Mycoplasma

The Pathogen That Will Kill You without Your Knowledge!

Part 5

Weaponized Mycoplasma is a bioweapon designed to achieve a soft kill of a designated targeted population on a massive scale. Big Pharma was instrumental in this research along with the military bioweapons R&D agencies in increasing the efficacy, transmission and contagion factors of this bioweapon. In this segment, we will discover the dirty hidden secrets of how mycoplasma has been used against our children

In Part 4 of this series, I provided the historical background of how the U.S. military weaponized *Brucellosis Mycoplasma*, and why they chose this particular genus of the strain that was weaponized. In the previous segments we learned that it was idea for the military purpose during the 1950s. It could be used to sicken the enemy or it could be made lethal to kill populations.

Katherine Charlet was the inaugural director of Carnegie's Technology and International Affairs Program. She provides us some background to the issue of bioweapons and potential issues we face today because of it. The content of her article from the CFR publication *'Foreign Affairs'* points to how this matter will never go away.

Military and political leaders have worried about large-scale biological warfare for more than a century. *"Blight to destroy crops, Anthrax to slay horses and cattle, Plague to poison not armies only but whole districts—such are the lines along which military science is remorselessly advancing,"* Winston Churchill lamented in 1925. But despite the deadly potential of biological weapons, their actual use remains rare and (mostly) small scale. Over the last several decades, most states have given up their programs. Today, no country is openly pursuing biological weapons. This is what we have been told; however, the Wuhan, China incident that appeared on the scene with the Chinese rollout of 5G in their designated "smart" city of Wuhan, China raises many unanswered questions. I for one have doubted seriously that any of the world's leading powers have completely rid their nations of chemical and biological agents. In the fact that Dr. Anthony Fauci was caught in violating the issue of "gain of function" research through use of a Chinese BSL4 lab in Wuhan, China is suggestive that bioweapons are still a risk to public health in the U.S. and elsewhere in the world. I will include a link at the end showing the nine specific violations of U.S. Statutes by Dr. Anthony Fauci of the NIAID, all being criminal offenses demanding prosecution.

Recent breakthroughs in gene editing have generated massive excitement, but they have also reenergized fears about weaponized pathogens. Using gene-editing tools, including a system known as CRISPR, scientists are now able to modify an organism's

DNA more efficiently, flexibly, and accurately than ever before. The full range of potential applications is hard to predict, but CRISPR makes it much easier for scientists to produce changes in how organisms operate.

These technologies offer vast potential for global good. Researchers are studying the use of new gene-editing techniques to fix deadly genetic mutations, create disease-resistant crops, and treat cancer. Top scientists at Harvard are pursuing medical applications once thought to be out of reach, such as age reversal and transplanting pig organs into humans, and even immortality. But it's not hard to imagine how gene-editing technologies could be misused. Some fear that terrorists with even moderate capabilities could develop deadlier pathogens. And laboratories, appealing to parents' instincts to offer advantages to their children, could modify embryos in ways that cross ethical boundaries. Both Harvard and the University of North Carolina were implicated in the Dr. Fauci issue of "Gain-of-Function" after being ordered to stop its work.

One of the most worrisome questions today is whether advances in biotechnology could tempt states to revive their old biological weapons programs or start new ones. Such an outcome would drastically undermine the progress of the last several decades. A revitalization of state biological weapons programs could trigger new conflicts or rekindle old arms races, destabilizing the international order.

Faced with extremes of promise and peril, policymakers must proceed with a sense of perspective. Fear-mongering or overregulation could undercut the almost unimaginable benefits of the biotechnology revolution. But failing to anticipate and manage the significant risks, including the resurgence of state biological weapons programs, would be equally problematic.

BIOLOGICAL WEAPONS IN HISTORY

Understanding the risks that biological weapons pose today requires a closer look at how states have historically weighed their benefits and drawbacks. Since 1945, only six countries have publicly admitted developing biological weapons, although sufficient evidence exists to suspect a dozen or more. As the biological warfare expert W. Seth Carus has pointed out, states have pursued these weapons for a number of different reasons.

Between 1942 and 1969, the United States developed a highly advanced biological weapons program, which was capable of large-scale lethality. Initially, this program was designed as a deterrent, but American researchers also came to value the flexibility of biological weapons, which could temporarily sicken or disable people rather than kill them. During the Cold War, the Soviets also conceived of a range of strategic and operational uses for biological weapons. In addition to lethal uses, for example, they explored targeting agriculture to damage an enemy's farming, food stocks, economy, and morale. Stalin even considered using the organism that causes plague to assassinate Marshal Tito, then the president of Yugoslavia.

The materials needed to develop biological weapons are easy to access and relatively cheap. Many pathogens, such as the one that causes anthrax, don't need to be developed in a lab; they can be found in nature. And states pursuing biological weapons can readily obtain the necessary equipment, which is the same as what is needed for medical or defense research. Biological weapons also offer deniability: attacks can look like natural outbreaks, and they are difficult to attribute.

But in practice, biological weapons also pose tactical and technical challenges, which led many decision-makers to question their overall value. From a tactical perspective, the time lag between exposure and symptoms has limited the utility of biological weapons on a battlefield. And target populations can protect themselves with vaccines and other countermeasures. Launching a successful large-scale attack is also difficult. Unpredictable winds, changing terrain, or incorrect dosage could all lead to failure. According to Carus, the United States and the Soviet Union are the only two countries believed to have overcome such challenges enough to be capable of using aerosol releases to reliably disseminate biological weapons over a large area.

Indeed, a significant problem with biological weapons has been the prospect that the agent could blow back on the users, infecting the attacking country's own soldiers and citizens as well as the enemy's. In the late 1930s and early 1940s, Japan undertook the largest-scale use of biological weapons in modern times, conducting both small attacks and larger campaigns in China. During one campaign, the Japanese dropped plague-infected fleas from aircraft onto Chinese targets and spread organisms responsible for other diseases in water and rice fields. Estimates of the Chinese death toll from the Japanese biological weapons attacks are debated and unverifiable, but they range from tens of thousands to several hundred thousand. In the process, however, it is thought that these attacks also killed well over a thousand Japanese soldiers.

These tactical and technical hurdles are not insurmountable, of course. But they have contributed to the lack of any known state use of biological weapons for the last several decades and to a broader trend of states voluntarily ending their programs. For example, disappointing test results and disenchantment with the deterrent power of biological weapons contributed to the decision by the British to deprioritize their program and stop developing offensive capabilities in the late 1950s. Although the U.S. program was more sophisticated than the British one, U.S. President Richard Nixon still terminated it in 1969, in part because he was unsure if it contributed to national security. The question today is whether new biotechnological applications might loosen those constraints.

A NEW CALCULUS?

Gene-editing techniques such as CRISPR could make biological weapons more deadly. Nations could develop novel or modified pathogens that would spread more quickly, infect more people, cause more severe sickness, or resist treatment more fully. Equipment needed for wide-area dispersal may become less necessary, for example, if a pathogen can be engineered to spread faster on its own. Whether that potential is tantalizing enough to convince countries to revitalize or initiate biological weapons

programs is uncertain. These kinds of modifications have long been possible, just harder, using traditional genetic engineering techniques. But there are worrying signs that some leaders sense a new opportunity. In 2012, for example, Russian President Vladimir Putin intimated to his defense minister that he should plan to develop weapons based on new principles, including genetics.

Another concern is that gene editing may make it easier to carry out targeted assassinations. Conceivably, a government might edit the genes of a deadly virus so that it would affect only a single target based on his or her genetic code. This capability does not yet exist, but it might become possible with time and effort. Nonetheless, as the biosecurity expert Gigi Gronvall has noted, given the prevalence of far easier methods of assassination, states may decide that developing and testing such a weapon is not worth the time, effort, and cost.

A related fear is that advances in gene editing could allow scientists to develop biological weapons capable of discriminating among target populations based on ethnic, racial, or other genetically defined characteristics. According to Gronvall, these so-called ethnic weapons would be tricky to design and test, and any target population would likely have considerable overlap with non-target populations. Still, the world is only in the early stages of the biotechnology revolution, and biological weapons have been used in ethnic and racial conflicts before. In the 1970s, for example, Rhodesia's intelligence agency introduced cholera into wells in areas held by Black Nationalist guerillas. And in 1981, the apartheid government of South Africa launched Project Coast, which is believed to have looked into biological means to assassinate opponents. According to some accounts, researchers with Project Coast also discussed plans to selectively administer an antifertility vaccine to black women. These examples give reason to monitor the threat of targeted biological weapons.

Some observers argue that gene editing could make it easier to develop or use biological weapons clandestinely, thus reducing the risk of international disapprobation. But maintaining a secret biological weapons program has never been particularly difficult. The equipment and agents required also have legitimate uses, and the challenges of international oversight mean that the odds of getting caught are low. It is unlikely that new technologies would change this in any fundamental way.

Concerns that gene editing will make biological weapons so cheap that countries reassess their strategic value are also overstated. CRISPR does make gene editing less expensive; in 2014, a scientist at Vanderbilt University noted that an activity that used to take 18 months and cost about $20,000 took only three weeks and cost about $3,000. The expense can only have fallen in the years since this estimate was made. But biological weapons are already cheaper than alternatives such as nuclear weapons. And although gene editing lowers the cost of developing a deadly pathogen, it does little to reduce the price tag on the many other steps involved, such as weaponization, manufacturing, and delivery.

Considering all of this, one particular concern emerges. The combined factors of lower cost, easier access, and greater effectiveness might not be enough to sway major powers, but they may incentivize rogue and small states to reconsider the marginal utility of investing in biological weapons. As a result, any strategy to address the risk of genetically edited biological weapons must take into account a broad range of state types, not just the major powers. Still, it's important to put the threat in perspective: gene-editing advancements need not change the basic calculus to the extent that some fear.

THE NORMS MATTER

Major disincentives to the use of biological weapons already exist, and they can be strengthened to prevent countries from revitalizing or starting biological weapons programs. This is not an excuse for complacency; countries will need to reinforce and update the existing protections in light of new capabilities. Still, the norms and incentives against the use of traditional biological weapons should buy time and space for the international community to put new measures in place.

The vast majority of states - 180 of them - are parties to the 1972 Biological Weapons Convention, which bans the development, stockpiling, acquisition, retention, and production of biological agents for non-peaceful purposes. Although the treaty is often criticized for its lack of a meaningful enforcement mechanism, it has helped establish a global norm that using biological weapons is immoral and unacceptable. Although such norms may not constrain the worst actors' behavior, they do provide the rationale and motivation for the rest of the world to punish violators. **That Treaty did not prohibit a country from testing such weapons on its own citizenry, just that a nation would not use such weapons against other sovereign states.**

Today, any state that used biological weapons genetically edited or otherwise, would meet severe reprisal from other states seeking to defend the norm of nonuse. Breaking the status quo, even on a small scale, would turn any country into a pariah. Few would be willing to take that risk, and those most likely to do so, such as Iran, North Korea or Syria, already face sanctions and military containment. Were either of these states to use biological weapons, the United States and its allies would almost certainly respond with massive destructive force.

Becoming a "first misuser" of a genetically edited biological weapon could also prevent a state from enjoying the positive applications of the new technologies. Researchers, businesses, and governments worldwide hope to take advantage of advanced biotechnologies in medicine, agriculture, and manufacturing. Countries discovered to be misusing such technologies could end up undermining their own businesses and research institutions and cutting their citizens off from the benefits discovered by others. Of course, if a country where to find that it profits little from the new technologies, then this disincentive would be lessened— one reason why the purveyors of new biotechnological applications should strive to make them affordable and widely available.

Ultimately, the power of these disincentives hinges on the ability to determine that an attack has occurred and to identify its source. For now, investigators looking at a pathogen in the aftermath of an attack would not necessarily be able to tell if gene-editing techniques had been used. Although plausible deniability could lower a state's inhibitions, it probably would not eliminate them altogether. The perpetrator of an attack might still be uncovered through other means, such as espionage.

Of course, individual terrorists and groups such as the Islamic State, or ISIS, do not feel bound by international norms. Indeed, gene-editing advancements do increase the risk that such actors could use biological weapons. But strong international norms are still useful, because they motivate the rest of the world to prevent and punish violations. The possible revitalization of state programs requires explicit attention because it is a more multidimensional threat. Not only could state programs produce deadly weapons, but the existence or use of the resulting weapons could trigger conflict, escalation, arms races, and other destabilizing events.

KEEP THE DISINCENTIVES STRONG

The current system does not eliminate the risk that a state could see new value in biological weapons, but it is enough to give any country pause. That means that the international community still has time to reinforce the current norms against all types of biological weapons and decrease the perceived benefits of genetically edited ones.

First, countries must strengthen the Biological Weapons Convention. Since 1986, state parties to the convention have affirmed that the treaty's prohibitions apply to new scientific and technological developments. The prohibitions likewise apply regardless of the origin or method of production of a biological agent. In December 2017, state parties agreed to initiate a series of discussions on the risks of new technologies. These are important foundations, but more steps are required.

The five permanent members of the UN Security Council should invite other states to join them in making a strong statement that emphasizes the enormous positive potential of synthetic biology techniques, including gene-editing, and reiterates their firm commitment to use such techniques for non-hostile purposes only. Reinforcing the positive potential of these new technologies could strengthen current norms by broadening awareness of what might be lost if a violation occurs.

Above all, countries must strengthen their ability to detect and respond to biological attacks. If gene-editing can help create pathogens that spread more widely and quickly, then nations must detect outbreaks sooner, wherever they originate. If gene-editing enables novel pathogens, then nations need the capability to rapidly create novel countermeasures. If gene-editing allows for more clandestine uses of biological weapons, then nations require better techniques for determining their origin. Such improved capabilities would act as a deterrent by denying perpetrators the devastation they might hope to achieve. Fortunately, they are exactly what are needed to safeguard global health more generally.

Yet governments are not moving in the right direction. A February report by the Blue Ribbon Study Panel on Biodefense warned that U.S. spending remains out of sync with actual threats. Outbreak response—such as the $5.4 billion spent on Ebola in 2014—is essential, but resources should also be spent on programs that might prevent outbreaks in the first place. The latest White House budget cuts funding for the Centers for Disease Control and Prevention's preparedness and response programs by $20 million and its programs for emerging infectious diseases by $60 million. Instead, Washington and other governments should be protecting and coordinating their biological defense, prevention, and preparedness budgets for maximum effectiveness. Strategically applied resources and strong leadership would save lives by enabling quick responses to outbreaks, thus limiting the impact of disease—even if no one ever conducted a purposeful attack.

To make the most of limited resources, governments and biosecurity experts should improve their coordination by developing an international biological security strategy. Such a strategy would mobilize national and international bodies to detect harmful new diseases or health anomalies in human populations, agriculture, and the environment and to share information about them. It would also marshal financial and institutional resources to quickly utilize gene-editing and other new techniques to produce countermeasures against harmful, and potentially novel, pathogens. The elements of such a strategy are not new. As in so many other fields, what is needed is sustained, high-level leadership to promote and implement them.

The United States can be a leader in these efforts, given its broad influence and technical know-how. None of these proposals would require new regulations that would stifle American business or innovation. Nor would they prevent militaries from conducting lawful operations. Some steps would cost money, but the price tag would pale in comparison to the damage caused by a well-executed biological attack or even a large, naturally occurring outbreak. If the United States is not willing to lead, China has increased its investment in global health over the last decade and might step into the void.

In seeking to prevent the use of biological weapons, governments, businesses, and scientists must arm themselves with equal parts fear and confidence, urgency and pragmatism. Given recent technological advancements, the consequences of a return to an era of states with biological weapons programs would be devastating. But a sound strategy to keep the disincentives strong can keep that possibility in the realm of fiction.

The CFR may be a NGO [non-government-organization] but its members are generally high-level governmental employees, policy-makers and politicians. Wicked Hillary Clinton is on video tape stating that we take our orders from the CFR. She stated that when she was Secretary of State from 2009-2013, under President Barrack Hussein Obama. With this background, I want to move on to the most sinister of pathogens threatening human life on this planet, of which very little is public knowledge.

Mycoplasma is an Invisible Nano-Parasite

There is a group of miniature invaders that are not being publicized and have not become as well-known part of the medical repertoire. According to some sources, these microorganisms are alleged to have been released, and continue to be released by aerosol plumes, from the high-flying planes sent by the Geoengineering weather modification program. The use of the world "alleged" is inappropriate as samples of the aerosol poison showed the presence of Mycoplasma. This program is quasi secret, information is publicly available but at the same time, public acknowledgment is discouraged. There is a rumor that this information is not necessarily being withheld from the medical people, but downplayed, so there is very little knowledge of it, and when unidentified symptoms show up they are advised to minimize the presenting problem, and suggest that their patients are over emphasizing these sensations, perhaps fantasizing health problems for emotional reasons. This may or may not be true, but there are many reports from patients who have experienced dismissive comments from their doctors when they have asked for help for their unidentifiable complaints.

However, after observing this for a few years, information has been infiltrating into public awareness, and some of the medical people are acknowledging it. Even though people who have spoken up have been ridiculed and marginalized, it is still true that there are really some very difficult unexplained illnesses that are showing up. The alternative people are the ones who have attempted to find out what this is about, and are attempting to address these problems.

The major ones we have become aware of are Mycoplasma, Lyme spirochetes, usually initiated by a bite from an infected tick - but not always - and the co-infections that often accompany Lyme disease, Mycoplasma, Babesia, Bartonella, and Ehrlichia. These are distinctly different microorganisms that can occur separately, not necessarily as co-infections. They are difficult to identify with current medical methods, and they do not respond well to pharmaceutical intervention, so medically they are still considered "marginal," and their patients are still frustrated. However, practitioners who can draw upon a broad array of natural remedies have been successful in addressing these little beings. We will start with the most familiar one, the Mycoplasma.

Mycoplasma is a microorganism that has almost no cell wall structure, and is the smallest living being that can reproduce itself by living off host cells. It is an airborne pathogen, unless it had been introduced inadvertently as a contaminant within a vaccine. A great many people have it without experiencing more than just minor symptoms; however it can also become the basis for very severe health problems. There are some excellent remedies that are available to non-medical practitioners that cannot be revealed or used within the current arena of healthcare that is dominated by the pharmaceutical cartel.

Various species of Mycoplasma have been derived by extracting genetic material from the bacteria Brucella, and made into crystalline form that then emerge as a separate organism, no longer related to bacteria. When these infinitely small crystals are inhaled as dust particles, they dissolve in the blood, so that they become undetectable by

medical measurements. They precipitate out as parasite-like organisms as soon as they attach to a target cell structure, and they form a biofilm to hide behind. The biofilm partially protects them from the immune system scouts, but enough is detectable so that the immune response creates an inflammatory process.

Inflammation is a buzzword in the health world, spoken of as though it were a disease, in itself. It seems to be used a vague explanation for nearly every unidentified problem. Inflammation is not a disease. It is a symptom. The source could be viral or bacterial, this we can understand. But when it is apparently without cause, it just "happens," it is usually a microorganism that hasn't been medically identified. When you hear about inflammation, always check for Mycoplasma or other little unidentified microscopic beings. Whatever is behind this symptom needs to be identified and addressed. Although it eludes physical testing, it can be identified with vibrational testing, i.e. accurate muscle testing.

One species of Mycoplasma presents as a cold that lasts too long to be a regular cold or chronic cough or lung infection that doesn't respond to the usual remedies we have come to rely upon. A different species erodes the myelin sheaths around the axons, and injures myelin nerve protection in the brain, resulting eventually in Multiple Sclerosis. This species also alters the structure of the substantia nigra and can affect α-synuclein, precipitating Parkinson's disease. Another subspecies hides out in the synovial fluids, etching away the cartilage, causing inflammation in the joints that we identify medically as Rheumatoid Arthritis.

In Alzheimer's there is a severe shortage of available acetylcholine, since its transmission is blocked by plaque, and neurofibrillary tangles. This occurs when a Mycoplasmic infection in the brain removes cholesterol from the cell walls. The brain cells collapse and the empty leftover membranes cling together, contract, and gradually building up as beta amyloid plaque. The Mycoplasma that develops plaque can be stopped by the mushroom formula, and established plaque can remove by a compound of maitake mushrooms. Tangles can be released by your homeopathic aluminum remedies. Then, given organic food, clean water and coconut oil, acetylcholine can be expected to resume its normal pathways. Unless there has been irreparable damage, the confusion, despair, and fatigue that this dreadful disease causes can be released.

A research microbiologist, Dr. Shyh-Ching Lo, working with a grant given to him by the U.S. Army, applied for a U.S. patent - and received it - for his invention of a bioweaponized form of Mycoplasma he called Mycoplasma fermentans. Dr. Lo's patented organism is responsible, by his own unabashed admission, stated within the text of the patent, for Chronic Fatigue syndrome, Crohn's, Fibromyalgia, Rheumatoid Arthritis, Lupus, Multiple Sclerosis, Sarcoidosis, Alzheimer's, Parkinson's and as a major co-factor in the development of HIV/AIDS.

Autoimmune Disease is an elusive category that includes countless different illnesses. As you can see in Dr. Lo's list, he and his colleagues in the bioweapons lab have created numerous illnesses by developing various forms of Mycoplasmic infections.

Their work indicates that an autoimmune-like process is contingent upon a Mycoplasmic intervention. An autoimmune illness can hit you "out of the blue" quite literally, if it comes from the aerosol plumes that filter down into the air we breathe, from the high altitude planes sent by Geoengineering. Wherever it comes from, the Mycoplasmic out pouring of toxic micro-organisms been so concentrated, and these pathogens are so light and so prevalent, that it is nearly impossible to keep them out of the vaccines during their manufacture. The second most common source probably comes from those that were inadvertently included in vaccines, since direct injection into the blood is a more definitive exposure than just breathing.

The association with vaccines is accurate. It's certainly true that illnesses that appear to be autoimmune are coming from the vaccines. The immune confusion that the combination vaccines, each with diverse viral substances and inflammatory adjuvants, would be enough to set up incorrect signals to the immune system responses. The immune signaling confusion is likely to create susceptibility. Then the Mycoplasma plays its own significant role, and needs to be considered as a factor in the etiology of what appears to be an immune system dysfunction.

Every cell within the structure of every living being contains a self-identification system. It is a unique self-protection protein that is attached to the outside of each cell. It is the personal signature of that organism. The immune system is coded to the host's signature, and it will protect every cell that carries it and capture and destroy any cell that does not carry its own self-marker. Even similar organisms each have a different code, which is why transplanted organs are at risk, at first, until they become acclimated to the new signature system. This is why anyone having an organ transplant is required to take anti-rejection medications for life.

Mycoplasma creates an autoimmune-like effect by removing the host's self-identification markers, and pulling these markers around themselves, to look as though that they belonged to their host's body. By wearing the host's self-markers, they avoid detection by the immune system. The signal the immune scouts see tells them that these organisms belong to the body, so these masked Mycoplasma cells are quite safe. By removing the markers from the neighboring host cells, the Mycoplasma has now revealed the body's own cells to the immune scouts, without their self-identity. They will be signaled as unmarked prey to the scouts. This generates the effect that appears to be an "autoimmune" situation, since it certainly looks as though the immune system were attacking its own cells. The immune system does not perceive those cells as ever having "belonged," they are now perceived as foreign. Specific cells of the body have been stripped by the Mycoplasma, and are being targeted.

Your immune system doesn't turn against you and attack you! Its job is to protect you. Removing unmarked cells is how it takes care of you. By that interpretation, there is really no such thing as an "autoimmune" disease. It is a misnomer term.

Whenever you hear about an autoimmune disease, it would be very important to check for Mycoplasma. It could have been included in a vaccine, and could have come just

from breathing the air. Analysis of chemtrail spraying back in 2000 confirmed the presence of Mycoplasma. Remember the treaty signed by the nations of the world, did not ban a country spraying its own population.

It is very difficult to treat Mycoplasmic infections by pharmaceutical methods. There is no cure for Mycoplasma. Even though they are spoken of medically as bacteria, they are not bacteria, and do not yield readily to antibiotics. Treatment by antibiotics sometimes takes many months, and that length of continuous exposure to disruptive drugs takes its toll on the body's system. After all that, the person could easily be re-exposed, so the treatment would have to be started all over again. Doxicycline is the antibiotic of choice, but it is a lengthy course of treatment and not as precise as it would have been if alternative expertise had been available, rather than depending exclusively on pharmaceutical expertise.

Our approach for helping the body to eliminate a Mycoplasmic infection is to create a venue for it to be revealed to the immune system, so that it can be identified. Once that happens, the body will do the rest quite quickly, usually in just a few weeks. Our remedies don't "kill" the Mycoplasma, or "cure" the client, they give the body a way to identify it and intervene. From there, the body knows what to do. A number of physicians have been offering special formulations of medicinal mushroom remedies. Sometimes a tincture made from herbs, roots, or bark from the Amazon rainforest comes up as the best thing, or a perhaps a metaphysically enhanced formulation is best of all, combined with a mushroom, depending on how the body's biofield responds.

With accurate muscle testing, the body-consciousness can actually identify the remedy that would work best. This is how a practitioner can test a client accurately: Hold the remedy far away from the client's body to test it. If you hold the remedy close to the body, your test will reflect the opinion of the micro-organisms, whose biofield is just a few inches above the body. They will say "NO don't give her that, that's not the remedy," but if you hold it far enough away, the biofield of the client reaches beyond that, and will say "YES I like it, thank you, that's the right thing." Such treatment therapy is not part of allopathic medicine today. America's allopathic medicine became dominant in the U.S. with the Rockefeller school of medicine in the 1920s and 1930s.

Naturopathic of homeopathic medicine had been routine until John D. Rockefeller found a market for his oil-based pharmaceuticals. Early on in his life he actually sold his 'snake-oil tonics' in bottles for anything that ailed people.

The supplements of the natural path or homeopathic physician will engage, in this process, are foods and herbal substances rather than unfamiliar chemicals, so they do not disrupt the normal functioning of the body. The intention of non-medical expertise is to facilitate the natural healing ability of the body, and trust that its inner knowledge knows how to make the correction.

The intention of pharmaceutical intervention is often to stop a process perceived as disruptive, by keeping the body from doing something that is causing a symptom, and

substituting a chemical either to engage a process or prevent a process that could either delay or prevent the symptoms of a disease.

Mycoplasma has a role in Fibromyalgia. In the course of its life process, Mycoplasma creates acidity that builds up in the surrounding fluids, so it affects the blood, the lymph, and the interstitial fluids. This shorts out several enzyme reactions that can take place only in a neutral medium, encourages secondary acid-dependent illness to take place, and leads to a diminished uptake of oxygen.

Specifically, if Mycoplasma has invaded the muscle tissue, it generates an acidic ambience where the pH needs to be neutral. This is experienced as pain. The client will feel pain upon moving, and experience much more pain upon exercising. This often happens along with symptoms of chronic fatigue disorder, since sometimes both are caused by the same micro-organism. Chronic Fatigue, to oversimplify it, is ordinarily a shortage of ATP. This involves thyroid action, and the presence of nano-aluminum, another unwelcome verified "gift" from the aerosol plumes of Geoengineering the atmosphere.

Various varieties of Mycoplasma require somewhat different remedies, and they have also found that sometimes the Mycoplasma is not there just by itself, but has been bioengineered in a way that has embedded it into another pathogen. The combination functions as an independent organism, but in this case two remedies must be offered, one to address the Mycoplasma part of it, and another to address the other organism that has been bonded with it. Unless both remedies are received together, the new little nano-parasite combo is likely to continue to create health problems that defy a cure.

Other Microorganisms: Ehrlichia, and Spirochetes

In this article, I don't want to imply that Mycoplasma is the only elusive micro-organism that shows up as a result of aerosol spraying. There are organisms other than Mycoplasma that can set up joint pain, blood dyscrasia, various disruptive organ effects, blood pH changes, and neurotransmission deflection.

Ehrlichia is a micro-organism, different from Mycoplasma that can set up a number of distressing health effects. The symptoms that we observe with Ehrlichia are muscle weakness, fatigue, headache, inadequate immune response, and forgetfulness.

What we see happening, biochemically, is that Ehrlichia invades hemocytoblasts in the bone marrow where white cells are manufactured, causing the white cells to be imperfect and unable to function well. They then become too numerous, because the hemocytoblast tries to make more, to compensate for the damaged ones. We know that one client whose doctor said he was very puzzled; it looked as though she had Leukemia but clearly it wasn't really Leukemia, and he had no idea how to interpret it. Further study revealed it came up as Ehrlichia.

Another effect they have observed is that Erlichia prevents the entry of ammonia into the urea cycle, so that NH3 can't be converted into harmless urea—then a certain

amount of free ammonia, (released from the normal transamination of proteins,) continues to circulate in the blood. This pushes the blood pH toward alkalinity, and causes on-going headaches and mental fogging. Another thing it does is to block the construction of the enzyme that allows methylation. Then tyrosine can't be made, folic can't be converted, thyroxine drops, and dopamine is inhibited.

Ehrlichia leaves behind a toxic residue that in itself is difficult to detoxify, because it has the effect of disrupting the mitochondria in the kidney, which minimizes the detoxification process. Unless this is handled, then even after the Ehrlichia is gone, the residue remains and continues to recirculate. At the same time, this residue interferes with the synthesis of the enzyme that creates acetylcholine, causing muscle weakness, fatigue, and reduced cognitive clarity.

The remedy that has been coming up for this, rather than medicinal mushrooms, is a special formulation made from a plant called Osha. A major issue that almost works crosscurrent in diagnosis is that most physicians are specialists in the modern world we live in. This specialized training results in a doctor's medical training to the exclusion of any training in nutrition, and vitamins. Specialists see treatment therapy as either one of three things: surgery, chemo, or radiation. I am not knocking their importance, but most illness is a lack of something, or too much of something.

Dr. Tom Cowan, a retired physician in San Francisco, points out in writings that the "Germ" theory of Louis Pasteur became the dominant view of pathogenic illness and sickness to the point of excluding the "Terrain" theory which deals with a person's close environment, and could be pollution, dirty water, dirty air, and dirty food. Dr. Cowan rightly points out that Louis Pasteur admitted his "germ" theory could not be proven! His 2020 book, *'The Contagion Myth: Why Viruses (including Coronavirus) Are Not the Cause of Disease"* say the "terrain" is the real issue. Dr. Anthony Fauci, Dr. Robert Redfield, and Bill Gate could benefit from Dr. Cowan's book, except there is more

money to be made in vaccines and pharmaceuticals. That was obvious when these men failed to mention that 60% of Americans are Vitamin D3 deficient. A good brand of Vitamin D3 at Walmart might cost you $10 a month during the winter months when those living north of the 30th degree parallel do not get any Vitamin D3 naturally from the Sun in the winter months. The FDA RDA for Vitamin D3 is only 400 IU, which is way short of what the human body needs.

In a previous recent article I shared a study of 100 doctors who stated what they took personally and what they recommended to their patients. The evidence of that article was that most doctors used the quantity of 4,000-5,000 IU and recommended much the same for their patients. In my own experience over thirty years, I take 2,000 IU from April 1st to September 1st; and 4,000 IU from September 1st until April 1st. I never get a flu shot and never have had the flu. I went 28 years without a cold, until two years ago. We babysit a grandchild when her parents work, and I caught 2 colds from her last winter. As recent as two weeks ago I felt a cold coming on a Friday, and Saturday morning it was obvious. I began taking 10,000 IU of Vitamin D3 every 8 hours and by Monday morning the only evidence I had a cold was the raw skin on my nostrils.

They have been detecting double organisms, combinations where two are bonded together, and act quite differently from either one that they had once been. So far, the major combinations they have detected are Mycoplasma attached to a virus, or a spirochete, or could be attached to a metal. Babesia might attach to a fungus, and a bacteria or virus could be linked with a Bartonella molecule. In case of a double organism, they have to offer two remedies, one for each part of the organism, or the body will not be able to release it. Lyme disease has long-been tracked back to ticks that were infected and released by the biolab at Montauk, Long Island, NY, and the ticks have infected much of the deer population of the country as well as an ongoing issue for humans.

None of these organisms are easy to identify by the current methods of medical testing, nor do they yield easily to current pharmaceutical options. Most physicians are not in a good position to offer precise or effective natural remedies. Unless they are integrative physicians, this arena of health care is not part of their training. Some people feel frustrated or annoyed when they find that their doctor isn't "up to speed" and doesn't know something that they had expected him or her to know.

Keep in mind: Nobody can know everything. Naturopathic doctors, chiropractors, and others who have had training in non-medical skills, and are experienced with the unacknowledged health issues that have been showing up recently, may be better equipped to identify and address these microorganisms.

Everyone in the health field has a unique form of expertise. They each have something to contribute, and patients/clients are best served when they collaborate supportively in their behalf, as part of a team. Allopathic medicine is largely allied with the drug industry in their choice of treatment over natural remedies.

The research that I have been doing for months clearly shows how unique, or better said how hard it is to identify the Mycoplasma pathogen and why so few in the medical community know much of anything about it or what it is.

The web site 'Stop Spraying California' posts the following:

STOP SPRAYING CALIFORNIA!
California Chemtrail Information - Mycoplasma

Mycoplasma and Chemtrails

What is Mycoplasma infection?
Mycoplasma infection is respiratory illness caused by Mycoplasma pneumoniae , a microscopic organism related to bacteria.

Who gets Mycoplasma infection?
Anyone can get the disease, but it most often affects older children and young adults.

When do Mycoplasma infections occur?
Mycoplasma infections occur sporadically throughout the year. Widespread community outbreaks may occur at intervals of four to eight years. Mycoplasma infection is most common in late summer and fall.

How is Mycoplasma spread?
Mycoplasma is spread through contact with droplets from the nose and throat of infected people especially when they cough and sneeze. Transmission is thought to require prolonged close contact with an infected person. Spread in families, schools and institutions occur slowly. The contagious period is probably fewer than 10 days and occasionally longer.

What are the symptoms of Mycoplasma infection?
Typical symptoms include fever, cough, bronchitis, sore throat, headache and tiredness. A common result of Mycoplasma infection is pneumonia (sometimes called "walking pneumonia" because it is usually mild and rarely requires hospitalization). Infections of the middle ear (otitis media) also can result. Symptoms may persist for a few days to more than a month.

How soon after exposure do symptoms appear?
Symptoms generally begin 15 to 25 days after exposure. The symptoms generally develop slowly, over a period of two to four days.

How is Mycoplasma infection diagnosed?
Mycoplasma infection is usually diagnosed on the basis of typical symptoms. A nonspecific blood test (cold agglutinins) is helpful in definitive diagnosis, but is not

always positive. The use of more specific laboratory tests is often limited to special outbreak investigations.

Does past infection with Mycoplasma make a person immune?
Immunity after mycoplasma infection does occur, but is not lifelong. Second infections are known to occur, although they may be milder. The duration of immunity is unknown.

What is the treatment for Mycoplasma infection?
Antibiotics such as erythromycin, clarithromycin or azithromycin are effective treatment. However, because Mycoplasma infection usually resolves on its own, antibiotic treatment of mild symptoms is not always necessary.

What can be done to prevent the spread of Mycoplasma?
At this time, there are no vaccines for the prevention of Mycoplasma infection and there are no reliably effective measures for control. As with any respiratory disease, all people should cover their face when coughing or sneezing.

Mycoplasma is a genus of bacteria that lack a cell wall. Without a cell wall, they are unaffected by many common antibiotics such as penicillin or other beta-lactam antibiotics that target cell wall synthesis. They can be parasitic or saprotrophic. Several species are pathogenic in humans, including M. pneumoniae, which is an important cause of atypical pneumonia and other respiratory disorders, and M. genitalium, which is believed to be involved in pelvic inflammatory diseases.

Molecular Terrorism By Mycoplasma - Genetically Engineered Stealth Microbes May Be The Source Of Your Health Problems
by Gary Tunsky / Crusador Newsletter / Portland IndyMedia
You wake up dead tired. You feel like you've been hit by a truck. Sleep becomes sporadic, if at all. When sound sleep occurs, the restoration of energy is minimal causing you to meticulously save your energy like a miser hoards gold. If you force yourself into activities beyond the scope of your normal daily chores, you pay a heavy price. A possible consequence is being bedridden for days. You have trouble concentrating. Short-term memory losses make you feel like you're trapped in a brain fog. You have unexplained muscle aches and joint pains like a never-ending flu. Your spouse and family don't understand this new metamorphic change in you, going from active and bubbly to sick and decrepit in the prime of your life almost overnight. Your social life has disintegrated and once close friends are slowly drifting away because the monotonous explanation that you're too tired to see a movie or go out to dinner has waned thin. You're taking an abundance of sick time and your boss is starting to question your sanity. Nobody understands. Nobody believes. Nobody offers help. Well, almost…Read more

http://portland.indymedia.org/en/2005/01/309675.shtml

Mycoplasma Variants Linked To Numerous Diseases

The seven weaponized Mycoplasma variants that enter fluid and blood circulation that were created covertly by the U.S. government and are now wreaking havoc on the population include the following:

1.) M. Fermentans (incognitas strain). The term fermentans reveals fermentation process (i.e.: yeast, molds, fungus, spores, cancer).

2.) M. Penetrans penetrate the cell membrane and invade host cells.

3.) M. Pneumoniae attacks upper respiratory epithelial cells, inflaming them and causing upper respiratory infections and chronic pneumonia.

4.) M. Genitalium (Genitalia) invades urethral tissue and cells in the genital area causing pelvic inflammation and urethritis.

5.) M. Hominus is found in joint tissues in rheumatoid arthritis.

6.) M. Pirum is found in HIV/AIDS as a co-factor accelerating AIDS progression.

7.) M. Salivarium is found in salivary glands and joint tissues in rheumatoid arthritis.

High-level exposure of Mycoplasma to blood, semen, mother's milk or vaccines will lead to AIDS. Low-level exposure to bodily fluids where concentrations are less will contribute to Chronic Fatigue Syndrome, Fibromyalgia, Multiple Sclerosis and other autoimmune diseases. Specific diseases can be targeted by controlling the Mycoplasma concentrations to bodily fluids.

Mycoplasma Thrives On Cholesterol

What makes these designer diseases so elusive is that they're genetically engineered only for DNA replication, transcription and translation with no organelle or cell wall. They have lost their genes for amino acid and fatty acid synthesis, forcing them to invade and steal proteins, sugars and sterols (cholesterol) from healthy neighboring cells to survive.

These cholesterol dependent molecular terrorists immediately take up residency in the individual's genetically pre-disposed weaknesses, (the weak link in the chain of organs or systems), or the path of least resistance. Since Mycoplasma has absolute dependence upon the uptake of preformed sterols (cholesterol structures), they have an affinity toward cell membranes, nerve cells, sex hormone cell factories, glands and the gray matter in brain tissue, where cholesterol sterols are found. Since cholesterol is a co-factor in glandular hormone production, the endocrine balance is drastically altered with cholesterol being pulled out of the cell cycle. That is why pathogenic changes are seen most often during pregnancy, hormone replacement therapy, steroid therapy, menstrual cycles and xeno-estrogens from pesticides, herbicides, meat and dairy.

With the disruption of the hormones, comes an open invitation for the RNA directed HIV to replicate. The newly formed HIV RNA makes its way to the host cell surface where it

connects and breaks away carrying with it a GP 120 protein envelope that was hijacked from the previous cell's surface. It repeats by countering another cell, adheres to the cell surface and accesses the interior genetic material of its new host where the cascade process is repeated.

Unless Mycoplasma penetrates into tissues and cells they cannot exert their terrorist effects. They will lay dormant, sometimes for a decade and often much longer, until physical or emotional trauma, severe stress or vaccine contaminants wake up the sleeping giant to invade and feed on the cell's genetic material like an intracellular parasite, taking the cell hostage until it ruptures and dies.

Mycoplasma Triggering Mechanisms

Mycoplasma is activated and stimulated by initiators (ignition) and potentiators (promoters). The potentiators are the toxic substances in our food, beverages, environment, pharmaceuticals, heavy metals (Mycoplasma amalgams) and chemicals that we bath in, etc. that store in fat cells and weaken our cellular terrain and immune system to allow the initiators (i.e. stress, viruses, bacteria, fungus, parasites, emotional and physical trauma, fear, increased estrogen, anger, etc.) to ignite or light up the gasoline that's poured on the barn – in this case Mycoplasma.

If the gray matter of the brain tissue is the target of Mycoplasma invasion, you'll portray symptoms of Dementia, Alzheimer's, Parkinson's, Creutzfeldt-Jakob disease or memory and cognitive thinking disturbances depending on the area of the brain terrorized.

If the spinal cord is the victim, you will exhibit symptoms of neurodegenerative diseases like Myasthenia Gravis, Guillain-BarrÈ and ALS (Lou Gehrig's disease). If your weakness happens to be the synovial fluid cells in your joints, Rheumatoid Arthritis with severe joint pain will be your disease. In fact, many of the 21st century diseases that were thought to be autoimmune have turned out to be Mycoplasma invasions. I do not believe that God made our immune systems that stupid to attack our own tissues.

If Mycoplasma invades the beta cells in the pancreas that manufactures insulin, you can't regulate blood sugar and Diabetes Mellitus will be your demise. If your cardiac tissues are your weak link, Cardio-Myopathy will manifest. If M. Pneumoniae or M. Fermentans attacks the bronchial lining of the bronchial tubes, the inflammation will trigger asthma and upper respiratory infections. If the myelin sheaths of the nerves are targeted, you will exhibit neurological symptoms of Multiple Sclerosis. If the intestinal lining is penetrated, the damage to the mucosal lining will perpetrate Crohn's disease or leaky gut. In the case of Lou Gehrig's disease, 80% of the patients have detected at least two Mycoplasma strains -M. Penetrans and M. Fermentans.

In ALS, the oligodendritic nerve cells which require cholesterol to synthesize neurosteroids are eaten. If Mycoplasma population is large enough, they gobble up so much cholesterol they diminish neurosteroid synthesis which leads to severe central nervous system malfunctions. Even Lymes disease, which is the fastest growing infectious disease in the U.S. and possibly Europe, with the exception of AIDS, was

found to be linked to both Borrellia and Mycoplasma infections as a co-infection. The Mycoplasma species of M. Pneumoniae and Chlamydia invading the pericardium lining of the heart, seem to be common dominators of myocarditis and pericarditis infections.

Mycoplasma steroid stealing properties also make the energy producing mitochondria leaky by robbing cholesterol lipids that are necessary in mitochondrial membrane integrity. When mitochondria bleed, they cannot generate ATP energy necessary for cell energy and function and nerve cells are the most sensitive to energy deprivation. This explains why Chronic Fatigue and neurological disorders are the main symptoms of the trinity diseases Chronic Fatigue Syndrome (CFS), Fibromyalgia (FMS) and Gulf War illness (GWI). In my opinion, they are the same disease ideology with all three characterizing common symptom traits of chronic fatigue, short term memory loss, low grade fevers, tissue and lymph swelling, joint and muscle pain, stomach and digestive disorders, immuno-suppression and severe systemic chronic infections that invade various organs, tissues and cells including the brain, nervous system and heart. Many virologists and researchers believe that (CFS) is an HIV-1 experiment that went seriously wrong, and in order to cover up their mistakes they allowed it enter the blood supply of the country, in order that many more people infected would keep others experts from tracking it back to the original source of those first infected. Dr. Len Horowitz and others have pointed to Robert Gallo and Dr. Anthony Fauci as the culprits back in the 1980s when they were messing with the SARS2 genome.

Mycoplasma Infection Leads To A Medical Merry-Go-Round

Since the disease pattern of CFS, FMS and GWI affect all major body systems (cardio vascular invasion involving the left ventricle, neurological damage ranging from mild cognitive problems to bi-polar depression or schizophrenia, genitourinary damage presenting incontinence or urethritis, pulmonary symptoms of asthma and the development of fibro masses or nodules in the lungs etc.), this multi-faceted symtomatology is causing a medical merry-go-round in the medical profession starting with a general practitioner who will usually prescribe an anti-inflammatory and a short-term antibiotic regimen for the chronic infection.

Since you also exhibit symptoms of neurological disorders and your general practitioner is not versed in neurology, you will be referred to a neurologist.

After the examination with a neurologist and a couple scripts later for your anxiety and insomnia, you will be pawned off on an endocrinologist for your hormonal imbalance because the neurologist has limited knowledge in endocrinology.

Due to the combined adverse side effects of the antibiotics, anti-inflammatories, analgesics and tranquilizers, you may exhibit signs of gastric disturbances and skin reactions where you will be further drugged by a dermatologist or a gastrologist.

Next in line on the "gist" medical treadmill is the cardiologist who will push a beta-blocker or a diuretic on you for your cardiomyopathies. After seeing ten different disease specialists and spending thousands of dollars on MRI's, CT Scans, X-Rays, surgery,

pharmaceuticals, etc., without finding a solution to your dilemma, you will be labeled psychosomatic, hypochondriac or suffering from severe depression where you will end up with a psychologist. You're now a walking drug store with more complications than what you started with thanks to the combined adverse reactions of the drugs and the limitations of medical doctors who specialize in only 1/10th of the body. What a racket!!!

The government perpetrates non-detectable, virulent, stealth pathogens on the population by way of mosquito vectors (West Nile), primary aerosol, chemtrails, vaccines and possibly the food chain, and then you're put through a medical merry-go-round of disease specialists that know little or nothing about Mycoplasma ideology and do not have access to the necessary diagnostics for detection. The pharmaceutical companies and the warlocks in Washington and Wall Street are laughing all the way to the bank as they profit to hundreds of billions of dollars on humanity's suffering while fulfilling their agenda of population control.

Protocols To Treat Mycoplasma

Since Mycoplasma cannot be successfully treated with the usual short course duration of antibiotics due to their intracellular location, slow proliferation rate and inherent resistance to most antibiotics, the few Mycoplasma experts that specialize in this field are recommending six-months to one year of non-stop treatments using strong antibiotics such as Cipro and Doxycycline. However, if a patient does not want to destroy their body and immune system with Cipro and Doxycycline, a total overhaul of every cell from head to toe using a multi-faceted, non-toxic, holistic treatment approach is absolutely necessary to overcome Mycoplasma infections naturally. This is why vitamins and nutritional supplementation are so important in the therapy. Chronic illness patients must also be weaned off antidepressants and other potential immune suppressing drugs before they can fully recover from their illnesses.

RevolutionRadio.Org reported in April of 2020, **Pentagon Confirms Coronavirus Accidently Got Into Chemtrail Supply Chain, Spraying is Suspended**
Sunday, April 12, 2020 By Paul Martin
AviationDaily.news April 11, 2020

Give Me a Freakin Break!

WASHINGTON, DC – The Pentagon has issued an indefinite hold order to all military air wings and airlines to immediately stop spraying chemtrails until it can be determined how the Covid-19 virus found its way into the chemtrail fluid supply. Remember, this was just last year, 2020!

According to an unofficial Pentagon source, speaking on the condition of anonymity, *"The entire chemtrail program is on hold until we can figure out who coughed onto a batch of chemicals being manufactured at one of our supplier's factories."*

News of this apparent confirmation that chemtrails are real spread online like a virus. FOX News reported that President Trump is considering using the spraying capabilities of the chemtrail program to immunize the entire country from Covid-19 when the vaccine is ready. The skies around my part of the country have never let up in the slightest. From September of 2020 up until the present chemtrail spraying has not declined but actually increased. Think about what that means! Especially when Bill Gates hints of a second virus of greater harm!

It is absolutely mind-boggling that so few people want to believe this after more than 25 years of being sprayed like cock roaches. This is just one of dozens of pictures of converted commercial jet airliners that spray the country as if they were old crop dusters spraying agricultural fields. (Picture of crop duster on page 24) The U.S. Air Force uses C-130's at lower altitudes and refueling tankers along with commercial jet airliners equipped with sprayers at the higher levels above 10,000 feet.

Chemtrails, and "Pathogenic Mycoplasma", US Patent No. 5,242,820,

The important item related to Chemtrails, and also to "Pathogenic Mycoplasma", US Patent No. 5,242,820, was issued September 7, 1993. Dr Lo is listed as the "Inventor" and the American Registry of Pathology, Washington,..."

"I tested positive for this in 2000, one year after I went public about chemtrails in Vancouver Canada with William Thomas - It was a sample I had collected for him of my own accord that landed me in a hospital in three days almost unable to breathe at all. I was there for weeks and barely made it out alive. I insisted that the Dr. at the Peace Arch hospital test me for "micoplasma incognito", and he was shocked I had it as I was never in the "Gulf war". I said, "Pretty soon, we'll all have this." (He seemed a bit scared that I might be right and ran off about his more normal duties, afraid to speak another word about my case.) -Purple Crow."

Name of disease:

Chronic Fatigue Syndrome (CFS)
Myalgic Encephalomyelitis
Fibromyalgia
BRUCELLA MYCOPLASMA
PATHOGENIC MYCOPLASMA
Mycoplasma fermentans (incognitus strain)

Drs. involved in research:

Donald Scott, MA, MSc. (Author of this report - contact into at end)
Professor Garth Nicholson, PhD.
Dr Charles Engel of the NIH.
Dr Maurice Hilleman, chief virologist for the pharmaceutical company Merck, Sharp & Dohme.
Dr Shyh-Ching Lo, senior researcher, Armed Forces Institute of Pathology. (See patent)

Note on testing: The Mycoplasma will only crystallize at 8.1 pH, and the blood has a pH of 7.4 pH.

Legal case evidence:

Doxycycline treatment is discussed in a paper by Mycoplasma expert Professor Garth Nicholson, PhD, of the Institute for Molecular Medicine. Dr Nicholson is involved in a U.S. $8-million Mycoplasma research program funded by the U.S. military and headed by Dr Charles Engel of the NIH. The program is studying Gulf War veterans, 450 of them, because there is evidence to suggest that Gulf War syndrome is another illness (or set of illnesses) caused by Mycoplasma.

Patent on the disease:

"Pathogenic Mycoplasma", **US Patent No. 5,242,820**, issued September 7, 1993. Dr Lo is listed as the "Inventor" and the American Registry of Pathology, Washington, DC, is listed as the "Assignee". It was only a year or two before wide-scale chemtrail spraying began in large scale.

Many people have experienced the “flu like” and “low energy” symptoms of chemtrail as well. The worst part is… they are a totally “man-made health problem!” So the question is “why chemtrails are being used?” I will answer that question at the end. The answer has to do with global depopulation!

Geoengineering is being conducted on a massive scale that only people and groups with nearly unlimited funds could begin to undertake.

Is there such a debilitating condition as “chemtrail flu”? Or can the symptoms build up to the point where you feel the exact same way as if you do have the flu? There is such a malady medically documented and called “multiple chemical sensitivity” (MCS), which often produces flu-like symptoms in most people who are affected by it, especially during its acute stage(s).

Geoengineered Allopathic medicine has a love affair with chemicals because their ‘quiver’ of medicines are made from toxic, man-made chemicals (prescription-pharmaceutical drugs) so, physicians and researchers, who deal with pharmaceuticals, cannot and will not, declare chemicals are the cause of ANY health problems. They are loyal servants of the pharmaceutical industry.

List of chemicals in chemtrails:

Chemtrails, being laden with super-toxic chemicals and heavy metals, plus other ‘ingredients’ like mycotoxins, mold spores, ***mycoplasma***, human white blood cells-A, desiccated human red blood cells, etc., probably can mimic MCS (“multiple chemical sensitivity”) symptoms, especially since everyone has to breathe chemtrail-laden air particles, all while the human immune system is being assaulted by these horrendous toxins.

Some call chemtrail flu “chemtrail syndrome.” *‘GeoEngineeringWatch.org’* publishes a litany of symptoms on its webpage “Chemtrail Syndrome: A Global Pandemic of Epic Proportions:”

Chemtrails and 5G are linked much like chemtrails and vaccines are. They all damage the human immune system which is what keeps you alive. The medical system is pushing very hard, trying to force people into getting vaccines. Bill Gates is a big proponent of population control and pushes “free” vaccines for all. It’s really no secret, they lay it out in the Georgia Guidestones for all to see. Particularly so for the poor. People in Africa are discovering the truth (women being sickened and sterilized by the vaccines, as well as vastly increased autism and cancer rates) and are fatally attacking the doctors attempting to make them take it. They are not doing it for your health!

The term Mycoplasma comes from the Greek ***μυκής, mykes*** (fungus) and ***πλάσμα***, plasma (formed), was first used by Albert Bernhard Frank in 1889 to describe an altered state of plant cell cytoplasm resulting from infiltration by fungus-like microorganisms. Julian Nowak later proposed the genus name Mycoplasma for certain filamentous micro-organisms imagined to have both cellular and acellular stages in their life cycles, which could explain how they were visible with a microscope, but passed through filters impermeable to bacteria.

Everybody has caught the chemical soup in one form or another after 25 years of chemtrail spraying. Everybody has been out in the air during and after chemtrail bombardment - especially lately. You can track this into your homes. I'm not even going to try to explain to you who refuse to see the reality of the chemtrail issue - but realize a while ago they passed a law making this type of 'experimentation' on us legal.

Quote:

PUBLIC LAW 105—85—NOV. 18, 1997: USE OF HUMAN SUBJECTS FOR TESTING OF CHEMICAL OR BIOLOGICAL AGENTS

SEC. 1078. RESTRICTIONS ON THE USE OF HUMAN SUBJECTS FOR TESTING OF CHEMICAL OR BIOLOGICAL AGENTS.

(a) PROHIBITED ACTIVITIES.—The Secretary of Defense may not conduct (directly or by contract)

(1) any test or experiment involving the use of a chemical agent or biological agent on a civilian population; or

(2) any other testing of a chemical agent or biological agent on human subjects.

(b) EXCEPTIONS.—Subject to subsections (c), (d), and (e), the prohibition in subsection (a) does not apply to a test or experiment carried out for any of the following purposes:

(1) Any peaceful purpose that is related to a medical, therapeutic, pharmaceutical, agricultural, industrial, or research activity.

(2) Any purpose that is directly related to protection against toxic chemicals or biological weapons and agents.

(3) Any law enforcement purpose, including any purpose related to riot control.

So section (a) prohibits these cruel and inhumane chemical and biological tests on humans.

Then section (b) says that the prohibitions in section (a) do not apply to tests carried out for virtually any purpose. So section (b) completely negates the prohibitions of section (a).

In Other Words:

The U.S. government can test chemicals and biological agents on humans for nearly any purpose they desire.

The Following Should Also Be Noted

The term "biological agent" as stated above in (a)(1) is defined in (e) as follows:

Quote:

(e) BIOLOGICAL AGENT DEFINED.—In this section, the term ‘‘biological agent’’ means any micro-organism (including bacteria, viruses, fungi, rickettsiac, or protozoa), pathogen, or infectious substance, and any naturally occurring, bioengineered, or synthesized component of any such micro-organism, pathogen, or infectious substance, whatever its origin or method of production, that is capable of causing—

(1) death, disease, or other biological malfunction in a human, an animal, a plant, or another living organism;

(2) deterioration of food, water, equipment, supplies, or materials of any kind; or

(3) deleterious alteration of the environment.

In Other Words:

The U.S. government can test chemicals and biological agents on humans that cause death, biological malfunction, and deleterious alteration of the environment. The term "deleterious alteration of the environment" brings chemtrails to mind.

Read about actual human chemical testing programs currently in operation:

http://herballure.com/chemtrails

Read the full text of this law here. Page 287 contains the above excerpt. The Section is 1078. This is placed in the US Code (UCS) at 50 USC 1520a:

Public Law 105-85

Informed Consent

Some argue that none of this activity can be conducted without "informed consent", as stated in section (c), which reads:

Quote:

(c) INFORMED CONSENT REQUIRED.—The Secretary of Defense

may conduct a test or experiment described in subsection (b) only if informed consent to the testing was obtained from each human subject in advance of the testing on that subject.

Although section (c) seems to provide some protection for us in that it requires us to be notified "in advance" if this "testing" is to take place, in reality, it does not provide any protection at all.

Why not?

Because you've already been "informed in advance" and you've already given your "consent".

Because this "law" is publicly available for everyone to read, you have been "informed". Because you have not contested it (that's what the courts are for), you have provided your "consent".

This law is part of a contract between you and the government. When the terms of a contract are known and uncontested, it's called "acquiescence". Acquiescence essentially means that both parties are in agreement.

Acquiesce: "submit or comply silently or without protest"

So, when this law was published, you were "informed". Because you have not challenged it in court, you have "consented". By your own inaction, you have said, "Sure, go ahead and poison me, even if it causes death. I have no problem with it."

Because this contract meets the judicial requirements of "remedy" and "recourse", it is legally binding.

Judges like to say: *"Ignorance of the law is no excuse".* They say this because you are expected to know all of the "law" because it is publicly available for you to read (despite the fact that this is humanly impossible).

So, in reality, section (c) is legally useless. It does not provide any additional protection, it only "seems" to. Section (c)'s only purpose for being included in this law is deception, nothing more.

Deception

Section (c) of this "law" is very deceptive because most people don't understand the concepts of acquiescence in contract law, therefore, people mistakenly conclude that this "testing" will never happen to them unless they are informed about it.

The powers-that-be play upon public ignorance by inducing people into having a false sense of security. As a result, the public believes this activity could not be occurring because they believe that they would have personally heard about it. This false belief then provides insurance that this law will never be contested in court, and as long as this law remains uncontested, chemtrail spraying will continue unhindered.

The final result is that this craftily-written law has done its job. It has enabled chemtrail spraying to continue without being contested in court. Additionally, this law continually provides legal protection for those doing the spraying. After all, by your inaction you have given them your permission.

When you consider the incredibly dark nature of this deception and when you consider the fact that this law gives your public servants the self-appointed power to kill you, you should then consider what kind of people are running your country, or the world for that matter.

Supplement

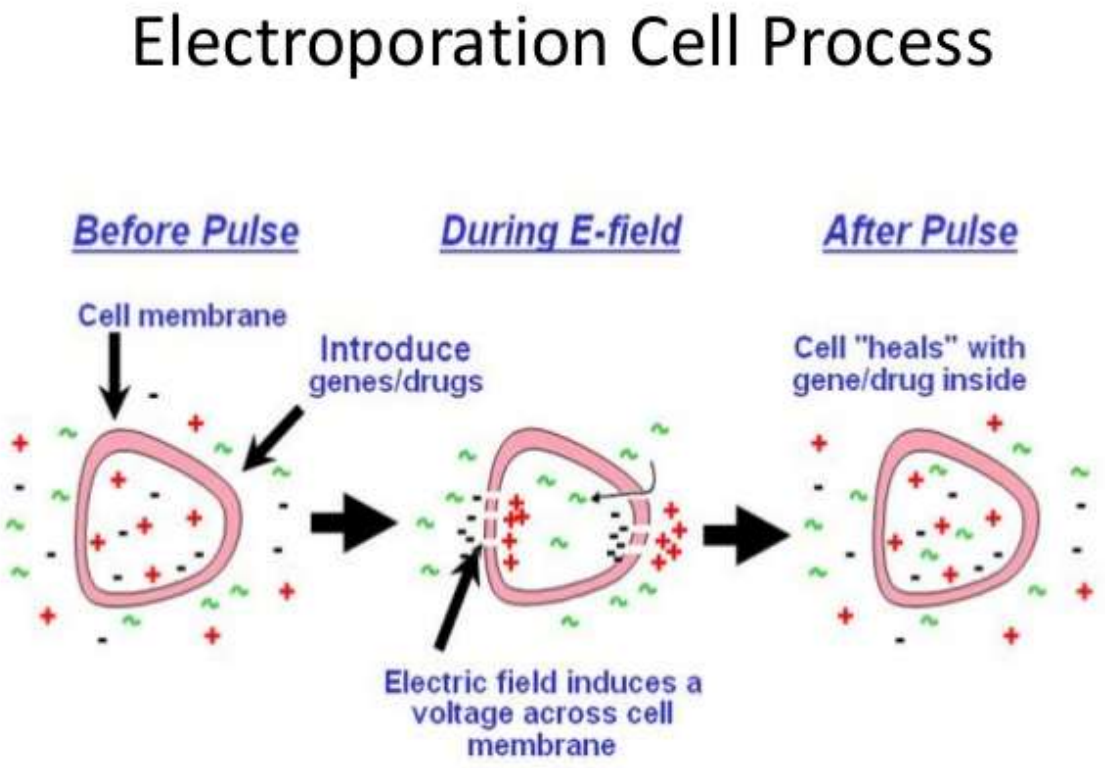
This Public Law in The US Code: Title 50, 1520a

All About the Uniform Commercial Code (UCC)
From http://globalskywatch.com/chemtrails/ubbthreads.php?ubb=showflat&Number=45

After researching, reading, studying documents, since 1996, I was never quite sure what the reason was for chemtrail spraying. It all came into sharp focus when I discovered the connection to 5G wireless EMF. In researching scientific papers, I came

across a report accidentally about Electroporation. I had an idea of what it was referring to and so I began another investigative trail. The definition of Electroporation is:

"the action or process of introducing DNA or chromosomes into bacteria or other cells using a pulse of electricity to briefly open the pores in the cell membranes"



This proves to be one of the terms that people seem unable to grasp its implications and so it is important both in the 5G wireless communications and Mycoplasma. This is not one of those words you would use at the dinner table but it is as real as the food on your plate. Early on, I kept being censored when trying to save documents on the topic, and so when I am censored, it is confirmation I am on to something big.

ThermoFisher Scientific states: The process has been a wonderful means by which to treat many disorders, and there are dozens of electrical devices to do genetic therapy.

Electroporation is based on a simple process. Host cells and selected molecules are suspended in a conductive solution, and an electrical circuit is closed around the mixture. An electrical pulse at an optimized voltage and only lasting a few microseconds to a millisecond is discharged through the cell suspension. This disturbs the phospholipid bilayer of the membrane and results in the formation of temporary pores. The electric potential across the cell membrane simultaneously rises to allow charged

molecules like DNA to be driven across the membrane through the pores in a manner similar to electrophoresis (Shigekawa and Dower, 1988).

The main advantage of electroporation is its applicability for transient and stable transfection of all cell types. Furthermore, because electroporation is easy and rapid, it is able to transfect a large number of cells in a short time once optimum electroporation conditions are determined. The major drawback of electroporation is substantial cell death caused by high voltage pulses and only partially successful membrane repair, requiring the use of greater quantities of cells compared to chemical transfection methods. While more modern instrumentation, such our Neon® Transfection System, overcome high cell mortality by distributing the electrical pulse equally among the cells and maintaining a stable pH throughout the electroporation chamber, optimization of pulse and field strength parameters is still required to balance the electroporation efficiency and cell viability.

As great as the process of Electroporation may seem, it does have a sinister potential. As ThermoFisher Scientific notes there is a drawback. **But for therapy purposes, that same drawback has the ability to be a powerful invisible weapon**. This is what I have referred to as the perfect "Silent Weapon for Quiet Wars."

There is an urgent need for the implementation of digital technologies, including the fifth generation (5G) of wireless communication, for a long-lasting economic growth in the globe. However, it is necessary to consider any possible collateral negative impacts.

Taking the economic aspects of 5G into account, there are many challenges ahead on the path to achieving a 'gigabit society.' They include concerns regarding the creation of sufficient demand for 5G, technical complexity, necessary investment, security and health, safety, and environmental issues.

The introduction of 5G and the associated IoT (Internet of Things) will significantly increase the number of wireless devices and high density of infrastructure that operate in the high-frequency parts of the electromagnetic spectrum, creating a higher mobile data volume per geographic area. The question is if such higher frequencies can have a negative health impact, due to the inescapability of constant exposure of citizens in a 5G environment what is the rush to roll it out so fast.

Non-ionizing radiation, which includes radiation from mobile phones and 5G Wi-Fi, is perceived as harmless in general, due to its lack of potency. However, scientists point out that in the particular case of 5G, the issue is not the potency, but the high level of pulsations or the higher frequencies, to which the entire population is exposed due to the dense network of antennas and simultaneous connections.

Global health organizations like WHO, therefore, have recommended exposure limits for both the general public and occupational exposure in most countries, based on recommendations from ICNIRP or IEEE guidelines. These exposure limits are based on proven effects in the form of thermal damage to the biological materials.

Many recent studies illustrate that continuous wireless radiation seems to have biological effects especially considering the particular characteristics of 5G: the combination of millimeter waves, a higher frequency, the number of transmitters, and the number of connections. Recommending a cautious approach as 5G is an untested technology, they suggest that 5G would affect the health of humans, plants, animals, insects, and microbes.

According to the 2019 study '5G deployment: the State of Play in Europe, USA, and Asia' prepared for the European Parliament, long-term technology research is essential. The study states that the main problem seems to be that it is not currently possible to simulate or measure 5G emissions in the real world accurately. We will look closer and summarize some of the critical risks and effects of 5G on the human body.

1. DNA

Several studies show adverse effects on living organisms induced by different types of human-made Electromagnetic Fields (EMFs). A study on insects (Chironomidae) focused on the DNA effects of giant chromosomes of the salivary glands of the animals with different frequencies (64.1–69.1, 67.2, 68.2 GHz). All frequencies, using power densities <6 mW/cm2, reduced the size of a particular area of the chromosome. This, in turn has led to the expression of specific secretory proteins of the salivary gland. Other studies suggest a variety of effects, the most important being DNA damage, which is linked to cancer, aging, neurodegenerative diseases, reproductive declines, genome instability, etc.

2. Skin
The biggest concern is how 5G will affect human skin. Our body has between two million to four million sweat ducts, which can act as an array of helical antennas when they are exposed to wavelengths, i.e., humans become more conductive. A recent New York study that experimented with 60-GHz waves stated that the penetration depth analyses show that over 90% of the transmitted power is absorbed in the epidermis and dermis layers. This can lead to physical pain to the skin, skin diseases, and cancer.

3. Eyes
A 1994 study found low-level millimeter microwave radiation produced lens opacity in rats, which is linked to cataracts production. The effects of MMW (millimeter waves) were also tested (60 GHz, 475 mW/cm2, 1.898 mW/cm2, 6, 30 min) on rabbit eyes, describing acute thermal injuries of various types. The higher temperature just below the eye surface could induce damage.

An experiment by the Medical Research Institute of Kanazawa Medical University discovered that 60GHz millimeter-wave antennas could cause thermal injuries of varying levels. The thermal effects caused by millimeter waves can penetrate below the surface of the eye. A 2003 Chinese study, meanwhile, has also found damage to the lens epithelial cells of rabbits after only 8 hours of microwave radiation exposure.

4. Heart
A study conducted in Russia found that frequencies in the 53-78GHz range that 5G proposes to use impacted the heart rate variability, indicating stress in rats. Another Russian study on frogs, whose skin was exposed to MMWs, found noticeable heart rate changes (arrhythmias).

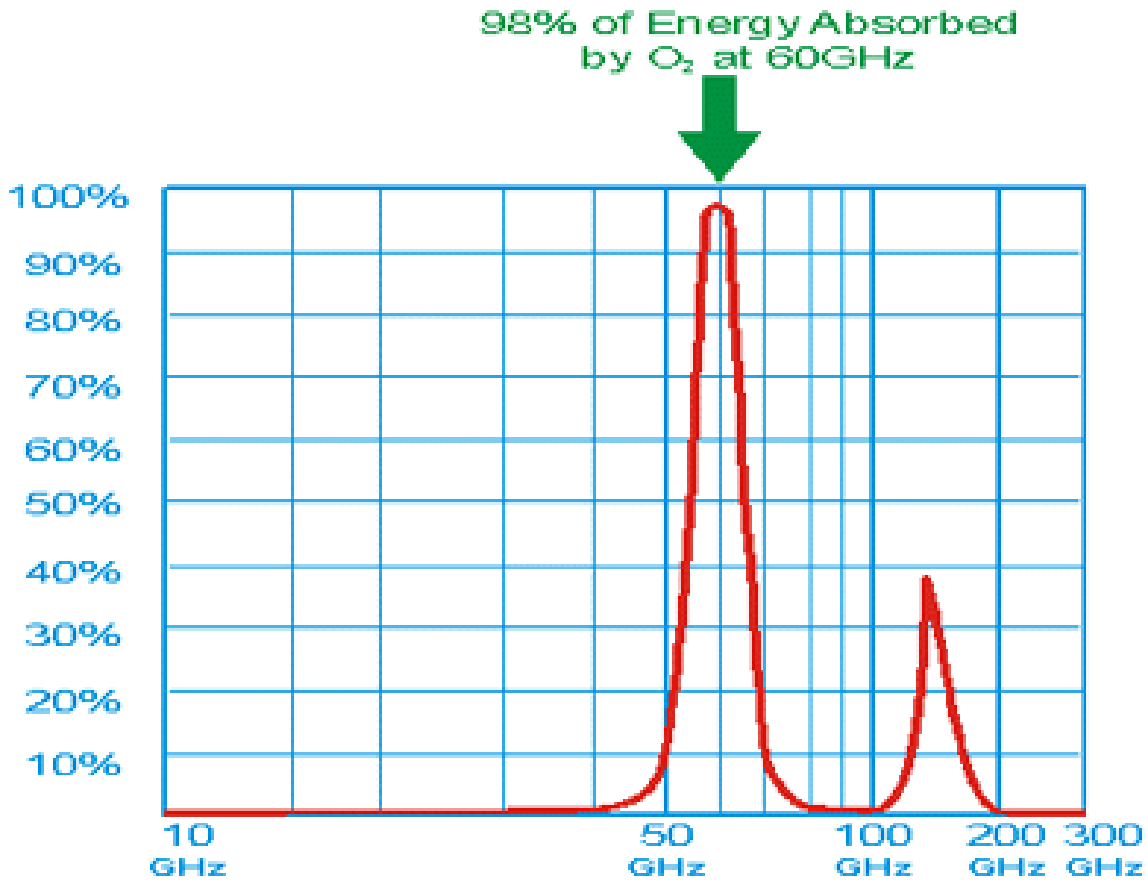
5. Immunity
In 2002, Russian researchers examined the effects of 42HGz microwave radiation exposure on the blood of healthy mice. The study concluded that the exposure of healthy mice to low-intensity EHF EMR has a profound effect on the indices of nonspecific immunity. Another study, addressing the effects of MMW on the immune system of mice or rats, found an activation of the immune system at both the cellular and molecular levels.

A 2016 Armenian study suggested MMW's effects are mainly on water, cell plasma membrane, and the genome. They found that the contact between MMW and bacteria altered their susceptibility to various biologically active chemicals like antibiotics. Notably, the combination of MMW and antibiotics showed that it could lead to antibiotic resistance in bacteria.

6. Cell growth
An Armenian study in 2016 observed MMWs at low intensity, mirroring the future environment produced by 5G. It conducted on E-coli and other bacteria and stated that the waves depressed their growth, changing properties, and activity of the cells. The fear is that it will do the same for human cells.

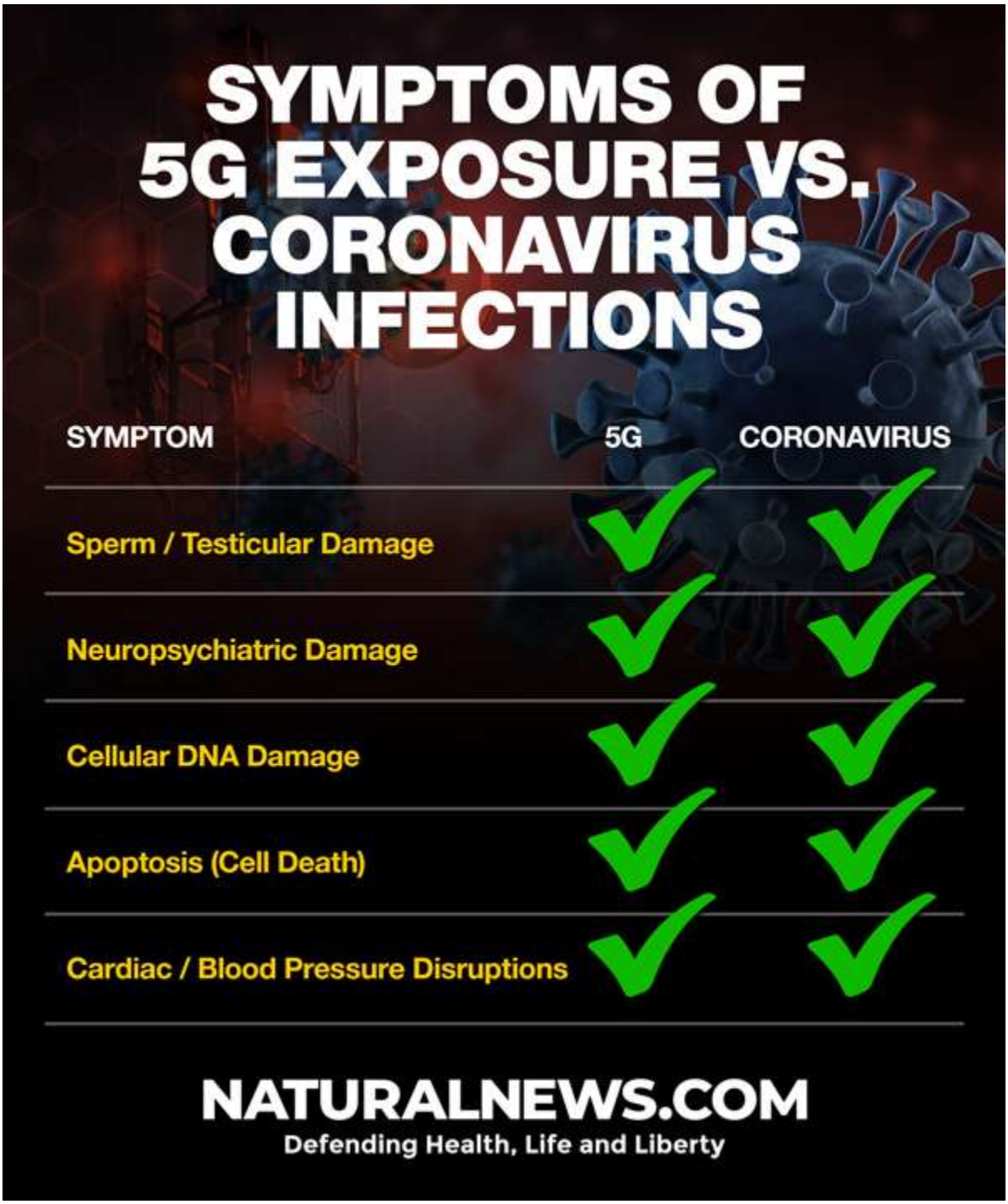
The telecommunications industry states: Let's sum up. Though there are plenty of studies on the potential impacts of 5G on human health, they are not clear-cut. Though there is no known mechanism for non-ionizing radiation to have a biological effect, it does not mean it is safe or that no effect exists. Indeed, researchers continue to conduct studies. But for now, everything we are told about 5G networks tells us that there's no reason to be alarmed. The reverse turns out to be the case.

All of that said, we know from medical scientific tests, when 5G is "modulated" to 60-Gigahertz, it will consume 98% of the oxygen in the lungs of people. Death is instant at 60-GHz! But it does not end there.



The chart on the next page shows a few symptoms of 5G and the so-called or alleged Corona-19 virus. Note the similarities they share. The virus started out as the Wuhan virus, then later named the Corona virus, and changed to Covid-19. As early as December 2019 and January of 2020, I was confident that Covid-19 was 5G EM wireless communications radiation sickness, and the telecommunications industry was the real culprit. I continue to hole that view but with more evidence than a year ago. My reasons were related in articles that I wrote from January through March of 2020. The alleged Covid virus was re-engineered to contain an 18-fragment segment of the HIV-1 genome, and thus making it into a "Bioweapon". I also did five or six articles on how 5G

wireless communication was the nail in the coffin for the cruise industry. The 320 cruise ships around the world were the very first to install 5G wireless communications!



The cruise ship operators equipped cruise ships with 5G EMF for world-wide wireless cell/data/video service during the late summer of 2019. Since last year Carnival Cruise retired and has sent to scrap yards in Turkey and Indonesia 20 cruise ships for scrapping. We can expect that number to increase as smaller cruise operators file for bankruptcy protection.

Salvatore R. Mercogliano, Ph.D. – as recent as a week ago reported:

The recent announcement by the Canadian government to suspend all cruise ship visits until February, 2022 due to COVID-19 will have a detrimental impact on the Alaskan cruise industry.

In March, 2020, the Center for Disease Control issued a No Sail Order for cruise lines and that has remained in place, pending a successful plan to resume operations. Once the CDC releases the cruise ships, sailing to Alaska will be problematic as most of the world's cruise ships are foreign built, foreign flagged, manned with foreign crews, and owned and operated by companies incorporated overseas.

Under the Passenger Vessel Service Act of 1886, while such ships can operate between American ports, they must include a stop at a foreign destination. It is for this reason that Captain Stubing, Julie McCoy, Gopher, Isaac, and the rest of the crew of the British-flagged Pacific Princess sailed out of San Pedro each week for stops in Mexico. With Canada boycotting these vessels, any voyage starting from the American West Coast heading to Alaska will not have a foreign port to stop at, unless they divert to Mexico, necessitating a potentially longer voyage, but still possible.

A critic of the American shipping laws noted, *"This sorry episode has the potential to cause considerable economic harm, but some good could yet come if it provides the needed impetus for long-overdue changes to – if not outright scrapping of – this outdated law."* The repeal of the PVSA would be a massive benefit for Carnival, Royal Caribbean and Norwegian Cruise Lines, the three largest operators of passenger vessels.

In 2019, these three firms controlled 74.6% of the world's cruise market with fleets of 195 ships. Of them, only one was American flagged and operated in the Hawaii cruise market. The headquarters for the three companies are all located in southern Florida, but they are incorporated and pay taxes in Panama, Liberia, and Bermuda. While they do employ many Americans in their shore staffs and are the face of the ships and companies to the public, behind the scenes their backbone is cheap foreign labor.

With the outbreak of COVID, the companies made the calculated gamble to ride out the pandemic and hope that the cruise industry would resume normal operations quickly, even though their vessels were the center of much of the initial outbreaks. Facing no passengers, a shutdown of the international transportation system, and mounting operational costs, the companies performed massive cross-decking operations to place crew members from the same regions on board vessels and then sail them to the mariner's home countries.

After a series of failed starts, some companies do not even have plans to start sailing anytime soon. Virgin Cruises, which was set to embark on their first voyages in early 2020, have never had a paid passenger on their new massive cruise ships. That brings us back to the situation with Alaska and attacks against the PVSA.

Organizations like the CATO Institute have advocated for the repeal of all American maritime cabotage legislation – both the Passenger Vessel Services Act and the Jones Act – regardless of the impact on the nation's national security. The repeal of the former would allow ships of Royal Caribbean, Carnival, and Norwegian to sail directly between US ports, negating the need to stop in foreign ports. The question that should be asked is, what is the impact?

First, there are American cruise companies that operate smaller cruise ships in the trade, such as American Cruise Lines, Alaskan Dream, and UnCruise Adventures. These ships are smaller but meet the requirement of the PVSA and they will face bankruptcy if foreign flagged vessels engage in the American coastal trade. The larger international firms do not have to pay American minimum wages, abide by domestic labor laws, or meet requirements imposed by the nation.

Second, once you allow foreign ships to freely operate in the coastal waters of the U.S., you are essentially allowing foreign companies to operate under their own laws permanently in American territory. Yes, foreign ships are continually in and out of American ports, but they do not remain and conduct business in them on a routine basis.

Finally, you would essentially have floating foreign hotels and that means competing directly against Americans both ashore and afloat.

So, what is the solution? With COVID-19 and vaccines in a state of flux, there is no guarantee that the cruise industry does not resume normal operations until 2022 as predicted by Canada. Currently, cruise ship companies are spending over $1 billion a month to keep ships on standby awaiting the return of passengers. If the cruise companies want the Alaskan trade so much than there is an answer.

The one American vessel among the 194 is MV Pride of America, built at Ingalls Shipyard in Pascagoula, Mississippi, but outfitted in Germany after the company that owned the vessel collapsed. If Royal Caribbean, Carnival, and Norwegian want to get to Alaska so bad, then select a few of their vessels, work with the West Coast and Alaska representatives in Congress and get a waiver to operate, but with the same limitations as Pride of America. In other words, they must reflag to American registry, employ American workers, and be incorporated under an American corporation.

The obvious response is that it is too expensive. After all, when a company can pay a Filipino seafarer less than $900 a month and keep them at sea for 11 months, why would they want to employ Americans. But with COVID, this solution will have great appeal. First, there will be minimal issues in getting both passengers and crewmembers on and off the vessels. Currently, one-third of the 1.2 million seafarers are over their allotted sailing contracts due to restrictions on international travel and access to flights. Second, the companies will start to generate revenue, something that is not being done now.

Finally, the employment of American mariners in the deck and engine crews is a strategic asset for the military as they can also be used on board reserve sealift ships in time of war. As such, the ships could qualify for enrollment in a modified Maritime Security Program, or the mariners employed on board and the company overseeing the ships have tax incentives to lower costs.

While many entities see every opportunity to attack American cabotage, it must be remembered that the United States has global interests. In 1890, Alfred Thayer Mahan in his seminal work *'The Influence of Sea Power Upon History'* identified sea power as the amalgamation of military and commercial shipping. The U. S. must adapt its maritime policies and reform vice repeal of its maritime laws is the best choice going forward.

I share Salvatore R. Mercogliano's report because Covid-19 first occurred on cruise ships in the far western Pacific as of late 2019 and January 2020, chiefly because the cruise ship operators cannot get around the health issues that come with 5G EM cellular communications and risk litigation by "ambulance chaser" law firms. Early law suits were dismissed in the courts as nuisance or frivolous law suits; however, as the facts and evidence begins to come out cruise operators begin to worry or are worried about "class action" law suits.

The data on Covid-19 reported on cruise passengers include the following as of the LATEST UPDATE (February 16, 2021): **TOTAL DEATHS 2,412, TOTAL RECOVERED 61,520. I can tell you that getting this data is becoming more of a challenge since the original outbreak in January, 2020. There is a serious effort afoot to keep this information from the public eye. It took me several hours to find the data indirectly from secondary sources without being censored or blocked by Internet sources. Even the CDC was not showing the deaths on cruise ships, and why so comes back to my point about 5G and what I anticipate will soon become a major "class action" law suit. The importance of this data is underscored by the fact the major re-insurance companies like Lloyds of London and AIG, more than a decade ago stated they would not cover claims due to 5G EMF. What this means is that cruise ship operators will have to "eat" their losses from class action law suits or individual law suits.**

If you have not read the five or six articles I have written on 5G EM and cruise ships, it comes down to the signal strength needed in the northern latitudes to provide uninterrupted cell/data/video/internet services. Those huge domes on cruise ships protect the 5G antenna receivers from the weather. 5G uses a beamed millimeter wave band, and is vulnerable to rain, snow, dust, fog, sea mist, sleet, ice, and even cloud cover. This weak link in 5G is only overcome by modulating the signal strength into the upper Gigahertz range that also damages the body and causes death in those folks with health related issue. The cruise ship operators are hoping that the public will see Covid-19 as a virus and not harmful toxic radiation coming from the large white globes on the upper decks of

the cruise ships. Six can be seen in the picture below of the cruise ship "Radiance of the Seas".

Cruise ships are not the only vessels affected by 5G. Over 15,000 U.S. sailors have experienced 5G EMF health issues since 5G technologies were retrofitted to U.S. Naval vessels. This will help you understand why 5G is a major factor in the coming depopulation agenda. The fact that it is invisible has been a factor in why the propaganda pumping the nonsense about the Corona virus or Covid-19, as part and parcel to distract peoples' focus on a ghost virus!

Definitely since 1996, and perhaps as early as 1993, all living Americans have been sprayed with the Mycoplasma pathogen. In more recent years, they may have been spraying the Brucellosis Mycoplasma. Ingested into the human body through breathing, eating, and drinking, it is believed that there is enough in our body (in a dormant state) waiting for something to activate the cell decomposition process that leads to death. The four factors that the dormant Brucellosis Mycoplasma is watching include 4 body indicators:

1. Oxygen blood level
2. pH level
3. Immune system
4. Stress factor

The combination of Brucellosis Mycoplasma when combined with Electroporation activated by 5G wireless EMF toxic energy is the perfect "Silent Weapon for a Quiet War." 5G can be beamed directly into your sweat pours and damage your DNA and activate the dormant Mycoplasma and attack the DNA cell structure of everyone! A person would have no way of knowing what hit them. They suddenly get sick, and any number of common diseases are activated that result in death. Read this paragraph until you fully understand what I am saying here. This is not simply catching a cold that goes away in a week!

Below are the comments from a You Tube video from an anonymous employee working on mixing chemicals for Evergreen Air, a known CIA airline.

The only logical conclusion that I can draw (Dr. Eric Karlstrom speaking) is that **the U.S. military and intelligence agencies are waging war against domestic populations in slow-kill genocide operations**. Clearly, these agencies, individuals, and associated corporate sponsors, think tanks, etc. are guilty of treason and crimes against humanity.

Narrator: *"Simple observations make it crystal clear from the very start that human beings are the targets of chemtrail operations. The objective of the chemtrail is to make people more susceptible to airborne diseases and less capable of surviving them."*

"The UN Agenda 21 depopulation of 95% of the world by 2030 is now underway. This was signed and approved by 105-120 world leaders at the Rio Brazil Earth Summit in 1992. World government is being implemented and global population is being reduced from over 7.8 billion people to about 500 million."

Who's behind this? For starters, Part 4 of this series told us where Mycoplasma was weaponized by U.S. biological warfare labs over the span of decades. But the DoD labs had help from other BSL4 labs around the world to complete their work. The term BSL4 stands for [Bio Safety Level-4], the highest level for safety/security working with pathogens.

CDC Admits 98 Million Americans Were Given Cancer Virus Via The Polio Shot

The CDC has admitted that between 1955–1963 over 98 million Americans received one or more doses of a polio shot which was contaminated with a cancer-causing virus called Simian (monkey) vacuolating virus 40 (SV40). The CDC quickly took down the page, along with Google, but the site was luckily cached and saved to symbolize this grand admission.

To further confirm this unbelievable admission, Assistant Professor of Pathology at Loyola University in Chicago, Dr. Michele Carbone has been able to independently verify the presence of the SV40 virus in tissue and bone samples from patients who died during that era. He found that 33% of the samples with osteosarcoma bone cancers, 40% of other bone cancers, and 60% of the mesothelioma's lung cancers all contained this obscure virus. This leaves the postulation that upwards of 10–30 million actually contracted and were adversely affected by this virus, to be deadly accurate.

However, there is new reason for alarm now with what has been included in the child-hood vaccines administered since the early 1980s. Each child in order to be eligible to attend school must have 72 vaccines from birth to the age of 18. All of the many vaccines have used animal organs for the making of the many vaccines. They are not totally pure in that Mycoplasma has been found in many if not most of the required vaccines. Dr. Carrie Madej in her interview with Dr. Sherri Tenpenny revealed background information from her work in Central America and here in the U.S., that vaccines are polluted with Mycoplasma. The big question is did it get there by intent or did it get there by accident. Regardless, the issue raises all kinds of question about the vaccine manufacturing process being corrupted with a life-threatening pathogen. Worst case scenario suggests that the vaccines are laced with the invisible–to-the-eye pathogen with the purpose of shortening human life.

If the Mycoplasma entered the vaccine manufacturing process, through the use of animal kidneys and/or fetal cell tissue, then the process for purity is greatly flawed and should be banned and shut down.

Here are just SOME vaccine ingredients.
These are being INJECTED into your kids;

- Formaldehyde/Formalin – Highly toxic systematic poison and carcinogen.
- Betapropiolactone – Toxic chemical and carcinogen. May cause death/permanent injury after very short exposure to small quantities. Corrosive chemical.
- Hexadecyltrimethylammonium bromide – May cause damage to the liver, cardiovascular system, and central nervous system. May cause reproductive effects and birth defects.
- Aluminum hydroxide, aluminum phosphate, and aluminum salts – Neurotoxin. Carries risk for long term brain inflammation/swelling, neurological disorders, autoimmune disease, Alzheimer's, dementia, and autism. It penetrates the brain where it persists indefinitely.
- Thimerosal (mercury) – Neurotoxin. Induces cellular damage, reduces oxidation-reduction activity, cellular degeneration, and cell death. Linked to neurological disorders, Alzheimer's, dementia, and autism.
- Polysorbate 80 & 20 – Trespasses the Blood-Brain Barrier and carries with it aluminum, thimerosal, and viruses; allowing it to enter the brain.
- Glutaraldehyde – Toxic chemical used as a disinfectant for heat sensitive medical equipment.

- Fetal Bovine Serum – Harvested from bovine (cow) fetuses taken from pregnant cows before slaughter.
- Human Diploid Fibroblast Cells – aborted fetal cells. Foreign DNA has the ability to interact with our own.
- African Green Monkey Kidney Cells – Can carry the SV-40 cancer-causing virus that has already tainted about 30 million Americans.
- Acetone – Can cause kidney, liver, and nerve damage.
- E.Coli – Yes, you read that right.
- DNA from porcine (pig) Circovirus type-1
- Human embryonic lung cell cultures (from aborted fetuses)

You can view all of these ingredients on the CDCs website. I encourage everyone to do their own research. Look up the MSDS on these chemicals. Read the thousands of peer reviewed studies that have evaluated the biological consequences these chemicals can have on the body, especially when being injected.

The CDC is not a government agency, rather it is a public (for profit) corporation and therefore its loyalty is first and foremost to its shareholders, and not the American public. Their record regarding public safety is so tarnished that they should be prosecuted for crimes against humanity. The CDC holds 27 patents from which they collect royalties in the billions yearly through the required use of those vaccines being given to the American children. The NIAIAD and NIH are just as corrupt when it comes to the protection of the American public.

Below is the information on "The Fauci/COVID-19 Dossier" just posted on February 17th:

We are thrilled that the first step of the **synopsis discovery material** is **completed and now available** for **download** to expose the TRUTH and provide the evidence on Fauci's Crimes Against Humanity.

You can download that doc HERE at Dr. David Martins' page.

Below on the next page is the CDC document about how cancer cells were introduced into the Polio vaccines of the 1950s and 1960s. This page was removed few years ago for the obvious reasons. As a reminder, this is not the only time vaccines were found to have been polluted by cancer cells. In another article I wrote on the mysterious death of

physicians and scientists involved the presence of Nagalase in the blood of children with Autism. The late Dr. Bradstreet had discovered the presence of the cancer protein Nagalase in their blood stream. This protein does not occur naturally!

Cancer, Simian Virus 40 (SV40), and Polio Vaccine Fact Sheet

- SV40 is a virus found in some species of monkey.
- SV40 was discovered in 1960. Soon afterward, the virus was found in **polio** vaccine.
- More than 98 million Americans received one or more doses of **polio** vaccine from 1955 to 1963 when a proportion of vaccine was contaminated with SV40; it has been estimated that 10–30 million Americans could have received an SV40 contaminated dose of vaccine.
- SV40 virus has been found in certain types of **cancer** in humans, but it has not been determined that SV40 causes these cancers.
- The majority of scientific evidence suggests that SV40-contaminated vaccine did not cause **cancer**; however, some research results are conflicting and more studies are needed.
- **Polio** vaccines being used today do not contain SV40. All of the current evidence indicates that **polio** vaccines have been free of SV40 since 1963.

Additional Facts

- In the 1950s, rhesus monkey kidney cells, which contain SV40 if the animal is infected, were used in preparing **polio** vaccines. Because SV40 was not discovered until 1960, no one was aware in the 1950s that **polio** vaccine could be contaminated.
- SV40 was found in the injected form of the **polio** vaccine (IPV), not the kind given by mouth (OPV).
- Not all doses of IPV were contaminated. It has been estimated that 10–30 million people actually received a vaccine that contained SV40.
- Some evidence suggests that receipt of SV40-contaminated **polio** vaccine may increase risk of **cancer**. However, the majority of studies done in the U.S. and Europe which compare persons who received SV40-contaminated **polio** vaccine with those who did not have shown no causal relationship between receipt of SV40-contaminated **polio** vaccine and **cancer**.

More Information

- For in-depth information about SV40, **polio** vaccine, and **cancer**, see our frequently asked questions.
- National Immunization Hotline:
  English 1 (800) 232-2522
  Spanish 1 (800) 232-0233

Page last modified: October 22, 2007
Content source: Immunization Safety Office

The American people have been poisoned with pathogens used from animals. The SV-40 virus came from monkey kidneys used to make the polio vaccines. However, polio was not caused by a germ or pathogenic sickness. The real cause of polio was not a virus, but rather using the chemical DDT to kill mosquitos and their larva during WWII in the Pacific Islands.

My research indicates suggests SARS2-CoV-19 is the result of failed experiments with the HIV-1 genome. There appears to be a multi-decade cover-up that has been underway to hide the evidence trail by infecting as much of the population possible with the Covid-19 virus. This further suggests that all childhood vaccines are corrupted with pathogens inherited in the vaccine making process. Simply put, the vaccines were never purified for administering to school children as far back as 1972. Even that date is significant since the Club of Rome was looking for ways of reducing the population beginning in 1972..

In a recent interview between Dr. Sherri Tenpenny and Dr. Carrie Madej, I learned that Dr. Carrie Madej learned that Mycoplasma fragments have been in all children's vaccines dating back to 1972. You can hear the interview at the link below:
https://brandnewtube.com/watch/dr-carrie-madej-discussion-with-dr-sherri-tenpenny_Hrpii3Bjcfjja3Q.html

This video is so important that I have listened to it six times. After listening to it the first time on Sunday, February 14th, 2021, my intuition is that Mycoplasma has been the "gift" that keeps on giving and because of its weaponized nature and difficulty to see in an electron microscope unless one was looking for it, was easily missed. Dr. Carrie Madej's other videos on You Tube have been removed and she has been censored along with Dr. Judy Mikovits, as part of the larger movement to silence truth within the anti-vaccine movement and any exposure of the corruption at the CDC, NIH, NIAID, and WHO. These government agencies are replete with corruption and fraud.

We know that none of the agencies noted have ever "isolated" the Covid-19 virus using their own "gold" standard known as the Koch Postulates. Even the Chinese government have not isolated the Covid-19 scam.

The Chinese scientist's name is Dr. Wu Zunyou. He is the chief epidemiologist at the Chinese Center for Disease Control and Prevention. *'NBC News'* reporter, Janis Mackey Frayer, conducted a brief interview with Dr. Zunyou on January 23, 2021.

The Chinese are key in the Corona virus outbreak we are told, but evidence suggests something different.

Frayer mentioned that "samples" were taken, a year ago, at the beginning of the "outbreak," from the infamous Huanan market in Wuhan. She then asked Dr. Zunyou, *"Why has the data not been shared?"*

He answered, *"They didn't isolate the virus."* He was referring to tissue samples taken from animals sold at the market.

That's an interesting answer. Why have researchers and scientists claimed SARS-CoV-2 crossed species from animals to humans at that market, when no one ever isolated the virus from samples taken at the market?

The next, and far bigger question, is: When Dr. Zunyou says, "They didn't isolate the virus," is he ONLY referring to tissue samples taken from animals at the market? Or does his answer also apply to the first 40 human cases of pneumonia in Wuhan, which were claimed to result from a newly discovered coronavirus?

Jon Rappoport said, *"I've queried Dr. Zunyou. We'll see if he replies."*

"I've spent the last year demonstrating that no one has proved SARS-CoV-2 exists. I've also explained why people are dying, why the PCR test is meaningless and useless and deceptive, why the case and death numbers are meaningless, and why the con is being foisted on the global population."

"Since the early days of the "pandemic," many scientists authoring papers have claimed they isolated the virus. *"However, I've explained how, in Orwellian fashion, they torture and twist and reverse the meaning of the word, "isolate," so it signifies the opposite of what it ACTUALLY means."*

"I've also explained that the so-called genetic sequencing of the virus is another con. It isn't the result of looking through some sort of cosmic microscope at genes lined up like cars in a supermarket parking lot. It's a process using a computer program to stitch together DATA - PRESUMED pieces of a virus - based on speculation, bias, pretension, and sheer hype. Rather than science."

Based on no evidence of a new virus, the Chinese regime locked down 50 million citizens. Fairly soon, they lifted the lockdowns and pushed their economy into high gear again. The other possibility was that the CCP were more interested in the effects of 5G wireless technologies on its own people as a way of depopulation.

They provided the model of lockdowns to the West, where elite players - Bill Gates, the CDC, the World Health Organization, and the United Nations - praised the Chinese regime and adopted their lockdown strategy; thus wrecking national economies and hundreds of millions of lives.

"This is called a COVERT OPERATION. It had nothing to do with science. The operation was based on selling A STORY ABOUT A VIRUS." Said Jon Rappoport.

For literate people, the word "isolate" indicates: a thing is separated from all other material surrounding it. Very simple. However, for virologists, the word means: *"We have the virus in a soup in a dish in the lab."* UN-ISOLATED.

Virologists' state: *"The soup consists of the virus, plus human and animal cells, plus (toxic) drugs and chemicals, plus all sorts of other genetic material."*

They know the virus is in the soup, because some of the cells are dying. The virus must be killing the cells.

WRONG. The toxic drugs and chemicals could certainly be killing the cells. The cells are also being starved of vital nutrients, and that fact alone could account for cell-death.

There is no isolation. There is no proof a virus is in the soup. There is no proof a virus is killing cells. There is no proof the virus exists. The people who know are keeping the people in the dark by assumptions, and mis-information. They get away with their crimes hoping that people will buy into their lies and go on about their business. Jon Rappoport is an educated medical journalist and has been exposing the fakes and frauds at the CDC, NIAID, NIH, and WHO for years.

Back to my point about Mycoplasma and what lies ahead for humanity. The global powers at be are intent on following through with their global depopulation agenda. The test for the virus and the vaccine itself was the first stage of a two-phase genocide program. Drs. Madej, Tenpenny, and Mikovits are in agreement here that this so-called vaccine will kill 55 million Americans over the next five years. The CDC even now is playing footsie with the fatality numbers. What they report and what is in their data base indicates serious discrepancies.

The perfect answer to the *"Silent Weapons for Quiet Wars"* is "Mycoplasma" electroporated by 5G EM wireless communication into your sweat glands. With the inserted nano-particles serving as a beacon, those who manage to survive the Pfizer or Moderna gene "delivery" system can later be executed simply by turning up the energy level of 5G wireless to, for example, 60-GHz. People should have gotten the message from *'Star Wars'* when William Shatner as Captain Kirk, said: *"Beam me up Scotty!"* Better yet, when the late James Traficant, a U.S. Congressman from Youngstown, Ohio who used the catchphrase during his service (1985–2002) in the U.S. House of Representatives from 1997 to 2002.

This was and is all about Genocide or global depopulation! We have to disappear and if you believe in the Pre-Tribulation Rapture, God will honor the global elite's desire. We can expect to be gone any time within the month based upon the video evidence shared in Blessed Hope #51.

Blessings, and keep looking up!

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