



Transcript: #403 Breast Implant Illness - Is Explant Enough? with Sarah Phillippe

Wendy Myers:

Hello, everyone. I'm Wendy Myers of MyersDetox.com. Thanks so much for tuning in to the *Myers Detox Podcast*. Today we have a really good show for you. We have my friend, Sarah Phillippe on the show to talk about breast implant illness. Is having an explant procedure enough? Is removing your breast implants enough to restore your health? This topic is really close to my heart because I had my breast implants removed about five years ago. It was one of the best decisions I ever made for my health. I don't regret it for one minute. I am super happy I had it done but there's a lot of things you want to know before you remove your breast implants. Also, after having an explant procedure, what do you do to care for your body? Removing them is just the beginning. There are other things that you need to do.

Wendy Myers:

On the show, we're going to be talking about all the different toxins that are in breast implants. We'll talk about how if the valve is faulty, where they fill it with silicone or saline, the implants could then become a harbor for molds or different bacteria. It is a Petri dish that can then feed bacteria into your body. We'll talk about the immunosuppressive effect of breast implants. When your immune system's constantly having to deal with this toxic burden, it can make your immune system otherwise occupied and not able to deal with other infections. We talk about breast implants' contribution to autoimmune illness. There are lots of really, really important tips on the show that you probably will not hear from your plastic surgeon.

Wendy Myers:

Unfortunately, there are a lot of doctors and plastic surgeons whose business is promoting breast implants, their safety, long-term durability and things like that. For many thousands of women out there, who are in these breast implant illness Facebook groups, the evidence is to the contrary. Many thousands, tens of thousands, of women are getting sick because it's just another addition to the

toxic body burden in our ever toxic world. We're going to be exploring all these issues and more on the show today.

Wendy Myers: I know you guys listening are concerned about your body's burden of toxins. I created a quiz that you can take at heavymetalsquiz.com. It only takes a couple of minutes. After you take the quiz, you get your results. Then you get a free video series about all of your frequently asked questions on how to detox your body. What kind of test to take? How long does it take to detox? There are lots and lots of great videos after you take that quiz at heavymetalsquiz.com.

Wendy Myers: Our guest today, Sarah Phillipe, has a passion for restoring health that has taken her from a path of being a RN, to becoming a certified functional diagnostic nutrition practitioner. She's a true cellular detox practitioner and a breast implant illness expert. Sarah believes that the solution to reversing breast implant illness is about more than just the explanting. We need to all take responsibility for restoring our health by addressing all the root causes that contribute to chronic illness. It's Sarah's belief that the body has an innate desire to heal if given what it needs. She focuses on teaching women how to unlock their innate intelligence to heal themselves. You can learn more about Sarah and her work at reversingbreastimplantillness.com. Sarah, thank you so much for joining the show.

Sarah Phillipe: Thank you so much for having me, Wendy. It's such a pleasure sharing this really important information with your audience. I'm really happy to be doing it.

Wendy Myers: Tell us a little bit about yourself and how you got into the health field.

Sarah Phillipe: Like a lot of us, this really comes from a place of our own experience with chronic illness. This pain-to-purpose kind of scenario where you go through something and you discover that the conventional medical model really isn't able to help you in the way that you need help. We go down this path of trying to figure it out, digging for more, trying to learn more and acquiring more education to try to heal our own bodies. That's kind of what it was for me as well.

Sarah Phillipe: I was the picture, I guess I would say, of perfect health. I just never had a symptom to speak of. I was in great shape. I had no physical outward evidence that I was in poor health of any kind, or suffering from any kind of conditions. I was working the night shift as a nurse. I had been doing that for five years. I was really into physical fitness. I think that the next step for me in my fitness journey or lifestyle, was getting breast implants. That desire actually came from childhood. I think this is a really important point because we have to be so careful when we speak out loud to our children. Understanding how they are just like little sponges, absorbing the world around them and making meaning out of that. What you say sticks with them. That's what kind of happened in my life. Someone really important to me said to me one day, when I was probably 10 or so, "Suck in your stomach, stick out your butt." This was all posture-related

stuff she was trying to teach me, to have a beautiful appearance. "No one wants to see a belly hanging out like that, suck it in."

Sarah Phillipe: Another day she had said, "You're going to be four foot 11, just like me. Don't worry because you're going to have the "Johnson boobs"." It was that comment that really stuck with me my entire life. If I didn't get the Johnson boobs, there was something wrong with me. I wasn't pretty enough, womanly enough or sexy enough. I saw my mom, who's also small-chested, get teased a lot in our family. I didn't want that to be me. I wanted to be in the "Johnson boob club." I wanted to fit in and I wanted everyone else to see that I became what I was supposed to, or what I thought I was supposed to.

Sarah Phillipe: Fast forward, of course I finally made that decision that I had been wanting my whole life, that I never achieved naturally. I had my breast implants placed and it wasn't love at first sight. I really struggled emotionally with that new image. When I looked at myself in the mirror, it wasn't me. It wasn't my body. It wasn't the body I was used to looking at for the past 15 years.

Wendy Myers: Yes, when you first get them, they're like up to your neck.

Sarah Phillipe: They are.

Wendy Myers: They place them really high so they settle over the next few years.

Sarah Phillipe: Yes.

Wendy Myers: But it's weird looking.

Sarah Phillipe: Yes it is. I was doing everything I could to get them to settle faster. It was about, I would say within six months, I started developing unusual symptoms that were rather unexplainable. My initial symptoms were fatigue, hair loss, period problems, acne, irritability, anxiety, insomnia and things like that. Being really cold, like freezing cold, especially at night time. I would go to bed with a hot pack because I just couldn't keep my body temperature up. There was some weight gain, things like that. Initially, I thought, "Well, this might be my thyroid. I probably should get my thyroid checked." Conventional medicine said, "No. Your thyroid's fine." One thing was low sex drive too, so the comment was, "Maybe you should seek therapy for the depression or anxiety and maybe spice up your sex life."

Sarah Phillipe: I knew that wasn't the answer so I kept digging, I kept searching. I finally found a different doctor, a naturopathic doctor. I sent her my labs. I said, "If I spend the time to come and see you, will you treat me because clearly I can see an issue here?" She said yes, but that approach still was just more of like a bandaid with supplements rather than the medication. It wasn't ever really getting to the root cause.

Sarah Phillipe: Symptoms started to progress. I started developing IBS, gas, bloating, loose stool and food intolerances. I could tolerate almost no food. I had severe anxiety to the point where I couldn't really be in public. I couldn't be in large crowds. I had noise sensitivity, smell sensitivity and chemical sensitivity. Any kind of stimulation threw my nervous system over the edge. I couldn't tolerate my workouts anymore. It was too stressful. I couldn't tolerate any kind of stress whatsoever. My period problems got a lot worse. I ended up developing stage four endometriosis. It goes on and on.

Sarah Phillipe: I ended up getting diagnosed with all these different infections, gut infections, Lyme and all these things that were going on in my body. What was never explained was why this was happening? I even asked one of my functional doctors who I was working with at the time, because I had the intuition to ask the question, "Could my breast implants be a part of this picture"? His answer was, "I think that if we address these infections, that your implants won't be a problem. I think your immune system is just in overdrive because of all these infections." So, I put that on the back burner. At the time, no one was talking about breast implants or breast implant illness. I even did a Google search one day asking Google, "Symptoms developing after breast implants or breast augmentation." Nothing came up. There was nobody talking about this.

Sarah Phillipe: I couldn't just go off of a hunch. I progressed on this journey of trying to address all these things that we were discovering in lab work. I did get quite a bit better. I did some detox work. I did some detox work with you, Wendy. I addressed a lot of gut things, Lyme and things like that. I did get better, probably about 50% better. That's kind of where my journey started. I ended up going down the path of becoming a functional diagnostic nutrition practitioner because of this, so that I could try to figure myself out. Then I ended up doing more advanced training beyond that. It did require more than that to heal my own body. It wasn't as simple as diet, lifestyle and things like that. I had to do a lot more.

Wendy Myers: It's really problematic when you're trying to get to the root cause of what's going on with your health. Your health steadily declines with the breast implants, so it's easy to chalk it up to infections or other health issues that seem like very obvious causes of your symptoms.

Sarah Phillipe: Right, right.

Wendy Myers: That just makes it harder to diagnose what the root cause is.

Sarah Phillipe: I think there's so much crossover with the symptoms you may experience with breast implants and all kinds of other disease processes, right? It's really hard to pinpoint, especially at that time in my life where it wasn't easily accessible or easily discoverable information on the internet.

Wendy Myers: Exactly. Tell us what breast implant illness is? I've been on groups where there'll be 50,000 women on a Facebook group for breast implant illness, also known as BII. Tell us a little bit about those symptom clusters and what that looks like.

Sarah Phillipe: I think there is a lot of research that's still needed to truly understand breast implant illness. There's a lot of theories out there. A few of them are pretty prominent. When I talk about breast implant illness and I teach women about this, I generally talk about the fact that this is a very generalized term. I don't even love the term breast implant illness because it gives the breast implants all of the credit. In my perspective, they really are deserving of just part of the credit. I don't believe that chronic illness begins or ensues from just one thing, because of just one thing. It's usually multiple things that are going on in the body. This is kind of a more generalized term given to this process where vague symptoms, chronic symptoms, develop following breast augmentation. Either with silicone or saline.

Sarah Phillipe: It can happen at any point. For me, it was fairly quick. For some people, it's even quicker than that. For some people, it's within days of augmentation. For others it could be decades later. They just start developing symptoms that seem like they are out of nowhere. It can be characterized by things like chronic fatigue and cognitive dysfunction. Those two things were also things I experienced. I had severe brain fog. I had to read something probably 10 or 15 times before I could comprehend it, understand it, and really know what I was reading. I had poor word retrieval and memory loss. When you're in mid-sentence and you can't think of a really common word or somebody's name, things like that.

Sarah Phillipe: There are muscle aches and pains, joint pain, hair loss, weight gain or weight loss, temperature intolerance, low libido, ringing in the ears, heart palpitations, shortness of breath, night sweats, skin rashes, insomnia, hormone imbalances, swollen or tender lymph nodes, numbness and tingling, body odor, muscle twitches, vertigo, frequent urination, sensitivity to light, sound and chemicals. Feeling like you're aging pretty quickly. Visual disturbances, liver and kidney dysfunction, GI issues like I described. Food intolerances, different infections that are persistent and don't resolve like viruses, bacteria, fungus, parasites, things like that. Difficulty swallowing and chronic inflammation in general. Some people report feeling like they're dying. Headaches, dizziness, migraines, mood swings, emotional instability, anxiety, depression, panic attacks and suicidal thoughts. It's just such a long list.

Wendy Myers: I mean, that could be anything.

Sarah Phillipe: It could be anything.

Wendy Myers: That's why it's so difficult to pinpoint this. I had breast implants also. I had mine explanted going on five years now. I felt like I had pretty good health before, but there were definitely problems. There were definitely issues, fatigue, not

sleeping well and feeling like a train wreck in the morning. There was definitely a lot of symptomatology going on. I just thought, "Oh, I'm just getting older." You know?

Sarah Phillipe: Mm-hmm.

Wendy Myers: "Nothing major." After I had them out, I did feel better. I was very, very happy that I explanted. I think that a big roadblock for me not wanting to get an explant was worrying that I was going to have Frankenboobs. I was worried my breasts weren't going to look good. They wouldn't be big enough anymore. Lo and behold, I have boobs. I like smaller boobs better. I never wanted big, huge boobs that my doctor gave me. Most models have small breasts. All the supermodels you see in the magazines, they have very small breasts. They have boobs that are taped up. They tape them up and put them in pushup bras, so they don't have boobs.

Wendy Myers: For me, I'm really glad I had it done. I had a breast lift afterwards so I do have some scars, but my scars have healed really, really nicely. I'm super, super, super happy that I did it. You have to go find the right doctor and you don't want to do budget shopping for explant surgery, which some people might be prone to do. For me, it cost \$15,000. It's definitely not cheap. It's not typically covered by insurance. It cost just \$5,000 to put them in and \$15,000 to get them out. So, not an easy pill to swallow.

Sarah Phillipe: It's an expensive result of having them placed, having to get them out again. I don't know how many people's doctors tell them that they're not a lifetime device, but more often than not that's what I hear. "My doctor never told me that I need to get them replaced." Replacing them every five to 10 years is also very expensive to do. Either way, you're spending money on the maintenance or on getting them out.

Wendy Myers: I had mine replaced at one point because the first time I had my breasts done, the doctor cut some ligament that holds your breast to the side. He just didn't do it properly so I was like the "Uni-boober". I didn't have any cleavage. My tissue was raised in the middle of my breasts. I had to go and get a revision at that time, and it was another \$5,000 to do that. It was just a nightmare.

Sarah Phillipe: It can be a money pit, that's for sure.

Wendy Myers: Yes. Yes, it is. Let's talk about breast implants and how they impact the body, the hormones, the gut, detox pathways and whatever other organs that they can impact.

Sarah Phillipe: I think of breast implants as a stressor on the body on a couple of different levels. They're a foreign object, of course, so the body knows they don't belong there. They are a physical stressor that stimulates and kind of tires out the immune system. They're continuously activating the immune system, and that

eventually results in immune dysregulation. A lot of people end up with autoimmune conditions as part of this picture. They can end up overstimulating the immune system. This can lead to what I have seen as a muted immune response in other aspects, like to pathogens in the gut or more systemic pathogens. The body is too busy here dealing with this to also fight off what else is going on downstream. That results in lots of overgrowth of different opportunistic organisms, bacteria, fungus like Candida, viruses, parasites and things like that.

Sarah Phillipe:

They kind of grow unchecked by the immune system. I often see reactivation of once dormant pathogens. Things like Epstein-Barr can become a problem for some people. Pathogens that cause Lyme and their co-infections can also become a problem for some people that were never a problem before. This is where you'll see certain autoimmune-triggering bacteria, can also be overgrown. Things like Citrobacter, Klebsiella, Prevotella and Proteus. I often see low gut immunity on a stool analysis, so low secretory IgA. That's in every mucus membrane, but we can evaluate it in the gut. That's your body's first line of defense against a foreign invader that's entering your body, through food or water. It's an immunoglobulin that binds to pathogens for elimination. If you don't have enough of this, if your body has been trying to fight things off for so long that it starts to downregulate production of secretory IgA, then you end up with a really, really poor gut immune function. That paves the way for even more bugs to colonize and create problems in the gut, even more imbalance and even more toxic terrain. With this depressed immune system, the gut is left defenseless.

Sarah Phillipe:

Secondly, also a part of the same picture, breast implants are a chemical stressor because these implants, especially the silicone implants, but also saline, are full of cytotoxic, neurotoxic and carcinogenic chemicals and heavy metals. Those things are highly inflammatory to ourselves, our tissues and our organs, in addition to the silicone. We know there are almost 40 different toxic chemicals and heavy metals in silicone breast implants. These are things like methyl ethyl ketone, cyclohexanone, acetone, xylene and phenol. Those are all neurotoxins. You have things like dichloromethane, toluene and benzene. Those are carcinogens. You have things like talcum powder, formaldehyde, lacquer thinner, printing ink and metal cleaning acid. What are these things doing in breast implants, right? I mean, who thinks that all of these things are going to be found in their implants?

Sarah Phillipe:

Then, you have certain heavy metals like aluminum, tin, lead and platinum. Personally, I developed a severe allergic reaction to my wedding bands that are platinum, when I had breast implants. After I had them out, that reaction went away. I couldn't wear my rings for years because it created this ring of fire around my finger. I think it was because of that that I developed this reaction to platinum. Platinum isn't typically a highly reactive metal, but it definitely became that way for me. Silicone, itself, has been called an adjuvant connected

to certain autoimmune conditions. That can also be a trigger for autoimmunity to develop.

Sarah Phillipe: What we have here is this chemical soup. We know from studies that have been done that when silicone implants are heated to body temperature, that can result in gel bleed, silicone gel bleeds. You don't have to have a rupture for these things to be leaching into the lymphatic system, traveling throughout the body and kind of gumming up your drainage organs. Your liver, your kidneys, your lymph and things like that.

Wendy Myers: I had that as well. I didn't have an actual rupture but I went to do a breast exam for breast cancer called SonoCiné, because you can't do mammograms with breast implants. I've had two friends, just two friends in my small circle of friends that had their breast implants ruptured by mammograms. They can't see through the breast implants. I had a SonoCiné, which is like a moving ultrasound, and they found silicone all around the tissue of my breast implants. They were not ruptured when they were moved. That's what kind of prompted my decision, "Okay, these are leaking. It's time to get them out."

Sarah Phillipe: I didn't have any evidence, per se, of silicone bleed or migration of silicone other than, just anecdotally. I had swollen lymph nodes under my armpits and they would remain like that. Very tender and swollen for weeks at a time before that would finally mobilize again. Even after I had my explant surgery, I had that same symptom on occasion, just here and there, as things were mobilizing for a good year. It takes time for all this to get out of the body. It's not instantaneous. We know these things travel through the lymph. There's so much dense, lymphatic tissue in the breast area that it's very easy for these things to get into the lymph and then travel through the body. When capsules have been studied under the microscope, they look more like lace than like a completely closed, solid material. It's like there's holes there that things can escape from. It's definitely not uncommon to have these toxins and silicone make their way to the lymph.

Wendy Myers: It's just more toxins for your body to deal with. So many people on the show are talking about toxins, so many people have a really high toxic body burden. There's so many different chemicals in our environment. You just don't need this internal, constant, steady stream of toxins adding to what you're already ingesting every single day.

Sarah Phillipe: Exactly. I talk a lot about the silicone implants, but it's not just the silicone implants. Saline has its own problems. It also has a silicone shell, and silicone is also considered a neurotoxin that chelates our neurotransmitters and it's not just coming from breast implants. It's pervasive in the environment. We're finding it in personal care products and all of our cooking products. Now we're getting away from plastic and replacing that with silicone for food storage, and it's everywhere. It's this cumulative effect with all different types of chemicals. In addition to the silicone shell for saline implants, they also have the valve that is used to fill them with saline after they're placed. It should be a one-way valve,

but sometimes it's either defective upon implantation or there's some kind of trauma to the body and it becomes damaged over time. User wear, even.

Sarah Phillippe: Then you have fluid flowing back and forth from the body into the implant and vice versa. You can have a situation where microbes, the breast tissue is not sterile, so we know there are microbes in the breast tissue that can get into the implant and can colonize the implant. It can make it basically act like a Petri dish. There's a recent study that was just done where they were able to culture 11 different types of bacteria. It wasn't in a super high number of patients in the sample size in the study, but it was definitely present as an issue. Think about how that's impacting the immune system as well, this chronic infection where there's probably all these different inflammatory cytokines being recruited. In addition to the macrophages, which are trying to gobble up the silicone, it's creating so much chaos in the body.

Wendy Myers: It's a recipe for disaster. It's sad. I have a friend of mine that had implants put in, and then she had this emergency life and death situation where she was getting pain in her breasts. They got really hard. She had all these calcifications around the implant that then fused to her rib cage. When the doctor went to open that up to correct it, they had to have a team of surgeons fly in to do this surgery.

Sarah Phillippe: Wow.

Wendy Myers: It was crazy. Then, she got implants again and the same thing happened again. She had to have them removed. This time she had to have them removed and then she got a leukemia diagnosis.

Sarah Phillippe: Oh, God.

Wendy Myers: She had the implants out and they're healed now. She wants to get implants again.

Sarah Phillippe: I don't understand.

Wendy Myers: There's a lot of women out there that are, as my friend Diane Kater puts it, they're dying to be beautiful.

Sarah Phillippe: Right.

Wendy Myers: They would do anything to alter their bodies. They have this body dysmorphia where they just don't feel attractive unless they can form this image they see in a magazine, to have fuller breasts.

Sarah Phillippe: I can relate to that too, because the outward appearance was the reason I got mine placed as well. It wasn't like I had a deformity or I had cancer or anything like that. It was really just truly dying to be beautiful. There was a lot of mental and emotional work that I had to work on with myself, to get to the place of

deciding to get them explanted, even though I had that gut instinct, that intuition, that they were involved in what I was going through. I had spent so much money getting them in and I had wanted them my whole life. By the time they settled, I loved them and I didn't want to get rid of them. Like you, I was afraid of what I would look like afterwards.

Sarah Phillipe: At the end of the day, for me, what it came down to was the fact that I had had fertility struggles. We had been trying to get pregnant for two years with no success. I discovered, like I said, stage four endometriosis. It was at this point, this crossroads at which I thought, "If these implants are contributing to all of these health issues for me, what would they do to a growing fetus inside of me or a breastfeeding baby?" We know they bleed and there's all these chemicals and the immune response to all of that. I didn't want to be responsible for that. I also didn't want to be responsible for never conceiving and not being able to give myself and my husband our children. I'm still working on trying to conceive.

Sarah Phillipe: Stage four endometriosis is an uphill battle with fertility. For me, it was getting to the point of it no longer being about me. Realizing that the family that I wanted was far more important than an outward appearance. It took learning who I really am inside, to come to terms with that and be okay with it. Actually not just be okay with it, but be happy and excited about it. Learning to love my body exactly how it was created and to see the beauty in that. I absolutely have no regrets and I'm very happy with my physical appearance. I love them, I have this new found appreciation for my small boobs.

Wendy Myers: I do too. I love my small boobs so much. They're not even that small. I'm like, "I actually had boobs." I just didn't know it because I had implants when I was 19.

Sarah Phillipe: Oh, yeah.

Wendy Myers: I was skinny as a rail. It's just insanity, the body dysmorphia that young women develop looking at magazines and models that are hopelessly thin, impossibly thin. I had a supermodel body. I'm five foot 10 and I was like 128 pounds or something. I had a perfect body, yet I didn't think men would be attracted to me unless I had breasts. Complete insanity. Absolute craziness but that was my modus operandi. I just got implants based on that false belief.

Sarah Phillipe: Yep. Same here.

Wendy Myers: Yes

Sarah Phillipe: Same.

Wendy Myers: If someone is coming to the realization that they may have breast implant illness or that their breast implants are contributing to their symptoms, what are the next steps? What should they do?

Sarah Phillipe: I have been mulling over this for quite some time and thinking about it. For me, the next step was researching the right surgeon to have them removed. Once I decided to get them out, I knew I wanted to do it. I had actually been following Dr. Urzola for a couple of years, so I knew that if I made that decision, I was going to go to Costa Rica. It's really about finding a surgeon that you feel confident in, that you trust, that has a proven track record of unblock explant with complete, 100% capsulectomy. What that means is having the implants removed with the capsules around them intact, as one unit, without cutting the capsules open. Even imaging is flawed. You don't know with certainty until you get in there whether there's a rupture or not. Especially with silicone, right? Saline is a different story. You don't want to risk all of that silicone just spilling out into the chest cavity and even more getting into the lymphatic tissue.

Sarah Phillipe: I think that's really important, having them removed safely that way. Having someone who will go back in and pick out every little last speck of capsule that's still in there after the implants have been removed. That scar tissue that develops as your immune response to those implants, can continue to stimulate the immune system if it's left behind. In addition to that, we know that the capsule also can contain bacteria, biofilm, silicone and other toxins that are kind of interwoven into that matrix. It's just really important that the capsules come out for someone to have a really good, full recovery.

Wendy Myers: Right.

Sarah Phillipe: Finding a surgeon who has a really strong, proven track record is really important. Like you said, don't go discount shopping for surgeons because in the long run, it's not going to save you money because you're likely to end up needing a second surgery, if things don't go well or if you don't get better. You may want to have an exploratory surgery just to see, was it done right? Did they leave the capsule behind? Things like that. It becomes even more expensive if you try to find somebody to do it for you on a budget.

Wendy Myers: Make sure someone's qualified, too. As I was shopping around, I went to a guy in Beverly Hills and he seemed really amazing. I discovered he was a cosmetic surgeon. He wasn't even a plastic surgeon but they'll take your money to do the surgery if you let them.

Sarah Phillipe: I will say this: most surgeons who are putting implants in are not necessarily the same surgeons who are doing all of these explant surgeries properly. If they're putting implants in, and that's their bread and butter, they're not necessarily going to believe in breast implant illness or that breast implants are causing health problems for you. They're less likely to be on board with that or admit to that. You want someone who believes in what you're saying, who believes in breast implant illness, because that person is going to do the best thing for you and have your best interest in mind, rather than the bottom dollar or just taking your money.

Wendy Myers: I trusted my doctor because he had done over 300 explant surgeries. He'd done a study on them but even he did not really believe in breast implant illness. I didn't come in there saying, "I have BII. I need help. Get these out." I just said, "They're leaking and I'm ready to have them out. I don't like them anymore. They're too big." I said, "Can people develop autoimmunity from breast implants?"

Wendy Myers: "No, there's nothing in the research that supports that," he said with absolute certainty. "Well, can people develop a sensitivity to their breast implants?"

Wendy Myers: "No, there's nothing in the research that supports that."

Wendy Myers: "Are breast implants toxic? Do they leach toxins into the body?"

Wendy Myers: "No, there's no research or evidence to support that." Just total denial. My thought is if you can become sensitive to a strawberry, if you can develop a sensitivity to an eggplant, you can develop a sensitivity and a reaction to breast implants and all the chemicals in them. That, absolutely on its face, makes zero common sense whatsoever. You can become sensitive to any chemical, metal, fabric or food that you put into your body.

Sarah Phillipe: The fact that you found someone five years ago who had already done that many is pretty amazing. It wasn't common knowledge back then. You didn't have tens of thousands, if not a hundred thousand or more women talking about this and looking for an answer. That's pretty amazing in and of itself.

Wendy Myers: I went to Dr. Stoker in Marina Del Rey, and he was a very good doctor. I'm happy with my explant surgery. Any other tips or steps that women should be taking if they're thinking about removing their implants?

Sarah Phillipe: Outside of finding a trustworthy surgeon and interviewing more than one surgeon, I think it would be really important to feel confident in your decision and your choice, because they're working for you. You want to hire somebody to remove your implants that you really trust. As far as outside of that, I would say doing what you can to clean up your environment and to clean up your body. Starting to make diet and lifestyle changes ahead of your surgery, ahead of your explant surgery. Cleaning up the foods that you're eating, the water that you're drinking, the air that you're breathing, the things that you're bringing into the home for cleaning and for personal care. If you're in the market for new carpet, new furniture, paint or you're building a house, think about all the different sources of toxic exposure around you and try to limit or reduce what you can.

Sarah Phillipe: Don't stress out about all the things you can't control. Just work on the things you can control. What you can control is what you bring into your home, what you put on your body and in your body. Reducing what's coming in is really important. Then, I wouldn't do a ton of work on detoxing and working on the

gut and things like that prior to explant surgery because, speaking from personal experience, it's only going to get you so far until you remove that huge, significant source. For some people, I will say, I have had some ladies that I've worked with who had just gotten so much better, they decided, "I'm not going to get explant surgery." I wonder how many years is it going to take down the line before they're going to see a resurgence of symptoms? It's just a ticking time bomb.

Sarah Phillipe: Focusing on good nutrition, organic diet, things like that, and basic support for the microbiome. Opening up and supporting your drainage pathways, or as some people call them, detox pathways. Supporting your liver, supporting your kidneys and supporting your lymphatic system. Basic nutrients that support methylation and glutathione production, and things like that I think are really good. It's a good starting point.

Sarah Phillipe: This is the main message I teach people, is that healing is about more than the explant surgery. You can't expect to have the breast implants removed, and then instantly be all better, miraculously healed, no problems, all your health conditions or your symptoms are gone. You see that a lot on social media, which I think gives people this false impression that that's going to be the case for everyone. It's just not.

Sarah Phillipe: Interestingly enough, the women that I speak with, of course, are the women who either don't get better or get quite a bit better in the first month. Then, three to six months or a year down the line, their symptoms return. I think that we just don't have enough studies. We don't have enough research out there following women long-term, post-explant to know what percentage of women truly heal and get better with just the explant surgery. We have been following women for 30 days, 30 days is nothing. What's happening after that? Maybe it's true that some people are remaining symptom-free or significantly less symptoms for the rest of their life. That's not the people I see.

Wendy Myers: No. There's definitely a lot of work to be done.

Sarah Phillipe: Yes.

Wendy Myers: What can people expect after explant surgery? What can they look forward to?

Sarah Phillipe: I don't know what you experienced, Wendy, but for me, I had done so much work before that I didn't see this huge transformation. It wasn't super noticeable, but I did notice that I just felt less tense. I felt lighter. I felt more at peace, and other people noticed it as well. People, when I spoke with them said, "Your energy feels different. You sound, you look and you feel softer. You have a softness to you. You're not so aggressive and tense." That was an interesting shift. I think it was just causing me to remain in this state of fight or flight. Having those removed allowed my body to just take a deep breath, start to get out of that fight or flight.

Sarah Phillipe: You may experience a change in your symptoms, improvement in your symptoms or reversal of some symptoms. Cosmetically, for some people it can be a real shock to look at your breasts for the first time. Just know though that up to a year, they're going to change so much. Mine changed every day for quite some time. Then, they continued to change for up to a year. Not only do we need to work on cleaning up the downstream effect of having breast implants, the toxicity aspect, the fact that it's feeding unwanted pathogens, cleaning up the microbiome and working on balancing that out again, then restoring the balance to the immune system. We also need to take a look at what else could be contributing to this picture.

Sarah Phillipe: That is also part of what I teach people. Looking beyond the breast implants. For me, it was looking at what other toxic exposures do I have? I did a lot of work looking into whether I have any mold in the home? Do I have any root canals? Do I have any other toxic exposures I wasn't aware of? It does oftentimes involve looking a bit deeper, so you can get the big picture of everything that's contributing to the dysregulation in the body. So that you can address all those things and relieve enough stress on the body, so that it can heal itself, so that it wants to heal itself and it will do that.

Sarah Phillipe: That is basically how I approach healing. It is not just the explant surgery, not just the detox work, not just the gut work, but looking at what other stressors are contributing to this picture. I think that's really a hugely missed factor because people often assume that breast implants are the only problem, and that getting them out is going to solve all their problems. It's just not the case for most people. We have to look at the big picture here and take stock of other things in your life.

Wendy Myers: It's just the beginning. Getting the implants out is just the beginning.

Sarah Phillipe: It is.

Wendy Myers: Then, you have healing. I had drains for a few days after the surgery and it was not the easiest surgery to have. You get through it, you get through the pain and you move forward with your life. I think it's really important to work on this emotional trauma aspect.

Sarah Phillipe: Absolutely.

Wendy Myers: This self-hatred, worthlessness, powerlessness, loneliness, or other kind of emotional, low-frequency, negative emotions and emotional traumas that women have that contribute to them wanting the implants in the first place, or not wanting to have them removed. The man that loves you is going to love your soul. He's not going to be focused on your breasts and them looking perfect. You know what I'm saying?

Sarah Phillipe: Absolutely. Absolutely.

Wendy Myers: Do you work with people to help them move through this transition to removing their breast implants and healing?

Sarah Phillipe: Yes, most of the people that I work with are post-explant. I work with some very, very sick ladies who have had the implants out and are still not better. That is the reason my focus is on not just the downstream work, but also still continuing to dig for and discover those more upstream root causes that are also contributing to the picture that are preventing healing. I am working on putting together a pre-explant prep program so that people can go into their explant surgery preparing their body as much as possible for a really good outcome. Handling the surgery really well and healing really well, post-operatively. That'll be coming at the beginning of next year.

Wendy Myers: That's fantastic, because there's so much that you can do to prep your body.

Sarah Phillipe: Yes.

Wendy Myers: For any surgery, but especially for this one, you definitely want to be prepared so that you deal with the anesthesia, and then you have the most successful chance of healing as best as you can. Of having the least burden on your body. I think that's brilliant that you're doing this. It's so needed. If any of you guys listening have breast implants, you might want to think about removing this toxic body burden even though they look great. My boobs looked great before I had them removed but I felt kind of matronly. I felt like I'd gain a little bit of weight, and when I had these big boobs, they'd gotten a lot bigger. They turned from Cs to Ds, and I just felt like they were so huge. I felt very matronly. I felt like they made me look older. Not all women feel that way. They feel like their breasts look great and that makes it even harder to make that decision. When your health is on the line, if you don't have your health, you don't have anything. Health is wealth, so that should be your priority.

Sarah Phillipe: Absolutely. Absolutely. I mean, you look so great, Wendy. What I typically see, it's just amazing to watch, it's almost like people reverse age.

Wendy Myers: Yes.

Sarah Phillipe: Getting these implants out, their skin starts looking brighter, less wrinkled, just more vibrant and youthful. It's really pretty fascinating to see.

Wendy Myers: I definitely felt better. I've continued to feel better and better and better and better since I had my implants out about five years ago. I mean, it's just amazing how this health journey that I've been doing for over 10 years, just with this podcast and my website. I feel better and better and better and better. You really reap the rewards of making better decisions for your health.

Sarah Phillipe: Yes.

Wendy Myers: Sarah, thanks so much for coming on the show. Why don't you tell us where we can find you and where people can work with you, if people want to remove their breast implants?

Sarah Phillipe: My website is reversingbreastimplantillness.com. There's social media, so Facebook and Instagram are the exact same handle, @reversingbreastimplantillness. You can take a look at my work and what I offer, what I do, on my website. It's on the detox tab on my website. There's lots of information there about exactly what you would be doing working with me, and a little bit more about my own journey as well and how I got here. There's lots of resources on that website too. If you're looking for a surgeon, if you're looking for additional resources and support or you're early on in this journey, you might find some helpful things there for you.

Wendy Myers: Fantastic. Thank you so much Sarah, for this resource that you created for women. There's going to be much, much more demand in the future for it, I believe, as women start experiencing symptoms and having a number of different events contribute to their illness, one of them being their breast implants. Thank you so much for the work that you're doing in this, bringing awareness to this potential underlying root cause of women's health issues.

Sarah Phillipe: Yes, of course. It's just such a pleasure and it brings a lot of joy to my life. Seeing people get better and claim victory over their health. Being able to take charge of that and be in control of that. It's pretty amazing. It's just very empowering.

Wendy Myers: Yes, absolutely. Removing your breast implants and reclaiming your natural body is incredibly empowering, even though it doesn't seem so in the beginning before you have them out.

Wendy Myers: Well, Sarah, thanks for coming on the show. Everyone, I'm Wendy Myers. Thanks so much for tuning into the *Myers Detox Podcast* every week. I love discussing all these different topics around how to dramatically improve your health by removing toxins and things that emit toxins in your body. Thanks for tuning in every week. I so appreciate your presence here with me and going on this journey with you, on your health. Thanks for tuning in. I'm Wendy Myers at MyersDetox.com. I will talk to you guys next week.