CDH4000

(4000 ppm ClO2 Water Solution)

My Chlorine Dioxide Production & Use of it for Infectious Diseases & Cancer

My 100ml Bottle Formulation Instructions

In a sterilized 100ml colored glass bottle combine the following ingredients (plastic pipettes work well for the small amounts):

1. Start by adding 90ml of pure water to the glass bottle (preferably distilled or reverse osmosis water)
2. Next add 5ml of 20 to 25% Sodium Chlorite (NaClO2) solution in water
3. Next add 5ml of 4% Hydrochloric Acid (HCl) solution. Important! DO NOT use any other acid or % if you want to make 4000 ppm ± 5%
4. Then immediately cap the bottle tightly & give it a good shake. Important! Only use a cap with a plastic type seal, ALL rubbery types will melt!
5. Keep the bottle at room temperature or above for 24 hours to allow time for the full production of 4000 ppm ±5% Chlorine Dioxide.

Note: *Starting with hot water (80-90° C) and shaking occasionally will reduce time needed for activation to just 8 hours*

6. After 24 hours (or 8 if using the hot method) put the bottle in the refrigerator and keep refrigerated until ready for use.
7. If I think I may not use my formulated 100ml of **CDH4000** for more than a month, it's best to dilute it down to 200 ppm by adding it to 1900ml of pure water, which will give me 2 liters of 200 ppm. This will prolong the refrigerated shelf life of my now diluted **CDH200** to at least 3 months so that I will know with accuracy what the ppm concentration is for further dilution purposes if needed.
8. If kept refrigerated between uses, **CDH4000** can be considered full strength (4000 ppm) for 1 month after formulation. After that time if not diluted as in number 7 above, or if left unrefrigerated for long periods of time, the concentration will gradually fall below 4000 ppm. If this happens it can still be used, but it would be best to only use it in ways where it's not important to know the ppm.

(The ratio of ingredients used above is 90:5:5 (ml) & can be scaled up for larger amounts. For example 5 times the above is 450:25:25 (ml) & can be used to make a 500ml bottle of CDH4000.)

My ClO2 Dilution Table for Various Container Sizes

Use the table below as a guide for any concentration & container size you may want to use. You can use the dilutions and container sizes shown or you can use different dilutions or container sizes by simply multiplying or dividing what you see below according to the dilution or container size you want. For example, if you wanted to use a 25ml bottle instead of a 50ml bottle, you would just divide the amount needed for a 50ml bottle by 2 (or in half). The same is true for different concentrations you may want to make. **Note: 1 ml = 20 drops ±5%, therefore 1 drop = 0.05ml and 5 drops = 0.25ml (all equivalents are ±5%)**

After dilution, label your container with the new concentration & ideally refrigerate your diluted **CDH**. Use a glass bottle if possible & **DO NOT** use any kind of rubberized cap seal. Only caps with LDPE plastic seals (soft plastic) or better should be used to prevent contamination of the solution.

My Instructions for using the ClO2 Dilution Table below:

First, fill a container with pure water or 0.9% Sodium Chloride (saline) as indicated in the left column below. Next, find the ppm concentration you want for the container size you are using and take out & discard the number of ml indicated (of water or saline). Then replace the amount of water you just took out with **CDH4000**. Last, be sure to label your bottle with the ClO2 ppm concentration you just made.

Container Size	Amount of CDH4000 to Use for Various ppm ClO2 Dilution Concentrations									
	10 ppm	20 ppm	30 ppm	40 ppm	50 ppm	60 ppm	70 ppm	80 ppm	90 ppm	100 ppm
50ml	0.125ml	0.25ml	0.375ml	0.50ml	0.625ml	0.75ml	0.875ml	1.00ml	1.125ml	1.25ml
100ml	0.25ml	0.50ml	0.75ml	1.00ml	1.25ml	1.50ml	1.75ml	2.00ml	2.25ml	2.50ml
200ml	0.50ml	1.00ml	1.50ml	2.00ml	2.50ml	3.00ml	3.50ml	4.00ml	4.50ml	5.00ml
250ml	0.625ml	1.25ml	1.875ml	2.50ml	3.125ml	3.75ml	4.375ml	5.00ml	5.625ml	6.25ml
300ml	0.75ml	1.50ml	2.25ml	3.00ml	3.75ml	4.50ml	5.25ml	6.00ml	6.75ml	7.50ml
400ml	1.00ml	2.00ml	3.00ml	4.00ml	5.00ml	6.00ml	7.00ml	8.00ml	9.00ml	10.00ml
500ml	1.25ml	2.50ml	3.75ml	5.00ml	6.25ml	7.50ml	8.75ml	10.00ml	11.25ml	12.50ml
600ml	1.50ml	3.00ml	4.50ml	6.00ml	7.50ml	9.00ml	10.50ml	12.00ml	13.50ml	15.00ml
1000ml	2.50ml	5.00ml	7.50ml	10.00ml	12.50ml	15.00ml	17.50ml	20.00ml	22.50ml	25.00ml

CDH4000 & My Use of It

(4000 ppm ClO2 Water Solution)

Chlorine Dioxide (ClO2) Medical Use Background Information for Infectious Disease & Cancer

My following usages are not based on any FDA approved studies or studies done by pharmaceutical companies for purposes of human medical treatments. Rather, my usages are based upon the EPA, WHO & other studies done primarily on animals to determine toxicity levels of various ClO2 concentrations & products destined for market, some of which have received approval for human oral use & veterinary wound care use. In addition, they are based upon the experiences of thousands of ClO2 users, including my own personal experiences. Therefore, nothing I'm saying here should be taken as medical advice. (Example of Animal Toxicity Study): https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5369164/pdf/ijerph-14-00329.pdf

My Chlorine Dioxide (ClO_2) Use Theory

Most users of ClO_2 solutions use them for various infectious diseases, as both antibiotics & antivirals, & for cancers as a form of chemotherapy. In general, they do this based upon the theory that both pathogens & cancer cells will be susceptible & die from the oxidative stress that ClO_2 causes them, while at the same time the healthy cells of the body will be resistant to that same oxidative stress due to their much larger size & favorable disposition towards reactive oxygen species (ROS) in general. Based on this theory, the following are ways in which I would use ClO_2 to treat various infectious diseases & cancers, always trying to keep the ClO_2 concentration as low as possible to avoid toxicity to my body, while at the same time high enough to stop both bacterial & viral infections & of course cancers. The parts per million (ppm) ClO_2 concentrations shown below are my estimates based upon hundreds of thousands of users, and over 30 years of collective Chlorine Dioxide use which in turn has been based upon WHO and EPA safety studies, product studies & studies which are integral parts of the many ClO_2 based patents in the US & around the world. Therefore, once again, nothing written here should be construed as being medical advice – it's just what I might do. (Please see the Medical Information Disclaimer above.)

Conservative **(Mild/Gentle Strength)** 5-20 ppm ClO_2	Moderate **(Medium Strength)** 21-50 ppm ClO_2	Aggressive **(Highest Strength)** 51-100+ ppm ClO_2
Liquid ClO_2 – External/Oral/Enema or Douche **- Drops in eyes (5-20 ppm)** **- Drops in nose & ears (20 ppm)** **- Brushing teeth (20 ppm)** **- Gargling (20 ppm)** **- Skin abrasions and lacerations (20 ppm)** **- Bowel or vaginal infections (20 ppm)** **- Very mild hand sanitizer (20 ppm)**	Liquid ClO_2 – External/Oral/Enema or Douche **- Drops in eyes (21-40 ppm)** **- Drops in nose & ears (30-50 ppm)** **- Brushing teeth (25-30 ppm)** **- Gargling (40-50 ppm)** **- Skin abrasions and lacerations (50 ppm)** **- Bowel or vaginal infections (40-50 ppm)** **- Enemas can be used to carry ClO_2 into the blood plasma in lieu of an IV (50 ppm)** **- Mild hand sanitizer (50 ppm)** **- Soak for infected finger, etc. (50 ppm)**	Liquid ClO_2 – External/Oral **- Skin abrasions and lacerations (51-100 ppm)** **- Better hand sanitizer (75-100 ppm)** **- Feet (anti-fungal – 100-200 ppm)** **- Better soak for infected finger, toe, etc. (150-200 ppm)** **- Nail fungus removal (drops of 500+ ppm daily)** **- Skin cancer removal (soak tissue with 4000 ppm, put on spot, cover with plastic tape for 5-15 min – repeat daily)**
Mist ClO_2 – Nebulizer or Ultrasonic Humidifier **- Infection of lungs, respiratory track & nasal passages (5-20 ppm, ideally in 0.9% saline solution) inhaled for from 2 to 5 minutes each hour for 6 to 8 hours a day** **- Skin abrasions and lacerations (20 ppm)** **- Eyes (just 1 to 2 seconds), ears, face (acne), eczema (20 ppm)**	Mist ClO_2 – Nebulizer or Ultrasonic Humidifier **- Infection of lungs, respiratory track & nasal passages (21-50 ppm, ideally in 0.9% saline solution) inhaled for from 5 to 10 minutes each hour for 8 to 12 hours a day** **- Skin abrasions and lacerations (50 ppm)** **- Eyes (just 1 to 2 seconds), ears, face (acne), eczema (21-50 ppm)**	Mist ClO_2 – Nebulizer or Ultrasonic Humidifier **- Skin abrasions and lacerations (51-100 ppm)** **- Feet (anti-fungal) (100 ppm)** **- Private parts (51-100 ppm)** **- Ears, face (acne), eczema (51-100 ppm)**
Liquid ClO_2 used Intravenously - Ideally diluted in 0.9% Sodium Chloride (NaCl) IV Solution **- Intravenous use for all viral & bacterial infections, cancers and sepsis (5-20 ppm) and from 100cc to 250cc, 2 to 7 times a week (5-15 ppm could be done 7 times a week). These numbers are for an average sized adult (62kg) & should be reduced for children proportionally, based on weight. All above, as tolerated.**	Liquid ClO_2 used Intravenously - Ideally diluted in 0.9% Sodium Chloride (NaCl) IV Solution **- Intravenous use for all viral & bacterial infections, cancers and sepsis (21-50 ppm) and from 100cc to 250cc, 2 to 7 times a week (100cc of 25-35 ppm, 7 times a week). These numbers are for an average sized adult (62kg) & should be reduced for children proportionally, based on weight. All above, as tolerated.**	Liquid ClO_2 used Intravenously - Ideally diluted in 0.9% Sodium Chloride (NaCl) IV Solution **- Intravenous use for all viral & bacterial infections, cancers and sepsis (51-100 ppm) and from 100cc to 250cc, 2 to 7 times a week (100cc of 55-100 ppm, 7 times a week). These numbers are for an average sized adult (62kg) & should be reduced for children proportionally, based on weight. All above, as tolerated.**

The Chlorine Dioxide (ClO_2) Approach I Would Use for COVID-19

Of the above usages which have been compiled based upon studies done by the EPA, WHO, a multitude of other safety & efficacy studies, many thousands of user testimonies, & also based on my own personal experience doing the above treatments, at the first signs of COVID-19, for example a scratchy throat or any other minimal indications, I would start with the most "Conservative" level of ClO2 use from above (1st column) to treat COVID-19, or any respiratory infection for that matter. I would start at the lowest nebulizer or ultrasonic humidifier ClO2 ppm level shown & increase each hour to find the highest ppm level I could tolerate, including going beyond 20 ppm & up to 50 ppm in the "Moderate" level. I would inhale the mist through each nostril individually to inactivate any viruses that may be present there & I would inhale it through my mouth to take care of my throat & lungs. I believe that this simple approach would probably be all that's needed to stop COVID-19. However, if it persisted for even 1 day, I would immediately start an IV of 100cc using 25-35 ppm & I would do that daily along with the hourly mist inhalation. This double pronged approach should stop the disease but if not I would increase the IV to 100cc of 55-100 ppm daily. That would be my approach. *(Please read the "Medical Information Disclaimer" above)*