

# Toxins storage centre: brain



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Toxins are quickly transported into the blood and from there into the storage organs.

For all toxins, the most important storage area is the brain. The poisons stored here have the greatest impact on the psyche. Poisons stored in the jaw are noticeable by so-called "remote effects", ie effects on other parts of the body. But all other organs or parts of the body, such as nerves, liver, intestines, glands, heart, kidneys, bones, skin and tumors, also act as storage organs.

Inflammation caused by stored poison is the cause of a general disease, that is, of nerve or immune damage.

## Half-life

The half-life indicates the time after which half of the absorbed toxins are excreted again from the body; for example, it takes 11 years for dioxins and 18 years for mercury in the brain. The total excretion is several times longer, which is particularly important with regard of allergies.

Three causes are necessary before a person becomes ill by storage poisons:

1. Toxin, 2. Poison, 3. Poisons, 3. Allergies to toxins (Genetic defect, enzyme) or allergies to poisons 1 and 2. 1. Poison + 2. Poison + 3. Poison = Illness

The main damage is not done until it is grafted on top of a pre-damage, and poisons (or a third poison, or a high poison concentration) are responsible for a high toxic effect. Poison degradation disorders are gene defects, detoxification enzyme deficiencies or allergies to the storage poison. While individual causes remain unfulfilled for a long time, a disease occurs immediately after the last trigger.

They (toxins) travel via the nose directly into the brain and remain there. The inhaled poisons lead first to nerve damage, only later to immune damage.

Nerve damage is the forerunner of immune damage / cancer.

Slow poisoning damages the detoxification enzymes. Thus, the amount of glutathione-sulfur transferase present in the body is a measure of the compatibility of poisons.

The liver function and renal function, as well as the amount of the fat present in the body, are decisive for the extent of the organ storage.

Toxin degradation due to enzyme gene defect or allergy.

Numerous genetic poison degradation disorders are known (fast / slow acetylators, etc.). Enzyme defects can be congenital or acquired. Many storage poisons act mutagenically and lead to enzyme-gene defects. The best known is the disruption of the enzyme glutathione-S-transferase, which is very important for detoxification. The lower its activity, the less toxins the body can degrade, that is, the higher the effect. Experience has shown that only by getting rid of the storage of toxins the activity of the enzyme is activated again. However, supplementing glutathione or selenium which are required for its structure is detrimental.

Toxic metabolic disorders misleading as a mental illness.

An accurate diagnosis is therefore the best protection against discrimination. If the levels measured in the patient are below the officially recommended limits and the patient still complains about symptoms, he can be sent (without further clarification) to psychotherapy lasting several months.

The figures of the official limit values always refer to adult healthy men. Weak, old or sick persons are not taken into account when setting the limit values.

Formaldehyde metabolic disorder

Formaldehyde is degraded within 90 seconds after absorption in the blood. If a formaldehyde depot is present in the body (eg by passive smoking, root-filled tooth, etc.), the degradation enzymes such as, for example, glutathione-S-transferase are consumed and are no longer sufficient for the degradation of the acute formaldehyde intake. This results in the formation of toxic metabolic products for each formaldehyde intake. Such a formaldehyde degradation can be detected by passively smoking the patient for 20 minutes and then sending his urine (preserved in formic acid) to the TOX laboratory.

Allergy to storage poisons

Every chronic poisoning pre-disposes to allergy. If the allergen is additionally stored in the body, the allergy sufferer has a long period of suffering ahead. It can be shortened by a detoxification, but is always associated with an allergy shock.

Toxic Acid

The most dangerous form of poisoning is that of inhalation. It is transported into the brain via the nerve pathways of the head (retrograd) by-passing the detoxification function of the liver. The effect is greater by a factor of at least 1000 by comparison with other recording methods. Human beings are particularly sensitive when toxins are inhaled from interior

spaces.

The organism is extremely sensitive to nocturnal toxins because of the reduced metabolic activity (slowed down excretion). The poisoning is particularly treacherous via the skin, in particular if it happens through contaminated textiles (bed linen/ uniforms/ clothing) for a long time. The pulmonary intake is just as dangerous. Since the dangerous long-term toxins are always colorless and odorless in the concentrations leading to a poisoning, a warning sign is missing for humans.

### Chronic poisoning

There is no specific sign of a poison in any serious poisoning: the arsenic poisoned human dies from diarrhea, the mushroom eater from internal bleeding, the alcohol poisoned suffocates, the chain smoker dies from emaciation of his lung cancer. Evidence for chronic poisoning is the intake of toxins and, after a latency, an impairment of the organ function at the site of the pre-injury or a specific sensitivity; only by the reduction of toxic exposure an improvement of the organ can occur, before the individual latency period. At the end of the latency period, for example in the case of cancer, no improvement, only a breaking of the deterioration by complete exposure stop is possible. The sooner and more intensively this toxin exposure stop takes place, the clearer the health effect.

### Latency

After the first poisoning with the toxins, symptoms occur when the nervous and immune system collapses. The allergy to the storage poisons then determines the symptoms (see MCS)! Allergy sufferers react to toxins, mostly usually below the detection limit.

Allergy sufferers are usually poisoned. Inhaled, the allergens act on the brain. Most of the skin tests are useless. After inhalation in the special ,climatic' chamber, sensitive neurological tests must be carried out (EEG et al.).

### Frequency of disease

It is largely unknown, but at least 99%. The patient usually has to make the diagnosis for himself, as the doctor is without prior information and often only thinks of this diagnosis by chance. Clinical toxicology training is not usually available to physicians, and specialists from other disciplines do not see their work in the detection of toxins. Any toxin can make a person psychologically ill.

### Limit values

Toxins must not be detectable either in the private nor in the workplace in any concentration, in the organism. The current limit values do not take into account the weakest, ie the actual risk groups, and symbolize only industrial interests; they are not biological parameters. Limit values are only valid for healthy adults and only for individual poisons, never for allergic

persons. (How much alcohol can an alcoholic drink with liver cirrhosis?)

Who guarantees well-being at low dose body-burden of toxins?

Prognosis

If the amount of poison, the time of exposure and the previous, accompanying and secondary diseases were only in the medium range, the most important signs of illness can be restored. Reconstituted minimum concentrations of the poison or its interacting substances lead to a complete new outbreak of the disease, which can be life-threatening in cancer or aplasia of the bone marrow.

The frequency of the chronically poisoned dying is usually not higher compared to others, but they live with limited organ function and has less living enjoyment, and they suffer from nerve and immune disturbances.

Without the most important step, the exposure stop, any symptomatic action is doomed to fail. When the allergy typical for environmental toxins has been demonstrated, an improvement only occurs when the exposure to the poison is zero.

Summary:

- Environmental toxins are inhaled as allergens.
- All environmental toxins act as psycho-toxins.
- Their most serious consequence is the development of autoimmune diseases such as rheumatism, diabetes, MS.
- The removal of the cause is as important as prophylaxis.
- Disorder of the ability to solve one's own problems.
- Neck „stiffness“ (torticollis)
- Hormone Disorders
- Coordination Disorder
- Depression

Every chronically poisoned person is mentally ill, later, immune damage is added to the patient's body.

On the other hand, immune damages with nerve damage are only found in chronically

poisoned people.

We distinguish commercial and economic chronic toxic environmental poisoning. Those affected are obliged to use any opportunity to prevent or reduce commercial poisoning.

Since the release of poisons, according to § 330a, it has been punishable since 1980 and any possibility of prophylaxis should be used.

It is important that the diagnosis is confirmed by medical evidence.

In the case of mass poisonings, however, analogous closures suffice (*preponderance of evidence*). Since the poisoned person can never recognize the connection or even avoid it (all highly dangerous poisons are odorless and colorless), he is completely dependent on protection by the authorities or the legislature.

Entirely independent of the industry, this guarantee should be guaranteed.

### The Ten Deadly Sins of Toxicology

Ten "deadly sins" are wide spread in toxicology:

1. The failure to seek any particular effects at all
2. The use of unsuitable test methods
3. The unfavorable choice of the time of the examination
4. The insufficient exposure of the target organs with the substance to be investigated
5. The incorrect assessment of the experimental findings
6. The disregard of prejudices
7. The inability to record harmful effects correctly
8. The disregard for species studies
9. The disregard of anatomical specificities.
10. Incorrect conclusions from the animal to humans,

Above text/excerpts are taken from and translated by Bearnairdine Beaumont

