The following is from Andreas Kalcker's 2013 book, *CDS - Health is Possible*, on pages 124-126.

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Another basic difference between CDS and MMS is their way of quantification in the different protocols. While MMS is applied in measured doses in drops, CDS or CDI is applied in doses measured in milliliters, which is a more professional and accurate method. The dose measurement in drops may be inaccurate, since the drops of the different manufactured droppers may differ from each other by up to 70%, which is why it is preferable to use universal measurements. Theoretically, it could be said that the equivalences are the following:

- CDS has a pH of 6 and 3000 ppm in aqueous solution.

- **1 ml of this CDS is equivalent to 2 or 3 drops of activated MMS**.

But sadly, this would only be in theory. It is not scientifically accurate. I was hasty in posting this data and I apologize for that.

There is no possible equivalence, as these are dynamic values in a dynamic environment. They depend on how and where the solution is used, at what temperature and density, if it is for external or internal use, or even injected into animals.

What I can do is approach a table, according to the data emerging from my studies (using as activating the 4% HCl).

Activated Drops MMS	= ml	ppm	ppm in stomach
3	0,15	22	41
20	1	146	273
24	1,2	176	328
40	2	292	546
60	3	438	819

As can be seen, protocol 1000 equates to approximately 300 ppm per day. And the efficiency and speed of the new activator HCl, with a dose of 3 drops of MMS, can be seen in this comparative table designed by Charlotte (CA 50% = citric acid 50%).