

Response from Amie Skilton

Firstly, there were a few aspects in the news.com.au article where I was misquoted. I addressed this on my social media channel stories, but I'll address the most relevant ones to your enquiry here also.

Regarding the health effects I experienced with exposure to a water-damaged building, Type 3 Alzheimer's or Inhalational Alzheimer's.

The term Type 3 Alzheimer's or Inhalational Alzheimer's was coined by neurologist Dr Dale Bredesen.

- Here's Dr Dale Bredesen's website: <https://www.apollohealthco.com/dr-bredesen/>
- Here is a link to his published paper (2016) on Type 3 Alzheimer's: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4789584/>

Regarding the reversal of cognitive decline, Dr Dale Bredesen has a growing body of work on reversing cognitive decline/Alzheimer's including:

- (2021) <https://pubmed.ncbi.nlm.nih.gov/34680464/>
- A more user-friendly summary of this can be found here: <https://www.apollohealthco.com/clinical-trial-results-2021/>
- (2016) <https://pubmed.ncbi.nlm.nih.gov/27294343/>
- (2014) <https://pubmed.ncbi.nlm.nih.gov/25324467/>
- He's also written several books on this subject including The End of Alzheimer's and The First Survivors of Alzheimer's - you can those here: <https://www.apollohealthco.com/books/>
- You can see a full list of his published research here: <https://pubmed.ncbi.nlm.nih.gov/?term=Bredesen+D>
- This paper refers to structural changes to the brain observed on a functional MRI with WDB exposure: <https://pubmed.ncbi.nlm.nih.gov/24946038/>

I was diagnosed with Chronic Inflammatory Response Syndrome (CIRS-WDB specifically) based on the criteria stipulated by Dr Ritchie Shoemaker - you can find his literature here:

https://pubmed.ncbi.nlm.nih.gov/?term=Shoemaker+RC&cauthor_id=24946038

CIRS can present in different ways for different people, likely based on their unique haplotype (there are several considered vulnerable to biotoxins, presented in a table called Shoemaker's Rosetta Stone - [this is a simple document explaining it](#)) and research is currently looking at variations on the genomic and proteomic levels.

What that means is not everyone who develops CIRS will necessarily develop cognitive issues like I did, or possibly not to the same extent - in other cases there'll

be a predilection for autoimmune disease or connective tissue problems instead.

So, to be crystal clear, Type 3 Alzheimers' is not a term that is interchangeable with CIRS however in a subpopulation of those that are genetically susceptible CIRS it is one outcome that might be anticipated. In the previously published case reports by Dr Dale Bredesen also specifies "there are many cases of CIRS without dementia, and conversely, there are examples of type 3 Alzheimer's disease without CIRS."

I became sick in the first half of 2017.

I first shared this publicly on social media May 2017, and multiple times since then.

I studied with ACES to become a certified mould testing technician in 2018

I then MC'd the ASBB's inaugural conference and shared my story. You can watch it here: https://youtu.be/_oJ6SuxvuVk

I made a submission to the parliamentary inquiry in 2018, I was still very unwell and traumatised so it was feeble but pushed myself to write something.

I have written multiple blog posts on my own website, spoken about multiple times on my own podcast, and have lost count of the amount of podcasts I've been interviewed on regarding this subject. I have collated some of them on the mould page of my website but this is not an exhaustive list:

<https://whatthenaturopathsaid.com/mould/>

This particular podcast interview is the most complete telling of my experience:

<https://imh.education/patient-journeys/overcoming-cirs/>

I also created clinician level training which I delivered at the end of 2020 on behalf of BioCeuticals (filmed at the ABC studio in Sydney actually). This course continues to provide practitioners an alternative way of learning about CIRS that doesn't require flying to the US to train with Dr Shoemaker:

<https://www.bioceuticals.com.au/webinar/watch/288>

For your information - I finished up at BioCeuticals at the end of 2020. This course remains available for clinicians via their site

I spoke about the role of mould/WDB/mycotoxins in hormonal disruption at the 2020 BioCeuticals Symposium. The first 24 minutes is relevant to your line of enquiry and you can view it here: <https://youtu.be/BtRBjYnPiBM>

I spoke about the role of certain toxigenic fungi and human health at the 2020 ACNEM conference also: <https://youtu.be/YiLTgBBENSk>

And, I've mentioned this at every keynote I've delivered since 2018.

As you can see, I am dedicated to raising awareness on this issue wherever and whenever I can. And I have been ever since I was well enough to speak about it.

Regarding my business, I'm primarily a clinician with a focus on all things 'Lady

Business' (women's hormones, skin, fertility). I don't treat mould patients for CIRS myself; partly because the aforementioned was my area of interest prior to falling ill (and still is) and, because I suffer from PTSD from my mould experience. I'm still not yet in a position to support a patient through this emotionally at this time, even though I'm educated in this area.

The one-off consultations I offer are an opportunity for me to direct someone to the right assessor, remediator and/or clinician for them and to provide them recommendations based on ANSI/IICRC and building biology guidelines.

Whilst I'm a certified mould testing technician (through the Australian College of Environmental Studies you can [view that here](#)), I initially completed this training in order to find a property I could recover in.

I'm unable, for obvious health/genetic reasons, to operate in this capacity without compromising my own wellbeing, even with appropriate PPE.

However, as a clinician who is trained to look for the root cause(s) of someone's health issues, once you know something like this you can't 'un-know' it. As result I am compelled and committed to raising awareness on this often misunderstood and misdiagnosed syndrome, both in the professional arena as well as with the general public.

I also created a self-paced course which I began working on in March last year, to provide an affordable and accessible option to bridge the gap between people searching for, well-intentioned but mostly ill-informed, information on the internet and hiring a building biologist/certified mould testing technician - which, BTW [by the way] cost me over \$1500 at the time I needed one for a moisture map and EMRI/HERTSMI-2 test.

The harsh reality is, by the time people identify their home, or office, is water damaged and potentially a factor in their ill health, they're often not well enough to work and therefore are not able to afford much in the way of professional assessment, treatment, remediation or relocation et al.

Regarding the connection with Dr Mark Donohoe, Dr Mark Donohoe is an integrative GP who has MC'd several events that I've been a keynote speaker for. As a result, I'm aware that he is an ACNEM-trained GP and thus has an awareness of environmentally-acquired illnesses, including those triggered by a water-damaged building.