Perfect Solutions SERIES

Towards Healthcare Emancipation

DEFEAT CANCER, AIDS-HIV & ALL OTHER PARASITIC DISEASE WITHIN 90 DAYS!

by Edgar Capilitan Enero

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Complete
Do It Yourself
Manual

by Edgar Capilitan Enero

Your support to this publication will enable this researcher to continue his work on free energy and other related technologies to make them freely accessible for everyone. Thank you.

Disclaimer: The methods described herein can't be used for diagnostic purposes, nor should it be considered a professional medical advice. This is for educational purposes only. Other than those properly credited, this is just the author's opinion based on the facts experienced and the research made.

The success of your treatment depends on you and you alone. The treatments described here have been tested for decades or longer and have been found to work when applied correctly. To our knowledge, such methods are never described, discussed in mainstream media, nor restricted under any laws or decree of any country.

We don't need to make therapeutic claims. Your own body can do the healing by itself. Don't start your treatment if you have still questions left unanswered. Only a complete understanding of the whole protocol will you ever succeed in the treatments. Most importantly, take heed of all precautions and warnings.

Contents

Intended Audience

Not too long ago, man carved stones just using his bare hands. Now, he's got laser cutters to create his masterpieces. How did this came about? How did he achieve so much sophistication? What were the tools that led him to where he is today? Can he achieve more?

All advances came about from recognizing that problem do exist instead of denying it; by thinking and testing for possible solutions instead of subjecting the vanguard to ridicule and malice.

This book is for the open minded. There is no hope for the perpetual skeptic here. Skepticism, when overdone, sometimes border on utter display of arrogance. Only those who recognize the limits of their own knowledge can endeavour to extend it.

This book is for everyone who truly believes that there are always better solutions – better ways of doing things. And it's only a matter of dedicating an adequate amount of time to finding it. After all, we all have a considerable volume of brain cells to expend them for.

This is for everyone who wants to get well physically, in the least amount of time and money.

This is for everyone who can decide for themselves and is not persuaded by conventional opinions without subjecting each to the truth test. Faith is believing without truth testing.

This book assumes no foreknowledge on electronics, anatomy or biology, but requires a willingness to learn something useful.

If you believe that you are indeed the captain of your soul, the overseer of your own fate, then this book is for you.

You will do the action by yourself, as guided by this book, and you will achieve more than what you bargain for.

How To Use This Book?

You don't have to believe anything that is written in this book for this is not your usual story book. This is a book based on logic and practical application of Common Sense.

Belief is a property of the fanatic mind; comprehension is the virtue of the inquiring faculty. The following pages contain facts that you must verify, contemplate and understand. This book requires you to understand its content as a whole. Only then will you realize its true value.

This is a guide book primarily about alternative healthcare approaches meant to emancipate the reader from medieval theories and practices, by sifting through the veil of complexities enveloping the highly venerable Modern Medicine.

It discusses logical and practical concepts and rationale which lead to step by step instructions that you must follow without "ifs" and "buts", if you so decide to reclaim your inherent right to better health.

Every bit of information, texts or diagrams, are put in here for a definite purpose – to provide you with adequate understanding so you can successfully do the treatments yourself, and understand why you must do them. Unless you're already familiar with the subject, skipping thru pages will never help you in any way.

There are certain parts of the treatment, which we will indicate, where you can customize your schedule to suit to your own needs without departing from the essence of the whole protocol.

Rest assured, though, that none of these are impossible to accomplish. In fact, the learning experience could be treated as part of your own therapy, too, as you will surely find it to be.

Overview

This book is designed to provide a complete picture of the healthcare industry with its inherent problem areas, and present very potent alternative solutions.

This book answers the questions: why the mainstream medicine has advanced so well only in the field of diagnostics but never in curative; why, in spite of the huge annual budget for research, finding cure for cancer and AIDS was, and still is, never in sight.

The solutions presented herein are syntheses of ideas which are coming from those who have spent their lifetime searching for answers to these same questions. Some of you may have heard of them subjected to ridicule, and unceremoniously stripped out of doctorate licenses, among others, for refusing to toe the establishments' line. This book is here to let them know that their efforts were not in vain.

- Chapter 1 **Precautions** lays the groundwork by emphasizing the importance of detoxification and abstinence from more toxic chemicals;
- Chapter 2 **The True Power of Cognition** illustrates the importance of using our inherent cognitive abilities and provides some proofs of its true worth;
- Chapter 3 **Inconvenient Facts** explains why these treatment protocols that you are about to learn are not available in mainstream healthcare institutions;
- Chapter 4 **Life Simplified** gives you a good overview of the real nature of the physical world we live in and that of life itself;
- Chapters 5 **Defeating All Disease** & Chapter 6 **Neutralizing Parasites** are the meat of the whole banquet: fully illustrated, step by step instructions on how you will be able to defeat any parasitic disease in the least amount of time and money, and at the comfort of your own home;
- Chapter 7 **The Healthy Lifestyle** suggests how to keep a healthy lifestyle;
- Chapter 8 **Beyond Healthcare** departs from the subject at hand and take you to the bigger picture of the well-being of the planet itself, and;
- The **Appendix** shows support data not detailed in the main text but is discussed in this section with more rigor. You should also check the *Patent Section* here to verify that we are talking with credible hard facts.

Overall, the full appreciation of this book should spur action and initiate total emancipation of the mind and body.

Acknowledgments

These are people who defied the norms and challenged conventions. Men who simply stepped outside the box, and brought back very practical alternative knowledge that can only be considered as exceptional ingenuity behind unimpeachable facts, motivated only by selfless desire to serve.

DR. NIKOLA S. TESLA

DR. ROBERT C. BECK

DR. ROBERT O. BECKER

DR. HULDA CLARK

DR. ROYAL RAYMOND RIFE

DR. OTTO WARBURG

DR. TULLIO SIMONCINI

VIKTOR SCHAUBERGER

THOMAS E. BEARDEN

MARKO RODIN

JACQUE FRESCO

JORDAN MAXWELL

... the same giants in the field of science and research who inspired this writer to contribute his own proverbial two cents.

This author also acknowledges the rare courage displayed by the following individuals in informing the world about the dangers of vaccines, the true orgin of cancer and AIDS and the desire of the few to profit from our gradual demise in collusion with established institutions.

JANE BÜRGERMEISTER

DR. LEONARD G. HOROWITZ

If you happen to know none of these immortals, you are about to know why.

About the Author

Edgar Capilitan Enero is a certified electrical technician, computer programmer, self-educated, independent free energy researcher, free thinker, father and a friend.

Realizing the huge disparity between the cost and quality of delivery, the author dropped out from electronics and communications engineering course after more than a year to pursue the study on his own. This insulated him from the dogmatic nature of the whole system especially in the field of Physics, e.g. the shortsighted Law of Thermodynamics, and prepared him for a complete understanding of the works of Tesla, Bearden, Schauberger, Rodin and many others in the field of free energy.

His earlier training enabled him to rank fourth in the electrical board in 1998.

He loves music as much as he loves to converse about proven progressive ideas, while actively pursuing new ones. He subscribes to the necessity that every resource must be shared freely so that creative ideas can find fruition in the world of mainstream reality for everyone's benefit. He is looking forward to the day when honor triumphs over greed, Science defeats barbarity and enlightenment conquers evil.

We would like to hear from you!

If you have questions or suggestions that would benefit others, you can post your questions at our blog, **www.eclinik.net**, or email us at **eclinik21@gmail.com.**

How eTherapy Saved Me and My Son

In 1998, I was diagnosed to have been infected with Hepatitis B Virus. Like all Filipinos setting their eyes on working abroad for economic reasons, and found out they won't qualify because they failed the blood tests, I was devastated.

After the initial shock had settled down, I began reading all about hepatitis B by standing for 2-3 hours beside one bookshelf in a bookstore, because I can't afford to buy the book. Back then, according to one of the books I've read, 60% of Philippine population have hepatitis, 20% of these were "carriers" (infectious).

Later on, I went to the Philippine General Hospital to get another blood test for free, hoping that the first tests could be wrong.

After looking at the result, the PGH doctor confirmed that I do have hepatitis B. I then asked "what are my options". He said, there are undergoing research on the subject and I just have to wait for its results. He also added that I should come back after 6 months for another test. (All they could do was to monitor how my condition will be progressing.)

In the meantime, I was advised to accept my case as one of the sad realities in life – that I potentially have to live with it 'til my last breath. And so I did.

One day, my son complained to me about coin-sized dark spots on his foot where mosquitos have bitten the night before. I checked and found out the same symptoms I have for *vasculitis* (confirmed in 2006 at St. Luke's Hospital). Vasculitis is the hypersensitivity of the immune system – a condition when one's own immune system is attacking not just the parasites but our own cells as well, hence the blackening of the skin. To add, vasculitis, in my case, was a direct result of my having hepatitis B according to the experts at St. Luke's Hospital. And without doubt, my son also had the same hepatitis I had.

My son's infection of the virus was never acceptable. And so I resumed and literally cranked up my independent research on the subject, until I came across this patent which has the following claims:

"attenuate any bacteria, virus (including AIDS HIV), parasites… but does not make the blood biologically unfit…"

The method portrayed in said patent is uncompromisingly effective yet very invasive. That's because the inventor himself is a good medical doctor, and that's what he was trained for throughout his career – to do medical operations invasively.

If you try to examine this patent, this was granted to the inventors on August 18, 1992. Remember, I was diagnosed in 1998, and the doctors then were saying that "there is no cure for the hepa virus infection yet" and "research are still ongoing". Aren't these doctors doing their homework?

I studied the whole patent, and constructed a device based upon it, but the invasive delivery of the treatment has been eliminated.

We started using the gadget ever since, and have not purchased a single antibiotic from then on. No more dark spots for my son and me. We even invited mosquitos by opening our screen doors at 6:00 pm just to verify and prove to ourselves that the device really work. As we've found the next morning, we only observed tiny red swelling where the mosquitos have bitten, and it didn't grew into bigger dark spots like we've experienced before the treatment but were gone after 3 days. It worked and continues to be so even today – not just for hepa but for his asthma, too. (Asthma was the reason why we relocated to the countryside.)

We just laughed at the H1N1 flu virus as it had been bannered in the mainstream media for several months. Then, we were wondering if we are the only ones who are doing this method. Fortunately not. A notable scientist had been doing this method much earlier for several AIDS victims, and his routines was more comprehensive. Not surprisingly, his protocol works 100% at a time!

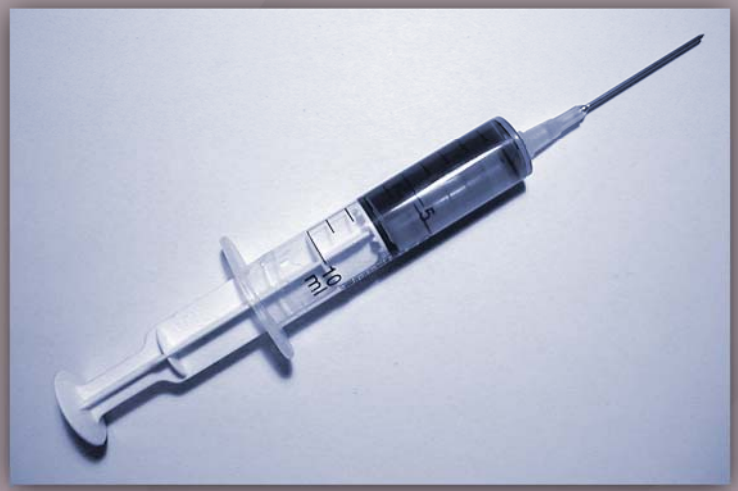
The same method will surely work for you whatever your disease is or will be. Remember, electric current does not distinguish what particular parasite you are infected with, and whether you have singular or multiple infections. The method will attempt to neutralize them all. And best of all, there's no long term harmful side-effects whatsoever. But you need to flush out all neutralized parasites effectively before the next treatment. Detoxification is not something you can take for granted. Otherwise, a permanent damage on the liver and kidneys can be expected, as these neutralized parasites accumulate in these organs and feed new forms of parasites.

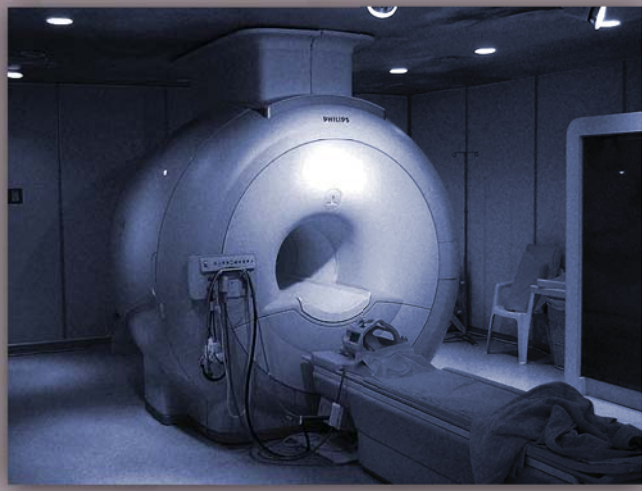
Nowadays, we're only using eTherapy for

maintenance purposes or when there are perceived threats of infection. No more downtime for both of us. No more trips to the drugstore. Don't need vaccines either. Just pure good health all year through.

Now, it's your turn...

... for Phoenix and his generation.





PRECAUTIONS

1

This will not give you miracles, and therefore does not require faith but careful understanding. These are purely scientific, logical and common sense solutions to a problem that has been overly magnified for devious purposes.

You need to fully understand the methods described here and the rationale for which they are used. Only when you are fully convinced that these methods could work will you ever proceed with these treatments.

Detoxify or Die

Electrotherapy, or eTherapy for short, is uncompromisingly very effective, yet it is not without danger. The fact that it can neutralize every parasite known and unknown can overload your liver and kidneys with toxins (i.e. high volume of neutralized parasites) that might result to permanent organ damage.

Neutralized parasites, like dead rats on the streets inviting flies and worms, are *microbiological garbage* rotting inside the liver and kidneys inviting new forms of parasites. This new parasitic infections not only negate the gains of eTherapy, but may also result to an early death.

In order to avoid this catastrophic scenario, you are hereby required to help these organs in the detoxification process by taking in generous amount of water, at least one glass every waking hour, preferably *ozonized*. If you follow this simple yet very important advice, your full recovery is definitely assured. Detoxification is not something you can take lightly.

You also need to start slowly, i.e. don't take the maximum duration of eTherapy on the first days or weeks of your treatment. Any signs of detoxification failure should be dealt with accordingly. *(More information at* ***Proper***

PRECAUTIONS

- avoid taking all medications (e.g. drugs, herbals, garlic, etc.) and vitamins
- avoid taking all processed or bottled foods and drinks; no need to be a vegetarian either
- avoid taking all forms of alcohol (e.g. liquor, isopropyl or rubbing alcohol, ethanol, etc.)
- avoid nicotine, coffee, cocaine, and other similar substances - their effects could multiply 30 or more times
- avoid pregnancy during treatment; pregnant women should not take any of these treatments
- avoid driving a vehicle or any heavy and/or motorized machineries within the first 40 minutes after each treatment

Detoxification *Section - Chapter 5 Defeating All Disease.)*

Further, these treatments increase the absorption rate of any substance you might have consumed. This is due to *electroporation*. What is normally safe, like vitamin A, will become deadly. Therefore, one week prior to starting the treatment, avoid all of the items listed on the **Precautions t**able. Critical drugs should be stopped 24 hours prior to eTherapy.

Alcoholics and heavy smokers should not take electrotherapy at this time for their own safety. There is however a better non-drug solution to eliminate their alcohol or nicotine addiction. The method electronically restores the normal production of *endorphins* and prevents any withdrawal symptom whatsoever. These vices will be gone in a month or so depending on how effective you have administered the treatment. *(Please go directly to Chapter 7* ***The Healthy Lifestyle*** *for more on this topic.)*

Again, avoid all those listed in the **Precautions** table on the previous page and take adequate amount of water. Neither this book nor the author can possibly do these for you. Your level of *active cooperation* is, therefore, the only limiting factor by which the efficacy and success of the whole treatment can be measured. You are now in full control of your own life. Be responsible.

Signs of Detoxification Failures

Be observant and sensitive about your condition. It would help if you have a log book for daily record of how you are progressing. These treatments are never regressive for as long as you have detoxified properly. All problems that may arise are all related to detoxification failures. Please don't take this warning lightly. This is very crucial especially in advanced cases where the window for error is very narrow.The following are just some of the signs of detoxification failures which are avoidable if you take the necessary precautions:

- headache
- flu-like fever
- skin rashes/eruptions
- jaundice
- giddiness / dizziness
- light-headed vagueness
- nausea
- itching, boils

- coughing
- kidney and liver discomfort
- aches or general malaise
- inflammations
- frequent urination
- sluggishness

How to Avoid Detoxification Failures?

In order to avoid these unwanted conditions, you need to:

- ☑ Start your treatment slowly, i.e. take 5 to 15 minutes only for arterial electrification instead of the maximum 2 hours on the first 1-2 weeks; 5 minutes for magnetic induction instead of the full 15 minutes; this is to limit the production of microbiological garbage which could overload your liver and kidneys; remember, during the first day of your treatment, your parasite density is at its peak; this density level will gradually decrease as your treatment progresses and if you detoxify properly;
- ☑ Increase daily water intake as can be made possible; a glass or more every hour is highly recommended;
- ☑ In extreme cases, take a one day off from electrical therapy or until headache or fever subsides, but continue detoxifying by maintaining generous intake of ozonized water. In no time should the detoxification routines be stop, even more so during the temporary suspension of the treatments.

Another method which you should try is *enema* using baking soda solution. *Enema* is the process of introducing liquids into the rectum and colon via the anus for various purposes. It is very important for the colon to be cleansed since it is responsible for absorbing water and potassium which your blood needs desperately. And since we are using baking soda solution, your blood pH acidity can also be neutralized in this manner.

Monitor your blood pH levels to determine whether you have to stop your baking soda enema. Use the same 5% baking soda solution consistency into a regular enema bottle. Carefully monitor your own progress. Normal arterial blood pH level is about 7.41 and venous blood is 7.37 pH.

Stop Not Your Fever But The Parasite Causing It

Whether you are already under treatment and experiencing one of the signs of detoxification failure, i.e. fever, or otherwise, you should consider this advice:

Do you remember when you had a fever, the earlier and the more paracetamol you took in, the longer the actual duration of the fever before it actually subsided?

Fever is a sign of new or increased parasitic infection. When we say parasite, we mean all pathogens, bacteria, worms, fungus, microbes, or any organisms that are not supposed to be coexisting within us.

When our body detects this infection, immune response protocol dictates that it must produce additional white blood cells or *leukocytes* to combat rising parasitic population, and it requires enormous energy. In so doing your body expends most of its available energy for this purpose, your temperature rises, and we feel the fever.

Fever is a natural immunoresponse mechanism that should not be muted but only regulated via natural means. You should not try to stop this initial activity for the first 3 to 4 hours. What better you can do thereafter is to regulate your body temperature so it won't shoot up to unmanageable levels by subjecting yourself to cool baths from time to time, and by drinking lots of liquids. It is equally important to avoid exposing oneself to forced air circulation after the shower.

When the body has produced enough white blood cells to combat the infection, your temperature gradually eases down, i.e. the fever subsides, and your condition improves.

You don't need to take in *paracetamol* or pain reliever which may affect the liver instead of helping it flush these increasing level of toxins. Try this suggestion also when you have a headache. Detoxify first before trying anything else.

There is also another finding recently that the increase in temperature is also the body's method of directly killing the parasites. We have some reservations to this assertion because some bacteria do love warmer environment like the armpits, and scrotum which is manifested by the development of undesirable odor if left unchecked.

You will soon experience what I and my family have been enjoying for several years now – *healthcare freedom*. It is now within your grasp. However, one question remains - How bad do you really want to stop the habit of going to a drugstore for all your healthcare needs?

The Suicidal Majority

Not all sufferers want to get well, even if they say they do.

Experts have claimed that approximately 85% of the members of the dominant religion today have *unconscious death wish*. And it's easy to recognize when they have it based on their behaviour. Persons with unconscious death wish will make all kinds of excuses not to do what needs to be done.

The failure to recognize any incentive for getting well can contribute significantly to the failure of this whole exercise. If that is your case then better pass this book unto the next person before you waste more of your time. He would surely be grateful.

The outcome of the treatments you will be undergoing using instructions from this book will challenge your deep seated beliefs, and you may not be able to handle it.

Getting well is easy to wish for, but responding to the seemingly simple question, "What am I going to do after I've gotten rid of all my ailments", might be hard for most who have been bed-ridden for some time.

One way of putting oneself into the right psychological perspective prior, during and after eTherapy, is to recognize the fact that we are all here for a reason -- to serve one another. If you consider your whole existence from this viewpoint, then you'll never ran out of things to do.

There's always someone out there that needs your help; always some tasks that need your attention. Sometimes, even just your mere presence is more than enough to inspire others to continue living.

You can preserve the lives of others by first preserving yours.

Post Recovery Stress is Very Real

There are cases of persons taking suicides after complete remissions. While these could be perplexing at first, the cause is simply the natural tendency of the body to resist change, or *inertia*. And while it always take great effort to overcome inertia, there is a very effective method that could make it more bearable.

At this early stage, it is very advisable that you list all the things you will be doing after you are done with the three or so months of eTherapy. Expand this list as you go along. That way, the initial shock of being freed from long drawn illnesses won't be that hard to handle. Also, ask for the complete cooperation of everyone near you: family and friends.

Above all, maintain a positive outlook. You have all reasons to be. Bear in mind that most problems you might be experiencing during eTherapy are all related to detoxification failures which can be avoided by adequate water intake.

So if you really want to get well, then what are you waiting for?

Read on and just do it.

TO DO LIST

"Nature holds the key to our aesthetic, intellectual, cognitive and even spiritual satisfaction. "

Arnold Bennett

THE TRUE POWER OF COGNITION 2

We are born with inherent cognitive capacity to overcome whatever adversities we are confronted with. We just need to recognize, acknowledge and act upon it. We need to acknowledge that problems do exist in the medical industry no matter how uncomfortable or painful that would be.

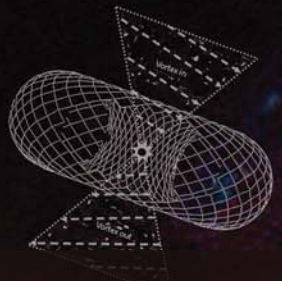
The Forgotten Common Sense

We have to accurately define the problem first before a possible solution starts to crystallize. This cognitive power to solve a given problem is once called *Common Sense*. Everybody is supposed to have it, but now it has become so uncommon, far too many have already forgotten that the solution lies in the process called *thinking*.

The design and method of educating today's children force them to memorize and follow, without question, scientific dogmas which limit their capacity to think creatively and critically. The whole education mechanism is successfully transformed into a very potent tool of *indoctrination*. This mental degradation is complemented with *consumerism* promoted by the mainstream media which encourage everyone to buy off-the-shelf, ready-made, encapsulated instant solution, rather than searching for the best possible option which won't cost significantly high, while providing the best benefit. Worst of all, is the addition of heavy metals cloaked under a different name, into our state-required vaccines under the pretext of immunization to "protect us" but in reality, a means of destroying brain cells before a child reaches seven years old. And when the situation becomes critical and increasingly unbearable, the professional advise is to pray for miracles.

This significant departure from the thinking process and the heavy reliance on instant ready-made solutions effectively induce passivity and fatalistic behaviour.

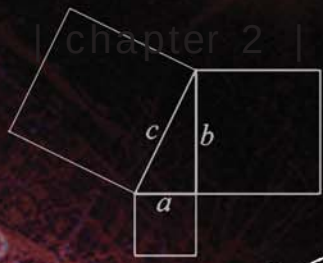
Make no mistake about it, we have to do it ourselves. We need to find the solution for nobody else will do these things for us.



Is There Something We Can Do?

The fact of the matter is we have already been given by Nature all that we really need in order to survive life here on Earth. We just need to use it. Our own brain cells are more than capable of finding ways to formulate countermeasures to defeat cancer and AIDS for good and in the least possible cost and time. We will find and prove that here, in this book.

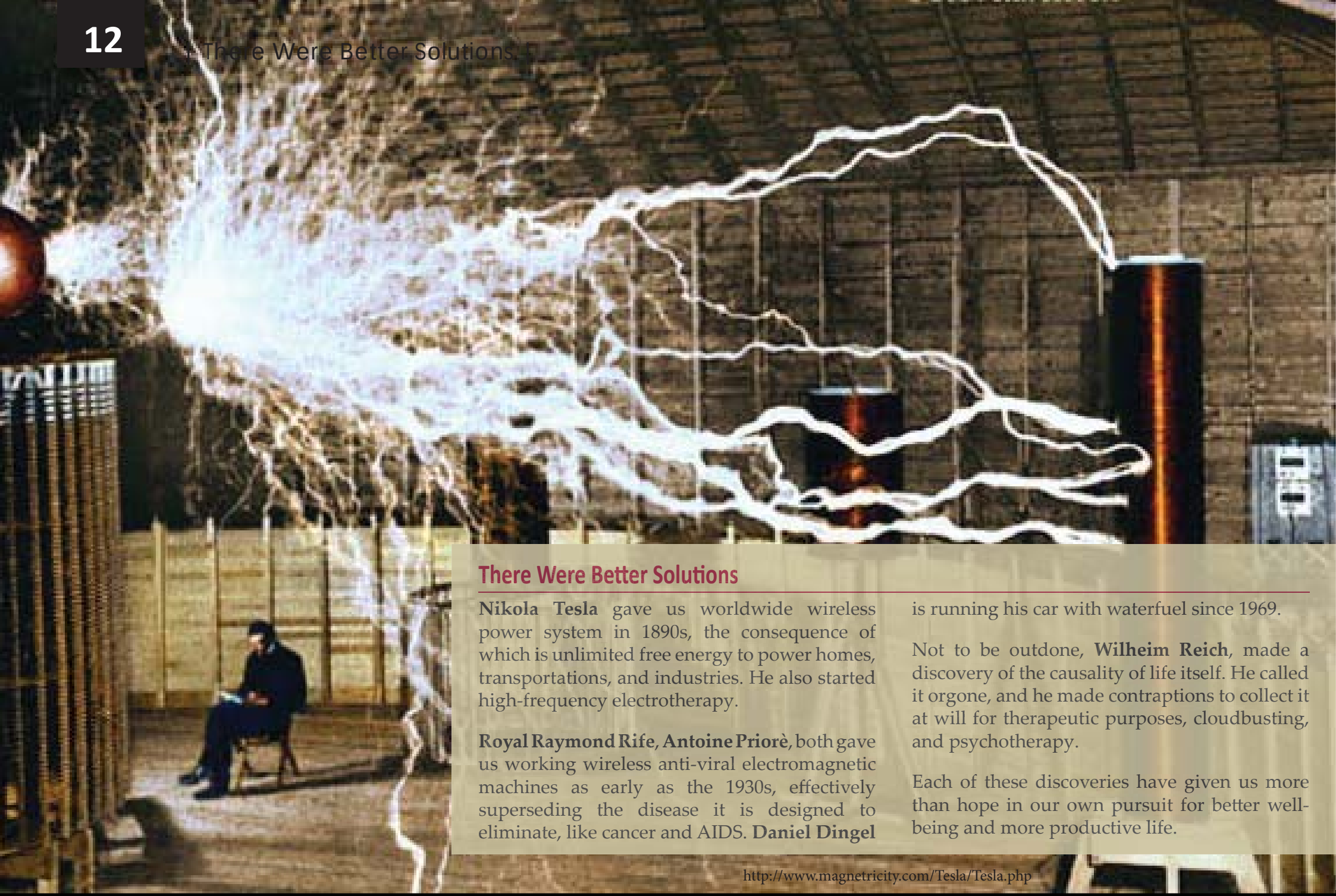
We don't have to rely on some imaginary Supreme Being that will come soon to bring forth redemption. We are that Being; we have the power to redeem ourselves for we are already godly. This has been the greatest truth that's been hidden from us for thousands of years. We are far more than what we think we really are. We share in the divinity of the One True God, the most powerful being of all that is Nature. This is not some New Age blurb. The new age movement is just another religion run by the same evil.



Evil thrives in our credulity. Once the people of this planet assert their true worth will the madness ends.

So, prepare yourself now by throwing away all that you have learned so far, those that the mainstream institutions have been feeding you all this time, and those that did not help alleviate your condition in any way. Try opening up your mind to new ways of thinking, while trying to rediscover old ones -- unconventional ideas which validity you can easily verify.

These are the things that we can do...



There Were Better Solutions

Nikola Tesla gave us worldwide wireless power system in 1890s, the consequence of which is unlimited free energy to power homes, transportations, and industries. He also started high-frequency electrotherapy.

Royal Raymond Rife, **Antoine Priorè**, both gave us working wireless anti-viral electromagnetic machines as early as the 1930s, effectively superseding the disease it is designed to eliminate, like cancer and AIDS. **Daniel Dingel** is running his car with waterfuel since 1969.

Not to be outdone, **Wilheim Reich**, made a discovery of the causality of life itself. He called it orgone, and he made contraptions to collect it at will for therapeutic purposes, cloudbusting, and psychotherapy.

Each of these discoveries have given us more than hope in our own pursuit for better well-being and more productive life.

http://www.magnetricity.com/Tesla/Tesla.php

Orgonomy by Wilheim Reich

Wilheim Reich (1897-1957) was the most controversial figure in the field of psychoanalysis and healthcare in general. He discovered the "primordial cause of life" which he called *orgone*. His being an atheist qualified him to become a member of the communist party which he later denounced upon realizing that communism is "Red Fascism". He later wrote "The Mass Psychology of Fascism" in 1933, and thus the suppression of his work began.

Both the Nazis and the US-FDA took measures in halting his activities by outlawing all books and journals carrying his work, and by burning *orgone accumulators* which he used to treat patients with cancer. Eventually, he was put to prison when FDA filed a suit based solely on an unfavourable comment of one writer Mildred Edie Brady of which he didn't attend the trial based on the argument that the court is not qualified to handle cases of scientific nature.

He was sentenced to two-year imprisonment but before he could apply for parole he unexpectedly died of a heart attack at the age of sixty.

Reich's discovery was of profound implications. He completely understood the origin of life itself. But while he gave it a new name, *orgone* is just the same as the entity we call *energy* which occupies all space and from which everything is really made of.

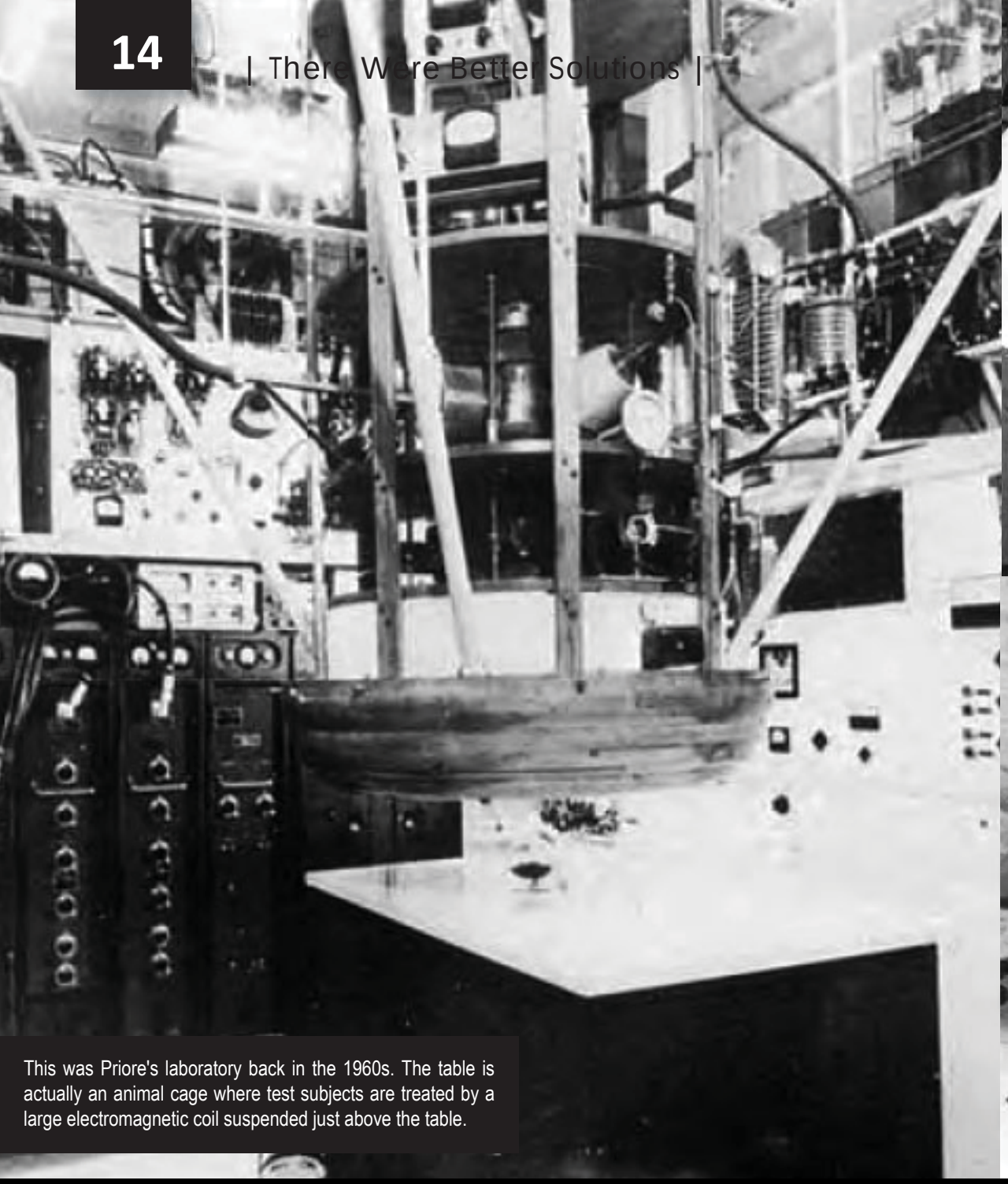
Orgone is energy and Life itself. The prime characteristic of energy, i.e. *cannot be destroyed nor created but can only be transformed*, should have eliminated the ambiguity.

Today, his theories are still being used at the American College of Orgonomy and Institute for Orgonomic Science. His lifetime's work is being preserved at the Wilheim Reich Museum.

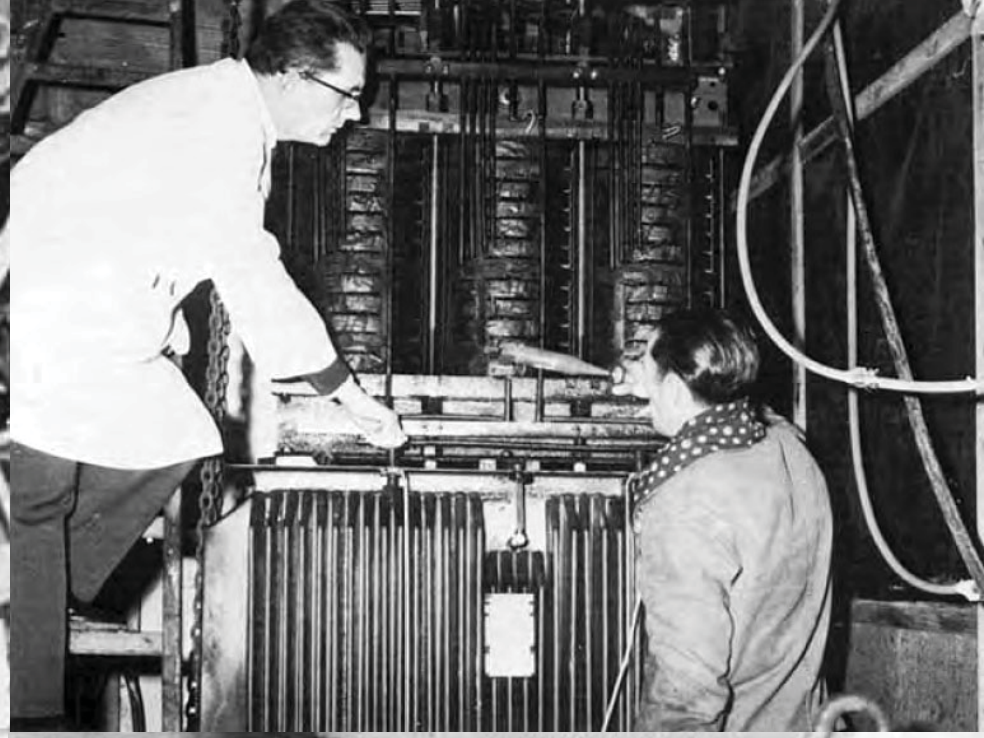
Among his theories that made a great impact is that illnesses may be caused by sexual repression, and that psychoanalytic taboos reinforce the neurotic taboos of the patient. He recommended as curative measure an active guilt-free sex life.

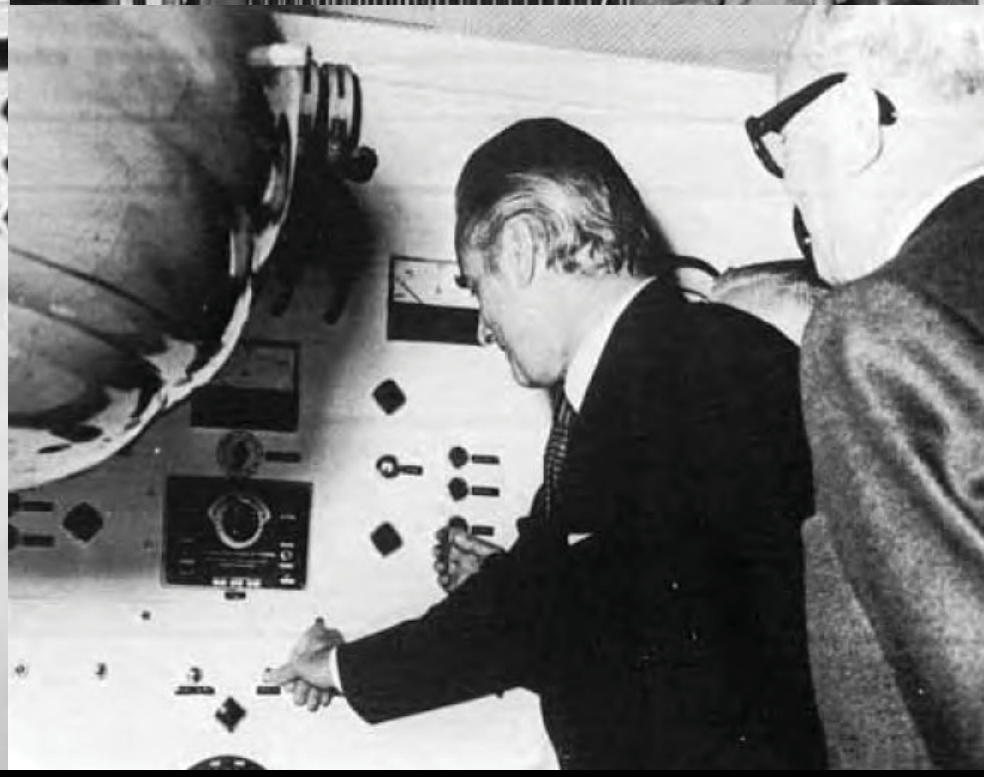
"One of the early observed and remarkable features of the high frequency currents, and one which was chiefly of interest to the physician, was their apparent harmlessness which made it possible to pass relatively great amounts of electrical energy through the body of a person without causing pain or serious discomfort."

Nikola S. Tesla, 1898 annual meeting of the American Electro-Therapeutic Association in Buffalo, NY entitled, "High Frequency Oscillators for Electro-Therapeutic and Other Purposes."



This was Priore's laboratory back in the 1960s. The table is actually an animal cage where test subjects are treated by a large electromagnetic coil suspended just above the table.





The Priore Anti-Cancer Machine

When Tesla was murdered in 1943, he had already laid down the foundation of how we should advance into the 21st century and beyond, especially in the field of free energy, antigravity, and electrotherapy. Following this mindset was Antoine Priore who found a worthy sponsor - the French Government. But like Tesla, Priore's benefactor withdrew when it was already made clear that his machine does work far more than what was expected.

"In the late 1960s and early 1970s, Antoine Priore and a team of leading French scientists demonstrated conclusive, total remissions of terminal tumors and infectious diseases in hundreds of laboratory animals. Their research was performed under rigorous scientific protocols and funded by the French Government. The approach employed very complicated mixing of multiple electromagnetic signal [EM wave] in a rotating plasma, and modulating the mixed output upon a very strong rippling magnetic field to which the body of the test animal was exposed. Complete remission of the treated diseases was obtained. In addition, the animals' immune systems were also restored to normal. Further, disease-specific antibodies were also created: a single drop of blood drawn from an animal that had been treated and recovered, and injected into the body of a second animal with the same terminal illness, resulted in total remission of the disease in the second animal and its total recovery."

Thomas E. Bearden

In trying to explain the mechanics of how the Priore Machine works, Bearden has this to say:

"The electrical physics is based on the Stoney, Whittaker, and Ziolkowski decomposition of the scalar EM potential into bidirectional EM wave pairs. Deliberate assembly of such a structure forms a vacuum engine of nested curvatures of local spacetime. Priore unwittingly made such a hyperspatially structured vacuum engine, one with the special characteristic that it time-reversed (dedifferentiated) diseased, but also fully restores the cells and "factories" of the patient's immune system because they too revert back to their previous healthy condition."

I know, it's a mouthful. But believe me, all these technobabble will become clearer before you got to the end of this book. But if you are in a hurry, go to the Basic Electronics section of the Appendix, and read about the subject on *resonance*. One must understand right off that when all parasites in our body are gone, *neuropeptides* return naturally. One of these is *interferon* which interferes cancer cell growth.

http://www.cheniere.org/priore/index.html

Lt. Col. Thomas E. Bearden, PhD, MS (Nuclear Engineering, BS (Mathematics, minor Electronic Engineering), Co-Inventor of the Motionless Electromagnetic Generator [MEG], a free energy device. Spent a decade investigating the physics of Priore's Electromagnetic Anti-Cancer Machine.

EVENING TRIBUNE

FINAL HOME

House Forces Vote on Wage-Hour Bill

DREAD DISEASE GERMS DESTROYED BY RAYS, CLAIM OF S. D. SCIENTIST

Cancer Blow Seen After 18-Year Toil by Rife

'Klan' Threat To Filipino Guardsmen

DRY SEASON ON FIRE OFFICIALS URGE PRECAUTION

Deal Is Raked By Hoover as 'Dictatorship'

Petition O. K.'d In Scramble By Solons

Boost in Cost Of S. D. Relief

'WON'T RUN IN '40,' ROOSEVELT QUOTED IN PARIS PAPER

The New York Times

BACILLI REVEALED BY NEW MICROSCOPE; Dr. Rife's Apparatus, Magnifying 17,000 Times, Shows Germs Never Before Seen.

Special to The New York Times. (); November 22, 1931, , Section , Page 19, Column , words

SIGN IN TO E-MAIL

The Rife Microscope & Anti-Cancer Machine

Another fascinating proof of endless capabilities of the human brain is the super sensitive microscope that allow us to peep through the microscopic world of the virus.

"In 1913, a man with a love for machines and a scientific curiosity, arrived in San Diego after driving across the country from New York.

He had been born in Elkhorn, Nebraska, was 25 years old, and very happily married. He was about to start a new life and open the way to a science of health which will be honored far into the future. His name was Royal Raymond Rife. Close friends, who loved his gentleness and humility while being awed by his genius, called him Roy.

Royal R. Rife was fascinated by bacteriology, microscopes and electronics. For the next seven years (including a mysterious period in the Navy during World War I in which he travelled to Europe to investigate foreign laboratories for the U.S. government), he thought about and experimented in a variety of fields as well as mastered the mechanical skills necessary to build instruments such as the world had never imagined.

By the late 1920s, the first phase of his work was completed. He had built his first microscope, one that broke the existing principles, and he had constructed instruments which enabled him to electronically destroy specific pathological micro-organisms.

Rife believed that the minuteness of the viruses made it impossible to stain them with the existing acid or aniline dye stains. He'd have to find another way. Somewhere along the way, he made an intuitive leap often associated with the greatest scientific discoveries. He conceived first the idea and then the method of staining the virus with light. He began building a microscope which would enable a frequency of light to coordinate with the chemical constituents of the particle or micro-organism under observation.

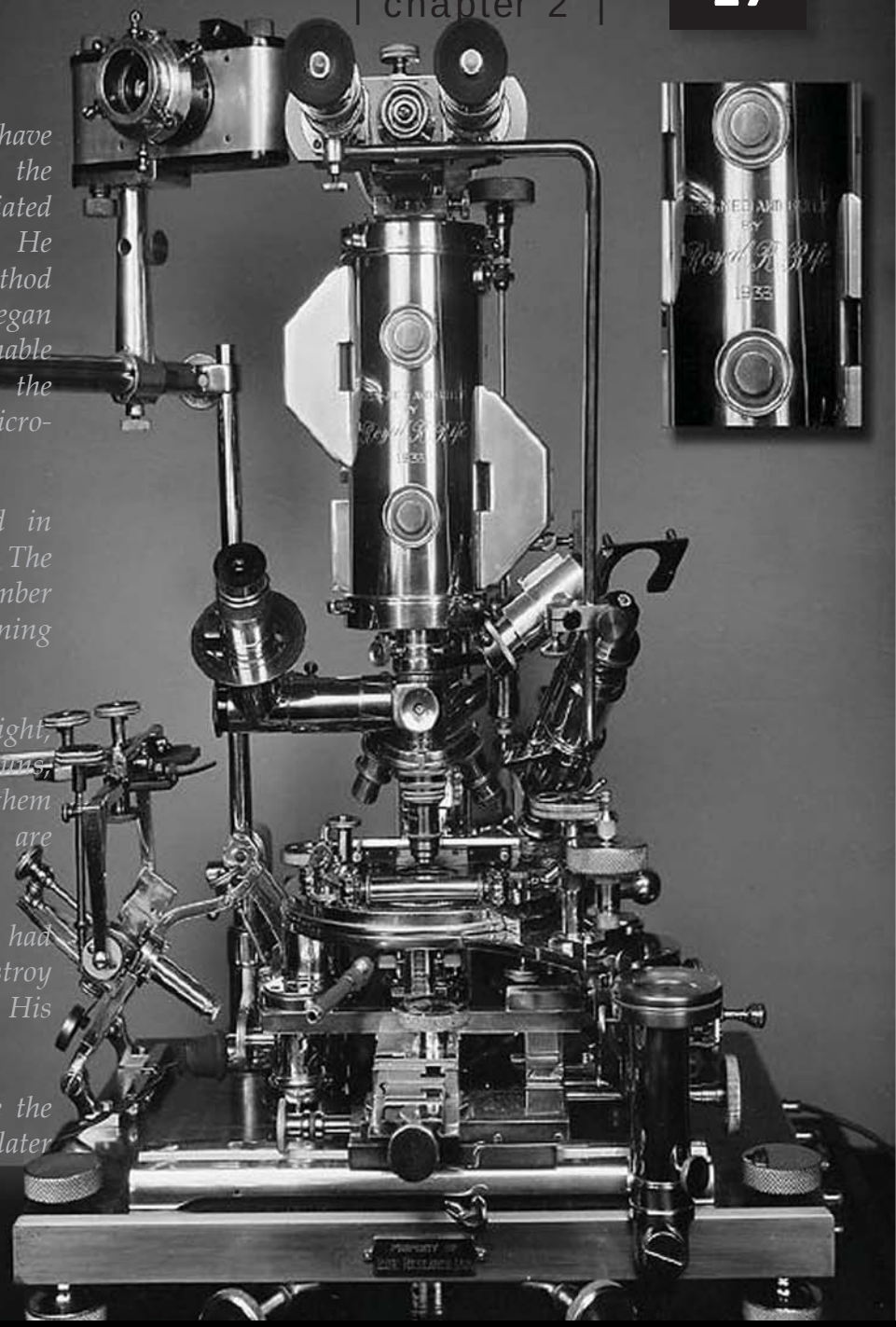
Rife's second microscope was finished in 1929. In an article which appeared in The Los Angeles Times Magazine on December 27, 1931, the existence of the light-staining method was reported to the public:

Bacilli may thus be studied by their light, exactly as astronomers study moons, suns, and stars by the light which comes from them through telescopes. The bacilli studied are living ones, not corpses killed by stains.

Throughout most of this period, Rife also had been seeking a way to identify and then destroy the micro-organism which caused cancer. His cancer research began in 1922.

It would take him until 1932 to isolate the responsible micro-organism which he later named simply the "BX virus."

http://www.bibliotecapleyades.net/ciencia/supressed_inventions/suppressed_inventions12.htm



Being able to see the prime cause of disease, he is now more than ready now to tackle the problem of eradicating it. And he did.

The technical understanding that led him to the final design of his powerful microscope would also help him into the best method by which the parasite can be neutralized or disabled. He assembled a combination of signal generators, frequency modulators, and signal mixers and fed the output into a beam ray tube to focus the treatment into a specific area, say a tumor.

His technique involves resonance, i.e. that phenomenon similar to an opera singer breaking the glass, although he was doing it electronically. *(Please see Basic Electronics section of the Appendix.)* After he had isolated the virus causing the diseases, he would tune in his frequency generator to that frequency which he had documented to be lethal to that particular parasite. Over the years he had collected a list of these frequencies.

He also discovered a phenomenon called *pleomorphism*, i.e. a condition by which the parasite morphs or changes its physical characteristics depending on the environment or life cycle it is in. This is a revolutionary finding at that time. This could also explain why a parasite becomes resistant to a given antibiotic over time, and could be avoided using less expensive method as you will find later on.

But the best of all that can happen using his technique is the absence of any side-effects, apart from the short three minute duration of the treatment.

"With the frequency instrument treatment, no tissue is destroyed, no pain is felt, no noise is audible, and no sensation is noticed. A tube lights up and 3 minutes later the treatment is completed. The virus or bacteria is destroyed and the body then recovers itself naturally from the toxic effect of the virus or bacteria. Several diseases may be treated simultaneously." - Rife

These accomplishments were being made public at that time. Newspaper reporters were scrambling to get a piece of him. Scientists and fellow medical practitioners were equally amazed.

"I would like to make this historical record of the amazing scientific wonders regarding the efficacy of the frequencies of the Royal R. Rife Frequency Instrument...

When I was told about Dr. Rife and his frequency instrument at the Ellen Scripps home near the

Scripps Institute Annex some twenty-two years ago, I went out to see about it and became very interested in the cases which he had there. And the thing that brought me into it more quickly than anything was a man who had a cancer of the stomach.

Rife was associated at that time with Dr. Milbank Johnson, M.D., who was then president of the Medical Association of Los Angeles, a very wealthy man and a very big man in the medical world—the biggest in Los Angeles and he had hired this annex for this demonstration over a summer of time.

In that period of time I saw many things and the one that impressed me the most was a man who staggered onto a table, just on the last end of cancer; he was a bag of bones. As he lay on the table, Dr. Rife and Dr. Johnson said, "Just feel that man's stomach." So I put my hand on the cavity where his stomach was underneath and it was just a cavity almost, because he was so thin; his backbone and his belly were just about touching each other.

I put my hand on his stomach which was just one solid mass, just about what I could cover with my hand, somewhat like the shape of a heart. It was absolutely solid! And I thought to myself, well, nothing can be done for that. However, they gave him a treatment with the Rife frequencies and in the course of time over a period of six weeks to two months, to my astonishment, he completely recovered. He got so well that he asked permission to go to El Centro as he had a farm there and he wanted to see about his stock.

Dr. Rife said,

"Now you haven't the strength to drive to El Centro."

"Oh, yes," said he. "I have, but I'll have a man to drive me there."

As a matter of fact, the patient drove his own car there and when he got down to El Centro he had a sick cow and he stayed up all night with it. The next day he drove back without any rest whatsoever—so you can imagine how he had recovered.

I saw other cases that were very interesting. Then I wanted a copy of the frequency instrument. I finally bought one of these frequency instruments and established it in my office. I saw some very remarkable things resulting from it in the course of over twenty years."

- Dr. James Couche, 1956

Bone & Organ Regeneration

"No other science deals in its very name with a subject that it cannot define."

This was Erwin Chargaff referring to *biology*. He was the biochemist who discovered base pairing in DNA which paved the way for the understanding of the gene structure. Biology, of course, is the preparatory course for everyone studying medicine.

In just about time Antoine Priore was perfecting his wireless anti-cancer machine, **Dr. Robert O. Becker** was deeply involved in his bone regeneration research. And just like any other who were frustrated about the helplessness of the profession, he turned away from biochemical and mechanistic approach to medicine to one that is saner and more natural, i.e. the use of electricity.

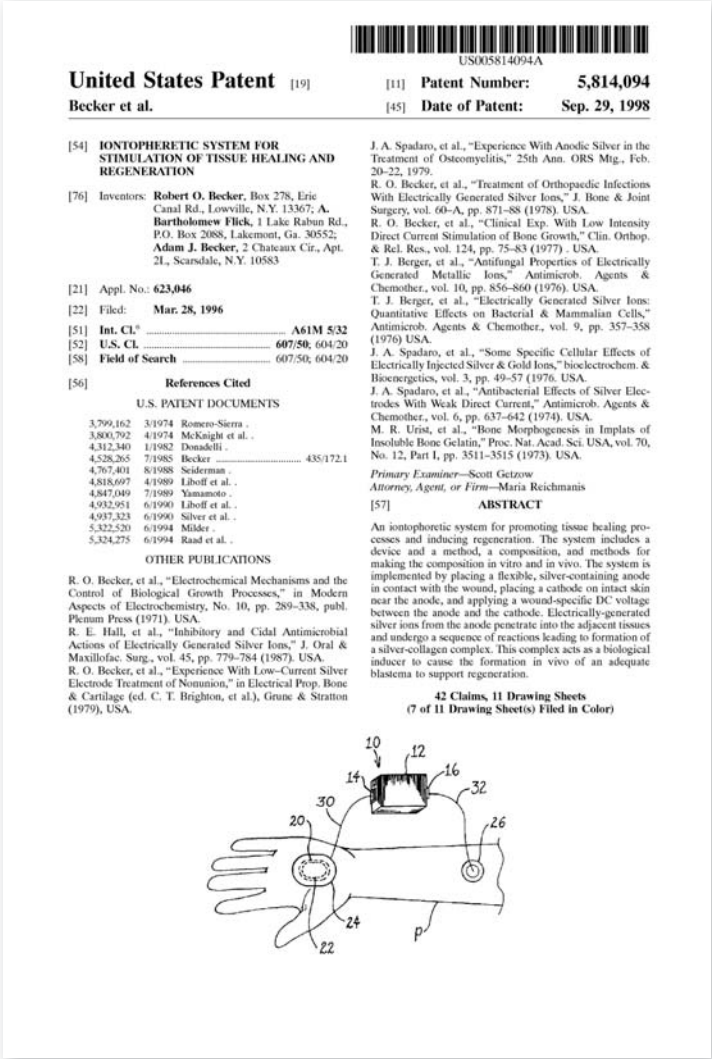
"I've been able to tack against the prevailing winds of orthodoxy and indulge my passion for experiment. In so doing I've been part of a little-known research effort that has made a new start toward a definition of life."

His research on bone regeneration as inspired by salamanders yielded profound understanding of "pain, healing, growth, consciousness, the nature of life itself and the dangers of our electromagnetic technology" (e.g. cellphones, xray machines, radiotherapy).

Becker had successfully induced full foot and finger regrowth as if the patients haven't lost any of their limbs to begin with. The healing is less painful and looked as natural as the original tissues. The key factors of his success were the use of silver electrodes and electric current which obviously produced ions that promote complete healing of the wounds.

His discovery and method can be gleaned through his US Patent 5814094 titled *"Iontopheretic System for Healing of Tissues and Regeneration"* which was awarded to him on September 29, 1998.

During his research days in the '60s, he was already attempting to regenerate full organs like the heart, liver, spinal cord and brain. Sadly, his research fundings were withdrawn for reasons we can only speculate.



US005814094A

United States Patent [19]
Becker et al.

[11] **Patent Number: 5,814,094**
[45] **Date of Patent: Sep. 29, 1998**

[54] **IONTOPHERETIC SYSTEM FOR STIMULATION OF TISSUE HEALING AND REGENERATION**

[76] Inventors: **Robert O. Becker**, Box 278, Erie Canal Rd., Lowville, N.Y. 13367; **A. Bartholomew Flick**, 1 Lake Rabun Rd., P.O. Box 2088, Lakemont, Ga. 30552; **Adam J. Becker**, 2 Chateaux Cir., Apt. 2I., Scarsdale, N.Y. 10583

[21] Appl. No.: **623,046**

[22] Filed: **Mar. 28, 1996**

[51] **Int. Cl.**[6] **A61M 5/32**
[52] **U.S. Cl.** **607/50**; 604/20
[58] **Field of Search** 607/50; 604/20

[56] **References Cited**

U.S. PATENT DOCUMENTS

3,799,162	3/1974	Romero-Sierra .	
3,800,792	4/1974	McKnight et al. .	
4,312,340	1/1982	Donadelli .	
4,528,265	7/1985	Becker	435/172.1
4,767,401	8/1988	Seiderman .	
4,818,697	4/1989	Liboff et al. .	
4,847,049	7/1989	Yamamoto .	
4,932,951	6/1990	Liboff et al. .	
4,937,323	6/1990	Silver et al. .	
5,322,520	6/1994	Milder .	
5,324,275	6/1994	Raad et al. .	

OTHER PUBLICATIONS

R. O. Becker, et al., "Electrochemical Mechanisms and the Control of Biological Growth Processes," in Modern Aspects of Electrochemistry, No. 10, pp. 289–338, publ. Plenum Press (1971). USA.
R. E. Hall, et al., "Inhibitory and Cidal Antimicrobial Actions of Electrically Generated Silver Ions," J. Oral & Maxillofac. Surg., vol. 45, pp. 779–784 (1987). USA.
R. O. Becker, et al., "Experience With Low–Current Silver Electrode Treatment of Nonunion," in Electrical Prop. Bone & Cartilage (ed. C. T. Brighton, et al.), Grune & Stratton (1979), USA.
J. A. Spadaro, et al., "Experience With Anodic Silver in the Treatment of Osteomyelitis," 25th Ann. ORS Mtg., Feb. 20–22, 1979.
R. O. Becker, et al., "Treatment of Orthopaedic Infections With Electrically Generated Silver Ions," J. Bone & Joint Surgery, vol. 60–A, pp. 871–88 (1978). USA.
R. O. Becker, et al., "Clinical Exp. With Low Intensity Direct Current Stimulation of Bone Growth," Clin. Orthop. & Rel. Res., vol. 124, pp. 75–83 (1977) . USA.
T. J. Berger, et al., "Antifungal Properties of Electrically Generated Metallic Ions," Antimicrob. Agents & Chemother., vol. 10, pp. 856–860 (1976). USA.
T. J. Berger, et al., "Electrically Generated Silver Ions: Quantitative Effects on Bacterial & Mammalian Cells," Antimicrob. Agents & Chemother., vol. 9, pp. 357–358 (1976) USA.
J. A. Spadaro, et al., "Some Specific Cellular Effects of Electrically Injected Silver & Gold Ions," bioelectrochem. & Bioenergetics, vol. 3, pp. 49–57 (1976. USA.
J. A. Spadaro, et al., "Antibacterial Effects of Silver Electrodes With Weak Direct Current," Antimicrob. Agents & Chemother., vol. 6, pp. 637–642 (1974). USA.
M. R. Urist, et al., "Bone Morphogenesis in Implats of Insoluble Bone Gelatin," Proc. Nat. Acad. Sci. USA, vol. 70, No. 12, Part I, pp. 3511–3515 (1973). USA.

Primary Examiner—Scott Getzow
Attorney, Agent, or Firm—Maria Reichmanis

[57] **ABSTRACT**

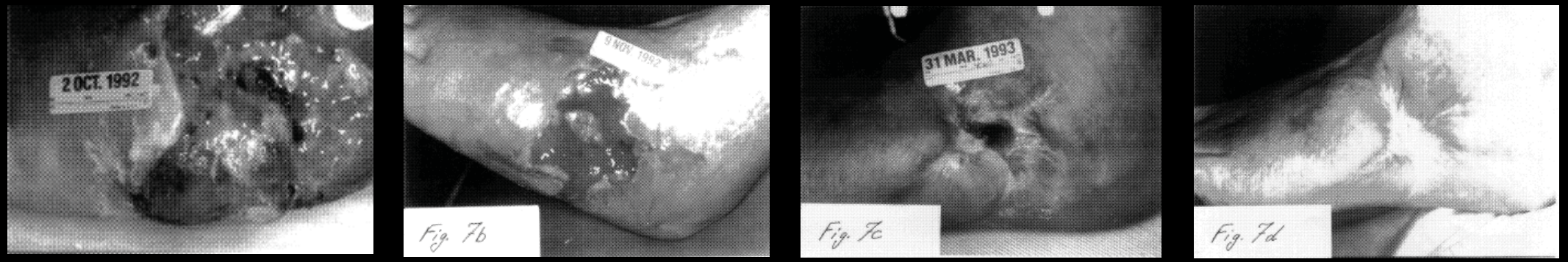
An iontophoretic system for promoting tissue healing processes and inducing regeneration. The system includes a device and a method, a composition, and methods for making the composition in vitro and in vivo. The system is implemented by placing a flexible, silver-containing anode in contact with the wound, placing a cathode on intact skin near the anode, and applying a wound-specific DC voltage between the anode and the cathode. Electrically-generated silver ions from the anode penetrate into the adjacent tissues and undergo a sequence of reactions leading to formation of a silver-collagen complex. This complex acts as a biological inducer to cause the formation in vivo of an adequate blastema to support regeneration.

42 Claims, 11 Drawing Sheets
(7 of 11 Drawing Sheet(s) Filed in Color)

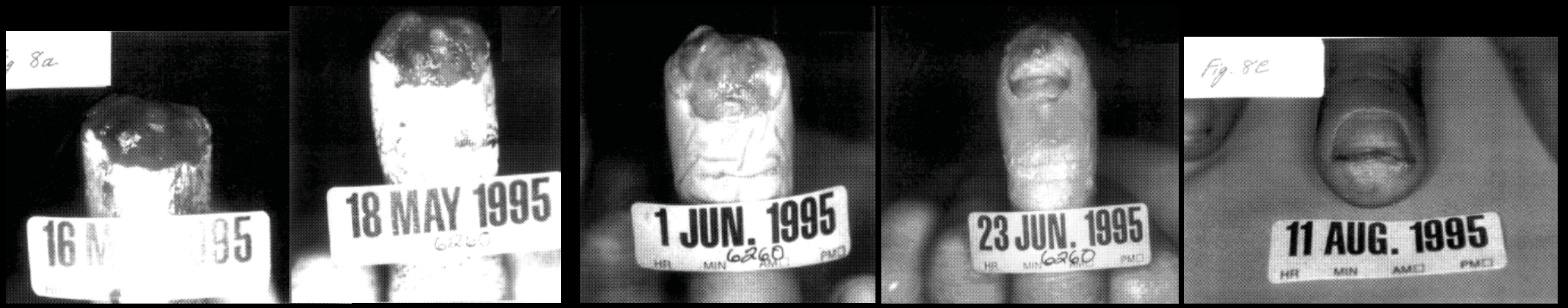
"The sheaths surrounding the nerves are not merely insulation as described in established biology but are 'real wire' that reach into each area of the body to create a normal electrical environment around each cell, or a stimulatory one when healing growth is needed."

- Becker

Open wound healed and fractured foot regenerated in less than six months...



Severed finger regenerated in less than three months...



Summary

In this chapter, we have illustrated and proved that we are not helpless in the fight against cancer and AIDS. The solutions were discovered even before these "incurable" diseases erupted.

The Priore Machine enables cellular time reversal, i.e. reverts cancerous cells back to their former healthy state. This involves subjecting the patient to multi-frequency modulated electromagnetic field for a certain period. There were no reported side-effects except that patients were achieving complete and verified remissions.

Rife's ultra-high magnification microscope and frequency machine achieved similar results which made it to the headlines in the 1930s. Even distinguished doctors were validating and applauding the results.

Wilheim Reich provided a glimpse to the invisible force that causes life. He demonstrated that this energy he called *orgone* can be summoned at will to reinvigorate receding health.

Becker investigated the regenerative mechanism of a salamander and employed the knowledge gained in the full regeneration of fractured limbs. He also explored the idea of fully restoring organs such as the liver, heart and brain.

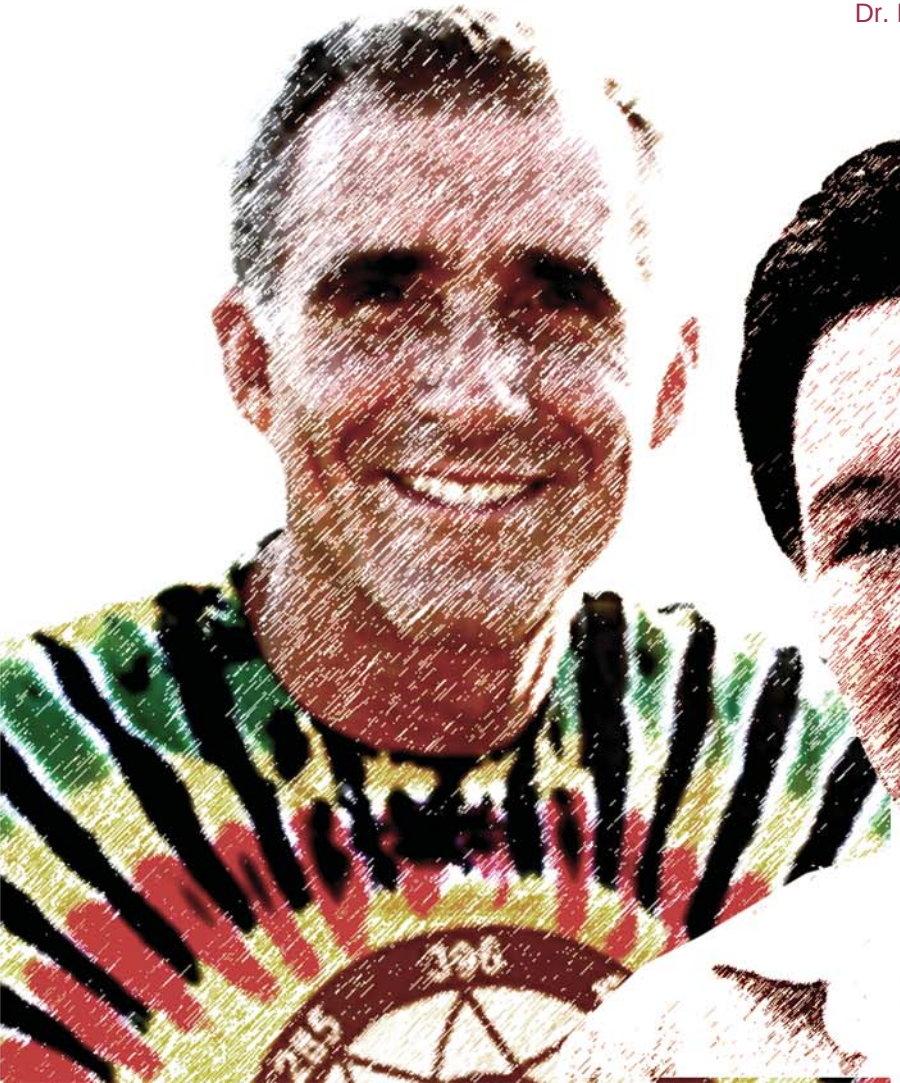
These non-drug and non-invasive solutions are far better than the mechanistic approach and toxic-based solutions that the mainstream healthcare practitioners are currently providing. Not only that these unconventional techniques do not require invasive operations or are free from catastrophic side-effects, these are very highly effective, too. But even so, they are not available to the public. Why?

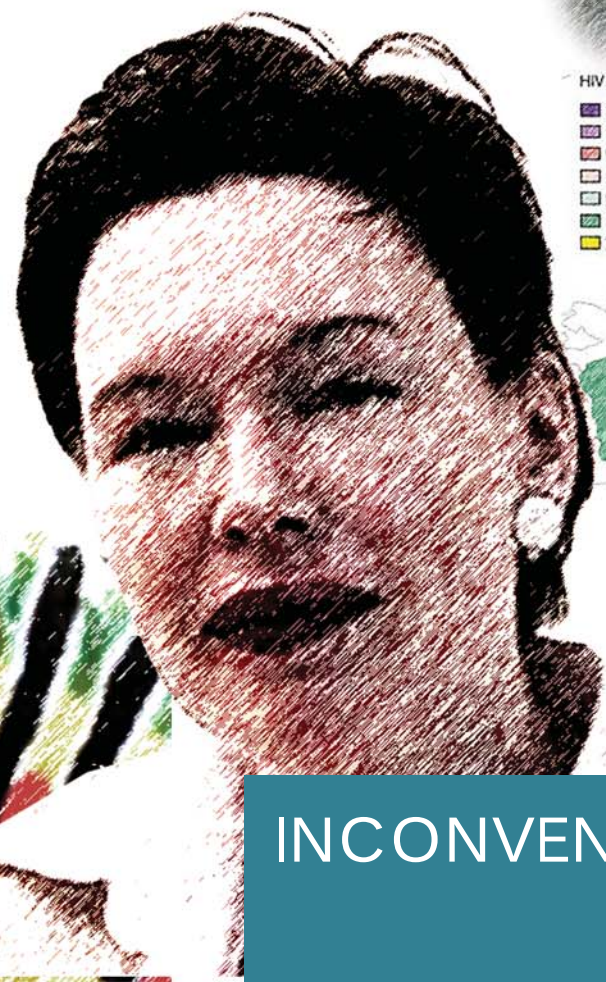
It seems that the regulators are very rigorous in their implementation of the law regarding consumer safety and protection. However, the same rigor is never applied on drugs and equipments which are found to be dangerous to health. We will examine this unusual behaviour deeper in the next chapter.

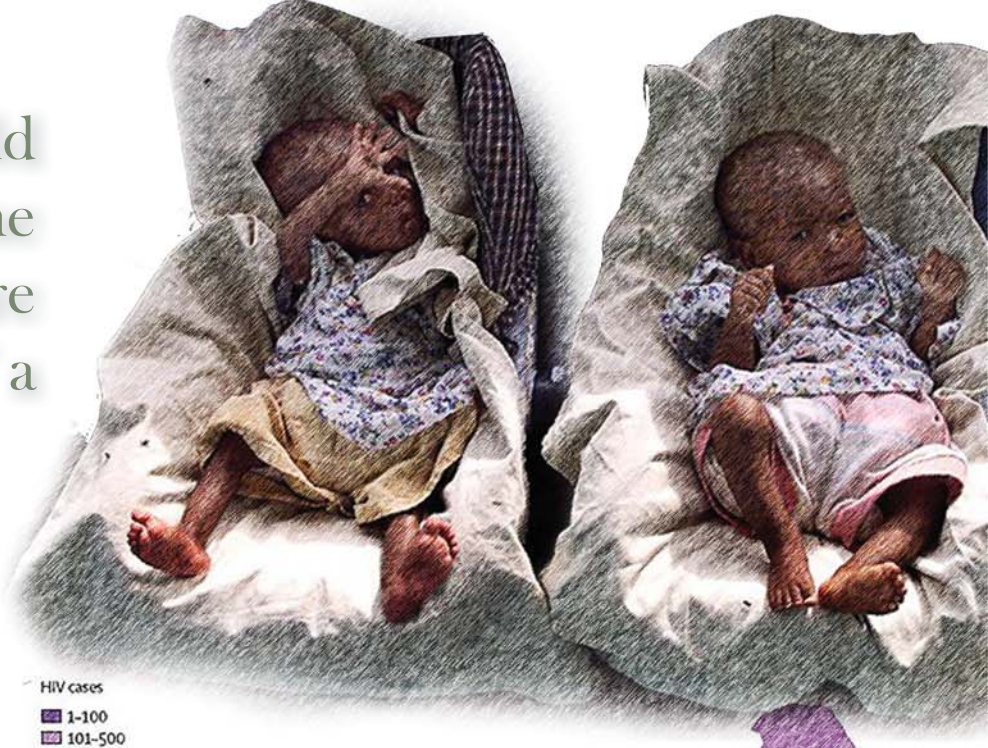
"The present is theirs; the future, for which I really work, is mine."

"There is proof many organisations – World Health Organisation, UN as well as vaccine companies such as Baxter and Novartis – are part of a single system under the control of a core criminal group..."

Jane Bürgermeister, *journalist*
Dr. Leonard G. Horowitz, DMD







In our search for better solutions to what they have considered as *incurable* diseases, we need to address the shortcomings of conventional methods, not to ridicule, but to understand where the limitation of such approaches lie.

This book eludes no word in precisely describing the real nature, magnitude and root causes of the problem relating to our well-being. You may have the best of everything money can buy, but if you are suffering with incurable disease, all of those things don't really mean anything.

Drugs & Chemotherapy

The disadvantage of using drugs stems from the fact that our body is simply not designed to take it. Drugs are basically poisons concocted to knock down parasites, or so we believe, which in the process could also endanger healthy human cells. That's the reason why they are given in minute quantities, i.e. in *milligrams*. Going beyond the prescribed amount is always disastrous. And taking them in prolonged duration have long term consequence.

Usually, prescription starts with mild antibiotics and at smaller doses. Then as the condition regresses, the doses are increased or a new more potent drug is thereby introduced. This can be expected since using manmade chemicals to kill parasites is like *carpet bombing*, i.e. while you are killing evading enemies, you are also terrorizing *friendlies*. You are also killing your own cells and in the process weakening your own immune system. So how can you fully recover if your own defensive and healing mechanisms have already been compromised?

These views are also shared by those in the medical practice, like so:

As a chemist trained to interpret data, it is incomprehensible to me that physicians can ignore the clear evidence that chemotherapy does much, much more harm than good.

- Alan Nixon, Ph.D. , Past President, American Chemical Society.

http://www.curenaturalicancro.com/

75% Physicians Won't Take Chemotherapy

The great lack of trust is evident even amongst doctors. Polls and questionnaires show that three doctors out of four (75 per cent) would refuse any chemotherapy because of its ineffectiveness against the disease and its devastating effects on the entire human organism. This is what many doctors and scientists have to say about chemotherapy:

"The majority of the cancer patients in this country die because of chemotherapy, which does not cure breast, colon or lung cancer. This has been documented for over a decade and nevertheless doctors still utilize chemotherapy to fight these tumors."

(Allen Levin, MD, UCSF, "The Healing of Cancer", Marcus Books, 1990).

"If I were to contract cancer, I would never turn to a certain standard for the therapy of this disease. Cancer patients who stay away from these centers have some chance to make it."

(Prof. Gorge Mathe, "Scientific Medicine Stymied", Medicines Nouvelles, Paris, 1989)

"Dr. Hardin Jones, lecturer at the University of California, after having analyzed for many decades statistics on cancer survival, has come to this conclusion: '… when not treated, the patients do not get worse or they even get better'. The unsettling conclusions of Dr. Jones have never been refuted".

(Walter Last, "The Ecologist", Vol. 28, no. 2, March-April 1998)

"Many oncologists recommend chemotherapy for almost any type of cancer, with a faith that is unshaken by the almost constant failures".

(Albert Braverman, MD, "Medical Oncology in the 90s", Lancet, 1991, Vol. 337, p. 901)

"Our most efficacious regimens are loaded with risks, side effects and practical problems; and after all the patients we have treated have paid the toll, only a miniscule percentage of them is paid off with an ephemeral period of tumoral regression and generally a partial one"

(Edward G. Griffin "World Without Cancer", American Media Publications, 1996)

"After all, and for the overwhelming majority of the cases, there is no proof whatsoever that chemotherapy prolongs survival expectations. And this is the great lie about this therapy, that there is a correlation between the reduction of cancer and the extension of the life of the patient".

(Philip Day, "Cancer: Why we're still dying to know the truth", Credence Publications, 2000)

http://www.curenaturalicancro.com/

"Several full-time scientists at the McGill Cancer Center sent to 118 doctors, all experts on lung cancer, a questionnaire to determine the level of trust they had in the therapies they were applying; they were asked to imagine that they themselves had contracted the disease and which of the six current experimental therapies they would choose. 79 doctors answered, 64 of them said that they would not consent to undergo any treatment containing cis-platinum – one of the common chemotherapy drugs they used – while 58 out of 79 believed that all the experimental therapies above were not accepted because of the ineffectiveness and the elevated level of toxicity of chemotherapy."

(Philip Day, "Cancer: Why we're still dying to know the truth", Credence Publications, 2000)

"Doctor Ulrich Able, a German epidemiologist of the Heidelberg Mannheim Tumor Clinic, has exhaustively analyzed and reviewed all the main studies and clinical experiments ever performed on chemotherapy …. Able discovered that the comprehensive world rate of positive outcomes because of chemotherapy was frightening, because, simply, nowhere was scientific evidence available demonstrating that chemotherapy is able to 'prolong in any appreciable way the life of patients affected by the most common type of organ cancer.' Able highlights that rarely can chemotherapy improve the quality of life, and he describes it as a scientific squalor while maintaining that at least 80 per cent of chemotherapy administered in the world is worthless. Even if there is no scientific proof whatsoever that chemotherapy works, neither doctors nor patients are prepared to give it up (Lancet, Aug. 10, 1991). None of the main media has ever mentioned this exhaustive study: it has been completely buried"

(Tim O'Shea, "Chemotherapy – An Unproven Procedure")

"According to medical associations, the notorious and dangerous side effects of drugs have become the fourth main cause of death after infarction, cancer, and apoplexy"

(Journal of the American Medical Association, April 15, 1998)

Chemo Drugs Destroy Brain Cells

Drugs used to destroy cancer cells may actually be more harmful to healthy cells in the brain, research suggests.

A team from New York's University of Rochester found several types of key brain cell were highly vulnerable to the drugs.

http://www.curenaturalicancro.com/

They say it might help explain side effects such as seizures and memory loss associated with chemotherapy – collectively dubbed "chemo" brain. The research, on mice, is published in the Journal of Biology.

Drug therapy for cancer can prompt a wide range of neurological side effects, even the onset of dementia. But they were thought not to be directly linked to the drug treatment itself.

Instead, some doctors have put them down to the patient's vulnerable psychological state.

The latest study found that dose levels typically used when treating patients killed 40% to 80% of cancer cells – 70% to 100% of brain cells. Several types of healthy brain cell continued to die for at least six weeks after exposure.

Common Drugs Tested

Lead researcher Dr Mark Noble said: "This is the first study that puts chemo brain on a sound scientific footing, in terms of neurobiology and cellular biology." The Rochester team carried out tests with three drugs used to treat a wide range of cancers: *carmustine*, *cisplatin* and *cytosine arabinoside*.

All three drugs were toxic to several types of brain cell whose job is to repair other cells in the brain – even at very low concentrations. They also killed off *oligodenrocyte* cells, which play a key role in the transmission of messages around the nervous system.

The researchers suggest damage to cells in the *hippocampus*, which is responsible for memory and learning, is most likely to explain chemo brain symptoms. Professor John Toy, Cancer Research UK's medical director, said:

"The doses of therapy needed to treat cancer while leaving the body's healthy cells as unharmed as possible is a fine balance judged by experienced specialists.

"They aim to maximise benefits and minimise damage. Unfortunately side-effects can include toxicity to the brain. "

This research in mice may hopefully suggest new ways of researching how this toxicity might be overcome.

"It is important to remember, however, that all presently available cancer treatments have gone

Impact of Cytotoxic Chemotherapy on %-Year Survival in American Adults

Malignancy	ICD-9	Number of Cancers in People Aged > 20 years	Absolute Number of 5-Year Survivors Due to Chemotherapy	Percentage 5-Year Survivors Due to Chemotherapy
head and neck	140-149, 160, 161	5139	97	1.9
Oesophagus	150	1521	82	4.9
Stomach	151	3001	20	0.7
Colon	153	13936	146	1.0
Rectum	154	5533	189	3.4
Pancreas	157	3567	--	--
Lung	162	20741	410	2.0
Soft Tissue Sarcoma	171	858	--	--
Melanoma	172	8646	--	--
Breast	174	31133	446	1.4
Uterus	179-182	4611	--	--
Cervix	180	1825	219	12
Ovary	183	3032	269	809
Prostate	185	23242	--	--
Testis	186	989	373	37.7
Bladder	188	6667	--	--
Kidney	189	3722	--	--
Brain	191	1824	68	3.7
Unknown Primary Site	195-199	6200	--	--
Non-Hodgkin's Lymphoma	200 + 202	6217	653	10.5
Hodhkin's Disease	201	846	341	40.3
Multiple Myeloma	203	1721	--	--
Total		154971	3306	2.1%

through extensive clinical trials to ensure that their benefits outweigh unwanted effects. "No patient should stop their treatment because of this research."

The researchers said it might be possible to add protective agents to chemotherapy drugs. They also suggest further work to pinpoint which cells are most at risk.

source: BBC UK

Are Vaccines Useful?

Vaccines, on the other hand, are marketed as the first line of defense against future infection. Wrong. It's the skin and what's in it is the frontline of our immune system. Vaccine effectively bypasses this protective barrier, while a regular sun bathing strengthens it. The danger posed by vaccines far outweighs its benefits, if indeed there are. Vaccines contain "attenuated" live bacteria or virus it intends to protect our body from. Isn't this absolutely illogical?

Vaccines are harmful, even the makers of H1N1 flu vaccines are not taking it. One courageous doctor even admitted on CNN that the flu vaccine is deadlier than the flu itself. How many children born normal yet turned autistic before reaching seven years old?

The flu vaccine alone contain chemicals classified as toxic and carcinogenic (i.e. may cause cancer).

- Egg proteins: including avian contaminant viruses
- Gelatin: known to cause allergic reactions and anaphylaxis are usually associated with sensitivity to egg or gelatin
- Polysorbate 80 (Tween80): can cause severe allergic reactions, including anaphylaxis
- Formaldehyde: known carcinogen
- Triton X100: a strong detergent
- Sucrose: table sugar
- Resin: known to cause allergic reactions
- Gentamycin: an antibiotic
- Thimerosal: mercury is still in multidose vials

The reason why vaccines are ineffective aside from already mentioned, is that the parasite itself can become resistant to it much like in the case with antibiotics.

As per CDC publication vaccines do contain

Medical Industry Studies Prove Influenza Vaccine Is Both Dangerous & Ineffective

"There is no evidence that any vaccine thus far developed is effective in preventing or mitigating any attack of influenza. The producers of these vaccines know that they are worthless, but they go on selling them, anyway." J. Anthony Morris, Former Chief Vaccine Control Officer, FDA

"Most multi-dose vaccines currently average 25 micrograms of Thimerosal Mercury. Based on EPA standards this is considered a safe level of exposure for a 2500 pound adult. Australia's 2010-11 Flu vaccine Panvax contains 50 micrograms of Thimerosal; technically a safe level of exposure for a 1100 pound adult. Unless you were born a Mack Truck this is tantamount to attempted murder. Time for the Australian community to rise up against this tyranny with a massive Class Action law suit."

http://vaccineresistancemovement.org/?p=7061

VACCINE RESISTANCE MOVEMENT

thimerosal (mercury), aluminum, and formaldehyde, among others. You should know that some reliable quarters are saying that the synergistic effects of these three elements increase its individual effects 10,000 times!

CDC also confirmed that these vaccines do contain "attenuated" viruses they intend to protect you from.

I have a friend who confided me with a problem about how he can't go back working as a seaman due to hepatitis B infection. His question was, how can he be infected when he was properly immunized from such specific virus. And he had undergone prior tests to prove to himself and his employer that he was free from the virus before undergoing vaccination. In fact, he had been a seaman for several years already which would mean he got infected only recently. His conclusion was that, he got his infection from the very vaccine he took a year before his last disembarkation.

In order to provide an adequate samples of common vaccines and its components, we took liberty to take snapshots of a listing at *InformedChoice.info/cocktail.html* on succeeding pages.

Fluoride May Cause Cancer and Brain Damage

Fluoride in our drinking water and toothpaste may cause or increase the possibility of having ADD, ADHD, dyslexia, Alzheimer's, Lou Gehrig's, crippling bone disease, sleep disorder, thyroid malfunctions, infertility/ impotence, cancer, etc.

The problems related to fluoride may not be detectable in the early stages of consumption but it can accumulate in the brain over time. It is found to promote complacency and disable the *pineal gland* weakening your *sixth sense*.

The effects of fluoride is compounded by the presence of aluminum found in some cooking pots and in the vaccine itself.

Information now publicly available suggest that fluoride is one of the key components of the production of atomic bombs that saw action in World War II when dropped in Nagasaki and Hiroshima, after Japan surrendered.

In the interest of national security, covert toxicity tests were also conducted involving human guinea pigs at the University of Rochester during the years of the Cold War.

CDC
CENTERS FOR DISEASE CONTROL AND PREVENTION

FACTS

What You Should Know:

- Millions of doses of vaccines are administered to children in this country each year. Ensuring that those vaccines are potent, sterile, and safe requires the addition of minute amounts of chemical additives.
- Chemicals are added to vaccines to inactivate a virus or bacteria and stabilize the vaccine, helping to preserve the vaccine and prevent it from losing its potency over time.
- The amount of chemical additives found in vaccines is very small.
- All routinely recommended pediatric vaccines manufactured for the U.S. market are available in formulations that contain no thimerosal or only trace amounts.

Common Substances Include

- aluminum
- antibiotics
- egg protein
- formaldehyde
- monosodium glutamate [MSG]
- thimerosal

http://www.cdc.gov/vaccines/vac-gen/additives.htm

VACCINE INGREDIENTS

Vaccine	Manufacturer	Microbes	Antibiotics	Chemicals/Heavy Metals	Animal ByProducts
Acel-Immune DTaP diphtheria - tetanus - pertussis	Wyeth-Ayerst 800.934.5556	diphtheria and tetanus toxoids and acellular pertussis adsorbed		formaldehyde, aluminum hydroxide, aluminum phosphate, thimerosal, and polysorbate 80 (Tween-80)	gelatin
Act HIB Haemophilus influenza Type B	Connaught Laboratories 800.822.2463	Haemophilus influenza Type B, polyribosylribitol phosphate		ammonium sulfate, formalin, and sucrose	
Attenuvax measles	Merck & Co., Inc. 800-672-6372	measles live virus	neomycin	sorbitol	hydrolized gelatin, chick embryo
Biavax rubella	Merck & Co., Inc. 800-672-6372	rubella live virus	neomycin	sorbitol	hydrolized gelatin, human diploid cells from aborted fetal tissue
BioThrax anthrax adsorbed	BioPort Corporation 517.327.1500	nonencapsulated strain of Bacillus anthracis		aluminum hydroxide, benzethonium chloride, and formaldehyde	
DPT diphtheria - tetanus - pertussis	GlaxoSmithKline 800.366.8900 X 5231	diphtheria and tetanus toxoids and acellular pertussis adsorbed		formaldehyde, aluminum phosphate, ammonium sulfate, and thimerosal	washed sheep RBCs
Dryvax smallpox (not licensed d/t expiration)	Wyeth-Ayerst 800.934.5556	live vaccinia virus, with "some microbial contaminants," according to the Working Group on Civilian Biodefense	polymyxcin B sulfate, streptomycin sulfate, chlortetracycline hydrochloride, and neomycin sulfate	glycerin, and phenol -a compound obtained by distillation of coal tar	vesicle fluid from calf skins
Engerix-B recombinant hepatitis B	GlaxoSmithKline 800.366.8900 X 5231	genetic sequence of the hepatitis B virus that codes for the surface antigen (HbSAg), cloned into GMO yeast		aluminum hydroxide, and thimerosal	

VACCINE INGREDIENTS

Vaccine	Manufacturer	Microbes	Antibiotics	Chemicals/Heavy Metals	Animal ByProducts
Fluvirin	Medeva Pharmaceuticals 888.MEDEVA 716.274.5300	influenza virus	neomycin, polymyxin	beta-propiolactone	chick embryonic fluid
FluShield	Wyeth-Ayerst 800.934.5556	trivalent influenza virus, types A&B	gentamicin sulphate	formadehyde, thimerosal, and polysorbate 80 (Tween-80)	chick embryonic fluid
Havrix hepatitis A	GlaxoSmithKline 800.366.8900 X 5231	hepatitis A virus		formalin, aluminum hydroxide, 2-phenoxyethanol, and polysorbate 20	residual MRC5 proteins -human diploid cells from aborted fetal tissue
HiB Titer Haemophilus influenza Type B	Wyeth-Ayerst 800.934.5556	Haemophilus influenza Type B, polyribosylribitol phosphate, yeast		ammonium sulfate, thimerosal, and chemically defined yeast-based medium	
Imovax	Connaught Laboratories 800.822.2463	rabies virus adsorbed	neomycin sulfate	phenol red indicator	human albumin, human diploid cells from aborted fetal tissue
IPOL	Connaught Laboratories 800.822.2463	3 types of polio viruses	neomycin, streptomycin, and polymyxin B	formaldehyde, and 2-phenoxyethenol	continuous line of monkey kidney cells
JE-VAX Japanese encephalitis	Aventis Pasteur USA 800.VACCINE	Nakayama-NIH strain of Japanese encephalitis virus, inactivated		formaldehyde, polysorbate 80 (Tween-80), and thimerosal	mouse serum proteins, and gelatin
LYMErix lyme	GlaxoSmithKline 888-825-5249	recombinant protein (OspA) from the outer surface of the spirochete Borrelia burgdorferi	kanamycin	aluminum hydroxide, 2-phenoxyethenol, phosphate buffered saline	
MMR measles - mumps - rubella	Merck & Co., Inc. 800.672.6372	measles, mumps, rubella live virus	neomycin	sorbitol	hydrolized gelatin, chick embryonic fluid, and human diploid cells from aborted fetal tissue

VACCINE INGREDIENTS

Vaccine	Manufacturer	Microbes	Antibiotics	Chemicals/Heavy Metals	Animal ByProducts
M-R-Vax measles - rubella	Merck & Co., Inc. 800.672.6372	measles, rubella live virus	neomycin	sorbitol	hydrolized gelatin, chick embryonic fluid, and human diploid cells from aborted fetal tissue
Menomune meningococcal	Connaught Laboratories 800.822.2463	freeze-dried polysaccharide antigens from Neisseria meningitidis bacteria		thimerosal	lactose
Meruvax I mumps	Merck & Co., Inc. 800.672.6372	mumps live virus	neomycin	sorbitol	hydrolized gelatin
NYVAC (new smallpox batch, not licensed)	Aventis Pasteur USA 800.VACCINE	highly attenuated vaccinia virus	polymyxcin B sulfate, streptomycin sulfate, chlortetracycline hydrochloride, and neomycin sulfate	glycerin, and phenol -a compound obtained by distillation of coal tar	vesicle fluid from calf skins
Orimune oral polio	Wyeth-Ayerst 800.934.5556	3 types of polio viruses, attenuated	neomycin, streptomycin	sorbitol	monkey kidney cells and calf serum
Pneumovax Streptococcus pneumoniae	Merck & Co., Inc. 800.672.6372	capsular polysaccharides from polyvalent (23 types) pneumococcal bacteria		phenol	
Prevnar Pneumococcal 7-valent conjugate vaccine	Wyeth Lederle 800.934.5556	saccharides from capsular Streptococcus pneumoniae antigens (7 serotypes) individually conjugated to diphtheria CRM 197 protein		aluminum phosphate, ammonium sulfate, soy protein, yeast	

VACCINE INGREDIENTS

Vaccine	Manufacturer	Microbes	Antibiotics	Chemicals/Heavy Metals	Animal ByProducts
ProQuad measles, mumps, rubella and varicella	Merck & Co., Inc. 800.672.6372	live measles (Enders' attenuated Edmonston), mumps (Jeryl LynnTM), rubella (Wistar RA 27/3), and varicella (oka/Merck) strains of viruses	neomycin	monosodium L-glutamate (MSG), potassium chloride, potassium phosphate monobasic, potassium phosphate dibasic, sodium bicarbonate, sodium phosphate dibasic, sorbitol, and sucrose	human albumin, human diploid cells, residual components of MRC-5 cells including DNA and proteins, bovine serum, hydrolized gelatin, and chicken embryo
RabAvert rabies	Chiron Behring GmbH & Company 510.655.8729	fixed-virus strain Flury LEP	neomycin, chlortetracycline, and amphotericin B	potassium glutamate, and sucrose	human albumin, bovine gelatin and serum "from source countries known to be free of bovine spongioform encephalopathy," and chicken protein
Rabies Vaccine Adsorbed	GlaxoSmithKline 800.366.8900 X 5231	rabies virus adsorbed		beta-propiolactone, aluminum phosphate, thimerosal, and phenol red	rhesus monkey fetal lung cells
Recombivax recombinant hepatitis B	Merck & Co., Inc. 800.672.6372	genetic sequence of the hepatitis B virus that codes for the surface antigen (HbSAg), cloned into GMO yeast		aluminum hydroxide, and thimerosal	
RotaShield oral tetravalent rotavirus (recalled)	Wyeth-Ayerst 800.934.5556	1 rhesus monkey rotavirus, 3 rhesus-human reassortant live viruses	neomycin sulfate, amphotericin B	potassium monophosphate, potassium diphosphate, sucrose, and monosodium glutamate (MSG)	rhesus monkey fetal diploid cells, and bovine fetal serum
smallpox (not licensed due to expiration) 40-yr old stuff "found" in Swiftwater, PA freezer	Aventis Pasteur USA 800.VACCINE	live vaccinia virus, with "some microbial contaminants," according to the Working Group on Civilian Biodefense	polymyxcin B sulfate, streptomycin sulfate, chlortetracycline hydrochloride, and neomycin sulfate	glycerin, and phenol -a compound obtained by distillation of coal tar	vesicle fluid from calf skins

VACCINE INGREDIENTS

Vaccine	Manufacturer	Microbes	Antibiotics	Chemicals/Heavy Metals	Animal ByProducts
smallpox (new, not licensed)	Acambis, Inc. 617.494.1339 in partnership with Baxter BioScience	highly attenuated vaccinia virus	polymyxcin B sulfate, streptomycin sulfate, chlortetracycline hydrochloride, and neomycin sulfate	glycerin, and phenol -a compound obtained by distillation of coal tar	vesicle fluid from calf skins
TheraCys BCG (intravesicle -not licensed in US for tuberculosis)	Aventis Pasteur USA USA 800.VACCINE	live attenuated strain of Mycobacterium bovis		monosodium glutamate (MSG), and polysorbate 80 (Tween-80)	
Tripedia diphtheria - tetanus - pertussis	Aventis Pasteur USA 800.VACCINE	Corynebacterium diphtheriae and Clostridium tetani toxoids and acellular Bordetella pertussis adsorbed		aluminum potassium sulfate, formaldehyde, thimerosal, and polysorbate 80 (Tween-80)	gelatin, bovine extract US sourced
Typhim Vi typhoid	Aventis Pasteur USA SA 800.VACCINE	cell surface Vi polysaccharide from Salmonella typhi Ty2 strain		aspartame, phenol, and polydimethylsiloxane (silicone)	
Varivax chickenpox	Merck & Co., Inc. 800.672.6372	varicella live virus	neomycin	phosphate, sucrose, and monosodium glutamate (MSG)	processed gelatin, fetal bovine serum, guinea pig embryo cells, albumin from human blood, and human diploid cells from aborted fetal tissue
YF-VAX yellow fever	Aventis Pasteur USA 800.VACCINE	17D strain of yellow fever virus		sorbitol	chick embryo, and gelatin

Disclaimer / Investigate: The intent of this website is to raise awareness about the controversial aspects of vaccination. Many vaccines still contain thimerosal (49.6% ethyl mercury by weight.) While mercury is a highly toxic element second only to radioactive plutonium, when combined with other ingredients, specifically aluminum and formaldehyde, the synergistic effects increase 10,000-fold. Individuals who suffer from chronic mercury exposure will have a unique expression of symptoms. This presentation is not to be construed as medical or legal advice: locate and confer with a trusted physician and lawyer.

http://www.informedchoice.info/cocktail.html

Can Vaccine Avert Global Warming?

Believe or not, considering that everyone on this planet exhale carbon, we are considered one of the significant causes of *global warming*. This is so according to the two-time richest man on the planet, Bill Gates, who explained in a live broadcast that a major factor contributing to the increase in CO_2 emissions is the breathing man himself. And without hesitation he suggested that it should "probably be pretty near to zero", to the pleasure of the audience.

Considering what we already know about the undeclared components of the state-sanctioned vaccines, and the subsequent endorsement of the same deadly antidote from the same guy who advocates a drastic reduction of the world population, does it take one to be a rocket scientist to figure it out that vaccines are one of those methods by which this massive genocide will be effected?

On January 29, 2010, Bill Gates was shown endorsing vaccines with the UN-WHO logo at the back.

"We must make this the Decade of Vaccines!"

Is Global Warming A Scam?

The issue of global warming as being caused by carbon emissions is itself under fire. Already, there are thousands of weather experts and scientists who have filed a protest online on the veracity of this faulty assertion.

These scientists are claiming that global warming is not caused by human activity but is a natural phenomenon. It is a cyclical natural change of climate. This had happened before, and it will happen again in the future.

If this indeed is a scam, who's profiting from it? And if this same scam is used to justify population reduction, who stands to benefit from our demise?

Lastly, is there really an *overpopulation* in the first place? Or, this phenomenon is only happening in urban centers where people are swarming in because they can't have a good harvest as farmers anymore without using expensive seeds, pesticides and fertilizers?

If this is not enough to convince you that Depopulation Agenda is very real, and is a multi-faceted attack on our well-being via complementary scams and poisons, then maybe this one brave unselfish act of filing a case against the perpetrators, among others, by one investigative journalist, **Jane Bürgermeister**, who came out a couple of years ago with complete evidence implicating the UN-World Health Organization on the flu-scam, might persuade you to think twice.

Did we ever try and consider that the real cause of global warming is the sun itself?

... that it is a natural, cyclical increase of solar activity as hard data suggest?

Or, do we need celebrities and politicians to do the thinking for us?


Thursday 25 August 2011

The Telegraph

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World News

Scientists sign petition denying man-made global warming

More than 31,000 scientists have signed a petition denying that man is responsible for global warming.

http://www.telegraph.co.uk/news/worldnews/2053842/Scientists-sign-petition-denying-man-made-global-warming.html

Studies find just one CT scan exposes you to radiation equivalent to 309 chest X-rays

Mammoth Diagnostics

Every time I visit someone in a hospital or had to comply with state required paperworks and see these enormous x-ray machines and CT-Scanners I'm always amazed by the enormity of their size and elaborate designs as if we are already in the Space Age.

But until now I still find it hard to reconcile the fact that the diagnostic department of the healthcare institution has achieved so much advancement especially in the area of digital imaging, and scanning yet fail miserably in the field of curing cancer, AIDS, or even arthritis. Why do you think that is the case? Is there some truth to the findings that the billions spent for cancer research was only for public relations purposes?

Medical studies published in VOL 169 (NO. 22), DEC 14/28, 2009 edition of the Archives of Internal Medicine have found that radiation from just one computed tomographic (CT) scan actually causes cancer decades after patient exposure. CT scans are used to diagnose various medical conditions, including heart blockages, colon cancer, brain tumours and pneumonia. The research shows that the risk of developing cancer increases with just one CT scan. CT scans blasts X-radiation in a test that allows doctors to see a three-dimensional image of a targeted organ or tissue.

http://presscore.ca/2011/?p=3040

Invasive Operations & Transplants

Invasive operation is probably the best if not the only feasible initial solution for physical injuries like fractures and open wounds. But it doesn't mean that it must be made permanent. Looking at it in its proper perspective, invasive operations such as organ transplant is a mechanical operation rather than biological.

In cases of fractures, it has been found conclusively by **Dr. Robert O. Becker** that bones can be stimulated electrically to regrow. His research was already in the direction of regenerating full limbs and organs, including the heart. Sadly, his research was ended rather abruptly for the medical industry wasn't ready yet to cease producing drugs and prosthesis.

THE Greatest Deception

Apart from domestic concerns, there are far bigger issues and grim signs of massive deceptions happening around the globe that's blowing out of control. Today, without due regards to whoever is affected, i.e. children, the aged, the *have-nots* and *have-somes* alike, we have all been tested to the limits of our patience, endurance and wits, as forces of evil continue to attack us from all fronts, with all their might, with their entire arsenal of covert and advanced technologies and knowledge that precisely qualify to be called *weapons of mass extinction* (WME).

GMO is a patented carcinogen allowed to be distributed for public consumption by the very agency that claimed to protect us. *Chemtrails* are those crisscrossing lines of white smoke following commercial airlines participating in Project Cloverleaf. These trails are composed of various banned toxic chemicals and carcinogens. *Eugenics* is a biosocial science aimed at improving the genetic composition of the population via elimination of undesirable genes.

It might come as a shock when you realize that the same entity that promotes apathy is the same entity which ordered the mass sterilization of Africans thru Hepatitis B vaccines tainted with AIDS virus with the obvious intention of eliminating the black genome on the face of the earth. This gruesome attempt to exterminate one race in favor of another preceded the SARS viral attack against the Asian genome in late 2002. These they did, in lieu of the inefficient yet expensive two world wars of the last century, to eliminate at least 5 billion *worthless eaters* on the planet. As it turns out such method is the most effective yet least costly for we will be paying for our own demise, one pill at a time.

The blatant use of toxic chemicals, engineered bacteria and viruses to spread death in the form of cancer and AIDS, and the state sanctioned delivery of such hazardous materials thru compulsory vaccines, paint

a very sad picture of how grave our present condition really is.

How This Madness Did Come About?

It started with a desire to control all of humanity under what they believed to be the best system that we all deserve - a system of hierarchy with the self-appointed royalties at the top instead of mutual respect, equal opportunity and cooperation.

These Self-Anointed Few, who institute and advocate for ethics yet bereft of morality, truly believe they have the divine right and are fit to rule over everyone else who they perceived to be weak and useless. Survival of the fittest, they say, is the Law of Nature. Wrong, that is the law of the jungle. Eat or be eaten. And even then, those carnivores are not devouring members of their own species. But these self-proclaimed illuminated are. They are the only species adept of killing their own kind - cannibals of the most sophisticated form.

At the highest echelon of this whole insanity is a ...

A *wolf* who told us the greatest story ever told – the story of a man who, after three days, rose from the dead. His death was as miraculous as was his virgin birth on December 25th where *three wise men* were guided by the *brightest star* to his humble manger. He started his ministry and performing miracles at the age of *thirty*. Walking on water, feeding thousands with a handful of fish, letting the blind man see for the first time, and of course raising Lazarus from the dead.

As fate would have it, he was betrayed by one of his twelve disciples, Judas, for thirty pieces of silver. He was then put to trial in a kangaroo court and condemned to death by *crucifixion*. He carried his cross while wearing a *crown of thorns*. The sight towards the Calvary on that holy afternoon was a torture. But he was god's son, so he rose again after three days.

This story must be true. After all, it was told by the Holy Church itself and it is also in the New Testament!

And I did believe in it as my ancestors have been. However, in the Old Testament another individual had the same striking story:

- Miracle or virgin birth
- Born on the 25th of December
- Star in the east
- Began the work at the age of thirty
- He got twelve brothers
- His sale was suggested by his brother Judah
- Sold for thirty pieces of silver
- Died and resurrected on the 3rd day

His name was Joseph. They were also known to share these titles:

- the son of god
- the light of the world
- the lamb of god,
- king of kings,
- alpha and omega

In fact, all the Messiahs before them from all other religions share the same fundamental story. Why is that so?

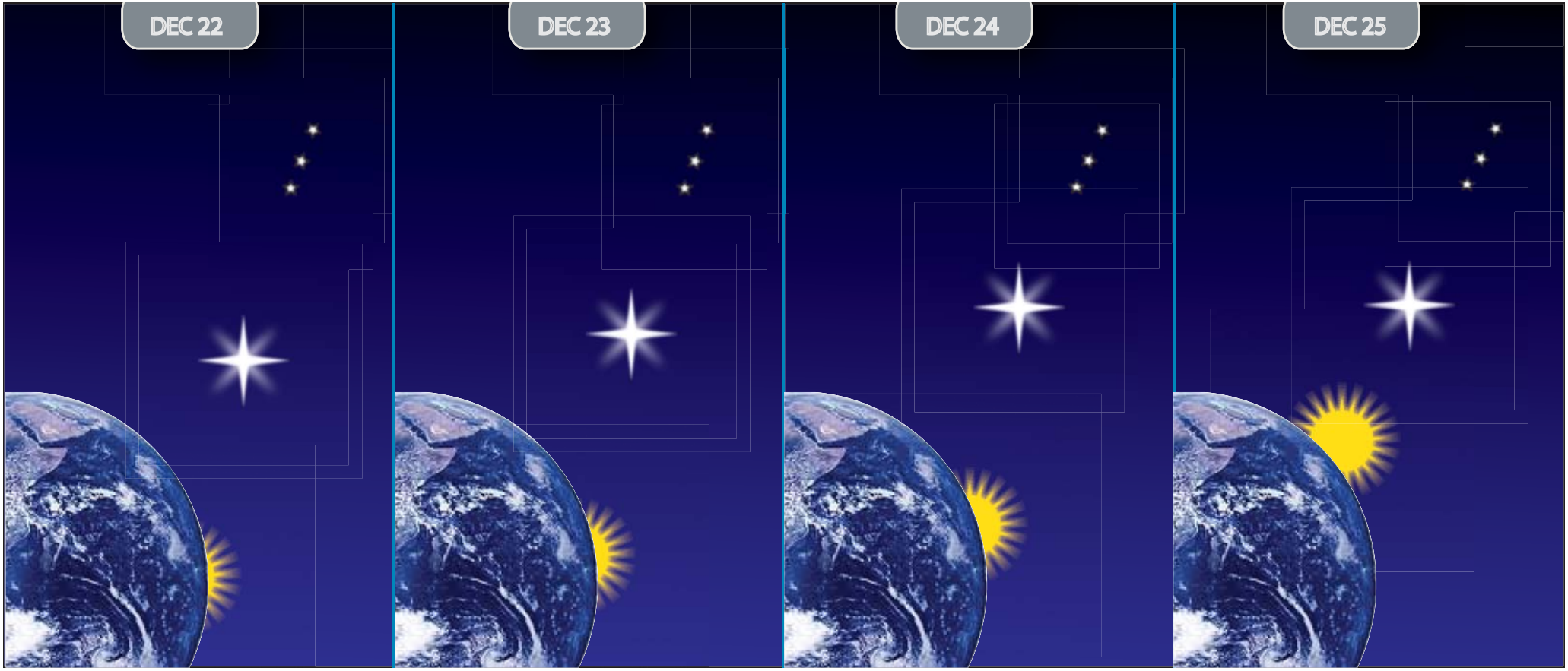
Rather than accepting the whole story hook, line and sinker, **Jordan Maxwell** spent a great deal of his time looking out for the truth and he did. He referred his study of the occult as *Astrotheology*. It turned out that all religions on this planet have the same astrological foundations. It doesn't matter whether your religion is Islam, Catholicism, all flavors of Christianity, Buddhism, or Mithraism. All of these religions are fundamentally of the same root that is *paganism* - the worship of the sun, moon, volcano, etc.

Early civilizations have plotted sun's travel across the constellations. This is probably the first science they knew. Each of these constellations where arranged in a chart with four quadrants separated by a cross - the Cross of the Zodiac. This is a very useful instrument in the field of agriculture, navigation, and predicting major events.

Eventually the twelve zodiac signs were personified or anthropomorphized to represent the twelve disciples of Jesus Christ or the twelve bothers of Joseph in the Old Testament, and other gods before them in hundreds of other religions predating Christianity.

The Origin of the Myth

The birth and death of the Messiah can be traced to the movement of the sun every December 22nd to the 25th, like so:

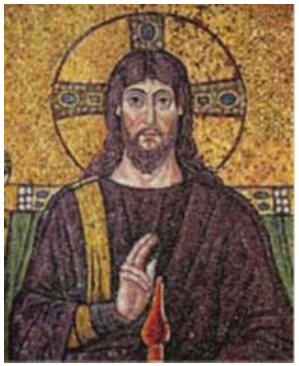


Every December 22, the sun's "demise" is completed as it stops perceptibly in its journey towards south. During this three-day period the sun is said to reside at the Crux constellation. It would stay there, again perceptibly, until December 24th. By this time,

the three-star cluster at the Orion's Belt is in perfect alignment with the brightest star Sirius on the 24th of December. This configuration points to the rising sun on the 25th.

Thus it is said, "the son [sun] died on the cross [crux] for three days and resurrected again".

The other story of course is that the Messiah was born on December 25th and the three wise men, or magi, or kings [3-stars] followed or were guided by a very bright star [Sirius].



The Christian religion is a parody on the worship of the Sun, in which they put a man whom they call Christ, in the place of the Sun, and pay him the same adoration which was originally paid to the Sun.

- Thomas Paine

"Walking on water" occurs when the sun casts its rays on a lake or sea when it is setting, or early in the morning when it is "born again". The sun rays themselves will make up the "crown of thorns" when casting on the head making a silhouette. "I'll be with you 'til the end of time" suggests not the end of the world, but the end of an *aeon* or age. One aeon or age

is approximately 2,150 years. We are nearing the end of the *Age of Pisces.* That is why his reign is replete with fish symbolism.

Fishheads worn by magi, priests and popes, disciples which were fishermen, feeding thousands with a handful of fish, are just few of the fish symbolism prevalent of the era.

The Holy Eucharist or the "body of Christ" is also in the shape of the sun with its golden sun rays. Top: Jesus at the center of the Zodiac, 1100AD.

from horns to fishheads...

Above, Moses at US Congress with bulging forehead. To its left, Michelangelo's Moses the "Lawgiver" at the Vatican is depicted with horns to signify the Crescent Moon, the object of worship of his era (aeon), the Age of the Aries the Ram. The same crescent moon found in every mosque across the Islamic world. Aries comes before Pisces.

Moses, Jesus, and many others before them are just personifications of the twelve Zodiac constellations which guided early man's affairs.

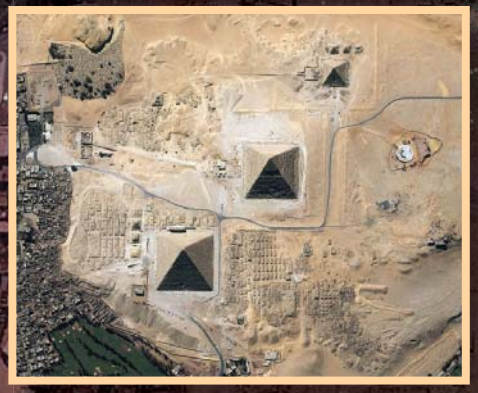
Jesus is represented by the shorthand symbol of the fish with the Cross of the Zodiac.

Virgin Mary represents the constellation of Virgo, the "virgin". *Virgo* is represented in the Zodiac Chart with the above symbol which could be the cause why all virgin mothers' name always begin with letter M, as in Maya for Buddha's mother.

The constellation Virgo is also known as the "house of bread" which incidentally what the word *Bethlehem* really means.

The Piscean Age is about to end. "… and there you would see a man bearing a pitcher of water" signifies where the next age would be – the Age of Aquarius.

Clearly, the early men were showing their deep appreciation towards nature, but there's more to nature than just the mechanical arrangements of planets and stars. We must understand why these objects float in space even when it is believed to be "empty".



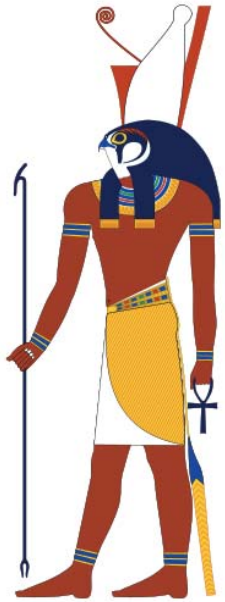
The Orion Footprint

The pyramids in the Giza Necropolis perfectly mimic the exact locations of the three stars in the Orion's Belt. The pyramid itself is on the US dollar bill - the common currency for world trade. Would these mean that the controllers of the world are of Orion origin? Is there some truth about the Reptilians and Orion Greys being the ones who established the control mechanisms (e.g. fiat banking, pharmaceutical, education, government, religion, media), making us all slaves for the last 12,000 years?

This God is Cruel

The brightest star in the east is Sirius, the Dog Star. If you try to spell dog in reverse you will have G, O and D, or GOD. The church of course is ruled by **dog**mas. At the back of a dollar bill you can read "In God We Trust". Why do we need to be told?

We need to be told who's in charge. And to find out who's in charge, all we need to do is to look at the other symbols deliberately printed and we will see a pyramid with the all-seeing-eye of Horus on the left and what looks like an eagle on the right. Careful interpretation of this bird would yield that it is not an eagle but a falcon as you will see later.



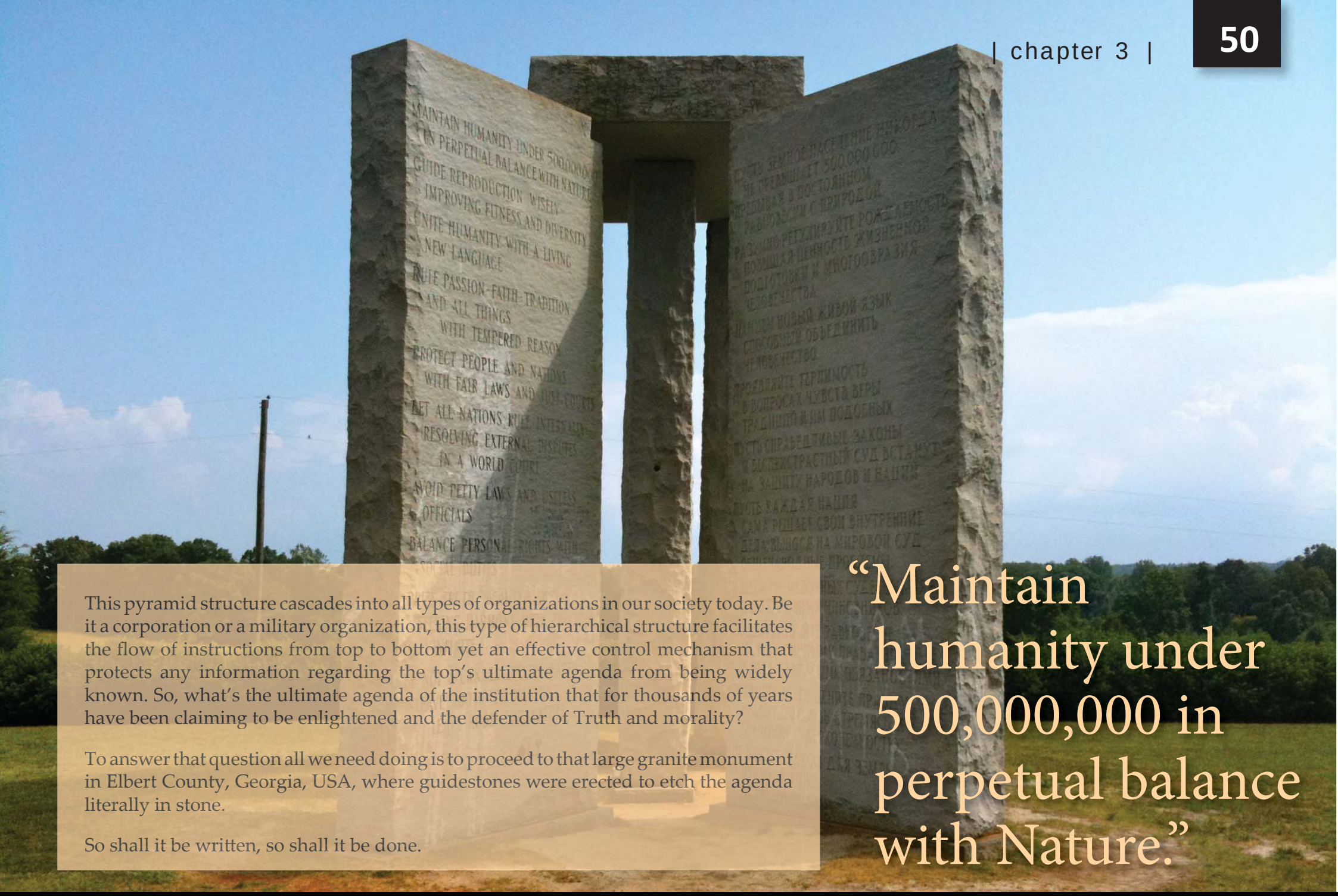
Horus is the Egyptian sun god, the precursor of Jesus Christ. Horus is sometimes represented by this shorthand

The pyramid represents the hierarchy of the organization that controls the financial system. This 13-layer pyramid represents the royal bloodlines who control the world banking system, energy production, food and drug industries, among others. Heads of state are said to be at the level below this pyramid.

At the top is the *Chief Cornerstone* – the Jesuit controlled Vatican Church. This entity can crown and unseat a King.

All local freemasonry lodges are way below this elite group who called themselves the Illuminati – the illuminated, or the Enlightened Ones.

On the left is another representation of Horus - a falcon. On the right, Horus, (Louvre Museum), 'Shen rings' in his grasp.



This pyramid structure cascades into all types of organizations in our society today. Be it a corporation or a military organization, this type of hierarchical structure facilitates the flow of instructions from top to bottom yet an effective control mechanism that protects any information regarding the top's ultimate agenda from being widely known. So, what's the ultimate agenda of the institution that for thousands of years have been claiming to be enlightened and the defender of Truth and morality?

To answer that question all we need doing is to proceed to that large granite monument in Elbert County, Georgia, USA, where guidestones were erected to etch the agenda literally in stone.

So shall it be written, so shall it be done.

"Maintain humanity under 500,000,000 in perpetual balance with Nature."

eugenics

What is Eugenics?

Eugenics is that branch of Illuminati Science dealing with the systematic eradication of all genes perceived to be weak and useless with the end goal of having a racially hygienic society thru selective breeding and forced elimination.

Charles Darwin formulated the theory of natural selection, i.e. survival of the fittest. He said,

"... Accepting in the case of man himself, hardly anyone is so ignorant as to allow its worst animals to breed."

Darwin's book was originally titled "Origins of the Species and the Preservation of the Favored Races".

Sir Francis Galton was the most influential Eugenicist. He in fact coined the word Eugenics. He was a cousin of Charles Darwin who became an Honorary President of the Eugenics Society for several years. His successor was Maj. Leonard Darwin, son of Charles Darwin. It was he who strongly promoted the eradication of the unfit.

"It is only by eliminating the lower members (of the Human Race) that a higher average is maintained."

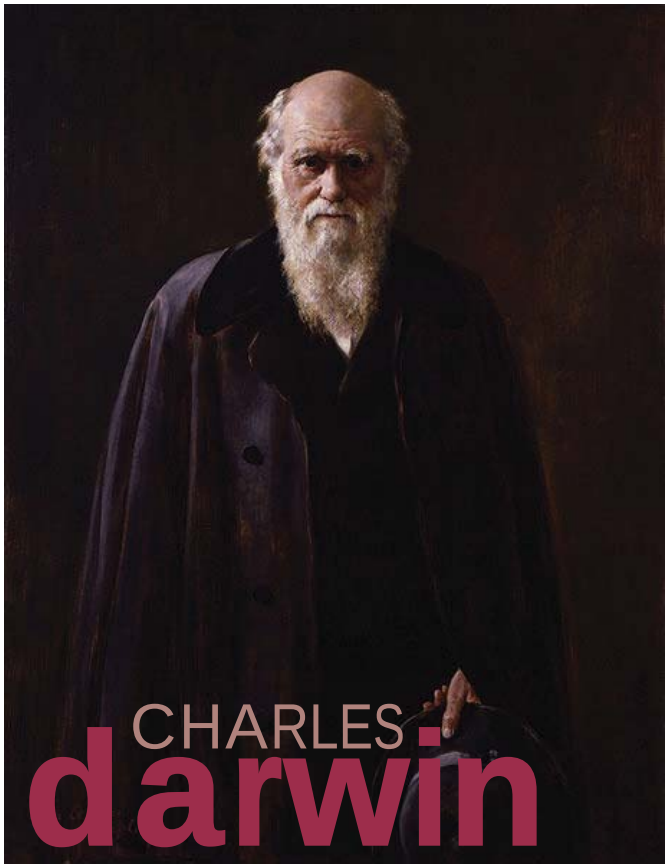
- John Foster Dulles, Senator and Secretary of State under Eisenhower

The entire Harriman dynasty and other royal families funded the first US Eugenics Society, and was headed by Averill Harriman's mother. In 1907, hundreds of people in the US were forcibly sterilized.

"Only one race is capable of ascending into the highest levels of the evolutionary spiral. The others would be left behind."

- Herbert Spencer

In 1905, Dr. Ernst Rudin established the German "Society for Racial Hygiene" then visited Mrs. Harriman in America prior to the start of Second World War.



http://en.wikipedia.org/wiki/Charles_darwin

How Eugenics Be Implemented?

If the primary goal of 9/11 false flag terrorist attack is to prevent the implementation of Global Settlements and the invasion of everyone's privacy, the objective of the

WW2 was the establishment of a worldwide governing body that is the United Nations. And if you think that the primary objective of the establishment of the UN is to promote world peace with you in it, you're in for a great surprise.

"The United Nations' goal is to reduce population selectively by encouraging abortion, forced sterilization, and control human reproduction, and regards two-thirds of the human population as excess baggage, with 350,000 people to be eliminated per day."

- Jacques Cousteau, UNESCO courier, November 1991

In the document "**Evidence of the Use of Pandemic Flu to Depopulate USA**, Jane Bürgermeister wrote:

"There is proof many organisations – World Health Organisation, UN as well as vaccine companies such as Baxter and Novartis – are part of a single system under the control of a core criminal group, who give the strategic leadership, and who have also funded the development, manufacturing and release of artificial viruses in order to justify mass vaccinations with a bioweapon substance in order to eliminate the people of the USA, and so gain control of the assets, resources etc. of North America."

"Specifically, evidence is presented that Defendants President Barack Obama, President of the United States, David Nabarro, UN System Coordinator for Influenza, Margaret Chan, Director-General of World Health Organisation, Kathleen Sibelius, Secretary of Department of Health and Human Services (HHS), Secretary Janet Napolitano, the Department of Homeland Security, David de Rotschild, banker, David Rockefeller, banker, George Soros, banker, and Alois Stoger, Austrian Health Minister, among others, are part of this international corporate crime syndicate which has, marching as one phalanx to carry out their plan of genocide, have developed, produced, stockpiled and used biological weapons to eliminate the population of the United States for financial and political gain.

There is clear, verifiable and unambiguous proof that Baxter AG, Austrian subsidiary of Baxter International, based in Deerfield, Ill, deliberately, wilfully and knowingly, sent out 72 kilos of live bird flu virus as one the most deadly bioweapons and supplied by the World Health Organisation, Geneva, Switzerland in the winter of 2009 to 16 laboratories in four countries and so nearly triggered a pandemic."

Third World vaccination programs are exposed for what they really are – cloaked sterilization.

"The structures of government have failed us.... they are against us."

Jane Bürgermeister, Journalist - has written for Nature, British Medical Journal, The Scientist, Reuters Health, and the Guardian among other publications. Gain prominence when she filed verifiable complaint against Baxter, Novartis, WHO, Obama, etc. for genocide in 2009.

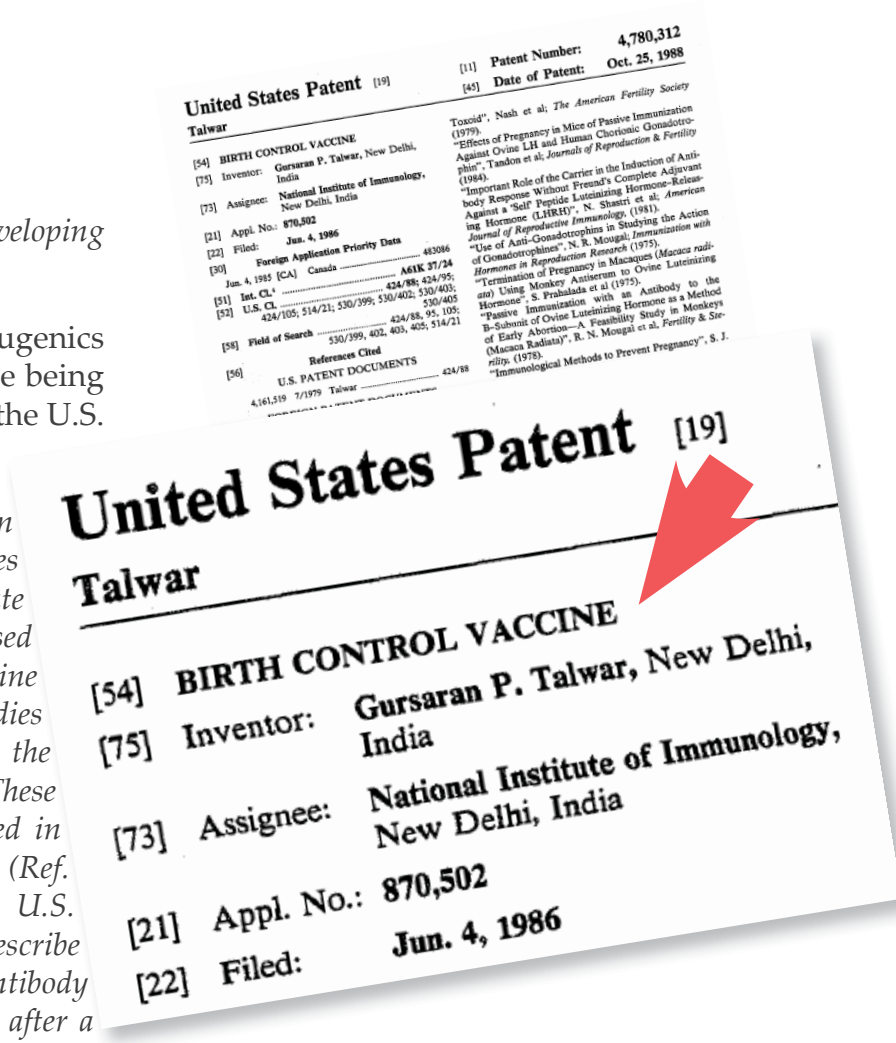
"In the 1990`s the UN`s World Health Organization launched a campaign to vaccinate millions of women in Nicaragua, Mexico and the Philippines between the ages of 15 and 45. The stated purpose was to protect against Tetanus or Lockjaw, a painful sometimes lethal infectious reaction to external wounds or cuts. However, the vaccine was not given to men or boys, who are more prone to wounds from cuts and rusty nails than the ladies.

Noticing this anomaly, Comite Pro Vida de Mexico, a Roman Catholic lay organization became suspicious and had the vaccine samples tested. The tests revealed that the WHO Tetanus vaccine used to inoculate women of child bearing age contained human Chorionic Gonadotrophin or hCG, a natural hormone that is secreted in the initial stages of pregnancy, but when combined with a tetanus toxoid carrier stimulated antibodies rendering a woman incapable of maintaining a pregnancy. None of the women vaccinated were told.

In 1995, the Catholic Women`s League of the Philippines won a court order halting a UNICEF anti-tetanus program because the vaccine had been laced with B-hCG. The Supreme Court of the Philippines found the surreptitious sterilization program had already vaccinated three million women, aged 12 to 45. B-hCG-laced vaccine was also found in at least four other developing countries."

And if you're still unconvinced that Eugenics is very real as the technologies that are being used to implement it, here's a copy of the U.S. Pat. No. 4,780,312 patent itself...

"Population is growing at a rapid pace in many economically developing countries and there is a continuing need of an alternate method for regulation of fertility. We proposed several years back a birth control vaccine which induces the formation of antibodies against the human pregnancy hormone, the human chorionic gonadotropin (hCG). These inventions are described in patents issued in India, USA and several other countries. (Ref. EP 204566, JP 62286928, CA1239346, U.S. Pat. No. 4,780,312, CN 8603854). We describe now another invention which generates antibody response of a long duration against hCG after a single or a limited number of injections."


United States Patent [19]

Talwar

[54] BIRTH CONTROL VACCINE

[75] Inventor: Gursaran P. Talwar, New Delhi, India

[73] Assignee: National Institute of Immunology, New Delhi, India

[21] Appl. No.: 870,502

[22] Filed: Jun. 4, 1986

[11] Patent Number: 4,780,312

[45] Date of Patent: Oct. 25, 1988

In another aspect the present invention provides a method of birth control employing the polyvalent vaccine which comprises administering said vaccine to a female mammal at a dose and frequency sufficient to prevent pregnancy.

Erika Schwartz, MD wrote the public interest group Judicial Watch reported 371 serious adverse events in patients who received Merck's cervical cancer vaccine Gardasil, including three deaths.

http://presscore.ca/2011/?p=2757

"The HPV vaccine has only been tested for five years on possibly as low as 100,000 ten year old girls in Africa."

Merck invested hundreds of millions of dollars lobbying and marketing the drug and almost persuaded Texas and some other states to mandate its use on sixth-grade schoolgirls. Only a revolt by parents and community groups put a stop to it.

Hepatitis B Vaccine and the Origin of HIV/AIDS

Perspectives on a Possible Vaccine Induced Pandemic

Transcript of Oral Presentation made by
Dr. Leonard G. Horowitz, D.M.D., M.A., M.P.H.
May 29, 2001
Les Premieres Recontres Medicales
Libreville, Gabon, Africa

Honorable First Lady, and esteemed program officials, it is indeed an honor for me to be among an American delegation invited by the First Lady to present some recent perspectives from the United States concerning HIV/AIDS. I am the author of the American best selling book, Emerging Viruses: AIDS & Ebola. Nature, Accident or Intentional?, that examines AIDS as a possible vaccine induced pandemic. I will be reporting today from my current publication in the May 2001, issue of the peer reviewed scientific journal of Medical Hypotheses published in England, reprints of which are being prepared for distribution tomorrow. I presented this thesis initially at the XI International Conference on AIDS in Vancouver, in 1996, beginning with data that showed that approximately sixty-five percent (65%) of Black Americans believe that HIV/AIDS may be genocide.

Genocide is defined as the mass killing of people for economic, political, and/or ideological reasons.

In the October 2000 issue of the esteemed American Journal of Public Health, Dr. Stephen Kunitz, considered among America's most prominent medical sociologists, concluded, as did Africa's most esteemed medical sociologist and psychiatrist, Dr. Adeoye Lambo (Dean of the Faculty of Medicine at the University of Ibadan, Nigeria), that where capitalism, colonialism, and "WASP (White Anglo Saxion Protestant)-directed globalism" goes, the expected and consistently observed outcome is the mass killing of native populations.

My thesis raises this spectre concerning HIV/AIDS following the administration of experimental hepatitis B (HB) vaccines given to gay men in New

York City (NYC) and Blacks in Central Africa in 1974 and early 1975.

Could what I am about to present represent genocide? Might it be standard Machiavellian theory in practice? That is, creating the problem to profit from the solution; in this case from pharmaceutical sales while reducing undesired populations? Might the same instigators be suppressing lower cost, lower risk, and highly effective alternative therapies? This is certainly a most heretical, politically challenging, ethically, and morally disconcerting possibility. Yet, based on the evidence I will summarize here, a theory whose time has come for close examination; a theory I conclude should, if not must, be conducted by an independent scientific and ethics committee charged by the United Nations to discern the truth.

To summarize my findings, (first slide) you are now looking at the United States Government contract under which numerous AIDS-like and Ebola-like viruses were bioengineered using crude and tedious laboratory methods, by Litton Bionetics researchers, during the late 1960s and early 1970s. As you can see, Dr. Robert Gallo, "Project Officer" for the National Cancer Institute (NCI), oversaw this contract which, as documented, began on February 12, 1962.

On the next slide, reprinted from the United States Congressional Record, Litton Bionetics is listed as the sixth leading biological weapons contractor for the U.S. Army in 1969.

The next slide is reprinted from the journal Nature, December 5, 1970, wherein you can see Dr. Gallo from the NCI as lead author, with co-investigators from Litton Bionetics, reporting on their studies of RNA-dependent DNA polymerase (more commonly known as "reverse transcriptase") in human acute leukemic cells. As you may recall, Dr. Gallo was the 1984 alleged 'discover' of HIV. It was later determined that he did not discover it alone, but with Luc Montagnier from France. Dr. Gallo was then credited with the co-discovery of the AIDS virus. Yet, the problem is, this unique enzyme that is central to the function of HIV/AIDS, and critical to leukemia virus activity as well, was being investigated before 1970. This is approximately fifteen (15) years prior to Dr. Gallo's alleged discovery of HIV, and almost nine (9) years before his is credited for the discovering the first leukemia virus (HTLV-I).

The next graphic depicts the viral recombinations that were routinely carried out under Dr. Gallo's direction at that time. As the examples show here, monkey viruses (especially SV40 in the presence of SIVs, simian foamy retroviruses [SFR], and others) were recombined with feline leukemia virus RNA and chicken leukemia virus RNA

which caused wasting, immuno-suppression, and death. It is well known that feline leukemia in cats reflects similar pathogenicity and symptomatology as HIV in humans. Additionally, as shown, cross species leaps, contrary to popular belief were not easily or spontaneously induced. To get these new man-made viruses (called "mutant hybrids") to jump species into man, the viruses were cultured in human white blood cells in some studies, and human fetal tissue cells in other studies.

The next slide presents another U.S. Government document NCI monograph of 1974 showing a map of the world. Over New York you see a square, with a similar one appearing over Central Africa, apparently Uganda. Also, stars appear over northwest Uganda, southeast Uganda, and Bethesda, Maryland. According to the legend, the stars represent "Herpes Virus Research." Included here is the Epstein-Barr virus and cytomegalovirus from monkeys linked today to certain cancers and chronic fatigue. The square, the legend tells, depicts liver cancer virus and vaccine research, that is, HB virus and vaccine studies ongoing by 1974 in the two regions initially struck by HIV/AIDS.

To briefly summarize, and you may wish to more critically review this in the Medical Hypotheses publication, between 1974 and early 1975, 200,000 human doses of HB vaccine, representing four sub-types or strains of that virus, were administered to gay men in NYC, Blacks in Central Africa, and mentally retarded children from the Willowbrook State School on Staten Island in New York. That vaccine was prepared by initially growing the HB virus in contaminated chimpanzees and Rhesus monkeys shipped from Africa to New York by Litton Bionetics.

Dr. Maurice Hilleman, considered the world's leading vaccine developer, admitted during a 1986 interview (that never aired, the tape of which I recovered from the audio archives of the National Library of Medicine), that he imported the AIDS-virus into North America in contaminated monkeys destined for vaccine research and development at the Merck Pharmaceutical Company. He described how he brought the non-human primates into New York from Africa and got them off the planes. Recovered contracts show that Litton Bionetics's monkey colonies, as the NCI monograph depicts, were in southeast Uganda, and in northwest Uganda. Litton affiliated there, at that time, with the International Agency for Research on Cancer (IARC) that conducted numerous cancer virus and vaccine studies on native populations.

The early HB vaccines were prepared in these contaminated chimpanzees. The viruses were grown in the chimps, and then extracted along with a variety of simian virus contaminants (including SV40, SIVs, and SFRs) during the

Weapons of Mass Extinction

- Genetically Modified Organisms, MSG
- HAARP (geological, weather & brain manipulations, etc.)
- Forced Vaccination (live viruses, mercury, etc.)
- Engineered Viruses & Bioterrorism
- Fluoride, chlorine, formaldehyde
- Chemtrails

vaccine manufacturing process. The viruses were then injected into the Willowbrook children, gay men, and Black Africans. Of course, many of these people died during this part of the investigation. The survivors, who had developed (HB) antibodies, then contributed their blood. The final vaccine was prepared from this blood by separating the whole cells from the serum. It was from this (pooled) serum that four different sub-types of the 1974-75 HB vaccine were prepared and administered. The 200,000 doses were reportedly tested on these same populations.

This, according to all the scientific evidence, best explains the triggering of the AIDS pandemic on two far-removed continents, in two demographically distinct populations, during the late 1970s.

You may have heard that AIDS viruses predating this period have been discovered. This is not the truth. Although HIV gene fragments, representing portions of perhaps ancient viruses, have reportedly been discovered, HIVs demonstrating the complete viral genome only reflect this period of AIDS pandemic origin.

I will close by quoting directly from my article in Medical Hypotheses:

"Not easily embraced by individuals, organizations, institutions, and/or government agencies biased by special interests, the dire implications of neglecting this hypothesis, and its further investigation, are unfathomable. Such actions strain the ethical fabric of science, our moral obligations as world citizens, and may be contributing to an irreversible attack against humanity.

On the other hand, the AIDS crisis may serve an ideologically justified function concerning burgeoning ethnic populations in a period of globalistic transition. In effect, it provides a revenue generating control mechanism for national security interests and the organizations, institutions, and industries aligned with what amounts to utilitarian global genocide."

Thank you.

Dr. Leonard Horowitz, author of the book "Emerging Viruses", virtually confirming the statement of P2 Lodge's 33rd degree Freemason Leo Zagami, that the Vatican ordered UN-WHO to immunize Central Africans using HIV contaminated vaccines which were also distributed to New York homosexuals for plausible deniability re anti-racism.

http://www.tetrahedron.org/articles/aids-coverups/Vaccine_Induced_Pandemic.html

"The viruses were then injected into the Willowbrook children, gay men, and Black Africans. Of course, many of these people died during this part of the investigation."

Is Codex Alementarius UN's Written Policy to Wipe Out 85% of World Population?

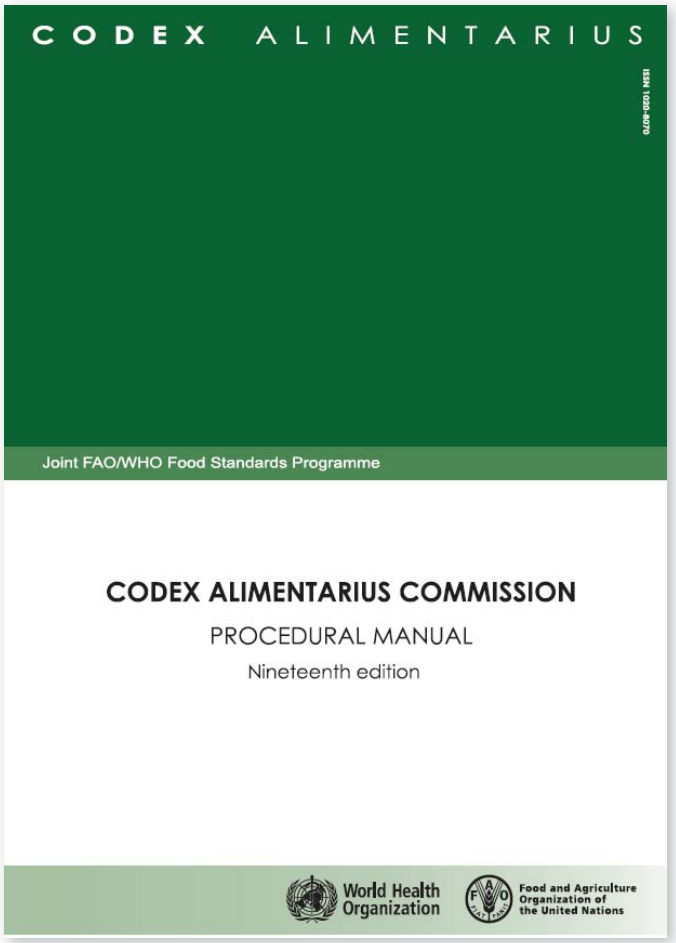
As we gain more insights into the grave dangers of genetically modified crops, fluoride, and vaccines, the impact of this less known document which the United Nations' Food and Agriculture Organization thru the Codex Alementarius Commission wrote in 1963 will be more apparent.

Codex Alementarius (Latin for "food book") is a set of guidelines that is promoted to protect the consumers against faulty food products and procedures. But this codex has evolved over the years to include the following policies which will become, or is already, mandatory and binding among all members of the World Trade Organization [WTO]:

- GMO food labelling not required;
- Banned pesticides, aluminium are among those deadly chemicals classified as food additives;
- Codex recommended maximum levels of chemical which are astoundingly high as opposed to the extremely low daily recommended daily allowances for vitamins;
- Dietary supplements or natural health foods are to be classified as drugs;
- Codex would make vitamins and minerals illegal and not available with a prescription;
- Every dairy cow is required to have Monsanto's recombinant bovine growth hormone and all other animals for food production must be treated with antibiotics, and;
- All food should be irradiated

These are just among the more than 4,000 guidelines and regulations promulgated over the years regarding everything man can possibly put into his mouth with the exception of pharmaceuticals.

While the UN-FAO may insists that codex compliance is voluntary, the World Trade Organization made it clear that in cases of trade disputes between two countries, codex compliance takes precedence over the merits of the case. This clever method of the author having plausible deniability because the mandatory clause is not written in the actual document itself while the other arm, in this case the WTO, trying to enforce it by using as the basis for resolving disputes effectively forces each member nation to be compliant for practical purposes, is a clear indication that



both the UN and WTO are long tentacles of the same Giant Octopus that also has interests in Big Pharma.

When a scheme is so huge, who among the maleducated, highly brainwashed members of our society could have a chance of figuring it out? The plot thickens when you consider whose brainchild was the codex.

During the Nuremberg trial, 25 board members, executives, and chemists of the giant chemical manufacturer and poison gas supplier to the Nazi concentration camps, IG Farben, were convicted and sent to jail, but not for long. In 1951, they were all released and one of them proposed that if war can't solve the problem of too much people, why not control food. **Fritz den Meer**, the executive manager of IG Farben in 1943 and convicted to crimes against humanity, who coined the phrase *"Arbeit Mach Frei"* which literally means "work sets you free" decorated in entrances of several concentration camps including Auschwitz, submitted this idea to his UN pals which resulted in the creation of a trade commission now known as the Codex Alementarius Commission. For crimes against humanity conviction, he served a very long sentence of six years.

IG Farben was broken down into Bayer, Hoechst, and BASF. Codex Alementarius was projected, in 1962, to be fully implementable by December 2009, when everybody is celebrating the holidays.

Take note, the creation of a global government called the United Nations was one of the prime objectives of the Second World War. The technique used in selling UN to the world is a very simple marketing fundamental, i.e. identify a need and satisfy that need, although in this case there was never a need, so they created one just like the bogus threat of terrorism of which the prime goal is to invade your privacy through the Patriot Act, the colored 3D body scanners and CCTVs.

United Nations, United States, United Airlines and United Parcel are all corporate entities after corporate interests. That's why they have the same corporate structures, i.e. headed by a president and run by department heads. C'mon, is it not that obvious already?

Here's more: the Food and Agriculture Organization was established in Quebec Canada in 1945. Its headquarters were moved to Washington DC in 1950, and to Rome, Italy!

"He who controls food controls the world!"

Dr. Rima Laibow, Natural Solutions Foundation www.healthfreedomusa.org

In cases of emergency, your government will take good care of you...

from the day we pick you up for free

FEMA

to the time you enter our facility

until your very last day.

Auschwitz

"Those who cannot remember the past are condemned to repeat it."

- George Santayana

Nazism of America & The Rest of The World

We used to look at America as the beacon of hope for all of humanity. The majestic Statue of Liberty, the fabled American Dream was so deeply ingrained into our consciousness that almost everyone wishes to live in the Land of Milk and Honey.

Today, there is neither milk (aside from Monsanto's) nor honey to partake on. At the time of this writing, Standards & Poors downgraded US credit rating from AAA to AA+ which is a clear admission that the American Dream is nothing more than just a dream.

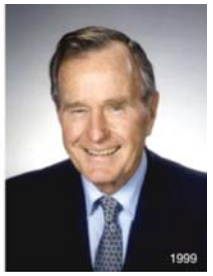
Why it has come to this?

To answer that question is to confront the fact that America is not run by a George Washington or a Thomas Jefferson anymore, but by hardcore Nazis.

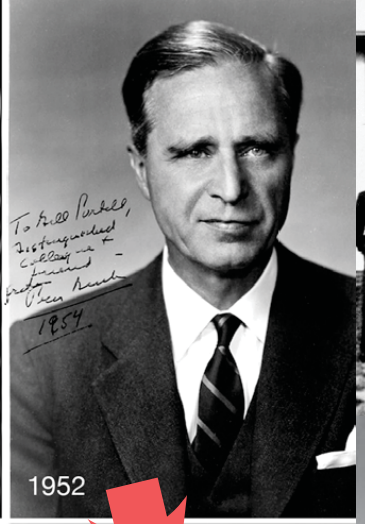
The story begins with a group of closely knit families and friends whose intimacy of kinship only an old photograph can capture. This photograph is one of many collected over the years as insurance policy by **Otto Skorzeny**, a close-in bodyguard of Adolf Hitler (Holocaust fame) who before his death in 1999 (not 1975 as disinfo tool Wikipedia would like to tell you), decided to tell it all.

Among his mind boggling revelations were:

- Sen. Prescott Bush, accused of trading with the enemy and assisted in the funding of Hilter's Third Reich was actually George H. Scherff, Sr.;
- The 41st US president is not George HW Bush but George Scherff, Jr, a Nazi spy, one of those who infiltrated the OSS and planned the assassination of Dr. Nikola Tesla with the help of the whistleblower himself, Skorzeny and Gehlen, and the subsequent grand larceny of all Tesla files and inventions;
- Skorzeny's pivotal role in the infiltration of the former Office Strategic Services, and the successful integration of the Nazi Gestapo into the newly established Central Intelligence Agency with the help of spy master Reinhard Gehlen, "Wild Bill" Donovan and Allen Dulles, that would led to the massive relocation of fifty thousand Nazis into North and



The Association of Radio Engineers Banquet 1915



Germany's Rocketry Team that populated the newly created NASA after their successful transfer to the US via Vatican Ratlines during Operation Paperclip.

Dear Mr. Tesla:

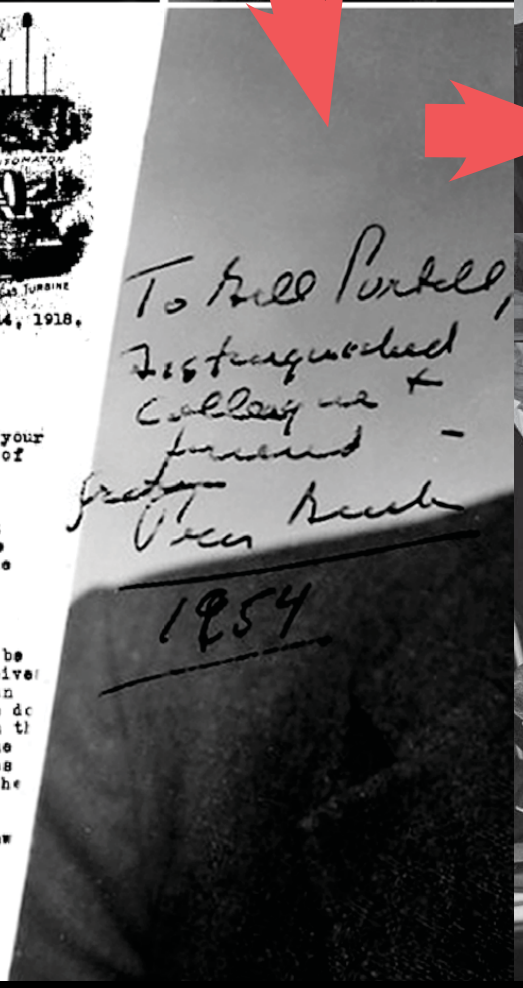
In accordance with request contained in your telegram of Oct. 11th, I enclose herewith certified copy of resolution passed at Directors Meeting held to-day.

I had hoped that you would send a copy of the resolution as you would wish it formulated, so as to meet the conditions of the proposed agreement. However, in the absence of knowledge of its terms I have tried to make the resolution broad enough and trust that it will meet all requirements.

As regards the Lowenstein case, Mr. Foster has secured an adjournment until Oct. 21st. He said it will be useless to try to obtain any further delay unless he receives from you an affidavit, or a letter on which he can base an affidavit, stating exactly the nature of the work you are do for the Government that compels you to remain absent from th City; in other words, an affidavit on the same lines as he asked for in the De La Vergne cases. The Dressel case was on the calender for Sept. 10th, but I have not heard of the result.

With heartiest wishes for the success of the new venture, I remain

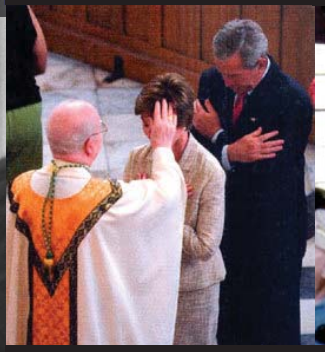
Respectfully yours,



Germany's elite led by Goebells with the Pope at the Vatican.

Clinton: Protestant or Catholic?

Otto Skorzeny with Hitler



Skull & Bones Couple?

The Skorzeny's with Hitler (cropped)

South America with CIA complexity and protection;

- The establishment of NASA with the whole Nazi rocketry team on board, and;
- That Reinhard Gehlen, Josef Mengele and George Scherff, Jr. (aka George HW Bush) directly participated in the JFK assassination.

According to Skorzeny, George Scherff, Sr. (Prescott Bush) befriended Nikola Tesla and subsequently worked for the scientist as an accountant. Later in 1943, George Scherff Jr., or "Curious George", would arrange the murder of Tesla with the help of Skorzeny and Gehlen.

Aside from the Scherff family, other personalities shown on the picture should be worth discussing.

Martin Bormann (born June 17, 1900, Halberstadt, German Empire — died May 1945, Berlin, Ger.) German Nazi leader. He joined the Nazi party in 1925 and served as Rudolf Hess's chief of staff (1933 – 41). He was appointed head of the party chancellery in 1941 and became one of Adolf Hitler's closest lieutenants. A shadowy but extremely powerful presence, Bormann controlled all legislation, party promotions and appointments, and the personal access of others to Hitler. He disappeared shortly after Hitler's death. Though some reports allege that he escaped to South America, German authorities officially declared him dead after exhuming his presumed remains.

Read more: http://www.answers.com/topic/martin-bormann#ixzz1UfvT32ib

Josef Mengele (born March 16, 1911, Günzburg, Ger. — died Feb. 7, 1979, Enseada da Bertioga, near São Paulo, Braz.) German Nazi doctor. Influenced by the racial ideology of Alfred Rosenberg, in 1934 Mengele joined the research staff of the newly founded Institute for Hereditary Biology and Racial Hygiene. An ardent Nazi, he served in World War II as medical officer with the SS. In 1943 he was appointed chief doctor at Auschwitz-Birkenau, where he selected incoming Jews for labour or extermination, becoming known as the "Angel of Death," and conducted medical experiments on inmates in pseudoscientific racial studies. After the war he escaped to South America, where he died in 1979 under the name of Wolfgang Gerhard, a Nazi he befriended in Brazil and whose identity he assumed.

Read more: http://www.answers.com/topic/josef-mengele#ixzz1UdSs5jNG

SS (Schutzstaffel) Captain **Alois Brunner** served Adolf Eichmann in organizing the Nazi destruction of European Jews. Eichmann called Brunner "one of my best men." Born in Rohrbrunn, Austria, on April 8, 1912, Brunner joined the Nazi Party at age 19 and the SS at 26 (1938). He worked with Eichmann in the Central Office for Jewish Emigration in Vienna, which forced Jews to emigrate. Then, in October 1939, Brunner organized the first transports to Poland, a pilot project for mass deportation of Jews to ghettoes and death camps in the East. As director of the Vienna Central Office for Jewish Emigration (1940-1942), Brunner deported people that might have received exemptions, such as invalids and orphans. Brunner's personal torture of Jews exceeded the needs of Nazi policy. He knew the fate of those he deported, for he visited the ghettoes and camps. The combination of tactics Brunner used in Vienna - efficiency, deception, and terror - was noted by higher authorities and activated elsewhere.

Witnesses have called Brunner the "most ferocious" of all the torturers. He packed 2,000 Jewish prisoners into each transport of sealed boxcars, which after ten days arrived at the gas chambers of Auschwitz. In six weeks Brunner destroyed a community that had persisted for five centuries.

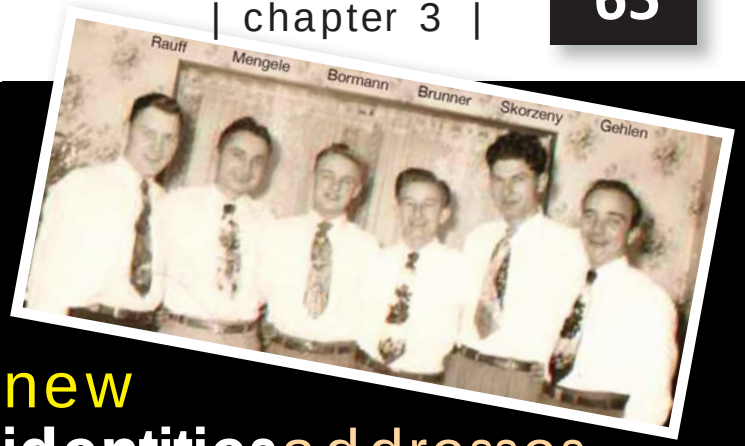
Brunner deported 47,000 from Austria, 44,000 from Greece, 23,500 from France, and 14,000 from Slovakia. Very few of Brunner's victims survived.

Brunner was imprisoned by the Allies, but, using a false name, he got released. After working in Germany, he escaped in 1954 to Damascus, Syria, where he lived for over 40 years under Syrian protection.

Read more: http://www.answers.com/topic/alois-brunner#ixzz1Ufylz6ZC

Walter Rauff (Köthen, Germany June 19, 1906 – Santiago de Chile, May 14, 1984), was an SS officer in Nazi Germany, attaining the grade of Colonel (Standartenführer) in June 1944.[1] From January 1938 he was an aide of Reinhard Heydrich firstly in the Sicherheitsdienst or SD, the SS security service, later in the Reichssicherheitshauptamt or RSHA, the Reich Security Main Office, a department created by Himmler in 1939 grouping the Gestapo, SD and Kripo, the criminal police.

Rauff is thought to be responsible for nearly 100,000 deaths during the Second World War. In the late 1970s and early '80s, he was arguably the most wanted Nazi fugitive still alive.



new identities addresses

Adolf Hitler (b.1889)
faked suicide on 4/30/1945
alias William Coates
wife Eva Braun, alias unknown
Bethesda, MD residence

Martin Bormann (b.1920)
faked death 5/2/1945, falsified DNA
alias Edward Kobylarz
204 Creekview Road
New Bern, NC 28562-9181
tel: (252) 633-7947

George Scherf, Sr. (1895-1972)
alias Prescott Sheldon Bush
Financial secretary of Nikola Tesla
CEO Brown Brothers Harriman
Union Banking Corporation treason
Senator of Connecticut

George H. Scherf, Jr. (b.1924)
alias George Herbert Walker Bush
CIA Director, 41st US President
wife Barbara Pierce Bush
Walker's Point, Kennebunkport, MN

Reinhard Gehlen (b.1919)
Director of German BND, DVD
faked death 6/8/1979
alias Henry "Hank" V. Janowicz
31 Rumana Rd, Wayne, NJ 07470
tel: (973) 696-6599

Otto Skorzeny (1908-1999)
faked death 7/6/1975
alias Edward Frank Pyzyna
wife Frances P. Pyzyna, alias
638 4th Avenue
Boynton Beach, FL 33426
tel: (561) 732-6634

Walther Rauff (b.1908)
faked death 5/14/1984
alias George Pfaff
175 Georgetown Woods Drive
Youngsville, NC 27596-7622
tel: (919) 556-0467

Alois Brunner (b.1912)
alias Fred E. Kobylarz
wife Dorothy C. Kobylarz
24 Valley View Drive
Farmington, CT 06032
tel: (860) 677-4245

Joseph Mengele (b.1917)
faked death 2/7/1979, falsified DNA
alias Steven T. Rabel
3688 East Ibis Cove Court
Hernando, FL 34442
tel: (352) 560-0260

August Hirt (1898-2001)
faked suicide 6/2/1945
alias Frank Hirt
Skorzeny's neighbor on 4th Ave
Boynton Beach, FL 33426

source: veil of invisibility

The MI5 file is more explicit concerning Rauff's "technical" skills:

"Rauff supervised the modification of scores of trucks, with the assistance of a Berlin chassis builder, to divert their exhaust fumes into airtight chambers in the back of the vehicles. The victims were then poisoned and / or asphyxiated from the carbon monoxide accumulating within the truck compartment as the vehicle travelled to a burial site. The trucks could carry between 25 and 60 people at a time."[5]

http://www.answers.com/topic/walter-rauff#ixzz1Ug1UEgTY

Reinhard Gehlen (3 April 1902 – 8 June 1979) was a General in the German Army during World War II, who served as chief of intelligence-gathering on the Eastern Front. After the war, he was recruited by the United States military to set up a spy ring directed against the Soviet Union (known as the Gehlen Organization), and eventually became head of the West German intelligence apparatus. He served as the first President of the Federal Intelligence Service until 1968. Gehlen is considered one of the most legendary Cold War spymasters.

Read more: http://www.answers.com/topic/reinhard-gehlen#ixzz1Ug32rJNu

The Real Power Behind The Nazis

It is very important to understand that these Nazis are not doing this racial cleansing alone. This is an elaborate plan from the very beginning, and only a religiously fanatical military organization populated by the best minds of the ruling class could execute -- this is the Society of Jesus, or simply, the *Jesuits*.

The *Society of Jesus* is a military organization headed by a Generale at the top which is also known as the *Black Pope*. This black pope controls the White Pope. And this White Pope controls the Cardinal in New York who controls the US President who essentially is the president of the United States Corporation with its headquarters at the District of Columbia. As they say, Federal US is as federal as Federal Express. Funny but true.

These are some of the reasons why the outgoing Eisenhower warned the public about the dangers of the rising influence of the military industrial complex over governance, which Kennedy took bold steps against and ultimately costs him his own life... but not before he broadcasted his last speech...

"I operated behind the shadows in the assassination of John F. Kennedy through the Parish of the Holy Spirit in Houston, Texas. In that parish, the assassination of John F. Kennedy, President of the United States was already scheduled."

Alberto Rivera, 1982,
Spanish American Ex-Jesuit,
The New Inquisition

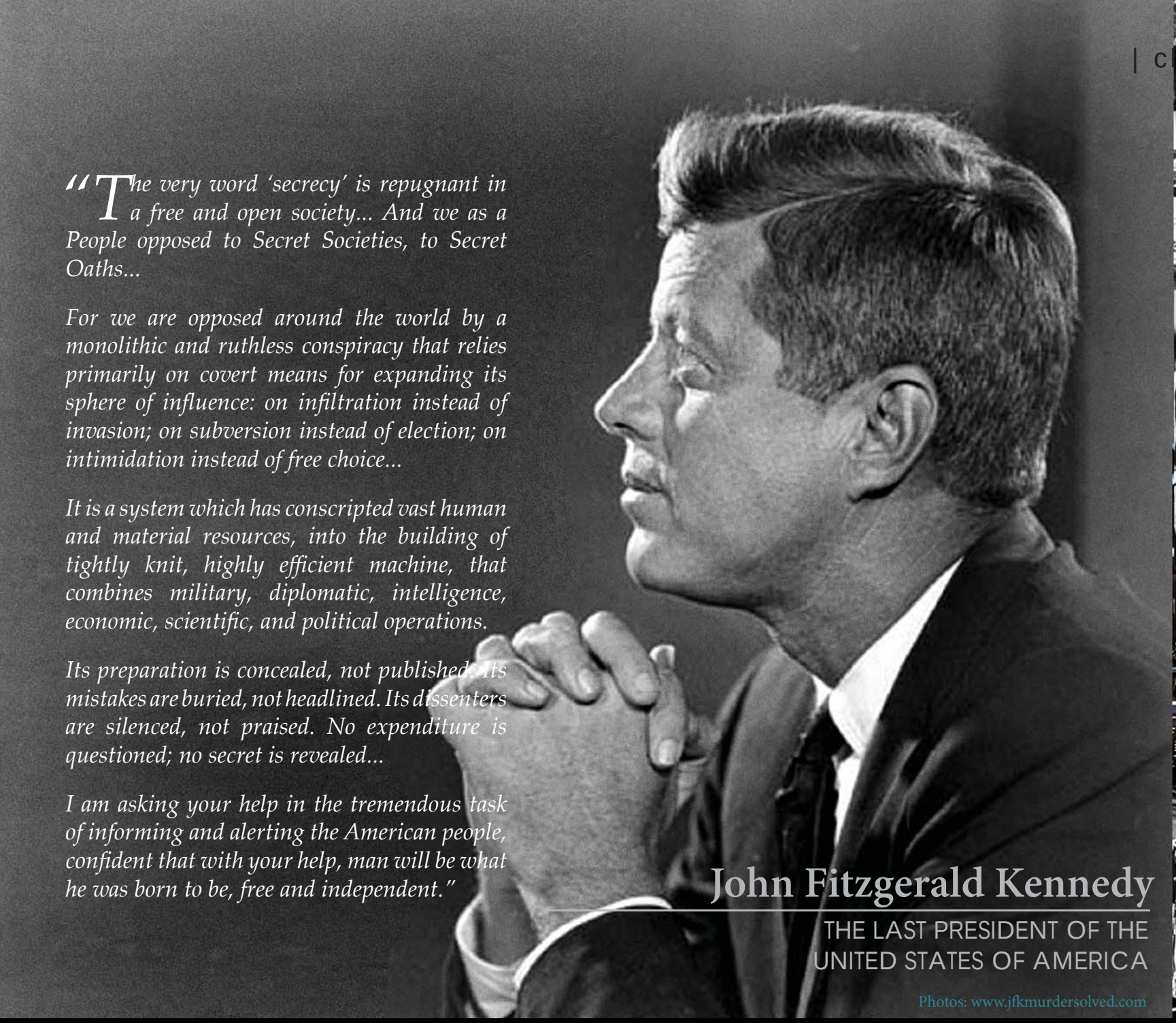
"The very word 'secrecy' is repugnant in a free and open society... And we as a People opposed to Secret Societies, to Secret Oaths...

For we are opposed around the world by a monolithic and ruthless conspiracy that relies primarily on covert means for expanding its sphere of influence: on infiltration instead of invasion; on subversion instead of election; on intimidation instead of free choice...

It is a system which has conscripted vast human and material resources, into the building of tightly knit, highly efficient machine, that combines military, diplomatic, intelligence, economic, scientific, and political operations.

Its preparation is concealed, not published. Its mistakes are buried, not headlined. Its dissenters are silenced, not praised. No expenditure is questioned; no secret is revealed...

I am asking your help in the tremendous task of informing and alerting the American people, confident that with your help, man will be what he was born to be, free and independent."



John Fitzgerald Kennedy

THE LAST PRESIDENT OF THE UNITED STATES OF AMERICA

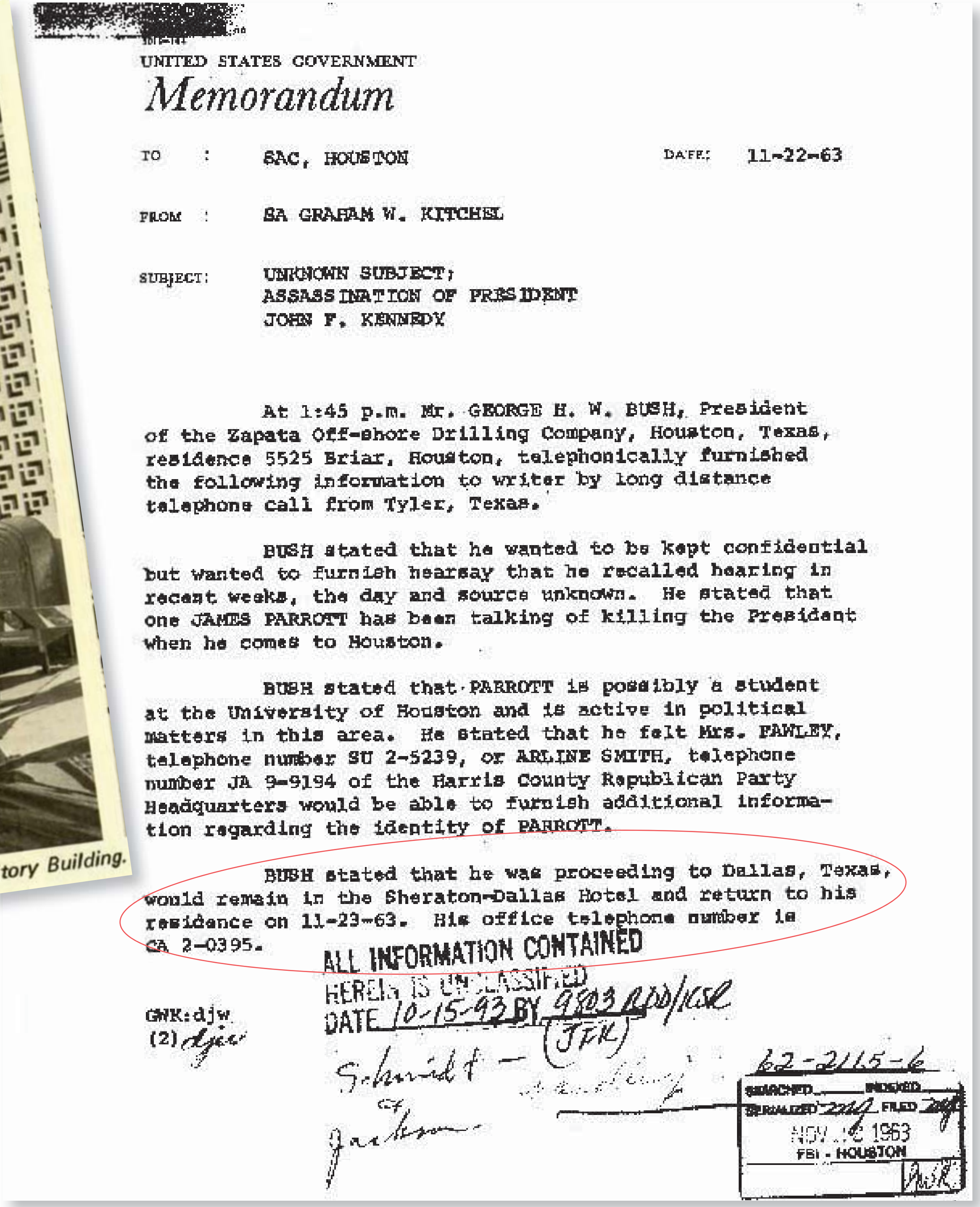
Photos: www.jfkmurdersolved.com

Dallas Police Officers seal off the Book Depository Building.

The Bush Connection

Why would George HW Bush continue to deny he had prior experience in the CIA before becoming its director in 1976?

The plain and simple answer is: it will establish his direct involvement to the JFK assassination in November 22, 1963. The FBI document on the right and the deathbed confession of Hitler's personal bodyguard, Otto Skorzeny, firmly established that fact beyond reasonable doubt. His directorship to the CIA was only to further cover-up the crime amidst ongoing independent investigations regarding JFK and 200 related assassinations.



[redacted]

UNITED STATES GOVERNMENT

Memorandum

TO : SAC, HOUSTON DATE: 11-22-63

FROM : SA GRAHAM W. KITCHEL

SUBJECT: UNKNOWN SUBJECT;
ASSASSINATION OF PRESIDENT
JOHN F. KENNEDY

At 1:45 p.m. Mr. GEORGE H. W. BUSH, President of the Zapata Off-shore Drilling Company, Houston, Texas, residence 5525 Briar, Houston, telephonically furnished the following information to writer by long distance telephone call from Tyler, Texas.

BUSH stated that he wanted to be kept confidential but wanted to furnish hearsay that he recalled hearing in recent weeks, the day and source unknown. He stated that one JAMES PARROTT has been talking of killing the President when he comes to Houston.

BUSH stated that PARROTT is possibly a student at the University of Houston and is active in political matters in this area. He stated that he felt Mrs. FAWLEY, telephone number SU 2-5239, or ARLINE SMITH, telephone number JA 9-9194 of the Harris County Republican Party Headquarters would be able to furnish additional information regarding the identity of PARROTT.

BUSH stated that he was proceeding to Dallas, Texas, would remain in the Sheraton-Dallas Hotel and return to his residence on 11-23-63. His office telephone number is CA 2-0395.

ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 10-15-93 BY 9803 RPD/KSR
(JFK)

GWK:djw
(2)

62-2115-6

SEARCHED ___ INDEXED ___
SERIALIZED ___ FILED ___
NOV 22 1963
FBI - HOUSTON

Photos: www.jfkmurdersolved.com

The Hoover Memo

Date: November, 29, 1963

To: Director, Bureau of Intelligence and Research, Department. of State

From: John Edgar Hoover, Director

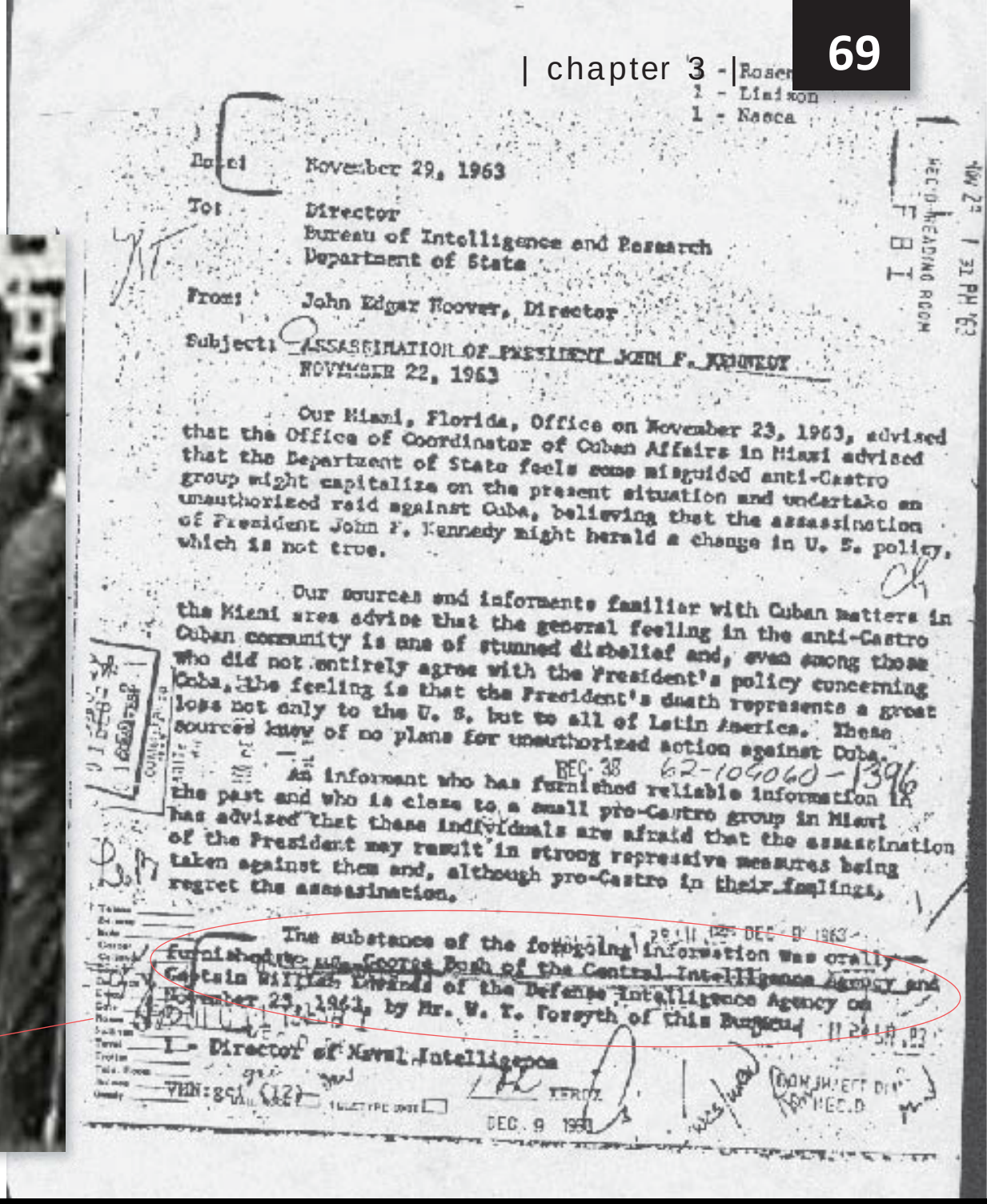
Subject: ASSASSINATION OF PRESIDENT JOHN F. KENNEDY, November 22, 1963

Our Miami, Florida Office on November 23, 1963, advised that the office of Coordinator of Cuban Affairs in Miami advised that the Department of State feels some misguided anti-Castro group might capitalize on the present situation and undertake an unauthorized raid against Cuba, believing that the assassination of President John F. Kennedy might herald a change in U.S. policy, which is not true.

Out sources and informants familiar with Cuban matters in the Miami area are advice that the general felling in the anti-Castro Cuban community is one of stunned disbelief and, even among them who did not entirely agree with the President's policy concerning Cuba, the feeling is that the President's death represents a great loss not only to the U.S. but to all of Latin America. These sources know of no plans for unauthorized action against Cuba.

An informant who has furnished reliable information in the past and who is close to a small pro-Castro group in Miami has advised that these individuals are afraid that the assassination of the President may result in strong repressive measures being taken against them and, although pro-Castro in their feelings?, regret the assassination.

The substance of the foregoing information was orally furnished to us ... George Bush of the Central Intelligence Agency and Captain... of the Defense Intelligence Agency on November 23, 1963, by Mr V... Torryth of this Bureau.



1 - Liaison
1 - Nasca

Dated November 29, 1963

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Bureau of Intelligence and Research
Department of State

From: John Edgar Hoover, Director

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The substance of the foregoing information was orally furnished to us [illegible] George Bush of the Central Intelligence Agency and Captain William Edwards of the Defense Intelligence Agency on November 23, 1963, by Mr. V. T. Forsyth of this Bureau.

1 - Director of Naval Intelligence

VHN:gcl (12)

Photos: www.jfkmurdersolved.com

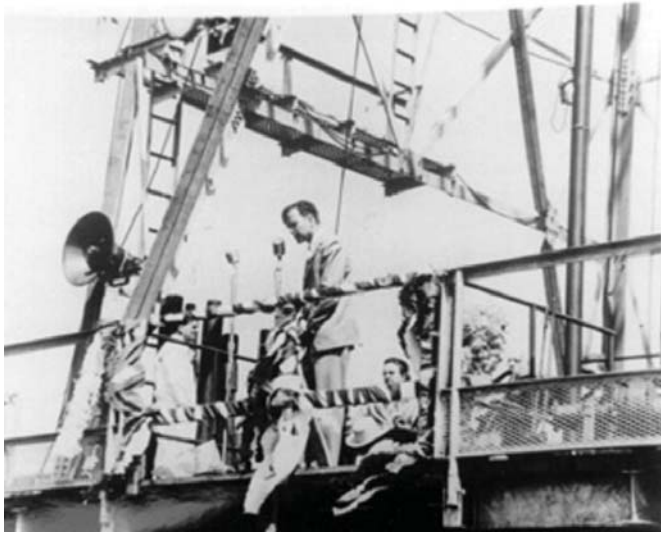
Che Guevarra executed, Fidel Castro lives. Why?

Felix Rodriguez with captured Che Guevarra. Rodriguez is a very close friend to the Bushes. He is part of Operation 40, veteran of the Bay of Pigs and Iran Contra, a CIA-trained assassin.

Fidel Castro was born in a wealthy Cuban family and is Jesuit-trained for seven years. He is shown above with 78th Grandmaster and Prince of the Sovereign Order of Malta Andrew Willoughby Ninian Bertie, cousin of Queen Elizabeth. This guy is one of those classified as "controlled opposition". The Jesuits controlled both sides of the conflict, the real key to absolute power.

The Bay of Pigs Invasion

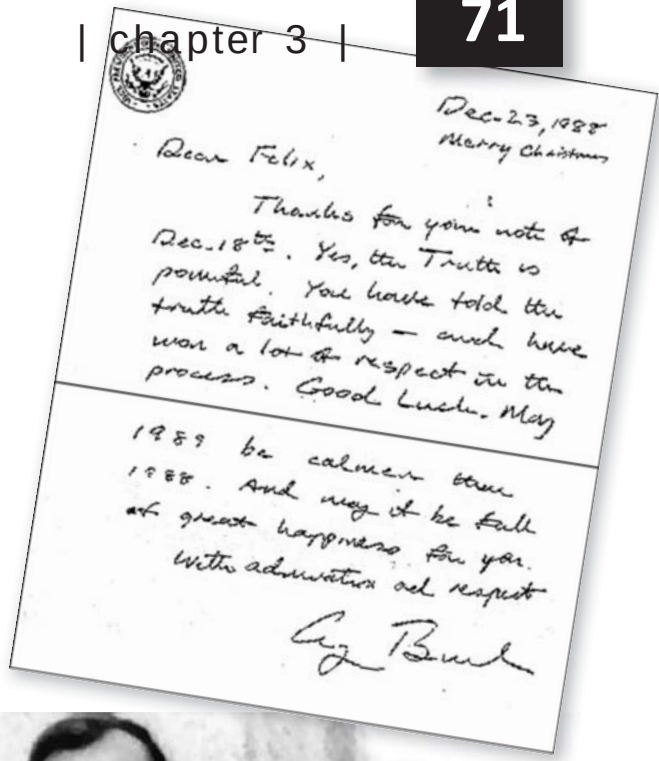
It is very clear that the objective of the Bay of Pigs invasion was about the control of Cuban natural resources including oil which George HW Bush was very much interested as manifested by his Zapata Corporation.



Show above is Curious George inspecting his oil rig in Central America. It is during this time when he met Felix Rodriguez. The intimacy of their friendship are shown in his invitation to the Office of the Vice-President and the letter he sent to the latter, a Christmas note referring to the Iran-Contra Scandal hearings.

Photos: www.jfkmurdersolved.com

Both these men were said to be involved in the Bay of Pigs invasion and were also present in Dallas on the day John F. Kennedy was assassinated.



Dec. 23, 1988
Merry Christmas

Dear Felix,

Thanks for your note of Dec. 18th. Yes, the Truth is powerful. You have told the truth faithfully — and have won a lot of respect in the process. Good Luck. May 1989 be calmer than 1988. And may it be full of great happiness for you.

With admiration and respect

George Bush

The second time limo driver, William Greer, turned to John, he was already aiming his gun with his left hand and pulled the fatal shot against the President. He was eventually murdered as well as Jack Ruby.

It looked like a controlled demolition. It stunk like a controlled demolition. It must have been a

CONTROLLED DEMOLITION

http://www.time.com/time/photogallery/0,29307,1660644_1442569,00.html

http://en.wikipedia.org/wiki/File:Cut_metal_WTC.jpg

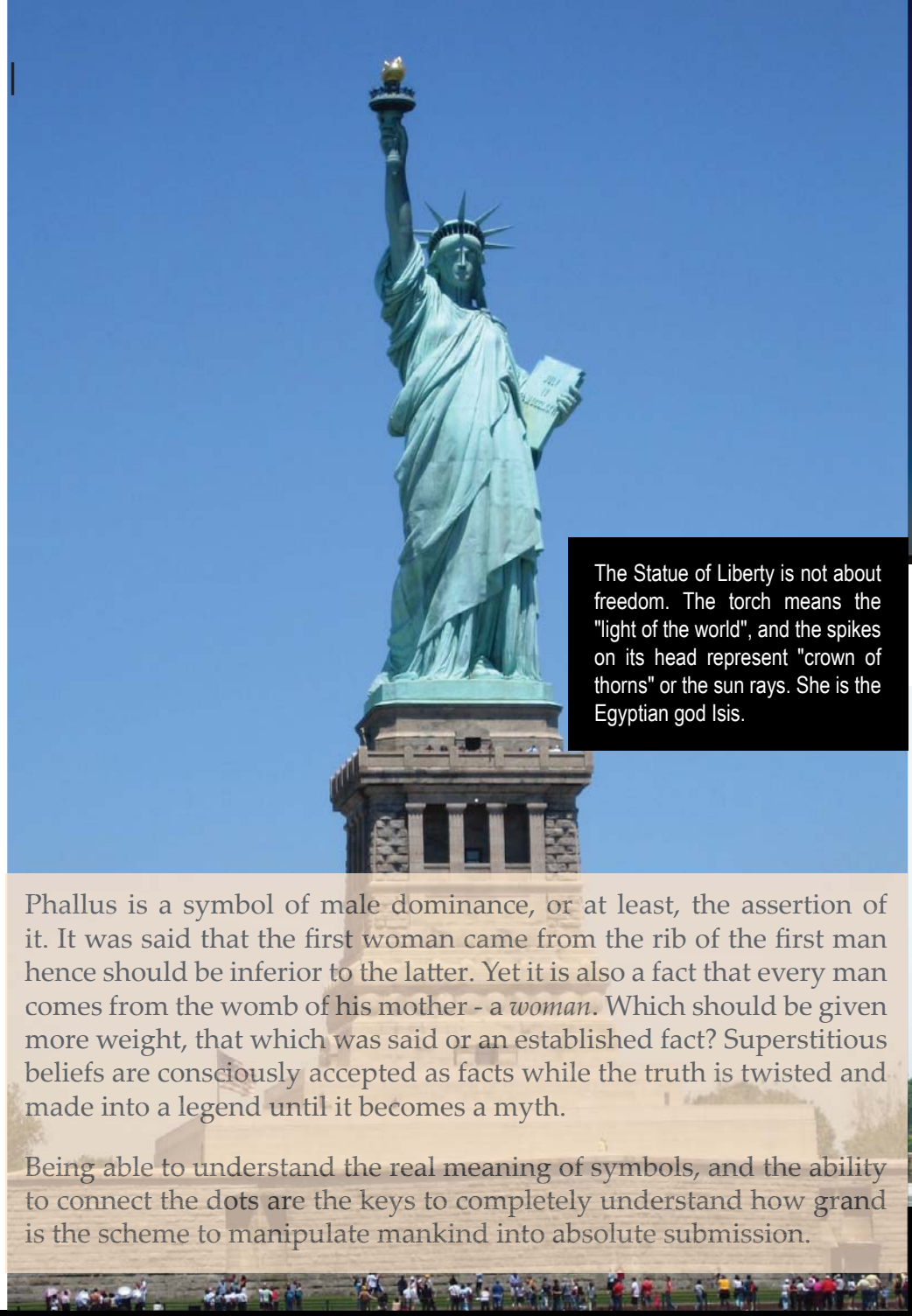
If George Scherff, Sr. was one of those who aided the meteoric rise to power of Adolf Hitler, and the establishment of one global government - the United Nations, and George Scherff, Jr. is the prime architect of the murder of Nikola S. Tesla and played a vital role in the assassination of John F. Kennedy both of which resulted to the murder of Science and Freedom, George Scherff III is not to be left behind. He'd left his mark at the beginning of the 21st century by instilling fear into the hearts of the gullible citizens of corporate America and the rest of the world with the subsequent invasion to their private lives, and interfering in the release of Global Settlements which could free everyone from the leeching clutches of debt. With the destructive venom of this one hardcore Nazi bloodline, let's just hope America will not produce a George Scherff IV 'cause every time she sneezes the rest of the world catches tuberculosis.

The Symbols of Power

Symbols, emblems, monuments and repetitive rituals are very effective tools in imparting an idea that does not exist in reality. It has been scientifically proven that a lie told persistently becomes an accepted fact. Rosary is one of the most powerful tools in mind control using constant repetitions of the same lie.

We may not also be aware of it but we are subjected to symbols since the establishment of serfdom the most visible of which is the *phallus*.

"Phallicism, in anthropology and comparative religion, the worship of the generative power as expressed by the adoration of the phallus, or male organ of procreation. It is a characteristic element of many religions. In ancient times it was practiced by the early Semites and Greeks, among many other peoples, and became an important part of the rites attending the worship of the Greek god Dionysus. Phallicism and its counterpart, the adoration of symbols of female fertility (as typified in the worship of the ancient goddess Cybele, a deification of the female generative or mother principle), are both manifestations of nature worship. In present-day India a female symbol, the yoni, and a phallic symbol, the linga, are employed in the worship of the Hindu god Shiva. " [Encarta]

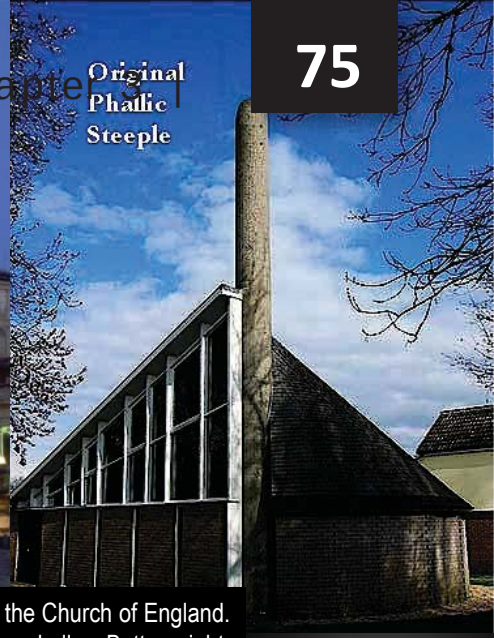


The Statue of Liberty is not about freedom. The torch means the "light of the world", and the spikes on its head represent "crown of thorns" or the sun rays. She is the Egyptian god Isis.

Phallus is a symbol of male dominance, or at least, the assertion of it. It was said that the first woman came from the rib of the first man hence should be inferior to the latter. Yet it is also a fact that every man comes from the womb of his mother - a *woman*. Which should be given more weight, that which was said or an established fact? Superstitious beliefs are consciously accepted as facts while the truth is twisted and made into a legend until it becomes a myth.

Being able to understand the real meaning of symbols, and the ability to connect the dots are the keys to completely understand how grand is the scheme to manipulate mankind into absolute submission.

The Rizal Monument in Luneta Park, Manila Philippines, is a phallus. Philippines is an affiliate corporation of the United States.



The Washington Monument is phallic. It represents an erect penis, a symbol of male dominance. It is sitting near a pond representing femininity. This sexual implication will find its inevitable climax at the Oval Office or the Ovum. This same phallic is at the heart of the Vatican.

Below, is the most holy relic of the Church of England. Above right, a local church with a phallus. Bottom right, god Shiva standing in front of a phallus.

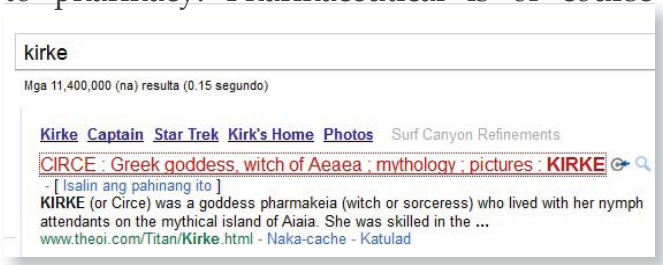
The Vatican Church is perfectly oriented from East to West, the path of the Egyptian sun god, Horus. The location of the phallus is at the center of the oval which signifies the female ovum. The oval itself has the motif of the sun rays, and a double cross at the same time. With the Clitorean Dome on the West side, the whole complex is convincingly shaped after the female organ which reinforces the fact that the word church is Circe in Greek which means *sorceress* or *witch* and incidentally addressed as "she". This complex also look like a keyhole, that's why you'll see 2 keys in the Vatican emblem.

http://jordanmaxwell.com/articles/astrotheology/index.html

Origins of the Church

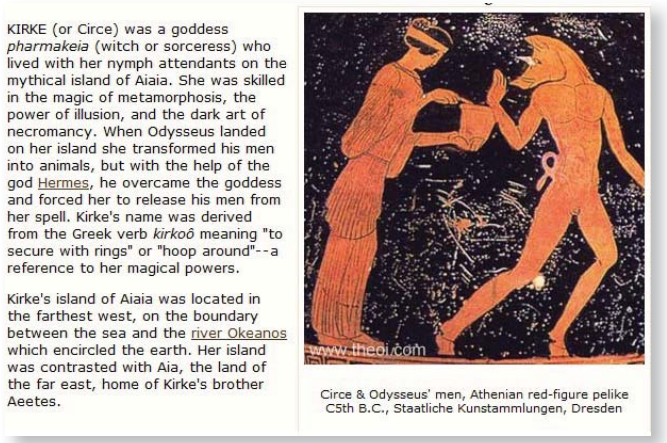
The holiness of the church can be measured from its conception or from where the word really came from. The word "church" is *kirke* in Danish, *Circe* in Greek, which means *witch* or *sorceress, skilled in the magic of metamorphosis, power of illusion and dark art of necromancy*.

In the Google clip below, it is very clear that the word "church" is also directly related to *pharmakeia* which is phonetically similar to pharmacy. Pharmaceutical is of course



an industry close to our hearts and is very relevant to the primary discussion, i.e. the decisive eradication of cancer, AIDS and all other parasitic diseases.

What do the symbols used in the medical industry and the World Health Organization have in common?



Snake or serpent.

According to the Sumerian texts, *Ea*, an extraterrestrial scientist who was one of those who came here, decided to transform the early *homo erectus* into a more advanced *homo sapiens* for purposes of slave labor.

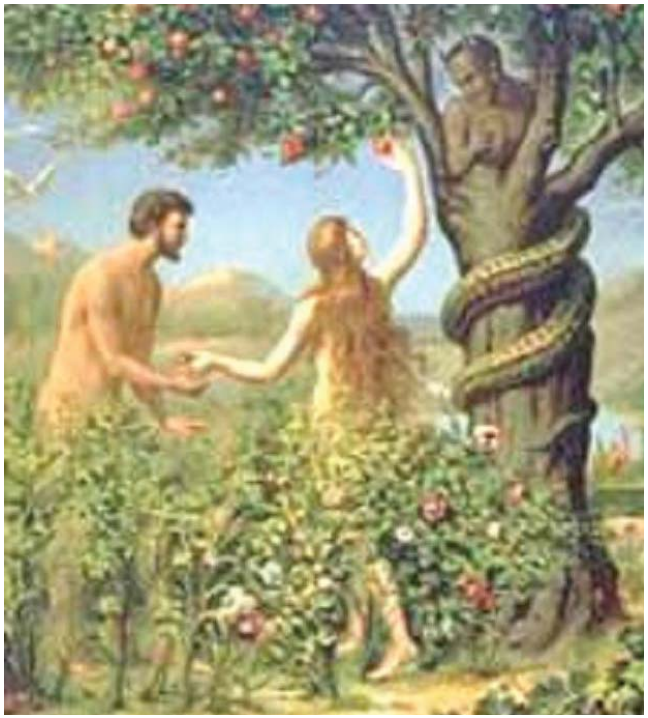
Remember, Genesis 1:26 said, *"Then God said, "Let us make mankind in our image, in our likeness, ..."*, which could only mean that man may have preexisted long before they came (*us* means there were many who came here).

Later on, Ea decided to tell the earthlings about their true origin, against the will of

This symbol found everywhere under Pope's control expresses the true intent of the Vatican Empire: spiritual and temporal domination as represented by the two keys which would fit perfectly into the keyhole which is the Vatican Square viewed from the top. Notice the pyramid below the cross.

his superiors. In order to protect himself, he established the first fraternity known as the *Brotherhood of the Snake* composed primarily of the indigenous earthlings.

Ea was eventually condemned to remain here on this planet. Whether his name could be the origin of our planet's name Earth or not, his action was immortalized in the bible where he convinced Eve to partake the fruit of the Tree of Knowledge. This fraternity is said to uphold spiritual wisdom, yet when it was infiltrated and transformed, has become very successful in keeping the majority of the world spiritually ignorant. The bible itself have been edited several times to reflect the agenda of the entity in power. Emperor Constantine did the same extensively for Catholicism through the Council of Nicea.



If you really do an objective analysis you will come into a definite conclusion that neither the church upholds morality, nor religion at large represents spirituality. How can you achieve spiritual freedom if you don't even know yourself? Why are they living in palaces in the first place, while their subjects are wallowing in poverty stricken slums all over the world? Is that the true meaning of compassion?

Religion is the perfect antithesis to *spiritual wisdom*. It effectively hinders you from achieving spiritual enlightenment. There is nothing in that ancient book, as it stands today, that tells you who you really are. All it has are countless mistranslations, exaggerated claims, truckloads of contradictions and deceitful promises.

The only utility might this book serves is the encoded message, i.e. when Ezekiel saw strange aerial crafts which tended to prove Giordano Bruno's theory of life everywhere which this church burnt him at the stake for.

The Brotherhood of the Snake emblem with the swastika cross and the Skull & Bones at the bottom. Below, a hidden snake reappears in Queen Elizabeth 1 painting.

fascist
emocracy
see
...if you can ~~keep~~ it.

Fasce (fascis) is an axe cloaked in a bundle of innocent & harmless looking sticks. This symbol signifies fascism or militarism of a state as popularized by both Hitler and Mussolini.

Why is it in the Official Seal of the United States? Why is it at the walls of US Senate? Why is it in the Knights of Columbus emblem?

*To fully understand how vast is the power of the Vatican Empire, please read the **Vatican Assassins** by Eric Jon Phelps for a very extensive accounts of the significant accomplishments of the Society of Jesus for the last 477+ years.*

US National Guard

Italian Fascist

42nd Military Police Brigade

18th Military Police Brigade

Knights of Columbus

Photos: http://en.wikipedia.org/wiki/Fasces

the art of LOGO DESIGN

Logo Design is one of the most interesting branches of graphical art with very useful function which is to greatly enhance and promote brand identify of an individual or groups, commercial organizations, governments, schools, banks, even churches...

The actual design uses different techniques & elements, and usually takes into account the character and mission of that entity to which it is design for. It seeks to answer the question, "what is this company all about?"

Here are some samples of how these ideas are incorporated into the final logo designs...

sometimes the design & **message** can be **blatant**...

the food and agriculture organization logo is fairly simple. it has monsanto's wheat symbol at the center and decorated with two words "fiat" and "panis" at the bottom which explain everything. the fiat dollar has no value, might be the fiat food as well. "panis" is the precise tagalog word for rotten.

this is a piece of work. the two vertical bars represent descending values of a graph. the lonely circle represents a human head. **litton bionetics** was involved in genetic experiments before the explosion of hiv-aids and cancer according to the author of "emerging viruses", dr. leonard horowitz.

these 3-some are icons of historical proportions. they are IG-FARBEN's legacy, the Zyklon-B supplier for the nazi gas chambers. the use of chemicals made extermination of the jews as efficient as killing cockroaches and other pests.

MAP & GRID

in the above logos (WHO, WB, UN), grids are successfully integrated, and fully encompassing the globe (map). grids look like a prison cell. will the whole planet be turned into a virtual prison cell by the very methods and policies these agencies may undertake during their entire existence?

BILDERBERG MEETING 2011

Suvretta House Hotel, St. Moritz, Switzerland

Conspiracy: Theory or Fact?

Others would argue that it would be hard for these people to conspire towards world domination. On the contrary, it's not impossible if the pie is properly divided by industries among its members, and not if their demise is equally assured once they fail to cooperate.

When two heads of state confer that would be a banner headline for most papers the next day. But when there are hundred more in one roof atop a mountain resort, suddenly the mainstream media news blackout can be deafening. Why?

The meeting's agenda is all about you that concerns them.

It's not a coincidence that Prince Bernhard of the Netherlands is a key figure in the establishment of the Bilderberg Group. He was an active card-carrying member of Hitler's Nazi SS and IG Farben industrial spy prior, during and after the war. He headed the notorious Khazarian Black Nobility.

This particular meeting was cut short due to the vigilance of alternative media and possible arrests of some of its high profile participants like Henry Kissinger.

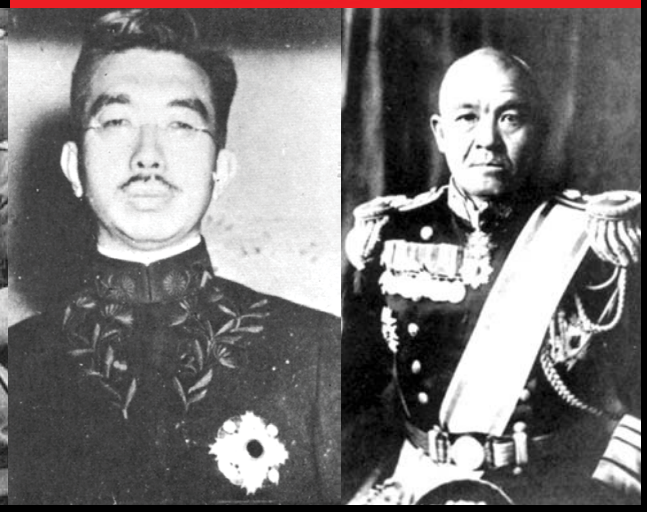
The Knight of Malta Cross, everybody has it except you...

These people belong to the same fraternity that have existed for thousands of years. Some of them pretend to work for you like Bob Geldoff of the LiveAid for Africa fame, and Bono of U2, but they are proud Knights of The Queen of England, a niece of Adolf Hitler according to MI6 sources.

The Knights of Malta are the Pope's militia ready to serve to the death...

Pope Ratzinger with 78th Grandmaster and Prince of the Sovereign Order of Malta Andrew Willoughby Ninian Bertie, cousin of Queen Elizabeth.

Gehlen and other Nazi officers were wearing the Maltese Cross, too.



Both Japanese Emperor Hirohito and Vice Admiral Chuichi Nagumo, who bombed Pearl Harbor were wearing the Maltese Cross.

Queen Elizabeth's father, King George VI, was also Adolph Hitler's half-brother (not father as initially reported) according to Emily Elizabeth Catherine Josephine Mary Windsor-Cragg, [illegitimate] daughter of Edward VIII Duke of Windsor.

http://www.rense.com/general88/eliz.htm

Angela Merkel is said to be Hitler's daughter according to an MI6 information received by Benjamin Fulford.

"Hitler was born in 1889 five years before Edward VIII, when "Georgie" (Victoria's favorite) was 23, long before his marriage to May Teck. He was brought up and abused as the eldest son in Bavaria, and Kaiser Wilhelm, the idealist, was in touch with him. The Duke of Windsor met his older half-brother for the first time in Germany in 1937; however, I have a document that shows Hitler was an intel agent for the British in the 1920's, so he probably KNEW Wallis," she says.

royal bloodyline

Owl Shrine during daylight.

Owl Shrine during past initiations.

Bohemian Grove

PARTY CAPITAL FOR PAST & FUTURE PRESIDENTS

The Chosen Leaders of the World paying respect to their god, Moloch - the Holy Owl. They said to worship the owl because it sees everything even in total darkness. Major decisions that affect you and me are made here. The bizarre Pagan ritual of the Bohemian Grove "the Cremation of Care" ceremony is practiced by its members (all men), including both Presidents Bush, Bill Clinton, Ronald Reagan, Alan Greenspan, Richard M. Nixon, Jimmy Carter, Walter Cronkite, Colin Powell, and Henry Kissinger to name but a few. The meeting is held every July. It is purported that Obama and McCain visited Bohemian Grove in July of 2008. The owl can be seen in your one dollar bill.

www.jesus-is-savior.com/False Religions/Wicca & Witchcraft/bohemian_grove_exposed.htm

Bohemian Grovers Reagan and Nixon would later become the presidents of the corporate United States.

Summary

Although we barely scratch the surface, we take no pleasure in laying down the facts which emphasize that the problem of cancer, AIDS and all other diseases for that matter, are multifaceted and goes beyond the realm of medicine and the healthcare industry at large. But this is a necessary step so that the waiting and hoping for something that will never come will stop.

Cancer and AIDS research will bear no useful outcome because that is not the intention. Any curative solution is anathema to the very existence of the pharmaceutical industry doing the research. The higher the budget allocated for these research the bigger will be the motivation not to discontinue it.

We can forgive that business enterprise must not take measures that kill it. But what is grossly appalling was how those proven solutions which are the work of other entities outside the pharmaceutical industry have been deliberately suppressed.

When the power of the State are being used to suppressed significantly useful discoveries, our only option is to study these technologies and put the knowledge directly into the hands of its intended beneficiary - humanity, effectively bypassing the mainstream media which they have full control of. The power of the system that perpetuates this grandest of all schemes emanates from the people's faith to the matrix of institutions built against them. That faith resides in your mind. When this faith crumbles, by turning off that mental switch, that power is lost. This could only mean one thing - you are the final arbiter of how should the future be like. Your inaction is tantamount to a virtual mandate for the continuance of the Grand Sinister Agenda to eliminate you and the rest of the 5 billion or more inhabitants of this planet.

The information in the next chapters will guide you through the simple actions that you can do within the confines of your own home. These instructions, when fully understood and faithfully followed, will negate the necessity for buying antibiotics and vaccines which will only give you limited and sometimes detrimental results.

Healthcare freedom may still be alien for you now but not anymore in the days ahead. Once you have the knowledge, you will find yourself smiling at every mention of a *flu pandemic* or even an *Anthrax* attack. You will never be intimidated anymore.

Mr. Darwin, are we so ignorant as to allow your kind, the worst type of animals, to breed?

Further readings:

- The Body Electric
- The Venus Project
- Evidence of the Use of Pandemic Flu to Depopulate USA

LIFE SIMPLIFIED

4

Everything everywhere in Nature is a wave. This wave has a dual characteristic of being electric and magnetic at the same time, hence, it is aptly called as *electromagnetic wave*.

Our Electromagnetic World

We can see this generic character all around us: male and female, day and night, animate and inanimate, positive and negative, sunrise and sunset, clockwise and counter-clockwise, heat and cold, etc.

It is the nature of duality which makes this wave constantly in motion which defines another character as being the source of energy. An *electromagnetic wave* is energy and motion in itself. And this motion is in the manner described by **Viktor Schauberger**, the father of Nazi UFO program.

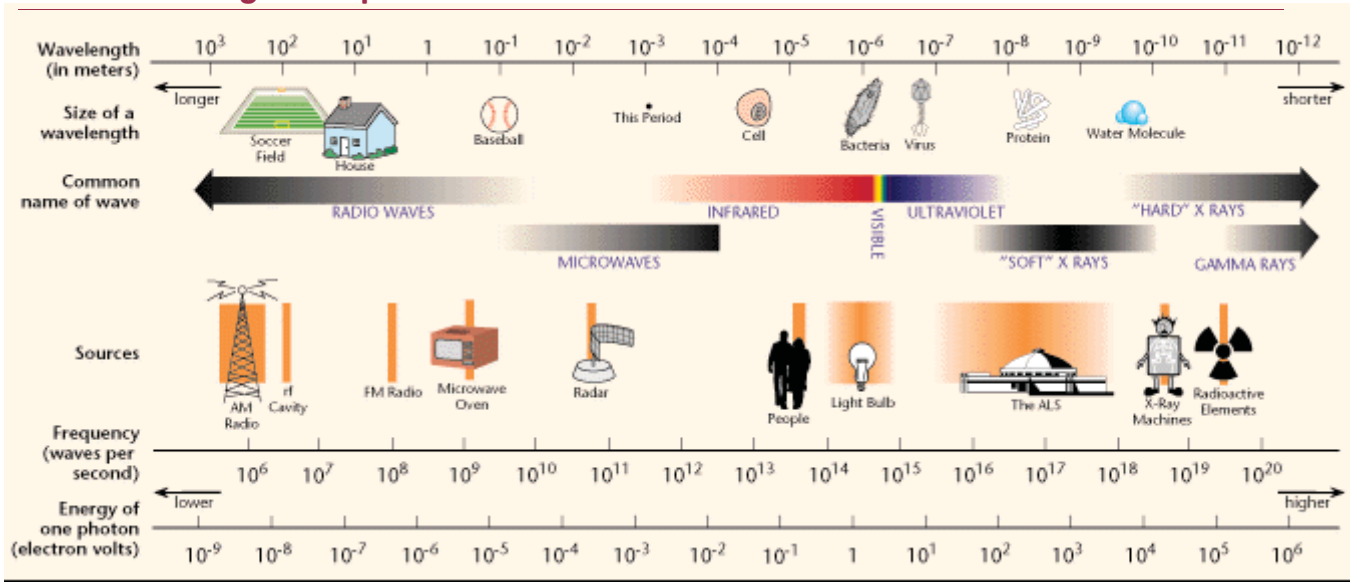
The perceptual difference of this wave as compared to water is that it is thinner, much thinner even that of a gas. Therefore, it is more fluid than gas. But then again, the difference only stems from the fact that they propagate at different frequencies, but they are still one and the same – electromagnetic wave.

Considering that everything we see and not see is energy in the form of wave in constant motion, we can only surmise that this is what life is really made of, i.e. energy is Life itself. And it is in fact and in truth.

How Matter is Formed?

To help you understand this fundamental truth, picture yourself in front of a piano. Now, press one key on its keyboard and listen to just that one tune. Each key represents a note on the musical scale. Each note represents a single frequency or *rate of vibrations*. Here now is the best part: consider the keyboard on the piano as the *periodic table of elements* in your grade school chemistry class, where each key represents a particular element (e.g. carbon, oxygen, hydrogen).

The Electromagnetic Spectrum



Every element is propagating in space with one fundamental frequency, the algebraic sum of its component frequencies (e.g. electron, proton, neutron)

Nature forms a *molecule* much like a musician forms a *chord* in a piano. Forming a chord in a piano is just a matter of combining two or more harmonizing notes or frequencies together. When two or more frequencies perfectly harmonize each other, then we have found a chord. Likewise, when two or more elements whose frequencies synchronize perfectly we have achieved a *chemical bond* and a molecule is formed.

Although, the piano cannot possibly accommodate all frequencies in the electromagnetic spectrum for it is infinite, this illustration bears direct correlation to the fundamental principle governing all formations or transformations of electromagnetic wave we have come to know as matter. And if you do care to ask how many musical scores have already been made out of only eight major chords in the musical scale, it may consume your days finding the right answer.

You will have a complete grasp in this concept by studying the works of **Viktor Schauberger** and **Marko Rodin**.

However, not all of these waves are perceivable for our senses have only a limited *bandwidth*.

http://www.lbl.gov/MicroWorlds/ALSTool/EMSpec/EMSpec2.html

What Determines Reality?

Our senses and thoughts which influence and dictate our conception of reality, are also made up of this same invisible electromagnetic medium. Only those frequencies that synchronizes perfectly with our own will we be able to detect them or have a *locked in*.

Now, think of that set of frequencies which we can perceive, that which defines our reality, as our domain. How many sets of realities or domains would you think are out there beside, or in here existing in parallel with, our own?

The Electromagnetic You

Now that we understand how matter is formed, and how our own capacity to perceive determines our definition of reality, we are more than ready to dig deeper into how our own body and everything in it behaves.

The basic building block of the human body is the *cell*. It is in fact the basic unit of all lifeforms (i.e. flora and fauna), the smallest thing than can be classified as living.

This basic unit of life is itself self-contained and composed of proteins, amino acids and other substances which, we should not forget are all composed of the generic electromagnetic wave. It is capable of taking in nutrients, waste removal, replication and warding off parasites for its own survival.

Every cell has predefined function depending on which it is a part of. A cell can be part of a tissue which in turn is part of an organ. They know exactly where they are, do what needed to be done and can coordinate with what other immediate cells are doing. Simply put, cells are versatile, intelligent and team workers. They can easily adapt to their own environment, subject only to certain limitations as indicated in the next chapter.

Consequently, the human body as a whole is autonomously efficient; it is capable of regulating all its biological activities including the proper synthesizing of nutrients for energy conversion and muscular buildup, waste removal, parasitic immunity and regeneration or healing.

Any cellular malfunction anywhere affects the entire body. No need to worry, autoimmune response is reliable and works 24 hours without rest. These auto-defense and auto-

repair mechanisms are all electrical in nature. And so are the brainwaves and feedback mechanisms (e.g. pain).

"The [heart] pump hypothesis is not complete, as it does not account for the differing amounts of sodium in relation to potassium going in and out of the cell…"

- Panos Pappas, Ph.D.

… sodium can be transmuted into potassium with the addition of oxygen and…electrical energy!

- Louis Kervran and George Ohsawa

White cells (leukocytes) kill bacteria and pathogenic fungus by electrocuting them.

- Science & Vie

The sheaths surrounding the nerves are not merely insulation as described in established biology but are 'real wire' that reach into each area of the body to create a normal electrical environment around each cell, or a stimulatory one when healing growth is needed.

…those embarrassing little oddities that the chemical-mechanistic theory could not explain are beginning to be understood by…this new paradigm.

- Dr. Robert O. Becker

Normal untreated blood can only survive for 4 days in a microscope cover slide. Electrified blood, on the other hand, can survive for 57 days (or longer), under the same condition.

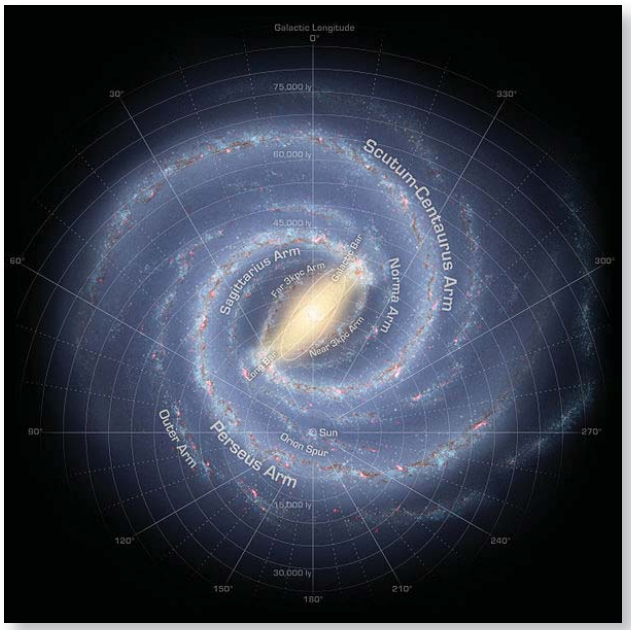
- Dr. Robert C. Beck. DSc.

This capacity to feed, defend and perform specific task has something to do with the generic nature of duality inherent in these waves – that of being electrical and magnetic at the same time.

Electrical, chemical, biological, and even psychological reactions are all electromagnetic in nature.

In fact, all activities in nature are either motion of repulsion or attraction which may manifest into a *spiral rotation*. This is very evident in the shape and form of our galaxy, as well as the humble sea shells.

Having these very intelligent alternative views in the background is very useful in our review of the basic functions of specific organs and systems of our body. Bear in mind that whenever the discussion connotes *biochemical* reaction, it always is an electrical activity in its truest sense.



We have done this in grade school. Now is the best and useful time to review them. Understanding basic bodily functions and the organs that perform them is critical to effectively deliver the treatments you are about to learn.

It has become a standard practice to divide the human body into specific systems through its perceive functions. Yet this same method hinders one from understanding that the whole body is more than the sum of its parts. So as we proceed with our study of these systems bear in mind that we are only doing this system by system dissection to simplify the discussion.

Each anatomic system is a collection of organs performing a unified function. Each organ is a collection of tissues. A tissue is a collection of cells. And a cell is the basic unit of life - an autonomous microsystem in its own right.

SKELETAL SYSTEM

It is a strong and resistant structure made up of bones and supporting ligaments and cartilage. *Ligaments* are tough bands of semi-elastic tissues made up of fibrous protein known as *collagen* which holds two bones together to form a joint. *Cartilage* is much like a bone but softer and flexible as is found at the tip of the nose and outer ear.

Calcium and phosphorous are major substances that give the bones rigidity. Collagen provides flexibility. Bones can withstand as much as 450 kilograms of pressure, but don't compare them with *rebars* because these are made of living breathing cells.

The most important function of this system is to provide the basic form of the human body and the protection of the internal organs. Another very critical function of this bony structure is that one perform by the bone marrow. The bone marrow, a fatty substance that fills its

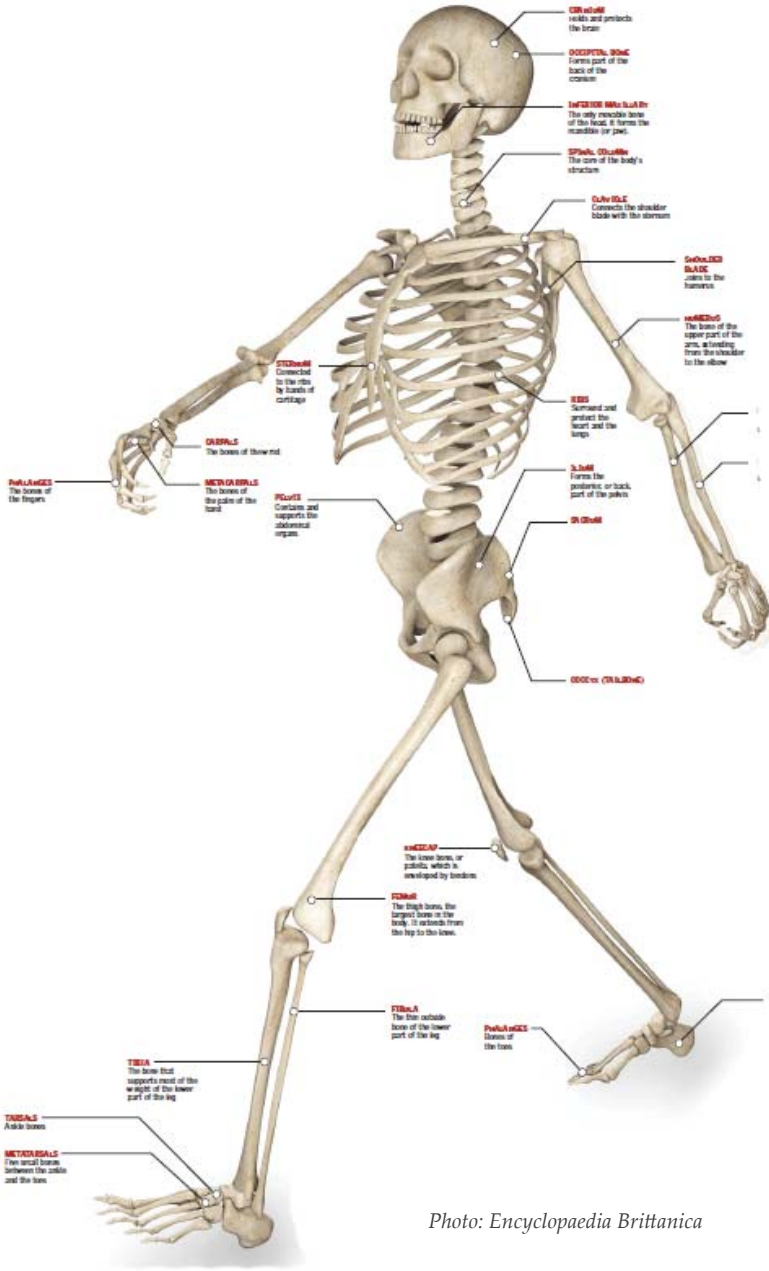


Photo: Encyclopaedia Brittanica

central cavities, produces red blood cells or *erythrocytes*, the oxygen carrier component of the blood. If parasites populate in these areas may led to *leukemia* - cancer of the blood.

MUSCULAR SYSTEM

The muscular system provides the final form of the human body. Muscles can be dictated to move while others are virtually autonomous or simply reacts to chemical/electrical stimulus (e.g. heart, stomach). Muscles regenerate and reinforce itself in direct proportion to actual stress it experienced.

CIRCULATORY SYSTEM

This system delivers or circulates the blood to and from the different organs of the body. Oxygenated blood from the lungs is pumped by the heart through the arteries, then to the organs via intricate network of capillaries, and consequently retrieved through the veins and oxygenated again by the lungs. During its return trip, the blood may be carrying with it wastes materials (i.e. dead cells, parasites, toxins, etc.) which must be filtered through the kidneys and liver.

The total length of the blood vessels is about 100,000 kilometers (98% capillaries). The heart beats about 70 times per minute and pumps 8,000 liters per day. During strenuous workout, heart beat increases autonomously to increase oxygen supply to the cells and to expedite removal of dead or expended cells.

Daily production (1unit = 1 million) of red cells is about 200,000 units, white blood cells 10,000 units and platelets are at 400,000 units. One cubic milliliter ($1ml^3$) contains 4 to 6 million red blood cells, 4,500 to 11,000 white blood cells and 140,000 to 400,000 platelets. Normal blood pH is 7.40 (i.e. slightly alkaline).

Red and white blood cells and platelets make up 45% of the blood. The rest is plasma, a fluid made up of 90% water, 8% protein, 2% assorted substances: salts, nutrients, amino acid, fats, and waste.

This high percentage of water should

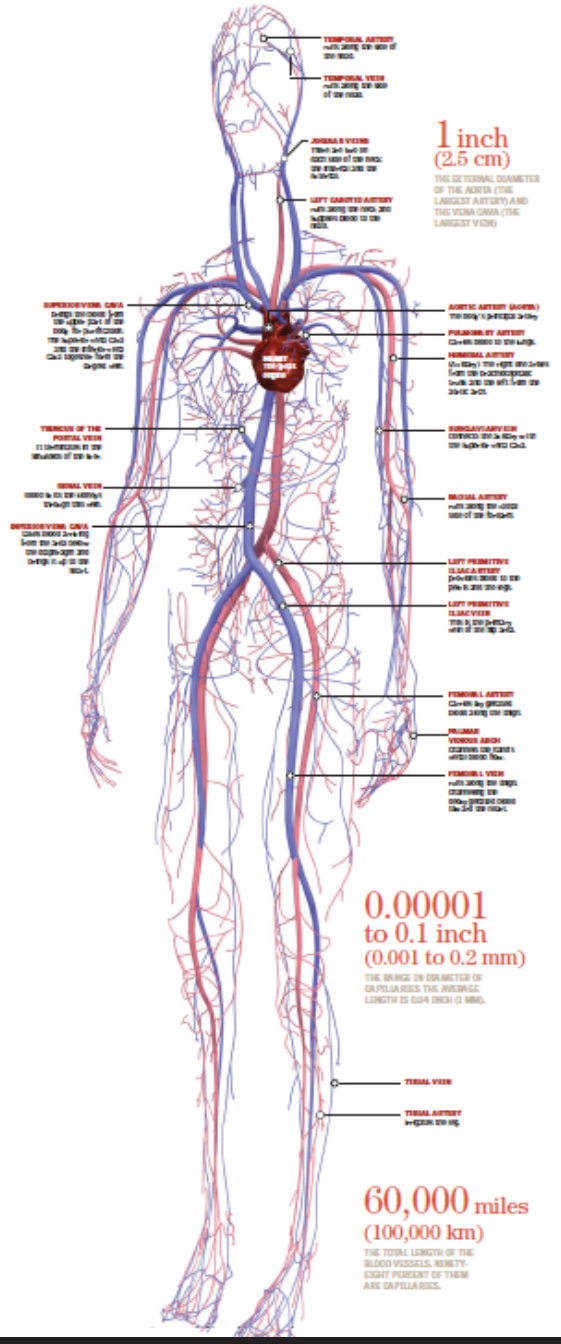


Photo: Encyclopaedia Brittanica

underscore the fact of its humongous importance that maintenance thereof is of paramount. And if you consider the fact that each component of water has very distinct characteristics, i.e. hydrogen is explosive and oxygen facilitates burning, then you will get the idea that water is perhaps the origin of heat within the body and of life itself.

Another very interesting fact about the heart is that it rarely develop cancer. Why? Because the heart enjoys very freshly oxygenized blood directly from the lungs - one more proof about the theory that when oxygen is adequate massive cellular deterioration like cancer can be avoided.

NERVOUS SYSTEM

The nervous system is the data infrastructure and processing center of the human body. It's the most intricate and complex of all systems of human anatomy. It coordinates all biological (electrical) activities within and in some aspect even outside, the body. Basically, it's what makes us who we are.

The *brain,* our main data processor, contains 100 billion neurons during infancy. Each neuron is connected to several thousands of other neurons, and exchange electrical signals at the speed of 225 miles per hour. This made it possible for us to calculate, decide, think and remember data stored some time ago. It has also been found that an average of only 3.5% of our brain power are actually being used until the day we expire.

Both eyes and ears are connected directly to the brain. The brain connects itself into all complex networks of sensory cells of the body through the spinal cord. If this cord is compromised, communication to and from these lower extremities are affected and may result to paralysis.

When skin, the largest organ of the body, experience pain the nervous system reacts accordingly, e.g. muscular response against extreme heat or healing instructions for injuries.

There are certain activities that are already predefined and are part of its auto-response mechanism. Respiration and blood circulation are great examples of these preprogrammed activities. Our immune system is also working

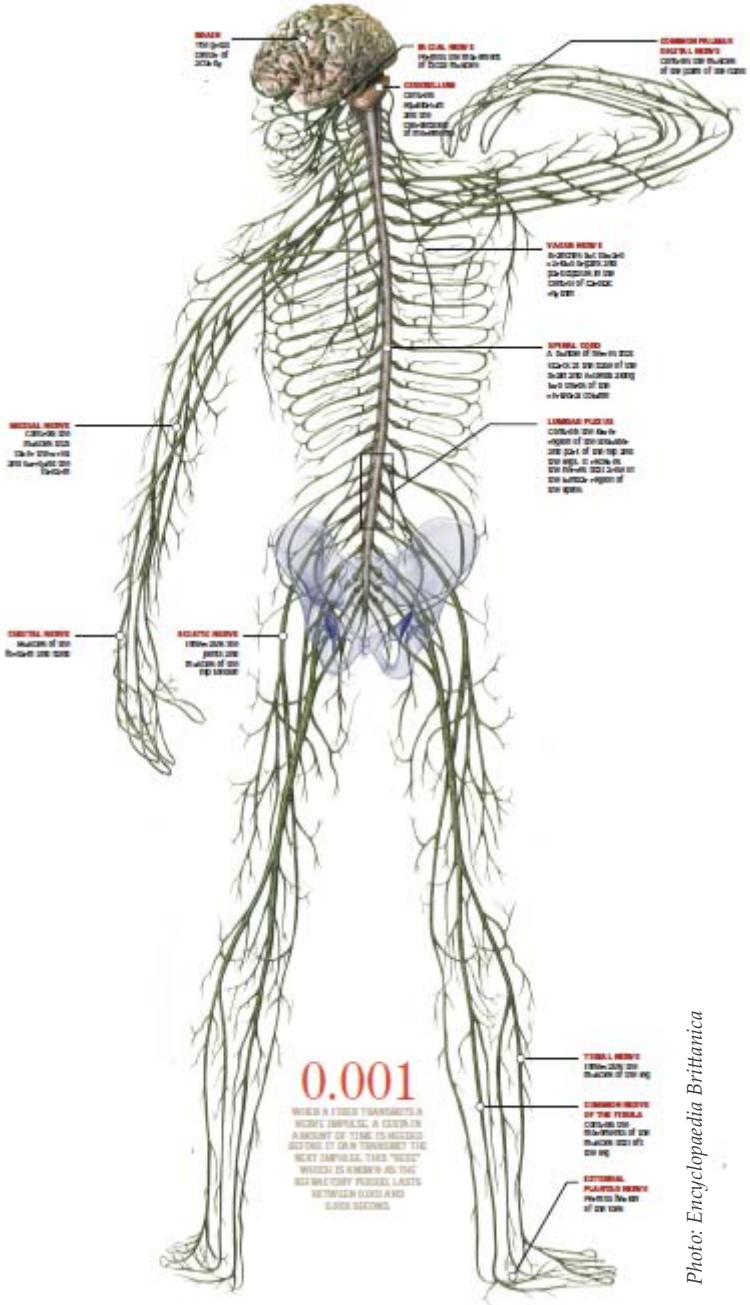


Photo: Encyclopaedia Brittanica

all the time without our consciously giving instructions to or knowing exactly how it does its critical work of defending the entire body from parasitic infections.

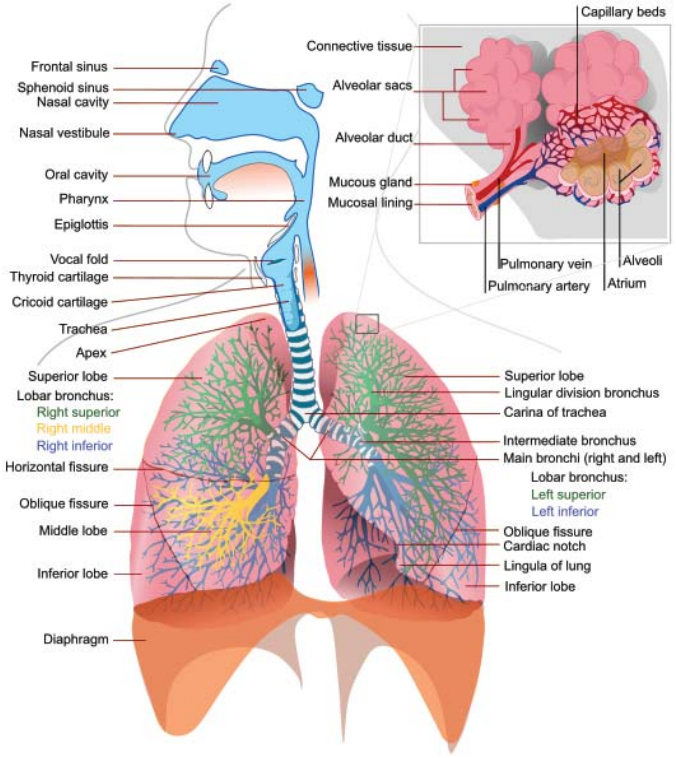
Toxic chemicals like fluoride, mercury, and chlorine can accumulate over the years which may cause the brain to slow down, or worst, Alzheimer's disease. The allowed safe levels of these toxins do not consider the fact that they can accumulate but rather on the flimsy assumption that they can be flushed out from the system naturally. If err we must, it is most sensible to do it on the side of caution.

RESPIRATORY SYSTEM

This system is responsible for oxygen intake and carbon dioxide discharges. lungs oxygenate the blood after removing carbon dioxide and feed the same to the heart for proper distribution.

While raw air is entering thru the nose it is then heated and filtered through a system of hairs distributed all throughout the path leading to the lungs. Any pollutants trapped on these filters are then cough out in a sticky fluid called *phlegm*. The production of phlegm should never be attenuated, but rather enhanced naturally by drinking plenty of water to increase its volume and decrease its viscosity for easy disposal and faster removal of toxins. Swimming in seawater greatly enhances breathing when having a dry cough.

Over time, parasites can accumulate in the lungs causing respiratory disorders which can lead to *tuberculosis* and cancer. Proximity to wild animals and even pets can introduce worms into the lungs which can populate in high numbers and cause *asthma*. In these conditions, it's not enough that we rely on phlegm to remove active pollutants. We need to directly neutralize the parasites that's causing the infection.



http://en.wikipedia.org/wiki/File:Respiratory_system_complete_en.svg

DIGESTIVE SYSTEM

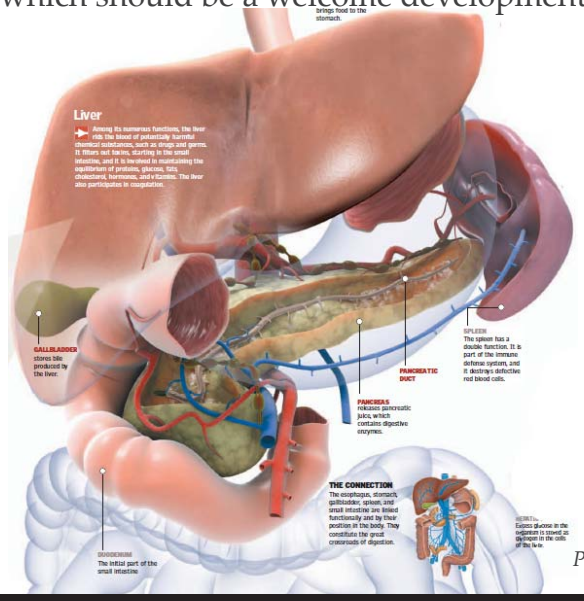
The digestive system is basically the fuel system of the body. First, food (raw fuel)

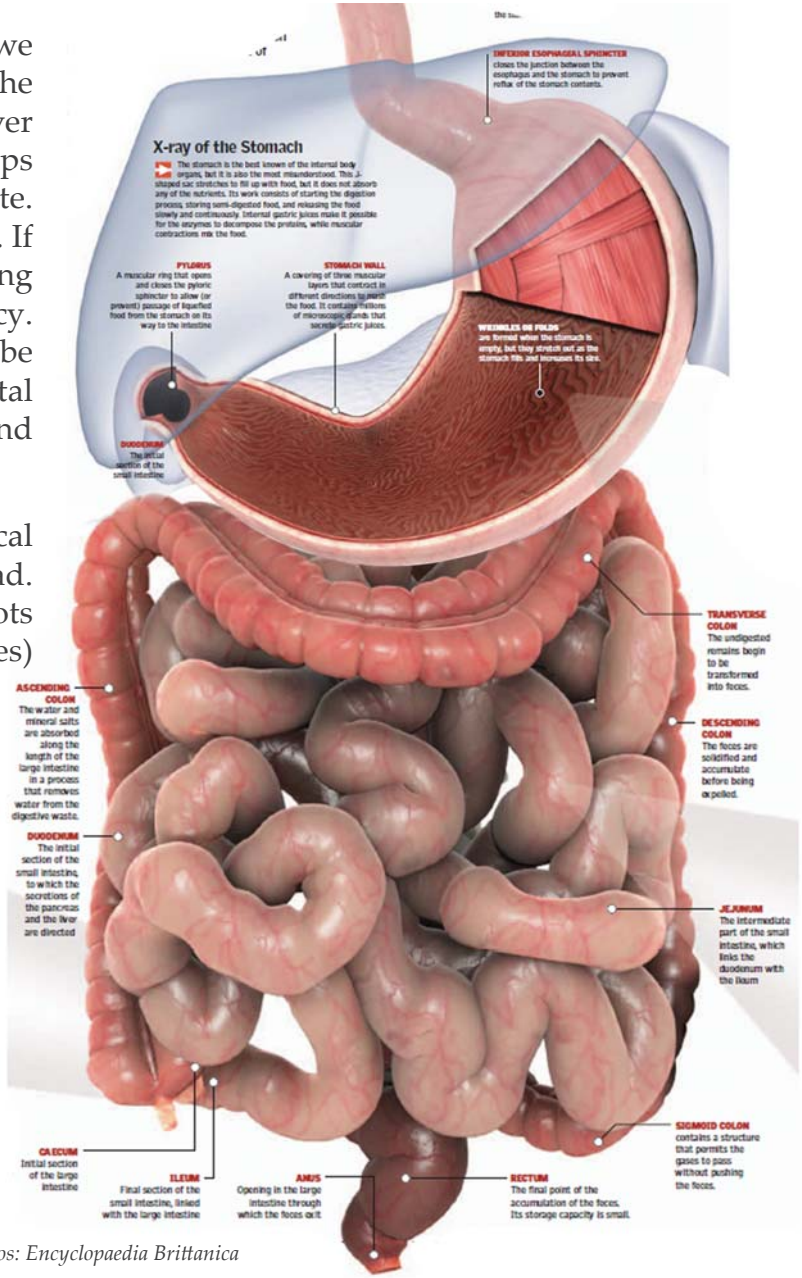
is ingested through the mouth which is the inport, and then food is predigested by the teeth and goes down through the esophagus via muscular movement called *peristalsis*. The next stop is the stomach which contains gastric juices and enzymes that reacts with the food for the next three hours. The stomach then gradually releases this creamy mixture into the small intestine for another three hours where the nutrients are absorbed. A watery, mostly undigested, or rejected waste materials arrive at the large intestine where water is absorbed and the rest are discharged as feces in about fourteen hours or so.

The digestive system is the most vulnerable entry point for parasites and chemicals. Worms can find themselves into the stomach and cause *gastric ulcer*. It may then proceed to the liver to cause *hepatitis* or the pancreas to inflect *diabetes*. The same worm my find itself colonizing the lungs and causes *asthma*. Or, if you are not discharging your fecal matter regularly (daily), then the same worm could colonize the large intestine and causes *colon cancer*. Same parasites infecting different organs, different diagnosis requiring different specialists. We can minimize this vulnerability through proper hygiene. Proper hygiene does not require the use of toxic chemicals.

Some signs that we can use to detect that we are not digesting properly is the color of the feces. One of several functions of our liver is to produce *bile*, a greenish juice that helps in the proper digestion of the food we ate. Normal feces should have a greenish shade. If it's not then the liver might not be producing enough bile. Another sign is consistency. If it's unusually hard, then you may not be taking in enough water which is detrimental to the proper functioning of both the liver and kidneys.

When undergoing eTherapy, your fecal matter could turn black and smells really bad. These indicate that you are discharging lots of *biological garbage* (i.e. neutralized parasites) which should be a welcome development.





Photos: Encyclopaedia Brittanica

URINARY SYSTEM

This system regulates the amount of water in the body and maintains the balance between water and all other chemicals in the body in a condition called *homeostasis*. The primary organs within this system are the *kidneys*, *ureters*, *bladder* and the *urethra*. The kidneys filter the blood and secrete urine to carry the wastes to the ureter. From the ureter, urine proceeds to the bladder where it is temporarily stored until excreted through the urethra.

Clean blood exits through the renal vein and returns to the heart. Blood filtering is one function which both the kidneys and the liver shares. Hence, when the liver is unable to function normally, the kidneys must be overloaded with toxins and may eventually "wear off". Toxin overloading and parasitic infection are two factors that can damage the kidneys. If both kidneys malfunction, the lymphatic system will attempt to get rid of the toxins by pushing them out through the skin pores.

We can help our kidneys and liver perform their functions of filtering toxins out by adequate water intake.

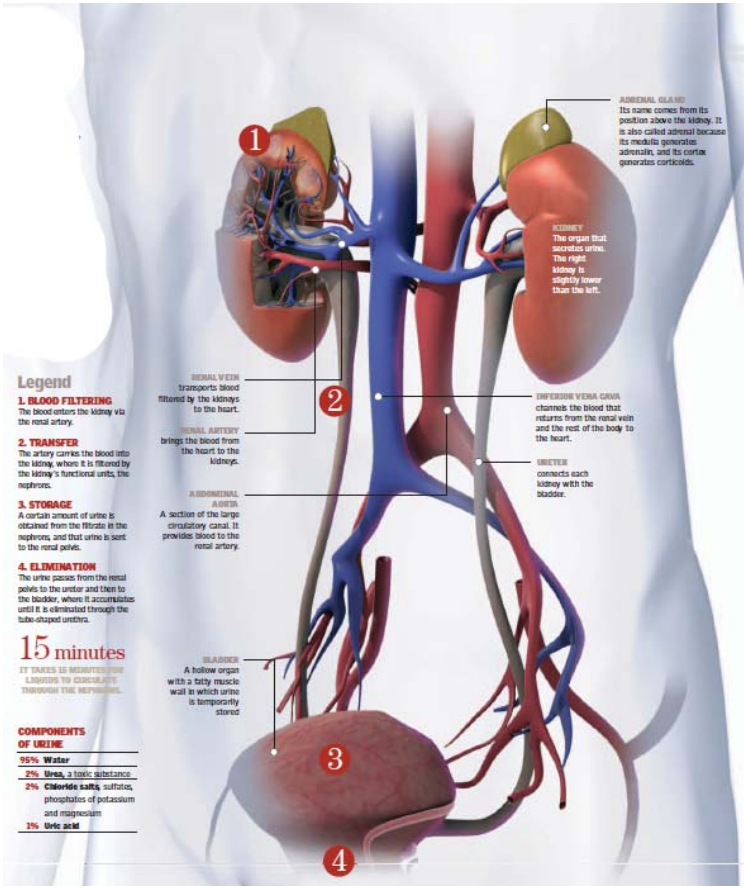


Photo: Encyclopaedia Brittanica

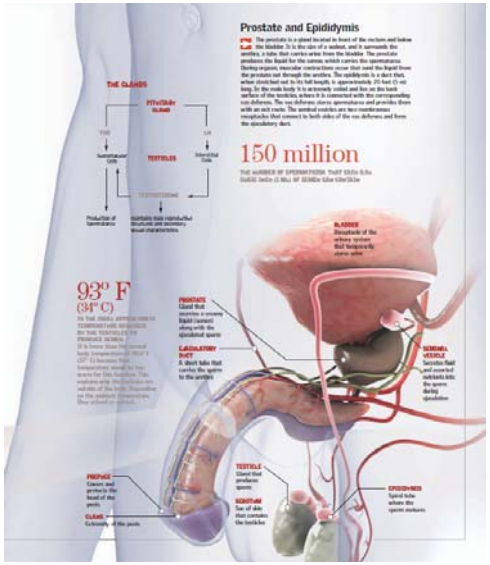
ENDOCRINE SYSTEM

The endocrine system is consists of the pituitary gland (hypophysis), the thyroid, parathyroid, pancreas, ovaries, testicles, adrenals, pineal, and hypothalamus. The pituitary gland controls all other glands within this system in the production of about 50 specific hormones into the blood. These hormones stimulate various organs, control reproduction, metabolism and development. These hormones control many of our body's processes including sexual activity:

- Growth hormone [GH]
- LH Luteinizing hormone excites the production of testosterone which regulate male sexuality and estrogen hormones which regulate female sexuality, mammary glands and menstrual cycle. Estrogen production increases during puberty.
- MSH stimulates the melanocyte of the skin.
- ADH antidiuretic hormone

- PRL prolactin; stimulates milk production
- Oxytocin stimulates the release of milk by the mother, as well as the contractions needed during labor. This hormone also influences basic functions such as feeling love, orgasm, birth, breastfeeding, and enhances affection..
- Adrenocorticotropin hormone [ACTH] goes to the adrenal gland to produce antistress hormone cortisol.
- TSH hormone stimulates the thyroid to produce the thyroid hormones which influence metabolism, energy, and the nervous system.

Parasitic infections of any of these organs surely affect the overall well-being of an individual. It alters the mood, the motivation or drive to accomplish certain tasks.



REPRODUCTIVE SYSTEM

There are two types of reproductive system, male and female. The male reproductive system is consists of two testicles and the penis. The testicles manufacture spermatozoa which bears genetic information for the subsequent fertilization of the ovum. Sperms are delivered through the ejection of liquid called semen from the penis during intercourse. There are about 150 million spermatozoa in a milliliter of semen a healthy male produces.

The internal organs of the female reproductive system are the vagina, the uterus, the ovaries, and the fallopian tubes. These organs are arranged so as to allow the successful fertilization of the ovum by a single spermatozoon. Under normal circumstance, the whole reproductive activity is characterized with extreme pleasure that is absolutely incomparable.

Recent findings indicated the life cycle of male spermatozoa is between 42 to 76 days from production to ejaculation (maturity).

Parasitic infection in the reproductive system literally consumes these eggs and reduces the chance of successful reproduction. Infertility is not a hopeless case. Elimination of the parasites and the toxins that precedes them may reclaim it. The only logical way to eliminate parasites and toxic chemicals is not the use of another toxic drugs but the precise application of electrical energy and proper detoxification.

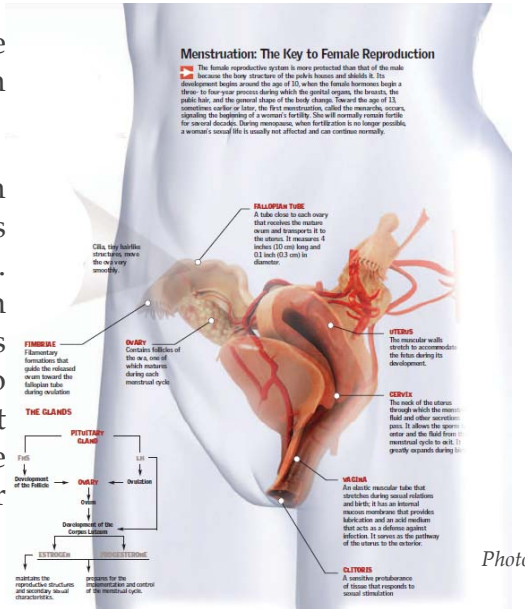


Photo: Encyclopaedia Brittanica

LYMPHATIC SYSTEM

Performs two critical functions of parasitic defense and helps in the proper delivery of liquid and matter via the circulation of the lymph from the interstices of the tissue and from the digestive apparatus to the blood. *Lymph* is a fluid consisting of 3 to 4 quarts of the liquid circulating within the system and contains cells called *lymphocytes* and macrophages that are critical component of the immune system.

Lymph nodes which literally act as "parasite processing centers" are distributed around the body. You will only notice them when they are inflamed due to high parasitic concentration which is sometimes followed by having a fever. Fever is the body's natural mechanism to fight off infections and should never be suppressed with *paracetamol*. Body heat should only be regulated through regular cool baths to prevent convulsion.

Toxins which are not properly flushed out of the system due to liver or kidney overloading are pushed out though the skin by the lymphatic system as the last resort to protect the body.

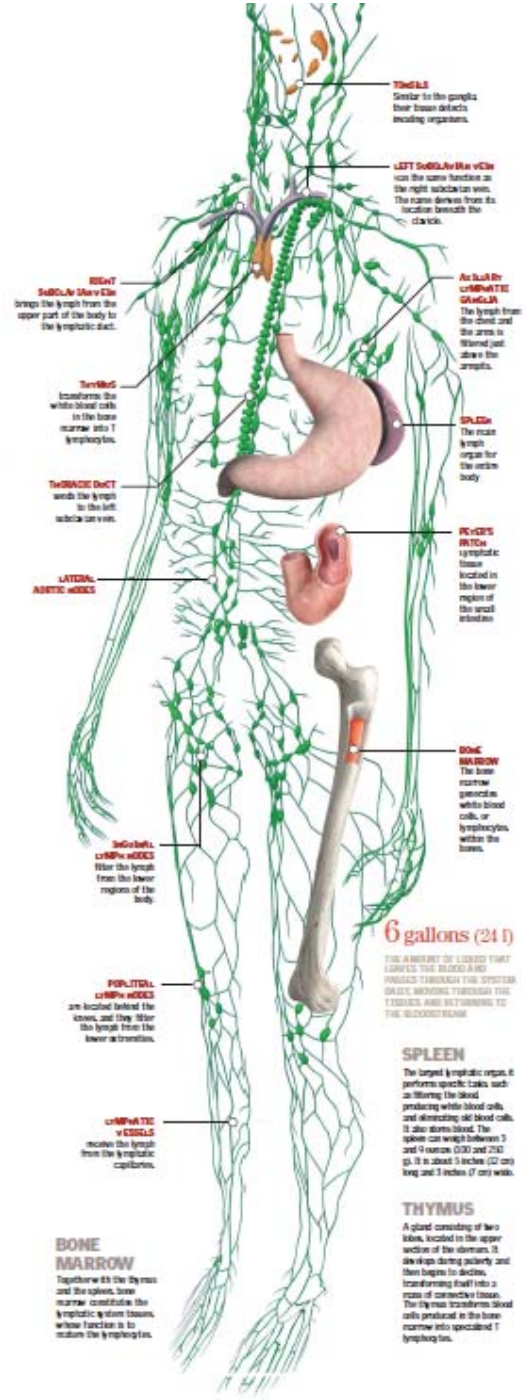


Photo: Encyclopaedia Brittanica

There are only two general causes of all disease: *toxic chemicals* and *parasites*. Toxic chemicals can be in the form of heavy metals, alcohol, acids, formaldehyde, antibiotics, radioactive substances, fluoride, etc. A parasite can be a microbe, pathogen, fungus, bacteria, virus, or any alien organisms or lifeforms that should not be inside the body.

I found it very disturbing when I realized that those that we've considered as safe for consumption are actually laden with poison. Most, if not all, products in our grocery stores today, those that are wrapped with colorful designs to fool the senses, contain at least one or two harmful chemicals, most of which are not even declared as ingredients. They are there because they passed the legally allowable amount as if we are only going to consume these products once in our lifetime.

Back in our homes, we are all exposed to these "legal toxins": chlorine and fluoride via our drinking water and toothpaste; Freon from the refrigerator; mercury from fluorescent lights.; laundry detergents and bath soap; women's lipstick, and; countless other products. These are the root causes of our illnesses, yet these are not suppressed. But those that are very useful and safe are banned and maligned.

Take the case of one of the most useful and versatile plant previously called hemp but now scorned as marijuana. For thousands of years this fast growing plant have been found to have medicinal effects aside from being a natural relaxant. About 20,000 hemp applications have also been identified in the industry including paper, rope, car parts, and textile.

Blaming the Innocent

Fallacy is the widely accepted notion that *age progression* has something to do with looking old, i.e. wrinkles and outright baldness. It is the years of chemical and parasitic accumulation that finally defeated the hardworking liver, kidneys and the immune system which deprived these tissues much needed nourishments, and not the age itself for it is

just a mere number without any biological interest.

My great grandmother reached 125 years old before she died in the 70s, and much longer with others before her. So was the "first man" in the bible who reached 930 years!

It is not too remote a possibility to have longer lifespans if endeavor we must be. All we need doing is learn all we can from Mother Nature.

Nature is Trying to Teach Us

There are far more species that have lived far longer than humans - the trees in some unravaged forests. Both flora and fauna have derived their lives from the same source. They may look different physically but they sure are essentially the same – living species. Why is it then impossible for man to live longer as the trees?

Is it the food we eat? Is it the air we breathe? Is it the long hours of work, psychological stress? Or, all of the above?

My research on *permaculture* taught me the cause by which the forest can survive much better without human intervention. All the trees and plants there are living symbiotically, i.e. they complement each other rather than being antagonistic. They literally share resources and skills. They fertilize by themselves. They don't have access to pesticides, yet they haven't succumbed to any parasitic attacks. They have collectively and effectively become resistant to these parasitic intrusions by letting their own immune system do defensive work and due to the perfectly balanced conditions they're in which they themselves made. This is their secret to having a significantly long lifespan.

We can do the same by refusing to take in more toxic chemicals from this day forth; by neutralizing every parasite that is already inside our body using the non-drug methods that are just pages away; and by working together as one species in spite of the difference in color.

Nature is the best university we can get our best education from. It is where real Science is taught and learned. It is where lies could not stand, and deceptions are frustrated. It is where logic and principles intercourse endlessly with beauty. Study and learn from her, and you will find Wisdom.

The Consequence of Longer Lifespan

The prevailing argument against longer lifespan is population explosion. The longer the person lives the greater the opportunity for procreation. The other argument in favor of longer lifespan is that it reduces the motivation for the preservation of the family name and would result to lesser urge to breed more.

However, what is not so obvious is the normal consequence of having longer lifespans – greater time for the accumulation of knowledge.

Our level of thinking will certainly soar to greater heights if we have more time doing it. Humanity will not keep on reeducating itself in such short cycles. There will be a continuous buildup of awareness such that we may never find it amusing anymore seeing the same clowns play their scripted part of lying to their teeth over and over again.

That we may seek to find better understanding of who and what we really are, and what this world is really all about. That we may learn we are far something more than what we've been told. That *spirituality* is just the deeper understanding of oneself, and has nothing to do with deity worship; *divinity*, the deeper appreciation of the existence of another. That we are all godly and together we must exercise that greater responsibility of preserving Life itself.

Is this the kind of realization they are afraid of? Is this the real reasons why our kids must suffer from *autism* through mandatory vaccinations in its desire to deliver mercury to the brain cells at an early age? Is this the rationale why we must have cancer and AIDS? Is this the real motivation why multibillion funded research are always designed to fail instead of finding the cure?

One of the best examples to illustrate the above viewpoint is the recent monumental work of **David Wilcock**. This guy spent most of his life pondering what this is all about. He summarized his life's work in his recent book *"The Source Field Investigations"* which is already a hit. He made a very strong case for the *pineal gland* as being the sixth sense or the *third eye* for those who have not yet calcified theirs with fluoride. If this guy has already figured it out this early, how much more knowledge could he accumulate if he reaches 500 years into the future? We are just assuming here that he won't use his ability for *remote viewing*.

The pineal gland looks like a pine cone. Above is the largest pine cone on this planet and you can see it sitting at the dome of St. Peter's Basilica in Rome, with two Egyptian Phoenix.

Cancer is an aggravated cellular malfunction. It is the failure of the immune system to remove unhealthy or infected cells early on, such that a critical threshold has been reached that it can no longer cope with the exponential rate of parasitic replication and consequent cellular disintegration. When cells malfunction, it cannot defend itself from parasitic infection, and the whole organ can suffer. One malfunctioning organ can affect the entire body.

"In general, the cells of a multi-cellular organism are programmed for collaboration. Many diseases occur because the specialized cells fail to perform their assigned task. Cancer takes this malfunction one step further. Not only is there a failure of the cancer cell to maintain its specialized function, but it also strikes out on its own; the cancer cell competes to survive using natural mutability and natural selection to seek advantage over normal cells in a recapitulation of evolution."

- **Harrison's Principles of Medicine**

What Causes Cancer?

When cells are subjected to high level of acidity, they can't breathe sufficiently and may eventually die off.

"Deprive a cell 35% of its oxygen for 48 hours and it may become cancerous. Cancerous tissues are acidic, whereas healthy tissues are alkaline. Water splits into H+ and OH- ions, if there is an access of H+, it is acidic; if there is an access of OH- ions, then it is alkaline… the prime cause of cancer is oxygen deficiency (brought about by Toxemia.) "

- **Otto Warburg**

A parasite can be a microbe, pathogen, fungus, bacteria, virus, or any organisms or alien

"Normal untreated blood can only survive for 4 days in a microscope cover slide. Electrified blood, on the other hand, can survive for 57 days (or longer), under the same condition. Imagine what a virtually immortal blood can do where it matters."

- Dr. Robert C. Beck. DSc.

lifeforms that should not be inside the body.

Their carcasses become food for parasites coexisting nearby. When parasites are adequately fed, they can populate very rapidly. Parasite feces and other wastes also contain harmful chemicals which may contribute to increasing the levels of acidity. At this point, your immune system works double–time in order to get rid of increasing parasitic population and higher volume of toxic chemicals. A certain threshold will then be reached when parasitic infection is self-sustaining and cellular malfunction is uncontrollable. It is at this point when your liver and kidneys start to breakdown, and your immune system is rendered useless. This is now considered as cancerous, and according to Mainstream Medicine is *incurable*.

"In reality, it is not the bacteria themselves that produce the disease, but the chemical constituents of these microorganisms enacting upon the unbalanced cell metabolism of the human body that produces the disease. If the metabolism of the human body is perfectly balanced, it is susceptible to NO disease."

- **Dr. Royal Raymond Rife**

Human cell prefers oxygen, or it is *aerobic*. It also abhors high levels of acidity, heavy metals, and toxic chemicals. On the other hand, parasites prefer high level of acidity, thrive on heavy metals, and love toxic chemicals. Parasites are *anaerobic*.

Anxiety and other psychological stresses can also increase acidity levels. This is the reason why defeatist mindset easily catch cold. So stay positive. After all, you now have in your hands, the only guide you need to defeat all parasitic diseases including cancer and AIDS.

"Carcinogens were thought to be the cause of cancer. Actually, they drew the cancer to the organ. Nickel draws cancer to the prostate. Barium found in lipstick draws cancer to the breast. And so on."

Dr. Hulda Clark

However, another conclusion would shock the world of drug peddlers when it was found that...

"Cancer is a fungal infestation. Fungal tumor can easily be eliminated by using a 5% solution of baking soda..."

Dr. Tullio Simoncini

The Silver Lining

While they can't agree on what comes first, the toxic chemicals or the parasites, there is a clear borderline between our own cell characteristics and that of the parasites which can be used to our advantage in the fight against all diseases including cancer and AIDS.

Remember also that your own body have been healing all forms of injuries without any problem until your blood becomes dark in color due to a very high population of these parasites which interfere with the healing process.

In short, if we could remove the two general causes of any disease, we don't need to directly induce healing because the body knows exactly what it needs to do. All we need doing is to help the body remove these causes so that the limited energy is more concentrated on the healing rather than on the fighting. And knowing the limits and capacity of the liver and kidneys to cleanse the body from these toxins is the key to succeed in this regard.

And how do we actually do it?

That's the object of the next chapter using the guidelines in the following section.

Facts human cells

- ☑ aerobic - love oxygen
- ☑ hate high levels of acidity
- ☑ hate toxic chemicals
- ☑ hate heavy metals

Facts parasites

- ☑ anaerobic - hate oxygen
- ☑ love high levels of acidity
- ☑ love toxic chemicals
- ☑ love heavy metals

Self-Imposed Therapy Design Constraints

The human body is not designed to accept manmade chemicals and mechanical operations (transplants). Your body can focus on healing by itself when its immune system is not overloaded with toxins. This it does without you consciously giving precise instructions on what and how to do it, which would necessitate that you must study anatomy very extensively.

Your primary objective therefore is very simple, i.e. the complete removal of all toxins from the body; toxins that can be in the form of *toxic chemicals* and *parasites*.

When we contemplate for better solutions to defeat any disease, we must therefore limit ourselves to the following constraints:

- ☐ *non-invasive*
- ☐ *non-parasitic*
- ☐ *non-radioactive*
- ☐ *non-drug / non-chemotherapy*

To see how we can implement these ideas within the bounds of our seemingly impossible restrictions follow me through the next pages.




"Cancer is not as complex as we thought it to be."

"It's an oxygen depletion... a fungal infection... hyperacidity... caused by toxic chemicals and parasites..."

Dr. Otto Heinrich Warburg
Dr. Royal Raymond Rife
Dr. Hulda Regehr Clark
Dr. Tullio Simoncini

DEFEATING ALL DISEASE

Having fully understood the true nature and causes of cancer, and that of all other diseases, we should be more than ready to formulate a better strategy that should be more responsive to the problem at hand.

Practical Strategies

Taking proper nutrients and adequate rest are of course standard component for maintaining good health, and are especially important now that you are undergoing or about to undergo eTherapy.

To avoid and/or defeat most parasitic diseases, we need to make our body unfavorable to parasites, as suggested on the tables on the right.

The three-part ***Preliminary Steps*** can be done right away and should be enough in mild conditions, but in more severe or advanced cases, like cancer or AIDS, we may have to deal with the parasites directly and more aggressively. In such cases, none of the suggested routines within the ***Preliminary*** and ***Agressive Steps*** should be eliminated for whatever reasons.

If we do the entire protocol stipulated above, no parasite could ever recolonize, and there should be no disease of any severity could ever knock us down. We will only expire of old age and mishaps, but not of internal disease.

Along the way, we will enjoy life to the fullest. No worries, no anxieties, just pure well-being.

PRELIMINARY STEPS

1. Neutralize Acidity
2. Increase Oxygen Levels
3. Proper Detoxification

AGGRESSIVE STEPS

1. Parasite Neutralization
2. Preserving the Gains

Preliminary Steps

Neutralizing Acidity

In order to neutralize acidity we need to increase alkalinity and reduce acidic consumption. Another method is by simple dilution through increased water intake. The

Warning: There may be baking soda brands in the market that contain substances other than sodium bicarbonate, , e.g. aluminum. Please check carefully or inquire directly from the manufacturer.

only exception to our banning of acids is the mighty vitamin C or ascorbic acid, amino acids from red meat (e.g. salmon). No need to become vegetarian. Just avoid pre-processed foods and condiments.

We can increase alkalinity by drinking a glass of 5% solution of natural ***baking soda***, daily or as needed. Take this solution before breakfast and/or before supper. Never take it immediately after meal, it may disrupt proper digestion. You can determine if you have exceeded the 5% ratio already when you see precipitates at the bottom of your mixture.

You can monitor your blood pH level, if you want, thru blood lab tests. Normal arterial blood pH level is about 7.41 and venous blood is 7.37 pH. Below this mark, say 6.5 pH, can be disastrous.

There are hundreds of uses for baking soda, besides being a reliable fridge cleanser. You can use it to replace your fluoride-based toothpaste. Just don't use the abrasive powder for the long haul. Once your teeth whiten, shift to 5% baking soda solution, from time to time. It's wide spectrum antibacterial properties makes it good for mouthwash, too, and all other antiseptic needs including cleaning open wounds, and sore-eyes, etc. I always carry a baking soda spray as *hand sanitizer*.

More Than Just A Household Cleanser

Dr. Simoncini proved the anti-cancer properties of baking soda. He found out that, no bacteria can survive or become resistant to this humble household cleanser because of its molecular complexity (i.e. from the viewpoint of the parasite, baking soda is a very complicated substance it can't decipher its molecular structure hence it can't initiate any countermeasure in time). And best of all, it is completely natural and safe. In fact, your own *pancreas* is producing this vital substance to help in the proper synthesizing of the food you have eaten.

His advice is to subject the infected area, e.g. tumor, in direct contact with the 5% baking soda solution for as long as possible. Otherwise, the effect might be diminished.

I would not disagree if someone would say that this substance would be good for persons suffering from gastric ulcer, colon cancer, diabetes, kidney disorder, etc. Why? Because,

Verify anti-acidity

1. Try mixing baking soda (alkaline) into vinegar (acid) in equal proportion, and see the reaction.
2. Taste vinegar for sourness.
3. If it tastes like water then it is not acidic anymore.

Verify anti-bacterial

1. Try putting some baking soda powder in one of your armpits, say the right side.
2. Also, put some of your regular deodorant on your left armpit.
3. Observe for the whole day. Which one do you think is more effective?
4. Bacteria are the cause of most offensive odor. Bacteria propagate mostly on acidic environment. High acidity levels in a woman's vagina make it susceptible to bacterial infections causing it to produce a distinctively foul smell, and in severe cases, vaginitis. To deal with these, try our usual 5% baking soda solution as douche. Do this for a week or longer as necessary.

Warning: There may be baking soda brands in the market that contain substances other than sodium bicarbonate, , e.g. aluminum. Please check carefully or inquire directly from the manufacturer.

it's the dictate of common sense!

For gastric ulcer, oral administration might be sufficient. For colon cancer, baking soda can be administered as *enema*. For asthma, it can be used as nasal spray or thru *nebulizer*. Just use distilled water every time you make the solution.

(*Please refer to the Appendix Baking Soda Section for more uses of baking soda.)*

You are only limited by your own imagination. And need I say it significantly costs less?

This is a treatment that you can try now.

Dosage: 1 glass of 5% baking soda solution taken at least 30 minutes before breakfast. If taken after meal especially dinner, it might interfere with proper digestion, and sleep.

Increasing Oxygen Levels

You can increase your oxygen levels through regular workouts or daily exercise, and increased water intake. You can enhance the effects of these two routines by using an ozonizer to treat water prior to drinking.

An ***ozonizer*** is an electrical device that produces ozone on demand via high voltage plates. Ozone is triatomic oxygen, a volatile unstable molecule of pure oxygen. Ozone is produced in nature thru lightning. Ozone has wide spectrum antibacterial properties, and it oxidizes both pathogens and toxic chemicals. Oxygen destroys heavy metals, too. We see the oxidizing process of metal as *rusting*.

Considering that parasites are anaerobic, or cannot survive in high oxygen levels, isn't it common sense to use ozonizer to suffocate these undesirables?

If so, why not ozonize your water before taking it? And why not drink plenty of it in order to help the liver and kidneys in the detoxification or the removal of toxins from the body?

Indeed, with Common Sense we can go a long, long way. But wait, don't ever breath in ozone directly, it can irritate the lungs.

To use it, just connect one air hose (shorter) at the air inlet (front side of the unit) of the unit to the air dryer. Air dryer removes the moisture of the incoming air before it is converted into

A typical ozonizer with digital timer and volume adjustment knob, air dryer, silicon air hoses, and ceramic bubblers.

ozone to increase the volume. Connect the other air hose to the air outlet of the unit with the other end to any of the ceramic bubblers (dark gray).

Prepare a glass of water. Dip the bubbler into the water. You are now ready to ozonize the water. While the ozonizer is operating, stay at least 4 feet away from the bubbler to avoid irritating the lungs. This is critical especially for asthmatic individuals.

Depending on the rate of ozone production, it may take five (5) minutes to ozonize a glass of water. After which, you must consume your ozonized water within the first 5 minutes before the volatile ozone is gone! It's this volatility of the ozone that gives its power to neutralize or oxidize toxins into water and carbon dioxide. The escaping oxygen ions will readily attach to carbon and hydrogen, two elements which parasites may surely be composed of. Same thing happens with metals where they oxidizes upon oxygen contact. The end result is a clean, no residue outcome.

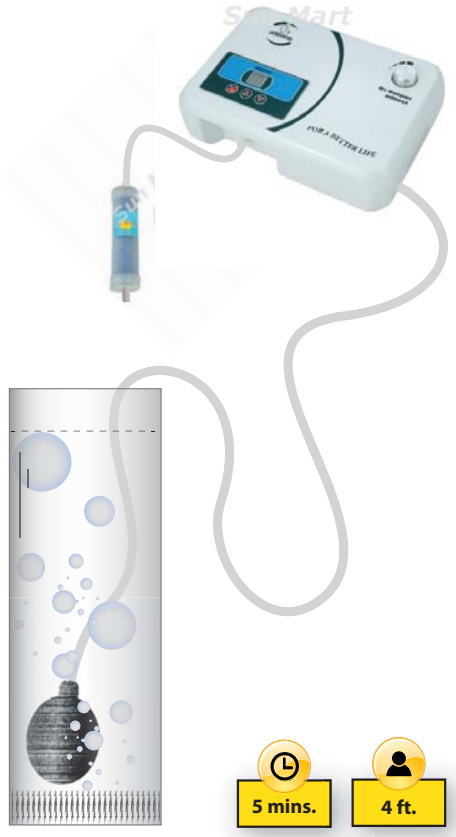
The object here is to send ozone anywhere in the body except the lungs. Just like any parasite we also have a limit to how much oxygen we can take. But our limit is so far greater than that of the parasite. It is this wide disparity that works to our advantage. We can suffocate them without suffocating us. The other advantage is that we can oxidize all toxins, be it toxic chemicals, heavy metals, or the parasite themselves.

Due to its utility, no home should be without this very useful appliance. A larger unit could be used to disinfect the living rooms, bedrooms, and best of all, the restrooms. It can also be used to remove pesticide residue and bacteria from fruits and vegetables. Just follow the same procedure as above, but only use a bigger container, more water, and longer exposure time, say 15-30 minutes.

The office could also benefit from this by eliminating the dangers related to nicotine.

The above unit only consumes about 20 watts. And since it has no moving parts except the near silent air pump, the unit could last for years. While a non-drug antibacterial can give you a truly progressive advantage, a non-consumable antiseptic can surely give you a lot savings!

Lest I forget, ozone, like baking soda, will not discriminate what type of parasites it must deal with. It suffocates them all!



Ozonizing a glass of water. This is a treatment that you can try within a week or two assuming you order one ozonizer unit now. Your liver and kidneys would surely be happy.

Dosage: *1 glass or more of Ozonated Water taken every waking hour. When ozonizing water, use tall and straight glass to introduce more ozone efficiently. Do not cover the glass. Stay at least 4 ft. away from bubbler.*

Proper Detoxification

You should have understood already that a very high volume of toxins can be expected from each treatment that are described in this book. This is due to the wide spectrum or non-discriminatory nature of these treatments. And this fact can force the body to detoxify rapidly than normal, resulting to a dangerous condition known as *Herxheimer Syndrome*. Proper and controlled detoxification is the complete removal of all toxins from the body prior to the next treatment session.

Let us emphasize that the toxins that will be produced are not newly introduced by the treatment. These are the same parasites that are already inside the body, but have been neutralized or deactivated or turned into a *microbiological garbage* due to all the antiparasitic measures you have taken. If these toxic garbage are to remain in the system, they can invite more parasites, and aggravate your condition by poisoning the cells and tissues as these biological garbage decompose.

Extreme danger is present when both the liver and kidneys are overloaded with these toxins which can lead to permanent organ damage.

Be aware, that those who are suffering of a particular ailment for a very long time, or is subjected to prolonged chemical or radiation treatments, may have their kidneys and liver affected already. Please, proceed carefully with all parasite neutralization treatments, and take this proper detoxification measures very seriously.

Detoxification will determine the overall success and failure of your treatment. And nobody else can do this for you, neither this writer nor this book.

Ideally, all toxins should be removed prior to the next treatment session. Any signs of detoxification failure must be corrected right away. Now is the best time to review *Signs of Detoxification Failure* Chapter 1 **Precautions**.

"The Herxheimer reaction occurs when large quantities of toxins are released into the body as bacteria (typically spirochetes) die during antibiotic treatment.

Typically the death of these bacteria and the associated release of endotoxins occurs faster than the body can remove the toxins. It is manifested by fever, chills, headache, myalgia (muscle pain), and exacerbation of skin lesions. The intensity of the reaction reflects the intensity of inflammation present."

- wikipedia

The next routines would be more aggressive as they involve the use of electric current which by nature does not discriminate or avoid any type of parasites. These routines neutralize all of them, and because of that the detoxification protocol must be followed faithfully. Otherwise, the outcome will be catastrophic and all other efforts would be rendered useless.

Aggressive Steps

These steps involve precise application of electric currents to neutralize any parasites flowing with the blood, infecting in any organs, colonizing what can be seen as *tumor*.

The importance of such treatments can be gleaned through the following facts:

- When the blood is totally freed from all types of parasites, which is what we can always expect if we have detoxified properly, the experts have found out that approximately more than 2000 *neuropeptides* would return including *interferon* which interfere the growth of cancer cells. One dose of human interferon may cost thousands, and you need about twelve doses. But with these treatments, your own body can produce this interferon and other neuropeptides for free!
- None of these treatments are invasive, radioactive and drug-based.
- The subject can perform these treatments anywhere due to its simplicity and portability.
- The costs of these treatments are staggeringly low, much lower than the cost of food you're eating.

Since these are the primary methods that you will be using against cancer, AIDS, and all other "incurable" diseases, and the need to construct actual electronic circuits that you will be using to deliver the treatments, this writer decided that the lengthy discussions should be on a separate chapter of their own. Rest assured though that such discussions assumed no technical background on your part.

Is there a Better Protocol?

In case you haven't notice already, our detoxification strategy is closely related to increasing cellular oxygen levels and the reduction of acidity levels. We have treatment protocols which perfectly complement each other.

The more regular your enema schedule, the cleaner will be your colon, and the better will the absorption of clean water and potassium be. The use of baking of soda during enema will also greatly enhance the alkalinity of your blood which no parasite could ever survive.

The more glasses of water you take in and absorbed by your hygienic colon, the greater the opportunity and success for ozone to be introduced internally. Every ozonized water you consumed will ease down the burden your liver and kidneys are subjected to during the entire duration of your therapy.

The greater the amount of ozone that will find its way into the blood, the higher will be the chance that parasites are neutralized, toxic chemicals oxidized and the earlier will your immune system recovers.

When blood is freed from all pathogens, 2000+ neuropeptides return including *interferon* which is responsible, among others, for interfering cancer cells growth.

There are certain countries, especially in Germany, where the use of ozone to defeat AIDS is gaining a very strong foothold for decades now. There was also one clinic in Cebu, Philippines, where Australians with HIV have been treated using ozone but was closed down after a year when agents from the immigration office were notified about its existence.

The persistent suppression against better methods of doing things is real.

Defeating all disease is possible through the application of Common Sense. In the next chapter, we will continue to use this useful mental faculty in our direct confrontation with the nano-sized enemies from within.

Further readings:

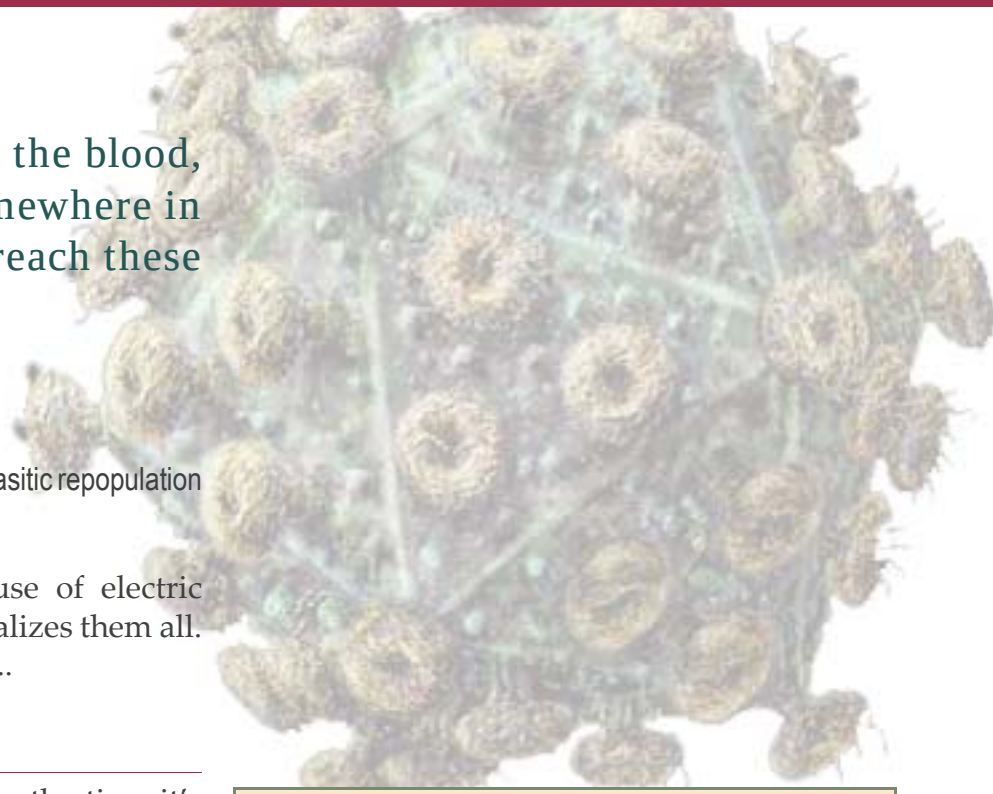
- Bio-Oxidative Therapies by FAST
- The Cure for All Disease - Hulda Clark

"Normally, blood oxidizes after 4 days in a microscope cover slide. But we've seen that an electrified blood could stay alive for at least 57 days outside the human body which led us to the phrase, Immortal Blood."

Dr. Robert C. Beck, DSc.

In furtherance to Bob Beck's wishes, here's a collection of his own ideas and that of others that can only find their true value and meaning within the bounds of an open mind.

NEUTRALIZING PARASITES



Parasites are everywhere inside the body. It is flowing with the blood, colonizing an organ, lurking in the bone morrow, and somewhere in between these deep recesses of the human body. We need to reach these parasites wherever exactly they are.

And this requires a multidimensional approach:

1. neutralize parasites in the blood
2. neutralize parasites in organs, lymphatic nodes
3. preserve the gains to avoid parasitic repopulation

Direct neutralization of the parasite non-invasively is possible through the use of electric microcurrent. Electric current will not discriminate any forms of parasites. It neutralizes them all. No bacteria will ever become resistant to electric current. And here's how to do it...

Neutralizing Blood Parasites

Common sense dictates that if you will use 110v or 220v you could die for sure. Therefore it is imperative to use battery only. Battery can be configured to provide enough voltage to neutralized parasite but not you.

You can electrically neutralize parasites in the blood, internal organs, head, bones, and the rest of the body without employing invasive operations.

But you can't apply this unidirectional direct current voltage into the blood without taking into account the white solid deposits that we see in car battery terminals over the time it's being used. This same condition can happen to your blood. This solidification or "battery effect" is caused by the unidirectional nature of the voltage. Therefore, it is imperative to switch the polarity of the voltage periodically, hence the preference for AC or alternating current (pulsing AC, not sine wave AC you get from your household convenience outlet.

Another very important parameter that we must be careful about is *frequency*. It has been determined that high frequencies don't

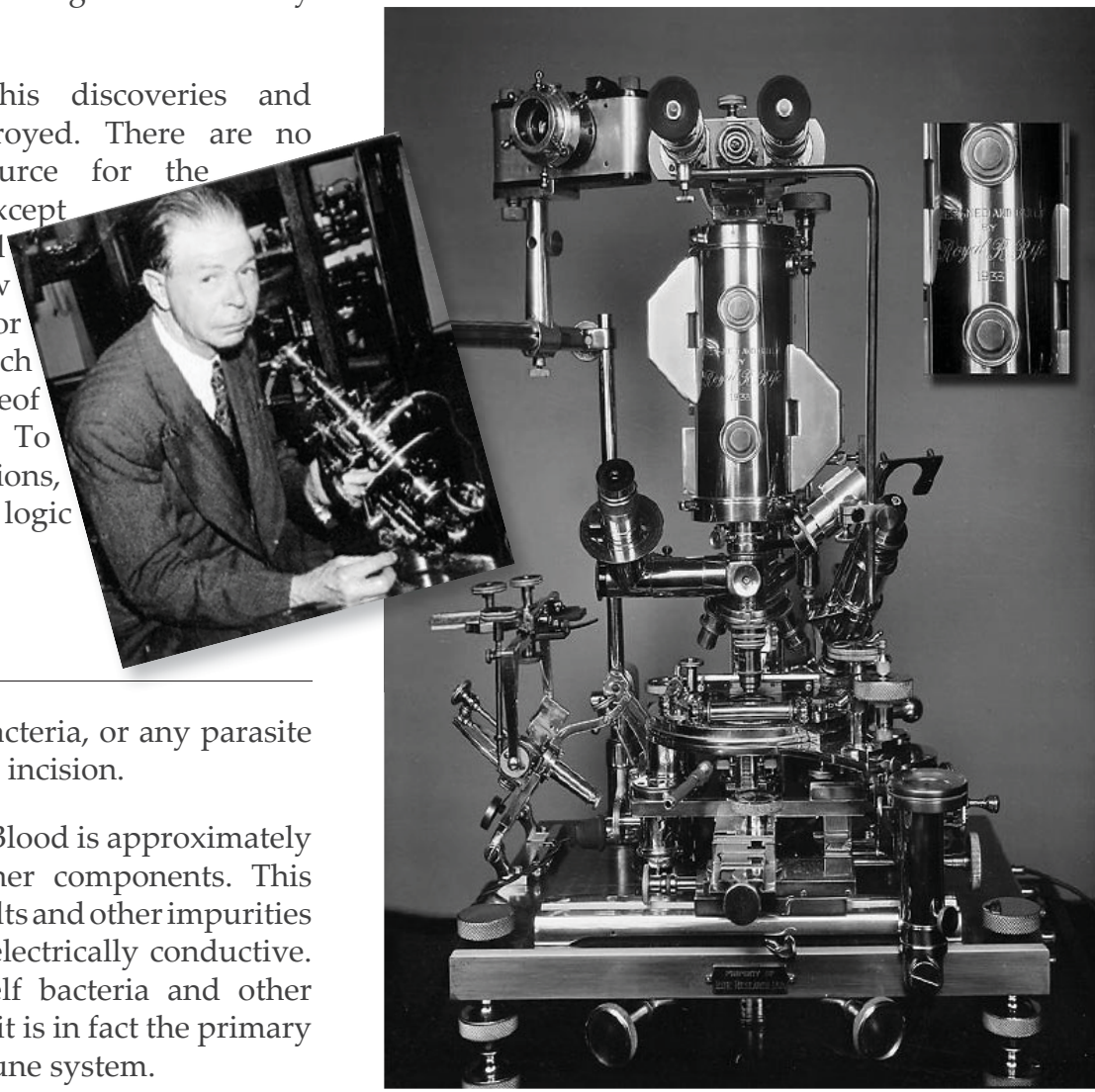
Did you know...?

- that when blood is freed from most if not all parasites, it can survive much longer (5 weeks or so) in a microscope slide than the normal untreated blood (4 days)?
- that normal untreated blood is dark red to brown in color, while cleansed blood displays a clear orange red color?

penetrate the body that much as compared to low frequency except at the *point of resonance*.

Both **Raymond Rife** and **Hulda Clark** are using such high resonant frequencies, and their methods do require precision to overcome impedance which necessitates the use of sensitive instruments such as frequency counters, pulse generators, and oscilloscopes. And to verify its efficacy, we need to see the parasites or the virus themselves which require high magnification or ultrasensitive microscopes which is not available in the market today. This known fact forced Rife to invent his own very sensitive microscope using invisible light spectrum to be able to peek into the nano-world of viruses, while adjusting his oscillators to determine the best frequencies when these organisms literally explode.

Consequently, both his discoveries and reputation were destroyed. There are no known reliable resource for the frequencies he used, except for the claim that said frequencies are now allocated for the AM or FM broadcast, in which the illegal use thereof is punishable by law. To overcome these limitations, we need only to use logic and common sense.



The Logical Alternative to Rife's Method

First, we know for a fact that direct electrocution of living organisms neutralizes or kills them. And so far we have found that, for our purposes, alternating current or AC is safer than direct current or DC. Third, we have determined that low frequency is more preferable than high frequencies due to cost and technical related constraints.

Now, we must determine where we should apply the low frequency alternating voltage in order to reach the bacteria, or any parasite for that matter, without incision.

How about the blood? Blood is approximately 80% water among other components. This liquid should contain salts and other impurities which would make it electrically conductive. Blood also carries itself bacteria and other forms of parasites, and it is in fact the primary component of the immune system.

Blood flows throughout the body at the frequency of the heartbeat. It takes about 15 minutes for a blood cell to complete its journey from the heart, to all extremities and back.

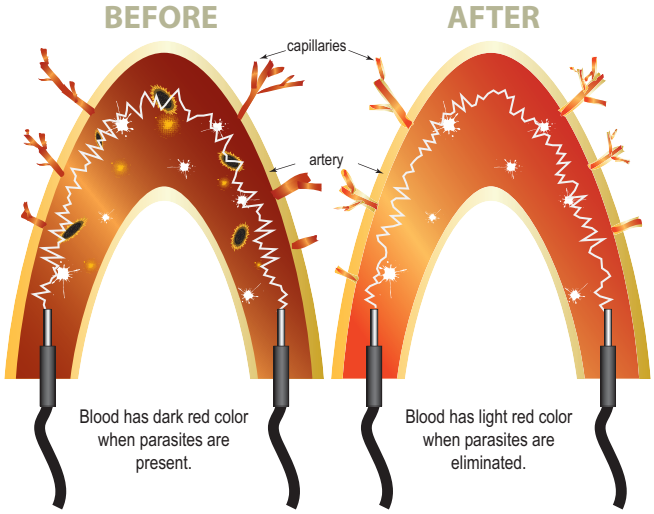
Being conductive, the blood can be used to transmit electrical energy in the hope of electrocuting all types of parasites flowing with it.

And where exactly be the point of contact between the electrodes and the blood?

To answer that question we must consider an electrical characteristic of a body to resist the flow of current. Insulators, such as rubber and wood, exhibit very high resistance to electric current flow. Conversely, conductors, such as metals and water, offer less resistance. The human skin is partly water or must have contained an amount of moisture hence its softness. It is therefore possible to connect the electrodes to the skin just above the artery where the blood flows. From there, it is just a matter of adjusting for the right voltage to initiate the current to flow through the blood via the skin.

Choosing which artery to target should not be that painful. All you need to do is to feel for the pulse. And you should have more than one spot. Each of these spots can be used depending only to your preference or to which you will be comfortable with.

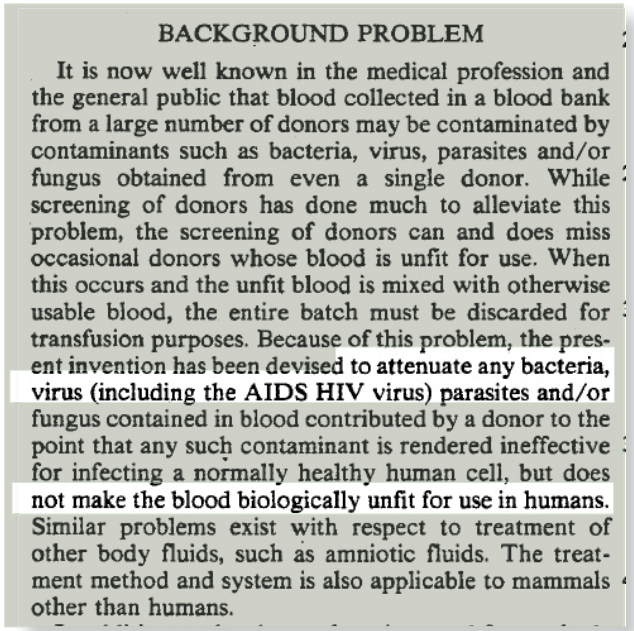
Electric current flow will be felt through the blood. And by that fact alone, you should be convinced that the parasites, too, can feel it. Or, is it more than that?



Parasites can't take more than a few microvolts. Imagine what a millivolt can do. How much more if we are using 24 volts?

3 volts is enough to light a flash bulb. A few microvolt is more than enough to alter the protein layer of the virus preventing it from replicating and is eventually flushed out from the system through the liver and kidneys.

The Kaali Patent



BACKGROUND PROBLEM

It is now well known in the medical profession and the general public that blood collected in a blood bank from a large number of donors may be contaminated by contaminants such as bacteria, virus, parasites and/or fungus obtained from even a single donor. While screening of donors has done much to alleviate this problem, the screening of donors can and does miss occasional donors whose blood is unfit for use. When this occurs and the unfit blood is mixed with otherwise usable blood, the entire batch must be discarded for transfusion purposes. Because of this problem, the present invention has been devised to attenuate any bacteria, virus (including the AIDS HIV virus) parasites and/or fungus contained in blood contributed by a donor to the point that any such contaminant is rendered ineffective for infecting a normally healthy human cell, but does not make the blood biologically unfit for use in humans. Similar problems exist with respect to treatment of other body fluids, such as amniotic fluids. The treatment method and system is also applicable to mammals other than humans.

The same use of electric current to "attenuate any bacteria, virus (including the AIDS HIV virus), parasites and/or fungus contained in the blood... but does not make the blood biologically unfit for use in humans" is being certified thru this patent.

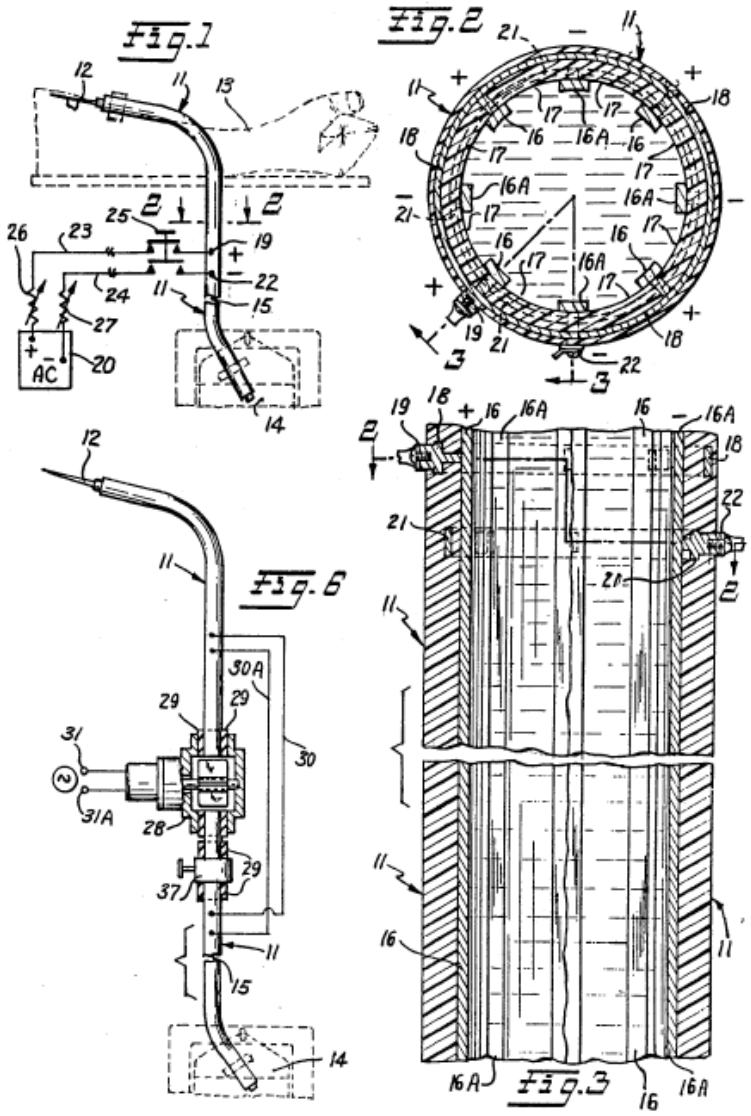
If you want to study it and verify, you can refer to the *Patent Section* of the Appendix.

This method of electrifying the parasite thru the blood has been certified to work since 1993 or even earlier. But even if there wasn't this patent, we can still agree though that electricity does kill.

The only problem with the method specifically described in this patent is that the blood is taken out from the body much like using a blood filter called *haemodialysis* machine as shown in the diagram (fig. 1) on the next page.

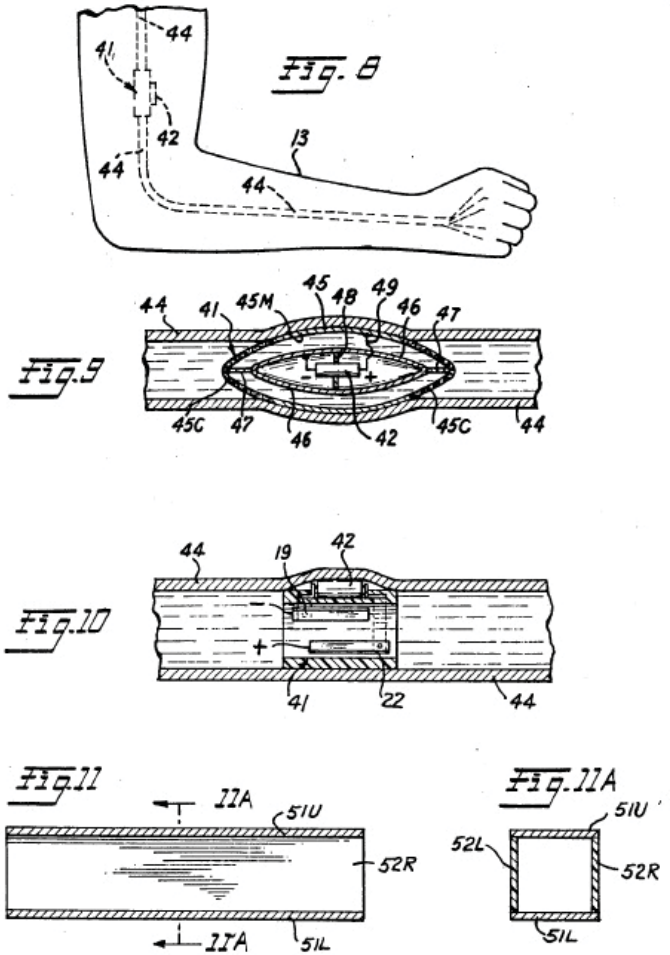
The other alternative is to embed a miniturized blood electrifier along the artery (fig. 8 of the patent).

U.S. Patent Feb. 23, 1993 Sheet 1 of 6 5,188,738

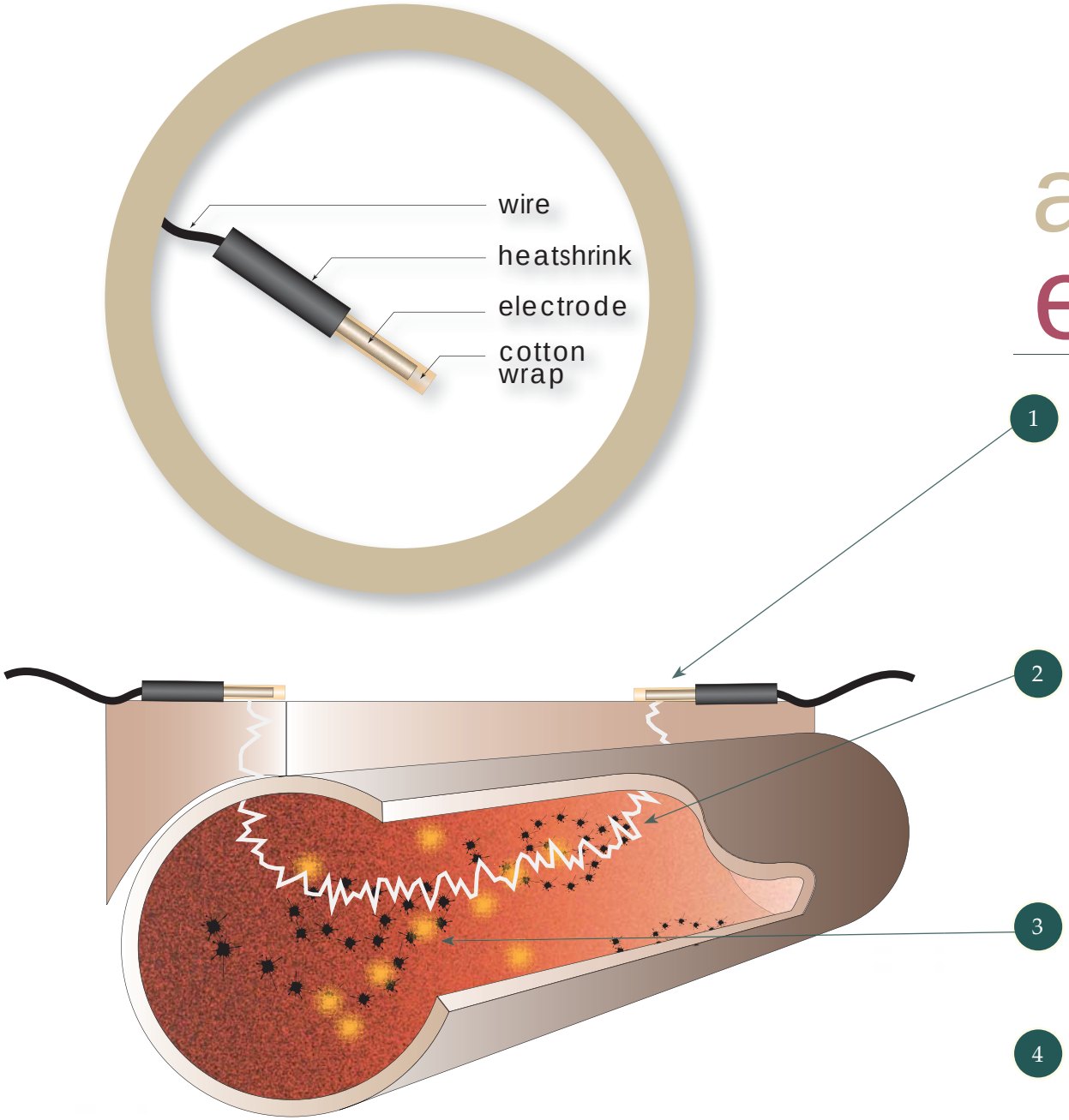


The invasive nature of these methods are unsurprising. After all, the inventor is a good doctor.

Our not having undergone the same rigorous training insulated us from being indoctrinated to the mindset that Big Pharma has designed.



arterial **blood** electrification



1 The electrolyte (sea salt solution) poured into the cotton wrapping the electrodes enhances the electrical contact between the skin and the electrodes. When the skin absorbs some of the electrolyte it also enhances the electrical connection between the artery and the electrode. The blood in the artery is normally conductive; hence, blood electrification is possible as you will find out yourself.

2 You can literally feel the current flowing through the blood in the artery. Don't worry, you can always adjust its intensity, and the flow of the current is localized as shown here. Any parasite passing through this area is electrified, its protein layer altered, and cannot replicate any further. This gives ample time for the immune system to recover and fights back.

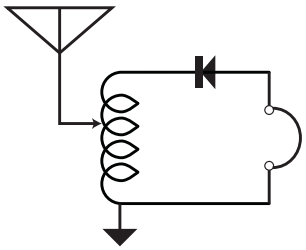
3 Electric current doesn't distinguish between classes of parasites. It neutralizes them all. The natural consequence is the elimination of all diseases caused by these undesirables.

4 A completely cleansed blood allows the return of more than 2000 *neuropeptides*, among them is *interferon* which interferes the growth of cancer cells; heals wound faster with less scar. The same treated blood can survive longer (60+ days) than untreated blood (4 days) even outside the body (microscope cover slide).

Having dispensed the basics of how to properly electrify the parasites flowing with the blood, you should now be itching to construct your own blood electrifier. In order to be able to do that, you need to know some basic electronics.

Reading Schematics

Interpreting an electronic circuit diagram is like reading a book. You need to start from left to right, and from top to bottom. This suggests that the input portion of the actual gadget is usually at the left of its diagram, and the output to the right. To illustrate, consider the schematic below.



There are four parts of this simple radio schematic diagram. From left, the antenna, the tuning coil, detector or diode, and the earpiece or headphones. Various radio stations signals are received thru the antenna; specific frequency selected at the tuning coil; signal is rectified or audio component is extracted from high frequency *radio carrier signal* by the diode; audio headphone speakers vibrate at the frequency of the audio signal.

Complex circuits contain more discrete components, requiring more symbols. Minuterization technologies allow assembly of complex circuits in a very small space. These circuits are usually referred to as *integrated circuits (IC)*.

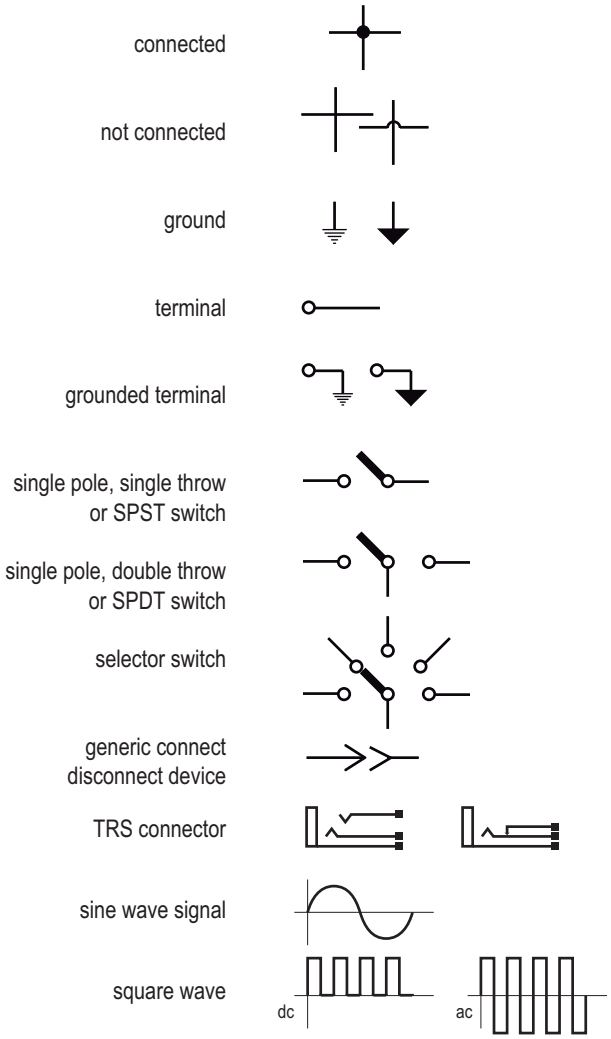
IC chips further simplifies the job of the circuit designer. In our case, we will use one type of IC called an *operational amplifier* or *op-amp*. The only job left is for us to make this IC chip alive. But before doing so, we need to learn more schematic symbols so that we will be able to interpret the complete blood electrifier circuit diagram.

Please refer to the schematic symbols on the next page.

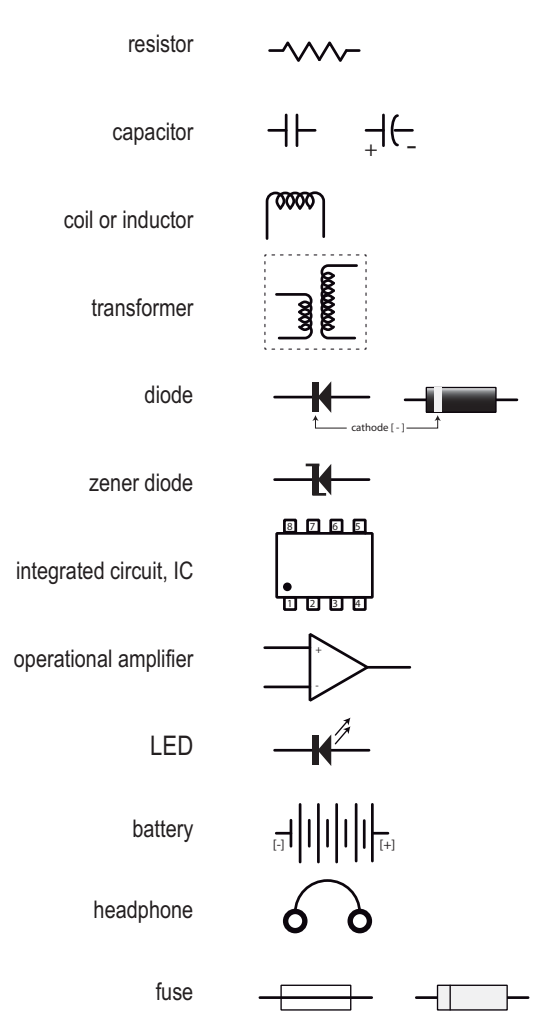
Did you know...?

- That the diagram on the left shows the simplest form of free energy device? It has no power supply yet in can drive suitable earpieces just by the virtue of the signal it receives from your nearest radio station. How many are listening to this same radio station and not overloading it? Scale this up and you will have a viable power source enough to light up your home.

WIRE CONNECTION, CONNECTORS & SWITCHES



ACTIVE & PASSIVE DEVICES



"Normal untreated blood can only survive for 4 days in a microscope cover slide. Electrified blood, on the other hand, can survive for 57 days (or longer), under the same condition. Imagine what a virtually immortal blood can do where it matters."

- Dr. Robert C. Beck. DSc.

The schematic symbols on the left represent electronic parts or components and are to be connected with lines signifying actual wires or conductors.

When two or more lines intersect, a dot notation at the point of intersection signifies a connection, while the absence thereof signifies no connection.

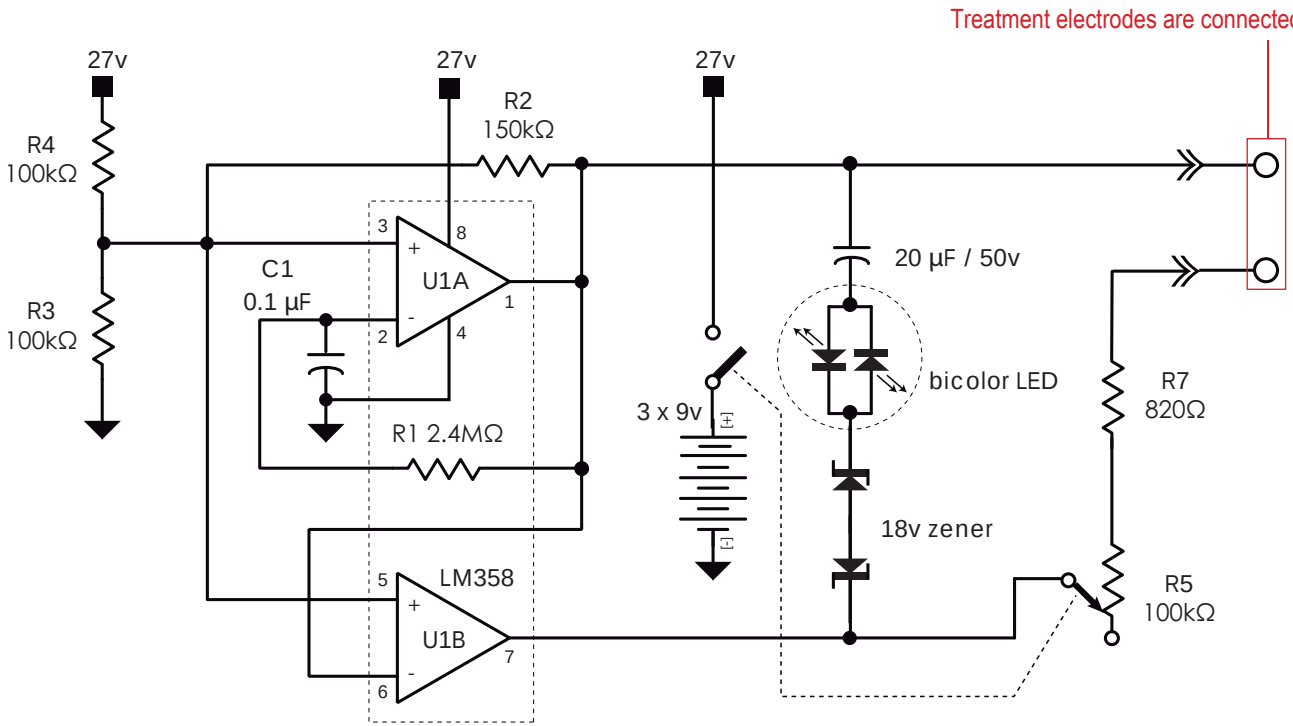
Beck's Blood Electrifier Diagram

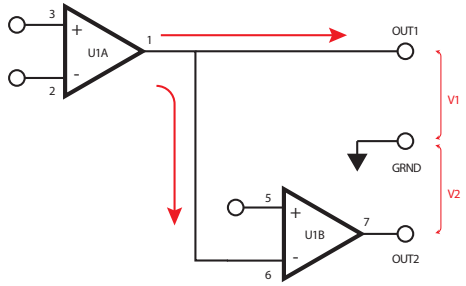
Interpreting a schematic diagram for the first time is obviously overwhelming. Again, let's read it from left to right and top to bottom.

The main component on the left, and in fact, for the whole assembly is a low power dual op-amp called LM358. This chip is broken into two triangles to make the lines (i.e. wires) easy to draw (i.e. connect). The parts around it are put there to make it alive (i.e. power supply) and influence its actual operation (e.g. wave shaping, frequency). These include resistors and capacitors.

Basically, LM358 has two op-amps which can be configured to provide an *inverting* and *non-inverting* output. An inverted output configuration is when the polarity of the input is reversed at the output terminal, i.e. when input is positive, the output should be negative and vice versa.

This configuration is very useful when you want to increase the output voltage of your circuit, which is what we really need in this case. Our goal is to have a 50 volts peak to peak output from just three 9-volt batteries. This can be accomplished by connecting the non-inverting output [1] of the first op-amp to the input of the inverting op-amp [6].





LM358

Did you know...?

- Operational Amplifiers are the most versatile building blocks of electronics. An op-amp is capable of producing an output hundreds of thousand times the voltage difference between its inputs.
- LM358 costs about $ 0.40 each.

In the previous diagram, the total voltage [Vt] would be Vt = V1 + V2 =25 + 25 = 50v. This is a sharp rise, 4 Hz square wave alternating pulses.

The frequency of the pulses our timer chip would be making is determine by C1 and R1, 0.1 μF and 2.4 megaohm, respectively. The charging time T or RC constant is determine by calculating

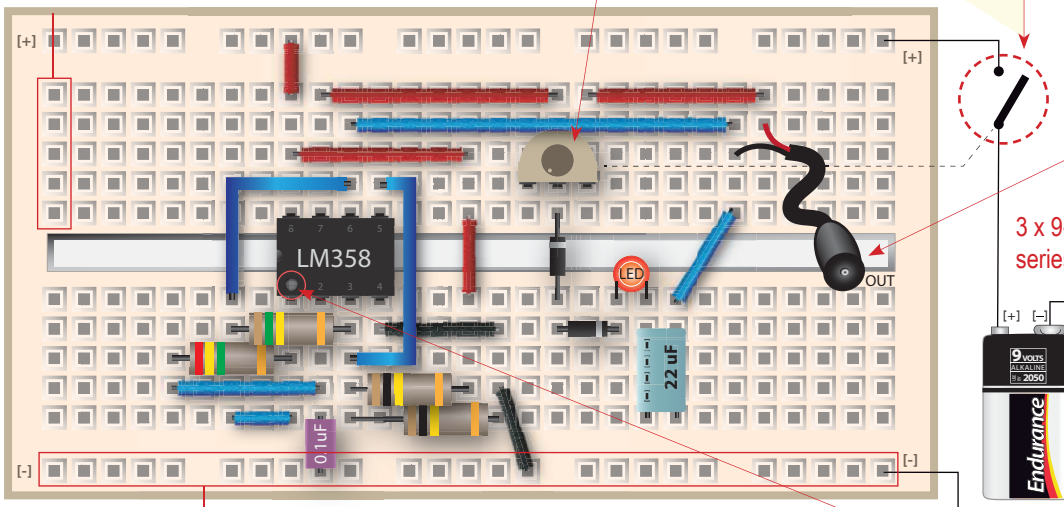
T = RC = (0.1 uF) (2.5 MΩ) = 0.24 sec

This means there are approximately 4 pulses per second, or

frequency = 1 / 0.24 = 4.2 pulses or 4.2 Hertz [Hz]

The alternating outputs from chip terminals 1 and 7 are then connected to the output DC socket (female end of DC power extension cord. The male end acting as plug that is part of the *treatment cable* is then inserted into this output socket where we can utilize the pulsing signal for blood electrification.

Breadboarding Your Blood Electrifier [Control Module]

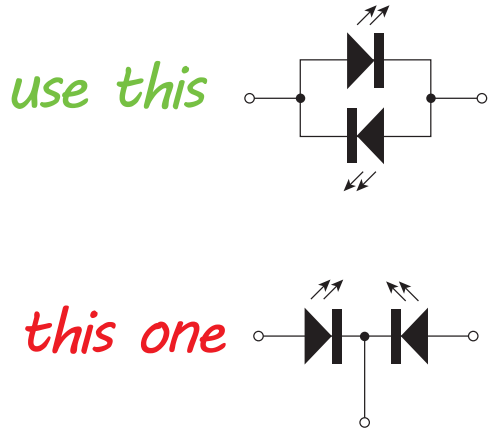


Warnings:

- Don't do a wrist to wrist arterial electrification especially when wearing an artificial pacemaker. This will interrupt its proper operation which may lead to death;
- Don't replace these batteries with line powered adaptor, nor connect directly to household outlets. This would result to instant death.

List of Materials for Blood Electrifier

Reference	Description	Quantity
U1-A & B	LM358 Timer IC	1
R1	Carbon Resistor, 2.4 MΩ	1
R2	Carbon Resistor, 150 kΩ	1
R3, R4	Carbon Resistor, 100 kΩ	2
R5	Potentiometer, 100 kΩ [variable resistor w/ built-in SPST switch]	1
R7	Carbon Resistor, 820 Ω	1
C1	Capacitor, 0.1 uF	1
C2	Capacitor, 22 uF, 25 volt	1
D1, D2	Zener Diode, 18 volt	2
CR1	LED, bi-color	1
	DC Extension Cord, 2.1mm (preferable but 3.5mm is ok), at least 4 ft length	2
	Rechargeable Battery, 9 volt [w/ charger]	3
	Battery Clips, PP3	3
	Breadboard or pre-drilled Printed Circuit Board [PCB]	1
	Solder, lead-free	1
	Stainless Steel Rod, 316L, 2.5mm dia.	1
	Hookup wires, solid, 1 meter	1
	Heatshrink, 4mm:2mm [preferably adhesive lined & hardens when shrunk]	1
	ABS Enclosure Box [preferably with snap-on cover for tool-free battery access]	1
	Belt Pouch (can accommodate enclosure box)	1
	Vinyl Electrical Tape	1



Bipolar LEDs come in two configurations: 2-terminal and 3-terminal. Use the 2-terminal.

A step drill bit suited for drilling clean holes in plastics.

Tips:

- If soldering is fine with you, try using a pre-drilled circuit board.
- Instead of buying, you can use any accessory box lying in your drawer to house your electrifier later.
- Or, if you want to carry your gadget around, use an ABS box with snap-on cover so replacing batteries is a breeze. Use a "step drill" in drilling clean holes for control knobs.
- It would be best if you have a back-up treatment cable just in case the other one is pulled and cut accidentally during use. So, make two treatment cables.

Making the Treatment Cable

The actual treatment cable for the blood electrifier requires some work.

Materials for Blood Electrifier Treatment Cable

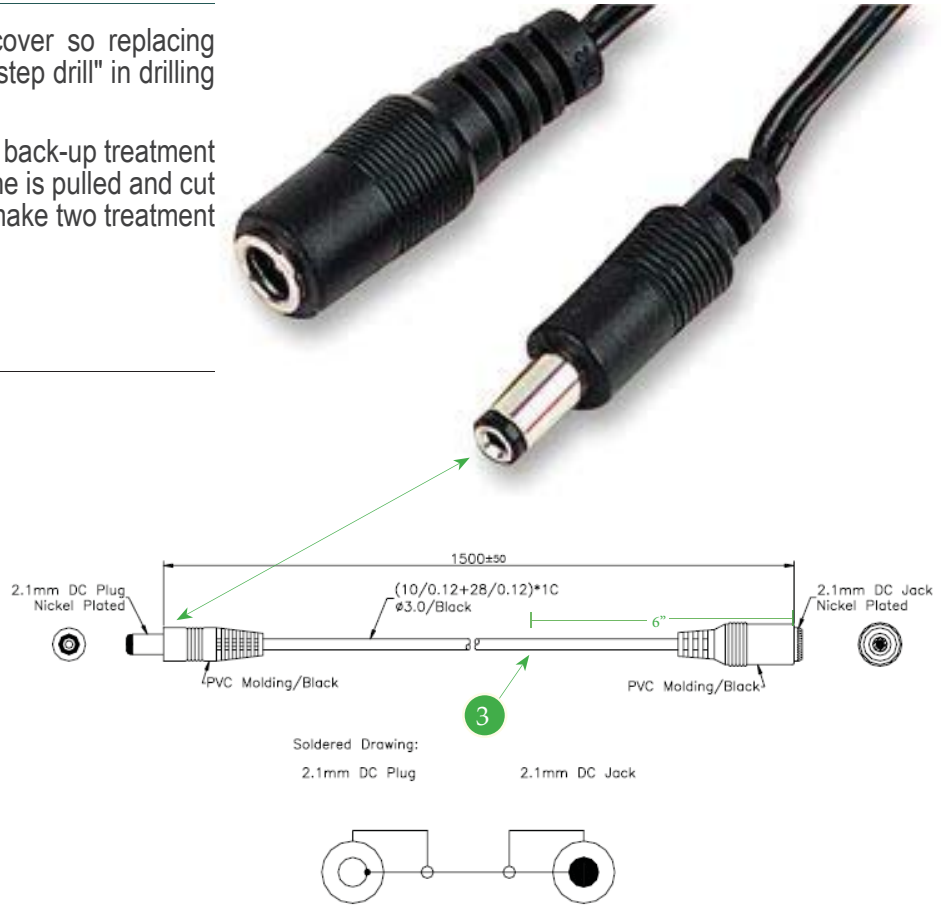
1. DC Extension Cord, 2.1mm, 4 ft. [at least]
2. Stainless Steel Rod [welding], 316L, 1pc
3. Heatshrink, 4mm : 2mm
4. lead-free solder

Tools & Equipment

- wire stripper, crimper & cutter
- sander
- heat gun
- soldering iron

Step by Step Instructions

1. Cut 2 pieces of 2.5" long stainless rod for use as electrodes. Sand sharp tip edges away.
2. Roughen by sanding the side about 1/2" near the other tip of the electrodes where you solder the wire later. This will make sure the soldering lead have something to hold on to for better mechanical grip.
3. Cut 6 inches away from the female end of the DC

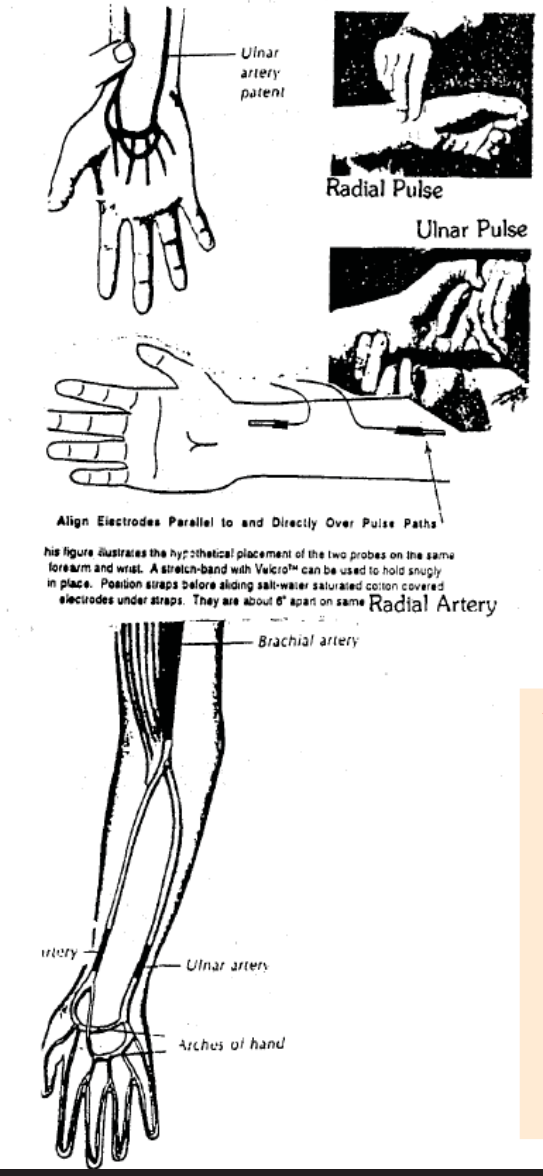


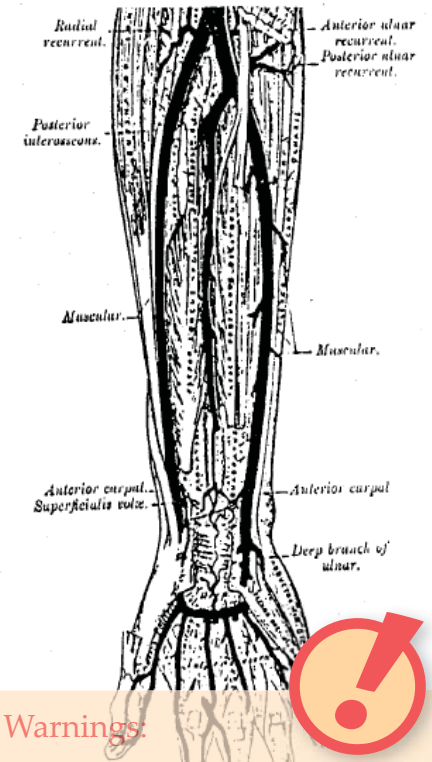
DC Extension Cord *(2.1mm x 4 ft length) will be cut 6 inches away from the female jack. This will serve as the output of the Control Module. The other end of the male cord will be connected to the stainless steel electrodes and will serve as the Treatment Cable.*

Extension Cord, and keep this shorter portion of the cable for use later as the output socket of your Blood Electrifier Control Module.

4. Cut 2 pieces of heatshrink insulation about 2.0 inches long each, and insert them into each wires of the other end of the male DC cord.
5. Strip off about 2.0 inches of insulation from each of the two wires at the other end of the male DC cord (Step #4), and wrap each of them tightly to the corresponding electrodes.
6. Solder by heating the electrodes and wires but not the solder. Just press the solder into the heated metal and wire to melt it down. A good solder connection is hard, smooth and shiny. **Caution**: Solder fumes can be toxic. Ventilate properly.
7. Pull the heatshrink up to the point where only an inch of each of the electrodes are exposed. The purpose here is to insulate the connection and provide isolation of the solder which is toxic.
8. Shrunk the heatshrink by using a heat gun set to low.
9. Check your work for mechanical and electrical integrity, and you're done!

Once you have completed both the *control module* and *treatment cable* of your blood electrifier, you can now begin your treatment by following the instructions at the **Using the Blood Electrifier** section, with reference to Bob Beck's recommended treatment areas as shown in the images that follow. But before actually doing so, please review Chapter 1 on a number of precautions which you should be aware of and must follow all of them strictly.





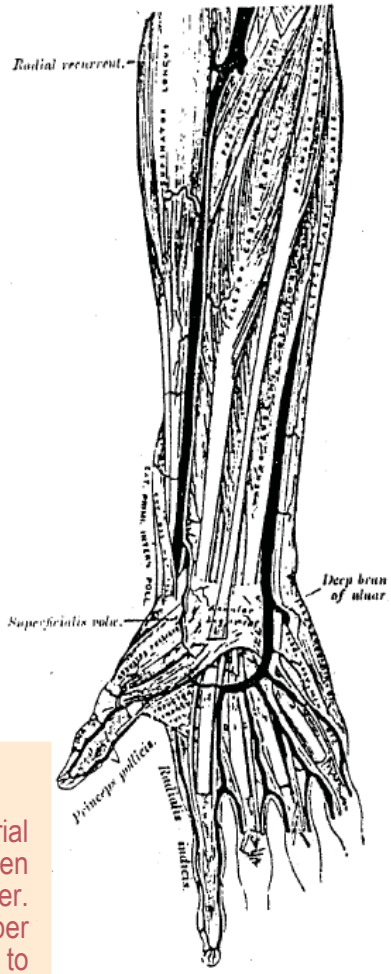
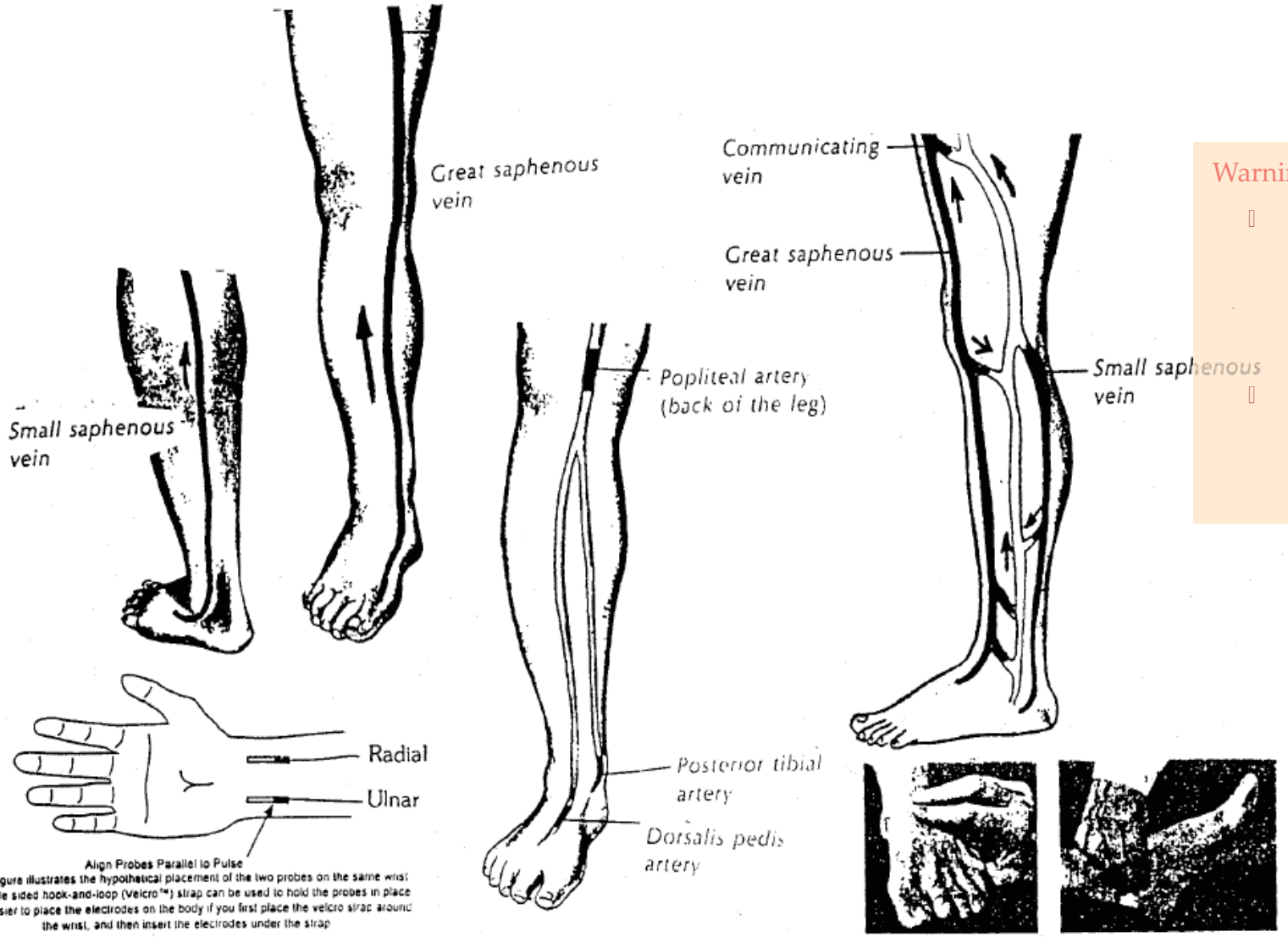


Fig. 304.—The radial and ulnar arteries.

Warnings:

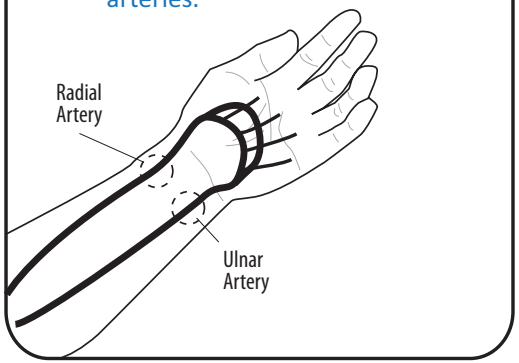
- Don't do a wrist to wrist arterial electrification especially when wearing an artificial pacemaker. This will interrupt its proper operation which may lead to death;
- Don't replace these batteries with line powered adaptor, nor connect directly to household outlets. This would result to instant death.



Warnings:

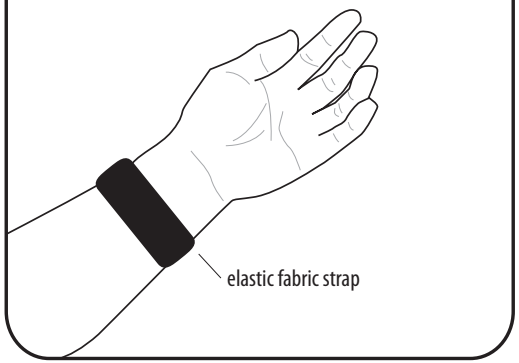
- Don't do a wrist to wrist arterial electrification especially when wearing an artificial pacemaker. This will interrupt its proper operation which may lead to death;
- Don't replace these batteries with line powered adaptor, nor connect directly to household outlets. This would result to instant death.

Step1: Find your pulsing ulnar and radial arteries.



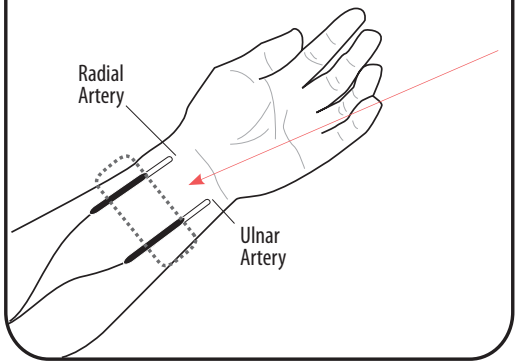
First time users may mark these spots for easier electrode placement later.

Step2: Place elastic fabric strap on wrist.



Clean wrist with alcohol swab first before wearing the most comfortable wrap for you.

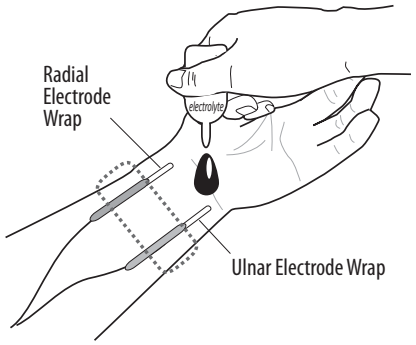
Step3: Insert both electrodes directly above the radial and ulnar arteries.



Both electrodes must be perfectly alligned to both arteries. Don't pull the wires in any event.

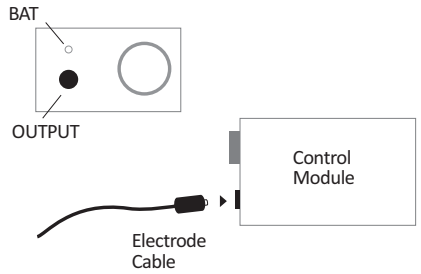
In some cases, a second elastic strap directly on top of the wet electrodes might be needed to ensure good electrical connection. If so, please cut half of a 1" x 10" plain plastic bag and insert this 2nd elastic wrap into it to avoid wetting the wrap itself. Keep the other half for storing the electrodes later after use.

Step4: Apply electrolyte drops on both electrodes.



Right amount is achieved when the wraps are fully wet but not dripping. Only the cotton wrap should be wet, and not the strap or the skin area between the two electrodes to prevent shorting out the current. To maintain good electrical contact, you might repeat this procedure when electrolyte dries up later on.

Step5: Plug the other end of the Electrode Cable to the Control Module OUTPUT jack.

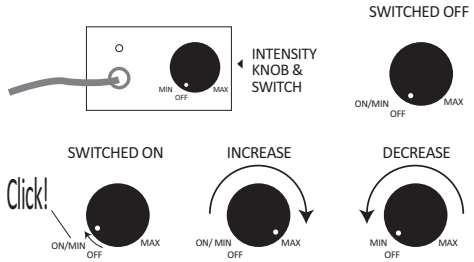


Hold the plug, not the wires, when inserting and pulling the cable.

The BAT monitor switches off when the EC plug is inserted to save power.

Electrolyte is made up of pure sea salt solution. Don't use iodized salt from your kitchen.

Step6: Slowly turn the Intensity Knob clockwise to switch ON, continue until a tingling sensation is felt. Set at your own comfort level.



Don't do this step abruptly especially when you have a weak heart and/or it's your first time.

This the best time to check for proper electrode allignment. Slide each electrode slightly from side to side to obtain a stronger current.

Always rinse your wrist after each treatment to remove electrolyte residue.

While a prolonged use of this device is free from side-effects, and may even be beneficial in some cases, **the capacity of the body to detoxify itself will always be the dominant factor by which the length of treatment is determined**. Each case is unique, and so is the length of treatment per session and for the entire course of treatment, before a possible total remission is achieved.

Remember, the longer the duration of treatment per session, the higher will be the volume of toxins that needs to be eliminated from the body. PERSONS WITH ADVANCED CASES SHOULD THEREFORE TAKE NECESSARY PRECAUTIONS AND START SLOWLY as the immune system may already be highly affected. Drinking plenty of water will make your immune system happy. A glass, or more, of Ozonized Water every hour is highly recommended.

Suggested Daily Treatment Schedule for Adults

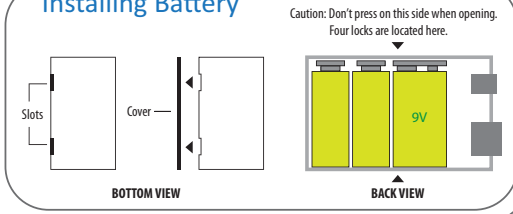
	Mild	Moderate	Severe
Day 1 to Day2	30 minutes	15 minutes	5 minutes
Day3 to Day5	45 minutes	30 minutes	15 minutes
Day6 to Day7	1 hour	45 minutes	30 minutes
Day8 to Day14	2 hours	1 hour	45 minutes
Day15 to Day 30	2 hours	2 hours	1 hour
Day31 Onwards	2 hours	2 hours	2 hours
When total remission is achieved, do this once..	24-48 hours, non-stop	24-48 hours, non-stop	24-48 hours, non-stop

Suggested Daily Treatment Schedule for Children [7 years old, at least]

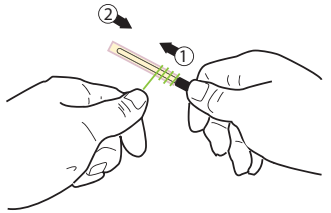
50% of the Suggested Daily Treatment Schedule for Adults.

IMPORTANT CAREFUL OBSERVATION IS A MUST. LOG ALL YOUR OBSERVATIONS AND ACTIONS AS YOU PROGRESS. Record data such as date, length and time of treatment, and reactions to the treatment. If failure of detoxification is observed, e.g. headache, fever, skin rashes, etc., increase water intake. If symptoms persist, take a day off from treatment, but continue taking in generous amount of water. In case of fever, don't take any medicine. Regulate body temperature by taking in plenty of water and subject yourself to cool baths until fever subsides. Resume treatment on the next day.

Installing Battery



Wrapping Electrode



Observe how the original wrap is done and have a mental picture of it before the removal.

1. Remove worn out wraps by cutting the threads that tie it. Unwind the threads when necessary.
2. Clean electrodes by rubbing with lemon or soaking with vinegar. Or apply a mild soap.
3. Rinse thoroughly. Keep dry.
4. Cut 2 pcs. of 1" x 1.5" 100% Cotton Cloth / Flannel.
5. Wrap each electrode with this cotton strip, and secure each wrap by winding a thread in the same direction as the wrap, moving spirally away towards the tip, and back. Then tie 2 more knots. Drop a clear nail polish on the knot to prevent it from losing when wet.

⚠ Allow extra cotton at the tip of the electrode to avoid discomfort later on.

Saving Battery

Typically, a rechargeable battery has a finite life span of one (1) year or 300 charges approximately, whichever comes first. You can reduce the number of charges by placing your battery or the whole Control Module in an oxygen-free sealable plastic to avoid unnecessary discharges. KEEP AWAY FROM CHILDREN.

Care & Maintenance

Your Virutron will last longer if you take good care of it. Here are some of the few things you can do:

- Pull the Electrode Cable by the plug.
- Wash and rinse the electrode wraps in running water regularly. Allow to dry naturally. Replace wraps when worn out and/or in case of multiple users. *Please see Wrapping Electrodes section.*
- Return all components into its original packaging.
- Keep away from children. Store in cool dry place.

Post-Remission

You can still use the device even if total remission had already been achieved.

30 minutes to an hour of treatment just before bedtime will help your immune system in fighting any viruses you got during the day. You can also try using this device for the relief of Common Colds.

Always bring this device whenever and wherever you travel.

An Appeal

Once your health is improved, you are encourage to share your experience, anonymously or otherwise, in order to help others.

Let's all have a good, productive, healthy life. Cheers!

source: Virutron UserManual

Aside from carrying nutrients to all parts of the body, the human blood carries with it neutralized parasites in its return trip. Blood is then filtered out thru the liver and kidneys, before being feed to critical parts of the body again.

However, there are certain parts of the body that are unreachable by blood, and therefore can't be sterilized through previous method. This is usually the case inside organs like stomach and bladder. How do we apply electrical current to these organs in the hope of electrocuting the parasites therein? Can we use wires as we did with arterial electrification? Obviously, we can't.

There is however another method of sending electrical signals wirelessly – radio transmission, the same method used in cellphones and radars. Can we use this method without endangering the life we are to save? No, we can't use this method without observing precise parametric limitations inherent with high frequency signals already discussed in the previous section about Rife's and Hulda's methods.

Radio transmission utilizes high frequency much like radiation therapy which we are trying to avoid. High frequency oscillations produce heat much like the microwave oven in which thermal effect is being used to target and kill cancer cells during *radiotherapy*.

Is there any other option of imparting electric current without using wires and does not utilize high frequency radiation?

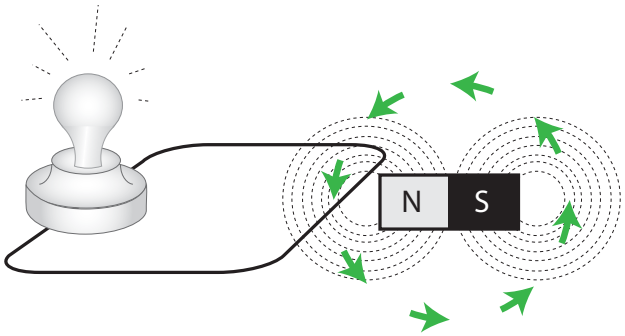
There's still one more option - *magnetic induction.*

Organ Electrification via Magnetic Induction

Electromagnetism is the key to understanding Life itself. In its most basic form, is a fluid which has density less than gas and propagates in space at certain frequencies that define its

final form. Electromagnetic wave is what we have come to know as *energy*. Energy cannot be destroyed; it can only be transformed. Among the basic forms of energy which we can perceive are: light, heat, electricity, magnetism, and all forms of matter. Again, these are made up of the same medium called electromagnetic wave or *ether*. Their assumed form are determined by the frequency by which they propagate in space.

Technically, if you put electrical pressure (i.e. voltage) at two ends of a conductive wire, a



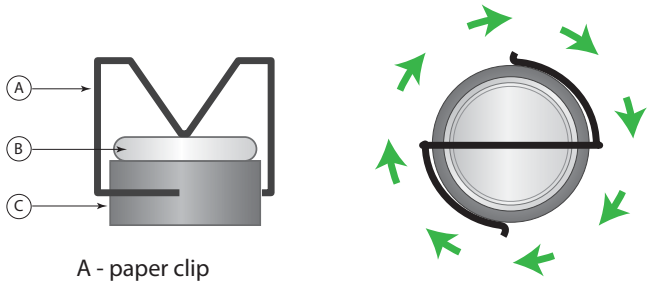
magnetic field is observable along the entire length of the wire. Conversely, if you pass a magnet near the wire, such that its magnetic flux is cut off by the same wire, a voltage or electromotive force (emf) is measurable at both ends. Increasing emf is just a matter of increasing the number of wire turns, or increasing the strength of the magnetic field.

Magnetic induction is being used since the beginning of alternating current, the ingenuity of Nikola Tesla. Constantly rotating the magnet as shown above will produce this alternating current due to periodic reversal of magnetic poles. With this, it is possible to transform a low voltage power generator into a high voltage potential which can be transmitted to enormous distances without significant degradation of power, a feat that is absolutely impossible with DC or direct current used by Thomas Edison.

High voltage AC transmission only requires a much thinner wire which proved to be more economical and voltage transformers at both ends of the transmission lines which is more efficient. Tesla's voltage transformer is the one we are looking for.

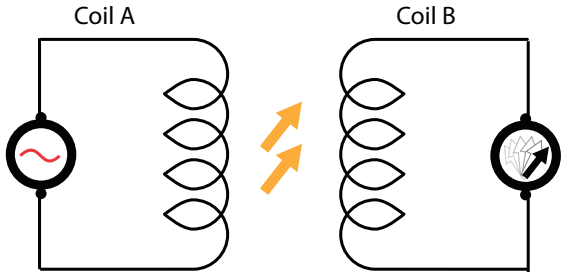
An *electric transformer* is just a coil in close proximity to another coil. A coil is a length of wire wound in a spool to multiply the strength of the magnetic field of adjacent wires which is part of itself. The more turns a coil has, the stronger will be its magnetic field.

Let's call the first coil as Coil A, and the



A - paper clip
B - lithium coin cell
C - neodymium magnet

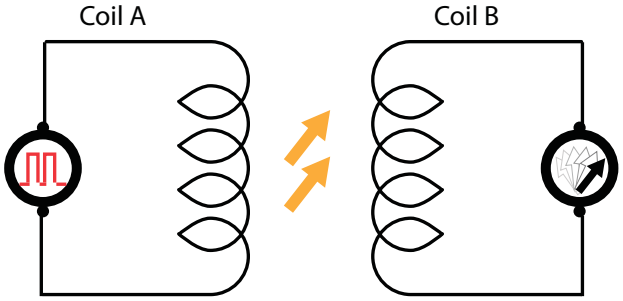
A good way to foster bonding with your kids is to construct the above contraption showing basic motor principles. Find out how to reverse rotation.



The diagram above shows a transformer fed with AC signal.

second coil, Coil B. Enough magnetic field of Coil A could influence or induced an electrical pressure on Coil B. This natural phenomenon is called *magnetic induction*. The resultant electrical pressure (voltage) has the potential to force electric current to flow when the terminal of Coil B is connected to a load, say an electric motor.

In the above illustration, Coil A is the *primary* of the transformer, and Coil B, the *secondary*. In this case, primary Coil A is the transmitter of electromagnetic field, and secondary Coil B



Shown here is a transformer fed with a pulsing signal.

is the receiver of such energy. Bear in mind, there's no direct electrical connection between the two coils. They are only connected by virtue of magnetic induction, yet Coil B is energized every time Coil A is energized.

The True Power of Logical Thinking

It was a very long discussion, but consider this: our flesh and blood are normally conductive. How about making our body the virtual secondary coil of a transformer?

If this is possible, can we go near a transformer and expect our bacteria to die off? No, that doesn't satisfy our need. In fact, it is needlessly very dangerous. It has laminated iron cores that traps magnetic field for better inductive coupling between its primary and secondary coils. Insignificant stray amount of magnetic flux is all we can expect from doing so.

We need to design our own primary coil with the following constraints:

- at most, it must utilize safe household voltage
- all conductors must be carefully insulated
- instead of a sine wave alternating current employed in ordinary transformers, we must use a more abrupt pulsing voltage to maximize the inductive effect in order to induce high enough but non-destructive low frequency current

It does sound very complicated, but you know what, we can easily modify a preassembled electronic gadget that can be used as a *pulser*. Then, we will just attach our *primary coil* to it

A typical Strobe Light use to simulate lightning lights in rock concerts.

and presto, we now have a very potent yet safer anti-parasitic electromagnetic device that costs so low but is more powerful than the more elaborate radiation therapy machine in prestigious hospitals today.

This gadget is called a *strobe light*. You've seen it being used in concerts to simulate lightning or used in photo industry as flashers. The intensity and speed of the strobe light is what we really need.

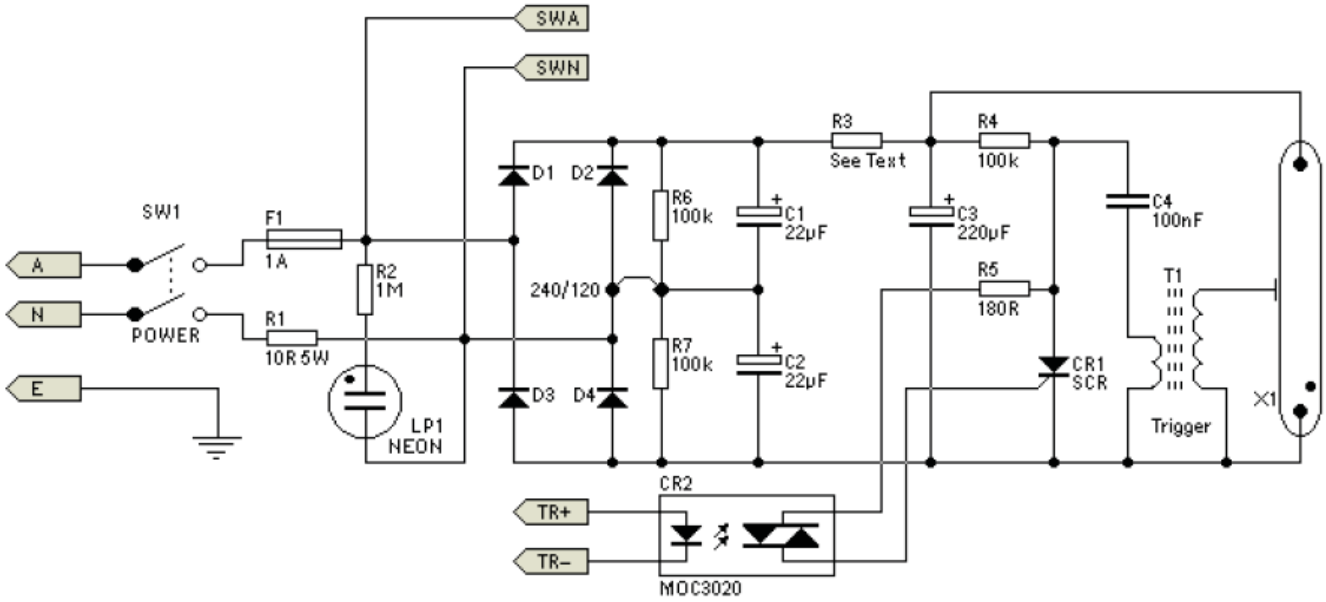


Figure 9 The Strobe Schematic Diagram

Hacking the Strobe Light

State laws in most countries prohibit an untrained individual to tinker with electricity. You may not only be harming yourself, but everybody nearby depending on how big the fire will be. So, before you hack any electronic or electrical equipment, you should have a minimum of technical knowledge regarding electrical safety.

Safety First

Let me share some safety tips to you now:

1. Never touch both lines of any power circuit at the same time. You will complete the circuit and act as a load where current could flow. Similarly, even touching one line and you're standing barefoot will toast you black;
2. Never touch newly removed or old electrical parts like capacitors, ballasts, transformers, etc. - they retain power even under storage for a long time. These components must be shorted out which

may result to sparking, the intensity of which can be reduced by using appropriately sized resistor or electric flatiron to dissipate power at both terminals more gradually;

3. Soldering iron burns, soldering lead is toxic, and;
4. Taking the above risks is more costly than hiring a qualified technician. Hire one.

Anyway, the hacking is fairly easy it won't take so much time for an expert. But what you can do at least is to wind the coil. Full instructions will be provided.

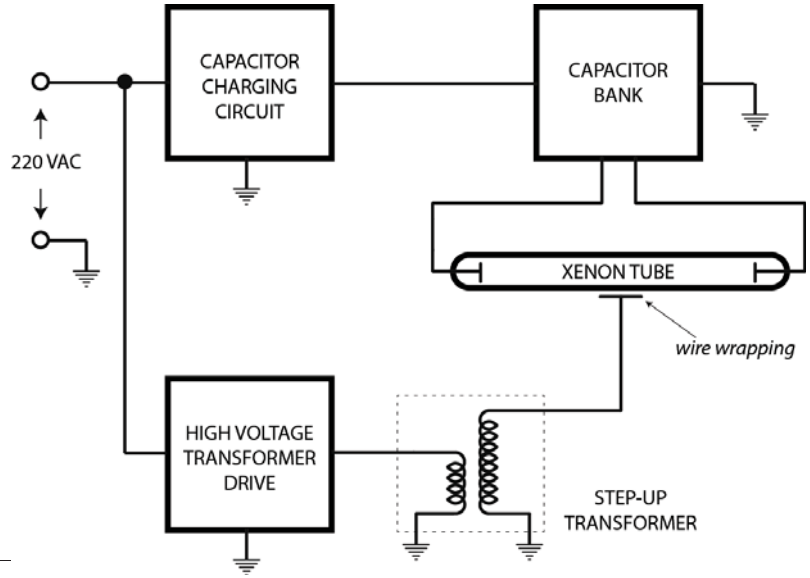


Figure 10 The Strobe Schematic Block Diagram

How the Strobe Light Works

In order to understand how a strobe light is hacked, you need to understand how it works.

On the right is a typical strobe light circuit. If this looks overwhelming, don't be intimidated. The actual hacking is actually very simple. You only need to cut one wire where you can insert the treatment coil which you yourself will make. Winding coil is fairly easy - just like counting fingers. (The magnet wire which you will be using to make the coil is varnish coated, don't remove or scratch this insulation when winding your coil.)

When the strobe light is plugged in to an electrical outlet, say 220v AC, the capacitor charging circuit will start charging the capacitor bank right away. This would mean that the ends or terminals of the *xenon* tube is already at high potential or energized, but this is not enough to trigger the xenon gas inside the tube to become conductive and emit light. The xenon gas will only switch on when a high voltage is present at the wire wrapping. This high voltage trigger will come from the step-up transformer as a short burst of pulse.

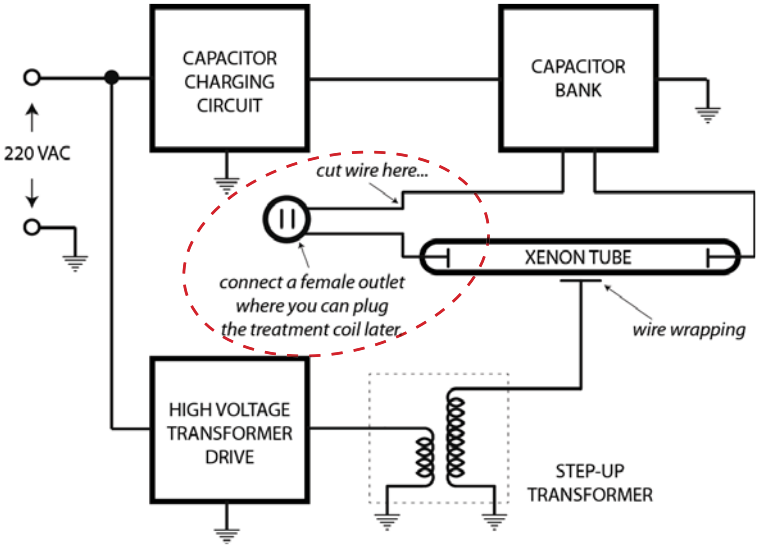


Figure 11 The Modified Strobe Schematic Diagram

Modifying the Strobe Light Into An Electromagnetic Pulser

Except for the trigger wire wrapping the tube, there are only two wires coming into the tube which come from the capacitor bank. One of these can be cut where we could insert our *treatment coil*. This would mean that our treatment coil will be in series with the tube.

In so doing, the coil will be energized with the same current as the xenon tube. It would be an instantaneous high energy current, just the thing we really need to induce enough microcurrent on any conductive portion of the body where parasites could be lurking.

As shown in fig. 11, instead of connecting directly the treatment coil, we will use an outlet (e.g. Neutrik connector) where we can remove the treatment coil after every use. This is for convenience especially when doing maintenance later on.

Now, we are ready to make the treatment coil, and the actual modification of the strobe light.

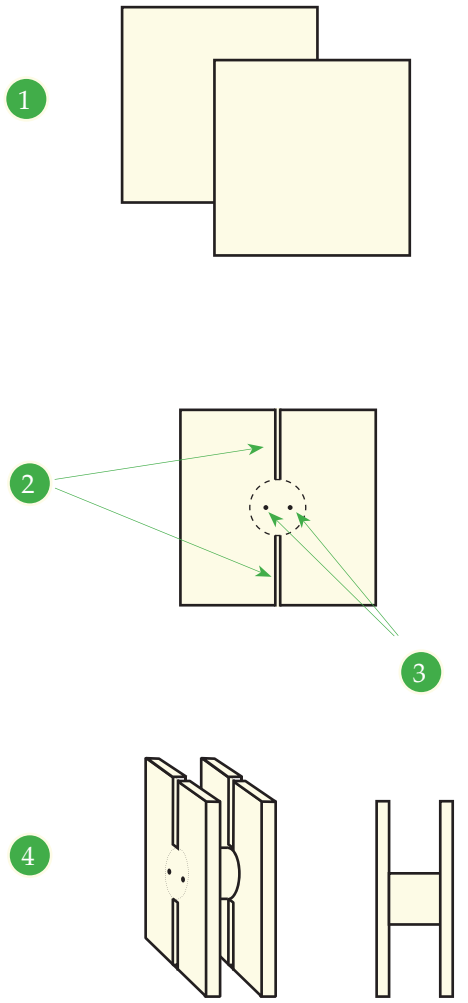
List of Materials for Making Treatment Coil

1. #16awg Magnet Wire, 1 kg.
2. #14awg Coiled Wire, 2 or 3 core,1.5 meters
3. #14awg Cable Wire, 2 or 3 core, 1 meter
4. Neutrik Connector, 1 set (male & female)
5. Plastic Ties
6. Circular Loom, for cable and coiled wire, 1meter
7. HeatShrink, 6mm (3mm when shrunk)
8. Terminal Block, 14awg, 1pc.
9. Strobe Light, 2000 watts
10. Tool Box (big enough to accommodate the Strobe Light; optional)

Notes:

- ☐ *If you decide to house your strobe light in a tool box, be aware that it can get extremely hot. Be sure to open the lid of the tool box every time you use it. Don't block any built-in fan.*
- ☐ *Ask for a manual or a short demo on using the control knobs of the strobe light. Take some notes.*
- ☐ *Verify if Neutrik connectors can accommodate your coiled wire and cable wire. Black is simpler to match than the different shades of gray.*

Making a Coil Winding Jig



Tools Required

- Universal plier
- Screwdrivers
- Soldering Iron With Solder
- Winding Jig (see instructions)
- Wire Crimper

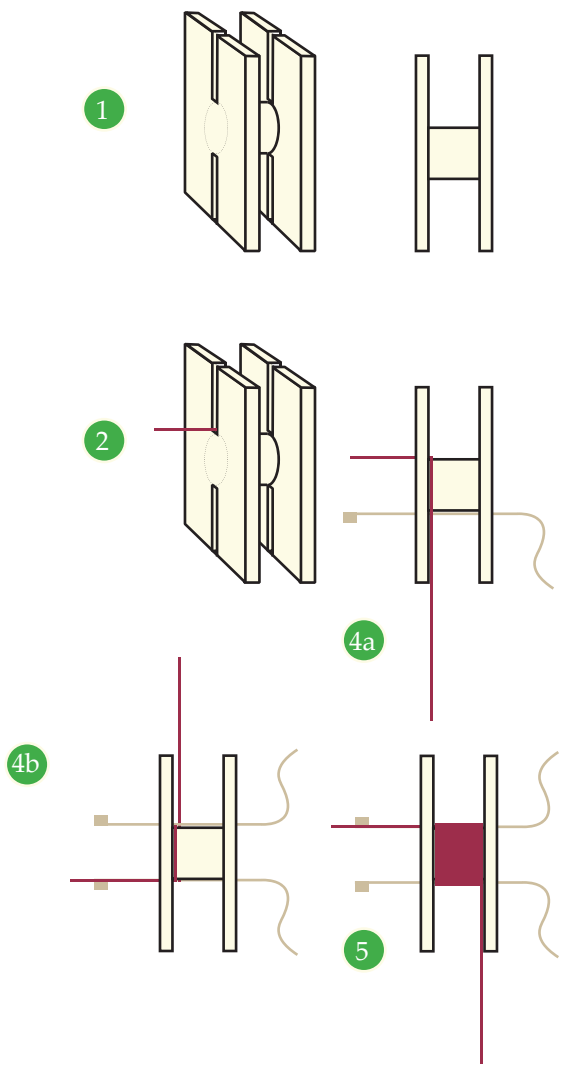
Making the Treatment Coil

When winding magnetic wires, you should bear in mind that the clear varnish insulation should not be compromised in any way. Maintain a clean workspace all throughout. Secure your spool of magnet wire in a stand, so you can pull the wire through it easily. Be imaginative. You can use a dumbbell for this purpose.

Step By Step Instructions

1. Assemble the jig first. (Please refer to Making The Winding Jig section).
2. Insert about six (6) inches into slot on one side of your jig. This will secure the magnet wire while you're winding your coil.
3. If you want to record how many turns you will have, place a pen and paper nearby. This will become useful when you decide to upgrade or replicate your project later on.
4. Start winding your first turn. This is the best time to lay across the two plastic ties one by one as you make the first turn.
5. Pull the wire as much as you can as you turn the jig gradually. Make sure no spaces are visible between turns as you wind tightly from side to side. A lose winding can vibrate and scrape off the delicate insulation in time.
6. If you want to stop midway, you can use electrical tape to secure your winding momentarily. Wrap tape tightly.
7. Once you fill your jig with wires, wrap generously the upper turns with electrical tape. Record the total number of turns. Then close all the plastic ties securely. Cut the wire leaving six (6) inches free. You might decide to have a break at this point. It's very important that you enjoy the whole process.
8. Unscrew and remove the coil from the jig. Add two more ties to secure the coil. If this isn't possible because of the wood at the center which can't be removed either, then you're done.
9. Scrape about 1/2 inch of insulation from both ends of your newly wound coil. Cut a portion of your terminal block. You need only 2 connectors in it. Then insert each scraped ends to any of the connectors and tighten accordingly.

Winding Treatment Coil



10. Remove 1/2 inch of insulation from your Coiled Cable Wire (part #2 from above list). Connect each of these wires to the terminal block where your coil wires are terminated.
11. Assemble the male Neutrik connector and the other end of the Coiled Cable Wire following Neutrik instructions. You may need a wire crimper and soldering iron at this point.
12. If, after the initial use, your coil is conclusively working, i.e. producing pulsing magnetic field, dip it into a bath of electrical varnish to strengthen its insulation mechanically and reduce noise. The best option would be to protect your coil in an appropriately sized ABS enclosure.

Assuming that you have followed all foregoing instructions and safety guidelines, you should have completed your treatment coil at this point. You should be ready to assemble all major components of your electromagnetic pulser after you have taken a well deserved break.

Making the Winding Jig

Tools required:

- Copping or Hack saw
- Electric drill and bits
- Screwdrivers
- Marking pen

Materials:

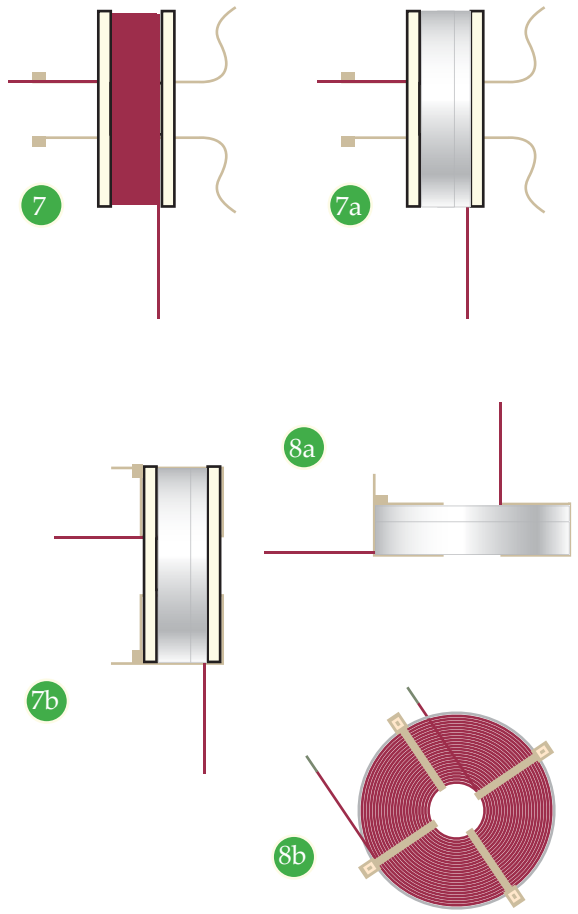
- Plastic cutting board
- 2 wood screws
- Cut 1.25 inch long from your mop wood handle

Step by Step Instructions:

1. Cut 2 pcs. 4" x 4" from Plastic Cutting Board. Be sure your wife is not around. Sand paper to remove rough edges.
2. Cut 2 slots for each 4" x 4" board that portion where you're going to put the plastic ties later.
3. Drill two holes at the locations of the board as indicated on the drawing.
4. Screw the boards to the 1.25" wooden handle, making sure that the slots for the ties are aligned.

You just made yourself a jig which you can use repeatedly for coiling. Next, you will be winding your treatment coil.

Winding Treatment Coil [continued]



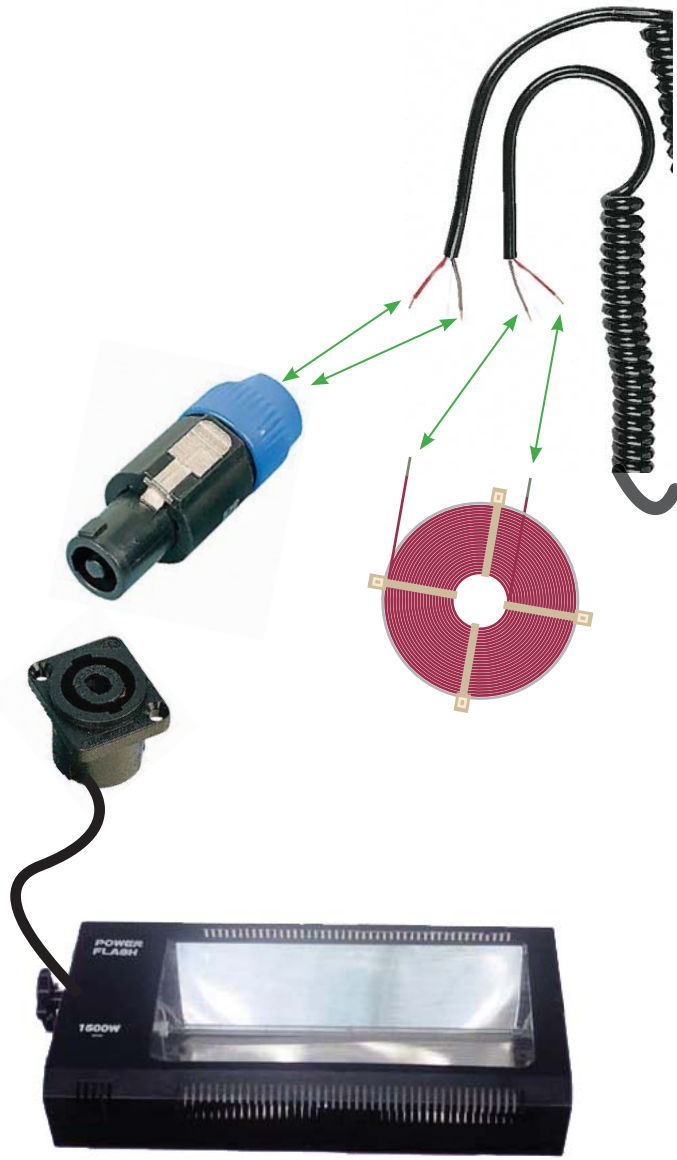
Assembling All Components

Once the treatment coil is made, you are now ready to assemble and complete your electromagnetic pulser.

At this point you are going to hack your strobe light to accommodate the female Neutrik connector. Please review Fig.11 again.

Step By Step Instructions

1. Assemble the female Neutrik connector using the Cable Wire (part #3) as per Neutrik instructions. Also, prepare the other end by stripping the wire insulations appropriately for connecting to the strobe light.
2. Remove strobe light cover by unscrewing it from the chassis. Do it carefully without breaking the glass.
3. With reference to our schematic diagram, trace the two wires coming into the terminals of the xenon tube. Although, you can cut either of them, for consistency sake, trace which of the wires is connected to the negative [-] terminal of the big capacitors - that would be the ground line all throughout the circuit. The ground return line is almost always connected to the metal chassis of most electronic equipment. You need to cut the other line, i.e. the positive [+] one. Before doing so, be mindful as these parts can store energy for long periods even when powered off. Short it out as per previous instructions regarding Safety First.
4. Once you've identified which of the two wires, cut it and strip out 1/2" of insulation to prepare for soldering with the cable wire of the female Neutrik connector.
5. Optional: If you are going to use a tool box, make a hole on its portable tray that could accommodate the female Neutrik connector. Cut the cable wire to just the right length before soldering it to the strobe light wire you've prepared in Step 4. The alternative is to install the socket right at the strobe chassis.
6. Check everything you've done. Tape all exposed or uninsulated wires. Clean for stray solder by using paint brush or vacuum cleaner. This will be your final inspection before testing your work for the first time. Be sure to clear the area of all tools and materials that aren't need anymore.
7. Turn all knobs (intensity & frequency) of your strobe light counterclockwise or "OFF" position. This is to reduce the power and possible damage if something is not right with your project. You will be turning on these knobs gradually after the next step.
8. Plug your treatment coil male connector to its female counterpart. The treatment coil itself should be farther from the strobe light to avoid feeding its electromagnetic field back to the circuit. Be sure there are no magnetic media nearby. Data could be erased.
9. Plug the strobe light and switch it on by turning the frequency control knob gradually clockwise. You might also increase the intensity by turning



the appropriate knob gradually clockwise. If the strobe light flashes and responds to your adjustments accordingly, then your job is done. However, if there's absolutely no activity, unplug the strobe light and trace back your work for possible omissions, improperly soldered, or loosen screws. Don't switch on until you have corrected the fault.

Using the Electromagnetic Pulser

In order not to overheat your strobe light, set the frequency to one pulse per second at most, and provide adequate ventilation.

You can use your EM pulser to electrify parasites in the tumor, lymphatic nodes, organs, and everywhere else you experience pain (e.g. arthritis). If you are coughing, place the treatment coil at your back tracing the lungs, three pulses at a time.

You don't need to use this equipment for more than 15 minutes. It would be just a waste of electrical power.

If after using for some time, you could sense that your pulser is not that effective, just add more power to it by adding more capacitors connected in parallel to existing ones. Here's how you do it...

Warnings:

- Don't use over any embedded electronic or mechanical implants, e.g. artificial pacemaker;
- Don't use directly in high salt concentration areas, e.g. crotch;
- Don't use in wet/high humidity areas; high power electricity don't go well with moisture and water.

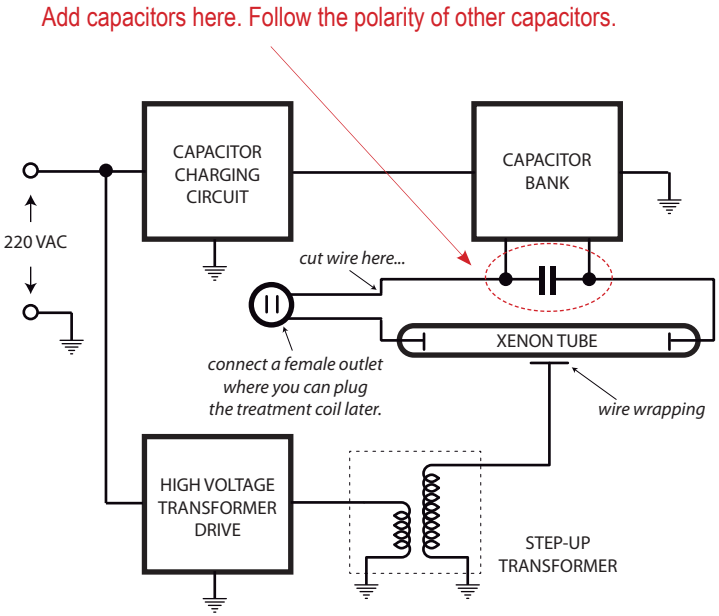
Adding Power to Your Wireless Antibiotic

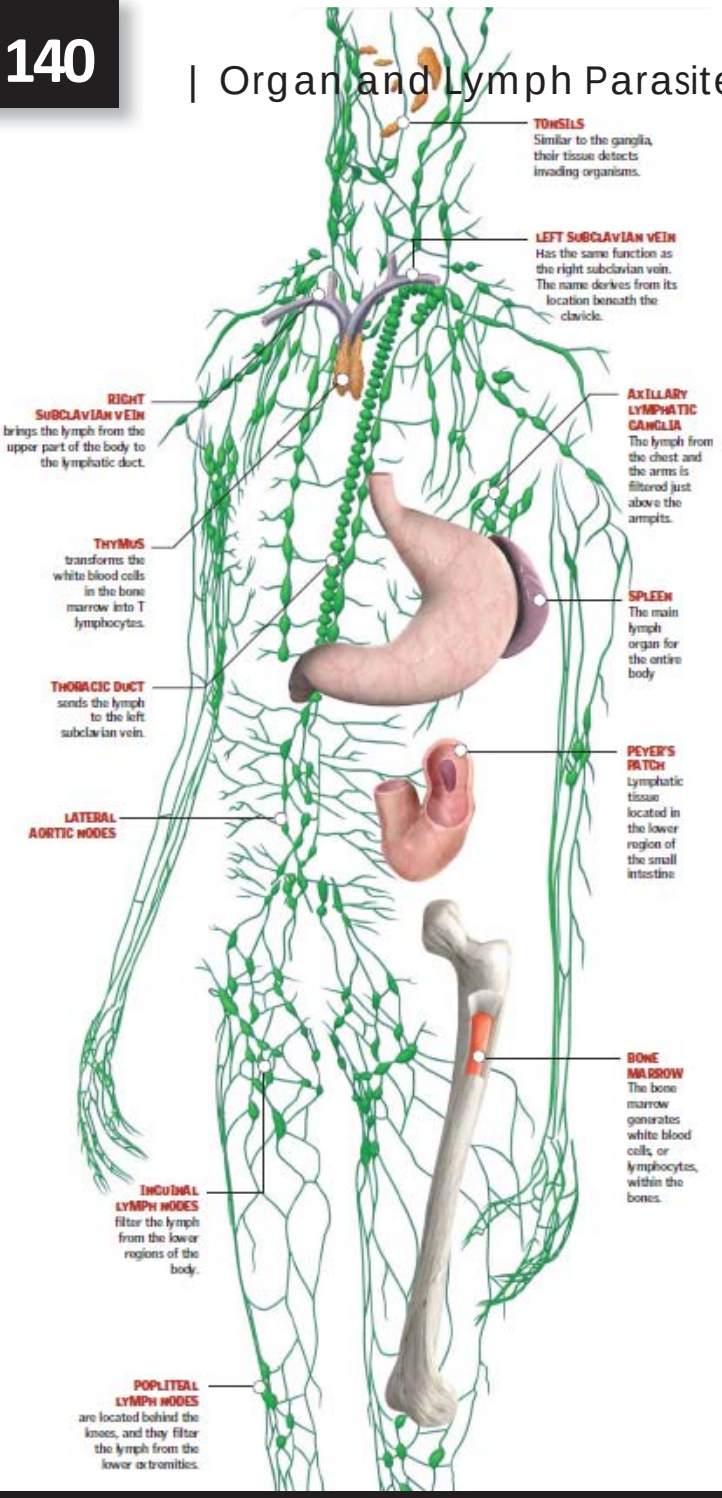
You can verify how powerful your pulser is by putting a metal washer over the coil and see how high it goes when pulsing. If you want to increase the power to your coil, you will need to add more *photoflash capacitors* in parallel to the strobe light, carefully observing consistent polarity (refer to Step 3 above). The limitation of increasing its power would be that point when the strobe light will not extinguish anymore prior to the next flash. Usually, you don't need to go beyond this point.

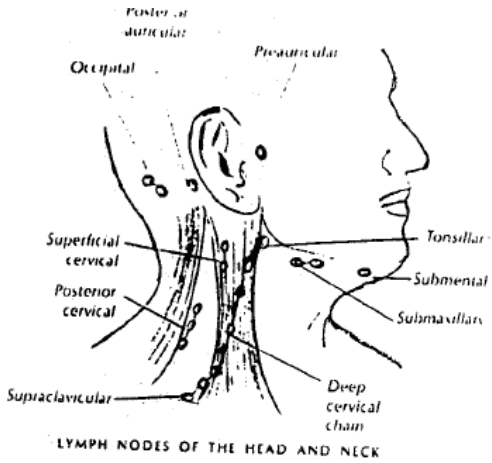
But if you strongly believe you need to do it, please consult those who are expert in the art, as they can find a way to dissipate capacitor energy more quickly. This is cheaply done by replacing the ballast resistor in favor of high wattage and high ohmic value.

Further readings:

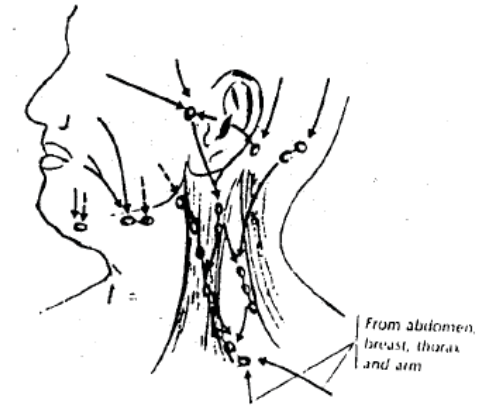
- Appendix - Basic Electronics Section







LYMPH NODES OF THE HEAD AND NECK



LYMPHATIC DRAINAGE OF THE HEAD AND NECK

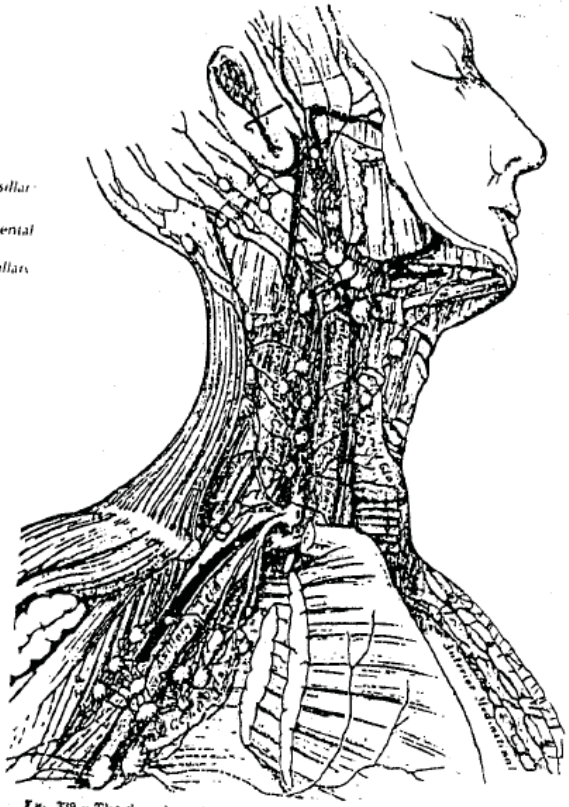


FIG. 319.—The deep lymphatics and glands of the neck and thorax.

The Lymphatic System

is a system of nodes scattered at strategic parts of the body to help in the fight against all types of parasites, and aid in the transport of a liquid known as *lymph* which contains *lymphocytes* and *macrophages,* both of which are part of the immune system. Sending electromagnetic pulses into these nodes neutralizes any parasites and will help the immune system to recover. The *spleen* is the largest lymphatic organ of the body. It also filters blood.

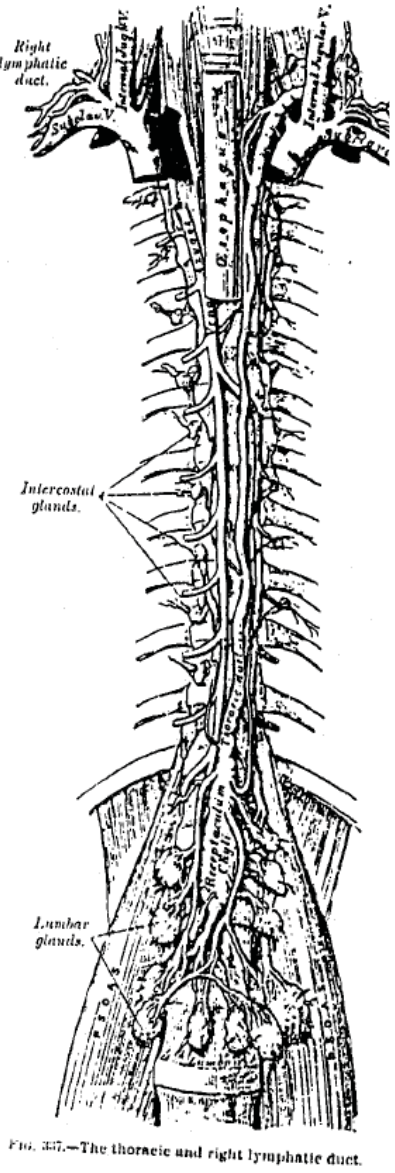
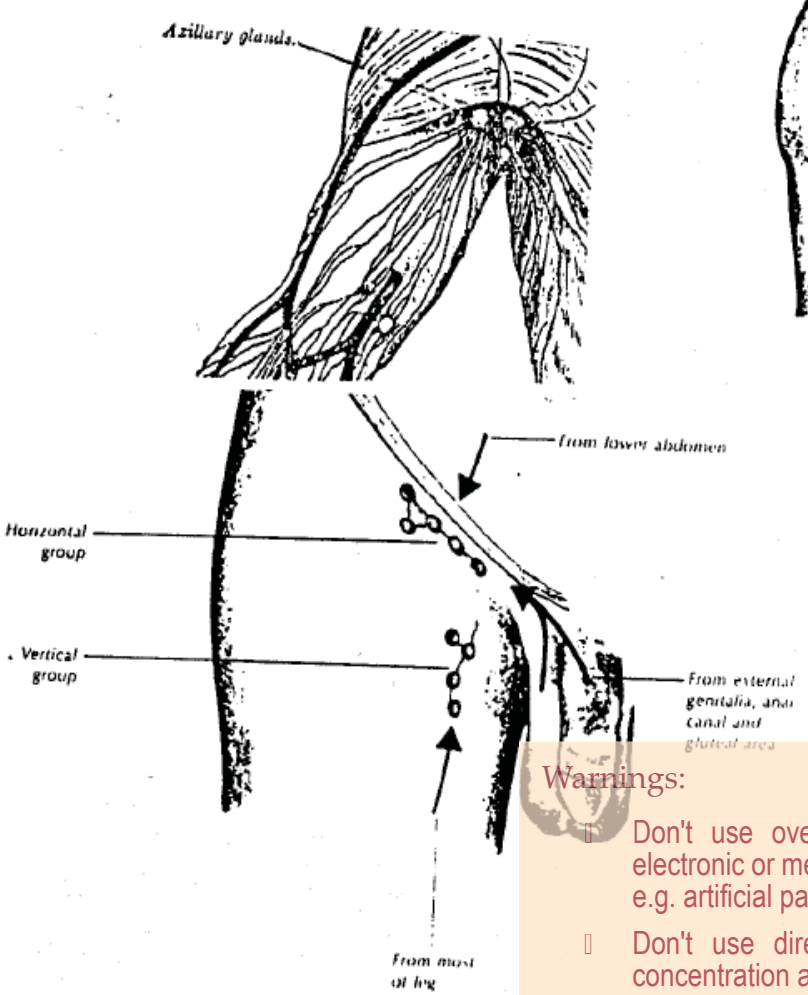
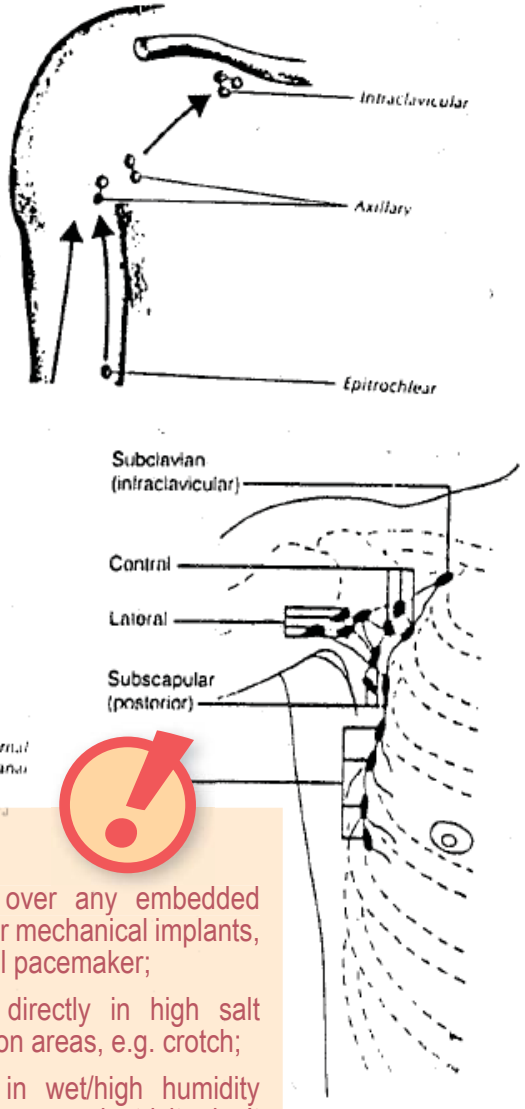
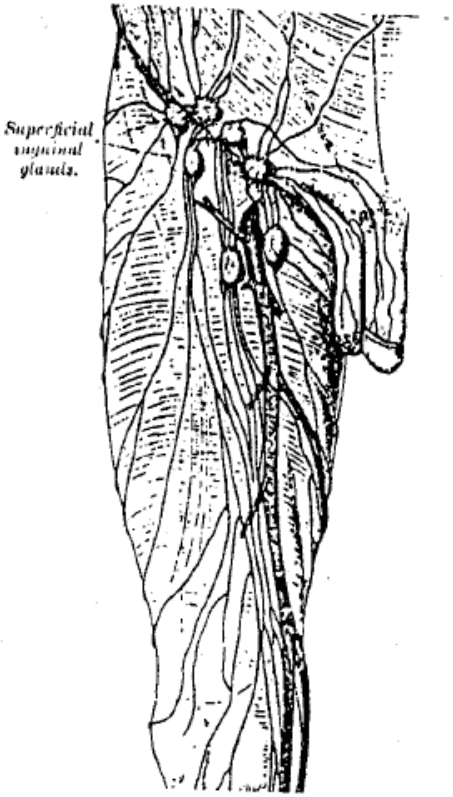


FIG. 337.—The thoracic and right lymphatic duct.







Warnings:

- Don't use over any embedded electronic or mechanical implants, e.g. artificial pacemaker;
- Don't use directly in high salt concentration areas, e.g. crotch;
- Don't use in wet/high humidity areas; high power electricity don't go well with moisture and water.

Illustrations: Bob Beck & Encyclopaedia Brittanica

In order to preserve the gains from all preceding treatments, we need to provide the body a sort of an immune booster that is not a drug nor herbal, but a naturally occurring element that has inherent wide-spectrum antibacterial and antiviral properties. It must also stay in the body for the entire duration of the rest period in between sessions. The best element that qualifies these criteria is *silver*.

Ionic silver is found to be effective against any bacterial and other parasitic infections for thousands of years. This tasteless substance can also be used to preserve food without refrigeration. That's why the aristocracy prefers *silverwares*.

I have a plant in a pot inside eClinik, and it survives until now without seeing the sun since December 2010, but only with weekly *silver irrigation*. Ants even decided to relocate and establish a colony there. These proved that this is naturally safe and effective in protecting any part of the biosphere from degenerating. Think what it can do to your own body.

Gold also has the same anti-parasitic properties, but is more expensive, only the church can afford it. After each mass, they just wipe it out with linen, and store it somewhere. The people who designed these rites knew exactly that parasites can't survive against gold and silver. But they're not telling us anyhow.

Why?

Homemade Silver Ions

Silver ions are so small it can be made to suspend on water and can penetrate even the very structure of any parasite effectively neutralizing them all. It is known to neutralize pathogens that cause more than 650 known diseases. And it stays in the body for about a week, more than what we really need.

It can also be used to treat minor to severe burns, sore eyes even for children, cancer,

AIDS, and all other parasitic diseases.

This silvery solution is more popularly known as *colloidal silver*, and is now available at a very high price. Some are even patented and branded.

However, you should not be intimidated by this because you can make your own colloidal silver at the comfort of your own home, with the same quality or even higher and at a fraction of the cost.

When making your own silver colloid don't use just any type of silver. Just use 99.99% pure silver as minimum. Ask for an assay from your supplier. Silver can be purchased as bullion or wires. For our purposes, just use #14AWG silver wire 99.99% or 99.999% purity.

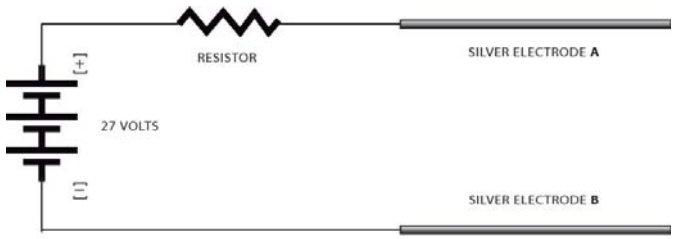


Figure 12 Silver Colloid Maker Schematic

Here's how you do it...

Materials for Making Colloidal Silver

- Silver wire, 99.99% purity or higher, 14awg, 2ft
- Battery, 9volt, 3 pcs.
- Resistor, 360 ohms
- Hookup wires with alligator clips, 2pcs.
- Battery clips, PP3, 3pcs
- Terminal block, 1pc
- Laser pen
- Timer with alarm

Assembling Silver Colloid Maker

1. Cut two 6-inch long silver wires (electrodes). Keep the extra 1ft silver for future use, say, when waiting for the next reorder to come.
2. Secure these two silver wires by inserting into and tightening the screws of the terminal block, making sure there is at least 1 inch of separation

between and throughout the entire length of the electrodes.

3. Connect one terminal of the resistor to one silver wire; do this at the terminal block (refer fig.13); tighten the screws securely. The purpose of this resistor is to provide ballasting [i.e. loading] in cases when the two silver electrodes are shorted.
4. Insert battery clip one each for every 9v battery; in electronics, the darkest color is always the negative, i.e. red is positive, black is negative; series connection means "head to tail", i.e. connect the negative [-] terminal of the first battery to the positive [+] terminal of the second battery, then, connect the negative terminal of the second battery to the negative terminal of the third battery. You now have a series connection which will give a total voltage equal to the sum of each battery voltage, which is 9v + 9v + 9v = 27v.
5. Have a glass of distilled water on the table. (You can also use filtered tap water. We are just being consistent with the timing later on. The quality and temperature of water affect the actual duration of making a colloid.)
6. Place the silver electrodes into the water with terminal block resting at the lip of the glass. Make sure no electrode is touching any part of the glass.
7. Connect one hookup wire between the free terminal of the resistor and the positive (red) wire of the battery assembly. Connect the other hookup wire between the negative (black) wire of the battery assembly and the second silver electrode (refer Fig. 13). At this point, the whole circuit is already switched ON, even though visually, you may not notice any activity.
8. Log the time you started making your colloid. Set to alarm in 15 minutes.
9. Verify if there are already silver ions suspended in water by casting a laser beam into the water in the glass using a laser pen. Normal untreated water scatters the laser beam, but a coherent light is observable with silver colloid.
10. After 15 minutes, you should have made yourself the most potent, yet very safe, antiviral and antibacterial solution on the planet!
11. Store your colloid in a dark bottle. Light, temperature, and magnetic field can affect your silver colloid, so keep it away from any electrical devices and the kitchen. Don't refrigerate. To keep it always fresh, make volume just enough for a week as maximum. Shake well before taking in stored colloid.

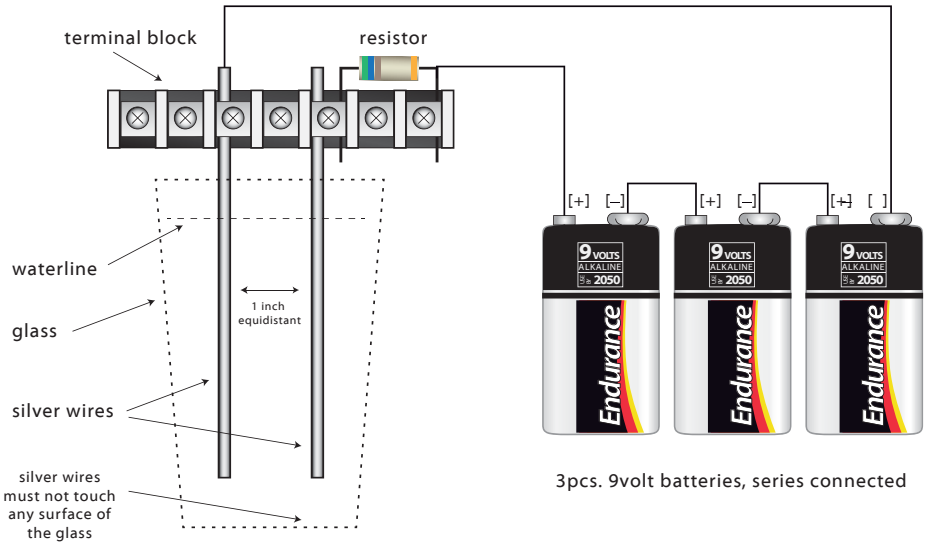


Figure 13 Colloidal Maker Wiring Diagram

Notes: *Silver Colloid is yellowish in color. With the above procedure you should be making 3-5 ppm of silver colloid, depending on the temperature and quality of water. This procedure may also take longer when the battery power is weak upon repeated use.*

Recommended Dose for Silver Colloid

Shake well before every use. For adult therapy, take 20 ml daily of 3-5 ppm silver colloid. Store colloid in dark glass bottles, and you should not store it for more than a week. Fresh colloid is always the best, that's why buying ready-made colloid may not be a good idea.

Fear Mongering Abounds

Some have taken a glass of colloidal silver once a week, aside from the daily dose. I've also tried this on several occassions, and my skin didn't turn blue. You don't need to do this. A daily 20ml of 3-5ppm silver colloid is enough.

The blue man, as shown by CNN, is said to be suffering from Argyria, the overdosing of silver. But they won't say how much this man had been taking. Were they really just expressing concern over our health, or the health of their sponsors? Pity this man for being used for fear mongering.

Those who are selling bottled silver colloid are also spreading half-truths against homemade silver colloid for being unsafe, and only their "controlled" methods can really produce a real colloid. Wrong. Their products will be stored, and during the storage time, silver ions will lose its *ionic* or *charged* property. It is this electrical charge that makes ionic silver a very potent antiviral and antibacterial agent. It is also this property that makes the substance suspend in a solution which make it colloidal. Therefore, silver colloid is both ionic and colloidal. Over time, ionic silver will lose this charge due to environmental factors. That is why it is to your advantage to make your own silver colloid constantly fresh at home!

You can't control the media, but they can. Fortunately, you can control how you make your own colloid.

So if you are not sure who to believe, the media or this view, just ask Rupert Murdoch.

Verify anti-microbial

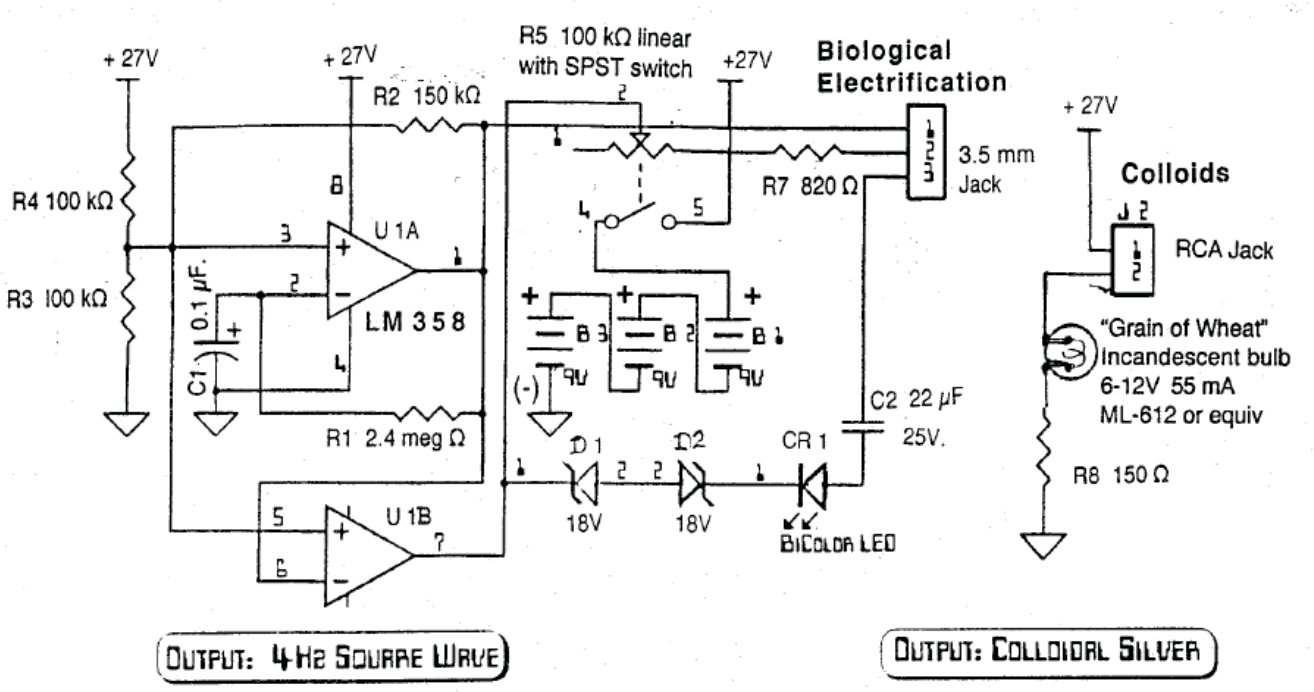
- Try the same experiment I have regarding plants. If you have backyard garden or an office flower pot, try putting some colloidal silver in them. Observe how many days before leaves start to turn yellow and fall. You can avoid this by irrigating again with colloidal silver.

Verify naturally safe

- Try giving some silver colloid to pets via their drinking water or milk. Don't be surprised if they won't eat the same meal again without it.

Improvements You Can Do

Once you've finished assembling your Blood Electrifier and Colloid Maker you will realize that since both are using 3 x 9-v batteries, they can be integrated into one enclosure to take advantage of using only one set of power supply. This is the object of the original Bob Beck design.



"Two and half years ago, I... weighed 290 pounds. When I started using this blood cleaner, I mysteriously lost a 130 pounds without changing my diet in any way, without exercising...

So I asked myself, why in the world did this thing that I built for about $20, make me lose all this weight, make my hair grow back?"

- Dr. Robert C. Beck, DSc.

Reviewing the eTherapy Protocol

Each of the five protocols required a lengthly discussion such that we may have lost track of their symbiotic relationship.

Protocol	Purpose	Dosage/Duration
Acidity Neutralization	Restoring normal alkalinity levels (7.4pH) by taking 5% baking soda solution wards off most parasites.	1 glass of 5% baking soda solution; daily
Cellular Oxygenation	Oxygenation makes healthier cells, wards off most parasites, and oxidizes toxic chemicals. Ozone is delivered by drinking ozonized water.	5 to 15 minutes water ozonation; drink within 5 minutes (ozone is unstable)
Detoxification	High water intake and baking soda enema could help the liver and kidneys remove high volumes of neutralized parasites resulting from the other treatments.	1 glass of clean ozonized water per hour
Blood Electrification	Alters the protein layer of any parasites flowing with blood, hindering them from replicating until they are removed from the body through detoxification.	5mins to 2hours depending on severity of the condition and the capacity to detoxify properly; daily
Organ & Lymphatic Electrification	Neutralizes parasites lurking within the organs, the lymph nodes, even the head and all other parts of the body unreachable by blood.	5-15 minutes; daily
Preserving the Gains	Prevents reinfection; neutralizes all forms of parasites in between eTherapy sessions	20ml (adult) or 10ml (child), 3-5ppm homemade silver colloid

The durations for both blood and organ electrifications should be reduced to the minimum of 5 minutes, if detoxification can be a problem. In this case, detoxification and cellular oxygenation protocols should be at maximum as possible. Use your own good judgment here, aided by careful observations and common sense. You don't have to memorize anything, just record your activities and progress in a logbook and use simple logic.

Remember, it's all about cleaning the body from toxic chemicals and getting rid of the parasites. Once these two requirements are fully satisfied, your own immune system will return to its full functionality and the body can heal itself. A good indication of a functioning immune system is a red swelling or *inflammation* at the point of infection. This means that the blood, the core component of your immune system, is concentrating its attack on that particular infected area.

No need to speed up the recovery by longer treatment durations. That could be disastrous. There's a very high volume of live parasites during the first weeks of your treatment. That means you will be neutralizing high volume of parasites, too, at any given time. So, just start slowly and detoxify efficiently. Your liver and kidneys have limits. If your condition has not improved, that means you're not detoxifying properly. The lack of water will be the root of all your problems during these treatments.

If you ever want to play with treatment durations, do it when you are already sure that parasitic population is already insignificant. Always remember, electrification can result to *electroporation*, i.e. increased absorption rate of any substance, you may have consumed or inhaled, by the blood plasma in which case even vitamins can become poisons. Reread and follow *Chapter 1* **Precautions** before and during your treatments.

During post recovery, depart from the treatments gradually by reducing the treatment durations in diminishing increments of fifteen minutes (blood electrification) and one minute (magnetic pulsing) per session. This allows the immune system a smooth transition from being in *assisted-mode* (treatment mode) to *auto-mode*. This prevents you from experiencing mild colds and coughs which suggest that maybe your immune system may have reset back to when you were still an infant, it forgot the definition of *adenovirus*. When remission is confirmed, silver colloid doses will also be reduced to 10ml (3ppm) for maintenance purposes only.

Update [Oct.31,2011]:

I just have a cold a few days ago, and I noticed that even if I have performed blood electrification to get rid of the cold, it wasn't enough. So I did a few stretching to force my blood to circulate or penetrate the entire body, and that's the time I got rid of my runny nose almost instantly. I discovered this when I noticed an improvement after I visited my aunt and hurried home just walking.

This indicates that you need to do some exercises like brisk walking, stretching, or anything that you can do even when you're bedridden.

Let this be part of the eTherapy Protocol then.

THE HEALTHY LIFESTYLE

7

Assuming that you have gone through the whole eTherapy and has recovered from all illnesses, it is now time to preserve the gains to prevent yourself from undergoing the same routines again, although no one is really preventing you from doing so.

Here's how to prevent reinfections:

- Clean your house thoroughly from toxic fumes, asbestos, Freon and other deadly chemicals. Relocate garage farther away with its own roof. You should have done this prior to the treatment.
- Regulate acidic intake. Refrain from eating processed or instant food. You don't have to be a vegetarian. Some amino acids can only be sourced from red meat.
- Ozonize all fresh fruits and vegetables. Much better if you can grow your own crops. Study permaculture if you own a piece of land or are planning to acquire one.
- Detoxify regularly. Always take a generous amount of water, preferably ozonized.
- Take regular workouts. It reduces tension and job related stress, and forces the blood to supply much needed oxygen throughout the entire body.
- Restrict interaction to forward looking individuals and avoid defeatist intercourse.
- Share your wonderful experience with these methods. A healthier community can make you physically safe.
- Avoid smoking cigarettes or drinking synthetic liquors. Take wines in moderation. Hemp is a lot better than nicotine or alcohol. Read about Hacking the Brain... in the next section.
- The cause of anxiety is not knowing well enough. Be resourceful. Use internet time not just for socializing but for getting real education - one that would lead you to the illusive world

of wisdom, there's a different kind of pleasure that can be derived in such pursuit; good resource materials are free;

- There's more to life than your 9-5 job. Explore the grandeur of Nature.

Discover your own self and be daring to try something new. It’s an adventure unto itself. Never forget, the world is how you make of it.

Brain Hacking: Get Rid of Alcoholism & Other Addictions

The reason why it's hard to deal with alcohol and nicotine addiction is because these are chemicals which accumulate into your system. Addiction can only be eradicated if your system is cleansed completely from these toxic chemicals.

The problem is how can you remove something you don't really know about. You don't know exactly what these chemicals are, i.e. nicotine is not the only ingredients they added in a cigarette.

To effectively eradicate alcohol, cigarette, all mood altering drug addictions, we need to:

- stop its consumption by using electronic substitute to satisfy the urge to *get high,* and;
- remove all toxic chemicals from the body using ozone detoxification

Ozone detoxification does not necessitate that we know what chemicals we're dealing with beforehand. It oxidizes them all. Just don't inhale on it directly. Lungs have limits, too.

Cranial ElectroStimulation [CES]

When a person is a drug user, heavy smoker or certified alcoholic, his chances of getting sober is limited. Quitting abruptly from any of these vices is like climbing Mount Everest on a winter's day. It's not only hard to deal with withdrawal symptoms once a chemical dependency is established, it could be fatal as well. It is estimated that 75% of those who have gone past this withdrawal stage backslided.

Mood altering drugs alter or shutdown the production of endorphins. *Endorphin* (endogenous morphine or built-in morphine) functions as *opiates* in their abilities to produce *analgesia* and a feeling of well-being. Endorphins are produced by the *pituitary* gland and the *hypothalamus* during excitement, exercise, pain and orgasm.

CES is a technology that completely restores the normal production of endorphins. 20-40 minutes a day of treatment could avoid the withdrawal syndrome associated with abrupt stopping from the use of mood altering chemicals. This is a technology that has been tested to work for at least 50 years, and is said

to be more than 100 years in existence. If you haven't heard about this from your favorite TV station, consider these facts:

Mood altering drugs, cigarettes and liquor are a multi-billion dollar industries and Big Government benefits from it too, just like it benefits from the oil industry through taxes. Big Pharma, the consistent Fortune top 100 company and one of the biggest advertisers would stand to lose if a cheap non-consumable alternative comes along that could do a better job by not only eliminating the use of chemicals but by avoiding the withdrawal experience and still getting *high* in the process.

Neural electromagnetic waves can be detected using electroencephalogram (EEG). Some of these brain waves already identified (Wikipedia) are:

- Alpha wave (8-12Hz) - relaxed mental states
- Beta wave (12-30Hz) - normal waking consciousness
- Delta wave (0.5-4Hz) - deepest stages of sleep
- Gamma wave (25-100Hz) - unity of conscious perception
- Theta wave (4-7 Hz) - learning and memory
- Mu wave (9-13Hz) - diminished with movement, intent to move or observation of movement

Bob Beck, on the other hand, identified: between 90 to 111.11 Hz as the frequencies where *beta-endorphin* productions are stimulated which we can use to reduce the effects or completely avoid withdrawal symptoms; 2.72 KHz for cellular regeneration (Becker); 7.83 Hz displayed by authentic shamans; *theta wave* (4-7 Hz) believed having to do with creativity, etc.

CES Resistance & Capacitance Values

Objective	Target Frequency	Capacitance	Resistance
Problem solving; creativity, learning and memory	4 - 7 Hz	0.1uF	2.4 MegaOhm (4.2Hz) no need to change anything in your control module; just construct the earlobe treatment cable
Endorphin	90 to 111 Hz	0.1uf	110kOhms (90.91Hz); 100kOhms (100Hz); 90kOhms (111Hz)
Exploring *shamanism*	7.83 Hz	0.1uF	1,277,139 ohms (exact value); to be able to get near the exact value, use 1.2MOhm in series with 75kOhm (7.84 Hz) all 1% tolerance. A more precise method is to use 100k trimmer instead of the fixed 75kOhm, but then you need to measure the actual total resistance by using a digital ohmeter.

For other purposes, find resistance values using this formula:

$$R = \frac{1}{fC}$$

Or,

$$ohms = \frac{1}{hertz \times farad}$$

Example: target frequency = 7.83 Hz ; fixed capacitance = 0.1 microfarad

$$ohms = \frac{1}{7.83hz \times (0.1 \div 1000000)farad}$$

$$ohms = \frac{1}{7.83\ hertz \times 0.0000001\ farad}$$

$$ohms = \frac{1}{0.000000783}$$

$$ohms = 1{,}277{,}139$$

To use these resistance values, just replace the 2.4 megohm of your blood electrifier with either of these resistors, depending on your requirement or purpose, and construct another set of electrodes, in lieu of the treatment cable, that you can connect to your ear lobes or the head through the back of your ear.

Use the same procedures, i.e. wrap each earlobe electrode with 100% cotton and moisten with sea salt solution for better conductivity. Set *intensity knob* to zero before switching on the *control module* (blood electrifier). Adjust until a vibrating sensation is felt. In this case, the intensity need not be too high; low to moderate is enough. Treatment duration will be from 20 to 40 minutes; no further benefit can be derived beyond 40 minutes.

Warning: You cannot use any drugs, medications, herbals, vitamins during the entire treatment days to avoid virtual overdosing due to *electroporation*. Drink as much ozonized water as possible, because you could be neutralizing some parasites, too, during this process. Read *Chapter 1* ***Precautions*** and follow all precautionary instructions.

Do the CES daily in a quite and relaxing environment. You should be off the hook from any addiction within 30 days or so.

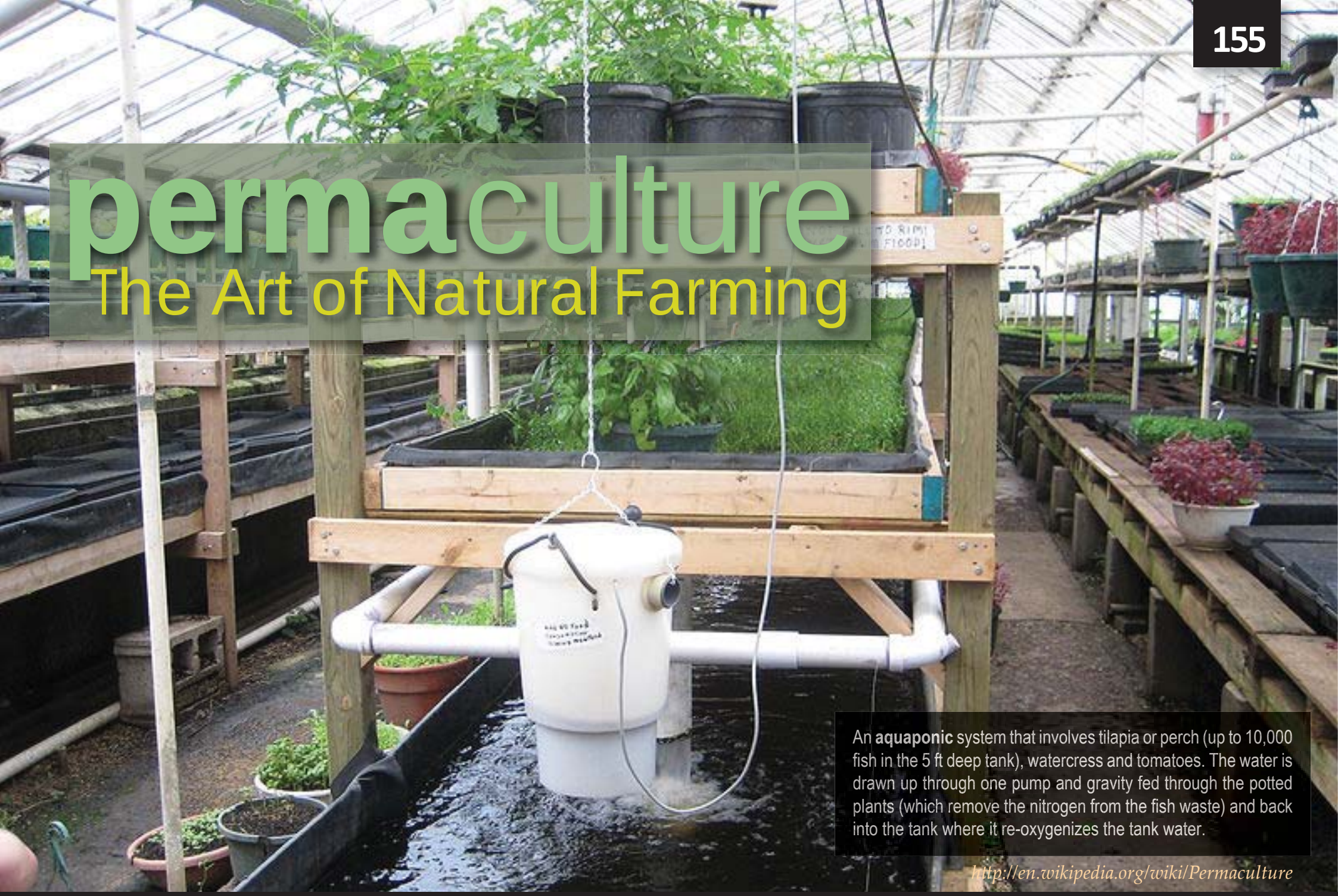
In your free time, do some extensive research on this fascinating area, and explore other frequencies and circuit designs that you may find useful.

Don't forget to share your wonderful experience to the public.

Free CES circuits here:

http://www.hackcanada.com/homegrown/wetware/ces/index.html

permaculture
The Art of Natural Farming



An **aquaponic** system that involves tilapia or perch (up to 10,000 fish in the 5 ft deep tank), watercress and tomatoes. The water is drawn up through one pump and gravity fed through the potted plants (which remove the nitrogen from the fish waste) and back into the tank where it re-oxygenizes the tank water.

http://en.wikipedia.org/wiki/Permaculture

Permaculture is something I've never heard until three years ago. When I was still in grade school we were taught that *crop rotation* is the best method of preserving soil fertility. I'm convinced that permaculture is a lot better. So, what is permaculture exactly?

The best way to understand *permaculture* is to take a deeper look into how Nature grows its own crops. Take a mental journey into the untouched Amazon jungle about the earliest part of the last century. Ask yourself what exactly is happening there. Here are some sample observations you might come across:

- Plants and trees grow by themselves, that's fairly obvious right?
- There's no singularity as to the kind of species that grow in a given area; there's always some degree of assortment. In fact it is the rule rather than the exception.
- Bigger trees casting shadows on some plants that seem to prefer cooler spaces.
- Insects, birds, and all sorts of crawlers abound.
- There seems to be full harmony among all forms of life in there.

These observations are more than enough to support the logic that if we can imitate the designs of nature in our own backyard, we could have a source of food that is self-sustaining, i.e. once the design and all works are done we don't have to do the job again and again, but the backyard farm will just produce enough food we need, perpetually.

This is in stark contrast to the monotonous industrial plantations we see prevalent today that is the cause of deteriorating conditions of the top soil, necessitating the use of fertilizers and pesticides, which further its destruction in the process.

So if you have a piece of land just lying out there or if you have a large open backyard, permaculture is more than worth trying.

Permaculture was perfected by **Bill Mollison** and **David Holmgren** in the 1970s.

Further reading:

- *Permaculture - A Designer's Manual by Bill Mollison 1988*

Implementing PermaCulture

According to Patrick Whitefield, there are now two general types of permaculture: original and designed.

Original permaculture closely mimics natural forest by using land extensively. A *designed permaculture* employs the help of "*hardwares*" to implement the same principles as close as possible on a *limited space*. This type of micropermaculture is shown two pages before this text. So the size of the project determines which way to go, i.e. for bigger land use the original type and for backyard gardening use the designed type of permaculture.

Holmgren's 12 Design Principles

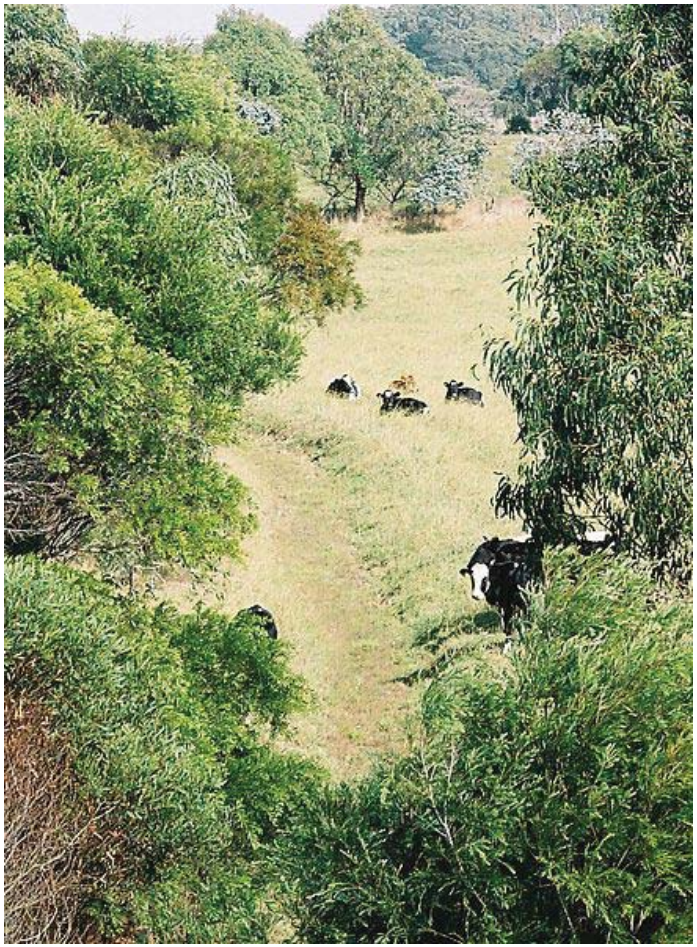
One of the innovations of permaculture design was to appreciate the efficiency and productivity of natural ecosystems, to use natural energies (wind, gravity, solar, fire, wave and more) and seek to apply this to the way human needs for food and shelter are met.

- **Observe and interact**: By taking time to engage with nature we can design solutions that suit our particular situation.
- **Catch and store energy**: By developing systems that collect resources at peak abundance, we can use them in times of need.
- **Obtain a yield**: Ensure that you are getting truly useful rewards as part of the work that you are doing.
- **Apply self-regulation and accept feedback**: We need to discourage inappropriate activity to ensure that systems can continue to function well.
- **Use and value renewable resources and services**: Make the best use of nature's abundance to reduce our consumptive behaviour and dependence on non-renewable resources.
- **Produce no waste**: By valuing and making use of all the resources that are available to us, nothing goes to waste.
- **Design from patterns to details**: By stepping back, we can observe patterns in nature and society. These can form

http://en.wikipedia.org/wiki/Permaculture

the backbone of our designs, with the details filled in as we go.

- **Integrate rather than segregate**: By putting the right things in the right place, relationships develop between those things and they work together to support each other.
- **Use small and slow solutions**: Small and slow systems are easier to maintain than big ones, making better use of local resources and producing more sustainable outcomes.
- **Use and value diversity**: Diversity reduces vulnerability to a variety of threats and takes advantage of the unique nature of the environment in which it resides.
- **Use edges and value the marginal**: The interface between things is where the most interesting events take place. These are often the most valuable, diverse and productive elements in the system.
- **Creatively use and respond to change**: We can have a positive impact on inevitable change by carefully observing, and then intervening at the right time.



http://en.wikipedia.org/wiki/Permaculture

General Structure

An ideal permacultural system possesses the following structural features:

- Large trees dominate but not saturate the area, i.e. there exist patches barren of trees.
- Edges that create special favorable conditions exist.
- Initially the system is in a state of controlled—possibly ongoing—ecological succession.

Other factors affecting the final design is to consider natural *patterns* and *zoning*. A careful designer should observe patterns like the movements of the sun, wind, and the interdependence of a particular group of species. Zoning is the process of placing the right element at the right place. Wild varieties of plants should be located farthest to avoid interference and more frequently interacted with elements should be more accessible. Unless the modification would further enhance the productivity of the whole system, the final design must respect and adapt as

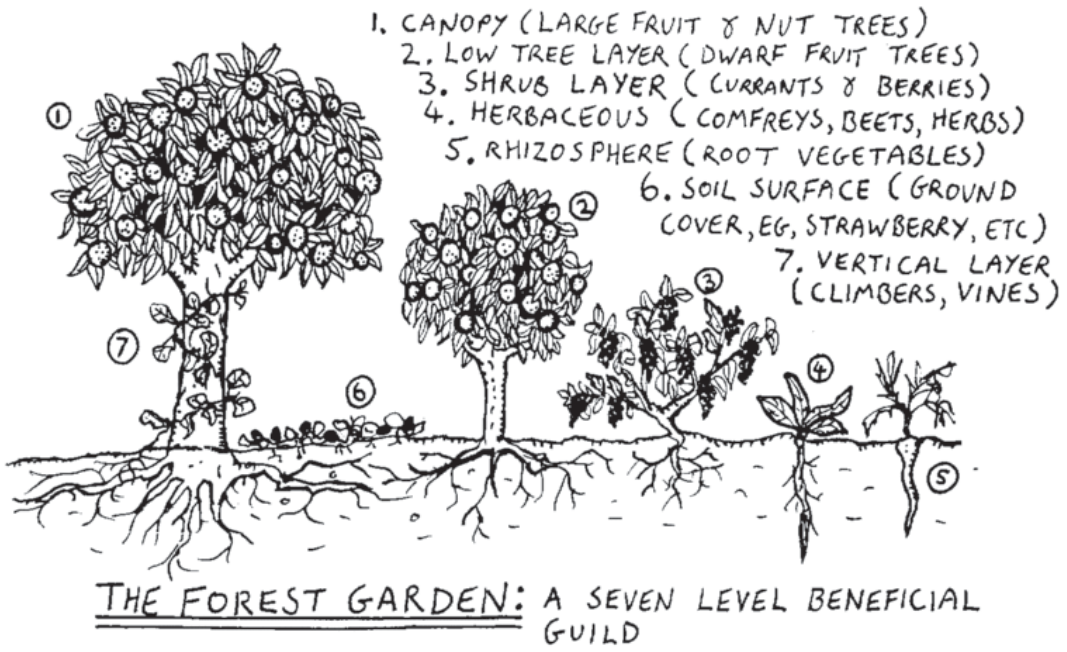
much as possible to the natural design of the available landscape.

Can PermaCulture Cure Cancer?

When I was still a kid, my father told me a short anecdote about a very rich man that is about to die of cancer. He's given only a week to prepare for the inevitable. So he asked himself, "what am I to do with all these riches?" The first thing that comes to mind was never philanthropic, but to tour around the world until his last breath which is still, to some degree, justifiable.

While he's onboard the luxury ship and toured the Caribbean, Puerto Rico, among others, the women and the beaches, all these gave him pleasures but not as much as looking at the swirling waters behind the stern of the ship where the large propellers below were. He spent much of his time every day on this part of the ship until it was time to disembark.

As he stepped into the last plank, he was greeted by his loyal chauffeur and his private doctor who was astonished that his own grim forecast never happens as it was made three weeks ago. Elaborate laboratory tests soon followed, and finally a confirmation had come



http://en.wikipedia.org/wiki/Permaculture

that no traces of his cancer were left.

What cured his cancer?

Was it the luxury ship, the sexy Puerto Ricans, or the sandy beaches, or the swirling waters at the back of the ship?

Somehow, just forgetting the problem exists allows the problem to take care of itself. This is mostly the case of our own body, i.e. the lesser the artificial intervention, the greater its chance of recovering.

So the next time you're looking for an escape, do it with Nature.

Create and escape to your own forest. Do a permaculture today!

Summary

A *healthy lifestyle* is not something we can buy off the shelf as most of us are now used to. It is a process of deeper self-involvement, of immersing oneself into the whole idea of creating a new environment where one could commune with nature and still effectively intercourse with society at the comfort of his own home.

The use of nontoxic chemicals for hygienic purposes or the employment of electronic alternatives in lieu of synthetic mind altering drugs and drinks, free the liver and kidneys from working too hard in removing these toxins. Your body's energy will be focused more on making you more beautiful, literally, negating the use of *make-ups* containing lead and other heavy metals that can cause cancer. You'll not be covered with wrinkles, or lose much of your hair, untimely.

Remember, the outcome can be seen in your physical and mental state. They can always see it. Once you have established all that were suggested pages before, people will be coming in droves and you will have fun explaining these uncommon ideas to them. That's when you'll find self-satisfaction in what you are doing.

The positive attitude you put into the things you do from hereon, will be reinforced by the positive feedback you'll be receiving soon.

It will be a whole new world for you and your family. You'll be watching your children grow in a very optimistic direction nurtured only by a very progressive environment.

What you can learn from studying and doing permaculture is beyond the physical. You will have a better understanding of how Nature behaves and the true meaning of Life itself. You will have a more profound understanding of your relationship with everything around you and that's when you begin to understand what *spirituality* is really all about.

The systems you'll be building on, i.e. the electronic anti-parasite system and permaculture, will pay for itself soon enough. Both the electronic-based *free medicine* and the permacultured *free organic food supply* systems will provide you and your family with a healthier and more sustainable future. Indeed,the best things in life are still free.

Rediscover them.

"In a resource-based economy all of the world's resources are held as the common heritage of all of Earth's people, thus eventually outgrowing the need for the artificial boundaries that separate people. This is the unifying imperative...."

Jacque Fresco, Inventor / Social Designer

BEYOND HEALTHCARE

8

As you can see, the technologies to improve our condition were already there. It just ran counter to the system we're still in, a system that encourages the continued production of substandard goods and services to keep sales coming in order to profit more. With this system, the product must fail thru *planned obsolescence* in order to force us to buy again and again.

The drugs must eliminate the symptoms or hide the pain in the meantime, to fool us into believing that the disease is gone, when in fact, the root cause still remains and will develop to a far more severe condition requiring more expensive cocktails later on.

The artificial hip joint must fail over time, and the cellphone must be outdated so that the dizzying cycle of demand, production and profits continue, and so is the accumulation of industrial wastes in which the recycling rate has not gone beyond public relation circus.

If we continue at the pace and mindsets we are today, we will be buried alive from the mountainous industrial garbage that we could not recycle effectively.

Monetary-Based Financial System

The prevailing socio-economic system is one that is designed to fail.

Currently, money is a prerequisite to human survival. Work is the ticket to gain access to it. Automation defeats employment. How many have been displaced from jobs due to automation?

Capitalism has never been true to its promise

industrial wasteland

of the wiser allocation and utilization of available resources but the endless production of hazardous wastes, unstoppable economic displacement of the many and encourages widespread corruptions within every fabric of our society. It encourages selfish attitude towards each other for in order to achieve security and future stability, we must be shrewd and void of compassion.

What is deceptive though is that, in its many forms, the same entity that promotes greed is the same entity that tells us the virtue of self sacrifice and compassion. They call it thesis, plus anti-thesis equals *synthesis*. The object of synthesis is to displace the mind far from the truth and soak it in a sea of grossly manipulated reality imposed by many of its institutions.

Can We Blame Science?

Technology, it's never been the culprit. If we must improve our lives, we should continue to advance technologically and eliminate the system of greed that is inherent in a monetary-based financial system, and turn to a saner, more humane *resource-based economy*.

In the resource-based economic system, all resources including technological knowledge are made freely accessible to everyone. This will encourage unhampered creativity and the world will see advances never before imagined. In this obviously untried system, technology is allowed to help alleviate human sufferings instead of aggravating them. Suppressed free energy systems, nonchemical-based food production techniques such as *permaculture*, and non-lethal medical applications of electromagnetics are thereby promoted. Heavy, hazardous and repetitive boring jobs are best assigned to robots.

This new idea, a product of 60 years of deep contemplation and hard work by one fine inventor and socio-cultural designer **Jacque Fresco**, is the only viable solution

when technology is competing with our skilled laborers and becoming virtually antagonistic against the well-being of the working class. Advancing technological know-how and monetary-based economy are simply incompatible.

If all technologies we have today are fully implemented, money would be rendered irrelevant. This one primordial revolutionary idea, that is already gaining ground among the youth around the world today, will spur an explosion of far greater ideas which can all be brought to fruition and never be hampered by limited resources again.

If you have not lost your idealism yet, this might be worth considering. Explore the **Venus Project** and join the **Zeitgeist Movement**.

What is the Venus Project?

The Venus Project is the implementation of an idea that science and technology is the primary key to sustainable living, and not unimplementable rules and regulations.

When there is a coherent approach in planning and production of residential communities and urban centers using all available know-how, including those that are currently under suppression, full automation including robotics and wiser allocation of material resource, waste and pollution would be minimized substantially or completely eradicated. As a result, people will live healthier and peaceful, and will have saner disposition.

These implies that all resources must be made freely accessible by the public and let them decide, instead of middlemen, on what to do with it. Right now, every individual can only gain limited access to these resources through the use of money. Not so in this resource-based economic system which is incidentally the only system compatible with suppressed free energy and free medicine technologies.

THE VENUS PROJECT
BEYOND POLITICS POVERTY AND WAR

How Can We Implement The Venus Project?

Any revolutionary idea requires a social revolutionary action.

A revolution requires a decisive, radical, enlightened mindset. Bear in mind we are not talking here about the usual choice between democracy and communism for they are just two sides of the same coin. This is about cooperation and respect. This is about the complete removal of the control structures populated by men who, even in their best efforts, cannot make good decisions all the time and, in lieu thereof, we will use fully automated system preprogrammed to make accurate decisions all the time.

Machines are not subject to moods and opinions which are influenced by so many factors. Machines perform as they are designed. And they are reliable doing the same thing repeatedly all the time. And when they become inoperable, replacing them do not require lengthy legal procedures.

One of the best examples that Fresco illustrated to emphasize the wisdom of using technology instead of men is in the control of street traffic. On the road we see traffic lights in intersections to indirectly prevent collisions. In that system, we use signaling system of differently colored lights to inform the driver the course of action to take. We must remember that before signal lights were used, there was a traffic policeman waving his hands to do the same job of controlling traffic. The used of signaling system is therefore quite an achievement already to avoid lung cancer. The only problem is that the decision to follow the signal light is still left on a fairly unreliable driver. Beating the red light causes countless deaths in the past and is still counting until today. So, what's the solution?

Using the same mindset prevalent today, the solution is to amend existing traffic rules to enable the imposition of stiffer penalties to discourage aggressive driving. Another solution proposed in EDSA (Philippines) is the use of RFID that could identify erring drivers. Deterrence is always a two-way street. This will not solve the problem because rules and regulations are always subject to being followed or violated.

Today's cars are already equipped with electronic fuel systems which could, as they claimed, result to a more efficient fuel combustion and therefore reduce carbon emissions. We could add to this system a wireless transceiver of radio signals that could

reduce its fuel supply to slow the engine down or switch off the fuel system to completely shut the engine to a full stop. Of course, what we can do to the fuel system, we can also do to its braking system. We can implement this technology across the entire length of the road to prevent collisions, and for all the roads all over the country, and it's not that costly. The policy solution must be built into the system through technology.

The right technology is already here, we are just using the wrong ones. We are using the wrong ones because the policy makers, i.e. mostly lawyers, are not aware of existing technological solutions. That is simply not their turf. The worst situation is when these policy makers simply have other vested interests to serve.

Myopiasis : The Disease to Resist Change

Some time ago, I've ran into an individual who argued that this idea will never work. The full application of all technologies will make people lazy. So I countered, if you hate technology that much, why don't you throw away your clothes, shoes, cellphones and computers, burn your house down, and climb to the nearest tree at the nearest mountainside and start communing with the arthropods , for all of these things are products of technology. After he made some tasty remarks, I haven't heard about him since. No more texting back. He never answered my emails anymore. Maybe he did throw away his cellphone and computer. I can only speculate.

Science is a very sharp two-edged blade. It can be used for good or bad. The decision to use technology for aggression lies in the hands of the policy makers. The desire to make good use of technology emanates from the people who only want a more comfortable and peaceful coexistence.

The only objection to this system is the possibility of our being beholden to the whims of the engineers and a bleak reality that human affairs being taken over by machines. The latter of course only happens in the movies which the same control structure made. The former can be referred to empirical data, i.e. just compare the creative orientation and instinct of most scientists/engineers as opposed to the greedy mindset of most politicians. I believe the choice is clear.

THE Zeitgeist Movement

What is the Zeitgeist Movement?

The Movement bridges the gap of two monumental but independent research made by two individuals who came from two opposing extremes of science and religion.

In *Zeitgeist – The Movie*, **Peter Joseph** articulated the origins and purpose of religion as researched by **Jordan Maxwell**, a foremost figure in the field of the occult.

After expounding on the lies and people behind them that are the cause of all evils in our society today, Peter Joseph suggested the best possible solution which is the *Venus Project* of industrial designer, **Jacque Fresco**, who spent most of his life looking for the best strategy by which society must evolve.

For the first time, the new generation was exposed to the truth behind religion and government. The veil of secrecy has been lifted and the emperor responsible for the deteriorating conditions of the empire has been identified.

For the first time, this generation was exposed to a new alternative idea of fundamental social structure that is beyond utopian, an idea that's only waiting the will to make it happen, for all technologies have been there all along.

Are you ready to make that switch?

Are you ready to apply the right solution to the right problem?

Are you ready to eliminate the *middlemen*, bypass all *detours* and directly tap the resources that are in abundance since time began?

Are you ready to change yourself, your own mindset, and invite others to do the same?

If that is the case, then what are you waiting for?

Join the Movement. Join the revolution now!

THE ZEITGEIST MOVEMENT

"What makes you think for one minute that the religious institution is the only one that's never been touched?

The religious institutions of this world are at the bottom of the dirt!

The religious institution is put there by the same people who gave you your government, your corrupt education...

Our Masters don't give a damn about you and your families. What they care about is what they always cared about that's to control the whole damned world!"

Jordan Maxwell

Brave New World

Global Settlements & Financial Wars

At the time of this writing, certain groups are claiming to have directly confronted the Dark Cabal responsible for the establishment of the Federal Reserve and the suppression of useful technologies discussed in *Chapter 4* ***Inconvenient Facts***.

These groups, Asian Secret Societies, are claiming they now in possession or are in control of tangible resources, exotic technologies and real assets that could be used to back up the new "meritocratic" financial system that could literally transform the planet into a new age of abundance that only science fiction movies could make.

The White Hats on the other hand are working at gathering enough evidence to successfully prosecute those that betrayed the people through the Ponzi Fiat Banking System that robbed their families the ability to have a brighter future. This group is supposedly composed of the good guys from the intelligence communities, military, banking and finance who volunteered to correct the evils in the system and to bring the Dark Cabal to justice.

Knowing the inevitable, the Dark Cabal responded with nuclear detonations to enhance induced earthquakes that hit Haiti, Chile, China, New Zealand, and the biggest was what triggered the deadly tsunami in Japan; manipulate the weather to bring forth flooding in agricultural areas to forced starvation. They also tried the usual, tried and tested art of blackmailing to influence executive decisions in favor of the furtherance of their interests.

What is not clear at this point though is the link of these efforts to the Zeitgeist Movement and the Venus Project. What can be deduced to at this critical juncture in the entire history of our existence is that if these Boy Scouts would succeed and all suppressed technologies are released as promised, the Venus Project would just definitely be an avoidable outcome. And there would be no turning back.

Updates on this topic are available here:

- http://eclinik.wordpress.com/vital-issues/ben-fulford/
- http://eclinik.wordpress.com/vital-issues/white-hat-reports/

The Things We Know We Can Do But Don't

Whether we believe in these claims or not, we can always contribute to the fulfilment of a saner and better world. Each one of us can influence how the future would be like.

The tremendous power of the internet is yet to be understood and still is underutilized. If every technological know-how is easily accessible through this medium, there will be an explosion of new industries overnight!

The challenge therefore is not that the system must be changed first, i.e. that the implementation of suppressed technologies be allowed and funded by law, but for those inventors to release these much needed know-how directly to the people of the world through the internet, not next decade or next full moon but today, even without the satisfaction of astronomical compensation but for honor and a respectful place in our history.

Remember, all these problems relating to the monetary-based system will all be gone as the natural consequence of releasing these technologies. Even money itself would be rendered irrelevant once everybody has access to free energy systems.

So why are these inventors not releasing these great inventions yet to the public? Why wait for compensation when it will become irrelevant once they do so? Why be afraid of the men in black suits when you can stay anonymous over the net? In fact, the act of releasing the knowledge is security in and of itself already.

Once the knowledge is fully released to the public your death would spell no difference. You're under threat because you have that knowledge exclusively. You share it, and you remove the threat. But if you are holding back because of some egotistical rationale, then you still don't get it. The technology you are supposed to have fully understood should have given you adequate knowledge of what really it's all about.

When all these are done, the old system will just collapse naturally, all institutional control systems are rendered irrelevant and the people will know freedom.

It's Time To Evolve

How many times have we heard the same promises over and over again? Time for change,... change we can believe in, but should never hope for.

We can't hope for a change to come our way for the one making that promise neither have the will nor the power to effect change. The power to change rest in each and every one of us, not in the shoulders of only one person. Not to mention that this same person is not working for you, but for the same corporation that made all these miseries happened.

It is time for the elimination of the *middlemen* and for the destruction of all the institutional control mechanisms they continue to serve.

It's time for the people to have direct access to these technological solutions before they drown themselves and die from the large pile of ecosocial wastes not of their own making.

It is time for the old Nazian principle of "Arbeit Mach Frei" to be trashed into the dustbin of failed concepts and philosophies.

It is time for Scienza e Tecnologia Liberare!

APPENDIX

Baking Soda

Baking soda (sodium bicarbonate) is a fine white powder used primarily in baking as leavening agent, to neutralize excessive stomach acidity and source of carbon dioxide in fire extinguishers. It occurs naturally in mineral springs and also produced by our own pancreas.

Over the years, more uses of this humble cleanser have been identified. Here are just some of them:

- Deodorant: underarm, fridge, shoes, etc.
- Safer than toothpaste. Use powder for whitening teeth and 5% solution for regular tooth brushing or when mouth washing
- Antibacterial facial and body scrub; mix in warm water, soak face towel, wipe gently on face, remoisturize with fresh tomato
- relieves skin irritation
- Relieves skin itching, insect bites, bee stings, sunburn pain, jelly fish sting
- 5% solution in nebulizer to relieve stuffy nose
- Soak clothes and rags to remove stinking odor
- Not greater than 5% solution in windshield water spray bucket to repel slightly acidic rain; don't exceed consistency, precipitate may clog spray
- Non-toxic hand sanitizer
- Insect repellant
- Pet fur deodorizer
- Sprinkle around plant soil to protect it from bacterial infection
- Sterilized fruits and vegetables
- Remove chicken feathers easily by using boiled soda solution; chicken will come out odorless and cleaner white

Replace all detergent based cleaning in your home. Baking soda's antibacterial, non-toxic, anti-acidic properties will surely make your home cleaner, brighter, breezier and safer to live in.

- Remove grease from pots and pans; unclog gas stove burners
- Spray into garbage bins to reduce or eradicate foul smell
- Wash clothes with it to remove underarm and collar stains
- Clean fridge and baby utensils without leaving toxic residue

Industrial uses include motor pool cleaning agent for removing industrial grease and oil both on shop floors, engines, and underchassis.

All metal objects should be rinsed with regular water thoroughly, wipe until dry and apply a thin coat of oil when necessary before storing to avoid rusting.

The uses of baking soda are only limited by your own imagination. Just consider it first when a situation requires us to use detergent, alcohol, antiseptic or antibiotic. It's cheaper, safer and more effective. Just don't overdo it.

Warning: There may be baking soda brands in the market that contain substances other than sodium bicarbonate, , e.g. aluminum. Please check carefully or inquire directly from the manufacturer.

Why Marijuana is Better than Cigarette?

Cigarette smoking is not just about nicotine and the pleasure it gives. It provides you with not less than 4000 chemicals, at least fifty of which are known *carcinogens*.

Among the harmful chemicals that are in your favourite smokey brand are:

- Benzene (petrol additive)
- Formaldehyde (embalming fluid)
- Ammonia (toilet cleaner)
- Acetone (nail polish remover)
- Tar (70% of tar in smoke is deposited in lungs)
- Nicotine (insecticide/addictive drug)
- Carbon monoxide (car exhaust fumes)

Source: Health Education Authority (UK) - Lifesaver

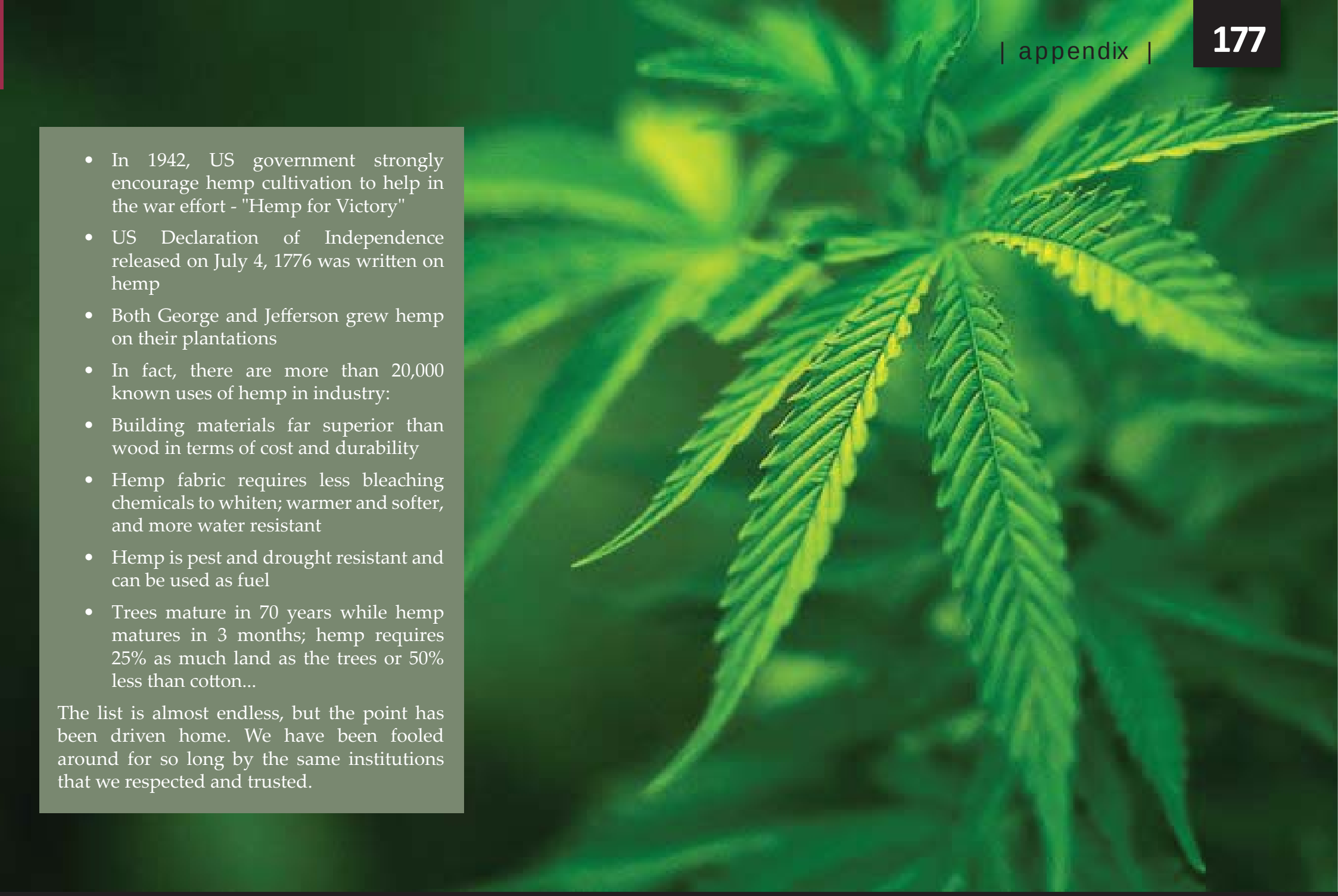
On the other hand, the Institute of Medicine [IOM] concluded that *"Nausea, appetite loss, pain and anxiety are all afflictions of wasting, and all can be mitigated by marijuana."*

Researchers at the Kaiser-Permanente HMO, funded by NIDA, followed 65,000 patients for nearly a decade, comparing cancer rates among non-smokers, tobacco smokers, and marijuana smokers. Tobacco smokers had massively higher rates of lung cancer and other cancers. Marijuana smokers who didn't also use tobacco had no increase in risk of tobacco-related cancers or of cancer risk overall. In fact their rates of lung and most other cancers were slightly lower than non-smokers, though the difference did not reach statistical significance. Sidney, S. et al. Marijuana Use and Cancer Incidence (California, United States).

Cancer Causes and Control. Vol. 8. Sept. 1997, p. 722-728.

The beauty of marijuana does not end there:

- Used as paper until 1883
- Until 1941 Fordd cars and bridges built were with some mixture of hemp
- Until 1937, all ropes and twines were made with hemp
- Even the original Levis Strauss jeans were made with hemp



- In 1942, US government strongly encourage hemp cultivation to help in the war effort - "Hemp for Victory"
- US Declaration of Independence released on July 4, 1776 was written on hemp
- Both George and Jefferson grew hemp on their plantations
- In fact, there are more than 20,000 known uses of hemp in industry:
- Building materials far superior than wood in terms of cost and durability
- Hemp fabric requires less bleaching chemicals to whiten; warmer and softer, and more water resistant
- Hemp is pest and drought resistant and can be used as fuel
- Trees mature in 70 years while hemp matures in 3 months; hemp requires 25% as much land as the trees or 50% less than cotton...

The list is almost endless, but the point has been driven home. We have been fooled around for so long by the same institutions that we respected and trusted.

Most textbooks dealing with the study of electronics almost always start with the concept of electrons being a major component of an atom. Electrons are presented much like planets in a solar system, circling endlessly along its orbits around the nucleus. The nucleus is said to be composed of neutron and proton. Proton is positively charge while electron is negative charge. Atom, on the other hand is the most basic structure that a particular element can retain its distinctive characteristics from all others.

What is Electric Current?

The flow of electrons is said to constitute electric current or *electricity*. Electrons are made to flow through the application of electromotive force or pressure.

The closest analogy is that of water being pushed by a water pump through the pipes. The *electric generator* acts like the water pump, the pipes as the wires and the water flowing is the flowing current in the system. The only difference between water and electricity is that while the former flow inside the pipes, the latter flows outside the wire. This is one of the most important fact that most electrical technicians doesn't know about because they weren't told during their training, and that the researcher of *free energy* systems must understand.

What must be understood is that all the electric generator is doing is to produced a polarized wire, a *dipole*, which in turn perturb or affects the invisible medium in or of space that will constitute the actual current flow.

You should not be expecting a flow of electrons, at the speed of light, within the structure of a solid wire, don't you? That's what you call common sense.

This electrical pressure can be measured in terms of *volts* (after Alexandro Volta). The resultant rate of current flow is measured in *amperes* (in honor of André Marie Ampère), and is dependent on the amount of *electromotive force* (emf or voltage) and *resistance* of a circuit. The exact relationship between these basic parameters are discussed next.

The Resistance Instigated by Georg Simon Ohm

In DC circuits, calculations of resistance, voltage and current are pretty straightforward, i.e:

$$R = \frac{V}{I}$$

or

$$resistance = \frac{voltage}{current}$$

or

$$ohms = \frac{volts}{amperes}$$

To illustrate, consider an incandescent light bulb that is connected to a 220-volt power supply. How much current will flow if the filament offers a resistance of 968 ohms?

$$current = \frac{220\ volts}{968\ ohms}$$

$$current = 0.2273\ amperes$$

An ordinary incandescent light bulb is a resistive load much like the flatiron, and in this case it is offering 968 ohms of resistance which would allow a current of 0.2273 amperes when connected to a 220-volt power supply. To find out what is the power expended by the same incandescent bulb at this current, we need to multiply the voltage and current itself, like so:

$$Power = voltage \times current$$

$$Power = 220\ volts \times 0.2273\ amperes$$

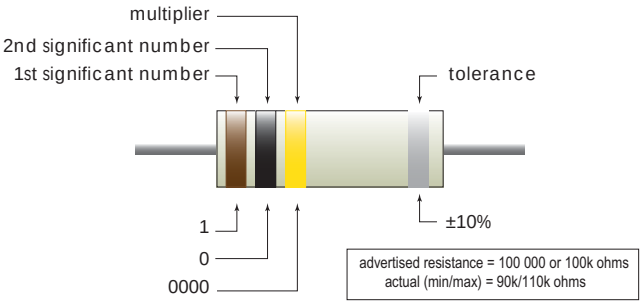
$$Power = 50.01\ watts$$

So, even the calculations for power in DC circuits are not too complex. However, in AC circuits, this can become a bit more complicated courtesy of the wave rate of vibrations or *current frequency*. Frequency is the rate of vibrations, or fluctuations, or pulses, or cycles a wave or current makes as it propagates in space in any given time. Frequency is usually measured in cycles per second, or *hertz* (Heinrich Hertz).

Resistance is the amount of opposition that a circuit exerts against the flow of current, and is measured in *ohms* (named after Georg Simon Ohm). A device that offers resistance is called *resistor*, and its resistance values are indicated through color bands. See drawing on the right.

To interpret the values we need to refer to the standard Electronic Color Codes listed on the right.

Some common resistance values are listed on the next page.

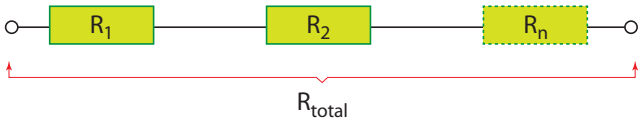


Color	Significant Values	Multiplier	Tolerance		Temperature Coefficient (ppm/K)	
Black	0	1.E+00	-		250	U
Brown	1	1.E+01	±1%	F	100	S
Red	2	1.E+02	±2%	G	50	R
Orange	3	1.E+03	-		15	P
Yellow	4	1.E+04	(±5%)		25	Q
Green	5	1.E+05	±0.5%	D	20	Z
Blue	6	1.E+06	±0.25%	C	5	Z
Violet	7	1.E+07	±0.1%	B	1	M
Gray	8	1.E+08	±0.05% (±010%)	A	-	K
White	9	1.E+09	-		-	-
Gold	-	1.E-01	±5%	J	-	-
Silver	-	1.E-02	±10%	K	-	-
None	-	-	±20%	M	-	-

Resistance Configurations: Series & Parallel

There are situations when the exact resistance value required in your circuit design is not available. You can solve this problem by connecting your resistors in series or in parallel or a combination of both.

Series Resistance



The total resistance R_{total} offered by two or more resistors in series (connected one after the other) is:

$$R_{total} = R_1 + R_2 + \cdots R_n$$

Examples:

Given, R_1=100Ω, R_2=250Ω

$$R_{total} = 100\Omega + 250\Omega$$

$$R_{total} = \mathbf{350\Omega}$$

Common Resistance Values							
1.0	10	100	1.0K	10K	100k	1M	10M
1.1	11	110	1.1K	11K	110K	1.1M	11M
1.2	12	120	1.2K	12K	120K	1.2M	12M
1.3	13	130	1.3K	13K	130K	1.3M	13M
1.5	15	150	1.5K	15K	150K	1.5M	15M
1.6	16	160	1.6K	16K	160K	1.6M	16M
1.8	18	180	1.8K	18K	180K	1.8M	18M
2.0	20	200	2K	20K	200K	2M	20M
2.2	22	220	2.2K	22K	220K	2.2M	22M
2.4	24	240	2.4K	24K	240K	2.4M	
2.7	27	270	2.7K	27K	270K	2.7M	
3.0	30	300	3K	30K	300K	3M	
3.3	33	330	3.3K	33K	330K	3.3M	
3.6	36	360	3.6K	36K	360K	3.6M	
3.9	39	390	3.9K	39K	390K	3.9M	
4.3	43	430	4.3K	43K	430K	4.3M	
4.7	47	470	4.7K	47K	470K	4.7M	
5.1	51	510	5.1K	51K	510K	5.1M	
5.6	56	560	5.6K	56K	560K	5.6M	
6.2	62	620	6.2K	62K	620K	6.2M	
6.8	68	680	6.8K	68K	680K	6.8M	
7.5	75	750	7.5K	75K	750K	7.5M	
8.2	82	820	8.2K	82K	820K	8.2M	
9.1	91	910	9.1K	91K	910K	9.1M	

K = kilo, 1 000; M = mega, 1 000 000; Ohm = unit of resistance

Given, R_1=100Ω , R_2=250Ω, R_3=500Ω

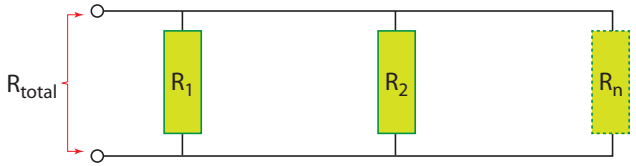
$$R_{total} = 100\Omega + 250\Omega + 500\Omega$$

$$R_{total} = \mathbf{850\Omega}$$

Parallel Resistance

The total resistance R_{total} offered by two or more resistors in parallel (connected in tandem) is:

$$\frac{1}{R_{total}} = \frac{1}{R_1} + \frac{1}{R_2} + \cdots \frac{1}{Rn}$$



Examples:

Given, R_1=100Ω, R_2=250Ω

$$\frac{1}{R_{total}} = \frac{1}{100\Omega} + \frac{1}{250\Omega}$$

$$\frac{1}{R_{total}} = 0.01\Omega + 0.004\Omega$$

$$\frac{1}{R_{total}} = 0.014\Omega$$

$$R_{total} = \mathbf{71.43\Omega}$$

Given, R_1=100Ω , R_2=250Ω, R_3=500Ω

$$\frac{1}{R_{total}} = \frac{1}{100\Omega} + \frac{1}{250\Omega} + \frac{1}{500\Omega}$$

$$\frac{1}{R_{total}} = 0.01 + 0.004\Omega + 0.002\Omega$$

$$\frac{1}{R_{total}} = 0.016\Omega$$

$$R_{total} = \mathbf{62.5\ \Omega}$$

Reactive Components

Among the components that react uniquely with a given frequency are the *capacitors* and *inductors*. This reactive property would be one of the most interesting parts of studying electronics, as you will find later.

Capacitors

A *capacitor* is like a battery which stores a charge or voltage but can discharge very quickly in fractions of a second when loaded or shorted at its terminals.

A capacitor is made up of two or more conductor plates separated by a nonconducting *dielectric*. A dielectric can be air, paper, mylar, or oil.

Capacitance is measured in *farad* (Michael Faraday). However, a farad is too big a unit for practical use in electronics. Microfarad (μF), 1μF = 1/1000000 farad, is more commonly used. Some of the common values for capacitors in fractions of a farad are on the next page.

Capacitor values are indicated through various methods and designations which can confuse the newcomer. Ask your supplier to label it appropriately when necessary. Capacitor voltage ratings can be determined by looking at the power supply voltage of your circuit. A factor of at least 2 times the required value should be safe enough.

In low frequency circuits, this slow charging and discharging results in noticeable pulses at the end of that circuit, creating an illusion of high reactance (resistance) due to low rate of current flow (ampere). Conversely, in high frequencies, capacitors charge and discharge very quickly resulting in higher amperage and creating an illusion of low reactance (resistance).

$$X_c = \frac{1}{2\pi f C}$$

Or

$$ohms = \frac{1}{2\pi \times hertz \times farad}$$

The *capacitive reactance* (X_c) formula indicates that, with frequency held constant, higher

Typical capacitors: electrolytic and paper types.

capacitance favors more current to flow than low capacitance.

Common Capacitance Values										
	10p	100p	1.0n	10n	100n	1.0u	10u	100u	1.0m	10m
	12p	120p	1.2n	12n	120n	1.2u				
	15p	150p	1.5n	15n	150n	1.5u	15u	150u	1.5m	15m
	18p	180p	1.8n	18n	180n	1.8u				
2.2p	22p	220p	2.2n	22n	220n	2.2u	22u	220u	2.2m	22m
	27p	270p	2.7n	27n	270n	2.7u				
3.3p	33p	330p	3.3n	33n	330n	3.3u	33u	330u	3.3m	33m
	39p	390p	3.9n	39n	390n	3.9u				
4.7p	47p	470p	4.7n	47n	470n	4.7u	47u	470u	4.7m	47m
	56p	560p	5.6n	56n	560n	5.6u				
6.8p	68p	680p	6.8n	68n	680n	6.8u	68u	680u	6.8m	68m
	82p	820p	8.2n	82n	820n	8.2u				

Notes:

p = pico, 10^{-12} or 0.000 000 000 001; n = nano, 10^{-9} or 0.000 000 001; u = micro, 10^{-6} or 0.000 001.

Because of the imperfection of the manufacturing process and the ever changing temperature, actual parametric values of electronic devices can vary. This variation compared to its advertised value is called **tolerance**.

To illustrate, if a capacitor is marked 100uf and the tolerance is 10%, the actual capacitance would be from 90uf to 110uf. This also applies to **resistors**.

If your design requires an accurate value, one recourse is to use a combination of fixed and variable values, in this case, a fixed capacitance near the required value and a variable capacitance. You should that this requires testing instruments to verify.

For purposes of satisfying the intent of this book, just give the parts list to the vendor, ask which one is which, and follow the assembly instructions.

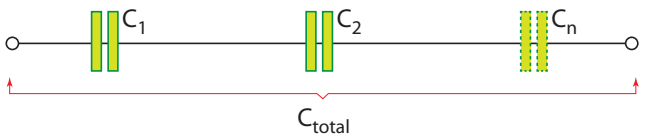
Capacitance Configurations: Series & Parallel

There are situations when the exact capacitance value required in your circuit design is not available. You can solve this problem by connecting your capacitors in series or in parallel or a combination of both.

Series Capacitance

The total capacitance C_{total} offered by two or more capacitors in series (connected one after the other) is:

$$\frac{1}{C_{total}} = \frac{1}{C_1} + \frac{1}{C_2} + \cdots \frac{1}{Cn}$$



Examples:

Given, C_1=100uF, C_2=250uF

$$\frac{1}{C_{total}} = \frac{1}{100uF} + \frac{1}{250uF}$$

$$\frac{1}{C_{total}} = 0.01uF + 0.004uF$$

$$\frac{1}{C_{total}} = 0.014uF$$

$$C_{total} = \mathbf{71.43}uF$$

Given, C_1=100uF, C_2=250uF, C_3=500uF

$$\frac{1}{C_{total}} = \frac{1}{100uF} + \frac{1}{250uF} + \frac{1}{500uF}$$

$$\frac{1}{C_{total}} = 0.01uF + 0.004uF + 0.002uF$$

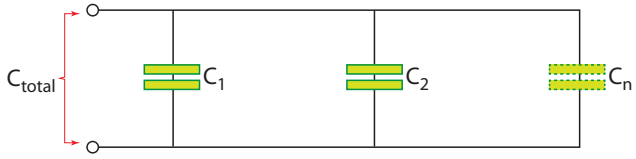
$$\frac{1}{C_{total}} = 0.016uF$$

$$C_{total} = \mathbf{62.5}uF$$

Parallel Capacitance

The total capacitance C_{total} offered by two or more capacitors in parallel (connected in tandem) is:

$$C_{total} = C_1 + C_2 + \cdots C_n$$



Examples:

Given, C1=100uF, C2=250uF, C3=500uF

$$C_{total} = 100uF + 250uF + 500uF$$

$$C_{total} = 850uF$$

Inductors

On the other hand, inductors (coils) behave exactly the reverse of capacitors. Low frequency alternating or fluctuating current can easily flow through inductive circuits. However, high frequency alternating current encounters high resistance (inductive reactance) through an inductive circuit. This is due to the fluctuating magnetic field which the coil or inductor influences itself. This constantly collapsing flux introduces voltage that cancels out the entering current, resulting in a reduced net current flow rate.

$$X_L = 2\pi fL$$

or

Inductive reactance (X_L) is directly proportional to the inductance of a coil, i.e. the higher the inductance, the higher will be its inductive reactance. Inductance is measured in *henrys*, and inductive reactance in ohms.

$$ohms = 2\pi \times hertz \times henrys$$

Inductive reactance is also directly proportional to the frequency of the pulsing or alternating current flowing in an inductive circuit, i.e. the higher the frequency of the a.c. current flowing in an inductive circuit, the higher will be the inductive reactance, and the lower will be the amperage.

A coil of magnet wire.

RLC Circuits

In the real world, circuits are always, in varying degrees, a combination of these three characteristics:

- ☑ Resistive
- ☑ Capacitive
- ☑ Inductive

... such that you can hardly find a circuit that is purely inductive, i.e. without being capacitive and resistive or a perfectly insulated capacitive circuit and free from stray induction. All reactive circuits are always resistive due to the inherent character of the materials used.

It is interesting to note, however, that since both inductive and capacitive reactance are exactly opposite from each other, we can

deduce that when both are present in an A. C. circuit and their reactive values happen to be equal, the net resistance or impedance (Z) of zero will be offered.

$$Z = X_L - X_C = 0$$

when

$$X_L = X_C$$

In the instance when the net resistance or impedance is equal to zero, the circuit is said to be in *resonance*. At resonance, current will be at its maximum. In fact, if not for the inherent imperfection of any circuit which always have a certain value of resistance however minute, current amperage could have gone into the infinite.

$$amperage = \frac{voltage}{zero\ impedance}$$

Any inductive-capacitive circuits can achieve resonance. It is just a matter of finding the *frequency of resonance*.

Remember, at point of resonance

$$X_L = X_C$$

$$2\pi fL = \frac{1}{2\pi fC}$$

Solving for *resonant frequency* (f) would yield

$$f^2 = \frac{1}{4\pi^2 LC}$$

$$f = \sqrt{\frac{1}{4\pi^2 LC}}$$

$$f = \frac{1}{2\pi\sqrt{LC}}$$

This is how radio tuning circuits, audio crossover networks, frequency filters and equalizers are designed. Discriminating other frequencies in favor of only one frequency, e.g. one radio station, is just a matter of finding the right values for inductance and capacitance. Most of the time, the inductance is fixed and the capacitance is made variable and attached to a knob for the user to adjust.

The Misapplications Of Resonance

Any system (e.g. mechanical, structural, electrical, geological, biological, neuropsychological) can have a point of resonance.

To illustrate, consider a length of lumber suspended on a pile of blocks at both ends. Pushing the lumber downward at its center and releasing it quickly makes it vibrate at a constant rate but with diminishing intensity until it stops. That constant rate of vibration is its *natural frequency*. Attaching a mechanical contraption that vibrates at that particular frequency will break the lumber in two.

The same method could also be used to bring down bigger structures, e.g. buildings, bridges, and possibly continents. While smaller structures can break at point of resonance in matter of minutes, bigger structures may take days or weeks.

How about biological entities like humans, can it be affected by resonance? The answer is a resounding yes it can be done. In fact, it has been done.

Neural electromagnetic waves can be detected using electroencephalogram (EEG). Some of these brain waves already identified are:

- Alpha wave (8-12Hz) - relaxed mental states
- Beta wave (12-30Hz) - normal waking consciousness
- Delta wave (0.5-4Hz) - deepest stages of sleep
- Gamma wave (25-100Hz) - unity of conscious perception
- Mu wave (9-13Hz) - diminished with movement, intent to move or observation of movement

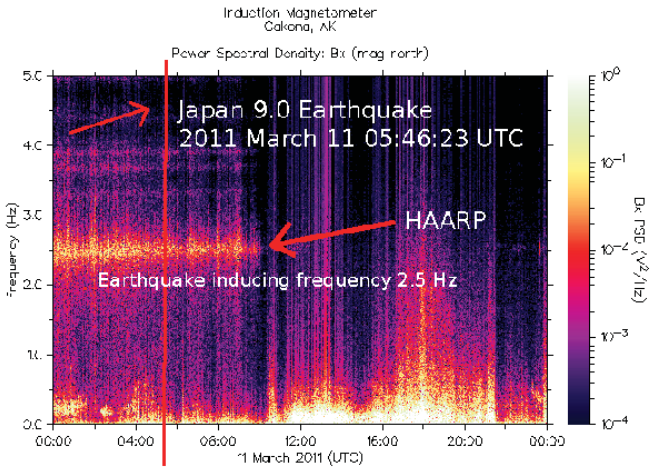
If these brainwave frequencies are broadcasted with modulated or multiplexed information, then our mind could be manipulated, whether for good or bad depends on the intent.

How Could These Waves Be Broadcasted?

These waves can be sent through the same radio technology but with more powerful signal intensity.

Low frequencies such as audio and brain waves can be embedded into the radio *carrier frequency* (tuning frequency) through *amplitude modulation* (AM) and *frequency modulation* (FM).

The patented technology being used at the High Frequency Active Auroral Research Program (HAARP) has these capabilities. It can be used to send billion watts of sheer power to "heat up" the atmosphere to influence the weather. This is very useful when used to initiate rainfalls in arid desert for agricultural purposes. At the same time, it can also be used to bring havoc to geological structures, start a drought, and initiate mass psychosis by just using the right resonant frequency. They have found out that to inject earthquake on any target, a frequency of 2.5Hz is used.



Active Components

Aside from passive and reactive components, there are also components that influence the behavior of an electronic circuit, active components.

Diodes: laser, infrared, rectifier

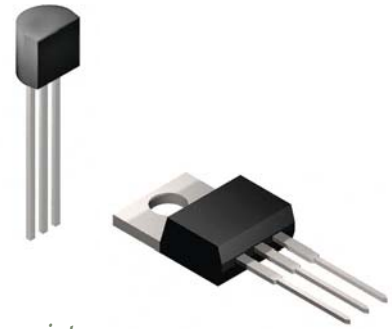
Diode

One of those classified as an active component is called a *diode* which is used to allow the flow of electric current in only one direction. This process is called rectification and such diodes are aptly called *rectifiers*. Another variation to the diode which emits light is the *light emitting diode* or simply LED. But the most important design of a diode is that of a *Zener* which is used to regulate the power supply voltage, a critical requirement in digital circuits.

Transistor

Another active component, the transistor, is being used to amplify a weak signal into some perceptible magnitude. A *transistor* is basically two diodes in one 3-terminal silicon package. Its junction is being used to control the flow of current through it using the weak signal. This device is not actually increasing the magnitude of the signal by itself. What this component really does is to control the flow of a fixed power supply by using that weak signal (e.g. radio signal from a radio station), creating the illusion that it strengthening the signal. The resultant output signal is stronger than the input but can't be stronger than what the power supply provides. If you want to increase the signal beyond what the power supply provides, you need to use a *capacitor* in conjunction with the transistor. (This tyoe of circuit will be covered in the next volume about free energy technologies.)

So the classification that this device is an active component is actually a misnomer for it cannot power itself, nor will it increases the amount of deliverable power but only switches the flow of current, on and off, or variably.



Typical transistors

http://en.wikipedia.org/wiki/Intel

As the technologies matured, large number of components were being squeezed into thumb-sized packages or silicon *chips*. *Large scale integrations* made cameras and radios more portable. From building sized installations, computers were soon reduced to desktop appliances and with more processing power the green screen was transformed into a kaleidoscope of colors.

The older telecommunication system was upgraded to include *geostationary satellites* which made global wireless communication possible. The marriage of computer and wireless telecom systems into what is now known as the *internet* made possible the establishment of the greatest invention of all, the *worldwide web*.

The Web made possible the unhampered exchange of information, ideas, services and goods in a scale never before seen. The field of focus of the individual has widened as new horizons opened up. Even the secretive governance mechanism has experience an increasing pressure and demand for transparency. The broadcast media that almost always toe the line of those in power are gradually losing substantial chunk of its audience by the day. Expressing one's opinion is done more openly, and encompasses a much broader scope. We can say that true democracy, at this time, can only be felt and experienced over the Net and not anywhere else.

All these are made possible through the right application of the right technology.

Miniaturization

Transformed The Industry & the World In A Big Way

Patents & Other Documents

To prove that we are not simply spreading bad rumors, but working based on hard science and technologies which are duly verified and certified to work, but for some reasons, did not see the light of day.

Some of the patents that we will be sharing with you are the following:

- blood electrification
- bone and tissue regeneration
- malignancy treatment
- curing aids-hiv with tetrasilver
- evidence of the use of pandemic flu to depopulate USA
- birth control vaccine
- weather manipulation

These documents have different page orientation, so please adjust the view accordingly by going to the View menu of your reader client.

blood electrification

US005188738A

United States Patent [19]

Kaali et al.

[11] Patent Number: 5,188,738

[45] Date of Patent: * Feb. 23, 1993

[54] **ALTERNATING CURRENT SUPPLIED ELECTRICALLY CONDUCTIVE METHOD AND SYSTEM FOR TREATMENT OF BLOOD AND/OR OTHER BODY FLUIDS AND/OR SYNTHETIC FLUIDS WITH ELECTRIC FORCES**

[76] Inventors: **Steven Kaali**, 88 Ashford Ave., Dobbs Ferry, N.Y. 10522; **Peter M. Schwolsky**, 4101 Cathedral Ave., NW., Washington, D.C. 20016

[*] Notice: The portion of the term of this patent subsequent to Aug. 18, 2009 has been disclaimed.

[21] Appl. No.: **615,437**

[22] Filed: **Nov. 16, 1990**

Related U.S. Application Data

[63] Continuation-in-part of Ser. No. 562,721, Aug. 6, 1990, abandoned.

[51] **Int. Cl.**[5] **B01D 35/06**; A61K 41/00

[52] **U.S. Cl.** ..... **210/748**; 128/419 R; 128/421; 128/783; 128/784; 204/131; 204/164; 204/186; 204/302; 210/243; 422/22; 422/44; 604/4

[58] **Field of Search** ..... 210/243, 748, 764; 128/419 R, 421, 783, 784; 604/4; 422/22, 44; 204/131, 164, 186, 242, 275, 302, 305

[56] **References Cited**

U.S. PATENT DOCUMENTS

592,735	10/1897	Jones	204/242
672,231	4/1901	Lacomme	204/275
2,490,730	12/1949	Dubilier	204/305
3,692,648	9/1972	Matloff et al.	204/129
3,753,886	8/1973	Myers	204/186
3,878,564	4/1975	Yao et al.	210/648
3,965,008	6/1976	Dawson	422/22
3,994,799	11/1976	Yao et al.	210/321.64
4,473,449	9/1984	Michaels et al.	204/101
4,616,640	10/1986	Kaali et al.	128/130
4,770,167	9/1988	Kaali et al.	128/788
4,932,421	6/1990	Kaali et al.	128/831
5,049,252	9/1991	Murrell	210/243
5,058,065	10/1991	Slovak	128/783
5,133,932	7/1992	Gunn et al.	210/748

FOREIGN PATENT DOCUMENTS

995848 7/1983 U.S.S.R. 210/243

OTHER PUBLICATIONS

Proceedings of the Society for Experimental Biology & Medicine, vol. 1, (1979), pp. 204–209, "Inactivation of Herpes Simples Virus with Methylene Blue, Light and Electricity"—Mitchell R. Swartz et al.

Journal of the Clinical Investigation published by the American Society for Clinical Investigations, Inc., vol. 65, Feb. 1980, pp. 432–438—"Mechanisms of Photodynamic Inactivation of Herpes Simplex Viruses" —Lowell E. Schnipper et al.

Journal of Clinical Microbiology, vol. 17, No. 2, Feb. 1983, pp. 374–376, "Photodynamic Inactivation of Pseudorabier Virus with Methylene Blue Dye, Light and Electricity"—Janine A. Badyisk et al.

Primary Examiner—Robert A. Dawson
Assistant Examiner—Sun Uk Kim
Attorney, Agent, or Firm—Charles W. Helzer

[57] **ABSTRACT**

A new alternating current process and system for treatment of blood and/or other body fluids and/or synthetic fluids from a donor to a recipient or storage receptacle or in a recycling system using novel electrically conductive treatment vessels for treating blood and/or other body fluids and/or synthetic fluids with electric field forces of appropriate electric field strength to provide electric current flow through the blood or other body fluids at a magnitude that is biologically compatible but is sufficient to render the bacteria, virus, parasites and/or fungus ineffective to infect or affect normally healthy cells while maintaining the biological usefulness of the blood or other fluids. For this purpose low voltage alternating current electric potentials are applied to the treatment vessel which are of the order of from about 0.2 to 12 volts and produce current flow densities in the blood or other fluids of from one microampere per square millimeter of electrode area exposed to the fluid being treated to about two milliamperes per square millimeter.

31 Claims, 6 Drawing Sheets

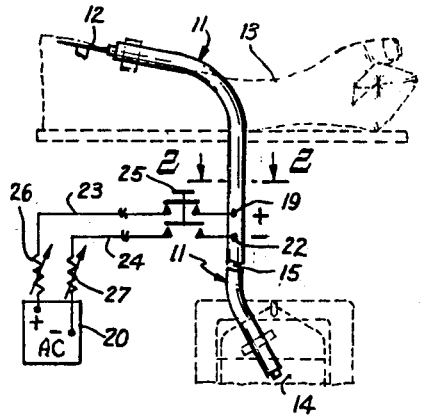


Fig. 1

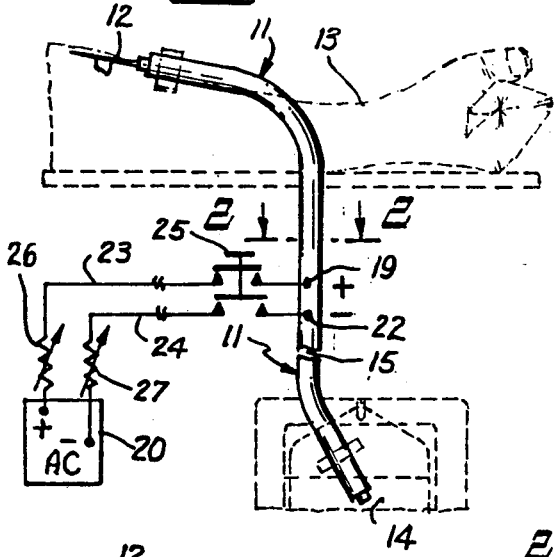


Fig. 2

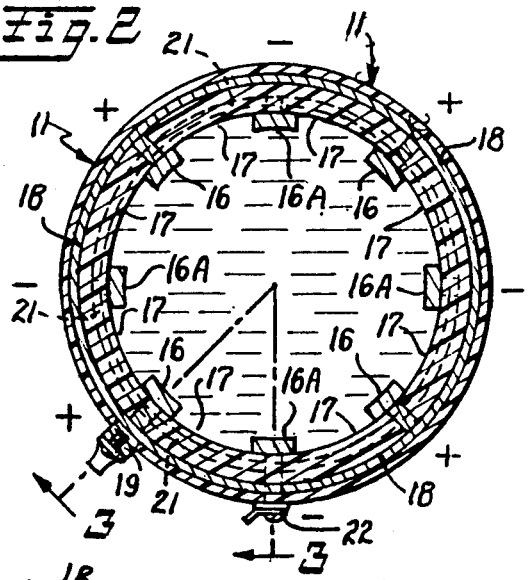


Fig. 6

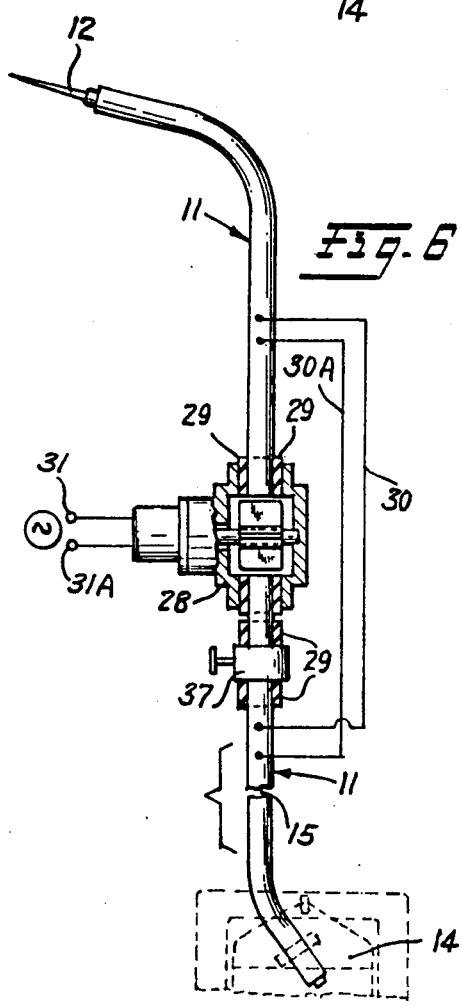
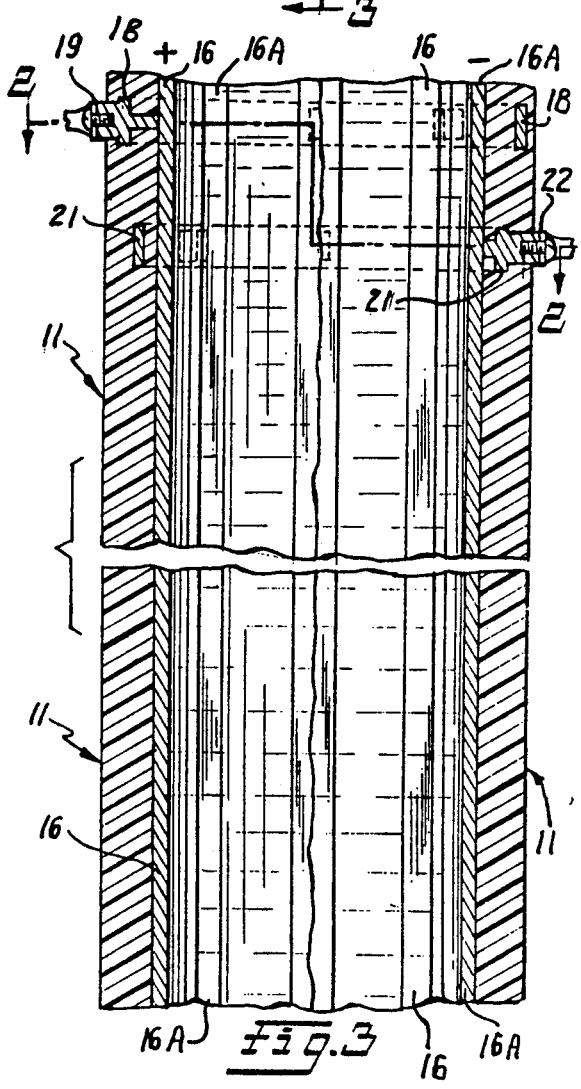


Fig. 3



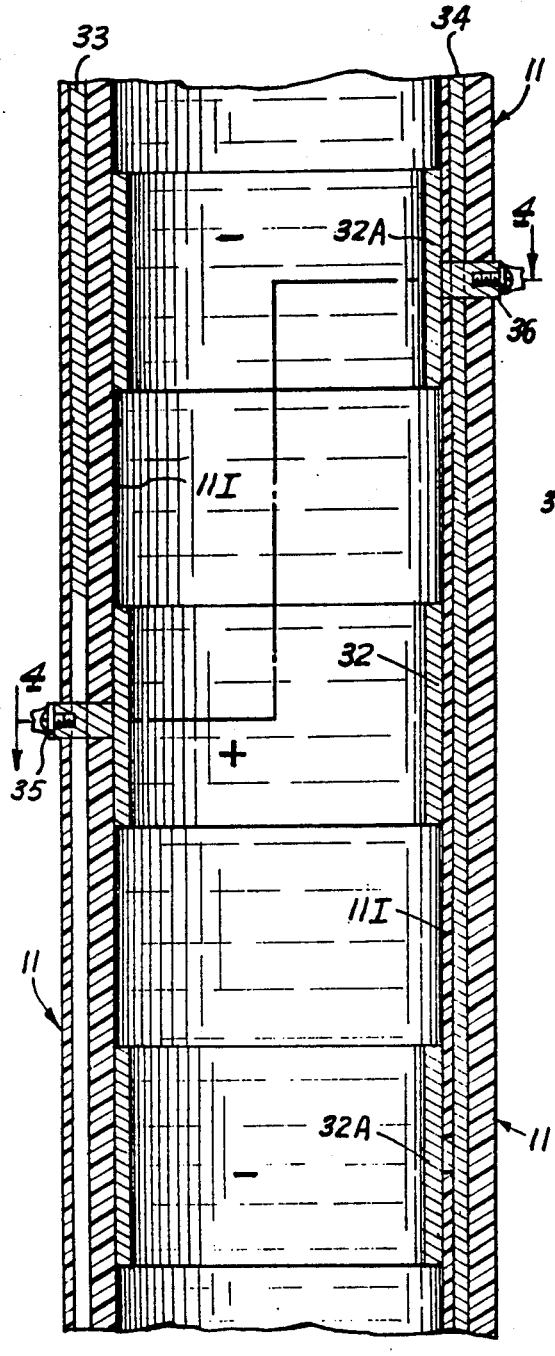


Fig. 5

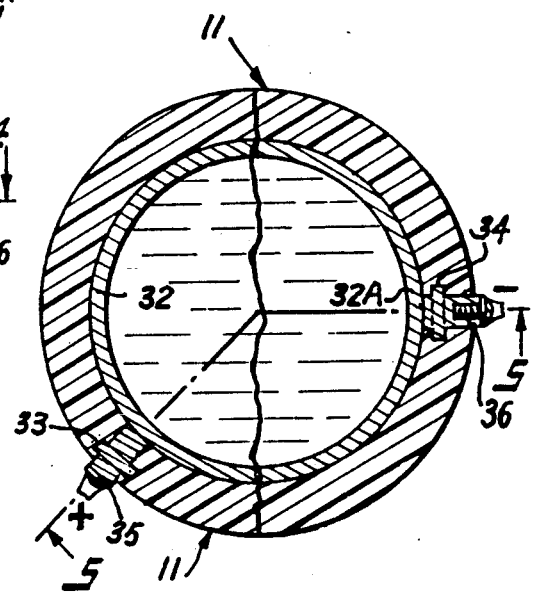


Fig. 4

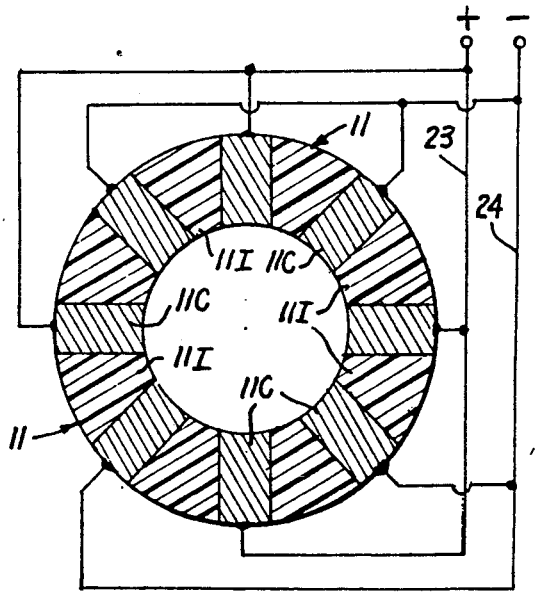


Fig. 7

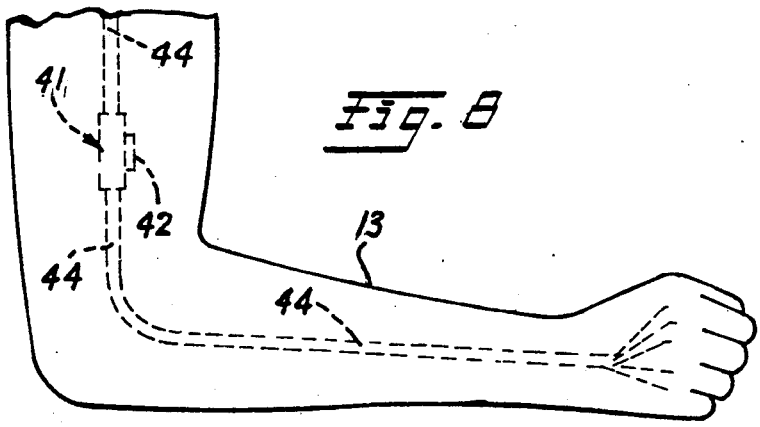


Fig. 8

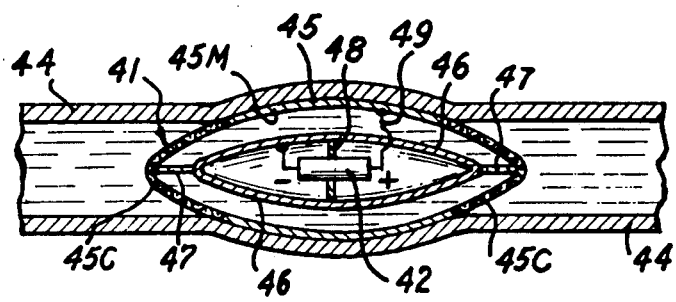


Fig. 9

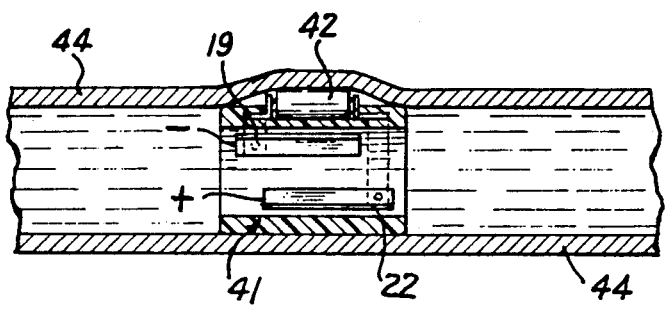


Fig. 10

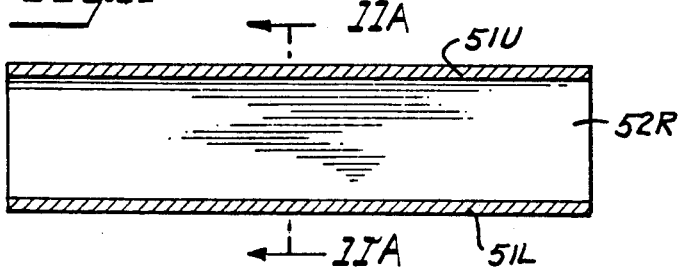


Fig. 11

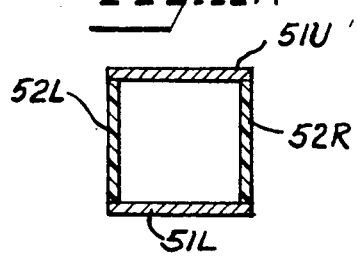


Fig. 11A

Fig. 12A

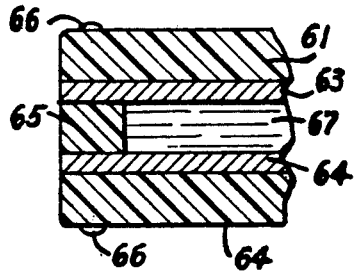


Fig. 12

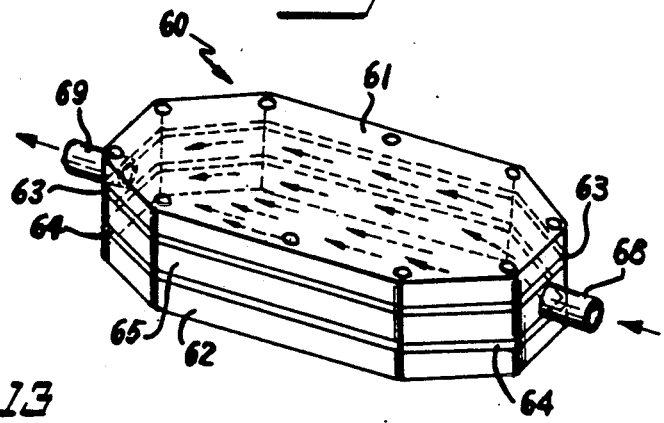


Fig. 13

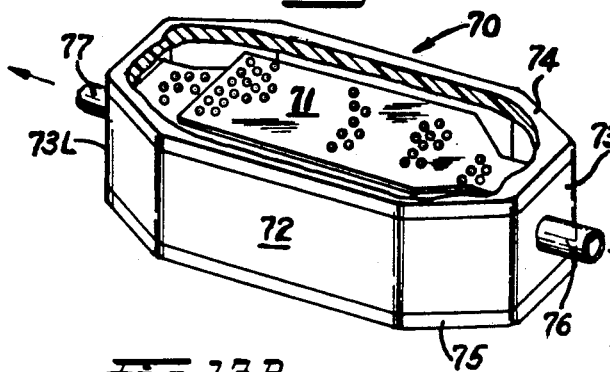


Fig. 13A

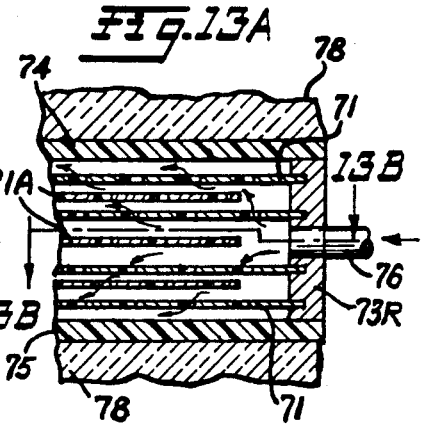
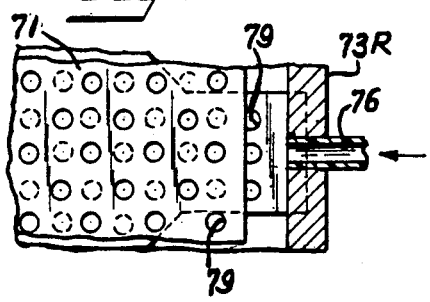


Fig. 13B



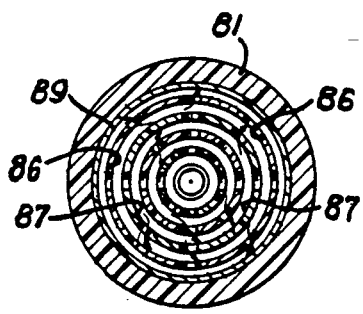


Fig. 14

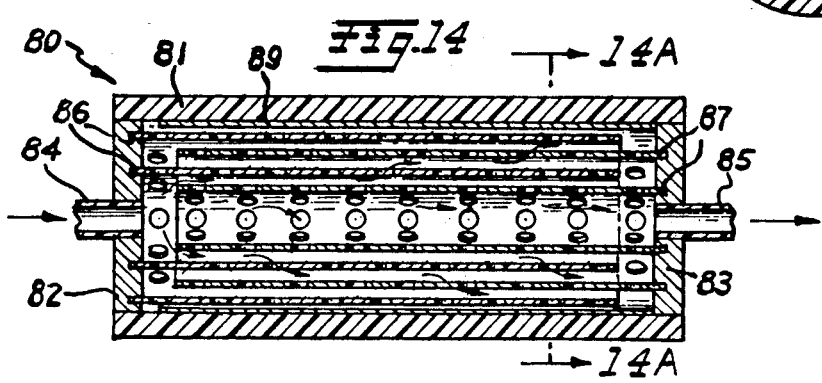


Fig. 14A

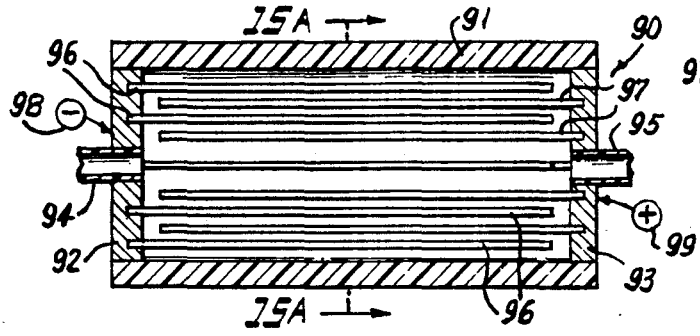


Fig. 15

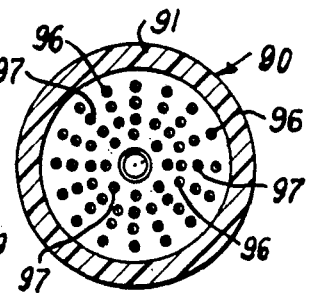


Fig. 15A

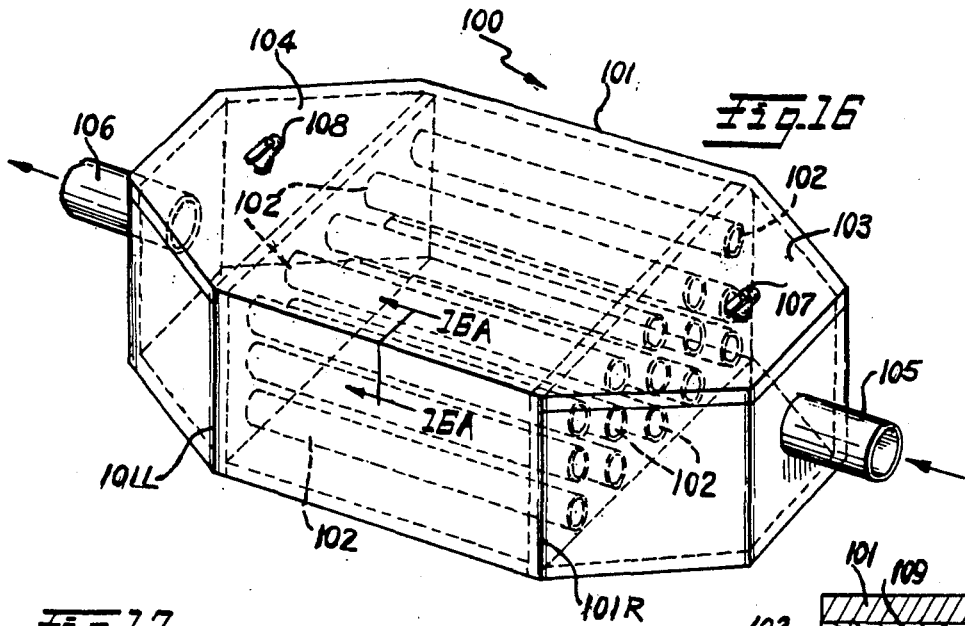


Fig. 16

Fig. 17

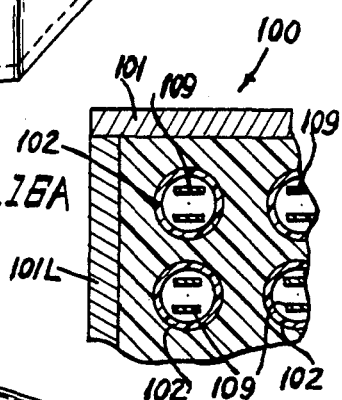
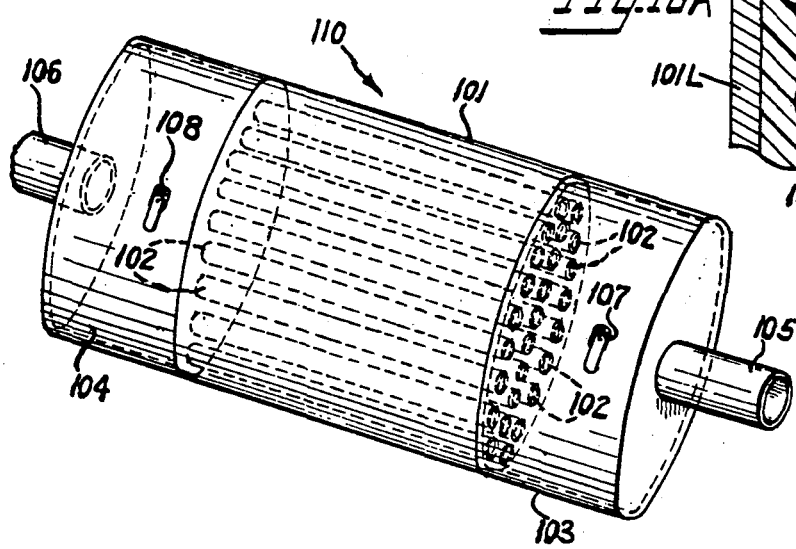


Fig. 16A



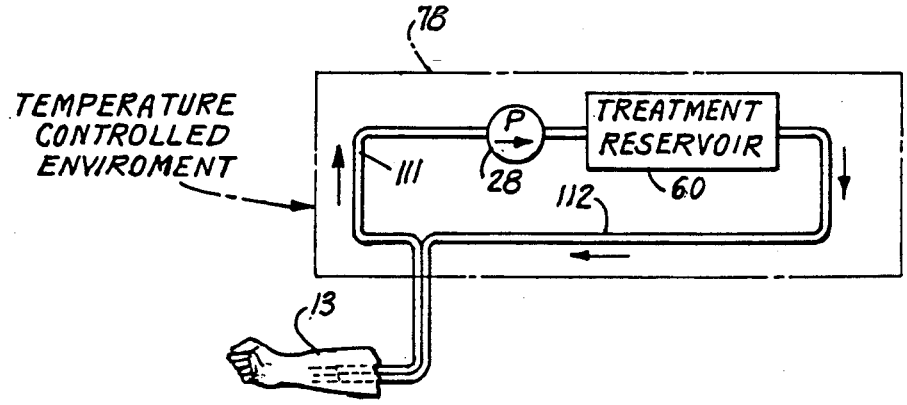

78
TEMPERATURE CONTROLLED ENVIROMENT
P
TREATMENT RESERVOIR
111
28
112
60
13

Fig. 18

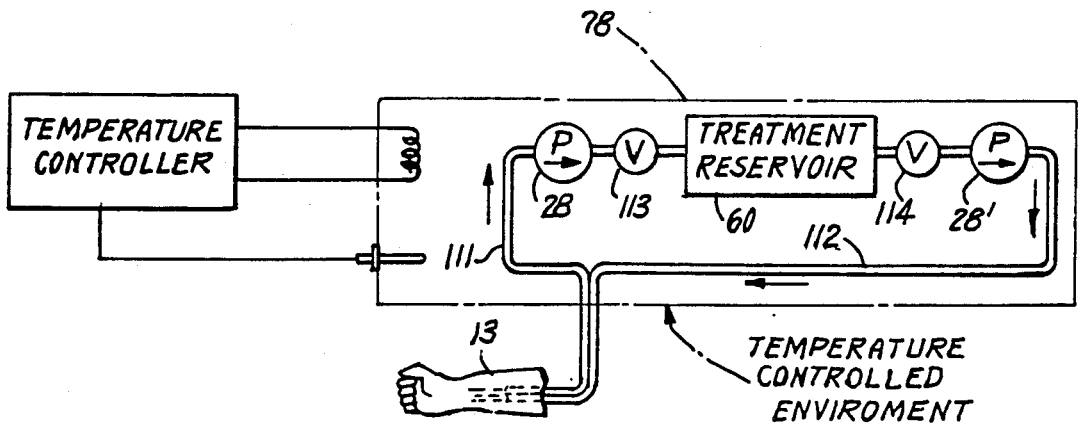

78
TEMPERATURE CONTROLLER
400
P
V
TREATMENT RESERVOIR
V
P
28
113
60
114
28'
111
112
13
TEMPERATURE CONTROLLED ENVIROMENT

FIG. 19

ALTERNATING CURRENT SUPPLIED ELECTRICALLY CONDUCTIVE METHOD AND SYSTEM FOR TREATMENT OF BLOOD AND/OR OTHER BODY FLUIDS AND/OR SYNTHETIC FLUIDS WITH ELECTRIC FORCES

FIELD OF INVENTION

This is a continuation-in-part application of prior U.S. patent application Ser. No. 07/562,721 filed Aug. 6, 1990, now abandoned

This invention relates to novel electrically conductive methods and systems employing electrically conductive vessels provided with electrically conductive surfaces for use in subjecting blood and/or other body fluids and/or synthetic fluids such as tissue culture medium to direct treatment by alternating current electric forces.

BACKGROUND PROBLEM

It is now well known in the medical profession and the general public that blood collected in a blood bank from a large number of donors may be contaminated by contaminants such as bacteria, virus, parasites and/or fungus obtained from even a single donor. While screening of donors has done much to alleviate this problem, the screening of donors can and does miss occasional donors whose blood is unfit for use. When this occurs and the unfit blood is mixed with otherwise usable blood, the entire batch must be discarded for transfusion purposes. Because of this problem, the present invention has been devised to attenuate any bacteria, virus (including the AIDS HIV virus) parasites and/or fungus contained in blood contributed by a donor to the point that any such contaminant is rendered ineffective for infecting a normally healthy human cell, but does not make the blood biologically unfit for use in humans. Similar problems exist with respect to treatment of other body fluids, such as amniotic fluids. The treatment method and system is also applicable to mammals other than humans.

In addition to the above, there is a need for methods and systems for the treatment of blood and other body fluids both in in-situ processing wherein the treated blood and/or other body fluids are withdrawn from the body, treated and then returned to the body in a closed loop, recirculating treatment process that is located near but outside the patient's body, or the treatment can be effected through implanted treatment system components.

In co-pending United States application serial No. 07/615,800 entitled "Electrically Conductive Methods and Systems for Treatment of Blood and Other Body Fluids with Electric Forces"-Steven Kaali and Peter M. Schwolsky, inventors, filed concurrently and co-pending with this application, a similar treatment method and system employing direct current excitation potentials is described and claimed. The disclosure of co-pending application Ser. No. 07/615,800 hereby is incorporated into this application in its entirety.

SUMMARY OF INVENTION

The present invention provides new electrically conductive methods and systems using alternating electric current excitation potentials for treating blood and/or other body fluids, such as amniotic fluids, and/or synthetic fluids such as tissue culture medium from a donor to a transfusion recipient or to a storage receptacle, or for recirculating a single donor's or patient's blood or other body fluids. The treatment can be accomplished in a treatment system external of the body or by implant devices for purging contaminants using a novel electrically conductive vessel for direct electric treatment of blood or other body fluids, such as amniotic fluids, with alternating current electric field forces of appropriate electric field strength to attenuate such contaminants to the extent that bacteria, virus, fungus, and/or parasites contained in the blood or other body fluids are rendered ineffective to infect and/or affect normally healthy human cells. The treatment, however, does not render the blood or other body fluids biologically unfit for use in humans or other mammals after the treatment. The new methods and systems according to the invention achieve these ends without requiring time consuming and expensive processing procedures and equipment in addition to those normally required in the handling of blood or other body fluids or synthetic fluids. The invention can be used to achieve the electric field force treatment during the normally occurring transfer processing from a donor to a recipient or to a collection receptacle, or recirculation of a single donor's or patient's blood or other body fluids, such as amniotic fluids.

BRIEF DESCRIPTION OF DRAWINGS

The above and many other objects, features and attendant advantages of this invention will be appreciated more readily as the invention becomes better understood from a reading of the following detailed description, when considered in connection with the accompanying drawings, wherein like parts in each of the several figures are identified by the same reference characters, and wherein:

FIG. 1 is a diagrammatic, fragmentary, elevational view of a new blood transfer system using a novel alternating current electrically conductive treatment vessel in the form of conductive tubing to directly treat blood being transferred to a storage receptacle with electric field forces according to the invention;

FIG. 2 is an enlarged, horizontal cross sectional view of the novel electrically conductive tubing treatment vessel taken across lines 2—2 of FIG. 1;

FIG. 3 is a longitudinal, vertical sectional view of the novel electrically conductive tubing treatment vessel taken along the staggered section lines 3—3 of FIG. 2;

FIG. 4 is a view similar to FIG. 2 showing a different construction of the novel electrically conductive tubing treatment vessel;

FIG. 5 is a view similar to FIG. 3, taken along the staggered section lines 5—5 of FIG. 4;

FIG. 6 is a diagrammatic, fragmentary, elevational view showing a different modification of a novel blood transfer system using a novel electrically conductive tubing treatment vessel, and which employs a blood pump and a blood flow regulator;

FIG. 7 is an enlarged cross sectional view, similar to FIG. 2 that shows an electrically conductive tubing treatment vessel fabricated from longitudinally extending, integrally molded strips of alternate polarity, conductive polymer interconnected by integrally molded, insulating, longitudinally extending strips made of polymer or other insulating material;

FIG. 8 is a diagrammatic, fragmentary elevational view showing a different form of a blood transfer system according to the invention wherein a small electri-

cally conductive vessel in the form of a short piece of tubing and a miniaturized battery power source are implanted in the arm of a human being to provide a novel electrically conductive blood and other body fluid treatment system which operates in a closed loop, recirculating manner;

FIG. **9** is a partial, diagrammatic sectional view of the upper arm portion of a human being and shows in greater detail the construction of a specially designed miniaturized, electrically conductive treatment vessel with associated miniaturized battery electric power source and DC to AC power converter for use in the implant treatment system shown in FIG. **8**;

FIG. **10** illustrates the details of construction of a somewhat different form of miniaturized electrified treatment tubing for use in an implanted treatment system of the type shown in FIG. **8** and built according to the invention;

FIGS. **11** and **11A** illustrate still a different construction for the electrified treatment tubing for use in practicing the invention wherein the tubing has a square or rectangular cross section with upper and lower conductive sides and intervening right and left sides separating the two conductive sides made from plastic or other suitable electrical insulating material;

FIG. **12** is a perspective top and side view of a novel electrified, closed, octagonally-shaped, flat, box-like treatment vessel having an enlarged cross sectional area relative to the cross sectional diameter of the inlet and outlet tubes supplying the interior of the treatment vessel;

FIG. **12A** is a partial, cross sectional view of the enlarged treatment vessel shown in FIG. **12**;

FIG. **13** is a perspective view of a second form of enlarged cross sectional area treatment vessel having an exterior shape similar to that of FIG. **12**, but wherein the electrically conductive electrodes of the treatment vessel comprise interleaved conductive plates with one set of alternate ones of the plates being electrically insulated from the remaining set, and wherein different polarity electric potentials are applied to the respective sets. If desired, the electrode plates may be formed from an electrically conductive porous material;

FIG. **13A** is a partial, cross sectional view taken through the electrically conductive treatment vessel shown in FIG. **13**;

FIG. **13B** is a sectional view taken through staggered line **13B—13B** of FIG. **13A**;

FIG. **14** is a longitudinal sectional view of still a different form of enlarged diameter electrified treatment vessel wherein the vessel is in the form of an elongated cylinder, and the sets of conductive electrodes mounted therein are concentrically arrayed within the interior of the treatment vessel and maintained at different electric potentials;

FIG. **14A** is a cross sectional view of FIG. **14** taken through plane A—A;

FIG. **15** is an enlarged longitudinal sectional view of still another form of an enlarged cross sectional area treatment vessel according to the invention wherein the electrically conductive electrodes of the treatment vessel are comprised by longitudinally extending needle-like electrodes with alternate ones of the needle-like electrodes being provided with opposite polarity electric potentials;

FIG. **15A** is a cross sectional view of the treatment vessel shown in FIG. **15** taken through plane A—A of FIG. **15**;

FIG. **16A** is a partial cross-sectional view taken through **16A—16A** of FIG. **16**;

FIG. **16** is a perspective view of still another form of enlarged cross sectional area treatment vessel according to the invention wherein the treatment vessel comprises a relatively large block of insulating material having parallel, longitudinally extending, open ended tubes formed through its length. The tubes are provided with electrically separated, opposed, parallel extending conductive plate electrodes which have opposite polarity electric potentials applied thereto. The ends of the tubes open into and are supplied from, or supply, respective reservoirs formed on the respective ends of the central block of insulating material containing the tubes, with inlet and outlet conduits for body fluids to be treated connected to the free ends of the respective reservoirs;

FIG. **17** is a perspective view of an enlarged cross sectional area treatment vessel similar to FIG. **16** wherein the body of the treatment vessel is cylindrical in nature;

FIG. **18** is a diagrammatic, fragmentary elevational view of a human blood or other body fluid treatment system according to the invention employing one of the larger cross sectional dimension fluid treatment vessels shown in any one of FIGS. **12–16** of the drawings, and which is suitable for use in a continuous flow through recirculating body fluid treatment system; and

FIG. **19** is a diagrammatic, fragmentary elevational view of still another human blood or other body fluid, closed loop, recirculating treatment system according to the invention designed for use with the enlarged diameter fluid treatment vessels illustrated in FIGS. **12–16**, and which employs both inlet and outlet fluid pumps on each side of the treatment vessel. With this arrangement the system can be operated in an intermittent manner to allow batch treatment of the body fluids to fully take place before passage of the body fluids being treated back to the patient.

BEST MODE OF PRACTICING INVENTION

FIG. **1** is a schematic illustration of one form of a novel blood and other body fluid treatment system according to the invention. FIG. **1** shows an electrically conductive blood and/or other body fluid treatment vessel constructed according to the invention which is in the form of intravenous tubing **11** interconnected between a hypodermic needle **12** and a blood storage receptacle **14**. The needle **12** is inserted in an artery or vein of the arm **13** of a blood donor and the tubing **11** leads from the arm **13** to the receptacle **14**. Alternatively, the system could be set up to transfer blood from the storage receptacle **14** to the arm of a recipient or could be designed to recirculate the blood through electrified tubing **11** back to the donor. The electrically conductive tubing **11** may be of any desired length as indicated by the break at **15** so that it can be appropriately set up to lead from a comfortable position for the donor from whose arm **13** the blood is being taken to a proper storage location for the receptacle **14**. The greater the length of the electrified portion of tubing **11**, then the more extended is the exposure of the blood (or other body fluid) to the electric field force effects and low level, biologically compatible current flow through the body fluid being treated thereby assuring adequate electrification treatment of the fluid without impairing the biological usefulness of the blood or other body fluid being treated.

FIG. 2 is a cross sectional view of the electrically conductive tubing **11** taken through plane 2—2 of FIG. 1. The tubing **11** may be from 1 to about 20 millimeters in inside diameter, although it may be larger or smaller in diameter depending upon the intended application. For example, if the blood transfer system is for the purpose shown in FIG. 6, then the tubing may have a cross sectional dimension of about 5 millimeters. However, if the intended use is in an implanted blood treatment system, such as shown in FIG. 8, then the tubing diameter must be designed to result in a flow-through rate corresponding to the natural circulatory blood flow rate of the patient in which the system is implanted, and must be long enough to assure effective electrification treatment at the flow rate selected. The tubing **11** is formed from plastic, rubber, medical grade polymer, or other suitable material which is compatible with human fluids and/or tissue. A plurality of physically separated, electrically conductive surface segments form opposed, parallel electrodes shown at **16** and **16A** on the inside of tubing **11** from electrically conductive materials such as platinum, platinum alloys, silver, silver or platinum covered alloys, or other similar conductive materials such as conductive polymers, or silver or platinum covered polymers which are compatible with human fluids and tissue. The spacing between opposed electrodes **16** and **16A** is of the order of 1 to 19 millimeters and perhaps may be more or less dependent upon the application and the conductivity of the body fluids being treated.

FIG. **3** is a longitudinally extending sectional view along the axis of tubing **11** taken through staggered section lines **3**—**3** of FIG. **2**. From FIG. **3** of the drawings it will be seen that the electrically conductive surface segments **16** and **16A** all comprise longitudinally extending, zebra-like stripe or strip electrodes which extend longitudinally in parallel with the longitudinal axis of the tubing **11**. In between each longitudinally extending conductive stripe electrode **16** or **16A** is a longitudinally extending electric insulating area **17** which electrically isolates the alternate electrically conductive, zebra-like stripe electrodes **16** and **16A** one from the other.

As best shown in FIG. **3**, a first set of alternate electrically conductive surface stripes **16** are electrically connected in common to a first annular terminal buss **18** which circumferentially surrounds the tubing **11** and is embedded within the sidewalls of the tubing **11** at a suitable point along its length. The design is such that the first annular terminal buss **18** is electrically isolated from the remaining second set of alternate, electrically conductive surface stripe electrodes **16A** and is electrically connected through a conductor terminal **19** to an alternating current source of electric excitation potential. AC source **20** may comprise the output from an AC to AC voltage converter for converting 110 volt AC potential to the desired 0.2 volts to 12 volts for use in the invention. For those treatment systems which are to be implanted as described hereafter, the AC source may comprise a miniaturized DC to AC converter for converting the DC voltage from a miniaturized battery to low voltage (0.2 to 12 volts) AC. As best depicted in FIG. **2**, all of the first set of positive electrically conductive stripes **16** are physically and electrically connected in common to the first annular terminal buss **18** so that all of the conductive stripes **16** are maintained at a constant, alternating current electric excitation potential.

A second annular terminal buss **21**, which circumferentially surrounds the tubing **11**, is embedded within the tubing **11** at a point along its length displaced from the position of the first annular terminal buss **18** and is spaced inwardly towards the inside diameter of the tubing relative to the first annular buss **18**. By this arrangement it is possible to electrically connect the remaining second set of alternate electrically conductive surface stripes **16A** in common to the second annular terminal buss **21** in a manner such that the second annular terminal buss is electrically isolated from the first annular terminal buss **18** as well as the first set of alternate electrically conductive surface stripes **16**. As shown in FIG. **3**, the second annular terminal buss **21** is provided with an outside terminal conductor connection **22** for connecting the annular buss **21** and annular buss **18** across AC source **20** as shown in the system drawing of FIG. **1**. The second set of alternate electrically conductive surface stripes **16A** are all provided with internal connector studs which physically and electrically connect all of the **16A** stripes in common to the second annular terminal buss **21** so that all of these conductive stripes will be maintained at a potential opposite to that from the potential applied to the first set of electrically conductive stripes **16** by annular buss **18**.

As described earlier, the AC source of electric potential **20** may constitute an AC to AC converter for converting 110 volt AC to 0.2 to 12 volt AC or a DC to AC converter for converting 12 volt DC to 0.2 to 12 volt AC. The AC source **20** is connected to the conductor terminals **19** and **22** through electric supply conductors **23** and **24** preferably by a double pole, double throw, on-off control switch **25**. In preferred embodiments of the invention, voltage controlling variable resistors **26** and **27** also are included in the electric supply conductors **23** and **24** in order to control the value of the excitation voltage developed between the alternate sets of conductive surface stripes **16**, **16A**.

In operation, the donor whose blood is to be taken, or the recipient who is to be given blood, or is to have his or her blood recycled, is made comfortable on a cot with his or her arm **13** extended and the interconnecting electrically conductive tubing **11** having the hypodermic needle **12** for withdrawal, or supplying, or recycling of blood set up as shown in FIG. **1**. When both the donor/recipient and the system is in readiness, the control switch **25** is closed so that an electric field is built up across the oppositely disposed electrically conductive zebra-like stripes **16**, **16A**, etc. Voltages of the order of from 0.2 to 12 volts are applied to the conductive surfaces **16**, **16A** For this purpose it is important to note that the hypodermic needle should be electrically isolated via conventional electrically insulating IV tubing from any of the zebra stripe electrodes **16**, **16A** so that the donor/recipient does not receive a shock. By this precaution, he or she will not even be aware of the existence of the electric field within the electrically conductive tubing **11**. With the treatment system thus conditioned, the hypodermic needle is inserted into a vein in the donor's/recipient's arm and blood is withdrawn, given, or recycled through the tubing **11**.

As the blood passes through the electric fields produced within the electric conductive tubing **11** it will be subjected to and treated by biologically compatible electric current flow through the blood or other body fluid with a current density of from one microampere per square millimeter (1 $\mu A/mm^2$) of electrode cross sectional area exposed to the fluid to about two milliam-

peres per square millimeter (2 mA/mm^2) dependent upon field strength of the electric field gradient existing between electrodes **16** and **16A**, the space between the electrodes **16**, **16A** and the conductivity (resistivity) of the body fluid being treated. Recent experiments have proven that exposure to electric fields induced by supply voltages in the range produces electric current flow through blood of the order of 1 to 100 microamperes. Effectiveness is dependent upon length of time of treatment in conjunction with the magnitude of the biologically compatible current flow. For example, treatment of virus in media at 100 microamperes for 3 minutes has been observed to substantially attenuate (render ineffective) the AIDS virus. Similar treatment at other field strength values and lengths of time will have a similar attenuating effect on bacteria, virus, parasites and/or fungus which are present in blood or other body fluids being treated. By controlling the length of time and field strength values that blood is subjected to the electric field forces, undesirable contaminants such as virus, bacteria, fungus and/or parasites will be adequately attenuated to the point that they are rendered ineffective by the sustained action of the electric current flow as the blood travels from the hypodermic needle **12** to the storage bag **14**, or vice versa, or in a recycling mode. The length of travel of the blood through the sustained electric field induced current flow also can be adjusted so that the blood is subjected to the electric field force for time periods of the order of from one to six minutes at least. At the current values noted above this is believed adequate to attenuate (render ineffective) bacteria, virus (including the AIDS virus), parasites and/or fungus entrained in blood or other body fluids, but does not render the fluids unfit for human use or impair their biological usefulness.

The species of the invention shown in FIGS. **2** and **3** is advantageous since it is possible to fabricate the treatment tubing by preforming the conductive segments **16** and **16A** on the tubing walls while it is in a flat planar condition, and then rolling the walls into tubular form using a suitable mandrel. The adjoining longitudinal edges of the planar member after rolling are thereafter heat sealed along a longitudinally extending seam located within one of the electrically insulating sections **17**. Particular attention must be paid to the juncture of the ends of the annular terminal busses **18** and **21** during the rolling and heat sealing steps to assure that good electrical interconnection and continuity at these junctures of the annular terminal busses is provided in the completed treatment tubing. The conductive electrode segments **16**, **16A** may be electro-deposited, chemically formed, separately formed conductive polymer surfaces, or conductive foil or wires adhesively secured to the side walls of the tubing **11** in advance of the rolling and sealing using techniques well known in the printed circuit and integrated circuit manufacturing technologies.

FIG. **6** is a diagrammatic, fragmentary, elevational view of a modified blood treatment system using the novel electrically conductive treatment tubing in accordance with the invention. In the FIG. **6** embodiment of the invention, a blood pump **28** of conventional, commercially available construction is inserted in the tubing **11** at some point along its length. The blood pump **28** is electrically isolated from the zebra striped conductive surfaces **16**, **16A** by suitable insulators **29** formed on the blood input-output connections of pump **28**. Provision for electrically bypassing the blood pump **28** (if need be) is made through the shunt conductors **30**, **30A** which maintain electrical continuity of the alternating current excitation potential applied to the conductive stripes **16**, **16A** on each side of pump **28**. For convenience, the alternating current excitation source **20** and its connection to the electrically conductive tubing **11** has not been shown in FIG. **6** but would have to be provided. A separate source of excitation current for running the blood pump **28** is provided from a conventional 110 volt alternating current source through the input terminals **31**, **31A**.

In systems employing a blood pump, it may be desirable in some applications to provide a blood flow regulating valve **37** inserted in the system at the output of blood pump **28** and within the by-pass loop **30**, **30A** for the conductive stripes **16**, **16A**. By thus controlling blood flow, the electrified transfer system safely can be employed in a closed loop recycling system for withdrawing blood from a patient, electrically treating the blood as described above and then returning the electrically treated blood to the patient. This procedure is referred to herein as recycling. The system of FIG. **6** also can be used in those situations where the blood flow of a donor's blood is not sufficient to assure supply of an adequate amount of blood to or from the collection receptacle **14** or other recipient. It may also be desirable to have a blood flow regulating valve such as **37** in non-pump systems.

FIGS. **4** and **5** of the drawings show another embodiment of the invention wherein the electrically conductive treatment tubing **11** includes electrically conductive electrode segments **32** and **32A** which are in the form of zebra stripes that extend radially around the inside diameter of tubing **11** in spaced-apart, alternating polarity, conductive annular bands **32** and **32A** separated by insulating surface bands **11I** which serve to electrically isolate the respective first set of conductive zebra stripes **32** from the second set of conductive zebra stripes **32A**. The first set of alternate ones of the electrically conductive annular stripes **32** are electrically connected in common to a first longitudinally extending terminal buss bar **33** that is embedded within tubing **11** in parallel with the longitudinal axis of the tubing and electrically isolated from the remaining second set of alternate electrically conductive annular stripes **32A**. The first longitudinally extending terminal buss bar **33** is designed for connection to one output terminal of a source, such as **20**, of alternating current electric excitation potential through a supply conductor connection **35** on the exterior surface of the tubing **11**.

A second longitudinally extending terminal buss bar **34** is embedded within the body of tubing **11** and is electrically connected to the remaining second set of alternate electrically conductive annular stripes **32A**. The second longitudinally extending terminal buss bar **34** is electrically isolated from the first longitudinally extending terminal buss **33** and the first set of alternate electrically annular stripes **32**. Terminal buss bar **33** is designed for connection to a second output terminal for the alternating current source of electric excitation potential. For this purpose an input supply conductor connection **36** is directly connected through the exterior surface of tubing **11** and to the second longitudinally treatment extending terminal buss bar **34**.

In operation, the embodiment of the invention shown in FIGS. **4** and **5** is physically arranged in a blood treatment system in the manner illustrated in FIG. **1** of the drawings with the positive polarity and negative polar-

ity zebra annular stripes being connected to the respective output terminals of AC source **20** via control switch **25**. If required, a blood pump such as **28** and blood flow regulating valve **37** shown in FIG. **6** can be included in the blood transfer system employing electrified tubing as shown in FIGS. **4** and **5**.

Similar to the system shown in FIG. **1**, a blood transfer system employing the embodiment of the invention shown in FIGS. **4** and **5** would be electrically excited in advance of injection of the hypodermic needle **12** into the arm of a blood donor so that all blood passing through the tubing **11** will be subjected to electric forces produced between the alternate polarity annularly formed conductive bands **32** and **32A**. Experience with the invention will establish what length is required for the electrification field. However, for initial installations the length of the electrified field as related to the flow of blood through electrified tubing **11** should correspond to at least the 1–6 minute treatment time mentioned earlier. This is achieved by using an extended array of the alternate annular zebra bands **32** and **32A** of adequate length to assure thorough subjection of blood to electric current flow produced between the alternating polarity zebra stripes **32** and **32A**. The electric field force intensity applied to the blood by means of the electrified tubing is anticipated to be of the order of from 0.2 to 12 volts similar to the embodiment of the invention shown in FIGS. **1–3**.

In place of supplying continuous alternating current excitation to the conductive stripes **16**, **16A** of FIGS. **2** and **3** or **32**, **32A** of FIGS. **4** and **5**, it also is possible to excite these electrically conductive segments of tubing **11** with pulsed waveform direct current excitation potentials. For use in this manner, the pulse rate of the pulsed waveform excitation potentials must be sufficiently high to maintain continuous current flow through blood being treated. In addition, it may be desirable to couple a bank of storage capacitors in parallel across respective pairs of opposite polarity electrically conductive segments **16**, **16A** and **32**, **32A** where operation in a pulsed DC mode is desired.

FIG. **7** of the drawings is a cross sectional view of another embodiment of the invention which is substantially different from those previously described. In FIG. **7**, the material used for fabrication of the tubing **11** is one of the new space-age polymer materials which can be either highly electrically conductive, insulating, or semiconducting and may have values of conductivity ranging from essentially fully conductive to insulating. In the embodiment of the invention of FIG. **7**, the conductive surface areas on the inside diameter of the tubing **11** are actually formed into segments, such as **11C**, of the cross sectional area of the tubing **11** fabricated from the highly conductive polymer material. The intervening segments of the tubing **11I** which separate the conductive segments **11C** are integrally formed from the highly insulating polymer material. Suitable positive polarity and negative polarity potentials are applied to the exterior surface areas of alternate ones of the sets of conductive polymer segments **11C** from a source of electric potential via the conductors **23** and **24** as illustrated schematically in FIG. **7**.

It will be appreciated that the embodiment of the invention shown in FIG. **7** is much simpler and hence less expensive to make in that it requires fewer processing steps than the embodiments of the invention shown in FIGS. **1–6**. In other respects, the embodiment of the invention shown in FIG. **7** would be used in a blood transfer system similar to that shown in FIG. **1** or **6** with or without a blood pump **28** and blood flow regulating valve **37** to effect transfer of blood from a donor to a receptacle or recipient in the event of a transfusion or recycling. During the blood transfer process, again it would be necessary to provide alternating current excitation potentials across the spaced-apart, alternate sets of electrically conductive polymer segments **11C** prior to passing blood through the tubing **11**. This will assure that all of the blood being transferred is subjected to the electric field forces produced between the alternate conductive surfaces **11C**. As a variation of the FIG. **7** embodiment, which visualizes that the segments **11C** and **11I** all extend longitudinally and parallel to the longitudinal axis of tubing **11**, it would be possible, but more elaborate to design, to employ alternate radially surrounding annular conductive segments **11C** and interlacing insulating segments **11I** similar to FIG. **5**, but such fabrication would require somewhat more complex terminal buss bar electric supply connections **23** and **24** than those shown in FIG. **7**.

FIG. **8** is a fragmentary, diagrammatic, elevational view showing a form of blood treatment system according to the invention wherein a small electrically conductive vessel **41** in the form of a short piece of electrified tubing and a combined miniaturized DC to AC converter and battery power source **42** are implanted in the arm of a human being. The electrified tubing **41** may be in the form of any of the prior disclosed electrified tubing structures described with relation to FIGS. **1–7**, but which are fabricated in miniaturized form so that the tubing **41** and power package **42** can be inserted in a section of or surrounding a vein **44** of the arm **13** of a patient whose blood is being treated. The implantation is such that the blood through the patient's vein **44** naturally is pumped through the short piece of electrified tubing **41** while circulating blood to the hand of the patient to thereby form a closed loop, recirculating, implanted treatment system that comprises an integral part of the circulatory system of the patient being treated. Because the parameters of such an implanted system are necessarily small, a single passage through the implanted electrified tube **14** may accomplish relatively little attenuation of contaminants in the blood. Therefore, it is the repeated passage of small portions of the patient's blood continuously twenty-four hours a day and for as many days as are needed which will gradually attenuate the contaminants to the point where they are rendered ineffective as described earlier.

FIG. **9** is a partial, fragmentary, sectional view of the upper arm portion **13** of a vein or artery of a patient in which a treatment system according to the invention has been implanted, and shows in greater detail the construction of a specialized, miniaturized, electrically conductive treatment vessel with associated miniaturized battery electric power source and DC to AC converter for use in an implanted treatment system as shown in FIG. **8**. In FIG. **9**, the electrified vessel **41** is in the form of an outer housing **45** that is in the shape of a football which is implanted within the interior walls **44** of an artery or a vein. The outer housing **45** is comprised by a central, cylindrically-shaped portion **45M** of solid conductor such as platinum which is biocompatible with human blood and tissue and has integrally formed, conically-shaped porous ends **45C** which are attached to and form an electrically conductive screen grid (at the same potential) as the mid portion **45M**. The conical end portions **45C** both are perforated and may

be in the nature of a screen or mesh wire and of the same material composition as the mid portion **45M**. Disposed within the outer housing **45** is a inner housing **46** which is tear-drop shaped and secured within the central portion **45M** of the outer housing by suitable insulating support spider legs **47**. The inner housing **46** likewise is formed from platinum or other suitable biocompatible conductive material and has supported within its interior a miniaturized AC source comprising a miniaturized battery and AC to DC converter **42** secured to the conductive walls of inner housing **46** by conductive support legs **48**. The support legs **48** serve as terminal connectors from one terminal of AC power converter **42** to the inner housing **46** so that it is maintained at one polarity excitation potential. The remaining opposite polarity terminal of miniaturized AC source **42** is connected through an insulated conductor **49** to the central portion **45M** of outer housing **45** whereby the entire outer housing including the meshed conical end portions **45C** are maintained at an opposite polarity potential from the inner housing **46**.

Prior to implantation in a patient, the electrified vessel shown in FIG. **9** is activated by connection to AC source **42** so that an electric field gradient is produced across the space between the inner and outer housings **45** and **46**. Following implantation of the activated, electrified treatment vessel **41**, its presence in a vein or artery will cause all blood flowing through the vein or artery to pass between the side walls of the inner and outer housings **45** and **46** so as to be subjected to the electric field force gradient existing in these spaces. The presence of the electric field forces will induce a current flow through the blood passing between the interior and outer housings as explained above which will result in attenuating bacteria, virus, parasites and/or fungus which are present in the blood as contaminants. Here again, because of the relatively small portion of the total blood flowing in a patient that will be treated by the device within a given time period, it is the repeated, recycling process treatment of the blood over a prolonged period of time that will result in attenuation of the contaminants in the blood to the point where such contaminants are rendered ineffective as described earlier.

In order to further assure adequate treatment of the blood of a patient receiving the implant device, it is recommended that the blood be treated in an external treatment processing facility such as described earlier in FIGS. **1** and **6** or to be described hereinafter with relation to FIGS. **18** and **19** in which the total capacity of the treatment system is greater whereby substantial attenuation effect can be achieved in a comparatively shorter time period yet to be determined, and then the in vitro implant treatment system such as shown in FIGS. **8**, **9** and **10** can be used to maintain the attenuated condition and to prevent any subsequent build up of contaminants after the initial treatment, if determined to be desirable.

FIG. **10** is a fragmentary, diagrammatic view of a partial vein or artery **44** showing in greater detail the cylindrical or tubular electrified treatment vessel **41** originally described with relation to FIG. **8**. This implant treatment vessel **41** is miniaturized so that it is in effect an open-ended cylinder in shape and has a diameter comparable to that of a large vein or artery and so that it can be grafted or implanted into the vein or artery as illustrated in FIG. **10**. The tubular treatment vessel **41** may be designed pursuant to FIGS. **2** and **3** of the drawings, for example. For this application, the battery source of power and interconnected DC to AC converter **42** are annular in shape and are slipped over the tubular treatment vessel **41** in the manner shown. In FIG. **10** a longitudinal sectional view of the hollow annular-shaped treatment vessel **41** and AC power source **42** is illustrated. At the point where the battery driven AC power source **42** fits over the tubular treatment vessel **41**, the respective terminals of the AC power source **42** are exposed to engage the corresponding positive and negative supply terminals **19** and **22** of the tube **41** so that the resulting structure has a minimum exterior profile to facilitate implantation. From a comparison of FIG. **10** to FIG. **9** of the drawings, it will be appreciated that the FIG. **9** treatment vessel introduces some flow restriction in the vein or artery in which it is implanted and for this reason the construction shown in FIG. **10** is preferred.

FIGS. **11** and **11A** of the drawings illustrate a construction for the electrified treatment vessel **51** wherein the treatment vessel is in the form of square or rectangular cross sectionally-shaped open-ended tubing. The treatment tubing **51** provided with a square or rectangular shape so that provision of opposed, parallel conductive electrode surfaces **51U** and **51L** is greatly simplified as best seen in FIG. **11A** of the drawings, which is a cross sectional view taken through plane **11A—11A** of FIG. **11**. By fabricating the upper and lower surfaces of the tubing **11** from electrically conductive material such as platinum, etc., and separating the upper and lower surfaces **51U** and **51L** by electrically insulating side walls **52R** and **52L**, provision of the electrically isolated, opposed, parallel electrode surfaces is simplified and the resulting treatment vessel introduces minimum restriction to flow of blood. By connecting the upper surface **51U** to one terminal of the AC power source **42** and connecting the lower surface **51L** to the opposite terminal, AC electrification of the interior area of the tubing wherein the fluids to be treated flow is readily achieved with a greatly simplified electrode structure. Variations of this structural feature wherein the side insulating surfaces **52R** and **52L** are curved with their concave surfaces facing each other and the cross sectional area of the upper and lower conductive surfaces **51U** and **51L** tailored to provide a desired current density, tubular treatment vessels such as shown in FIGS. **11** and **11A** could be readily provided for use in implantation devices such as that illustrated in FIG. **8**.

FIG. **12** is a perspective view of a novel, electrified, closed, octagonally-shaped, flat, box-like treatment vessel **60** according to the invention which provides an enlarged cross-sectional area relative to the cross sectional diameter of the inlet and outlet tubing supplying the interior of the treatment vessel whereby increased through-put of a fluid being treated can be achieved in a given time period. The treatment vessel **60** shown in FIG. **12** is comprised essentially of upper and lower, octagonally-shaped, flat insulating plates **61** and **62**, respectively, of an insulating material which is compatible with human blood and/or other body fluids. Disposed immediately below and above the upper and lower plates **61** and **62** are octagonally-shaped, conductive electrode members **63** and **64**, respectively, which are separated and electrically isolated one from the other by a surrounding electric insulating gasket member **65**. The entire structure is sandwiched together and held in assembled relation by threaded thru-pins **66** as best seen in FIG. **12A** of the drawings. The insulating

gasket 65 which may be of teflon defines an open space 67 between the two conductive electrode members 63 and 64 into which the blood or other body fluid to be treated is introduced via inlet and outlet conduits 68 and 69. Alternating current electric potentials are applied across the respective conductive plates 63 and 64 to produce an electric field force across the intermediate space 67 through which the fluids being treated flow between electrode plates 63 and 64. By thus structuring the treatment vessel, increased treatment surface area is provided to the blood or other body fluid flowing through the space 67 whereby in a given time period an increased quantity of fluids can be treated.

FIG. 13 is a perspective view of another form of enlarged cross sectional area treatment vessel 70 having an exterior shape similar to that of the treatment vessel shown in FIG. 12. The electrified treatment vessel shown in FIG. 13 differs from that in FIG. 12, however, in the construction of its electrically conductive electrodes which comprise a plurality of interleaved, conductive, flat, electrode plates 71 and 71A. The electrode plates 71 are secured in and project inwardly from a right hand (RH) conductive end plate 73R as shown in FIG. 13A. The alternate set of flat electrode plates 71A are secured to and project inwardly from a corresponding conductive end plate 73L on the left hand end of the treatment vessel 70. The conductive end plates 73R and 73L and coacting insulating side plates 72 which insulate the conducting end plates from one another, form an octagonally-shaped box frame which is closed by upper and lower insulating top and bottom insulating plates 74 and 75. The conductive end plates 73R and 73L have a central opening formed therein into which inlet and outlet tubes 76 and 77 are secured as best seen in FIG. 13 for providing inlet and outlet flow through connection to the treatment vessel 70.

The alternate sets of flat electrode plates 71 and 71A extend parallel to one another and are provided with alternating current electric potentials supplied across the respective sets of interleaved electrode plates via the respective conductive end members 73R and 73L. If desired, the respective flat conductive electrode plates 71 and 71A may be fabricated from a perforated material as shown in FIG. 13B of the drawings. Also, it may be desirable that some form of thermal insulation, or a thermally controlled chamber be provided around the exterior of the treatment vessel 70 as indicated by the thermal insulation 78 shown in FIG. 13A.

In operation, electrified treatment vessel 70 shown in FIGS. 13, 13A and 13B functions in essentially the same manner as was described earlier with respect to FIGS. 1-7 to effect attenuation of contaminants such as bacteria, virus and fungus contained in blood and/or other body fluids being treated in the flow through treatment vessel of FIG. 13.

FIG. 14 is a longitudinal sectional view of still another form of enlarged cross sectional area, electrified treatment vessel 80. The treatment vessel 80 shown in FIG. 14 is in the form of an open-ended, elongated cylinder 81 whose cylindrical walls are fabricated from an insulating material which is biocompatible with human blood and/or other body fluids and whose open ends are closed by circular-shaped conductive end pieces 82 and 83. Inlet and outlet tubular openings 84 and 85 are provided to the interior of cylindrical housing 81 through centrally formed apertures in the circular end plates 82 and 83. Within the interior of the cylindrical, insulating housing 81 at least two, separate, concentric, perforated, cylindrically-shaped electrode members 86 and 87 are provided which extend longitudinally through the interior of the outer cylindrical housing 81. The first set of concentric, perforated, electrically conductive electrodes 86 is embedded in and supported by the conductive end plate 82 which serves as an electrical terminal for applying electric potentials to all of the concentric electrode member 86. Similarly, the concentric, perforated, conductive electrode member 87 is physically supported by and electrically connected to the conductive end plate 83 for the supply of alternating current potentials thereacross. Additionally, if desired, one or more additional perforated concentric electrode members similar to 86 may be spaced apart from the inner concentric electrode member 86 outwardly along the diameter of the circular end member 82 with additional perforated concentric electrode members 87 being sandwiched between the two electrode members 86 and spaced apart therefrom so as to provide an electric field force between all the spaced apart, separated electrically conductive electrode members 86 and 87. Additionally, if desired, a conductive surface 89 may be formed around the interior walls of the outer, insulating cylindrical housing member 81 and electrically connected to the conductive end plate 82 or 83. This will assure that the entire interior of the treatment 80 vessel cross sectional area is crossed by the electric field force and all blood or other body fluid passing the cylindrical housing member 81 is subjected to biologically compatible low electric current flow as a consequence of the alternating current electric fields produced between the different concentric electrode members including the coated surface 89 within the interior insulating housing member 81.

In operation, the embodiment of the invention shown in FIG. 14 and 14A operates in substantially the same manner as described with relation to earlier embodiments of the invention to assure production of biologically compatible electric current flow through the blood or other body fluid being treated in the treatment vessel 80.

FIG. 15 is a longitudinal sectional view of still another embodiment of an enlarged cross-sectional area treatment vessel 90. The treatment vessel 90 again comprises an outer, hollow, open-ended cylindrically-shaped, insulating body member 91 whose open ends are closed by electrically conductive, circular end plates 92 and 93, respectively. Inlet and outlet tubular openings 94 and 95 are provided through the central axial opening in the conductive end plates 92 and 93 for passage of blood and/or other body fluids being treated into the interior of the treatment vessel 90. The conductive end plates 92 and 93 have respective sets of opposite polarity potential needle-like electrodes 96 and 97, respectively, projecting therefrom inwardly into the interior of the treatment vessel 90. Alternating current electric potentials are applied to the respective conductive end plates 92 and 93 through respective AC supply terminals indicated at 98 and 99. If desired, and in order to assure complete saturation of the entire volumetric area within treatment vessel 90 with electric fields, a conductive coating similar to that shown at 89 in FIG. 14 can be provided to the inner surface of the hollow, cylindrically-shaped outer body member 91 of treatment vessel 90.

FIG. 15A is a cross sectional view taken through plane A-A of FIG. 15 and shows how the array of needle-like electrodes appear within the interior of the

treatment vessel **90**. In operation, the treatment vessel **90** will function in substantially the same manner as has been described previously with relation to earlier described embodiments of the invention.

FIG. **16** is a perspective view of still another form of enlarged cross sectional area treatment vessel **100** according to the invention and FIG. **16A** is a partial cross sectional view taken through plane **16A—16A** of FIG. **16**. The treatment vessel **100** comprises a relatively large rectangular-shaped block **101** of electrical insulating material which is biocompatible with blood and/or other human body fluids. The insulating block **101** has a plurality of parallel, longitudinally extending, open-ended, tubular-shaped openings **102** formed therein through the entire length of the block. The tubes **102** are provided with electrically isolated, opposed, parallel extending conductive plate electrodes **109** as best shown in FIG. **16A**, which have alternating current electric potentials applied thereacross. One set of these electrodes, formed for example by the lower electrode **109** in each tube, extend out to and engage a conductive surface coating formed on one end of the insulating block, for example **101R**, and the remaining upper electrodes **109** form a second set which extend out of the left hand end of the tubes and contact a conductive coating formed on the remaining end **101L** of block **101**. Alternating current electric potentials are connected across the respective conductive surfaces **101R** and **101L** so that a potential difference exists between the sets of electrodes **109** within each longitudinally extending tube in block **101**. The ends of the tubes **102** open into and are supplied from, or supply, respective header reservoirs **103** and **104** formed on the respective opposite ends of the block of insulating material **101**. Each of the reservoirs **103** and **104** has a centrally formed opening for receiving either an inlet tube **105** applied to header **103** or an outlet tube **106** secured to header **104** for supply of blood or other body fluids to be treated to and from the treatment vessel **100**. If desired, a blood pump or other fluid pump can be inserted between the supply tube **105** and header **103**, or between outlet tube **106** and the or outlet from the header reservoir **104**, or both. Alternatively, both inlet and outlet pumps can be used. In operation, the electrified treatment vessel **100** shown in FIG. **16** functions in the same manner as those species of treatment vessels described previously.

For some treatment applications, it may be desirable to provide exhaust vents such as shown at **107** and **108** in FIG. **16** to the inlet reservoir **103** and/or the outlet reservoir **104** with the vents that can be selectively operated by valves that can be automatically or manually controlled for venting off gases that might be trapped in the tops of reservoirs and which otherwise might interfere with the proper operation of the electrified treatment vessel. In a similar manner, suitable venting apparatus may be provided to other of the large cross sectional area electrified treatment vessels described previously.

FIG. **17** is a perspective view of still another enlarged cross-sectional area treatment vessel **110** which is similar in all respects to the treatment vessel shown in FIG. **16** with the exception that the body or block of insulating material **101** through which the elongate tubular openings are made, is cylindrically shaped as illustrated in FIG. **17**. In other respects, the embodiment of the invention shown in FIG. **17** would be identical to FIG. **16** in the fabrication and operation of its component parts including the reservoir headers **103** and **104** and would operate in a similar manner.

FIG. **18** is a diagrammatic, sketch of a human blood or other body fluid treatment system employing one of the larger cross-sectional dimension fluid treatment vessels **60**, such as any one of those shown in FIGS. **12–17** of the drawings. The particular fluid treatment system shown in FIG. **18** is for a continuous flow-through recirculating body fluid treatment wherein blood is withdrawn from the arm **13** of a patient and supplied through IV tubing **111** to a commercially available blood pump **28** and thence to an electrified treatment vessel **60**. The treatment vessel **60** may be like any of the treatment vessels described with relation to FIGS. **12–17** of the drawings wherein the blood or other body fluid being treated is exposed to a low voltage, low current electric current flow for attenuating to the point of rendering them ineffective, any contaminants entrained in the blood, such as bacteria, virus and fungus. The treated blood appearing at the output of the treatment vessel **60** then is recirculated back through IV tubing **112** to the arm **13** of the patient whose blood or other body fluid is being treated. If desired, IV tubing **111** and **112** could also be treatment tubing such as described in FIGS. **1–7** and **11**. This could provide double treatment for the fluid if that were desirable. In the event that the entire treatment does not take place in an air conditioned, temperature controlled room, then it may be desirable to provide a temperature controlled enclosure indicated by dotted lines **78** around at least the pump **28**, electrified treatment vessel **60** and the interconnecting IV tubing sections **111** and **112** in order to assure maintaining a substantially constant viscosity of the blood or body fluid being treated.

Normally, the system of FIG. **18** would be used in a continuous flow-through recirculating treatment system wherein blood from the patient's arm **13** is supplied through pump **28** to the treatment vessel **60** where it is treated and then discharged back through tubing section **112** to the arm of the patient. The flow rate of the blood thus processed would be adjusted to correspond substantially to the natural flow rate of blood circulated through the patient's body to the extent possible.

In addition to operation in the above manner, it would also be possible to operate the system of FIG. **18** in a stopped-flow, batch treatment manner wherein the blood pump is intermittently stopped to allow for more extended electrical treatment of the blood or other body fluid contained in the treatment vessel **60** during the period of time (referred to as the dwell time) that the blood pump is stopped thereby assuring fuller electrification treatment and the greater attenuation of the bacteria, virus, parasites and/or fungus entrained in the blood.

FIG. **19** is a diagrammatic sketch of a form of closed loop, flow-through recirculating treatment system according to the invention that is somewhat similar to the system shown in FIG. **18**. FIG. **19** differs from FIG. **18** in that an inlet pump **28** and an outlet pump **28'** are connected to, respectively, the intake to and outlet from the electrified treatment vessel **60**. If desired, an inlet control valve **113** and an outlet control valve **114** also can be interconnected between the inlet pump **28** and the intake to the treatment vessel **60** and between the output from the treatment vessel **60** and the intake to the outlet blood pump **28'**. These inlet and outlet control valves indicated at **113** and **114** preferably are automatically operated in a time sequence which allows the

system of FIG. **19** to be operated as a two pump, start-stop flow through system. When operated in this manner, the first pump **28** is allowed to operate and discharge blood from the arm **13** of the patient to be pumped into the treatment vessel **60** and thereafter is closed off with both the inlet and outlet valves **113** and **114** in their closed condition. At this point electrification treatment of the blood or other body fluid takes place for a predetermined, scheduled time period to assure adequate attenuation to the point of rendering ineffective the contaminant bacteria, virus, parasites or fungus. Upon completion of the pre-scheduled treatment period, the outlet valve **114** is opened and outlet pump **28'** actuated to return the treated blood to the arm of the patient **13**. Operation in this semi-continuous, start-stop, batch fashion will assure that adequate electrified treatment of the blood has been accomplished while achieving this end in a somewhat continuous manner suitable for use in a closed loop, recycling blood treatment process.

PRACTICAL USES OF INVENTION

While the disclosure herein presented has been directed to principally the electrical treatment of blood, it is believed obvious to those skilled in the art that the invention can be applied with corresponding effect to other body fluids which are electrically conductive for the treatment of contaminants such as bacteria, virus, parasites and/or fungus contained therein. Further, while voltages of the order of from about 0.2 volts to 12 volts AC have been indicated as preferable, it is possible that certain virus may be attenuated (or attenuated at a faster rate) if they are subjected to greater electric current magnitudes of the order of 500 microamperes for shorter time periods. Acceptable current magnitudes normally would require an excitation voltage of from 0.2 to 12 volts. However, in certain cases where faster or more complete attenuation of the contaminants in body fluids may be desired under certain circumstances and conditions, the excitation voltage supplied to the conductive tubing may in fact exceed the 0.2 to 12 volt range indicated for most treatments.

Although it is uncertain what is specifically causing the attenuation of the contaminants (virus, bacteria, parasites and/or fungus), some possible explanations have been put forward. One is that the attenuation is caused simply by the direct affect of the electric current and voltage. Another entails the following. When a voltage is applied to the electrodes, a small current will flow through the electrically conductive medium. The applied voltage and ensuing current will induce changes in the complex biologically active fluid. Current can flow through the media if positive and/or negative charges are transported through said media. The transport might induce changes in the charge distribution of the biologically active molecules thus changing their biological activity. Furthermore, the voltage and current can induce the production or elimination of different ions, radicals, gases and/or PH levels which may affect, alone or in combination, the biologically active molecules and/or cells. The above products of the electrical processes may either be very short lived and stay in the close proximity of the electrodes or can diffuse or mix in the bulk of the media and react with the biologically active molecules or cells to result in their attenuation.

Having described several embodiments of new and improved electrically conductive treatment methods and vessels for use in practicing the novel method for the treatment of blood and/or other body fluids with electric field forces and treatment systems employing the same, it is believed obvious that other modifications and variations of the invention will be suggested to those skilled in the art in the light of the above teachings. It is therefore to be understood that changes may be made in the particular embodiments of the invention described which are within the full intended scope of the invention as defined by the appended claims.

What is claimed is:

1. An electrically conductive vessel for direct electric treatment of bacteria, and/or virus, and/or parasites and/or fungus entrained in blood and/or other body fluids and/or synthetic fluids contained within or flowing through the vessel in the presence of electric field forces, said electrically conductive vessel being fabricated with only biologically compatible material contacting the fluid being treated and with an array of at least two or more spaced-apart, opposed electrically conductive electrode segments formed of biologically compatible conductive material on or in the interior surface of the vessel and exposed to blood or other fluids contained in or flowing through the vessel, said electrically conductive electrode segments being electrically isolated from each other and extending over or through a portion of the length of the vessel, and means for applying low voltage alternating current non-biologically damaging electric potentials to the electrically conductive electrode segments whereby electrical field forces are produced between the electrically conductive electrode segments that induce biologically compatible current flow through the blood and/or other fluids contained in or flowing through the vessel so as to attenuate bacteria, virus, parasites and/or fungus contained in the blood and/or other fluids by the action of the electric current flow therethrough to thereby render the bacteria, virus, parasites and/or fungus ineffective while not impairing and maintaining the biological usefulness of the fluids.

2. An electrically conductive vessel according to claim **1** wherein the low voltage alternating current electric potentials are in the range from about 0.2 volts to 12 volts and induce electric current flow densities in the blood or other fluids of from one microampere per square millimeter (1 $\mu A/mm^2$) to about two milliamperes per square millimeter (2 mA/mm^2).

3. An electrically conductive vessel according to claim **2** wherein the vessel is in the form of tubing and is inserted in a flow-thru blood treatment system between a hypodermic needle employed to withdraw and/or supply blood from a donor and/or to a recipient and/or a blood storage receptacle or to a patient in a blood recycling system.

4. An electrically conductive vessel according to claim **2** wherein the vessel is part of a system and is in the form of tubing and a blood pump is inserted in the tubing between a donor and a recipient or a receptacle, and the system further includes means for electrically isolating the blood pump from the electrically conductive vessel, means for regulating blood flow rate from the blood pump output and means for maintaining electrical continuity throughout a desired length of the conductive vessel.

5. An electrically conductive vessel according to claim **2** wherein the vessel is in the form of tubing and the electrically conductive electrode segments are in the form zebra stripes which extend longitudinally par-

allel with the longitudinal axis of the tubing with the alternate electrically conductive electrode stripes being separated by alternate electrically insulating stripes for electrically isolating the alternate electrically conductive electrode stripes one from the other, a first set of alternate ones of the electrically conductive electrode stripes being electrically connected in common to a first annular terminal buss formed on and circumferentially surrounding the tubing and electrically isolated from the remaining second set of alternate electrically conductive electrode stripes, said first annular terminal buss being designed for connection to one supply terminal of a source of alternating current electric excitation potential, and a second annular terminal buss circumferentially surrounding the tubing and electrically connected to the remaining second set of alternate electrically conductive electrode stripes, said second annular terminal buss being electrically isolated from the first annular terminal buss and the first set of alternate electrically conductive electrode stripes and being designed for connection to a second supply terminal of a source of alternating current electric excitation potential.

6. Electrically conductive tubing according to claim 5 wherein the tubing is inserted in a flow-thru blood treatment system between a hypodermic needle employed to withdraw and/or supply blood from a donor and/or to a recipient and/or a blood storage receptacle or to a patient in a blood recycling system.

7. Electrically conductive tubing according to claim 5 wherein a blood pump is inserted in the tubing between a donor and a recipient and/or a receptacle, and the tubing is a part of a system which further includes means for electrically isolating the blood pump from the electrically conductive tubing, means for regulating blood flow rate from the blood pump output, and means for electrically interconnecting the input and output sides of the tubing around the blood pump and the blood flow regulating means whereby electrical continuity is maintained throughout a desired length of the tubing.

8. An electrically conductive tubing according to claim 2 wherein the vessel is in the form of tubing and the electrically conductive electrode segments are in the form of zebra stripes which extend radially around the inside diameter of the tubing in alternating conductive and insulating annular bands whereby alternate conductive bands are electrically isolated one from the other by respective insulating bands, a first set of alternate ones of the electrically conductive annular electrode stripes being electrically connected in common to a first longitudinally extending terminal buss that is formed on the tubing in parallel with the longitudinal axis thereof and electrically isolated from the remaining second set of alternate electrically conductive annular electrode stripes, said first longitudinally ext ending terminal buss being designed for connection to a first supply terminal of a source of alternating current electric excitation potential, and a second longitudinally extending terminal buss electrically connected to the remaining second set of alternate electrically conductive annular electrode stripes, said second longitudinally extending terminal buss being electrically isolated from the first longitudinally extending terminal buss and the first set of alternate electrically conductive annular electrode stripes and being designed for connection to a second supply terminal of a source of alternating current electric excitation potential.

9. Electrically conductive tubing according to claim 8 wherein the tubing is inserted in a flow-thru blood treatment system between a hypodermic needle employed to withdraw and/or supply blood from a donor and/or to a recipient and/or a blood storage receptacle or to a patient in a blood recycling system.

10. Electrically conductive tubing according to claim 9 wherein a blood pump is inserted in the tubing between a donor and a recipient and/or a receptacle, and the tubing is part of a system that further includes means for electrically isolating the blood pump from the electrically conductive tubing, means for regulating blood flow from the output of the blood pump, and means for electrically interconnecting the input and output sides of the tubing around the blood pump and blood flow regulating means whereby electrical continuity is maintained through a desired length of the tubing.

11. An electrically conductive vessel according to claim 2 wherein the walls of the vessel itself are formed from electrically conductive polymer material that is compatible with human tissue and blood and/or other body fluids with the electrically conductive portions being formed into desired patterns of spaced apart electrically conductive electrode segments physically interconnected by integrally formed electrically insulating tubing walls portions which electrically isolate a first array of electrode segments from a second array of electrode segments.

12. An electrically conductive vessel according to claim 11 wherein the vessel is in the form of tubing and the electrically conductive electrode segments are in the form of zebra stripes which extend longitudinally parallel with the longitudinal axis of the tubing with the alternate electrically conductive electrode stripes being separated by alternate electrically insulating stripes for electrically isolating the alternate electrically conductive electrode stripes one from the other, a first set of alternate ones of the electrically conductive electrode stripes being electrically connected in common to a first annular terminal buss formed on and circumferentially surrounding the tubing and electrically isolated from the remaining second set of alternate electrically conductive electrode stripes, said first annular terminal buss being designed for connection to one supply terminal of a source of alternating current electric excitation potential, and a second annular terminal buss circumferentially surrounding the tubing and electrically connected to the remaining second set of alternate electrically conductive electrode stripes, said second annular terminal buss being electrically isolated from the first annular terminal buss and the first set of alternate electrically conductive electrode stripes and being designed for connection to a second supply terminal of a source of alternating current electric excitation potential.

13. Electrically conductive tubing according to claim 12 wherein the tubing is inserted in a flow-thru blood treatment system between a hypodermic needle employed to withdraw and/or supply blood from a donor and/or to a recipient and/or a blood storage receptacle or to a patient in a blood recycling system.

14. Electrically conductive tubing according to claim 13 wherein a blood pump is inserted in the tubing between a donor and a recipient and/or a receptacle, and the tubing is part of a system which further includes means for electrically isolating the blood pump from the electrically conductive tubing, means for regulating blood flow from the output of the blood pump, and means for electrically interconnecting the input and

output sides of the tubing around the blood pump and blood flow regulating means whereby electrical continuity is maintained throughout a desired length of the tubing.

15. An electrically conductive vessel according to claim 11 wherein the vessel is in the form of tubing and the electrically conductive electrode segments are in the form of zebra stripes which extend radially around the inside diameter of the tubing in alternating conductive and insulating annular bands whereby alternate conductive bands are electrically isolated one from the other by respective insulating bands, a first set of alternate ones of the electrically conductive annular electrode stripes being electrically connected in common to a first longitudinally extending terminal buss that is formed on the tubing in parallel with the longitudinal axis thereof and electrically isolated from the remaining second set of alternate electrically conductive annular electrode stripes, said first longitudinally extending terminal buss being designed for connection to a first supply terminal of a source of alternating current electric excitation potential, and a second longitudinally extending terminal buss electrically connected to the remaining second set of alternate electrically conductive annular electrode stripes, said second longitudinally extending terminal buss being electrically isolated from the first longitudinally extending terminal buss and the first set of alternate electrically conductive annular electrode stripes and being designed for connection to a second supply terminal of a source of alternating current electric excitation potential.

16. Electrically conductive tubing according to claim 15 wherein the tubing is inserted in a flow-thru blood treatment system between a hypodermic needle employed to withdraw and/or supply blood from a donor and/or to a recipient and/or a blood storage receptacle or a patient in a blood recycling system.

17. Electrically conductive tubing according to claim 16 wherein a blood pump is inserted in the tubing between a donor and a recipient and/or a receptacle, and the tubing is part of a system that further includes means for electrically isolating the blood pump from the electrically conductive tubing, means for regulating blood flow from the output of the blood pump, and means for electrically interconnecting the input and output sides of the tubing around the blood pump and the blood flow regulating means whereby electrical continuity is maintained throughout a desired length of the tubing.

18. A fluid treatment process for attentuating bacteria, and/or virus, and/or parasites, and/or fungus, existing in blood and/or other body fluids and/or synthetic fluids within a treatment vessel having only biologically compatible internal and conductive electrode surfaces therein contacting fluid being treated thereby maintaining the biological usefulness of the blood or other fluids being treated comprising subjecting the fluid within the treatment vessel to low voltage, low alternating current electric field forces within non-biologically damaging electric field forces for producing a biologically compatible current flow through the blood or other fluids for a predetermined period of time sufficient to attenuate bacteria and/or virus, and/or parasites and/or fungus contained in the blood or other fluids to thereby render them ineffective while maintaining the biological usefulness of the fluids being treated.

19. The product of the process according to claim 18.

20. A fluid treatment process according to claim 18 wherein the low voltage alternating current electric potentials are in the range from about 0.2 to 12 volts and induce electric current flow densities in the blood or other fluids of from one microampere per square millimeter (1 $\mu A/mm^2$) to about two milliamperes per square millimeter (2 mA/mm^2).

21. The product of the process according to claim 20.

22. A fluid treatment system for attentuating bacteria, and/or virus, and/or parasites, and/or fungus existing in blood and/or other body fluids and/or synthetic fluids being treated without biological damage to the blood or other fluids comprising an electrically conductive vessel formed at least in part of biologically compatible conductive material for contacting blood or other fluids to be treated, means for subjecting the blood or other fluids within the conductive vessel to low voltage, low alternating current electric field forces for producing biologically compatible current flow through the blood or other fluids for a predetermined period of time sufficient to attenuate bacteria and/or virus, and/or parasites, and/or fungus contained in the blood or other fluids to thereby render such contaminants ineffective while maintaining the biological usefulness of the blood or other fluids.

23. A fluid treatment system according to claim 22 wherein the low voltage alternating current electric potentials are in the range from about 0.2 to 12 volts and produce electric current flow densities in the blood or other body fluids of from one microampere per square millimeter (1 $\mu A/mm^2$) to about two milliamperes per square millimeter (2 A/mm^2).

24. A fluid treatment system according to claim 22 wherein the system comprises a plurality of components including an electric power source all of which the miniaturized and implanted in the body of a patient being treated to form a closed loop, continuous recirculating body fluid treatment system.

25. A fluid treatment system according to claim 22 wherein the conductive vessel is in the form of an open ended tube to allow flow-thru treatment of blood and other fluids and is miniaturized along with an electric power source for supply of alternating current electric potentials thereto whereby the system may be implanted in human beings and other mammals to operate as a continuous recirculating fluid treatment process.

26. A fluid treatment system according to claim 22 wherein the conductive vessel in the vicinity of the spaced-apart opposed electrically conductive electrode segments is provided with an enlarged cross sectional area wherein enlarged electrically conductive electrode segment surface areas are provided to act on the blood or other fluids flowing through the vessel thereby increasing the through-put and/or effectiveness of the treatment accomplished within the vessel for a given dwell time.

27. A body fluid treatment system according to claim 26 wherein the electrically conductive vessel comprises an enlarged rectangular-shaped body of electrical insulating material having a plurality of parallel, longitudinally extending tubular openings formed all the way through the insulating material from one end to the other and having spaced-apart electrically conductive metal strips secured to respective opposite sides of all of the tubes in opposed, parallel relationship, one set of corresponding conductive strips of all of the tubes extending out of the ends of each tube on one side or end of the body of electrical insulating material and contact-

ing a conductive surface forming a terminal buss for all conductive strips of the set, and the remaining set of conductive strips projecting out of the opposite ends of the respective tubes on the opposite end of the insulating block to engage a conductive terminal surface, and header reservoirs formed on each of the ends of the body of electrical insulating material into which the ends of the tubular openings are connected, each header having a respective inlet or outlet opening for supply of blood and/or other fluids for treatment thereto.

28. A fluid treatment system according to claim **27** wherein the enlarged insulating clock member is cylindrically shaped and the header reservoirs at each end of the block member are correspondingly cylindrically shaped.

29. A fluid treatment system according to claim **27** wherein selectively operated gas vents are provided in the top of the respective header reservoirs of the electrically conductive vessel.

30. A fluid treatment system according to claim **26** wherein the electrically conductive vessel is in the form of an enlarged cross sectional area treatment vessel of substantially greater cross sectional area than the inlet and outlet conduits supplying body fluids to be treated to the vessel and wherein the enlarged cross sectional area vessel is included in a blood transfer system between a hypodermic needle employed to withdraw and/or supply blood from a donor and/or to a recipient and/or a blood storage receptacle or to a patient in a continuous flow-thru blood recycling system.

31. A fluid treatment system according to claim **30** wherein a blood pump is inserted in the flow path of the blood or other fluid either to or from the enlarged cross sectional area vessel, or both, and are located in a tubing system between the donor and recipient or receptacle, and the system further includes means for regulating blood flow rate from or to the enlarged cross sectional area treatment vessel via the inlet or outlet pumps or both.

* * * * *

bone tissue regeneration

US005814094A

United States Patent [19]

Becker et al.

[11] **Patent Number: 5,814,094**

[45] **Date of Patent: Sep. 29, 1998**

[54] **IONTOPHERETIC SYSTEM FOR STIMULATION OF TISSUE HEALING AND REGENERATION**

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[21] Appl. No.: **623,046**

[22] Filed: **Mar. 28, 1996**

[51] **Int. Cl.**[6] **A61M 5/32**

[52] **U.S. Cl.** **607/50**; 604/20

[58] **Field of Search** 607/50; 604/20

[56] **References Cited**

U.S. PATENT DOCUMENTS

3,799,162	3/1974	Romero-Sierra .	
3,800,792	4/1974	McKnight et al. .	
4,312,340	1/1982	Donadelli .	
4,528,265	7/1985	Becker	435/172.1
4,767,401	8/1988	Seiderman .	
4,818,697	4/1989	Liboff et al. .	
4,847,049	7/1989	Yamamoto .	
4,932,951	6/1990	Liboff et al. .	
4,937,323	6/1990	Silver et al. .	
5,322,520	6/1994	Milder .	
5,324,275	6/1994	Raad et al. .	

OTHER PUBLICATIONS

R. O. Becker, et al., "Electrochemical Mechanisms and the Control of Biological Growth Processes," in Modern Aspects of Electrochemistry, No. 10, pp. 289–338, publ. Plenum Press (1971). USA.

R. E. Hall, et al., "Inhibitory and Cidal Antimicrobial Actions of Electrically Generated Silver Ions," J. Oral & Maxillofac. Surg., vol. 45, pp. 779–784 (1987). USA.

R. O. Becker, et al., "Experience With Low–Current Silver Electrode Treatment of Nonunion," in Electrical Prop. Bone & Cartilage (ed. C. T. Brighton, et al.), Grune & Stratton (1979), USA.

J. A. Spadaro, et al., "Experience With Anodic Silver in the Treatment of Osteomyelitis," 25th Ann. ORS Mtg., Feb. 20–22, 1979.

R. O. Becker, et al., "Treatment of Orthopaedic Infections With Electrically Generated Silver Ions," J. Bone & Joint Surgery, vol. 60–A, pp. 871–88 (1978). USA.

R. O. Becker, et al., "Clinical Exp. With Low Intensity Direct Current Stimulation of Bone Growth," Clin. Orthop. & Rel. Res., vol. 124, pp. 75–83 (1977) . USA.

T. J. Berger, et al., "Antifungal Properties of Electrically Generated Metallic Ions," Antimicrob. Agents & Chemother., vol. 10, pp. 856–860 (1976). USA.

T. J. Berger, et al., "Electrically Generated Silver Ions: Quantitative Effects on Bacterial & Mammalian Cells," Antimicrob. Agents & Chemother., vol. 9, pp. 357–358 (1976) USA.

J. A. Spadaro, et al., "Some Specific Cellular Effects of Electrically Injected Silver & Gold Ions," bioelectrochem. & Bioenergetics, vol. 3, pp. 49–57 (1976. USA.

J. A. Spadaro, et al., "Antibacterial Effects of Silver Electrodes With Weak Direct Current," Antimicrob. Agents & Chemother., vol. 6, pp. 637–642 (1974). USA.

M. R. Urist, et al., "Bone Morphogenesis in Implats of Insoluble Bone Gelatin," Proc. Nat. Acad. Sci. USA, vol. 70, No. 12, Part I, pp. 3511–3515 (1973). USA.

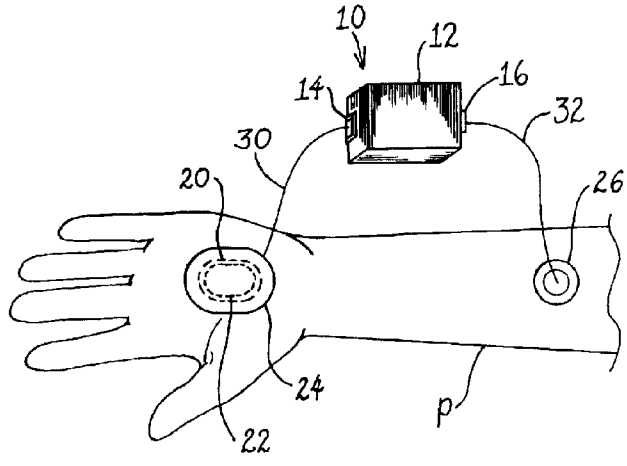
Primary Examiner—Scott Getzow

Attorney, Agent, or Firm—Maria Reichmanis

[57] **ABSTRACT**

An iontophoretic system for promoting tissue healing processes and inducing regeneration. The system includes a device and a method, a composition, and methods for making the composition in vitro and in vivo. The system is implemented by placing a flexible, silver-containing anode in contact with the wound, placing a cathode on intact skin near the anode, and applying a wound-specific DC voltage between the anode and the cathode. Electrically-generated silver ions from the anode penetrate into the adjacent tissues and undergo a sequence of reactions leading to formation of a silver-collagen complex. This complex acts as a biological inducer to cause the formation in vivo of an adequate blastema to support regeneration.

42 Claims, 11 Drawing Sheets
(7 of 11 Drawing Sheet(s) Filed in Color)



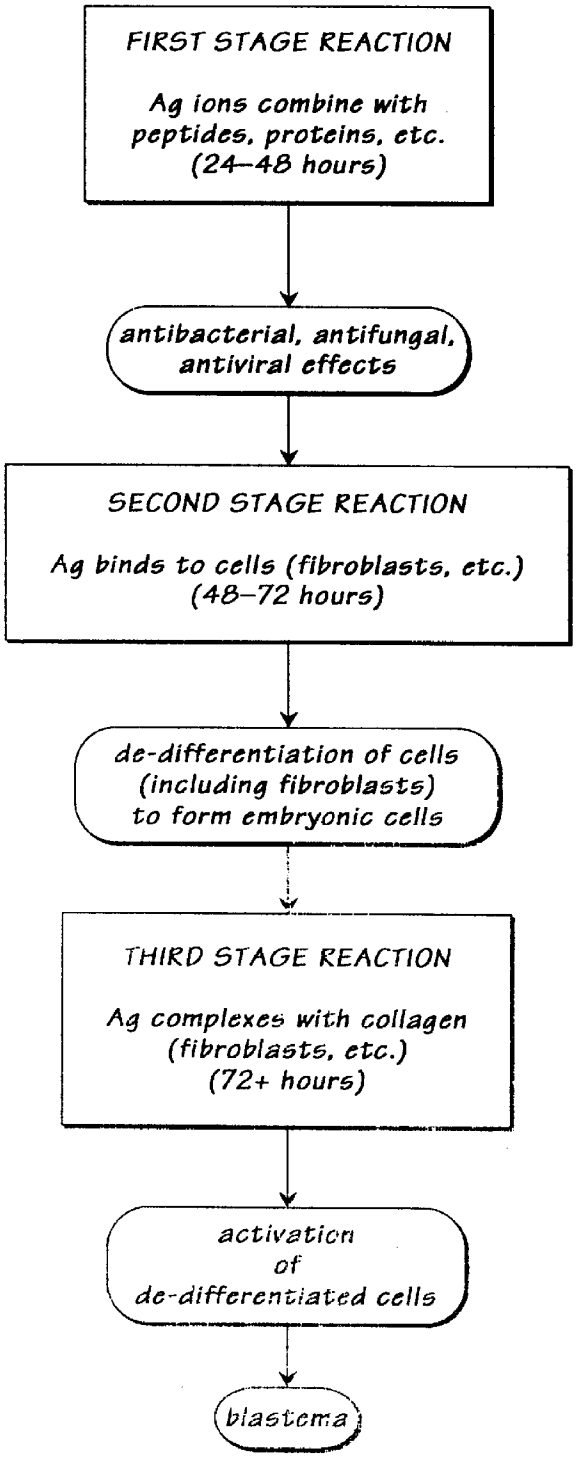

FIRST STAGE REACTION
Ag ions combine with peptides, proteins, etc. (24–48 hours)
antibacterial, antifungal, antiviral effects
SECOND STAGE REACTION
Ag binds to cells (fibroblasts, etc.) (48–72 hours)
de-differentiation of cells (including fibroblasts) to form embryonic cells
THIRD STAGE REACTION
Ag complexes with collagen (fibroblasts, etc.) (72+ hours)
activation of de-differentiated cells
blastema

Fig. 1

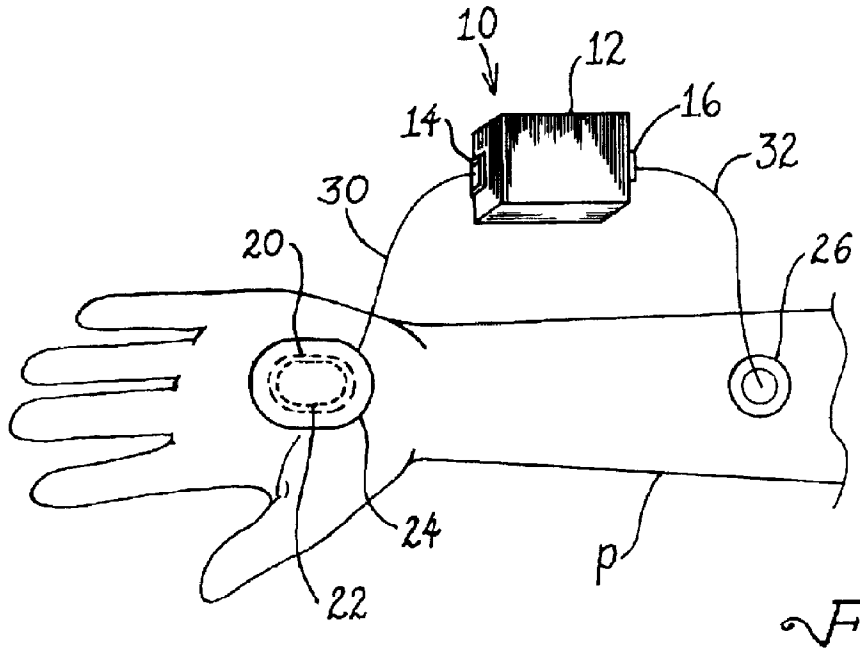


Fig. 2

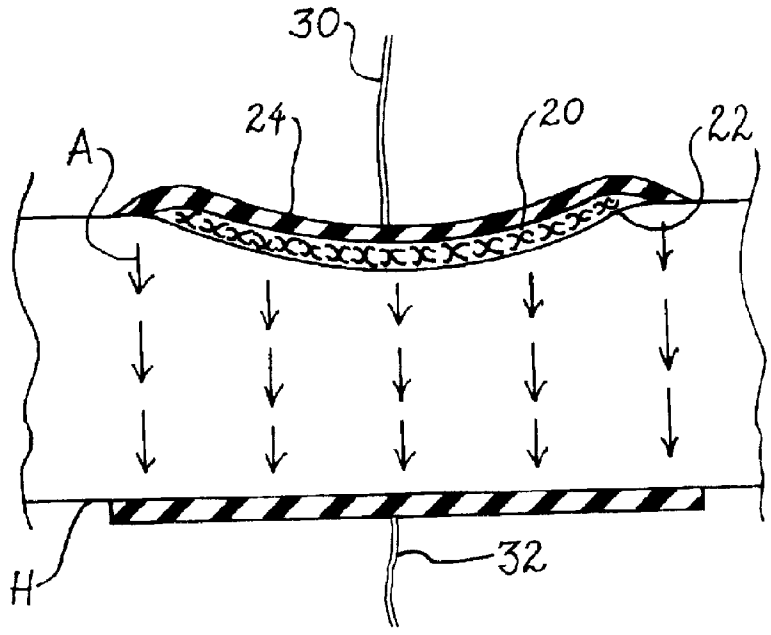


Fig. 3

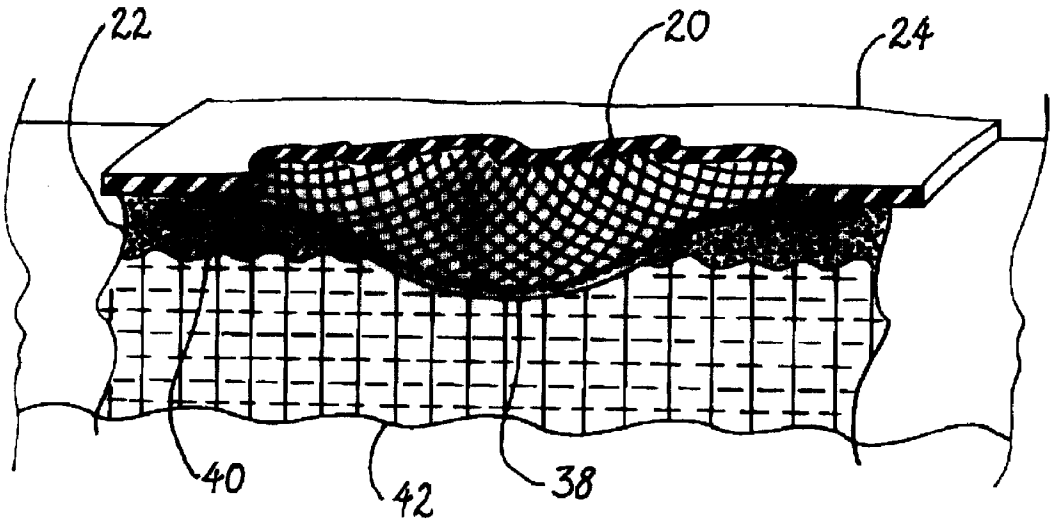

22
20
24
40
42
38

Fig. 4

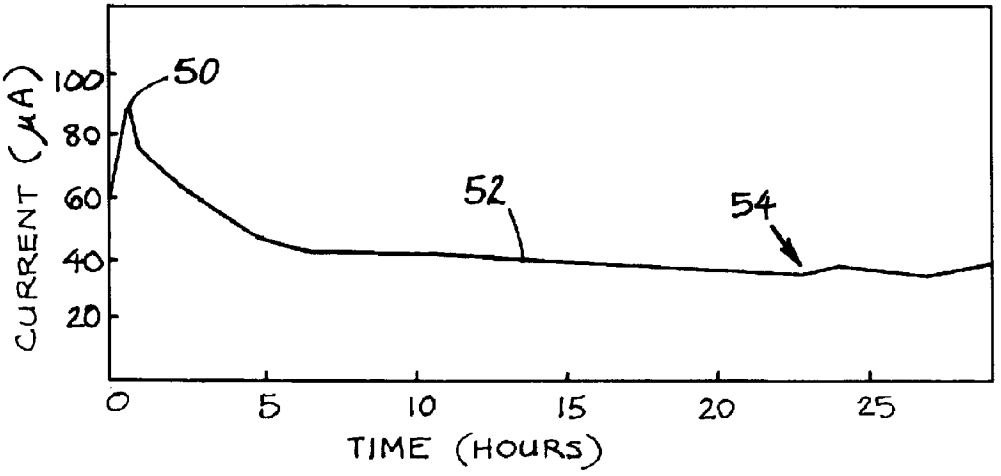

CURRENT (μA)
100
80
60
40
20
50
52
54
0
5
10
15
20
25
TIME (HOURS)

Fig. 5

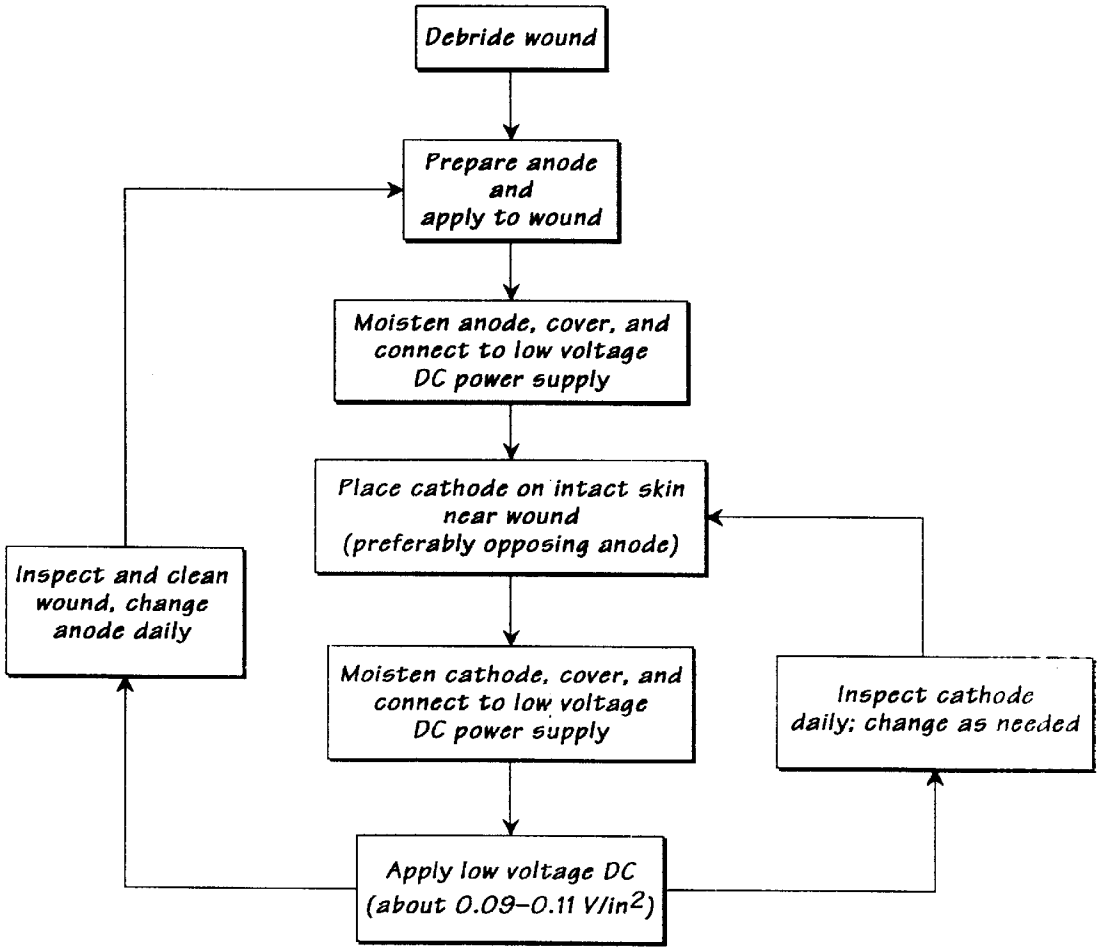

Debride wound
Prepare anode and apply to wound
Moisten anode, cover, and connect to low voltage DC power supply
Place cathode on intact skin near wound (preferably opposing anode)
Moisten cathode, cover, and connect to low voltage DC power supply
Apply low voltage DC (about 0.09–0.11 V/in2)
Inspect and clean wound, change anode daily
Inspect cathode daily; change as needed

Fig. 6

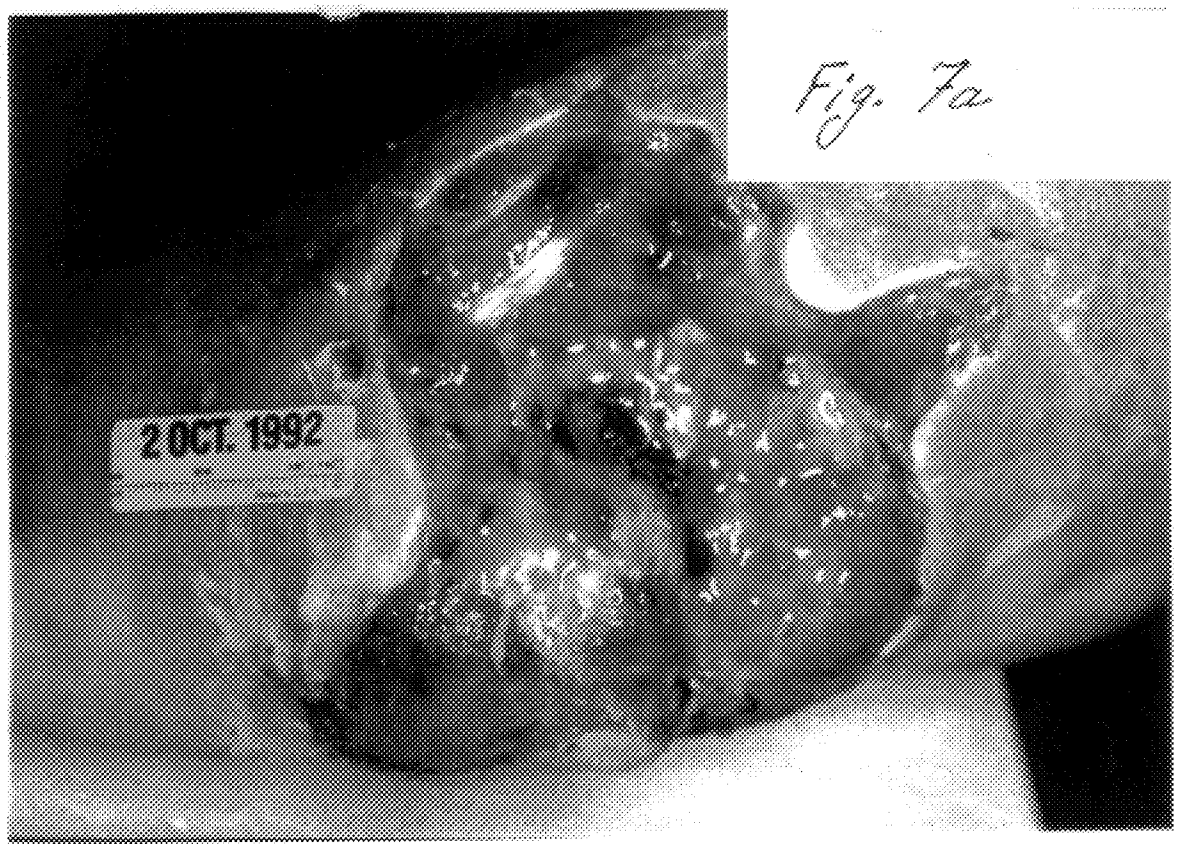


Fig. 7a

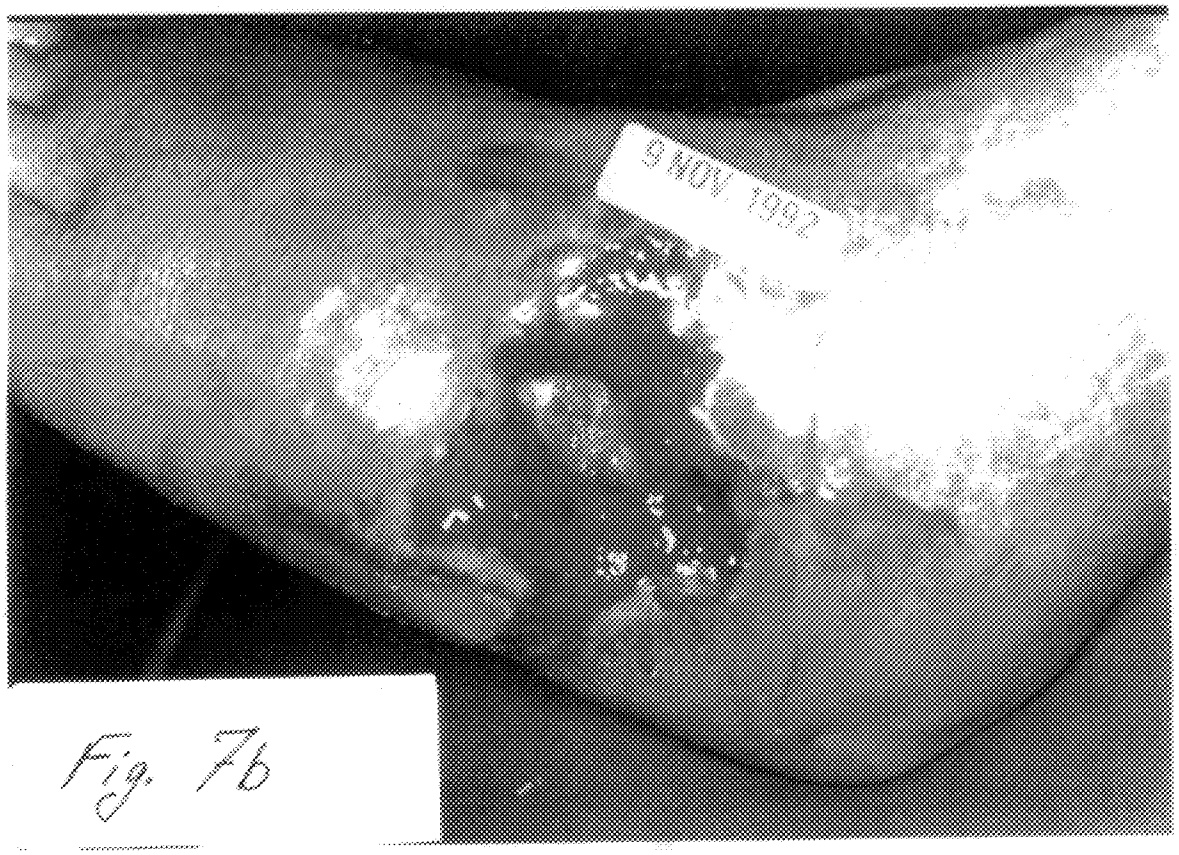


Fig. 7b

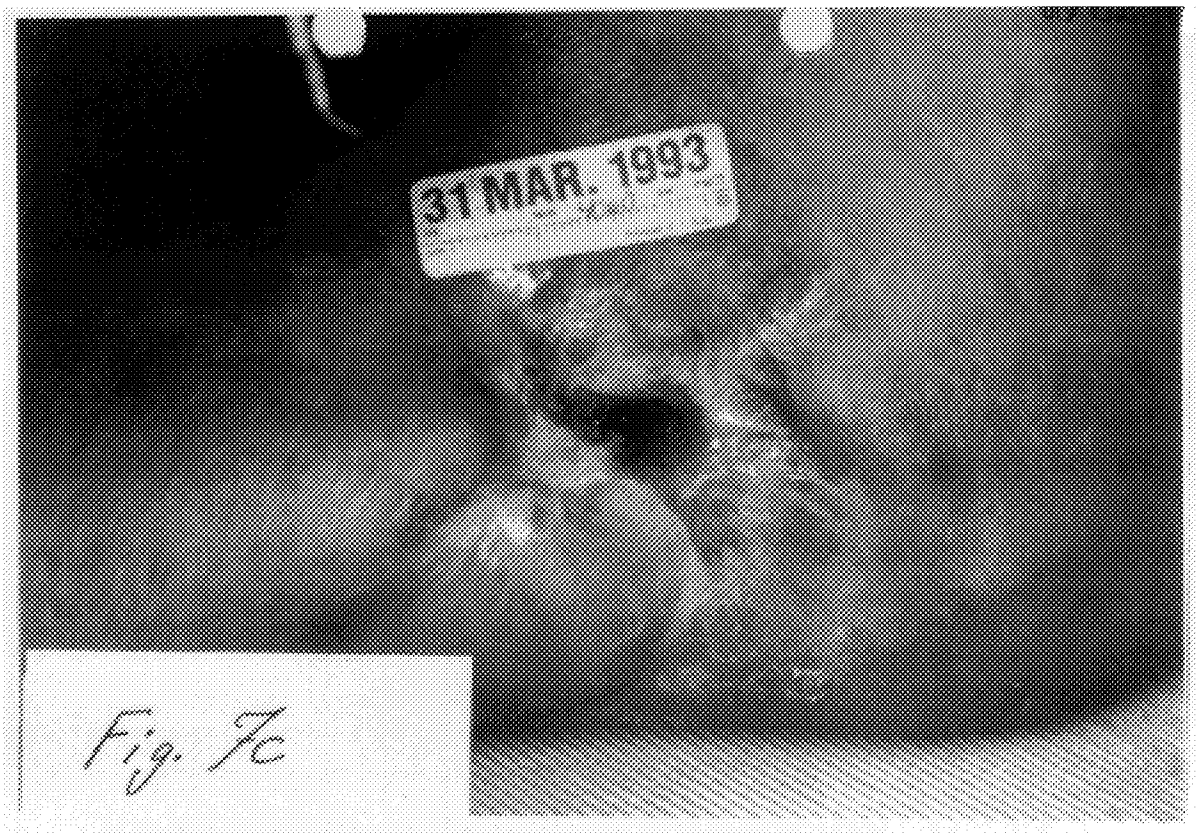


Fig. 7c

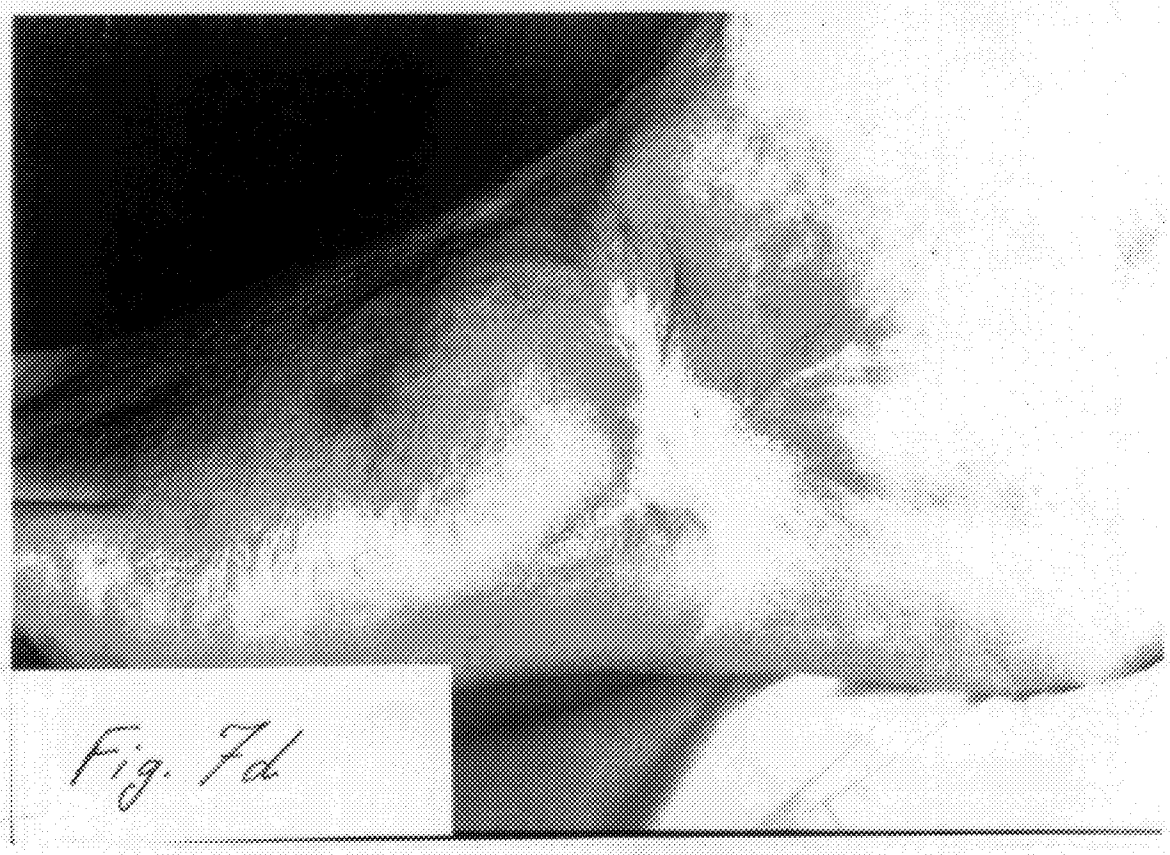


Fig. 7d

Fig 8a

Fig. 8b

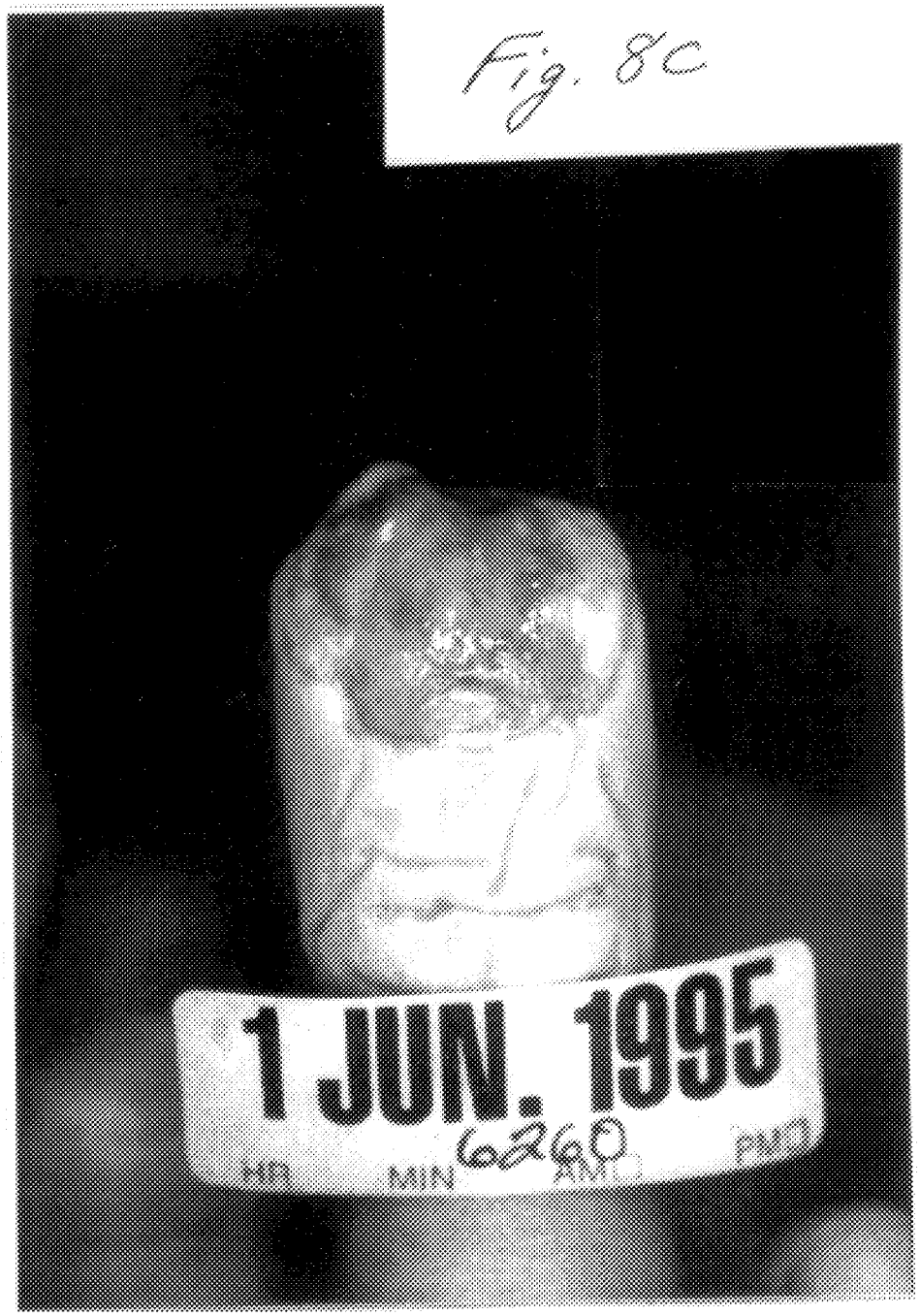


Fig. 8c

Fig. 8d

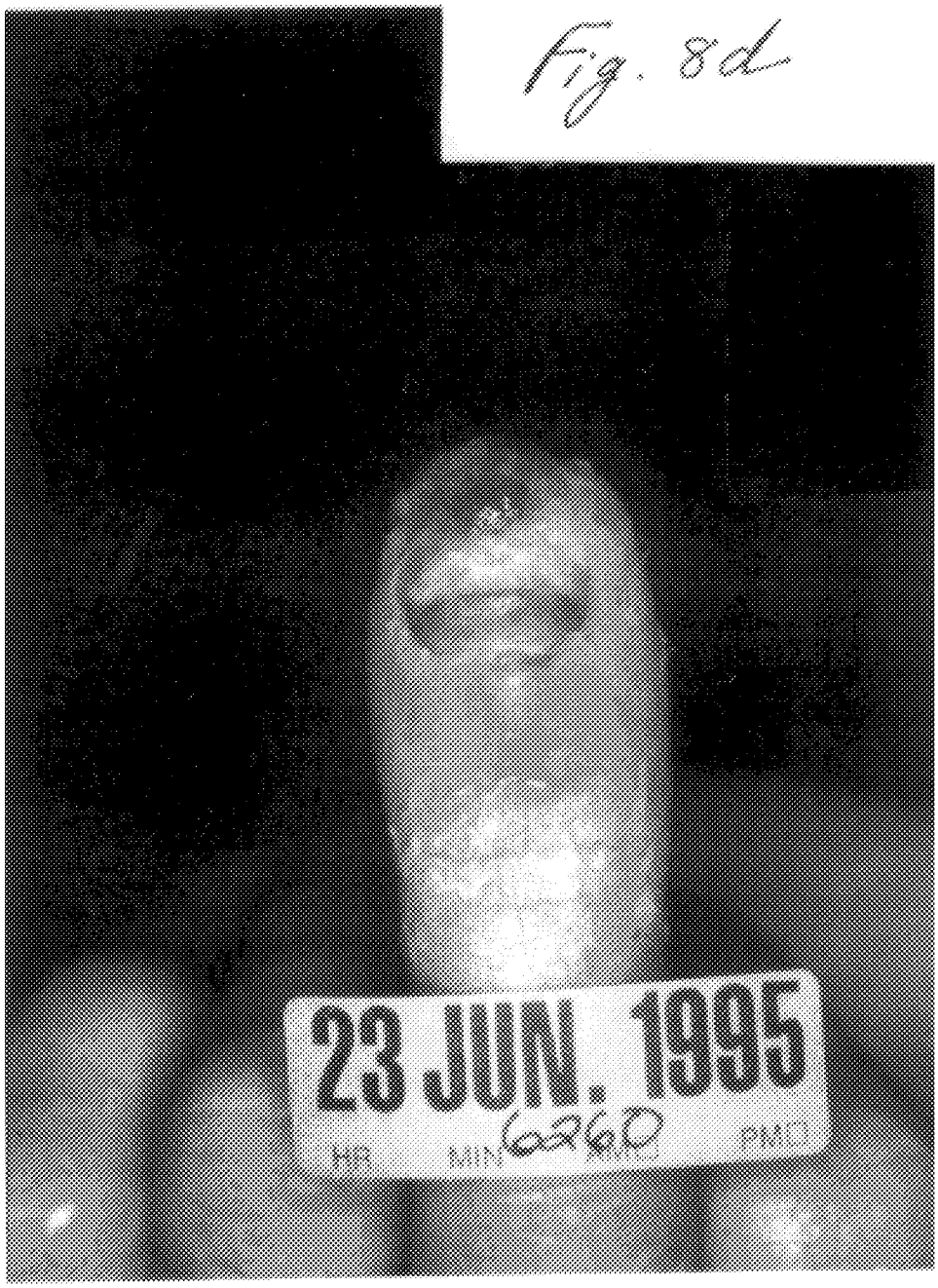
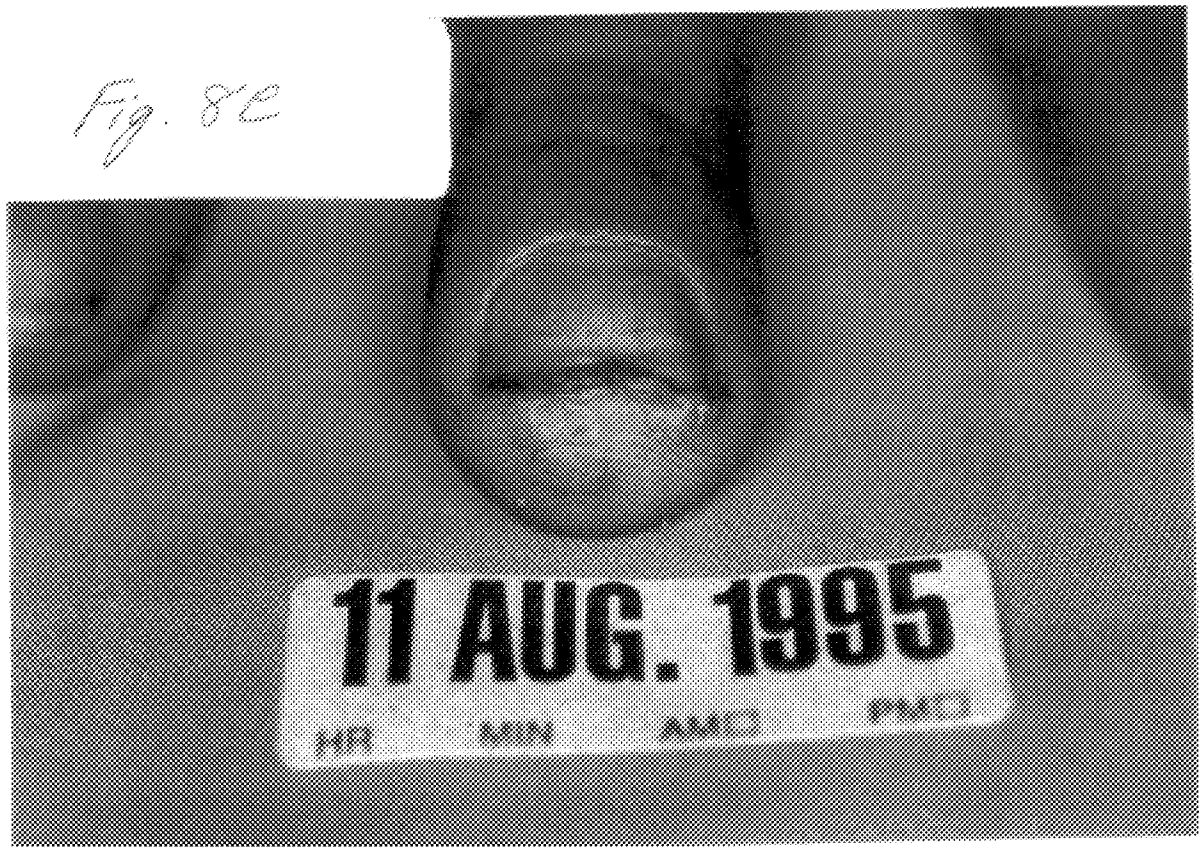


Fig. 8C



IONTOPHERETIC SYSTEM FOR STIMULATION OF TISSUE HEALING AND REGENERATION

BACKGROUND OF THE INVENTION

1. Field of the Invention

The present invention relates to an iontophoretic system for the stimulation of tissue healing and regeneration. In particular, the present invention relates to a method and device for stimulation of tissue healing and regeneration, a composition for use therewith, and methods for making the composition.

2. Discussion of Background

Healing, like all other biological processes, is a cellular process. The occurrence of an injury immediately triggers the onset of this process, which continues until the injury is healed. Although its exact mode of action is not yet understood, it is clear that a feedback mechanism monitors the extent of tissue damage and adjusts cellular activity in the injured area to produce the exact amount of healing needed.

As used herein, the terms "wound" and "injury" refer to tissue damage or loss of any kind, including but not limited to cuts, incisions (including surgical incisions), abrasions, lacerations, fractures, contusions, burns, and amputations.

Healing processes can be classified into three types, determined by how the cells in the injured area react to the injury. The simplest type of healing is scarification healing, wherein cells at the edges of a wound produce collagen and elastic fibers which simply bind the edges of the wound together without restoring severed nerves or blood vessels. This type of healing produces a visible scar, and sometimes results in numbness and circulatory inadequacy in the region of the wound and regions distal thereto. In the higher animals, including man, the heart, skeletal muscle, and nerve tissue (including the brain) heal by scarification.

A second type of healing is tissue replacement, wherein the cells of some body tissues produce more cells of their own kind to replace missing portions. In humans, the skin and portions of the gastrointestinal tract heal by replacement. In this type of healing, the replacement rate of the cells in the injured area increases to produce sufficient numbers of cells to help heal the injury, then returns to normal after healing is complete. Replacement is effective only if enough normal cells of the needed types are present in the area, and only for the particular types of cells that are capable of healing in this manner. Replacement is often inadequate for healing full-thickness skin wounds, which frequently heal with limited re-epithelialization, resulting in poorly innervated, thin and inelastic skin, while subcutaneous soft tissue defects heal primarily by scarification. However, such results are generally adequate for function if the wound is on the torso or the extremities (excepting the hand).

The most effective—and most complex—type of healing is regeneration. This type of healing is capable of replacing entire limbs and internal organs, and even portions of the brain and heart. Regeneration is a biphasic process. In the first phase, normal, mature cells at the site of the injury revert to an embryonic, unspecialized form ("de-differentiate"). These cells multiply rapidly, then become activated and demonstrate a variety of energetic processes which may include amitotic division, nuclear transfer, migration of free nuclei into residual tissues, and production of exceptionally large cells containing nuclear material from a number of individual de-differentiated cells (thus, "activated cells" are cells that undergo these processes). Activation results in the rapid accumulation of a large mass of embryonic cells known as the blastema, which is the essential element for regeneration. The blastema may be viewed as providing the biological raw material needed for rebuilding the missing tissues: formation of an adequate blastema results in complete regeneration of the missing tissues, whereas if the blastema is inadequate in size, only partial or incomplete regeneration takes place (formation of a stunted or incomplete part, or merely regeneration of individual tissue types that are not fully organized into the desired structure).

In the second phase of the regeneration process, the embryonic cells of the blastema respecialize ("re-differentiate") into the various types of cells needed to rebuild the missing tissues and organized structures in complete anatomical detail. The rebuilding process is essentially a recapitulation (albeit on a local scale) of the original embryonic development of the tissues being replaced.

In vertebrates, regenerative healing is found in certain species of amphibians (notably salamanders). It is almost totally lacking in humans, except in the fetus and in very young children (who may regenerate the distal finger tip if the wound is left open). In adults, regeneration is largely limited to parts of the fracture healing process. Clearly, it would be beneficial if humans could regenerate other damaged tissues, both in terms of more cost-effective treatment modalities and improved outcomes for patients.

The stimulus which initiates the complex regenerative process in amphibians has been reported to be a specific type of electrical signal, but the mechanism which provides the blueprint for the tissues to be regenerated is largely unknown. In the case of regeneration of individual tissues, however, a number of inducer substances that carry a specific signal causing either embryonic, de-differentiated, or mature cells to convert into specific tissue types have been identified. These "biological inducers" are analogous to chemical catalysts in that they effect cellular transformation by contact with the cells, but the inducer itself does not take part in the transformation. It is believed that biological inducers act by producing a signal in the nature of a specific electrical field which causes an event to occur on the surface of the target cell, which in turn causes the DNA in the target cell to alter the cell type in a specific fashion. By way of example, a "bone induction material" that causes the transformation of muscle cells into bone has been identified (M. Urist, *Proc. Nat. Acad. Sci. USA,* Vol. 70, pp. 3511–3515 (1973)).

Healing in general is known to be related to the degree of the injury, the amount of nerve tissue present at the site, and the electrical potential difference between the site and surrounding intact tissue (the "current of injury"). In particular, regeneration in amphibians such as salamanders and fracture healing in mammals are associated with complex changes in the local DC (direct current) electric field. An injury results in changes in the electric field and stimulates the animal's neural system, which in turn produces an electrical signal at the site of the injury, stimulating the complex cellular responses that eventually produce healing. The electric field gradually returns to normal, pre-injury levels as the injury heals. Conversely, failure of the normal healing process, as in fracture nonunions, is associated with the absence of appropriate electrical signals at the site of the injury.

These observations have lead to widespread use of electrical stimulation for the treatment of injuries in humans, especially fracture nonunions. Many studies have demon-

strated that the application of small electrical currents (in the microampere range or lower) or weak magnetic or electric fields affects the growth or reunion of bone. See, for example, R. **0**. Becker and A. A. Pilla, "Electrochemical Mechanisms and the Control of Biological Growth Processes," in *Modern Aspects of Electrochemistry* (ed. J. O'M. Bockris and B. E. Conway), Vol. 10, pp. 289–338 (1971); R. **0**. Becker, et al., "Clinical Experiences With Low Intensity Direct Current Stimulation of Bone Growth," *Clinical Orthopedics & Related Research,* Vol. 24, pp. 75–83 (1977); R. **0**. Becker & J. A. Spadaro, "Experience with Low Current Silver Electrode Treatment of Nonunion," in *Electrical Properties of Bone and Cartilage* (ed. C. Brighton, et al.), pp. 631–638 (1979); R. O. Becker, et al., "Clinical Experience with Low Intensity Direct Current Stimulation of Bone Growth," *Clinical Orthopedics and Related Research,* Vol. 124, pp. 75–83 (1977).

Furthermore, electrically-injected silver ions are known to have significant antibacterial and antifungal properties. Silver is a well-known antibiotic, widely used in topical applications in the form of silver nitrate solution, silver sulfadiazine, and so forth. However, the useful antibacterial effect of such compounds is limited and due only to the small amount of free silver ions produced by dissociation of the compound or to formation of toxic by-products (for example, use of silver nitrate ($AgNO_3$) solutions may lead to the formation of nitric acid). The antibacterial action of these ions is limited to a very localized effect directly on the wound surface.

Electrically-generated silver ions, on the other hand, penetrate at least approximately 1 cm into the wound and can be produced in much larger amounts than is possible with topical preparations such as silver sulfadiazine. Thus, electrically-injected silver is effective even against antibiotic-resistant strains, inhibiting bacterial growth in vivo and in vitro at current densities as low as 10 nA/mm^2 and concentrations as low as 0.5 mg/ml. Susceptible organisms include *S. aureus, E col.,* Candida and Torulopsis. These effects are described in a number of publications, including the following: J. A. Spadaro, et al., "Antibacterial Effects of Silver Electrodes with Weak Direct Current," *Antimicrobial Agents and Chemotherapy,* Vol. 6, pp. 637–642 (1974); J. A. Spadaro and R. **0**. Becker, "Some Specific Cellular Effects of Electrically Injected Silver and Gold Ions," *Bioelectrochemistry and Bioenergetics, Vol.* 3, pp. 49–57 (1976); T. J. Berger, et al., "Antifungal Properties of Electrically Generated Metallic Ions," *Antimicrobial Agents and Chemotherapy,* Vol. 10, pp. 856–860 (1976); J. A. Spadaro and R. **0**. Becker, "Experience With Anodic Silver in the Treatment of Osteomyelitis," *Proceedings of the 25th Annual Orthopedic Research Society Meeting,* Vol. 4, p. 10 (1979); R. **0**. Becker, et al., "Treatment of Orthopedic Infections With Electrically-Generated Silver Ions," *Journal of Bone and Joint Surgery,* Vol. 60A, pp. 871–881 (1978).

At any particular silver concentration, electrically-generated silver ions are more effective in inhibiting bacterial growth than silver salts (T. J. Berger, et al., "Electrically Generated Silver Ions: Quantitative Effects on Bacterial and Mammalian Cells," *Antimicrobial Agents and Chemotherapy,* Vol. 9, pp. 357–358 (1976); Hall, et al., "Inhibitory and Cidal Antimicrobial Actions of Electrically Generated Silver Ions," *J. Oral and Maxillofac. Surg.,* Vol. 45, pp. 779–784, 1987).

Becker (U.S. Pat. No. 4,528,265) has disclosed processes and products that involve subjecting mammalian cells to the influence of electrically-generated silver ions. Anodic silver causes cells such as mammalian fibroblasts to assume a simpler, relatively unspecialized form and to resemble dedifferentiated or embryonic cell types. In mammals, including humans, this effect is associated only with the silver ions; the effect is not related to the electrical current or voltage. The afore-mentioned publications are incorporated herein by reference.

A variety of devices for use in electrical stimulation are known. Liboff, et al. disclose a noninvasive magnetic field generator for producing a controlled, fluctuating, directionally oriented magnetic field parallel to an axis projecting though the target tissue (U.S. Pat. No. 4,932,951). An externally-generated magnetic field can be combined with the local magnetic field to produce a resultant field that enhances transfer of ions such as Ca^{++} across the membrane of a living cell (Liboff, et al., U.S. Pat. No. 4,818,697).

Other devices make use of the antimicrobial properties of silver and other metals. Raad, et al. (U.S. Pat. No. 5,324,275) disclose a catheter tube surrounded by two parallel helical conductors made of copper, gold, silver or other heavy metals. When connected to a DC power source such as a 9-volt battery, ions are transferred between the conductors through body fluids, and induce an antimicrobial effect proximate the area between the conductors.

Milder (U.S. Pat. No. 5,322,520) describes a material containing dissimilar metal powders, such as silver and gold, silver and copper, or silver and platinum mixed into a conductive polymer substrate. When contacted by an electrolytic solution, each metal granule that contacts the electrolyte becomes either an anode or a cathode, so the material contains an array of small batteries. Metal ions are driven into the solution to kill bacteria on and near a device to which the material is affixed. The material can be used in devices such as catheters, cardiac pacemaker leads, artificial; hip joints, and so forth.

Seiderman (U.S. Pat. No. 4,767,401) describes a method for iontophoretic administration of medicaments such as silver protein (a colloid of silver with protein). The medicament is coated onto a metallic foil electrode so that, when in contact with a wound, natural body fluids and the negative electric charge of the wound site create a voltaic effect that causes the medicament to migrate into the wound.

Yamamoto (U.S. Pat. No. 4,847,049) and McKnight, et al. (U.S. Pat. No. 3,800,792) disclose collagen compositions used for wound treatment. Yamamoto contacts renatured collagen with a silver-ion-containing solution at pH between 4.0 and 9.0, forming a composition wherein silver ions are chelated to functional groups in the collagen. The composition is then exposed to UV radiation to strengthen the binding of the silver ions to the collagen. When the composition contacts bodily fluids, the silver ion is slowly released to protect the collagen from fungal and bacterial attack. McKnight's laminated collagen dressing is made from a layer of reconstituted collagen film laminated to a thin continuous layer of an inert polymer material such as polyurethane. Preferably, the collagen film contains finely divided silver metal particles, added by soaking the dried film in Tollen's reagent ($(AgNH_3)_2OH$) for 5 minutes to oxidize excess glutaraldehyde and deposit silver metal on the accessible surfaces of the collagen fibers.

Silver, et al. (U.S. Pat. No. 4,937,323) dress a wound with a biocompatible, biodegradable collagen product and apply low intensity direct current in the range of 10–100 microamperes. The collagen product may be a sponge made of collagen powder or flakes, and contains electrodes made of carbon or metal inserted therein. Donadelli (U.S. Pat. No.

4,312,340) treats scarred skin using a solution containing embryonic placenta, collagen and vitreous humor extracts diluted in distilled water, treated by partial electrolysis to provide a formation of groups of amino acids. A variable low frequency electric field is applied to create an electric charge below the scarred area. Romero-Sierra, et al. (U.S. Pat. No. 3,799,162) apply histamine to a lesion, and then radiate the cells bounding the lesion with low intensity nonionizing electromagnetic radiation to stimulate production of collagen at the site.

Despite the wide variety of known treatment modalities, no known treatment produces sufficient numbers of the de-differentiated (i.e., embryonic) cells required for true regeneration in humans and other mammals. In fact, the treatment of injuries involving traumatic loss of skin and soft tissue, particularly for hand injuries, ranges from judicious neglect to major surgery. In the case of hand injuries, the twin requirements of flexibility and sensation mean that the above-described natural and enhanced healing processes are inadequate to yield good functional results.

There is a need for a flexible, effective system that helps promote and enhance tissue healing processes in mammals, including humans. Use of such a system would not only improve the outcome of the processes responsible for most healing in humans (scarification, tissue replacement), but would, in appropriate instances, induce true regenerative healing resulting in regrowth of the specific tissue types appropriate to the situs of the injury (normally innervated, full thickness skin, subcutaneous soft tissues, bone, etc.). The system would make use of simple, efficient delivery devices, be safe and easy to use, and be capable of being applied directly to the wound site.

SUMMARY OF THE INVENTION

According to its major aspects and broadly stated, the present invention is an iontophoretic system for promoting tissue healing processes and inducing regeneration. The system includes a device and a method, a composition, and methods for making the composition in vitro and in vivo. The system is implemented as follows: a flexible, silver-containing anode is placed in contact with the wound, a cathode is placed on intact skin near the anode, and a wound-specific DC voltage is applied between the anode and the cathode.

Electrically-generated silver ions from the anode penetrate into the adjacent tissues and undergo a series of three reactions. First, the silver ions combine with proteins, peptides and various other chemical species normally present in solution in the tissues. The silver ions also combine with any bacteria, fungi or viruses present in the treatment area. If treatment is continued after all or most available sites for this type of reaction have been exhausted, the newly-generated silver ions associate with cells in the region, particularly fibroblast cells and epithelial cells, resulting in de-differentiation of these cells into embryonic cell types. Then, if treatment is continued after this second reaction is substantially complete, the free silver ions form a complex with collagen fibers present in the wound. This silver-collagen complex is believed to act as a biological inducer to activate the previously-produced de-differentiated fibroblast or epidermal cells to multiply and produce an adequate blastema.

In mammalian-including human-wounds treated at appropriate, wound-specific voltages, for a sufficient period of time to carry out the above-described reactions, and with anodes capable of supplying a sufficient number of silver ions for these reactions to take place, the resulting effects are analogous to those observed in animals that are naturally capable of regeneration. That is, the activated de-differentiated cells rapidly multiply to form a blastema that is adequate for supporting regeneration of the missing or injured tissues (skin, subcutaneous tissues, bone, and so forth).

A major feature of the present invention is the scaling of the applied voltage to the size of the wound. Surprisingly, an approximately constant voltage on the order of 0.1 V/in^2 of wound area (about 0.0155 V/cm^2) has been found to be optimum for promoting healing and regeneration of tissues while substantially avoiding the deleterious effects associated with biological electrolysis (to be described further below). Not only are specific voltages in this range remarkably effective in stimulating tissue healing and regeneration, but the electrically-injected silver ions are extremely effective against a wide variety of bacterial types (including gram positive, gram negative, aerobic and anaerobic forms), fungi, and local viral infections. Therefore, under optimal treatment conditions, the electrically-injected silver ions are an extremely effective agent against mixed infections and against many antibiotic-resistant strains.

An important feature of the invention is the anode, which is made of a material having a sufficiently high silver content to supply the needed silver ions to the wound. The anode is made of a flexible, silver-containing material that is conformable to the wound surface, such as silver-coated nylon fabric or the like. Materials usable with the invention contain a sufficient quantity of silver to produce an approximately constant current into the treated area for at least several hours, preferably 12–24 hours or thereabouts. Thus, silver-containing fabrics with a low specific resistance are needed, preferably fabrics having a specific resistance no greater than approximately 5 Ω/cm, preferably no greater than approximately 1 Ω/cm. Furthermore, fabrics with an approximately uniform silver content (i.e., a uniform silver content per unit area) that produce a uniform specific resistance throughout the electrode are preferred. Other metals (gold, copper, zinc, and so forth) may also be effective.

Another feature of the invention is the cathode, which, like the anode, is made of a flexible, electrically-conducting material, preferably a material having a specific resistance no greater than approximately 500 Ω/cm. By way of example, the cathode may be made of carbon rubber or like materials.

Still another feature of the invention is the placement of the cathode. For optimum results, the cathode is placed so as to achieve an approximately uniform flow of current through the treated region. In the human body, current tends to follow the shortest path from the anode to the cathode. Therefore, whenever possible, the cathode is positioned on the opposing side of the extremity being treated from the wound: for wounds on the palm of the hand, the cathode is placed on the back of the hand; for wounds on the dorsal surface of the forearm, the cathode is positioned on the ventral surface, and so forth.

Another feature of the invention is the silver-collagen complex, a specific physical association of the electrically-injected silver ions with the collagen fibers present in the wound area. While not wishing to be bound by theory, it is believed that this complex generates a unique localized electric field that activates embryonic cells in the treated area, eventually leading to formation of an adequate blastema to support regeneration.

Other features and advantages of the present invention will be apparent to those skilled in the art from a careful reading of the Detailed Description of a Preferred Embodiment presented below and accompanied by the drawings.

BRIEF DESCRIPTION OF THE DRAWINGS

This application contains color drawings.

In the drawings,

FIG. **1** is a flow chart showing three sequential reaction processes resulting from the action of electrically-injected silver ions;

FIG. **2** shows an electrical stimulation device in use;

FIG. **3** shows the preferred placement of the cathode for optimum treatment according to the present invention;

FIG. **4** is a partially cut-away view showing a silver-containing anode placed on the surface of a wound;

FIG. **5** is a plot of the current vs. time for a silver-containing material usable with the present invention, measured in vitro;

FIG. **6** is a flow chart illustrating treatment according to a preferred embodiment of the present invention;

FIG. **7***a* is a photographic view showing a wound on the foot of a 54-year-old male patient;

FIGS. **7***c,* **7***b,* and **7***d* are photographic views showing the wound of FIG. **7***a* after thirty-one days, five months, and seven months, respectively, of treatment according to a preferred embodiment of the present invention;

FIG. **8***a* is a photographic view showing the middle finger of a 21-year-old male patient, after traumatic amputation of one half the distal phalanx at the level of the base of the nail;

FIGS. **8***b* and **8***c* are photographic views showing the finger of FIG. **8***a* after 17 days and 38 days, respectively, of treatment according to a preferred embodiment of the present invention; and

FIG. **8***d* is a photographic view of the finger of FIG. **8***a* approximately 7 weeks after cessation of treatment.

FIG. **8***e* is a photographic view of the finger of FIG. **8***a* approximately 7 weeks after cessation of treatment.

DETAILED DESCRIPTION OF PREFERRED EMBODIMENTS

In the following description, like reference numerals refer to and identify the same structural elements, portions or surfaces consistently throughout the drawings, as such elements, portions or surfaces may be further described or explained by the entire written specification. The terms "proximal," "distal," "dorsal," "ventral," "volar," "opposing," "anterior" and "posterior" are used in the customary anatomical sense. The "size" or "surface area" of a wound or injury means the approximate surface area on a macroscopic scale. The terms "scaled voltage" and "specific voltage" refer to the voltage per unit surface area, for example, V/cm^2 or V/in^2. Similarly, the term "specific resistance" means the resistance per unit surface area.

A number of critical factors have been identified that are required for the successful use of silver iontophoresis techniques to promote tissue healing and regeneration. These factors are as follows:

1. There is a critical, previously unsuspected relationship between the size of the wound and the optimum magnitude of the voltage applied across the anode and the cathode. Electrical injection of silver ions using an approximately constant DC voltage scaled to the size of the wound is surprisingly effective in promoting healing and regrowth of injured and missing tissues. Treatment is accomplished by placing a flexible, silver-containing anode in contact with the open surface of the wound, placing a cathode in contact with intact skin near the wound, and applying an appropriate DC voltage, generally for at least approximately 24 hours.
2. The silver content of the anode should be high enough to ensure a low specific resistance, preferably a specific resistance no greater than approximately 5 Ω/cm, more preferably no greater than approximately 1 Ω/cm. Anodes with higher specific resistances may also be useful for the practice of the invention however, the optimum effect is achieved with low-resistance anodes. In addition, the silver should be approximately uniformly distributed (that is, the amount of silver per unit surface area of the anode should be approximately uniform).
3. The cathode should be a flexible material capable of making and maintaining a low resistance contact with intact skin, so that the combined specific resistance (i.e., cathode resistance and contact resistance) is no greater than approximately 500 Ω/cm.
4. The cathode should be positioned to maximize current flow into the wound.
5. To maximize the input of silver ions into the wound, the current should be maximized by minimizing the total circuit resistance.

When these critical factors are present, an unexpected phenomenon occurs: the input of sufficiently large numbers of silver ions during a biologically appropriate time frame (within 3–5 days) enables formation of a complex between the silver ions and the collagen fibers in the wound. This silver-collagen complex acts as a biological inducer to cause the continual de-differentiation of fibroblast cells and the continual multiplication of previously de-differentiated cells in the area of the wound, leading to the accumulation of many more embryonic cells in the area and, eventually, formation of an adequate blastema to produce regeneration. These factors will be discussed more fully below.

Scaling the applied DC voltage to the size of the wound is crucial to successful treatment. The voltage should be high enough to ensure an adequate input of silver ions into the wound, but not so high that the deleterious effects caused by biological electrolysis become evident. "Biological electrolysis" or electrolysis in vivo differs from electrolysis in vitro in the following respects: electrolysis occurs in living tissues whenever there is current flow, no matter how small. However, a wide variety of naturally occurring agents act as buffers to prevent the accumulation of potentially harmful electrolysis products. These products are continually removed by blood and lymphatic circulation (which also ensures a continual supply of fresh buffers), thereby preventing a buildup of electrolysis products in the area. If the critical voltage is exceeded, this natural buffering action is rapidly overwhelmed and electrolysis products accumulate with attendant pH shifts. This point defines the onset of "biological electrolysis," which can be avoided by taking the above-described critical values of voltage/area into consideration.

Thus, selection of the appropriate treatment voltage requires a knowledge of what happens in living tissue, where the effects of electrolysis can be overcome by circulation and buffering factors up to a point. The effects of naturally-occurring buffers, blood circulation and lymph circulation depend on the size of the wound. Thus, the results of in vitro testing do not apply, nor do in vivo observations of only one

size of wound—each wound has its own maximal voltage range which has to be clinically determined.

The critical specific voltage has been determined to be approximately 0.09–0.11 V/in^2 (about 1.4×10^{-2}–1.7×10^{-2} V/cm^2), preferably approximately 0.1 V/in^2 (about 1.55×10^{-2} V/cm^2). Not only are specific voltages in this range surprisingly effective in promoting tissue healing and regeneration, but the electrically-generated silver ions are extremely effective against a wide variety of bacterial types, including gram positive, gram negative, aerobic and anaerobic forms. Similar effects have been noted against a number of common fungi that colonize open wounds, and may also occur in a number of local viral infections (including herpes). Therefore, under optimal treatment conditions, silver ions are an extremely effective agent against mixed infections and against many bacteria that have become antibiotic-resistant.

For any given size of wound, voltages lower than optimum have no undesirable effects, but simply reduce the efficacy of treatment in an approximately linear fashion due to the production of fewer silver ions during any given period of time, and more limited electrophoretic migration of those ions into the tissues. At sufficiently low voltages, it is simply not possible to supply enough silver ions in the time frame required to produce the desired effects.

Higher voltages result in undesirable effects, also in an approximately linear relationship to the applied voltage. These effects range from irritation and slower healing at modest overvoltages to localized pH alterations due to accumulation of electrolysis products, cellular necrosis, and actual increases in wound size at higher overvoltages. The resulting buildup of dead tissue shields bacteria, fungi, etc. in the region from the silver ion action and limits the penetration depth of the ions.

Use of the appropriate anode material contributes to a uniform current/voltage distribution over the treatment area, together with a longer use time before the onset of polarization. Preferably, the anode is made of a flexible material with an approximately uniform silver content, for example, flexible, silver-containing fabric. In practice, the anode is replaced daily, thus, anode materials which are capable of supplying a sufficient quantity of silver ions for approximately 24 hours are preferred. Therefore, the silver content of the anode is preferably sufficient to yield a specific resistance no greater than about 1 Ω/cm, as noted above. Anodes with somewhat higher resistance (lower silver content) may also be useful; however, these will be exhausted in shorter periods of time, necessitating more frequent replacement. Furthermore, higher-resistance anodes may lead to non-linear voltages and thereby reduce the efficacy of treatment.

The anode should also not only have a sufficiently high content of silver (or other suitable metal; see below), but the silver should be approximately uniformly distributed. Non-uniform distribution means that the wound will not be uniformly treated: some localized areas may be subjected to significantly higher specific voltages that others and the number of silver ions supplied to different areas will differ. In some such instances, the local specific voltage may be high enough to cause toxic effects.

It will be understood by those skilled in the art that suitable anode materials may include those containing silver alloys as well as substantially pure silver. Other metals that produce the desired results may also be usable in the practice of the invention, for example, gold, copper, platinum, zinc, and so forth.

Suitable cathode materials include flexible carbon rubber or the like (preferably containing the maximum possible amount of carbon or graphite), or carbon-filled or metal-containing fabric, having a specific resistance no greater than approximately 500 Ω/cm.

Optimum cathode placement is determined by current flow in the human body. Current tends to follow the shortest path from the anode to the cathode (i.e., the body cannot be viewed as a single volume conductor). Therefore, part or all of the wound will not be adequately treated if cathode placement is nonoptimum. For example, for wounds on the palm of the hand, placement of the cathode on the wrist results in more silver ions being delivered to the proximal portion of the wound and frequently an inadequate amount to the distal portion. A more uniform distribution is achieved by placing the cathode on the opposite side of the hand (the dorsum), directly opposed to the palmar wound.

Optimal treatment according to the present invention has as its aim the continuous introduction of the largest possible population of silver ions into the wound until healing or regeneration is complete, in a fashion that does not introduce harmful by-products or produce deleterious effects on the cellular processes. As noted above, the total circuit resistance is minimized—and the current maximized—in order to maximize the number of silver ions delivered to the treatment site. The current may be monitored to ensure that there are no high-resistance areas in the circuit (for example, a dry treatment electrode, loose cathode, and so forth).

When introduced into living tissues, electrically generated silver ions undergo a series of three reactions in a sequential fashion (FIG. **1**):

In the first reaction, the silver ions combine with proteins, peptides and other chemical species normally present in solution in the tissues. Further chemical or physiochemical combinations do not occur until all such simple sites are completely filled. The first reaction typically requires approximately 24 hours to go to completion (wherein the term "completion" refers to saturation of available sites). The antibacterial action of silver ions is a result of this type of process, beginning at about 20–30 minutes following exposure of the bacteria to the ions.

If more free silver ions are made available following the first reaction, the second reaction occurs. The second reaction is an association between the silver ions and sensitive cells present in the wound, resulting in de-differentiation of these cells into embryonic cell types (as used herein, the term "sensitive cells" refers to cells that are sensitive to free silver ions, including, among others, mature fibroblast cells and epithelial cells). These embryonic cells are not activated in the sense that they do not multiply to produce additional cells of the same type; however, they are capable of re-differentiation into other cell types. Hence, these cells do not form an adequate blastema mass to produce organized, multi-tissue regeneration. Production of de-differentiated fibroblasts requires a continuous supply of excess silver ions for at least approximately 48–72 hours following saturation of the active chemical sites in the first reaction ("excess" in this context means that more silver ions are supplied than are needed to combine with all available proteins, peptides, etc. in the above-described first reaction).

If sufficient silver ions are made available after the second reaction, a third reaction begins to take place. The third reaction constitutes a specific physical association of at least some of the silver ions with the collagen fibers present in the wound to produce a unique structure ("silver-collagen complex") having the specific properties required to induce activation of the de-differentiated fibroblast cells previously produced in the second reaction.

Collagen fibers have size-specific sites which are capable of forming a complex with hydrated metallic ions (J. A.

Spadaro, et al., "Size-Specific Metal Complexing Sites in Native Collagen," *Nature,* Vol. 225, pp. 1134–1136 (1970)). The copper/collagen complex, in particular, has a unique electrical field which is involved in the initial epitaxial deposition of bone mineral (apatite) on bone collagen (A. A. Marino, et al., "Evidence of Epitaxy in the Formation of Collagen and Apatite," *Nature,* Vol. 226, pp. 652–653 (1970)). While not wishing to be bound by theory, it is believed that a silver-collagen complex according to the present invention has a unique local electrical field, and acts as a biological inducer to activate the de-differentiated fibroblast cells formed in the above-described second reaction. In mammalian wounds (including human wounds) treated at appropriate specific voltages with an excess of electrically generated silver ions, the formation of this silver-collagen inducer complex results in activation of the de-differentiated embryonic cells formed by the action of the silver ions on the pre-existing mature cells. Together, these effects result in cell behavior and action akin to those observed in animals that are capable of regeneration. In this fashion, an adequate blastema to support regeneration is formed in human tissue.

The above-described factors are designed to maximize the amount of silver ions introduced into the wound during the window wherein the above-described reactions can occur and lead to the formation of an adequate blastema for regeneration—a necessary condition for completing the sequence of three reactions within a biologically appropriate time. Of these factors, the first (scaling the applied voltage to the size of the wound) is believed to be crucial. If too few silver ions are provided, healing simply proceeds according to normal (i.e., nonregenerative) processes. Lower-than-optimum voltages reduce the efficiency of the treatment and lead to eventual failure of regenerative healing (although healing by scarification and tissue replacement will still occur). Higher-than-optimal voltages inhibit the third reaction (formation of the silver/collagen complex) due to pH shifts, accumulation of electrolysis products, tissue necrosis, and expansion of wound size.

Referring now to FIG. **2**, there is shown a schematic view of an electrical stimulation device in use. A device **10** includes a DC power source **12** with a positive terminal **14** and a negative terminal **16**. A treatment electrode or anode **20** is placed in contact with the surface of a wound to be treated, for example, a full-thickness defect **22** on the palm of a patient P. Anode **20** is made of a flexible, metal-containing material, preferably a flexible metal-containing fabric such as silver-impregnated or silver-coated nylon. Anode **20** may be covered by a "stent" of gauze moistened with normal saline and a cover (such as plastic film or like material), represented as **24**. A return electrode (cathode **26**) is placed in contact with intact skin near wound **22**, for example, proximal to wound **22** as shown. Anode **20** and cathode **26** are connected to power source **12** by cables **30**, **32**, respectively. If desired, cathode **26** may be incorporated into power source **20**, for example, attached to one side of the power source.

While treatment with the system shown in FIG. **2** may be helpful, current flow (and, therefore, the supply of silver ions) to wound **22** is not optimized by the placement of cathode **26**. As described above, the preferred placement of cathode **26** is one that results in an approximately uniform distribution of current through the wound, thereby ensuring approximately uniform delivery of silver ions thereto. Optimum placement of cathode **26** is on the opposite side of the body from the wound being treated, as illustrated in FIG. **3**. For a wound **22** on a surface **44** of the body (for example, the palm of the hand), anode **20** is placed in contact with the wound, and cathode **26** is placed on an opposite surface **46** (for example, on the surface directly opposed to the palm). This placement ensures an approximately uniform distribution of current flow through wound **22**, indicated schematically by arrows **48**.

For optimum treatment, anode **20** substantially engages a surface **38** of wound **22**, as shown in FIGS. **3** and **4**. The presence of void spaces (even if filled with conducting solution) results in inadequate treatment at those points. Depending on the extent of wound **22**, anode **20** may be in contact with exposed subcutaneous tissues **42** as well as dermal tissue **40** at the margins of the wound. Thus, the material of anode **20** needs to be sufficiently flexible to conform to surface **38**. As shown in FIG. **4**, anode **20** is dimensioned to just cover wound **20**, that is, anode **20** has a slightly larger surface area than the area of wound surface **38**.

As described above, anode **20** contains a sufficient quantity of silver so that, when device **10** is connected for use as shown in FIG. **2**, the current density delivered to wound **22** is approximately constant for a period of several hours, preferably at least approximately 24 hours. By "approximately constant current" is meant a DC current that may increase to a peak **50** immediately after the onset of treatment, but that decreases within several hours to an approximately constant level **52** and maintains that level until the onset of polarization at **54** (FIG. **5**). FIG. **5** shows the current vs. time in vitro for a 25 cm^2 section of a silver-coated nylon fabric usable with the invention, applied to a block of gelatin prepared with physiological saline. A standard return electrode was applied to the opposite face of the block and a voltage of 0.42 V applied between the two electrodes. The current density at peak **50** was approximately 3.5 $\mu A/cm^2$, decreased to approximately 1.5 $\mu A/cm^2$ within 5 hours, and remained at that level until the onset of polarization approximately 20 hours later.

A flow chart illustrating treatment according to the present invention is shown in FIG. **6**. Patients are treated as soon as possible following the injury, preferably immediately following cleaning and debridement (if needed) of the wound. However, treatment may be initiated at any time thereafter, or whenever deemed medically necessary. The treatment electrode (anode **20**) is applied directly to the surface of the wound, moistened with physiological saline or other suitable liquid, covered, and connected to the positive terminal of a low-voltage DC power source (such as source **12**). The return electrode (cathode **26**) is placed on intact skin near the wound (on an opposing surface whenever possible) and connected to the negative terminal of the source. Then, a low intensity DC voltage and current are applied continuously for a period of at least approximately 24 hours. The wound is inspected and cleaned daily, and anode **20** is replaced at that time. Cathode **26** is inspected daily and changed as needed.

Liquids suitable for use with the invention include electrically conducting liquids such as normal saline (also known as isotonic saline or physiological saline), Ringer's solution, wound exudate and other body fluids found in the area of the wound, and mixtures and dilutions thereof. Tap water may also be useful; however, the composition of tap water is so variable that other electrically-conducting liquids are preferred. The terms "normal saline," "isotonic saline" and "physiological saline" refer to a solution of sodium chloride (NaCl) in purified water (H_2O), containing approximately 0.9 gram of sodium chloride per 100 milliliters of water. Such a solution is approximately isotonic (i.e., has the

same osmotic pressure) with body fluids. The term "Ringer's solution" means a solution of about 0.86 gram sodium chloride (NaCl), 0.03 gram potassium chloride (KCl), and 0.033 gram calcium chloride (CaCl) in purified water. The term "wound exudate" refers to any substance that is exuded from a wound, including materials that pass through the walls of blood vessel walls into the surrounding tissues.

The key element in promoting healing and regeneration according to the present invention is the production of de-differentiated cells in the region of the wound, which in turn depends on the above-described critical factors. The voltage applied across the treatment (anode **20**) and return (cathode **26**) electrodes must be wound-specific, that is, proportional to the size of the wound (preferably, approximately 0.1 V/in^2); the anode must have an approximately uniform silver content that is sufficiently high to ensure a specific resistance no greater than approximately 1 Ω/cm; the cathode must be made of a suitable low-resistance material capable of making and maintaining a low resistance contact with intact skin; the cathode is positioned so as to maximize current flow into the wound insofar as practicable; the total circuit resistance is as low as possible. In all instances, the treatment electrode is configured so as to yield an approximately uniform voltage distribution throughout the area of the wound.

Scaling the voltage to the size of the wound is particularly important in the case of larger wounds (that is, wounds with surface areas greater than approximately 8–10 in^2 (about 50–65 cm^2), where a naonuniform voltage distribution through anode **20** may result in the production of electrolysis effects in localized "hot spots."

In all cases, the total voltage applied across anode **20** and cathode **26** is preferably no greater than about 0.9–1.1 V. The the area of anode **20**—and the size of a wound treated therewith—is therefore limited to approximately 9–11 in^2 (about 60–70 cm^2). For larger wounds, two or more devices **10**, each with its own anode, cathode, etc. are used, thereby ensuring that no single anode-cathode pair has an applied voltage greater than the preferred maximum. Thus, power source **12** may have several output voltages, each with a corresponding output terminal (for example, 0.1 V, 0.2 V, and so forth) for treatment of wounds of the corresponding size. Anodes **20** for use with such a power source have terminals that allow them to be connected only to the output terminal with the correct output voltage: a 1"-square anode to the 0.1V terminal, a 2"-square anode with the 0.2V terminal, and so forth.

During treatment, silver ions from anode **20** migrate into the tissues surrounding wound **20**, where the ions undergo the three reactions shown in FIG. **1**: binding to proteins, peptides, etc. in the area; de-differentiation of normal cells (primarily fibroblasts) into primitive, de-differentiated cells, and binding to collagen fibers to form a silver-collagen composition that in turn activates the de-differentiated cells. The activated cells multiply rapidly and re-differentiate to form the specific types of normal mammalian cells needed to restore the region to its pre-injury state (dermal and epidermal tissue, muscle tissue, nerve tissue, blood vessels, bone cells, and so forth, as may be needed for the particular site being treated).

As noted above, silver compounds such as $AgNO_3$ have long been known to possess bactericidal and fungicidal properties; however, compounds of the higher oxidation states of silver (Ag(II) and Ag(III)) have recently been found to be significantly more effective than monovalent (Ag(I)) compounds (M. S. Antelman, "Silver (II,III) Disinfectants," *Soap/Cosmetics/Chemical Specialties,* March, 1994, pp. 52–59). While not wishing to be bound by theory, it is thought that the superior bactericidal and fungicidal effects of electrically-generated silver ions may be due at least in part to the formation of free silver ions of these higher oxidation states and their action on bacteria, fungi, etc. present in the tissues.

It is believed that the silver-collagen complex formed at the treatment site results from a specific attachment of silver ions to collagen fibers, resulting in the formation of electrically active sites which act as biological inducers to activate the de-differentiated fibroblast cells. The complex may also have a de-differentiating effect on at least some of the remaining silver-sensitive cells in the area, but without requiring the direct attachment of the silver ion to the cell membrane as in the second reaction (FIG. **1**). Thus, optimum treatment conditions result in a greater immediate effect on the cellular components in the wound area than do silver ions alone, since a much greater number of active de-differentiated cells are produced than would result solely from the direct action of electrically-introduced silver ions on the fibroblast cells. The complex also permits the expression of additional long term healing and maturational effects after active silver treatment is terminated, as will be described further below.

The silver-collagen complex may be prepared in vitro by application of low-voltage DC current from a silver anode to a collagen-containing substrate, then formed into suitable shapes (rolls, sheets, etc.) for external application to surface wounds or internal application to body parts (if desired, the complex may be incorporated into a wound dressing). The complex may act to produce de-differentiation of mature, sensitive cells; alternatively it may activate previously de-differentiated cells in the area. For applications where there are insufficient numbers of mature fibroblast cells present, the complex may be infiltrated with de-differentiated cells produced by the above-described technique in order to provide a source of de-differentiated cells to start the in vivo induction process.

The present invention is further illustrated in the following nonlimiting examples.

EXAMPLE 1

Portions of granulation tissue ranging in size from approximately 1–2 mm were removed from optimally treated wounds and explanted into an appropriate tissue culture medium, resulting in the formation of large numbers of new cells in the culture medium. The new cells were embryonic in nature and formed in contact with the explants, multiplying rapidly and spreading out from the explants until approximately ¾ of the culture dish was covered with embryonic cells. New cell formation ceased after 3–4 weeks, and all the cells then present reverted to normal fibroblast morphology. No further cell multiplication occurred.

EXAMPLE 2

Explants of granulation tissue were cultured as described in Example 1; however, the original explants were removed from the culture medium before cessation of new cell formation. All new cell production ceased after removal of the explants from the culture medium. Histological analysis revealed that the explants removed from the culture medium were composed solely of collagen fibers.

EXAMPLE 3

Explants of granulation tissue were cultured as described in Example 1. The explants were removed from the culture

medium at approximately 1-week intervals, placed in sterile saline and refrigerated for 3–5 days. All new cell production ceased after removal of the explants from the culture medium; cell production resumed after the explants were re-implanted in the medium.

EXAMPLE 4

Granulation tissue from a wound treated with a specific voltage greater than the above-described optimum was explanted into a suitable tissue culture medium. No new cell production was observed, regardless of the length of time the culture was maintained.

EXAMPLE 5

Granulation tissue from an optimally treated wound was maintained in tissue culture until the cessation of new cell formation, but before reversion of the embryonic cells to mature fibroblasts. The explanted granulation tissue was removed, injected with silver ions for approximately two hours, and then re-implanted into the original culture medium at its original site. New cell production resumed.

EXAMPLE 6

Gelatin blocks were prepared from commercial collagen product in a normal saline solution. After hardening, the blocks were subjected to appropriate levels of DC voltage from a silver anode for 12 hours. After cessation of electrical treatment and removal of the anode, the blocks demonstrated a voltage and current production only slightly lower than that administered for an additional 10–12 hours.

While the exact structure of the silver-collagen complex has not been determined, Examples 1–6 indicate the production of such a complex under the appropriate conditions (i.e., when wounds are treated with the optimum specific voltage). The complex does not form when wounds are subject to higher voltages.

EXAMPLE 7

Volunteer patients were treated for a wide variety of traumatic wounds using the above-described methodology, including wounds to the extremities which may heal with difficulty due to poor natural healing processes. Each patient was advised of the experimental nature of the treatment and was offered conventional treatment; each patient who selected the experimental treatment was free to discontinue it at any time. Treated wounds included burns, lacerations, crush injuries, amputations, and infections. Patients ranged in age from 2.5 years to 81 years.

Patients were treated as soon as possible following the trauma. Debridement, if needed, was done under anesthesia. Silver ions were introduced directly into the wound by means of a small electrical current from a silver-containing nylon anode as described above. The treatment electrode (anode **20**) was cut to approximately fit the wound, wetted with tap water and/or normal saline, and applied directly to the wound. The electrode was then covered with a small flexible, carbon-rubber electrode with an integral, thin, flexible wire that was connected to the anode of a DC power source. The wound was then wrapped in a soft dressing with a water-impermeable layer to prevent the dressing from drying out.

The return electrode (cathode **26**) was placed on the opposing side of the limb from the wound as indicated in FIG. **3**. Where this placement was not feasible (for example, fingertip injuries), the return electrode was placed proximal to the wound as shown in FIG. **2**. The power source was a voltage-controlled, battery operated solid state unit set to deliver a constant, direct current voltage.

Most patients were treated on an outpatient basis after the patient and his/her family members were instructed in the techniques of electrode preparation and application. Treatment was continuous; the anode was changed daily with no special sterile precautions. The cathode was removed daily, cleaned with tap water and reapplied to the original site. All patients continued their daily dressing changes at home with weekly follow-up visits; all reported minimal difficulty or pain associated with the dressing changes. Patients with obviously contaminated wounds were given systemic antibiotics for the initial three days of treatment to prevent systemic infection (for example, infection resulting from any initial surgical debridement). No infections occurred in the entire series; all pre-existing infections cleared rapidly (within 3–4 days). Patient compliance was excellent, and treatment was terminated when a satisfactory clinical result was achieved.

A total of 24 wounds were treated, including bums, lacerations, crush injuries, open fractures, amputations, and infections. All wounds involved soft tissue loss with full thickness skin loss ranging in area from 1 cm^2 to 18 cm^2 with an average of about 4 cm^2. Treatment voltages ranged from about 0.3 V to about 0.9 V, depending on the surface area of the wound. Current densities ranged from approximately 4–8 $\mu A/cm^2$, with the magnitude of the current in individual cases being dependent upon the surface area of the wound. Treatment times ranged from 7 to 72 days, with an average of 30 days; follow-up times ranged from 2 to 22 months with an average of 10 months.

All patients regained their preinjury activity level; all patients with occupational injuries returned to their original or equivalent occupations. Despite the lack of sterile precautions, there were no infections (in one case, a pre-existing post-operative infection was well treated with the silver ions alone).

In all cases, full thickness skin loss was replaced with normal-appearing, full thickness, flexible skin appropriate to the area, with regrowth of subdermal tissues and minimal or no scarification. Initially, the skin appeared to be full-thickness, flexible and innervated; however, it was darker than normal and underwent a subsequent maturation period of several months before gradually acquiring a more normal coloration, dermatoglyphic pattern, and hair growth (in appropriate regions). The normal dermatoglyphic pattern on volar skin areas became more evident with the passage of additional time following treatment. Skin areas were sensitive to light touch, and almost all patients reported the sensation in the area to be subjectively normal without paresthesias, numbness or cold intolerance; only three patients had less than fully normal sensation. Typical results were as follows:

Patient 1. An 11-year-old female lacerated the radial aspect of the left thumb, incurring a full-thickness skin loss of approximately 2 cm^2 in area extending from the midpoint of the nail to the mid IP joint and centered over the neutral line between dorsal and volar skin. Treatment using an appropriate voltage was instituted on the day of injury and continued for 28 days.

At the conclusion of treatment, the wound was completely healed with apparently full-thickness skin of a darker than normal coloration, and with good sensation. Normal dorsal-type skin was regenerated dorsal to the neutral line; normal volar skin was formed volar to the neutral line. Coloration

and sensation returned to normal over the next month, accompanied by a full range of motion at the IP joint. Thirteen months post-injury, there was no scarring or contracture; sensation was completely normal and the area of the original injury could not be discerned.

Patient 2. A 28-year-old male incurred multiple longitudinal lacerations of the distal phalanx, middle finger right hand, in an industrial accident. On admission, the finger tip was noted to be "filleted" with three deep longitudinal lacerations extending from the dorsal to the palmar surface and proximally into the nail bed with total avulsion of the nail and exposure of the terminal phalanx. The skin over the central portion was insensate.

The wound was immediately irrigated, the various parts loosely approximated with an absorbable suture and dressed with silver-containing nylon fabric, and treated with an appropriate voltage. Antibiotics were given for 3 days starting immediately post-operative. Seven days after start of treatment, there was evident healing of the laceration; treatment was terminated 20 days later. At that time, the skin was almost completely healed, there was a normal contour to the finger tip and sensation was present in the central portion of the wound. Two months after injury, there was minimal scarring on the distal pad, a normal appearing nail was approximately 50% regrown, and normal sensation and range of motion were present. At 12 months follow-up, the finger was asymptomatic, normal in appearance, and fully innervated with normal sensation.

Patient 3. A 33-year-old male utility worker contacted a 7,200-volt electrical line through both hands. He was unconscious for several minutes and incurred bums of the right hypothenar eminence and dorsum of the left hand at the MCP joint line. The hypothenar burn extended from just distal to the 5th MP joint to the base of the 5th metacarpal and consisted of three confluent, ovoid areas of full-thickness skin loss, with a total area of approximately 12 cm^2. These areas were blanched and without sensation. The extent of subcutaneous necrosis could not be estimated. The dorsal bum of the left hand involved the second through the fifth MCP joint dorsal surface with full-thickness skin loss over the protuberant areas totaling approximately 4 cm^2.

Treatment was begun to both hands on the 4th day after injury, and continued for 16 days on the left hand and 32 days on the right hand. At the end of the treatment, the wounds on the dorsum of the left hand were epithelialized with full-thickenss, flexible skin with good sensation and normal range of motion in the MCP joints. The distal half of the hypothenar wound on the right hand was re-epithelialized with full-thickness sensate skin. The proximate half of the wound was normal in contour and covered with full-thickness skin except for an approximately 1 cm^2 area in the center which was covered with thinner skin. Six months after injury, the hypothenar burned area of the right hand was fully innervated and flexible with a normal range of motion of the MCP of the little finger. At that time, the skin was beginning to acquire a normal color and dermatoglyphic pattern.

Patient 4. A 54-year-old male injured his left foot in a lawnmower accident, resulting in extensive soft tissue injury and open fractures of the 3rd, 4th, and 5th metatarsals and cuboid bone. He underwent debridement and stabilization on the day of the accident. Further debridement was done on the 3rd, 4th, 5th and 23rd days after the accident. Due to the amount of soft tissue loss and bone injury (FIG. 7*a*), the patient was scheduled for a vascularized composite graft to the injured area. He was given a 50% chance of success, and was advised that the foot might have to be amputated if the surgery failed.

Treatment was initiated on the 32nd day after injury; the patient was placed on oral antibiotics for four weeks. Seventeen days after the start of treatment, the wound was debrided, a portion of avascular bone was removed, and two pins that were projecting into the open wound were removed.

Thirty-one days after the start of treatment, the gross infection had resolved and the wound was closing very well (FIG. 7*b*). Over the next four months the wound closed to a small opening (FIG. 7*c*). At that time, it was felt that an underlying osteomyelitis precluded complete closure of the opening. Therefore, the bone was debrided under local anesthesia and treatment continued. The wound was completely closed and healed within two months thereafter (FIG. 7*d*). The patient has continued to do well; he has regained an excellent range of motion of the foot with a normal gait pattern.

Patient 5. A 21-year-old male caught the middle finger of his right hand in a metal press, and lost the distal one-half of the distal phalanx of the middle finger at the level of the base of the nail. Treatment according to the present invention was initiated immediately upon presentation, without wound debridement. After 2 days, the patient was pain free and able to change the dressings by himself. Seventeen days after treatment was initiated, regeneration of bone and soft tissue was apparent (FIG. 8*b*). Thirty-eight days afterwards, the distal phalanx was fully restored with organized, multi-tissue structure; regeneration of appropriate tissues (skin, muscle, nail, etc.) was underway. Treatment was discontinued at this time.

Seven weeks after cessation of treatment, the nail was almost completely restored and the volar surface of the finger tip had a normal dermatoglyphic pattern (FIG. 8*e*). The patient had a full range of motion of the finger and normal sensation of the finger tip, with no permanent physical impairment.

Scaling the treatment voltage to the size of the wound, in conjunction with the other above-identified factors, allows the entry of sufficient numbers of free silver ions into the wound to optimize healing and, in appropriate cases, induce regeneration of missing tissues. It is believed that the observed results were largely due to the action of the silver-collagen complex which produced a large volume of de-differentiated cells in the treatment region. The residual silver-collagen composition in the area is believed to be responsible for the observed long-term continuation of the healing and maturational process after cessation of active treatment, eventually resulting in the restoration of substantially normal function.

It will be apparent to those skilled in the art that many changes and substitutions can be made to the preferred embodiment herein described without departing from the spirit and scope of the present invention as defined by the appended claims.

What is claimed is:

1. A method for treating a wound in a mammalian organism, said wound having a surface area, said method comprising the steps of:

placing a metal-containing anode in contact with said wound;

placing a cathode on intact skin near said anode; and

applying an approximately constant DC voltage of approximately 0.09–0.11 V/in^2 of said surface area across said anode and said cathode for a sufficient period of time to cause a sufficient number of metal ions from said anode to migrate into a region surround-

ing said wound so that at least a portion of said metal ions bind to collagen fibers in said region to form a metal-collagen complex.

2. The method as recited in claim **1**, wherein said applying step further comprises maintaining said DC voltage for at least approximately 24 hours.

3. The method as recited in claim **1**, wherein said applying step further comprises applying approximately 0.1 V/in^2 of said surface area.

4. The method as recited in claim **1**, wherein said anode has a specific resistance no greater than approximately 5 Ω/cm.

5. The method as recited in claim **1**, wherein said anode has a specific resistance no greater than approximately 1 Ω/cm.

6. The method as recited in claim **1**, wherein said metal is silver.

7. The method as recited in claim **1**, wherein said cathode has a specific resistance no greater than approximately 500 Ω/cm.

8. The method as recited in claim **1**, further comprising the step of positioning said cathode so that current flow into said wound is approximately uniform.

9. The method as recited in claim **1**, further comprising the step of positioning said cathode to maximize current flow through said wound.

10. The method as recited in claim **1**, wherein said applying step further comprises causing a sufficient number of said metal ions to migrate from said anode into said region so that another portion of said metal ions causes at least some cells in said region to de-differentiate to form embryonic cells, said metal-collagen complex inducing multiplication of said embryonic cells, said embryonic cells re-differentiating into normal cells as said wound heals.

11. The method as recited in claim **1**, wherein said applying step further comprises causing a sufficient number of said metal ions to migrate from said anode into said region so that another portion of said metal combines with chemical species present in said wound to thereby act against bacteria and fungi present therein.

12. A composition for use in inducing healing and regeneration of mammalian tissues, said composition made by a process comprising the steps of:

providing a culture medium containing collagen;

placing a metal-containing anode in contact with a portion of said culture medium, said portion having a surface area;

placing a cathode in contact with another portion of said culture medium; and

applying a DC voltage of approximately 0.09–0.11 V/in^2 of said surface area across said anode and said cathode to cause a sufficient quantity of metal ions from said anode to migrate into said culture medium for a sufficient period of time to cause at least a portion of said collagen to bind to a portion of said metal ions to form a metal-collagen complex.

13. The composition as recited in claim **12**, wherein said applying step further comprises applying approximately 0.1 V/in^2 of said surface area.

14. The composition as recited in claim **12**, wherein said metal is silver.

15. The composition as recited in claim **12**, wherein said culture medium is a region surrounding a wound, wherein said anode is placed in contact with said wound, and wherein said cathode is placed on intact skin near said anode.

16. A process for making a composition for enhancing wound healing, said process comprising the steps of:

providing a culture medium containing collagen;

placing a metal-containing anode in contact with a portion of said culture medium, said portion having a surface area;

placing a cathode in contact with another portion of said culture medium, said cathode being spaced apart from said anode; and

applying a DC voltage of approximately 0.09–0.11 V/in^2 of said surface area across said anode and said cathode for a sufficient period of time to cause a sufficient quantity of metal ions from said anode to migrate into said culture medium so that at least a portion of said metal ions bind to at least a portion of said collagen to form a metal-collagen complex.

17. The process as recited in claim **16**, wherein said anode contains silver.

18. The process as recited in claim **16**, wherein said culture medium is a region surrounding a wound, wherein said anode is placed in contact with said wound, and wherein said cathode is placed on intact skin near said anode.

19. The process as recited in claim **16**, wherein said applying step further comprises applying said DC voltage for at least approximately 24 hours.

20. A device for inducing tissue healing and regeneration, said device comprising:

a flexible, metal-containing anode;

a cathode;

power supply means capable of generating an approximately constant DC voltage across said anode and said cathode when said anode is placed in contact with a wound having a surface area and said cathode is placed on substantially intact skin near said wound; and

means for electrically connecting said power supply means to said anode and said cathode, said anode containing a sufficient quantity of said metal to maintain a DC voltage of approximately 0.094–0.11 V/in^2 of said wound surface area.

21. The device as recited in claim **20**, wherein said anode has a specific resistance no greater than approximately 1 Ω/cm.

22. The device as recited in claim **20**, wherein said cathode has a specific resistance no greater than approximately 500 Ω/cm.

23. The device as recited in claim **20**, wherein said metal is silver.

24. The device as recited in claim **20**, wherein said anode contains a sufficient quantity of said metal to maintain said approximately constant DC voltage for at least approximately 24 hours.

25. The device as recited in claim **20**, wherein said power source has a plurality of output terminals, each of said output terminals having a different output voltage, and wherein said anode further comprises a plurality of anodes, each of said anodes corresponding to one of said output terminals.

26. The device as recited in claim **20**, wherein said anode has a specific resistance no greater than approximately 5 W/cm.

27. A method for treating a wound, said method comprising the steps of:

placing a metal-containing anode in contact with said wound, said anode having a specific resistance no greater than approximately 5 W/cm;

placing a cathode on intact skin near said anode; and

applying an approximately constant DC voltage across said anode and said cathode for a sufficient period of

time to cause a sufficient number of metal ions from said anode to migrate into a region surrounding said wound so that at least a portion of said metal ions bind to collagen fibers in said region to form a metal-collagen complex.

28. The method as recited in claim **27**, wherein said applying step further comprises maintaining said DC voltage for at least approximately 24 hours.

29. The method as recited in claim **27**, wherein said wound has a surface area, and wherein said applying step further comprises applying approximately 0.09–0.11 V/in^2 of said surface area.

30. The method as recited in claim **27**, wherein said metal is silver.

31. The method as recited in claim **27**, wherein said cathode has a specific resistance no greater than approximately 500 W/cm.

32. The method as recited in claim **27**, further comprising the step of positioning said cathode to optimize current flow through said wound.

33. A device for inducing tissue healing and regeneration, said device comprising:

a flexible, silver-containing anode, said anode having a specific resistance no greater than approximately 5 W/cm;

a cathode;

power supply means capable of generating an approximately constant DC voltage across said anode and said cathode when said anode is placed in contact with a wound and said cathode is placed on substantially intact skin near said wound; and

means for electrically connecting said power supply means to said anode and said cathode.

34. The device as recited in claim **33**, wherein said cathode has a specific resistance no greater than approximately 500 W/cm.

35. The device as recited in claim **33**, wherein said anode contains a sufficient quantity of said silver to maintain said approximately constant DC voltage for at least approximately 24 hours.

36. The device as recited in claim **33**, wherein said wound has a surface area, and wherein said anode contains a sufficient quantity of said silver to maintain a DC voltage of approximately 0.09–0.11 V/in^2 of said surface area.

37. The device as recited in claim **33**, wherein said power source has a plurality of output terminals, each of said output terminals having a different output voltage, and wherein said anode further comprises a plurality of anodes, each of said anodes corresponding to a different one of said output terminals.

38. A process for making a composition for enhancing wound healing, said process comprising the steps of:

providing a culture medium containing collagen;

placing a silver-containing anode in contact with a portion of said culture medium, said portion having a surface area;

placing a cathode in contact with another portion of said culture medium, said cathode being spaced apart from said anode;

applying a sufficient DC voltage across said anode and said cathode for a first period of time, thereby causing silver ions from said anode to migrate into said culture medium and combine with chemical species present therein;

continuing to apply said DC voltage for a second period of time, thereby causing additional silver ions from said anode to associate with silver-sensitive cells in said culture medium to cause de-differentiation of said cells into embryonic cells; and

continuing to apply said DC voltage for a third period of time, thereby causing additional silver ions from said anode to bind to at least a portion of said collagen to form a silver-collagen complex, said silver-collagen complex inducing multiplication of said de-differentiated cells, said embryonic cells re-differentiating into normal cells as said wound heals.

39. The process as recited in claim **28**, wherein said applying step further comprises maintaining said DC voltage for at least approximately 24 hours.

40. The method as recited in claim **38**, wherein said wound has a surface area, and wherein said applying step further comprises applying approximately 0.09–0.11 V/in^2 of said surface area.

41. The method as recited in claim **38**, wherein said anode has a specific resistance no greater than approximately 5 W/cm.

42. The method as recited in claim **38**, wherein said cathode has a specific resistance no greater than approximately 500 W/cm.

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curing aids **with** tetrasilver

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United States Patent [19]

Antelman

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[45] Date of Patent: Oct. 14, 1997

[54] **METHOD OF CURING AIDS WITH TETRASILVER TETROXIDE MOLECULAR CRYSTAL DEVICES**

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[21] Appl. No.: **658,955**

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Related U.S. Application Data

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[51] **Int. Cl.**[6] **A61K 33/38**

[52] **U.S. Cl.** **424/618**; 514/495

[58] **Field of Search** 424/618; 514/495

[56] **References Cited**

U.S. PATENT DOCUMENTS

4,415,565	11/1983	Wysor	424/618
4,915,955	4/1990	Gömöri	424/616
4,952,411	8/1990	Fox, Jr. et al.	424/618
5,073,382	12/1991	Antelman	424/604
5,078,902	1/1992	Antelman	424/618
5,089,275	2/1992	Antelman	424/602
5,211,855	5/1993	Antelman	424/618
5,223,149	6/1993	Antelman	424/618
5,336,499	8/1994	Antelman	424/405
5,571,520	11/1996	Antelman	424/618

OTHER PUBLICATIONS

"Is The AIDS Virus A Science Fiction?" by Peter H. Duesberg and Bryan J. Ellison, *Policy Review*, Summer 1990, pp. 40–51.

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[57] **ABSTRACT**

The diamagnetic semiconducting molecular crystal tetrasilver tetroxide (Ag_4O_4) is utilized for destroying the AIDS virus, destroying AIDS synergistic pathogens and immunity suppressing moieties (ISM) in humans.

A single intravenous injection of the devices is all that is required for efficacy at levels of about 40 PPM of human blood. The device molecular crystal contains two mono and two trivalent silver ions capable of "firing" electrons capable of electrocuting the AIDS virus, pathogens and ISM. When administered into the bloodstream, the device electrons will be triggered by pathogens, a proliferating virus and ISM, and when fired will simultaneously trigger a redox chelation mechanism resulting in divalent silver moieties which chelate and bind active sites of the entities destroying them. The devices are completely non-toxic. However, they put stress on the liver causing hepatomegaly, but there is no loss of liver function.

3 Claims, No Drawings

METHOD OF CURING AIDS WITH TETRASILVER TETROXIDE MOLECULAR CRYSTAL DEVICES

This application is a continuation-in-part of patent application Ser. No. 08/310,859 filed Sep. 22, 1994, now abandoned.

BACKGROUND OF THE INVENTION

The present invention relates to the employment of molecular crystals as anti-AIDS devices, but more particularly to the molecular crystal semiconductor tetrasilver tetroxide Ag_4O_4 which has two monovalent and two trivalent silver ions per molecule, and which through this structural configuration enables intermolecular electron transfer capable of killing viruses and binding them to the resulting silver entity so that a single intravenous injection will completely obliterate acquired immune deficiency syndrome (AIDS) in humans. Furthermore, said devices are capable of killing pathogens and purging the bloodstream of immune suppressing moieties (ISM) whether or not created by the AIDS virus (HIV); so as to restore the immune system.

The present invention is based on concepts previously elucidated in applicant's U.S. Pat. No. 5,336,499 which discloses the destruction and inhibition of bacteria, algae and the AIDS virus in nutrient life supporting systems by using said silver oxide devices. Example 3 of said patent discloses that 18 PPM of said crystal devices could totally suppress the AIDS virus (page 6, line 5). Subsequent to the filing of the aforementioned patent, further testing revealed complete 100% destruction of the AIDS virus in vitro at 20 PPM, and the fact that said devices were harmless when ingested and inhaled, being non-toxic.

Encouraged by these evaluations and successes, applicant obtained permission to evaluate the crystals in vitro against murine acquired immune deficiency syndrome (MAIDS). Only one facility in the State of Israel is licensed for these evaluations, namely, the Kaplan Hospital in Rehovot, Israel, which is affiliated with the Hebrew University-Hadassah Medical School where said evaluations were done.

The initial evaluations entailed experimenting with various silver moieties cited in applicant's aforementioned patent, concentrations, non-reactive buffers and modes of administration. After about 18 months of judicious efforts and initial failures, success was finally achieved in destroying the MAIDS virus in C57BL mice with a single intravenous injection. The results of this test program comprise Example 5 of U.S. Pat. No. 5,336,499. After success with mice, the inventor was able to test the efficacy of said devices on two select etiological groups of terminal AIDS patients in a clinic in Tegucigalpa, Honduras, Central America.

The AIDS patients comprised the etiological subgroups, Candidiasis and Wasting Syndrome. Current indicator diseases for diagnosing AIDS which have been expanded by the CDC, fall into the following five major categories with the approximate percent distribution among AIDS patients:

1. P. carinii pneumonia	51%
2. Wasting syndrome	19%
3. Candidiasis	13%
4. Kaposi's sarcoma	11%
5. Dementia	6%

This invention concerns itself with the treatment and cure of candidiasis and wasting syndrome AIDS patients with

Tetrasil*. These two groups account for approximately one third of AIDS cases.

*Trademark of Holipharm Corporation (of Israel) for Ag_4O_4

Stedman's Medical Dictionary (Williams & Wilken's 26th Ed., 1995) defines wasting syndrome "as a condition of 10% weight loss in conjunction with diarrhea or fever . . . Associated with AIDS (p. 1744)."

OBJECTS OF THE INVENTION

The main object of the invention is to provide for a molecular scale device of a single tetrasilver tetroxide crystalline molecule capable of restoring the immunity of AIDS afflicted humans of the two AIDS etiological subgroups, candidiasis and wasting syndrome.

Another object of the invention is to provide for immunity restoration in said AIDS afflicted humans through a single injection.

Another object of this invention is to destroy ISM in humans manifesting AIDS diseases of said AIDS etiological subgroups irrespective as to whether said ISM was HIV induced, since it is known that humans may manifest AIDS and still be HIV negative, and thus restore the immune system in said humans.

Another object of this invention is to destroy the AIDS virus when present in the systems of said AIDS afflicted humans.

SUMMARY OF THE INVENTION

This invention relates to a molecular scale device not only capable of destroying the AIDS virus, but of purging the human bloodstream of pathogens and restoring immunity to AIDS patients of the candidiasis and wasting syndrome categories. Said molecular device consists of a single crystal of tetrasilver tetroxide (Ag_4O_4). The crystal lattice of this molecule has a unique structure since it is a diamagnetic semiconducting crystal containing two mono and two trivalent silver ions, which in effect are capable of "firing" electrons under certain conditions which will destroy AIDS viruses, other pathogens and immune suppressing moieties (ISM), not only through the electrocution mode, but also by a binding process which occurs simultaneously with electron firing, namely, binding and chelation of divalent silver, i.e., the resulting product of the electron transfer redox that occur when the monovalent silver ions are oxidized and the trivalent ions are reduced in the crystal. The binding/chelation effect occurs at active sites of the AIDS virus, pathogens and ISM. Because of the extremely minute size of a single molecule of this crystal, several million of these devices may be employed in concert to destroy a virus colony to purge a life support system of ISM and pathogens with the consumption of only parts per trillion of the crystal devices. Thus an optimum of 40 PPM of the devices by weight of human blood was found to be sufficient to completely obliterate AIDS. This concentration is slightly over double of the optimum concentration recommended in applicant's aforementioned U.S. patent for the destruction of the human AIDS virus in vitro. Other details concerning the structure of the crystal and its mechanism against pathogens, the AIDS virus and ISM would analogously hold here, and have already been further elucidated in said patent.

The actual destruction of pathogens, ISM and the AIDS virus is effectuated by injection of a suspension of these devices in distilled or deionized water with a non-reacting electrolyte directly, i.e. intravenously, into the bloodstream. A single injection is all that is required under these conditions. Accordingly, humans injected in this manner, upon

being inspected after three weeks or more had elapsed and compared with similar humans that had been given placebos, were completely cured of AIDS. The control group still manifested AIDS. Accordingly, the tetrasilver tetroxide device performed in concert with and in full conformity with the ultimate objects of this invention. Furthermore, three out of four wasting syndrome terminal patients and four out of the five candidiasis terminal patients were still alive in 1995 after a year and a half had elapsed from their initial injection. By that time all the AIDS patients had been released from the clinic and allowed to return home.

Other objects and features of the present invention shall become apparent to those skilled in the art when the present invention is considered in view of the accompanying examples. It should, of course, be recognized that the accompanying examples illustrate preferred embodiments of the present invention and are not intended as a means of defining the limits and scope of the present invention.

EXAMPLE 1

Five patients afflicted with AIDS of the candidiasis etiological category were segregated for Tetrasil treatment. The rationale for selecting them was based on facts presented in an article by Peter H. Duesberg and Brian J. Ellison entitled "Is The AIDS Virus A Science Fiction?" (*Policy Review*, Summer 1990 pp. 40–51). Only the factual presentations of the article were utilized and the hypothesis of the authors was ignored. The facts presented in the article related to the method of selecting AIDS patients based on the five aforementioned etiological subgroups targeted by the CDC, and the evidence presented, that there is AIDS without HIV as well as with it so that an anti-viral agent in most instances will not necessarily restore the immunity system.

Evaluations with Tetrasil were conducted on AIDS patients at Lucha Contra el Sida, Comayaguela, Honduras. The patients two weeks prior to inoculation were removed from their AZT, AIDS therapy. Tetrasil was administered at approximately 40 PPM of blood volume per patient as a suspension in a proprietary buffer solution (pH=6.5), supplied by Holipharm Corporation.

The results of evaluations with candidiasis are tabulated in Table I under its disease category. All patients evaluated were terminal. Some, however, were in moderate (m) condition and others in poor (p) as designated in the Table. The I and F designations refer to initial and final values as shown. WBC indicates white cell blood count. The H column, following CD 8, indicates whether hepatomegaly occurred. This was an unfortunate consequence of the treatment which resulted in enlarged livers in all patients except the second one. Despite hepatomegaly, there was no interference with liver function.

The onset of hepatomegaly was not spontaneous and varied from patient to patient, being in the range of 4–16 days.

It should also be noted that shortly after injection of Tetrasil there were indications of fever (symbolized by T in the Ag_4O_4 column), sometimes accompanied by fatigue (F). The body temperature was invariably 38.5° C. (101.3° F.). This was indicative of restoration of the immune response of the body, since normally the body will destroy pathogens when the immune system is functional by raising the temperature. The patient who died; first responded favorably to Diflucan, which previously gave no response. He was cured of his candidiasis, but unfortunately succumbed to his previous body damage. All the other candidiasis syndrome people who previously did not respond to the indicated medications subsequently responded after the Tetrasil treatment. Further evidence of the recovery of the AIDS patients manifested itself 30 days after the initial injection when white blood cell counts were taken. They are shown in Table I under the WBC column, which gives the initial and final WBC. All candidiasis patients showed a dramatic increase in their white blood cell counts, indicative of the restoration of their immunity systems.

EXAMPLE 2

The above protocol of Example 1 was repeated with AIDS patients exhibiting wasting syndrome. The results of their treatment are tabulated in Table I under the disease category of said syndrome. It should be noted that two of the four wasting syndrome patients showed improved white blood counts. The female patient, whose condition improved from poor and terminal to be among the living, showed a decrease in the WBC. However, she showed an increase in body temperature which was indicative of immune response. The test results indicate that one cannot rely on a single factor to indicate the demise of AIDS. The usual HIV marker CD 4 initial and final are irrelevant. ISM suppression appears to be more critical than the destruction of HIV. AIDS was suppressed, any permanent damage that had been done to the patients in the course of their succumbing to AIDS was not obviously cured or corrected by said crystal device treatment, rather said injury persisted and the patient was improved with respect to AIDS but still suffered from said permanent injury or impairment previously inflicted.

TABLE I

Response of AIDS Patients to Single 40 PPM Ag_4O_4 Inoculation

DISEASE	PATIENT			Date Inoc.	WBC		CD 4				DEATH	Weight Lbs.		
Group	Sex	Age	Medictn	1994	I	F	I	F	CD 8	H	1944	I	F	Ag_4O_4
Candidiasis	M p	28	Diflucan	5/5	1,200	4,200	41	—	221	+	6/11	82	76	T
	F m	33	"	5/5	6,000	6,700	554	872	394	–		98	98	T
	F m	33	Ketaconzl	5/27	2,600	3,850	248	181	951	+		123	123	T
	M p	62	"	6/2	3,300	3,700	89	237	59	+		105	92	F
	F m	31	Pentamidn	6/2	2,400	3,050	9	181	65	+		121	118	Pain
Wasting	M m	27		5/27	3,600	4,600	39	14	709	+		119	120	T
Syndrome	M m	28		5/27	2,750	—	10	—	60	+	7/19	121	119	T, F
	F p	43		5/27	3,600	2,700	68	246	248	+		101	98	T, F
	M m	19		5/10	3,850	5,400	137	36	48	+		103	106	T, F

As this invention may be embodied in several forms without departing from the spirit or essential characteristics thereof, the present embodiments are therefore illustrative and not restrictive, since the scope of the invention is defined by the appended claims rather than by the description preceding them, and all changes that fall within the metes and bounds of the claims or that form their functional as well as conjointly cooperative equivalents, are therefore intended to be embraced by these claims.

What is claimed is:

1. A method of treating AIDS-afflicted humans comprising injecting a multitude of tetrasilver tetroxide molecular crystals into the bloodstream of the human subject.

2. A method for increasing white blood cell counts in AIDS-afflicted humans comprising injecting a multitude of tetrasilver tetroxide molecular crystals into the bloodstream of the human subject.

3. Methods of treating AIDS-affilicted humans according to claims **1–2** where the concentration of said molecular crystals is approximately 40 PPM of the total blood weight of the human subject.

* * * * *

malignancy treatment

United States Patent [19]

Costa et al.

[11] **Patent Number: 4,665,898**

[45] **Date of Patent: May 19, 1987**

[54] **MALIGNANCY TREATMENT**

[75] Inventors: **Jonathan L. Costa**, Bethesda, Md.; **Gunter A. Hofmann**, San Diego, Calif.

[73] Assignee: **Maxwell Laboratories, Inc.**, San Diego, Calif.

[21] Appl. No.: **613,507**

[22] Filed: **May 23, 1984**

[51] **Int. Cl.**[4] **A61B 17/52**

[52] **U.S. Cl.** **128/1.3**

[58] **Field of Search** 128/1.3–1.5, 128/804; 422/22; 426/234, 237, 238, 241

[56] **References Cited**

U.S. PATENT DOCUMENTS

3,368,155	2/1968	Priore	128/1.3
3,467,076	9/1969	Frisch et al.	128/1.3
4,134,395	1/1979	Davis	128/1.3
4,323,056	4/1982	Borrelli et al.	128/1.3
4,510,925	4/1985	Constantinescu	128/1.3
4,524,079	6/1985	Hofmann	426/234

FOREIGN PATENT DOCUMENTS

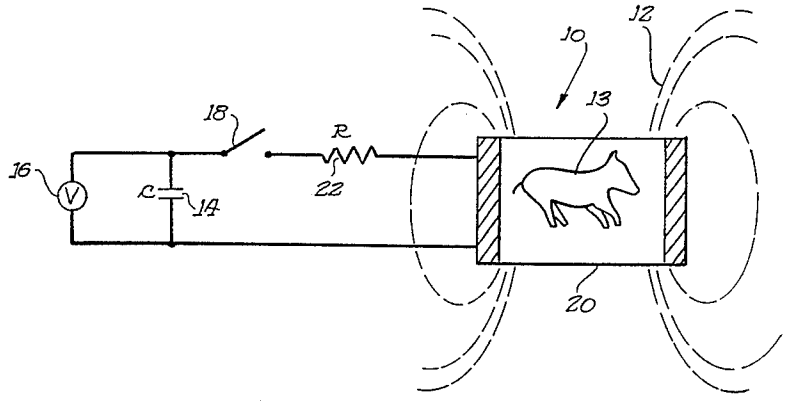
0040053	11/1981	European Pat. Off.	128/1.3
0039988	11/1981	European Pat. Off.	128/1.3
2253686	11/1974	Fed. Rep. of Germany .	
2370483	7/1978	France	128/1.3
1416335	12/1975	United Kingdom	128/1.3

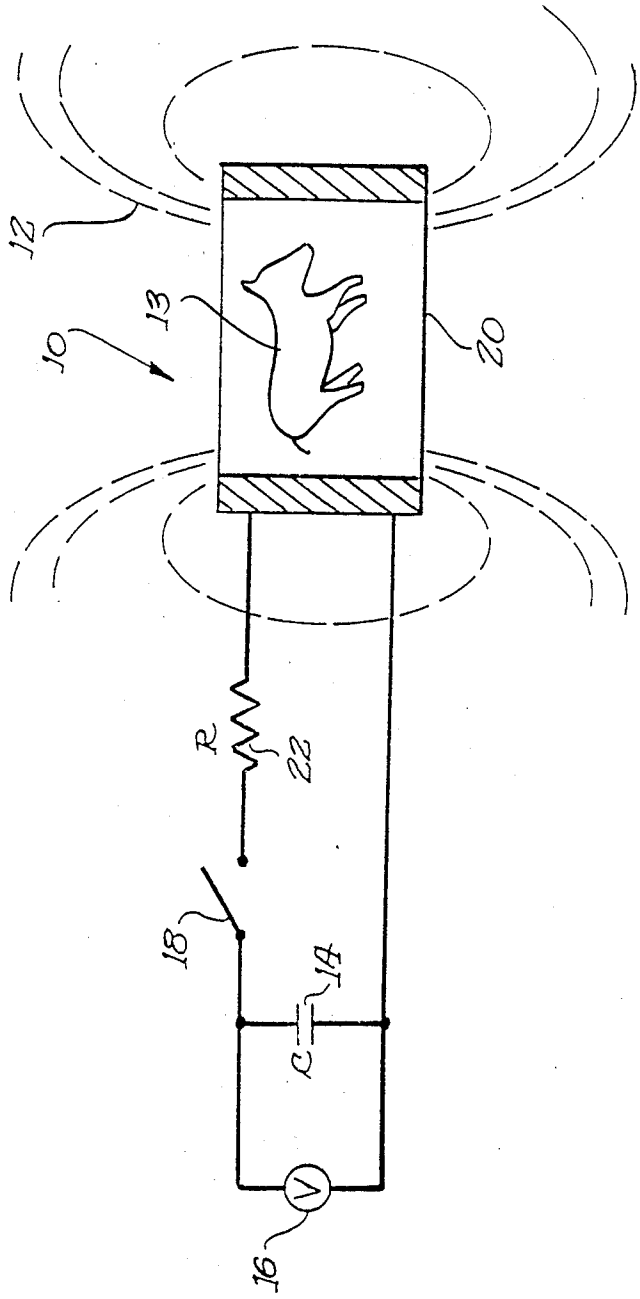
Primary Examiner—Edward M. Coven
Assistant Examiner—Max F. Hindenburg
Attorney, Agent, or Firm—Fitch, Even, Tabin & Flannery

[57] **ABSTRACT**

A body part of an animal afflicted with malignant cells is disposed within a magnetic coil and subjected to a plurality of magnetic field pulses, the pulses having intensities of between about 1 and about 100 Tesla and characteristic frequencies of between about 5 and about 1000 kHz. The pulsed magnetic field selectively inactivates and/or destroys malignant cells with relatively little damage to normal tissue as compared to conventional radiation therapy procedures.

15 Claims, 1 Drawing Figure

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MALIGNANCY TREATMENT

The present invention relates to a method or treating cancer and more particularly to destroying malignant cells with a pulsed magnetic field.

The terms "malignancy" and "cancer" generally refer to an uncontrolled growth of abnormal cells. To successfully treat cancer, the abnormal cells must be eliminated or their growth must be arrested or significantly retarded. In some cases, particularly where the malignancy is localized and accessible, the cancer is successfully treated by surgical removal of the cancerous tumor. In other cases, particularly where the tumor is inaccessible or where the malignancy has metastasized, e.g., systemically, treatment often involves procedures, such as chemotherapy or ionizing radiation therapy, which kill malignant cells and/or retard their growth. Invariably, substantial damage to normal tissues is attendant on such methods, and a critical factor in all applications of such methods is the relative kill ratio of the clonogenic malignant cells to normal cells.

X-ray radiation is one of many procedures used in the therapeutic treatment of cancers. In general, the applied radiation is sufficient to destroy the reproductive integrity of a tumor cell. In such a procedure, it is necessary to kill every clonogenic malignant cell or the cancer will regrow. In general, not all cells in a malignancy are clonogenic, and a residual population fraction of 10^{-2} to 10^{-3} may be small enough for the malignancy not to recur. The application of ionizing radiation has certain contraindictions, such as the destruction of normal cells and in some cases the suppression of the immune system.

The kill mechanisms for exposure to ionizing radiation follow a hierarchial pattern. At very high doses in the range of 10,000 rad, the cells are killed through the deactivation of enzymes. In the range of 1,000 rad, cells may be killed through the rupture of their outer membranes. In the lower dose range of about 100 rad, the cells continue to function but suffer damage to chromosomes or other reproductive components and do not continue to subdivide and reproduce normally. At very low doses in the range of 10 rad, ionizing radiation may delay cell division but will not destroy the population. One of the critical areas which must be evaluated relates to the effect of a procedure intended to selectively kill malignant cells on hematopoietic, gastro-intestinal and central nervous system functions. In the case of ionizing radiation, limitations associated with continued function of the bone marrow, small intestine, and brain, at threshold levels above 100, 500, and 2,000 rad respectively, limit the duration and intensity of ionizing radiation therapy.

SUMMARY OF THE INVENTION

Herein, it is discovered that high intensity magnetic fields, applied in short pulses with moderate frequencies, can be used to selectively destroy or otherwise inactivate malignant cells within tissue of a living animal. Selective inactivation of malignant cells within animal tissue subjected to a pulsed magnetic field is accomplished without noticeable deterioriation of gross characteristics of normal tissue. Substantially no heat is generated in the tissues, even in tissue which is sequentially subjected to a high number of pulses.

BRIEF DESCRIPTION OF THE DRAWING

The FIGURE is a diagrammatic illustration of a rat being treated within an electromagnetic coil and a simplified circuit associated with the coil for generating a pulsed magnetic field within the coil.

DETAILED DESCRIPTION OF A PREFERRED EMBODIMENT

In accordance with the present invention, animals or animal body parts are subjected to high intensity, moderate frequency magnetic field pulses to selectively kill or inactivate malignant cells within the tissues. The whole or portions of an animal body (the term "animal" is used herein to include humans, although initial experiments have been carried out on lower animals) can be subjected to the pulsed magnetic field. This process is carried out with a minimum effect on normal cells and without altering the gross characteristics of the subjected normal tissues.

It is found that subjecting body parts containing cancerous tissue to a plurality of magnetic field pulses, with characteristic frequencies above about 5 kHz and intensities above about 1 Tesla, will either arrest the growth of tumors or progressively reduce the number of cancerous cells, resulting in remission of tumors. Tissue treated with pulsed magnetic fields according to the present invention are not significantly heated, and thus there is no thermal discomfort to the subject and no burning of tissue whatsoever. Unlike X-ray or other ionizing radiation techniques, inactivation of cells is not achieved by an ionization mechanism, and there is no apparent alteration of the gross and functional characteristics of normal tissue.

Illustrated diagrammatically in the FIGURE is an electromagnetic coil **10** and associated circuitry which produce magnetic pulses of moderate frequency and high intensity. Apparatus of the general type illustrated is currently used for metal forming. An example of suitable apparatus is that sold urder the trademark Magneform by Maxwell Laboratories, Inc. A cylindrical metallic object placed within the coil and exposed to intense magnetic pulses, represented by flux lines **12**, is subjected to strong radial stresses which radially deform the object. The surprising discovery was made that by placing rats **13**, which are inflicted with induced cancer tumors, within the magnetic coil and subjecting the rats to high intensity pulsed fields at moderate frequencies, arrest of tumor growth and/or pronounced remission of the tumors resulted.

The magnetic field in the coil is produced upon discharge of a bank of capacitors **14**. The capacitor bank is charged from a source **16**, and when a switch **18** is closed, completing the circuit that includes the capacitor bank and the coil, an oscillating or unipolar current can be generated between the plates of the capacitors. The oscillating current, in turn, generates a pulsed magnetic field which is concentrated within the region **20** bounded by the coil. The characteristic frequency of the pulsed field is determined by the capacitance of the capacitors and the resistance and inductance of the circuit, which are primarily determined by a resistor **22** and the inductance of the coil **10**. Immediately subsequent to closing the switch, an intense magnetic field is produced by current flowing in one direction. As the current changes direction, the magnetic field changes polarity. In one particular circuit, the oscillating current, and hence, the oscillating magnetic field, rapidly

decreases after about ten oscillations, dropping to a few percent of the original magnetic field strength. Herein, magnetic field intensities refer to the intensities of the initial peaks.

The effect of the pulsed magnetic field on animal tissue is far different than the effect of the pulsed magnetic field on metallic objects. Biological materials have very substantially reduced electrical conductivity (or very substantially increased electrical resistivity) relative to metals and are not similarly deformed. Furthermore, the high electrical resistivity (generally above 25 ohms-cm and almost invariably above 10 ohms-cm) of biological materials assures that the interior regions of the material are not excessively shielded from the coil-generated magnatic field by induced eddy currents.

The method is applicable to practically any type of tissue and is believed applicable for treatment of most types of malignancies.

The intensity of the magnetic field that is used may be as low as about 1 Tesla and about as high as about 100 Tesla, and preferably the field intensity is between about 1 and about 50 Tesla. The actual intensity of the magnetic field used depends on the type of tumor being treated and the location of the tumor within the body.

Tumor destruction is most effective when pulsed fields are used having characteristic frequencies in the range of from about 5 to about 1000 kHz. This frequency range is described herein as a moderate frequency range. In comparison, microwave frequencies are several orders of magnitude higher, i.e., in the megaherzt/gigahertz range. Frequencies above 1000 kHz tend to heat tissue.

Total typical exposure time of a living animal to the magnetic field is minimal, ranging from about 100 microseconds up to about 1 second in each therapy session. With reference to the above-described apparatus, exposure time can be considered the number of pulses multiplied by the duration of each pulse. Herein, pulse duration is considered to be the period extending from initiation to the poirt that the substantially decayed field has a negligible effect. In each session, an animal is exposed to at least 1 and up to 1000 magnetic pulses. Generally a living animal would be subjected to at least ten puses at each. therapy session and up to one hundred pulses. An animal will be subjected to additional sessions until tumor remission is achieved.

At the frequencies and intensities of the pulses, heating of body tissues is of minimal significance, and a practically unlimited number of pulses can be administered without detectable heating of body tissues.

The reason that tumor cells are killed or rendered reproductively inactive has not yet been determined, and applicants are not bound by any particular theory. However, it is suggested that in the case of a pulsed magnetic field energy might be coupled into magneto-active parts of critical large molecules. Within the intensity range of 1–50 Tesla, the amount of energy per pulse coupled to one dipole is 10^{-4} to 10^{-2} eV. With several pulses and a collective assembly of dipoles, enough local actlvation may result in destruction of a covalent bond, which typically has an energy in the vicinity of about 1 eV.

Breakage of certain bonds in critical large molecules, particularly in the genetic material, is likely to either kill the cell or renier the cell incapable of reproducing itself. Mallgnant cells are more susceptible to destruction and/or inactivation by a pulsed intense electromagnetic field because the field may create eddy currents that are unique to the tumor. These localized eddy currents may cause effects that are deleterious to the viability and/or reproductive capability of the tumor cells. Alternatively, there may be macromolecules unique to malignant cells which are especially magnetically susceptible. However, the invention is not considered to be limited to any particular theory of why the method of treatment is effective. Another possible alternative is that the pulsed magnetic field interferes with the transfer of free radicals or electrons through a chain of macromolecules that are unique to malignant cells.

If the reproducing tumor cells can be reduced below a threshold population, normal anti-tumor mechanisms in the body may be sufficient to counter a residual population of clonogenic tumor cells. After the tumor is eliminated, natural regenerative processes may be relied on to repair or mitigate any damage to normal tissue.

It is understood that the extent of treatment is a trade-off between some damage to normal tissue versus the benefits derived from tumor abatement or elimination. However, experimental results to date (see Example 2 below) indicate that the method of the invention is far less damaging to normal tissue than is ionizing radiation. The relatively little damage to normal tissue as compared to that induced by treatment with ionizing radiation decreases the time required for repair or regeneration of normal tissues.

Furthermore, treatment with a pulsed magnetic field does far less damage to the natural immune system than does radiation treatment or chemotherapy. Frequently, a patient who is treated extensively with ionizing radiation and/or with chemotherapy will experience an almost complete breakdown of the immune system. Subsequent to treatment, the immune system may take up to a year to recover, particularly with respect to immunity to viral infections. As a result, even if a patient is cured of the malignancy by radiation and/or chemotherapy, he is subject to debilitating disease or even death by infections to which his body would ordinarily have built up immunity. with the magnetic treatment described herein, there has been no evidence of major immune system break-down.

A secondary advantage of the procedure of the present invention relative to radiation procedures is that it poses no hazard to the technician performing the process. The high intensity magnetic field exists only within the coil and immediately therearound. Within a very short distance from the coil, the magnetic field drops off dramatically. For example, whereas the field generated by a coil may have an intersity of 5 Tesla in the interior of the coil, within abort 2 meters exterior to the coil, the intensity drops off to below 10^{-4} Tesla, a value comparable to the magretic field of the earth. Thus, providing that the teclnician is positioned a reasonable distance from the activated coil, there is substantially no likelihood of cells in the tissues of the technician being affected in a manner similar to the cells of the animal within the coil, and the process may be operated without any special shielding. Of course, the approximate distances increase in proportion to coil dimensions. One exception to this is that, as is the case with microwave apparatus, it should not be operated in the presence of persons wearing certain electrical or electronic prosthetic devices, such as pacemakers.

The invention will now be described in greater detail by way of specific examples.

EXAMPLE 1

In this experiment, the destructive effects of a high intensity, moderate frequency, pulsed magnetic field were compared for different types of cells grown in vitro, including both normal cells and malignant cells.

The effect of the pulsed magnetic field was examined on five types of cell lines: normal monkey kidney, normal mouse fibroblast, normal epithelial, undifferentiated carcinoma, and embryonal carcinoma. Cells were grown in confluent monolayers on Petri dishes and were treated briefly with trypsin. Supernatant liquid containing free-floating cells was removed, and test tubes containing aliquots of the free-floating cells were held at room temperature for the duration of the experiment. Tubes of cells were placed into the 4-inch coil of a conventional Magneform machine (Maxwell Laboratories) and given 8 pulses with the machine set to deliver approximately 10 kilojoules of energy at an intensity of 5 Tesla and a frequency of 8 kHz. As a control, tubes of cells were handled similarly but were not exposed to the magnetic field. Trypan blue was added to the test tubes to a final concentration of 0.2%. Aliquots of the cells were counted utilizing a hemocytometer and a light microscope; the total number of cells present per ml and the percentage staining with trypan blue, representing the percentage of killed cells, were calculated. Cells were ennumerated approximately 2 and 18 hours after treatment.

A summary of the results is presented in Table 1 below.

TABLE 1

EFFECTS OF BRIEF EXPOSURE TO A RAPIDLY VARYING MAGNETIC FIELD ON VARIOUS TYPES OF CELLS IN VITRO

	CELLS COUNTS PER ML		PERCENT OF CELLS STAINED WITH TRYPAN BLUE		
	Cells Counted	Cells Counted 18 hours	Nonexposed Cells Observed After	Exposed Cells Observed After	
CELL TYPE	Before Exposure	After Exposure	18 Hours	2 h.	18 h.
Normal epithelial cells	40×10^4	31×10^4	10%	8%	14%
Normal mouse fibroblasts	5×10^4	7×10^4	11%	7%	2%
Normal monkey fibroblasts	123×10^4	115×10^4	1%	2%	17%
Undifferentiated carcinoma	30×10^4	35×10^4	1%	3%	32%
Embryonal carcinoma	270×10^4	330×10^4	8%	15%	29%

As can be seen from Table 1, the number of dead cells eighteen hours after exposure was significantly higher in the two malignant cell lines, e.g., by a factor of about two or more compared to normal cells.

EXAMPLE 2

In this experiment, albino rats with induced or transplanted tumors were subjected to high intensity, moderate frequency pulsed fields, and the effect of this field on the tumors was examined.

The following five groups of female albino rats were prepared: (1) 6 Sprague-Dawley rats bearing no tumors, (2) 7 Sprague-Dawley rats given a single oral feeding of dimethyl-benzanthracene (DMBA) approximately 1 month previously, inducing primary mammary carcinomas in each, (3) 6 Buffalo rats given 3 successive intravenous doses of N-nitrosomethyl urea (NMU) approximately 3 weeks previously, inducing primary mammary carcinomas in each, (4) 6 Buffalo rats, each with an NMU-induced mammary carcinoma transplanted to the popliteal region, (5) 6 Fisher rats, each with a mammary carcinoma of the 13762E/F344 line, transplanted to the popliteal region. If left untreated, all of the types of tumors would generally grow to a size of 20–30 cm^3, at which time the tumors would ulcerate. Rats having ulcerated tumors would generally die of secondary causes, such as infection, and in laboratories, rats are generally sacrificed at time of tumor ulceration for humane reasons. The mammary carcinomas in rats bearing primary tumors (groups 2 and 3) were measured in size (length and width measurements with a pair of calipers) for a period of 8 days prior to the start of the experiment. Tumors in rats bearing transplanted tumors were measured for a period of 3 days prior to the experiment. All groups of rats were given food and water ad libitum during the period of examination.

The rats were exposed once daily to a series of intense magnetic field pulses of brief duration. Two instruments were used, a conventional Magneform machine with a 4-inch diameter coil capable of storing 8 kilojoules of energy, and a high frequency Magneform machine with a 1-inch diameter coil capable of storing 9.6 kilojoules of energy. With the conventional Magneform machine, the entire rat was placed inside the coil volume and subjected to a series of twenty 5 Tesla, 8 KHz pulses. With the high frequenry Magneform machine, tumor-bearing areas were either placed inside the coil, or apposed as closely as possible to the top of the coil, and were subjected to five 18 Tesla (at the center of the coil), 250 kHz pulses. For the first 3 days of the experimental period, each rat was anesthetized with sodium pentobarbital (given by intraperitoneal injection) prior to exposure to the magnetic field. After this time, unanesthetized rats to be irradiated in the conventional Magneform machine were placed in a cloth enclosure which fit inside the coil volume. Rats to be irradiated in the high frequency Magneform machine were anesthetized. During the experimental period, each tumor was measured with calipers daily prior to exposure to the magnetic field.

The high frequency Magneform machine was employed for 1 rat in group 1, 2 rats in group 2, 2 rats in group 3, 2 rats in group 4, and 2 rats in group 5; all the other rats were treated with the conventional Magneform machine. In group 4, two rats died of an apparent overdose of anesthesia (respiratory arrest) prior to exposure for the third time.

At the conclusion of the treatment of 6 days, the rats were observed for an additional period of time, gener-

ally about 16 days, during which tumor sizes were measured daily or every other day until the animals were sacrificed.

All of the rats of the control group 1 remained healthy throughout the experiment, exhibiting no adverse reaction to exposure to the magnetic field.

A summary of tumor data of rat groups 2–5 is presented in Table 2 below.

TABLE 2

EVALUATION OF THE GROWTH OF RAT MAMARY TUMORS FOLLOWING MULTIPLE EXPOSURES TO A RAPIDLY VARYING MAGNETIC FIELD

TUMOR TYPE	FIELD STRENGTH/ FREQUENCY Tesla/KHz	TOTAL NO. OF TUMORS*	PARTIAL OR COMPLETE RESPONSE Interruption of Growth	Shrinkage	Total Tumors Responding No.	%
DMBA	5/8	8	2	6	8	100%
Primary	15/250	3	1	2	3	100%
Total		11	3	8	11	100%
NMU	5/8	10	1	9	10	100%
Primary	15/250	5	1	3	4	80%
Total		15	2	12	14	93%
NMU	5/8	2	0	0	0	0%
Trans-planted	15/250	2	1	0	1	50%
Total		4	1	0	1	25%
13762E/F344	5/8	4	1	3	4	100%
Trans-planted	15/250	2	1	1	2	100%
Total		6	2	4	6	100%

*Includes multiple tumors of rats having primary induced tumors.

It can be seen from the above table that the method of the present invention is useful for treating a variety of malignacies, although the response varies according to the type of tumor. Accordingly, the method has general applicability to malignancy treatment.

EXAMPLE 3

Twelve rats having primary DMBA-induced mammary carcinomas were treated daily with a conventional Magneform machine. Primary mammary gland carcinoma induced by a carcinogen, such as DMBA or NMU, is highly virulent, as outlined in substantial detail in P. M. Guillino, et al., *Journal of the National Cancer Institute*, Vol. 54, no. 2, February 1974. It is common for such a tumor in a rat to increase in size by about 10–30 fold in about 30 days, and if left untreated almost invariably will ulcerate within about 45 days.

Ten of the rats are treated daily with 20 pulses at 5 Tesla and 8 KHz. Their tumor volumes on the lst and 30th days are listed in table 3 below:

TABLE 3

	Tumor Volume (cm^3) Day 1	Tumor Volume (cm^3) Day 30
1.	1.6	1.95
2.	1.2	3.65
3.	2.1	1.2
4.	1.4	3.81
5.	0.9	0.42
6.	3.01	3.81
7.	0.38	0.45
8.	2.1	8.18
9.	6.79	8.88
10.	1.1	0.85

It can be seen from the above table that after thirty days the tumors were either diminished in size, stabilized, or at least controlled relative to untreated tumors. Furthermore, all of the rats were alive after 60 days, some with stabilized or reduced tumors, although one rat was clearly terminal at 60 days.

The remaining two rats were treated in an identical manner but at $\frac{1}{4}$th the field intensity, i.e., 1.2 Tesla, 8KHz, 20 pulses. One of these died on day 58 while the tumor size of the other had decreased in size from 1.6 cm^3 on day 1 to 1.4 cm^3 on day 62.

The rats generally appeared to exhibit normal behavior and appetite and did not appear to lose weight. The fact that the rats did not die of infections suggested that the immune systems functioned normally.

Although the invention has been described in terms of a preferred embodiment, modifications obvious to one with ordinary skill in the art may be made without departing from the scope of the invention. Although malignant cell inactivation is effected in the absence of more conventional selective tumor cell destruction procedures, such as irradiation therapy or chemotherapy, it is understood that the magnetic therapy practiced in accordance with the present invention may be used in conjunction with other therapeutic procedures.

Various features of the invention are set forth in the following claims:

What is claimed is:

1. A method for treating a living animal having malignant cells in its body comprising

placing the animal or a part of the animal having malignant cells to be treated within a high intensity pulsed magnetic field treatment region,

generating with the high intensity pulsed magnetic field treatment region a pulse of a high intensity, rapidly oscillating magnetic field having an intensity in the range of from about 1 Tesla to about 100 Tesla and a frequency in the range of from about 5 kHz to about 1000 kHz, the polarity of said magnetic field reversing during each oscillation,

exposing said animal or part of said animal within said high intensity pulsed magnetic field treatment region to said oscillating high intensity magnetic field pulse, and

generating sufficient additional high intensity magnetic pulses within said treatment region of like intensity, frequency and reversing polarity to expose said animal or part of said animal to the same and thereby selectively deactivate malignant cells within said animal.

2. A method according to claim **1** wherein said pulsed magnetic field has an intensity of between about 1 and about 50 Tesla.

3. A method according to claim 1 wherein the body part is exposed to between about 10 and about 1000 pulses at a single tumor abatement therapy session.

4. A method according to claim 3 where a plurality of said sessions are employed.

5. A method of selectively deactivating malignant mammalian cells relative to normal mammalian cells, the method comprising

placing material having both living malignant mammalian cells and living normal mammalian cells within a high magnetic field region, and

generating within said high magnetic field treatment region a plurality of pulses of a high intensity oscillating magnetic field having an intensity of between about 1 and about 100 Tesla and a frequency of between about 5 and about 100 kHz, the polarity of said high intensity magnetic field reversing in each oscillation of the respective pulse.

6. A method of selectively deactivating malignant cells in an animal with such malignant cells in its body, the method comprising

providing apparatus having a high magnetic field treatment region and which produces, within said region, pulses of a decaying, oscillating high intensity magnetic field having an intensity within said region of between about 1 and about 100 Tesla and an oscillation frequency of between about 5 and about 1000 kHz, the polarity of said magnetic field reversing in each oscillation,

placing an afflicted animal or body part of an afflicted animal in said region so as to be exposed to the oscillating magnetic field of said intensity and frequency when said apparatus is actuated, and

actuating said apparatus a plurality of times to subject the animal or part thereof to multiple pulses of said oscillating magnetic field.

7. A method for selectively deactivating tumor cells in living biological material comprising the steps of

placing living biological material containing malignant cells to be selectively deactivated, and having a resistance above 10 ohms-cm, within a high intensity magnetic field coil,

discharging a charged high voltage capacitor in series circuit connection through the high intensity magnetic field coil to produce a damped, oscillating, very high intensity magnetic field pulse within the high intensity magnetic field coil containing the living biological material, said magnetic field pulse having an initial magnetic field intensity in the range of from about 1 to about 100 Tesla and an oscillation frequency in the range of from about 5 kHz to about 1000 kHz, with said magnetic field decaying in intensity and reversing in polarity with each oscillation of said pulse at said oscillation frequency,

subsequently charging the high voltage capacitor and discharging the charged capacitor through the high intensity magnetic field coil such that the biological material within the high intensity magnetic field coil is subjected to a plurality of said damped, oscillating, very high intensity magnetic field pulses having an initial magnetic field intensity in the range of from about 1 to about 100 Tesla and an oscillation frequency in the range of from about 5 kHz to about 1000 kHz, and

removing the living biological material from within the high intensity magnetic field coil.

8. A method in accordance with claim 7 wherein said living biological material is a living animal or part thereof.

9. A method in accordance with claim 8 wherein said animal or part thereof is subjected to a plurality of therapy sessions over an extended treatment period, with up to 1000 of said pulses of high intensity oscillating magnetic field being applied to said animal or part thereof during each therapy session.

10. A method in accordance with claim 7 wherein the electrical resistance of said living biological material is greater than 25 ohms-cm.

11. A method in accordance with claim 7 wherein said living biological material is subjected to from about 10 to about 100 of said high intensity magnetic field pulses within the high intensity magnetic field coil.

12. A method in accordance with claim 9 wherein the total exposure time of said animal or part thereof to said plurality of high intensity magnetic field pulses is from about 100 microseconds to about 1 second during each of said therapy sessions.

13. A method in accordance with claim 7 wherein said high intensity magnetic field pulses produce substantially no heating of the living biological material.

14. A method in accordance with claim 9 wherein selective deactivation of tumor cells is accomplished without substantial damage to the animal immune system.

15. A method in accordance with claim 14 wherein said animal is a human.

* * * * *

weather manipulation

United States Patent [19]

Eastlund

[11] **Patent Number: 4,686,605**

[45] **Date of Patent: Aug. 11, 1987**

[54] **METHOD AND APPARATUS FOR ALTERING A REGION IN THE EARTH'S ATMOSPHERE, IONOSPHERE, AND/OR MAGNETOSPHERE**

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[73] Assignee: **APTI, Inc.**, Los Angeles, Calif.

[21] Appl. No.: **690,333**

[22] Filed: **Jan. 10, 1985**

[51] **Int. Cl.**[4] **H05B 6/64**; H05C 3/00; H05H 1/46

[52] **U.S. Cl.** ..... **361/231**; 89/1.11; 380/59; 244/158 R

[58] **Field of Search** ..... 361/230, 231; 244/158 R; 376/100; 89/1.11; 380/59

[56] **References Cited**

PUBLICATIONS

Liberty Magazine, (2/35) p. 7 N. Tesla.
New York Times (9/22/40) Section 2, p. 7 W. L. Laurence.
New York Times (12/8/15) p. 8 Col. 3.

Primary Examiner—Salvatore Cangialosi
Attorney, Agent, or Firm—Roderick W. MacDonald

[57] **ABSTRACT**

A method and apparatus for altering at least one selected region which normally exists above the earth's surface. The region is excited by electron cyclotron resonance heating to thereby increase its charged particle density. In one embodiment, circularly polarized electromagnetic radiation is transmitted upward in a direction substantially parallel to and along a field line which extends through the region of plasma to be altered. The radiation is transmitted at a frequency which excites electron cyclotron resonance to heat and accelerate the charged particles. This increase in energy can cause ionization of neutral particles which are then absorbed as part of the region thereby increasing the charged particle density of the region.

15 Claims, 5 Drawing Figures

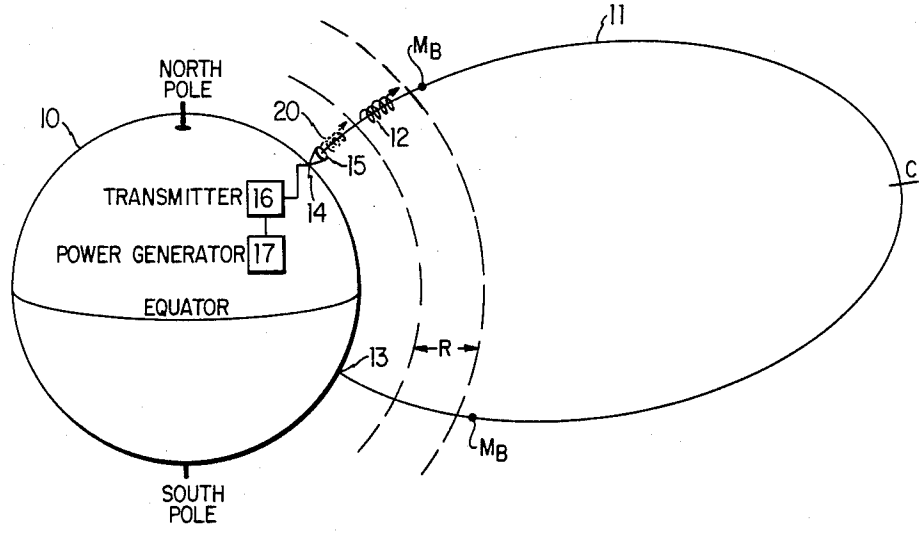
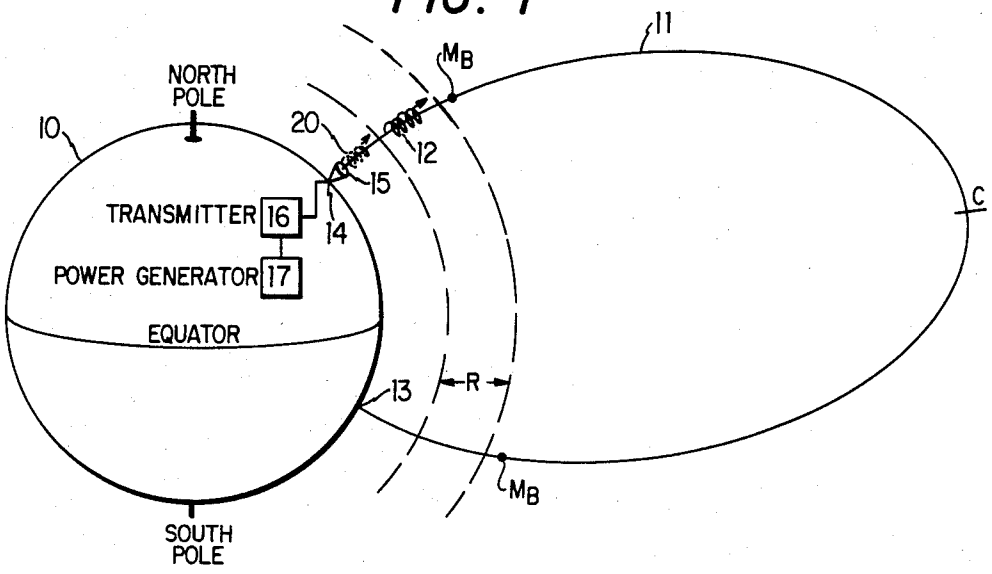


FIG. 1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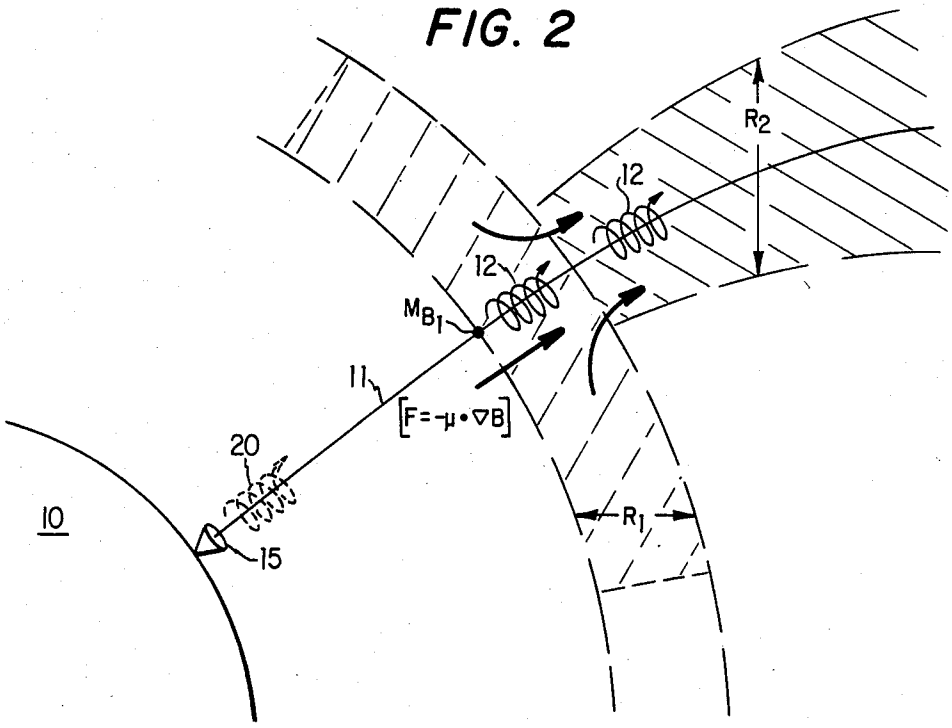
10
20
12
15
TRANSMITTER 16
14
POWER GENERATOR 17
EQUATOR
13
R
SOUTH POLE
MB
11
C

FIG. 2


R2
12
12
MB1
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[F=-μ•∇B]
20
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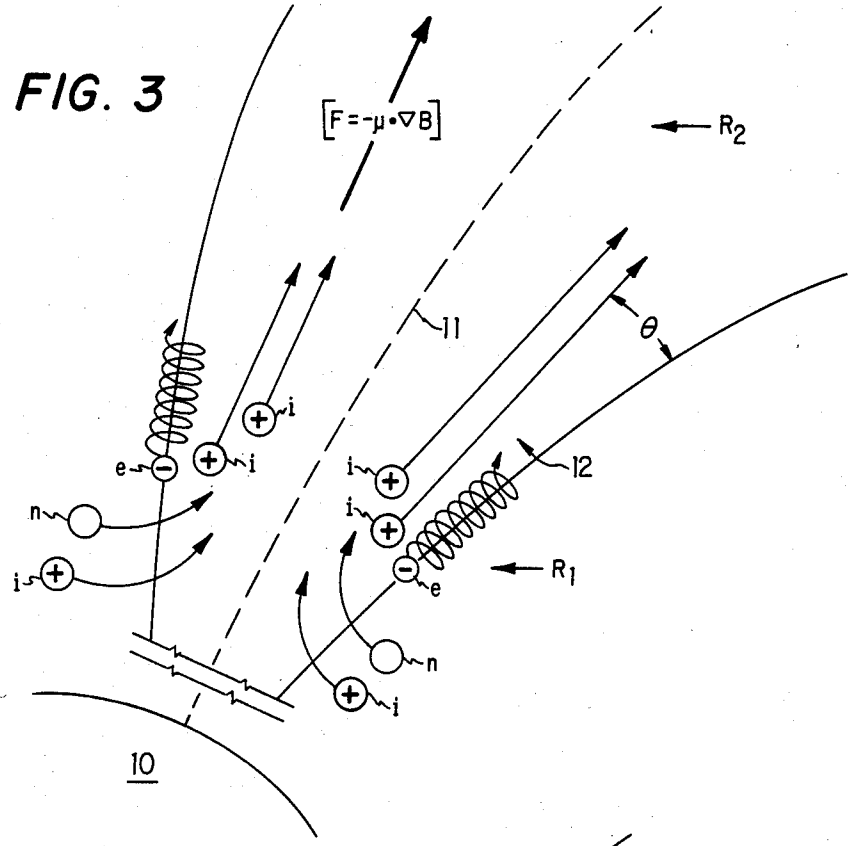
15
R1

FIG. 3



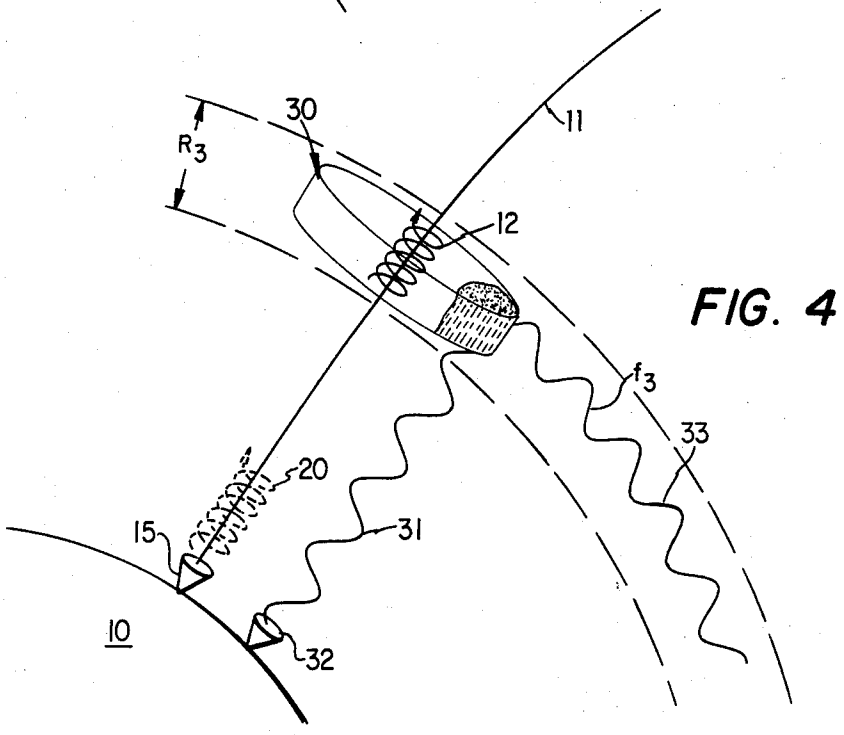
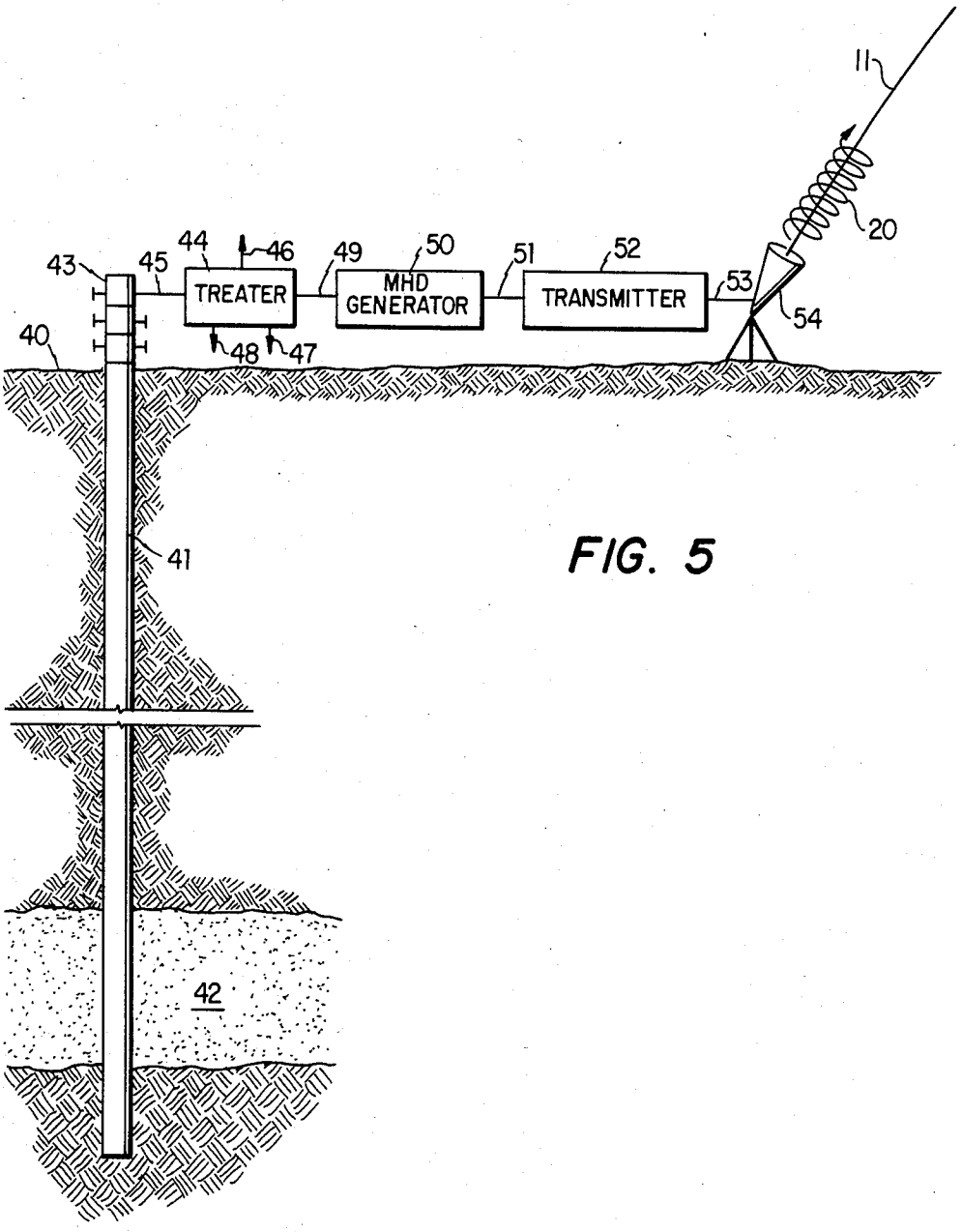


FIG. 4


11
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43
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TREATER
MHD GENERATOR
TRANSMITTER
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FIG. 5

METHOD AND APPARATUS FOR ALTERING A REGION IN THE EARTH'S ATMOSPHERE, IONOSPHERE, AND/OR MAGNETOSPHERE

DESCRIPTION

1. Technical Field

This invention relates to a method and apparatus for altering at least one selected region normally existing above the earth's surface and more particularly relates to a method and apparatus for altering said at least one region by initially transmitting electromagnetic radiation from the earth's surface essentially parallel to and along naturally-occurring, divergent magnetic field lines which extend from the earth's surface through the region or regions to be altered.

2. Background Art

In the late 1950's, it was discovered that naturally-occuring belts exist at high altitudes above the earth's surface, and it is now established that these belts result from charged electrons and ions becoming trapped along the magnetic lines of force (field lines) of the earth's essentially dipole magnetic field. The trapped electrons and ions are confined along the field lines between two magnetic mirrors which exist at spaced apart points along those field lines. The trapped electrons and ions move in helical paths around their particular field lines and "bounce" back and forth between the magnetic mirrors. These trapped electrons and ions can oscillate along the field lines for long periods of time.

In the past several years, substantial effort has been made to understand and explain the phenomena involved in belts of trapped electrons and ions, and to explore possible ways to control and use these phenomena for beneficial purposes. For example, in the late 1950's and early 1960's both the United States and U.S.S.R. detonated a series of nuclear devices of various yields to generate large numbers of charged particles at various altitudes, e.g., 200 kilometers (km) or greater. This was done in order to establish and study artifical belts of trapped electrons and ions. These experiments established that at least some of the extraneous electrons and ions from the detonated devices did become trapped along field lines in the earth's magnetosphere to form artificial belts which were stable for prolonged periods of time. For a discussion of these experiments see "The Radiation Belt and Magnetosphere", W. N. Hess, Blaisdell Publishing Co., 1968, pps. 155 et sec.

Other proposals which have been advanced for altering existing belts of trapped electrons and ions and/or establishing similar artificial belts include injecting charged particles from a satellite carrying a payload of radioactive beta-decay material or alpha emitters; and injecting charged particles from a satellite-borne electron accelerator. Still another approach is described in U.S. Pat. No. 4,042,196 wherein a low energy ionized gas, e.g., hydrogen, is released from a synchronous orbiting satellite near the apex of a radiation belt which is naturally-occurring in the earth's magnetosphere to produce a substantial increase in energetic particle precipitation and, under certain conditions, produce a limit in the number of particles that can be stably trapped. This precipitation effect arises from an enhancement of the whistler-mode and ion-cyclotron mode interactions that result from the ionized gas or "cold plasma" injection.

It has also been proposed to release large clouds of barium in the magnetosphere so that photoionization will increase the cold plasma density, thereby producing electron precipitation through enhanced whistler-mode interactions.

However, in all of the above-mentioned approaches, the mechanisms involved in triggering the change in the trapped particle phenomena must be actually positioned within the affected zone, e.g., the magnetosphere, before they can be actuated to effect the desired change.

The earth's ionosphere is not considered to be a "trapped" belt since there are few trapped particles therein. The term "trapped" herein refers to situations where the force of gravity on the trapped particles is balanced by magnetic forces rather than hydrostatic or collisional forces. The charged electrons and ions in the ionosphere also follow helical paths around magnetic field lines within the ionosphere but are not trapped between mirrors, as in the case of the trapped belts in the magnetosphere, since the gravitational force on the particles is balanced by collisional or hydrostatic forces.

In recent years, a number of experiments have actually been carried out to modify the ionosphere in some controlled manner to investigate the possibility of a beneficial result. For detailed discussions of these operations see the following papers: (1) Ionospheric Modification Theory; G. Meltz and F. W. Perkins; (2) The Platteville High Power Facility; Carrol et al.; (3) Arecibo Heating Experiments; W. E. Gordon and H. C. Carlson, Jr.; and (4) Ionospheric Heating by Powerful Radio Waves; Meltz et al., all published in Radio Science, Vol. 9, No. 11, November, 1974, at pages 885–888; 889–894; 1041–1047; and 1049–1063, respectively, all of which are incorporated herein by reference. In such experiments, certain regions of the ionosphere are heated to change the electron density and temperature within these regions. This is accomplished by transmitting from earth-based antennae high frequency electromagnetic radiation at a substantial angle to, not parallel to, the ionosphere's magnetic field to heat the ionospheric particles primarily by ohmic heating. The electron temperature of the ionosphere has been raised by hundreds of degrees in these experiments, and electrons with several electron volts of energy have been produced in numbers sufficient to enhance airglow. Electron concentrations have been reduced by a few percent, due to expansion of the plasma as a result of increased temperature.

In the Elmo Bumpy Torus (EBT), a controlled fusion device at the Oak Ridge National Laboratory, all heating is provided by microwaves at the electron cyclotron resonance interaction. A ring of hot electrons is formed at the earth's surface in the magnetic mirror by a combination of electron cyclotron resonance and stochastic heating. In the EBT, the ring electrons are produced with an average "temperature" of 250 kilo electron volts or kev (2.5×10^9K) and a plasma beta between 0.1 and 0.4; see, "A Theoretical Study of Electron—Cyclotron Absorption in Elmo Bumpy Torus", Batchelor and Goldfinger, Nuclear Fusion, Vol. 20, No. 4 (1980) pps. 403–418.

Electron cyclotron resonance heating has been used in experiments on the earth's surface to produce and accelerate plasmas in a diverging magnetic field. Kosmahl et al. showed that power was transferred from the electromagnetic waves and that a fully ionized plasma

was accelerated with a divergence angle of roughly 13 degrees. Optimum neutral gas density was 1.7×10^{14}per cubic centimeter; see, "Plasma Acceleration with Microwaves Near Cyclotron Resonance", Kosmahl et al., Journal of Applied Physics, Vol. 38, No. 12, Nov., 1967, pps. 4576–4582.

DISCLOSURE OF THE INVENTION

The present invention provides a method and apparatus for altering at least one selected region which normally exists above the earth's surface. The region is excited by electron cyclotron resonance heating of electrons which are already present and/or artifically created in the region to thereby increase the charged particle energy and ultimately the density of the region.

In one embodiment this is done by transmitting circularly polarized electromagnetic radiation from the earth's surface at or near the location where a naturally-occurring dipole magnetic field (force) line intersects the earth's surface. Right hand circular polarization is used in the northern hemisphere and left hand circular polarization is used in the southern hemisphere. The radiation is deliberately transmitted at the outset in a direction substantially parallel to and along a field line which extends upwardly through the region to be altered. The radiation is transmitted at a frequency which is based on the gyrofrequency of the charged particles and which, when applied to the at least one region, excites electron cyclotron resonance within the region or regions to heat and accelerate the charged particles in their respective helical paths around and along the field line. Sufficient energy is employed to cause ionization of neutral particles (molecules of oxygen, nitrogen and the like, particulates, etc.) which then become a part of the region thereby increasing the charged particle density of the region. This effect can further be enhanced by providing artificial particles, e.g., electrons, ions, etc., directly into the region to be affected from a rocket, satellite, or the like to supplement the particles in the naturally-occurring plasma. These artificial particles are also ionized by the transmitted electromagnetic radiation thereby increasing charged particle density of the resulting plasma in the region.

In another embodiment of the invention, electron cyclotron resonance heating is carried out in the selected region or regions at sufficient power levels to allow a plasma present in the region to generate a mirror force which forces the charged electrons of the altered plasma upward along the force line to an altitude which is higher than the original altitude. In this case the relevant mirror points are at the base of the altered region or regions. The charged electrons drag ions with them as well as other particles that may be present. Sufficient power, e.g., 10^{15}joules, can be applied so that the altered plasma can be trapped on the field line between mirror points and will oscillate in space for prolonged periods of time. By this embodiment, a plume of altered plasma can be established at selected locations for communication modification or other purposes.

In another embodiment, this invention is used to alter at least one selected region of plasma in the ionosphere to establish a defined layer of plasma having an increased charged particle density. Once this layer is established, and while maintaining the transmission of the main beam of circularly polarized electromagnetic radiation, the main beam is modulated and/or at least one second different, modulated electromagnetic radiation beam is transmitted from at least one separate source at a different frequency which will be absorbed in the plasma layer. The amplitude of the frequency of the main beam and/or the second beam or beams is modulated in resonance with at least one known oscillation mode in the selected region or regions to excite the known oscillation mode to propagate a known frequency wave or waves throughout the ionosphere.

BRIEF DESCRIPTION OF THE DRAWINGS

The actual construction, operation, and apparent advantages of this invention will be better understood by referring to the drawings in which like numerals identify like parts and in which:

FIG. **1** is a simplified schematical view of the earth (not to scale) with a magnetic field (force) line along which the present invention is carried out;

FIG. **2** is one embodiment within the present invention in which a selected region of plasma is raised to a higher altitude;

FIG. **3** is a simplified, idealized representation of a physical phenomenon involved in the present invention; and

FIG. **4** is a schematic view of another embodiment within the present invention.

FIG. **5** is a schematic view of an apparatus embodiment within this invention.

BEST MODES FOR CARRYING OUT THE INVENTION

The earth's magnetic field is somewhat analogous to a dipole bar magnet. As such, the earth's magnetic field contains numerous divergent field or force lines, each line intersecting the earth's surface at points on opposite sides of the Equator. The field lines which intersect the earth's surface near the poles have apexes which lie at the furthest points in the earth's magnetosphere while those closest to the Equator have apexes which reach only the lower portion of the magnetosphere.

At various altitudes above the earth's surface, e.g., in both the ionosphere and the magnetosphere, plasma is naturally present along these field lines. This plasma consists of equal numbers of positively and negatively charged particles (i.e., electrons and ions) which are guided by the field line. It is well established that a charged particle in a magnetic field gyrates about field lines, the center of gyration at any instance being called the "guiding center" of the particle. As the gyrating particle moves along a field line in a uniform field, it will follow a helical path about its guiding center, hence linear motion, and will remain on the field line. Electrons and ions both follow helical paths around a field line but rotate in opposite directions. The frequencies at which the electrons and ions rotate about the field line are called gyromagnetic frequencies or cyclotron frequencies because they are identical with the expression for the angular frequencies of gyration of particles in a cyclotron. The cyclotron frequency of ions in a given magnetic field is less than that of electrons, in inverse proportion to their masses.

If the particles which form the plasma along the earth's field lines continued to move with a constant pitch angle, often designated "alpha", they would soon impact on the earth's surface. Pitch angle alpha is defined as the angle between the direction of the earth's magnetic field and the velocity (V) of the particle. However, in converging force fields, the pitch angle does change in such a way as to allow the particle to

turn around and avoid impact. Consider a particle moving along a field line down toward the earth. It moves into a region of increasing magnetic field strength and therefore sine alpha increases. But sine alpha can only increase to 1.0, at which point, the particle turns around and starts moving up along the field line, and alpha decreases. The point at which the particle turns around is called the mirror point, and there alpha equals ninety degrees. This process is repeated at the other end of the field line where the same magnetic field strength value B, namely Bm, exists. The particle again turns around and this is called the "conjugate point" of the original mirror point. The particle is therefore trapped and bounces between the two magnetic mirrors. The particle can continue oscillating in space in this manner for long periods of time. The actual place where a particle will mirror can be calculated from the following:

$$\sin^2 \text{alpha}_o = B_o/B_m \quad (1)$$

wherein:

alpha_o = equatorial pitch angle of particle

B_o = equatorial field strength on a particular field line

B_m = field strength at the mirror point

Recent discoveries have established that there are substantial regions of naturally trapped particles in space which are commonly called "trapped radiation belts". These belts occur at altitudes greater than about 500 km and accordingly lie in the magnetosphere and mostly above the ionosphere.

The ionosphere, while it may overlap some of the trapped-particle belts, is a region in which hydrostatic forces govern its particle distribution in the gravitational field. Particle motion within the ionosphere is governed by both hydrodynamic and electrodynamic forces. While there are few trapped particles in the ionosphere, nevertheless, plasma is present along field lines in the ionosphere. The charged particles which form this plasma move between collisions with other particles along similar helical paths around the field lines and although a particular particle may diffuse downward into the earth's lower atmosphere or lose energy and diverge from its original field line due to collisions with other particles, these charged particles are normally replaced by other available charged particles or by particles that are ionized by collision with said particle. The electron density (N_e) of the plasma will vary with the actual conditions and locations involved. Also, neutral particles, ions, and electrons are present in proximity to the field lines.

The production of enhanced ionization will also alter the distribution of atomic and molecular constituents of the atmosphere, most notably through increased atomic nitrogen concentration. The upper atmosphere is normally rich in atomic oxygen (the dominant atmospheric constituent above 200 km altitude), but atomic nitrogen is normally relatively rare. This can be expected to manifest itself in increased airglow, among other effects.

As known in plasma physics, the characteristics of a plasma can be altered by adding energy to the charged particles or by ionizing or exciting additional particles to increase the density of the plasma. One way to do this is by heating the plasma which can be accomplished in different ways, e.g., ohmic, magnetic compression, shock waves, magnetic pumping, electron cyclotron resonance, and the like.

Since electron cyclotron resonance heating is involved in the present invention, a brief discussion of same is in order. Increasing the energy of electrons in a plasma by invoking electron cyclotron resonance heating, is based on a principle similar to that utilized to accelerate charged particles in a cyclotron. If a plasma is confined by a static axial magnetic field of strength B, the charged particles will gyrate about the lines of force with a frequency given, in hertz, as $f_g = 1.54 \times 10^3 B/A$, where: B = magnetic field strength in gauss, and A = mass number of the ion.

Suppose a time-varying field of this frequency is superimposed on the static field B confining the plasma, by passage of a radiofrequency current through a coil which is concentric with that producing the axial field, then in each half-cycle of their rotation about the field lines, the charged particles acquire energy from the oscillating electric field associated with the radio frequency. For example, if B is 10,000 gauss, the frequency of the field which is in resonance with protons in a plasma is 15.4 megahertz.

As applied to electrons, electron cyclotron resonance heating requires an oscillating field having a definite frequency determined by the strength of the confining field. The radio-frequency radiation produces time-varying fields (electric and magnetic), and the electric field accelerates the charged particle. The energized electrons share their energy with ions and neutrals by undergoing collisions with these particles, thereby effectively raising the temperature of the electrons, ions, and neutrals. The apportionment of energy among these species is determined by collision frequencies. For a more detailed understanding of the physics involved, see "Controlled Thermonuclear Reactions", Glasstone and Lovberg, D. Van Nostrand Company, Inc., Princeton, N.J., 1960 and "The Radiation Belt and Magnetosphere", Hess, Blaisdell Publishing Company, 1968, both of which are incorporated herein by reference.

Referring now to the drawings, the present invention provides a method and apparatus for altering at least one region of plasma which lies along a field line, particularly when it passes through the ionosphere and/or magnetosphere. FIG. **1** is a simplified illustration of the earth **10** and one of its dipole magnetic force or field lines **11**. As will be understood, line **11** may be any one of the numerous naturally existing field lines and the actual geographical locations **13** and **14** of line **11** will be chosen based on a particular operation to be carried out. The actual locations at which field lines intersect the earth's surface is documented and is readily ascertainable by those skilled in the art.

Line **11** passes through region R which lies at an altitude above the earth's surface. A wide range of altitudes are useful given the power that can be employed by the practice of this invention. The electron cyclotron resonance heating effect can be made to act on electrons anywhere above the surface of the earth. These electrons may be already present in the atmosphere, ionosphere, and/or magnetosphere of the earth, or can be artificially generated by a variety of means such as x-ray beams, charged particle beams, lasers, the plasma sheath surrounding an object such as a missile or meteor, and the like. Further, artificial particles, e.g., electrons, ions, etc., can be injected directly into region R from an earth-launched rocket or orbiting satellite carrying, for example, a payload of radioactive beta-decay material; alpha emitters; an electron accelerator; and/or ionized gases such as hydrogen; see U.S. Pat. No. 4,042,196. The altitude can be greater than about 50 km if desired,

e.g., can be from about 50 km to about 800 km, and, accordingly may lie in either the ionosphere or the magnetosphere or both. As explained above, plasma will be present along line **11** within region R and is represented by the helical line **12**. Plasma **12** is comprised of charged particles (i.e., electrons and ions) which rotate about opposing helical paths along line **11**.

Antenna **15** is positioned as close as is practical to the location **14** where line **11** intersects the earth's surface. Antenna **15** may be of any known construction for high directionality, for example, a phased array, beam spread angle (θ) type. See "The MST Radar at Poker Flat, Alaska", Radio Science, Vol. 15, No. 2, Mar.-Apr. 1980, pps. 213–223, which is incorporated herein by reference. Antenna **15** is coupled to transmitter **16** which generates a beam of high frequency electromagnetic radiation at a wide range of discrete frequencies, e.g., from about 20 to about 1800 kilohertz (kHz).

Transmitter **16** is powered by power generator means **17** which is preferably comprised of one or more large, commercial electrical generators. Some embodiments of the present invention require large amounts of power, e.g., up to $10^9$to 10^{11}watts, in continuous wave or pulsed power. Generation of the needed power is within the state of the art. Although the electrical generators necessary for the practice of the invention can be powered in any known manner, for example, by nuclear reactors, hydroelectric facilities, hydrocarbon fuels, and the like, this invention, because of its very large power requirement in certain applications, is particularly adapted for use with certain types of fuel sources which naturally occur at strategic geographical locations around the earth. For example, large reserves of hydrocarbons (oil and natural gas) exist in Alaska and Canada. In northern Alaska, particularly the North Slope region, large reserves are currently readily available. Alaska and northern Canada also are ideally located geographically as to magnetic latitudes. Alaska provides easy access to magnetic field lines that are especially suited to the practice of this invention, since many field lines which extend to desirable altitudes for this invention intersect the earth in Alaska. Thus, in Alaska, there is a unique combination of large, accessible fuel sources at desirable field line intersections. Further, a particularly desirable fuel source for the generation of very large amounts of electricity is present in Alaska in abundance, this source being natural gas. The presence of very large amounts of clean-burning natural gas in Alaskan latitudes, particularly on the North Slope, and the availability of magnetohydrodynamic (MHD), gas turbine, fuel cell, electrogasdynamic (EGD) electric generators which operate very efficiently with natural gas provide an ideal power source for the unprecedented power requirements of certain of the applications of this invention. For a more detailed discussion of the various means for generating electricity from hydrocarbon fuels, see "Electrical Aspects of Combustion", Lawton and Weinberg, Clarendon Press, 1969. For example, it is possible to generate the electricity directly at the high frequency needed to drive the antenna system. To do this, typically the velocity of flow of the combustion gases (v), past magnetic field perturbation of dimension d (in the case of MHD), follow the rule:

$$v=df$$

where f is the frequency at which electricity is generated. Thus, if $v=1.78\times10^6$ cm/sec and d=1 cm then electricity would be generated at a frequency of 1.78 mHz.

Put another way, in Alaska, the right type of fuel (natural gas) is naturally present in large amounts and at just the right magnetic latitudes for the most efficient practice of this invention, a truly unique combination of circumstances. Desirable magnetic latitudes for the practice of this invention interest the earth's surface both northerly and southerly of the equator, particularly desirable latitudes being those, both northerly and southerly, which correspond in magnitude with the magnetic latitudes that encompass Alaska.

Referring now to FIG. **2** a first ambodiment is illustrated where a selected region $R_1$of plasma **12** is altered by electron cyclotron resonance heating to accelerate the electrons of plasma **12**, which are following helical paths along field line **11**.

To accomplish this result, electromagnetic radiation is transmitted at the outset, essentially parallel to line **11** via antenna **15** as right hand circularly polarized radiation wave **20**. Wave **20** has a frequency which will excite electron cyclotron resonance with plasma **12** at its initial or original altitude. This frequency will vary depending on the electron cyclotron resonance of region R_1which, in turn, can be determined from available data based on the altitudes of region R_1, the particular field line **11** being used, the strength of the earth's magnetic field, etc. Frequencies of from about 20 to about 7200 kHz, preferably from about 20 to about 1800 kHz can be employed. Also, for any given application, there will be a threshhold (minimum power level) which is needed to produce the desired result. The minimum power level is a function of the level of plasma production and movement required, taking into consideration any loss processes that may be dominant in a particular plasma or propagation path.

As electron cyclotron resonance is established in plasma **12**, energy is transferred from the electromagnetic radiation **20** into plasma **12** to heat and accelerate the electrons therein and, subsequently, ions and neutral particles. As this process continues, neutral particles which are present within $R_1$are ionized and absorbed into plasma **12** and this increases the electron and ion densities of plasma **12**. As the electron energy is raised to values of about 1 kilo electron volt (kev), the generated mirror force (explained below) will direct the excited plasma **12** upward along line **11** to form a plume R_2at an altitude higher than that of R_1.

Plasma acceleration results from the force on an electron produced by a nonuniform static magnetic field ($\overline{B}$). The force, called the mirror force, is given by

$$F=-\mu\nabla B \tag{2}$$

where μ is the electron magnetic moment and $\nabla\overline{B}$ is the gradient of the magnetic field, μ being further defined as:

$$W_\perp/B=mV_\perp^2/2B$$

where $W_\perp$is the kinetic energy in the direction perpendicular to that of the magnetic field lines and B is the magnetic field strength at the line of force on which the guiding center of the particle is located. The force as represented by equation (2) is the force which is responsible for a particle obeying equation (1).

Since the magnetic field is divergent in region R_1, it can be shown that the plasma will move upwardly from the heating region as shown in FIG. **1** and further it can be shown that

$$\tfrac{1}{2}M_eV_{e\perp}^2(x)\simeq\tfrac{1}{2}M_eV_{e\perp}^2(Y)+\tfrac{1}{2}M_iV_{i\parallel}^2(Y) \quad (3)$$

where the left hand side is the initial electron transverse kinetic energy; the first term on the right is the transverse electron kinetic energy at some point (Y) in the expanded field region, while the final term is the ion kinetic energy parallel to B at point (Y). This last term is what constitutes the desired ion flow. It is produced by an electrostatic field set up by electrons which are accelerated according to Equation (2) in the divergent field region and pulls ions along with them. Equation (3) ignores electron kinetic energy parallel to B because $V_{e\parallel}\simeq V_{i\parallel}$, so the bulk of parallel kinetic energy resides in the ions because of their greater masses. For example, if an electromagnetic energy flux of from about 1 to about 10 watts per square centimeter is applied to region R, whose altitude is 115 km, a plasma having a density (N_e) of 10^{12} per cubic centimeter will be generated and moved upward to region R_2 which has an altitude of about 1000 km. The movement of electrons in the plasma is due to the mirror force while the ions are moved by ambipolar diffusion (which results from the electrostatic field). This effectively "lifts" a layer of plasma **12** from the ionosphere and/or magnetosphere to a higher elevation R_2. The total energy required to create a plasma with a base area of 3 square kilometers and a height of 1000 km is about 3×10^{13} joules.

FIG. **3** is an idealized representation of movement of plasma **12** upon excitation by electron cyclotron resonance within the earth's divergent force field. Electrons (e) are accelerated to velocities required to generate the necessary mirror force to cause their upward movement. At the same time neutral particles (n) which are present along line **11** in region $R_1$are ionized and become part of plasma **12**. As electrons (e) move upward along line **11**, they drag ions (i) and neutrals (n) with them but at an angle θ of about 13 degrees to field line **11**. Also, any particulates that may be present in region R_1, will be swept upwardly with the plasma. As the charged particles of plasma **12** move upward, other particles such as neutrals within or below R_1, move in to replace the upwardly moving particles. These neutrals, under some conditions, can drag with them charged particles.

For example, as a plasma moves upward, other particles at the same altitude as the plasma move horizontally into the region to replace the rising plasma and to form new plasma. The kinetic energy developed by said other particles as they move horizontally is, for example, on the same order of magnitude as the total zonal kinetic energy of stratospheric winds known to exist.

Referring again to FIG. **2**, plasma **12** in region R_1 is moved upward along field line **11**. The plasma **12** will then form a plume (cross-hatched area in FIG. **2**) which will be relatively stable for prolonged periods of time. The exact period of time will vary widely and be determined by gravitational forces and a combination of radiative and diffusive loss terms. In the previous detailed example, the calculations were based on forming a plume by producing 0^+energies of 2 ev/particle. About 10 ev per particle would be required to expand plasma **12** to apex point C (FIG. **1**). There at least some of the particles of plasma **12** will be trapped and will oscillate between mirror points along field line **11**. This oscillation will then allow additional heating of the trapped plasma **12** by stochastic heating which is associated with trapped and oscillating particles. See "A New Mechanism for Accelerating Electrons in the Outer Ionosphere" by R. A. Helliwell and T. F. Bell, Journal of Geophysical Research, Vol. 65, No. 6, June, 1960. This is preferably carried out at an altitude of at least 500 km.

The plasma of the typical example might be employed to modify or disrupt microwave transmissions of satellites. If less than total black-out of transmission is desired (e.g., scrambling by phase shifting digital signals), the density of the plasma (N_e) need only be at least about 10^6 per cubic centimeter for a plasma orginating at an altitude of from about 250 to about 400 km and accordingly less energy (i.e., electromagnetic radiation), e.g., 10^8 joules need be provided. Likewise, if the density $N_e$is on the order of 10^8, a properly positioned plume will provide a reflecting surface for VHF waves and can be used to enhance, interfere with, or otherwise modify communication transmissions. It can be seen from the foregoing that by appropriate application of various aspects of this invention at strategic locations and with adequate power sources, a means and method is provided to cause interference with or even total disruption of communications over a very large portion of the earth. This invention could be employed to disrupt not only land based communications, both civilian and military, but also airborne communications and sea communications (both surface and subsurface). This would have significant military implications, particularly as a barrier to or confusing factor for hostile missiles or airplanes. The belt or belts of enhanced ionization produced by the method and apparatus of this invention, particularly if set up over Northern Alaska and Canada, could be employed as an early warning device, as well as a communications disruption medium. Further, the simple ability to produce such a situation in a practical time period can by itself be a deterring force to hostile action. The ideal combination of suitable field lines intersecting the earth's surface at the point where substantial fuel sources are available for generation of very large quantitities of electromagnetic power, such as the North Slope of Alaska, provides the wherewithal to accomplish the foregoing in a practical time period, e.g., strategic requirements could necessitate achieving the desired altered regions in time periods of two minutes or less and this is achievable with this invention, especially when the combination of natural gas and magnetohydrodynamic, gas turbine, fuel cell and/or EGD electric generators are employed at the point where the useful field lines intersect the earth's surface. One feature of this invention which satisfies a basic requirement of a weapon system, i.e., continuous checking of operability, is that small amounts of power can be generated for operability checking purposes. Further, in the exploitation of this invention, since the main electromagnetic beam which generates the enhanced ionized belt of this invention can be modulated itself and/or one or more additional electromagnetic radiation waves can be impinged on the ionized region formed by this invention as will be described in greater detail herein after with respect to FIG. **4**, a substantial amount of randomly modulated signals of very large power magnitude can be generated in a highly nonlinear mode. This can cause confusion of or interference with or even complete disruption of guidance systems employed by

even the most sophisticated of airplanes and missiles. The ability to employ and transmit over very wide areas of the earth a plurality of electromagnetic waves of varying frequencies and to change same at will in a random manner, provides a unique ability to interfere with all modes of communications, land, sea, and/or air, at the same time. Because of the unique juxtaposition of usable fuel source at the point where desirable field lines intersect the earth's surface, such wide ranging and complete communication interference can be achieved in a resonably short period of time. Because of the mirroring phenomenon discussed hereinabove, it can also be prolonged for substantial time periods so that it would not be a mere transient effect that could simply be waited out by an opposing force. Thus, this invention provides the ability to put unprecedented amounts of power in the earth's atmosphere at strategic locations and to maintain the power injection level, particularly if random pulsing is employed, in a manner far more precise and better controlled than heretofore accomplished by the prior art, particularly by the detonation of nuclear devices of various yeilds at various altitudes. Where the prior art approaches yielded merely transitory effects, the unique combination of fuel and desirable field lines at the point where the fuel occurs allows the establishment of, compared to prior art approaches, precisely controlled and long-lasting effects which cannot, practically speaking, simply be waited out. Further, by knowing the frequencies of the various electromagnetic beams employed in the practice of this invention, it is possible not only to interfere with third party communications but to take advantage of one or more such beams to carry out a communications network even though the rest of the world's communications are disrupted. Put another way, what is used to disrupt another's communications can be employed by one knowledgeable of this invention as a communications network at the same time. In addition, once one's own communication network is established, the far-reaching extent of the effects of this invention could be employed to pick up communication signals of other for intelligence purposes. Thus, it can be seen that the disrupting effects achievable by this invention can be employed to benefit by the party who is practicing this invention since knowledge of the various electromagnetic waves being employed and how they will vary in frequency and magnitude can be used to an advantage for positive communication and eavesdropping purposes at the same time. However, this invention is not limited to locations where the fuel source naturally exists or where desirable field lines naturally intersect the earth's surface. For example, fuel, particularly hydrocarbon fuel, can be transported by pipeline and the like to the location where the invention is to be practiced.

FIG. **4** illustrates another embodiment wherein a selected region of plasma R_3which lies within the earth's ionosphere is altered to increase the density thereof whereby a relatively stable layer **30** of relatively dense plasma is maintained within region R_3. Electromagnetic radiation is transmitted at the outset essentially parallel to field line **11** via antenna **15** as a right hand circularly polarized wave and at a frequency (e.g., 1.78 megahertz when the magnetic field at the desired altitude is 0.66 gauss) capable of exciting electron cyclotron resonance in plasma **12** at the particular altitude of plasma **12**. This causes heating of the particles (electrons, ions, neutrals, and particulates) and ionization of the uncharged particles adjacent line **11**, all of which are absorbed into plasma **12** to increase the density thereof. The power transmitted, e.g., 2×10^6 watts for up to 2 minutes heating time, is less than that required to generate the mirror force F required to move plasma **12** upward as in the previous embodiment.

While continuing to transmit electromagnetic radiation **20** from antenna **15**, a second electromagnetic radiation beam **31**, which is at a defined frequency different from the radiation from antenna **15**, is transmitted from one or more second sources via antenna **32** into layer **30** and is absorbed into a portion of layer **30** (cross-hatched area in FIG. **4**). The electromagnetic radiation wave from antenna **32** is amplitude modulated to match a known mode of oscillation f_3 in layer **30**. This creates a resonance in layer **30** which excites a new plasma wave **33** which also has a frequency of f_3 and which then propogates through the ionosphere. Wave **33** can be used to improve or disrupt communications or both depending on what is desired in a particular application. Of course, more than one new wave **33** can be generated and the various new waves can be modulated at will and in a highly nonlinear fashion.

FIG. **5** shows apparatus useful in this invention, particularly when those applications of this invention are employed which require extremely large amounts of power. In FIG. **5** there is shown the earth's surface **40** with a well **41** extending downwardly thereinto until it penetrates hydrocarbon producing reservoir **42**. Hydrocarbon reservoir **42** produces natural gas alone or in combination with crude oil. Hydrocarbons are produced from reservoir **42** through well **41** and wellhead **43** to a treating system **44** by way of pipe **45**. In treater **44**, desirable liquids such as crude oil and gas condensates are separated and recovered by way of pipe **46** while undesirable gases and liquids such as water, H_2S, and the like are separated by way of pipe **47**. Desirable gases such as carbon dioxide are separated by way of pipe **48**, and the remaining natural gas stream is removed from treater **44** by way of pipe **49** for storage in conventional tankage means (not shown) for future use and/or use in an electrical generator such as a magnetohydrodynamic, gas turbine, fuel cell or EGD generator **50**. Any desired number and combination of different types of electric generators can be employed in the practice of this invention. The natural gas is burned in generator **50** to produce substantial quantities of electricity which is then stored and/or passed by way of wire **51** to a transmitter **52** which generates the electromagnetic radiation to be used in the method of this invention. The electromagnetic radiation is then passed by way of wire **53** to antenna **54** which is located at or near the end of field line **11**. Antenna **54** sends circularly polarized radiation wave **20** upwards along field line **11** to carry out the various methods of this invention as described hereinabove.

Of course, the fuel source need not be used in its naturally-occurring state but could first be converted to another second energy source form such as hydrogen, hydrazine and the like, and electricity then generated from said second energy source form.

It can be seen from the foregoing that when desirable field line **11** intersects earth's surface **40** at or near a large naturally-occurring hydrocarbon source **42**, exceedingly large amounts of power can be very efficiently produced and transmitted in the direction of field lines. This is particularly so when the fuel source is natural gas and magnetohydrodynamic generators are employed. Further, this can all be accomplished in a

relatively small physical area when there is the unique coincidence of fuel source **42** and desirable field line **11**. Of course, only one set of equipment is shown in FIG. **5** for sake of simplicity. For a large hydrocarbon reservoir **42**, a plurality of wells **41** can be employed to feed one or more storage means and/or treaters and as large a number of generators **55** as needed to power one or more transmitters **52** and one or more antennas **54**. Since all of the apparatus **44** through **54** can be employed and used essentially at the sight where naturally-occurring fuel source **42** is located, all the necessary electromagnetic radiation **20** is generated essentially at the same location as fuel source **42**. This provides for a maximum amount of usable electromagnetic radiation **20** since there are no significant storage or transportation losses to be incurred. In other words, the apparatus is brought to the sight of the fuel source where desirable field line **11** intersects the earth's surface **40** on or near the geographical location of fuel source **42**, fuel source **42** being at a desirable magnetic latitude for the practice of this invention, for example, Alaska.

The generation of electricity by motion of a conducting fluid through a magnetic field, i.e., magnetohydrodynamics (MHD), provides a method of electric power generation without moving mechanical parts and when the conducting fluid is a plasma formed by combustion of a fuel such as natural gas, an idealized combination of apparatus is realized since the very clean-burning natural gas forms the conducting plasma in an efficient manner and the thus formed plasma, when passed through a magnetic field, generates electricity in a very efficient manner. Thus, the use of fuel source **42** to generate a plasma by combustion thereof for the generation of electricity essentially at the site of occurrence of the fuel source is unique and ideal when high power levels are required and desirable field lines **11** intersect the earth's surface **40** at or near the site of fuel source **42**. A particular advantage for MHD generators is that they can be made to generate large amounts of power with a small volume, light weight device. For example, a 1000 megawatt MHD generator can be construed using superconducting magnets to weigh roughly 42,000 pounds and can be readily air lifted.

This invention has a phenomenal variety of possible ramifications and potential future developments. As alluded to earlier, missile or aircraft destruction, deflection, or confusion could result, particularly when relativistic particles are employed. Also, large regions of the atmosphere could be lifted to an unexpectedly high altitude so that missiles encounter unexpected and unplanned drag forces with resultant destruction or deflection of same. Weather modification is possible by, for example, altering upper atmosphere wind patterns or altering solar absorption patterns by constructing one or more plumes of atmospheric particles which will act as a lens or focusing device. Also as alluded to earlier, molecular modifications of the atmosphere can take place so that positive environmental effects can be achieved. Besides actually changing the molecular composition of an atmospheric region, a particular molecule or molecules can be chosen for increased presence. For example, ozone, nitrogen, etc. concentrations in the atmosphere could be artificially increased. Similarly, environmental enhancement could be achieved by causing the breakup of various chemical entities such as carbon dioxide, carbon monoxide, nitrous oxides, and the like. Transportation of entities can also be realized when advantage is taken of the drag effects caused by regions of the atmosphere moving up along diverging field lines. Small micron sized particles can be then transported, and, under certain circumstances and with the availability of sufficient energy, larger particles or objects could be similarly affected. Particles with desired characteristics such as tackiness, reflectivity, absorptivity, etc., can be transported for specific purposes or effects. For example, a plume of tacky particles could be established to increase the drag on a missile or satellite passing therethrough. Even plumes of plasma having substantially less charged particle density than described above will produce drag effects on missiles which will affect a lightweight (dummy) missile in a manner substantially different than a heavy (live) missile and this affect can be used to distinguish between the two types of missiles. A moving plume could also serve as a means for supplying a space station or for focusing vast amount of sunlight on selected portions of the earth. Surveys of global scope could also be realized because the earth's natural magnetic field could be significantly altered in a controlled manner by plasma beta effects resulting in, for example, improved magnetotelluric surveys. Electromagnetic pulse defenses are also possible. The earth's magnetic field could be decreased or disrupted at appropriate altitudes to modify or eliminate the magnetic field in high Compton electron generation (e.g., from high altitude nuclear bursts) regions. High intensity, well controlled electrical fields can be provided in selected locations for various purposes. For example, the plasma sheath surrounding a missile or satellite could be used as a trigger for activating such a high intensity field to destroy the missile or satellite. Further, irregularities can be created in the ionosphere which will interfere with the normal operation of various types of radar, e.g., synthetic aperture radar. The present invention can also be used to create artificial belts of trapped particles which in turn can be studied to determine the stability of such parties. Still further, plumes in accordance with the present invention can be formed to simulate and/or perform the same functions as performed by the detonation of a "heave" type nuclear device without actually having to detonate such a device. Thus it can be seen that the ramifications are numerous, far-reaching, and exceedingly varied in usefulness.

I claim:

1. A method for altering at least one region normally existing above the earth's surface with electromagnetic radiation using naturally-occurring and diverging magnetic field lines of the earth comprising transmitting first electromagnetic radiation at a frequency between 20 and 7200 kHz from the earth's surface, said transmitting being conducted essentially at the outset of transmission substantially parallel to and along at least one of said field lines, adjusting the frequency of said first radiation to a value which will excite electron cyclotron resonance at an initial elevation at least 50 km above the earth's surface, whereby in the region in which said electron cyclotron resonance takes place heating, further ionization, and movement of both charged and neutral particles is effected, said cyclotron resonance excitation of said region is continued until the electron concentration of said region reaches a value of at least 10^6 per cubic centimeter and has an ion energy of at least 2 ev.

2. The method of claim **1** including the step of providing artificial particles in said at least one region which are excited by said electron cyclotron resonance.

3. The method of claim 2 wherein said artificial particles are provided by injecting same into said at least one region from an orbiting satellite.

4. The method of claim 1 wherein said threshold excitation of electron cyclotron resonance is about 1 watt per cubic centimeter and is sufficient to cause movement of a plasma region along said diverging magnetic field lines to an altitude higher than the altitude at which said excitation was initiated.

5. The method of claim 4 wherein said rising plasma region pulls with it a substantial portion of neutral particles of the atmosphere which exist in or near said plasma region.

6. The method of claim 1 wherein there is provided at least one separate source of second electromagnetic radiation, said second radiation having at least one frequency different from said first radiation, impinging said at least one second radiation on said region while said region is undergoing electron cyclotron resonance excitation caused by said first radiation.

7. The method of claim 6 wherein said second radiation has a frequency which is absorbed by said region.

8. The method of claim 6 wherein said region is plasma in the ionosphere and said second radiation excites plasma waves within said ionosphere.

9. The method of claim 8 wherein said electron concentration reaches a value of at least 10^{12} per cubic centimeter.

10. The method of claim 8 wherein said excitation of electron cyclotron resonance is initially carried out within the ionosphere and is continued for a time sufficient to allow said region to rise above said ionosphere.

11. The method of claim 1 wherein said excitation of electron cyclotron resonance is carried out above about 500 kilometers and for a time of from 0.1 to 1200 seconds such that multiple heating of said plasma region is achieved by means of stochastic heating in the magnetosphere.

12. The method of claim 1 wherein said first electromagnetic radiation is right hand circularly polarized in the northern hemisphere and left hand circularly polarized in the southern hemisphere.

13. The method of claim 1 wherein said electromagnetic radiation is generated at the site of a naturally-occurring hydrocarbon fuel source, said fuel source being located in at least one of northerly or southerly magnetic latitudes.

14. The method of claim 13 wherein said fuel source is natural gas and electricity for generating said electromagnetic radiation is obtained by burning said natural gas in at least one of magnetohydrodynamic, gas turbine, fuel cell, and EGD electric generators located at the site where said natural gas naturally occurs in the earth.

15. The method of claim 14 wherein said site of natural gas is within the magnetic latitudes that encompass Alaska.

* * * * *

birthcontrol vaccine

United States Patent [19]

Talwar

[11] **Patent Number: 4,780,312**

[45] **Date of Patent: Oct. 25, 1988**

[54] **BIRTH CONTROL VACCINE**

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[21] Appl. No.: **870,502**

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[52] **U.S. Cl.** **424/88**; 424/95; 424/105; 514/21; 530/399; 530/402; 530/403; 530/405

[58] **Field of Search** 424/88, 95, 105; 530/399, 402, 403, 405; 514/21

[56] **References Cited**

U.S. PATENT DOCUMENTS

4,161,519	7/1979	Talwar	424/88

FOREIGN PATENT DOCUMENTS

376312	9/1938	Canada .
1029656	4/1978	Canada .
1054937	5/1979	Canada .
1057742	7/1979	Canada .
1108048	9/1981	Canada .
1113389	12/1981	Canada .
1181742	1/1985	Canada .
1183527	3/1985	Canada .
1189789	7/1985	Canada .
1492445	11/1977	United Kingdom .
1505751	3/1978	United Kingdom .

OTHER PUBLICATIONS

Nash et al., *J Reproductive Immunol* 7, 1985, pp. 151-162.

"Immunofluorescense and Electron Microscopie Studies on Kidney, Chorid Plexus and Pituitary in Rhesus Monkeys Immunized with the Anti-hCG Vaccine Pr--B-HCG-TT", Gupta et al; *Contraception* (1978).

"Observations on the Antigenicity and Clinical Effects of a Candidate Antipregnancy Vaccine: B-Subunit of Human Chorionic Gonadotrophin Linked to Tetanus Toxoid", Nash et al; *The American Fertility Society* (1979).

"Effects of Pregnancy in Mice of Passive Immunization Against Ovine LH and Human Chorionic Gonadotrophin", Tandon et al; *Journals of Reproduction & Fertility* (1984).

"Important Role of the Carrier in the Induction of Antibody Response Without Freund's Complete Adjuvant Against a 'Self' Peptide Luteinizing Hormone-Releasing Hormone (LHRH)", N. Shastri et al; *American Journal of Reproductive Immunology*, (1981).

"Use of Anti-Gonadotrophins in Studying the Action of Gonadotrophines", N. R. Mougal; *Immunization with Hormones in Reproduction Research* (1975).

"Termination of Pregnancy in Macaques (*Macaca radiata*) Using Monkey Antiserum to Ovine Luteinizing Hormone", S. Prahalada et al (1975).

"Passive Immunization with an Antibody to the B-Subunit of Ovine Luteinizing Hormone as a Method of Early Abortion—A Feasibility Study in Monkeys (Macaca Radiata)", R. N. Mougal et al, *Fertility & Sterility*, (1978).

"Immunological Methods to Prevent Pregnancy", S. J. Segal; *Contraception* (1976).

(List continued on next page.)

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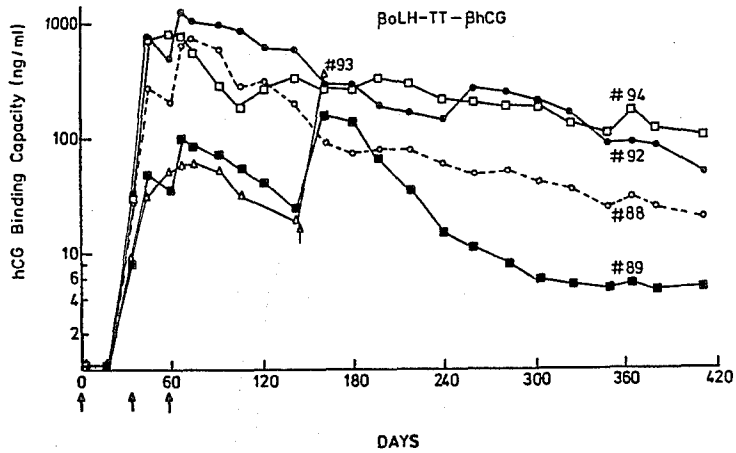
[57] **ABSTRACT**

A polyvalent vaccine for control of fertility is disclosed, the vaccine having a multiplicity of determinant antigens in the reproductive system of mammals, the antigens being linked to at least one carrier. The precise manner of linkage can differ, and preferably more than one carrier is present thereby increasing antibody response particularly in those subjects who are poor responders when a single carrier only is used. The new vaccine thus has a multi-valent capability against the reproductive system and also preferably the capability of producing immunoprophylactic benefit against more than one health hazard.

25 Claims, 9 Drawing Sheets



OTHER PUBLICATIONS

"Anti-hCG Immunization", G. P. Talwar; *Contraception* (1978).

"Differential Affinity of Anti-Pr-B-hCG-TT Antibodies for hCG and hLH", *Contraception,* (1978).

"Discriminatory Effect of Anti-Pr-B-hCG-TT Antibodies on Neutralization of the Biological Activity of Placental and Pituitary Gonadotrpins", C. Das et al; *Contraception,* (1978).

"Progesterone Levels in Monkeys Immunized with Pr-B-hCG-TT After Injection of hLH and hCG During Luteal Phase", S. Ramakrishnan; Contraception (1978).

"Differences Between the Discriminatory Activity of Antisera Raised Against the Total Gonadotropins and the Pr-B-hCG-TT for Neutralization of hCG and LH Action", P. Mohini et al; *Contraception* (1978).

"Nature of Immune Complexes Formed in Rhesus Monkeys Immunized with Pr-B-hCG-TT on Challenge with hCG", S. Ramakrishnan; *Contraception* (1978).

"The Effectiveness in Rhesus Monkeys of an Antifertility Vaccine Based on Neutralization of Chorionic Gonadotropin", K. Sundaram et al; *Contraception* (1976).

"Human Chorionic Gonadotropin Stimulates Luteal Function in Rhesus Monkeys Immunized Against the B-Subunit of Ovine Luteinizing Hormone", R. Thau et al; *Endochronology* (1983).

"Characterization of Anti oLHB-Antibodies Acting as Contraceptives in Rhesus Monkeys. I. In Vitro Binding Properties", Y. Yamamoto et al; *Journal of Reproductive Immunology* (1982).

"Characterizations of Anti-oLHB Antibodies Acting as Contraceptives in Rhesus Monkeys, II, In Vivo Neutralizing Ability for Gonadotropic Hormones", Y. Yamamoto et al; *Journal of Reproductive Immunology* (1983).

"Effects of Immunization with the B-Subunit of Ovine Luteinizing Hormone on Corpus Luteum Function in the Rhesus Monkey", R. Thau et al; *Fertility & Sterility* (1979).

"Effects of Long-Term Immunization Against the B-Subunit of Ovine LH on Circulating Immune Complex Formation and on Arterial Changes in Rhesus Monkeys", R. Thau et al.

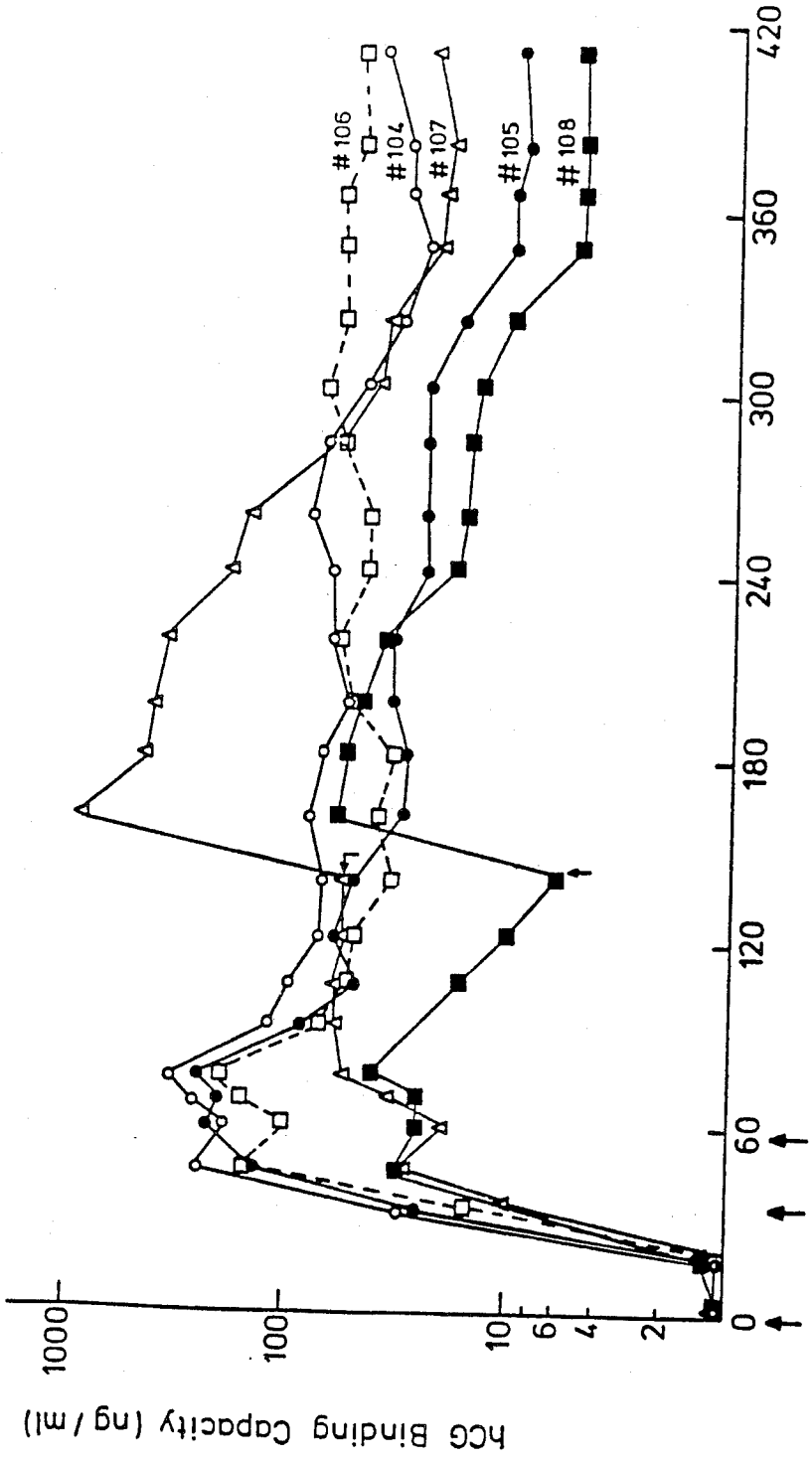

hCG Binding Capacity (ng / ml)
1000
100
10
6
4
2
0
60
120
180
240
300
360
420
DAYS
#106
#104
#107
#105
#108

FIG. 1

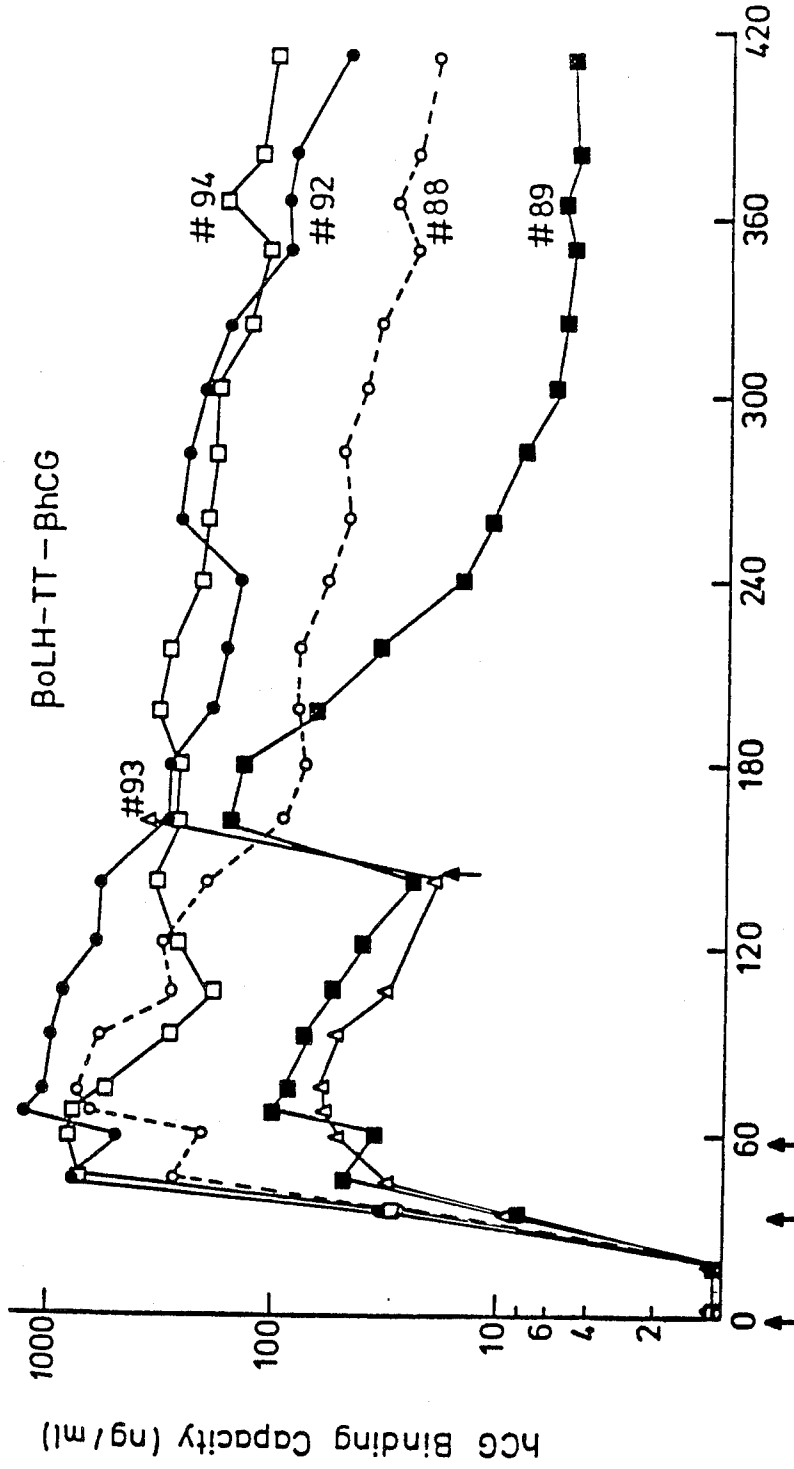

BoLH-TT-βhCG
#94
#92
#88
#89
#93
1000
100
10
6
4
2
0
60
120
180
240
300
360
420
DAYS
hCG Binding Capacity (ng/ml)

FIG. 2

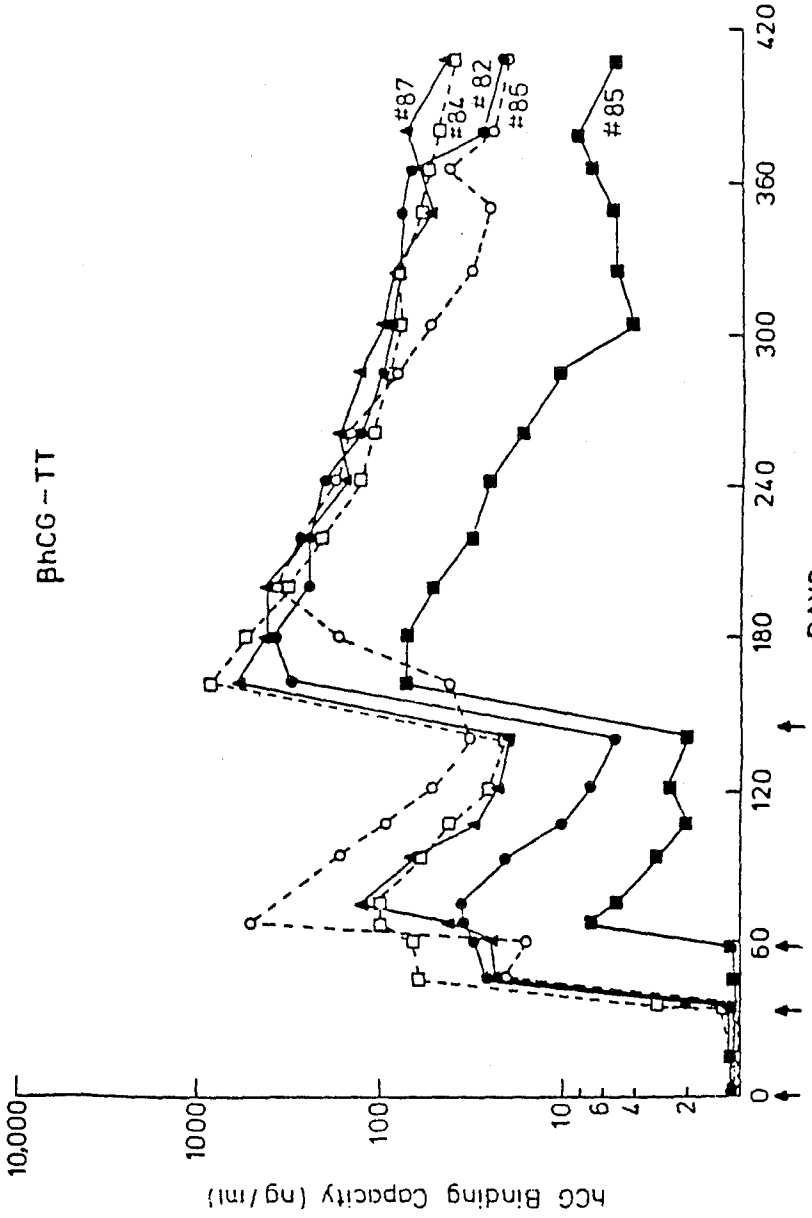

βhCG-TT
hCG Binding Capacity (ng/ml)
10,000
1000
100
10
6
4
2
0
60
120
180
240
300
360
420
DAYS
#87
#78
#82
#85
#85

FIG. 3

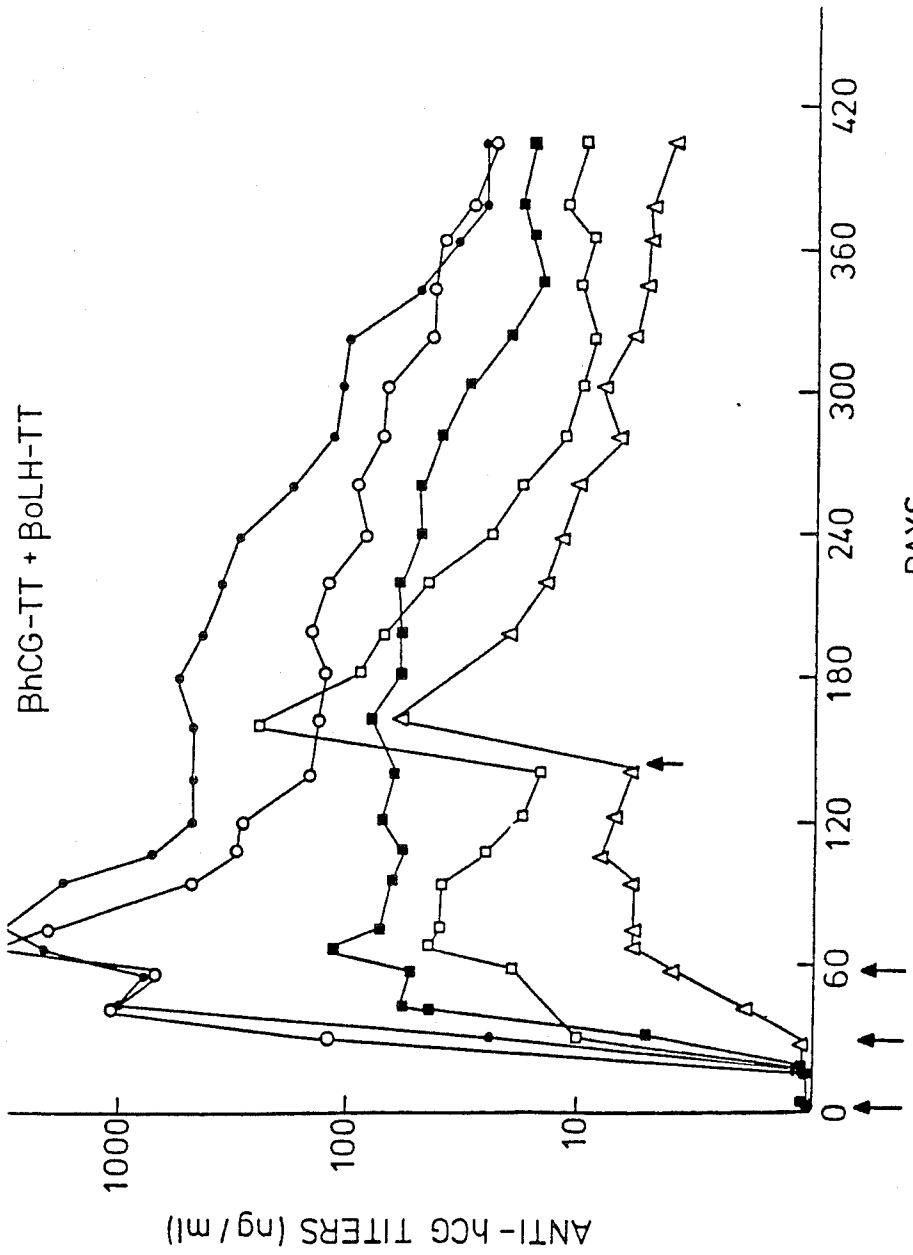

βhCG-TT + βoLH-TT
ANTI- hCG TITERS (ng / ml)
1000
100
10
0
60
120
180
240
300
360
420
DAYS

FIG. 4

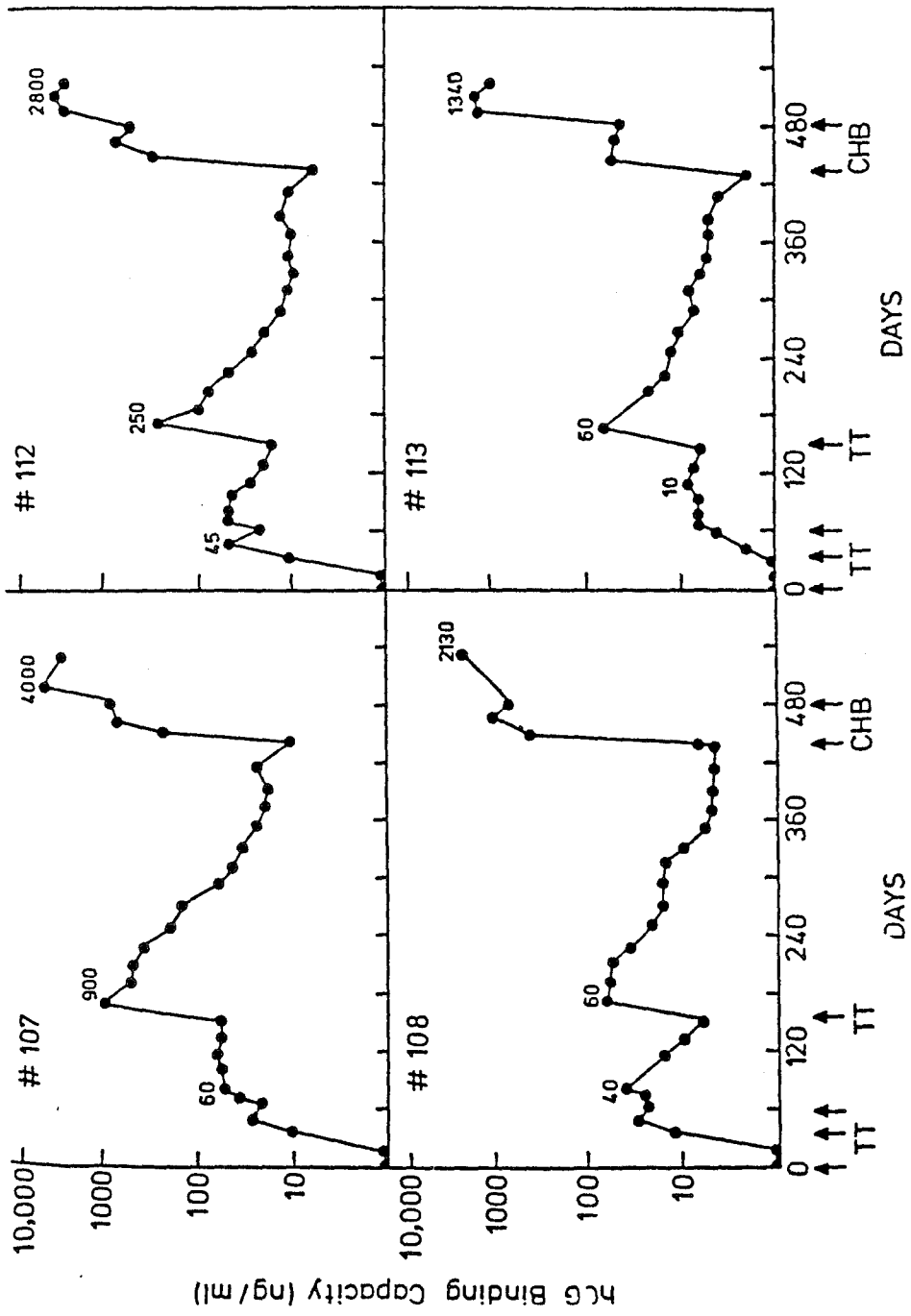

hCG Binding Capacity (ng/ml)
10,000
1000
100
10
107
4000
900
60
108
2130
60
40
112
2800
250
45
113
1340
60
10
0
120
240
360
480
TT
TT
TT
CHB
CHB
DAYS
DAYS

FIG. 5

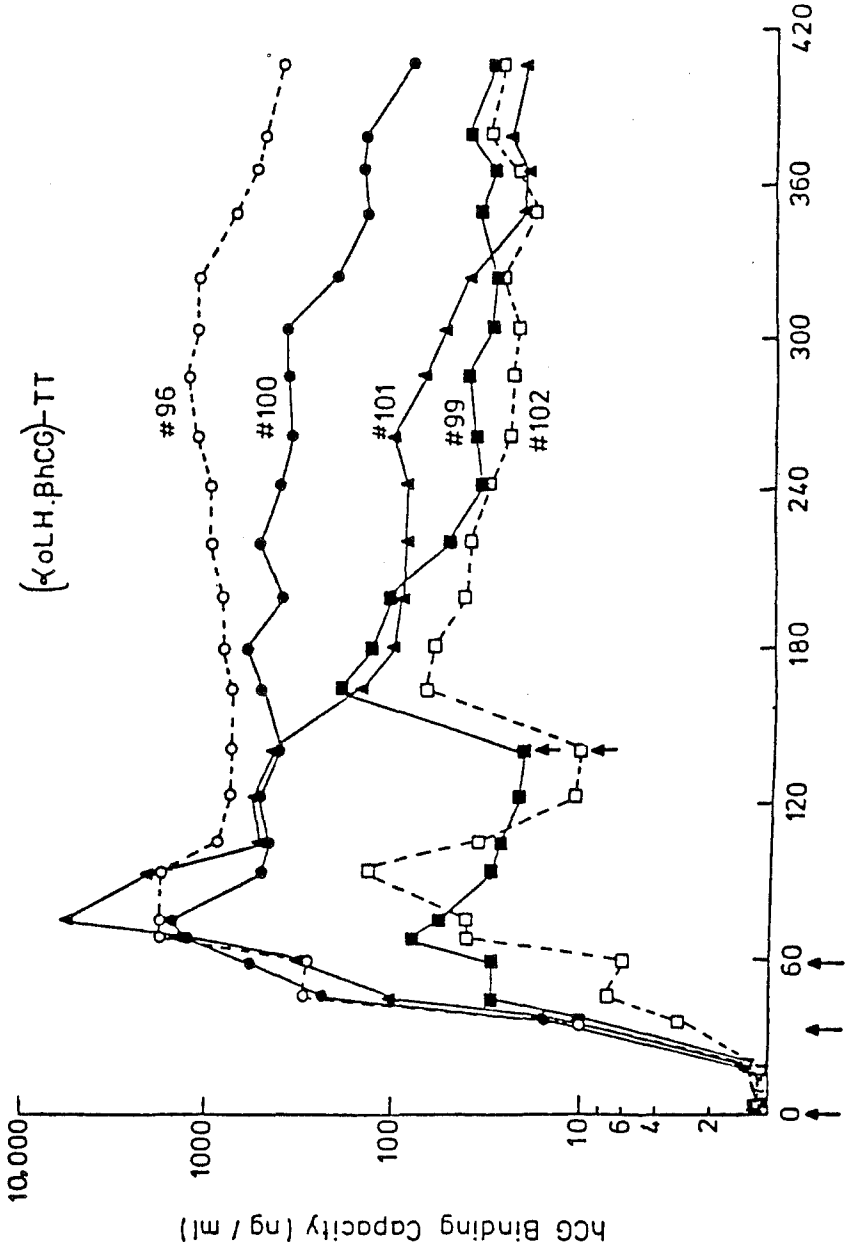

(αLH.βhCG)-TT
#96
#100
#101
#99
#102
hCG Binding Capacity (ng / ml)
10,000
1000
100
10
6
4
2
0
60
120
180
240
300
360
420
DAYS

FIG.6

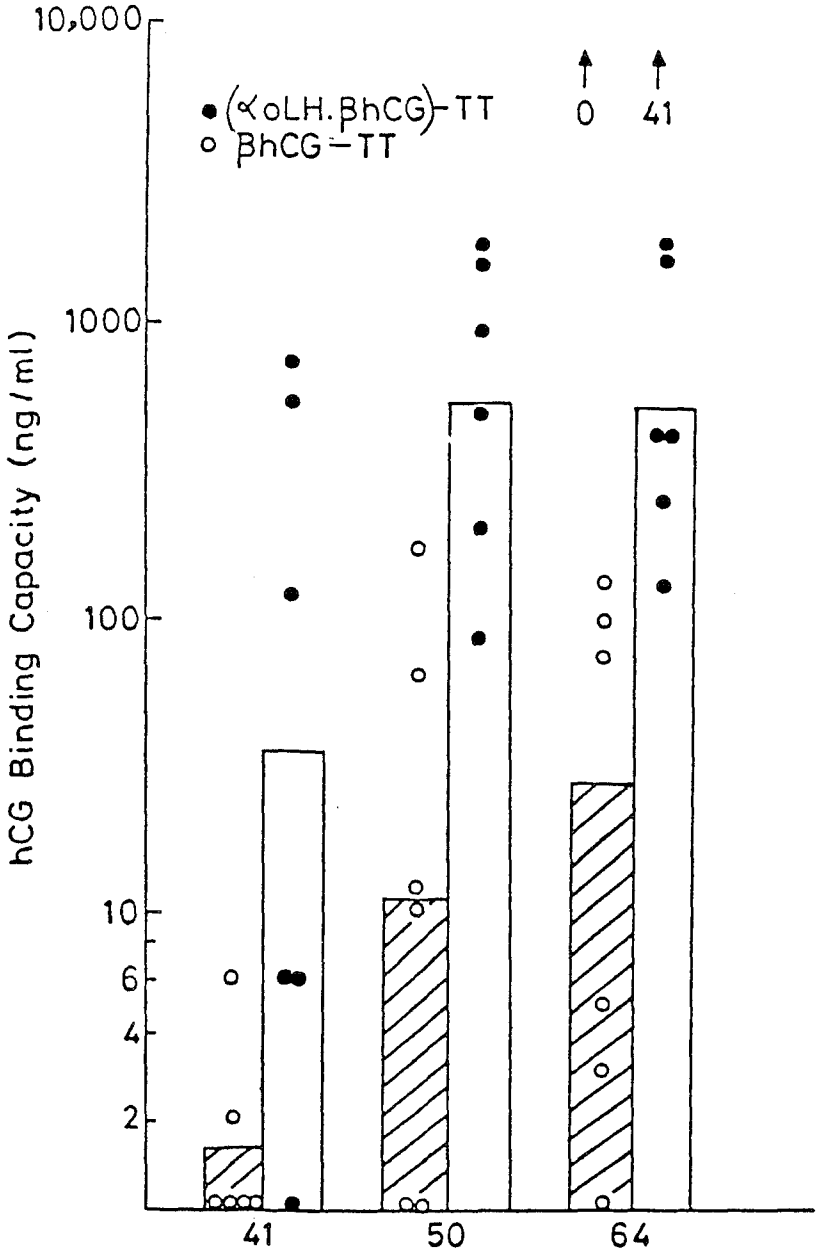

10,000
1000
100
10
6
4
2
hCG Binding Capacity (ng/ml)
(αoLH.βhCG)-TT
βhCG-TT
0
41
41
50
64

FIG. 7

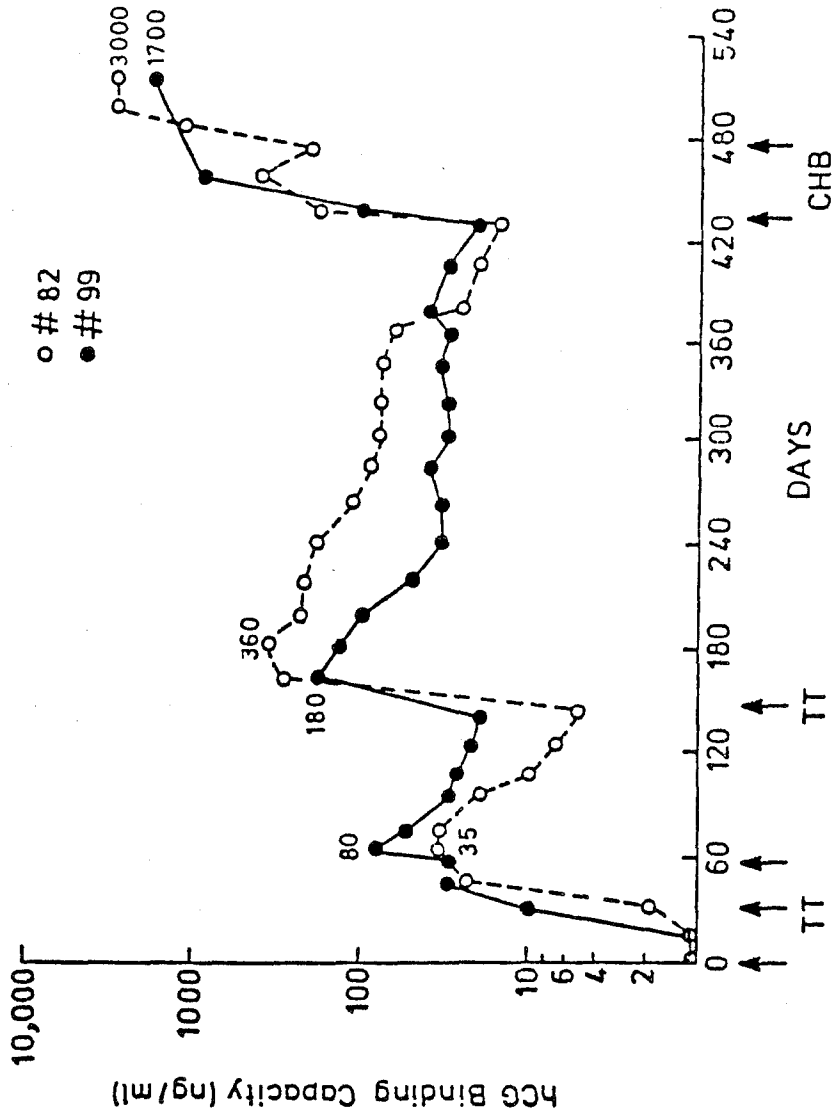

hCG Binding Capacity (ng/ml)
10,000
1000
100
10
6
4
2
0
60
120
180
240
300
360
420
480
540
DAYS
TT
TT
CHB
80
35
180
360
1700
3000
o #82
● #99

FIG.8

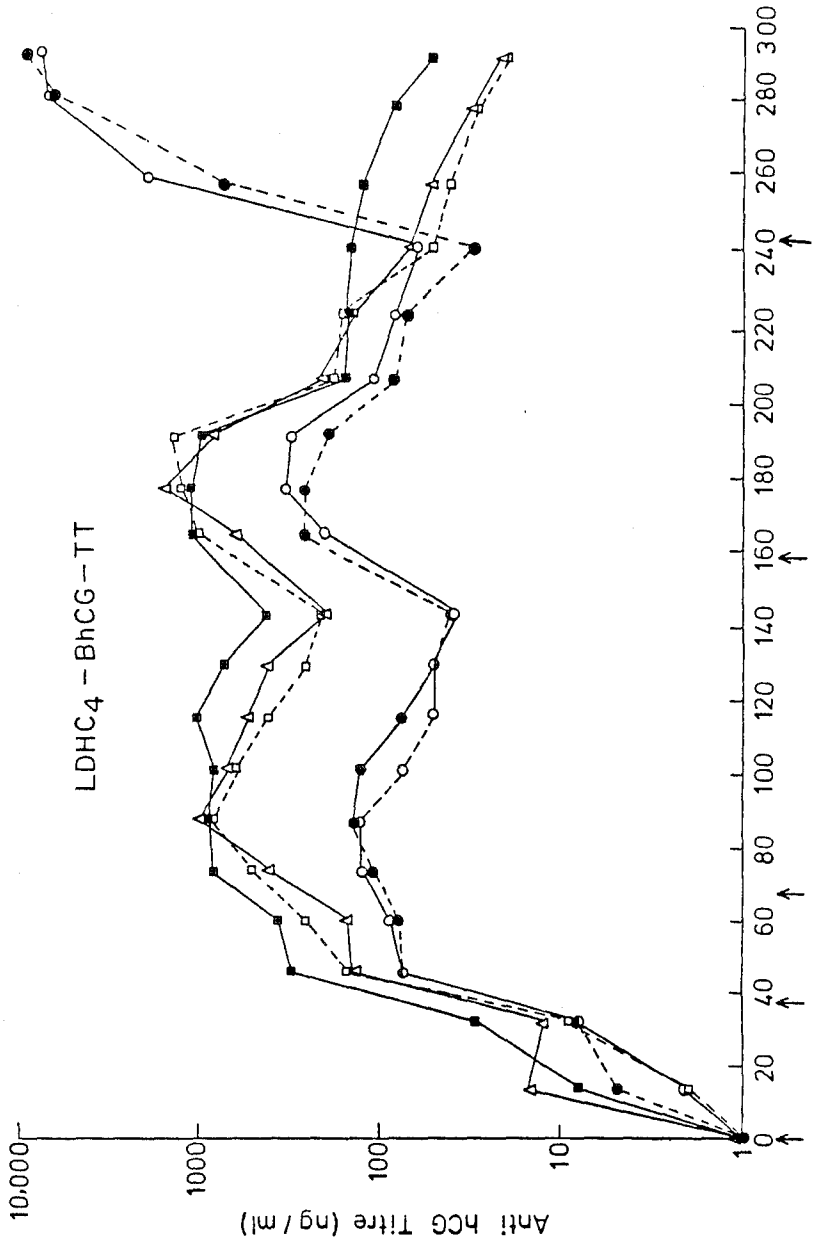

LDHC4 - BhCG - TT
Anti hCG Titre (ng / ml)
10,000
1000
100
10
1
0
20
40
60
80
100
120
140
160
180
200
220
240
260
280
300
DAYS

FIG. 9

BIRTH CONTROL VACCINE

BACKGROUND TO THE INVENTION

1. Field of the Invention

The present invention relates to a vaccine for control of fertility and in particular to a polyvalent vaccine having a multiplicity of determinant antigens in the reproductive system linked to at least one, and preferably more than one, carrier.

2. Description of the Prior Art

The present invention is directed to an active immunological approach for control of fertility by antibodies intercepting the action of one or more gonadotropins. The pituitary luteinizing hormone (LH) and chorionic gonadotropin (CG) exercise a critical role in the regulation of fertility in primates. The former is important for ovulation and steroidogenesis, the latter for rescue of corpus luteum and maintenance of steroidogenesis up to the time of placental shift. Human chorionic gonadotropin (hCG) is an early product of trophoblast and is recognized to be essential for the establishment and sustenance of pregnancy. Both active and passive immunological approaches have been demonstrated to be effective in primates for control of fertility. Use was made in such immunizations of Freunds Complete Adjuvant (C.F.A.) which is unacceptable for eventual human use. The present invention concerns an active polyvalent vaccine which can induce the formation of antibodies in primates effective against both gonadotropins without the use of C.F.A. The vaccine of the present invention leads to the formation of antibodies capable of reacting with the complete hCG molecule consisting of both α and β subunits to produce neutralization of its biological activity as well as diminish, to an extent, the bioactivity of LH. The vaccine produces antibodies devoid of cross-reactivity with body tissues and the antibody response is of controlled and reasonably long duration, providing an immunity which is reversible, free from toxicity and contra-indications to body functions and also does not cause extra hypersensitivity problems.

The anti-hCG immunization approach of the present invention is known from earlier work and in particular from the inventor's earlier Canadian Patent No. 1,054,937, issued May 22, 1979 and also Canadian Patent No. 1,057,742 (Stevens) issued July 3, 1979. However, these two investigators of anti-hCG vaccines have used fundamentally different approaches. The present inventor has used the β subunit of the hormone hCG, while Stevens has used the 37 amino acid carboxy-terminal peptide (CTP) of the same subunit. The modes by which this "self" protein is rendered immunogenic are also different. The present inventor has utilized a carrier, such as tetanus toxoid, whereas Stevens and co-workers initially advocated haptenic modification of the protein although they subsequently opted for the carrier approach.

hCG is a glycoproteinic hormone composed of two subunits, α and β. The α subunit is common to three other pituitary hormones, TSH, LH, and FSH. It is the β subunit which confers in each case the hormonal individuality to these hormones. Thus, the use of only the β subunit of hCG as antigen reduces the chances that the antibodies will cross-react with the other glycoprotein hormones, in particular TSH and FSH. While the female immune system is normally tolerant to hCG and would not be expected to produce antibodies following injection of the hormone, immunogencity can be introduced by modifying the molecule either by attaching haptenic groups or by linking it to an immunogenic "carrier" protein. Thus, in aforementioned Canadian Patent No. 1,054,937 immunization is effected using a vaccine in which βhCG is chemically linked to tetanus toxoid. This vaccine produces antibodies against both the pregnancy hormone hCG as well as tetanus toxoid. However, the efficacy of the vaccine is not adequate for some "low responder" subjects whose antibody response is too low to prevent pregnancy. The marked variation (constitutional variations) in response among subjects indicates a need to modify the vaccine so that adequate antibody response is elicited in the majority, if not all, of recipients.

SUMMARY OF THE INVENTION

The present invention attempts to provide an improved immunogen for eliciting substantially higher anti-hCG antibodies in mammalian species, as compared to the βhCG-TT vaccine. The use of more than one carrier is further proposed to evoke good antibody response in low responders to a given carrier.

According to the present invention there is provided a process for the preparation of a polyvalent vaccine which comprises the steps of (a) obtaining at least two separate antigens of the reproductive system, a first being a preparation of βsubunit of hCG and a second being a preparation of a sperm antigen or a heterospecies α or βsubunit of LH, (b) obtaining a pure preparation of at least one subject-compatible carrier, (c) conjugating said at least two antigens of step (a) with said at least one carrier of step (b) by carrying out at least one step selected from the group consisting of (i) forming a composite conjugate of said at least two separate antigens linked to the same carrier, (ii) forming a physical mixture of conjugates of said at least two separate antigens each separately linked to a said carrier, (iii) associating said at least two separate antigens which are βsubunit of hCG and a said hetero α subunit to form an annealed composite which is then conjugated with a said carrier, and, where more than one carrier is present, (iv) forming a polyvalent conjugate of at least one antigen linked both to at least one sperm antigen and to at least one carrier, and, (v) forming a conjugate of one of said antigens linked to a said carrier, and, if necessary, (d) combining two or more conjugate products from steps (i) to (v) above.

In another aspect the present invention also provides a process for the preparation of a polyvalent vaccine using more than one carrier for a mammalian subject having a low antibody response to a single carrier conjugate vaccine which comprises the steps of (a) obtaining at least two separate antigens of the reproductive system, a first being a preparation of βsubunit hCG and a second being a preparation of a sperm antigen or heterospecies α or βsubunit of LH, (b) obtaining a pure preparation of at least two subject-compatible carriers, (c) conjugating said at least two antigens of step (a) with at least one of said at least two carriers of step (b) by carrying out at least one step selected from the group consisting of (i) forming a composite conjugate of said at least two separate antigens linked to the same carrier, (ii) forming a physical mixture of conjugates of said at least two separate antigens separately linked to at least one of said carriers, (iii) associating said at least two separate antigens which are βsubunit of hCG and a said

hetero α subunit of LH to form an annealed composite which is then conjugated with at least one of said carriers, (iv) forming a polyvalent conjugate of at least one antigen linked both to at least one sperm antigen and to at least one carrier, and, (v) forming a conjugate of one of said antigens linked to a said carrier, and, if necessary, (d) combining two or more conjugate products from steps (i) to (v) above.

In another aspect the present invention provides a polyvalent vaccine which comprises at least two antigens of the reproductive system with the proviso that in the case of homospecies antigens the antigens are specific to the reproductive system and at least one subject compatible carrier said polyvalent vaccine being selected from the group consisting of: (i) a composite conjugate of at least two separate antigens linked to the same carrier moiety (ii) a mixture of conjugates of at least two separate antigens each separately linked to at least one carrier (iii) an annealed composite of at least two separate antigens which are βsubunit of hCG and a heterospecies αsubunit; conjugated to a carrier, (iv) a polyvalent conjugate of at least one antigen linked to sperm antigen and to at least one carrier, and, (v) a mixture of at least two of (i) to (iv).

In another aspect the present invention provides a method of birth control employing the polyvalent vaccine which comprises administering said vaccine to a female mammal at a dose and frequency sufficient to prevent pregnancy.

Thus, in the present invention increased immunogenicity is achieved, and the constitutional variation or "low responder" problem is tackled by the provision of a polyvalent vaccine consisting of more than one antigen of the reproductive system linked to more than one carrier which seeks interception or neutralization in more than one manner within the reproductive system. The novel conjugates are formed with at least two antigens linked to more than one carrier(s), one of the antigens being βhCG. The new vaccine formed from these novel conjugates can be defined as having a multivalent capability against the reproductive system and a large capability of inducing good antibody response from genetically different individuals.

In one of the preferred embodiments, the βsubunit of hCG is annealed to a heterospecies αsubunit, such as αoLH, and this helps to achieve the optimal configuration for hormonal activity thereby offering the possibility of producing antibodies which recognize that configuration and prevent hormone interaction with the tissue receptors. It is important to use the αsubunit of a heterospecies since the αsubunit of hCG is common to three other hormones hTSH, hFSH and hLH. Cross-reaction with hTSH and hFSH is contra-indicated and hence one cannot use the homologous α subunit (human) for achieving an optimal conformation of hCG for bioactivity. The αsubunit, for example from ovine LH, can anneal with βhCG to generate a) the optimal confirmation, b) increased immunogenicity, c) with the further advantage that no cross-reaction is produced with hTSH and hFSH.

The βsubunit of hCG is included in the polyvalent vaccine of the present invention together with a sperm antigen and/or a heterospecies βsubunit of LH to provide the multiplicity of antigenic determinant so that diverse antibodies are formed to intercept fertility at more than one point. These epitopes can be present in the novel polyvalent vaccine by way of a mixed conjugate in which they are both attached to the same carrier (thus forming a mixed conjugate), or can be separately attached to different molecules of the same carrier or indeed different carriers thereby creating a physical mixture of different conjugates. As a further alternative, the two antigens can be conjugated to the carrier. With the annealed composite embodiment a heterospecies αsubunit is associated with βhCG. The αsubunit may be equine, porcine, ovine, rodent or other hetero mammalian species, other than man.

With the mixed conjugate and physical mixture of different conjugate embodiments, the βsubunit of a heterospecies is bonded to βhCG. Preferably the βsubunit of luteinizing hormone (LH) of a heterospecies such as equine, porcine, ovine or rodent is used, and more preferably the βsubunit of ovine LH. These novel conjugates appear to produce principally LH interaction and secondly counteract CG, while the annealed composite conjugate appears to principally counteract CG while interfering less with LH.

The annealed composite can replace βhCG in the mixed conjugate and physical mixture of conjugate embodiments thereby providing a vaccine with increased efficacy.

In addition, more than two antigens can be included in the vaccine in order to boost the effect of multiplicity of determinant action in the reproductive system. Thus, a sperm antigen, such as $LDHC_4$, can be included to counteract sperm and thus prevent conception. It has also been surprisingly discovered, in accordance with the present invention, that the use of a second or more carriers in the polyvalent vaccine produces increased efficacy, this being particularly useful in overcoming the low response to a given carrier as a result of constitutional variation. The use of more than one carrier also has the distinctive advantage of producing immunoprophylactic benefit against more than one health hazard.

BRIEF DESCRIPTION OF THE DRAWINGS

FIG. **1** indicates antibody response in five bonnet monkeys immunized with βoLH-TT, detoxified sodium phthalyl derivative of salmonella lipopolysaccharide (SPLPS) being added in the first injection only. Arrows along time scale indicate when injections were given.

FIG. **2** indicates antibody response in five bonnet monkeys immunized with βoLH-TT-βhCG mixed conjugate.

FIG. **3** indicates antibody response in five bonnet monkeys immunized with βhCG-TT. All monkeys received a fourth booster injection.

FIG. **4** indicates antibody response in five bonnet monkeys immunized with βoLH-TT+βhCG-TT physical mixture, i.e. an equal mixture of βoLH-TT and βhCG-TT (on the basis of gonadotropin subunits).

FIG. **5** indicates the effect of immunization with an altered carrier on antibody response in bonnet monkeys which were low responders to βhCG-TT+βoLH-TT (monkeys No. 112, 113) or to βoLH-TT (monkeys No. 107–108). 50 μg of βhCG linked to cholera toxin B chain was injected on days 431 and 479.

FIG. **6** indicates antibody response in five bonnet monkeys immunized with (αoLH.βhCG)-TT annealed composite conjugate.

FIG. **7** indicates antibody response in rats after immunization with either (αoLH.βhCG)-TT or βhCG-TT. The animals were given two injections (10 μg gonadotropin) on day 0 and 41. The titers were determined on day 41, 50 and 64 after start of immunization. Points

give the individual titers and bars represent the geometric mean.

FIG. 8 indicates the effect of immunization of monkeys with cholera toxin B-chain (CHB) as carrier in monkeys producing antibodies of low titers with TT as a carrier. Monkey 82 was immunized with βhCG-TT and later with βhCG-CHB, monkey 99 with (αoLH.βhCG)-TT initially and later with αoLH.βhCG linked to CHB.

FIG. 9 indicates anti-hCG response in 5 bonnet monkeys immunized with $LDHC_4$-βhCG-TT conjugate. Arrows indicate three primary injections given at monthly intervals followed by a booster injection on day 158.

DESCRIPTION OF THE PREFERRED EMBODIMENTS

Methods of Conjugate Preparation

Known Methods of Coupling βhCG with Tetanus Toxoid Carrier

(i) In the periodate oxidation method the carbohydrate shell of the glycoprotein, in this case the subunit of the hormone, is treated with sodium meta periodate resulting in the oxidation of the alcohol groups to aldehyde which is then reacted with the NH_2 groups available on the carrier-tetanus toxoid in this case, in alkaline conditions to form a Schiff's base which is stabilized by the addition of the reducing agent. This design of conjugation involves only the carbohydrate part of the hormone leaving the protein untouched. The reaction does not allow for the formation of homo-conjugates of the carrier and any self coupling between the hormone subunits is minimized because of reaction conditions, namely low pH.

(ii) The use of a heterobifunctional agent such as succinimidyl 4-(N-maleimidomethyl) cyclohexane-1-carboxylate (SMCC) obviates the formation of homo-conjugates. Using this reagent, the maleimido group is introduced on to the hormone subunits using its NH_2 groups. The imidazole group is then attacked by a nucleophile, e.g. —SH, which is made available on the tetanus toxoid by using a reducing agent under mild conditions.

The conjugates thus formed utilize the available —NH_2 group of the hormone and —SH groups of the carrier. In the event SH groups are not available on the protein, they can be introduced easily.

(iii) N-Succinimidyl 3-(2-pyridyl dithio) propionate (SPDP) is another heterobifunctional agent which couples two proteins under mild conditions. The conjugating agent acts as a bridge between the two coupled proteins. The amino group of the hormone is involved in a separate reaction with the cross linking agent to ultimately yield a sulfhydryl group which is then used to form a disulfide bridge with tetanus toxoid treated separately in a similar way. This reaction design is aimed at minimizing any homo conjugate formation.

(iv) Homobifunctional reagent such a glutaraldehyde can also be used to yield conjugates between two proteins. In the single step reaction both the proteins are mixed along with glutaraldehyde. Glutaraldehyde couples two proteins by forming a Schiff's base with NH_2 groups of the two protein molecules. The single step glutaraldehyde method yields conjugates which can have both homo and hetero conjugates. Glutaraldehyde forms a bridge between the two conjugated protein molecules. Glutaraldehyde can also be used as a two step procedure in which the treatment is given separately.

(v) A condensing agent like carbodiimide can be employed for forming a conjugate. 1-Ethyl-3-(3-Dimethyl amino propyl) carbodimide (ECDI) is mixed along with the two proteins to be conjugated. The amino group of one protein reacts with the carboxyl of another to form an amide bond in the presence of carbodiimide. In the single step reaction both hetero and homo conjugates can be formed.

All the conjugation methods mentioned above can be used for preparing conjugates of the hormone subunit with the carrier. However, the preferred methods are given below with experimental details.

Conjugation of βhCG and/or βoLH with Tetanus Toxoid (TT) to form Physical Mixture of Different Conjugates

Initial Mole Ratio:
βhCH:TT
10:1

(i) Periodate method of conjugation

EXAMPLE

(1) 15 mg of βhCG by weight is dissolved in freshly distilled water Total volume=0.9 ml.

(2) 0.1 sodium meta periodate solution is made in freshly distilled water. 2.13 mg in 1 ml of water.

(3) To the βhCG solution 0.1 ml of 0.1M sodium meta periodate ($NaIO_4$) solution is added dropwise. The reaction is allowed to take place under constant mild agitation at room temperature (25°–30° C.) for 40 minutes.

(4) The βhCG treated with $NaIO_4$ is then dialyzed against one litre of 10 mM sodium acetate buffer, pH 4.4 at 4° C. with two changes, overnight.

(5) Tetanus toxoid 9.8 mg (Protein concentration determined by absorbance values at 235 and 280 nm) is dialyzed against 0.01M carbonate-buffer pH 9.5 so as to equilibrate the toxoid at this pH.

(6) 20–40 μl of 0.5M Carbonate buffer, pH 9.5 is added to the dialyzed βhCG solution to bring the pH to 9.5. The increment in pH is monitored carefully.

(7) Once both βhCG and TT solution are at pH 9.5 they are mixed together and left at room temperature (25°–30° C.) under constant agitation for 2–3 hours.

(8) 0.1 ml of freshly made sodium borohydride solution (4 mg/ml distilled water) is added for every ml of βhCG and TT reaction mixture. The reaction is carried out at 4° C. for 2 hours.

(9) The reduced reaction mixture is dialysed against Phosphate buffered saline (0.01M, pH 7.2, 0.9% NaCl) overnight at 4° C. with two changes.

(10) The reaction mixture is fractionated on a column packed with Sephacryl ™ S-300. The elution is carried out with 0.2M Phosphate buffer pH 7.2, 0.15M NaCl. Two ml fractions are collected and monitored for presence of protein. Peaks containing both TT and βhCG in the high molecular weight range are pooled.

The conjugates obtained by this method when run on S-300 column (85×2.5 cm) show similar protein profiles when made at different time points and have immunologically same amount of ingredients present.

(ii) SMCC Method of Conjugation

EXAMPLE

(1) 15 mg of βhCG is dissolved in 0.9 ml of 0.1M phosphate buffered saline pH 6.9.

(2) 6.6 mg of succinimidyl 4 (N-Maleimidomethyl) cyclohexane-1-carboxylate (SMCC) is dissolved in 1 ml of dimethyl formamide to yield a solution of 20 mM concentration. 100 μl of this SMCC solution is added dropwise while shaking into βhCG solution. The reaction is allowed to continue for 60 minutes at room temperature (25°–30° C.).

(3) The βhCG solution with SMCC is loaded on a Sephadex TM G-25 column (20×1.5 cm) equilibrated with 0.1M phosphate buffered saline pH 6.9 and 5 mM ethylenediaminetetraacetic acid (EDTA) and thoroughly gassed with nitrogen. The first peak containing activated βhCG is pooled and frozen immediately.

(4) To 9.8 mg (protein content) purified tetanus toxoid contained in 0.9 PBS 0.1M, pH 6.0 100 μl 50 mM mercaptoethanol is added and the reaction carried out for 45 minutes at 37° C.

(5) The mercaptoethanol treated TT is loaded on a Sephadex TM G-25 column (20×1.5 cms) equilibrated with acetate buffered saline 0.01M, pH 4.7, containing 5 mM EDTA and well gassed with nitrogen. The first peak collected in tubes pre-treated with nitrogen gas is pooled.

(6) TT treated with mercaptoethanol and βhCG solution with SMCC are then mixed and left in the refrigerator (at 4° C.) for 36 to 48 hours.

(7) The conjugate is finally fractionated on Sephacryl TM S-300 column using (85×2.5 cm) phosphate buffer 0.2M pH 7.2 and 0.15M sodium chloride. 2 ml fractions are collected and the protein peaks are checked for the presence of βhCG and TT. High molecular weight peak having both βhCG and TT is pooled.

Conjugation of βhCG and βoLH on the same Carrier Molecule, Tetanus Toxoid (TT) by SPDP Method to form Mixed Conjugate

Initial Mole Ratio:

βoLH+βhCG:TT

17:1

16 mg: 6 mg

1. 16 mg of βoLH and βhCG, mixed in equal proportions are dissolved in sodium phosphate buffer (0.1M, pH 7.5) with sodium chloride (0.1M)

2. (i) SPDP dissolved in ethanol is added to the gonadotropin solution to yield a final concentration of 2.5 moles for every mole of gonadotropin. The mixture is allowed to react for 25 minutes at room temperature.

(ii) 200 moles of SPDP dissolved in ethanol are mixed for every mole of tetanus toxoid (6 mg in Phosphate buffer 0.1M, pH 7.5 with NaCl 0.1M) and the mixture allowed to react for 2 hours under constant mild agitation at room temperature.

3. Both activated Gonadotropin and TT containing excess SPDP are run on separate columns of Sephadex TM G-25 (20×1.5 cm) to remove the reagent. The gonadotropin is run on a column equilibrated with sodium phosphate buffer (0.1M, pH 7.5 with sodium chloride 0.1M). Whereas tetanus toxoid is run on a column equilibrated with sodium acetate buffer 0.1M, pH 4.5, containing 0.1M sodium chloride.

4. TT is reduced by adding dithio-threitol to attain a final concentration of 50 mM. The reaction is carried out in acetate buffer pH 4.5, 0.1M, with sodium chloride 0.1M, at room temperature for 30 minutes.

5. After 30 minutes the reduced TT is separated from the excess reducing agent and pryridine 2-thione by passing it through a Sephadex TM G-25 column equilibrated with phosphate buffer (0.1M, pH 7.5) with sodium chloride, 0.1M.

6. The gonadotropins to which 2 pyridyl disulphide have been introduced are mixed with the reduced TT and the mixture left at 4° C. for 48 hours.

To monitor the reaction spectrophotometrically aliquots are taken out immediately after mixing the two reactants, and after completion of the reaction, and the absorbance read at 343 nm. (molar extinction coefficient of pyridine 2-thione at 343 nm $=8.08\times10^{3}M^{-1}cm^{-1}$).

The concentration of pyridine 2-thione released is equivalent to the number of gonadotropin subunit coupling to tetanus toxoid.

7. The conjugate is finally chromatographed on Sephacryl S-300 as detailed in other methods.

Preparation of Annealed Composite of αoLH.βhCG

αoLH and βhCG are mixed in a ratio of 2:1 in sodium acetate buffer 0.5M, pH 6.0 containing 10 mM sodium azide. The solution containing the subunits is kept under constant mild agitation at room temperature (25° C.) for 15–18 hours.

To monitor the efficiency of annealing an aliquot (10 μl) of the mixture is taken at the start and mixed with 1 ml of 40 μM 8-anilino-1-naphthalenesulfonic acid, Magnesium salt(ANS) and fluorescence measured at the following wavelengths

(Exc) excitation wavelength 360 nm

(Emm) emission wavelength 480 nm

No fluorescence with dissociated subunit is obtained but is given by the associated hormone.

The fluorescence is observed exactly in a similar way taking aliquots at 4 hour intervals until it fails to register any increase. Once the fluorescence has stabilized, maximum annealing has been achieved. The annealed material is then passed over a Sephadex TM G-75 column and the high molecular weight protein peak collected and checked for gonadotropin activity. The elution buffer used is phosphate buffer 0.2M, pH 7.2, containing 0.15M sodium chloride.

Conjugation of the annealed composite to a desired carrier can be carried out by known methods. In particular the annealed product is conjugated to tetanus toxoid using SPDP in the same manner as βhCG.

Conjugation of βhCG with Cholera Toxin B-Chain

1. 10.5 mg βhCG in 1.0 ml of distilled water was treated with 0.6 ml of 0.1M sodium meta periodate in distilled water at 4° C. for 17 hours with occasional mixing.

2. The mixture was dialyzed against 1.0mM sodium acetate, pH 4.4 at 4° C. Three changes at six hourly interval with 500 ml sodium acetate buffer were made.

3. The pH of the mixture was raised to 9.0–9.5 by adding 0.02 ml of 0.2M sodium carbonate/bicarbonate, pH 9.5.

4. 3.422 mg of cholera toxin B-chain in 1 ml of 0.01M sodium carbonate/bicarbonate buffer, pH 9.5 was immediately added to the above mixture in the ice bath, stirred and kept at 4° C. for 17 hours.

5. To the reaction mixture was then added 0.1 ml of freshly prepared sodium borohydride (4 mg/ml in distilled water) and kept for two hours at 4° C.

6. The conjugate material in lots of 2.5 ml was separated from unconjugated material by chromatography on Sepharose TM 6-B column (42×1.5 cm).

The conjugated material eluted in the void volume of the column. The descending half of the peak showed unresolved components. Some fractions were pooled and rechromatographed on the same column. Rechromatograph of the pooled fraction gave a homogeneous symmetrical peak.

In a typical preparation, the material eluted in void volume accounted for about 51% of the total material eluted in all the three peaks. Upon rechromatography, the purified CHB-βhCG conjugate recovered was of the order of 36% of the total material.

Female bonnet monkeys (Macaca radiata) of proven fertility (carrying either pups or lactating at time of supply) were immunized with the conjugates, βhCG-TT, βoLH-TT, βoLH-TT-βhCG, βhCG-TT+βoLH-TT, (αoLH.βhCG)-TT all absorbed on alum. Three injections containing 50 μg gonadotropin equivalent at monthly interval were given intramuscularly at two contralateral sites. In the first injection only 1 mg SPLPS was added. Animals with low titers were given a booster injection with the respective antigen on day 145 along with a non-toxic metabolizable lipidic emulsion, Leiras basic adjuvant (Leira Huhtamaki, Turku, Finland).

Adult female rats weighing 200–300 g were also immunized with (αoLH.βhCG)-TT and βhCG-TT conjugates (10 μg gonadotropin). The first injection was given with SPLPS after absorbing on alum, the following one with alum only.

Sera were collected at intervals and stored at −20° C. until used. The hCG binding capacity of the antisera was determined by methods described in Shastri et al, Contraception 18, 23 (1978).

Antibody response was generated in monkeys with βoLH without the use of Freund's complete adjuvant (FCA) when it was injected as a conjugate with the carrier tetanus toxoid (TT). FIG. 1 gives the kinetics of response in five bonnet monkeys immunized with 50 μg of βoLH-TT adsorbed on alum, 1 mg detoxified non-pyrogenic SPLPS was added in the first injection. Three of the five monkeys had peak titers between 200–320 ng/ml expressed as hCG binding capacity. The extensive known studies have indicated the virtual identity of the hLH and hCG reactivity of monkey sera immunized with βoLH. Two monkeys were relatively low responders, in which the primary immunization gave rise to optimum titers of 40–60 ng/ml. These were given a fourth booster injection on day 145 which increased the titers to 60 ng/ml and 900 ng/ml respectively.

However a considerably improved antibody response was attained when immunization was carried out with βoLH and βhCG tagged to a common carrier, TT, to form a mixed conjugate βoLH-TT-βhCG. Injections with the same dose of the antigen (50 g equivalent of gonadotropin) gave in three monkeys peak titers between 750 to 1300 ng/ml (FIG. 2). The response was sustained and above 100 ng/ml in two monkeys for nearly a year. Assuming 60 ng/ml of anti-hCG titers as a cut off point for efficacy, the area under the curves above this threshold for the two formulations is given in Table 1. The cumulative antibody response with the mixed conjugate was about 13 times higher than with βoLH on the same carrier employing a common dose and immunization schedule. The time duration over which this response was manifest was twice as long with βoLH-TT-βhCG than with βoLH-TT. The βhCG-TT immunized monkeys (FIG. 3) following the same dose and time schedule produced after the 3 primary injections, peak titers ranging from 7–500 ng/ml, the fourth booster injection raising the titers to 70–800 ng/ml. Monkey No. 93 died on day 171 after immunization due to diarrhea. Autopsy did not reveal any pathology associated with immunization.

The mixed formulation could consist of the two types of subunits tagged to a common carrier (βoLH-TT-βhCG) or as an alternate each one of them could be coupled individually to the carrier and employed as a physical mixture (βoLH-TT and βhCG-TT). FIG. 4 summarizes the results of the experiment in which the monkeys received 25 μg each of βoLH-TT and βhCG-TT. Two of the monkeys 110 and 111 had peak titers of 3200 and 3500 ng/ml respectively. The characteristics of the antibodies were similar to those generated by βoLH-TT-βhCG.

FIG. 6 gives the antibody titers in a group of five monkeys immunized with (αoLH.βhCG)-TT conjugate. Three of the five monkeys produced high titers of antibodies (1500 ng/ml to 5200 ng/ml). The antibodies started appearing after the first injection around day 33, reached maxima at 75 days and then declined to a level which was more or less sustained for 5 to 10 months. Using a similar injection schedule and equivalent dose, the antibody response with the known vaccine βhCG-TT was distinctly lower (FIG. 3). The latent period of antibody titers was 45 days. The titers reached after three primary injections were between 7–500 ng/ml with a tendency to decline fairly rapidly necessitating an additional booster injection on day 145. The antibody titers after the fourth injection ranged from 70 ng/ml to 800 ng/ml. The use of βhCG annealed to αoLH in the conjugate was thus distinctly beneficial in raising the level of immune response, employing non-toxic adjuvants. Assuming that the normal threshold for protection against pregnancy be 60 ng/ml of hCG binding capacity, the antibody response above this level in good responders and the duration over which it lasts for the two formulation is given in Table 1*a*. It may be pointed out that fixing the threshold of 60 ng/ml is a tentative criteria as most monkeys in the colony under test with various formulations became pregnant at titers below 50 ng/ml. There were however a few which required titers above 140 ng/ml to remain infertile. The degree of cross-reaction of the anti-hCG antibodies with monkey chorionic gonadotropin (mCG) is low and varies from animal to animal depending on the determinants to which the antibodies are raised.

(αoLH.βhCG)-TT was also found superior to βhCG-TT for induction of anti-hCG response in rats (FIG. 7). A regimen of two injections was given at 6 weekly intervals. Following the first injection, 5 out of 6 rats immunized with (αoLH.βhCG)-TT had circulating antibodies (6 to 720 ng/ml) whereas in those immunized with βhCG-TT only two had antibodies (2 to 6 ng/ml). After the second injection, 5 out of 6 rats immunized with βhCG-TT had antibody titers ranging from 3 ng/ml to 130 ng/ml on day 64. On the other hand in case of (αoLH.βhCG)-TT, 6 out of 6 rats had antibodies in circulation at this time and their titers were from 130 ng/ml to 1870 ng/ml.

Characteristics of Antibodies

The association constant (Ka) of antibodies for binding with hCG is given in Table 2 for the mixed conjugate formulation and for βoLH-TT. Both antigens induced antibodies of high affinities. The cross-reactivity of antibodies generated by the two immunogens with various pituitary hormones is given in Table 3. No cross-reaction with hFSH and hTSH was observed in either case. Both formulations produced antibodies reacting with hCG and hLH. Some sera generated by βoLH-TT cross-reacted with hCG and hLH to nearly the same extent, those with βoLH-TT-βhCG had slightly greater cross-reactivity with hCG.

Association constant (Ka) of the antibodies induced by the new composition, (αoLH.βhCG)-TT was from 1×10^9 to $2\times10^{10}M^{-1}$ for binding with hCG (Table 2a). The presence of αoLH as an associated subnit did not lead to cross-reactive antibodies to human thyroid stimulating hormone (hTSH) and follicle stimulating hormone (hFSH) (Table 3a). The cross-reactivity with human leutinizing hormone (hLH) was of the order of 44 to 80% (Table 3a). Recent studies have demonstrated the lack of hazard of antibodies cross-reactive with LH after five years of hyper immunization. The cross-reactivity with LH was in fact beneficial and contributory to control of fertility. (Thau, R. B., Sundaram, K., Thornton, Y. S. and Seidman, L. S. (1979) "Fertil. and Steril.", 31, 200–204)

Reproductive Status

Immunized monkeys were mated continuously with males. The antifertility effect of these formulations and titers preventing pregnancy are given in Table 4. However, some animals shown in Table 5 became pregnant when the antibody titers were low.

Monkeys 92 and 94 immunized with the βoLH-TT-βhCG were mated 7 and 5 times respectively with males of proven fertility. Out of these 6 and 3 cycles were confirmed to be ovulatory by progesterone estimations. In the colony, continuous caging of bonnet female monkeys with males results in 70% of animals becoming pregnant in the first month and the remaining 30% in the following month. These immunized monkeys were thus apparently protected from becoming pregnant. The antibody titers during this period ranged from 80–800 ng/ml in these monkeys. Monkeys No. 88 and 89 became pregnant when the antibody titers were 35 and 4 ng/ml respectively. These observations are consistent with those of others and our own where fertility is observed to be regained in primates at low antibody titers.

In βoLH-TT immunized animals, monkey No. 106 was mated six times and all the six cycles were ovulatory. She did not conceive. The prevailing antibody titers in this monkey were between 60–200 ng/ml. Monkey No. 104 remained protected in three matings carried out during the period when antibody titers were 120–150 ng/ml. Monkey No. 105, 107 and 108 became pregnant at time points at which antibody titers were 120, 30 and 10 ng/ml respectively. It may be mentioned that the titers described are against hCG, their cross-reactivity with the bonnet CG is not known. The cross-reactivity of anti hCG antibodies with primate CG is usually of a lower order; in baboons it has been describe to be between 2 to 10%. The wide variation in primates of the amount of CG produced during pregnancy from animal to animal has also been reported (10–50 IU/ml).

Immunization with the more immunogenic conjugate (αoLH.βhCG)-TT of the present invention did not lead to disturbances in reproductive functions in four monkeys out of five which kept ovulating normally. Monkey No. 102 developed anovulatory cycles. It had however low antibody titers indicating that it was not related to immunization. Some control untreated monkeys maintained in captivity also become anovulatory. Two of the monkeys (Nos. 96 and 101), who to begin with were of proven fertility did not become pregnant in spite of repeated matings (6 and 3) respectively) with males having sired off-spring in the colony. The antibody titers during this period ranged in these monkeys from 400–2600 ng/ml. The fertility rate amongst untreated animals in the colony is between 50–75% depending on whether they are mated intermittently (day 9–14 of the cycle) or mated continuously. Monkey No. 99 became pregnant at 30 ng/ml antibody titer. Monkey No. 100 did not become pregnant on mating twice with males of proven fertility, the antibody titer during the period was between 200–360 ng/ml. It became pregnant when the antibody titer was 140 ng/ml. The titer described is against hCG and not mCG, which could not be determined due to non-availability of bonnet monkey CG.

Organ, Metabolic Functions and Tissue Auto Antibodies

All conjugates are well tolerated. No local reaction was noted at the site of injection. Acute and subacute toxicology studies revealed no side effects. No significant abnormality in metabolic and organ functions was observed in the hematological and clinical chemistry parameters determined at an interval of three months over a period of fifteen months. The antibodies were devoid of smooth muscle, parietal cell, thyroid, microsomal, thyroglobulin, antinuclear, anti-mitochondrial, anti-DNA, C-reactive protein, rheumatoid factor and anti-islets cell reactivity.

The case of low responders

In each formulation, 2 to 3 monkeys were relative low-responders. Additional booster injections with the same conjugate improved responsiveness to some extent. (FIG. **1**, **2** and **5**). An alternate carrier, cholera toxin B-chain was utilized to see whether the responsiveness of such monkeys could be improved. FIG. **5** gives the results of two monkeys immunized with the physical mixture of βoLH-TT and βhCG-TT. The peak titers after primary immunization in the monkey 113 and 112 were 10 ng/ml and 45 ng/ml respectively. A booster on day 145 with the same conjugate increased the titers to 60 ng/ml and 250 ng/ml. They were then immunized on day 431 and 479 with βhCG conjugated to cholera toxin-B chain which boosted the titers to 1340 ng/ml and 2800 ng/ml, hCG binding capacity. Similar observations were made for two low responders to βoLH-TT. The peak titers after 3 injections in the monkey 107 and 108 were 60 and 40 ng/m^1. A booster on day 145 with the same conjugate increased the titer to 900 ng/ml and 60 ng/ml respectively. They were immunized on day 431 and 479 with βhCG conjugated to cholera toxin B-chain which boosted the titers to 4000 and 2130 ng/ml hCG binding capacity.

Monkey No. 99 was a low responder to (αoLH.βhCG)-TT. Being given that the carrier would be mobilizing helper 'T' cell function, it could be hypothesised that the low titer in this animal could be

due to its low responsiveness to TT. However when the immunogen was conjugated to an alternate carrier, the B chain of cholera toxin (CHB), a boost in the anti-hCG response was noted. The animal had a peak titer of 80 ng/ml after the first three primary injections, an additional booster with the same carrier raised the antibody titer to 180 ng/ml (FIG. 8). On immunization with CHB as carrier, the titers reached 1700 ng/ml. Similar observations were made for low responders amongst monkeys immunized with βhCG-TT (FIG. 8).

The feasibility of controlling fertility with antibodies generated by βoLH has already been demonstrated in a variety of animal species including the subhuman primates. The procedure adopted however demanded the use of Freund's complete adjuvant (CFA). CFA is not permissible for human use. An eventual birth control vaccine based on this antigen would require an approach which can lead to the formation of enough antibodies without the use of CFA. Linkage of βoLH to tetanus toxoid (TT) has rendered it immunogenic in monkeys with a simple permissible adjuvant, aluminum hydroxide. Detoxified sodium phthalyl derivative of salmonella lipopolysaccharide (SPLPS) was employed in the first injection only. SPLPS has been used in clinical trials without adverse effects (Elin, R. J., Wolff, S. M., McAdam, K. P. W. J., Chedid, L., Audibert, F., Bernard, C. and Oberling, F.: Properties of reference *E. coli* endotoxin and its phthalylated derivative in humans. *J. Infect. Diseases* 144, 329, 1981.) The antibody response was of a fairly long duration (over a year) in good responders. High titer monkeys were protected against pregnancy during repeated matings with males of proven fertility. Fertility was regained at low titers. The antibodies reacted with both hCG and hLH but not with hTSH and hFSH.

hCG, a glycoproteinic hormone is composed of two subunits The association of the two subunits generates a conformation fitting optimally the receptors on the male and female steroid hormone-producing cells. Dissociation leads to a conformation with 400 fold reduced potency of stimulating steroido-genesis even though the βsubunit of hCG retains a residual form binding less well to the receptor and stimulating the hormonal response. (Ramakrishnan, S., Das, C. and Talwar, G. P. (1978) Biochemical Journal, 176, 599–602) It is thus clear that the biologically effective optimal conformation of the hormone results only on its association with the αsubunit. This conformation is important for inducing antibodies with optimal potential of neutralizing the bioactivity of this hormone.

The idea of annealing βhCG to βoLH was to generate the conformation optimally fitting into tissue receptors, which hopefully could induce conformational antibodies interfering with the hormone-target tissue interaction. Homologous αsubunit was not advisable as it would have led to the induction of antibodies cross-reactive with hFSH and hTSH, both of which contain a common αsubunit. The αsubunit of oLH on the other hand did not give cross-reactive antibodies to the human hormones. Surprisingly, annealing βhCG to αoLH gives rise to a receptor binding potency two times higher and steroidogenic potency three times higher than the homologous combine of the human hormonal subunits.

(αoLH.βhCG)-TT is a distinctively better immunogen than βhCG-TT in both rodents and bonnet monkeys. The increment in anti-hCG peak titers (geometric means) by the use of the new conjugate composition was of the order of 18 and 10 fold in rodents and monkeys respectively. This appears to be adequate for protection against pregnancy as judged by the limited fertility studies. The secretion of hCG starts in the preimplantation period as indicated by recent report on in vitro fertilized egg. hCG secreted by the embryo at 216 hours after fertilization was 3.8 mIU/ml requiring 0.4 ng/ml hCG binding capacity of antibodies, if the interception was to take place at the preimplantation stage. At the early post-implantation stage, hCG determined by specific βhCG radioimmunoassay at 4–4.5 weeks after LMP is reported to be 353±89 mIU/ml demanding 35 to 60 ng/ml of anti-hCG antibodies. Monkeys immunized with (αoLH.βhCG)-TT and having high antibody titers kept on ovulating with fertility setting in at 30–140 ng/ml of anti-hCG antibodies. Due note has to be taken of the low cross-reaction of hCG antibodies with primate CG.

The use of mixed carriers is beneficial to evoke good response in those subjects who are poor responders to a given carrier. CHB is a good supplement to TT. Other carriers such as hepatitis B and sporozoite coat protein of *P. falciparum* are also believed to be beneficial. The use of carriers with immunoprophylactic potential is in consonance with the original concept in design of the βhCG-TT vaccine, where attempt was made to align the response to a reproductive hormone with antibodies of immunoprophylactic benefit.

Immunization against fertility can also be effected by a polyvalent vaccine which includes a sperm antigen (such as LDH-C_4) used either as a carrier linked for example to βhCG as shown in Table 6, or used together with a carrier such as tetanus toxoid. Table 6 shows the reduced fertility in female mice when immunized with a vaccine of LDH-C_4 linked to βhCG.

TABLE 1

Cumulative antibody response above 60 ng hCG binding capacity per ml serum and its duration in monkeys immunized with βoLH-TT and βoLH-TT-hCG.

Monkey No.	Immunogen (No. of Injections)	Area under the Curve >60 ng/ml	Duration (weeks)
104	βoLH-TT	1575	35
105	(3)	900	11
106		550	20
Mean + SEM		1008 + 300	22 + 7
88	βoLH-TT-hCG	5470	28
92	(3)	16310	48
94		19580	58
Mean + SEM		13786 + 4269	43 + 7

TABLE 1a

Cumulative Antibody response above 60 ng hCG binding capacity per ml and its duration in monkeys immunized with (αoLH.βhCG)-TT and βhCG-TT

Monkey No.	Immunogen	Number of injections	Area under the curve >60 ng/ml	Duration (weeks)
82	βhCG-TT	4	2900	29
84		4	3850	30
87		4	4020	26

TABLE 1a-continued

Monkey No.	Immunogen	Number of injections	Area under the curve >60 ng/ml	Duration (weeks)
		Cumulative Antibody response above 60 ng hCG binding capacity per ml and its duration in monkeys immunized with (αoLH.βhCG)-TT and βhCG-TT		
Mean + SEM			3590 + 285	27 + 1
96	(αoLH.βhCG)-TT	3	41610	52
100		3	18820	52
101		3	19825	35
Mean + SEM			26752 + 6078	46 + 5

TABLE 2

Association constant (Ka) of anti-gonadotropin antibodies produced by βoLH-TT and βoLH-TT-βhCG

Monkey No.	Immunogen	Ka $M^{-1} \times 10^{-9}$
88	βoLH-TT-βhCG	7.0
89		5.0
92		26.9
94		63.0
104	βoLH-TT	31.0
105		22.8
106		9.0
107		6.3
108		10.6

Serum analysed on day 182 or 200 after the start of immunization.

TABLE 2a

Association contact (Ka) of anti-hCG antibodies produced by vaccine (αoLH.βhCG)-TT

Monkey Number	Association constant (Ka, $M^{-1} \times 10^{-9}$)
96	2.0
99	1.1
100	12.8
101	20.8
102	7.7

Serum analysed on day 200 after the start of immunization

TABLE 3

Reactivity of antigonadotropin sera with hLH, FSH and hTSH

Antiserum	Immunogen	% Specific binding with iodinated tracer hCG	hLH	hFSH	hTSH
Control with sera specific to various hormones		70	67	33	26
Monkey					
88	βoLH—TT—βhCG	37	26	0	0
89		22	15	0	0
92		51	33	0	0
93		18	15	0	0
94		47	35	0	0
Mean + SEM		35 + 6.5	25 + 4	0	0
104		12	12	0	0
105		19	13	0	0
106	βoLH—TT	20	13	0	0
107		11	11	0	0
108		13	11	0	0
Mean + SEM		15 + 2	12 + 0.5	0	0

The bleeds tested were of day 67 after primary immunization. Direct binding with radioiodinated hormones was determined with the serum samples at 1:200 final dilution.

$$\% \text{ specific binding} = \frac{(\text{Bound Counts} - \text{Non-specific counts})}{\text{Total Counts}} \times 100$$

TABLE 3a

Cross reactivity of anti-hCG sera generated by αoLH. βhCG—TT with human LH, FSH and TSH

Antiserum	% specific binding with iodinaed tracer hCG	hLH	hFSH	hTSH
Control (specific)	70	67	33	26
Monkey				
96	54	42	0	0
99	21	14	0	0
100	57	25	0	0
101	34	19	0	0
102	15	12	0	0
Mean + SEM	36 + 7	22 + 5	0	0

The bleeds tested were of day 67 after primary immunization. Direct binding with radioiodinated hormones was determined with serum samples at 1:200 final dilution.

$$\% \text{ specific binding} = \frac{(\text{Bound counts} - \text{Nonspecific counts})}{\text{counts}} \times 100 \text{ Total}$$

TABLE 4

Anti-hCG Titers Preventing Pregnancy

Monkey	Formulation	Cycles Mated	Anti-hCG titers ng/ml
92	βhCG-TT-βoLH	6	80–600
94	βhCG-TT-βoLH	3	110–800
96	(αoLH.βhCG)-TT	6	400–2600
101	(αoLH.βhCG)-TT	3	650–900
109	βhCG-TT + βoLH-TT	1	400

TABLE 5

Anti-hCG Titers Not Preventing Pregnancy

Monkey	Formulation	Anti-hCG Titers ng/ml
88	βhCG-TT-βoLH	35

TABLE 5-continued

Monkey	Anti-hCG Titers Not Preventing Pregnancy Formulation	Anti-hCG Titers ng/ml
89	βhCG-TT-βoLH	5
99	(αoLH.βhCG)-TT	30
100	(αoLH.βhCG)-TT	140
110	βhCG-TT + βoLH-TT	45
111	βhCG-TT + βoLH-TT	110
113	βhCG-TT + βoLH-TT	5

TABLE 6

Effect of Active Immunization of LDH-C_4 on the Fertility of BALB/c Mouse

Sex	Number of Animals	Antigen Adjuvant	Dose Route	Number of Immunization	First* Delivery	Second* Delivery
MALE	8	LDH-C_4	10 ug	2	7/8	8/8
		CFA, IFA	SC			(Vaginal plug positive)
FEMALE	9	LDH-C_4	10 ug	2	0/9	2/8
		CFA, IFA	SC			(Vaginal plug positive)

*Mating with non-immunized partners of proven fertility.

What I claim as my invention is:

1. A process for the preparation of a polyvalent vaccine which comprises the steps of:

(a) obtaining at least two seprate antigens of the rerproductive system, a first being a preparation of βsubunit of hCG and a second being a preparation of a sperm antigen or a heterospecies α or β subunit of LH,

(b) obtaining an immunologically pure preparation of at least one subject-compatible carrier,

(c) conjugating at least two antigens of step (a) with at least one carrier of step (b) by carrying out at least one step selected from the group consisting of

(i) forming a composite conjugate of at least two separate antigens linked to the same carrier moiety,

(ii) forming a physical mixture of conjugates of at least two separate antigens each separately linked to at least one carrier,

(iii) associating at least two separate antigens which are βsubunit of hCG and a heterospecies αsubunit to form an annealed composite and subsequently conjugating the annealed composite with a carrier, and,

(iv) forming a polyvalent conjugate of at least one antigen linked both to at least one sperm antigen and to at least one carrier, and,

(v) where more than one carrier is present, forming a conjugate of one of said antigens linked to a said carrier.

2. A process according to claim 1 wherein, in steps (i), (ii) and (v), said βhCG is present as an annealed composite with a heterospecies αsubunit.

3. A process according to claim 1, wherein one of said antigens is a sperm antigen.

4. A process according to claim 1, wherein more than one subject-compatible carrier is used.

5. A process according to claim 1, wherein said at least two separate antigens are hormonal subunits, or fragments thereof.

6. A process according to claim 1, wherein said at least two separate antigens are βoLH and βhCG.

7. A process according to claim 1, wherein two subject-compatible carriers are present.

8. A process according to claim 1, wherein said subject-compatible carrier is one or more members selected from the group consisting of tetanus toxoid, cholera toxin B-chain, hepatitis B surface protein, a malaria protein, diphtheria toxoid and sporozoite coat protein of *P. falciparum.*

9. A process according to claim 1, wherein tetanus toxoid and cholera toxin B-chain are present as carriers.

10. A process according to claim 1, wherein said polyvalent vaccine is mixed with an adjuvant selected from the group consisting of alum, detoxified sodium phthalyl derivative of salmonella lipopolysaccharide (SPLPS) and 6-o-dipalmitoyl-glyceryl-succinyl (MDP).

11. A process for the preparation of a polyvalent vaccine for a mammalian subject having a low antibody response to a single conjugate vaccine which comprises the steps of

(a) obtaining at least two separate antigens of the reproductive system, a first being a preparation of βsubunit hCG and a second being a preparation of a sperm antigen or heterospecies α or βsubunit of LH,

(b) obtaining an immunologically pure preparation of at least two subject-compatible carriers,

(c) conjugating at least two antigens of step (a) with at least one carrier of step (b) by carrying out at least one step selected from the group consisting of

(i) forming a composite conjugate of at least two separate antigens linked to the same carrier moiety,

(ii) forming a physical mixture of conjugates of at least two separate antigens separately linked to at least one of said carriers,

(iii) associating at least two separate antigens which are βsubunit of hCG and a said heterospecies αsubunit to form an annealed composite and subsequently conjugating the annealed conjugate with at least one of said carriers,

(iv) forming a polyvalent conjugate of at least one antigen linked both to at least one sperm antigen and to at least one carrier, and,

(v) forming a conjugate of one of said antigens linked to a carrier, and

(d) combining two or more conjugate products from steps (i) to (v) above.

12. A polyvalent birth control vaccine which comprises an effective amount of at least two antigens of the reproductive system with the proviso that in the case of homospecies antigens the antigens are specific to the reproductive system and at least one subject-compatible carrier said polyvalent vaccine being selected from the group consisting of:

(i) a composite conjugate of at least two separate antigens linked to the same carrier moiety

(ii) a mixture of conjugates of at least two separate antigens each separately linked to at least one carrier

(iii) an annealed composite of at least two separate antigens which are βsubunit of hCG and a heterospecies αsubunit; conjugated to a carrier,

(iv) a polyvalent conjugate of at least one antigen linked to sperm antigen and to at least one carrier, and,

(v) a mixture of at least two of (i) to (iv).

13. A polyvalent birth control vaccine which comprises an effective amount of at least two antigens of the reproductive system, a first being from a preparation of βsubunit of hCG and a second being a preparation of a sperm antigen or a heterospecies α or βsubunit of LH, and at least one subject-compatible carrier, said polyvalent vaccine being selected from the group consisting of:

(i) a composite conjugate of at least two separate antigens linked to the same carrier moiety

(ii) a mixture of conjugates of at least two separate antigens each separately linked to at least one carrier

(iii) an annealed composite of at least two separate antigens which are βsubunit of hCG and a heterospecies αsubunit; conjugated to a carrier,

(iv) a polyvalent conjugate of at least one antigen linked to sperm antigen and to at least one carrier, and,

(v) a mixture of at least two of (i) to (iv).

14. The polyvalent vaccine of claim **13** wherein in (i), (ii) and (v), said βhCG is present as an annealed composite with a heterospecies αsubunit.

15. The polyvalent vaccine of claim **13** wherein one of said antigens is a sperm antigen.

16. The polyvalent vaccine of claim **13** containing more than one subject-compatible carrier.

17. The polyvalent vaccine of claim **13** wherein at least two separate antigens are hormonal subunits, or fragments thereof.

18. The polyvalent vaccine of claim **13** wherein at least two separate antigens are βoLH and βhCG.

19. The polyvalent vaccine of claim **13** wherein two subject-compatible carriers are present.

20. The polyvalent vaccine of claim **13** wherein said subject compatible carrier is one or more members selected from the group consisting of tetanus toxoid, cholera toxin B-chain, hepatitis B surface protein, a malaria protein, diphtheria toxoid and sporozoite coat protein of *P. falciparum*.

21. The polyvalent vaccine of claim **13** wherein tetanus toxoid and cholera toxin B-chain are employed as carriers.

22. The polyvalent vaccine of claim **13** mixed with an adjuvant selected from the group consisting of alum, detoxified sodium phthalyl derivative of salmonella lipopolysaccharide (SPLPS) and 6-o-dipalmitoyl-glyceryl-succinyl (MDP).

23. The polyvalent vaccine of claim **13** comprising a mixture of at least one of αoLH.βhCG-TT and αoLH.βhCG-CHB with at least one of sperm antigen-CHB and sperm antigen-TT.

24. A method of birth control employing the polyvalent vaccine of claim **12** which comprises administering said vaccine to a female mammal at a dose and frequency sufficient to prevent pregnancy to term.

25. A method of birth control employing the polyvalent vaccine of claim **12** which comprises administering said vaccine to a female mammal at a dose and frequency sufficient to maintain an antibody titer to said vaccine of at least 60 ng/ml.

* * * * *

evidence of the use of pandemic flu to depopulate usa

http://www.scribd.com/doc/17044769/Evidence-of-the-Use-of-Pandemic-Flu-to-Depopulate-USA

BIOTERRORISM EVIDENCE

Evidence that an international corporate criminal syndicate, which has annexed high government office inside the United States, is intent on carrying out a mass genocide against the people of the United States by using an artificial (genetic) flu pandemic virus and a forced vaccination program
to cause mass death and injury and depopulate America in order to transfer control of the United States
to WHO, the UN and affiliated security forces (UN troops from countries such as China, Canada, the UK and Mexico etc).

Contents

I. Introduction: Summary of Claims

There is evidence that an international corporate criminal syndicate, which has annexed high government office at Federal and State level, is intent on carrying out a mass genocide against the people of the United States by using an artificial (genetic) flu pandemic virus and forced vaccine program to cause mass death and injury and depopulate America in order to transfer control of the United States to the United Nations and affiliated security forces (UN troops from countries such as China, Canada, the UK and Mexico).

There is proof many organisations – World Health Organisation, UN as well as vaccine companies such as Baxter and Novartis – are part of a single system under the control of a core criminal group, who give the strategic leadership, and who have also funded the development, manufacturing and release of artificial viruses in order to justify mass vaccinations with a bioweapon substance in order to eliminate the people of the USA, and so gain control of the assets, resources etc of North America.

The motivation for the crime is classical robbery followed by murder although the scale and method are new in history.

The core group sets its strategic goals and operative priorities in secret using committees such as the Trilateral Commission, and in person to person contact in the annual Bilderberg meeting. It can be identified as the "Illuminati", a mafia-like group with family dynasties at its center.

Speicfically, evidence is presented that Defendants President Barack Obama, President of the United States, David Nabarro, UN System Coordinator for Influenza, Margaret Chan, Director-General of World Health Organisation, Kathleen Sibelius, Secretary of Department of Health and Human Services (HHS), Secretary Janet Napolitano, the Department of Homeland Security, David de Rotschild, banker, David Rockefeller, banker, George Soros, banker, and Alois Stöger, Austrian Health Minister, among others, are part of this international corporate crimine syndicate which has, marching as one phalanx to carry out their plan of genocide, have developed, produced, stockpiled and used biological weapons to eliminate the population of the United States for financial and political gain.

Evidence is presented for contending that the defandants did conspire with each other and with others to devise, fund and participate in the final phase of the implementation of a covert international bioweapons program involving, among other entities, the pharmaceutical companies Baxter and Novartis, by first instructing for the bioenginneering and, then release of lethal biological agents, specifically, the so-called "bird flu" virus and, the "so-called" swine flu virus, in order to have a pretext to implement a forced mass vaccination programme, which will be the means for the administration of a toxic biological agent using the delivery system of an injection, so causing death and injury to the people of the United States in violation of the Biological Weapons Anti-Terrorism Act of 1989 (BWATA) passed into law in 1990, which extended the scope of bio-warfare materials regulation to include private individuals and non-state organizations, including corporations.

There is clear, verifiable and unambiguous proof that Baxter AG, Austrian subsidiary of Baxter International, based in Deerfield, Ill, deliberately, wilfully and knowingly, sent out 72 kilos of live bird flu virus as one the most deadly bioweapons and supplied by the World Health Organisation, Geneva, Switzerland in the winter of 2009 to 16 laboratories in four countries and so nearly triggered a pandemic.

There is strong evidence that this event was part of a covert biological warfare against the targeted US population by infiltrating a spectrum of organisations so that they actually march as one phalanx to carry out their plan of genocide.

The defendants have created, resourced and sustained a covert bioweapons system for purposes of mass murder with the help of the

- WHO
- EU
- National research labs such as the CDC
- Vaccine companies
- FEMA
- Homeland Security

These organisations are interacting with each other to develop and distribute biological weapons in secret.

They have leveraged funding through the banking system as well as through the drug trade they control.

They have leveraged technology to improve their capability to use biological agents to eliminate the population of the US by developing genetic viruses such as the bird flu and swine flu virus in labs.

They have developed vaccine companies to deliver the biological agents to the population through vaccines, which will be compulsory in the event of a pandemic.

They have positioned themselves to profit from any pandemic they themselves create by securing funding and lucrative contracts for “anti dote” vaccines with governments and international organisations such as WHO far in advance.

They have implemented an illegal and unconstitutional regulatory framework to compel people to accept mass vaccinations so that the people of America will not be allowed to refuse an untested vaccine and they will not be allowed to sue for compensation.

They have installed a covert infrastructure of genocide in the USA, including FEMA camps with incinerators and mass graves.

They have trained police and other security and health organisations such as Homeland Security and FEMA to carry out the programme of genocide, and to target American patriots calling for a return to the Constitution as terrorists.

They use organisations such as the CIA and the Freemasons, and means such as offshore bank accounts and blackmail, to carry out their covert plans.

They have made use of their control of the mainstream media to ensure that the people of America are given faulty information about the pandemic and so are more likely to accept the vaccines from the very same companies suspected of being involved in starting those same pandemics.

By eliminating the US population, they aim to acquire the resources and assets of the country at relatively little expense and without being held accountable because the programme of genocide is disguised as a necessary public health measure by the media and government agents they control.

They aim to introduce a new North American Union, including Canada and Mexico, under the authority of the Federal Reserve and patrolled by UN troops to maximise their political and economic control of the USA.

Specifically, evidence is presented that the vaccine company Baxter's Austrian subsidiary deliberately released live bird flu virus in February, 2009, nearly triggering a pandemic.

According to § 175 (a) of BWATA, there is extraterritorial Federal jurisdiction over an offense under this section committed by or against a national of the United States

The amount of material was 72 kilograms.

This material was sent to 16 labs in four countries under a false label.

The 72 kilos of live bird flu virus was destined for the seasonal flu vaccine.

The deadly mixture of live bird flu virus and human flu virus were mixed in a Biosecurity level 3 facility, where basic protocol and procedures would make it impossible to ever mix a live virus bioweapon with vaccine material by accident.

The mixture was a super-wide spectrum combination H3N2 seasonal flu viruses and live, unlabeled H5N1 viruses. If both strains were to incubate and recombine in a human host, a virus could mutate via "reassortment" into a virulent airborne weapon that would cause a pandemic.

The material was not radiated before it was sent out, leaving the deadly virus alive.

It was only detected when a lab member in a lab in the Czech Republic tested a portion on ferrets and these died.

Lab staff in Austria and the Czech Republic were subsequently given preventative treatment against the bird flu in hospitals in Vienna, Austria.

There is evidence the Austrian Health Minister is involved in a cover up because he sent a vet to examine the incident and Baxter was given a green light to continue as before.

WHO supplied the live bird flu virus which Baxter used in its 72 kilos of contaminated material.

WHO has supplied the funding, licences and regulatory framework for the development of the bird flu virus in labs and the "anti-dote" vaccine.

WHO has deliberately and systematically suppressed and manipulated scientific facts on the virus and vaccines to serve the interests of the international crime syndicate group.

WHO issues talking points and statements that are propagandist in style and designed to sway public opinion in favour of the vaccine.

WHO has rushed to declare a pandemic level 6 in disregard for the science in order to justify commandeering, together with the UN, national US government agencies and authorities, setting up a control center in the WHO Pandemic Control Room which has supercomputers linked to the UN.

WHO redefined "Pandemic" as "Widespread, spreading from human to human but not particularly dangerous" changing it from its previous definition of "widespread, rapidly spreading and very dangerous.

Legislation is in place which would require Americans to either submit to vaccination once a pandemic is declared by either the Secretary of Health and Human Services, the Governor of your State or both.

Refuse this vaccine and you will find yourself confined either as a felon without benefit of judge or jury if the offence is a State level one, or involuntarily incarcerated in Federal FEMA holding camps if the offence is a Federal one.

If you are in the US, entering or leaving the US at that time, will be to either submit to a weaponized substance being injected into our bodies or involuntary detention.

You will have no right to claim compensation in case of death or injury from the vaccination under special immunity laws.

WHO has rushed to give companies such as Baxter funding and contracts to develop the swine flu vaccine in spite of the fact that Baxter was mixed 72 kilos of live bird flu with human flu vaccine material in a BSL-3 facility, failed to radiate it and sent it out to 16 labs in four countries as for the seasonal flu vaccine material locations.

About eight weeks later, a genetically engineered virus for a worldwide interspecies flu pandemic breaks out close to Baxter's facilities in Mexico City and the same company is given contracts to produce vaccines for the outbreak.

Furthermore, Novartis, which caused the death of at least 21 homeless people in Poland due to their fully licensed bird flu vaccine has been awarded huge contracts by WHO and other governments.

The swine flu virus is an artificial, lab engineered and there is evidence it was released from a lab.

The vaccine for it will be produced in cell cultures that have been responsible for viruses such as AIDs.

Dangerous adjuvants such as squalene are to be added.

There is evidence that key members of the international criminal corporate syndicate discussed depopulation at their annual Bilderberg meeting in Greece attended by David Rockefeller.

The financial links between Illuminati crime gang members such as the Rockefellers and the Rothschilds and WHO, the UN and the EU as well as the banks that hold shares in vaccine companies, in media and in offshore banking appear to be extremely complex and need investigation by the appropriate law enforcement agencies.

II. Factual Background

1. Timeline *and facts that establish probbale cause*

A. The Model State Emergency Health Powers Act, the NATIONAL SECURITY PRESIDENTIAL DIRECTIVE/NSPD 51 and HOMELAND SECURITY PRESIDENTIAL DIRECTIVE/HSPD-20 and other laws.

1. NATIONAL SECURITY PRESIDENTIAL DIRECTIVE/NSPD 51 and HOMELAND SECURITY PRESIDENTIAL DIRECTIVE/HSPD-20 allows the governors in each state to suspend the government and law and, among other things, confiscate and destroy facilities and resources in the interest of the public health without compensation to the owners, per Article IV Section 402(a). The State Legislatures are barred from intervening for a period of 60 days.

2. Under the National Emergency Act, the President "may seize property, organize and control the means of production, seize commodities, assign military forces abroad, institute martial law, seize and control all transportation and communication, regulate the operation of private enterprise, restrict travel, and, in a variety of ways, control the lives of United States citizens."

3.. NSPD-51/ HSPD-20 have created the position of National Continuity Coordinator without any specific act of Congress authorizing the position.

4. NSPD-51/ HSPD-20 appears to negate any a requirement that the President submit to Congress a determination that a national emergency exists, suggesting instead that the powers of the executive order can be implemented without any congressional approval or oversight.
http://www.dhs.gov/xabout/laws/gc_1219263961449.shtm#1

5. The Model State Emergency Health Powers Act has been adopted in 38 States makes it a misdemeanor to a felony to refuse to take amandated vaccine.

6. Legislation would require Americans to either submit to vaccination once a Pandemic State is declared by either the Secretary of Health and Human Services, the Governor of your State or both.

Refuse this vaccine and you will find yourself confined either as a felon without benefit of judge or jury if the offense is a State level one, or involuntarily incarcerated in Federal FEMA holding camps if the offense is a Federal one.

Law enforcement officers are allowed to use deadly force against felony suspects.

If you are in the US, entering or leaving the US at that time, will be to either submit to a weaponized substance being injected into our bodies or involuntary detention.

7. The "Model State Emergency Heath Powers Act" allows the Government to seize and/or quarantine a town and all the people within it.

For the specific versions of that Act enacted in each individual state see

http://www.publicealthlaw.net/MSEHPA/MSEHPA%20Surveillance.pdf
(Model State Emergency Health Powers Act)
http://www.pandemicflu.gov/plan/states/stateplans.html

Once a town is quarantined, the government is allowed to seize all property and seize the rights of the people to resist government i.e. confiscating all civilian owned firearms.

8. People who suffer death or injury as a result of a government-mandated vaccine will be barred from seeking compensation under immunity provisions.

9. Section 63, Vaccination and Treatment of The Model State Emergency Health Powers Act, A Checklist of Issues, indicates those unwilling to submit to a vaccine will be subject to isolation or quarantine. http://www.ncsl.org/programs/health/modelact.pdf

10. Mandatory vaccine simulation drills are planned for at least three states including Texas, Ohio and Alaska. (Maloney, County plans to deal with unthinkable, 2009)
http://www.seguingazette.com/story.lasso?ewcd=7067c6003405a409

11. The Massachusetts Legislature is fast-tracking legislation for Martial Law and mandatory vaccines in response to the current „swine flu outbreak“. (AP, 2009)
http://news.bostonherald.com/news/politics/view/2009_04_28_Mass__Senate_approves_pandemic_flu_prep_bill/

12. Any physician or other health care provider who refuses to perform medical examination or vaccinations as directed shall be liable for delicensure and the inability to continue to practice in the State.

13. the Act criminalizes refusal of medical treatment, making citizens liable for a misdemeanor if they refuse mandatory vaccines, per Article V Section 504(b). The Act gives the public health authority the right to isolate or quarantine a person on an ex parte court order, with no hearing for at least 72 hours. If the public health authority decides that an unvaccinated person is a risk to others, even if uninfected, he could be quarantined, per Article V Section 503(e).

14. The Act removes the States accountability for harm or deaths resulting from mandatory vaccines citing the state immunity clause: "Neither the State, its political subdivisions, nor, except in cases of gross negligence or willful misconduct, the Governor, the public health authority, or any other State official referenced in this Act, is liable for the death of or any injury to persons, or damage to property, as a result of complying with or attempting to comply with this Act or any rule or regulations promulgated pursuant to this Act," per Article VIII Section 804.

15. President Bush announced a new International Partnership on Avian and Pandemic Influenza to a High-Level Plenary Meeting of the U.N. General Assembly, in New York on Sept. 14, 2005. The 2005 plan, operative until Bush announced the International Partnership on Avian and Pandemic Influenza, directed the State Department to work with the WHO and U.N.

http://www.hhs.gov/pandemicflu/plan/appendixh.html

16. The Security and Prosperity Partnership of North America Summit in Canada released a plan that establishes U.N. law along with regulations by the World Trade Organization and World Health Organization as supreme over U.S. law during a pandemic and sets the stage for militarizing the management of continental health emergencies.

17. the SPP plan gives primacy for avian and pandemic influenza management to plans developed by the WHO, WTO, U.N. and NAFTA directives – not to decisions made by U.S. agencies.

18. the U.S. Northern Command, or NORTHCOM, has created a web page dedicated to avian flu and has been running exercises in preparation for the possible use of U.S. military forces in a

continental domestic emergency involving avian flu or pandemic influenza.

19. All 194 nation-states (members of U.N.) had until June 2007 to implement the WHO revised International Health Regulations (IHR) -- revised in 2005, which included passage of legislation empowering state surveillance and monitoring of their citizens under the guise of a potential worldwide pandemic (smallpox, polio, SARS or human cases of new strains of influenza). Stockpiling specific vaccines and anti-viral medications are part of compliance with IHR.

20. The U.N.-WHO-WTO-NAFTA plan advanced by SPP features a prominent role for the U.N. system influenza coordinator as a central international director in the case of a North American avian flu or pandemic influenza outbreak.

21. in Sept. 2005, Dr. David Nabarro was appointed the first U.N. system influenza coordinator, a position which also places him as a senior policy adviser to the U.N. director-general. Nabarro joined the WHO in 1999 and was appointed WHO executive director of sustainable development and health environments in July 2002.

22. In a Sept. 29, 2005, press conference at the U.N., Nabarro made clear that his job was to prepare for the H5N1 virus, known as the avian flu.

He quantified the deaths he expected as follows: "I'm not, at the moment at liberty to give you a prediction on numbers, but I just want to stress, that, let's say, the range of deaths could be anything from 5 to 150 million."

23. The National Security and Homeland Security Presidential Directive, signed on May 9, 2007 declares that in the event of a “catastrophic event”, George W. Bush can become what is best described as "a dictator":

"The President shall lead the activities of the Federal Government for ensuring constitutional government."

This directive gives the White House unprecedented dictatorial power over the government and the country, bypassing the US Congress and obliterating the separation of powers. The directive also placed the Secretary of Homeland Security in charge of domestic “security”.

“(1) this directive establishes a comprehensive national policy on the continuity of Federal Government structures and operations and a single National Continuity Coordinator responsible for coordinating the development and implementation of Federal continuity policies. This policy establishes "National Essential Functions," prescribes continuity requirements for all executive departments and agencies, and provides guidance for State, local, territorial, and tribal governments, and private sector organizations in order to ensure a comprehensive and integrated national continuity program that will enhance the credibility of our national security posture and enable a more rapid and effective response to and recovery from a national emergency.

24.(b) "Catastrophic Emergency" means any incident, regardless of location, that results in extraordinary levels of mass casualties, damage, or disruption severely affecting the U.S. population, infrastructure, environment, economy, or government functions.“

B. World Health Organization (WHO) and U.N.

25. The World Health Organization (WHO) is a specialized agency of the United Nations (UN) that acts as a coordinating authority on international public health. Established on 7 April 1948, and headquartered in Geneva, Switzerland, the agency inherited the mandate and resources of its predecessor, the Health Organization, which had been an agency of the League of Nations.

26. The WHO's constitution states that its objective "is the attainment by all peoples of the highest possible level of health."

27. The WHO and UN will become the controlling agencies in the US in the event of a declared pandemic level 6.

28. The World Health Organization (WHO) has developed a global influenza preparedness plan, which defines the stages of a pandemic, outlines WHO's role and makes recommendations for national measures before and during a pandemic.

Phases

WHO Pandemic Influenza Phases (2009)[80]	
Phase	Description
Phase 1	No animal influenza virus circulating among animals have been reported to cause infection in humans.
Phase 2	An animal influenza virus circulating in domesticated or wild animals is known to have caused infection in humans and is therefore considered a specific potential pandemic threat.
Phase 3	An animal or human-animal influenza reassortant virus has caused sporadic cases or small clusters of disease in people, but has not resulted in human-to-human transmission sufficient to sustain community-level outbreaks.
Phase 4	Human to human transmission of an animal or human-animal influenza reassortant virus able to sustain community-level outbreaks has been verified.
Phase 5	Human-to-human spread of the virus in two or more countries in one WHO region.
Phase 6	In addition to the criteria defined in Phase 5, the same virus spreads from human-to-human in at least one other country in another WHO region.
Post peak period	Levels of pandemic influenza in most countries with adequate surveillance have dropped below peak levels.
Post	Levels of influenza activity have returned to the levels seen for seasonal influenza in

pandemic period	most countries with adequate surveillance.

29. "Efforts by the federal government to prepare for pandemic influenza at the national level include a $100 million DHHS initiative in 2003 to build U.S. vaccine production.

30. Several agencies within Department of Health and Human Services (DHHS) — including the Office of the Secretary, the Food and Drug Administration (FDA), CDC, and the National Institute of Allergy and Infectious Diseases (NIAID) — are in the process of working with vaccine manufacturers to facilitate production of pilot vaccine lots for both H5N1 and H9N2 strains as well as contracting for the manufacturing of 2 million doses of an H5N1 vaccine.

31. On October 27, 2005, the Department of Health and Human Services awarded a $62.5 million contract to Chiron Corporation to manufacture an avian influenza vaccine designed to protect against the H5N1 influenza virus strain. This followed a previous awarded $100 million contract to sanofi pasteur, the vaccines business of the sanofi-aventis Group, for avian flu vaccine.

32. According to The New York Times as of March 2006, "governments worldwide have spent billions planning for a potential influenza pandemic: buying medicines, running disaster drills, [and] developing strategies for tighter border controls" due to the H5N1 threat.[83]

33. In October 2005, President Bush urged bird flu vaccine manufacturers to increase their production.[94]

34. On November 1, 2005 President Bush submitted a request to Congress for $7.1 billion to begin implementing the National Strategy To Safeguard Against The Danger of Pandemic Influenza. The request includes $251 million to detect and contain outbreaks before they spread around the world; $2.8 billion to accelerate development of cell-culture technology; $800 million for development of new treatments and vaccines; $1.519 billion for the Departments of Health and Human Services (HHS) and Defense to purchase influenza vaccines; $1.029 billion to stockpile antiviral medications; and $644 million to ensure that all levels of government are prepared to respond to a pandemic outbreak.[96]

35. On 6 March 2006, Mike Leavitt, Secretary of Health and Human Services, said U.S. health agencies are continuing to develop vaccine alternatives that will protect against the evolving avian influenza virus.[97]

C. 2009 Swine flu outbreak

36. In March and April 2009, an outbreak of a new strain of influenza commonly referred to as "swine flu" infected many people in Mexico and other parts of the world.

37. The new strain was first diagnosed in two children by the CDC, first on April 14 in San Diego County, California and a few days later in nearby Imperial County, California.[78] Neither child had been in contact with pigs.

38. The outbreak was first detected in Mexico City, where surveillance began picking up a surge in cases of influenza-like illness (ILI) starting March 18.[80]

39. On April 18.[85] The Mexican cases were confirmed by the CDC and the World Health Organization to be a new strain of H1N1.[80][86]

40. Cases were also reported in the states of San Luis Potosí, Hidalgo, Querétaro and Mexico State.[87] Mexican Health Minister José Ángel Córdova on April 24, said "We're dealing with a new flu virus that constitutes a respiratory epidemic that so far is controllable."[87] Mexican news media speculate that the outbreak may have started in February near a Smithfield Foods pig plant amid complaints about its intensive farming practices,[88][89] although no pigs in Mexico have tested positive for the virus.[citation needed]

41. The first death from swine flu occurred on April 13, when a diabetic woman from Oaxaca died from respiratory complications.[91][92] The Mexican fatalities are alleged to be mainly young adults of 25 to 45.

42. Although by late April there had been reports of 152 "probable deaths"[94] in Mexico, the WHO had received reports of only 7 confirmed deaths as of April 29 and explicitly denied the larger figure.[95][96]

43. Mexico's Health Secretary declared that around 100 early suspected deaths from swine flu could not be confirmed because samples were not taken.[5]

44. Cases were first discovered in the U.S. and officials soon suspected a link between those incidents and an earlier outbreak of late-season flu cases in Mexico. Within days hundreds of suspected cases, some of them fatal, were discovered in Mexico, with yet more cases found in the U.S. and several other countries in the Northern Hemisphere. Soon thereafter, the U.N.'s World Health Organization (WHO), along with the U.S. Centers for Disease Control and Prevention (CDC), expressed concern that the A(H1N1) could become a worldwide flu pandemic, and WHO then raised its pandemic disease alert level to "Phase 5" out of the six maximum, as a "signal that a pandemic is at the imminent level".

45. According to a Summary of latest H1N1 developments in the United States by Alexander S Jones May 19, 2009

A) H1N1 may have killed an infant in New York who developed cyanosis with rapid progression to death. This is an ominous parallel to 1918. This suggests viral pneumonia, but we have no confirmation. Whether this is from the New York 'consensus strain' or a new recombinant, mutant, or reassortant is unknown at this time.

http://www.flutrackers.com/forum/showthread.php?t=105092
http://www.myfoxny.com/dpp/health/swine_flu/090519_second_possible_death_from_swine_flu_in_new_york_city

B) Dr. Niman has estimated there are currently 1 - 10 million infections in the United States. This matches my own assessment. With a case fatality rate of 0.1%, we can expect 1000 - 10000 deaths -- although it has become clear at this point the authorities are covering up the spread of the virus. With a case fatality rate of 0.4%, we can expect 4000 - 40000 deaths.

http://www.recombinomics.com/News/05180901/Swine_H1N1_Japan_6.html

C) H1N1 is rapidly spreading in schools. The articles I have pasted below are only the tip of the iceberg -- this is across the country at this point.

Lowell had 123 students call in sick Monday and sent another 71 home with fevers and other flu-like symptoms, the representative said

http://www.flutrackers.com/forum/showthread.php?t=105174
http://www.bizjournals.com/phoenix/stories/2009/05/18/daily24.html

The Dana Hall School in Wellesley has been shuttered for the next week after nearly 100 students and staff called in sick with fevers, sore throats, and other flu-like systems.

A spokeswoman for Dana Hall School in Wellesley said Tuesday there is no indication that swine flu is what prompted 90 students and eight faculty and staff members to call in sick on Monday, but the move was made after consulting with state and local public health officials.

A spokeswoman for the state Public Health Department says there are no confirmed swine flu cases at the school and no one associated with the school is being tested for the disease.

http://www.flutrackers.com/forum/showthread.php?p=235635#post235635
http://www.boston.com/yourtown/news/wellesley/2009/05/flu_closes_dana_hall_school_in.html
http://www.bostonherald.com/news/regional/view/2009_05_19_Wellesley_school_closes_after_rash_of_illnesses/srvc=home&position=recent
D) There has been a death from a possible lethal coinfection, a dangerous event suggesting worse is to come -- see the case of the death from pneumonia of an oil platform worker who tested positive for multiple strains of the flu.

Possible Swine Flu Death in Little Rock

Reported by: KARK 4 News

Monday, May 18, 2009

The death of a 28-year-old man in a Little Rock hospital over the weekend could be linked to the H1N1 virus better known as Swine Flu.

That's according to Pulaski County Coroner Garland Camper , who tells KARK 4 that the man's autopsy revealed he had suffered from more than one strain of flu. Camper calls that "somewhat unusual."

Camper says the man was an offshore oil worker who had been in the hospital with flu-like symptoms, and had reportedly been ill for weeks.

http://arkansasmatters.com/content/fulltext/news/?cid=222431

E) Data has become available from case studies in California , from H1N1 hospitalizations.

15/25 patients have lung infiltrates, almost half have vomiting... this is somewhat disturbing.

The best predictive symptoms based on this data are:

1) Fever (97%)
2) Cough (77%)

3) Lung infiltrates (60%)
4) Vomiting (46%)
5) Shortness of breath (43%)

#3 and #4 are unusual for influenza
http://www.flutrackers.com/forum/showthread.php?p=235601#post235601

F) An article in Science from last week estimated the H1N1 case fatality rate is 0.4% -- four times higher than seasonal flu.

http://www.eurekalert.org/pub_releases/2009-05/icl-sfe051109.php
G) The ER in New York has become overwhelmed with patients -- on Tuesday, seeing double the number of children who present with respiratory symptoms.

Alan D. Aviles, the president of the city's Health and Hospitals Corporation, said that emergency admissions were running about 50 percent higher than usual for adults and "more than 100 percent above average" for children.

http://www.flutrackers.com/forum/showpost.php?p=235577&postcount=23
http://cityroom.blogs.nytimes.com/2009/05/19/toddlers-death-stokes-flu-concerns/?hp

46. "The first case was seen in Mexico on April 13. The outbreak coincided with the President Barack Obama's trip to Mexico City on April 16. Obama was received at Mexico's anthropology museum in Mexico City by Felipe Solis, a distinguished archeologist who died the following day from symptoms similar to flu, Reforma newspaper reported. The newspaper didn't confirm if Solis had swine flu or not. "
http://www.bloomberg.com/apps/news?pid=20601087&sid=aEsNownABJ6Q&refer=worldwide

47. The Paris-based World Organization for Animal Health (OIE) said April 27th that virus currently circulating in Mexico and the United States and which has killed at least 20 people had never been found before in any animal and was completely new.
"The virus has not been isolated in animals to date. Therefore, it is not justified to name this disease swine flu," the OIE said in a press statement.
The virus "includes in its characteristics swine, avian and human virus components," the OIE said, and urged that it be called "North American influenza," after its geographic origin.
The OIE said it was "urgent" that scientific research be carried out to determine the susceptibility of animals to what it said was a "new virus."

48. The new strain is an apparent reassortment of four strains of influenza A virus subtype H1N1.[64] Analysis by the CDC identified the four component strains as one endemic in humans, one endemic in birds, and two endemic in pigs (swine).

49. Alexander S Jones, former employee the NIH, has analyzed the genome sequence of the virus and concluded we "must seriously consider a laboratory origin for this virus".

"BLAST sequence homology of 'swine flu' indicates both the Hemagglutinin

(HA) surface protein as well as the Non-structural (NS1) interferon

Inhibition proteins are novel recombinants previously unidentified in nature.

Both these influenza proteins, based on the genetic sequences released Friday May 1st by the U.S. Centers of Disease Control (CDC), share their closest genetic identity with turkey (avian) and pig (swine) strains from multiple continents including North America as well as Asia. Even the closest matches indicate 5% previously unidentified genetic material.

I submit this evidence, coupled with the lack of the presence of this virus at the pig farm near the proposed CDC's "patient zero" (a 5 year old from La Gloria, 80km away from the pig farm in Perote, Mexico), shows that the origin of the flu outbreak remains unidentified at this time, and cannot be ascribed to Mexican or North American swine.

Furthermore, I submit that since 5% of both these influenza A RNA sequences share no known homology in any public databases (in addition to the avian/swine hybrid nature of both these critical genes), that we must seriously consider a laboratory origin for this virus.

Future research that may be promising includes identifying critical SNPs, especially in the PB2 and the NS1 coding regions which may be markers for evolution of pathogen virulence, and should be closely monitored. The hemagglutinin protein should also be monitored for acquisition of a poly-basic amino acid site which would give the virus pantrophic properties as in the 1918 pandemic. "(Alexander S Jones)

50. The World Health Organization on May 11 said leading vaccine producers including Baxter, Novartis, GlaxoSmithKline and Sanofi-Aventis had requested "wild type virus" samples of the A (H1N1) or swine flu virus. MedImmune, which is now part of AstraZeneca, Baxter, CSL and Solvay are also being sent samples, as are smaller developers Microgen, Nobilon International, Omnivest Vaccines and Vivaldi. The WHO is co-coordinating scientific discussions over the virus, and has said that, within the next few weeks, it is likely to make a recommendation on whether and how to produce a pandemic vaccine.

51. Latest Pandemic Time Estimates, based on Los Alamos Flu Simulation
http://www.lanl.gov/news/images/bird4x3red.mov

by Alexander S Jones

*using baseline U.S. zero day of April 20th, 2009

Monday April 20 Day 1
Monday April 27 Day 7
Monday May 4 Day 14
Monday May 11 Day 21
Monday May 18 Day 28
Monday May 25 Day 35
Monday June 1 Day 42
Monday June 8 Day 49 <-- WHO Declares Phase 6 (by Day 53, aka by Friday June 12th)
Monday June 15 Day 56
Monday June 22 Day 63 <-- Cases Go Exponential (by Day 60, aka by Friday June 19th)
Monday June 29 Day 70
Monday July 6 Day 77
Monday July 13 Day 84
Tuesda July 14 Day 85
Wednes July 15 Day 86
Thursd July 16 Day 87 <-- Wave 1 Outbreak Peaks (by Day 87, aka by Thursday July 16th)

Wave 2 Outbreak Peaks at +90 days, so approx mid-October

52. The CDC announced on 10 Jun 2009 that in the event of a pandemic, flights would be rerouted to Miami International Airport and 18 other major U.S. airports, according to plans by the CDC. The U.S. Centers for Disease Control and Prevention has set up stand-by quarantine/screening facilities at the 19 airports to which all flights from affected countries would be diverted.

53. WHO Director-General Dr Margaret Chan announced that the World Health Organisation is raising its pandemic alert to phase 6 on Thursday, June 11th.

54. The WHO Pandemic Six level declaration entitles President Obama to impose martial law and deploy FEMA and the Department of Homeland Security "Pandemic Task Forces". Each State Governor will be notified that the provisions of the Model State Emergency Health Powers Act (MSEHPA) will be implemented. This means that all Americans must consent to mass vaccinations, or be guilty of a felony crime. The legal situation is that anyone who refuses the vaccine, and/or resists forced relocation to a prepared "quarantine compound", can "legally" be shot and killed because police are allowed to use „deadly fiorce“ against felony suspects.

III. Evidence the “swine flu“ vaccines are bioweapons

The “bird flu” has been classified by the United States government in its own export regulations as a biological weapon, and there are grounds for believing the “swine flu”, likewise, is a bioengineered virus and a component of a biological weapons system as defined by Section 175 (a) of BWATA designed, like the “bird flu”, to deliver toxins and microorganisms so as to deliberately inflict disease on death on people while being disguised as injections for prophylactic, protective, or other peaceful purposes.

Commerce Department regulations supplement listing pathogens whose vaccines are subject to export restrictions for countries classified as sponsors of terrorism (see pages 57-60, 70)
http://www.access.gpo.gov/bis/ear/pdf/ccl1.pdf

The United States bars the export of vaccines for the bird flu, smallpox, yellow fever, and many other pathogens to five countries classified as sponsors of terrorism.

Under Department of Commerce rules, a long list of vaccines for viruses, bacteria, and biological toxins cannot be exported to Cuba, Iran, North Korea, Sudan, and Syria unless they obtain a special export license, which can take weeks.

The list of pathogens subject to the rules includes viruses that cause dengue fever, Ebola fever, Marburg fever, Rift Valley fever, and monkeypox. A list of animal pathogens covered by the restrictions includes highly pathogenic bird flu viruses. Bacterial pathogens on the restricted list include anthrax and the microbes that cause tularemia and plague. Not on the list are the causes of common vaccine-preventable diseases, such as measles, mumps, rubella, chickenpox, and seasonal influenza.

The Associated Press reports that vaccines for bird flu are barred from being expoerted to nations classified as terrorist.

“Deep inside the *United States export regulations is a single sentence that bars U.S. exports of vaccines for avian bird flu and dozens of other viruses to five countries designated "state sponsors of terrorism."*

http://news.yahoo.com/s/ap/20081011/ap_on_re_as/as_bird_flu_biological_warfare;_ylt=An9WoLAijbbjeNwhYV6N98Ws0NUE
US controls bird flu vaccines over bioweapon fears
By ROBIN McDOWELL, Associated Press Writer Sat Oct 11, 7:14 AM ET
When Indonesia's health minister stopped sending bird flu viruses to a research laboratory in the U.S. for fear Washington could use them to make biological weapons, Defense Secretary Robert Gates laughed and called it "the nuttiest thing" he'd ever heard.
Yet deep inside an 86-page supplement to United States export regulations is a single sentence that bars U.S. exports of vaccines for avian bird flu and dozens of other viruses to five countries designated "state sponsors of terrorism."

The reason: Fear that they will be used for biological warfare.

So, the United States government views vaccines as tools of biological warfare, giving indirect confirmation to the fears of the Indonesian Health Minister.

Furthermore, Ex-HHS Secretary Mike O. Leavitt refused to provide BIRD FLU VACCINES created by contract with Sanofi-Pasteur to rogue "terrorist" nations like Iran, North Korea, and Syria solely because the VACCINE could be used as a "BIOLOGICAL WEAPON" by "terrorist nations". (See http://crooksandliars.com/node/23360/print)

Leavitt recently declared that a pandemic is "nature's terrorist". (See http://news.yahoo.com/s/ap/20090509/ap_on_he_me/med_swine_flu_pivotal_moments) and http://www.federalnewsradio.com/?nid=35&sid=1670164. Here we have ex-HHS secretary Leavitt, declaring that a pandemic is a useful form of "terrorism".

Since untested, untried, and potentially lethal "experimental vaccines" are restricted as "biological weapons" from distribution to "rogue nations", why even contemplate forcing the same "vaccine" onto American citizens?

The only purpose for forcing American citizens to take these vaccines can be to cause death and injury under the guise of employing them for peaceful purposes because these vaccines are according to the United States government's own regulations so dangerous they have to be kept out of the hands of "terrorist nations" for fear they might use them in a terrorist attack.

Any group of American, dual- American citizens or citizens of other countries who knowingly develops, produces, stockpiles, transfers, acquires, retains, or possesses any biological agent, toxin, or delivery system for use as a weapon against the people of Anerica, or knowingly assists a foreign state or any organization to do so, also employing deceit and fraudulent misrepresentation violates BWATA (see Attachment 1).

"Section 175: Prohibitions with respect to biological weapons
(a) IN GENERAL- Whoever knowingly develops, produces, stockpiles, transfers, acquires, retains, or possesses any biological agent, toxin, or delivery system for use as a weapon, or knowingly assists a foreign state or any organization to do so, shall be fined under this title or imprisoned for life or any term of years, or both. There is extraterritorial Federal jurisdiction over an offense under this section committed by or against a national of the United States."

The Act broadly defines several terms related to biological warfare of vector, toxin, biological agent and delivery system.

The "swine flu" virus fits the BWATA definition for classification as a bioweapon as:

any micro-organism, virus, infectious substance, or biological product that may be engineered as a result of biotechnology, or any naturally occurring or bioengineered component of any such microorganism, virus, infectious substance, or biological product, capable of causing death, disease, or other biological malfunction in a human, an animal, a plant, or another living organism; deterioration of food, water, equipment, supplies, or material of any kind or deleterious alteration of the environment

The "swine flu" has killed and injured people in the United States alone and so meets the BWATA of a toxin:

- "Toxin: "whatever its origin or method of production -- any poisonous substance produced by a living organism; or any poisonous isomer, homolog, or derivative of such a substance".

The forced injections of the population with toxins under guise of offering prophylactic treatment are the delivery system as defined by BWATA. The vaccination process itself will release a fully weaponized virus:

- “Delivery system: "any apparatus, equipment, device, or means of delivery specifically designed to deliver or disseminate a biological agent, toxin, or vector".

Constituting the vector as defined by BWATA are the people of the United States who will be injected by force en masse with disease producing microorganisms, and so allow the virus to mutate and develop into more lethal strains.

- “Vector: "a living organism capable of carrying a biological agent or toxin to a host".”

According to other sources, a top scientist for the United Nations, who has examined the outbreak of the deadly Ebola virus in Africa, as well as HIV/AIDS victims, has concluded that the current swine flu virus possesses certain transmission "vectors" that suggest the new strain has been genetically-manufactured as a military biological warfare weapon.

The UN expert believes that Ebola, HIV/AIDS, and the current A-H1N1 swine flu virus are biological warfare agents.

IV. Scientific evidence the “swine flu” virus is an artificial (genetic) virus.

Evidence comes from the Paris-based World Organization for Animal Health (OIE), which said on April 27th the virus currently circulating in Mexico and the United States and which has killed at least 20 people has never been found in any animal.

"The virus has not been isolated in animals to date. Therefore, it is not justified to name this disease swine flu," the OIE said in a press statement.

The virus "includes in its characteristics swine, avian and human virus components," the OIE said, and urged that it be called "North American influenza," after its geographic origin.

The OIE said it was "urgent" that scientific research be carried out to determine the susceptibility of animals to what it said was a "new virus."

Also, Adrian Gibbs, the Australian virologist, who was one of the first to analyze the genetic construction of the swine flu virus, and who was part of the team which developed anti-flu vaccines Tamiflu and Relenza, believes the disease - which has spread across the world in recent weeks – was made in laboratories.

Gibbs and two colleagues analyzed the publicly available sequences of hundreds of amino acids coded by each of the flu virus’s eight genes. He said he aims to submit his three-page paper today for publication in a medical journal.

The World Health Organization is investigating a claim by an Australian researcher that the swine flu virus circling the globe may have been created as a result of human error., according to a report on May 13 (Bloomberg) --

http://www.bloomberg.com/apps/news?pid=20601124&sid=aShZig0Cig4g.

Andrew Rambaut, a viral geneticist at the University of Edinburgh, has said: “The new neuraminidase gene that came in from Eurasian swine is one we’ve never before seen circulating in humans.”

“This is what we call a reassortment between two currently circulating pig flu viruses,” he said. “Why it’s emerged in humans is anyone’s guess. It hasn’t been seen before in pigs as far as I know.”

http://www.wired.co.uk/news/archive/2009-04/29/swine-flu-genes-from-pigs-alone.aspx

V. Scientific evidence the “swine flu” was bioengineered to resemble the Spanish flu virus of 1918.

Research scientist working on the recreation of the 1918 flu allege that the Spanish flu genetic material has been re-engineered to synthetically create what is now known as the A/H1N1 virus, or as the Centers for Disease Control (CDC) calls it, the “novel flu.”

The Spanish flu genetic material was obtained from the corpses of victims of the 1918 Spanish flu buried in the Artic permafrost.

http://onlinejournal.com/artman/publish/article_4724.shtml

The history of the synthetic H1N1 flu virus and a not-so-rosy future
By Wayne Madsen
Online Journal Contributing Writer
May 21, 2009, 00:20

http://www.waynemadsenreport.com/
(WMR) -- The history of the extraction of the genetic material from the corpses of victims of the 1918 Spanish influenza virus who were buried in Arctic permafrost is part “X-Files” and part “Jurassic Park.”

After an unsuccessful 1951 mission, that involved U.S. biological warfare specialists, to extract 1918 Spanish flu genetic material in 1951 from a cemetery in the Inupiat Eskimo village of Brevig Mission, Alaska, scientists made another attempt, a successful one it turns out, in 1997.

Dr True Ott has reported that the published definition of the swine flu by the NCSL is identical to Jeffrey Taubenbergers 1997 initial findings concerning the 1918 killer virus which he successfully resurrected 6 years later.

It easiest to explain this highly improbable match between the two viruses by assuming the „swine flu“ virus was deliberately, and systematically engineered to resemble the 1918 Spanish killer flu virus.

Dr Ott explains that Taubenberger’s initial 1997 report identified the 1918 killer virus as a “novel” (new) swine flu that “recombined” avian (H5N1) as well

as human (H3N2) virus fragments in its RNA structure.

Taubenberger, so Dr Ott argues as he reconstructs the events, then used a complex computer program to perfectly match the RNA and DNA structures, in order to replicate and "resurrect" the 1918 killer Spanish flu virus as a powerful biological weapon.

"SWINE FLU 2009" IS WEAPONIZED 1918 "SPANISH FLU"

By A. True Ott, PhD, ND

"The "Spanish" influenza pandemic killed at least 20 million people in 1918-1919, making it the worst infectious pandemic in history.
Understanding the origins of the 1918 virus and the basis for its exceptional virulence may aid in the prediction of future influenza pandemics. RNA from a victim of the 1918 pandemic was isolated from a formalin-fixed, paraffin-embedded, lung tissue sample. Nine fragments of viral RNA were sequenced from the coding regions of hemagglutinin, neuraminidase, nucleoprotein, matrix protein 1, and matrix protein
/2. The sequences are consistent with a novel H1N1 influenza A virus that belongs to the subgroup of strains that infect humans and swine, not the avian subgroup." /

/ /

SOURCE: Science Magazine Report, 21 March 1997, Dr. Jeffrey Taubenberger et. al. See
http://www.sciencemag.org/cgi/content/abstract/275/5307/179

Taubenberger's initial report identified the 1918 killer virus as a "novel" (new) swine flu that "recombined" avian (H5N1) as well as human (H3N2) virus fragments in its RNA structure. Taubenberger used a complex computer program to perfectly match the RNA and DNA structures, and then successfully replicated and "resurrected" the 1918 killer flu as a powerful biological weapon in 2003, 6 years later. Now, indeed as Taubenberger foresaw in 1997, evil and conspiring men in positions of high power can not only PREDICT FUTURE INFLUENZA PANDEMICS, but they can also UNLEASH THEM AT WILL from laboratory test tubes in order to achieve socio-economic agendas.

It should concern EVERY MAN, WOMAN, AND CHILD in America (as well as the entire world) that according to the World Health Organization (WHO) and the Centers for Disease Control (CDC) in Atlanta, Georgia, the so-called "Swine Flu" infecting and killing human beings in Mexico and North America this spring and summer, is *"a new subtype of the A/H1N1 not previously detected in swine or humans. This novel H1N1 influenza (swine flu) virus is a triple recombinant including gene segments of human, swine, and avian origin*." Source:
http://www.ncsl.org/?tabid=17089
(Interestingly, the National Council of State Legislatures (NCSL) is an unelected bureaucracy of policy-makers instigated and promulgated by Utah's Dixie Leavitt, the father of Mike O. Leavitt the PANDEMIC FLU GURU of the Bush administration.)

This published definition by the NCSL is IDENTICAL to Taubenberger's 1997 initial findings concerning the 1918 killer virus which he successfully resurrected 6 years later. Is this just a bizarre, meaningless coincidence? You decide.

The 1918 virus pandemic was the direct result of TYPHUS FEVER VACCINES injected into

millions of soldiers during the Great War (WW
I). John D. Rockefeller labs and factories in China produced these Typhus vaccines in 1916 by harvesting pus from infected humans, injecting the infectious matter into pig hosts, then mixing the harvested contaminants into chicken egg albumin to be injected into human hosts as a "vaccine".

Rockefeller, always a shrewd businessman, supplied both sides,
(German as well as Allied armies) with his toxic and lethal vaccine brew. Immediately after vaccination, many soldiers fell ill with what was called at the time "Para-Typhoid" infection --- i.e. nausea, vomiting, diarrhea, and killing pneumonia. Subsequent waves spread across the globe, killing as many as 50 million innocent souls worldwide. (Source: The Horrors of Vaccination – Higgins, 1921)

Only much later did the world's medical establishment wrongfully label and name the deadly recombinant virus accidentally spawned by Rockefeller's vaccine the "1918 Spanish Flu". Of course, Rockefeller's multi-billion dollar pharmaceutical empire could not
afford to label it what it really was: "Vaccine-Induced Disease of 1918".

Today, the stage is set for eugenics and genocide on a truly massive scale. The Taubenberger Frankenstein monster has been released and hundreds of millions of 1918 influenza vaccine serums have been produced.

It was an accident in 1918, however the subsequent cover-up is/was unconscionable. What is occurring now is inexcusable and criminal in the extreme.

Mother Nature does not "naturally" recombine bird, swine and three human influenza viruses. (Birds do not exchange bodily fluids with pigs and humans in un-natural sexual liaisons --- only sick, warped scientists can create such a monstrosity.)

Mexico's top government epidemiologist said Wednesday that it is "highly improbable" that a farm in the Mexican state of Veracruz operated by Smithfield Foods Inc. is responsible for the nation's swine-flu outbreak.

Miguel Ángel Lezana, the government's chief epidemiologist, said in an interview that pigs at the farm are from North America, while the genetic material in the virus is from Europe and Asia. http://online.wsj.com/article/SB124105320874371313.html

Dr Leonard Horowitz states in a 10.41 mins YouTube clip that the swine-bird-human flu strain in Mexico could have only come from Dr James S Robertson and colleagues because: "nobody else takes H5N1 Asian-flu infected chickens, brings them to Europe, extracts their DNA, combines their proteins with H1N1 viruses from the 1918 Spanish flu isolate, additionally mixes in some swine flu genes from pigs, then reverse engineers them to infect humans."

http://www.youtube.com/watch?v=GBeKB7aKzOs

In addition, Dr Horowitz indicates that there is hard evidence to show that Dr James Robertson believes it is OK to prime populations worldwide by releasing viruses he and his colleagues are creating in advance of a pandemic.

Dr Horowitz mentions the involvement of Dr Rick Bright who has ties to the WHO, the CDC and Novovax Inc, and is involved in PATH - Influenza Vaccine Project in the Vaccine Development Global Program.

VI. Genome sequence of the “swine flu”

An analysis of the “swine flu” genome sequence by Alexander S Jones indicates that 5% of both these influenza A RNA sequences share no known homology in any public databases (in addition to the avian/swine hybrid nature of both these critical genes), and so a laboratory origin for this virus must be seriously considered.

“Influenza A virus (A/Texas/04/2009(H1N1)) segment 8 nuclear export protein (NEP) and nonstructural protein 1 (NS1) genes, complete cds
http://www.ncbi.nlm.nih.gov/nuccore/FJ981620

==========

HA ("hemaglutinin") protein BLAST sequence homology
Accession
Description
Max score
Total score
Query coverage
E value
Max ident
Links

FJ981615.1
Influenza A virus (A/Texas/04/2009(H1N1)) segment 4 hemagglutinin (HA) gene, complete cds
3142 3142 100% 0.0 100%

FJ981612.1
Influenza A virus (A/Texas/04/2009(H1N1)) segment 4 hemagglutinin (HA) gene, complete cds
3142 3142 100% 0.0 100%

FJ966982.1
Influenza A virus (A/Texas/04/2009(H1N1)) segment 4 hemagglutinin (HA) gene, complete cds
3142 3142 100% 0.0 100%

FJ966959.1
Influenza A virus (A/Texas/05/2009(H1N1)) segment 4 hemagglutinin (HA) gene, complete cds
3142 3142 100% 0.0 100%

CY039527.1
Influenza A virus (A/Netherlands/602/2009(H1N1)) segment 4 sequence
3125 3125 99% 0.0 99%

FJ969511.1
Influenza A virus (A/California/10/2009(H1N1)) segment 4 hemagglutinin (HA) gene, complete cds
3125 3125 100% 0.0 99%

FJ966952.1
Influenza A virus (A/California/05/2009(H1N1)) segment 4 hemagglutinin (HA) gene, complete cds
3125 3125 100% 0.0 99%

FJ969509.1
Influenza A virus (A/New York/19/2009(H1N1)) segment 4 hemagglutinin (HA) gene, complete cds
3120 3120 100% 0.0 99%

FJ966960.1
Influenza A virus (A/California/06/2009(H1N1)) segment 4 hemagglutinin (HA) gene, complete cds
3120 3120 100% 0.0 99%

FJ981613.1
Influenza A virus (A/California/07/2009(H1N1)) segment 4 hemagglutinin (HA) gene, complete cds
3114 3114 100% 0.0 99%

FJ971076.1
Influenza A virus (A/California/08/2009(H1N1)) segment 4 hemagglutinin (HA) gene, complete cds
3114 3114 100% 0.0 99%

FJ966974.1
Influenza A virus (A/California/07/2009(H1N1)) segment 4 hemagglutinin (HA) gene, complete cds
3114 3114 100% 0.0 99%

FJ966082.1
Influenza A virus (A/California/04/2009(H1N1)) segment 4 hemagglutinin (HA) gene, complete cds
3109 3109 100% 0.0 99%

FJ969540.1

Influenza A virus (A/California/07/2009(H1N1)) segment 4 hemagglutinin (HA) gene, complete cds
3107 3107 100% 0.0 99%

FJ973557.1
Influenza A virus (A/Auckland/1/2009(H1N1)) segment 4 hemagglutinin (HA) gene, partial cds
2894 2894 92% 0.0 99%

AF455680.1
Influenza A virus (A/Swine/Indiana/P12439/00 (H1N2)) hemagglutinin (HA) gene, complete cds
2710 2710 100% 0.0 95%

AF250124.1
Influenza A virus (A/Swine/Indiana/9K035/99 (H1N2)) segment 4 hemagglutinin (HA) gene, complete cds
2699 2699 100% 0.0 95%

AY038014.1
Influenza A virus (A/Turkey/MO/24093/99(H1N2)) hemagglutinin (H1) gene, complete cds
2682 2682 100% 0.0 95%

EU139828.1
Influenza A virus (A/swine/Minnesota/1192/2001(H1N2)) hemagglutinin (HA) gene, complete cds
2676 2676 100% 0.0 95%

EF556201.1
Influenza A virus (A/swine/Guangxi/17/2005(H1N2)) hemagglutinin (HA) gene, complete cds
2665 2665 100% 0.0 94%

AF455675.1
Influenza A virus (A/Swine/Ohio/891/01(H1N2)) hemagglutinin (HA) gene, complete cds
2660 2660 100% 0.0 94%

FJ974021.1
Influenza A virus (A/Regensburg/Germany/01/2009(H1N1)) segment 4 hemagglutinin (HA) gene, partial cds
2656 2656 84% 0.0 99%

AY060047.1

Influenza A virus (A/SW/MN/23124-T/01(H1N2)) hemagglutinin (HA) gene, complete cds
2654 2654 100% 0.0 94%

AY060050.1
Influenza A virus (A/SW/MN/16419/01(H1N2)) hemagglutinin (HA) gene, complete cds
2643 2643 100% 0.0 94%

AY060048.1
Influenza A virus (A/SW/MN/23124-S/01(H1N2)) hemagglutinin (HA) gene, complete cds
2643 2643 100% 0.0 94%

AF455681.1
Influenza A virus (A/Swine/Illinois/100085A/01 (H1N2)) hemagglutinin (HA) gene, complete cds
2638 2638 100% 0.0 94%

EF556199.1
Influenza A virus (A/swine/Guangxi/13/2006(H1N2)) hemagglutinin (HA) gene, complete cds
2621 2621 100% 0.0 94%

AF455682.1
Influenza A virus (A/Swine/Illinois/100084/01 (H1N2)) hemagglutinin (HA) gene, complete cds
2621 2621 100% 0.0 94%

EU139830.1
Influenza A virus (A/swine/Minnesota/00194/2003(H1N2)) hemagglutinin (HA) gene, complete cds
2604 2604 100% 0.0 94%

EU139831.1
Influenza A virus (A/swine/Kansas/00246/2004(H1N2)) hemagglutinin (HA) gene, complete cds
2560 2560 100% 0.0 93%

EU604689.1
Influenza A virus (A/swine/OH/511445/2007(H1N1)) segment 4 hemagglutinin (HA) gene, complete cds
2555 2555 100% 0.0 93%

AF455677.1
Influenza A virus (A/Swine/North Carolina/93523/01 (H1N2))

hemagglutinin (HA) gene, complete cds
2534 2534 100% 0.0 93%

DQ666933.1
Influenza A virus (A/swine/Korea/S11/2005(H1N2)) segment 4 hemagglutinin gene, complete cds
2518 2518 99% 0.0 93%

EU798780.1
Influenza A virus (A/swine/Korea/Hongsong2/2004(H1N2)) segment 4 hemagglutinin (HA) gene, complete cds
2488 2488 99% 0.0 93%

EU798781.1
Influenza A virus (A/swine/Korea/JL01/2005(H1N2)) segment 4 hemagglutinin (HA) gene, complete cds
2486 2486 99% 0.0 93%

EU798784.1
Influenza A virus (A/swine/Korea/Asan04/2006(H1N2)) segment 4 hemagglutinin (HA) gene, complete cds
2481 2481 99% 0.0 93%

NS1 ("non-structural") protein BLAST sequence homology

Sequences producing significant alignments:
(Click headers to sort columns)
Accession Description Max score Total score Query coverage E value Max ident Links
FJ981620.1
Influenza A virus (A/Texas/04/2009(H1N1)) segment 8 nuclear export protein (NEP) and nonstructural protein 1 (NS1) genes, complete cds
1594 1594 100% 0.0 100%
FJ981611.1
Influenza A virus (A/Texas/05/2009(H1N1)) segment 8 nuclear export protein (NEP) and nonstructural protein 1 (NS1) genes, complete cds
1594 1594 100% 0.0 100%
FJ969538.1
Influenza A virus (A/California/07/2009(H1N1)) segment 8 nuclear export protein (NEP) and nonstructural protein 1 (NS1) genes, complete cds
1589 1589 100% 0.0 99%
FJ969533.1
Influenza A virus (A/California/08/2009(H1N1)) segment 8 nuclear export protein (NEP) and nonstructural protein 1 (NS1) genes, complete cds
1589 1589 100% 0.0 99%
FJ969528.1

Influenza A virus (A/California/07/2009(H1N1)) segment 8 nuclear export protein (NEP) and nonstructural protein 1 (NS1) genes, complete cds
1589 1589 100% 0.0 99%
FJ969519.1
Influenza A virus (A/California/08/2009(H1N1)) segment 8 nuclear export protein (NEP) and nonstructural protein 1 (NS1) genes, complete cds
1589 1589 100% 0.0 99%
FJ969514.1
Influenza A virus (A/California/04/2009(H1N1)) segment 8 nuclear export protein (NEP) and nonstructural protein 1 (NS1) genes, complete cds
1589 1589 100% 0.0 99%
FJ971074.1
Influenza A virus (A/California/06/2009(H1N1)) segment 8 nuclear export protein (NEP) and nonstructural protein 1 (NS1) genes, complete cds
1583 1583 100% 0.0 99%
FJ966966.1
Influenza A virus (A/Texas/05/2009(H1N1)) segment 8 nuclear export protein (NEP) and nonstructural protein 1 (NS1) genes, complete cds
1559 1559 97% 0.0 100%
FJ966086.1
Influenza A virus (A/California/04/2009(H1N1)) segment 8 nuclear export protein (NEP) and nonstructural protein 1 (NS1) genes, complete cds
1543 1543 97% 0.0 99%
EU735822.1
Influenza A virus (A/turkey/OH/313053/2004(H3N2)) nonstructural protein 2 (NS2) and nonstructural protein 1 (NS1) genes, complete cds
1395 1395 100% 0.0 95%
EF551057.1
Influenza A virus (A/swine/North Carolina/2003(H3N2)) nonstructural protein 2 (NS2) and nonstructural protein 1 (NS1) genes, complete cds
1389 1389 100% 0.0 95%
EF551049.1
Influenza A virus (A/turkey/Illinois/2004(H3N2)) nonstructural protein 2 (NS2) and nonstructural protein 1 (NS1) genes, complete cds
1389 1389 100% 0.0 95%
DQ150437.1
Influenza A virus (A/swine/IN/PU542/04 (H3N1)) nonstructural protein (NS1) gene, complete cds
1389 1389 100% 0.0 95%
AF153262.1
Influenza A virus (A/Swine/Minnesota/9088-2/98 (H3N2)) segment 8 NS1 and NS2 genes, complete cds
1386 1386 97% 0.0 96%
AF153261.1
Influenza A virus (A/Swine/Texas/4199-2/98 (H3N2)) segment 8 NS1 and NS2 genes, complete cds
1386 1386 97% 0.0 96%
AF342817.1
Influenza A virus (A/Wisconsin/10/98 (H1N1)) nonstructural protein 1

and nonstructural protein 2 genes, complete cds
1384 1384 100% 0.0 95%
DQ335775.1
Influenza A virus (A/turkey/Ohio/313053/04(H3N2)) nonstructural protein (NS) gene, complete cds
1384 1384 100% 0.0 95%
AF153263.1
Influenza A virus (A/Swine/Iowa/8548-1/98) segment 8 NS1 and NS2 genes, complete cds
1380 1380 97% 0.0 96%
EU697208.1
Influenza A virus (A/turkey/Minnesota/366767/2005(H3N2)) nonstructural protein 2 (NS2) and nonstructural protein 1 (NS1) genes, complete cds
1378 1378 100% 0.0 95%
EU735830.1
Influenza A virus (A/turkey/NC/353568/2005(H3N2)) nonstructural protein 2 (NS2) and nonstructural protein 1 (NS1) genes, complete cds
1378 1378 100% 0.0 95%
DQ150429.1
Influenza A virus (A/swine/MI/PU243/04 (H3N1)) nonstructural protein (NS1) gene, complete cds
1378 1378 100% 0.0 95%
EU697213.1
Influenza A virus (A/turkey/North Carolina/353568/2005(H3N2)) nonstructural protein 2 (NS2) and nonstructural protein 1 (NS1) genes, complete cds
1373 1373 100% 0.0 95%
AF250128.1
Influenza A virus (A/Swine/Indiana/9K035/99 (H1N2)) NS1 and NS2 genes, complete cds
1369 1369 97% 0.0 96%
AY038021.1
Influenza A virus (A/Turkey/MO/24093/99(H1N2)) nonstructural protein (NS) gene, complete cds, alternatively spliced
1363 1363 98% 0.0 95%
EU798872.1
Influenza A virus (A/swine/Korea/CAS09/2006(H3N2)) segment 8 nonstructural protein 2 (NS2) and nonstructural protein 1 (NS1) genes, complete cds
1360 1360 97% 0.0 95%
AY060136.1
Influenza A virus (A/SW/IN/14810-S/01(H1N2)) nonstructural protein (NS) gene, complete cds
1360 1360 97% 0.0 95%
AY060135.1
Influenza A virus (A/SW/IN/14810-T/01(H1N2)) nonstructural protein (NS) gene, complete cds
1360 1360 97% 0.0 95%
AY060129.1
Influenza A virus (A/SW/MN/3327/00(H1N2)) nonstructural protein (NS) gene, complete cds
1360 1360 97% 0.0 95%
AF455710.1
Influenza A virus (A/Swine/Minnesota/5“

Alexander S Jones concluded “we must seriously consider a laboratory origin for this virus” because 5% of both these influenza A RNA sequences share no known homology in any public databases.

“BLAST sequence homology of 'swine flu' indicates both the Hemagglutinin

(HA) surface protein as well as the Non-structural (NS1) interferon

Inhibition proteins are novel recombinants previously unidentified in nature.

Both these influenza proteins, based on the genetic sequences released Friday May 1st by the U.S. Centers of Disease Control (CDC), share their closest genetic identity with turkey (avian) and pig (swine) strains from multiple continents including North America as well as Asia. Even the closest matches indicate 5% previously unidentified genetic material.

I submit this evidence, coupled with the lack of the presence of this virus at the pig farm near the proposed CDC's "patient zero" (a 5 year old from La Gloria, 80km away from the pig farm in Perote, Mexico), shows that the origin of the flu outbreak remains unidentified at this time, and cannot be ascribed to Mexican or North American swine.

Furthermore, I submit that since 5% of both these influenza A RNA sequences share no known homology in any public databases (in addition to the avian/swine hybrid nature of both these critical genes), that we must seriously consider a laboratory origin for this virus.

Future research that may be promising includes identifying critical SNPs, especially in the PB2 and the NS1 coding regions which may be markers for evolution of pathogen virulence, and should be closely monitored. The hemagglutinin protein should also be monitored for acquisition of a poly-basic amino acid site which would give the virus pantrophic properties as in the 1918 pandemic. “(Alexander S Jones)

VII. Evidence as to the role of Baxter and WHO in producing and releasing pandemic virus material in Austria.

Baxter Pharmaceutical http://www.baxter.com/ has been chosen by the WHO to lead the efforts in finding a vaccine cure for the swine flu H1N1 virus.

Baxter AG, headquartered in Vienna, and the Austrian subsidiary of the pharmaceutical company Baxter International, headquartered in Deerfield, IL, USA, sent vaccine material contaminated with deadly live H5N1 bird flu virus to 16 laboratories in four countries in winter 2009 before a technician caught the mistake.

The deadly mixture of live bird flu virus and human flu virus were mixed in a biosecurity level 3 facility, where basic protocol and procedures would make it impossible to ever mix a live virus bioweapon with vaccine material by accident. In the first place, the strain of bird flu that is lethal to humans has no place in the the Baxter facility in Austria. So what was it doing in the facility designed for research into normal flu viruses and vaccines and their production to begin with?

The material released was a combination H3N2 seasonal flu viruses and live, unlabeled H5N1 viruses. If both strains were to incubate and recombine in a human host, a virulent airborne weapon that would cause a pandemic would be released, potentially killing billions.

The Baxter facility did not radiate the material before they sent it out, leaving the deadly virus alive.

To sum up,Baxter International, a global pharmaceutical corporation that has secured lucrative contracts to supply bird flu vaccines in pandemic, mixed live bird flu with human flu vaccine material in a Biosecurity level -3 facility, fail to radiate it and sent it under a false label to 16 labs as vaccine material.

About eight weeks later, a artitificial, genetic worldwide interspecies flu pandemic breaks out in Mexico City, close to another Baxter facility, and the same company is given government and WHO contracs to produce vaccines for the outbreak.

According to Austrian Health Minister Alois Stöger , 72 kilograms of vaccine material was contaminated with the live bird flu virus which WHO supplied.

http://www.parlament.gv.at/PG/DE/XXIV/AB/AB_01457/fnameorig_158854.html Parliamentary answers 1457/AB (XXIV. GP) May 20th, 2009,

Fragen 14 und 15:

Das für Forschungszwecke bestimmtes Material -72 kg waren als kontaminiert anzusehen - wurde in die Firma zurück geholt und kontrolliert vernichtet.“

It is still not clear how 72 kilograms of the world’s deadliest bioweapon can be sent by accident from a high biosecurity facilities, not irradiated and under a false label.

However, we know from Baxter itself that it produced the 72 kilograms contaminated material using a wild type live bird flu virus obtained from the WHO reference center.

http://www.promedmail.org/pls/otn/f?p=2400:1001:53103::NO::F2400_P1001_BACK_PAGE,F2400_P1001_PUB_MAIL_ID:10001,76322

„A statement on behalf of Baxter

I would like to provide the following update to a posting on ProMED dated 25 Feb 2009 (Avian influenza, accidental distribution - Czech Rep. ex Austria: RFI).

The H5N1 strain was the A/Vietnam/1203/2004 strain, received from a WHO reference centre. All information concerning this incident has been provided to the involved national authorities and appropriate international bodies such as ECDC and WHO.

--
Christopher Bona
Director, Global BioScience Communications

Corporate Communications
Baxter International Inc.
One Baxter Parkway
Deerfield, IL 60015
<christopher_bona@baxter.com>

Also, Baxter is the only flu vaccine manufacturer to work with wild type flu viruses, felt to be more dangerous than the altered and attenuated (weakened) viruses other manufacturers use.

http://chealth.canoe.ca/channel_health_news_details.asp?news_id=27436&news_channel_id=1020&channel_id=1020

The Austrian police have launched an investigation into the incident that almost triggered a global pandemic. The mixture of the deadly H5N1 virus with a mix of H3N2 seasonal flu viruses is classified as one of the most deadly bioweapons in the world with a mortality rate of 63 per cent.

So, with the Baxter incident in Austria, there is proof that Baxter not only created flu material with help from WHO, but also distributed them in large quantities to trigger a pandemic, while also positioning themselves to produce the vaccine allegedly to "protect" against the virus they created and released.

In criminal charges filed against Baxter on April 8th, 2009 at the Vienna City Prosecutor's office, Landesgerichtstr 11, 1080 Vienna, Austria, it was alleged that Baxter unlawfully, wilfully and knowingly, in the period between December 2008 and February 2009, employed manipulative and deceptive devices and contrivances in violation of national and international laws on the manufacturing, possession, release and dissemination of biological weapons of mass destruction and on organised crime, to manufacture and distribute a biological agent that is classified as a bioweapon among the population in order to profit from the pandemic.

First, Baxter manufactured influenza material contaminated with a bird flu virus in its biomedical research laboratories in Orth on the Danube in December 2008.

Baxter uses BSL 3 (Biosafety Level 3) precautions in its laboratories, a system for the safe-handling of toxic substances, which makes an accidental contamination of ordinary flu material with the dangerous bird flu virus virtually impossible.

The 72 kilograms of contaminated vaccine material contained a mixture of a seasonal H3N2 human influenza virus and the deadly bird flu H5N1 virus. By adding a virus of the type H5N1 to an ordinary flu virus of the type H3N2, The H5N1 virus is restricted in its human-to-human transmissibility, especially because it is less airborne. However, when it is combined with seasonal flu viruses, which are airborne and easily spread, a new bioweapon is created.

Second, Baxter distributed via Avir this contaminated vaccines using false concealment and a false label to 16 laboratories in Austria and in other countries at the end of January/beginning of February, potentially infecting at least 36-37 laboratory staff, who had had to be treated preventively for bird flu and ordinary flu in hospital.

A total of 18 laboratory staff belonging to Avir had to undergo preventative treatment for the bird flu and ordinary flu at the Otto Wagner Hospital in Vienna on February, 9th, 2009, because of their exposure as part of their work to the highly pathogenic bird flu virus.

This indicates that, in the opinion of medical experts, there was a risk that the staff of Avir had contracted bird flu, and, unknowingly, acted as carriers of a pandemic virus into the population of a densely built up Vienna city district and in wintertime.

The material was only discovered when staff working for BioTest (in Konarovice in the Czech Republic), tested the vaccination on ferrets, who then died.

BiotTst was supposed to test anti-flu vaccination that should serve Europeans during the next flu season, and the labels on the material sent to them from Baxter via Avir gave no indication of the lethal contents.

The 13 BioTest staff were treated with Tamiflu and were placed in quarantine for fear they had been contaminated with the bird flu virus, which is on the list of the possible biological weapons and one of the most dangerous biological agents on the Earth with more than 60% death rate.

Subsequently the same problem of Baxter contaminated vaccine material was found in the laboratories in Slovenia, Austria and Germany, who had received the material from Baxter.

First, the company Baxter evoked the 'trade secret" and refused to explain how exactly how a Level 3 biological warfare pathogen found its way into H3N2 material, regardless whether or not this experimental vaccine material was 'intended' for eventual use in humans or not.

Baxter representatives have said that the material sent to the Czech republic, Austria, Slovenia and Germany was in fact a pure H5N1 sent by accident - maybe to mask the previous assumption, that it was in fact an ordinary flu vaccine, which was contaminated. It is still not clear whether it was in fact the pure H5N1 or contaminated vaccine.

The Austrian Health Minister Alois Stöger confirmed on May 20th 2009 that the 72 kilograms of contaminated vaccine material has been destroyed, but no information has been released as to the genetic sequences of the contaminated material or what Clade was Baxter's H5N1 vaccine from, whether from Clade 1? Clade 2? Clade 3? Other?

Therefore, it is not possible to know whether H5N1 resembles the strains circulating in waterfowl.

Was the contaminated H5N1 strain genetically engineered? If so, by whom? Does the NS protein in Baxter's H5N1 material contain polymorphisms which suppress human interferon production? Was Baxter's H5N1 a full set of influenza genes? Or was it just the hemaglutanin and neuraminidase? Did Baxter's H5N1 contain a poly-basic cleavage site on the Hemaglutanin surface protein? Why were the samples of experimental vaccine material not irradiated?

Coinfection of H5N1 and H3N2 would not produce simple reassortment but a complex in vivo recombination of many competing strains in the infected host.

Furthermore the complex coinfection of H5N1 and H3N2 in a human would produce natural selection pressure for maximum virulence.

The book "Evolutionary Dynamics" suggest that viral coinfection selects for both maximum virulence and infectivity.

How close the world came to a pandemic is underlined by the reaction of Panasonic Japan.

On February 9th – on the very same day as 18 employees of Avir were given preventative treatment for the bird flu in the Otto Wagner Hospital in Vienna – AFP reported that Panasonic

Japan intended to bring back to Japan the families of many of its staff working around the world because of the threat of a bird flu pandemic.

“Panasonic to fly home workers’ families over bird flu fears
Feb 9, 2009

TOKYO (AFP) — Panasonic Corp. has ordered Japanese employees in some foreign countries to send their families home to Japan in preparation for a possible bird flu pandemic, a spokesman said Tuesday.”

The firm decided to take the rare measure “well ahead of possible confusion at the outbreak of a global pandemic,” he said.

The Times of India reported on March 6th, 2009, that a pandemic was nearly triggered as a result of Baxter’s actions. http://timesofindia.indiatimes.com/Health--Science/Science/Virus-mix-up-by-lab-could-have-resulted-in-pandemic/articleshow/4230882.cms

“It's emerged that virulent H5N1 bird flu was sent out by accident from an Austrian lab last year and given to ferrets in the Czech Republic before
anyone realised. As well as the risk of it escaping into the wild, the H5N1 got mixed with a human strain, which might have spawned a hybrid that could unleash a pandemic.

Last December, the Austrian branch of US vaccine company Baxter sent a batch of ordinary human H3N2 flu, altered so it couldn't replicate, to Avir Green Hills Biotechnology, also in Austria. In February, a lab in the Czech Republic working for Avir alerted Baxter that, ferrets inoculated with the sample had died. It turned out the sample contained live H5N1, which Baxter uses to make vaccine. The two seem to have been mixed in error.

Markus Reinhard of Baxter says no one was infected because the H3N2 was handled at a high level of containment. But Ab Osterhaus of Erasmus University in the Netherlands says: "We need to go to great lengths to make sure this kind of thing doesn't happen."

Accidental release of a mixture of live H5N1 and H3N2 viruses could have resulted in dire consequences.“

It needs to be stressed that the bird flu virus was developed in US military laboratories from 1995 onwards by researchers who reconstructed the genetic code of the Spanish Flu pandemic virus of 1918-1919.

So, using the argument that they need to find an antidote to the lethal bird flu virus, researchers have actually resurrected this lethal bird flu virus and created the danger in the first place, and with funds provided by organisations such as WHO.

“Reviving the Spanish Flu virus is a recipe for a catastrophe. It could put any attack using anthrax or the plague in the shade, “ said Jan van Aken, head of the German section of the Sunshine Project.

In the summer of 2008, US researchers found that this newly reconstructed lethal bird flu virus could be mixed with ordinary human flu virus in laboratory conditions and so, in theory, could acquire easy human-to-human transmissibility.

It was precisely this very virus, a mix of a lethal H5N1 bird flu virus and an ordinary human flu H3N2 virus that Baxter manufactured in its laboratory in Orth/Donau in December 2008, and then

distributed via Avir to 16 laboratories in Austria and abroad employing fraudulent misrepresentation.

The Canadian Press explains the issue:

“While H5N1 doesn’t easily infect people, H3N2 viruses do. If someone exposed to a mixture of the two had been simultaneously infected with both strains, he or she could have served as an incubator for a hybrid virus able to transmit easily to and among people.“

According to media reports, Dr Rebecca Carley maintained in March 2009 that this was a deliberate attempt to start a pandemic.

“Basically, they’re trying to cause the pandemic. They have already stockpiled at least 250 million doses of the bird flu vaccine. The shelf life of that vaccine has a certain amount of time by which they’ll have to throw it in the garbage. So they have to start the pandemic so that they can give the vaccines, which will then cause the bird flu pandemic…In fact, this is an associated press article that says that our government is reluctant to give bird flu vaccine to some of the rogue nations for fear they will use the vaccine as biological warfare. So when you actually look at what’s out there, folks, it becomes crystal clear. This is genocide. This is population reduction. And it’s happening right now. “

“Well, let me also state that this is very intentional because the H5N1 bird flu virus is not actually able to be picked up by humans in a regular scenario. So by putting it with a regular human flu, they’re intentionally causing it to create a hybrid virus. And this is how they’re going to make the bird flu virus be contracted by the people because it’s very virulent. And basically, the scenario that it creates is very disturbing. You actually bleed out into your lungs and suffocate on your own blood. “

VIII. Evidence Baxter is an element in a covert bioweapons network.

There are grounds for believing the specific production system which Baxter has developed with help of US government bodies for producing a human vaccination to the bird flu — namely, the use of 1,200 liter bioreactors and vero cell technology – could meet the technical criteria to be classified as a secret dual purpose large-scale bioweapon production facility in as far as the production process would allow a huge amount of contaminated vaccine material to be produced rapidly.

Grounds for believing Baxter is involved in any "Special Access Programs" , as defined by Congress, including 'waived', 'unacknowledged' 'waived' Special Access Programs (also known as 'black programs'), include Baxter’s application for a patent for a bioengineered bird flu virus designed to be more lethal Application number: 10/547155, Publication number: US 2007/0134270.

Vero cells, a continuous cell line derived from epithelial cells of the African green monkey kidney used to make live polio vaccines and also to promote the spread of AIDS, can be used to grow huge amounts of virus in weeks, so allowing organisations such as WHO and Baxter to grow 72 kilos o bird flu virus rapidly and easily for distribution.

Green monkeys are used in medical research.

http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=1... concerns viruses in African green monkeys.

http://www.pubmedcentral.nih.gov/articlerender.fcgi?artid=190510&rendertype=abst... states that kidney cells of green monkeys can be used as hosts to cultivate influenza viruses.

http://www.ippl.org/Jasmine.htm states that monkeys can carry diseases that can make humans sick or, at worse, can kill them. Monkeys can catch most human diseases.
http://www.sfbr.org/pages/news_release_detail.php?id=47 concerns work by Jonathan Allan to determine the link between African green monkeys and AIDS. Over 50% of the monkeys carry SIV – the simian version of HIV – yet never develop the disease.

If contaminated material were added to the 1,200 liter bioreactors, it would replicate and infect the entire batch of vaccine material in the 1,200 liter tank turning a vaccine into a bioweapon.

Contaminated material could be distributed among sections of the population using false labels and secretly marked batches and so infect millions of people in a way as to delay the reaction or over two doses.

Such vaccine material would kill thousands if not hundreds of thousands of people under the cover of a prophylactic measure against a pandemic created by, and spread, by Baxter.

Imagine the potential for disaster if even one batch was infected and distributed to thousands, if not hundreds of thousands of people, who would not only become ill themselves but also act as incubators of a new more lethal virus.

At the same time, the media – controlled by the organised crime syndicate – would so explain the story as to suggest that the deaths came from a naturally occurring virulent virus and the deaths happened in spite of the injections.

Vaccinations are needed to upgrade the “swine flu” bridge virus to the more lethal “bird flu” virus if the international crime syndicate is to achieve its goal of a drastic reduction in the world population with a parallel consolidation of geopolitical power.

There is evidence the bioweapons programs are 'international' in scope with funding coming from the US government, WHO, the UN and also banks.

There are reasonable grounds for believing there are financial and social connections with the incoming administration as Baxter because its executives are based near Chicago, the political base of President Obama, and Baxter has contributed to political parties.

It is clear that Baxter stands to benefit financially from the outbreak of a pandemic through a contaminated season influenza vaccine in late 2009, and that the shareholders will profit directly from this boost.

It has been reported that President Obama holds shares in Baxter.

Certainly, Baxter is guaranteed substantial direct profits from their triggering a bird flu pandemic from their contract sealed in 2006 with the Austrian Health Ministry, led by then Health Minister Maria Rauch-Kallat, to supply 16 million vaccine shots in the event of a bird flu pandemic being declared in Austria alone.

Baxter also has the contract to supply the swine flu vaccine for the Austrian government in spite of its role in releasing pandemic material this winter.

Baxter has contracts with WHO to supply huge quantities of vaccines.

However, upfront profits from sales of vaccines are just one part of the profit that the organised corporate crime syndicate, comprised also of banks, will obtain as mentioned.

If millions, if not billions, of people were to die as a result of a pandemic virus and/or contaminated inoculations, then their assets, their savings, their houses, apartments, farms and companies would be easy to acquire by a crime syndicate that has infiltrated and annexed key government offices.

Baxter Officers

„Baxter officers in Austria:

Two Baxter officers associated with Baxter's Austria location where the 72 kilos of pandemic bird flu was released, are Noel Barrett and Hartmut Ehrlich. Barret and Erlich were part of the Baxter H5N1 Pandemic Influenza Vaccine Clinical Study Team that published A Clinical Trial of a Whole-Virus H5N1 Vaccine Derived Cell Culture. The vaccine was called Celvapan.

Dr. Noel Barrett
Vice President, Global R&D Vaccines
Baxter AG

Dr. Barrett is Vice-Presdent R&D, Vaccines in the Bioscience Division of Baxter Healthcare. He received his Ph.D. in Virology at Trinity College, Dublin in 1979 and subsequently held a post-doctoral fellowship for four years at the University of Würzburg in Germany. He is presently responsible for overseeing the development of a range of viral and bacterial vaccines.

Here is an audio interview with Noel Barrett about "The vaccine-making industry's efforts to combat the bird flu around the world." Of course, Barrett, Baxter and the rest of the vaccine industry would love nothing more than for a bird flu outbreak to occur. Alan Watt points out that the current flu scare is just another example of how we truly live in an age of crisis creation. It's not just to control the public via problem-reaction-solution. Crisis creation is also a great way to make huge profits. Fear has always been a fantastic sales mechanism for the elite. The current flu hype and panic means fantastic business for Baxter, and they're already cashing in on millions and millions of taxpayer dollars.

Barrett is a member of the World Vaccine Council and spoke at the council's 2006 conference in Lyon, France, which took place from October 9-11, 2006. What is it about the dates 9 and 11 and this globalist cabal? It's like an Illumiati gang sign they can't stop flashing down through history. I guess its also just a coincidence that the 'swine' flu outbreak of 2009 occurred 91 years after the 1918 pandemic?

Part of the program for the conference at Lyon included the topic of "Avian flu and influenza: the real situation" and Dr. Barrett gave a presentation on the topic of "The development of a vero cell derived candidate H5N1 vaccine." Vero-cell technology allows Baxter to produce vaccines much

faster than the traditional egg based process which uses putrid chicken eggs to grow the viral culture. With vero-cell technology, viruses are placed in in large fermenting tanks with chemicals, heavy metals ("accelerants"), and pulverized monkey kidneys. By not relying on the old system of using millions of eggs to make flu vaccines, Baxter claims it can cut vaccine production time in half, to as little as 12 weeks. It's also interesting to note that the WHO countered Dr. Gibbs' claim that the flu probably came from a laboratory by disputing that there is enough evidence of the traditional egg based laboratory process. News flash for the WHO: Baxter's Vero-cell technology doesn't require any eggs.

Dr Hartmut Ehrlich
Vice President for Global Clinical Research and Development
Baxter scientist since 1995

Hartmuch Ehrlich is a hemophilia specialist who began at Baxter in 1995. In 1996, Bayer AG and Baxter were discovered to have knowingly shipped out millions of ampules of HIV contaminated Factor VIII--a hemophiliac drug--which resulted in the infections and deaths of many thousands of people.

Ehrlich completed his Doctorate at the Clinical Research Unit for Blood Coagulation and Thrombosis of the Max Planck Foundation, and conducted research at the Kerckhoff-Clinic of the Max Planck Foundation. It's worth noting that what is known today as the Max Planck Foundation actually began as the The Kaiser Wilhem Institute. Founded in 1911, The Kaiser Wilhelm Institute was funded by the Rockefeller Foundation and was the headquarters for Nazi research into eugenics, euthanasia, population control, genetic engineering, and biological warfare.
Max Planck (1898-1947)

Known primarily as the German physicist who originated quantum theory, Max Planck was made president of the Kaiser Wilhelm Institute in 1930. At the end of WW II, the Institute was moved and renamed the Max Planck Institute in order to cover up its unsavory past. Einstein never forgave Planck for not being more critical of the Nazis.

After finishing his studies at the Max Planck Institute, Ehrlich joined Baxter in 1995 as Medical Director for its Biotech business, and held several positions of increasing responsibility until September 2003 when he was named Vice President, Global Clinical R&D for the BioScience Division. In September of 2006, he was promoted to his current position, leading all R&D efforts for BioScience. Ehrlich, along with Barrett, helped develop Baxter's bird flu vaccine Celvapan, and helped secure an agreement with the WHO and EMEA to use the viral concoction if a pandemic is declared.

“We are very pleased to receive the EMEA’s positive opinion for Celvapan,” said Hartmut Ehrlich, M.D., vice president, BioScience global research and development. “This is another step towards our goal of supplying a safe and effective vaccine to protect the population against a possible influenza pandemic.” This scumbag should definitely be pleased now that the avian/swine flu has been released in Mexico and other locations around the world. If I understand correctly, pharmaceutical corporations are "immune" from liability if their products cause injury or death as long as the distribution is by government mandate during a declared health emergency.

Baxter International Board of Directors

>From its inception, Baxter International has had numerous military, medical-industrial complex, and global eugenicist ties. The company was the first and only manufacturer of commercially

prepared intravenous solutions for the US Army during WWII. Here is a sample of current Baxter directors to give you some idea of the deep connections.

General Walter E. Boomer
Baxter Director since 1997
USMC Four Star General
Over 30 years in the military

"A leader's position is with and in front of the people he is leading."
Walter Boomer - Above & Beyond: Former Marines Conquer the Civilian World (2004)

This is a curious statement from Boomer, who supposedly led all Marines in Operations Desert Shield and Desert Storm. Where was the brave general when his own US Marine troops were under biological attack from their own military command in Iraq? At least one in four U.S. veterans of the 1991 Gulf War suffers from a multi-symptom illness caused by exposure to toxic chemicals during the conflict. How many Marines died from vaccine induced Gulf War illness on Boomer's watch? How many of his men and women still suffer from debilitating symptoms today and can't get medical assistance from their own military? Since the Gulf War, 11 thousand veterans have died from illnesses related to vaccines, DU, and chemical weapons.

I don't see Boomer exactly standing "with and in front of his people" when it comes to biological warfare and cold blooded treason. Should we civilians also entrust our lives to this traitorous bastard, much less believe anything that his cronies at Baxter or the criminals in government tell us about the current flu outbreak or their proposed vaccines? Hell no.

Wayne T. Hockmeyer
Baxter Director since 2007
US Army Special Forces
Entomology degree
Malaria specialist
Chair, Immunology Department, Walter Reed Army Institute of Research (1980-1986)
Founder, President & CEO of MedImmune, a flu vaccine technology company (1988-2000)

Here is an excerpt from Hockmeyer's biography:

"After three months in his first job at Dow Chemical Co. in Michigan, he was commissioned in the Army, and, following airborne and special forces training, was sent to Vietnam in 1968 with the 5th Special Forces Group. The Army assisted with Hockmeyer's return to the University of Florida, where he earned his doctorate. He rose to the rank of lieutenant colonel and, during his 20-year military career, authored many research papers with particular emphasis on the development of malaria vaccines."

Hockmeyer served as Chairman of the Immunology Department, Walter Reed Army Institute of Research from 1980 to 1986. Walter Reed houses the largest biomedical research facility administered by the US Defense Department. It was originally founded by US Army Surgeon, General George Steinberg in 1893. Steinberg is known as the father of American bacteriology, and Walter Reed can arguably be said to house some of the world's experts in biological warfare.

Wayne T. Hockmeyer Hall - Structural biology research facility at Purdue University that will contain a BSL-3 laboratory

Hockmeyer Hall research facility at Purdue University is currently under construction and expected to be completed by Fall of this year. Structural biology focuses on the physical design and functions of viral structures (presumably in order to better manipulate them).

In this video of the dedication for what is essentially a bioweapons research facility, the speaker admits that Hockmeyer Hall will contain a BSL-3 biohazards containment laboratory "specifically designed for the study and growth of pathogenic viruses."

Indeed, the recent research activities of the structural biology department of Purdue indicates a heavy interest in viruses as potential bioweapons:

---They mapped the structure of the Dengue Virus and determined the structure of the immature dengue particle while still within its cellular host, which will obviously help in the virus development process.

---They analyzed the structure of the baseplate of the T-4 Virus helping scientists further understand how viral infection occurs (in other words, how to better cause infection).

---They determined the orientation of the major surface proteins in the viral particle of West Nile Virus. Because these proteins allow the virus to invade a host cell, the research could be a step forward in combating (or spreading) the deadly mosquito-borne disease.

---They genetically modified the Ross River Virus that was then used to alter the liver cells of living mice without killing them. Viruses as agents to alter the very structure of human beings.

---They redesigned the shell of Ebola, "transforming the feared virus into a benevolent workhorse for gene therapy." The new modification is a version of Ebola that can be inhaled. As Alex has mentioned numerous times lately, an airborne, inhalable version of the Ebola virus is the holy grail of bioweapons research for "Dr Death," aka Eric Pianka, the lunatic UT professor who calls for 90% of the world's population be eradicated like vermin. It's unfortunate for the rest of us that Pianka lacks the courage to lead by example and just kill himself, already.
Roll up your sleeve, "Dr. Death," Baxter has an injection for you.

Albert Sabin (1906-1993)

In 2005, Hockmeyer received the 2005 Albert Sabin "Humanitarian Award" by the Sabin Vaccine Institute. Oh, that's rich. Sometimes just you have to laugh at the dark humor and doublespeak of the eugenicists. Albert Sabin was a US virologist and developer of the dangerous and deadly oral polio vaccine. During WW II, he devised vaccines for the United States Army. After the war, he developed a live attenuated vaccine against polio, which presumably included monkey kidney tissue that was infected with the notorious cancer causing agent SV-40 (simian virus 40) that resulted in the deaths of millions and an explosion in the number of previously rare cancers. In the 1950s, Sabin persuaded the USSR to use the deadly vaccine on an industrial scale.

Joseph B. Martin
Baxter director since 2002.

Dean, Harvard Medical School, 1997-2007
Founder, Systems Biology Department, Harvard University

By all accounts, Joseph B. Martin is a hardcore eugenicist just like Boomer, Hockmeyer, Pianka, Sabin, and the rest of the whitecoats at Baxter. Over the course of his career, Martin appears to have contributed nothing to the actual curing of diseases or easing of human suffering, but only directed his efforts towards the study of disease etiology and ways to manipulate sickness and spread it on a massive scale. In this evil pursuit he is no different than the rest of his colleagues. Here are some of Martin's contributions to humanity:

"The Role of Pathogenesis of Neurodegenerative Disorders: The Role of Dynamic Mutations." Neuroreport 1996; 8:i-vii.

"The Molecular Basis of the Neurodegenerative Disorders." N Engl J Med 1999, 340:25:1970-1980.

On the surface, Dr. Martin is a neurology professor who specializes in degenerative diseases like Alzheimers, Parkinson's, MS, ALS, and Huntington's, many of which are spreading at incredible rates and are now widely believed to be caused by environmental and medical factors and in particular, by vaccines. It's as if Martin and the other Baxter executives could have never conceived that diseases might have iatrogenic causes .

"Dr. Martin's research focuses on the "application of neurochemical and molecular genetics to better understand the causes of neurological and neurodegenerative disease." Remember: vaccines are essentially dual use bioweapons. A better understanding of the causes of disease is just the same as learning how to better cause and spread disease among the human population. The difference is only a matter of intention. In 1980, Dr. Martin established the NIH sponsored "Disease Center Without Walls." A "disease center without walls?" I don't like the sound of that, especially when eugenicists are involved.

In 1984, Martin played a key role in establishing the Massachusetts Alzheimer's Disease Research Center. Let's see, after 60 years, there's still no cure for Alzheimer's, it's spreading at alarming rates, there's no end in sight, and it's believed to be caused by environmental factors. Is Dr. Martin actually trying to cure Alzheimer's? If so, his "disease research center" isn't helping much.

In 2003, Martin founded the Systems Biology department at Harvard. No doubt it was at the behest of his globalist masters.

You only have to read the first two sentences of the Wikipedia definition of Systems Biology to realize it is mere pseudo-science masquerading as genuine holistic scientific inquiry. "Because the scientific method has been used primarily toward reductionism, one of the goals of systems biology is to discover new emergent properties that may arise from the systemic view." In other words, the scientific method need not apply here. Systems Biology is just another academic cover for the eugenicist elite's agenda.

Not surprisingly, eugenicist Andrew Huxley is known as the forefather of Systems Biology. Andew Fielding Huxley was the youngest son of Leonard Huxley and half brother to Julian and Aldous Huxley, all of whom were inbred, parasitic, elite eugenicists. According to Alan Watt, Aldous Huxley, author of Brave New World (1931), the novel that eerily predicts the very socio-biological nightmare we are currently living through, died of cancer of the tongue. Did he say too much? Who might have had the viral expertise to kill Aldous with such a targeted cancer at the time?

Andrew Fielding Huxley (1917-?)

Gail D. Fosler
Baxter Director since 2001
Council on Foreign Relations
Bretton Woods Committee
Federal Reserve Bank of New York Advisory Panel
Trustee, The Economic Club of New York

"It is industries, not nations, that compete globally."
-- Gail D. Fosler, Chief Economist, The Conference Board

An unabashed globalist, Gail Fosler is President and Chief Economist for The Conference Board, a key policymaking NGO for globalists and bankers. Prior to joining The Conference Board in 1989, Fosler was Chief Economist and Deputy Staff Director of the US Senate Budget Committee. The Wall Street Journal twice named Fosler America's most accurate economic forecaster. So, although she has absolutely no biology or chemistry background, it would seem that Fosler knows a bit about pseudo-science herself.

Headquartered in New York, The Conference Board is a global organization with offices in Brussels, Hong Kong, India, the Middle East, and Beijing. It began with a 1915 meeting at the Yama Farms Inn in New York which consisted of the presidents of 12 major corporations and six of the foremost industry associations. The gathering included Frank A. Vanderlip, a member of the Jekyll Island group, the notorious group of bankers that wrote the bill that became the Federal Reserve Act.
Frank A. Vanderlip (1864-1937)

Joining Fosler on the Conference Board are two fellow globalist scumbags:

Harry M. J. Kraemer Jr. (Vice Chair), former Baxter Chairman and CEO. Director of SAIC.

Josef Ackermann (Vice Chair), director of Bayer AG, Deutsche Bank AG, Royal Dutch Shell, Siemens. Bilderberg attendee: 2005, 2008

Gail Fosler is also a member of The Council on Foreign Relations and the Bretton Woods Committee, director and a member of the Executive Committee of the National Bureau of Economic Research, and a trustee of The Economic Club of New York. She has served on the Advisory Panel to the Federal Reserve Bank of New York. She is a director of Caterpillar Incorporated, Unisys Corporation, and H.B. Fuller, one of the world's largest polluters. There are a number of Baxter officials that have also worked for H.B. Fuller.

Gail's husband, R. Scott Fosler, is also a globalist public policy hack.

Among his publications are:
The Challenge to New Governance in the Twenty-First Century: Achieving Effective Central-Local Relations,
Public Private Partnership in American Cities,
and The New Economic Role of American States: Strategies in a Competitive World Economy

Albert P. L. Stroucken (Netherlands)
Baxter Director since 2004
Bayer AG (1969-1998)
HB Fuller (1998-2006)

It was during Stroucken's tenure in 1997 that both Bayer and Baxter agreed to a $670 million settlement after knowingly distributing blood products that infected thousands of hemophiliacs with HIV during the 1980s.

Bayer has a long history of atrocities dating all the way back to WW II. According to a lawsuit, Bayer paid Nazi officials during World War II for access to concentration camp victims and collaborated in Nazi experiments with Joseph Mengele as a form of research and development for their products. A physician identified only as Dr. Koenig was a representative of Bayer and accompanied "Angel of Death" Mengele as he performed his grotesque medical experiments at the Nazi concentration camp at Auschwitz. Bayer provided toxic chemicals to the Nazis, and Mengele used them in the experiments, while Koenig recorded the results and reported the information back to Bayer.
The Angel of Death, Joseph Mengele

James R. Gavin III
Baxter Director since 2003
Lieutenant Commander, US Public Health Service (1971-73)
Senior Science Officer, Howard Hughes Medical Institute (1991-2002)
Trustee, Robert Wood Johnson Foundation

Another not-for-profit NGO helping to usher in the New World Order, the Howard Hughes Medical Institute is really a front for eugenics research and activities. They even proudly issue a publication called "The Genetic Trail."

The Howard Hughes Medical Institute (HHMI) is one of the largest private medical research organizations in the US, second in funding only to fellow eugenics operation, the Bill & Melinda Gates Foundation. Unlike most such organizations, HHMI directly employs the researchers it funds, and the 350+ "investigators," as the institute likes to call them, include a dozen Nobel Prize winners. They concentrate primarily on such areas as cell biology, genetics, immunology, and neuroscience, as well as the formerly discussed eugenics pseudoscience, structural biology. To top it all off, James Baker III is on the board of HHMI. What more needs to be said?

Gavin is also involved with the Robert Wood Johnson Foundation – another NGO eugenics front. 9/11 coverup artist Thomas Kean is is Chairman of the Robert Wood Johnson Foundation .

Appendix: Baxter International Officers

In addition to its board of directors, Baxter officers also indicate deep military, med-industrial complex, and global eugenicist ties. Here's a quick list.

Robert L. Parkinson, Jr.
Baxter Executive Admits Heparin Contamination Appears Deliberate

Wilbur H. Gantz
CEO, PathoGenesis
Military Service: USMC
Princeton
Harvard

Harry M. Jansen Kraemer, Jr.
Director, SAIC (1997-)

Vernon R. Loucks, Jr.
Skull and Bones Society
Military service: USMC
Director, Harvard Business School
National Institutes of Health Special Adviser (1983-86)
Sabin Vaccine Institute Lifetime Achievement Award, 2006.

James R. Tobin
Military service: US Navy (Lt., 1968-72)“

IX. Evidence Baxter has deliberately contamined drugs.

That vaccine material has been deliberately contaminated causing death and injury has even been admitted by Baxter’s CEO Robert Parkinson.

Baxter is at the center of a lawsuit alleging that Baxter altered an ingredient in heparin that flowed through heparin syringes to patients, resulting in pain and suffering, and sometimes death, to those affected.

“Baxter International chief executive Robert Parkinson admitted to what looks to be the deliberate contamination of its heparin product which contributed to 81 deaths and prompted a product recall. He said that a contaminating agent that is an altered form of chondroitin sulfate was purposely added to the material before it reached Baxter's supplier in China.“ (Sturgeon, 2009) http://network.nationalpost.com/np/blogs/fpposted/archive/2008/04/29/baxter-ceo-personal-responsibility-over-drug-contamination.aspx

“We're alarmed that one of our products was used in what appears to have been a deliberate scheme to adulterate a lifesaving medication,“ Baxter Chief Executive Officer Robert Parkinson told the House Energy and Commerce Committee's investigative subcommittee.

“It seems to us that it's an intentional act upstream in the supply chain“ said David Strunce, the chief executive officer of Waunakee, Wisconsin-based Scientific Protein, during the hearing. “We don't know specifically where.“

The drug's main ingredient was contaminated before reaching the Chinese factory of Baxter's supplier, Scientific Protein Laboratories, executives of both companies testified at a U.S. House hearing today.

The Food and Drug Administration suspects the contamination was deliberate, though there isn't proof, according to the agency.

Baxter recalled heparin, used to prevent blood clots, in January of this year after reports of harmful side effects. Since January 2007, 81 people have died after allergic reactions, the FDA said on April 21. Tainted heparin made by other drugmakers has been found in more than a dozen countries since Baxter's recall, and regulators have said they don't know how it was introduced.

Some samples of Baxter's heparin were found contaminated with a cheaper substance known as over-sulfated chondroitin sulfate, according to the company and the FDA.

In a class-action lawsuit filed filed January 5th 2009 by Joyce Ann Osteen at the St. Clair County Circuit Court for compensation for scores of patients harmed by tainted heparin, the claim is made that Baxter altered the profile of the drug, in an attempt to reduce costs.

The lawsuit accuses Baxter of using a more dangerous and unapproved ingredient, OSCS to dilute, or to substitute for the more costly, natural ingredient in heparin to "reap greater profits as a result of utilizing cheap component parts."

About 3500 pig intestines are required to produce 2.2 pounds of raw heparin. While the suit did not quantify heparin mass relative to value, it was alleged that it costs Baxter $900 to produce heparin the old-fashioned way.

It is alleged, Baxter found a way to make that same amount of heparin for just $9. And the heparin mimic OSCS, according to the lawsuit, was the key.

The lawsuit notes that OSCS is not found in nature, and is not approved in the United States.

"Un-approved APIs significantly increases the likelihood that exposed patients will experience adverse side effects and reactions that can result from the un-approved doses," the suit states. "In other words, an unapproved API enhances the risk and danger."

As of April 8, there have been 103 reported deaths in patients who received tainted heparin since January 1st of 2007, the suit states. Of those deaths, 91 were reported after January 1st of last year.

"On or about July 30th, 2008 the (US Food and Drug Administration) conclusively linked the deaths of patients infused with heparin to specific lots made by Baxter," the suit states. "The specific lots of Baxter product tested positive for OSCS."

Heparin crude lots received in August 2006 are said to have included material from an unacceptable workshop vendor, according to the suit. Raw material inventory records were incomplete, the control of material flow in the processing area was found to be inadequate, and a collection of outer foil bags containing heparin sodium were unlabeled. There was also no report or data to verify that the leachable for certain bags used for heparin sodium had been evaluated, according to the complaint.

Inspectors reported a breakdown in critical processing steps identified for heparin sodium USP process, a lack of an impurity profile established for heparin sodium, and a lack of evaluation for degradents. Manufacturing instructions were found to be incomplete, and there had been no verification performed for the reported USP test methods.

When even the CEO of Baxter has said that the contamination of Baxter's blood-thinner heparin appears to have been deliberate and he has a "strong sense of personal responsibility" for this "deliberate scheme", how much more likely is a deliberate contamination of the "swine flu" vaccine?

"We're alarmed that one of our products was used, in what appears to have been a deliberate scheme, to adulterate a life-saving medication, and that people have suffered as a result," Baxter Chief Executive Robert Parkinson said.
http://www.reuters.com/article/topNews/idUSWAT00940720080429

"We deeply regret that this has happened, and I feel a strong sense of personal responsibility for these circumstances," he said.

Under the current set of regulations, acts and provisions, it would be possible for a bioterrorist organisation that has access to the production facilities or to the 1,200 liter bioreactors or that could influence the composition of vaccine material to kill all Americans by contaminating the vaccine material and forcing them to take it without adequate checks or face being shot.

Theoretically, the lethal effect of the vaccination could be delayed or triggered by a second substance.

Dr. Marc Girard predicted this Bird Flu disaster.....he was however the one behind the decision of France to stop use of the Hep B vaccine due to autoimmune disease. He has seen hwever, this coming where the vaccines are not even worth the risk and yet they keep recommending them.

Dr. Marc Girard was commissioned as a medical expert witness by a French judge in a criminal inquiry in France in September 1994 into deaths following a campaign of vaccination against hepatiris B upon the recommendations of the World Health Organization (WHO).

In an open letter to the then WHO Director- General, he indicates that WHO is guilty of criminal misconduct.

http://www.impfkritik.de/forum/showthread.php?t=534

„While much information concerning World Health Organization (WHO) recommendations on vaccines, particularly against hepatitis B, remains secret, there is sufficient evidence in the open literature to suggest scientific incompetence, misconduct, or even criminal malfeasance. The benefits are overstated and toxicity greatly understated. Influenza vaccine recommendations falsely imply that the available vaccines could help prevent avian influenza," he writes.

French judges investigate vaccine manufacturer for manslaughter
March 19th, 2008
In what was called a "thunderclap in the vaccine industry," French authorities have opened a formal investigation concerning a hepatitis B vaccination campaign by GlaxoSmithKline and Sanofi Pasteur in the 1990s. It is alleged that the companies failed to fully disclose neurologic side effects. Another investigation opened by Judge Marie-Odile Bertella-Geffroy concerns the death

("manslaughter") of a 28-year-old woman from multiple sclerosis, allegedly connected to the vaccine (Le Figaro 1/31/08).
>From 1994 to 1998, almost two-thirds of the French population and almost all newborn babies were vaccinated against hepatitis B, but the campaign was temporarily suspended because of concerns about side effects.
Some 30 plaintiffs, including the families of five patients who died after the vaccination, have launched civil actions (Reuters 1/1/08).
A British case-controlled analysis showed an odds ratio of 3.1 (95% CI 1.5-6.3) for first symptoms of multiple sclerosis in recipients of recombinant hepatitis B vaccine compared to controls. Two previous French studies had shown a RR of about 1.5. Other studies showed a nonsignificant increase or null findings, especially when date of diagnosis rather than date of first symptoms was used (Neurology 2004;63:838-842).
According to attorney Clifford Miller, "British doctors administering hepatitis B vaccine to infants could face criminal prosecution if fully informed consent is not obtained. Civil prosecution for damages is possible over 21 years later if the injured survive as adults" (UK Press Association Newswire/Romeike, September 2005).
The hepatitis B vaccine has been considered "one of the safest vaccines ever produced" (Neurology, op. cit.). On the other hand, French medical expert Marc Girard has said that "for a preventive measure, hepatitis B is remarkable for the frequency, variety and severity of complications from its use" (Romeike, op.cit.)

http://www.jpands.org/vol11no1/girard.pdf

He gives evidence that WHO systematically manipulates scientific data to exaggerate the benefits of vaccines and playdown the risks.

„Meanwhile, WHO or its "experts" go on publishing reassuring statements based upon an explicit reference to a safety study that, according a public communiqué of February 2000, even the French
agency decided to "discard."An unfortunate misprint in Table 2 of this study—uncorrected to my knowledge—allows the authors to halve the clear increase of multiple sclerosis in vaccinated teenagers and young adults. Such an error would normally lead one to suspect fraud.

Girard calls WHO „merely a screen for the commercial promotion" of vaccines.

He says notes that apparently neutal government boards are packed with vaccine company employees.

„ In the promotion of the hepatitis B vaccination, WHO has evidently served merely as a screen for commercial promotion, in particular via the Viral Hepatitis Prevention Board (VHPB), which was created, sponsored, and infiltrated by the manufacturers. In September 1998, after the serious hazards of the campaign had been given their first media coverage in France, the VHPB organized a panel of "experts," whose reassuring conclusions were extensive media coverage as reflecting WHO's position. Yet some of the participants in this panel had no
expertise beyond being employees of the manufacturers, and the vested interests of therest did not receive any attention."

World Health Organization Vaccine Recommendations: Scientific Flaws, or Criminal Misconduct?

Journal of American Physicians and Surgeons Volume 11 Number 1 Spring 2006

http://www.drbriffa.com/blog/2007/02/19/world-health-organisation-accused-of-improper-soliciting-of-funds-from-the-pharmaceutical-industry/
World Health Organisation accused of improper soliciting of funds from the pharmaceutical industry
Posted on 19 February 2007
It seems that not a week goes by without some information leaking out about the sometimes too-cosy relationship that can exist between the pharmaceutical industry and organisations we rely on for giving us impartial health information and advice. This particular week's story concerns accusations that a representative of the World Health Organisation (WHO) attempted to solicit funds from the pharmaceutical company GlaxoSmithKline, and then siphon them through an organisation to obscure the source of the those funds.
The individual at the centre of this controversy is Dr Benedetto Saraceno, director of the WHO's department of mental health and substance abuse. It is alleged that he was seeking £5000 ($10,000; 7000 euros) to pay for the preparation for a report on neurological diseases including Parkinson's disease. The WHO has a strict policy that forbids it from taking funds from the pharmaceutical industry, and quite right so.
However, in an email that has been passed to the British Medical Journal, Dr Saraceno appears to suggest that to get around this, money from GSK should be paid to an organisation known as the European Parkinson's Disease Association (EPDA). In an email to the EPDA, Dr Saraceno writes "WHO cannot receive funds from the pharmaceutical industry," and goes on to add "I suggest that this money should be given to EPDA and eventually EPDA can send the funds to WHO which will give and invoice (and acknowledgment contribution) to EPDA but not to GSK."
It is alleged that GSK promptly withdrew its offer once it became clear they would not be officially recognised as the source of this funding.
Since the somewhat—damning correspondence came to light, it seems that Dr Saraceno has attempted to do some major backtracking. He claims that his original email to EPDA was "clumsily worded" and that he denied ever suggesting that funds from GSK be siphoned through the EPDA. Personally, I find it hard to imagine what it is about the wording of Dr Saraceno's email to the EPDA that is in any way clumsy. And neither does Mary Baker - the person at the EPDA to whom Dr Saraceno was writing. She is quoted as saying "There is absolutely no doubt in my mind that Dr Saraceno knew the $10,000 was coming from GSK and that he was intending to take it and disguise its origins by getting EPDA to accept it first before passing it on."
When the BMJ put its concerns about this rather distasteful episode to the WHO, a spokesman apparently replied "It's astonishing that the BMJ thinks there's a story here. Dr Saraceno sent a second email saying he had not meant to ask for the money. So I don't think there's anything to answer." Does the WHO really believe that just because one of its employees denies impropriety, even when presented with evidence that appears to suggest otherwise, that there is no case to answer? I have a feeling that many who learn of this sorry state of affairs would beg to differ.
References:
1. Day M. Who's funding WHO? British Medical Journal 2007;334:338-340

X. Evidence Novartis is using vaccines as bioweapons.

The bird flu trials conducted by Novartis in 2008 offers evidence that companies are designing their trials of pandemic flu vaccines for adverse events, that is, for disease and death.

Novartis, one of the companies tasked with developing a “swine flu” vaccine by Defendant HHS, employed fraudulent misrepresentation and manipulated the vaccine licencing procedure to pass off a substance that is a bioweapon as a harmless vaccines for prophylactic, protective, and peaceful purposes when it tested a bird flu vaccine on homeless people in Poland.

Novartis’s trials of a FLUAD-H5N1 bird flu vaccine in Poland in the summer of 2008 resulted in the deaths of as many as 21 homeless people according to the Telegraph.

http://hygimia69.blogspot.com/2009/04/france-24-health-workers-on-trial-for.html

“The medical staff, from the northern town of Grudziadz, is being investigated over medical trials on as many as 350 homeless and poor people last year, which prosecutors say involved an untried vaccine to the highly-contagious virus.

Authorities claim that the alleged victims received £1-2 to be tested with what they thought was a conventional flu vaccine but, according to investigators, was actually an anti bird-flu drug.

The director of a Grudziadz homeless centre, Mieczyslaw Waclawski, told a Polish newspaper that last year, 21 people from his centre died, a figure well above the average of about eight.”

http://www.telegraph.co.uk/news/worldnews/europe/poland/2235676/Homeless-people-die-after-bird-flu-vaccine-trial-in-Poland.html

Other reports state three doctors and six nurses are on trial for testing the bird flu vaccine on nearly 200 patients without their knowledge.

http://hygimia69.blogspot.com/2009/04/france-24-health-workers-on-trial-for.html

Health workers on trial for vaccine scam in Poland

Nine health workers went on trial in northern Poland Monday accused of having tested a vaccine against bird flu on nearly 200 patients without their knowledge, court officials said.

The accused -- three doctors and six nurses -- are charged with "fraud, creating false documents and delivering health care without authorisation" to 196 patients, judge Piotr Szadkowski of the Torun region told AFP.

If found guilty, they risk up to 10 years in jail.

All nine accused, some reportedly clad in wigs and sun glasses to avoid being identified, pleaded not guilty.

The medical personnel are charged with administering a vaccine banned in Poland against the deadly H5N1 strain of bird flu that can be transmitted to humans.

The patients were paid for the vaccines, Polish news agency PAP reported.

They allegedly led their patients, many of them poor and homeless, to believe they were being vaccinated against ordinary flu.

Police discovered the scam by chance when they were called to break up a fight at a homeless shelter, PAP said.
-

The FLUAD-H5N1 drug being tested was approved for market in the European Union on May 2, 2007 before it was tested on the homeless in Poland and proved to be lethal.

This vaccine is for “government use in case of pandemic caused by Avian Influenza virus“ also for US government use.

”Novartis has also received contract from US DHHS to further develop MF59C.1 adjuvant technology to potentially extend vaccine supplies in case of Influenza pandemic outbreak“

”Represents "mock-up vaccine", filed as normal step for eventual accelerated approval of final vaccine once a pandemic has been declared; Initial preparations were made with viral strain H5N3 (1999) and H9N2 (2004); File submitted for approbation in 2006 was based on clinical trials conducted with various strains of Avian Influenza virus, but more specifically with reverse genetic-engineered strain H5N1 A/Vietnam/1194/2004, with adjuvant MF59C.1;

Vaccine will eventually contain pandemic Avian Influenza strain designated by WHO at the time of pandemic, along with adjuvant MF59. “

http://www.antiviralintelistrat.com/1/Database?prod=1737

Perhaps this lethal drug got a licence because the primary outcome listed for the study was “adverse events rate” after two doses. That is to say, its success was measured in terms of its capacity to cause injury and damage. That is why the drug no doubt got the licence because it proved to be very damaging indeed and so met the primary outcome desired by Novartis according to the official documents of the trial.

http://clinicaltrials.gov/ct2/show/NCT00434733

Immunogenicity, Safety and Tolerability of Two Doses of FLUAD-H5N1 Influenza Vaccine in Adult and Elderly Subjects

This study has been completed.

First Received: February 12, 2007 Last Updated: April 23, 2008 History of Changes

Sponsors and Collaborators:	Novartis Novartis Vaccines
Information provided by:	Novartis
ClinicalTrials.gov Identifier:	NCT00434733

Purpose

This study is designed to evaluate the immunogenicity, safety and tolerability of 2 doses of FLUAD-H5N1 vaccine compared to 2 doses of trivalent, interpandemic FLUAD, each administered 3 weeks apart.

Condition	Intervention	Phase

Influenza	Biological: Pandemic influenza vaccine	Phase III

MedlinePlus related topics: Bird Flu Flu
Drug Information available for: Fluvirin Influenza Vaccines
U.S. FDA Resources
Study Type: Interventional

Study Design: Prevention, Randomized, Single Blind, Active Control, Parallel Assignment, Safety Study

Official Title: A Phase III, Randomized, Controlled, Observer-Blind, Multicenter Study to Evaluate the Immunogenicity, Safety and Tolerability of Two Doses of FLUAD-H5N1 Influenza Vaccine in Adult and Elderly Subjects

Further study details as provided by Novartis:

Primary Outcome Measures:

- Adverse event rate

http://clinicaltrials.gov/ct2/show/NCT00434733

Secondary Outcome Measures:

- Seroconversion and seroprotection after two doses of H5N1 vaccine

Estimated Enrollment: 4400

Study Start Date: January 2007

Eligibility

Ages Eligible for Study: 18 Years and older
Genders Eligible for Study: Both
Accepts Healthy Volunteers: Yes
Criteria

Inclusion Criteria:

- Healthy Subjects 18 years of age who signed the informed consent

Exclusion Criteria:

- Receipt of another investigational agent within 4 weeks
- Receipt of influenza vaccination for current season 2006/2007.
- any acute disease or infection, history of neurological symptoms or signs, known or suspected impairment of immune function, any serious disease, bleeding diathesis
- fever (defined as axillary temperature ³38.0°C) within 3 days (prior to Visit 1)

- Pregnant or breastfeeding or females of childbearing potential who refuse to use an acceptable method of birth control
- Surgery planned during the study period
- Hypersensitivity to eggs, chicken protein, chicken feathers, influenza viral protein, neomycin or polymyxin or any other component of the study vaccine
- Receipt of another vaccine within 3 weeks prior to Visit 1 or planned vaccination within 3 weeks following the last study vaccination
- History of (or current) drug or alcohol abuse
- Any condition, which, in the opinion of the Investigator, might interfere with the evaluation of the study objectives.

Contacts and Locations
Please refer to this study by its ClinicalTrials.gov identifier: NCT00434733

Locations

Poland

Centrum Badań Farmakologii Klinicznej monipol
Kraków, Poland, 30-969

Sponsors and Collaborators
Novartis
Novartis Vaccines
Investigators

Study Chair: Novartis Vaccines and Diagnostics GmbH & Co KG Novartis Novartis Vaccines and Diagnostics

More Information

No publications provided

Study ID Numbers:	V87P4, 2006-005428-18
Study First Received:	February 12, 2007
Last Updated:	April 23, 2008
ClinicalTrials.gov Identifier:	NCT00434733 History of Changes
Health Authority:	Poland: Central Register of Clinical Trials (CEBK)

Keywords provided by Novartis:
Influenza H5N1, pandemic

Study placed in the following topic categories:

Virus Diseases	Influenza, Human
Respiratory Tract Diseases	Influenza in Birds
Respiratory Tract Infections	Orthomyxoviridae Infections

Additional relevant Mesh terms:

Virus Diseases	Respiratory Tract Infections
RNA Virus Infections	Influenza, Human
Respiratory Tract Diseases	Orthomyxoviridae Infections

ClinicalTrials.gov processed this record on May 17, 2009

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U.S. National Library of Medicine, Contact Help Desk
U.S. National Institutes of Health, U.S. Department of Health & Human Services,

When damage and injury, however, are listed as the primary outcome, this is no longer medicine. This is murder.

Any vaccine for a pandemic influenza should have to be thoroughly evaluated through trials and research to prove its safety, efficiency, efficiency, quality and beneficial health effects if a government is going to be in compliance with its duty under normative justice to issue a licence for that vaccine.

Moreover, vaccines and drugs should have been tested for their beneficial health effects in several clinical phases for safety and efficacy before they can be released to the general public. This is a time consuming process often taking years to complete. There is no short cut to following these procedures when it comes to safety.

Any new vaccine has to be evaluated at many levels: Phase 1: safety, Phase 2: safety and immunogenicity, Phase 3: large- scale trials for efficacy and Phase 4: post- marketing surveillance.

It is criminal for a vaccine material that has as its stated primary desirable outcome “adverse events rate” after two doses rather than “positive events rate”, that is, beneficial effects on the health of the patient, to be injected into patients.

It is a crime to produce a vaccine whose overwhelming intention is to produce “adverse events” or damage to the people who are injected with the drug as the FLUAD-H5N1 does. It is a crime to approve that vaccine for the market on the basis of it producing “adverse events rate”.

If I make a drug saying its success is measured in terms of “adverse events” and to damage people, I am conspiring to commit pre-meditated assault or murder using a bioweapon and an injection as the delivery system. If I actually use that drug and kill people I have committed pre meditated murder using a bioweapon and an injection as a delivery system.

The doctors and nurses involved in the bird flu trials in Poland are now on trial for having withheld from their victims information about the drug, presenting it instead as a harmless, routine shot. In so far as they have violated the requirement to obtain informed consent, they have violated the medical law. In so far as their actions led to the deaths of others, they have violated criminal law.

Are the people of the United States going to be forced to take an unproven, untested vaccine such as the one produced by Novartis, fully licensed but licensed to cause adverse events, that is to say, to kill and injure?

Novartis along with Baxter is one of the two major companies with contracts to produce millions of doses of swine flu vaccines for a mass compulsory vaccination.

„Novartis has also received contract from US DHHS to further develop MF59C.1 adjuvant technology to potentially extend vaccine supplies in case of Influenza pandemic outbreak.“

http://www.antiviralintelistrat.com/1/Database?prod=1737

“CompanyMarket Cap2009 P/E5-year Earnings GrowthTechnology
Novartis (NVS)$85 B10x10%Cell-based vaccines
Baxter (BAX)$30 B13x12%Cell-based vaccines
Gilead (GILD)$40 B18x15%Anti-viral drugs
Crucell (CRXL)$1.5 B50x30%Cell-based vaccinne

Gilead will receive royalties on every dose of Tamiflu sold by Swiss-based Roche. The current efforts to beef up emergency stockpiles of Tamiflu could add $80 million to Gilead’s bottom line within two years.
Novartis, Baxter, and Crucell are each developing vaccine-production methods to replace our antiquated system (which uses chicken eggs). From start to finish, each of the new approaches can generate an original vaccine within 12 to 16 weeks.
Novartis already has the genetic code of the current swine flu virus. Now, it’s waiting for an actual sample of the virus to arrive in its labs. Baxter expects a sample, as well, in the next few days.”

XI. Evidence as to the WHO’s role in the bioweapons program

The World Health Organization (WHO) is a specialized agency of the United Nations (UN) that acts as a coordinating authority on international public health. Established on 7 April 1948, and headquartered in Geneva, Switzerland, the agency coordinating international efforts to monitor outbreaks of infectious diseases, such as SARS, malaria, and AIDS.

WHO is currently working with Collaborating Center in Atlanta (The Centers for Disease Control and Prevention (CDC) in the United States of America) and vaccine companies such as Baxter and Novartis to develop “candidate vaccine viruses” for 4 billion people by autumn of the world’s population, enough to achieve an 80 per cent reduction in the world’s population.

There is evidence that WHO itself is playing a role in exposing the populations of the world to the risk of a pandemic virus that could kill billions of people.

Though Dr Margarent Chan, the Director General of WHO, is technically a public servant and has the duty as part of her official capacity to act at all times in such a way as to safeguard the health of the world's population, there are grounds for believing WHO is abusing its administrative structures, personnel and services actually “misusing“ pandemic material and pandemic declarations to assist organisations, companies, government bodies or other entities intent on unleashing a pandemic virus and then carrying through a mass vaccination programme with contaminated material in order to gain political and economic advantages from mass murder.

WHO supplied the the “wild” bird flu virus from its reference laboratory that Baxter AG in

Austria then used to produce 72 kilograms of contaminated bioweapon material that nearly triggered a pandemic.

In spite of the fact Baxter was involved in a scandal involving vaccines tainted with deadly avian flu virus, WHO chose Baxter head up efforts to produce a vaccine for the Mexican swine flu that has seemingly migrated into the U.S. and Europe.

Baxter has confirmed it is working with the World Health Organization on a potential vaccine for swine flureports the Chicago Tribune.

Baxter has previously worked with governments all over the globe to develop and produce vaccines to protect against infectious disease or potential threats from bioterrorism. After 9/11 Baxter helped supply stockpiles of a smallpox vaccine and in 2003 the company was contracted to develop a vaccine to combat the SARS virus. In 2006 the UK Government announced plans designed to inoculate every person in the country with Baxter's vaccines in the event of a flu pandemic.

Even though Czech newspapers immediately questioned whether the events were part of a conspiracy to deliberately provoke a pandemic, there was no in depth investigation by WHO resulting in recommendations for the tightening of standards or for charges at Baxter made public. Since the probability of mixing a live virus biological weapon with vaccine material by accident is virtually impossible, this leaves no other explanation than that the contamination was a deliberate attempt to weaponize the H5N1 virus and distribute it via conventional flu vaccines to the population who would then infect others to a devastating degree as the disease went airborne.

Baxter has put the safety of the entire human race at risk together with WHO, and now, that same company, Baxter, is seeking a sample of the potentially lethal never before seen form of swine/avian/human flu virus and WHO has chosen it to develop a new vaccine, reaping billions in the process.

Why should Baxter be entrusted with this task by WHO, when Baxter have already been proven to be at the very least criminally negligent, and at worst a prime suspect in attempting to carry off one of the most heinous crimes in the history of mankind unless WHO is involved?

So, under the guise of helping to coordinate the response to a pandemic, WHO is actually helping vaccine companies to develop and also release the pandemic viruses with impunity by providing funds, licences and authority.
Though Dr Margarent Chan, the Director General of WHO, is technically a public servant and has the duty as part of her official capacity to act at all times in such a way as to safeguard the health of the world's population, there are grounds for believing WHO is abusing its administrative structures, personnel and services actually "misusing" pandemic material and pandemic declarations to assist organisations, companies, government bodies or other entities intent on

unleashing a pandemic virus and then carrying through a mass vaccination programme with contaminated material in order to gain political and economic advantages from mass murder.

The World Health Organization, together with the UN, will be given authority over the US in the event of a pandemic under a decree issued by President George Bush in 2005.

When WHO sends such a "declaration" to President Obama, FEMA and the Department of Homeland Security "Pandemic Task Forces" will be deployed according to my information.

Each State Governor will be notified that the provisions of the Model State Emergency Health Powers Act (MSEHPA) will be implemented. This means that all Americans must consent to mass vaccinations, or be guilty of a FELONY crime.

The legal situation is that anyone who refuses the vaccine, and/or resists forced relocation to a prepared "quarantine compound", can "legally" be shot and killed. (Justified "deadly force".) See http://www.forhealthfreedom.org/Pub...ModelState.html

On Friday April 24, following the „swine flu“ scare in Mexico, WHO ordered officers to man the "Pandemic Control Room" 24/7 for the first time and was reported to be about to declare a "pandemic".

The WHO "Pandemic Control Room" is designed to map and track the spread of a pandemic virus, and is thus equipped with super-computers tied to all U.N. member government's security forces.

This "control room" is where any declarations of "pandemic" will originate from.

WHO appeared to be ready to declare a pandemic prematurely as a pretext to rush through emergency laws and mass compulsory vaccination program with contaminated or faulty vaccine material that could result in death or injury to people as happened in the mass swine flu vaccination program of 1976.

WHO intentionally manipulated information on the swine flu outbreak to play up the danger of a pandemic in order to justify the declaration of a pandemic and the implementation of a mass vaccination programme while ignoring and suppressing information that indicates WHO’s drastic response is not proportionate to the risk, especially the evidence that many people have recovered from the „swine flu“ with just rest and hydration.

WHO’s assessment of the dangers of this swine flu was by far the most pessimistic with the CDC recommending just customary precautions.

WHO identified about 80 fatalities at a time when the Mexican government itself confirmed only 16 from this new flu strain.

The new strain of the so called „swine flu“ appeared in Mexico and America simultaneously, and under "mysterious circumstances" also indicating a deliberate, planned and coordinated release of the synthetic laboratory engineered viruses.

But WHO only began investigating the "mysterious" incident after the Austrlian virologist Adrian Gibbs said in an interview he thought the virus had come from a lab.

It is WHO’s especial duty, given this precedent in 1976, to make sure no mass vaccination programme is implemented unless that causes injury to the general public is implemented under

WHO's auspices by WHO declaring a pandemic prematurely and without having adequate safeguards in place to ensure the high quality and safety of any vaccine material.

However, WHO immediately contracted Baxter, the very same company that nearly triggered a pandemic by releasing 72 kg of live bird flu material in winter to produce huge amounts of vaccine for the „mysterious" swine flu.

Again, it was the WHO reference center which provided Baxter with the particularly lethal wild type bird flu virus that ended up contaminating ordinary human flu material and being distributed to 16 laboratories in Austria, the Czech Republic, Slovenia and Germany under a false label, so nearly sparking a bird flu pandemic this winter in the estimation of experts and the media.

Virus mix-up by lab could have resulted in pandemic (6 Mar 2009)
http://timesofindia.indiatimes.com/articleshow/4230882.cms

In the Baxter case of this winter, there is therefore a clear, well documented link between WHO and the release of pandemic bird flu material in Europe this winter.

The WHO is, according to reports, conducting an investigation into Baxter and Avir's role in producing and distributing this material, but has so far not made public the results of its investigation or made recommendations in respect of stricter biosecurity rules for laboratories working with the highly pathogenic bird flu virus.

Under the biosafety 3 regulations an accidental contamination of the deadly bird flu virus strain WHO sent from its reference center to Baxter with a human flu is virtually impossible.

WHO's failure to conduct a full and detailed investigation into the „Baxter incident", and to make those findings public or to make clear recommendations as to how to prevent a repeat of this incident is not merely a failure to perform their duty as a public health body, but evidence of their role in covering up the real origin of the pandemic virus, specifically, in WHO's own reference center.

I contend that WHO and Baxter and other vaccine companies are working together to deliberately trigger a pandemic with the aim of profiting from it by sealing in advance lucrative contracts to supply a vaccination.

I contend that high offices in organisations such as the WHO have been annexed by criminal elements who are actually helping to further a criminal agenda of committing murder with the motive of robbery - albeit using covert bioweapons programmes.

Given the fact that this Baxter incident happened only a few weeks ago and WHO is involved in it in as far as it supplied a) a lethal strain of the bird flu virus and b) is investigating the incident, it is surprising how quickly WHO gave Baxter a contract to work on the swine flu.

Although many researchers and NGOs issued warnings that resurrecting this lethal Spanish flu virus was dangerous to the public, WHO has been one of the biggest supporters of continuing research into this bioengineered virus and into its "antidotes" spending millions, if not billions, of tax payers dollars on research or „creation" and then on „vaccination" and „prevention" programmes.

Jeffery K. Taubenberger of the Department of Molecular Pathology, Armed Forces Institute of Pathology into the bird flu virus and specifically his reconstruction of the deadly strain of the bird flu virus from the genetic material retrieved from victims of the Spanish flu pandemic of 1918-1919.

It was only in the summer of 2008 that researchers published evidence that showed that the bird flu can mix with the human flu virus to produce a pandemic virus in a laboratory situation.

That same summer Novartis tested ist bird flu vaccine for „adverse events“ on homeless people in Poland, causing deaths and injury.

There is therefore, plenty of evidence from the documents and reports even within the public domain to show that WHO and their allied pharmaceutical companies and other agents, including the European Union, are knowingly and intentionally creating pandemic virus material, testing it and releasing it.

There is evidence from the pattern of WHO's activities that, under the color of their office while purporting to act in an official capacity, members of the organisation are actually acting on behalf of hidden crime interests intent on igniting a pandemic and misusing a declaration of a pandemic to gain political and financial advantages, a group which designated in these charges as the Illuminati crime gang.

The declaration of a pandemic by WHO has direct political and financial and other advantages to elements in the US government, especially elements belonging to the Illuminati/Bilderberg/ New World Order/CIA/Freemason crime gang.

For one thing, many high level associates of the Illuminati are now being considered for investigation for sanctioning torture in violation of the US and international law, specifically Donald Rumsfeld (who has financial connections with an anti bird flu Tamiflu producer), Richard Cheney and Alberto Gonzales.

The imposition of martial law on the pretext of a pandemic will help those individuals suspected of violating laws to torture to avoid prosecution in the United States, although a case is being pursued in Spain.

Furthermore, elements of the Illuminati have knowingly and intentionally manipulated the financial system for their financial gain, first by sucking in huge amounts of money, and then by imploding the system.

WHO is knowingly and intentionally, helping the Illuminati achieve their political goals of controlling the millions of newly impoverished Americans by giving the government a pretext to declare martial law and implement a mandatory vaccination program.

Further evidence of WHO's role in facilitating the covert bioweapons program by the Illuminati against the people of the United States comes from the recent case of VICL

In spite of the fact that WHO has said on its own website that the vaccine candidate viruses would only be available by mid May, Vical Incorporated (VICL 2.13, -0.12, -5.33%) announced on May 21st that in the two weeks since launching its program to develop a vaccine against H1N1 influenza (swine flu), the company has completed development of a prototype H1 vaccine, produced an initial supply of research-grade material, and initiated immunogenicity testing in animals.

http://www.who.int/csr/disease/swineflu/frequently_asked_questions/vaccine_preparedness/en/index.html

According to the WHO website: “A vaccine for the Influenza A(H1N1) virus will be produced using licensed influenza vaccine processes in which the vaccine viruses are grown either in eggs or cells. Candidate vaccine strains have been identified and prepared by the WHO Collaborating Center in Atlanta (The Centers for Disease Control and Prevention (CDC) in the United States of America)[1]. These strains have now been received by the other WHO Collaborating Centers which have also started preparation of vaccine candidate viruses. Once developed, these strains will be distributed to all interested manufacturers on request. Availability is anticipated by mid-May.”

How can VICL have completed development of a prototype H1 vaccine, produced an initial supply of research-grade material, and initiated immunogenicity testing in animals even before the candidate vaccine was grown and released to companies unless VICL itself was involved in making the virus in the first place.

How can VICL have won a contract with the Navy for clinical testing of a vaccine when the candidate virus has not even been released by WHO?

“The first doses of Influenza A(H1N1) vaccine could be available in five to six months from identification of the pandemic strain. The regulatory approval will be conducted in parallel with the manufacturing process. Regulatory authorities have put into place expedited processes that do not compromise on the quality and safety of the vaccine. Delays in production could result from poor growth of the virus strain used to make the vaccine,” WHO says on its website.

VICL is working to a very different time plan.

„Assuming a successful outcome of this testing and a commitment for program-specific external funding, the company is ready to advance directly to large-scale cGMP manufacturing of vaccine for human clinical trials to be conducted by the U.S. Navy.

The company previously announced that it has entered into a Cooperative Research and Development Agreement (CRADA) with the U.S. Naval Medical Research Center (NMRC), a biomedical research organization within the U.S. Navy, to advance into clinical testing as quickly as possible a Vaxfectin(r)-formulated H1 DNA vaccine. Vical and the NMRC are actively pursuing funding to support the program.“

Criminal charges have also been brought against WHO, Baxter and the Swiss National Influenza Laboratory in Geneva for their role in an alleged bioterrorist attack in Switzerland on April 27th. (see Attachment (B) for charges in German)

A container with vials of swine flu virus exploded on a Swiss Intercity train at peak time, exposing 61 people to a potentially lethal virus.

(http://uk.reuters.com/article/worldNews/idUKTRE53R1PO20090428)

The container appears to have come from a WHO and Baxter affiliated laboratory in Mexico City. It was destined for the National Influenza Laboratory of Switzerland in Geneva, but was apparently sent by plane to Zurich where it was picked up by a technician.

The container was faultily packaged. The dry ice meant to cool the vials was packed into the wrong part of the container and resulted in an explosion as the dry ice melted in the train compartment.

The allegation is that these groups were acting in unison to rlease a virulent strain of the virus among the Swiss population and cause panic in an attempt to justify triggering a pandemic level 6

declaration from which they would reap enormous financial and political profits, including, in the case of WHO and the affiliated UN, the right to assume control over key US infrastructure.

A virus of this sensitive nature should not have been sent in a high speed commuter train packed with people. It should have been classified as a hazardous material and sent by a third party.

Furthermore, it was alleged the container was not "faultily" packed as claimed, but deliberately designed to explode and spray out particles of the virus among passengers.

An Intercity train, a more or less enclosed, air conditioned space with constant variables such as temperature and packed with people, is an ideal place to launch a bioweapons attack.

It was contended that the container used for transporting the vials resembled a CO2 bomb. Dry ice packed into the middle ring of a hermetically sealed container evaporated when it melted, producing vapour. The vapour expanded and the growing pressure led to the explosion of the vials of « swine flu and to the bursting of the container.

The blast was sufficient in force to injure the technician charged with transporting the package as well as a passenger.

Through this explosion, the virus was aerosolised and spread around the compartment. It can be assumed it went into someone's lung, carried by the shockwave of the explosion outwards.

It was alleged that dry ice or solid carbon was chosen because most bomb sniffers - dog and electronic alike - look for sulfur and nitrogen compounds found in black powder, ANFO, etc.

Solid carbon or CO2 is in the air already, so detecting it and discriminating from natural background sources is harder.

The container used to transport the vials should have had a vent hole to allow the pressure building up from the melting dry ice to escape. It should also have been made of plastic if it were the conventional type of container for carrying medical supplies.

Because the container had no such vent hole and was made of a robust material, the evaporating CO2 pressurized the container, and the vials of swine flu.

Once the outer case burst, the inner vials underwent a similar explosive decompression, instantly vaporizing their contents as a mist filled with microrganisms.

It was alleged that the "organisers" of this bioterrorist act planted misleading information into the general public that the virus was harmless when it isn't to spread the lethal Mexican pandemic strain by sending their agents from the National Influenza Laboratory in Geneva to the scene of the explosion to reassure the police that the virus was harmless.

In spite of the fact that the credibility of the laboratory staff was severely compromised by their decision to send the vials by train and by the faulty packaging of the container, the police did not carry out a forensic investigation.

As a result, the infected passengers were allowed to go home without any preventative treatment or plans for the monitoring of their health.

XII. Evidence as to deliberate release of the "swine flu" virus in Mexico

Virologist Adrian Gibbs said that the "swine flu" was leaked from a lab and, interestingly, Baxter has large-scale production and research facilities close to Mexico City, where the outbreak of the "swine flu" occurred.

The "mysterious origin" of the swine flu was underlined by the Mexico's Chief Epidemiologist M.A. Lezana, who said that among the first mortalities was a Bangladeshi born street vendor in Mexico City who fell ill in early April. The man is said to have met his brother in Merida, Yucatan in early April and returned to Mexico City before he died. The assertion is that the brother, a Bangladeshi or a Pakistani, was also ill.

(http://ahrcanum.wordpress.com/2009/05/05/baxter-pharmaceutical-plant-in-mexico-ground-zero-for-flu-outbreak/)

Edgar Hernandez of La Gloria fell ill with a fever and headache in early April according to his mother Maria del Carmen Hernandez. His mom took him for healthcare, and he recovered swiftly. The Financial Times timeline says it was April 2.

Mexican officials confirm that Edgar Hernandez did carry the A/H1N1 virus, but they have not confirmed any other resident did or does. No one else in Edgar's family got sick at all. A state public health doctor says, *"We just don't know how he (Edgar) got sick. Maybe it was a genetic accident of some kind."*

Also, the Financial Times timeline points to a La Gloria health official requesting assistance in February for an outbreak of an acute respiratory disease; and on April 6 there was a health alert in La Gloria with 400 seeking medical treatment.

How did Edgar Hernandez become positive if not for the pigs of La Gloria? And why cannot Smithfield find the A/H1N1 in one million pigs — all of whom will be slaughtered soon enough unless that Bangladeshi subplot fleshes out. More soon.

One thought from http://www.naturalnews.com/026141.html notes," it is astonishing to realize, because for this to have been a natural combination of viral fragments, it means an infected bird from North America would have had to infect pigs in Europe, then be re-infected by those same pigs with an unlikely cross-species mutation that allowed the bird to carry it again, then that bird would have had to fly to Asia and infect pigs there, and those Asian pigs then mutated the virus once again (while preserving the European swine and bird elements) to become human transmittable, and then a human would have had to catch that virus from the Asian pigs — in Mexico! — And spread it to others in order to assist the World Health Organization in developing a new vaccine, reaping billions in the process. "

Just 50 miles from the H1N1 ground zero outbreak in Mexico City, lies Baxter's manufacturing plant in Cuernavaca, Mexico. It was named one of the 10 Best Plants in North America for 2008 by Industry Week magazine.
http://www.baxter.com/about_baxter/news_room/news_releases/2008/12_19_08_industryweek.html

The plant manufactures, "Water for Injection, Devices Medical, Premixes Formulations," according to http://www.alibaba.com/member/juanbaxter/aboutus.html. What else do they manufacture there? What kind of water gets injected? Germ Warfare? Bio Hazards? Virus Mutations? Vaccines? Cures or Causes?

Baxter was also responsible for the mislabeled, recalled doses of Heparin. Baxter recalled one lot of a product that hospitals use to treat burn victims and patients in shock after a test found a rare form of HIV in the plasma used to make the product. HIV-2 in plasma! http://www.aegis.org/news/ct/2001/CT010716.html. Baxter also manufactures a vaccine against tick-borne encephalitis (TBE) and a vaccine against group C meningococcal meningitis. http://www.baxtervaccines.com/?node_id=312 , in addition to other pharmaceutical products, anesthetic's, pumps, etc. http://www.ecomm.baxter.com/ecatalog/browseCatalog.do?lid=10001&cid=10016

The National Autonomous University of Mexico (UNAM) has a satellite campus located in Cuernavaca, which is aimed at research and graduate studies. It also has an undergraduate program in genomics.

Cuernavaca is the home of the following research centers: Center for Genomic Sciences (UNAM),[3] the Institute of Biotechnology (UNAM),[4] the Institute of Physical Sciences (UNAM),[5] the Center for research in Energy (UNAM), the Institute of Mathematics (UNAM), the Center for Research in Engineering and Applied Sciences (UAEM),[6] and the National Institute of Public Health. Cuernavaca has the highest concentration of scientists and researchers in Latin America. -WIKI http://en.wikipedia.org/wiki/Cuernavaca Cuernavaca is certainly a who's who in genetics and research.

XIII. Evidence as to the involvement of President Obama

Since President Obama visited Mexico on April 16, the virulent flu has stricken more than 1,000 peeple, killing nearly 70 of them, including one person the President met at a museum.

Obama was received at Mexico's anthropology museum in Mexico City by Felipe Solis, a distinguished archeologist who died the following day from symptoms similar to flu, Reforma newspaper reported. http://www.bloomberg.com/apps/news?pid=20601087&sid=aEsNownABJ6Q&refer=home

A federal agent who traveled to Mexico with President Obama this month probably contracted swine flu and infected several members of his family in Anne Arundel County, prompting assurances yesterday from the White House that the president was safe. http://www.washingtonpost.com/wp-dyn/content/article/2009/04/30/AR2009043001836.html

"[President Obama's} doctors have advised him that his trip to Mexico has not put his health in any danger," said spokesman Josh Earnest.

White House aides declined to discuss what steps the President's doctors have taken, such as testing for the illness or inocculations, but one suggested he has not been tested.

"I can tell you that the President doesn't have any symptoms, and his doctors advised that there was no need for him to be tested," the aide said.

That is likely because the swine flu has a short incubation period of less than three days, and the President would have shown symptoms even before he returned home if he had been infected. (http://www.nydailynews.com/news/politics/2009/04/26/2009-04-

26_white_house_president_obama_does_not_have_swine_flu_from_recent_mexico_trip.html#ixzz0GnOgyRRk&B)

Under the color of an official government trip, a lab engineered virus was unleashed in Mexico, a foreign country chosen to distract attention from their own involvement, in order to profit politically and financially from a pandemic declaration.

The appearance of the swine flu coincided with President Obama's visit. A high level museum official, who was healthy enough to meet the President in Mexico City, died the next day indicating he had received a lethal dose of a toxic virus. A federal agent who travelled with the President also contracted the disease. However, the President himself was not even tested for the swine flu. I contend that the key staff of the President saw no need to test the President because they knew he had been vaccinated in advance against the virus that the team helped release.

President Obama went into Mexico and left unscathed in spite of the growing "swine flu" emergency.

"Authorities canceled school at all levels in Mexico City and the state of Mexico until further notice, and the government has shut most public and government activities in the area. The emergency decree, published today in the state gazette, gives the president authority to take more action."
http://www.bloomberg.com/apps/news?pid=20601087&sid=aEsNownABJ6Q&refer=home

"The federal government under my charge will not hesitate a moment to take all, all the measures necessary to respond with efficiency and opportunity to this respiratory epidemic," Calderon said today during a speech to inaugurate a hospital in the southern state of Oaxaca.

At least 20 deaths in Mexico from the disease are confirmed, Health Minister Jose Cordova said yesterday. The strain is a variant of H1N1 swine influenza that has also sickened at least eight people in California and Texas. As many as 68 deaths may be attributed to the virus in Mexico, and about 1,000 people in the Mexico City area are showing symptoms of the illness, Cordoba said."

In the event of a level 6 pandemic level designation from the WHO, President Obama has the right to implement emergency measures: Americans would be subject to compulsory vaccinations and possible detention because of the Patriot Act I, Patriot II, BARDA, BioShield I, BioShield II, BARDA, Federal or State Emergency Medical Powers Acts, FEMA and other laws, provisions and regulations.

Also, as the pressure increases on Obama to produce a valid Birth certificate, Obama and his international criminal syndicate backers are seeking to accelerate the declaration of a Pandemic Level 6 by WHO to avert the political destablisation of their front man.

Lawsuits have been filed contesting that Obama is ineligible to be President of the United States of America because he is not a natural-born citizen as defined by US law because, among other reasons, Hawaii, the birthplace of Obama's mother was not a state.

„Presidential office requires a natural-born citizen if the child was not born to two U.S. citizen parents. US Law very clearly stipulates: ".If only one parent was a U.S. citizen at the time of your birth, that parent must have resided in the United States for at least ten years, at least five of which had to be after the age of 16." Barack Obama's father was not a U.S. citizen and Obama's mother was only 18 when Obama was born, which means though she had been a U.S. citizen for 10 years,

(or citizen perhaps because of Hawai'i being a territory) the mother fails the test for being so for at least 5 years **prior to** Barack Obama's birth, but *after* age 16. It doesn't matter *after*.

In essence, she was not old enough to qualify her son for automatic U.S. citizenship. At most, there were only 2 years elapsed since his mother turned 16 at the time of Barack Obama's birth when she was 18 in Hawai'i. His mother would have needed to have been 16+5= 21 years old, at the time of Barack Obama's birth for him to have been a natural-born citizen. As aformentioned, she was a young college student at the time and was not. Barack Obama was already 3 years old at that time his mother would have needed to have waited to have him as the only U.S. Cizen parent. Obama instead should have been naturalized, but even then, that would still disqualify him from holding the office.“

So far, President Obama has not produced verifiable, unambiguous evidence that he meets the criteria of a natural born citizen. We contend Obama is actually the member of a foreign-based crime gang that has used fraudulent means to get their member Barack Obama in office so they can use him as an instrument to take control of the economic, political and military structures of the USA.

The plan is to give him the powers of a dictator under the pretext of implementing martial law to deal with a pandemic or a false flag nuclear attack or the consequences of hyperinflation that the same group have themselves engineered by manipulating the financial markets and creating debt.

Once martial law is declared, Homeland Security will be used to terrorise the population of the USA taking on a role similar to the Gestapo in Nazi Germany to enforce mass vaccinations, imprisonment in FEMA camps and quarantines in towns and cities. A wave of arrests is planned to arrest and kill all political opponents.

Further, a bill calling for an audit of the Federal Reserve, which is gathering steam in Congress, could reveal the extent of the financial crimes committed by the Federal Reserve Chairman and his international backers, a further reason for the crime elite to seek an excuse to declare martial law to destroy opponents and evidence of their crimes.

XIV. Evidence as to WHO’s manipulation of disease data in order to justify declaring a Pandemic Level 6 in order to seize control of the USA.

F. William Engdahl discusses the way WHO is seeking to amplify the dangers associated with the swine flu, which so far was has been so mild that it is indistinguishable from ordinary flu.

At a press conference on June 11th, the CDC confirmed that 27 people had died so far from the swine flu in the US but 36,000 people die from the seasonal influenza every year.

„According to the World Health Organization (WHO), the average global burden of inter-pandemic influenza may be on the order of 1 billion cases per year, leading to 300,000-500,000 deaths worldwide. In temperate climate zones, seasonal epidemics typically begin in the late Fall and peak in mid-winter, infecting about 5-15% of the population each season, while In tropical zones the virus can be isolated year-round. The disease can affect all age groups, but rates of infections are highest among young children who spread the virus and are a potential source of infection in older age cohorts, whereas rates of serious illness, complications and death are highest

in persons aged 65 years and older, as well as in persons with chronic cardiac or respiratory conditions. The efficacy of vaccination in reducing the burden of the disease, as well as the economic burden of treating influenza, is well established."

*WHO redefined "Pandemic" as "Widespread, spreading from human to human but not particularly dangerous" changing it from its previous definition of "widespread, rapidly spreading and very dangerous in order to justify the Pandemic declaration.

If the WHO doesn't declare a Pandemic Level 6 every year when the seasonal flu wave kills tens of thousands of people in the USA, then why declare a Pandemic Level 6 now when the swine flu has killed only 27 people?

WHO's rushed to declare a Pandemic Level on June 11th when the CDC said in a press conference that the number of cases was decreasing was because such a declaration triggers the hand over of power over the USA and other parts of the world to WHO and the UN, front agencies for the international global elite.

In a report dated June 5th, (http://www.globalresearch.ca/index.php?context=va&aid=13856), F. William Engdahl takes a shot at the „flying pigs" swine flu.

The WHO Plays with Pandemic Fire
The Continuing Saga of the Flying Pigs Pandemic Flu

by F. William Engdahl

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Global Research, June 5, 2009

According to information from within the World Health Organization in Geneva, the UN organization supposedly monitoring global health dangers, WHO Director-General Margaret Chan plans to declare a Phase 6 Official Pandemic Alert in the coming days. This bizarre act if declared would come at a time that the country which had to date reported far the latest number of suspected H1N1 cases, the USA, has simply arbitrarily stopped reporting new cases.

If you consider to let your family get scared into taking drugs like Tamiflu that not only do not prevent or even ameliorate symptoms of flu, but in some cases are so toxic they cause severe paralysis, breathing problems and even death, you should at least know the facts before.

The report that WHO may declare an official Pandemic global alert any time is all the more bizarre given the fact that the global wave of cases reported to date to WHO from around the world reportedly have been so mild as to be indistinguishable from the symptoms of ordinary flu.

And the relatively small number of deaths alleged tied to swine flu as it originally was named, appear in no way definitely tied to to H1N1 causes. In a May 28 CDC press briefing, the CDC reported, 'When we look at our deaths, we have information on 11 of the 12 deaths that have been reported to us so far. And it appears that 10 of those fatalities occurred in people who had an underlying condition that put them at greater risk for severe complications of influenza.' That is what epidemiologists call correlation not causality or 'opportunistic infection' deaths.

European epidemiologists privately believe that there is no proven link between supposed H1N1 Influenza A illness and the deaths, rather that the deaths are 'coincidence' or what health

professionals term ‘opportunistic infections.’ The CDC report would seem to strengthen that argument.

US CDC stops regular reporting?

Even more bizarre for a supposed pandemic ‘threat to all mankind’ the official monitoring agency in the nation with so far the largest number of reported case counts, which notably include ‘probable’ ad well as ‘confirmed’ H1N1 cases, namely the United States, the CDC announced en passant, on that May 28 press briefing that, ‘beginning next week, we're going to shift to a different schedule. We'll be updating our case count information less frequently.’ That statement came from Dr. Anne Schuchat, Deputy Director for Science and Public Health Program of the US Centers for Disease Control. She declined to say what ‘less frequently’ was or even why such a decision was reached at the same time the US Government is dedicating billion dollars fast track funds to drug makers to produce H1N1 vaccines.

Oops! Wait a minute. I thought we were teetering on the edge of declaring a global Pandemic Emergency, Phase 6 where travel restrictions, mandatory quarantine and other extreme steps would be implemented. Then the responsible national agency in the country with something like 67% of all reported cases of H1N1 Swine Flu decided casually not to report so often?

Another anomaly in the increasingly bizarre situation is the release of new WHO Pandemic guidelines on April 20, 2009, conveniently enough just in time to affect the current world pandemic scare. According to a WHO official responsible for the report, the revision of revised 2005 WHO Pandemic guidelines was begun ‘well before the Mexican flu cases were first reported.’ The official spoke off record.

Even more curious is the fact that the latest April 2009 WHO Pandemic response guidelines prescribe the exact same response for Phase 5 (sub-pandemic) and Phase 6 (so-called Pandemic), namely ‘implement actions as called for in their national plans.’ For that we need WHO?

Drug giants gearing up

The situation is becoming a golden harvest for the giant pharmaceutical makers as they receive samples from the CDC to begin producing possible vaccines as well as so-called antiviral drugs like Tamiflu.

The US government recently made available one billion dollars to help big vaccine makers like Sanofi-Aventis and GlaxoSmithKline ready production of new vaccines. Novartis leads the herd with $289 million in federal support, followed by Sanofi Aventis with $191 million and GlaxoSmithKline, which gets $181 million. In addition the US Government had decided to ‘de-risk’ the vaccine production, presumably removing usual safeguards for new vaccines. The US Health and Human Services Department (HHS) is placing orders with manufacturers with which it already has contracts to produce a pandemic vaccine for the never-pandemic H5N1 avian flu. More than $3 billion in federal funds since 2005 have gone toward developing, building manufacturing and stockpiling a vaccine to fight that disease. How long do such vaccines hold in stock?

Fittingly given the bizarre nature of the entire Flying Pigs panic being spread by WHO and CDC, the CDC reports that it expects the first H1N1 approved vaccines to be ready by Halloween. Trick or Treat?

In Australia the government has ordered 10 million doses of a new vaccine being developed by CSL. CSL plans to start producing a new vaccine in the next days that can be used for human testing. A vaccine based on the California strain of the virus is being tested in ferrets. China says

that it will have samples of swine flu on hand by June and plans to start manufacturing a new A/H1N1 vaccine in July.

Many drugmakers are using techniques of genetic manipulation to produce their new vaccine offerings in a race to market. The Maryland drugmaker Novavax which reported severe annual income losses prior to the current Swine Flu scare, now is preparing a genetically modified vaccine they claim is suitable for H1N1 flu.

The 1976 Swine Flu fiasco

Once WHO declares a Phase 6 Pandemic Alert, all hell could break loose with governments and population going into panic, cancellation of international travel, severe domestic travel restrictions and other emergency measures resembling martial law.

In 1976 President Gerald Ford issued an Executive Order calling for every man woman and child in the USA to be vaccinated against a suspected outbreak of swine Flu at the Fort Dix US military base. Within months more than forty million unknowing Americans had been vaccinated, some 20% of the then total population despite the fact that no pandemic ever appeared. The flu was restricted to Fort Dix.

Interestingly, aside from severe weather and crowded barrack conditions at Fort Dix, every recruit coming in had immediately been given multiple vaccinations as routine, similar to what US soldiers are given today before being shipped to Iraq or Afghanistan, or similar to what US and European soldiers were given in 1918 during the spread of the misnamed Spanish Influenza of 1918. Was the Fort Dix wave of illnesses and one death a consequence of the vaccinations? We may never know as no government agency was interested in pursuing the notion.

In that 1976 US swine flu panic, aided by a nervous President eager to win re-election, there were thirty deaths due to adverse vaccine reactions and dozens if not hundreds of cases of the rare Guillain-Barre syndrome which led to halting of a national vaccination that was being given for a non-existent pandemic.

Free from liability?

There was one very significant difference between 1976 and today however. In 1976 US insurance companies refused to insure vaccine manufacturers against lawsuits for vaccine-related illnesses or deaths. Today drugmakers need have little fear of damages from product liability lawsuits. They can unleash whatever substances the FDA lets them, and indications are that under Pandemic declaration safety standards would be dropped in the rush to stab the population as widely as possible with vaccines.

Under rulings made under the Bush Administration, vaccines can be labelled as “unavoidably unsafe” meaning that when a product is ‘carefully designed, manufactured and marketed, but is dangerous nonetheless,’ it is not a defective product, even though it might cause injury. Clear? It certainly is clear to the pharmaceutical industry which lobbied hard for the determination.

A decisive victory for the drug industry came in January 2006 when Bush Administration Health and Human Services Secretary Michael Leavitt announced a new ruling in defiance of established precedent and the expressed intent of Congress. The new FDA rules pre-empted any state laws that allow citizens to sue drugmakers for producing unsafe drugs under the dubious claim that the FDA, an agency under HHS, had national responsibility for certification of drug safety and state lawsuits impinged on that national responsibility. As several Congressmen at the time pointed out the FDA

track record for timely response to clear drug dangers as in the Vioxx cases was hardly to the benefit of the health and welfare of citizens suffering needless heart attacks and death as a side effect of the drug.

It would be relevant to ask if the Democratic Congress that protested the 2006 FDA liability-free ruling has plans to change that free ride for vaccine makers. That might do more than anything to reduce the effects of Swine Flu. Then people might realize where the real swine danger lies.

XV. Evidence as to FDA's role in covering up the bioweapons program

There is evidence that the criminal activities of the vaccine companies are covered up by complicit FDA offiials.

The FDA failed to complete an inspection of Baxter's. Scientific Protein plant in China that should have been conducted in 2004 because regulators confused the plant with another with a similar name, according to the agency, thereby allowing the contamination of the heparin.

The FDA may have been able to have prevented contaminated heparin from reaching the U.S. if the agency had completed the 2004 inspection, said David Nelson, an investigator for the energy and commerce panel, who testified before the panel.

While there wasn't contamination at the time, Nelson said an inspection may have identified shortcomings, including procedures to ensure the ingredients it purchased were pure. The FDA failed to complete an inspection of the Scientific Protein plant in China that should have been conducted in 2004 because regulators confused the plant with another with a similar name, according to the agency.

Baxter inspected the plant in September and found no major deficiencies, said Nelson. In February, the FDA sent inspectors to the plant and uncovered ``significant deviations'' from standard practices, he said. He questioned whether the Baxter inspection was sufficient.
The inspections were done ``at different points in time'' for different reasons, Baxter's Parkinson said. The company's inspection was routine, while the FDA's was ``for cause'' after the recall. ``That leads to a very different type of inspection,'' Parkinson said.

``Our investigations have revealed an FDA woefully lacking in the personnel, effective policies, and the will at the highest level to perform the duties entrusted to it by the Congress and the American people,'' said Representative John D. Dingell, a Michigan Democrat, during the hearing.

The FDA would need an additional $225 million annually to inspect overseas drugmakers every two years, said Janet Woodcock, head of the FDA's drug division. The agency plans to spend $11 million this year for overseas inspections, according to the Government Accountability Office, the investigative arm of Congress.
The FDA conducts annual inspections of about 7 percent of overseas drugmakers that ship to the U.S., a pattern suggesting it would take 13 years to visit them all, according to the GAO.
Representative Michael Burgess, a Republican from Texas, also raised alarm that heparin appeared to have called the contamination ``thuggery'' and ``thievery'' and said it was an ``knife in the back'' of the American public.

Bayer pharmaceutical company documents (from its Cutter Biological unit), made public during a lawsuit, revealed that in 1985, Bayer and the FDA colluded by knowingly and deliberately putting thousands of hemophiliacs at risk of death by selling an AIDS-infected blood clotting drug in Asia and Latin America. See: http://www.ahrp.org/infomail/0503/22.php

The New York Times reported that FDA official, Dr. Harry Meyer, willingly helped Bayer cover up "one of the worst drug-related medical disasters in history." Meyer suggested that the issue should be "quietly solved without alerting the Congress, the medical community and the public."

Attorney, Mike Papantonio http://www.ringoffireradio.com/mike_papantonio.asp, who with Robert Kennedy Jr, co-hosts, Ring of Fire, said in an interview with MSNBC's Joe Scarborough that this lethal product was also sold in Spain, France, and Japan, killing thousands--especially children.

He stated emphatically that the internal documents show that Bayer "absolutely, positively knew [the product] was infected and would likely kill thousands of people" but that it set out to "profit by disaster." see video: http://www.youtube.com/watch?v=XS3mhjt7TrY&search=Bayer

When the French government learned of it, company officials went to jail. In the US no pharmaceutical corporate criminals have ever been held accountable nor indicted
Bayer was one of the companies that issued contracts for unknown medical substances to be injected into Nazi concentration camp inmates during the second world war.

The FDA is a government body whose officials must act, therefore, in accordance with the mandate of the Preamble, Constitution and Bill of Rights *to* eliminate the risk of death and injury concerning vaccines and other medicines as the Preamble, Constitution and Code, from which all government bodies derive their legitimacy, requires.

"The Food and Drug Administration (FDA or USFDA) is an agency of the United States Department of Health and Human Services and is responsible for regulating and supervising the safety of foods, dietary supplements, drugs, vaccines, biological medical products, blood products, medical devices, radiation-emitting devices, veterinary products, and cosmetics."

However, I contend the FDA is deliberately, willfully and knowingly failing to do its duty to inspect and control vaccine companies employing devices, schemes and artifices to subvert the regulations such as going to the wrong plant for the inspection out of "confusion" because key personnel within the FDA, including Defendant Dr Margaret Hamburg, are following instructions for a cover up from the very same international crime syndicate that is using those same vaccine companies to commit covert mass murder, and to profit from that mass murder.

The FDA Chief Andrew von Eschenbach, M.D. has committed perjury before Congress after it was discovered that he gave misleading information about the fraud involved in the approval of the dangerous antibiotic drug Ketek made by Sanofi-Aventis.

"FDA Chief in Very Hot Water with Congress

Thursday, February 14, 2008 - Byron J. Richards, CCN

It now appears that the FDA Chief Andrew von Eschenbach, M.D. has committed perjury before Congress...

The FDA is now ignoring Congressional subpoenas of its records, setting up another showdown between Congress and the Bush Administration. Unlike former showdowns, national security is

not involved. Will the Bush administration offer protection for a situation that involves needless deaths to Americans? The Chinese sentenced to death the head of their FDA for far lesser misdoings.

The issue revolves around the fraud-riddled antibiotic Ketek which is made by Aventis, now Paris-based Sanofi-Aventis. Sen. Charles Grassley, R-IA, has been holding the FDA's feet to the coals on the Ketek issue for the past several years ever since an 18 year old boy from Iowa was killed by the antibiotic when being treated for a routine infection. There are other deaths and many cases of liver failure. The House Oversight and Investigations Subcommittee has been looking into the matter since early last year, shortly after von Eschenbach's permanent appointment to head the FDA.

The available evidence paints a picture of the FDA turning this deadly drug loose on children even though it knew of safety problems, a trail of evidence von Eschenbach has actively covered up. In the face of Congressional scrutiny the FDA has since scaled back it's approved use of Ketek, but has left it on the market to treat pneumonia. The FDA blames Aventis for the problems, who is also in hot water with Congress. The FDA is refusing to hand over records showing what it knew and when. Insider information indicates significant FDA wrongdoing.

We already know that a clinical trial involving the drug was forged by a weight loss clinic in Gadsden, Alabama. The physician in charge, Dr. Maria Anne Kirkman-Campbell, is now serving five years in prison. Congress has been trying to get to the bottom of the matter, seeking to establish what Sanofi-Aventis and the FDA knew. Congress has hit a stone wall. It appears they both knew plenty – and covered their tracks.

The House Subpoenas FDA Records

Congress finally had enough. On January 25, 2008 John Dingell and Bart Stupak of the House Oversight and Investigations Subcommittee sent a memorandum stating they intended to subpoena FDA investigators, a private contractor, and various FDA records, which they followed through on several days later.

On February 12, 2008 the House committee held hearings on the matter. Douglas Loveland, a special agent at the FDA's criminal-investigation office, told the committee that Aventis should have known there was fraud and there was a "catastrophic failure" of their clinical trial systems. They ignored "red flags" about the bogus data, "they were loud signals…they were bright signals."

The FDA even admits that it knew there were "serious protocol violations and regulatory noncompliance by multiple clinical investigators" and that it had no knowledge these problems were ever fixed before approving the drug. However, the FDA is not forthcoming about information that may indicate a von Eschenbach cover-up.

Last March von Eschenbach provided written testimony to the committee on events surrounding the Ketek drug approval. The committee subsequently learned from an FDA insider and those familiar with the approval that the testimony was not truthful. The committee had recently subpoenaed the FDA records regarding the preparation of this testimony to learn why it was lied to.

On February 12, 2008 the committee was told by the parent of the FDA, the Health and Human Services Department, that these documents would not be provided because "The department has serious concerns about providing the kind of materials the committee has subpoenaed…such highly confidential and deliberative materials used to prepare witnesses testifying before Congress

risks chilling the open exchange of views that is essential to the effective conduct of agency business." A more skeptical outsider like myself would interpret this to mean "that when people are killed the FDA is above the law and doesn't need to disclose relevant information."

Dingell is not taking the matter lying down: "What is in those briefing books that he does not want either my Republican colleagues or our side to see? Is there evidence of perjury? Are there statements embarrassing to the administration?" He went on to say that "Neither Chairman Stupak nor I will tolerate such a perversion of Congressional powers to investigate and probe." His next step to get the von Eschenbach records may be to hold Michael Leavitt, the HHS Secretary, in contempt of Congress – setting up a major showdown with the Bush Administration.

FDA Whistleblower

Dr. David Ross served as the FDA's primary safety reviewer on Ketek. He was concerned about liver damage as early as 2000 and was stunned by the fact that the U.S. clinical trial contained blatant fraud. Back in 2003 he wanted to give this information to the FDA advisory panel that was deciding if Ketek was safe to use for the public. FDA management prevented him from doing so and purposefully withheld information from the advisory panel about the ongoing criminal investigation.

Ross buckled to FDA management pressure and omitted the safety risks and his concerns about Ketek from his final report. This all happened prior to von Eschenbach coming to the FDA. Under von Eschenbach's tenure as temporary head of the FDA the Ketek problems began to hit the fan. Congress started actively looking into the matter and von Eschenbach went into damage control mode. He called a meeting of 40 FDA employees regarding Ketek issues and mysteriously Ross was invited to this meeting (he no longer worked on the Ketek issue).

Ross has reported that during the meeting von Eschenbach likened the workings of the FDA to a football locker room, where differing views can be vented but that once on the field the team speaks with one voice and any FDA staff who speaks differently will be warned the first time, benched the second time, and traded the third time.

In the face of such a blatant effort to suppress the truth of the situation Ross turned whistleblower. He has told Congress that the FDA approved Ketek "despite knowing that it could kill people from liver damage and that tens of millions of people would be exposed to it."

Grassley Predicted the Unethical Behavior of von Eschenbach

Back in February of 2007 Senator Grassley informed the House committee of the extensive nature of the FDA cover-up on Ketek as well as other issues, including FDA disregard for Congressional investigation.

Von Eschenbach is a cancer-industry insider who took the job at the FDA so he could get quick approval of new biotech drugs while using humans for cruel experiments in the name of "progress." His nomination as permanent head of the FDA took place during the 2006 lame duck session of Congress and was rubber stamped by Big Pharma friendly Senators. Senator Grassley knew better, as he stated on the floor of the Senate during the confirmation hearings:

"People ought to be ashamed of saying Dr. Andrew von Eschenbach has done a superb job in the position he is currently occupying [acting head of the FDA].…That is an insult….In my interactions with the Department of Health and Human Services and the FDA these last 8 months, I have seen a complete and utter disrespect for congressional authority and hence the law.… This

body [the Senate] should not walk hand in hand with the executive branch and sit idly by as instances of abuse and fraud continue to endanger the health and safety of American people."

As Grassley's warning fell on deaf ears, Orrin Hatch (R-UT), a man whose pockets are lined with Big Pharma money, rose in defense of von Eschenbach:

"To me it is simply unconscionable that the Food and Drug Administration, one of the best little agencies in Government, has gone leaderless for such a period of time…I know Dr. von Eschenbach well. He is a man of integrity….I urge my colleagues—no, I implore my colleagues—to do what is right and vote [for] this nomination….it is what the American people deserve."

Indeed, as history notes, the American people got von Eschenbach – a drug company sales rep sitting in the hot seat atop the dysfunctional FDA, an organization of unelected bureaucrats who are certain they are above the rule of law and certain they have nice jobs waiting for them in the Big Pharma world.

XVI. Evidence as to the Canada's National Microbiology Labs role in the bioweapons program

Canada's National Microbiology Laboratory, a public health reference laboratory that has a duty to provide scientific excellence and quality assurance, sequenced the first Mexican and Canadian flu samples said that the genetic sequence of the H1N1 flu virus from Mexico and Canada is the same.

However, other scientists have found three distinct strains.

Two polymorphisms are different between the virulent Mexican and mild Canadian strain of the swine flu. It is too early to tell if these polymorphisms will be of clinical significance or not. That said, a national laboratory is required by law to supply accurate and comprehensive information on the genome sequences of the swine flu virus strains.

The lab should have provided a full and comprehensive analysis including the different in the polymorphisms because its analysis will be the basis for the development of a vaccine.

The wrong genome sequence analysis could lead to the wrong vaccination and could potentially cause harm, loss of life.

"Mexican and Canadian Swine Flu -- Not The Same"

http://dc-chemical.us/?q=node/35

Regarding the genetic analysis of Mexican Swine Flu vs. Canadian Swine Flu -- There are SNPs on PA and PB2 , which are ONLY present in the Mexican strain -- a sequence released by Dr. Plummer's own laboratory! The fact that this difference was in his own data should bring into question the credibility of government health labs' ability and will to protect the public interest..

Suppose we use New York / Canada as the consensus strain. There are two unique polymorphisms found ONLY in Mexico (so far, anyway):

Whether or not these SNPs are clinically significant is another question entirely -- the fact is, they should have been addressed, rather than suppressed."

If the Canadian laboratory falsely classifies the mild strain of swine flu as the lethal Mexican strain, it will have ramifications.

The Canadian government is entitled to use criminal law to deal with outbreaks of diseases. Clearly, the government would not be able to claim such a drastic mandate unless the public were led to believe the danger was great.
The analysis of the laboratory could also be the basis for the production of vaccine material. If the laboratory has got it wrong, then the vaccine companies are likely to get it wrong.

For that reason, the Canadian laboratory, flowing from its obligation as a public health body established to provide scientific excellence and quality assurance, should, at the very least, have given the entire sequence, including the two different polymorphisms and made it clear that there was a difference between the Mexican and Canadian strain.

The laxity at the Canada's National Microbiology which contains some of the world's most deadliest pathogens *was underlined when* Canadian scientist was stopped at the U.S. border after authorities found 22 vials used in Ebola research in his car.

Konan Michel Yao, 42, was apprehended by U.S. officials as he attempted to enter the United States at the Pembina, N.D., border crossing from Manitoba on May 5, 2009.

Yao faces U.S. criminal charges for smuggling and is currently in the custody of the U.S. Marshals service.

Yao working at the agency's special pathogens laboratory on an Ebola vaccine project when his research term ended in January.
The head of the lab admitted that Yao vel 3 and 4 pathogens, such as the swine flu virus, HIV and Ebola virus and that "There was…genetic material from the Ebola virus in the material that he took off with."

Canada's public health agency did not know the vials were missing until it was contacted by the RCMP, which had been alerted by U.S. border services, Plummer said.

The matter has also been referred to the Winnipeg Police Service, which has not yet decided whether to lay charges.

The National Laboratory did not inform the police about the missing vials.

XVI. Evidence of the involvement of scientists working for the UK's NIBSC, and the CDC in engineering the swine flu.

Len Horowitz, expert on emerging diseases who worked at the research faculty at Harvard School of Dental Medicine, has alleged that there is a network of genetic engineers manipulating, mutating, and distributing viruses.

In an interview on the Alex Jones show, Dr. Horowitz urges an investigation of Dr. James S. Robertson, Englands leading bioengineer of flu viruses for the vaccine industry, and avid

promoter of U.S. Government funding for lucrative biodefense contracts, along with collaborators at the US Centers for Disease Control and Prevention (CDC).

James Robertson is a scientist in the division of the National Biological Standards Board (NBSB) is a non-departmental public body (NDPB) of the UK government NIBSC, is working closely with the WHO and other international agencies in developing a candidate vaccine virus and associated reagents that are required by the vaccine manufacturing industry to produce swine flu vaccine.

It has been alleged that these suspects helped Novavax, Inc., in Bethesda, Maryland, produce genetically-modified recombinants of the avian, swine, and Spanish flu viruses, H5N1 and H1N1, nearly identical to the unprecedented Mexican virus that is allegedly spreading to the United States at the time of this posting.

„The outbreak was precisely timed to promote the company's new research and huge vaccine stockpiling contracts.
Scientists at the U.S. Centers for Disease Control (CDC) are implicated through collaborations and publications involving private contracts with Novavax, a company that obtains its biosimulars through CDC Influenza Branch director, Ruben O. Donis, and Dr. Rick Bright, previously working with Donis at the CDC, now Novavaxs Vice President of Global Influenza Programs.

Descriptions of this virus is pathognomonic, or diagnostic, of a virus that came from Robertsons circle of friends, Dr. Horowitz charges. No other group in the world takes H5N1 Asian flu infected chickens, brings them to Europe, extracts their DNA, combines their proteins with H1N1 viruses from the 1918 Spanish flu isolate, additionally mixes in swine flu genes from pigs, then reverse engineers them to infect humans. The end product could only have ended up in Mexico via the United States from Britain in care of the CDC. The CDC had to have sent them to Novavax, where Rick Brights team is now implicated in a conspiracy to commit genocide—the mass killing of Consider people for profit.“

http://involuntaryservant.blogspot.com/2009/04/dr-len-horowitz-names-specific.html

XVII. Evidence vaccinations caused the Spanish killer flu of 1918.

"The 1918 'Spanish Flu' started in American military Camp Funston, Fort Riley, USA amongst troops making ready for W.W.I - taking on board vaccinations, recruit training and all. It eventually killed about 40,000,000 people worldwide. That flu strain only appeared briefly once again, according to the US Atlanta CDC. This was in 1976 and again it struck at the US army camp Fort Dix, USA, amongst recently vaccinated troops (and no one else EVER); Fort Dix is known to have been a vaccine trial centre. Was the world's greatest 'influenza' scourge another well-hidden vaccine disaster?"---John P Heptonstall

Medical historians have finally come to the reluctant conclusion that the great flu "epidemic" of 1918 was solely attributable to the widespread use of vaccines. It was the first war in which vaccination was compulsory for all servicemen. The Boston Herald reported that forty-seven soldiers had been killed by vaccination in one month. As a result, the military hospitals were filled, not with wounded combat casualties, but with casualties of the vaccine. The epidemic was called "the Spanish Influenza," a deliberately misleading appellation, which was intended to conceal its origin. This flu epidemic claimed twenty million victims; those who survived it were the ones who had refused the vaccine. In recent years, annual recurring epidemics of flu recalled

"the Russian Flu." For some reason, the Russians never protest, perhaps because the Rockefellers make regular trips to Moscow to lay down the party line.--Eustace Mullins

In 1918, the US Army forced the vaccination of 3,285,376 natives in the Philippines when no epidemic was brewing, only the sporadic cases of the usual mild nature. Of the vaccinated persons, 47,369 came down with small-pox, and of these 16,477 died. In 1919 the experiment was doubled. 7,670,252 natives were vaccinated. Of these 65,180 victims came down with small-pox, and 44,408 died. In the first experiment, one-third died, and in the second, two-thirds of the infected ones died. ----- from Dr. William Koch's book, The Survival Factor in Neoplastic and Viral Diseases.

"Soldiers DID die following the injections which contained mercurous chloride otherwise known as CALOMEL. There WAS a widespread campaign for mercury containing vaccines. There WAS also an outpouring of propaganda [such as our present day SARS, MONKEYPOX, SMALLPOX hype] to frighten the public, there WERE large numbers of deaths at the time, all blamed on "Spanish Flu". Of course the Spanish Flu was just as bogus in the early 1900s as Swine Flu was in the 70s when President Ford faked his vaccination and helped set our country up for a REAL epidemic [vaccine induced, iatrogenic, Guillaine Barre syndrome]. Spanish Flu was as bogus as the more recent WEST NILE VIRUS, AIDS, SARS, SMALLOX and MONKEYPOX is today. They are killing the innocent and the ignorant today, just as they have in the past. The deaths from the great flu epidemic of 1918 were caused by the use of CALOMEL, the major biological poison used to treat "sepsis" as it was called in those days. CALOMEL is mercurous chloride and was used by the medical quacks of that day for "anything that ailed you". Mercury is a deadly poison." Dr. Duffy

[Vaccines] It was transmitted like wildfire among troops in trenches and camps on the Western Front of World War I, and returning US and Canadian soldiers brought it back to North America, where hundreds of thousands more people were killed. As for the source of the virus, various investigations have pointed at a huge British army base in northern France and the United States, as well as Spain. http://uk.news.yahoo.com/18/20090430/thl-1918-flu-pandemic-killed-2-64-mln-in-5effa79_1.html

http://www.whale.to/vaccine/sf1.html

Biological weapons have a long history of use. In 1346, the invading Tartar army catapulted the bodies of plague victims into the Crimean Peninsula city of Kaffa and infected its citizens. In 1763, British troops under General Jeffrey Amherst gave the Delaware Indians blankets used by people with smallpox, possibly infecting the susceptible native population.

Medical historians have concluded that the Spanish flu "epidemic" of 1918, which killed an estimated 50 million people, was caused by the widespread use of vaccines. It was the first war in which vaccination was compulsory for all servicemen.

The Boston Herald reported that forty-seven soldiers had been killed by vaccination in one month. As a result, the military hospitals were filled, not with wounded combat casualties, but with casualties of the vaccine.

In 1948 Heinrich Mueller, the former head of Nazi Germany's Gestapo, told his CIA Interrogator that the most devastating plague in human history was man-made.

He was referring to the influenza pandemic of 1918-1919 that infected 20% of the world's population and killed between 60 and 100 million people. This is roughly 3 times as many as were killed and wounded in World War One, and is comparable to WWII losses, yet this modern plague

has slipped down the memory hole.Mueller said the flu started as a US army bacteriological warfare weapon that somehow infected US army ranks at Camp Riley KS in March 1918, and spread around the world.

At a 1944 Nazi bacteriological warfare conference in Berlin, General Walter Schreiber, Chief of the Medical Corps of the German Army told Mueller that he had spent two months in the US in 1927 conferring with his counterparts. They told him that the "so-called double blow virus" (i.e. Spanish Flu) was developed and used during the 1914 war. "But," according to Mueller, "it got out of control and instead of killing the Germans who had surrendered by then, it turned back on you, and nearly everybody else." ("*Gestapo Chief: The 1948 CIA Interrogation of Heinrich Mueller*" Vol. 2 by Gregory Douglas, p. 106) Actually the Armistice took place Aug 11, 1918.

http://elliotlakenews.wordpress.com/2006/12/08/was-the-spanish-flu-man-made/

According to Dr. Jerry Tennant, the widespread use of aspirin during the winter that followed the end of The Great War could have been one of the key factors that contributed to the earlier pandemic by suppressing the immune system and lowering body temperatures that allowed the flu virus to multiply. Like aspirin, modern-day antiviral drugs like Tamiflu® and Relenza® also lower body temperatures, and therefore can also be expected to contribute to the spread of a pandemic.

„What is new about this virus is that it has a mixture of DNA from animals, birds, and humans! Normally viruses are species specific. Viruses that cause illnesses in hogs can rarely be transmitted to humans, but that virus usually cannot be transmitted human-to-human. Although some express confusion about how this virus could have mutated in a way that a hog virus and a bird virus could mix with a human virus and cause human to human transfer, it is known that mixing of viral DNA has been done in laboratories.

Except for the fact that the DNA of this virus is suspect, we should not expect to have an epidemic that kills many people. One of the reasons is that viruses usually do not kill people—they just make you feel bad. What killed the majority of people in 1918 was that the flu allowed people to get bacterial pneumonia from Streptococcus. That is what kills you. We are much better able to deal with bacterial pneumonia now than they were in 1918.

However, the genetically altered viruses like the AIDS virus have killed many. That is the reason for current concerns.

In 1897, the German company Bayer patented aspirin. Their patent expired in 1917, just at the end of World War I. Many of the returning American soldiers brought it back to their families. It was the first time that there had been widespread use of aspirin with the flu. It is known that when a virus attaches to a cell, it cannot duplicate if there is a fever, but it will make a million copies of itself if the temperature is low. Thus lowering temperature with drugs allows viruses to multiply! It is also known that aspirin and drugs like it suppress the immune system making it easier for bacteria to grow. This makes it easier for pneumonia to occur. It is not clear how much aspirin contributed to the spread of the 1918 flu. A current problem is that the antiviral drugs, Tamiflu® and Relenza® lower body temperature. It is not uncommon to see people get the flu and start one of these drugs. They feel better. Then a week later, they have pneumonia.

Since 2003, there have been multiple warnings that the H5N1 bird flu virus would kill millions of people. Only 257 people are known to have died from the bird flu! Over 1,000,000 people get malaria every year, but there are no dire warnings from the World Health Organization or President Obama about malaria!

Can there be other reasons that we are being frightened about a flu pandemic? The Bush administration bought $1.4 billion of Tamiflu® "to combat the bird flu". The Obama administration wants to buy enough to treat 25% of the American population. Other governments are stockpiling it as well. This is despite the fact that Tamiflu® doesn't work for the bird flu and is not likely to work for the swine flu either. "After following WHO protocols in treating 41 victims of the H5N1 bird flu virus (19% of the worldwide cases of bird flu reported to date), Nguyen Tuong Van, MD, who runs the intensive care unit of the Center for Tropical Diseases in Hanoi, Vietnam concluded that Tamiflu®, the drug most widely stockpiled around the world to combat a potential bird flu pandemic, is "useless". (Wikipedia) Thus, the American taxpayers paid billions of dollars for a drug to treat about 100 cases per year of the bird flu. Someone made a lot of money from a drug that does not work for an epidemic that never happened. They are making even more money this year. If only we were using that money for something useful like treating malaria!“ writes Tennant.

Scientists are opposing a plan in Japan to mass vaccinate against the “swine flu” on the grounds that the virus will re-assort itself into a hybrid H1N1/H5N1 strain or mutate into a new, more lethal H5N1 strain. The nightmare scenario is that the mutated virus may take on the characteristics of H5N1 or the avian flu

http://www.rense.com/general85/a1.htm

„The AH1N1 virus has infected some 100 students in Kobe, Japan. Many of the students have no history of traveling abroad. There are plans underway to begin a mass vaccination against AH1N1. However, there are misgivings in the international research community about administering an AH1N1 vaccine.

The fear is that once a vaccination against AH1N1 is started, the virus will re-assort itself into a hybrid H1N1/H5N1 strain or mutate into a new H5N1 strain. The current AH1N1 strain, as previously reported by WMR, contains synthetically gene-spliced strains of two forms of human flu viruses, two forms of swine flu viruses, and a single form of avian flu virus.

What researchers have told us is that as long as the current AH1N1 can infect humans, it will not try to mutate. Even though there have been deaths from AH1N1, most of those infected are sick for up to four days, take Tamiflu or similar drugs, and recover with immunity from the hybrid or "novel" virus. The vaccination program will be a profit maker for such Big Pharma firms as Sanofi-Aventis, GlaxoSmithKline and Baxter International.

However, with vaccinations, the AH1N1 virus will, of course, be rejected by human hosts and cases around the world will decrease. However, then, the virus will begin to mutate in order to successfully infect human hosts. And when that happens, the new, newly-mutated virus will become much more transmissible and more pathogenic.

The nightmare scenario is that the new, mutated virus may take on the characteristics of H5N1 or the avian flu. The vaccines administered for AH1N1 will be ineffective against the new strain of H5N1 and the world may face a more deadly pandemic then the current AH1N1 outbreak. There are scientists at WHO who are aware of this scenario but their alarm has been suppressed by political and economic considerations. „

A lack of quality control of the vaccinations is as much a problem today as it was in 1918.

In the US, the differing standards applied by different groups are due to the fact that experiments on engineered viruses such as the 1918 flu are approved on a case-by-case basis by Institutional

Biosafety Committees (IBCs), composed of local scientists and officials. Critics say these are free to interpret the official guidelines in a way that suits them.
“There is no effective national system to ensure consistency, responsibility and good judgement in such research,” says Edward Hammond of the Sunshine Project, a biosecurity pressure group in Austin, Texas. In a review of IBCs published this month, he found that many would not provide minutes of recent meetings as required by law.

He says the IBC that approved the planned 1918 flu study at the University of Washington considered only one scenario that could result in workers being exposed to airborne virus – the dropping of samples. Its solution: lab workers “will be trained to stop breathing”.

Bird flu vaccination could lead to new strains

* 19:00 24 March 2004 by Debora MacKenzie

Vaccinating chickens may be the only way out of the bird flu nightmare in Asia. But it could also lead to the evolution of new strains, the latest research shows, increasing the risk of a human pandemic.

Only intensive surveillance can stop this happening, but experts say the countries affected do not have the necessary systems in place.

Last week China declared its bird flu outbreaks had ended. Health officials are vaccinating millions of the birds that escaped slaughter. Indonesia is also vaccinating, and other Asian countries hit by the H5N1 bird flu are considering the same strategy.

But the H5N1 virus is almost certainly still circulating among the vaccinated birds, and the fear is that in this abnormal setting it may evolve into a form that is not only fatal to people, like the current one, but can also spread from person to person.

XVIII. Precedents: the abandoned swine flu mass vaccination program of 1976

In 1976, a mild swine flu swept through the United States. President Gerald Ford mandated a mass vaccination programme -- which was carried out by the same vaccine companies as today -- that had to be abandoned because of the catastrophic results.

President Ford was acting on the advice of medical experts, who believed they were dealing with a virus potentially as deadly as the one that caused the 1918 Spanish influenza pandemic.

The virus surfaced in February 1976 at Fort Dix, New Jersey, where 19-year-old soldier, Pvt. David Lewis, told his drill instructor that he felt tired and weak, although not sick enough to skip a training hike. Lewis was dead with 24 hours.

The autopsy revealed that Lewis had been killed by "swine flu," an influenza virus originating in pigs. By then several other soldiers had been hospitalized with symptoms. Government doctors

became alarmed when they discovered that at least 500 soldiers on the base were infected without becoming ill.

The incident recalled 1918, when infected soldiers returning from the trenches of World War I triggered a contagion that spread quickly around the world, killing at least 20 million people. The nation's health officials urged Ford to authorize a mass inoculation program aimed at reaching every man, woman and child.

Mass vaccinations started in October, but within weeks reports started coming in of people developing Guillain-Barré syndrome, a paralyzing nerve disease, right after taking the shot. Within two months, 500 people were affected, and more than 30 died. Amid a rising uproar and growing public reluctance to risk the shot, federal officials abruptly canceled the program Dec. 16.

In the end, 40 million Americans were inoculated, and there was no epidemic. A later, more technically advanced examination of the virus revealed that it was nowhere near as deadly as the 1918 influenza virus. The only recorded fatality from swine flu itself was the unfortunate Pvt. Lewis.

Healthy men, women and children went to receive the untested swine flu injection and died as a result of the injection. Others received permanent injuries.

The programme was stopped. An Australian doctor, Archie Kalokerinos, gave his account of his involvement in the 1976 swine flu pandemic:

„In 1976 I was working in the far north of Australia amongst Aborigines. I observed, in one community of only a few hundred people, when they were given the flu vaccine (probably the Victorian strain but this detail does not really matter because nobody outside a few selected individuals really knows what is in any particular batch), six men died suddenly soon afterwards. They were not all 'old'. One was in his early twenties. A few weeks later, in another community I found that individuals with heart or potential heart problems or diabetes were particularly likely to drop dead soon after being given the vaccine.

Obviously, there was a problem with some batches of the flu vaccine.

A few months later I was in America. President Ford had been told by his health advisers that there was going to be a huge epidemic of 'swine flu', that this could kill may thousands and the only way to prevent this catastrophe was to vaccinate the entire population of America – every man woman and child - with a specific vaccine.

So the vaccine was manufactured and the biggest vaccination campaign in history was begun. I was concerned because the vaccine could not be properly tested in a short period. None of the recipients would know anything about what they were being injected with and the chances were that many would die suddenly. Furthermore, it was extremely unlikely that an epidemic of swine flu would occur. So I spoke out. At first the newspapers got hold of what I said and headlined, 'Australian Physician Call It Mass Murder'. Then I appeared on Kathy Crosby's television program.

Watching that was a man in New York who did not like a gentleman named Gambino the Mafia boss. Gambino was about 70 years old and had a history of heart problems. It was a simple matter to get someone to persuade Gambino to have the flu shot and Gambino obliged by dropping dead. The newspapers got it right when they stated, 'Mafia Flu Jab Conspiracy'.

People were dropping dead in the buildings where they received their shots. Others became

paralyzed. The whole program ground to a halt.

President Ford decided to settle the matter quickly. In front of the whole world, on television, he rolled up his sleeve and 'had his shot'. I claimed at the time that he was given a 'dud' shot and I am certain that this was actually done. Then President Ford invited all the news media men and women who were milling around to line up and have their shots. Only one man volunteered and he happened to be the White House press secretary. All the others refused the invitation.

There was not a single case of swine flu. There never was going to be an epidemic of swine flu. How was it that the world's most powerful man with the world's greatest department of health got it all so wrong? No one really knows the answer but what ever it is it is certainly not clean and tidy.

Furthermore, as far as I know I was the only practicing doctor who spoke out against it and warned about almost certain consequences. How was it that a doctor with only basic qualifications and not even the possessor of American citizenship stood out alone? There was at least one researcher, Anthony Morris, who did try to speak out but he was at the time censored and censored very hard.

This, therefore, is a classical example of how only one man got it right and everyone else got it wrong. This is an important consideration because, when the subject of vaccines is discussed the fact that the vast bulk of the medical establishment states that something is so it is not, in reality, necessarily so. If the establishment can get something so vast and important as the swine fiu vaccine campaign so wrong then it is logical to reason that they could also get a lot of other things wrong. At least it gives reasons to doubt what the establishment claims to be fact. If doctors and members of the general public considered this fewer errors would be made and fewer individuals would suffer unnecessarily.
http://webpages.netlink.co.nz/~ias/swine.htm"

Claims of over $1.3 billion came from victims of the vaccine that caused severe paralysis, Guillain-Barre Syndrome, and death of 25.

XIX Inadequate performance of the government in stopping the spread of the swine flu as cover for spreading a pandemic

The necessity for a mandatory vaccine or multiple mandatory vaccines could have been avoided by early curtailment of the virus' spread says an expert. Hong Kong virologist and SARS expert Yi Guan says the World Health Organization erred in not responding fast enough to the outbreak and thus contributed to more cases being spread rapidly. The fact that the borders were not closed and airplane flights were not halted into Mexico or departing from Mexico furthered the spread of the swine flu. (Stone, SARS Sleuth Tracks Swine Flu, Attacks WHO, 2009)
http://sciencenow.sciencemag.org/cgi/content/full/2009/504/1?etoc

Americans for Legal Immigration PAC called on the Obama administration April 27 to immediately close the southern border to Mexico and restrict all inbound air and ground traffic from Mexico to emergencies and product delivery to protect American lives from the Mexican Swine Flu outbreak., but the borders were left open.

Conservative Caucus and Judicial Watch have uncovered evidence of a Canada/US/Mexico policy to leave Borders Open during Pandemics.

http://www.youtube.com/watch?v=9q9MSVYWLtA

In addition, the Department of Homeland Security would not allow Border Guards to wear protective masks to protect themselves and their families from further outbreaks. Only intervention from Congressmen Bilbray (R-CA) and Burgess (R-TX) had Border Guards were finally allowed to wear masks. denials by DHS that it hadn't prohibited mask wear by Border Guards.

The "Model State Emergency Heath Powers Act" allows the Government to seize and or quarantine a town and all the people within it.

But why does the government decide on such drastic measures when it comes to towns and cities while allowing the borders to remain open?

Futhermore, the CDC has set up quarantine facilites at 19 airports. Passengers, presumably without guns, will be taken to quarantine facilities when they step off the plane.

One report states that the sum of 15,000 dollars has been calculated to keep 200 people quarantined for a month. That works out at 75 dollars per person for a month. This is a sum that might cover the costs of a lethal injection and a plastic FEMA coffin and/or transport to an incinerator by rail. No adult can be kept for 75 dollars a month in any facility in the USA in good health.

„MIA may be a quarantine site in pandemic
In the event of a pandemic, flights would be rerouted to Miami International Airport and 18 other major U.S. airports, according to plans by the U.S. Centers for Disease Control and Prevention.
BY MICHAEL TURNBELL AND SCOTT POWERS
Sun Sentinel
As the swine flu scare fades, Miami International Airport and 18 other major American airports have been lined up to handle a future pandemic that could require them to quarantine international flights.
The U.S. Centers for Disease Control and Prevention has set up stand-by quarantine/screening facilities at the 19 airports to which all flights from affected countries would be diverted.
a quarantine of up to 200 people could cost $15,000 a month, with costs of an actual quarantine running into the hundreds of thousands of dollars.
That works out at about 75 dollars per person for a month! Howis this possible?

Thi sis budget you die on not live on

http://www.miamiherald.com/business/story/1089929.html
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http://waronyou.com/forums/index.php?action=printpage;topic=9944.0

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Title: Swine Flu Vaccination Poses Serious Threat to Your Health
Post by: Raven on June 16, 2009, 10:58:31 PM

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http://euro-med.dk/?p=9152&print=1 (http://euro-med.dk/?p=9152&print=1)

Swine Flu Vaccination Poses Serious Threat to Your Health

Posted By Anders On June 15, 2009 @ 00:16 In English, Euromed | 6 Comments

No one can expect the government to hold the citizens of the nation to a higher standard than it holds itself, and yet that is exactly what the current administration is doing.

When individuals take precautionary measures and their government does not - i.e. closing the borders, etc. - forced innoculations in the face of open borders and unrestricted air travel fly in the face of reason.

Quarantining towns and cities and injecting someone without consent must be viewed as a more servere response than a simple restriction of international or interstate travel.

Injection of an untested substance into one's body, without consent, is a violation of the sanctity of life upon which all of our laws are based, and in mechanics and effect, is tantamount to rape.

Were it not the government performing such a mass, forced inocculation then the perpetrator would surely face assault charges, if not for unlawful imprisonment, abduction, and mutilation and possibly even murder or mass murder.

In addition, Army criminal investigators are looking into the possibility that disease samples are missing from biolabs at Fort Detrick -- the same Army research lab from which the 2001 anthrax strain was released, according to a recent article in the Fredrick News Post.13 In February, the top biodefense lab halted all its research into Ebola, anthrax, plague, and other diseases known as "select agents," after they discovered virus samples that weren't listed in its inventory and might have been switched with something else.

According to a report in the Washington Post, there will be no investigation.

“An inventory of potentially deadly pathogens at Fort Detrick’s infectious disease laboratory found more than 9,000 vials that had not been accounted for, Army officials said yesterday, raising concerns that officials wouldn’t know whether dangerous toxins were missing.

After four months of searching about 335 freezers and refrigerators at the U.S. Army Medical Research Institute of Infectious Diseases in Frederick, investigators found 9,220 samples that hadn’t been included in a database of about 66,000 items listed as of February, said Col. Mark Kortepeter, the institute’s deputy commander.

The vials contained some dangerous pathogens, among them the Ebola virus, anthrax bacteria and botulinum toxin, and less lethal agents such as Venezuelan equine encephalitis virus and the bacterium that causes tularemia. Most of them, forgotten inside freezer drawers, hadn’t been used in years or even decades. Officials said some serum samples from hemorrhagic fever patients dated to the Korean War.

Kortepeter likened the inventory to cleaning out the attic and said he knew of no plans for an investigation into how the vials had been left out of the database. “The vast majority of these samples were working stock that were accumulated over decades,” he said, left there by scientists who had retired or left the institute.”

XX. Evidence as to manipulation of the legal framework to allow mass murder with impunity

President Obama and his predecessor President George Bush, have introduced legislation and executive orders that have stripped the civic rights of the people of the United States, specifically by criminalising their right to refuse a “swine flu” or other pandemic virus vaccine, and so paved the way for the implementation of a programme of mass murder by means of a virus and vaccine while giving themselves and their agents immunity.

„The Project BioShield Act of 2004 (S. 15) became law on July 21, 2004 "to provide protections and countermeasures against chemical, radiological, or nuclear agents that may be used in a terrorist attack against the United States by giving the National Institutes of Health contracting flexibility, infrastructure improvements, and expediting the scientific peer review process, and streamlining the Food and Drug Administration approval process of countermeasures."

In other words, the FDA may now recklessly approve inadequately tested, potentially dangerous vaccines and other drugs if ever the Secretaries of Health and Human Services (HHS) or Defense (DOD) declare a national emergency, whether or not one exists and regardless of whether treatments available are safe and effective.

The Public Readiness and Emergency Preparedness (PREP) Act slipped under the radar when George Bush signed it into law as part of the 2006 Defense Appropriations Act (HR 2863). It lets the HHS Secretary declare any disease an epidemic or national emergency requiring mandatory vaccinations. Nothing in the Act lists criteria that warrant a threat.

Also potential penalties aren't specified for those who balk, but very likely they'd include quarantine and possible fines.

The HHS web site also says the Secretary may "issue a declaration....that provides immunity from tort liability (except for willful misconduct) for claims of loss caused, arising out of, relating to, or resulting from administration or use of (vaccine or other pharmaceutical) countermeasures to diseases, threats and conditions determined by the Secretary to constitute a present, or credible risk of a future public health emergency...."

The industry-run US Food and Drug Administration (FDA) notoriously rushes inadequately tested drugs to market, putting their efficacy and safety into question, and turning those who use them into lab rats. It includes everyone if a mass vaccination is ordered on the mere claim of a public emergency - no proof required.

The Pandemic and All-Hazards Preparedness Act (S. 3678) is the other worrisome law, effective December 19, 2006. It amended "the Public Health Service Act with respect to public health security and all-hazards preparedness and response, and for other purposes." Even its supporters worry about issues of privacy, liability, and putting profits over public health. Critics express greater concerns about dangerous remedies for exaggerated or non-existant threats as well as mass hysteria created for political purposes.

The Model State Emergency Health Powers Act (MSEHPA) has been criticised heavily.

On its web site, the ACLU says this about MSEHPA:
It's "written in a way that doesn't adequately protect citizens against the misuse of the tremendous powers that it would grant in an emergency. (It's) replete with civil liberties problems. Its three top flaws are that:

(1) It fails to include basic checks and balances (by) grant(ing) extraordinary emergency powers (that) should never go unchecked. (It) could have serious consequences for individuals' freedom, privacy, and equality."
(2) "It goes well beyond bioterrorism (with) an overbroad definition of 'public health emergency" that may be anything a local or national authority declares for any reason with no conclusive evidence for proof.
(3) "It lacks privacy protections (and) undercut(s) existing protections for sensitive medical information."
MSEHPA worries other organizations besides the ACLU, both conservative and progressive - including the Free Congress Foundation, American Legislative Exchange Council, conservative association of state legislators, Human Rights Campaign, and Health Privacy Project.
The Real Threat of Dangerous, Mandatory Vaccinations
In the wake of the hyped Swine Flu scare, media reports suggest mass vaccinations are coming. The May 6 Kimberly Kindy - Ceci Connolly Washington Post one, for example, headlined "US May Add Shots for Swine Flu to Fall Regimen" without saying they'll be mandatory but reading between the lines suggests the possibility this year or later.

Any Federal or State laws that allow the government under any authority, including a presidential executive order, to compel the people of United States of America to take a vaccination for which there is verifiable scientific evidence for believing could be very dangerous to them, both individually and collectively, and which, also includes provisions, barring them from claiming any compensation for any injury or death while enforcing punishments so severe for refusing that it could cost people lives or result in imprisonment, are in violation of the Preamble, the Constitution and the Bill of Rights and the Laws of the land.

To accept the legal framework of the Patriot Act 1, and 2, The Model State Emergency Health Powers Act, the NATIONAL SECURITY PRESIDENTIAL DIRECTIVE/NSPD 51 and HOMELAND SECURITY PRESIDENTIAL DIRECTIVE/HSPD-20 is to accept that the legal rights of the US citizen today in 2009 are no different from the prisoners of the Nazi German concentration camps when it comes to their right to refuse an unproven vaccine forced on them by agents claiming the authority of an official office that was, however, also outside the scope of the duties and offices mandated by the German Constitution.

The prisoners in the Nazi concentration camps had no right under law to refuse a vaccine or experimental drug just as the US citizens today have no right to refuse an unproven pandemic vaccine today. Any refusal to allow a vaccination by Nazi concentration camp inmates was met with severe punishment including shooting, beatings, and solitary confinement. And any refusal by US citizens today will be met by the same severe punishment including shooting and imprisonment because the government agents administrating the vaccines are authorised to use these punishments against criminals, and those who refuse the vaccination are classified as criminals.

Nazi concentration camp prisoners were barred from seeking compensation or any form of legal redress for any injuries and damages done to them by forced vaccination – if they survived, at all, and most did not. And the citizens of the United States of America are also to be barred from seeking compensation or any form of legal redress for any harm, including death, inflicted on them by the vaccinations.

The Nazi doctors who forced prisoners to take experimental substances -- under contract often from pharmaceutical companies such as Bayer -- were condemned for their crimes by the US Military Tribunal at Nuremberg. In response to this barbarism, a new code of medical ethics was drawn up called the Nuremberg Code, which emphasises the importance of obtaining the individual consent and also adequate information before any vaccination is administered or any medical experiment performed.

The Preamble, Constitution and Bill of Rights which are the law of the land, and from which all government bodies derive their authority, make it clear that the citizens of the United States can never legally and constitutionally be stripped of all their rights in the same way that the Nazi prisoners of war were by any legislation or any Presidential executive order waiver, and they can never be forced to take an unproven vaccine under punishment of being shot or imprisoned as criminals and have their their right to compensation abolished by the government in advance without their consent.

Articles IV and VIII of the Amendments are two of the articles that give the people of the United States the legal right to refuse a vaccination or any medical experiment to be inflicted on their bodies by force.

Article IV. 'The right of the people to be secure in their persons . . . against unreasonable searches and seizures shall not be violated."

This Article makes it clear that provisions in the state and federal health emergency acts to go into houses and seize property if people refuse to accept an unproven vaccine are illegal.

Article VIII. "Excessive bail shall not be required, nor excessive fine's imposed, nor cruel and unusual punishments inflicted."

Article VIII makes it clear that “cruel and unusual punishments” cannot be inflicted on the citizens of United States, but that all punishments need to be in proportion to the offence.

The punishments envisaged for refusing a vaccine are not in proportion to the offence.

Isn’t shooting someone or imprisoning them as a criminal, as the federal government claims the right to do under its draconian emergency health powers, because they refuse to take a dangerous vaccine a cruel and unusual punishment, and therefore an extreme and flagrant violation of Article VIII?

Isn’t putting someone in a “FEMA” camp for quarantine, that is to say, imprisoning them without right to a jury, just for refusing to have an unproven vaccine injected into their body without their consent an “excessive” and disproportionate punishment?

Isn’t abolishing the right of people to claim any compensation for any injury or damage inflicted on them by vaccination with an unproven substance a “cruel and unusual punishment?”

Again, it is clear from the Constitution that the government is prohibited from inflicting excessive and unreasonable punishments possible under criminal law and also military law for an action that is a right of every citizen of the United States of America, namely the right to refuse to allow an unknown, potentially lethal substance, to be injected into their body, and any “immunity” that the government confers upon itself as it commits these acts is an illegal and unconstitutional “immunity”.

It is legally unconstitutional for the government to treat its citizens, free men, women and children and members of a free state, with rights and dignities that cannot be invaded, as "slaves," and “prisoners” to be subjected to military despotism or arbitrary medical dictates and compelled to take a vaccination on pain of death without recourse to the courts of law or compensation if they are injured as a result of this compulsory vaccination giving them the same legal status as the prisoners of the Nazi concentration camp, that is to say, no legal status and no legal rights.

The Nazi concentration camp doctor could force any vaccine into the helpless prisoner without being required to ask for the prisoner's permission, but the Constitution of the United States prohibits doctors, nurses or other personal from injecting into citizens an untested substance by force and without full approval and consent of the patient.

The US Military Tribunal condemned the Nazi doctors at the Doctor's Trial at Nuremberg of 1946 - 1947.
http://www.law.umkc.edu/faculty/projects/ftrials/nuremberg/NurembergDoctorTrial.html

In the Nazi concentration camps, prisoners were forced to allow camp personnel perform any operation they wished on their bodies, often barbaric operations, barbaric experiments with drugs and untested substances that resulted in the death in agony of those prisoners, often over a period of days or weeks.

But the United States citizen cannot be treated in the same way as a prisoner in a Nazi concentration camp and subjected to the same compulsory vaccinations by medical or military personnel because of the "unalienable" "retained" and "reserved" rights possessed by the People under the Preamble, Constitution and Bill of Rights, Laws and Statues of the land.

In Nazi Germany, doctors who refused to go along with the dictates of the totalitarian bureaucratic Nazi state were punished and had their licenses. But doctors who are citizens of the United States cannot legally and constitutionally be forced to go along with dangerous medical experiments on the entire population by threats of having their licence removed.

The rights of all citizens cannot be legally invaded or denied by any Government, and so it follows, that mandatory vaccination is always and without exception illegal, unconstitutional, and should be absolutely banned by any court in the US whose judges are themselves not guilty of abusing their office by upholding illegal laws.

Not only the Nazi German doctors, but also the Nazi German judges themselves were put on trial at Nuremberg for allowing German citizens in spite of the Constitution of the German Republic, which assigned solid civic rights to all citizens, to be systematically stripped of those rights.
http://www.law.umkc.edu/faculty/projects/ftrials/nuremberg/alstoetter.htm

That judges stretch the Constitution and laws to the point where they allow any crime and who have been involved in crimes against humanity perpetrated by "government agencies" and the medical establishment are not immune from prosecution is shown by the judgements of the Nuremberg Trial of 1947.

Flowing from the judgements against Nazi German functionaries involved in forced vaccinations handed down at the Nuremberg War Crime Trials, it follows that personnel belonging to government bodies, courts and private companies that force the US people to undergo mass vaccination with an unproven substance under threat of being punished as criminals if they do not, and even shot under provisions of criminal law, should be made, both collectively and individually, liable not just for paying damages for those harmed by the vaccine as was the case in 1976 when substantial damages were paid out to victims of the government-mandated swine flu vaccine programme, but also for charges of conspiracy to mass murder.

To sanction the narrowing down of the choice of a citizen of the United States, endowed with an extremely wide horizon in which to exercise their free will thanks to the provisions of the Preamble, Constitution and Bill of Rights, to only two options, namely the alternative of taking a dangerous, possibly lethal vaccine, or of being shot or imprisoned as a criminal, is, in effect, to

sanction the murder of that individual. For if a person cannot choose except between death by a dangerous vaccine or death by a bullet, then the life of that person is being directly threatened by an outside agent and there is way out for them except death. That person cannot resist a dangerous vaccine by law and they cannot resist it by force.

If a government can so violate the basic freedoms of citizens of the United States as to force them to take an untested vaccine for a “swine flu” or other pandemic, then it can force them to do anything, such as, for example, not to drive a car, an activity which has been proven to be far more dangerous to people’s health than the swine flu, which has killed relatively few people so far in the USA.

On this logic, a government can force a mandatory reading program on its citizens on the grounds that this is good for the well being of the individual and the country, and shot or imprison anyone who does not participate without any right to compensation.

The right of the citizens of the United States to refuse a vaccination flows from the second article of the Declaration state that "*all men*" are endowed by their Creator with "*certain*" "*unalienable rights*" *among whic*h are *"life" "liberty" and the "pursuit of happiness."*

To force the people of America to take a dangerous vaccine which has a high possibility of causing death and injury and so robbing them of their “life”, “liberty” and “pursuit of happiness” is to violate their unalienable right to life, safety, liberty and happiness of the individual.

The right to "life" of course is stated first among all the rights granted by the Constitution to a citizen of the United States of America because without life is the prerequisite of all other activities; and the right to "liberty" is stated second, because without reasonable scope to exercise our freedom to pursue our ideas of happiness in our own way, without infringing on the liberty or happiness of others, we enjoy a merely nominal notion of liberty that is useless and meaningless.

The right to freedom from dangerous vaccines and other biological agents is directly covered by the “right to life”, and is, therefore, an “unalienable right” of every American citizen today as yesterday that no government can invade.

The government’s mandatory “swine flu” vaccine programme is, therefore, not only illegal and unconstitutional, but it is also contrary to accepted norms of medical ethics, which reinforce the right of a patient to decide what operation is or is not to be performed on his own body and blood, including what vaccination to accept.

The President has no legal or constitutional right to issue decrees, executive orders or waivers that grant him or any other body, national or international, such as the United Nations or WHO, the right to abolish, limit or infringe on the civic rights of the citizens of the United States of America anchored in the Constitutional Charters of the United States.

The Constitution and Bill of Rights judge any President who acts in this way, to be acting illegally, for he is acting in opposition to the very body of laws from which he derives his own authority. Presidential authority has no authority whatsoever when it authorises flagrant violation of the Constitution from which that president derives authority in the first place.

As the Preamble, Constitution and Bill of Rights makes clear, the people of United States of America are endowed originally and inherently with all necessary or unalienable rights for life, liberty and happiness, and their government exists simply or chiefly for the purpose of protecting and enforcing these rights. The government cannot grant or deny its citizens rights, which exist inalienably in the people themselves.

No President, no government has the authority to deny the citizens of the United States any of their constitutional rights.

Articles IX and X state:

"The enumeration in the constitution of certain rights, shall not be construed to deny or disparage others *retained by the people.*

"The powers not delegated to the United States by the Constitution, nor prohibited by it to the States, are reserved to the States respectively, or *to the people.*"

These Articles underline that the people of the United States are acknowledged to have specific "certain" "unalienable" "reserved" and "retained" rights, and that these rights are divinely conferred and naturally inherent and, therefore, cannot be restricted, limited or infringed upon by any government, in any way, but must be respected, protected and enforced by all governments, and that governments exist for the chief purpose of defending and enforcing these rights.

The most basic, essential and obvious right is the right of American people to choose what happens to their own bodies and which treatments or vaccinations to accept and under what conditions, that is to say, the right to “life.”

Because the people of the United States of America have the right to decide what vaccination is injected into their bodies as part of their “right to life” and “liberty”, they can never be legally forced to accept an injection of an unproven substance under threat of a drastic punishment such as being shot as a criminal suspect, and without any recourse to compensation or any right to legal redress.

It follows from the above that any government personnel, police, military, doctors or nurses who are participating in such a forced mass vaccination programme are acting illegally and unconstitutionally and without exception, in every single case, with every single vaccination, violating the most fundamental and inalienable rights of the people of the United States.

The Declaration of Independence states that the right of the American people to “life” is “unalienable”, creating a rock-like legal basis for the right to refuse any vaccination.

"We hold these truths to be self-evident, that all men are created equal, that they are endowed by their Creator with certain unalienable Rights, that among these are Life, Liberty and the pursuit of Happiness. That to secure these rights, Governments are instituted among Men, deriving their just powers from the consent of the governed,—That whenever any Form of Government becomes destructive of these ends, it is the Right of the People to alter or to abolish it."

The rights of Americans are expanded on under THE FIVE ARTICLES OF THE DECLARATION OF RIGHTS, JULY 4, 1776.

First: All men are created equal.
Second: All men are endowed by their Creator with certain unalienable rights, among which are life, liberty, and the pursuit of happiness.
Third: Governments are instituted among men to secure these unalienable rights.
Fourth : Governments derive their just powers from the consent of the governed.
Fifth : Whenever any form of government becomes destructive of these ends, it is the right of the people to alter or to abolish it.

The Declaration states that there are "Natural" and "Divine" rights that human beings are endowed with, and that these exist before any human laws, charters or constitutions were ever written. These rights antedate, and therefore takes precedence over State and National laws and Constitutions, which, to be valid, must be based on the *fundamental* principles of *inherent human and natural rights* which are *naturally and divinely* and equally conferred upon all human kind.

The official title of this document is "The Unanimous Declaration of the Thirteen United States of America," which shows that it is the official statement or code of the foundation governing principles of the New Nation issued by its first Congress and has, therefore, the full effect of a "Constitution," "Pre-Constitution" or "Bill of Rights."

It follows that no government, no president, in spite of any self proclaimed “state emergency” – a “state of emergency” was also the pretext that the Nazis and Nazi Judges used to destroy the German Constitution -- or any war on terrorism or disease can ever introduce regulations or laws that override these basic rights to life for they are anchored in foundation of the country itself, in the Constitution and its democratic code.

The implementation of emergency health powers and martial law will mean will mean the destruction of the Constitution and is therefore always, without exception illegal and unconstitutional.

The courts of the United States have handed down clear judgements against forced vaccinations. In 2004, U.S. District Court Judge Emmet G. Sullivan issued a temporary injunction, saying the Pentagon’s compulsory vaccination of military personnel against anthrax was illegal.

Until proven otherwise by the Food and Drug Administration, U.S. District Court Judge Emmet G. Sullivan in his 34-page decision agreed with the contention of unidentified active duty National Guard and civilian defense employees that Anthrax Vaccine Absorbed was an unlicensed, investigative drug and being used for an unapproved purpose.

So concerned was Congress about the impact of vaccines that it passed a law amid fears that the use of such drugs may have led to unexplained illnesses among veterans of the 1991 Persian Gulf War, which have come to be known as Gulf War Syndrome.

The judgements against vaccinations go back for decades. In 1894 Judge Bartlett, of the New York Supreme Court, in the case of Walters, decided that:

"To vaccinate a person against his will, without legal authority so to do, would be an assault."

So, to force someone to take a vaccine against their will is itself an assault or a criminal offence under this interpretation. If the person who is forced to take the vaccine then dies, it flows that not an assault but a murder has been committed. And when a murder has been committed, the US Justice system requires the perpetrators to be brought to justice even if they are government officials or government personnel.

Judge Gaynor also of the New York Supreme Court and also in the same year, 1894, in the case of Smith against Health Commissioner Emery of Brooklyn issued a ruling later confirmed by the New York Court of Appeals:

"If the Commissioner [of Health] had the power to imprison an individual for refusing to submit to vaccination, I see no reason why he should not also imprison one for refusing to swallow a dose. But the Legislature has conferred no such power upon him, if, indeed, it

has the power to do the like. ... If the Legislature desired to make vaccination compulsory it would have so enacted. Whether it be within its power to do so, and if so, by what means it may enforce such an enactment, are not for discussion here."

XVIII. Constitutional issues: the legality v. Illegality of jeopardising the Life, health and "public good" by mass vaccinations

Flowing from the Preamble, Constitution and Bill of Rights, the purpose of the implementation of any Federal or State government swine flu or any other mass vaccination or medical programme has to be to promote and safeguard the Life, Liberty and Pursuit of Happiness including property and health of people of the United States of America.

There is, therefore, an absolute requirement for any vaccination's beneficial effects for the people of the United States of America as a whole, not just individually but also collectively, to be proven according to generally accepted scientific principles be based on thorough tests and trials and documented in scientific literature and other sources of information.

The US government is legally and constitutionally obliged to be dedicated to the fulfilment of the duty to implement only those public health or vaccination programmes using appropriate policy and regulatory frameworks that are proven to be in the best interests of the health of the people of United States of America by the *THE FIVE ARTICLES OF THE DECLARATION OF RIGHTS, JULY 4, 1776.*

The Charters of the United State Constitution say that the government derives its power from the People and must exercise its authority only for measures that contribute to the Life, Liberty and Pursuit of Happiness the people, and cannot grant itself "immunity" by a special decree that exempts it from the duties for whose specific purpose it was founded in the first place.

Furthermore, the Preamble to the Constitution binds the government to ensure any activity or programme, including a vaccine programme, yields fruitful results in terms of Life, Liberty and Pursuit of Happiness for the People and with minimal risks and burdens, with the words, "We the People of the United States, in Order to form a more perfect Union, establish Justice, insure domestic Tranquillity, provide for the common defence, promote the general Welfare, and secure the Blessings of Liberty to ourselves and our Posterity, do ordain and establish this Constitution for the United States of America."

"The Preamble to the United States Constitution is a brief introductory statement of the fundamental *purposes* and *guiding principles* which the Constitution is meant to serve. It expresses in *general terms the intentions* of its authors, is sometimes referred to by courts as reliable evidence of what the Founding Fathers thought the Constitution meant and what they hoped it would achieve,"
http://en.wikipedia.org/wiki/Preamble_to_the_United_States_Constitution

The Preamble makes it clear what the ultimate and overriding purpose or goals -- the telos using a term of Aristoteles -- of the application and interpretation of Constitution, the Rules and Statues and also the Government are, namely, "to establish Justice, insure domestic Tranquility, provide for the common defence,[1] promote the general Welfare, and secure the Blessings of Liberty to ourselves and our Posterity, do ordain and establish this Constitution for the United States of America."

While the Preamble is not the Law of the Land, it has a binding character of a Law in as far as it sets a clear direction, goal or objective to which activities of the constituent legal and governmental bodies, including the public health bodies of the United States when implementing vaccine programmes, must align themselves in order to have any legitimate authority whatsoever in the first place.

All the articles and amendments, laws and statutes must be read in conjunction with the constitution's Preamble, which sets forth a normative structure in which the „general welfare", „justice", „liberty" and domestic democracy have an inseparable relationship for „Posterity". The Preamble's normative meaning is given tangible form by the provisions in the Constitution and the Bill of Rights.

The Preamble, Constitution and Law or Code or Statues are inextricably and logically connected. The Preamble is the authority for the Constitution. For anything to have Force and Effect it must have authority. Rules are similar to Regulations, which is how the Law or Code or Statutes are interpreted and enforced. The Code is the Authority for the Rules. The Constitution is the Authority for the Code. The Preamble is the Authority for the Constitution. That means that the Preamble is the ultimate authority for the Constitution, the Code, the Rules or Statutes.

The Preamble can never, not in for Posterity, under any circumstances be detached from the Constitution and the government and its agencies cannot ever be detached from the Constitution and Preamble. This is because the causality between the Preamble, Constitution and Rules involves a logical and not a contingent necessity.

The philosopher David Hume in his *A Treatise of Human Nature* (1739–1740) showed that the only necessity that links cause and effect is the logical necessity of a demonstrative argument. By contrast, when a sequence of events is observed in the physical world that is considered causal -- for example, an apple falling down from a tree onto the ground -- these are only impressions of the apple, its motion and its collision, but there is no logical necessity by which the cause brings about the effect. There might be an occasion when the apple does not fall downwards but upwards. We have observed apples falling to the ground every single time but there is no logical necessity for them to fall to the ground every single time.

There is, however, a logical necessity that two plus two always equals four and that logical necessity resides in the ideas of two and two and in the idea of addition of numbers.

Two plus two can never logically equal three.

Hume established that there was no argument for linking causes and effects in terms of powers, active forces, and so on but that the only causal necessity was a logical one such as found inherent in the concepts of mathematics and language.

Because the Preamble, Constitution and Bill of Rights are artefacts of language and the words have logical relationships between each other that involve the idea of a necessary connection, the causal links between them cannot logically be broken apart.

The Preamble, Constitution and Bill of Rights have the same logical relationship between them as two plus two plus two equals six.

A whole can be divided into various parts just as an apple pie can be divided into slices. The Preamble, Constitution and Bill of Rights form one whole but can also be divided into parts for the sake of ease of use by persons seeking to apply the law to specific and concrete circumstances. Nevertheless, the meaning of any law is not contained in one isolated word or

paragraphs but in conjunction with the other parts and the overriding intention expressed in the Preamble, the Constitution and the Bill of Rights, is the ultimate framework or vector for interpreting all the other laws.

Those goals that are in conflict with the goals laid down in the Preamble are, therefore, a priori logically and necessarily without any legal force in US law and government.

That laws when detached from a Constitution and normative justice can be administered in a way that is unjust is shown by the developments in Nazi Germany when legal manoeuvres were carried out to obstruct and destroy the basic purpose and provisions of the German Constitution, manoeuvres including the privatisation or corporatisation of German government functions, putting them into a „legal void“, referencing not the Constitution or normative justice, but the “performance targets” of their „corporate owners.“

That it was illegal and unconstitutional for the Nazis to use the manoeuvre of corporatising government functions and replacing laws with regulations is underlined by the judgements of the US Military Tribunal at Nuremberg.

Under the Federal Register Act of 1935, an attempt was made to detach the operation of government agencies from the goals laid out in the Preamble, Constitution and Code, binding by virtue of the logical necessity inherent in the ideas expressed in these Charters on all government activities, by assigning to those government functions the status of private corporations, and in a way that the constitutional mandates and goals of the Preamble did not attach to them.

As a result, corporations under private law were created that appeared to be able to operated outside the Preamble and Constitution and Bill of Rights on a technicality.

In this way, members of the international crime syndicate, who have annexed high ogvernment office, were able to carry out their criminal plans under color of their office more easily.

The people working for the agencies were given the status of private sector employees and were no longer public officers with an Office bound to the Preamble and Constitution.

They were employed under contracts of corporate law that made no reference to the Preamble and Constitution, from which they derived their entire authority from in the first place.

They were given the status of simple mercenaries with some of them armed and some of them unarmed, who worked for money and were required to perform certain duties laid down by their employers by and through "cooperative agreements", "performance of services contracts", "grants", "memorandums of understanding", "incentive programs" and on and on which are controlled by the Federal government.

However, the privatisation or corporatisation of the functions of government, including public health functions, is not logically and legally the same as the privatisation or corporatisation of the ideas and Charters underlying a government and its functions. The Preamble and Constitution remain the ultimate authority over these agencies because they are the original and sole cause or authority of all government activities, including the activities of privatised public health government agencies.

The limits of privatizing government functions and detaching them from the Constitution and allowing them to operate as “corporations” with employees accountable to no one except to their employer in a “law free” zone are shown by the Nuremberg Trials.

German government functions that were “privatised” or handed out to newly created corporate-like bodies charged with performing specific functions, for example, the Gestapo, charged with internal surveillance, and the “SS Totenkopf Verbände”, or death squads, charged with administrating the Nazi concentration camps, were still held accountable after the war for the “fruits” or “results” of their work.

A mere declaration by the “employees” of the SS and Gestapo that they were following orders from their “employer”, and working with utmost efficiency to reach performance targets, such as killing so and so many prisoners a day in the camps, was regarded as insufficient by the US Military Tribunal to absolve them of their responsibility before the law of their crimes.

The Nuremberg Trial judgements show that no government can privatise an essential government function in way that detaches from the activities of an agency from normative justice, the law or principles of a Constitution Republic.

Moving a government function into an entirely “law-free” “corporate” economic zone where the only dictates that apply are those of efficiency, targets and performance and contracts without an reference to the ultimate “fruits” of those “efficient” activities is prohibited by law.

Murder is murder whether it is done efficiently by privatised government agencies or not. Torture is torture whether it is done efficiently by privatised government agencies or not.

Infringements on liberty are infringements whether they are done efficiently by corporations or not.

The regulations that these “corporations” produced to carry out their mass murder and surveillance were deemed illegal.

Regulations are not the same as the law. That is the judgement of Nuremberg. Corporate regulations do not confer authority and legitimacy. Only the Constitution and the Law confer authority and legitimacy.

Presidential or Leader waivers and executive orders that gave an air of legitimacy to a criminal system were deemed illegal at the Nuremberg Trials if they were not in alignement with normative justice and the Constitution.

This, then, is the judgement of the Nuremberg Trials. No act of “privatisation” on the authority of the government can abolish normative justice and the essential mandate of the Constitution from which all government bodies derive their legitimacy. Privatised government agencies must, therefore, also act within the terms of the Preamble and Constitution no matter and corporate contracts cannot abolish this relationship.

Corporate contracts can only regulate the activities of the people working inside the corporation but not the legal relationship between the corporation and normative justice and the Constitution.

For the President by use of decrees or the government to create government bodies that are in total opposition to a Constitutional Republic where all people a right to Life, Liberty and Pursuit of Happiness including property is, therefore, illegal and unconstitutional.

Officials are always directly accountable back and though their Office to the Constitution, to the People by virtue of the obligations and legal relationships that flow from the Preamble, Constitution and Bill of Rights that subordinate all other activities to these.

Federal Law and Regulations prohibit the use of investigational new drugs, including unproven vaccines, without informed consent of recipients 51. 10 U.S.C. § 1107 (2000) provides that investigational new drugs or drugs unapproved for their intended uses may not be given to members of the Armed Forces without their prior consent except in the case of a waiver by the President of the United States. However, Presidential decrees are not mandated by the US Preamble, Constitution and Bill of Rights with its democratic code.

Executive orders issued by Adolf Hitler, the de facto President of Nazi Germany (who won democratic elections in 1933) of German citizen's constitutional rights was not considered adequate justification for violating those rights and the rules of normative justice by the US Military Tribunal at the Nuremberg Trials.

Therefore, the various government agencies created by the Federal Act of 1935 also have to be subordinated to th central overriding purpose and goals of the Preamble and Constitution, namely Life, Liberty and Pursuit of Happiness, irrespective of any corporate contracts.

Essential government functions, including public health functions and mass vaccination programmes, cannot be detached by an act of "privatisation" or "corporatisation" from the Preamble, Constitution and Law of the land and from the goals they mandate.

They cannot never legally and constitutionally be detached from or given a life independent of the Preamble and Constitution and Law because this is the ultimate source of their authority in the first place.

The public agencies in United States of America cannot be turned into an apparatus for killing Americans by means of deliberately or accidentally contaminated and/or shoddily manufactured vaccinations under any law for the enrichment of pharmaceutical companies, the banks that own those companies or by any foreign powers that gain undue influence over the US government.

The abolition of the relationship between the Preamble and Constitution and the activities of the government agencies under the Federal Act of 1935 is a legal fiction.

Any judge who attempts to interpret laws in a way that is not alignment with the overwhelming intention of the Preamble, Constitution and the Bill of Rights, namely, to protect the Liberty, Life, Happiness, including health and property of the people of America, and to hold the government agencies, including the public health agencies, accountable for doing the same, has failed to understand the objective, logical necessity inherent in these documents.

As mentioned, there is a precedent for making judges accountable for failing to uphold the objective necessity of normative justice of the Preamble and Constitution and for allowing a tyrannical government to hollow out the rights of citizens. That precedent is in the Nazi German Judges Trial conducted by US Military Tribunals at Nuremberg in 1947 when German judges and lawyers were held to account for their wilful, sophistic and perverse interpretation of the German Constitution, which, like the US constitution, assigned civil rights to individuals and limited the power of the government, thereby allowing the Nazi government to carry out the de facto abolition of all those civic rights and government limits with a veneer of legality.

The goals laid out in the Preamble are not law, but they still have the absolute and binding character of a law, and that binding character extends to all courts and to all government functions, privatised or not.

The Preamble requires that the Constitution and laws and goals of courts and government agencies are always and without exception interpreted in such a way as to contribute to the goals laid down in the Preamble, including the continuation of the Constitution in perpetuity, so

eliminating sophistry, which can be used to justify the opposite of the logical necessity inherent in the law by playing with words and semantics or taking elements of the law out of their context.

The US Constitution also mandated a tripartite government, a separation of powers, and these various powers cannot be combined altogether into the Administrative State, i.e. fourth branch, by an act of legislation, which detaches the Administrative States from the Preamble and Constitution by virtue of logical necessity.

The courts in the Administrative State cannot force out the Constitutional Courts and replace them with the other "jurisdictions" such as Administrative, Equity, Maritime and so on.

They are the custard on the apple pie of the Preamble, Constitution and Statutes, to use a metaphor. The custard goes on top of the apple pie. It is not served instead of the apple pie. If you go to a diner and ask for apple pie and get only custard, the diner owners would be judged in breach of duty.

The existence of the various branches of Administrative law, such as Equity and Maritime law, cannot be used as an excuse to serve the American people custard when they have asked for, and, more importantly, when they have the legal and constitutional right to, apple pie.

The courts and government agencies derive their authority solely from the contribution they make towards creating a balanced, just and equitable society, that is to say solely from the Preamble and Constitution and Statues, and their adherence to the normative justice and end-goals or telos formalised in these documents.

Administrative courts were also at work in Germany during the totalitarian Nazi rule after the German Constitutional Courts were neutralised by the Dictator Adolf Hitler and his Nazi judges. However, the mere functioning of the Administrative State churning out masses of regulations to create a totalitarian bureaucracy that disguised the total lawlessness during the entire existence of the Nazi rule was not enough for Nazi Germany to be spared the judgement of being a criminal state by the US Military Tribunal at Nuremberg.

“For the good of the State”, the Nazi legal precept, was not considered to be the same as “For the good of the People.”

That the State itself can be found to be criminal is underlined by the judgement of the Nuremberg Trials. Government bodies that subordinate their functions to a state found to be acting criminal are also to be classified as part of that criminal enterprise.

The People and precepts of normative justice that serve the People must always remain primary under the Constitution, according to the judgement of the Nuremberg Trial.

A judge who in a wilful interpretation of the laws fights the interests of the pharmaceutical industry or the banking industry in some corner of Administrative law at the expense of the Constitution, the Preamble and the People, from which that judge alone derives any legitimate authority, for whatever reason a judge might be so inclined, is also a priori exercising his office illegally and unconstitutionally.

Even assuming the primacy of Administrative law over the Preamble and Constitution, a mass “swine flu” or other pandemic flu vaccination programme would still be illegal.

To reframe the argument for a mass swine flu vaccination in terms of equity law, for example, a mass flu vaccine programme must leave the American people in credit when it comes to their

health, happiness and life in spite of the government asking them for a debit in terms of requiring them to take a vaccination and so accept a jab and a disease into their bloodstream.

By contrast, a vaccine programme that leaves the majority of people of America overwhelming in deep debt, suffering a loss of health, life and property or in detention, and in a manner that prohibits them from seeking a legal or financial redress in the form of compensation, that is, suffering a damage that is irreparable, is illegal, and the profit of a tiny group from this is illegal.

It follows therefore not only from the Preamble, the Constitution and Bill of Rights but also from the application of the principles of Equity law that no mass vaccination programme should be conducted where there is an a priori reason to believe that death or injury will occur on a scale that far outweighs any benefits.

As part of their legal and binding obligation under the Preamble to ensure the health, justice and life of the people of America, the US government is prohibited from taking a reckless gamble with the very lives, health whose maintenance is the sole purpose and object of the Constitution by forcing on the People a random, unnecessary and unknown drug.

In the judgement of Jacobson v. Commonwealth of Massachusetts, 197 U.S. 11 (1905), the plaintiff was forced to take a small pox vaccination because, it was argued, such a vaccine helped to protect the whole community. A citizen has obligations to the state in which that citizen is embedded. Nevertheless, the protection of the whole was considered to be the legal justification for forcing an individual to take the vaccine.

The Supreme Court examined the issue of whether involuntary vaccination violated Jacobson's "'inherent right of every freeman to care for his own body and health in such way as seems to him best . . . " The Court bifurcated this question, first considering the right of the state to invade Jacobson's person by forcing him to submit to vaccination:

This court has more than once recognized it as a fundamental principle that "persons and property are subjected to all kinds of restraints and burdens, in order to secure the general comfort, health, and prosperity of the State; of the perfect right of the legislature to do which no question ever was, or upon acknowledged general principles ever can be made, so far as natural persons are concerned."' (at 26)

With this language, the Court stated the basic bargain of civilization: an individual must give up some personal freedom in exchange for the benefits of being in a civilized society. Jacobson sought to enjoy the benefit of his neighbors being vaccinated for smallpox without personally accepting the risks inherent in vaccination. The Court rejected Jacobson's claim, which it viewed as an attempt to be a free-rider on society. „

However, scientific advances have shown that vaccination itself can actually increase the virulence of a virus and so increase the danger to the community.

In view of all the evidence of adverse events from vaccinations recorded upon a mass of people with a range of genetics, no court can nowadays argue that it is for the "public good" that people are vaccination. The idea that there is a "herd immunity" has been proven to be without any substance. Scientific advancement has shown that "herd immunity" is not only outdated but actually false.

It was the act of mass vaccinations in 1918 that actually *caused* the deadly Spanish flu pandemic, according to experts. [reference]

Therefore, the judgement of 1905 on vaccines based on outdated science cannot be the judgement of 2009. The courts must adjust to the new body of scientific evidence available and on the basis of this information, they are legally and constitutionally bound to make judgements to promote the health and well being of the American people.

XXI. The issue of immunity and compensation as evidence of intent to commit a crime

The US government has passed legislation giving them immunity in the event of vaccinations causing death or injury, specifically by barring people from seeking compensation.

Compensating patients who are harmed as a consequence of participation in a vaccination programme is a well established principle of US law.

The US federal government currently has a programme that gives compensation to victims of government mandated vaccinations.

Victims of the 1976 government-mandated swine flu mass vaccination programme won more than a billion dollars in damages for the injuries they suffered as a result of vaccines.

Compensation is a mechanism by which the vaccine companies have an incentive to act in the interests of the people, and not manufacture products that cut costs and are dangerous.

And yet this compensation is to be waived now under The Model State Emergency Health Powers Act, the National Emergency Act, NATIONAL SECURITY PRESIDENTIAL DIRECTIVE/NSPD 51 and HOMELAND SECURITY PRESIDENTIAL DIRECTIVE/HSPD-20.

So, just at the time when Americans are being asked to take upon themselves the greatest risk of a vaccine not proven, or rather proven to have killed people in Poland, they will not be able to claim compensation.

For the US government to force the people of America to sign away their right to compensation, individually and collectively, for a vaccine that is classified as a bioweapon by that same government, and which they are being compelled to take at pain of death or imprisonment while not adequately regulating the vaccine manufacturers in spite of lapse after lapse is illegal and unconstitutional.

For the government of the USA is not mandated by the Preamble, Constitution and Bill of Rights to seek the Life, Liberty and Happiness of pharmaceutical companies and the banks that hold shares in vaccine companies by supplying them with a huge market of unwilling subjects to inject whatever substances they chose into those people.

The government of the USA only has legitimate authority in as far as it serves the People of the United States and their Life, Liberty and the Pursuit of Happiness.

Such a blanket enforced waiver is illegal and unconstitituional: only the invidivual can waive their own right to compensation and only after being adequately informed and giving their consent.

The principle that the patient must always consent of their free will to a vaccination was established at the Nuremberg Trials when Nazi German doctors were held to account for injecting unknown substances into Nazi concentration camp inmates.

Just as Navy personnel are being forced to take vaccinations for human clinical trials for Vical, the concentration camp inmates of Nazi Germany were given substances for testing by companies like Bayer.

Members of the international crime syndicate, who have annexed high ogvernment office and who are carrying out their criminal plans under color of their office, now want to abolish the right of the entire nation not only to refuse but also to claim any compensation if they are injured.

What will happen when people are given a vaccine similar in lethality to the one in Poland, but cannot claim any compensation?

When the US government forces the people of America to take an uknown vaccine for which they are a priori banned from asking for compensation for death or injury, the government has moved beyond equity or administrative law and into criminal law with the government acting criminally.

When an American is forced at gunpoint under criminal law to take a vaccination but are barred from any form of legal or financial redress if they are injured or killed, then they have the same rights as the Nazi concentration camp inmates, who were also forced to allow unknown substances to be injected into their bloodstream at gunpoint and who were also barred from seeking any from of redress whether in the form of financial compensation or before the law courts because the Nazi government de facto waived their right to do so.

Furthermore, if the government absolishes the requirement to pay compensation to those injured or killed as a result of a swine flu vaccination, then the government is telling the vaccine companies it has a carte blanche to do what it wants. It doesn't matter who dies or is injured as a result of shoddy vaccines. The companies will never be held to account.

The burden of risk or debt has to be born entirely by the people while the credit or profts in the form of revenue from sales, higher share prices and better dividends acrrue solely to the pharmaceutical companies and the banks that hold stock.

By waiving the right of the people of America to claim any compensation and offering blanekt immunity, companies have a financial incentive to sell as many vaccines as possible as expensively as possible while producing them as cheaply as possible by cutting quality control standards to maximise their companies.

Baxter, another key vaccine supplier, is currently facing lawsuits for adultering Helperin with cheaper ingredients to maximise profits resulting in death and injury.

If this is the way, Baxter is behaving when it can still be sued for killing and injuring people by putting in cheap and unapproved ingredients, how will it behave when it cannot be sued for damaging vaccines?

Are the people of America going to be forced to accept into their blood an unproven, untested, toxic drug that cost about the minimum to produce irrespective of the danger?

The principle of compensation is there to ensure equity in a transaction over the long term. A buyer buys a product from a seller. If the product proves to be wilfully and negligently faulty, the buyer can claim compensation. An American takes a vaccine from a manufacturer. If the vaccine proves to be wilfully and negligent faulty and to lead to death and injury, the person can claim compensation

The mechanism gives an incentive to companies to produce products of reasonable quality. What incentive to vaccine companies to ensure quality controls when they are given a blanket immunity from any damages they cause no matter how faulty their work?

Today, when people can claim compensation, vaccine companies are still producing dangerous products. What will the vaccine companies do when people can't claim compensation? What right did the government have to waive the compensation of the American people?

The Preamble, Constitution and Bill of Rights prohibits the government from forcing the people of America to take a shoddily made vaccine under gun point signing away their right to compensation collectively in advance.

If it is the intention of the government is to produce vaccines to the highest standards then the government should embrace the compensation mechanisms. Because damages is a mechanism to enforce high standards on companies and so act as a counterweight to the pure profit motive.

If the government has blocked damages, just how confident can they be of the safety and the quality of the vaccines?

The people of America are expected to bear all the risks or buy up all the debt, but have been told in advance that they will never be able to recover their losses. And whatever they do, their losses will be huge. If they take the vaccine from companies that have admitted to the deliberate contamination of their drugs, who have a record of causing death and injury and nearly triggering pandemics, they could lose their health, liberty and life and property will be confiscated from them.

If they do not take the vaccine, they will lose their liberty and possibly life and their property will be useless to them.

To confiscate property for refusing to take an unproven vaccine at gun point is actually theft and robbery.

If I refuse a vacine that will harm me and as a result my assets are taken by force by another, I am being held to gun point and robbed.

The US government cannot legally and constitutionally expect the citizens of the US to bear the entire risk and loss of the mass vaccination programme themselves while failing to hold the FDA to account for lapse after lapse.

These lapses go beyond negligence. They show a pattern of activity, a pattern of activity by key government bodies to protect the vaccine companies at all costs.

Since the government has granted immunity to vaccine companies, every indidivual knows that no one will take care of them medically when the vaccine injurs them. Since the risk of injury and the emotional and financial burden of subsequent recovery is borne exclusively by the individual alone, the individual exclusively has the right to decide whether to obtain said innoculation and bear the risk, or to avoid the risks of an untested vaccine and to take normal precautionary measures.

XXII. Evidence as to the use of chemtrails for population reduction

Evidence as to the use of chemtrails for population reduction

“The chemtrail conspiracy theory holds that some contrails are actually chemicals or biological agents deliberately sprayed at high altitudes for a purpose undisclosed to the general public,” according to Wikipedia.

However, contrails are visible in the skies throughout the USA and Europe and the Germany has admitted carrying out chemtrail operations.

German RTL television reported on the German air forces involvement in chemtrials.

http://www.youtube.com/watch?v=BVjKg1JOjVY

Chemtrials have been related to the U.S. Patent #: 5,003,186, titled `Stratospheric Welsbach Seeding for Reduction of Global Warming," and there is evidence they contain chemicals and biological agents that cause injury and harm to people and are part of the "biological war" being waged against the world's population by the elite.

Investigative reporter Jeff Ferrell writes about the chemtrials.
(http://www.godlikeproductions.com/forum1/message470752/pg1)
A scientist now confirms that the United States military funded research which led to a patent suspected of making so-called "chemtrails" in our skies. In this follow-up report, investigative reporter Jeff Ferrell also discovered a U.S. Air Force manual called "Owning the Weather in 2025," which describes the very same approach.
Ferrell's original report aired on KSLA News 12, the CBS-TV affiliate in Shreveport, Louisiana where he works as a reporter and anchor. The story attracted attention from hundreds of people across the country and Canada. They watched it on YouTube, Google Video and a host of other web sites that posted the story. In turn, those viewers began emailing and calling the station.
While Ferrell immediately began investigating for a follow-up report, the station's interest in the subject waned. So, here's what he found out in his independent research:
********** *
"I learned about U.S. Patent #: 5,003,186, titled `Stratospheric Welsbach Seeding for Reduction of Global Warming," better known by chemtrail researchers as "The Welsbach Patent." The patent describes putting metallic particles like aluminum and barium into jet fuel. Then, exhaust from the jet engine seeds the stratosphere. In turn, those small metallic particles serve a dual purpose by: 1) reflecting incoming light back into space and 2.) helping convert the warmth below into infra-red waves, allowing them to escape from the earth's atmosphere.
"It turned out that it seemed to work and so that's why we had applied for a patent," said patent co-inventor David Chang. Chang confirmed that the U.S. military did fund that research while he worked at Hughes Aircraft, an aerospace giant at the time. It would later downsize considerably and evolve into Direct-TV, which required some of the very same kinds of research and development.
In fact, Chang described several other military-funded projects

where jet engine exhaust dispersed metallic particles into the atmosphere. "For instance, we were using it to develop targets for laser range finders," continued Chang.
I then learned about that U.S. Air Force document titled, "Owning the Weather in 2025." it details weather modification for war-fighting and describes putting carbon dust into jet fuel for dispersal as the quote, 'most convenient, safe and cost effective method," just as the Welsbach Patent explained. That method is described on page 15 of the Air Force report, originally written in 1996 as a study paper.
In September of 2002, then-Secretary of State Colin Powell even told a United Nations World Summit in South Africa quote, "we are committed to a billion-dollar program to develop and deploy advanced technologies to mitigate greenhouse-gas emissions." Powell never fully elaborated.
And few may remember that the U.S. military used covert weather modification in the past. During the Vietnam War a top secret mission called "Operation Popeye," seeded clouds over the Ho Chi Minh Trail to create floods and wash out the enemy's supply routes. Reporter Jack Anderson is credited with breaking that story back in 1971.
A Discovery Channel program, which first aired in February 2007, investigated so-called Chemtrails, describing them as contrail formations that persist in the skies for hours after a jet passes. But the military refused them access to jet fuel for testing.
"I suspect it may be some sort of weather control," said Stamps, Arkansas resident Bill Nichols in our first report on the subject, which aired on KSLA News 12. Nichols handed us a mason jar with a sample inside containing water and `other' material collected recently from his back yard. Independent testing at a Shreveport, LA lab did show high levels of barium, a hallmark of other chemtrail testing. Louisiana regulators described such a reading as unusual, but very difficult to prove its source.
Chemtrail skeptics argue barium is used very often commercially for everything from mining to oil drilling. But Chang told me that's 'exactly' why they considered such material safe to use in our skies as a welsbach particle.
But, no one has yet to officially confirm a direct connection between these alleged chemtrails and the U.S. military. Such a discovery is the 'Holy Grail' of chemtrail researchers. Such a revelation, if there is indeed such a covert program in existence at all, would require someone to step forward and potentially risk court martial or legal action. Until then, the guessing and the waiting continue.

Story by Jeff Ferrell“

For more evidence of chemtrials, this report on www.rumormillnews from Canada.

Heads Up--Boost Your Immune System Now--What's Happening in Canada!?!! What To Do!!!

Posted By: CrystalRiver <Send E-Mail>
Date: Tuesday, 9-Jun-2009 09:17:05

In Response To: ARE THESE THE 'NEW' CHEMTRAILS OR MAYBE COUNTER MEASURE AGAINST THEM - INCREDIBLE VIDEO (Sandollar)

Dear RM Agents and Readers,

Just received these this morning; thought you should know:

Hey All,

Just want to report from Vancouver Canada. There is a very strange mix in the chemtrails today. In all my 10+ years of daily keeping track on all levels I have never felt this one before.

When I left the house this morning I noticed that instead of the usual milky white (chem) sky--there was a mist that went from cloud level to the ground---just a mist ---although it was hot and morning mist should have long been gone.

I have a long bus ride to the university where i study--so I usually do my reading on the way up on the bus---but today I found I couldn't focus my eyes (physically) It was very strange--I strained and I strained but could hardly get any reading done.
In class I found it difficult to stay awake---though it was only a two hour class.

Finally I get home thinking--well maybe I'm just overtired--but happened to glance in the mirror in the bathroom---and holy moly---my pupils were totally dilated---haven't seen that since the sixties...no wonder I couldn't focus....

Anyway---a new chemtrail mix in this neck of the woods as far as I can tell....

Peace and Love
B

B,

Not certain, but that sounds like sodium hexa-fluoride and possibly a bromonated material.

The Mists are what was described in UK as habingers of everyone getting flu like symptoms...I'm certain the mists are the delivery sperandi for the Flu...Avian or Swine or the one other I heard about which contains a genitically utated form of e bola...years ago I saw the patents that describes a weaponized form of this monster...has a high fungal profile with e bola strains mutated in it.

Better get some form of Shikimic acid, Star Anise or Licorice Root and chew on them and eat with boiled eggs...that is a good source of Sulfur..same combo as Tami flu..but you just eat them...suck on the star anise and then chew and swallow...will not hurt you.

Lignite coal solutions such as Willard's water XXX can be used to neutralize sodium hexa fluoride...you can get off the Internet at Willards Water or CAW (Catalyst Altered water)

Have also seen the patents where the US Air Farce uses Melanin powder in these sprays...you

inhale and makes you super sleepy and tired.

Now, making people really sick, can't see...think you might die...then the Martial Law exercise in July makes a lot more sense...they will offer emergency vaccines...just as we always thought they would.....this is the front line in battling these damned Serpents!

Mike Castle

Dilated pupils indicate sympathomimetic amines -- possibly cholinergic, serotonergic or dopaminergic. These three are the most common pharmaceutical classes which cause dilated pupils (mydriasis). For example , an agent to ruin memory (anticholinergic) can have this effect. I would bet on cholinergic in the chemtrails -- the military has been experimenting with these since the 50s. They would be great for disrupting social memory. The key to determining which class is to note other side effects (sweating, dry mouth, etc) and you can tell which class the pharmaceutical agent belongs.

Sympathomimetic amines: Symptoms based on receptor system

1) Serotonergic: any of the following: altered visual perception, visual fragmentation, synthesisia (crossing of senses), lack of emotion and/or unprovoked intense emotion, inability to coherently integrate emotions, altered perception of time and space, altered perception of self , 'self-in-world', or 'self-through-time', altered function of empathy, muscular tension, teeth grinding, altered visual processing and visual system integration, nausea, fragmentation of 'time-sense' coherency. Examples include: LSD, Prozac, Paxil, Zoloft, MDMA, Celexa, Remeron.

2) Dopaminergic: any of the following: increased heart rate, feelings of power or invincibility, increased pulse / blood pressure, confidence, altered perception of time, suppressed appetite, altered function of memory processing or integration, insomnia, suppression of slow wave sleep, induction of serum cortisol, altered immune system function, suppression of adaptive immune system, induction of neutrophil activity, possible dehydration. Examples include: Amphetamine, Bupropion, Methylphenidate, Modafinil, Ephedrine, Epinephrine, etc.

3) Cholinergic: any of the following: lack of sweating and/or profuse sweating, lack of salivation or profuse salivation, confusion, memory loss, muscle weakness, muscle tremor, profoundly real visual hallucinations, fragmentation of 'time-sense' coherency, disorientation, externally obvious psychosis, etc. The biggest give away is profoundly increased or decreased salivation. Examples include: Chlorpheniramine, Brompheniramine, Diphenhydramine, Atropine, BZP, etc and of course nerve agents.

Most 'first-gen' military weapons (1950s) involved #3 but I am sure they have some complex mixes these days. The vast majority of the spraying contains a military non-carbon based nanotech synthetic epigenetic parasite with synthetic erythrocytes -- but no doubt the luciferian NATO military are throwing drug aerosols in there too to make sure the sheeple stay brain-dead.

http://en.wikipedia.org/wiki/3-quinuclidinyl_benzilate

XXIII. Evidence as to the existence of an international corporate crime syndicate

President John F. Kennedy spoke about the existence of this syndicate in a speech given to the US press association on April 27, 1961.

“For we are opposed around the world by a monolithic and ruthless conspiracy that relies primarily on covert means for expanding its sphere of influence--on infiltration instead of invasion, on subversion instead of elections, on intimidation instead of free choice, on guerrillas by night instead of armies by day. It is a system which has conscripted vast human and material resources into the building of a tightly knit, highly efficient machine that combines military, diplomatic, intelligence, economic, scientific and political operations. Its preparations are concealed, not published. Its mistakes are buried, not headlined. Its dissenters are silenced, not praised. No expenditure is questioned, no rumor is printed, no secret is revealed. It conducts the Cold War, in short, with a war-time discipline no democracy would ever hope or wish to match.”

The „monolithic and ruthless conspiracy“ is behind the plans to cause genocide using an artificial virus after collapsing the financial system.

To the international organised corporate crime syndicate, which I contend, assassinated John F Kennedy when he began to oppose them, specifically, by returning the Federal Reserve to the People of America, belong the leaders of the oil and gas industry who have suppressed renewable energy technologies.

The Global Elite plan a New World Order with an enslaved “police state” culture. How might this be done? One way is the Patriot Act. Another could be the 800 FEMA detention camps fully constructed, staffed, and awaiting prisoners.

There are reasons to believe that this foreign-based international corporate criminal organisation, commonly referred to in popular language as the „Illuminati“, which operates through various informal and formal organisations such as the „Bilderbergs“, the United Nations and the World Health Organisation, is conducting a secret biological war against the population of the United States, and the world, and has set up in covert and funded an elaborate dual purpiose bioweapons programme, involving vaccine companies and international government agencies such as the WHO to engineer and then release a pandemic virus to cause death and disease at least three times this year, first in Austria, second in Mexico, third in Switzerland for political and financial gain.

The creation of a pandemic will result in the implementation of a government mandated mass compulsory vaccination programs in the United States, and could lead to the death not only of hundreds of millions of Americans but billions of people around the world leaving a large proportion of the world’s natural resources and other assets in the hands of the „Illuminati.“

I allege that this is part of a long term plan by the syndicate, who have built large numbers of FEMA concentration camps with incinerators and prepared mass graves in states such as Indiana and in New York to quarantine people and dispose of the bodies of the people who are killed by the bioweapons attack.

XXIV. Evidence as to the existence of the “Illuminati”

There is evidence that the „Illuminati“ are the inner core of the international crime syndicate planning genocide by means of an artificial virus. Memembers of the Illuminati include the Queen Beatrix of The Netherlands, David de Rothschild, Henry Kissinger, David Rockefeller. The Illuminati is a secret organization to overthrow the rule of all soveriegn nations and gain domination over the world’s poltiical and economic systems.

The Illuminati leadership is in the hands of a few families or groups, who like the mafia, pass the „Knowledge“ on from generation to generation, protecting their activities by a code of silence or Omerta towards outsiders as well as by the use of occult symbols.

The Illuminati operate through secret socieities such as the freemasons as well as through organisations such as the Bilderbergs, Trilateral Commission and Council of Foreign Relations.

The world’s first truly global crime syndidcate, they base themselves in off shore banking centers and employ international organisations such as the UN and WHO.

The Illuminati’s interactions with politics are dominated by expediency. Their aim is to use their money to get their candidates elected to implement legislation to achieve as total a control over the country’s economy as possible in order to maximise the private profits flowing to the Illuminati banks whether through „bailouts“ or through wars generating debts for which they can earn interest.

The Illuminati is distinguished by a strong anti human ideology, a conviction they belong to a superior „Bloodline“ and fascination for the Occult and rituals. The Illuminati believe there will be massive changes in the earth’s geomagentic sphere in 2012 and are anxious to surive what they perceive as a time of upheaval by decimating the world’s population rapidly, so leaving them more of the earth’s natural resources to use.

Because the Illuminati fund and control the western mainstream media, their existence is air-brushed out of the news as are any information that would give the general public an insight into their criminal activities, including the manipulation of financial stocks and oil prices as wel as their plans to commit genocide using artificially engineered viruses and vaccines containing toxins.

However, sometimes a glimpse of the Illuminati and their plans can be found in the mainstream media.

For example, the UK Telegraph ran a 'fictional' „slideshow“ story about a series of nuclear attacks and the formation of a foreign-controlled, totalitarian government, called the UNA, after the dismantlement of the United States complete with scenes of vaccinations and chip implants called Black Jack this winter, which was replete with Illuminati Occult symbols.

http://www.telegraph.co.uk/culture/culturepicturegalleries/4220575/Blackjack.html

There were five parts that were presented in the Culture secion without comment on consecutive weeks.

http://www.telegraph.co.uk/culture/culturepicturegalleries/4315740/Blackjack---Part-2.-A-slideshow-story.html

http://www.telegraph.co.uk/culture/4515126/Blackjack---Part-3.html

http://www.telegraph.co.uk/culture/4590866/Blackjack---Part-4.html
http://www.telegraph.co.uk/culture/4613223/Blackjack---Part-5.html

The slide show story Blackjack was discussed in the media, also at www.infowars.com.

http://www.infowars.com/operation-blackjack-the-story-of-terrorist-nuclear-attacks-on-major-western-cities/

"Operation Blackjack: The Story of Terrorist Nuclear Attacks on Major Western Cities

Cryptogon
January 13, 2009

This little curiosity comes to us from the Telegraph's Culture Picture Galleries section.

As of now, there's an entry called: Operation Blackjack: The Story of Terrorist Nuclear Attacks on Major Western Cities.

On the page, we read: Blackjack - A slide show story. The events portrayed in this slide show are entirely fictitious.

There is no author listed.

I didn't spend too much time gazing at the chicken entrails, but there were a few howlers that were too good to pass up:

Remember the Kingstar (controlled demolition company) van near the exploded bus on the 7/7 London bomings? That's what came to mind for me.

Also, the 'fictitious' attack occurs during the Summer solstice. What's the name on the side of the van? New Dawn Presentations. And its logo? That's right, the Sun."

The sun Logo on the van is notably similar to that for the “Black Sun” (notorious Nazi occultic symbol), as it is depicted in the following Black Sun-themed page, for example…
http://www.myspace.com/blacksunrisingpylon

And the “New Dawn…” company name on the van of course has the Luciferian/Venus-theme, coupled with Obama/Inauguration reference, ‘all over it’.

The name “Blackjack” here presumably derives from the game, which is also known as Twenty-one (the featured date).

There is a green snake on the van in Toronto.

The numerical dates featured in the story - 21st & 22nd - are the same as those mentioned by Colin Powell for the soon coming “Event” in the present month (January).

Symbolism: June 22nd. 22 from June 22nd. is a double 11. The time is 8:03:27, 8+0+3 from 8:03 is 11, and from the seconds 27, you have 2+7=9, so you have an 11:9, or a 9-11. Also if you take the 22 from June 22nd, you have a double 11, and you get a third 11 from 8:03 (8+3=11). So you have 3 11s, and in numerology, when you take a number 3 times over, you give it the highest power of that number.
Also in Part 5 The symbols and dates and numbers, codes used are intestersting. Date on the Press Representative ID card is 09-11-11.

The Operation to take over the USA by means of false flag operations is called Teardrop and the teardrop is a stylised visual element used in ancient Egyptian art to depict the peregrine falcon.

In Part 5 of the Black Jack there is series of numbers on a slide whose code can be broken using a hexadecimal string to read “this is not simply entertainment.”

If you type in this number (74686973206973206e6f742073696d706c7920656e7465727461696e6d656e74) from the ID card into a HEXADECIMAL to STRING converter, then you get the following message:
“this is not simply entertainment”

http://www.prisonplanet.com/weird-hexadecimal-code-and-possible-warning-in-telegraphs-operation-blackjack-part-5.html

XXV. Evidence of the Illuminati’s involvement in the current collapse of the world’s financial system.

There is evidence that the international corporate crime syndicate, which controls the western world’s banking system, deliberately crashed the economy to achieve certain objectives, including a new world government with the World Health Organisation as a new world health agency.

Former New York Governor Elliot Spitzer has only spoken of accounting fraud and the bailout as a pretext to transfer money from the taxpayers to banks controlled by the Illuminati.

“Spitzer had some pointed criticism for the way the Obama administration has been handling the bank bailouts. When Spitzer was attorney general of New York, he prosecuted AIG and other Wall

Street banks, and Maddow asked him if he saw a connection between those prosecutions and what led to the current crisis.

Spitzer said "Absolutely," and while the specific instruments and mechanisms, derivatives and credit default swaps, may have changed, the "fundamental accounting fraud... the desperate desire to cook the books," is present in the current collapse.

Spitzer worries that despite the government spending trillions of dollars to bail these companies out, "not nearly enough is changing." Essentially, we are not doing enough to combat the systemic problem of companies that are too big to fail:

We are rebuilding the same edifice. We are re-establishing the primacy of the same companies. We are still building in a too-big-to-fail structure so that so that we as taxpayers will be guarantors of companies that when they get into trouble again, we will bail them out. None of this is being confronted by the administration as they, and we through our tax dollars, resuscitate a broken system.

Spitzer also highlighted that one of the reasons for the massive scale of the current financial crisis is that our economy has been so over-leveraged and that what had to happen in order to right our economy was to de-leverage. However, Spitzer argues, we haven't de-leveraged at all; we've simply transferred the obligation from the banks to the taxpayers, and the taxpayers have gotten a raw deal in the process.

http://www.huffingtonpost.com/2009/05/12/rachel-maddow-eliot-spitz_n_202725.html

Professor William Black has also touched on the theme.
“Associate Professor of Economics and Law at the University of Missouri-Kansas City School of Law. He was the Executive Director of the Institute for Fraud Prevention from 2005-2007. He previously taught at the LBJ School of Public Affairs at the University of Texas, and at Santa Clara University. He was litigation director for the Federal Home Loan Bank Board, deputy director of the FSLIC, SVP and the General Counsel of the Federal Home Loan Bank of San Francisco.[2]”

“On April 3, 2009 Black appeared on "Bill Moyers Journal" on PBS and provided some disturbing commentary on the current banking crisis.[3] In the interview with Bill Moyers,[4] Black asserted that our current banking crisis is essentially a big Ponzi scheme, that the "liar loans" and other financial tricks were essentially illegal frauds, and that the triple-A ratings given to these loans was part of a criminal cover up. He said that the "Prompt Corrective Action Law" passed after the Savings and Loan crisis mandated that ailing banks should be put into receivership. Black also stated that trying to hide how bad the situation is will simply prolong the problem, as happened in Japan's lost decade. Black stated that Timothy Geithner is engaged in a cover-up, and that the administration does not want people to understand what went wrong or how bad the banking situation is today.”
http://en.wikipedia.org/wiki/William_K._Black

The New York Times reported Yra Harris, a commodoties trader, alleging the Wall Street Banks see transparency about their operations as inimical to their profits. This is surely a pretty good definition of „crime.“

http://www.nytimes.com/2009/06/01/business/01lobby.html

“The banks want to go back to business as usual — and then some. And they have a lot of audacity now that everyone has bailed them out,” said Yra Harris, an independent commodities trader who was involved in an effort to regulate derivatives nine years ago. “But we have to begin with the premise that Wall Street doesn’t want transparency, because more transparency means less immediate profits.”

XXVI. Evidence as to the depopulation agenda of the Illuminati/Bilderbergs and their involvement in the engineering and release of the artificial “swine flu” virus

On Dec. 10, 1974, the U.S. National Security Council under Henry Kissinger, an adviros to President Obama, completed a classified 200-page study, “National Security Study Memorandum 200: Implications of Worldwide Population Growth for U.S. Security and Overseas Interests“ arguing that that population growth in the so-called Lesser Developed Countries (LDCs) was a grave threat to U.S. national security.

Adopted as official policy in 1975 by President Gerald Ford, NSSM 200 outlined a covert plan to reduce population growth in those countries through birth control, and also, implicitly, war and famine. Brent Scowcroft, who had by then replaced Kissinger as national security adviser (the same post Scowcroft was to hold in the Bush administration), was put in charge of implementing the plan. CIA Director George Bush was ordered to assist Scowcroft, as were the secretaries of state, treasury, defense, and agricultur.
http://www.schillerinstitute.org/food_for_peace/kiss_nssm_jb_1995.html

In a study published in 1996, the he US Air Force proposed a pandemic in 2009

http://www.infowars.com/us-air-force-study-proposed-2009-influenza-pandemic-in-1996/.

These are just some of the documents and materials available pointing to a depopulation agenda, but also of note are the State of New York Division of Cemeteries “Mass Fatality forms” sent to cemeteries in that state to collect data about their ability to deal with the high volume of casualties that would occur if their were a flu pandemic or other disaster. The form letter that this office received was dated April 4, 2007, as reported in Infowars with a link to the pdf of the forms.

http://www.infowars.com/plans-for-mass-graves-confirmed-government-surveying-cemetery-readiness-for-flu-outbreak/

The biggest threat to the planet is PEOPLE: there are simply too many, doing too well economically and burning too much oil.” -- Sir James Lovelock, BBC Interview.

“My three main goals would be to 1. reduce human population to about 100 million worldwide, 2. destroy the industrial infrastructure and 3. have wilderness, with it’s full complement of species, returning throughout the world.” --- Dave Foreman, Club of Rome, Bilderberger, and co-founder of Earth First!

“A total population of 250-300 million people, a 95% decline from present levels, would be ideal.” ---Ted Turner, founder of CNN and major UN donor.

“------the resultant ideal sustainable population is hence more than 500 million but less than one billion.” ------- Club of Rome publication titled “Goals for Mankind.”

“If I were re-incarnated I would wish to be returned to earth as a perfected killer virus to lower human population levels!” --- Prince Philip, Duke of Edinburgh

“I suspect that eradicating smallpox was wrong. It played an important part in balancing ecosystems.” --- John Davis, editor of Earth First! Journal

“The extinction of the human species may not only be INEVITABLE, but a GOOD THING.” ---- Christopher Manes, Earth First!

“As in China, the act of childbearing should be a punishable crime against society, unless the parents hold a government license. All potential parents should be required to use contraceptive chemicals, the government issuing antidotes to citizens chosen for childbearing.” --- David Brower, first Executive Director of the Sierra Club.

The international crime corporate syndicate, including bankers such as David de Rotschild and George Soris, have provided the funds for the bioweapons programme by instructing their funds or banks to invest in pharmacuetical stock and by instructing their agents in government to channel public finance to covert biooweapons, vaccines programmes through a the complex web of financial instruments, also offshore.

XXVII. Evidence as to the Genocide Agenda by means of Weaponised Flu being discussed at the annual Bilderberg meeting in Athens from May 14-17, 2009.

Kevin Trudeau has recently said that he has personally spoken to Bilderberg members who have expressed their desire to see "two thirds of the dumb people" wiped off the planet, and suggested in an interview on the Alex Jones show that some of these conversations occurred in or around the annual Bilderberg Group, which took place this year in Vouliagmeni, close to Athens, Greece, from 14-17th of May.

http://www.infowars.com/billionaire-elite-want-two-thirds-of-the-dumb-people-wiped-off-the-planet/

The Greek Newspaper To Vima OnLine (http://www.tovima.gr/default.asp?pid=2&artid=268290&ct=32&dt=16/05/2009) and an official press release (http://info.kopp-verlag.de/fileadmin/user_upload/allgemein/2009-05/Bilderberger_PM.pdf) includes among the attendees David Rockefeller, Lawrence Summers, Paul Wolfowitz as well as Daniel Vasella, head of Novartis, the company that carried out the bird flu trials in summer 2008, resulting in the deaths of homeless people in Poland, and Werner Faymann the Chancellor of Austria, where Baxter's subsidiary responsible for sending out 72 kilos of bird flu virus, originating from WHO, is located.

Another list indicating who did or did not turn up for the meeting by means of the use of a +/- symbol is available on the Swiss website Alles Schall und Rauch (http://alles-schallundrauch.blogspot.com/2009/05/liste-der-teilnehmer-bilderberg-2009.html).

The surname of the Austrian Chancellor is misspelled as Feymann in this list. The attendance of Werner Faymann is however, further, confirmed by a parliamentary question tabled by Austrian MP Martin Strutz (http://www.bzoe-klub.at/Pressedienste/Mai_2009/17.05.2009_Strutz.html) to be addressed to the Faymann, requesting information about Faymann's attendance at the Bilderberg meetings, which were originally financed by the CIA, maintains Strutz.

The list of attendees given on Alles Schall und Rauch is as follows:

"Beatrix - Königin der Niederlande
Sofia - Königin von Spanien
Konstantin - ehemaliger König von Griechenland
Philipp - Prinz von Belgien, Mitglied des Club of Rome
Joseph Ackerman - Vorstandsvorsitzende der Deutschen Bank
Kieth Alexander - Direktor der US National Security Agency (NSA), grösster Geheimdienst der Welt
Georgios Alogoskoufis - ehemaliger Wirtschafts- und Finanzminister Griechenland
Roger Altman - Vizefinanzminister unter Präsident Clinton
Efstratios-Georgios A. Arapoglou - Zentralbankchef Griechenland
Ali Babacan - Aussenminister Türkei, Koordinator für die Beitrittsverhandlungen der Türkei mit der EU
Dora Bakoyannis - Aussenminister Griechenland
+Jon Frederik Baksaas - Chef von Telenor Norwegen
Francisco Pinto Balsemão - Portugisischer Ministerpräsident
Nicolas Baverez - Herausgeber Le Point Frankreich
Franco Bernabè - Chef von Telecom Italia, stellvertretender Vorsitzender von Rothschild Europe
-Xavier Bertrand - Generalsekretär der UMP Partei Frankreich
Nils Daniel Carl Bildt - Aussenminister Schweden

Jan Arne Björklund - Bildungsminister, Parteivorsitzenden der Folkpartiet liberalerna Schweden
Christoph Blocher - ehemaliger Bundesrat und ehemaliger Parteichef der SVP
Alexandre Bompard - Journalist Radio Europe 1 Frankreich
+Vendeline von Bredow - Wirtschaftsjournalist The Economist
+Oscar Bronner - Herausgeber Der Standard Österreich
+Max Boot - Autor, Berater, Historiker, Ober-Neocon und CFR Mitglied
-Ana Botín - Tochter des Präsidenten der Banco de Santander Emilio Botín
+Henri de Castries - Chef der AXA
Juan Luis Cebrián - Chef er PRISA Group of Media Spanien
-W. Edmund Clark - Chef Toronto-Dominion Bank Kanada
-Kenneth Harry Clarke - ex-Finanzminister Grossbritannien
Luc Coene - Chef der belgischen Nationalbank
+Timothy C. Collins - Chef von Ripplewood Holdings
George David - Präsident CocaCola Griechenland
Sir Richard Billing Dearlove - ex-Chef des britischen Geheimdienstes MI6
Anna Diamantopoulou - Parlamentsmitglied der PASOK Griechenland
Mario Draghi - Chef der italienischen Zentralbank
+Nicolas N. Eberstadt - American Enterprise Institute
Anders Eldrup - Chef und Präsident von DONG Energy Dänemark
John Jacob Philip Elkann - Vizepräsident des Fiat-Konzerns
Thomas Enders - Chef Airbus
José Manuel Entrecanales - Chef des Baukonzerns Acciona Spanien
+Werner Feymann - Bundesparteivorsitzender der SPÖ österreichischer Bundeskanzler
-Isidro Fainé Casas - Präsident der Caixa Bank und SEAT Berater
Niall Ferguson - Professor für Wirtschaft an der Havard Business School
-Timothy Franz Geithner - Finanzminister der USA
Dermot Gleeson - Berater der irischen Regierung und Geschäftsmann
Donald E. Graham - Chef der Washinton Post
-Alfred Gusenbauer - ex-Bundeskanzler Österreich
Victor Halberstadt - Professor für Wirtschaftswissenschaften Uni Leiden
Ernst Hirsch Ballin - Justizminister der Niederlande
Richard Holbrooke - Sonderbeauftragter für Pakistan und Afghanistan für Obama
+Jan H.M. Hommen - Vorsitzender ING Bank
Jaap de Hoop Scheffer - NATO-Generalsekretär
James Logan Jones Jr. - Sicherheitsberater von Präsident Obama
Vernon Eulion Jordan - ehemaliger Sicherheitsberater von Präsident Clinton
-Robert Kagan - US-Regierungsberater für Sicherheitspolitik, Terrorismus und den Balkan
Jyrki Katainen - Finanzminister Finnland
-Henry Alfred Kissinger - ex-US-Sicherheitsberater und US-Aussenminister, Chef von alles
+John M. Keane - SCP Partner, ex-US-General
+Muhtar Kent - Präsident der Coca Cola Company
+John Kerr - Mitglied des House of Lords, Vizevorsitzender Royal Dutch Shell
+Eckart von Klaeden - MdB, Aussenpolitischer Sprecher der CDU/CSU
+Klaus Kleinfed - Präsident von Alcoa Inc.
Mustafa Koç - Vorsitzender der Koç Holding der grösste türkische Mischkonzern
Roland Koch - hessischer Ministerpräsident
Sami Kohen - aussenpolitische Kolumnist der türkischen Zeitung Milliyet
Henry Kravis - Hudson Institute
Marie-Josee Kravis - Hudson Institute
Neelie Kroes - EU-Kommissar für Wettbewerb
Odysseas Kyriakopoulos - Präsident des Verbandes Griechischer Industrien
+Christine Lagarde - Ministerin für Wirtschaft, Industrie und Arbeit Frankreich
+Pascal Lamy - Generaldirektor Welthandelsorgansation WTO
Manuela Ferreira Leite - Chefin der portugiesischen Sozialdemokraten PSD

Bernardino León - spanische Staatssekretär für auswärtige Angelegenheiten
+Peter Löscher - Chef Siemens AG
+Peter Mandelson - Wirtschaftsminister GB
-Jessica Tuchman Mathews - Präsidentin der Carnegie Endowment for International Peace Denkfabrik
Philippe Maystadt - Präsident der Europäischen Investitionsbank (EIB)
+Edward McBride - Wirtschaftsredaktor The Economist
Frank McKenna - Vizevorsitzender der TD Bank Financial Group
John Micklethwait - Wirtschaftsredakteur The Economist
Thierry Montbrial - President des l'Institut français des relations internationales
Mario Monti - Präsident der Wirtschaftsuniversität Luigi Bocconi
Miguel Ángel Moratinos - Aussenminister Spanien
Craig Mundie - Chefstratege Microsoft
Egil Myklebust - ex-Vorsitzender der SAS, Norsk Hydro ASA, Mitglied des Weltwirtschaftsrat für Nachhaltige Entwicklung
Matthias Nass - Stellvertretender Herausgeber "Die Zeit"
+Juan Maria Nin Génova - Präsident la Caixa Bank
Denis Olivennes - Direktor Nouvel Observateur Frankreich
+Jorma Ollila - Vorsitzender Royal Dutch Shell
+George Osboren - Schatzkanzler GB
Frederic Oudea - Chef Societe General Bank Frankreich
-Cem Özdemir - Bundesvorsitzender der Partei Bündnis 90/Die Grünen
Tommaso Padoa-Schioppa - ex-Finanzminister Italien
+Alexis Papahelas - Journalist Kathimerini
Dimitris Papalexopoulos - Chef Titan Cement Company S.A. Griechenland
Jannos Papathanasiou - Wirtschafts- und Finanzminister Griechenland
Richard Perle - Sicherheitsberater unter George W. Bush, Hauptverantwortliche für den Irakkrieg
-David Petraeus - US-Viersternegeneral, Kommandeur des US Central Command, zuständig für den Nahen Osten und Zentralasien
Manuel Pinho - Minister für Wirtschaft und Inovation Portugal
+Jean Pisani-Ferry - Direktor von Bruegel
Robert S. Prichard - Chef der Zeitung Toronto Star Kanada
Romano Prodi - ex-Ministerpräsident Italien, ex-Präsident der Europäischen Kommission
+Hanna Rajalahti - Chefredakteur Talouselämä
-Olli Rehn - EU-Erweiterungskommissar Finnland
Heather Reisman - Chefin Indigo Books & Music Inc Kanada
Eivind Reiten - Generaldirektor des Petroleumskonzerns Norsk Hydro
Michael Ringier - Verwaltungsratspräsident der Ringier Holding AG, grösster Verlag der Schweiz
David Rockefeller - Banker, Gründer der Council on Foreign Relations und Trilateralen Kommission, Capo di tutti Capi
-Dennis B. Ross - Direktor des Washington Institute for Near East Policy Denkfabrik
Barnett R. Rubin - Director of Studies and Senior Fellow Center of International Cooperation
-Alberto Ruiz-Gallardòn - Bürgermeister von Madrid
Suzan Sabancı Dinçer - Chefin der Akbank Türkei
Indira Samarasekera - Präsidentin der University of Alberta
Rudolf Scholten - Mitglied des Vorstandes Österreichische Kontrollbank AG
-Jürgen Schrempp - ex-Vorstandsvorsitzender der DaimlerChrysler AG
+Josette Sheeran - Diektor UNO Welternährungsprogramm
+Domenico Siniscalco - Vizevorsitzender Morgan Stanley Int.
Pedro Solbes Mira - ex-Wirtschafts- und Finanzminister Spanien
-Sampatzi Saraz - türkischer Banker
-Sanata Seketa - Kanada
+James B. Steinberg - US-Vizeaussenminister
+Björn Stigson - Präsident des Weltwirtschaftrats für Nachhaltige Entwicklung (WBCSD)

+Yannis Stournaras - Direktor bei der Foundation for Economic & Industrial Research (IOBE)
-Dominique Strauss-Kahn - Chef des Internationalen Währungsfonds
-Lawrence Summers - ex-Chefökonom der Weltbank, ex-Finanzminister unter Clinton, Wirtschaftsberater von Obama
Peter Denis Sutherland - ex-EU-Wettbewerbskommissar, Vorsitzender von BP and Goldman Sachs International
+Nobuo Tanaka - Direktor Organisation für wirtschaftliche Zusammenarbeit und Entwicklung
Martin Taylor - ex-Chef der Barclays Bank, Vorsitzender von Syngenta, ex-Generalsekretär der Bilderberg Group
Peter Thiel - ex-Chef PayPal, Clarium Capital Management
+Helle Thorning-Schmidt - Parteichef der Sozialdemokraten Dänemark
+Thomas Thune Andersen - Chef Maersk Oil Dänemark
+Andreas Treichl - Chef Erste Group Bank AG Österreich
Jean-Claude Trichet - Chef der Europäischen Zentralbank
+Loukas Tsoukalis - Sonderberater von Kommissionspräsident Barroso, Chef der ELIAMEP
Agah Ugur - Chef Borusan Holding Türkei
Matti Vanhanen - Premieminister Finnland
Daniel Vasella - Chef von Novartis
Jeroen van der Veer - Chef Royal Dutch Shell
-Guy Verhofstadt - ehemaliger Premierminister Belgien
Paul Volcker - ehemaliger Fed Chef, Wirtschaftsberater von Barack Obama
Jacob Wallenberg - Bankier und Grossindustrieller Schweden
Marcus Wallenberg - Bankier und Grossindustrieller Schweden
Nout Wellink - Chef der niederländischen Zentralbank, Mitglied der Europäischen Zentralbank
Gerardus Johannes Wijers - Chef von AkzoNobel, ex-Wirtschaftsminister der Niederlande
Martin Wolf - Journalist der Financial Times
James David Wolfensohn - ehemaliger Präsident der Weltbank
Paul Wolfowitz - ex-Präsident der Weltbank, Berater von George W. Bush, und stellvertretender ex-Verteidigungsminister der USA, Ober-Neocon und Hauptverantwortlicher für den Irakkrieg
-Fareed Zakaria - Chefredakteur von Newsweek International und politischer Kommentator bei ABC News, New York Times, Wall Street Journal, New Yorker und CNN
Robert Zoellick - Präsident der Weltbank“

In an interview on the Alex Jones show, Trudeau acknowledged he had been in Greece around the time of the annual Bilderberg meeting in Athens and implied that he attended the Bilderberg Group meeting, stating that he personally knew many Bilderberg members who he “conversed with on a regular basis”, including Crown Prince Albert II of Monaco.

Trudeau expands on the conviction of the Bilderberg, a group associated with the Illuminati, that they are genetically superior to the rest of humanity.

Bilderberg attendees go on record playing down the content of the meetings, portraying them as a series of dry policy discussions. However, their refusal to divulge the contents of their meetings is consistent with the contention that this is a group meeting in secret to plot financial and biological crimes against humanity.

According to Trudeau the elite, comprising the Illuminati and Bilderberg, openly talk about their desire for a massive global population reduction, something indirectly confirmed by elite insiders like Johnathan Porrit, UK government “green” advisor, calling for the population of the UK to be reduced in the Times to 30 million on March 22, 2009 in the interval between the release of the bird flu pandemic material in Austria and the swine flu pandemic material in Mexico.

(http://www.timesonline.co.uk/tol/news/politics/article5950442.ece):

A week later on March 31st, an interview with Dr Nina Federoff, advisor to President Obama, appeared in the BBC, in which Dr Federoff stated there were too many people on the planet:

„We need to continue to decrease the growth rate of the global population; the planet can't support many more people," Dr Fedoroff said, stressing the need for humans to become much better at managing "wild lands", and in particular water supplies.“
http://news.bbc.co.uk/2/hi/science/nature/7974995.stm

“Some of the conversations you have on the 200 foot yachts off the coast of Monaco - you can’t believe what really goes on behind closed doors,” said Trudeau, noting that Alex Jones had exposed such issues in his documentary films, notably Endgame. The billionaire said that he had recently spent time in Monaco with Crown Prince Albert II.

Trudeau stated that elitists he had talked to thought their plans were for the greater good of humanity but that they believed there were two classes of people on earth, the ruling elite and the “worker bees,” , and that the elite were defined not necessarily by money or power, but by their genetic ancestry.

Trudeau shockingly detailed conversations with elitists during which they brazenly admitted their desire for massive global population reduction.

“I’ve been sitting on the boats off the coast of Barbados with the guys who basically said we need to get two-thirds of the dumb people off the planet - I’ve been in the meetings,” said Trudeau, adding that such words were not spoken in an evil manner, but in a “matter of fact” way under the pretext that such a thing would be for the good of planet earth.

Revealingly, Trudeau said that elitists see Alex Jones as an annoyance but tolerate him because they believe Jones as well as Trudeau himself are, “desensitizing people to these realities,” - which in a way works to their benefit.
“I’ve been told that’s why I still get invited on the yachts,” added Trudeau.

Trudeau aid that the elite was divided into two camps, one larger faction that, “Categorically believes they are genetically superior than the rest of the population,” and another smaller faction, mainly comprising of younger people, that are feeding Trudeau information who, “Have come to the conclusion that some people are smarter than others, some people are more talented than others, some people are more motivated to work….but everyone should be allowed to succeed or fail based on their own choices or initiative….and that’s where there’s a split and a division right now at the highest levels,” said Trudeau.

Also, among the Bilderberg attendees in Athens was John Kerr, of Royal Dutch Shell, underlining the financial connection between the Illuminati and Bilderbergs and oil companies. Queen Beatrix of The Netherlands, who also attended the meeting, is a leading Bilderberg member. Her father Prince Bernhard of the Netherlands, was a member of Nazi Germany’s SS and worked for IG Farben, helped organise the first Bilderberg meeting in 1954, and later served on more than 300 corporate boards.

Rather than relieving the pressure on the environment by switching over to renewable energy sources, the financial elite have agreed in secret to reduce the world’s population and by means of the use of a huge secret bioweapons programme hidden from the general public under the guise of protecting the general public against a pandemic they created by using vaccines, and they discussed their plans for depopulation, so Kevin Trudeau has suggested, at the Bilderberg meeting in Athens.

Attending the meeting in Athens were key players in the bioweapons programme, including the CEO of Novartis, Daniel Vassella, and Werner Faymann, whose government has given cover to Baxter's subsidiary in Austria in triggering a pandemic.

XXVIII. Evidence as to the profits of pharmaceutical companies in the event of a pandemic

According to the Times, the UK government alone has signed a deal with Baxter and GlaxoSmithKline for 90 million doses of the vaccine.

The Austrian government has a contract for 16 million doses with Baxter.

„Baxter & GlaxoSmithKline making millions from fear of swine flu epidemic
« on: May 15, 2009, 08:40:41 AM »

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Swine flu: Government signs up for 90 million doses of vaccine
May 15, 2009
http://www.timesonline.co.uk/tol/life_and_style/health/article6293951.ece

Ministers have signed agreements to secure up to 90 million doses of swine flu vaccine despite the fact that a pandemic has not yet been declared, it was announced today.

The deals with pharmaceutical companies GlaxoSmithKline (GSK) and Baxter will secure "early supplies" of a vaccine for the newly identified H1N1 strain.

Enough "pre-pandemic" vaccine has been ordered to protect at least half of the population by December, at an estimated cost of £100 million. This is in addition to the purchase of 500 million doses of anti-viral drugs that have already been stockpiled to help treat illness and deals to procure vaccine in the event of a pandemic.

So far 78 cases of the newly identified H1N1 strain have been confirmed in Britain, with all those infected showing only minor symptoms. However, experts predict that swine flu — which is actually a recombination of existing animal and human flu strains — could cause a second wave of more widespread illness in winter.

The Department of Health said that today's agreement could provide enough vaccine to protect health workers and the most vulnerable patients before a pandemic arrived, without affecting the normal supply of seasonal flu vaccine.

The Government has already signed agreements worth £155 million to supply up to 132 million doses of vaccine to inoculate people in the event of a pandemic. It has also procured enough anti-viral drugs to cover 80 per cent of the population, at a cost of more than £500 million.

But it refused to disclose the additional cost of the new contracts signed today.

The World Health Organisation's official alert level remains at phase five out of six — one step away from declaring a global pandemic. But France, Belgium and Finland are among other countries that are stockpiling doses of potential vaccine as a precautionary measure for such an event. „

Re: Baxter & GlaxoSmithKline making millions from fear of swine flu epidemic
« Reply #1 on: May 15, 2009, 08:51:36 AM »

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Boost in output of antivirals to treat swine flu benefits drug firms
Thursday 30 April 2009
http://www.guardian.co.uk/world/2009/apr/30/swine-flu-drugs-glaxosmithkline-roche

Drugs firms led by GlaxoSmithKline and Swiss group Roche have seen a jump in their share prices as they rush to crank up production of the few antiviral drugs shown to have been effective in the treatment of the new deadly strain of swine flu.

Governments around the world have been in contact with those specialist firms known to have expertise in the production of drugs to treat the flu virus and in the development vaccines to prevent its spread. They are keen to shore up stockpiles and prepare for a surge in vaccination demands in the northern hemisphere this winter.

Top of their list has been Glaxo, which has seen its share price leap 8% since the World Health Organisation declared outbreaks of swine flu in the US and Mexico over the weekend to have become a "public health emergency of international concern".

The British company is urgently looking to increase production of Relenza, one of two anitviral treatments found to be effective against the new flu strain. Glaxo has been in talks with the WHO, Centers for Disease Control and Prevention and the health department in the US, and the government of Mexico.

Since the start of the outbreak, Glaxo has supplied 100,000 packs of Relenza, an inhaled drug, and 170,000 additional doses of its seasonal flu vaccine to the Mexican authorities at their request.

Also besieged with requests is Swiss firm Roche which makes the antiviral pill Tamiflu. The company has pledged to use its "rapid response stockpile" as directed by the WHO, though no request has been made yet.

Several drug firms with expertise in developing vaccines have been in touch with the WHO requesting samples of the virus in order to begin work on a preventative. French firm Sanofi-Aventis said it was "ready to work" with international health officials when asked. Chicago-based Baxter International has asked the WHO for samples, but none have arrived yet.

Companies producing face masks are boosting production to meet a surge in demand. Kimberley Clark said it had increased production and would not run out of stock. "We are closely monitoring our inventory, and have increased production ... in order to minimise potential disruptions in our ability to meet customer demand."

About sanofi-aventis
Sanofi-aventis, a leading global pharmaceutical company, discovers, develops and distributes therapeutic solutions to improve the lives of everyone. Sanofi-aventis is listed in Paris (EURONEXT: SAN) and in New York (NYSE: SNY).

Sanofi pasteur, the vaccines division of sanofi-aventis Group, provided more than 1.6 billion doses of vaccine in 2008, making it possible to immunize more than 500 million people across the globe. A world leader in the vaccine industry, sanofi pasteur offers the broadest range of vaccines protecting against 20 infectious diseases. The company's heritage, to create vaccines that protect life, dates back more than a century. Sanofi Pasteur is the largest company entirely dedicated to vaccines. Every day, the company invests more than EUR1 million in research and development. For more information, please visit: www.sanofipasteur.com or www.sanofipasteur.us.

BirMex - http://www.birmex.gob.mx/

http://translate.google.com/translate?hl=en&sl=es&u=http://www.birmex.gob.mx/&ei=LPjzSb-XFOCblQeZv7XRDA&sa=X&oi=translate&resnum=1&ct=result&prev=/search%3Fq%3DBirmex%26hl%3Den%26sa%3DG

Biological Laboratories Reagents and Mexico, SA de CV (Birmex) is a company owned by the Federal Government of Mexico that develops, produces and sells imported vaccines, sera and heterologous clinical diagnostic products.

To meet the demand of the Mexican market, Birmex also sells vaccines, immunoglobulins and diagnostic products manufactured by other companies.

Faced with the challenges of the future, Birmex is developing new vaccines with modern technology to complement its service to its customers.

Bruce Japsen | Tribune staff reporter
11:43 AM CDT, May 7, 2009

Baxter International Inc. confirmed today that it has received a strain of the swine flu virus and is "taking all of the appropriate steps necessary to prepare for a large scale vaccine production," the company said in a statement to the Tribune.

The Obama administration has yet to decide whether any large scale manufacturing of dosages is even necessary or whether any stockpile contracts would even be awarded. But Deerfield-based Baxter and several other vaccine makers this week are receiving strains of the virus to begin testing.

"Baxter can confirm that we are working on a vaccine and we have received a strain for testing and evaluation," said Baxter spokesman Christopher Bona. "We need to evaluate the strain."

The task of developing a vaccine begins for Baxter after the strain arrives at its Vienna research and development labs. The virus arrived via flight from Atlanta, where epidemiologists from the U.S. Centers for Disease Control and Prevention have been tracking the spread of the virus. Baxter would not say when its researchers obtained the virus strains.

"It could take three to four weeks to evaluate the growth characteristics of the strain in the vero cell culture," Bona said in an interview earlier this week.

Ill-based Baxter working on swine flu vaccine
« on: April 25, 2009, 11:39:12 PM »

Ill-based Baxter working on swine flu vaccine

http://www.forbes.com/feeds/ap/2009/04/25/ap6338850.html

Specialty drug maker Baxter International Inc. will work with the World Health Organization to develop a vaccine that could stem an outbreak of a deadly swine flu strain in Mexico.

Baxter spokesman Christopher Bona said Saturday that the Deerfield, Ill.-based company has asked the WHO for a sample of the flu strain.

He says Baxter has patented technology that allows the company to develop vaccines in a half the time it usually takes - about 13 weeks instead of 26.

There have been 20 confirmed deaths in Mexico of the swine flu, with nonfatal cases also confirmed in Kansas and California.

Humans don't have a natural immunity to swine flu strain that emerged in Mexico in March. Officials have warned the outbreak could become a global epidemic.“

Sanofi Aventis is another pharmaceutical company profitting from the current swine flu pandemic.

„Just in Time for a North American - Global Pandemic?

So now we have S-P / Merck major Animal Health vaccine manufacturer and sanofi pasteur the number one human vaccine manufacturer and BIRMEX a "shadowy" Mexican govermental company.

Sanofi-aventis invests €100 million in new facility in Mexico

http://www.worldpharmanews.com/content/view/719/30/
Sanofi-aventis invests €100 million in new facility in Mexico

Thursday, 12 March 2009
Sanofi-aventis (EURONEXT: SAN and NYSE: SNY), has announced the signing of an agreement with the Mexican authorities to build a € 100 million facility to manufacture influenza vaccine in Mexico. The announcement was made during a ceremony attended by Felipe Calderon, President of Mexico, and Nicolas Sarkozy, President of France, who was in Mexico City for a State visit.

This facility will be built and operated by sanofi pasteur, the vaccines division of sanofi-aventis Group, which was represented at the ceremony by Chris Viehbacher, Chief Executive Officer of sanofiaventis.

"By building this new facility, sanofi-aventis is proud to contribute to the strengthening of Mexico's health infrastructure and is eager to support Mexico's exemplary commitment to public health through influenza immunization and pandemic readiness", said Chris Viehbacher. "This investment illustrates sanofi-aventis' local approach to global health. This facility will benefit public health in Mexico and the Latin American region, in the context of influenza pandemic preparedness."

The agreement was signed by Birmex’ (Laboratorio de Biológicos y Reactivos de México) and sanofi-aventis' representatives in the presence of Dr. José Ángel Córdova Villalobos, Minister of Health of Mexico.

The new influenza vaccine plant will be built in Ocoyoacac, where sanofi-aventis already operates a facility. The plant will be designed to switch to pandemic vaccine manufacturing if a human influenza pandemic is declared and a pandemic influenza strain is identified by the World Health Organization (WHO).

As the world leader in research, development and manufacturing of influenza vaccines, sanofi pasteur is working to develop new and improved influenza vaccines to save lives and is actively involved in pandemic preparedness. Over the last five years, sanofi pasteur has been consistently

investing in major expansions of its influenza vaccine production capacity in the United States, France, China, and now Mexico. With the production of more than 170 million doses of seasonal influenza vaccine in 2008, sanofi pasteur confirmed its global influenza vaccine market leadership.

Just how large the profits for companies like Baxter just from producing the vaccine alone and excluding funding channelled to them by WHO are not clear. However, two Federal Budget Analysts in Washington, DC, Sharon L. Davis and Mary Palmer, have concluded that drug companies and pharmacies make 3000 per cent profits on the actual price of active ingredients used in some of the most popular drugs in America.

„ Celebrex 100 mg Consumer price (100 tablets): $130.27 Cost of general active ingredients: $0.60 Percen t markup: 21,712%

Claritin 10 mg Consumer Price (100 tablets): $215.17 Cost of general active ingredients: $0.71 Percent markup: 30,306%

Keflex 250 mg Consumer Price (100 tablets): $157.39 Cost of general active ingredients: $1.88 Percent markup: 8,372%

Lipitor 20 mg Consumer Price (100 tablets): $272.37 Cost of general active ingredients: $5.80 Percent markup: 4,696%

Norvasec 10 mg Consumer price (100 tablets): $188.29 Cost of general active ingredients: $0.14 Percent markup: 134,493%

Paxil 20 mg Consumer price (100 tablets): $220.27 Cost of general active ingredients: $7.60 Percent markup: 2,898%

Prevacid 30 mg Consumer price (100 tablets): $44.77 Cost of general active ingredients: $1.01 Percent markup: 34,136%

Prilosec 20 mg Consumer price (100 tablets): $360.97 Cost of general active ingredients $0.52 Percent markup: 69,417%

Prozac 20 mg Consumer price (100 tablets): $247.47 Cost of general active ingredients: $0.11 Percent markup: 224,973%

Tenormin 50 mg Consumer price (100 tablets): $104.47 Cost of general active ingredients: $0.13 Percent markup: 80,362%

Vasotec 10 mg Consumer price (100 tablets): $10237 Cost of general active ingredients: $0.20 Percent markup: 51,185%

Xanax 1 mg Consumer price (100 tablets) : $136.79 Cost of general active ingredients: $0.024 Percent markup: 569,958%

Zestril 20 mg Consumer price (100 tablets) $89.89 Cost of general active ingredients $3.20 Percent markup: 2,809%

Zithromax 600 mg Consumer price (100 tablets): $1,482.19 Cost of general active ingredients: $18.78 Percent markup: 7,892%

Zocor 40 mg Consumer price (100 tablets): $350.27 Cost of general active ingredients: $8.63 Percent markup: 4,059%

Zoloft 50 mg Consumer price: $206.87 Cost of general active ingredients: $1.75 Percent markup: 11 ,821%

Sharon L. Davis, Budget Analyst, US Department of Commerce Room 6839 Office Ph: 202-482-4458; Office Fax: 202-482-5480 Email Address: sdavis@docgov

Mary Palmer, Budget Analyst, Bureau of Economic Analysis Office of Budget & Finance; Voice: (202) 606-929

The news that WHO might declare a pandemic level 6 led to vaccien companies preparing to make as many as 4.9 billion vaccines against the so-called swine flu, ensuring them gigantic profits just from the sakes alone.

Today's Top Stories from www.fiercepharma.com
WHO ready to declare phase 6 pandemic
<http://www.uptilt.com/c.html?rtr=on&s=69l,176sg,29k4,bbzs,chbg,4h4n,gyv>

By John Carroll

<http://www.uptilt.com/c.html?rtr=on&s=69l,176sg,29k4,aejj,1hyc,4h4n,gyv#comment>
Comment
<http://www.uptilt.com/c.html?rtr=on&s=69l,176sg,29k4,aejj,1hyc,4h4n,gyv#comment>
|
<http://www.uptilt.com/c.html?rtr=on&s=69l,176sg,29k4,4p9p,dxh0,4h4n,gyv>
Forward
<http://www.uptilt.com/c.html?rtr=on&s=69l,176sg,29k4,4p9p,dxh0,4h4n,gyv>

There's widespread expectation that the World Health Organization will declare a phase 6 pandemic alert this morning--the first such warning since 1968.

But you can also expect the WHO's health experts to spend a considerable amount of time and effort reassuring the globe that this is not the deadly viral outbreak that has worried governments for generations. And vaccine developers are already well on the way to developing new jabs that guard against the new flu.

"It's 24 hours a day," Dr. Giovanni Della Cioppa, head of Global Clinical Research & Development for Novartis Vaccines, tells FierceVaccines. "We are working to get this vaccine to the public as quickly as possible."

WHO has been studying a phase 6 alert for weeks as evidence grows that the swine flu virus has taken hold in countries around the world. In Australia, there have been 1,000 confirmed cases, offering considerable data that the virus has extended outside of North

America.

"Phase 6, if we call a phase 6, doesn't mean anything concerning severity, it is concerning geographic spread... Pandemic means global, but it doesn't have any connotation of severity or mildness," WHO spokesman Gregory Hartl told Reuters.

- read the report <http://www.uptilt.com/c.html?rtr=on&s=69l,176sg,29k4,d17o,6j8y,4h4n,gyv> from ABC News

- read the report <http://www.uptilt.com/c.html?rtr=on&s=69l,176sg,29k4,856,jfku,4h4n,gyv> from Reuters

ALSO: Canada has created a network of 80 scientists from the country's research and health institutions to coordinate their work on a new vaccine for swine flu. Report <http://www.uptilt.com/c.html?rtr=on&s=69l,176sg,29k4,cuma,8lob,4h4n,gyv>

Related Articles:

Bloomberg: WHO readies phase 6 pandemic alert <http://www.uptilt.com/c.html?rtr=on&s=69l,176sg,29k4,9uav,kw7j,4h4n,gyv>

Swine flu vaccine business ramps up <http://www.uptilt.com/c.html?rtr=on&s=69l,176sg,29k4,5ly4,7ea8,4h4n,gyv>

Vax makers in global race to create swine flu jab <http://www.uptilt.com/c.html?rtr=on&s=69l,176sg,29k4,6w22,8x7g,4h4n,gyv>

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Four big vax makers ready H1N1 jabs
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Vaccine teams for four of the world's largest vaccine manufacturers say they have the seed stock they need to develop a new swine flu vax for use this autumn. But the researchers add that they're still uncertain just how much of the growing demand for the vaccine can be met.

"It will probably take a couple of weeks to ascertain the yields before we get into large-scale manufacture," a Glaxo spokesman told Reuters. Teams for GlaxoSmithKline, Sanofi-Aventis, Novartis and Solvay all say they're at work on a new H1N1 jab, but they need to determine how well the strain they're working with will grow in a manufacturing setting before they can calculate yields.

All these vaccine manufacturers could reap windfall profits from a burst of new orders for the new flu vaccine. Developed countries have already started to ink contracts. And the manufacturers will be able to shift from seasonal flu vaccines to the H1N1 vax as they deploy a new array of resources built in recent years to improve on the world's supply of vaccines.

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Novartis teams up on master's program
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Looking to cultivate some expert assistance for on-the-ground vaccine research work, Novartis Vaccines and Diagnostics is partnering with the University of Siena to offer a unique, two-year Masters program covering the clinical development of vaccines for a group of doctors from developing countries. Novartis will bring its scientific know-how to the class, which will largely be made up of doctors from African and Asian countries.

"The best place to develop a vaccine for developing countries is the developing country," Dr. Giovanni Della Cioppa, head of Global Clinical Research & Development for Novartis Vaccines, tells FierceVaccines. Key factors like engineering a vaccine's resistance to high temperatures and use of local storage facilities would be built into the research programs, pushing the researchers to come up with treatments that are ideal for that environment. And these new experts on vaccine development will be free to work with any developers.

"For all of those interested in big-scale clinical research, creating new centers of excellence outside of the normal, very expensive environment of North America and Europe would be of great interest," says Dr. Cioppa, who's been thinking about setting up a program like this for the past decade.

"Clinical research and development of vaccines, along with immunology, infectivology and biostatistics, are some of the core subjects that will be addressed during the program," explains Professor Ranuccio Nuti, coordinator of the Technical-Scientific Committee. "Our aim is to provide these medical professionals with the knowledge necessary to meet the demands arising in the area of neglected diseases as well as to prepare them to react proactively to situations such as the recent outbreak of the H1N1 virus in Mexico."

The first year of the program will cover immunology, infectivology,

methodology of clinical research, pharmacovigilance, biostatistics, clinical data management and vaccine production. The second year of the course will focus on applying the skills acquired during the program in vaccine research and development programs.

- read the press release
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GlaxoSmithKline unveils $600M vaccine plant
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GlaxoSmithKline has taken the wraps off its new, $600 million vaccine manufacturing plant in Singapore, which will produce jabs for a range of childhood diseases such as meningitis, pneumonia and blood poisoning. And the opening ceremony featured plenty of boasting. Glaxo chief Andrew Witty called the plant "possibly the best vaccine facility anywhere in the world."

Finishing the plant and getting started actually producing advanced vaccines, though, are two different things. Production work will only begin in 2011, giving regulators from the FDA and the World Health Organization time to inspect the facility. Glaxo used the opening day ceremony to announce a $30 million fund to endow graduate studies in manufacturing processes, green chemistry and health policies.

Singapore has pushed hard to expand its biopharma industry and a number of multinationals have set up operations in the city-state. And GlaxoSmithKline has been a big supporter. The pharma giant has been rapidly building its global vaccine business, which was on display earlier this week with the announcement that GSK is investing $34 million into a new joint venture
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to produce vaccines in China.

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Vaccine Market

Just how far does the vaccine shield law go? The U.S. Supreme Court wants to know. It's eyeing a Georgia Supreme Court ruling that allowed a liability suit over vaccines made by Wyeth and GlaxoSmithKline. The drugmakers want the Supremes to review that ruling; in their view, the 1986 vaccine shield law should have precluded the suit. But the Georgia high court said the 1986 law, while protecting vaccine makers from frivolous suits, doesn't prevent claims that they should have used a safer vaccine formula. Report
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Emergent BioSolutions has won a $30 million payment from the federal government on the FDA's decision to extend the shelf life of its anthrax vaccine from three years to four years. The news boosted Emergent's stock price by 11 percent. Report
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The FDA has strengthened its warning on Gardasil after hearing new reports of injuries sustained by patients who faint after getting the jab. Recipients will need to stay seated or lying down and observed for 15 minutes. Story
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The World Health Organization is urging that all children be vaccinated against rotavirus, a disease that kills more than half a million children each year. Report
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Vaccine Research

Vical has lost money for two decades, but the vaccine developer says it's DNA-based vaccines are now "ready for prime time." Story <http://www.uptilt.com/c.html?rtr=on&s=69l,176sg,29k4,cxi1,7vs7,4h4n,gyv>

Researchers at Boston University School of Medicine have found how the bacteria responsible for traveler's diarrhea binds to the host's intestines, offering some key insights that will help develop a more effective vaccine for the ailment. Report <http://www.uptilt.com/c.html?rtr=on&s=69l,176sg,29k4,gh91,57yf,4h4n,gyv>

The Associated Press and the Washington Post looked at new efforts to create a new malaria vaccine along with mutant mosquitoes which are resistant to malaria. Report <http://www.uptilt.com/c.html?rtr=on&s=69l,176sg,29k4,53tj,ifbd,4h4n,gyv>

New data from Phase III European clinical trials reinforce that Wyeth's Prevenar 13 has the potential to guard against the 13 most prevalent serotypes associated with pneumococcal disease. Release <http://www.uptilt.com/c.html?rtr=on&s=69l,176sg,29k4,5dbt,a2h7,4h4n,gyv>

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XXIX.Evidence that the swine flu vaccine is planned to cause harm: Inclusion of adjuvants

Dr Ann Schuchat and Dr Tom Friedman said at CDC press conference -- http://www.cdc.gov/media/transcripts/2009/t090611.htm-- that adjuvants would be included in the vaccine.

Squalene is an example of an organic adjuvant commonly used and has been blamed for some of the tragic effects of the smallpox vaccine administered to Gulf War vets who developed the so-called Gulf War Syndrome, which should be called the Fort Detrick Syndrome.

Adjuvants activate the pathogenes within a vaccine.

„In immunology, an adjuvant is an agent that may stimulate the immune system and increase the response to a vaccine, without having any specific antigenic effect in itself.[1]The word "adjuvant" comes from the Latin word adjuvare, meaning to help or aid.[2]"An immunologic adjuvant is defined as any substance that acts to accelerate, prolong, or enhance antigen-specific immune responses when used in combination with specific vaccine antigens."[3]
Adjuvants have been called the dirty little secret of vaccines [4] in the scientific community, because much about how adjuvants work is a mystery. Known adjuvants include oils, aluminum salts, and virosomes." (Wikipeida)

„Anne Schuchat:Our HHS Secretary Sebelius announced May 22nd that nearly $1 billion was going towards vaccine development and manufacturing. That included resources for the clinical trials that are being carried out through NIH and through the manufacturers in collaboration, of course, with the FDA and with the part of HHS that works on these pandemic matters. It also included resources to assure manufacturing capacity for both antigen, the component of the vaccine that gives you that immuno response, and the additional chemical that can sometimes increase the immune response that's more specific to the antigen. So the actual amounts -- or I can give you dollar figures rather than not ghost information -- there are five different manufacturers that the HHS has contracted with and there's been a procurement order for a total of $650 million worth of antigen, and $287 million worth of adjuvant. It is posh to say there are a lot of steps important in the clinical development of a vaccine and the testing and we can't predict today how much antigen would be needed. For the H1N1 vaccine we need a lot of antigen to get the response but with adjuvant you could get a different response. We need to be able to manufacture vaccine in case there is decision to use vaccine we have it on hand. Even if the decision to use vaccine is not made, these orders permit the chemicals to be stored in bulk where they could later be formulated if they needed to be. We've done this in a way that's giving us a lot of options for the future.
Glen Nowak: Thank you, Anne.
Operator: Our next question comes from Alice Park with Time Magazine. Ma'am, your line is open.
Alice Park: Yes, this is also a question about vaccines for either Dr. Schuchat or Dr. Frieden. At this point do we have any better information for how well this vaccine is going to be matched to whatever strain we might be in the fall, and how quickly would we be able to adjust this vaccine if we were to see a slightly different variant of this H1N1 become more prevalent in the fall?
Glen Nowak: I'll have Dr. Schuchat answer that question.
Anne Schuchat:The good news so far is we have tested a number of isolates from around the world, including different countries and many different states here in the U.S. Characteristics of the virus are the same, suggesting that the strains that are being used for vaccine development are matching the strains that are continuing to circulate. But with influenza, we need to keep looking.

So we'll be testing strains through the course of the weeks and months ahead and learn more from that about whether whatever may circulate here in the fall or winter is still the same as what has been circulating so far. So at this point we have no reason to think that the strains that are being used to develop vaccines have any kind of diversion from what's circulating. Now, of course you've asked the question about how well will this work. That's the million dollar question because we don't know yet. We're going to need to do those clinical studies to see whether a vaccine that's developed gives a good immune reaction in different people, whether vaccine with or without adjuvant and whether there are different doses people need to get a good response. Those are studies we'll carry out over the next several months and we'll look forward to seeing results from them.“

There are reports that the flu vaccine contains squalene oil as an adjuvant.

Flu vaccine contains squalene oil as an adjuvant.

Micropaleontologist Dr. Viera Scheibner conducted research into the adverse effects of adjuvants in vaccines and wrote: [3] Squalene “contributed to the cascade of reactions called “ Gulf War syndrome. GIs developed arthritis, fibromyalgia, lymphadenopathy, rashes, photosensitive rashes, malar rashes, chronic fatigue, chronic headaches, abnormal body hair loss, non-healing skin lesions, aphthous ulcers, dizziness, weakness, memory loss, seizures, mood changes, neuropsychiatric problems, anti-thyroid effects, anaemia, elevated ESR (erythrocyte sedimentation rate), systemic lupus erythematosus, multiple sclerosis, deadly Amyotrophic Lateral Sclerosis, Raynaud’s phenomenon with paroxysms of lack of blood in fingers and toes in fingers and toes, Sjorgren’s syndrome with blurred vision, chronic diarrhea, night sweats and low-grade fever.”

[4] Wikipedia A [5] study linking squalene, as experimental vaccine adjuvant, to individuals with the clinical signs of Gulf War syndrome was published in 2002. A U.S. Federal Judge ruled that there was good cause to believe aqualene to be harmful, and he ordered the Pentagon to stop administering it in October 2004.

XXX. Conclusion

There is evidence that there is an international criminal corporate crime syndicate, directed by a group called the Illuminati, are planning the mass murder of the people of the USA by using an artificial virus as a pretext to deliver a toxic vaccinations.

There is clear, unambiguous evidence that Baxter is affiliated with this group and deliberately released 72 kilos of pandemic material in February in Austria to trigger a pandemic in order to justify a pandemic declaration level 6 by WHO and mass vaccinations.

There is evidence members of the same group were involved in engineering and releasing the “swine flu” virus in Mexico to allow WHO to declare pandemic level 6 on June 11th.

The same complex of international pharmaceutical companies and international government agencies that have developed and released pandemic material have positioned themselves to profit from triggering the pandemic by sealing contracts to supply the vaccine.

There are reasonable grounds for believing that the mandatory vaccines will be purposely contaminated with diseases that are specifically designed to cause death.

A fully licensed Novartis bird flu vaccine has killed at least 21 homeless people in Poland in the summer of 2008 and had as its “primary outcome measure”, an “adverse events rate”, thereby meeting the US government’s own definition of a bioweapon (a biological agent designed to cause an adverse events rate, i.e. death or injury) with a delivery system (injection).

The nature and intent of these pandemic viruses and forced inoculation is to drastically reduce the world’s population, something that the financial and political elite believe will offer them the best chance of surviving in an environmentally stressed era while maintaining their revenue from oil and gas. A switch to solar, wind and geothermal energy, for example, would relieve pressure on the environment but destroy their profit base.

Furthermore, their control of organisations such as WHO, the UN and the Federal Reserve will allow them to consolidate their power in a “New World Order” as they refer to their own project for world domination by them.

To sum up: the pandemic flu vaccine is a) classed as a “bioweapon” according to the US government’s own documents (see Attachment 1), b) the vaccine companies tasked with producing the vaccine have been involved in the activities of the type typical of bioweapons, including developing weapnized viruses, releasing them into the general public, in deliberate contamination of vaccines resulting in death and injury and designing trials of vaccine to cause death and injury and there is a high probability the vaccines will be cause injury or death, and c) the government is acting unconstituutionally and illegally in compelling them to take an injection of a substance classified as bioweapon d) in criminalising a refusal, and e) in waiving people’s right to claim compensation in the event of injury or damage, and f) by misusing the US population as “vectors” to spread the pandemic because the act of mass vaccination, that is to say, of forced injections of of toxins under guise of offering prophylactic treatment is the very process by which the virus will be able to mutate and release a fully weaponized virus.

XXXI. Defendants

The main defendants are:

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The above defendants have given support in the form of funds, logistics, skills, licences and cover to the covert programme of mass genocide using an artificial virus and mass vaccination with toxic vaccines.

Speicifically, Defendant President Barack Obama, who as part of his Office, will oversee the implementation of the International Partnership on Avian and Pandemic Influenza, which would give primacy to the World Health Organisation (WHO) and United Nations over US law and government agencies in the event of a pandemic being declared. President Obama has also requested a $1.5 billion emergency appropriation to deal with swine flu, including development of a vaccine.

Defandant David Nabarro, who as Senior U.N. system influenza coordinator will implement an emergency response plan in the event of a declared pandemic on US territoriy operating through authorities under the WTO, North American Free Trade Agreement and the U.N. Food and Agriculture Organization, and taking precedence over US government agencies and law.
4. Defandant WHO, the organisation responsible for coordinating the global response, including the US response, to the „swine flu“ and other pandemics.

Defendant HHS is in the process of working with vaccine manufacturers to facilitate production of pilot vaccine lots for both H5N1 and H9N2 strains as well as contracting for the manufacturing of H5N1 vaccine. The HHS recently awarded contracts to Novartis AG worth $289 million; Sanofi Aventis SA for $191 million, and GlaxoSmithKline PLC for $181 million to produce H1N1 vaccine ingredients. HHS said it is also talking to additional manufacturers to find more capacity.

Defendant DHS has prepared pandemic flu guidelines, including the National Strategy To Safeguard Against The Danger Of Pandemic Influenza (White House) and will coordinate between government officials and the public health, medical, veterinary, and law enforcement communities, as well as the private sector in the event of a declared pandemic.
Defendant Department of Health and Human Services (“HHS”) through its agent, Defendant Food and Drug Administration (“FDA”), is the federal agency responsible for licensing and quality control of drugs and biologic products, such as „swine flu“ and other pandemic vaccines.

The FDA is responsible for promulgating federal regulations that describe what makes a drug or vaccine an “IND” and how a drug is placed in IND status.

Defendant Human Services Secretary Michael Leavitt introduced a new FDA rules in January 2006 that pre-empted any state laws that allow citizens to sue drugmakers for producing unsafe drugs under the dubious claim that the FDA, an agency under HHS, had national responsibility for certification of drug safety and state lawsuits impinged on that national responsibility.

The object of this book has been as lofty as the total emancipation of healthcare from the real cause of cancer, i.e. *Eugenics* and the parasites that promoted it. Whether we can achieve it or not, is what we have yet to find out. We don't have the slightest illusion that it will happen very soon. The only thing we are very sure about is that it will happen.

What you have just learned from the previous pages of this book are simple, common sense approaches to healthcare that when the initial costs are omitted from the equation, could give you virtually *free medicine* for much of your family's healthcare needs, now and in the future, implementable within the comfort of your own home or wherever you might be for these are very portable devices, too.

You'll never be spending sleepless nights over helpless loved ones again. Now, everybody can put up a good and decisive fight against cancer, AIDS, and all other parasitic disease with the highest probability of succeeding.

If we have caused so much discomfort or hurt a few egos along the way, rest assured those were not the intention. It is a matter of telling the Whole Truth for it has been denied long and deadly enough. The possible consequence of doing so have all been considered and weighed. Yet the Soul is at peace knowing it has done the Right Thing.

More than ever in the entire history of this planet, mankind now have a clearer choice between embracing enlightenment over the curse of ignorance. Choose wisely.

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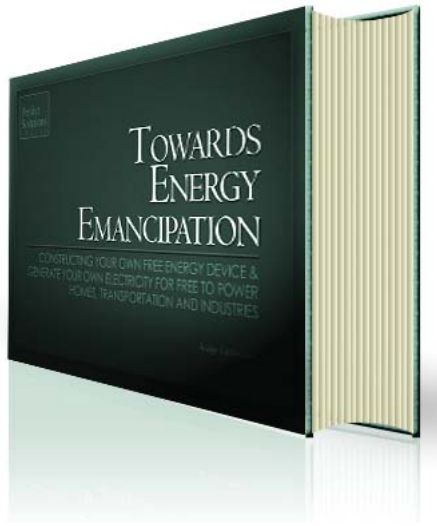

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