# FENBENDAZOLE and CANCER Part 2 Treating Turbo Cancer - 10 new studies released in 2023-2024 (also Mebendazole) - suggested PROTOCOLS for COVID-19 mRNA Vaccine Induced Turbo Cancers





Fenbendazole: An Antitumor Agent with Effects on Bone Marrow and Immune System

Last year I published one of the most popular articles on Fenbendazole and Cancer Treatment ever published, which went viral internationally (even Joe Rogan read my article on his show):



(Oct.3, 2023) - FENBENDAZOLE and CANCER - at least 12 Anti-Cancer mechanisms of action. Not approved by FDA. Cheap. Safe. Kills aggressive cancers. Why no Clinical Trials? Nine research papers reviewed.

# 10 NEW STUDIES SINCE LAST ARTICLE!

- (<u>2024 Apr, Rodrigues et al</u>) Repurposing mebendazole against triple-negative breast cancer CNS metastasis
- (2024 Feb, Eid et al) Investigating the Promising Anticancer Activity of Cetuximab and Fenbendazole Combination as Dual CBS and VEGFR-2 Inhibitors and Endowed with Apoptotic Potential
- (2024 Feb, Park et al) The microtubule cytoskeleton: A validated target for the development of 2-Aryl-1*H*-benzo[*d*]imidazole derivatives as potential anticancer agents
- (2024 Jan, Matsuo et al) Parbendazole as a promising drug for inducing differentiation of acute myeloid leukemia cells with various subtypes
- (2023, Dec, Iragavarapu-Charyulu et al) A novel treatment to enhance survival for end stage triple negative breast cancer using repurposed veterinary anthelmintics combined with gut-supporting/immune enhancing molecules
- (2023 Nov, Aliabadi et al) In vitro and in vivo anticancer activity of mebendazole in colon cancer: a promising drug repositioning

- (<u>2023 Nov, Jung et al</u>) Fenbendazole Exhibits Differential Anticancer Effects In Vitro and In Vivo in Models of Mouse Lymphoma
- (2023 Sep, Garg et al) Network pharmacology and molecular docking studybased approach to explore mechanism of benzimidazole-based anthelmintics for the treatment of lung cancer
- (<u>2023 Jun, Mukherjee et al</u>) Ketogenic diet as a metabolic vehicle for enhancing the therapeutic efficacy of mebendazole and devimistat in preclinical pediatric glioma
- (<u>2023 Feb, Lee et al</u>) Benzimidazole and its derivatives as cancer therapeutics: The potential role from traditional to precision medicine

# MY TAKE ON MOST RECENT RESEARCH:

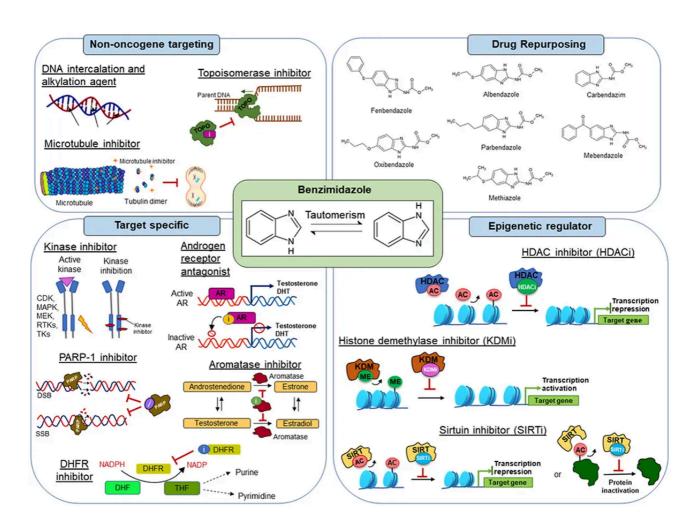


Image Source: (2023 Feb, Lee et al) - Benzimidazole and its derivatives as cancer therapeutics: The potential role from traditional to precision medicine

There is still some research being done on Fenbendazole & Cancer, but researchers are focusing more on other related compounds in the "Benzimidazole family", namely Mebendazole, but also Albendazole, Parbendazole. Why?

# **COST:**

Fenbendazole is cheap. If big pharma is going to make money (especially in cancer treatment), they need an expensive compound and Fenbendazole isn't it.

Fenbendazole is not FDA approved. It's dirt cheap.

Mebendazole is FDA approved. It's expensive.

Albendazole is FDA approved. It's very expensive.

According to medical experts, doctors are routinely prescribing both Albenza (the brand name for albendazole) and another drug called Emverm (the brand name for mebendazole) without realizing how increasingly expensive they are. Both drugs are made by Impax Laboratories.

Albenza, for instance, has shot up from \$6 per pill in 2010 to \$190 per dose now; that same year mebendazole generic sold for about \$16 per pill—and today, Emverm sells for about \$430 per dose, according to Symphony Health, which tracks the pharmaceutical market.

**<u>Dr.Thomas Seyfried</u>** talks about the cost of Mebendazole



# PRACTICAL APPROACH TO USING FENBENDAZOLE IN CANCER TREATMENT (Disclaimer: the following is not medical advice)

In "Fenbendazole and Cancer Part 1", I covered all the mechanisms of action that Fenbendazole has shown against cancer in many in vitro and in vivo studies.

The 10 new studies published in 2023-2024 only confirm what we already know from previous studies. Fenbendazole, Mebendazole, Albendazole are highly effective against many cancers.

There is one article I want to highlight though because it has an extremely important concept:

- (2023 Jun, Mukherjee et al) Ketogenic diet as a metabolic vehicle for enhancing the therapeutic efficacy of mebendazole and devimistat in preclinical pediatric glioma
- "This study investigated the influence of **nutritional ketosis** on the therapeutic action of **mebendazole** (**MBZ**) and devimistat (CPI-613) against the highly invasive VM-M3 **glioblastoma** cells in juvenile syngeneic p20-p25 mice"
- "maximum therapeutic benefit of mebendazole and CPI-613 on tumour invasion and mouse survival occurred only when the drugs were administered together with a ketogenic diet (KD)

KETOGENIC DIET IS CRUCIAL IN CANCER!!!

Since my previous Fenbendazole article, I've had 1000s of questions sent to me. Not about mechanisms of action against Cancer. But about practical use - how to use Fenbendazole or Mebendazole to treat Stage 4 Cancers, what formulations, what doses?

The goal of this article (Part 2) is to answer many of those questions to the best of my ability.

# **EXPERIMENTAL CANCER PROTOCOLS:**

I propose the following thought experiment & hypothetical "Experimental Protocols" for Turbo Cancer Treatment:

#### **FENBENDAZOLE**

LOW DOSE	MEDIUM DOSE	HIGH DOSE	VERY HIGH DOSE
222mg 3x per week	222mg/day (6 days a week)	444mg/day (6 days a week)	888mg or 1000mg/day (6 days a week)
Cancers in remission Strong family history Genetic predisposition Prophylaxis	Starting dose for most cancers Weight < 200lb (fenbendazole.org)	mRNA Turbo Cancer Aggressive Cancers Stage 4 Weight 200+ lb	Extensive metastatic disease Extremely poor prognosis
Check liver function & kidney function	Check liver function & kidney function	Check liver function & kidney function	Check liver function & kidney function
Joe Tippens Protocol: 222 mg Fenbendazole 3 days on, 4 days off (Panacur C) Vitamin E 800 IU/day Curcumin 600mg/day CBD oil 25mg/day	Taken with/after meal Milk Thistle 250mg twice a day with food (liver support)	Taken with/after meal Milk Thistle 250mg twice a day with food (liver support)	Max 30-50mg/kg/day for 5 days (very rarely used in this dose range)

- You can look at <u>fenbendazole.org</u> for suggested dosing and dose calculator
- Dr.Tom Rogers, Founder of "Performance Medicine" has similar protocols.
- For anyone COVID-19 mRNA Vaccinated diagnosed with cancer (Turbo Cancer), I'd probably be looking at starting at 444 mg a day.
- For particularly aggressive Turbo Cancers or bad cases, I'd even consider pushing towards 888 mg/day (444 mg twice a day) or 1000 mg/day.

- Highest dosing I've seen is 30-50mg/kg/day for 5 days, based on the "Merck Manual", however very few claim to have taken this dose.
- Fenbendazole can elevate liver function tests, so it would be a good idea to have a family doctor monitor those

### WHAT ABOUT MEBENDAZOLE?

#### MEBENDAZOLE

LOW DOSE	MEDIUM DOSE	HIGH DOSE	VERY HIGH DOSE
100mg/day	200mg/day	500mg-1500mg/day	4g/day
Cancers in remission Strong family history Genetic predisposition Prophylaxis	Starting dose for most cancers	mRNA Turbo Cancer Aggressive Cancers Stage 4	Extensive metastatic disease Extremely poor prognosis
Check liver function & kidney function	Check liver function & kidney function	Check liver function & kidney function	Check liver function & kidney function
Clinical Trial NCT02201381	2011 Dobrosotskaya et al (adrenocortical ca, regression of liver mets) 2014 Nygren et al (colon ca metastases)	Phase 1 Clinical Trial Brain ca NCT02644291	2021 Mansoori et al

- Here are the references for this dosing schedule:
- For Maximum dose of 4g/day being safe, that's from a Phase 2 Clinical Trial for Gastrointestinal Cancer: (2021 Mansoori et al)
- (2021 Chai et al) summarizes the various studies that have looked at Mebendazole in Cancer and the doses used.
  - 500mg-1500mg/day (<u>Phase 1 Clinical Trial</u>, pediatric brain tumors)
  - 200mg/day (2011 Dobrosotskaya et al) (adrenocortical ca)
  - o 200mg/day (2014 Nygren et al) (colon ca lung and LN mets)
  - 100mg/day (<u>Clinical Trial</u>, UK)
- So far, several studies in the literature have used 200mg/day with some success, however given that it is safe to go up to 4g/day, when we're dealing with

aggressive mRNA Induced Turbo Cancers, 200mg/day is probably not sufficient.

- Why Mebendazole over Albendazole (2021 Chai et al):
  - "However, because of the toxicity of albendazole, for example, neutropenia due to myelosuppression, if high doses are used for a prolonged time, mebendazole is currently more popularly used than albendazole in anticancer clinical trials."

# My Take...

My goal with these articles, is to provide as much clear information as possible for someone dealing with cancer or mRNA Induced Turbo Cancer.

This article deals with the practical approach to using Febendazole or Mebendazole.

Hypothetical - if I was diagnosed with mRNA Induced Turbo Cancer, as a 40s year old male, I'd be strongly looking at taking a combination of Ivermectin (1mg/kg/day) and Fenbendazole (444mg/day). This decision would be made based on dozens of peer-reviewed papers that have been published, previous and ongoing Clinical Trials, etc.

Everyone's situation is different, however, it is important to arm yourself with medical knowledge that cancer doctors (Oncologists) will simply not give you, because they either don't know it, or they won't risk their careers to save you.



# Discussion about this post

Comments

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