

PARASITES and the Elimination Protocol I did for myself Rev 1-22-24. This is my own plan and is referenced for educational purposes but is not to be considered official medical advice.

TLDR: If you don't have time right now to read all the stuff below, here is a brief summary of what I did for myself:

I used both Nitazoxanide and Ivermectin from GrantPharmacy.com or other source, and Fenbendazole which is easily available from farm supply stores. (All these drugs have been tested in humans and have very high safety margins. I'm not aware of side effects at normal doses except those from the elimination of parasites—see below.)

Dosage:

Fenbendazole: goes by weight: pretend you are a horse and use the amount for your weight horse or dog.

Ivermectin: Average adult 24 mg daily

Nitazoxanide: 500 mg twice a day.

1. **Getting Started: You can start with any drug.** Because it was readily available, I began with Fenbendazole as Panacur-C for horses that comes in a big plastic syringe pack for squirting in the mouth. (There is also same for dogs.) These are generally readily available at farm stores. I dosed myself at the dose given on the syringe for animals. It goes by poundage. I squeezed the white cream at a dose for a 160 lb horse (I am roughly that weight) into a glass and added water, then gulped it down. Some sticks to the side so I add more water, stirred, and repeated. You can just squirt the dose into your mouth with the syringe like they do animals. Once you have started, then start cycling. A cycle is 3 days on /5 days off of the medicine. So the cycle length is 8 days. Do that for 8 weeks.
2. **Look at your stools and your general well being.** If you have not seen any stool changes switch drugs after 4 weeks. If you have seen stool changes then keep going for a total of 8 weeks. Stool changes are black specks, visible parasites, bubbling floating stools, watery possibly explosive stools, black copious stools that revert to brown after a couple days. Stool changes usually start 2-3 days after the dosing. Some people will experience a dramatic change in waist size—like debloating. Any such changes mean you are on the right track.
3. **The 8 week mark:** After 8 weeks of this I was still having changes in my stools so I kept going on the same drug. If I didn't see anything in my stools at that point I would do another 8 week course with the other drug. I use Nitazoxanide as one of the drugs if you have taken the vaccine, have symptoms of shedding, or haven't seen any changes on the other two drugs. After that, try lengthening out the off time of the pattern. So go from 3 days/ 5 days off to 3 days on/ 7 days off. If you do not have any problems then every few cycles increase the time off until you get down to twice a month dosing. You may be able to do once a month dosing but that may take a while if you were riddled with parasites like I was.
4. **Watch for these symptoms.**
 - a. Cold or flu like symptoms—sneezing eye watering, wheezing, runny nose, stuffy nose, muscle aches, fevers chills, rash, malaise etc. result from killing too many parasites at once. This means you have to go slower. If this happened with the very first dose of medication,

cut the dose in half for a few cycles and slowly increase dose to above amounts. If you started having symptoms when you lengthened the cycle by increasing the off time, do back to fewer days off between doses. This allows less time for baby parasites to hatch out. Symptoms are due to the fact that you have killed the mother parasite which puts out a chemical that stops babies from hatching out. A large hatch will mean a lot of dead parasites and your body reacts with release of histamine and cold and flu like symptoms.

- b.** Sugar cravings: Sugar cravings are another sign of too many baby parasites hatching out. If this happens restart a new cycle even if it isn't time. I cannot get to one cycle a month even after a year without getting sugar cravings.
- 5.** When you get your cycling to twice a month, make sure the "on" part of the cycles are begun on the full and new moon. If you are down to once a month do it on the full moon—because that is the maximal parasite hatch time. (I know it sounds crazy but it is true.)

Other General Principles of Parasite Elimination.

This is not intended to take the place of competent medical advice, but sadly most physicians in America do not believe parasites infect humans in first world countries. A full video discussion of parasites by me and Dr. Ardis is available by signing up for the weekly podcast at TheMedicalRebel.com The basic principles to consider with parasitic infestation are these:

- There are a variety of parasites that infect humans—some large and visible to the naked eye, some microscopic. Although not generally recognized, it appears that most humans have one or more parasites—even in modern first world countries. If your animals need “deworming” so do you. In a recent autopsy study of Multiple Sclerosis (MS) patients 100 % who died from the disease, had parasites in the brain and spinal cord.
- Parasites may give you no obvious symptoms, but can explain many otherwise unsolvable problems—dietary deficiencies, inflammatory disease, night sweats, bloating, other digestive issues, abdominal pain, sweet and food cravings, fatigue, muscle and joint pain, skin rashes, (especially rosacea a flushing pink facial rash), anal itching, vaginal itching, fever, anemia. In my opinion, before immunosuppressive drugs are started, anyone with autoimmune disorder should be treated with some parasite protocol. Cancer may be caused by the chronic egg sac inflammation or may actually be confused pathologically with egg sacs. How many deaths might have been avoided by pursuing this line of inquiry?
- Parasites are everywhere, and it is impossible to completely avoid infection. This is not just about cleanliness. Some parasites can be acquired from undercooked or raw food, but many are in the environment. If you have animals you have parasites.
- Parasites all have lifecycles that include egg sac production. Once infected, the mother parasite will lay between 20,000 – 200,000 eggs a day that are “encysted” in an egg sac in various parts of the body. As long as the mother is alive she produces a chemical that inhibits eggs from hatching. But once the mother is killed, eggs will hatch and reinfect the gut or liver or wherever they naturally live. To rid yourself of parasites you need to treat both the parent and the egg sacs. Many cases of chronic inflammatory disease are the result of the body trying and failing to destroy the egg sacs. Obviously, left untreated you will be hosting more and more egg sacs and the body will become more and more inflamed trying to rid itself of these foreign invaders.

- Effective treatment to treat both the adult parasites and egg sacs requires cycling the treatment. Constant treatment with any drug will not rid you of the egg sacs and your body inflammation will continue.
- You can be tested with stool specimens for parasites, but given the prevalence of unrecognized parasitic disease, I am not sure that is worth the cost unless you have failed to benefit from treatment. Or you might want to pay for testing to monitor progress.
- A number of drugs have been used for treatment. Most drugs have an excellent safety profile. Newer drugs are being developed but many of these do not have testing for safety on humans. I believe, for this reason, older drugs are better to choose.
- In the absence of known inflammation or medical issues referable to parasites, adults should probably treat themselves for two months using one of the listed drugs and preferably varying it with another drug with slightly different action. I am showing you all the options below, but here is what I did, and am continuing to do.
- For smaller children, less time may be needed and at less dose. I would try to find a competent pediatrician for this.
- Lifetime maintenance is required, and I know doctors who treat themselves and their families monthly.
- If you have MS or other neurological issues be aware that parasite die off may cause inflammation and swelling of the brain. It is a good idea to start treatment under the care of a physician, but if not possible, consider beginning with half dose for the first cycle and be prepared to visit a physician if you develop significant headache, blurred vision or any unusual/ new neurological symptoms.

Overview of Some Other Drugs that treat parasites:

Albendazole: Specifically for brain cysts/ parasites. For adults over 120 pounds, 400 mg twice a day for 5 days. Stop for any headache or blurred vision that could indicate brain swelling from killing worms. In this case consult a physician.

Drugs that paralyze roundworms but won't kill them

Pyrantel Pamoate. Use dosage on the box, Sold for pinworms OTC in pharmacies.

GI Cleanse: This herbal formula of Wormwood (Artemisia), Pumpkin Seed, Papaya Seeds, Black Walnut hull, and Cloves has no downside, and can be used for a six week treatment. Use twice a day on an empty stomach. This may be a cost effective readily available maintenance program once you are sure you have killed the intracellular and encysted or central nervous system parasites. For younger people with less risk of deep seated cysts this may suffice for a 2-3 times a year cleanse. See Shop site at TheMedicalRebel.com.

| Praziquantel ^{1,2} | |
|-----------------------------|-------------|
| Drug and dosing | Weight (kg) |
| Not recommended | <15 |
| 1 tablet (600 mg) | 15-18 |
| 1 ½ tablets (900 mg) | 19-25 |
| 2 tablets (1200 mg) | 26-30 |
| 2 ½ tablets (1500 mg) | 31-40 |
| 3 tablets (1800mg) | 41-50 |
| 4 tablets (2400 mg) | 51-69 |
| 5 tablets (3000 mg) | ≥70 |

Some Official Recommendations from our Medical Authorities

Here is the CDC guidance for parasites considering refugees coming to America:

Presumptive parasite treatments: albendazole (for soil-transmitted helminths), 400 mg for refugees ≥2 years old, 200 mg for children 12-23 months of age; ivermectin (for Strongyloides), 200 µg/kg once a day for 2 days for adults and children weighing ≥15kg; and praziquantel (for schistosomiasis), 40 mg/kg divided in 2 doses for adults and children ≥4 yo.

<https://www.cdc.gov/immigrantrefugeehealth/guidelines/overseas-guidelines.html#pt-table2>

https://www.ema.europa.eu/en/documents/variation-report/panacur-aquasol-v-c-2008-x-03epar-assessment-report-extension_en.pdf