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Lymphatic Urea/Nitrate Detoxification

Overview

The urea detoxification protocol supports individuals with elevated lymphatic toxicity due to pathogenic toxins. Ureas accumulate in the lymphatic compartment due to overproduction resulting from pathogens, and lymphatic compartment stagnation.

Elevated lymphatic ureas appear as cloudy or putrid saliva. The Salivary Urea test quantitatively indicates the level of ureas.



Protocol

The protocol supplies three different forms of magnesium to bind with accumulated ureas. Each form is designed to support contribute metabolically usable magnesium and assist one or more detoxification pathways.

| | Break | Lunch | Dinner | Form | Purpose |
|---------------------------------------|--------------------------------------|-------|--------|----------|--|
| Magnesium Thiosulfate | See Table Break & Lunch | | | Droppers | Supply Magnesium and sulfur for Sulfhydryl detox pathways. Magnesium binds ureas in blood for elimination through liver. |
| Dermal Magnesium | Daily Bath or topical. | | | Bulk | Magnesium Chloride is absorbed through skin into lymphatic compartment. Magnesium Binds ureas to aid elimination. |
| Lymph Flow Spray | Apply 1-3 times daily or as directed | | | Capsules | Ionic Magnesium and Malic acid for gall bladder support |

Magnesium thiosulfate is important for detoxification. Use an increasing amount, by adding 1 dropper daily at breakfast and lunch. increased amounts. Use the weight table below to determine the starting amount and daily amount.

NOTE: You will stop when you reach saturation. Saturation occurs when you have a loose stool that smells like sulfur. When you reach saturation, your titration is finished.

The maintenance level is 1/2 of the titration level for saturation. Either:

- Reduce both breakfast and lunch doses by 1/2
- Or Stop taking either the breakfast or amount.

The maintenance level is usually adequate prevent accumulation. The Maintenance level is the approximate amount required to prevent future deficiency. Use the maintenance daily to avoid future urea accumulation.

| Droppers (ml) | Weight in pounds | | | | | | |
|---------------|------------------|-------|--------|---------|---------|---------|------|
| | 20-50 | 51-80 | 81-110 | 110-130 | 130-160 | 160-200 | 200+ |
| Day 1 | 1 | 2 | 3 | 4 | 5 | 6 | 6 |
| Day 2 | 2 | 3 | 4 | 5 | 6 | 6 | 7 |
| Day 3 | 3 | 4 | 4 | 6 | 6 | 7 | 7 |
| Day 4 | 4 | 4 | 4 | 6 | 7 | 7 | 8 |
| Day 5 | 4 | 4 | 5 | 6 | 7 | 7 | 8 |
| Day 6 | 4 | 5 | 5 | 6 | 7 | 8 | 8 |
| Day 7 | 4 | 5 | 5 | 7 | 8 | 8 | 9 |
| Day 8 | 4 | 5 | 5 | 7 | 8 | 8 | 9 |
| Day 9 | 4 | 5 | 6 | 7 | 8 | 9 | 9 |

** Take each supplement at the recommended amount at Breakfast and Lunch.

Blood/Urinary Accumulation

Blood urea accumulation normally results when the liver is unable to process proteins. Elevated NO₃ reflects either overproduction of Nitrate ureas, or weak digestive ionization, causing under digested proteins to circulate.

Kidney filtration causes these excess ureas to be held with urine, resulting in elevated Urinary NO₃ ureas. This finding suggests a combination of factors:

- Poor protein digestion
- Inhibited liver performance

Other Considerations

Energetic and Oxygen support are very helpful:

- [Exercise With Oxygen Therapy](#) 15-45 minutes of exercise breathing 25-40% oxygen daily increases oxygen availability.
- Hyper baric oxygen, **HBOT, is NOT recommended. Individuals with severe nitrate dysregulation often have COPD. COPD means that the breathing reflex is no longer triggered by CO₂ but by oxygen depletion. HBOT elevates Oxygen enough that CO₂ accumulation can cause brain damage or death.**

Foods are important:

- Avoid sugar/starch foods;
- Avoid food fried in vegetable oils;

- No Trans fats

Cellular liver dysfunction is typical, because anabolic metabolism tends to host viral infection. These supplements are beneficial to help with liver performance:

- Mushroom Heteropolysaccharides (Immunomodulating & help with
- Silymarin (Protects Liver Cells)
- Liposomal Phosphatidylcholine (Liver regeneration and detox aid)
- Selenium (preferably lipid bound)
- Pectin (helps dissolve liver/gall stones)

Notes:

- This protocol often activates the immune system. It is common to experience one or more bouts of viral infections as the immune system gains the resources required to overcome viral infection;
- This protocol often activates a detoxification release. Some individuals may experience several days of diarrhea as the body releases toxins which accumulated in the cells. In this case, diarrhea is a nuisance, but a blessing.
- Urine may become more dense as kidneys release stored urea toxins;
- Do not take supplements late in the day because they tend to activate catabolic metabolism and may reduce sleep quality.

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