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The Archaeal Induced Stem Cell Conversion Produces an Epidemic Benjamin Buttons Reverse Aging Syndrome Leading to in Neurodegenerations – Alzheimer's Disease, Parkinson's Disease and Motor Neuron Disease

Introduction

The global warming produces increased acidity and atmospheric carbon dioxide resulting in extremophilic archaeal symbiosis in humans. The archaeal symbiosis results in neanderthalisation of humans. The archaea induced uncoupling proteins producing the primitive Warburg phenotype and stem cell metabolonomics. The archaeal metabolites of cholesterol digoxin, bile acids and short chain fatty acids induce uncoupling proteins. The lysosomal enzymes a marker of stem cell conversion are markedly increased along with genesis of the archaeal phenotype in neurodegenerations-alzheimer's disease, parkinson's disease and motor neuron disease. In all these systemic diseases there is somatic cell transformation to stem cell and lose of function. The neurons become immature and lose their dendritic spines and connectivity. This results in loss of neuronal function and reversion to archaeal magnetite mediated extrasensory perception of low level of EMF. Exposure to low level of EMF results in brain changes. This results in prefrontal cortex atrophy. The primitive brain areas of cerebellum and brain stem become hypertrophic. The somatic and neuronal cell proliferates and there is neanderthalisation of the brain and body[1-17].

Reason judgment and logic is a function of the cerebral cortex especially the prefrontal lobe. Prefrontal lobe function needs dynamic synaptic connectivity which is produced by jumping genes mediated by human endogenous retroviral sequences. The cerebellum is the site of impulsive behavior and the unconscious behavior. The cerebellar and subcortical brain connections are predominantly archaeal colony networks. The global warming and exposure to low level of EMF leads to actinidic archaeal growth in the brain and increased archaeal magnetite mediated perception of low level of EMF. This leads to prefrontal cortex atrophy and cerebellar dominance. The conscious becomes minimal and unconscious brain

takes over. The study assessed archaeal growth as assessed by cytochrome F420 activity and stem cell type metabolonomics in neurodegenerations-alzheimer's disease, parkinson's disease and motor neuron disease[1-17].

Materials and Methods

The blood samples were drawn from neurodegenerations-alzheimer's disease, parkinson's disease and motor neuron disease. The estimations done in the blood samples collected include cytochrome F420 activity. Blood lactate, pyruvate, hexokinase, cytochrome C, cytochrome F420, digoxin, bile acids, butyrate and propionate were estimated.

Results

The blood samples of neurodegenerations-alzheimer's disease, parkinson's disease and motor neuron disease had increased blood lactate and pyruvate, increased RBC hexokinase, increased serum cytochrome C and serum cytochrome F420, increased serum digoxin, bile acids, butyrate and propionate. The disease state had increased cytochrome F420 activity. The serum cytochrome C levels in the blood were increased. This suggested mitochondrial dysfunction. There was an increased in glycolysis as suggested by increased RBC hexokinase activity and lactic acidosis. Owing to the mitochondrial dysfunction and pyruvate dehydrogenase inhibition there was pyruvate accumulation. The pyruvate was converted to lactate by the Cori cycle and also to glutamate and ammonia. This metabolism is suggestive of the Warburg phenotype and stem cell conversion. The stem cells depend on Warburg anaerobic glycolysis for energetics and have a mitochondrial dysfunction. The

lysosomal enzyme beta galactosidase activity was increased in the disease group suggesting stem cell conversion.

Table 1.

Group	Cytochrome F 420		Serum cyto C (ng/ml)		Lactate (mg/dl)		Pyruvate (umol/l)		RBC hexokinase (ug glu phos/ hr/mgpro)	
	Mean	± SD	Mean	± SD	Mean	± SD	Mean	± SD	Mean	± SD
Normal population	1.00	0.00	2.79	0.28	7.38	0.31	40.51	1.42	1.66	0.45
MND	4.00	0.00	12.65	1.06	24.28	1.69	95.44	12.04	9.30	3.98
AD	4.00	0.00	11.94	0.86	22.04	0.64	97.26	8.26	8.46	3.63
PD	4.00	0.00	12.81	0.90	26.20	5.29	97.77	13.24	8.99	3.27
Low level background radiation	4.00	0.00	12.26	1.00	23.31	1.46	103.28	11.47	7.58	3.09
F value	0.001		445.772		162.945		154.701		18.187	
P value	< 0.001		< 0.001		< 0.001		< 0.001		< 0.001	

Table 2.

Group	ACOA (mg/dl)		Glutamate (mg/dl)		Se. ammonia (ug/dl)		RBC digoxin (ng/ml RBC Susp)		Beta galactosidase activity in serum (IU/ml)	
	Mean	± SD	Mean	± SD	Mean	± SD	Mean	± SD	Mean	± SD
Normal population	8.75	0.38	0.65	0.03	50.60	1.42	0.58	0.07	17.75	0.72
MND	1.95	0.06	3.14	0.32	94.60	8.52	1.34	0.31	51.16	7.78
AD	2.19	0.15	3.53	0.39	95.37	4.66	1.10	0.08	51.56	3.69
PD	2.13	0.17	3.25	0.40	94.77	2.86	1.50	0.20	46.82	4.73
Low level background radiation	2.14	0.19	3.47	0.37	102.62	26.54	1.41	0.30	51.01	4.77
F value	1871.04		200.702		61.645		60.288		194.418	
P value	< 0.001		< 0.001		< 0.001		< 0.001		< 0.001	

Discussion

The neurodegenerations-alzheimer's disease, parkinson's disease and motor neuron disease tend to have a predominant anaerobic glycolytic metabolism and mitochondrial oxidative phosphorylation is suppressed. The metabolism is

similar to the metabolism of the stem cell. The pyruvate and lactate levels are increased with a decrease in acetyl coenzyme A and ATP. The glycolytic pathway and hexokinase is increased. This indicates a Warburg phenotype depending upon anaerobic glycolysis for energetics. The lysosomal enzymes beta galactosidase a stem cell marker is increased. The cytochrome F420 is also increased as well as the archaeal catabolite digoxin which suppresses sodium potassium ATPase. Bacteria and archaea are supposed to induce stem cell transformation. The induction of uncoupling proteins leads to stem cell transformation. The uncoupling proteins inhibit oxidative phosphorylation and the substrates are directed to anaerobic glycolysis. Digoxin by inhibiting sodium potassium ATPase can increase intracellular calcium, induce mitochondrial permeability transient pore function and uncouple oxidative phosphorylation. The side chain of cholesterol is catabolised by archaea to butyric acid and propionic acid which uncouple oxidative phosphorylation. The archaeal side chain hydroxylase convert cholesterol to bile acids which uncouple oxidative phosphorylation. Thus archaeal symbiosis in the cell results in cholesterol catabolism and the catabolites digoxin, bile acids and short chain fatty acids uncouple oxidative phosphorylation, inhibit mitochondrial function and promote anaerobic glycolysis. The conversion of somatic cells to stem cell helps in archaeal persistence within the cell and symbiosis. Mycobacterium leprae infection can convert Schwann cells to stem cells. Archaeal infection produces somatic cell conversion to stem cells for archaeal persistence. The conversion to stem cell results in proliferation and loss of function resulting in neurodegenerations-alzheimer’s disease, parkinson’s disease and motor neuron disease. Stem cell conversion of neurons and loss of function results in development of a new neuronal phenotype[1-17].

The neuronal cell in neurodegenerations-alzheimer’s disease, parkinson’s disease and motor neuron disease behaves like the stem cell. It is plausible to

hypothesize a somatic cell conversion to stem cell in these disorders. The differentiated cells by archaeal induction get converted to stem cell. The stem cell is an immature cell with loss of function. The neurons lose their dendritic spines and loss of connectivity. The brain function becomes primitive. The neurons are adendritic and disconnected. This results in complex brain structures like the modern cerebral cortex and prefrontal cortex atrophy. The primitive parts of the brain the brain stem and cerebellum hypertrophies. This results in neanderthalisation of the brain with a prominent occipital bun and atrophied prefrontal cortex. The prefrontal cortex atrophy results in loss of logic, judgment, reasoning and executive functions. The hypertrophy of the cerebellum and brain stem results in dominance of impulsive behavior. The loss of function of the neurons results in neurodegenerations-alzheimer's disease, parkinson's disease and motor neuron disease. The increased archaeal induced proliferation of stem cells results in a big sized brain and trunk as in Neanderthals. This archaeal symbiosis produces neanderthalisation and a stem cell syndrome. This produces reverse aging which can be called as an epidemic Benjamin Button syndrome. The lymphocytic stem cells have uncontrolled proliferation and results in autoimmunity in neurodegenerations-alzheimer's disease, parkinson's disease and motor neuron disease. Stem cell markers are increased in neurodegenerations-alzheimer's disease, parkinson's disease and motor neuron disease and the neurons lack dendritic spines. The unconscious brain is formed of an archaeal colony network and is adynamic and inflexible. There is an epidemic of neurodegenerations-alzheimer's disease, parkinson's disease and motor neuron disease. The loss of function of neurons leads to increased extrasensory perception via archaeal magnetite. The perception of low level EMF leads to neurodegenerations-alzheimer's disease, parkinson's disease and motor neuron disease[1-17].

The development of cerebral cortex requires synaptic plasticity and is modulated by HERV mediated jumping genes. This needs a dynamic brain and the human cerebral cortex evolved due to the jumping genes generated from human endogenous retroviral sequences. The cerebellar world is mediated by the archaeal colony network. The stem cell transformation of somatic cells results in HERV resistance and retroviral resistance. Archaeal digoxin inhibits reverse transcriptase by producing magnesium deficiency as well as modulates RNA viral editing inhibiting retroviral replication. This produces lack of HERV jumping genes in this stem cell brain and lack of synaptic plasticity and dynamicity. The stem cell syndrome is characterized by retroviral resistance. Archaeal symbiosis inhibits retroviral infection. The homo sapiens with less of archaeal symbiosis becomes susceptible to retroviral and other RNA viral infection and gets wiped out. The homo neoneanderthalis are resistance to retroviral and other RNA viral infection and persists. The homo neoneanderthalis dominates all over the world. But the homo neoneanderthalis are prone to civilisational disease like neurodegenerations-alzheimer's disease, parkinson's disease and motor neuron disease. The homo neoneanderthalis becomes extinct after a period of time[1-17].

The archaeal induced stem cell syndrome or neanderthalisation is due to global warming and acid rains resulting in increased extremophilic archaeal symbiosis. The archaea catabolises cholesterol and generates digoxin, bile acids and short chain fatty acids which produce induction of uncoupling proteins. This produces mitochondrial dysfunction and the cell obtains its energetics from glycolysis. Archaeal digoxin produces membrane sodium potassium ATPase inhibition which also contributes to stem cell conversion. The whole body somatic and brain undergoes stem cell conversion and becomes a stem cell phenotype with Warburg metabolic phenotype. The generalized acidity due to global warming and increased atmospheric carbon dioxide also facilitates archaeal growth and

stem cell transformation. The acidic pH due to the Warburg phenotype and increased atmospheric carbon dioxide also results in stem cell conversion. The somatic differentiated cell getting converted to stem cells lose their function and become dysfunctional metabolically, neurologically, immunologically and endocrine-wise. This produces the epidemic Benjamin button syndrome and the human species becomes neanderthalic and a collection of immature stem cells. This results in epidemic neurodegenerations-alzheimer's disease, parkinson's disease and motor neuron disease. The brain becomes converted to a collection of stem cells which are dedifferentiated with loss of function and is like an archaeal colony network. The perception becomes extrasensory and quantal depending on archaeal magnetite. The increased amount of low level EMF perception results in prefrontal cortical atrophy. It also produces cerebellar hypertrophy and the cerebellar cognitive function takes over. This leads on to an epidemic of neurodegenerations-alzheimer's disease, parkinson's disease and motor neuron disease[1-17].

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