



#652 Breast Implant Illness: 1 in 3 Breast Implants Are Infected with Dr. Robert Whitfield

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 toxicity, the health issues caused by toxins, and more advanced topics than you'll hear on other shows. I love talking about bioenergetics, emotional trauma, and advanced biohacking techniques. But today, we're gonna be talking about breast implant illness and the health issues that can be caused by breast implants, what populations are more susceptible to having breast implant illness, and the heavy metals that leach from breast implants.

It's a shockingly high number of heavy metals that can leach into your system. We will discuss if you should avoid infrared saunas if you have breast implants, some of the symptoms of breast implant illness, and answer a lot of your questions about what to expect if you have them removed. Should you remove the capsule around the implant? What infections can be found in the capsule? About 30% of patients have infections in the capsule surrounding the breast implant, so lots of really, really good info on the show today.

I've been wanting to have someone come on the show for well over 10 years, and I just couldn't find anyone. Dr. Robert Whitfield is one of the shining voices on this topic because there aren't a lot of doctors willing to speak out, going against the plastic surgery community that makes a lot of money doing these surgeries. It's to each his

own. Many women want enhanced breasts, and we all get it, but FOR some women, their bodies don't react well to it. So we're gonna talk about some of those reasons why on the show today. It is a really good show, so tune in. Dr. Whitfield, thank you so much for coming on the show.

Dr. Robert Whitfield

Thank you for having me. We're so close. We could've done this over coffee.

Dr. Wendy Myers

Yes, we could've done it over an in-person video. Why don't you tell us a little bit about yourself and how you got into talking about breast implant illness and breast implant explantation?

Dr. Robert Whitfield

My career is basically rooted in oncologic reconstruction. So I spent six years training in general surgery, two in plastics, and then another year of just reconstructive microsurgery. And for about 15 years, I concentrated on explants for patients who had, say, problems with implants from radiation injury, infection, or capsular contracture. So I would convert those to an autologous breast reconstruction using something called the DIEP free flap, which was something that I really wanted to do as I trained through plastic surgery and microsurgery.

I started a fellowship in the programs that I became part of to help train more surgeons to do that. That's a muscle-preserving, nerve-sparing technique to do an autologous or your own reconstruction with your own tissue from your abdomen. So that's basically how I got involved with explantation, started in '04 or '05, and then fast-forward over years of doing head and neck reconstruction, sarcoma reconstruction, and of course breast cancer reconstruction.

I had a patient come in 2016 to our practice in Austin who wanted to have a flat closure. They wanted their old implant-based reconstruction removed, no other reconstruction performed, and just a flat closure. I had done that several times for patients who just didn't want to have a reconstruction anymore, and we always did things the same way. So we took all the scar tissue out.

We would send that off for culture and sensitivity to make sure there was no infection. We would send it off to pathology, make sure there was no recurrent cancer. We did that for her, and hers actually showed she had an E. coli infection.

Dr. Wendy Myers

Inside her implant?

Dr. Robert Whitfield

In the scar tissue around it. She had a silicone gel prosthesis, so it wasn't inside the implant. It was in the scar tissue or in the pocket where the implant sat. Think of the scar tissue as this example here. This is a little white telnet around an implant, so that's kind of like the collagen sac that forms around the implant. It was in between that sac and the implant. And so we went back through her history, laboratory exams, everything, and there were no clues to that. Nothing was off. So we don't know how long she had that.

The one thing she had from a symptom standpoint, which a lot of patients who've had any cancer treatment have, is fatigue, 'cause they have bone marrow suppression, which is pretty common. And so we treated her according to the sensitivities for that bacteria, which was E. coli, and her fatigue pretty much resolved. Once again, she couldn't tell us when that started. She couldn't give us an incident or some kind of anecdote that would help us figure that out.

I explain it this way so your audience understands it. There are three ways to get an infection like that around a device. It can be in the operating room because someone opens the package of the device and somehow contaminates it before they give it to the surgeon. Then the other opportunity is that the surgeon can contaminate it upon placement. Those first two are really, really low. There are all these extra things and precautions taken in the operating room, so those are really low. The third, and by far the most common, is just life.

Throughout life, somebody's gonna get a lung infection or a urinary tract infection or a bowel infection or something, and that bacteria will get into their bloodstream, and then that will attach to a device. It doesn't matter if it's a hip, knee, breast, dental, neurologic, or cardiac. All those things are foreign, and your body knows that, and it

can't surveil a foreign body. So it reacts to it, but it cannot create a response that clears it from your system.

In 2024, we published a large series of PCR tests, which is taking the scar tissue out and testing it with a PCR. It looks at 150 types of bacteria, mycobacteria, and fungi, and we found that 29% of 694 consecutive specimens had bacterial contamination. Two predominant types: *Staphylococcus epidermidis*, which is found on our skin in high concentrations, and *Cutibacter acnes*, which used to be called *Propionibacterium*. It's found in high concentrations in your face, neck, chest, and shoulders.

Those are the two most common types of bacteria. They readily form biofilm, and then that biofilm signals back and forth between the collagen sac and the breast tissue. It can oxidize a fatty acid in the breast tissue called oleic acid, and that creates an oxidative reaction that creates an oxylipin. There are different oxylipins, but oxylipin 10-HOME has been found to be elevated in patients with symptoms of breast implant illness

It's not a commercially available test. It was a biomarker studied in a research project by Dr. Mathuns Sena and then published. So there's cause and effect that makes sense. Recently, there was a paper published out of Denmark in the summer last year that showed that at the tissue level where that scar tissue is, there's more cell activity. So instead of just being more like a T cell response, which is common for a foreign body reaction, there's more B cell and plasma cell. Plasma cells make antibodies, and it's more of an organ rejection picture in some patients.

Now, that makes sense because what I used to do for the cancer patient who had a problem with a breast reconstruction, maybe they got capsular contracture, maybe it got infected, or through radiation, there was an injury. I would remove all that scar tissue material and then put their own tissue, autologous tissue, there. And so the first kidney transplant was done between genetically identical twins, so it didn't need immunosuppression. So that basically is self.

Anytime you transfer something that's genetically identical, in the reconstructive world, when we do it with tissue, we call it a flap reconstruction, and we hook up the blood vessels as you would for an organ transplant, and then that helps heal the area. But it's also recognized as self, so there can't be a foreign-type reaction to it

because it's your own tissue. The immune system's very complex. I don't think we know nearly enough about it.

Dr. Wendy Myers

I wanted to have you come on the show because I've looked for years, I mean, probably a decade, for someone to come on the show about breast implant illness and the toxins found in breast implants, and there's virtually no one talking about it. Perhaps there's more now, but you're one of the only people that I've seen talking about this. Another doctor had retired. But what is breast implant illness about, and what's causing it? Is it some of the toxins in the breast implants themselves?

Dr. Robert Whitfield

I think it's a combination of factors, and I look at genetics. I wrote a book about it called The Sharp Method. It really helps look at everything big picture-wise. So genetically, we inherit the detoxification pathway enzymatic function from our parents. Now, it's not the only thing that creates an issue, but if you have less reserve in those pathways, whether it's vitamin D metabolism, the methylation pathway, glucuronidation, or your antioxidant pathways, if those are already not terribly efficient and you put in a foreign body, once again hip, knee, breast, dental, whatever it is, that puts more stress on the system.

And then life happens, so where you live, where you work, the things you get exposed to. I just did a big three-part series on living near a golf course because golf courses have such high toxic burdens, especially with things like chlorpyrifos, chlorothalonil, and atrazine. Here in Houston, there are tons of mycotoxin exposures. All those things are very, very difficult for patients with limited detoxification pathways to overcome, and if you add to it problems with heavy metals from ruptures or leaking implants or gel bleeds, that's a pretty complex situation.

If you don't really understand your diet and you may get stimulated by lots of things like gluten and dairy, or if you just have sensitivities to things you don't understand, then you're going to make that more complex. Then all you need is a bad set of genes as it relates to estrogen metabolism and a good parasite infection, and you've got all the ingredients to give you a really difficult time.

Ads 11:21

I want to thank one of our podcast sponsors Bon Charge. They have this amazing red-light mask here that I absolutely love. I've been using this for about a month now and I'm really blown away by the results. It's time to step up your skincare this year with the redlight face mask by Bon Charge. I just spend like 10 minutes a day wearing this mask and it has so many different benefits. It really works. This face mask, essentially, the red LED lights penetrate really deeply into your skin. They boost collagen production, reduce inflammation, and ease the signs of aging.

So, if you want plumper, younger looking skin, skin, if you want to significantly reduce or eliminate acne, blemishes, redness, and inflammation, if you want to reduce pigmentation, if you want to stimulate cellular repair and circulation, if you want to reduce puffiness and help to drain the lymphatics in your face and for you guys, you can use this advanced LED technology to revolutionize your skin care by tackling razor burn, dryness, and redness. It's amazing and really easy to use.

I only have to wear it 10 minutes a day. So, you can do it while you're watching TV. I just do it at the end of my day, right before I go to bed. You can do it while you're relaxing, while you're in your sauna, whatever you're doing. I really like it because it's totally portable, so I can take it with me wherever I go. You don't have to have it plugged into anything. It's totally portable. I've seen a really big improvement in the tone and texture of my skin. I really feel like it's helped. I have a lot of sun damage just from worshipping the sun my whole life. I feel like it's really helped reduce the appearance of the pigmentation from the sun damage. I felt like it helped with the puffiness that we can get as well. I really like the results of this mask.

Bon Charge is a red light face mask. It's really easy to use to take care of your skin. It's totally painless and it's not going to heat up your skin or cause any kind of heat damage or anything like that. The red wavelength is 630 nanometers, which is used to reduce redness, inflammation, pigmentation and it prompts cellular repair and circulation.

The near infrared in this is at 840 nanometers. It's the deeper fibroblast cells stimulating new collagen and elastin production, resulting in firmer, plumper, more youthful looking skin. So trust me, you want to get one of these. Try the Bon Charge

red light face mask. You can get it at [boncharge.com](https://www.boncharge.com). Use promo code WENDY to get 15% off.

Dr. Wendy Myers

What are some of the toxins in breast implants? You mentioned that there were heavy metals. Can you list some of the toxins that people are maybe unaware of, that they have a surprise in their implants?

Dr. Robert Whitfield

Yeah, there's tin, there's cadmium, there's platinum, and cesium. We see various ones, and there's a whole list you can Google on the internet. I think my client Lauren Bostic, who hosts The Skinny Confidential, had the most heavy metals I've ever seen in a human. Pretty impressive. A whole page of them, actually. And hers was, I think, secondary to how she saunaded.

So she had a barrel sauna that got up to over 200 degrees Fahrenheit, and she used to come in and say, "I think I'm melting my implants." And I kind of joked around with her, and then we said that on her show. I got accused of an ethics violation because they didn't like me saying that. Ultimately, the actual scientific terminology is leaching. So she was leaching chemicals, in this case heavy metals, out of the shell of the device. Now, all implants have a silicone elastomer shell with those heavy metals in it. Doesn't matter if it's saline, doesn't matter if it's silicone, those are the fillers. That's what's inside.

The outside, the exterior of the shell, is the same for both. I'm gonna pull up hers because it was such a striking report. So you can have tungsten, thorium, and then like we talked about, cadmium, platinum, lead. Not really mercury, mercury's more of a filling, a dental issue. So there was a good study showing that tin is very neurotoxic. If you have high levels of tin, that's bad for your brain. You don't wanna have high levels of tin.

Now, I thought I would see more of this because I probably have the largest experience in the world with tox tests on people with breast implants, 'cause we do a tox test basically on every single patient we can. But I think just making people aware of that helps them, and then they can make better decisions. I try to frame it so that

we give people all this information, not to do anything but educate them so they can make better informed decisions.

People ask me a lot about what I tell people about explants. Well, most people never really wanna come see me and have explant surgery, obviously, 'cause nobody wants additional surgery. That's scary and anxiety-provoking, and I get it. And everybody's worried about appearance changes, so we do a lot of simultaneous fat transfers. But I have a very specific set of steps for that. It includes getting a DEXA scan pre-op, 'cause a lot of people have low BMI. It also cuts out the use of GLP-1s because it's impossible for me to tell you what to expect if you're taking a drug that burns fat. Those are so effective.

And then we put people on higher protein, healthier fat diets, and try to keep their BMI the same or elevate it just to build up lean muscle mass and healthy fat. Having your BMI remain stable and not create a caloric deficit really allows people to retain more of the fat.

Dr. Wendy Myers

With the fat transfer?

Dr. Robert Whitfield

Yes.

Dr. Wendy Myers

What are some of the symptoms of breast implant illness? Say someone has gotten breast implants, they've had them for a number of years. What are some of the symptoms your patients have reported that may be a cause for concern to prompt them to start thinking about an explant?

Dr. Robert Whitfield

Man, I don't know if we have enough time on your show for that. But we'll roll through them. So first of all, people get really concerned with neuro symptoms. Central nervous system and brain fog are a concern. It's different for different patients. I kind of categorize it when I hear it as if they're not having good short-term memory. They're just kind of forgetful on a number of levels. And you can have light sensitivity,

sound sensitivity, and headaches. I would not say it's a big driver of migraines, but it certainly doesn't help it

Many people say that after explant, it gets better. But migraine obviously is a complex problem. Neck pain, back pain, a whole host of esophageal symptoms, reflux and difficulty swallowing, and a lot of diagnoses of eosinophilic esophagitis, all sorts of things like that. And then chest pain, shortness of breath, tightness, and all sorts of mechanical symptoms in the chest area from scarring.

The GI system, just anything you can think of, bloating, swelling, diarrhea, cramping, pain, aching, getting bloated with just drinking water. I have people say all the things that would be associated with everything else for problems associated with breast implants. And then all of the extremity symptoms, joint pain, muscle pain, neuropathic symptoms, vibratory symptoms, and then, unfortunately, a whole host of skin issues. Simple things would be like the eczematous-type rash or the migratory-type rash, but people get really bad scalp issues that even result in hair loss and areas of alopecia. And then acne is a big problem, that is, adult-onset acne.

But all these go along with all the other things, too, when we look at their testing. I find some of the hardest things to sort out are people who definitely have extensive travel histories outside the country and probably got parasite exposures and just never had anything done about it. So they're trying to cope with that as well, which can be very difficult from a neuro standpoint. You have all sorts of neuroinflammatory symptoms from parasitic infection, and a lot of times when we do shotgun PCR testing of the stool, we don't see a parasite. Parasitic infections are still the most common reason for liver infection around the world.

Dr. Wendy Myers

It sounds like all these symptoms you're talking about, maybe not the parasite so much, but can be caused by heavy metals, which cause issues in the digestive tract and neuropathy, brain fog, brain issues, et cetera.

Dr. Robert Whitfield

Yeah, anything that associates with chronic inflammatory states, heavy metal exposures, different infectious exposures, all those things. That's why it's such a muddy picture all the time.

Dr. Wendy Myers

You mentioned earlier an issue about infrared saunas promoting the leaching of toxins from the implants. Do you recommend saunas for women with implants? 'Cause I've thought a lot about this. I used to have breast implants, and I had an explant surgery about eight, nine, 10 years ago, and I had a lot of sauna use. Not a high-temperature sauna, maybe one that's at 140 degrees Fahrenheit.

I always thought about the benefits of sauna, and all the many benefits of sauna perhaps outweigh the leaching. When you have a faucet running, but you're draining the bathtub, perhaps it's draining faster, and the toxins are leaching. What are your thoughts on that?

Dr. Robert Whitfield

I tell everybody the same thing. I think if I hadn't said it on Lauren Bostic's podcast, we would have the answer to the question. But I think a lot of people stopped after they heard us talk about it. I try to frame it this way: if you're having basically a Herxheimer reaction after detox or after a sauna session, that to me tells me that you shouldn't be doing it. So if you don't feel well, if you have a viral flu-like feeling or severe fatigue afterward, that's not good.

So I just have them listen to their body. I'm not trying to scare anybody. Just trying to be as educational as possible so people can decide for themselves. I think overall saunas are good, but if it makes you feel bad afterward, that's probably not the right thing.

Dr. Wendy Myers

That makes perfect sense. Just listen to your body 'cause everyone is very different. Everyone has a different detox capacity. It's a catch-22. The more toxic someone is because they have compromised detox pathways, essentially, the more they need to detox and the more they may seek out detox protocols like infrared saunas. But you have to listen to your body and take it slow if it's not working for you. So let's talk about how the understanding of implant-related symptoms has evolved in the medical community? I know when I had my implants taken out, I was prompted to do that.

I did a SonoCine scan that showed that there was silicone in the tissue surrounding my implant. So I thought, "Oh, they must be leaking. I've had them for 25 years. Maybe it's just time to have them taken out." So I went to a plastic surgeon, and he's like, "Oh no, you don't need to have them taken out. It's totally fine." He didn't believe in breast implant illness, and I think that is a general consensus in the conventional medical community. Do you think that's evolved or changed at all?

Dr. Robert Whitfield

Well, in 2019, I testified at the FDA hearings on this, and I said we would work hard to establish better scientific literature about it. So there have been more and more papers published. I think there's several hundred now that have been published since then. So from the scientific standpoint, the body of work is growing. Now, is it changing everybody's perception of it? I think that's a harder thing to do. I've worked hard to put together 160 shows, and 4,000 videos. I wrote a book just about it to try to help educate folks. But I'm probably not looked favorably on in the plastic surgery community, which is fine.

I should always preface it by saying all I want to do is provide as much education about the topic. I find it very difficult to understand exactly what's going on in each and every single patient's immune system because we have such limited ways to evaluate it. So it's not like I can just get a series of labs and say, "Okay, Dr. Myers, your immune system's behaving this way at this moment, we need to do this." That doesn't exist. So I'm still very curious about the problem. I learn all the time from our patients, and the patients keep us definitely on our toes. It's a pretty complex group.

Dr. Wendy Myers

Some people get extremely ill, completely debilitated. Can you talk about some stories of women that have been very debilitated and then have had amazing recovery following explant surgery?

Dr. Robert Whitfield

I have this little gal, she's so sweet. Her name is Leah. She comes from about 45 minutes away from me in Pflugerville, or Round Rock, just a little north of us. And she had had multiple surgeries: cervical spine surgery, thoracic spine surgery, a foot surgery, a hysterectomy, all of these things, and still felt terrible. It's just really difficult.

And she heard a show I did, and because she's so close, she came and saw us, and she had a set of older textured implants from McGhan, which is now Allergan.

Around the world in 2019, texture was basically pulled from the market because of its association with anaplastic large cell lymphoma development. That surface is incredibly irritating to tissues. So she came and told me what she had in place, and I said, "I can't tell you that all these symptoms of joint pain and muscle pain and fatigue are gonna go away, but I know this device is particularly irritating, and here's the reason why: if something is associated with cancer development from a T-cell response, and we know it's got this rough surface, that's all logical. So I know when I take those out, those patients' immune response should calm down."

And hers was very dramatic. About three to four days after surgery, her joint pain, her hands, she was able to open a bottle or twist off something for the first time in many years without help. So it wasn't the "I can't get out of bed" story, which happens at times, but just think of it if you couldn't twist something open by yourself, or you had to always go get help, and you'd had all these different surgeries, none of which ever did anything to resolve your pain. So now she has, from a musculoskeletal standpoint, a lot less pain, and that's a big relief for her mind and her body.

She has a very supportive husband. He comes to all of her appointments, and he's doing our program as well. We put people on gluten-free, dairy-free, seed oil-free diets to try to have them supplement properly and keep a really high amount of protein in their diet, especially around the time of recovery. It's more of a lifestyle change or a habitual change that you can make, and they feel much better about that. So I think that's the most up-to-date example of someone who's really just changed that quickly after surgery from a point where you couldn't do much.

Dr. Wendy Myers

Any other stories? I know people love hearing stories, and I know there are a lot of women listening right now who have concerns that their symptoms could be from their breast implants, and I'm sure many have been told by their doctors or their plastic surgeon that there's no association.

Dr. Robert Whitfield

Yeah, there are these mobility issues that are very striking to me because many people, Dr. Myers, keep implants for a long time. As you said, you had yours for almost 19, 20 years. People have them for 30, 40 years, and I'm like, well, those were past their prime a long time ago. And the reason we talked about exchanging implants at eight to 10-year windows is that the rupture rate goes up half a percent per year after that. So from a surveillance standpoint, if somebody had been a patient of mine and there was a question, we would obtain a study, whatever was dictated by what they needed, and discuss changing out the product.

The other story was right around the beginning of the year, and it's really striking because the patient came in to me using a cane and said she didn't think she could have surgery. And this was a very active person in the community, not far from us. She drives the school bus for the community, but she had to stop because she couldn't move, couldn't walk. And she came to the clinic and said, "I don't think I can have surgery. I feel so bad. I have so much pain, especially in my hips, getting up and down." And I asked her, "Has this happened before?" And it had happened before. And what did they do?

They had given her a little bit of a steroid before to try to help with this. So we did that for her. And if that helps, Dr. Myers, that's a really good indicator that after surgery, their inflammation's gonna drop substantially. And just like the first case, the same thing, everything dropped. They don't have the same issue with their hips, their knees, or their hands. All that seemingly just goes away. So I'm not doing something quote-unquote magical. I'm just taking away a source that's super stimulating to them at a tissue level.

And if you go back to what we discussed earlier, if they're having such a vigorous response at the tissue level because of B cell, T cell, plasma cell activity, that makes sense when I take that away. And that's why I take all the capsule out, because that's where, in fact, if you left that, the biofilm from the bacteria would be stuck inside that, and/or any ruptured material, and/or any material that's worn off over time would be just embedded in that tissue.

And so they can still act. If you think about it logically, that would still act as a signal to the tissues that there's still a problem even though you took the implant out. That's not the entire story.

Dr. Wendy Myers

That's a very important distinction, because when I had my implants taken out, they did not remove the capsule because there was no awareness of the need to do that from this doctor. Even though he said he'd done 300 explants and did a study on it, yada, yada, yada, he personally didn't believe that you could develop an immune reaction to the implants, which I challenged him on. You can develop an immune reaction to a blueberry, so you can certainly develop an immune reaction to an implant with multiple ingredients in it.

Dr. Robert Whitfield

Yeah, I think logically that doesn't make sense, because the debris coming off of anything that's not your own tissue is gonna be recognized by your immune system as not your own tissue, right? So that's the whole point. It doesn't really hold weight when you try to put up that argument. It doesn't make sense. Your T cell receptors know that.

Dr. Wendy Myers

I think there's a resistance to saying anything negative about someone's profession, or it costs them business, or it costs them patients if they really give people the straight answer about the potential risks that may not be mainstream. So what would you say to someone who wants to remove their implants, but they're fearful their breasts are gonna look bad, or they're worried about scars, et cetera? What are their options?

Dr. Robert Whitfield

I think a couple of things. First and foremost, you have to do your due diligence, and we have a program that helps people prepare because many, many patients are not really emotionally or psychologically ready to do that part, and they don't feel well. So we've set up a program to help them lower their inflammation. I think first and foremost, you wanna get people on the right track 'cause it may take two weeks, two months, or two years to get to the point where you're like, "Okay, I'm gonna do this." But in the interim, you can do a lot to help yourself.

You can improve your sleep hygiene. You can improve your nutritional intake. You can improve your exercise patterns. I think many people, when they start feeling bad,

tend to overtrain more, and that just makes it worse. So that puts them into more of an adrenal insufficient state because they're just driving themselves harder and harder and creating more stress. Many, many patients fast too much. They create even a higher caloric deficit, but they don't lose weight, and then they're like, "What's wrong here?"

But if you've listened to Dr. Myers and my conversation today, that's not the problem. The problem is at the tissue level, and the stimulation caused at the tissue level. The body's defense mechanism is to protect itself, and when there's stress, there's more cortisol. When there's more cortisol, there's more fluid retention, and this just ends up being cyclical. I have patients gain 10, 20, 30 pounds, and they don't know why, and it's inflammatory in nature. And sometimes it's isolated to the abdomen, thigh area. Sometimes it's the whole body.

But we recently had a patient come from Houston for a secondary procedure where we added more volume via fat transfer, and she had lost so much weight. I didn't recognize her. Her whole body had shrunk. She had lost about 40 pounds, and she's not a very big person, so 40 pounds on somebody who's 5'4" is a lot. And I said, "What did you do?" She said, "I didn't do anything differently." So that was her body holding onto inflammation, and when we did the surgery, and she just continued the protocol we had instituted before, her body naturally just. I know it sounds cliché but it healed itself.

So, given the right nutrition and a basic set of supplements to support genetic pathways, good sleep hygiene, and keeping protein content up high, those are the key elements both in preparation and recovery.

Ads 35:43

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 well-being. 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 are 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 is 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. 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 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

Do you think all implants are leaking heavy metals into people's systems?

Dr. Robert Whitfield

I think over time, all implants degrade. To what degree they degrade, I have no idea, and it's been unfortunate because we haven't been able to get a good study to show this. The paper from, I think it's '21 or '22, showed that when they digested the scar tissue capsule, they did not have elevated levels of heavy metals, but that doesn't mean that they weren't leached and filtered out.

So, to me, that's maybe not the right methodology to examine the problem, because at the tissue level, okay, it's not happening there. It's getting collected and taken away by our defense mechanism. So, like in Lauren Bostic's case, that was a shocking amount of heavy metals to see in someone's tox tests, and to date, I haven't seen anybody have a worse one.

Dr. Wendy Myers

Yeah, and it's tough because I do heavy metals testing on patients as well, and have for 15 years, and the problem is that the body will sequester these heavy metals away in the bone, in the fat, in organs where they're just not showing up on tests. They're not floating around in the blood. The body sequesters them away and puts them in fat and other tissues, so the tests can be misleading.

Dr. Robert Whitfield

That's the point. So it goes back to what we were saying. We just don't know enough. Many of the things we utilize still today were developed in the '50s in terms of testing. That's not exactly state-of-the-art. We use PCR testing exclusively now for bacterial identification and fungal identification because that's far more sensitive and specific, but to your point, you can't just find everything out easily because either we don't have the sophistication to have the right test, or your body's being more sophisticated than we are and not showing you what's going on. Either way, we don't know what we don't know.

Dr. Wendy Myers

What kind of toxin tests do you run?

Dr. Robert Whitfield

Currently, we use Vibrant Wellness because it ends up looking at a pretty broad array, so I can get a good picture, and to date, it's been very beneficial to see after supplementation for different timeframes. I like at least a minimum of a couple weeks of our supplementation and then do the test and see. But to your point, it doesn't show you everything. Historically, when you talk to patients, you're like, "Oh, they're gonna have a really high mycotoxin level," or based on where they grew up or whatever, they're gonna have really high glyphosate levels.

Those are common things. What you don't and can't anticipate are some of these metals or other environmental toxins, and they don't either. And there are certain areas such as living in Houston, as you said, it's very toxic. The entire state of Florida is very difficult. Some of the worst tox tests just come out of Florida.

Dr. Wendy Myers

What kind of heavy metals test is the Vibrant Wellness? Is that a urine test?

Dr. Robert Whitfield

Yeah, they're doing a urine test.

Dr. Wendy Myers

Okay, great. What are some of the biological factors most commonly influencing lingering symptoms after implant removal?

Dr. Robert Whitfield

Most of them I think are still environmental, either from where someone lives or how they're eating, 'cause air quality's really underappreciated and underestimated for how much it's affecting you. So if you're constantly in an environment where there's a ton of spores from mold, that's always gonna affect you. And then the diet is super challenging. Most people have a real difficult time adapting to, following, or being more cognizant of things they put in their body as it relates to food. And then beauty products, deodorants. I try to tell everybody you gotta be really careful about what you put in your body and on your body, and especially in cosmetics, the parabens and everything that is rampant in those products.

Dr. Wendy Myers

Tell us how people can work with you. You're still doing surgeries. You're doing explant surgery. How can people work with you?

Dr. Robert Whitfield

I think the best thing is we created a brand new revamped website, drrobertwhitfield.com, and it has all of my FDA testimony, research, videos, podcasts. Everything's consolidated there, as well as our store. You can book discovery calls with my team for free there. We do a lot of work within our private community,

drrobscircle.com, because I've been banned on a lot of platforms for speaking about this.

Dr. Wendy Myers

Well, that's a sign you're doing good work. You're making a difference.

Dr. Robert Whitfield

Yeah, it makes it a little challenging. I used to be quite easy to find. We'll just say it's a lot more challenging nowadays.

Dr. Wendy Myers

Okay, so you have a private circle, and what about your book?

Dr. Robert Whitfield

We've put out two books. One's about the methodology, called The Sharp Method, and the other I put out just about breast implant illness, and it's called Breast Implants: Explant Surgery and Breast Implant Illness, just to help educate people through our patients' stories and what we've learned about the work we've done over the last almost decade now. So everything's just out there for education to help people make better decisions, whether it's a practitioner who wants to learn more or a patient who wants to learn more. It's all available, and that's all we're about. We're just trying to help.

Dr. Wendy Myers

Okay, fantastic. Well, Dr. Whitfield, thank you so much for coming on the show and explaining all this so clearly, 'cause I know there are a lot of women out there suffering, and it hasn't occurred to them that it could be their breast implants. I definitely felt better after I had my implants removed. And it's almost like you're a fish in water. You don't realize how bad you feel until you have this upgrade with the implant removal, and you're like, "Wow, I'm not as tired, and my brain's working a little bit better. I don't feel as inflamed. I've lost some weight."

I was really surprised by that, very, very surprised by the results I had after I had my implants removed. Thank you so much for coming on the show. Everyone, I'm Dr. Wendy Myers. Thanks for tuning in to the Myers Detox podcast, where I bring experts from around the world to discuss topics related to detoxification and how you can

upgrade your health, and certainly removing your implants is one of those options. So thanks for tuning in.

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