

# Vulcan Silver Liquid

## Information and Benefits

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# Vulcan Silver Product Information and Benefits

## A Short Introduction

Neil, an HIV specialist living in Pretoria, partner to the original patent holder in the UK, was kind enough to teach the Imsyser team about the benefits of this amazing product which has been in development and used for various ailments as described below for the past 20 years.

More specifically, tests done at our own CSIR for HIV and Malaria. it is noted that with a universal dose of 2.5 mg of this amazing product, 3 weeks into treatment HIV ( no chronic aggressive infections present) may be reversed as the silver manages to penetrate and destroy this virus!

One of the interesting facts was the fact that it appears that viral loads may change with various treatments but very seldom changes are seen in the CD counts. Not the case for Vulcan Silver, however!!

In the UK test were done more specifically on Hepatitis with incredible results! as was the results of the top 6 chronic infections as experienced in the UK.

Simply put this amazing product is developed with Nano technology to create clusters of silver deposits in an existing 'colloidal' silver state(distilled water) with incredible results – a product 1000 times more potent than you average normal Colloidal Silver. A mere understanding of Quantum Science explains the exponential deposits as opposed to normal production of a simple Colloidal Silver.

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**For more on the various studies done scroll down for the summary of these trials.**

And, best of all there is no potential danger of over-dosing or the old fashioned belief that you could go “blue”! The resultant high in energy release is mere proof of the amazing detox experienced even for the most toxic of constipation cases. Similarly this product is safe for babies and children. In fact, it was found in some of the studies that if the infected HIV mother is treated, the baby is born without the same. This treatment of a mere 1 ml might be dropped into any formula for easy treatment from the youngest of ages.

Vulcan Silver is also totally safe for the worst of TB cases – all types of TB. And so the list goes on, as may be noted below.

Enjoy reading up about this amazing healing treatment right here on your doorstep.....

## Vulcan Silver versus Colloidal Silver

Silver cannot be concentrated without the use of agents such as proteins or ions because they all carry the same electrical charges (like repel and opposites attract) which is why pure colloidal silver will never exceed 20 ppm (parts per million). This means that to take medicinally relevant doses of colloidal silver you would have to drink about 50 litres of it a week, the water alone would make you sick not to mention the fact that at those volumes you would almost certainly get Argyria (blue skin) because of the innate properties of colloidal and the FDA has published guidelines to this effect.

The working properties of Vulcan have taken the silver molecule and re-engineered it, sort of given it quantum properties. Quantum refers to an object that can be in two places at once. With the patented method of Vulcan, they have

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taken the silver molecule and imbued it with both a positive and negative charge (referred to as bi-pole). Neil went on to discuss that it is in what he calls a state of flux. This allows the silver molecules to 'attract' to each other and aggregate without the need for ions or ligands of any type. This allows for high concentrations of 10 000 ppm as is the case with Vulcan's 50 ml bottles. Further suggesting that he could make concentrations of up to 1 000 000 parts per 1 000 000 (dry powder) making it easier to administer medicinally in relevant doses with just 50 ml per week without any of the side effects associated with colloidal/ionic silver

Because colloidal silver has been around for the best part of a century people assume that anything stating colloidal or even nano silver are all pretty much the same thing. That was until Vulcan Silver came along. Totally different technology with 1000 fold results!

The magic does not stop there, in an inert state the aggregated silver particles are only effective with the exposed the outer surface of the silver but once they enter a peristaltic environment like the body the weak bonds holding them together start to break and the silver breaks up into and up to 1000 smaller particles each with their own surface that is highly active and able to combat pathogens.

Vulcan Silver is the most powerful anti-microbial on the planet. Its small sizes (as little as 1 nm) can penetrate into bone and tissue where other drugs cannot. So take everything you have learnt about silver it goes without saying that this groundbreaking science can multiply by 1000 times the safety and efficacy of colloidal silver and up to 40 times those of gold standard treatment.

Now the easiest way to show you the difference is in an actual in-vitro ('petri dish') study. Below you will see a picture taken of a 'petri dish' that was cultivated with bacteria. Micro dots were then submerged into stock colloidal silver and

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Vulcan Silver Immune Pro. In order micro dot number 1 was soaked in colloidal silver, dot number 2 was VS Immune Pro diluted 100 times, dot 3 was VS Immune Pro diluted 10 times, dot 4 was VS Immune Pro as you would buy it off the shelf and dot number 5 was a control microdot with nothing added as a point of reference.

The top unnumbered dots were identical to the numbered ones. Now, once an antibacterial microdot is placed on the surface of a bacteria smear then it should show a halo or ring of deactivation of the bacteria around it. This is seen most prominently in disk 4. However even at dilutions of 10 and 100 there are rings around the microdot evidence that it is effective in killing the bacteria.

The colloidal silver dot is however indistinguishable from the control dot in that neither has any ring of efficacy around it. Vulcan Silver also has a unique method of the delivery of silver into the body which is truly unique but that would be a whole science lesson on its own.



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## **Vulcan Silver benefits:**

1. Viral
2. Bacteria
3. Parasitic infections
4. Anti Inflammatory infections, Autoimmune diseases and all related:

## **Infection, disease and/or disorder**

1. Viral infections
2. Bacterial infections
3. Fungal infections
4. Parasitic infections
5. Cancer and/or respiratory diseases

## **Viral infection HIV/AIDS related infection,**

1. Herpes virus infection
2. Viral dysentery
3. Flu
4. Bronchitis
5. Pneumonia
6. Measles
7. Rubella
8. Chickenpox
9. Mumps
10. Polio
11. Rabies
12. Sinusitis
13. Tonsillitis
14. Mononucleosis

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15. Ebola
16. Respiratory syncytial virus
17. Croup
18. SARS
19. Dengue fever
20. Yellow fever
21. Lassa fever
22. Arena Virus
23. Bunya Virus
24. Filovirus
25. Flavin Virus, Hantavirus
26. Rotavirus, Viral Meningitis
27. H5N1 Virus (Bird Flu)
28. Arbovirus
29. Parainfluenza
30. Smallpox
31. Epstein-Barr Virus
32. Dengue Hemorrhagic Fever
33. Cytomegalovirus
34. Infant Cytomegalic Virus
35. Progressive Multifocal Leukoencephalopathy
36. Viral Gastroenteritis
37. Hepatitis
38. Cold Sores
39. Meningitis
40. Encephalitis
41. Shingles
42. Warts
43. Human papillomavirus
44. Viral ear and eye infections

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## Bacterial Infections

1. Tuberculosis
2. Cholera
3. Syphilis
4. Bacterial pneumonia
5. Escherichia coli (e. coli) infections
6. Candida infection
7. RSA methicillin resistant Staphylococcus aureus (S, aureus) infection – strain ATCC
8. Vancomycin resistant Enterococcus faecalis (E. faecalis) infection – strain #1061
9. Salmonella enteritidis (S. enteritidis) infection – strain ATCC #13076,
10. Clostridium difficile (C. difficile) infection – strain ATCC #9689
11. Pseudomonas aeruginosa (P. aeruginosa) infection – hospital clinical strain.

## Fungal Infection

1. Thrush
2. Candidiasis
3. Cryptococcus's
4. Histoplasmosis
5. Blast mycosis
6. Aspergillosis
7. Coccidioidomycosis
8. Paracoccidioidomycosis
9. Sporotrichosis
10. Zygomycosis
11. Chromoblastomycosis
12. Lobomycosis
13. Mycetoma
14. Onychomycosis
15. Piedra Pityriasis versicolor
16. Tinea Barbae
17. Tinea Capitis

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## Vulcan Silver Protocol

### Understanding Dosage ratio between protocols

- From earlier experience with Vulcan Silver it is suggested that one cannot overdose.
- In terms of cost, a double dose would be more expensive, however it is reported that a double dose will have better results.
- The reason for suggesting the 2.5 dose is purely in relation to cost. This suggested dose allowance is intended to allow for a constant circulation silver in the body to better facilitate its healing properties.
- From examples: An entire bottle has been consumed in an attempt to fight a common cold. It has been said that this approach provides a faster action on helping a person overcome the effects of a common flu within hours.
- Another reported advantage is that Vulcan Silver does not interact with any current medication prescription medication. Rather the effects of Vulcan Silver promotes the effectiveness of prescription drugs.
- As Vulcan Silver is a natural product there are not added toxic compounds that would negatively impact the human body.

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## Vulcan Silver & HIV

Vulcan Silver not only is able to stop the HIV virus from replicating at a very early stage, it is effective against all strains of HIV but also interferes with the binding of the virus to the gp 120 receptors.

For added reference: The cap of the protein is called gp 120 and the stem is gp 41. For HIV to enter a host cell, it must first use gp 120 to attach to a CD 4 receptor. The CD 4 receptor is found on CD 4 T-cells and macrophages. ... Chemokine receptor 5 (CCR5), is used by macrophage-tropic (M-tropic) HIV to bind to a cell.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1069533/>

Some reading material which pertains to the mode of antiviral action of silver nanoparticles against HIV-1.

For added reference: HIV-1 is the most widespread type worldwide. HIV-2, a less prevalent and less pathogenic (disease-causing) type, is found principally in western Africa. Large genetic differences between HIV-1 and HIV-2 mean that tests keyed to one will not reliably detect the other.

Now combine that with the following:

Silver, as it is known, cannot be concentrated without the use of agents such as proteins or ions because they all carry the same electrical charges (like repel and opposites attract) which is why pure colloidal silver will never exceed 20 ppm (parts per million). This means that to take medicinally relevant doses of colloidal silver you would have to drink about 50 litres of it a week, the water alone would make you sick not to mention the fact that at those volumes you would almost

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certainly get Argyria (blue skin) because of the innate properties of colloidal and the FDA has published guidelines to this effect.

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### **On a slightly more technical level:**

The magic does not stop there, in an inert state the aggregated silver particles are only effective with the exposed the outer surface of the silver but once they enter a peristaltic environment like the body the weak bonds holding them together start to break and the silver breaks up into and up to 1000 smaller particles each with their own surface that is highly active and able to combat pathogens.

Vulcan Silver as the most powerful anti-microbial on the planet. Its small sizes (as little as 1 nm) can penetrate into bone and tissue where other drugs cannot. This ground-breaking science can multiply by 1000 times the safety and efficacy of colloidal silver and up to 40 times those of gold standard treatment.

### **Vulcan Silver As An Treatment for Blepharitis & Pink Eye**

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The clear liquid in the Vulcan Silver bottle is chemically synthesized in a laboratory. And is extremely effective as an eye drop in the treatment of blepharitis and Pink eye.

Blepharitis symptoms and signs include: Watery eyes. Red eyes. A gritty, burning or stinging sensation in the eyes. Eyelids that appear greasy. Itchy eyelids. Red, swollen eyelids. Flaking of the skin around the eyes. Crusted eyelashes upon awakening.

Recommended dose: 1 to 2 drops in each eye 2-6 times daily. Discontinue treatment as soon as symptoms disappear.

How to dispense the liquid:

1. While the liquid is clear and the settlement is settled at the base of the bottle.
2. Using the clean pipette, expel a small amount of the liquid and gently release a small drop into the affected eye.

### **SUGGESTED DOSAGE RATIO FOR PRESCRIBED DISORDERS**

For any blood born pathogen and with the exception of **retro viruses** one bottle normally does the job. 2.5 ml 2-3 times/day.

*When considering a protocol one should keep in mind that the life cycle of pathogens vary but are generally short lived so **one week on max dose** will rid the body thereof.*

It is recommend a second bottle be considered just to make sure no pathogen gets left behind. In some very rare cases there are a cornucopia of infections that have been prevalent for so long that the pathogens could be hiding anywhere

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and intensive detox is needed. In this instance up to one bottle a day is considered.

**Lung infections** are somewhat more difficult because of the restricted blood flow. In most cases a week is all that is required. 1 bottle is recommended. 2 bottles will better fight the infection. Especially in the event of a more aggressive infections that the patient has been struggling with for some time. Upon completion of treatment. One will find that the patient has progressed and notice that the infection is cured or a vast improvement in leaps and bounds where it is suggested a second bottle be considered to ensure complete eradication of the infection.

**TB infections** will need to be treated over a *three months on max dose*. This is still exceptional when compared to other treatments available and in some cases no treatment is available.

**Retro viruses and auto immune disorders** will require lifelong adherence. Not necessarily every day or even every week but some adherence like a bottle every month or two. Initially however it is recommended that 2 weeks on max dose to reduce inflammation and bring the pathogens under control. Thereafter one can repeat treatment as and when the budget allows just the energy release in itself when infection and inflammation is controlled is testimony of a daily need in these cases.

**Terminal HIV /Aids with multiple opportunistic infections** max dose over several months is what is really needed but at least one dose a day will make a difference. Again this is a lifelong commitment to keeping healthy and Vulcan is the medication that can do it safely and effectively. *Lifestyle changes are often the biggest hurdle* to achieving health and re-infections.

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**Drug or alcohol abuse** have shown to limit the efficacy of Vulcan.

## **IN VITRO ANTIMALARIAL ASSAY VULCAN SILVER SAMPLES**

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24 June 2011

### **1. Assay Background**

The in vitro antimalarial activity of test samples against the 3D7 (chloroquine-sensitive) strain of the malaria parasite, *Plasmodium falciparum*, is measured by assessing parasite survival after drug exposure using a parasite lactate dehydrogenase (pLDH) colorimetric enzyme assay. pLDH activity is used as a surrogate for parasite levels in the cultures. To distinguish between pLDH and human LDH contained in the host red blood cells, APAD (3-acetylpyridine adenine nucleotide) is used as cofactor for the conversion of lactate to pyruvate instead of NAD. The human enzyme is incapable of using APAD. APADH formed in the reaction reduces nitro blue tetrazolium to a purple formazan product which absorbs at 620nm.

In the standard dose-response assay, 11×3-fold serial dilutions of test samples are added to trophozoitestage parasite cultures (2% parasitaemia, 1% haematocrit) in 96-well plates (duplicate wells for each compound concentration). After 48h incubation, pLDH activity in the wells is determined at 620nm using a multiwell spectrophotometer. Wells containing uninfected erythrocytes are used as background controls and their mean Abs620 value subtracted from those of test wells. Percentage parasite viability in the test wells is calculated by reference to control wells containing parasites incubated with compound-free medium.

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## 5. Conclusions

In this assay, IC<sub>50</sub>s of 1-10 µg/mL may be regarded as moderate antimalarial activity, 0.1 – 1 µg/mL as good activity and < 0.1 µg/mL as potent activity.

Sample 1 thus has moderate activity, while sample 2 displays good activity.

Moderately active compounds are unlikely to be promising therapeutics, without further modification. The therapeutic potential of compounds with good activity depends on several additional factors. For example, if the compound displays no toxic or other effects on human cells below 100 µg/mL, the therapeutic window may be large enough to warrant further investigation. Moreover, if concentrations of the compound >1 µg/mL can be maintained (and tolerated) for several hours in the blood of human patients after oral administration, antimalarial IC<sub>50</sub>s of 0.1 – 1 µg/mL may be sufficient to result in cure. The latter depends on additional factors, e.g. the stage of the malaria parasite life-cycle that is vulnerable to the compound and how rapidly the compound kills parasites (both may be assessed in in vitro experiments). Due to the resource and infrastructure-poor regions inhabited by populations bearing the burden of malaria, additional factors need to be considered, according to Medicines for Malaria Venture (MMV) and WHO guidelines. The compound needs to be stable at elevated temperatures for extended periods of time. The compound needs to be available as an oral (or suppository, for infants) formulation. The compound needs to be able to completely eradicate parasites in patients after 1-3 doses over a period of 3-5 days. Total cost of treatment per patient should not exceed 1 US\$.

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