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Urea/Nitrate Detoxification

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Protocol:

- [Level-1 Magnesium Thiosulfate Only](#)
- [Level-2 Full Protocol](#)

Overview

In Urine, these incoming proteins telltale a combination of liver and digestive dysfunction resulting in elevated concentrations of incoming proteins. These are reflected in NH_4 , Ammonia, and NO_3 , or Nitrate proteins. These are measured using tests that measure [Ammonium](#) and Nitrate levels in a test solution.

In saliva, elevated Nitrate protein levels suggest elevated feedstock for pathogenic organisms while elevated Ammonium levels suggest bacterial waste indicating overgrowth of potentially pathogenic organisms.

Elevations in these levels almost always accompanies or precedes serious health issues.

Blood urea levels indicated that the kidneys are discarding proteins which were both undigested, and beyond the liver's current processing ability. As a result elevated NO_3 Urea's indicate a combined digestive and liver challenge.

These circulating under digested proteins provide feedstock for a range of serum and tissue pathogens

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which often contribute to neurological, and many other symptoms..

Restoring normal levels is often a priority because reducing pathogen feedstock, reduces pathogen survival advantage, and hence toxin load, which in turn dramatically influences well being.

Urea hygiene has very significant influence on overall health.

[Click Here for Video Tutorial on Urea Nitrate Detox](#)

Lymphatic/Saliva Accumulation

Urea's in the lymphatic system are more concerning than in the urine.

Lymphatic urea's are evidenced by elevated levels indications. Saliva is lymphatic filtrate. Elevated levels suggest two potential challenges:

- Lymphatic flow back into the vascular system is limited;
- Elevated Urea may be generated generation in lymphatic compartments;
- Elevated NO₃ in lymph indicates elevated vulnerability to lymphatic compartment pathogens;
- Elevated NH₄ in lymph usually telltales active lymphatic pathogens. These organisms use elevated NO₃ urea as feedstock and normally predicate or accompany serious diagnosis.

Elevated lymphatic accumulation of NO₃ or NH₄ urea indicate that lymphatic flow is inhibited because the lymphatic system is unable to return lymph reagents to the vascular system. Lymphatic hygiene is a top priority.

Protocol Nutrients

Magnesium is the primary detoxification agent for urea. This schedule uses several different forms at the same time depending on the apparent need.

Supplement	Qty	Purpose
Magnesium Thiosulfate	Droppers	Supply Magnesium and sulfur
Dolomite / MgCO₃	Caps	Take on empty stomach. The carbonate quenches stomach acid. Taken with meals will reduce digestion. See Betaine-HCL for more info. Supply magnesium & Carbonate. Omit when alkalosis is present ($UpH + 2 * SpH$) / 3 > 6.4 or when breath rate below 14 breaths/minute
Magnesium Chloride	Droppers	Ionic Magnesium and Chloride
Lipoic+	Caps	Helps detoxify water and fat bound toxins. Aids liver performance. Take with Breakfast and/or lunch at convenience. Contains lipoic acid and milk thistle.

Level 1 - Magnesium Thiosulfate

The Level 1 Detox titration uses a ramped dosage of Magnesium Thiosulfate.

The schedule ends when you reach saturation. Saturation is indicated by a loose-sulphur smelling stool. This event indicates that your body has replenished reserves. STOP the schedule at this time and use the maintenance dosage. Saturation usually occurs between 3 and 15 days.

A handful people, with long history of fatigue report that the detox phase persisted for several days. The longest report of detox flow is 6 days.

One half of the saturation dose becomes your maintenance level. Ongoing use of the maintenance level will prevent recurrence of the deficiency. If you experience sulfur-stool using the maintenance dose, then reduce that amount by half again.

	<70	90-175	176+
	Droppers (breakfast / lunch)		
Day 1	2 / 2	4 / 4	6 / 6
Day 2	2 / 2	5 / 5	7 / 7
Day 3	3 / 3	6 / 6	8 / 8
Day 4	3 / 3	7 / 7	9 / 9
Day 5	4 / 4	8 / 8	10 / 10
Day 6	4 / 4	9 / 9	11 / 11
Day 7	5 / 5	10 / 10	12 / 12
Day 8	6 / 6	11 / 11	13 / 13
Day 9	6 / 6	12 / 12	14 / 14
Day 10+	7 / 7	13 / 13	15 / 15

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.

Remember the amount of Magnesium Thiosulfate dose you took that day and divide it in half. This is your maintenance level. The maintenance level is the approximate amount required to prevent future deficiency. Use the maintenance daily to avoid future urea accumulation.

Level 2 - Full Protocol

This is the advanced protocol. It includes multiple magnesium rich agents which increase urea elimination.

The numbers in the table detail the recommended amount of each agent to take at breakfast and lunch each day. The dosage first number in the table refers to the Droppers (10 drops) of magnesium thiosulfate. The following numbers correspond to recommended amounts of the other agents, Dolomite, Magnesium Chloride, and Lipoic+ respectively.

	Quantity by Weight in pounds						
	20-50	51-80	81-110	110-130	130-160	160-200	200+
Day 1	<u>1 1 1 1</u>	<u>2 1 1 1</u>	<u>3 2 2 2</u>	<u>4 3 3 2</u>	<u>5 3 3 3</u>	<u>6 3 3 3</u>	<u>7 4 4 4</u>
Day 2	<u>2</u> same	<u>3</u> same	<u>4</u> same	<u>5</u> same	<u>6</u> same	<u>7</u> same	<u>8</u> same
Day 3	3 same	4 same	5 same	6 same	7 same	8 same	9 same
Day 4	4 same	5 same	6 same	7 same	8 same	9 same	10 same
Day 5	5 same	6 same	7 same	8 same	9 same	10 same	11 same
Day 6	6 same	7 same	8 same	9 same	10 same	11 same	12 same
Day 7	6 same	8 same	9 same	10 same	11 same	12 same	13 same
Day 8	6 same	8 same	10 same	11 same	12 same	13 same	14 same
Day 9	6 same	8 same	10 same	12 same	12 same	13 same	14 same

* same means to take the same dosage as on day one for these supplements.

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

Kit

The [Nitrate Urea Detoxification Kit](#) is available to [members only](#) on our sponsor web site.

Adjuncts

Energetic supports often are very helpful in accelerating recovery and detox. These links provide more information on these tools:

- [PEMF](#) - improves cellular resistance to pathogens and lifts immunological function, supports cellular mineral absorption;;
- [Beta Hormesis](#) - reduces inflammatory markers and opposes pathogens.

Acute Urea Toxicity

Dietary magnesium is an effective agent to reduce / bind urea. Individuals in a urea challenge usually present significant levels liver dysfunction. Always consider using this program in conjunction with the [Liver Cell Detox](#).

Magnesium in various forms is used to bind urea's. This program uses several different magnesium compounds to aid in urea detox. The purpose column describes the cation role, because the magnesium role is to bind urea's in each case.

Acute urea toxicity causes cells to suspend oxygenic and nutrient respiration to avoid toxin absorption. Elevated urea's contribute to blood sludge and electrolyte stress, and cause swelling or edema. The appearance of edema depends on the balance of electrolytes, which disrupt fluid distribution inside and outside the cells.

Acute toxicity often accompanies acute neurological symptoms like those which accompany severe neurological diseases, [1](#), [2](#), [3](#) as well as most [neoplastic](#) conditions.

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.
- Hyperbaric 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 (Cellular Liver Support)
- 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.

