

10th MERIDIANTECH-COVID19 Workshop

Bioelectrical Diagnostics & Coherent Therapy

Tuesday 4 August 16.00 Central European Summer Time

Hosted by MEDPREVENT Systems GmbH & Co. KG DE

- **Spaces limited to 20 participants**

To participate in the workshop and further information :

vinvalenzi@gmail.com | **Mobile & WhatsApp: +39 331 13 14 801**

10th MERIDIANTECH-COVID19 Workshop

Bioelectrical Diagnostics & Coherent Therapy

Tuesday 4 August 16:00 CEST –GOO TO TRAINING Meeting ID:

Vincenzo **VALENZI** MD: Director Department of Integrative Medicine and Biophysics UNIFEDER Florence www.cimb.me
Prevention and Care of acute and chronic gastrointestinal disorders in microgravity and daily life driven by Meridiantech

Prof. Giulio **TARRO** MD: Former Head of Unit of Virology Cotugno Hospital Naples IT
The Natural History of COVID-19, it's anomalies, and the return to the normal scientific dialectic and controversial in clinics and therapy, after the crisis of dominium of guides line and protocol

Jamal **AISSA** PhD: LIFE SIGNATURE SA Paris **Some recent observations on interactions between Genome of virus and Humans, and it's critical influence on daily genetic engineering and in the etiopathogenesis of some chronic diseases (in French)**

Dr. med Michael **BAUER**, Raimund **HOFFMAN** Alexisis **ROSANOV** : *MEDPREVENTsystems GmbH, Marktredwitz, Germany*
MedPrevent & PROGNOS system: First data on viral testing and quantitative electromeridiography (qEMG)

Prof. Allan **WIDOM** Physics Department Northeastern University Boston MA 02115
Concerning electro-dynamic methods of killing a corona virus

Konstantin **APYKHTIN** PhD Institute of Gerontology NASU KIEV **R&D in electrophysiology of heart with ECG HRV and MERIDIANTECH**

DEKLANE KIRRAINE CEO ISC Bruxelles **EU4Health: Latest news & news opportunities of R&D IN MERIDIATECH AND CLIMATOTHERAPY**

Meridiantech (TreTechnologies Udine) in the management of disorders of nausea and vomiting in Microgravity

<http://www.cimb.me/files/selezione-scritti-news-valenzici.pdf> pag. 80-84 microgravity



Concerning electro-dynamic methods of killing a corona virus

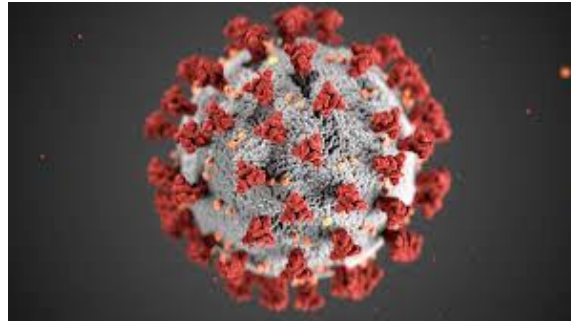
Allan Widom

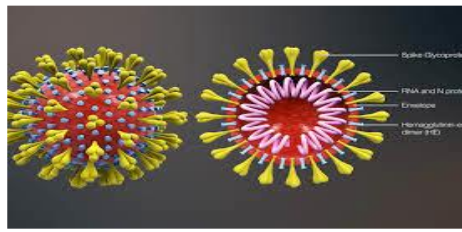
Physics Department Northeastern University Boston

Professor Luc Montaigner, winner of a Nobel Prize for his work on the HIV virus, also helped established the role of the DNA strand nucleus of the E coli bacteria as a kinetic inductive contribution to observed electromagnetic oscillations wherein different E coli cells can wirelessly communicate with one another. (We note only in passing that Luc Montaigner also claims that the COVID-19 virus was artificially prepared at the same lab that was studying the HIV virus.)

Similar wireless communication between corona different viruses should be present for the corona virus as normally pictured below.

FIG 1: Shown color-coded in grey scale and red spikes is a picture of the COVID-19 virus.





Shown is a color-coded picture of the COVID-19 virus along with a cut away showing an inside toroidal inductor RNA strand shown in pink.

The RNA strand “nucleus” of the COVID-19 virus has the physical shape of a toroidal magnetic inductor wound with an RNA strand. The glycoprotein spikes shown in red in FIG 1 and shown in yellow in FIG 2 protruding from the virus surface act electrically as a phase coherent array of electric dipole antennae feeding an electromagnetic signal into the RNA strand inductor. **For the virus to maintain life, glycoprotein spike antennae must maintain detection phase coherence.**

The best-known experimental evidence that quantum electrodynamics phase decoherence can kill a virus is in the recent construction of facemasks that governments are forcing citizens to wear. The fibers of material in the facemask are intertwined with fibers of metal wire say copper. When a virus lands on an insulator surface it can live for days but if the virus lands on a conducting surface, say copper, the virus lives merely for hours. Interleaving the facemask with metallic fibers thereby lowers the COVID-19 virus lifetime.

The dissipative eddy currents in the conducting metal induce de-coherence of the glycoprotein spike antennae arrays.

The above considerations show some promise that non-invasive circuit frequency de-coherence of an electromagnetic wave can kill the COVID-19 virus as an alternative to anti-bodies not quite yet to be developed in a vaccine. However, more research need be done

<https://journals.aps.org/pr/pdf/10.1103/PhysRev.115.485> :

Significance of Electromagnetic Potentials in the Quantum Theory

Y. Aharonov and D. Bohm

Phys. Rev. 115, 485 – Published 1 August 1959

Significance of Electromagnetic Potentials in the Quantum Theory

Y. AHARONOV AND D. BOHM
H. H. Wills Physics Laboratory, University of Bristol, Bristol, England
(Received May 28, 1959; revised manuscript received June 16, 1959)

In this paper, we discuss some interesting properties of the electromagnetic potentials in the quantum domain. We shall show that, contrary to the conclusions of classical mechanics, there exist effects of potentials on charged particles, even in the region where all the fields (and therefore the forces on the particles) vanish. We shall then discuss possible experiments to test these conclusions; and, finally, we shall suggest further possible developments in the interpretation of the potentials.

1. INTRODUCTION

IN classical electrodynamics, the vector and scalar potentials were first introduced as a convenient mathematical aid for calculating the fields. It is true that in order to obtain a classical canonical formalism, the potentials are needed. Nevertheless, the fundamental equations of motion can always be expressed directly in terms of the fields alone.

In the quantum mechanics, however, the canonical formalism is necessary, and as a result, the potentials cannot be eliminated from the basic equations. Nevertheless, these equations, as well as the physical quantities, are all gauge invariant; so that it may seem that even in quantum mechanics, the potentials themselves have no independent significance.

In this paper, we shall show that the above conclusions are not correct and that a further interpretation of the potentials is needed in the quantum mechanics.

assume this almost everywhere in the following discussions) we have, for the region inside the cage, $H = H_0 + V(t)$ where H_0 is the Hamiltonian when the generator is not functioning, and $V(t) = e\phi(t)$. If $\psi_0(x, t)$ is a solution of the Hamiltonian H_0 , then the solution for H will be

$$\psi = \psi_0 e^{-iS/\hbar}, \quad S = \int V(t) dt,$$

which follows from

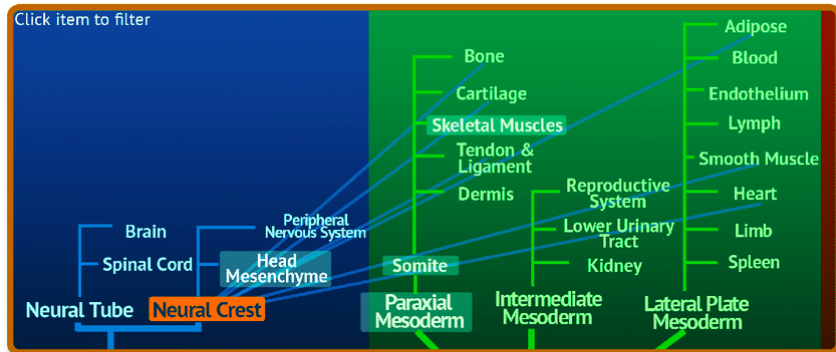
$$i\hbar \frac{\partial \psi}{\partial t} = \left(i\hbar \frac{\partial \psi_0}{\partial t} + \psi_0 \frac{\partial S}{\partial t} \right) e^{-iS/\hbar} = [H_0 + V(t)] \psi = H\psi.$$

The new solution differs from the old one just by a phase factor and this corresponds, of course, to no change in any physical result.

Now consider a more complex experiment in which a single coherent electron beam is split into two parts and

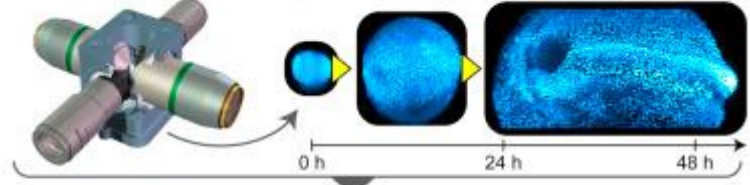
COHERENCE AND POTENTIAL IN LIFE From Zygote to Body Embryogenesis to links between organs, neurophysiology

<http://discovery.lifemapsc.com> LifeMap Discovery (TM) : The Embryonic Development, Stem Cells, and Regenerative Medicine Research Portal

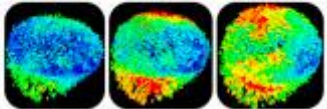


Adaptive light-sheet microscopy for samples with dynamic size/shape

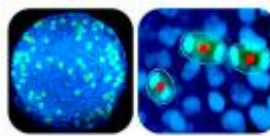
Live imaging of mouse embryos at single-cell level from gastrulation to organogenesis



Whole-embryo analysis of cell movements and divisions



High-resolution mapping of tissue morphogenesis



Registration of embryos and assessment of developmental variability

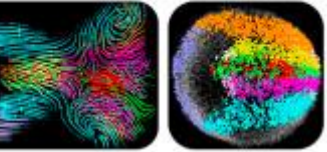
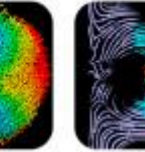
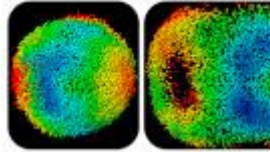


Dynamic, cellular atlas of development

Average mouse embryo

Whole-embryo maps of tissue morphodynamics

Cellular-resolution dynamic fate maps



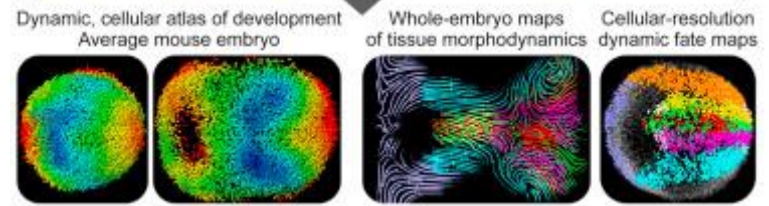
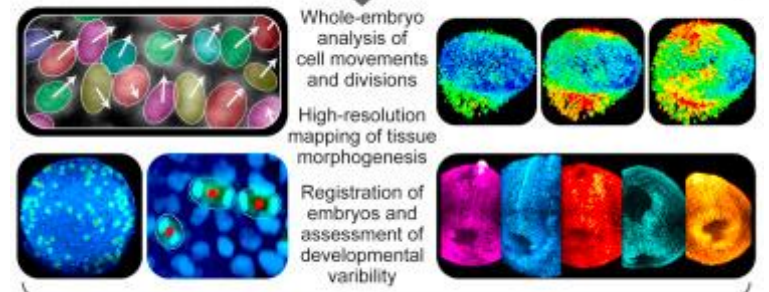
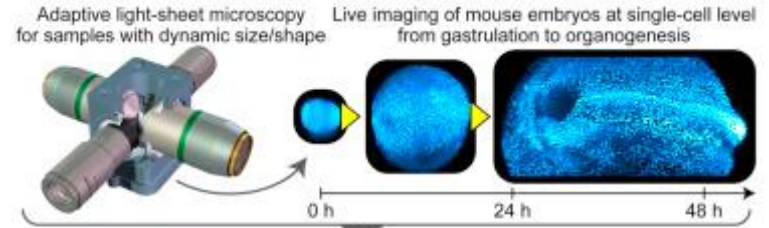
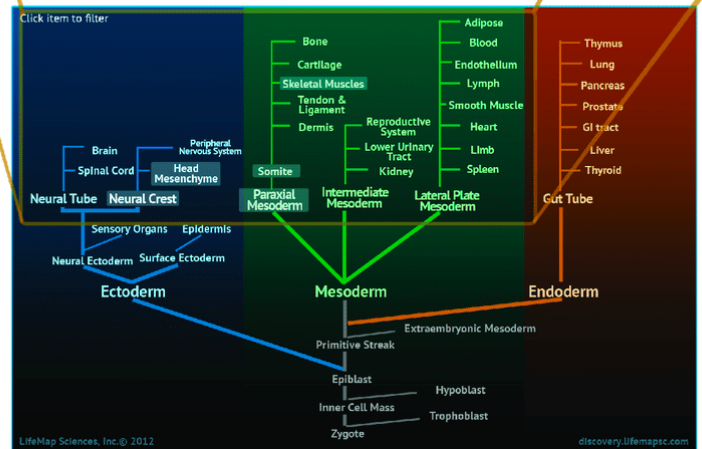
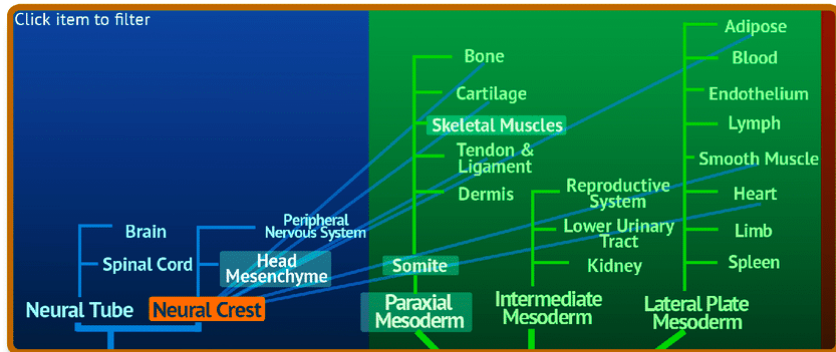
In Toto Imaging and Reconstruction of Post-Implantation Mouse Development at the Single-Cell Level

<https://www.sciencedirect.com/science/article/pii/S0092867418312431>

https://www.researchgate.net/figure/The-Developmental-Ontology-Tree-An-interactive-viewer-available-at-the-organ-tissue_fig10_250925858

From Zygote to Body: Embryogenesis to links between organs, neurophysiology

<http://discovery.lifemapsc.com> LifeMap Discovery (TM) : The Embryonic Development, Stem Cells, and Regenerative Medicine Research Portal



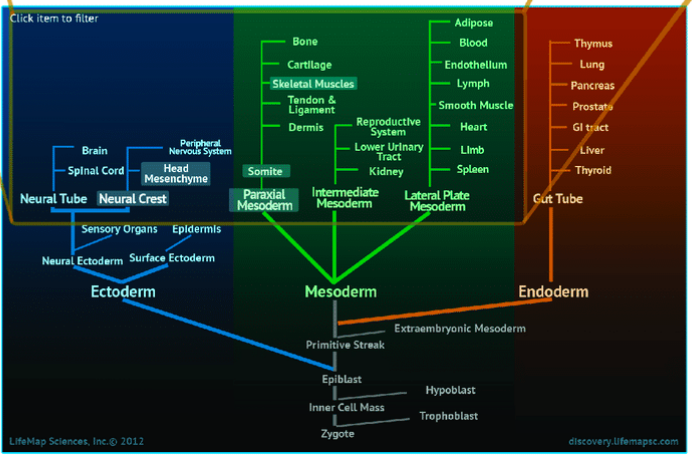
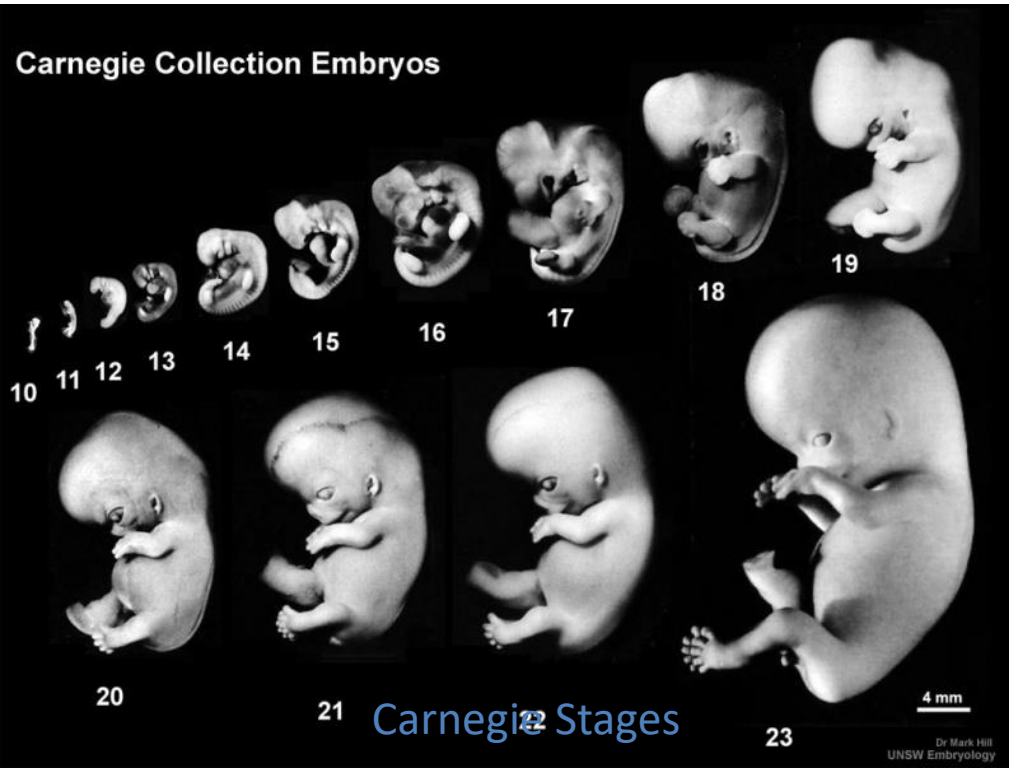
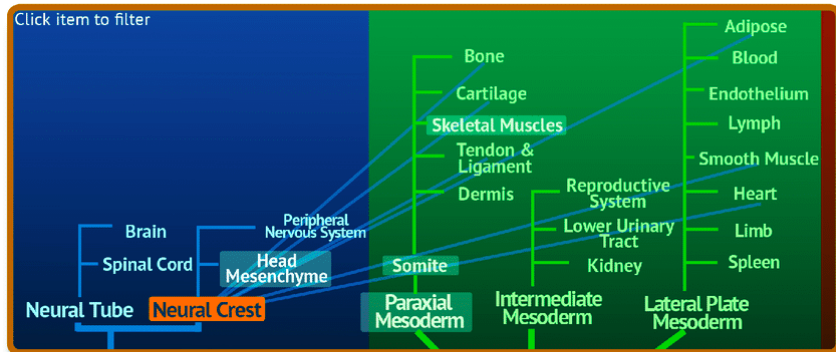
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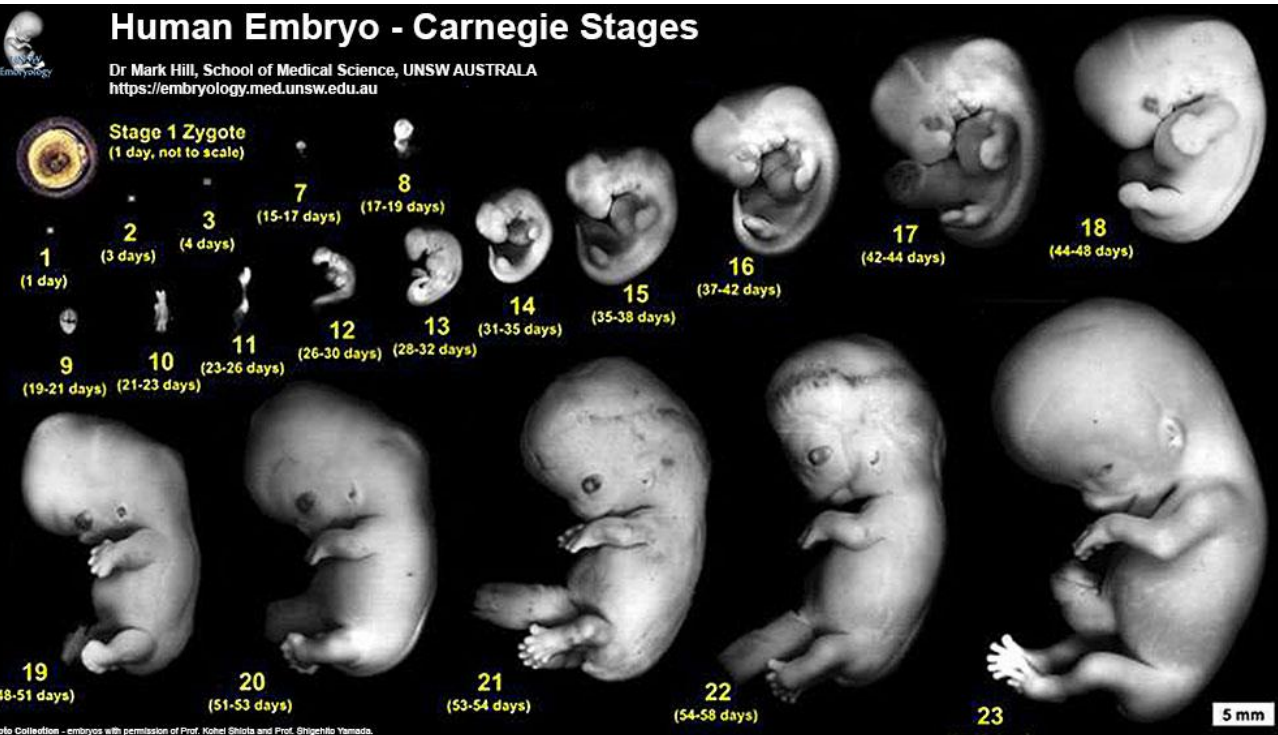
From Zygote to Body: Embryogenesis to links between organs, neurophysiology

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Human Embryo Collections

Embryo Collections: Human Embryo Collections |

- Embryo Collections | Blechschmidt Collection | Carnegie Collection | Domenech-Mateu Collection | Harvard Collection | Hill Collection | Hinrichsen Collection | Hubrecht Collection | Kyoto Collection | Madrid Collection | Embryology Models | DEC Information | DEC

Kyoto Collection

Begun by Dr. Hideo Nishimura in 1961 and has over 44,000 human embryo specimens.

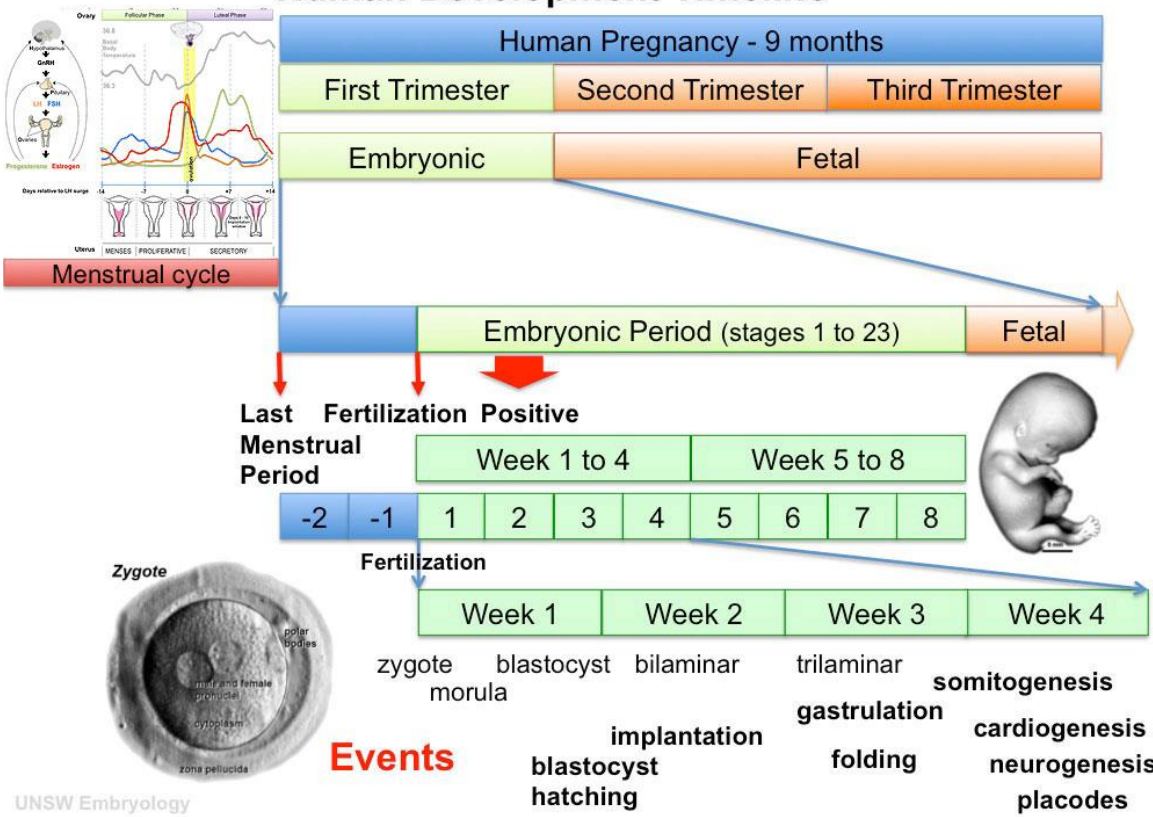
Embryo/Fetal Definition:

More than 90 percent of the identifiable structures of the adult body have appeared by Carnegie stage 23. Streeter also defined the fetal period as beginning when the humerus cartilage was replaced by bone marrow.

From Zygote to Body: Embryogenesis to links between organs, neurophysiology

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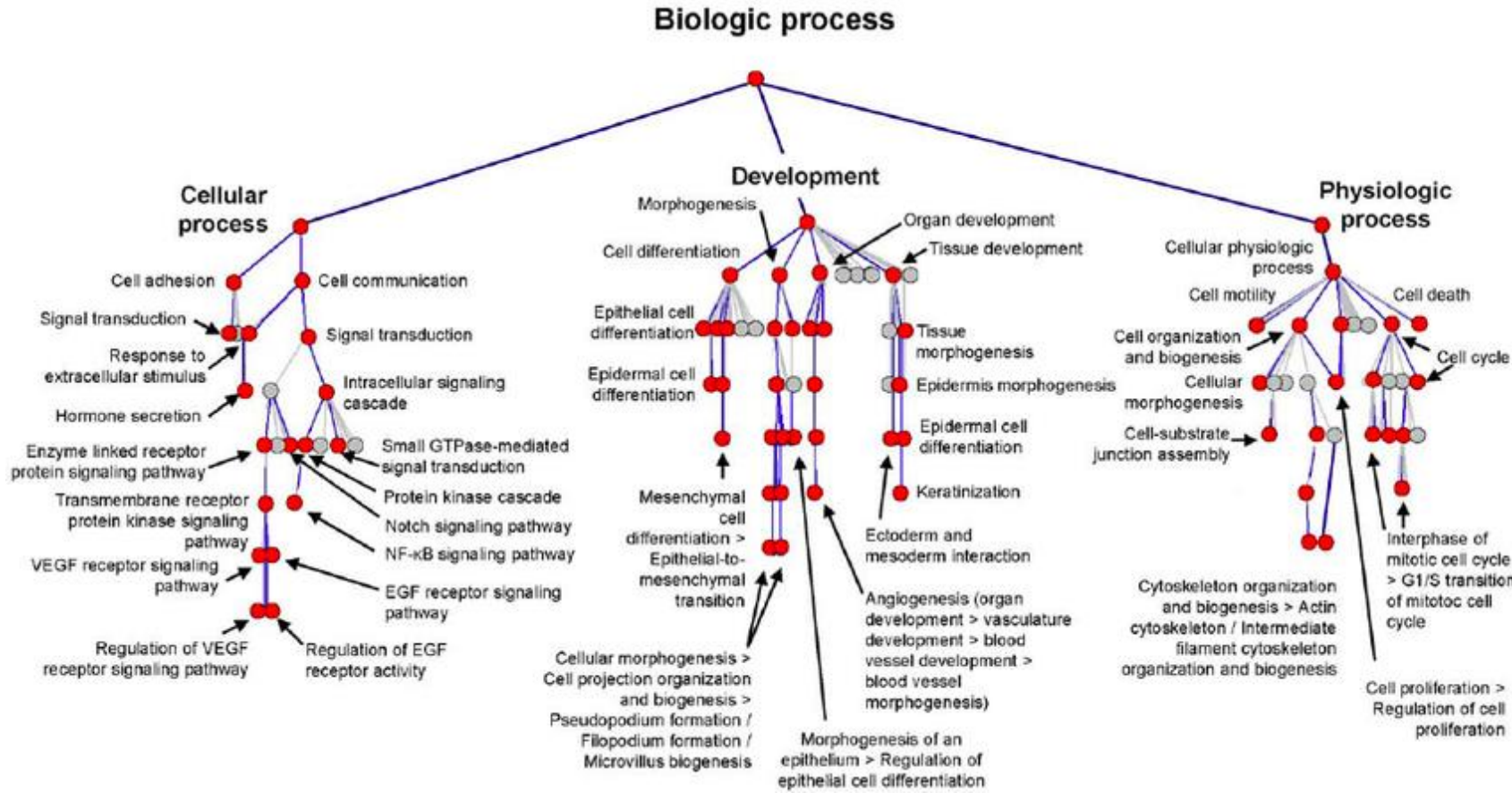
Human Development Timeline



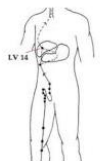
UNSW Embryology

https://embryology.med.unsw.edu.au/embryology/index.php/Timeline_human_development#/media/File:Human_development_timeline_graph_01.jpg

From Zygote to Body: Embryogenesis to links between organs, neurophysiology



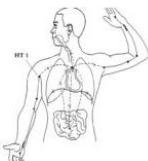
Meridians: A bioelectrical representation of health & disease



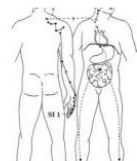
Liver Meridian



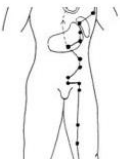
Gallbladder Meridian



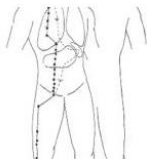
Heart Meridian



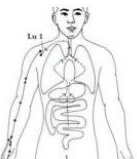
Small Intestine Meridian



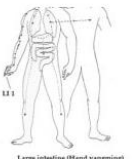
Spleen Meridian



Stomach Meridian



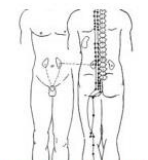
Lung Meridian



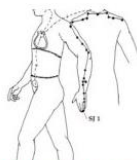
Large Intestine Meridian



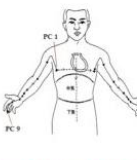
Kidney Meridian



Urinary Bladder Meridian

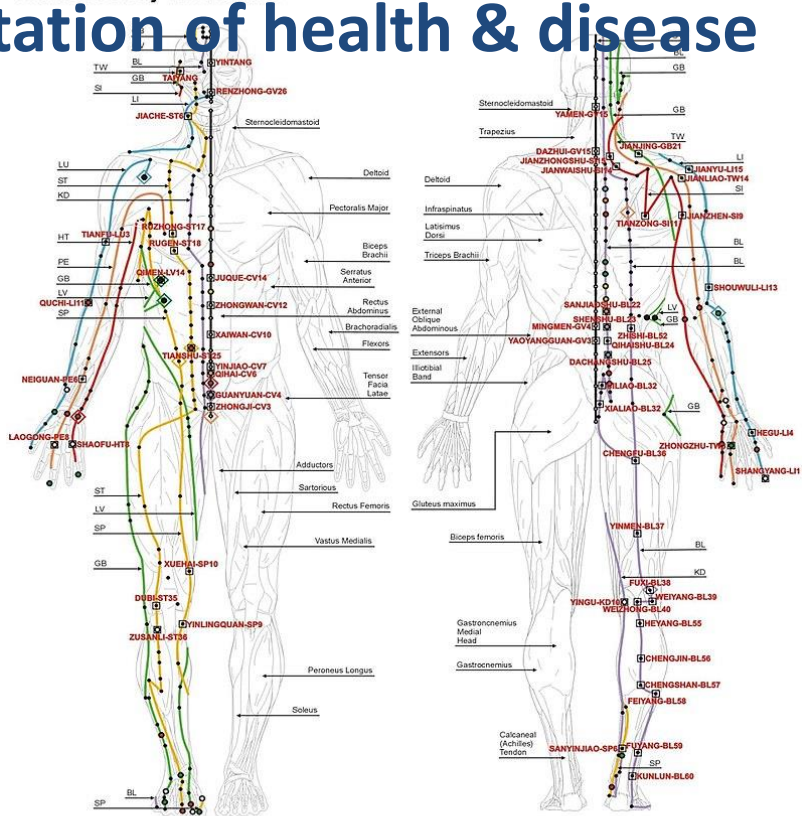


San Jiao Meridian



Pericardium Meridian

Human body meridians



ANTERIOR VIEW

- LEFT - YIN SUPERFICIAL MERIDIANS
- RIGHT - YANG SUPERFICIAL MUSCULATURE
- ARM YIN MERIDIANS & SHICHEN
- LV - LUNG MERIDIAN 3 - 5 AM
- HT - HEART MERIDIAN 11 PM - 1 PM
- LV - LIVER MERIDIAN 1 - 3 AM
- LEG YIN MERIDIANS & SHICHEN
- SP - SPLEEN MERIDIAN 9 - 11 AM
- KD - KIDNEY MERIDIAN 5 - 7 PM
- PE - PERICARDIUM MERIDIAN 7 - 9 PM
- CV - CONCEPTION VESSEL (CENTERLINE)

POSTERIOR VIEW

- LEFT - SUPERFICIAL MUSCULATURE
- RIGHT - YANG SUPERFICIAL MERIDIANS
- ARM YANG MERIDIANS & SHICHEN
- LI - LARGE INTESTINE MERIDIAN 5 - 7 AM
- SI - SMALL INTESTINE 1 - 3 PM
- TW - TRIPLE WARMER 9 - 11 PM
- ST - STOMACH MERIDIAN 7 - 9 AM
- BL - BLADDER MERIDIAN 3 - 5 PM
- GB - GALLBLADDER MERIDIAN 11 PM - 1 AM
- GV - GOVERNING VESSEL (CENTERLINE)

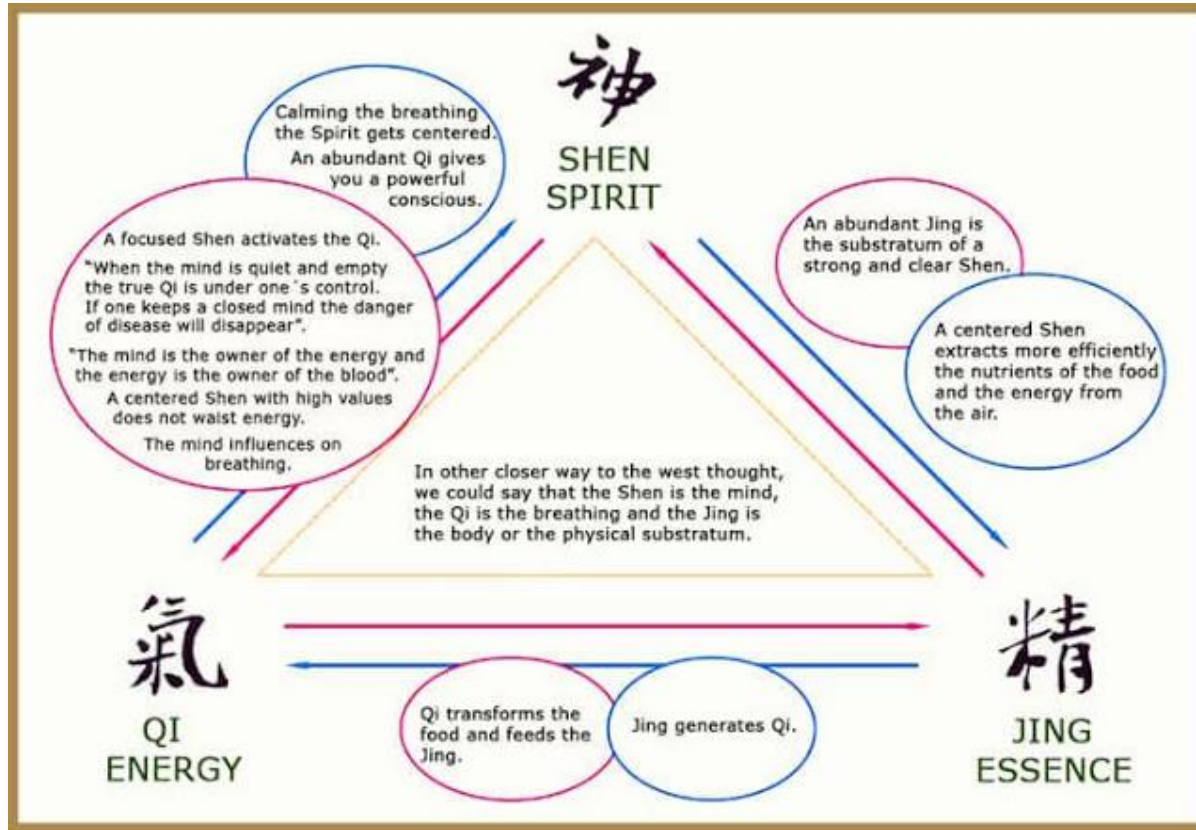


- LEGEND**
- WOOD PHASE MERIDIAN
- 1ST FIRE PHASE MERIDIAN
- 2ND FIRE PHASE MERIDIAN
- EARTH PHASE MERIDIAN
- METAL PHASE MERIDIAN
- WATER PHASE MERIDIAN
- PRIME VESSEL
- STIMULATION ACUPRESSURE POINT
- SEDATION ACUPRESSURE POINT
- ELEMENTAL ACUPRESSURE POINT
- CLASSICAL ACUPRESSURE POINT
- YU (ASSOCIATED) ACUPRESSURE POINT
- SUPERFICIAL ACUPRESSURE POINT
- SHICHEN MERIDIAN STRIKING POINT
- SHICHEN ZANFU 12 HOUR VITAL STRIKING POINT
- WRIEST PULSE
- LEFT
- DEEP / SUPERFICIAL
- HT / LI
- LV / GB
- SP / ST
- KD / BL
- RIGHT
- DEEP / SUPERFICIAL
- LI / SP
- ST / HT
- KD / BL
- GV - TW
- GENERAL USE STRIKING POINTS

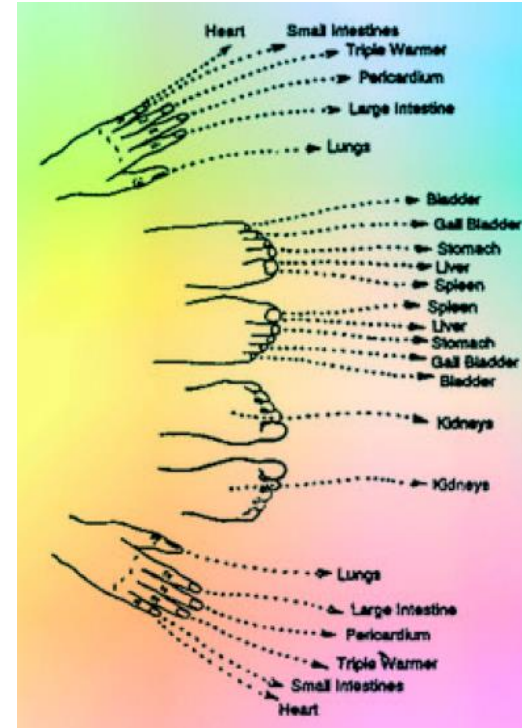
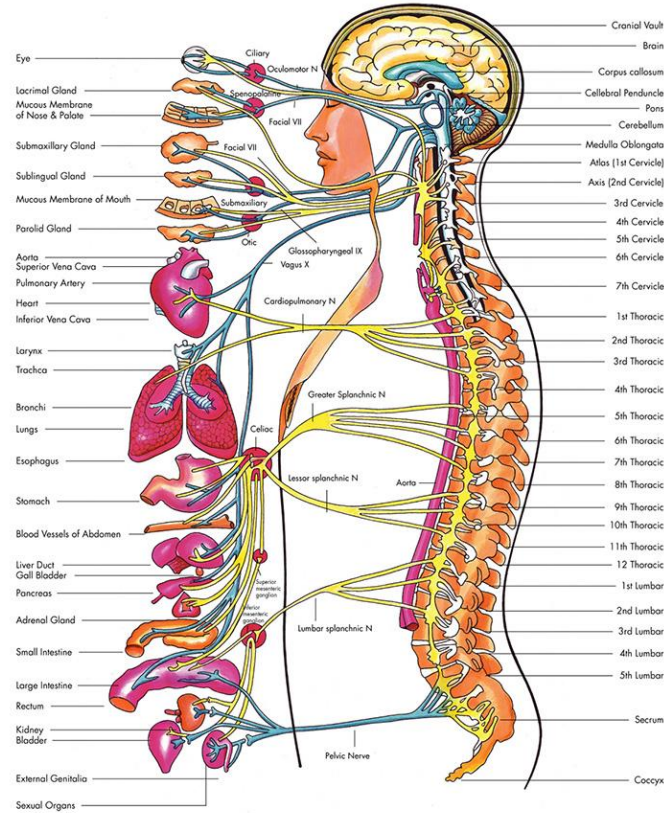
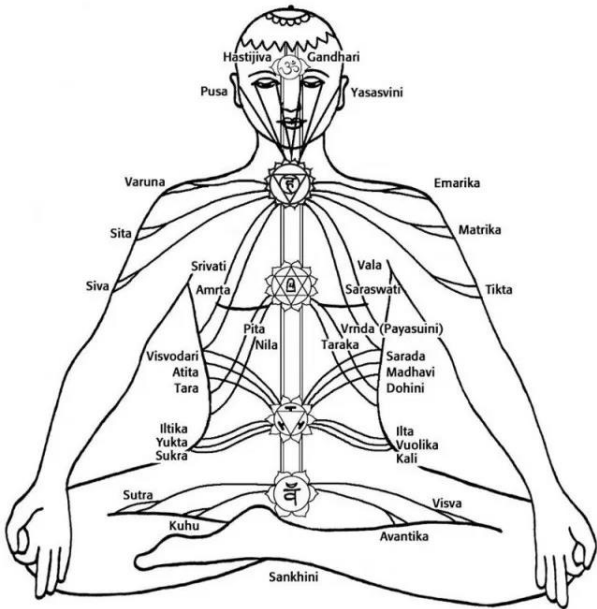
Meridian Connection

Connecting Everything in Your Body

Jing-Qi-Shen - Hidden Energy



The Autonomic Nervous System

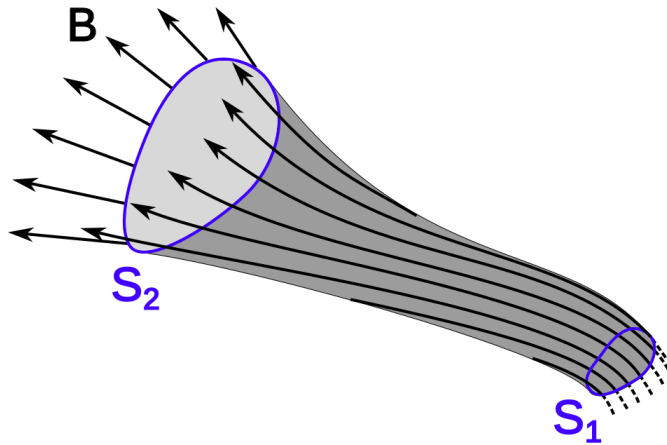


The Science of Meridians

The theoretical background of meridians, bioelectrical energy and nadis

Fröhlich's hypothesis of coherence in biological systems

introduced by Herbert Fröhlich in the late 1960s



Fröhlich proposed a theory of coherent excitations in biological systems known as Fröhlich coherence.

A system that attains this state of coherence is known as a Fröhlich condensate.

Herbert Fröhlich FRS

(9 December 1905 – 23 January 1991)

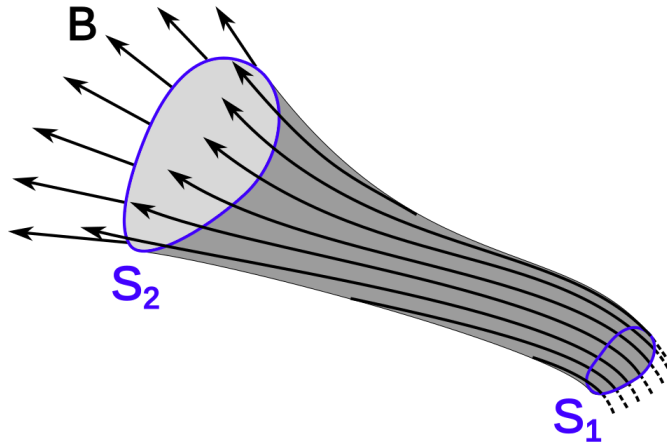
a German-born British physicist



The theoretical background of bioelectrical energy & the science of meridians

Fröhlich's hypothesis of coherence in biological systems

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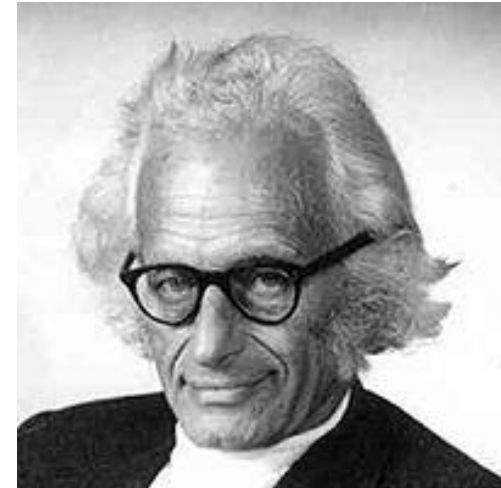
Herbert Fröhlich and F. Kremer
**Coherent Excitations in Biological
Systems** (Springer-Verlag, 1983)
ISBN 978-3-642-69186-7

Herbert Fröhlich, editor **Biological
Coherence and Response to
External Stimuli** (Springer, 1988)
ISBN 978-3-642-73309-3

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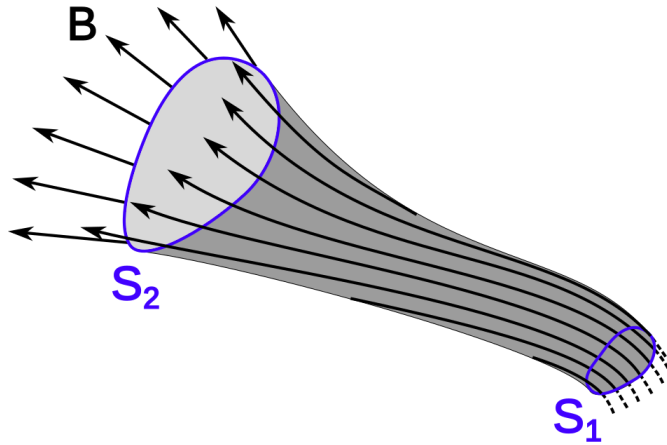
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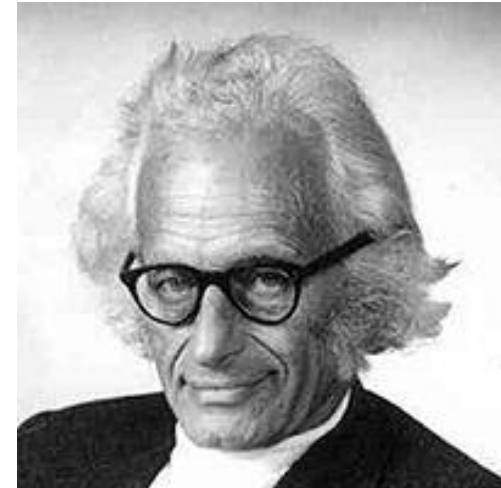
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ISARIC 4C (Coronavirus Clinical Characterisation Consortium)

We are a UK-wide consortium of doctors and scientists committed to answering urgent questions about COVID-19 quickly, openly, and for the benefit of all.

- how long are people infectious, and what body fluids are infectious?
- what puts people at higher risk of severe illness?
- what is the best way to diagnose the disease?
- who should we treat early with drugs, and which drugs cause harm?
- does the immune system in some patients do more harm than good?
- what other infections (such as pneumonia or flu) happen at the same time?

The UK needs a coordinated response to answer these questions as quickly as possible. Over the last 8 years we have been preparing for such a major outbreak worldwide [International Severe Acute Respiratory Infection Consortium Clinical Characterisation Protocol](#); our team deployed immediately and has been collecting data and samples since the first cases were reported in the UK.

Funding

ISARIC 4C is funded by a grant from UKRI (MRC) with a total value of £5.9M to JK Baillie (PI), University of Edinburgh; MG Semple, University of Liverpool; and P Openshaw, Imperial College London (co-leads). Full list of [investigators](#) and [specific deliverables](#).

Features of 16,749 hospitalised UK patients with COVID-19 using the ISARIC WHO Clinical Characterisation Protocol

ISARIC 4C:

International Severe Acute Respiratory and emerging Infections Consortium

Coronavirus Clinical Characterisation Consortium

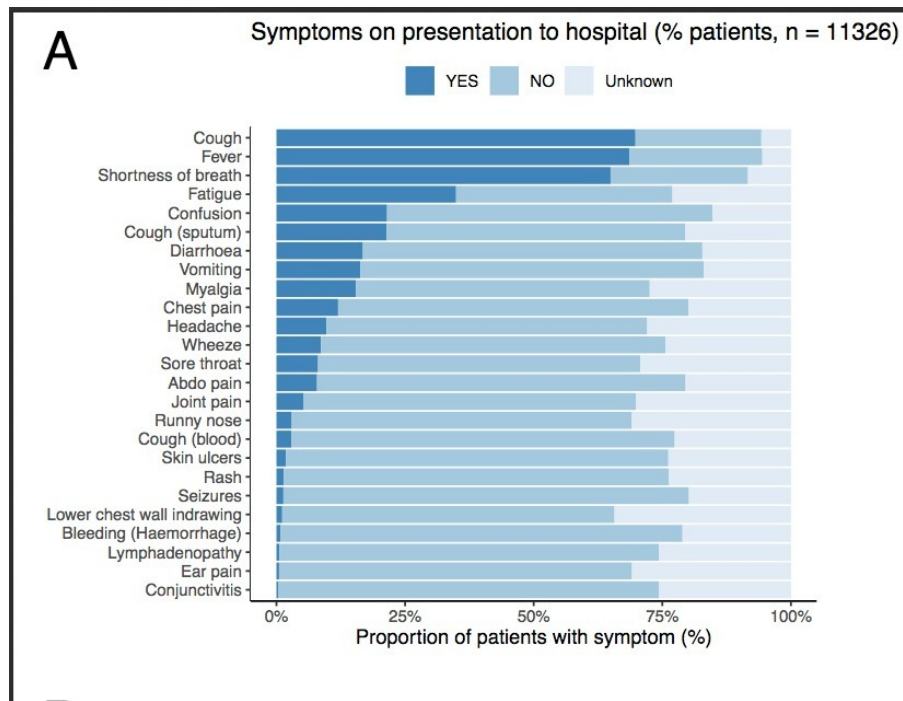
<https://isaric4c.net/>

Features of 16,749 hospitalised UK patients with COVID-19 using the ISARIC WHO Clinical Characterisation Protocol

(ISARIC: International Severe Acute Respiratory and emerging Infections Consortium)

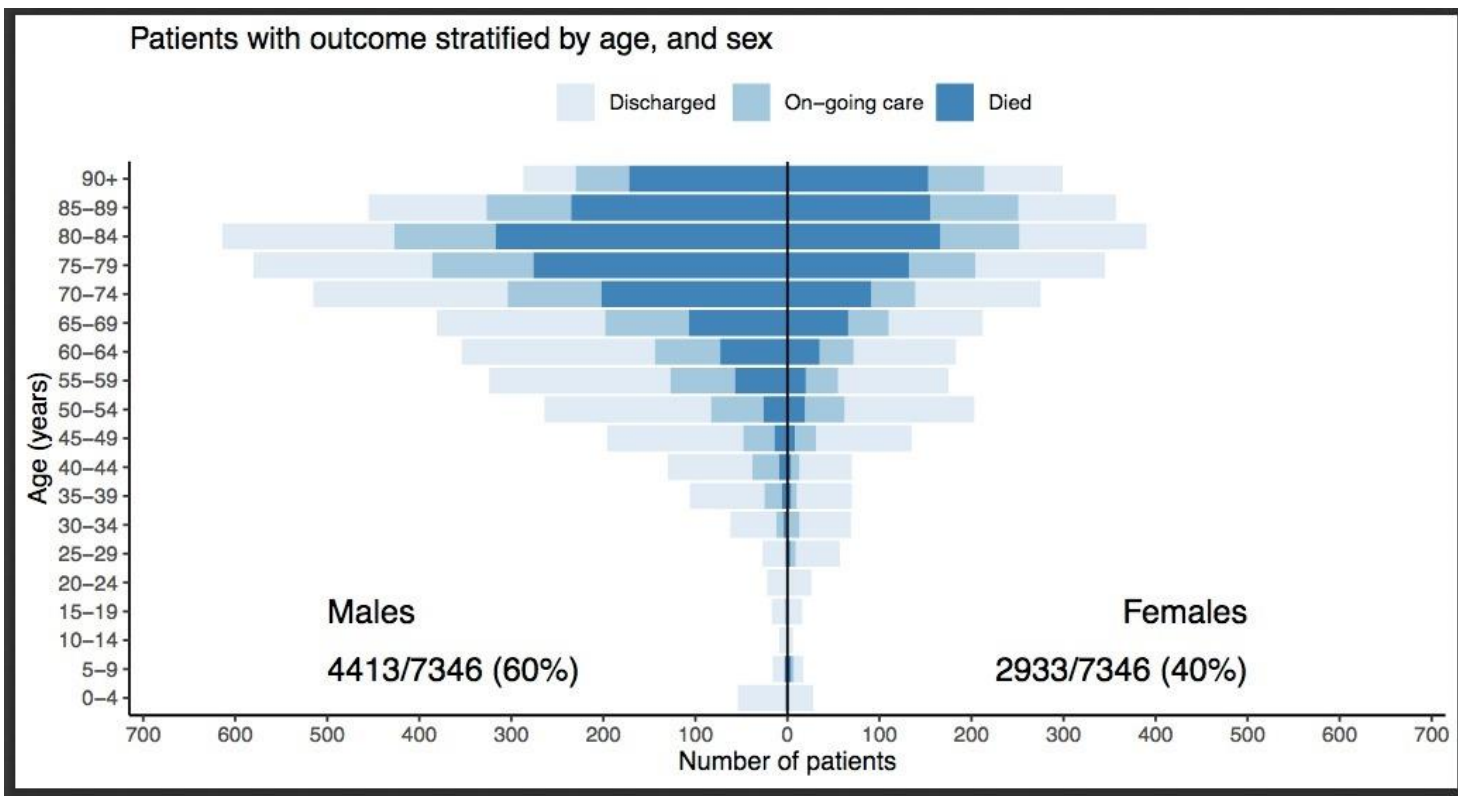
Results: The median age was 72 years [IQR57, 82; range 0, 104], the median duration of symptoms before admission was 4 days [IQR 1,8] and the median duration of hospital stay was 7days [IQR 4,12]. The **commonest comorbidities** were chronic cardiac disease (29%), uncomplicated diabetes (19%), non-asthmatic chronic pulmonary disease (19%) and asthma (14%); 47% had no documented reported comorbidity. Increased age and comorbidities including obesity were associated with a higher probability of mortality. **Distinct clusters of symptoms** were found: 1. respiratory (cough, sputum, sore throat, runny nose, ear pain, wheeze, and chest pain); 2. systemic (myalgia, joint pain and fatigue); 3. enteric (abdominal pain, vomiting and diarrhoea). Overall, 49% of patients were discharged alive, 33% have died and 17% continued to receive care at date of reporting. 17% required admission to High Dependency or Intensive Care Units; of these, 31% were discharged alive, 45% died and 24% continued to receive care at the reporting date. Of those receiving mechanical ventilation, 20% were discharged alive, 53% died and 27% remained in hospital.

Conclusions: We present the **largest detailed description of COVID-19 in Europe**, demonstrating the importance of pandemic preparedness and the need to maintain readiness to launch research studies in response to outbreaks.



Features of 16,749 hospitalised UK patients with COVID-19 using the ISARIC WHO Clinical Characterisation Protocol

(ISARIC: International Severe Acute Respiratory and emerging Infections Consortium)



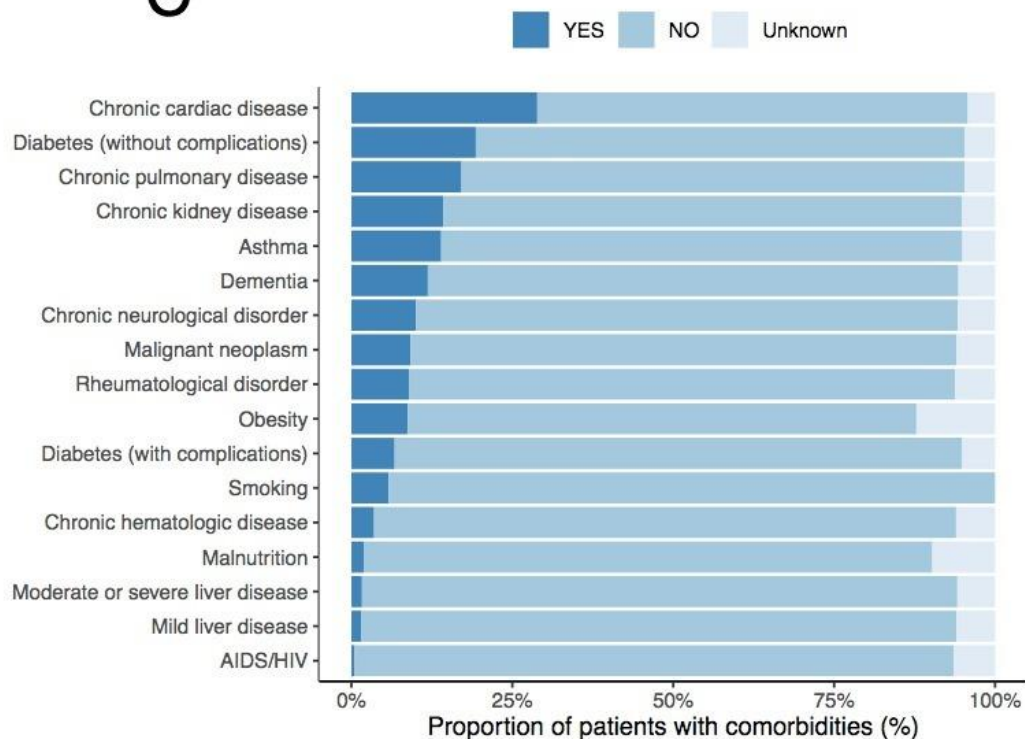
Features of 16,749 hospitalised UK patients with COVID-19 using the ISARIC WHO Clinical Characterisation Protocol

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Comorbidity (% patients, n = 11412)

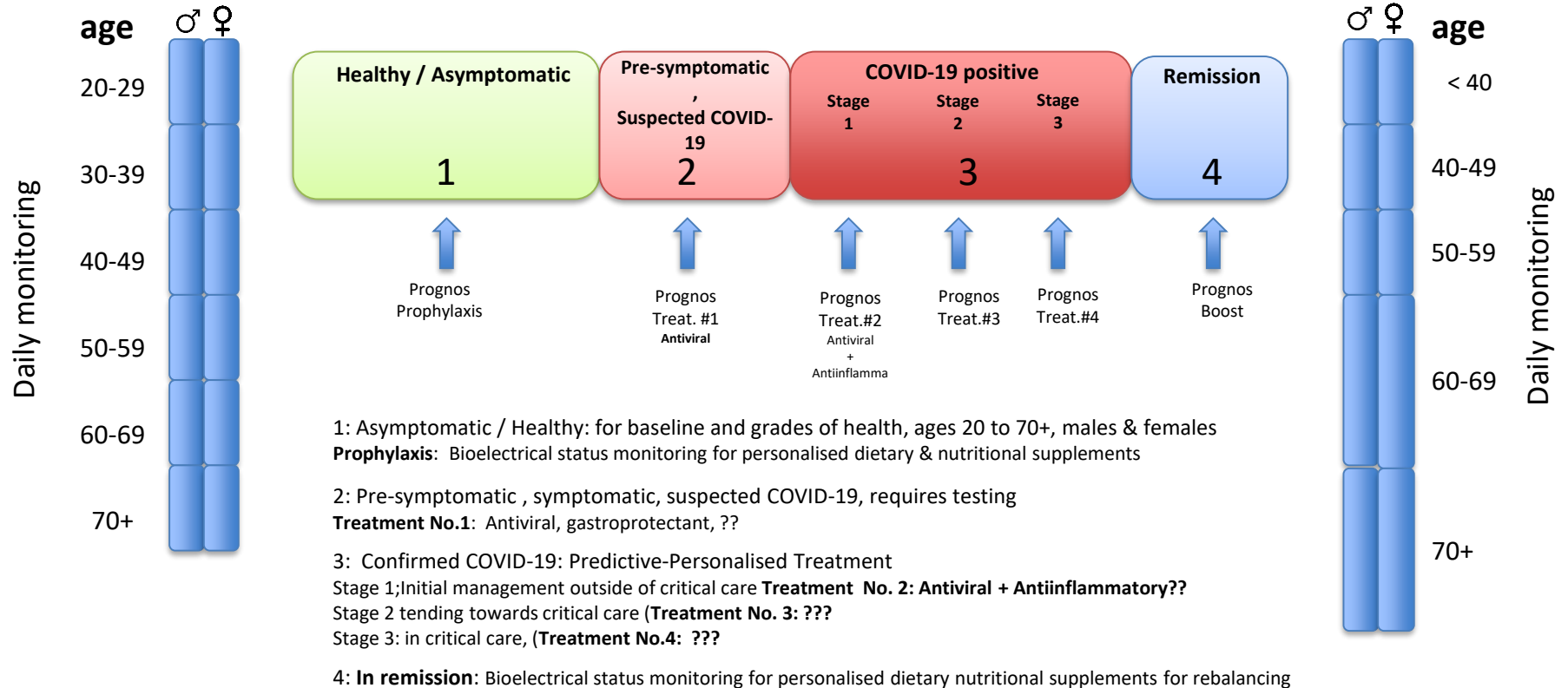


MERIDIANTECH: COVID 19

1 Diagnostics: Bioelectrical status of meridians and organ function (large intestine and lung meridians)

2: Diagnostics-driven treatment: Clinical trials for rebalancing and boosting bioelectrical status & predictive-personalised treatments

Stratification of population for grades of health, wellbeing & clinical frailty



Tissue distribution of ACE2 protein, the functional receptor for SARS coronavirus. A first step in understanding SARS pathogenesis



Wim Timens

Groningen Research Institute for Asthma and COPD,
Dept of Pathology and Medical Biology
University of Groningen
The Netherlands
<https://www.umcg.nl/-/w-timens>



umcg

Tissue distribution of ACE2 protein, the functional receptor for SARS coronavirus. A first step in understanding SARS pathogenesis

I Hamming,¹ W Timens,¹ MLC Bulthuis,¹ AT Lely,² GJ Navis,² and H van Goor¹

• Author information • Article notes • Copyright and License information [Disclaimer](#)

¹Department of Pathology and Laboratory Medicine, University Hospital Groningen, The Netherlands

²Department of Nephrology, University Hospital Groningen, The Netherlands

W Timens, Email: w.timens@path.azg.nl.

[✉]Corresponding author.

^{*}Department of Pathology and Laboratory Medicine, University Hospital Groningen, PO Box 30.001, 9700 RB Groningen, The Netherlands.

This article has been [cited by](#) other articles in PMC.

Abstract

Go to:

Severe acute respiratory syndrome (SARS) is an acute infectious disease that spreads mainly via the respiratory route. A distinct coronavirus (SARS-CoV) has been identified as the aetiological agent of SARS. Recently, a metallopeptidase named angiotensin-converting enzyme 2 (ACE2) has been identified as the functional receptor for SARS-CoV. Although ACE2 mRNA is known to be present in virtually all organs, its protein expression is largely unknown. Since identifying the possible route of infection has major implications for understanding the pathogenesis and future treatment strategies for SARS, the present study investigated the localization of ACE2 protein in various human organs (oral and nasal mucosa, nasopharynx, lung, stomach, small intestine, colon, skin, lymph nodes, thymus, bone marrow, spleen, liver, kidney, and brain). The most remarkable finding was the surface expression of ACE2 protein on lung alveolar epithelial cells and enterocytes of the small intestine. Furthermore, ACE2 was present in arterial and venous endothelial cells and arterial smooth muscle cells in all organs studied. In conclusion, ACE2 is abundantly present in humans in the epithelia of the lung and small intestine, which might provide possible routes of entry for the SARS-CoV. This epithelial expression, together with the presence of ACE2 in vascular endothelium, also provides a first step in understanding the pathogenesis of the main SARS disease manifestations. Copyright © 2004 Pathological Society of Great Britain and Ireland. Published by John Wiley & Sons, Ltd.

Keywords: severe acute respiratory syndrome (SARS), coronavirus, angiotensin-converting enzyme 2, SARS-CoV receptor

[Tissue distribution of ACE2 protein, the functional receptor for SARS coronavirus. A first step in understanding SARS pathogenesis](#)

I Hamming, W Timens, MLC Bulthuis, AT Lely, GJ Navis, H van Goor

J Pathol. 2004 Jun; 203(2): 631–637. Published online 2004 May 7. doi: 10.1002/path.1570

PMCID: PMC7167720

[Article](#) [PubReader](#) [PDF–694K](#) [Citation](#)

Is Cited by the Following 491 Articles in this Archive:

[Potential Benefits of Combination of *Nigella sativa* and Zn Supplements to Treat COVID-19](#)

Mohammad Tariqur Rahman

J Herb Med. 2020 Jun 24 : 100382. doi: 10.1016/j.hermed.2020.100382 [Epub ahead of print]

PMCID: PMC7313527

[Article](#) [PubReader](#) [PDF–1.8M](#) [Citation](#)

[COVID-19 as a Viral Functional ACE2 Deficiency Disorder with ACE2 Related Multi-organ Disease](#)

Rosemary Gan, Nicholas P. Rosoman, David J.E. Henshaw, Euan P. Noble, Peter Georgius, Nigel Sommerfeld

Med Hypotheses. 2020 Jun 23 : 110024. doi: 10.1016/j.mehy.2020.110024 [Epub ahead of print]

PMCID: PMC7308773

[Article](#) [PubReader](#) [PDF–1.9M](#) [Citation](#)

[SARS-CoV-2 infection in liver-Author's reply](#)

Yijin Wang, Fengmin Lu, Jingmin Zhao

J Hepatol. 2020 Jun 23 doi: 10.1016/j.jhep.2020.06.028 [Epub ahead of print]

PMCID: PMC7309894

[Article](#) [PubReader](#) [PDF–6.3M](#) [Citation](#)

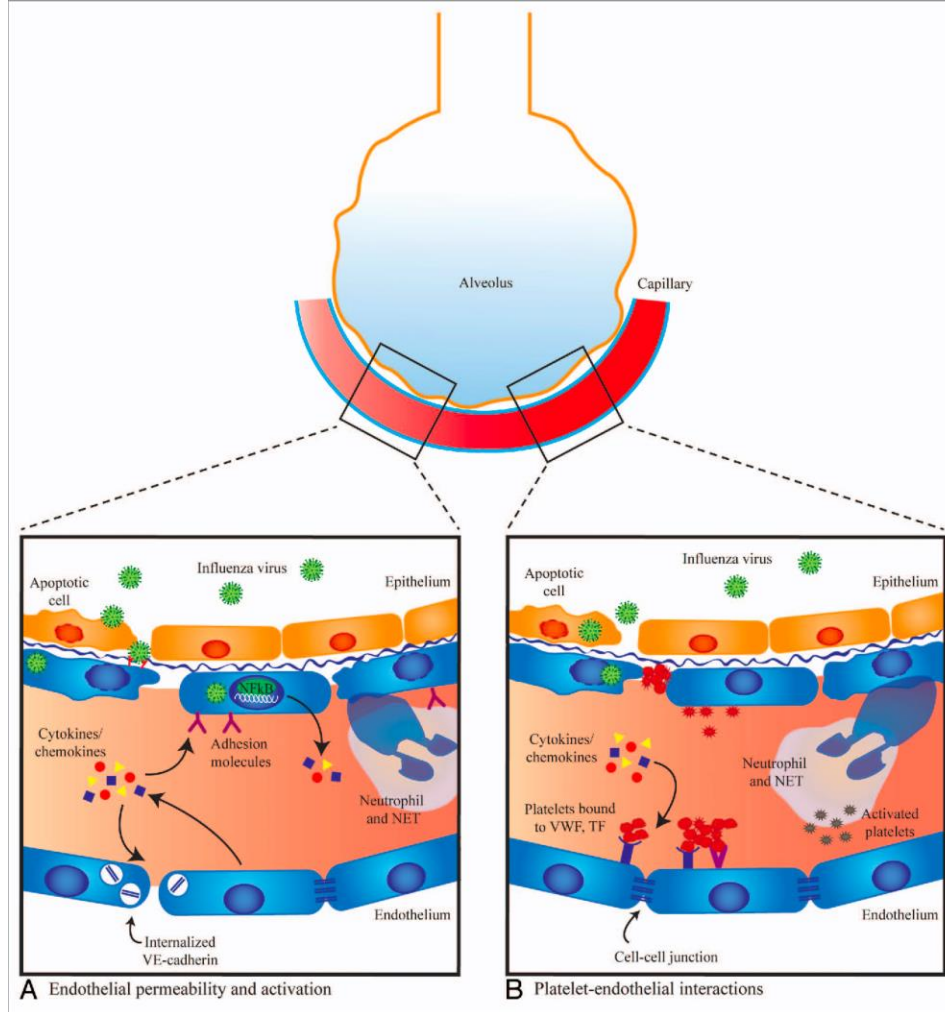
Endothelial activation and dysfunction in the pathogenesis of influenza A virus infection

DOI:10.4161/viru.25779Corpus ID: 16773341

Endothelial activation and dysfunction in the pathogenesis of influenza A virus infection
Susan M. Armstrong, Ilyse Darwish, Warren L Lee

Published 2013
Biology, Medicine
Virulence

The development of severe influenza has been attributed, in part, to a heightened innate immune response. Recent evidence suggests that endothelial activation, loss of barrier function, and consequent microvascular leak may also serve important mechanistic roles in the pathogenesis of severe influenza. The aim of this review is to summarize the current evidence in support of endothelial activation and dysfunction as a central feature preceding the development of severe influenza. We also discuss the effect of influenza on platelet–endothelial interactions.

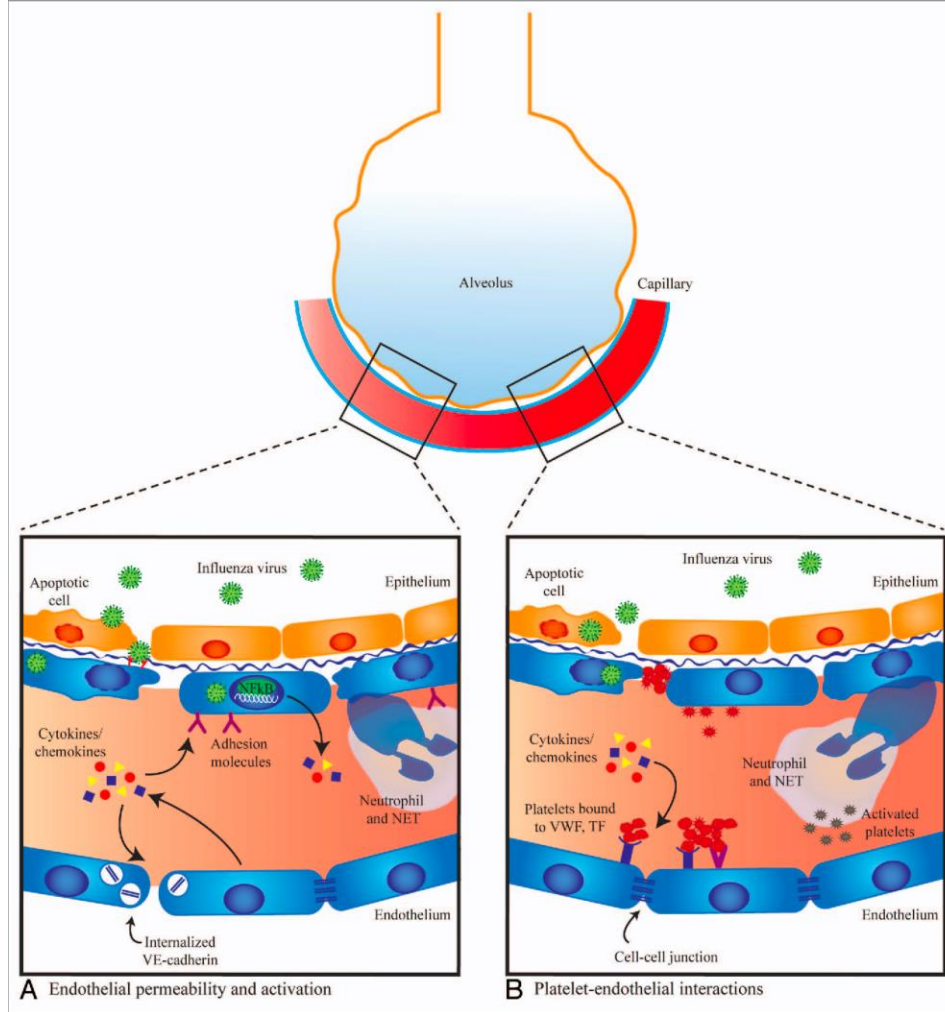


Endothelial activation and dysfunction in the pathogenesis of influenza A virus infection

Figure 1. Mechanisms of endothelial dysfunction in influenza virus infection.

(A) endothelial permeability and activation. elevated levels of proinflammatory cytokines/chemokines can directly induce endothelial leak through disruption of cell–cell junctions and may also cause endothelial cells to express elevated levels of adhesion molecules that promote leukocyte recruitment. Neutrophils release **neutrophil extracellular traps (NeTs)**, which can damage endothelial cells. There is in vitro evidence that influenza can directly infect lung endothelial cells and cause activation of NFκB, endothelial apoptosis, and loss of junctional proteins. in vivo, only avian H5N1 influenza has been shown to directly infect endothelial cells.

(B) (B) platelet–endothelial interactions. circulating cytokines/chemokines cause increased expression of platelet-binding receptors. influenza virus can directly infect lung endothelium and induce endothelial apoptosis exposing the extracellular matrix, which has a high affinity for platelets. influenza may directly induce platelet activation and activated platelets bind to endothelium. Activated platelets may interact with neutrophils triggering the production of NeTs



Neutrophil Extracellular Traps (NeTs) & NET-associated host damage

Figure 1. Mechanisms of endothelial dysfunction in influenza virus infection.

(A) endothelial permeability and activation. elevated levels of proinflammatory cytokines/chemokines can directly induce endothelial leak through disruption of cell–cell junctions and may also cause endothelial cells to express elevated levels of adhesion molecules that promote leukocyte recruitment. Neutrophils release **neutrophil extracellular traps (NeTs)**, which can damage endothelial cells. There is in vitro evidence that influenza can directly infect lung endothelial cells and cause activation of NFκB, endothelial apoptosis, and loss of junctional proteins. in vivo, only avian H5N1 influenza has been shown to directly infect endothelial cells.

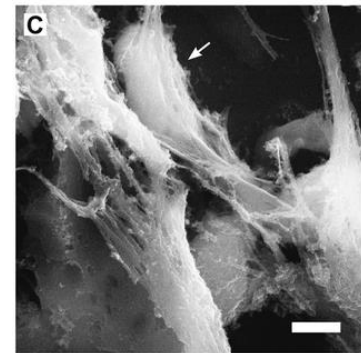
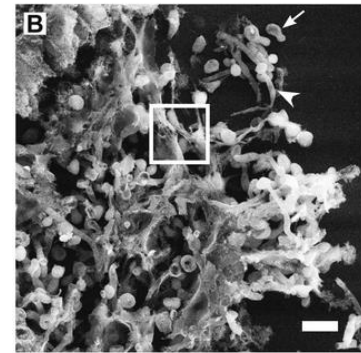
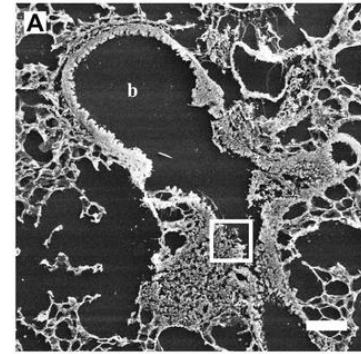
(B) (B) platelet–endothelial interactions. circulating cytokines/chemokines cause increased expression of platelet-binding receptors. influenza virus can directly infect lung endothelium and induce endothelial apoptosis exposing the extracellular matrix, which has a high affinity for platelets. influenza may directly induce platelet activation and activated platelets bind to endothelium. Activated platelets may interact with neutrophils triggering the production of NeTs

Networks of extracellular fibers, primarily composed of DNA from neutrophils, which bind pathogens

NETs also have a role in thrombosis and have been associated with stroke

Markers of NETs
**cell-free DNA,
nucleosomes, and
citrullinated histone 3
(citH3)**

https://en.wikipedia.org/wiki/Neutrophil_extracellular_traps





SUSTAINABLE DEVELOPMENT GOALS



HOME SDGS HLPF STATES SIDS UN SYSTEM STAKEHOLDERS TOPICS PARTNERSHIPS RESOURCES ABOUT

Sustainable Development Goals



[The 2030 Agenda for Sustainable Development](#), adopted by all United Nations Member States in 2015, provides a shared blueprint for peace and prosperity for people and the planet, now and into the future. At its heart are the 17 Sustainable Development Goals (SDGs), which are an urgent call for action by all countries - developed and developing - in a global partnership. They recognize that ending poverty and other deprivations must go hand-in-hand with strategies that improve health and education, reduce inequality, and spur economic growth - all while tackling climate change and working to preserve our oceans and forests.

CORONAVIRUS CRISIS

At least 23 million migrants are returning to India's villages. Can the rural economy keep up?

The country's villages are already grappling with hidden unemployment.



What is JPI HDHL?

The Joint Programming Initiative 'A Healthy Diet for a Healthy Life'



Over 2 billion people in this world are overweight and the associated costs are 1.2 trillion dollar per year. At the same time, the population in many countries is **ageing**, which increases the incidence of **malnutrition**. This leads to underweight and micro deficiencies. If no action is taken, diet-related diseases are expected to increase rapidly in the next decade, stretching health systems to the breaking point. In the **JPI HDHL, 26 countries from within and outside of Europe** are working on a programmed approach to align national R&I strategies and to fund **new research**, in order to facilitate true **understanding of the relationship between diet, physical activity and health.**

This project has received funding from the European Union's H2020 Research and Innovation Programme under grant agreement n.696300

<https://www.healthydietforhealthylife.eu/index.php/about-jpi-hdhl/what-is-jpi-hdhl>

What is JPI HDHL?

The Joint Programming Initiative 'A Healthy Diet for a Healthy Life'



Home

About JPI HDHL

Calls & activities

EC Partnerships

Research Projects

News & Publications

Coordinating research in the area of nutrition,
diet, health and physical activity

The Joint Programming Initiative a Healthy Diet for a Healthy Life (JPI HDHL) brings together 26 countries that align research programming and fund new research to prevent or minimise diet-related chronic diseases



<https://www.healthydietforhealthylife.eu/index.php>

What is JPI HDHL?

The Joint Programming Initiative 'A Healthy Diet for a Healthy Life'



Home

About JPI HDHL

Calls & activities

EC Partnerships

Research Projects

News & Publications



People's Food – People's Health EU-AT Conference, Vienna, 22-23 November 2018.

A conference on People's Food – People's Health. Towards healthy and sustainable European Food Systems, will be held under the Austrian EU Presidency in Vienna on 22-23 November 2018. The presentation of multi-sectorial best practices in the food system will be a main focus of the conference, together with a discussion on potential future initiatives towards healthy and sustainable European Food Systems. A call has been issued to submit examples of best practices by August 31.

The European Food System is challenged in several ways and healthy lifestyles are gaining importance in Western societies. At the same time the prevalence of Non-Communicable Diseases, often influenced by nutrition, is rising. This requires an Open Innovation approach in the Food System to collaborate across boundaries in order to create co-benefits for all stakeholders. That is why the Austrian Ministry of Labour, Social Affairs, Health and Consumer Protection is initiating this high-level cross-sectoral and cross-disciplinary **EU-Conference** with representatives of Member States and important stakeholders from the four main domains (economy, civil society, health and environment) of the Food System.

<https://www.healthydietforhealthylife.eu/index.php>

“Infectious” Health

Health: Healthcare versus Wellbeing

Healthcare = The commoditization of Disease

versus

Wellbeing = The commoditization of Health

“Infectious” Health

The Re-establishment of Health and Commodification of Wellbeing

Measuring and Auditing Health and Preventing Disease

Wellbeing versus Health

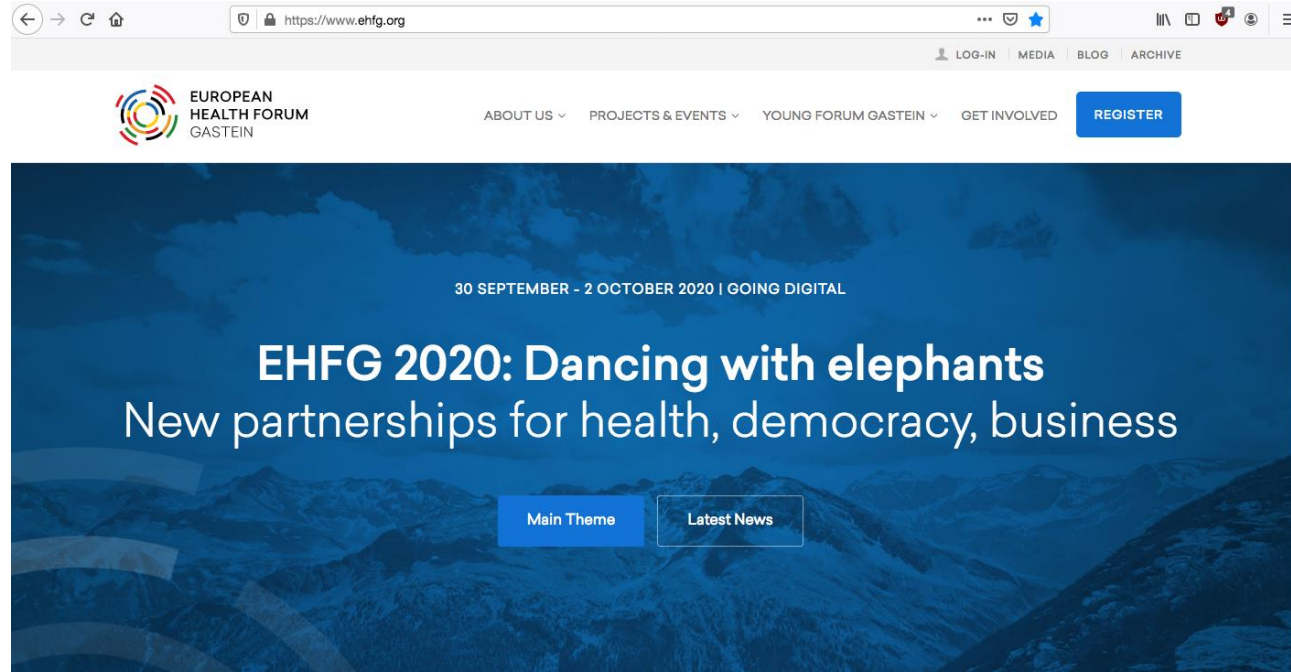
Infectious Health

Healthcare a Business versus Health a Priceless Gift

European Health Forum Gastein 2020

‘Dancing with elephants - New partnerships for health, democracy, business

The EHFG 2020 will address the relevant relationships between health and commercial, economic and political agendas.



<https://www.ehfg.org/>

EU4Health

A vision for a safer and healthier European Union 2021-2027

Reasons and objectives

“We will stop at nothing to save lives,” said President von der Leyen, speaking to the European Parliament on 26 March 2020, the COVID-19 crisis is the biggest challenge the European Union (EU) has faced since the Second World War, and it has demonstrated that if each country tries to tackle pandemics on its own, the EU will be as weak as the weakest link. Every health system has struggled in tackling this crisis, and this has affected every citizen in one way or another. **Europe needs to give a higher priority to health, to have health systems ready to provide state of the art care, and to be prepared to cope with epidemics and other unforeseeable health threats** in line with the International Health Regulations (IHR).



EUROPEAN COMMISSION

Brussels, 28.5.2020

COM(2020) 405 final

2020/0102(COD)

Proposal for a

REGULATION OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL

on the establishment of a Programme for the Union's action in the field of health –for the period 2021-2027 and repealing Regulation (EU) No 282/2014 (“EU4Health Programme”)

(Text with EEA relevance)

EU4Health

A vision for a safer and healthier European Union 2021-2027

BUDGETARY IMPLICATIONS

The total budget allocated for the EU4Health Programme amounts to **EUR 10 397 614 000** (in current prices) for the 2021-2027 period.

1. **EUR 1 946 614 000** shall derive from heading 5 “Resilience, Security and Defence” of the MFF 2021-2027;

2. **EUR 8 451 000 000** shall derive from proceeds of the European Union Recovery Instrument [/Regulation xxx], constituting external assigned revenues according to Article 21.5 of the Financial Regulation.



EUROPEAN COMMISSION

Brussels, 28.5.2020

COM(2020) 405 final

2020/0102(COD)

Proposal for a

REGULATION OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL

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(Text with EEA relevance)

EU4Health

A vision for a safer and healthier European Union 2021-2027



EUROPEAN COMMISSION

Brussels, 28.5.2020

COM(2020) 405 final

ANNEXES *to the*

**Proposal for a REGULATION OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL
on the establishment of a Programme for the Union's action in the field of health –for the period 2021-2027 and
repealing Regulation (EU) No 282/2014 (“EU4Health Programme”)**

ANNEX I

LIST OF POSSIBLE ELIGIBLE ACTIONS PROVIDED FOR IN ARTICLE 13

- (a) Investment in:
 - (i) Precursory projects for high added-value up-scalable initiatives;
 - (ii) Critical health infrastructure relevant in the context of health crises, tools, structures, processes, production and laboratory capacity, including tools for surveillance, modelling, forecast, prevention and management of outbreaks.
- (b) Transfer, adaptation and roll-out of best practices and innovative solutions with established Union level added-value between Member States, and country-specific tailor made support to countries, or groups of

(k) Communication and outreach to stakeholders and citizens, in particular:

(i) Communication addressed to citizens in the context of risk management and crisis preparedness.

(ii) Communication addressed to citizens and stakeholders to promote Union action in the areas mentioned in this Annex.

(iii) Communication to promote disease prevention and healthy lifestyles, in cooperation with all concerned actors at international, Union and national level.



References & related material

PROGNOS Technology / YouTube presentations:

Using PROGNOS: https://www.youtube.com/watch?v=jeO_UoMsApw

Interview on PROGNOS: <https://www.youtube.com/watch?v=0MKyKzTQ3pw>

Using PROGNOS on MIR by Prof. Dr. med Valeri Vladimirovich Polyakov: <https://www.youtube.com/watch?v=R4hGgJShsZU>

How does COVID-19 kill?

Therapeutic options for the 2019 novel coronavirus (2019-nCoV): <https://www.nature.com/articles/d41573-020-00016-0>

Uncertainty is hampering doctors' ability to choose treatments: <https://www.nature.com/articles/d41586-020-01056-7>

The race for coronavirus vaccines: a graphical guide- Eight ways in which scientists hope to provide immunity to SARS-CoV-2 .
https://www.nature.com/articles/d41586-020-01221-y?utm_source=Nature+Briefing

AntiCOVID: Clinical research for Covid-19 (by Inato): <https://covid.inato.com/analysis>

NIH Coronavirus Disease 2019 (COVID-19) Treatment Guidelines: <https://www.covid19treatmentguidelines.nih.gov/>

COHERENCE IN LIFE AND IN MATTER - Past events and related resources (in Italian): <https://www.vglobale.it/?s=Coherence>

Luc Montagnier (2008 Nobel Prize in Physiology or Medicine) and Vincenzo Valenzi (an interview in Italian and French): <https://youtu.be/CuQtvjBuavI>

Proceedings of COHERENCE events and related material: <http://www.iiimb.me/materiali.html>

COHERENCE2020 Presentations: <http://www.iiimb.me/atti-di-coherence2020.html>

COVID Workshop Reports: https://m.facebook.com/story.php?story_fbid=3395611340453227&id=100000131826854

8th MERIDIANTECH-COVID19 Workshop

Bioelectrical Diagnostics & Coherent Therapy

Saturday 27 June 16:00 Central European Summer Time

**DYNAMIC DIAGNOSTICS-DRIVEN PERSONALIZED, PRECISION COHERENT THERAPY
FOR CHRONIC AND INFECTIOUS DISEASES:**

Coherent Environment, Coherent Climate and Coherent Drug Therapies

Zoom Meeting Meeting ID: 815 2506 6505 | <https://us02web.zoom.us/j/81525066505>

Hosted by:

Dr. Bhaswathi **BHATTACHARYA** MD PhD , Weill Cornell Medical College, New York, NY

Fulbright Specialist in Public Health/ Global Health-Integrative Medicine 2018-2022
Good Medicine Works. www.drbbhaswati.com ...because GOOD medicine ... works!
USA: +1 212 645 6745 | India: +91 96 9599 8600 | bhaswati@post.harvard.edu |

Further information:

madan.thangavelu4@gmail.com | Mobile & WhatsApp: + 44 7830 300 728

8th MERIDIANTECH-COVID19 Workshop

Bioelectrical Diagnostics & Coherent Therapy

Saturday 27 June 16:30 CEST – Zoom Meeting ID: 815 2506 6505

- Bhaswathi BHATTACHARYA: **Everyday Good Health: Tips from Ayurveda & Indian Systems of Health & Wellbeing**
- Vincenzo VALENZI MD: **The Poli Project on Climatotherapy** (www.cimb.me)
- Vat MARASHI MD : *President of RIDA* (www.rida-italia.it), Network of Enterprises of the Albanese Diaspora in Italy
The need for personalized, precision therapy: The Albanian Perspective
- Vaidya Dr. Satyajith KADKOL: Managing Director, Sadaika Healthcare OPC Private Limited, www.sadaika.com,
VEDAPULSE: Case studies and clinical advantages for designing coherent therapies
- Dr. med Michael BAUER, Raimund HOFFMAN & Franziska MICHL: *MEDPREVENTsystems GmbH, Marktredwitz, Germany*
PROGNOS system and Viral Express: Operating the PROGNOS System and overview of viral testing
- Dr. Iván SZALKAI MD: Head, Ayurveda Education, Department of Theoretical Health Sciences, **University of Miskolc**, Miskolc, Hungary
The need for personalized, precision therapy: The Hungarian Perspective
- Vladimir PETRUKHIN: Founder, CardioMood (www.cardiomood.com)
Mobile HRV analysis and expert tools for heart rate analysis for TeleHealth / TeleMedicine
- Giulio TARRO : <http://www.giuliotarro.it/> , <https://twitter.com/TarroGiulio> & https://it.wikipedia.org/wiki/Giulio_Tarro:
Past, present and the future of human viral and other communicable and chronic diseases
- Madan THANGAVELU: **EU4Health: Latest news & news about the 9th MERIDIANTECH-COVID19 Workshop** (www.iiimb.me)

6th MERIDIANTECH-COVID19 Workshop

Bioelectrical Diagnostics & Coherent Therapy

Monday 01 June 17:00 Central European Summer Time

**FACILE, EARLY, RAPID AND DYNAMIC DIAGNOSTICS AND PERSONALIZED,
PRECISION THERAPY FOR CHRONIC AND INFECTIOUS DISEASES OF THE
AGED WITH MERIDIANTECHNOLOGY (MT)**

Project Idea in response to EU Horizon 2020 call Horizon 2020 ID: SC1-DTH-02-2020

<https://ec.europa.eu/info/funding-tenders/opportunities/portal/screen/opportunities/topic-details/sc1-dth-02-2020>

Personalised early risk prediction, prevention and intervention based on Artificial Intelligence and Big Data technologies

Further information:

madan.thangavelu4@gmail.com

Mobile & WhatsApp: + 44 7830 300 728

5th MERIDIANTECH-COVID19 Workshop

Bioelectrical Diagnostics & Coherent Therapy

"COVID-19 Multicentric International Trials for Diagnosis-driven Personalized Precision Therapy"

Saturday 09 May 17:00 CEST – Hosted by MEDPREVENT systems GmbH & Co. KG DE

Giulio **TARRO** : <http://www.giuliotarro.it/> , <https://twitter.com/TarroGiulio> & https://it.wikipedia.org/wiki/Giulio_Tarro:
Past, present and the future of human viral diseases

Vincenzo **VALENZI** MD (www.cimb.me), Patrizio **CARRAI** Pisa University (Chemistry) , Pasquale **AVINO** Molise University (Chemistry):
Intermolecule signalling: Subtle molecular signals and their role in regulation of inflammation

Dr. med Michael **BAUER**, Raimund **HOFFMAN** & Franziska **MICHL**: *MEDPREVENTsystems GmbH, Marktredwitz, Germany*
PROGNOS system and Viral Express: Operating the PROGNOS System and overview of viral testing

Luca **GAMBERALE** & Milly **MORATTI**: *LEDA/Bicocca Research Center for Innovative Research in Applied Physics, Milan, Italy*
Quantum Theory in biology and applications in medicine

Habib **DOUAGUI**: *Professor & Head, Department of Pneumo-allergology, Center Hospitalo Universitaire de Béni Messous, Algiers, Alger*
The current state of COVID-19 treatment in Africa: Perspectives and the need for personalized, precision therapy

Judu **ILAVARASU**: *Division of Yoga and Physical Sciences, Swami Vivekananda Yoga Anusandhana Samsthana (SVYASA), Bangalore, India*
SVYASA: Priorities for a meridian energy research project in S-VYASA, Bangalore

Vladimir **PETRUKHIN**: *Founder, CardioMood (www.cardiomood.com)*
Mobile HRV analysis and expert tools for heart rate analysis for TeleHealth / TeleMedicine

Madan **THANGAVELU**: www.iiimb.me
PROGNOSNET COVID-19: Organization of the Network, Clinical Studies and Study protocols & Project Timelines

4th MERIDIANTECH-COVID19 Workshop

Bioelectrical Diagnostics & Coherent Therapy

Controlled trials of Meridian technology-based diagnostics and diagnostics-driven precision, personalized therapy

Thursday 30 April 15:00 CEST – Hosted by MEDPREVENT systems GmbH & Co. KG DE

Giulio **TARRO** : <http://www.giuliotarro.it/> , <https://twitter.com/TarroGiulio> & https://it.wikipedia.org/wiki/Giulio_Tarro:
Urgent need for new approaches for managing the COVID-19 pandemic

Habib **DOUAGUI**: *Professor & Head, Department of Pneumo-allergology, Center Hospitalo Universitaire de Béni Messous, Algiers, Algeria*
COVID-19 in Africa: The state of play and approaches to management and care

Judu **ILAVARASU**: *Division of Yoga and Physical Sciences, Swami Vivekananda Yoga Anusandhana Samsthana (SVYASA), Bangalore, India*
ACUGRAPH for COVID-19 studies: Limits and challenges

Dr. med Michael **BAUER**, Raimund **HOFFMAN** & Franziska **MICHL**: *MEDPREVENTsystems GmbH, Marktredwitz, Germany*
COVID-19 diagnostics and viral testing and assessment of organ health using the PROGNO system

Dr. med. Thomas **RAMPP**: *Faculty of Medicine, University of Duisburg-Essen & Institute for Naturopathy, Traditional Chinese and Indian Medicine, Kliniken Essen-Mitte, Essen, Germany*
Visco Dendron: PROGNO-based diagnostics-driven personalised selection of ‘coherent’ plant preparations for

therapy

Svetlana von **GRATOWSKI**: *LABORATORY OF SPECTROSCOPY AND MILLIMETER AND SUBMILLIMETER WAVE MEASUREMENTS, Kotelnikov Institute of Radioengineering and Electronics, Russian Academy of Sciences. Fryazino Branch*
Millimeter and submillimeter waves in medicine and their effects on complex biological systems

3rd MERIDIANTECH-COVID19 Workshop

Bioelectrical Diagnostics & Coherent Therapy

“Unpacking” & Understanding Meridians: Practical Measurement and Interpreting Results

Friday 23 April 18:00 CET – Hosted by MEDPREVENT systems GmbH & Co. KG DE

Raimund **HOFFMAN**: CEO, MEDPREVENT systems GmbH & Co. KG DE

INTRODUCTION: Review and progress with MERIDIANTECH-PROGNOSNET engagements

Judu **ILAVARASU**: Division of Yoga and Physical Sciences, Swami Vivekananda Yoga Anusandhana Samsthana (SVYASA), Bangalore, India: **ACUGRAPH studies in SVYASA, Bangalore, India.**

Dr. med Michael **BAUER**, Raimund **HOFFMAN** & Franziska **MICHL**: MEDPREVENTsystems GmbH

PROGNOS: The instrument, using the instrument, data structure, data analysis, results and interpretation

Nouri **GHARBI MD** : National Medical Coordinator, ORPEA-CLINEA, President RESPIRINTERNATIONAL, **Paris-Sud University (Paris XI): COVID-19 status in France and The Maghreb: Observation and and new therapeutic strategies**

Alexander **TROFIMOV MD**: Director, International Scientific Research Institute of Cosmic Anthropoecology (ISRICA), Russia & Chief of Laboratory Helioclimatopathology of Science Center of Clinical and Experimental Medicine of Siberian Department of Russian Academy of Medical Science: **Cosmic Radiations, Solar activity and its effects on BIOLOGICAL system and and links to bacteria and viral infection susceptibility?**

Madan **THANGAVELU** & Vincenzo **VALENZI**: www.iiimb.me

COVID-19: Challenges and opportunities for Pharmacogenomics, Pharmacoelectrodynamics & MERIDIANTech

2nd MERIDIANTECH-COVID19 Workshop

Bioelectrical Diagnostics & Coherent Therapy

A new bridge between Oriental and Occidental Medicine

Saturday 15 April 15:00 CET – Hosted by MEDPREVENT systems GmbH & Co. KG DE

Raimund **HOFFMAN**: CEO, MEDPREVENT systems GmbH & Co. KG DE

INTRODUCTION: **Why I invest all my energy and money in PROGNOS technology.**

Dr. med Michael **BAUER**, Dr med dent. Louis **NIESTEGGE** & Dr. med Beate **MAUL** (MD):

Clinical cases studied using the PROGNOS system

Antonio **ACETI** Professore Ordinario, **Sapienza University of Rome | La Sapienza**

The Rome experience with COVID-19 and possible new therapeutic strategies

Giulio **TARRO**: Chairman, Virosphere Biotechnology Committee, World Academy of Biomedical Technologies (WABT)–

UNESCO, Paris **The STRATEGY for tackling COVID19 using lessons of the past**

Konstantin **APYKHTIN** PhD: Institute of Gerontology, National Academy of Medical Sciences of Ukraine

Mini-ECG and HRV in home monitoring of COVID 19 patients

Madan **THANGAVELU** & Vincenzo **VALENZI**: www.iiimb.me

COVID-19: Challenges and opportunities for Pharmacogenomics, Pharmacoelectrodynamics & MERIDIANTech

1st PROGOSNET-COVID19 Workshop

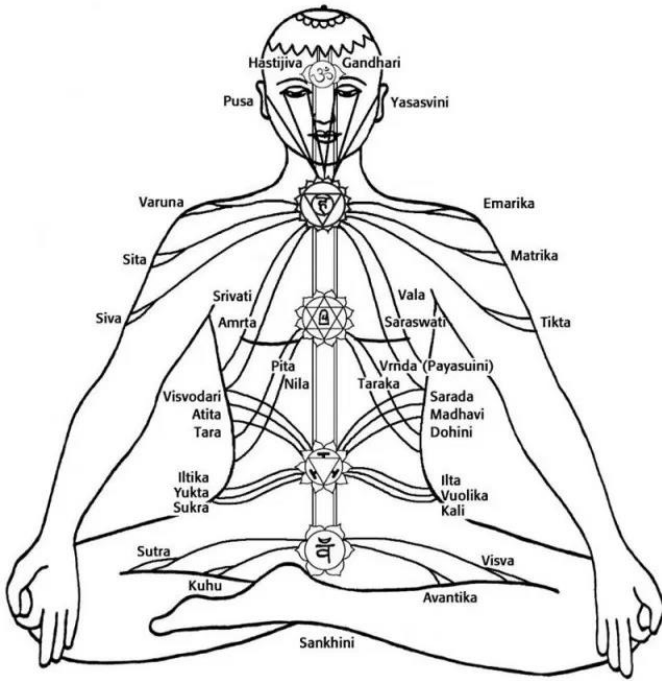
Functional Diagnostics & Coherent Therapy

Coherent Drugs, Compatible Foods, Nutrition & Environment

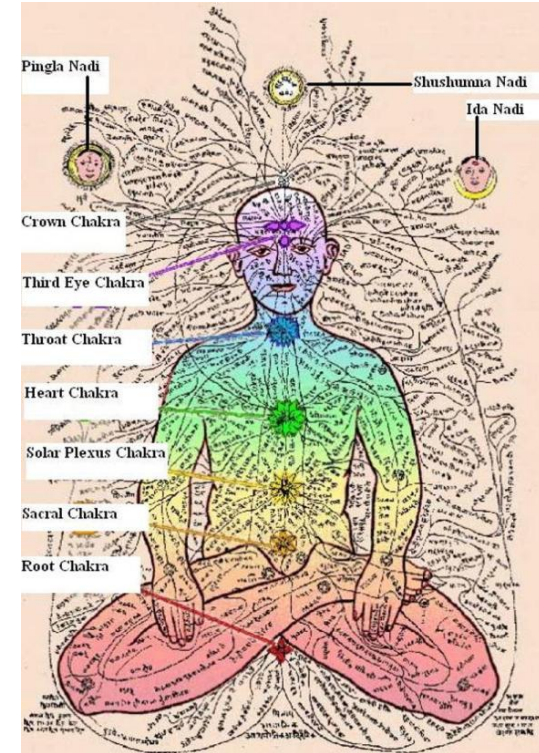
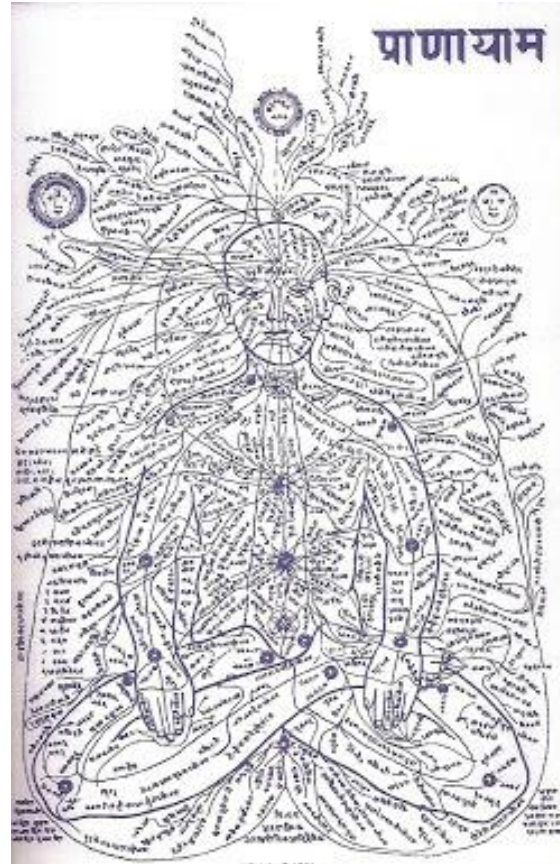
Monday 13 April 16:00 – Hosted by MEDPREVENT systems GmbH & Co. KG

Raimund HOFFMAN :	Introduction to MEDPREVENT & PROGNOS
Madan THANGAVELU :	COVID-19 and the complex physiological responses of a viral infection
Vincenzo VALENZI :	Order and 'coherence' in complex systems and the immune system
Dr. med Michael BAUER :	Clinical case studies using the PROGNOS system
Jamal AISSA, DIGIBIO, Paris :	Low doses and high dilutions results of Benveniste and Montagnier and implications for COVID-19 management
Francesco SICURELLO :	Telemedicine systems and opportunities for the future
Prof. Antonio ACETI :	Experiences and lessons from COVID-19 critical care and management in Rome
	... others to join

72,000 Nadis: Nadikas, nadis and nadichakras

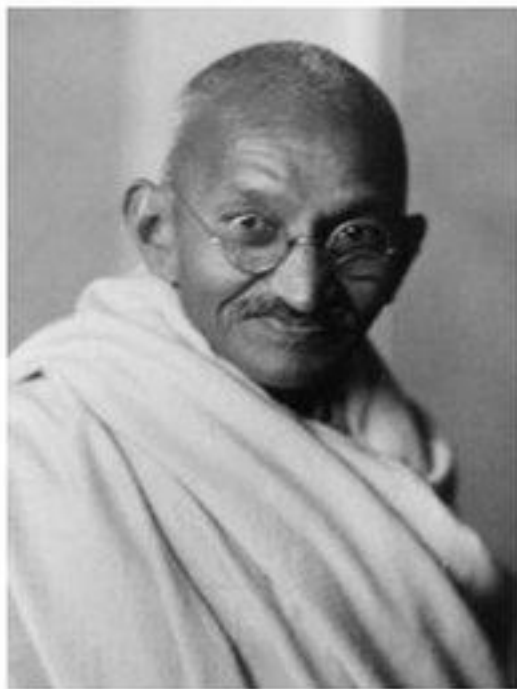


The Siva Samhita mentions 350,000 nadis of which 14 are stated to be important.



Pingla Nadi
Shushumna Nadi
Ida Nadi
Crown Chakra
Third Eye Chakra
Throat Chakra
Heart Chakra
Solar Plexus Chakra
Sacral Chakra
Root Chakra

The three most vital are Sushumna, Ida, Pingala.



**First they ignore you,
then they laugh at you,
then they fight you,
then you win.**

Mahatma Gandhi