



Protocol and how it works!

This pdf contains explanations and FAQ on the book "Outsmart Your Cancer", by Tanya Harter Pierce.

Tanya Harter Pierce has a master's degree in clinical psychology and has a background as a marriage, family, and child counselor. When one of her family members was diagnosed with cancer and considered "incurable" by conventional medicine, she began searching for alternative cancer treatments. When she discovered how many successful non-toxic methods there were available for the treatment of cancer, and that they often had a higher ratio of successful outcomes than the current conventional treatments, she was shocked!

In this literature, she brings up:

Explanations on how Protocol works, page 2. **Answers to frequently asked questions about Protocol**, page 6. **And explanations how Protocol works on anaerobic cells**, page 27. Everything to clarify any doubts.

The book is marketed and sold by the Swedish company MedNature AB and has the author's permission to publish this literature.

Does Protocol[®] Kill Cancer Cells?

(And What Do Wet Wicked Witches Have To Do With It?)

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**Author of: *OUTSMART YOUR CANCER:
Alternative Non-Toxic Treatments That Work***

The Killing Confusion

Many people today are using the easy-to-administer brown liquid formula called Protocol to treat their cancer. But, since physicians may be legally at risk if they help patients use a non-FDA-approved treatment, many doctors are unable to get involved. This makes Protocol a self-administered home approach. As with any self-administered approach, once in a while a misunderstanding about the product may surface among the public. One such misunderstanding is that, since Protocol is not toxic, some people think it does not directly kill cancer. They think the body's immune system kills the cancer, or that there is some other way that Protocol gets the cancer to eventually go away. So, what is the reality? DOES Protocol kill cancer?

The answer is – YES, Protocol DOES directly kill cancer cells! There are various reasons we know this, but it was even proven by the National Cancer Institute when they performed tests on Cancell back in 1990. (Cancell was the original name for Protocol Formula 50.) Those tests were done in vitro on eight different cancer cell lines – leukemia, central nervous system cancer, small cell lung cancer, non-small cell lung cancer, colon cancer, melanoma, ovarian cancer and renal (kidney) cancer – and they all achieved substantial cancer cell death within 48 hours. (See Chapter 11 of OUTSMART YOUR CANCER for all the details about the NCI tests.) There was no immune system involved in these tests, just cancer cells and Cancell. Thus, while a person is always better off with a strong immune system, the National Cancer Institute actually proved that Protocol does directly kill cancer and does not rely on a person's immune system to do so.

Yet, there is still some lingering confusion about how Protocol gets cancer to go away, and this confusion appears to result from the following two confusing facts:

1) Protocol is not considered "cytotoxic" 2) Cancer markers often rise dramatically when a person uses Protocol

Let's first look at confusing fact number one. It is true that Protocol is NOT a toxic treatment and does not kill cancer cells in a cytotoxic way. "Cytotoxic" simply means "toxic to cells," and drugs that are toxic to cells usually are toxic to any cells they come across. Chemotherapy drugs are a good example and are classified as cytotoxic because they are toxic to cells they come in contact with, whether they are cancer cells or normal healthy cells. That's why chemo treatments often damage so much of a cancer patient's body, not only causing visible damage to hair growth on the head, but also causing invisible, sometimes life-long damage to tissues in the liver, kidneys, heart, intestines, nervous system, and other parts of the body.

The only reason chemotherapy drugs are used at all is because they tend to have a more profoundly toxic effect on fast-growing cells of the body (like cancer cells or hair follicle cells) than other types of cells. When chemotherapy drugs are administered to someone with cancer, the goal is to quickly poison as many of the cancer cells in the person's body as possible without killing so many of the healthy cells that the person dies. This poisoning process, though not usually curative in the long-term, can often result in fast cancer die-off in the short-term. (Often, along with the death of countless healthy cells as well, unfortunately.)

(*FDA = US Food and Drug Administration)

Protocol, on the other hand, works differently. It is not cytotoxic, meaning toxic to any cells it comes across. It employs a slower process that involves interfering with the natural energy production of each cancer cell in the body while not impairing the functioning of any normal healthy cells. When using Protocol, the cancer cells become more and more depleted of energy until their membranes eventually cannot hold themselves together any longer and the cell membranes burst apart. In biochemistry, this process of bursting is called “lysing.” Over time, with the effective and diligent use of Protocol, each cancer cell in a person’s body eventually falls apart. Harmless cancer cell parts (which are mainly basic proteins) are all that is left in place of the cancer cells that used to be there and these will be processed out of the body as cellular debris.

Protocol starts interfering with the energy production of cancer cells in the body right away, but all the cancer doesn’t break down and lyse away at all once. It is a slow process, much like starvation, where some cancer cells will start to lyse immediately when a person begins Protocol, but it will take weeks or months for whole tumors to finally disappear.

The fact that Protocol is not cytotoxic is actually a good thing, because if it were, normal healthy cells would die along with the cancer cells. And the fact that Protocol takes a while to make all the cancer go away is also a good thing. This gives the body time to process out the broken down cellular debris and remove it in a way that does not overwhelm the body’s cleansing systems, such as the lymph pathways, the kidneys, the liver, etc.

However, since Protocol is not cytotoxic and there are no whole dead cancer cells left over after Protocol is done with them, some people wonder if we can still say that Protocol actually kills cancer. In other words,

How can we say that something kills cancer cells when there are no dead cancer cells left over as a result?

The answer is that this is simply a semantic conundrum! And it is also where “Wet Wicked Witches” come into the story.

Wet Wicked Witches

One of the great things about truly classic movies is that just about everyone has seen them. This is the case with the beloved film, *The Wizard of Oz*. In the *Wizard of Oz*, as you may remember, the wicked witch was immune to all the normal ways of being killed. None of the normal ways of killing someone – like shooting, stabbing, strangling, or poisoning – would work on her. But, like all evil villains, she had a secret weakness. This was revealed at the end of the movie, of course, when it was discovered that the only way to kill the wicked witch was to pour water on her! When the characters in the movie finally got her wet, she melted down into a lifeless puddle of goo. There was no whole dead witch lying on the ground after she had been wetted with the water as there would have been if she had been shot by a gun, stabbed, poisoned, or strangled. Instead, after getting wet the wicked witch basically lost all her structure and turned into a puddle of goo, or harmless wicked witch parts.

In a similar way (though not through the use of water), Protocol causes cancer cells to fall apart and break down into little puddles of goo. Like the wicked witch in the *Wizard of Oz*, there is no longer a whole dead cancer cell left over after Protocol is done with it. There are only harmless cancer cell parts, or puddles of goo, so-to-speak, that used to be deadly cancer cells. (For more a more detailed scientific explanation of how Protocol causes cancer cells to lose their structure and fall apart, see Chapter 9 of *OUTSMART YOUR CANCER*.)

If the characters in the *Wizard of Oz* movie had been able to kill the wicked witch by shooting her with a gun, stabbing her, strangling her, or poisoning her, there would have been a whole dead witch lying on the ground afterward, and that would have been similar to what chemotherapy does to cancer cells. But the witch wasn’t killed in a conventional way. And that begs the question: If there was no whole dead witch lying on the ground after she was splashed with water, was the wicked witch really killed? The answer is . . . **OF COURSE SHE WAS!** (As evidenced by the fact that there was no longer a live wicked witch walking around and doing evil things anymore and also by everyone in the movie dancing around, singing, and celebrating her demise.)

So, I like to think of lysed cancer cells as being like little wet wicked witches. There are no whole dead cancer cells after Protocol is done with them, but the cancer cells have nevertheless been killed. In fact, they’ve been **SO** killed, they are no longer there in their previous form at all! Thus, the analogy of “wet wicked witches” answers the first confusing fact

and explains how, even though Protocol is not considered cytotoxic, it does in fact kill cancer cells by causing them to fall apart (or lyse.)

But what about confusing fact number two? In other words,

**If Protocol does cause cancer cells to die, then why do
cancer markers often rise dramatically when the cancer cells are lysing?
Shouldn't the occurrence of cancer die-off make the blood markers go down**

Interestingly, this apparent contradiction is also explained by the unique way that Protocol causes cancer cells to die.

Cancer Markers and Protocol®

As Protocol causes cancer die-off, cancer markers often rise dramatically. It is completely reasonable for this to be confusing and alarming to many people and could make them wonder whether Protocol is really killing their cancer or not. To understand this issue and how it relates to lysing, however, we must first understand cancer marker blood tests.

Cancer marker blood tests don't directly measure how many active cancer cells are in a person's body. Rather, these blood tests simply measure markers that are some type of protein, enzyme, or hormone-like substance which the cancer cells release in small amounts. Keep in mind that not every type of cancer releases a marker into the blood that can be tested for. Thus, blood marker tests don't exist for every type of cancer. Also, the cancer marker blood tests that are being used today are not always accurate. But, having said that, as a general rule, when cancer markers are available for testing, the marker numbers tend to rise as the cancer grows and spreads throughout the body just because more active cancer cells tend to correlate with more markers being released into the bloodstream.

The use of chemo or radiation will generally cause blood marker numbers to go down as the cancer dies off. In fact, dramatic lowering of blood marker numbers often results from conventional treatment because (a) toxic treatments can kill cancer cells quickly in the short-term, and (b) this type of cancer die-off results in whole dead cancer cells, which are quickly dealt with by the body in a way that gets rid of the cancer markers along with the dead cancer cells.

But, when Protocol causes cancer cells to die, it does so in a different way from conventional treatments, as already mentioned. Because Protocol kills cancer cells by causing them to lyse and fall apart, this process appears to cause cancer cells to actually release their cancer markers back into the person's bloodstream before triggering the body's mechanism for dealing with the broken-down cancer cell parts. In fact, the faster one's cancer responds to Protocol, the quicker one's cancer marker number may rise because the cancer cells are releasing their markers into the bloodstream as they lyse and this can sometimes be at a rate that is faster than if the cancer were actually growing. This is opposed to the way that conventional cytotoxic drugs, like chemo, cause whole dead cancer cells as a result, which hold onto their cancer markers somewhat rather than releasing the markers immediately through bursting as with Protocol.

It also explains why people using Protocol for cancer are sometimes in the confusing situation where scans or visual observation of a tumor may show that the tumor is actually regressing in size, while the blood marker test results for their type of cancer are, at the same time, rising. In fact, it is not uncommon for people using Protocol for cancer to experience a rise in their cancer markers for many months before the markers start to go back down. How long it takes for the blood marker numbers to come back down to a normal range will vary from person to person, depending on how long it takes for most of their cancer to lyse. This can depend on how much cancer the person has, whether their cancer is fast-growing or slow-growing, and also how effectively or aggressively they are using the Protocol formula.

Unfortunately, this puts people using Protocol® in the unenviable position of having to realize that their cancer marker results could rise as their cancer is breaking down and going away. And, since doctors are generally only familiar with toxic treatments, and their own experiences have shown them that when their treatments work, the markers always go down, people using this unique formula often have to contend with doctors thinking their cancer is growing because of rising cancer markers – when it is actually going away! And, at the same time, many people start thinking that Protocol must not actually kill cancer because, if it did, then those markers would go down. The fact is that blood markers will eventually go down when a person uses Protocol, but it usually takes longer than when toxic treatments are used.

It is important to be clear here that whether you are using Protocol or any other treatment for your cancer, **you should NEVER judge your progress by blood tests alone.** Cancer marker blood tests are notorious for being inaccurate and that even includes the highly touted PSA test. (For more details about the PSA, see Chapter 20 of OUTSMART YOUR CANCER, titled What Men Must Know about Prostate Cancer, the PSA, and Hormone-Blocking Drugs.) To determine whether one's cancer is regressing rather than progressing, one should ALWAYS use a variety of input that includes other diagnostic tests such as scans, along with clinical symptoms or any possible visual evidence of tumor reduction.

Whether the Protocol formula will be effective enough for any particular person to achieve full recovery will depend on a number of factors, particularly on how effectively the person is taking the Protocol and how much their body has already been damaged by their cancer or conventional toxic treatments. And some cancer cases may not respond optimally to Protocol for reasons that are not well understood. So, anyone using this product for cancer should monitor their progress diligently, using scans or other diagnostics whenever possible, as well as watching for signs of lysing, to make sure the formula is working for them. No one should take Protocol and simply assume it is going to work effectively for them. More study needs to be done on why some cancer cases seem to respond better than others, and some people appear to require a higher dose than others in order to achieve full recovery. Being sure to cut out all refined sugar and alcoholic drinks could also make the difference between recovery or not.

However, when Protocol IS working, it most definitely IS killing cancer cells – and many, many people, from toddlers to the elderly, have achieved full recoveries and returned to a cancer-free state through the use of this truly remarkable product!



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Frequently Asked Questions About Using Protocol[®] for Cancer

By: Tanya Harter Pierce

NOTE!

Many of these questions are also answered in Chapter 12 of *“OUTSMART YOUR CANCER”*, along with more information. So please read that chapter in addition to the information presented here for a full understanding of how to use Protocol for optimum results.

Disclaimer:

These FAQs have been answered by Tanya Harter Pierce, who is not a physician and does not treat cancer patients. She does not sell Protocol or any other supplements or treatment products of any kind. She merely compiled answers to these questions over ten years of investigating this remarkable approach to treating cancer and interviewing cancer patients and other Protocol experts. Protocol is an alternative approach that is not condoned by the FDA or mainstream medical doctors for any use, and the information in this section does not represent any claims made by the manufacturers or distributors of Protocol.

What is Protocol?

Protocol is a brown liquid formula that was developed by a brilliant American chemist named Jim Sheridan. It was originally called Entelev[®], then Cancell[®], then Protocol[®]. The original versions, Entelev and Cancell, were never sold, only given away to cancer patients during the 1980s and 1990s. The formula finally became a dietary nutritional product on the market at the beginning of the year 2000, and was then sold as “Protocol Formula 23” (the original Enelev version) and “Protocol Formula 50” (the original Cancell version). Jim Sheridan designed the formula to kill malignant cancer cells of all types by causing them to “lyse” or fall apart.

What is “Lysing?”

A very brief description is that Protocol interferes with how cancer cells produce energy for themselves to the point where the cancer cells can no longer hold their membranes together and their membranes burst. Thus, the cancer cells fall apart and die. (See Chapter 9 of *Outsmart Your Cancer* for a complete, detailed scientific explanation of how it works.) Some people refer to a person as lysing when that person sees signs of the lysed material coming out of their body. But this is not really accurate. The lysing does not occur as the dead cancer cell parts are coming out of the body, it occurs when the cancer cells first bursts apart. In other words, the cancer cells lyse. If a person sees mucousy material coming out of their body, this is simply a sign of lysing that has already occurred on the cellular level, not the lysing itself. Mucousy material and some other symptoms discussed in Chapter 12 of *Outsmart Your Cancer* are simply signs of lysing, or may be called lysing symptoms. This is akin to detoxing symptoms when a person goes through any detox program. But the lysing itself refers only to when each cancer cell bursts and dies.

Is Protocol all natural?

No, Protocol is a combination of natural and synthetic ingredients. This exact combination of ingredients is required for it to reliably act as a catechol as Jim Sheridan designed it to work. But it is truly a non-toxic approach and considered less toxic than a baby aspirin a day.

Is Protocol vegetarian?

Yes, it is completely vegetarian and contains no animal products.

Is Protocol Homeopathic?

No.

Have any human clinical trials been performed on Protocol for cancer?

Unfortunately, no. The National Cancer Institute (NCI), the FDA, and the American Cancer Society (ACS) are not interested in studying this formula, even though in vitro studies on cancer cell lines performed by the NCI back in 1990 were extremely successful. (In vitro tests are done outside the body, usually in some form of petri dish, they are not done using live bodies and 9 graphs of the official results are presented in Chapter 11 of Outsmart Your Cancer.) Clinical trials involving human cancer patients are very expensive to perform and usually can only be funded by pharmaceutical companies with deep pockets. But Big Pharma is not interested in Protocol because they can't patent it and thereby make huge profits on it. Thus, when it comes to how well people with cancer do on Protocol, all we have to go on are anecdotal cases where Protocol was used by real life cancer patients, though not under controlled circumstances. Luckily, there are many such anecdotal cases, and many full recoveries due to the use of Protocol alone for cancer. To find out the details of how the ACS, NCI, and FDA were all involved in suppressing Jim Sheridan's formula and keeping it from being officially studied in clinical trials, please see Chapter 11 of Outsmart Your Cancer. (Also, you can read 15 real-life cases in Chapter 10 as well as hear 8 more from people in their own words by listening to the Audio CD at the back of the book.)

Does Protocol only bring people into "remission" or can it really CURE people of cancer?

Protocol is most accurately looked at as a curative approach. There are enough cases of people who have successfully used Protocol to get rid of all signs of their cancer and then never suffered a recurrence even many years after they stopped the Protocol, for us to know that complete cures are possible and should be the goal with this formula. This is different from conventional medicine, which often makes remission the only goal possible because their toxic approaches are rarely able to bring about complete long-term cures. However, having said this, I believe that remission is a necessary step on the path to complete cure. Please read the following explanation.

"Remission" is a common term in oncology and simply means that the patient in remission no longer displays any observable clinical signs of cancer and there is no longer evidence of any remaining cancer according to diagnostic tests. This is what I call the first "all clear" point for the patient. Unfortunately, this is also generally where conventional treatments stop because they are too toxic to keep giving them to the patient. The problem with stopping treatment at this point is that a person is rarely cancer-free when they reach this first all-clear point, or state of remission, as oncologists call it. In fact, oncologists will often mislead the patient to think that just because their scans and other tests are clear, that means they are cancer-free. Keep in mind that cancer cells are microscopic in size, just like any other cells in the body, and it has been theorized that up to ten million cancer cells may fit on the head of a pin. This is a very small dot that very likely would not be discernable on a scan or through other types of diagnostic tests. So, when a patient first goes into remission, they probably still have cancer cells in their body that may immediately start growing and spreading again if treatment is stopped at the remission point.

The good thing about alternative treatments that are completely non-toxic, like Protocol, is that the cancer patient can continue to take the Protocol long after their first all clear point in order to achieve a full, long-term cure. Clearly, the remission point is simply a step along the pathway to complete cure. But a person must take Protocol long enough (for at least a year after the all clear point if possible) to make sure they get rid of every last cancer cell if they are to achieve a real and lasting cure. If they stop too soon after remission, they may not have gotten all the cancer cells to lyse, and those people may suffer a recurrence not because the Protocol didn't work, but because they simply stopped it too soon when there were still cancer cells in their body. The best advice is to take Protocol at least one year after the all clear or remission point, if one can, to give themselves the best chance for a real and lasting cure.

Does Protocol work on cancer cells by being a powerful antioxidant?

No. Protocol IS a very powerful antioxidant – possibly the most powerful antioxidant on the market of any health supplement available today. However, that is NOT how it gets rid of a person's cancer. In all of Jim Sheridan's writings, as far as I know, he never once stated that his formula gets rid of cancer by being an antioxidant. In fact, I don't think he ever mentioned its antioxidant characteristics at all in any descriptions of it. Jim Sheridan's explanation for the lay person on how his formula causes cancer cells to break down is described in Chapter 9 of *Outsmart Your Cancer*, which goes into detail about how the formula acts like a catechol to interfere with the cell respiration of malignant cancer cells and other anaerobic cells in the body. Parts of Jim Sheridan's explanations in his own words are quoted in the book. The antioxidant capacity of Protocol is simply a very nice side benefit and may help make the body healthier, but it is not how it rids the body of cancer.

Does Protocol cause side effects?

No. Some people hear about Protocol or read about it on websites that are not careful with the words they use. These sources may mention the "side effects" of using Protocol. There are absolutely no direct side effects from using Protocol as far as I know, and I've been looking into the use of this product for more than 10 years. It is true that there are "lysing symptoms" that may occur when people use Protocol for cancer, and these do often occur. This is what people are usually referring to when they say "side effects." But these symptoms are due to the cancer breakdown, not directly due to the Protocol.

In other words, if a person has no cancer or other illness that involves a lot of anaerobic cells, and they take Protocol, they will not feel any different or experience any side effects. The only symptoms experienced by people taking Protocol are due to the breakdown of anaerobic cells. In cases where a person has a significant amount of malignant cancer, this involves a lot of breakdown, or lysing of cancer cells, and this may cause lysing symptoms. People with a lot of cancer may experience more of these lysing symptoms than others. Some people with very little cancer may experience no lysing symptoms at all. This is because the symptoms are due to the cancer die-off, not to the Protocol itself causing any sort of symptoms. (For more details on the types of lysing symptoms some people may have, please read Chapter 12 in *Outsmart Your Cancer*.)

Why do people have to restrict their use of so many other supplements, herbs, or other treatments?

This is because of the way that Protocol acts on cancer cells. Many other alternative approaches for cancer operate by supporting a person's immune system to the point where their own body may be able to overcome their cancer. This requires providing the body with energy-producing substances. Jim Sheridan, on the other hand, took a unique approach toward getting rid of cancer. Instead of trying to make the body healthier, Sheridan's idea was simply to deprive the cancer cells of their ability to produce energy for themselves in the form of ATP (adenosine triphosphate). Many supplements and herbs naturally contribute to the production of ATP and would therefore work against Protocol's action on the cellular level. Other treatments or drugs may also interfere in different ways. So, Protocol is in an interesting category of being one of the easiest and simplest approaches to use against cancer, yet one of the most restrictive in terms of other supplements or treatments that can be done along with it because of the way it works. Yet, there ARE supplements that many cancer patients have taken along with Protocol with success, and Chapter 12 of *Outsmart Your Cancer* has a list of those supplements that are considered compatible with Protocol.

What other supplements are most often taken along with Protocol for cancer?

Please remember, first of all, that many people have used Protocol successfully for their cancer without taking any other supplements along with it at all. It may be best to keep the number of other supplements to a minimum in general, making sure that whatever you do take is known to be compatible with Protocol. Having said that, the most common supplements taken along with Protocol over the years have probably been Paw Paw or Graviola, Vitamin D3, Germanium (GE-132), Larch, Curcumin, and Enzymes of all types. These are not the only ones, though, and they are not a general recommendation.

Is it okay for me to be on prescription drugs while I am taking Protocol?

Yes, in general. But the compatibility of all prescription drugs is not known for sure. It is true that plenty of people have taken steroids or anti-seizure medications while on Protocol for cancer and there does not appear to be any interference. And it is also true that many people have taken blood pressure medication, Coumadin for blood thinning, or diabetes

medication without any apparent interference with Protocol, either. But no studies have been done on the compatibility of all drugs with Protocol, so for many of them we just don't know for sure. The best advice is probably this: Take a prescription drug while using Protocol if you really need it, but don't take it if it is not absolutely necessary. And, if you do take a prescription drug, make sure to space it out one hour before or after taking your Protocol dose just to be on the safe side. This separation of Protocol from other drugs or over-the-counter medications is especially important if a person is taking some form of antacid for acid reflux that may drastically change the acidity of the stomach.

Can antacids be taken along with Protocol?

Do not put antacids into the stomach at the same time as Protocol. Many of Protocol's ingredients are acids and these should not be artificially neutralized by an over the counter or prescription antacid. If necessary, take antacids in-between Protocol doses, spaced out as far apart as possible from your Protocol dose.

Can chemotherapy be done along with Protocol?

Doing chemo at the same time as Protocol is not recommended unless absolutely necessary for a short duration to give the patient time for the Protocol to work. Unless absolutely necessary, chemo should be avoided. This is because most chemo drugs run the risk of interfering with Protocol's effectiveness on the cellular level. To quote one of Jim Sheridan's articles, he wrote, "Chemotherapy can bring the percentage of success down, because chemotherapy changes the level on the oxidation-reduction ladder where Entelev/Cancell works."

Over the years since Sheridan passed, it has been observed that the two anti-metabolite chemo drugs, 5FU and Xeloda, are actually compatible with Protocol, and a number of people have used those drugs along with Protocol with success. However, they are still toxic drugs and one has to weigh the pros and cons of taking a drug that may be seriously harming one's body. All chemo agents other than 5FU and Xeloda should be avoided whenever possible if you want to give Protocol its best chance of working well.

Some people have heard that it is okay to take Protocol along with chemotherapy and that the Protocol might reduce the side effects of the chemo. It is true that Protocol often does reduce the negative side effects of chemotherapy, even to the point where people may not lose their hair due to the chemo. This may be because it is such a powerful antioxidant. However, it is not worth doing the two together unless absolutely necessary because of the risk that the chemo might reduce Protocol's effectiveness. Here is a case I followed years ago as an example:

A woman wanted to try Protocol for her advanced, metastasized ovarian cancer. She was in-between chemo treatments and the next round of chemo was not scheduled for a month or so. Right after starting on Protocol 50, she began experiencing classic lysing symptoms and noticed promising changes in a metastasized lymph node tumor on her neck. But then her doctor wanted to give her some more rounds of chemo. This woman was a nurse and her health coverage plan was through the hospital she worked at, as was her oncologist. She knew the chemo might interfere with the Protocol, but she felt she had to do it or the hospital health plan would not cover any of her scans or other aspects of her treatment. Unfortunately, as soon as she went back on the chemo, all her signs of lysing stopped and she had no more signs of lysing for five more months while she was doing the Protocol and chemo at the same time. She died, full of cancer, at the end of that five months. No one can say whether the Protocol by itself would have brought about a complete cure for this woman or not, but when she took the Protocol alone, there were signs that it was working. And it is well-known that chemotherapy cannot ever completely cure metastasized ovarian cancer. So, by doing the two together so that she could keep her hospital health coverage, she ruined the one chance she may have had of curing herself. Of course hindsight is always 20/20, but what good does a health care plan do for someone if they are dead?

As already mentioned, there may be some cases that are so critical and have so little time that the person may need to use short-term chemo in the beginning to reduce their cancer enough to give them time for the Protocol to work. If this is the case, then the chemo should be stopped as soon as possible afterwards and Paw Paw should be taken along with the Protocol to avoid the problems of multi-drug-resistant (MDR) cancer cells that may have been selected out and promoted by the chemo.

Can radiation treatments be done along with Protocol?

Yes. Radiation is known to be compatible with Protocol, and in fact the two together work somewhat synergistically and can speed up the process of cancer die-off. However, radiation has its dangers and, like chemo, should only be used if absolutely necessary in critical cases where there is not much time. Radiation causes cell death even to normal cells

and this cell death is referred to as “tissue necrosis.” Because of radiation’s lasting effects, necrosis of healthy tissues may continue for up to 18 months after treatment. This means that if you have brain cancer and radiation treatments are directed at the tumor or tumors in your brain, that radiation can cause continuous tissue death of normal healthy cells for up to a year and a half afterward in the area of your brain that was radiated. When it comes to radiation treatments to the chest area for either lung cancer or breast cancer, there is also the danger that radiation can seriously damage a person’s heart. So, for cases such as lung or breast cancer, the radiation treatments may help to reduce the cancer quickly but cause the patient to die sooner than they normally would have due to a fatal heart attack. Be smart and only use radiation along with Protocol if it is absolutely necessary, and then keep it to a minimum or short term course of treatment if possible.

Can I take hormone-blocking drugs while using Protocol for cancer?

There is no complete consensus of opinion on this, but I do not recommend it. After following many, many cases of people using Protocol for cancer, I have noticed that those women who take Tamoxifen for breast cancer and those men taking Lupron or Casodex for prostate cancer do not have as much success with Protocol as those who don’t take any hormone-blocking drugs at all. My own opinion is that Tamoxifen makes it harder for the Protocol to work because it changes the metabolism of the breast cancer cells, and Protocol targets the metabolism of cancer cells. For men, all testosterone-blocking drugs, such as Lupron or Casodex, make men estrogen-dominant, and it is well known that estrogen dominance promotes cancer growth. (For more details about hormone-blocking drugs for women, see Chapter 19 of *Outsmart Your Cancer*, and for more details about hormone-blocking drugs for men with prostate cancer, see Chapter 20.)

Does Protocol work on benign tumors as well as malignant ones?

Jim Sheridan did not address the issue of benign tumors as far as I know, and benign tumors are not considered cancer, therefore I do not address how to get rid of them in my book. (Usually, surgery is the best option for benign tumors because they don’t metastasize.) My own understanding is that Protocol will only work on cells that rely primarily on anaerobic functioning, and this applies only to malignant cancer cells, not benign tumor cells. However, tumors can sometimes be misdiagnosed and actually be malignant when the doctor thinks they are benign, or a mass may have a mixture of malignant and benign cells within it. So, if one is not sure whether their tumor is malignant or benign, they could try Protocol and see if it responds. If it does not respond over time, it may be benign.

Does Protocol work on DCIS?

DCIS, or Ductal Carcinoma In Situ is a common breast cancer diagnosis these days. But it is only conventional medicine that labels this as cancer. Most alternative doctors agree that DCIS is more of a pre-cancerous condition and should not be labeled as cancer. It stays “in situ” without metastasizing in more than 90% of all cases because it is not generally malignant. In most cases, it acts like a benign mass or group of small masses. One woman I spoke with who used Protocol for her DCIS did not see any change in her condition for many months, and it appeared that the Protocol had no effect on her DCIS at all. My opinion is that this was because DCIS is not really a malignant condition (at least in over 90% of all cases), and does not rely on anaerobic cell respiration. The basic idea is that Protocol will only work on unhealthy or damaged cells of the body that consistently rely on anaerobic cell respiration. This includes all malignant cancer cells, but usually not benign masses.

Does Protocol work on common non-life-threatening skin cancers, such as basal cell cancer?

Yes. Protocol does work on skin cancers. Quite well, in fact. Malignant types of skin cancer, such as melanomas and squamous cell cancer definitely respond to Protocol. Common non-metastasizing skin cancers, such as basal cell cancer, also respond well to Protocol. This is the type that is often burned off by a dermatologist and may continue to recur in an area of the body, such as the face, but does not metastasize to internal organs. For skin cancers, Protocol can also be applied directly to the surface lesion and then covered with a bandage. But for best results, regular oral doses should be taken as well, just like for other cancers. (At least 4 doses around the clock of either the Formula 50 or the Formula 23.)

Can Protocol be taken along with other antioxidants?

As many people know, Protocol itself is a powerful antioxidant and they hear that vitamin C and vitamin E should be avoided, so they think that Protocol should not be taken along with any other antioxidant. The way it was described to me by the main Ph.D. chemist who worked with Protocol was this. It is not that Protocol should not be taken along

with any other antioxidant. It should simply not be taken along with any “sulfhydryl” types of antioxidants. But don’t ask me what these types of antioxidants are, because I don’t know enough chemistry to answer that. If you want, you can look up sulfhydryl antioxidants on the Internet and see what you can find out.

What are the dietary restrictions when using Protocol?

In general, Protocol is one of the easiest alternative cancer treatments when it comes to dietary restrictions. The most important restriction is to avoid refined sugar as much as possible. This is because sugar feeds cancer. I would also avoid all alcoholic beverages, since alcohol pretty much turns right into glucose in the body. (See the next two FAQs for more details on sugar and alcohol consumption.) But you don’t need to be a vegetarian or vegan, you don’t need to stop all intake of salt, and you can still have whole grain breads (white flour tends to metabolize quickly into glucose in the body, so stick with whole grain and/or sprouted breads whenever possible.) Avoid junk food as much as possible, such as crackers made with white flour, and all desserts made with sugar, including breakfast cereals. Other than that, it is recommended to avoid any “concentrated” versions of foods, such as juices, that may be too high in nutrients like vitamin C. The best advice is to eat a well-rounded diet that cuts out junk food and juices, and includes whole vegetables, whole fruits, some meat if one wishes, fish, poultry, and a little dairy, like organic yogurt or cottage cheese, if desired. If a food is very high in vitamin C, like broccoli or oranges, then you can still eat it now and then but not in high quantities every day. Likewise, brazil nuts can be eaten in small doses once in a while, but because they are very high in selenium, avoid eating handfuls of brazil nuts every day. If you keep your diet somewhat varied and avoid refined sugar, alcohol, junk food, and glassfuls of juices, you will most likely do just fine.

Do I have to avoid refined sugar COMPLETELY for Protocol to work?

Many cancer patients have had success with Protocol and eaten a small bite of birthday cake once in a while, or some small amount of dessert on special occasions. However, cancer cells thrive on sugar in the form of glucose. In fact, Patrick Quillin, a Ph.D. nutritionist that has written and lectured extensively about treating cancer, states that all cancer cells are “obligate glucose metabolizers.” What that means is that they MUST have glucose to survive. Protocol’s way of breaking down cancer cells involves interfering with their ability to produce energy for themselves through their glucose metabolizing pathway. Thus, every time a person with cancer eats refined sugar, they are feeding their cancer cells the main thing those cells need to survive and are working against the Protocol. Basically, eating refined sugar when using Protocol to get rid of your cancer is like trying to put out a fire with water while pouring gasoline on it at the same time. So, for best results with Protocol, cut out all refined sugar in the form of table sugar, candies, cakes, desserts of all kinds, sweet breakfast cereals, etc., and also alcoholic beverages, since alcohol turns into sugar in the body. Natural, more complex sugars that are ingested in their whole food form such as fructose from whole fruits and whole vegetables (not concentrated juices) should be fine, though, kept to a reasonable intake. If you DO eat some sugar here or there for a special occasion, you might want to up your Protocol dose just before and after.

Is it okay to drink alcohol, like wine or beer, while using Protocol?

I’m sure that many people have gotten away with drinking wine or other alcoholic drinks on occasion while using Protocol for cancer and still recovered. But this is probably only acceptable if the occasions are rare. Alcohol metabolizes in the body pretty much like pure glucose, so I would say the same rule applies to drinking alcohol as applies to eating sugary desserts. So, whenever you ingest sugar from desserts, candies, breakfast cereal, or sweets of any kind, and whenever you drink an alcoholic drink, you are directly feeding your cancer cells and working against Protocol’s action on the cellular level. I followed the case of a man once who was doing really well on Protocol for metastasized lung cancer to his brain. His brain tumors were disappearing and overall his health was returning until he started experiencing terrible stress in his life and drinking alcohol every night to deal with the stress. This man’s cancer then responded less and less to the Protocol he was taking. Be sensible and don’t make it hard for the Protocol work for you.

Juicing and green drinks?

Juicing of all kinds and most special green drinks or high nutrition juices, such as Goji, Noni, or Wheatgrass juice are all to be avoided while taking Protocol because they are dense in nutrients (especially vitamin C), and therefore act more like supplements than whole foods in one’s diet. See the FAQ below for more details on the Vitamin C issue.

Can you explain the Vitamin C issue?

It is recommended to not supplement with any vitamin C while using Protocol and to also avoid many other supplements that might help cancer cells produce ATP for themselves and work against the Protocol. So definitely avoid all supplements with vitamin C in them. However, people are often confused about how much food containing vitamin C should be avoided. You do NOT have to avoid all foods that have vitamin C in them, though it is recommended to avoid taking in high amounts of vitamin C by eating or drinking “concentrated” forms of foods that are high in C, such as juices, or by over-indulging in high vitamin C foods on a regular basis. This means you should probably stop drinking juices, but you can eat whole fruits, broccoli, tomatoes, bell pepper, berries and other good foods on a regular basis, as long as you don't over-indulge in any one of the high vitamin C foods if you wish to have the best results with Protocol. In other words, don't eat a large bowl of broccoli every day or 6 oranges every day. Keep your diet balanced among a lot of different healthy organic foods and you should not have to worry about getting too much vitamin C from your diet. There is no need to develop a vitamin C deficiency in the body while trying to recover from cancer.

Some people who are really struggling with their cancer for some reason and maybe feel their cancer is not responding to the Protocol as much as they would like might be told by a Protocol expert to reduce their intake of vitamin C in their diet to no more than 100 mg per day. But this is only a short-term recommendation, not a general rule, and is only for certain cases. Most people do just fine on Protocol with a general healthy diet that does not involve concentrated foods (such as juices or green drinks) which may act more like supplements in the concentrated nutrition they provide.

But keep in mind that when I say a normal healthy diet, I am not including refined sugar. Natural fructose from whole fruits in moderation is okay. But any form of refined sugar in the diet (in cakes, cookies, candy, ice-cream, breakfast cereal, etc.) can significantly work against Protocol's action on cancer cells. It is probable that any form of refined white flour will do the same, since refined wheat quickly turns into glucose in the body as well. Whole-grain and sprouted grain breads should be fine, though.

Can I drink coffee, tea, or other caffeinated drinks?

Yes, caffeine does not conflict with Protocol. However, since caffeine acts as a diuretic (causing the release of water from the body), it is important not to take in too much caffeine so that you do not become dehydrated. Anyone who has cancer cells lysing in their body needs to stay hydrated to help the body process out the broken down cancer cells. Drinking extra water is recommended while using Protocol for this reason. But if a person drinks caffeinated drinks, they should probably add even more water to their daily program for every caffeinated drink they have.

Can I give myself coffee enemas while taking Protocol?

Yes. Coffee enemas, warm water enemas, and professional colonics are all compatible with Protocol as long as no vitamins, minerals or herbs are used in the enema or colonic water that might conflict with the Protocol.

Since I shouldn't eat sugar while I have cancer, what artificial sweeteners are okay to use while taking Protocol?

My preference is to use a product called Stevia which is sold in any health food store. (Sweetleaf is a good brand and very good-tasting.) I prefer the liquid drops over the powdered form only because the powder does not dissolve well into cold drinks such as iced tea. Stevia does not raise blood sugar and does not feed cancer cells. People taking Protocol have also used Nutrasweet successfully. However, I would not recommend Nutrasweet, because its main ingredient is Aspartame. Aspartame is an excitotoxin that has been proven to cause damage to the brain as well as directly causing cancer in laboratory animals. Aspartame is also the main ingredient in Equal and Spoonful, so Nutrasweet, Equal and Spoonful are all artificial sweeteners which are very bad for the body. Stevia is safe, so I'd stick with that or with any other sugar alternative that does not raise the glycemic index in the blood. Some natural foods such as raw unrefined honey can be used in small amounts, but don't overdo it. You may want to stay away from Agave, though. It may be natural, but I have heard it is quite refined and could act a lot like refined sugar in the body.

Can I eat chocolate while using Protocol for my cancer?

There is nothing in pure cocoa (the chocolate part of chocolate) that interferes with Protocol. However, most chocolate sweets are made with high amounts of sugar and the refined sugar will feed your cancer cells and make it harder for Protocol to get your cancer cells to lyse. So, you don't want to eat chocolate candy, chocolate cake, or other chocolate desserts because of the sugar in them when you have cancer, not because of the chocolate. If you are a chocoholic and

can't imagine giving up chocolate, one safe thing you can do is buy pure, raw unsweetened cacao powder from a health food store and make your own hot chocolate drink at home. This is very easy to do by simply adding a rounded tea-spoon of the cacao powder to a tall mug of hot water, then add a little half and half or cream and a little liquid stevia for sweetening purposes. It tastes great!

I like to drink milk every day. Is that okay?

As far as I know, people have been able to drink some milk and other dairy products such as organic yogurt or organic cottage cheese (preferably advertized as not having the growth hormone rBGH in it) without interfering with their recovery on Protocol. However, my own opinion is that drinking a LOT of cow's milk every day might interfere with Protocol in some cases. I don't have any proof of this, but I know that cow's milk is extremely high in phosphates, much higher than human milk. Protocol blocks the production of ATP (adenosine triphosphate) in cancer cells and ATP is made up of three phosphates. That's what the "triphosphate" refers to. Thus, I would worry that drinking milk on a daily basis might contribute a lot of phosphates to the body, which might in turn contribute to your cancer cells' ability to make ATP. If that is true, it might work against the Protocol, but this is just a theory of mine and not proven. One farmer/researcher in Australia named Percy Weston, however, did find a direct link between high phosphate diets and the development of cancer. (For details, see his book, *Cancer: Cause & Cure*.)

What if I have heavy signs of lysing, then periods of no signs of lysing at all?

Whenever a person is using Protocol for cancer, there will be lysing going on every day, possibly every minute of the day. This is because the term "lysing" refers to the bursting of the cancer cell membranes. On the other hand, seeing the signs of lysing come out of the body may be sporadic or cyclical, or a person may not notice any signs of lysing at all. That does not mean the lysing is not going on inside the body, it simply means that the person is not able to notice the lysed material (broken down cancer cells) coming out of their body. Sometimes the body may be able to process out the lysed material very efficiently so you don't see it. Other times, the lysed cancer cells may build up in the body for a little while before the body processes them out all at once. Basically, sporadic or cyclical lysing symptoms are very common and should not be interpreted as Protocol working at times and then not working at times.

The only exception to this rule is if you notice that something you do or eat corresponds to an obvious reduction in signs of lysing. For instance, if you have been seeing regular signs of lysing for a while and then start taking a new supplement and the signs stop suddenly and don't come back, you may want to stop that supplement. Or if your signs of lysing stop whenever you eat donuts or drink a milkshake or alcoholic drinks, then that may be an indication that those things are interfering with Protocol's ability to deprive your cancer cells of enough energy to make them fall apart.

If I am high in heavy metals, does that mean Protocol won't work for me?

No. Most people have some heavy metals in their bodies, because it is so hard to avoid these days. It is true that a few Protocol experts have suspected that, at least in some cases, extremely high levels of heavy metals such as mercury, cadmium, or nickel, might interfere with the Protocol to some degree. This is because heavy metals may chelate to (or bind to) the Protocol and render the Protocol less effective. However, it is important to understand that no studies have been done on this issue and there is no proof either way. Plus, no one knows how high a person has to be in heavy metals for an interference to occur, if any. So, the best suggestion is to simply start on the Protocol and, if you know you are very high in any heavy metals, then watch your progress carefully. If your cancer does not respond to the Protocol as well as expected, then it may be that you will need to increase your dose of the Protocol at some point (maybe even double it), and possibly add the herbal supplement "Paw Paw." One important tip on this issue is to avoid getting an annual flu shot. Though many vaccines have had the mercury removed from them, the average flu shot still contains mercury. So, you may be giving the Protocol a better chance of working by not getting any flu shots that could put more mercury into your body.

How long does it take for Protocol to work?

This is a common question, but one has to define the meaning of the word "work" in order to answer it. It's pretty clear that Protocol starts working on cancer cells immediately, if you mean causing them to start lysing. In fact, signs of lysing are often noticed by cancer patients within the first 24 hours of starting on it. So, I would say that Protocol starts working on cancer cells as soon as a person starts taking it. But cancer cells don't all lyse away all at once and recovery does not happen overnight. It takes a little time to reduce the energy production of enough cancer cells in the body to be able to notice cancer regression on scans, for instance:

What most people mean when they ask this question is “How long does it take for my cancer to go away?” As I’ve clarified in Chapter 12 of *Outsmart Your Cancer*, the time it takes for cancer to disappear varies from case to case based on at least three factors:

- 1) How fast-growing the cancer is. My observation is that fast-growing (or aggressive) cancers lyse faster and slow-growing cancers lyse slower on Protocol.
- 2) How much cancer a person has when they start on Protocol. A person with very little cancer may see all signs of their cancer go away much sooner than a person who has a lot of cancer spread throughout their body.
- 3) How effectively the person uses Protocol. Protocol is not magic and there are many do’s and don’ts for optimum results. (See Chapter 12 of *Outsmart Your Cancer* for all the details.)

Will Protocol work for a cancer patient given only a week or a month to live?

Protocol will definitely start working on their cancer immediately, within hours of starting it, as stated above. This is the case whenever any person with cancer starts taking Protocol, in my understanding. However, that does not mean the patient will get well. Some people start on Protocol when there is not enough time for Protocol to get rid of enough cancer quickly enough to make a difference. In other words, a person who only has a week or month to live may already have had their vital organs so damaged by their cancer or by previous toxic conventional treatments that their body is no longer strong enough to recover. In extreme cases, their organs may already be starting to shut down. In other cases, some of the cancer may continue to grow before Protocol can stop all growth. Another scenario is that a person who has been fighting cancer for a long time within the conventional medical system may have a body that is so damaged already by their late-stage cancer or conventional toxic treatments, that it no longer has the strength or ability to re-build new cells and recover even if the Protocol did get rid of all the cancer. So it is often not at all a matter of whether the Protocol can work on the person’s cancer, but whether the person has enough time left to give the body a chance to process out the lysed cancer, replace damaged areas with new healthy cells, and do all the other things that are required for any body to get well.

This is why people often make a very big mistake when they decide to commit to conventional treatment first thinking that they will then try an alternative approach if the conventional method fails. What that person doesn’t realize is that it may be too late for them at that point. Overall, your chances of achieving a full recovery from cancer using Protocol or any other alternative approach for cancer are better the sooner you start on it. The longer you wait, the worse your chances for recovery will be. Having said that, I would never want to discourage anyone in late stage disease to try Protocol if they want to. Where there is life, there is hope. And there have been some cases who used Protocol very late, were only expected to live a few weeks, and did recover. So it is often worth a try. But understand that your chance for a full recovery is much, much better if you start on Protocol sooner, rather than later.

Is there a minimum or maximum age for someone to use Protocol? For instance, is it safe for my two-year-old toddler as well as my 90-year-old grandfather?

No, there is no minimum or maximum age for someone to use Protocol and yes, it is safe for toddlers and elders in their nineties. In fact, Protocol is probably the easiest and most effective alternative treatment for the elderly with cancer as well as for very young children of all the options out there. This is because it does not require taking a mountain of pills every day, does not require extensive detoxing through coffee enemas or other means on a regular basis, and does not require extensive juicing or an extremely strict diet – all of which could be very difficult for seniors as well as young children.

One testimonial on the Audio CD bound into the back of *Outsmart Your Cancer* tells of a small boy who was given Protocol for a malignant brain tumor starting at the age of 18 months old. That boy is now a healthy young man who has been working on computers for some time now. I’ve also noticed that, at least in some cases, elderly cancer patients appear to respond even quicker to recovery with Protocol than others. I believe this may be because their cell energy is often so low already that it is easy for Protocol to push the cancer cells down the oxidation reduction ladder to the point where they fall apart.

If Protocol is such a great treatment for cancer, why not just recommend it for everyone and forget about all the other alternative cancer treatments out there?

It certainly would NOT be a bad thing if everyone with cancer were to use Protocol as their preferred treatment of choice. But there are many factors to consider when choosing an alternative treatment and there are other effective alternative options out there for cancer as well. (See *Outsmart Your Cancer* for descriptions of some powerful approaches, such as Cesium High pH Therapy, Burzynski's Antineoplastons, and Dr. Kelley's Enzyme Therapy, to name just a few.) The fact is that some people are not comfortable using a self-administered home approach for their cancer and want a doctor to help them and to oversee their progress. These people may do better by going to one of the doctors listed in my book who perform alternative treatments at their clinics. In fact, if they are seriously ill with a high possibility of side complications due to their cancer, using an alternative treatment administered by a doctor may be critically important for some cases. Also, there are many people who don't want to give up their health supplements. There is nothing wrong with this. Some people, in fact, really need their health supplements, such as a person with a bad heart who takes CoQ10, D-Ribose, L-Carnitine, and vitamin E to support their heart. All of these are supplements that cannot be taken along with Protocol, so those types of cancer patients may do much better using a different alternative approach to cancer that is compatible with those supplements they need for their heart. And, of course, many people just want to be able to keep up their daily juicing and regular supplements because they feel better on them and would prefer an approach that allows for those supplements and daily juices. These are just a few reasons why Protocol may not be the very best approach for each and every cancer patient. But the good news is that there are many alternative non-toxic options to choose from.

Can I do regular exercise while taking Protocol?

Yes, but you should be careful not to overdo exercise while recovering from cancer using any approach. Whenever a person is causing their cancer cells to break down through an alternative approach such as Protocol, the body then has to work hard to process out those broken-down cancer cell parts. The liver, kidneys, lymph system all work harder than usual to rid your body of the debris. This takes energy and is why some people get tired in the first month or two of using Protocol. The more cancer you have that is lysing, the harder your body has to work. Gentle regular exercise such as walking, easy bouncing on a mini-trampoline to keep the lymph flowing, and other very gentle workouts are fine if they do not make one feel overly tired. But pushing yourself to exercise until tired may be putting undue stress on your body if it is already working hard to process out the broken-down cancer cells and trying to heal by building new cells. Use your own judgment, but I would error on the side of resting more, taking more naps, and doing only gentle exercise if it were me. As the cancer disappears more and more from the body, a person can gradually step up their exercise program if they want to.

What about skiing, dirt-biking, martial arts, tackle football, or other highly active and impact-risky sports?

I would not recommend these for anyone with cancer. You might want to wait until your cancer is in remission (the all-clear point) before engaging in this type of sport. There is no actual conflict between active sports and Protocol, so that is not the issue. The issue is that, as long as you still have active areas of cancer in your body, you do not want to risk any accidental impact or injury to the cancer area. This is the case no matter what type of treatment you are using for your cancer, and is because cancer seems to "take off" and spread more rapidly where tissue is damaged by injury or infection. Here are some examples to explain why I think this is true:

1) One man was using Protocol for his metastasized pancreatic cancer and doing very, very well. The cancer was not totally gone yet, but was under control and it appeared he was on course for having a full recovery. He was feeling great, working, and living his life normally. In fact, he was feeling so great that he decided to take a kick-boxing class for exercise. Unfortunately, during one class, he got kicked really hard in the abdomen. (The area where his cancer had been disappearing up to that point.) Somehow this injury spurred the cancer to grow rapidly and he died before the Protocol could get it under control.

2) A woman in her forties had gone through surgery and chemotherapy for ovarian cancer before stopping all conventional treatment and switching to Protocol. Her cancer had already metastasized throughout her abdomen and three tumors had appeared in her liver. Nevertheless, she was having great success with Protocol 50 alone. After a number of months on Protocol, scans showed her abdominal tumors reducing and two of the three tumors in her liver were almost gone. She appeared to be well on her way to recovery. However, at that point, she decided to have a port removed from her belly that had been previously implanted surgically for chemo treatments. The surgery was successful in removing

the port tube, but there were complications in the healing of the surgical wound. It became infected and would not close. This surgical wound was in an area where she'd had some cancer before and suddenly, presumably due to the injury and infection resulting from the surgery, her ovarian cancer began taking off and growing again in that area. I never was able to follow-up and do not know how she did, but last I heard she was desperately trying to get her cancer under control again. This woman would have done better to wait until all signs of her cancer were gone before doing any form of surgery that wasn't absolutely necessary.

3) An elderly woman with Non-Hodgkin's Lymphoma presenting on her cheek/jaw area told me that before she had been diagnosed with cancer, she had suffered a fall and had hit her face very hard in the very spot that the cancer then appeared at.

4) A middle-aged woman told me she had been in a car accident where she suffered a very powerful bruising of her breast from the seat belt. I imagine the seat belt probably saved her life or prevented further injury, and I am all for using seat belts. However, the woman said she was diagnosed with breast cancer not too long after that and the cancer appeared in the exact place she had been seriously bruised.

So, it appears that cancer is somewhat opportunistic and thrives in areas of damaged or inflamed tissue. Thus, if I had cancer and wanted to be sure I achieved a full recovery, I would NOT subject myself to any activity that might result in a strong impact as long as I still have cancer in my body. This includes activities such as martial arts, tackle football, surfing, dirt biking, bicycle riding, anything that requires a helmet, skiing, snow-boarding, etc. This does not mean you can never do any of these things ever again. It just means you might want to avoid risk to your cancer recovery by waiting until all signs of active cancer are gone before undertaking an activity that may result in an impact, fall, or injury to your area of cancer.

Can I undergo surgery while taking Protocol?

Yes, but should probably only consider it if absolutely necessary. By this I mean that if you truly need a surgical procedure at any time, then get it. Your Protocol doses can be taken right up to the time of surgery and started again right after the surgery. However, any significant surgery is a trauma to the body and as the FAQ above indicates, cancer may thrive in traumatized tissues. Also, major surgery may weaken the immune system for quite awhile afterward. So it may be wise to postpone any surgery that can be postponed until one reaches the all-clear point according to diagnostic tests. Thus, if you have a chemo stint that is not bothering you, wait before having it removed. And if there is any other elective surgery you want to do that is not necessary, wait. Even if you have a hernia that you can live with for a while longer, wait. It is just common sense to not stress the body if you don't have to when you are trying to ensure a cancer recovery for yourself. But of course if you have a serious condition that requires surgery, then by all means get the surgery! Just keep taking your Protocol doses if you do.

Can I mix my Protocol doses into a special alkaline water?

No. In fact, it may be best to not drink alkaline or other special waters at all while taking Protocol, even in-between your Protocol doses. For mixing Protocol into water to drink immediately, regular distilled, spring, or filtered water may be used. But whenever Protocol is pre-mixed into water to drink later, it must always be distilled water.

Is it okay to pre-mix Protocol in distilled water for more than 1 day in advance?

Many people find it is easy to pre-mix their Protocol doses in four or five bottles of distilled water at the beginning of each day. In other words, if they are taking the Formula 50, they are probably taking a dose every six hours and may want to make up four separate bottles of distilled water with a dose of Protocol in each one at the beginning of their day. A person on the Formula 23 may be taking 5 doses around the clock, so they might pre-mix 5 bottles of distilled water with a dose in each bottle at their beginning of their day. On the rare occasion that you need to pre-mix doses for two days, that might be okay if absolutely necessary. But, in general, I would not pre-mix Protocol doses for more than one 24-hour period. I heard of a man that was pre-mixing doses for 6 days in advance, and he did not have as good a response as expected while he was doing that. So, I do not recommend pre-mixing Protocol in distilled water for more than one day at a time.

Is it okay to get an annual flu shot while using Protocol for cancer?

I strongly advise against flu shots. This is an important question, though, because many cancer patients are encouraged to get flu shots by their doctors. There have been no studies and we have no reliable data on this issue, so I cannot report

with certainty either way, but I have been surprised to find that several cases I have followed showed a definite decline in their recovery progress shortly after getting a flu shot. My own opinion is that flu shots may interfere with a person's recovery. No one knows whether it is the heavy metals in flu shots that may bind to the Protocol, (they still contain mercury), or whether it is simply a result of the flu shot depressing the person's immune system, which is a well-known fact. Whatever it is, though, I have observed enough bad results to come to the conclusion that people using Protocol for cancer should probably NOT get a flu shot at any time. The other thing to remember is that Protocol has very strong anti-viral action and most people using Protocol for cancer find that they rarely get sick with a cold or flu anyway. I believe that Protocol will help any cancer patient to avoid catching a virus better than any vaccine can. So, you don't need a flu shot when you are on Protocol and, in my opinion, getting the flu shot may seriously interfere with your recovery.

Is the quarter teaspoonful dose right for everyone?

A quarter teaspoonful of either the Protocol Formula 50 or the Protocol Formula 23 is considered the basic dose size for both formulations, which means it can be the starting dose for anyone. But I do believe that some people may need a bigger dose at some point and I explain situations where a cancer patient may want to increase their dose size or even do "power-dosing" sometimes in Chapter 12 of *Outsmart Your Cancer* to optimize their results.

How do I know if the Protocol is working on my cancer or not?

Though many cases may know very quickly through obvious signs of lysing and rapid tumor regression that is visible, in other cases it is not always clear right away. First of all, fast-growing (aggressive) cancers tend to lyse faster on Protocol and slow-growing cancers tend to lyse slower. Also, the amount of observable lysing symptoms varies a great deal from patient to patient. What I think is the best advice is to use as many diagnostic tools as possible and also common sense to ascertain whether the Protocol is working on your cancer or not. Some of these tools will be conventional diagnostic methods, such as MRIs, CT scans, ultrasounds, or scoping procedures. (Be careful of cancer marker blood tests, though, because they are notoriously inaccurate, –especially when a person is using Protocol.)

Besides the above conventional tools, a person can also assess their situation in many cases by observing signs of lysing. Lysing signs or symptoms are not necessarily going to be seen every day and in some cases aren't seen at all. But if you are someone who does see signs of lysing, then watch those closely. If you're still not sure what's happening, try increasing your dose of Protocol for a little while and see if those lysing symptoms increase. Or decrease your Protocol dose for just a little while and see if those lysing symptoms reduce. If you suddenly eat a lot of sugar or drink a lot of alcohol and you see your signs of lysing completely stop, then you've probably interfered with Protocol's action. If you get an early scan, say only two or three months after starting on Protocol, the interpretation of those scans might be a little confusing. For more explanation on scans, see the next FAQ.

How does one interpret scans?

Scans of all types are important diagnostic tools, and in the long-term will hopefully always tell the correct story. However, sometimes in the short-term the interpretation of early scans can be confusing for three reasons:

1) The "Blow Up" factor. Because of the way Protocol causes cancer cells to lyse, tumors may slightly expand at first as they are breaking down. This is called the Blow Up Factor and sometimes one must wait another couple of months to get the next scan before seeing that tumor go down in size. Be careful. Not all tumor enlargements are blow ups of this type. It could be that the way you are using the Protocol is not really effective and your cancer is really progressing. So always think about what you are eating, drinking, or taking along with the Protocol if this happens, as well as possibly trying a higher dose of the Protocol for the next two or three months before your next scan.

2) Sometimes lysed material (dead broken down cancer cell parts) can hang around a tumor area a little while before getting processed out of the body. Unfortunately, MRIs and CT scans cannot differentiate between active tumor masses and lysed material. Therefore, if you get a scan early on, before the lysed cells have been cleared from the area, it may look on the scan like your cancer is growing. This is where you really need to use common sense and include all factors to determine your cancer status. If you've been experiencing lysing symptoms or other reasons to believe your cancer is breaking down, then you may want to consider that some of the material highlighting on the scan might be harmless lysed cancer and simply keep doing what you're doing until the next time for a scan.

PET scans are not perfect diagnostic tools, either, but they are often better at telling the difference between active cancer and lysed cancer. This is important and I recommend PET scans for people using Protocol whenever possible. Here

is an example of why: Years ago I was following a case where a man had fairly advanced primary brain cancer. I can't remember exactly what type, but I'm pretty sure it was either of the Astrocytoma or Oligodendroglioma type. Before starting on Protocol, brain scans showed that he had a tumor in his frontal lobe area as well as a tumor in his brain stem. He diligently took Protocol for 6 months before getting another scan, which was an MRI. When the doctor came in to give him the results, the news was horrifying. The man was told that his cancer had spread significantly throughout his brain! This was confusing to the patient and his wife because this man was literally feeling great, working full-time, and exercising regularly every week. It seemed unlikely he would feel this good if he had so much cancer in his brain. So this man requested a PET scan, which was performed only two weeks after the MRI. The results of the PET scan were completely different. This time, the scan showed that there was no active cancer in his frontal lobe anymore at all and only a tiny spot of active cancer still left in his brain stem. Apparently the MRI had highlighted lysed material, which looked like cancer to the doctor and radiologist, but the PET scan had only highlighted active cancer. Always understand the differences between different scans as best you can, because it may help you know how to interpret your results.

3) Another situation that may arise during cancer recovery is that not all tumors will necessarily disappear at the same rate. Here is another case in point: A man had malignant melanoma that had metastasized in the form of multiple tumors throughout his abdomen. Three months after taking Protocol Formula 50, he went in for conventional scans. The scan report said that some of his tumors had regressed in size or were gone, but others were still there and one or two were a little bigger than before. As a result, this man's doctor convinced him that the Protocol was not working because it looked like some tumor growth in some areas. But three months is not enough time in many cases for all tumors to be showing regression, and sometimes denser tumors expand a little and take longer to go away than less dense tumors. The fact that some tumors WERE showing regression in size or gone, should have tipped off both the doctor and patient that something good was happening. Malignant tumors rarely go away or get smaller for no reason, and it is likely that if he had just stayed on Protocol longer he would have seen the other tumors disappear eventually as well. Unfortunately, this man was convinced by his oncologist to stop the Protocol and rely on conventional treatments from then on – treatments that are known to have no long-term curative effect for melanoma. Again, it is important to get conventional diagnostics and to consult with your doctor. But when using an alternative treatment for cancer, it is imperative to use your own common sense as well!

I'm having success with another alternative approach and already seeing my cancer go away. But I am very impressed with the Protocol testimonials and I'm thinking of switching to Protocol. What do you recommend?

My role is to share information about what alternative treatments for cancer are available, how they were developed, and how they work. I can never say which particular alternative approach would be best for any particular case. Thus, which approach to use is something each person has to decide for themselves. Having said that, I can share that I have a healthy respect for cancer and my own motto for myself or my family would be "If it ain't broke, don't fix it." In other words, if you are using an alternative treatment for cancer that is obviously working and your cancer is in the process of going away, then I would keep using that approach until the cancer is gone if I were you. Don't mess with success!

If I do not have a cancer diagnosis myself, can I still use Protocol for prevention?

Yes, using Protocol preventively is a great idea for anyone. The two main things to understand about using Protocol preventively are the following:

1) Use Protocol just the same way you would use it if you had a cancer diagnosis. In other words, for best results, use the same dosing schedule recommended as if you knew you had cancer, and avoid all supplements, herbs or other treatments that might interfere with Protocol's action on the cellular level.

2) Protocol is only a preventive in the sense that it is able to get rid of any active cancer cells you may have in your body but that are in such small numbers you are not aware you have cancer. It can also be preventive by cleansing your body of other damaged cells that have already become anaerobic, but have not yet turned into cancer cells. But it can only help you while you are taking it. If you take Protocol for prevention, you are cleansing any anaerobic cells in your body that may be a problem or become a problem. But once you stop the Protocol, there is no continuing action. In other words, if you take Protocol for two months, it will not somehow magically protect you from developing cancer for the rest of the year as an immunization of some sort. It only works to get rid of anaerobic cells while you are taking it.

Which formulation of Protocol should I take for prevention?

Either one will work just fine for general prevention of a cancer diagnosis. However, if a person has a particular area of concern, for instance a woman has a suspicious lump in her breast and is worried about breast cancer, or a man has a higher than normal PSA score and is worried about prostate cancer, then these people may choose to use the Formula 23 for prevention because it is the one most recommended for breast and prostate cancer. On the other hand, let's say a person has smoked cigarettes for many years, has a cough, and is worried about lung cancer. That person may feel more comfortable using the Formula 50 which is more recommended for lung cancer. Each person can decide for themselves, but either formulation is very effective at any type of cancer caught early, so don't stress about this issue too much when it comes to prevention.

How long do I need to take Protocol for prevention?

Regarding this, there is no set rule. The way Protocol works for prevention is by getting rid of any very small tumors that are as yet undetectable, as well as possibly getting rid of certain types of pre-cancerous cells that have already become anaerobic but have not yet turned into cancer cells. So, no one really knows how many pre-cancerous or undetectable tumors they have in their body. Thus they cannot really know for sure how long they need to take the Protocol. Some people suggest taking just one or two bottles (2-4 months worth) back-to-back for prevention. My suggestion would be that, if it is the first time you are using Protocol for prevention, I'd use it longer than that. (Maybe 6 months or so.) Then, after that first time, if you want to use a bottle or two each year for continuing prevention, that might work fine. But there are no set rules. You can use it longer for prevention if you want that security.

Is Protocol antibacterial?

No, Protocol is not antibacterial. This is actually a good thing, because it means that Protocol will not kill any of the healthy bacteria in your gut. If anyone on Protocol develops a bacterial infection, it is okay to go onto antibiotics prescribed by your doctor while taking Protocol for cancer.

What about anaerobic bacteria or yeast?

No, Protocol does not get rid of anaerobic bacteria (such as those in some dental infections) either. And it is not anti-yeast, even though these microbes function anaerobically. It was specifically designed to interfere with the anaerobic respiration of a body's damaged or unhealthy cells, not any organism that is anaerobic. Protocol does have very powerful anti-viral action, however, because viral conditions involve anaerobic cells of the human host body. (Please see the last two FAQs for a more detailed explanation of how Protocol works on viruses.) And, in some cases Protocol has been reported to effectively work on fungi for some reason that I do not understand.

What is the cure rate for Protocol against cancer?

Since no formal studies have been performed on human cancer patients using Protocol, there are no reliable numbers to report. Some people hear that Protocol has an 80% cure rate, but I think this is an erroneous statement when it comes to current human cancer patients using it. The 80% cure rate idea may have been misconstrued from two sources:

1) Jim Sheridan claimed to have achieved an 80 percent cure rate on mice with cancer over the many years he performed animal studies. I'm sure this was true, but it was also under controlled laboratory circumstances and Sheridan was never involved with any human clinical trials.

2) Ed Sopcak (the man who originally funded the production of Cancell and gave away about 20,000 bottles of it back in the late 1980s and early 1990s) used to claim that he achieved an 80% cure rate with the cancer patients he worked with. But Ed Sopcak only counted those cases that had at least three months to live when they started on Cancell. In other words, if a patient died within the first three months of being on Cancell, Sopcak did not count their death in his statistics because he believed that very late stage cases didn't always have enough time for the Cancell to work effectively enough to cure the person. Still, even with that stipulation, Sopcak's overall recovery rate for those cancer patients he directly worked with was phenomenal.

If I had to guess, I would say that the actual current cure rate for cancer patients using Protocol is much lower than 80%, but that is most likely because so many people don't start on Protocol until they are very late stage or because they don't make sure they understand all the do's and don'ts of using Protocol. However, I can say with strong conviction that there are still many more cancer cures with Protocol than with conventional chemotherapy or other mainstream

methods, and this is especially exemplified by the many real-life cases who were told by their oncologist to go home and get their affairs in order because there was nothing more that could be done for them, then went on to achieve a full recovery using the Protocol formula. In my opinion, if everyone with cancer were able to get onto Protocol right after being diagnosed with cancer, and were helped by an expert practitioner to use it correctly, then the overall cure rate could soar up over 90 percent. But that is just my guess and those conditions are not occurring in the current real world.

What is the difference between Protocol Formula 50 and Protocol Formula 23?

Protocol Formula 50 and Protocol Formula 23 are the only two formulations of Protocol being sold today and are very, very similar. I have been told they are made up of the very same ingredients, but in slightly different proportions, and that the Formula 50 requires one extra step in producing it which accounts for its higher cost.

I heard that the Formula 50 is stronger or more powerful than the 23. Is that true?

No. Originally, when the two formulations were first being marketed, some people thought the Formula 50 was stronger. But then it was observed that many types of cancer actually responded better to the Formula 23 than to the 50. So, now, all Protocol experts agree that the Formula 50 works best for some types of cancers and the Formula 23 works best for other types of cancers. There may also be some situations where the 23 or 50 work equally well for a particular case. (Please see Chapter 12 of *Outsmart Your Cancer* for a list of which formulation to use for which type of cancer.)

Is there any type of cancer that Protocol does NOT work on?

No. As far as anyone knows, Protocol will work on any type of malignant cancer. What I mean by this is that, on a cellular level, Protocol is designed to cause any malignant cancer cell to lyse and is capable of doing that. Some types of cancer cells may respond just a little better to either one or the other of the two formulations, as stated above, though. And, fast-growing (aggressive) cancers tend to lyse faster, while slow-growing cancers tend to lyse slower. So people with slow-growing cancers often need to be more patient with their recovery. Of course, whether a person achieves a complete cure has to do with various factors, such as how effectively they use the formula, whether their body is extremely toxic in other things that might inhibit healing, and how long they take the Protocol to make sure they get rid of every last cancer cell.

Are there any types of cancer that respond particularly well to Protocol?

I almost don't want to answer this question, because no studies have been done to compare cases of people using Protocol for different types of cancer, and I hesitate to categorize any cancers as better responders than others. Also, some cancers may respond in a slower fashion simply because they are slow-growing, but will disappear just as thoroughly over time as those that respond quickly. In general, as stated above fast-growing cancers lyse faster and slow-growing cancers lyse slower. But in the long-term, full recovery can be achieved with any type of cancer as far as anyone knows. If any cancer case is not responding well, one option is to try increasing one's dose size or frequency of the Protocol dose and see if that speeds things up, and another option is to try adding the supplement "Paw Paw" and see if that speeds things up. I suppose, if I had to say something, I would say that I've seen some really fast recoveries from cervical cancer, bladder cancer, acute leukemias, and astrocytoma brain cancers, to name just a few.

Is bleeding a lysing symptom?

No, not usually. Sometimes a small amount of blood may be seen as a result of lysing when parts of a tumor break away from a blood vessel or organ wall. But this is usually a very small amount of blood and short-lived. If anyone experiences heavy or prolonged bleeding while taking Protocol for cancer, this should not be construed as a lysing symptom and the person should have themselves checked by a qualified physician immediately.

What is Paw Paw?

Paw Paw is an herbal treatment related to Graviola. Both Paw Paw and Graviola are known to be compatible with Protocol and are also known to have cancer-fighting properties. Not everyone who uses Protocol also takes Paw Paw or Graviola, and it is not considered something everyone needs to take. However, the standardized Nature's Sunshine version of Paw Paw in capsules is often recommended to anyone who has done chemotherapy before. This is because chemo drugs can select out for multi-drug-resistant (MDR) cancer cells. Paw Paw has the unique ability to disable the resistance of MDR cells and may make it easier for the Protocol to work in those cases. Paw Paw's action on the cellular level works synergistically with how Protocol works, so the two can be used together even if the cancer patient never did any chemo. There are some contraindications to using Paw Paw for select cases, though. For anyone who has a situ-

ation where they must be very careful not to allow their cancer to lyse too fast (such as with cancer in the brain), it is recommended that those people just start on Protocol alone first and don't add the Paw Paw until maybe a few months have gone by. Once the person is sure they can handle and process out the amount of lysed material that Protocol alone is causing, then they can try adding Paw Paw sometime after that. If a person does not have to worry about too much lysing happening too fast, then they can start on Protocol and Paw Paw together right away if they want to.

Can I use detoxing foot baths while taking Protocol?

I would not recommend using foot baths while taking Protocol. Foot baths are designed to pull toxins out of the body, which in general is a very good idea. But remember, Protocol is not made of only natural ingredients. There are some synthetic ingredients in it, too. Thus, there is a possibility that the foot baths may pull out some amount of the Protocol. In fact, if you look at the websites that sell detoxing foot baths, they usually post a warning that if a person is taking any life-saving medication, they should probably not use a foot bath because the foot bath could pull that medication out.

Can I get body massages while using Protocol for cancer?

Yes, but make sure that the massage therapist does not put any pressure directly on tumors or other areas of active cancer. Oncologists are taught in medical school to touch tumors lightly, so as to not cause cancer cells to break off which might result in undue metastases. Be sure your massage therapist avoids pressing on any areas of cancer.

Can I drink bottled water that has been purified with ozone?

Ozonated bottled water is fine to drink. The ozone used in water is in small amounts for disinfectant purposes and virtually always will have completely been used up or converted back to regular O₂ by the time a person drinks this water.

Can I use an air purifier that produces ozone?

Yes. There are various ways that ozone treatments for cancer are administered to get the ozone in strong doses directly into the blood stream, including rectal insufflations. Those types of powerful ozone treatments should be avoided while taking Protocol because mixing ozone and Protocol produces toxic aldehydes as a result. But the ozone in air purifiers dissipates very quickly and the extremely small amount taken into the blood stream through the use of them is negligible.

How do I interpret lymph node swelling?

Lymph nodes can swell as cancer is progressing throughout the body, but they can also swell as cancer is being processed OUT of the body through the use of something like Protocol. So, here once again, common sense must be used and the total picture taken into account. For instance, if you have cancer and your scans and visual observation are showing that all your tumors are getting bigger and your lymph nodes are enlarging as well, then you are probably experiencing cancer progression. However, if you are on Protocol and you are experiencing lots of lysing symptoms, have already seen some tumors reduce in size, but have one or more lymph nodes enlarging, then it may just be that those lymph nodes are enlarging as they are processing out lysed cancer. The logical conclusion in that case, when taking everything into account would be that cancer regression is happening.

Are there any special issues for Lymphoma patients?

Yes. The most important thing for anyone using Protocol for cancer in their lymph system, and especially for those who are primary lymphoma patients, is to stay well hydrated by drinking lots of water every single day. This is because the lymph fluid can get "sticky" or thick as it is processing out lysed cancer cells caused by the Protocol. The lymph system does not have a main pump to keep it flowing like the blood system has with the heart. So, if the lymph fluid gets too thick and sticky, it may get clogged up and stop moving. This could cause discomfort in the cancer patient and may impede the body's ability to process out the buildup of broken down cancer cells. In at least one case I followed, this buildup became almost life-threatening for a Non-Hodgkin's Lymphoma patient on Protocol. For 3 months, his cancer was responding very well to the Protocol and the many lumps he had around his body had all reduced in size. But he wasn't drinking much water every day and pretty soon he started to experience great pain in his abdomen. Doctors determined that his spleen had swollen up and was about to rupture. Now, the spleen is like a very big lymph node in the lymph system and often becomes heavy with cancer when a person has lymphoma. So, lots of lysing going on and not enough water to keep that lymph fluid moving is probably what caused this man's terrible pain. Don't take that risk. Drink plenty of good pure water besides other drinks you may be ingesting. Another very effective way to aid the movement of lymph fluid throughout the body is to gently bounce on a mini-trampoline for about 10 minutes twice a day.

Why isn't Protocol sold in more foreign countries?

Efforts have been made and are still ongoing to get distributors set up in countries other than the United States and Australia. Hopefully, more countries will have distributorships eventually. But there are a variety of difficulties that have slowed this process down, including heavy restrictions placed by CODEX Alimentarius on all new supplements in Europe. CODEX is a collection of internationally recognized standards and rules relating to foods and nutritional dietary supplements that was created by the FAO (Food and Agriculture Organization) and the WHO (World Health Organization). Most people in the know say CODEX is simply one of the strong arms of the pharmaceutical industry, clearly designed to protect their drug profits rather than the health of the world population. In fact, many believe CODEX will cause the end of health freedom entirely over upcoming years. (For more information, search the Internet on CODEX Alimentarius.)

I am worried about the copper ingredient in Protocol. If a person has a high copper level indicated by a hair analysis, is it still okay to take Protocol?

Yes. As far as anyone knows, the very small amount of copper in Protocol has never caused anyone any problems. This is partly because all of the ingredients in Protocol work together to act as a "catechol" to interfere with anaerobic cell respiration and, at least in my own understanding, each of the ingredients in Protocol are not particularly bioavailable for individual use by the body.

If I am high in heavy metals, what can I do to chelate those metals out of my body while I am taking Protocol?

This is difficult to answer because anything that would chelate heavy metals out of the body also runs the risk of binding to and chelating Protocol out of the body. So, I don't really know of any way to work on removing heavy metals while taking Protocol. My suggestion would be that if your cancer is caught early and not too threatening just yet, you could try one month of a chelation protocol, such as Zeolite, before starting on Protocol. But if your cancer is not caught very early, I would suggest getting onto the Protocol immediately and don't worry about the heavy metals. But watch your progress. If you are very high in heavy metals, you may need a higher dose of the Protocol from the beginning and you may also want to take Paw Paw along with it right from the beginning for best results.

Does Protocol need to be refrigerated?

No. Do not refrigerate or freeze Protocol. Simply keep your bottle of Protocol in a cabinet or cupboard out of direct sunlight and in an area that does not get too hot. Remember, too, to shake the bottle vigorously before measuring out your dose each time.

What is the shelf life of Protocol?

Unopened, Protocol has an extremely long shelf-life when kept under ordinary conditions, such as in a cupboard away from high heat or direct sunlight. Its shelf life this way is at least three years and may be up to ten years or more. However, if the Protocol bottle has already been opened, then there is some risk that some sort of bacteria or other growth may develop in it over time. So, for bottles that have been opened already, they should probably be used up in a 6 to 8 month period. But this is just my guess. Talk to the Protocol distributors for more accurate information.

Can I use a metal spoon to mix my Protocol dose into distilled water?

Yes.

Do I need to alkalize my body to recover from cancer?

No, this is not necessary while using Protocol. In fact, most of the great recoveries from cancer using Protocol over the years occurred in patients who simply took Protocol and maybe one or two other compatible supplements, but who never even tested their body for acidity. Cancer creates its own little acidic environment as a result of the high levels of lactic acid produced by every cancer cell. (Lactic acid is always a by-product of anaerobic cell respiration.) Thus, as the cancer goes away through the lysing that Protocol causes, one's body will begin to lose its extreme acidity and gradually become more alkaline. Eating a diet of healthy foods, cutting out refined sugar and junk foods, and drinking a lot of good pure water will also go a long way towards bringing the body back up to a healthy acid/alkaline balance.

Is Protocol an immune booster?

In the Protocol community, many people consider Protocol to be an immune booster because so many cancer patients have reported that their blood work looks so much better after they have been on Protocol for a period of time. But the extent to which Protocol boosts the immune system, or what aspects of the immune system are boosted, is very unclear. Most supplements that are touted as immune boosters have been shown through clinical studies to significantly increase levels of T cells, killer cells, interleukin factors, etc. No clear knowledge of Protocol's ability to boost these factors of the immune system is known. Some people have reported interleukin factors to increase in their blood tests, but those people were also taking Germanium-132 which has been proven to boost interleukins all by itself. So it is unclear in those cases whether it was the Protocol that did it or the GE-132.

It is also unclear as to whether various cancer patients' blood work improves as a result of Protocol boosting their immune system, or whether it is a result of the Protocol simply reducing the cancer load in their body so that their immune system is no longer so overwhelmed. To my knowledge, Jim Sheridan never wrote about Protocol being an immune booster. Another issue is that some people think it is an immune-booster because they don't tend to catch a cold or flu when they are on Protocol. But this is probably more due to Protocol's ability to interrupt the replication cycle of viruses, and not necessarily because it directly boosts the immune system. Future studies may be able to clarify for us what the immune boosting capability of Protocol really is. In the meantime, it is certainly fair to say that Protocol helps the body to function better in many ways simply due to its ability to rid the body of damaged anaerobic cells, and that many cancer patients find their blood workups indicating better and better functioning of the body overall when they use Protocol.

Can I go into hot tubs or pools with chlorine when on Protocol?

One Protocol expert thinks exposure to chlorine this way is not a good idea while taking Protocol. I am not sure either way. If you do sporadically use chlorinated hot tubs or pools, you may want to increase your dose of Protocol just before and after.

Is the Asparagus approach okay along with Protocol?

Yes, as far as anyone knows. Anecdotal case reports appear to indicate that the asparagus approach does not conflict with Protocol.

Can I use the Budwig Flaxseed Oil and Cottage Cheese Approach while taking Protocol?

No. Though no studies have been done to prove the compatibility or incompatibility of these two approaches together, there is a concern they would conflict because the FCO/CC approach tends to "normalize" cancer cells, while the Protocol approach tends to try to weaken them until they fall apart. Thus the two may work at cross-purposes.

What can I use for constipation?

Senna products appear to be okay. These can be bought from most health food stores if your bowels are not moving regularly enough. Also, drinking plenty of water and ingesting good fiber from natural whole foods every day may help.

Can I drink Kangan water while taking Protocol?

This is an unknown. One expert thinks that people should probably not use it at a machine setting above 7, because as the ORB value increases, it increases the likelihood of stimulating ATP energy in cells. Remember, with Protocol, the less other things you use along with it, the better in many cases. And if you do drink any special waters like Kangan, take them in-between your Protocol doses, not mixed with the Protocol.

Special high alkaline waters?

These should be avoided when using Protocol.

Can Protocol cause nausea or vomiting?

Yes, but this is very rare in humans. Nausea generally only occurs under certain conditions, such as when cancer in the stomach is lysing or a person has a highly toxic liver that is having trouble keeping up with the person's recovery efforts. Drinking extra water may help, or possibly doing a series of coffee enemas to help clear the liver. As far as vomiting goes, if a person vomits up egg-white like material or what looks like white foam, this can be a very good sign of heavy lysing

going on and the body is ridding itself of dead cancer cell debris by vomiting it out. This is especially apparent when dogs or cats with cancer are given Protocol because vomiting is such a common release mechanism for them. However, if your vomit is comprised of normal food stuff, then that would NOT be considered a sign of lysing and you would want to look for other reasons why this may be happening.

Does Protocol get rid of skin tags?

Yes. At least a number of people have reported that it does.

What are some of the saddest things you have noticed in people diagnosed with cancer who either used Protocol or were considering using Protocol?

Unfortunately, there are many sad things that occur in our current cancer treatment world. One is when I hear from women who have undergone a mastectomy after being diagnosed with DCIS. DCIS is short for “ductal carcinoma in situ” and is referred to as breast cancer in conventional medicine because that is how doctors are taught in medical school to look at it. But more and more open-minded physicians who have studied alternatives and holistic medicine are in agreement that DCIS is most often a pre-cancerous state. In other words, it is usually a benign condition of abnormal cells scattered here and there throughout the breast ducts, not formed into obvious tumors, and all contained within the ducts. (That containment is what the “in situ” refers to.) Only a very small percentage of DCIS cases go on to become malignant and life-threatening. When a condition is not malignant, it is not cancer. Benign tumors or benign abnormal cells are not cancer. Therefore, this condition should never be called cancer in the first place and a woman with it is not a cancer patient. Yet, she is often prescribed a mastectomy and may even be put on chemo or a hormone-blocking drug. All of this is tragic, in my opinion.

Another sad thing I've observed is when a person has some awareness of alternative therapies for cancer, but decides to try conventional medicine first, figuring they will then take Protocol or some other alternative if the conventional methods don't work for them. This is a very unfortunate decision for the simple reason that in most cases conventional medicine is not curative. So, by the time they decide to try an alternative method, the person has already been butchered, poisoned and burned. Alternatives are not “magic” and can't magically turn an un-whole person into a whole one. An example of what I am talking about is one woman who decided to try Protocol after she had already exhausted conventional treatment for her metastasized pancreatic cancer. By the time she started on Protocol, her doctors had already surgically removed her pancreas, her gallbladder, her spleen, 3/4 of her stomach, and her duodenum. After only a couple weeks on Protocol, she was feeling so nauseous and weak, she had to be admitted to the emergency room. This woman was so butchered, her body was unable to process out the lysed cancer that Protocol was causing and that is my guess as to why she went into an even more critical state after only two weeks on Protocol. The bottom line is that if you get to the point where your body is too damaged to process out the lysed cancer, then Protocol may not be an option anymore. Don't go through all the toxic or mutilating conventional treatment your oncologist can throw at you first, and then expect an alternative treatment to somehow magically save you after that. It has happened in some cases that people do still recover, but in many cases it won't happen because, even though the alternative treatment may still be capable of killing your cancer, your body may no longer be capable of recovering.

Another sad situation I hate to see is when a person uses Protocol and experiences some very positive results, but their oncologist convinces them that their alternative approach is not working. This happened in one case I followed of a man with malignant melanoma that had metastases with numerous different tumors in his abdomen. After only a few months on Protocol, some tumors were gone or disappearing, but others had not changed and a few had expanded in size slightly. This man was convinced by his doctor that the Protocol was not working and to go back onto chemo (which has no known history of curing metastasized melanoma.) I believe that in this case, the Protocol was indeed working on the man's cancer because some of his tumors were regressing, but that he just needed to give it more time to see more results. It's important to understand that in the early months of using Protocol, different tumors may go away at different rates, depending on their size and density. Some of the smaller or less dense tumors may disappear quickly, while others that are bigger and denser may actually expand a little before they disappear. In the cases of those that expand a little, they are probably becoming less dense as they are expanding. The important thing to understand is that malignant tumors rarely disappear on their own spontaneously. So, if you see any of your masses getting smaller, that is a sign that the Protocol is working and you may just need more time to see the other masses get smaller as well. If things take too long and you can handle more lysing symptoms, then you can also consider increasing your dose at some point and/or adding Paw Paw.

I've heard of this type of confusion in other cases as well, where for instance someone gets a bone scan that shows their cancerous lesions have disappeared in some areas, but not others. This is not the time to say the Protocol is not working, but simply the time to either be patient a while longer, or up your Protocol dose if you can handle more lysing.

Along similar lines, it has been sad to observe some people convinced that they need to add some conventional treatment to ensure their recovery. I've seen this in particular with brain cancer cases. When a person has brain cancer and they are doing well on Protocol for a period of time, seeing their cancer get smaller, but then they hit a plateau or see some small new growth, they are in a vulnerable position and can easily be scared into adding some toxic drug such as one of the chemo drugs, or Avastin which is an anti-angiogenic drug. None of these toxic drugs has any curative track record for brain cancer, but an oncologist may tout it as the patient's best hope. For example, Avastin has been officially approved for GBM's (glioblastoma multiforme brain cancers) after studies claimed positive results. However, those results were simply about tumor response, not about tumor control or disappearance. (See Chapter 22 of *Outsmart Your Cancer* for an in-depth discussion of the difference between tumor response and cure.) I always urge every cancer patient to search the Internet for descriptions of side effects on any conventional drug prescribed to them by their doctor, and am continually amazed at how many people just take whatever drug they are given with the assumption it is safe and effective. In the case of Avastin, no significant effectiveness against brain cancer has ever been proven. In fact, official websites about Avastin report that only a small number of GBM tumors reduced in size and that this affect lasted only about 4 months. However, on those same websites, numerous negative side effects of the Avastin drug are reported, including life-threatening side effects such as holes in the intestinal tract and stomach that won't heal, serious infection, stroke, and even swelling of the brain. I hate to see a person using Protocol who is seeing positive results while they are still on the basic dose of 1/4 teaspoonful, but then quickly add a toxic drug if they observe any setback or small amount of cancer growth. I would rather see them increase their dose size or frequency of the Protocol and/or add Paw Paw to see if that will bring their recovery back on course rather than add a toxic drug that could damage them and may in fact interfere with their recovery or cause their death.

It is the basic misconception of black and white thinkers to believe that Protocol either works or it doesn't and that the 1/4 teaspoonful dose size is the magic amount for everyone. It is true that toxic treatments such as short term radiation or short term chemotherapy may be needed in some cases at first to give them time for their alternative approach to work. But in many cases, for those people who are not in such a critical state, simply becoming more aggressive with their alternative approach could be all they need to do.

Does Protocol get rid of fibroids?

This is somewhat unclear. A number of women have wondered if Protocol can get rid of their breast or uterine fibroid cysts, but anecdotal reports reflect mixed results. I have only come across one woman who felt that Protocol got her breast fibroid to go away. But others who have tried it have not had the same success. In general, I believe that fibroid cysts are not going to respond well to Protocol because there is no strong indication that they are made up of cells that primarily use anaerobic functioning. (Which is what Protocol targets.) However, sometimes fibroid cysts pop up very quickly with rapid growth in the beginning. It is only during these times of rapid growth that a thermogram will highlight a fibroid as "hot." Once a fibroid has settled in and stopped growing quickly, then it does not highlight on thermograms as hot. Thus, it could be that Protocol might work on fibroids during that initial period of fast growth, but not on fibroids after they have settled in. This is just a hypothesis, though, because very little is known for sure in this area.

What other health conditions does Protocol work for besides cancer?

Protocol will help any condition that involves anaerobic cells of the body. It was originally created by Jim Sheridan as a cancer treatment and has been used primarily for cancer. But, over the years, it has also been observed to be very helpful against some other conditions as well. The top on this list after cancer would be any viral condition. Protocol has brought about some remarkable recoveries from hepatitis, mononucleosis, Epstein-bar, herpes, FIV in cats, viral papillomas, and even HIV/AIDS. (See the next FAQ for how Protocol works on viral conditions.) Other conditions that have been helped to various degrees are Multiple Sclerosis, Crohn's, IBS, and ulcerative colitis, but there is not a lot of data on these or other auto-immune disorders to say whether or not Protocol can be a true cure for these conditions or simply help. Parkinson's is listed in my book as something Protocol might help, but this is also based on very little data. For cancers and viral conditions, however, Protocol can be a true long-term cure when the Protocol is used correctly and for long enough.

How does Protocol work against viruses?

Many people have had great success using Protocol for various viral conditions, even though the formula was not designed for this use. Testimonies have come in from those using it for all types of Hepatitis, Epstein-Barr, Mononucleosis, Herpes and even HIV/AIDS. Either the Protocol Formula 23 or the Formula 50 will work against viruses, but the Formula 23 is usually recommended for most viral conditions, with HIV/AIDS being the exception where people most usually use the Formula 50 for that.

Protocol does not directly kill viruses, but it helps the body overcome viral infections in the following way. Whenever a person is infected with a virus, the virus must invade a normal healthy cell of the body in order to replicate itself. This normal healthy cell is referred to as the “host” cell for the virus’s reproduction process. When viruses are circulating throughout our bloodstream, before or after invading a host cell, they have a protective protein coating surrounding them that provides a defense from attack by the body’s immune system. But when they invade a host cell to replicate themselves, they also have to shed their protein coating. These viral-infected host cells then become damaged cells and turn anaerobic to survive. If a person is taking Protocol, the Protocol causes these host cells to lyse and fall apart, interrupting the virus’s replication process and also releasing any full-grown viruses back into the bloodstream before they have had a chance to develop a new protective protein-coating. This means that the body’s immune system can now successfully attack and do away with those viruses or virus parts so they can no longer harm the person. Thus, it is actually the person’s immune-system that kills or does away with the virus in the end, but it is the Protocol that interrupts the virus’s replication process and causes viruses to be released back into the bloodstream without their protective coating by causing the host cells to lyse.

One thing to understand is that viruses are different from cancer cells in that viruses can sometimes go “dormant” and hide in a person’s tissues at times, only to become active again during periods of stress. (This is especially the case with viral conditions that display cyclical outbreaks, such as Herpes or Shingles.) So, even after a person’s viral symptoms go away, that person may, at least in some cases, experience a return of their viral symptoms some time after stopping the Protocol. If this happens, simply start back on the Protocol for a second time.

Don’t hesitate to use Protocol on pets for viral conditions, too. One cat with FIV (Feline Immunodeficiency Virus) was expected to live only one more day because it was so sick. This cat was given Protocol Formula 23 and within just a few days, the cat was eating, walking, and functioning normally again. It had a full recovery. I also used Protocol successfully to make an annoying viral papilloma fall off my own dog after about two months of giving the dog Protocol. Previous to that, the dog had to undergo surgery two different times to remove it because it kept growing back. After it fell off through the use of Protocol, the viral papillomas never grew back again.

Can Protocol be used to treat HIV/AIDS?

Yes. Though Protocol has never been advertized as a treatment for HIV/AIDS, and no claims have been made by the owners or distributors of Protocol that it can be used for that condition, quite a few people have used it successfully for this purpose. In fact, it is one of the more successful “unknown” uses of Protocol. Anecdotal reports indicate that people using the Formula 50 at 1/4 to 1/3 teaspoonful every 6 hours (spaced out evenly around the clock with one of the doses in the middle of the night), have been able to get their viral count to go down to an undetectable level within about 6 months of continual use. (It is very important to not miss any doses, just as with cancer.) For most cases, all negative symptoms of HIV/AIDS disappear during this time. The same instructions as to what supplements or other treatments to avoid for people using Protocol for cancer should also be followed when people use Protocol for any viral condition.

Success may vary to some extent based on how sick a person is when they start Protocol, but in general, HIV/AIDS responds very quickly to this approach and people often feel much better within just a few weeks. One man I spoke with had an incredible recovery from HIV/AIDS by just taking Protocol along with one immune-boosting supplement called “Moducare.” Continuing the use of Protocol longer than 6 months, past the undetectable virus point, is recommended. Staying on Protocol for more than a year is always an option for those wishing to err on the safe side, but probably not necessary.



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Anaerobic Cells and Protocol[®]

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Alternative Non-Toxic Treatments That Work***

Conventional medicine claims that chemotherapy, radiation, surgery, and hormone-blocking drugs are the only effective ways to treat cancer. These approaches are considered by many to be scientific while alternative methods are often thought to be unscientific. But there are a number of alternative non-toxic cancer treatments showing great success that are based on well-established scientific principles.

One of these principles is the anaerobic cell principle, which was first put forth by Dr. Otto Warburg in the 1930's and 40's. Dr. Warburg was a brilliant German scientist who received a Nobel Prize for his work on cell dynamics and was nominated for a second Nobel Prize, but did not receive it because he was a Jewish scientist in Hitler's Germany. Warburg's impeccable research demonstrated that the prime difference between cancer cells and normal healthy cells is that healthy cells are "aerobic" and cancer cells are primarily "anaerobic" in the way they function to produce energy for themselves. Warburg showed that all of the normal healthy cells in our bodies use oxygen to produce energy, whereas all cancer cells rely on glucose (through the process of glycolysis) to produce energy for themselves. One alternative approach being used today by hundreds of cancer patients who are choosing to decline toxic treatments such as chemotherapy and radiation is based on this well-established scientific principle. This approach involves the use of a unique liquid formula called Protocol.

Protocol- and the Anaerobic Cell

Protocol is a non-herbal, non-toxic formula that is currently being sold as a dietary supplement. No claims are made as to its use for cancer or any other disease, but many people are choosing to use it as an alternative approach for regaining their health because Protocol rids the body of anaerobic cells. It does this by interfering with their energy conversion process. Since anaerobic cells are less efficient in their production of ATP (adenosine triphosphate), which is a key compound in the transport of energy within each cell), a slight interference in this process depletes cancer cells of the energy they need to survive. On a biochemistry level, the details are complicated. But, in a nutshell, the daily use of Protocol depletes cancer cells much the same way that leaving your car lights on with the engine off will deplete the energy in your car battery. After a while, the battery goes dead because more energy is going out than is coming in. All the healthy cells in a person's body are left unharmed by Protocol because normal healthy cells are aerobic and utilize a different, much more efficient process for obtaining energy using oxygen.

Since anaerobic cells play a role in other conditions as well, such as multiple sclerosis, arthritis, Crohn's, viral conditions and other chronic disorders, Protocol can help people with a variety of health challenges. However, it is not always completely curative of these other conditions because they may involve other factors as well. The most remarkable recoveries have been with cancer.

History of Protocol

Protocol was initially developed by the American chemist, Jim Sheridan, who worked on the formula from about 1936 to 1990 and intended it as a cancer treatment. As a teenager, Sheridan had hoped and prayed to be able to help find a cure for cancer. Then, during his graduate studies at Carnegie Tech, the basic concept of this formula came to him. He diligently spent the rest of his life perfecting the formula, testing it for decades on laboratory mice with cancer. Later, he gave the formula away to people with cancer whom the medical establishment had given up on. The human response was phenomenal and many people with late-stage metastasized cancer were achieving complete recoveries!

Jim Sheridan wanted the price of his formula to always remain affordable for the average person, so he did not sell out to pharmaceutical companies that would have charged exorbitant prices for it. In 1990, the National Cancer Institute finally agreed to test Sheridan's formula with its stringent laboratory procedures, using a variety of cancer cell lines in vitro. The results were fantastic and showed that the formula worked better than chemotherapy on all cancer cell lines tested. The types of cancer cell lines tested included leukemia, non-small cell lung cancer, small cell lung cancer, colon cancer, central nervous system cancer, melanoma, ovarian cancer, and kidney cancer. However, neither the NCI, the FDA or the American Cancer Industry wished to pursue this remarkable treatment.

(Please see Chapters 9 and 11 of OUTSMART YOUR CANCER for all the details on how Protocol works and how it was suppressed by the Cancer Industry.)

Protocol and Cancer Patients

Examples of people who have used Protocol for their cancer are impressive. For instance, a 3½-year-old girl had most of her malignant, life-threatening brain tumor surgically removed when she was about two. Her surgeon, however, was not able to remove some parts of the tumor that had infiltrated into inoperable areas. The girl's parents refused the risky conventional follow-up treatments of radiation and chemotherapy and chose to give her Protocol instead. This little girl had a complete recovery and, years later, is still considered completely cancer-free.

Another small child with leukemia had not responded to the chemotherapy given her and doctors were recommending a bone marrow transplant. Instead, her mom gave her Protocol alone and soon her tests were showing her completely clear of cancer. An older woman in her 80's took Protocol for her aggressive, malignant bowel tumor that could not be completely removed surgically. She felt she was too old to undergo chemotherapy, so she went on Protocol to get rid of the rest of her cancer. Within about a year, all her tests pronounced her cancer-free. A young man had melanoma surgically removed from his back, but his doctors told him the cancer had metastasized to his lymph system. He used Protocol to get rid of the melanoma in his lymph glands rather than subjecting his body to conventional toxic drugs that could not give him a good prognosis anyway.

Although not everyone using Protocol achieves a full recovery, many do. There have been countless remarkable successes that have been reported from people who have used this formula and completely recovered from their breast, prostate, lung, kidney, bladder, brain, and other types of cancer! (Read Chapter 10 of OUTSMART YOUR CANCER and listen to the Audio CD in the book for the details of many real-life cases!)

But the NCI and FDA chose not to pursue this potent cancer formula, even though official tests proved it worked. So it is now being sold by two distributors in the United States, and one in Australia as a general health supplement. The good news is that it is easy to use and only costs about \$75 to \$100 dollars per month! (Depending on individual dosing.) The bad news is that M.D.'s cannot legally prescribe it to people with cancer, so those using Protocol must do so primarily on their own as a self-administered approach. But, for the most part, using Protocol is extremely easy. The hardest part is avoiding taking other supplements or treatments that might interfere with it. (See Chapter 12 of OUTSMART YOUR CANCER for all the details.)

More and more people with cancer are choosing to use this amazing formula to help them get well and each recovery proves that the formula is based on the sound scientific principle that cancer cells rely primarily on anaerobic cell respiration.



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