Carnicom Institute Research

2009

Acknowledgements

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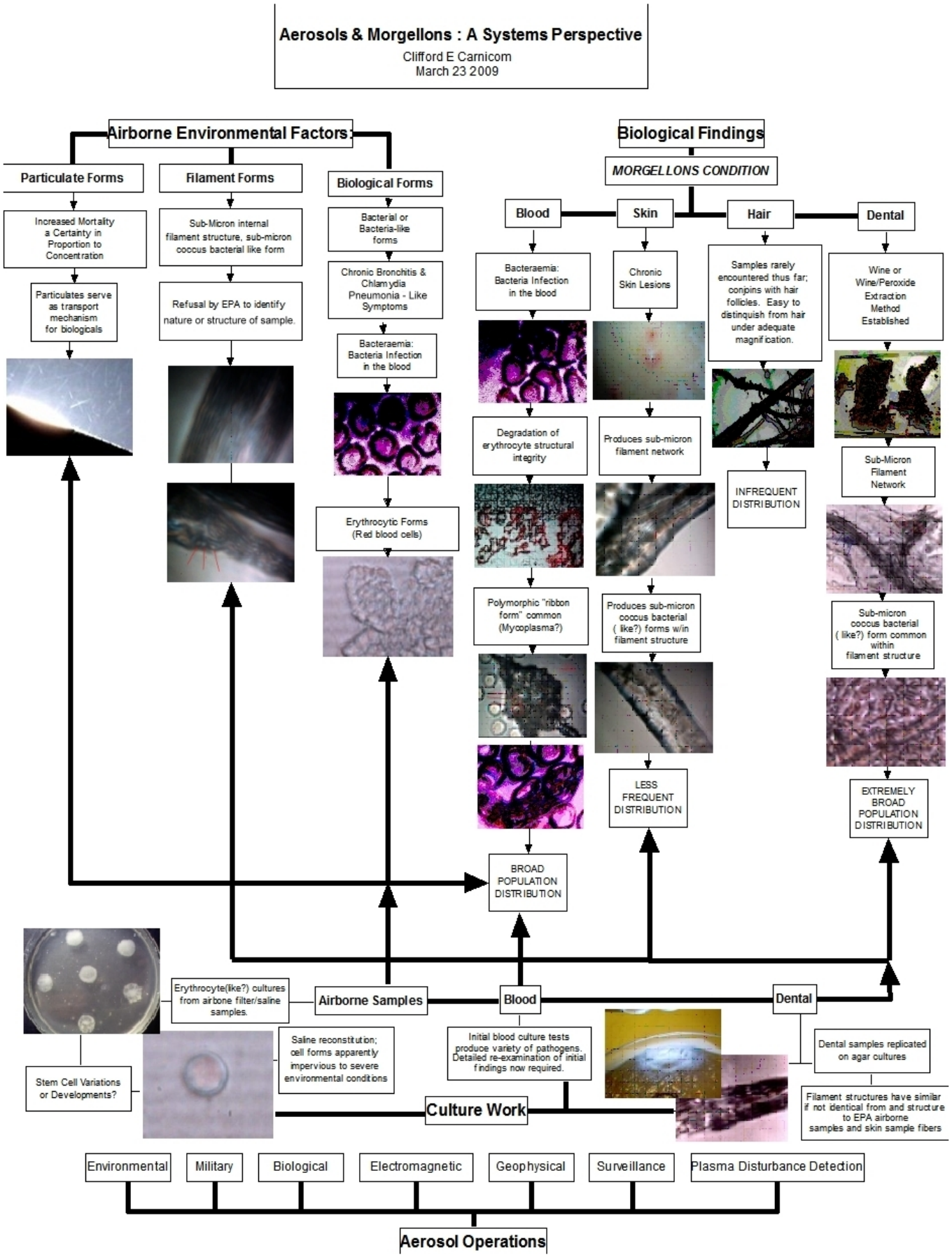
Mar 23, 2009

AEROSOLS & MORGELLONS:
A Systems Perspective
Clifford E Carnicom
Mar 23 2009


Aerosols & Morgellons : A Systems Perspective
Clifford E Carnicom
March 23 2009
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BROAD POPULATION DISTRIBUTION
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Military
Biological
Electromagnetic
Geophysical
Surveillance
Plasma Disturbance Detection
Aerosol Operations

Additional Notes:

1. This document is subject to significant revision.

Apr
BLOOD ISSUES INTENSIFY
Apr 22, 2009

BLOOD ISSUES INTENSIFY
Clifford E Carnicom
Apr 22 2009

I am not offering any medical advice or diagnosis with the presentation of this information. I am acting solely as an independent researcher providing the results of extended observation and analysis of unusual biological conditions that are evident.

Three independent methods have been established that appear to confirm the presence of developing modified erythrocytes (red blood cells) within cultured dental samples that exhibit the characteristics of the Morgellons condition as previously researched and identified. All individuals tested thus far have produced the dental filamentous materials, regardless of whether visible skin anomalies are present or not. Please see previous research for further clarification on the prevalence of the condition.

The erythrocytic detection methods are:

1. Direct observation under the microscope at relatively high magnification (8000x – 10000x) using developed microscopy techniques.
2. The use of the Kastle-Meyer presumptive test (visual and microscopic, sensitive test) for blood, a method commonly used in forensics for blood identification.
3. The HEMASTIX (TMP) presumptive forensic test (very high sensitivity) commonly used for blood identification.

The tests have been repeated several times to assure consistency in methods, results and controls.

The appearance of the cultured erythrocytic cellular structures, if accepted as properly identified, in and of itself defies all conventional understanding of blood cell development. This appearance also corroborates a long history of research through this site of environmental and biological samples that defy conventional expectations and knowledge with respect to the state of public health and the environment (e.g, refer to Extraordinary Biological Observations, Carnicom, May 2004). Simply put, erythrocytes are not to be grown in the the test tube under the current state of conventional knowledge. To do so, however, is considered to be a holy grail of biological achievement with huge implications for bioengineering, human health and the human species. Ground breaking research in this aspect of biology, i.e, the "*growing* of blood cells" has been reported in the media throughout this last year, and was simultaneously stated to entice immediate interest from the Defense Department for battlefield applications (radio news report). Research previous to this recent announcement reports the sustenance and perpetuation of *existing* cells within a growth medium, but not the creation of new cells. Achievements of growth *on any scale* are clearly on the leading front of stem cell research, and comparative questions must be raised regarding the state of public disclosure on the subject vs. actual technological achievements that may already be in place.

I have no desire to sensationalize this subject as the seriousness of the issue is apparent to those that understand the ramifications of this report, should it bear itself to be true. I am obligated, however, to report on the state of affairs as they are encountered through honest research. I would hope that all

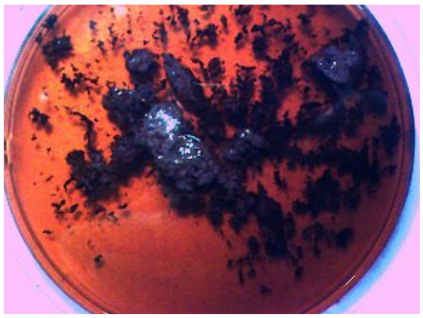
three methods used here along with all previous reports involving erythrocytes for more than 10 years can be shown to be false, but if so, it will have to be done with open and public research that is subject to full cross-examination. I would prefer to not be forced to continue to report findings of this nature but the obligations with respect to public health and the environment do not afford me that liberty.

It has taken some time and effort for me to be able to employ three independent methods of erythrocyte identification at the forensic level, but the seriousness of the subject requires this as a minimum. I do not state this subject to be a closed affair; to the contrary, I am opening a door that requests that there be additional resources activated to conduct the investigations in proper earnest. The purpose of this paper is not to incite controversy. It is to acknowledge what appears over and over to be a very real issue that appears to be of consequence whether we would like to confront it or not.

From the vantage point of this researcher (through varied research over an extended period), it is difficult to come to any other interpretation than that the Morgellons condition is very likely to be fundamentally a blood borne condition. It is quite possible that the findings of this report demonstrate a key element of the Morgellons condition. From additional extensive research that has been conducted, it appears likely that it affects the general population at large. Any skin anomalies or surface manifestations appear to be just that, and they are not necessarily representative of the underlying causative factors. It also appears unreasonable to use surface or skin manifestation as a primary criteria for assessing the extent and distribution of the condition. It may be wise to consider the blood condition of the general population as a focal point of further investigation and research. The associations of airborne and environmental factors also established through extensive research must also be given their due consideration.

ADDITIONAL DETAILS:

Culture Development:



May
MORGELLONS STATEMENT
May 9, 2009

MORGELLONS STATEMENT
Clifford E Carnicom
May 09 2009

The term “Morgellons” refers to a condition that was originally perceived to manifest primarily as an anomalous skin condition. The visible symptoms commonly include skin lesions that resist healing and the presence of unusual filaments that emanate from sores and the skin in general. Many individuals that demonstrate visible physical symptoms have been diagnosed as being delusional even though the physical effect upon the body is evident and the samples can be subjected to detailed examination.

More recent research strongly indicates the underlying symptoms are much deeper and more broadly distributed than has been realized, and that blood borne vectors may be a common denominator amongst affected individuals. Any reference to supposed “delusional parasitosis” in light of the physical examinations and documentation available appears to be a gross miscarriage and misdirection of effort. The more advanced or severe cases may introduce some pyschological complexities to the issue in addition to the physical manifestations, but the data is insufficient at this point. Erythrocyte (red blood cell) degradation and variation appears to occur in proportion to the severity of the condition. Furthermore, various erythrocyte modifications detected indicate that stem cell research should be incorporated within the investigation of the condition.

A certain level of progress has been achieved in the culturing of biological samples and the early stages of inhibition study are in progress. Additional research indicates strong correlation and similarity of form between certain environmental and biological samples.

The presence of skin anomalies as the primary criterion for determining the existence of the condition appears to be especially deficient, and it is recommended that blood borne conditions amongst the general population be investigated in addition to any skin manifestation in the minority of the population. The existence of the condition is now acknowledged by the Centers for Disease Control, the National Institutes of Health and the Mayo Clinic.

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Aug
ARTIFICIAL BLOOD (?)
Aug 27, 2009

ARTIFICIAL BLOOD (?)
Clifford E Carnicom
Aug 27 2009

I am not offering any medical advice or diagnosis with the presentation of this information. I am acting solely as an independent researcher providing the results of extended observation and analysis of unusual biological conditions that are evident.

Strong evidence now exists that an artificial or modified blood form is a dominant internal component, if not the dominant component, of dental filament samples that are commonly associated with the Morgellons condition.

A method has been developed that breaks down the external casing of the fibers. A reconstitution process then takes place. The constituents in the resulting solution have been repeatedly examined under the microscope at high power. The method has been replicated numerous times, and on each occasion the same identifiable structures result. The structures indicate that they are a form of erythrocyte, or red blood cell.

It has been repeatedly proposed by this researcher that the condition of the blood appears to be a common denominator of the Morgellons condition; this latest research further substantiates that position. Essentially all individuals tested thus far demonstrate these same blood variations to some degree, regardless of whether certain skin anomalies are present or not.

It has previously been established that cultures developed from the dental samples are also producing erythrocytes, or red blood cells within the culture. This work has been confirmed with two separate forensic level tests. The latest finding of an erythrocytic form directly within original dental filament samples further substantiates this unique aspect of the Morgelllons condition.

The biology of both the culture samples and the erythrocytic forms directly within the filaments is clearly outside the conventional framework of scientific knowledge, and it demonstrates advanced technologies that are beyond public purview and consent. These technologies likely include artificial or modified biological developments, advanced stem cell developments and genetic transfer or programming.

The supposition that the eythrocytic forms are likely artificial, or at least manipulated in some fashion, is based upon the following observations:

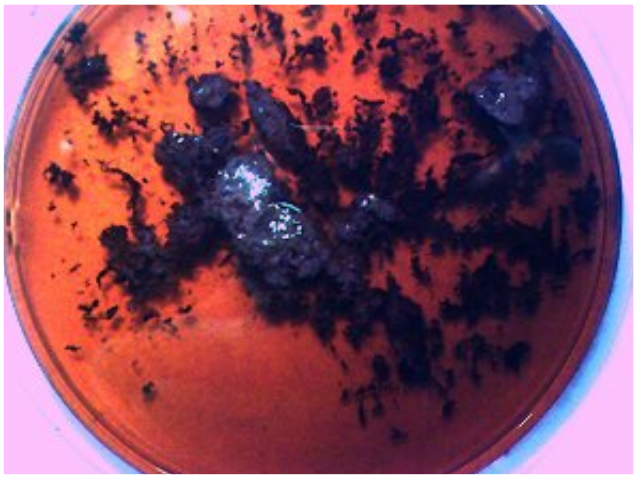
1. The cells are essentially perfectly formed, with no visible variation in form or geometry.

2. Reconstitution of the erythrocytes takes place in an extremely hostile environment with respect to chemicals and heat.

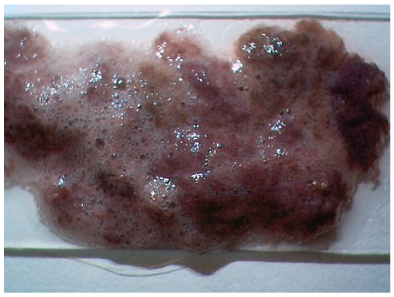
3. An additional sub-micron structure often accompanies, or is within the erythrocytic form. These structures are identical by view and size to numerous anomalous human blood samples that have been reported on in conjunction with the Morgellons research through this site.

4. The size of the erythrocytic form within the dental filament varies more than within the human species, and this appears to be a response to the reconstitutive chemical environment. This chemical medium is hostile and adverse to normal biological development, but reconstitution appears to thrive in this same environment.

A series of photographs with captions below describe the essential details of the process and the results that follow:



Original representative dental sample material in wine base. Essentially all individuals tested thus far produce varying degrees of this dental filament material. This is the type of material used in this test.



Oct
MORGELLONS : A STATUS REPORT
Oct 8, 2009

MORGELLONS : A STATUS REPORT
Clifford E Carnicom
Oct 08 2009

I am not offering any medical advice or diagnosis with the presentation of this information. I am acting solely as an independent researcher providing the results of extended observation and analysis of unusual biological conditions that are evident.

SUMMARY STATEMENT:

A partial summary of the research accumulated through this site on the so-called “Morgellons” issue is as follows:

1. The internal filament repeatedly described, as in the dental extraction samples, appears to be a primary pathogenic form. These internal biological filaments have been identified, to a varying degree, in essentially all individuals that have participated in the testing process thus far. The blood of participating individuals also displays, to a high correspondence, anomalies in structural integrity. A sub-micron spherical structure, to be assessed in further detail at a later point, also commonly occurs within the erythrocytes.

2. The morphology, size, structure and chemistry of these internal filaments appears to be highly similar to that of certain environmental filament samples, notably that which has been refused by the Environmental Protection Agency (EPA) for identification. In addition, numerous research papers over the last ten years document the repeated detection of unusual biological components within a series of environmental samples, including that of erythrocytic (red blood cell) forms.

3. Numerous cultures have been developed from the internal filaments on agar and in wine based mediums. These cultures are essentially identical in form and chemistry with that of the original internal biological filament samples.

4. The cultures produced from the internal biological filaments (dental samples) have been shown to produce an erythocytic form. These cultures have produced a positive result for the existence of hemoglobin by two separate forensic level tests. The determination of the erythrocytic form is also repeatedly evidenced by direct observation, measurement and biconcave morphology.

5. The production of erythrocytic forms within direct biological filament samples and by culture is completely outside the known boundaries of conventional science and biology. It is repeatedly evident that these same erythrocytic forms can withstand (and even flourish in) extremely adverse environmental, chemical and thermal conditions. The evidence thus far indicates the original erythrocytic form is dessicated or spore-like and a reconstitution process is required to bring the cellular structures to full form and activity.

6. A method has been developed to break down the outer casing of the internal biological dental filaments. The internal components of these filaments have been examined in detail upon repeated

occasions. Two main structures emerge: an erythrocytic form and a sub-micron spherical form. The best current assessment of the sub-micron spherical form is that of being Chlamydia-like, with a special interest in Chlamydia Pneuomonia. Mycoplasma forms are also strong candidates of consideration as a “tertiary form” that is also frequently observed. Please also refer to the the paper entitled Pathogens and the General Population, April 2008, for the introduction of the Chlamydia-like structure as a primary topic of interest; the rationale of identification for this candidate remains. In addition, recent size measurements and the response of the Chlamydia-like structure to Giemsa stain further solidifies that rationale.

7. There is a strong consideration that the internal structures from the internal biological filaments are of a synthetic or artificial nature. This assessment is based upon an observed uniformity in geometry as well as the hostile chemical environment under which reconstitution takes place.

8. The internal biological filaments and the cultured form of the filaments have been subjected to the same chemical and thermal breakdown process. The same two internal structures are evident and observed in each case, that of an erthyocytic form and a Chlamydia-like form.

9. The existence of the internal biological filaments, the existence of introduced or modified erthrocytic forms, the Chlamydia-like structure and the tertiary form are interpreted by this researcher to be critical and central aspects of the ” Morgellons” condition. It is accepted that numerous symptom manifestations are reported in association with the condition; this report simply enumerates that which exists as a common denominator within all studies conducted thus far.

10. The source of the erythrocytic form and the Chlamydia-like organism is the filament under study, either in the direct biological internal form or identically from the cultured source. This assessment is reached through direct observation.

11. Success has been achieved in developing a solution based culture that originates from the decomposition (chemical and thermal) of the cultured filaments. A complete cycle of growth has been obtained. An aqueous or solution based culture development has numerous advantages in the development and application of experimental procedures. This culture work is based upon the following sequence:

Dec
MORGELLONS : AN ENVIRONMENTAL SOURCE
Dec 14, 2009

MORGELLONS :
AN ENVIRONMENTAL SOURCE
Clifford E Carnicom
Dec 14 2009

I am not offering any medical advice or diagnosis with the presentation of this information. I am acting solely as an independent researcher providing the results of extended observation and analysis of unusual biological conditions that are evident.

An environmental source, at least in part, for specific biological organisms that are under scrutiny in association with the so-called “Morgellons” condition, has been identified. This source is the unusual airborne filament sample that was sent in June of 2000 to the Administrator of the United States Environmental Protection Agency (EPA) for identification on behalf of the public welfare. The United States EPA refused to acknowledge the existence of the sample for a period of one and one-half years, and subsequently returned the sample without identification after a Freedom of Information Act request for accounting was submitted by a third party.

Upon return in 2001, the EPA stated that it was not the policy of the Agency to “test, or otherwise analyze any unsolicited samples of material or matter.“

The mission of the United States Environmental Protection Agency is to “protect human health and the environment.”[1]

This particular and same sample that was sent to the EPA has been successfully cultured and reproduced, and the culture growth exhibits the identical biological organisms, structure and chemistry of certain biological filaments that are under extensive study in association with the *Morgellons* condition. The sample has been held in custody for more than ten years to await opportunities for proper identification. This particular form of material has been observed, gathered, reported and documented on numerous occasions by independent citizens during the last decade. The filament samples have been considered by many to be a potential health hazard due to the sustained lack of proper identification and the airborne nature. Previous documentation of the events surrounding the original requests for identification are available through this site.

An incomplete (or false) report by a private laboratory, at cost, was received shortly after the EPA refusal of identification. A meeting held to confront and dispute the findings of the private laboratory was abruptly canceled while in process when evidence was presented that contradicted the report using numerous independent methods of observation and analyses. No further progress in formal analytical or biological identification has been made since that time.

The method of culturing is identical to that which has been developed for certain dental filament samples, and it involves the application of an alkali in solution to the filaments, heat, and subsequently an introduction into a wine medium for growth. The culture has taken approximately four to six weeks to develop. This method has been briefly described on numerous occasions with respect to the dental sample analyses, and it will not be repeated here.

The specific cultured structures that have been identified are the chlamydia-like organism, the mycoplasma-like organism (pleomorphic), and the encasing filament structure. The erthyrocytic form within the EPA culture has not been identified at this time. The recent set represents three out of four primary forms that continue to be under examination from a multitude of analyses viewpoints. Erythrocytic forms were identified by an independent medical professional in the original sample that was submitted to the EPA, and that has been reported on in detail within this site during the early part of this decade.

PHOTOGRAPHS:

A MECHANISM OF BLOOD DAMAGE

Clifford E Carnicom

Dec 14 2009

I am not offering any medical advice or diagnosis with the presentation of this information. I am acting solely as an independent researcher providing the results of extended observation and analysis of unusual biological conditions that are evident.

An organism and a method that damages the condition of the blood has now been identified and it has been directly observed. The blood variations reported here are in direct association with the existence of and the severity of the so-called "Morgellons" condition.

The degradation occurs, at least in part, as a result of the existence of a *chlamydia-like organism* that has been repeatedly called to attention within the research during the past several years. This organism, along with a pleomorphic form tentatively identified as a mycoplasma variation, as well as certain filamentous forms, have been identified as common denominators in past and active biological and environmental examinations.

It will be recalled from earlier studies that essentially all individuals observed thus far display the presence of these blood anomalies to varying degree; statistically it would certainly appear as though the general population is subject to these forms. It has also been stated that the severity of the damage to the blood appears to occur in direct correlation with the manifestation of symptoms of the Morgellon's condition.

It is commonly perceived that skin anomalies and lesions (eruptions) are the major indicators as to the presence of the Morgellons "condition." It is asserted by this researcher that this criteria is completely and totally inadequate to establish the existence of the condition. A more comprehensive assessment appears to be that the presence of certain filamentous forms *internal to the body* and the presence of the *chlamydia-like* organism *within the blood* more positively establishes the existence of the condition. The presence of skin lesions (eruptions) and or filaments appears to be simply an outward manifestation by a subset of the population of the underlying biological changes that have occurred *within the body*. Thus far, all individuals studied show these changes *within the body* to varying degree.

The specific organisms (four specific forms in total, thus far) involved still require positive identification, as they have for several years now. I do not claim any medical or biological expertise at the level that is required. The size of the organisms alone is beyond conventional microscopy and they have been identified only with custom microscopic developments. Chlamydia-like and mycoplasma-like identifications must only be regarded as tentative and they are based primarily upon observation, research and deduction.

One of the dominant characteristics of the Chlamydia genus is that its members are metabolically incomplete, and that they require the energy of the host to thrive; this is one reason why they exist as intracellular (within the cell) within the host. In addition, intracellular organisms present a series of challenges to the immune system for detection and eradication, as recognition of a pathogen becomes much more difficult internal to the cell.

One of the dominant characteristics of the Mycoplama genus is that the species lack a cell wall, and hence the ability to assume various forms, i.e, pleomorphic.

Regardless of the eventual identifications that are to take place, the involvement of unconventional biology and genetic modification appears to affirmed by the unusual characteristics, enclosure and transport of these particular organisms under study.

The importance of this paper is that a specific organism and method of blood degradation

that is in association with the Morgellons condition has been identified by function and has been observed and recorded, and that this same specific organism has been under study from several different vantage points for several years now. This chlamydia-like organism remains a focal point of investigation with respect to both the Aerosol Operations and the Morgellons issue; from the current studies it is expected to remain so for some time. The ubiquity and importance of this specific, (but still unidentified by species), organism will become even more apparent in future writings. In general, it would appear that the chlamydia-like and the mycoplasma-like intrusions set the stage for broader systematic degradation, immune suppression and additional pleomorphic manifestations upon sufficient invasion. In addition, genetic modification and transformation of the infective agents as well as the hosts are to be considered as very real possibilities.

The specific method of blood damage referred to in this paper is as follows:

1. The chlamydia-like organism appears to frequently exist in large numbers within the blood, i.e, the serum. The erythrocytes (red blood cells) can *appear* to be in good form even with the presence of the chlamydia-like organism in the serum external to the cells.

2. The chlamydia-like organism does appear to be attracted to the outer wall of the erythrocytes.

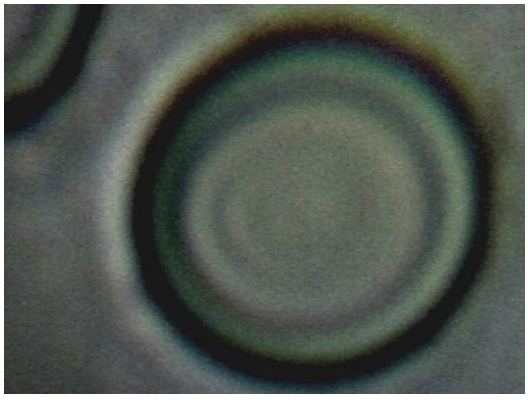
3. In the early stages of intrusion, the chlamydia like structures can surround and bind to the outer wall of the erthryocyte, with no damage to the cell wall necessarily apparent.

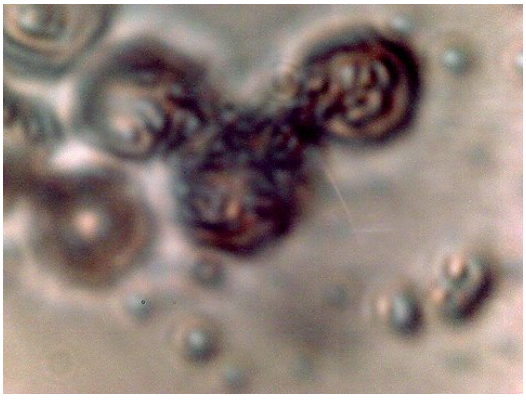
4. Upon increased intrusion of the cell, the chlamydia-like organism will be seen to have been incorporated within the cell wall. It is at this point that a breakdown of the integrity of the cell wall can often be observed.

5. Upon further intrusion, the chlamydia-like organism can exist in relatively large numbers within the erythrocyte. Further damage to the integrity of the cell occurs.

6. In extreme cases observed thus far, the integrity of the cell wall is radically compromised, along with the general structure of the red blood cells. Existence of the chlamydia-like organism can be rampant within the blood. The functioning of the blood would appear to be seriously impaired at this point and this is expected to have a major impact upon the health of an individual. The pleomorphic organism under study (i.e., mycoplasma-like) is also commonly observed under these conditions. Skin lesions (eruptions) and anomalies, such as filaments, may also be more common at this stage of the condition.

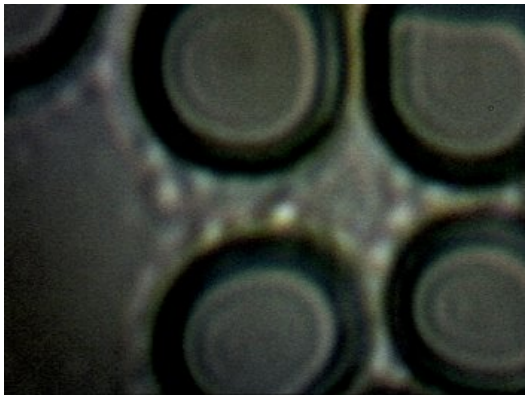
PHOTOGRAPHS:



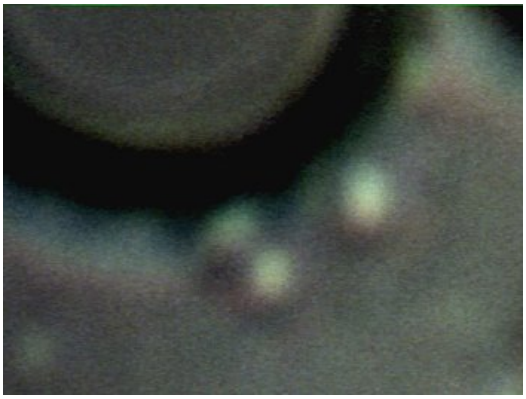


Control photograph of human red blood cell (erythrocyte). Integrity and uniformity of cell is apparent. No visible damage from any external structures or organisms. This same individual has exhibited seriously compromised erythryocytic form in the past several years. No obvious or major external manifestations (skin) of the Morgellons condition have been exhibited by this same individual during that same time period. Certain protocols being followed during that same period may have influenced the improvement of erythrocytic form. This image is a result of improved microscopy developments over recent months. Approx. magnification is 15,000x..

The condition of the blood of the same individual as reported on to the left, but approximately two years ago. This observation was reported in the paper entitled "Morgellons : A 5th, 6th & 7th Match", dated January 21, 2008. It may be worthwhile to revisit that paper, as it describes numerous similarities of form between different sample types, both biological and environmental. One significant aspect of this photograph is the exposed presence of large numbers of the chlamydia-like organisms INTERNAL to the red blood cells. This was accomplished with the Gram stain process.. The result of the testing procedure was Gram-negative and this is one of many factors that established chlamydia-like organisms as a prime candidate for identification. Please note that it is EXPECTED that the erythrocytes (red blood cells) are to be damaged from this testing process, and the integrity of the red blood cells is not relevant in this particular photograph. The importance of this photograph is the revelation of the chlamydia like organisms in large numbers internal to the cells, and the numerous sample types (environmental and biological) in which this particular organism was observed. Magnification approx. 7000x.

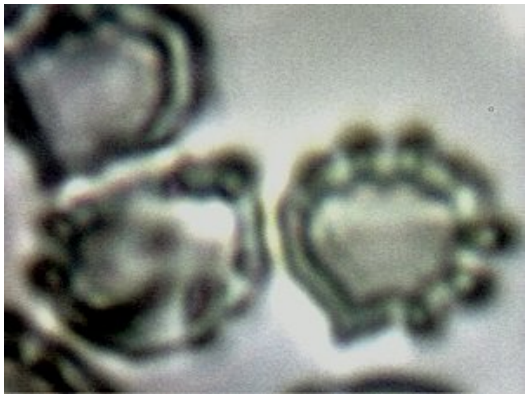


A critical photograph of discovery. This photograph is the result of the improved microscopy techniques developed over the past several months. The photograph reveals, for the first time, that even if the erythrocytes are intact and of good form, the chlamydia-like organisms can exist in large numbers external to the cell, or IN THE BLOOD SERUM. This fact was discovered only because of minor variations in focusing of an improved and modified camera A human blood cell is on the order of 6-8 microns in diameter; the chlamydia-like structures are sub-micron (estimated 0.3 – 0.8 microns) and can easily escape detection with conventional microscopy. This observation establishes that the intracellular presence of the chlamydia-like organism is not a sufficient basis upon which to assess the health of the blood. The presence of the organism within the blood, i.e, serum or cells, provides a more comprehensive assessment of factors that may affect the health of the individual. In addition, previous papers clearly present evidence that the presence of this particular organism is not restricted to the blood. Please see the paper referred to, along with others on this site, to review the ubiquity of the organism and related forms. Magnification approx. 10,000x.



Digital magnification focusing on the chlamydia-like organism external to the erythrocyte (red blood cell) wall. Approx. size is 0.5 microns; this size range represents the transition range between bacteria and viruses. Indeed, chlamydia species, upon discovery, were first categorized as viruses. Camera techniques and equipment are critical factors in making the presence of this organism visible. Magnification (digital enhancement) approx. 30,000x.

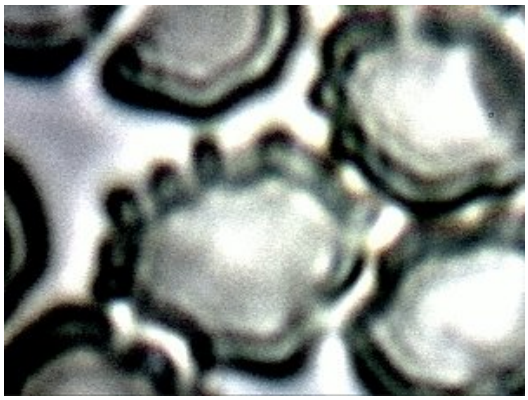
Another critical photograph in the discovery process. It has become apparent now through observation how cellular damage to the erythrocyte occurs. All indications are that the chlamydia-like organism is attracted to the cell wall of the erythrocyte. This photograph shows clearly the alignment of the organisms on the outside wall of the red blood cells. The linkage between the presence of the organism external to the cell (in the serum) and its attachment to the cell itself is a critical mechanism of discovery that is reported here. Furthermore, this photograph also shows the ensuing damage of the cell wall that occurs with the sustained presence of the organism in contact with the cell. This photograph comes from observation of a separate individual than that reported on in the above four photographs. This individual also does not manifest any external skin symptoms of the so-called "Morgellons" condition; the failure of skin anomalies as a suitable criteria to establish the existence of the *condition* has been extensively asserted by this researcher within numerous prior papers. Magnification approx. 10,000x.



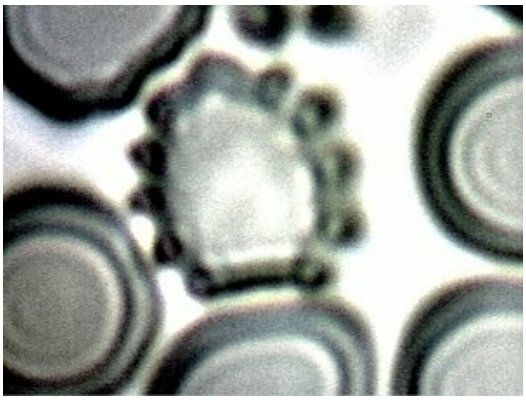
An additional important photograph of discovery. This set of photographs are of the same individual as reported on in the top set of four photographs., APPROXIMATELY THREE WEEKS LATER in time. This photograph shows that dramatic changes in the condition of the blood, at least with respect to this particular organism, can occur within a period of only three weeks.. This also has since been shown to occur in reverse (again, within approximately a three week period), with a corresponding improvement in health that may or may not correspond to certain protocols under investigation. In this case, however, the existence of the organism external to the cell appears to be a resident condition, regardless of the resistance level of the cells to internal invasion. The life cycle of a red blood cell is approximately three months.

Further evidence of incorporation of the chlamyida-like organism into the external wall of the erythrocytes. This can be considered as an earlier stage of the invasive process. Cellular deformation is also apparent, as is commonly observed as an impact from the organism. Upon severe invasion, the integrity of the erythrocytes is radically compromised and the organism occurs frequently within the cell (i.e., intracellular) in addition to causing exterior wall damage. Magnification approx. 10,000x.

It is to be considered only as anecdotal information, but it is a fact that this individual encountered a significant onset of illness in the midst of this same time interval. The symptoms of illness did have a certain level of correspondence with those that are associated with Chlamydia pneumonia. It is also to be considered as anecdotal information, but aerosol operations of significance were conducted during the earlier portion of this same three week interval and the week preceding. No conclusions regarding direct association with a particular illness or atmospheric conditions are being made at this time. Magnification approx. 10,000x.



An additional photograph which demonstrates the effect of the chlamydia-like organism upon the erythrocytes and the mechanisms of damage. Magnification approx. 10,000x.



An additional photograph which demonstrates the effect of the chlamydia-like organism upon an erythrocyte and the mechanisms of damage. Magnification approx. 10,000x.

Additional Note : The term “eruptions” vs. “lesions” has been introduced into this paper due to discussions with an individual of medical background. This individual has studied and observed the dynamics of certain skin anomalies in detail. It has been suggested that this term may be more accurate in describing the specifics of presentation, and it is correspondingly offered to the readership for consideration. Appreciation is extended to this individual for the discernment that has been provided.

DNA CULTURE RESULTS

December 28, 2009

Categories: Genetics, Microbiology
Tags: dna, extration, method

DNA CULTURE RESULTS

Clifford E Carnicom

Dec 28 2009

I am not offering any medical advice or diagnosis with the presentation of this information. I am acting solely as an independent researcher providing the results of extended observation and analysis of unusual biological conditions that are evident.

A method of extracting DNA samples from living forms has been established. The protocol being followed is that from the Genetic Services Learning Center at the University of Utah[1]. The methods have been applied successfully to human and fruit samples. Equipment to examine the internal structure of the DNA samples is not available at this time; visual microscopy techniques at relatively high magnification (~10,000x) are available.

The initial finding is that the Chlamydia-like organism under extensive study with respect to the so-called “Morgellons”

condition occurs in relatively large numbers within the human DNA samples that have been studied and that it can be readily identified with sufficient magnification. This further confirms the supposition that this particular organism appears to broadly distributed within human physiology, and that its existence should not be restricted to blood sample examination. Thus far, this particular organism has been found within dental samples, saliva samples, urinary samples, red blood cells (erythrocytes) and anomalous skin filaments. The particular DNA sample examined here is developed from human saliva.

INITIAL RESULTS :

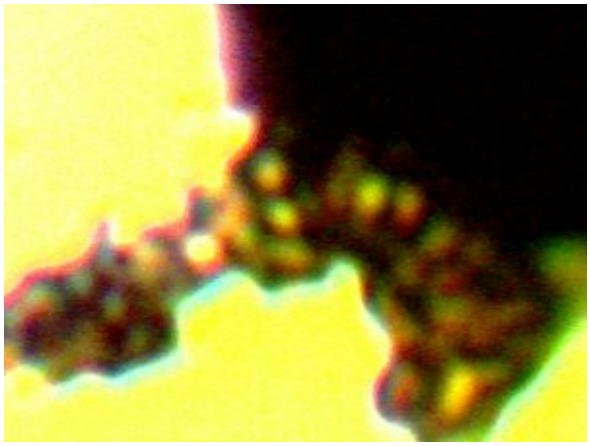
Human DNA sample extracted from saliva. .

Magnification approx 300x.

Human DNA sample extracted from saliva. .

Magnification approx 300x.

The Chlamydia-like organism identified within the human DNA sample. . This photograph is taken from the original sample prior to any cultured result. The size of the individual organism, as reported previously, is approximately 0.5 to 0.8 microns. The limit of conventional light microscopy is. approximately 1000-2000x. Magnification approx.10,000x.

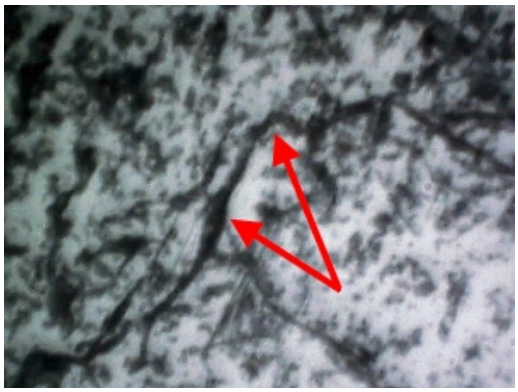


An additional representative cluster of the Chlamydia-like organisms identified within the human DNA sample. . This photograph is taken from original sample prior to any cultured result. The size of the individual organism, as reported previously, is approximately 0.5 to 0.8 microns.

Magnification approx. . 10,000x.

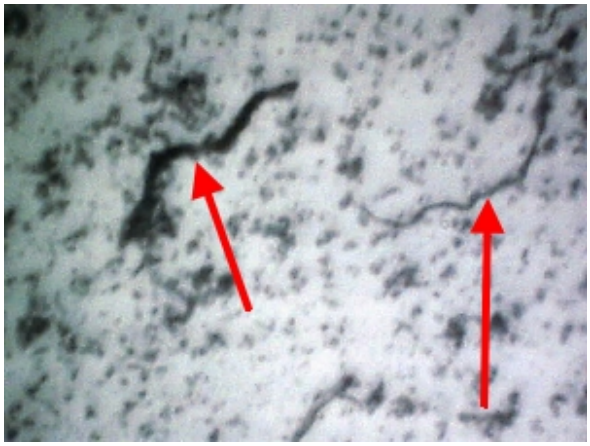
Secondly, the Chlamydia-like organism has been successfully cultured from its origin in the human DNA sample. The culture medium is again red wine. Most biochemical reactions take place within a specific pH range, and the chemistry of wine will become increasingly important in the understanding of why this particular medium is repeatedly favorable toward a multitude of culture developments under way. The chemistry of wine is relatively complex and eventually the various components that are favorable toward growth will require isolation and identification. It is presumed that the pH of red wine (acidic) will be one important factor to be identified within this future analysis as it takes place; a first hypothesis may be that this pathogenic form favors an acidic environment within the body. It is also reasonable to suggest the hypothesis that a shift toward increased alkalinity within the growth medium may eventually serve as an inhibiting growth factor. The current culture under analysis is approximately 7-8 weeks of age.

CULTURE RESULTS :



A culture of the DNA sample in a red wine medium. . The earlier stages of the identified pathogenic cycle are contained within this level of growth. This includes extensive development of the Chlamydia-like organism, the pleomorphic structures (tentative candidate is Mycoplasma-like) and the eventual encasing filament structure (red arrows). The erythrocytic form is not identified within this culture. Age of culture is approximately 7 to 8 weeks.

Approx. magnification 300x.



An additional view of the culture of the DNA sample in a red wine medium. Arrows point to the early development of the filament stage of the growth cycle. The background growth is composed primarily of the Chlamydia-like organism. The age of the culture is approximately 7 to 8 weeks.

Approx. magnification 300x.

A focus on the Chlamdia-like organism that has developed from the

Another. example of the Chlamdia-like organisms that have developed from the culture of the human DNA sample (red circle). In addition, the

Third, the DNA sourced culture that has been developed demonstrates identical growth to that which develops from the dental filament cultures.

In addition, as reported earlier, an environmental source for an identical growth cycle has been established; this is the unusual airborne filament sample that has been extensively reported on over the years. The identification of the nature of this filament sample has been refused by the U.S. Environmental Protection Agency (EPA). Please refer to the paper entitled "Morgellons : An Environmental Source" for additional documentation on this recent development.

Lastly, It is now to be reported that the growth from the DNA culture as shown in this report is identical (to the magnification level that is available) to that of the airborne environmental sample culture described in the earlier report .

The level of congruence between environmental sampling, biological sampling, and culture developments is sufficient to merit extensive and detailed study and discussion with respect to the *Morgellons* condition. Additional preliminary studies also indicate that these examinations should be extended beyond consideration of the human organism.

Reference:

1. . How to Extract DNA from Anything Living, University of Utah, Genetic Sciences Learning Center, http://learn.genetics.utah.edu/content/labs/extraction/howto/