UNICELLULA CANCRI & THE PROTOZOA IN THE HUMAN DISEASE MICROBIOME

Lectures on Unicellula Cancri, Part V

by Prof. Charles McWilliams, ©2023
School of Monastic Medicine, Sacred Medical Order, Nevis, West Indies

In the first four articles I outlined several obscure aspects of the cancer enigmas:
1. whether cancer is an infectious disease due to a microorganism(s) or an endogenous cell of the host gone awry;
2. the cancer diathesis, a constitutional predisposition toward an impending development, as needing a precondition of devitalization and infection;
3. a period and history of prior acute infectious disease as a seed condition; and
4. a cyclical period of latency of an infectious seed microorganism as the diathesis until a tumor becomes apparent and fulminant.

The obvious question regarding cancer down through the decades of scientific inquiry is to how the natural process from animal cell devolves into malignant speciation and then takes on the appearance, for all intents and purposes, of a protozoal animalcule. It is a question of biology from the outset, and then investigations could proceed to microscopy, and then chemistry. However, in the early 20th century, medicine turned away from biology and towards chemistry for answers without first understanding the macroscopic processes that would first pose the pertinent questions. When Watson and Crick advertised their "discovery" of DNA as the material for the genetic "code," industry and later the "war on cancer," exclusively turned toward an answer in chemical bonding without understanding the macroscopic process as a function of a larger natural order.

Biodiversity underlies ecosystem functioning. Cancer can be viewed as a question of the role of mother nature, as many in the 19th and 20th centuries have done. The contemporary Gaia Hypothesis was founded by Lynn Margulis and chemist James Lovelock. It proposed that living organisms interact with their inorganic surroundings on Earth to form a synergistic and self-regulating, complex that maintains and perpetuates the necessary conditions for a living, thriving, planet Earth. It is a vital, organic force that directs inorganic chemistry. Taking this study to humbling heart, one sees and believes that this organic, vital force supercedes and directs inorganic chemical principles and properties in the living world. Medical science has remained content to study the dead world of organic chemistry by using such technology as the electron microscope, inorganic dyes and stains for the world of microorganisms, and chemical techniques such as polymerase chain reactions.

The observations of the surgeon is that of the actual tumor tissue itself, while the clinician deals with the human side of the equation, the signs, the symptoms, the life, and the suffering. The gross examination of the tumor is when the pathologist uses their own senses to examine the tumor and compare it to a healthy, excised organ. The pathologist looks at the sample's size, color, shape, and consistency, noting anything that looks abnormal. This information is useful in staging the cancer development, and then to prepare biopsy samples for microscopic analysis. Here the pathologist embeds the sample in a wax cube, then slices it into thin pieces to see the individual layers of cells. The dead samples are then dyed with chemicals that stick to cells with specific characteristics, making it easier to see different cells and structures within the cells. Sometimes samples are processed as frozen

sections instead of being put in wax. At this point, the sample is ready for analysis under a microscope. Pathologists then takes note of:

- The size and shape of the cells.
- The size and shape of the cell's nucleus, the center of the cell that holds most of its genetic material.
- The arrangement of cells: Do they look as they should in healthy tissue?
- The margins around the edges of the tumor are called the surgical margins. Are they diseased or are they normal at the border?
- Estimate as to how fast the suspected cancerous cells may divide and how much the tumor has grown into the tissues surrounding it towards malignancy.

The pathologist uses these characteristics to determine a cancer's type, grade, and prognosis.

Observations in the cancer development are guided, if not controlled, by preconceptions of the observer. That is really the dilemma oncology faces, it is a question of hypnosis. Oncology has been asleep into the developments of biology since the early days of the cancer problem that emerged with the industrialization of society, the advent of chemical dyes, and emergence of electronic technology.

In 1863, Rudolf Virchow put forward a hypothesis that infiltrated immune cells reflect the place where cancer lesions begin and appear in the inflamed tissue. Later, Dvorak showed that carcinogenesis and inflammatory conditions have common developmental pathways, such as proliferation, increased cell survival and migration, and enhanced angiogenesis which are controlled by "growth factors", proinflammatory cytokines and proangiogenic factors. Moreover, it was observed that the cells involved in inflammation also infiltrate cancer tissue and defined cancer as a "wound that does not heal". Therefore, it was believed that in order to fully elucidate the role of an inflammatory condition in endogenous carcinogenesis, it should reflect a profound understanding of what cancer is. "Pathological inflammation", the acute phase response of moderate intensity leading to chronic inflammation was involved in neoplastic *transformation* and stimulation of cancer growth of the endogenous cell. Therefore pathologists began to think that the inflammatory conditions of the host human cell was the origin of malignant growths and were the same for all types of tumors.

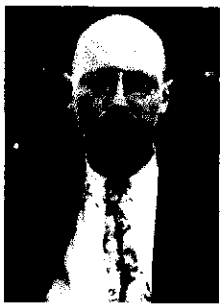
Oncologists today have listed as many as 200 types of differentiated cancer tissues and many thousands of undifferentiated tumors and therefore, really unable to see any uniform process or origin of the cancer cell. A diverse study of biologic literature and experiments outside academia has shown over and again that typical tumors behave as parasite infections in humans and animals that are mistakenly thought and called "tumor cells" thought to originate from the endogenous host. For oncologists it remains a mystery why tumor cells, which are believed to come from the normal ones of the host, behave and appear so radically different, simply because I believe they are hypnotized to think so. For decades scientists have constantly compared tumor and normal cells and tried to convince themselves, others, and the world that they are identical in origin. Yet, many earlier researchers and authors, since the time of Virchow, have discovered a more than a similarity between the cells of a tumor and single-celled parasites. For example, Tamara Lebedewa reports of L. Sokolovsky, in his work "About the Biological Nature of Malignant Tumors" wrote:

"A malignant cell has properties not of today's single-celled organisms, but of that period of evolution when the forming of multi-cellular organisms took place. It is possible that this is connected with the

aggressive conduct of the malignant cells, since the survival of single-celled organisms demanded such aggressiveness at that time. Zuss, Kintsel, Skribner, who thought that they would get strains of the tumor capable of intertwining through the bites of bloodsucking insects thus transferring separate cells, also didn't exclude that a malignant tumor was actually a colony of single-celled parasites."

D. Golubev, in his "Guide to the Application of Celled Cultures in Virusology" gives a comparison similar as this:

"Lines of intertwining of cells arise from primary cultures whose separate cells display the ability to form colonies and have the potential of unlimited reproduction outside the organism and relative autonomy, making them like bacteria and simple single-celled organisms."



The origin of these primitive "separate cells" was explained by prestigious Professor Valentine Dogiel, a famous Russian Zoologist in his book "General Parasitology," where he wrote that the primitive, single-celled parasites are able to exist in any living organ or tissue. He has been considered the founder of *evolutionary parasitology* and was the author of his influential textbook of parasitology in Russia. Therefore, when tissue biopsy is taken for an experiment, there can always be parasites which, expressing their natural, parasitic autonomy in the new medium, begin to rapidly reproduce, which is inherent in the nature of parasites in the natural, living world. Virtually no academic cancer scientist has ever compared tumor cells with the natural behavior of single-celled parasites, especially with the protists of malaria and the trichomonads.

While above ground biodiversity is biologically well studied, the below ground microbiome of protists, remains largely unknown, as does the organic, chemical world of fulvic and humic acids. As we know, what happens in soils could equally, and usually does, happen in the human gut microbiome. Protists constitute the vast majority of the world's eukaryotes and are functionally and chemically extremely versatile, not only in soils but as malaria proves, equally in the *human disease microbiome*. It is instructive to understand, in soils, protists are the main consumers of bacteria and fungi and thereby drive elemental cycling of the Earth. Soil protists are mostly tiny (<30μm long) yet abundant as hundreds of thousands per gram of soil. For example, phototrophic soil protists, almost equal to algae, fix carbon into the soil. Diverse sporozoa and other groups of soil protists are animal parasites and that contribute to vegetative and animal diversity. Soil scientists are only beginning to understand environmental drivers of protist communities in soils and observing that protist communities are differently structured than their bacterial and fungal counterparts, just as they are in human ecology. Protist soil communities; as gut microbiome is in malaria, Chron's disease, Traveler's diarrhea, vaginal trichomoniasis, giardiasis, etc., are affected by soil moisture, temperature, and other abiotic factors, such as pH and litter chemistry, that contribute to shaping protist communities.

Indeed, holistic insights into soil microbiome structures in natural soils, especially in diverse biomes such as the tropical rainforests, remain unexplored. Soil microbiome studies suggest that protists are key microbiome components that drive vegetation succession towards climax flora of the above ground forests. Microbiomes, whether soil or aquatic, are stimulated by higher loads of animal and plant pathogens since protists are pathogen gobblers. At the same time, an increase in microbiome complexity towards healthy climax vegetation, as enhanced system stability, plays out equally in humans who adopted a varied diet, rich in fruits and vegetables.

Tissue biopsies, stained bacteria, tissue samples examined under electron microscopy, chemical products run through electronic analyzers, are static, end-point manifestations of thriving life processes, whether healthy or morbid, are remain products of a thriving Gaia. They present static, frozen pictures and act like pieces of a puzzle that can or cannot paint a true picture of complex processes. The usual end product of research is a graphic with explanation of multiple and complex developmental steps. One graphic, wrongly interpreted, can lead to a long trail of invalid interpretations, that then develop into a theme or template for further scientific research. Evidence supports that the pivotal conclusion, that cancer cells develop from normal cells of the host, was a very wrong assumption from the outset.

The 19th century saw the birth of scientific oncology with use of the modern microscope in studying diseased tissues. Rudolf Virchow, often called the founder of cellular pathology, provided the scientific theme for the modern pathologic study of cancer. As the resolution of microscopes improved, cells were recognized as the fundamental structural and functional units of plants and animals, setting the stage for the cellular hypotheses about cancer to emerge, but with dissenters. Johannes Müller (1801–1858) devoted his efforts to the microscopic study of tumors and, in 1839, published - *On the fine structure and forms of morbid tumors* - where he concluded that cancer originated, not from normal tissue, but from "budding elements," but which due to microscopic resolution at that time, he failed to identify. Adolf Hannover (1814–1894) postulated that cancer arose from a mysterious "cellula cancrosa" that was different from a normal cell in size and appearance. However, Rudolph Virchow (1821–1902), the emerging famous pathologist and politician pushed the view first articulated by Alfred Armand Louis Marie Velpeau (1795–1867): after examining 400 malignant and 100 benign tumors under the microscope, Velpeau anticipated the genetics basis of cancer, he wrote:
"The so-called cancer cell is merely a secondary product rather than the essential element in the disease. Beneath it, there must exist some more intimate element which science would need in order to define the nature of cancer."

With these small pieces of the cancer puzzle slowly falling into place, the true nature of cancer would become entrenched into the academic world. The "code" governing its development, growth, and dissemination from an endogenous cell of the host remained a mystery until Watson and Crick's DNA, while cancer treatment by eradication continued to be whimsical and inefficacious; and today has become nearly and totally discredited. The voice of dissenters have been obscured, obfuscated, if not persecuted. The present-day oncology almost exclusively relies on genetic research. Going back to Virchow, Velpeau, and their followers concluded that malignant cells are derived from benign cells of multi-cellular organisms based on the cellular concept of pathology while nearly ignoring other biological features.

Tamara Lebedewa reports that Professor M. Nevyadomsky, more than a half century ago asserted that oncology should be a branch of parasitology, and cancer is more than just a tumor, but reflects the overall sickness of the host. He proved this experimentally by separating the strain of a tumor with separate cells transferred by the bite of bloodsucking insects. The experiments showed that a malignant tumor is an aggregate of single-celled parasites. He also discovered tumor cells in the blood and all organs of animals just twelve hours after injecting them with a live emulsion of a cancer tumor. As long back as fifty years ago, L. Arendarevsky observed and video-recorded the processes where the tumor cells were converted into amoeba-like and flagellate forms, she reports. In addition, Russian publications, as "About the biological nature of malignant tumors" by L. Sokolovsky., highlighted the "Achilles' heel" of the present-day oncology, which can give no biologic interpretation of progressing

malignant tumors, no proven genotype, valid proof of pathological, genetic differentiation of a host cell into malignancy and so on. It is not clear as Warburg showed why the malignant tumors feature anaerobic glycolysis going back to the ancient ecology, when there was little oxygen on the planet and organisms could live only by glycolytic energy. Oncology cannot chemically account for differences between the so-called malignant cell and it origin from benign ceils in chemical constituents, rate and intensity of protein biosynthesis, genetical characteristics, features of behavior, multiplication and growth. The difference in structure of host cells and malignant ones are great, since the albuminous frame of a nucleus of the malignant cell (nuclear template) radically differs from that of benign cells in genetics, chromosome numbers, etc. to the point they are not all identifiable. Above all, the differences and inconsistencies call in question the standard concept that began nearly two hundred years ago, under which assuming the malignant cells are derived from benign ones, and make us reveal a true nature of cancer. It asks us to examine Einstein's question of stupidity: "doing the same thing over and over again, while expecting different results".

Join Our Study this March 2024

We in are our medical school of Monastic Medicine, will be teaching and exploring our comprehensive course of study on medical parasitology beginning with a zoom presentation this January 16, 2024 (7 PM EST). I invite all members to audit this very unique and comprehensive course, along with our core students actively enrolled now for our doctoral program. A one week microscopy workshop will be held on campus April 22-28, 2024 and many patients will be examined as well as each student. Further, a 3 day symposium is planned for Quito Ecuador, May 17-19, 2024 (pending) as a course wrap up and international exchange with our Brothers and Sisters there where parasitology is taught routinely to medical students. The pertinent, and hard to obtain German texts, have already been scanned and posted on the school website, translated into English and Spanish. In addition, the study course includes a comprehensive video series with accompanying textbook on medical parasitology, probably the most ignored study in the world's medical curricula. Further, and most importantly, are examined the treatment protocols of Weber, Lebedewa, and others.

Since the onslaught of the Covid "vaccine," strange objects and artifacts are being witnessed in blood microscopy by hundreds of microscopists. It is vital that progressive doctors take on this study now of parasitology along with the new bacteriology and virology. Ms. Lebedewa's explanation of bone megakaryocytes provides us the link to the production of abberant thrombocytes, as well as "turbo cancer" by a parasitic pathway. Now identified, we have a solid ground for therapeutic implementation and discovery.

Here is the online course agenda for those members who wish to enroll or audit:

World's most unique course in Parasitology, Cancerology, & Natural Hygiene -- Diploma Course

includes opportunities in training for functional light microscopy for:

• Live blood analysis LBA.

• Heitan dry blood HDB.

• Weber flame blood smears WFB.

• Weber Parasite blood smears WBS.

• PAP smears.

Applicant must be a Church Member and have prior education in basic biology.

1. Parasitic Diseases Video Course, a 45 video lecture series (~30 hrs.) that explores the biology and pathogenesis of eukaryotic and protozoal parasites. Includes Z-Library link to the instructors supplementary textbook.

2. Doc's zoom lecture series on GAIA biology, microscopy screening, cancerology, cell biology, and natural therapeutics.

3. Bowel Ecology & GI Tract Healing a 30 video lecture series (~30 min. ea).

4. Cancerology For the Vitalist & Hygienist. Online course with lectures and texts, a treasure trove of information and treatment protocols. Provides a historical education on the "other schools" who early on went against the mainstream and the choke-hold held by Big Pharma and the American Medical Association. Thus, one can expect only to learn gems for practitioners who will struggle against the monster called cancer.

5. Selective download of rare books, translated materials, etc. not available elsewhere.

6. Unique composite podcasts [Doc's Monastic Medical] on parasitical diseases, food & waterborne illnesses, etc.

7. Training available for functional light microscope for Weber blood mounts (includes on board video monitor, blood charts); Heitan ROT mounts, PAP smears, Live Blood Cell analysis, Urinoscopy; etc.

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https://panamint.wufoo.com/forms/parasite-course-scope

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