

IVERMECTIN and MEBENDAZOLE Testimonial - 63 year old woman with Stage 4 Ovarian Cancer metastatic to peritoneum sees CA125 drop from 2138 to 357, most cancer gone on PET!



DR. WILLIAM MAKIS MD

APR 06, 2025 · PAID



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**From:****To:** William Makis

Wed, Oct 23, 2024 at 5:10 a.m.



Thank you Dr Makis.

I have been in the medical profession, practicing as a [REDACTED] for 35 years. I am currently 63 y.o.a. Unfortunately, I did take the first two MRNA COVID injections in 2021. My BMI has been close to or very normal my entire life. My dear Mother passed from Ovarian cyst-adenocarcinoma at the age of 60. I watched her go through standard treatment and vowed I would not ever participate unless there were great improvements.

I was diagnosed with stage 3 Ovarian Cancer September 12, 2024. I did go for the usual standard consultations however I chose not to receive standard chemotherapy. They would only perform surgery (debulking) if I agreed to chemotherapy.

I decided to consult with an integrative MD who has experience treating cancer alternatively. I've been following her protocol since early October. I started Ivermectin shortly after diagnosis however low dose @ 12 mg. Once I found out about Fenbendazole and Mebendazole, I ordered the Fenbendazole and started taking 300-600 mg/day and increased dose of Ivermectin to 24mg/day.


My Integrative MD has recommended a host of nutraceuticals and increased Fenbendazole to 1gm/day. My current weight is 121 lbs and I am 5'5".

My CRP taken last week was 0.8 mg/dl (never taken before) CA-125 taken at diagnosis was 1,097 U/ml. B/L Adnexal tumors on MRI were about 3 to 3.5 mm with Right side slightly larger than left. Mild ascites which hasn't seemed to change clinically at least. Had a PET scan as well.

I have been following you on Substack for the past few weeks enjoying your posts which have made me feel hopeful. Love the journal article that was published along with Dr Paul Marik. God Bless all of you for standing up. I studied viruses in college more than most and I knew about the coronavirus and watched in horror. I only took the "vaccine" because my [REDACTED] was on chemotherapy for end stage Ovarian cancer. She told my husband and I that we wouldn't be able to see her if we didn't take the injection. She was an [REDACTED] who believed wholeheartedly in the "shots."

Thank you so much. I am grateful to have been able to get in touch with you,





From: [Redacted]

To: William Makis

Thu, Nov 14, 2024 at 9:48 p.m. ☆

Nice to hear from you. Thank you!

CA-125 - 9/7/2024. 1097 units/ml [Redacted]

-9/26/2024. 1,668 [Redacted]

-11/12/2024. 2,628.5
[Redacted]

Also concerning is D-Dimer results. Went from 2.42 mg/L 2 weeks ago to 3.63 mg/L 11/12/24.

I am currently taking 24 mg Ivermectin (United bioceuticals- North Dehli, India)

1,000mg of Fenbendazole (Panacur) manufactured by Merck. I was Rx'd 4 days of Fenbendazole and 3 days of Mebendazole 100 mg (marketed? by Kachhela Medex)

My primary care has been acquiring these through a contact in India. The panacur we have been ordering on our own.

Any help that you can provide would be greatly appreciated. If you would like the actual blood reports happy to send those as well.

Take care,

Re: Follow-up # [Redacted] - CA125 2628 to 853 to 619

From: [Redacted]

Yahoo/0 - DON... ☆

Sat, Feb 1 at 9:02 a.m. ☆

To: William Makis

Thank you Dr Makis for your encouragement.

I am now taking Ivermectin 72 mg once daily and 1,000 mg of Mebendazole in two divided doses. I added the milk thistle, Berberine 500 BID and olive leaf extract as per your protocol. I plan to go up on the Mebendazole as well.

Also on Vit E,D and turkey tail.

No chemo this past week due to WBC going down to 1.0 now up to 10 after Neupogen. Plan is another chemo (lower dose) next Tuesday.

I am truly grateful for your support. This journey is not easy even @ an integrative center.

Take care and God Bless,

[REDACTED]

• Great news on PET/CT!

Yahoo/06 - TES... ☆



From: [REDACTED]
To: William Makis



Wed, Mar 12 at 10:08 a.m.



WOW Dr Makis. Would love to know your thoughts on this report. To me this is so remarkable!

Thank you and praise the Lord!



Here is the report:

PET/CT BODY SCAN - FLUORODEOXYGLUCOSE

HISTORY: Ovarian carcinoma, restaging

COMPARISON: PET/CT dated 10/04/2024

IMPRESSION:

1. The extensive peritoneal carcinomatosis seen previously is essentially resolved on CT and PET. It is likely that this has all responded to interim treatment, but there is a paucity of contrasting intra-abdominal fat that obscures fine anatomic details and makes it impossible to be certain that there has been complete resolution.
2. The retroperitoneal adenopathy seen previously has returned to normal on today's CT and PET images.
3. The left axillary adenopathy seen previously has resolved on both CT and PET images.
4. Most of the pelvic adenopathy seen previously has returned to normal on CT and PET, but there is an enlarging left external iliac node (or less likely a peritoneal implant) that shows borderline high FDG uptake. This is the only evidence for progressing malignancy that is seen on today's exam.

5. The suspected capsular implant seen previously at the posterior aspect of the spleen is no longer visible on CT or PET.
6. Moderate pleural effusions, right worse than left, new since the previous exam.
7. Moderate pericardial effusion, worsening.
8. Ascites, appearing much the same as on the older exam.
9. Calcified uterine fibroids.
10. Photopenic renal cysts are stable and very likely benign, but not definitively evaluated in the absence of IV contrast.
11. Cachexia.

● Re: Follow-up # [REDACTED]: Great news on PET/CT!

Yahoo/0 - DON... ☆



From: [REDACTED]
To: William Makis



Wed, Mar 12 at 4:18 p.m. ☆

Thank you Dr Makis. Much of the congratulations goes to you for courageously developing the protocol which has helped so many people!

For now, I will just stay on your protocol as is and for how long? I do not want to take any more chemo for various reasons including the pleural and cardiac effusions present. Although it might take some time to see every bit of it gone, is there anything else that we should add to the protocol? Also leaving the cancer center in [REDACTED] in April to go back to [REDACTED]. Would like to follow up with you as to your recommendations for further care/testing Please advise when you are able.

Thank you hardly expresses my heartfelt appreciation!

God Bless you and your family,

[REDACTED]



My Take...

63 year old woman with Stage 4 Ovarian Cancer metastatic to peritoneum.

In early October 2024, she saw an integrative MD who put her on low dose Ivermectin (24mg) and Fenbendazole 300-600mg, eventually increasing to 1000mg a day.

Her CA125 increased from 1097 to 1668 (+ Fenben/IVM) to 2628.5 by mid Nov.2024!

Her CA125 rose from 1668 to 2628 after being on Fenbendazole and low dose Ivermectin for over a month!

Then she came to me.

I switched her from 1000mg Fenbendazole to 1000mg Mebendazole and increased the Ivermectin from 24mg to 72mg.

Her CA125 from that point onwards: 2628.5 to 853 to 619 to 357

PET/CT Scan showed:

- **“extensive peritoneal carcinomatosis seen previously is essentially resolved”**
- **“retroperitoneal adenopathy seen previously has returned to normal”**

- “left axillary adenopathy seen previously has resolved on both CT and PET images”
- “most of the pelvic adenopathy seen previously has returned to normal on CT and PET”
- “suspected capsular implant seen previously at the posterior aspect of the spleen is no longer visible on CT or PET”

Lesson:

Most Integrative MDs don't know what they're doing when it comes to Ivermectin and Benzimidazoles.

This patient wasn't responding to low doses of Ivermectin or Fenbendazole and the Integrative MD increased the Fenbendazole dose but the CA125 rose regardless, from 1097 to 2628!

Ovarian Cancer is known to respond to Mebendazole and Ivermectin but South Korean researchers discovered it doesn't respond well to Fenbendazole.

Some health professionals are attracted to the promise of repurposed drugs but wouldn't know what to do at the sign of first trouble with their Protocol. Imagine coming to a health professional who has no idea what to do when their Ivermectin Protocol fails.

That's why thousands of Cancer patients come to me and my Ivermectin Cancer Clinic. They seek the unique expertise I provide.

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