

Exposure of charged particle beam on the brain of the humans leads to a painless death

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Abstract

By the progress of technology, following to advancements on directed energy systems and magnetic resonance, over an introductory research on potentials of application of charged particle beam on the brain of the humans which can lead to a painless consecutive death, we shall investigate for the possibility of prevention of the extreme pain that a volunteer patient may highly suffer of, before the death as a state for relieving the pain itself. Exposure of charged particle beam on the brain of the humans, potentially, leads to a painless death. The basal ganglia, S1 and BA3, S2, BA46, BA10, BA9, BA5, the pretectal area, the hippocampus (and the other parts of the limbic system), and the thalamus are the most important locations in the human's brain, and targeting them destroys the home of our personality and the control/attention center of the brain, over NDE (near-death experience) it leads to finishing the life process of a patient who is suffering intolerable pain, but the patient won't sense the pain ever. In conclusion, distinct parts of the cerebrum and the thalamus are active locations of self-personality and attention. In elder patients of extreme pain who suffer of untreatable illnesses, it may get considered voluntary as a final decision by the victim and the victim's relatives. Thus, this experiment has several potentials for application; more research must be conducted with regard to in-depth understanding of these neural networks.

Background: Some kind of untreatable illnesses may cause severe pain until the death of the patient when we consider the death as a relieving point of pain.

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Details (Introduction): Since modern fMRI shows us the basal ganglia, pre-tectal area[1][2], the thalamus, the human primary somatosensory cortex (S1, BA3), and secondary somatosensory cortex (S2), anterior part of the frontal lobe, BA46, BA10, BA9, and the superior part of the parietal lobe, BA5, and the hippocampus (and the other parts of the limbic system) are to be considered as the vital parts of understanding, attention, emotion, our self-personality, and integrating and processing sensory information,[3][4][5] targeting them destroys the home of our personality and the control/attention center of the brain, over NDE (near-death experience) it leads to finishing the life process. The thalamus (of the interbrain) plays an important role towards our environmental understandings (i.e. relaying sensory and motor signals to the cerebral cortex, and the regulation of consciousness, sleep, and alertness), but the thalamus and the fornix and the cerebellum are not well-understood for the public sectors of our nation yet, scientists need to do more fundamental researches to get realized if there are some parts highly responsible to our understandings of our environment, attentions, and contemplations, but meanwhile thalamic strokes (leads damage to the thalamus) causing severe and chronic pain that is not proportional to an environmental stimulus, called dysaesthesia or allodynia, it's not impossible that targeting the thalamic structure, and also the fornix itself and/or the cerebrum's fornix inferior neural fiber networks, probably makes pain (or a bad sense) on the patient. NDE subjects have increased activity in the left temporal lobe. Stimulation of the temporal lobe is known to induce hallucinations, out-of-body experiences and memory flashbacks.[6][7] Following to the technological developments in the last century that the future generation would recall as scientific achievements of 1964 to 1975, towards controlling the psyche,[8] advancements about directed energy, and also due to ELF communication advancements, now some researches for a better understanding of reactions of specific systems of the brain during NDE can get started. Both laser beam and electromagnetic radiations are useful during the process. Experts will make very small slices on the proper locations, cutting a big area of the brain is not endorsed. Long-term usage of specific forms of radio waves can kill some specific tissues slowly. The patient would be kept under monitoring and supervision. After the process, if there was any heart pulse observable, an Induced Cardiac Arrest is necessary. The circulation of the blood inside the brain itself, transfers a great amount of oxygen and glucose into the brain, and keeps feeding its cells. It causes a higher amount of activities inside the brain. In fact increment in brain activities causes an increased attention of the human to the environment. When the blood circulation stops, slowly the vegetarian

state of the life of the nervous system and the spinal cord will get interrupted. During the process of the necrosis yet the spinal cord transmits several signals to the brainstem, and the thalamocortical (TC) fibers (thalamocortical radiations, the fibers of the inferior colliculus), nevertheless targeting the brainstem, and even the inferior colliculus, themselves, may cause extreme pain on the patient. So, more research must come in application for in-depth understanding of these neural networks, but helping volunteer peoples to never suffer of pain, during the whole life cycle, would be possible.

Methods: Currently most methods may only come in application in governmental labs. After clinical experiment on mammalians who are suffering extreme pain (because an untreatable illness), as a wireless deep-brain narrator (computer), continuously, is deciphering us the internal feelings of the animal, then as the second stage the experiment can get done on human volunteers. The process would begin on a generally anaesthetized volunteer patient, but meanwhile over a high-tech deciphering process we continuously would keep observing the internal imaginations/dreams of the patient. Targeting (destruction/divesting/cutting) the desirable part (of the brain) must get done over a small fraction of a second that a laser beam, etc., would get used over the process. About the entire parts of the body, except of the brain itself, for natural properties of neurotransmitters in the human's nervous system, there would be a very small latency observable from the instantaneous moment of trauma until the pain gets deliver to the diencephalon to become sensible/understandable for a human. For example when someone accidentally drops down from a height and the one breaks his own bones, following to a shock, instantaneously, just when the accident/trauma is happened this latency in a fraction of time is observable. Inside the skull, the meninges have pain receptors, and it's responding to noxious stimuli. However, the nervous structure of the brain is different, there are no pain receptors in cerebral cortex, and also the white matter, inside our brain; but meanwhile some reactions may be observable between two interactive parts of the brain for interpretation of bad feelings/pain signals. The destruction process of the interactive areas, subsequently, would get done over a small fraction of time.

Results: Exposure of charged particle beam on the brain of the humans, potentially, leads to a painless death. Since it's a new foundation, more researches for the extremely short term effects of microwaves/particle beams on the brain must get done. The basal ganglia, primary somatosensory cortex (S1, BA3), and secondary somatosensory cortex (S2), the pretectal area, anterior part of the frontal lobe, BA46, BA10, BA9, and the superior part of the parietal lobe, BA5, the hippocampus (and the other parts of the limbic system), and the thalamus are the most important locations in the human's brain, and targeting them destroys the home of our personality and the control/attention center of the brain, over NDE (near-death experience) it leads to finishing the life process of a patient who is suffering intolerable pain.

Conclusions: Distinct parts of the cerebrum and the thalamus are active locations of self-personality and attention. In elder patients of extreme pain who suffer of untreatable illnesses, it may get considered voluntary as a final decision by the victim and the victim's relatives. Thus, this experiment has several potentials for application; more research must be conducted with regard to in-depth understanding of these neural networks.

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