I just read your blog, "Junk Science or Junk Blog". My name is Sharon Noonan Kramer. I am an advocate for integrity in health marketing as it pertains to reshaping public health polices over environmental illnesses.

I am mentioned in Dr. Shoemaker's Surviving Mold Blog (subject of your blog) critiquing Dr. Brewer's claim that antifungals can be effectively used to combat illnesses caused by mycotoxins. I have known Dr. Shoemaker for many years. We've worked together toward the goal of reshaping public health policies and physician education over illnesses caused by water-damaged-building (wdb) exposures. I have never met Dr. Brewer but have heard good things of his efforts to advance the understanding and treatments of chronic and debilitating environmental illnesses.

As accurately stated in Dr. Shoemaker's Blog, I moderated a U.S. Senate Staff Briefing over the Toxic Mold issue in 2006. Senate HELP allowed me to choose my panelists for the briefing. I chose the late Dr. Vincent Marinkovich (immunologist & physicist affiliated with Stanford University), Dr. Chin Yang (microbiologists & owner of P&K Labs), Dr. David Sherris (ENT affiliated with the Mayo Clinic), and Dr. Shoemaker (the only wdb biotoxin treating physician in the U.S.). The invitation to the January 2006 Senate Staff Briefing on "The Health Effects of Mold & Mycotoxins" provides the bios for my panelists and me.

From personal experience, I am a firm believer that antifungals can play an intricate role in curing some illnesses caused by fungi that are often found in wdb. So was Dr. Marinkovich (my personal physician) and Dr. Sherris (pioneer researcher for the use of antifungal nasal sprays limiting the need for sinus surgeries).

Prescribed by Dr. Marinkovich, I myself was on oral and nasal antifungals for two and a half years (2001-2004) after a wdb exposure in 2001. My eldest daughter, who has Cystic Fibrosis (CF) and Allergic Broncho Pulmonary Aspergillosis (ABPA), was on them for fifteen years (1998-1999, 2001-2014). Her's were prescribed from the University of California San Diego. Today, at age 32 with CF and ABPA, she is extremely healthy. My restored health remains excellent fourteen years after my wdb exposure in 2001 and subsequent treatment with antifungals.

With that said, I understand why Dr. Shoemaker is so displeased with Dr. Brewer and I share many of his concerns. To my knowledge there is no peer reviewed research which establishes proof that antifungals are effective when fighting illness caused by mycotoxins. There is no scientific proof that mycotoxins being found in one's urine coupled with improved health from the use of antifungals establishes that antifungals cure mycotoxicosis.

Neither Dr. Marinkovich nor Dr. Sherris - two of the pioneers in the use of antifungals to combat certain types of wdb induced illnesses - were of the opinion that their research established antifungals combat mycotoxicosis. To my knowledge, antifungals are proven to be just what their name infers --anti-fungal, not anti-toxin.

You write in your blog that "We are, and always will be, grateful to Dr. Shoemaker for his groundbreaking efforts to single-handedly bring to light the important and underappreciated subject of
biotoxicity, especially mold toxicity. His grasp of the biotoxin pathway and the clarity it brings to our understanding these illnesses has brought healing to thousands of suffering patients."

With all due respect, I don't think you fully comprehend what the above sentences really mean or what it is that Dr. Shoemaker has done and continues to do for which many owe him their gratitude. He doesn't just work within the realm of advancing the science. He works within the realm of reshaping public health policies.

Science and policy over the mold issue are two completely different animals. One works to advance treatment options for those who can afford to go outside of their healthcare provider systems. The other works to advance that physicians who work within healthcare systems are educated to provide proper treatment to the masses.

As it relates to advancing proper treatment for all U.S. citizens as a matter of policies, many of us, including Dr. Shoemaker, have been battling a government-backed insurer fraud scam of epic proportion for years. Many of us have suffered the retribution for doing so -- yet we continue on.

The entire concept that it is proven microbial toxins in wdb can never reach a level to harm is based solely upon two well-connected toxicologists' application of extrapolations to data taken from one rodent study, "the Veritox Theory". Public health policy and U.S. physician education have been systematically founded upon the greatly flawed Veritox Theory since 2002.

Basically, it is an insurer fraud scam used in toxic torts purposed toward staving off liability for illnesses caused by wdb. It is premised on the financially motivated misapplication of the linear-no-threshold risk-assessment model (Veritox Theory) to cause discrimination of the environmentally disabled and dying in physician practices, claims handling practices and toxic torts nationwide.

I am currently attempting to goad federal prosecutors to become involved in shutting down this fraud that has harmed so many and been aided to flourish by criminal means for now over a decade. One can read more of the matter at Katy's Exposure Blog under the title, "American College of Medical Toxicology, Choose Wisely to Sunset Your Mold Statement".

From the standpoint of advancing public health policies so everyone may receive viable treatment from mainstream physicians, the last thing we need at this point in time is the claim that antifungals combat biotoxin illnesses with no research studies to back that claim up. All that accomplishes is to give the "naysayers" ammunition to say that mold doctors are "quacks" - which harms the credibility of us all and makes the fight to change policy that much harder.

A good example of this is a recent publication of the CDC NIOSH by Dr. Elana Paige entitled, "Notes from the Field: Use of Unvalidated Urine Mycotoxin Tests for the Clinical Diagnosis of Illness -United States, 2014". I have no respect for Dr. Paige because of her extensive role in promoting the Veritox Theory as sound science upon which to base public health policy. But I have to agree with her that there is no proof that antifungals cure mycotoxicosis.
So I hope this email helps you to understand why Dr. Shoemaker and many others are displeased with the marketing of the concept that antifungals are proven to cure mycotoxicosis. Although that might well be the case, because it is not proven by research studies -- the concept is counter-productive to advancing medical treatments for wdb illnesses as a matter of public health policies.

The mold issue is complex and can be highly contentious. It's a multi-billion dollar issue with some deep pockets adversely impacted by advancements in science and in policy. I feel quite certain that Dr. Brewer did not mean to throw a monkey-wrench into the war for proper public health policies. However, it is imperative for the sake of advancement in public health to understand all aspects of this issue when promoting certain treatment protocols for certain alleged causations.

Being backed by the government and the insurance industry, the "naysayers" in the mold issue make for formidable foes. You are absolutely right that we all need to work together. Yet, in order for all to work together, all must understand how their actions may adversely impact the works of others who work in various other arenas of this issue.

Like Dr. Shoemaker, I am a firm believer in directly addressing problems in this issue when key ones arise. Dependant upon the magnitude of the problem, that may sometimes entail giving your colleagues a public tongue lashing for not understanding how their actions are adversely impacting others who work toward the common goal of helping those injured by wdb.

This is not simply a fight to be able to provide viable treatment for wdb induced illnesses for those who can afford it. This is a fight to change U.S. public health policies and mainstream physician education so that all may receive viable treatments; and fewer becomes sick in the first place.

So I hope this email helps to explain to you why Dr. Shoemaker chose to "rant". I certainly cannot speak for him regarding all points in his blog. But I know it is an important point that antifungals are not proven to cure mycotoxicosis; and that promotion that they are, is very frustrating for those of us who work to reshape public health polices for the good of all.

Warm Regards,

Sharon Noonan Kramer