

IVERMECTIN and FENBENDAZOLE Testimonial - 49 year old Georgia man with Stage 4 Diffuse Large B-Cell Lymphoma in mesentery has almost complete response after 3 months and NO CHEMO!



DR. WILLIAM MAKIS MD

MAY 14, 2025 · PAID



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DLBC NHL Stage IVb Medication Recommendations

Yahoo/0 - DON... ☆



From: [REDACTED]

To: makisw79@yahoo.com



Sat, Dec 21, 2024 at 7:44 a.m. ☆

Dr. Makis,

Is it possible to consult or request medication recommendations? We are looking to avoid another round of chemo or other harsh treatments that have a 50% 5-year outcome. We are looking to overcome this cancer with health intact.

Thank you!

[REDACTED]

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STORY:

- 49 year old Georgia man presented to ER in Oct.2024 with a large abdominal mass, pain and ascites.
- He was diagnosed with Stage 4 Diffuse Large B-Cell Lymphoma

- Had very bad side effects with 1st cycle of R-CHOP chemo and did not want to repeat any more chemo treatments.
- Early January 2025 we started:
- Ivermectin 1mg/kg/day
- Fenbendazole 1332mg/day

RESULTS after 3 months:

Re: Follow-up # [REDACTED] (Dr.Makis)

Yahoo/06 - TES... ☆



From: [REDACTED]
To: William Makis



Fri, May 2 at 6:22 a.m. ☆

Hello Dr. Makis,

I wanted to follow up with you and share scan results from April! There is only a 3x2 cm area left! I was able to receive and start the Ivermectin at the end of January, so these are the results from 3 months of the full protocol, 4 months with as many other things as I could. I **did not continue chemo, but did continue your protocol** along with the bowel disease protocols given to me by my local integrative doctor.

Please let me know how I can get on your calendar to schedule a follow up appointment to know what adjustments if any should be made at this time.

Thank you!

[REDACTED]



From: [REDACTED]
To: William Makis



Thu, May 8 at 1:19 p.m. ☆

Thank you! The oncologist wants to follow up with a PET in another 3 months.

[REDACTED]

CT Chest/Abdomen/Pelvis with Contrast

Collected on Apr 25, 2025 3:43 PM

Results

Impression

Significant treatment response. Masslike conglomerate in the left abdomen on previous exam demonstrating significant improvement. Minimal residual mesenteric nodularity measuring 3 x 2 cm.

HISTORY:

DLBCL, C83.38-Diffuse large B-cell lymphoma of lymph nodes of multiple regions (CMS/HCC).

COMPARISON:

October 23, 2024

CT CHEST ABDOMEN PELVIS W IV CONTRAST

FINDINGS:

No infiltrate pneumothorax or effusion. Thyroids unremarkable. Similar calcified mediastinal and hilar lymph nodes probably related to treated disease. Small pericardial effusion. Nonaneurysmal aorta.

Liver gallbladder spleen pancreas and adrenal glands are unremarkable. No renal stone or

Liver, gallbladder, spleen, pancreas and adrenal glands are unremarkable. No renal stone or hydronephrosis. Mild bilateral haziness. Prior ventral hernia.. No bowel dilatation. No adenopathy or ascites. Bones and soft tissues are unremarkable. Significant improvement in mesenteric nodularity and inflammatory changes from prior exam. Residual nodularity left mid abdomen on image 80 measuring 3 x 2 cm.

My Take....

Ivermectin and Fenbendazole are often dismissed as not having had any effect on the cancer when the patient also takes chemo. “Chemo did all the work”.

But when there is no chemo, and the cancer shrinks or disappears, the critics are silent.

There was no chemo in this case and the patient is almost cancer free after 3 months of Ivermectin and Fenbendazole only.



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