxins and then a month of metals. The good thing with mycotoxins and other chemicals is kind of like a two for one. And a lot of the times what we're pulling out the myco... How we're detoxing mycotoxins also also helps the detox. Other--



**Wendie Trubow, M.D.**

They say they synergize. They just--

**Nafysa Parpia, N.D.**

They do.

**Wendie Trubow, M.D.**

They love each other, they synergize.

**Nafysa Parpia, N.D.**

Yes, they do, yeah, they sure do.

**Wendie Trubow, M.D.**

We say to people, all detox is good detox in the sense that everything helps. So if someone says to me, "All I can do is a quarter tab of chlorella, is that okay?" I'm like, yes. You know, and people have it in their mind. I say to them, "Look, the dosing that we're creating is the standard dosing, but you're a hypersensitive person. So for you, you're gonna react at a much lower dose and it's working."

**Nafysa Parpia, N.D.**

Exactly.

**Wendie Trubow, M.D.**

So remember it's working.

**Nafysa Parpia, N.D.**

Exactly, that's for you, yeah.

**Wendie Trubow, M.D.**

Right.





**Nafysa Parpia, N.D.**

Yeah, because a lot of times, if we give somebody a standard dose, it just overwhelms their system or--

**Wendie Trubow, M.D.**

Yes, yes. So it's a guidepost. The standard dose is a guidepost, but it's not the holy grail. And so we really do then need to say, "Okay, what's working for you." And if you're reacting, it means it's working.

**Nafysa Parpia, N.D.**

Right.

**Wendie Trubow, M.D.**

So this is good. You don't have to get to the standard dose, you're good.

**Nafysa Parpia, N.D.**

Exactly.

**Wendie Trubow, M.D.**

I'm happy for you.

**Nafysa Parpia, N.D.**

Right, let's talk a bit about testing. What testing do you like to use?

**Wendie Trubow, M.D.**

I love this question. Brand names okay?

**Nafysa Parpia, N.D.**

Absolutely.



**Wendie Trubow, M.D.**

So it depends whether you have Medicare or not. If you have Medicare for mycotoxins, we do the real time labs, which is... Otherwise it's 799, which a lot of people don't wanna pay if they don't have Medicare, but Medicare covers that. And then for people who have standard insurance, we're using Great Plains Laboratory. And on the Great Plains testing, we're doing the mycotoxins, the GPL talks, which is what I'll call other, that's the plastics, the styrene, the VOCs, the beauty products, the phthalates, all of that, as well as the glyphosate and insecticides herbicides. So that's great 'cause both the RealTime and the Great Plain are urine tests. And so you can get a lot of data off of one tiny little tube of urine, it's like 15 ml.

**Nafysa Parpia, N.D.**

Right, it's not the same tests I use as well. Although for the Great Plains test, I'm also using the organic acid test.

**Wendie Trubow, M.D.**

Yeah.

**Nafysa Parpia, N.D.**

Which is--

**Wendie Trubow, M.D.**

We're doing that on a separate test, but you can, you have to do the test.

**Nafysa Parpia, N.D.**

You can just with that same urine sample. So I just say, all right, just collect your urine for all of them.

**Wendie Trubow, M.D.**

So that's great. And then for the metals we're using Doctors Data.



**Nafysa Parpia, N.D.**

Me too.

**Wendie Trubow, M.D.**

And how we approach it is... Unless someone's already had a baseline test done or has a history of metals, what we're doing is a baseline test, which is just get up and pee and then it's sort of timing wise, it works. You've emptied your bladder. So you take some DMSA for provocation and then collect your urine for the next six hours. And that whole thing with the DMSA tabs and the two tests is I think 174, so that's not crazy expensive.

**Nafysa Parpia, N.D.**

Right.

**Wendie Trubow, M.D.**

So that's... Those are my favorite. And then one nuanced test that I don't use that often, but I probably should more depending on whether people have fillings is the Quicksilver Tri-Test.

**Nafysa Parpia, N.D.**

Right.

**Wendie Trubow, M.D.**

And I'll always say doctors are terrible patients. And this, our book came about because of my journey. And I... Looking back, I totally should have done the Tri-Test on myself because I have mercury fillings. It would've been impactful to know almost three years ago that, oh yeah, those are actually making a difference. And so, I've gotten to that information by backing into it because I can't get rid of my mercury and I have these fillings and they are continuing to off gas.

**Nafysa Parpia, N.D.**

Do you have a biological dentist that you're working with?



**Wendie Trubow, M.D.**

I do, yeah, I love her to pieces, she's... I didn't wanna get them out 'cause I didn't wanna crack the teeth, then I was reluctant. You know, I had all this noise. I'm human, I had noise in my brain about--

**Nafysa Parpia, N.D.**

Of course you're human, yeah .

**Wendie Trubow, M.D.**

It's gonna be traumatic, they're gonna release the mercury and it's not really having that much anyway, there was a lot of things I said to myself and then she said to me, "You're completely wrong." She's awesome, her name is Yuko and she's amazing and she's in Boston. And she said to me, "It's really your thought process is not accurate and those need to come out." I was like, okay, all right, doc.

**Nafysa Parpia, N.D.**

See, this is an example of how we are our own worst patients, right?

**Wendie Trubow, M.D.**

Doctors are terrible patients.

**Nafysa Parpia, N.D.**

We are.

**Wendie Trubow, M.D.**

Yeah. Don't try this at home, don't do what I did.

**Nafysa Parpia, N.D.**

Yeah, you wanna get them removed. I took a long time to get mine removed as well. I had mine removed by a dear friend of mine, who's a biological dentist here named Dr. Mary Ellen Chalmers. And actually, we have an oral surgeon joining our clinic. His name is Dr. Alireza Panahpour. It's gonna be amazing because he--



**Wendie Trubow, M.D.**

I'm so jealous.

**Nafysa Parpia, N.D.**

Yeah, you can send your patients to him over here. He sees patients from all over the country.

**Wendie Trubow, M.D.**

That's amazing.

**Nafysa Parpia, N.D.**

Because often there's infections underneath root canals or where wisdom teeth have been pulled and that causes more inflammation. So the dental piece is very important. Yeah, so I also like to measure people's metals unprovoked as well. So just through lab core, you know, just straight up you're in blood just to see what the acute exposure levels look like as well. And then--

**Wendie Trubow, M.D.**

I've never had a patient with an acute exposure in terms of like, that was timely enough to measure, you know, but I'm always curious about what happens before you take out the mercury fillings and in the blood. What happens after? I think that's a great study. I don't have the data on that, but--

**Nafysa Parpia, N.D.**

Yeah, I'm seeing a lot of mercury, lead, arsenic and aluminum just in people's blood and in their urine. Just straight up from LabCorp.

**Wendie Trubow, M.D.**

Yeah, and I think the Genova has a great test that will look at toxin exposure and mitochondrial function and the NutrEval test will also give an insight into, is there all... Is there presence of any or all of those metals in the blood also? So that's another



nice way that, you know, there's... You can do it via LabCorp and then you can also do it, the Genova test will do that.

**Nafysa Parpia, N.D.**

Yeah, that's great.

**Wendie Trubow, M.D.**

Yeah. I like to test them provoked and unprovoked. Doctor's Data also has a water contaminant test. The patient just orders it themselves, it gives so much insight into that 'cause patients are like, "I have high mercury, but I'm not eating fish. I have high arsenic, why?" Well, let's let's check your drinking water.

**Nafysa Parpia, N.D.**

Yeah, yeah, always. But it's everywhere, it's ubiquitous. And so there's hope, there is hope.

**Wendie Trubow, M.D.**

100%.

**Nafysa Parpia, N.D.**

We've been telling our listeners all out the issue, right? But I think it's really important that they hear from us about treatment. Yeah, you know, we've been--

**Wendie Trubow, M.D.**

Yeah, there's hope.

**Nafysa Parpia, N.D.**

We've been talking about treatment as well in the middle of this, but I just want everybody listen here to know that we've been talking about diagnostics, we've been talking about what we've been finding and how it affects your health in general, your immune system, your hormonal system. And so why we wanna pull these out? We understand them, but just know that we have methods to pull these out. And



Wendie, you and I should do a whole nother seminar on that, on how we detox 'cause that deserves--

**Wendie Trubow, M.D.**

Yes.

**Nafysa Parpia, N.D.**

That deserves hours, hours.

**Wendie Trubow, M.D.**

Huge. I mean, people are like, "Summarize your detox." And I was like, there's a lot.

**Nafysa Parpia, N.D.**

There's a lot there.

**Wendie Trubow, M.D.**

And the more we do, the more we find like, "Oh, we like that product and let's use that, and there's some crossover." I mean, there's just so many options for products. So it's fantastic because we're really, I would say we're really privileged to be doing this now as opposed to... Even 10 years ago, I think that the technology and the approach wasn't as refined and as savvy, it just wasn't as good.

**Nafysa Parpia, N.D.**

It's true, it's true. So we have all this technology to test you and technology to treat you.

**Wendie Trubow, M.D.**

Yeah.

**Nafysa Parpia, N.D.**

Yeah, yeah. But just know we're, we're gonna be supporting your organs of eliminate, we're gonna be supporting your cofactors for detoxification, we're gonna be giving



you binders to help bind the toxins. That's just like a five second overview of how we detox you. But there's many, many ways by which to do it and it's all personal.

**Wendie Trubow, M.D.**

Yeah, it really is. It's it's personal to what your body eats.

**Nafysa Parpia, N.D.**

Yeah, exactly. Well, thank you so much, Wendie. Is there anything else that you wanna share?

**Wendie Trubow, M.D.**

Oh my goodness, so much, Nafysa, right? This has been great. I would say that... What would I say? I would say, you know, don't give up, your symptoms are because you're depressed, you're probably depressed because of your symptoms.

**Nafysa Parpia, N.D.**

Exactly.

**Wendie Trubow, M.D.**

And don't give up, work with a functional medicine provider and ref... See, someone said to me, is this normal? I said, no, I refuse to accept that we're meant to just fail over time, I reject that.

**Nafysa Parpia, N.D.**

Exactly.

**Wendie Trubow, M.D.**

So I invite you to reject the conventional wisdom that you're meant to get worse and worse over the next 10 years. I reject that.

**Nafysa Parpia, N.D.**

Yes, I reject that too. And also that you're just aging.





**Wendie Trubow, M.D.**

Right.

**Nafysa Parpia, N.D.**

No.

**Wendie Trubow, M.D.**

I'm just getting old.

**Nafysa Parpia, N.D.**

No.

**Wendie Trubow, M.D.**

Nope.

**Nafysa Parpia, N.D.**

No. There's a way to turn all of this around and that's what we're here to help you with.

**Wendie Trubow, M.D.**

Yeah, yeah. And don't go it alone. There are tons of communities that you can belong to. So you don't have to do it yourself, feel like you're alone in this and feel like you're just sort of floundering. Join the Facebook groups, join the online communities and work with a provider. It's absolutely fixable.

**Nafysa Parpia, N.D.**

Absolutely, it is. Yes. Well, thank you, again.

**Wendie Trubow, M.D.**

My pleasure.

**Nafysa Parpia, N.D.**

I look forward to working with you, Wendie.



**Wendie Trubow, M.D.**

Yes, totally, Nafysa, thank you.

**Nafysa Parpia, N.D.**

Take care. Bye.

**Wendie Trubow, M.D.**

Bye.

**Nafysa Parpia, N.D.**

Also, before we say goodbye, Wendie, I understand you have a gift that you wanna give the audience. Do tell them about that.

**Wendie Trubow, M.D.**

We do. So I know how it feels to be standing at the foot of that 50,000 foot mountain. That's a sheer cliff on how do you detox your life. And so, because of that process that I've gone through, me and my team have spent many hours putting together a guide for, how do you start to level up around mostly environmental toxins to get them out of your environment? That's your beauty products, that's your... The pans that you use, the furniture you're using, the bed you're sleeping on. Where do you go if you need a new one? So we've put together a full guide and it's meant to be a companion to our book. So the book is "Dirty Girl: Ditch the Toxins, Look Great and Feel Freaking Amazing." And the guide you can get in on our website, it's free. It's at [fivejourneys.com/promo](https://fivejourneys.com/promo). And the five is, so it's [F-I-V-E-J-O-U-R-N-E-Y-S .com/promo](https://F-I-V-E-J-O-U-R-N-E-Y-S.com/promo). And that'll get you... Just put your email in and then you'll get the guide. We normally sell it, but we give it away for you guys.

**Nafysa Parpia, N.D.**

Thank you, Wendie.

**Wendie Trubow, M.D.**

My pleasure.



**MYCOTOXINS AND  
CHRONIC ILLNESS  
SUMMIT**

**Nafysa Parpia, N.D.**

They're gonna love that. Yeah. Thank you, again.

**Wendie Trubow, M.D.**

My pleasure, really. Great to be here. It's such a contribution for people, so thank you.

**Nafysa Parpia, N.D.**

Thank you for being here. We'll talk soon.

**Wendie Trubow, M.D.**

Yes.

**Nafysa Parpia, N.D.**

Bye.