

Xenotransplantation – Creating The Zombie Apocalypse

32 Votes

The following information is based solely on fact and sourced within.

This essay is an addendum to my documentary film, “*Lethal Injection: The Story Of Vaccination*“. It is of utmost importance that you read this entire article and spread it indefatigably.

What you are about to read may very well be the largest combined cover-up of the confederated government, ranching, meat-packing, medical, and pharmaceutical industry’s history – a collaborative effort to hide the true nature of what can only be called the human race’s modern plague of neurological and other degenerative diseases, from Alzheimer’s to AIDS.

This is not about the dead coming back to life. On the contrary, death is the only sweet release from this disease... a final cure that is always certain, and which never comes soon enough.

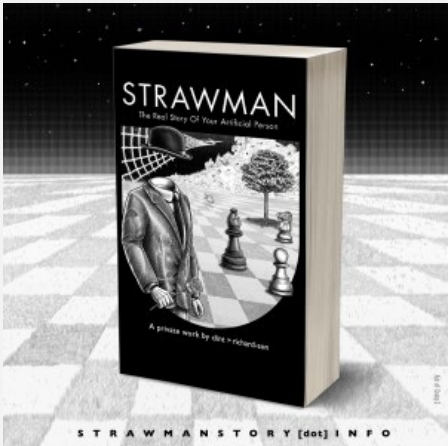
This is the real story of an apocalyptic peril that, as it turns out, very likely already lies dormant in us all.

This is not a *zombie genre* fiction, but is instead the real-life story of what are called “**prions**“.

The following essay affects anyone and everyone who may be reading this, without exception. This research is not an attempt to scare you or to promote science fiction. It is instead my personal attempt to save the world; to warn the entire planet of what “zombie” fans and fanatics could only before both dream about and dread, and in the end offer what I believe with all of my soul to potentially be the proverbial cure and end of prion-related diseases for ever.

But I digress... for most people – including many nurses and doctors – have never even heard of a *prion*, let alone considered them as the cause of such conditions that I now believe to be purposefully and falsely diagnosed as Alzheimer’s, Lou Gehrig’s Disease

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(Amyotrophic lateral sclerosis – ALS), Parkinson’s Disease, and many other debilitating conditions that most medical “professionals” will to this day admit – they do not know the cause of!

Dismiss this information at your own peril...

Or embrace it and fight for your life and your right to live it well!

—~—
What Is A Zombie?
—~—

Sorry folks, but you’ll have to come down to Earth for this presentation! Please place all pre-conceived notions securely in the overhead bins and place all tray-tables in their upright and locked positions. It’s time to get real...

For the purposes of this essay, the term “zombie” is defined by the World English Dictionary as:

*1. a person who is or appears to be lifeless, apathetic, or **totally lacking in independent judgment**; automation*

And by Dictionary.com as:

*2. Informal. a. a person whose behavior or responses are **wooden, listless, or seemingly rote**; **automaton**. b. an eccentric or peculiar person.*

And Wikipedia gives this alternative description:

*The term (zombie) is often figuratively applied to describe a hypnotized person **bereft of consciousness and self-awareness, yet ambulant and able to respond to surrounding stimuli**.*

With the following descriptions in mind, and the Hollywood death worship, gore, and fanfare safely tucked away, we can now safely proceed with what I feel may be some of the most important information you may read in your lifetime.

And anyone who knows of me, certainly knows that I don’t say something like this lightly...

—~—
Cannibalism As Medicine
—~—

The virtually unknown and under-discussed scientific and medical topic of what is called “**xenotransplantation**“, as well as human protein ingestion – including injection (vaccination) of other animals and human cells into the human body – is now a practice as prevalent as the consumption of aspirin. From flavor enhancers labeled as “natural ingredients” or “natural flavors” to oral and inject-able pharmaceutical drugs ranging from insulin to human growth hormone to anti-blood clotting drugs to seasonal vaccines, the human race has unsuspectingly been transformed into a species that consumes itself “*for medicinal purposes*“.

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Be it consumed orally, injected (vaccinated) through the skin to bypass the body’s natural defenses, or purposefully “xeno”-transplanted via surgical procedure, the deadly zombie-creating prion we are about to expose is officially undetectable, ineradicable, untreatable, irreversibly fatal, and unless good people take immediate action and demand public exposure and immediate research, unstoppable!!!

There is a distinct difference between animal and human consumption, both in application and in function. But the dangers in both cases are equally deadly – as in always deadly, without exception, meaning 100% fatal! The reasons for this fact will become inescapably apparent and self-evident as we read on...

— ~ —

What is Xenotransplantation?

— ~ —

The FDA explains Xenotransplantation as:

Xenotransplantation is any procedure that involves the transplantation, implantation or infusion into a human recipient of either (a) **live cells, tissues, or organs from a nonhuman animal source**, or (b) **human body fluids, cells, tissues or organs that have had ex vivo contact with live nonhuman animal cells, tissues or organs**. The development of xenotransplantation is, in part, driven by the fact that the demand for human organs for clinical transplantation far exceeds the supply.

Currently ten patients die each day in the United States while on the waiting list to receive lifesaving vital organ transplants. Moreover, recent evidence has suggested that transplantation of cells and tissues may be therapeutic for certain diseases such as neurodegenerative disorders and diabetes, where, again human materials are not usually available.

Although the potential benefits are considerable, **the use of xenotransplantation raises concerns regarding the potential infection of recipients with both recognized and unrecognized infectious agents and the possible subsequent transmission to their close contacts and into the general human population.** Of public health concern is the **potential for cross-species infection by retroviruses, which may be latent and lead to disease years after infection. Moreover, new infectious agents may not be readily identifiable with current techniques.**

(Source:
<http://www.fda.gov/BiologicsBloodVaccines/Xenotransplantation/default.htm>)

— ~ —

The FDA also has this information page regarding xenotransplantation:

Information and recommendations for Physicians Involved in the Co-Culture of Human Embryos with Non-Human Animal Cells

- [Red Pill Sunday School S2 E4 – Strawman Book Pt.3](#)
- [Red Pill Sunday School S2 E3 – Strawman Book Pt.2](#)
- [Red Pill Sunday School S2 E2 – Strawman Book Pt.1](#)
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- [Orwell’s New Law: Intolerance Is Tolerance](#)
- [Lethal Injection Part 2 Coming Soon](#)
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- [Monty Python Ended The Gender Identity Debate In 1979](#)
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The U.S. Food and Drug Administration (FDA) wants you to know that **the co-culture of human embryos with nonhuman animal cells raises health concerns for the recipients of such embryos, the offspring resulting from such embryos, and the general public.** The use of nonhuman animal cells, tissues or organs in the treatment of human medical conditions is called xenotransplantation...

Co-culture of human embryos with nonhuman animal cells fits the second part of this definition (*xenotransplantation, defined above*). During co-culturing, human embryos and nonhuman animal cells are maintained together outside the body, in *ex vivo* contact. Thus, **the woman into whom the co-cultured embryos are transferred is a recipient of a xenotransplantation product.**

A serious concern regarding the clinical use of xenotransplantation is the potential for the transmission of infectious disease from nonhuman animals to humans.

Scientists believe that the potential for transmission of an infectious disease from the animal source to a human is of concern either when live nonhuman animal cells, tissues or organs are implanted directly into a human, or when human cells are exposed to live nonhuman animal cells by ex vivo contact. Experience with organ allotransplantation has shown that **diseases such as human immunodeficiency virus (HIV) infection, Creutzfeldt-Jakob disease, hepatitis B virus infection and hepatitis C virus infection can be transmitted from the human donor to the recipient.**

Similarly, xenotransplantation poses concerns for infection with recognized, or as yet unrecognized, infectious agents from nonhuman animals. **These concerns may extend beyond the recipient to the general public because of the potential for subsequent transmission of an infectious agent to the recipient's contacts and to the general population.** Infections originating from animals that have been known to infect and be transmitted from human to human include, for example, **HIV and swine influenza.** Many viruses exhibit latency, so that the lack of symptoms at the time of the embryo transfer, or in the short term, does not alleviate all concern.

The U.S. Public Health Service has published guidelines on infectious disease issues in xenotransplantation. These guidelines, as well as FDA guidance documents, can be found at the website <http://www.fda.gov/cber/xap/xap.htm>, or obtained from FDA. They recommend, for example, that:

- You should inform recipients of xenotransplantation products that they and their intimate contacts should defer from donation of blood and other tissues.
- You should inform patients that they have been treated with a xenotransplantation product and of the risks involved.
- You should archive patient samples, such as blood, to allow future monitoring for potential infections.
- You should follow patients **for their lifetimes** and counsel them to be alert to any unusual symptoms.
- You should archive samples of the xenotransplantation product. In this

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case, the nonhuman animal cells used for the co-culture process should be archived.

We would be happy to discuss any questions you might have about these recommendations. The nature and level of our concerns may vary depending on the species of nonhuman animal used in the co-culture technique and the source of the culture cells. We plan to have further public discussion of this topic with an appropriate federal advisory committee. At this time, FDA plans to enforce investigation new drug application (IND) requirements for investigations involving further production of embryos co-cultured with live nonhuman animal cells.

However, currently it is not our intent to take enforcement action based on the transfer of already existing embryos created by co-culture with live nonhuman animal cells.

(Source:

<http://www.fda.gov/BiologicsBloodVaccines/Xenotransplantation/ucm136532.ht>

—~—

Has anybody considered that the growing of human body parts on animals is a gateway for new and more dangerous mutation of prion development and transmission? After all, the animal circulatory system will be directly fused during growth, and transferred during xenotransplantation into or onto the human host.

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In my film, “*Lethal Injection: The Story Of Vaccination*”, I covered in great detail the disturbing fact that cloned DNA from human aborted fetuses and other animal proteins are used in the production of vaccines and in the growth of cell substrates for vaccine cell growth (free to view on YouTube, -> [here](#)). Some viewers mistook this information as an attempt to promote a “pro-life” political standpoint, indeed missing the very real point that we are literally being forced into eating, injecting, and applying as cosmetics ourselves (other humans) with our unborn aborted children in the name of “medical science” and “beauty”. Thus, to say that “*Soylent Green is people*” is truly an understatement in modern medicine, food, and cosmetics. Indeed, everything is a choice.

Before we proceed, we must understand exactly what it is that gets directly injected into the human body via the vaccination process. Here is an incomplete list of human and non-human animal proteins and ingredients that are used in the vaccine and other inject-able drug markets. Note that these are listed as “ingredients” of different vaccines:

- residual MRC5 proteins – **human diploid cells from aborted fetal tissue – including DNA and proteins**
- human albumin, albumin from human blood
- sucrose human albumin
- chicken embryo
- chick embryonic fluid
- chicken protein
- monkey kidney cells

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- phenol red rhesus monkey fetal lung cells
- rhesus monkey fetal diploid cells
- rhesus monkey rotavirus
- 3 rhesus-human reassortant live viruses
- guinea pig embryo cells
- mouse serum proteins
- gelatin (collogen – animal proteins, especially flesh and connective tissues. Aborted human fetal material also used in cosmetics)
- lactose (animal milk derived – also added to pills as a cheap “filler”)
- vesicle fluid from **calf** skins
- calf** serum
- bovine** fetal serum
- bovine** extract, US sourced
- bovine** gelatin and serum “from source countries **known to be free of bovine spongiform encephalopathy**” (*Note: this is an impossible claim to prove.*)
- Mycobacterium **bovis**
- polysaccharide from **Salmonella** typhi Ty2 strain
- recombinant protein (OspA) from the outer surface of the spirochete Borrelia burgdorferi
- kanamycin – a tick-borne pathogen that causes **Lyme disease**

(Older) List of vaccines with aborted fetal tissue (cloned):

(**Link:** <http://www.silentvoices.org/vaccinechart.html>)

These human and other animal proteins are all but impossible to filter out of the final inject-able product (vaccines), and are being introduced at an alarming rate into the human and animal population of the world with the advent of the popularity and profit-potential of vaccination on a world (United Nations) scale. While the moral implications of this barbarous and unethical practice are more than obvious and should seemingly be enough to defeat the ego when choosing whether or not to vaccinate ones self or ones children, there is a much more sinister and unknown danger in this practice that needs a bit of light shown upon it...

Introducing, the **prion**...

— ~ —
The Indefatigable Prion
— ~ —

pri·on

noun \ 'prē- ,än\ (*Medical Dictionary*)

Any of various **infectious proteins** that are abnormal forms of normal cellular proteins, that proliferate by inducing the normal protein to convert to the abnormal form, and that **in mammals include pathogenic forms which arise sporadically, as a result of genetic mutation, or by transmission (as by ingestion of infected tissue) and which upon accumulation in the brain cause a [prion disease](#)**.

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prion

noun (Concise Encyclopedia)

Disease-causing agent, discovered by Stanley Prusiner, responsible for various fatal neurodegenerative diseases called **transmissible spongiform encephalopathies**. An abnormal form of a normally harmless protein found in mammals and birds, the disease-causing prion can enter the brain through infection, or it can arise from **a mutation in the gene that encodes the protein. Once present in the brain it causes normal proteins to refold into the abnormal shape**. As prion proteins multiply, they accumulate within nerve cells, destroying them and **eventually causing brain tissue to become riddled with holes**. Diseases caused by prions include **Creutzfeldt-Jakob disease, mad cow disease, and scrapie. Prions are unlike all other known disease-causing organisms in that they appear to lack nucleic acid (DNA or RNA)**.

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Deadly Feasts

—~—

I am seldom one to promote a book or movie, and yet I feel compelled to share this one with you – a 15 year old warning that has gone unheeded by the corporate and government profit machine, ignored by the media and medical community and as a result the conditioned and ignorant people, and brushed aside out of public view in an effort led by the WHO and the U.S. FDA and CDC.

“*Deadly Feasts: Tracking The Secrets Of A Terrifying New Plague*” was written and researched by Pulitzer prize winning author and researcher Richard Rhodes, published in 1997. I recomend that this book be on your “to read” list, if only to understand what is potentially the worst continuing outbreak of avoidable, man-induced disease in the history of the world.

If you’ve ever been vaccinated or eaten any type of meat or dairy products, you should really pay attention here...

The Introduction to the book, entitled “*To The Reader*”, states:

“The threat of Ebola virus has haunted our nightmares since Richard Preston published his “terrifying true story” *The Hot Zone* in 1994. Ebola hides in the African rain forest, but **a deadlier disease than Ebola has begun killing young people in Britain and France**. Ebola is a terrorist: it sickens people quickly and spares at least one out of ten. **The new disease is a stealth agent: it incubates silently for years and kills every last victim it infects**. Ebola is a sickness of fever and bleeding, no worse than cholera, a quick if not a merciful death. **The new disease is an atrocity of destruction – a headache, a stumble, and then hallucination, palsy, seizure and coma drawn out horribly for months. Victims’ brains go spongy; their minds dim; they lose the ability to walk, to talk, to see, to swallow; they die slowly, drowning in pneumonia, or they starve to death.**

Ebola can survive outside of the body for a few days at best. Sunlight kills it. Ultraviolet light kills it. The new disease agent refuses to die. Assault with pressurized, superheated steam in the autoclaves that hospitals use to sterilize instruments for surgery barely slows it. It remains deadly after hours of intense bombardment with hard radiation, months of soaking in formaldehyde, years of burial, decades of freezing. It survives even the fiery furnace of a seven-hundred-degree oven.

How Ebola spreads is still uncertain, but scientists know it's a virus. In time, a vaccine will protect us from its threat (*author's note: I disagree with this vaccine statement, as is self evident in my film and research*). The new disease turns up no virus in victims' brains. It creeps past the barriers of species and immunity. Evidence accumulates that it's a bad seed, a mistake of protein, a misshapen crystal that forces the brain to poison itself. If so, it's a new kind of disease agent that can never be eradicated.

How the new disease spreads is known: **it spreads in the cannibalism of animals by animals, it spreads in the industrial cannibalism of animal remains fed to animals, it spreads by the eating of beef...**

Deadly Feasts then discusses the cannibalistic rituals of the Fore tribal people who lived in New Guinea. More specifically, the “revenge” of the female members of the tribes who consumed (ate) the parts of their husbands and menfolk together with vigor and ritualistic joy – the result of the less than loving matrimonial customs of the Fore people. Each internal organ was extracted with care and precision, and then served with various plant sides, sweet potatoes, and other forest condiments.

A tradition that was started by the women of the tribes in the 1930's, this cannibalism resulted in mass outbreaks of disease locally called “Kuru”. Kuru was thought by the women of the Fore tribes to be nothing short of witchcraft by the menfolk, whom were thought of as “sorcerers” in many Fore tribes. The native word “Kuru” literally meant shivering- in cold or from fear. And once the sorcery of Kuru took hold, the “bewitchment” would, without exception, lead to death.

Kuru's symptoms are described as if taken straight of Night Of The Living Dead:

The symptoms of Kuru are broken down into three specific stages. The first, ambulant stage, exhibits unsteady stance and gait, decreased muscle control, tremors, deterioration of speech and dysarthria (slurred speech). In the second stage, sedentary stage, the patient is incapable of walking without support, suffers ataxia (loss of muscle coordination) and severe tremors. Furthermore, the victim is emotionally unstable, depressed, yet having uncontrolled sporadic laughter. Interestingly, the tendon reflexes are still normal at this point. In the final, terminal stage, the patient is incapable of sitting without support, suffers severe ataxia (no muscle coordination), is unable to speak, is incontinent (unable to restrain natural discharges/evacuations of urine or feces), has dysphagia (difficulty swallowing), is unresponsive to their surroundings, and acquires ulcerations (**sores with pus and necrosis**). An infected person usually dies within 3 months to 2 years after the first symptoms, often because of pneumonia or pressure sores infection.

(**Source:**

<http://anthropology.ua.edu/bindon/ant570/Papers/McGrath/McGrath.htm>)

Please note that the symptom called “necrosis” is defined as:

Necrosis: The death of living cells or tissues. Necrosis can be due, for example, to ischemia (lack of blood flow). From the Greek “nekros” meaning **dead body**.

Now, despite the fact that the hairs on your back of your neck may be standing up in fibrous nervousness about now, we haven’t yet begun to uncover the zombification of the world yet.

“*Deadly Feasts*” begins its story in Papa New Guinea with the true story of cannibalism and its cost:

“Men lived separately from the women and children, following their wives into their gardens to copulate, sharing the big men’s lodge with the older boys. Men believed contact with women weakened them. They resented the fecundity of women. Men seldom ate the dead and then only the red meat, surreptitiously...”

“The women at their mortuary feast butchered and cooked down in the garden, but they ate in private, carrying the steaming bamboo tubes back to their separate woman’s houses, sharing the feast with their children...”

“They ate every part of the body, even the bones, which they charred at the open fires to soften them before crumbling them into the (bamboo shoot) tubes. The dead woman’s brother’s wife received the vulva as her special portion. If the dead had been a man, his penis, a delicacy, would have gone to his wife...”

“Eating the dead was not a primordial Fore custom. it had started within the lifetime of the oldest grandmothers among them, at the turn of the century (1900) or not long before...”

“Women bewitched with Kuru staggered to walk, walked with a stick and then could no longer walk at all. Before losing the ability to swallow they got fat and the flesh of those who died early of pneumonia was rich meat...”

“Nevertheless, the damage Kuru caused to the brain was similar to the damage caused by the rare condition known as **Creutzfeldt-Jakob disease (CJD)**.

Towards the end of the book, Mr. Rhodes discusses the phenomenon and likely scientific folly of xenotransplantation in an interview with Dr. David White, the cofounder and medical director of a company called **Imutran**:

“Pioneer xenotransplantation has already begun: in 1984 in the U.S., a baboon heart kept Baby Fae alive for twenty days: a baboon liver was transplanted in 1994; San Francisco AIDS patient Jeff Getty received a baboon-marrow graft in 1995 to shore up his immune system. Advanced biotechnology that may make xenotransplantation routine is under development in the United States and in Britain. Lines of transgenic pigs are being bred for use initially for hearty transplants. Pig blood types are more like human types than those of other animals, but a strong immune response known

as hyperacute rejection normally destroys pig tissue grafted into primates in a matter of hours.

I investigated Imutran, a company based in Cambridge, England, that leads the world in xenotransplantation technology, and learned that it has cloned human genes that defeat hyperacute rejection and inserted them into pig embryos. Imutran has bred hundreds of pigs carrying these human genes. Rejection of transgenic pig hearts still has to be controlled with drugs, just as rejection of transplanted human hearts has to be controlled with drugs. In 1995, Imutran demonstrated that even without such immunosuppressive drugs, monkeys implanted with its transgenic pig hearts survived for five days – well past the time when hyperacute rejection would have destroyed an ordinary pig-heart implant. Implanted monkeys treated with immunosuppressive drugs survived up to sixty days. That achievement led Dr. David White, Imutran’s cofounder and medical director, to predict routine pig-heart transplants in humans before the turn of the century. “The big debate now,” White told the media, “is, do we currently have the skills to keep the hearts functioning in people for a long time; and **the only way to answer that question is to put them into people and find out.**”

I interviewed White at Imutran’s headquarters in Cambridge in April 1996. He was enthusiastic about his work. “Right from the beginning,” he explained, “**our approach was to ask how can we genetically engineer the pig, not how can we treat the patient.** From there, we realized that a possible approach would be to put these human regulators into a pig. And the smartest thing I ever did was to take out a patent on the process. Because that’s what pays all the bills.” Although I didn’t know it at the time, **White had just sold Imutran to Sandoz Pharma, Ltd., a major drug company.**

I will put my career on the line,” he told me, “and say that hyperacute rejection as we know it is dead, gone, finished. You take an organ from one of our pigs and transplant it into a primate and it will go for days without any treatment at all, routinely. We’ve done kidneys, islets [i.e. pancreatic tissue which secretes insulin, to correct diabetes], hearts – I don’t even know the number now, sixty or seventy. Now all we have to do is immunosuppress the monkey in order to achieve long-term survival. We did our first baboon transplant a couple of weeks ago, and on the same day that we successfully transplanted a baboon with a pig heart, one of our patients died waiting for a human heart.”

I came to the point of my visit: “Are you concerned with BSE?”

****Note that BSE stands for **bovine** spongiform encephalopathy (i.e. Mad Cow Disease).*

“Fortunately,” White countered, “pigs don’t get BSE.”

“I think there’s evidence they do.”

“If you take contaminated brain from a mad cow and inject (vaccinate) the neural tissue directly into the brain of the pig it will get spongiform

encephalopathy. But they’ve been feeding infected brain to pigs for five years no and none of the pigs has the disease.”

That was true.

“You have to appreciate that BSE is not an infection. It’s a very curious toxicity really.”

I told Dr. White I’d looked into it.

“Well,” he responded, “then perhaps you can tell me how the hell the bloody thing works. I don’t understand it.”

I tried to explain abnormal protein crystallization (*caused by prions*).

He listened. “Yes, that could work,” he said finally.

“Your pigs are isolated and presumably not fed meat-and-bone meal,” I prompted him.

“Oh no,” he confirmed. “Disease transmission is an area of considerable concern.” He left his desk and returned with a proprietary study as thick as a telephone book. “We put together a group of the world’s leading experts on pig disease and on the diseases that transplant patients get.” He opened the book. “I’ll just read you some of the headings. ‘Microorganisms Known To Be Pathogenic.’ ‘Microorganisms Pathogenic In Humans.’ ‘Microorganisms Known To Be Pathogenic In Pigs Bt Not Pathogenic In Humans.’ ‘Microorganisms Not Known To Be Pathogenic But Similar To Microorganisms Pathogenic.’ And so on. Porcine RNA viruses, porcine DNA viruses, exotic porcine RNA viruses, exotic porcine DNA viruses, a special section on the human measles viruses. Porcine bacteria – the gram negatives, the gram positives – and it goes on and on. A basic risk assessment of them all. A list of pathogens of most concern.” He closed the book. “So when you’ve done all that, you’re left with one problem, which is the retroviruses. We’re currently doing research on our primates to answer the question, will these pig retroviruses jump across the species barrier and recombine with human retroviruses? We haven’t finished, but we think the probability is extremely remote.”

***Author’s note: In my film *Lethal Injection: The Story of Vaccination*, we see various patents for using Porcine Zona Pellucida (pig ovaries) as inject-able vaccination birth control methods, for use in both animals and humans. The foreign ovary proteins cause an “immune response” in the vaccinated patient and the body’s natural defenses develop “antibodies” inadvertently for the body’s own (human) reproductive functions, while attempting to fight the foreign reproductive ovary or other proteins. This is but one example of xenotransplantation designed to control population growth in animals and humans...

“The pigs wont go to the hospital, White continued, The patient will come somewhere near the pigs. “That is,” he explained, “you will have a few dedicated specialist centers which do xenotransplantation. Those centers will have a sterile pig-production unit nearby. The patients will come there. **It is ludicrous that you have to wait for**

fit, healthy people to die so that you can treat sick people. With a pig, you can come in and the physician will say, ‘I think you’re going to need a heart transplant. ‘You wouldn’t be at the end of the road. Maybe three months, maybe six months away. **And we would modify your immune system so that you won’t reject pigs.**

It occurred to me that we might be talking about more than hearts. “Are you planning to transplant other organs and tissues from the pig?”

“The heart, the lungs – all those former smokers, the market is huge – the kidney. Possibly the intestine. The substantia nigra is an area of great interest.”

I said: “What?”

“Bit of the brain,” White said. “For the treatment of Parkinson’s disease.”

I knew what substantia nigra was, I just couldn’t believe that a brilliant and innovative physician-businessman who had admitted he didn’t understand what causes spongiform encephalopathy (who does?) was **planning to implant pig brain directly into the brains of humans.**

In July of 1996, the Committee on Xenograft Transplantation of the U.S. Institute of Medicine, part of the National Academy of Sciences, endorsed xenografting on the grounds that **the potential benefits outweigh the risks.** “When the science base for specific types of xenotransplants is judged sufficient,” the committee concluded, “and the appropriate safeguards are in place, well-chosen human xenotransplantation trials using animal cells, tissues and organs would be justified and should proceed.” **The committee cited “ample evidence,” however, that infectious agents could be transmitted from animals to humans, which indicated a danger “unequivocally greater than zero” that xenotransplantation could transfer new and deadly viruses across the species barrier. And it specifically mentioned transmissible spongiform encephalopathy (Mad Cow Disease).**

Most importantly, in analyzing the age-specific incidence of both bovine BSE and sporadic human CJD, Dr. Richard Kimberlin states:

“The shape of the age-specific incidence curve... implies that infection with a common strain [of CJD] occurs in childhood or adolescence, and that **the median incubation period is 40 to 50 years.**” German researcher Dr. Heino Diringen similarly defends an infectious cause: “It seems more than likely that... the sporadic cases of CJD always originate from direct or indirect transmission from animals to man.” In 1996, Deringer reported finding small virus-like particles in scrapie hamster brain...”

“Carleton Gajduserown freeze-dried a sample of scrapie brain, sealed the sample into a glass ampule and baked it in an oven for one hour at 360 degrees Celsius (nearly 700 degrees Fahrenheit). Reconstituted, the sample **still transmitted scrapie to a hamster.**”

At the end of his book, Richard Rhodes leaves us with these words (note: there are no

spoilers here, just facts):

“I remember something he (*Nobel-laureate virologist D. Carleton Gajdusek*) asked me at our first meeting, late in 1995, before the British reported out the beginnings of what may be their new Black Death.

“You know the bone meal that people use on their roses?” Gajdusek asked me then. **“It’s made from downer cattle.** Ground extremely fine. The instructions on the bag warn you not to open it in a closed room. Gets up your nose.” The Nobel-laureate virologist who knows more than anyone else in the world about transmissible spongiform encephalopathy looked at me meaningfully. “Do you use bone meal in your roses?”

I told him I did.

He nodded. “I wouldn’t if I were you.”

The final blurb of *Deadly Feasts* is an article from the *London Daily Telegraph*, dated April 4, 1996:

“Gardeners have been reminded by the Royal Horticultural Society to wear gloves and a dust-excluding mask to avoid any risk of BSE when applying a spring dressing of blood and bonemeal to roses and shrubs.

Demand for beef is recovering steadily. At London’s Smithfield wholesale market, the trade in better quality cuts of British beef has recovered from zero a week ago to just over half the normal .

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Creutzfeldt-Jakob Disease (CJD)

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Before we read the following report from the Mayo Clinic on CJD, and as we will see once again this clinic reiterating the fact that very few cases of CJD have been reported throughout the world (as has the FDA, CDC, WHO, etc...), we must begin to consider that on an international scale, “prion diseases” are being covered up – quite simply by means of diagnosing them as other diseases such as “Alzheimer’s Disease” – **of which these same “organizations” claim not to know the origins or causes of.**

In fact, on page 133 of “Deadly Feasts”, Dr. Carlton Gajdusek and Joe Gibbs are quoted as such:

“Gajdusek and Gibbs prepared a technical note for the *Journal of Neurosurgery*. They reviewed CJD transmissibility. They advised that it was reasonable to assume that the CJD agent was at least as resistant as the scrapie agent to heat, formaldehyde and ultra-violet light. “In particular,” the wrote, “one must assume the agent is not killed by boiling.” **They pointed out that physicians often misdiagnosed CJD as Alzheimer’s disease, as the form of cerebral atrophy known as Pick’s disease, or as many other conditions including brain tumors and strokes.** They recommended sterilizing instruments used on such patients in an autoclave – a

machine used in hospitals that kills even hardy microorganisms with hot steam under pressure – for at least thirty minutes, twice the standard autoclaving time. **They recommended treating all organs as infectious, even those fixed in formaldehyde.** They had found **only one chemical, chlorine bleach, that reliably killed the scrapie agent** and they recommended using it to decontaminate floors and other surfaces where tissue might have fallen.

But before this technical note was published... from *Deadly Feasts*:

“Diseases doctors unintentionally cause are called iatrogenic, Greek for “physician-born”. The first known human-to-human transmission of spongiform encephalopathy outside the Fore was iatrogenic (by Dr. Arthor DeVoe, eye surgeon and chairman of the department of ophthalmology at the College of Physicians and Surgeons of Columbia University in New York)...

A donor became available, a middle aged man with a two-month history of memory loss and involuntary tremors who died of pneumonia. Down in the hospital morgue, an ophthalmologist harvested one of the man’s eyeballs, immersed it in sterile saline in a small jar and delivered it to surgery...

Holding the donor cornea like a contact lens, DeVoe lowered it over the hole in his patient’s eye. It fit perfectly. Meticulously, across the next hour, DeVoe joined the edges of the cornea and the woman’s eyeball together with stitches of fine nylon thread, burying the knots in the wound...

The eye healed. The woman could see again clearly through the dead man’s cornea and the operation seemed a success. **But the optic nerve connects the eye directly to the brain, providing a channel for infection, and the brain of the man who died of pneumonia, who had not been autopsied until after his cornea was harvested, showed the characteristic damage of Creutzfeldt-Jakob Disease.** A year and a half after her operation, the woman began feeling nauseated, had difficulty swallowing, came to drool and stumble and jerk, went spastic, went mute, gradually introverted into vegetable oblivion. Two years beyond her surgery, emaciated and bedsores, she mercifully died. **On autopsy her brain looked like the brain of the man who had donated his cornea – like a sponge.** If Arthor DeVoe had only known before the transplant operation. **A sickness had oozed from the cornea he’d implanted and eaten holes in his patient’s brain.**”

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Now, when we look at the description for “Alzheimer’s Disease”, which according to the preeminent Spongiform Encephalitis expert is actually a prion disease such as CJD, we see virtually the same symptoms listed.

Alzheimer’s Disease is the most common form of a whole class of diseases generically called “dementia”. There is no stated or listed cure for Alzheimer’s Disease, which worsens as it progresses, and it eventually leads to death without exception from one of the direct or indirect “symptoms”.

Like AIDS, Alzheimer’s is not a disease in and of itself within the medical books, but rather a description for the symptoms of a particular disease state that is not understood – and this is the case with thousands of disease states and their symptoms.

The NINCDS-ADRDA Alzheimer’s Criteria specify eight cognitive domains that may be impaired in AD: **memory, language, perceptual skills, attention, constructive abilities, orientation, problem solving and functional abilities.**)

Sound familiar?

Now let us consider the number of cases of Alzheimer’s worldwide, and the predictions for humanity’s future.

In 2006 the worldwide prevalence of Alzheimer’s disease was 26.6 million. By 2050, prevalence will quadruple by which time 1 in 85 persons worldwide will be living with the disease. **We estimate about 43% of prevalent cases need a high level of care equivalent to that of a nursing home.** If interventions could delay both disease onset and progression by a modest 1 year, there would be nearly 9.2 million fewer cases of disease in 2050 with nearly all the decline attributable to decreases in persons needing high level of care.

Interpretation: We face a looming global epidemic of Alzheimer’s disease as the world’s population ages. Modest advances in therapeutic and preventive strategies that lead to even small delays in Alzheimer’s onset and progression can significantly reduce the global burden of the disease.

(Source: “FORECASTING THE GLOBAL BURDEN OF ALZHEIMER’S DISEASE” – Johns Hopkins University, Dept. of Biostatistics Working Papers, Year 2007, Paper 130)

Suddenly, by taking into consideration only the Alzheimer’s diagnosis’ worldwide as being an actual “prion disease”, the 1 in one million figure listed as supposedly confirmed worldwide cases of CJV becomes instead a true epidemic – the true black plague of humanity – of prion disease.

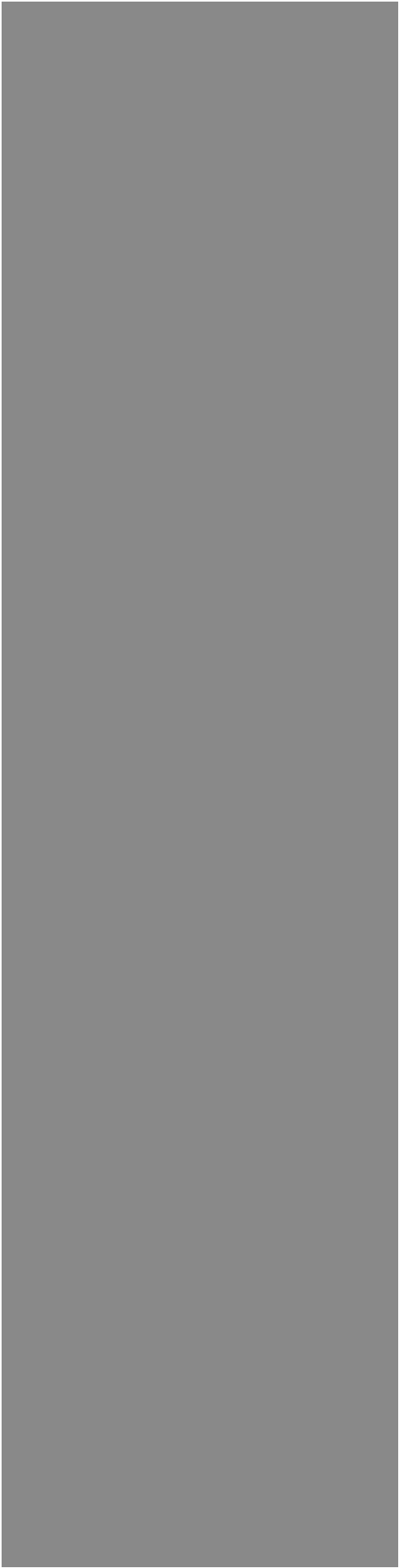
And Alzheimer’s is just one of the listed **dementia** diseases.

Dementia includes many disease descriptions, including the symptoms of this partial list:

- Huntington’s disease
- Frontotemporal lobar degeneration
- Alzheimer’s disease
- SCA17 (dominant inheritance)
- adrenoleukodystrophy (X-linked)
- Gaucher’s disease
- metachromatic leukodystrophy
- Niemann-Pick disease type C
- pantothenate kinase-associated neurodegeneration
- Tay-Sachs disease
- Wilson’s disease

- cryptococcal meningitis
- HIV
- Lyme disease
- progressive multifocal leukoencephalopathy
- subacute sclerosing panencephalitis
- syphilis
- Whipple’s disease
- dementia with Lewy bodies
- corticobasal degeneration
- progressive supranuclear palsy
- encephalopathy
- viral encephalitis
- limbic encephalitis
- Hashimoto’s encephalopathy
- cerebral vasculitis
- lymphoma
- glioma
- vascular dementia
- antiphospholipid syndrome
- CADASIL
- MELAS
- homocystinuria
- moyamoya
- Binswanger’s disease
- Behçet’s disease
- multiple sclerosis
- sarcoidosis
- Sjögren’s syndrome
- systemic lupus erythematosus
- Alexander disease
- Canavan disease
- Cerebrotendinous xanthomatosis
- Dentatorubral-pallidoluysian atrophy
- Fatal familial insomnia
- Fragile X-associated tremor/ataxia syndrome
- Glutaric aciduria type 1
- Krabbe’s disease
- Maple syrup urine disease
- Niemann Pick disease type C
- Neuronal ceroid lipofuscinosis
- Neuroacanthocytosis
- Organic acidemias
- Pelizaeus-Merzbacher disease
- Urea cycle disorder
- Sanfilippo syndrome type B
- Spinocerebellar ataxia type 2

Now what happens to all of these classifications/descriptions of disease states and their



symptoms when we place them all into the same category of disease – prion disease? What indeed...? What if one thing is responsible for all of the above descriptions of the same disease?

The Mayo Clinic published this report on October 23, 2012:

–Begin report–

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Creutzfeldt-Jakob Disease

By Mayo Clinic staff

Definition

Creutzfeldt-Jakob (KROITS-felt YAH-kobe) disease is a degenerative brain disorder that leads to dementia and, ultimately, death. **Symptoms of Creutzfeldt-Jakob disease (CJD) sometimes resemble those of other dementia-like brain disorders, such as Alzheimer’s, but Creutzfeldt-Jakob disease usually progresses much more rapidly.**

Creutzfeldt-Jakob disease captured public attention in the 1990s when some people in the United Kingdom developed a form of the disease — variant CJD (vCJD) — **after eating meat from diseased cattle**. However, “classic” Creutzfeldt-Jakob disease has not been linked to contaminated beef.

Although serious, CJD is rare, and vCJD is the least common form. Worldwide, there is an estimated one case of Creutzfeldt-Jakob disease diagnosed per million people each year, most commonly in older adults.

Symptoms

Creutzfeldt-Jakob disease is marked by **rapid mental deterioration, usually within a few months**. Initial signs and symptoms of CJD typically include:

- **Personality changes**
- **Anxiety**
- Depression
- **Memory loss**
- **Impaired thinking**
- Blurred vision
- **Insomnia**
- **Difficulty speaking**
- **Difficulty swallowing**
- **Sudden, jerky movements**

As the disease progresses, mental symptoms worsen. Most people eventually lapse into a coma. Heart failure, respiratory failure, pneumonia or other infections are generally the cause of death. **The disease usually runs its course in about seven months,**

although a few people may live up to one or two years after diagnosis.

In people with the rarer vCJD, **psychiatric symptoms may be more prominent in the beginning, with dementia — the loss of the ability to think, reason and remember** — developing later in the course of the illness. In addition, this variant affects people at a younger age than classic CJD does, and appears to have a slightly longer duration — 12 to 14 months.

****Author’s note: Does this list of “symptoms” sound like a zombie to you? Sudden, Jerky movements with lack of reason or ability to think; an anxious monster unrecognizable as your mother, father, sibling, or friend due to “personality changes”, who when questioned can only utter guttural sounds due to “difficulty speaking and swallowing”?*

Causes

Creutzfeldt-Jakob disease and its variants belong to a broad group of human and animal diseases known as **transmissible spongiform encephalopathies (TSEs)**. The name derives from the **spongy holes, visible under a microscope, that develop in affected brain tissue**.

The cause of Creutzfeldt-Jakob disease and other TSEs appears to be abnormal versions of a kind of protein called a prion. Normally, these proteins are harmless, but when they’re misshapen **they become infectious and can wreak havoc on normal biological processes**.

How CJD is transmitted

The risk of CJD is low. The disease can’t be transmitted through coughing or sneezing, touching, or sexual contact. The three ways it develops are:

- **Sporadically.** Most people with classic CJD develop the disease for no apparent reason. CJD that occurs without explanation is termed **spontaneous CJD or sporadic CJD** and accounts for the majority of cases.
- **By inheritance.** In the United States, about 5 to 10 percent of people with CJD have a family history of the disease or test positive for a genetic mutation associated with CJD. This type is referred to as **familial CJD**.
- **By contamination.** A small number of people have developed CJD **after being exposed to infected human tissue during a medical procedure, such as a cornea or skin transplant**. Also, because **standard sterilization methods do not destroy abnormal prions, a few people have developed CJD after undergoing brain surgery with contaminated instruments**. Cases of CJD related to medical procedures are referred to as **iatrogenic CJD**. **Variant CJD is linked primarily to eating beef infected with bovine spongiform encephalopathy (BSE), the medical term for mad cow disease.**

Risk factors

Most cases of Creutzfeldt-Jakob disease occur for unknown reasons, and no risk factors

can be identified. However, a few factors seem to be associated with different kinds of CJD.

- **Age.** Sporadic CJD tends to develop later in life, usually around the age of 60. Onset of familial CJD occurs only slightly earlier. On the other hand, vCJD has affected people at a much younger age, **usually in their late 20s.**
- **Genetics.** People with familial CJD have a **genetic mutation** that causes the disease. The disease is inherited in an **autosomal dominant fashion, which means you need to inherit only one copy of the mutated gene, from either parent, to develop the disease.** If you have the mutation, the chance of passing it on to your children is 50 percent. Genetic analysis in people with iatrogenic and variant CJD suggest that **inheriting identical copies of certain variants of the prion gene may predispose a person to developing CJD if exposed to contaminated tissue.**
- **Exposure to contaminated tissue.** People who’ve received human growth hormone derived from human pituitary glands or who’ve had dura mater grafts may be at risk of iatrogenic CJD. **The risk of contracting vCJD from eating contaminated beef is difficult to determine.** In general, if countries are effectively implementing public health measures, the risk is virtually nonexistent.

****Author’s note: For anyone that is familiar with FDA standards and the meat packing and dairy industries, as well as the use of beef bone meal and other beef products to feed cattle (cow cannibalism) along with the use of inject-able bovine growth hormone (cow to cow vaccination) as a standard of practice by factory farms, and of course we mustn’t ignore the abhorrent health conditions of these beasts while kept in piles of their own excrement and infectious dung, this last sentence is no reassurance with regards to “public health measures” and the risk being “virtually nonexistent” from the FDA, especially with food now imported from China and other developing countries.*

Complications

As with other causes of dementia, **Creutzfeldt-Jakob disease profoundly affects the brain as well as the body,** although CJD and its variants usually progress much more rapidly. **People with CJD usually withdraw from friends and family and eventually lose the ability to recognize or relate to them in any meaningful way. They also lose the ability to care for themselves,** and many eventually slip into a coma. **The disease ultimately is fatal.**

Physical complications, all of which may become life-threatening, include:

- Infection
- Heart failure
- Respiratory failure

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Tests and diagnosis

Only a brain biopsy or an examination of brain tissue after death (autopsy) can confirm the presence of Creutzfeldt-Jakob disease. But doctors often can make an accurate diagnosis based on your medical and personal history, a neurological exam, and certain diagnostic tests.

The exam is likely to reveal such characteristic symptoms as **muscle twitching and spasms, abnormal reflexes, and coordination problems.** People with CJD also may have **areas of blindness and changes in visual-spatial perception.**

In addition, doctors commonly use these tests to help detect CJD:

- **Electroencephalogram (EEG).** Using electrodes placed on your scalp, this test measures your brain’s electrical activity. **People with CJD and vCJD show a characteristically abnormal (brain) pattern.**
- **Magnetic resonance imaging (MRI).** This technique uses radio waves and a magnetic field to create cross-sectional images of your head and body. It’s especially useful in diagnosing brain disorders because of its high-resolution images of the brain’s white matter and gray matter.
- **Spinal fluid tests.** Cerebral spinal fluid surrounds and cushions your brain and spinal cord. In a test called a lumbar puncture — popularly known as a spinal tap — doctors use a needle to withdraw a small amount of this fluid for testing. **The presence of a particular protein in spinal fluid is often an indication of CJD or vCJD.**

Treatments and drugs

No effective treatment exists for Creutzfeldt-Jakob disease or any of its variants. A number of drugs have been tested — including steroids, antibiotics and antiviral agents — **and have not shown benefits.** For that reason, doctors focus on alleviating pain and other symptoms and on making people with these diseases as comfortable as possible.

Prevention

There is no known way to prevent sporadic CJD. If you have a family history of neurological disease, you may benefit from talking with a genetics counselor, who can help you sort through the risks associated with your particular situation.

Preventing iatrogenic CJD

Hospitals and other medical institutions follow explicit policies to prevent iatrogenic CJD. These measures have included:

- **Exclusive use of synthetic human growth hormone, rather than the kind derived from human pituitary glands**
- Destruction of surgical instruments used on the brain or nervous tissue of someone with known or suspected CJD

- Single-use kits for spinal taps (lumbar punctures)

To help ensure the safety of the blood supply, people with a risk of exposure to CJD or vCJD aren't eligible to donate blood. This includes people who:

- Have a biological relative who has been diagnosed with CJD
- Have received a dura mater brain graft
- **Have received human growth hormone**
- **Spent a total of at least three months in the United Kingdom from 1980 to 1996**
- **Spent five years or more in France from 1980 to the present**
- **Received a blood transfusion in the U.K. between 1980 and the present**
- **Have injected bovine insulin at any time since 1980**

****Author's note: The American Diabetes Association lists the total number of official diabetics in the United States, as of January 2011, at 25.8 million people, or 8.3% of the population, with approximately 7 million of those listed as "undiagnosed", and with 1.9 million new cases diagnosed in people aged 20 or older in 2010. It also lists an estimated 79 million more cases of "prediabetes", the precursor symptoms to diabetes. This represents a whole lot of inject-able insulin shots.*

Preventing vCJD

The risk of contracting vCJD in the United States remains extremely low. So far, only three cases have been reported in the U.S. According to the Centers for Disease Control and Prevention, strong evidence suggests that these cases were acquired abroad — two in the United Kingdom and one in Saudi Arabia.

In the United Kingdom, where the majority of vCJD cases have occurred, fewer than 200 cases have been reported. After its first appearance in 1995, CJD incidence peaked between 1999 and 2000, and has been declining since.

Regulating potential sources of vCJD

Most countries have taken steps to prevent BSE-infected tissue from entering the food supply, including tight **restrictions on importation of cattle** from countries where BSE is common; **restrictions on animal feed**; **strict procedures for dealing with sick animals**; surveillance and testing methods for tracking cattle health; and **restrictions on which parts of cattle can be processed for food.**

The risk of vCJD from the following sources is estimated to be extremely low:

- **Vaccines. Some parts of cows, including blood, enzymes and amino acids, are used to grow the bacteria and viruses needed to make certain vaccines.** Not all vaccines are grown in cattle parts, however, and the Food and Drug Administration (FDA) recommends that companies producing such vaccines use cattle parts only from low-risk countries. **These recommendations apply to cosmetics as well.** The FDA keeps a listing on its website of companies that use cattle from countries that aren't classified as low-risk.

- **Insulin.** Insulin sold in the United States isn't derived from cattle, but you're allowed to import beef insulin from other countries if you follow specific guidelines. Because there's no way to guarantee the safety of imported insulin, talk to your doctor about the best way to obtain insulin from sources outside the United States.

–End Mayo Clinic report–

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“Woman with Mad Cow Disease donated her eyes”

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The Associated Press reported in December of 1997 that:

LONDON – Scottish health authorities are investigating how tissue from the eyes of a woman who had suffered from the human form of ‘mad cow disease’ was transplanted into three other people.

“We are aware there is a potential infection risk from tissue retrieved from a patient in Scotland,” a spokesman for the government Scottish Office said Saturday on customary condition of anonymity. “We do not know the full facts, but we are making urgent inquiries into how this could have occurred,” he said.

The 53-year-old woman suffered from lung cancer, but **after she died a post-mortem examination showed she also had Creutzfeldt Jakob Disease. The brain-destroying disease is the human form of bovine spongiform encephalopathy, which afflicts cattle and is known as ‘mad cow disease’.**”

No further details were given on the grounds of patient confidentiality. But the tabloid Sunday Mail said the **post-mortem findings were not passed on to officials handling organ donor arrangements, and parts of her eyes, including the corneas, were transplanted into two men and a woman in her eighties.**

Remember what the FDA stated from above?

“Currently ten patients die each day in the United States while on the waiting list to receive lifesaving vital organ transplants...”

Is it at all reasonable to assume that the FDA, Red Cross, AMA, ADA, or any other “association” out there can screen body parts for prions, including these CJD and other variants of **“Transmissible spongiform encephalopathies (TSEs)”**, also known as **prion diseases**, considering that they are undetectable without the victim being dead first?

The Red Cross blood donation guidelines website states:

Creutzfeldt-Jakob Disease (CJD)

If you ever received a corneal (eye) transplant, a dura mater (brain covering) transplant or human pituitary growth hormone, you are not eligible to donate. Those who have a close blood relative who had Creutzfeld-Jacob disease or who is in a family

that has been told they have a genetic risk for Creutzfeld-Jacob disease are also not eligible to donate. [Learn more about CJD.](#)

Creutzfeldt-Jakob Disease, Variant (vCJD); “Mad Cow Disease”

See under Travel Outside of U.S. [Learn more about vCJD and blood donation.](#)

Interestingly, the supplied links to learn more information about CJD and vCJD do not link to anything, and a search on this Red Cross website for CJD turns up no search results.

(**Source:** <http://chapters.redcross.org/ky/rivervalley/eligibility.htm>)

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Prions And Cancer
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Prion related disease is not limited to brain functions, and is a virtually unknown field of research when it comes to the rest of the human body.

Science Daily reported in August of 2009:

Prion Protein Identified As Novel Early Pancreatic Cancer Biomarker

ScienceDaily (Aug. 18, 2009) — Mad cow disease is caused by the accumulation of an abnormal protein, the prion, in the brain of an affected patient. Outside of the brain, very little is known about prions. Case Western Reserve University School of Medicine, researchers have, for the first time, identified the prion as a biomarker for pancreatic cancer. Pancreatic cancer is one of the most deadly cancers in humans; the five year survival rate is less than 10 percent.

Chaoyang Li, Ph.D., Wei Xin, M.D., and professor of pathology, Man-Sun Sy, Ph.D., discovered the mechanism by which prions causes tumors to grow more aggressively. They published these findings in the September issue of the *Journal of Clinical Investigation*.

Unlike normal cells, in human pancreatic cancer cells the prion is incompletely processed and binds to a molecule inside the cell known as filamin A. Filamin A is an important regulator of the cell’s skeleton and its signaling machineries. The binding of the incompletely processed prion to filamin A disrupts the cell’s organization and signaling. As a result, the tumor cells grow more aggressively. On the other hand, when the prion level is reduced, the tumor cell loses its ability to grow in tissue culture and in animals. Most importantly, Dr. Li, et al. found that a subpopulation of patients had incompletely processed prion protein in their pancreatic cancer. This subgroup of patients had significantly shorter survival compared to patients whose tumors do not have prion.

According to Dr. Sy, “Currently there is no early diagnostic marker for pancreatic cancer. Detection of the incompletely processed prion may provide such a marker. Preventing the binding of prion to filamin A may open new avenues for therapeutic intervention of this deadly disease.”

Next, Drs. Li and Sy will look to determine if this type of prion protein expression is seen in other types of cancer.

There are other examples of truth seeping its way into the public’s eye...

Prions and cancer: A story unfolding

Prions, the causal agents of Mad Cow and other diseases, are very unique infectious particles. They are proteins in which the complex molecular three-dimensional folding process just went astray. For reasons not yet understood, the misfolding nature of prions is associated to their ability to sequester their normal counterparts and induce them to also adopt a misfolding conformation. **The ever-growing crowd of misfolded proteins form the aggregates seen in diseases such as Parkinson’s and Alzheimer’s.** Once misfolded, a protein can no longer exert its normal functions in the cell.

Now, a group led by Dr Jerson Lima Silva at the Federal University of Rio de Janeiro, Brazil, presents some new evidence that **p53, a protein with the daunting task of suppressing tumor formation in the body, may show a typical prion-like behavior when mutated.**

It has been known for some time that the buildup of p53 in the cell impairs the protein in preventing tumor growth. This has been observed in neuroblastoma, retinoblastoma, breast, and colon cancers. In a paper entitled “Mutant p53 aggregates into prion-like amyloid oligomers and fibrils: Implications for cancer” and published in the *Journal of Biological Chemistry*, the group shows that in breast cancer cell lines carrying the most common p53 mutation, the formation of amyloid-like aggregates of p53 proteins may explain the protein’s lack of function.

Whether this prionoid behavior in fact represents a relevant cancer-related mechanism remains to be shown. Development of novel and ingenious strategies to prevent p53 misfolding and aggregation may be just one way to find out.

“We are planning pre-clinical tests with synthesized nucleic acids in an attempt to prevent the changing in conformation of normal p53, and avoid aggregates of misfolded protein,” says Dr. Silva.

If successful, the strategy may help unveil unforeseen molecular mechanisms leading to tumor development. **Considering that more than half of the cancers lose p53 function,** this prionoid behavior may serve as a potential novel target for cancer therapy, dramatically transforming our way of thinking of cancer and treating cancer patients.

(**Source:** “Prions and cancer: A story unfolding”)

The good news about prions

By Nancy Shute
Posted 1/11/04

Last month’s discovery of mad cow disease in the U.S. food supply has elevated prions from an obscure biological curiosity to topic A on the talk shows. But just as these villainous, twisted proteins are becoming notorious, researchers are saying: Hold up; they might not be so bad after all. Indeed, prions and their cousin proteins may prove to be benign—even helpful—in normal mental functions like memory.

The same biological tenacity that can devastate the brain, it turns out, may also guard the memory of that first day in kindergarten or that first kiss. And although mad cow and its human version are rare, **an understanding of why prions go bad could lead to treatments for diseases as common as cancer and diabetes.**

No one really knows why prions exist. And no one knows how memories persist through time. So Nobel laureate Eric Kandel and Susan Lindquist, a prion expert at the Whitehead Institute in Cambridge, Mass., combined a protein involved in learning and memory with yeast prions. The experiment, published last month in *Cell*, revealed that **the memory protein worked while in a stable, prionlike form, suggesting that it could be the mechanism needed for storing memories in brain synapses for decades on end.** “We’ve shown for the first time that a prion in its self-perpetuating mode could have a normal physiological function,” Kandel says. His lab is now testing this startling hypothesis in flies and mice. If it proves true, it could illuminate a key mystery of the brain.

Origami. Prions may also hold clues to combating common diseases, because they are simply normal proteins that are misfolded. Misfolded proteins, it turns out, cause a host of major ailments, from cancer and diabetes to Alzheimer’s and Parkinson’s. Proteins are the workhorses of living things; the human body makes at least 50,000 different ones for tasks from building bones and muscle to digesting food and thinking.

As proteins form within cells, their long chains of amino acids fold up like fiendishly intricate origami. Since the 1930s, scientists have known that a protein’s folded shape is key to its function, making it possible for hemoglobin to carry oxygen or for collagen to bind together skin. But figuring out how and why proteins fold the way they do has become one of the great, enduring challenges in biochemistry.

It’s easy for proteins to get corrupted while folding in the crowded confines of a cell, and misfolded proteins can cause all sorts of trouble. **One example is the P53 protein, the body’s frontline warrior against cancer. Misfolded P53s lose their tumor-suppressing power, an error that causes about half of all cancers. Cystic fibrosis, too, is caused by misfolded proteins, as is diabetes.** Prions are more malevolent, forcing nearby proteins to misfold, too, unleashing a destructive chain reaction. Although Alzheimer’s and Parkinson’s are not known to be caused by prions, **the disease process, in which brain proteins glom together into plaques, looks remarkably like that of mad cow and other prion diseases.** “We’re starting to think there may be similarities between many diseases of misfolding,” says Jonathan Weissman, a prion researcher at the University of California-San Francisco, “including infectious prion diseases like mad cow and noninfectious diseases like Alzheimer’s.”

Cellular prion protein promotes invasion and metastasis of gastric cancer

Abstract

Cellular prion protein (PrPc) is a glycosylphosphatidylinositol (GPI) -anchored membrane protein that is highly conserved in mammalian species. PrPc has the characteristics of adhesive molecules and is thought to play a role in cell adhesion and membrane signaling. **Here we investigated the possible role of PrPc in the process of invasiveness and metastasis in gastric cancers. PrPc was found to be highly expressed in metastatic gastric cancers compared to nonmetastatic ones by immunohistochemical staining. PrPc significantly promoted the adhesive, invasive, and in vivo metastatic abilities of gastric cancer cell lines SGC7901 and MKN45. PrPc also increased promoter activity and the expression of MMP11 by activating phosphorylated Erk1/2 in gastric cancer cells.** MEK inhibitor PD98059 and MMP11 antibody (Ab) significantly inhibited *in vitro* invasive and *in vivo* metastatic abilities induced by PrPc. **N-terminal fragment (amino acid 24–90) was suggested to be an indispensable region for signal transduction and invasion-promoting function of PrPc.** Taken together, the present work revealed a novel function of PrPc that the existence of N-terminal region of PrPc could promote the invasive and metastatic abilities of gastric cancer cells at least partially through activation of MEK/ERK pathway and consequent transactivation of MMP11.—Pan, Y., Zhao, L., Liang, J., Liu, J., Shi, Y., Liu, N., Zhang, G., Jin, H., Gao, J., Xie, H., Wang, J., Liu, Z., Fan, D. Cellular prion protein promotes invasion and metastasis of gastric cancer.

- 1. State Key Laboratory of Cancer Biology and Institute of Digestive Diseases, Xijing Hospital, the **Fourth Military Medical University**, Xi'an, Shaanxi Province, P. R. China

Correspondence: State Key Laboratory of Cancer Biology and Institute of Digestive Diseases, Xijing Hospital, the **Fourth Military Medical University**, 17 Changle Western Rd., Xi'an, Shaanxi Province, 710032, P. R. China. E-mail: fandaim@fmmu.edu.cn

—~—
**A Conclusion,
Rife With Controversy**
—~—

So what about the zombie apocalypse, you ask?

Well my friends, you are currently living through it!

Chances are you were born with the gift of transferred dormant prions from your parents – the gift that keeps on giving.

And the chance that you were, at some time in your life, vaccinated with prion cells is more than likely.

And even if you’ve been a vegetarian your whole life, you have certainly ingested or inhaled

animal proteins, such as by taking vitamins in “gelatin” capsules.

You are the walking dead.... you just don’t know it yet; cursed with dormant, brain-eating, mutant prions that will eventually be stimulated and awakened by some “environmental” cause only to subsume and convert other innocent prions into folded crystal zombies – better to devour your brain, my pretty. In short, your brain and body is a prion zombie apocalypse just waiting to happen.

I have no doubt that one of the many prion diseases will take your life; but not before your friends and family watch as you zombify before them, your children visiting you in the west wing of George Bush Memorial Hospital wondering where the old mom or dad went to, and who is this zombie laying there with “Alzheimer’s Disease”? After all, nurses have descriptively nicknamed Alzheimer’s and other dementia patients as “hitters”, “kickers”, “wanderers”, and of course, we can’t forget “**biters**”.

But let’s steer clear of these horrible zombie-like thoughts, and let’s try not to think about the government’s weapons labs around the country experimenting on different prions, causing them to predictably and unpredictably mutate, and of course, just for fun, seeing if they can be transferred through a bite without dormancy, and attaching them to such things as nano-technologies.

No reason to revolt against the establishment... Nothing to see here...

— — —

It is my belief that the suppressed work and technology of Royal Raymond Rife and of those before and after him even today are the key to ending this prion induced zombification of the people of Earth, and to ending the profitable suffering of generations to come.

While radiation, heat, time, and chemicals will not destroy the infections nature of mutated prions, I believe that this most suppressed of technologies is the one thing not available or known about to those doing the testing.

Here’s the thing...

“The newspaper article provided here was included in a newspaper called *The Planet* and published February 1986 in Washington, D.C. **It was delivered to every member of the U.S. House of Representatives and every member of the United States Senate. Not one representative, senator or staff assistant was motivated sufficiently to investigate further.**

The newspaper was also provided free to the George Washington University Medical School students and professors. Again, not one was motivated to investigate further. All while 7,000 to 10,000 Americans died weekly from cancer!

Good examples of public irresponsibility from people in positions of public trust or professions with public trust implied! Shame!

–Barry Lynes, September 25, 1999

The Cancer Cure That Worked: The Rife Report was published in April 1987,

14 months after the U.S. Congress turned its back on Rife and ignored an incredible opportunity to “jump start” the Rife revival.”

Barry Lynes wrote in 1999 what I am writing here, now in the end of 2012... a pleading for the people of the United States and the world to stand up and demand action, to demand research, and to demand an end to the zombie black death machine that is *prion disease* in its many hundreds of forms, all separately diagnosed and treated with purposeful ignorance and massive profits.

Barry Lynes article as posted in “The Planet” briefly explained the life and work of Royal Rife:

A mobilization is required, for not only *cancer*, but *AIDS* and many other diseases threatening us are potentially capable of being eradicated if we, the people of the United States, get off our collective asses.

In the 1920s a scientist-inventor named Royal Raymond Rife invented a new kind of microscope. In an article in *New Age Journal* March produced little from *New* readers), the story of Rife’s cancer cure was detailed. Since then, Rife has been nominated for the “Alternative Nobel Prize” which is annually awarded in Europe as a protest to the more established, less risk taking Swedish honor. Yet, little notice of Rife and his miraculous discovery has infiltrated the establishment consciousness.

Rife’s microscope was a stunning advance. Unlike the electron microscope, Rife’s microscope made it possible to study “living” bacteria, viruses, and so forth. An electron microscope kills its specimens. Rife’s remarkable breakthrough used a new approach to bend light. As a result, Rife was able to prove that bacteria could change their form. In effect, they could become cancer causing viruses.

Rife then implanted his cancer-causing bacteria into rats. Tumors subsequently developed. From here, Rife made the startling discovery that the bacteria could change into a completely different form if the “medium on which they were living” was slightly altered. In other words, Rife’s cancer causing substance was, in some forms and in association with some environments within the body, deadly. But in other forms and in other environments, benign. **His cancer causing substance could be changed back and forth from one to the other. The implications of this discovery are obvious. Cancer cells might be transformed to healthy cells again!**

Rife then began beaming different frequencies of light on these microorganisms. Up until the early *1950s*, Rife perfected this method. As Christopher Bird reported in the *New Age* article, **“tuberculosis, typhoid, leprosy. . . appeared to disintegrate or ‘bIow up’ in the field of his microscope.” This “death ray” was applied to cancers in rats. It worked!**

The next step was humans. The result? Here is Rife’s report: “The first clinical work on cancer was completed under the supervision of Milbank Johnson, M.D., which was setup under a special medical research committee of the University of Southern California. **Sixteen cases were treated at the clinic for many types of malignancy. After three months, fourteen of these so-called hopeless cases**

were signed off as clinically cured by a staff of medical doctors and Alvin G. Foord, M. D., pathologist for the group.

Throughout the 1930's, Rife and associates continued their work. In 1940, Arthur W. Yale, M.D. reported that Rife's discoveries were an entirely new theory of the origin and cause of cancer, and the treatment and results have been so unique and unbelievable" that **we' may be able to "eliminate the second largest cause of deaths in the United States."**

But it was not to be!

There were powerful doctors whose careers were based on the theory that bacteria could not change its form. Rife's discovery threatened their status and their own research. (It was like the invention of the automobile for a horse-drawn carriage driver.)

One of these "authorities" was Dr. Thomas Rivers of the **Rockefeller Institute**. Another was **Harvard** microbiologist Dr. Hans Zinsser. The cancer cure was killed by the powerful.

One of Rife's supporters, Dr. Edward C. Rosenow, a pioneer bacteriologist, sadly commented at the end of his life, "**They simply won't listen.**"

Others have followed Rife and have confirmed different aspects of his theory, but **since they are few in number and are promoting a cause contrary to the medical establishment's approved philosophy, they are not supported. Even publishing their findings is difficult if not impossible because of the dominant medical orthodoxy which has reigned since the 1930s!**

Christopher Bird's 1976' *New Age Journal* article contained a summation of the *political* coverup as perceived by the Lee Foundation of Nutritional Research in Milwaukee. According to Bird, the Lee Foundation "maintains that **Rife, his microscope and his life work were tabooed by leaders in the U.S. medical profession and that any medical doctor who made use of his practical discoveries was stripped of his privileges as a member of the local medical society.**"

The Food and Drug Administration (FDA) still bans treatments similar to those of Rife."

==

Now, we must realize that Royal Raymond Rife's frequency research and suppressed technologies took place before the discovery of prions as mutated proteins in the 1960's. It is my belief that Rife's research would have eventually located and destroyed the mutated form of prions which cause disease today.

Like Royal Raymond Rife, someone like myself – who is shunned by the mainstream medical (for-profit) profession – can only rely on you the reader of this information to spread, disseminate, and demand that this information be made public and that this prion

disease plague that is now killing our elderly, our young adults, and our youngest of children be stopped and prevented.

Currently, the pharmaceutical drug industry is not interested in developing curative or preventative medicines, as that would be anti-corporation in that it would lower profits and take away from shareholder dividends and returns on investments.

Case in point:

The New York Times reported this article in 2008. Note that this was posted not in the health and wellness section... but in the “business” section:

Pfizer to focus on more profitable diseases

Published: Tuesday, September 30, 2008

NEW YORK — Pfizer, the world’s largest drug maker, is ending early-stage development of treatments for a range of illnesses from obesity to heart disease to focus on more profitable diseases.

Pfizer expects to spend \$7.2 billion to \$7.5 billion on research and development this year, a huge budget for the industry. “Even though it is very large, it is finite,” a Pfizer spokeswoman, Liz Power, said Tuesday.

The changes will not affect drugs in the last of three stages of testing needed for U.S. approval, including the anti-clotting drug apixaban being developed with Bristol-Myers Squibb, Pfizer said in a Sept. 25 memo to employees and confirmed Tuesday. Development will end on at least 11 drugs, including 6 studied for obesity and heart disease and three for digestive disorders.

In a recent interview, Jeffrey Kindler, chief executive of Pfizer, said **the company would focus its research budget on medicines for cancer, pain, Alzheimer’s disease and diabetes**. Pfizer’s cholesterol pill, Lipitor, the world’s best-selling drug, with \$12.7 billion in 2007 revenue, **is set to lose patent protection in 2011. Products for cancer and pain are typically more profitable because the makers can charge a higher price, and there is less competition.**

Pfizer has identified six high-priority areas for research: **cancer, pain, inflammation, diabetes, Alzheimer’s disease and schizophrenia.**

“These large markets, with rapidly advancing science, are the areas where Pfizer can take a leading position,” the memo said.

Kindler said Pfizer would look to make more acquisitions to fill its pipeline of experimental medicines. Analysts say the company may consider buying ImClone Systems, which makes the cancer drug Erbitux. ImClone has said it received a \$70 a share bid by a large drug maker it would not identify. Ray Kerins, a spokesman for Pfizer, said it would not comment on market rumors or speculation.

The memo said Pfizer would also **stop early-stage research in anemia, bone**

health, liver disease, muscle, obesity and some osteoarthritis compounds.

Pfizer had 102 drugs in development, including 47 in the first stage of testing and 37 in the second phase, according to the company's most recent pipeline list, which was updated on Feb. 28. **About 20 percent of Pfizer's research financing now goes toward cancer.**

The restructuring will not result in facility closings, and many employees will be shifted to other areas of research, the company said.

Pfizer began reorganizing its research operations in 2007 **after halting development on its most promising experimental drug, the cholesterol pill torcetrapib, which was projected to have more than \$13 billion in annual sales.**

(Source:

http://www.nytimes.com/2008/09/30/business/worldbusiness/30iht-pfizer.4.16590893.html?_r=0)

\$100 bucks says “Viagra” isn’t on the list of research or patented products to be cut...

Now, besides the blatantly inhuman undertones of this report, stating or at the very least alluding to the fact that profits are of paramount precedent over cures and “promising” drugs, did you notice that the most profitable areas of research and drug development are for the very ailments caused by prion related diseases? Cancer, Alzheimer’s, diabetes, and dementia-related diseases such as schizophrenia... Pfizer is not creating preventatives or cures here, but is instead creating symptom relief drugs in order to profit from the ongoing disease. Healing the symptoms is not healing the disease, but is instead profiting from the disease by temporarily treating and relieving only the symptoms caused by the profitable disease.

And this is how our medical and pharmaceutical industry operates as business as usual – symptom relief in lieu of disease prevention and cure.

This unavoidable fact should be quite clear to anyone reading this, straight from the Pfizer horses mouth.

And with this fact in mind, isn’t it time to break the stranglehold and monopoly that this government protected trust of drug and medical associations and corporations has upon the treatment of disease?

The problem is, as Mr. Jeffrey Kindler, chief executive of Pfizer confirmed above, is that in order for this to happen, the American people must “get off of their collective asses” and overthrow this profit-driven medical monopoly that all but promotes prion disease related illnesses for the simple reason and greed of shareholder returns.

It would mean that the people (currently and collectively on their posteriors) would actually have to support someone like me or the many proponents of Rife, Tesla, and so many others who have perfected this technology, which is illegal to utilize publicly as “practicing medicine without a license”, according to the FDA.

But someone like me or someone like Rife will not be embraced by the medical, scientific, or educational “establishment”, and so my research and their discoveries will never reach the people... unless the people say no to the establishment or demand with threat of violence that prion diseases are immediately treated as such.

Will this happen? Will a revolution in the governance of medicine and science take place within my lifetime? As I contemplate my current financial situation, the lack of support, the seemingly hopeless uphill battle to simply inform people without help from a for-profit media... I suppose I can only think about that now famous ad campaign which states that, “A mind is a terrible thing to waste.”

Please, don’t let my efforts here and those of the few suppressed people out there who can actually heal and prevent these profitable diseases (and who would gladly do so without a profit margin) go to waste. Share this information with all you know; with your parents who are reaching the 50 year incubation mark of prion dormancy, with your children who are falling pray to early-onset Alzheimer’s and other prion caused diseases and 1 in 3 with prion related cancers, and with doctors, nurses, and scientists who believe they know what disease is, but really only know what the pharmaceutical and corporate sponsored and written textbooks tell them they know.

The suffering and death on this planet can be halted, prevented, and so much pain can be avoided. But only if the people finally revolt and stop supporting the “establishment”.

To those who blindly invest in the stock of these corporations, I can only ask why? Profit at your own expense? Support of your own enslavement to the medical and pharmaceutical industries?

Are the people so clueless that they would invest in something irregardless of that investments consequences simply because there are dollar signs and investment returns on the other side? This is certainly what government and its pension and other investment fund schemes do. Profit and expansion of profit-making disease is what keeps these companies profitable.

Why do we consent to the federal government “granting” 100’s of billions of dollars to these corporations for “research and development”, placing the bill for that grant on the taxpayers, when we know that those pharmaceutical companies are not out to cure disease, and in fact cause more profitable diseases and symptoms that they help, insuring more profit and more diseases?

And to those who have made fortunes off of this medical and pharma industrial toxic waste production, how can you live knowing that your fortunes were made off causing disease in other people and suppressing the cure for that disease?

How can you live with your fortune when it relies on the suffering of others, and likely yourself in the future?

—~—

If this writing and research has opened up your eyes or has given you a fragment of hope in an otherwise dark and hopeless world, **and you would like to see this information**

turned into a documentary film, please consider making a donation to myself at the following link:

[DONATE HERE](#)

Without the support of the people, I am dead in the water – just like so many who would change and heal the world if only they were given the chance without such organized supression.

If you would like to start an organization or non-governmental research trial for the use of frequency in the treatment of and curing of infectious prions, please contact me and let’s do it! It is doubtful that I will ever receive a research grant in a for-profit world. Perhaps you know somebody who can? Whatever the case, this should be priority number 1!!!

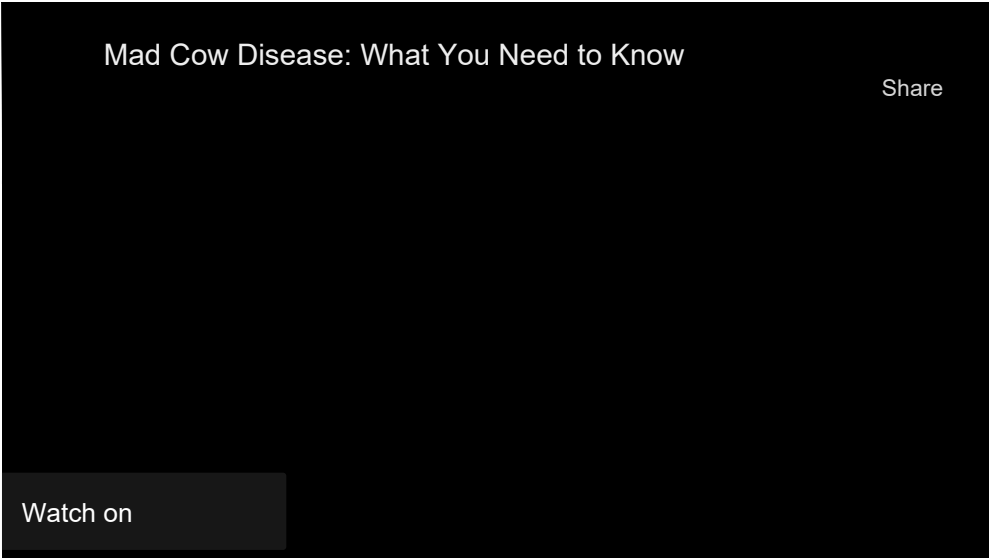
You can Email me here: Introspector48@yahoo.com

Yours and your family’s future health is now in your hands...

Thank you for your time and for sharing this work.

.

Introducing, The Mad Cowboy, Howard Lyman:



–Clint Richardson (Realityblogger.wordpress.com)
–Thursday, November 15, 2011

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marika / November 15, 2012

“NOW WHAT!” I exclaimed when I found a new post in my mail box. “Does Clint have nothing else to do but bring us all the depressive news!?”

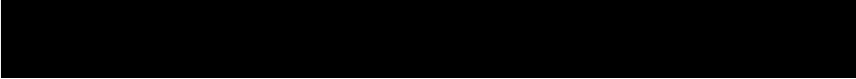
Just kidding Clint. I can’t fathom the amount of information you can pull together and not only that you are capable of hammering it all with tangible evidence. That is greatly appreciated, no matter what the news brings.

Knowledge is power. As the Bible says “My people will parish for the lack of knowledge”. How true, how true.

OK. Back to your article.

I have yet to read it uninterrupted but skimming it very briefly word PRION stood out for me. Few years ago I read a book “Healing Codes for the Biological Apocalypse”, by Dr. Leonard Horowitz. That’s how I was “introduced” to PRIONS. Bible says that Jewish were/are forbidden to eat ‘unclean’ meat (pigs, shellfish, certain birds – basically scavengers). Research found (according the book) that scavengers have two enzymes called cadaverine and putrescine. Their job is to help decompose the organic matter. Which would make sense for humans NOT to consume it. It is well known that pigs are scavengers and sometimes they will eat their own weak and young.

Here is Dr. Horowits’ presentation.



Watch on

☐ Like



Pablo Damon / November 15, 2012

please write back paul

On Thu, Nov 15, 2012 at 4:21 PM, REALITY BLOG

☐ Like



realityblogger / November 16, 2012

Sent ya an email...

☐ Like



usedtobesupermom / November 16, 2012

What you write is many times hard to swallow- I mean you shatter the bubble most people live in. Many times the truth HURTS but it will also set you free. You are doing a great job- I share your writings everywhere & I do it often.

☐ Like



realityblogger / November 16, 2012

Thank you... I need to hear that sometimes.

☐ Like



usedtobesupermom / November 16, 2012

you're welcome

☐ Like

usedtobesupermom / November 16, 2012



*bubbles

☐ Like



Lisa / November 16, 2012

Excellent EXCELLENT research and writing Clint. I read very little of what comes to my inbox these days, but I ALWAYS read yours, and I ALWAYS share.

Further pondering: what effect do electrically generated pollutants also have on prion activity? – the whole scope, including EMF’s/scalar technologies. How long have these technologies been in use in conjunction with factory farms feeding the masses?- and, by combining GMO’s, pesticide/herbicide saturation of soil, vaccinations and their nefarious contents as listed in your article, homogenization of once perhaps edible fats into synthesized/oxidized toxins, what effects are we witnessing?- DISEASES, which are generational and by no means escapable (considering chemtrails have been active for about 20 years).

Personally, I’m doing my best to maintain myself- but these effects have had me since childhood, and now at 49, I look at least 59 and feel more like 69. I hope you do indeed find donors- your work should be brought before every single person now living. For many of us, it’s only God’s Grace that keeps us alive, though often, we pray for it to be otherwise. Outside of the manufactured financial global crisis, some of us can’t function well enough anymore to be gainfully employed by others or our own industriousness. I’m beaten and know way too many others in this same condition. I can share this article with my contacts and re-post it on my blog. That’s all I can do at this point- and thank you for taking the time and interest to uncover the secret goings-on of the evil creatures which call themselves “leaders”. You’re the best Clint.

☐ Like



realityblogger / November 16, 2012

Your questions can only be answered if “the people get off of their collective asses” and demand for this to be a national- no international research project and support it financially themselves outside of the medical industries and government.

That would be the greatest revolution in history – non-cooperative scientific research outside of the legal constraints of government and pharma.

Thanks for the kind words!

-Clint-

 Like



usedtobesupermom / November 16, 2012

Great comment Lisa! (I also know what you mean about looking & feeling older than you are too & what comes with it-not being able anymore).

> _____ > From: REALITY BLOG
>To: usedtobesupermom@verizon.net >Sent: Friday, November 16, 2012 11:08 AM >Subject: [New comment] Xenotransplantation – Creating The Zombie Apocalypse > > > WordPress.com >Lisa commented: “Excellent EXCELLENT research and writing Clint. I read very little of what comes to my inbox these days, but I ALWAYS read yours, and I ALWAYS share. Further pondering: what effect do electrically generated pollutants also have on prion activity? – th” >

 Like



Let's Get Honest / November 16, 2012

I have so much to say on this one (which would result in an obnoxiously long comment, or just a set of links with a general alert (validating and agreeing with what’s up here in general); I’ll move it elsewhere and see if I can post a link to it.

This may not happen overnight, so I do just want to warn readers that — by chance, while looking at something else — I went to a nationwide listing of nonprofits, “<http://nccsdataweb.urban.org>” and in their “by-county” option, I wanted to know what were the largest nonprofits in the District of Columbia. this was actually just a teaching point for something else (usually how I run across the good stuff).

TWO of them had the same purpose, which is to vaccinate 250,000,000 of the children in underdeveloped nations by the year 2015. There is royalty and (Bill and Melinda Gates) and others (as I recall) on the board of directors, there is a specific fund-raising instrument related to it of interest to people who read realityblog, and I hope people go there — today — and look at the board of directors, and the purpose of this group.

I still believe the most critical issue around is working on an alternate to turning the planet away from one big store, and things that lead to genocide and slavery in the name of peace and health. So, probably that should start with the CAFRs, and can this TRF plan of Mr. Burien actually find enough sane customers to produce enough working models to inspire others.

Those who are not alternately angry and/or afraid AND able to channel it into strategic action, I don’t know. I do know that time is of the essence.

You brought up Richard Rhodes’ writing. He writes in his book “How to Write” that he was horribly abused (including starved) as a child. This is more of a reality than people acknowledge, and perhaps this is how, or why (?) he can — or at least does- handle some of the nasty, grisly, and true issues on the planet today.

The hardest thing to handle is just how much of a junk, fictional, and dangerously self-destructive platform most of our favorite and long-term social institutions have been built on.

Please look up: the GAVI Alliance, Isis Innovations (an Oxford University technology incubator, unbelievable), and if I get a better response up, I’ll link to it here. For eclectic readers on things ruling our world, fiction symbolizes, but nonfiction is stranger (and more frightening).

Freedom requires extreme diligence and vigilance, and right now, it ain’t looking too good. The other thing is, to find a real hope, not a false one, to keep going when it gets tough.

Thanks again, Clint.

 Like



usedtobesupermom / November 16, 2012

Another great comment.

> _____ > From: REALITY BLOG
>To: usedtobesupermom@verizon.net >Sent: Friday, November 16, 2012 11:25 AM >Subject: [New comment] Xenotransplantation – Creating The Zombie Apocalypse > > > WordPress.com >Let’s Get Honest commented: “I have so much to say on this one (which would result in an obnoxiously long comment, or just a set of links with a general alert (validating and agreeing with what’s up here in general); I’ll move it elsewhere and see if I can post a link to it. Thi” >

 Like



jmackdog / November 16, 2012

Excellent article and subsequent guest on deana’s show. Although I have to digest this extraordinary work, I believe the work of Hulda Clark should also be mentioned. Like Rife, Hulda Clark was a target and ridiculed for her “Zapper” by the establishment. You can possibly incorporate her protocols into eradicating the abnormal Prion.

Does the Prion have any relationship to parasites ?

<http://www.drclark.net/>

thank you as always !
jim

 Like



Clint Richardson / November 16, 2012

Thanks Jim, I am familiar with Clarks machine, and a friend has one.

However, there are others far more advanced as well, utilizing Tesla, his teacher (forgot the name), and of course Rife technology.

This idea of frequency is my own hunch.

I just need someone to help me prove it – realizing that it would kill the profit-making medical, pharma, and other corporations by ending the suffering that makes them so wealthy. It would be bad for “unemployment” and the “economy” and therefore nobody wants a proverbial cure for most diseases that make money.

What a mind-bending state our economy is in – based on usury and human suffering... and the people suffering because of it will be the first to defend it!!!

Take care,

-Clint-

 Like



jmackdog / November 16, 2012

It certainly boggles the mind that a group of elite scum can unequivocally shutdown any and all research into anything with a healing value in lieu of usury and human suffering as you suggested.

The works of Rife are actually illegal I believe and most of Tesla’s work is hidden in patents not privy to the common man or woman.

My thoughts on frequency is in concert with yours, although like you eluded to, you would first need someone with a good grasp on Rife/Tesla works. From my very minimal research into Royal Rife, didn’t he prove that when locating the Cancer he was able to use light energy to literally explode the tumor ?

These two men hold the key to unlocking so much human suffering, it is no wonder both were suppressed long ago as crazy.

Crazy like a fox I say !

jim

 Like



Clint Richardson / November 16, 2012

I know the people who can and already have this technology. Rife beamed light frequencies and was able to “destroy” lifeforms from amoebas to viruses, as each has a health and death vibrational frequency that is unique.

With funding, I could have a study going in no time with the people who have to hide their knowledge of this.

Without this financial support, I can do nothing.

☐ Like



jmackdog / November 16, 2012

I wouldn't know the first step to wake up our brain dead country into backing such a noble possibility, most folks would shutter with ignorance and quickly revert back to the gadgets which rule their lives, but maybe you can put together some sort of money drive. What would be the minimum for research to proceed ?

I will donate and as usual your blog is forwarded to all my contacts.

thanks,
jim

☐ Like



Clint Richardson / November 16, 2012

Good question... would also need samples from cadavers, etc. So it would be expensive. I keep waiting for that one wealthy person who still has a soul to come forward...

☐ Like



Petar / November 17, 2012

Hi Clint

I happened to run across this: Safecast Geiger Counter Reference Design

The whole project started @
[http://www.kickstarter.com/projects/seanbonner/safeca](http://www.kickstarter.com/projects/seanbonner/safecax-kickstarter-geiger-counter)
[x-kickstarter-geiger-counter](http://www.kickstarter.com/projects/seanbonner/safecax-kickstarter-geiger-counter)

THIS IS HOW YOU CAN GET MONEYS FOR YOUR PROJECT.

and here is the free open source design;
<http://www.bunniestudios.com/blog/?p=2218>

Not bad, and this is what the inventor, is stating “I am a proponent of open source hardware; so here’s the source files for my design! All of the following source files are licensed under CC3.0-BY-SA with my XL1.0 automatic patent cross-license rider (CC doesn’t address patents, so I invented my own rider that piggybacks on CC to ensure that any patents that may arise from this or its derivatives are automatically cross-licensed to the community).”

And speaking of frequencies, I believe that via satellites owners of this Planet will make everything pristine within hours or as much as day or two, but after the population is around 500 million.

As Always,

Best regards,

Petar

☐ Like



chas / November 16, 2012

superb article but if you check out the name of Jim Folsom
<http://www.globalwellness.com> you will find one very brave man who wanted for the sake of humanity to engage the FDA in fighting the sickness of society unfortunately he languishes in prison GOD BLESS AND KEEP HIM SAFE
Chas

☐ Like



realityblogger / November 16, 2012

I’m prepared for that...

The question is, why haven’t you (we) done anything about him being held in prison?

Will you rescue me? Will you be violent? World wars kill millions for fake causes to free people that are not necessarily wanting to be freed. So what about our wrongfully imprisoned who do?

-Clint-

☐ Like



Let's Get Honest (FamCourt) / November 16, 2012

Above, I'd mentioned the GAVI Alliance.

Turns out I'd blogged it here <http://wp.me/p2OJo6-g> as "From Oxford to Harvard to D.C. — Healing, Fueling, Feeding (and Vaccinating) the world."

It shows simply how looking things up, one thing leads to another. The head of the GAVI alliance was a Seth Berkeley, very interesting man. He'd previously been involved with a company or product called PowderJect, which injects things without needles. In other words, the particles themselves penetrate the top layer of skin, among the things injected, "DNA-related biochemicals."

If you have some patience, this leads to Isis Innovations, Ltd. out of Oxford University and back to the USA, corporate wise. Isis is not one to ignore.... they are turning research from Oxford U into commercially viable applications, at an astonishing rate, including helping people get the funding for it, if the idea is good.

It doesn't seem like anyone is particularly worried about the fact it's possible to inject people without a needle radically life-changing substances. yegads...

For anyone who's interested, there's "Inventing the AIDS Virus" by Peter Duesberg, UC Berkeley Professor of Molecular and Cell Biology and the first person to isolate a cancer gene, pioneer in retrovirus research, etc. I'm an eclectic reader and DNR why I picked up the book many years ago, but there you have it.....

<http://www.virusmyth.com/aids/index/pduesberg.htm>

Duesberg (co-)authored three books. 'Infectious AIDS: Have We Been Misled?' (1995) which is a collections of his main papers. He is the editor of 'AIDS; Virus or Drug Induced?' (1996), a compilation of dissident articles. Duesberg's story can be read in 'Inventing the AIDS Virus' (1996).

I can't explain it here, and DNR from where, but there was also a highly placed woman at NIH who had some similar information on cancer (i.e., causes and more straightforward cures, etc.) She was put out to pasture, naturally.

☐ Like



Patrick Jordan / November 17, 2012

Fantastic article. I will be datamining it for some time.

How to make an Android?

Well you can do it the hard way like putting 4 different cell types in a 3-D inkjet printer cartridge and lay out the scaffold for heart tissue and come up with a mini, beating, chambered heart in a nutritive solution and then apply that to building your man or woman from scratch, or, you can do it the easy way.

I got to thinking about how Autism/Measles for the young, Meningitis for the college aged, and Alzheimer's/Prions for the old were the same pattern of brain-gutting with different vectors. There are quite a growing number of people who question the existence of viruses. The definition of a virus is simply a strand of RNA or DNA that is encapsulated or not. Some make a valid argument that the family photos of viruses by electron microscope may be nothing more than artifacts of toxins rejected by cells. But then most toxins can be viewed as proteins or most chemicals might be rejected by cells by wrapping them in proteins so we are back to the Mid Evil definition of Virus that meant Venom or Poison.

Thou shalt not allow a Poisoner to live.

is the literal translation that the Witch King James attributed to 'a Witch' in his version that he had penned by his fellow Kraftsmen. Pharmakiae was associated with Sorcery while herbs, stones, and animals (eye of newt and all that) were lumped into Alkymy. The way I see it the entire scope of WitchKraft handles it all through one clearinghouse of the cult. The USDA being a fine example of global bioprospecting and tax-funded computerized laboratory science of plant and insect molecular biology that would make any crone of any age envious enough to kill for.

So we find a rich tradition of Poisoners in the Witches (Wisemen and Wisewomen, ah, Dr. Weisman!) who had access to village wells and acted as Midwives and nurses. It would be as simple as the CIA titrating LSD into municipal supplies to use Ergot in the village wells to keep the population hallucinating enough to establish their millennial long plans. And that is what it takes — isn't it? Long spans of time and technical infrastructure to rebuild the human as a Golem in their own image. You can't just inject Morgellons into people. You have to have Monsanto invent PCBs that have never existed on the face of the planet before 1929 so that gold nanofibers self-assemble invivo. You have to have parents allow their kids to guzzle artificial food dyes that are damned near indestructible in sunlight that are most likely the precursor molecules for building a ship inside the bottles of flesh that will be ultimately re-wired after the measles, meningitis and prions have spongified the central nervous systems of their victims.

Lettuce recap:

They have the capacity already demonstrated in mainstream media to grow functional organs out of inkjet printers. Any time a technology is declassified it is at least 5-10 years obsolete and replaced by something exponentially advanced. Since they already had 1800 years to hide Archimedes' form of

calculus from us, there is no telling what they are capable of in secret. They have the ability to gut the central nervous system of humans EXACTLY like parasitic wasp larvae liquefying the brains of their hosts and then driving them like the tiny aliens in the big robot in Mars Attacks! They have the ability to interface any number of photon based gene switching, nanoparticulate molecule adhering, and independent self-assembling scaffolding (Morgellons) technology to enhance (like Borg nanoprobes predictive programming) or replace the organic tissue that was target for replacement or removal. This is all DONE and reported in the mainstream media. The only thing for us to do was to uncover the most likely application of it.

It is simpler to allow humans to breed in selected genomic populations as starter crops, gut their brains and replace their hard drives with new applications than it is to build or grow an android from the egg up.

Regarding stopping the apocalypse:

Proteins are folded quite often because they are ‘crystallized’ so that they can be studied. We find that the work of Dr. Gilbert Ling <http://www.gilbertling.org> shows that in native conformation (the useful shape) proteins are often unfolded in the liquid medium of the cell so that the active parts are accessible for shape and charge to affect a function. Folded proteins are abnormal. Proteins may fold and unfold in the presence of other cellular apparatus but if it is wadded up it most likely is because it was manipulated by outside forces. When we examine the concept of a crystal being an oscillator then the concept of it transmitting and receiving like a crystal radio set gives a chilling insight into what a virus/prion/protein is capable of in the hands of the Enemy. But, as is pointed out in this article, a transmitter can also be a receiver and you can jam the frequency or send it a destructive resonant feedback oscillation. Reference: Effect of Intense Sonic Vibrations on Elementary Bodies of Vaccinia, published in Problems and Trends in Virus Research 1941, Rivers, Smadel, Chambers, who worked out of the Hospital of the Rockefeller Institute for Medical Research, Johnson Foundation for Medical Physics, University of Pennsylvania, 1937.

☐ Like



five words / November 19, 2012

Fatal Drug Administrators Update:
FDA Panel Gives Nod to Bird Flu Vaccine

<http://www.medpagetoday.com/InfectiousDisease/Vaccines/35970>

Happy Trails, . . .

☐ Like

TYRP / November 19, 2012



“The Austrian School was founded in the late 19th century by Carl Menger, building on a tradition dating back to the French physiocrats in the 13th and 14th centuries.”

NOT The Rockefellers as you state in your other blog post.

I am sorry, I am not suspicious of you. Everything you’ve done has been enlightening, however I am very familiar with the intricate tactics of the conspiracy against our country and you just hit on one of their sneakiest tricks. Discredit those who pose the greatest threats to their power. They have done this carefully with groups like the Jon Birch Society (who have been one of the most powerful groups to combat their power and restore the constitutional republic). Their power comes from lies, and education on TRUE Americanism is all it takes to destroy them. You have lured in those who are aware of the conspiracy and then attempt to discredit one of the most powerful warriors in spreading the very information that threatens their power (Ron Paul). Like the Pharisees saying JESUS’ power came from the devil. A house divided against itself cannot stand and Ron Paul has been seeking the destruction of those who hate the constitution for over 30 years, simply through education of principles. He has never once sought power for himself. So either you are a great asset to the fight against their conspiracy or you are a plant designed to try to undermine and discredit the truth of the message of liberty. I hope you’ll ponder that and dare to correct yourself if you have been honestly confused. Otherwise I cannot pursue the path of helping your cause to bring research of prions to greater audience as it too may be a distraction from the real causes of the medical onslaught against us.

☐ Like



realityblogger / November 19, 2012

Wrong place and wrong time for this particular Ron Paul is Jesus-like fallacy...

But what a statement – that you are not interested in freeing the world of suffering and disease simply because I don’t support Ron Paul!!!! Wow!

-Clint-

☐ Like



Steve / November 30, 2012

TYRP, a heartfelt congratulations on posting the most nauseatingly sanctimonious comment I’ve read all across the net this week. Word of advice, you will have more luck with such garbage amongst a less aware readership and host.

If you don't mind the adults are going to continue trying to make this world a better place. Grow the fuck up.

 Like



Let's Get Honest (FamCourt) / November 19, 2012

I'll say — look at the first few paragraphs:

“The failure of the Medical Autocracy to notice, not to mention, be appalled at, the human holocaust that it is actively facilitating, leads me to believe that the debting, dumbing and dimming down of humanity is its actual goal. This is not to single out the medical profession, as it is but a single cog in a larger wheel of social manipulation and tyranny.

Fortunately, as long as it is not your or my goal, the only way that the system can achieve its aims is if we don't act on what common sense tells us is now prudent, such as decline their invitation to take toxic cocktails or wage a destructive “war” inside the body in order to attempt to “cure” socially-constructed, medically sanctioned, and nurtured “diseases.”

This would also include diseases that we've not had, such as the practice of vaccinating children on the belief that they will get a disease at a future time, and then allow the system to claim credit when they don't get it. When other diseases come up years later, such as autism, diabetes, or MS, the early assaults to the immune system and overall ecological balance that vaccinations, and synthetic (GMO) nutritional products, represented, are never even questioned.”

It's also talking about the “HeLa” cells. HeLa is short for “Henrietta Lacks.” She contributed the body parts (unaware), her family didn't profit from this — everyone else did:

“The cell lines they need are “immortal”—they can grow indefinitely, be frozen for decades, divided into different batches and shared among scientists. In 1951, a scientist at Johns Hopkins Hospital in Baltimore, Maryland, created the first immortal human cell line with a tissue sample taken from a young black woman with cervical cancer.

“Who was Henrietta Lacks?

“She was a black tobacco farmer from southern Virginia who got cervical cancer when she was 30. A doctor at Johns Hopkins took a piece of her tumor without telling her and sent it down the hall to scientists there who had been trying to grow tissues in culture for decades without success. No one knows why, but her cells never died.

Read more: <http://www.smithsonianmag.com/science-nature/Henrietta-Lacks-Immortal-Cells.html#ixzz2CjI3xutw>”

(2002 article on the family: <http://www2.citypaper.com/news/story.asp?>

id=3426). She only lived to be 30..

☐ Like



oooorgle / November 26, 2012

TriHealth fires 150 employees for not getting flu shots

<http://www.wlwt.com/news/local-news/cincinnati/TriHealth-fires-150-employees-for-not-getting-flu-shots/-/13549970/17523386/-/3khe3s/-/index.html>

☐ Like



Sarah / February 8, 2013

<http://www.ncbi.nlm.nih.gov/pubmed/21674591>

☐ Like



Dayna / March 29, 2013

Just wanted to share how this article helped me to recognize risks associated with administering a tetanus immunoglobulin shot to my 20 month old baby who was bit by the family dog yesterday. Did you know that CJD “could” be transmitted with this blood product? I can’t remember if you talked about it here, but I just discovered this in the package insert! Oh joy! Needless to say I have declined this shot as long as my daughter shows no signs of tetanus toxicity (she isn’t and won’t be vaccinated) That didn’t stop the hospital from calling child services tho!

☐ Like



Patrick Jordan / March 30, 2013

I admire your life-saving decision to not allow a fatal shot. A simple question to ask is for them to put in writing for Informed Consent how many cases of Rabies and how many cases of Tetanus they have seen and treated at that medical facility. They then must also show with clinical evidence that those diseases were actually present. See below:

CDC document VPD Surveillance Manual, 3rd Edition, 2002, Chapter 13, Tetanus. (How cool is Chapter 13 ?). “VII. Laboratory testing. There are no laboratory findings characteristic of tetanus. The diagnosis is entirely clinical. C. tetani is recovered from wounds in only 30% of cases, and, not infrequently, the organism is isolated from patients who do not have tetanus. Serology obtained before TIG [tetanus immunoglobulin] is administered can support susceptibility if the result demonstrates very low or undetectable anti-tetanus antibody levels. However, tetanus can occur in

the presence of “protective” levels of antitoxin (> 0.1 IU by standard ELISA); therefore, serology can never exclude the diagnosis of tetanus.” Now, I’m just an idiot farmboy, but that statement is completely contrary to Koch’s Postulate. Read Koch’s criteria for isolating a disease organism from the host. Let me know what we all must be missing because those people at the CDC are too smart for me if they can’t find Tetanus but they can mandate a vaccine for it. Please share how you kept the child-stealers at bay.

☐ Like



realityblogger / April 2, 2013

Thanks for the info, and keep fighting for your negative natural rights not to be infected!!!

☐ Like



realityblogger / November 19, 2012

I recommend this site. -Clint-

☐ Like

- 1. [Xenotransplantation – Creating The Zombie Apocalypse – Secrets of the Fed](#)
- 2. [Militant Libertarian » Xenotransplantation – Creating The Zombie Apocalypse](#)
- 3. [Xenotransplantation, Exopoltics, and HeLa Markers | Thought for Food](#)
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- 5. [I Speak: Vaccinations And The Law « REALITY BLOG](#)
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