



#628 How Whole-Body MRI Can Detect Over 500 Conditions Years Before Symptoms Appear | Dr. Daniel Durand

Dr. Wendy Myers

Welcome to the Myers Detox Podcast. I'm Dr. Wendy Myers, and on this show, we talk about everything related to heavy metal and chemical detoxification, how to do that, what that looks like, and health issues caused by toxins. But I also touch on one of the things that I love the most, which is bioenergetics and anti-aging, and we talk about more advanced topics on this show than you'll hear on other podcasts. I save the basics for the other shows. Today, we have Daniel Durand on the show. He is gonna be talking about Prenuvo's MRI scan. It's a whole body scan where you can detect well over 500 different health issues, including aneurysms and early detection of cancer.

You can look at if you have just different benign tumors or cysts growing in your body. There are so many other applications as well for this technology. To me, it just makes sense to be doing this rather than going to all these specialists and doing like their yearly screening exams, colonoscopies, and mammograms and things like that that people are expected to do. But we've got 33 organs. Most people are not gonna be doing scans of those every year, every few years. So it makes so much sense to do a whole body scan like this. I'm so glad that I did it. It gave me total peace of mind 'cause I'd wondered, do I have an aneurysm risk? Everyone's concerned.

I'm 53 now, maybe I should look into cancer. Is that something that I need to be concerned about? I was really happy that I got this scan and got a clean bill of health. I found a couple of little issues that I'm working on. It was a great experience for me and it's something that you can learn more about on the show, so tune in

Our guest, Dr. Daniel Durand, MD, is the Chief Medical Officer at Prenuvo, which is the world's largest and most advanced network of clinics exclusively dedicated to proactive whole body MRI for early stage disease detection. At Prenuvo, Dan leads the clinical and operational staff within Prenuvo's Clinics, overseeing Prenuvo's clinical research team, and serving as the president of the Prenuvo Medical Group. He's dual boarded in adult and pediatric radiology, having trained at Johns Hopkins University School of Medicine. Before joining Prenuvo, Dr. Duran held leadership roles at LifeBridge Health, including enterprise Chief Clinical Officer, Chief Innovation Officer, and system-wide chair of radiology.

During his tenure, he was instrumental in establishing the LifeBridge Health clinically integrated network, overseeing the care of over 150,000 individuals through value-based contracts with entities such as CMS, CMM, First Care, Johns Hopkins, Cigna, and Aetna. You can learn more and get your own whole body MRI at prenuvo.com/wendymyers. Daniel, thank you so much for coming on the show.

Dr. Daniel Durand

Thank you, Wendy. It's great to be here.

Dr. Wendy Myers

Why don't you tell us a little bit about your work with Prenuvo?

Dr. Daniel Durand

I'm the Chief Medical Officer at Prenuvo and the president of our medical group. I'm a radiologist by training, and for the last decade or so, I've been doing administration and leadership-type work, mainly in the health system space. I previously ran the Accountable Care Organization on the operational side for Johns Hopkins. And then for about a decade, I served in a number of roles, leading up to chief clinical officer

and Chief Innovation Officer with a health system in the Mid-Atlantic called LifeBridge Health.

Prior to that I did some stints in the private sector and had been traditionally trained as an academic medicine type person. So my work at Prenuvo really combines a lot of the things that I did previously in the accountable care world and in the population health world at the health system level. We're really thinking a lot about primary care as the linchpin of medicine, and we're thinking about how to empower primary care doctors and how to get preventative services done for patients to try to get ahead of them. But as you know, a lot of this doesn't happen in the conventional health system.

Being a lover of imaging and knowing what imaging can do to compress the time to diagnosis, seeing how imaging is ever more important to prevention, I came over to Prenuvo about 18 months ago for this role because it's my belief that whole body MRI and affiliated, we'll say omic type technologies are gonna be the next generation of screening and it's here today. We're doing this for patients today at Prenuvo,

Ads 05:04

And now a word from one of our sponsors. A big hidden stressor on our health today is something we're probably all staring at right now, blue light. From our phones, our laptops, our TV, our eyes and our circadian rhythm are constantly getting attacked. That's why I started using Bon Charge's blue light blocking products. Let me tell you, they have been a total game-changer. So I'm wearing the Maverick blue light blocking glasses right now, and they even come with their own prescription. So these are prescriptions, and that's what's prevented me from using blue light blocking glasses in the past because I wear prescription glasses for reading, and so I need a pair of blue light blocking glasses that are prescription.

Bon Charge's science-backed blue light blocking products allow you to mimic ancestral light sources from night to day. It is super important to use these products when the sun goes down, because when you are looking at blue light, you're basically communicating to your body that you're staring at the sun and you release cortisol and you suppress melatonin production so you don't sleep as well or it takes you longer to go to sleep, and that's just a disaster for your health long term. Trust me,

you will feel the difference when you start using these blue light black and glasses from Bon Charge. And right now, my listeners will get 15% off when you order from boncharge.com and use my exclusive promo code, Wendy at checkout. The discount applies sitewide on all of their amazing products. So that's boncharge.com. You also get free shipping and a 12-month warranty as well. So go now and get this exclusive offer. That's boncharge.com with promo code Wendy to get 15% off.

Dr. Wendy Myers

Early detection is so important for cancer and so many other health issues. My problem with the conventional medical model is these piecemeal imaging scans that people are doing the mammograms and then the colon colonoscopy for this body part. What about all the other body parts? So that the piecemeal approach makes zero sense to me when we have imaging like Prenuvo that just does your entire body. Can you check your entire body?

Why would you not do that? Of course, this is not covered by insurance and I know a lot of people wanna work within the framework of their insurance. I get it. But, can you just talk a little bit about that, about doing whole body scans versus this piecemeal approach.

Dr. Daniel Durand

Well, I'll say to begin with, Prenuvo doesn't replace primary care doctors. We empower them and we don't replace the other existing recommended screenings either. We're on top of that for the time being, right? But the history of medicine and medical research is really the history of organ system based approach. And so you learn how to screen a breast for breast cancer or the colon for colon cancer. While that's all great work and it is the state of the art today, what it leads to over time if we let it is that as many organs as you have, that's how many screening tests you're gonna need, and that's how many doctor's appointments you're gonna need. So today you gotta go to the OB for the pap smear.

You gotta go to the radiology department for the mammogram. You gotta go to get a colonoscopy for the colon. Where is this gonna go long term? It's gonna go a lot of running around and self navigating the health system and what we're trying to do for

all the other organs. Maybe eventually we can incorporate some of those other tests that we mentioned, although we currently don't offer them at our centers. The goal is to get all this done conveniently for a patient so that it's actually possible for them to fulfill what we're recommending them to do. Because if you're a working person and you have a lot going on in your life, how are you gonna get to 33 different organ systems screening appointments?

You're gonna run outta PTO just doing that and that shouldn't be your whole life, right? You should be getting ahead of proactive care to live your life, not to spend it running around the health system, trying to get proactive care.

Dr. Wendy Myers

I was really happy I did a Prenuvo scan. I discovered a couple of things. I discovered I had a little tiny potential aneurysm that it's just something to just be aware of. Luckily, I don't have high blood pressure or anything like that but I found out I had a small fibroid which I was not aware of at all. I found out that I had about 10% of fatty liver. That was really the most upsetting thing 'cause I do so much work on my liver, but I needed to lose about 20 pounds. So, in light of that, it wasn't very surprising but yeah, those are the only things that they found. So I was really happy. I had a clean bill of health. I didn't have any other issues that were found but the scan can find 500 different conditions. Can you talk about that?

Dr. Daniel Durand

500 is a number. It's a low end number essentially. Anything that you learn about in medical school that eventually changes the soft tissues of the body, which is most processes of cancer or inflammation or infection or degeneration. The major things that happen to our body as it ages and as pathologies and other bad things happen beyond aging, most of these things have an MRI equivalent. For some diseases, the early detection is super helpful and in some diseases, there may be other things like blood tests that clear you in, but MRI can detect hundreds of conditions well beyond 500. And so that number is put out there to show folks, this is truly comprehensive.

You get more with this than you get with many other types of tests. It's not that we will never add other things to it because we're already adding labs and biomarkers

to get those additional data points to help us be even more accurate. But, we think that MRI is the single most important test.

That's our philosophy. We think it's been ignored by the rest of medicine, and that that whole segment of people pursuing that is now going on all over the world. I'm proud to say that Prenuvo is really in my opinion, the place where this was pioneered and brought to the masses, brought to the people who are now showing that they really want this.

Dr. Wendy Myers

Can you tell us what those 500 conditions that can be and you can learn about on the scan if you have them?

Dr. Daniel Durand

I'm not gonna go through all 500, but they occur in broad groups and probably the most important group that people want to know the most about is the group of cancer. This is something that can happen in any organ system and on our scans, we're able to see early cancers that there aren't currently detection tests that are recommended that people get. And these are the visceral cancers, things in the pancreas, things in the kidneys, liver organs such as that.

Another group of things we're able to see are aneurysms, you mentioned that. So that we're able to see aneurysms in the brain. We're also able to see aneurysms in the aorta, which is the largest blood vessel in the body. And depending on the size of these aneurysms and other features, we can then recommend. The next step is how closely they need to be watched. A third class of things is neurodegeneration. This is the status of the brain. As we age, all of us will lose some brain volume. It will occur in different patterns, but there are certain patterns when we see them that we know are a bit pathological.

There are other patterns that might be part of normal aging, but might be accelerated by certain behaviors. The example of this would be microvascular ischemic changes in the case of smokers or people with poor vascular health and actually seeing these things, while sometimes they can't be entirely reversed. They

can often be stabilized. They can sometimes be improved with diet and exercise and sometimes certain medications. It's important for people to know about these things. And these are, I would say, a new branch of medicine. We're specialists that we refer to and others refer to.

We're also doing a whole body MRI. We don't formally refer. We sort of tell the patient to go see the specialist, but there are all kinds of specialists that are now seeing this and they're saying, this is great. Patients are learning about these things earlier and they're engaging in them. Lastly, you mentioned fatty liver disease. This is a very prevalent thing. We know from studies of CT scans in the emergency rooms that. This is estimated to occur in up to 30% of patients. We see it in about 20% of patients, perhaps because the proactive Prenuvo patient cohort is a smidge healthier perhaps than the average patient.

But we still see it in about one in five people. It is just one of these things that you can be doing everything for your health and be at a good BMI and have all the other sorts of things checked off. But this can still be going on and it's really important because it can tell us about other things that might predispose to, for example, those with fatty liver disease probably have a slightly higher risk of developing type two diabetes. It's a poorly understood correlation, but the nice thing about fatty liver disease is we can check for it again on a follow-up Prenuvo scan. If we see it, it's something where diet and exercise can make a difference and if then they're not making a difference, there are other pathways that an endocrinologist can go down too to address this, but it is something that people generally want to address because in a small subset of those patients, it can lead to hepatic fibrosis, other long term metabolic and liver issues.

Ads 14:39

Let me ask you something a little bit personal. How do you get yourself out of a bad mood? It can be hard, really, really hard, and it only gets harder the longer that you're in that space. That's why I'm a big fan of today's podcast sponsor Organifi. They made an amazing product called Happy Drops, and they're little gummies that are super tasty and they can help make your bad moods better and your good moods great. I'm sure I'm not telling you anything new when I say the world is really stressed out right now. You can see it everywhere. Stress and mood related visits to the

doctor's office are skyrocketing along with various prescriptions to match. And so if you are anything like me, you're looking for a safe, natural approach to rebalancing your happiness and your stress chemicals without worrying about the side effects.

Well, Organifi has given us exactly that. They're called Happy Drops, and they're my favorite new supplement. These yummy little lemon gummies are made with ginger, with gouda cola, and passion flour, all of which are shown to have positive effects on mood and emotional wellbeing. Plus, they have a real powerhouse ingredient, which is saffron. So why is that so cool? The compounds in saffron are shown to help your brain modulate its levels of serotonin. Serotonin's one of your happy chemicals and saffron helps your brain enjoy it longer. Saffron also relaxes you. There's many cultures around the world that drink saffron tea before they go to bed 'cause it helps relax them and helps 'em go to sleep. Saffron also contains antioxidant properties, which can help you protect your brain from oxidative stress. That's great for detox. Best of all, there aren't any nasty side effects. There aren't any bad ingredients and it's safe to use every single day.

Saffron's traditionally very challenging to find in the supplement world. It's difficult to plant and to farm. It's even harder to harvest, and it's one of the most expensive ingredients on the planet. But now thanks to the super food geniuses at Organifi, we can all enjoy a real dose of real mood lifting organic saffron for less than a dollar a day. I'm excited for you to try them. I think that everyone should. I love their happy drops. Just go to organifi.com/myersdetox and get your happy drops today. When you use my discount code Myers Detox at checkout, you're gonna save an extra 20% off. Again, that's organifi.com/myersdetox.

I want you to go out and try Happy Drops today. Like I said, I love them. I've been taking them on a regular basis to help me to go to sleep at night, to help me kind of relax and get in the mood. You've got nothing to lose but your frown.

Dr. Wendy Myers

I was really happy I discovered that and maybe be able to be very proactive and know what I need to really focus on. I don't do the conventional, mainstream model of care, but I absolutely was able to really hone in on my diet, get a continuous glucose monitor, really hone in on controlling my blood sugar. And for a fibroid, I'm

doing this milli wave device that shrinks tumors and it will shrink fibrotic tissue. I was using a rife device for fibroids also to kill those cells. I was really happy I was able to discover these with a Prenuvo scan and be proactive about it.

Dr. Daniel Durand

I'm super happy that we were able to offer you those insights and that's the type of thing we do every day.

Dr. Wendy Myers

Your Boston-based study brings full body imaging to a diverse population, including those facing socioeconomic barriers. What impact do you hope this has and how we think about access to early detection?

Dr. Daniel Durand

There are a few things we're doing to increase access. Hercules is our single biggest investment. This is a multimillion dollar investment for us to build that center and get it up and running, and we don't do anything except for that clinical trial there. And that clinical trial is a long-term prospective trial of the impacts of whole body MRI, but it's also a health equity trial because we are subsidizing either fractionally or fully the cost of the scan for those patients that can't afford it, and that's defined by multiples of the federal poverty level live in it as you'd see in sort of various social assistance programs. That's gonna do two things. Number one, we're gonna be able to see that income is one social determinant.

There are many, right? But it will give us an up close view of how our method generally performs and then how it performs in the context of income as a social determinant, but also we are gonna probably get a more diverse population than we normally would in that cohort. That's gonna help make sure that the data that we have to understand how this works is gonna apply more broadly than it otherwise would. I think it's a really important thing.

There's a bunch of other work we're doing outside of Hercules. One of the things we're doing is we have a special discount program at all of our centers that's offered to first responders and veterans because these are folks that actually have a higher

cancer risk. I believe it's a \$200 discount, takes our beginning entry level scan from 999 down to 799, uh, but also can apply to other scans as well. So that's something to help bring it within reach for folks who have served our communities and who have a high risk and, and a higher need for the service, arguably.

Lastly, we've hired and brought on board a vice President of Health Economics Research, a fellow named Alex Exide, who comes to us from the biotech sector. What Alex and his team are gonna be doing are a variety of studies aimed at understanding the cost effectiveness and long-term outcomes. We are putting ourselves in a position long-term, not just for Prenuvo, but for whole body MRI in general to perhaps get more insurance coverage someday. It would probably happen if it happens in stages, where they would, because it is today covered for certain conditions that are super high risk things like a leaf for any disease.

But we would be looking for a future where it's covered for more conditions and higher risk populations and perhaps eventually for everyone. But that will take time as you know, because that's how healthcare financing works, but I don't know another organization that has as many people or as programs or honestly dollars at work trying to bring this to where everyone will have access to it.

Dr. Wendy Myers

I would love to see more people having access to this and the lifesaving technology and being able to identify very early stage problems with your health. A lot of people are not doing screenings that their insurance covers because it's time consuming and expensive. This is just such a more comprehensive way to go about that. Let's talk about the difference between using images or this kind of imaging to diagnose disease versus using it to identify risk and how do you see that shift influencing in medical practice?

Dr. Daniel Durand

Well in our images, in some cases like fatty liver disease or aneurysms, they could be considered diagnostic because within imaging, they're like the high non-contrast. MRI is adequate to diagnose these things. In many instances, if I'm talking about a potential cancerous lesion, there will be a downstream test. And so our current

concept of whole body MRIs we're mainly distinguishing normal from abnormal, and then within the abnormal, we're kind of saying, how is this abnormal? Is it congenitally abnormal, something you were born with that is just sort of there and you need to be aware of it because it could fool someone in the future. When you're getting a scan, for example, is it abnormal with regard to your initial state, but just part of the aging process? Or is it abnormal related to pathology?

And if so, what type of pathology? We have to sort of figure out where the thresholds are with those different types of abnormal and when to go on to the next test. The idea is we're trying to make it so that we detect as much early on as possible, don't miss things, but also don't raise too many signals. This is where people lie on that threshold in terms of their approach to it. We'll often explain how they feel about the whole body MRU. So I like to say that the research for and against whole body MRI is itself like a rorschach's test for clinicians. Some people look at the same body of research and they're very excited and they wanna do more.

I'm one of those people. Some people look at it and they focus more on, well, what about the cases where we identify things and we don't need to act on them immediately, is that just going to be extra stuff? Our philosophy is we are a body scanning society. There's something like 500 million exams that get done radiologically in the US for a population of between 3 and 350 million, meaning that one point something per year. So as you go on, most people will get several exams and inevitably you'll get your whole body scanned by going to the ER. So we're gonna see what's inside of people. It's better we argue to see things early on when you can intervene and also see them in a controlled context when you're healthy.

So you're not wondering, Hey, this thing in my kidney, we don't know what it is. Could it be the cause of whatever's bothering me tonight? Could it be an abscess? Whatever? But if we know that thing's been in your kidney for many years and hasn't grown, your team can sort of look past it and focus. The idea is to just rather than worry about false alarms and be alarmist, it's like more data is better. Health is complicated. The health system's extremely complicated. When you head into a complicated place in life, do you want more information or less information than ED? And we think more information is better, but the art right is getting the right information, then putting it to use for patients.

Ads 25:14

Are you taking collagen supplements? Well check this out. Our friends at Organifi have sourced the best collagen on the planet, and you can get it with 20% off savings today too. So, what is collagen? It's the most abundant protein in our body. It's everywhere. It's in your muscles, joints, hair, skin, fingernails, everywhere. It's one of the fundamental building blocks of life. Your body uses collagen constantly to keep itself refreshed and repaired. But as you get older, especially as women that are going into menopause, you can lose 30% of your collagen within the first five years of menopause, and that starts in perimenopause as well. Your body just stops making as much of it and you start losing it, especially as your estrogen levels come down. That's why consuming collagen is such a great idea every single day. It gives your body a fresh supply to keep working at its best.

It's not only good for your hair, skin, and nails, but it helps to support your gut and metabolic health, immune system, cardiovascular strength, and all of your muscles and moving parts too. Collagen is nothing new. It's one of the oldest supplements out there. Collagen supplements have been around for quite a while now. But what makes Organifi so special is it's all about the quality. The non-organic collagen scare 16 me. They're really problematic because they can be full of glyphosate, pesticides and other chemicals that you do not wanna be taking on a daily basis. Not all collagens are the same. It can come from many different sources and the source can drastically impact its potency and effectiveness as well.

Some manufacturers just go with the cheapest stuff that they can find and then add fillers and artificial flavors and they still charge you a lot of money for that. Organifi always goes the extra mile to ensure their quality is the best. They blend five collagen types from four different sources, and they taste and test until it's perfect. And then they go even further to test for things like glyphosate residue and other sneaky toxins that can get into the mix. After passing through all of these goalposts, it finally gets the Organifi seal of approval so you can rest assured it's the highest quality and non-toxic. I love that this company is a company that I can trust that their products will be safe and effective exactly as they say they will be.

In the supplement world these days, that kind of honesty and transparency is getting harder to come by. So, if you've never tried collagen, now is a great time to start. And if you're already taking it, now is a great time to switch to a better brand. Upgrade what you're doing right now so you and your entire body is gonna love Organifi Collagen. It is something that I take on a daily basis. It's been a part of my supplement routine for the past five years, since I went into menopause, and so I can't recommend it highly enough. Now let's talk about saving you some cash as well. Here's what you do. Go to organifi.com/myersdetox and put in coupon code Myers detox to get 20% off. Go to organifi.com/myersdetox and don't forget the Myers detox coupon code as well. You'll save an extra 20% off by putting in my special coupon code Myers detox. So, like I said, collagen's one of those things that I take every single day. It's one of the most important parts of my anti-aging protocol, the things I'm doing to fight off the clock. So for me, taking clean collagen is really important. It's hard to find, so I highly, highly recommend Organifi collagen.

Dr. Wendy Myers

Can you tell us about the scan, about how long it takes, and how often people should retest or re-scan?

Dr. Daniel Durand

Well, whether they re-scan, and the interval depends on what we find, our medical group has consensus criteria, again, that are within our medical group. It hasn't been around long enough for there to be society level guidance on how to do this. The societies are largely not recommending for, but to my knowledge, not recommending against either in their statements. They're looking at the data in our medical group, we're believers.

Our consensus group has said that most people are gonna fit criteria where they're getting an annual exam. Some people that have more high risk features, either clinically or whatever we find in them might initially get a six month follow up, some of that. And then if there are no findings, which is quite rare, and someone is I believe, the under 40 age group and has no predisposition for cancer, that small number of folks might get an every-other-year recommendation.

The impetus behind annual is sort of the pace setting of most of the historical medical context that I referenced before. Like ACOs, they have this annual wellness visit. For example, people have had the annual physical. You don't want to see your doctor every day, but having a relationship with them once per year. Let's say you know who your doctor is, you have an ongoing relationship, and you kind of know what to expect for the next year. That's where we're starting from. We want this to go right up next to primary care and be an information gathering thing that happens annually to sort of set the course for what you're focusing on in your health over the next year.

Dr. Wendy Myers

What can people expect? I remember it taking about 45 minutes, maybe it was an hour. One of the areas they had to do a re-scan. Maybe I was like jiggery. I like moving around too much but it was very, very simple. It was very painless. It was very simple and straightforward.

Dr. Daniel Durand

I love what we do in these centers. It is very straightforward as you mentioned, very simple. Someone books a scan with us. They will get an email asking them to fill out some questionnaires as part of its safety to make sure before they even show up at the center that there's nothing inside of them that's gonna be dangerous for the scan. We're later gonna do some other super high liability checks. That's not the last one. That's one of the first things we ask. We also ask them why they're getting the scan to make sure that according to our internal criteria, it's appropriate.

If someone were to say to us, Hey, I'm getting the scan because I fell last week and my knee hurts, we're gonna say, you don't really need a whole body MRI just for that. But if they say to us, I'm doing this to be proactive for my general health, that is actually right in the sweet spot of what we're looking for. So if they're safe, they have the right reason, they're gonna fill out a full medical intake form.

Again, that's gonna help us sort through if there's maybe a reason they shouldn't be getting it. But more than that, it's gonna let us know the comprehensive picture of their health so that when we're interpreting their images, we can make those images

and the information that comes out of them as relevant as possible for the patient. A patient will then be told to show up and that they'll be fasting. They come to the center, they will get seated and very quickly they'll get brought back to their own changing room. At that point, they will also get asked at another point in time about the safety check. And as long as that's fine, they'll be brought back after they've changed, into scrubs to a metal detector.

That's our additional safety check, like our third line of defense and to actually make sure that even if they didn't know about it, there isn't any ferromagnetic material on them. They're then let into the actual MRI suite. They lie down, we put the receiver coils. These are the things that allow us to get all the signals from the MRI. We can get really crisp, good images in a pretty short period of time relative to what it would take without them. So one of these things goes over the head, one goes over the chest and the legs and the patient's lying down.

The technologist then will go back to the control room. The door closes, the machine goes on. Patient's brought back into it. As they're going back, we have this system of mirrors. That is in that sort of thing we put on the head and it lets the patient see a TV that is behind the scanner. It's safely outside of the MRI zone, but there's a window. This is a Prenuvo invention. I haven't seen it anywhere else, but it gives this great feeling of the back of the machine being open. So you kind of normally go into an MRI machine, you feel like you're going deeper into something. As you get to the back of a Prenuvo MRI, you actually feel like it's opening up and you're actually able to watch, if you like, whatever shows that we can stream for you.

If you don't wanna watch it, you wanna keep your eyes closed. I'm an eyes-closed guy. My goal is always to fall asleep 'cause I know, number one, I'll be emotionless when I sleep. But also, number two, I have an infinite home. So that's sort of like a chance for me to sleep. I usually keep my eyes closed and I like the music going through classical music, but you can have whatever works for you.

The exam's an MRI machine. So as you experienced Wendy, there's some noise, right? And you feel some vibrations, but overall it's pretty quick. If you get the base scan, it's about like just the torso would probably be a little over 30 minutes. If you get the core scan from our current traditional scan, that's about 40 to 45. If you get the enhanced

scan, which I think might be what you got, where it has a bunch of extra sequences for like body composition and the brain volumes, that's closer to 55 an hour. But every year we're bringing these down. So, how long it takes depends on the package that you get and it's anywhere, let's say from half an hour all the way up to an hour.

Dr. Wendy Myers

Okay, fantastic. Can you talk about any risks involved, like say EMF exposure 'cause you know, with any scan there's gonna be some EMF exposure. I was pretty knocked out for a day or two after I did the scan. I would still do the scan again though because there's a cost benefit analysis with everything that you do. I would much rather have this information that I can act on and have peace of mind that I have a clean bill of health, then worry about EMF exposure that's on a very short, temporary basis. Can you talk about that? Because we're exposed to EMF every day. I mean, it's everywhere.

Dr. Daniel Durand

That's just electromagnetic fields. The MRI machine is a very powerful magnetic field. That's just kind of on there. And then we repulse cell phone type radiation, a similar bandwidth into the patient, and then we get a signal back and that's how we construct the image. So all of this occurs in something called case space. It's not like we get an image that we can immediately see, only the computer can see it. We've done decades of testing to know that's a very accurate image. There is no known side effect in terms of cancer, anything like that.

When you get things like a radiation requiring type test, like a CT scan or a PET scan, those have the most radiation. There is a small risk associated with that and statistically with MRI, that there is no evidence of such a risk. There's no ionizing radiation. There is some debate as to the impact of EMF. But we haven't seen any in practice. I haven't seen anything that would give me pause about the safety of that and the devices themselves. The safety of these devices, they are FDA approved devices, right? There are parameters under which we operate.

So to make sure that we don't put too much of the radio waves in when we're getting the information out, there are what they call SAR limitations that make sure that the

patient doesn't get too hot and not that not too much energy is deposited by the MRI sequences. So there are a lot of parameters that work in our machines and honestly, all the other FDA approved machines that make sure that you stay within these safe imaging parameters.

Ads 37:09

And now a word for one of our sponsors. If you cook with non-stick pans, there's a good chance that you are consuming plastic. It's not fearmongering. It's what the current research suggests. There's a 2024 study that showed that just one scratch from a Teflon coated pan can release thousands of microplastic particles into food during cooking, every saute, every egg, every healthy homemade meal.

These particles don't just exit the body. They accumulate in your arteries, in your brain tissue, and may contribute to hormonal imbalance to inflammation and cardiovascular risk. So there was one study that found a 4.5 times higher risk of heart attack or stroke in people with microplastics lodged in arterial plaque and others have identified plastic particles inside brain tissue itself.

This is why reducing daily toxic exposure wherever possible is such an important part of long-term health. And it's not just old or damaged cookware. Research suggests that even brand new non-stick pans can begin shedding particles from every use. This is one reason that I'm very, very mindful about the materials that I use in my kitchen. That's why I recommend the P600 ceramic cookware. I personally use these. The P600 is completely free from Teflon, PFAS and plastic based coatings. It's made with Swiss engineered, ceramic designed to be truly non-toxic. It heats evenly, it cleans easily, and most importantly, it doesn't add to your toxic load.

So reducing exposure doesn't require perfection. It's just about making smart upgrades where they matter the most. So, if cookware is something that you use daily, this is a very meaningful place to start. Right now, the P600 cookware is 50% off, and for a limited time for my listeners, you can take an additional 20% off by using coupon code Wendy 20 at checkout. Just go to chefsfoundry.com, use the coupon code, Wendy 20. Your body and your detox pathways will thank you

Dr. Wendy Myers

You've worked at both large academic health systems and now a tech enabled startup. What have you learned about how change actually happens in medicine and what slows it down?

Dr. Daniel Durand

Change in medicine can be driven by all sorts of factors. It can be driven by policy. It can be driven by economics. It can be driven by fascination with technology, like you're seeing with AI right now. But really, no change happens well in medicine unless patients care about it and providers care about it. And increasingly I'd say that I've seen during my career at the beginning of my career, the bigger determinant was if providers cared about it. You could get something done of interest that's new at an academic health system, but not like if an administrator cared about it or a policymaker in DC. It happened if the doctors cared about it.

I think we can all get behind that relatively, but what was missing for many years is that patients couldn't drive much. They were sort of recipients in the Western model of care as to what was available, and they made the best of it. Patient advocacy occurred in pockets. We saw it during the Lyme disease epidemic. We saw it during the HIV epidemic. We did see pockets of patient advocacy groups driving things, but I would say it was less prevalent in the last 10 or 15 years.

We've seen this thing called direct to consumer medicine and everyone thinks immediately like, well, this is the private sector and it's outside of it. You know that people can think about some of the downsides potentially of it, but the great upside is that patients have much more agency than they've ever had before. So I look at today in really the last 10 or 15 years, and I say that innovations extrinsic to medicine. Things like your cell phone or just the immediacy of getting care online, getting these things as a medical consumer. It's happened because people learned that these can be achieved in other parts of their life.

And they said, where is that in medicine? If my bank can let me deposit my checks, how come my health system can't show me my medical record on my mobile device? So all these things started to happen because really there was consumer pressure to sort of get in line and get modern the way that rest of the rest of society was. People don't want to think of their healthcare providers as always being one or

two decades behind the rest of the world when it comes to the latest digital and technological advancements. So that's what I've been privileged to be a part of. It is this revolution in medicine where it's much more patient led, much more customer led patients have agency.

When you think about a patient, the historical thing is someone who's vulnerable may, they're coming to you sick. They might not be able to stand right at the point they come to you. So how much more inspiring that people are now when they're well are able to say, here's how I wanna receive healthcare.

I think Eric Topel said it best, like, doctor, the patient will see you now. This is what happened in the last medical change. And it's really thrilling to be with a group like Prenuvo that's right on the forefront of it because I think the best part about having direct-to-consumer medicine is we only survive for a week, a month, a year, into the future. If we are giving patients what they want, if we can't produce value and experience for them, they will cease to come to us. And there's no third party, no insurance thing. The government's not flowing money to us. No one's taking care of us except for the patients, and we are a hundred percent focused on taking care of them.

There is no 30% administrative cost. There's no prior authorization. These things that you see in the rest of the medicine that sort of get between the doctor and the patient, they don't exist for Prenuvo. It's a very, very pure way to practice medicine and we love it.

Dr. Wendy Myers

How many locations do you have around the United States? Are you worldwide at all in other countries?

Dr. Daniel Durand

I believe we have 25 locations as of today. We're active in three countries, meaning Canada, Australia and the US. The US is where we have the most locations. Again, I believe 22, but the latest one is always on the website and we are opening hopefully fairly soon. But there are a lot of things that need to happen for it to happen soon.

That's in London, England. It is our next country we're expanding to. We're very excited about that.

Dr. Wendy Myers

Okay, great. This type of scan, I think it's so important 'cause so many people have a family member in there that had cancer. Like for me, my father passed away from esophageal cancer. I have other family members as well that are affected by that. And there's a reasonable concern and fear around that, especially with the rise of turbo cancers and the dramatically increasing rates of cancer over the past four years, and doing a scan like this can really give you peace of mind that you're able to catch something super earlier, get your clean bill of health. I think that's so valuable.

Dr. Daniel Durand

We agree. We recently published our largest cohort, which is over a thousand patients that we did more than a year follow up on. This was out of our Vancouver clinic, and we found the cancer detection rate was about 2.2% in that population, probably a little higher than our standard populations because of the nature of kind of. Wait times and deferred care in Canada and also the age of that population. But outside the context of Prenuvo, the larger meta-analyses have generally shown a cancer detection rate, somewhere between 1.5 and 2%. There is some overlap with the conventional methods. Sometimes you're finding something that mammography might find or that, if you're a smoker, high risk person that a lung CT might find it.

However, in our experience, most of it isn't overlapping, meaning that there's a tremendous amount that we're finding there that isn't found in other ways. And while we haven't done the 10 or 20 year study to prove life expectancy differences, because this hasn't been around long enough to do that, it is generally accepted that you want to find cancer earlier. There are some types of cancer where that might be truer than others. And there's always been an active debate as to how true this is. There are still people out there saying you shouldn't get mammography, right? There are still people out there saying that despite 50 years and really good evidence, and even the medical major, medical societies don't agree.

Like the CR doesn't exactly agree with I think the AMA or the internal medicine societies. Some say USPSDF says two years from mammography. A CR says one year. So I think all of this honestly, is a bit confusing for people. At the end of the day, it is a very personal choice. It's the essence of shared decision making. Do I want to know what's going on inside of me? And if I understand the risks and benefits of that I want to know, I should be able to know.

Ads 46:31

For anyone listening who really wants to detox their body, go to heavymetalsquiz.com. I created a quiz for you. It only takes a couple of seconds and it's based on some lifestyle questions. You can get your toxicity score and get a free video series that answers all of your frequently asked questions about how to detox your body. Check it out at heavymetalsquiz.com

Dr. Wendy Myers

Yeah, absolutely. If anyone wants to get us a Prenuvo scan, you can get a discount if you use my code. You just go to prenuvo.com/wendymyers, and then you'll get a discount on your scan. So definitely look into that. Take advantage of it. I did a scan. I'll be doing another re-scan probably in like another year or two. I'll do a scan and check in where I'm at with all the little things that were found and work on that to try to get a really clean bill of health next time I do a scan. Is there anything else that we left out that you wanted to mention to the listeners?

Dr. Daniel Durand

No, it was very thorough, but I would just hammer in back home that Prenuvo is a place to come to be proactive. We will help folks get supercharged care. We don't replace existing screening. We add to it. We don't replace primary care. We work best when we go at the same time, and we're happy to take referrals from physicians, but we're also happy to have patients come directly to us. We will help people look inside their body and engage them in their health and lead 'em to a healthier tomorrow. That's our goal.

Dr. Wendy Myers

Well, Daniel, thank you so much for coming on the show. Everyone, I'm Dr. Wendy Myers and I just love doing this show every week, bringing you experts from around the world to help you make those distinctions, help you make better decisions about your health and upgrade what you're doing so you can make the best choices possible. Thanks for tuning in.

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