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From "Dis-Ease" to Better Health: Recovering from Lyme Disease and Mold Illness

Matthew Cook, M.D. interviewing
Scott Forsgren FDN-P



Matthew Cook, M.D.

Hi, my name is Dr. Matt Cook and welcome to the Peptide Summit. I'm with Scott Forsgren, who's a functional diagnostic nutrition practitioner. He's a health coach for patients with chronic illness. He's an incredible source of information on Lyme and mold and I think wellness, but wellness for people who I think are struggling with a lot of health challenges and probably with some of the most complex health challenges. And I've known him for years, I found am always to be a source of truth and information and he's helped many of my patients. And that's been a great experience for them. So I'm deeply grateful that you took the time to be with us and welcome to the podcast.

Scott Forsgren FDN-P

Thanks so much. I appreciate the invitation.

Matthew Cook, M.D.

So, I asked before we got on and your answer was so good. I said, oh, pause. I gotta share that with people. So tell me how it's going.

Scott Forsgren FDN-P

You know, things are great. The last couple years obviously have been challenging for many of us, but I'm doing well. I'm healthy. I'm super excited about so many of the things that are emerging in this realm, research, new tools and therapeutic interventions. And so I feel very, very hopeful and overall having come through this journey personally, I'm incredibly grateful for where I am today.



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Matthew Cook, M.D.

And then you managed to avoid getting COVID by being relatively sheltered.

Scott Forsgren FDN-P

I have. Yeah. And you know that's a choice. I don't know that it's a choice that I can make for too much longer at the same time. I think when you've been through a health journey like I have with Lyme and mold, I think you value your health a little more. I think for many people that have never lost their health, they don't really have that perspective. And so I definitely have been much more limited in the things that I've done, but I'm still incredibly happy doing the things that I feel passionate about. And so it's definitely not a decision for everyone, but so far, I still am quite healthy and feel like that's been a good decision.

Matthew Cook, M.D.

That's awesome. Tell maybe just for background, tell us your story a little bit, just to kinda maybe a little insight.

Scott Forsgren FDN-P

Yeah. So my story started in 1996. It's been a long time. Tick bite in Northern California was fine for a few months. And then over the course of a weekend, it was like a flu times a hundred. Everything just kind of spiraled outta control, had never experienced anything like it. At times, I wasn't sure if I was gonna survive it. At times, that would've been okay. Probably the biggest symptom was more neurological, head to toe burning sensations that felt like I had been at the beach and had a terrible sunburn, balance issues, needed to prop myself up to sit up straight or put pillows down one side of the bed so that I didn't feel like I was gonna fall onto the floor while I was sleeping. The list of symptoms just goes on and on. And if I look now at the list of things that can happen with Lyme and mold and all of these things, it makes a lot of sense, but it still took eight years and 45 doctors to get the diagnosis of Lyme and ultimately then moving into looking more into the mold arena so it was a long process. And interestingly, what finally gave me the clue to explore Lyme was a medical doctor that sent me to an acupuncturist to do electrodermal screening. The lady actually worked at an outlet mall and I went and did some testing with her. And her recommendation was to get tested for Borrelia Bartonella Babesia Ehrlichia and I thought it was a little bit too crazy, like after eight years, is this really where I'm gonna find my answer? And lo and behold old, we did do some blood testing.



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Some of them, we had to repeat a couple times, but we ultimately confirmed everything that she was suspecting. And then that led me into the Dietrich Klinghardt realm, and some of his energetic techniques. And, you know, the rest of it, definitely a journey that I feel so incredibly grateful today to be doing really, really well. I still take good care of myself. I still take supplements. I still work on detox. I mean, I'm not going back to the things that I did to mistreat myself before I had this condition. And quite honestly, I think in some ways it was kind of the universe saying, "Hey, you need to prioritize yourself a little more." And so I got that message loud, clear.

Matthew Cook, M.D.

What would be some of those things that would be ways to mistreat yourself that would affect you?

Scott Forsgren FDN-P

Well, at the time when I got sick, I had just moved to California shortly after graduating from college, I was working at a startup. I was working, you know, days, nights, weekends. One of those environments where they had, you know, the free diet sodas and so probably, was drinking 12 aspartame laden diet sodas a day, and just not really taking good care of myself. Too much stress, not a good diet, those types of things definitely added up and kind of, I think, opened the door, probably resulting adrenal for and immune dysregulation and all of those things to ultimately developing a more serious condition.

Matthew Cook, M.D.

Yeah, it's crazy. And this is for all of those people listening, we get marketed things and then a surprising how quickly and easily you can buy into something, you know, and I think potentially the work, if you said that they always had this skit on Overman years ago called "The Worst Person In The World." But if I had the worst product in the world, like a hundred days a year, it would be like diet soda. And I have seen a quite a few people in my career who this is just as a tangent to what we're talking about today, but I've seen many people that had really no cardiac risk factors that drank diet soda that had heart attacks in their fifties and early sixties and also women that were were young. And so then that is one of the things that I always try to talk to people about, but then I echo that sentiment because I also in my own journey and I love that you shared it, ended up getting into being a healthy, and then now I don't do any of those things



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either. But you know, when we were, and when I was in medical school, you know, it was almost like a regular thing that people would do stupid stuff all the time.

Scott Forsgren FDN-P

Yeah, absolutely.

Matthew Cook, M.D.

The and so then you really developed sort of a process for how to think about complex illness, I would say. Yeah. And then started working with people. From a high level perspective, help me in terms of how you put things together. It from just kind of with broad brush stroke, and then we'll kinda get into some of the details.

Scott Forsgren FDN-P

Yeah. You bet. First, I definitely wanna give credit to the many amazing and brilliant mentors that the universe has connected me with over the years. So Deitrich Klinghardt, Dr. Neil Nathans, Simon Yu, Raj Patel. I mean, just some amazing people that I sometimes pinch myself wondering, like, how did I manage to have these people as mentors? So it is, as you mentioned, it's just kind of a way to think about recovering from these conditions. It's not a protocol, it's not a rigid, you must do the steps in this order. Obviously everything should be personalized. And so really my goal was to just put something together that people could then have conversation with their doctor, with their practitioners about maybe some things they hadn't thought about. And so it's, at this point, it's an 11 step kind of framework or model. The first step is supporting detoxification and drainage really to improve the terrain. Step two is looking at the external environment. So mold, EMF exposure, those types of things. How do we create a safe environment that's supportive of the healing process? Step three is sleep. Step four is the mental, emotional contributors. Those things that are traumas or conflicts that could be impacting our health. Step five is looking at the limbic system, the nervous system. How to tone the parasympathetic nervous system in support of healing. Step six is looking at mass cells, inflammation, modulation of the immune system. I actually think the modulation of the immune system is probably more important than killing things. Step seven is looking at hydration, nutrition, the microbiome and the gut. Step eight is a few different things that people should think about, which includes mitochondria, the adrenals, krytopyrroluria, very common in people with chronic Lyme.



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And then hypercoagulation, probably the most overlooked thing in this conversation. Step nine, then getting into the microbial pieces. And there's a whole breakdown in that group of a potential order. Again, that can vary person to person. Step 10 is looking at the dental contributors. So amalgams, root canals. Cavitations are fairly common. And then step 11 is regeneration and restoration. After you've been through this whole process for rarely days or months, usually years or decades, and you've addressed those triggers, what then needs to be repaired in the body. And I know that's an area that you are an expert in and probably know all way more than I do, but I think that's critical as well. We can address the infections as David Jernigan. He kind of thinks of it like termites. And so maybe you've addressed the termites, the bugs, so to speak some of the other factors, but then you still need to repair the structural integrity.

Matthew Cook, M.D.

Okay. That was fantastic. I would totally agree with that sort of as a framework, I didn't know that was your framework, but I love that. And so then interestingly you go through that thing, we could talk about peptides on each and every one that has 10 things, we could talk about supplements. We could talk about IVs. We could talk about regenerative medicine, but as you hear in that story, there was this, there was step eight or nine was like the microbial pieces. But then everything else is kind of systems, immune, modulation, balancing, turning up energy, detoxing, and then basically getting the body working. I always kind of try to say to people that I try to think about the body like a McKinsey consultant would think about, you know, analyzing and putting things together, and then coming up with a roadmap that sort of addresses everything, which is fundamentally what you're talking about. And I totally love that. And it sounds like, and you know, what we do is we try to help people project manage each of those pieces. And it sounds like you're doing the same thing, you know, and when somebody's real toxic, starting out with detoxing drainage really kind of makes a lot of sense. And then kind of working from there. What would be some ways that have you found successful in that category?

Scott Forsgren FDN-P

Yeah. Yeah. I think the detox and drainage piece is really the key to this whole thing. If our terrain is toxic and we have a toxic burden, I think that's when the microbes move in. We could also think about detox and drainage as more of an indirect antimicrobial strategy. So why are things like parasites and candid or candida? Why are those allowed into the body? Some people think because they concentrate heavy metals. So as we're working on detoxification, the terrain then is



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not as supportive of a lot of these things and it makes it a lot easier when we get to needing to address some of the microbial overgrowth. I think the first step here is to minimize all of the incoming sources of toxins. People don't think about things like personal care products, cleaning products, anything with a scent, their air being pure, food being pure, water being pure, those types of things. Breast implants, or other medical implants can be a contributor to toxicity inside the body and to something to think about. So for me, detoxification is really about binders. How do we minimize and tear hepatic, recirculation of toxins? How do we grab onto the toxins that are in the bile and help to maximize the excretion of those through the stool? Otherwise we just have kind of this recycling process. That means that we can have microtoxins and other things that maybe aren't an ongoing exposure, but are still a prior exposure that continue to affect the us. Drainage then, I think of as more supporting the channels of elimination, the emunctories, the liver, the kidneys, the lymphatics.

I love the whole conversation around the extracellular matrix. What can we do to unencumber the matrix? That's a critical piece that's sponge for a lot of these toxins that we think about. Thinking about if someone's constipated, that's not gonna go with healing. So how do we support these channels of elimination? How do we support the gallbladder? Dr. Kelly Halderman talks about phase 2.5 detoxification. So if we're getting toxins into the liver, into the bile, but they're not then moving through the gall bladder into the small intestine to meet up with these binders, in some cases they're getting dumped back into the bloodstream so that whole bile process is really critical as well. You asked about some of the tools. I think a number of great binders for many years, I used and still do like the Takasumi Supreme product from Supreme nutrition. I think that's great.

I love a lot of the bioactive carbons that Dr. Todd Watts has put out through Microbe Formulas or Cellcore Biosciences, and then there's others Beyond Balance has some, BioPure has some great ones, things like Zeolite, bentonite clay. I think bentonite clay has a bigger role than maybe we recognize, particularly in the mold realm and also in the realm of microplastics, which is another area that I think needs more exploration and is really just starting to get some attention. If we're consuming a credit card size amount of plastic every week, that's significant over time. In the drainage realm, I really think more about homeopathy here as kind of the primary way to explore this. So whether it's energetics or pacana or Desbio, I think they have lots of fantastic tools that can really help support from a German biological medicine perspective, support the channels of elimination. We can use herbs. I think combining the two is great. So things like milk thistle or



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dandelion for the liver. Solidago for the kidneys, red root for the lymphatics, for example, can be fantastic. Trace minerals, I think are important if we don't have the right minerals in our body, that can be a reason that the body tends to hold on to more of these heavy metals. So really supporting the body with minerals. I've got some heton minerals in my water here and really looking at what can we do then. Nice. What can we do to really provide the body what it needs so that it doesn't need to hold on to some of these toxicants. Movement is important. Just walking is much better than not getting some movement. We need to keep that lymphatic system moving. Things like coffee enemas. Those were huge in my journey. There were times I don't know how I would've gotten through the day without them from an inflammation and pain perspective, they were phenomenal. Colon hydrotherapy, some people like the ionic foot baths. That's a big Dr. Klinghardt thing, castor oil packs, oil pulling, liver gallbladder flushes with the caution that I think they should be medically supervised. I think some people are not gonna do so well with those, and it's not something to do on your own. And then saunas can be great as well. Again, I think people have to be careful about the timing with saunas, for example, if they're not sweating, if they're already adrenally compromised, you may want to do that once you have a few more of these foundational things in place. We think of saunas leading to sweating out of toxins, which is true, but at the same time, we're potentially mobilizing toxins inside the body that then have to be excreted or they are redistributed. And so I think sauna can be great, but we have to do some work before we jump into sauna in most cases. So those are the things that I think about for detox and drainage.

Matthew Cook, M.D.

Okay. So then that's a 100% I'm gonna keep going, but then I'll just unpack a couple things that you said, because then that's interesting for as toxins build up and kind of accumulate in our body, they sort of, they have this ability to disrupt. They can disrupt neurological function, they can disrupt immune function. And so then you said this term, just so people understand enterohepatic circulation. We take all those toxins in our liver and we push 'em into the gut, but then sometimes people who are real toxic, that it goes down the a little bit, a couple blocks in the gut and then gets reabsorbed back into the body. And then it has to go back to the liver. And so we have this little circulation where we're just moving toxins around, but never getting them outta of the body. And so then all of these binders basically, can catch onto the toxins. And some of those might be things like a metal and that metal could be from your tooth, or it could be from salmon or other, you know, tuna that you were eating or things like clay, or things like mold or things like other biotoxins like the plastic. And so then having a diversity of different things



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that you can take is you, the combined onto these things then pull them out of the body, I think is super helpful. It's so great that you talked about the homeopathy, because I think that, those are subtle things that tend to have very minimal side effects that can be quite helpful for some people. And then figuring out detox, lymphatic stuff, whether with move or light touch, or we have energetic things like hydra masks that we think are great for that. And then, you know, one tidbit that I found that I think is helpful that, and I think I echo what you said about the sauna is, and then I started doing this myself. I will make a drink that is that either the Takesumi Supreme or then I'll use Chris Shades Ultra Binder from Quick silver, and then I'll put a little lemon in it and a little quinton, and then I'll drink that as a drink when I go in the sauna, which I did today. And so then my idea is that I've got a little bit of a binder that I take when I take the sauna. And then just because as I told the person I was talking to this morning, I said, if I could only, we were only gonna do one thing, I said, I would have you do fire and ice. And so I would have you take the sauna and then do the cold plunge every day. And I find the combination of those two things, generally I do that. And I basically feel kind of perfect like now. I feel, and it's kind of me amazing, and it's interesting. I try to have people build up the time, but I've got a bunch of people in my life that I would call warm people that do not like cold. And I onboarded them to this stuff and it kind of changed their life. They love it now.

Scott Forsgren FDN-P

Nice, nice.

Matthew Cook, M.D.

So love that. The home, I love that you said thing about the home. Things within smells are kind of big immune triggers for a lot of patients with these significant things. And I did a thing with Fran Dresher this fall. It is a huge deal to detox the house, but then knowing that that's just something that you're gonna project manage and kind of operationalize, I think that's important.

Scott Forsgren FDN-P

Yeah, I mean, it's certainly those things that we talked about earlier at the same time, the two biggest things in this realm for me are water damaged building exposure, which we kind of generalize and say mold. The reality is there's a lot more than mold there. There's endotoxins, there's bacteria like actinomyces for example, but if we're getting exposure to our kryptonite on a daily basis, we're not ever going to, again, regain our superhero status. It's really important that



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our environment is supportive of our healing. I've often said that our internal environment is probably never going to be healthier than our external environment. So first looking at what can we do from an environmental exploration perspective? There are no perfect tests. We can look at things like the ERMI, or Environmental Relative Moldiness Index from Micrometrics or enviralbiomics. We could then potentially add some mold plates from ImmunoLytics. If someone's not constrained by resources, ideally getting a professional, indoor environmental professional, an IEP. There's a good list of them at the ICI website, or ISEAI.org that have been really vetted that work with people with these kinds of conditions. You don't wanna just find someone that tests for mold and says, "Oh, everything's great." Because the reality is that it takes a higher bar for those of us with these conditions. Then once we do that testing, we can also then look at the mycotoxin burden in the body. So realtime labs is probably my favorite in that realm. Great Plains offers a panel there.

Vibrant offers a panel that many like as well. But these tests are debated, but I do find them very helpful. If you have high levels of microtoxins coming out of your system, why? It could be the environment, it could be that you're colonized with some of these organisms that are producing microtoxins in the body. It could be that you're now supporting detoxification and these tests have really, really gone much higher, which actually is something to celebrate, not something to fear. And so you have to kind of use some skill in kind of ascertaining what the test is telling you, but if there's still mycotoxins coming out in the system with the rare exception of low level mycotoxins from certain food exposures, I think that's something that we need to keep on exploring, looking at the environment, either remediating, potentially moving it's debated. I know some people feel that you can't get well in the same environment that you became ill in. And I think that is true for some people.

At the same time, if 50 to 90% of buildings in this country have some degree of mold, if it's not a significant issue, sometimes fixing a known problem is going to be more achievable than trading one problem for another. And so that's where working closely with an IEP can be really helpful. Air filters can be great, but they're really not gonna solve the problem. You have to much like a tumor in a cancer, you have to remove the tumor before you start doing other things. And so I do like them. I do have them. I have two of them in the room that I'm standing in now. At the same time, getting rid of that exposure is critical. And so coming back then to what else do we do? Binders are important in this realm. There are some products that are a little more mold and mycotoxin specific, like the biotoxin binder from Cellcore for example, Promyco from Beyond



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Balance, the Takesumi can be helpful here as well, Cholestyramine and Well Call for some people. I don't find a lot of people tolerate Cholestyramine incredibly well. So sometimes smaller amounts of Cholestyramine mixing that or pairing that with other natural binders can make it a little more tolerable. And then looking also at, you know, what are we doing to make sure that's just not an ongoing exposure? So we are talking here about peptides. A part of that conversation could be VIP in some people. So if someone's dealing with chronic inflammatory response syndrome, Dr. Shoemakers talked about VIP or vasoactive intestinal peptide can be helpful, but a lot of times you need to really do some things first, get rid of the source of the exposure, deal with some other bacterial overgrowth in the sinuses, potentially those types of things. And then once we deal with the mold piece, looking at the electromagnetic field exposure, and sadly, this is really increasing. I mean, I've actually, for the first time in the last week, saw two 5g towers, you know, in the bay area here.

And so they're getting rolled out from what I can tell, but the EMFs are a big issue. I think they keep our cells in more of a sympathetic dominant type mode where we're not then able to efficiently detoxify. So turning off wifi, getting rid of cordless phones, sleeping in a Faraday cage, which sounds crazy, but is something that I've done for the last 15 plus years. And I think is something that I definitely think can be helpful for many people. Getting either a demand switch or flipping the circuit breaker to your sleep location, where you might be getting influenced by dirty electricity, for example. So all of those things can be really helpful in creating an environment that's gonna be more in harmony with the healing process. It's also interesting that Dr. Klinghardt talks about the effect of EMFs on mold and their production of microtoxin.

So why is mold illness such a big issue now when it wasn't years ago? Sure, building standards and tighter buildings and energy efficiency and those types of things, but it's also very likely that the exponential increase in man-made electromagnetic fields is also contributing to some of these mold issues that we're seeing. So working through the mold piece, working through EMF related issues, the EMF sensitivity, or electromagnetic hypersensitivity syndrome that many people may experience, there is a connection there to heavy metals as well. So many people are more sensitive to electromagnetic fields if they're more metal toxic. So that detoxification focus that we talked about in step one is also helping to support the body in being less reactive to some of these things. And so really this step again, is just creating that extra environment that is going to support and facilitate the healing process as much as possible.



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Matthew Cook, M.D.

Okay. That was a good one. How do you do the Faraday cage on the bed?

Scott Forsgren FDN-P

There's a number of different types of reflective silver lined cloth that you can use. So most of the companies Less EMF has them. Dr. Klinghardt uses a place called littletreegroup.com. So essentially it's a cloth that looks like a mosquito net, and it goes down the sides of the bed, but also over the top and underneath the bottom, in most cases, if you're on the ground floor, the bottom may not be as important, but it's amazing. The difference you see when you take an EMF meter stand right outside the bed. It's quite high. When I did this many years ago, go inside, drop it down, measure again, and it was well over a 98 or 99% reduction in measurable EMFs once you drop that mosquito netting down. So it's a pretty straightforward thing to implement. Not cheap. They probably cost about a thousand dollars, but spread that out over 15 years. And I think it was a good investment.

Matthew Cook, M.D.

Okay. That's a good one. So then let me, you're such a wealth of information with every question. Every question could be a whole podcast. Can I tell 'em about VIP for a second?

Scott Forsgren FDN-P

Yeah, please do.

Matthew Cook, M.D.

But then that's gonna be a very useful and sort of interesting sort of concept because the one theory about mold is that mold as a mycotoxin accumulates either potentially because you have a you're colonized or exposure, but particularly to these water damaged buildings. And then what you said, I think is kind of a 100% right on track in terms of like this current thought that, the CIRS, or chronic inflammatory response syndrome, is this inflammatory response that the body has, that is in reaction or response to some combination of mycotoxins plus some bacterial infections like tenomycies and probably some gram negative rods. And then that has an effect of causing the brain at a genetic level to kind of go into a fight or flight state. And that's probably because that probably lowers a protein called MSH in the brain and but then what happens as a result of this is this the brain at a almost like a genetic level goes into an inflammatory response state, hence the name and so it kind of is printing inflammatory genes because the idea is, oh



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man, this is a bad situation and then we have to deal with this inflammation. Now, in many cases, the response, the cure may be worse than the disease. The response, the inflammatory response is so profound and it makes people feel so bad that it's actually potentially worse than actually what's happening from the mycotoxin. And so then what, and so when I first met you, and then when I first was meeting a lot of people with Lyme and mold years and years ago, the idea was is that everybody was trying to get to this point when they could take this peptide called VIP. And the reason being this is that VIP regulated what they call the transcriptome and it changed at a genetic level. It would go into the DNA and then changed them from printing inflamed kind of an inflammatory response genes to reg to non and a non-inflammatory state. And there's this test that they do called the genie test.

That is a as an attempt to assess that. And as you think about it, as we're walking around in the world, what we do is we're reacting to the world. And one of the reactions is we decide which genes to print, just like, based on it might be hot. We might put some warm jeans on. So it's at a genetic level where reacting like that. Turns out that there's a whole category of peptides that are kind of bio regulators, kinda like VIP, but VIP if you give it too early, just exactly like you said, people can have a lot of troubles. The bio regulator peptides and the immune ones are crystogen, thymogen and violon. Vilon is for the spleen thymus, which is also kind of a detox organ, the spleen. You can use those and there are injectable and oral versions. They're so small, just a few amino acids that you can absorb them orally. And then the neurological ones pinealon, cortigon and pantalon. So those six, and then you always, when you're taking bio regulators, you always take Vesigen. So Vesigen plus the immune or Vesigen plus the neurological, and we often will do Cargiogen.

So then that group is, will regulate at a genetic level sort of which genes are being printed. And what we found is that for this population, we can do, we use those peptides as an alternative to VIP and then much before. And then interestingly, I tend to see mass cell symptoms, POTS, and other neurological symptoms will start to get better and I'll have a percentage of people who say, "Oh, I've never had POTS since you put me on bio regulators." Now, this is not a 100%, but it's definitely an important trend for us. And so then how, and the reason that I like to talk to people sometimes who don't necessarily do a lot of peptides, but who've been thinking deeply about complex illness for a long time, like yourself, is we're going through a framework. And this would be a very good framework because essentially as soon as he started talking, I started taking notes because that's basically a robust and complete approach to thinking about these issues.



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And then the peptide part can be kind of a profoundly helpful part. And then that can be a great place to start either orally or injectably with something that starts to regulate. And that's kind of at a genetic level, but then potentially the most important thing you can do for complex illness is begin to regulate the biological systems back into balance and particularly immunology, neurology, cardiology, and vascular.

Scott Forsgren FDN-P

Yeah, and I love what you said there about the spleen, because one of my observations has been in Lyme coinfections like Bartonella and Babesia that the spleen definitely is impacted by them. And so providing that support could be very significant.

Matthew Cook, M.D.

So then I think with sleep next.

Scott Forsgren FDN-P

Yeah, so sleep is next and I'll kind of truncate this a little bit, but there, you know, there's lots of different supplements and things that can be great. Melatonin, one of my, I say, it's my drug of choice. I love my melatonin. Panochiol is another, but something times with sleep, it's looking at the EMF exposure. That can be a huge trigger for insomnia. It's looking at maybe using a CGM or continuous glucose monitor. What's your blood sugar? Is it dipping down at night so that your body's producing cortisol to bring your blood sugar back up, but then your wide awake? What's your oxygen saturation? Incline bed therapy is something that I've used and find helpful. Weighted blankets for some people. Brain tap, which is a device that can be really helpful for getting people into a parasympathetic nervous system state. The Apollo neuroband is another that some people use in that realm. So I personally, sorry, what'd you say?

Matthew Cook, M.D.

Oh, just the guy that made that he's a friend of mine.

Scott Forsgren FDN-P

Oh yeah, yeah, yeah, yeah. Awesome. Yeah. And so I really like to use the aura ring in airplane mode as a tool for changing things in the sleep environment and seeing what patterns I can observe. I found it very, very helpful over time. And then another piece of the whole sleep conversation is histamine and neuro inflammation. So sometimes working with some of the



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mass cell players and mass cell stabilizers antihistamines can be really helpful. I know in the peptide realm, there's probably a number of them that DSIP for example, are deep sleep inducing peptide. So anything we can do in this realm of sleep is really going to potentiate or exponentially influence our healing process. And so that's why it's really critical and is at the beginning of this whole process.

Matthew Cook, M.D.

Okay. That's a good one. The you know, a friend of mine said, John Franois said, there's only two things that you need to do. He goes, manage inflammation and manage glucose. But I could add, I could say, make turn, say three things and manage sleep, because if you can do those, then basically, and you can sleep, you're gonna be okay. And I love using the aura ring also myself.

Scott Forsgren FDN-P

Yeah.

Matthew Cook, M.D.

It's interesting DSIP can be helpful for some, I find it a little more helpful for like jet lag type of stuff as a short term piece. The epitalon can be helpful for resetting circadian architecture and the for, from a peptide perspective we're liking to do with that as a milligram a day as for two or three or four months in a row at low kind of a microdose. Interestingly, traditionally, people were doing 10 milligrams a day, twice a year for epitalon as kind of, and that was based on some of the Russian literature that had been done. For people who were not sleeping and really struggling, I will often have them do a 10 milligram a day, 10 day protocol to get started, and then often I had four or five people this weekend tell me, oh my God, I've been, it's been chaos and stress and catastrophe, and I haven't slept and then we did the epitalon and they slept and then I convert them from 10 milligrams a day after 10 days to a milligram a day for a couple months. And then in parallel to that doing dionne and magnesium at night and melatonin. And then as you said, sleep hacks, you know, I love the Faraday cage idea. You know, I love the EMF at night. And so then suddenly it is got back to kinda being a McKinsey consultant and then figuring out everything that's involved in there and kind of project managing that stuff. But then if you do that, you feel better, you detox better, you sleep better. And then these are all things that help immunology and biology start to overall work better. And then, and that is at least half of the game in complex wellness I think.



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Scott Forsgren FDN-P

Totally agree. Absolutely.

Matthew Cook, M.D.

The limbic and kind of neural system, nervous system, where do you wanna take me?

Scott Forsgren FDN-P

Yeah, so step four, before we jump into limbic system, step four is really the mental, emotional piece. And I do kind of separate them a little bit because limbic can be entirely physical. It can be an emotional or mental trauma that triggers limbic system impairment. But I think it's important to separate them just because some people have some adverse thoughts about exploring the limbic system, because they think you're saying it's all in their head again. And so the mental, emotional piece, I think there's two things that could happen. One, people have had some emotional traumas and conflicts that set the stage for illness, impacted their adrenals, their immune system, and so on. Or you could have had such invalidation by the medical community being told that your physical condition is all in your head, that creates a trauma for you. And so either way, I think that's something that we need to explore. It doesn't mean that the illness is in our head, but it does mean that mental, emotional health, does play a role in the development of these chronic conditions.

And so in the Lyme community, my observation has been that a pattern is a type a overachiever perfectionist, sometimes not feeling deeply like they deserve to be well. I joke that I used to be a type A plus personality, and now I'm a recovering type A minus personality, probably will never be a type B personality. But doing everything we can in this realm is really critical. And if we look at Dr. Klinghardt's five levels of healing model, the bottom of the pyramid is the physical biochemical interventions. The mental, emotional work is third level work. And so it has much more profound impacts, more powerful shifts that have a downward effect on the physical body as well. So looking at things like EMDR or APN, which is a Dr. Klinghardt applied psychoneurobiology, or his psychokinesiology, EFT emotion code, lots of good tools in that realm. Amy Scher wrote a book that I really like called "How To Heal Yourself When No One Else Can," based on her experience recovering from chronic Lyme, and then ultimately becoming an energy therapy person, working with how to release a lot of these imprints and cellular imprints from various emotional traumas and conflicts on our biology. So then step five is getting into the limbic system. I would say that the limbic system retraining tools as a single tool and not one



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thing is gonna solve all of the problems. But of all the single tools that I've seen over the years, working with tools like DNRS, the dynamic neural retraining system from Annie Hopper or the Gupta program from Asha Gupta. These often make huge shifts. I used to say it was almost miraculous, but then I started seeing people where they were really having miracles, people that were bedridden eating five foods, and three months later, they were traveling with their family out of the country on vacation. I mean, big, big changes for people. So the limbic system is really the anxiety switch or alarm center and it influences the body in many ways, the immune system, the hormonal or endocrine system, the autonomic nervous system, which then cascades into blood pressure, heart rate, breathing, digestion, all of those things. And so the limbic system is critical and the limbic system can also be impacted by inflammation. So sometimes a lot of the things we can do coming back to inflammation, immune modulation play a role as well, but I love the DNRS, the Gupta program type tools.

And what I think about here is at some time, your Lyme infections, your mold, those really were a tiger and your body or your limbic system correctly responded by raising an alarm and responding to that threat. But at some point you've addressed those things. It's no longer a tiger. It's more like the kitten walking outside the window, purring at you and yet your limbic system doesn't see the kitten, it sees the tiger. And so this is a little later in the process because in an ideal world, you have addressed your tigers. And then what you're doing with these tools is you're recalibrating or rebooting the limbic system so that the actual threat is equivalent to the perceived threat. That we're not perceiving something that's more threatening than it actually is. So I'm a huge fan of these tools. I do think there is some value for some people, the ultra ultrasensitive patients that cannot take even a capsule of Takesumi or a tablet of chlorella, for example, without reacting.

Sometimes this is a way to make them less reactive so that you can then start working on that physical level as well. But ultimately you want to address the tigers as much as possible. These are built on a platform of environmental awareness as well. If someone is not in a position, these two systems do take 30 to 60 minutes a day for many months, it is a commitment. I've done DNRS. I found it tremendously helpful. But not everybody's ready for that. So in the limbic system, realm tools like Rrain Tap, which is Dr. Patrick Porter's system can be helpful. Frequency specific microcurrent can be amazing in this realm for supporting the limbic system. The Vagus nerve really supporting that parasympathetic response for rest to digest, detoxify and heal. Heart map is another, even some of the ionic foot baths, how they're in part facilitating detoxification is



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by putting parasympathetic frequencies into the water and the body is made largely of water. And so that has an effect on the overall system. So here, we're really looking at the fact that we're not going to heal when we're in this fight, flight or freeze mode. We really have to calm the limbic system, calm the nervous system and work on supporting parasympathetic tone to maximize our healing process.

Matthew Cook, M.D.

Okay, so then I would agree with, I think just about a 100% of everything you just said. I studied, you know, it's my, the first thing that I did the in my journey was I studied body talk, which was in like 2001, right when I got done with residency. And it kind of opened me up to this pot, this conversation around a polite kinesiology and energy medicine that led me to get like a doctorate of medical Chiang, and go into Chinese medicine and study iverbeta. And so then I ended up spending 10 or 12 years, sort of deeply in that energetic kind of world and have while I was studying biology and biochemistry and all this stuff at the same time. And so I love all of that stuff. And I kind of love those people. And, you know, I think Detrich is another person, Dr. Klinghardt, who has embraced that. And I find it so helpful for a lot of people. The limbic system, you know, I do the stellate ganglion block to sort of reset, fight or flight. And I do a thing called the vagus nerve hydrodissect, and will treat the vagus nerve in a couple different places. And just a funny anecdote, I was in Joshua Tree and we were walking in and then we got turned around and then we were walking back to where we were supposed to be, but we had run outta water, and then we ran into these people and I go, I was like, "Oh, hey, what do you do?" And she goes, "Oh, I work for a company."

And we had been walking around talking about the vagus nerve for like two hours and talking about like autonomic nervous system, which is breaths and relax. So we come up, this lady gives us water full of cucumbers. And I say, "What do you do?" She goes, "Oh, I'm a rep for a rep for a vagus nerve stimulator company." I go, "I know exactly what that is." So then interestingly, there would be frequencies. There would be vibration techniques. There would be electrical techniques. There would be my injection techniques. They're all of these ways. And these are all ways that are basically, we're trying to reboot and reset fight or flight. And the stellate ganglia block just turns fight or flight off as part of the reboot. But interestingly Scott, and I think you're gonna like this one, they've done studies where people with complex illness and mold and Lyme will have decreased blood flow to the brain. And that correlates with patients who have small fiber neuropathy and neuropathic issues peripherally. And so then what these tend to do is reset



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and increase blood flow back to the brain. And then where is that blood flow going when it goes up? What's the first thing that's gonna do? Its gonna hit the limbic system, which is gonna be again to reset basically how people feel and then, you know, out. And so then I would argue with myself, what's the most important thing to do to detox the home and get drainage and detox going, or to try to do some thing, to help somebody feel better so that they would have hope. And then, that hope would be an inspiration that could carry them forward in the journey. And so, I think I love them equally, but I think your sequencing is perfect and correct, because if you don't start to detox them, that hope is never gonna be able to gain a footing. But it's just kinda awesome. I love what you're saying.

Scott Forsgren FDN-P

I love talking to you. I feel like I'm standing outside the door of Toys R Us hearing about all the cool toys and tools inside.

Matthew Cook, M.D.

Oh, that's funny that it's amazing. And, you know, people are, I'm kind of talking about all this stuff and people are sharing information, and I feel that there's going to be an exponential sharing of ideas and I, your ideas and stuff, the tech side, and then what's gonna happen is it's gonna be, you're gonna be able to get these things as if you were just gonna go to a Toys R Us and then, and start to do them. So it's gonna get, I think, easier. What's next? Is that nervous system?

Scott Forsgren FDN-P

Yeah, well, so the nervous system piece was what we just kind of touched on, but the next step is step six. And that's where we get into the mass cell piece, the inflammatory piece and modulation of the immune response. So I think getting healthy is not about killing bugs. I don't think the bug makes the disease. I think it really is, I think it really is that host response to the bug that makes the disease. And so if we have a hyper vigilant hyperactive, overactive, autoimmune responding type immune response, I think that's creating a lot of the symptoms that we think of as coming from the bug, but it's not necessarily the case. And so looking at the fact that much of the inflammatory burden in the body and these conditions is driven by mass cell activation syndrome, by histamine, microglia certainly play a role as well. But if we're talking about the mass cells, these can be triggered by mold, by Lyme, by environmental toxicants, by lots of things, by foods, temperature changes. But one of the things that's really interesting here



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for me is hearing Dr. Theo Theoharides a few years ago, say that mass cells are 10 times more activated in the presence of a cell phone. And as much as I had already heard about these things from Dr. Klinghardt, I stopped and went. Wait a minute. Is that really what he said? And so I think the biggest triggers for mass cell activation are water damaged buildings, parasites, and exposure to EMFs. And I think we're going to eventually understand that the EMFs are playing a bigger role in terms of triggering the mass cells. So what do you do? The first thing that can be very helpful for many people is doing a trial of a low histamine diet. It's not a super easy thing to do, but at a minimum looking at, you know, are you drinking kombucha every day, which is gonna be bad for some of these people. Are you having avocados? Are you eating bone broth? Are you doing lots of fermented foods? At some time in the future it might be a great thing, but if you're histamine bucket is already overflowing, then we wanna get some of those things out.

Once we do that, we can look at some of the mass cell stabilizers and histamine reducers, so quercetin, luteolin, holy basil. I like the NeuroProtek product that Dr. Theo created. I love Ben Lynch's Seeking Health probiotic HistaminX. It's a probiotic blend that helps to degrade histamine. Most probiotics are actually gonna make this problem worse and promote histamine, which is exactly what we don't wanna do. You mentioned Chris Shade earlier. I love his Hista-Aid product from Quick Silver, I think is great. Some people do well with things like katadaphyn or chromalyne. There's lots of tools in this realm, and it really does lead to a difference in how people feel. So coming back to what you were talking about, what can you do to make people feel better dealing with the inflammation, dealing with the immune response, dealing with the mass cells really makes a difference. But at least from my perspective, the mass cell activation is not the core problem. It's kind of like saying you're inflamed.

Well, why do you have mass cell activation? You have to look at why, what are those underlying triggers? And then you need to address or remove the triggers, plug the holes in the roof. If you're thinking about the Bredesen model, pull the nails out of the foot, if you're thinking about the Horowitz model, but you need to figure out not only what can you do to help symptomatically reduce that inflammation, but also address the triggers. In the inflammatory realm, some people do well with some of the pro-resolving mediators, like SPM active, or the gut specific fish oil. I'm not sure about the marketing on that one, but Microbiome Labs has a gut specific fish oil that can help there. And then looking at immune modulation. So low dose naltrexone, I think has a big role, especially right now with a lot of the immune dysregulation from the last couple of years, low dose of immunotherapy looking at Ty Vincent's work, I think



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can be great. Homeopathy can be helpful. I'm particularly excited about some of the work of Dr. Sam Yannick. He's with Cogence Immunology, and he's put together a number of products that now are available under Pure Encapsulations. I think those are great when you're looking at how do you modulate the TH1 and Th2 response. Most people in this realm are TH2 dominant, don't have enough TH1 support. That's also where a lot of these peptides really come into play. In fact, I think the peptides, at least from my perspective, and I'm sure you'll educate me here, but in the immunomodulatory realm, I think that's probably the step where the peptides shine the most looking at thymus and alpha one and thymus and beta four, maybe even KPV for some of the mass cell and histamine issues. So I think peptides play a big role here. And just remembering that getting well is not about boosting the immune system. I think too often people think if I can just boost the immune system, but it's more about modulation, about calming and really creating more integration and tolerance within our microbiome.

Matthew Cook, M.D.

I would, yeah, totally agree with that. And then interestingly, you'll the thymus and beta four is kinda like a key chain with these different active segments. And so some of the fragments are even more, anti-inflammatory like, especially the 17 to 23 and the one to four and the one to four fragment been a super anti-inflammatory. And because they're smaller patients with immune activation like Lyme and mold patients tend to react less to them, but still get quite a good benefit. And then I would a 100% agree with everything you said, and then, you know, one thing is, is that sometimes calming down the gut, it can be helpful in just causing there to be less leaky gut and then less and that will calm down immune activation and mass activation in the gut. Some, I think KPV can be helpful here. BPC can sometimes be helpful here. There's something called larazotide that binds onto zonulin can be helpful here, that people will combine with those.

And so then, an then even, and that's orally and then BPC 157 systemically, you can take to have a gut effect. And then definitely, I think of all of them, the thymosin alpha one probably is the best modulator, but then the bio regulator immune modulators can be sort of superimposed upon that. And the bio regulators from people having a reaction to them are gonna be the least. And so then that can be a great place to start. And so then interestingly, just as people are listening to this often when people have mass cell activation, they'll eat and then the histamine will trigger an immune response where all of a sudden people can get abdominal pain or a diversity of all kinds of unusual symptoms. And, you know, five years ago, I remember nobody knew what this was, and then suddenly they, people started talking about it and there's online communities,



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and all of a sudden, this is something that we began to recognize a lot of patients with complex illness have, and there's probably a diversity of things, kind of mapping onto it. And I think peptides are helpful, but everything that you said is also very helpful. And then it becomes a little bit of a trial and error of managing symptoms with sort of different products that you discussed, and then beginning to kind of regulate and modulate the immune system and the nervous system overall from a systems perspective to actually reset how our overall reactivity so that we don't need to manage symptoms.

Scott Forsgren FDN-P

Totally agree. Beautiful.

Matthew Cook, M.D.

Hydration.

Scott Forsgren FDN-P

Yeah, so step seven, hydration, nutrition, the microbiome and gut health. The hydration piece, I think, it seems straightforward, but the reality is many people with these biotoxin illnesses have low anti-diuretic hormone. They're drinking lots of fluids. They're peeing it all out. They're still cellularly dehydrated. So structuring water, lots of ways you can do that, electrolytes, which I have in my water here. Trace minerals that I have in my other water here. A little bit of sea salt can be a good way to start as well. And then I also like there's a homeopathic tool from Energetics called Rehydration that adding some of that into the water can be nice. There's other waters and things that you can purchase. So quite honestly, I think many of them are on the more expense of side. And so I think just some of these little additions that we can do to our water can make it much more hydrating, thinking then about the gut getting rid of the food trigger. So I think, you know, gluten has to go, I think dairy, at least a one cow dairy is gonna be bad for many people. Sugar's gonna be bad. The high histamine foods that we talked about. So getting those out, but then looking at, you know, what diets and that's where it's very complicated. Everyone's gonna be individual. I think the low histamine diet from many people in this chronic Lyme and mold realm is a good thing to try. If you don't get a great response to it, then maybe that's not gonna be the thing for you, but I've seen it really help a number of people. And then also looking at whatever we're doing nutritionally, are we getting not just gluten free, but still, you know, empty calories, but are we getting nutrient dense nutrition in our routine? And so I will love every morning, starting out with the power shake, I've got high quality protein.



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Some people can use collagen powder. Some people that's gonna be a histamine trigger so that that's gonna vary, a good blend of fiber, some siliuim, phospho lipids, phosphatidylcholine, and all of the blend of the phosphatidylserine and ethanolamine and anostal, and all of those things, some healthy fats, some chia seeds, flax seeds, organic nut milk. I mean, that's made a huge difference in my recovery for regaining muscle and things that I had lost over the years. And then also supporting the microbiome. I'm a huge fan of the MegaSpore Biotic, Kiran Krishnan's work with Microbiome Labs. It seems to be well tolerated in most people with mass cell activation, even in people with CIBO providing those keystone strains to really optimize microbial diversity. It can help with inflammation. It can help with immune modulation. It can help with leaky gut. So lots of things there. I do think BPC 157 has a role here for helping to support intestinal hyperpermeability and healing the lining of the gut so that we're not as reactive to the things that are coming through these hollow spaces. I like the ion gut health product used to be called Restore from Dr. Zack Bush. So lots of things we can do here, but just making sure that we're not forgetting to dial in the hydration and nutrition and that we're supporting the gut, not getting lots of inflammatory foods and doing what we can to support the microbiome.

Matthew Cook, M.D.

A 100%. We're gonna keep going 'cause otherwise we're run outta time. Mitochondria and hypercoagulability.

Scott Forsgren FDN-P

Yeah, so I think the mitochondria scenario that I really have, and maybe I just missed it to some degree, I mean, I knew it's important, but the last couple years I'm really getting how important the mitochondria is. So we really need cellular energy to do detoxification, to really function, to repair. I do like photobiomodulation, red light therapy in this realm. I think that can be helpful. You know, Coq 10, PQQ lots of different types of NAD precursors like NR, MNN, those types of things that can be helpful. One challenge can be that if you're aggressively supporting the mitochondria, we think about this cell danger response model from Dr. Bob Naviaux where extracellular ATP is the danger signal that leads to the body going into this kind of protective hibernative type state. And so I think supporting the mitochondria is important, at the same time, some of these things you don't wanna do too aggressively, if the body's pressing on the brakes, you don't necessarily wanna press the gas too strongly. So the adrenals, that's an issue that people talked about for a long time. Some of the adaptogen products can be great. I think that there was more of a focus on the adrenals. I think now it's tending to shift to the



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mitochondria. How do we really support the energy production factories in the body? I also talk about kryptopyrroluria in this realm. So Dr. Klinghardt was the one that brought this to my attention many, many years ago. If we are peeing out our zinc, peeing out our B vitamins, peeing out some of the other co-factors that are needed to support the immune system, that we don't really have that foundational immune response. And so he says then that the white blood cells become like an army with no bullets. So looking at, at whether or not kryptopyrroluria may be playing a role, it is something again, to go slow. You don't want to be too aggressive in reintroducing zinc that can lead to a release of metals that can trigger mass cells that can make you feel much worse. I'm telling you that from personal experience many years ago and I did it far too quickly. And then the piece that I think is maybe most overlooked in this realm is hypercoagulation. If we have thick blood, which is super common with chronic infections, with heavy metals, with mold exposure with Babesia, we're not then going to get nutrient delivery. We're not gonna get oxygen delivery as efficiently. We're not gonna have waste removal as sufficiently. So looking at things like lumbrokinase or boluoke or nattokinase some people may even need for a short period of time some of the pharmaceuticals like heparin, lovinox, those types of things, but you can do some really good testing in this realm to see. And I think a lot of symptoms people experience, particularly some of the pain related issues can be from this hyper viscus blood. And so few different things here to explore. But I think, I think these are critical ones to not miss.

Matthew Cook, M.D.

The mitochondrial piece, I also sort of echo what you said, because to the extent that you can turn that on and fix that people feel better. And I think infections have a way to steal energy from the mitochondrial pathways. And that's why, what do we, how did we define viral infections for the last 20 years, chronic fatigue syndrome? You know, so, you know, you steal energy, you don't feel good, you know, on the mitochondrial side, Humanin is a mitochondrial peptide that I think somewhat helpful. SS 31 is another peptide that is quite interesting and feel good in a mitochondrial category and probably worth a podcast all by itself. But yeah, the interesting thing is that when you modulate that immune response, then you have a more balanced physiology in your blood vessels and so you don't have things binding onto things that cause that blood to get thicker. You know, one thing that improved viscosity right away when you do a treatment is ozone you know treatment. And then suddenly you begin to find there's all of these other ways to manage that. And for example with digestive enzymes and some of the things you mentioned, totally, I totally a 100% echo that. And then I also echo in this aspect of the journey



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and I think that this is you're a 100% spot on at everything that you've said. And it's an interesting journey in terms of how hard to hit some of these topics. And then when, if you're like us, when you figure out you have a problem, you go, "Oh, let's go all in on this." And so like an example of that would be like when people found out about NAD. And so then, you know, we were doing it a 1000 milligrams of NAD five years ago for addiction people but then if you turn up mitochondrial and detox pathways with NAD on super sick Lyme and mold patients you'll really run into a lot of trouble because they weren't prepared for that detox. And so there's an aspect of kind of like when you're training for a marathon and then, you know, getting through Lyme and mold is kind of like going through a marathon. So you have to build that training detox base and then move to the next level and the next level. And so then adding in things that are gonna reset and turn that engine on, but not doing it too aggressively so that the patient gets so overwhelmed.

Scott Forsgren FDN-P

Absolutely agree. Yeah. Beautiful. I think frequency specific microcurrent by the way, is another beautiful way to support the mitochondrial production of ATP as well. So that's another tool that's fairly high on my list of favorites.

Matthew Cook, M.D.

Yeah. I love that too. That it, when you said it earlier, I was like, and I've done quite a bit of work over the years with it. And then you just said, I thought, oh, you know what? I need to, that's a very good comment. I'm gonna, I have to revisit our conversation on that. The next one was microbial pieces.

Scott Forsgren FDN-P

Yeah. The part that everybody's been probably most people at least wanting to hear about.

Matthew Cook, M.D.

Sorry, we ran outta time. Thank you. We ran outta time for Matt Damon.

Scott Forsgren FDN-P

So, you know, we know now that killing bugs really is not the priority, but I think it is still important. And so the order here can change as well. So I tend to think starting with support for chronic viruses, for endogenous retro viruses. And the reason I put that first is because I think oftentimes those are fairly well supported, are fairly well tolerated. So then thinking about



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parasites, the gut, CIBO, fungus, yeast, mold, colonization, those types of things. Then the lyme and co-infection piece fairly far down that path, and then possibly some biofilm support. I don't think everybody needs biofilm support. Not all biofilms are bad. I think some people do. But if we think about the viruses, I think that EBV, HHV6, Herpes Zoster, a lot of these endogenous retro viruses, I think they play a fairly significant role in the symptom picture that results. And so lots of tools. I like natural things in this realm. So BioPure has a number of tools that Dr Klinghardt's put together and the Vital Nine, cistus, tincture or tea can be great. Beyond Balance has some nice tools. CellCore has some good tools. And then things like sulforaphane, pantethine, selenium, lysine, homeopathics can be helpful here as well. Shifting then into parasites and CIBO and gut dysbiosis. Parasite testing is notoriously not very reliable. So I think you have to do some testing with functional medicine labs, but also then maybe with some of the energetic tools.

So I like Parawellness Research with Dr. DeAngelo, where he himself looks at stool and urine samples under the microscope. I found that very helpful, but things like Zeito or Quest 4, or Asayra or Dr. Simon Yu acupuncture Meridian assessment, or autonomic response testing. Sometimes those can at least give us some insights looking at not only the worms, but a lot of the protozoans, the Giardia, the toxoplasmosis, the cryptosporidium, those types of things, Dr. David Jernigan years ago formulated some products in that realm that I like the Perigen product. I like to use herbs and combined homeopathy in this realm as well. So things like Energetics Paracord or UNDA 39 can be really nice. So looking at the parasite piece, looking at the CIBO piece, I would say that the CIBO piece is really fairly small in terms of the microbial contribution to CIBO. I would say the bigger pieces are the autonomic nervous system, the vagus nerve, the migrating motor complex, the bile flow, all of that really critical.

So killing bugs to recover from CIBO is probably long term not gonna work very well for people. It's a piece of the conversation, but it's not the whole conversation. Looking at other dysbiosis, like clostridia, klebsiella, those types of things. Biocidin can be a great tool. The MegaSpore, again, can be very helpful. Exploring the fungal yeast and mold pieces. So not only the candida or Canada, but also things like aspergillus that we talked about from exposure to water damaged buildings, tools like Mega Micro Balance from the same people that make MegaSporeBiotic, Beyond Balance, Byron White Formulas, lots of good tools there. Some people like to use Itraconazole, which is a pharmaceutical antifungal that can be helpful in some people. I would say, if you're gonna explore some of those tools for colonization, ideally, you wanna make sure first, that you're not getting ongoing re-exposure to that water damaged environment, or



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it's probably just gonna come back. So then we get to the Lyme and co-infections, so Borrelia or what most people think of as Lyme co-infections Babesia, Bartonella, opportunistic infections, mycoplasma, chlamydia, those types of things. I tend to think it's a little better tolerated to use tools that are more specific in a layered fashion. So rather than using something that's gonna hit Borrelia, Bartonella, Babesia, all of those at the same time, using some of the tools from Byron White Formulas or Beyond Balance or Nutramedix, or things like that, where you can kind of focus first on the things Bartonella, for example, very commonly, maybe the biggest symptom producer out of the Lyme complex of things. So what can you do in that realm? And then work through those methodically eventually then consolidating down to broader spectrum support so that you don't have too many things in your program. Looking at whether or not you need to do something in the biofilm realm. Some people do. I tend to really like herbs and homeopathy in this realm, but I'm also very open. I mean, I, myself did antibiotics for a long time back in 2005 when I finally got diagnosed after eight years. There weren't very many of these tools. It was, we're gonna do antibiotics.

I do think there's a number of people that have had some good response in the last few years to disulfiram in this realm. So keeping an open mind, but I'm most drawn to BioPure, Vital Plan, Supreme Nutrition, Beyond Balance, Des Bio, Maypa Herbals, Research Nutritionals, Nutrimedix. I mean, lots of different things there. Ozone absolutely love. And I think that plays a huge role in many of these different steps including the immune modulation, the TH2, TH1 balance piece that we talked about earlier. I know there's some peptides in this realm LL37, for example, that some can use. I'm watching with some of the induced native FOS or phase therapy from Dr. David Jernigan that he's been working with at his clinic in Tennessee, and hoping that that presents a new tool. And then I also sometimes think that we can't always use just oral interventions in this realm. So what can we do in the realm of frequency? I know you're familiar with the Wave One device from Free Medica, for example. Lots of things that we can do in the frequency realm, even frequency specific micro current can be helpful. Not that it's directly antimicrobial, but in really supporting the body in this realm. So lots of different approaches and love to hear your thoughts as well.

Matthew Cook, M.D.

Yeah, and so I would also echo that, and I agree with that. And, you know, it's interesting. Let's say there would be two conversations that would be going on in this area. And let's say you can always kind of break it down. And there's two types of people in the world. There's one person



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that was the hardcore antibiotic person. And then one person that was an overall systems thinker, which is basically what we're talking about today. And then this one to 10 approach of a total way of thinking about things. The people I saw this great lecture a few years ago, so Harvard Hopkins professor that always said, the analogy for neurological Lyme was a drug resistant TB, and to get enough antibiotic into the brain to treat a neurological thing you needed. And when they think when drug resistant TB in the brain, they say four antibiotics. And so then his analogy was okay, we need to do four antibiotics to support neurological Lyme. And so then as much as I love those people, I would say I'm more in your camp than that camp. And then yet I like to think about that idea. Okay, well, what would four antibiotics be? Well, LL 37 as a peptide is out and outrageously interesting molecule. And, you know, I've had a bunch of patients that had cellulitis that all had all these other things in cellulitis, and I put 'em on LL 37 and it's like dramatically better overnight. And so it's a quite effective. Ozone is an antibiotic. And then let's say you have two herbs that you got somebody on. And so then that's four antibiotics. You know, and then Thymus and Alpha One is sort of like an antibiotic. It's immune regulatory anyway, it's also immune stimulating. And so then that could be five.

And so then now we're cycling through, and then if I even think about protocols that I've seen, that you've done, they're often in that ballpark of two to three to four things that might be antimicrobial, and then you're gonna cycle on and off of those as we're working in the context of everything else. And does that mean we may take doxycycline for a month? We may, there may be some actual antibiotics and then guess what vitamin C and high dose is kind of an antibiotic. And so then now we be, and then, I'll just jump to the regenerative side for outside of the United States, then we're thinking killer cells, you know, where we grow your own killer cells and give those back to you. Which is they're gonna work on senescence, and then also kind of regulate immune system and help fight infections. So then now we beginning to say, oh, okay, we can and actually get to that level of three or four or five antibiotics, but potentially without having to do that whole having to take antibiotics because we're managing the microbiome and kind of keeping that optimized. And I love the herbal stuff. And then thinking about the infections in the context of this overall conversation like you do and trying to find some balance.

Scott Forsgren FDN-P

Yeah, and I think that the important thing, at least for me to think about is, I don't think we're ever going to fully eradicate *Barellia*, *Bartonella*, and *Babesia*. I think they're part of our microbiome for the duration of our existence on this planet. And so the goal really is to minimize



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the overgrowths enough unburden the body enough with all the other things we've talked about so that your immune system can respond like every other person that carries these same bugs and never manifested a disease process. And so some people feel like, what do you mean I can't eradicate these? And it's a discouraging conversation. To me, it's actually an empowering conversation because that seems an impossible task. And so the fact that we don't have to eradicate every last *Barellia*, *Bartonella*, *Babesia* and *mycoplasma* and *chlamydia* and virus and parasite and what not to become healthy again, to me is really an empowering perspective.

Matthew Cook, M.D.

Yeah, and, you know, we live in Silicon Valley, you're moving to Colorado, but there are some criminals around here, you know, and yet, you know, we live in balance and kind of manage our life. And, you know, if I have some patients who are profoundly ill, that have a lot of the stuff going on, and then I've got a lot of patients who are profoundly well that have a lot of the same stuff going on. And so then once, and I think it's important, that's at a great kind of maybe point to end on and kind of think about for the future, is that basically what I would say to people out there is, that if you can begin to kind of follow this type of 10 or 11 step process, and we're like spinal tap, we count from one to 11. And so then if you can outline kind of a process like this and bring this into your life and kind of get everything working, the side effect of that generally is your life starts to work and you feel pretty darn healthy.

Scott Forsgren FDN-P

Absolutely. Yeah, and just very quickly to touch, 'cause I know we're running outta time. The last two steps really thinking about the dental pieces, cavitations, root canals. I think that comes fairly late in the process for most people, particularly because I think this works better once the retroviral piece is addressed. Once the parasites are addressed, it may come earlier for some, but I also think this is an area you don't wanna jump into too aggressively without having really good collaboration between your dentist or oral surgeon and what I call the captain of your ship and who's helping to guide you overall. The last step, step 11, is this really your wheelhouse regeneration, restoration? What can you do here to help once the termites are gone, as Dr. Jernigan has said. I think that bioidentical hormone replacement can be helpful in some people. Oftentimes that cell danger response comes into that conversation as well. I love a lot of the phospholipids, some of the IV phosphatidylcholine, sodium phenyl buterate those things. Peptides, obviously huge possibilities here for restoration and regeneration. Photo biomodulation for rebuilding collagen and things of that nature after dealing with Lyme really



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helpful. I love exercise with oxygen therapy. I do it every day, the Live O2 system. I think getting that oxygen has been fantastic. And then, you know, I'm observing a lot of the things that you work with stem cells, exosomes and whatnot. I haven't been super impressed with jumping into stem cells, thinking it's gonna systemically solve your Lyme or your mold, and you don't have to do a lot of these other pieces. But I think once we get to the point that we have some localized issues or we've done all of the other pieces first, that then there is potentially some opportunities here for those also to support this regeneration and restoration process. So that's the 11 steps. It's evolving. I'm learning new things every day, as is everyone else. But hopefully that's a helpful model for people to think about.

Matthew Cook, M.D.

No. I love it. I think you're a wise Sage and then there's a lot to unpack here. And so then that was a fantastic interview. I think you clarified a direction for a lot of people to think about. And so then what I'm gonna do is I'm gonna have you on my podcast and we're gonna go into this a little bit more in detail. And then I would be encouraged people out there that, you know, it's a lot to kinda, like in interestingly, if I would've had this conversation with you, and this is embarrassing, 'cause I was like a fairly well known doctor. And if seven years ago I had this conversation, I wouldn't have even understood almost anything that you said. You know, even just the supplements and the brands and things like that. And I'm on this journey with you too, you know. I had dinner with somebody and he goes, "You know what I was impressed by?" He goes, I go what? He goes, how much you've learned in the last two years. You know, it's staggering and this field is really evolving. And I think it's evolving, you know, to some extent with people who are on the medical side, but deeply from kind of a grassroots perspective and you've been there. So I'm grateful for the work that you're doing. Keep doing it. Keep sharing the information. And I look forward to having you on soon.

Scott Forsgren FDN-P

Yeah. Thank you so much, Dr. Cook. I enjoyed the conversation. Couple of wrap up points. I'm on the board of the Lymelight Foundation. And so if people are listening and they are potentially in need of treatment grants, we provide treatment funds to children and young adults, 25 and under, if they're interested in either potentially being a grant recipient or supporting that work limelightfoundation.org is where you can get more information. And to your comment, so many things are evolving at really a rapid rate in this realm. I'm super excited about the things that are being put together. In many ways a lot of the things that are happening in the COVID realm and



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long COVID are also getting more attention on these chronic Lyme and CFS ME and those types of conditions. So I think my last comment would be just, don't lose hope. There's so many reasons now to be hopeful and people do get better from these conditions.

Matthew Cook, M.D.

Right. And then you mentioned disulfiram, which is there's gonna, maybe when you come back or I'm gonna do a little talk on it, it can be miraculously hopeful, but you have to, some things you have to do to get it right. And some things to think about in terms of dosage, because if you get the peripheral neuropathy that comes from it, I am very good at fixing peripheral or helping with per peripheral neuropathy, but I haven't been able to help that one, which is interesting to think about now then. That's just a job for me to kind of to figure out.

Scott Forsgren FDN-P

That's what I was thinking too.

Matthew Cook, M.D.

I know, but then just keep that in mind then with the idea that once again, I echo what you are doing, which is, is these herbal approaches and these kind of winning kind of from your own body's perspectives, hearts, and minds with simple strategies and kind of getting going with low risk things. I echo, so thank you so much. I'm delighted and grateful and I hope you have a wonderful week.

Scott Forsgren FDN-P

Thanks. Dr. Cook, be well.

Matthew Cook, M.D.

Okay.