Die Lungen der Erde wurden verbrannt!
Amazonas Feuerrodungen, Australische, Kalifornische und Russische Feuerstürme!

Die Erde Gaia ist ein ganzheitliches lebendes Wesen! Sie hat Homöostase!
Die Erde entwickelt sich!
Deshalb entsteht das Virus, das sich auf die Lungen der Menschen auswirkt!

Wir Menschen sind untrennbarer Teil des Erdenwesens,
aber wir sind blind und haben kein Herz für sie!
Unsere Taten haben Auswirkungen, wie man sieht.
Eigentlich ist der "Homo technologicus" der wahre Virus, ein Parasitäres Wesen!

Wenn wir kapitalistischen egoistischen Menschen uns nicht ändern, löscht uns die Erde aus...!!!
Entwicke dich spirituell und denke um -
Sende Energie in Dein Herzchakra und verbinde dich mit der Erde...
Liebes-Bewusstsein ist benötigt - Nutze die Zeit für Selbstliebe und Meditation!
Es ist das Erfordernis der Zeit das kollektive Bewusstsein zu ändern ...
Liebe und Bewussstheit statt Angst!

Shamanic Revival!

Beifuss ist antiviral - corona virus vereint die menschen - homöopathie: Arsenicum Album C30

Kämpfe nicht gegen das Virus,
sondern stärke dein Immunsystem:

- Vitamin D3 (10.000 täglich)*
- wichtig für das angeborene Immunsystems

- wichtig für das adaptives Immunsystem (T-Zell-Funktion)
- wichtig für die antivirale Th1-Immunreaktion

- Vitamin C (1-2 Gramm täglich)*
- stimuliert Leukozyten
- stimuliert das Erkennen von Pathogenen
- stimuliert die Kommunikation zwischen angeborenem und adaptiven Immunsystem

- Zink (15-25 mg täglich)*
- steigert die Zytokinproduktion zur Aktivierung von Immunzellen

making it some 23 times more fatal than seasonal flu infections (which is why aworldwide pandemic could be very serious indeed). Like influenza organisms thisvirus primarily affects the lungs and isspread most often through respiratorydroplets – though direct contact with body secretions can alsotransmitit. As with the majorityof respiratoryviruses, infection stimulates coughingandsneezing which enables the virus to find more hosts. (Many people who areinfectedhave minor or no symptoms, so thatthey act as stealth carriers, spreadingthe virus throughout the population.) Unfortunately, the virus canalso survive fora relatively long time on mostsurfaces, thus being transmitted in some cases bytouch. (You touch the door knob, then your mouth or nose, and Bob's your uncle.)SARS and MERS (Middle East Respiratory Syndrome – caused by a relatedviralpathogen) also tend to infect the GI tract in people who become ill. Around aquarter of those infected develop a rather intense diarrhea. Early studies of the newvirus have found viral particles in stool samples whichindicates it might alsospread via feces (as SARS and MERS do) and most likely in urine (again likeSARS and MERS). As with SARS, Cov-2 has a sort-of distinct three-stage impact onlungtissue once someone is infected: initial infection that allows viral replication,immune response which can include in more serious cases immune hyper-4reactivity, andrelatively minor to very severe pulmonary damage. That being said,most infections tend to be very much like the flu. Most people will in fact believethemselves to have the flu – not a coronavirus infection. In reality, Cov-19infections for around three quarters of those infected will remain relatively mild.Only about 18% of those infected experience a severe infection. Most of those willbe older, that is people whose immune systemshave aged over time; people withcompromised immune systems; and people with existing disease conditions suchas COPD. Somewhat oversimplified, here is what serious Cov-19 infections do in thelungs. Once in the lungsthe virus infects specific cells, among them the cilia. Thecilia canbe likened totiny hairs. They protrude fromcells in the lungsandcontinually move like waves on the ocean. This moves mucusand particulatematter up and out of the lungs.During infection, SARS viruses often killthe cilia they infect which allowsdebris and fluids to build up in the lungs(thisis pneumonia). When the infectionbecomes this serious the immune system can become highly activated. This sendslarge numbers of immune cells to the lungs to stop the infection, clear out thedebris, and heal the tissues. Oversimplified (again), during

infection the affected cells send out chemical5messenger molecules which (despite their beinga variety of them with differentnames) I group together under the single name of cytokines. (Really, at root, this isjusta tomato tomahto kindof thing; they are all messenger molecules that do stuffin the body duringinfections.)When the Cov-2 virus, finds its preferred cells it uses very specific andevolutionarily ancient strategies to get inside those cells, take them over, and use their structures to reproduce. Then it breaks the cells open, releasing new virusesinto the body which canthen go on to infect other cells, and so on, ad nauseum.Along the way it stimulates coughing to infect more mammals tospread the virusinto new hosts. Itis important to realize that viruses are some of the oldest living things onthe planet (despite this many biologists continue to insist viruses are not “alive,”which asanyone with a brain can plainlysee isinaccurate). Viruses are in factbillions of years old. As such they are exceptionally good at what they do and likeall living things theylearn as theygo, adapting new behaviors along the way.Plants, in comparison, are only about a billion years old, complex land plantsaround 300 millionyears or so. In contrast our most ancient hominid ancestors areat most 1-2 million years old, our species inthe form it has now is only around35,000 years old. Western medicine (at a generous estimate) is 200 hundred years6old. Its knowledge of viral pathogens and infections isonly around 50years old. Much of that is rudimentaryor evenincorrect (based asit is on outdatedecologicalmodels and medical understandings). All pathogensare sophisticated at modulating human cytokinesto achievetheir own ends. They have learned how to circumvent many of our normal immuneresponses in order to facilitate their entry into the body, their reproduction, andtheir release into new hosts. Elderly andcompromised immune systems are quiteoften unable to respond sufficiently tothese viral sophistications; they getoverwhelmed. Cytokine responses in the human body ofteninvolve inflammation (anormal and importantpart of the healing process and response to disease). Withsome infections, if the immune systemcan’tshut down the infection successfullyan ever-worsening inflammatory cascade occurs (sometimes called a cytokinestorm). This can sometimes be extremely serious. With the SARS-group ofviruses, the damage usually occurs in the lungs. Even if people recover, this cantake years to repair itself. If severe enough, it will cause death. Cytokine storms like this can spread throughoutthe bodyvia the blood andwill sometimes cause what is called septic shock. Because the blood circulatesthroughthe liver and kidneys, these organs some of the earliest organs that are7damaged by a cytokine storm. Eventuallythe organs shut down, death oftenfollows. (With MERS acute kidney damage is verycommon.) Mechanisms of Cellular Infection and Natural InterventionsOne they get into the body, the SARS-group of viruses attach towhat are calledangiotensin-converting enzyme-2 (ACE-2) linkages on the surface of cells. This isan integral membrane protein found on many cells throughout the body, includingthe lungs (but notso much in the nasal or sinustissues), GI tract, heart, vascularcells, and the kidneys. ACE-2 isintimately involved inregulating the renin-angiotensis system(RAS). RAS is active throughout the body and in most organs including the lungs,spleen, lymph nodes, kidneys (where it regulates renal electrolyte homeodynamis),the vascular system (where it regulates constrictionand relaxationof the vessels),andso on. RAS is crucial to the functioning of mostorgans in the body.ACE-2 has a number of regulatory functions, among them convertingangiotensin 2 (Ang-2) to less potent molecular forms. (Angiotensin 2 is a highlybioactive molecule, ACE-2 regulates/modulates its actions.) The SARS-group of viruses attach to ACE-2 wherever it occurs on thesurface of cells (including the cilia in the lungs). [Herbs that protect ACE-2 are8Glycyrrhiza spp (licorice), Scutellaria baicalensis (Chinese skullcap root),Sambucus spp (elder), luteolin, Aesculus hippocastanum (horse

chestnut),Polygonum cuspidatum (Japanese knotweed root), Rheum officinale, and plantshigh in procyanidins and lectins (e.g. cinnamon)]. These ACE-2linkages are the entry point for the viruses infection ofcellular tissues. Once ACE-2 is damaged by viral attachment andpenetrationACE-2 levels in the lungs (or the affected organ) fall, ACE-2 function declines orisdestroyed, the RAS system is no longer modulated properly. The lungs showenhanced vascular permeability, edema, neutrophil accumulation and worseninglung function.ACE-2 functionalso tends to be lessdynamic the older people grow. This ispart of the reasonthat the SARS-group of viruses has more damagingimpacts onthe elderly [Herbs that upregulate ACE-2, increasingits levels in the body, arePueriaspp (kudzu), Salvia miltiorrhiza(Dan shen), andGinkgo biloba]. ACEinhibitors (in contrastto ACE-2 upregulators) will actually increase the presenceof ACE-2 andhelpprotect the lungs from injury[Some herbs thatdo that areCrataegus spp(hawthorn) andPueraria spp (kudzu)].Upon infection by the SARS-group, a cascade of inflammatory cytokines isinitiated:IFN-gamma, CXCL10, IL-1b, TNF-a, and IL-6 are some of the major9ones,IL-6 particularly so. RANTES, MCP-1, IL-8 are elevated inabout half ofthose who are infected. The p38 MAPk pathway is highly stimulatedand asinfection progresses levels of PGE2 and TGF-b (with a later elevation of IL-2) allrise. (Salvia miltiorrhiza is a strong cytokine adaptogen, specific for thiskind ofthing; it acts to normalize cytokine dysfunction.)Lowering TGF levels can be veryhelpful (herbs that can do this areAngelica sinensisandAstragalus spp). HMGB1 levels during SARS-groupcytokine cascades can be high, especiallyin those who are seriously ill (Salviamiltiorrhiza is specific for reducing HMGB1 levels). During infection thiscytokine cascade initiatesa massive movement of immune cells, their infiltrationandaccumulation intolungtissues. Generally, the older the infected animal(human or otherwise) the greater the cytokine upregulation and the worse theoutcome. Sharplyreducing IL-1b has been found to significantlydecrease the impactof the disease on the infected and to inhibit mortality [Some herbs for reducingthis cytokine are Polygonum cuspidatum (Japanese knotweed),Scutellariabaicalensis (Chinese skullcap), Cordyceps spp, Pueraria (kudzu), and Eupatoriumperfoliatum (boneset)]. Severe hypoxia (not enough oxygen) often occursin the cellsthat are10affected (and in the person so afflicted). The RAS-stimulated cellular hypoxiagenerates highlevels of free radicals throughthe rapid increase of Ang-2, i.e. ahypoxia-re-oxygenationinjury cycle. The cells generate large levels of hydrogenperoxide and superoxide radicals. Endothelialcells become porous andorgan andcellular integrity is lost. In short the excessive Ang-2levels (due to the destructionof the ACE-2 cells by the virus) causes massive damage tothe lungs. Lymph andspleen tissues are often quite compromised as well. Protecting the cells from the induced hypoxia significantly reduces thedamage inthe lungs. (Rhodiola is specific for this. It prevents hypoxia-inducedoxidative damage, increases intracellular oxygen diffusion, and increases theefficiency of oxygenutilization.) Again, the virus specifically targets (andreplicates within) ciliated cells,destroyingthe cells and their capacity to move mucousup and outof the lungs.(Cilia-protective herbs are Cordyceps spp, olive oil and leaf, any berberine-containing plants, and Bidens pilosa.) Autoantibodies are produced that begin to attack host epithelial andendothelial cells, increasing the destruction. Reducing autoimmunity(Rhodiola,Astragalus, Cordyceps spp) and protecting endothelial cells(Polygonumcuspidatum – Japanese knotweed root) is crucial.11Autopsies of those whohave died from infectionby the SARS-group ofviruses has revealed that alveolar damage in the lungs is severe. There is massivedamage tothe lymphnodes of the lungs, including severe necrosis inthe whitepulp and marginal sinusof the spleen, destruction of the germinal centers in thelymph,apoptosis of lymphocytes, and an infiltration of monocytic cells. Protectionof spleen

and lymph are essential [Ceanothus spp (red root), Phytolacca (pokeroot), Scutellaria baicalensis(Chinese skullcap root), Salvia miltiorrhiza,Bidenspilosa].While the SARS-group of viruses often replicates in ciliated epithelial cells,they do as well in infected dendritic cells, both mature and immature. Itdoes notkill the DCs but merely stops them from maturing and stimulating an effectiveadaptive immune response. DC s exist abundantly just under the epithelium layers in the lungtissue.The cytokine upregulationthat infection causes makes the endothelium muchmore porous, allowing the virus topenetrate and infect the DC s. These virusesvery powerfully upregulate IL-6 and IL-8 in the epithelial cells. These particularcytokines concentrate around the immature DCs and strongly inhibit theirmaturationand the priming ability of mature DCs for the generation of active Tcells. This inhibits the productionof active T cells and allows the virus toenter12andseverely damage the lymph organs in the lungs. Stimulating DC maturation(Cordyceps spp) and increasing T cell counts [Glycyrrhiza spp(licorice),Ceanothus (red root), Sambucus spp(elder), and zinc] can help reduce symptompicture and disease severity.Natural Protocols for SARS-group Viral Infections, IncludingCOV-19The rationale here is to find plants that willcounteract the actions of the SARS-group of viruses, then to cross correlate those in order tochoose the plants that arepresent in most categories of actionand that have a tradition of use for these kindsof infections. Whatis needed are plants that have the following actions:1) Plants specifically antiviral for the SARS-group of viruses; the strongestknownso far are Scutellariabaicalensis (Chinese skullcap root), Houttuynia spp,Isatis spp, Glycyrrhiza spp (licorice), Forsythiasuspensa (the fruit), Sophoraflavescens, andLycoris radiata(extremely potent). Lonicera japonica andPolygonum cuspidatum are also effective as antivirals for coronaviruses as agroup. 2) Block viral attachment to ACE-2 linkages. Specific for this areGlycyrrhiza spp (licorice), Scutellaria baicalensis (Chinese skullcap root),Sambucus spp (elder), luteolin, Aesculus hippocastanum (horse chestnut),