

Cup marked for 10 ml (10 cc). Marked with a marker (Sharpie).  
A syringe can be used to pour the 10 cc and make a mark on the liquid level.

250 cc bottle of 0.3% (3000 ppm) CDS  
**"Mother" solution**  
Gives for 25 bottles of 1 liter to drink (Lasts about 25 days)

**Note:** This bottle of pure CDS must remain in the refrigerator at all times.  
**Chlorine Dioxide evaporates above 11°C.**

**STEP 1**  
Glass with **10 ml** of pure CDS.

**STEP 2**  
Level mark for **1 liter.**

**STEP 3**

**STEP 4**  
**100 cc mark.** Use a kitchen measuring cup to make the mark.

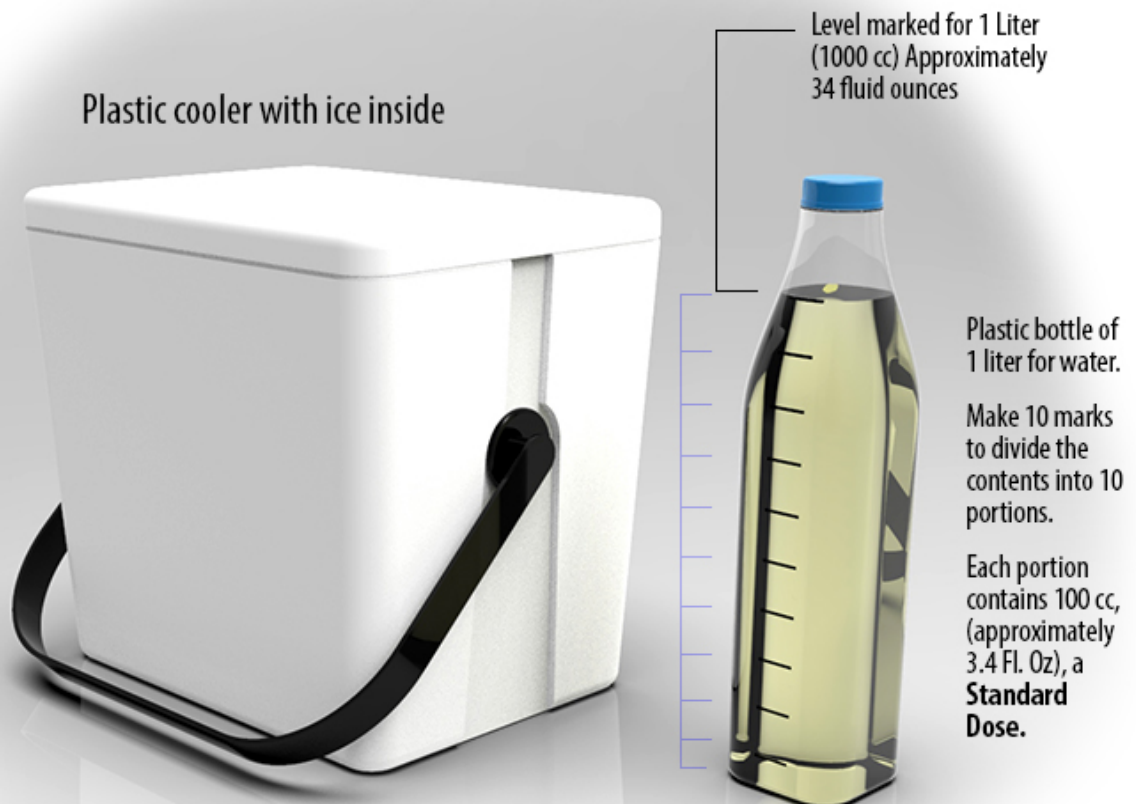
**Standard dose cup.** Marked at 100 cc Volume

1 liter (1000 cc) glass bottle filled with drinking water up to the mark.

Water bottle with the 10 cc of pure CDS poured inside.

This 1 litre bottle will be used during the day to take as many Standard Dose as indicated in the Protocol being followed.  
It should be well capped and preferably cold.  
If you are going to stay at home, this bottle will be placed in the refrigerator as well.  
If you are going to be away from home during the day, you can use a plastic bottle with 10 marks, one for every 100 cc. Take 1 mark every hour.

**Note:** We recommend using GLASS bottles, glasses and cups instead of plastic, unless an exception is made. (See note 2)



In case you are not going to be at home all day, you can take your daily intake in a plastic water bottle, with a volume of 1 liter.

You can get a small plastic cooler with ice, and put the bottle inside to keep it as cold as possible during the day.

This is even better if you live in hot or tropical countries.

***Please note, our results are only assessments of experimental scientific research. They do not constitute any form of advice or prescription. It is not intended as recommendation to anyone .... for any specific condition or illness .***



I want to introduce a new system of protocols letters, the reason is simple since often must combine several protocols according to disease, so I can easily combine the protocols for greater efficiency. I know that some are going to sound weird, but because of the situation is an attempt to create order easily.

So we can list the following protocols:

protocol A: as **A**mateur it is for all beginner  
 protocol B: as **B**asic which is equivalent to the old protocol 1000  
 protocol C: as **C**DS the old protocol 101 (110)  
 protocol D: as **D**ermatological for skin  
 protocol E: as **E**nemas  
 protocol F: as **F**requent, the ancient viral protocol 115 CDS  
 protocol G: as **G**as, it is used only dioxide gas  
 protocol H: as **H**ouse prevent contagion,  
 protocol I: as **I**nsects and Stings  
 protocol J : as **J**aws & mouthwashing  
 protocol K: as **K**it combined with DMSO  
 protocol M: as **M**alaria, high dose protocol  
 protocol N: as **N**ipper or ju**N**iors  
 protocol O: as **O**phthalmologists or **O**tolaryngology  
 protocol P: as **P**arasites, intense protocol  
 protocol Q: as **Q**uick burn relieve  
 protocol R: as **R**ectal with irrigant ball  
 protocol S: as **S**ensible, at very slowly doses  
 protocol T: as **T**erminal very serious illnesses  
 protocol U: as **U**rgency, which is the old protocol 6 + 6 Clara  
 protocol V: as **V**aginal, using irrigation  
 protocol W: as **W**au!... also can be used to ...  
 protocol X: as deto**X**, it means to detoxify heavy metals  
 protocol Y: as **Y**our last chance-infusion of CDI  
 protocol Z: as **Z**apper, frequencies therapy like Dr. Rife's

## PROTOCOL A: AMATEUR

- This protocol is for beginners, for those who are hesitant or insecure, for small issues or for general maintenance.
- Drops are always activated on a 1:1 ratio, adding 100 ml. of water to dilute it afterwards.
- Before starting any protocol, we check compatibility first (indication 9) to avoid adverse effects.

The first intake is 3 activated drops (on 1:1 ratio) with the addition of 200 ml. of water before going to sleep on the first day of treatment. The intake on the second day is 3 more activated drops with the addition of 200 ml. of water, one hour after breakfast, and then 3 more activated drops with 200 ml. of water before going to sleep. On the third day, we'll ingest the two former doses, after breakfast and before bedtime, adding another dose one hour after lunch. Then we continue with these three doses: one hour after breakfast and lunch and before bedtime for as long as the treatment is necessary, or until you feel recovered. This protocol is suitable for long-term administration and also serves as maintenance.

## PROTOCOL B: BASIC, THE EQUIVALENT TO THE OLD 1000 PROTOCOL

- This is the most widely used protocol and is equivalent to Jim Humble's 1000 protocol.
- Drops are always activated on a 1:1 ratio, adding 100 to 200 ml. of water to dilute it afterwards.
- Before starting any protocol, we check compatibility first (indication 9) to avoid any adverse effects.

The aim is to be able to take a dose of 3 activated drops per hour comfortably, during 8 hours and with little increases at a time. Usually we begin with a low dose of 6 activated drops per day, adding them to a 1 to 1,5 L bottle of water, for the first 3 days. Then we increase the dose to 12 activated drops, adding them to a 1 to 1,5 L bottle of water for the next 4 days. Next the dose will be 18 drops, adding them to a 1 to 1,5 L bottle of water for the next 7 days, and finally, up to 24 drops, added to a 1 to 1,5 L bottle of water for the next 7 days.

The daily dose must be taken throughout the day, divided in 8-12 parts. The bottle can be marked with divisions to ease the dosage. It is advisable to activate the daily dose every morning and add it to a 1 to 1,5 L bottle of water to drink a little bit each hour, for the rest of the treatment. The standard length of treatment is three weeks or whatever is necessary until one feels recovered.

In case of nausea, we should resume the former dose.

- 6 drops for 3 days in a 1 to 1,5 L water bottle.
- 12 drops for 4 days in a 1 to 1,5 L water bottle.
- 18 drops for 7 days in a 1 to 1,5 L water bottle.
- 24 drops for 7 days in a 1 to 1,5 L water bottle.

The sicker someone is, the slower we increase the dose.

In the case of someone seriously ill, treatment should start with no more than 6 drops per day and increase the dose progressively.

The advantage of preparing it in a bottle is that it's easier to carry and to drink.

We can mark the doses with accuracy making lines with a marker on the bottle, to divide them properly throughout the day.

daily dose every morning and add it to a 1 to 1,5 L bottle of water to drink a little bit each hour, for the rest of the treatment. The standard length of treatment is three weeks or whatever is necessary until one feels recovered. In case of nausea, we should resume the former dose.

- 6 drops for 3 days in a 1 to 1,5 L water bottle.
- 12 drops for 4 days in a 1 to 1,5 L water bottle.
- 18 drops for 7 days in a 1 to 1,5 L water bottle.
- 24 drops for 7 days in a 1 to 1,5 L water bottle.

The sicker someone is, the slower we increase the dose.

In the case of someone seriously ill, treatment should start with no more than 6 drops per day and increase the dose progressively.

The advantage of preparing it in a bottle is that it's easier to carry and to drink. We can mark the doses with accuracy making lines with a marker on the bottle, to divide them properly throughout the day.

## PROTOCOL C: CDS, THE OLD 101 PROTOCOL

• **CDS is a universal protocol, suitable for most treatments, easy to do and practically without aftereffects.**

• Protocol C (101) involves the ingestion of 1 ml. of CDS 0,3% (= 3000ppm) diluted in water every hour, 10 times a day. This is why this protocol is also known as Protocol 110 in many places.

We add 10 ml. of CDS 3000 ppm (or 100 ml. of CDS 300 ppm) to 1 L of water per day. Every hour we take one part until we finish the contents of the bottle (between 8 and 12 intakes). In case of serious illness or risk of life endangering, the dose must be increased slowly and progressively in separate doses taken throughout the day and depending on how the person feels, reaching 30 ml. per liter of water. If more is necessary, then another bottle must be prepared. Dose must be reduced in case of discomfort or nausea. Dont go over 80 ml. in 12 daily intakes (6ml/h for 100kg).The period of treatment would be for as long as it is necessary until one feels recovered.

- 10 ml. of CDS 3000 ppm (or 100 ml. of CDS 300 ppm) + 1 L of water per day CDS 101 Protocol is used for the treatment of most diseases and also to perform a general 'detox' and clean the body of toxins. It is also a detoxifying procedure, probably the most effective we know. Until now, it has not provoked aftereffects or undesirable interactions, and it doesn't tend to provoke diarrhea. When we are taking additional prescription drugs, a prudent interval of 1-2 hours must be observed to avoid missing on CDS's effectiveness. It is possible to add ¼ of seawater in case of demineralization.

## **PROTOCOL D: DERMATOLOGICAL, FOR THE SKIN**

- CDS is the best suited for topical application, as it doesn't leave any acid residue at all. It can be even applied directly without diluting it, since it has a neutral pH and can therefore be applied for longer without causing irritation. We fill a spray nebulizer with cooled CDS < 0,3% (=3000ppm) and we apply it to the affected area. It is directly applied in case of wounds, burns or other skin problems. The solution shouldn't cause any burning or heat. Its effects calm the pain and the bleeding. We can repeat the operation several times per day (even once every hour). In some sensitive cases, as in mucous membranes, it may be necessary to reduce concentration with a bit of water.

- If CDS isn't available, CD can be used as an alternative. In a spray nebulizer, we activate 25 drops and add 60 ml. of water (or 2 ounces). If the bottle is properly closed, the mix will last for a week or a bit longer. Its color will indicate the remaining degree of concentration. Keep stored in a cool place away from the light. Drops are always activated on a 1:1 ratio, adding between 60 ml. to 100 ml. of water afterwards. In the unlikely case of feeling heat or burning, we recommend to wash the area with water. We advise against using the old MMS formula, as it contains citric acid as activator, and it has been noticed that in the presence of citrobacter, the infections gets worse, since this bacteria feeds on the sodium citrate that results from the reaction. If deeper skin penetration is desired, it can be combined with DMSO at 70%. To this end, we prepare two independent spray bottles, one with DMSO at 70% and the other with CDS or 25 activated drops of MMS/CD, to add to a 60 ml. bottle of water (as indicated earlier on). We will then perform the application with both bottles, alternating them. The most adequate is CDS 3000 ppm without diluting and in form of spray, due to its neutral pH. The operation can be repeated several times per day (up to once every hour).

## **PROTOCOL E: ENEMAS.**

- The enema protocol is one of the most effective protocols besides ingestion, because it allows the absorption of CD through the colon's walls, which in turn carry it via the portal vein where the main function is to carry nutrients directly to the liver. It is therefore highly indicated for all hepatic problems, chronic illnesses, intoxications, diverticulitis, parasite removal and intestinal harmful mucous.

• Drops are always activated on a 1:1 ratio. Use 10 drops of activated CD (or 10 ml. of CDS for sensitive cases) for every liter of warm water (approx. at body temperature). Intestinal irrigators usually have a 2 L capacity. We fill the irrigator with water and we prepare the drops in a different glass. Once activated, they get mixed with the water in the irrigator. We apply a bit of Vaseline or body lotion to the extreme, while we introduce it in the rectum. The best position is to lie down on our right side to facilitate the seamless penetration of water. The valve opens and the colon starts filling up. This can be done in several short periods or all at once, depending on the person's condition and state of comfort. Then the fluid is retained inside for about three minutes before evacuating, to enhance effectiveness. It's not necessary to keep it over 5 minutes though. 10 activated drops of CD per liter of body-warm water or as an alternative 10 ml. of CDS per liter of warm water This protocol is essential in cases of hepatic chronic diseases, parasitosis, autism and other gastrointestinal diseases. According to the patient's condition and degree of disease, it is typically applied up to once per day, preferably in the evening, before bedtime. As a rule of thumb, it is used every 2-3 days for 1-2 weeks. There are reports from some people who have used this protocol up to twice per day for prolonged periods for the treatment of serious illnesses, without any negative aftereffects in most cases. Best policy is to adapt it to each person. Seawater can be added: 1 part of seawater and 3 of fresh water.

Many people have found the YOGUI method very useful:

- 3 nights in a row.
- 3 nights: one in, one out.
- 3 nights: every 3 days.
- 3 nights: once a week.

While this protocol is effective for hemorrhoids and rectal fissures, it's easier to apply the Protocol R in this case.

- Most diseases originate in the gastrointestinal system.
- CDS removes toxicity and melts adherences.
- If we eliminate toxicity, fatigue gets reduced.
- CDS removes biofilm, bacteria, candida, fungi, encapsulated fecal matter and parasites.
- We have quick access to the liver via the portal vein through the colon.
- The bloodstream circuit passes through the liver every 3 minutes.
- It's an easy and quick way of detoxifying the liver and the blood.
- Effective in chronic and autoimmune illnesses.
- This method was known in ancient times and up until the 60's it was common practice.
- Nowadays, we have lost it because it's seen as something dirty.
- It's an essential Hindu healing method.
- It's indispensable in detoxifying therapies.
- One daily stool means intestinal health.
- This protocol replaces oral treatment.

## **PROTOCOL F: FREQUENT, THE OLD 115 CDS VIRAL PROTOCOL**

- It involves taking 1 ml. of CDS 03% (3000 ppm chlorine dioxide solution) every 15 minutes, for 1 hour and 45 minutes (8 intakes), adding 1 L of water. This protocol is especially indicated in the treatment of sudden viral infectious diseases.

- The treatment is reduced to just 2 hours per day. It can be then continued with the Protocol C for as long as it is necessary until recovery.

One dose: 1 ml. CDS every 15 minutes, for 1 hour and 45 minutes in 8 intakes =10 ml. CDS in 1 L of water We can add 10 ml. of CDS 03% to a 1 L water bottle (distilled or mineral) and divide the bottle in 10 equal parts, marking them with lines, and drink up to one mark every 15 minutes. If we leave our home, we will carry the treatment with us, preferably at a cool temperature

in a thermos or isolating container. It's indispensable and of the highest importance not to take any drugs or meals from one hour prior to one hour after the CDS intakes. It's not recommended to do it on an empty stomach either. If necessary, the protocol can be repeated a few hours later.

## **PROTOCOL G: GAS, WHEN ONLY THE CHLORINE DIOXIDE GAS IS UTILIZED:**

- This is based on the idea that the healing benefit comes from the direct application of chlorine dioxide gas, which can be generated in both internal and external environments. The skin functions as an osmotic membrane, with the ability to exchange from the inside out and vice versa, having its own transpiration.

- Exposure to chlorine dioxide gas is a great way to cover large body surfaces in an effective manner or to treat a specific area. It is effective, but we must take into account exposure time; it could cause irritation in exposures over 5 minutes.

- This protocol is for external use.

- Gas must never be breathed for a prolonged period of time.

- It can be used in different ways, for large and small surfaces.

1. The glass protocol is for small surfaces. We can activate it in a glass to cover small surfaces or disinfect body parts.

2. The bag protocol is for large surfaces. It can be activated in a container inside a large size bag to cover large skin surfaces or even the whole body.



## 1. Glass Protocol:



We activate between 6 and 8 drops of CD



in a glass, without adding water. Then we place the affected area immediately over the glass rim, impeding the release of gas, and with precaution that the liquid never touches the skin. The length of exposure is typically 3 minutes. It must never be over 5 minutes to avoid irritations. The treatment is usually performed between 1 and 3 minutes and it can be repeated as many times as necessary, with one-hour intervals. It's the evaporating gas that disinfects without the need to soak the area. This can also be useful in ear problem treatments. We place the ear on the glass rim, allowing the gas to reach deeper into the affected area, where often water can't reach due to inflammation that shrinks the ear conduct.

Activate 6-8 drops of CD without water

## 2. Bag Protocol:



We use this protocol when we need to treat big skin areas or ingestion is not possible. First, we will manufacture a sleeping bag with 2 large bin liners stuck together in a way that one person can get into the bag comfortably and be completely covered, except for the head, which must always remain outside the bag to avoid the inhalation of the vapors. In order for the gas to reach everywhere, it is advisable to get in the bag without any clothes. Next, we

activate 30 drops of CD in a glass or porcelain container, without adding any water, and we introduce it inside the open bag. Then the person gets in, raising the bag up to his neck and closing firmly with his hands from the inside. Activate 30 drops of CD without water, introducing the container inside the bag, before getting in completely naked. The main purpose is that the released gases stay inside the bag disinfecting the skin, and even penetrating its upper layers removing bacteria, viruses and fungi.

- Things to consider:
- This protocol replaces oral treatment.
- Perform at most 3 times a day.
- It must be done without clothes, as they can become discolored.
- It reaches a great surface to treat at once.

## **PROTOCOL H: HOME, TO AVOID TRANSMISSION OF INFECTIONS**

• This protocol is based on the results of the research performed by Dr. Norio Ogata and Takashi Shibata. They proved that small quantities in the air avoid the transmission of infections. This is the Home Protocol, to avoid transmission of diseases and lung conditions:

According to room size, activate 6 -12 drops in a dry glass, without adding water, and keep it in the bedroom, where it will evaporate slowly. It's highly effective to avoid the transmission of any illness to your partner, if he/she is sleeping next to you or between children, when there's more than one child in the same room. Leave the CD about 2 m. away from the ill person. The warmer the room is, the faster the evaporation. If we prefer a slower evaporation process, we can add a spoonful of water to the mix. Activate 6 to 12 drops of CD without water in a glass

- It's a protocol of slow release into the air.
- It can be used in a sick person's bedroom at home or at hospital.
- It removes pathogens from the air avoiding transmission of infections.
- Activate 6 drops per each 10 square meters (107 sq. ft.) in a glass container. The chlorine dioxide will be released over a few hours.
- The evaporation process can be slowed down by adding a spoonful of water to the mix.
- Leave the door ajar in small bedrooms.
- Next day, all we will find is a saline crystalized deposit at the bottom of the glass.

## **PROTOCOL I: INSECTS AND BITES**

While CD (MMS or CDH) can be used for insect bites, CDS is the fastest and most effective if available. As CDS is usually kept in the refrigerator, it has the advantage of reducing the inflammation immediately.

Procedure: We soak a paper tissue or a dressing in CDS. We apply directly to the bite or sting and we leave it to dry. We check for any stings or prickles that need to be extracted. The process can be repeated as many times as necessary and there is no need to rinse with water afterwards. It is also effective with burns. This protocol can be utilized in all kinds of insect bites, spider bites or jellyfish stings. In case of snake, scorpion or poisonous ray bite, it might be necessary the Y Protocol (Hypodermic injection) to complement it.

## PROTOCOL J: JAWS AND MOUTHWASH PROTOCOL.

- This protocol is very useful for dental problems, bad mouth odor, mouth ulcers and fungi. Inflammations, teeth discoloration and bad breath quickly disappear. It can be used as mouthwash or for tooth brushing.
- Dosage: 10 ml. of CDS in a 200 ml. glass of water. Initially, wash your mouth and gargle 3-4 times a day for 3 minutes. Later on, you can do it just once a day. Another way is using a toothbrush to brush the teeth and massage the gums. For deep inflammations, add 1 ml. of DMSO (see below) to the mix. It's important to rinse the mouth at the end.
- While CD can also be used as 10 activated drops in 200 ml. of water for the mouthwash, CDS is the most suitable due to its neutral pH that doesn't affect tooth enamel. It has been highly successful both prior to and after any dentistry intervention, especially in preventive implants, where it has made antibiotics unnecessary thanks to its strong disinfectant power that inhibits all infection.
- When feeling tooth sensitivity at the time of biting, this can be caused by an underlying bag of infection in the root area. In this case, tooth brushing is not enough and we add DMSO to the mix.
- In case of acute tooth pain, the dose can be increased up to 20 ml. of CDS in a 200-ml. glass of water. One takes a sip and holds it in the mouth cavity for about two minutes. Usually, the reason for the acute pain is that there are bacteria within a dental cavity affecting the nerve. Typically, pain disappears when the nutrients that can feed the bacteria run out. This way, it's also possible sometimes to remove dental abscesses. After the mouthwash, one must rinse with water.

## PROTOCOL K: KIT COMBINED WITH DMSO

- This protocol combined with DMSO represents the old "MMS 3000" protocol (CD+DMSO external application)
- Before starting any protocol, we first check compatibility to avoid any adverse effects.
- Therefore we test for any allergic reaction to DMSO (it rarely occurs). Make an application and wait one hour for the reaction.
- Drops are always activated on a 1:1 ratio, adding between 100 to 200 ml. of water to dilute them.

Application protocol: In nearly all skin diseases, such as acne, psoriasis, eczema, athlete's foot, wounds, etc., activated CD is usually applied on the skin, followed by DMSO for a maximum of 10 times a day, once every hour. To do this, we mix 20 drops of activated CD with about 50 ml. of water in a spray bottle. If we keep it in a cool place away from the light, these stable solutions can last for several days, a week or more; even months in glass containers. Afterwards, three small spoonfuls of DMSO are added + a spoonful of water in a small glass. We must never use plastic bottles (ABS and PET) or rubber gloves since they could dissolve by contact with DMSO and these foreign particles would be carried onto the skin! PE and HDPE bottles are appropriate. We apply CD up to a maximum of 10 times a day, spraying it onto the skin, and later rubbing the diluted DMSO with the hand.

On big scale treatments, we alternate the area of the skin to be treated every hour. This procedure is performed 3 days per week and then the skin is allowed to regenerate for 4 more days. If excessive skin dryness appears, we have to dilute the solutions more or rub some aloe vera or virgin olive oil on the skin to smooth it. If excessive dryness appears with irritation, reduce the dose or take a break from the treatment.

- DMSO mustn't be kept in bottles with rubber dropper, as it would dilute it and contaminate the solution.
- It can only be kept in polyethylene (PE, HDPE) or glass bottles.
- Perform the treatment for 3 or 4 days
- There might be a slight heat, a momentary itch or redness which is normal and disappears completely.
- Always apply on to clean skin, free from perfumes and other substances.
- It is not used in enemas since the toxins present in the colon would get reabsorbed.
- Warning for therapists: Use gloves that are chemical-resistant.

**NEVER USE RUBBER GLOVES**, because they dissolve and cause toxicity.

- Aftereffect: it causes a garlic smell in mucous membranes.

## **PROTOCOL L: LAY IN BATH PROTOCOL (LAVATORY)**

- The detoxification bath is a simple remedy. It is a hydrotherapy that offers an alternative for the elimination of the effects of the accumulated toxins that create dysfunction in our organism while at the same time our bodies get healthier and strengthened.
- Our permeable skin is an organ with the ability to act as an osmotic membrane, allowing an exchange to take place between the interior and the exterior of our bodies. Besides oral intake doses, it is also possible to absorb CD directly through the skin. A bigger amount of ClO<sub>2</sub> enters the corporal fluids and interstitial tissue and according to those who have used it, the results in combination with other protocols are quite fast.
- With this method, the whole surface of the skin will be in touch with the ClO<sub>2</sub> gas for 20-30 minutes. For some people, this method has provided the definitive experience.
- Description of the process: We use a completely clean bathtub, without any soaps or bath products. Tap water can be used, since chlorine dioxide eliminates heavy metals by oxidation.

Very sensitive people can use very hot water and let it settle for a few minutes for its common chlorine contents to evaporate.

- Detoxifying baths with warm or hot water and 2-4 kilograms of simple marine salt absorb our body's acids through the skin. This is the process known as osmosis, where there is an attempt to keep a balanced density between two or more fluids.
- Thus, the higher density fluid will pass through the skin towards the lower density fluid, creating equilibrium. This way, acids and toxins flow out of our bodies. And in the same way, the body will absorb the marine salt minerals through the skin. This is why iodized salt or any other salt with chemical additives is not recommended.

- Drops are always activated on a 1:1 ratio, adding between 100 to 200 ml. of water to dilute them.
- 1. We clean the bathtub properly. There's no need to put any soap or other chemical products in the water.
- 2. We activate 30-60 drops of CD with HCL 4% as activator in a glass, depending on the quantity of water being used. Obviously, we will need more chlorine dioxide for a bigger amount of water.
- 3. We fill the bathtub with water at body temperature. Don't add any soap, perfume, shampoo, or children toys and keep the bathroom well aired.
- 4. Add the activated CD to the bathtub and stir to spread it everywhere. The amount of water does not reduce the amount of ClO<sub>2</sub> being released.
- 5. We take a bath soaking the whole body, head and scalp included. There's not need to worry if water gets into the eyes as this diluted form of CD is harmless.
- 6. We can add more hot water later, since the heat dilates the pores and therefore it facilitates the penetration of CD in the organism.
- Each bath session should last about 20 minutes and preferably be taken in the evening before bedtime.
- Detoxifying baths used as a complement to any treatment, are a very effective way of eliminating the accumulated residues in our organism in general.
- Open wounds tend to heal faster due to the disinfectant action of CD.

## PROTOCOL M: MALARIA

- The M protocol for malaria, developed by Jim Humble, when people require a simple and immediate effective action, and don't have time for long treatments. Two unique doses of 15 drops of activated CD are taken in the procedure for acute malaria in adults plus a second dose of 15 drops of activated CD between one and two hours later. Most symptoms should have disappeared about three hours after the second dose. If symptoms persist, we apply 3 drops per hour afterwards. In case of nausea, we reduce the dose. Treatment continues but with no more than three drops per hour. In case of children we can apply up to one drop for every 4 kilograms of body weight.

Those who have problems to ingest this amount at once, can fill three gel capsules with 5 activated drops in each one of them and take them with abundant water. It is usually easier and doesn't cause irritation problems in the throat. If the patient is still sick after this procedure, it won't be due to malaria, but to some other disease. Malaria gets easily confused with dengue, since both are mosquito transmitted. While malaria is a parasite, Dengue is a virus and the appropriate protocol to treat it is the F protocol (Frequent old protocol CDS 115).

Alternative more advanced protocols can also be used.

## CDS MALARIA PROTOCOL

- 20ml of CDS 0,3% ( 3000ppm) in 200ml water
- repeat after an hour same amount
- repeat again till total remission if necessary

*There is no vomiting or diarea with this protocol reported.*

Advanced alternative malaria CD protocol – If the adult patient is very weakened:

- 8 drops of MMS in the first intake
- 5 drops of MMS at the second hour (since first intake)
- 5 drops of MMS at the fourth hour (since first intake)
- 6 drops of MMS at the sixth hour (since first intake)
- 8 drops of MMS at the eighth hour (since first intake)
- 8 drops of MMS ... at bedtime

Daily total amount: 40 drops

- Malaria should disappear. In exceptional cases increase to one more intake with 10 drops.
- For babies: 4 daily intakes of 1 drop every 3 hours. Increase 2 more drops if necessary.

- **FOR CHILDREN: 5 DAILY INTAKES OF 1 DROP EVERY 2 HOURS FOR EVERY 11 KILOGRAMS OF WEIGHT.**
- **ADMINISTER FOR 2 DAYS**

Protocol N: for Nippers and Children

- N protocol is for nippers and children and is based on the experiences and testimonials of many mothers.
- As a general rule, a maximum of one drop of activated CD for every 12 kilograms of body weight is used as initial hourly dose, in 100 ml. or more of water.

**CDS tends to be better tolerated** and in this case, we use 1 ml. of CDS (3000 ppm= 0,3%) per year of age per day in 200 ml. or more of water.

- Before starting any protocol, we first check the compatibility, to avoid any adverse effects with a little amount.
- Drops are always activated on a 1:1 ratio, adding between 100 and 200 ml. of water.
- We have to watch for the minor's reaction in case of: fatigue, nausea, belly pain,vomiting... to adjust the dose accordingly. Generally, we can say that it's better not to give any kind of prescription drug or treatment until the first year of life has been reached, unless imperative.

5 kilograms weight – 3 drops a day divided in 10 intakes. It can get mixed with rice milk.  
 15 kilos weight – 6 drops a day divided in 10 intakes.  
 30 kilos weight – 8 drops a day divided in 10 intakes.  
 40 kilos weight – 12 drops a day divided in 10 intakes.  
 60 kilos weight – adult dose

- Avoid antioxidants and Vitamin C.
- Products must be kept away from children.
- It's preferable to use children-proof containers.

## PROTOCOL O: OPHTHALMOLOGIST (OTORRINOLOGIST)

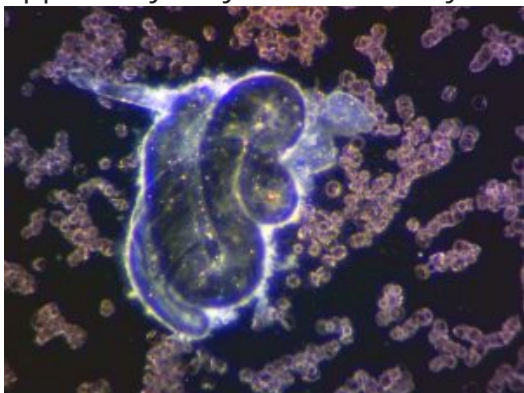
• In order to prepare ophthalmological drops, we follow this procedure: The following amounts are mixed in a small glass bottle with polyethylene dropper (PE polyethylene is harder than rubber):

- 50 ml. of saline solution
- 5 ml. of CDS
- 3 ml. of DMSO

We apply 5 drops every 2 hours to the affected eye. Ophthalmological drops kept in a cool place away from the light can conserve 100% efficiency for about three days. Afterwards, they decrease rapidly; therefore it's recommended to prepare a new mix. There's no risk of infection, as this is a disinfectant fluid, but its efficiency decreases after a few days. They can be used as nose drops as well.

## PROTOCOL P: AS IN PARASITES, INTENSE PROTOCOL

In our current society, we have lost contact with the popular wisdom of our ancestors. Conventional medicine doesn't contemplate parasites in our modern world, because apparently they don't exist anymore...



This twisted specimen in a blood sample shows to the contrary... they exist, especially in chronic diseases where protozoa seem to provoke Disbiosis (Rope worm) like on the images below



## Deparasitization protocol for three months:

One of the things we have forgotten is to follow the natural cycle of the Moon for many of our routines. This is why it is important to start treatment during the first three days of the Full Moon and continue during the Waning Moon period. There's more effectiveness in this period because this is when most nematodes mate in the bowels. This protocol goes beyond a simple deparasitization, and it's designed to be used when conventional deparasitizations fail.

During treatment, but especially at the beginning, it is absolutely necessary to use continuous daily CD enemas as well as a castor oil purge (a mineral purgative agent like the Epsom Salts or the vegetable mix of Sen's leaves). This treatment is specially oriented to the deparasitization of intestinal parasites of large size, mainly roundworm nematodes such as *Ascaris*. It's effective for most nematodes but it can be less effective against tapeworms such as the *Taenia* family. In case of a *Taenia* condition, the treatment with Niclosamide is effective. It's an advisable drug because it has a low level of toxicity.



In practice, all children affected by autism and most chronically ill individuals show a high amount of mucous that is hard to identify sometimes. It resembles a dead *Ascaris* or according to some, an intestinal mucous. Intestinal mucous over 1 meter long has been found and therefore, it is unlikely that this belongs to the patient. The University of Bologna in Italy claims that this mucous belongs to the body. However, Dr Volinsky from the University of Florida was able to perform a DNA analysis of the mucous and he thinks this is foreign to the human body.

Therefore, my opinion so far is that this is a form of unclassified "parasitical magma" and hence, it doesn't show up in labs' results. And my evidence comes from results.

Well, based on this protocol, it has been possible to recover over 220 autistic children considered uncurable and all of them expelled great quantities of this "parasitical plasma" (biofilm) besides other parasites. After expelling them, all improved significantly. Same thing happened with many other chronic diseases, apparently incurable.



One of the things we have forgotten is to follow the natural cycle of the Moon for many of our routines. This is why it is important to start treatment during the first three days of the Full Moon and continue during the Waning Moon period. There's more effectiveness in this period because this is when most nematodes mate in the bowels. This protocol goes beyond a simple de-parasitization, and it's designed to be used when conventional de-parasitizations fail. During treatment, but especially at the beginning, it is absolutely necessary to use continuous daily CD enemas as well as a castor oil purge (a mineral purgative agent like the Epsom Salts or the vegetable mix of Sen's leaves). This treatment is specially oriented to the deparasitization of intestinal parasites of large size, mainly roundworm nematodes such as *Ascaris*. It's effective for most nematodes but it can be less effective against tapeworms such as the *Taenia* family. In case of a *Taenia* condition, the treatment with Niclosamide is effective. It's an advisable drug because it has a low level of toxicity.

In practice, all children affected by autism and most chronically ill individuals show a high amount of mucous that is hard to identify sometimes. It resembles a dead *Ascaris* or according to some, an intestinal mucous. Intestinal mucous over 1 meter long has been found and therefore, it is unlikely that this belongs to the patient. The University of Bologna in Italy claims that this mucous belongs to the body. However, Dr. Volinsky from the University of Florida was able to perform a DNA analysis of the mucous and he thinks this is foreign to the human body although other genetic scientist and parasitologists are not conform with his version after study of the raw data.

Therefore, my opinion so far is that this is a form of unclassified "parasitical magma" and hence, it doesn't show up in labs' Test results. My evidence comes from simple therapeutic results. Based on this protocol, it has been possible to recover over 235 autistic children considered incurable and all of them expelled great quantities of this "parasitical plasma" (biofilm) besides other parasites. After expelling them, all improved significantly.

Same thing happened with many other chronic diseases, apparently incurable. Although its efficiency is known, there must be further research to obtain scientific evidence and I am looking for financial and academic support.

#### Treatment:

Note: this treatment doesn't utilize systemic antiparasitical drugs that are absorbed by the body. It's a better idea to use a high range Zapper such as the Biotrohn® as it eliminates parasites from the blood without intoxicating it. This protocol is designed for its use with children, without causing an excessive toxic charge in the blood and the body, due to its length and dosage. We must not confuse Mebendazol with Albendazol (Albenza®), which is systemic and needs a doctor's prescription. If you observe a clear infestation of parasites in the blood, you must consult with a doctor to confirm it. Only when you do this, systemic antiparasitical drugs (which will be absorbed by the blood) would be applied according to the doctor's criterion.

These antiparasitical drug brands differ across countries. Therefore, we will use the name of the main active chemical substance in this protocol. You must consult the brand with your pharmacist.

**Day 1**

- Pyrantel Pamoate (morning only dose) 10 mg/kg, administered in a single intake with some liquid. When presented in liquid form, a 5 ml. teaspoonful contains 250mg. (three 5 ml. teaspoonful for 60 kg). In the form of tablets, take 3 pills for 60 kg.
- Diatomaceous earth (two doses). One teaspoonful twice a day with meals, preferably fluids. Morning and evening.

**Day 2**

- Mebendazol (two doses) 100 mg. every 12 hours. One tablet in the morning and one in the evening.
- Diatomaceous earth (two doses). One teaspoonful twice a day with meals, preferably fluids. Morning and evening.
- Enema. Additional needed equipment: 2 L enema.

**Day 3**

- Two teaspoons of castor oil (tasteless from the pharmacy) on an empty stomach.
- Mebendazol (two doses) 100 mg. every 12 hours. One tablet in the morning and one in the evening.
- Diatomaceous earth (two doses). One teaspoon twice a day with meals, preferably liquids. Morning and evening.
- Enema

**Day 4**

- Mebendazol (two doses) 100 mg. every 12 hours. One tablet in the morning and one in the evening.
- Diatomaceous earth (two doses). One teaspoon twice a day with meals, preferably fluids. Morning and evening.
- Enema

**Day 5**

- Pyrantel Pamoate (morning only dose) 10 mg/kg, administered in a single intake with some liquid. When presented in liquid form, a 5 ml. teaspoon contains 250mg. (three 5 ml. teaspoons for 60 kg). In the form of tablets, take 3 pills for 60 kg.
- Diatomaceous earth (two doses). One teaspoon twice a day with meals, preferably fluids. Morning and evening.
- Enema

**Day 6**

- Two teaspoons of castor oil (tasteless from the pharmacy) on an empty stomach.
- Mebendazol (two doses) 100 mg. every 12 hours. One tablet in the morning and one in the evening.
- Diatomaceous earth (two doses). One teaspoon twice a day with meals, preferably fluids. Morning and evening.
- Two spoons of castor oil (tasteless from the pharmacy) on an empty stomach.
- Enema

## Day 7

- Enemas: as continuous as possible. Day 9 to 18 (Third month)
- Two spoons of castor oil (tasteless from the pharmacy) on an empty stomach. This must be repeated according to necessity. Suppress in case of continuous diarrhea.
- Diatomaceous earth (two doses). One teaspoon twice a day with meals, preferably fluids.

Morning and evening.

- Neem infusion for 9 days or alternative antiparasitical infusion.
- Enemas: as continuous as possible.

• If after the third month, there are still parasites or great amounts of mucous, the protocol can be followed starting from the first month again. According to the British Royal Society of Medicine, 90% of diseases and malaise are directly or indirectly related with a dirty colon. We could see the colon as the body's sewage. The toxins in the colon get filtered to the blood, deteriorating our health in serious ways. On average, we can find between 2 and 12 kilograms of sediments in the colon of adults over 40. It's in this undigested waste where smaller and bigger parasites move about, intoxicating their host organism in a slow yet steady way. Parasites consume most of the good nutrients in the foods that reach the digestive system, often leaving nothing but "garbage" for their host.

Why do you think that even when we try to eat healthily, taking vitamin supplements and other products, we don't experience any improvement?

Moreover, sometimes we get the opposite effect: we are feeding the parasites. One of the best methods to remove all that waste is the "colon hydrotherapy", performed by a clinician. Naturally and even just with water, the 2 L enema treatment can help to heal many diseases. Widely used by many ancient cultures, it's an easy method and one of the natural ways to progressively cleanse the colon. The liquid that is introduced helps in the elimination of the accumulated toxicity in the bowels, by killing the parasites. When there is massive death of worms, we can experience fever, fatigue and we can feel quite sick. In order to impede toxins from reaching the bloodstream, we must evacuate the digestive system by enemas as soon as possible. Enema is an indispensable part in this treatment. Parasites generate a mucosa or biofilm in the bowels where they can hide from the attacks of all drugs and hence, CD enemas come into play as an important agent. CD can penetrate that layer destroying the eggs and larvae dwelling there as well. It must be performed daily from the second day and then progressively spread out every 3-4 days. It's paramount to listen to our own body, as it will indicate the pattern of its needs.

The right amount to use is between 10-20 drops of CD with its activator or 10-20ml. of CDS for 2 liters. The dose can be increased according to tolerance. What matters is to keep the solution inside for as long as possible without going over 5-10 minutes.

Parasite detection in feces. It's necessary to detect the pinworms in the feces by direct observation of the fecal matter. We can get hold of a plastic bowl, not too big in diameter, and a stick to perform the exam after our stool. A microscope will come very handy for the diagnosis, because it will allow us to see the small parasites in the blood as well as the presence of eggs or larvae in the feces. This way, we can control whether the amount of parasites is decreasing. In case of anal itch, we can use a rubber syringe for enemas with a dilution of 15 ml.

of Mebendazole or pyrantel pamoate. The best course of action is to introduce the medicine with approximately 30 ml. of water and retain it all night long. The itch provoked by the helminthes will disappear this way. This treatment is highly effective with sleepless children, since often these same parasites are the cause of discomfort and restlessness. Especially in children, a very common parasite is responsible for the onset of anxiety and other attention deficit disorders.

Deparasitization drugs – Mebendazol (Lomper, Vermox). Mebendazol is a drug in use since the

70's for the treatment of diseases provoked by helminthes (gastrointestinal pinworms). The drug impedes the parasite from using glucose, provoking a reduction of energy and eventually, its death.

Mebendazol's absorption in the gastrointestinal tract is very limited (approximately 5% to 10%).

Absorption is heightened when it's administered in soon as possible.

Enema is an indispensable part in this treatment. Parasites generate a mucosa or biofilm in the bowels where they can hide from the attacks of all drugs and hence, CD enemas come into play as an important agent. CD can penetrate that layer destroying the eggs and larvae dwelling there as well. It must be performed daily from the second day and then progressively spread out every 3-4 days. It's paramount to listen to our own body, as it will indicate the pattern of its needs.

The right amount to use is between 10-20 drops of CD with its activator or 10-20 ml. of CDS for 2 liters. The dose can be increased according to tolerance. What matters is to keep the solution inside for as long as possible without going over 5- 10 minutes.



There are very useful minerals and substances to fight parasitical infections that allow us to perform a variety of treatments: bentonite to drag deposits, vegetable carbon to absorb toxins, common clay or diatomaceous earth are among the main ones. In this case, we will use diatomaceous earth as an important destructive agent of intestinal parasites. In case of any discomfort, we will add activated carbon tablets to detoxify.

### Diatomaceous earth

The treatment with diatomaceous earth must be followed for the 18 days of treatment. Diatoms are unicellular plants that lived in the oceans millions of years ago. They developed an enclosing wall made up of the same silica they extracted from the water. When the diatoms died, this microscopic wall was deposited at the bottom of the oceans. Through the ages, they were accumulated in huge deposits thousands of meters deep. With the passing of time, the oceans receded and these deposits were eventually covered, the walls fossilized and compressed, generating a rock chalk powder called diatomaceous earth. Diatomaceous earth is inert matter and ingestion is not toxic, containing several minerals such as manganese, magnesium, iron, titanium, calcium and silica among others. Properly pulverized, the diatoms' skeletons become microscopic siliceous needles that are harmful to parasites, fungi, candida, worms and amoebas. These needles are harmless to humans and other hot-blooded animals. While it can be taken in a steady manner because it is harmless, the best course of action (as with everything) is to take a break every now and then. Take a teaspoon twice a day for the 18 days of treatment.

### Castor Oil

Castor oil is extracted from the seed of a plant akin to the maple tree called 'Ricinus communis', or "Devil's Maple Tree". Its seeds are made of 50%-80% oil, which has a high content in ricinoleate acid. This oil has excellent laxative and purgative properties. When we initiate a drug and plant treatment, some parasites can experience a spastic paralysis. If there are many of them together, they can create a "knot" of worms and provoke intestinal obstruction and hence, the importance of the use of castor oil. It's necessary to take it in the mornings on an empty stomach with some juice, tea or milk. The adult dose is 15-30 ml. (two large spoons) on an empty stomach. We then wait one hour before taking any breakfast or medication. If there is little tolerance, Epson Salts or Sen's leaves can also be used as mineral purgatives.

**Mebendazol (Vermox) interacts with :**

Tagamet  
 Ethotoin  
 Penicillin  
 Zithromax  
 Amoxicillin  
 Mephenytoin  
 Carbamazepine  
 Flagyl

**The most important drug interaction with Vermox ((mebendazol) is Flagyl (metronidazol) This is very important! DON'T take / administer mebendazol and metronidazol together. When administered together, they can cause Stevens-Johnson syndrome, which can be very serious.**

**The second important interaction with Vermox is Tagamet (cimetidine). This doesn't result in a serious interaction, but it could result in a reduction of mebendazol's hepatic metabolism, causing a high concentration in serum and blood. Combantrin ®: 10 mg. per kilogram Don't eat pumpkin seeds with Combantrin ® because it can cancel their effect.**

Stonebreaker: 'Lepidium latifolium'

We can make several daily infusions of its leaves. Lepidium Latifolium eliminates oxalates, the calcium residues we have mentioned earlier on.

It is also available in drops. Follow the package instructions: 20 to 25 drops for adults, 15 drops for older children and 7 drops for young children.

Neem: Prepare a tea with the leaves, one bag of tea in one liter of water (if necessary, add stevia for its bitter taste). We can also use neem tablets.

Castor oil: one teaspoon for the youngest children, 2 teaspoons for older children. Another option is taking castor oil in capsules.

Isotonic seawater:

Mix one part of seawater with aprox. three parts of mineral water.

For low weight 14 kg (30 pounds) use 10 ml.,

for 14-23 kg (30 to 50 pounds) use 20ml.

for 24-35 kg (55 to 75 pounds) use 30 ml. and

over 35 kg (75 pounds) use 50ml. to 150 ml. per day.

More seawater mixed with water can be administered (3 or more times) when more minerals are needed.

## PROTOCOL Q: QUENCHING BURNS

Burns, sunburns or bites:

- There are two ways to treat them: in case of serious burns it is preferable to apply CDS 0,3% (3000 ppm) directly, spraying it over the burn. Normally, this soothes the pain immediately.
- We can soak a napkin in CDS and leave it on the affected area. The advantage of this method is that we can repeat it several times and there's no need to wash afterwards, as it doesn't produce any pH chemical burn. An older application method for burns is the use of non-activated chlorite alone, spraying it directly and leaving it for one or two minutes. We shouldn't apply non-activated chlorite for longer. When we do it this way, chlorite is activated with the lactic acid produced under the skin, in the very pustules of the burn. Afterwards, it's essential to

clean the chlorite residue under the water.

Experience has taught me that it's most effective to combine both methods: we first use the non-activated chlorite, leaving it for one or two minutes and we wash it afterwards with nothing but abundant water. Pain disappears immediately. When pain reappears after a few minutes, we use CDS 03%, spraying it over the affected area. We can repeat several times every 30 minutes, depending on the seriousness of the wounds. As a general rule, one to three treatments are enough to eliminate pain completely, speeding up the healing without leaving scars.

## **PROTOCOL R: RECTAL IRRIGATOR**

This protocol is specially designed for rectal application with the use of a rubber irrigator with approximately 100-150 ml. capacity. We activate six drops of CD in a glass of water and add 150 ml. of water at body temperature. Then we absorb it with the irrigator removing the internal air. We apply Vaseline or lubricant lotion to the extreme of the irrigator. Then we introduce it in the rectum emptying the irrigator completely. Retain for about three minutes before evacuating. This is the optimum protocol for anal fissures, hemorrhoids and especially for prostatic cancer, where it is applied after each stool. It's a simple protocol without aftereffects, with high effectiveness.

It eliminates toxicity, and melts adherences . If we eliminate toxicity, fatigue gets reduced. We have quick access to the liver via the portal vein through the colon. Bloodstream circuit passes through the liver every 3 minutes. Most diseases have its sources in the gastrointestinal system. This was known in ancient times and up until the 60's it was common practice. Nowadays, we have lost it because it's seen as something dirty. It's an essential Hindu healing method. The large bowel is the "sewage" of our organism. One daily stool means intestinal health. Exudation through the colon carries toxicity via the bloodstream to the main organs. Effective in chronic and autoimmune illnesses. It's indispensable in detoxifying therapies. Toxicity, bacteria associated with dead parasites.

## **PROTOCOL S: SENSITIVE, WITH VERY SMALL PROGRESSIVE DOSES**

This protocol is designed for those individuals who are not capable of ingesting CDS in the same way than most people. Particularly with the old MMS activated with citric acid, there are reported cases of possible aftereffects such as diarrhea or vomiting. There are people who are sensitive to even just one drop.

Thanks to my work with children with autism, I have found out that large body parasites may not be eliminated with chlorine dioxide. It's very likely that many parasites are indeed affected by dioxide, and end up dumping all their residues at once in the affected organism. These toxins are the cause of discomfort. Those who have practiced de-parasitization according to my protocol are later capable of taking high CD doses without any aftereffect.

- We use CDS because it's more tolerable and has fewer aftereffects. We use 1 ml. of CDS for 500 ml. of water spread out over the first day. On the second day, we use 2 ml. of CDS in 1 liter of water. If there aren't any adverse effects (and normally there aren't any), we can increase the dose every day from now on, 1 more ml. per liter until we reach 10 ml. of CDS per liter of water.

It's important to know that we are increasing the dose progressively, without forcing the body at any time. If there is a lot of fatigue, we don't increase the dose until it disappears. Since every body is different, we have to adapt it to each person's needs. Once we reach 10 ml. per day, we keep it until the next Full Moon, when the de-parasitization protocol starts. In order for it to be successful, we need to follow it as accurately as possible. During de-parasitization, we continue with the same CDS dose until the complete disappearance of the symptoms for as long as it is necessary. CDS doesn't accumulate in the body because it's an oxidant.

These are the most important protocols, more protocols are described in the Book