

The JOURNAL of
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DISEASES



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AIDS

Made in America

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Acquired Immunodeficiency Syndrome

A SIGNED EDITORIAL

JDD
Volume 5
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In this **Special Edition** of the *Journal of Degenerative Diseases* we present a brief account in lay language of the conception, research, and history of the development and deployment of the co-factors which present in affected individuals as an acquired immune system deficiency leading to the almost certain death of the victim.

Every statement of fact that we make in this edition has a source that can be accessed and verified by any interested reader. However, we have intentionally left out all sources in order to create a more readable journal. We want the average interested person to pick this magazine from the shelf and read it from cover to cover as quickly and conveniently as possible. We want to achieve this because we feel that it is important to place the story of AIDS before as large an audience as is possible. We want to set out the truth as far as we have been able to discover that truth in one fell swoop as it were, to get the message out there and on the record.

Now, as to all of the sources that we have used, these are being included in as much detail as is needed in the more complete account of this crime beyond belief in the book that we have been, and still are, working on to be titled *The Crime Beyond Belief* to be released on May 19, 2005.

The tone of the articles in this issue is intentionally conversational and the style is a train of consciousness so it may be read easily. Another stylistic characteristic is our frequent brief ‘summaries’ to date. We do this because the whole enterprise of developing and deploying the AIDS co-pathogens was characterized by secrecy and deliberate efforts to obfuscate. For example, the CIA program known as MKULTRA was ostensibly a 1953 program to study ‘brain washing’. However, as the record will show, within this top-secret program there were 182 further programs hidden. When one has secret plans within secret plans within even further secret plans, it is easy to get lost. Hence, from time-to-time as you go from one article to the next, we interpret what has gone on as a summary.

In so far as possible, we have built the narrative around major characters so that the evidence is specific to a person, time and place.

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FRONT COVER: *The effect of cigarette smoke on DNA Reductase... Courtesy Garnett McKeen Laboratory, Inc. See next issue of JODD: Volume 5, Number 4. “Biological Liquid Crystal Theory” by Dr. Merrill Garnett.*

AIDS

Made in America

Thomas Merigan *A Ten Years Head Start*

The word **AIDS** is an acronym made up of the first letters of the words in the phrase ‘*acquired immune deficiency syndrome*’ or sometimes ‘*acquired immunodeficiency syndrome*.’

According to many medical history reference books AIDS was identified as a specific disease entity in **1981**. And therein lies our first anomaly. You see there was an earlier phrase that was strikingly similar to the one now in use to label the horrible epidemic that is killing over 8000 people a day. The earlier phrase appeared ten years earlier in **1971** when it was used by two medical researchers who were working at the Stanford University School of Medicine in California! The two researchers were Thomas C. Merigan and David A. Stevens. They had used the phrase in the title of an article published in the November-December issue of *Federation Proceedings*.

Here is the title of the Merigan, Stevens article: “Viral infections in man associated with *acquired immunological deficiency states*.” Note the acronym formed from the phrase: **AIDS**. Now, how does it happen that ten years before there was such an entity as AIDS, Drs. Merigan and Stevens are able to write about AIDS?

Was it just a co-incidence, or is there more here than meets the eye?

To answer this question we will have to take a look at who the people were that coined the acronym and what they were involved in. And, we’ll have to look at the institutions that were involved: who were they? What were they up to? Who was paying them and with whom were they working and for what reason? However, before we answer these and other questions, here is another strange thing about AIDS that you need to know.

On June 9, 1969, Dr. Donald MacArthur of the Pentagon met in secret with a small group of Congressmen who were on a deep secret committee that monitored the work being done by the United States in the field of biological and chemical weapons development. They were gathered to approve the Congressional Black Budget items for 1970. It is important to note this meeting because it means that the development of AIDS and other biowar agents was an official U.S. Government activity. It wasn’t just a group of rogue lunatics abusing positions of power. The Government of the United States as the elected representatives of the American people was and still is heavily involved in finding ways to kill and maim human beings in order to advance Government policies and objectives. As a consequence, the American

people themselves are culpable in mass murder, for it was and is their agents who are doing the dirty work.

So, June 9, 1969, Pentagon to Congress: Dr. MacArthur tells the peoples’ representatives the following: “There are two things about the biological agent field I would like to mention. One is the possibility of technological surprise. Molecular biology is a field that is advancing very rapidly, and eminent biologists believe that within a period of 5 to 10 years it would be possible to produce a synthetic biological agent, an agent that does not naturally exist and for which **no natural immunity could have been acquired!** That’s an ‘acquired immune deficiency state...AIDS!

Let’s parse those last seven words: ‘no natural immunity could have been acquired.’

Now, if one has no money, one has a deficiency of money. If one has no immunity, one has a deficiency of immunity; or, put another way: one has an ‘immune deficiency’. Furthermore, note that MacArthur is speaking about an **acquired** immunity.

If MacArthur’s eminent biologists have told him that within ‘5 to 10’ years they could have an agent that does not naturally exist, it would, of course, be one which they would have to engineer in their laboratories. And, it would be available between 1975 and 1980.

When was AIDS initially diagnosed in the United States?

And is it an agent for which no natural immunity could have been acquired?

Of course it was and is!

But, MacArthur has some other details for the peoples’ representatives in Congress. He tells them that this new agent...”might be refractory to the immunological and therapeutic processes upon which we depend to maintain our relative freedom from infectious disease.”

What infectious diseases might he be talking about?

Well, he could be referring to something like Kaposi’s sarcoma, which is a disease affecting the skin and mucous membranes and was formerly limited to elderly men, especially in certain North African countries.

Or, he might be talking about *Pneumocystis carinii* pneumonia, which shows up in infected lung tissue as cysts, containing six or eight oval bodies, and that attacks especially the interstitium of the lungs with marked thickening of the alveolar septa and of the alveoli.

And, of course, he could be talking about lymphadenopathy, which was what Luc Montagnier found in the blood of some early AIDS victims. When Luc was studying his samples of blood from the AIDS victims, the virus-like particles that he spotted were like those that he in his experience as a leading microbiological researcher associated with lymphadenopathy. The latter is a disease characterized

by the abnormal enlargement of the lymph nodes so Luc named his discovered particles “Lymphadenopathy Associated Virus” or “LAV.” Thus the first acronym to be used to label what is now labeled as AIDS was LAV.

At this point, Luc Montagnier made a mistake. He sent a summary of what he had discovered to the American researcher, Robert Gallo. Gallo promptly used Montagnier’s work to re-produce the LAV particle in his own lab and he re-named it HTLV-111, or Human T-Cell Leukemia Virus, third species.

If you haven’t followed the above paragraph, here is what it means: Gallo had stolen Montagnier’s intellectual property. Period.

Montagnier sued for damages.

Thanks to pressure from President Ronald Reagan, Gallo and Montagnier got together in a secret session wherein they agreed that *both* had discovered the disease agent that caused illness by lowering the victim’s immune system. Furthermore, they would share in any profits to be made from this dramatic discovery, and Luc would drop his legal suit against Gallo. Later they agreed that the newly discovered organism should be called a Human Immunodeficiency Virus [HIV] and the LAV and HTLV-111 labels should be dropped.

Getting murky, isn’t it? But, we’ll make it all clear in the article below, titled: “Robert Gallo: ‘Thanks Luc.’”

To summarize to this point. In **1969** Dr. MacArthur of the U.S. Military biowar research folks, told some devious Congressmen that eminent biologists were almost ready with a new infectious organism, which would be refractory to the human immune system. This new organism would make humans infected with it subject to diseases that they otherwise would have been able to fight off as part of their natural immune defence system. Diseases such as Kaposi’s sarcoma; Pneumoniae carinii pneumonia; lymphadenopathy; and others.

Such a masterpiece of biological engineering could be ready between 1975 and 1980, if Congress approved. Well, Congress did approve and work by MacArthur’s ‘eminent biologists’ continued with re-newed vigor. [See the article below: “The Rockefellers’ Stable of Talent (Are you there, Henry?)”]

Then, lo and behold, in 1981 there popped into the world a new disease organism which Luc Montagnier of France called LAV and which when stolen from Montagnier by Robert Gallo, had been re-named HTLV-111, but which by agreement became HIV and which, it is now claimed, is the cause of AIDS.

And, we have already noted that AIDS, whether caused by LAV or HTLV-111 or HIV, and which presents as various opportunistic diseases such as described, had turned up in the scientific literature ten years before it had been officially discovered. It turned up in an article by Thomas Merigan and David Stevens.

So, critical dates to remember:

1969: the Pentagon promises AIDS

1971: Merigan and Stevens write about AIDS

1981: AIDS discovered!

Please take a moment as a (hopefully) moral human being and savor this chronology:

1. Promise of AIDS; 2. Reference to AIDS; 3. Delivery of AIDS. Then ask yourself these questions: Is the AIDS that MacArthur promised Congress the same AIDS that by 2004 has already killed millions and is going to kill millions more? If it is, then ask: Were Merigan and Stevens part of that group of ‘eminent biologists’ to whom MacArthur had referred? In other words, were they all involved in the creation of the most deadly weapon of war ever devised by man?

To answer these and other questions, let’s take a closer look at Merigan and Stevens and the institutions for which they worked.

According to the brief biographical notes which accompanied the November-December article ‘Viral infections in man associated with acquired immunological deficiency states’ published in *Federation Proceedings* by Merigan and Stevens, the authors are listed as being members of the “Division of Infectious Diseases, Department of Medicine, Stanford University School of Medicine, Stanford, California.”

So, let’s start with Stanford University and any link the latter institution might have with the eugenics school of thought. Here, we hit the jackpot. It was Stanford University that spawned Dr. Paul Ehrlich who, in 1968 (just the year before Dr. MacArthur’s promise of a new infectious agent that would help control world population growth) published his book titled *The Population Bomb*. In this book Ehrlich urges that the United States Government must “...take immediate action at home and worldwide to slow population growth.” The book was an immense hit with the public at large and scared many of them badly. But, it also had fans in high places, including a Congressman from Texas named George H. W. Bush and the about to be designated National Security Advisor to President Nixon: Henry Kissinger.

But, we cannot of course condemn people as guilty because of their association with criminals. Just because Stanford University was a hot bed of eugenicists didn’t make Merigan one, and his article on AIDS ten years before there was any such thing as AIDS might have been a co-incidence. Just might.

To determine whether Merigan was an early member of MacArthur’s group of ‘eminent biologists’ who were sure that they could produce the AIDS we have come to know so well, let’s skip ahead a few years to see if Dr. Merigan, the 1971 psychic writer about AIDS has any possible links with the AIDS that popped into the world in 1981.

Where was Dr. Merigan eighteen years later in 1989?

Why we find him acting as Chairman of the Primary Infection Committee of Tony Fauci’s National Institute of Allergy and Infectious Diseases doing work on AIDS Clinical Drug Development. In other words the psychic was working with the real McCoy AIDS, trying to find ways to make a buck out of the tragedy. And what kind of researcher was he in this role? Well, one researcher has this to say:

“Merigan stripped them [AIDS victims] of their humanity and made them part of his laboratory work, the work of

his cohorts, the researchers. It was a damning exercise in selfishness. It was also an exercise in ignorance.”

Now we can turn to Merigan’s psychic co-author, David A. Stevens.

In February 1971, Dr. Stevens is listed as a co-author of another significant study titled “Concurrent Infectious Mononucleosis and Acute Leukemia. Case Reports. Review of the Literature and Serologic Studies with the Herpes-Type Virus (EB Virus). The article appears in Volume 50 of the *American Journal of Medicine*. Stevens is also noted as having been at the time he shared in writing the article “From the Viral Biology and Viral Leukemia-Lymphoma Branches and the Program Analysis Section, National Cancer Institute, National Institutes of Health, Bethesda, Maryland.” By the time the article saw the light of day in print, Stevens had joined Merigan at Stanford.

To those readers who are not already familiar with the labyrinth of evil hidden within the bowels of the National Institutes of Health, let us advise you right off that the title of the above article is rife with scary implications. Let us now parse the title and demonstrate why the article might well rightfully frighten a reasonably moral reader.

Concurrent...flowing together... just what is it that is flowing with what else? Why none other than a disease form called ‘infectious mononucleosis’ united with another disease form called ‘leukemia.’ And, with what does Stevens et al tie these in? He ties them to the Herpes-Type Epstein-Barr Virus.

So, in the same year (1971) that Stevens is writing about AIDS, which is still ten years away (1981), he is also writing about the concurrence of ‘mononucleosis, leukemia and Epstein-Barr’.

And when do you suppose that these three were destined to meet again?

Well, they pop up in 1981 (the same year that AIDS was officially acknowledged.) In that same year they are all associated with **another new disease** entity called Chronic Fatigue Syndrome [CFS].

Now isn’t that interesting?

At this point we must return briefly to the Meeting of June 9, 1969, when Dr. MacArthur of the Pentagon told several devious Congressmen that eminent biologists with whom the Military was working believed that by **1980** they could have a bioweapon that was lethal because it would be refractory to the human immune system...AIDS.

An Interlude

We need to add something else that MacArthur revealed on June 9, 1969. In that same meeting he told the Congressmen that not only was the Military working on a lethal biowar agent, but that they were also working on a **disabling** biowar agent. It is now evident that the lethal agent produced AIDS and the disabling agent produced CFS in the victims.

Why have a lethal weapon to fight against a growing world population *and* a disabling weapon?

The answer to this question is cruelly logical, and here it is: this moral cesspool that we call ‘modern society’ is so selfish and self-serving and ethno-centric that it is possible

to kill off 8000 Black and Brown skinned humans a day as is happening with AIDS, without any worry about a public outcry, but if 8000 Whites were dying daily [three 9/11’s daily] there would be a revolution. So, to take the latter (especially women) out of life without killing them, the Military developed the ‘mirror-image’ of AIDS, that is CFS, and as we shall see, contrived to create a parallel epidemic of the disabling disease.

Along with the science of developing the lethal and disabling population control agents, the dark powers with the necessary resources also developed what they term ‘media assets’ to down-play the tragedy and to blunt public demand for answers.

Thus AIDS was labeled ‘the gay plague’ and CFS was labeled ‘the Yuppie flu’ to make them sound like something less than the terrible diseases that they are. In the media AIDS victims were presented as homosexual sinners and the victims of CFS as neurotic middle-aged women, and the public health agencies could ignore the dawning epidemics because the public really didn’t care.

And, as we have noted, both AIDS and CFS officially came into the human family in 1981. Just eleven years after MacArthur’s promise to Congress.

End Of An Interlude

We can now return to David A. Stevens and his research article linking mononucleosis, leukemia and Epstein-Barr virus. In the Interlude above, we introduced the fact that a mirror image of AIDS turned up in 1981. It is critical to note that when CFS appeared in the world, none other than Stevens’ former co-author, Dr. Thomas Merigan, emerged as an expert on the new disease. He also turned out to be quite a liar when it came to explaining some of his ‘expert’ opinions. His self-proclaimed motto was “If you can’t dazzle ‘em with brilliance, baffle ‘em with bullshit” and that is just what he tried to do.

A case in point involved an early CFS victim named Julie Pritchard. When she became ill she was referred to Merigan. Without even examining her physically, he declared that there was no evidence of a viral infection and dismissed her. Pritchard puts it this way: “Let me just be brief. I went to Stanford, and they never, ever - they never touched me basically. Neither one of them [Merigan and a doctor Leslie Dorfman]. They never examined me. I was not physically touched by either of them. They spent fifteen minutes with me- combined - and drew the conclusion that I was a neurotic middle-aged broad who had mental problems. Then they told me to go away.” (On the record by author, Hillary Johnson: *Osler’s Web*)

Is it just a co-incidence that two doctors, Merigan and Stevens, were busy in 1971 studying and writing about AIDS and another disease presentation where mononucleosis, leukemia and EB virus were concurrent, and then when AIDS and CFS [which was linked to the same three disease signs and symptoms] became diseases on the record, the same two Doctors turned up as experts on both? And, is it just a co-incidence that the Pentagon in 1969 revealed that they

were working to develop a lethal biowar agent [such as AIDS] and a disabling biowar agent [such as CFS]? Let's continue following the trail.

When researchers publish articles such as the AIDS/ CFS articles by Merigan and Stevens in 1971, their observations do not emerge from the ether. Their work is based upon precedent work, and when one examines where the current position originates, greater insight is gained into just what was going on to produce later expertise in the subjects under study.

In other words, upon what precedents were 'eminent biologists' like Merigan and Stevens drawing that permitted them to become so *psychic* about pending disease tragedies? We need to consider their sources.

One of the Merigan-Stevens' sources was a 'Wallace P. Rowe', who with four co-authors wrote an article in 1966 which was published in the *Annals of Internal Medicine*. Although all five authors are of interest, Rowe, especially, needs to be studied further. In the late 1940's and early 1950's Dr. Rowe was working with a Dr. Robert Huebner on an assignment from the United States Navy, attempting to find out why Naval Recruits were subject to infection presenting as what they called a chronic or 'walking' form of pneumonia.

In the process of their research Rowe and Huebner had come to realize that the chronic pneumonia (which they attributed to a pleuropneumonia organism) was often accompanied in the recruits by a 'spontaneous degeneration' of the adenoids. And there you have the very beginning of AIDS.

If any one person can be called the 'father' of AIDS, it is Dr. Robert Huebner. But, he had a number of co-researchers, and others, like Merigan and Stevens, drew upon Huebner's research as they worked their AIDS/ CFS psychic magic. However, before we turn our attention to Huebner, there are a couple more points to be made about the 1971 research of Drs. Merigan and Stevens.

It is evident that in 1971 researchers such as Drs. Merigan and Stevens could write articles which anticipated both AIDS and CFS, because they were, wittingly or unwittingly, part of a larger research project to develop these two great plagues.

At the end of Dr. Stevens' report on the concurrence of mononucleosis, leukemia and Epstein-Barr virus, the authors thank a Dr. Robert Manaker and a Dr. Edward Henderson for their 'critical review of the manuscript'. Obviously, one scientist does not ask other scientists for their critical review unless those being asked are acknowledged as experts in the field of study. Who, then, were Drs. Manaker and Henderson, and what had they done to merit the confidence and respect of Stevens et al?

Robert Manaker has several claims to fame. First of all, his last initial "M" is coupled with the last initial of one of his colleagues, a Dr. Paul Kotin, "K". This pairing of "MK" turns up in a strange government document titled "Special Virus Cancer Program (SVCP) Progress Report #8", dated 'July, 1971'. Here is how these initials appear on page 282 of the document cited: "MK-SVLP".

Observe two things about this MK-SVLP acronym. First, note the **L**. It stands for 'Leukemia/ Lymphoma'. Now observe that the reference is in the Progress Report for the Special Virus **Cancer** Program. SVLP and SVCP... what is unusual here? Just this.

When Richard Nixon became President in the election of 1968, he designated Henry Kissinger as his National Security Advisor. A couple of years into his presidency, Nixon declared his famous 'War on Cancer'. Then, in 1971 the scientists running the program issued their report on the progress of this war, but for some reason, they labeled their first report as "Progress Report # 8". Where were the first seven reports?

Well, it is not until we get to "SVCP-Progress Report # 10" that we learn from page 4, that the SVCP had originally been the SVLP from 1965 until 1967. Then, when Nixon and Kissinger came to power in 1968, the study of Leukemia/ Lymphoma suddenly became the study of Cancer!

As we observed above in our discussion of LAV / HTLV-111 / HIV things seem to get awfully 'murky'; so, in the whole matter of SVLP /SVCP murkiness is the dominant quality. And that murkiness is intentional. You see, back in 1952-3, when eugenicist Nelson Rockefeller joined the Eisenhower administration as a special link between the President and the newly created Central Intelligence Agency (CIA), and for a while as an Under Secretary of Health, Education and Welfare, Rockefeller set up a covert program known as "MKULTRA". Ostensibly the program was to study 'brain-washing', but actually it was a secret program which had within itself over 180 sub-programs. One of these sub-programs was devoted to following up on the recent work of a Dr. Robert Huebner who had established a linkage between the spontaneous degeneration of the adenoids and a mysterious microorganism, which he called a PPLO or pleuropneumonia-like organism.

We will develop the Huebner/ PPLO research in the next article "Robert Huebner: 'Adenoids to Alzheimer's'", and the Rockefeller / Kissinger/ SVCP cluster in a later article. But at this point we should note the use of 'MK' as prefix to CIA covert program code names. Was the MK of MKULTRA the same MK as that in MK-SVLP?

We'll see.

Before we leave Tom Merigan and David Stevens, we must do one more thing...we must look at the sources they quote as listed in the **References** at the end of each article. First to "Viral infections in man associated with AIDS", note and watch for the following:

17. Burnet, F. M...Please see Exhibit One: the 'Burnet/ Kissinger' re-print below.

76. DeConti, J. R. ...

And in "Concurrent Infectious Mononucleosis and Acute Leukemia", note and watch for the following:

7. Henle G., Henle W.

9. Henle G., Henle W.

10. Henle G., Henle W.

15. Henle G., Henle W.

33. De The G.

What are we to conclude from this brief overview of the Merigan/ Stevens' articles about AIDS and CFS written ten years before there were any such diseases? We can only conclude, and we shall bear this out in the following articles of this Special Issue of JODD, that the authors knew and were working with other 'eminent scientists' working with the Pentagon to create new weapons of war. And what war would these weapons be used in? It was the war against the growing population of the world, secretly declared upon millions of innocent victims by the Rockefeller/ military/ financial/ cabal built around the doctrine of eugenics.

Robert Huebner *Adenoids to Alzheimer's*

[Editor's note: although we wrote an article about Huebner and Alzheimer's Disease in the last issue of JODD, we need to include him in this issue because his work also laid much of the foundation for AIDS]

When Robert Huebner was asked in the early 1950's by the United States Navy to help solve the recurring problem of a chronic but relatively mild form of pneumonia in Naval recruits, he agreed and set to work. Later, he reported his findings in a 1953 article in the *Proceedings of the Society of Experimental Biology and Medicine*. But, the article didn't focus upon the pneumonia. It dealt with a secondary phenomenon: the isolation of a disease agent from the adenoids of his naval recruits. The adenoids in the cases of chronic pneumonia presenting in the recruits were undergoing **spontaneous degeneration** in tissue culture!

This phenomenon of spontaneous degeneration of living tissue was to set the course for the remaining life and research of Robert Huebner, for it was to lead to the isolation and engineering of one of the critical co-factors of AIDS, and, as you shall learn, it also set Huebner on the path to his own death.

Robert J. Huebner can be pointed to as the father of AIDS.

Huebner followed his 1953 article with a series of further research reports spanning the years to 1971 when in the latter year he is credited with a total of 61 citations in *Progress Report #8* of the *Special Virus Cancer Program*, and by 1978 he appears in *Progress Report #15* as a member of one of the SVCP Committees. Among his SVCP committee colleagues are three others worthy of note: Dr. Robert Manaker who as we have seen, contributed his initial "M" to the strange antecedent program titled MK-SVLP; also listed is none other than Dr. Robert Gallo who was to later 'co-discover' HIV with Luc Montagnier; and, another key figure in the creation of the AIDS co-factors, George Todaro.

Again, murky isn't it? But let's try to sort it all out... We will demonstrate how Huebner starts with an atypical pneumonia [which is a characteristic of AIDS], moves into the degenerating adenoids [which are **lymph** tissues] and then he becomes an important researcher in a program mysteriously labeled with a code name: **MK-SVLP** [where the 'L' stands for 'leukemia/ lymphoid'] and in 1965 [right after L. B. Johnson had won the election in his own right as President of the USA] the 'MK' is dropped from the original code name, and SVLP comes from the covert shadows into the relative light of day, as a mainstream US Government research enterprise, Huebner is still right there.

Then, when Nixon declared his war on cancer in 1971, Huebner made a career change. His friend, Robert Gallo, tells it this way:

"When Huebner announced his virogene-oncogene hypothesis, he had already worked for many years and

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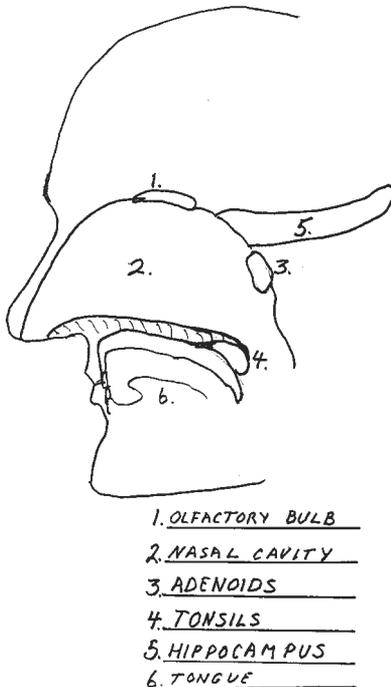
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with much success in the Infectious Disease Institute of the National Institutes of Health. His decision to move at this time to the National Cancer Institute, also at NIH, coincided with President Nixon's declaration of his 'great war on cancer' in 1971."

We shall see why it was that Huebner made this 'move' at this time, but first let's continue with his pneumonia to adenoids research. When we do that you will see how the spontaneously degenerating adenoids was to lead to his work in cancer and finally, how it came together as a co-factor in AIDS.

FIGURE TWO



Take a look at Figure Two. Note the adenoids at the top and back of the nasal cavity. And note in passing that they are just behind the receptor neuron olfactory node which allows certain air-borne molecules breathed into the nose to enter the brain and register as odors. Later we will demonstrate how this fact figured in the death of Dr. Huebner, but first we must continue with the adenoids.

The adenoids are the first line of defence in the immunological

processes in the body (and keep in mind Dr. MacArthur's statement to the Congressmen reported above, that the new lethal biowar agent the Pentagon's eminent biologists were working on would be "... refractory to the immunological and therapeutic processes upon which we depend to maintain our relative freedom from infectious disease.")

In the immunological processes upon which we depend to maintain our health, the adenoids play a guardian role. They capture samples of the air that is being drawn into the lungs. If that air has some pathogenic agent, the adenoids will not stop it, but will react to it, warning the immune system of the affected individual that something is wrong with the air that he is breathing. The re-action to one of the pathogens to which humans are vulnerable, is 'spontaneous degeneration', which was just what Huebner had noted in his study of pleural pneumonia! That's why Huebner devoted further attention to the degenerating adenoids. He wanted to find out what it was that was causing the pneumonia and the concurrent adenoidal disease.

At first, he could do no better than label the pathogen as a 'pleural pneumonia-like organism' or PPLO. He chose this

name because the pathogenic agent found in the infected lungs that was causing the chronic pneumonia in the naval recruits was the same pathogenic agent he found in the degenerating adenoids.

It is worth noting in passing that Huebner had adopted a new name for the lung disease that was interfering with the Navy's training programs. He called the disease "acute respiratory disease" or ARD. This acronym is startlingly close to another 'acute respiratory' illness, the *severe acute respiratory syndrome* or SARS. We'll see why in our later article on Shyh-Ching Lo and David Ho.

After Huebner et al had published their findings, several other biologists corrected him. It is not, properly speaking, a PPLO that is causing the ARD and the concurrent spontaneous degeneration of the adenoids they told Huebner. The PPLO, they pointed out, is really a microorganism identified in the late 1800's by two French scientists [at the Pasteur Institute, Nocard and Roux]. The PPLO is actually a '**mycoplasma**'. Note this word carefully. It is the key to AIDS and CFS, and to a number of other neurodegenerative diseases, including the one that was to kill Dr. Huebner. It is also the feature subject of our forthcoming Aug.27-29 CCMRF Conference in Sudbury, Canada.

A Brief Anticipatory Interlude

Although we will be dealing with the mycoplasma in more detail throughout this Special Edition of *JODD*, at this point we want to draw your attention to something that you need to know as early as it can logically be introduced. This is just such a logical point.

It needs to be noted that the mycoplasma which Huebner stumbled upon in the late 1940's and early 1950's became a subject of much covert research. After all, if the Military is looking for a bioweapon what better than one which causes human tissues to spontaneously degenerate. The resultant research, much of which we have now succeeded in tracking down and which we recount in the coming pages, led to the Patenting of a **pathogenic mycoplasma** by the United States Department of Defence. The nominal 'inventor' of this disease-causing mycoplasma was Dr. Shyh-Ching Lo of the American Registry of Pathology and the Patent was granted on September 7, 1993. [See Exhibit Two, p.30].

The critical details that you need to know are on page 22 of that Patent. On that page it is asserted that persons infected with the mycoplasma will be those who have been diagnosed as having either AIDS or CFS or other disease entities such as 'respiratory distress syndrome' (RDS). Compare the latter RDS with Huebner's ARD or the current SARS. All have to do with some mysterious disease agent that affects the respiratory system... including the one that got Huebner his job with the Navy in the first place.

End of an Interlude

Just what is a mycoplasma?

A mycoplasma is a species of microorganism lacking a cell wall. It is, apparently, a particle of bacterial deoxyribonucleic acid or DNA. Or, as one researcher expresses it:

“The theme underlying the current evolutionary scheme of mycoplasmas is that of degenerative evolution from walled bacteria.”

In other words, we can begin to understand the mycoplasma by starting with a bacterium. The latter is a one-celled animal. It can take in nutrient, generate energy, and re-produce itself. To place it in perspective, we can contrast its one cell being with the average human adult body, which has between 50 and 100 trillion cells.

Although the bacterium has only one cell it has the ability to re-produce itself. When it does so it draws upon nucleic acids of its DNA for the blueprint of its progeny.

Now, if something kills the bacterium, there is apparently a mechanism to preserve some of the bacterial genetic make-up. In some instances particles of the bacterial DNA or RNA are able to save themselves from destruction by manufacturing a protective protein coat. Such particles are what we know of as viruses. Although such particles in their protein coats are unable to reproduce themselves alone, they can invade certain other living cells where they can in some instances, utilize their host cell’s reproductive system to reproduce itself. This is usually done to the detriment of the host cell and the consequences present as disease.

Unlike the virus, the particle of bacterial DNA/ RNA without a cell wall and called the ‘mycoplasma’ can reproduce itself outside of a host cell. However, many species can do great damage to other cells, frequently leading to cell death. Here’s how that works.

Three microbiological researchers [Rottem, Pfendt, and Hayflick] were able to demonstrate in 1971 how the mycoplasmal damage is done. It seems that certain species of mycoplasma, because they are only particles of a complete DNA/RNA have no capacity to manufacture their own growth requirements. To make up for this short-coming, while still possessing the essential urge to live, these species can up-take pre-formed sterols from their host and incorporate these sterols into their own being. Ultimately the loss of such sterols, especially from their membranes, both external and internal, leads to the death of the host, and further damage is then done. The damage that is done is broadly categorized as ‘degenerative’ and there’s where we came in... studying Huebner’s work with the spontaneously degenerating adenoid tissues in Naval recruits.

Here, apparently, is what was happening, and how this led in turn to AIDS.

The Naval recruits, sharing cramped sleeping and living quarters, were exposed to and inhaled air breathed many times over by all of them. In such an environment any pathogenic microorganism was not received and then exchanged for fresh and non-contaminated air, but was constantly being re-introduced into the lungs to challenge the immune defence processes provided by the body. In time those recruits with the least immune defence, would begin to present with the lung infection and in some cases with degenerating adenoids. And it is at the latter point that we began our study of Huebner with his Naval recruits; acute respiratory disease; degenerating adenoids; PPLO and finally the mycoplasma.

[The same principle appears to be at work today in certain work situations and the incidence of disease. For example, the largest employee groups presenting with chronic fatigue syndrome are schoolteachers, hospital workers and airline flight crews. All are exposed in their work to closed space re-circulated air for lengthy periods of time.]

Huebner followed up his initial work with the help of Drs. Manaker, Todaro and Aaronson and as we shall demonstrate in the article below [The Rockefeller Stable of Talent], all figure significantly in the so-called Special Virus Cancer Program. For example, on page 327 of the Progress Report # 8 of the SVCP Todaro is credited with an article titled “Rapid detection mycoplasma-infected cell cultures”, while on page 282 of the same document, Manaker is reported to have experimented with primates by inoculating 33 chimpanzees with the mashed up tissue of diseased human lymph glands. Finally, on page 303 of the document we find that two of these researchers, Todaro and Aaronson, were busy with Huebner himself working with a mouse sarcoma virus. (You will recall that Kaposi’s sarcoma is an important symptom of AIDS).

Summary

In the late 1940’s and early 1950’s Robert Huebner went to work with the U.S. Naval Medical Research Unit No. 4 to study chronic and recurring respiratory diseases. In the process of doing his research, he realized that the organism which gave rise to one such disease also infected the adenoids of the recruits. Further research showed that the microorganism involved in the adenoidal degeneration, which he had first labeled as a pleural pneumonia-like organism, was actually a bacterial DNA/RNA particle called a mycoplasma. Huebner and his Navy employers quickly realized that the mycoplasma had great potential in a field of research that greatly interested them all: biowar weapons development. Other researchers such as Todaro, Aaronson and Hayflick were recruited to covertly pursue the latter prospect. One of the co-factors of AIDS, the mycoplasma, was well on its way to being put to work to reduce the rate of world population growth.

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From Plants to Animals to Us.

In 1946 the United States' chief of biological weapons development reported to the Secretary of Defence that the research scientists had managed to isolate the disease active principal of bacteria in a crystalline form. This accomplishment held great significance for the creation of effective weapons. One of the major problems encountered in biowar research prior to this was the fact that bacteria were very hard to keep alive and dangerous until they could be used against an enemy. Further, methods of dispersing bacteria, such as putting them into bombs, often killed the payload before it got started. Finally, it was hard to target an enemy without exposing one's own forces to the disease agents being used. There was always the great danger of 'blow-back' as happened in Korea when the U.S. tried to use the Hantavirus against the North Korean forces.

Now, if one could take only that part of a disease-carrying bacterium, and remove just the part that specifically caused the disease from its source in the form of crystals which would be easy to carry and easy to target on a foe, one would obviate many of the problems. This is just what George Merck and his researchers had learned how to do by 1946.

Reports as to just which bacteria were used in developing this crystalline and highly portable disease agent are still hidden in the Pentagon archives; however. Circumstantial evidence suggests that one of them was based on the Brucella bacteria. This highly contagious capsulated bacteria causes disease in both animals and humans. The disease that presents was named after Sir David Bruce [1855-1931], a British bacteriologist who was studying the disease on the island of Malta. The symptoms of brucellosis are dramatically similar to the symptoms of chronic fatigue syndrome... just what Merigan and Stevens and others in the biowar weapons program were working on in the 1960-70's: weakness, extreme fatigue, night sweats, generalized aches and pains.

Whichever bacteria it was that Merck was talking about, the potential was clear. The disease active principal could be removed from its living source as inert crystals, and then could be communicated to the target with more precision by way of various vectors: aerosol, insect bites, or food chain. And, furthermore, regardless of which bacteria it was derived from, the new bioweapon had to be tested.

Biological weapons testing poses great hazards to all of humanity, including the testers and their families. One way to limit such danger is to do the testing in a remote, hard to access place such as an island... preferably a foreign island, such as Iceland.

That's where Dr. Bjorn Sigurdsson of Iceland enters into the history of AIDS.

Bjorn Sigurdsson was born in Iceland in 1913 and died from kidney cancer 49 years later (1959). At the age of 24 he had graduated in medicine from the University at Reykjavik, and did further studies in Denmark. In 1941 he made another career move: he entered the **Rockefeller Institute** in

New Jersey to study plant virology and animal virology to complement his existing expertise in human virology. From plants to animals to humans! You'll learn the significance of this continuum later, and we'll learn that Robert Gallo had been an early student of the science. However, at this point we need only note the entry onto the scene of the Rockefeller Institute.

Sigurdsson apparently made quite an impression upon the powers that be in the Rockefeller empire, for, after completing his plants to animals to humans virology, he returned to Iceland with a \$200,000 grant from the **Rockefeller Foundation** to establish an Institute of Experimental Pathology. Get that name: 'experimental pathology'... Everyone understands 'experimental' meaning to test ideas about something, and when it is coupled with 'pathology', the origin and nature of diseases, the name of Sigurdsson's new Institute is at least highly suggestive.

Sigurdsson was on his way to discovering the other factor in the AIDS co-factors: the retrovirus. Let's trace his progress.

As luck would have it, and just after Sigurdsson's return to Iceland, a rather remote Island in the North Atlantic which at that time was under the control of the United States' Government, a 'mystery' disease broke out in the northern part of the country. But Sigurdsson was on hand to rush to the main town affected, Akureyri, and give the victims the benefit of his education in virology.

In Akureyri, Sigurdsson found that some 1,116 school children and young adults had become ill with a disease that looked for the entire world like brucellosis, but with a strange presence in a few cases of paralysis. Furthermore, something even stranger presented. In five of the children Parkinson's Disease developed, and rapidly progressed, killing the victims.

One must keep constantly in mind that this outbreak of what appeared to be a bacterial disease (brucellosis) *without the presence of the bacteria* itself developed at almost the same time that George Merck was reporting that his researchers had managed to isolate the disease active principal from bacteria such as **brucella**.

Then something else occurred that merits reporting. After the outbreak of what came to be called 'chronic fatigue syndrome' a contingent of scientists, doctors, and other researchers arrived in Akureyri from none other than the Rockefeller Institute to measure the extent of the epidemic, and the continuing consequences. Sigurdsson was, of course, on hand to make his patrons at home.

After the Rockefeller contingent had completed their survey, Sigurdsson went on with his work in an area largely unexplored up until then: **retroviruses**.

Before going further let's recapitulate what we have noted thus far. In the United States Robert Huebner was working towards the discovery of the mycoplasma, which is essentially a virus without a protein coat. Because certain species of the mycoplasma have an absolute growth requirement for the up-take of pre-formed sterols (including cholesterol ... and keep this in mind when we get to Gallo) they can cause the 'spontaneous degeneration' of the cells that they invade.

If they do not cause sufficient damage to kill the cell, they at least compromise its capacity to defend itself from other disease agents, such as those which present as Kaposi's sarcoma, pneumoniae carinii pneumonia, lymphadenopathy, and so on.

In Iceland Bjorn Sigurdsson was busy searching for the secrets of the retroviruses. After all, one of the better known retroviruses was one which infected sheep, [with sheep raising a major industry in Iceland] and was called 'Visna', which means 'wasting' in Danish. As a matter of fact there are three variants of the visna virus: Visna, itself, plus Maedi [name derived from the Danish for 'shortness of breath'] and a third referred to as PPS...because it causes a 'progressive pneumonia of the sheep', and is sometimes referred to as OPP or 'Ovine Progressive Pneumonia.'

There are two factors worthy of note here. One is the fact that the diseases in the sheep have so much in common with AIDS and CFS in humans. The wasting quality is characteristic of both, and the significant linkage to respiratory illnesses is another. In fact, in one tribute to Sigurdsson published in 1991, the late doctor was credited with laying "the base upon which AIDS research was later built." This despite the fact that AIDS was not officially known until 1981 and Sigurdsson had died 22 years before!

The principal symptom of visna is that derived from the extreme itch which accompanies the disease. This leads infected sheep to rub themselves against trees or posts until their wool is 'scraped' off and hence is called scrapie. The latter word has now entered into the lexicon of western medicine where it is defined as a usually fatal disease of the nervous system characterized by emaciation, weakness and paralysis and caused by a slow virus. On autopsy the distinguishing feature of an infected brain and to a limited extent certain other organs such as the heart, is the presence of intracellular fibrillary tangles.

It was to this group of retroviruses that Sigurdsson largely devoted his research after he had finished up his 1946 to 1948 work on the mystery outbreak of CFS among school children and had acted as escort for the visiting Rockefeller investigative team.

Thus, while Huebner was appearing in the literature with articles such as "Isolation of a cytopathogenic agent [the mycoplasma] from human adenoids undergoing spontaneous degeneration in tissue culture" based upon military financed research, Sigurdsson was appearing with articles such as "Visna, a demyelinating transmissible disease of sheep" based upon Rockefeller financed research. Here you have the co-factors of AIDS: the mycoplasma and the retrovirus

Concurrent with the work of Huebner and Sigurdsson was related work by several other scientists most of whom were to appear in the Special Virus Leukemia/Lymphoid/ Cancer Reports a few years later. Among those who will turn up later in this study are J. B. Moloney, a great friend of Robert Gallo. Moloney even misappropriated money to help Gallo according to Gallo's own admission. Another interesting researcher whose work is reported in the literature of the period is Dr. Brian Mahy. [p.26, bellow]. Like Moloney,

Mahy was not only someone whose work is tied in closely with AIDS/CFS research, but also like Moloney, Mahy misappropriated over four million dollars given to him by Congress to study CFS. Then there is Dr. Maurice Hilleman who later turns up as the Chief Virologist for George Merck Pharmaceuticals. [You may recall the Merck was once the Head of the Biological and Chemical Weapons research for the U.S. Government. And there was Robert Manaker whose surname initial turns up as part of the MK-SVLP operation. Finally, in this time frame there was another Rockefeller protegee: Dr. Hilary Koprowski, whose research deserves a separate article (see below), for he took the science of Huebner and Sigurdsson and turned their results into the crime beyond belief: AIDS.

Summary

Bjorn Sigurdsson's whole career is colored by the fact that in the early 1940s he attended the Rockefeller Institute to study plant and animal virology. Since he was already an accomplished and well-regarded medical doctor, the focus upon plant and animal diseases is very suggestive. Also, the fact that the microorganism known as the mycoplasma infects plants, animals and humans can provide a reason for extending his scientific foundation beyond that which he already possessed. In addition, the wartime efforts to adapt certain animal diseases to affect humans as biological weapons [brucellosis for example] suggest that his links with the eugenics-minded Rockefeller Institute and his broadened studies were not based simply upon a professional desire to be better informed.

It is evident that Sigurdsson was an early recruit to the Rockefeller stable [see article below] and that his long-term goal was to master zoonotic diseases such as the retroviral sheep disease, Visna. The Rockefeller Foundation advanced such work by funding Sigurdsson's Reykjavik-based Institute of Experimental Pathology. Sigurdsson was also on hand in Iceland to monitor the evident trial of a disabling disease, which possessed many of the same symptoms as Chronic Fatigue Syndrome.

Hilary Koprowski

*The Hilary Koprowski Krowd:
Just Monkeying Around*

By 1952 two important scientific factors for the ultimate development of the co-factors of AIDS were in place, albeit in a rudimentary and poorly understood way: the immune suppressing mycoplasma and an early understanding of the retrovirus. It was enough to require some sort of testing to determine whether the promise that the co-factors seemed to hold, could in fact be realized. This state of knowing some things but not knowing others was not enough to prevent further efforts to put what was known to work as soon as possible. Robert Gallo himself admitted as

much when he wrote in another context:

“Some commentators on the history of science have noted that scientists did not need to understand any fundamentals or mechanisms to come up with antibiotic cures for some bacterial diseases, nor did Sabin, Salk and Koprowski need to know how the polio virus worked to develop their vaccines.”

So it was with the powerful and hidden patrons of those scientists whose scientific research could be put to work to develop a deadly pathogen based upon the co-factors being developed.

The PPLO of Huebner, which turned out to be a species of mycoplasma, did not have to be understood in order to see that its great capacity to compromise the immune system and to cause the degeneration of cells could be an important component of a new microorganism. A microorganism composed of co-factors, which did not naturally exist, as Dr. MacArthur was later to tell certain Congressmen on June 9, 1969, but one, which would be refractory to the human immune system. At the same time these patrons saw that the mycoplasma if united with the visna retrovirus of Sigurdsson could open the way for the latter disease agent to have its way within the body of a targeted victim. The mycoplasma would lower the immune defence system and the retroviral RNA of visna could then access selected cells and direct those cells’ DNA to reproduce copies of its mutated self.

And this is just what happened.

If we skip ahead to July, 1972, and if we study the *Special Virus Cancer Program, Progress Report #9* we find on page 39 the following statement: “We have for the first time demonstrated that the ... RNA directed DNA polymerase, **can be activated** by alteration of the physiological endocrine balance.” The RNA directed DNA polymerase is the retrovirus at work. It can be put to work if the endocrine balance of the body is altered... and that is just what happens when the mycoplasma up-takes pre-formed cholesterol to meet its own absolute growth requirements. When the cholesterol is up-taken, the production of hormones in the endocrine system is **altered** because it is cholesterol from which the secretory glands manufacture hormones. The altered endocrine system in turn compromises the immune system.

However, the researchers of 1952 did not know these mechanics of the pathogenic co-factors. All that they and their patrons knew was that the mycoplasma altered cellular immune defence and that permitted retroviruses, such as visna of sheep, to do something they couldn’t do before: invade the cell’s DNA and create in humans the scrapie already seen in infected sheep.

Huebner and Sigurdsson’s work could be united. What was needed was some scientist of sufficient skill to do the science, and of sufficient moral deficiency to permit him to undertake such a task. Also, there had to be a place to do the work... one, which was totally and completely under the control of the patrons. There also had to be a cover story so that when the world saw the skilled scientist in the new physical facility doing all manner of biological research, there would be no suspicion that the goal of the whole enterprise

was to slow the rate of growth of the world’s population. Finally, there had to be a way to get the new co-factors into the blood of the targeted victims without them knowing that they were being doomed to a terrible death.

And this is where one of the Rockefellers enters the scene as an active participant, rather than simply as the source of direction and funding.

In November 1951, war hero General Dwight Eisenhower was elected President of the United States. Between the date of his election and the day that he took office, he had to put together a Cabinet to run the vast machines of the bureaucracy. One person that he had to recruit was obviously one of the most political of the powerful Rockefeller family: Nelson Rockefeller.

To most peoples’ surprise, Nelson Rockefeller chose the job of Undersecretary of Health Education and Welfare [HEW]. At last one of the scions of one of the world’s most ardent eugenics-driven families had a toehold in government. And when

“...he became an administrator in charge of the new agency’s \$2 billion budget and 35,000 -member staff , he began immediately setting up a **war room**... (H)e seemed to work through advisors that were hazy figures on the periphery of the internal administration. They were people who apparently were tied in with the numerous Rockefeller outside interests.”

And Nelson Rockefeller’s major outside interest was eugenics, and to advance this passion and co-op the public health agencies into the biowar weapons research of the military.

After these agencies of health and defence had been melded and the Department of Health was effectively a Department of Death, Rockefeller was appointed as Eisenhower’s ‘Special Assistant for Cold War Strategy’. Effectively, Rockefeller was in command of the Central Intelligence Agency, and was ready to declare a covert war against a major enemy: humanity. He began by taking direction of the CIA program known as MKULTRA, which had been launched in 1953. Ostensibly, the program was to be a secret study of ‘brain-washing’ in response to the work of the Chinese on prisoners of war from the Korean conflict. Under Rockefeller the MKULTRA expanded from one secret program to one program which held within itself several other secret programs, including MKNAOMI and MKDELTA, and quite possibly the MK-SVLP we have already encountered.

But, we are getting ahead of ourselves. We must first go back to 1952 and the research of Huebner and Sigurdsson. The eugenicists, led by the Rockefellers, needed someone to bring Huebner’s mycoplasma and Sigurdsson’s retrovirus together, and their man to do this was right there. Ready willing and able: Hilary Koprowski.

Hilary Koprowski had been born in Poland, educated as a microbiologist, and fled to Italy ahead of the German invaders. He immigrated to Brazil where he was employed by none other than the Rockefeller Foundation. Following the war he moved to the United States where he found employment with Lederle Laboratories, the pharmaceutical

arm of American Cyanamid. He worked with Dr. Herald Cox from 1946 to 1950 developing a polio vaccine. American Cyanamid and Herald Cox were secretly engaged in biological weapons research as a photo in the official history of Fort Detrick was later to reveal, for there, right in the front row was Dr. Herald Cox.

The man, Hilary Koprowski, a Rockefeller alumnus, was available to follow up on the Huebner/ Sigurdsson research. Now, to find a place.

The place had to be somewhere that did not have a solid, informed Board of Directors already in place. Further, there could not be pre-existing staff already doing professional research. The answer was found when the Wistar Institute in Philadelphia was suddenly activated to be more than a biological museum as it had been. Then, in 1957 Hilary Koprowski was named its director. Koprowski moved rapidly to convert it into a beehive of biological research activity. The frontispiece of such activity was to be a search for an effective and safe polio vaccine. That was to be the cover, and like many covers devised by those working on covert programs, it had to have a level of activity in its professed field. Koprowski gave it this quality by doing extensive work in polio vaccine research. However, all the evidence points to other work going on beneath the surface that had to do with Huebner's mycoplasma and Sigurdsson's visna retrovirus.

The evidence for this conclusion lies in the fact that one of Koprowski's early colleagues in his extended and re-furbished research laboratory was one named Leonard Hayflick. Dr. Hayflick turns up later in the history of AIDS development when it is reported in the SVCP, Progress Report #8, that when the public health agencies/ department of defence partners in biowar research decided to establish a Mycoplasma Research Institute, they appointed Hayflick to run it.

With the man and the place established, and with MKULTRA help in financing the activities, thanks to Nelson Rockefeller's role in the Eisenhower administration, the answer to the question of a suitable cover was already at hand. On his transfer from Lederle it was decided that Koprowski would simply bring with him his Lederle research on polio vaccines, together with another Rockefeller alumnus, Tom Norton, to the Wistar.

The role of the CIA in financing the acquisition and remodeling of Wistar is now hard to determine since, when the Watergate scandal broke, all known MKULTRA documents were collected and destroyed. However, a few pages managed to escape the destruction and these are now available to us. From these pages there are several references for the need of secure research and testing facilities, including a new wing for a hospital that was to play a part in the on-going efforts.

Thus, during the time frame, 1950-1960, Koprowski did his cover work on developing a polio vaccine while engaged in some mystery work for which he lost all record during a move! Unfortunately his dates on all of this are hopelessly inconsistent and suggest that the records were not lost but were destroyed. For example, he stated at one point that the records of his work from 1956 to 1970 had been lost when he

moved to the Wistar in 1956!

However that may be, while engaged in whatever he was engaged in, Koprowski was also busy establishing a chimpanzee camp in the Belgian Congo. Ostensibly, the chimps were to be used to test his evolving polio vaccine, but therein lies another problem for him. It seems that the number of chimps used for polio research were reasonably well accounted for, and according to AIDS-historian, Edward Hooper, this figure falls well short of the number of chimps actually sacrificed during the period. Something other than polio vaccine was being tested at Camp Lindi in the Congo. The missing chimps were not those used concurrently by Friedrich ("Fritz") Deinhardt when he was testing a hepatitis vaccine upon which he was working. Plain and simply... several chimps were used to test something that Koprowski and his colleagues wanted kept off the record.

We think that the evidence we now have is sufficient to warrant us declaring that Koprowski and certain others were working at Wistar to create a co-factor pathogen based upon Huebner's mycoplasma and Sigurdsson's retrovirus and that this pathogen was then tested on chimps at Camp Lindi.

Furthermore, given the fact that the mycoplasma has a very serious adverse effect upon the liver due to the up-take of liver-produced cholesterol, Fritz Deinhardt's hepatitis vaccine was a correlative program which would find a role in the hepatitis program in New York, Los Angeles and San Francisco in the mid-seventies, when gay men were offered a free hepatitis vaccine.

Koprowski and Deinhardt had something else in common besides testing mystery vaccines on chimps in the Belgian Congo. Back in Philadelphia both worked very closely during this period with Drs. Werner and Gertrude Henle at the Children's Hospital of Philadelphia. And we shall learn more about the fate of children in the care of the Henle's in the next article of this Special Edition of *JODD*.

However, at this point we need to consider the use of children by Koprowski as human guinea pigs for his research products. In this area, Koprowski had an interesting agreement with the Clinton State Farms (Prison for Women). Under this agreement, and with the consent [called in all cases 'informed volunteer consent'] pregnant inmates who delivered their children in prison were 'requested' to have their babies vaccinated by Dr. Koprowski with his 'polio' vaccine. And here we have a very suggestive and intriguing development. The evidence is that in late 1957 or early 1958, a newborn baby of an inmate received Koprowski's 'polio' protection. Then, sixteen years later this vaccinated child born in Clinton and used as a test object by Koprowski had, by 1973, become a promiscuous drug addict in New Jersey, and had a baby of her own. And here is where the suggestive and intriguing development occurs: five years later, in 1979, the baby died of AIDS!

Obviously too young to be a drug user or promiscuous, it seems evident that she had caught the disease at birth from an AIDS-infected mother. Where, in 1979, could a 16-year-old have contracted the disease? The reasonable explanation is that Koprowski's neonatal vaccination was the source of

the mother's disease. Then, as often happens, the mother, although a carrier presents no signs of the disease herself, but passes on a more virulent disease agent to her children at their birth. We will come back to Clinton State Farms and the use of children as unwitting guinea pigs.

However, before leaving Koprowski we need to note that many scientists observed during this period that Koprowski had a very special friend named Robert Gallo. It was, said one scientist who knew both men well, a 'father-son relationship'! The significance of this warm friendship will become evident in 'Robert Gallo,' p.23.

Summary

Hilary Koprowski was another stud in the Rockefeller stable of scientific talent, joining Bjorn Sigurdsson. As the Director of the front Wistar Institute, Koprowski worked to develop a polio vaccine, while at the same time engaged in a number of mystery activities which required testing on children, prison inmates and chimpanzees in the Congo. All these activities can be linked to later manifestations of the AIDS/ CFS epidemics to officially hit the world in 1981.

The Henle's

Just Love Those Kids to Death

The reader of Hillary Johnson's magnificent history Of Chronic Fatigue Syndrome, *Oslers' Web* meets Gertrude and Werner Henle, a husband and wife biological research team who emigrated from Germany to the United States in the 1930's, in the earliest pages of the book:

"...the Henles were known reverentially as the 'mother and father' of Epstein-Barr virus; those who had the opportunity to study with the distinguished team universally referred to themselves as children of the Henles".

One such worshiper was biologist Dr. Evelynne Lennette who, according to Johnson, 'was a self-described child of the Henles.'

When the names of Werner and Gertrude Henle are couched in such gentle family analogies, it is hard to think of them in terms of biological warfare weapons development. Hard but necessary. Let's start looking at the Henle's presence in the literature of biowar research by referring to an early but valuable document titled "*Bacterial Warfare. A*

Critical Analysis of the Available Agents, Their Possible Military Applications, and the Means for Protection Against Them" by Theodor Rosebury and Elvin A. Kabat, with the assistance of Martin H. Boldt. The paper was originally written in 1942.

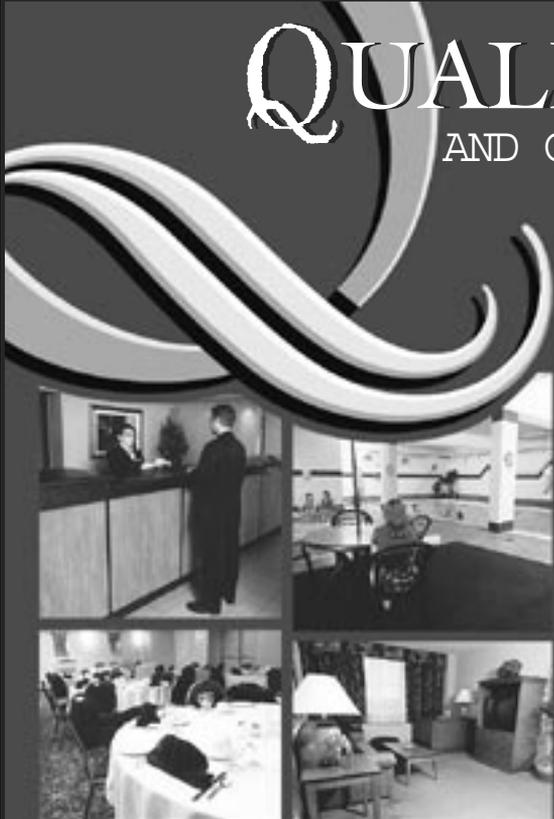
A place to start in an analysis of *Bacterial Warfare* is the **References** cited by the authors, and when one does that one can note in the 306 citations the following:

- 30. Burnet, F.M. 1940 [refer to Exhibit One]
- 31. Burnet, F.M. & Rountree, P.M.
- 46. Cox, H.R. 1940
- 47. Cox, 1941
- 296. Henle, W. 1941

These references are selected from the total list because, as we shall see in the pages ahead, Frank Burnet has ties to a **Dr. Carleton Gajdusek** and to a **Dr. Henry Kissinger**; while Dr. Herald Cox has ties to Hilary Koprowski; and, **Werner Henle** casts a shadow of his presence over both AIDS and CFS, and has ties with all the major people who appear in the literature of these plagues. In fact he and his wife, Gertrude, are cited several times in both Edward Hooper's seminal

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history of AIDS, *The River*, [eleven citations in the index] and in Hilary Johnson's seminal history of CFS, *Osler's Web*, [six citations].

And it must be noted that the Henle's appeared in the Progress Reports of the Special Virus Cancer Program with dramatic frequency: P.R. # 8; P.R.# 9; #10; #12; #13; and #14. In 1977 in P.R.#14 alone, Werner Henle's current research is cited 27 times, with additional citations for Gertrude! Let's see what Werner and Gertrude were up to in the late 1950's ...the time frame where the evidence strongly suggests that Hilary Koprowski was busily translating the mycoplasmal studies of Huebner and the retroviral studies of Sigurdsson into a viable biological co-factor pathogen, while Fritz Deinhardt was concurrently studying hepatitis and how the cholesterol-producing liver re-acts to cholesterol-consuming mycoplasma.

When one examines the work of the Henle's during this critical period one begins to feel that they were not just the loving god parents of all those sick children at the Children's Hospital of Philadelphia [CHOP]. In fact, Fritz Deinhardt as a fellow in the Henle's laboratory was actually reporting to the Henle's as his boss during his hepatitis research. Furthermore, it turns out that the expenses for all of this was being paid for by the Armed Forces Epidemiological Board! And talk about the Henle's love of children given their long service at CHOP, well, Fritz Deinhardt, their research Fellow, turned up at the Willowbrook Home for Handicapped Children where he experimentally exposed the children to hepatitis so that he could study the progress of the disease on a controlled (and totally defenseless) group of human guinea pigs.

It was shortly after his hepatitis experiments upon the Willowbrook children that Deinhardt flew off to the Belgian Congo with Hilary Koprowski. In the Congo, at the chimpanzee farm at Camp Lindi, the Henle's employee Deinhardt experimented on the chimps with hepatitis pathogens while Koprowski experimented more or less on the record with polio pathogens. That, at any rate, was the cover story and such work did, in fact, go on. However, as Edward Hooper has so astutely pointed out: when one adds together the chimps used for polio experiments and those used for hepatitis experiments, the total falls dramatically short of the number of chimpanzees that were used for medical research at Camp Lindi! Something other than polio and hepatitis was being researched and that we declare with confidence was the co-factor pathogen of immunosuppressant mycoplasma and retroviral visna.

The Henle's, who loved children, are the godparents of AIDS.

But how about all of those researchers who said of the Henle's that the latter were their figurative father and mother? Evelyne Lennette, for example?

Well, it turns out that there was an Edwin Lennette working with none other than Robert Huebner and together they were studying such esoteric matters as the induction of lymphoma and xenotropic viruses. And later on Edwin Lennette would work with a veterinarian named Dharam Ablashi who came to be regarded as an expert in chronic fatigue syndrome. Later still Dharam began to work closely

with Evelyne Lennette in the same specialized field: both were 'experts' in CFS. But there was more to Edwin Lennette than that. During World War Two he had worked for the Rockefeller Institute in Rio de Janeiro in Brazil with none other than Hilary Koprowski.

Furthermore, there is evidence that the pathogen labeled HIV-2 which, strangely enough is the dominant strain of HIV found in former Portuguese colonies, and in Brazil which is culturally and linguistically linked to Portugal, has genetic links to two of Lennette's special fields of study: equine encephalitis and yellow fever.

So, just where are we? Well, Edwin Lennette and Hilary Koprowski had worked together for the Rockefellers in Brazil during World War II. Then, Lennette turned up working with Robert Huebner who had discovered the role of the PPLO or mycoplasma in the 'spontaneous degeneration' of the adenoids and the suppression of the immune system.

Later, Koprowski began work at the Wistar Institute in Philadelphia where he co-operated with Werner and Gertrude Henle who, in turn, had contracts with the United States Army to do research into hepatitis for which enterprise they recruited a research fellow named Fritz Deinhardt. About the same time they acted as the intellectual 'father and mother' to another Lennette engaged in microbiological research, Dr. Evelyne Lennette. Dr. Evelyne Lennette would later emerge as a dictatorial leader of research into an AIDS 'mirror image' called CFS when the latter disease hit the world with dramatic virulence in 1981.

Oh what tangled webs we weave...But the question is: was there a link between Evelyne Lennette and her figurative father-mother figures, the Henle's, and the Edwin Lennette who had worked with both Koprowski and Huebner and other scientists who in turn had spawned AIDS and delivered it to humanity?

Hilary Johnson named her study of CFS astutely when she titled it "Osler's **Web**", for in this great book the same cast of characters who appear in Edward Hooper's equally magnificent history of AIDS [*The River*] are woven together in a complex far too intricate to be simply coincidence. There's a master spider in the shadows.

We'll answer further questions of Lennette involvement in the later chapter: 'The Rockefeller's Stable of Talent' below. In the meantime, let's take a further look at the Henle's.

In chapter four above, we noted that Hilary Koprowski, when he joined the Wistar Institute in 1957 had entered into an agreement with the Clinton State Farms (Prison for Women) wherein he could vaccinate newborns with some of his mystery vaccines. It turns out that Werner and Gertrude Henle also had their own agreement with that institution wherein they could vaccinate female 'volunteers' with a hepatitis vaccine being developed by their research fellow, Fritz Deinhardt. The Henle's then co-operated with Deinhardt to write a report to the Armed Forces Epidemiological Board titled 'Viral Hepatitis'.

An Interlude: David Carr: Pretreated! But for What?

In 1959 a British sailor named David Carr from Manchester

died of AIDS-related illnesses such as *Pneumocystis carinii* pneumonia [PCP] and cytomegalovirus [CMV]. How is it possible that a death can occur in 1959 that is tied to an acquired immune deficiency disease, when the disease now known as AIDS was not even existent in the world? And how can we suggest that Hilary Koprowski and others were responsible for the development of AIDS when, at the time of David Carr's death in 1959, the whole 'Koprowski Krowd' was still labouring in the fields of militarily-financed research in Philadelphia and the Congo?

The answers to these and other questions suggest that some three to six years before Carr's death, he had been infected with a precursor disease agent based upon the earliest application of Huebner's mycoplasmal research. Just where was Carr during that latter time frame? It turns out that four years before, in 1955, Carr had joined the Royal Navy. At that time he had received the usual battery of vaccines given recruits into the military. However, in 1956 (three years before his death) in addition to the usual vaccines, Carr had been given an 'ATT' injection and, it was noted on his medical records, he was 'pretreated'! But, the records do not say what he had been **pretreated** for. According to Edward Hooper, to whom we are greatly indebted for this information, a senior British Navy medical officer commented when asked: "It sounds like he was being pretreated for **something he was going to be exposed to**".

Is it possible that David Carr in 1956 had been pretreated with Huebner's immune suppressing mycoplasma with the view to subsequent treatment with a Sigurdsson retrovirus or other disease pathogen which would flourish when the victim's immune defence system had been compromised?

We'll leave the answer to this question until later, but in the meantime we want to make it clear that there existed then and there continues to exist, a level of covert communication between certain factions within allied services that would have been at work in respect to such research at the time Carr received his 'pretreatment'.

As soon as the potential of Huebner's discoveries became evident, (i.e. the late 1940's to the early 1950's) certain officers in the Royal Navy, and possibly in the Royal Australian and the Royal Canadian Navies, would have been briefed and their co-operation invited in exploring the phenomenon further. The present writers have in their files a confidential memo written by a Canadian military doctor, Major Tim Cook, to his Commander-in-Chief, General Baril. In the memo Major Cook advises Baril that the mycoplasma is not a factor in Gulf War Disease. If Cook really believes that, all well and good, but... we also learned that Major Cook then sent a copy of the memo that he had written for his commanding officer to an officer in a foreign military service! And just who was the recipient of this betrayal of military duty and trust? The memo was sent to Captain Kenneth Craig Hyams of the United States Navy's biological warfare research organization. The successor group to that for which Huebner had been working in the 1940-50's.

End of an Interlude

Summary

By the latter half of the 1950's, Werner and Gertrude Henle were well tied in with two important research streams. One stream, being developed by Koprowski grew out of Huebner's earlier work with naval recruits and the mycoplasma-induced adenoid degeneration and immune suppression. The other stream, which also grew out of Huebner's work with the mycoplasma and the latter's deleterious effect upon the liver, dealt with hepatitis. Both the immune suppressive qualities of the mycoplasma and the damage to the liver had to be tested upon chimpanzees and both Koprowski and Deinhardt began testing programs at Camp Lindi with the co-operation of the Belgian government of the Congo. Furthermore, tests upon women and children under state control in prisons and homes for mentally and physically handicapped children took place. The Henle's provide an active and important link between Koprowski and Deinhardt and so figure as important contributors to the ultimate achievement of a new microorganism, one which does not naturally exist and which is refractory to the human immune system. Just what Dr. MacArthur knew was coming when he briefed select Congressmen on June 9, 1969.

However, besides the fatal pathogen promised, AIDS, MacArthur had promised another pathogen, one which would disable by altering the immune system: CFS. The Henle's were well positioned to participate in this endeavor as well.

The Belgians and the Portuguese

Those Pesky Black Nationalists

At the end of World War Two, imperialistic nations such as France in West Africa, Algeria and Vietnam [the latter they fondly labeled '*French Indo-China*'], Great Britain in India and the Middle East, Holland in Indonesia, Belgium in Central Africa (The *Belgian Congo*), and Portugal in West Africa had a big problem. In many cases Black 'colonial' troops had served the imperial powers' interests well. Field Marshall Sir Archibald Wavell, for example, paid high tribute to his Black forces recruited from British East Africa, who had done such a tremendous job against the forces of Japan in the Battle of Burma. Now, many of these same battle-trained 'colonials' were aspiring to independence, and each imperialist power responded in its own way.

In general terms, the British benefited from having elected a post-war socialist government with Clement Attlee as Prime Minister. Attlee and his Labour Government set about to negotiate India's independence, and to a lesser extent independence for Kenya, Uganda, and Ghana. But France, Holland, Belgium, and Portugal tried to maintain the old order by brutal repression of nationalism in the colonies. Those pesky Black nationalists!

The situation was complicated by a dawning of a new imperialism for the old. Although mouthing anti-colonial

slogans, powerful forces in the United States embarked upon the creation of an American Empire to replace the crumbling empires of European nations. Blithely blind to the reality of what they were doing, the leaders of the U.S., while condemning colonialism, did all that they could to support the anti-nationalist activities of France in Vietnam, Belgium in the Congo and Holland in Indonesia [In respect to the latter, see Exhibit One below, p.29]. As it became evident that such efforts were doomed to ultimate failure, and the European powers were forced to withdraw their flagging and defeated armies, the U.S. needed a new strategy... especially in Africa.

That strategy was provided by the Rockefellers and their Council on Foreign Relations allies and it consisted of a program of genocide in resource-rich Africa. First, kill off the nationalist leaders like Patrice Lumumba and replace them with puppets and well-armed warlords to fight among themselves. Then, introduce a lethal new biological weapon which is refractory to the human immune system and which is spread by fluid exchange [including vaccines, blood transfusions, sexual intercourse and illicit injected drug use] and the Black Continent with its wealth will fall easily into the hands of the U.S. military/ industrial complex.

As we have already noted, this strategy received a big boost when the U.S. elected General Dwight Eisenhower as President in 1952. With Nelson Rockefeller militarizing the Public Health Agencies [Centers for Disease Control and the National Institutes of Health] while concurrently initiating the covert programs of MKULTRA, MKNAOMI, and MKDELTA (possibly MK-SVLP) and, with the Dulles brothers, Allen and John Foster respectively, directing the new instrument of state terrorism called the CIA and the foreign policy establishment, **the secret war of world conquest was launched.**

In the atmosphere of international discord that characterized the times and, with a cold war between two dominant ideologies, communism and capitalism, raging, America sought covert allies for their secret war. Such allies were readily found in Belgium and Portugal, and a little later, in the Apartheid regime of South Africa. The French were pre-occupied with armed conflict in both Algeria and Indo-China, while the British were dis-engaging from their former colonies, and the Dutch were growing increasingly anxious to get out of their former colonies. But Belgium and Portugal maintained an obstinate urge to do what they could to hold onto the wealth they controlled in Africa.

As we noted in an Interlude above ["David Carr: 'Pre-treated. But for what?'"] there was a small clique in Great Britain privy to the genocide and co-operating in it, but this was not on the same level as the co-operation which was provided by Belgium and Portugal.

1. Belgium, the Congo and HIV-1

The evidence [scientific, historic and political] now available to the AIDS researcher demonstrates to a compelling degree that certain people in Belgium were determined in the 1950's to do all that they possibly could to destroy the national aspirations of Black leaders in the Belgian colonies and to

replace these with puppets. These aspirations were supported by the United States in pursuit of its neo-colonial scheming. Historically and politically, Dwight Eisenhower by a 'wink and a nod' ordered the CIA to kill Lumumba, and to instigate a move to replace him with Moise Tshombe in copper-rich Katanga Province.

Although the actual murder of Lumumba took place a few weeks into John F. Kennedy's administration, the Belgian/ U.S. co-operation had been initiated early in the 1950's. However, our emphasis is upon the scientific evidence and we must precis that here.

In the 1950's a Belgian physician named Ghislain Courtois was placed in charge of a significant Belgian medical research laboratory in Stanleyville in the Congo. In this role he presided over two important medical research activities. Despite the fact that the area was plunging towards independence and people like Courtois ran the very real risk of being turfed out of the country, a significant new and large addition to his laboratory was built. In addition, at a place close to but difficult to access from Stanleyville, the Belgian government financed the establishment of Camp Lindi where, it was announced, over one hundred chimpanzees would be assembled for medical scientific research.

Then, in 1957 none other than Hilary Koprowski arrived for a visit to the medical laboratory and chimp farm. At the time of Koprowski's visit, he was still an employee at Lederle where he was working with biowar weapons researcher, Dr. Herald Cox. [If one needs some clue as to how involved in biowar research Cox was, one can find it in the fact that the microbe responsible for Q-fever, *Coxiella burnettii*, is jointly named after Herald Cox and Frank Burnet of Australia, and Q-fever is identified in the June 9, 1969 Hearings (see above) as a biowar agent being worked on by the Pentagon].

At any rate, Koprowski saw fit to visit the Belgian research installations in 1957, shortly before he went to the Wistar Institute, and to re-new his association with several Belgian researchers. Two significant details emerge from such records as survive of the Congo laboratory, the chimpanzee camp, the Ghislain Courtois research, the Koprowski / Belgian co-operation in subjects such as rabies research and the development of oral polio vaccines. One significant detail is that both Koprowski *and* the Belgian scientists involved later 'lost' their records. The second significant detail is that while in the Congo, Koprowski co-operated with the Belgians in testing polio vaccines.

In respect to the latter vaccine test program several other details emerge which are disturbing. First, although the polio vaccine was to protect **children** from the ravages of polio, Koprowski also insisted on vaccinating all **adults** that he could get his hands on. Furthermore, evidence now has come to light that Koprowski vaccinated hundreds of Blacks in the Congo and in Rwanda-Burundi, but he failed to note this in his [already skimpy] records. These areas later became known for the early appearance of AIDS and later for the high incidence of AIDS.

There are further areas for concern, and these revolve around the fact that although the first vaccines used had

come from America, it wasn't long before a 'polio' vaccine was being manufactured under vague auspices in Belgium. Discussion of this aspect of the U.S./ Belgian co-operation is vehemently denied by all parties, despite the preponderance of evidence that plain and simply, Belgium co-operated with the U.S. to concoct a vaccine for the Black citizens of Central Africa.

Finally, it is our duty to report that the areas whose citizens were first vaccinated by the U.S./Belgian efforts were the first areas from which HIV-1 emerged on a large-scale epidemic basis. And, we need to report the species of pathogen is that which is now known as **HIV-1** as distinguished from another species known as **HIV-2**.

And therein lies another story... the story of Portugal and AIDS.

II. Portugal, Guinea-Bissau, Goa, Brazil & HIV-2

According to a strange story that is heard throughout the world, there was once a green monkey which bit a Black woman and transmitted a simian immune deficiency disease agent to her. Patient Zero one might call her. The said lady then had intercourse with someone to whom she passed the SIV, who had intercourse etc. and before long an infected person had intercourse with a Canadian airline steward who, although celibate while in his home country and heterosexual when visiting Africa or wherever it was that he picked up the SIV (now known as HIV) turned homosexual whenever he visited the United States. In the U.S. travel-enabled as he was with his airline employee pass, he scooted around New York, San Francisco and Los Angeles having sex with some 2,500 fellow gays. And that, Dear Children, is how AIDS came to be in Africa and among homosexuals on the American east and west coasts.

Patient Zero plus One you might call him, but according to the U.S. Centers for Disease Control his real name was Gaetan Dugas.

Imagine anyone in his right mind believing this myth or any part of it to the effect that AIDS came out of monkeys in the jungle into the human family!

Such a myth makes it impossible to account for several anomalies.

First, there is the anomaly that there are two **major** HIV streams: HIV-1 and HIV-2.

Does the presence of a second strain suggest that perhaps a blue monkey (Yes, Virginia, there are blue monkeys known in formal company as *Cercopithecus mitis schoutedeni*) bit a Brown woman in Brazil?

Or does it suggest something more supportive of our research evidence: that AIDS was developed in American laboratories and that HIV-1 started off in the Lederle Lab and was the seed for HIV-1 presenting in Belgian-controlled Congo and other places, while HIV-2 came from some other laboratory? A laboratory in or associated with Portugal?

Let's consider the evidence about HIV-2.

The first, and indeed the absolute, fact about HIV-2 that one must face up to is this: the major areas of the world which are infected with HIV-2 are areas where the

Portuguese language is spoken. These include the former African colonies of Portugal, the Goa enclave in India, and Brazil.

Summary

There are two main streams of the so-called HIV current in the world. How can one possibly account for that fact? One can, of course, just ignore the problem. Or, one can accept that HIV-1 came into being when a green monkey bit a Black woman and HIV-2 came into being when about the same time a blue monkey bit a Brown woman.

Or, one can face the fact that HIV-1 and HIV-2 were developed in American military controlled laboratories, and that changes occurred when Belgian and Portuguese controlled labs took over some of the vaccine production.

Smallpox and AIDS

Trade Your Old Diseases for New

On May 1966, the World Health Organization, nominally an agency of the United Nations, but realistically a Rockefeller fiefdom, was authorized to begin a worldwide effort to eradicate smallpox by vaccination. WHO had let on as far back as 1959 that such an eradication program was being undertaken, but their early efforts were sporadic and more limited in target countries selected for attention. So, the 1959 WHO sponsored smallpox eradication program faded from view.

Then, seven years later, the smallpox vaccination program was re-newed with unusual vigor. WHO contacted Dr. Donald A. Henderson, then at the Centers for Disease Control in Atlanta, and asked him to take charge of the new and better effort. At first, Henderson demurred, but his boss, the Surgeon General of the U.S. Public Health Services told him that he had to take the job. The United States had decided at some level in the shadows to make worldwide smallpox eradication their top health priority. Period. The CDC was to put together about seventeen teams of doctors, technicians, support personnel and equipment and get over to Africa and selected other countries as quickly as possible. In these countries they were to encourage, bribe and coerce as many people as they could get their vaccine needles into, and under Henderson and with a certain amount of other nations helping, they worked for approximately ten years.

But, tragically, although the smallpox eradication program worked and on April 17, 1978 Ali Maow Maalin, a hospital cook in Somali was identified as the last person in the world to become naturally infected with smallpox, a funny thing happened on the road to world health: an even worse epidemic broke out. At first it was a sporadically appearing mix of opportunistic illnesses, many not previously thought to be particularly harmful to humans. Then the numbers began to swell. And strangely enough, they began to swell most

noticeably in Third World countries that had just recently been the recipients of WHO vaccine largesse. Just what was going on?

Before we answer this question, we must say a word or two about Dr. Henderson, and that mirror image of AIDS that was suddenly to pop onto the scene in 1981, chronic fatigue syndrome.

In 1956 Henderson was the chief of the Epidemic Intelligence Service at the Communicable Disease Center of the U.S. Public Health Service. In this role, Henderson undertook to investigate a mysterious epidemic in Punta Gorda, Florida. In this small town one morning in early 1956, the citizens started out on their usual round of activities. Going to school, teaching school, doing laundry and hanging it out in the backyard. Some were walking to work in stores and others were planting gardens. But, most noticed something very unusual: there were millions and millions of mosquitoes!

Now, it was one thing for Punta Gorda to have mosquitoes, but on this spring morning it was ridiculous. Everyone doing anything outside was being bitten by mosquitoes. One local resident even phoned the U.S. meteorological office and reported the infestation. The person answering the call seemed ready with an answer. The mosquitoes, it seems, had fled from a fire in the Everglades some thirty miles away, and had sought shelter in Punta Gorda! Now, according to entomologists, mosquitoes are so insensitive to their environs that they wouldn't flee if they were on one side of a barn and the other side was burning. But, the Punta Gorda mosquitoes evidently knew that there was a fire somewhere nearby and they headed over to the latter city... strangely enough, by-passing some small villages along the way.

Then another unusual thing happened: about a week later the first few cases of chronic fatigue syndrome ever seen in Punta Gorda, struck some of the residents. Before the year was out over 150 persons reported the symptoms of the disease, and this brought Donald Henderson to town.

But, there was something else doing with mosquitoes at the time. Up in Canada, at the Dominion Parasite Laboratory in Belleville, Ontario, the Federal Government was busy breeding one hundred million mosquitoes a month. These mosquitoes were then transferred to one of Canada's prestigious old universities, where, in the biology department, a Dr. Guilford B. Reed contaminated them with experimental pathogens provided to him by the Canadian and American Militaries. When the mosquitoes were suitably disease-laden, Dr. Reed transferred them to the Canadian Military to share with their American counterparts. Then, in selected towns in Canada and the U.S., the military took on the job of turning them loose in the middle of the night by a variety of means. Then, a week or two later people from the Army and from the newly Nelson Rockefeller organized Public Health Services would turn up to see how the folks were making out.

Was this why Dr. Henderson went to a great deal of trouble to evaluate the effects of CFS on Punta Gorda citizens? We don't know, but we do know this: our studies

indicate that if some agency is conducting tests in an area, the person(s) that they send to 'investigate' already know what is going on. It would be terribly risky to send in a naive outsider.

However that may be, we know that Dr. MacArthur of the Pentagon was able to report to Congress on June 9, 1969, that one of the Pentagon's new pathogenic disabling agents could be transmitted by primary aerosol and by a mosquito vector! Now how did he know that for sure unless it had been tested somewhere on someone.

Another thing to note: by 1956 the Huebner mycoplasma research was well under way and it had to be tested on someone, somewhere.

So, this is the Dr. Henderson who is tagged by WHO, through the CDC, to get over to Africa and vaccinate millions of Blacks. Then, sad to relate, some five plus years after getting the smallpox vaccine, millions and millions of Blacks began to present with HIV/ AIDS.

Summary

What was going on? Here is our summary timetable of events:

- 1942 to 1950: Huebner identifies immune suppressing PPLO later recognized as a species of mycoplasma
- 1946: George Merck of Biowar research reports to Secretary of Defense that his researchers have isolated the 'disease active principle' from bacteria in crystalline form
- 1946-1947: the immune compromising mycoplasma tested on school children in Iceland under the well-trained Rockefeller researcher, Bjorn Sigurdsson
- 1947-1959: Bjorn Sigurdsson turns major research efforts to the retrovirus that presents as Visna/ Maedi in sheep
- 1950-1960: (especially 1959) a variety of tests on human guinea pigs, including children accessed through the Henle's, prisoners in various jails and prisons, nurses and hospital staff who were subject to directed vaccine programs from time-to-time, and even whole communities, exposed to the disabling mycoplasma-based co-factor, by insect vector and vaccines. Koprowski moved from Lederle to Wistar, and co-operates with Belgian and Portuguese medical administrators to conduct vaccine tests in selected areas of Africa, wherein the immune suppressing co-factor of the mycoplasma is united with the retrovirus of sheep in various vaccines...including in a major way, oral polio vaccines. Sporadic deaths reported in Africa, Manchester, and other places of African women vaccinated earlier by Koprowski; of David Carr, vaccinated in the Royal Navy as a 'pretreatment' for something; and, others.
- 1960-1963: a hiatus in many activities following the election of John F. Kennedy who opposed all talk of eugenics and population control.
- 1963: Mr. Kennedy succeeded by liar and eugenics minded President Lyndon B. Johnson. LBJ appoints John D. Rockefeller III as co-chair of a government population control committee and boasts that expenditure for population control programs grew from \$6 million annually to \$115 million under his administration. The secret CIA

MK-SVLP moved into official government activity category as Special Virus Leukemia/ Lymphoma Program
 1966: All systems are 'Go' for worldwide population control action.
 1966: Henderson placed in charge of vaccinating millions of Blacks against smallpox.
 1969: Richard Nixon elected President. As a result of a pre-election political deal with Nelson Rockefeller, Nixon appoints Henry Kissinger, arch-criminal, as his National Security Advisor. SVLP turned into SVCP... and millions of dollars made available for Nixon's 'war on cancer'.
 1969, on June 9, Dr. Donald MacArthur tells Congress that by 1980 the Pentagon will have two new biowar agents in place: AIDS to kill and CFS to disable.
 1981: MacArthur's promises come true: AIDS and CFS spring into being.

The Rockefellers' Stable of Talent *'Are you there, Henry?'*

On page 83 of *The New York Times* edition of *The White House Transcripts* the following conversation between President Richard Nixon and White House Legal Counsel, John Dean is reported:

President: Hoover to Coyne to Nelson Rockefeller to Kissinger. Right?

Dean: That's right.

President: Why did Coyne tell it to Nelson Rockefeller?"

Here one has the very image of democracy in America.

Dean and the president have been trying to track down the route by which conversations exchanged in the confidence of the Oval Office have become known to persons who were not present at the time they were made.

The presence of Hoover, the Director of the Federal Bureau of Investigation in 'the loop' is no surprise to Nixon. After all, this corrupt and evil guardian of the law in the United States at the time was known to have spies and sources everywhere so that he could maintain his blackmail files and keep his great Washington power. And 'Coyne', probably Ed Coyne of the *Wall Street Journal*, was no great surprise... he was known to have back channels to many Washington insiders, but, the fact that Coyne brought Nelson Rockefeller in to the loop seems to catch Nixon by surprise: "Why did Coyne tell it to Nelson Rockefeller?"

The exchange between Dean and the president is significantly informative on a number of fronts. First of all, the fact that not only had Hoover learned of the matter under review, he had shared it with a member of the media. Then, not only did the media member have the information as background for any stories that he might see fit to use, he

had also passed the information to none other than Nelson Rockefeller!

In other words, the information had been passed up the ladder to a key member of the Rockefeller power center, demonstrating just who it was in the democracy of the United States that was at the center of the shadow government which was really running things. Even Nixon didn't know.

Then, it is important to note where the information went when Rockefeller had it: Henry Kissinger. Up to the top, Nelson Rockefeller, then out to the Rockefellers' man in the White House: Henry Kissinger.

We introduce this chapter with this snippet from history to demonstrate where the real power lies in American politics: the money interests who have corrupted senior administration officials (Hoover); who have representatives of the fabled 'free press' as intelligence gatherers (Ed Coyne); and who control the president's senior executor in all matters dealing with National Security (Henry Kissinger).

The power core of the United States is built upon wealth, which controls the media, the medical establishment, the pharmaceutical industry, the military industrial complex, the 'public' politicians, American foreign policy (including that instrument of foreign policy... the making of war).

And the core of the wealthy establishment is the Rockefeller network.

The wars that the American people have allowed themselves to wage on behalf of the wealth power core, including that in Vietnam for tin and tungsten; that in the Middle East for oil; and finally, that secret war in Africa for that continent's great untapped resource base, and employing the de-population weapon of AIDS, have all been contrived by the lackeys of great wealth, and in 1973 when Nixon was being double-crossed while himself double-crossing others, the flow of information was to Nelson Rockefeller and from him it went to Henry... 'Are you there, Henry?'

So, the major stud in the Rockefeller stable of talent, was Henry Kissinger, but we'll leave him to the end of this article. Let's start back in 1943 in Brazil where the Rockefellers ruled supreme. Who was in the stable there?

Edwin Lennette worked at the Yellow Fever Research Service in Rio de Janeiro, Brazil, for, nominally, the Brazilian Ministry of Health and the Rockefeller Foundation. One of his areas of research was an investigation of encephalitis. One of the experiments he participated in involved the Venezuelan equine encephalomyelitis virus [VEEV]. Thus, Lennette was right in on the ground floor of biowar weapons research for, when Dr. MacArthur of the Pentagon was briefing the Congressmen about Pentagon research in that field, on June 9, 1969, he was asked what pathogens were being worked on. MacArthur replied: "...Incapacitating agent (among others): Venezuelan equine encephalomyelitis virus (and) Lethal: Yellow fever virus!"

Hillary Koprowski turned up in Brazil in 1940, where he, too, worked for the Rockefeller Foundation! One of his fellow researchers was Edwin Lennette, and consequently, one of his areas of expertise was VEEV, which, as one author points out was later put to use in the development of a vaccine

by Koprowski and the U.S. Army and whose potential as a ‘biological warfare agent was swiftly recognized.’ In 1944, Koprowski used his Rockefeller links to immigrate to the U.S. where he first worked for the Rockefeller Institute. Then, he went to Lederle Laboratories and association with Herald Cox, whom we have already met. [We have noted elsewhere that the disease pathogen *Coxiella burnettii* had been named in honour of Herald Cox and Frank Burnet. *C. Burnettii*, in turn, is the causative factor in Queensland fever (Q fever) and the latter was also identified by MacArthur in his report to Congress, as a ‘disabling’ bioagent being worked on by the Pentagon.]

From Lederle and some early and mysterious trips to Belgium and the Congo, Koprowski arrived at the Wistar Institute and was a part of much that followed.

Meanwhile, in another part of the stable, Dr. Bjorn Sigurdsson was also working for the Rockefellers. In the early 1940’s Sigurdsson was working at the Rockefeller Institute in New Jersey. Later, with hundreds of thousands of Rockefeller dollars he returned to his native Iceland, to study ‘experimental pathology’. He was just in time to experience the first major outbreak of a mysterious ‘incapacitating’ disease agent that hit over 1000 Icelandic students, five of whom developed Parkinson’s Disease and later died. From there he went on to study the nature of the sheep retroviruses, which co-incidentally, are a major component of the ‘lethal’ disease pattern called HIV-1, and which by being able to take over the reproductive mechanism of its host cell [RNA-directed DNA polymerase], can perpetuate itself in its victim.

In the 1970’s Fritz Deinhardt looms very large in the Special Virus Cancer Program. In Progress Report #8 alone, he is cited 19 times. An expert, it would seem, in cancer. But, it wasn’t always so. In fact, back in 1958 the record shows that he was a great colleague of Hilary Koprowski, and, when Hilary was in the Congo testing *something* on chimpanzees at Camp Lindi, there also was Fritz Deinhardt plying the poor chimps with a hepatitis vaccine that he was researching. Of special interest to us in this precis about AIDS, was that part of Deinhardt’s work focused upon the role of hormones in contagious liver diseases. This research becomes even more pertinent when one has a chance to study the SVCP, Progress Report #9, for in the latter document the following is reported as an important discovery:

“We have for the first time demonstrated that the virogenic markers, group specific antigens (g.s.) and RNA directed DNA polymerase, can be activated by alteration of the physiological endocrine balance.”

What is so relevant about this discovery (made for the first time!)?

To begin with, the ‘endocrine balance’ has to do with the role of the hormones, and the role of the hormones has everything to do with the ability of certain mycoplasmal species to alter that endocrine balance. Here is how it works: 1. When roused to action by some trauma, certain mycoplasma will up-take pre-formed cholesterol from its host cell. Cholesterol, in turn, is antecedent to the production of hormones in certain secretory glands. If the cholesterol

supply is limited due to mycoplasmal up-take, then the supply of certain hormones is ipso facto also limited. Hence, the significance of Deinhardt’s hormone research vis a vis hormone balance, hepatitis, and chimps in the Congo. [See the article in this issue: “Robert Gallo; ‘Thanks Luc.’” and note how cholesterol figures in mycoplasma infection.]

However, of significance to us at this point is the fact that Deinhardt’s work was to a large part financed by the Rockefeller Foundation.

Put Fritz Deinhardt in to the Rockefeller stable of talent.

We have noted elsewhere in this Special Edition of *JODD*, the role of certain Belgian scientists in a variety of Koprowski-related activities. However, we should take particular note of Dr. Ghislain Courtois. It turns out that in 1955, before embarking upon a vaccination program in Central Africa where the records of just what was being vaccinated against had been lost, Dr. Courtois was brought to America for a three month study session. He started this tour at the Rockefeller Institute in New York, then he continued his studies at Rockefeller-sponsored labs in Trinidad and Rio de Janeiro.

Then in 1958, a very critical year in the history of AIDS, Dr. Courtois visited the Wistar Institute for a training course. After this course, he traveled to Tulane University in New Orleans for further ‘study’. As we develop in greater detail in our work-in-progress, *The Crime Beyond Belief*, Tulane was a significant Rockefeller-dominated research center for biowar weapons development. However, at this time it is enough to note the large role played in the education of Dr. Courtois by the Rockefeller empire.

There are many others that we could cite whose activities had links with the Rockefellers. However, we trust that we have made our point: the whole story of AIDS cannot be told without someone from some part of the Rockefeller empire appearing in the narrative. Now, we will direct our attention to the most significant of the Rockefeller stable: Dr. Henry Kissinger.

In Kissinger, the rubber of eugenics theory meets the road of population control. The insidious presence of the Rockefellers is translated into the realpolitik of the Nixon administration and a number of threads of science and power lay the ground for 1981: the year when a disabling pathogen and a lethal pathogen are officially in the human family and the rate of population growth begins to slow. Although President Nixon is the passenger in the limousine and thinks that he is giving the orders, and Kissinger is the chauffeur at the wheel, the route has been set by Nelson Rockefeller and his family, through his friends in high places.

President: “Hoover to Coyne to Nelson Rockefeller to Kissinger. Right?”

“Are you there, Henry?”

Heinz (later changed to Henry) Alfred Kissinger was born on May 29, 1923, in Germany. In 1938 his family fled Germany for Britain and shortly after for the United States. In 1943 he was drafted into the U.S. Army where he played an unusually successful role as a district administrator in the occupation of his birth state. His major move towards a

significant role in world affairs came in 1956 when Nelson Rockefeller appointed him a director of a Rockefeller Brothers Fund special project to study the major domestic and foreign problems of the United States. Essentially, he was to develop political positions for Nelson Rockefeller's bid to become president of the U.S.

However, all of Rockefeller's money and duplicity together with Kissinger's insidious skills in manipulating those whom he targeted, were not enough to defeat Richard Nixon in the latter's bid for the job. Early in 1968 it had become evident that Nixon was going to be the Republican Party's choice as their candidate, and Rockefeller met with Nixon to strike a deal. Essentially the deal was this: Rockefeller would withdraw from the race and devote his money and media strength to the election of Nixon, if, in turn, Nixon would appoint Kissinger as his head of the National Security Council [NSC] when he had won the election. Nixon agreed, mainly to get Rockefeller into his tent during the campaign.

Thus it was that Kissinger became the Rockefeller's man in the White House. Nelson Rockefeller had added the key stud to his stable of talent. As head of the NSC, Kissinger essentially controlled the Pentagon and the CIA and the great eugenics plan of the Rockefeller family became official (although publicly unstated) United States policy. The MK-SVLP sub-program of MKULTRA had become The Special Virus Leukemia/Lymphoma Program [SVLP] under Johnson when he appointed John David Rockefeller III co-chair of his Population Control Committee, ending the Kennedy era opposition to the concept. Johnson had moved population control from the basement to the back kitchen. With Nixon's designation of Kissinger as head of the NSC and as the president's special assistant for security affairs, population control moved from the back kitchen to the living room. Under the guise of a great war against cancer, the Rockefeller man in the White House, Henry Kissinger, launched an all out attack upon the Third World's people.

The WHO smallpox vaccination campaign, initiated on a trial basis in the mid-1950's, and revived by the Johnson administration with its John D. Rockefeller III and Wilbur Cohen Population Control Committee in 1966 went all out in late 1968 when Henry Kissinger came to dominate United States foreign policies on behalf of his Rockefeller patrons. Thus it was that on **June 9, 1969**, Dr. Donald MacArthur of the Pentagon was free to share in secret Hearings with several Congressmen the fact that 'eminent scientists' were ready to launch a double-barreled assault on the world's population growth rate. One barrel would fire a disabling pathogen at the White population [CFS] and the other barrel would fire a lethal pathogen at the Black population [AIDS]

All that was needed was \$10 million and from five to ten years time and by 1980 the Rockefeller/ Kissinger/ Pentagon/ NIH / CDC attack on population growth would be under way with the twin epidemics of AIDS and CFS.

An Interlude For Justice

At this point, we want to make sure that all of the people involved in this greatest crime in history, the death and

disablement of millions of people from AIDS and CFS, is not laid completely at the door of Henry Kissinger. Kissinger was and is part of the executive branch of the eugenics war against humanity in general. He is not alone. In the core are the Rockefeller dominated industrialists, militarists, and media moguls. Around that core are the descending orders of support for the evil policies now at work. And, finally, there are the people of the United States who by a mix of mental lethargy, disinterest, misinformation, disinformation, 'kick-butt' mentality and self-centeredness have allowed themselves to become mankind's' greatest enemy rather than mankind's best friend.

As part of this total plan are people such as Christopher Hitchens who, while appearing to condemn the evil, singles out Kissinger as the criminal for punishment. Hitchens, in his book *The Trial of Henry Kissinger* alludes to Nelson Rockefeller only three times *en passant* and David Rockefeller only twice. If one were to judge by Hitchens' disinformation, Kissinger is the heart of darkness, was literally working alone, and he alone should be put on trial.

Don't buy that crap.

Kissinger was and is just one stud in the Rockefeller stable. The stable owners (the Rockefellers and their cohorts); the pliant media assets (including *The New York Times*, *Time*, *Readers Digest*, and *Science*) which misinform and disinform; the bought politicians; and the public at large are all to varying degrees, complicit in making the United States of America the real 'evil empire'.

Robert Gallo

Thanks, Luc"

Robert Gallo is an unprincipled, immoral gangster and is the scientific front man for the Rockefeller eugenics agenda. His attempt to claim Luc Montagnier's LAV as his own discovery under the name HTLV-III is well known. His experiments upon children aged as young as two years [and to whom he referred as 'informed volunteers'] are on the record and are developed in great detail in our work-in-progress *The Crime Beyond Belief*. In our article on Hilary Koprowski we have already noted Gallo's 'father/ son' relationship with the former. Less well known, is Gallo's 'friendship' with Dr. Carleton Gajdusek.

When Gajdusek was arrested for sexually molesting one of his adopted 'sons', it was Gallo who put up the bail money. We shall say more about Gajdusek later in the article, but at this point we want to make it clear that Gallo has critical links with all the main players in this tragic story of AIDS.

When the eugenics evil came to dominate the minds and social goals of the Rockefellers and they in turn used their inherited wealth [much of it criminally acquired by the family patriarch John D. Rockefeller, Sr.] to buy the media and the politicians, they needed someone in science, who had one foot in the public sector camp of government health

agencies, and another foot in the camp of the private capital pharmaceutical industry who would convert the science of the Koprowski Krowd into the vaccines of the WHO smallpox campaign.

In Robert Gallo they had their man. Let's outline the rogue's progress as he helps convert the lunacy of eugenics into the crime beyond belief... AIDS and its mirror image... CFS.

In Gallo's self-serving account of his career, *Virus Hunting*, some of what he writes is apparently true. Let's start with one of those truths quoted from page 20:

"In Providence College I majored in biology, helped in a research project on **cholesterol** biosynthesis... and became interested in the **thymus gland**... As a strange coincidence, the focus of my research team twenty years later would be on the thymus-derived T -cells."

Wow! A strange co-incidence, indeed.

To the average reader of this Special Edition on AIDS, this quote of 42 words appears to be making note of one or two simple facts of Gallo's career. However, when one has spent the last nine years as we have trying to plumb the murky depths of AIDS and CFS, these 42 words are like a sample of the rot in the channel's bottom mud. Let us explain.

When Robert Huebner found the mycoplasma in the spontaneously degenerating adenoids of some Naval recruits, [see article on Huebner above] he realized that the mycoplasma was apparently capable of doing great damage to living tissue. But he didn't know how it all worked.

The science of how certain species of mycoplasma acted was explored by other scientists, and in the work of three of the latter, we find our first intriguing detail linking AIDS to Robert Gallo in Providence College. The three scientists, S. Rottem, E. A. Pfendt, and L. Hayflick, released the results of their research in 1970 in an article titled "Sterol Requirements of T-Strain Mycoplasmas". The researchers demonstrated that the T-strain mycoplasmas had an absolute growth requirement for the up-take of pre-formed sterols from host cells. Such sterols included **cholesterol**.

Cholesterol! Take another look at what Gallo was doing when he was a student at Providence College: "...a research project on the biosynthesis of **cholesterol**." He was off to an early start. The question is: was it just a co-incidence (as he labels it) that one of the critical factors in mycoplasmal-instigated diseases happened to be the subject of early Gallo study? Or, was Gallo being prepared very early on to work in a field, which required knowledge of cholesterol biosynthesis?

Your guess is as good as ours, but we believe that there is a very strong possibility that Gallo had been identified early on for work in the 'relevance of this field of [molecular biology] to biological warfare' as Dr. MacArthur was later to suggest to the Congressmen (June 9, 1969) and that in 'the mid-1950s' Gallo was being prepared while still a college student for a future role in that warfare. We do not have the space to develop this theme here, but in our forthcoming book we look at the recruitment of college students for future service in lieu of being drafted for military service, and use the story of people like Philip Agee, Carleton Gajdusek and

Edward Shorter to demonstrate our thesis.

Gallo himself acknowledges the appeal of becoming a clinical or research associate since the 'war in Vietnam made an appointment even more desirable ...as service in [NIH] was accepted in lieu of a military obligation.'

Not only had Gallo been given an early start on the role of cholesterol in the degenerative diseases, but he also had the good fortune to develop an early interest in the thymus gland. The latter glandular structure of largely lymphoid tissue with its critical role in the maintenance of the immune system was the key to a growing understanding of how that immune system could be compromised and so open the victim up to assault by opportunistic and normally innocuous diseases. It was to become a part of the Special Virus Leukemia/ Lymphoma Program [SVLP] which possibly grew out of MK-SVLP and which finally emerged as SVCP. A co-incidence? Oh what tangled webs...

Following Providence College, in 1965 Robert Gallo joined the National Institutes of Health. Things were beginning to boom at NIH. The effects of the Lyndon Johnson drive towards population control, with his appointment of John David Rockefeller III as a co-chair of a special committee was accompanied by dramatic increases in funding for activity in that field. It was in 1965 that the SVLP got its official funding with \$8.7 million and this shot up to \$13.5 million by the next year. Something dramatic was going on and in *Virus Hunting* Gallo does his best to obfuscate just what that something was! In fact, trying to follow the action as Gallo recounts it is something like trying to track footprints through a bog.

An Interlude

In 1964 NIH launched what they officially called a 'Viral Oncology Program' [VCO] but NIH labeled it simply 'VO' in their public references and funded it with \$4.9 million. This program was apparently initiated so that there was an executive agency which would lay the foundation for bringing all the pieces of the Koprowski, Huebner, Deinhardt, Sigurdsson, Henles' research together and translate it into a program to produce a smallpox vaccine as a carrier for Huebner's mycoplasma and Sigurdsson's visna virus. The visna having been passaged through cows to emerge as bovine leukemia virus [BLV].

The VOP lasted for four years, but in its second year an offshoot called The Special Virus *Leukemia/ Lymphoma* Program [SVLP](note BLV above) was created with a budget of \$8.7 million. The 'leukemia/ lymphoma' emphasis of course, ties together much of what the listed researchers were 'publicly' working on. SVLP lasted for three years, but in 1968 was converted to the Special Virus *Cancer* Program [SVCP]. At this point we can repeat a quotation from Lyndon Johnson:

"When I entered office we were investing \$6 million annually for population control. During my last year in the White House (1968) that investment had grown to \$115 million."

In that last year that Johnson refers to, the official

spending on the Special Virus Programs totaled \$18.7 million. Where did the other \$100 million (approximately) go? In response to this question, one needs to read further in Johnson's autobiography. In the same chapter [15] he tells how he was able to funnel funds through the Agency for International Development [AID] which had been working with the CDC on African 'health' projects. Here it must be noted that Bill Foege of the AID-CDC African health projects became a key administrator when Donald Henderson launched the revived 1966 WHO smallpox program.

Convuluted? Yes, indeed, but one doesn't set out to kill off 8,000 people a day in broad daylight (as is happening today) without doing everything possible to cover one's tracks. So, bear with the VOP to VO to SVLP to VCP to SVCP labyrinth. It was meant to confuse you, but don't let it! Follow the money.

End of an Interlude

So, back to Gallo.

In 1965 Gallo joined the NIH, and lo and behold... who else was a member of that burgeoning 'health' agency? None other than Robert Huebner who had got a lot of the action under way in the late 1940's when he tied the degeneration of adenoids to the mycoplasma. Huebner had first joined the Infectious Disease Institute of NIH but transferred to Gallo's Cancer Institute in 1971.

Not only was the NCI of the NIH growing in terms of personnel, but there was a physical plant growth as well, which coincided with Gallo's arrival. It was decided in 1964 to build another office/laboratory complex to be called 'Building 41' (all NIH buildings were numbered for their place in the sequence of additions to the campus). Here again, there is a small detail to be noted: corresponding as it does with the launch of the SVLP, it is significant that Building 41 was referred to by NIH staffers as "**The Germ Warfare Facility**".

Despite the fact that Bldg. 41 was commonly referred to as the 'germ warfare facility' and is even referred to that way in Robert A. Weinberg's book *Racing to the Beginning of the Road*. there is no hint in *Virus Hunting* that Gallo had any clue that the building was even there nor had he any clue as to what was going on.

The NCI/NIH interest in Huebner's mycoplasma is also evident in the outside research that they financed. For example, in 1965 NIH awarded a contract to Michael Gabridge and William Murphy of the University of Michigan [Contract SVLP: PH43-65-639] The subject of the Gabridge/Murphy research was "Toxic Membrane Fractions from *Mycoplasma fermentans*"! For more detail on why this research is critical to any study of AIDS, see Exhibit Two in this Special Edition of JODD. In a Patent that Lo filed for the U.S. Government this **mycoplasma** is postulated as a co-factor in AIDS.

Also relevant was the fact that at this same time Dr. Leonard Hayflick, over at the Wistar Institute [one of the Koprowski Krowd] produced a study called "The Mycoplasma and Human Leukemia".

Another important personnel addition to the NCI/NIH research group was Sol Spiegelman who joined in 1969. In this series of precis articles from the outline of our work-in-progress, *The Crime Beyond Belief*, we cannot go into detail about Spiegelman's work, but to give you an idea we refer to the SVCP Progress Report #8, page 324. Here it is noted that Spiegelman co-authored a research report titled: "DNA polymerase activities in virions of **VISNA VIRUS**"

Another Gallo- Spiegelman link that is significant to our study is a biologist named Arsene Burny. Gallo introduces Burny as a 'member' of the Spiegelman 'group'. For our purposes we need to note that Burny had first worked in Belgium [see article above: "The Belgians and the Portuguese"]. His special field was bovine leukemia virus [BLV], which is what Gallo was working with, but which he disingenuously named HTLV-1. Furthermore, Burny was a co-author with Spiegelman on the visna article noted above.

We could go on with more examples about the Gallo years at NIH, but we have made our point: when one looks behind Gallo's obfuscating and selective details, one finds solid links to the mycoplasma and the visna virus that we started with.

An Interlude

Peter Dale Scott is an ex-patriot Canadian now living in California. Professor Scott has coined the phrase '**negative template**' to refer to key details that are omitted in any so-called account of some event. Don't look exclusively at those things that are revealed, suggests this profound scholar, look instead for the details that are omitted, if you wish to find the full story.

End of an Interlude

'Negative template' could be Robert Gallo's middle name. One example out of many will illustrate what we mean.

In 1970 Gallo co-authored an article with Stringner S. Yang and Robert C. Ting. The title of the article is "RNA Dependent DNA Polymerase of Human Acute Leukemic Cells". Gallo, in his *Virus Hunting* alludes to Ting, but makes no mention of Yang. No apparent problem there.

However, there is a problem in the fact that both Yang and Ting worked for **Bionetics Research Laboratories** and at the time Bionetics was a biological weapons contractor to the United States Government. Nowhere in the index of Gallo's misinformative book does Bionetics or its principal, Litton Industries, appear. Again, Gallo deals with suggestive material simply by leaving out all possibly compromising references to such.

The fact is this: all the evidence that we have been able to seek out in the countless documents that are our source, makes it clear that Robert Gallo was the man with one foot in the government camp and one foot in the industrial camp, where he was charged with the responsibility for producing a smallpox vaccine for WHO, designed to plant the co-factors of AIDS (the mycoplasma and the visna virus in its BLV variant) in as many people of the Third World as could be enticed to accept the American' gift'. He was charged with the task of making all the research sound something like a

great war on cancer, while he was actually carrying out a secret Rockefeller/ Kissinger war on humanity.

But, when in 1983 Dr. Luc Montagnier of the Pasteur Institute in Paris identified a particle in the blood of AIDS victims which he knew was related to the disease agent which causes lymphadenopathy in humans and which he linked to a retrovirus, he called it Lymphadenopathy Associated Virus [LAV] and so pushed Gallo to claim that he had already isolated the disease agent. Typical.

But, our focus is upon the negative templates that Professor Scott suggests we look for, and in Gallo's career one can hardly see the forest for templates! We can't summarize the Gallo/ Bionetics collaboration here for lack of space, but we develop the criminal conspiracy in extensive detail in our forthcoming book *The Crime Beyond Belief*. In the meantime readers can refer to Leonard Horowitz dramatic book *Emerging Viruses: AIDS & Ebola* pages 79 to 84 for an excellent summary of much of what Gallo leaves out of his creative writing exercise.

Brian Mahy

Money Goes Missing, but Brian Stays Put

First, as we embark upon this study of Dr. Brian Mahy formerly the Director of the Centers for Disease Control in Atlanta, Georgia, we want to pose a 'Hypothetical Situation' for our readers and to ask them to respond. Here is the situation:

The eighteen year old boy in the mail room of a large office is also in charge of collecting money from all staff members for the coffee fund. He collects the money once a week and on Saturday morning he goes to the mall and buys coffee, filters, cream, sugar and diet sweetener, which he takes back to the office lounge and stores appropriately, to be available for Monday morning.

One Monday morning he tells certain members of the staff that he had not bought any decaffeinated coffee on Saturday because he did not have enough money. The office manager calls him aside and learns that on Friday the boy had collected \$90 from staff members. He also learns that on Saturday he had bought and paid for \$40 worth of supplies, and has receipts for these. He also has receipts showing that he had paid for a movie ticket, a bag of popcorn and a large soft drink. Total:\$10. The boy is short \$40 of what he had collected for the coffee fund, and he can not account for the shortage.

So there is a hypothetical situation, now we want you to suggest what should be done about the \$30 shortfall, and what should happen to the mail room coffee break eighteen year old.

Once you have carefully thought it over, **forget about it** as having been just an idle diversion from this study of AIDS

and CFS. Instead, let's get serious. Try this one:

Dr. Brian Mahy, the Director of the viral diseases division of the Centers for Disease Control, had been given, during his tenure, somewhere around \$24 million by vote of Congress to investigate chronic fatigue syndrome. Many members Congress may personally have been inclined to dismiss the disease because they had read such trivial junk as Dr. Edward Shorter's *From Paralysis to Fatigue* but they also held elected office and the growing numbers of CFS victims made it prudent to go along with the appropriation of research money.

Thus, into the hands of Director Mahy there was delivered \$24 million of U.S. Taxpayers' money. And Brian made a big thing about how the money was being spent to make great progress in the search for CFS disease answers. However, like Kurt Vonnegut's space men in *Breakfast of Champions* who communicated by farting and tap dancing, Mahy never managed to give a clear picture of how his expensive research was progressing.

Then one day Dr. William Reeves, who was also a researcher at CDC and whose department was supposed to be getting some of that \$24 million, called a press conference under the protection of the *Whistle Blowers' Act*. At the press conference Dr. Reeves alleged that his boss, Dr. Mahy was misspending the money voted by Congress.

Congress had no choice but to act. They temporarily relieved Mahy of his title, but kept him on payroll. Then, they asked for an audit of where the \$24 million had gone.

The auditor's report was damning. It seems that Mahy had spent about \$12 million on what might be termed CFS research if, that is, one were to interpret 'CFS research' in the most liberal way. Then, said the auditor, Mahy had clearly misspent \$8 million on things that in no way could be called CFS research. Finally came the 'coffee fund' clinker (see 'Hypothetical Situation' above). The auditor reported that, try as hard as he could, Dr. Brian Mahy was not able to remember where the remaining \$4 million had gone.

This, of course, was very serious stuff and Congress took appropriate action. First, they appointed a new Director. Then, to punish Mahy for the loss of \$4 million, they moved him to a smaller office down the hall from his previous large director's office. There, to our current knowledge, he still sits. Doing what, we are not sure. We tried to phone him to ask, but the telephone receptionist at CDC to whom we spoke told us that we would have to speak to CDC's public relations people. Dr. Mahy, she told us, was not being forwarded any phone calls.

After we had posed our 'Hypothetical Situation' above and had asked what you would do about the boy and the forty missing dollars, we said 'forget it'. We take that back. What would you do? Chances are that a number of you would say, "Fire the coffee boy".

Now to the crux of this whole affair: **Why was Mahy not fired and even criminally charged for the loss of \$4 million?**

Answer: Dr. Brian Mahy knew too much about the development of the AIDS/ CFS disease pathogens to be fired. Furthermore, Congress has been given their marching orders

by those who give such orders from the shadows: “Do not press the Mahy loss of \$4 million. Period.”

And that is where it sits.

Before we leave this aspect of the Brian Mahy story, we must make one passing reference to the media assets who cover up the truth about AIDS and CFS.

When Mahy was revealed to have lost \$4 million, *Science Magazine* suggested two possible explanations. First, they suggested, Mahy is a scientist and not an accountant. Maybe he had just got mixed up when he did his bookkeeping. Or, said *Science* perhaps Mahy, being a scientist, knew better where to spend the money from Congress than did the Congressmen who had voted it to him.

Science is, by and large, a magazine devoted to reporting news about science. However, at some level of its administration there is a knowledge and acceptance of certain subjects that must be kept from their readers. Such subjects include, and indeed especially include, any reference to the truth about AIDS and CFS. If time permitted we could provide careful analysis of articles and editorial comment by them that clearly demonstrates their complicity in covering up this crime beyond belief. That, however, must wait for our book to be published on May 19, 2005.

What Does Mahy Know, and When Did He Know It?

There are different places in the human body where organs or other sites function as defenders of that body. As we have noted in our chapter on Huebner (above) one of the first sites of defence are the adenoids and the tonsils. These clusters of lymphoid tissue sample air heading for the lungs and food heading for the stomach. If the adenoids pick up air-borne mycoplasmas they can react by degenerating spontaneously.

But, there is another important line of defence, and that

is to be found in each individual cell of the body: that is cell-mediated immunity. This line of defence in the human immune system looms awfully large when one reads certain literature such as the Progress Reports of the Special Virus [Leukemia/ Lymphoma] [Cancer] Programs. For example, in P.R. #9, on page 39, the researchers report that they had been busy studying ‘ host immunocompetence’, and how that competence might be compromised. When the cell loses its ability to intercept pathogens, a major part of the defence system is lost. If this happens, then retroviruses, which normally can not access a cell, are able to do so and once inside they are able to do their damage.

So, one must first destroy the cell’s defence if one is to get a retrovirus such as that of sheep visna, into the targeted-cell where the latter’s own DNA is taken over by the RNA of the invader. One must access the reticuloendothelial system comprising all the phagocytic cells and put them out of action. Phagocytic cells in turn are those cells, which sweep through the body consuming foreign and hence potentially hurtful invaders. If these cells are compromised, the cell’s defence is compromised.

Enter, stage right, Brian Mahy a way back in the early 1960’s where he is found to be studying an unusual virus called ‘lactic dehydrogenase elevating virus’ [LDEV] and its association with leukemia. Keep in mind that the whole focus at the start was the ‘leukemia/ lymphoma’ consequences of immune system compromise, as triggered by the mycoplasma. In 1954 D. G. Edward had built upon the work of Huebner with a study titled “The pleuro-pneumonia group of organisms: a review together with new observations.” The PPLO is the mycoplasma, and Mahy was attempting to understand the process by which cellular defence is destroyed by LDEV effects upon the reticuloendothelial system.



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Taken in isolation, such research could appear innocent enough. However, fitting in as it does with the related research going on at the time under the SVLP and with the related scientists such as Guy de The [Ultrastructure of the lactic dehydrogenase virus and cell-virus relationships] and J. B. Moloney [The rodent Leukemia's: Virus-induced murine Leukemia's] and considering the fact that Mahy was recruited into the CDC and rose to be a major officer therein, all hints of innocence evaporate. (Moloney, by the way, was a friend of Robert Gallo, [see Article Nine above] Of their relationship Gallo has this to say:

“Although my lab was then part of the Cancer Treatment Division of the National Cancer Institute, John Moloney, who was then running the Virus Cancer Program in the Division of Cancer Cause and Prevention, passed funds from his program to our laboratory, hoping our work might help his.”

In other words, Moloney and Gallo were conspiring to have money voted to one area, actually go to another area. This is called ‘conversion’, in the legal sense of unauthorized use of property belonging to another. It was only one part of the financial sleight of hand that was designed to make it difficult if not impossible to trace what was going on.

Another important part of this financial trickery lay in

the fact that President Nixon was to be the sole approving signatory for money handed out under SVCP, and it was to Nixon alone that Moloney was responsible.

The adage ‘follow the money’ was, therefore, very difficult to do in practice and it showed in the way Mahy handled the money entrusted to him.

Why would Mahy not use the money voted by Congress for the purpose of researching CFS for that purpose? The answer is clear: as a part of the vast conspiracy that brought the SVLP/ SVCP program into being with its twin pathogens as the product of millions of dollars expended, Mahy already knew what caused CFS and by extension, he knew full well where and how AIDS came to invade the human family.

There was a great danger for Mahy if he actually paid out this money to genuine and moral researchers. They might well discover and report the truth: AIDS and CFS were developed in United States Government and Government-controlled private laboratories and were deployed by the Centers for Disease Control.

And that is why Mahy still works for the CDC. He knows too much to be fired.

We are greatly indebted to author/ researcher, Robert E. Lee for the information on Brian Mahy’s early work.

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EXHIBIT ONE:

Henry Kissinger and Sir Frank Burnet

Nobel winner supported biological warfare as form of population control

Third World de-population has been U.S. strategic policy since '74

LifeSite News

Top-secret files recently declassified from the National Archives of Australia, despite government opposition, has revealed that one of the fathers of modern biotechnology and genetic engineering advocated using biological weapons against Indonesia and other "overpopulated" countries of South-East Asia. Australia's *The Age* reports that world-famous microbiologist Sir Macfarlane Burnet recommended in a secret report for the Australian Defence Department in 1947 that biological and chemical weapons should be developed to target food crops and spread infectious diseases.

Macfarlane, who won the Nobel Prize for medicine in 1960 and died in 1985, said, "Specifically to the Australian situation, the most effective counter-offensive to threatened invasion by overpopulated Asiatic countries would be directed towards the destruction by biological or chemical means of tropical food crops and the dissemination of infectious disease capable of spreading in tropical, but not under Australian, conditions."

Before a government committee in 1948, Macfarlane said, "In a country of low sanitation the introduction of an exotic intestinal pathogen, e.g. by water contamination, might initiate widespread

dissemination." He advised that, "Introduction of yellow fever into a country with appropriate mosquito vectors might build up into a disabling epidemic before control measures were established." The committee recommended that "the



Henry Kissinger, secretary of state of the United States from 1973 to 1977, won the Nobel Peace Prize in 1973.

possibilities of an attack on the food supplies of S-E Asia and Indonesia using biowarfare agents should be considered by a small study group".

Outlining the benefits of the population elimination program, Macfarlane said, "Its use has the tremendous advantage of not destroying the enemy's industrial potential, which can then be taken over intact." While the idea of depopulation by chemical means for strategic purposes may seem outrageous, other strategic de-population poli-

cies are currently being practised throughout the world under the cover of population control.

The official policy of the U.S. regarding population control in foreign policy is spelled out in U.S. *National Security Study Memorandum 200 (NSSM 200)*, written by Henry Kissinger. *NSSM 200*, subtitled "Implications of Worldwide Population Growth for U.S. Security and Overseas Interests," warned that increasing populations in developing countries threatened U.S. strategic, economic, and military interests. It suggested that

competition from new world powers would rise when developing nations had sufficient populations to utilize their national resources to their full potential.

Thus in order to ensure U.S. strategic, economic, and military interest, at the expense of developing countries, it proposed population control to address potential population growth and specifically targeted 13 countries whose growing populations suggested coming power. The report spelled out a plan to

bring about "a two-child family on the average" throughout the world "by about the year 2000." Interestingly, *NSSM 200* went into detail about avoiding U.S. responsibility for population-control programs by ensuring that the UN and international financial institutions such as the IMF and World Bank adopt population-control policies as prerequisites to their giving of aid. The report suggested furthering the camouflage by mandating that countries accepting aid from the UN or the banks form their own population-control ministries.

NSSM 200 also noted that the U.S. government played "an important role in establishing the United Nations Fund for Population Activities to spearhead a multilateral effort in population as a complement to the bilateral actions of AID and other donor countries." It added that "with a greater commitment of bank resources and improved consultation with AID and UNFPA, a much greater dent could be made on the overall problem." Moreover, the report asserts that "mandatory programs may be needed and that we should be considering these possibilities now."

It remains to be seen whether the Bush administration will be the first since 1974 to officially repudiate the official U.S. government policy to reduce Third World population.

EXHIBIT TWO: Shyh-Ching Lo's Patent of the Pathogenic Mycoplasma

(2)

United States Patent [19]

Lo

[54] **PATHOGENIC MYCOPLASMA**

[75] Inventor: Shyh-Ching Lo, Potomac, Md.

[73] Assignee: American Registry of Pathology, Washington, D.C.

[21] Appl. No.: 710,361

[22] Filed: Jun. 6, 1991

Related U.S. Application Data

[63] Continuation-in-part of Ser. No. 265,920, Nov. 2, 1988, abandoned, which is a continuation-in-part of Ser. No. 875,535, Jun. 18, 1986, abandoned.

[51] Int. Cl.⁵ C12N 5/00; C12N 5/02; C12N 1/00; C12Q 1/70

[52] U.S. Cl. 435/240.2; 435/5; 435/872

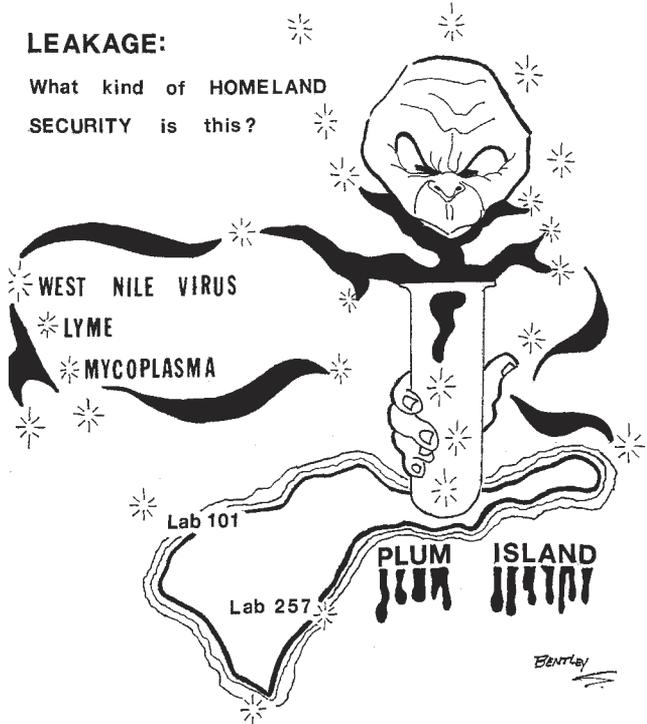
[58] Field of Search 435/870, 5, 872, 240.2

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Lo et al (1989) Identification of *M. Incognitus* ... Am. J. Trop-Med. Hyg 41(5):601-616.
Lo et al (1989) Association of the Virus-like Agent ...

LEAKAGE:

What kind of HOMELAND SECURITY is this?



[57] **ABSTRACT**

The invention relates to a novel pathogenic mycoplasma isolated from patients with Acquired Immune Deficiency Syndrome (AIDS) and its use in detecting antibodies in sera of AIDS patients, patients with AIDS-related complex (ARC) or patients dying of diseases and symptoms resembling AIDS diseases. The invention further relates to specific DNA sequences, antibodies against the pathogenic mycoplasma, and their use in detecting DNA or antigens of the pathogenic mycoplasma or other genetically and serologically closely related mycoplasmas in infected tissue of patients with AIDS or ARC or patients dying of symptoms resembling AIDS diseases. The invention still further relates to a variety of different forms of vaccine against mycoplasma infection in humans and/or animals.

2 Claims, 39 Drawing Sheets

Similar diseases are transmitted from animal to animal 25 by injecting filtrated lysates of spleen, lymph nodes or whole blood from the diseased animals. *M. fermentans incognitus* is also identified in the cytoplasm of the cytopathic cells. Some of the infected mice were found to produce prominent antibody against *M. fermentans incognitus*. 30

When silver leaf monkeys are inoculated with *M. fermentans incognitus*, the monkeys show wasting syndromes and die within seven to nine months after inoculation. At necropsy, the monkeys do not show evidence 35 of opportunistic infections, acute inflammatory lesions or malignancy. *M. fermentans incognitus*-specific DNA can be directly detected in necropsy tissues of the monkeys, by use of polymerase chain reaction method. *M. fermentans incognitus* infection can be identified in 40 spleen tissue, liver tissue, kidney tissue and brain tissue

CLAIMS

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L. Detection of *M. fermentans incognitus* Antigens

45 The *M. fermentans incognitus* pathogen is useful for the detection of antibodies in the sera of patients or animals infected with *M. fermentans incognitus*. Some of these patients who are infected with *M. fermentans incognitus* will be patients who have been diagnosed as having AIDS or ARC, Chronic Fatigue Syndrome, Wegener's Disease, Sarcoidosis, respiratory distress syndrome, Kibuchi's disease, autoimmune diseases such as Collagen Vascular Disease and Lupus and chronic 55 debilitating diseases such as Alzheimer's Disease. In one procedure, persistently *M. fermentans incognitus* infected cells are grown in low cell density on sterile glass slides. Sera from suspected patients, and normal subjects are examined in an immunoperoxidase staining procedure such as that described by Hsu, S-M., et al., 60 Am. J. Clin. Path. 80, 21 (1983). Using this assay, 23 of 24 sera from AIDS patients showed strong positivity. Serum from the other AIDS patient showed weak posi-

New Myths for Old

In the course of this precis of our work in progress [*The Crime Beyond Belief*] we have referred on several occasions to the green monkey bites Black lady myth about the origin of AIDS.

We now make a formal request that this terrible and silly myth be abandoned and that in its place we ask that you commit to memory the new and more accurate myth we present below. If we had our way, we would suggest that all myths are done away with and that reality with all its warts be placed before all thinking adults. However, we are realists and we know how psychologically necessary it seems to be for humans to present essential truth in the masked and easy form of myths. So, here is a new myth for you to hold and tell your children when they ask about AIDS and how it came to be.

Knowing the Rocks of Reality

Once upon a time the Reverend Billy Graham realized a life-long dream. He was able to leave off his mission of taking religion to the people of America in ballparks and skating rinks, and to travel to a small but modern hotel on the shores of the Sea of Galilee in Palestine. He had decided that he would sojourn in that holy place until he was finally called to his heavenly reward.

On his first evening in the lobby of the hotel he met two people: Edward Hooper and Hillary Johnson, the authors, respectively, of *The River*, a history of AIDS, and *Osler's Web*, a history of CFS.

"How long have you folks been here on the shores of the Sea of Galilee where our Lord Jesus walked upon the water, Matthew 14, verse 25?" asked Billy.

"I've been here since 1981," answered Ed. "Ever since I began to wonder where AIDS came from."

"And I've been here the same time," said Hillary. "Ever since I began to wonder where chronic fatigue syndrome came from."

"And how do you pass your time in such a remote place?" asked the Rev. Graham. "There's no ball park for a revival meeting and no place to pitch a circus tent."

"Well", said Ed, "Hillary and I have devoted all of our time since we arrived, studying the reality of the Sea of Galilee, and fishing for facts. And tomorrow morning as usual we will go out onto the Sea in our boat and we'll continue our search for reality and we'll continue to fish."

"That sounds just marvelous," said Billy, "Would you mind awfully if I came along with you all tomorrow?"

Of course Ed and Hillary didn't mind, and the next morning all three went down to the shores of the Sea of Galilee where Jesus had walked upon the water and they got into a boat and rowed out a distance, where they put lines into the water and began to fish. Then, as it was nearing the noon hour, Ed suddenly said, "Oh, I forgot to bring our lunch. I'll walk back to the hotel to pick it up."

So Ed Hooper stepped over the side of the boat and while the Rev. Billy Graham looked on incredulously, Ed walked

across the water and disappeared along the path behind the dunes. Soon he re-appeared, carrying a large lunch basket and he walked back across the water to the boat.

Then Hillary said, "Oh, I should have thought about it when you went for the lunch. I forgot our thermos of tea. I'll walk back to the hotel to get it."

And while the Reverend looked on even more incredulously, Hillary stood up, stepped over the gunwale of the boat and walked ashore. Soon she returned, carrying a large thermos of tea.

Then, just as she sat down she said "Oh my goodness, I should have brought our bag of cakes while I was there. I'll walk back to the hotel and get them."

"Oh no," said the Rev. Billy Graham, "you folks are doing all the walking. I must do my part. I will walk back across the water to the hotel and get the cakes." With that he stood up in the boat and stepped out... and promptly disappeared below the surface of the Sea. Then, as he bobbed back up, waving his arms and reaching for the boat, Ed said to Hillary while pulling Billy back aboard, "I guess we should have told him where the rocks are."

And that, boys and girls, is how Billy Graham came to know that beneath the apparently tranquil waters of the Sea of Galilee, just below the surface, are the rocks of reality about AIDS and CFS, many of which Ed Hooper and Hillary Johnson have, by honest, persistent, and most marvelous diligence, located and reported to the world. They haven't located all of the rocks below the surface, but they know which ones will get them back to the hotel.

CAUTION:

Some readers may encounter people who say that the rocks that we have identified below the surface of the modern media are not really there. Before you engage in a discussion with them, ask them: "Have you read Ed Hooper's *The River*? Have you read Hillary Johnson's *Osler's Web*? Have you read Leonard Horowitz' *Emerging Viruses*? Have you read the *Journal of Degenerative Diseases*, Volume 5, Number 3? If they answer 'no' to any one of these sources, ask them to go and read them, then come back and continue the discussion.

Donald W. Scott and William L.C. Scott

The present writers acknowledge their great debt to Ed Hooper and Hillary Johnson. Their books, *The River* and *Osler's Web* told us where the rocks are, and we've been able to walk across the Sea to the dunes beyond, and there, in the shadows of the bushes we have found Frank Burnet, Ishii Shiro, Carleton Gajdusek, The Rockefellers, Edwin Lennette, Hilary Koprowski, Robert Huebner, Bjorn Sigurdsson, the Henle's, Ghislain Courtois, Fritz Deinhardt, Brian Mahy, Thomas Merigan, Steven Straus and Robert Gallo and all of the others who co-operated at some point in the criminal effort to introduce two terrible diseases into the human family: AIDS and CFS. One to kill... mainly for the people of colour, especially in Africa, and one to disable for Whites...mainly women.

Today, the consequences of this evil enterprise are taking the lives of 8000 daily while more thousands are disabled and their lives reduced or destroyed. And many more are struck down by the ancillary diseases which present when the co-factor mycoplasmal species access susceptible cells and do their damage: Alzheimer's; Amyotrophic Lateral Sclerosis; Bi-Polar Disease; fibromyalgia; Parkinson's Disease; Huntington's Disease; multiple sclerosis and more.

As we stated at the outset, we wanted to present this precis of our major study immediately so that at least the main reality factors would be upon the written record; and, those factors include:

Acquired Immune Deficiency Syndrome presents when the immune system is depressed and certain otherwise innocuous diseases can do severe damage to the victim. The main immune system depressant is a particle of bacterial DNA, probably the *Mycoplasma fermentans* derived from the bacterium *Brucella abortus*. The retroviral co-factor is probably derived from the Visna virus of sheep.

On October 30, 2004, we expect to publish our book *From Plants to Animals to Us* to present our findings about the scientific reality of disease and the nature of the degenerative qualities which present. We begin with the four critical atoms of life: carbon, hydrogen, nitrogen and oxygen... CHNO. We present the four main nucleic acids derived from the varying combinations of CHNO as adenine [C5, H5, N5], cytosine [C9, H5, N3, O], guanine [C5, H5, N5, O], and thiamin [C5, H5, N2, O2], the basic code elements of deoxyribonucleic acid [DNA] and, substituting uracil [C4, H4, N2, O2] for thiamin, the elements of ribonucleic acid [RNA]. We trace these five combinations from the soil to plants, which can be infected by mycoplasmas, to the animals which ingest such plants and finally to humans who once had relative freedom from certain disease consequences but whose immune system has been by-passed by the work of the eugenics-driven scientists.

And on May 19, 2005, we expect to publish *The Crime Beyond Belief*, the story of AIDS and CFS utilizing much of the record that has become available to us in the Progress Reports of the Special Virus Programs... both leukemia/lymphoma and cancer, and other documents not readily available to the researcher.

Besides our heavy debt to Ed Hooper and Hillary Johnson, we owe a great deal to Shirley Bentley, Joe Foran and Harold Clark. Thank you!

Again: **AIDS and CFS were engineered in United States laboratories to reduce the rate of world population growth.**

*DWS and WLCS
May 19, 2004*

continued from page 3

Finally, we ask our readers to think of this issue as a tapestry, not a road map. A tapestry can depict a multitude of persons and places, colorful and interesting in themselves, but presenting an overall reality that is more than the sum of its parts. A road map is a more precise and logical presentation of the relationship in space of places. One can depict the space between Miami and Seattle, but overall convey nothing about the space as a totality. Furthermore, a tapestry can have threads, which appear briefly in one place, only to pop up later in another and unexpected place. So it is with this issue. For example, the name 'Robert Manaker' may turn up

on a page of a 1971 document and then disappear, only to re-appear in another 1971 document in a totally unexpected way. The tapestry that tells the story of AIDS has a dramatic totality, but scattered through the whole are the single threads that are easily overlooked, but are vital to the final work.

Acquired Immune Deficiency Syndrome. Made in America

*Donald W. Scott, Editor-in-Chief and William L.C. Scott,
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WHEREAS : The health care community, including government and private agencies at all levels, has not responded to this increased incidence with sufficient vigour, research resources, statistical monitoring and reporting, or public education activities, and

WHEREAS : Medical and scientific efforts are predominantly directed to the provision of ameliorative treatment for victims rather than to the search for the fundamental causative factors of these illnesses, and

WHEREAS : The families of victims are largely left to finance such research as is done, and provide such services as are provided to both victims and families through their various societies, associations, and self-help networks from their own often limited resources, and

WHEREAS : Government and governmental agencies have engaged in research and other activities which are not reported to the public and which have had a deleterious effect on an untold number of individuals and families,

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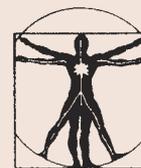
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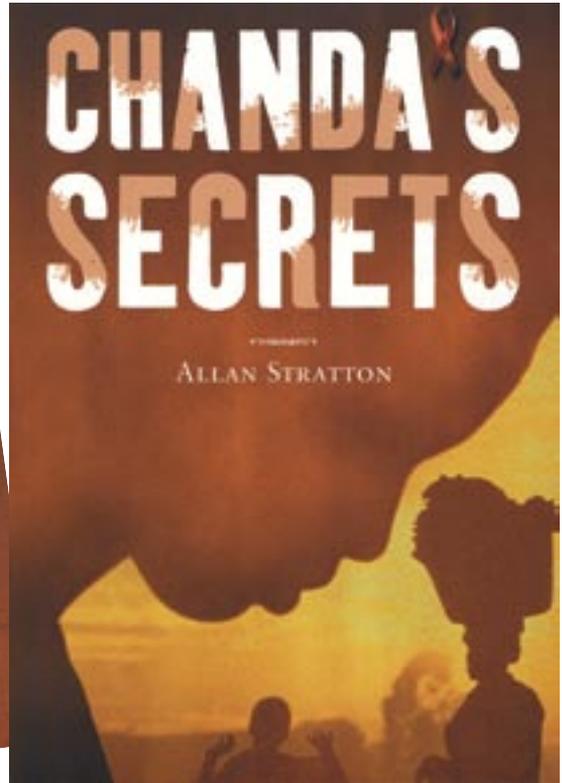
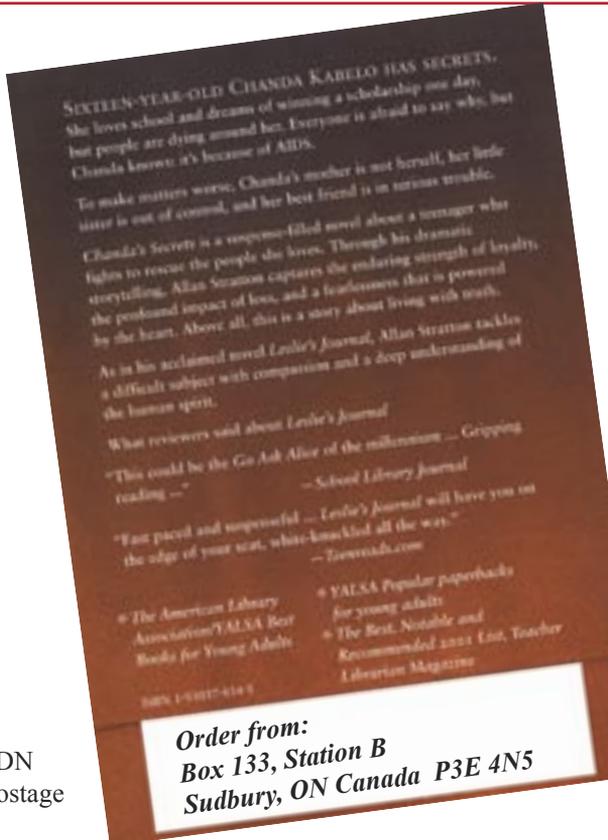


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. . . . **WHO** are the satanic cultists that run the Bush gov't? Why is President Bush refusing to release the Congressional report on the investigation of the 9-11 attacks? What is it that makes Fidel Castro untouchable - - when we are willing to go to war against countries halfway around the world who are no threat to us whatsoever? Is Cuba being held in reserve by the cabal that runs the U.S. government? If so, for what purpose? Why does the entire world face a deflationary crisis while one country - - Red China - - is still growing at 8% to 10% this year??

. . . . Why are Social Security recipients not aware that they are being cheated - - by 28% of every check they receive?? Why are the Red Chinese about to get the right to open up **gold-denominated bank accounts** while Americans and Canadians don't have that right? Why do major pharmaceutical companies, such as Eli Lilly, lace their vaccines with mercury poison? And why do parents inoculate their children, leading to incurable autism?? Why have the last five spring seasons all brought devastating tornadoes to the Middle West and Brazilian rainfalls in the Middle West and East while the Western states continue to suffer drought - - year after year? Why does the public not understand that weather modification technology has now achieved a high degree of practicality for the satanic cults that run the government?

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