
Why MBNIUTS Sustain Subjects in High-Risk Groups Along With the 19-COVID Vaccine in the THR Pathways?

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How to understand the human intelligent brain operates in the health and pathology attributed to exceptional corona epidemic attacks. It sheds light primarily on healthy subjects who rely on an evolutionarily inseparable coupling mechanism composed of *macro biophysical neurophysiological information unit tools* (MBNIUTs) that get processed through ion channels of *mental neuronal networks* (MNNs). In fact, MBNIUT feed sensory fragments of internal mental programs that were actually derived from external *life event scenarios* (LES) that have been reworked in the working memory centers of the brain. Such a human mind is a materialistic mobile in nature containing executive services transmitted through MNN along with properly linked *autonomic neuronal networks* (ANN) to insert given *bodily operating ranges* (BOR) to challenge the epidemic attacks of the corona virus. The most trusted medical practice is based on the identification of healthy subjects in communities that are on the threshold of rising and falling on homeostatic reference frameworks. The healthy subjects inherit or have acquired healthy mutation genes that are willingly controlled by the assembly of *normal neuronal loop activity* (NNLA). The latter controls the evolutionary level of the feedback from the external LES through a voluntary mechanism of unified body, brain and mind processes, one navigates between four cycles of the day to quantify BOR and four automatic sleep phases. Also, under the MBNIUT placebo inducing agents voluntarily select LES without stress factors to install BOR's *basic homeostatic threshold levels*. It represents the *gold standard* that in daily resting state achieves *bodily tranquility* (self-experience) for its re-translation by the limbic brain region into *strong positive emotion* (SPE) with *cognitive health expression* (CHE). For this reason, the author calls the inner materialistic background as a *transient homeostatic resynchronizing* (THR) state, with basic parameters of health. Moreover, the

international medical community must be aware that patients in persistent healthy conditions were and are flexible to any infectious disease, including corona virus infection. Healthy subjects respectively: a. may stay in the corona virus-free state, b. counteracts with mild forms of disease and c. practically become carriers of the disease.

The chronical sick subjects inherit or have acquired genes that have undergone an abnormal mutation to disrupt the unity of body, brain and mind to generate the essential subjective and objective parameters. These sick subjects are constantly accumulating stress-driving factors that connect to any external LES *deepening the internal distress* under automatic control of the body. Mutually, *such conditions block all the major mental faculties of the macro biophysical neurophysiological mechanisms*. The latter triggered the *abnormal neuronal loop operation* (ANLO) to maximize above or minimize BOR threshold levels. Regarding these quantify parameters *such subjects become either physically oversensitive or physically hyposensitive towards any situation and any LES feedback*. In addition, such inner conditions lead subjects into the *transient homeostatic desynchronized* (THD) state. The latter subjectively present self-experiences or severe worry or unpleasant sensual experience followed by high-grade agitation or low-grade delay in each LES that activates quantify velocity related BOR stages that activate *strong negative emotion* (SNE) with *cognitive negative expression* (CNE) states. Medical professionals around the world have faced the stormy epidemic attacks of the corona virus without *knowing why THD conditions hold minimal or zero leverage of flexibility against the corona virus*. *First, such chronically ill patients were treated with ineffective medical protection* that led them to the severe irrational fear of contracting the corona virus and neglecting self with only periodically wearing a face mask, periodically maintaining social distance and not always keeping proper personal hygiene or washing hands with alcohol gel. Thus, the increased corona virus waves forced the authorities to carry out periods of definite lockdowns of the general public in order to deal with flattening the infection curve. *Second, completely neutralized medical professionals treating these high-risk groups at the individual level have failed to defend internal vulnerabilities*. *Third, a vicious circle of the ANLO automatically sustain the internal unfavorable essentials of individual pathology* that cannot be counteracted with vaccination only, because of their fundamental macro biophysical neurophysiological flaws still remained at their primary vulnerable body, brain and mind disunity. *By dealing with such a medical reality, we must understand that the best macro biophysical neurophysiological therapy associated with rehab training tools may help ensure a gradual replacement of THD states with THR states*.