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Majia Joles Jedrak August 17, 1993

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KRISTINE M. GEBBIE, R.N., M.N., F.A.A.N.
NATIONAL AIDS POLICY COORDINATOR
DEPARTMENT OF HEALTH & HUMAN SERVICES
Room 729H Humphrey Building
200 Independence Ave., S.W.
Washington, D.C. 20201

DAY Tuesday DATE August 17, 1993

TIME 4:00 p.m. LOCATION 729-H, HHH Bldg.

SUBJECT Meeting with Majia Joles Jedrak

PARTICIPANTS:
Ms. Jadrak and yourself.

Maja Jedrak Jolet
67-05 Exeter st
Forest Hills, NY
11375

This work is dedicated to those who need God's Providence

War. World War II. Being yet a child I saw that war. I never had a childhood. I saw World War II, I saw horrors of war. I saw the people: children, young, adults, innocent people, they were going and going and going to death.

Where was God? That time God was helpless - it was terrible war. And now; now I see innocent people: they are going and going and going to death. Where is God?! Desperately, spontaneously I was seeking God, and I found God - in genetics! Yes, I found God in genetics!

We pronounce every day: "nobody's immune", strong words, because nobody's immune it means; NOBODY'S IMMUNE!... Yet, 50-40-30-20 years ago such phrase "nobody's immune" could be paradoxical, every one could ask: what does it mean "nobody's immune?". Now, even children know what this means NOBODY'S IMMUNE!

5/28/93

nsa Passport

State of New York
cont of Queens

STEVEN NEIGEBORN
Notary Public, State of New York
No. 30-8111380
Qualified in Queens County
Commission Expires Nov. 30, 1994

And every one, world-wide, has been asking - Why ?....
Now every day we pronounce: "AIDS is a disease, AIDS is not a sin".
AIDS is not a sin absolutely not, but — AIDS is not a disease either, definitely not!

AIDS is natural, normal, a reasonable sequence of genetic and immunologic consequence. Genetics is consequent. If genetics had not been consequent, we couldn't function well, not only this; we could have never been born.

- All living things are made up of one or more cells.
- Cells are the basic unit of structure and function of all living things.
- New cells come only from other cells.

Think, such a tiny cell; human sperm cell gamete X or Y, invisible with naked eye, one of the smallest cells in human body - in 280 days, or 9 months, a single cell, the fertilized egg, changes into a complex living thing made up of billions of cells - "Human" being, homo sapiens. This is impossible to comprehend.

A. Einstein stated: "The most incomprehensible in universe is universe - if it is comprehensible?" Studying AIDS, I committed plagiarism "The most incomprehensible in genetics is genetics if it is comprehensible?

Although, I comprehended that the roots of AIDS are spreading deeply in genetics as well as in immunology. I processed - what was first; a hen, or an egg ?.. And consequently I processed - what was first: "AIDS", or "H.I.V"?

I meditated days and nights - studying genetics and immunology. - If - somehow, first was AIDS: Acquired Immune Deficiency Syndrome, then; "H.I.V.?" could be blood born, innermost, so not a virus because

it does not come from outside. But the most dangerous weapon, mass jeopardy, could come from inside – genetic weapon. And suddenly emerged as a global killer.

If, however, virus came from outside and caused human immunodeficiency, then – how? How those tiny RNA structures, without DNA – could cause that outstanding genetic activity? – "Strains" "Microplasms" "Toxoplasmosis", genetic fire. Human genetic power of mighty DNA which multiplies – replicates.

I knew, let's say "instinctively" that DNA must be there, somewhere, because multiplication means replication which without DNA is unfeasible.

"It appears there are not just two distinct strains of HIV, but at least five, perhaps as many as ten. Further, "conserved" genetic regions, like the V3 loop researchers had hoped would be similar or even same from viral strain to viral strain are shown to be highly divergent not just in a given strain, but in each virus type itself. One person infected by another does not present homologous genetic characteristics even in what were thought to be conserved genetic regions. Most frightening of all genetic divergence occurs not only among geographic locales and between individuals, but in each infected person, the virus may mutate rapidly, from the moment of sero – conversion." *

* Brie Salzman
* PWA Newsline December 1991 Issue # 72 p. 39
"Notes on The International Conference on Advances in AIDS Vaccine Development"

The most important factors that play role in multiplication are circumstances – environment.

There is a dictum, known world-wide "A single sparklet - sometimes - rises a tremendous fire". I think, that this example is quite eloquent, because every single sparklet could rise a big fire, depending on base and environment. So the base and appropriate environment decide of prosperity of a single sparklet.

I processed that a single sparklet and appropriate environment are two separate things, until they connect. It could be a multitude of fires, but it has never happened because there wasn't an appropriate base nor appropriate environment. Speculating like this, I compared H.I.V. to a single sparklet. This is impossible that an HIV virus, causes "itself" appropriate-convinient base, and environment for prosperity, to rise a flame or tremendous fire...

But - appropriate base and environment could cause prosperity, good circumstances for the H.I.V. and/or for - DNA - to replicate uncontrollably...

"Circumstances alter cases". Thus, I realized that whatever H.I.V. is whether it is viral or not; immunosuppression occurred first, which in turn caused disorder syndrome.

Then, I needed to find out what caused immunosuppression, in other words: how and when immunodeficiency was acquired and what causes that outstanding genetic activity, causing DNA to replicate uncontrollably.

There must be a starter cell to multiply and appropriate

environment to multiply "uncontrollably". There must be a spark "DNA"! Without a spark a flame couldn't rise – without DNA couldn't rise genetic flame – genetic activity...

Immune Deficiency Acquired → DS ← Acquired Genetic Activity DNA deoxyribonucleic acid

Causation AID · DS Reaction

It means that genetic spark DNA, "hit" appropriate environment in human blood. A spark – not H.I.V. "RNA", but just "DNA" spark, hit appropriate environment in human blood – spreading global, world-wide —— genetic fire. The fire unknown until our time.

Oh, My God! Help to find a spark that causes spreding and spreding fire. As everything has its beginning, AIDS had its own beginning as well.

Connecting facts led me to the important track of the rotating spectrum of AIDS: the fire "AIDS" spout out suddenly world-wide; almost at the same time (Africa 1-2 years earlier, the reason will be explained progressively). At the very beginning: 1981-1982, the victims one hundred per cent (100%) males. At the very beginning, an unknown diseas "AIDS" occurred 100% full-blown. At the very beginning males victims were almost at the same age: 29-30-31 years old. At 1981-1982, there was not one single victim at age 20 years old or, 40 years old, this means, that 100% of victims were born around-1950-1951-1952. To make a spectrum of AIDS better understandable, a calendar was helpful. Let's assume that all AIDS victims were born after or close to 1950. In 1981 they were 30 years old. – ARC occurred after as a secondary. One more undeniable fact: 100% of victims practiced anal sex.

That is how I became convinced that something unexpected, unusual occurred during that 30 years in between 1950-1980.

So far I understood that population born after 1950 acquired immune deficiency, which consequently caused - disorder syndrome.

This was beyond doubt that first was - widely - acquired immuno-deficiency, immunosuppression, and then as a result, as an effect of immunosuppression; among men which practiced anal sex occurred AIDS" — Anal Insemination Disorder Syndrome ".

Then it became clear that 1950, the epochal date in pharmacology as well as in medicine "antibiotic epoch" was the date of the - very - beginning of AIDS" - Anal Insemination Disorder Syndrome. Studying and meditating days and nights, over a number of years, I concluded that from 1950, human blood gradually lost some components, therefore immunosuppression occurred. This is how appropriate environment for genetic spark - DNA — in the bloodstream was generated.

Gamete X and gamete Y, penetrate by many ways, directly into bloodstream - sperm gets into blood through anal intercourse. This sperm is released into the bloodstream in an appropriate environment and not destroyed or killed — like it used to be before antibiotic epoch.

DNA - <u>deoxy</u>ribonucleic acid remains out of harm's way, then sperm accumulates in on blood. Therefore - live - sperm has been found in the blood of AIDS victims. To the best of my belief, sperm has been found the most frequently or only in the blood of passive partners of AIDS". Additionally, AIDS victims who were diagnosed with full - blown AIDS in 1981 - 1982 - 1983, were one hundred per cent recipients of sperm — passive partners. In those individuals accumulation

and after incubation of sperm took place. They were the first generation of the antibiotic epoch, and the first victims of AIDS II. Summing up, first is accumulation of sperm in the blood, followed by incubation of sperm, at that time generative complex is formed — causing genetic activity.

Being at that stage of my study, I realized that "strains", "microplasm", "Toxoplasmosis" is just a generative complex.

ARC is secondary and constitutes another occurrance. Its progress is faster than that of AIDS II, and the symptoms are different, there the blood has been contaminated with the -ready- generative complex, yet, the blood is already immunosuppressed as a consequence of the antibiotics use - nobody's immune.

As a matter of fact, anal insemination (AIDS I) has been a natural transplantation of sperm cells directly into bloodstream - of already immunosuppressed blood so — the graft takes.

But, because those transplanted cells are particular cells —sperm cells— so, the blood becomes fertilized. The more so, there are gametes X and gametes Y — two sets whose union restores the diploid state having a pair of each chromosome characteristic of a species (2 n or, in man, 46).

Since such a diploidy is tolerated by the blood, over a certain period of time; genetics itself creates - generative complex which multiplies uncontrollably — this generative complex containing genetic information can be even transmitted trough a contaminated needle.

The bottom line is that homosexuality and consequently AIDS II, alerted medical world to the problem of ANTIBIOSIS - homosexuality paid high toll.

Already Dr. L. Pasteur noted that anaerobic bacteria are killing, injuring or inhibiting the growth of aerobic bacteria, but could he foresee, that genies of all times, that such an intervention into human metabolism, one day, will cause a genetic cataclysm?

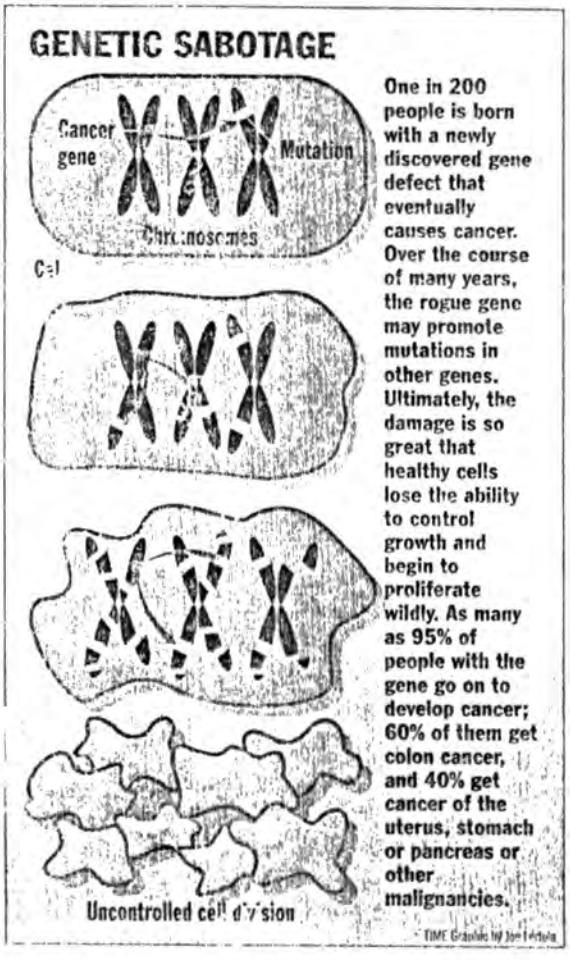
Antibiosis by definition is: " an association between two populations of organisms that is detrimental to one of them, antagonistic to some other form of life, being biostatic or biocidal, destructive of life." Is that it?... No, this is only a part of the truth. Antibiosis is a biological weapon. It promotes multiplication only anaerobic microorganisms killing by a "chain reaction" all aerobic microorganisms, those harmful and those necessary for metabolism, which play a tremendous role in circulation of elements in nature such as: carbon, sulphur, nitrogen. Therefore children now have deposits of lead and multeity of other elements - the younger population the worse situation - worldwide. Antibiosis devastates ferments - enzymes, asids, rising the amount of acidophilic cells, and creates anaciclogenesis, also, lessens an amount of vitamin B group produced by physiological, bacterial, intestinal flora, multiplying these kinds of bacteria whose growth and reproduction does not require those vitamins.

Antibiosis cut small wings of aerobic bacteria but fastened gigantic wings to anaerobic bacteria, to DNA viruses, to neoplasms, cancers, sarcomas. Antibiosis is an ensiform sword! On the one hand it deprives metabolism of acids as well changes the picture of the blood - rises p H, on the other hand which is essential: antibiosis deprives human blood, human organism of oxygen.

Antibiosis is oleoxidative, antibiotics are oleoxidant and -DNA- is oleoxyribonucleotide. Making a point: anacid and anaerobic environment creates appropriate, ideal circumstances for DNA to release and to replicate uncontrollably.

This is the truth about AIDS—from genetic roots to its fruits.

That is what causes "GENETIC SABOTAGE" Uncontrolled cell division.



TIME, MAY 17, 1993

The process of interphase takes place in a nucleus where anacid and anaerobic environment exist, DNA decondensates and despiralizes entirely to replicate. Since antibiosis creates a similar environment beyond interphase the DNA of the nucleus loses a frame—"a picture gets away from the frame". Consequently cell division becomes uncontrolled and DNA replicates uncontrollably causing a neoplasm, cancer, sarcoma.

This is my opinion and I conclude that this is a reasonable explanation of existing situation also presented by the scientific world as illustrated above.

That is why patients with AIDS frequently demonstrate pneumocystis carinii pneumonia; the lungs deprived of oxygen. In recent years TB became a common occurrance, an ailment

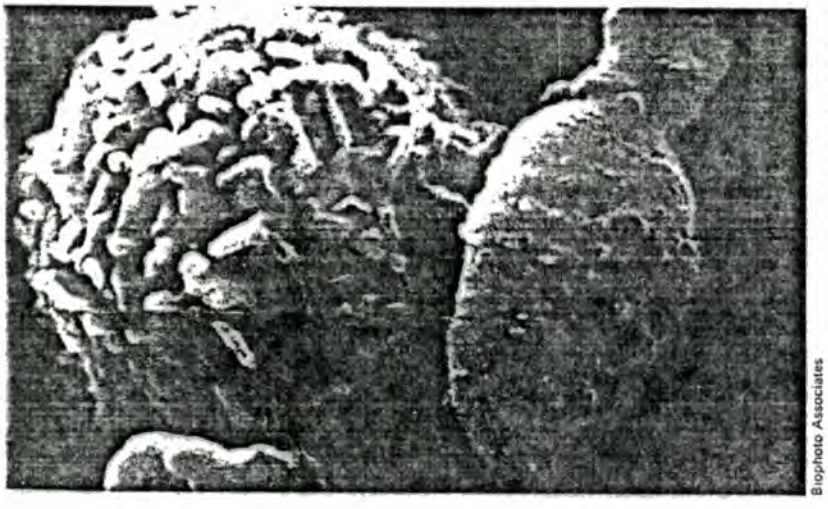
frightening human world not less than AIDS itself. The ailment without apparent external causation, despite, of apparent internal causation: the lungs permanently deprived of oxygen.

Koch's bacillus was an aerobic microorganism so antibiosis as a deoxidative process, then antibiotics as deoxidants were helpful indeed in radical treatment of tuberculosis at that time and Koch's TB was over. "Too much of one thing is not good." How long we schall deoxidate our lungs? Now antibiosis do not cure TB, because antibiosis caused this "modern kind of TB". "TB is back in the big way" quoted from a channel 4, TV show dated August 12-1992.

TB patients instinctively do not want to take antibiotic treatments. "The cure is worse than the evil."

The heart presents the same complaint. Heart does not tolerate any more such a composition of blood that antibiosis creates.

The reaction of immune and autoimmune mechanism in response to AIDS and AIDS" is to rescue the river of life - blood.



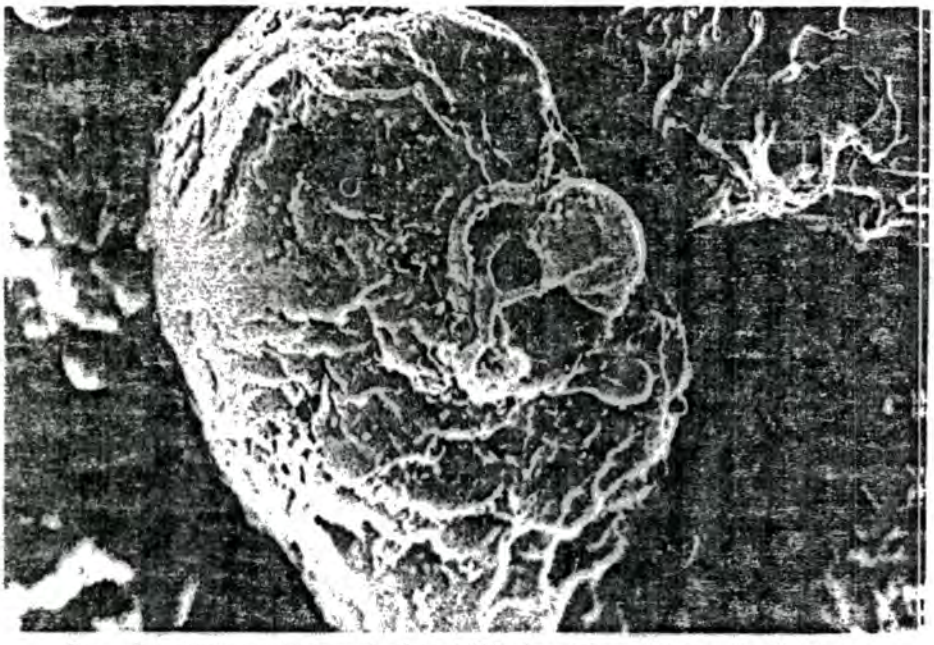
Biophoto Associates

Left: A sperm next to a lymphocyte, a white blood cell which engulfs bacteria. Sperms are so small—between 55 and 65 thousandths of a millimetre long, the head being about 5 thousandths of a millimetre—that they can only be seen with the aid of microscopes.

Right: Diagram of a sperm.

Helper T cells play their role in immunologic defense. So CD4 cell catches-engulfs that generative material.

This is the only weapon that CD4 cell could use against such a multiplet as a generative complex. The generative complex being engulfed by helper T cell - matches and successively hatches budding and finally dispatches CD4 cell. This is the very truth about the tragic story of CD4 cells.



Scanning electron micrograph of an AIDS virus-infected helper T cell. Virus can be seen budding from the cell membrane of the T cell.

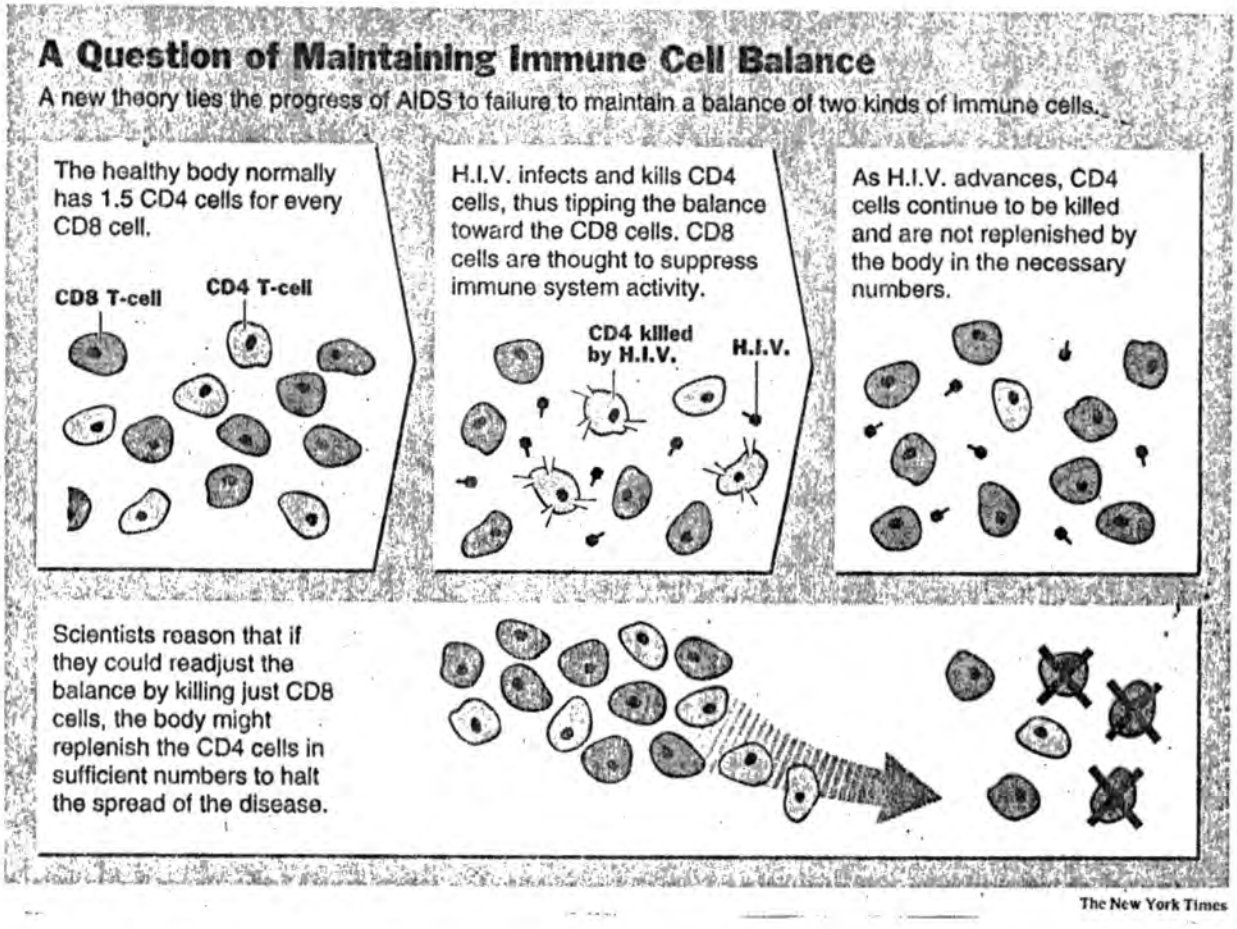
There is no way to avoid a catastrophic death of CD4 cells - which on the AIDS" spectrum are born destined to die tragicaly.

Generative complex replicates DNA uncontrollably and helper T cells swallow that generative material continousely: this is a never ending process - this answers a question: "Why does an H.I.V. infected individual fail to replace the CD4 cells he is losing to H.I.V.?"

Progressiraly I recognized what a significant role CD8 cells play in the autoimmune mechanism and especially in the spectrum of AIDS" when people with AIDS lose continously CD4 cells and increase the number of CD8 cells. CD8 cells are other rescuers of our river of life. They do not engulf generative material like CD4 cells do because this is not their role in the autoimmune mechanism.

CD8 cells do not suppress immune system activity like they are thought to – CD8 cells suppress genetic (DNA) activity; which is their role in an autoimmune mechanism.

"When people are infected with the human immunodeficiency virus, they slowly and relentlessly lose one class of white blood cells, the CD4 T cells, while the second class of cells, called CD8 cells, remains unaffected. The two groups appear to play different roles, with the CD8 cells presumably suppressing immune responses while CD4 cells augment them."*



The picture enclosed is a treasure illustrating immense meaning of two kinds of cells "CD4 cells" "CD8 cells".

* The New York Times, March 9, 1993

CD8 cells do not suppress the immune system activity but to the contrary they activate immune system by autoimmune proces of reactivity to its own tissues and cells devastating them.

Since tissue is a group of cells with DNA nuclei, and CD8 cells render their own DNA The immune system becomes activated to digest proteins without live DNA nuclei. It may seem that CD8 cells suppress the immune system activity but in fact CD8 cells suppress their own DNA activity, stimulating immune activity. Concluding, CD8 cells play a tremendous role in autoimune mechanism neutralizing DNA activity. Here is the reason why in AIDS and AIDS^{n} affected patients, CD8 cells remain unaffected, their count may even rise. In all probability it is the CD8 cell that maintain a certain CD4 cell level.

It is my belief that CD8 cells are responsible for DNA neutralization in the blood stream_ certain acids including.

Other cells which are involved directly in rescue of the blood of the AIDS and AIDS^{n} victims are: B-cells, monocytes, and macrophages. There is nothing to add besides that malignant material which both cells— monocytes and macrophages possibly carry into the brain is not viral material but just genetic information.

About B-cells— as far as I learned, there is no abnormality of B-cells function in the immune system. B-cells play their regular, proper role. They do not engulf generative material and they do not carry genetic information into the brain. Thus B-cells survive without any damage and continue to stimulate the immune system, They normally multiply and produce antibodies.

As a result of my study over six years, seven days a week, twelve–fourteen hours a day, I understood that definitely AIDS and AIDS^{II} were first and afterwards came H.I.V.

As a matter of fact, H.I.V. is a remnant of extraordinary supervention of genetic and immunological process of immunosuppressed blood. Indeed, H.I.V. is the smallest, tri-dimensional, controversial structure that could ever be.

Since AIDS occurs first followed by H.I.V., it may be a reason for AIDS occurrance circumstantially without HIV presence.

Why AIDS occurred in Africa earlier (1-1,5 year) than in other parts of the world? This is an important issue–it proves how strong, how negative, how harmful antibiosis is.

The demand for antibiotics in Africa has been higher than in other parts of the world, due to the climate in which bacteria multiply more readily. Also, in Africa people begin sexual activity earlier than in other parts of the world. So, the reaction of the immunosuppressed blood to the sperm, there occurred earlier. The biological war between aerobic and anaerobic organisms broke up there earlier. Accordingly, AIDS and AIDS^{II} occurred in Africa rampant and earlier.

It was very hard to recognize the cause of a new, unknown epidemic since in 1981 the final stages of AIDS and AIDS^{II} took the human world–by surprise.

Men born after 1950, who practiced homosexuality were not yet aware of any risk or jeopardy, so passive partners did not use any selfprotection (condom), they were not concerned with

the quantity of partners. Some of AIDS victims confessed to have had a very high number of partners. Therefore in 1981-1982, AIDS burst out suddenly and globally.

The first victim of AIDS and AIDS^{R} were recipients of huge amounts of sperm. In 1981-1982, all patients demonstrated: full-blown, classical cases of AIDS, mostly with Kaposi's sarcoma (KS) and/or pneumocystis carinii pneumonia, or both.

This is the answer to the question: "Why did HIV suddenly emerge as a global killer?"

In fact, all of AIDS and AIDS^{R} victims from 1981-1982-1983 passed away soon, but their active partners (if only "active" partners), or members of family: wives and/or children for instance: Africa, Haiti, became contractors of (ARC)-AIDS Related Complex. They survived a longer or much longer time, some of them live even till today. It depends on: how much of generative material one contracted, and what way the generative material-genetic information was transmitted. Whether generative complex had been received "first" or "second"-hand. This explained to me why HIV-1, HIV-2, (probably in Africa HIV-3) exist.

"It's well known, for example, that HIV-2 is far less virulent than HIV-1." "going on what we've seen so far, we'd have to say that HIV-1 causes AIDS in 90 percent of those infected, while HIV-2 causes AIDS in 10 percent or less." *

* Newsweek March 22, 1993, pp. 49-50 "The Future of AIDS," By Geoffrey Cowley, et al.

Various forms of AIDS-ARC, and such an aspect of the new epidemic confused the medical world. At that time Dr. J. Salk called AIDS: "The metaphoric disease of our time" – facts are stubborn things – in fact it is: the metabolic disease of our time.

Young men practicing homosexuality do not know the background of their catastrophe. They do not even imagine that they themselves produce "H.I.V." (AIDS") – generative complex, genetic strains. They think, if "both of them" – a couple, practice homosexuality for a long time exclusively with each other, and if both of them test negative for H.I.V., then they assume to be safe from H.I.V. – AIDS and they do not use condoms. They are free of H.I.V. but – nobody's immune, when sperm enters into blood stream through anal intercourse the reproduction of AIDS-AIDS" starts. On top of my table is a collection of GM HC issues: "PWA Newsline" "The Body Positive" "PWA LETTERS" and "From VICTIMS to VICTIMS". In there issues, sufferers of AIDS describe their tragedies.

All of them repeat the very same sad song; they were happy together, but one day, that tragic day, one of the partners passed away from AIDS; according to my data which may be further verified, it is always the passive partner to die first.

In a certain letter, a mother of a young man who died of AIDS complications; blames her son's partner for killing

her beloved son Andrew. In response the partner apologizes claiming that: "I loved Andrew, I did not kill Andrew - HIV virus killed him."
— Dear young man, you are innocent like an infant, you did not not kill Andrew, nor HIV virus did — genetic strains killed Andrew.

Gay men in the military are at high risk, since they are carefully tested for H.I.V., having negative results they are convinced to be entirely safe from "HIV virus" while practicing homosexuality. Those young innocent men should be alerted as quickly as possible. They have to know the truth about where HIV — AIDS come from.

Besides all people have to learn how important it is to use condoms by all means in order to stop the reproduction of AIDS and AIDS". The medical cure is coming indeed; we first have to give back oxygen and certain acids to our river of life - blood - that way lessen DNA activity making impossible replication of DNA.

The medical world has to generate the blood composition like it used to be before antibiotic epoch.

Then, we will tame genetic flame and we will heal our wounds. So help us God!

Maja Jokes Jeolich

Here, I would like to mention the subject I previously wrote about, which still needs additional comment.

While studying AIDS, I was curious how it came about that in 1979-1980-1981-1982-1983-1984-1985, there was not one AIDS patient forty or older. As I previously described the reason why gay men born in 1950 or after, presented full-blown classical AIDS cases between 1979 and 1985 — they were born in an antibiotic epoch. Then I needed to find the reason why men practicing homosexuality who were born in 1940 or before did not present any AIDS symptoms. The answer was clear — those gay men who were born in 1940 or before: were born before the antibiotic epoch, all of them had an immune-reservoir. But I did not have proof for my hypothesis that antibiosis causes AIDS and AIDS".

I needed to wait a number of years, and finally the proof came. As far as I know, in 1993, the majority of gay men suffering from AIDS are 44 or younger. It means that all of them were born in 1950 or after. Such a fact convinced me that my hypothesis had a strong foundation.

There was only one conclusion: people born before the antibiotic epoch apparently have a stronger immune-barrier. Their metabolism as well as immune system was not damaged by the biological weapon of antibiosis. Their mothers did not get antibiotics during pregnancy — babies get drugs in utero from their mothers — people born in 1940 or before did not get antibiotics from the first days of their lives till they were ten or older. This is a very important issue,

because studying AIDS and AIDS^n and discovering harmful effects of antibiosis, I have noted that antibiosis creates by chain reaction the acquired immune deficiency syndrome, which <u>becomes hereditary</u>.

This biological and harmful nuclear power of antibiosis could never be recognized if it was not for AIDS and AIDS^n. One day, "AIDS epidemic" will be declared—not a plague but—God's Providence warning against a much-worse; genetic cataclysm approaching slowly but surely.

We observe facts which are undeniable—something is going wrong with our young population, and every year, the reality becomes more frightening. Many more babies are born with the acquired immune deficiency syndrome; Down's syndrome; heart problems; cancer; lacking organs; prematurely, or are miscarried.

Even measles cases, according to doctors oppinions, are not the same as they used to be 20-30 years ago. We observe many new ailments, but among those new ailments is one which deserves to be paid an extreme attention; it is not just an illness, it is—death—"sudden infant death syndrome".

Approximately ten years ago, watching TV, I happened to see a tragic scene; a young mother despaired over the loss of her healthy infant twins who suddenly died in their sleep. Remarkable—twins sleeping in two separate cribs, died at the same time from the same

unknown cause. At that time (10-8 years ago), such an incident was rather exceptional and was named "The crib death".

At present sudden infant death syndrome strikes about one hundred fifty times a year in New York alone, but New York is not alone, the mysterious sudden infant death emerged globaly including Australia, New Zealand, and the Netherlands, where the Public Service Campaign has been alerted by high mortality from sudden infant death syndrome.

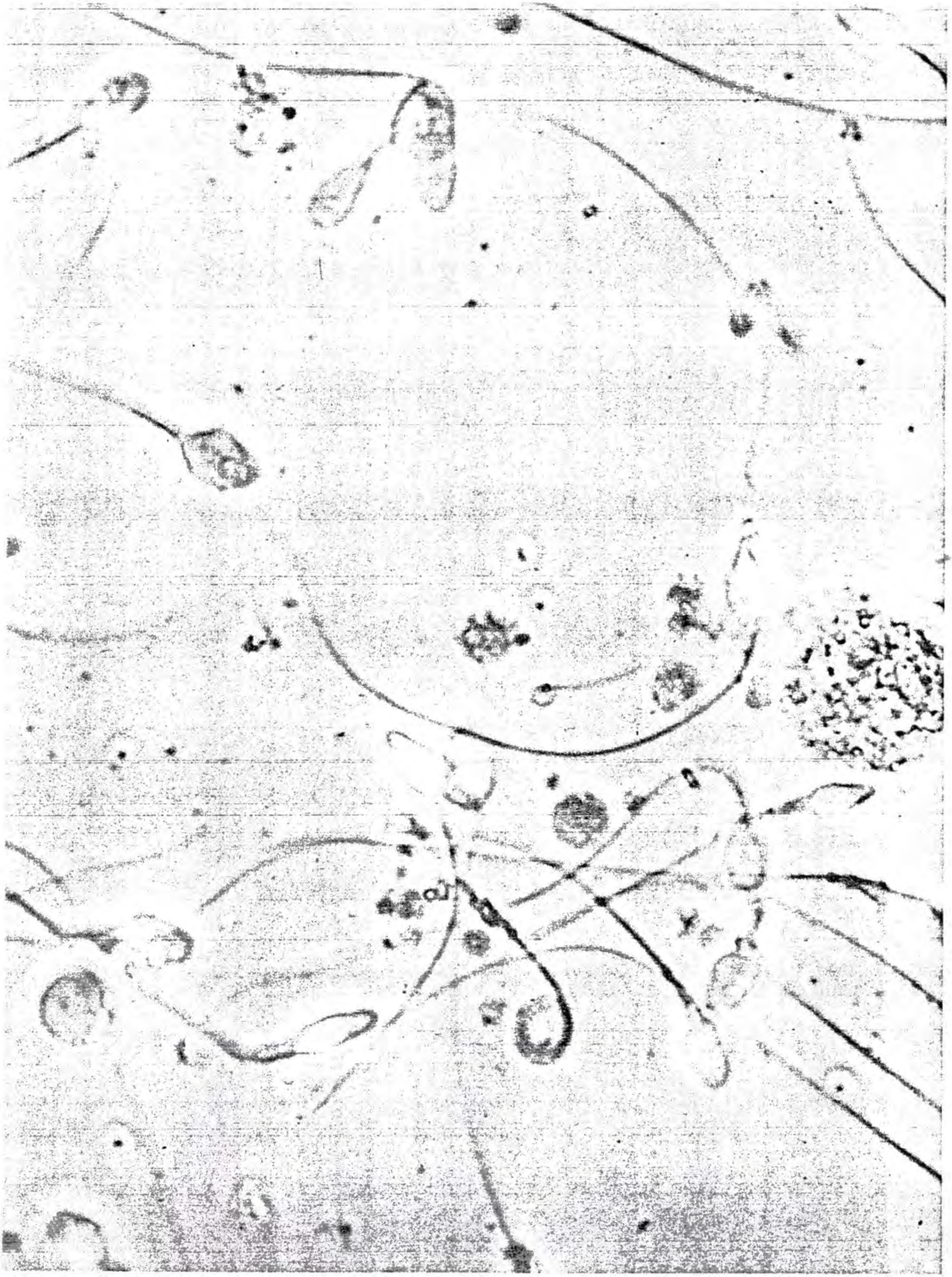
Babies born recently are a third generation of the antibiotic epoch, it means that their grandparents and parents used antibiotics. Knowing the truth about AIDS and AIDS"; then the truth about antibiosis; there become quite real a possibility that just antibiosis causes sudden infant death syndrome.

Besides the harmful effects of antibiotics on metabolism they also affect the cardiac system. High numbers of adults, suffer from cardiac arrest. This indicates that the blood composition had been altered, hereafter causing risk of circulatory arrest. People of all ages and both genders suffer from cardiac problems. Hence the very young, delicate infant blood circulation can be easily arrested in their sleep, causing sudden death.

I assume that if research were conducted; the findings would indicate that mothers of children who died from sudden death syndrome were either treated with antibiotics during pregnancy or the child itself was under treatment at one time.

The blood circulatory arrest; Then sudden infant death, had been impossible to diagnose without knowing destructive power of antibiosis.

Vlojislav Jedrok



JEAN MONTALBANO
NOTARY PUBLIC, State of New York 11-25-91
No. 41-4823689
Qualified in Queens County
Commission Expires ~~March 30, 19~~ 7-31-93

Maja Jolen Jezak
67-05 Exeter st.
Forest Hills N.Y. 11375

— Najłatwiej jest okłamywać samego siebie
— Najtrudniej jest okłamywać samego siebie.

Charakterystyka mojego warsztatu polega na medytacjach intelektualnych, bez poparcia za pomocą doświadczeń w braku laboratorium i całego mechanizmu naukowego.
Nie posiadam również wykształcenia medycznego, natomiast w miarę wgłębiania się w zakres wiedzy dotyczący AIDS, mam podstawy do postawienia hipotezy, z którą nigdzie się nie spotkałam.
Aby wyjaśnić swoje stanowisko względem homoseksualizmu, który jak wiadomo mocno wiąże się z przedmiotem zagadnienia, podaję swoją w tej materii opinię. Otóż uważam, że homoseksualizm jako zjawisko znane już w starożytności, nie może być dyskryminowany, bo tak w przeszłości jak i obecnie powstaje w łonie ludzkości w wielu przypadkach dotyczy zresztą ludzi wybitnych.
Mówię to w tym celu, aby nie być posądzaną o jakąkolwiek próbę oceny tego zjawiska. Wiemy natomiast, że choroba AIDS wydania się najpierw w tym środowisku życia seksualnego.
Mam również obowiązek przeprosić naukowców i lekarzy specjalistów, za niedomogi w zakresie języka fachowego, gdyż świadomość dużej odległości od perfekcji w tej materii, uniemożliwiła by mi podzielenia się z ludźmi nauki moimi obserwacjami i spostrzeżeniami, i w imię tego, ową

niedoskonałość proszę mi wybaczyć.
Liczę się z tym, że mogę się mylić, lecz wówczas wiem,
że hipoteza zrodzi się bowiem, w głowach ludzi,
którzy nie są zagubieni w szeregówce.

Moja Polska Społeczność

Schedule
15 minutes

July 26 1993

Ms. Kristine Gebbie
White House AIDS Coordinator

Maja Jolek Jedrak
67-05 Exeter St
Forest Hills, N.Y. 11375
Tel. 718-263-1864

Dear Ms. Gebbie,

I am an immigrant from Poland living in the U.S. for twenty one years. By coincidence and most importantly, by vocation, I have been in the medical field working for over fifteen years with people who needed compassion, devotion and warm heart.

I have have a degree but not in medical sciences. In the last seven years I have focused on the Acquired Immune Deficiency Syndrome. Although, I had no resources to study seven days a week, twelve hours a day for over seven years — I did it. I felt that I could reach somewhere in my research, the outcome is a 200 page long manuscript written in Polish, thoroughly supported by scientific proof. The 200 pages I summarized in English seventeen pages to make it possible for you to get acquainted with the content. I believe that I discovered more than I hoped for and

I have no doubt that my findings will achieve national greatness.

Considering your great involvement and outstanding knowledge I would be very honored by a possibility of personal contact with you. I am absolutely convinced that our encounter would be fundamental in resolving some crucial AIDS issues.

I am looking forward to seeing you.

Sincerely yours,

Maja Jolles Jedrak

Ms. Maja Jedrak
Maja Jedrak ~~Jedrak~~
67-05 Exeter St
Forest Hills, N.Y.
11375

Ms. Kristine Gebbie
White House AIDS Coordinator
200 Independence Ave SW