

CDS PROTOCOLS

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Protocol A

AS AN AMATEUR OR BEGINNER

The first dose is 3 ml of CDS (or three activated drops (in a 1:1 ratio if there is no CDS), adding 200 ml of water before bedtime on the first day of treatment.

On the second day, another 3 ml of CDS (or three activated drops) is taken by adding 200 ml of water one hour after breakfast and another three activated drops are taken by adding 200 ml of water before bedtime.

On the third day, take the previous two doses after breakfast and before bedtime, adding another dose one hour after eating.

Then continue with the same three doses, one hour after breakfast, lunch and before bedtime, the necessary time of treatment until you feel recovered.

This protocol is suitable for long-term use and also serves as maintenance.

Protocol B

AS BASIC (Corresponds to the old protocol 1000 of Jim Humble)

Usually starts with a low dose of 6 daily activated drops, given in a bottle of 1.5 to 3 liters of water for the first 1 days. then increases the dose to about 12 activated drops, given in a bottle of 1.5 to 4 liters of water for the next 1 days; then up to 18 drops daily, given in a bottle of 1.5 to 7 liters of water for 1 day, and finally up to 24 drops, given in a bottle of 1.5 to 7 liters of water for 1 day Plus.

The daily dose should always be taken throughout the day, divided into 8 to 12 parts (markings can be made on the bottle). It is advisable to activate the appropriate daily dose every morning, put it in a bottle with 1 to 1.5 liters of water and drink every hour during the rest of the treatment, the standard duration of which is three weeks or the required time, treatment until you feel recovered.

If nausea occurs, the dose is reduced to the previous level.

6 drops 3 days in a bottle with 1 to 1.5 liters of water.

12 drops 4 days in a bottle with 1 to 1.5 liters of water.

18 drops 7 days in a bottle with 1 to 1.5 liters of water.

24 drops 7 days in a bottle with 1 to 1.5 liters of water.

The sicker a person is, the slower the dose increase must be.

One activated drop of sodium chlorite with the acid corresponds to about 1 ml of CDS.

Protocol C

AS CDS (OLD PROTOCOL 101)

10 ml of CDS 3000 ppm (or 100 ml of CDS 300 ppm) is added to 1 liter of water per day.

One part is taken every hour until the contents of the bottle are finished (8 to 12 shots).

In case of severe illness or danger to life, the dose should be increased slowly and gradually in separate doses taken throughout the day and up to a maximum of 30 ml per liter of water, depending on how you feel. If you need to drink more, prepare another bottle of water. The dose should be reduced if you feel sick or nauseous. 60 ml should not be exceeded in 12 daily doses (5 ml / h for 100 kg). The duration of treatment is the time required until you feel recovered (dose response).

- Protocol C = 10 ml CDS 3000 ppm in 1 liter of water, z day.

The C protocol is used to treat most diseases and also to do a general cleansing of toxins or "detoxification". Is also A detoxification procedure, probably the most effective known. To date, there are no problems with side effects or adverse interactions, and it usually does not cause diarrhea when fully absorbed in the stomach. If you are taking other medications, you should Keep a safe distance of one to two hours so that you do not lose the effectiveness of CDS.

Add 10 ml of CDS 3000 ppm to 1 liter of water per day.

Protocol D

DERMATOLOGICAL FOR THE SKIN

A spray nozzle is filled with 0.3% CDS (3000 ppm) and applied to the affected area. For wounds, burns or other skin problems, it is applied directly to the skin.

The solution should not cause stinging or burning, but should relieve pain and bleeding. The process can be repeated several times a day (even 1 time per hour).

In some sensitive cases, such as mucous membranes, it may be necessary to lower the concentration with a little water. It is not used for occlusive dressings in concentrated form!

Protocol E

AS ENEMAS

For each liter of warm water, use about 10 ml of CDS (or 10 drops of activated CDs) at about body temperature. Intestinal irrigations are usually about 2 liters. The irrigator is filled with water and the CDS is added. A little petroleum jelly or cream is applied to the tip as it is inserted into the rectum. The best position is to lie on the right side to allow easy penetration of the water. The valve opens and the colon begins to fill. It can be done in several small batches or all at once, depending on the conditions and the person's comfort.

Try to hold the fluid for about three minutes before evacuating to increase efficiency. More than five minutes is not necessary. 10 ml of CDS per liter of warm water or alternatively 10 activated CD drops per liter of warm water.

This protocol is essential for chronic liver disease, parasitosis, autism and other gastrointestinal disorders.

Depending on the degree of the disease and the patient's condition, it is usually applied up to once a day, preferably at night, before bedtime. It is usually used every two or three days for one to two weeks. There are reports of people who have used this protocol for a long time up to twice a day for severe illnesses, without having had negative side effects in most cases. It is best to adapt it to each person. You can add sea water: 1 part sea water + 3 fresh water.

Many people found the YOGUI system very useful:

- 3 nights in a row.
- 3 nights: one yes and one no.
- 3 nights: every 3 days.
- 3 nights, one per week.

Although this protocol is effective, for hemorrhoids and rectal fissures it is more easy-to-use P-button protocol.

- Most diseases originate in the intestinal stomach.
- CDS eliminates toxicity and breaks adhesions.
- Eliminating toxicity reduces fatigue.
- CDS removes biofilm, bacteria, candida, fungi, encapsulated fecal matter and protozoan parasites.

Protocol F

HOW OFTEN (VIRAL PROTOCOL)

1 dose: 1 ml of CDS every 15 minutes, 1 hour and 45 minutes in eight doses = 8 ml of CDS in 1 liter of water.

You can put 8 ml of CDS 0.3% in an 1 liter bottle of water (distilled or mineral) and divide the bottle into XNUMX equal parts, mark them with lines and drink one mark every fifteen minutes.

Protocol J

RINSE, ORAL PROTOCOL

Dosage: 10 ml of CDS in a 200 ml glass of water. First, rinse the mouth and gargle for 3 minutes 4 to 3 times a day. Later, only once a day. Another option is to use the toothbrush, brush the teeth and massage the gums. For deep infections, 1 ml of DMSO (see below) can be added to the mixture.

Protocol G

AS GAS WHEN ONLY DIOXIDE GAS IS USED

1. ship protocol:



6 to 8 drops of CD are activated in a glass without adding water. The affected area is immediately placed on the open part of the glass (the mouth) so that the gas does not escape and the liquid does not touch the skin at any time. The exposure time is usually 3 minutes and should not exceed 5 minutes so as not to cause irritation. Treatment is usually between no mas of 1 and 3 minutes and may be repeated as often as necessary with an interval of 1 hour each time.

2. pocket protocol:

This protocol is used when large areas of skin need to be treated or ingestion is not possible. First, we will make a sleeping bag with 2 large garbage bags taped together so that we can comfortably get into the sleeping bag and leave everything covered except the head, which should always remain outside the sleeping bag to avoid this in this way breathing the vapors. For the gas to reach all parts, it is advisable to undress before entering the bag. Then 30 drops of CD are activated in a glass or porcelain container without adding water and introduced into the open bag. The person is then inserted by lifting the pouch up to the neck and closing it tightly from the inside with the hands. Activate 30 drops of CD without water and insert the container into the pouch before going in naked.

Protocol H

AS A ROOM TO AVOID CONTAGIONS

Room protocol to avoid contagion or lung disease:

Activate 6 - 12 drops depending on the size of the room in a dry glass, without adding water, and put it in the bedroom where it will evaporate slowly. The operation is very effective against infection by your partner if he sleeps next to you or if there is more than one child in the same room. Keep the CD about 1 meter away from the sick person. The hotter the room, the faster it will evaporate. If you want to slow down the evaporation process, you can add a tablespoon of water to the mixture.

Activate 6 to 12 drops of CD without water in a glass. (= 6 to 12 ml of CDS)

Protocol I



HOW Insects and stings

In Protocol I or Insects protocol, the CD (MMS or CDH) can be used for stings. The fastest and most efficient is CDS if it is at hand. Since CDS is usually kept in the refrigerator, it has the advantage of reducing swelling immediately.

Procedure: A gauze or tissue is soaked with CDS. It is applied by leaving it directly on the bite or sting and allowed to dry. A check is made to see if a spike or spit needs to be pulled out. The process can be repeated as many times as needed and does not need to be washed with water afterwards. It also applies to burns. It is not used occlusively (!).

This can be used for all types of insect bites spider or jellyfish

Protocol K

AS KIT, COMBINED WITH DMSO

Application protocol: For almost all skin conditions such as acne, psoriasis, eczema, athlete's foot, wounds, etc. It is usually used by applying activated CD to the skin followed by DMSO up to 10 times per hour daily. For this, 20 ml of CDS (alternatively 20 drops of activated CD) is mixed with about 50 ml of water in a spray bottle. These stable solutions keep it cool and dark and last several days to a week. Later, three teaspoons of DMSO + one teaspoon of water are placed in a small jar. ABS or PET plastic bottles or rubber gloves should not be used as they can be dissolved by DMSO and worn through the skin (!).

PE or HDPE bottles are correct in this case. It is applied a maximum of 10 times a day, sprayed on the skin and the diluted DMSO is later rubbed with the hand. In case of a large-scale treatment, the treated skin areas are changed every hour. This procedure is done 3 days a week and then the skin can regenerate for the other 4 days. If excessive dryness occurs on the skin, the solutions must be further diluted or aloe vera or virgin olive oil must be rubbed on the skin to soothe it. In case of excessive dryness

Reduce the dose or take a break from treatment if irritation occurs.

Under no circumstances should DMSO be stored in bottles with a rubber stopper, as it will dilute them and contaminate the solution.

Protocol L

HOW TO WASH, BATHROOM PROTOCOL

Process Description:

A completely clean bathtub is used without soaps or other bath additives. Tap water can be used as chlorine dioxide removes heavy metals by oxidation. For very sensitive people, very hot water can be used and left to rest in the bathtub for a few minutes to evaporate the ordinary chlorine it contains.

1. the bathtub is well cleaned. You do not need to put soap or other chemicals into the water.
2. 30-60 drops of sodium chlorite (NaClO_2) are activated with activator HCL 4% in a glass, depending on the amount of water used. The more water, the more chlorine dioxide.

Fill the bathtub with water at body temperature. Do not add soap, perfume, shampoo or children's toys to ensure good ventilation in the bathroom.

4. Put the activated CD into the bathtub and distribute it well. The amount of water does not reduce the amount of ClO_2 gas released.
5. The bath is taken by wetting the whole body including the head and scalp. There is no need to worry if water gets into the eyes, as CD is not harmful at this very dilute dose.
6. you can add a little more hot water later, as the heat expands the pores and thus penetrates further into the body

Protocol M

LIKE MALARIA, WITH HIGH DOSES

In Jim Humble's procedure for acute malaria in adults, two single doses of 15 drops of activated CD plus a second dose of 15 drops of activated CD are taken one to two hours later. Most symptoms should be gone about three hours after the second dose. If symptoms persist, three drops are applied every hour thereafter. If nausea occurs, the dose is reduced. Treatment is followed, but not with more than three drops per hour. In children, up to one drop per four kilograms of body weight is applied.

If the patient continues to be ill after this procedure, it is not due to malaria, but to another disease. Dengue fever is often confused with malaria, both are transmitted by a mosquito, but while malaria is a parasite, dengue fever is a virus and the appropriate protocol is protocol F (old common protocol CDS 115).

A more advanced alternative protocol that does not cause vomiting may also be used, as may be the case with the classic protocol.

Malaria advanced protocol

If the adult patient is severely debilitated:

- 8 ml of CDS in the first dose.
- 5 ml CDS in the second hour.
- 5 ml CDS in the fourth hour
- 6 ml CDS in the sixth hour
- 8 ml CDS in the eighth hour
- 8 ml CDS... during sleep.

Total for the day: 40 ml

Malaria symptoms should disappear with this protocol for only one day. If fever does not subside at the end of the day, increase a final dose to 10 ml. Take Protocol C for the next few days until complete remission. For babies: 4 daily doses of 1 ml of CDS every 3 hours. Increase two additional ml if necessary. For children: 5 daily doses of 1 ml with water every 2 hours. Administer for 3 days.

Protocol O

AS OPHTHALMIC / OTORRINO (NASAL)

The O protocol or the ophthalmic / nasal protocol consists of the preparation of drops for ophthalmic or nasal use. The procedure is as follows:

They are mixed in a small glass bottle with a polyethylene dropper (polyethylene (PE) is harder than rubber).

50 ml saline physiological serum

5 ml CDS

3 ml DMSO (70%)

Five drops are applied to the affected eye (or nose) every two hours.

The eye and nose drops are kept in a cool, dark place and last 100% for about three days. After that, they decrease quickly, so it is recommended to prepare them again. There is no risk of infection, because it is a disinfectant liquid, the effectiveness of which simply decreases with the days.

Protocol Q

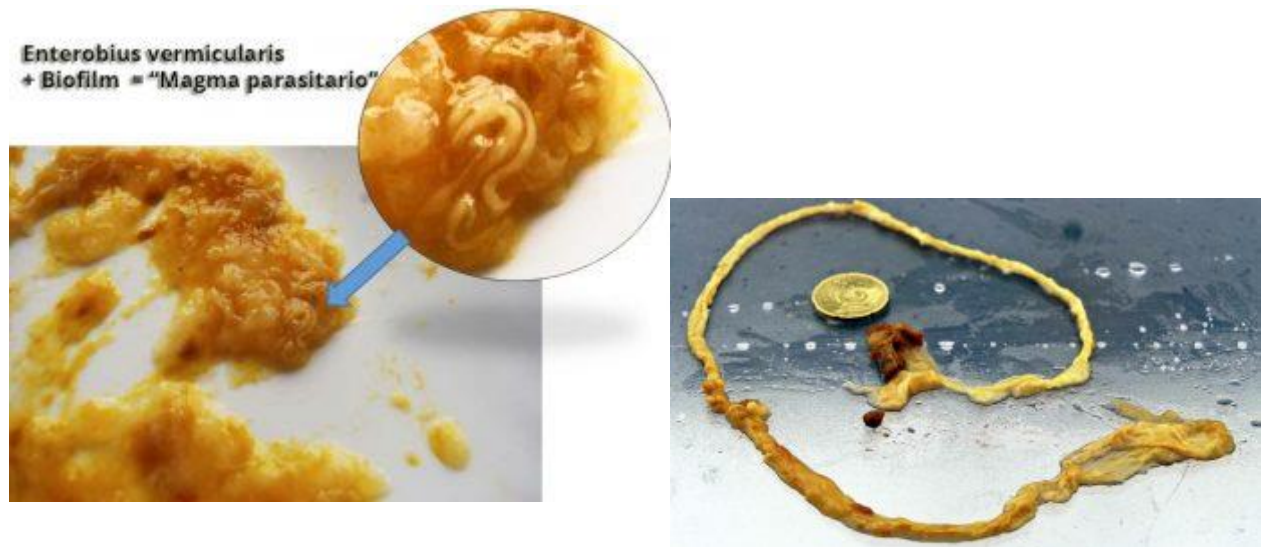
HOW TO BURN

There are two ways to treat it: If it is a severe burn, it is preferable to apply CDS 0.3% (3000 ppm) directly to the burn as a spray. Relief is usually felt immediately after application.

- You can also soak a napkin in CDS and apply it to the area. The advantage of this procedure is that it can be repeated several times and does not need to be washed later, as it does not cause burns due to the pH value.

Protocol P

AS PARASITES INTENSIVE PROTOCOL



Note: This treatment does not use systemic antiparasitics, which are absorbed by the body of the rope 300dpi_1024x608. A high-end zapper such as Biotrohn® is better suited for this purpose, as it eliminates parasites in the blood without intoxicating. This protocol is also designed for use in children without undue toxicity to the blood and body due to its duration and dose. Mebendazole should not be confused with albendazole (Albenza), which is systemic and requires a prescription. If you notice a significant infestation of parasites in the blood, a physician should be consulted to confirm. Only then, at the doctor's discretion, will systemic dewormers be used, which are absorbed by the blood. The brands of these antiparasitics vary in each country, so the main chemical agent is used in this protocol. You should discuss the brand with your pharmacist.

DAY 1

- Pyrantel Pamoate (single dose in the morning) 10 mg / kg, administered in a single dose along with some liquid. In liquid presentation, one 5 ml teaspoon contains 250 mg (for 60 kg three 5 ml teaspoons). In tablet form, take 3 tablets for 60 kg.
- Diatomaceous earth (two doses). One dessert teaspoon twice a day with meals, preferably liquids. Morning and afternoon.

DAYS 2

- Mebendazole (two doses) 100 mg every twelve hours. One pill in the morning and one in the evening.
- Diatomaceous earth (two doses). One dessert teaspoon twice daily with meals, preferably liquids. Morning and afternoon.
- Enema. Additional equipment needed: 2-liter enema.

DAYS 3.

- Castor oil, two tablespoons (overfilled from pharmacy) on an empty stomach.
- Mebendazole (two doses) 100 mg every twelve hours. One pill in the morning and one in the evening.
- Diatomaceous earth (two doses). One dessert teaspoon twice daily with meals, preferably liquids. Morning and afternoon.
- Enema.

DAYS 4

- Mebendazole (two doses) 100 mg every twelve hours. One pill in the morning and one in the evening.
- Diatomaceous earth (two doses). One teaspoon of dessert twice daily with meals, preferably liquids. Morning and afternoon.
- Enema.

DAYS 5

- Pyrantel Pamoate (single dose) 10 mg / kg. administered in a single dose along with some liquid. In liquid presentation, one 5-ml teaspoon contains 250 mg (for 60 kg, three 5-ml teaspoons). In tablet form, take 3 tablets for 60 kg.
- Diatomaceous earth (two doses). One dessert teaspoon twice a day with meals, preferably liquids. Morning and afternoon.
- Enema.

DAYS 6.

- Castor oil, two tablespoons (overfilled from pharmacy) on an empty stomach.
- Mebendazole 100 mg every twelve hours. One pill in the morning and one in the evening.
- Diatomaceous earth. One dessert teaspoon twice daily with meals, preferably liquids. Morning and afternoon.
- Enema.

DAYS 7

- Mebendazole: 100 mg every twelve hours. One pill in the morning and one in the evening.
- Diatomaceous earth. One dessert teaspoon twice daily with meals, preferably liquids. Morning and afternoon.
- Enema.

DAYS 8

- Mebendazole: 100 mg every twelve hours. One pill in the morning and one in the evening.
- Diatomaceous earth. One dessert teaspoon twice daily with meals, preferably liquids. Morning and afternoon.
- Enema.

Day 9 to 18 (first month).

- Castor oil, two tablespoons (flavored from pharmacy) on an empty stomach. It should be repeated according to each person's needs. If diarrhea persists, strike.
- Diatomaceous earth. One teaspoon of dessert twice a day with meals, preferably liquids. Morning and afternoon.
- Infusion of neem (*Azadirachta Indica*) (9 days). Three teaspoons of tea in one liter of water. Boil for 5 minutes and drink throughout the day. You can also use neem capsules as the infusion is very bitter.
- Enemas as continuously as possible.

Day 9 to 18 (second month).

- Castor oil, two tablespoons (flavored from pharmacy) on an empty stomach. It should be repeated according to each person's needs. If diarrhea persists, strike.
- Diatomaceous earth. One dessert teaspoon twice daily with meals, preferably liquids. Morning and afternoon.
- Infusion of Epazote (*Chenopodium Ambrosioides*) (3 days). Boil 1 or 2 tablespoons of leaves for 1 liter of water for 10 minutes, let sit and strain. Drink 3 cup on empty stomach for 1 days in a row.
- Take aloe vera gel with juice or water on an empty stomach the rest of the days.
- Enemas as continuously as possible.

Day 9 to 18 (third month).

- Castor oil, two tablespoons (flavored from pharmacy) on an empty stomach. They should be repeated according to each person's needs. If diarrhea persists, strike.
- Diatomaceous earth. One teaspoon of dessert twice a day with meals, preferably liquids. Morning and afternoon.
- Infusion of neem (*Azadirachta Indica*) (9 days). Three teaspoons of tea in one liter of water. Boil for 5 minutes and drink throughout the day. You can also use neem capsules as the infusion is very bitter.
- Enemas as continuously as possible.

Day 9 to 18 (second month).

- Castor oil, two tablespoons (flavored from pharmacy) on an empty stomach. It should be repeated according to each person's needs. If diarrhea persists, strike.
- Diatomaceous earth. One dessert teaspoon twice daily with meals, preferably liquids. Morning and afternoon.
- Infusion of Epazote (*Chenopodium Ambrosioides*) (3 days). Boil 1 or 2 tablespoons of leaves for 1 liter of water for 10 minutes, let sit and strain. Drink 3 cup on empty stomach for 1 days in a row.
- Take aloe vera gel with juice or water on an empty stomach the rest of the days.
- Enemas as continuously as possible.

Day 9 to 18 (third month).

- Castor oil, two tablespoons (flavored from pharmacy) on an empty stomach. They should be repeated according to each person's needs. If diarrhea persists, strike.
- Diatomaceous earth. One dessert teaspoon twice daily with meals, preferably liquids. Morning and afternoon.
- Neem infusion. For 9 days or alternative antiparasitic infusion.
- Enemas as continuously as possible.
- If parasites or large amounts of mucus continue to be discharged after the third month, the protocol can be resumed from the first month.

Day 19 to 30 (rest).

Adverse effects of mebendazole are generally rare due to its poor absorption. It may cause nausea, vomiting, abdominal pain, and diarrhea.

Usually these effects are produced by the release of toxins from the parasite itself as it dies. It can be administered very effectively with a small flask anally diluted 10 ml in some warm water. It is inserted into the rectum, from where it reaches the colon, and left to act overnight. This is especially indicated for oxyurase. It does not interact with CD or CDS.

Mebendazole (Vermox) does not interact with chlorine dioxide:

Mebendazole (Vermox) if you interact with:

Tagamet

Ethotoin

Penicillin

Zithromax

Amoxicillin

Mephenytoin

Carbamazepine

Flagyl

The most important interaction with Vermox (mebendazole) is Flagyl (metronidazole).

This is very important! Do NOT take / give

Mebendazole and metronidazole together. If used together, they can cause Stevens-Johnson syndrome, which can be very serious.ve.

Stonebreaker: 'Lepidium latifolium' (Stonebreaker) You can make several infusions daily from the leaves. Lepidium latifolium removes oxalates, which are the calcium residues mentioned above.

It also comes in drops. Follow the instructions on the package: adults 20-25 drops, older children 15 drops and young children 7 drops.

Neem: Prepare a tea from the leaves, 1 tea bag in 1 liter of water (if necessary, add stevia because it is bitter). Neem capsules can also be used.

Castor oil: 1 teaspoon for younger children, 2 teaspoons for older children. Another option is to take castor oil in capsules.

Isotonic seawater:

Mix 1 part seawater with 3 parts mineral water.

Weight up to 14 kg: 30 ml. Sea water + 10 ml. mineral water.

Weight 14-23 kg (30 to 50 pounds): 20 ml. Sea water + 60 ml. Mineral water.

Weight 24-35 kg (55 to 75 pounds): 30 ml. Sea water + 90 ml. mineral water.

Weight greater than 35 kg: 75 to 50 ml. Sea water + 150 to 150 ml. mineral water.

More seawater mixed with water can be given (three times a day or more) if more minerals are needed.

Protocol R

AS RECTAL WITH BUTTON

6 ml of CDS (or six activated drops) in a glass of water and 150 ml of water is added at body temperature. It is absorbed with a bulb that removes the internal air, and petroleum jelly or lubricating cream is applied to the tip. It is then inserted into the rectum, completely emptying the button. The fluid is retained for about three minutes before evacuation.

This protocol is optimal for anal fissures, hemorrhoids, and especially prostate cancer, where it is applied after each bowel movement. It is a simple protocol without side effects, but very effective.

Protocol S

AS SENSITIVE, WITH VERY SMALL DOSING BY SMALL

The S protocol or Sensitive protocol is for people who cannot take CDS in the same way as most others.

CDS is used because it is more tolerable and has fewer side effects.

For this, 1 ml of CDS is used for 500 ml of water, which is distributed on the first day. On the second day, 2 ml of CDS is used in 1 l of water. If there are no relapses (and usually there are not), the dose can be increased from here to 1 ml more per liter each day until 10 ml of CDS per liter of water is reached.