

[193: Resiliency Radio with Dr. Jill: Cracking the Chronic Illness Code with Dr. Nafysa Parpia](#)

**Dr. Jill 00:12**

Welcome to *Resiliency Radio*, your go-to podcast for the most cutting-edge insights in functional and integrative medicine. I'm Dr. Jill, your host. In each episode, we delve into the heart of healing and personal transformation. Join us as we connect with renowned experts, thought leaders, and innovators who are at the forefront of medical research and practice. Our mission is to empower you with knowledge and inspiration, aiding you in your journey to optimal health.

**Dr. Jill 00:37**

Today is no different. I have my dear friend who is an expert in mold, mycotoxins, and chronic illness. We're going to dive deep into all of the questions and, hopefully, the answers that you might want regarding the complexities in chronic illness that we see in our society. Whether you're facing it or a friend or family member is, hopefully today you will get the answers that you're looking for.

**Dr. Jill 01:00**

Dr. Nafysa Parpia is a board-certified naturopathic doctor and director of naturopathic medicine at Gordon Medical. Throughout her career in holistic medicine, she has focused on treating patients with complex chronic illness. She specializes in tick-borne illnesses, Lyme disease, environmentally acquired illness, mold and mycotoxin illness, autoimmunity, fibromyalgia, long-haul COVID, and chronic fatigue syndrome. She uses cutting-edge laboratory testing and deep intuition applied to the full range of scientific data to create comprehensive treatment plans that are highly personalized. Dr. Nafysa, thank you so much for being here today!

**Dr. Nafysa Parpia 01:39**

Thank you so much for joining me. It's always such a pleasure to be with you!

**Dr. Jill 01:43**

I agree. It's so wonderful to connect with another human being who uses science, the mind, and intuition and pulls it all together. Before we start into the complexities and chronicities of illness, tell us a little bit about: How did you get into naturopathic medicine? And how has your journey been to arrive here?

**Dr. Nafysa Parpia 01:59**

Yes. A long time ago—many lifetimes ago, it feels like—I was doing fundraising and it paid my bills. But I was not tapping into my human potential. I knew there was so much more for me to do in the world to help people. I became a yoga instructor. That was wonderful. But still, I knew there was more. So I went to a naturopathic medical school and they trained us to be great primary care physicians. I was so happy to get that training and to be teaching yoga at the same time. Still, I knew there was more. I wasn't finding that I was able to go deep with people. Maybe I could help people with a common cold or with some basic primary care. I was aching to work with people on a very deep level of healing.

**Dr. Nafysa Parpia 02:56**

So I sought out Dr. Dietrich Klinghardt while I was in Seattle at Bastyr. I sought him out to learn from. I took all of his courses and ended up, after I graduated, spending a year in his clinic, learning from him and his top doctors there. I remember sitting on a table once when he was with a patient and I was covered in goosebumps. I knew: "This is my patient population. These are the people who I'm going to be working with"—people with complex chronic illness. The mysterious illnesses. It was really this deep longing within me to work with people in their human condition and in healing that led me here. Then I sought out all kinds of other training to learn this, which we're not taught in medical school or naturopathic school. So that was my journey that led me here.

**Dr. Jill 03:59**

Well, I am so glad you're here today. You and I share this really deep, profound understanding that there's science and our analytical mind and we love to use that—and you're one of the most brilliant people I know—but at the other side of that is our deep wisdom and intuition. And there's a huge piece I feel with these complex chronic illnesses that we need to bring in that heart-centered medicine. Let's just start there. What is it about your approach to medicine? And how do you bring in that heart-centered approach? You and I know that some powerful answers and insights come there. And it's always such a pleasure to talk to you because not everyone lives in that space and sees patients with that authenticity.

**Dr. Nafysa Parpia 04:42**

It's true. You and I both live in this space, so we bring it to our patients. You and I

both use a lot of scientific knowledge and data looking at people's biochemistry, genes, microbiomes, and toxins. We can get into all of that afterward, but I love that you want to start this conversation this way, talking about the heart of medicine. How do we approach all of these biochemical things with heart?

**Dr. Nafysa Parpia** 05:14

One thing I know is that when any patient comes with a complex chronic illness, they're in a very sacred time of their life. It's like we're walking on holy ground as we're working with these patients. They're in a stage of healing. But we know it's not just physical healing. When the body is speaking so loudly in so many different systems, it's really also about the spirit speaking, the mind speaking—the whole being. The body is giving us messages on the spirit and on the mental level that want to be heard and that want to be integrated with the biochemical healing that we also bring. So for me, it's [about] really listening to that patient and understanding what it is that's aching to be heard and seen in this world. And we just move from there.

**Dr. Nafysa Parpia** 06:19

Some people have a spiritual practice; some people don't. It doesn't matter, as long as it's helping that person find the depths of who they are and their self-value and self-love. But I also know that we as doctors have to, I know you do the same thing... I have my own practice to keep myself clear so that I'm not bringing my own filter, my own traumas, or my own issues to the table. We doctors are human as well, so we need to keep ourselves clear, put our own stuff to the side, and approach our patients as the clear vessel [and be] the best that we can be in order to really be there, hear, and understand. And I pray. I pray for divine guidance to show me the path for each patient.

**Dr. Jill** 07:12

That's so well said, and I could not agree more with you. It just reminded me. I pulled out this quote I heard this morning. It was a Russian lady who had been through trauma and war and lost her husband and her son. Over and over and over [it's been] difficult, difficult [for her]. Way worse than you and I have maybe ever faced. She said: "Every trouble wants to draw the very best of you back into the world." I wrote it down. I hadn't planned to share that, but it makes so much sense with what you're saying.

**Dr. Jill** 07:44

So often [in] these difficulties, these chronic illnesses—and you and I are in the field of medicine, so we're dealing with complex chronic illness that maybe takes us off track from our plans for a career, marriage, having children, or whatever kind of thing that we think is the next step—we get ill from something. Something's happening to change that. But it's actually drawing us into the world to fully participate. So I love that you said that. Truly, I've found—I've had a lot of illness in my life—if you view illness as a teacher, it can be so transformative instead of disruptive. It's hard to face it and it's really hard when we start asking why. But I think there are better questions. Maybe we can say, "How can this transform us?" instead of "Why is this happening?"

**Dr. Nafysa Parpia** 08:27

Right. And patients know. Very often, I'll tell them: "At some point, I think you're going to tell me what the silver lining is. I think you're going to tell me why." A lot of times people say: "You know what? I already know why. I already know that I'm becoming wiser. I'm becoming stronger. I'm becoming more me. And even though I've hated being sick, I'm really grateful for it because it's lifted me to this level of healing on all levels." I would say that almost every single patient who's come out the other end from being sick to wellness has said this. I can't think of a patient who hasn't thanked the illness at the end of the day because they're walking stronger. They're walking healed in every aspect. They're a different person.

**Dr. Jill** 09:21

Yes. I love that because if we can see it as transformative, it truly can be some of the best things that happen. It involves suffering. It involves difficulties. This is not easy. We're not saying that you should just walk and skip along and say everything's great, because it's not. But there's an understanding that there's a deeper meaning.

**Dr. Jill** 09:38

Before we go on to chronic complex [illnesses such as] Lyme, mold-[related illness], and long COVID, I want to ask you a quick question and I'd love to hear. You mentioned centering yourself and your own practices to be in that place. Are there any practical day-to-day things that you try to incorporate for your own health and

mental and spiritual well-being every day that would be helpful for our listeners to hear?

**Dr. Nafysa Parpia** 09:59

Yes. I meditate every day. I say prayers. I make my prayers very, very specific. I have two spiritual teachers from indigenous healing practices. I remember one of them teaching me about a decade ago: "Really say the fine print of your prayers and connect with God" or the great spirit or whatever someone wants to call it—consciousness or that deeper sense within you if you don't believe in that. But to really connect with consciousness and to say the fine print, like you're looking at the back of a shampoo bottle or an instruction bottle. Say it very clearly to yourself. That's what I do. I'm very clear on what my prayers are, manifesting them very specifically. I also meditate using [my] silent mind as much as I can to focus on my breath. So it's a combination of both of those things. Also, [it's about] connecting with nature and the earth as much as possible.

**Dr. Jill** 11:09

Great tips—and so practical—that we can all access.

So, let's shift now to the complex chronic illnesses. In your bio—we'll mention links too at the end of this show—you've got a summit coming up. Give us the title of that and then stay tuned for links wherever you're watching this podcast if you want to see more of Dr. Nafysa. But what's the title?

**Dr. Nafysa Parpia** 11:29

It's called "Cracking the Chronic Illness Code: Ticks, Toxins & Mold". I'm very excited. You're on the summit. Everyone can watch YouTube here. It's great!

**Dr. Jill (pre-recording)** 11:41

Hey, everybody. I just stopped by to let you know that my new book, *Unexpected: Finding Resilience through Functional Medicine, Science, and Faith*, is now available for order wherever you purchase books. In this book, I share my own journey of overcoming a life-threatening illness and the tools, tips, tricks, hope, and resilience I found along the way. This book includes practical advice for things like cancer and Crohn's disease and other autoimmune conditions, infections like Lyme or Epstein-Barr and mold- and biotoxin-related illnesses. What I really hope is that as you read this book, you find transformational wisdom for health and healing. If you

want to get your own copy, stop by [ReadUnexpected.com](http://ReadUnexpected.com). There, you can also collect your free bonuses. So grab your copy today and begin your own transformational journey through functional medicine and finding resilience.

**Dr. Jill** 12:37

It'll be so fun! Yes, we have another interview. So let's dive into that. Let's just start with the first one: Ticks, tick-borne infections, Lyme disease. Some people who are listeners are very, very familiar with this; others are not. Maybe let's just start with the framework: How often are you seeing this as part of the chronic illness? And how does it interplay with the other things you mentioned—environmental toxins and even long COVID?

**Dr. Nafysa Parpia** 13:01

Yes. This is something I see almost every day in my practice. We are a Lyme clinic but [we do] so much more than Lyme, [including] environmental medicine. When someone comes in and they have a diagnosis of chronic Lyme—or say they don't even have a diagnosis of chronic Lyme, just a mystery diagnosis but there's a lot of pain in their body and mysterious symptoms—I'm testing them for Lyme. But I'm testing them for many other things at the same time. I think that people like to think: "Oh, it's just Lyme. Treat my Lyme!" But I tell my patients: When you've been sick for a long time and went to infectious disease or to a Lyme-literate doctor and it didn't work or it backfired, there's something else that's going on. This isn't just Lyme.

**Dr. Nafysa Parpia** 13:52

I tell them there are usually five reasons people get sick—five root causes: Infections, toxins, structural integrity issues, lifestyle, and diet. When it comes to infections in these patients, there are usually multiple different infections. It's very common that there are tick-borne illnesses. I'm testing for that. That could be Lyme, Bartonella, Babesia, Ehrlichia, or Rickettsia. It's very common for people to have all of these infections from the tick. But they also typically have parasites. They have fungus issues. They have a high viral load, different viruses, and different bacteria in different systems of the body—the genitourinary system, the gut, possibly the lungs, and colonizations in the sinuses, the nervous system, and in the connective tissue if it is a tick-borne disease. They've got all these different layers of infection in different systems of the body.

**Dr. Nafysa Parpia** 14:57

They often have environmental toxins. I know you know all of this but for our audience, I just want them to understand what we see every day: Heavy metals—very, very common—glyphosate, mycotoxins, pesticides, solvents. Very common. Structure integrity issues—I'm usually seeing two different extremes: People with tight tissues and tight fascia. When that's happening, there's no optimal circulation or lymphatic flow. A lot of our patients also have lax ligaments. They just come in that way genetically. They're that way. But if they have mast cell activation syndrome, those chemicals from the mast cells are tenderizing their ligaments. Imagine this ligament here that's holding up the brainstem. If that gets lax, there's pressure on the brainstem. So we see people with cranial-cervical instability.

**Dr. Nafysa Parpia** 15:53

Now, lifestyle—I'm talking about sleep but I'm also talking about trauma, adverse childhood events, the trauma of being ill, and then diet. Most of our patients have their diet dialed in by the time they come to us. But all their lives, they've probably had the standard American diet—food wrapped in plastic, not organic. I tell my patients: If you have just one of these issues going on and it's been chronic [for] six months or longer, chances are you're going to see some pathologies. But most of these patients have all five of these going on at the same time, and it's been a minimum of six months, usually years. Now it becomes a very personalized thing.

**Dr. Nafysa Parpia** 16:37

We've got immune dysregulation, first of all—five of these issues—creating inflammation. That inflammation then meets the genes and we get these secondary illnesses: Chronic fatigue syndrome, long COVID, fibromyalgia, or chronic Lyme [disease]. Those are secondary illnesses, but they become the person's own expression. It's more now about how the body, the mind, and the spirit—the whole being—have responded, even more so than the triggers once they've been sick for a while.

**Dr. Jill** 17:17

I don't know if I've ever heard such a concise, clear... I can picture the poster where all these things are coming together, and it makes so much sense. Hopefully, those of you listening are seeing yourself in some of those places. What I would love to

ask you, for the sake of our listeners, is: Say someone comes in and they have a history of Bartonella and Lyme. They've had mold in their environment. They have structural issues with hypermobility. Maybe they have the diet somewhat dialed in with a gluten-free, dairy-free, and sugar-free diet. Not perfect as far as timing or resting. This whole thing. Where would you start? Give us a little bit of a rundown on how you'd approach that patient.

**Dr. Nafysa Parpia 17:56**

I usually like to start with what's downstream first. I think of all the root causes: Infections, toxins, lifestyle, structure integrity, and diet. I'm often starting with the... I was about to say immune dysregulation. But really, the first place I start—one of the first places you and I just started with this conversation—is the heart, really knowing: Who is the person in front of me? Where is their heart? Where are they in their life? What do they want? Can they picture themselves being well? If they can't, then I know that we're starting in a different place than somebody who can see themselves being well. Some people are afraid to be well. [It's about] really understanding: Who is in front of me? What are their fears? What are their hopes? What are their dreams? What are their goals? What emotional and spiritual state are they in, in addition to the physical state they're in? So I'm starting there.

**Dr. Nafysa Parpia 19:01**

A lot of the healing work starts there. We have healers that we work with, or I might be doing the work with them. When it comes to biochemistry, I start working on immune regulation first. Most of our patients have, as a downstream effect, immune dysregulation—meaning they've got a hyperactive immune system on one side and a weak immune system on the other side.

**Dr. Nafysa Parpia 19:25**

On the one hand, they've got autoimmune conditions—rheumatoid arthritis, Hashimoto's, lupus, or Sjogren's, for example. They have mast cell activation syndrome. I'm sure there are patients saying, "That's me!" They've got this hyperactive immune system. On the other hand, they've got a weak immune system. They can't mount the appropriate immune responses to kill off the multiple chronic infections that they have. Or their immune system is more permissive to infections that we're commonly exposed to. Or infections that are dormant—for example, the herpes family of viruses like Epstein-Barr virus or cytomegalovirus.



They've been dormant, but something comes along—maybe COVID—and the inflammatory cytokine flare wakes up those dormant viruses. So it's common that these people have hyperactivity and weakness in their immune system at the same time.

**Dr. Nafysa Parpia** 20:22

I'm working to regulate that. That's one of the first things I do because I know that if I were to go after their chronic infections first or detoxify them first, I'm just going to increase inflammation. It just comes with the territory. We kill infections; we're going to create inflammation. But these patients are already in a highly inflamed state. They're stuck in cell danger response 1. Inflammation is meant to be transient. But with these patients, their immune system doesn't know what transient means when it comes to inflammation because they're stuck in creating an inflammatory process that was originally [meant] to protect the body and contain the insults. But their bodies don't know how to stop.

**Dr. Nafysa Parpia** 21:06

So I'm working on stopping that inflammatory process because, when I kill the infections, I don't want to contribute to more inflammation. I tell my patients: "It's like I'm packing new soil into your garden because I'm about to pull out some nasty weeds. If I start to do that now, we're going to create landslides. So let's set the stage first. Get your body ready for this." So, I'm using a lot of peptide therapies to modulate their immune response.

**Dr. Nafysa Parpia** 21:35

Another downstream effect I'm seeing is hormonal dysregulation. I know you're seeing it in your patients all the time. [It's about] working on their hormones and the terrain of their system so that when it comes time to work on the big root causes, they can handle it. And that's where we start.

**Dr. Jill** 21:54

That makes so much sense. It is true. Whether you're listening or are a doctor like you and I are, if you just start to blow up the infections, which we can do, they're in a world of hurt. Their body can't handle that toxic load. The other thing I heard in your story as far as how you approach patients is that you're creating a space for them to feel seen and heard first. I think what you're doing is creating safety, right?

That is such a core—creating that bond, that connection to your practitioner. If you're out there listening and don't have a doctor who can sit with you, really listen, and [make] you feel heard, you probably need to find someone different. Honestly, being heard and listened to and feeling safe like you're under their care is so core! And let's just digress for a moment and talk about this safety, because if the body isn't feeling safe, there's no amount of healing that can take place, right?

**Dr. Nafysa Parpia** 22:47

It's so true. It's up to us to initiate that safe space, because then the patient will tell you everything. And we need to hear everything without judgment.

**Dr. Jill** 23:01

Right. I love that because I felt, as you were talking, that's such a foundation. And you're just going through because that's what you do, but I wanted listeners to hear. This is really transformational. I feel like the secret weapon—and I'm sure your clinic and mine—is unconditional love and acceptance. And I'm sure you've had this as well, where patients are in tears because: "Doc, no one's ever listened to me. No one's ever really heard." And that ability to feel seen and heard is at the core of healing. So I didn't just want to gloss over that.

**Dr. Nafysa Parpia** 23:30

Yes. People say that. "This is the first time I felt heard. I felt listened to. It's the first time I have hope." And what a blessing it is, right, Jill?

**Dr. Jill** 23:40

It is. It's like the joy of why I go to work. And hopefully, for those listening, you've either experienced this or you're about to. There's no more powerful healing than truly feeling understood.

**Dr. Jill** 23:55

So we talked about how they come. You're doing the terrain. There's something that you've shared and it's so powerful—the pre-tox. Let's talk a little bit about what that term means. And how do you go about doing a pre-tox?

**Dr. Nafysa Parpia** 24:09

Yes. Just like we need to prepare the patient for treating chronic infections, I'm also at the same time preparing them for detoxification. Sometimes we use substances

when it's appropriate to pull toxins outside of the cells—chemicals, pesticides, glyphosate, and mycotoxins. They bioaccumulate in our fat cells and metals bioaccumulate in the cells of our organs. Lead likes to bioaccumulate in the bones. We can use certain medications to pull the toxins out of the cells so that we can flush them out of our body through the organs of elimination—the liver, kidneys, the gut, and the skin.

**Dr. Nafysa Parpia 24:59**

Before we start to do a cellular detox, we want to make sure that those organs of elimination are prepared and ready to handle a load. Also, I want to clear up toxins that could be floating around in the blood because they do. I'm setting the terrain, giving herbs to support the organs of elimination, and looking at what toxins might be floating around the blood or the urine. If there are toxins floating around at a certain level, then I think there's an acute exposure. I want to find out what that acute exposure is and stop that before we even start to do a cellular detox. We could do a cellular detox until the cows come home, but if they've gotten acute exposure, it's not going to work. They're going to keep getting exposed. So it's [about] understanding what's happening in their system—in their organs specifically—before we can start to pull the toxins out.

**Dr. Nafysa Parpia 26:00**

A lot of people might have chronic UTIs. That's not the right time to detoxify them. I want to pre-tox them by supporting the genitourinary system, if that's an issue. A lot of people have mast cell activation syndrome. I want to calm down the immune system because I know when I start to detoxify them, their bodies are going to respond poorly to two things—to the toxins as we pull them out of the cells, but also to a lot of the herbs or medications we might give to help with detox. So it's [about] working on the person system by system—exploring system by system and working on it systematically like that—then preparing them for detox.

**Dr. Jill 26:46**

It's so helpful. What are some of the things that people could do at home, maybe before? Maybe they have a practitioner like you or me out there. When I think of sauna or Epsom salt baths... I always learn from my naturopathic friends because you guys have so many tools. What are some of the tools that people could practically try and do for pre-tox or gentle detox in their day-to-day lives?

**Dr. Nafysa Parpia 27:12**

Yes. Sweating for sure. But some of our patients have a hard time sweating or have a hard time in the sauna. Maybe because they have mast activation syndrome, the heat is too much for them, or the sauna mobilizes too many toxins. So you also probably tell them: "Just start for 10-15 minutes if you can't handle that."

**Dr. Nafysa Parpia 27:32**

One of the things I want to make sure of is that the patient isn't constipated. A lot of patients come to us with constipation. If simple things to do to help with constipation—you want to talk to us, for sure—like some magnesium, some more fiber or more water are not helping, then we need to explore that more. But usually, people can help themselves with their constipation if they're not too sick at first. Eating an organic diet and having clean green products—personal products or makeup—are good first steps.

**Dr. Jill 28:12**

I love that—the clean air, clean water, and clean food, which are so foundational to any sort of pre-tox or detox. Let's talk just briefly. We mentioned long COVID. Unfortunately, because it affected so many millions of people, I've seen statistics of up to one in five, maybe higher, affected. How do you see post-COVID affecting people with chronic complex illness? Give us a little framework of that.

**Dr. Nafysa Parpia 28:35**

Yes. What's very interesting is that [with] our patients—prior to the pandemic and during the pandemic—we thought: "Oh no! Our patients are so sick. They've already got complex chronic illness. They're going to end up with long COVID." And I'm sure this happened with you too: Your patients did not end up with long COVID because we were already pressing on the multitude of infections. We were already detoxifying them. We were already working on the inflammatory pathways in these patients. So along comes COVID and they're okay. They do just fine.

**Dr. Nafysa Parpia 29:14**

It's the people who were not our patients prior who'd come in and have long COVID. They've never been sick before. Maybe they were tired, tended to catch colds often, or had some digestive issues. But nothing major. They could go along with their lives just fine, but they had this low-grade inflammation. And maybe their

immune system was keeping a lot of viruses or other infections at bay. Their immune system could handle it. But then comes spike protein. Then comes microclots from long COVID. Then comes the inflammatory cytokine flare. And suddenly, there's inflammation in the blood vessels from the microclots. Suddenly, there's spike protein, possibly in the blood vessels and the organs. We can't measure for it yet—not specifically—but we can look at some markers that give us an idea, and there's inflammation. And infections that were dormant are suddenly at the surface. They're suddenly awake.

**Dr. Nafysa Parpia 30:17**

Suddenly, a person is in chronic Lyme. They didn't even know they got bit by a tick, but they've got the symptoms. It makes me want to test, so I do. And I find that. I find tick-borne diseases. I find HHV-6. I find mycoplasma. I find Epstein-Barr virus, cytomegalovirus—it's not usually an 'or,' it's an 'and' all of these bugs. And then we look for the toxins. And yes, the toxins were there. But their immune system could handle it. Now suddenly, they can't. And that's long COVID in our patient population.

**Dr. Jill 30:53**

That's a great framework. I always think of it as a load. We've talked about toxic load before, and it's like one more thing that breaks the straw that breaks the camel's back. Often, for people who were going along okay, it was just this one more thing or one more episode. And the severity of COVID doesn't really determine [the severity of long COVID]. I've probably seen more patients who are suffering after a mild case of COVID than some of the early, really severe cases. So it doesn't necessarily go along with how severe your COVID was.

**Dr. Nafysa Parpia 31:22**

Right. As we're speaking, I'm thinking about something that Dr. Robert Naviaux shared with Dr. Eric Gordon and me recently—how complex chronic illnesses are about the person's own expression of illness. Here we are talking about these chronic illnesses and the secondary illnesses that result from a bunch of primary root causes. We meet with him often and we're very close to him. Something he said recently really, really stuck with me. He said that in almost all of these acquired complex chronic illnesses—chronic Lyme, chronic fatigue syndrome, fibromyalgia, mast cell activation syndrome—there's no one gene responsible for the same

diagnosis in different people. He said that it's hundreds of different genes and hundreds of different biochemical variables acting in a coordinated fashion that make somebody arrive at these diagnoses. And they're different for each person.

**Dr. Nafysa Parpia** 32:32

He was looking at different metabolites. Basically, he was looking at people with the same diagnosis and their different abnormal metabolites. He found that 25% of the chemicals were the same in people with the same diagnosis. The other 75% of the chemicals were different; they were unique to each person. Really, by the time someone has a complex chronic illness, the illness has become their own shtick—their own expression.

**Dr. Nafysa Parpia** 33:04

Going back to treatment, the treatment is about personalization. I know you do this; I do this. We talked about: How do we first start? We start with making the person feel safe. We start with immune modulation and nervous system regulation. At the same time, we also know that we're looking at somebody whose expression is totally different from the patient we just saw and the patient we're about to see, even though they have the same diagnosis. So we've got to make it so personalized.

**Dr. Jill** 33:36

I love that we're wrapping in this direction because that is such a core. I'll just go off for just a moment. A lot of times on social media, people who maybe don't have a medical degree are promoting out there: "Hey, here's this protocol!" Spend this large amount of money to do this protocol because "it'll fix everyone!" I'll just warn you if you're a listener out there—and comment if you've seen this or heard this or even been susceptible to it—if someone says there's a one-size-fits-all, it costs this much money, and "we'll fix you" and everybody does the same thing, you and I know, Dr. Nafysa, that that does not work. And that does not really get to the root cause.

**Dr. Jill** 34:11

It's funny because even in my work as a teacher and educator—the same as you—often, I ask to give protocols. I'm always like: "There's no protocol! There's no protocol. The core of this work is very, very personalized." Yes, habits like clean air, clean water, and clean food can be for all of us. But as far as really getting well, this

absolutely requires a unique and personalized approach. And I love that you mentioned and emphasized that.

**Dr. Nafysa Parpia** 34:40

When our new Patient Coordinator first started that role, she would say to me: "I've got a new patient calling in. They're wondering if you do the CIRS protocol." For those of you listening who don't know, it's Dr. Shoemaker's mold protocol. Or, "Do you do the ILADS protocol?" And I told her: "Rachel, tell them that we have our own protocols and they're unique for each individual." No, I don't do that protocol because it's not going to work for our patients. For some people, these things will work, but we're talking about a different patient population. They've tried that. The illness has become so personalized. It's been going on for so long—at least six months—that you can't just throw a protocol on it anymore.

**Dr. Jill** 35:24

Yes. I love that we're talking about this. What's sad for me—you and I see this all the time out there—are these promises. I look, just see, and I'm like: "I hope no one falls for that because that is not going to work." And it doesn't mean you can't get started on your own. It doesn't mean you can't learn. I'm not saying you have to pay for an expensive doctor. But I'm just saying: Be cautious. There's no one-size-fits-all. There just isn't in this complex chronic [illness] world.

**Dr. Nafysa Parpia** 35:47

No. I'm so happy you're saying this.

**Dr. Jill** 35:49

Yes, you too. It's so important. I get a little upset when I feel people are being misled because I have this heart for the patient who's suffering and wants a fix and a protocol. But the truth is, that's not going to work.

**Dr. Nafysa Parpia** 36:02

No. It upsets me too, it really does, when people are given this promise: "Follow the protocol"—this mold protocol, this gut protocol, or this mast cell protocol—"and you're going to come out the other end." They do. Then they end up at our doors. They've wasted money.

**Dr. Jill** 36:21

Right. Well, you have seen amazing reversals and people getting well. So in the last minute or two here, what kind of hope, inspiration, or encouragement would you like to give our listeners if they are facing complex and chronic illness?

**Dr. Nafysa Parpia** 36:38

There are doctors out there like Dr. Jill, like myself, who are here for you and who have a lot of experience in this. It does take a lot of experience. I know there are other doctors out there who may not have the experience but who want to be able to treat complex chronic illness. Bless their hearts. I'm happy they're trying. But you need a lot of mentorship, a lot of training, and a lot of experience. The hope is that there are doctors like us.

**Dr. Nafysa Parpia** 37:18

In fact, we're both on the board of ISEAI, the International Society of Environmentally Acquired Illness. I can tell you that all the other doctors who are on that board have a lot of experience. You can trust them as well. And there are doctors who are trained through ILADS and ISEAI. That's where you want to find your doctors who've got the experience and the appropriate training. Dr. Jill and I turn patients around every day, all the time. It's what we live for. I know it's what you live for. It's what I live for. It's our life's work. So, we're here for you.

**Dr. Jill** 37:52

Yes, thank you for saying that. Thanks for mentioning ISEAI. We both love that organization. They do a great job training. It's nonprofit so we're just saying that for the benefit of the listeners.

**Dr. Jill** 38:01

You've got this summit coming up. And that's one of the reasons we wanted to come on. As you're hearing this, it should be out in the next week or two. You can sign up. It's all free. Tell us the name again. And then, wherever you're watching or listening to this, there will be a link below. You can check that out and get all this great information. Tell us just a little preview of what you've got coming.

**Dr. Nafysa Parpia** 38:20

Sure. It's called Cracking the Chronic Code: Ticks, Toxins & Mold. It's all about complex chronic illness. It is so much more than ticks, toxins, and mold. As you



heard Dr. Jill and I speak today, we talk about all the different possibilities that lead towards a diagnosis but also to treatment. We've got a lot of cutting-edge answers and ideas out there for you to join us with. So come and join us. It'll be great!

**Dr. Jill** [38:51](#)

Fantastic! Again, the link will be below or wherever you're watching this. If you need transcripts or full links, you can find all of my episodes on my website at [JillCarnahan.com](http://JillCarnahan.com). You can also find all of my episodes with transcripts on my YouTube channel. Just search my name and you'll find that, depending on where you're listening.

**Dr. Jill** [39:11](#)

Thank you so much for being here today. Thank you for the wealth of knowledge and, most of all, the heart and compassion that you bring to the world in the healing space.

**Dr. Nafysa Parpia** [39:19](#)

Thank you for the same. And thank you for having me here!