

The reVITALIZER HOUR

with 'The Swinging Sounds of Dr. William Summers

([CALL-in, 505 -444- 5059](tel:505-444-5059)) ©Summers, 2024

SATURDAY March 15, 2024

SPECIAL GUEST: The Listener

TOPICS: IMA, MEASLES, vaccines, Hantavirus, METApneuma_virus
Memory reVITALIZER with Summer

Quotes & Quips

HUMOR & WISDOM

When you go home, tell them of us and say, For your tomorrow, we gave our
today – written by Simonides to honor the Spartans fell at the Battle
of Thermopylae in 480 BC.

“ *For Wisdom is better than rubies,*”

Proverbs 8:11

* Joe Biden == Kakistocracy = government by the worst
& least-qualified men in the society

<https://mycancerstory.rocks/the-blog/>

32 Trillion cells = one human

PROPORTION SIZE 1 million seconds = 11 days

1 billion seconds = 32 years x 38 = 1,216 years

1 trillion seconds = 31,688 years

CALL-in, 505 -444- 5059

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IN THESE TROUBLED TIMES REMEMBER, FEAR
IS A REACTION.. COURAGE IS A DECISION.

THE PURPOSE OF THIS SHOW IS TO EMPOWER
YOU ...THE LISTENER I MAKE THE COMPLEX
UNDERSTANDABLE EACH & EVERY SHOW.

— R. Limbaugh

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RESEARCH AT IMA

Attention Alcoholics and friends of alcoholics !

My experice is every alcoholic knows it and secretly desires to stop

A NEW PROTOCOL investigating TMP-301 which sits on the
Glutamate receptor anc hopefully stops desire for alcohol.

Age 18-65, not morbidly obese or with fatal medical conditions (hepatitis,
cancer and NOT severly CO-addicted to other substances (cocaine, meth,).

Call 505-848-3773

ALSO early AD

Also high risk for Cardiovascular Disease

Also two studies on Depression

Measles UPDATE

301 cases in 14 states so far, the vast majority of which are concentrated in
Texas and New Mexico. 99% of the people infected this year have been
unvaccinated, and most were children.

Are you completely convinced of the safety and effectiveness of the
childhood vaccine schedule, or do you think additional research is justified?

The Centers for Disease Control and Prevention (CDC) is gearing up to study
the links between vaccines and autism. Some, including Sen. Bill Cassidy
(R-La.), have called this a waste of scarce resources, like studying whether
the earth is flat or whether Elvis is still alive.

The whole concern about MMR and autism is believed to have originated in a
1998 paper in The Lancet by Dr. Andrew Wakefield and 12 others. The
journal retracted the paper 12 years later, and the British General Medical
Council revoked Dr. Wakefield's medical license.

Dr. Wakefield was not the first person to suggest an association, and hundreds of thousands of parents have reported that their normally developing child suddenly regressed (losing eye contact, speech, motor skills, etc.), often after a well-baby visit that involved “baby shots.”

Nearly 90% of autism cases may be regressive, according to a 2018 study by Ozonoff, et al., a fact not compatible with a genetic cause. Rather, it implicates a sudden toxic exposure. (Exposure to microplastics or common foods is not sudden.)

Autism is one of many conditions found to be far more prevalent in vaccinated children (see graph) in a 2017 study by Mawson et al.

Unquestionably, the diagnosis of autism is being made far more frequently—it may be as high as 1 in 25 children in some areas. The burden of needed social services will become even more crushing when the children’s parents die. A \$1.6 trillion/year tsunami has been suggested.

Some studies have found a vaccine connection; others have not. Should we toss out all the positive ones as flawed, as Sen. Cassidy has suggested? Or pursue all avenues to investigate the cause of this overwhelming catastrophe?

STANDARD VACCINATION SCHEDULE

Birth

-Hepatitis B (HepB): First dose 1-2 Months

-Hepatitis B (HepB): Second dose 2 Months

One of the most significant routes globally,

this occurs from an infected mother to her baby during childbirth.

- Diphtheria, Tetanus, and Pertussis (DTaP): First dose

- Haemophilus influenzae type b (Hib): First dose

5* - Pneumococcal conjugate (PCV15 or PCV20): First dose

- Inactivated Poliovirus (IPV): First dose

-ROTAVirus (RV): First dose (depending on the vaccine brand, this is a 2- or 3-dose series)

- 4 Months

- DTaP: Second dose
- Hib: Second dose
- 10* - PCV15 or PCV20: Second dose
- inactivated polio IPV: Second dose
- Rotavirus: Second dose

6 Months

- DTaP: Third dose
- Hib: Third dose (some brands may require a fourth dose later)
- 15* - PCV15 or PCV20: Third dose
- IPV: Third dose (can be given between 6-18 months)
- ROTAVirus: Third dose (if applicable, depending on the brand)
- Hepatitis B (HepB): Third dose (can be given between 6-18 months)
- Influenza (Flu): Annually, starting at 6 months (usually given during flu season)

12-15 Months

- 20* - Hib: Fourth dose (if required by the specific vaccine brand)
- PCV15 or PCV20: Fourth dose
- Measles, Mumps, and Rubella (MMR): First dose
- Varicella (Chickenpox): First dose
- Hepatitis A (HepA): First dose (second dose typically given 6 months later)

15-18 Months

- DTaP: Fourth dose

4-6 Years

- DTaP: Fifth dose
- IPV: Fourth dose
- MMR: Second dose
- Varicella: Second dose

Additional Notes

Influenza (Flu): Recommended every year starting at 6 months of age.

Hepatitis A (HepA): Second dose is typically given 6-18 months after the first, completing the series by age 2 or later.

Schedules can vary slightly based on specific vaccine brands (e.g., PCV15 vs. PCV20 or Hib dosing) or a child's health conditions.

HANTA VIRUS

Hantavirus, specifically the strain causing Hantavirus Pulmonary Syndrome (HPS), is a serious concern in New Mexico, which has the highest number of reported cases in the U.S. Here's what I can tell you about treatments for Hantavirus in New Mexico based on available knowledge:

There is no specific cure or vaccine for Hantavirus Pulmonary Syndrome (HPS). Treatment primarily focuses on supportive care, aiming to manage symptoms and keep the patient stable while their body fights the virus. In New Mexico, where the Sin Nombre virus (carried mainly by deer mice) is the predominant strain, here's how it's typically handled:

Early Medical Attention: If HPS is suspected—often indicated by flu-like symptoms (fever, muscle aches, fatigue) progressing to severe breathing difficulties after possible rodent exposure—immediate medical care is critical. In New Mexico, doctors are often attuned to this risk due to the state's history with the virus.

Intensive Care Unit (ICU): Patients with HPS frequently require ICU admission. The virus can cause rapid lung failure as fluid builds up, leading to severe respiratory distress. Supportive treatments include:

Oxygen Therapy: To help with breathing as lungs struggle.

Mechanical Ventilation: For cases where breathing becomes too difficult, a

ventilator may be used.

Extracorporeal Membrane Oxygenation (ECMO): In severe cases, ECMO—a heart-lung bypass machine—can oxygenate blood outside the body. New Mexico’s University of New Mexico Hospital (UNM) is noted for its expertise in this technique, which has improved survival odds for some patients.

Fluid Management and Medications: Doctors may administer fluids to maintain hydration and blood pressure, but they must balance this carefully to avoid worsening lung fluid buildup. Medications to stabilize blood pressure might also be used. Antiviral drugs like ribavirin have been tried in some cases, but there’s no solid evidence from large trials showing they work effectively against HPS.

Prevention as Priority: Since treatment options are limited, New Mexico health officials emphasize prevention—sealing homes, avoiding rodent contact, and safely cleaning rodent-infested areas with bleach solutions or disinfectants to kill the virus before it becomes airborne.

The mortality rate for HPS is high—around 36-40% nationally, and in New Mexico, about 41% of cases have been fatal historically. Early recognition and aggressive supportive care are the best bets for survival. If you’re asking for personal reasons, like a recent exposure in New Mexico, see a doctor ASAP and mention any rodent contact—time is critical.

HantaVirus Story is a STORY FROM NEW MEXICO

In May 1993, a young, healthy Navajo man in New Mexico died suddenly after a few days of fever, muscle aches, and severe breathing problems.

Shortly after, his fiancée, also young and healthy, died with similar symptoms. This cluster caught the attention of local doctors and the New Mexico Department of Health, as it was unusual for young people to die so quickly from what looked like a respiratory illness. Within weeks, more cases popped up in the region—people with flu-like symptoms that rapidly escalated to lung failure.

The mystery deepened because initial tests ruled out common culprits like influenza, plague, or pneumonia. The Centers for Disease Control and

Prevention (CDC) got involved, along with infectious disease experts, launching a full-scale investigation. They interviewed survivors, families, and doctors, and autopsied victims, finding lungs flooded with fluid—a hallmark of what would later be called HPS (Hantavirus Pulmonary Syndrome).

Suspicion turned to a viral cause, and researchers began testing for known viruses in the Hantavirus family, which were already identified in Asia and Europe as causing a kidney-focused illness (Hemorrhagic Fever with Renal Syndrome, or HFRS). Using blood samples from patients, they found antibodies to a hantavirus, but it didn't match the known strains exactly. Genetic sequencing—cutting-edge at the time—revealed a new strain, later named **Sin Nombre virus** (Spanish for "no name"), carried by the deer mouse (*Peromyscus maniculatus*).

The breakthrough came when they trapped rodents near patients' homes in the Four Corners area. Deer mice tested positive for the virus, and its RNA matched what was in the human victims. The connection was clear: people were inhaling aerosolized virus from mouse droppings, urine, or saliva, likely kicked up during cleaning or outdoor activities.

Why 1993? An unusually wet spring, linked to El Niño weather patterns, had boosted vegetation, leading to a deer mouse population boom—ten times higher than normal in some areas. More mice meant more virus exposure. By late 1993, the CDC had confirmed over 30 cases across the region, with New Mexico hit hardest, and the disease's profile was established.

The discovery wasn't entirely from scratch—hantaviruses were first identified in the 1950s during the Korean War, when U.S. soldiers got sick from a rodent-borne illness (named Hantaan virus after a Korean river). But the 1993 outbreak introduced the world to a new, deadlier pulmonary form, rewriting the book on hantavirus risks in the Americas..

Human metapneumovirus

Human metapneumovirus (HMPV) is a paramyxovirus that causes respiratory tract infections in humans. It was discovered in 2001 in the Netherlands. Infection is most common in the winter and spring in temperate climates. This pathogen commonly affects children; however, adults are affected as well. HMPV is like respiratory syncytial virus (RSV) and has been frequently compared to it. Transmission from person to person is thought to be through nasopharyngeal secretions, as per Peiris et al., who found HMPV virus RNA in the nasopharyngeal secretions of 32 children admitted with acute respiratory symptoms . The incubation period is thought to be five to six days in most cases of an HMPV outbreak in two long-term care facilities, as per a CDC report . Clinical manifestations vary in severity; in the adult population, they commonly include cough, nasal congestion, rhinorrhea, dyspnea, hoarseness, wheezing, and fever, to a lesser extent

The overall mortality was 22%. An abnormal chest X-ray (CXR) was reported in 15 patients. Non-survivors were more likely to have abnormal CXR and a higher fever at the time of diagnosis, required mechanical ventilation, or had other concomitant infections.

Ribavirin, a medication used to treat RSV, showed effectiveness in an animal model. The Chinese Center for Disease Control and Prevention published data showing that respiratory infections had risen significantly in the week of 16 to 22 December 2024; human metapneumovirus was linked to 6.2 percent of positive respiratory illness tests and 5.4 percent of respiratory -illness hospitalizations in China, more than COVID-19, rhinovirus, or adenovirus.[

Research suggests the respiratory virus causing significant deaths in China recently is human metapneumovirus (hMPV). It seems likely that hMPV has been circulating widely since December 2024, particularly affecting vulnerable groups like children, the elderly, and immunocompromised individuals.

Overview

Human metapneumovirus (hMPV) appears to be the virus responsible for the recent increase in respiratory-related deaths in China, especially over the past few months. First identified in 2001, hMPV is a common respiratory virus that typically causes mild cold-like symptoms but can lead to severe illness in at-risk populations, such as young children, older adults, and those with weakened immune systems. Reports indicate a surge in cases since December 2024,

Impact and Vulnerability

While most cases are mild, hMPV can result in severe outcomes like bronchitis or pneumonia, particularly in vulnerable groups. Global data suggests it contributes to about 1% of acute lower respiratory infection-related deaths in children under five, though specific 2025 death counts for China are not widely reported. This outbreak has raised concerns, but experts note it's within expected seasonal trends, not a new or unprecedented threat.

Background and Identification

Human metapneumovirus (hMPV) has been identified as a key respiratory virus circulating in China since December 2024, with a notable increase in cases reported by the Chinese Centre for Disease Control and Prevention (CDC) Increase in respiratory infections in China. First discovered in 2001 in the Netherlands, hMPV is not a new pathogen but a well-known virus that typically causes upper and lower respiratory tract infections, particularly during colder months. The World Health Organization (WHO) has noted that the surge in hMPV cases aligns with seasonal trends in the Northern Hemisphere, typical for winter and early spring Trends of acute respiratory infection, including human metapneumovirus, in the Northern Hemisphere.

Reports from various sources, including The New York Times and Al Jazeera, highlight that hMPV infections have been rising, especially among children under 14 and other vulnerable populations, with symptoms

resembling flu or colds but potentially leading to severe complications What We Know About HMPV, the Common Virus Spreading in China, What is HMPV, the respiratory virus surging in China?. This outbreak has drawn international attention, evoking comparisons to the early days of COVID-19, though experts emphasize it's a different scenario, with hMPV being a long-established virus HMPV: What to know about China's human metapneumovirus cases.

Case Surge and Seasonal Context

The surge in hMPV cases began in northern China around December 2024, coinciding with low winter temperatures that facilitate virus transmission, as people spend more time indoors HMPV: What to know about China's human metapneumovirus cases. The Chinese CDC reported significant rises in respiratory viral infections, including hMPV, with data indicating it accounted for 6.2% of positive respiratory illness tests and 5.4% of hospitalizations in late 2024, surpassing COVID-19, rhinovirus, and adenovirus in some metrics HMPV seasonal outbreak in China (2024–present). WHO and other health bodies have stated that this increase is within the expected range for seasonal respiratory virus activity, not indicative of an unusual outbreak Trends of acute respiratory infection, including human metapneumovirus, in the Northern Hemisphere.

Impact on Vulnerable Populations

While hMPV typically causes mild illness, it poses significant risks to vulnerable groups. Severe cases can lead to bronchitis or pneumonia, particularly among infants, the elderly, and immunocompromised individuals. A 2021 study cited in The Hindu notes that globally, hMPV is responsible for 3%-10% of hospital admissions and 1% of acute lower respiratory infection-related deaths in children under five Nothing alarming: on China's HMPV cases. The Economic Times also references China's CDC, stating that in susceptible individuals with underlying conditions, hMPV infection can lead to death, with a 1% fatality rate for acute lower respiratory infections in young children based on 2021 Lancet Global Health data HMPV fatality rate: HMPV Virus: How deadly is this virus? China's Center for Disease Control

and Prevention sheds light on fatality rate. However, specific 2025 death counts for China are not detailed in these reports, suggesting limited public data on this metric.

An unexpected detail is the mention in some reports of a “notable increase in sudden deaths” linked to hMPV, particularly affecting individuals aged 40 to 80, as noted by DDNews, though this claim lacks official confirmation and may reflect social media speculation rather than verified data. What is HMPV virus currently spreading in China?. This highlights the challenge of distinguishing between verified health reports and online narratives, especially in the context of global health concerns.

Comparison with Other Viruses

The outbreak occurs alongside other respiratory pathogens, such as influenza, respiratory syncytial virus (RSV), and mycoplasma pneumoniae, which have also been circulating. However, hMPV has been singled out in recent reports due to its significant case increase and impact. For instance, ABC News notes that while hMPV cases are rising, the overall scale of respiratory infectious diseases in China in 2025 is lower than in 2024, suggesting the outbreak is manageable within seasonal norms. What you need to know about HMPV as China sees rise in cases. This context is crucial, as it indicates hMPV’s role is part of a broader seasonal pattern rather than an isolated crisis.

Public Health Response and Expert Opinions

China’s health authorities and WHO have downplayed fears of a COVID-like pandemic, emphasizing that hMPV is a known virus with established seasonal patterns. The Chinese CDC has advised precautions like mask-wearing and hand hygiene, while WHO has not reported unusual outbreak patterns or overwhelmed healthcare systems. Trends of acute respiratory infection, including human metapneumovirus, in the Northern Hemisphere. Experts, such as epidemiologist Jacqueline Stephens from Flinders University, suggest the increased prevalence is likely the normal seasonal increase seen in winter, not a cause for alarm. HMPV:

What to know about China's human metapneumovirus cases. However, the lack of specific death data and social media claims of overwhelmed hospitals have fueled public concern, which health officials are working to address.

At present, there have been some new developments in the research on anti-HMPV drugs. Researchers have identified multiple drug candidates with dose-dependent activity in inhibiting HMPV infection. Among them, mycophenolic acid shows high levels of inhibitory effects and has great drug-repurposing potential. In addition, the development of some HMPV vaccines has been put on the agenda. The two HMPV vaccines studied by Moderna, mRNA-1653 and mRNA-1365, are both in the clinical stage.

Interview on Memory reVITALIZER

- * 1991 The playing Field.
- * Cytokines
- * 5 classes of Anti-oxidants, work at different sub-cellular levels

• vitamins Vitamin E

Vitamin E is a neurotropic vitamin. Vitamin E is the body's premiere fat-soluble antioxidant.

It compliments Vitamin C, which is the premier water soluble antioxidant.

- Vitamin E is the major protective antioxidant for cell membranes. Many free radicals are located on membranes.

- Vitamin E also provides protection of serum lipoproteins which are the transport vehicles for triglycerides, fatty acids, cholesterol and other lipids to the tissues by way of the blood.
- Vitamin E is involved in the normal regulation of prostaglandin balance.
- Natural source E is preferred, as from soybeans, and designated d-alpha tocopherol. The synthetic variety is from petroleum. This is designated dl-alpha tocopherol.
- Further there are alpha, beta delta and gamma forms of vitamin E. Only the alpha form of vitamin E is stored in fatty tissues in the body and remain at sufficient levels to provide antioxidant protection.
- It is important to know that vitamin E requires 150 - 200 mcg of organic *selenium* to be fully effective as an antioxidant, because the two of these produce the enzyme glutathione peroxidase that protects fats in the body.
- Succinate vitamin E is the dry powdered form and is more easily absorbed than the oily acetate form.
- While vitamin E is widely recognized for its antioxidant properties, protecting cells from oxidative stress, its role in specific health areas is less highlighted. One such area is **EYE HEALTH**, where vitamin E, particularly alpha-tocopherol, has been shown to reduce the risk of age-related macular degeneration (AMD). The Age-Related Eye Disease Study (AREDS) found that vitamin E, alongside other antioxidants, decreased the progression of AMD by 25% in individuals with early signs, suggesting a protective effect against oxidative damage in the retina

● **Herbals Gotu Kola**

Gotu kola is a perennial plant of the parsley family. *Centella asiatica*, commonly known as Indian pennywort. It grows in temperate and tropical swampy areas in many regions of the world. It is indigenous to the Indian subcontinent (including Sri Lanka). Gotu Kola contains pentacyclic triterpenoids and trisaccharide derivatives, including asiaticoside, brahmoside, asiatic acid, and brahmic acid (madecassic acid). Other constituents include centellose, centelloside, and madecassoside. Approximately 124 chemical compounds have been isolated and identified

from *Centella asiatica*.

Due to its anti-inflammatory and anti-oxidant effects, it has been used to treat various disorders, dermatological conditions, and minor wounds.

Gotu Kola extracts have been shown to relieve COGNITIVE IMPAIRMENT and treat neurodegenerative conditions by way of reducing the production of reactive oxygen species and promoting neuron survival and growth.

It has also shown promise in treating endocrine-related disorders like *DIABETES AND OBESITY*, by reducing insulin resistance and aiding in the regulation of blood glucose levels and appetite, and endometriosis by reducing inflammation.

Furthermore, *C. asiatica* has shown to reduce the generation and activity of *Osteoclasts in osteoporosis* models in mice. *C. asiatica* may address several skin conditions such as acne, vitiligo, eczema, and increase collagen production.

– The compounds asiaticoside and asiatic acid may relieve *hypertension, atherosclerosis, and ischemic heart disease* by promoting endothelium function and reducing pathological apoptosis of heart muscles.

C. asiatica's pro-mitochondrial, anti-inflammatory, and anti-oxidant effects have shown benefits in treating *digestive diseases* in animal and in vitro studies.

Gotu Kola may also aid in treating *respiratory diseases* by targeting inflammation. In animal and cell trials, *C. asiatica* has been shown to promote *cancer cell* death.

● Amino Acids - L-Methionine

L-methionine is an essential amino acid needed for many body functions, including building new proteins, supporting DNA activity, and repairing tissues.1 It also has a vital role in helping cells neutralize free radicals, toxins that damage tissues and lead to conditions like cancer

Your body can't produce L-methionine, so you must get it from your diet or supplements.

- One of the leading uses of L-methionine is in the treatment of an acetaminophen overdose. It actively repairs livers

- **CANCER** Some studies show that L-methionine may be helpful for breast and pancreatic because it can interrupt the cell growth cycle, leading to cell death. In lab studies, it has been shown to be effective in liver cancer cells as well. L-methionine is an integral part of the growth cycle in certain types of cancer cells. According to the review, evidence that L-methionine restriction may inhibit cancer cell growth is growing.

- Neural tube birth defects are some of the most common birth defects, and L-methionine may help in preventing them. **GREAT PRENATAL SUPPLEMENT.**

- **LIVER:** A 2020 review found that L-methionine supplementation may help reduce the risk of liver damage. Supplementing with L-methionine may help increase levels of S-adenosyl methionine (SAME), which may protect against liver damage.

■ OTHER

- Nourishing the hair, skin, and nails
- Slowing down cell aging
- Protecting cells from pollutants
- Helping with the absorption of other nutrients, like selenium and zinc
- Aiding in the detoxification of heavy metals, including lead and mercury

Acetyl L-Carnitine crosses the blood brain barrier more sufficiently than L-carnitine. It is involved in the metabolism of protein, carbohydrates and fats, and especially in the conversion of fats into energy being used by the body to lower blood triglycerides. It is a carrier of fatty acids into the mitochondria of the cell Thus it is good for cardiovascular health by speeding the conversion of fat into cellular energy. In vegetarians it is an essential nutrient, because **the body requires lysine, methionine, B1,B6 and iron in a complex reaction to make L-Carnitine.** Acetyl-L-Carnitine is associated with increased levels of glutathione and CoQ10. It mimics acetylcholine and thus positively affects cognition. It generally improves energy production in the brain and may be beneficial in depression.

■ **FOOD SOURCES**

Eggs, Chicken, Beef, Pork, Milk, Corn, Lobster (tail)
Fish (canned tuna), Oatmeal, Beans, Cauliflower



