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Using Colloidal Silver with Oxygen Nebulizers and Humidifiers

Oxygen Nebulizers

Delivering colloidal silver directly into the lungs, and thus into the lung tissues and bloodstream, is a highly effective way to use colloidal silver. By bypassing the digestive system, some believe that a greater amount of colloidal silver can be delivered into the body. Furthermore, by using a high quality nebulizer, one can be relatively certain that only the smallest particles (and ions) reach the lungs. Larger particles that may be in the initial solution are too heavy to be carried by the fine mist a nebulizer generates.

Using an oxygen nebulizer should be considered an experimental protocol. In cases of severe lung infections, extreme CAUTION must be employed. In such a case, if the nebulizer is used properly and the colloidal silver carrying mist reaches the infected tissues, the effect can be almost immediate and quite dramatic. One should realize that there is an incredible difference in using an oxygen nebulizer with healthy lungs as compared to infected lungs. If an individual is incredibly weak due to a severe lung condition to the point that breathing is laborious, do NOT use a colloidal silver oxygen nebulizer or humidifier without a fully qualified medical staff present (in fact, it is recommended to never use a humidifier in this case because the volume and density of the mist is much greater than that of a nebulizer) unless there simply is no other choice. It is possible that the first treatment could arrest the breathing of the individual being treated.

Ideally, pure oxygen should be used with a nebulizer. In order for the colloidal silver to be properly atomized with a pressure driven device, 20 - 35 psi should be employed. With adjustable nebulizer heads (such as the one in the images above and the one in the construction tutorial to follow), one should always start out with the finest mist possible. The mist should not be visible, yet a slight moisture should be detectable if one "mists" one's hand.

The amount of colloidal silver to use on a daily dose basis is undetermined. Tentatively, one full dose is 1/2 to 1 fluid ounce. However, this dose in some cases is spread throughout the day, or might even last a few days, depending on the need. In other cases, as in lung infections which are not severe yet have become chronic, a dosage philosophy might vary. The following examples illustrate different ideas:

- Two minutes of nebulizer use every fifteen minutes for four hours.
- Five minutes of nebulizer use every hour.
- One complete dose of colloidal silver once to four times daily.
- One Half dose of colloidal silver once to four times daily.

Remember, colloidal silver nebulizer use is extremely experimental. Always err on the side of caution!

CAUTIONS

- If you are NOT certain if you are using a true electro-colloidal silver product made in distilled water, do NOT attempt nebulizer usage. Silver compounds consisting of large amounts of silver salts, proteins, or other chemical agents, especially silver nitrate, can cause instant and potentially terminal silver poisoning under some conditions (which have not been determined).
- ALWAYS test colloidal silver first on the skin, then internally if at all possible if colloidal silver has never been used. The skin test is the most critical. Watch for gray patches that instantly appear on the skin upon colloidal silver application. If gray discoloration occurs, do not utilize silver in any form (any discoloration is only temporary). This is an indication of an extremely uncommon reaction with silver, most likely due to the use of rare prescription drugs.
- When using a nebulizer, always watch for signs of increased irritability, loss of concentration, and increased emotional instability. If any of these symptoms manifest, cut down or temporarily suspend colloidal silver use. They are "watch" signs for various silver reactions that may or may not exist when incredibly high quantities of colloidal silver are used. Again, err on the safe side. These initial signs, if experienced, are temporary. Suspension of use will give the body time to adjust and go through a natural cleaning cycle and prevent any harm being done to the body. In the unlikely event that these symptoms continue to manifest when using colloidal silver, discontinue use and if possible have a batch of the colloidal silver laboratory tested.

Uses

- For the treatment of viral infections such as Hepatitis and HIV.
- Lung infections

- General Bacterial Infections
- Irrigation of Sinuses
- Misted on the face
- As a spray for burns, skin abrasions and minor cuts.
- As an alternative to oral use.
- As a complimentary treatment with internal colloidal silver use.
- As a water pick

The way colloidal silver users calculate dosage methods/levels is quite varied, and built around several central ideas. It should be noted that while colloidal silver use is quite widespread, there are no standardized formulas due to the fact that no conclusive research has been conducted that demonstrates an ideal (or effective) dose for any condition. However, every "dosage philosophy" addresses one or more of the following issues:

- Eliminating any personal concerns about the potential for silver toxicity
- Delivering enough colloidal silver to maximize the probability that the silver reaches the target destination in a high enough concentration to be effective
- Maintaining an ideal level of silver in the body for a sustained effect
- Minimizing the possibility of desensitizing the body to silver through long term use.

Further Notes on Lung Infections

If the choice is made to treat lung infections via a colloidal silver nebulizer or a humidifier, please consider the following thoughts:

With a lung infection, using a colloidal silver nebulizer can be quite painful at first. Since many infections either start or remain in the far reaches (bottom) of the lung's lobes, it can be difficult to breath deeply enough to deliver the colloidal silver to the infection site. However, for the treatment to be as successful as possible, it is imperative that the fine mist reach the actual location of the infection. As in all colloidal silver use, *if the colloidal silver is not able to reach the site of the infection, it will be largely ineffective.*

Conditions in the lungs are actually closer to an external environment than an internal one as far as colloidal silver use is concerned. There is no osmotic pressure to regulate fluid dynamics; the colloidal silver must meet and penetrate an infection exactly as if it were applied to a surface. Broncial infections are point and case to the principles in operation. Laxidazical use of colloidal silver via a nebulizer often results in very little change to the condition if the immune system is not succesfully responding. The error made in treatment is over-extended periods of rest between usage. The bronchial tubes will not maintain the "coating" of colloidal silver for long, and the silver must be in direct contact with the infection in sufficient enough concentration to be effective. The concentration in this case is most likely far more critical than when colloidal silver is used internally, because the exterior condition of the lungs are not precisely regulated.

Proper breathing is an excellent step toward successful nebulizer use. Breathing in slowly allows the colloidal silver to coat the lungs with enough left over to travel into the deeper reaches of the lungs. Breathing from the diaphragm allows one to both completely fill and completely empty the lungs. This can be uncomfortable when an infection is present, but is highly beneficial. In fact, practice in breathing excercises such as pranayama CAN make a big difference in the outcome of treatment in the most severe and deep lung infections.

Many times, a "new" lung infection will clear up VERY rapidly, within hours, if nebulizer use is begun promptly at the onset of symptoms and the body's immune system response is strong. However, in some situations one may find that the immune system is completely unresponsive for any number of reasons. In these cases there will be no fever, no loss of appetite, and sometimes no coughing response.

To a greater or lesser extent, this is the case with long term chronic chest colds, where the body's immune system has *de-prioritized* its response to the infection. Infections such as these tend to be cyclic, with periods where the infection appears to be gone. These infections need a well thought out protocol. Since the immune system response is either reduced or not present, occasional doses would only slightly effect the infection as a whole. Keep in mind that the colloidal silver will only effect the infection it reaches. In four hours time, it is not unreasonable to assume that if the immune system has not responded, the infection will have repopulated. In such a case, the colloidal silver is only reaching the same areas over and over again. Using a small amount of colloidal silver every five to fifteen minutes to

tolerance, then pausing for a few hours is a suggested approach.

~~Because of the experimental nature of nebulizer use with colloidal silver, we don't have any solid substantiated suggestions to approach this dilemma at this time.~~

After a year of experimenting with various treatments to address chronic lung infections, we have found a treatment that shows incredible promise for use with colloidal silver - especially considering stubborn lung infections and nebulizer use.

Any time the immune system fails to respond in any condition, and colloidal silver is used as the primary treatment method, the colloidal silver must completely take over the immune system role of "killing" an infection. This usually requires dosage levels that are increasingly high as compared to other circumstances, although the ideal approach would be to increase the frequency of use, not necessarily the amount of colloidal silver used each time. If such an infection begins to clear through sustained use, the body's immune system should eventually jump-start. One will notice an aching feeling throughout the body, and perhaps start running a temperature. This is a sure sign that immune system has reinitiated a strong response. If the response to the colloidal silver has not been too strong, then one may continue using it until all symptoms of the infection subside.

Again, colloidal silver nebulizer usage is an experimental protocol. If significant results are not achieved within 72 hours, the approach needs to be changed.

Ultrasonic Humidifiers & Nebulizers

An oxygen nebulizer on the whole has proven to be more effective than a humidifier. Whether this is due to the pure oxygen used, the density of the mist, or the pressure by which the colloidal silver is delivered is unknown. An ultrasonic nebulizer is the preferred alternate choice (Omron makes an excellent model).

However, this by no means is meant to imply that a humidifier is NOT effective. The greatest consideration in using a humidifier as opposed to an oxygen nebulizer is the cost of the unit and the cost of using the unit. With a humidifier, one does not need to purchase oxygen, and the cost of a good ultrasonic humidifier is under thirty dollars.