Covid / Jab O2 Detox

Many have accepted injections blind to the intended or actual short or long term effects.

Those harmed have no recourse because the Emergency Use Authorization from the FDA grants drug administrators a universal, complete and perpetual liability waiver for any substance labeled a vaccine.

The word vaccine on each label means no party can ever be held responsible for harm.

Everything happening now is prohibited by the Nuremberg Code of 1947.

Blood Survey Comparisons – 1 unvaccinated vs 3 vaccinated

This is a 4 person survey. Participant overview

- 59 YO M – Unvaccinated author. Feels great.
- 23YO F – Cardiomyopathy diagnosis after 2nd jab
- 60 YO M – No issues. Feels good – LiveO2 user
- 32 YO M – No issues. Feels great – LiveO2 user

Illness Models

There are five different illness models.

Assault	Contagion	Risk	Protocol	Mechanism	Symptoms
Synthetic Virus Injection	Injection	High	mRNA Mutation Scrub	Converts endothelial cells into spike protein factories. Spike proteins exit into blood, travel to lungs and are exhaled, thus affecting others. Other transmission routes possible.	Fever 1-3 days. Thrombosis, varied.
Spike Protein Poisoning	AirborneSkin ContactBody Fluids	Medium	Spike Protein Detox	Opens ACE2 receptor reducing resistance to infection. opportunistic infection. Spike protein seem to multiply because severity of symptoms. ,Those affected by spike poison Not *contagious*. ,	Headache, diarrhea, stomach ache, rash and lesions Not Contagious

Assault	Contagion	Risk	Protocol	Mechanism	Symptoms
Antibody Dependent Enhancement	N/A	High	Cytokine Storm Remediation	Occurs when excess antibodies, spike-protein, cause the immune system to respond to a pathogen challenge with a too-strong a-macrophage activity.Insufficient b-macrophage activity causes organs to be attacked without being rebuilt, eventually resulting in organ failure.A 2nd mode is over-targeted specific immunity enables non-spike pathogens to gain firm foothold before the humoral immune system activation resulting in over-developed non-covid infection to create acute immune challenge.	Organ failureSevere illness from non-covid infectdionAmplified non-spike infection from dysregulated immune system

Assault	Contagion	Risk	Protocol	Mechanism	Symptoms
Graphene Oxide Poisoning	Injection & Contaminated Foods	High	Graphene Oxide Remediation	Each 30 mg injection delivers an unknown amount of Graphene Oxide. Research to date shows that GO bio-accumulates and self assembles in nano-tubes which absorb environmental Electromagnetic Radiation causing blood injury.	Fatigue, failure to thrive, limited exertion & numerous other pathologies.
Respiratory Cold/Flu/COV Infection	Airborne	Low	Respiratory Recovery	Viral infection	Flu with changes/loss of taste and possibly smell.
Long Covid	Covid or Vaccine	Moderate	Long Covid Remediation	Monocytes/cytokines persist long beyond exposure resulting in spectral symptoms resulting from immune system dysregulation	Dyspnea, Headache, Brain Fog, Dizziness, hyper/hypotension, Exercise induced distress, Migraine, Tinnitis, tachycardia

Assault	Contagion	Risk	Protocol	Mechanism	Symptoms
Nanotech Attack	Vaccine or Aerosol	100%	Bluetooth Test *Nanotech Hydra-Parasite Remediation*	Engineered parasites consume blood and manufacture devices and graphene oxide unknown purpose. Parasites deployed since 1990s via aerosol, in injectable medications, and in food.	Accumulation of vascular calmari like sheaths described as soft actuators.

Spike Protein Prion Poison

mRNA gene altering therapy causes your body to manufacture a prion identified as Spike Protein Prions (SPPs). The gene therapy injection creates a synthetic virus which embeds in capillary cells to mutate DNA. The DNA mutation converts the endothelial, capillary, cells into spike protein factories that produce spike protein for the lifetime of the mutated cell, and its progeny.

Spike protein is an active toxin because it triggers cellular fusion. SPPs adverse affect cells upon engagement of the ACE2 receptor. SPPs unlock the ACE2 receptor like a key to a door and to prompt affected cells to fuse with environmental organisms, bacteria, etc.

The cellular fusion that occurs creates a multi-species infection because SPP affected cells fuse with the spectrum of fuse-capable organisms present at the time of SPP exposure.

In this model, the severity of the immune challenge depends on:

1. The amount of cells poisoned by SPPs
2. The concentration and pathogenicity of the fuse-capable organisms present at time of exposure;
3. The number of species of fuse-capable organisms at the time of exposure.

Spike protein infected people are diagnosed with “COVID” or COVID pneumonia because they exhibit symptoms of respiratory infection with highly variable severity due to the factors above.

Spectral infection tend to be more severe than than a mono-viral infections like the cold, flu or SARS. Mono-Viral infections challenge the immune system with a single virus. A spectral infection challenge the immune systems with multiple pathogens at the same time. Individuals with “spectral” infection will have more severe symptoms. ends to be more severe because the immune system must simultaneously overcome multiple pathogens.

By contrast the prion spike protein just unlocks cell and leaves it open. It would seem the morons who engineered the jab to compel recipients bodies to spew this prion never tested it on any creature other than tadpoles and humans where they discovered that the spike protein penetrates the blood-brain barrier. The statement that spike protein interference with ACE2 receptors is safe is simply absurd – Ever heard the phrase “Monkey with a handgun?

Spike proteins affect all cells with CD4 receptors:

- oral and nasal mucosa, nasopharynx,
- lung as alveolar epithelial cells,
- stomach,
- small intestine via enterocytes and colon,
- heart;
- skin,
- lymph nodes, thymus, bone marrow,
- spleen, liver, kidney,
- and brain.

The CDC web page says: *Prion diseases are usually rapidly progressive and always fatal.* The spike protein is a prion is a super small disease agent similar to those which cause cause mad cow disease, kuru, and other conditions. There is no data, or clinical research, showing that spike protein is safe in any way.

The JAB Sequence and SPP/SPA

A person who receives mRNA injection goes through the first stages of pathology.

1. Synthetic virus injection
2. 75% of the synthetic virus travels via lymph to the bloodstream
3. Synthetic virus circulates in the bloodstream until absorbed by capillary (endothelial cells) or eliminated by immune system
4. Synthetic virus penetrates endothelial cell
5. Synthetic virus releases mRNA packet to create Mutated Endothelial Cells, or MECs
6. MECs and their progeny produce spike protein for their lifetime;
7. Progeny of MECs produce spike protein;

8. SPP concentration remains proportional to the number of MECs;
9. The immune system creates Spike Protein Antibody (SPAs) to neutralize SPPs;
10. SPA concentration is regulated as necessary to neutralize toxic SPPs;
11. Excess SPA cause Virus Enhanced Disease or Immuno-Pathology in laboratory animals;
12. Challenge with a virus bearing Spike Protein Prion
    1. Triggers an SPA positive engagement from the immune system
    2. Because the system is already overloaded with SPPs;
    3. The immune system recognizes SPPs as an internal toxin (endogenous);
    4. Does not trigger, or disables phase-2 macrophage activity;
    5. Programmed absence of phase-2 macrophage enables phase-1 response proceed unchecked; to destroy organs;
    6. Unregulated cell destruction progresses until the organ is destroyed;
    7. An individual with destroyed lungs dies;
    8. The dominant feature this process is excess cytokines thus it is called a cytokine storm;
    9. Death.
13. thus enable to SPP and SPA production continues unregulated as long as mutated endothelial cells produce SPPs;
14. SPP/SPA concentration remains elevated and incidental to ;
15. Convert endothelial cells into spike protein factories;
16. Contamination of your body with graphene oxide turns you into a walking antenna with likely vulnerability to 5G;
17. Your body will shed spike protein and can make others sick;
18. The continuous supply of spike protein made by our own cells will cause your body to have an unnatural number of spike protein antibodies. An unnatural abundance of these spike protein antibodies may be cause an inappropriate overly agressive immune response, or cause other problems because the effects of spike protein administration are unknown in scientific literature;
19. Emerging evidence suggests DARPA hydrogels may self assemble into RFID and other devices with bio-energetic interfaces to unknown effects.

Spike Protein Poisoning is real

Warning – Vaccinated people shed spike protein prions that make others sick. Spike proteins engage ACE2 receptors to open cells to fuse with environmental agents like unlocking a door and leaving it open.

A spike protein shedder that touches or breathes near others emits spike proteins. These particles are much smaller than a virus or bacterial and are very communicable.

Prions like spike proteins are very durable. Because their structure is simple and durable they are more resistant to disinfection from heat and oxidation agents. It takes more sunlight or disinfectant to break them down.

Unvaccinated people should distance from anyone who is vaccinated. In the last 2 weeks I

know of 2 unvaccinated adults that were hospitalized with pneumonia after exposure to spike protein shedders. They were incorrectly diagnosed with “Bilateral Covid Pneumonia”. Shedded proteins can kill a weak unvaccinated person.

At the time of this writing I know of 6 other individuals who reported respiratory and dermatological illness after exposure to vaccinated people. All have a long history of good health. Four were exposed in a clinical setting after being exposed to a couple who was vaccinated two days prior to arrival at the clinic.

Alternative Covid therapies have variable responses. One of the seriously affected is a practicing naturopath with a lifelong history of good health. Prior to hospitalization he underwent comprehensive early treatment which did NOT prevent worsening:

- 50g IV Vitamin C infusions
- Remdesivir IV (Anti viral)
- Oral antibiotics
- Ivermectin
- hydroxychloroquine
- High dose Ozone UBI
- Many other supplements

Spike-poisoning is not contagious. This person’s spouse was in continuous attendance in the hospital. She experienced no symptoms and no sign of disease in spite of 24×7 contact with the affected under very stressful conditions. The hospital room was like a prison cell with a non-private toilet in the corner. The hospital had too few nurses on duty due to staff vaccine mandates.

Short Lesson – DO NOT GET SICK.

This protocol is designed to neutralize received a diagnosis Bilateral Covid Pneumonia. Since this person was poisoned with spike protein, and not infected by COVID-19. the diagnosis was erroneous:

1. The person is NOT contagious and did not require quarantine;
2. Treatment should emphasize neutralization of spike protein prion exposure;

The two others became quite ill after casual with a vaccinated couple. Two others were developed severe illness after mild social contact vaccinated people.

Virus infection versus Spike Protein Prion poisoning

Normal infections are transmitted when a self-replicating virus infects a cell. The infected cell is mutated by the virus to become a virus factory. Viral particles are then transmitted to others as transmission. This is how the cold and flu propagate.

Prion transmission is more like poisoning than infection. Vaccinated people are prion factories who poison those whom they contact. Jabs that inject mRNA genetic manipulation transforms the recipients body into a spike protein factory.

The spike protein prions enter the bloodstream from the capillary beds into venous blood which travels to the lungs. Vacuum of inhalation pulls the tiny proteins into the alveolar

sacks, exhale pushes them out with exhaled air.

Anyone who inhales that air absorbs the prions and becomes affected by the spike protein prions, but does not pass them on. This means spiked people are generally not contagious.

Vaccine Transmission

Newly vaccinated people, less than about one week, may be able to pass synthetic virus particles by air or touch. The hypothetical mechanism is that as the inoculated vaccine passes through the lungs, it can be exhaled and passed to a recipient.

If the inhaled virus comes into contact vulnerable tissue, then the vaccine may mutate those cells to perpetually produce spike protein thus subjecting the recipient to a low-dose of vaccine.

The vaccine is similar to the virus in that it infects target cell and mutates the cell to produce spike protein. It seems unlikely this low dose exposure would produce a high concentration of

spike protein. It also seems reasonable that a recipient would overcome the exposure via natural immunity.

That said, nobody really knows.

The Delta Variant is Spike Protein Prion Poisoning:

- Severe diarrhea
- Severe intestinal cramps
- Splitting headache
- Severe flu symptoms
- Lasts 4-10 days

The Mystery Detox Problem

Some ingredients in injections remain secret while the effects of others remain unknown. No real healer would ever administer unknowns like this to anyone. When this happens, where do you start?

Detoxification is a sequence:

1. Neutralize by oxidation and reduction – use lots of oxygen / CLO2;
2. isolation by chelation or dilution – use natural detox agents / Glutathione / EDTA ;
3. flush by circulation – exercise and maximize lymph and blood flow;
4. filter by flow through kidneys or liver – exercise and blood flow with oxygen to power detox in liver and kidneys;
5. elimination by urine feces or perspiration – use charcoal to absorb toxins to prevent

reabsorption;
6. maximize metabolism and energy production – oxygen and exercise;
7. minimize challenge to the system – support innate immune system during process.

The mystery detox is the only the first half of the problem. Remember – the injection altered the recipient's cells to be a perpetual source of spike protein.

Dr. Charles Haffe explains that 75% of the mRNA particles exit the injection site to deploy the vaccine to convert endothelial cells throughout the body into spike protein factories. He shows that about 60% of his patients test positive for the D-Dimer test indicating capillary occlusion is a valid mechanism of injury. The D-Dimer tests for recent clots.

His study presumes the clotting mechanism is triggered by the injection. This seems false because the clotting mechanism is triggered by the mutation in the endothelial cells, which is likely to progress well beyond his testing interval of one week.

The clotting mechanism is triggered by appearance of spike protein in the surface of the endothelial cells. Testing at 30 days is likely to show near 100% clotting. Telegram Source Link.

Graphene Oxide Poisoning

Graphene oxide is a newly discovered ingredient in four mRNA formulas. It is a well known toxin/poison and is not considered safe for human or animal use. These articles discuss Graphene Oxide Toxicity:

- Nanotoxicity of Graphene and Graphene Oxide
- Toxicity of Graphene Family Nanoparticles
- Graphene Toxicity study in Rats
- Graphene Magnetism (defines vulnerability to EMF absorption)

This video shows nanotubes from a 23YO F diagnosed with cardiomyopathy who received 2nd

injection 6 months prior.Lessons:1) Graphene particles self-assemble into nano-tube structures;2) GO artifacts persist 6+ months;3) GO structures correlate to blood injury.This is from 23 year old female diagnosed with cardiomyopathy.I suspect, but cannot prove, these structures gather environmental Electromagnetic Radiation frequencies that correspond to the antenna’s length. This energy transfers to nearby the blood causing damage.This aligns with Dr Young’s assertion GO contaminated blood exhibits identical to radiation damage.

Spike Protein Factory Problem

The injections are engineered to convert the affected cells into spike protein factories. The injection and fluid flow process in the body exposes two main groups of cells to genetic alteration. Two groups of cells are exposed to the bulk of the active injection ingredients.

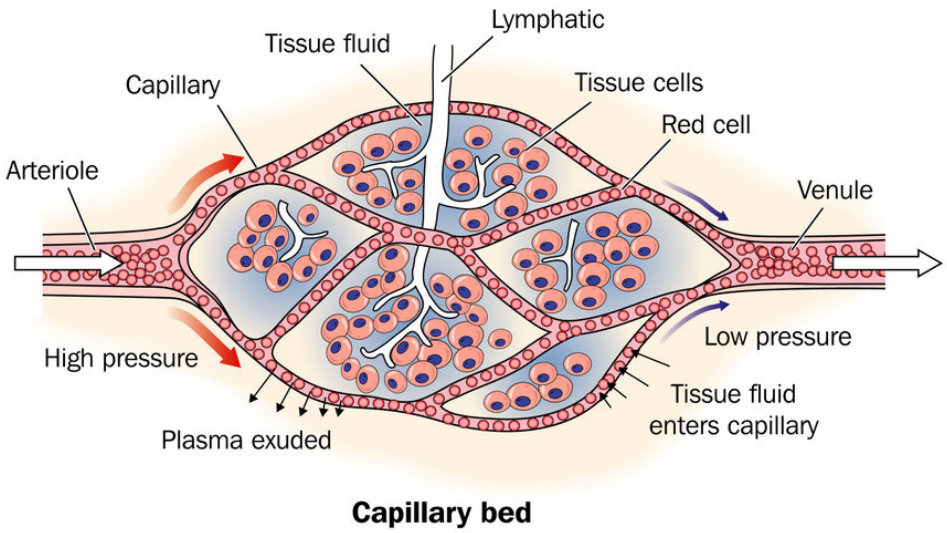
- The muscle cells near the injection site are exposed to the chemicals until the fluids are swept into the blood;
- The vascular endothelium – as inner lining of the pipes that carry blood.

When we look at the vascular system, its easy to see which cells are going to absorb the nano-particles. Blood squirts fast through and veins so nano-particles are unlikely to penetrate.

The only place the nano-particles will move slow enough to dwell long enough to penetrate a cell membrane is in a capillary.

This means that the capillary cells will be the eventual habitat for the spike protein factories.

Now that we know this – we know how to help the immune system do its job.



Detail of capillary bed

How Detox Works

The protocol is designed to help your immune system to eliminate mutated cells with natural antibody remediated immunity.

LiveO2 Adaptive Contrast training opens your vascular system and squirts blood as forcefully as possible to the capillaries. This squirt function pushes antibodies from immune system toward mutated capillary endothelial cells to maximize the probability that antibodies will reach and then tag mutated endothelial cells to them for elimination. This process is the same as the body uses for any virus-infected cell.

Under vaccine-injured vascular conditions, mutated cells are hidden from the immune system as platelets cause microscopic clots that inhibit blood flow. Low flow through affected capillaries hides mutated cells. Survival of mutated cells enables ongoing production of spike

protein resulting antibody overproduction and shedding.

Once the mutated cells are eliminated, they are replaced by healthy cells.

Endothelial Scrubbing

LiveO2 with Adaptive Contrast specifically targets the capillary beds, endothelial cells, to deliver super oxygenated plasma to the venous end of the capillaries. The mechanism is well understood:

1. Take the vascular enzymes 30 minutes before exercise to maximize circulating concentration during LiveO2
2. Take Niacin 5 minutes before exercise to dilate the capillaries
3. Set the system to low oxygen and exercise
4. Exertion under low oxygen causes the heart to eject the maximum volume of blood by heart rate and ejection volume

5. Low oxygen respiratory mixture cause the vascular system to dilate
6. This combination delivers maximum pulse force of of blood to capillary beds
7. The switch to rich oxygen super-saturates blood plasma with oxygen which quickly reaches the capillary beds;
8. The super oxygenated plasma opens the capillary beds by enabling endothelial cells to eject accumulated sodium
9. Open capillaries restore blood flow to capillary beds
10. Restored blood brings immune system sensor cells to the capillary bed
11. Sensor cells check and tag mutated endothelial cells
12. Tagged cells trigger antibody mediated destruction of mutated cells
13. Non muted cells survive and replace destroyed endothelial cells
14. Process replaces mutated cells with healthy ones;
15. Progressive escalation of hypoxic challenge level flushes blood in the spleen.

Data observation. No active liveO2 users (3000+), including the authors father, now 86, have reported adverse response to the 2x injections.

This supports, but does not prove, that regular training on LiveO2 culls endothelial cells that would produce spike protein.

The protocol is simple. Train with LiveO2 AC to capacity. Start easy and work up. Higher heart rate and pulse will force more immune cells through the capillaries for better results.

Q/A

mRNA Mutation Scrub

This program is designed to:

1. Transport immune system to capillary beds to overcome infection by synthetic virus;
2. Remediate of spike protein in serum to curb overproduction of Spike Protein Antibodies which leads to Antibody Dependent Enhancement which leads to Cytokine Storm Scenario
3. Optimize of innate immunity to minimize escalation of infection to engage humoral immune system – this helps minimize likelihood of cytokine storm reaction.

This day plan takes about an hour a day. Click on the link to access a source for suggested products.

Video at right explains the elements of the protocol.

mRNA Mutation Scrub Day Plan

Activity	When	Purpose	Mechanism
Train LiveO2 ACAdaptive Contrast strongly recommended	Morning	Flush, Immune to capillary beds, Maximize Immune function maximize Oxygen Levels. Sustained Hypoxic training flushes blood out of spleen where GO accumulates.	Filtration oxygenation, oxidation. Open access to endothelial capillary structures to enable immune system to find and eliminate spike protein mutated cells to stop ongoing spike protein production.
Niacin 250-500 mg	10 min Before LiveO2	Open capillaries during training	Vaso-dilation to improve access to capillary beds.
Aspirin	10 min Before LiveO2	Helps maintain blood flow through capillaries during workout. Normally spike proteins would cause elevated platelet activation causing clot tendencies.	Retards Platelet Activation to inhibit clotting in capillaries.

Activity	When	Purpose	Mechanism
Thymus Extract 500 mg	10 Min Before LiveO2	Optimize Immune	Humoral Immune support
Vasquzyme	1 capsule 30 min prior to LiveO2	Dissolve micro-clots in capillaries	Vascular enzymes nattokinease, serriptase, etc.
Sauna Hyperthermia	After Active WorkoutCore temp 104	Detox, Aiuto Pahgocy, Produce Heat Shock Protein	Hyperthermia
MMS / Chlorine Dioxide	Morning	Neutralize spike proteins in serum to minimize transmission and antibody production	Oxidizer agent – antiseptic.
Potassium Iodide	Morning	Iodize mucus to maximize innate immunity	Mucosal Antiseptic

Activity	When	Purpose	Mechanism
Lipid Selenium 5-10 Drops	Morning	Optimize glutathione Break down stress hormones Mobilize cellular toxins	Lipid bound selenium targets pathogenic cells to disrupt metabolism. Candidate to disrupt metabolism of mRNA mutated cells.
Vitamin D 10000 iu	Morning	Cellular immune defense	Enhance Cellular Immunity to opportunistic infection
Charcoal Capsules x6	Before Bed	Absorb bile waste & chelate blood as passes through gut from ToxDetox enabled release	Toxin Absorbent
ToxDetox Suppository	Before Bed	Neutralize Graphene Oxide, bolster anti-oxidant reserve, detox.	Glutathione and EDTA

Activity	When	Purpose	Mechanism
https://www.healthline.com/nutrition/intermittent-fasting-guide#what-it-is	All day -1 meal	Auto Phagacy & Detox	Digestive system rest enables other systems to perform better.

Spike Protein Shedding

Spike protein shedding begins when a vaccinated person capillary cells starts making spike protein. This process continues as long as the mutated capillary cells remain able to produce spike protein. The Vaccination Recovery Program should in theory end spike protein shedding by enabling the immune system to eliminate the mutated cells.

The *Vaccine* is an engineered as a bioweapon that targets both the injected recipient and the unsuspecting unvaccinated personwho comes into social contact with them. The media narratives of Delta Variant and breakthrough infections are deceptions that cover up the nature of the weapon. The apparent truth has been buried by ruthless murderers and liars including:

- The media;
- The FDA;
- Medical industry and drug companies;
- those who mislead anyone willing to believe them.

Shedding Model:

1. Vaccinated person is generating spike protein;
2. The spike protein goes into the blood from the capillary beds;
3. The blood goes first to the lungs, then the spike proteins are exhaled;
4. Recipients are exposed to the spike protein,
5. An unvaccinated person absorbs spike proteins:
    1. By inhalation from a vaccinated person;
    2. By skin contact from a vaccinated person;
    3. By sexual contact with a vaccinated person;
    4. Recipient cells experiences Spike Protein Poisoning
6. The vaccinated person sheds as long as mutated cells produce spike protein.

Spike Protein Poison Remediation

Spike protein poisoning occurs when an unvaccinated person is contaminated by spike proteins from a vaccinated person who is shedding spike protein. This protocol is designed for the unvaccinated person to overcome the effects being spiked.

Pathology Model

1. An unvaccinated person absorbs spike proteins exhaled from a vaccinated person;
2. The spike protein engages with the recipients ACE2 receptors primarily in sinus mucous membranes and lungs;
3. The cells recipient’s ACE2 receptors are set into “fuse” mode ready to merge with any compatible particle, virus, bacteria, etc;
4. Unregulated cell fusion begins resulting in affected cells absorbing bacteria and normally natural flora;
5. These fusions “infect” spike-triggered cells with unusual but generally natural cellular dysfunctions;

6. With weakened immune systems, multiple simultaneous infections boggle the immune system with multiple concurrent infections;
7. The multiple infections create a “respiratory illness” symptomatically identical to a respiratory virus, even though no virus is present;
8. The infection persists until the immune system resolves the multiple simultaneous infections;
9. Severity is governed by:
    1. The number of cells affected by spike protein exposure;
    2. The pathogenicity and population of potential pathogenic organisms already present in the recipient;
    3. The functional status of the innate immune system – which prevents spike proteins from cellular entry;
    4. The functional status of the humoral immune system to seek and destroy spike affected pseudo-infected cells;
10. These fusions “infect” affected cells with the environmental array of – that cell must be noted and eradicated by the immune system;
11. The variability in environmental fusion candidates reflects the number of simultaneous “infections” the immune system must handle;
12. The concentration of the adverse organisms in the affected tissue and the number spike affected cells determines the scope of the infection;
13. The recipient recovers when the fusion scenario completes;

Spike Poison Recipient After Effects

Likely not contagious.

Under normal circumstances the recipient’s body will not begin producing spike protein.

Likely immune or resistant to future spike poison

The immune reaction will generally recognize thus create a regulated amount of Spike

Protein Antibodies. These antibodies will enable the body to detect and neutralize spike protein prior to remediate severity of future exposure.

Not prone to Cytokine Storm

A spike poisoned person will generate a physiologically appropriate amount spike protein

antibody to remediate the initial exposure.

The person will have a normal regulated amount of antibodies, will provide future protection, but will not be in an overabundance to disrupt normal immune function. In other words the spike protein antibodies will appropriately sensitize the immune system protecting from future exposure, but unlike a vaccinated person, create vulnerability a cytokine storm.

Spike Protein Poison Recovery Day Plan

Activity	When	Purpose	Mechanism
Train LiveO2 ACAdaptive Contrast strongly recommended	Morning	Flush, Immune to capillary beds, Maximize Immune function maximize Oxygen Levels.	Optimize immune function, Energy production in affected cells.

Activity	When	Purpose	Mechanism
Thymus Extract	2 capsules	Optimize Immune	Humoral Immune support
Sauna Hyperthermia	Core temp 104	Detox, Aiuto Pahgocy, Produce Heat Shock Protein	Hyperthermia
Vasquzyme	Before Bed	Breakdown vascular artifacts & strange proteins	Enzymatic digestion
Activated Charcoal 3x	Before Bed	Absorb cationic cytokines & spike protein	Strong negative charge absorbs/binds positive charge
Glutathione 1500 mg	Before bed	Neutralize Graphene, Mop Spike protein	Glutathione EDTA Chelation
Liposomal Myers Cocktail	Every 3 hours	Maximize body-wide concentration of liposomes to fuse with spike-engaged cells to reduce infection	Reduce scope of infection by pathogenic agents by enabling lipids to fuse with ACE2 Activated cells
Intermittent Fasting	All day -1 meal	Auto Phagacy & Detox	Digestive system rest enables other systems to perform better.

Activity	When	Purpose	Mechanism
Lipid Selenium	10 drops Morning	Optimize glutathione Break down stress hormones Mobilize cellular toxins	Optimal Glutathione Levels

Cytokine Storm Remediation Protocol

This occurs when the body has an overabundance of spike protein antibodies and initiates the macrophage 1 with a retarded macrophage 2 response. There is no accepted medical treatment for Cytokine Storm which is generally considered fatal.

The core protocol is activated charcoal by Dr Janossy. The apparent mechanism is that the charcoal to remediates alkalosis by pulling cationic ions out of the blood and enabling elimination by stool.

Cytokine Storm Remediation Day Plan

Activity	When	Purpose	Mechanism
Train LiveO2 AC	Morning	Maintain O2 levels to preserve organ function.	Maintain oxygen levels throughout the body for resilience

Activity	When	Purpose	Mechanism
Activated Charcoal 6 caps	Every 2 hours or on symptom worsening	Absorb bile waste & chelate blood as passes through gut from ToxDetox enabled release	Negatively charged anions capture positively charged blood toxins as blood travels through gut.
Mono Ammonium Phosphate Titration (Special order – call)	Urine pH greater than 6.5	Preserve organ function by remediating acute tissue alkalosis.	Neutralize extracellular alkalosis in viral infections. US Patent 4301150
Glutathione 1500 mg	Before bed	Increase anti-oxidant buffer reserve and resilience.	Absorb toxins & increase stress reserve.
Liposomal Myers Cocktail	2 ounces daily	Support tissue oxygenation and stress tolerance with nutrients	Magnesium chloride, B Vitamins, Vitamin C
Lipid Selenium	10 drops	Optimize glutathione Break down stress hormones Mobilize cellular toxins	Optimal Glutathione Levels

GO Poisoning Day Plan

Graphene Oxide is a common finding in blood samples. It has cleared quickly with LiveO2 workouts.I speculate the liver filters particulates as blood passes through the portal vein.

Experiments have shown approximately 75% of GO particulate are removed in a single 15 minute workout. Regular users tend to exhibit little to now blood particulates.

Activity	When	Purpose	Mechanism
Train LiveO2 AC	Morning	Flow blood through liver to filter particulate. Maintain max O2 levels in liver to optimize liver function.	Maintain oxygen levels throughout the body for resilience
Activated Charcoal 6 caps	Every 2 hours or on symptom worsening	Pre-install in gut to statically bind Graphene Oxide to prevent re-absorption through gut wall.	Negatively charged anions capture positively charged blood toxins as blood travels through gut.

Long COVID Protocol <developmental>

Long haul describes symptoms that exceed the normal recovery cycle – nominally exceeding about 6 weeks.

The model presumes three elements:

1. A significant percentage of the body harbors a pathogen;
2. The immune system is hyper-activated by monocytes & cytokines
3. Critical to throttle but progressively enable immune response.

Plasma dissolved oxygen is a very potent immune modulator because a high level of oxygen enables maximal energetic resources for all immune cells. This is based on the Krebs cycle and aerobic versus anaerobic energy creation:

- Aerobic: 38 ATP per glucose molecule
- Anaerobic 2 .ATP per glucose molecule
- Oxygen enables all cells, including Immune cells, white blood cells to operate at 19 x higher level

The 19x energy factor occurs very early in the LiveO2 workout. Note that the early workouts will be limited to ONLY 15 seconds of oxygen in the entire workout. The goal is to modestly bump the O2 level thus throttling the physiological response:

1. 90 seconds of hypoxia facilitate vasodilation for “limited and controlled” release of monocytes and cytokines from endothelial tissue
2. 15 seconds of oxygen case a “modest” and transient increase in plasma dissolved oxygen to cause a *limited* immune boost.
3. Progressively increase cycles according to tolerance

Day Plan

Activity	When	Purpose	Mechanism
Train LiveO2 AC	Morning	Flush vascular system and gently boost immune system	Progressively add cycles to tolerance

Activity	When	Purpose	Mechanism
Activated Charcoal 6 caps	Every 2 hours or on symptom worsening	Absorb bile waste & chelate blood as passes through gut from ToxDetox enabled release	Negatively charged anions capture positively charged blood toxins as blood travels through gut.
Glutathione 1500 mg	Before bed	Increase anti-oxidant buffer reserve and resilience.	Absorb toxins & increase stress reserve.
Liposomal Myers Cocktail	2 ounces daily	Support tissue oxygenation and stress tolerance with nutrients	Magnesium chloride, B Vitamins, Vitamin C
Lipid Selenium	10 drops	Optimize glutathione Break down stress hormones Mobilize cellular toxins	Optimal Glutathione Levels

Nanotech Attack Remediation

This protocol is in response to merging documentation of nanotech artifacts appearing as a result of vaccination based on hydrogel and other unknown technology. Beware – this is scary shit.

See Also:

- Protocol to Test for injected MAC address Nano Tech

References: (click to view)

Strategy

This is my opinion on how to disrupt the self-assembly and operation of nanotechnology inside the body.

Assumptions:

- Graphene Oxide is a critical substrate because it is being factored into the food supply and is undisclosed
- Electromagnetic signals via 5G+, and possibly StarLink are the intended control and data interfaces (Celeste Solum)
- Self assembling nano-tech is most vulnerable early in the exposure because of the need

to scrounge materials from the body

- The technology will use a combination of control energetic, power energetic and material substances to
    - Seed = Hydragel + antenna – to kindle the process of nanotech formation based on brownian motion to gather initial resources
    - Control Energetic – Homeopathic – that establishes the assembly pattern imprint for the devices
    - Power Energetic – Like 5G or other High Frequency raw power for manifestation of macro-influences on matter

Strategy to disrupt propagation of :

- Deprive essential ingredients –
    - graphene oxide to inhibit formation of self assembling structures
    - Supply cationic absorbents to bind positively charged cations
    - Maximize absorption of cationic metals via diet & maximal detoxification
- Minimize control signal exposure that provide control signals and energy :
    - 5G & EMF signals
    - Bluetooth
    - Use avoidance and shielding to minimize signal exposure
- Maximize disruptive signals to interfere with formation of nano devices
    - Maximize zeta-potential in body fluid for maximal separation
    - High frequency pulsed electromagnetic signals
    - Hormetic radiation to break up gestational unnatural structure
- Maximize stress foreign body response via immune system:
    - Maintain highest possible immune system for foreign bodies
    - Maintain maximum blood purity by frequent filtration by maximal flow through Liver/Kidneys
    - Maximize blood concentration of organic enzymes known to break down structures
        - Vascular enzymes – nattokinase / serriptase & others
    - Maximize chalcogen concentrations for purification
        - Aerobic Metabolism – Oxygen
        - Systemic Oxidation – Sulfur(Glutathione Creation)
        - Systemic Oxidation Optimization – Selenium(Glutathione Recycling) – Toxin

Neutralization
        - Nano-Oxidation substrates / Tellurium(Mitochondrial) – Monkey wrench oxidation
- Augment Autoimmune Performance with known anti-parasitics
    - Ivermectin
    - Quinine

Day Plan

mRNA Mutation Day Plan plus the elements below

Activity	When	Purpose	Mechanism
Glutathione 1500 mg	Before bed	Neutralize Graphene, Mop Spike protein	Glutathione EDTA Chelation

Activity	When	Purpose	Mechanism
Liposomal Myers Cocktail	Every 3 hours	Maximize body-wide concentration of liposomes to fuse with spike-engaged cells to reduce infection	Reduce scope of infection by pathogenic agents by enabling lipids to fuse with ACE2 Activated cells
Lipid Tellurium (Under development)	10 Drops Morning	Optimize glutathione with minimum sized chalcogen	Monkey wrench in nano-particle formation. Presence ultra small chalcogen would not be anticipated by engineers and likely to disrupt nano-device function. Will be absorbed in place of selenium – but seems likely to cause dysfunction.
ePad under Liver	Overnight	Maximize zeta potential in liver overnight to protect detoxifiation	Cell
PEMF Liver – 15 min	Daily At convenience 10 Min Liver 5 min thymus	Blood Energy Optimization Disrupt Nanoparticle formation Maximize blood zeta potential Optimize liver energy Protect liver from infection	Pump Transmembrane potential of body cells. Disrupt metabolism of cells not operating at body harmonic frequency.

Tracking Tool Candidates

Vascular Age Tracking

- iHeart internal Age Tracker – general purpose tool but appears indicative on personal experiments
- Vascular inflammation interferes with vascular elasticity. This tool is a good candidate to track vascular performance and age.

Heart Rate Variability Utilities

- Overnight HRV Tracking: Fitbit / Biostrap / Oura Ring

- emWave Pro by Heartmath – Heart Rate Variability is a good whole body health indicator

References & Research

Toxin Candidate List

The Package Insert sheet for J&J and other vaccines say “Page Left Intentionally Blank”. This list is based on the best sources at the time and disregards traditional information sources because nobody really knows what’s in those injections.

Toxin	Nature	Known Detox Agent	Problem
Mutagenic mRNA Synthetic Virus	Man made particle that acts like a virus to Infects cells mutate DNA to create unregulated production spike protein prion.	Immune system via Spike Protein Antibody, Mutated DNA Detection, TNF (speculative). Overcome capillary obstacles to immune system reaching capillary beds. The source of spike proteins must be eradicated before spike proteins & Spike protein antibodies can be controlled.	Mutated cells become spike protein prion factories with unknown and potentially perpetual spike protein production.

Toxin	Nature	Known Detox Agent	Problem
Spike Protein Prion	A protein that activates ACE2 receptors on cells surface to trigger adsorption, or merger of a lipid particle into a cell.	Adsorption Decoy Liposomes: as oral Myers Cocktail, Vitamin C, glutathione, etc Neutralizers:, Heat Shock Proteins, MMS, Shikimic Acid, glutathione	Unregulated production of spike protein prions likely cause: 1. Unregulated production of spike protein antibodies; 2. Shedding of spike protein prions via respiration, perspiration, flatus, which adversely affects others; 3. Erroneous ACE2 activation triggers erroneous lipid fusion; 4. Erroneous lipid fusion causes cells to erroneously fuse with unnatural lipid nanoparticles; 5. Unnatural fusion causes cellular contamination; 6. Erroneous lipid fusion may cause ACE2 triggered cells further uptake of Mutagenic mRNA Synthetic Virus resulting in further over-production of spike protein; 7. Erroneous lipid fusion may cause ACE2 activated cells to more readily fuse with bacteria or viruses resulting in defeat of cellular immunity..

Toxin	Nature	Known Detox Agent	Problem
Spike Protein Antibody	Spike protein antibodies tag to any spike protein. This includes natural cells that properly use spike protein to access ACE2 receptors.	Time. Stopping spike protein prion load enables the body to normalize antibody levels. Optimize innate immune system function to protect the body from antibody mediated infection to enable body erode excess antibodies to enable natural a/b macrophage immune balance to avert immune-pathology.	Optimize other immune system function to minimize probability of infectious agent that breaches innate immune system to trigger immune-pathology. Excess spike protein antibodies cause the body to over-react killing infected cells faster than they can be replaced resulting in organ destruction.
PEGylated lipid nanoparticles	Synthetic virus shell which is adsorbed into the cell membrane of vaccine infected cells. Per Moderna patent it contains 4 categories of lipids, and graphene oxide.	Possible agents: glutathione, MMS, DMSO. These particles are absorbed into cells, and exhaled. Half-life unknown.	Trade secret wrapper that uses electrostatic characteristics of Graphene Oxide to encapsulate the Mutagenic mRNA Synthetic virus. Moderna patent discloses use of 4 categories of lipid.

Toxin	Nature	Known Detox Agent	Problem
Graphene Oxide	Small particles of graphene which fascinating behaviors including profound response to electromagnetic radiation and paramagnetic and magnetic when bonded to maganese.	Glutathione / Oxygen / ClO2	Graphene oxide can be reduced by strong or resonant EMF signals. Possible effects are to increase vulnerability to electromagnetic signals or create an electromagnetic “kill switch”. Graphene oxide in water is documented to interact with EMF in the 3 GHZ range, and within 5G ranges. There are no discoverable animal or human studies about subjects dosed with graphene oxide respond to electromagnetic radiation. Some studies show that DARPA hydrogens are able to self assemble electromagnetic devices when exposed to static magnetic fields. ene oxide Nobody really knows...
DARPA HydroGel Devices	Electronic devices suspended in liquid that self assemble into electronic devices when exposed to magnetic fields.	Glutathione / Pulsed electromagnetic fields to disrupt nano-electronics	Bluetooth, RFID or other technologies which if included are overt violation of human rights.

Notes:

*Liposomal Decoys may neutralize the harm potential of spike protein. Spike protein – ACE2 activation like provokes affected cells to unnatural adsorption. In this case the presence of nutrient decoy liposomes would enable spike activated cells to fuse with nutrient packets instead of disease or random phospholipid.

As such liposome cocktails like oral myers cocktails, liposomal vitamin C, and liposomal glutathione, and even raw phospholipids like raw egg yolk could serve as an antidote for shedded spike protein.

Graphene Oxide and Darpa Hydrogel detox are new physiology. Right now best practice for GO remediation is to maintain high levels of glutathione which is an element of all protocols as a support element.

Immunity 101

Here is a primer of the immune system. These tutorials are intended to help readers understand the language used here.

Vaccinated Observations

1. For administration
    1. The ingredients are injected usually into the arm;
    2. The ingredients are engineered to carry the MRNA agents into the cells;
    3. The ingredients primarily affect cells at the injection and the vascular endothelium which lines the vascular system;
2. Apparent Intended Physiology
    1. The vascular endothelium begins producing spike protein which expresses on the endothelial surface;
    2. These spike proteins are released into the blood, and circulate throughout the body;
3. Unintended Physiology
    1. Spike protein shedding tends to affect others in close proximity who:

        1. Exchange of body fluids;
        2. Rebreathe the same air;
        3. Those in close contact with the injected exhibit symptoms consistent with overwhelming spike protein exposure:
            1. Terrible Headaches
            2. Acute fatigue
            3. Severe diarrhea
            4. Unnatural menses
            5. Severe flu-like symptoms
4. Recipients with adverse events Experience
    1. Rapid onset of Guillain-Barre Syndrome
    2. Acute thrombosis as stroke or heart attack
    3. Acute vascular inflammation as Cardiomyopathy
    4. Acute neurological injury as onset of Bell's Palsy, and Parkinson's symptoms
5. Repeat recipients experience more adverse events faster
6. No apparent resistance to COVID or variants
7. Tendency to get sicker more often

Related Content – Beware…

- Immunopathology Of COVID Vaccines
- Vaccines – Mechanism of Injury with focus on lobotomy
- The Green Pill – Anatomy of a Spectral Assault on America
- Welcome to Lock Step – The Rockefeller Plan