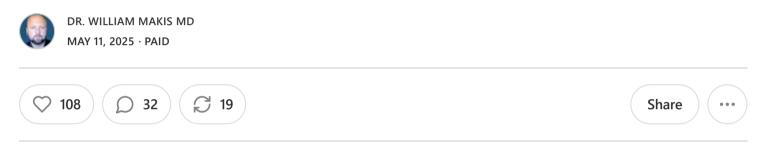
Ivermectin and Mebendazole Testimonial - 63 year old woman from France with Stage 4 Ovarian cancer has excellent response, CA125 from 165 to 32 and improved PET/CT scan





Dear Dr. Makis,

I am writing to you from France, where my family has been deeply affected by cancer. My mother was first diagnosed with ovarian cancer in 2007, faced a recurrence in 2009, and remained in complete remission until it returned in 2022. Tragically, during this period, I lost my younger brother to an undifferentiated cancer at the age of 29.

Despite everything, we have not given up hope. Your recent post on Twitter about ivermectin has sparked a sense of renewed optimism. I wanted to ask if you accept patients for remote consultations, or if it would be necessary for us to travel to see you in person?

Thank you for your time and consideration.

Best regards,



63 year old patient from Paris, France was diagnosed with Stage 4 Ovarian Cancer recurrence in 2022.

She had progression of mediastinal lymph node metastases in November 2024 as well as new pleural metastases (about 10 foci or tumors on the pleura).

"Mid-November 2024: PET scan control showed an increase in the number and intensity of lymph nodes in the mediastinum, with multifocal extension to the pleura of the right lung, including about ten new nodules, two of significant intensity. A pleural effusion on the right side appeared."

She started Carboplatin and Gemcitabine in early Dec.2024

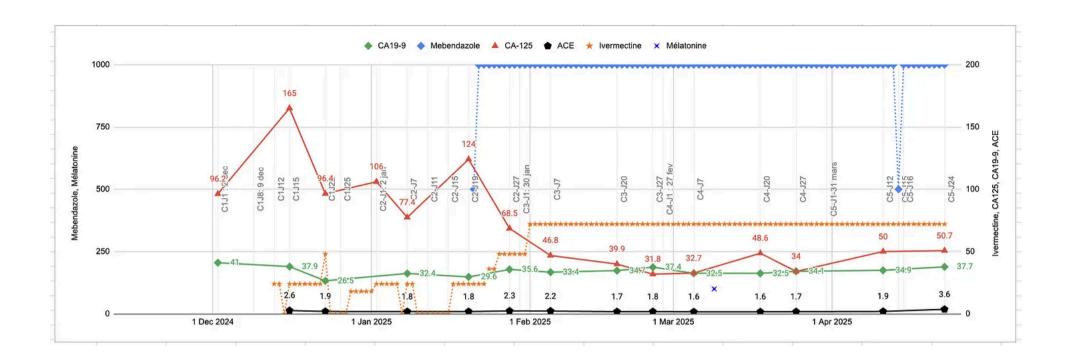
She also started:

Ivermectin 1mg/kg/day (starting in early Dec.2024)

Mebendazole 1000mg/day (starting in late Jan.2025)

RESULTS:

The CA125 came down nicely from 165 down to 124 on Ivermectin alone, and from 124 down to 31.8 when Mebendazole was added.



----- Forwarded message -----

From:

Date: Fri, Mar 28, 2025 at 1:15 PM

Subject: Re: [Progress update - Tests Results] ALTERNATIVE MEDICINE PROTOCOL (Dr.Makis)

To: William Makis < makisw79@yahoo.com>

Cc: >,

Hi Doctor Makis,

I wanted to provide you with a quick progress update on my treatment and my control results after completing 4 cycles of chemotherapy.

I attached:

- the reports of the last blood test (Tuesday mar 25) and of the pet scan (Wednesday mar 26) in French.
- an English translation of these reports made by AI.
- the images of the pet scan.
- few graphics showing the evolution of CA125, CA19-9, ACE as well as liver function tests.

Treatment:

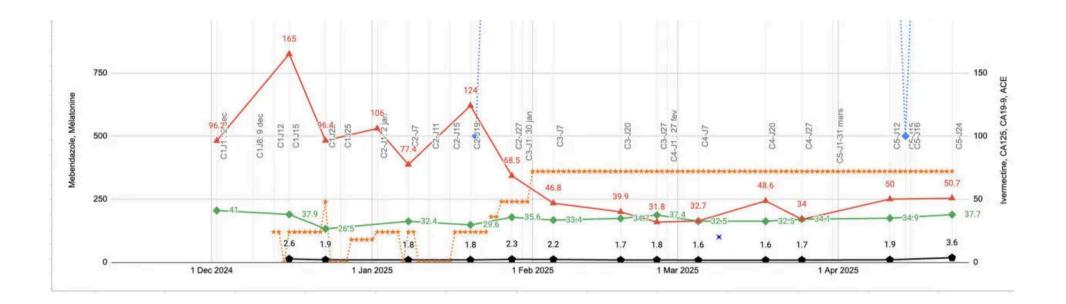
- I've completed 4 cycles of chemotherapy. My oncologist said the results are reassuring and suggested continuing with two more cycles of chemotherapy, but with a reduced dose and longer intervals between treatments (the objective is to preserve the pateletes).
- I've been taking 72 mg of Ivermectin since Feb 1st. Before that I took lower doses (24 mg then 48 mg for the last 2 weeks of Jan).
- I'm taking 1000 mg of Mebendazole starting January 22nd
- I tried just one unique dose of 100 mg of melatonin on March 9th.

To follow up on our previous discussion, I want to let you know that the liver function parameters have decreased in the latest test without needing to reduce the alternative treatment.

Can you please give me feedback on my results? What are your thoughts about the fact that the CA125 is struggling to keep decreasing?

I also would like your feedback on the oncologist's decision regarding the continuation of my chemotherapy.

Many thanks for your help! Best Regards.



Date: 26/03/2025

PET SCAN with 18FDG

INDICATION - CLINICAL CONTEXT:

62-year-old patient with a history of ovarian lesion with infra-mediastinal lymph node recurrence.

Previous PET scan on 11/12/2024 showed a worsening of the infra-carinal and hilar mediastinal lymph node involvement, associated with the appearance of multifocal right pleural involvement represented by about ten lesions.

This is a post-therapeutic re-evaluation after four cycles of GEMZAR and CARBOPLATIN.

Thoracic region:

- No intraparenchymal pulmonary focus.
- Partial but significant regression of the infra-mediastinal posterior lymph node involvement and the infra-carinal lymph node, infra-carinal target SUVmax decreasing from 12.7 to 4.6.
 - Partial regression of the right pleural effusion.
- Partial regression in intensity and extent of the foci corresponding to right pleural nodular thickenings, right upper lobe pleural parietal target SUVmax decreasing from 17 to 7.
 - No intramammary lesion.

No axillary lymph node lesion.

CONCLUSION:

Compared to the PET-FDG of 11/12/2024:

- No residual pelvic lesion.
- Significant regression of mediastinal infra-carinal and hilar lymph node involvement.
 - Significant regression of the multifocal right pleural involvement.
 - Partial resolution of the right pleural effusion.
 - No peritoneal lesion.
 - No bone lesion.

My Take...

This 63 year old patient from France with Stage 4 Ovarian Cancer took Ivermectin and Mebendazole for approximately 3 months.

CA125 went from 165 to 31.8.

PET/CT showed significant regression of:

Mediastinal lymph nodes, SUV 12.7 to 4.6

• Right pleural metastases, SUV 17 to 7

Ovarian Cancer seems to respond quite well to a combination of Ivermectin and Mebendazole.

Patients who take chemo in addition, tend to have more dramatic and quicker response to therapy.

Based on my experiences with Stage 4 Ovarian Cancer, I believe it may be curable. If I can confirm this with a number of Ovarian Cancer patients, I will publish it.



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Discussion about this post

Comments Restacks



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