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For all my life I felt "their presence" still here

Nazi camps

How can in the world someone forget about their experiments on human

Eugenics

And more

I leave some articles here

To let you understand how an idea can survive changing shape

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Japan's Dr. Mengele: Medical Experiments on POW's at Unit 731

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WORLD WAR II

Jul 26, 2018 Herbert Kikoy, Guest Author



Shirō Ishii (left) and Harbin bioweapon facility of Unit 731 (right). By 松岡明芳 - CC BY-SA 3.0

The main site of Japan's experiments into biological warfare was the prisoner of war camp known as Unit 731 located in Pingfan, Manchuria,



— mark red (@markred17) December 12, 2020
<https://t.co/bFWSShYs6j>

Shiro Ishii, commander of Unit 731, which performed live human vivisections and other biological experimentation.

From 1933, Ishii switched his attention away from the prevention of infections and began to concentrate his research on how dangerous bacterium could be best employed in warfare.

Unit 731, the Center of Japan's Wartime Experiments on Humans

In 1933, Shiro Ishii moved his team of researchers to Manchuria in China and assumed leadership of a center of experimentation into biological warfare which would later come to be known as Unit No. 731, and eventually be responsible for the deaths of around 3,000 inmates.

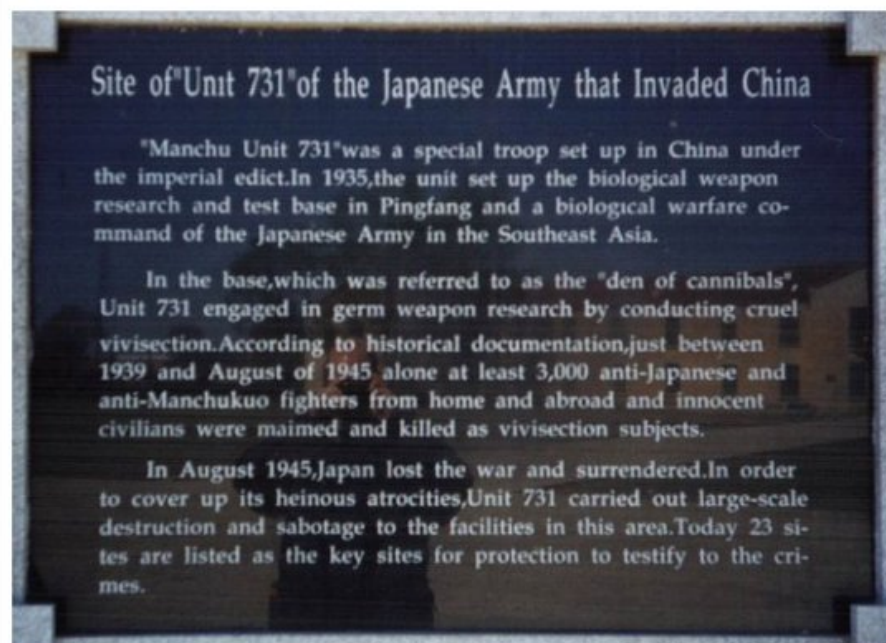
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Privacy

The retreating Japanese army destroyed nearly all traces of Unit 731 and other similar camps, although some documents still fell into Soviet hands and were used to set up their own programs after the war. At Unit 731 alone, the Japanese army killed all of the prisoners and machine-gunned six hundred local workers.

Once Japan had formally surrendered, Shiro Ishii and others deemed responsible for carrying out atrocities in the pursuit of biological warfare were regularly interrogated by the Americans, who refused all Soviet requests to hand them over.



Memory plate for the atrocities of Unit 731.

Shiro Ishii never faced a war crimes tribunal, and



FRN



Dramatic political and social decisions are being made across the United States and around the world on what emergency quarantine measures and other steps must be taken. In many cases the radical and severe measures, such as shutting down the world economy, are being justified by COVID-19 case projections of morbidity into the future. If there is one person who is the face of the current strategy of dealing with the coronavirus in Washington it is the Director of the US National Institute for Allergy and Infectious Diseases (NIAID) of the NIH, Dr. Tony Fauci. What major media conveniently leave out in discussing Fauci's role is his highly controversial and conflicted history since he first joined NIAID in 1984 during the beginnings of the AIDS panic. His role then sheds valuable light on his remarkable and highly controversial actions today.

Tony Fauci a leading member of the



Let's go back to 1984 when Fauci was named head of NIAID during the Reagan era. That year an AIDS researcher, Robert Gallo, working under Fauci, held a press conference to announce that he had "discovered" the AIDS virus. He said it was HIV-human immunodeficiency virus. The shocking announcement which went around the world, was in complete disregard of scientific procedures of prior peer-reviewed published scientific evidence, including the required electron microscope analyses. **It was a case of "science by press conference"** as a critical scientist, Prof. Peter H. Duesberg described it. Duesberg was an award-winning researcher at Berkeley who isolated the first cancer gene through his work on retroviruses in 1970, and mapped the genetic structure of **these viruses**.

For Gallo and Fauci, that was unimportant as millions in research funds flowed into NIAID to research the new virus, HIV. Fauci and Gallo claimed that AIDS was highly contagious, also by sexual transmission especially among

determine SARS-CoV-2-positive.

They **concluded**,

”

“The fact that after 25 years of intense research HIV has been neither isolated nor purified in terms of classical virology indicates to us that the infectious view of AIDS as a contagious viral disease is based on an apparently non-existent microbe!”

Giraldo and de Harven declared, “The alleged existence of HIV was asserted from the study of proteins, reverse transcriptase activity (RT), and RNA fragments that were found in culture supernatants, not from the direct analysis of purified **viral particles**.” The CDC requires a positive antibody

with serious illness symptoms, Fauci decided to collaborate with Gilead (as in the Biblical “balm of Gilead”) on what came to be called PrEP experiments.



© AP Photo/Jeff Chiu, File

Fauci promoted Truvada (AZT) as a prophylactic to the AIDS virus

Fauci in 2007 began to finance clinical trials of the AZT drugs in HIV “negatives,” on the theory the chemotherapy would “protect” them from becoming “positive.” That is, testing toxic HIV drugs on otherwise healthy persons to “insure” they never got AIDS. If it sounds mad, it was. Gilead supplied the drug, Truvada, to NIAID between 2007-2012 for Phase III human tests on HIV negative subjects. Four tests of at least 2,000 and up to 5,000 test subjects each, were done. The project was called “pre-exposure prophylaxis” or

In addition NIAID is working with Gilead to conduct Phase II human trials on Gilead's drug, remdesivir, as a potential treatment for hospitalized adult patients diagnosed with COVID-19.

A Coincidence?

Relevant also is the fact that all top scientific advisers to the US President's Task Force on COVID-19 are tied since decades to the bogus and destructive HIV/AIDS research and propagation of false theories. **Alongside Tony Fauci of NIAID stands Deborah L. Birx, M.D., Obama appointee as US Global AIDS Coordinator who worked under Tony Fauci at NIAID from 1983-1986.**





Program Overview

The purpose of the funding is to improve the quality, availability, and organization of health care and support services for individuals with HIV infections and their families.

Funds will be used to develop or enhance access to a comprehensive continuum of high quality, community-based care for low-income individuals and families with HIV disease.

Payer of Last Resort

Funding is specifically for individuals living with HIV and AIDS who need it most-those without any other means of paying for needed care and treatment. This money pays for services for an infected/affected person who either has no personal means of paying and/or whose insurance does not cover the service.

Proof of Positivity



- Western Blot Results
- HIV Letter of Diagnosis
- Lab Results with the measurable viral load count

Proof of Texas Residency

- Valid Texas ID with a current address listed
- Valid Lease Agreement
- Utility Bill
- Birth Certificate

Proof of Income

- 3 most current pay stubs
- SSI/SSDI Award Letter
- Tax Return Form
- Bank Statement
- Zero Income Verification

Social Security Cards (not required)

Medical Insurance Cards (if any)

- Medicare/Medicaid
- Private Insurance
- Prescription Cards



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- The vaccine made use of a modified virus — called adenovirus 5 (Ad5) — as a vector to transport some of HIV's genetic material into the body.
- Exactly how the vaccine increased the risks of HIV transmission is unknown, but a conference convened by the National Institutes of Health recommended against further use of Ad5 as a vector in HIV vaccines (Dr. Anthony Fauci was lead author of the [paper](#) outlining this position.)
- Ad5 is used as a vector in some Covid-19 vaccines — *Science* [identifies](#) four such candidates that are currently undergoing clinical trials in various countries around the world, including the U.S., with two in large scale phase 3 trials ongoing in Russia and Pakistan.
- The researchers stressed the need to understand the role Ad5 might play in increasing the risks of HIV in vulnerable

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