



# **IFVBESA** Information is crucial



# P75 3.1 BESA-Project Parasites

Dark field microscopy - Life blood analysis "Quantum Upgrade"



## Project P75 3.1 to the topic Parasites in vital blood

Dark-field vital blood microscopy by the IFVBESA on the effectiveness of the "Quantum Upgrade" technology of the company Leela Quantum Tech, LLC also referred to as 'test object' in this project



#### Client

company Leela Quantum Tech, LLC Attn: Eleonora Goldenberg 1421 LUISA STREET, STE G SANTA FEE, NM 87505 USA

#### **Project participants:**

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Test person (test subject):	24 test subjects from the randomised double-blind study - Projekt P75 3.0		
other participants:	none		
Project locationt:	Location of the IFVBESA (internationaler Federation for bioenergetic System Analysis) Hauptstraße 1 A-4861 Kammer/Schörfling am Attersee		

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## Basics of research project creation P75 3.1

The International Association for Bioenergetic System Analysis was commissioned by the company Leela Quantum Tech LLC to test and prove the effect of the test object 'Quantum Upgrade' using dark-field vital blood microscopy and live blood analysis. The P75 3.1 project is an extension of the P75 3.0 study. This project is concerned with the question of the extent to which the test object is able to have a significant (sustainable, life-promoting) influence on the development of parasites in the vital blood of humans (test subjects). The microscopies were carried out independently of the subjective perception of all test subjects.

## Description of the "Quantum Upgrade" by the client

The first thing to understand is that two independent objects can be energetically connected. This connection or "association" is referred to as quantum entanglement. Once these two objects are entangled, a change in one object or entity causes a change in the other, even if they are not in close proximity to each other.

For example, a mother can "sense" when something is happening to her child, even if she is thousands of miles away. She is connected (quantum entangled) with her child. In this way, scientists can also take an astronaut's skin cell or blood sample on Earth, send it into space and observe any changes in the cells or samples remaining on Earth.

#### "Quantum Upgrade" uses the same proven principle

Through years of research and development of the Leela Quantum product, Leela Quantum Tech, LLC has created one of the world's most powerful sources of usable quantum energy. With the Quantum Upgrade, homes, telephones, automobiles, businesses, other products or pets can all be connected to this energy source.

Immediately upon activation, instantaneous quantum entanglement occurs and quantum energy is channeled to the locations previously determined within the framework of the respective requirements. Healers, emphatic people, or those particularly sensitive to electromagnetic fields (EMF) or electromagnetic radiation will likely notice the difference immediately. Others may need a little more time or "feel" nothing at first – until the first changes in their lives become apparent.

#### How quantum energy supports change

In physics there is the so-called principle of inertia, which states:

"A body at rest remains at rest or maintains its state of motion as long as no force acts on it or the sum of the forces cancels out. Even a body in motion will continue to move at a constant speed as long as no external forces act on it".

This so-called Newton's first law can therefore be applied to all biological objects just as well as to humans: it is easier to continue something the same than to change it, since change requires more energy.



But what happens when you don't have enough energy to change? You

get stuck. And that's exactly where most of humanity is. They are stuck in old ways of thinking, acting and living.

This is one of the reasons meditation, prayer and other spiritual practices can lead to powerful change. They connect us to the "source" or in other words via the quantum energy back to our source (origin).

And thanks to this additional energy (quantum energy), the "Quantum Upgrade" can bring about a change that would have been impossible before.

## What are parasites:

In relation to this topic, it is necessary to expand a little. Let's start with a brief description of what makes our existence on Earth possible. The starting point of physical life is the so-called colloid (protite), which develops in our organism as part of the so-called 'cyclogeny of the microbe'. The discoverer of the so-called pleomorphism of microbes, the French physician Pierre Jacques Antoine Bechamp (1816-1908), professor of physics, toxicology, medicinal chemistry and biochemistry.

He postulated: "All microbiological life, regardless of species and genus, results from a primordial germ that is able to develop further and change its form under certain pathogenetic changes in the environment'. (from apathogen to pathogen)".

He also claimed: "All animal and plant cells contain tiny granules (colloids or protites) which do not perish after the organism itself dies and which are the cause of fermentation or from which other microorganisms can also develop. These colloids are present in every living organism such as humans, animals and plants. They are eternal and indestructible and form the transition between non-living and living matter".

The colloid is therefore fundamentally an important physiological symbiont of humans and all living matter (3-dimensional, gross material world). It is the smallest living entity. Colloids have a size of less than 0.2  $\mu$ m. They are therefore much smaller than cells. The science of pleomorphism says:

"The original form of life in general is the uninhabited cell, i.e. an empty cell, filled only by a huge mass of protites (colloids)". (Prof. Dr Günter Enderlein, AKMON 1955/1 page 50)

Everything we see in vital blood via the dark field microscope is mostly based on the scientific research of Günther Enderlein (1872 to 1968, natural scientist, biologist and zoologist).

From his own research on typhus, he discovered motile microorganisms in the dark field microscope that formed connections with more highly organised bacteria. The result of their copulation or mating immediately became invisible. Enderlein surmised that these processes were a development towards higher forms. These in turn were only visible in the dark field,



but not in the bright field microscope. Enderlein called these highly flagellated and mobile microorganisms 'spermites' (because of their similarity to sperm). Enderlein thus postulated:

"Disease is a physiological upward development of the endobiont into higher-valued, parasitic growth forms with their own metabolism, which ultimately poison the host metabolism".

"Through his research work, Enderlein has recognised that the endobiont (as a symbiont) develops 'upwards' in a kind of cyclogeny through the measures of our civilisation, such as mental impoverishment and brutalisation and the resulting unconscious states of anxiety and stress, poisoned environmental influences and food (artificial fertilisers and herbicides, pesticides, fungicides and insecticides) as well as an increased intake of animal protein (contaminated by drugs and hormones) 'develops upwards' via the food chain in a kind of cyclogeny and then becomes pathogenic as a parasite".

The true picture and pathogenicity of the so-called parasite emerged from this important research work.

I would like to repeat once again:

'Under certain circumstances or environmental factors, the symbiont (or endobiont) terminates the primordial symbiosis and becomes a parasite and thus a pathogen. Cyclogeny thus describes the development cycle from microbes of an apathogenic nature to microbes of a pathogenic nature (parasite)'.

Important: The pathogenic endobiont (parasite or pathogenic bacterium) can also regress from pathogen to apathogen in the sense of bacterial cyclogeny. This process is clearly dependent on the environment!

This project is an extended view of the study results of the P75 3.0 project. The aim is to subsequently show the effect of the test object on 'parasites', so to speak.

## To the Projekt-Design 75 3.0

The original P75 3.0 project was an exploratory study in which the harmonising effect of the test object on the blood of 24 test subjects was investigated. This project was randomised, conducted using quantum entanglement and without placebo in a sham-controlled/double-blind manner. The results with regard to the effect of the test object are even more significant than those of a pure double-blind study.

The design of this project contained modern, quantum-physical elements and thus utilised new standards in the field of 'medical quantum-technological research'.

The peripheral blood of the test subjects was taken from the corresponding fingertips and examined under a dark-field microscope using a so-called microscope slide and photographed or video-recorded and then assessed on a scale of 0 to 6. The data was



analysed and compared accordingly to determine whether the blood

morphology had changed according to the exposure conditions or to determine the effect or changes compared to the:

- 1. initial value (no exposure)
- 2. after an exposure of at least several days in the already mentioned and activated "Quantum Upgrade"

to be checked. No random samples or statistical tests were carried out.

### Basic research questions for project P75 3.1

- were the parasites observed in the vital blood of the P75 3.0 study under a dark field microscope able to regulate themselves in the sense of bacterial cyclogeny after human test subjects had been exposed to the quantum field of the so-called 'Quantum Upgrade' as a test object for at least several days with varying intensity and duration in a quantum entangled manner?
- 2. is the effect of the quantum field from the 'Quantum Upgrade' via the process of quantum entanglement able to harmonise or improve a blood situation that may be detrimental to the health of the test subjects?

This leads to further detailed research questions on the current project P75 3.1:

- What altered behaviour can be observed in parasites and subsequently in the immune system, in particular in red and white blood cells (such as erythrocytes, leukocytes, monocytes, lymphocytes, thrombocytes, etc.)?
- In what way could the environment be adapted by the influence of the test object?
- or is it the environment that undergoes regeneration through the influence of the test object and thus influences certain blood components and parasites?
- What conclusions can be drawn from the application and the already proven effect of the test object on the situation of the parasitic stress factors?
- and much more, or what can be deduced from the subsequent observation of the photos and videos from the P75 3.0 study.

## Research project description

The reason for the tests for project P75 3.1 was the follow-up analysis of the recordings of the vital blood microscopies from study P75 3.0. This follow-up was initiated due to the specific questions on the subject of spike proteins after the conclusion of study P75 3.0.

In the course of this project P75 3.1, the photographs and videos of all test subjects from the P75 3.0 project will be re-examined and scrutinised with a focus on 'parasites' and their effect on the morphology of the blood and the blood environment.



This project P75 3.1 is therefore about the retrospective view of the

functionality and mode of action of the test object 'Quantum Upgrade' against parasites in the context of vital blood and its environment.

# Legend for interpreting the characteristics of the blood analysis

The most important real phenomena in relation to parasites and their significance.

#### Red blood count and milieu

#### Agglutination of the erythrocytes (AE):

non-specific agglutination (cell accumulation) of the erythrocytes (red blood cells), low values are an expression of vital blood

#### Chondrite - micro-chondrites (MiCH):

Last stage of the low-valent apathogenic endobiont forms. Can form entire networks or meshes of fibrin - restriction of flow velocity (viscosity), congestion, microcirculatory disorders

#### Chondrite - macro-chondrites (MaCH):

Signs of high pathogenicity, from endobiontically damaged erythrocytes, can also detach - free in the blood plasma

#### Overfilling of the plasma space with endobionts (ÜE):

Shrinkage of erythrocytes, increased formation of cogwheel cells and ghosts

#### Anisozytosis (AZYT):

Differences in size between erythrocytes due to pathogenic effects, -> Consumption processes with erythrocyte reduction in size

#### Cogwheel cells with symprotite filling:

In the advanced endobiosis stage (pathogenic), snake-like outgrowths form

#### Cogwheel cells with vacuoles:

In the advanced endobiosis stage (pathogenic), vacuoles form inside the cells. cells

#### Bear paw erythrocytes (BTE):

Predominantly in renal insufficiency or overload, haemolytic anaemia

#### **Blood flow properties (FEB):**

The higher the blood flow properties, the more efficient the quality of oxygen supply to the target areas with oxigen

#### Deformation of the cell membrane (DZM):

Disturbances in the regular shape of the erythrocytes (blood-cell membrane disorders) or



Irregularities in the membrane shapes of the red blood cells. The more regular,

the more pronounced the vitality of the blood

#### Filitisation (FB):

Filament networks in the blood, restriction of the microcirculation and flow properties of the blood, => arterial and venous congestion, circulatory disorders,

forms of hypertension, and much more. Filit formation is a sign of oxidative stress. The lower or harmonious filit formation, the higher the stress tolerance. Adequate filit formation is an expression of harmonious cell metabolism

#### Filit-nest-filit-symplasts (FN-S):

Strong accumulation of filament networks in the blood to form nests or further to form regular symplasts when combined with endobiontic material

#### Haemolysis (H):

Disintegration or dissolution of the erythrocytes (red blood cells)

#### Mychite or ascite (A):

pherical primordial germ cell of all bacteria, with wall-bound nucleus = mychite. They can also form groups (many small mychites). Original form of bacterial formation of cocci or rod bacteria.Can be found in the environment as well as within erythrocytes, e.g. Leptotrichia buccalis extracellular and intracellular

#### Ascitic chains (AK):

Chain-like accumulation either free or growing from erythrocytes or leucocytes, highly pathogenic

#### Dendroid vacuoles, erythrocytes with vacuoles (EV):

Vacuoles are formed by decay and consumption processes of erythrocytes by the endobiont. These are highly pathogenic conditions

#### Thecite (TH):

Original form of all bacteria in a primordial spherical shape with more or less mobile primordial nuclei in groups or individually - more or less pathogenic depending on the stage

#### Thecite in erythrocytes (THE):

Highly pathogenic stage

#### Symplasts (S):

Form a cyclogenic stage. By shifting the blood pH => alkaline

orientation. Their pathogenicity can only be differentiated according to cyclode affiliation, form and species. Can be differentiated. E.g. Mucor symplasts, Aspergillus symplasts, mixed symplasts etc.

Mucor-Symplasts (MS): Aspergillus-Symplasts (AS):



#### Sklero-Symplastes (SS):

Sclerotic or crystalline forms of symplasts, dry-protein forms - due to dehydration, proliferating and manifold formations of a vesicular, disc-shaped to sheet-like nature

#### Parasitic burdens (PB):

Z.B. Leptotrichia buccalis intra- oder extracellulär: (LB):

#### Aspergillus Butterfly - Pteroharpen (AB):

High valences of Aspergillus niger von Tieghem, sign of a very high endobiontic state

#### Sporoid symprotites - sclero-symprotites (SS):

Strongly luminous in several colours, depending on organ assignment, -> sclerotic forms of the endobiont, -> pathogenic

#### White blood count

#### Thrombozyten-Symplast (TZS)

Concentrated platelets mixed with calcium and cholesterol -> thromboses and atherosclerosis

#### Endobiontic infestation of the white blood cells (EBWBK):

Chain-like accumulation of ascites either free or growing from leucocytes highly pathogenic

#### Endobiontic destruction of leukocytes (ZL):

Dissolution of leukocytes by endobiontic infestation, highly pathogenic

#### Traces – Spikeprotein (SP):

Typically haemolytic processes (disintegration or dissolution of erythrocytes and leukocytes) at all stages of cyclogenesis

#### Closure and drying forms in the blood

#### hondrite processes from erythrocytes (CHF1):

#### Chondrite processes from white blood cells (CHF2):

Signs of high pathogenicity, from endobiontically damaged erythrocytes, can also detach - free in blood plasma

#### Intestinal pattern (DM):

Drying forms that are similar to an intestine -> note stress on the intestine in general

#### Drepanites - fish spine (DFWS):

Dry protein sheaths arranged one behind the other, chronic condition which can be assigned to Mucor as well as Aspergillus Cyclode

#### Systagonia, scleroforms and pseudo-crystals (SYS):

Nationalisation to higher organisms, complicated living - partly fantastic natural formations. In severe chronic conditions in viral, bacterial or mycotic stages

#### Bryosclerite - star splash (BS):



Sclerotics as dry protein symplasts - enchanting blood morphological

dryings like star splashes

## Results of the follow-up of study P75 3.0 Experimental group

In the following, subjects of the experimental group are presented and interpreted for the photographic documentation of the changes detected during the microscopic examination of the blood. The following illustrations show the expression of parasitic load in a representative and summarising manner for all 24 subjects or cases with peripheral blood changes.

#### Subject no. 9 or case no. 1 BEFORE:

For descriptions of the microscopy of the following test subjects, see project description for study P75 3.0



FIGURE F1V ABOVE shows an extract of the subject's blood condition after microscopy, i.e. BEFORE the subject is confronted with the test object.

In the right-hand section F1 of the image, symprotites can be seen within the erythrocytes (red blood cells). They are caused by decay and consumption processes of erythrocytes by the endobiont. These are highly pathogenic conditions resulting from early parasitic contamination, as the blood was microscoped immediately after collection.



In FIGURE F2V BOTTOM, anisocytosis (microcytes, section F3 of the image) is increasingly evident in the extract of the subject's blood condition. These are differences in size between erythrocytes due to pathogenic effects, -> consumption processes with erythrocyte reduction in siz.



The following FIGURE F3V BELOW shows so-called bryosclerites (asterisks, section F3V) in the extract of the subject's blood condition after microscopy. These are sclerotics as dry protein symplasts. They normally only appear in the blood morphological drying phase. Finding them in the initial stage of microscopy is very rare and indicates an endobiontically advanced phas.





#### Subject no. 9 or case no. 1 AFTER:

The following FIGURES F1N-F3N BELOW show an extract of the subject's blood condition after microscopy and AFTER the subject was confronted with the test object. The AFTER microscopies took place on 24/08/2023, i.e. around 4 months after the subject was confronted with the test object.







The images were again taken a few minutes after the blood sample was taken. All 3 images show that the stressful, highly pathogenic factors from the BEFORE microscopies have largely harmonised (transformed or converted). The erythrocytes show a marvellous shape and characteristics. At the same time of comparison as the microscopy BEFORE, no parasitic contamination can be recognised. The white blood cells are also regular and dynamic.



Subject no. 8 or case no. 2 BEFORE:page 15Projectreport P75 3.1company Leela Quantum Tech, LLC





FIGURE F1V ABOVE shows an extract of the subject's blood condition after microscopy, i.e. BEFORE the subject is confronted with the test object.

The left section F1 of the image shows a symplast within a huge and highly pathogenic thrombus highly pathogenic thrombus, as an expression of a cyclogenetic stage. By shift of the blood pH => alkaline orientation, this pathogenicity can only be recognised according to cyclode affiliation, form and species and shows itself here as Aspergillus symplast. Section F2 already shows a dead leucocyte (white blood blood cell) as a sign of the cyclogenetic process.





FIGURE F2V ABOVE shows another MEGA mixed symplast in the subject's blood extract. The radiating coloured dots indicate a burden on the lungs, colon and spleen. Around the huge mixed symplast, there are increased rolls of money (right) and dissolving or dead erythrocytes (left half of the image).

#### Subject no. 8 or case no. 2 AFTER:

The following FIGURES F1N-F3N BELOW show an extract of the subject's blood condition after microscopy and AFTER the subject was confronted with the test object. The AFTER microscopies took place on 24 August 2023, i.e. around 4 months after the subject was confronted with the test object.

It can be seen in both of the following images (F1N and F2N) that the stressful, highly pathogenic factors from the BEFORE images of the microscopies have largely harmonised (transformed or converted). The erythrocytes show a marvellous shape and characteristics. No parasitic, cyclogenetic contamination of the cyclodes can be recognised at this point in time. The white blood cells also appear to be really mobile or dynamic.







## Subject no. 7 or case no. 3 BEFORE:

FIGURE F1V BOTTOM shows an extract of the subject's blood condition after microscopy, i.e. BEFORE the subject is confronted with the test object.

The left section P1 of the image shows a parasite within the erythrocyte (intracellular). (intracellular). This is the pathogenic bacterium 'Leptotrichia buccalis' as the highest stage of the bacterial form. The cells are intracellularly curved and white in colour diameter of about 0.7  $\mu$ m. In comparison, an erythrocyte has a diameter of about 1.5  $\mu$ m.





In general, the proband shows a highly pathogenic condition as can be seen in image F2V (only partially without symptoms). Inflammatory processes (P2) and further bacterial contamination of the erythrocytes (P3) are clearly recognisable. Furthermore, so-called 'ghosts' (shadow cells) (P5) can be seen as the cause of further decay processes.Images P6 and P7 show dead white blood cells (P6 thrombocyte) and P7 (granulocyte) as well as their traces as an expression of P4.



#### Subject no. 7 or case no. 3 AFTER:

The following FIGURES F1N-F3N BELOW show an extract of the blood condition of the test person after the microscopy and AFTER the confrontation of the test person with the test object. The AFTER microscopies took place on 22 August 2023, i.e. around 4 months after the subject was confronted with the test object.



## P7 BESA-Projekt P75 3.1 - Leela Quantum Upgrade - PARASITEN





In both of the following images (F1N and F2N) it can be seen that the stressful, highly pathogenic factors from the BEFORE images of the microscopies have largely harmonised (transformed or converted). The erythrocytes show a totally changed form and characteristics. No parasitic, cyclogenetic contamination of the cyclodes (bacteria) can be recognised. The white blood cells also show themselves to be truly mobile or dynamic.





## Subject no. 13 or case no. 4 BEFORE:

FIGURE F1V below shows an excerpt of the subject's blood condition after microscopy, i.e. BEFORE the subject is confronted with the test objec.



In section P1 and P2 of the image, 2 Aspergillus symplasts are visible as an expression of the fungal cyclodes. As in case no. 1, P3 shows anisocytosis (microcytes), i.e. differences in size between erythrocytes due to pathogenic influence => so-called



consumption processes with erythrocyte reduction.

Furthermore, many so-called 'ghosts' (shadow cells - P5) are recognisable, an expression of a blood milieu weakness (caused by parasites), which prevents the complete development of the erythrocytes development of the erythrocytes. P4 shows a leucocyte, also a victim of the blood milieu.



Subject no. 13 or case no. 4 AFTER:



FIGURE F1N ABOVE and F2N below show an extract of the subject's blood condition aftermicroscopy and AFTER the subject was confronted with the test object. The AFTERpage 22Projectreport P75 3.1company Leela Quantum Tech, LLC



microscopies took place on 22 August 2023, i.e. around 12 months after the test subject was confronted with the test object.

The effects can be seen accordingly.

On the upper (F1N), as well as on the following image (F2N), it can be seen that the stressful, highly pathogenic factors from the BEFORE images of the microscopies have largely harmonised (transformed or converted). The erythrocytes show totally transformed form and characteristics.



Both the prerequisite for the formation of Aspergillus symplasts and shadow cells in the environment appear to have completely neutralised (transformed or regressed according to cyclogenesis) at the beginning of the microscopy in the comparison period. Most of the red and white blood cells are normal. The white blood cells also appear to be properly mobile or dynamic.

## Results of the follow-up of study P75 3.0 control group

In the following, test subjects from the control group are shown and interpreted as photographic documentation of the changes detected during the microscopic examination of the blood. The following illustrations show the expression of parasitic load in a representative and summarising manner for all 24 test subjects or cases with peripheral blood changes. The difference to the subjects in the experimental group is that the subjects in the control group were not within the field of the test object.

## Subject overview general, case no. 1 BEFORE:



FIGURE F1V below shows an extract of the blood condition of the test person at the time of January 2023. The image shows so-called lemon cells with thread-like extensions (so-called chondrites). Chondrites represent the last stage of the low-valent, still apathogenic endobiont forms in the sense of bacterial cyclogeny. As so-called free chondrites, they can form entire networks or networks of fibrin - this ultimately leads to a restriction of the flow velocity and to congestion of the microcirculation. This would correspond to a pathogenic development of the chondrites as a preliminary stage



#### General overview of test subjects, case 1 AFTER:

FIGURE F1N BELOW shows an excerpt of the subject's blood condition on 21.08.2023, i.e. about 8 months after microscopy 1 BEFORE.

A highly pathogenic image is already recognizable here. Many so-called ghosts or shadow cells of erythrocytes are already visible within the beautifully shaped erythrocytes with a white border (healthy cell membrane). They are difficult to recognize in the image because they can no longer fully develop their cell membrane and their white border remains almost dark under the microscope. This makes them victims of parasitic structures. The still white glowing leukocyte at the top left of the image is also very easy to recognize, as it is already in the process of parasitic dissolution. Interestingly, this can be seen shortly after the blood sample is taken, which is at least many hours too early





## Subject overview in general, case no. 2 BEFORE:

FIGURE F2V BOTTOM shows an extract of the blood condition of the proband after the 1st microscopy in December 2022. The bright, shadowy visible structures already represent so-called symplasts. Their pathogenicity can only be differentiated according to cyclode affiliation, shape and type. The two large and gray-appearing symplasts in the lower part of the image show a so-called Aspergillus symplast.





The 3 lighter structures at the top of the picture are so-called mixed symplasts (from Mucor and Aspergillus). This is usually indicated by a shift in the blood pH => alkaline orientation.Both are highly prevalent and signs of a very high endobiontic pathogenic state.

#### General overview of test subjects, case 2 AFTER:



FIGURE F2N ABOVE shows an excerpt from the blood condition of the test person on 14.08.2023, i.e. about 9 months after microscopy 1 BEFORE.

The effects from image F1V BEFORE can already be seen here. Mostly ghosts, i.e. shadow cells, show the effect of the image from the BEFORE microscopy. A leukocyte in the process of dissolution due to parasitic contamination can be seen very clearly. The strong development of shadow cells in terms of area and number is very alarming. They are an expression of a highly pathogenic development or a severely disturbed blood environment.

## Subject overview in general, case no. 3 BEFORE:

FIGURE F3V BOTTOM shows an extract of the blood condition of the subject after the 1st microscopy in October 2022.

A magnification of x100 was deliberately set here to show the extensive spread of the parasitic structures. The sharp-edged symplasts can be seen in the image as in case 2. This is again primarily an Aspergillus symplast as a highly pathogenic stage of cyclogenetic development.



As this image was taken shortly after the blood sample was taken, the

still healthy erythrocytes around the symplasts are also recognizable despite x100 magnification.



#### Subject overview in general, case 3 AFTER:

FIGURE F3N BELOW shows an excerpt of the subject's blood condition on August 17, 2023, i.e. again about 9 months after microscopy 1 BEFORE.

The effects of image F3V BEFORE can already be seen here. The still beautiful or healthy erythrocytes in image F3V again show a severely disturbed and highly pathogenic blood environment in the current image. The image also clearly shows the tendency of the white blood cells (leukocytes and granulocytes) to disintegrate due to parasitic contamination.





## Subject overview in general, case no. 4 BEFORE:

FIGURE F4V BOTTOM shows an extract of the subject's blood condition after the 1st microscopy in November 2022. The image shows a huge and bizarre-looking mixed symplast immediately after the blood sample was taken.

Around this Mucor-Aspergillus symplast there are already some ghosts (in the middle above the symplast and also below).

Furthermore, many filites are already visible around the symplast as a sign of parasitic contamination of the erythrocytes. One leukocyte each above the symplast and right above the symplast are already in dissolution, even though so many healthy erythrocytes are still recognizable





#### Subject overview in general, case 4 AFTER:

FIGURE F4N BELOW shows an excerpt of the subject's blood condition on 23.08.2023, i.e. again about 9 months after microscopy 1 BEFORE. The effects from image F4V BEFORE can already be seen here. The still beautiful or healthy erythrocytes in image F4V show a severely disturbed and highly pathogenic blood environment in the current image.

This x 100 image gives an overview and a feeling for the enormous parasitic influences on the morphology and environment of the blood.

At the bottom right, healthy erythrocytes are still clearly recognizable. The rest of the picture shows a veritable field of devastation with the ghosts and the dead white blood cells. See also image F5N in a x 400 representation.









## **Graphical summary**

Representation of the values on a scale from 0-6

- low numbers correspond to a low or weak expression
- high numbers correspond to a high or strong manifestation

In the following tabular-graphic representations, the most conspicuous blood values of all test subjects, such as: the blood plasma and the pathogenic forms contained therein, the red blood count (erythrocytes) and the white blood count as well as the forms of desiccation from the project description, from the P75 3.0 project were used.

#### **Experimental group**

Blood plasma and the pathogenic forms it contains

#### **Blood environment load:**

The higher the values on the scale (0-6), the greater the load (severity) of the blood environment with pathogens.

#### Symprotites or dark field corpuscles:

Symprotites are the three-dimensional agglomeration of so-called protites (microorganisms). They can only be observed in living blood and only under a dark-field microscope. Many symprotites immediately after the blood sample is taken are an expression of an increased defense (functioning immune reaction) against or in the case of a viral, bacterial or parasitic load. Too many symprotites (snow flurries) can be an indication of an allergic reaction or inflammation. The absence of symprotites is an alarm signal. The plasma pH value is out of balance, a lockdown has occurred (blocked immune system - symptom of exhaustion). Low values on the scale are an expression of a disorder, high values correspond to an inflammatory or allergic condition.

#### Apathogenic bacterial formation:

Is an expression of a functioning endobiosis in the context of bacterial cyclogeny. The lower the values on the scale, the higher the pathogenicity in the vital blood.

#### Pathogenic bacterial formation:

Is an expression of a certain pathogenicity in the context of bacterial cyclogeny. The lower the values on the scale, the lower the pathogenic expression.

#### Symplasts/detoxification potential:

They form a cyclogenetic stage. By shifting the blood pH value towards an alkaline orientation. Their pathogenicity can only be differentiated according to cyclode affiliation, form and species. E.g. Mucor symplasts, Aspergillus symplasts, mixed symplasts etc. An



excessively high number of symplasts can possibly be an indication of limited detoxification. The higher the values on the scale, the higher the pathogenic load.

#### Sporoid symprotites or sclerosymprotites (dry protein):

Strongly luminous in several colors, depending on the organ assignment, represent a sclerotic, pathogenic form of the endobiont. The higher the values on the scale, the higher the pathogenicity.



### **BEFORE-AFTER REPRESENTATION**

#### Red blood count - erythrocytes (RBC-red blood cells)

#### Flow characteristics of the blood:

The higher the values on the scale, the greater the expression of active/vital blood and blood milieu. Low values are an expression of restricted vital blood activity.

#### Degenerated cell membrane:

Disturbances in the regular shape of the erythrocytes (blood-cell membrane disorders) resp. Irregularities in the membrane shapes of the red blood cells are an expression of pathogenic stress. The more regular, the more pronounced the vitality of the blood. The higher the values on the scale, the greater the pathogenic expression.

#### Agglutination of the erythrocytes:

The non-specific agglutination (accumulation of cells or agglutination) of the erythrocytes. The higher the values on the scale, the higher the pathogenicity.



#### Liver islets:

These represent a specific agglutination (accumulation of cells or agglutination) of the erythrocytes to form so-called liver islands. The higher the values on the scale, the higher the pathogenicity (liver burden).

#### Target cells (hypochromic erythrocytes):

Target cells indicate a limited ability to transport oxygen.

This can have many causes, such as a lack of water and/or oxygen, anemia, an increase in the cellular protein load (over-rejection), toxin load or gastrointestinal load. The higher the values on the scale, the greater the burden.

#### Hemolytic erythrocytes:

Hemolysis represents disintegration or dissolution of erythrocytes (red blood cells) due to highly pathogenic parasitic load (basis of most severe disease patterns up to cancer). The higher the values on the scale, the higher the pathogenicity in the vital blood.



**BEFORE – AFTER REPRESENTATION** 

#### White blood count - (WBC) and desiccation pattern

#### Activity of the WBC:

The white blood cells represent the immune system. The higher the values on the scale, the greater the expression of an active/vital immune response. Low values are an expression of a limited immune response.

#### Number of WBCs:



The higher the values on the scale, the higher the number of WBCs and the stronger the expression of an active immune response in the case of e.g. inflammation or corresponding pathogenic stress. The higher the values on the scale, the higher the number of WBCs in the vital blood.

#### Platelet symplasts:

Thrombocytes are blood platelets that form clusters and are important for blood clotting. The higher the values on the scale, the higher the platelet load due to their number or due to an excessive clustering of platelets and blood platelets (giant thrombi). Concentrated platelets mixed with calcium and cholesterol, causes of thrombosis and atherosclerosis. The higher the values on the scale, the higher the pathogenicity in the vital blood.

#### WBC with endobiontic infestation:

Chain-like accumulation of ascites either free or growing from leukocytes are highly pathogenic. The higher the values on the scale, the greater the pathogenicity.

#### Intestinal pattern:

Drying forms that are similar to an intestine indicate intestinal stress. The higher the values on the scale, the greater the pathogenic expression.

#### Vacuoles in erythrocytes:

Vacuoles are formed by decay and consumption processes of erythrocytes by the endobiont. These are highly pathogenic conditions. The higher the values on the scale, the higher the pathogenicity.



#### **BEFORE - AFTER REPRESENTATION**



#### Generalized before/after presentation from the experimental group

This presentation relates to all subjects in the experimental group who were presented in the project or in the project description P75 3.0.



#### Stress blood environment:

The higher the values on the scale (0-6), the greater the burden (severity) of the blood environment with pathogens. Low values are an expression of an active/vital blood environment.

#### Cyclogenetic shape change RBK:

Disturbances in the regular shape of the erythrocytes (blood cell membrane disorders) or Irregularities in the membrane shapes of the red blood cells are an expression of pathogenic stress.

The more regular, the more pronounced the vitality of the blood. The higher the values on the scale, the greater the pathogenic expression through cyclogenetic changes.

#### Decay processes of the erythrocytes (RBC):

Haemolysis represents disintegration or dissolution of erythrocytes (red blood cells) due to highly pathogenic parasitic load (basis of most severe disease patterns up to cancer). The higher the values on the scale, the higher the pathogenicity in the vital blood.

#### Consumption processes through anisocytosis:

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Anisocytes are differences in size between erythrocytes due to

pathogenic effects. These are so-called consumption processes with erythrocyte reduction. The higher the values on the scale, the greater the pathogenicity.

#### Fungal symplast formation:

Form a cyclogenetic stage. By shifting the blood pH value to an alkaline orientation. Their pathogenicity can only be differentiated according to cyclode affiliation, form and species. E.g. Mucor symplasts, Aspergillus symplasts, mixed symplasts etc. The higher the values on the scale, the greater their pathogenicity.

#### Inflammatory processes:

Are indicated, for example, by an increased number of white blood cells (WBC) or excessive formation of symprotites (snow flurries). The higher the values on the scale, the higher the pathogenicity.

#### **Thrombus formation:**

Thrombocytes are blood platelets that form clusters and are important for blood clotting. The higher the values on the scale, the higher the load on platelets due to their number or due to excessive clustering of platelets and blood clots (giant thrombi). Concentrated platelets mixed with calcium and cholesterol are causes of thrombosis and atherosclerosis.





# Generalized before/after presentation from the project description of the control group

This presentation primarily relates to those test subjects in the control group who are presented in the project or in the project description P75 3.0.



#### **BEFORE - AFTER REPRESENTATION**

#### **Blood environment stress:**

The higher the values on the scale (0-6), the greater the burden (severity) of the blood environment with pathogens. Low values are an expression of an active/vital blood environment.

#### Cyclogenetic shape change RBK:

Disturbances in the regular shape of the erythrocytes (blood cell membrane disorders) or Irregularities in the membrane shapes of the red blood cells are an expression of pathogenic stress. The more regular the shape, the more pronounced the vitality of the blood. The higher the values on the scale, the greater the pathogenic expression.

#### Decay processes of the erythrocytes (RBC):

Haemolysis represents disintegration or dissolution of erythrocytes (red blood cells) due to highly pathogenic parasitic load (basis of most severe disease patterns up to cancer). The higher the values on the scale, the higher the pathogenicity in the vital blood.



#### **Consumption processes Anisocytosis:**

Anisocytes are differences in size between erythrocytes due to pathogenic effects. These are so-called consumption processes with erythrocyte reduction. The higher the values on the scale, the greater the pathogenicity.

#### Fungal symplast formation:

Form a cyclogenetic stage. By shifting the blood pH value to an alkaline orientation. Their pathogenicity can only be differentiated according to cyclode affiliation, form and species. E.g. Mucor symplasts, Aspergillus symplasts, mixed symplasts etc. The higher the values on the scale, the greater their pathogenicity.

Are indicated, for example, by an increased number of white blood cells (WBC) or excessive formation of symprotites (snow flurries). The higher the values on the scale, the higher the pathogenicity.

#### **Thrombus formation:**

Thrombocytes are blood platelets that form clusters and are fundamentally important for blood clotting. The higher the values on the scale, the higher the load on platelets due to their number or due to excessive clustering of platelets and blood clots (giant thrombi). Concentrated platelets mixed with calcium and cholesterol, causes of thrombosis and atherosclerosis.





## Explicit before/after presentation from the project description of the experimental group

This presentation primarily relates to those subjects in the experimental group who are explicitly presented here in the project description P75 3.1.

#### Consumption processes by bacteria in erythrocytes:

Bacteria (bacteriod) immediately after blood sampling represent a cellular defense weakness and an indication of severe disease (wasting disease process). The higher the values on the scale, the greater the pathogenicity.

#### **Depletion processes Anisocytosis:**

Anisocytes are differences in size between erythrocytes due to pathogenic effects. These are so-called consumption processes with erythrocyte reduction. The higher the values on the scale, the greater the pathogenicity.

#### Bryosclerites, sclerosis symplasts:

Sclerotics is dry protein that combines to form dry protein symplasts. This sometimes results in magical blood morphological dryness, such as splattering forms. The higher the values on the scale (0-6), the greater the burden (manifestation) of pathogens in the blood environment.

#### Giant thrombus / Aspergillus-Mucor mixed symplast:

Thrombocytes are blood platelets that form clusters and are important for blood clotting. The higher the values on the scale, the higher the load on platelets due to their number or due to excessive clustering of platelets and blood clots (giant thrombi). Concentrated platelets mixed with calcium and cholesterol are the cause of thrombosis and atherosclerosis.

#### Bacteria Leptotrichia buccalis:

Is an apathogenic form of bacteria that occurs both intracellularly (in the erythrocytes) or extracellularly (outside the erythrocytes). The higher the values on the scale, the greater the load as a precursor to pathogenicity.

#### Inflammatory processes:

Are indicated, for example, by an increased number of white blood cells (WBC) or excessive formation of symprotites (snow flurries). The higher the values on the scale, the higher the pathogenicity.

#### Ghost's shadow cells or hemolytic erythrocytes as a decay process:



Hemolysis represents disintegration or dissolution of erythrocytes (red

blood cells) due to highly pathogenic parasitic load (basis of most severe disease patterns up to cancer). The higher the values on the scale, the higher the pathogenicity in the vital blood.

#### Dead white blood cells (WBC):

The higher the values on the scale, the higher the pathogenicity in the vital blood.



# Explicit before/after presentation from the project description of the control group

This presentation primarily concerns those test subjects in the control group who are explicitly presented here in the project description P75 3.1.

#### Lemon cells:

They give an indication of a liver/spleen weakness or represent a corresponding disorder (assignment Mucor-Cyclode). The higher the values on the scale, the higher the pathogenicity.

#### Flow properties of the blood:

The higher the values on the scale, the greater the expression of an active/vital blood and blood environment. Low values are an expression of restricted vital blood activity.

#### Sporoid symprotites or sclero-symprotites (dry protein):

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Strongly luminous in several colors, depending on the organ

assignment, represent a sclerotic, pathogenic form of the endobiont. The higher the values on the scale, the higher the pathogenicity.

#### Agglutination, liver islets:

They represent a specific agglutination (cell accumulation or agglutination) of the erythrocytes to form so-called liver islands. The higher the values on the scale, the higher the pathogenicity (liver burden).

#### Fungal symplast formation:

Form a cyclogenetic stage by shifting the blood pH to an alkaline orientation. Their pathogenicity can only be differentiated according to cyclode affiliation, form and species. E.g. Mucor symplasts, Aspergillus symplasts, mixed symplasts etc. The higher the values on the scale, the greater their pathogenicity.

#### Ghost's shadow cells or hemolytic erythrocytes as a decay process:

Hemolysis represents decay or disintegration of erythrocytes (red blood cells) due to highly pathogenic parasitic load (basis of most severe disease patterns up to cancer). The higher the values on the scale, the higher the pathogenicity in the vital blood.

#### Dead white blood cells (WBC):

The higher the values on the scale, the higher the pathogenicity in the vital blood.

#### **Consumption processes Anisocytosis:**

Anisocytes are differences in size between erythrocytes due to pathogenic effects. These are so-called consumption processes with erythrocyte reduction. The higher the values on the scale, the greater the pathogenicity.



#### **BEFORE – AFTER REPRESENTATION**







## **Authorised Summary**

#### Explicit before/after presentation from the project description of the Experimental Group:



Lower values indicate better health outcomes and a reduced pathogenic load.

Parameter	Before	After	Reduction (%)	Interpretation
Stress Blood environment	4	2	50%	Reduced pathogen burden, indicating a more active/vital blood environment
Cyclogenetic shape change RBK	5	3	40%	Fewer irregularities in erythrocyte shape, suggesting reduced pathogenic stress
Decay processes	4	3	25%	Lower haemolysis, indicating reduced pathogenic load on red blood cells
Consumption processes	3	2	33%	Fewer size differences in erythrocytes, indicating lower pathogenicity
Fungal symplast formation	3.5	1.5	57%	Reduced formation of fungal symplasts, indicating lower pathogenicity and a more balanced blood pH
Inflammatory processes	3	1	67%	Lower inflammation markers, suggesting decreased pathogenic load and reduced inflammation
Thrombus formation	2	0	100%	Complete reduction in thrombus formation, lowering the risk of thrombosis and atherosclerosis

The presentation of the AFTER images only shows a small section of the available image material. The aim of the presentation was not so much to compare the worst BEFORE images with the best AFTER images in order to create an impressive overall picture. The aim here was to determine possible parasitic developments from the BEFORE microscopy of the vital



blood and to compare these with the AFTER microscopy from the P75 3.0 project. An attempt was made to deliberately separate parasites from the so-called spike proteins, as described in the abstract of this study. It is clear that there are always overlaps between stress factors caused by parasites and stress factors caused by spike proteins. This means that the framework conditions were to recognize possible parasitic structures or processes in the BEFORE microscopies in order to compare them with the AFTER microscopies to determine whether possible parasitic representations are also detectable in the AFTER microscopies. This does not represent a comparison of sick to healthy (bad image versus good image), but rather careful processing of the photo and video material for possibly specific parasitic changes and their documentation. For this purpose, the 1st microscopies, which referred to a time frame of about 60 minutes after the blood sample was taken, were used.

In the follow-up of the P75 3.0 study, the experimental group, unlike the control group, showed that after around 6-12 months in the field of the test object, the pathological loads caused by parasites in the vital blood of the test subjects, as determined in the BEFORE tests, in some cases improved significantly and in others decreased or remained the same. Only the presentation of the hemolysis of the erythrocytes and the dead white blood cells from the experimental group showed a minimal deterioration. See the image comparison between the experimental group and the control group. Particularly in the control group, the difference between BEFORE and AFTER microscopy is clearly recognizable in the direction of increased pathogenicity. The radical nature of certain parasitic developments is thought-provoking and confirms the views and study results presented in the abstract.

Here is a brief statement in relation to the questions posed before the start of the project:

**Question:** Were the parasites observed in the vital blood of the P75 3.0 study under a dark-field microscope, after human volunteers were exposed to the quantum field of the test object for up to 12 months with varying intensity and duration, able to regulate themselves in the sense of bacterial cyclogeny to promote life?

**Answer:** As far as the observation period until October 2023 is concerned, yes. It should be noted that the meaning of "in the sense of bacterial cyclogeny" in relation to this project is subject to a certain subjectivity. Here, scientists decide on the final data for this graphical representation on the basis of intellectual influencing factors as well as through resonance diagnostics via BESA (see also "Objectivity versus subjectivity of science").

Even if the decay process caused by hemolytic erythrocytes and that of white blood cells has increased slightly, it is the remaining parameters that represent a positive influence of the test object or the quantum field. The comparison with the control group in particular confirms the regulatory influence of the Quantum Upgrade.

**Question:** Is the effect of the quantum field from the test object via the process of quantum entanglement able to harmonize or improve a blood situation that may be detrimental to the health of the test subjects?

Answer: Yes



**Question:** What altered behavior can be observed in parasites and subsequently in the immune system, especially in red and white blood cells (e.g. erythrocytes, leukocytes, monocytes, lymphocytes, thrombocytes, etc.)?

**Answer:** The white blood cells showed a regular development with no parasitic infestation, in extreme cases a very limited parasitic infestation (a determinant in any case is the lifestyle of the sample).

**Question:** In what way could the environment be adapted by the influence of the test object?

**Answer:** Especially or particularly in the area of the blood environment, clear changes in the direction of a life-friendly environment in the sense of bacterial cyclogeny could be determined by using the test object (see comparison of experimental group and control group).

**Question:** Or is it the environment that undergoes regeneration through the influence of the test object and thus influences certain blood components and parasites?

**Answer:** Yes, from the observation of the image material and subjective determination via BESA, it can be assumed that the most lasting changes are seen in the environment. Ultimately, it is the environment that causes changes in the morphological blood structures (in line with bacterial cyclogenesis).

**Question:** What conclusions can be drawn from the application and the already proven effect of the test object on the situation of parasitic stress factors?

**Answer:** On the one hand, it appears that the current environmental pollution requires the permanent use of the test object. Furthermore, the follow-up to the P75 3.0 study showed that the test object can have a lasting influence on the blood environment and thus on bacterial cyclogenesis. In this context, the important question arises: "What influence do the increasing environmental influences have on the human metabolism, especially in correlation with long-term use of the test object"?

#### Discussions and conclusions

In the present project P75 3.1, the live and vital blood from the P75 3.0 study of 24 test subjects was analyzed and recorded under the light microscope in the dark field in addition to BESA. Of these subjects, 12 were in the experimental group and 12 in the control group.

#### Implementation in the project:

As already mentioned in the abstract under General, vital blood analysis in dark-field microscopy is a highly interesting form of diagnosis for scientific research. It is interesting because, unlike other variants, in the field of vital blood microscopy it is necessary to create a separate matrix at the beginning of each research project in order to integrate it into the study design accordingly.Both the diagnosis and the research require the research team to have the appropriate practice both in setting up the framework for the research project and in interpreting the results.I mention this here because dark-field microscopy or vital blood or



live blood analysis is a form of diagnosis that must be classified to a large extent as subjective science. This is because both dark-field microscopy and subjective science are rejected by guideline medicine and its purely objective science (see abstract for this project).

In this current project, the vital blood from the specified observation period was used for the P75 3.0 study. This means that in the current project P75 3.1, the vital blood of the test subjects from study P75 3.0 was examined with regard to parasites. What exactly the research team refers to as parasites is also discussed in detail in the abstract. This project thus defines exactly what parasites are and what they do, when and how. Furthermore, the blood from the first observation period up to 30 minutes after the blood sample was taken was used. Again, it is important to understand that in this project we are referring precisely to this period, because each period of observation in connection with the age of the blood smear has its own regularities with regard to the changes that can be seen. With regard to parasites, it is sufficient to limit ourselves to this time frame. Anything beyond that would be too great and unnecessary an effort in terms of parasites. After all, the aim of this project was to determine whether the test object is capable of containing the development and effect of parasitic processes or reversing them in the sense of bacterial cyclogeny. As the study was conducted around 12 months ago, the current project P75 3.1 did not focus on current developments in relation to parasites.

Furthermore, it is important to understand that each blood smear represents the environment and morphology of the vital blood from a specific finger prick. In order to minimize the risk that the contents of the blood smear from another fingerberry reflect a different picture (which is repeatedly observed in the practice of the IFVBESA), the IFVBESA always takes blood from at least 2 different fingerberries.

Unclear or completely new aspects in the blood smear that have never been observed before are also shown photographically and additionally scrutinized on the energy-informative levels via BESA (as also shown in the pictures of this project).

#### About the project itself

Various changes in the aggregate state of the erythrocytes and white blood cells were detected in all test subjects. Furthermore, an extremely rapid and aggressive parasitic development as well as the presence of exogenous factors in the peripheral blood of the test subjects was observed (see also images in project P75 3.2 Spike proteins). The resulting hemolysis of erythrocytes and dissolution of leukocytes and granulocytes was significantly higher than that of the well-oxygenated wall of red and white blood cells. They gave the impression that they could have a direct influence on a certain pathogenic development. The changes observed in the vital blood of all test subjects support the hypothesis that these are primarily due to increased formation of environmental influences such as: Consequences of mRNA vaccination, transfer of spike proteins, environmental pollution, water, food, etc.).



The 4 cases described in this series are representative of all 24 subjects, both in the experimental group and the control group, in which absolutely abnormal structures and substances were found. The changes in the erythrocytes show a tendency towards aggregation/disintegration, stacking in rouleaux, hemolysis, i.e. conditions that indicate a significant change in the so-called zeta potential.

The zeta potential is the electrical cell potential, in the case of blood it is -20mV. The more negative it is, the more free-flowing the blood is. The more positive it is, the more the blood components tend to clump together and restrict the blood's ability to flow.

In addition, a strong tendency towards the formation of fibrin symplasts (fibrin nests), ghosts and mixed symplasts (Mucor and Aspergillus) has generally been demonstrated. These changes could correlate on the one hand with coagulation disorders and on the other hand with morphological membrane malformations due to the known vascular toxicity of the artificial spike protein. In this context, it is also interesting to note that all test subjects were affected.

In summary, it can be said that such an abrupt change in the vital blood or peripheral blood level has never been observed from the point of view of vital blood-live blood dark field microscopy or been described in relevant medical forums. It is almost unbelievable how quickly these changes took place within a few months. (For comparison, see also "Project P75 3.2 Spike proteins" and "Project P75 4.0 Animal study").

In this context, the observation of the rapid transition from a completely normal

transition from a completely normal state of vital blood to a pathological state with hemolysis, agglomeration of red blood cells and their stacking in complex and huge conglomerates up to giant thrombi and MEGA-symplasts.

According to our findings, such processes coupled with such a large amount of particles in the blood are obviously incompatible with a microcirculation that promotes normal blood flow. Also, red blood cells (erythrocytes) changing so rapidly over time (60 minutes to 24 hours) with self-aggregation phenomena and membrane deformation on such a scale has never been documented before.

Further studies are needed to question the following:

- to define the type of blood particles found, where they come from and what they mean
- which causes are actually behind why the breakdown of live blood (haemolysis) takes place in such a short time
- To what extent are the parameters observed in this project mutually dependent? How is it possible that certain parameters in the vital blood change significantly due to the influence of the test object and certain others do not or even slightly deteriorate without worsening the overall impression?



the meaning behind the highly luminescent and sometimes oversized round circular substances (donut-like)

- what influence the consciousness of humans and animals has on the blood

As already mentioned in the abstract on the topic of spike proteins, spike proteins correlate strongly with physical stress in humans; on the other hand, they are sustainably involved in the generation of nitro stress. This in turn favors the development of parasitic processes and is thus the cause of the increase in further oxidative processes and thus associated with the diseases already mentioned (see also abstract stress axis for study P79 Men's H.E.A.L 360 Underwear and abstract spike proteins for project P75 3.2 Spike proteins).

The aim of this project was therefore to test whether the influence of the field of the test object (quantum upgrade) makes it possible to induce the more highly developed, pathogenic growth forms of the microbes (parasites) to develop back into lower-valent, apathogenic symbiotic growth forms (symbionts) of the endobiont's cyclode.

In other words: Is the field of the test object suitable and capable of creating a symbiotic balance in the vital blood of the test subjects?

First of all, it is important to understand this:

#### "The microbe is nothing, the culture medium is everything".

In order to survive on this planet or in this 3-dimensional world, every living being requires a certain biological and spiritual terrain. Every biological change in the living organism, regardless of whether it is destructive (in the direction of illness in the broader sense) or constructive and life-promoting (in the sense of healing), always requires a certain terrain for its development. In detail, this is independent of whether we are talking about bacteria or viruses (in the original sense) or inflammatory or degenerative deregulations. The respective biological and, above all, mental terrain determines the type of development.

The French researcher and hydrologist Prof. Louis Claude Vincent (1906 to 1988) was one of many who dealt with this topic. Perhaps the most important in this context, as he provided scientific evidence as to which terrain is ultimately necessary for healthy biological development.

Three physical measurements, which are taken from the body fluids blood, urine and saliva and calculated accordingly, determine the requirements for the ideal biological terrain for humans. These three aspects in particular confirm the results of this project P75 3.1 as well as those of our previous projects and studies.

Basically, it is precisely these physical aspects that have always been the most obvious to us and are still the most obvious today. And it is precisely these aspects that we are also observing at the levels of BESA and dark-field vital blood microscopy (including blood, urine, sperm ejaculate and saliva).

Regardless of which technology we use, the images and results are always congruent.

And it is precisely in these aspects that we can observe and understand the essential effect of the test object.



The effect of the test object relates primarily to the change in the milieu of the vital blood and to certain organs that influence the milieu, such as the liver, kidneys, lymph excretion, etc., and not to the endobiont (pathogen or parasite) itself.

It is the endobiont itself that adapts to its changed environment. We also observe this phenomenon in nature and in water.

"Change the soul of the water and the fish will change".

The question of the extent to which the field of the test object is suitable and capable of restoring a symbiotic balance or regulation in the sense of bacterial cyclogeny or in the sense of BESA in the vital blood of the test subjects can therefore be answered unequivocally in the affirmative.

"The test object changes the information of the environment, whereupon the living components of the blood also change in the direction of significant regulation".