

## Unexpected Ways to Deal with Medical Gaslighting, Biotoxins & Trauma – Jill Carnahan, M.D. – #1035

Dave Asprey:

You are listening to the Human Upgrade with Dave Asprey. Today we're interviewing... We? Shall I use the Royal We today? I am interviewing, but we are all learning from, someone who I've really come to respect over the last 10 years, who's actually visited my lab on Vancouver Island, and a top expert in functional medicine, in particular bio illnesses, things like toxic mold and things like that. I'm talking about Jill Carnahan, who's a medical doctor. Jill, welcome to the show.

Dr. Jill Carnahan:

Thank you, Dave. I am so excited to be here with you.

Dave:

You've led a panel on mold toxicity at the Biohacking Conference, and thank you for that. And your new book is called Unexpected, and you're talking about resilience. I think you're an awesome doctor because you actually had toxic mold poisoning, you had breast cancer, you had Crohn's disease and autoimmune things like that, which makes you uniquely suited to talk to people in a language about medicine, but also how it feels. I want to ask you this, to get kicked off. Of all the stuff you've been through, what was the one that was hardest to work on?

Jill:

This is a great question.

Dave:

Of all the stuff you've been through, what was the one that was hardest to work on?

Jill:

This is a great question because I had cancer at 25. 6 months after I got through all the toxic chemotherapy and lost all my hair... I found a new word, by the way, for bald. It's called glabrous, which I think is so much sexier than bald. But I was glabrous.

Dave:

glabrous?

Jill:

Yeah, glabrous. Sounds so much nicer. But people know what cancer is. People know what Crohn's and autoimmune disease are. So when you're talking to people, or when you look like emaciated and bald, people know you're sick, they know you're going through chemo. The hardest thing I went through was biotoxin, mold-related illness, because as you so well know, Dave, you look great on the outside. I mean, I had acne rashes, but I looked overall healthy. I had my hair, and no one knows how much you're struggling on the brain, on the inner level, the immune system. And I think it was actually so much harder to deal with mold and biotoxin illness because people don't get it. They think you're crazy. They make judgments. There's this new term called medical gaslighting, and I'm sure you've come across that, where doctors actually say, "Oh, everything looks great," right? And you're not. You're not okay inside. So for me, that was absolutely the hardest thing that I ever had to face.

Dave:

It's very interesting, and I want listeners to hear this. Mold illness was worse than cancer, from what you had to go through, because no one believed you.

Jill:

Yes.

Dave:

Right?

Jill:

Yes.

Dave:

And that's why, in fact, when I launched the documentary, Moldy Movie, you were one of the biggest launch partners who helps a lot of people see it, because that was the one for, if your doctor thinks you're crazy, show them this movie. But guys, it's still free. MoldyMovie.com. It's a public service thing. Or if even it's your spouse. How many marriages do you think toxic mold has broken up?

Jill:

Okay, Dave, so that's what I was going to say about the cancer. Literally, I go into the book about the limbic activation of mold, and before I wrote this book, I didn't even know. I know you're aware of this, but it's not just like, oh, this is traumatic, everything in my environment is hurting me, I've got this PTSD around it. It's literally the chemical inhalation, and other chemicals can do it too, through the cribriform plate, right into the frontal cortex, actually causes an amygdala limbic response in our brain. So, 100% of people who have toxic mold exposure, even if they've done their work, they've done their therapy, they've done NLP, they've done 40 Years of Zen, they still have a limbic response that's basically coupled to the mold exposure because our brains work that way when we inhale chemicals.

So, for me, No. 1, I was in a PTSD response after the mold. No. 2, what often happens is we kind of dissociate or get depersonalized because the mold also affects our brain's ability to deal with people, to deal with overwhelm, to deal with situations. So I was in survival mode after the mold exposure, and I got divorced two years after that, and I have no doubt in my mind that the dissolution of my marriage was related to the toxic mold exposure. It's crazy, but so true, and I find that story happens over and over again in my patients.

Before the work, you're going to have reactions because there's this old couple of, the people who do have reactions to mold have, No. 1, genetics that make them more susceptible to not being able to eliminate the toxins, but No. 2, there's a trauma trigger system activated in their limbic system that makes them susceptible. And literally every day in my office, I tell the patients where they're in that, where you and I used to be. And I'm like you, I'm probably 98% the way there.

Dave:

Oh, that's awesome, so you did get there. All right.

Jill:

Yeah. So totally agree with you. But it takes the work that you're talking about, the work that you teach, the work that you discuss with your guest and listeners, and that you talk about in your books.

Dave:

And the work that you teach in your book, because you and I might be some of the very, very few people who have managed to resolve that stuff that way. And I'm not saying that I can't be harmed by mold. I think it's bad for me. But I know now that when I'm exposed, the I'm going to die feeling doesn't happen. The, that's probably not good for me, it'd be a good idea to move and to go somewhere else.

Jill:

But you have to do the work, right? You've done the work.

Dave:

Yeah.

Jill:

I've done thousands of hours of NLP and other types of training. You have too, right? But you have to reframe, because it's literally a retraining of your limbic system, and it goes across all ranges. I mean, it could go across trauma in a work environment, trauma in a relationship. What you do is you decouple the trauma effect on your limbic system, and you've done the work, and I'm in the process and 98% there, as well.

Dave:

I'm sure that there are gaps for me, as well. And that's why they're called gaps or blind spots, because you don't see them, and then if they pop up... For me, if something triggers me, whether it's environmental or some kind of relational thing, I'm just like, oh look, there's more work to do. But it's like, I just don't believe it when my body says, oh, I'm going to die. I'm just like, whatever, and I don't sit there and Think about it.

Jill:

You actually have to create... I tell this to patients all the time, if you don't feel safe in your body because you've not done the work, then any chemical environmental thing is going to trigger you, because you have to go to that route of getting your limbic system to literally feel safe. And again, this is why you're resilient, because you've done the work around filling safe in your own body, right?

Dave:

Yeah. In fact, when people have done enough of their own healing work, at least if they're the right kind of people, you can actually create a feeling of safety in another person consciously. And you know how to do that because you're a healer. And I already know that you know how to do that. Someone's in your office, they're tweaking. What do you do?

Jill:

A hundred percent. It literally starts when they walk in the door. I want them to feel held and cared for. Even in the environment. We have color, we have no white walls, we have real artists that have done art. We give them a glass of water in a wine glass, because all of a sudden they're like, I matter. I'm

important. I'm worthy of love and respect. And then in the office, just that listening and validating their experience, because we talked about earlier, about medical gaslighting. Most of the time, they've been in a medical system that tells them they're crazy, they can't trust their own bodies, any symptom they have isn't real. And instead we're like, no, no, no, tell me more about that. I actually am listening. I actually believe you when you tell me you're hurting, even if I don't see it on the labs. And creating that place of safety where people can actually express themselves and feel seen and heard, that container is the start of healing.

Dave:

Wow. It is. So, you're doing environmental things. Geez. The definition of biohacking, change the environment around you and inside of you so you have control of your own biology. So, you're hacking the office environment, so they walk in and they feel different. And then, there's another thing that our bodies do. I love being able to talk to you about this, because I know you know all this stuff, and this is just for the education of our listeners. You'll find that our nervous system entrains with other nervous systems around us, because we're, I don't know what you call it, pack animals, herd animals, tribal animals, whatever your favorite word is. I like murder, like we're crows, like a murder of humans.

Jill:

Yes.

Dave:

Okay, maybe I don't like that one, but you know what I'm saying. So we entrain, and that means that if you are tweaking because whatever happened, and then someone comes into your office, that's not going to be a good meeting with that patient. But if you are calm, you can calm them with your presence, can't you?

Jill:

Oh, so true. And it's literally that energy of love. And this may sound woo-woo, but I know you understand, I know your listeners understand, when you come with a heart of unconditional love, where you're literally accepting that person just as they are, that energy is the most powerful healing energy in the universe. It really is.

Dave:

Wow, you said that so beautifully. Yeah, it's what you do. And for me, most of that came from 40 Years of Zen, but there's a state that healers and even non-healers can go into, and it's kind of like what a mother does when she holds her baby or something like that. There's like this unconditional love thing, and if you can learn how to turn that on at will... It has to be real. You can't fake that. It's not like standing with your arms at a certain angle. For me, it's a thing, I know the sound it makes when I have electrodes on my head, and you feel it in your chest, in your heart.

And if you do that with someone who's experiencing PTSD, they can oftentimes calm down, and then you give them their charcoal to absorb biotoxins, or their glass of wine. You do the things that are in your book and in your office, and then suddenly, maybe for the first time in a while, they drop out of that state and then you realize, oh, this is the normal state. But once people realize that they're in a triggered state, they want to stop it, so they drop out of a triggered state. What do they do next in order to not go back into it?

Jill:

Well, it's funny, because I'll just talk from personal experience. I lived from my neck up before the year age of 40. I was all analytical, all left brain science. I know you understand this.

Dave:

I do.

Jill:

And so, I problem solved with my analog computer, my old biohacking device, which wasn't very efficient. When I dropped into my heart, my intuition, the space that we're talking about now, which is quantum physics, the amount of subconscious data that you can collect in a fraction of a second is millions of times more powerful than that old analytical mind.

Now I use both. I love the science, I love the analytical mind and I still use that. But when I started dropping into the heart center, which is the place of love and unconditional love and gratitude, and you can measure it with all of these types of things like heart rate variability or anything else, EEG waves. When you drop into that place, your subconscious picks up little pieces of data that you would never notice if you're just thinking from an analytical perspective, and I can come up with solutions to problems that I never thought possible.

Part of that as well is framing your mind to see the impossible, to see the unexpected, which is the title of my book, because when you frame the fact that miracles and unbelievable things that don't typically happen in the logical world are possible, you actually allow your subconscious to start to observe and you see things that you would never see. So I always think of it as this much deeper device when we go into that heart space.

And that heart space is listening to, so you talked about trauma and if you're triggered, what do you do? I go into that space and say, what am I feeling? Is my stomach upset? And I start, and literally for the first 40 years of my life, I survived through medical school by suppressing the somatic feelings and the somatic experiencing. Now I go to that for data, because my body actually gives me data, right?

Dave:

We've been on similar paths. It's awesome. Yeah. You can download stuff from your body if your brain's not in the way. And I went from being brain-centric for certainly the first half of my career to being, like you said, more somatic. And I think you become a better functional medicine practitioner. Not that I would know, because I'm not a doctor, but I've worked with enough and been around enough that you can tell when someone's going with what their body's telling them versus what their brain's telling them. And if you combine the two and they match, you're probably going to do something unexpected.

Jill:

Yes.

Dave:

See what I did there? Worked in the title of your book.

Jill:

Amazing.

Dave:

I'm really surprised.

Jill:

Amazing. Yeah.

Dave:

But you're talking about limbic activation, which I just love. You talk about something else, though. Let's talk about faith. What is the role of faith in limbic activation in biotoxin illness, Jill?

Jill:

Yeah. Well, what I said is function is in science and faith, so you have to have the left brain and the right brain. You have to have science and faith in my world. You have to have both of these parts, and it's the mind and the body. It's that you could take any of these feminine, masculine qualities of each of us.

And what the reason I bring faith in, I do have a strong personal faith, but it doesn't matter if your listeners have no faith at all or some thing that it does not exactly align with me. It doesn't matter. The truth is that faith is our ability to deal with the inevitable uncertainty of life. So it's literally our lens on how we see the world and the things that, we do all these things to control our lives. We get insurance policies. We try to put our lives in order to make us think that we have control, right? Ha. That's such a misnomer. We don't have control, and always the things that strike us with suffering and tragedy are usually unexpected.

And so, if we have something deeper, some deeper purpose, some deeper meaning, some deeper belief, and again, whatever that looks like for you. For me, it's my personal faith, but in a higher power. Whatever we have there allows us to have an ability to see past the inevitable uncertainty, because uncertainty can be incredibly scary. It can cause us to be fearful. It can cause us to feel like we don't have control, which we don't anyway, right? But it's like that shifting on the view of life and what we are going to expect to see.

If we expect to see good, if we expect suffering to bring us teaching and training and resilience, we can actually reframe how we think about life and how we think about what comes to us. And to me, that's the bigger definition of faith. It's how do we deal with the inevitable uncertainty? In medicine, we always are taught that it's black and white, and it's so far from that. It is so gray and there's no certainty. And so, doctors who rely on the certainty of medicine, they get depressed, they get anxious, they get burned out because there is no certainty.

Dave:

I love the way you're putting that. It's funny, there's a small number of people who are working on making that kind of knowledge public, and I was just looking at all the people who endorse Unexpected, and you've got so many people who have been on the show. Sarah Gottfried wrote your forward, who's a friend who's been on the show. Mark Hyman, Amy Myers, Frank Lipman, Jeff Bland, Terry Walls, Isabella Wentz. Like, two-thirds of these people have been on the show. Susie Cohen. And it's just so cool that there's now a tribe. There's Susan Bratton. A tribe of people who are working on getting that information out there, even though I think for some people it's triggering. What do you say, if you come in and you tell a patient, "Having faith will help," and they're like, "How dare you? There is no such thing as faith." And they just lose their mind, because they actually have PTSD over God. What do you do about that?

Jill:

Yeah, well, this is so interesting, because I definitely have a strong belief in a higher power and I have faith, like I said, but part of the unconditional love is meeting people where they're at.

Dave:

"Having faith will help," and they're like, "How dare you? There is no such thing as faith." And they just lose their mind, because they actually have PTSD over God. What do you do about that?

Jill:

Yeah, well, this is so interesting, because I definitely have a strong belief in a higher power and I have faith, like I said,, but part of the unconditional love is meeting people where they're at, and I come with no judgment. You don't have to believe I do. But what I want is we know from the science, we know from a lot of the work that you've done, Dave, is having a deeper purpose or meaning is part of getting into flow. It's part of optimizing our performance. It's part of showing up in the world. It's part of avoiding depression, anxiety, like the data to support having a deeper meaning or purpose in life and believing in something greater than ourselves, whether it's the environment or a God or some other thing, it really does, the science supports the human health effects of that. And so, I can just bring in the science and say, you know what? And whatever that works for you. Whatever, it doesn't have to be... It could be a staunch environmentalist who just wants to save the planet and that's their higher purpose. That's okay. But those things really do matter in our overall health.

Dave:

You just made me think of something that I wouldn't have thought of in a million years. I was in school some time in my undergrad, and I wrote a paper. So I used to take religious studies classes. I was one class away from a minor in religious studies, because it was the easiest way to get high grades, because I'm studying engineering here. How can you fail a religious studies paper? Because you can say whatever you want as long as you can argue, and good God, I can argue.

So I argued that environmentalism was a new religion and that instead of wearing a cross, you carried a recycling mug. I got an A+ on that paper. And I was so surprised, because I was totally bullshitting, right? I just wanted to get a grade. And you just made me think of that. That was a long time ago. But maybe we were right. The broader thing you just said though, is that for hardcore rationalist skeptics, the scientific thing to do is to choose to believe in a higher power, even if it's fake.

Jill:

Right. Right. That's funny, right? You can be anywhere on the line, but the science just shows it helps us live a better life.

Dave:

I do that with reincarnation. I actually believe, based on my own direct experiences and some of the shamanic training stuff I've done, I believe that that is a real thing. But it doesn't matter if I believe it, I choose to believe it because choosing to believe in reincarnation means you have less fear of death, which means you make better choices. So, same thing. It doesn't matter if it's actually real, just decide that to put that in your mental model and you'll provably make better choices because you're less of a fearful, anxiety-filled tweaker. So, there you go. That's how I like to deal with those people. They get triggered when you say that too, but that's just fun at that point.

Jill:

I know, I agree. And you said, really at the core, we have two choices in almost any situation, love or fear. Those two are the... You would think love and hate are opposites. No.

Dave:

Three choices, love, fear, or coffee, because that always cancels it all out.

Jill:

That cancels everything. So if you're not living in a loving state with a higher purpose, you're probably living in some fear of something. And so, if we want to go in to do the deep work like Dave and I are talking about, you have to address those fears. That's the issue here, is what are you using to overcome? For me, I don't fear death. I'm like you, I have this higher purpose. I believe in something after that. We don't have to talk about what that looks like exactly. But to me, that eliminates. I am not afraid to die, and that makes my life so... I go out and climb mountains, I ride motorcycles at very high speeds, and there's no fear. It makes it fun.

Dave:

Nice. I have not purchased a motorcycle because I'm pretty sure that I would drive it at very, very high speeds, so yeah, that's probably not on my list. But I would go on a motorcycle ride. I just don't know that I would do it all the time because I tend to go fast. I admire your courage. That's not fear of death, either. That's just not wanting to deal with it. Not yet. Now, I want to ask you about HSPs or highly sensitive people. How do you define that? And I want to know the difference between an empath or a psychic and a highly sensitive person.

Jill:

Yeah, so I grew up in a farm with German-Swiss engineer, stoic, analytical family, and they're amazing, and they taught me all my analytical skills. I actually did bioengineering before medicine, so I'm very analytical. But I always felt like an alien. I felt like I didn't fit in, and what I didn't understand at that time was I was this empath, which we'll talk about the difference, and also an HSP, or highly sensitive person.

Elaine Aron writes about this in her book, and she was one of the first researchers who actually brought the science to this. There's about 10 to 15% of the population who's HSPs. In my work, I took it to another level, because I feel like what they are is those people who, they see more detail, they feel more energetic, they feel more emotions of people around them, they feel more sights and sounds and smells, they're more easily overwhelmed. Like, my worst nightmare is an amusement park with hot sticky sights and sounds and lots of noise and lots of rides, because that's too overwhelming to my nervous system.

So, it's literally a setting on your nervous system of you've taken in so much data that you get overwhelmed more easily by the natural ambient sounds and lights and people and crowds. For example, if I do a mixer or a business meeting, I can only go an hour or two and then I'm like, too much, I need to go back to my hotel room and have a Pellegrino and relax. It's like, that overstimulation can happen more quickly with an HSP.

Now, an empath is more on the emotional level. They're feeling the emotion, they're feeling the love or the hate or whatever emotion that these people in the room have, and they can actually tap in or tune into someone else's emotion. I think HSP is a bigger umbrella because it involves the chemicals, the sights, the sounds that these people, and again, in my work where I went to the other level, is the

environmental sensitive people like myself, to mold or biotoxins or environmental chemicals, glyphosate, Roundup, et cetera. Those are the people that also have more chemical sensitivities. They're the ones that are coming to my office because they get sick quicker because this world, this toxic environment overwhelms them. It fills their bucket up more quickly.

Dave:

I would have identified as a highly sensitive person for much of my life, and I don't anymore. I've had massive chemical sensitivity to the point where I would hold my breath walking down the laundry detergent aisle because the fabric softener would drive me nuts. I still don't like fabric softener. I think it's bad for humans. It disrupts our biology, and I prefer to not be around it, but I may be 10% as reactive as I was. And it's like there's an awareness, but the activity is dropped so much. And I'm not sure I know all the reasons for it, but it's made life a little bit easier. And I want to make sure that it's really clear, you can be an empath without being a highly sensitive person, right?

Jill:

Yes.

Dave:

And when you're a highly sensitive person, can you build resilience so you're not that sensitive anymore?

Jill:

Yes, and this is where you and I talked about the mold, and how both of us can be in a moldy hotel room or somewhere and it just doesn't affect me like it used to. The other thing I was going to say though is, there's this gift, just like anything that feels like a curse, like what's wrong with me? There's a gift in this, because HSPs are often, and again, you have this still innately in you, the creative, brilliant, entrepreneurial geniuses that actually see more detail, they see more pattern recognition in things that they're observing in behaviors and people, and they're often the ones that have insights or ideas that no one else has seen because they're taking in more data and they're actually processing those pattern recognition systems and coming up with more ideas because they're taking in more details in the world. So, it's interesting, I think. Maybe some film editors, maybe some, again, genius, creative, entrepreneurial people with brilliant ideas, they're often HSPs because they gather more data in every day of the world, their experience.

Dave:

It seems to me like there's an overlap between ADHD or even Asperger's and highly sensitive people. Because having had Asperger's syndrome until, I probably would've met the diagnostic criteria until my mid-thirties, what it's like is that you get all this environmental input and it's just too much. It's like there's static on all the lines. And so, you're trying to hear what people are saying, you're trying to make it out, but it's like...

And then eventually you... So you're just always working, and your brain gets tired and especially if you have biotoxins creating the static and reducing the energy you have to do it. Eventually you become really good at pattern and recognition, because you just have to hear what someone's saying, but you're not going to remember their name or what their face looks like, because for God's sake, you could barely figure that out and the lights were too bright and all that kind of stuff.

So in my path, I got rid of the biotoxins. I rebuilt my nervous system, and I had to retrain it, and I had to upregulate my detox systems. But the retraining was brutal, like retraining how to see, how to move, how to hear, how to respond to stress with heart rate variability, even how to think with neurofeedback. And I don't think most people will do that kind of work, and I'm a little bit maybe crazy on that front, but how much of that HSP comes from when I was young, I had toxins that interfered with my input/output signals, and how much of it is something else?

Jill:

Yeah, so I love that you're describing that we could all be, I think the HSP could be considered neurotypical, which is kind of the new PC word for autism and that spectrum, and who knows, I probably have a little bit of that too. But it's really like-

Dave:

I was wondering.

Jill:

Yeah.

Dave:

That's probably why I think you're cool.

Jill:

Same with you, Dave. It's mutual. But it's interesting that you say that because it really is. You started this podcast with the view of our retina and how we view the world and perception. And it really is how our brain, and I think our imprints like me, with probably Roundup and chemicals in utero, and I think... We only use about, you may correct me on this, you may know a better statistic, but maybe 20% of our brain at any one time. We have all this reserve. But if we have toxic chemicals or trauma or things that we have not dealt with, we start to use up that, we're maybe running at 80%. And so, what you described before you did the work, and for me as well, our brain gets overwhelmed, and how that presents with overwhelm is like, I need a break from the world. There's too much inputs coming in.

I've worked with an ophthalmologist who literally use lenses and filters and eyeglasses to change the retinal inputs because the peripheral retina has access to every part of the body, and if we change peripheral retina inputs, we can literally transform the way our brain is thinking and how much of the resources we're using at any one time. Which is amazing, because we can down-regulate that 80% down back to 20%, and when we have that reserve, we're not overwhelmed. So you and I, before, our brain was working so hard that we had no residual reserve, we had no margin, and now we've created margin, so it's not a big deal.

Dave:

That's so cool. When I look at alone time as something that people need, you would never think, wait, that's tied to vision? And for me, it took about three months, an hour every Saturday of doing really crazy vision therapy to open up my peripheral vision so I could even see the periphery I'd filtered out. It was just too much noise. And the amount of exhaustion, it took me like, six hours of napping and just eating after I would do an hour of brain training, just to rewire the brain. It was some of the most difficult work I've ever done. And probably for two years, my brain was adapting to just a visual change.

And just maybe a few months ago, I just had a tongue tie taken off, and it turns out the way your tongue moves is intimately tied to your fascia. So now, my tongue hits the top of my mouth. And again, my brain's rewiring, my body's moving differently and all this stuff. It kind of feels endless. Do you think this is going to be a process for you for the rest of your life, or at some point you'd be like, I'm so unexpectedly unexpected? I'm bulletproof, you could say. But when do you know you're done?

Jill:

No, you know what, Dave, you and I are similar souls in the sense of my soul came here to transform and to help others transform, and you're clearly in that same boat. And so for me, literally lifelong. That's why suffering and tragedy and illness, I can view that in a lens of how is this going to transform me into a better human being? And when you have that lens on life, then every single experience, even the ones that are coming in my future and the ones I've had in my past, they offer lessons. They offer some powerful things that take my soul to another level. So I will always, until the day I take my last breath, be in the transformational mode. I'll never stop, and I sense that you won't be either.

Dave:

Oh no, I'm not going to stop. Actually, it's not true. When I'm done, I'll stop.

Jill:

Yeah. When is that, right?

Dave:

And I always, I've got to be pretty well known for saying I'm going to live to at least 180. But the real thing is, I would prefer to die at a time and by a method of my choice. So when I'm done, I'm done, but until then, transformation's a part of it. And if you believe in the whole past life thing, then that's just like a brief rest, anyway. I want to get back to this idea of highly sensitive people, because some people use that term for like, oh, that's like an emotional person who can't deal with life and is always complaining and whining. What's the difference between an HSP, the way you're defining it, and that sort of negative connotation?

Jill:

Yeah, it's a superpower That's a secret, is like what we just talked about. It really allows you to take in details that no one else has seen. I mean, part of, when I'm teaching other doctors on functional medicine, part of what I do is I read all this stuff, I read the journals and I'm like, okay, how can we view this differently? And then when I'm presenting, I'm presenting a new way of viewing the same data that everybody else is reading, and that's only because I'm seeing, it's pattern recognition at the core. It's our brain's ability to systemically see things that are similar in appearance to stuff we've already had experience with, but take it to the next level of saying, if this, then this, and then, oh, what about this? And we jump to a new conclusion, and then those new conclusions happen to be sometimes ground shaking or profound or allowing us to think in different ways.

Any great, Albert Einstein, you name any of the great people who have changed science and physics in the past, I guarantee that 80% of them were HSPs, because they're clearly exceptional at pattern recognition and at curiosity allowing them to take a new leap in some sort of observation. So I see it as a superpower. You just have to get past the part of that you do need more. For me, I need PEMF mats at night. I need my Epsom salt bath. There's a lot of things I do every single day to perform optimally. I know what they are. I don't mind them. But to anyone else, they be like, oh my gosh, Jill, it takes a lot to

be you. It takes a lot of stuff to support my life and my brain, but I don't mind that because it allows me to perform better.

Dave:

Yeah, we do come from the same planet, apparently. I have all kinds of stuff that works, and I'm always going like, what's the minimum effective amount of it to travel with? And when I do it right, I can run circles around people half my age. My brain is just so on, and I can do it effortlessly for days, and it's like, it's awesome. But if I was to go out and eat the McNuggets and you give me some skim milk and some artificial coloring, I don't care how much modafinil you give me, I'm not going to perform well. It's just not in there. So I know my kryptonite, and I feel like for HSPs, the kryptonite isn't always the same, but there's common buckets of it. So what are the most common things that take HSPs off their path?

Jill:

Yeah, so obviously we talk about environmental toxicity, and mold is a big thing you and I have talked about, but it includes parabens, phalates. Just last summer, they tested the water supplies in Colorado and found 100% of the water supply is contaminated with PFAOs, which are forever chemicals. There's no getting rid of these. Scientists can't even calculate the half-life. That's like Teflon and Goretex, all from, thank you DuPont.

Dave:

Those are awesome though, because if you drink the tap water, you'll coat your arteries with Teflon, so nothing can stick.

Jill:

Yes.

Dave:

I've heard it from big chemical industries and I must believe it to be true, right?

Jill:

Correct. Yes. Yes. It'll be there forever, so we don't have to worry. There's no... No, we can filter it out. So you can, but it's in the water supply. So all this to say the environmental toxic load is exponentially increasing and definitely affects us and decreases our performance and our ability to perform. But one of the other things with HSPs, energetically, they have the similarity to the empath, which means the relationships. Now, we all family that we can choose or not choose, but what happens is all those relationships that we choose, the people that we spend the day-to-day time with, that massively affects HSPs if they're not healthy. And part of what I write about in the book is some of my really toxic experiences. I dated a person who met 18 of 20 criteria for a psychopathy and was an ex-felon.

Dave:

Oh, you didn't just pick a narcissist, you picked a psychopath.

Jill:

I went high. I aimed really high.

Dave:

You could humor me there, Jill.

Jill:

I know. And that was the thing, Dave, I was like, okay, there's a lot of women like me that have successful careers and they love what they do and they're doing fine in that realm, but their relationships are not healthy. And for me, it was a real learning experience, because for an HSP, those relationships massively affect our ability to perform. It's another toxin. And then, childhood trauma if we don't deal with it. So these are toxins on an emotional, spiritual, mental level, and they can be just as toxic for performance and output for the HSP and the empath as anything toxic in our environment.

Dave:

And those things can take out people who aren't HSPs as well. I have a friend who dated a narcissist, a well-known one, and it created physical symptoms in someone who's already highly resilient, not an HSP. And I've seen that over and over. So you can take really healthy people, you put them in a moldy house and it doesn't work right, and you can take really healthy people, put them in a clean house with a, we'll call it a moldy partner, a partner who's following the narcissist template or the sociopathy or psychopathy, which is even scarier. And the physical degeneration seems to happen, and it happens reliably, and maybe in slightly different ways. So, it's hard to know. I have an air filter running over here. I filter my water. I eat grass-fed stuff without glyphosate in it. And generally, things work pretty well. I have halogen lights instead of LEDs, and my mattress probably has more gadgets on it than yours, but we both sleep well.

Jill:

Yeah, great.

Dave:

So, we can do all that stuff, but where's the filter for narcissists? I'm thinking about writing a book about it.

Jill:

Oh, this is, it's so needed. And again, this is why. I realize there's so many women that like me out there that need to hear this message. That's part of why I wrote the book, because they have it all set in their career and in different areas of their life, they're successful. But what they're doing is they're still picking according to their old trauma patterns of what they feel they deserve or what they feel their worthiness is. And I had to learn, like, I would've kept picking narcissists and psychopaths and ex-felons you name it. I mean, Dave, one of my stories, after my divorce, I came out of an almost 20-year marriage and I had married, I met my ex-husband at 19. So all I knew was that of a 19-year-old with no dating experience. And I went out and met this man and it turned out to be an abusive relationship, and I ended up filing a restraining order, starting to stand up for myself. Two days later, I drove by his house, there was ambulance there, there was firetrucks, and I found out he had committed suicide.

Dave:

Wow.

Jill:

So that was my big wake up call, that, okay, Jill. And then I went on to have other experiences that were really unhealthy. And what I looked at was looking at myself, just like the transformation we talked about. I said, what is wrong with me? Why am I choosing...

Dave:

You're the common element.

Jill:

Right. Why am I choosing and attracting... And I'm smart. I'm not a stupid... I understand people. I love to understand personalities and what makes people tick. Why am I choosing this way? And the root, which is, again, if you ever write anything about this, it's so important for men and women, we only choose based on what we feel we're worthy of. We are reflecting our own value. And I actually didn't believe I was worthy of love.

I didn't trust my intuition. Everything, if I look back, if I would have been in touch with my body and trusted my intuition from the first date with both of these men, I should have known there was something dangerous, not healthy, but I ignored my intuition. I completely was not in my body. I was not embodied, and I bypassed that in order to think, oh, well, maybe this would be good, or they maybe would say things that sounded good to me. And I ignored, number one, my intuition, and I didn't believe that I was worthy of love.

And one of the most powerful lessons I talk about in the book, in my own healing, is actually learning to accept and love myself and believe that I was worthy of love, and trusting my intuition. And they go together, because until you trust yourself, you trust your body to give you good data, you can't love yourself. And so, you have to have both.

And it transformed who I was dating. So, it really did make a difference, and I think women... Men too, but I'm just speaking to women because I am a woman and I understand that, and women like myself, who maybe have it all together in other areas of their life, they need to hear this: I promise you there's people out there like me that are dating wrong types of persons because they're not really believing they're worthy.

Or one step further, one of our mutual friends was talking at a big health mastermind and he said, "You know what? I want to talk about addiction." I tuned out because I'm like, I'm not an addict. And you know what he said? He said, "Jill, everybody in this room is an addict. You're addicted to work and performance." And so, that was my other overcoming, was I realized that I was getting my value, my love, my worthiness from my achievement, from my success, from my performance. And that was a treadmill that I would never have gotten off, it would have killed me eventually. I had to get off that treadmill and find value and worthiness from things other than just performance.

Dave:

It's an interesting thing, because if you're a highly sensitive person, you're unlikely to have intuition because there's too much noise coming from your body. In order to sort out what's an intuition versus an inappropriate signal it's just about impossible. So you end up living all in your head, and this is what happens. I mean, just go to Silicon Valley. I just described an engineer. That's what we do.

Jill:

Yes.

Dave:

And then, some engineers will do healing. A lot of them are now doing biohacking, and that actually drives awareness below the neck, because it's actually good for performance and performances something engineers care about. Which is, you can call it more of a masculine approach, but half of all biohackers are women. At least, that's what my followership looks like, so I'm going to believe that this is a men and women thing.

But if you've learned that your body sends you false data, which is noisy data, all that static on the line, then you don't have trust in your body. And if you don't have trust in your body because it sends you bad signals, you won't see the good signals in there. And eventually, through whatever spiritual practice, or in my case, technology-based, like a neurofeedback practice, along with the healing stuff that's in your book, in Unexpected, you do that stuff, and then one day you're going, oh wow, that wasn't just garbage data, that was actually an intuition.

And in order to do that, you have to have trust. You have to have that self-love, right? But how can you love yourself if all you get is staticky data from the world around you? So I feel like the physical healing is a part of self-love. It's very hard to do the self-love if your body is literally poisoned, because that gets in the way. Do you think it's possible, if your body is soaked in glyphosate and lead in mercury and ochratoxin A, to express self-love at its fullest?

Jill:

No. No, not at all. I completely believe it has to happen. And funny thing is, when I first started writing the book, I thought it was going to be environmental toxicity. And then I realized, oh gosh, there's so many other levels, emotional, relational, childhood trauma that we have to address. But that environmental toxic load, that level of the bucket, you have to have some margin there in order to even come in contact with your soul and your spirit and your intuition. So I completely agree. You need both. You need to address both, because you won't get past, you won't get down into that deep level if your bucket is full of toxic crap.

Dave:

Oh, I like that. I like that perspective, because that certainly matches with what I've seen. That still doesn't get us down to... I guess you're saying that the way that you would go about spotting a narcissist would be just by having intuition and by understanding your intuition. But something you haven't mentioned, and maybe you're not aware of, I want to chat with you about this. The more good you're doing in the world, the more brightly you show up, the more well-known you are, the more books you write, the more followers you have, the more the narcissists and the sociopaths and even the psychopaths will target you. So part of it is having more intuition, but the other one is, the more good you do, the more people around you are like that, unless you have incredibly high levels of discernment. Is that a part of your picture of the world?

Jill:

So, this is a whole nother little topic that's both my weakness and strength, is I could take this person who was an ex-felon, alcoholic psychopath, and I'm being completely serious, I'm not exaggerating, and I could find the good, because you know what I could see? I could see, oh my gosh, when he was a child, he had abuse and trauma, and that created this really awful personality. But underneath, I could see the potential and the good of that human being, and that's why I was there, because I thought somehow that I could transform that.

I couldn't. It was a lost cause, and it was very inappropriate for me to think that I could. But I have this, again, gift and curse of looking at a patient, a person, a friend, anyone in my life, and being able to see in them their soul, the true nature of what makes them tick, what makes them brilliant, what makes them... And life has been traumatic to them, and often they show on the outside their mask is a mask of psychopathy, is a mask of trauma, is a mask of... But the difficulty for me is, I still see the good. I see the good in humanity.

And so, I've been with people who are completely pessimistic and negative, and it's so hard because that energy is like, that's not what I bring. And I'd rather be the one who sees the good in the psychopath than the one who sees the negative in everyone, but it can be a real problem because there's a reality there that this is not healthy and not good, and sometimes I miss the reality because I'm so optimistic. My filter is rose colored.

Dave:

Do you think that'll change over time?

Jill:

Well, it already has, in the sense that now I trust if my body says... Like I said, if I look back, both those multiple relationships that were unhealthy, from the first date or encounter, there was something that was like, ooh, that's not quite right, but I overrode it. Now, I would not override that. I would actually listen to that and say, okay, this person may have good qualities, but they're too toxic for me. And so, I would do it differently now.

Dave:

What does it feel like in your body when someone's not a good fit for you?

Jill:

I'm closing my eyes, because I'm actually just experiencing and trying to feel what that would feel like. For me, it's exhaustion, energetically. I think of myself as a battery. I mean, we're all kind of like human batteries, right? And when I'm around people who lift me up, it's expansive. It's a yes instead of a no. But if you think about it, I guess the best word would be expansive or contractive. So contraction or expansion. And when I'm with someone who's good for me and healthy and lifts me up, it's expansive. I leave them, I leave the conversation with like, wow, I feel good. I'm upright, I'm expanded, I'm smiling, I'm full of joy. When I leave the encounter with someone who's negative, pessimistic, or just not good energy for me, I feel small. I feel contracted and I feel maybe more sad, overwhelmed, or tired.

Dave:

That's such a big hint. Now I'm wishing I could remember which book this is from, but this was advice from an elder to, I think to his daughter or something. But it was... Actually, it might be Robert Greene, now that I think about it. This is the 48 Laws of Power guy, who's been on the show a couple times. But to determine the status of someone like that, what you do is you look at how you feel when they leave. And if we could just teach our young people that, whether they're men or women, it doesn't really matter. If you ended the date and you don't feel better than you did before, don't go on that date again, right?

Jill:

Yeah.

Dave:

So if my teenagers pick up just that from listening to the show, if they ever do... Hey, guys, hopefully you got that.

Jill:

Yeah, and so often, like we talked, our mind overrides, right? Oh, but he has a Mercedes, or whatever stupid thing that our mind says, oh, but. You know you're dealing with that intuition saying, no, this isn't right for you. Don't let your mind judge and overpower that sense.

Dave:

Yep. The mind will do that until you learn to be in charge of it. What about evil? Do you believe that there are some just truly evil people?

Jill:

Ooh, now we're getting deep, Dave.

Dave:

Well, you wrote a book about science, faith, functional medicine, resilience. We're going to go deep, Jill.

Jill:

I love it. I love it so much because like I said earlier, I believe so strongly in the ability of human beings to transform and delight and good and love, and my soul's purpose on this earth is to help and encourage people to be the best version of themselves. One of my best therapists said, "Jill, my definition of love is creating a space for someone you care about to become the best version of themselves, to transform into the highest version of themselves." I love that definition of love because it's so encompassing to every person that we meet.

So, I believe evil comes from trauma, and the most shame-based trauma person is going to present with a lot of evil. It's real. I don't want to deny that being real, and the fact that people are capable of absolutely horrendous acts. But even so, underneath that, I still believe that there's value in every single human being and that even the most evil vile person has the potential to transform into something beautiful. So yes, there's evil, but transformation is always possible.

Dave:

Wow. That's a fundamental thing. I got into a little bit of hot water because I was on another podcast and they asked me, "Dave, if you could have dinner with one person throughout history, who would it be?" And I thought about it for a minute, you know, you're on the hot spot, and I said, "Hitler." And he's like, "What? What do you mean?" And I said, "Well, I want to know what made him that way. I want to sit there and be like, what did your dad do to you? What's wrong with you? Are you evil incarnate? Are you possessed by... What the hell? How could there be such a monster?" Because I'm curious about it, because I don't want to make any more of those, and I would want to know how to heal them if there was such a thing. And so, I guess that was politically correct once I qualified it, but it's not like it's someone I admire, but it's like, how the hell does that happen? How do you think that happens, the psychopathy? Is that all just trauma-based, or are some people just bad people?

Jill:

Well, you and I, Dave, know that when someone's born with chemical toxicity, it can affect the brain and the choices in that, so I think there's a component of physiology, genetics, and actual exposures in utero or in their young life.

Dave:

Oh, God, yeah.

Jill:

I think that, right? I mean, that's a huge piece, because it can really make people think. I've even seen, again, we've talked about this before, Bartonella and some of these tickborne infections, when they infect the brain and create encephalopathy. I mean, these children who are happy, peaceful children start to attack their parents.

But on the other side of transformation, you ask, what do you think is the biggest factor? I think it's shame. I think it's toxic shame. What I realized as I was studying trauma and doing my own work, toxic shame... Now, there's some shame where like, it's more guilt. We can differentiate guilt from shame. Guilt is like, oh, I did something wrong. I need to apologize to someone. That's okay. Guilt kind of drives us and allows us to become better human beings.

But true shame is like attacking someone's identity or worth at the core of humanity, and true toxic shame will cause some of the most vile acts in humanity. It's shame-based. And I believe if we deal with that shame on that level, instead of cause more shame by shunning them or incarcerating them. And I'm not against prison in the appropriate sense, but we don't help the shame with the people who have done really vile evil things by shaming them more. We actually would help them by teaching them to deal with that shame and transform their bodies and minds.

Dave:

The difference between shame and guilt is something that we don't talk about a lot. I cover this at 40 Years of Zen with people and all. But if you teach someone that their weakness, whether it's because they're HSPs or something else, if it's about who they are and what they are, you create shame, and shame will make you kill people. I mean, people will do anything to avoid shame, because shame feels like death. Because to our dumb little meat operating system, shame means you'll be kicked out of the tribe,, and you can't live on the Savannah because a tiger will eat you if you're by yourself.

So, shame feels like death, and we will do anything to avoid death. Just like if you hold someone underwater, they'll do everything they can to take a breath. It's the same thing. And none of that's conscious behavior. That's meat-based behavior. And that's why you don't shame people. And if someone feels guilty because they did something bad, good, then that guilt should drive you to make it right. And that's what most people do, except for sociopaths and narcissists and psychopaths. They're like, "Oh yeah, I know I did something wrong," for the sociopaths, and the narcissists, "Oh no, it's impossible I could do something that bad because I have such shame, instead of guilt, therefore I will blind myself to what I did and I'll blame you, and I'll make you think you're crazy and I'll gaslight you and I'll do all that other stuff." And it comes down to that one difference between you did something bad and you are something bad. What's the role of biotoxins in all of that?

Jill:

Yeah. Well, let me tell you a story. I had a well-known friend who's a doctor, lived in Texas. She came to see me with her daughter because they had mold toxicity, and as I questioned them about their house, which was a multimillion-dollar beautiful mansion with renovations, she told me the story that literally the two past owners of the house, one had committed suicide and the one prior had committed homicide in that home.

And as we talked about it, and I looked at the data, there was no doubt in my mind that the toxic [inaudible 00:50:28] and *Stachybotrys* and the trichothecenes that they were producing created some of that behavior. Not the cause, it's not the scapegoat, but there was a component of that toxic mold that led to the deaths in the house prior to their arrival. And she didn't know that, of course, buying the house, but then later this all came out. And I have no doubt that people can do really bad things when their brain is taken over by biotoxins or *Bartonella* infections.

Dave:

Toxic mold can absolutely make you schizophrenic, and there are studies of that. I mean, it can cause dissociative problems. You can really go nuts from some of it, depending on how your immune system responds. And then, what's worse, if you don't know it, you're like, how could I have done that?

Jill:

Right, right.

Dave:

What's wrong with me? And it's like, well, it kind of wasn't you. It was your operating system operating with poison.

Jill:

Yes.

Dave:

And so, there's room for self-forgiveness. And if you don't know that some of it's trauma, but some of it's just poisoning, and then you're just like, I must be kind of a piece of shit because of the way I act all the time. And then you're really ashamed of it, and you're not nice to your parents, you're not nice to your children, to your partner, to people at your workplace. And you're just like, man, maybe I should just stay away from people. And I've been through all of that. I'm just describing myself there.

And eventually you realize, well, if I get the toxins out, now I can do the trauma healing work. But I always found doing trauma healing if I was toxic was next to impossible. Not impossible, but it's so hard. And that's why even in my work, the diet stuff to get people's bodies working better again, that's the first thing. And then I wrote about brains and I do spiritual stuff and things like that more and more as I move on in the books. And I feel like you've kind of done the same thing, like your practice, since going back, when we first got to connect over mold, went into the documentary. Not a lot of people are willing to put faith on the cover of a book about functional medicine recovery, but you did it because that's where you get if you start biohacking, or if you just start healing. What comes after all that, Jill? What's next?

Jill:

Well, and thanks for acknowledging that, because number one, publisher said, "You can't write a memoir. No one will ever read it." And I was like, "I have to. It's story, and stories are connective tissue, and unless I tell my story, there's no..." And so, that was first thing. And then second thing was, yeah, faith, "You can't put faith on the cover." I'm like, "Well, sorry, I have to." And I really believe people want and need to hear this. Again, I'm not trying to change anyone's way of thinking. I just want to offer them some science-based evidence of a greater purpose and meaning in life that really does transform us.

So what's next? I worked on a documentary last year. Hopefully that will be out soon. We're working on distribution right now. It's called Doctor Patient, and it's a documentary kind of following some of my journey. So stay tuned. I don't know where that'll be filmed or seen, but hopefully in the next six months that'll be out.

And I really feel like, it's funny, I've been saying this, and this is, I think you'll understand what I'm saying. I want to teach the teachers and influence the influencers. I want to be that voice out there that is a knowledgeable science-based authority that actually gives people who have influence, who have sphere, who are doctors, who want to change lives in their own lives and in the lives of their patients, I want to be that resource for those kinds of people out there, because that's the way I can make the most... I can only see patients one-on-one, and I'll keep doing that, but the bigger influence is, how do we change and transform medicine on the whole? That's what I want to do.

Dave:

Well, it's about time, because if you try to pull the healer out as an important variable, it doesn't work very well. So what you really have in the world is, you have a patient and some kind of a condition that you've identified, you have a modality, and you have a practitioner, a healer. And what the drug companies have been trying to do, and the insurance companies, who I would say probably, even if people you think aren't evil, these are evil companies. What they're doing is, they're trying to remove any attention to the healer. And it's okay to say, this doctor or this acupuncturist or this tantric energy worker, whatever you want to call it, is better than that one at their skill. They can heal because they're part of the system of healing, right?

Jill:

Yeah.

Dave:

And it's okay to do that, and you can't separate that, because it's a system like that. And I like where you're going with it, and just saying, all right, how do we teach others to be healers? And that involves that self-love, that trust, intuition. And you know this, and I know this, the best doctors, when someone walks in the room, you already know what's going on. You can feel it. And then you think your way to match your feeling. True?

Jill:

Yes. Oh, the reason I keep saying that, intuition is always right on and it's instantaneous, and then you prove it with the science so that you have a good case to make for the patient.

Dave:

Jill, how would you tell about an MD who's not a healer, how would you tell them to become a healer?

Jill:

Well, you know what, it's catching. I just read a statistic this last week. One in four, 25% of medical doctors are either burned out or clinically depressed. That statistic has never been that high. And they're quitting in droves or trying to find alternatives. So if you just catch this, that comes from the fact that they went into medicine thinking one thing, that they were going to actually help patients, listen to patients, have time with patients. I would say huge percentage, maybe 80, 90% of physicians go into medicine, not for the money, not for all whatever they think is going to be there, but they actually want to help people. They really want to heal and help people.

And when you lose touch with that in the office, and you're getting told you can't do this and you can't do this, and you need seven minutes per patient and no more, it causes your disconnect with your soul's purpose of why you went into medicine. So for me, it is catching that 25% or more that are dissatisfied and saying, "Hey, friends, there is a better way." I love, there is no place I'd rather be than in the clinic. If I didn't get paid a penny, I would still do what I do every single day because I love what I do.

Dave:

Incredible. And that's how it's supposed to be, and I think you carry that through in your book really well, and if you're a physician listening to this going, oh, what the heck? Well, yeah, getting out from underneath the jackboots of insurance companies is really important and more and more people are doing it. I'm doing some things for my employees now. We're getting them coverage that has a huge amount of preventative stuff in it, way beyond anything you'd ever expect, like lab tests and CGMs and things like that, continuous glucose monitors.

Jill:

Cool.

Dave:

Because frankly, they're better off that way, and every penny that I pay to an insurance provider is a penny that I didn't do something good in the world with. So I'm looking at insurance companies and Monsanto as being of the same beast, and those are not things that live on my planet.

Jill:

Yeah.

Dave:

Well, I think you're doing good work in the world, Jill. Thank you. Your new book, Unexpected, and guys, you should check this out. In fact, with any luck, Smarter, Not Harder, will still be trending on the New York Times list, so why don't you pick up Unexpected and Smarter, Not Harder together if you haven't already, so then Amazon will tell everyone, these two books go together like two peas in a pod, like non-psychopaths in a coffee shop.

Jill:

Yes.

Dave:

Okay. There's got to be a better analogy than that, but I'll take it. And Jill, thank you.

Jill:

You're welcome, Dave. Always a pleasure to talk to you, and thank you for your interview and just going deep where it really matters.

Dave:

You're welcome. You're doing fantastic, fantastic work, and I want you to keep it up. Mold is real, biotoxins are real, and so is loving yourself, and they all are intimately connected in a way that I think you elegantly described.

Jill:

Thank you.