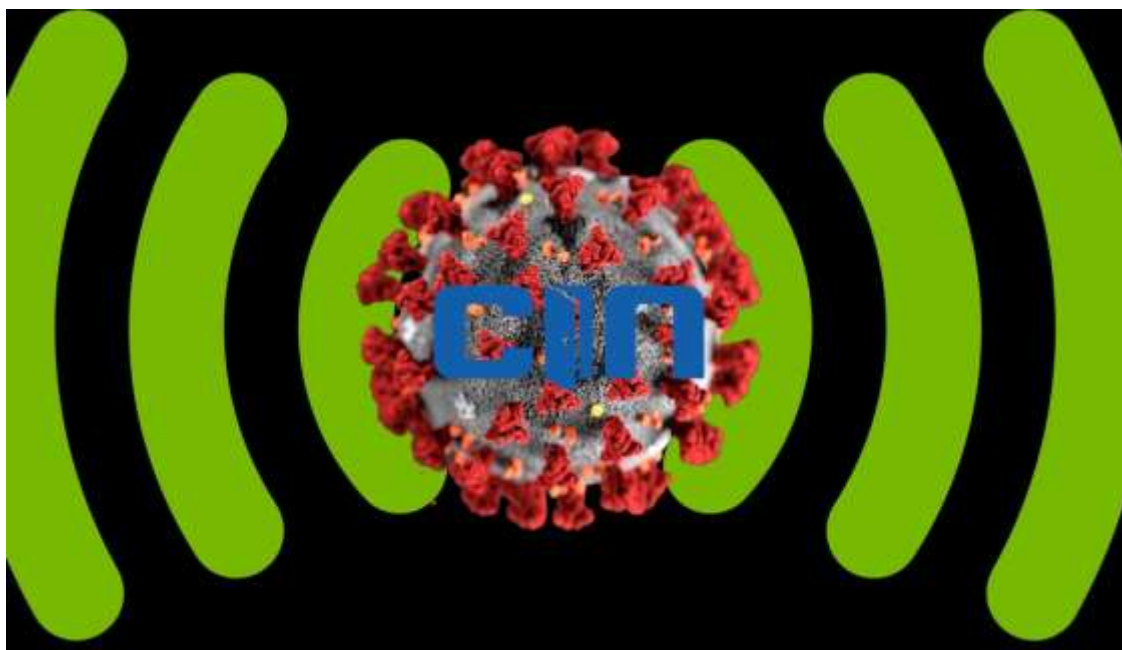


Viral mRNA Vaccine Can Be Activated By 5G!



What I am about to share in this article confirms what I have been saying about the danger of the **5G** wireless energy spectrum has been right-on from the very beginning. Covid or the Coronavirus has been a manufactured story designed to cover for the health effects originating from latent wireless EMR/EMF radiation poisoning. It was to my knowledge first reported by Russian pathologists who did autopsies on victims of what was called Covid-19. The World Health Organization was the first to ban nations from doing autopsy of any so-called Covid-19 victim. They did at least a dozen from what I recall more than a year ago.

CIN recently published an article on a postmortem examination of a vaccinated patient which showed **viral RNA in almost all organs examined**. Vaccine manufacturers, Governments, Medical authorities and Media have informed us that the mRNA in the vaccine is destroyed within the cell after it codes for “Spike Proteins”. **Why then is viral RNA still there and why was it in every single organ despite being told it would target the immune system only? Will the viral mRNA continue to make spike proteins and if so what will trigger this process?**

[The First Victim of the COVID-19 Vaccine: Patient dies from Antibody-Dependent Enhancement!](#)

An international team of researchers studying COVID-19 has made a startling and pivotal discovery: The virus itself appears to cause the body to make weapons to attack

its own tissues. This finding can explain the puzzling collection of symptoms that come with infection such as inflammatory syndromes and suggests the virus may be directly causing autoimmunity! We propose that the vaccine which contains viral genetic material, also has the capacity to cause an autoimmune dysfunction or ADE (Antibody Dependent Enhancement) which can activate the immune system to attack the body itself. **But what triggers this activation?** Our readers wanted to know if **5G** was the activation trigger that could lead to this vaccine-dependent-autoimmunity reaction resulting in serious illness, so we followed the research!

The COVID Virus May Prompt the Body to Attack Itself

By Brenda Goodman, MA



Jan. 29, 2021 -- An international team of researchers studying COVID-19 has made a startling and pivotal discovery: The virus appears to cause the body to make weapons to attack its own tissues.

<https://www.webmd.com/lung/news/20210129/covid-virus-may-prompt-body-to-attack-itself>

National Microbiology Lab Says SARS-CoV-2 Deactivated Using Electromagnetic Radiation: Truth or Chinese Propaganda?

Can SARS CoV-2 be activated using Gamma radiation the type found in 5G? According to the Canadian National Microbiology Lab (the lab that is being accused of working in “co-operation” with the Chinese Military) they determined that you can **deactivate SARS-CoV-2** with gamma radiation. Considering the ongoing “China Spy Gate” situation at Canada’s BSL-4 laboratory we decided to investigate further. **Was this study all propaganda endorsed by the Communist State of China? After all, the makers of 5G, Huawei, drones, and mass surveillance has set its hooks onto Canada?**

In Vitro Inactivation of SARS-CoV-2 Using Gamma Radiation

June 2020

DOI:[10.1177/1535676020934242](https://doi.org/10.1177/1535676020934242)

Authors:



Anders Leung



Kaylie Tran



Jonathan Audet
University of Manitoba



Sherisse Lavineway

<https://www.researchgate.net/publication/342570235> In Vitro Inactivation of SARS-CoV-2 Using Gamma Radiation

And who is Anders Leung? Apparently he was the lead author in this paper and also the main technician and curator of pathogens at the NML. According to media reports, his efforts to supply China with deadly pathogens were acknowledged by the Chinese state itself. **Did he conspire with Dr. Xiangguo Qiu to send pathogenic organisms to China? He definitely knew about the shipment?**

<http://www.goc411.ca/en/113311/Anders-Leung>

“We would like to express our sincere gratitude to you all for your continuous support, especially Dr. Qiu and Anders! Thanks a lot!! Looking forward to our further cooperation in the future,” said the heavily redacted email, which does not provide the name of the sender.

Regardless, what they did find in this study was that large amounts of radiation could most definitely deactivate the SARS-CoV-2 virus. **But can smaller amounts of radiofrequency radiation such as those emitted by 5G towers or cell phones activate the virus?** We think so!

While not mentioned in this article, there are connections to Dr. Charles Lieber, who was the only person every arrested or prosecuted for working with the Chinese program on nanoparticles. Dr. Lieber was prosecuted form not reporting his income from the Chinese on his tax returns and also for lying to the FBI. We still do not know the results of his conviction and sentencing to prison. That conviction was made in early December of 2021. Six months later secrecy around Dr. Lieber’s activities has been deeped-sixed in the media. Dr. Lieber is just the tip of the iceberg known as nanoparticle research. This should not be a surprise since his sponsors are familiar names, i.e. DARPA, the Office of Naval Intelligence (ONI), and the Air Force Office of Research. You can read about Dr. Lieber in:

[5G causes COVID and Other Reasons to Turn Off the Internet](#)

Canadian scientist sent deadly viruses to Wuhan lab months before RCMP asked to investigate



Documents show concerns about Ebola shipment from National Microbiology Lab, no relation to COVID-19



Karen Pauls · CBC News · Posted: Jun 14, 2020 3:00 AM CT | Last Updated: June 15, 2020



<https://www.cbc.ca/news/canada/manitoba/canadian-scientist-sent-deadly-viruses-to-wuhan-lab-months-before-rcmp-asked-to-investigate-1.5609582>

[China's Still In the Loop At Canada's BSL4. Accused "spy" Dr. Qiu STILL working on pathogens and publishing papers.](#)

[USA, Canada & China collaborated to bring us COVID19. No spying. No stealing. All administered by the WHO... and Dr. Tam was complicit!](#)

Can SARS-CoV-2 be activated by 5G radiofrequencies? Yes!

In this report researchers compiled data on the effects of 5G radiofrequency from wireless communication systems on SARS-CoV-2. A Similar symptomology is presented in those who have taken the vaccine containing SARS-CoV-2 viral mRNA. We propose that the vaccine or the spike proteins that it produces are also altered by 5G radiofrequency radiation. Here is their summary:

COVID-19 surfaced in Wuhan, China shortly after the implementation of city-wide 5G (fifth generation of wireless radiation), and spread globally, demonstrating a statistical correlation to international communities with 5G antennas installed. In this study, we examined the peer reviewed scientific literature on the detrimental bio effects of radiofrequency radiation (RFR) and identified several ways in which RFR may be contributing to COVID-19 as a toxic environmental cofactor. We conclude that radiofrequency radiation and, in particular, 5G, which involves 4G infrastructure densification, has exacerbated COVID-19 prevalence and severity by **weakening host immunity and increasing SARS-CoV-2 virulence** by (1) causing morphologic changes in erythrocytes including echinocyte and rouleaux formation that may be

contributing to **hypercoagulation**; (2) impairing microcirculation and reducing erythrocyte and hemoglobin levels exacerbating hypoxia; (3) **amplifying immune system dysfunction, including immunosuppression, autoimmunity, and hyperinflammation**; (4) **increasing cellular oxidative stress** and the production of free radicals exacerbating **vascular injury and organ damage**; (5) augmenting intracellular Ca²⁺ essential for viral entry, replication, and release, in addition to **promoting proinflammatory pathways**; and (6) **worsening heart arrhythmias and cardiac disorders**. In short, RFR is a ubiquitous environmental stressor that contributes to adverse health outcomes of COVID-19. We invoke the Precautionary Principle and strongly recommend a moratorium on **5G** wireless infrastructure at this crucial time to help mitigate the pandemic, and to preserve public health until governmental safety standards for RFR exposure based on current and future research are defined and employed.

FYI: The effects of **5G** radiofrequencies are cumulative. **What does this mean?** Like x-rays the radioactivity remains in your body, it doesn't dissipate over time which means once you've reached the maximum load your body can handle... its over! **FYI:** Verizon would like to replace your phone with their **5G** model... and it's free!

Original Research Paper

Evidence for a Connection between COVID-19 and Exposure to Radiofrequency Radiation from Wireless Telecommunications Including Microwaves and Millimeter Waves

Beverly Rubik¹ and Robert R. Brown²

¹College of Integrative Medicine & Health Sciences, Saybrook University, Pasadena CA; Institute for Frontier Science, Oakland, CA, USA

²Department of Radiology, Hamot Hospital, University of Pittsburgh Medical Center, Erie, PA; Radiology Partners, Phoenix, AZ, USA

Article history

Received:

Revised:

Accepted:

*Corresponding Author:

Beverly Rubik
Institute for Frontier Science
Oakland, CA, USA
Email: brubik@earthlink.net

Abstract: COVID-19 public health policy has focused on the SARS-CoV-2 virus and its effects on human health while environmental factors have been largely ignored. In considering the epidemiological triad (agent-host-environment) applicable to all disease, we investigated a possible environmental factor in the COVID-19 pandemic: ambient radiofrequency radiation from wireless communication systems including microwaves and millimeter waves. COVID-19 surfaced in Wuhan, China shortly after the implementation of city-wide 5G (fifth generation of wireless radiation), and spread globally, demonstrating a statistical correlation to international communities with 5G antennas installed. In this study, we examined the peer-reviewed scientific literature on the detrimental bioeffects of radiofrequency radiation (RFR) and identified several ways in which RFR may be contributing to COVID-19 as a toxic environmental cofactor. We conclude that RFR and, in particular, 5G, which involves 4G infrastructure densification, has exacerbated COVID-19 prevalence and severity by weakening host immunity and increasing SARS-CoV-2 virulence by (1) causing morphologic changes in erythrocytes including echinocyte and rouleaux formation that may be contributing to hypercoagulation; (2) impairing microcirculation and reducing erythrocyte and hemoglobin levels exacerbating hypoxia; (3) amplifying immune system dysfunction, including immunosuppression, autoimmunity, and hyperinflammation; (4) increasing cellular oxidative stress and the production of free radicals exacerbating vascular injury and organ damage; (5) augmenting intracellular Ca^{2+} essential for viral entry, replication, and release, in addition to promoting pro-inflammatory pathways; and (6) worsening heart arrhythmias and cardiac disorders. In short, RFR is a ubiquitous environmental stressor that contributes to adverse health outcomes of COVID-19. We invoke the Precautionary Principle and strongly recommend a moratorium on 5G wireless infrastructure at this crucial time to help mitigate the pandemic, and to preserve public health until governmental safety standards for RFR exposure based on current and future research are defined and employed.

Can dormant virus be activated by Radiofrequencies? Yes!

Several years ago a man by the name of John Coleman tried to tell the world that the NWO along with the Royal family had developed a scientific method that could

essentially turn virus on or off inside cells using radiofrequencies. The scientist and the research itself disappeared and Coleman was called a conspiracy theorist!

Today, scientific research is showing that dormant virus that resides in your body from past infections can be triggered by radiofrequencies. These viruses can be found in your intestines where they co-exist with the bacterial microbiome, fungi and other microbial communities that constitute the microbiome. Viruses can also be found on all human mucosal surfaces, and frequently live in other cell types. It is estimated that each healthy human individual harbors more than ten permanent viral infections that drive continuous activation of the immune system including herpesviruses, polyomaviruses, adenoviruses, and papillomaviruses and, for many people, additional viruses such as hepatitis B virus, hepatitis C virus, and HIV. New research is showing the **SARS-CoV-2** virus can also remain dormant in the body post-infection. **Can Coronavirus then be re-activated using radiofrequencies? And would radiofrequency reactivation also work on viral RNA incorporated into body cells post-vaccination?**

In a study using human lymphoid cells containing dormant Epstein-Bar Virus (a human herpes virus that causes Mononucleosis) exposure to a 50 Hz electromagnetic field induced the activation of the Epstein-Barr Virus genome. Exposure to 50 Hz electromagnetic field resulted in an increased number of cells expressing the virus antigens (18% activation of the Epstein-Barr Virus genome compared to 4% in the control cells). This finding provides evidence that viral DNA can be modulated by radiofrequencies.

Furthermore, more recent studies are also showing that mobile phone exposure can also induce the Epstein-Bar Virus genome! The same would also apply to SARS-CoV-2 viral mRNA found inside vaccines that has now been incorporated within several human body cells in vaccinated individuals!

> J Environ Pathol Toxicol Oncol, 1997;16(2-3):205-7.

Exposure to a 50 Hz electromagnetic field induces activation of the Epstein-Barr virus genome in latently infected human lymphoid cells

S Grimaldi¹, E Pasquali, L Barbatano, A Lisi, N Santoro, A Serafino, D Pozzi

Affiliations + expand

PMID: 9276003

Abstract

The EBV genome in latently infected lymphoid cells offers an opportunity to follow effects on the transcriptional and translational product clearly distinguishable from those of the host cell genome. Exposure of Akata cells, a human lymphoid cell line latently infected by the EBV genome, to a 50 Hz EMF resulted in an increased number of cells expressing the virus early antigens. This finding provides additional evidence that DNA can be modulated by a magnetic field.

<https://pubmed.ncbi.nlm.nih.gov/9276003/>

Medical/biological study (experimental study)

The induction of Epstein-Barr Virus early antigen expression in Raji cells by GSM mobile phone radiation.

[med/bio](#)

By: Liu Y, Wang ML, Zhong RG, Ma XM, Wang Q, Zeng Y

Published in: Biomed Environ Sci 2013; 26 (1): 76-78

Full-text [↗](#), Journal [↗](#), PubMed [↗](#), doi:10.3967/0895-3988.2013.01.010 [↗](#)

Download citation in RIS format

Aim of study (acc. to editor)

To study the effect of mobile phone exposure on the EBV-EA gene expression (EBV-EA gene has been identified as a cancer-related gene).

Background/further details

<https://www.emf-portal.org/en/article/21619>

Doctor's Note: Can the coronavirus reactivate?

New research suggests the coronavirus may be able to lie dormant and later 'reawaken'. A doctor examines the evidence.



<https://www.aljazeera.com/features/2020/4/12/doctors-note-can-the-coronavirus-reactivate>

[Confidential Pfizer Document Exposed! Vaccine is Toxic!](#)

CYTOKINE STORM, VIRUS ACTIVATION, AND ELECTROMAGNETIC RADIATION

<https://nakedfoodmagazine.com/cytokine-storm-virus-activation-electromagnetic-radiation/>

Can viral RNA inside body cells of vaccinated individuals be activated by 5G? Yes!

PROBLEM: The Postmortem study of the “Vaccinated Patient” revealed: viral RNA in every body cell (from the mRNA vaccine), spike protein present in circulation (produced from the viral RNA inside the cell) but there was no evidence of a SARS-CoV-2 virus. So what caused the COVID-19-Like disease in that patient if there wasn’t a virus present?

THEORY: First off, if you are going to trigger anything in the body to activate the immune system you would have to activate the **viral RNA (from the mRNA vaccine)** within body cells. **This genetic material is responsible for disease transmission and hence the functional unit of the SARS-CoV-2 virus itself.**

We propose that the viral RNA within the cell itself is activated by **5G** which would then start the production of spike proteins within the cells. These spike proteins would in turn embed themselves on the cell membrane and in doing so mimic the SARS-CoV-2 virus which would then launch an immune response. The immune system would then start attacking healthy cells of the body since they now resemble the virus of an infected SARS-CoV-2 person...**EXCEPT THERE IS NO VIRUS!** Yes, viral RNA produces spike proteins, but these spike proteins are the products of viral RNA activation via **5G**... **NOT THE ACTIVATOR!**

We propose that the viral RNA within the cell itself is activated by **5G** to resulting in the production of spike proteins that would in turn embed themselves on the cell membrane. In doing so they will trigger the immune system to start attacking healthy cells of the body thereby triggering another immune reaction post-vaccination resembling that of an infected SARS-CoV-2 infected person...**EXCEPT THERE IS NO VIRUS!**

BACKGROUND INFORMATION: Studies are showing the spike proteins are only found for up to 15 days post vaccination and then they are completely gone in fully vaccinated individuals. This online media hysteria is the result of a very prominent

immunologist, **Dr. Byram Bridle** miscommunicating results from a study that looked at “spike protein” production in healthcare workers post-vaccination. In a radio show interview that he gave, Bridle stated:

“Thirteen young healthcare professionals who had received the Moderna vaccine, a new type of messenger RNA-based vaccine that we use in Canada, were tested and confirmed. They found spike protein in the circulation, and so in the blood of 11 of the 13 health professionals who received the vaccine. What it means: We have long known that spike protein is a pathogenic protein. It’s a toxin. It can harm our body if it gets into circulation. Now we have clear evidence that vaccines that are designed to stimulate our bodies, muscles, or cells in our deltoid muscles to produce this protein, cause this protein to enter the bloodstream.”

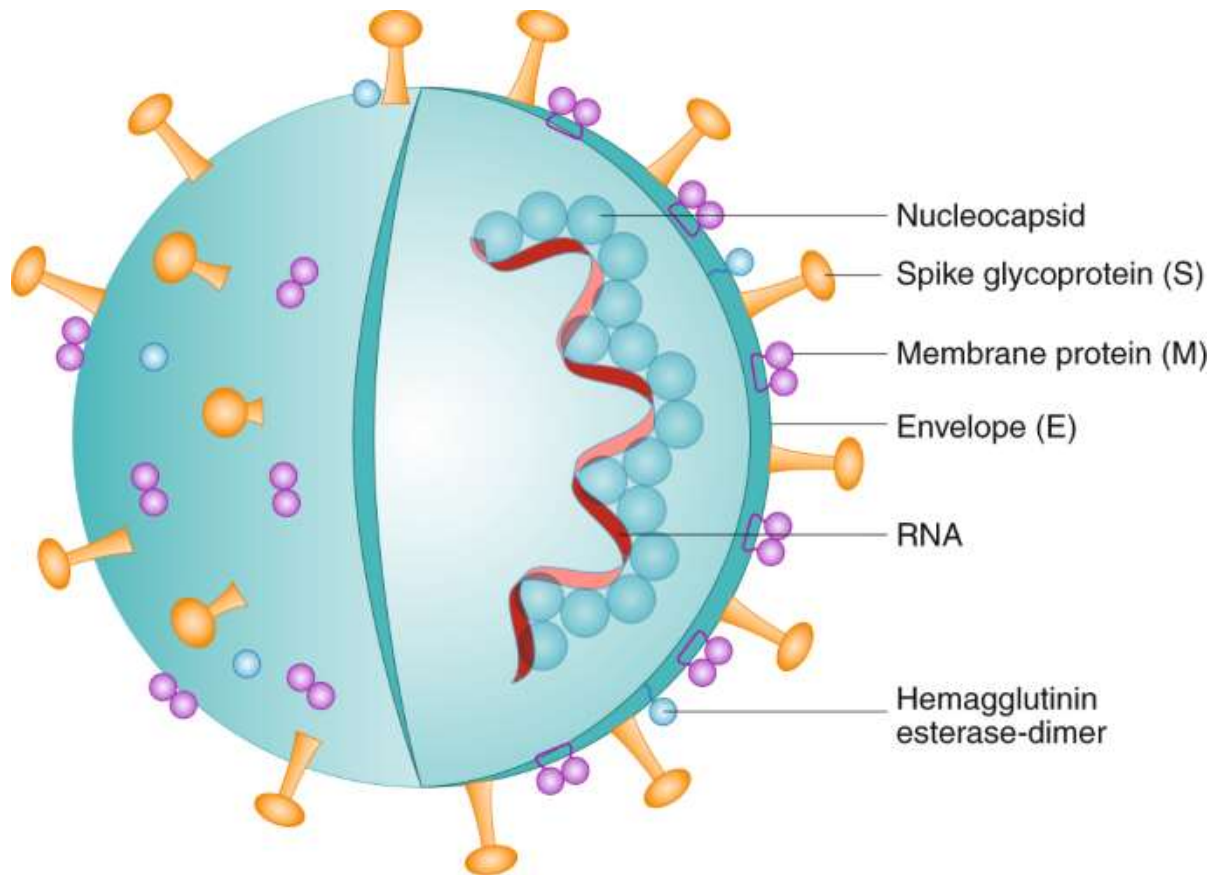
And for the most part some of this is true.... except.... spike protein production tapers off to zero within 15 days post vaccination and is completely gone after the second vaccine dose is given, and it is still at zero within 56 days post vaccination!

Here is the paper Dr. Bridle refers to in his interview.

<https://academic.oup.com/cid/advance-article/doi/10.1093/cid/ciab465/6279075>

WHAT ARE STUDIES SHOWING: Scientists have proposed that the spike proteins on the SARS-CoV-2 virus had to be subjected to high energy states in order for the virus to be activated and cause disease : While the cause for the viral propagation is not well understood its physical properties can be explained by **Gauss’ Divergence Theorem**, which states that the energy from a “bounded solid structure” is only released “perpendicular” to the “surface of the solid”. **This phenomenon is seen in the SARS-CoV-2 virus configuration. What does this mean?**

Let’s look at the structure of the SARS-CoV-2 Virus: The COVID-19 virus is an “enveloped virus”, with a fragile outer membrane or envelope (E). Spike glycoproteins (S) are embedded within this envelope at “right-angles”. The envelope (E) surrounds the genetic material of the virus called RNA (made up of 30,000 nucleosides) surrounded by a protective protein coat called “capsid”; both the RNA + capsid are called the Nucleocapsid.



<https://www.nature.com/articles/s41565-020-0732-3>

While most coronaviruses have these spike proteins (S), they are substantially longer in **SARS-CoV-1** and **SARS-CoV-2**. These longer spike proteins (S) may arise from **high energy excitation through electromagnetic radiation**. High-energy electromagnetic excitation of coronaviruses could cause parts of these spike proteins (S) to burst through the spherical envelope. The higher the excitation, the stronger the outbursts of these spike proteins (S) and that would lead to longer and broader spikes off the coronavirus' surface or envelope. Required for viral activation itself using electromagnetic radiation; the kind found in **5G!**

“Although we do not currently have the means to demonstrate these effects in a lab, we offer this mechanism theory based on the physics of a generic germination process. If our theory is proven correct, it could explain how SARS-CoV and SARS-COV-2 may have come to existence in recent times.”

Research Proposal

PDF Available

Gauss' Divergence Theorem Explains the Spike (S) Protein Characteristics and Possible Germination of SARS-CoV and SARS-CoV-2 Viruses

March 2020

Authors:



M. Nisa Khan

IEM LED Lighting Technologies

https://www.researchgate.net/publication/340128696_Gauss%27_Divergence_Theorem_Explains_the_Spike_S_Protein_Characteristics_and_Possible_Germination_of_SARS-CoV_and_SARS-CoV-2_Viruses

If this is indeed true then both spike proteins and viral RNA can become activated through **5G** radiofrequency exposure; both working in tandem to create a virus-like complex of the human cell itself! This mobilized state would then launch an immune response whereby the immune system itself starts attacking healthy body cells since they now resemble viral pathogens; **thus creating a SARS-CoV-2-like disease state within the body without the presence of the actual virus itself!** We propose that this is the mechanism that activates the immune system itself to start attacking otherwise healthy body cells and organs creating autoimmune-like dysfunction! Instead of "Body Snatchers", you now have vaccines that have become "Cell Snatchers"!

This is the truth about 5G. 5G using 60GHz is resonant with oxygen, so it affects living creatures. 5G does not have to use 60GHz but China wanted us to use it for nefarious reasons. Trump killed that when he blocked Huawei.

60GHz **5G** is absorbed by Oxygen. Telecom companies admit this. This excitation of oxygen molecules is theorized to cause Oxygen to not bind well to blood hemoglobin causing the body to become Oxygen starved (hypoxia). This is from studies in Magnetobiology, which is a suppressed science. There is one book on Amazon: "Magnetobiology: Underlying Physical Problems" which costs \$223.

[This is a good video](#) that discusses studies, the effect of 60GHz on Oxygen and blood hemoglobin, with a list of resources in the description. Unfortunately, when I checked the video has been removed from the Internet.

That 60GHz is absorbed by Oxygen is a fact, so it is reasonable to theorize that it affects living creatures. There should be more studies on this for obvious reasons.

The thing is why does this specific 60-GHz frequency have to be used for **5G**, when it is known to be resonant with oxygen? Why not use a different one? President Trump seems to have understood this and wanted to lean to the safe side. Trump blocked Huawei, which is the bad 60-GHz **5G**. The GHz Trump would support was in the [37 GHz to 50Ghz bands](#), which is still **5G** but a different frequency than the 60-GHz from Huawei. In a subsequent article I will explain why this issue was a critical factor for the telecom industry.

I suspect that China wanted the USA to use 60-GHz **5G** for nefarious reasons.

President Donald Trump and the FCC on Friday, April 12, 2019 announced several initiatives to spur the **5G** network growth in the U.S.

*“The race to **5G** is on and America must win,”* Trump said, noting that 92 **5G** markets will be ready by the end of the year, outpacing South Korea, which is on pace to have 48 markets live by the end of 2019.

“It’s a race our great companies are now involved in,” Trump said. *“According to some estimates, the wireless industry plans to invest \$275 billion in **5G** networks, creating 3 million American jobs quickly, and adding \$500 billion to our economy.”*

5G is the next generation of wireless network that will enable faster data speeds. Unlike 4G LTE, which mainly targeted mobile phones, tablets and computers, **5G** is also expected to enable more reliable connections on self-driving vehicles that will need a constant data connection, and smart cities that use *“internet of things”* devices, such as connected street lamps, traffic lights and more.

AT&T and Verizon already have fledgling **5G** networks in the United States, and T-Mobile and Sprint plan to activate their networks later in 2019. Only one phone from Motorola, offered on Verizon, supports **5G** in the U.S. right now.

“To accelerate and incentivize these investments, my administration is freeing up as much wireless spectrum as needed,” Trump said. *“[We’re] removing regulatory barriers to the buildout of networks. The FCC is taking very bold action, bolder than they’ve ever taken before, to make wireless spectrum available.”*

Spectrum is the airwaves networks use to provide internet to devices. Spectrum space is regulated by the FCC.

Trump’s comments come in tandem with announcements the FCC made. The FCC said that starting on Dec. 10, it will offer *“the largest spectrum auction in our nation’s history,”* allow carriers bid on 3,400 MHz of new spectrum in the Upper 37 GHz, 39 GHz and 47 GHz spectrum bands. The additional spectrum would *“promote the development of **5G**, the Internet of Things and other advanced spectrum-based services,”* the FCC said.

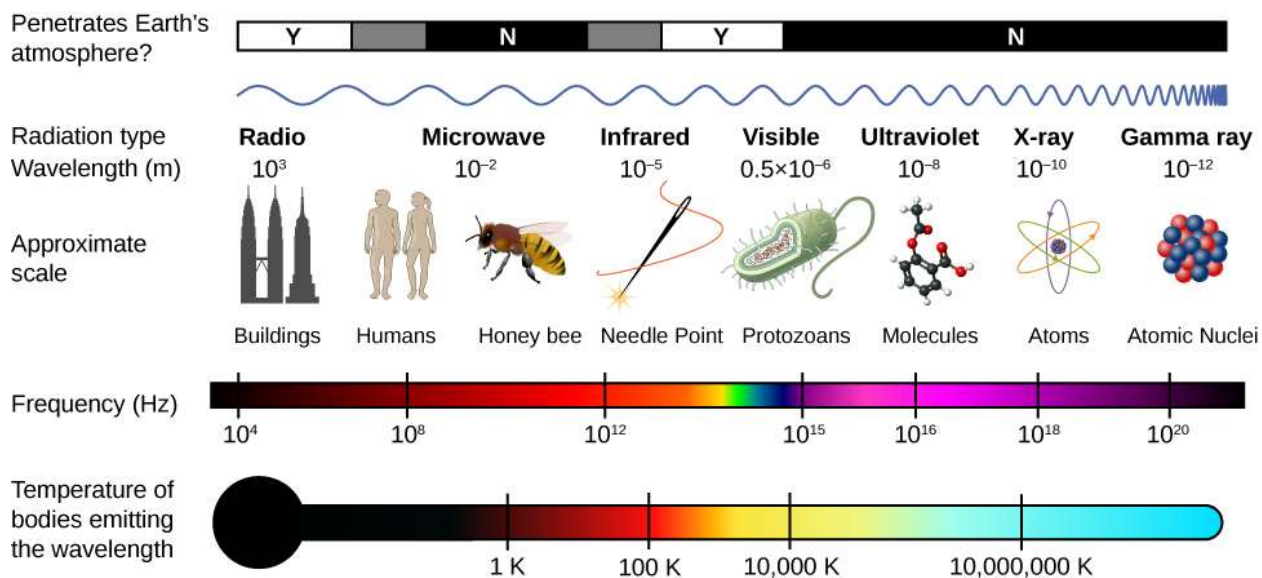
Additionally, the FCC proposed new rules that allow *“Fixed Satellite Service operators to provide faster, more advanced services to their customers”* using 50 GHz spectrum. It also said that current rules *“impair the ability of users to deploy small, next-generation networking devices on their own property,”* particularly in rural areas, and proposed changes that would allow people to install *“hub and relay antennas”* on their property to help spur **5G** networks.

“The FCC aims to create a \$20.4 billion Rural Digital Opportunity fund,” to *“extend high-speed broadband to up to 4 million homes and high-speed businesses in rural America,”* FCC Chairman Ajit Pai said.

Pai also addressed the crackdown on Huawei’s equipment for use in **5G** networks across the U.S. and Europe.

“We believe that the security and reliability of 5G is absolutely important, not just as a matter of national competitiveness, but also as a matter of national security,” Pai told CNBC’s Eamon Javers. *“I have been very encouraged by my conversations with our European allies all across the Continent about the importance of security and 5G networks. The need to have a framework to understand the risk profile of certain equipment and services is something most allies recognize and it’s just a collaborative process of making sure that we have a framework that works for everybody.”*

I live in a rural area seven miles from the county seat, and there are 10 cell towers within a 3-mile radius of my residence. Some are business or commercial cell towers, the closest to me is an AT&T cell tower. In 2022, virtually every person is within range of being poisoned by wireless EMF/EMR radiation poisoning. It is only a matter of time since non-ionizing radiation is a cumulative issue.



At one time only ionizing radiation above that of ultraviolet and x-rays were recognized as hazardous to one’s health. We are finding now that this is not the whole story; and

the once considered non-life-threatening may be far more dangerous in the long-term due to the accumulation effects.

James Grundvig wrote an article on this in the *'Epoch Times'*, an English publication covering China.

Is 5G a deadly trigger for the Coronavirus?

The novel coronavirus has spread unevenly around the world, clustered in several hot pockets, while leaving other areas with scant outbreaks. This pattern developed in China, with the epicenter of Wuhan City in Hubei province owning, at one time, more than 99 percent of the cases and deaths over the rest of the country of 1.4 billion people.

Outside the mainland, Taiwan and Hong Kong never experienced the runaway infections or deaths that China did, with the latter twice experiencing the restart of last year's protests. Although the coronavirus spread fast in South Korea and Japan in the beginning, both outbreaks were extinguished.

In Korea, the vectors for two of the country's four clusters came from a Wuhan branch of a cult church and a Catholic church pilgrimage returning from Israel. Since then, Korea has moved aggressively to defuse new clusters by radically testing people and disinfecting mass transit systems on a daily basis. With more than 9,100 cases and 126 deaths, with one-third recovered, Korea has less cases and deaths than New York City. Today, it also boasts the fewest number of new cases, according to the BBC.

CCP VIRUS SPECIAL COVERAGE

Japan took a different route with the novel virus. It [has](#) only 1,200 cases and 130 deaths. 712 infections—**more than half of the entire country—came from one supercluster in the Diamond Princess cruise ship**, docked in Yokohama. The IOC recently canceled the Tokyo Summer Olympics, not due to the outbreak in Japan, but likely from so many nations that are now battling the virus.

The New Epicenter of Northern Italy

In March, the COVID-19 outbreak appeared in Northern Italy. Soon the entire nation of 60 million was placed under strict quarantine. Social distancing turned into permission slips in order to leave one's home. Despite the containment efforts, the virus hit Italy very hard. It emptied streets, stopped life as Italians knew it, while killing more than 7,500 people out of 75,000 totals infected.

On the first weekend of spring, images emerged from Italy showing similar scenes of horror that was eerily reminiscent of Wuhan: People walking down the street, collapsing dead without any external force. Dozens of such videos and photos showed the fallen spread eagle, flat on their backs, face down on sidewalks. Lifeless. No blood splatter.

Outside of one similar case in New York City, **no other place in the world has produced such anomalies.**

Why?

What causes people, who appear to be fit, to suddenly keel over without a seizure or trembling? What is the underlying cause? What makes Wuhan and Northern Italy different than other parts of the world, where COVID-19 kills people for no apparent explanation?

Why Wuhan?

In 2018, China's Ministry of Industry and Information Technology selected Wuhan as a pilot city for the "Made in China 2025" plan. The overarching goal aimed the industrial city of 11 million to become the **world's Internet of Things mecca, a 5G smart city** that would connect homes, offices, hospitals, factories, and autonomous vehicles via a digital fabric.

The Chinese Communist Party (CCP) envisioned elevating Wuhan, renowned for its factories and severe pollution, as the global smart city of the future. All of the commands, controls, data sharing, and data flowing through artificial intelligence systems would deliver China as the preeminent digital leader of the world.

At the center of the plan, the Chinese telecom syndicate of ZTE, Huawei, Hubei Mobile, and China Unicom began to transform Wuhan into a giant 5G "hot spot" for wireless technology. The 5G launch in the Hubei capital city culminated with the October 2019 Military World Games. Wuhan activated **20 percent of its 10,000 5G base stations, and the rest by the end of the year.** With the hottest **5G** pilot city on the planet, the CCP planned to leverage the publicity to attract more foreign investment and lure international businesses to prop up China's flagging economy.

Then disaster struck.

In mid-December, just six weeks after the military games concluded, the first cases of a new pneumonia started to show up in area hospitals. Over a 72-hour period through New Year's day, scientists decoded the novel virus. On Jan. 2, Wuhan notified the CCP and the Peoples Liberation Army (PLA) about the outbreak. The two governing bodies of the Peoples Republic of China took precautions for their leaders, personnel, and buildings. Instead of telling the world about the outbreak, the regime kept it under tight control. Three weeks after sequencing the virus, CCP head Xi Jinping finally made his first public comment about the discovery of COVID-19 and the epidemic ravaging Wuhan.

By then, the epidemic had erupted out of control. Millions became infected and tens of thousands in Hubei died, far exceeding the "official" numbers claimed by the CCP and supported by the World Health Organization (WHO).

At its height, many leaked videos showed people falling, collapsing or sprawled dead in the streets of Wuhan. Nowhere else in the infected areas of China did similar scenes show that type of death.

Then a clinical [study](#) comparing “Imported cases of COVID-19 in Jiangsu Province,” by Jian Wu et al., discovered a key finding between Wuhan and Jiangsu patients.

“Compared with the cases in Wuhan, the cases in Jiangsu exhibited mild or moderate symptoms and no obvious gender susceptibility. The proportion of patients having liver dysfunction and abnormal CT imaging was relatively lower than that of Wuhan.”

So, what was the underlying cofactor that separated Wuhan from all other areas in China and made the virus more virulent?

While the WHO praised China’s response to the outbreak, only in Wuhan did the police weld infected people in their apartments to die. Only in Wuhan did they burn bodies beyond the capacity of the crematoriums. Only in Wuhan was the regime accused of burying the dead in body bags under the cover of night.

In looking for a cofactor, several outlets suggested Wuhan’s acute pollution was to blame for the virus death toll. Others theorized that a **vaccine trial “primed” a subset of citizens**, making them more vulnerable to COVID-19. There are many other cities in Asia as polluted that didn’t experience the same corona clusters, and no new vaccine trials were launched in Wuhan in 2019.

5G Microwave Effects at 60GHz

In 2001, Shigeaki Hokusui, then president of Harmonix Corporation, explained why fifth generation wireless technology was needed to reach the goal of creating smart cities. He said it would require bandwidth and efficiency to meet the data demand as the Internet moved toward mobile technology. That was two decades ago.

Hokusui noted that 60-GHz was the true radiofrequency that would allow for reliable transmission of data, due to its **“98 percent oxygen absorption” rate**. That allowed for the invisible signals to be sent from point A and B, and back again on the same path.

Super-efficient and a technological milestone.

“Since the presence of O₂ is fairly consistent at ground level, its effect on 60-GHz radio propagation is easily modeled for margin budgeting purposes. Also, the high level of attenuation from oxygen absorption makes even the worst weather-related attenuation insignificant, especially on the short paths where 60-GHz systems operate,” Hokusui wrote.

He stated unequivocally that 60-GHz would deliver the *last mile* efficiently, as the *“oxygen absorption makes possible the same-frequency reuse within a very localized region of air space.”*

The downside to **5G**, however, is the **lack of biological safety and health tests to support its global rollout**. Does the electrification of the entire planet make sense, with thousands of satellites being deployed where infrastructure doesn't exist, such as the oceans?

Testing **5G** by trial and error has already produced some unsettling results. They include the mass deaths of birds in the Netherlands, the cutting down of half of Sheffield, England's trees, and strange illness clusters of children in a few U.S. schools.

Most people don't grasp or care that their Wi-Fi can send signals through drywall, glass, and concrete slabs, just the same as beams go through the human body. And with **5G** a far more focused beam, those signals have no trouble traveling through a person.

The problem is for every breath we breathe our blood transports oxygen throughout the core and extremities to the vital organs, heart and brain.

If **5G** at 60-GHz frequency zips through the air, absorbing most of the oxygen, disrupting the electrons that bind O₂ molecules that, combined with a hydrogen atom, form water vapor what is that frequency doing to blood cells, which consist primarily of water and carry the oxygen?

Does the disruption of the body's biorhythm, breathing, and oxygen distribution begin to explain what happens to the people who dropped dead?

The Mt. Everest 'Death Zone'

Studies of acute mountain sickness show that as climbers ascend in altitude, they hit an endurance wall from a lack of oxygen. "At 4,500 m [14,764 feet], the real amount of oxygen in the air composition is only 12% diluted, which is approximately 60% of sea-level oxygen," according to Brazilian scientists, who published a paper last year.

Higher up the mountain in the "death zone" of Mt. Everest, climbers die due to severe hyperbaric hypoxia, even with bottled oxygen, as their blood coagulates. In another view, altitude sickness **starves the brain of oxygen**.

That explains the unusual scenes of Wuhan citizens dying literally in the streets. They keel over dead, not shaking from a heart attack or seizure; never resuscitated.

Milan in Northern Italy is the **5G** capital of Europe. **Iran, where suspected millions have been infected has installed 5G deployments**. And sure enough, the three Princess line cruise ships—Diamond, Grand, and now Ruby—had GEO and MEO satellites beaming **5G** down to the ships as they travel via a Medallion Net receiver system since last autumn.

Although South Korea is a wirelessly connected nation, it doesn't have the number of cases like other places in the world that does. Yet, its third and fourth coronavirus clusters were in **5G-hot** gymnasium and hospital.

As the anomalous deaths of people in Wuhan and Italy suggest, society, the telecom industry, and government are long past due to study the health effects of **5G**, especially at the “unlicensed” 60-GHz frequency.

Worried about what effect Wi-Fi has on your body, your children or your animals? Are your solar panels frying your brain without you even knowing?

All Wi-Fi, cell phones, smart meters, phone towers and solar panels have a measurable impact upon your health!

Back in 1977, I experienced the Mount Everest event while flying from Gillette, WY to Denver, CO. I had just delivered 12 railroad cars of high-n-wide electrical equipment. Gillette, WY has a small airport and runs commuter aircraft to Denver, CO. The small twin-engine commercial aircraft carry about two dozen passengers but is unpressurized. At the altitude just below 15,000-ft., I experience a shortage of oxygen and felt the beginning stage of hypoxia. For about twenty minutes I thought I was going to pass out from oxygen deprivation.

While it would be fair to assume that **5G** technology has been tested for risks, this is simply not the case. There is no compelling published data on health risks. When **5G** launches, it will be the first actual test on human beings ever performed. This is unprecedented for such a wide-scale, public tech launch.

While 4G’s wavelengths travel along the surface of the skin, **5G**’s millimeter waves are more insidious. When **5G** wavelengths are emitted, our skin will automatically absorb them, which will naturally cause the skin to rise in temperature.

For the past ten years, **5G** technology has been in development. Originally planned as a layer atop 3G and 4G, **5G** is fast becoming a world of its own.

Every cell tower in your neighborhood emits radio frequency (RF) radiation. [Radiation causes cancer.](#) By 2021, every city has **5G** towers and cell stations. These devices will be on the top or side of millions of buildings throughout the world.

The wireless industry is not just building an infrastructure that provides faster downloads; it’s building a global microwave oven.

Yes, **5G** towers and mini-stations are extremely dangerous. Not only are the shorter millimeter waves more hazardous to human beings, because of the intensity of the technology, but it also require millions of more mini cell towers than before, potentially one tower per 2 to 8 houses. This means a human being’s RF radiation exposure will not only increase, but it will also exponentially increase within months.

These towers are not only dangerous; they’re lethal – and should be considered a crime against humanity. In general, radiation does one major thing to human beings and animals – it destroys our DNA, either by forcing the DNA to mutate or by killing specific groups of cells, all of which lead to cancer.

As doctors saw more and more COVID-19 patients, they were noticing an odd trend: Patients whose blood oxygen saturation levels are exceedingly low but who were hardly gasping for breath.

These patients are quite sick, but their disease does not present like typical acute respiratory distress syndrome (ARDS), a type of lung failure known from the 2003 outbreak of the SARS coronavirus and other respiratory diseases. Their lungs are clearly not effectively oxygenating the blood, but these patients are alert and feeling relatively well, even as doctors debate whether to intubate them by placing a breathing tube down the throat.

The concern with this presentation, called "*silent hypoxia*," is that patients are showing up to the hospital in worse health than they realize. But there might be a way to prevent that, according to a New York Times Op-Ed by emergency department physician Richard Levitan. If sick patients were given oxygen-monitoring devices called pulse oximeters to monitor their symptoms at home, they might be able to seek medical treatment sooner, and ultimately avoid the most invasive treatments. I keep one of these pulse oximeter at my side when on my computer. Nurses use these devices by having you put your finger in for a minute or so. I also have Shungite stones placed around my computer and study. Shungite stones act like electrical grounds but are absorbing the wireless energy soup of EMF/EMR radiation.

Normal blood-oxygen levels are around 97%, and it becomes worrisome when the numbers drop below 90%. At levels below 90%, the brain may not get sufficient oxygen, and patients might start experiencing confusion, lethargy or other mental disruptions. As levels drop into the low 80s or below, the danger of damage to vital organs rises.

However, patients may not feel in as dire straits as they are. A lot of coronavirus patients show up at the hospital with oxygen saturations in the low 80s but look fairly comfortable and alert, said Dr. Astha Chichra, a critical care physician at Yale School of Medicine. They might be slightly short of breath, but not in proportion to the lack of oxygen they're receiving.

There are three major reasons people feel a sense of dyspnea, or labored breathing. One is something obstructing the airway, which is not an issue in COVID-19. Another is when carbon dioxide builds up in the blood. A good example of that phenomenon is during exercise: Increased metabolism means more carbon dioxide production, leading to heavy breathing to exhale all that CO₂.

Related: Could genetics explain why some COVID-19 patients fare worse than others?

A third phenomenon, particularly important in respiratory disease, is decreased lung compliance. Lung compliance refers to the ease with which the lungs move in and out with each breath. In pneumonia and in ARDS, fluids in the lungs fill microscopic air sacs called alveoli, where oxygen from the air diffuses into the blood. As the lungs fill with fluid, they become more taut and stiffer, and the person's chest and abdominal muscles

must work harder to expand and contract the lungs in order to breathe. I experienced this issue this past February. Although I did have pneumonia from fluids that backed-up into my lungs, it was never fully determined whether it was from congestive heart failure or 5G radiation poisoning. I was on oxygen support in ICU for a couple days. One of the ICU physicians became visibly offensive when I asked the question whether I might have been attacked with a directed energy device. As a result of his obvious snarky response, I decided to say nothing more that would keep me from getting out of the ICU and the hospital alive.

This happens in severe COVID-19, too. But in some patients, the fluid buildup is not enough to make the lungs particularly stiff. Their oxygen levels may be low for an unknown reason that doesn't involve fluid buildup — and one that doesn't trigger the body's need to gasp for breath.

Exactly what is going on is yet unknown.

Dr. Chichra said that some of these patients might simply have fairly healthy lungs, and thus have the lung compliance (or elasticity) — so not much resistance in the lungs when a person inhales and exhales — to feel like they are not short on air even as their lungs become less effective at diffusing oxygen into the blood. Others, especially geriatric patients, might have comorbidities that mean they live with low oxygen levels regularly, so they're used to feeling somewhat lethargic or easily winded, she said.

In the New York Times Op-Ed on the phenomenon, Levitan wrote that the lack of gasping might be due to a particular phase of the lung failure caused by COVID-19. When the lung failure first starts, he wrote, the virus may attack the lung cells that make surfactant, a fatty substance in the alveoli, which reduces surface tension in the lungs, increasing their compliance. Without surfactant, the increased surface tension causes the alveoli to deflate, but if they are not filled with fluid,, they won't feel stiff, Levitan wrote. This could explain how the alveoli fail to oxygenate the blood without the patient noticing the need to gasp for more air.

The virus might also create hypoxia by damaging the blood vessels that lead to the lungs, Moss said. Normally, when a patient has pneumonia, the tiny blood vessels around the fluid-filled areas of the lungs constrict (called hypoxic vasoconstriction): Sensing a lack of oxygen in the damaged areas, the body shunts blood to other, healthier parts of the lungs. Because pneumonia fills the lungs with fluid, the person will feel starved for air and gasp for breath. But their vessels send the blood to the least-damaged parts of the lung, so their blood oxygenation stays relatively high, given the damage.

In COVID-19, that balance may be off. The lungs aren't very fluid-filled and stiff, but the blood vessels don't constrict and reroute blood to the least-damaged spots. People feel free to inhale and exhale without resistance, but the blood is still trying to pick up oxygen at alveoli that are damaged and inefficient.

"What is most likely happening here is that hypoxic vasoconstriction is lost for some reason, so that blood does flow to places where there is some damage to the lungs," Moss said. It could also be a combination of factors, he added.

"I'm not going to say the alveoli are normal and the surfactant is normal, but when someone has hypoxia out of proportion to what you would see in the lung, that makes lung specialists think there is a problem on the blood vessel side," he said.

In a *'New York Times'* article, Dr. Levitan suggests that patients who are not sick enough to be admitted to the hospital be given pulse oximeters, devices that clamp to the finger to measure blood oxygenation. If their oxygenation numbers start to fall, it could be an early warning sign to seek medical treatment.

"It's an intriguing possibility," Dr. Moss said.

"Even without widespread at-home oxygen monitoring, doctors are now starting to differentiate between patients who have low oxygen levels and who are working hard to breathe, and those who have low oxygen levels but are breathing without distress," Dr. Chichra said. Early in the pandemic, knowing that COVID-19 patients can start to fail quickly, physicians tended to put people with hypoxia on ventilators quickly. Now, Chichra said, *"it's becoming clear that patients who aren't struggling for breath often recover without being intubated. They may do well with oxygen delivered via nasal tube or a non-rebreather mask, which fits over the face to deliver high concentrations of oxygen."*

"Hypoxic patients who are breathing quickly and laboriously, with elevated heart rates, tend to be the ones who need mechanical ventilation or non-invasive positive-pressure ventilation," Chichra said. The latter is a method that uses a face mask instead of a tube down the throat, but also uses pressure to push air into the lungs.

"The key difference we've found between these folks is that the people who are working hard to breathe are the folks who usually need to be intubated," Dr. Chichra said.

An international study shared on the National Institute of Health website found that **5G** technology is absorbed by skin cells and can alter DNA in a way that actually produces coronaviruses within the human body.

The study, jointly produced by scientists from Guglielmo Marconi University, Central Michigan University and First Moscow State Medical University, claims that **5G** millimeter waves stimulate DNA in a way that causes cell nuclei to produce coronaviruses.

*“In this research, we show that **5G** millimeter waves could be absorbed by dermatologic cells acting like antennas, transferred to other cells and play the main role in producing Coronaviruses in biological cells,” the study states.*

David Knight did break down the groundbreaking new NIH report that sheds more light on what the 5G/Coronavirus connection might be.

“DNA is built from charged electrons and atoms and has an inductor-like structure. This structure could be divided into linear, toroid and round inductors. Inductors interact with external electromagnetic waves, move and produce some extra waves within the cells. The shapes of these waves are similar to shapes of hexagonal and pentagonal bases of their DNA source. These waves produce some holes in liquids within the nucleus. To fill these holes, some extra hexagonal and pentagonal bases are produced. These bases could join to each other and form virus-like structures such as Coronavirus.”

*“To produce these viruses within a cell, it is necessary that the wavelength of external waves be shorter than the size of the cell. Thus **5G** millimeter waves could be good candidates for applying in constructing virus-like structures such as Coronaviruses (COVID-19) within cells.”*

The study goes on to suggest that the cancer-causing qualities of **5G** are due to how it alters DNA within the body.

*“In another study, it was argued that **5G** technologies cause great harm to human health. Cancer is only one of the many problems. **5G** causes 720 (factorial) different diseases in human beings, and can kill everything that lives except some forms of microorganisms. To consider the effects of **5G** millimeter waves on biological systems, we propose a model which describes the process of exchanging waves between 5G towers and host cells.”*

As Infowars reported months ago, Wuhan, the global epicenter of the coronavirus pandemic, rolled out **5G** systems just weeks before the COVID-19 outbreak hit, with some scientists claiming that **5G**'s effects on human cells can cause “flu-like symptoms.”

The CDC, NIAID, and the voices like Dr. Fauci and Dr. Birx never reported the printed evidence that Covid might be caused by wireless EMF/EMR. Rather, they pushed a protocol that was seriously questioned as appropriate during the entire so-called outbreak of Covid-19.

Update from Martin Pall, PhD, March 22, 2020

Dr. Martin Pall is perhaps the foremost scholar who weighs in on the dangers of 5G



Two documents reprinted on [1], each argue that there are reasons to think that **5G** radiation is greatly stimulating the coronavirus (COVID-19) pandemic and therefore, an important public health measure would be to shut down the **5G** antennae and particularly the small cell **5G** antennae in close proximity to our homes, schools, businesses, house of worship and hospitals.

The first of these documents [1] published by Miller et al., concerns the impact of **5G** radiation on the immune system of the body and also suggests that **5G** radiation may also increase the replication of the virus. In both of these ways, **5G** radiation may be expected to make the COVID-19 pandemic much worse.

The second of these documents [1] is my own and is derived from a larger document on **5G** radiation effects [2]. It starts with the history of **5G** in Wuhan, China, the epicenter of the COVID-19 epidemic. Wuhan is China's first **5G** "smart city" and is the location of China's first **5G** highway where **5G** radiation is being used to test self-driving vehicles. Approximately 10,000 **5G** antennae were installed and activated in Wuhan in 2019, with approximately 75 to 80% of these installed and activated in the last 2 ½ months of the year. The epidemic was first detected near the beginning of that 2 ½ month period and became vastly more severe, with extremely large increases in numbers of cases and in deaths by the end of 2019. That may, of course be coincidental. South Korea, which became the site of the worst epidemic outside of China, has large numbers of **5G** antennae all over the country. The Milan area of Italy, the worst epicenter in Europe also is a **5G** center. And Seattle area, the worst area in the U.S. is also a major **5G** area. Reports predict that New York City will shortly become the largest epicenter in the US is another **5G** site. These non-Chinese epidemic areas are not discussed in my paper, but these findings are accurate. Again, the locations of these epicenters in **5G** areas may be coincidental.

Electromagnetic fields, including the highly pulsed and therefore highly dangerous **5G** millimeter wave radiation, act via activation of voltage-gated calcium channels (VGCCs) with VGCC activation producing five different effects, each of which have roles in stimulating the replication and spread of coronaviruses:

1. Excessive intracellular calcium
2. Oxidative stress
3. NF-kappaB elevation
4. Inflammation
5. Apoptosis (programmed cell death)

The predominant cause of death in the COVID-19 epidemic, is pneumonia and each of these five effects also have roles in pneumonia, such that each of them is predicted to greatly increase the percent of people dying death in this epidemic. It seems highly plausible that **5G** radiation is greatly increasing the spread of the epidemic and also the death rate in individuals that are infected.

You may wish to consider all of this in conjunction with the broader findings with regard to the dangers of **5G** and other effects apparently produced by **5G** exposures [2].

How then did we get to this state? Many independent scientists, including myself, have argued that there should be no **5G** rollout until there is extensive biological safety testing of genuine **5G** radiation with all of its dangerous modulating pulses. However the industry has refused to get independent **5G** testing and the FCC and other regulatory agencies have refused to require such testing. Furthermore, the EMF “safety guidelines” which are supposed to protect us from health impacts of EMF radiation have been shown, based on eight different types of highly repeated studies, to fail massively to predict biological effects. They therefore fail to predict safety [3]. It follows from this that all assurances of safety based on these “safety guidelines” are fraudulent. Consequently, there is no evidence whatsoever of **5G** safety and much evidence of lack of safety.

It is my opinion, therefore, that **5G** radiation is greatly stimulating the coronavirus (COVID-19) pandemic and also the major cause of death, pneumonia and therefore, an important public health measure would be to shut down the **5G** antennae, particularly the small cell **5G** antennae in close proximity to our homes, schools, businesses, houses of worship and hospitals. I will list some of my professional qualifications following the citations.

Martin L. Pall, Professor Emeritus of Biochemistry and Basic Medical Science, Washington State University

[1] <http://www.electrosmogprevention.org/international-electrosmog-prevention-news/coronavirus5g/>

[2] http://www.electrosmogprevention.org/wp-content/uploads/2020/03/M.Pall_Predicted-effects-5G-Coronavirus.pdf

[3] <https://ehtrust.org/wp-content/uploads/SafetyGuidelineFraud2.pdf>

The VGCC activation mechanism has been amazingly well accepted in the scientific literature.

My first (2013) paper on it was placed on the Global Medical Discovery web site as one of the top medical papers of 2013. That paper has been cited 255 times according to the Google Scholar database. Most new scientific paradigms are only slowly accepted and this is much, much faster than usual.

I have given 59 invited professional talks on this topic in 15 countries, including 4 prestigious keynote addresses. I had been scheduled to give 1 more prestigious keynote address in April (has been postponed because of COVID-19).

Two of my papers, my neuropsychiatric paper and my Wi-Fi paper, are each described by the publishing journal as being the most often downloaded paper in the history of each journal – stunning scientific interest in both papers.

My recent talks, one sponsored by the Dept. of Engineering and Applied Science at Queens University and the other at the World Congress on Physics in Berlin (where I was given a certificate of recognition) show together that both engineers and physicists are starting to realize the importance of this mechanism.

Role of 5G in the Coronavirus Epidemic in Wuhan China

– by Martin Pall, PhD, Professor Emeritus, Washington State University

Wuhan, the capital of Hubei province in China, was chosen to be China's first 5G "smart city" and the location of China's first smart 5G highway. Wuhan is also the center of the horrendous coronavirus epidemic. The possible linkage between these two events was first discussed in an Oct. 31, 2019 article entitled: "Wuhan was the province where 5G was rolled out, now the center of deadly virus" <https://5g-emf.com/wuhan-was-the-province-where-5g-was-rolled-out-now-the-center-of-deadly-virus/>

The question that is being raised here is not whether 5G is responsible for the virus, but rather whether 5G radiation, acting via VGCC activation may be exacerbating the viral replication or the spread or lethality of the disease. Let's backtrack and look at the recent history of 5G in Wuhan in order to get some perspective on those questions. An Asia Times article, dated Feb. 12, 2019 (<https://www.asiatimes.com/2019/02/article/china-to-launch-first-5g-smart-highway>) stated that there were 31 different 5G base stations (that is antennae) in Wuhan at the end of 2018. There were plans developed later such that approximately 10,000 5G antennae would be in place at the end of 2019, with most of those being on 5G LED smart street lamps. The first such smart street lamp was put in place on May 14, 2019 (www.china.org.cn/china/2019-05/14/content_74783676.htm), but large numbers only started being put in place in October, 2019, such that there was a furious pace of such placement in the last 2 ½ months of 2019. These findings show that the rapid pace of the coronavirus epidemic developed at least roughly as the number of 5G antennae became extraordinarily high. So we have this finding that China's 1st 5G smart city and smart highway is the epicenter of this epidemic and this finding that the epidemic only became rapidly more severe as the numbers of 5G antennae skyrocketed.

Are these findings coincidental or does 5G have some causal role in exacerbating the coronavirus epidemic? In order to answer that question, we need to determine whether the downstream effects of VGCC activation exacerbate the viral replication, the effects of viral infection, especially those that have roles in

the spread of the virus and also the mechanism by which this coronavirus causes death.

Accordingly, the replication of the viral RNA is stimulated by oxidative stress:

J Mol Biol. 2008 Nov 28;383(5):1081-96. Variable oligomerization modes in coronavirus non-structural protein 9. Ponnusamy R, Moll R, Weimar T, Mesters JR, Hilgenfeld R.

Other aspects of viral replication including those involved in the spread of the virus are stimulated by increased intracellular calcium [Ca²⁺]_i, oxidative stress, NF-kappaB elevation, inflammation and apoptosis, each of which are increased following EMF exposure. The first citation below shows an important role of VGCC activation in stimulating coronavirus infection.

Virology. 2020 Jan 2;539:38-48. Porcine deltacoronavirus (PDCoV) modulates calcium influx to favor viral replication. Bai D, et al.

J Virol. 2011 May;85(9):4234-45. Distinct severe acute respiratory syndrome coronavirus-induced acute lung injury pathways in two different nonhuman primate species. Smits SL, et al.

Cell Calcium. 2018 Nov;75:30-41. NAADP-dependent Ca²⁺ signaling regulates Middle East respiratory syndrome-coronavirus pseudovirus translocation through the endolysosomal system. Gunaratne GS, et al.

J Virol. 2011 May;85(9):4234-45. Distinct severe acute respiratory syndrome coronavirus-induced acute lung injury pathways in two different nonhuman primate species. Smits SL, et al.

Proteome Sci. 2011 Mar 8;9:11. Proteomic analysis of chicken embryonic trachea and kidney tissues after infection in ovo by avian infectious bronchitis coronavirus. Cao Z, et al.

Res Vet Sci. 2015 Jun;100:12-7. Serum biomarkers of oxidative stress in cats with feline infectious peritonitis. Tecles F, et al.

J Infect Dis. 2008 Mar 15;197(6):812-6. Glucose-6-phosphate dehydrogenase deficiency enhances human coronavirus infection. Wu YH et al.

J Virol. 1998 Jun;72(6):4918-24. Transmissible gastroenteritis coronavirus induces programmed cell death in infected cells through a caspase-dependent pathway. Eleouet JF, et al.

The predominant cause of death from this coronavirus is pneumonia. Pneumonia is greatly exacerbated by each of those five downstream effects of VGCC

activation, excessive intracellular calcium, oxidative stress, NF-kappaB elevation, inflammation and apoptosis. The first of the citations listed below shows that calcium channel blockers, the same type of drugs that block EMF effects, are useful in the treatment of pneumonia. This predicts that EMFs, acting via VGCC activation, will produce increasingly severe pneumonia and therefore 5G radiation as well as other types of EMFs may well increase pneumonia deaths.

Zheng et al. 2016 Preadmission Use of Calcium Channel Blockers and Outcomes After Hospitalization With Pneumonia: A Retrospective Propensity-Matched Cohort Study. *Am J Ther.* 2017 Jan/Feb;24(1):e30-e38.

Fang et al. 2017 Pneumolysin-Dependent Calpain Activation and Interleukin-1? Secretion in Macrophages Infected with *Streptococcus pneumoniae*. *Infect Immun.* 2017 Aug 18;85(9). pii: e00201-17.

Fettel et al. 2019 Sphingosine-1-phosphate (S1P) induces potent anti-inflammatory effects in vitro and in vivo by S1P receptor 4-mediated suppression of 5-lipoxygenase activity. *FASEB J.* 2019 Feb;33(2):1711-1726.

Liu and Shi. 2019 Calcium-activated chloride channel regulator 1 (CLCA1): More than a regulator of chloride transport and mucus production. *World Allergy Organ J.* 2019 Nov 29;12(11):100077.

Medicine (Baltimore). 2018 Nov;97(45):e13087. N-acetylcysteine improves oxidative stress and inflammatory response in patients with community acquired pneumonia: A randomized controlled trial. Zhang Q, et al.

Sci Rep. 2018 Oct 18;8(1):15393. Surfactant protein D attenuates acute lung and kidney injuries in pneumonia-induced sepsis through modulating apoptosis, inflammation and NF-?B signaling. Du J, et al.

Curr Neurovasc Res. 2020 Jan 28. MicroRNA (miR)-429 promotes inflammatory injury by targeting kruppel-like factor 4 (KLF4) in neonatal pneumonia. Zhang L, et al.

Life Sci. 2019 Jul 1;228:189-197. Long noncoding RNA SNHG16 targets miR-146a-5p/CCL5 to regulate LPS-induced WI-38 cell apoptosis and inflammation in acute pneumonia. Zhou Z, et al.

These all argue that 5G radiation is likely to greatly exacerbate the spread of the coronavirus and to greatly increase the lethality of the infections produced by it. The good news is that it is likely that those of us that live in areas with no 5G radiation and who avoid other EMFs wherever possible will probably escape much of the impacts of this prospective global pandemic. It is highly probable that one of the best things Wuhan can do to control the epidemic in the city is to turn off the 4G/5G system.

Blessings,

Pastor Bob, EvanTeachr@aol.com
www.pastorbobreid.com