17. What Is and What If.

Richard Lawrence Norman.

What is:

The happy fact remains: change is the only thing which life has to offer us. The hummingbirds hang suspended in space, floating, a magical excess of energetic expenditure, frozen amongst whipped air, waiting. A drink from the feeder, now rejuvenated, a dart of color speeds away into the sky, carving arcs of mad precision in a coordinated ballet of energy, sound and motion. The many varieties of caterpillar each become anew, their tube feet soon exchanged for wings, each blade of grass stretching toward the sun becomes a tasseled head of seed, and dies, the sun arching and sweet, soon rising to a boil at the apex of Summer's noon, pouring sheets of heat over the valley, then receding behind the distant hills to invite evening's cool, and the poetry is of one thing alone: becoming. The happy fact remains: change is the only thing which life has to offer us.

Process and transformation, are the basis of all things. Energy becomes mass, mass becomes energy, virtual particles appear and disappear, suns burn and die—the eternal is but the finite—ever changing.

In the world of science there are aspects which are otherwise—aspects which demonstrate a dynamic other than this singular bellwether of health itself: Change. Even so far back as the late 1800's the view into history was millennial, and the sight clear to interpret. From Bechamp's seminal work, *The Blood*, we read:

"An historian of the founders of modern astronomy recently related that the philosopher Cleanthus three millennia before our era, wished to prosecute Aristarchus for blasphemy, for having believed that the earth moved, and having dared to say that the sun was the immovable centre of the universe. Two thousand years later, human reason having remained stationary, the wish of Cleanthus was realized. Galileo was accused of blasphemy and impiety for having like Copernicus and following Aristarchus, maintained the same truth; a tribunal condemned his writings and forced him to a recantation which his conscience denied."

". . . I, Galileo, in the seventieth year of my age, on my knees before your Eminences, having before my eyes the holy gospels, which I touch with my own hands, I abjure, I curse, I detest, the error and heresy of the movement of the earth."

The case of Bechamp is cut of the same cloth. In Hume's *Bechamp or Pasteur* the grueling and tragic tale is laid out for all to see. Bechamp was a true genius with boundless energy, concerned with science alone. Pasteur was an animal of high ambition, although academically barely able to gain acceptance into the learned bodies which his abrasive personality would dominate. He ingratiated himself to the Emperor Napoleon, and became all but impossible to disagree with. However unassailable his personality, his science was lacking, if publically acclaimed. Over and over again the records demonstrate Bechamp's

published work predates that of Pasteur's. In the cases of fermentation and silk worm disease the evidence is well past damning. However, history takes Pasteur's thefts and plagiarisms of Bechamp's work as lauded accomplishments, even as Pasteur's cruel indifference is utterly evident, a bully insensitive to thousands upon thousands of suffering animals given fake vaccines; without respect for the priority of another man's published work or anything else, save acclaim and money. In the end, Bechamp's deep insight and genius was left aside, and the pleomorphic aspects of disease with them (Hume, 2011). Reputation, personality, money and power make fodder of good science; fine men and their hard won work which could benefit many, are disgraced and suppressed.

The situation is little different today, and it appears that the scientific disciplines which are now as then funded, overseen and authorized by wealthy individuals and large powerful bodies, themselves composed of people filled with predictable human intentions and ambitions, have indeed created a situation which has to use the words of Bechamp, "remained stationary." In psychological terms, Science is ill, it is neurotic. Science demonstrates fixation. Let us take a brief accounting of some few of the current implications.

Monetary priority and medical practice: the 'patentable molecule.'

There are two sides to the conundrum of greed in medicine: the 'patentable molecule.' On one side, the drugs produced, just as Pasteur's lucrative yet deadly vaccines, carry with them a monetary incentive which affects bias toward confirmation of drug efficacy. That implies that drugs may be produced and sold which are ineffective and/or harmful so as to make money. The other side to this dirty coin, is the lack of incentive to bring forward treatment strategies or specific options which although effective and healthful, are not patentable and so, cannot extract money from the health of mankind.

Parkinson's and profit, un-patentable molecules and studies:

Parkinson's Disease (PD) is a common cause of neuro-degeneration in the geriatric population. This prolific and dread affliction may be ameliorated with a variety of substances which are unavailable for patent. This is not an assertion based in a soft-headed holistic naturopathic daydream. The following facts are extracted from detailed studies which are in the main available on the single most conservative source of modern mainstream orthodox science, the U.S. National Library of Medicine National Institutes of Health's archive at PubMed. Other sources below, are also from trustworthy peer reviewed journals. Please investigate the sources which I will reference with a simple link in the text, and assure yourself with a click as to the quality and reliability of the science. In place of the traditional reference list I will include a bibliography.

It should be noted that among the many compounds which are included below are some derived from cannabis, the international and local laws concerning which being quite arbitrary and various. In England doctors are legally and, I believe rightly, permitted to prescribe heroin in cases of severe pain, yet are not permitted to prescribe the much less dangerous drug cannabis, under any circumstance. One constituent in the highly complex assemblage of active compounds in cannabis, namely CBD, may well be efficacious in the amelioration of various pathologies from Parkinson's to seizure disorders, and causes no

intoxicating side effects. It appears logical to reexamine the laws concerning cannabis and the rights of doctors to prescribe it, and/or its constituents. (The cannabis based pharmaceutical drug Sativex [GW pharmaceuticals] is the lone exception permitted for prescription in England to treat spasticity in multiple sclerosis). I do not recommend or advise any treatment strategy which does not adhere to the laws and legal codes where you reside.

Condensed facts [Cannabis/THC/CBD, Pregnenolone, Cinnamon, Thiamine, K2, D, Glutathione]:

Cannabis/THC/CBD and the uninvestigated role of pregnenolone:

a. From, Modifications of neuroactive steroid levels in an experimental model of nigrostriatal degeneration: potential relevance to the pathophysiology of Parkinson's disease. Melcangi et al.
"Among the neuroactive steroid levels assessed (i.e., pregnenolone, progesterone, dihydroprogesterone, tetrahydroprogesterone, isopregnanolone, testosterone, dihydrotestosterone, 3α-diol, dehydroepiandrosterone, 17α-estradiol, and 17β-estradiol), we observed a significant decrease of pregnenolone in the striatum."

b. From, Cannabis (medical marijuana) treatment for motor and non-motor symptoms of Parkinson disease: an open-label observational study. Lotan et al.
"RESULTS: Mean (SD) total score on the motor Unified Parkinson Disease Rating Scale score improved significantly from 33.1 (13.8) at baseline to 23.2 (10.5) after cannabis consumption ($t = 5.9$; $P < 0.001$). *Analysis of specific motor symptoms revealed significant improvement after treatment* in tremor ($P < 0.001$), rigidity ($P = 0.004$), and bradykinesia ($P < 0.001$). CONCLUSIONS: *There was also significant improvement of sleep and pain scores. No significant adverse effects of the drug were observed. The study suggests that cannabis might have a place in the therapeutic armamentarium of PD.* [Emphasis added].

c. From, Pregnenolone Can Protect the Brain from Cannabis Intoxication. Vallee et al.
"Pregnenolone is considered the inactive precursor of all steroid hormones, and its potential functional effects have been largely uninvestigated. The administration of the main active principle of *Cannabis sativa* (marijuana), Δ^9-tetrahydrocannabinol (THC), substantially increases the synthesis of pregnenolone in the brain via activation of the type-1 cannabinoid (CB_1) receptor." [Emphasis added].

d. There are antioxidant effects and others ascribed to CBD as well. From, Prospects for cannabinoid therapies in basal ganglia disorders. Fernandez-Ruiz et al.
"This CB(2) receptor up-regulation has been found in many neurodegenerative disorders including HD and PD, which supports the beneficial effects found for CB(2) receptor agonists in both disorders. In conclusion, the evidence reported so far supports that *those cannabinoids having antioxidant properties and/or capability to activate CB(2) receptors may represent promising therapeutic agents in HD and PD, thus deserving a prompt clinical evaluation." [Emphasis added]*.

e. From, Evaluation of the neuroprotective effect of cannabinoids in a rat model of

Parkinson's disease: importance of antioxidant and cannabinoid receptor-independent properties. García-Arencibia et al.
"In summary, our results indicate that those cannabinoids having antioxidant cannabinoid receptor-independent properties provide neuroprotection against the progressive degeneration of nigrostriatal dopaminergic neurons occurring in PD. In addition, the activation of CB2 (but not CB1) receptors, or other additional mechanisms, might also contribute to some extent to the potential of cannabinoids in this disease."

f. From, Cannabinoids provide neuroprotection against 6-hydroxydopamine toxicity in vivo and in vitro: relevance to Parkinson's disease. Lastres-Becker et al.
"In summary, our results support the view of a potential neuroprotective action of cannabinoids against the in vivo and in vitro toxicity of 6-hydroxydopamine, which might be relevant for PD. Our data indicated that these neuroprotective effects might be due, among others, to the antioxidant properties of certain plant-derived cannabinoids, or exerted through the capability of cannabinoid agonists to modulate glial function, or produced by a combination of both mechanisms."

We may conclude that Cannabis/THC/CBD may be helpful in the treatment of Parkinson's.

K2 and Mitochondrial function:

a. Parkinson's is a disease of energetic deficiency stemming from mitochondrial dysfunction. From, PINK1 Loss-of-Function Mutations Affect Mitochondrial Complex I Activity via NdufA10 Ubiquinone Uncoupling. Morais et al.
"A second hypothesis suggests that PINK1 has a direct effect on mitochondrial complex I, affecting the maintenance of the electron transport chain (ETC) resulting in decreased mitochondrial membrane potential and dysfunctional mitochondria."
And from Mitochondrial Biology and Parkinson's Disease. Perier and Vila. "Whether a primary or secondary event, mitochondrial dysfunction holds promise as a potential therapeutic target to halt the progression of dopaminergic neurodegeneration in PD."

b. Mitochondrial electron carrier, vitamin K2, rescues Parkinson's disease models based on this theory. From, Vitamin K2 is a mitochondrial electron carrier that rescues pink1 deficiency. Vos et al.
"We found that vitamin K(2) was necessary and sufficient to transfer electrons in Drosophila mitochondria. Heix mutants showed severe mitochondrial defects that were rescued by vitamin K(2), and, similar to ubiquinone, vitamin K(2) transferred electrons in Drosophila mitochondria, resulting in more efficient adenosine triphosphate (ATP) production. Thus, mitochondrial dysfunction was rescued by vitamin K(2) that serves as a mitochondrial electron carrier, helping to maintain normal ATP production."

We may conclude that K2 may be helpful in the treatment of Parkinson's.

Vitamin D:

Vitamin D has been demonstrated to slow the physical deterioration associated with

Parkinson's. From, Randomized double blind placebo controlled trial of vitamin D supplementation in Parkinson disease. Suzuki M, et al.
"Compared with the placebo, vitamin D3 significantly prevented the deterioration of the HY stage in patients [difference between groups: P = 0.005; mean ± SD change within vitamin D3 group: +0.02 ± 0.62 (P = 0.79); change within placebo group: +0.33 ± 0.70 (P = 0.0006)]."

We may conclude that Vitamin D may be helpful in the treatment of Parkinson's.

Glutathione:

According to Dr. Julian Whitaker, from his newsletter of September, 2014:

"Glutathione is the major antioxidant produced in neurons and cells throughout the body. Oxidative stress and inflammation are implicated in the dysfunction and ultimate death of dopamine-producing cells. Restoring depleted glutathione stores slows this destructive process and improves symptoms in patients with Parkinson's. IV administrations helps ensure it gets into the brain.

I'll never forget one of the first patients we treated at the clinic with IV Glutathione. He had a significant tremor in his left arm and arrived in a wheelchair. After his second IV treatment, his tremor decreased and he was up and walking, albeit with an unsteady gait and his arms stiff at his sides. After his third infusion, he was walking more or less normally, with a confident stride, arms swinging—and no tremor."

Also see: Reduced intravenous glutathione in the treatment of early Parkinson's disease. Sechi G, et al.
"All patients improved significantly after GSH therapy, with a 42% decline in disability. Once GSH was stopped the therapeutic effect lasted for 2-4 months. 4. Our data indicate that in untreated PD patients GSH has symptomatic efficacy and possibly retards the progression of the disease."

Also see: Glutathione and Parkinson's disease: is this the elephant in the room? Zeevalk et al.

Nasal administration may also be effective. See Central nervous system uptake of intranasal glutathione in Parkinson's disease. Mischley et al.

We may conclude that Glutathione may be helpful in the treatment of Parkinson's.

Thiamine:

From, Long-Term Treatment with High-Dose Thiamine in Parkinson Disease: An Open-Label Pilot Study. Costantini et al.

"CONCLUSIONS:
Administration of parenteral high-dose thiamine was effective in reversing PD motor and non-motor symptoms. The clinical improvement was stable over time in all the patients. From our clinical evidence, we hypothesize that a dysfunction of thiamine-dependent metabolic processes could cause selective neural damage in the centers typically affected by this disease and might be a fundamental molecular event provoking neurodegeneration. Thiamine could have both restorative and neuroprotective action in PD."

From, High-dose thiamine as initial treatment for Parkinson's disease. Costantini et al.

"Injection of high doses of thiamine was effective in reversing the symptoms, suggesting that the abnormalities in thiamine-dependent processes could be overcome by diffusion-mediated transport at supranormal thiamine concentrations."

From, The Beneficial Role of Thiamine in Parkinson's Disease: Preliminary Report. Luong et al.

"Five PD patients presented with stone face, right-hand tremors, Parkinsonian gait and bradykinesia with occasional freezing. Two patients presented with sialorrhea and the plasma transkelosase activity was low in one patient. All of the patients received 100 - 200 mg daily doses of parenteral thiamine. Within days of thiamine treatment, the patients had smiles on their faces, walked normally with longer steps, increased their arm swings, and experienced no tremors or sialorrhea."

We may conclude that Thiamine may be helpful in the treatment of Parkinson's.

Cinnamon:

From, Cinnamon treatment upregulates neuroprotective proteins Parkin and DJ-1 and protects dopaminergic neurons in a mouse model of Parkinson's disease. Khasnavis and Pahan.

". . . However, oral treatment of MPTP-intoxicated mice with cinnamon powder and NaB reduced the expression of iNOS and protected Parkin/DJ-1 in the nigra. These findings paralleled dopaminergic neuronal protection, normalized striatal neurotransmitters, and improved motor functions by cinnamon in MPTP-intoxicated mice. *These results suggest that cinnamon may be beneficial for PD patients." [Emphasis added]*.

We may conclude that Cinnamon may be helpful in the treatment of Parkinson's.

Conclusion:

In the case of Parkinson's disease a safe, inexpensive, nontoxic, efficacious supplement might easily be developed based in this science. It may well offer substantial prophylactic protection against the onset of full blown symptomatology, and aid in the curtailment of disease processes when symptoms are evident. Those without active symptoms who have the dread LRRK2 mutation, or those with a family history of Parkinson's may be wise to take it, and those who display symptoms as well. Clearly, a diet rich in these pharmacologically active nontoxic compounds, may provide substantial benefit. I hypothesize as these studies are well known, that the only reason this obvious benefit has

yet to be brought to fruition and these ideas are not in current clinical practice, is due to the fact that they are natural molecules and hence, cannot be patented. When money dictates medical practice, people remain ill and *pay*. Inexpensive effective treatments which do not benefit a large drug company or industry, are simply left to wither. This is why those effective treatments which are currently available are toxic and costly.

Oxytocin:
The category of 'unprofitable but safe' molecular constituents is large. I will choose very quickly oxytocin (OT) as an additional example. With antidepressant properties (Panksepp, 1998) and possible benefits extending from neurosis and sexual dysfunction to schizophrenia, alongside clear effects in creating neural plasticity, there are a great many who might benefit from different modes of treatment. I have constructed several such treatments but am unable to fund the studies to advance them. Why is this safe neuropeptide not already in clinical practice after years of detailed study?

"Although intranasal OT appears quite safe and tolerable, there are several practical barriers to its therapeutic drug development in humans. These include the lack of intellectual property ownership of the actual hormone, lack of US Food and Drug Administration (US FDA) approval for any psychiatric indication and challenges around the actual availability of the drug." [MacDonald and Feifel, 2012]—Oxytocin in schizophrenia: a review of evidence for its therapeutic effect.

The list of stated practical "clinical hurdles" articulated in that study is painfully weak. Only money has prevented this substance from serving the greater good and health of man.

Profit from poison:

The other face of the 'patentable molecule', this dirty coin of the realm in for-profit medical science, is to be found in toxic harmful compounds which although of little or no clinical use, do cause harm to those who take them and yield profit for the companies which develop and pedal them to consumers and physicians.

Statin drugs (such as Lipitor or Crestor), are not heart protective, they are a money making racket. They do lower cholesterol, but the benefits have been falsified. These drugs can CAUSE heart failure, and sabotage the energy production mechanisms of the cell. They cause the problems they are supposed to prevent. These deadly pills are, however, some of the very best selling drugs of all time.

An enzyme is blocked by statins which thereby suppresses the production of a coenzyme: CoQ10—that harms the ATP production process. The drugs are toxic to mitochondria. They interfere with K2 production. That leads to hardening of the arteries. These drugs can *cause* heart failure! Glutathione is interfered with leading to oxidative stress. As is known, statins are associated with cataracts, liver damage, kidney disease, cancer, sexual dysfunction, depression, memory loss, and diabetes. How have we citizens and many doctors been fooled?

"Relative Risk Reduction" statistical analysis has been falsely applied to create the impression that, what are ~one/two percent benefits…revealing a worthless treatment, which harms a great many, are "in fact" 30 and 50 percent gains in the amelioration of pathology. With annual lobbying for the pharmaceutical/health giants amounting to ~$235,107,261 in 2015, it appears, *the government is in bed with the corporations*. The modern system of money and scientific advancement is flawed, ugly and dangerous. An entirely new way to fund science is required.

From an important PubMed paper on the topic (Okuyama et al., 2015), we can see what this means for each of us:

"An impairment of selenoprotein biosynthesis may be a factor in congestive heart failure, reminiscent of the dilated cardiomyopathies seen with selenium deficiency. **Thus, the epidemic of heart failure and atherosclerosis that plagues the modern world may paradoxically be aggravated by the pervasive use of statin drugs**. We propose that current statin treatment guidelines be critically reevaluated." [Emphasis added]. [Statins stimulate atherosclerosis and heart failure: pharmacological mechanisms. Okuyama et al.]

Just in case you imagine that to be a fluke, a simple mistake from our benevolent and protective monetary-based authoritarian government and for-profit scientific and medical industries…please note the following: It is official that the top grossing drug in America (in 2014) was ***an anti-psychotic***: Abilify. Complete with the usual anti-psychotic profile of side-effects, such as *permanent ticks and motor symptoms*: Tardive Dyskinesia. Now, prescribed for depression, typically with an SSRI (such as Prozac or Zoloft), which are themselves potentially associated with suicide upon withdrawal, and their own permanent condition, Tardive Dysphoria. Let's be clear: these "nonaddictive" SSRI drugs, do not themselves cause death upon withdrawal. SSRI drugs (used for depression and OCD) are only correlated with death via one of the most certain findings in all of psychiatry: low 5-HT is associated with suicide. Withdrawal therefore, may lead to death. Not an addictive drug. Simply know, if you stop from high doses, you may die by suicide. Taper very gradually, and only attempt withdrawal under a doctor's supervision, knowing, there may or may not be permanent damage. Now Abilify with its anti-psychotic profile of damage is also handed out like anti-psychotic candy for depression. American medicine...is a racket...nearly as lucrative as war. These drugs do most assuredly have a valid place in medicine, they are indispensable for those few who need them. Please do understand: using them as high dollar substitute jelly beans is not it. ~7 billion dollars in sales from Abilify, in one year (2014). Money makes for deadly, toxic medicine.

Where medicine intersects physics—new hope.

The greatest advance in our burgeoning understanding of the balanced biology which is health in the human animal, is to be found where physics intersects biological processes. Unfortunately, this pathway is fraught with danger. I will direct the reader to the chapter on Royal Rife for a taste of the reaction when a profound humanitarian crosses the sacred lines which separate the scientific disciplines, and dares to place the welfare of mankind before that of the potent powers which control what is, and what is not, acceptable scientific doctrine and truth. Rife understood that a knowledge of many disciplines is needed to accomplish any new and worthy thing, and of course he was correct. It is this which is

most forbidden: to connect the threads of truth together and then create a new inexpensive way to benefit mankind which does not *first and foremost* profit the large corporations and governmental agencies and thereby support the entrenched paradigms which dictate the acceptable limits of science and the course of its efforts.

In the profound experiments of Nobel Laureate Luc Montagnier we see the essence of genius and hope, and also the essence of human intellectual cancer: the closed mind of science. The most deep wellspring of knowledge is to be found between the many scientific disciplines. Just as Rife demonstrated, a knowledge of many scientific disciplines is needed to gain headway toward the elusive goal of our deepest understanding. His was a mind not bound by petty greed and vanity, and he endeavored only to provide for mankind a safe, painless and inexpensive way to cure disease. His successful cure for cancer and many other diseases has of course been brutally suppressed and now mankind pays and suffers. A new approach which looks deeply, and in fact FINDS the answer, is that single result which is most tragically forbidden. To cure is forbidden...unless there is profit. The hope of mankind, has been bought and sold. I will show you where it resides, and how we may reclaim it.

Now Luc Montagnier has indeed found for us, a taste of the same: new insight. Of course, he has been denounced, shunned and insulted, his superb work discredited. He knew it would happen and even so, advanced along the correct pathway without hesitation. Like Rife, Montagnier is less concerned with the opinions and money offered up by others, and more so with the important work which will unriddle the deepest questions, and change the broken fate of mankind. Now the esteemed Dr. Montagnier, humanity's obvious benefactor, the discoverer of the AIDS virus and winner of a Nobel prize is himself feeling the ugly stain and sting of public scorn and professional rejection...because of one simple fact: he is *exactly right*. He has found a piece of essence, of deep and abiding truth, and so dear friend we may rejoice, for there is hope. I will tell you of it.

If you click here, you will see something amazing: Montagnier Video. *Water Memory*

Physics understands what biology needs: electromagnetic fields and information.

All things…fields and particles alike, are based in information and 'observation.'
In my view, there is no conflict in these ideas and the moon is still there if you are not looking at it. Observation is simply informational exchange. Informational exchange is happening all the time through interactions throughout the physical system, and we as human observers are just a small contributor. No undue egoism or solipsism is needed to accept this truth: the universe is self-observing, and we, are part of the universe. The 'cognitive factor' is endemic to the system at all levels…information, is basic to physical processes.

Wheeler in 1990 stated: "It from bit symbolizes the idea that every item of the physical world has at bottom — a very deep bottom, in most instances — an immaterial source and explanation…"

As biology may be seen to take root in chemistry, and the basis of chemistry as Feynman was so eager to remind us may be found in physics, it is expected that biology also, must

have information as its foundational basis. Indeed, it is so. Here, perhaps we have located the missing link in science, the connection between two disciplines, a nexus within which the essence of the problem may be caught unaware, and the simplicity found to unravel a great and tangled mystery.

Montagnier has demonstrated the informational aspects which sustain disease. It seems from my analysis that the cure for many diseases, from cancer to Alzheimer's and a great many more, may be found here. Just as in the case of Rife, the effect of this vital discovery was to isolate Montagnier from the funds and means he needs to advance, while he is heaped with scorn, ridicule and rude insult. Montagnier's revolutionary work is criticized on two counts:

1. It is said not to be repeatable in any other lab.

2. It is said to be a false result due to contamination.

Please note how similar this set of criticisms is to those leveled at Benveniste, a subject I will touch upon in a few paragraphs. In this case, Montagnier answered these criticisms in such a certain and clear way, as to leave the matter beyond dispute. He had invited an independent film crew from the media to record the experiment and watch each detail. He extracted the electromagnetic signature of a particular piece of DNA and sent that as binary information over the internet in excess of 1000 kilometres, then, had another *independent lab* in Italy receive the information and instantiate it into water memory via a simple electromagnetic process. Electromagnetic informational transfer is also the same way the bodily system works, in my understanding. The stunning result is clear and undeniable: he was exactly correct. The information once added to the test tube of pure water over 1000 kilometres distant, reproduced via water memory the exact encoding within DNA which was then synthesized via PCR, even though there was no template of DNA in the water! Information alone, once placed via an EM field into water memory created a piece of DNA and reproduced the encoding with an accuracy of 98 percent from raw PCR ingredients! Electromagnetic fields can be informationally encoded, and those fields affect aqueous systems, which receive the encoded information and interact with chemicals and biological structures to create the form specified. Biology is based in physics, and physics is based in information. The film crew's presence assures us there is no trickery, the second independent lab doing the PCR synthesis from water over 1000 kilometres distant, assures us of the experiment's verification at another facility, and most importantly precludes any possibility of contamination. Of course, the proof made no difference. Scientific orthodoxy simply turned up the insults. Now you may know with certainty: however well educated, those who discount Montagnier are shallow. The fact, has been clearly demonstrated, and the objections answered. He was right, the orthodox view is incorrect. Science is in the wrong. Science demonstrates something akin to a neurosis: fixation.

Clearly, the discovery of truths which offer clear promise of cure, or nontoxic treatments which do not imply drug sales and profits, such as this new science with its promise of diagnosis and the possible cure of many diseases with simple, noninvasive fields...is not wanted. However, although the massive scientific establishment will reap no benefit nor excise any undue profit from such groundbreaking work, the human profit, should it be

developed, would be incalculable. The situation here is nearly akin to that of Rife. It could be different.

What If?

As I climb toward the noontime sky each step draws me higher, closer to the distant peaks. I pause, and look out over the valley within which my home is cradled. An amazing proliferation of motion and intricacy fill my eye, and life's enriching tapestry unfolds for me a vision of stunning clarity, each leaf and edge a painting etched in precise color wavering within a single wind, coherent and unified, yet, variant in the exact response of each leaf, and so, as a fractal relation in a multi-fractal system always tiny distortions added between the movements of one leaf to the next, the infinitesimal asymmetry of response creating a voluptuous effect, an effect as beauty is found in the asymmetrical distortions of classical Greek architecture, the errors are not errors, they are an essential intentional ingredient which creates beauty from the mundane, so was the breeze stroking the leaves of oak which dotted the distant hills, and I could see…all of it, from these many miles distant, now there within the sight, looking, watching…everything.

And there was more laid before me, hidden in plain sight and at the closest scales: Floating clear web tasting the breeze, the last drops of dew as round hearted prisms spattering the sun into giddy shards and then, a single leaf: within the intricate woven fabric of vein and fiber brocade, I could see the smallest structures and imagine the cells beneath, and so enter a labyrinth of detail and perfect intricacy, intimate and complex beyond measure—I am inside the maze of branched vein and green tissue, walking through intricacies of dendrite like webbing, and may look, and live, within the labyrinthian complexity and imagine the Minotaur awaits, a covetous aphid guards a drop of clear dew it has extracted from the vein of the world.

Oh how warm, intricately woven, changeable and subtle is life; health itself is a process, an evolution within the present toward the unknown. All of life is but change and growth, or we understand the fact of sickness, and decline. In its fixated state, science is revealed as Decadent. No less than that. What if it were different?

What if science had health and strength enough to look and admit, rather than refuse? This is the question which could liberate mankind.

We have recently published a paper: Quantum Information Medicine: Bit as It—The Future Direction of Medical Science: Antimicrobial and Other Potential Nontoxic Treatments, [Richard Lawrence Norman, Jeremy Dunning-Davies, Jose Antonio Heredia-Rojas, Alberto Foletti]. Please recall the fact that Benveniste's work was brutally discredited as unrepeatable. We in our own way, have found otherwise. Here, you may see a *similar effect* in several highly replicable experiments which demonstrate that information associated with drugs may be encoded into water memory via a 7Hz carrier frequency and does indeed affect biological systems, much as the molecule from which the information was derived*: Bit as It*. Perhaps there is a new way to approach medical pharmacology without toxins. Perhaps information can be used instead of drugs to gain drug effects. What sort of effects have we found? Here is the abstract:

"Experimental evidence has accumulated to suggest that biologically efficacious informational effects can be derived mimicking active compounds solely through electromagnetic distribution upon aqueous systems affecting biological systems. Empirically rigorous demonstrations of antimicrobial agent associated electromagnetic informational inhibition of *MRSA*, *Entamoeba histolytica*, *Trichomonas vaginalis*, *Candida albicans* and a host of other important and various reported effects have been evidenced, such as the electro-informational transfer of retinoic acid influencing human neuroblastoma cells and stem teratocarcinoma cells. Cell proliferation and differentiation effects from informationally affected fields interactive with aqueous systems are measured via microscopy, statistical analysis, reverse transcription polymerase chain reaction and other techniques. Information associated with chemical compounds affects biological aqueous systems, sans direct systemic exposure to the source molecule. This is a quantum effect, based on the interactivity between electromagnetic fields, and aqueous ordered coherence domains. The encoding of aqueous systems and tissue by photonic transfer and instantiation of information rather than via direct exposure to potentially toxic drugs and physical substances holds clear promise of creating inexpensive non-toxic medical treatments".

Yes, effects are produced on malignant cells, neuroblastoma cells and stem teratocarcinoma cells, and even upon the stubborn and treatment resistant MRSA! As to the procedure being replicable, the reader may enjoy the following papers:

Antimicrobial Effect of Vancomycin Electro-Transferred Water against Methicillin-Resistant Staphylococcus aureus Variant. Heredia-Rojas et al.

Entamoeba histolytica and Tricho- monas vaginalis: Trophozoite Growth Inhibition by Metronidazole Electro-Transferred Water. Heredia-Rojas et al.

Antimicrobial Effect of Amphotericin B Electronically-Activated Water against *Candida albicans*. Heredia-Rojas et al.

Experimental Finding on the Electromagnetic Information Transfer of Specific Molecular Signals Mediated through Aqueous System on Two Human Cellular Models. Foletti et al.

Differentiation of Human LAN-5 Neuroblastoma Cells Induced by Extremely Low Frequency Electronically Transmitted Retinoic Acid. Foletti et al.

Yes, it appears Benveniste was discredited and ruined, although he was exactly correct. The implications are staggering. What hope lies hidden here beneath this error? Exactly what you might expect: nontoxic, inexpensive medical treatments which could help millions. All this may still be pursued and developed. To what end remains unknown:

(With modifications) From Norman et al. 2016:

> "The following possibilities are just that: *possibilities.* The situation as it stands concerning our knowledge beyond the clear experimental evidence at present is plain: *We do not know*. Please review the following speculations with care, and assess the potential to be explored.

Unexplored Potential Benefits:

The future potential for inexpensive nontoxic drug-effect treatments, the possible alleviation of chronic pain and addiction are implied alongside delivery of the ***effects*** of drugs into the brain which themselves cannot cross the Blood-Brain Barrier (BBB). Future treatment strategies which currently remain undeveloped are therefore implied for diseases such as OCD and Parkinson's. Addiction of all sorts, from tobacco to heroin, may possibly be ameliorated. Drugs may potentially be subject to quantum replication yielding many doses from one dose of active substance. Those who are economically disadvantaged may, if this potential is realized, then have access to the effects of drugs which would not otherwise be available to them. *New approaches to antimicrobial therapies are implied*. Chronic pain, may potentially be addressed with information and so, perhaps without recourse to, or with less dependence on, addictive drugs. These potentials remain untested.

A Few General Points:

1) The BBB prevents many molecules from crossing into the system of the brain, so 5-HT cannot be delivered for OCD, and dopamine cannot be delivered in cases of Parkinson's. Many neuropeptides are also unavailable as vital therapeutic aids; 2) Addiction requires the administration of the very substance which creates the imbalance, be tapered in many doses to ease withdrawal, or, the pain of deep withdrawal results;

3) Protein folding is interactive with water structure. These techniques affect water structure. Each drug has a (structured) water signature. Long term research may well focus on defining the unknown relation between protein folding, water structure, electromagnetic distribution of quantum information, cancer and Alzheimer's.

These conditions/problems one and all *may* be amenable to this approach. Water easily gains access across the BBB, and/or a field may be directly applied. So, the entangled information associated with a drug or compound may be substituted for a drug, perhaps morphine, or dopamine. Now, as water (or a field) easily passes through or bypasses the BBB entirely, once encoded with the information and active effects of dopamine, a positive effect on Parkinson's is conceivably possible. Those neuropeptides which are currently undeliverable, with their subtle levels of behavioral specificity may now potentially also be available as therapeutic aids.

Perhaps, for chronic pain treatment and other such applications, a combined approach using the entangled information associated with a large dose in combination with a small dose of a real drug may be demonstrably effective. It is possible that addictive drugs may be avoided entirely. *Non-toxic informational drug effects may potentially help those afflicted with chronic pain*.

Quantum replication ("cloning") is implied: *A single dose of a drug may produce thousands of informational doses.* Drug costs could be reduced.

Potential for Addictive Amelioration:

1. Addiction is created by the substitution of an external compound for an endogenous compound.
2. Addiction's resultant self-sustaining homeostatic imbalance is reinforced with each additional usage of the drug.
3. As a drug such as Methadone is addictive and the process of withdrawal without a substitute drug is a slow one, the treatment itself in both cases fosters the problem, and often fails. Imagine the number of people using nicotine patches.
4. We propose that it may be possible to treat addiction in a new way which does not create the very problem it seeks to cure. The symptoms of withdrawal may well be quieted without a drug which creates more imbalance or the terrible pain of withdrawal, which leads to taking more drug to soften the blow or relapse. The addict may be administered water or a field infused with entangled information derived from their drug of choice. Their pain is thus reduced, and the problem not reinforced with more drug. This potential, now remains unavailable and untested.

Nobel Laureate Luc Montagnier recognizes the vital connectivity between quantum and biological processes. We believe he is correct.

Science has discovered many worthy and important things. There was a ~1.1 billion dollar cost for the vital discovery of gravitational waves, as reported by *Scientific American*.

We submit to the reader, that an equally important and even more *practical human benefit* could come from detailed, stepwise, conservative experimentation to derive reliable replicable results in this new area: *Quantum Information Medicine.* [Norman et al. 2016]

Now recall the new work of Montagnier. If science were to look here, what might happen? Imagine it. If this work were funded and closely investigated, we may soon have solved the riddle of the informational instruction set which creates DNA to sustain disease processes or health. That means two things:

1. A disease may be diagnosed in moments with a non-invasive scan.
2. A field may be applied to alter faulty encoding with correct patterning.

This is the *eventual potential*. Any disease which demonstrates resonance should be treatable and diagnosed in this way. As with the science of Rife, a resonant approach to disease and health is indicated. Here is found the common process basis of many diseases! There is a simple process nexus which may allow the informational alteration of fundamental disease dynamics without recourse to drugs, high priced treatments, or invasive techniques. In Electromagnetic Signals Are Produced by Aqueous Nanostructures Derived from Bacterial DNA Sequences he notes: "we have detected the same EMS in the plasma and in the DNA extracted from the plasma of patients suffering of Alzheimer, Parkinson disease, multiple Sclerosis and Rheumatoid Arthritis. . . . Moreover, EMS can be

detected also from RNA viruses, such as HIV, influenza virus A, Hepatitis C Virus." [In this latter case after 20 nM filtration]. As I have stated, a great many diseases share the same mechanism of reproduction, and so may all be treatable and diagnosable in one simple way. Field effects, as Rife found long ago, may well hold the future of medical practice. Imagine a hand-held device which scans, finds resonant aspects of specific disease and after diagnosis, instantiates healthy patterning into the bodily system via an informationally encoded field, without the use of drugs. This is our future.

CRISPR technology alters DNA. The Chinese are applying it to human embryos. It seems natural to assume DARPA is using it toward no good end. The entire natural system is at its mercy, and gene drives have been constructed to force artificial genetic changes through entire populations of species. DNA is now a cut and paste affair. The unpredictable dangers of gene drives and CRISPR may find a better alternative here, by way of mimicking the means of natural informational transfer in the bodily system.

Also, if my analysis of the connection between epigenetic expression and pathogenic unconscious elements in the transference is valid, it may be possible to simply apply epigenetic information and treat mental illness! One might be able to discover the genetic instructions, the information to send which would allow genes to be expressed as chromatin, or converted to heterochromatin and shunted to the nuclear periphery where they may remain inactive. If so, a variety of conditions may be treated through information fields to safely ameliorate pathology, while leaving dangerous physical alterations of genetic material or harmful drugs aside. Perhaps, this is the future.

As Rife found a common resonant mechanism whereby he could treat and cure a great many diverse diseases, so has Montagnier uncovered a clue which will yield the ultimate prize should we be wise enough to look, rather than paint this deepest of all work with shallow scorn. *What if science would look*?

Let us approach the future with our heads held aloft, unaccepting of the broken situation, ask aloud and insist on a direct, thorough and honest answer.

1. Can information do the work of drugs? Can a computer network be established which will permit distribution of inexpensive and safe drug effects to all those in need, for little cost? Can parasitic greed be left out of medical care so the poor and rich alike may benefit? Information is all but free to replicate and distribute. Can we lift the wretched boot of greed from the health of the poor, and curtail the use of poisons where fields will suffice?

2. Can we create again, what Rife already had accomplished? Can we use frequency specific treatments to disrupt disease processes and cure cancer and other ailments in a cheap and painless way? Might we conduct science as Rife conducted science? Can we again find the pleomorphic processes which underlie a host of pathologies and develop a proper cure as had been done so long ago, and brutally suppressed? To do otherwise, is clearly criminal. If you have technical skills or a lab which can work with filtered preparations, write me.

3. Now that Montagnier has successfully answered his critics, may we admit this and advance over the pathway he has cleared for us? May we look with great care to discover

the multitude of diseases which can be diagnosed and cured by way of the physics of informational biology?

Conclusion:

Today, the various distinct scientific disciplines have each achieved within their own sphere, great and substantial progress. Now we are on the cusp of a profound revolution to be spawned through the unification of the entire of science, where distinct branches of study and truth will at last be understood for the intrarelated parts which they are. Physics provides a basis for chemistry, chemistry for biology and information provides, as Wheeler understood, a deep basis for physics. Indeed, the human animal in his state of disease and health is deeply akin to the most distant physical processes, all born of a common seed of energy and information. I assert: biology and the physical universe are *information pleomorphic*.

Encoded fields may one day replace toxic drugs and be used to restore balanced organization to the human bodily system. The union between physics, biology and information theory, if properly focused and practically applied, holds the next approach to humanitarian advancement and medical treatment. Might we raise our voices and ask of science a single question: *What if?*

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