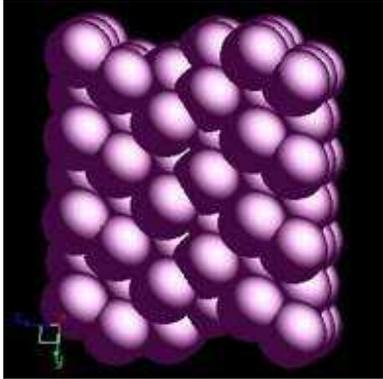


Dosages

Treatment of Influenza and other Diseases



*After testing over 500 patients, I found that 94.7% of my patients are deficient in inorganic iodine.
Dr. David Brownstein*

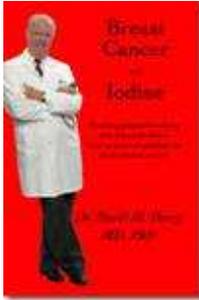
There are several reference points we can use to plot out iodine dosages for a variety of disorders that beg for the use of iodine for successful treatment. In this chapter I will present different views and practices from present as well as from the long past when iodine was vastly more popular as a medicine than it is today. For whatever irrational reason, doctors and patients fear iodine thus en masse do not use to its fullest potential.

Humans tolerate large doses of iodine but the ultra high doses that were used many decades ago are not required to get the most out of iodine therapy. Just a little goes a long way, as the governmental iodized salt programs showed but this dosage level was only affective for Goiter and its avoidance. It actually takes very little iodine to prevent this disease but no one ever said that was the only purpose and need for iodine in the body. Today people are more deficient then ever before because our need for iodine has increased in direct proportion to our toxic burdens especially of other competing halogens.

So effective is iodine that aerosols can be effective in sterilizing a room at levels not even detectable by humans. But Dr. David Derry of Canada says that, “Dietary iodine found in iodized salt is **below the amounts needed to fill mucus defense roles**. To protect themselves, people wishing to boost their defense against infections should supplement their diets with iodine.”

“Extremely high doses of iodine can have serious side effects, but only a small fraction of such extreme doses are necessary to kill influenza viruses,” continues Derry who tells us, “In 1945, a breakthrough occurred when J.D. Stone and Sir McFarland Burnet (who later went on to win a Nobel Prize for his Clonal Selection Theory) **exposed mice to lethal effects of influenza viral mists. The lethal disease was prevented by putting iodine**

solution on mice snouts just prior to placing them in chambers containing influenza viruses.”



Dr. Derry is one of several MDs that I refer to as the Iodine Doctors.

Dr. David Brownstein said, “After testing individuals and finding low iodine levels, I began to use smaller milligram amounts of iodine/iodide (6.25mg/day). Upon retesting these individuals 1-2 months later, little progress was made. I therefore began using higher milligram doses (6.25-50mg) to increase the serum levels of iodine. It was only with these higher doses that I began to see clinical improvement as well as positive changes in the laboratory tests. Why would people need the larger doses of iodine? Why have iodine levels fallen 50% in the last 30 years? As I pondered these questions, I came to the conclusion that the toxicity of modern life must be impacting iodine levels. It is well known that the toxic halides, fluoride and bromide, having a similar structure as iodine, can competitively inhibit iodine absorption and binding in the body. Because of the elevated levels of toxic halides in the environment and in the food supply, iodine levels have not only fallen but larger amounts of iodine are necessary to correct iodine deficiency as well as to promote a detoxifying effect of heavy metals.”

I have suggested that people put iodine into a nebulizer for aerosol treatment for transdermal effect into the lung tissues in the case of lung cancer, emphysema, asthma and tuberculosis. I make the recommendation to do the same with magnesium chloride, sodium bicarbonate and glutathione. It seems obvious that iodine would make the ideal first line of defense in influenza prevention and without doubt in the treatment of both swine flu and regular influenza. Iodine, teamed up with these other primary and very necessary substances, offers an exceptionally strong defense and treatment against viral infection. It certainly is better than the antiviral Tamiflu, which only reduces symptoms by only one day. It is really not hard to beat that.

Some physicians I know are also using chlorine dioxide as an agent for treatment either **transdermally or intravenously** applied but I would never use it for the prevention of anything. Though I have heard some success stories about chlorine dioxide I do not use it myself nor for my children. I always will reach for the iodine first for all the things that chlorine dioxide proponents advocate, for the iodine is much safer for oral usage, especially when used in the right form. The body needs iodine anyway as a fundamental nutritional item but when even heavier guns are needed instead of reaching for a pharmaceutical one can think of chlorine dioxide.

*A function of iodine in the human body relates to clear thinking.
The mind simply works better when the body is supplied the iodine it
needs and studies do show that iodine deficiency leads to decline in IQ.*

Despite its being critical to normal neurocognitive development, a new study finds that only 51% of US prenatal multivitamin brands contain any iodine, and in a number of randomly selected brands, the actual dose of iodine contained in the supplements did not match values on the labeling.[\[1\]](#) It is easy to understand a synthetic pharmaceutical being phased out but to have iodine, an essential nutritional element that doubles as a super effective full spectrum anti-pathogen, ignored for what it can do is not reasonable.

Dr. Michael B. Schachter says, “The treatment dose when a person is iodine insufficient is generally between 12.5 mg and 50 mg daily. Preliminary research indicates that if a person is iodine insufficient, **it takes about 3 months to become iodine sufficient while ingesting a dosage of 50 mg of iodine and a year to become iodine sufficient while ingesting a dosage of 12.5 mg of iodine daily.** However, the patient needs to be monitored closely with awareness of possible side effects and detoxification reactions.” This is quite a bit of iodine and if his statements can be substantiated then most people are using dosages which are much too low.

In fact if we put our attention on the full iodine story, which collides with the fluoride, mercury and bromide story we conclude that we can only err on the side of too low of a dose. Patients should push their dosages higher and higher until they get the desired result but I recommend doing this slowly unless there is little time as is the case in emergency situations or very late stage cancer. When using the Nascent Iodine one can dose pulse every two hours orally taking each individual dose up to as many as 20 drops and even at this level we are no where near points of iodine toxicity and tolerance. I have given my own three year old up to fifteen drops in a dose when she was confronted with fever and infection.

When treating life threatening diseases we do not have months to fool around with low dosages. We need to zoom up iodine levels quickly. And we need to get it concentrated to certain tissues or organs. Just to give you an idea of how high iodine dosages have been taken to we have to revisit the 1930s when iodine was still a universal medicine, present in the US Pharmacopeia and was used at much higher dosages than anyone even dreams of using today.

The usual dose for treatment was 300 mgs (46 drops of full strength Lugol's) to 1 gm (1000 mg, 154 drops). It is very important to realize that today's Lugol's is not universally the same as it was because of new federal legal requirements about concentration levels. The best company offers Lugol's at varying concentration levels. (2.2, 3 and 7 percent) Nascent is a 2 percent solution.

*Preoperative before thyroidectomy: Lugol solution 5-10 gtt
three times daily, or 2-6 gtt twice or three times daily*

given 10-21 days prior to surgery has been used.
MedlinePlus

Dr. Schachter wrote, " Dr. Abraham started this Iodine Project around 1998 when he became aware of the many benefits of treating patients with iodine using doses far beyond the 2 mg a day, which most physicians consider to be potentially toxic. He noted that starting in the 1820s, the French physician Jean Lugol used these higher doses to treat a wide variety of conditions. Dr. Lugol combined elemental iodine (5 %) and potassium iodide (10%) with 85 % water. Since iodine kills infectious agents, Dr. Lugol successfully treated many infectious conditions with this solution, which became known as Lugol's solution, and which is still available today. Prior to World War II, many American and European physicians used Lugol's solution to treat thyroid conditions, using doses higher than 2 mg daily without apparent significant adverse effects."

When you look at mainstream recommendations all the above information seems strange but this is because dosage and RDA are set obscenely low. Note instead of talking in milligrams (mg) the RDA is in micrograms (mcg) which is a scale exactly 1000 times less. Meaning it takes 1000 mcg to equal 1 mg and it takes 1000 mg to equal a gram.

Recommended Daily Allowance (RDA):50mcg daily for infants 0-12 months; 90mcg daily for 1-8 years; 120mcg daily for 9-13 years; 150mcg daily for 14-18 years.

Adequate Intake (AI) for infants:110mcg daily for ages 0-6 months; 130mcg daily for 7-12 months.

Tolerable Upper Intake Levels (UL): 200mcg/day for ages 1-3 years; 300mcg/day for 4-8 years; 600mcg/day for 9-13 years; 900mcg/day for 14-18 years (including pregnancy and lactation).

Radiation emergencies: Potassium iodide (KI) should be taken just prior to, or as soon as possible after exposure. For infants, babies, and children, KI is administered for exposure of 5 centigrays (cGy) or more. For birth through 1 month, 16mg can be administered; for 1 month through 3 years, 32mg can be administered; for 3-12 years, 65mg can be administered; for adolescents ages 12-18 years, 65mg can be administered (or up to 120mg if the adolescent is approaching adult size).

The highest dosage I have heard any doctor using today is 100 mg and that is quite a bit when you take iodine in a form where you can taste and appreciate what you are taking into your body. My favorite iodine (Nascent) is ideal for oral and aerosol applications into both nebulizers and vaporizers though I believe Lugol's, which is harsher on the stomach and has a very bitter taste, is better for transdermal application to the skin not only because it is less expensive but because you can get it at higher concentration.

Nascent Iodine, though more expensive actually tastes and feels good while going down and is gentle enough to give to children, who do not seem to complain about

its taste. Having it on hand for ones children is important for when they need it you can get them to take it but that is not so certain with Lugol's. Nascent iodine contains approximately 400 mcg per drop so 10 drops is 4 mg and 100 drops is only 40 so it's safe to take much higher dosages than is suggested on the bottle. One hundred drops a day is a strong dose, but when treating life threatening diseases it would not be unheard of to use upward of 200 drops a day in divided doses. It is very important to remember though that one should not shoot straight up to these dosage levels. One should start at low dosages and monitor for detox reactions, which will be less if sodium bicarbonate and other substances are used in conjunction.

For alcohol-sensitive people there is Nanocollidal iodine:

<http://www.cedarbear.com/CBNLabsIodineProducts.html>.

Recovered alcoholics are extremely sensitive with the tiniest amount of any alcohol a problem.

Dr. Abrahams recommends taking 50 mg of Iodine/Iodide as Lugol's solution (8 drops) daily for 3 months as a loading dose. Lugol's solution is available online at varying concentrations. Then his recommendation is that dose should be gradually reduced to the 12.5 mg (2 drops) maintenance dosage under the supervision of a knowledgeable health care professional. Dr Abrahams feels that 14 to 15 mg. of iodine/iodide daily is the upper maximum of safety for long term use. This is close to Dr. James Howenstine's (another prominent iodine advocate) recommended dose of 12.5 mg daily.

In 1953 Dr. Orian Truss discovered the devastating effects of antibiotics in an Alabama (USA) hospital. During a hospital round Truss was intrigued by a gaunt, apparently elderly man who was obviously dying. However, he was only in his forties and in hospital for four months. No specialist had been able to make a diagnosis. Out of curiosity Truss asked the patient when he was last completely well. The man answered that he was well until six months before when he had cut his finger He had received antibiotics for this. Shortly afterwards he developed diarrhea and his health deteriorated. Truss had seen before how antibiotics cause diarrhea. It was known that Candida was opportunistic and thrived in debilitated patients, but now Truss wondered if it might not be the other way round, that Candida actually caused the debilitated condition.

Truss had read that potassium iodide solution could be used to treat Candida infestation of the blood. So he put the patient on **six to eight drops of Lugol's solution four times a day** and soon the patient was again completely well. Soon afterwards he had a female patient with a stuffy nose, a throbbing headache, vaginitis and severe depression. To his amazement all her problems immediately cleared with Candida treatment.

When I was coming to closure on this chapter I happened to talk to Dr. Brownstein. We were in total agreement about dosages. Our consensus extended to the proposition that the sicker the patient the more iodine they would need with most average patients needing 25 to 50 mgs with 12 mg being a good maintenance dose though of course this varies with the quality of ones diet and with ones location. Living near the beach has its health advantages but in no case should one depend on iodized salt for their needs.

Dr. Brownstein said he was using 200 to 300 mg with his prostate and breast cancer patients with those who have metastases needing the highest dosages. He also uses both Lugol's and Nascent reserving the Nascent for his more sensitive patients. There are the tablet form of varying dosage, which are used by more than several of the iodine doctors I know.

*Iodine is needed in microgram amounts for the thyroid, mg amounts for breast and other tissues, and **can be used therapeutically in gram amounts.*** [2]
Dr. David Miller

[1] <http://www.medscape.com/viewarticle/588739>

[2] Iodine Metabolism; http://iodine4health.com/overviews/clinicians/miller_clinician.