Helminthic Therapy

Guide to Self Infection: Whipworm or Hookworm

Jasper Lawrence

Please contact me if you have any questions, rather than make a mistake:

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Please note that all these means of telephoning me will forward the call at our expense to wherever I am if I cannot answer that number.

I am currently on Greenwich Mean Time (GMT).
Please read these instructions completely and carefully before proceeding. Take the time to be relaxed, calm and clear about how you are going to go about this.

**Directions for self-infection with Whipworm ova**

If you suffer from arthritis or poor eye site you may need to enlist the help of someone to open the container. We have a version of this document available in large type if required.

Inspect the container before use, if the dose is cloudy or discoloured by a haze or heavy sediment please discard it and contact us for a free replacement. Some white specks may be apparent, this is normal precipitate from the interaction between the antibiotics we use and the salt solution required to keep the ova viable for long term storage. The whipworm ova or eggs themselves are invisible to the naked eye.

If the container has leaked make a note about how much fluid appears to have been lost and proceed as directed but contact us afterwards. Every now and then a container will leak a few drops during transit because of expansion of the air during flight, although this has not happened with the current containers. The loss of fluid is so small that the dose has never been significantly affected, but we like to know our materials are reliable.

Whipworm will last for at least five months if refrigerated,. Do not take a partial dose and store the remainder , this will likely lead to spoilage even if refrigerated,

You may have been provided with more than one dose, all but the first dose is to be refrigerated (not frozen) for later use. Each container will be marked with the number of ova it contains. You will typically, unless instructed otherwise, take the smallest number of ova for your first dose, increasing the number, or staying constant, with each subsequent dose.

Please note that if your package contains hookworm as well that hookworm must not be refrigerated.

It is VERY important to contact us before using any dose but the first. Plan on contacting us four to five weeks after each dose to discuss when to take the next one.

To take whipworm you simply drink the contents of the tube, you may decant it into a drink first (be sure to use a glass or ceramic cup, not plastic).

After you have drunk or decanted the contents of the tube be sure to rinse the tube and drink or decant the rinse solution. You may use tap water Whipworm ova are very attracted to plastic, so be sure to fill the container half-full after drinking or decanting the contents, screw the cap on tight, and shake it vigorously before drinking or decanting the rinse. You may use plain tap water to rinse the container, juice or spring water. Anything but a carbonated or hot drink.

Whipworm can be taken on an empty or full stomach, but if your stomach is easily upset,  you should probably take whipworm on an empty stomach. The liquid is very slightly salty, like tears.

It is equally acceptable to take it on a full stomach, if you prefer. If the meal is steaming hot you should wait an hour after eating to use whipworm.

Avoid hot drinks for an hour either side of taking whipworm, you may mix it with juice or any still, chilled (do not use ice or ice cold fluid) or room temperature drink. Avoid carbonated drinks as mixers, we have not tested their affect on whipworm ova.

After you are sure your stomach is settled you may eat anything but a steaming hot meal, and we advise eating a meal before drinking alcohol or carbonated drinks as a precaution.

All dietary (high temperature) and drink (alcohol and carbonated beverages) restrictions are lifted 12 hours after swallowing the whipworm.

**Side effects due to the immune response to helminthic therapy.**

Side effects due to an immune response to helminths is most likely with the first dose of helminths, but is relatively rare and mild if it occurs. Side effects if they do occur can start within 48 hours of taking the whipworm, but may not be experienced until up to two weeks after taking the dose, if you have not experienced anything by the third week it is unlikely you will get any side effects.

Some users of whipworm have reported gas, bloating, abdominal pain, diarrhoea, allergy symptoms, fatigue, insomnia, or other symptoms, on and off for up to twelve weeks after ingesting whipworm. You can control these symptoms to some extent with over the counter antihistamines, like Benadryl.
Prednisone, available from a doctor, has been reported by clients to be very effective at controlling side effects. Please consult with your physician before using prednisone or any other prescription medication to control whipworm side effects.

If you decide this is an option you want to discuss with your doctor, and if so please inform your doctor that those reporting use of prednisone to control whipworm side effects have told us that 15-20mg/day taken in the morning by those weighing 150-200 pounds, 70-95 kilogrammes, is an effective dose.

A few people report requiring prednisone for up to four weeks to - help with side effects, but the majority of people require it for less time , . Your doctor may suggest using it prophylactically, or to have on hand if symptoms occur. They may suggest lowering your dose periodically starting every seven days after starting its use, to see if side effects return, to reduce overall intake of prednisone.

Others have reported that if symptoms return during reduction attempts that they have increased their dose again temporarily, repeating the attempts to reduce its use again, weekly, until symptoms did not return with reduction, so that they were able to end its use.

Please do not take this as medical advice, you can only obtain that from a doctor.

**Directions for self-infection with Hookworm Larvae**

If you suffer from arthritis or poor eye site you may need to enlist the help of someone to open the container. We have a version of this document available in large type if required.

Feel free to contact us for clarification or if you want one of us to talk you through the process of application of the larvae.

Inspect the container before use, the containers should both be filled nearly to the very top, and the hinged lid on each should be firmly closed when you receive them. The contents should be clear and colourless, there may be a small amount of precipitate in the bottom of the tube, this is normal and is the result of interaction between the antibiotics we used to prepare your dose just before shipping and the salt solution we store the dose in to keep it alive in storage and transit.

Remember, these are living organisms and under certain circumstances can be damaged or killed. Do not expose them to direct sunlight, extremes of cold or heat, and do not let the larvae dry out. For instance by leaving them on the bandage for too long before applying them to your skin. Be sure to apply the larvae to your skin as soon as possible after receiving delivery. Hookworm has a relatively short shelf life, up to five weeks, so it is important that you use this dose very soon after receiving it.

Read through the instructions to the end before starting so that you understand the process and the steps required before you begin.

Important Note: some people have reported that the hinged lid of the tube containing the organism sometimes flip back after they open them (the lids are connected to the tube with a flexible hinge) flicking a droplet of fluid. To prevent that be careful to release the tension in the hinge after you open the lid by returning it to a resting position after you open it and only release your grip on the cap once all the tension is out of the hinge. If you do flick fluid don't worry, the larvae tend to settle in the bottom of the tube so it is unlikely that you have lost any. If you are concerned about losing worms if this happens to you and you feel some were lost based on your reaction we can send you a supplemental dose when it is appropriate.

If a supplemental dose is required due to partial loss of the fluid containing the hookworm or any other reason, please be aware this can only be sent after we have undertaken a stool analysis to confirm significant loss of hookworm, this can only be undertaken after a minimum of 8-10 weeks following inoculation, so please be very careful not to lose any fluid during application.

**Before starting read these instructions through and understand them. You may be excited or flustered, calm yourself before starting.**

**Step 1.**

Open the supplied bandage and lay out flat with the cotton area of the bandage facing up and exposed. This will expose the portion of the bandage that will be in contact with your skin so you can transfer the larvae to it.

**Step 2.**

Using the supplied pipette, squeeze a very small amount air out of the pipette before using it to remove the contents from the marked eppendorf tube or tubes which contain the larvae and apply them to the center area of the supplied bandage.
you have opened and laid out in advance. Be sure to expel some air before inserting the pipette into the tube, otherwise you may cause some fluid to spill. Be sure to suck all the liquid from the tube, including the inside of the cap. Be sure not to suck the fluid up into the bulb of the pipette as this will make rinsing harder and require a larger volume of fluid which make result in leakage after the bandage is applied. So do this is in stages rather than trying to do it all at once, say half the contents of a tube at a time.

**Step 3.**

After you have emptied the tube or tubes containing the larvae and deposited them in the center of the bandage use the contents of the **unmarked** tube or tubes (this is a special solution, do not use tap water or any other substitute without checking with us first) to rinse out the tubes that used to contain the larvae and the pipette. Deposit that fluid in the center of the bandage.

**Step 4.**

Apply the bandage to a hairless area of your skin (we favor the interior of the forearm or bicep) putting one side down first and then lightly stretching the bandage across your skin so that the area carrying the larvae is in firm but not too firm contact with your skin. The bandage has adhesive on all four sides of the cotton area to seal the solution in. If you received more than two tubes of worms you should have received more than one bandage to split the dose between to ensure that the bandage does not become so water logged that it leaks after application. Be sure to apply the bandage lightly enough to ensure that no fluid is forced out.

**Notes:**

If you are treating a child and are concerned that they may tear the bandage off if left unsupervised you can wrap the arm using a self-adhesive wrap like Coban or similar, or tape it securely by wrapping it around the arm. Some people have reported success applying the bandage to the child’s back. But be sure that wherever you apply it the bandage is in direct contact with the skin so be sure to apply it to an area of the body that is convex. If wrapping the arm be sure not to wrap it so tightly that circulation is restricted as the bandage has to be on for at least four hours.

Ensure that the bandage remains in place for a minimum of four hours and preferable for twelve hours. Ninety percent of the larvae will enter the skin within the first hour or two, but there are always stragglers.

Do not clean or disinfect the area to which you will apply the bandage with anything that might leave a residue before applying them to your skin. If you want you can swab the area with an alcohol wipe or similar but be sure to allow the alcohol to evaporate completely before putting the bandage in place.

For those of you who will feel an itch, and not everyone does, it generally starts within the first 10 minutes and in some people can be quite intense and lead to a pruritic rash. If you do develop a rash and this is uncomfortable cortisone or benadryl type creams are effective. From experience we do recommend the alcohol based benadryl lotion sold by Safeway in the US. In the worst cases the rash can last for almost three weeks and will flare up each time the worms stimulate your immune system. For instance at day four-five when they migrate to the intestines, or at day twenty-one when they mature and start to attach to the intestines.

If you are taking oral prednisone, Humira, Remicade, Tybari, etc., it is likely that you will not experience any or only mild side effects, including any itch or rash. Even for those not taking some anti inflammatory medication most will experience only a mild itch or scratching sensation when the worms enter your skin with perhaps only a mild pink discoloration of the skin where they enter. Some people get things that look and feel like mosquito bites, others what look like red pin pricks. There is an enormous amount of variation in this area so do not be dismayed if you don't feel much immediately after inoculation or see only the faintest of marks. If you take prednisone remember you likely will not have any skin or intestinal reaction at all.

Some people experience a period of dizziness after inoculation that can last for an hour or two. So do not operate machinery or drive, climb ladders, go pole vaulting, etc. Rest quietly for a couple of hours after application of the larvae to your skin.

**Side effects due to the immune response to helminthic therapy.**

Side effects due to a strong immune response to helminths is most likely with the first dose of helminths, but is relatively rare.

Some users of hookworms have reported gas, bloating, abdominal pain, diarrhoea, allergy symptoms, fatigue, insomnia, or other symptoms, on and off for up to twelve weeks after self infection. You can control these symptoms to some extent with over the counter antihistamines, like Benadryl.
Prednisonone, available from a doctor, has been reported by clients to be very effective at controlling side effects. Please consult with your physician before using prednisonone or any other prescription medication to control hookworm side effects.

If you decide this is an option you want to discuss with your doctor, and if so please inform your doctor that those reporting use of prednisonone to control hookworm side effects have told us that 15-20mg/day taken in the morning by those weighing 150-200 pounds, 70-95 kilogrammes, is an effective dose.

The amount of time you use prednisolone should be based on your symptoms. Your doctor may suggest using it prophylactically, or to have on hand if symptoms occur. They may suggest lowering your dose periodically starting every seven days after starting its use, to see if side effects return, to reduce overall intake of prednisonone.

Others have reported that if symptoms return during reduction attempts that they have increased their dose again temporarily, repeating the attempts to reduce its use again, weekly, until symptoms did not return with reduction, so that they were able to end its use.

Please do not take this as medical advice, you can only obtain that from a doctor.

Please note that this document is covered by the confidentiality agreement you signed before we agreed to provide helminthic therapy to you. You may only share it with immediate family members or doctors, nurses, etc., directly involved in your care.