



NATURAL SOLUTIONS FOUNDATION

GDS Genome Disruption Syndrome

A Special Public Health Alert White ePaper

Prepared by the Trustees of the
Natural Solutions Foundation

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Genome Disruption Syndrome (GDS)

GDS

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Do I Have It?

Where Does It Come From?

What Can I Do About It?

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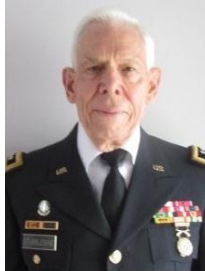
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Part I

Genomicidal Technologies: Weaponizing our Bodies against Our Survival



Maj. Gen. Albert N. Stubblebine III (US Army, Ret.)

President, Natural Solutions Foundation

***It*: Emerging and Deadly**

We are watching ***It***. We are all watching ***It***. Closely. The problem is that the definition of "***It***" is changing rapidly.

When the Natural Solutions Foundation was created in 2004, ***It*** was our access to clean, unadulterated food, clearly labeled as such, our right to access high potency supplements and our right to truthful information about food and food components.

It was the Globalist Eugenocidal Agenda for depopulation carried out through the degradation of the world's food supply (Enter Codex along with Big Agribiz, Big Chema and Big Biotech) and dangerous, damaging medications (Hello, Big Pharma and Big Medical!) and vaccines. See Dr. Rima's extraordinary video about the Eugenocidal Agenda here http://www.youtube.com/watch?v=gWmVtn5JsA&feature=player_embedded.

By 2009 ***It*** was expanding to include fake pandemics to be triggered by weaponized and deadly vaccines -- truly a genome-disrupting technology.

By 2010 ***It*** was the impending Federal Food Control law and the criminalization of unapproved speech about food and food components... the Nation State controlling nutrients and medicine, plus all of the above, of course.

It has been, for decades, the increasing regulatory restrictions and hostility toward health freedom, natural options and natural information.

It was the increasing crony partnership of Big Business and Big Government until, finally, we have reached the state Mussolini defined as "Fascism" — the merger of corporate and state interests and structures. The problem is, of course, that Il Duce thought that it was a good thing, and so, apparently,

does the current US Government, no matter which nominal party is in "power." This is clearly shown by the power Big Pharma and Big Agribiz wield over the FDA and USDA.

But now *It* has morphed, changed, defined itself anew. In addition to those threats and assaults, (and, sadly, they are all still with us – and “on steroids” compared to where they were when Dr. Rima and I closed our practice of drug free medicine and psychiatry to take on this work back in 2004.

Now there are bigger, more dangerous and far more hidden *Its* that threaten the sanctity of the Genomes of Life on Earth... the threat of Genomicide and the threats to the lives and health of each of us...

You know the first of those threats, the big *It* of Genetically Modified Organisms – GMOs – which have the ability to infest the very DNA of our bodies. See: <http://tinyurl.com/No2GMO>.

But now there is an even more immediate threat to the Genome

Fukushima

March 11, 2011: the Day That Changed Everything

The disaster at the six Fukushima nuclear power plants will haunt this planet for millenniums to come. The Japanese government has announced official censorship to make sure that nothing it does not want you to hear is audible. In other words, their official balsamic lies, their assurances that “there is no danger to human health” — that people should not, and must not know that there is a continuing and, daily, nightly, minute by minute-ly, escalating danger to you and me and future generations, to life on this planet. What they have admitted is that it will take 6 to 9 months to eventually get the disaster under control... though with massive air, ground and ocean water contamination, I believe that to be a false hope. See: <http://tinyurl.com/FukushimaRisk>.

And so the bureaucracy, corporate and government *lie* to protect their positions. Examples: the EPA increasing the “standards” for radioactive I131 in milk and drinking water and then ending their program to monitor these clear and present dangers; the FDA declaring that it will not monitor radiation in Pacific ocean fish reaching the West Coast (and all US) markets... sticking our collective head in the sand does not make *It* go away. The cover-ups just make the reckoning that much more horrendous.

Do you believe that “ignorance is bliss”? That the Big Lie is better than the Truth? Quite the contrary. Thinking people want to know the Truth so they can prepare. In this situation, “Be Prepared” is good policy!

Arnie Gunderson, for example, of Fairewinds Associates, whose videos we post regularly, and who was her guest on the Dr. Rima Reports on May 8, 2011, lets the numbers speak for themselves. Dr. Lauren Motet lets the numbers speak for themselves. So do all of the other truth tellers discussing radiation.

Dr. Rima Truth Reports is on every Sunday morning, 10 AM to 12 Noon Eastern. Listen and join the live chat here: www.HealthFreedomPortal.org.

The plain and simple truth is that whether the Canadian and US governments take their radiation detectors off line or not; whether or not the FDA/EPA cabal changes the level of "safe" contamination;

whether or not the Canadian government decides to shut down their radiation monitors around Vancouver and move them inland to Kamloops so that the workers and equipment would not be contaminated by high levels of radiation (!); whether or not the Japanese government engages in the requisite "no hazard to health" cover-up, **It** is now whether or not where *you* live is habitable, whether *your* food is safe or not, whether *your* milk, drinking water, bathing water, food processing water, candy, flour, drugs, coffee, veggies, baby food, organic products, food from your own gardens and so on are contaminated or not, and to what degree if they are.

What measures are you taking, can you take, can the government take "for" you, should you take, to prevent as much damage as you can from this disastrous contamination which WILL go on and on and on and on, regardless of any censorship? Please see Dr. Rima's web page on Natural Solutions to Radiation Exposure at <http://tinyurl.com/radprotect> for some suggestions and important resources.

And what are you, your neighbors, your government and your church and other NGOs doing to prevent the continued spread of the two most dangerous technologies on the planet: nuclear power and genetic manipulation, the two technologies which can, and inevitably WILL, end life on this planet unless we, as individuals and as a mass movement, say **NO MORE GENOMICIDE!**

No more nuclear power, no more GMOs. Not here, not in MY backyard. Because what Fukushima teaches us is that "It" IS ALL our back yard.

My genes, your genes, my garden, your garden, my thyroid, your thyroid, my back yard, your backyard, that is, in essence **It!**

Do we survive? Do we allow ourselves through apathy, ignorance and manipulation, to be so separated from our own birthright of survival and health that we allow these madmen to kill our planet?

The Genomicidal Technologies

- Weaponized Pathogens (like the fake avian & swine flu "pandemics" or the new super-*e. coli* with inserted **plague** DNA)
- Weaponized "Phude" (fake food — dangerous GMOs & degraded organic standards; the "fruit" of **Codex Alimentarius**)
- Weaponized Vaccines (& Other Drugs) with their childhood-destroying toxins, and
- Weaponized Environment (radioactive [Fukushima] & toxic, in a vile synergistic mix)
- Weaponized Aerial Spraying ("Chemtrails") long denied, now admitted to be a government program to "modify" the weather with tiny particles of heavy metals, synthetic DNA and worse.

All of this Leading to Genocide via Genomicide...

**You decide
You decide whether you become an advocate for
life or a passive recipient of death...
That's *IT!***

Part II

A Brief Introduction to Genetic Disruption

Maj. Gen. Albert N. Stubblebine III (US Army, Ret.)
President, Natural Solutions Foundation

genome or genom ('dʒi:nəʊm) — *n* 1. the full complement of genetic material within an organism
2. all the genes comprising a haploid set of chromosomes [C20: from German *Genom*, from *Gen* gene + (chromos) ome] **genom or genom** — *n* [C20: from German *Genom*, from *Gen* gene + (chromos) ome]
genomic or genom — *adj*¹

I am writing this not as a physician like Dr. Rima, our Medical Director, or as a lawyer like Ralph Fucetola, JD, our Legal Counsel. My background is as a career Military Intelligence strategist and analyst with a Master's Degree in Industrial Engineering from Columbia University.

I am used to looking at complex systems and determining how they work and how they fail. In the case of Military Intelligence, of course, part of that specialization was determining how the systems on the other side could be MADE to fail. So when I see a system under attack so that it will fail, I am uniquely equipped to recognize and understand that assault, hidden though it may be. I am also qualified to devise counter measures. This White ePaper is the result of those perceptions and qualifications.

The system under attack? Your genome: all of your genes, your DNA, your cellular past, your biological present and your genetic future.

Today, yesterday and, increasingly, tomorrow, our most precious and vulnerable system, our DNA, is being, quite literally, destroyed. Technologies are being deployed which have the intentional impact of destroying your DNA and the unintended consequence of genomic disruption and destruction as well. Taken together they represent a combination of greed, hubris, scientific myopia and genocidal intent which must be understood, controlled and halted if we, as a species, and as individuals of that species, are to survive.

Please understand that I am not speaking metaphorically, nor am I speaking lightly. I take very seriously, and you should as well, the grave intent (no jest intended here) of those powerful people and organizations who have decided that you and I are not welcome on "their" planet. Creating a closet-full of boogie men myths like

- "Overpopulation"^{2, 3, 4},
- "Sustainability" as a rationale for population reduction^{5, 6, 7, 8, 9}
- Genetically Modified Organisms (GMOs) as safe^{10, 11, 12} and necessary to feed the teeming masses

¹ <http://biotech.about.com/od/faq/f/genesdiscovered.htm>

² <http://overpopulationisamyth.com/>

³ <http://www.pop.org/projects/debunk-overpopulation-myth/>

⁴ http://www.americanthinker.com/blog/2011/10/seven_billion_people_over-population_or_birth_dearth.html

⁵ http://www.un.org/esa/dsd/agenda21/res_agenda21_00.shtml

⁶ <http://www.youtube.com/watch?v=mtLxhcybUQc>

⁷ <http://www.radioliberty.com/pca.htm>

⁸ <http://www.bbc.co.uk/news/magazine-15449959>

⁹ <http://www.healthfreedomusa.org/?p=322>

- Nuclear Power as a safe, cheap technology
- Contaminated “PHUDE” as safe for human consumption and capable of sustaining health

Not many years ago, the word “Genome” was used only by geneticists and other technical specialists. Today, the concepts of genes, DNA, and genome are part of our everyday vocabulary. But that everyday knowledge carries with it simplistic assumptions which, although widely believed, we know now are totally inaccurate.

Genes instruct (‘code for’) the cell to assemble proteins. Recently we have come to understand that instead of the simple “one gene, one enzyme/protein” system scientists believed in for many years¹³, the position and condition of one gene in relationship to all the others near it has a profound impact on genetic function and which proteins are produced when a gene is “switched on” or “switched off”. The geometry and architecture of the genome has evolved to a precise function over long periods of time, and with great specificity.¹⁴ The process by which genes instruct impact, turn on or turn off others is called “epistasis” and, as Dr. Ingrid Lobo says, “Understanding epistatic interactions may be the key to understanding complex diseases, such as Alzheimer's disease, diabetes, cardiovascular disease, and cancer.”^{15, 16, 17}

Scientists are beginning to understand that epistasis is everywhere in biology although it has been neglected in the study of complex traits.^{18, 19} In fact, we are beginning to understand clearly that genes do not function alone but constantly interact with one another. These biological interactions are critical for gene function in physiological and developmental pathways.^{20, 21}

When you disrupt genes through free radical generation, toxic contamination, foreign genes which disrupt signaling and code for new proteins (many of which have never existed before) or otherwise interfere with the genome and its functioning, the result is, quite simply, genetic mayhem.

Here is a very partial list of what happens when genes are disrupted:

- Birth Defects
- In-Utero Deaths
- Multiple Sclerosis
- Lethal/Clinically Significant Allergies
- Cancer
- Asthma
- Cardiovascular Disease
- Obesity

¹⁰ <http://read.uberflip.com/i/62166>

¹¹ <http://www.i-sis.org.uk/GMDangerousFutile.php>

¹² http://www.organicconsumers.org/articles/article_11361.cfm

¹³ http://www.accessexcellence.org/RC/AB/BC/One_Gene_One_Enzyme.php

¹⁴ <http://www.ncbi.nlm.nih.gov/pubmed/19335619>

¹⁵ <http://www.nature.com/scitable/topicpage/epistasis-gene-interaction-and-the-phenotypic-expression-907>

¹⁶ <http://www.nature.com/scitable/topicpage/epistasis-gene-interaction-and-the-phenotypic-expression-907>

¹⁷ http://www.eaglecanyonwellness.com/old/docs/The_DNA_Overlay.pdf

¹⁸ Moore, J. H. The ubiquitous nature of epistasis in determining susceptibility to common human diseases. *Human Heredity* **56**, 73–82 (2003)

¹⁹ Carlborg, O., & Haley, C. S. Epistasis: Too often neglected in complex trait studies? *Nature Reviews Genetics* **5**, 618–625 (2004) doi:10.1038/nrg1407

²⁰ Moore, J. H., Loc. Cit.

²¹ Greenspan, R. J. The flexible genome. *Nature Reviews Genetics* **2**, 383–387 (2001) doi:10.1038/35072018

- **Endocrine Disruption**
- **Auto Immune Diseases**
- **Diabetes**
- **Alzheimer's Disease**
- **Compromised Immune Functioning**
- **Clotting Disorders**
- **Arthritis and Other Inflammatory Disorders**
- **Premature Puberty in Young Children**
- **Feminization of Males in Utero and Later in Life**
- **Low Sperm Count**
- **Infertility**
- **Sterility**

The Trustees of the Natural Solutions Foundation believe that the epistasis induced by the widespread and dangerous genotoxic technologies is, in fact, responsible for the varied disorders seen in GDS. And we believe that in addition to treating the GDS condition in each patient through natural, wholesome and non-toxic means (indeed, abundant scientific and clinical experience shows these are the only type of approaches that actually work to mitigate or reverse the conditions of disordered gene expression), it is equally vital to eliminate the causes of this genetic disruption.

For that reason, the Trustees focus on both the causes and the solutions to them. Chief among them, as with any toxin, is avoidance: NO vaccines, NO drugs except in limited emergency situations, NO GMOs under any circumstances, NO nuclear power, NO chemtrails, NO food grown, produced, stored or treated with known toxins. That avoidance must be through personal decisions about what you allow in your body and collective action about what we allow to happen to our environment.

The focus of this White ePaper is to examine the profound and widespread physical, genetic and medical effect that epistasis, induced by the technologies which alter our genes, damage them and change their function:

- **Drugs and vaccines**
- **GMOs**
- **Contaminated "industrial" food grown, produced and preserved with toxic chemical**
- **Nuclear reactors**
- **Chemtrails**

Apologists for the genotoxic technologies poo-poo our genetic susceptibility to their deadly technologies or who do not understand much about gene function try to dismiss the dangers of their profitable enterprises by asking "Why don't we all get sick in the same way if we are exposed to the same toxins?" Bear with me while I briefly discuss "expressivity" and "penetration".

How much of a genetic trait is expressed in a given individual ("expressivity") and how many people in the population have a particular genetic trait ("penetration") are impacted by environmental factors in complex ways [epistasis again – General Stubblebine] with long lasting consequences for the individual and off spring – if there are any.²²

²²http://www.merckmanuals.com/professional/special_subjects/general_principles_of_medical_genetics/factors_affecting_gene_expression.html

In fact, we now understand that the action of your genome and mine is far more complex, and therefore, far more vulnerable to influences originating **outside** of you or me, than we previously imagined possible. For example, **“The expression of genes in an organism can be influenced by the environment** [emphasis added – General Stubblebine], including the external world in which the organism is located or develops, as well as the organism's internal world, which includes such factors as its hormones and metabolism. One major internal environmental influence that affects gene expression is gender, as is the case with sex-influenced and sex-limited traits. **Similarly, drugs, chemicals, temperature, and light are among the external environmental factors that can determine which genes are turned on and off, thereby influencing the way an organism develops and functions.**”²³ [emphasis added – General Stubblebine]. Two examples will make the point clear:

1. **One Eyed Fish:** In 1907, researcher C. R. Stockard grew fertilized fish eggs (*Fundulus heteroclitus*) in a mixture of seawater and magnesium chloride. Half of the embryos became Cyclops, fish with only one eye. The other half developed into normal fish with two eyes.²⁴
2. **Blindness in Premature Infants:** Supplemental oxygen for premature babies became a widespread practice in the 1940s.²⁵ By 1953, 10,000 babies born with normal eyes had developed a new and mysterious disorder, Retinopathy of Prematurity (ROP) resulting in permanent blindness. Supplemental oxygen was identified in 1954 as the responsible factor.²⁶

Environmental toxins can change the expression of genes from, for example, those that code for male animals to those that code for female ones.^{27, 28} What that means for human health and reproduction is that the very gender of our offspring, a core genetic expression, is altered and interrupted by chemicals in our food, wrappers, rivers, lakes, milk, meat and baby bottles. Sperm counts drop. Testicles do not develop. Boys grow breasts. Girls go into puberty when they are still toddlers in some places and menstruate while young children. Their bones stop growing and they are stunted making birth difficult if they can conceive. And on and on and on.

Genetic disruption through genocidal technologies, intended or not, cannot be permitted to go unchecked. The only antidote for the problem at its source is our activism and action.

Thank you for joining the Trustees of the Natural Solutions Foundation in focusing on this life and death issue

²³ <http://www.nature.com/scitable/topicpage/environmental-influences-on-gene-expression-536>

²⁴ Stockard, C. R. The influence of external factors, chemical and physical, on the development of *Fundulus heteroclitus*. *Journal of Experimental Zoology* **4**, 165–201 (1907)

²⁵ Too little oxygen results in genetic changes leading to a higher rate of brain damage and mortality in premature infants. Even today, the optimal amount of oxygenation necessary to treat premature infants while completely avoiding these complications is still not clear.

²⁶ Silverman, W. A. A cautionary tale about supplemental oxygen: The albatross of neonatal medicine. *Pediatrics* **113**, 394–396 (2004)

²⁷ http://www.eurekalert.org/pub_releases/2010-10/uoer-rp102610.php

²⁸ <http://ehp03.niehs.nih.gov/article/fetchArticle.action?articleURI=info%3Adoi%2F10.1289%2Fehp.1002555>

Part III

Genome Disruption Syndrome: Definition, Diagnosis, Treatment and Correction



Rima E. Laibow, MD

Genes instruct cellular mechanism to build (“code for”) proteins. Those proteins, in essence, determine the physical and functional realities of your reproduction, life, health and disease.

When our genes are interacting and functioning correctly, we are both alive and healthy. But if their complex, incredibly delicate, metabolic and information dance is disrupted by factors outside our ability to compensate for, such as:

- Radiation (‘nuclear’ or ‘ionizing’ radiation) from nuclear power plants like Fukushima Daiichi^{29, 30}, Indian Point (Buchanan NY)³¹, Diablo Canyon (St. Louis Obispo CA)³² and the rest of the aging, and failing, nuclear reactors in the US
 - Of the 104 nuclear plants in the United States, 101 are 20 or more years old.³³
 - Another Fukushima in the US is virtually assured.³⁴ The date remains to be known.
- Toxic chemicals/drugs in our food, water and air
- Foreign genes or gene fragments like those inserted into us through vaccination^{35, 36, 37}
- Genetically engineered viral and other plagues which disrupt our immune system, reproduction and ability to survive^{38, 39, 40, 41}
- Free radicals from
 - Chemicals in food, food preparation, preservatives and food packaging
 - Environmental toxins
 - Heavy metals

²⁹ <http://www.prweb.com/releases/2012/5/prweb9498292.htm>

³⁰ <http://www.bloomberg.com/news/2012-05-24/fukushima-s-estimated-radiation-leak-doubles-versus-government.html>

³¹ http://en.wikipedia.org/wiki/Indian_Point_Energy_Center

³² <http://www.aljazeera.com/programmes/peopleandpower/2012/02/2012222134934495461.html>

³³ <http://www.nrc.gov/reactors/operating/map-power-reactors.html>

³⁴ Private Communication with former CEO of world’s second largest nuclear engineering corporation. Name withheld by request.

³⁵ <http://vactruth.com/2012/08/09/gardasil-rdna-coroners-inquest/>

³⁶ <http://www.fda.gov/BiologicsBloodVaccines/Vaccines/ApprovedProducts/ucm276859.htm>

³⁷ <http://vonhabsburg.homestead.com/vaccinesalterdna.html>

³⁸ <http://www.aaas.org/news/releases/2005/1005flu.shtml>

³⁹ http://www.bibliotecapleyades.net/ciencia/ciencia_virus08.htm

⁴⁰ <http://foodfreedom.wordpress.com/2011/02/20/roundup-new-pathogen/>

⁴¹ <http://farmandranchfreedom.org/huber-european-letter>

- Radiation
- Cigarette Smoke
- Heavy/toxic metals including
 - Mercury (e.g., from vaccines and dental fillings, etc.)
 - Aluminum (e.g., from vaccines, water treatment, food containers, Chemtrail aerial spraying, etc.)
 - Fluoride (e.g., from dental procedures and toothpaste, water treatment, psychiatric and other drugs, non-stick cooking surfaces, etc.)⁴²
 - Beryllium (e.g., Chemtrail spraying, etc.)
 - Arsenic (commercially raised poultry, Chemtrail spraying, etc.)

Your genes comes from your mother (who contributed all of your X chromosomes at your conception if you are a male) and your father (who either contributed the rest of your X chromosomes if you are a female, and therefore have two X chromosomes in each nucleus of your cells, or contributed your Y chromosomes if you are a male). Your mother made another genetic gift to you: all of the chromosomes of the tiny embedded energy machines, called 'mitochondria'^{43, 44, 45} which power your cells and provide the energy to keep you alive come only from your maternal ancestors.⁴⁶

To make matters more complicated, there is a complex, and as yet, poorly understood, communication and control relationship between your mitochondrial genes and those in the nucleus of your cell.⁴⁷ They talk to one another and control the reproduction of each other – sometimes, in some ways, under some conditions.

Chromosomes, whether in your cells' nucleus or in your mitochondria, are densely packed information libraries carrying genes which code for proteins. At the simplest level of function, each gene is functional on its own, coding for a single protein (at least in a laboratory). In real life at the cellular level, however, genes function as part of a multilayered library with complexities that seem almost magical. Imagine a library in which, unlike the books on my shelves and yours, the books change their contents based on what is going on around them. In this amazing library, the book you want to read, the book next to it, and the one on the shelf above it, and the one three books down on the right, all change what they says when you open them to access the data inside the books. To make matters more complicated, the wood your shelf is built out of, the color it is painted, the amount of light and the temperature of the room will alter what the book tells you, too.

If you put another book next to it, or repaint the shelf another color, what the book tells you the next time you open it will be different. So imagine what happens when foreign DNA from a bite of GMO food, or a sting from a GMO mosquito^{48, 49, 50}

When mitochondrial DNA is disrupted, a long, and growing, laundry list of disorders can result, including:

⁴² Aluminum and Fluoride are synergistically toxic: that is, their combined toxicity is more than the toxicity of each of them without the other.

⁴³ <http://www.ncbi.nlm.nih.gov/pubmed/7762568>

⁴⁴ http://learn.genetics.utah.edu/content/extras/molgen/mito_dna.html

⁴⁵ <http://www.plosgenetics.org/article/info%3Adoi%2F10.1371%2Fjournal.pgen.1000047>

⁴⁶ In rare cases, paternal mitochondrial DNA may be transmitted although the vast bulk of mitochondrial DNA in humans, unlike bivalves, is maternal. Ladoukakis ED, Eyre-Walker A (October 2004). "Evolutionary genetics: direct evidence of recombination in human mitochondrial DNA". *Heredity* **93** (4): 321. doi:10.1038/sj.hdy.6800572. PMID 15329668

⁴⁷ <http://www.plosone.org/article/info%3Adoi%2F10.1371%2Fjournal.pone.0030943>

⁴⁸ http://www.naturalnews.com/034943_genetically_modified_mosquitoes_Florida_disease.html

⁴⁹ <http://science.howstuffworks.com/environmental/life/genetic/gm-mosquito.htm>

⁵⁰ <http://news.sciencemag.org/scienceinsider/2010/11/gm-mosquito-trial-strains-ties.html>

When nuclear DNA is disrupted, there is another emerging list of disorders which afflict us. When their interaction is disrupted, yet another group of disorders manifest.

Some of us are born with either simple or complex genetic defects which make themselves known either before birth through genetic testing (e.g., Trisomy 21 or “Downs Syndrome”, which occurs in 1 live birth out of 800).⁵¹ Some are born with susceptibilities to later expression of disease (e.g., 9-17% of children who develop Wilm’s Tumor, a malignant kidney tumor, have genetic defects which predispose them to the development of this type of cancer⁵²) while the same disease can develop in people without these defects under the assumption that the acquisition of acquired defects lead to the same changes which the inborn ones create (in the case of Wilm’s Tumor, accounting for 83-91% of all cases).⁵³

Some of us are born with not with a genetic predisposition to a condition but, because of the impact of single or multiple changes in our genetic material, we acquire that tendency. Acquired mutations and aberrations account for the astonishing increase in chronic, degenerative diseases in a short span of time.

Breast cancer, the leading cancer-related cause of death in women. In 2008, for example, there were an estimated 1.38 million new cases and 458,000 deaths from this cause alone.⁵⁴ Breast cancer is, in reality, a common term for a widely varied group of malignant tumors caused by diverse genetic, and therefore, molecular, changes. The response to conventional chemotherapy and radiation treatment is strongly dependent on these genetic and molecular differences^{55, 56, 57} with a long list of aberrations, alterations, mutations, copy number alteration, amplifications and gene rearrangements, with the list growing longer every day.^{58, 59, 60, 61, 62}

The effect, of course, is not unique to breast cancer. In fact, although the mutation rate in breast cancer is greater than that seen in blood-related malignancies such as (leukemia) and prostate cancer, it is significantly lower than in lung cancer and melanoma, for example.^{63, 64, 65, 66, 67}

⁵¹http://www.medicinenet.com/down_syndrome/article.htm#what_is_down_syndrome

⁵² Segers H, Kersseboom R, Alders M, Pieters R, Wagner A, van den Heuvel-Eibrink MM, [Frequency of WT1 and 11p15 constitutional aberrations and phenotypic correlation in childhood Wilms tumour patients](#). Eur J Cancer. 2012 Jul 13. [Epub ahead of print] <http://www.ncbi.nlm.nih.gov/pubmed/22796116>

⁵³ Ibid

⁵⁴ Jemal, A. *et al.*, Global cancer statistics. CA Cancer J. Clin. 61, 69–90 (2011)

⁵⁵ Sørlie, T. *et al.* Gene expression patterns of breast carcinomas distinguish tumor subclasses with clinical implications. Proc. Natl Acad. Sci. USA 98, 10869–10874 (2001)

⁵⁶ Chin, K. *et al.* Genomic and transcriptional aberrations linked to breast cancer pathophysiologies. Cancer Cell 10, 529–541 (2006)

⁵⁷ Gatz, M. L. *et al.* A pathway-based classification of human breast cancer. Proc. Natl Acad. Sci. USA 107, 6994–6999 (2010)

⁵⁸ King, C. R., Kraus, M. H. & Aaronson, S. A. Amplification of a novel *v-erbB*-related gene in a human mammary carcinoma. Science 229, 974–976 (1985)

⁵⁹ Sjöblom, T. *et al.*, The consensus coding sequences of human breast and colorectal cancers. Science 314, 268–274 (2006)

⁶⁰ Wood, L. D. *et al.* The genomic landscapes of human breast and colorectal cancers. Science 318, 1108–1113 (2007)

⁶¹ Shah, S. P. *et al.* Mutational evolution in a lobular breast tumour profiled at single nucleotide resolution. Nature 461, 809–813 (2009)

⁶² Ding, L. *et al.* Genome remodeling in a basal-like breast cancer metastasis and xenograft. Nature 464, 999–1005 (2010)

⁶³ Kan, Z. *et al.*, Diverse somatic mutation patterns and pathway alterations in human cancers. Nature 466, 869–873 (2010)

⁶⁴ Berger, M. F. *et al.*, The genomic complexity of primary human prostate cancer. Nature 470, 214–220 (2011)

⁶⁵ Chapman, M. A. *et al.*, Initial genome sequencing and analysis of multiple myeloma. Nature 471, 467–472 (2011)

⁶⁶ Pleasance, E. D. *et al.*, A comprehensive catalogue of somatic mutations from a human cancer genome. Nature 463, 191–196 (2010)

⁶⁷ Pleasance, E. D. *et al.*, A small-cell lung cancer genome with complex signatures of tobacco exposure. Nature 463, 184–190 (2010)

Although gene-targeted therapies are emerging as potential candidate resources for treatment of specific genetic changes, the more profound, and more fundamental, approach to GDS is to provide the necessary conditions for repair of the entire system, including, but not limited to, those genetic aberrations or changes which, acquired through contamination, irradiation, the introduction of biological agents via injection or ingestion or damaging frequency and energy fields (e.g., EMF pollution).

Many anti-aging, anti-cancer, pro-health treatment procedures, protocols and products appear to offer their remarkable successes through remediation of genetic aberration, not at a single locus or gene point, but throughout large segments of the disordered genome, making GDS treatments less specific, more successful and less toxic than pharmaceutical treatments. This global enhancement of genomic function and return to structural integrity at the genomic level is a characteristic of natural treatments, along with their safe and gentle mechanisms of action although their specific genomic, sub-cellular and cellular functions are often studied separately from each other.

Natural, non-toxic repair mechanisms are powerful, vital options. Resveratrol, for example, is a potent natural agent which down regulates genetic error expression. For example, in a study in which thousands of genes were examine in breast cancer cells, “genes of mismatch repair, DNA replication, homologous recombination (HR), and cell cycle were strongly inhibited.”⁶⁸

Other studies show that resveratrol actually up-regulates two important genomic repair and longevity genes, SIRT1 and PGC-1α. In addition, it actually improves functioning of the mitochondria on a systemic basis⁶⁹.

The list of conditions and diseases caused by genomic disruption grows longer every day. But each of these apparently unrelated disorders, from the so-called “Inborn Errors of Metabolism” or “Inborn Metabolic Diseases” through birth defects, fetal death, neurological, immunological, cardiovascular, cancer, arthritis, autism, and so on, is, in reality, a downstream diagnosis of an underlying common cause: disruption of the communication system and function of the genome: Genome Disruption Syndrome.

Thanks to the pioneering work of Leslie Carol Botha, the little-known hazards presented by foreign, naked, or recombinant DNA injected into the body is becoming better known. She focuses in her excellent article⁷⁰ on the genomic contamination and disruption created by the practice of vaccination with foreign DNA contained within it.

The increasingly prevalent practice of numerous vaccinations throughout the life span contaminates the genome in a manner not yet widely known: since many vaccines contain DNA fragments from the culture medium in which they are produced (e.g., eggs, human fetal cells, monkey kidney cells, human albumin, etc.) or from the bacteria and viruses used in their manufacture against which protection is supposedly offered (e.g., measles, rotavirus, HPV, etc.), genetic microcompetition⁷¹ compromises normal genetic expression of the genome even if no mutation is actually induced.^{72, 73}

⁶⁸ <http://www.ncbi.nlm.nih.gov/pubmed/22644231>

⁶⁹ <http://www.godlikeproductions.com/forum1/message531934/pg1>

⁷⁰ <http://holyhormones.com/womens-health/cancer-womens-health/cervical-cancer/unveiling-the-culprit-is-foreign-dna-contamination-the-autistic-villain-behind-biologic-vaccine-injuries/>

⁷¹ Polansky, H, *Microcompetition with Foreign DNA and the Origin of Chronic Disease*, Center for the Biology of Chronic Disease (CBCD)

⁷² <http://holyhormones.com/womens-health/cancer-womens-health/cervical-cancer/unveiling-the-culprit-is-foreign-dna-contamination-the-autistic-villain-behind-biologic-vaccine-injuries/>

Genomic disruption can either be targeted with emerging drugs or impacted systemically with natural products which are inexpensive, plentiful and therefore inexpensive.⁷⁴ One example of a widely available, safe, efficient and gentle system-wide genome restoration substance out of many will suffice: resveratrol.

Like other natural genomic rehabilitation products, resveratrol exerts its health-enhancing effects throughout the genome, positively impacting mitochondrial and somatic [cell] DNA. Enhanced immune function, DNA function, longevity, resistance to disease, sperm production and reproductive capacity, cardiac function, neurological function and more follow systemic genomic repair.^{75 76 77 78 79 80 81 82}

This foreign, or recombinant, DNA has been identified as a biohazard by the American Biologic Safety Association (ABSA). They outline specific directives for the handling of such contaminants.⁸³

Foreign DNA fragments ("N-boxes") can cause disease when they enter the body since they migrate to the cell's nucleus, attracting scarce genetic resources between foreign N-boxes and human N-boxes. This competition for resources leads to genome functional disruption seen post-vaccination.⁸⁴

Dr. Hanah Polansky discovered that foreign DNA fragments called N-boxes can cause disease. When these foreign DNA fragments enter the body (naturally, or artificially, like through an injection of a vaccine or other treatments), they end up in the cell's nucleus, where they attract scarce genetic resources. The "microcompetition" between the foreign N-boxes and the human N-boxes cause the human genes to malfunction, which, in turn, can lead to disease.

Ms. Botha cites a report by the Coalition of Vaccine Safety [Coalition of Vaccine Safety](#) "...The presence of dormant and relict viral sequences in the human and other animal genomes has been known for at least

⁷³ Rotondo S, Rajtar G, Manarini S, Celardo A, Rotillo D, de Gaetano G, Evangelista V, Cerletti C (April 1998). "[Effect of trans-resveratrol, a natural polyphenolic compound, on human polymorphonuclear leukocyte function](#)". *Br. J. Pharmacol.* **123** (8): 1691–9.

⁷⁴ Kopp P (June 1998). "Resveratrol, a phytoestrogen found in red wine. A possible explanation for the conundrum of the 'French paradox'?" *Eur. J. Endocrinol.* **138** (6): 619–20.

⁷⁵ Ferrero ME, Bertelli AE, Fulgenzi A, Pellegatta F, Corsi MM, Bonfrate M, Ferrara F, De Caterina R, Giovannini L, Bertelli A (December 1998). "Activity in vitro of resveratrol on granulocyte and monocyte adhesion to endothelium". *Am. J. Clin. Nutr.* **68** (6): 1208–14.

⁷⁶ Haider UG, Roos TU, Kontaridis MI, Neel BG, Sorescu D, Griendling KK, Vollmar AM, Dirsch VM (July 2005). "Resveratrol inhibits angiotensin II- and epidermal growth factor-mediated Akt activation: role of Gab1 and Shp2". *Mol. Pharmacol.* **68** (1): 41–8.

⁷⁷ Wang Z, Chen Y, Labinsky N, Hsieh TC, Ungvari Z, Wu JM (July 2006). "Regulation of proliferation and gene expression in cultured human aortic smooth muscle cells by resveratrol and standardized grape extracts". *Biochem. Biophys. Res. Commun.* **346** (1): 367–76.

⁷⁸ Poussier B, Cordova AC, Becquemin JP, Sumpio BE (December 2005). "Resveratrol inhibits vascular smooth muscle cell proliferation and induces apoptosis". *J. Vasc. Surg.* **42** (6): 1190–7.

⁷⁹ Duffy SJ, Vita JA (February 2003). "Effects of phenolics on vascular endothelial function". *Curr. Opin. Lipidol.* **14** (1): 21–7.

⁸⁰ Wallerath T, Deckert G, Ternes T, Anderson H, Li H, Witte K, Förstermann U (September 2002). "Resveratrol, a polyphenolic phytoalexin present in red wine, enhances expression and activity of endothelial nitric oxide synthase". *Circulation* **106** (13): 1652–8.

⁸¹ Wallerath T, Deckert G, Ternes T, Anderson H, Li H, Witte K, Förstermann U (September 2002). "Resveratrol, a polyphenolic phytoalexin present in red wine, enhances expression and activity of endothelial nitric oxide synthase". *Circulation* **106** (13): 1652–8.

⁸² Olas B, Wachowicz B (August 2005). "Resveratrol, a phenolic antioxidant with effects on blood platelet functions". *Platelets* **16** (5): 251–60.

⁸³ [Risk Classification Criteria for World Health Organization, Australia, Canada, European Union \(EU\), USA CDC/NIH and NIH for RDNA.](#)

⁸⁴ <http://www.prweb.com/releases/2012/4/prweb9359508.htm>

20 years. These include human retroviral sequences that have been identified in live viral vaccines grown in human cells.⁸⁵ The report goes on to state,

“Victoria and colleagues have identified the contamination of live viral vaccines for use in healthy children, with viral nucleic acids; the findings have since been confirmed by the [vaccine](#) manufacturers and the data reported to the [FDA](#). Contaminating nucleic acids include retroviral sequences from the producer chicken and primate cells. Specifically, Avian leucosis virus (ALV) was present as RNA in viral particles while simian retrovirus (SRV) was present as genetically defective DNA. *Rotarix*, an orally administered rotavirus vaccine, contained nucleic acids from porcine circovirus-1 (PCV1), virus. Since this report, a second rotavirus vaccine (*RotaTeq*) has been shown to contain nucleic acids from both PCV1 and PCV2, a pathogen in pigs that is associated with wasting and immunodeficiency.”⁸⁶

Genomic distortion and disruption are thus inevitable consequences of vaccination. Whether disease manifests itself, why and why not, opens critically important issues.

We All Have Similar Genes. Why Don't We All Have Similar Problems?

Health and illness are more than the expression of our genes. If we examine 10 patients with diabetes (a manifestation of GDS)^{87, 88, 89} all of whom require the same care and are similar in every other way we can measure, some will have perfect vision, kidney and circulatory function without any peripheral nerve problems or pain. Some will have each of those problems and others, as well. Epistasis, genetic susceptibility, the impact of diet⁹⁰, mental images and the biological ability to detoxify and carry out cellular repair will determine what symptoms they will show during the course of their lives, although all 10 have clinically similar diabetes, at least according to laboratory and other diagnostic tests.

Life on earth has contended with toxic substances and radiation since there WAS life on earth. Small differences in genetic material, which we really do not understand very well yet, result in huge differences in constitution, form, function, intelligence and the ability to repair our cells and genes when they are damaged. Those differences result in different susceptibility and paths of expression of challenges, diseases and disorders. Of course, the physical and functional impact of thought, feeling and deep belief on the function of the DNA is also a factor now being validated by science^{91, 92, 93, 94}

Conditions, nutritional, thermal, radiation and others, have both offered some organisms the opportunity to thrive and killed many more. Whether through the Divine Hand or random operation, genes have responded to their environments first by **becoming** genes and then developing functional relationships with each other and with the environment.

But ancient systems for low-level, pre-industrial contamination can be rapidly overwhelmed by high levels of chemical, radiologic, energetic or other types of toxicity and the genomic disruption that the

⁸⁵ <http://www.coalitionforvaccinesafety.org/documents.htm>

⁸⁶ <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2876658/>

⁸⁷ <http://hmg.oxfordjournals.org/content/15/18/2701.short>

⁸⁸ <http://www.ncbi.nlm.nih.gov/pubmed/22928565>

⁸⁹ <http://www.ncbi.nlm.nih.gov/pubmed?term=genetic%20changes%20diabetes>

⁹⁰ <http://www.nature.com/nrg/journal/v8/n11/abs/nrg2188.html>

⁹¹ http://www.vitality-living.com/resources/Modulation_of_DNA.pdf

⁹² <http://www.item-bioenergy.com/infocenter/ConsciousIntentiononDNA.pdf>

⁹³ <http://2012indyinfo.com/2011/10/12/scientist-prove-dna-can-be-reprogrammed-by-words-and-frequencies/>

⁹⁴ <http://www.rexresearch.com/gajarev/gajarev.htm>

toxicity itself causes. Once the genome can no longer purify and correct itself and its environment, Genomic Disruption Syndrome (GDS) occurs.

If I Have GDS, How Will My Doctor Diagnose It?

GDS is a new concept and most doctors are not familiar with it yet so they will diagnose the RESULT of the genome disruption, not its cause. Because they are not yet skilled in the diagnosis of GDS, they will attempt to treat the way in which GDS shows itself (the “disease”), not the underlying GDS itself. Such treatment may suppress the symptoms of GDS, but does nothing to resolve the deep-set cause of the disruption itself. In addition, such allopathic (e.g., pharmaceutical) treatment is generally quite toxic and causes yet more genetic disruption.

Instead, focused treatment aimed at relieving the symptoms AND resolving the genomic problem makes better sense biologically, medically and toxicologically. We will discuss some of those genomic treatments in the following section.

Multifactorial disorders result from aberrations, disruptions, errors and mutations in multiple genes, often associated with environmental causes which overwhelm the adaptive and corrective abilities of the genome. GDS disorders may be classified based on whether single, multiple, or multifactor genetic disruption has taken place. Here is a **partial** list of the diseases, conditions and problems commonly diagnosed which are, in fact, known to be associated with GDS⁹⁵:

Level 1 GDS

Disorders resulting when a single protein from a single gene is missing, insufficient or damaged:

- Cystic fibrosis
- Downs Syndrome
- Galactosemia
- Klinefelter Syndrome
- Huntington’s Disease
- Maple Syrup Urine Disease (MSUD)
- Neurofibromatosis 1 (NF1)
- Pachyonychia Congenita
- Phenylketonuria (PKU)
- Severe Combined Immunodeficiency Syndrome (SCIDS)
- Sickle Cell Disease
- Smith-Lemni-Opitz Syndrome

Level 2 GDS

Disorders resulting when a whole chromosome, or large part thereof, is missing, insufficient or damaged:

- Cri-du-Chat Disorder
- Downs Syndrome
- Klinefelter Syndrome

⁹⁵ <http://learn.genetics.utah.edu/content/disorders/whataregd/>

- Turner Syndrome
- Williams Syndrome

Level 3 GDS

Disorders resulting when a multiple genes are affected, often involving environmental contamination as well

- Alzheimer's Disease⁹⁶
- Auditory Canal Cancer⁹⁷
- Breast Cancer^{98, 99, 100, 101}
- Colon Cancer^{102, 103, 104, 105}
- Endometrial Cancer¹⁰⁶
- Esophagus Cancer¹⁰⁷
- Hypothyroidism¹⁰⁸
- Larynx Cancer¹⁰⁹
- Leukemia^{110, 111, 112}
- Lymphoma¹¹³
- Lung Cancer¹¹⁴
- Lymphoid Malignancies¹¹⁵
- Nervous System Cancer¹¹⁶
- Ovarian Cancer^{117, 118}

⁹⁶ <http://www.ncbi.nlm.nih.gov/pubmed/20097254>

⁹⁷ German J. Bloom's syndrome. XX. The first 100 cancers. *Cancer Genet Cytogenet.* 1997 Jan;93(1):100-6.

⁹⁸ Lancaster JM, Powell CB, Kauff ND, Cass I, Chen LM, Lu KH, Mutch DG, Berchuck A, Karlan BY, Herzog TJ; Society of Gynecologic Oncologists Education Committee. Society of Gynecologic Oncologists Education Committee statement on risk assessment for inherited gynecologic cancer predispositions. *Gynecol Oncol.* 2007 Nov;107(2):159-62.

⁹⁹ Keimling M, Volcic M, Csernok A, Wieland B, Dörk T, Wiesmüller L. Functional characterization connects individual patient mutations in ataxia telangiectasia mutated (ATM) with dysfunction of specific DNA double-strand break-repair signaling pathways. *FASEB J.* 2011 Nov;25(11):3849-60

¹⁰⁰ Bartkova J, Tommiska J, Oplustilova L, Aaltonen K, Tamminen A, Heikkinen T, Mistrik M, Aittomäki K, Blomqvist C, Heikkilä P, Lukas J, Nevanlinna H, Bartek J. Aberrations of the MRE11-RAD50-NBS1 DNA damage sensor complex in human breast cancer: MRE11 as a candidate familial cancer-predisposing gene. *Mol Oncol.* 2008 Dec;2(4):296-316.

¹⁰¹ German J., Op Cit

¹⁰² Lancaster JM, Ibid

¹⁰³ German, J, Op Cit

¹⁰⁴ Manchanda R, Menon U, Michaelson-Cohen R, Beller U, Jacobs I. Hereditary non-polyposis colorectal cancer or Lynch syndrome: the gynaecological perspective. *Curr Opin Obstet Gynecol.* 2009 Feb;21(1):31-8.

¹⁰⁵ Cleary SP, Cotterchio M, Jenkins MA, Kim H, Bristow R, Green R, Haile R, Hopper JL, LeMarchand L, Lindor N, Parfrey P, Potter J, Youngusband B, Gallinger S. Germline MutY human homologue mutations and colorectal cancer: a multisite case-control study. *Gastroenterology.* 2009 Apr;136(4):1251-60.

¹⁰⁶ Manchanda R, Ibid

¹⁰⁷ German J, Op Cit

¹⁰⁸ <http://jme.endocrinology-journals.org/content/46/1/R11.full>

¹⁰⁹ German, J, Ibid

¹¹⁰ Thompson LH, Schild D. Recombinational DNA repair and human disease. *Mutat Res.* 2002 Nov 30;509(1-2):49-78. Review.

¹¹¹ German J, Op Cit

¹¹² Thompson LH, Hinz JM. Cellular and molecular consequences of defective Fanconi anemia proteins in replication-coupled DNA repair: mechanistic insights. *Mutat Res.* 2009 Jul 31;668(1-2):54-72.

¹¹³ Thompson LH, Ibid

¹¹⁴ German J, Op Cit

¹¹⁵ Chrzanowska KH, Gregorek H, Dembowska-Bagińska B, Kalina MA, Digweed M. Nijmegen breakage syndrome (NBS). *Orphanet J Rare Dis.* 2012 Feb 28;7:13.

¹¹⁶ Lehmann AR, McGibbon D, Stefanini M. Xeroderma pigmentosum. *Orphanet J Rare Dis.* 2011 Nov 1;6:70.

¹¹⁷ Manchanda R, Op Cit

- Skin Cancer^{119, 120, 121, 122}
- Soft Tissue Sarcomas¹²³
- Stomach Cancer¹²⁴
- Pancreatic Cancer¹²⁵
- Thyroid Cancer¹²⁶
- Tonsil Cancer¹²⁷
- Tongue Cancer¹²⁸
- Uterine Cancer¹²⁹

Level 4 GDS

Disorders resulting from a damaged or defective DNA repair mechanism leading to

- Accelerated aging^{130, 131}
- Enhanced vulnerability to cancer^{132, 133}
- Bloom's Syndrome¹³⁴
- Cockayne's Syndrome¹³⁵
- Diabetes¹³⁶
- Fanconi's Anemia¹³⁷
- Hypertension¹³⁸
- Irritable Bowel Syndrome¹³⁹
- Lupus¹⁴⁰
- Mental Illness¹⁴¹
- Migraine Headaches¹⁴²

¹¹⁸ Zaal A, Peyrot WJ, Berns PM, van der Burg ME, Veerbeek JH, Trimbos JB, Cadron I, van Diest PJ, van Wieringen WN, Krijgsman O, Meijer GA, Piek JM, Timmers PJ, Vergote I, Verheijen RH, Ylstra B, Zweemer RP; [Genomic aberrations relate early and advanced stage ovarian cancer.](#), On behalf of the EORTC GCG Translational Research Group. *Cell Oncol (Dordr)*. 2012 Jun;35(3):181-188. Epub 2012 May 12.

¹¹⁹ German J, Op Cit

¹²⁰ Chun SG, Shaeffer DS, Bryant-Greenwood PK. The Werner's Syndrome RecQ helicase/exonuclease at the nexus of cancer and aging. *Hawaii Med J*. 2011 Mar;70(3):52-5.

¹²¹ Singh DK, Ahn B, Bohr VA. Roles of RECQ helicases in recombination based DNA repair, genomic stability and aging. *Biogerontology*. 2009 Jun;10(3):235-52.

¹²² Lehmann AR, McGibbon D, Stefanini M. Xeroderma pigmentosum. *Orphanet J Rare Dis*. 2011 Nov 1;6:70.

¹²³ Chun SG, Op Cit

¹²⁴ German, J, Ibid

¹²⁵ Chun SG, Op Cit

¹²⁶ Chun SG, Op Cit

¹²⁷ German J, Ibid

¹²⁸ German J, Ibid

¹²⁹ German J, Ibid

¹³⁰ <http://www.sciencedaily.com/releases/2011/04/110429095231.htm>

¹³¹ <http://www.wired.com/wiredscience/2012/06/aging-dna-damage/>

¹³² <http://www.infoplease.com/ce6/sci/A0857159.html>

¹³³ <http://www.newscientist.com/article/mg21528803.500-epigenetics-gives-clues-to-human-cancer-susceptibility.html>

¹³⁴ <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC416397/>

¹³⁵ <http://www.annualreviews.org/doi/abs/10.1146/annurev.cellbio.24.110707.175259>

¹³⁶ Riséris U, [Willet W](#) (January 2009). "[Dietary fats and prevention of type 2 diabetes](#)". *Progress in Lipid Research* **48** (1): 44–51.

¹³⁷ <http://www.ncbi.nlm.nih.gov/pubmed/7252244>

¹³⁸ <http://www.springerlink.com/content/1j84081252687g79/>

¹³⁹ <http://www.nature.com/nrgastro/journal/v7/n8/full/nrgastro.2010.99.html>

¹⁴⁰ <http://www.jimmunol.org/content/176/12/7143.long>

¹⁴¹ <http://www.nature.com/nrn/journal/v8/n5/full/nrn2132.html>

- Multiple Sclerosis¹⁴³
- Osteoporosis¹⁴⁴
- Parkinson's Disease¹⁴⁵
- Post-Traumatic Stress Disorder¹⁴⁶
- Progeria (Hutchinson-Gilford Progeria syndrome)^{147, 148}
- Presbyopia¹⁴⁹
- Rheumatoid Arthritis¹⁵⁰
- Rothmund-Thomson Syndrome^{151,152}
- Werner Syndrome¹⁵³
- Xeroderma Pigmentosum¹⁵⁴

There is strong scientific support for treating genomic disruption with nutritional strategies, which forms one leg of the four legged stool of treatment of GDS:

- Intensive restorative nutrition^{155, 156, 157}
- Effective Detoxification¹⁵⁸
- Avoidance of re-toxification
- Restoration of normal structure/function

Patent Pending. This White Paper describes Genetic Disruption Syndrome, its Causes and remediation and is based upon the Provisional Patent Application filed by the Natural Solutions Foundation, August 13, 2012; Application No. 61682422.

Surviving Genomicide

If ever there was a time for life style change, coupled with a demand for:

- Clean, unadulterated food and water
- Biological protection and support of the nutrients and supplements

that you need - and will need for the rest of your life - it is now. And if ever there was a time to call for the total banning of the five most dangerous misapplications of science in human history:

¹⁴² <http://www.ncbi.nlm.nih.gov/pubmed/18345478>

¹⁴³ Compston A, Coles A (October 2008). "Multiple sclerosis". *Lancet* **372** (9648): 1502–17.

¹⁴⁴ <http://tulane.edu/publichealth/bio/epigenomics-study-for-osteoporosis.cfm>

¹⁴⁵ <http://www.ncbi.nlm.nih.gov/pubmed/21892731>

¹⁴⁶ <http://onlinelibrary.wiley.com/doi/10.1002/jts.20448/pdf>

¹⁴⁷ Manju K, Muralikrishna B, Parnaik VK (July 2006). "Expression of disease-causing lamin A mutants impairs the formation of DNA repair foci". *J. Cell. Sci.* **119** (Pt 13): 2704–14.

¹⁴⁸ Scaffidi P, Misteli T (May 2006). "Lamin A-dependent nuclear defects in human aging". *Science* **312** (5776): 1059–63.

¹⁴⁹ <http://www.bioscience.org/u37153137/gaDTRQo7632rgysaGWQYT64356/2005/v10/af/1661/1661.pdf>

¹⁵⁰ <http://health.ucsd.edu/news/releases/Pages/2012-07-03-epigenetics-alters-rheumatoid-arthritis-genes.aspx>

¹⁵¹ Brosh RM, Bohr VA (2007). "Human premature aging, DNA repair and RecQ helicases". *Nucleic Acids Res.* **35** (22): 7527–44.

¹⁵² Kitao S, Shimamoto A, Goto M, *et al.* (May 1999). "Mutations in RECQL4 cause a subset of cases of Rothmund-Thomson syndrome". *Nat. Genet.* **22** (1): 82–4.

¹⁵³ <http://www.ncbi.nlm.nih.gov/pubmed/20477760>

¹⁵⁴ <http://www.jbc.org/content/280/6/4182.full>

¹⁵⁵ Scharfe C, Lu HH, Neuenburg JK, Allen EA, Li GC, Klopstock T, Cowan TM, Enns GM, Davis RW (2009). Rzhetsky, Andrey. ed. "Mapping gene associations in human mitochondria using clinical disease phenotypes". *PLoS Comput Biol* **5** (4): e1000374.

¹⁵⁶ Marriage B, Clandinin MT, Glerum DM (2003). "Nutritional cofactor treatment in mitochondrial disorders". *J Am Diet Assoc* **103** (8): 1029–38.

¹⁵⁷ Tanaka M, Nishigaki Y, Fuku N, Ibi T, Sahashi K, Koga Y (2007). "Therapeutic potential of pyruvate therapy for mitochondrial diseases". *Mitochondrion* **7** (6): 399–401

¹⁵⁸ <http://www.flcv.com/suscept.html>

- GMOs
- Nuclear power
- Vaccines and unnecessary drugs
- Toxic industrial “PHUDE”
- Chemtrails

that time was yesterday.

We missed yesterday so today is the time, and tomorrow and all the tomorrows that these disasters still allow us.

As you can see from this introductory White Paper, the subject of GDS is a deep and complex one in which, happily, science is catching up to natural medicine. There are nutrients and supplements that you should know about and that you should be taking – every day.

You can find my recommended sources at:

- <http://www.DrRimaKnow.com>
- <http://www.tinyurl.com/NaturalHealthSolutions>
- <http://www.tinyurl.com/RadProtect>

To find out if it is likely that you have GDS, please take the self-screening questionnaire available at www.GDS-Therapy.com . If you do, several options are open to you, including working with a knowledgeable physician, nutritionist, naturopath, or other health professional skilled in the area of genomic remediation. In the event that you would like to set up a consultation with me, please go to this link: <http://www.healmedrima.com/> and I will be honored to give you my input.

A final note about GDS and Radiation

Ionizing Radiation like that emitted by Fukushima exposes cells, membranes, DNA, mitochondria, etc., to free-radical storms. One free radical creates more free radicals which create more and more of them. Like out of control forest fires, they oxidize, or burn, their way through delicate membranes, disrupt DNA and wreak biological havoc, producing serious damage to all cell-level structures, including proteins and DNA.

Out of control free radicals are so destructive that they are used, in controlled situations, by the immune system to destroy invaders. They are also used, again, in controlled situations, by mitochondria for energy production.

The control system used by our bodies to keep them in check is the general class of compounds called anti-oxidants. Our body spends a good deal of biological energy on making and using them. But free radicals are depleted by all of the factors that cause genetic damage, that cause GDS.

It makes sense, therefore, to treat GDS and all of its downstream consequences nutritionally by enhancing the availability of anti-oxidants and encouraging their internal production.

Resveratrol, for example, is a powerful, yet safe and gentle, antioxidant which you can, and should, ingest. Glutathione, on the other hand, although it is the body’s primary antioxidant defense, is very hard to formulate so that it can be ingested and remain effective. The best way, therefore, to enhance glutathione production in the body is by ingesting products which stimulate the body to do so. One of the best is organic, low radiation undenatured whey protein.

There are many other strategies to provide the antioxidants which you absolutely need to protect against, or to treat, GDS. They have been brought to a high level of development by the Natural Products industry.

In fact, Natural Products companies have been working on for the past 30 years or more on nutritional responses to free-radical attacks! That's what all those powerful antioxidants are about. Real therapeutic nutrition!

That's why I feel confident in recommending nutritional approaches to *all* the genome-attacking technologies that we have identified: nuclear power & other radiation sources, GMOs, vaccine and environmental toxins. Wherever GDS came from, once you have it, you have similar disruptions in your genome and in your functional state, your health and your future. You can use the links I have provided knowing that the information there is accurate and the products are

- **Organic**
- **Low radiation**
- **Biologically available**
- **Effective**
- **Good value for the money**
- **Personally vetted by me**

In Summary

Genomic Disruption through the introduction of novel genetic material through GMOs – Genetically Modified Organisms – intake), radiation, toxic industrial food, environmental pollution including drugs and vaccines, results in a wide variety of acute, chronic and multigenerational dysfunctions, ranging from the trivial to the lethal. The consequences are enormously serious for each of us and future generations. Collectively, the downstream health consequences of genetic disruption comprise the “**Genomic Disruption Syndrome.**” (GDS).

Common expressions of GDS, widely scientifically validated, include:

- Allergies
- Autism
- Birth Defects
- Cancer
- Cardio-vascular disease
- Diabetes
- Fetal malformation
- Immune System Disorders
- Infertility
- Metabolic syndrome
- Neurological Disorders
- Obesity
- Premature Aging

and a host of other serious conditions.

The distinctive nutritional requirements, based on recognized scientific principles, needed to treat GDS, include strict adherence to a diet free of any genomic toxins to allow detoxification and repair.

The human and economic consequences of GDS are almost impossible to calculate. GDS, however, can be managed, and in many cases, successfully reversed through dietary and environmental management providing strict avoidance of Genomic Toxins and Incitants including genetically damaged ‘foods’ (GMO), excess nuclear exposure, toxic pharmaceuticals (including vaccines) and similar agents which damage DNA.

In addition, high levels of specific anti-oxidants, minerals and biochemical cofactors should be used in a targeted fashion to manage, repair and remediate both the cause and the expressions of GDS.

Wholesome food is now a “medial food” necessary for your health!

Part IV

LAWFUL THERAPY FOR *GENOMIC DISRUPTION SYNDROME* HOPE FOR THE GENETICALLY DISABLED THROUGH MEDICAL FOODS?



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WHO and FAO, the *World Health Organization* and the *Food and Agriculture Organization*, two primary UN organs, in 2002 told the world what holistic doctors and scientists have been saying for decades: *wholesome* food prevents what the agencies call the “preventable, non-communicable diseases of mal and under-nutrition:...” These include:

- Cancer
- Cardiovascular Disease
- Stroke
- Diabetes
- Obesity

These are the chronic diseases of modern life and the principle killers in the Western World.¹⁵⁹ They are also the primary source of pharmaceutical profits.

Ground-breaking Journalist Jeffrey M. Smith, in a widely-shared Internet article, explains that advanced health care practitioners are achieving astounding results in cases of chronic disease by helping people change their eating habits to reject all GMO “phude” (Genetically Modified Organisms). He wrote,

“Are genetically modified (GM) foods making you sick – I mean really sick? Up until recently, all that we could say was thank goodness you’re not a lab rat; GM feed messes them up big time. GMOs (genetically modified organisms) appear to trigger the immune systems of both mice and rats as if they were under attack. In addition, the gastrointestinal system is adversely affected, animals age more quickly, and vital organs are damaged. When fed GM foods, lab animals can also become infertile, have smaller or sterile offspring, increased infant mortality, and even hair growing in their mouths. Have I got your attention?”¹⁶⁰

¹⁵⁹ http://whqlibdoc.who.int/trs/who_trs_916.pdf

¹⁶⁰ <http://vitalitymagazine.com/article/dramatic-health-recoveries-reported/>

Among those holistic scientists is respected psychiatrist and environmental physician Rima E. Laibow, MD, Medical Director of the Natural Solutions Foundation. She has defined Genome Disruption Syndrome this way:

"Genomic Disruption through the introduction of novel genetic material (from multiple factors, but heavily through GMO – Genetically Modified Organisms – intake) results in a wide variety of acute, chronic and multigenerational dysfunctions, ranging from the trivial to the lethal. For this reason I call the downstream health consequences of genetic disruption the '**Genomic Disruption Syndrome.**' (GDS)."

How can you benefit from this powerful new understanding pioneered by doctors like Dr. Rima and explicated by research journalists like Jeffrey Smith? By sourcing as much of the food you and your family eat from low-radiation, organic and biodynamic sources.

Since March 11, 2011, the *Day That Changed Everything...* when the Fukushima reactors in Japan were destroyed, setting in motion the most serious technological threat ever faced by humanity, your options for clean food have become seriously limited. In fact, accessing clean food means means, primarily, sourcing food from the "Deep South" – South America and Africa. As Natural Solutions Foundation develops these sources, we will make available for you to embrace at www.FriendlyFoodCoOp.org .

Dr. Rima has identified the medical syndrome GDS and the dietary management of that syndrome. Congress, in 2005, created the regulatory category that permits the development of the *Dr. Rima Truth Protocol* – the strict adherence to toxin-free food and meaningful detoxification allowing rebuilding, repletion and restoration. *In truth, this is the only logical solution to what is the greatest threat to people like us and families like ours.*

Congress told us, in the *Orphan Drug Act*, is that a Medical Food is:

"a food which is formulated to be consumed or administered enterally under the supervision of a physician and which is intended for the specific dietary management of a disease or condition for which distinctive nutritional requirements, based on recognized scientific principles, are established by medical evaluation...." Section 5(b) of the Orphan Drug Act (21 U.S.C. 360ee (b) (3))

Responding to Congress' instruction, the FDA published a short FAQs, "Medical foods are distinguished from the broader category of foods for special dietary use and from foods that make health claims by the requirement that medical foods

- a. be intended to meet distinctive nutritional requirements of a disease or condition,
- b. used under medical supervision and
- c. intended for the specific dietary management of a disease or condition."

The FDA FAQs further inform us, "The term "medical foods" does not pertain to all foods fed to sick patients. Medical foods are foods that are specially formulated and processed ... for the patient who is seriously ill or who requires the product as a major treatment modality."¹⁶¹

And the agency concludes: "In general, to be considered a medical food, a product must, at a minimum, meet the following criteria:

¹⁶¹ <http://www.fda.gov/Food/GuidanceComplianceRegulatoryInformation/GuidanceDocuments/MedicalFoods/default.htm>

- a. the product must be a food for oral or tube feeding;
- b. the product must be labeled for the dietary management of a specific medical disorder, disease, or condition for which there are distinctive nutritional requirements; and
- c. the product must be intended to be used under medical supervision..."

One of the problems with sourcing truly wholesome food from the Deep South is that fresh food which enters the United States must be irradiated or fumigated. If the food is certified organic, it is exempt from irradiation, but not fumigation. Thus, while, for example, much of our winter fruit and vegetables come from Chile, the honest organic producers there will not ship to the USA. As a Medical Food, however, such food would be exempt from fumigation, in order to maintain its integrity.

The legal method for importation would be through the FDA "compassionate use" rule, RPM Ch. 9-71, *Coverage of Personal Importation*, which allows Americans to import up to a three month's supply of health remedies not available in the USA, for personal use.

I can deduce from the FDA materials several points of note: (1) the agency has not yet prepared comprehensive regulations regarding Medical Foods; (2) products protected under the Dietary Supplement Health and Education Act of 1994 (DSHEA) can be considered Medical Foods, (3) fresh foods that are specially prepared and packaged to manage GDS can be considered Medical Foods, and (4) it is appropriate for health care providers to recommend such wholesome food for the dietary management of various nutritional and metabolic syndromes that are being identified by advanced health care practitioners, which can be subsumed under the overall Genomic Disruption Syndrome identified by Dr. Rima.

Jeffrey Smith concludes:

"Fortunately, as people learn about the health dangers of GMOs, feel better from non-GMO diets, and tell others, the non-GMO movement grows. There are now millions who seek healthier non-GMO foods. Since GMOs offer no consumer benefits..."

We can advance this understanding by educating decision makers, including our legislators, about the dangers of GMOs. Easily and quickly send them messages through Natural Solutions Foundation's Educate Decision Makers system: <http://tinyurl.com/No2GMO>.

Ralph Fucetola JD, Trustee and Counsel of Natural Solutions Foundation, practiced law for 36 years and provides international legal consulting through his www.VitaminLawyer.com .



Resources and Contact

Take Our Free Questionnaire to Screen Yourself for GDS

<http://www.GDS-Therapy.com>

Read More about Dr. Rima Recommendations for GDS

www.GDS-Therapy.com

To schedule a Consultation with Dr. Rima

<http://www.healmedrima.com/>

Control Decision Makers by Taking Action

<http://tinyurl.com/banGMOs> & <http://tinyurl.com/NoNukePower>

Sign Up for Free Health Freedom News Letter

<http://www.GlobalHealthFreedom.org>

Health Freedom's Own BeyondOrganic Coffee Grown in Panama on Our Farm

<http://www.ValleyoftheMoonCoffee.org>

All Organic Nutrients and Supplements to Support Your Body and Health Freedom

<http://www.Organics4U.org>

Dr. Rima Truth Reports Weekly Radio Show 10 AM – 12 Noon Eastern

<http://www.HealthFreedomPortal.org>

Tax Deductible Donations to the Natural Solutions Foundation: http://www.healthfreedomusa.org/?page_id=189

Sign Up for General Bert's Fukushima Risk Assessment and Updates

<http://www.GeneralBert.org>

Access General Bert's Fukushima Estimate of Situation

<http://www.youtube.com/watch?v=UJIEZvX4PZI>

General Bert's World Risk Assessment #1

<http://www.healthfreedomusa.org/?p=9145>

General Bert's World Risk Assessment #2

<http://www.healthfreedomusa.org/?p=9217>

Gen. Bert's Assessment #3: Genocidal & Genomicidal Maniacs

<http://www.healthfreedomusa.org/?p=9593>

General Bert's Low Radiation Migration eBook and Webinars #1 & #2

<http://www.healthfreedomusa.org/?p=12368>

What do Nuclear Power & GMOs Have in Common? Dr. Rima's Answer

<http://www.healthfreedomusa.org/?p=8845>

Learn About Specific Health Products Dr. Rima Recommends

<http://tinyurl.com/NaturalHealthSolutions>

Read About Low Radiation Medical Foods Coming Soon Through Our The Friendly Food CoOp

www.FriendlyFoodCoOp.org

The FoodFreedomJournal

www.FoodFreedomJournal.org

A Few of Our Accomplishments

http://www.healthfreedomusa.org/index.php?page_id=195.

White Paper Authors

Rima E. Laibow, M.D.

Rima E. Laibow, M.D. is a graduate of Albert Einstein College of Medicine (1970) who believes passionately in the right of Americans to choose their own health paths. She has practiced drug-free, natural medicine for 42 years by seeking the underlying cause of every illness and ailment and treating that root cause.

She believes in using nutrients and other natural options to find, define and treat the problems which underlie degenerative, chronic diseases and poor aging while supporting the immune and other crucial systems. She has enjoyed remarkable success with a wide assortment of cataclysmic problems.

Dr. Laibow is the Founding and past President of the *NeuroTherapy Certification Board*, which she helped establish, in order to strengthen and develop the field of NeuroBioFeedback and bring it into wide-spread use as a powerful, non-toxic tool for modern medicine.

Because of Dr. Laibow's awareness of the powerful natural, non-toxic options available to treat the underlying cause of disease she is focused on maintaining these choices for all Americans. Based on her understanding of the impact of poor nutrition and chemical/pesticide toxicity on the declining health of America, Dr. Laibow is determined to help Americans maintain the choices that allow them to protect themselves from disease and toxic harm.

Major General Albert (Bert) N. Stubblebine III (U.S. Army, Retired)

General Bert is a graduate of the *U.S. Military Academy* (West Point, class of 52) who enjoyed a distinguished 32 year career in the U.S. Army during which he commanded soldiers at every level. After his retirement he served as the VP for *Intelligence Systems with BDM*, a major defense contractor. He has taken this set of experiences and become involved in leading-edge medical research and development in collaboration with his wife Rima E. Laibow, M.D.

He is a long-term way-out-of-the-box thinker who redesigned the U.S. Army's Intelligence architecture while serving as the Commanding General of the U.S. Army's *Intelligence School and Center* and helped to define the requirements of the U.S. Army for future conflict. The re-design earned his place in the Intelligence Hall of Fame.

Many of the innovations he developed helped the U.S. to conduct the First Gulf War effectively and swiftly with a very low casualty rate. He also commanded the U.S. Army's *Electronic Research and Development Command* (ERADCOM) and the U.S. Army's *Intelligence and Security Command* (INSCOM).

Having defended his country for 32 years and having then worked for the remainder of his career to build better ways of being and becoming well, Bert is determined not to let the forces which are threatening American's health freedoms prevail.

Ralph Fucetola JD

Counsel Ralph received a *B.A. with Distinction* from Rutgers University, 1967 and a *Juris Doctor* (Doctorate in Law) from Rutgers Law School, 1971. Since then he has been active in the business and public service communities and practiced law (from 1971 through 2006) specializing in the Nutrient and Alternative Health fields.

Counsel Fucetola has been widely recognized as a leading attorney in the field, receiving numerous awards, including a Citation of Merit from the National Health Federation (www.thenhf.com) in 1979 and a Meritorious Service Award (from the Institute for Health Research, www.inhere.org) for his role in the 1995 DHEA Cases on behalf of the Life Extension Foundation. Counsel Fucetola limits his consultancy practice to claims, advertising and label review, asset protection, and consulting with marketers, consumers, advocates and local attorneys regarding Health Care Freedom issues, petitions and litigation.

He has varied business background experience, including direct management responsibility with companies in the following fields: Real Estate Management; Construction; Dietary Supplement Products and Alternative Modality Products. He is Counsel to and a trustee of Natural Solutions Foundation, www.globalhealthfreedom.org.

Appendix I

Mitochondrial DNA Disruption Diseases



- Mitochondrial Myopathy
- Mitochondrial Encephalomyopathy, Lactic Acidosis and Stroke-Like Syndrome (MELAS) Varying degrees of cognitive impairment and dementia
 - Lactic Acidosis
 - Strokes
 - Transient Ischemic Attacks
 - Hearing loss
 - Weight loss
- Myoclonic Epilepsy and Ragged-Red Fibers (MERRF)
 - Progressive Myoclonic Epilepsy
 - Clumps of diseased mitochondria accumulate in muscle fibers and appear as "ragged-red fibers" when muscle is stained
 - Short stature
 - Hearing loss
 - Lactic acidosis
- Exercise intolerance
- Kearns-Sayre Syndrome (KSS)
- External ophthalmoplegia
- Cardiac conduction defects
- Sensorineural hearing loss
- Chronic Progressive External Ophthalmoplegia (CPEO)
 - Progressive ophthalmoparesis
 - Symptomatic overlap with other mitochondrial myopathies
- Diabetes Mellitus and Deafness (DAD)^{162, 163}
- Leber's Hereditary Optic Neuropathy (LHON)
 - Visual loss beginning in young adulthood
 - Eye disorder characterized by progressive loss of central vision due to degeneration of the optic nerves and retina
 - Wolff-Parkinson-White Syndrome
 - Multiple Sclerosis-type disease¹⁶⁴
 - Leigh Syndrome, Subacute Sclerosing Encephalopathy^{165, 166}

¹⁶² Diabetes Mellitus and deafness can also be found together for other reasons

¹⁶³ This combination at an early age can be due to mitochondrial disease

¹⁶⁴ This syndrome affects 1 in 50,000 people in Finland

¹⁶⁵ After normal development the disease usually begins late in the first year of life, although onset may occur in adulthood

¹⁶⁶ A rapid decline in function occurs and is marked by seizures, altered states of consciousness, dementia, ventilator failure

- Neuropathy, Ataxia, Retinitis Pigmentosa and Ptosis (NARP)
 - Progressive symptoms as described in the acronym
 - Dementia
- Myoneurogenic Gastrointestinal Encephalopathy (MNGIE)
 - Gastrointestinal pseudo-obstruction
 - Neuropathy
- Mitochondrial DNA depletion
- Mitochondrial Neurogastric Encephalopathy (MNGIE)