

bionobo® · 2026 edition

Breast implants *and ASIA syndrome*

A guide to listening to yourself, before and after explant, *with all the information, without fear*

What is inside you and what your body does with it, what ASIA is and what is debated, what the FDA and Spain's AEMPS say, how to prepare the terrain if you decide to explant and how to look after yourself afterwards.

INCLUDES

7 questions for your surgeon
and a printable 4-week symptom diary.

Your body, your decision

UNDERSTAND · DECIDE · CARE · SUPPORT

a letter to begin

Beyond beauty *from a place of respect*

"We're not here to tell you what to do with your body: that's your decision. But a conscious decision needs all the information."

This guide is for you if you have implants, if you are thinking of having them removed or if you have already had them removed. Also if you are supporting someone on that path.

Many women live with their implants without any problems; others describe symptoms that are still not well understood. Both are true, and both deserve respect.

Our aim is to give you honest, straight-talking information: what the studies and the regulators say, what women who have lived it tell us, and also what is still not known. No fear and no exaggeration.

Every fact carries its source in small print. And almost everything here can be put into practice without buying anything from us.

IN FIGURES
ISAPS · 2024

In 2024 there were 1,658,615 breast augmentations and 341,971 implant removals worldwide: *roughly one removal for every five augmentations*. In Spain, 42,129 augmentations and 9,415 removals.

ISAPS Global Survey 2024; these are estimates.

That's why we draw two conclusions:

01 Whatever your decision — keeping them, having them checked or having them removed — let it be yours, made with all the cards on the table.

02 And whatever you decide, let's learn to look after the terrain to give your body a hand: before, during and after.

Real change happens on the inside.

This message is for you, who want to look after yourself and find the love that was always inside you.

THE bionobo® TEAM

SOURCES Breast augmentations and implant removals, worldwide and in Spain: ISAPS, "International Survey on Aesthetic/Cosmetic Procedures", 2024 (estimates). Symptoms that are still not well understood: FDA, "Risks and Complications of Breast Implants".

◆ PAUSE *What has brought you here?*

contents and shortcuts

How to read this guide *where do I start?*

There's no need to read it in one sitting. Open it wherever you are. *On your phone, tap any line in the contents and it takes you to its page.*

TO PRINT · P. 11
Your 4-week symptom diary

FOR YOUR CONSULTATION · P. 13
7 questions for your surgeon

I Understand — PP. 4-10

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WHERE DO I START?

I have implants and I feel fine
→ **pp. 4-5** and **p. 11**

I have implants and I don't feel right
→ **pp. 7-8** and **p. 11**

I'm thinking about explant
→ **pp. 12-13** and **p. 16**

I've already had them removed
→ **pp. 16-18**, and then **pp. 19-20**

Want to start today?
If in doubt, water · **pp. 17-18**

Starting from scratch?
If you want to start with the very basics, little by little and from scratch, you have the **Beginner's detox guide** in the **guides library**.

HOW TO READ EACH HABIT

minimum version · + if you want more · *observe* · where · AFTER SURGERY · pause

PART I · CHAPTERS 01-07

I Understand — *without fear*

First, what an implant is and what the body does with it. Then, what ASIA is, what is known and what is debated. Without exaggerating and without hiding anything.

What is inside you 04
Your body and what is foreign 05
What is ASIA? 06
What women describe 07
What is known and what is debated 08
What regulators say 09
BIA-ALCL and other rare cancers 10

chapter 01 · what is inside you

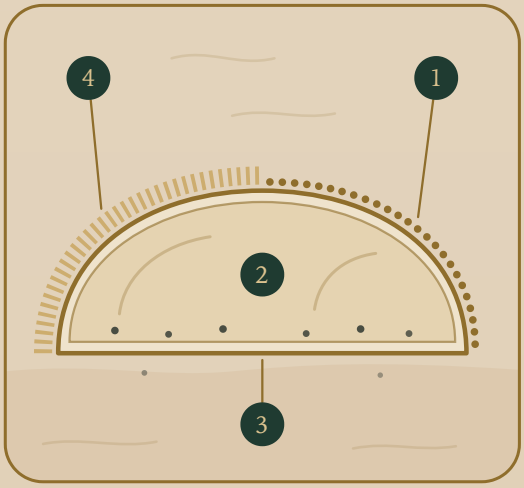
What is inside you
what an implant is made of

1 **The shell.** Made of silicone, smooth or textured. The textured kind was designed so that the implant holds in place better and moves less; it is now known to be more strongly associated with BIA-ALCL than the smooth kind (**p. 10**).

2 **The filling.** Silicone gel or saline. Saline implants also have a silicone shell; if they rupture, the saline leaks out, the body absorbs it and the breast deflates. The filling does not seem to change the risk of BIA-ALCL, and general symptoms have been described with both.

3 **Platinum and traces.** Platinum is used as a catalyst to make the shell and the gel: according to the FDA, in its metallic form, the lowest-risk one, and the little that crosses the shell is not a significant risk (the FDA is still reviewing the studies). All implants contain chemicals and traces of heavy metals (parts per million), and the FDA requires the leaflet for each model to list them. Most of it stays inside, but small amounts can cross the shell even when it is intact ("gel bleed").

4 **Some, with polyurethane.** A foam coating that degrades over the years; traces of a substance it releases (2,4-TDA) have been measured in the urine of some women with these implants. How much risk this poses varies from study to study (Hester et al., 1997; Luu et al., 1998, of the FDA). France withdrew them as a precaution in 2019; Spain and the rest of the EU did not.



An implant in cross-section (illustration): on the left, with polyurethane foam; on the right, textured.

YOUR RIGHT

Ask your surgeon for the card and leaflet for your implant: you have the right to know what is inside you.

SOURCES FDA: labelling guidance (2020), note on platinum and "Risks and Complications" · SCHEER, 2021 · Hester TR et al., *Plast Reconstr Surg*, 1997 · Luu HM et al. (FDA), *Environ Health Perspect*, 1998 · AEMPS (Spanish Agency of Medicines and Medical Devices), note PS 9/2019.

◆ PAUSE *Do you know which model you have? If not, you already have your first question.*

chapter 02 · your body and what is foreign

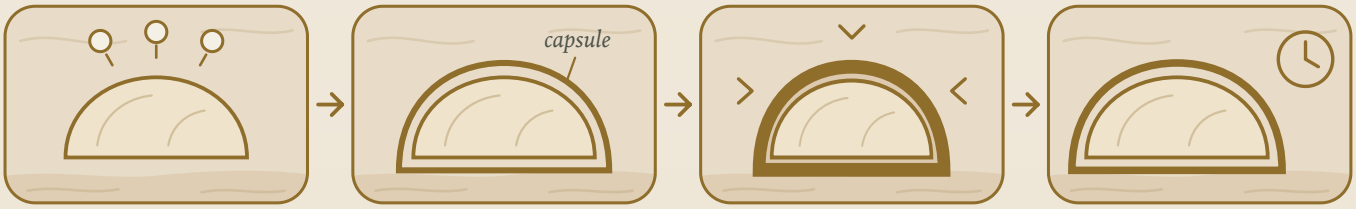
Your body and what is foreign *the capsule, and why they are not for life*

THE FIRST THING PEOPLE TELL US

"But they're safe today, aren't they?"

They are medical devices in the highest-control class (**p. 9**). And even so, the FDA says it clearly: **breast implants are not lifetime devices.** The longer you have them, the more likely it is that a complication will appear, and some require further surgery.

WHAT THE BODY DOES · IN FOUR STEPS



1 · Recognises

Faced with any implant, the body does the same thing: it recognises it as something foreign.

2 · Wraps

It surrounds it with a capsule of scar tissue, and this reaction lasts as long as the implant is in. That is to be expected.

3 · It can tighten

Sometimes the capsule hardens and tightens: capsular contracture (Baker grades I–IV). Its cause is unknown.

4 · Over the years

That is why implants are checked: the schedule, below.

In the FDA's large follow-up study, with almost 100,000 patients (Coroneos et al., 2019), among women with a first augmentation:

7.2 % had grade III–IV contracture: it was the most common reason for having another operation.

11.7 % had already had another surgery by 7 years.

RUPTURES AND MIGRATION

What goes unnoticed

With silicone gel implants, most ruptures are **silent**: you can neither feel nor see them.

Silicone can move out of the implant into nearby tissues, such as the chest wall or the lymph nodes in the armpit, and into organs such as the liver or the lungs, from where it sometimes cannot be removed.

CHECK-UPS

silicone gel · FDA recommendation (US)

With silicone gel implants, the FDA (US) recommends an ultrasound or MRI scan even if you notice nothing, on this schedule:

0	5–6	2–3
the surgery	years later, the first scan	and then, every 2–3 years

If there are symptoms or the ultrasound is not clear, an MRI. Saline implants do not need this screening: if they rupture, you can tell. In Spain, the AEMPS asks women to keep up the usual regular check-ups. **Ask your doctor which follow-up is right for you.**

Your body is not a storage tank: *it is a system that adapts.*

With an implant, your body lives with something foreign; in some women this coexistence is noticeable and in others it is not. That is why we invite you to listen to yourself.

SOURCES FDA, "Risks and Complications of Breast Implants" (2023) · Anderson JM et al., *Semin Immunol*, 2008 · Coroneos CJ et al., *Ann Surg*, 2019 · FDA, labelling guidance (2020): rupture screening and checklist · AEMPS, note PS 9/2019.

◆ PAUSE *When was your last check-up?*

chapter 03 · what is ASIA

What is ASIA?
a name proposed in 2011

ASIA

autoimmune/inflammatory syndrome induced by adjuvants

adjuvant: a substance that stimulates the immune response.

In 2011, the immunologists Yehuda Shoenfeld and Nancy Agmon-Levin proposed a common name, **ASIA**, for several conditions with similar symptoms and a prior exposure to an adjuvant. Silicone is among the adjuvants. They grouped four conditions:

- **siliconosis** — THE SUBJECT OF THIS GUIDE
- Gulf War syndrome
- macrophagic myofasciitis
- some post-vaccination phenomena

That last part is the most debated – a review concludes that current data do not support the claim that the aluminium adjuvants in vaccines cause ASIA (Ameratunga et al., 2017) – and it is not the subject of this guide: here we talk only about the silicone in implants.

MAJOR CRITERIA

What weighs most

- **A prior exposure.** Having been exposed to something external (for example, silicone) before the symptoms.
- **"Typical" symptoms.** Muscle pain or weakness, joint pain or swelling, chronic fatigue or sleep that does not refresh, neurological symptoms, memory or concentration lapses, fever, dry mouth.
- **Improvement** when whatever triggers it is removed.
- **A typical biopsy.**

MINOR CRITERIA

What goes along with it

- Autoantibodies.
- Other symptoms, such as irritable bowel.
- Certain genes (HLA).
- The appearance of an autoimmune disease.

ASIA IS PROPOSED WHEN THERE ARE ●● 2 major *or* ●○○ 1 major + 2 minor

TWO VIEWS

ASIA is not a diagnosis accepted by everyone: some researchers consider its criteria too broad and not specific enough, and even doubt that it exists as a syndrome (Ameratunga et al., 2017).

Other specialists argue that there is a link with silicone (**p. 8**).

We share both views so that you have all the information.

SOURCES Shoenfeld Y and Agmon-Levin N, *J Autoimmun*, 2011 · Colaris MJL et al., *Immunol Res*, 2017 (criteria, table 1) · Ameratunga R et al., *J Allergy Clin Immunol Pract*, 2017.

◆ PAUSE *Reading a set of criteria is not diagnosing yourself: it is understanding what is being talked about.*

chapter 04 · what women describe

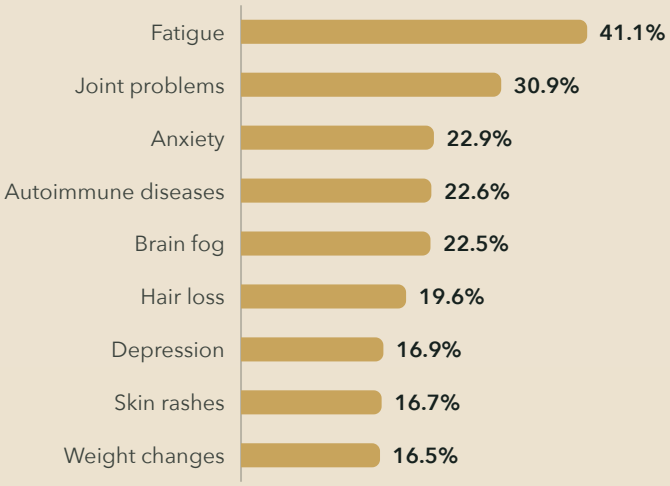
What women describe *you are not alone*

Many women and professionals use the term "breast implant illness" (BII) for a set of symptoms that appear after getting implants.

According to the FDA, it is not currently a formal medical diagnosis and there is no specific test to confirm it; the cause, and to what extent it is related to implants, are not clear, and research continues.

REPORTS TO THE FDA · 2008 - JUNE 2024

What comes up most in 10,318 reports



% of reports that mention each term. We do not show a generic term, "illness" (18.7%). "Autoimmune diseases" includes symptoms or diagnosis.

5.6 years

on average from surgery until the symptoms began.

They have been described with all types of implants – silicone or saline, smooth or textured, round or anatomical – and can appear right after surgery or years later.

These are voluntary reports: they tell us what women are living with, not how many are, or why.

MAASTRICHT · NETHERLANDS

98 fatigue
91 joint pain
78 memory or concentration lapses

Of 100 women with symptoms they attributed to their silicone implants (Colaris et al., 2017).

2026 REVIEW · 23 STUDIES

In all, the studies record ***almost a hundred different symptoms***; the most common is fatigue, followed by pain in the joints and muscles (Petritsch et al., 2026).

Does this resonate? *Listen to yourself.*

Many of these symptoms have other possible causes. If you recognise yourself in them, it is a signal to listen to yourself and ask about it, not a diagnosis: one possible reading, not the explanation. How to listen to yourself, on p. 11.

SOURCES FDA, "Medical Device Reports for Systemic Symptoms in Women with Breast Implants" (2025) · Colaris MJL et al., *Immunol Res*, 2017 · Petritsch J et al., *Plast Reconstr Surg*, 2026.

◆ PAUSE *What has your body been telling you lately?*

chapter 05 · the science, today

What is known and what is debated *associations, not verdicts*

Some studies see something and others don't. We tell you about all of them.

SAW AN ASSOCIATION

2018 Israel
Watad et al. · Int J Epidemiol

24,651 women with silicone implants and 98,604 without them: a modest association with autoimmune or rheumatic diagnoses (OR 1.22; 95% CI 1.18–1.26), more marked for Sjögren's syndrome, systemic sclerosis and sarcoidosis.

BEAR IN MIND It is cross-sectional: it finds an association, not the cause.

2019 USA
Coroneos et al. · Ann Surg · FDA follow-up

In 99,993 patients, more cases of some rare diseases, such as Sjögren's syndrome, scleroderma or rheumatoid arthritis, than in the general population.

The authors call for confirmation with each patient's data.

BEAR IN MIND It has no control group of its own.

2022 Expert opinion
Cohen Tervaert et al. · Expert Rev Clin Immunol

It concludes that there is a causal relationship and that removing the implants is what helps most women best.

BEAR IN MIND It is an assessment, not a new study.

SAW NO CLEAR LINK

2016 Review · 32 studies
Balk et al. · Ann Intern Med

On silicone gel implants and long-term health, the evidence "remains inconclusive". It pointed to possible associations with rheumatoid arthritis, Sjögren's syndrome and Raynaud's phenomenon.

It asks for better studies.

BEAR IN MIND For most diseases there was, at best, one well-adjusted study.

2022 Meta-analysis · 10 cohorts
Garcia-Leal et al. · Women Health

No link with general symptoms or with most connective tissue diseases.

It does find a weak and uncertain association with rheumatoid arthritis (RR 1.35; 95% CI 1.08–1.68).

BEAR IN MIND It is uncertain because a good part of that data was reported by the women themselves.

WHY THEY DON'T AGREE
They look at different things — diagnoses, specific diseases, symptoms — in different populations and with different methods.

AND THE FDA? It says that BII is not a formal diagnosis, that the cause is not clear and that research continues; and its boxed warning includes the general symptoms that patients describe (**p. 9**).

These are associations, not verdicts.
Association is not the same as cause.

That is the science today: an open debate. That is why your experience matters.

SOURCES Watad A et al., *Int J Epidemiol*, 2018 · Coroneos CJ et al., *Ann Surg*, 2019 · Cohen Tervaert JW et al., *Expert Rev Clin Immunol*, 2022 · Balk EM et al., *Ann Intern Med*, 2016 · Garcia-Leal M et al., *Women Health*, 2022 · FDA, reports of general symptoms (2025).

◆ **PAUSE** *What are you taking from this page: fear or clarity? Keep the clarity.*

chapter 06 · the regulators

What regulators say *the boxed warning*

Regulators don't talk about fear: they talk about information. What a woman needs to know before having surgery, and what is monitored afterwards.

US · FDA After hearing from experts and patients in 2019, on **27 October 2021** the FDA restricted the sale of breast implants in the US to practitioners who go through a checklist with each patient before operating: she can sign it and the surgeon has to sign it. Since then, the labelling has included a boxed warning, how to monitor for ruptures, the list of materials and an implant card.

WARNING FDA BOXED WARNING · ORIGINAL WORDING

1 p. 5 Breast implants are not considered lifetime devices. The longer people have them, the greater the chances are that they will develop complications, some of which will require more surgery.

2 p. 10 Breast implants have been associated with the development of a cancer of the immune system called breast implant-associated anaplastic large cell lymphoma (BIA-ALCL). This cancer occurs more commonly in patients with textured breast implants than smooth implants, although rates are not well defined. Some patients have died from BIA-ALCL.

3 p. 7 Patients receiving breast implants have reported a variety of systemic symptoms such as joint pain, muscle aches, confusion, chronic fatigue, autoimmune diseases and others. Individual patient risk for developing these symptoms has not been well established. Some patients report complete resolution of symptoms when the implants are removed without replacement.

The FDA's own words: the model boxed warning in its 2020 guidance, the one US labels carry today.

THE CHECKLIST · FDA

A review, section by section

The patient initials each one. Among them:

- ✓ Whether she is a good candidate
- ✓ The risks of the surgery
- ✓ BIA-ALCL lymphoma
- ✓ General symptoms
- ✓ The implant's own risks

It is a good list of questions for your surgeon, wherever you live. Our 7 questions, inspired by it, are on **p. 13**.

EU

In the EU, breast implants have been **class III** medical devices, the category with the highest level of control, since 2003.

SPAIN · AEMPS

In Spain, practitioners must register each implant in the national registry, and the AEMPS has followed lymphoma cases with a protocol since 2019, updated in 2024 (**p. 10**).

SOURCES FDA, press release of 27 October 2021 · FDA, breast implant labelling guidance, September 2020 (appendices A and B) · Commission Directive 2003/12/EC · AEMPS, notes PS 9/2019 and PS 26/2026.

◆ PAUSE *Were you given your implant card?*

chapter 07 · rare cancers

BIA-ALCL and other rare cancers *follow-up, not fear*

BIA-ALCL is not breast cancer: it is a lymphoma (a cancer of the immune system) that usually appears in the fluid or in the capsule around the implant.

FDA · WORLDWIDE

1,380

cases reported up to 30 June 2024, and 64 deaths; a median of 8 years after the implant.

These are reports, not a risk rate.

EUROPE · SCHEER 2021

1 in 3,000

women with implants: the highest estimate, in Australia and the Netherlands.

It is very uncommon, even with macro-textured implants.

SPAIN · AEMPS

111

confirmed cases out of 146 suspected cases reported up to 2025 (report of 3 June 2026).

In 2019 the AEMPS estimated that around 500,000 women in Spain had received implants in the previous ten years.

THE FDA'S 1,380 CASES, BY IMPLANT SURFACE



1,010 textured — Of the 40 with a smooth implant, only one had no known history of a textured one. — 40 smooth

A "moderate" weight of evidence

The European Commission's scientific committee (SCHEER, 2021) considers that there is a "moderate" weight of evidence of a causal relationship with textured implants, especially those with medium or high roughness.

According to the FDA (questions and answers of 23 October 2019), in most cases it is successfully treated with surgery that removes the implant and the capsule; in some, also with chemotherapy or radiotherapy.

2019, THE YEAR OF CHANGE

April — France withdrew macro-textured and polyurethane-coated implants as a precaution. Spain and the rest of the EU did not require them to be withdrawn.

July — At the FDA's request, a manufacturer withdrew a range of textured implants worldwide.

OTHER RARE CANCERS The FDA is also aware of 19 published cases of squamous cell carcinoma in the capsule, and reports of other lymphomas. It considers them rare and it is still not known why they appear; with no symptoms, it does not recommend removing implants for this reason alone.

If you have no symptoms, neither the FDA nor the European committee recommends removing your implants just out of fear of lymphoma.

The signs worth consulting a doctor about are on **p. 11**.

SOURCES FDA, BIA-ALCL reports (data to 30 June 2024) and questions and answers (23 October 2019) · SCHEER, final opinion, 2021 · AEMPS, notes PS 26/2026 and PS 9/2019 · FDA, safety communication on squamous cell carcinoma (8 March 2023).

◆ PAUSE *Follow-up, not fear. Do you know whether your implant is smooth or textured?*

PART II · CHAPTERS 08-10

II Listen — *and decide*

What you know now is good for one thing: listening to yourself better and deciding calmly.

Listen to your body 11
08 · SIGNALS AND YOUR DIARY
What to expect 12
09 · SOME, NOT ALL
The decision is yours 13
10 · AND 7 QUESTIONS

chapter 08 · your diary

Listen to your body *signals, not failures*

Listening to yourself is not watching yourself with fear. It is giving yourself one minute a day to notice how you are and to take something more than a memory to your appointment. If you feel well, that gets written down too.

SIGNS TO GET CHECKED

See your doctor if you notice…

- that a breast suddenly increases in size
- that it hardens or feels tight
- a wound or a lump
- swelling or pain
- changes in the skin of the area

…especially if they appear years after the surgery.

AEMPS, note PS 9/2019 · FDA, BIA-ALCL (2019)

Your folder

Keep your implant's card and leaflet, and note down your check-ups (**p. 5**). This diary, too.

Your vitamin D

In 131 women with an ASIA diagnosis linked to their silicone implants, those with low vitamin D had more autoantibodies; it isn't known whether supplements change anything (Colaris et al., *Clin Rheumatol* 2017). Ask to have it checked, and get some sun every day.

TOOL 1 · YOUR SYMPTOM DIARY

Four weeks, one minute a day

Take it to your appointment: what you write down is worth more than what you remember.

How much has it bothered you today? One number per box.

0 NONE | 1 A LITTLE | 2 QUITE A BIT | 3 A LOT

	WEEK 1							WEEK 2							WEEK 3							WEEK 4						
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28
Tiredness	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Poor sleep	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Joints and muscles	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Head and concentration	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Skin	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Breasts	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐

If you want to measure. Home tests, such as the hair mineral test, are a rough snapshot, not a diagnosis (Seidel et al., 2001): talk it over with your doctor.

Report it. If you think a problem is due to your implant, you can report it to your national regulator (in Spain, to the AEMPS through its **NotificaPS** portal, in Spanish).

PAUSE *This week, one minute a day for you.*

chapter 09 · after explant

What to expect *some, not all*

Many women improve after explant. Not all. We give you the numbers as they are.

FOUR FIGURES · EACH WITH ITS DENOMINATOR

REVIEW OF STUDIES

75%

469 OF 622 PATIENTS

A review brought together the studies published up to then and added up their patients: in three out of four, removing the implants improved the symptoms attributed to the silicone.

de Boer et al., 2017

ONE CLINIC

50%

27 OF 54 WOMEN

At a clinic in Maastricht (Netherlands) they saw 100 patients in 2014 with symptoms attributed to their silicone implants. Of the 54 who had them removed, 27 noticed an improvement: half.

Colaris et al., 2017

ONE STUDY, AT 1 YEAR

88%

OF ABOUT 50 WOMEN

In a study of 150 women in three groups, of the roughly 50 who attributed symptoms to their implants, at one year 88% noticed at least some improvement. The other two groups were for comparison.

Glicksman et al., 2023

REPORTS

687 *of 785*

687 IMPROVED · 98 NOT

Of the 4,210 reports to the FDA that mentioned a removal, only 785 said how the woman was afterwards: 687 mentioned an improvement and 98, no improvement or a worsening.

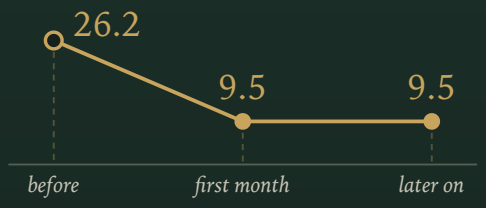
FDA, reports (MDR)

ONE MORE STUDY · WEE ET AL., 2020

750 women, from the first month

In 750 women who had their implants removed for general symptoms, the symptom score fell clearly, and stayed down, in 11 areas from the first month. These are patient-reported data, from a single surgeon: **they give hope, not guarantees.**

AVERAGE SYMPTOM SCORE



IN ALL HONESTY

If there is already an autoimmune diagnosis

In those who already had a diagnosed autoimmune disease, improvement was uncommon without medical treatment (3 of 18).

de Boer et al., 2017

Expectations count too

The authors of one of the studies point out that leaving negative expectations behind (a possible "nocebo" effect) may also contribute.

Glicksman et al., 2023

Some; not all

The FDA's own boxed warning says so (**p. 9**): some patients; not all.

FDA, model boxed warning (2020)

SOURCES de Boer M et al., *Immunol Res*, 2017 · Colaris MJL et al., *Immunol Res*, 2017 · Glicksman C et al., *Aesthet Surg J*, 2023 · FDA, reports of general symptoms associated with breast implants (MDR) · Wee CE et al., *Ann Plast Surg*, 2020.

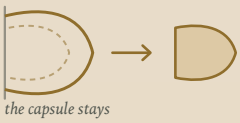
◆ PAUSE *What do you expect? Write it down, without judging it.*

chapter 10 · your decision

The decision is yours *and the technique is your surgeon's*

The decision to explant is yours; the technique is your surgeon's.

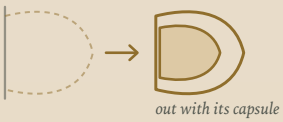
TWO WAYS TO EXPLANT · AND WHAT COMES AFTER



WAY A

Just the implant

Removing just the implant and leaving the capsule: minor surgery, with less risk of bleeding.



WAY B

The capsule too

Removing the capsule too, whole or in part: en bloc, total or partial capsulectomy.

AFTER

If you decide not to replace them

The breast may be left dimpled, sunken, wrinkled or sagging, especially if the implants were large or sat on top of the muscle. Ask about the options, including those that use your own tissue.

◆ **You and your surgeon decide which one suits you.** If BIA-ALCL is confirmed, the guidelines recommend removing the implant with its capsule (FDA; SCHEER 2021).

WHAT THE STUDIES SAY

In that same study (**p. 12**), the roughly 50 women with symptoms improved to a similar degree whichever type of capsulectomy they had: en bloc, total or partial. (Glicksman et al., 2022)

Another part of the study analysed 22 metals in the capsules of women with and without symptoms: there were no higher levels in those with symptoms, except for arsenic and zinc, which are linked to other sources. The authors conclude that fear of metals should not, on its own, be the reason to remove the whole capsule. (Wixtrom et al., 2022)

TOOL 2 · FOR YOUR APPOINTMENT

7 questions for your surgeon

Look for a surgeon with experience in explant.

- ☐ 1 Which implant do I have? Card, leaflet, surface and materials.
- ☐ 2 Which technique do you propose, and why?
- ☐ 3 How will my breasts look, and what options do I have?
- ☐ 4 Will I have drains or a compression garment? For how long?
- ☐ 5 What do I stop taking before and after, supplements included?
- ☐ 6 When can I get back to walking, the sauna, exercise and my routines?
- ☐ 7 What signs should make me call you?

Tick each question when you have your answer: none is unnecessary.

SOURCES FDA, risks of implants (2023) and BIA-ALCL (2019) · SCHEER, 2021 · Glicksman et al. and Wixtrom et al., *Aesthet Surg J*, 2022.

◆ PAUSE *Which question scares you most to ask? That one, first.*



PART III · CHAPTERS 11-14

III Look after the terrain — *before, during and after*

What cleansing is and isn't 14
11 · LYMPH HAS NO HEART
The drainage funnel 15
12 · START FROM THE BOTTOM
Your path 16
13 · BEFORE, DURING AND AFTER
Five habits 17–18
14 · FOR EVERY DAY

chapter 11 · what cleansing is

What cleansing is and isn't *lymph has no heart*

LET'S BE CLEAR

It's about giving a hand to your drainage pathways — the lymph, the liver, the gut, the skin and breathing — so that the body doesn't get overloaded. *It's knowledge almost nobody has: how do I help my body keep its cleansing pathways open?*

WHAT IT IS

Supporting, not forcing

- ✓ **Supporting what your body already does** every day along those same pathways.
- ✓ **Lowering the load and giving it what it needs:** filtered water, real food with nutrient density, movement, rest and breathing.

That's looking after the terrain: the base of everything else.

WHAT IT ISN'T

Not punishment, not fear, no shortcuts

- ✗ **Punishing the body** or living in fear.
- ✗ **Replacing your doctor** or your surgeon.
- ✗ **Starting anything intense** right after surgery.
- ✗ **Treating ASIA syndrome or BII:** no habit, protocol or product does that, and it's not what we're proposing.

LYMPH MOVES THANKS TO… StatPearls · *Lymphatic System*

Its own vessels	Your muscles	Your breathing
that contract	*when you move*	*when you breathe deeply*

That's why it depends so much on what you do every day.

TWO LEVELS

1. **Every day**
   Five habits, almost all of them free (**pp. 17–18**).
2. **From time to time**
   A seasonal protocol, for when you're ready and your surgeon allows it (**p. 20**).

The best time to start was ten years ago. *The second best is today.*

◆ PAUSE *What's the smallest step you could start with today?*

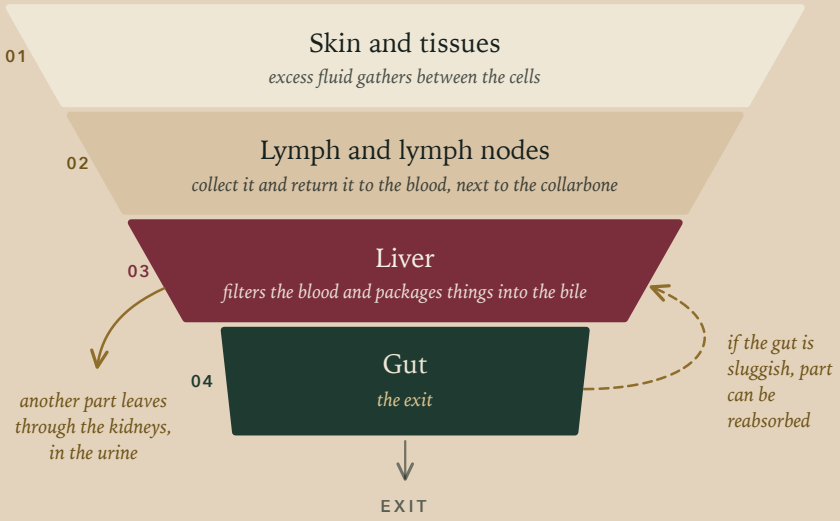
chapter 12 · the drainage funnel

The drainage funnel
why start from the bottom

The big exit for what the liver packages is the gut. And if the liver is saturated — because in the end everything ends up there a little — it needs a hand. There is a funnel: *if we want to drain the lymph, we have to start from the bottom.*

OPEN THE EXIT FIRST · THEN MOVE WHAT SITS ABOVE IT

re:set be:liver



Silicone that has come out of the implant is not removed by habits, protocols or products: *if it worries you, your doctor will assess it.*

WHY START FROM THE BOTTOM

First, make sure whatever moves has somewhere to go.

Lymph returns to the blood at the neck and, from there, the blood passes through the liver. That is why, in our way of cleansing, **we start at the bottom of the funnel: first the gut, then the liver.** It is the naturopathic tradition ikigen follows (**p. 20**).

If the gut is sluggish, part of what arrives with the bile can be reabsorbed: this is called enterohepatic circulation.

IN PRACTICE · FROM THE BOTTOM UP

1. **Your habits** — going to the toilet well: water, real food and movement (**pp. 17-18**)
2. **re:set** — the gut
3. **be:liver** — the liver and gallbladder

ikigen = gut and liver, in a single protocol

⊕ AFTER SURGERY No protocol until your surgeon allows it (**p. 16**). And manual lymphatic drainage, only if they advise it and with a trained therapist.

SOURCES StatPearls (NCBI): "Physiology, Bile Secretion" and "Physiology, Lymphatic System" · Silicone outside the implant: FDA checklist (2020 guidance). The gut → liver order is our way of doing it, not a tested clinical sequence.

◆ PAUSE *How's your exit? Are you going to the toilet well every day?*

chapter 13 · your path

Your path *before, during and after*

A three-lane plan, so you don't have to think about it. *Find yours:* you can move from one to another when your situation changes.

LANE A

With implants, and feeling well

looking after yourself, unhurried

EVERY DAY · YOUR HABITS

- **Water** filtered, always to hand
- **Real food** with protein
- **Rebounding** a few minutes
- **Sauna and drainage** if you can
- **Nature and calm** outside, and breathing

AND ALSO

- Your check-ups, as your surgeon advises (**p. 5**).
- Your implant's card and leaflet, to hand.
- If you notice something, the symptom diary (**p. 11**).
- If you take alcalina or shila:jit, keep 2 hours apart from any medication (**p. 19**).

Thinking about explant? Move to lane B.

The habits · pp. 17–18

LANE B

Preparing for explant

the weeks before

EVERY DAY

- The habits, unhurried.
- Real food, with protein (**p. 17**).
- Get your home ready for resting.

WITH YOUR SURGEON

- **Tell them everything you take,** including supplements such as alcalina or shila:jit, and stop whatever they advise.
- **No intense protocols, fasting or enemas** in the weeks beforehand without their OK.
- Ask when you will be able to get back to your activity and to exercise.
- Take your 7 questions (**p. 13**).

AND WITH YOU

- Ask someone to be with you for the first few days.
- If the emotional side weighs on you, ask for help (**p. 18**).

LANE C

Recovery

after explant

AFTER SURGERY

FROM THEATRE TO DISCHARGE

You may have drains and a bra or compression garment; healing goes on for several weeks while the swelling goes down. Follow your surgeon's instructions.

THE FIRST FEW WEEKS

- Eat soon and with protein, with no fasting or cleanses (habit 2, **p. 17**).
- **Nothing on the incisions:** no creams unless you've been advised to use them, no shila:jit, no brush.
- Water and breathing. Walking, when you're told you can.
- Scars protected from the sun.

OK — WITH YOUR SURGEON'S OK

Rebounding, the sauna, brushing (away from the scars) and manual lymphatic drainage, with a trained therapist, come back, little by little.

AND ONLY AFTER THAT, IF YOU WANT

The protocols (**pp. 19–20**).

If anything worries you after the surgery, call your team.

American Society of Plastic Surgeons (ASPS), *Breast implant removal · Recovery* · Weimann et al. (ESPEN), *Clin Nutr*, 2021.

THINKING ABOUT A PREGNANCY?

The FDA says it is not currently known whether a small amount of silicone can pass into breast milk (one study that measured silicon found no higher levels): **talk to your doctor.** During pregnancy and breastfeeding, do not take alcalina or shila:jit. And if you want to prepare the terrain beforehand, the "Pre-pregnancy detox" guide is coming soon to the guides library.

guides library

PAUSE *Which lane are you in today?*

chapter 14 · habits 1 and 2 of 5

Five habits *water and real food*

They cost little or nothing. Not all five at once: *start with one, and add another when the first comes naturally.*

1 water · 2 real food · 3 rebounding · 4 sauna and drainage · 5 nature, sun and calm

HABIT 1

Water

the solvent par excellence

It comes first because it's the simplest, and because the body uses it for almost everything. We're stepping away from bottled water: **the water you drink, filtered; and the water in your shower, too.**

"We could tell you which filter is best, but we don't want to: we want you to decide which is best. What we are here to tell you is that tap water is full of rubbish, and that a filter for the shower and a filter for the water you drink are essential. That's the first change."

If your filter also removes the minerals (for example, reverse osmosis), give them back: a few drops of alcalina (**p. 19**).

× **What we leave out:** unfiltered tap water and bottled water.

MINIMUM VERSION Always keep a glass to hand, and spend a little time understanding water.

\+ IF YOU WANT MORE Both filters: drinking and shower.

OBSERVE *After 7 days, how are your thirst and your digestion?*

WHERE Find out and choose for yourself.

AFTER SURGERY From day one, whatever your team advises.

HABIT 2

Real food

with nutrient density

"They tell you to eat a varied diet, but it's about eating for nutrient density: micronutrient density. Today we know that supermarket food usually grows in impoverished soils and has less nutrient density than it did a few decades ago. That's why it's important to leave the idea of 'varied' behind and understand what eating for nutrient density means. We're going to have to make changes."

- Real fats for cooking
  grass-fed beef tallow, grass-fed butter, ghee or virgin coconut oil; extra virgin olive oil, raw

× **What we leave out:** refined seed oils.

- Protein at every meal
- Real food
  and, little by little, away from the ordinary supermarket

MINIMUM VERSION Protein and something real, not an ultra-processed product, on every plate.

\+ IF YOU WANT MORE Change the fat you cook with.

OBSERVE *How are your energy and your satiety?*

WHERE The Beginner's detox guide.

AFTER SURGERY Clinical nutrition guidelines recommend eating again soon after surgery: not eating enough raises the risk of complications. No fasting or cleanses during recovery: real food, with protein, and water.

ⓘ When you read **"water"** on other pages, we mean filtered water, with the filter you choose.

SOURCES Davis et al., *J Am Coll Nutr*, 2004 · Montgomery and Biklé, *Front Sustain Food Syst*, 2021 · Weimann et al. (ESPEN), *Clin Nutr*, 2021.

◆ PAUSE *Which of the two will you start with?*

chapter 14 · habits 3, 4 and 5 of 5

Five habits
move, drain and calm down

HABIT 3

Rebounding
mini trampoline, bed or gym mat

Lymph has no pump of its own: it moves when you move (**p. 14**). **Gentle jumping is a simple, powerful and very low-cost habit:** on the bed, on a gym mat or on a mini trampoline.

× **What we leave out:** forcing it, and the skipping rope. Gentle jumps and, if anything feels uncomfortable, stop.

MINIMUM VERSION A few minutes of gentle jumps, on the bed or on a gym mat.

IF YOU WANT MORE A mini trampoline. It doesn't need to be expensive.

OBSERVE *How do your legs and energy feel afterwards?*

AFTER SURGERY Not until your surgeon gives you the OK for exercise. Meanwhile, gentle walking when you're told you can.

HABIT 4

Sauna and lymphatic drainage
heat, brush and hands

Dry brushing is an age-old act of care: it wakes up the skin and supports the lymph. Heat adds to it: **brush before or between heat sessions;** several sessions a week already count.

In the sauna, always: water, 15-minute sessions and no alcohol; with heart problems, low blood pressure, pregnancy or medication, check with your healthcare professional first.

MINIMUM VERSION A gentle dry brush, with no heat.

IF YOU WANT MORE A daily sauna if you can, and a manual lymphatic drainage massage with a trained therapist.

OBSERVE *How do you sleep on heat days?*

AFTER SURGERY No sauna or brushing until your surgeon allows it; the brush always away from the scars; manual drainage only if they advise it and with a trained therapist.

HABIT 5

Nature, sun and calm
reconnect with yourself

Moving your body in the open air, with no need to train; when you can, barefoot (grass, sand or soil; a park works too). Sun every day. And to reconnect with yourself, watch your breathing. **When something feels tight: stop, ease off, rest and breathe.**

MINIMUM VERSION A few minutes outside and one round of box breathing a day.

OBSERVE *How long do your shoulders take to drop?*

AFTER SURGERY Breathing, yes, from the start, gently. Walks, as soon as you're told you can. And scars protected from the sun for the first few months, as your surgeon advises.



Box breathing
Breathe in 4 s · hold 4 s · breathe out 4 s · hold 4 s. Once a day already counts.

IT COUNTS TOO

What you feel

If anxiety, sadness or how you see your body weigh on you – before or after explant – **ask for professional help.** Looking after yourself includes this, too.

◆ PAUSE *Which of the five do you really feel like doing? Start with that one.*

PART IV · CHAPTERS 15-16

IV Support — *with tools, when you choose them*

Remineralise every day 19
15 · alcalina AND shila:jit
When you're ready 20
16 · THE NEXT STEP

chapter 15 · day to day

Remineralise every day *alcalina and shila:jit, at your pace*





We make tools too. That's why we'll tell you plainly: you come first; the tools, when you choose them.

BEFORE YOUR FIRST SERVING · YOUR GATE

AFTER SURGERY
Nothing until your surgeon gives you the OK.

IF YOU TAKE MEDICATION
That includes medication after surgery (painkillers, antibiotics…): leave at least 2 hours between it and alcalina or shila:jit, and talk to your doctor first.

PREGNANCY AND BREASTFEEDING
Do not take alcalina or shila:jit.

alcalina

FULVIC BIOMINERALS

Drops you can add to your day: **alcalina accompanies your daily routine of caring for your drainage pathways.**

4 drops	6 drops	10 drops	10 + 10
start	go up	your routine	morning and afternoon

- ✓ **In a glass of filtered water,** at your pace.
- ✓ **If it bothers you,** go down a step and build back up slowly.
- ✓ **If your filter removes the minerals,** this is where you give them back.

PRODUCT PAGE
alcalina on bionobo.com
SCAN WITH YOUR CAMERA OR TAP

shila:jit

MINERAL RESIN

Himalayan resin: **the other natural source of fulvic acid in our range.**

a grain of rice	several servings a day	up to a small chickpea
		spread through the day

- ✓ **Never on the incisions:** look after the scar as your surgeon tells you.
- ✓ **If you are under medical treatment,** check first.

PRODUCT PAGE
shila:jit on bionobo.com
SCAN WITH YOUR CAMERA OR TAP

Food supplements should not be used as a substitute for a varied and balanced diet and a healthy lifestyle.

◆ PAUSE *What's your pace?*

chapter 16 · the next step

When you're ready *binders, chelators and protocols*

No rush and no pressure. First, let your body recover and let the habits run on their own. Then, if you feel like it, some women add a seasonal protocol to give the gut and the liver a hand. This is the order we follow ourselves; *none of them is required.*

TWO GATES

- Has your surgeon given you the OK?
- Are you going to the toilet properly and regularly?

YES To both: you can carry on, if you feel like it.

NO Stay with the habits (**pp. 17–18**) until that is the case.

You can spend weeks or months here: that is not a delay.

A COUPLE OF TIPS

Binders and chelators: *not the same thing*

A binder

It binds certain substances **inside the gut** and leaves with the stool: chlorella, activated charcoal, zeolite, clays or fibre. **Keep them apart from your medicines.**

A chelator

It also binds metals **in the blood and tissues**. Medical chelators, such as DMSA or EDTA, are used under **medical supervision.**

WHAT WE KNOW ABOUT FULVIC ACID

bionobo®

"Fulvic acid is known as a natural chelator: it forms chelates with other compounds. What we do know is that it penetrates cells very well: because of its tiny size, it is credited with the ability to cross barriers other compounds cannot, such as cell barriers or the blood–brain barrier."

In the EU there are no authorised claims for "eliminating heavy metals" or "detoxifying", nor for fulvic acid: we don't claim it for any product. **None of our products treats ASIA syndrome or BII.**

YOUR PATH · FROM THE BOTTOM UP (p. 15)

PREGNANCY AND BREASTFEEDING no alcalina, shila:jit, protocols or enemas

1 · DAILY

Remineralise

alcalina or shila:jit, at your pace.

alcalina
4 → 10 + 10

shila:jit
rice → chickpea

How, on **p. 19**

2 · GUT

re:set

The 24-hour gut protocol, with fermented kōso enzymes.

3 · LIVER

be:liver

Liver and gallbladder, after preparing the digestive system.

ALL THREE

ikigen

The three steps in a single protocol, in 4 days.

ENEMAS · THREE OPTIONS warm water · with fulvic acid (5–10 drops of alcalina per bag; 10–20 or more, advanced) · with fulvic acid and organic coffee.

AFTER SURGERY never without your surgeon's OK

PAUSE *How are your habits today, compared with the first day?*

closing · what you can do

Your body, your story *you choose*



Scars are part of your story, but they don't define your future.

Empowering yourself is loving yourself.

Honouring your body means listening to it, and understanding that healing isn't only physical: it is emotional too.

Listening to yourself is an opportunity, a step. Letting go is hard, and at times it will feel like you're having a rough time, but your future self will thank you. Cleansing isn't only physical, it isn't only what comes out: it's everything that has been stuck for a long time. Habits, emotions… all of it.

Here, letting go isn't about your implants (*that's your decision*): it's about rushing, fears, habits and burdens.

BEFORE CLOSING

Set your intention

The most important part is the intention; the habits sustain it.

What do you want?

What are you going to stop giving your energy to?

Today can be just another day or the first day of your new life.

You choose: one day or day one.
Your moment starts today.

contact and notice

Breast implants and ASIA syndrome

A guide to listening to yourself, before and after explant

Thank you for making it this far. Come back to this guide whenever you need it: to your diary, your questions, your habits. Start with just one, the one that appeals to you most, and go at your own pace. It doesn't have to be perfect: it just takes listening to yourself.

Your body, your decision.

GUIDES LIBRARY

All our guides, free

From beginners to every protocol, in one place.

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Today — ONE HABIT — pp. 17-18

Listen to yourself — YOUR DIARY — p. 11

Ask — YOUR SURGEON — p. 13

Your lane — BEFORE AND AFTER — p. 16

When you're ready — THE NEXT STEP — p. 20

TAKE YOUR TIME WITH THEM Before choosing a protocol: the re:set and be:liver guides and the beginner's guide are in the **guides library**; the ikigen one is, for now, only in Spanish. And if you are looking for one designed for women, lunaris™ and its guide are also in the library (for now, only in Spanish).

NOTICE

This guide is inspiration, not medical advice, and it is not meant to diagnose, treat or cure anything. We are not a medical team. It does not replace your surgeon or your doctor. The decision to explant is yours; the technique, your surgeon's. After surgery, no protocol, enema, sauna or supplement without their OK. If you notice the signs on p. 11, see a doctor. No alcalina, no shila:jit, no protocols (re:set, be:liver, ikigen) and no enemas during pregnancy or breastfeeding; if you take medication, leave 2 hours and consult. **None of our products treats ASIA syndrome or BII. If you have any medical condition or take medication, always, always consult your specialist.**

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For any question about the guide.

bionobo.com
The guides library and the product pages.

SOURCES

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alcalina, shila:jit, re:set and be:liver are food supplements. Food supplements should not be used as a substitute for a varied and balanced diet and a healthy lifestyle. They are not intended to diagnose, treat, cure or prevent any disease. Do not exceed the recommended daily dose. Keep out of the reach of children.

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