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REPORT

**ON INVESTIGATIONS ON SPINOR PROTECTIVE DEVICE IN
LABORATORY OF IMMUNOLOGY, KYIV CITY ONCOLOGICAL
HOSPITAL CENTRAL DEPARTMENT OF HEALTH OF KYIV**

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ABSTRACT

The report, made in the Ukrainian language, includes 13 pages and 1 table; keywords: mobile phones, electromagnetic radiation, man-induced impacts, torsion fields, blood test, protective devices.

The immunological tests were conducted at the Laboratory of Immunology, Kyiv City Oncological Hospital in June-July 2008 with the participation of volunteers aged 18-44 years, who have used mobile phones for a long time (4-5 years).

In the process of investigation we revealed the fact of mobile phones' adverse impact on users and validated the method for protection of users by using Spinor devices (other version Safe Tek-1), invertors of torsion fields, which transform the left torsion field to the right torsion field.

The investigation findings showed that Spinor device considerably reduces the impact of torsion component of electromagnetic radiation emitted by mobile phones on immunological parameters of blood in users (CD-56, CD-4, CD-19 etc.) and use of this device may be associated with the detected indication of immune system status stabilization, which considerably affects incidence rate of allergic, contagious, and oncological diseases.

The device may be recommended as a reliable preventive instrument in order to render harmless adverse impact factors of torsion component of electromagnetic radiation on users of mobile phones.



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List of Designations, Symbols

- CD-56** effector cells of cell-mediated immunity responsible for antiviral, anti-tumor and transplantation immunity. Reduction in T-lymphocyte killer count results in development of oncological diseases and complication of course of viral infection.
- CD-8** T-suppressors: cytotoxic cells, which suppress immune response of the organism. Increase in CD-8 count demonstrates insufficient immunity; their decrease shows hyperactivity of immune system.
- CD-4** T-helpers (inducers) of immune response on alien antigen, which control continuity of organism's internal environment (antigen homeostasis) and lead to higher production of antibodies.
- NBT** nitroblue tetrazolium recovery test, makes it possible to evaluate functional spare oxygen-dependant bactericidal action mechanism of phagocytes, characterizes activity of neutrophils.
- CD-20** B-lymphocytes: humoral immunity cells responsible for synthesis of antibodies.
- CIC** circulating immune complexes, which consist of antigen, antibodies and components of the complement related to them. A higher level of CIC in blood is characteristic of acute infections, autoimmune and allergic diseases.
- Ig** antibodies (immunoglobulins) secreted by B-lymphocytes at the final stage of their differentiation by plasma cells. There are 3 main classes of immunoglobulins: IgA; IgM; IgG.



BACKGROUND

Today few people have doubts in respect to harmful impacts of mobile phones on human health and their adverse effect is associated with "active" electromagnetic radiation (EMR) of the said devices, i.e. their operation in reception/transmission mode. Such operation mode takes into account ability of electromagnetic radiation (EMR) emitted by mobile phones to directly penetrate the brain and heat its tissues at the same time (heat effect). However, this approach to the problem is insufficient. In standby mode just as in reception/transmission mode, a mobile phone radiates "non-heat", "information" or torsion fields, which are the component of any EMR. Information or torsion fields have non-electromagnetic nature and, under certain conditions, may be the reason for occurring of a number of diseases.

History shows that humanity, as a rule, underestimated adverse consequences of impact on biological entities, including, without limitation, human body by new discoveries of physical reality. This was the case with X-ray radiation and other penetrating radiation types.

Recently, investigations have been conducted in various countries of the world in the area of torsion fields' impact on biosphere.

V.P. Kaznacheyev [9] based on numerous experiments came to a conclusion that left torsion fields strengthen mitosis of cells whereas in right torsion fields synthesis of proteins, polysaccharides goes as usual without strengthening of cellular mitosis. The said investigations confirm relation between harmful left torsion radiation emitted by mobile communication devices and occurrence of carcinomas in users. Conclusions of Russian scientists were also confirmed by other researchers [1]. It was demonstrated that five-minute exposure to radiation of animals and human cells with frequencies adequate to mobile phones' radiation band, with considerably reduced power, results in the beginning of cell division due to negative effects of left torsion fields. At the same time, extracellular kinase (ERK1/2), a natural agent, promoting cells division and growth, is produced. However, as noted by scientists, the kinase is normally produced also at the beginning of oncogenesis [1]. The said investigations' findings reiterate harm inflicted by mobile phones upon their users' health.

The today's mobile communication users are protected from harmful radiation emitted by mobile phones only insignificantly and only to the extent of overheating of brain tissues. This is related to the fact that all existing standards, requirements, and criteria refer to a certain "average" user and are unable to assure complete safety of all categories of people, who use mobile communication rather intensively at times. No action is taken to protect users in standby mode, to which a user is exposed 10-12 hours a day, whereas a



conversation by telephone may amount on the average to very modest 1-2 hours a day.

Taking into account the existing problem, scientists of many developed countries managed to establish and set up production of personal protection devices, which to a certain extent reduce the EMR level while leaving intact the level of EMR's "non-heat" "information" or torsion component.

For the recent 20 years, investigations in the area of torsion fields' theory and practice have been underway in Ukraine. The current level of knowledge on torsion fields' interaction laws enables developing and using devices to protect living systems from hazardous man-induced radiation, including, among others, the aforesaid.

In order to provide protection from torsion components electromagnetic radiation emitted by mobile phone, Spinor devices were developed in Ukraine (Ukrainian Patent No. 29839, other version: Safe Tek-1 (US Patent No. 6,548,752) [3,4].

The objective of this investigation was to study effect of torsion radiation on the **main** immunological parameters of blood in users of mobile phones with and without the protective device.



METHOD, CONTENTS AND FINDINGS OF THE INVESTIGATION

Objective and method of tests.

The investigation was performed by Laboratory of Immunology, Kyiv City Oncological Hospital, Central Department of Health of Kyiv.

Objective of the investigation:

- to specify availability of torsion radiation's effect on the main immunological parameters of blood in users of mobile phones and to specify the possibility of recovering the modified indicators by using Spinor devices produced by Spinor International (Ukraine).

Method of Immunological Investigation

The key indicators of cell-mediated and humoral immunity volunteers were determined before installation of Spinor devices produced by Spinor International (Ukraine) and in 1.5 months after installation of the said devices on the volunteer users' mobile phones.

The immunological blood test covered volunteers aged 18-45 years, who have used mobile phones for 4-5 years.

The first group consisted of 45 volunteer users, who, after blood sampling for immunological tests, had Spinor devices produced by Spinor International installed on their mobile phones ("the study group").

The second group consisted of 30 volunteer users, whose mobile phones had no such devices installed ("the control group").

As a result of the tests, 65% of the tested volunteer users showed considerable changes in some immunological parameters, that is to say: leukocytopenia, thrombocytopenia, reduction in CD-56 count, lymphocyte count, macrophage count, increase in circulating immune complexes and disglobulinemia.

In 1.5 months of using the phones with Spinor devices installed, volunteers in the study group showed changes in certain immunological parameters, that is to say: CD-56 count, CD-19 count, CD-4 count, and functional activity of macrophages grew to normal values. At the same time, subjective condition in the study group volunteers were determined as follows: fatigability within a day reduced, drowsiness or aggressivity stopped, workability grew. In the control group volunteers, immunological parameters showed practically no change. Therefore, the tests demonstrate disturbance of immune status in mobile phone users and material restoration of the tested parameters when using Spinor devices.



We should note that no other devices, such as pharmaceutical products, immune response-modulating agents and immune correction agents of any origin were used at the time of the tests, and, therefore, we would assert that it is the protection provided by the device that took place in the tests.



CONCLUSIONS

1. The immunological tests on volunteers aged 18 to 44 years, who have used mobile phones for 4-6 years, demonstrated disturbance of cell-mediated and humoral immunity.
2. 65% volunteers, who used Spinor devices produced by Spinor International (Ukraine) in 1.5 months, as opposed to the control group, shows changes in some immunological parameters, that is to say: CD-56 count, CD-19 count, CD-4 count, and functional activity of macrophages grew to normal values. Growth in CD-19 lymphocyte count demonstrates that the disturbed immune status of the users started showing a trend towards recovery of the parameters tested.
3. Practically all volunteers, who used mobile phones with Spinor devices installed, reported subjective improvement in their condition, that is to say: fatigability, drowsiness, and irritability stopped while their workability grew.
4. The investigation findings correlate with the data, contained in the report of Ukraina University and require continuation to study the mechanism of EMR torsion component's effect on the blood system in its entirety and mechanism of genetic damage.
5. The investigation findings provide a valuable contribution in respect of augmenting the system of environmental knowledge on the mechanism of non-ionizing (energy and information) impact on the condition of living systems and are intended for users of mobile phones and other electronic equipment to familiarize with.



RECOMMENDATIONS

1. Taking into account the aforesaid, Spinor devices produced by Spinor International may be recommended as protection devices to remove factors of adverse effect on users by torsion components of electromagnetic radiation emitted by mobile phones.
2. In this investigation, for the first time, using mobile phones as a source of electromagnetic radiation and its torsion component, we considered the problem of strengthening adverse environmental situation on the background of increasing electromagnetic contamination of the environment. At the same time, until recently, only insignificant attention has been given to investigation of such electromagnetic radiation components as non-electromagnetic physical fields (torsion fields), which also significantly affect health of living organisms.
3. The obtained findings are essential and demonstrate the necessity to continue investigations in the field of energy and information effect on the living systems in search of the methods for protection from such effect.



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ANNEX

Table 1.

Change in hematological and immunological parameters under effect of radiation

Item No.	Test description	Control Group		Study Group	
		Before the investigation	1 month after	Before the investigation	1 month after
1	Leukocyte count, G/l	5.9	5.8	5.9	5.5
2	Erythrocyte count, T/l	4.4	4.4	4.4	4.2
3	Hemoglobin count, G/l	131	128	132	129
4	Platelet count, G/l	248	213	240	224
5	Large granular lymphocyte count, %	0.6	0.3	0.7	0.6
		$\times 10^9$ 0.04	0.02	0.03	0.03
6	Banded neutrophil count, %	4.5	4.3	5.3	4.9
		$\times 10^9$ 0.27	0.27	0.32	0.29
7	Segmented neutrophil count, %	43.4	47.9	49.0	49.0
		$\times 10^9$			
8	Eosinophil count, %	2.9	2.7	1.9	1.6
		$\times 10^9$ 0.20	0.16	0.12	0.10
9	Basophile count, %	0.2	0.3	0.1	0.1
		$\times 10^9$ 0.007	0.01	0.003	0.006
10	Monocyte count, %	8.1	7.6	6.5	7.3
		$\times 10^9$ 0.48	0.46	0.39	0.40
11	Lymphocyte count, %	40.0	37.0	35.2	36.2
		$\times 10^9$ 2.32	2.15	2.12	1.95
12	CD3+ Count (T- lymphocytes, total), %	65.7	66.3	67.7	68.7
		$\times 10^9$ 1.54	1.43	1.42	1.31
13	CD4+ Count (T-inducers-helpers), %	37.3	38.9	39.6	44.8
		$\times 10^9/l$ 0.94	0.83	0.85	0.81
14	CD8+ Count (T-cytotoxic suppressors), %	31.3	30.7	31.3	29.8
		$\times 10^9/l$ 0.73	0.65	0.64	0.57
15	Immunoregulatory index CD4/ CD8	1.2	1.3	1.3	1.8
16	CD3+ CD56+Count (cytotoxic cells), %	2.9	2.8	2.3	2.4
		$\times 10^9/l$ 0.06	0.06	0.05	0.05
17	CD56+ Count (NK-cells), %	10.3	8.6	91	12.9
		$\times 10^9/l$ 0.26	0.17	0.18	0.19
18	CD19+ Count (B- lymphocytes), %	7.3	7.0	7.2	7.3
		$\times 10^9/l$ 0.18	0.16	0.19	0.19



Item No.	Test description	Control Group		Study Group	
		Before the investigation	1 month after	Before the investigation	1 month after
19	Circulating immune complexes (CIC)	63.3	58.9	56.4	57.5
20	Immunoglobulins, by Classes	1.52	1.57	1.28	1.71
	A, g/l	1.29	0.82	1.19	1.16
	M, g/l	12.3	14.02	11.79	13.43
	G, g/l				
21	Phagocytic activity, %	86.6	78.4	71.1	68.2
22	Phagocytic index	4.8	6.3	4.3	6.3
23	NBT (bactericidal activity neutr.), spontaneous, %	8.6	7.0	11.8	7.1
	induced, %	35.0	34.2	34.1	33.4
	spare, %	26.4	27.2	23.8	27.6

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