

• The Kalcker Parasite Protocol •

Healing

the symptoms known as

Autism

Second
Edition



PDF
E-Book

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(Many thanks to Kerri Rivera for allowing this chapter of her book to be freely shared with those who need this important information.)

Chapter 8

Step 3

The Kalcker Parasite Protocol

All of our fathers had a treatment for parasites as a part of their cultural practice. We have gotten away from this because of our reliance on modern practice. We would do quite well to relearn the ways of our ancestors in this area and keep ourselves in relatively good health always.

~ Chief Two Trees

The word “parasite” comes from the Greek word meaning, “one who eats off the table of another.” Parasites, to Ancient Greeks, were those who sat at another’s table, and paid for their meal with flattery.

As I mentioned earlier in the book, a very interesting thing started happening with the CD enemas. What we had previously believed to be mucous or biofilm coming out with the enemas, turned out in many cases to be worms (helminths) (aka parasites)—in rare cases they were still alive and wiggling in the toilet! We believed the most common were *Ascaris lumbricoides* (roundworm). However, what we are now seeing more and more appear to be rope parasites, a potential new species of helminth discovered by Dr. Gubarev, Dr. Alex Volinsky, and coworkers (submitted January 14, 2013). DNA testing is the only way to definitively say, but at \$25,000 USD for each analysis, with a minimum of 100 test cases, it is rather cost prohibitive at the moment.¹

In addition to *Ascaris* and rope parasites, parents have also seen hookworms, pinworms, tapeworms, and flukes, among others. This is an extremely important piece of the puzzle for so many of our children. We have been led to believe that in first world nations, parasites are not a problem. This is absolutely not the case.



A well washed parasite. You can almost feel the texture.



***Andreas Kalcker,
co-author of the
Kalcker Parasite Protocol***

***Miriam Carrasco Maceda,
co-author of the
Kalcker Parasite Protocol***



I was honored to have Dr. Andreas Kalcker and Miriam Carrasco Maceda share a chapter from their upcoming book, *Parasites: The Silent Enemy*. Andreas explains the importance of lifelong deworming, and shares with us a protocol that has helped many children and adults become healthier; and for some children on the spectrum was the last piece added that led them to recovery. The version included here has been tailored specifically for children and adults with ASDs. The original protocol can be found at:

**[www.andreaskalcker.com/
index.php/en/health/parasite](http://www.andreaskalcker.com/index.php/en/health/parasite)**

Very few details have been changed, but it is important to note that the Parasite Protocol here is what has been proven to help many of our children on the spectrum, including many of the recovered children.

Thank you Andreas and Miriam for your valuable contributions to this movement, selflessly sharing your findings, and for always taking the time to help.

HOW TO DETECT AND TREAT A PARASITIC INFECTION

Parasitic infections are more common than most people think, and may or may not result in serious health problems. We may be infected with multiple types of parasites, which vary in size and location, on or in the body.

Parasites can be classified as either microparasites, such as malaria that are only visible under the microscope, or large macroparasites such as round or flat intestinal worms (roundworms, tapeworms, etc.). These can be seen by the naked eye, and can reach great sizes. Internal parasites are found, not only in the intestines, as is generally thought, but anywhere in the body, including the lung, liver, muscle, stomach, gallbladder, brain, blood, skin, joints, and even in the eyes.

In recent history, the great migratory movements of the human population via rapid transportation and widespread trading have shortened the distances that previously had separated people and diseases. Formerly localized diseases have thus become universal ailments. Parasites previously confined to very specific geographical areas now appear in other locations, far away from their initial homelands. Unfortunately, conditions typical of the lower socioeconomic strata, (under which a large percentage of the global population lives) tend to favor the transmission of diseases and parasites.

A high percentage of the world population suffers from infections by parasites, which the WHO (World Health Organization) estimates are responsible for 15 million child deaths annually. In addition to the great cost represented by deaths, chronic and persistent infections have increased as parasites have developed multiple mechanisms of evasion and resistance to specific immunity. This allows them to circumvent and cancel the host immune response.

Persistent parasitic infection in human hosts leads to chronic immune reactions, which can result in tissue damage and altered immune regulation. Ninety percent of the world population is infected with one or more parasites, and up to five different types may coexist in the same host.

This situation becomes dangerous when the internal balance within the host is upset, the number of parasites skyrockets, and the host begins showing signs of serious illness that may even result in death. However, in some cases, parasitic worm infections do not result in disease, in fact, a number of carriers are found to be healthy.



A really good look into a parasite. You can see the actual intestines of the parasite. Also known as a helminth.



The same parasite (as above) from a different angle.

Considering that most people are not even aware of their infections, parasites have become silent killers, claiming the lives of many unsuspecting victims going about their lives oblivious to the danger. Some doctors in Western Europe and the U.S. seem unwilling to even contemplate that we may be infected.

Taking into account the recent increase in travel, immigration, and trade across continents, it is not hard to see how the problem has now become magnified to an alarming level. Parasites, especially the modern “toxified” versions, may well be causing many of the rare diseases now becoming more prevalent, as well as other recently identified or growing problems such as chronic fatigue, fibromyalgia, and arthritis.

The most common verminosis (infestation with or without obvious symptomatology of disease caused by parasitic worms) is intestinal. People who have them not only suffer from a large quantity of lost nutrients (absorbed by the parasites), but also from perforations made by worms in the digestive tract that can open the door to various infections and possible autoimmune deficiencies. Intestinal worm infections are very common and can affect everyone, not only people with poor hygiene habits. Helminths (worms) are transmitted by ingesting the eggs or larvae of parasites, which then hatch in the intestinal tract.

A parasitic infection or reinfection can be acquired through one or more of the following avenues:

- ▶ From more or less direct contact with an infected person (fecal or sexual).
- ▶ From self-infection, for example, through anal-hand-mouth contact. By scratching the anal area, eggs can become lodged under the fingernails.
- ▶ From congenital transmission (mother to fetus).
- ▶ From commonly contaminated objects.
- ▶ From soil contaminated by human or animal excrement.
- ▶ From eating contaminated raw or undercooked meat.
- ▶ From eating raw fish.

In some countries, raw fish is included in traditional foods. We can avoid the consumption of the larvae or worms by freezing the meat or fish for at least twelve hours, depending on temperature.



A great photo of a dead parasite, believed to be the *Ascaris lumbricoides*, or possibly a rope worm in the “seaweed” stage.



A very good look at how long some helminths are. The more worms the people pass, the healthier they get, and the improvements come faster and faster. This child passed a lot of parasites in the beginning. Then after a few months was no longer passing them and now has an ATEC score of 5. Meaning, he no longer has the diagnosis of autism.



This is the parasite that measured 32 inches.



Another long, well washed parasite for the collection. The road to recovery is paved with many dead parasites. Adios Autism...



This is a 32-inch parasite that a young boy passed. He went on to have a great day after getting this out.



These are rope parasites as confirmed by Dr. Alex Volinsky.



60cm long worm (Oct 1, 2013) from child; 6 months on CD; 2 drops every 1-2hr; no parasite protocol; 1tblsp DE; 2-3 vials of Quinton.



This 33 inch parasite (aka “Chester”) was discovered by a woman using the protocol on herself.



The bubble visible in this photo leads us to believe this is a late stage rope worm.



After passing this parasite, the child went on to have a fabulous day at school. It is so great to feel good and healthy.

The FDA recommends freezing and storing [fish] at -4°F (-20°C) or below for seven days (total time), or freezing at -31°F (-35°C) or below until solid and storing at -31°F (-35°C) or below for 15 hours, or freezing at -31°F (-35°C) or below until solid and storing at -4°F (-20°C) or below for 24 hours is sufficient to kill parasites. FDA's Food Code recommends these freezing conditions to retailers who provide fish intended for raw consumption. Note: These conditions may not be suitable for freezing particularly large fish (e.g. thicker than six inches).²

- ▶ From drinking contaminated water.
- ▶ From consuming contaminated vegetables or fruits. Often we eat poorly washed (parasite infested) vegetables or fruits. There is a common misconception that vegetables from organic farming are free from any problems, pesticides, or chemicals. The danger is that the eggs or larvae of the worms reach the farm soil through animal waste, decomposed forms of natural compost, and manure (fertilizer) added to the field. There are eggs, such as *Ascaris lumbricoides*, which can survive in soil under extreme temperatures for five years. It is very important to perform a thorough cleaning of fruits and vegetables, and never eat anything raw and straight from the ground, however healthy it may seem.
- ▶ From parasite infested animals. Parasitic infections are very easy to spread by contact with pets. Veterinarians are quick to insist upon the quarterly deworming of our animals, but there are steps we must take on our own to avoid contamination.



Parasites come in all shapes and sizes. Of course, they can also come out in pieces.

Suggested: Deworm your pet at least every three months for life, as directed by your veterinarian. During the first month, it should be done every week. Prevent pets from eating raw viscera. If animals eat raw meat or raw bones the best option is to freeze the food in advance for at least 12 hours (See citation above). If the deworming treatment is working, the animal will expel the worms in the feces or vomit, which must then be burned or buried, during the eight-day treatment.

Avoid being licked in the mouth by animals as they are in direct contact with feces, soil, and their own anus. When petting an animal, wash your hands with soap and water before eating or handling food, as the eggs of the parasites remain in the animal's hair.

- ▶ Do not walk barefoot or with open toe shoes in soil or sand.
- ▶ Avoid Hippotherapy (horseback riding)

Symptoms of Parasitic Infections

The different types of worms and toxic waste produced by parasites in our body may cause the following common problems:



Parasites come in all sizes. Some are very long. These get washed with hot water for photos. This way we get the best look at them.

Blood Disorders & Blood Parasite Diseases

Parasites absorb essential nutrients from the body, such as iron, vitamin B₁₂, and sugars, which may result in certain blood disorders. In addition, some diseases are known to be caused by blood parasites:

Blood disorders:

- Anemia
- Dizziness
- Hypoglycemia
- Weakness

Blood parasite diseases:

- African Sleeping Sickness
- Babesiosis
- Chagas Disease
- Malaria

Fatigue:

The toxic waste produced by the parasites themselves (including ammonia and psychoactive substances), can stress the detox organs and cause disorders of the central nervous system such as:

- Chronic fatigue syndrome (CFS)
- Cold in the extremities
- Dizziness
- Extreme weakness
- Internal cold
- Lethargy
- Low energy
- Night waking
- Restless sleep

Gastrointestinal Symptoms

- Abdominal pain or tenderness
- Blood in stool
- Burning in the stomach
- Chronic constipation
- Chronic diarrhea or diarrhea caused by poor absorption of food
- Colitis
- Cramping
- Cravings for greasy foods and sugary foods, lots of carbs and bread, fruit, fruit juices, alcohol, or vinegar
- Digestive problems
- Distended belly
- Eating more than normal but still feeling hungry
- Excessive bowel movements
- Fever
- Frequent vomiting and nausea
- Gas and bloating (noted after eating)
- Hemorrhoids
- Irritable bowel syndrome (IBS)
- Intestinal irritation
- Intestinal obstruction
- Leaky gut
- Malabsorption syndrome
- Mucous in stool
- Pancreatitis
- Passing a worm in stool

Growth Problems, Weight, & Appetite

Parasites usually live without being detected by the host. They rob the body of many of the essential nutrients in the food consumed. Many overweight people, who are infected with parasites, go hungry for lack of essential nutrients, causing them to eat in excess due to their parasitic infection. Furthermore, depending on the type of infestation, many people are malnourished and cannot gain weight. The following is a list of some possible symptoms:

In children:

- Poor growth
- Poor physical and intellectual development consistent with their biological age

In children and adults:

- Chronic burping
- Craving white flour products; cookies, cakes, pastries, etc.
- Feeling hungry after a meal
- Inability to gain or lose weight
- Long-term obesity
- Loss of appetite
- Obsession and/or compulsion to eat sweets or very specific foods (wheat, sugar, dairy)
- Ravenous appetite
- Uncontrollable hunger to eat more than usual
- Weight gain (specifically around the time of the full moon)
- Weight loss

Mood Problems & Anxiety

Toxins that are released by parasites can irritate the central nervous system. Anxiety and nervousness are often caused by parasites that migrate throughout the body. Some of the problems caused are:

- Anger and irritability
- Anxiety
- Confused thinking (brain fog)
- Depression
- Disorientation
- Forgetfulness
- Lack of coordination
- Mood swings

- Nervousness
- Obsession
- Restlessness
- Slow reflexes

Muscle & Joint Pain

Parasites can travel almost anywhere in the body. When they migrate to the joints and the muscles they can cause cysts and inflammation. These can often be mistaken for arthritis and/or muscle pain.

Toxins from parasites can also accumulate in the joints and muscle tissue causing:

- Chest pains
- Fibromyalgia
- Joint pain
- Muscle cramps
- Muscle spasms
- Numbness of the hands or feet
- Pain in the back, thighs, or shoulders
- Pain in the navel
- Rapid heartbeat
- Restless leg syndrome
- Seizures

Parasites in Children (including children with ASDs)

Parasites can be found in the body in asymptomatic and symptomatic stages. The former are usually found in adults. Symptomatic stages occur mainly in children, in whom we can often observe the following:

- Anorexia
- Anxiety
- Bruxism (teeth grinding)
- Cramping
- Diarrhea that alternates with periods of constipation
- Excessive Flapping
- Growth retardation
- Headaches
- Inability to gain weight
- Itching/Burning/Picking of the anus
- Nasal itching and/or anal urticaria (hives/rash)
- Nervousness and irritability

- Nose Picking
- OCD (Obsessive Compulsive Disorder)
- Rage
- Smearing feces
- Unexplained laughter or weeping
- Verbal stims
- Weight loss

Tapeworms, and some other parasites, have an affinity for B₁₂ and iron. Therefore, lab results that show deficiencies in B₁₂ and/or iron can be indicators of parasitic infections.^{3,4} Due to its size, the tapeworm consumes enormous amounts of food that it obtains by taking the child's food. This can affect the child's normal development.

Treatment is simple, but it requires that the head of the tapeworm be removed, otherwise it will continue to grow. Tapeworm treatment is separate from this protocol and usually requires niclosamide. However, the only way to be sure the head has been removed is to identify it in the stool.

Respiratory Disease

The passage of larvae through the respiratory system or larval invasion in the lungs may cause symptoms such as:

- Acute bronchitis
- Asthma
- Drowsiness
- Dyspnea (shortness of breath; air hunger)
- Chronic/irritative cough
- Pneumonia
- Shortness of breath or respiratory failure

Sexual & Reproductive Disorders

Immune dysfunction as a result of a parasitic infection can lead to:

- Candida - yeast infections
- Cysts and fibroids
- Erectile dysfunction
- Fluid retention
- Male impotence
- Menstrual problems
- Premenstrual syndrome
- Prostate problems
- Urinary Tract Infections

Skin Disorders & Allergies

External parasites (lice, bedbugs, scabies, etc.) that penetrate the skin can cause itching, redness, and/or rashes etc. However, internal parasites can be responsible for skin disorders as well. Parasites create toxic metabolic waste, and because the skin is the largest organ, the body tries to eliminate them through it, resulting in many skin problems.

Some symptoms may include:

- Allergies (to foods, dust, mold, etc.)
- Anal itching
- Brittle hair
- Crawling sensation under the skin
- Dermatitis
- Dry hair
- Dry skin
- Eczema
- Eruptions
- Hair loss
- Itchy nose
- Itchy skin
- Jaundice
- Psoriasis
- Skin ulcers
- Sores
- Swelling
- Urticaria (hives; skin rash)

Sleep Disorders

The body reacts to parasites during rest periods because at night is when parasites are most active. Nocturnal awakenings are common, especially between 2 and 3am, when the liver tries to rid the body of toxins produced by parasites. This in turn may produce:

- Insomnia
- Teeth grinding
- Bedwetting
- Drooling while sleeping
- Sleep disturbances - multiple awakenings during the night
- Restless sleep

Other Problems Associated with Parasites

- Bad breath
- Blurred vision
- Body odor
- Breathing problems
- Chronic infections: viral or bacterial
- Circulatory problems, numbness in the extremities, difficulty in moving
- Cough or coughing up blood
- Difficulty swallowing
- Excessive salivation
- Fever
- Fluid build-up or retention during the time of the full moon.
- Low immune response
- Peritonitis
- Sensation of a foreign body or discomfort in the throat
- Swollen eyes
- Weight gain during the full moon.

Blood Analysis

The following markers may be present when a person is suffering from a parasitic infection or the resulting allergies:

- Anemia/low iron
- Elevated immunoglobulin (IgE)
- Elevated eosinophils (The eosinophil is a specialized cell of the immune system, more specifically it is a proinflammatory white blood cell. According to the Registry for Eosinophilic Gastrointestinal Disorders (REGID), their known functions include movement to inflamed areas, trapping substances, killing cells, antiparasitic, and bactericidal activity, participating in allergic reactions, and modulating inflammatory responses.)
- High ammonia
- High oxalates
- Low vitamin B₁₂

Measures in the Home Environment to Prevent Reinfection

It is important to treat all people and pets that live in the same environment to prevent someone from infecting others. Reinfection occurs via underwear, bedding, towels and household items such as children's toys or animals that have been in contact with eggs. It is important to wash all clothing that has contact with intimate body areas at a temperature not below 60°C (140°F).

All bed linen and underwear must be washed daily (or to the extent possible) while performing anti-parasitic therapy. Affected individuals should not share their swimwear with other members of the family, and should use a separate cloth to wash his anal area. It is best to sleep wearing both underwear and pants to avoid involuntary scratching during the night. This will prevent infection through anal-hand-mouth contact because by scratching the anal area, eggs can become lodged under the fingernails. Keep pets away from the place of rest of their owners, such as beds, sofas, blankets, and cushions.

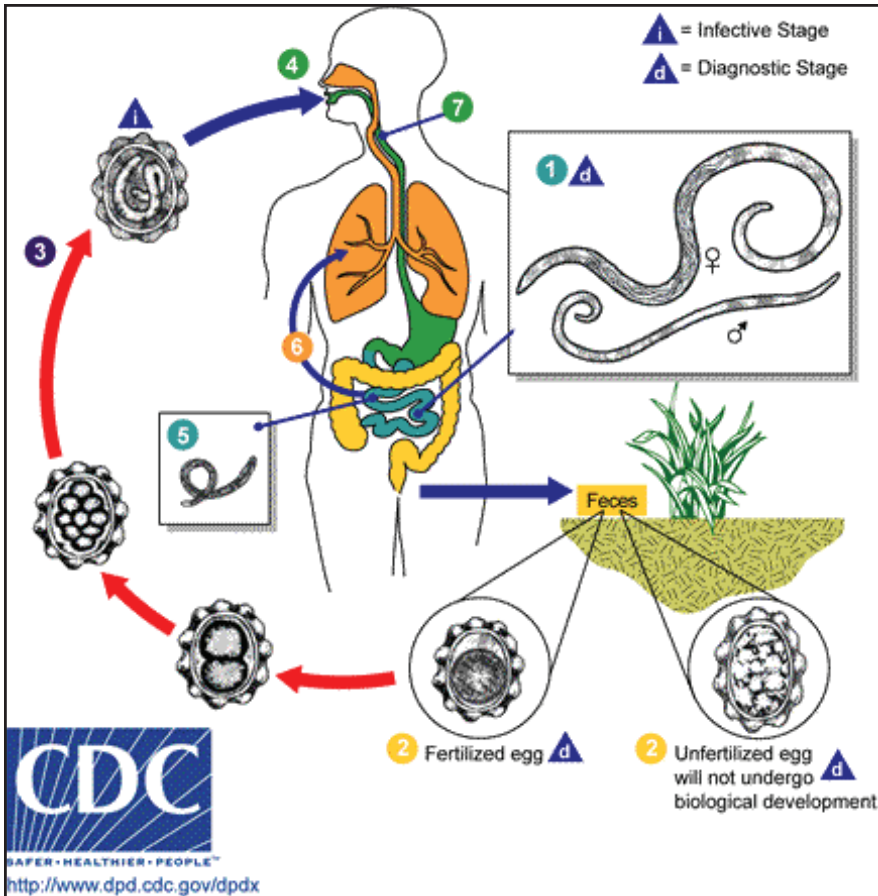
Thoroughly wash fruits and vegetables in water and soak them in CD or CDS solution for a few minutes. Clean the sink with alcohol, as the eggs of many parasites are immune to the pH of normal cleaning products such as soap or bleach. It is important to note that parasites do not leave any kind of immunity behind in the host, therefore, once cured, the person who has suffered can suffer from them again. The only surefire method of killing the eggs of *Ascaris lumbricoides* is in water above 60°C (140°F) or with 96% grain alcohol (Everclear).

Evolutionary Cycles of Intestinal Parasites

Although there are many more, here is a description of the three most common types of intestinal parasites that can be found in developed countries:

***Ascaris Lumbricoides* (Roundworm)**

Ascaris reproduce quickly, as a single female can lay up to 200,000 eggs each day. This parasite is very common, especially in damp conditions, and when hygiene measures are inadequate. It can affect the entire population, but mostly affects children, seriously disrupting their development and growth. It's so infectious that the WHO estimates that there are about 700,000,000 people infected worldwide, of which around 60,000 cases end in death per year, mainly children.⁵



Parasite eggs reach the duodenum through the mouth of the host. Gastric juices rid the eggs of their shells and release the larvae. These larvae, which are highly mobile, penetrate the duodenal mucosa and migrate to the liver. From there, they continue their migration to the heart, reaching the lungs through pulmonary circulation, and finally become trapped in the pulmonary capillaries. Here, the larvae break the thin walls of the capillaries and penetrate the alveoli, bronchioles, and bronchi at which point they are able to travel up through the pharynx. Once the eggs pass the epiglottis (see diagram above), the larvae are swallowed such that they return to the duodenum, where they complete their maturation process. This process takes approximately two to three months to complete; therefore we calculate that to find ourselves completely parasite free, the initial treatment should be done for at least 12-18 months, possibly longer. From there on out, you may only need to follow a routine deworming two to four times a year.

Keep in mind that eggs are expelled through the feces (human or animal) into the environment where they can survive even in harsh conditions, favoring the persistence of the parasite. They are resistant to low temperatures, desiccation, strong acids, soaps, chlorine, formaldehyde (pH between 2 and 11.5), and can live in planted soils for five or more years, creating a “parasite hotbed” that makes them almost indestructible. Once dry, they are transported through the air, fly in air currents like dust that can be inhaled and/or swallowed. We have recovered eggs from nasal mucus, paper currency, potting soil, dust, and in indoor airborne particles, etc.

***Taenia Saginata* and *Taenia Solium* (Tapeworm)**

Taenias reach humans when humans eat their eggs, by the consumption of tissue from infected cattle or pigs. In infected animals, the larvae are encysted in the muscle tissue. If the infected animal is consumed, development may proceed in the human digestive system. Humans are hosts for *T. saginata* (beef tapeworm) and *T. solium* (pork tapeworm). The tapeworm is considered to be solitary, because usually no more than four species are found in any one individual host. The danger of this parasite is that the larvae can migrate to the brain, or other vital organs (cysticercosis). Tapeworms may be detected by identifying segments in the host’s stool that the worms discard as they grow. However, tapeworms may go undetected for many years, living asymptotically within their host.

According to classification, they can vary in size ranging from 2 to 12 meters in length. They consist of a head called the scolex, which attaches to the intestine by means of suction cups, and a body consisting of repeating units called proglottids. A single *Taenia* can grow from 1,000 to 2,000 proglottids, depending on the type. A tapeworm produces an average of 720,000 eggs per day.

Pinworms (*Enterobius Vermicularis*)

Humans are considered the only host of what are commonly called pinworms (*Enterobius vermicularis*). This type of worm is the most typical in the family because it propagates easily. It is common for children to become reinfected in schools, through contact with others, or through anal-hand-mouth contact. Pinworms have an elongated shape, are whitish in color, and are about 1cm long. They inhabit the large intestine of humans. Female pinworms leave eggs around the anus. Once deposited, the eggs are infectious for a period of up to 20 days. Once in the intestine, it takes between five and eight weeks to

develop into adult worms. The most important symptom is intense itching that occurs in the anal area, especially at night. In women, inflammation of the vulvar area is very common.

A pinworm infection is, generally speaking, not very serious. Unlike other parasites, they infect only humans. Transmission from person-to-person happens by handling clothing, bed sheets, towels, and environmental surfaces (such as curtains, carpeting) contaminated with pinworm eggs, which are so light that they are able to become airborne. A small number of eggs can be integrated into air particles that when inhaled follow the same developmental process as ingested eggs. Enemas are extremely useful in removing this parasite from the large intestine.

Graham's method is a simple method of detection. Just after waking and before a bowel movement, press a piece of tape against the anal folds. The tape will catch the remains of eggs and/or parasites that are situated there. With the naked eye we can see small worms no more than an inch long, but with a microscope, many transparent eggs from females and even other species may be seen.

The Importance of Lifelong Deworming

Once we begin the process of deworming, we should recognize that we must maintain this habit of cleaning for the rest of our lives to enjoy good health. It is common among people who have pets, to follow the recommendations of their veterinarians, and deworm their pets every three months. It is interesting to ask why family physicians do not give the same advice to humans. Perhaps some physicians ignore this information, or simply do not consider it important to eliminate these pests, which are just as harmful to people as they are for animals.

It is true that many parasites are not endemic or common outside certain climates, but human migration and global marketing of food products have facilitated the spread of many parasitic pests silently. It is important that we understand the lifecycle of each parasite, from birth to death including reproductive and death stages. This information is crucial for the complete elimination of the parasite. For example, in the case of intestinal parasites treated here with this protocol, some can live in the host for up to ten years, as in the case of a single *Taenia*, while others may remain in the host for a lifetime, reproducing again and again, as in the case of the pinworms or the well-known *Ascaris*.

The Kalcker Parasite Protocol & Lunar Cycle Timing

In the modern civilization in which we live, we have lost touch with much of the ancient wisdom of the past. One of the things we have forgotten is how the natural cycle of the moon influences many of nature's routines. This is especially true for the behavior of parasites. They are known to sync their life-cycle with that of the lunar cycle. Your child may demonstrate extreme behaviors on certain lunar cycle days... especially on the full moon and sometimes even the new moon.

Therefore, to maximize effectiveness, this Parasite Protocol is specifically timed to the lunar cycle. Appendix 10, page 477 provides an easy reference for you to look up the days to perform the Parasite Protocol, which is administered over 19 days—numbered 0 to 18—each month; starting three days prior to the full moon and continue during the waning moon. This period of the moon's cycle is very effective for deworming because many nematodes (parasitic worms) travel back into the intestine to mate at this time.

Length of Treatment

This protocol is not a one-time treatment. You should plan for at least 12 to 18 months to insure you have purged multiple parasite life-cycles and continue beyond 12 months if your child is still expelling parasites.

Building on CD (MMS1, CDS, CDH)

This protocol builds on what you have already learned using CD. During treatment, it is absolutely necessary to continue CD dosing, CD baths and CD enemas.

Tape Worms

This protocol is specifically designed for the deworming of large intestinal parasites, especially round nematodes such as *Ascaris*. It is effective for most nematodes, but may not be effective against tapeworms. In the case of infestation by *Taenias*, the recommended treatment is Niclosamide, the preferred medication due to its low toxicity.

Components of the Kalcker Parasite Protocol

This protocol uses some of what you have already learned and should already be doing, along with a set of ingredients you will need to have on hand before you start (shown in bold below). Here is an overview list of the items you

will need to have on hand, and the items are described in detail on the pages that follow:

- Meal time (1, 2, 3)
- CD / CDS (4-19)
- CD Baths (20)
- CD Enemas (21, 22)
- Ocean Water (23, 24, 25) (see page 115)
- **Diatomaceous Earth** (26, 27)
- **Lepidium Latifolium Extract (Rompepiedras)** or **Chanca Piedra (Stone Breaker)** (28, 29)
- **Pyrantel Pamoate (Combantrin®)** (30, 31)
- **Mebendazole** (32-36)
- **Castor Oil** (37)
- **Neem** (39, 40)
- **Probiotic (usually THERALAC®)** (41)

Check the following website for the latest information on where to find these products:

www.ProtocolSuppliers.com

You may have noticed one or more numbers in parenthesis following each of the previous items, such as “(40)” for the probiotic. The timing of what to give when, is covered in great detail in the daily charts starting on page 198. These numbers match those found on the daily sample charts to make it easier for you to connect the dots and also be able to identify related notes under each chart. They have nothing to do with the quantity/dosing of any substance. The use of these numbers allows us to comment on specific items and when and where they come into play as shown on the daily sample charts.

We now detail each one of the items on the list above and discuss what you need to know about them and how to acquire them (including their associated numbers on the charts).

Meals (1, 2, 3)

Obviously meals are part of everyone’s day. The purpose in mentioning them here is that many of the following steps are related to meal timing. Some actions or ingredients are taken before breakfast, others during or after.

In our example charts, we make some assumptions which include:

- Breakfast (1) is at 7:30am
- Lunch (2) is at 12 noon
- Dinner (3) is at 5pm

CD, CDS or CDH (4-19)

As you learned in Chapter 5, you continue to dose CD (or CDS/CDH) as before during the Parasite Protocol. Nothing changes in that regard with the Parasite Protocol building on top of those steps already in place.

The sample charts assume your child is going to school, and so you may not be able to administer doses of CD during his school day (7-12) unless you are home-schooling, in which case you are encouraged to give hourly CD doses, even if the total exceeds 8 for the day.

CD Baths (Optional) (20)

Our sample charts assume you administer a CD bath just before bedtime. See pages 113 for more information about CD baths.

CD Enemas (21, 22)

Ideally, give your child a CD enema in the morning (21) and another one in the evening (22). However, if your child is going to school, a morning (21) enema may not be a good idea due to the possibility of an “accident.” Therefore, consider the morning enema optional, but the night time enema a must do! See page 103 for more information.

Ocean Water (23, 24, 25)

Supplementing ocean water minerals is important to support the body through the detoxification process. See page 115 for more information on ocean water.

Dosing:

(23) A dose of ocean water should be administered upon waking, but five minutes apart from CD dosing.

(24) One dose of ocean water immediately after school (or at lunch time if at home).

(25) One dose of ocean water, 15 minutes before or after dinner.

Diatomaceous Earth (DE) - Food Grade (26, 27)



Diatoms are unicellular plants that existed by the trillions in our oceans over 300 million years ago. They are encased by a cell wall that is made of silica. When diatoms die, this microscopic coating deposits at the bottom of oceans. Over time, they pile up in banks forming deposits thousands of meters in size. With the

receding of the oceans, these deposits have been uncovered. Through compression, and ultimately fossilization, these silica deposits have given rise to a chalk rock called diatomaceous earth.

DE is an inert, nontoxic compound, which contains a number of minerals such as manganese, magnesium, iron, titanium, calcium silicates, and others. Properly ground, the skeletons of microscopic diatoms become sharp silica needles, harmful to parasites, fungi, yeast, worms, and amoebas. However, these needles are harmless to humans and other warm-blooded animals. Although it is safe to consume diatomaceous earth continuously, the best method (as with everything else) is to allow for periods of rest. During the 18-day treatment, take two teaspoons (5ml) twice a day.

Dosing: $\frac{1}{2}$ to 1 teaspoon twice a day for smaller kids, 1 teaspoon three times a day for adults and bigger kids. Mix with a little water and drink. Given on days 1 through 18. DE mixes well with water but never dissolves. Stir the DE/water slurry vigorously and drink immediately before the DE settles to the bottom. Some people take heaping tablespoons in water, but larger amounts are not necessary. **DO NOT** take dry!

Note: In rare cases, DE can cause constipation, which can usually be managed by reducing the dosages to $\frac{1}{2}$, $\frac{1}{4}$ or even $\frac{1}{8}$ th of a teaspoon. If that doesn't resolve the issue, remove DE from the protocol and continue with all other directions.

Source & Cost: Search online for "Food Grade Diatomaceous Earth." Buy at least 1 pound and expect to pay about \$20 more or less. Better yet, buy a five pound bag, which will reduce your cost per pound. DE does not expire or degrade, but should be kept in a dry container. Note: Diatomaceous Earth

is often used as non-toxic element in pool filtration systems. You DO NOT want to use this kind of DE since it has been processed. Only get “Food Grade” Diatomaceous Earth!

Lepidium Latifolium Extract (aka Rompepiedras or Pepperwort) or Chanca Piedra (aka Stone Breaker) (28, 29)



Lepidium Latifolium (Rompepiedras) and Chanca Piedra (Stone Breaker) both break up hard substances in the body. The reason we use it in this protocol is two-fold: It breaks up the protective outer coating of parasites, and annihilates oxalates, which many of our kids have an abundance of because oxalates are produced by parasites.

Note #1: It is often simply referred to as “RP” in our discussion forums.

Note #2: If you are having trouble finding this particular ingredient, don’t let its absence stop you from starting the protocol with all other ingredients.

Dosing: 15 drops for a 100 pound child mixed in with the diatomaceous earth/water. Use seven drops for smaller children.

Source & Cost: You have a choice of two herb extracts; Lepidium Latifolium Extract (aka Rompepiedras or Pepperwort) and Chanca Piedra (aka Stone Breaker). One US source is www.mightyguts.com, which sells a 50ml dropper bottle of Pepperwort for about \$30. A primary manufacturer in Europe is Soria Natural from Spain that labels their product Rompepiedras, while they also have an English labeled box that says Pepperwort. They both show Lepidium Latifolium on the box.

Pyrantel Pamoate (30, 31) (Trilombrin/Combantrin®)

Pyrantel pamoate is a broad spectrum anthelmintic, which works by causing a neuromuscular block that produces spastic paralysis of the parasite, and its subsequent expulsion by intestinal peristaltic action, without excitation of the parasites or encouragement of their migration. Pyrantel pamoate acts over a short duration, and tends to be completely eliminated from the body in the feces and urine within three to four days. Pyrantel pamoate is poorly absorbed from the gastrointestinal tract, and approximately 6 to 8% total is found in the urine, with the remainder in the feces. The recommended dose is one daily dose of 10 mg per kilo.

Pyrantel pamoate is incompatible with the use of piperazine, because the two substances neutralize each other. Thus Pyrantel pamoate should not be combined with pumpkin seeds, which contain piperazine, or with antiparasitic drugs that contain piperazine in their formulation.

Dosing: Pyrantel pamoate is given only twice during one cycle of the parasite protocol; once during breakfast on day one (30), and again during breakfast on day five (31). Dose is based on weight and calculated by multiplying your child's weight in kilograms times 10mg of pyrantel pamoate. To make it easy, refer to the following chart:

Pyrantel Pamoate (Trilobrin/Combantrin®) Dosing by Weight		
Pounds	Kilograms	Dose in mg.
20	9	91
40	18	181
60	27	272
80	36	363
100	45	454
120	54	544
140	64	635
160	73	726
180	82	816
200	91	907
220	100	998
240	109	1089

Pyrantel pamoate (often just referred to as Combantrin®) is available in three forms:

- **Liquid:** where each milliliter contains a certain number of milligrams. For example, one available formulation contains 144mg/ml. So a 100lb child would take 3ml.
- **Tablets:** where each usually contains 250mg.
- **Capsules:** where each usually contains 250mg.

You will have to read the label or the particular product you acquire and determine the milligrams to use.

Source: Combantrin® is available by prescription in the US. Most other countries have it available over the counter.

The preferred source of pyrantel pamoate is a compounding pharmacy, as to avoid coloring and flavoring. If you are unable to find it without coloring/ flavoring then I would personally use mebendazole for the entire 18 days rather than risk giving your child an ingredient which may cause regression.

Note #1: Some brands of Combantrin® include mebendazole. You want the stand-alone Combantrin®!

Note: #2 Pumpkin seeds should not be consumed with pyrantel pamoate because they neutralize its effects.

Mebendazole (Vermox®/Lomper®) (32-36)

Mebendazole is a drug used in treating diseases caused by helminths (parasites of the gastrointestinal tract). This drug prevents the parasite from using glucose, which results in a decrease in energy and therefore death of the parasite.

Mebendazole is a non-systemic drug which means it is only absorbed, to a limited extent, in the gastrointestinal tract (approximately 5 to 10%). However, if it is consumed with fatty foods then more absorption occurs.

Approximately 2% of the administered mebendazole is excreted in the urine, while the remainder is excreted in the feces. The appropriate dose of mebendazole may be different for each patient as it depends on the type of parasite causing the infection.⁶ The most frequently recommended dose is 100mg for children, 200 mg for adults, two times a day for seven of the first nine days of the Protocol.

Adverse effects from mebendazole are generally rare due to its poor absorption. However, it may cause nausea, vomiting, abdominal pain, and diarrhea. Normally these effects are in fact a result of the release of toxins from the very death of

the parasite itself. Anti-parasitic drugs can be administered very effectively by diluting them in water, putting the mixture in a small bulb enema, and inserting the anally. This is especially suitable in the case of oxyuriasis (pinworms). Read more about this “implant method” on page 220.

Dosing:

Note: Indicated weights should only be considered a rough guide.

Small Children (20-40lbs.): Days 2, 3, 4, 6, 7, 8 & 9 — Take as little as 25mg of mebendazole with breakfast and dinner, and do NOT do a blitz on Day 9.

Children (41-70lbs.): Days 2, 3, 4, 6, 7, & 8 — 50mg with breakfast and dinner. On Day 9 they can take 50mg, 50mg and 25mg.

Adolescents (71-100lbs.): Days 2, 3, 4, 6, 7, & 8 — 100mg during breakfast and 100mg during dinner. Day 9 is “Mebendazole Blitz Day” where you administer ONE 200mg dose during breakfast; ONE 200mg dose at lunch; and a final 100mg dose at dinner.

Teens & Adults (101 lbs. and up): Days 2, 3, 4, 6, 7, & 8 — 200mg during breakfast and 200mg during dinner. Day 9 is “Mebendazole Blitz Day” where you administer ONE 500mg dose during breakfast and no dose at lunch or dinner for the remainder of the current cycle.

Source: Mebendazole is available by prescription in the US and over the counter in other countries.

Note #1: Some brands combine mebendazole with Combantrin®. You want the stand-alone mebendazole!

Note #2: Mebendazole is mostly sold in tablet form, but it is also available in liquid. DO NOT buy the liquid form—stick with the tablets! I have seen horrible reactions from the “inert” vehicles used in the liquid products.

Castor Oil (37)

Castor oil is extracted from the seed of a plant called *Ricinus communis* (“Higuera del diablo”). Its seeds contain between 50-80% oil, which has a high content of ricinoleic acid, which has excellent laxative and purgative properties. Once you begin anti-parasitic treatments, spastic paralysis may occur in some parasites and many together may form a “knot” of worms that can cause intestinal obstruction. It is important to help your body



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purge them by using castor oil. Castor oil should be taken in the morning, two hours after breakfast and other medications. If your child goes to school they take it as soon as they walk in the door from school. A typical dose for a child is 1/2 tsp to 1 tsp, or up to tolerance. The adult dosage is 15 to 30ml (two tablespoons), two hours after breakfast and other medications. If you experience any intestinal distress, mineral purgatives such as Epsom salts, or vegetable purgatives such as senna leaves, can be used.

Castor oil is also available in gelcaps for those who dislike the taste.

Dosing: The amount to administer varies and really depends on the individual's tolerance. A good starting point is ½ teaspoon for smaller children and up to two tablespoons for larger children and adults. Only experimentation will determine the right amount, if castor oil causes diarrhea.

Source & Cost: Readily available in liquid form at most pharmacies in the laxative section. Usually under \$10 for 16oz. Also available online.

Neem (Azadirachta indica), Caps or Tea (38, 39)



The neem tree is a great natural inheritance of mankind. References in Sanskrit scriptures and ayurvedic medicine practices indicate the use of neem since ancient times in Hindu medicine. Even today, Hindus living in rural areas call the neem tree the “village pharmacy” for its ability to alleviate many diseases and is currently endorsed by authorities in India for its use in medicinal preparations. Neem is one of the purifying and detoxifying plants

with the greatest potential. Neem has been used to combat all forms of body parasites, external and internal parasites alike. To prepare neem, boil four leaves (normally the contents of an envelope) in one liter of water for five minutes. Drink the tea throughout the day over the course of each parasite protocol.

Dosing: Neem is given each parasite protocol from day 10 through Day 18.

You have a choice of caps or tea. I prefer caps over tea because the taste is strong and unpleasant, so some kids will buck drinking tea.

Caps (assuming 475mg each): An adult takes six in a day, three times two caps at meal times.

Follow the directions on the bottle. Give a full dose for teens and adults 100 lbs. and over. Small children receive $\frac{1}{4}$ to $\frac{1}{2}$ dose.

If using caps, give one dose during breakfast and one dose at dinner.

Tea: Give four doses throughout the day. Prepare a tea from the leaves, one tea bag in one liter of water (add stevia if needed to cover some of the bitter taste). One tea bag usually contains approximately four leaves. If using loose leaves, then make one liter of tea with four neem leaves. If using crushed leaves, then use approximately one slightly heaping teaspoon.

Neem Tea Dosing	
Weight of Person	Total Daily Amount (To be split into 4 doses)
20-34 lbs	100 ml
35-49 lbs	200 ml
50-64	300 ml
65-84	400 ml
85-109	500 ml
110 and over	600 ml

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Source & Cost: Neem capsules cost about \$8 for 100x 475mg caps. Look in your local health food store. One popular brand in the US is Nature's Way®. BioPure™ sells a product called *Neem Synergy* which contains a few additional herbs that do not affect the neem.

Neem tea can be purchased in bags or as dried leaves.

THERALAC® (Probiotic) (40)



THERALAC® is a probiotic that should be given during the parasite protocol to help reestablish good gut flora. Ideally, it is rotated every other month with THERALAC® TruFlora®.

The key reason for recommending THERALAC® over other probiotics is explained in this paragraph excerpted from their website:



THERALAC® probiotics survive transit through the harsh acidity of the stomach and arrive alive in the intestinal tract. THERALAC's ACID PROOF™ technology utilizes sodium alginate from seaweed in a unique formulation that assures survival at pH 1.6 for 90 minutes, the most severe stomach acid conditions normally experienced. Other probiotics that claim acid resistance are tested at pH 2.5 – 3.0, or >10 times less acidic than pH 1.6 – not a fair test. THERALAC's ACID PROOF® technology is protected by US Patents 7,122,370 and 7,229,818. This technology goes beyond resisting stomach acid and involves keeping the probiotic cells together in a viscous alginate-gel moving in group-force, not as separate individual cells like other probiotics, deep into the intestinal tract while retaining key formula ingredients, LactoStim® and Sodium Alginate in close proximity.

Dosing: One capsule of THERALAC® is given each and every night at bedtime, irrelevant of age/weight. This probiotic is also to be given outside of the 19 Parasite Protocol days.

THERALAC® can be given at the same time as CD if your child swallows capsules. However, if you are using the THERALAC® powder form then give it at least five to ten minutes after the last CD dose of the night. See their website for more information about the powder form.

Special exception: Some people do not tolerate probiotics, in which case we have no choice but to leave them out. In some of these cases, sauerkraut and fermented veggies may help to cultivate beneficial bacteria.

Source & Cost: Amazon carries “THERALAC® 30 caps by Master Supplements Inc.” for \$37.

Sample Parasite Protocol Daily Calendar

To assist you in understanding the Parasite Protocol and how it changes from day to day, we have prepared the following visual set of daily charts showing how all the pieces fit together. To prepare this set of charts, we made up the following times for example purposes only:

- Your child's awake time is between 6am and 10pm.
- Breakfast is at 7:30am
- Your child goes to school, which starts at about 9am
- School is out at about 2:30pm
- Dinner is at 5pm

As stated earlier, each dose or activity is labeled with a unique number. Those numbers relate to notes below each chart AND they match longer descriptive notes in the previous pages.

You are encouraged to copy/enlarge the blank chart in Appendix 9 (page 475) and workout your real-life schedule based on these example charts.

Refer to the lunar calendar (Appendix 10, page 477) for the exact days the protocol should be followed, as well as to get an idea of behaviors related to parasites around the full and new moon.

After four years of biomed and no major gains, we decided to try mms/cd protocol. We started in April and are currently on our second parasite protocol. Initially, we were really intimidated by the enema part but realized if we were apprehensive our 7 yr old daughter would pick up on that. We told her that what we were about to do would help her feel better we gave her the iPad right before the procedure and a new fav toy (beanie boos) and she was game. After it was over she said "no more booboo in my tummy". We all cried. To make a three-month adventure short and sweet, her team at school cannot figure out how her fragmented speech has gone from 2-3 word utterances to long, drawn out sentences. Her expressive language and receptive have increased. Her auditory processing speed has quadrupled. The most amazing part thus far has been the increase in social skills. Or just the fact that she is interested in engaging. Socially she was nonexistent and is now at a four year old level. We just spent a week with family and she was saying hi and engaging without being prompted!!! She now has a million questions, wants to know when and where we are going and the sequence in which events will take place. All this from a girl who never asked questions before mms! STOP thinking about trying! just Do It!! For the first time in seven years, I can hear the bells of freedom ringing!!!! Thank you Kerri Rivera !!!!!

Day 0 (3 days before Full-Moon)

Time	Meal Time	CD / CDs / CDH	CD / CDs / CDH Bath	CD / CDs / CDH Enema	Ocean Water	Diatomaceous Earth	Lepidium Latifolium Extract (Rompepedras / RP)	Pyrantel Pamoate (Combantrin)	Mebendazole	Castor Oil	Neem	Probiotic
6:00 AM		4		21	23							
6:30 AM												
7:00 AM		5										
7:30 AM	1											
8:00 AM		6										
8:30 AM												
9:00 AM		7										
9:30 AM												
10:00 AM		8										
10:30 AM												
11:00 AM		9										
11:30 AM												
12:00 PM	2											
12:30 PM												
1:00 PM		11										
1:30 PM												
2:00 PM		12										
2:30 PM												
3:00 PM		13			24							
3:30 PM												
4:00 PM		14										
4:30 PM												
5:00 PM	3											
5:30 PM												
6:00 PM		16		22								
6:30 PM												
7:00 PM		17			25							
7:30 PM												
8:00 PM		18										
8:30 PM												
9:00 PM		19	20									
9:30 PM												40

Day 0 - Notes:	
1, 2, 3	Breakfast, Lunch & Dinner
4 - 19	At least 8 CD doses throughout the day, preferably more, at least 30 to 60 minutes away from food.
20	CD Bath at the end of the day.
21, 22	Enema in the morning (optional) and in the evening (mandatory).
23 - 25	3 doses of ocean water at least 5 minutes away from CD.
40	Probiotic at the end of the day

Day 1 (2 days before Full-Moon)

Time	Meal Time	CD / CDs / CDH	CD / CDs / CDH Bath	CD / CDs / CDH Enema	Ocean Water	Diatomaceous Earth	Lepidium Latifolium Extract (Rompepedras / Rp)	Pyrantel Pamoate (Combantrin)	Mebendazole	Castor Oil	Neem	Probiotic
6:00 AM		4		21	23							
6:30 AM												
7:00 AM		5										
7:30 AM	1				26	28	30					
8:00 AM		6										
8:30 AM									*			
9:00 AM		7										
9:30 AM												
10:00 AM		8										
10:30 AM												
11:00 AM		9										
11:30 AM												
12:00 PM	2											
12:30 PM												
1:00 PM		11										
1:30 PM												
2:00 PM		12										
2:30 PM												
3:00 PM		13		24						37		
3:30 PM												
4:00 PM		14										
4:30 PM												
5:00 PM	3				27	29						
5:30 PM												
6:00 PM		16		22								
6:30 PM												
7:00 PM		17		25								
7:30 PM												
8:00 PM		18										
8:30 PM												
9:00 PM		19	20									
9:30 PM												40

Day 1 - Notes:	
1, 2, 3	Breakfast, Lunch & Dinner
4 - 19	At least 8 CD doses throughout the day, preferably more, at least 30 to 60 minutes away from food.
20	CD Bath at the end of the day.
21, 22	Enema in the morning (optional) and in the evening (mandatory).
23 - 25	3 doses of ocean water at least 5 minutes away from CD.
26 - 29	Diatomaceous Earth and Lepidium Latifolium with breakfast and dinner.
30	Dose of Combantrin with breakfast
* 37	Castor oil 1 hour after breakfast or immediately upon return from school.
40	Probiotic at the end of the day

Day 2 (1 day before Full-Moon)

Time	Meal Time	CD / CDs / CDH	CD / CDs / CDH Bath	CD / CDs / CDH Enema	Ocean Water	Diatomaceous Earth	Lepidium Latifolium Extract (Rompepedras / RP)	Pyrantel Pamoate (Combantnin)	Mebendazole	Castor Oil	Neem	Probiotic
6:00 AM		4		21	23							
6:30 AM												
7:00 AM		5										
7:30 AM	1				26	28		32				
8:00 AM		6										
8:30 AM												
9:00 AM		7										
9:30 AM												
10:00 AM		8										
10:30 AM												
11:00 AM		9										
11:30 AM												
12:00 PM	2											
12:30 PM												
1:00 PM		11										
1:30 PM												
2:00 PM		12										
2:30 PM												
3:00 PM		13		24								
3:30 PM												
4:00 PM		14										
4:30 PM												
5:00 PM	3				27	29		33				
5:30 PM												
6:00 PM		16		22								
6:30 PM												
7:00 PM		17		25								
7:30 PM												
8:00 PM		18										
8:30 PM												
9:00 PM		19	20									
9:30 PM												40

Day 2 - Notes:	
1, 2, 3	Breakfast, Lunch & Dinner
4 - 19	At least 8 CD doses throughout the day, preferably more, at least 30 to 60 minutes away from food.
20	CD Bath at the end of the day.
21, 22	Enema in the morning (optional) and in the evening (mandatory).
23 - 25	3 doses of ocean water at least 5 minutes away from CD.
26 - 29	Diatomaceous Earth and Lepidium Latifolium with breakfast and dinner.
32, 33	Small Child Dose: 100mg Mebendazole with breakfast and dinner. Teen/Adult Dose: 200mg Mebendazole with breakfast and dinner.
40	Probiotic at the end of the day

Day 3 (Full-Moon)

Time	Meal Time	CD / CDs / CDH	CD / CDs / CDH Bath	CD / CDs / CDH Enema	Ocean Water	Diatomaceous Earth	Lepidium Latifolium Extract (Rompepedras / Rp)	Pyrantel Pamoate (Combantrin)	Mebendazole	Castor Oil	Neem	Probiotic
6:00 AM		4		21	23							
6:30 AM												
7:00 AM		5										
7:30 AM	1					26	28		32			
8:00 AM		6										
8:30 AM									*			
9:00 AM		7										
9:30 AM												
10:00 AM		8										
10:30 AM												
11:00 AM		9										
11:30 AM												
12:00 PM	2											
12:30 PM												
1:00 PM		11										
1:30 PM												
2:00 PM		12										
2:30 PM												
3:00 PM		13			24				37			
3:30 PM												
4:00 PM		14										
4:30 PM												
5:00 PM	3					27	29		33			
5:30 PM												
6:00 PM		16		22								
6:30 PM												
7:00 PM		17			25							
7:30 PM												
8:00 PM		18										
8:30 PM												
9:00 PM		19	20									
9:30 PM												40

Day 3 - Notes:	
1, 2, 3	Breakfast, Lunch & Dinner
4 - 19	At least 8 CD doses throughout the day, preferably more, at least 30 to 60 minutes away from food.
20	CD Bath at the end of the day.
21, 22	Enema in the morning (optional) and in the evening (mandatory).
23 - 25	3 doses of ocean water at least 5 minutes away from CD.
26 - 29	Diatomaceous Earth and Lepidium Latifolium with breakfast and dinner.
32, 33	Small Child Dose: 100mg Mebendazole with breakfast and dinner. Teen/Adult Dose: 200mg Mebendazole with breakfast and dinner.
* 37	Castor oil 1 hour after breakfast or immediately upon return from school.
40	Probiotic at the end of the day

Day 4

Time	Meal Time	CD / CDs / CDH	CD / CDs / CDH Bath	CD / CDs / CDH Enema	Ocean Water	Diatomaceous Earth	Lepidium Latifolium Extract (Rompepedras / Rp)	Pyrantel Pamoate (Combantrin)	Mebendazole	Castor Oil	Neem	Probiotic
6:00 AM		4		21	23							
6:30 AM												
7:00 AM		5										
7:30 AM	1				26	28		32				
8:00 AM		6										
8:30 AM												
9:00 AM		7										
9:30 AM												
10:00 AM		8										
10:30 AM												
11:00 AM		9										
11:30 AM												
12:00 PM	2											
12:30 PM												
1:00 PM		11										
1:30 PM												
2:00 PM		12										
2:30 PM												
3:00 PM		13		24								
3:30 PM												
4:00 PM		14										
4:30 PM												
5:00 PM	3				27	29		33				
5:30 PM												
6:00 PM		16		22								
6:30 PM												
7:00 PM		17		25								
7:30 PM												
8:00 PM		18										
8:30 PM												
9:00 PM		19	20									
9:30 PM												40

Day 4 - Notes:	
1, 2, 3	Breakfast, Lunch & Dinner
4 - 19	At least 8 CD doses throughout the day, preferably more, at least 30 to 60 minutes away from food.
20	CD Bath at the end of the day.
21, 22	Enema in the morning (optional) and in the evening (mandatory).
23 - 25	3 doses of ocean water at least 5 minutes away from CD.
26 - 29	Diatomaceous Earth and Lepidium Latifolium with breakfast and dinner.
32, 33	Small Child Dose: 100mg Mebendazole with breakfast and dinner. Teen/Adult Dose: 200mg Mebendazole with breakfast and dinner.
40	Probiotic at the end of the day

Day 5

Time	Meal Time	CD / CDs / CDH	CD / CDs / CDH Bath	CD / CDs / CDH Enema	Ocean Water	Diatomaceous Earth	Lepidium Latifolium Extract (Rompepedejas / Rp)	Pyrantel Pamoate (Combantrin)	Mebendazole	Castor Oil	Neem	Probiotic
6:00 AM		4		21	23							
6:30 AM												
7:00 AM		5										
7:30 AM	1				26	28	31					
8:00 AM		6										
8:30 AM									*			
9:00 AM		7										
9:30 AM												
10:00 AM		8										
10:30 AM												
11:00 AM		9										
11:30 AM												
12:00 PM	2											
12:30 PM												
1:00 PM		11										
1:30 PM												
2:00 PM		12										
2:30 PM												
3:00 PM		13		24					37			
3:30 PM												
4:00 PM		14										
4:30 PM												
5:00 PM	3				27	29						
5:30 PM												
6:00 PM		16		22								
6:30 PM												
7:00 PM		17		25								
7:30 PM												
8:00 PM		18										
8:30 PM												
9:00 PM		19	20									
9:30 PM												40

Day 5 - Notes:	
1, 2, 3	Breakfast, Lunch & Dinner
4 - 19	At least 8 CD doses throughout the day, preferably more, at least 30 to 60 minutes away from food.
20	CD Bath at the end of the day.
21, 22	Enema in the morning (optional) and in the evening (mandatory).
23 - 25	3 doses of ocean water at least 5 minutes away from CD.
26 - 29	Diatomaceous Earth and Lepidium Latifolium with breakfast and dinner.
31	Dose of Combantrin with breakfast (NO Mebendazole today!)
* 37	Castor oil 1 hour after breakfast or immediately upon return from school.
40	Probiotic at the end of the day

Day 6

Time	Meal Time	CD / CDs / CDH	CD / CDs / CDH Bath	CD / CDs / CDH Enema	Ocean Water	Diatomaceous Earth	Lepidium Latifolium Extract (Rompepepigas / Rp)	Pyrantel Pamoate (Combamtrin)	Mebendazole	Castor Oil	Neem	Probiotic
6:00 AM		4		21	23							
6:30 AM												
7:00 AM		5										
7:30 AM	1				26	28		32				
8:00 AM		6										
8:30 AM												
9:00 AM		7										
9:30 AM												
10:00 AM		8										
10:30 AM												
11:00 AM		9										
11:30 AM												
12:00 PM	2											
12:30 PM												
1:00 PM		11										
1:30 PM												
2:00 PM		12										
2:30 PM												
3:00 PM		13		24								
3:30 PM												
4:00 PM		14										
4:30 PM												
5:00 PM	3				27	29		33				
5:30 PM												
6:00 PM		16		22								
6:30 PM												
7:00 PM		17		25								
7:30 PM												
8:00 PM		18										
8:30 PM												
9:00 PM		19	20									
9:30 PM												40

Day 6 - Notes:	
1, 2, 3	Breakfast, Lunch & Dinner
4 - 19	At least 8 CD doses throughout the day, preferably more, at least 30 to 60 minutes away from food.
20	CD Bath at the end of the day.
21, 22	Enema in the morning (optional) and in the evening (mandatory).
23 - 25	3 doses of ocean water at least 5 minutes away from CD.
26 - 29	Diatomaceous Earth and Lepidium Latifolium with breakfast and dinner.
32, 33	Small Child Dose: 100mg Mebendazole with breakfast and dinner. Teen/Adult Dose: 200mg Mebendazole with breakfast and dinner.
40	Probiotic at the end of the day

Day 7

Time	Meal Time	CD / CDs / CDH	CD / CDs / CDH Bath	CD / CDs / CDH Enema	Ocean Water	Diatomaceous Earth	Lepidium Latifolium Extract (Rompepedejas / Rp)	Pyrantel Pamoate (Combantrin)	Mebendazole	Castor Oil	Neem	Probiotic
6:00 AM		4		21	23							
6:30 AM												
7:00 AM		5										
7:30 AM	1				26	28		32				
8:00 AM		6										
8:30 AM									*			
9:00 AM		7										
9:30 AM												
10:00 AM		8										
10:30 AM												
11:00 AM		9										
11:30 AM												
12:00 PM	2											
12:30 PM												
1:00 PM		11										
1:30 PM												
2:00 PM		12										
2:30 PM												
3:00 PM		13		24					37			
3:30 PM												
4:00 PM		14										
4:30 PM												
5:00 PM	3				27	29		33				
5:30 PM												
6:00 PM		16		22								
6:30 PM												
7:00 PM		17		25								
7:30 PM												
8:00 PM		18										
8:30 PM												
9:00 PM		19	20									
9:30 PM												40

Day 7 - Notes:	
1, 2, 3	Breakfast, Lunch & Dinner
4 - 19	At least 8 CD doses throughout the day, preferably more, at least 30 to 60 minutes away from food.
20	CD Bath at the end of the day.
21, 22	Enema in the morning (optional) and in the evening (mandatory).
23 - 25	3 doses of ocean water at least 5 minutes away from CD.
26 - 29	Diatomaceous Earth and Lepidium Latifolium with breakfast and dinner.
32, 33	Small Child Dose: 100mg Mebendazole with breakfast and dinner. Teen/Adult Dose: 200mg Mebendazole with breakfast and dinner.
* 37	Castor oil 1 hour after breakfast or immediately upon return from school.
40	Probiotic at the end of the day

Day 8

Time	Meal Time	CD / CDs / CDH	CD / CDs / CDH Bath	CD / CDs / CDH Enema	Ocean Water	Diatomaceous Earth	Lepidium Latifolium Extract (Rompepepigas / Rp)	Pyrantel Pamoate (Combantrin)	Mebendazole	Castor Oil	Neem	Probiotic
6:00 AM		4		21	23							
6:30 AM												
7:00 AM		5										
7:30 AM	1					26	28		32			
8:00 AM		6										
8:30 AM												
9:00 AM		7										
9:30 AM												
10:00 AM		8										
10:30 AM												
11:00 AM		9										
11:30 AM												
12:00 PM	2											
12:30 PM												
1:00 PM		11										
1:30 PM												
2:00 PM		12										
2:30 PM												
3:00 PM		13			24							
3:30 PM												
4:00 PM		14										
4:30 PM												
5:00 PM	3					27	29		33			
5:30 PM												
6:00 PM		16		22								
6:30 PM												
7:00 PM		17			25							
7:30 PM												
8:00 PM		18										
8:30 PM												
9:00 PM		19	20									
9:30 PM												40

Day 8 - Notes:	
1, 2, 3	Breakfast, Lunch & Dinner
4 - 19	At least 8 CD doses throughout the day, preferably more, at least 30 to 60 minutes away from food.
20	CD Bath at the end of the day.
21, 22	Enema in the morning (optional) and in the evening (mandatory).
23 - 25	3 doses of ocean water at least 5 minutes away from CD.
26 - 29	Diatomaceous Earth and Lepidium Latifolium with breakfast and dinner.
32, 33	Small Child Dose: 100mg Mebendazole with breakfast and dinner. Teen/Adult Dose: 200mg Mebendazole with breakfast and dinner.
40	Probiotic at the end of the day

Day 9 (Mebendazole Blitz Day)

Time	Meal Time	CD / CDS / CDH	CD / CDS / CDH Bath	CD / CDS / CDH Enema	Ocean Water	Diatomaceous Earth	Lepidium Latifolium Extract (Rompepedras / Rp)	Pyrantel Pamoate (Combantrin)	Mebendazole	Castor Oil	Neem	Probiotic
6:00 AM		4		21	23							
6:30 AM												
7:00 AM		5										
7:30 AM	1				26	28		34				
8:00 AM		6										
8:30 AM									*			
9:00 AM		7										
9:30 AM												
10:00 AM		8										
10:30 AM												
11:00 AM		9										
11:30 AM												
12:00 PM	2											
12:30 PM												
1:00 PM		11										
1:30 PM												
2:00 PM		12										
2:30 PM								35				
3:00 PM		13		24					37			
3:30 PM												
4:00 PM		14										
4:30 PM												
5:00 PM	3				27	29		36				
5:30 PM												
6:00 PM		16		22								
6:30 PM												
7:00 PM		17		25								
7:30 PM												
8:00 PM		18										
8:30 PM												
9:00 PM		19	20									
9:30 PM												40

Day 9 - Notes:	
1, 2, 3	Breakfast, Lunch & Dinner
4 - 19	At least 8 CD doses throughout the day, preferably more, at least 30 to 60 minutes away from food.
20	CD Bath at the end of the day.
21, 22	Enema in the morning (optional) and in the evening (mandatory).
23 - 25	3 doses of ocean water at least 5 minutes away from CD.
26 - 29	Diatomaceous Earth and Lepidium Latifolium with breakfast and dinner.
34	Blitz Day - Small Child Dose 1: 200mg Mebendazole with breakfast. Teen/Adult Dose: 500mg Mebendazole with breakfast ONLY!
35	Blitz Day - Dose 2: 200mg Mebendazole with lunch (or right after school) Teen/Adult Dose: N/A
36	Blitz Day - Dose 3: 100mg Mebendazole with dinner. Teen/Adult Dose: N/A
* 37	Castor oil 1 hour after breakfast or immediately upon return from school.
40	Probiotic at the end of the day

Day 10

Time	Meal Time	CD / CDs / CDH	CD / CDs / CDH Bath	CD / CDs / CDH Enema	Ocean Water	Diatomaceous Earth	Lepidium Latifolium Extract (Rompepedras / RP)	Pyrantel Pamoate (Combantnin)	Mebendazole	Castor Oil	Neem	Probiotic
6:00 AM		4		21	23							
6:30 AM												
7:00 AM		5										
7:30 AM		1				26	28				38	
8:00 AM		6										
8:30 AM												
9:00 AM		7										
9:30 AM												
10:00 AM		8										
10:30 AM												
11:00 AM		9										
11:30 AM												
12:00 PM		2										
12:30 PM												
1:00 PM		11										
1:30 PM												
2:00 PM		12										
2:30 PM												
3:00 PM		13			24							
3:30 PM												
4:00 PM		14										
4:30 PM												
5:00 PM		3				27	29				39	
5:30 PM												
6:00 PM		16		22								
6:30 PM												
7:00 PM		17			25							
7:30 PM												
8:00 PM		18										
8:30 PM												
9:00 PM		19	20									
9:30 PM												40

Day 10 - Notes:	
1, 2, 3	Breakfast, Lunch & Dinner
4 - 19	At least 8 CD doses throughout the day, preferably more, at least 30 to 60 minutes away from food.
20	CD Bath at the end of the day.
21, 22	Enema in the morning (optional) and in the evening (mandatory).
23 - 25	3 doses of ocean water at least 5 minutes away from CD.
26 - 29	Diatomaceous Earth and Lepidium Latifolium with breakfast and dinner.
38, 39	Start dosing Neem Caps with breakfast and dinner. If using tea, 4 doses throughout the day.
40	Probiotic at the end of the day

Day 11

Time	Meal Time	CD / CDs / CDH	CD / CDs / CDH Bath	CD / CDs / CDH Enema	Ocean Water	Diatomaceous Earth	Lepidium Latifolium Extract (Rompepneumias / Rp)	Pyrantel Pamoate (Combantrin)	Mebendazole	Castor Oil	Neem	Probiotic
6:00 AM		4		21	23							
6:30 AM												
7:00 AM		5										
7:30 AM	1				26	28				38		
8:00 AM		6										
8:30 AM												
9:00 AM		7										
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10:00 AM		8										
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1:00 PM		11										
1:30 PM												
2:00 PM		12										
2:30 PM												
3:00 PM		13		24								
3:30 PM												
4:00 PM		14										
4:30 PM												
5:00 PM	3				27	29				39		
5:30 PM												
6:00 PM		16		22								
6:30 PM												
7:00 PM		17		25								
7:30 PM												
8:00 PM		18										
8:30 PM												
9:00 PM		19	20									
9:30 PM												40

Day 11 - Notes:	
1, 2, 3	Breakfast, Lunch & Dinner
4 - 19	At least 8 CD doses throughout the day, preferably more, at least 30 to 60 minutes away from food.
20	CD Bath at the end of the day.
21, 22	Enema in the morning (optional) and in the evening (mandatory).
23 - 25	3 doses of ocean water at least 5 minutes away from CD.
26 - 29	Diatomaceous Earth and Lepidium Latifolium with breakfast and dinner.
38, 39	Neem Caps with breakfast and dinner. If using tea, 4 doses throughout the day.
40	Probiotic at the end of the day

Day 12

Time	Meal Time	CD / CDS / CDH	CD / CDS / CDH Bath	CD / CDS / CDH Enema	Ocean Water	Diatomaceous Earth	Lepidium Latifolium Extract (Rompepedras / RP)	Pyrantel Pamoate (Combantrin)	Mebendazole	Castor Oil	Neem	Probiotic
6:00 AM		4		21	23							
6:30 AM												
7:00 AM		5										
7:30 AM	1				26	28				38		
8:00 AM		6										
8:30 AM									*			
9:00 AM		7										
9:30 AM												
10:00 AM		8										
10:30 AM												
11:00 AM		9										
11:30 AM												
12:00 PM	2											
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1:00 PM		11										
1:30 PM												
2:00 PM		12										
2:30 PM												
3:00 PM		13		24					37			
3:30 PM												
4:00 PM		14										
4:30 PM												
5:00 PM	3				27	29				39		
5:30 PM												
6:00 PM		16	22									
6:30 PM												
7:00 PM		17		25								
7:30 PM												
8:00 PM		18										
8:30 PM												
9:00 PM		19	20									
9:30 PM												40

Day 12 - Notes:	
1, 2, 3	Breakfast, Lunch & Dinner
4 - 19	At least 8 CD doses throughout the day, preferably more, at least 30 to 60 minutes away from food.
20	CD Bath at the end of the day.
21, 22	Enema in the morning (optional) and in the evening (mandatory).
23 - 25	3 doses of ocean water at least 5 minutes away from CD.
26 - 29	Diatomaceous Earth and Lepidium Latifolium with breakfast and dinner.
* 37	Castor oil 1 hour after breakfast or immediately upon return from school.
38, 39	Neem Caps with breakfast and dinner. If using tea, 4 doses throughout the day.
40	Probiotic at the end of the day

Day 13

Time	Meal Time	CD / CDs / CDH	CD / CDs / CDH Bath	CD / CDs / CDH Enema	Ocean Water	Diatomaceous Earth	Lepidium Latifolium Extract (Rompepedras / Rp)	Pyrantel Pamoate (Combantrin)	Mebendazole	Castor Oil	Neem	Probiotic
6:00 AM		4		21	23							
6:30 AM												
7:00 AM		5										
7:30 AM	1				26	28				38		
8:00 AM		6										
8:30 AM												
9:00 AM		7										
9:30 AM												
10:00 AM		8										
10:30 AM												
11:00 AM		9										
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1:00 PM		11										
1:30 PM												
2:00 PM		12										
2:30 PM												
3:00 PM		13		24								
3:30 PM												
4:00 PM		14										
4:30 PM												
5:00 PM	3				27	29				39		
5:30 PM												
6:00 PM		16		22								
6:30 PM												
7:00 PM		17		25								
7:30 PM												
8:00 PM		18										
8:30 PM												
9:00 PM		19	20									
9:30 PM												40

Day 13 - Notes:	
1, 2, 3	Breakfast, Lunch & Dinner
4 - 19	At least 8 CD doses throughout the day, preferably more, at least 30 to 60 minutes away from food.
20	CD Bath at the end of the day.
21, 22	Enema in the morning (optional) and in the evening (mandatory).
23 - 25	3 doses of ocean water at least 5 minutes away from CD.
26 - 29	Diatomaceous Earth and Lepidium Latifolium with breakfast and dinner.
38, 39	Neem Caps with breakfast and dinner. If using tea, 4 doses throughout the day.
40	Probiotic at the end of the day

Day 14

Time	Meal Time	CD / CDs / CDH	CD / CDs / CDH Bath	CD / CDs / CDH Enema	Ocean Water	Diatomaceous Earth	Lepidium Latifolium Extract (Rompepedras / Rp)	Pyrantel Pamoate (Combantrin)	Mebendazole	Castor Oil	Neem	Probiotic
6:00 AM		4		21	23							
6:30 AM												
7:00 AM		5										
7:30 AM	1					26	28				38	
8:00 AM		6										
8:30 AM												
9:00 AM		7										
9:30 AM												
10:00 AM		8										
10:30 AM												
11:00 AM		9										
11:30 AM												
12:00 PM	2											
12:30 PM												
1:00 PM		11										
1:30 PM												
2:00 PM		12										
2:30 PM												
3:00 PM		13			24							
3:30 PM												
4:00 PM		14										
4:30 PM												
5:00 PM	3					27	29				39	
5:30 PM												
6:00 PM		16		22								
6:30 PM												
7:00 PM		17			25							
7:30 PM												
8:00 PM		18										
8:30 PM												
9:00 PM		19	20									
9:30 PM												40

Day 14 - Notes:	
1, 2, 3	Breakfast, Lunch & Dinner
4 - 19	At least 8 CD doses throughout the day, preferably more, at least 30 to 60 minutes away from food.
20	CD Bath at the end of the day.
21, 22	Enema in the morning (optional) and in the evening (mandatory).
23 - 25	3 doses of ocean water at least 5 minutes away from CD.
26 - 29	Diatomaceous Earth and Lepidium Latifolium with breakfast and dinner.
38, 39	Neem Caps with breakfast and dinner. If using tea, 4 doses throughout the day.
40	Probiotic at the end of the day

Day 15

Time	Meal Time	CD / CDs / CDH	CD / CDs / CDH Bath	CD / CDs / CDH Enema	Ocean Water	Diatomaceous Earth	Lepidium Latifolium Extract (Rompinaphedras / Rp)	Pyrantel Pamoate (Combantrin)	Mebendazole	Castor Oil	Neem	Probiotic
6:00 AM		4		21	23							
6:30 AM												
7:00 AM		5										
7:30 AM	1				26	28				38		
8:00 AM		6										
8:30 AM									*			
9:00 AM		7										
9:30 AM												
10:00 AM		8										
10:30 AM												
11:00 AM		9										
11:30 AM												
12:00 PM	2											
12:30 PM												
1:00 PM		11										
1:30 PM												
2:00 PM		12										
2:30 PM												
3:00 PM		13		24						37		
3:30 PM												
4:00 PM		14										
4:30 PM												
5:00 PM	3				27	29				39		
5:30 PM												
6:00 PM		16		22								
6:30 PM												
7:00 PM		17		25								
7:30 PM												
8:00 PM		18										
8:30 PM												
9:00 PM		19	20									
9:30 PM												40

Day 15 - Notes:	
1, 2, 3	Breakfast, Lunch & Dinner
4 - 19	At least 8 CD doses throughout the day, preferably more, at least 30 to 60 minutes away from food.
20	CD Bath at the end of the day.
21, 22	Enema in the morning (optional) and in the evening (mandatory).
23 - 25	3 doses of ocean water at least 5 minutes away from CD.
26 - 29	Diatomaceous Earth and Lepidium Latifolium with breakfast and dinner.
* 37	Castor oil 1 hour after breakfast or immediately upon return from school.
38, 39	Neem Caps with breakfast and dinner. If using tea, 4 doses throughout the day.
40	Probiotic at the end of the day

Day 16

Time	Meal Time	CD / CDs / CDH	CD / CDs / CDH Bath	CD / CDs / CDH Enema	Ocean Water	Diatomaceous Earth	Lepidium Latifolium Extract (Rompinchivas / Rp)	Pyrantel Pamoate (Combanttrin)	Mebendazole	Castor Oil	Neem	Probiotic
6:00 AM		4		21	23							
6:30 AM												
7:00 AM		5										
7:30 AM	1				26	28				38		
8:00 AM		6										
8:30 AM												
9:00 AM		7										
9:30 AM												
10:00 AM		8										
10:30 AM												
11:00 AM		9										
11:30 AM												
12:00 PM	2											
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1:00 PM		11										
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2:00 PM		12										
2:30 PM												
3:00 PM		13		24								
3:30 PM												
4:00 PM		14										
4:30 PM												
5:00 PM	3				27	29				39		
5:30 PM												
6:00 PM		16	22									
6:30 PM												
7:00 PM		17		25								
7:30 PM												
8:00 PM		18										
8:30 PM												
9:00 PM		19	20									
9:30 PM												40

Day 16 - Notes:	
1, 2, 3	Breakfast, Lunch & Dinner
4 - 19	At least 8 CD doses throughout the day, preferably more, at least 30 to 60 minutes away from food.
20	CD Bath at the end of the day.
21, 22	Enema in the morning (optional) and in the evening (mandatory).
23 - 25	3 doses of ocean water at least 5 minutes away from CD.
26 - 29	Diatomaceous Earth and Lepidium Latifolium with breakfast and dinner.
38, 39	Neem Caps with breakfast and dinner. If using tea, 4 doses throughout the day.
40	Probiotic at the end of the day

Day 17

Time	Meal Time	CD / CDs / CDH	CD / CDs / CDH Bath	CD / CDs / CDH Enema	Ocean Water	Diatomaceous Earth	Lepidium Latifolium Extract (Romepeptides / RP)	Pyranter / Pramoxate (Combanttrin)	Mebendazole	Castor Oil	Neem	Probiotic
6:00 AM		4		21	23							
6:30 AM												
7:00 AM		5										
7:30 AM	1				26	28				38		
8:00 AM		6										
8:30 AM												
9:00 AM		7										
9:30 AM												
10:00 AM		8										
10:30 AM												
11:00 AM		9										
11:30 AM												
12:00 PM	2											
12:30 PM												
1:00 PM		11										
1:30 PM												
2:00 PM		12										
2:30 PM												
3:00 PM		13		24								
3:30 PM												
4:00 PM		14										
4:30 PM												
5:00 PM	3				27	29				39		
5:30 PM												
6:00 PM		16		22								
6:30 PM												
7:00 PM		17		25								
7:30 PM												
8:00 PM		18										
8:30 PM												
9:00 PM		19	20									
9:30 PM												40

Day 17 - Notes:	
1, 2, 3	Breakfast, Lunch & Dinner
4 - 19	At least 8 CD doses throughout the day, preferably more, at least 30 to 60 minutes away from food.
20	CD Bath at the end of the day.
21, 22	Enema in the morning (optional) and in the evening (mandatory).
23 - 25	3 doses of ocean water at least 5 minutes away from CD.
26 - 29	Diatomaceous Earth and Lepidium Latifolium with breakfast and dinner.
38, 39	Neem Caps with breakfast and dinner. If using tea, 4 doses throughout the day.
40	Probiotic at the end of the day

Day 18

Time	Meal Time	CD / CDs / CDH	CD / CDs / CDH Bath	CD / CDs / CDH Enema	Ocean Water	Diatomaceous Earth	Lepidium Latifolium Extract (Rompepedras / RP)	Pyrantel Pamoate (Combantrin)	Mebendazole	Castor Oil	Neem	Probiotic
6:00 AM		4		21	23							
6:30 AM												
7:00 AM		5										
7:30 AM	1				26	28				38		
8:00 AM		6										
8:30 AM									*			
9:00 AM		7										
9:30 AM												
10:00 AM		8										
10:30 AM												
11:00 AM		9										
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1:30 PM												
2:00 PM		12										
2:30 PM												
3:00 PM		13			24				37			
3:30 PM												
4:00 PM		14										
4:30 PM												
5:00 PM	3				27	29			39			
5:30 PM												
6:00 PM		16		22								
6:30 PM												
7:00 PM		17			25							
7:30 PM												
8:00 PM		18										
8:30 PM												
9:00 PM		19	20									
9:30 PM												40

Day 18 (Last Day!) - Notes:	
1, 2, 3	Breakfast, Lunch & Dinner
4 - 19	At least 8 CD doses throughout the day, preferably more, at least 30 to 60 minutes away from food.
20	CD Bath at the end of the day.
21, 22	Enema in the morning (optional) and in the evening (mandatory).
23 - 25	3 doses of ocean water at least 5 minutes away from CD.
26 - 29	Diatomaceous Earth and Lepidium Latifolium with breakfast and dinner.
* 37	Castor oil 1 hour after breakfast or immediately upon return from school.
38, 39	Neem Caps with breakfast and dinner. If using tea, 4 doses throughout the day.
40	Probiotic at the end of the day

Parasite Protocol *Off Days*

Days “19” through to the next “Day 0” are “Off Days” where you discontinue parasite meds and herbs. Here’s a simple chart showing what to continue doing and what to stop during this *off* time:

Continue with these:
CD / CDS / CDH Dosing
CD / CDS / CDH Baths
CD / CDS / CDH Enemas
Ocean Water
Probiotic

Stop these:
Diatomaceous Earth
Lepidium Latifolium
Pyrantel Pamoate (Combantrin®)
Mebendazol
Neem
Castor Oil

Of course this represents a hypothetical case and your situation may call for taking other meds or supplements.

Detection of Parasites in Stool

It is necessary to detect the parasites by observing the stool carefully. For that we use a small plastic basin, and a plastic stick or fork for examination.

Author’s Note: One of the moms who is a part of our forum came up with some guidelines for processing your child’s stool for parasite identification. She calls it, “Everything You Wanted to Know About Sorting Through Poop.” Here are her suggestions:

Supplies:

- rubber gloves
- paper plates
- plastic forks (plastic sticks, chop sticks, or plastic back scratcher)
- a pen
- a coin
- toilet hat

I like to use a plastic “toilet hat” also known as a specimen collector or a specimen collection unit, which goes under the toilet seat and collects the stool before it sinks into the bottom of the toilet (available on Amazon.com).



The Collection:

When your child poops, it is collected in the toilet hat (specimen collector). After I get my child cleaned up and taken care of, I remove the toilet hat from the toilet and put the specimen on a paper plate with my plastic fork. I have a look for anything interesting and then transfer that part to a clean plate using my trusty plastic fork. I discard the remainder of the specimen into the toilet, flush and put that dirty paper plate in the bathroom garbage. (We now line with kitchen garbage bags, and I change it after each of these poops.) On the clean plate with the suspected worm, I may add a bit of water and swish it around to get the worm cleaner. I then may transfer the worm to a third plastic plate to get a clear picture. On the clean plate with the washed worm, I write the date, and the initials of the person the worm came from. If you need help identifying the worm, place a penny next to the worm (for size context), snap a picture, and mail the image to kerri@cdautism.org, (Kerri collects the photos for documentation purposes, so send those worm pictures). Then flush the worm and put all paper plates, gloves, and fork in garbage and take it outside. Now, you can go find out what your child has gotten into while you were doing all this.

Clean Up:

Use HOT water (60°C/140°F), and sterilize with 96% (180 proof) grain alcohol (Everclear).

Microscope

It is very useful to have a microscope for diagnosis because it enables you to see both the small parasites that may appear in the blood, as well as eggs or larvae in the feces. This way we are more accurately able to determine if the number of parasites decreases. A simple microscope that costs about \$100 is suitable for this kind of identification. The easiest method to determine what you see is to compare your sample to images you find on Google. This way you can enlarge the images, see various samples from different angles, and get a much wider variety of samples than if you were comparing a sample with many textbooks.

Bulb Enemas (aka “Implant”)

To prevent anal itching from pinworms, night wakings, etc., you can use a bulb enema or small catheter/syringe with a dilution of 50mg of mebendazole in 10 to 15ml of water for small children, or 100mg of mebendazole in 15 to 20ml of water for larger children/teens/adults. The best way to do this is to introduce the medication together with the water in the rectum immediately before bedtime and hold overnight. If you are using the “implant,” a morning enema is mandatory.



So we did the 100mg of Mebendazole with 20ml of water. He kept it in and we did it right before bed... Next day a ton of worms came out!!! Better yet he started singing songs with a tune - 3 different songs over the last 2 days and counting on his fingers very purposefully! His aide at school said he did amazing today - no behaviors, very focused, better articulation and better social interest.

The Worm Whisperer

The following words of wisdom are from a mom who has earned the nickname *The Worm Whisperer* (although her ability to destroy parasites may make the *Worm Ninja* more apropos). Her dedication and diligence have not only made the difference in the life of her son, but countless other children who are what she calls “extreme cases.” The information presented here may be the difference between an older/aggressive child living with their family or going to a group home for the care that their family is no longer able to provide them. Thank you Robin, for being a pioneer and for never giving up. Thank you for having the guts, the know-how, and the generosity to share what you have learned with those who need it most.

Extreme Cases by Robin Goffe

This section is for older children who may be violent, self-injurious, destructive, physically aggressive, high risk and/or bedridden.

Some families have children who are older when they first start treatment. My son was 18 years old. We call ourselves the “last chance” group. We say this because our children have lived their whole lives infested, unbeknownst to us. Our children lived as happy, relatively easily manageable, learning-disabled children: perhaps slightly annoying with their routines of movie dialogue scripting or attachment to Disney movies, maps, or little known facts. They were mostly friendless but pretty easy to take care of. However, during the hormonal teen years, things took a grave turn. We may have chalked up their newfound solitude to just giving up socially for lack of friends. They did not fit in. We had no idea that something else was brewing. The hormones within them began to have a bitter war with the parasites living inside them, and a war would soon break out. Their mental state would diminish considerably. What we are faced with are grown, strong children who are mentally ill and violent, self-injurious, and destructive. Some have even become so ill that they had to stay in bed.

This “last chance” is an opportunity to try **ONE MORE THING** before putting them in a group home; to give them away—for their own safety and the safety of their families.

These things that I am going to share with you are unique to the standard treatment outlined in the book. It is a more aggressive treatment because it is needed. Our children are so highly infested that it is shocking to tell you what we have found. There is a lot to do, but there is a method. It is time



The Goffe family.

consuming and it is a lot of work. But here I will outline what we did to get our son from an aggressive, self-injurious, destructive young man to one who has regained patience, language, understanding, and reasoning; but best of all, the opportunity to remain in our home. With continued treatments, he has the hope for a future: a job perhaps, and maybe even a family of his own.

Beginning treatment for the older child and especially one who is aggressive, self-injurious, violent, and destructive is one done starting low and slow.

Day one = one drop.

I kept a very detailed journal, and I will simply tell you what we did. I will tell you what worked for us and what did not. I will also tell you what I shared with others that worked for them as well. I am not a physician. I am not a chemist. I am a mother in love with my son and his utmost comfort was my main concern. My only goal was to clear his parasites. I had no idea that the things I learned by digging through his stool for 9 months would eventually give me the nickname, "The Worm Whisperer." Although intestinal parasites have been around longer than man, and they are smart enough to live within a human being lifelong, they can go completely undetected. I was ready to plot out a war against them. By the beginning of our 9th month of treatment, I estimate that I had cleaned and examined 35 pounds (16 KG) of solid parasites. Hard to believe? I have 80% of them photographed. The last two months in

jars total seven pounds and a running total of the combined length will be at over 200 feet (61 meters), at the publishing of this book. There is not a classroom in the world that can teach what I learned in my bathroom day after day in latex gloves and a hospital mask. There was a fan blowing on me to manage the stench and by the third week my gag reflex was under control.

I examined the parasites, the pieces, how did it die? What was my son feeling at the time? Was he violent? Sweating? Slapping his legs from the pain of the parasites moving around and torturing him from the inside? I needed to eliminate these worms without allowing them to cause my son pain as they were killed. I had no idea the monsters I was to face.

In March of 2013, we started our son on one drop of chlorine dioxide. One of the most feared things that the parents of adult sized children face is the dreaded enema. It is just not something that most of us grew up with as standard care. But even so, my husband and I knew it was something that made sense. There are toxins inside these kids. They must be flushed out. The bowel is the way out. So on the very first day and the very first drop, we also explained to our severely autistic child that we were going to help his belly feel better. Our son, by this time, was so severe in regression that I can only best explain him as non-human. He was no longer speaking, unable to react to us, had stopped answering to his name, and could no longer contain the saliva in his mouth. He walked with a 12-inch drool hanging from his mouth. He ate like an animal, glaring at us. He was frequently violent: jumping on cars and denting them in, kicking down fences and destroying property.

This was the child that we were going to start giving enemas to. If we could do it, anyone can.

Each day we went up a drop; two drops on day two, three drops on day three, and so on. He was edgy and tired. We went for walks, as per usual, to deal with his aggression, but by day seven he began to have a runny nose and had a great deal of fatigue. We were so happy since we knew this was a sign to look for; that the immune system was kicking in. He slept for about 15 hours as we woke him and dosed him every hour and by the next morning there were about 25 white, hairy, thin looking objects in his stool. We knew these were worms and that we had our answer. After three weeks we began to see 4-6 inch parasites in all shapes and sizes, yet the aggression continued. It was here that I learned that what we were experiencing was POWS (Pissed Off Worm Syndrome). By this point we were at 13 drops, and while we were killing the smaller parasites, we were only pissing off the larger ones. The parasites do not like their environment disturbed, and subsequently they

cause distress to the host. Parasites excrete ammonia, (possibly, leading to hyperammonemia and possibly seizures), morphine, and a meth-like substance. As these toxins enter the body, they can also cause aggression and anger. We had many possessions broken during these tantrums. We stopped valuing material objects.

It was here that we were told about—double dosing. So even though our son was getting about the equivalent of two drops an hour, if we saw increased aggression, OCD or self-injurious behavior we would give him four (see page 103 for an explanation of double dosing). If he did not calm down, we gave him another four drop dose. This was the perfect return attack for the parasites. Within a few moments the aggression settled. His red face and wild eyes diminished, and we had made it past another hurdle.

We used the double dose method dozens and dozens of times over the following months, and this helped tremendously to curtail the aggression caused by the parasites.

By the third week of treatment, we were concerned about the time during the night that our son would not be getting doses. So for the next six months our family had a dosing schedule, dosing additionally at midnight, 2am, 4am and picking back up to hourly doses from 6am to 10pm. This schedule was shared by not only my husband and I, but also our son's siblings, who would also set their alarms and take their turns, while we all rotated lack of sleep.

By the second month we found that our son's behavior not only changed around the full moon but the new moon as well. The standard protocol uses mebendazole over the full moon. However, with the older, more aggressive children we have had success with including mebendazole over the new moon cycle as well. These mini mebendazole courses feature shorter bursts of 5-6 days each, over the new and full moons beginning four days before each. We also deemed it necessary to start earlier in the moon phase than with the younger kids, since the infestation was greater, and the parasite movement occurred earlier, causing behaviors sooner.

For the child that has aggression, every parent must remember that the behavior is parasite related. During treatment you will see a variety of behaviors stemming from the parasites attempting to control their environment aka—the host. We found that increasing the frequency of the dose dampened the violence and aggression. It can be difficult to trust your child who is lost in a rage. You feel deceived and hurt. Those were our frequent emotions as well. It does pass. It took about 4-5 months for the rages to stop. They happened

everywhere and were happening even on the toilet while trying to expel the parasites. Have a plan. Music worked very well for us. So did reading books. Find something to distract, and always give soothing, comforting tones. We frequently told our son how much we loved him and we rubbed his head and back. These herxing behaviors may be avoided through the use of a new method of preparing CD called CDH (see Chapter 7, page 155 for more info on CDH).

CDH: This new preparation method has really been a huge asset for the older kids that need to go higher in drops. At around 20 drops, the volume of the regular CD became unpleasant, making some children nauseous. My son was one of them. With the CDH preparation, I firmly believe that the older, tough-nut children will have more success with getting to the appropriate levels needed to start expelling the larger parasites. It is my personal belief that the amount needed in many of the non-seizure older kids with aggression, violence, self-injury, and destruction to be between 75-100ml of CDH daily. This amount may have a connection to the voltage needed in order for the mitochondria in the white blood cells to be given the power to not only kill the parasites, but to also destroy the bacteria. The job is two-fold, and must be done quickly as once the parasite is dead, the bacteria want to devour them immediately. I say these things because I have seen the condition of the parasites every day. I found that if I can kill the parasite with the least amount of disturbance or preparedness by the parasite, then there is no time for them to fight back and cause herxing. The bacteria also come into play and must be dealt with. Higher amounts of CDH kill both, without so much as a frown or a concern on the face of my son.

Stevia: I found that by adding the sweetener stevia to the CDH, the process can be more pleasant and does not affect the properties or effectiveness of the dose. As proven by Lamotte ClO₂ test strips (see page 467 for information on using the test strips).

Humidifier: In the beginning months, the infestation level is so high that nightly doses may have to be sacrificed in order to start breaking down the will of the parasites. It is not about seeing them every day, but slowly and consistently breaking their will. The constant aggressive irritation of the CDH will kill parasites, stopping them from making gains. There is another layer of nighttime treatments, and that is the humidifier. We fill a cool air humidifier that holds one gallon of water, and put 35 drops of activated CD (NOT CDH) and let it run all night near our son's head. This too was a method we used for maximum parasite elimination.

Spices and Herbs: It is urgent that we work constantly with our older kids to rid the body of parasites and pathogens. We have found that for kids that can easily swallow pills, filling empty gel capsules with the recommended herbs and spices in this chapter under Other Medicinal Plants (page 231) helpful. We have found great results by filling the gelcaps with the variety mentioned there: black walnut, ginger, rue, wormwood, and yarrow and giving two to four different ones with each meal as a toxic feast to the parasites. Don't narrow your selection to those mentioned here—get them all. There is no plan or pattern. Use any combination.

Colonics: Professional colonics have been an important addition to healing and cleansing parasites in our older kids. We started these a few months after our son was accustomed to the routine enemas. This has been a wonderful addition, and we try to do at least one weekly. Some places will allow you to do inserts, and we have taken our CDH there working up to 50-100ml CDH with great success.

Limiting Undesirable Behaviors

Probiotics: If you are using probiotics and your child is aggressive or becomes aggressive after restarting the probiotics, consider removing them as a first step. There could be such a high infestation rate that the child's system does not distinguish between good bacteria and bad bacteria.

Enemas: CD enemas should start on day one of treatment for the aggressive/older child. Since they have such a high rate of infestation, it is necessary to clear the pathogens on a continuing cycle from the very beginning. Please follow instructions for enemas starting on page 103.

Diatomaceous Earth (DE): In some children, the DE may shred the larger parasites to death, causing them to spew additional toxins into the child's body, which results in herx symptoms. Discontinuing DE for a few months may help to ease the distress, and give a cleaner kill.

Salt Baths: There are times that the body is unable to pull out the toxins fast enough. Be careful about killing too fast (dosing without or not enough enemas). If you have done enemas, and there still seems to be distress, you can buy a 40-pound bag of plain pool salt, take 9 pounds of salt and put it into a hot bath. Allow the salt to dissolve and have the child soak for one hour. If the child sweats during the bath, this is a good sign, as it shows toxins are being pulled out. Do not use Epsom salts. They contain magnesium. Magnesium feeds parasites as well as biofilm. Plain pool salt is cheap, and helps to remove toxins.

Dandelion Tea: This is an incredible detoxing source as well. There have been times that our son was in and out of a salt bath all day drinking dandelion tea to get the built-up toxins out. This is a tea ready made by Traditional Medicinals® (traditionalmedicinals.com).

Tips on What to Expect During the Parasite Elimination

Intestinal parasites have been on Earth longer than humans. Their plan is to find a host, and to continue to create life. They have the home advantage by living inside of your child. There are many things that I have learned while at war with them. They have a plan and so should you.

Situations We Have Come Across

Peetox: As you kill the parasites, they are alerted that you have taken away their joyful life. As a result, they do things to the host to show their displeasure. One of the things the parasites do is to spew toxins, including a morphine-like substance that can cause your child to not feel that he needs to urinate or that he is urinating. Naturally, this can lead to accidents. This is not the child's fault, but only a part of the parasite elimination process. One of the most difficult things we did was to put our 18-year-old son in adult diapers. It was heart breaking because it felt that we were moving backwards instead for forwards. However, this was only temporary, and for his own dignity. Especially if they go to school; perhaps being in diapers for a while is the answer. Our son was in and out of them for about two months. This does end.

Sleepytox: As you are going higher in drops, the CD is assisting the immune system to get the parasites out. It will take a lot of energy to do this. Remember, your child is the host and there is a war going on! Sometimes, your child may be tired for days. Our son slept for nearly the entire summer at the beginning of his treatment. Allow the rest they seek. Now our son gets higher doses of CD on the weekends, and he is very tired and sleeps then, too. By Monday morning, we can usually get a big fat rope worm after our efforts. Sleepytox is great because you can get a lot done on your home "to do" list.

Behaviors/OCD/Tics: Some may become alarmed because their child starts having behaviors that they did not have before treatments, or they feel that the behaviors have gotten worse. Parasites have a plan. It is to stay alive and to procreate. They want their eggs to return back into a host to repeat the cycle. So, you may see behaviors of playing with feces, touching their anus to their mouth, trying to put their fingers into your mouth or another person. There are finger and nail chewing, and spitting. These are all parasite controlled behaviors. We have found that eliminating parasites helps to minimize this behavior and it will eventually subside. There may also be

a mineral deficiency attached as well. We have found that giving PLENTY of ocean water can help to tame these behaviors. Our 19-year-old son gets over 200ml OW mixed with 400ml spring water per day.

POWS (Pissed-Off Worm Syndrome): POWS presents itself when you have been dosing, and your child seems weepy, is pacing, and/or unhappy. Sometimes it is really that you have pissed off the worms, but are not killing them. Always check with Kerri regarding your concerns. But many times the answer is to go up in drops not down. You need to kill them—not piss them off, or they will fight back.

Clear Zone: This time period can be about five to seven days before the full moon; once infestation is brought down after six months or more of treatment. You may be able to start seeing glimpses of your child being lucid. This is a good time for an ATEC test.

High Volume Eating: Often times, the kids reach a point where they realize that they have been starving. The parasites have been taking a bulk of their nutrients, causing their mental deficiencies. They may even be eating non-stop all day. It is tough to juggle the timing and effectiveness of the CD with the continued eating. Allowing the child to eat high volumes of food while dosing with CD will still kill the parasites, but the CD levels may not be high enough to avoid a herx. Though the parasites may be killed the CD level may not be high enough to also kill off the bacteria eating the dead parasite. One solution we found was to give our son homemade bone broth with ocean water many times a day. This will help to replace the lack of nutrients, meanwhile reducing the overeating enough to continue the CD without risking a herx reaction.

Weight Loss: Our son lost 50 pounds during the first seven months of treatment. He was very over weight at 5'9" and 200 pounds. The weight loss brought concern to people who had not seen him for long periods. During this time I estimate that 35 pounds was solid parasites. His stomach was very bloated, as was his face. Our children are full of parasites and pathogens (i.e., yeast, bacteria, etc.), and all of these things can make them gain weight or be bloated. Our son is now in the normal weight range for his height, and has a flat stomach.

Night Terrors: During the night you may see that your child has trouble settling down, or they may wake in the night screaming your name. They may even do night walking, possibly leaving out the front door in a sleepwalk state. We saw these behaviors years ago, as our son was heading into a higher infestation level. Now that we are on the healing end, many of the behaviors return as sort of a rewind. The behaviors that came into play going down the ladder are sometimes repeated heading back up the ladder to wellness. We feel that our son was experiencing separation anxiety, and the recognition that

he had total control again. This new gained independence may be frightening. At a point, our son entered the peetox stage (see above). He had no feeling or sensation to urinate, so he was put into adult diapers. As our son's infestation rate decreased, the normal behaviors like waking in the night and feeling the urge to urinate returned. Then, as he would get up to go to the bathroom, he would suddenly stop, and feel perhaps lost and afraid to continue this task alone. He would scream out or wander around whimpering. Although night wakings were disturbing, we found them to be a necessary passage for bringing our son to reality. In order to give comfort, at night we continued the CD humidifier, as well as CD ear and nose drops. Many times a CD bath before bed was calming as well.

Emotional Blindness: Because the toxins that the parasites excrete are substances that have the effects of morphine, ammonia, and histamine, these toxins can cause emotional confusion in your child. They may be confused by your laughter, smiles, and affection. Your positive and loving encounter may be perceived as threatening or challenging. Your smile may bring a rage. Any spoken words by you no matter how soothing they may be, could be perceived as a confrontation. This is difficult on both parent and child, as the child may see you as a threat and perhaps even as mocking them; while you as the parent feel rejected in your affections. Many times the child's behaviors evolve into a stoned-out loss of reality and presence. These are all related to the toxic build up and defense of the parasites. Their motivation is to remain in the host; they show their displeasure to the discomforts we have given them in our elimination attempts. Many times during these episodes, we have found it best to avoid words or eye contact, but rather to offer double doses as outlined by Kerri, and keep a calm environment. We have found that these toxic levels can be lowered through salt baths and dandelion tea.

Despite the behaviors that may be brought on by a parasite protocol, the results are amazing. In our family we are finally getting our son back. I would recommend staying the course. As we know, these kinds of parasitic infestations in immune-comprised children will not go away on their own. Children do not "grow out of" worms. In fact, the worms will continue to grow inside of them. The following parasites were expelled by my older son, by making the aggressive modifications aimed at older children. By removing these parasites we are seeing the first stages of recovery. The jars on the following page represent seven pounds of worms in less than two months.

Yours in healing,
Robin



7 lbs. of 35 lbs. (total) of the parasites extracted in 9 months (160 feet in total above).



39+ inch long worm.

Other Medicinal Plants

Author's Note: The following information is extremely powerful for our continued health and well-being. However, these plants and foods ALONE have NOT been proven to heal autism. Rather, follow the 18-day deworming protocol presented starting on page 187. When this is done for 12-18 months it has proven to be an important part of the protocols that have led to the recovery of many children. With that in mind, some parents of older children, and aggressive/self-injurious children have started to implement a few of the plants and foods listed below, in addition to the aforementioned 18-day protocol. In many cases, these additions have led their children to increased gains through increased parasite elimination.

A number of other plants are also effective for deworming. If, after three months of treatment, the problem persists we can change the type of plant, or repeat any plant that was effective in previous months. We can use them in combinations, mixing several plants at once, or take them individually. Plant formulations that should be considered are alcoholic extracts, in oil or by infusion, and include the following plants:

- Clove (*Syzygium aromaticum*)
- Common Rue (*Ruta graveolens*)
- Dandelion (*Taraxacum officinale*)
- Gentian Root (*Gentiana lutea*)
- Mint (*Mentha sativa*)
- Mugwort/Common Wormwood (*Artemisia vulgaris*)
- Pomegranate Root Bark (*Punica granatum L.*)
- Southernwood (*Artemisia abrotanum*)
- Sweet Wormwood (*Artemisia annua*)
- Sweetflag/Calamus Root (*Acorus calamus*)
- Tansy (*Tanacetum vulgare*)
- Walnut shell (*Juglans*)
- White Fraxinella (*Dictamnus albus*)
- Yarrow (*Achillea millefolium*)

Preventative Food & Diet

There are groups of foods that should be avoided if you have a parasitic infection. For example, dairy products in general, refined sugars (sucrose, fructose, corn syrup), flour (especially refined), and overly sweet foods in general. The list of foods and plants below promote good internal balance of the body, hence becoming our allies. With good production of stomach acid, a normal level of healthy bacteria, and proper bile production, it is impossible for parasites to survive for long. Worms need an acidic environment that comes from the breakdown of sugars and putrefaction from the ingestion of unhealthy or processed foods. It is very important to eat raw vegetables and

fruit juices, which provide us with enzymes and other elements necessary to protect us.

Choucroute/sauerkraut (fermented cabbage in salt).

Many people have low levels of stomach acid, which is the cause of many intestinal problems, because the body is unable to defend itself against intruders. Sauerkraut juice or cabbage/sauerkraut is one of the most powerful stimulants for your body to produce stomach acid. The use of unpasteurized fermented foods (water kefir, soy sauce, miso, etc.) is highly recommended for its stimulation of the beneficial bacterial flora that is responsible for generating control over parasites. Take a few spoonfuls of cabbage juice before meals, or better yet sauerkraut juice, because it will do wonders to improve your digestion.

Author's note: I do not recommend soy, in any form, for anyone with an ASD.

Garlic

Garlic, eaten regularly, turns the stomach and intestine into a lethal environment for parasites, providing constant protection. Garlic is the quintessential home remedy to eliminate intestinal parasites naturally. It has been used by many different cultures such as Chinese, Greek, Roman, Indian, and Babylonian.

Garlic is still in use today by practitioners of modern medicine. It is used both fresh and as an oil. The simplest treatment is to eat three cloves of garlic every morning, or take a teaspoon of garlic oil. Alternatively, mix crushed garlic in a little cold water and drink the mixture immediately. Another recipe is to cut and crush four cloves of garlic, place them in milk, and allow the mixture to sit overnight. Take the liquid while fasting the next day.

Pumpkin Seed

Pumpkin seeds contain a substance called piperazine. It acts by paralyzing the parasites, which allows them to be removed easily.

We can find piperazine commercially in pharmacy drug formulations or naturally, as we said, in the seeds of the pumpkin. This traditional method of deworming has been used around the world since man can remember. There are several effective traditional formulas, below we describe one of them:

Use one cup of peeled and mashed pumpkin seeds (about 80 seeds). Mix them with coconut water and two tablespoons of honey. Take the mixture

over three hours on an empty stomach. Do not eat during this three-hour period. At the end of the three hours, take castor oil in order to quickly eliminate the parasites.

Papaya and Papaya Seeds

Papain is a digestive enzyme contained in papaya that is capable of breaking down the outer layer of adult parasites. The milky juice of unripe papaya is a powerful agent for destroying roundworms. The adult dose is one tablespoon of fresh green papaya juice, an equal amount of honey, and three or four tablespoons of hot water. Two hours later, administer a dose of castor oil mixed with warm milk. This treatment should be repeated for two days if necessary. For children seven to ten years of age, half of this dose should be administered. For children under three years of age, one teaspoon (5ml) of the mixture is sufficient.

Papaya seeds are also useful for this purpose as they are rich in papain and caricin. For every tablespoon of crushed, fresh seeds, add an equal amount of honey. Take the dose of one teaspoon (5ml) daily in the morning or at night on an empty stomach for ten days, rest five days and repeat the cycle three times. We recommend the use of a purgative.

Ginger

Ginger not only helps to combat intestinal parasites but also reduces nausea and can help calm nerves. For hundreds of years, fresh ginger has proven to be highly successful in destroying intestinal worms. The most common way to consume ginger is raw or by infusion. Ginger extract may also be sprinkled on a variety of foods.

Propolis

Propolis is a resin like substance gathered by bees from the bark and leaf buds of trees, to help disinfect, build and maintain their hives. Propolis has been used for at least 3,000 years. Its use dates back to the Egyptians and the Romans, and remains in use today. To the Greeks we owe the name pro, meaning “before” and polis, meaning “city.” This translates as “defenses before the city,” or “defender of the city.” Thanks to the antibiotic action of propolis, which protects against the activity of viruses and bacteria, the hive is one of the most sterile places known to nature.

Many scientific studies have proven the antiparasitic activity of propolis, therefore it is recommended for treatment of: *Giardia*, amoebas and roundworms, and also for intestinal infections caused by gram-positive bacteria.

Take propolis, diluted in water or fruit juice, for treatment of parasites, for seven days, on an empty stomach. Use Propolis standardized at 30% in either propolis tincture or capsules. Take three drops per kilo of weight, or three capsules one half-hour before each meal. A seven-day treatment cycle should include seven days on, followed by seven days off; repeat three to five times to ensure complete elimination of parasites or bacteria. Repetition of the treatment is essential to halt bacterial reproductive cycles. By repeating the treatment at least three times, the effective elimination of parasites is ensured. The benefits of propolis are that it has no side effects, is well tolerated, and is highly effective.

Pomegranate Bark

Pomegranate bark contains an alkaloid known as punicine, which is highly toxic to earthworms. It is used by decoction of the root bark, stem, or fruit. The root bark is preferable because it contains a greater quantity of the alkaloid than the bark of the trunk. This alkaloid is also highly toxic to tapeworms. A cold decoction of root bark, preferably fresh, should be given in quantities of 90ml to 180ml three times per day (for adults), with one-hour intervals between cups. A purgative should be taken after the last glass. For children, a dose of 20ml to 60ml is appropriate. A decoction is preferably used to eliminate solitaires (tapeworm, *Taenia Solium*).

Carrots

Carrots are another effective home remedy for eliminating intestinal parasites in children. The chemical constituents of carrots attack pests by preventing their development. It is one of the most effective natural treatments for children, when given a small cup of grated carrots each morning until the problem desists.

Condiments

Seasoning plants are also powerful weapons to keep in mind in our everyday cooking. Since time immemorial, mankind has used them to control parasitic diseases. The following are most interesting because of their effects:

- Cayenne
- Cinnamon
- Cloves
- Paprika
- Pepper
- Tarragon
- Thyme
- Turmeric

Thank you Andreas and Miriam for sharing what I know will be very enlightening, not only to the families of children with autism, but to people all over the world suffering from mysterious symptoms consistent with parasitic infections. I want to share one interesting tidbit about parasite infections before we get into the FAQs on parasites and the parasite protocol.

“We have a tremendous parasite problem right here in the U.S. It is just not being addressed.”⁵ - Dr. Peter Wina, Chief of Patho-Biology in the Walter Reed Army Institute of Research in 1991. (The problem existed in 1991, and with modern globalization parasites are more prevalent than ever, yet they still not being addressed.

Parasite Protocol FAQs

I showed my family practitioner pictures of the worms we have found. He thinks they are not a parasite, but just mucous. How can I be certain?

It can be difficult to identify parasites, and most general practitioners are not trained to do so. Some parents have success with a local vet, who analyzes samples in their office. As a crude test, you can pour boiling hot water onto your specimen. If it falls apart, it is probably biofilm or mucous. If it withstands the wash, it is probably a parasite. Unfortunately, most stool analyses are notorious for false negatives. If you put hot water on parasites, they do not dissolve. Mucous dissolves in any water—hot or cold.

Is it ok to do the Kalcker Parasite Protocol during pregnancy?

No. Don't do any kind of detox or parasite protocol while you are pregnant or nursing. Any detox will release toxins into the blood stream that could potentially negatively impact the developing fetus or nursing baby. If you are planning on getting pregnant, it would be advisable to do whatever detox or deworming procedure before pregnancy.

When is it appropriate to stop the parasite protocol? In other words, does every child on this protocol need both the CD and the other parts of the Parasite Protocol or are there some that only need CD? This is a critical question since these are two protocols joined together and not every child may need both. We have done the Parasite Protocol and have never passed parasites so I am uncertain about my child.

Usually the Parasite Protocol is repeated for 12-18 months, sometimes less. The most important thing is to make sure that there are no fertilized eggs left that could hatch at a later date. As it is very difficult to know if there are remaining eggs, it is important to complete the 12-18 month

treatment. The Parasite Protocol is a complete protocol heavily researched to achieve the best results. The Parasite Protocol in conjunction with CD has been shown to be one of the most effective methods to heal regressive autism. Parasites are cyclical and need to be treated as such. You continue with the parasite protocol until no more parasites are seen—be that in behavior or actually in the stool.

What does the process of worms toxifying the brain look like?

Ascaris lumbricoides (roundworm), for example, produces at least five different toxins: Malondialdehyde, ammonia, histamine, formaldehyde, and morphine. Malondialdehyde is responsible for oxidative stress, and is mutagenic.⁷ Ammonia, which can lead to hyperammonemia, can be responsible for seizures, tremors, flapping, poor coordination, growth retardation, combativeness, lethargy, and other symptoms. Comparing hyperammonemia with the symptoms known as regressive autism yields overwhelming similarities. Formaldehyde has been shown in some laboratory studies to affect the lymphatic and hematopoietic systems. Morphine inhibits nerve reactions and slows intestinal peristalsis. It also keeps the immune system from finding parasites, and from doing anything about them. This is a reason we often can't identify parasites. We only find parasites when the infection is acute, not chronic. This is because IgE or IgM reactions are altered by morphine. Histamine can lead to chronic inflammation in the body.

As a family, we expect to be doing the CD and parasite protocols for some time. How do we know when to stop? Should we wait until we have a few months of no symptoms?

We do it until full recovery is reached.

We have been doing full oral dose CD and the Parasite Protocol. We are seeing some amazing changes, but we don't see worms. Are we doing something wrong?

CD affects parasites of different sizes. You may be clearing parasites that would be undetectable to the naked eye, or nematodes that are very small and therefore hard to detect in the stool.

Why is my child so deficient in vitamins?

As a general rule, most children with autism are deficient in vitamins. In the first place many pathogens feed off of vitamins intended for the host, and helminthes especially love B12 and iron. Since many of us, especially those of us living in cold climates, do not receive enough sun, we are deficient in vitamin D. Calcium is used by the body as an antagonist for acid inflammation; all acidity in the body is compensated by calcium, and therefore it is usually low with the kids on the spectrum. As our children heal, these deficiencies fade and homeostasis returns.

I just gave mebendazole, Not pyrantel this AM. What should I do?

Don't stress. Tomorrow is a new day, and you can begin again. Give mebendazole tomorrow as that is tomorrow's scheduled dose.

Aren't there some parasites that are good for us and help our immunity and gut healing?

A parasite is defined as a living being that is dependent on a host for survival, to the detriment of that host.

For those of you that continue the parasite protocol thru the new moon, how many days do you stay on it? We are now 3 days past the new moon.

Some people treat month long. The Kalcker protocol itself is 18 days long. Each family has to find a protocol that suits them. Some folks use mebendazole 3 days before the new moon, the day of, and three days after. Other families use herbal remedies on the off days. If you consult with a healthcare provider, this would be a question to ask them. Each child is unique and has different needs when it comes to treating parasites.

Why are live worms not digested? Poisons?

Live helminths are protected by a glucosoid mucous with positively charged ions, making them resistant to stomach acid, or digestive fluids. When they die, the mucous separates from the helminth, leaving them open to digestive enzymes. We often see the mucous, as well as semi-digested helminths, in the stool of people using the protocol.

Does everyone in the family need to do the parasite protocol at the same time? With or without CD, enemas, diatomaceous earth, Rompepedras/stone breakers, and castor oil? My (neurotypical) daughter will take the anti-parasitic drugs, mebendazole, and pyrantel pamoate, but not these other parasite protocol ingredients, which is why I ask.

Your entire family needs to do the protocol at the same time, or you risk reinfection. Neurotypical family members should do as much of the protocol as possible. If someone will only take the meds, so be it. However, I feel the more the better.

Do I need to separate the neem from CD?

Yes, I give neem with food, and would separate from CD by at least an hour.

If I don't see any worms, does that mean my child doesn't have parasites, or are we just missing the eggs?

Just because you don't see parasites doesn't necessarily mean you don't have any. For example, *Toxocara canis* or *Toxocara cati*, which are very common in our pets (and can infect humans as *Toxocariasis*), are not expelled in fecal matter. Some families on the protocol did not see actual worms until month seven.

To what extent do the rest of us need to do the CD protocol? Is it the same as our ASD children? And, is it necessary to do the whole nine yards with the full Parasite Protocol for the whole 12 months? Are there any shortcuts for healthier individuals?

All of the family members, including pets, need to be on anti-parasite treatment for a year and thereafter lifetime maintenance is best. As mentioned before, with neurotypical family members, you do as much as you can, but the anti-parasitic medications are crucial to preventing reinfection.

Is diatomaceous earth a binder and therefore must it be given apart from food, medication, and supplements?

No. It is not a binder. It is fine to give with or without food, and does not affect medication or supplements.

Do you have to do the Protocol forever if you are fully recovered or is there a maintenance plan?

When the child gets to where you want him, you can start to pull things. Then, we do maintenance dosing of CD; one dose on Monday and one on Thursday. We do the Parasite Protocol for a week every three months since we live in a world of parasites. It is good preventative medicine for all. Ocean water is also good for all of us. See Chapter 13 (page 319) for the complete maintenance plan.

Does CD kill parasites?

Yes. CD kills amoebas, *Giardia lamblia*, and other smaller parasites. CD does not kill the larger macroparasites due to their higher oxidative stress resistance.

When is it ok to start the parasite protocol prior to reaching full dose of CD?

Healing autism is a marathon not a sprint. The point is to heal with the least amount of aggravation. Therefore, you should be at a full dose of CD before starting, and have added in enemas and baths. If you are seeing Herxheimer reactions then don't start yet. Obviously, everyone must make his or her own decisions.

Where in the gut do helminths live? Do CD enemas (300 ml) reach them?

It depends on the type of helminth. There are more than 300 different helminths so they could be in many different places. However, most live in the small intestine. Some lay their eggs in the rectum. The size of the person will dictate how high an enema will reach.

Do you tell your kids that they have worms? Do you show them? Are they scared? My son is very interested about everything in the world and asks 4,000 questions a day. What do I tell him?

How to handle this situation is unique to each and every family. There is no right or wrong answer here. The following are some suggestions we have received from families on the protocol:

Nope. My husband was just telling me a story from when he was a kid about another kid who got teased all the time about having worms. He still remembers it. So, no I will not tell my kids.

My kids (ages 10 & 7) know about worms because we have talked about their Lyme disease and other symptoms for a long time. I think it helps them understand why they feel grumpy or sick and why the enemas help. But, I think every child is different. The risk is that they might tell their friends. I tell them that it is private information and that pretty much everyone has worms but some people have more and get sick from them. And, I told them that even most doctors don't know this but slowly people are learning and getting smarter about this and a good diet, etc... My boys like to see the big ones, and try for new records. They like to show their brother the records. I think that's a boy thing.

I have a 10 year-old, and I tell him that we have parasites. I have not showed him anything, I ask him to leave the room before I start to sort the poo. ;)

My son had another bowel movement FULL of worms, pinworms—and I mean hundreds. This is only our second day on CD (1/2 drop in 8 fl. oz.) so a bit thrown to the deep end. Has anyone else had a start like this? How did everything go from there on?

I have seen it a handful of times. I get VERY excited about this. Everyone has autism a bit differently. But, if we see worms early, in many cases the recovery begins early too. That may be the case for your child.

I understand that even organic produce needs to be washed properly. What is the best way to wash my fruits and vegetables?

The Ascaris eggs are resistant to UV, and can withstand a pH from 2 to 11.5. Eggs are killed by heating to approximately 60°C (140°F). Spray your fruits and veggies with CD spray. 10 drops per 1 fl. oz., of water, no need to rinse off.

Anyone notice a huge growth spurt after starting the parasite protocol?

Many parents have reported their children resumed growth as well as weight gain. No real surprise considering they are getting back what the parasites were taking from them.

Do we need to treat our pets if they are taking heartworm medication?

Yes, heartworm medication does not address intestinal parasites, which can infect us and our children. We need to deparasitize our pets, as well as ourselves.

We put “cascara sagrada” in place of castor oil because for my son and me, it is difficult to take the oil. Is it ok?

Cascara sagrada is not the same thing as castor oil and is not part of the protocol. An alternative solution to liquid castor oil is to buy castor oil in softgels. You will need many but it does solve the taste problem.

My son is very high in *Trichinella spiralis*, which is a roundworm from undercooked meat or pork. It’s supposed to be rare in the US, so I’m wondering how my child would have picked this up. Any ideas? No undercooked meat here for the kids, and we don’t eat pork.

At this moment we have not seen a relationship between *Trichinella spiralis* and autism. It may be a multi-parasitic infection, or a misdiagnosis. Apart from the standard protocol, your child might need something else. I would consult the practitioner for the appropriate dosage, and only if your child has a definite *Trichinella spiralis* diagnosis.

How do we know if there are parasites in the brain, and what can we do about it?

Parasites in the brain are very rare. (According to the CDC, *Cysticercosis* is a parasitic tissue infection caused by larval cysts of the pork tapeworm. These larval cysts infect brain, muscle, or other tissue, and are a major cause of adult onset seizures in most low-income countries. An individual acquires cysticercosis from ingesting eggs excreted by a person who has an intestinal tapeworm.)⁶ Larvae can be seen on a scan. Many people assume that the problem causing behavioral issues, or mental issues, must be located in the brain. However, the problem likely exists elsewhere. If the blood contains toxins, this will affect the brain. For example, if you ingest too much alcohol, your brain, nervous system, etc. will be affected, but the problem is not in the brain itself. We can think the same way about parasites. The chemicals that they produce will have effects on the brain, however, rarely will the parasites be located there.

Do parasites cause autism? If so, why doesn’t every child with parasites have autism?

Regressive autism has been called parasitological vaccinosis by Dr. Andreas Kalcker. This is a cross reaction between a child with parasites that receives certain vaccines. Further research is needed for a definitive answer.

Why don't normal lab tests find parasites?

Generally speaking, lab tests need to find living creatures or eggs. The eggs are only present certain days of the month, and even on those days they won't necessarily be present in a particular stool sample. Living worms are extremely rare in stool because they are generally passed only once they die. They are very good at avoiding being excreted in stool. Furthermore, if they die internally, they can be partially or fully digested within our bodies before being expelled.

Are some labs better than others? Is it worth taking a stool sample to a vet if they send it out, or only if they look under a microscope?

We haven't found a lab that consistently finds parasites. Metametrix™ has identified parasites, but in our experience and the experience of the families I have helped, we have not found a lab that is consistent. It is only worth sending a sample to a vet if they are identifying parasites with a microscope.

Combantrin® is available in tablet and liquid form. Which is better?

I hate the liquid and never use it. It may have added colors and flavors. If you absolutely can't find it without additives, I would use only mebendazole instead of using pyrantel with additives.

Why are there no systemic drugs in the protocol?

They are not needed with this Protocol. Treating parasites without systemic drugs is much safer and easier on the body. The suggested treatments using mebendazole and pyrantel pamoate are nearly unabsorbed by the body, meaning that we do not add more toxins to an already overloaded body.

When does a child need systemic drugs?

This is necessary only for certain parasites like cysticercosis, which is caused by tapeworms, hookworms, *Trichinella spiralis* (from pork), or other hard to kill helminths. These may be identified by a blood test. The practitioner may prescribe systemics depending on the situation.

Should I start on the new moon if my child's behavior declines then?

The full 18-day Kalcker Parasite Protocol always starts before the full moon. However, some parents have found that by treating parasites for 3 days over new moon that they are able to get through the new moon as well as the full moon with limited issues if any.

Is there a time in the moon calendar, where it is normal that there are no worms in the stool? (We don't have any at new moon.)

Further research is necessary to determine this definitively.

Appendix 9

Blank Kalcker Parasite Protocol Chart

The next page contains a blank Kalcker Parasite Protocol Daily Chart identical to those found on pages 199 through 217. You are encouraged to copy this chart for use in your parasite protocol planning. Setting the copy machine to enlarge at 125% should fill a standard letter-sized page.

Time	Meal Time	CD / CDS / CDH	CD / CDS / CDH Bath	CD / CDS / CDH Enema	Ocean Water	Diatomaceous Earth	Lepidium Latifolium Extract (Rompepedras / Rp)	Pyrantel Pamoate (Combantrin®)	Mebendazole	Castor Oil	Neem	Probiotic
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