

PREDECESSOR DOCUMENT #5:

The following document on Subliminal Distant Influentiality (SDI), consisting of excerpts from “Breakthrough in Burn Recovery: An Alternative Method”, was written in 2000 as a proposal to the U.S. Congress House of Representatives Committee on Health in which Philippe Sauvage offered to expand on the already tested and PROVEN “Burn Study,” to create national (and international) disaster response teams employing his Subliminal Influence Technologies in preparation for times of dire national and international emergencies that would involve severe fire-burn.

SUBLIMINAL DISTANT INFLUENTIALITY (SDI)

“Breakthrough in Burn Recovery: An Alternative Method” (2000)

I. INTRODUCTION

The number of people suffering serious burns in the U.S. each year is staggering. The costs associated with burns, i.e. cost of medical care and lost wages, pain and suffering, psychological trauma of permanent scarring, are enormous.

To date, there is no known "cure" for severe third-degree burns. In fact, by medical definition, third degree burns cannot heal; if a severely burned area of skin appears to have any possibility of natural restoration (reepithelization of skin), it is diagnosed as second-degree. The only widely used medical remedy in recovery, if the patient survives the trauma and associated infection, is skin grafting. Skin grafting is not only painful and scarring, the surgery is not always possible due to inaccessible and/or excessive areas needing repair.

Furthermore, during major geological or ecological disasters, such as nuclear strikes, radioactive exposure, major volcanic eruption, dramatic Earthquake, or giant firestorm (natural or following intentional bombing), there are no known emergency strategies that could handle the "treatment" or even the "repair" of large numbers of human beings suffering severe third-degree burns.

The purpose of the studies outlined below is to test the new science of Subliminal Distant Influentiality (SDI) in its ability to restore severely burned human subjects back to a normal condition of healthy homoeostatic equilibrium.

By scientifically demonstrating the validity of Subliminal Distant Influentiality (SDI) in the treatment of severe burn victims (Phase I), we may provide a remarkable potential to respond successfully to human disasters of all kinds in a way that far exceeds all current clinical and medical capacities of even the richest and most advanced nations. Its low cost provides the potential of bringing immediate and adequate assistance to developing countries facing similar disastrous events. We propose to test this life-saving response capability which we call, *Holophylactic Emergency Action Response Team (H.E.A.R. T.)* in Phase II. In Phase III of the study, we will test the ability of Philip Savage, the originator of the science of subliminal influentiality, to teach others how to apply SDI in the recovery of thousands of victims suffering third degree burns from human disaster scenarios.

II. PURPOSE OF THE PROPOSED STUDIES

The purpose of the proposed study is to assess whether subliminal distant influentiality (SDI) processed by originator and experienced SDI practitioner, Mr. Philip Savage, may physically benefit people with severe fire-related burns (third degree), and if so, whether this technology can be effectively taught to others.

The study is essentially an evaluation of subliminal distant influentiality and the application of Holophylactic Emergency Action Response Team (H.E.A.R.T.) efforts as they are available in the community. The study is designed in three phases to test under rigorously controlled, randomized, double-blind conditions the efficacy of SDI treatment on the recovery course of patients with third degree burns and the effectiveness of training expert H.E.A.R.T. teams for trauma recovery in human disaster situations.

A. Phase I, Pilot Study: To demonstrate the remarkable efficacy of SDI in the recovery from third-degree burns. Burn recovery data for 60 third degree burn patients processed by Philip Savage will be compared to 60 historical matched controls.

B. Phase II, Expanded Study: To test the ability of Mr. Savage to process, at the same time, dozens of severely burned victims from emergency disaster situations throughout the United States. In this second phase of the study, Mr. Savage will be joined by many additional emergency medical staff and firefighters (H.E.A.R.T.) who will refer numerous burn victims for SDI processing/burn recovery each day. Analysis by burn physician experts will compare recovery outcomes of 500 treated subjects with the historical records of severe burn victims from previous human or ecological disasters (earthquakes, fires, Chernoble, etc.) Thus, this study phase will establish the validity and reliability of the technology as a process capable of serving potential fire recovery needs on a large scale.

C. Phase III, Training Study: To demonstrate the ability of Philip Savage to teach others how to apply SDI in the recovery of thousands of victims suffering third degree burns in structural

fires or other disaster scenarios (earthquakes, nuclear strikes, etc.). Qualified teams of firefighters, trauma intervention workers, and emergency crewmembers in the U.S. and other countries will be trained in Holophylactics, the science of trauma recovery. After the treatment efficiency of Savage-trained H.E.ART. emergency units has been demonstrated, then, to ensure scientifically valid results, their SDI capabilities will be tested in the treatment of several thousand disaster victims suffering severe third-degree burns.

III. BACKGROUND, SIGNIFICANCE, IMPLICATIONS

A. *Background of Philip Savage and SDI: An ancient tradition and futuristic science and technology*

1) What is SDI and how does it work? Subliminal Distant Influentiality (SDI) is a new science originated and tested over the last 25 years by Philip Savage (Paleoanthropologist, Celtic cultural symbol, and expert in criminology), aimed at breaking into the deeper neuro-behavioral programming of any predesignated human subject in order to implant new sets of information that can dramatically actuate reparative processes in individual trauma conditions and human disaster scenarios.

The subscientific domain, *Holophylactics* (etymologically: "Preservation of Sacred Completeness") can be defined as a science in which the restorative processes that could bring gravely disrupted human subjects back to normal condition of healthy homeostatic equilibrium would take place at the highest level of our collective bio-consciousness. Holophylactic treatment is bio-reunifying in origin.

Applied to victims of severe third-degree burn, effective Holophylactic treatment (SDI) forces back to synergistic harmony the dissociated parts and functions of the persons within their own internal physiological ecosystems. It also reintegrates their formerly disconnected bio-singularity into a higher space-time bio-continuum where separateness and individual entropy (degradation) no longer exist. Through those processes the inner conflict between their mind-body interactions gives way to a situation of functional reunification. Their deleterious bio-secession from bio-consciousness as a whole is replaced by a condition of enlarged bio-reintegration (restoration of harmony or balance).

The theoretical bases of Holophylactics have their roots deeply ingrained in concepts such as "*psychofields*," "*biocontinuum*" and, more importantly, in the idea of "*pluridimensional levels of variable reality*."

2) Philip Savage: "Unprecedented Phenomenon." Throughout his childhood and then through his academic and professional experience, Mr. Savage received unique cultural/genetic conditioning and training that enabled him to develop and test the new science of Subliminal

Distant Influentiality. On a daily basis, first from his Celtic Clan ("professionals" whose expertise in higher levels of reality goes back further than human memory) and then from his own experiments in major European universities and laboratories, Mr. Savage has witnessed so many occurrences typically labeled "paranormal" or "supernatural" that this domain has now become an entirely normal part of his intellectual and cultural fabric. Indeed, so much so that he has been able to demonstrate its scientific validity and incomparable pragmatic value.

The idea that things or phenomena which normal science cannot yet explain, still exist, is the premise of new science. Many scientific researches over the last century in the so-called "paranormal domain" have documented effects far more unconventional than those suggested by SDI. For example, there are people known today who can tell you in a fraction of a second -- faster than any known computer -- what day of the week (Monday? Wednesday?..) will mark the first of January in the year 10000. They can also compute faster than any machine, horribly complicated calculations that you and I would not solve in years. Under scientific control, Tibetan monks can increase their body temperature to such unthinkable levels that the snow and the ice around them quickly melt ("*Tumo*" technique)., People can dance, unscathed, in the middle of flames when driven prior to the ceremony to a specific mode of altered consciousness. Others, at the age of four have already written classical symphonies Furthermore, any average 19th century ancestor of ours would have responded incredulously if we could communicate to him ideas such as atomic energy, laser surgery, interplanetary journeys or, more prosaically, the Internet?

The new science and technology of Subliminal Distant Influentiality (SDI) is based on Mr. Savage's proven ability to access higher continuums of consciousness and thus, provoke unorthodox events that would be deemed supernatural by most people. Among his specific "skills" are ultra-specific mind-techniques which afford him full access to the most intimate centers of command of the "mammalian" and "reptilian" brain of just about any pre-designated human subject, regardless of the geographical location or personal psychological makeup of the individual. (See evidence of Mr. Savage's unique ability documented in latest brain mapping technology, attached, where the difference between the pre-test Alpha pattern and the Alpha pattern recorded during Mr. Savage's processing treatment is considered by neuroscientists to be an "unprecedented phenomenon").

B. Significance of Mr. Savage's Technology and Ability to Teach Others

Applying SDI to trauma intervention in the form of *Holophylactic* effort constitutes such a dramatic breakthrough in scientific theory and application due to several factors:

- 1) **Holophylactics** is not another form of care or therapy, proper, but an entirely new scientific domain of its own. Holophylactics does not replace or compete with traditional medicine or so-called alternative therapies for that matter. Actually, the very essence of holophylactics is to pick up where medicine left off, either because conventional treatments

are currently lacking proper responses to the nature of the problem, or because the specific socio-geographical situation of the health crisis does not authorize medical care to be provided when and where it is needed.

- 2) **Holophylactics** also shows its best applications when and where the extent of some human disaster is so overwhelming that, even in the richest Western countries, the magnitude of its gravity would exceed, by far, the capacity of normal medical resources and responses.
- 3) **Holophylactics** represents an archetypal "Third-World" answer to some cataclysmic health situation in which sufficient assistance is very likely never to arrive in time to prevent a human catastrophe soon to take place.

The Science of Subliminal Influentiality has been tested on more than 50,000 cases in Europe and the U.S. The most dramatic bio-restorations have included recovery from advanced brain cancer, coronary artery disease, virulent shingles, advanced Alzheimers' Disease, and intra uterine cystic fibrosis. In the case of severe third-degree burns, we have strong reason to believe that there will be significant positive outcomes in the proposed burn study. Such expectations are based on the 100% success rate achieved in the informal experimental research conducted in 1998 on Mr. Savage's processing of five children diagnosed with third-degree burns at the Grossman Burn Center in Sherman Oaks, CA. While statistical analysis of outcomes of these experiments were never completed, the raw data themselves strongly indicate the viability and importance of the proposed burn study. In the experimental research, the five children in the treatment group not only recovered from severe third-degree burns (whereas two children in the control group died), the treated children experienced little or no pain, skin grafting, or scarring, and were released from the hospital in significantly shorter time. None of the children were aware of the special treatment they received, thereby eliminating the "placebo effect" as a possible explanation.¹

If properly conducted, in addition to dramatic clinical effects, the proposed burn study will contribute significantly to our understanding of the nature and origin of the so-called "mind-body" connection and its relationship to and within higher states of consciousness. Mr. Savage's explanation of this theory also strongly suggests his ability to teach and train others, in which case the significance of *Holophylactic Emergency Action Response Teams (H.E.A.R.T.)* to the global human population in crisis situations is inestimable.

Mr. Savage has written:

All living things and processes are interactively imbedded into higher planes of psycho-and bio-unity. It is only people's cultural conditioning and the reductionistic systems of beliefs that have been forced upon them throughout their childhood which keep them from accessing to their higher self and greater consciousness. The same psycho-educational limitations prevent them from understanding and accessing the gateways of their own pluridimensional

potential that could allow them to break free from many traumatic or pathological situations arising from their fragmented unidimensional deadlock. "

It is this functional inadequacy to detach themselves from some of the most dangerous consequences of such unidimensional imprisonment that drives them to entropic dislocation or to vital overload, even when possible solutions still exist. If people could understand the true nature of their pluridimensional situation and unfreeze their inherent ability to realign themselves with another plane of higher reality, there would be, indeed, very few existential accidents which they could not quickly and efficiently resolve. Very fortunately, those abilities are not really dead within people but only dormant. Quite often, they can be unfrozen and reactivated under proper teaching and appropriate training after one has experienced them, firsthand, from an external source. Which brings us to the best practical aspect of holophylactics: Its absolute "provability" according to the strictest scientific or epistemological standards and its beautiful simplicity that makes it accessible even to nonscientific personnel.

C. Implications of Holophylactics in National and International Human Disaster Situations

Although holophylactic cares could represent a valid answer to many other geological or ecological disasters, the proposed burn study, especially Phases II and III which will care for thousands of trauma victims, will test beyond any reasonable doubt the phenomenal range of the usefulness of *Holophylactics* (SDI). For example, independent of its remarkable effects on radioactive exposure, Phase III will demonstrate how, in case of a terrible nuclear accident (or nuclear strike on some major city), a few dozen especially trained experts could take care of the whole population with an unprecedented rate of success. (A major volcanic eruption, a dramatic Earth quake, a giant firestorm (natural or following intentional bombing) and similar catastrophic scenarios also authorize immediate and proper holophylactic responses).

The beauty of holophylactic cares is that only one properly trained local expert can give assistance to hundreds of people in a very short period of time since his or her own action does not require physical and personal contact with the victim. Holophylactics forms one of the many applications of SDI in the field of human health (traumatology, especially). This means that all the reparative processes take place beneath the threshold of the victim's consciousness (while being in a comatose condition, for instance) and can be activated from a distance as long as a few basic coordinates on all the victims can be collected in time, immediately in the wake of the human disaster.²

Furthermore, after the initial three phases of experimental development is successfully carried out (this constituting the proposed experimentation project), the value of setting up some sort of international program would be clearly apparent. Such an operative structure would allow the training of local or mobile experts ready to face any kind of catastrophic situation. Note, that in

case of some dramatic national or international emergency, dozens of holophylactic assistants could be taught within days the basics of the proper techniques, enough to authorize them to offer the most immediate proper responses in such a situation of crisis. Indeed, after crisis victims had been successfully exposed to holophylactic treatment, most of these former recipients would turn, in no time, into very useful and proactive agents of the whole rescue operation. When one's dormant self-regenerative abilities have been unfrozen (even subliminally), one becomes much more responsive to the idea of variable levels of reality and collective bio-consciousness. This means that the more people who are treated through holophylactic techniques, the more potential holophylacticists will be available for future response in case of a new catastrophic emergency.

Finally, holophylactics does not require high-tech infrastructures, thereby representing a most cost-effective crisis intervention solution. Owing to its unsurpassable "tactical" flexibility and "terrain" adaptability, it also forms the best form of response in situations such as unstable political climates, popular uprising, guerrilla scenarios and the like, where, unlike other forms of assistance, infiltration and exfiltration of a few holophylactic experts can be easily and discretely performed. On a domestic scope, the training of at least one holophylacticist within every major fire department in the nation would bring forth results of immense consequences. Indeed, establishing expert H.E.A.R.T.s in every major city that would work under the direction of F.E.M.A. or other local agencies could represent an absolute priority in case of unforeseen human disaster.

IV. PROCEDURES AND METHODOLOGY

Cooperating Institutions:

UCSD Burn Treatment Center

San Diego Burn Institute

San Diego, Orange, and Los Angeles County Trauma Intervention Programs

San Diego, Orange, and San Bernadino Fire Department Paramedics

National Union of Firefighters

National Network of Trauma Intervention Program

A. Basic Design

The proposed study is a double-blind randomized design comparing pre- and post intervention changes occurring in a "subliminal distant influentiality plus usual medical care" treatment group treatment and a "usual medical care" non-treatment "historical" control group.

Patient Selection (Phase I, II, and III): Burned subjects will be identified with the assistance of firefighter paramedical teams or other emergency personnel. Consent to participate in the study will be obtained from next of kin or other authorized representative along with information (name, date and place of birth) necessary for implementing immediately the SDI processing required for burn recovery. Only those subjects burned from fire-related sources

and for whom data is available in the first hour post-burn will be included in the study. These subjects will be treated from a distance (of at least two miles) by Mr. Philip Savage, the originator and experienced SOI practitioner, if he is notified in time. Their subsequent medical files will be made available to the research team. Exclusion criteria are length of time since first exposure (more than one hour is excluded) and origin of burn other than fire-related or atomic energy-related (water and oil source burns are excluded).

V. ANTICIPATED OUTCOMES AND RELATED IMPLICATIONS FOR FUTURE CARE OF BURN (& OTHER TRAUMA) VICTIMS

The primary hypothesis of this study is that subjects in the SDI treatment group will more often show reepithelization of skin than those in the control group. Severe third degree burns are not known to heal, therefore if there is any significant restoration of skin, such an effect must be attributed to the efficacy of the subliminal distant influentiality treatment. Further, it is expected that recovery rates of treated subjects will be significantly faster and better than those observed for NON-processed control subjects who received standard care. Improved recovery rates will be manifested in the form of dramatically reduced pain levels, virtually eliminated mortality rates, fewer or no skin grafts, much shorter hospital stays and reduction or total elimination of chronic scarring.

Given Mr. Savage's previous record of success in relation to recovering burn victims, the probability of significantly improved rates of recovery for SDI bio-processed subjects is particularly high in Phases I and II of the study. It is expected that in Phase III of the research, exciting and dramatic uncharted territory will be discovered in Mr. Savage's ability to successfully teach SDI biorecovery processing techniques to members of appropriate agencies, i.e. firefighters, trauma intervention workers, etc.

Should the study outcomes confirm these positive expectations, additional funding would make possible the training of hundreds of biorecovery specialists, not only in burn units across the country, but in every major city nationally and internationally in an effort to prepare for any future human or ecological disasters. Once trained, such specialists would be collectively capable of processing and recovering hundreds of thousands of burn and trauma victims each day. These treatment resources would also prove invaluable in supporting the recovery of radiation exposed persons following an unexpected nuclear accident or terrorist action.

Thus, a foremost benefit of the proposed research study is to make as many people as possible aware of the existence, validity and value of SDI and the Holophylactic Emergency Action Response Team (H.E.A.R.T.) to assist in global human crises. Prior to such experimentation, no one could have ever imagined the dramatic and phenomenal possibilities already available to humankind. When proven to the larger scientific community, the science of SDI would constitute the means by which humanity will have a chance to survive and even benefit from any future natural disaster.

SDI is defined as the breaking, from a distance and through advanced techniques of psychogenic transduction, into the deeper neuro-behavioral programming of any predesignated human subject beneath the threshold of his/her consciousness, in order to implant new sets of information, to remove or to displace existing segments of information, to alter according to a plan his/her current mental functioning or to provoke a complete brain reset of the person, depending on the specific experimental agenda.

Such progress in the domain of scientific advancement could mark the beginning of a most unexpected and profitable global future, at far less cost than any current government is expending, and far greater peace than any group has ever foreseen.

ENDNOTES:

¹ Furthermore, these astonishing results were attained with children who far exceeded the limits of inclusion criteria, which most importantly requires SDI treatment within one hour (and never to exceed four hours.) In several cases, the treated children exceeded 15 hours from time of exposure. Although these results were stunning, such breach of Mr. Savage's protocol accounts for results far below what can be expected in the proposed research study, where subjects will be treated within one hour of exposure to fire-related trauma.

² In case of dramatic and protracted exposure to flames (or nuclear heat, in another context) holophylactic cares consist of bypassing the unconscious, yet self-destructive, immunological and physiological responses of the human body before the internal "scorch-earth-policy" processes have begun to take place. That is why time is of such dramatic importance. In order to override the response of deeper layers of the Central Nervous System (CNS) in time for success, the "holophylactician" must intervene within hours (less than one hour, actually to obtain results close to 100%). The more time that elapses between the initial exposure and the holophylactic treatment, the more the chances of successful neuro-immune bypass decrease to a point when, a few days after the disaster has occurred, it would cease to be operative. This critical concern regarding time frame only exists in severe burn scenarios. In other various catastrophic situations, holophylactic assistance remains an option weeks after the disaster has happened.