ANTHRAX

WHAT TO DO IN AN EMERGENCY SITUATION

page updated 1-4-2002

If you can't get doxycycline, read the following

compiled by Dee Finney

(Note: I make no money from the ad appearing on this page)

This is where I get my supply

Silver-Lightning Tonic Water

Inhalation anthrax

Alternative names: anthrax - lung; pulmonary anthrax

Definition:

A disease that affects mostly farm animals; humans acquire it through inhaling spores when in direct contact with infected animals.

Causes, incidence, and risk factors:

Anthrax is caused by the bacterium Bacillus anthracis and is a disease of sheep, cattle, horses, goats, and swine. Human infection is rare, but it is an occupational disease of farm workers, veterinarians, and tannery and wool workers. The disease has a skin form (cutaneous anthrax) and a pulmonary (lung) form.

In the pulmonary form, infection is spread by breathing in spores that germinate and cause pneumonia. The pneumonia develops rapidly and leads to progressive respiratory distress. Death can result in less than 48 hours from this type of infection. Meningitis can also develop. The incidence of inhalation anthrax is very rare.

Prevention:

Vaccination is available for people who work around animals.

Symptoms:

- * fever
- * general discomfort, uneasiness, or ill feeling (malaise)
- * headache
- * shortness of breath
- * cough
- * congestion of the nose and throat

- * pneumonia
- * joint stiffness
- * joint pain

Signs and tests:

- * blood cultures positive for anthrax
- * chest X-ray
- * serologic test for anthrax
- * spinal tap for CSF culture and analysis

Treatment:

The objective of treatment is to eliminate the infection with antibiotic therapy. Penicillin is the usual medication.

Expectations (prognosis):

The death rate is high despite proper therapy, especially in the pulmonary form of this disease.

Complications:

- * hemorrhagic meningitis
- * mediastinitis
- * shock
- * ARDS (adult respiratory distress syndrome)

Calling your health care provider:

Go to the emergency room or call the local emergency number (such as 911) if symptoms develop following exposure to farm animals.

Copyright Notice: The information provided herein should not be used for diagnosis or treatment of any medical condition. A licensed physician should be consulted for diagnosis and treatment of any and all medical conditions.

From: http://www.smart-drugs.net/ias-silverJamesSouth.htm

Perhaps the scariest scenario that may present a need for a powerful, broad-spectrum antimicrobial such as Silver is the late 1990's threat of 'bioterrorism.' It is now widely expected by biowarfare and terrorism experts that, whether due to small groups of terrorists, or as a form of warfare by 'rogue'/totalitarian nations such as China, Iran, Libya, N. Korea, Syria, or Russia, it is only a matter of time before 'germ warfare' is unleashed in Europe or America (10). And if the supergerms released have been produced in sophisticated biowarfare labs, they will probably have been genetically altered to make them resistant to the antibiotics normally used to treat that species of germ - e.g. tetracycline/doxycycline normally used to treat Anthrax (the number 1 favorite of 'biowarfare warriors' world-wide) (10). It is interesting to note that silver - both in liquid solution and as an airborne-aerosol - has been known since 1887 to be extremely toxic to Anthrax spores (1,10,11,12). And it is widely reported in the medical literature on Silver that various forms of Silver, often at surprisingly low concentrations, routinely kills germs that are known to be antibiotic-resistant (11,13,19,20).

Most antibiotics have an optimal effectiveness against only a few different disease germs; even broad-spectrum antibiotics may kill only 10-20 different types of bacteria. Also, most antibiotics that kill bacteria will not kill fungus/yeasts, protozoal parasites or viruses; antifungal antibiotics will not kill bacteria, viruses, parasites, etc. And virtually all known viruses are immune to virtually all known antibiotics.

WHEN IT MAY BE THE ONLY THING AVAILABLE

From: http://www.alchemistproducts.com/books/silver1.htm

Some people believe there may be a time in the foreseeable future when food storage maybe the only means of antibiotics/ disinfectants for many of us. Life would be very different then, with many items unavailable, and storage of colloidal silver could be life saving.

One thing very different in the future could be rampant disease- plagues from combination of the water and air with man made biotoxins of germ warfare (As seen in "The Streaker Memorandum" Video). Whatever the source either invasion or local error, any military activity can result in a major outbreak of anthrax or lesser causes resulting in salmonella poisoning. Colloidal Silver is not only a matter of prevention but may possibly be the best choice to store for future use.

UCLA study: Some years ago an independent research laboratory sent to the university of California at Los Angeles a sample of Colloidal Silver to be tested against AIDS, and Anthrax. UCLA undertook the test and proved conclusively that Colloidal Silver was highly effective in remedial application against both disease pathogens.

Subj: Re: Anthrax

Date: 10/2/2001 12:51:42 PM Pacific Daylight Time

From: Marshall

To: Dee777@aol.com

Yes, CS is very effective against anthrax bacteria. It (as well as any antibiotics) is NOT effective against the spores, but then the spores will not harm you. Only when they germinate can they cause harm, and once germinated CS is very effective.

However, if one breathes in anthrax I am not certain that taking CS by mouth would be as effective as desired. The problem is the that bacteria can live in the mucus in the lungs, and the CS is in the blood, so although the anthrax cannot live in the blood with the CS, any toxins they produce can still make it into the blood from the anthrax in the mucus. I have made a homemade nebulizer out of an inexpensive air brush I purchased for under \$10, and will use it with CS to put a CS fog into the lungs if ever exposed to anthrax in the air. I have found this to also work wonders for anyone with pneumonia or other severe lung distress.

Here is a very scary article on germ warfare planned by Iraq. This quote is VERY interesting:

Answer: The only natural substance I know of that is effective against these microbes is colloidal silver. I tested that myself when 1 was with the CIA, and found it effective against both anthrax

and the bubonic plague pathogen.

http://www.anthraxsafe.com/interview.htm

http://www.anthraxsafe.com/

Marshall

CAUTIONS

If you are NOT certain if you are using true ionic colloidal silver, do NOT attempt nebulizer usage. Silver compounds consisting of large amounts of dissolved silver, especially silver nitrate, can cause instant and potentially terminal silver poisoning under some conditions (which have not been determined).

ALWAYS test colloidal silver first on the skin, then internally if at all possible if colloidal silver has never been used. The skin test is the most critical. Watch for gray patches that instantly appear on the skin upon colloidal silver application. If gray discoloration occurs, do not utilize silver in any form (any discoloration is only temporary). This is an indication of an extremely uncommon reaction with silver, most likely due to the use of rare prescription drugs.

When using a nebulizer, always watch for signs of increased irritability, loss of concentration, and increased emotional instability. If any of these symptoms manifest, cut down or temporarily suspend colloidal silver use. They are "watch" signs for various silver reactions that may or may not exist when incredibly high quantities of colloidal silver are used. Again, err on the safe side. These initial signs, if experienced, are temporary. Suspension of use will give the body time to adjust and go through a natural cleaning cycle and prevent any harm being done to the body. In the unlikely event that these symptoms continue to manifest when using colloidal silver, discontinue use and if possible have a batch of the colloidal silver laboratory tested.

With a lung infection, using a colloidal silver nebulizer can be quite painful at first. Since many infections either start or remain in the far reaches (bottom) of the lung lobes, it can be difficult to breath deeply enough to deliver the colloidal silver to the infection site. However, for the treatment to be as successful as possible, it is imperative that the fine mist reach the actual location of the infection. As in all colloidal silver use, if the colloidal silver is not able to reach the site of the infection, it will be largely ineffective.

Many times, a "new" lung infection will clear up VERY rapidly, within hours, IF it is not severe and the body's immune system response is strong.

However, in some situations one may find that the immune system is completely unresponsive for whatever reason. In these cases there will be no fever, no loss of appetite, and sometimes no coughing response.

To a greater or lesser extent, this is the case with long term chronic chest colds, where the body's immune system has de-prioritized it's response to the infection. Infections such as these tend to be cyclical, with periods where the infection appears to be gone. These infections need a well thought out protocol. Since the immune system response is either reduced or not present, occasional doses would only slightly effect the infection as a whole. Keep in mind that the colloidal silver will only effect the infection it reaches. In four hours time, it is not unreasonable to assume that if the

immune system has not responded, the infection will have repopulated. In such a case, the colloidal silver is only reaching the same areas over and over again. Because of the experimental nature of nebulizer use with colloidal silver, we don't have any solid substantiated suggestions to approach this dilemma at this time.

Any time the immune system fails to respond in any condition, and colloidal silver is used as the primary treatment method, the colloidal silver must completely take over the immune system role of "killing" an infection. This usually requires dosage levels that are increasingly high as compared to other circumstances. Ideally and theoretically, if the infection begins to clear through sustained use, the body's immune system should eventually jump-start. One will notice an aching feeling throughout the body, and perhaps start running a temperature. This is a sure sign that immune system has reinitiated a strong response.

Again, colloidal silver nebulizer usage is highly experimental.

From: http://silverdata.20m.com/nebulizers.html

Received by e-mail:

Subj: Fwd: Anthrax

Date: 10/12/2001

From: GENESISOFLIGHT@webtv.net (lee Chin)

1. What is anthrax?

Anthrax is an acute infectious disease caused by the spore-forming bacterium Bacillus anthracis. Anthrax most commonly occurs in wild and domestic lower vertebrates (cattle, sheep, goats, camels, antelopes, and other herbivores), but it can also occur in humans when they are exposed to infected animals or tissue from infected animals.

2. Why has anthrax become a current issue?

Because anthrax is considered to be a potential agent for use in biological warfare, the Department of Defense (DoD) has begun mandatory vaccination of all active duty military personnel who might be involved in conflict.

3. How common is anthrax and who can get it?

Anthrax is most common in agricultural regions where it occurs in animals. These include South and Central America, Southern and Eastern Europe, Asia, Africa, the Caribbean, and the Middle East. When anthrax affects humans, it is usually due to an occupational exposure to infected animals or their products.

Workers who are exposed to dead animals and animal products from other countries where anthrax is more common may become infected with B.anthracis (industrial anthrax). Anthrax in wild livestock has occurred in the United States.

4. How is anthrax transmitted?

Anthrax infection can occur in three forms: cutaneous (skin), inhalation, and gastrointestinal. B. anthracis spores can live in the soil for many years, and humans can become infected with anthrax by handling products from infected animals or by inhaling anthrax spores from contaminated animal products.

Anthrax can also be spread by eating undercooked meat from infected animals.

It is rare to find infected animals in the United States.

5. What are the symptoms of anthrax?

Symptoms of disease vary depending on how the disease was contracted, but symptoms usually occur within 7 days.

- Cutaneous: Most (about 95%) anthrax infections occur when the bacterium enters a cut or abrasion on the skin, such as when handling contaminated wool, hides, leather or hair products (especially goat hair) of infected animals.

Skin infection begins as a raised itchy bump that resembles an insect bite but within 1-2 days develops into a vesicle and then a painless ulcer, usually 1-3 cm in diameter, with a characteristic black necrotic (dying) area in the center. Lymph glands in the adjacent area may swell. About 20% of untreated cases of cutaneous anthrax will result in death. Deaths are rare with appropriate antimicrobial therapy.

- Inhalation: Initial symptoms may resemble a common cold. After several days, the symptoms may progress to severe breathing problems and shock.

Inhalation anthrax is usually fatal.

- Intestinal: The intestinal disease form of anthrax may follow the consumption of contaminated meat and is characterized by an acute inflammation of the intestinal tract. Initial signs of nausea, loss of appetite, vomiting, fever are followed by abdominal pain, vomiting of blood, and severe diarrhea.

Intestinal anthrax results in death in 25% to 60% of cases.

6. Where is anthrax usually found?

Anthrax can be found globally. It is more common in developing countries or countries without veterinary public health programs. Certain regions of the world (South and Central America, Southern and Eastern Europe, Asia, Africa, the Caribbean, and the Middle East) report more anthrax in animals than others.

7. Can anthrax be spread from person-to-person?

Direct person-to-person spread of anthrax is extremely unlikely to occur. Communicability is not a concern in managing or visiting with patients with inhalational anthrax.

8. Is there a way to prevent infection?

In countries where anthrax is common and vaccination levels of animal herds are low, humans should avoid contact with livestock and animal products and avoid eating meat that has not been

properly slaughtered and cooked. Also, an anthrax vaccine has been licensed for use in humans. The vaccine is reported to be 93% effective in protecting against anthrax.

9. What is the anthrax vaccine?

The anthrax vaccine is manufactured and distributed by BioPort, Corporation, Lansing, Michigan. The vaccine is a cell-free filtrate vaccine, which means it contains no dead or live bacteria in the preparation. The final product contains no more than 2.4 mg of aluminum hydroxide as adjuvant. Anthrax vaccines intended for animals should not be used in humans.

10. Who should get vaccinated against anthrax?

The Advisory Committee on Immunization Practices has recommend anthrax vaccination for the following groups:

- Persons who work directly with the organism in the laboratory
- Persons who work with imported animal hides or furs in areas where standards are insufficient to prevent exposure to anthrax spores.
- Persons who handle potentially infected animal products in high-incidence areas. (Incidence is low in the United States, but veterinarians who travel to work in other countries where incidence is higher should consider being vaccinated.)
- Military personnel deployed to areas with high risk for exposure to the organism (as when it is used as a biological warfare weapon).
- The anthrax Vaccine Immunization Program in the U.S. Army Surgeon General's Office can be reached at 1-877-GETVACC (1-877-438-8222). http://www.anthrax.osd.mil
- Pregnant women should be vaccinated only if absolutely necessary.

11. What is the protocol for anthrax vaccination?

The immunization consists of three subcutaneous injections given 2 weeks apart followed by three additional subcutaneous injections given at 6, 12, and 18 months. Annual booster injections of the vaccine are recommended thereafter.

12. Are there adverse reactions to the anthrax vaccine?

Mild local reactions occur in 30% of recipients and consist of slight tenderness and redness at the injection site. Severe local reactions are infrequent and consist of extensive swelling of the forearm in addition to the local reaction. Systemic reactions occur in fewer than 0.2% of recipients.

13. How is anthrax diagnosed?

Anthrax is diagnosed by isolating B. anthracis from the blood, skin lesions, or respiratory secretions or by measuring specific antibodies in the blood of persons with suspected cases.

14. Is there a treatment for anthrax?

Doctors can prescribe effective antibiotics. To be effective, treatment should be initiated early. If left untreated, the disease can be fatal.

15. Where can I get more information about the recent Department of Defense decision to require men and women in the Armed Services to be vaccinated against anthrax?

The Department of Defense recommends that servicemen and women contact their chain of command on questions about the vaccine and its distribution.

The anthrax Vaccine Immunization Program in the U.S. Army Surgeon General's Office can be reached at 1-877-GETVACC (1-877-438-8222).

http://www.anthrax.osd.mil

SOURCE: Center for Disease Control and Prevention (CDC) web site at

http://www.cdc.gov/ncidod/dbmd/diseaseinfo/anthrax_g.htm

Rense.com

Fear Of Anthrax Attack Boosts Sales Of Antibiotics

9-26-1

NEW YORK (Reuters) - Pharmacists in New York have sold greater-than-normal amounts of antibiotics for treating anthrax, a highly contagious and potentially fatal disease, amid rising fear of biological warfare after the attacks on the World Trade Centre.

Though sales of antibiotics normally rise in September when children return to school and parents are concerned about their exposure to infections, pharmacists said the sale of Bayer AG's anti-microbial drug Cipro are much higher than usual.

Cipro, the German drug maker's best-selling drug, is used to treat a number of diseases and infections, including anthrax, a disease that can cause bleeding blisters, difficulty in breathing, shock and coma. Even with early treatment, the inhalation of anthrax spores is almost always fatal.

"We're hearing that Cipro is a front-line defence against anthrax and in the last couple of days I've sold about a month's worth," said Barry Reiter, chief operating officer of Brooklyn-based Remo Drug Corp., one of the largest independent pharmaceutical supply companies in America.

"Today we'll be out of stock and we've already reordered," Reiter said Tuesday.

The U.S. Federal Aviation Administration on Tuesday said crop-duster planes could fly again after they were grounded for two days because of rising fear of biological or chemical attack in the wake of the Sept. 11 hijacked jetliner attacks in New York and outside Washington.

Bayer said it sells worldwide about \$1 billion a year of Cipro, a drug used to treat urinary tract and gastrointestinal infections, as well as pneumonia and bronchitis. The drug was approved by the U.S. Food and Drug Administration to treat exposure to anthrax in August 2000 and it is the only orally administered drug recommended for such use by the Centres for Disease Control and

Prevention in Atlanta.

The dosage to treat anthrax is two pills a day for 60 days, while a patient suffering from a gastro-intestinal infection would take two of the Cipro pills a day for about a week.

CIPRO DEMAND SOARS

Sylvia Lifshitz, a pharmacist at independent Drug Mart on Manhattan's Upper East Side, normally prescribes about 300 Cipro tablets in a two- to three-week period.

Over the first weekend after the World Trade Centre attacks, however, Lifshitz dispensed about 1,000 Cipro tablets in three days.

"I've never done that before," Lifshitz said, adding that most of her customers have been "highly educated and highly neurotic."

Lifshitz ordered extra Cipro, which cost about \$1 a tablet, after New York physicians began prescribing it for themselves and their families, and currently has a stock of about 1,200 pills in the store, even though she is uncertain of its efficacy against anthrax.

Robert Berman, co-owner of Kings Pharmacy, which has six stores in New York City, including one near the World Trade Centre, said he has also seen a large rise in requests for Cipro.

"I had one guy come in and buy a two-month supply for him and his wife," said Berman.

Chain drug store Rite Aid Corp., which has 30 stores in Manhattan, said more antibiotics normally are sold in September, though it had not noticed an unusual rise in the sale of Cipro.

Cipro is not the only antibiotic available for treatment of inhaled microbes. Generic doxycycline, usually prescribed to prevent traveller's diarrhoea, is another anti-microbial drug that normally sees a rise in September.

"People are panicking, and we've had more than the usual number of inquiries about doxycycline, too," said pharmacist Gary Halpern at the Caligor Pharmacy on Manhattan's Upper East Side, most of whose business has come from selling vaccines.

NO SUPPLY SHORTAGE

David Siegrist, a research fellow and the director of studies for the Countering Biological Terrorism program at the Potomac Institute for Policy Studies in Arlington, Virginia, said there was a reason for doctors' choosing Cipro first. "It's believed that terrorists could make their anthrax resistant to doxycyline, but Cipro is more complicated," Siegrist said. He said that Cipro is the anti-microbial drug of choice for the U.S. military, which bought doses for the troops that served in the Gulf War in 1991.

"It wouldn't hurt to have a little Cipro on hand now," Siegrist said.

Pharmacists need not fear of a supply shortage, said Bayer, which makes the drug in a plant in Westhaven, Connecticut, and in Europe.

"We've got no supply issues at this point and people should rest assured that we have been working with the CDC and the Department of Defence for over a year," said spokesman Rob

Kloppenburg.

|Subj: [RMNEWS2] Re: ANTHRAX ANTIBIOTIC & DOSAGES

Date: 9/27/2001

From: btweeksmd@mindspring.com (Dr. Byron Weeks)

The "dose" of cipro is 500-750 mg every 12 hours. Intravenous therapy has a better chance of cure and must be started before symptoms begin for best results.

Tetracyclines are only suppressive or bacteriostatic, and do not cure.

Unfortunately, when an epidemic starts, the hospitals will be overwhelmed and unavailable to most.

We badly need a device called a biosensor, which could identify the nature of a biologica attack when it starts. Generally, the deaths from such an attack would be fairly widespread before the medical community would realize what is happening.

This device is available, and you may be sure there is one in the environs of most of the top Elites. This disease is not very contagious without direct exposure to droplets from a coughing patient with the pulmonary form.

By all means get the antibiotics and exit early from the contaminated areas. A chemical mask will temporarily protect from anthrax and plague. But a protective Level 4 suit would be ideal. The troops will be at roadblocks to try to stop anyone from escaping from the cities via the main throughways...

Byron T. Weeks, MD

Subj: [APFN] Lantana, FL man hospitalized with Anthrax

Date: 10/4/2001

Source: Palm Beach Post

http://www.gopbi.com/partners/pbpost/epaper/editions/today/index.html

Lantana man hospitalized with Anthrax

http://www.gopbi.com/partners/pbpost/news/breaking_news_4.html

The Associated Press Thursday, October 4, 2001 TALLAHASSEE (AP) -- A 63-year-old businessman has been hospitalized in Palm Beach County with pulmonary anthrax, a highly lethal disease mentioned as a possible biological weapon. But U.S. Health Secretary Tommy Thompson said Thursday there is no evidence this case was a result of terrorism.

"This is an isolated case and it's not contagious," Thompson said at a White House news conference.

He said such incidents are "rare, very rare." Anthrax has been developed by some countries as a possible biological weapon. But the disease can be contracted naturally; the bacterial spores can

be found in soil and are often carried by livestock.

Officials said the Florida victim is an avid outdoorsman.

Thompson said the last U.S. case of anthrax was earlier this year in Texas. But that case was not pulmonary anthrax, in which the disease settles in the lungs.

The Lantana man, whose name was not released, checked into a hospital on Tuesday and it was initially believed he had meningitis, Lt. Gov. Frank Brogan said. But X-rays and other testing showed that it was pulmonary anthrax. The disease is treated with antibiotics. Brogan said the man had recently traveled to North Carolina and became ill shortly after he returned. The incubation period for the disease can be 60 days.

Tim O'Connor, spokesman for the Palm Beach health department, said the case is "very likely" to be fatal.

Anthrax is a spore-forming bacterium that is especially virulent if inhaled. The disease causes pneumonia. There is a vaccine to prevent the spread of the disease.

All forms are rare, but the most recent cases -- including ones in Texas and North Dakota -- have been so-called cutaneous cases resulting from handling animals.

During the 20th century, only 18 cases of inhaled anthrax have been reported in the United States, the most recent in 1976. The federal Centers for Disease Control and Prevention and the FBI are investigating.

Sent: Friday, October 05, 2001

Subject: Airport In Lantana

It should be noted that the WTC terrorists had flown small planes out of the airport in lantana several times before the attack to hone their flying skills. If you have a pilots license you can fly solo.

The anthrax victim has a rare inhalation form of the disease, with the only way to get it is by breathing in the spores, and the last known case in america happened in 1974.

The terrorists may have released anthrax spores while flying over lantana.

In palm beach county, where lantana is, most of the pollution blows out to sea. The victim lives along the intracoastal waterway. What are the odds that the terrorists would fly out of lantana and the only inhalation case of anthrax since 1974 has occured in lantana, weeks apart? Our government is lying to prevent panic.

From an article a few weeks ago:

U.S. agents followed Atta's trail from flight training in Venice on the west coast to an apartment in Coral Springs to another in Hollywood to Lantana, a town on the state's east coast where he and others may have honed their flying skills at Palm Beach County Park Airport, the Herald said.

"He (Atta) seemed normal to me," Marian Smith, owner of Palm Beach Flight Training, told the

Herald. "I remember he said he wanted to get in 100 hours."

Smith told the newspaper she had dealt with Atta within the past few weeks.

Florida Man Dies/Anthrax---Pay attention.

http://disc.server.com/Indices/149495.html

Subject: Florida Man Dies/Anthrax---Pay attention.

Date: Fri, 5 Oct 2001 22:03:04 EDT

By Amanda Riddle

Associated Press Writer

Friday, October 5, 2001; 9:20 PM

LANTANA, Fla. A 63-year-old Florida man died of the inhaled form of anthrax Friday in the first such death in the United States in 25 years. The case raised fears of a biological attack, but health officials said there is no evidence he was the victim of terrorism.

Bob Stevens, a photo editor at the supermarket tabloid The Sun, died at JFK Medical Center in Atlantis after antibiotics failed to help. He suffered kidney failure and cardiac arrest.

"It was not unexpected," said Dr. Larry Bush, an infectious-disease specialist.

Federal and state health investigators emphasized the disease is not contagious and no other cases have been reported. But they are trying to reconstruct Stevens' movements and track down the source of the disease. The FBI is involved, as is the U.S. Centers for Disease Control and Prevention.

Anthrax has been developed by some countries as a possible biological weapon, and the terrorist attacks Sept. 11 have put many people on edge about the threat. Anthrax can also be contracted naturally, often from farm animals or soil.

Stevens was described as an avid outdoorsman. Dr. Steven Wiersma, a state epidemiologist, said officials believe he contracted anthrax naturally.

FBI, CDC and state investigators searched Stevens' workplace and sealed off his house in Lantana for a two-hour search. When they left, they removed the yellow crime-scene tape.

Investigators took a number of items from the home, including pesticide sprays and fertilizer bottles, to see if they were contaminated, Wiersma said.

Some in Lantana have been concerned because Mohamed Atta, believed to be one of the hijackers who destroyed the World Trade Center, had rented planes at a flight school at Palm Beach County Park Airport, according to the school's owner. Stevens' home is within a mile of the airport.

Also, Atta and other Middle Eastern men are believed to have visited an airfield in Belle Glade, about 40 miles from Lantana, and asked a lot of questions about crop-dusters. In addition, some

of the suspected hijackers lived at an apartment complex in Boynton Beach, about 10 miles from Lantana.

"I am nervous what if it's in my soil? I have a dog and I have kids," said Cathy Saulter, 39, who lives across the street from the Stevens.

The anthrax bacterium causes pneumonia. There is a vaccine to prevent the spread of the disease, but it is available only to the military.

The most recent previous U.S. case of anthrax was earlier this year in Texas. But that was the more common skin form, not the inhaled type of anthrax, an especially lethal and rare form in which the disease settles in the lungs.

Only 18 inhalation cases in the United States were documented in the 20th century, the most recent in 1976 in California. That case, too, was deadly, and a state health spokeswoman said the victim worked as a professional weaver using imported woolen yarns. The last anthrax case in Florida occurred in 1974.

"There's no need for people to fear they are at risk," CDC Director Dr. Jeffrey P. Koplan said Thursday. But he said a release of the germ by terrorists is on the list of possibilities under investigation.

Eric Croddy, a bioterrorism expert at California's Monterey Institute, said everything so far leads him to believe the government is right, that Stevens caught the disease naturally and that it is an isolated case.

"He's an unfortunate, unlucky fellow," Croddy said.

Anthrax FAQ

http://www.cdc.gov/ncidod/dbmd/diseaseinfo/anthrax_g.htm

: Monday, October 08, 2001

Subject: Anthrax bacteria in second Florida man

Tests show anthrax bacteria in second Florida man; FBI searches for evidence of crime

AMANDA RIDDLE, Associated Press Writer

Breaking News Sections

(10-08) 12:18 PDT BOCA RATON, Fla. (AP) --

The FBI is investigating the possibility that terrorism is behind the anthrax bacteria that killed a Florida man last week and have now been found in the nasal passages of a co-worker, Attorney General John Ashcroft said Monday.

The FBI sealed off the Boca Raton office building housing The Sun tabloid, where both men worked. State health officials also said anthrax had been found on a computer keyboard in the paper's office.

Anthrax cannot be spread from person to person, but all 300 employees who work in the building were asked to come to a clinic so they could be tested for the bacteria.

"We regard this as an investigation that could become a clear criminal investigation," Ashcroft said during a news conference in Washington. "We don't have enough information to know whether this could be related to terrorism or not."

White House spokesman Ari Fleischer would not rule out terrorism as a possible explanation, though there "is no evidence to suggest anything yet."

Ashcroft said the U.S. Centers for Disease Control and Prevention in Atlanta was providing expertise, but Florida Lt. Gov. Frank Brogan confirmed that the FBI is "in control of the investigation."

Bob Stevens, 63, a photo editor at the supermarket tabloid The Sun, died Friday of inhalation anthrax, an extremely rare and lethal form of the disease. The last such death in the United States was in 1976.

On Monday, officials said a co-worker of Stevens, whose name was not released, had anthrax bacteria in his nasal passages. Relatively large anthrax spores that lodge in the upper respiratory tract are less dangerous than smaller spores that get into the lungs.

The co-worker was in stable condition at an unidentified Miami-Dade County hospital, according to health officials. He had been tested for anthrax because he happened to be in a hospital for an unrelated illness.

The man has not been diagnosed with the disease, and Barbara Reynolds, a spokeswoman for the CDC, said authorities may never know whether he actually had anthrax because antibiotics may have killed it before it was detected.

David Pecker, chief executive of the tabloid's publisher, American Media Inc., said the man worked in the mailroom.

A sample of anthrax was taken from a computer keyboard at the Sun, said Dr. John Agwunobi, the state's secretary of health. It was not immediately whose keyboard was involved.

The Sept. 11 terrorist attacks have raised fears of biological warfare across the country and there is particular concern about the origin of the anthrax here.

Stevens lived about a mile from an air strip where suspected hijacker Mohamed Atta rented planes, said Marian Smith, owner of the flight school, said Monday. Several suspected hijackers also visited and asked questions at a crop-dusting business in Belle Glade, 40 miles from Stevens' home in Lantana.

Michael Kahane, vice president and general counsel of American Media, said the company closed its Boca Raton building at the request of state health officials.

"Obviously, our first concern is the health and well-being of our employees and their families," he said.

Only 18 cases of anthrax contracted through inhalation in the United States were documented in

the 20th century, the most recent in 1976 in California. More common is a less serious form of anthrax contracted through the skin.

Anthrax can be contracted from farm animals or soil, though the bacterium is not normally found among wildlife or livestock in Florida. Stevens was described as an avid outdoorsman and gardener.

The anthrax bacterium normally has an incubation period of up to seven days, but could take up to 60 days to develop.

County medical examiners are looking over any unexplained deaths, but have not found any cases connected to anthrax.

The largest experience with inhalation anthrax was in Russia in 1979, when anthrax spores were accidentally released from a military biology facility. Seventy-nine cases of anthrax were reported, and 68 people died.

An injectable anthrax vaccine has been around since the 1970s, and the U.S. military has required anthrax vaccinations for service personnel since the Persian Gulf War.

http://www.washingtonpost.com/wp-srv/aponline/20011012/aponline123612_000.htm

New Anthrax Case Reported in NBC

By Larry McShane Associated Press Writer

Friday, Oct. 12, 2001;

NEW YORK -- An NBC News employee in New York has tested positive for anthrax in tests done after the company received suspicious mail, the network said Friday.

The anthrax was not the inhaled form of the disease, which killed a Florida man a week ago, NBC News said. The female employee instead has a cutaneous - skin - anthrax infection and is responding well to treatment.

NBC President Andrew Lack the woman works on "Nightly News." She was not identified.

Mayor Rudolph Giuliani said tests would be done at NBC offices in Rockefeller Center. Some areas will be closed, he said.

The network said it had received some suspicious mail and immediately contacted the FBI, the federal Centers for Disease Control and Prevention and the New York Department of Health.

"The mail was tested by these organizations, and the employee was treated by several physicians. All these tests came back negative," NBC said in Friday's statement. "However, this morning, a later test on the employee came back positive for traces of cutaneous anthrax."

The disclosure comes a week after a photo editor for The Sun supermarket tabloid in Boca Raton, Fla., died of the more serious inhaled form of anthrax. The American Media Inc. building where several supermarket tabloids are published was sealed off after anthrax was found on the keyboard of the editor, Bob Stevens, 63.

Traces of anthrax were later found in the mailroom where two other American Media workers, Ernesto Blanco and Stephanie Dailey, both worked, a law enforcement official said Thursday. Both tested positive for exposure to anthrax, but neither developed the disease. Both are taking antibiotics and Dailey has even returned to work.

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Fact Sheet on Cutaneous (Skin) Anthrax

What is cutaneous anthrax?

An uncommon cutaneous (skin) infection due to a bacterium (Bacillus anthracis) that is found in the environment and typically causes illness in animals. Cutaneous (skin) anthrax is marked by a boil-like lesion that eventually forms an ulcer with a black center.

How is cutaneous anthrax contracted?

The infection occurs when the bacteria enter a cut or scratch in the skin. Most cutaneous anthrax infections occur when people touch animal products (like wool, bone, hair, and hide) that come from an animal that died of anthrax.

Can cutaneous anthrax be spread from person to person?

If you develop cutaneous anthrax, the drainage from the open sore presents a low risk of infection to others. The only way cutaneous anthrax can be transmitted is by direct contact with the drainage from an open sore. Cutaneous anthrax is not spread from person to person by casual contact, sharing office space, or by coughing and sneezing.

How is cutaneous anthrax treated?

The cutaneous form of anthrax responds well to several antibiotics. The United States has a large supply of these antibiotics and can quickly manufacture more if needed. With treatment, complete recovery from cutaneous anthrax is usual.

How is cutaneous anthrax diagnosed?

Cutaneous anthrax is diagnosed when the Bacillus anthracis bacterium is found in the skin lesion by a laboratory culture. It can also be diagnosed by measuring specific antibodies in the blood of persons who are suspected of having infection.

Can I die from cutaneous anthrax?

Cutaneous anthrax is not usually fatal. If treated with appropriate antibiotics, most individuals make a full recovery.

New York State Department of Health, 10/12/01

B O S T O N, Oct. 18, 2001 — As fears build over the spread of anthrax through the postal system, debate is emerging over whether the bacteria can be killed before it causes any harm.

Suggestions on how to decontaminate mail range from microwaving to household irons. In a laboratory setting, bacteria and bacterial spores are routinely killed with bleach, or by exposure to extremely high heat in what is called an autoclave.

But many experts agree that there is very little if anything you can do to kill bacteria short of destroying your mail.

"Microwaves and steam irons are not going to get you where you need to be," said Dr. John Clements of Tulane University in New Orleans.

Can Irradiation Kill Anthrax?

One San Diego company, however, believes it has a way — irradiation.

Titan Corp. suggests its irradiation technology, currently used to kill harmful bacteria in foods such as meats, eggs and fresh produce, could be used to kill anthrax. The item in question is bombarded with electrons that kill bacteria.

When asked if use against anthrax was feasible, Clements said, "In theory, you could because radiation kills [anthrax] spores."

The company estimates that it would cost approximately one penny per letter to decontaminate mail. It added that irradiation works on everything except electronics, which could be damaged by the process.

How It Works

In irradiation technology, ordinary electricity is used to create a beam of electrons. These electrons are accelerated and "shot" at the item to be sterilized. The beam that is generated is capable of penetrating the target up to a depth of 1 foot.

If the object being decontaminated is larger, X-rays can be used. The same electron beam is directed at a metal target, which generates X-rays. The X-rays are then capable of penetrating up to several feet.

Both the electron beam and the X-rays have the effect of breaking up the DNA of the bacteria almost instantly. This causes immediate death in most cases, and those bacteria that survive are incapable of multiplying.

"Whether it's a package of medical equipment, or a package of hamburger, or whether it's an envelope with anthrax in it, it kills the bacteria inside," said Titan CEO Gene Ray.

Is it Safe?

Many people are concerned about safety when they hear the term irradiation. One fear is that the food itself will become radioactive. According to the Food and Drug Administration (FDA), "Irradiation does not make foods radioactive, just as an airport luggage scanner does not make luggage radioactive."

Another concern that people express is that irradiation will mutate bacteria, and create even more harmful forms. "There is no evidence that mutants that may be produced by irradiation are any more virulent than the parent microorganism; in fact, the opposite is more likely to be the case," according to the FDA.

ABC television station KGTV in San Diego contributed to this report.

Subj: [earthchanges] Fwd: Natural Antibiotics

Date: 10/18/2001 12:26:54 PM Pacific Daylight Time

From: atasha@starlink2.freeserve.co.uk

Reply-to: earthchanges@yahoogroups.com

NATURAL ANTIDOTES TO BIOLOGICAL TOXINS

Americans have grown so accustomed to relying upon prescription medications that they will probably have difficulty believing there are natural compounds as close as the kitchen cupboard that are potent antidotes against biological warfare. These natural antibiotics and antioxidants may give unvaccinated people who have been exposed to biological or chemical weapons enough time to secure professional care. They may even save lives.

It is a fact that chaotic events will make it difficult to obtain appropriate treatment even if it were available. So we must learn more about natural antidotes. Furthermore, it is clear that antidotes to biological attacks need to be employed at home or the workplace in an expedient manner.

The idea of the masses running to obtain medical care or vaccines at doctor's offices, clinics or hospitals needs to be abandoned if civilian defense against biological weapons is to become a reality.

NATURAL RESCUE REMEDIES

Since anthrax is the most feared toxin it will be addressed first. The Garlic Information Center in Britain indicates that deadly anthrax is most susceptible to garlic. Garlic is a broad-spectrum antibiotic that even blocks toxin production by germs. [Journal Nutrition, March 2001] Before vaccines were developed against polio, garlic was used successfully as a prophylactic. In one test garlic was found to be a more potent antibiotic than penicillin, ampicillin, doxycycline, streptomycin and cephalexin, some of the very same antibiotic drugs used in the treatment of anthrax.

Garlic was found to be effective against nine strains of E. coli, Staph and other bugs. [Fitoterapia, Volume 5, 1984] Freshly cut cloves of garlic or garlic powder may be beneficial.

The antibiotic activity of one milligram of allicin, the active ingredient in garlic, equals 15 units of penicillin. [Koch and Lawson, Garlic: The Science and Therapeutic Application, 2nd edition, Williams & Wilkins, Baltimore 1996] Garlic capsules that certify their allicin content are preferred and may provide 5-10 milligrams of allicin, which is equivalent to 75-150 units of penicillin.

The anthrax bacterium's toxicity emanates from its ability to kill macrophage cells which are

part of the immune system. Studies have shown that sulfur-bearing antioxidants (alpha lipoic acid, N-acetyl cysteine, taurine) and vitamin C, which elevate levels of glutathione, a natural antioxidant within the body, counters the toxicity produced by anthrax.

[Molecular Medicine, November 1994; Immunopharmacology, January 2000; Applied Environmental Microbiology, May 1979]

The above sulfur compounds can be obtained from health food stores and taken in doses ranging from 100-500 mg. Vitamin C should be the buffered alkaline form (mineral ascorbates) rather than the acidic form (ascorbic acid) and should be combined with bioflavonoids which prolong vitamin C's action in the blood circulation. The powdered form of vitamin C is recommended to achieve optimal dosing. A tablespoon of vitamin C powder (about 10,000 mgs) can be added to juice. Good products are Twinlab's Super Ascorbate C powder and Alacer's powdered vitamin C.

Melatonin, a sleep-inducing hormone available at most health food stores, has been shown to help prevent lethal toxins from anthrax exposure. [Cell Biology Toxicology, Volume 16, 2000] It could be taken at bedtime in doses ranging from 5-20 mg. Melatonin boosts glutathione levels during sleep.

Of additional interest, one of the methods by which mustard gas works is its ability to bring about cell death by depleting cell levels of glutathione eMedicine Journal, April 9, 2001] So glutathione is also an antidote for mustard gas poisoning.

Virtually all bacteria, viruses and fungi depend upon iron as a growth factor. [Iron & Your Health, T.F. Emery, CRC Press, 1991] Iron-chelating (removing) drugs and antibiotics (Adriamycin, Vancomycin, others) are effective against pathogens. The plague (Yersinia pestis), botulism, smallpox and anthrax could all be potentially treated with non-prescription metal-binding chelators. For example, iron removal retards the growth of the plague. [Medical Hypotheses, January 1980] The biological activity of the botulinum toxin depends upon iron, and metal chelators may be beneficial. Infection Immunology, October 1989, Toxicon, July, 1997].

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Nature also provides nerve gas antitoxins. Nerve gas interrupts the normal transmission of nerve impulses by altering levels of acetycholinesterase, the enzyme that degrades the nerve transmitter acetycholine. Huperzine A, a derivative of Chinese club moss, has been suggested as a pre-treatment against nerve gases. [Annals Pharmacology France, January 2000] The Walter Reed Army Institute of Research conducted studies which revealed that huperzine A protects against nerve gas poisoning in a superior manner to physostigmine, a long-standing anti-nerve toxin.drug. [Defense Technical Information Center Review, Volume 2, December 1996] Huperzine A is available as a food supplement at most health food stores. Suggested dosage is 150 mcg per day. Pretreatment is advised prior to nerve gas exposure.

SUMMARY. The threat of biological warfare is real and concern over preparedness of the civilian population and medical professionals is growing. There is virtually no practical way that vaccines, antibiotics or other treatment can be delivered to a frightened populace in a timely manner during a crisis. The current strategy of having an unprotected citizenry travel to physicians' offices or hospitals to receive prophylactic care or treatment is unfeasible. The public must be armed with preventive or therapeutic agents in their vehicles, homes and the workplace. Natural antibiotics and antitoxins are well documented in the medical literature, but overlooked by health authorities. These antidotes are readily available for the public to acquire and place in an emergency biological response kit.

Last portion of article by Bill Sardi

http://www.sdm2000.com/toxinreport.doc

Copyright Bill Sardi

Knowledge of Health, Inc. 457 West Allen Avenue #117 San Dimas, California 91773

Suspicious Letters and Packages

In light of the recent anthrax outbreaks in America, almost everyone is on the lookout for suspicious letters and packages. But what, exactly, does a suspicious package look like?

Our friends at the United States Postal Service recently created a special "What To Do If You Receive An Anthrax Threat" page at http://www.usps.com/news/2001/press/pr01_1010tips.htm

This page tells you what you should do if you receive an anthrax threat by (snail) mail:

- Do not handle the mail piece or package suspected of contamination.
- Make sure that damaged or suspicious packages are isolated and the immediate area cordoned off.
- Ensure that all persons who have touched the mail piece wash their hands with soap and water.
- Notify your local law enforcement authorities.
- List all persons who have touched the letter and/or envelope. Include contact information and have this information available for the authorities.
- Place all items worn when in contact with the suspected mail piece in plastic bags and have them available for law enforcement agents.
- As soon as practical, shower with soap and water.
- Notify the Center for Disease Control Emergency Response at 770-488-7100 for answers to any questions.

But, remember, the question I asked wasn't "what should I do if I RECEIVE an anthrax threat by mail" but rather "what does a suspicious letter or parcel LOOK like?" Well, the Postal Service's page also offers

- 1. A list of what constitutes a suspicious letter or parcel; and
- 2. A free color poster that you can download and print showing you exactly what to be looking for.

The poster is available in two formats. The first is a 126 Kb Adobe Acrobat PDF file at

http://www.usps.com/news/_pdf/poster.pdf

You'll need Adobe's free Acrobat Reader software to be able to read this file. If you don't have Acrobat Reader yet (SHAME ON YOU!), you can download it for free at

http://www.adobe.com/products/acrobat/readstep2.html.

The Postal Service also offers a 275 Kb JPEG version of the same poster at

http://www.usps.com/news/images/poster_large.jpg.

Skip the JPEG and get the PDF instead. The PDF isn't lossy (in other words, the JPEG is a little blurry and the PDF isn't).

Our friends at the US Federal Bureau of Investigation have also created a free "what to look for" Adobe Acrobat PDF poster at http://www.fbi.gov/pressrel/pressrel01/mail3.pdf.

Sadly, according to this poster, the FBI considers *EVERY* package I have ever received from my Grandma Kelly to be suspicious. :P

By the way, If you have a color printer I strongly recommend that you download and print *BOTH* the Postal Service's and the FBI's "suspicious letter or package" posters. With all that has been happening recently, you can NEVER have too much information.

Speaking of which, if you want to find out more about anthrax itself, check out the US Center for Disease Control's anthrax page at

http://www.cdc.gov/ncidod/dbmd/diseaseinfo/anthrax_g.htm .

This page includes answers to questions such as - How is anthrax transmitted?

- What are the symptoms of anthrax?
- Is there a way to prevent infection?

and many others. Don't forget to click on the purple tabs in the middle of the page to find even more technical information about anthrax including clinical features, risk groups, and so on.

And, finally, this week's "dummy!" award goes to the folks at Publishers Clearinghouse. According to an October 17 Associated Press report,

With fears of anthrax in the mail running high, postal inspectors in St. Paul [Minnesota] have given their colleagues a heads-up that Publishers Clearinghouse is sending out packages of powdered detergent.

"There's nothing to be alarmed about in that package," Inspector Jeanne Graupman said. She added: "Just the timing of it wasn't very good."

... The Oxyclean household cleanser is being sent out in 1-pound packages with the return address 720 Winners Circle, St. Cloud, Minn.

You can read the complete story at

http://abcnews.go.com/wire/Business/ap20011017_897.html.

Lung anthrax incubates longer than thought

Date: 10/28/2001

From: joycelang@prodigy.net

http://www.worldnetdaily.com/news/article.asp?ARTICLE_ID=25098

Friday, October 26, 2001

BIOLOGICAL WAR-FEAR

Lung anthrax incubates longer than thought

Fatal disease didn't show up for 2 months in some Soviet victims

By Paul Sperry

2001 WorldNetDaily.com

WASHINGTON Once anthrax spores germinate in the lungs, they can quickly kill their host. But, contrary to popular belief, the spores can remain dormant for months.

So, are anthrax spores like a ticking time bomb in the chests of the at least 43 Americans who have tested positive for exposure? Not likely.

Just because nasal swab cultures turn up spores, doesn't mean they're also in their lungs, or they're in large enough numbers to create an infection. And the antibiotics those exposed are taking should kill any bacteria that might form there, as long as they take the drug for the full 60-day course.

More troubling, however, are those who have been exposed and don't know it and aren't taking antibiotics. Spores could be hibernating in their lungs without revealing their presence through any telltale symptoms, such as painful swelling under the sternum and sudden high fever. By then, it's too late.

Of those exposed, at least eight have been infected with the inhaled form of anthrax, and three have died. Many are just now showing up at hospitals with flu-like symptoms after being exposed weeks earlier.

But the incubation time between exposure and symptoms can run much longer than a few weeks.

"Germination may occur up to 60 days later," says a May 1999 JAMA report, "Anthrax as a Biological Weapon: Medical and Public Health Management."

"The process responsible for the delayed transformation of spores to vegetative cells is poorly understood but well-documented," states the report, written by several doctors.

It cites the Sverdlovsk anthrax case, for example.

On April 2, 1979, a biowarfare facility in Sverdlovsk, Russia, accidentally released a plume of anthrax spores into the air that killed 68 of the 77 reported cases of pulmonary anthrax downwind from the release point.

Victims showed fatal symptoms as late as 43 days after exposure, the JAMA study says.

In experimental monkeys, "fatal disease occurred up to 58 days and 98 days after exposure," it said.

"Viable spores have been demonstrated in the mediastinal lymph nodes of monkeys 100 days after exposure," the report said.

(The far-less-lethal skin form of anthrax, in contrast, does not have a prolonged latency period. In Sverdlovsk, cutaneous cases developed no later than 12 days after the release of spores.)

Once germination occurs, disease follows rapidly from within hours to a few days because replicating bacteria release toxins leading to hemorrhage, edema and necrosis of the lymph nodes between the lungs.

Inhalational anthrax occurs when spore-bearing particles of 1 to 5 microns in diameter are breathed in and deposited into alveolar spaces in the lungs.

"A lethal dose sufficient to kill 50 percent of persons exposed to it is 2,500 to 55,000 inhaled anthrax spores," says the JAMA study on anthrax.

There, they are transported by lymphatic vessels to lymph nodes in the mediastinum, the membranous space between the lungs.

Toxins form rapidly thereafter, swelling the lymph nodes something easily diagnosed with chest X-rays.

"That's what you expect to see in an anthrax X-ray a large lymph node in [the] chest," said Dr. George Miceli, director of emergency medicine at Boca Raton Community Hospital, where many of the Florida anthrax patients have been treated.

Robert Stevens, a 63-year-old tabloid photographer, died of inhalation anthrax after opening an anthrax-laced letter at his American Media Inc. office in Boca Raton. He went into a coma not long after being admitted to the hospital.

Sen. Bill Frist, R-Tenn., last week predicted that Stevens would be the first and last to die from the anthrax outbreak.

"I predict we'll see no more deaths from anthrax," said Frist, a medical doctor.

But within days, two Washington postal workers, Joseph P. Curseen, 47, and Thomas L. Morris Jr., 55, died from pulmonary anthrax.

Once in the nodes, anthrax toxins cause "hemorrhagic thoracic lymphadenitis and hemorrhagic mediastinitis." Simply put, the nodes swell, crushing down on the lungs, and eventually explode. Death follows soon after.

All 68 Russians who died from inhalation anthrax died this way.

"Massive lymphadenopathy and expansion of the mediastinum led to stridor in some cases," the JAMA study says. Stridor is a harsh, high-pitched whistling sound produced in breathing by an obstruction in the bronchi.

The spore-protected anthrax bacterium is particularly hardy, resistant to heat and dryness and even antiseptics. In the body, it feeds off amino acids, nucleosides and glucose found in the blood and tissues.

But in the open air, it is more vulnerable.

Water, humidity, thermal stress, the presence of oxygen and ultraviolet light can all decay anthrax agents, according to Dean Wilkening, a physicist and bioterror expert at Stanford University.

Subj: NATURAL ANTIDOTES TO BIOLOGICAL TOXINS

Date: 10/28/2001

From: Code UFO

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By Bill Sardi

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North American Herb & Spice Co.

 $\underline{http://www.internet nutrition center.com/company/NorthAmericanHerbSpiceCompany.htm}$

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Excerpted from an article by Bill Sardi

For full report:

http://www.sdm2000.com/toxinreport.doc

Knowledge of Health, Inc. 457 West Allen Avenue #117 San Dimas, California 91773

Choose LOVE not fear.

Only Love Prevails.

In the end, only kindness matters.

"Be the change you want to see."

In Cipro We Trust

By Jim Lynn

Not long after anthrax was found at NBC, Tom Brokaw held up a pill bottle during a newscast, declaring "In Cipro we trust."

On Capitol Hill, politicians lined up for the small white pills after a scare there.

The word on everyone's lips: Cipro.

Few people had even heard of Cipro a month ago. Now, Bayer Corp. is more than tripling its production of the drug, the only form of the powerful antibiotic ciprofloxacin approved by the Food and Drug Administration to fight anthrax.

Bayer has promised the government it will be able to deliver 200 million Cipro tablets in the next three months. It shipped 50 million in the last month alone, Bayer spokesman Mark Ryan said.

Thompson said Wednesday that the government will be buying much of the planned output of pills to put in a government stockpile. Our government will pay \$1.83 per 500 mg tablet.

(1) The generic name for Cipro, Ciprofloxacin hydrochloride, received FDA approval in 1987 and is used to treat a variety of infections, including urinary tract infections and sinusitis. The drug was approved as an anthrax treatment in August last year. Before you place your trust in Cipro, consider the following: Common side effects include; nausea, abdominal pain/discomfort, diarrhea, headache, rash, restlessness, and vomiting.

Other side effects may include: Abnormal dread or fear, achiness, bleeding in the stomach and/or intestines, blood clots in the lungs, blurred vision, change in color perception, chills, confusion, constipation, convulsions, coughing up blood, decreased vision, depression, difficulty in swallowing, dizziness, double vision, drowsiness, eye pain, fainting, fever, flushing, gas, gout flare up, hallucinations, hearing loss, heart attack, hiccups, high blood pressure, hives, inability to fall or stay asleep, inability to urinate, indigestion, intestinal inflammation, involuntary eye movement, irregular heartbeat, irritability, itching, joint or back pain, joint stiffness, kidney failure, labored breathing, lack of muscle-- coordination, lack or loss of appetite, large volumes of urine, light-headedness, loss of sense of identity, loss of sense of smell, mouth sores, neck pain, nightmares, nosebleed, pounding heartbeat, ringing in the ears, seizures, sensitivity to light, severe allergic reaction, skin peeling, redness, sluggishness, speech difficulties, swelling of the face, neck, lips, eyes, or hands, swelling of the throat, tender, red bumps on skin, tingling sensation, tremors, unpleasant taste, unusual darkening of the skin, vaginal inflammation, weakness, and yellowed eyes and skin.

- (2) Serious and fatal reactions have occurred when Cipro was taken in combination with theophylline (Theo-Dur). These reactions have included cardiac arrest, seizures, status epilepticus (continuous attacks of epilepsy with no periods of consciousness), and respiratory failure. Safety and effectiveness of Cipro oral tablets and suspension have not been established in children and adolescents under 18 years of age. There is a total lack of mention from our government and mainstream media of possible safer alternatives to drugs like Cipro. Specifically, documented studies indicate that Therapeutic Grade Thyme Oil is an effective remedy for anthrax and numerous other pathogens.
- (3) To understand why, one needs to understand how large drug companies, like Bayer, make their money. These large corporations look at billions of dollars, not millions, as consideration in looking at potential products. Patent laws prevent natural products like thyme oil from being patented.

Bayer is free to market thyme oil, but sales would be in the lower millions; Not enough money to whet their corporate appetites. Then, too, there is a limited supply of thyme oil. Production of thyme plants could be increased, but even then sales would not meet expectations. Further, natural products, though they may be effective, do not have the ear of the medical profession.

The simple truth is that our medical system relies heavily on pharmaceutically synthesized, petro-chemical drugs in treating their patients.

Patients are seldom told of alternatives to drugs because most doctors are either not aware of them, or are prejudiced to their use. Inspite of legally prescribed drugs causing over 100,000 deaths per year, doctors continue prescribing drugs like Cipro as though they are kind of magic bullet.

(4) They are not.

The next time you hear the words "in Cipro we trust," think about what those words mean, and their possible consequences.

- 1. Associated Press, Oct 17, 01
- 2. http://www.healthsquare.com/pdrfg/pd/monos/cipro.htm
- 3. 1960, Department of Biology, Long Island University, Brooklyn, NY
- 4. JAMA (Journal of The American Medical Association), Barbara Starfield, M.D., of the Johns Hopkins School of Hygiene and Public Health

Subj: Fwd: Re: [CIDSNetwork] Anthrax Vaccine? Date: 12/18/2001 5:27:18 PM Pacific Standard Time

From: whemmerich@yahoo.com

To: DEE777@AOL.COM

--- Trudy Newman <tnewman@connect.ab.ca> wrote:

To: CIDSNetwork@yahoogroups.com

From: Trudy Newman < tnewman@connect.ab.ca>

Date: Tue, 18 Dec 2001 18:04:51 -0700

Subject: Re: [CIDSNetwork] Anthrax Vaccine?

Hi Joseph!

I would encourage you to study the vaccine issue. Here are some links that I would recommend. Perhaps other list members have other links, as well.

The http://www.anthraxvaccine.org/ link is Dr. Meryl Nass' web site. She is considered one of the leading experts on the anthrax vaccine issue. (She has been interviewed by Dr. Stanley Monteith of "Radio Liberty" in the past. http://www.radioliberty.com/ I do not see her interview in archives any more, but if you are interested I believe you can purchase the tapes from Radio Liberty. I see there are other guests in archives discussing the vaccine issue that you might want to check out. http://www.oneplace.com/Ministries/radio_liberty/Archives.asp

You may also find of interest Joyce Riley and Dave Von Kleist programs with "The Power Hour" http://www.m2ktalk.com/power.htm. I know that she had interviewed Dr. Nass; however, I do not think that program is in archives. They often discuss the vaccine issue as it relates to Gulf War vets and other people involved in the military.)

http://www.909shot.com/

http://thinktwice.com/global.htm

http://vaccineinfo.net/

http://www.ccid.org (find out about the polio vaccines we were given as kids)

http://www.theatlantic.com/issues/2000/02/002bookchin.htm

http://www.anthraxvaccine.org/

http://tetrahedron.org/

I hope this helps.

Kind regards,	
Trudy	

joseph wrote:

I'm a postal worker and there is the possibility that I will be able to take the Anthrax Vaccine. Does anyone have any places where I can get hard facts on whether or not to take the vaccine if made available to me? I know there are a lot of rumors out there, but I was hoping to find evidence that would point me one way or the other. Also (rumor mind you) I thought the vaccine was more effective for the cutaneous infection and not so effective for the deadly inhalation infection. . .any truth to this?

thanks much,

joseph in NC

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"Anthrax Shot Considered for Civilians" New York Times (www.nytimes.com) (12/16/01) P. B10; Leary, Warren E.

Federal health officials said this weekend that the U.S. government is thinking about making the anthrax vaccine now used by the military available to people at high risk to the lethal bacteria, such as postal workers. Speaking after a forum organized by the Centers for Disease Control and Prevention on what the next steps should be to prevent inhalation anthrax in people who are already receiving antibiotics because of possible exposure, officials said the secretary of the Department of Health and Human Services, Tommy G. Thompson, could make a decision on expanded anthrax vaccinations within a few days. Since the beginning of October, over 32,000 people have been given initial courses of antibiotics to counteract the disease. Of these people, approximately 10,000 have been advised to continue taking antibiotics for the next two months because they were the ones most likely to have been exposed to anthrax from contaminated mail. So far, five people have died from inhalation anthrax. According to Dr. Anthony S. Fauci of the National Institutes of Health, a consensus has not yet been established among health experts as to whether civilians should be offered the anthrax vaccine. This is because the antibiotics treatment is generally considered to be enough to protect people. Fauci added that if the vaccine does become available to civilians, patients would have to make up their own minds about whether or not to take the vaccine.

http://www.anthraxvaccine.com/

ANTHRAX DECONTAMINATION

PROTECTIVE CLOTHING

EARTH-MOUNTAIN-VIEW