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CFS & The Alien Abduction Scenario?

From: Max Burns <AlienHype@aol.com>
Date: Thu, 18 Mar 1999 07:45:54 EST
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Subject: CFS & The Alien Abduction Scenario?

Max Burns
Researcher

Is there a connection between "Myalgic Encephalomyelitis"
(Chronic Fatigue Syndrome) & The Alien Abduction Scenario?

Investigator Max Burns
shares his thoughts and his initial findings.

Is there a connection between "Myalgic Encephalomyelitis" or M.E
(Chronic Fatigue Syndrome) and the alien abduction scenario?
That's quite a big question to ask in these days of ridicule
from those who seek to conceal the truth, whatever that truth
may be? "The truth is a three sided blade" - the truth,
according to the pro ETH people; the truth, according to the
hard line skeptic's; and the governmental bodies. Somewhere
inside all of this the truth may exist, but it all boils down to
one thing, the hard line. Skeptics love to quote like a load of
Phillip Klass clones ie. "Where's your evidence". Perhaps I may
well have discovered some. I will let the readers be the judge
of that for now.

It has come to light through my own research into the subject of
UFO's & alien abduction and it would appear at first glance that
there may well be a link with "Myalgic Encephalomyelitis"
(Chronic Fatigue Syndrome) and the alien abduction scenario. I
have during the course of my work over the last two years been a
friendly ear to an abductee, a thirty-two year old female from
the UK who as well as having a long history of medical problems
has been diagnosed with M.E. (Chronic Fatigue Syndrome). Even
more interesting is that she is a member of an abductee group
that meets once a month in London. This group has 20 members who
attend regularly. These people are a fair cross section of the
populace that travels from all around the country to the
meetings. They are also from different ethnic and cultural
backgrounds and all have different doctors.

Although I am good friends with the woman mentioned above I also
know other members of this group. About three months ago I was
interested to learn that out of the 20 members of the group
fourteen members of the group have all been medically diagnosed
with "Myalgic Encephalomyelitis" (Chronic Fatigue Syndrome).
After doing some cursory investigation work I have confirmed
from B.R.A.M.E. (Blue Ribbon Association Myalgic
Encephalomyelitis, a world-wide network for this illness with
groups in 18 countries) that the ME/CFS Charities Alliance
CONSIDERS that the report's estimate of 500,000 - 1 million
sufferers in the UK (1-2% of the population,) is a vast

overestimate of the true situation. The data used includes studies of patients with chronic fatigue, rather than chronic fatigue syndrome. Out of the total figure about 25% of sufferers are house-bound.

What is CFS? Chronic fatigue syndrome (CFS) is an emerging illness characterized by debilitating fatigue (experienced as exhaustion and extremely poor stamina), neurological problems and a variety of flu-like symptoms. The illness is also known as chronic fatigue immune dysfunction syndrome (CFIDS) and outside of the USA is usually known as myalgic encephalomyelitis (ME). In the past the syndrome has been known as chronic Epstein-Barr virus (CEBV). The core symptoms include excessive fatigue, general pain, mental fogginess and often gastrointestinal problems. Many other symptoms will also be present however they will typically be different among different patients. These include: fatigue following stressful activities, headaches, sore throat; sleep disorders, abnormal temperature and others. The degree of severity can differ widely among patients and will also vary over time for the same patient. Severity can vary between getting unusually fatigued following stressful events to being totally bedridden and completely disabled. The symptoms will tend to wax and wane over time. This variation, in addition to the fact that the cause of the disease is not yet known, makes this illness difficult to diagnose.

What causes CFS? The cause of the illness is not yet known. Current theories are looking at the possibilities of neuroendocrine dysfunction, viruses, environmental toxins, genetic predisposition, or a combination of these. For a time it was thought that Epstein-Barr Virus (EBV), the cause of mononucleosis, might cause CFS but recent research has discounted this idea. The illness seems to prompt a chronic immune reaction in the body, however it is not clear that this is in response to any actual infection -- this may only be a dysfunction of the immune system itself. A recent concept promulgated by Prof. Mark Demitrack is that CFS is a generalized condition which may have any of several causes (in the same way that the condition called high blood pressure is not caused by any one single factor). It *is* known that stressors, physical or emotional, seems to make CFS worse. Some current research continues to investigate possible viral causes including HHV-6, other herpes viruses, enteroviruses, and retroviruses. Additionally, co-factors (such as genetic predisposition, stress, environment, gender, age, and prior illness) appear to play an important role in the development and course of the illness. Many medical observers have noted that CFS seems often to be "triggered" by some stressful event, but in all likelihood the condition was latent beforehand. Some people will appear to get CFS following a viral infection, or a head injury, or surgery, excessive use of antibiotics, or some other traumatic event. Yet it's unlikely that these events on their own could be a primary cause.

Is CFS a "real" disease? At this early point many practicing clinicians remain unconvinced that CFS is a genuine illness, although it is slowly increasing in acceptance. The reluctance is due in part to the facts that no specific cause has yet been found, there is no observable marker that doctors can use to specifically identify the illness, and most doctors are not yet familiar with the peer-reviewed research which does tend to legitimize this disease.

Emerging illnesses such as CFS typically go through a period of many years before they are accepted by the medical community, and during that interim time patients who have these new, unproven illnesses are all too often dismissed as being "psychiatric cases". This has been the experience with CFS as well. But many top-level researchers are showing that this is a distinct, organic illness. This includes research by Anthony Komaroff (Harvard), Jay Levy (UCSF), Nancy Klimas (U. Miami), Andrew Lloyd (U. New South Wales), Stephen Straus (NIH), and others.

Who gets CFS? Few studies address this question. Several show that 70 to 80 percent of CFS patients are women, although some researchers say that these are normal figures for any immune-related illness. There are a couple of points here. 1. These figures seem to match up with the male/female ratio of people who claim to have been abducted; 70 to 80 percent are female. 2. The 1-2% of the population which may have CFS also

matches the figures postulated by Dr David Jacobs and Bud Hopkins among others that claim that this figure could be a fair representation of the population of the planet that are being abducted.

Are these correlations in the figures just coincidence? Some studies indicate that CFS, is less common among lower income people and minorities, but critics point out that the average CFS patient sees so very many doctors before they can get a diagnosis that only those with great access to medical care get counted in such studies, thus giving a bias with regards to income and race. NEW ENZYME FOUND IN CFS PATIENTS CFIDS ASSOC OF AMERICA TEMPLE RESEARCHERS DISCOVER NEW HUMAN ENZYME: A Novel Enzyme Found in CFS Patients May Alter Cellular Processes.

Dr. Robert Suhadolnik and his research team at Temple University School of Medicine reported today that studies of patients with chronic fatigue syndrome (CFS) have led to the identification of a new human enzyme. Suhadolnik, a professor of biochemistry and a member of the university's Fels Institute for Cancer Research and Molecular Biology, says of the new findings: "We are greatly encouraged by the trend we see. All CFS patients tested have this new enzyme, while none of the healthy controls do." The new findings, reported at a research meeting sponsored by the American Association for Chronic Fatigue Syndrome, are based on preliminary data from a limited number of patients. However, larger studies are already underway and have attracted financial support from the National Institutes of Health.

Chronic fatigue syndrome, also known as chronic fatigue and immune dysfunction syndrome (CFIDS), is a complex illness characterized by incapacitating fatigue, neurological problems and a constellation of other debilitating symptoms. The cause of the illness is unknown and, since no drug has been found to be effective against CFS, treatment is limited to alleviating the symptoms. CFS affects at least 500,000 American adults and children. The newly discovered enzyme may explain common observations in patients with CFS: an inability to control common viruses (like Epstein-Barr virus and human herpes virus and an inability to maintain cellular energy. According to Suhadolnik, the viral pathway in which this newly discovered protein is active, known as the RNase L antiviral pathway, may control both processes. "This new enzyme in CFS may not function as well as the normal RNase L found in healthy people. It may explain why CFS patients' bodies have a hard time maintaining the energy necessary for cellular growth. We are hopeful that ongoing further studies will lead to a better understanding of some other processes at work in this puzzling illness."

The new findings add to mounting evidence of subtle, yet striking, abnormalities found in people with CFS. "Because the new enzyme has been found in CFS patients but not in healthy controls, it is potentially the basis for a laboratory test for CFS, which is diagnosed today only through its clinical symptoms," says Dr. Antonio Goncalves, associate vice provost for science and technology at Temple University. The university has filed a patent application for such a test and is seeking a corporate partner to further develop and license the test. Goncalves and Suhadolnik caution, however, that additional studies of much larger patient populations are required before the clinical utility of the test can be demonstrated. This study was funded by the National Institutes of Health and The CFIDS Association of America, the nation's largest and most active charitable organization dedicated to conquering CF(ID)S. Further study required the 14 people who are involved in this group, diagnosed with M.E., actually represents 70% of the group. As this 70% figure is extremely high this must warrant further study to try to examine all possible causes of this anomalous figure.

If any good is to come from the gathering of this potential data linking the alien abduction scenario and "Myalgic Encephalomyelitis" then of course it will be required that my investigation is meticulous in the way in which I gather the data. For the analysis of the data I will endeavour to employ the help of professional people from various backgrounds of the hallowed halls of academe which are applicable to the illness and all possible variables. I have made a short list and will be approaching these people directly. Although I am sure you are now aware of my stance on the situation, if this hypothesis is correct then it is imperative that I do the research and back up

what really is at the moment a thought, based on some cursory information. If the data represents the connection then this could well be a back door to Pandora's box. Of course the opposite is also true that the data may reveal something completely different although the data with regard to the anomalous substantial increase in the percentage of the population of earth who have "Myalgic Encephalomyelitis" (Chronic Fatigue Syndrome) is 1 to 2%.

Against this 70% figure which has surfaced with regard to the twenty abductees in the group that I have looked at, I feel that a figure of 10,000 abductees globally would have to submit data to gauge an accurate study as to whether there is without doubt a connection between "Myalgic Encephalomyelitis" (Chronic Fatigue Syndrome) and alien abduction.

I am asking for the assistance of abductee support groups, if you are reading this, to contact myself directly. What this possible connection is could be a number of things. In the interest of not jumping to conclusions, it could be that: 1. The abduction scenario is a direct symptom and brain disorder and part of the many parts of "Myalgic Encephalomyelitis" (Chronic Fatigue Syndrome) and that all people who are claiming abduction have this illness, but the symptoms in some abductees are minute compared to others and that they do not know that they have the illness. However if that were the case it would open up the question of why does a large number of sufferers of "Myalgic Encephalomyelitis" (Chronic Fatigue Syndrome) claim to have been abducted by Aliens such as in the initial test group. That alien abduction is yet another symptom to this illness, a symptom which can manifest itself in the human brain as a memory, this in itself if true, would for me anyway, be quite an astounding discovery that perhaps "Myalgic Encephalomyelitis" (Chronic Fatigue Syndrome) is a direct result of the alleged alien implants, which it has been claimed by a large number of abductees to have been placed inside of their heads, and in some way be causing the illness because of the implants interruption by proximity to certain areas of the brain, causing the brain to send out incorrect signals to the body and the cause-effect of this is the human body receiving the incorrect information to function normally causing the multi-faceted symptoms of "Myalgic Encephalomyelitis" (Chronic Fatigue Syndrome). There is even a hypothesis that these aliens are in some way feeding off the human life force draining energy from the alleged victim of these abductions, and the symptoms after these alleged incidents, do bear a striking resemblance to the symptoms of "Myalgic Encephalomyelitis" (Chronic Fatigue Syndrome).

Or it could be that the abduction scenario is all in the mind of the abductee and that "Myalgic Encephalomyelitis" (Chronic Fatigue Syndrome) in the cases where abduction is also being claimed, is a direct result of the depression being caused by believing that they are being abducted by aliens. Perhaps the alleged abductee's body chemistry is being altered and this, as the discoverer called it, is a Unique Random Enzyme/Protein, and is a further manipulation of the DNA structure of the human race to make it more compatible for the long term hybrid program which may be causing the side effects that manifest themselves in the symptoms of CFS.

Maybe it is something all together different from the from above with the data collated after the cursory investigation of the twenty abductees who are members of the same group. However, this has shown that in this group at the percentage of people diagnosed with "Myalgic Encephalomyelitis" (Chronic Fatigue Syndrome) to be 68% above the national average. It has to warrant further investigation.

I will be contacting relevant parties who can offer correct medical and psychological comment on the data when I have finished collating it. I believe that if the cursory evidence gathered from this global investigation returns the same high anomalous figure of or around 70 % this may well lead to the opening or at least unlocking of Pandora's Box. The objective is to supply undeniable data, and in the ideal world to force enlisting the scientific community to investigate this further, with an over all view to forcing the world governments to acknowledge that we are being visited by E.B.E.'s and that the abductions claimed by so many are in a large number of cases what I personally believe to be true. I am in particular looking at the new enzyme that is present in the bodies of all people

diagnosed with CFS and in the 1000 people tested who did not have CFS the enzyme was not present. My research is progressing slowly into what may well turn out to be a connection with the identification of a new human enzyme and the alien abduction scenario. Although I am only speculating at this time, I feel that there is a distinct possibility that the enzyme will be present in all abductees and that all abductees actually have CFS or Fibro and that the symptoms are so minute in some abductees that they do not realise that they have the illness. Ultimately the end process would be to obtain testing of a group of abductees who do not believe that they have CFS or Fibro, to see if the enzyme is also present in the abductees which I believe it may be as I feel that abductees body chemistry is being altered and this, as the discoverer called it, a Unique Random Enzyme / Protein, is a further manipulation of the DNA structure of the human race to make it more compatible for the long term hybrid program which may be causing the side effects that manifest themselves in the symptoms of CFS.

Until the hard data has been collected and analyzed I can only present this as a circumstantial case to Dr. Robert Suhadolnik and his research team and others in the research field, as you and I both know what a sticky wicket we are batting off to start with in the research field of alien abduction.

I have kindly been given web space by Marilyn Ruben who runs the AAER Abductions website, for a survey of abductees to gauge some global figures on the number of people with CFS who also claim alien abduction.

The URL is: <http://www.abduct.com/aaer/aaer.htm>

I hope that upwards of 10,000 abductees will take the CFS survey on the site during the next twelve months. We may see that the huge increase in the percentage of abductees that have CFS is a global pattern and returns the same high anomalous figure that it has with my initial investigation, circa 68% above the global national average per capita of 1-2% of the populous. "That I may be right". Hold that thought.

Comments and assistance welcome

Max Burns

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