

BURN ERADICATION PROJECT PROTOCOL

THE CURRENT SITUATION

Every year, there are hundreds of millions of people who are burned. Since 95% of these accidents occur in low-income countries, no one knows for certain how many people actually die, are maimed or disfigured for the rest of their lives. UNICEF officially reports 750,000 deaths due to burns annually, but the actual number is much worse. About half of the people killed or dramatically injured from burns are young children. Thus, this is not a form of disaster that happens far away from home (on the road or in the air) since half of those burn injuries occur at home. The societal and financial costs are simply appalling: Just for the U.S. alone the lower estimate is \$10 billion (and this does not include the DALYs – disability-adjusted life years -- which makes the actual cost a lot more catastrophic). In fact, burn injuries are the most costly of all forms of accidents: \$200,000 is average for the initial severe burn injury, which easily exceeds \$1 million when all the surgical procedures and tissue transplants that often follow are taken into consideration.... In the U.S., there are 2.4 million burn injuries reported each year. Out of this amount, 650,000 burn victims are actually treated by medical professionals. (4,500 people die directly from burn injuries and another 10,000 die of burn-related infections shortly thereafter.) According to the National Fire Protection Association (NFPA), fire kills more Americans than ALL natural disasters combined.

This is a human catastrophe of the first magnitude, comparable to the AIDS catastrophe in terms of global emergency. (Actually, since 1981 about 25 million people throughout the world have died from AIDS, whereas burn-related casualties approach twice this figure). More than \$25 billion will be invested in 2010 just for HIV/AIDS research. Yet our societies are doing absolutely nothing to find a solution to the scourge of fire burns and very little to help the millions who will die or be disastrously and permanently disabled for the rest of their lives due to burn injuries.

We DO have a solution. What it requires is some unprejudiced open-mindedness, as our methodology might seem at first highly unorthodox, and a sincere willingness to find a solution to this unacceptable human disaster. But before we explain the methodology that we propose to put to the test on the widest possible scale, we must first take a deep look at the true nature of a burn injury.

WHAT IS A BURN INJURY?

When you seriously look into it, there is a surprising and dramatic scarcity of information in scientific literature on the actual processes at play with a burn injury. There is plenty of medical jargon that explains how tissue damage, especially in the perfused subsurface burn, is caused by toxic mediators of inflammation (mostly oxidants and proteases), then how things get worse when bacterial infection takes place alongside this ongoing pattern of self-destructive processes. But there is no explanation, whatsoever, on what exactly triggers these self-destructive processes, which are, most of the time, utterly out of proportion to the actual severity of the initial burn injury.

Aside from psycho-cultural factors related to our collective unconscious and to the very special relationship of the human species with FIRE since its very incipience, it is essentially the extreme level of pain caused by the burn itself -- nothing in the world hurts more than thermal accidents -- that puts our brain on the wrong track and forces it into dramatic overreaction. It is this neural shock and the semi-autistic immune overkill from our brain that causes the devastating damages that we are familiar with, not the accident itself.

Everyone knows that under proper mental conditioning (self-induced hypnotic trance, for example), people can walk on fire for a relatively protracted period of time without showing any sign of burn injury. By the same token, people under hypnosis who have been told that they had burned themselves, even though they were not exposed to any thermal source, yet they have developed ACTUAL burn injuries. All that brings us to the idea of subjective reality: The entire interpretation of our surrounding reality is based on neuro-electrical and chemical signals, NOT on objective and actual factors. This subjective perception can be tricked in one direction or its opposite, to overestimate or to

underestimate input about the true nature of any external event, including accidents. Then, according to the SUBJECTIVE interpretation of the electrical and chemical signals it has received, our brain responds with a given course of action. In the case of burn, owing to its unparalleled level of pain, the immune and physiological responses are simply out of proportion and unconsciously provoke tissular and organic self-destruction of devastating magnitude.

OUR METHODOLOGY

Through techniques of advanced mental refraction too complex to be described and explained in such a short text, and after we have collapsed into a workable algorithm the symbolic singularity of any human subject (a video, a photograph or even basic spatio-temporal coordinates), we immediately provoke a subliminal neuro-bypass which redirects and inhibits the toxic signals of self-destruction that his or her brain has sent in response to the thermal accident. Since the whole operation takes place from a distance, we have called this specific procedure Distant Subliminal Neuro-Bypass (DSNB).

In the whole operation, time is of the essence since those self-destructive processes occur extremely fast after the brain has wrongly sent its disproportionate signals. For the sake of optimized results in our course of action, it has been decided that the DSNB procedure should be applied only if we can receive the necessary information and adequately respond within 30 minutes following the initial thermal accident. After that delay, the deleterious self-destructive processes have taken place on such a dramatic scale that our intervention would become less and less effective. In fact, in cases of so-called third and fourth degree burn, in order to have a chance to produce optimum results, DSNB must be applied within the first minutes following the accident, before the switch between subjective and objective reality has been turned and has reached the deeper centers of interpretation of the brain.

PROJECT

After completing a sufficient number of burn cases that have been fully resolved by our DSNB technique (and utilizing wide scale media involvement to gather as many burn testimonies as possible from all over the world), we will be ready to go to the second phase of the project: Scientific experimentation in the best universities and laboratories under the strictest scientific scrutiny and according to the highest standards of epistemological methodology.

The third phase will be the most interesting and exciting for the public, since we will then begin the teaching and training of groups and individuals in DSNB (ideally in every large city in the world), people capable themselves to take care of burn victims wherever they are. And

then, finally, in order to carry out the global eradication of the scourge of burns from the face of the earth, hundreds of "teaching units" will be specifically trained so that they can travel throughout the world (particularly to the most remote and isolated rural areas) to train, in their turn, thousands and thousands of volunteers.

This way, we could rapidly attain full-spectrum coverage of the whole human population and, thus, save millions of people from death, from unnecessary suffering, from permanent disability and from devastating traumatic disfigurement.

BACKGROUND

Dr. Philip Savage, Ph.D. is the father of Distant Subliminal Neuro-Bypass. He has been using DSNB on severe burns and on many other unrelated applications for more than 25 years with a remarkable rate of success. His technique has been tested and validated in Europe and in America in several research institutes under strict scientific scrutiny. He has also been working for a few years as a private researcher in the California Institute for Human Science (Encinitas, CA) where DSNB, after having been successfully tested by Western sciences, was finally tested also according to the Eastern paradigm, using the most sophisticated Japanese scientific methodology (a futuristic computer technology coupled with biosensors -- called AMI -- that analyzes the level, the distribution and the circulation of the "energy flow," a.k.a. "Ki" or "Chi," in any human subject . Applied on hundreds of volunteers, Dr. Savage's DSNB has succeeded in enhancing their level of "energy flow" on a totally unprecedented scale, beating even the previous record held by the famous Dr. Motoyama himself (the founder of this AMI, groundbreaking Japanese technology)... by a factor of 3 !!!

2015 UPDATE: FireBurnDoctor.com

Already more than 1200 **successful burn cases** from 50 US states and 52 countries worldwide, all with the same results.

These hundreds of people simply called or texted the FBD phone number -- **1-818-332-6445** -- **within 30 minutes** of being burned. An hour or so later, they called back to report their amazing results: **pain gone in minutes, burn erased in hours.**