



WATER CONSUMPTION GUIDELINES

2021

Water consumption guidelines

This document is copyright of the **International Association of Kambo Practitioners**
© 2014-2022. All rights reserved

Any redistribution or reproduction of part or all of the contents in any form is prohibited

Version: 2.0

IAKP Water consumption guidelines for practitioners

Hyponatremia

Hyponatremia is a condition wherein the sodium content of the body is dangerously diluted due to excessive fluid or water intake. It can also occur when sodium is lost from the body during prolonged sweating, vomiting or defecating.

When Sodium levels drop, water can enter the cells and cause the body to swell. When this happens in the brain, it can lead to brain damage as the pressure increases inside the skull. It can also cause Kidney failure and heart failure.

Because of the risk of Hyponatremia when working with Kambo it has become important to offer more specific guidelines. The large amount of water taken during a Kambo treatment can essentially cause the body to lose salt. In most people this will not be an issue and with food and fluid after the treatment, balance will be restored. However in people with pre-existing medical conditions such as epilepsy, cirrhosis of the liver, kidney problems, AIDS, eating disorders and multiple sclerosis (not exhaustive) there may be a small risk of developing hyponatremia. Athletes or people that do high-intensity physical activities are also prone to hyponatremia, as they are used to consuming large quantities of water and their salt content may already be low. Those using Colonics, Enemas, Detoxing with demineralised or distilled water, taking Diuretic medication or supplements and even regularly consuming anti-diuretic drinks are other risk groups. (Anti-diuretic drinks promote water-retention and dilution of the blood, resulting in a low sodium concentration). Anyone falling into the above groups must be carefully assessed for their suitability to receive Kambo. If you decide to go ahead then monitor the individual carefully throughout.

The symptoms of Hyponatremia that Kambo practitioners need to be aware of are:

- Nausea and vomiting (repeatedly long after the treatment should normally be over)
- Headache (over and above the normal Kambo tension/toxin release headache)
- Cognitive impairment (e.g. disorientation, memory-loss, confusion, personality change, hallucinations, psychosis, detachment)
- Loss of energy and drowsiness
- Restlessness and irritability
- Muscle weakness, spasms or cramps
- Severe seizures
- Coma – inability to rouse

In the case of extended nausea and headache **only**, give a small glass of warm water with 1tsp each of salt and honey mixed in. Ask the person to sip very slowly and monitor them. You can also use electrolyte drops or powder sachets.

Any of the other symptoms - Immediately stop all fluid and water intake and monitor the person closely. Do not leave them. If you see any further signs indicating Hyponatremia, seek medical attention fast.

Do not try to rehydrate them yourself once the major symptoms present– this must be done slowly under medical supervision

In the case of seizure or loss of consciousness, it is important to seek immediate medical attention via an ambulance or emergency room.

This condition is very dangerous and could even be fatal so if you are concerned do not hesitate to seek medical advice and explain that the physician that the person may have low Sodium levels due to the large water intake. Be explicit: SUSPECTED HYPONATREMIA

Drinking guidelines

It is important to observe how much the person has drunk and vomited throughout the treatment. If a person is not vomiting, don't continue to give water, but instead encourage the purge with all the techniques you have been taught.

It is rarely the case that if a person drinks 2 litres that they will vomit 2 litres, it is possible the output can be as little as 1 - 1.5 litres because the body starts to absorb water as soon as it is drunk.

In a normal single treatment with a healthy adult whose organs are functioning optimally, no more than a MAXIMUM of 3 litres of water should be consumed. . This should be reduced downwards for someone with pre-existing health issues.

It is advised that the pre-Kambo water is consumed no more than 15 minutes before treatment is administered. In larger circles, this means it is important at the outset to determine the order that participants receive Kambo.

High risk clients can be given water with electrolytes in from the start especially sports people and recent water fasters.

Do not add anything to the water other than the recommended dose of electrolytes – Honey and Tobacco juice are especially dangerous

Do not give Kambo to people who have been water fasting the week prior to Kambo – this is very high risk.

It is prudent to add a note to the information sheet that people receive prior to attending your circle laying out the risk groups and asking people to inform you if any of those things apply to them. Also advise that they don't drink water in advance.

In order to avoid prolonged Kambo sessions where the person keeps drinking and vomiting it is advised to remove the medicine after 20 min or as soon as they have finished the majority of their purging.

Don't be afraid to take away water from a person particularly if they are showing bulimic tendencies.

You can give a few drops of liquid electrolytes mixed in a glass of warm water to keep the electrolytes balanced if the purge is taking time to come and the person has drunk a lot of water. This may also help them to purge. You can also use Electrolyte powder sachets. Always warn people that Enemas and Colonics before and after Kambo carries a similar risk of depleting sodium levels and are therefore strongly discouraged in the 5 days before and after Kambo.

Always give herbal tea with honey, fruit/nuts/soup/rice cakes etc after Kambo to restore the electrolyte balance before people leave.

Interestingly enough, in tribal situations a soup made from corn, manioc or plantain is drunk before Kambo rather than water. I believe that these soups prevent Hyponatremia because they are chock full of electrolytes.

When carrying out multiple treatments in one day or even over a few days, it is even more important to watch the water intake and monitor clients closely for symptoms:

There are special guidelines for double and triple treatments and the values below are typical if the person is purging as expected. If not, the person needs to purge before continuing to drink to avoid too much water being absorbed.

Single Treatment = Maximum of 3 litres

- 1-5 to 2 litres before and up to 1 litre during if purging well

Same Day Double Treatment = Maximum of 4 litres

- 1st round – 1.5 litres before up to 0.5 litres during
- 2nd round - 1.5 litres before up to 0.5 litre during

Same Day Triple Treatment or 3x3 = Maximum of 5 litres total as long as purging

- 1st round – 1.5 litres before up to 0.5 litres during
- 2nd round – 1 litre or if they have purged well in second round then up to 0.5 litre during
- 3rd round - 1 litre before up to 0.5 litre during as long as they are purging

Water consumption guidelines

This document is copyright of the **International Association of Kambo Practitioners**

© 2014-2022. All rights reserved

Any redistribution or reproduction of part or all of the contents in any form is prohibited

Version: 2.0