

IVERMECTIN and FENBENDAZOLE Testimonial - Stage 4 Rectal Cancer (small cell Neuroendocrine) with metastases to the liver and bones has a dramatic response to therapy.



DR. WILLIAM MAKIS MD

APR 04, 2025 · PAID



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HOW IT STARTED...

● My mother has stage 4 colorectal cancer- spread to liver and bones.
Please help us

Yahoo/0 - DON... ☆



From: [Redacted]

To: makisw79@yahoo.com, [Redacted]



Sun, Jan 5 at 11:18 a.m.



My mother has stage 4 colorectal cancer- spread to liver and bones. Please help us! Dear Dr. Makis, a friend from work, told me about your protocol using Fenbenzadole and ivermectin to treat metastatic colon cancer. My mother is in the hospital and I'm afraid for her life.

Can you send me suggested dosing and protocol?

She just got a port for chemo and radiation.

Please help me, sir. This is what we've started based on your protocol published on X :

Fenben - dose: 444 mg

Ivermectin pill - around 30 mg I believe

Best,

[Redacted signature]



HOW IT'S GOING...

Update on My Mom's stage 4 RARE Cancer & Question About Ongoing Protocol

Yahoo/06 - TES... ☆



From: [REDACTED]

To: [REDACTED], William Makis



Wed, Apr 2 at 4:09 p.m. ☆

Dear Dr. Makis,

I hope this message finds you well. I wanted to reach out with an update on my mom's progress since we last connected around the end of December or early January. As you may recall, she was diagnosed with small cell carcinoma—rare in that it originated in the rectum and had metastasized to the liver, rather than the lungs as is more typical.

Today, we received some incredible news from her oncologist:

"The doctor said the scans were AMAZING! He is very, very happy. The tumor has shrunk more than half and changed density for the better. The liver and all the other places it was going are practically undetectable. This will be the last day of chemo! We will start radiation next to zap the final stuff. He is NOT expecting the MRI to show anything—it's just for precautions."

We are overwhelmed with gratitude for this progress, especially after being told this cancer was likely terminal. Your protocol has given us both hope and healing, and we thank God for leading us to you.

Given her current response and transition into radiation, I wanted to ask your thoughts on whether she should continue taking Ivermectin and Fenbendazole daily, or if you'd recommend incorporating days or weeks off moving forward. We want to make sure we're following the best possible path from here on out and would appreciate your guidance on dosing during this next phase.

We're currently on around 80 mg of IVM daily and 888 mg of Fenben daily

Thank you again for the hope you've given us and for being such a light in a very dark time.

With deepest gratitude,

[REDACTED]

[REDACTED]@gmail.com

My Take...

Small cell carcinomas are much more aggressive than rectal cancers and response to chemotherapy isn't all that great.

The response to combined Ivermectin, Fenbendazole and chemo therapy is particularly impressive after only 3 months!

Grok 3 beta ▾



give me a short summary of small cell rectal carcinoma

Small cell rectal carcinoma is a rare, aggressive subtype of rectal cancer classified as a neuroendocrine carcinoma. It is distinct from the more common rectal adenocarcinoma due to its rapid growth and early metastatic potential. It shares similarities with small cell lung cancer, often treated with platinum-based chemotherapy (e.g., cisplatin/etoposide), and may initially respond in 30% to 50% of cases. However, responses are typically short-lived, and the prognosis is poor, with frequent recurrence and a 2-year survival rate around 23% based on broader gastrointestinal small cell carcinoma data. Treatment may also involve surgery or radiation, but its rarity complicates standardized approaches, requiring individualized care.

mouritsmjoensen@gmail.com

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