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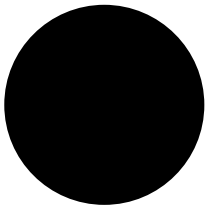

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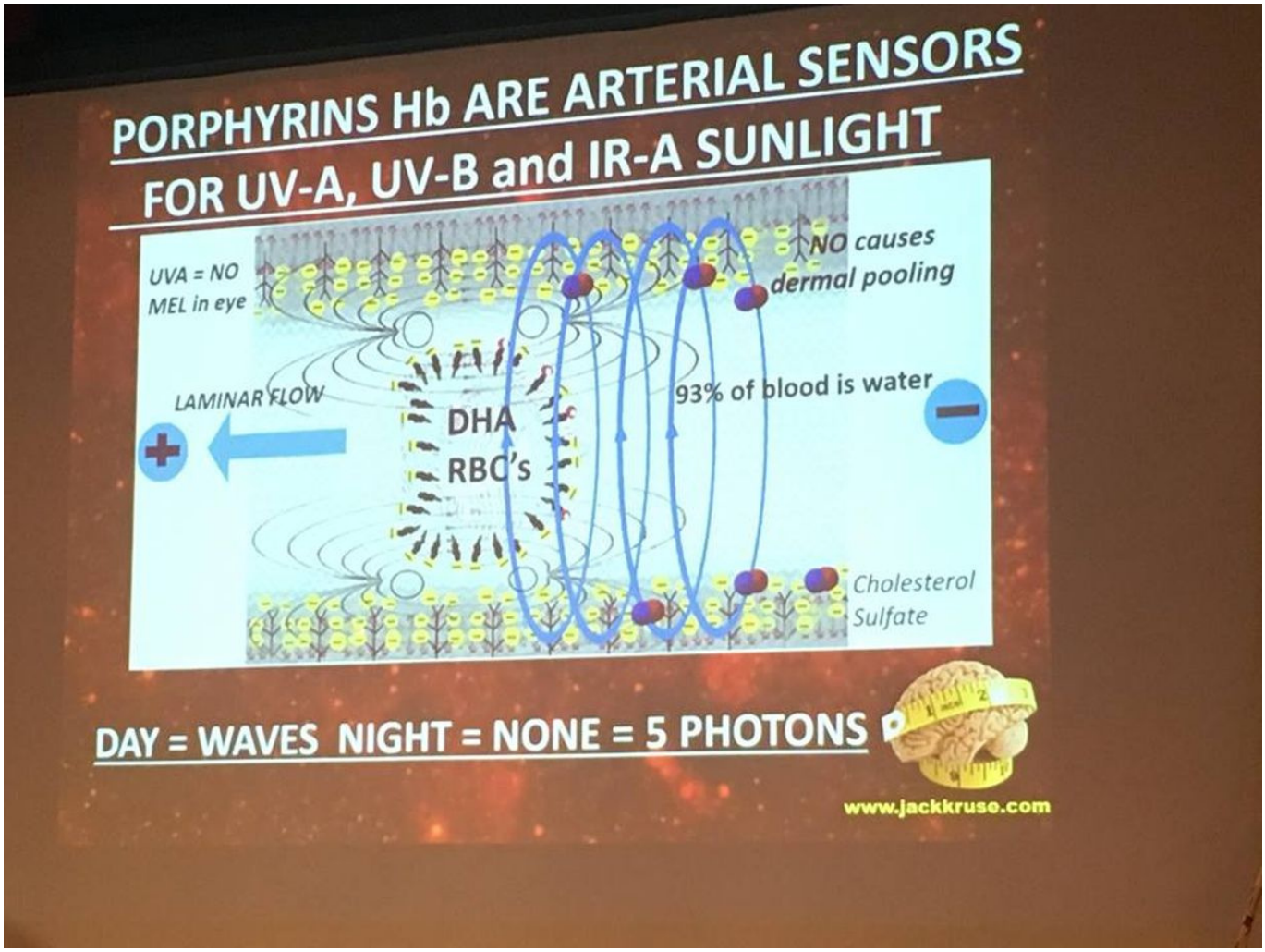
To understand many of the details in this blog you will need to see the April 2018 webinar.

IN A 5G WORLD COULD TAKING VITAMIN D3 ORALLY BE DANGEROUS?

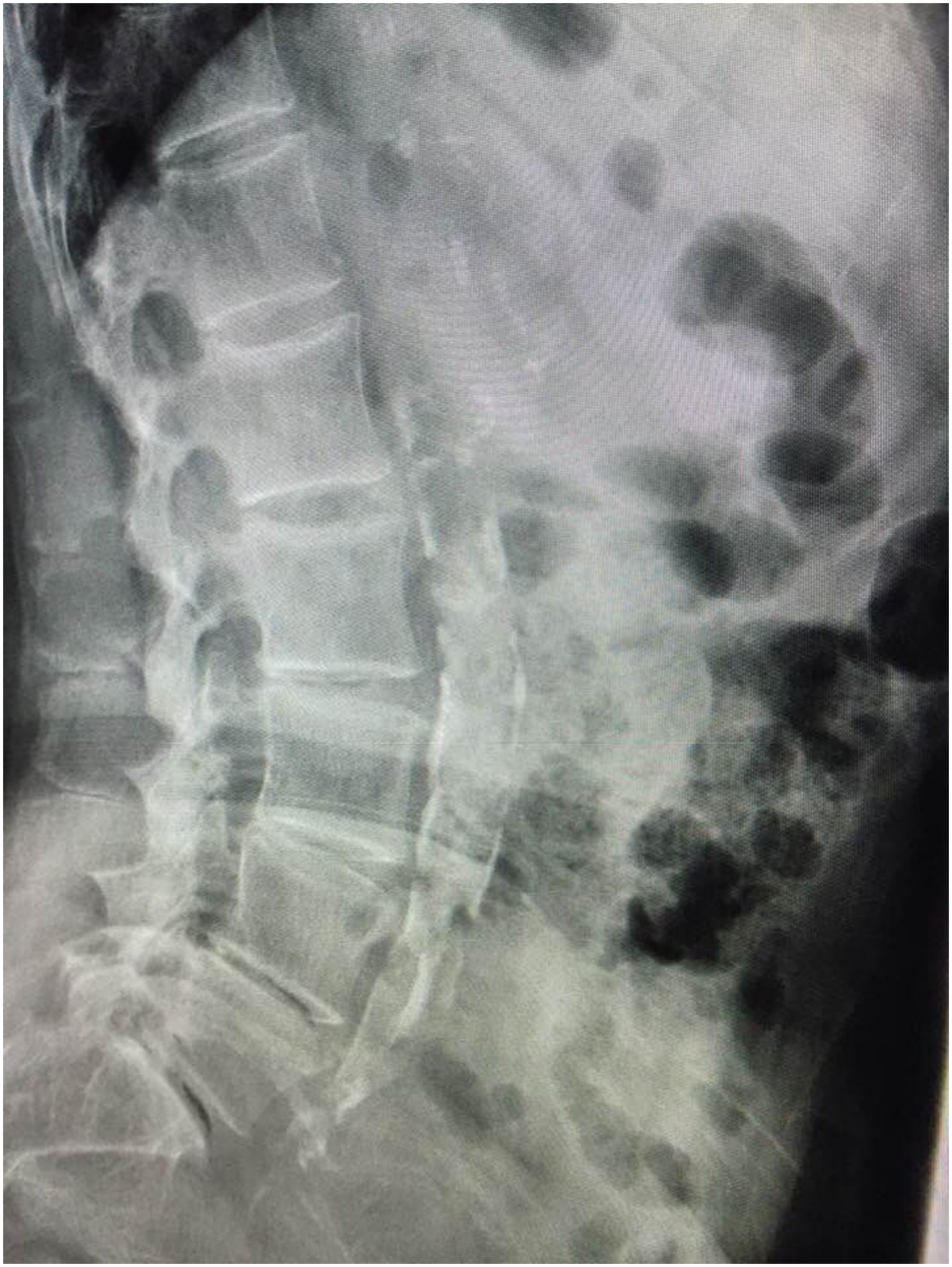
Why shouldn’t you take oral Vitamin D3 to replace the sunlight you are not getting? Here is the black swan mitochondriac postion because of the information quanta: Cholesterol sulfate

is also synthesized in the skin by UV light exposure of the skin…….so if you do not get the UVA and UVB light frequencies in diurnal fashion, you get lack of sulfation in the skin and blood. This affects all things in the skin and blood. The picture below shows the effect.



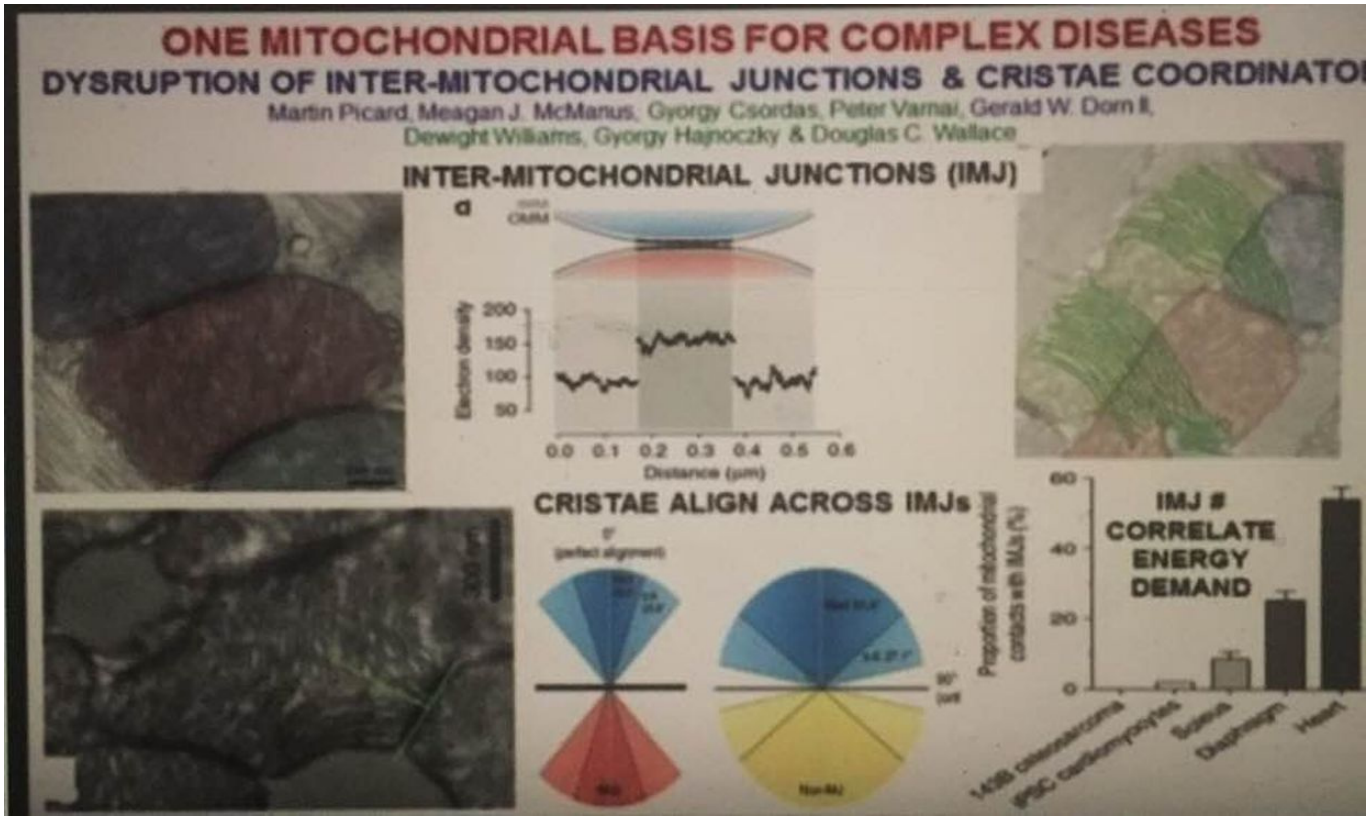
Our power grid in the USA oscillates at 60 Hz and the EU works at 50Hz. Our inner mitochondrial membrane oscillates at 100Hz when cells are using the TCA cycle. The power grid is a modulated frequency. This means that the power grid can create an interference

pattern in our skin and vessels. 5G has the unique ability to jump conduct to other conductors. Your blood plasma is a magnetohydrodynamic fluid conductor. This means that atherosclerosis in young people who use technology should be expected. (below)



HOW DOES THIS HAPPEN?

When the oscillation pattern is lost deuterium enters the matrix and cytosol and this is not where it should be to an excess. The normal ratio for beta-oxidation function is 6600 H+ for every one deuterium isoform. When too much deuterium enters the matrix you get energy loss as the picture on the bottom right of slide shows from Wallace. The cristae no longer align properly when deuterium bonds to the anions of the TCA cycle. This destroys energy flux.

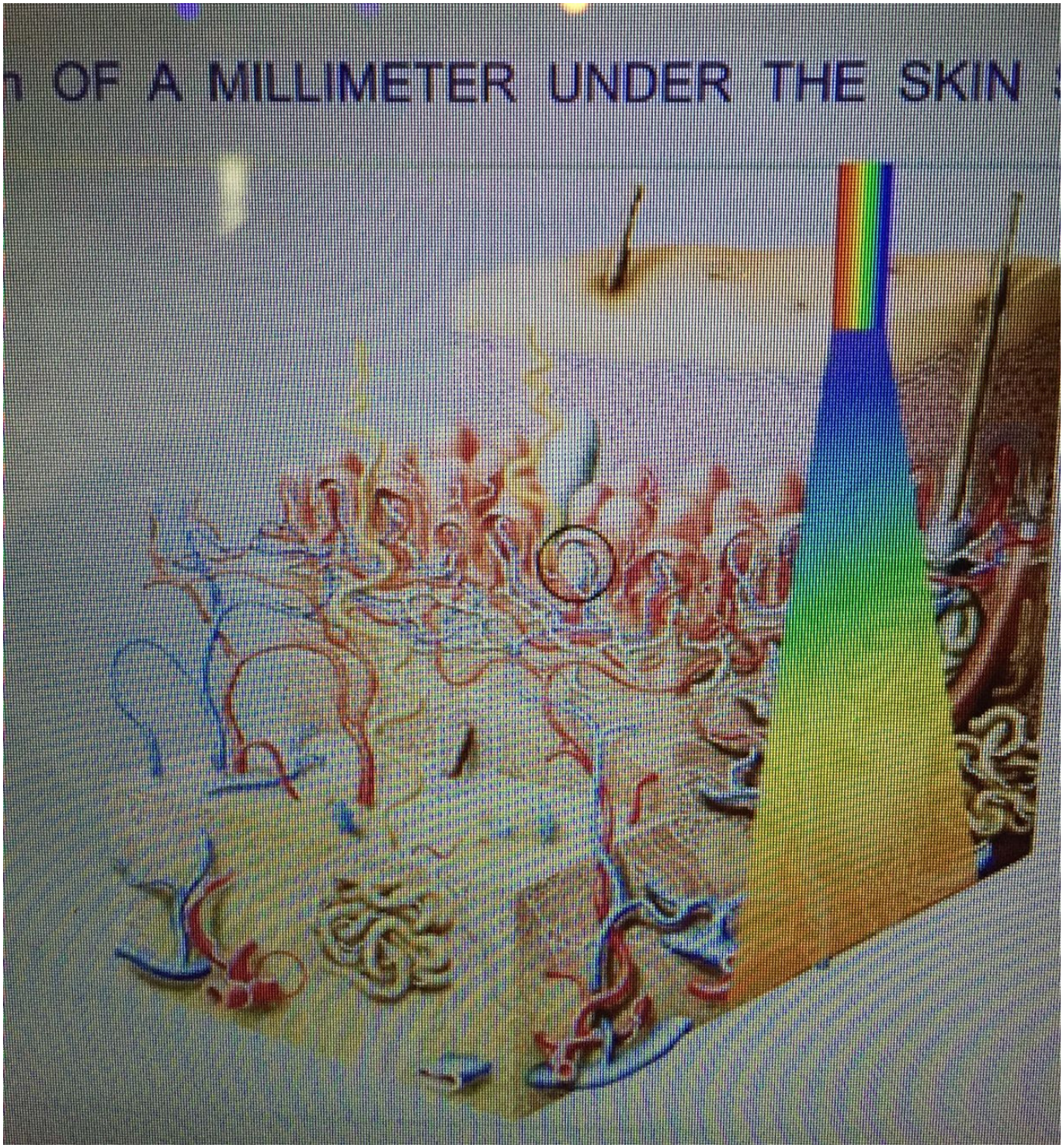


Energy demand shows up in the fractal organization of mitochondria. Information quanta from sunlight to H+ ions are what allows it to occur = April 2018 webinar. *What are the*

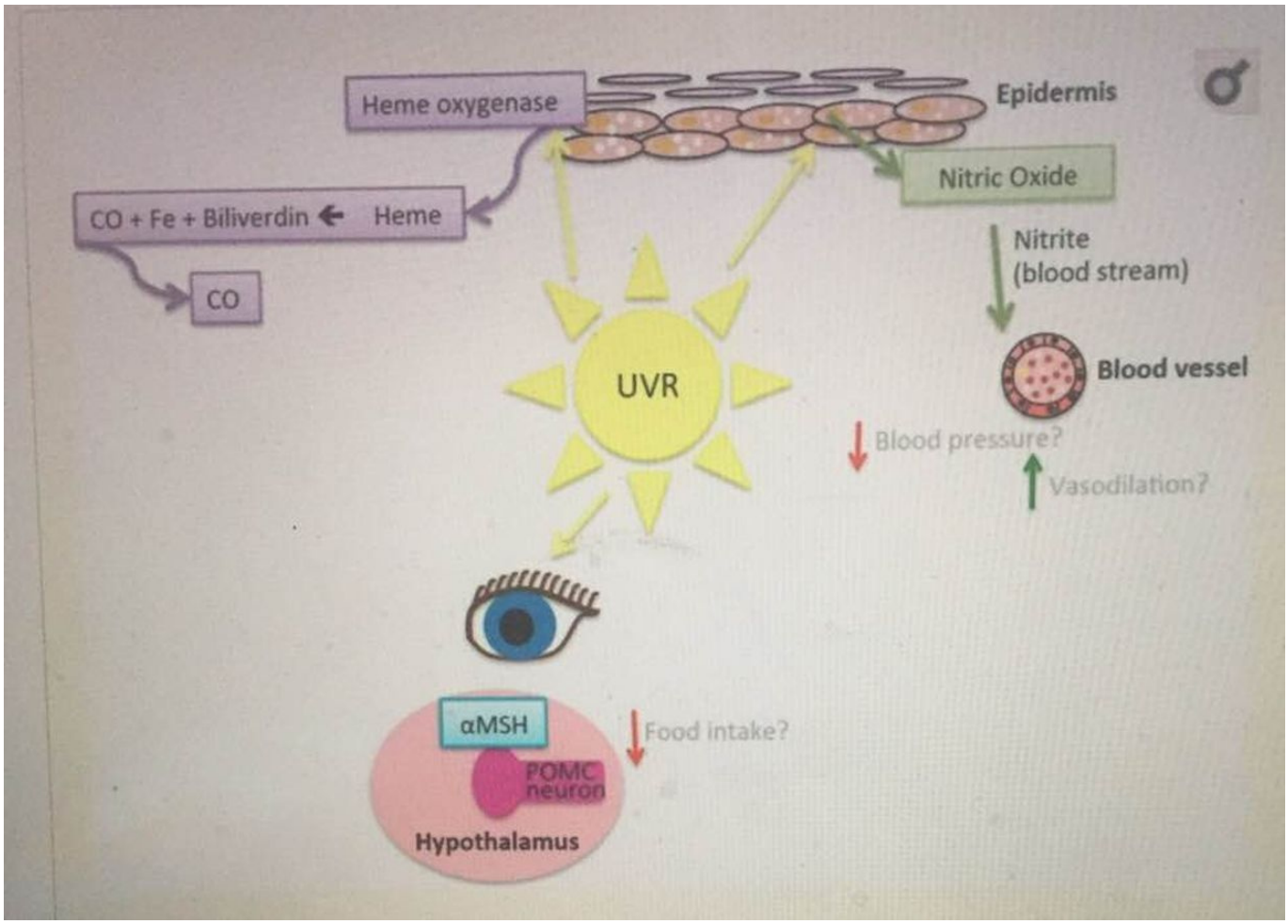
details of this process?

Cholesterol sulfate (CS) plays an important role in protection from athersoclerosis, asthma, and arthritis because at the same time sunlight makes CS and Vitamin D3 it makes profilaggrin. This last biomolecule is a prohormone protects us from asthma and arthritis. So in a 5G world we will see massive amounts of asthma and arthritis of all forms. UVA light also makes nitric oxide from the vessel (NO) walls and it makes carbon monooxide (CO) too from the action of heme oxygenase in the UV portion of the day. Heme oxygenase is an enzyme that catalyzes the degradation of heme. Notably, because of their shared reactivity for metal centers, •NO and CO share many parallel adaptive biophysical signaling roles, including stimulation of vasodilation, inhibition of mitochondrial respiration, and inhibition of apoptosis (Dulak *et al*., 2008). Remember, that all cancer lines need to have apoptosis inhibited to become a cancer. This is another reason why sunlight exposure is nature's vaccine for cancer.

Heme itself is derived from hemoglobin, myoglobin, cytochrome proteins as well as a spectrum of other proteins ubiquitous in cells. In the skin this is a big deal because the Auger effect is used to protect us from sunburns. This denatures DNA as skin cells die as they come to the surface. DNA in kerotinocytes acts to absorb excessive UV light to provide a natural sunscreen in the surface skin layers. As this happens the mitochondria of these skin cells has heme present in the cytochrome proteins, catalase, and lipid peroxides as the mitochondria parts are recycled as the skin cell die. Heme oxygenase (HO) has been shown to be important for attenuating the overall production of ROS and decrease ELF-UV light release.

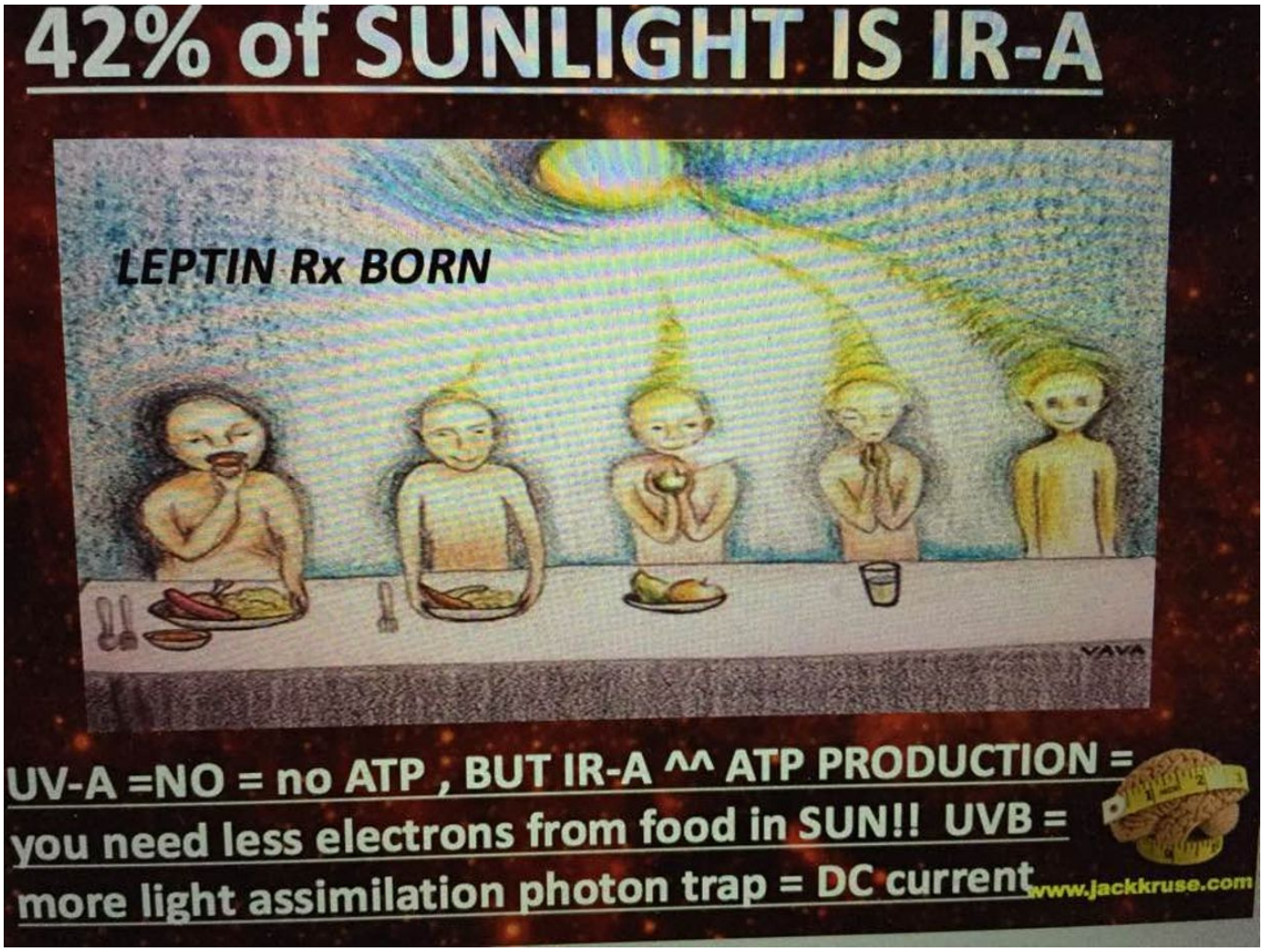


Sunlight seems to be a stimulus that helps the turnover of older RBC's that cannot hold a photo charge as well when the arterioles come closer to the skin surface. This produces biliverdin, ferrous iron, and carbon monoxide. CO aso slows electron change transport in many tissues. We normally associate this with pathology but here you see this is normal physiology in the skin under the power of sunlight.

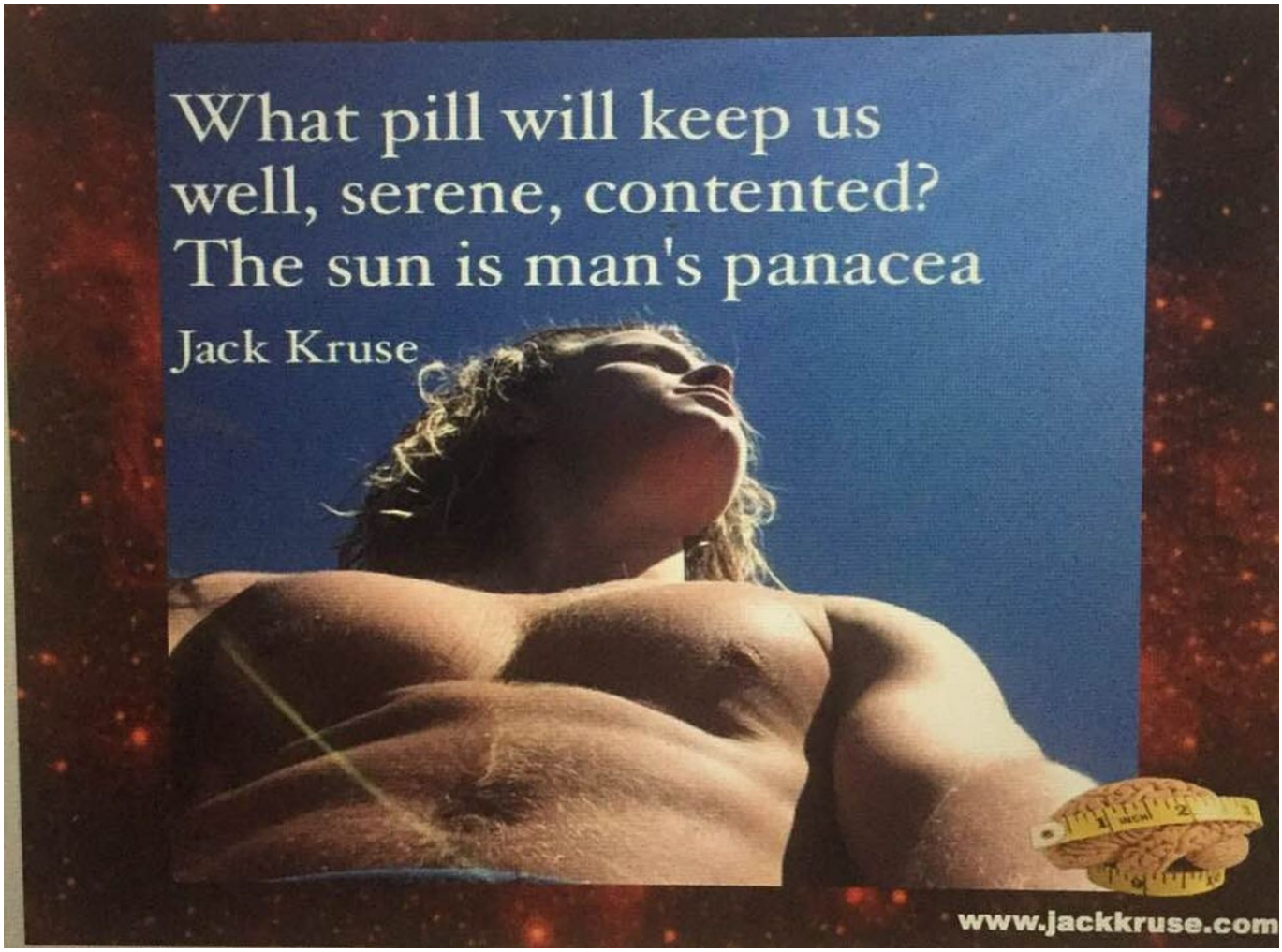


Local NO release lowers blood pressure and this NO can slow ECT to lower apoptosis risk to

cause tissue atrophy. This protects our stem cell supply but slowing the electron flow means we do not need as much food substrate for electrons. This is why solar exposure lowers our weight. It fully explains why obesity and low Vitamin D3 levels are linked. When UVA and IR-A light are present together ECT flow slows and the ATPase spin rate can continue because cytochrome 4 has 4 red chromophores that allow the ATPase to spin with a lack of electrons. This happens because IR-A light spins the ATPase Fo head by itself to make ATP without any help from the cytochromes. In fact, IR-A light makes the ATPase a 100% nano-quantum torque engine to move protons. Red light always moves things with mass.

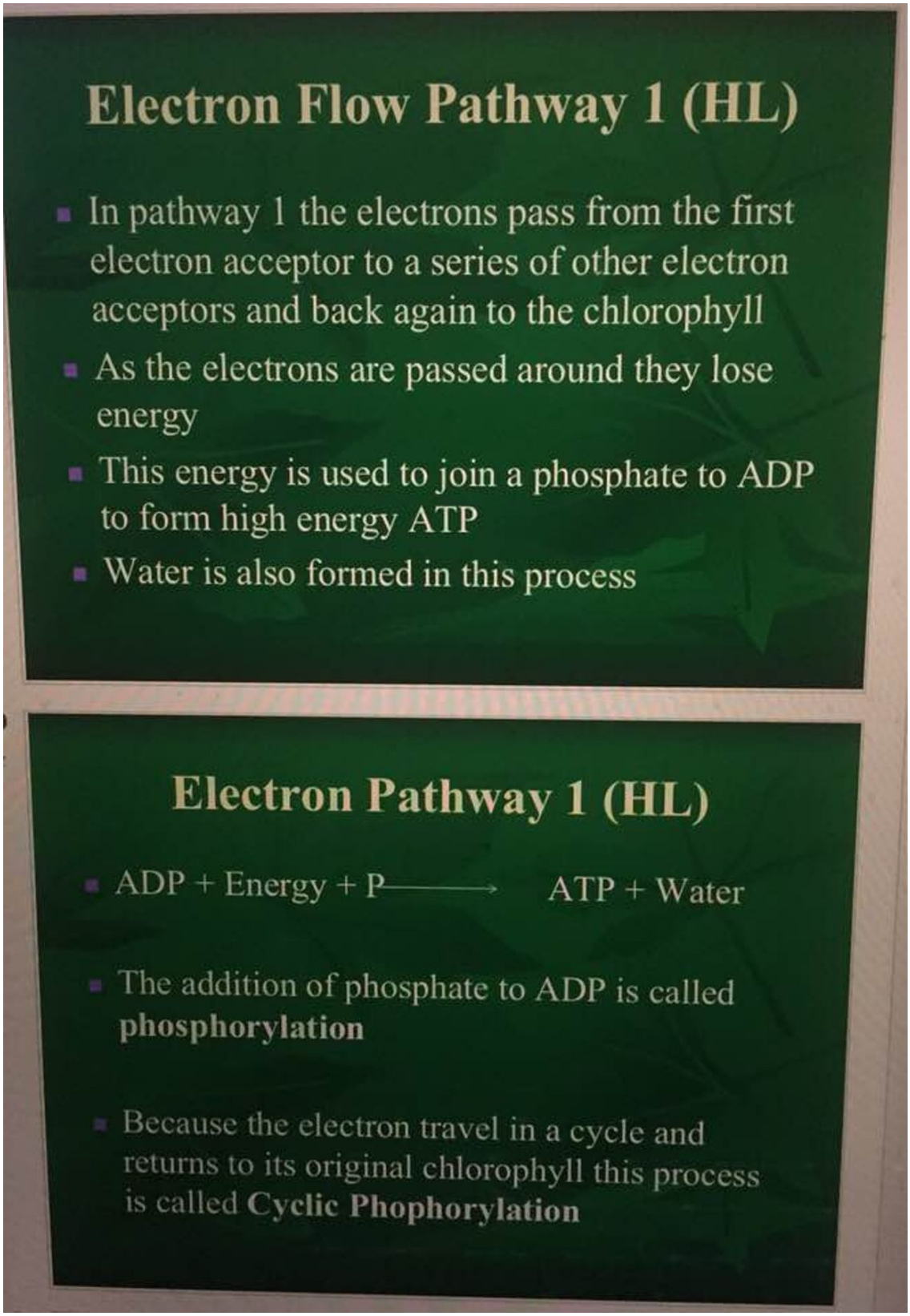


This explains why sulfur is a healing agent in many studies, but it is also why no one realizes we need sunlight to get it to work with all these skin pathways. Taking the supplement D3 pills don’t work, and may cause serious collateral issues. What does this mean? Like vitamin D3 sulfate, cholesterol sulfate is also water-soluble, unlike cholesterol which is not water soluble. Cholesterol sulfate does not have to be packaged up inside LDL for delivery to the tissues. Unsulfated cholesterol does. This is huge physiologic burden for liver function and why arterial disease is high in a nnEMF world.

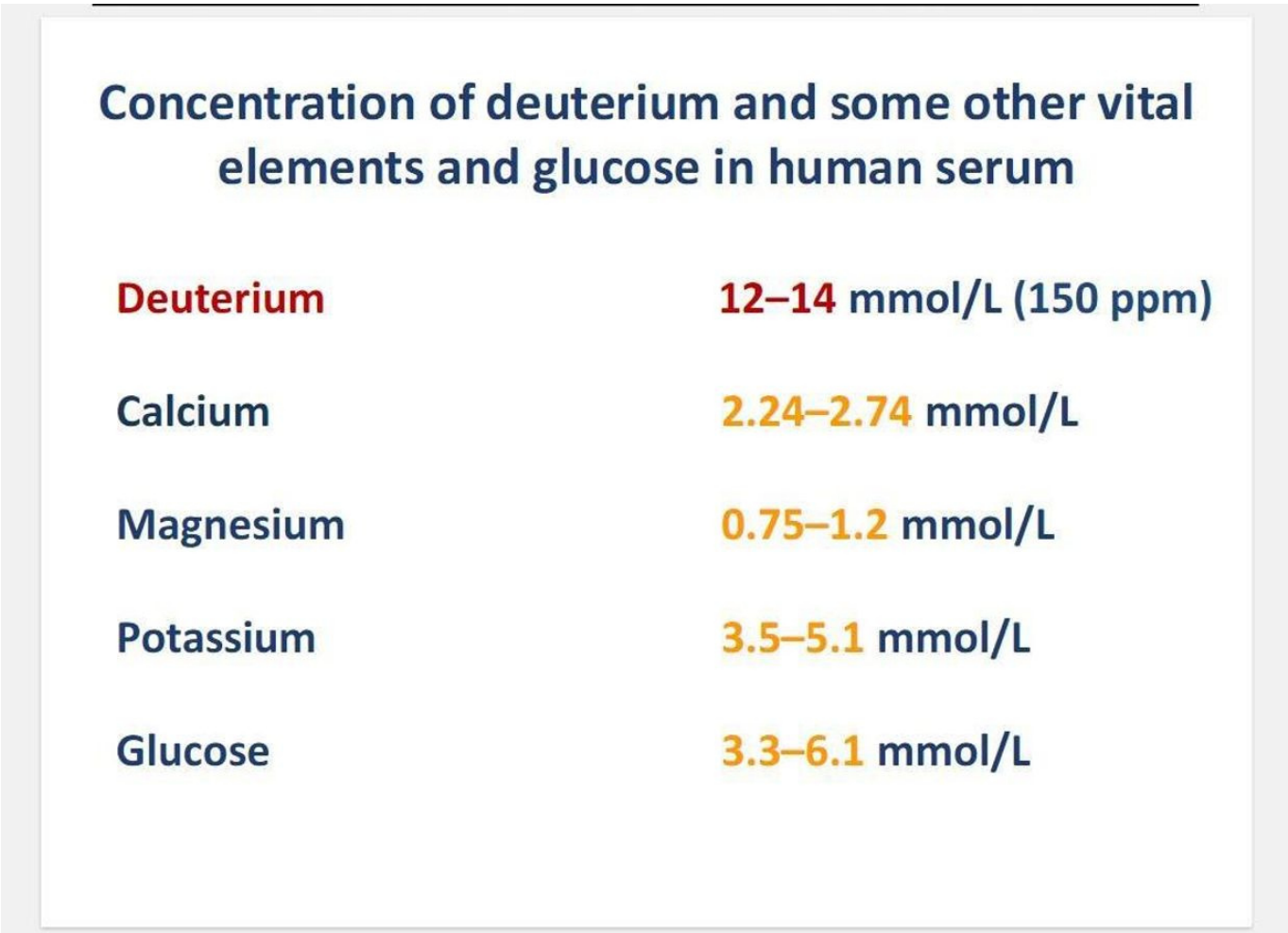


Remember, vitamin D3 is synthesized through a couple of simple steps from cholesterol, and its chemical structure is, as a consequence, nearly identical to that of cholesterol. If cholesterol is not sulfated by sunlight than neither will Vitamin D3. I believe these sulfated things (platletss/RBC's/heparin etc) are the key anions needed to help transfer information quanta via a subatomic proton pathway to in the blood plasma. I believe sulfation is critical to augment a version of animal photosynthesis (PS) in our blood.

The phosphorus ion is critical in this process as a 'qubit' with sunlight in information transfer. In plant PS it is well-known that there is a one electron redox reaction where free electrons join ADP and Pi to make ATP. No metabolic pathway is needed in this light reaction in plants. In humans we know the coherent domains in the exclusion of water create 1 million free electrons. These electrons can make ATP in the circulatory system in similar fashion.



I think sulfated D3 is what keeps inorganic Phosphorus in the blood long enough to allow the reaction to occur especially in RBC's which have no mitochondria to make a ton of ATP via glycolysis. People forget this pathway does not make a lot of ATP but what it does make, it makes very rapidly. They rely on carbon dioxide to react with carbonic anhydrase (bicarb) via glycolysis. This is why RBC's live as obligate glycolytic cells (Warburg like) by design to keep deuterium in the blood plasma at high levels (150ppm). This keeps the deuterium away from the mitochondrial matrix and cytosol where it wrecks havoc because of its kinetic isotope effect.



Phosphate is also a key to making hydrogen (H+) by reacting to sunlight. Hydrogen fuel cells use this mechanism of phosphorus photosynthesis and it is well known in many industries.

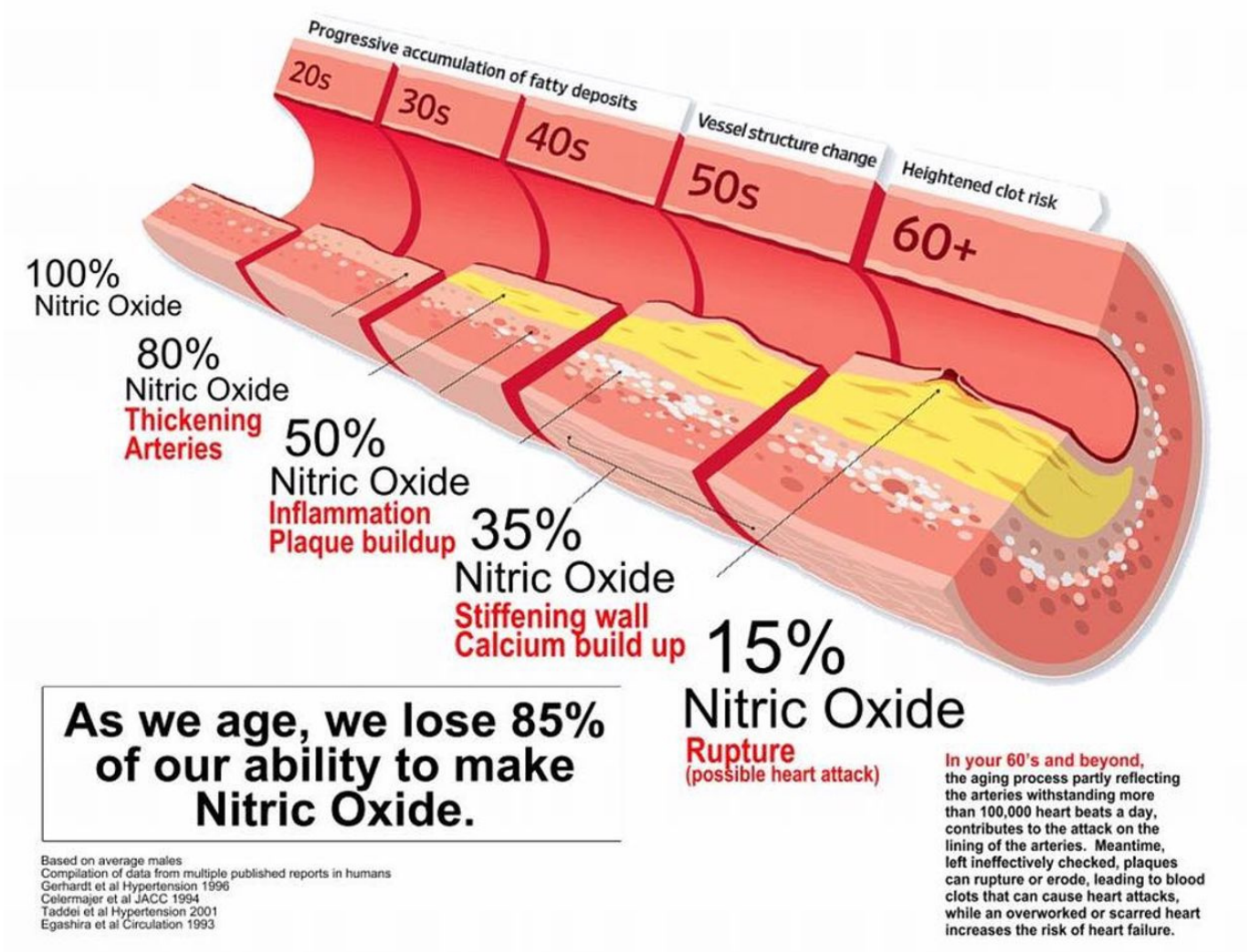
What is the evidence for it?

In Japan researchers found out the phosphorus and sulfur in the proteins of chicken eggs were found to be useful in making hydrogen. It appears animals use this as well as plants.

Here is another interesting point about sunlight that is absent with D3 pills in humans: it has

been determined that the sulfated form of vitamin D3 from solar exposure is strikingly ineffective for calcium transport in humans but very critical in resorbing phosphorus at the kidney to keep inorganic phosphorus in the blood plasma. This phosphorus than joins with the ADP of RBC's and makes ATP in the blood when the blood is brought to the surface to be irradiated by sunlight. What causes the arterioles to rise to the surface? UV-A light does this with NO release.

This is why I wrote the Time 11 blog (below) about the wisdom of not taking D3 when you are deficient in D3 by blood testing. If you do take it you are going to put a ton of calcium into your coronary arteries and your arteries all over your body over time. (Pic below) As NO declines with age this implies one needs more sunlight not less sunlight to avoid arterial disease and blood pressure issues.



Waveform interference from 5G and the waves made in the artery by sunlight become interfered with. This leads to the picture below due to an alteration of charge of cholesterol sulfate in arteries, the skin, and in RBC's. These interactions than changes how deuterium works in the plasma. It also decreases NO release which stops the vessels from coming to surface for solar irradiation which leads to calcific plaque formation. These plaques can crumble and fall off the wall and cause an arteriole occlusion when the frequency from the skin surface is modulated for any reason. This will be very altered in a 5G world because of how 5G changes topology. 5G waves can jump conduct to our circulatory system.

The AC frequency in the power grid is modulated so this can be the stimulus to affect a plaque in a peripheral artery to cause blockages and heart attacks. Above, you saw an Xray of a patient of mine who was an electric powerline worker who was just 44 years old. You can see from the picture right infront of the lumbar spine is a calcified tube running from the heart to the legs which is the aorta. This vessel is not supposed to have any calcium in it at this age.

The collateral damage for you to realize is that in a 5G world you won't need to be a powerline worker to get this disease because 5G can jump conduct into your body and affect your skin and arteries while you have no idea this process is ongoing. This is why checking your body voltage may be very wise when 5G gets to your zip code. At the same time the public will suffer from osteopenia and/or osteoporosis because the calcium is being driven into the arteries and not the bone. Physicians will have to know to look for it because they do not understand the quantum biology of the skin with 5G. You now know more than they do.

This is why I NEVER advocate taking calcium supplements with oral vitamin D3 because oral D3 raises serum calcium and has little effect on plasma phosphorus levels. This creates a dangerous risk for arteries and bones. These small details are missed by most and certainly not well-known as the "primary" role of vitamin D3.

This is why you need to vet your experts carefully in the coming 5G world. What used to be "low risk" in a 0-4G world may no longer be safe.

CITES:

https://www.jackkruse.com/time-10-can-you-supplement-sunlight/

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