

FUTURE TECHNOLOGY – INSTANT LEARNING

CASES OF HEALING - DEPRESSION IN THE PUPPY

FOOD OF THE MONTH - EGG

HEALING TECHNIQUE - CUTTING ETHERIC CORDS

MEDICATION OF THE MONTH - LEVOTHYROXINE

CONSCIENIOLOGY - ANTI CONSCIENIOLOGICAL SPECIALTY

INCURABLE DISEASE - TETANO

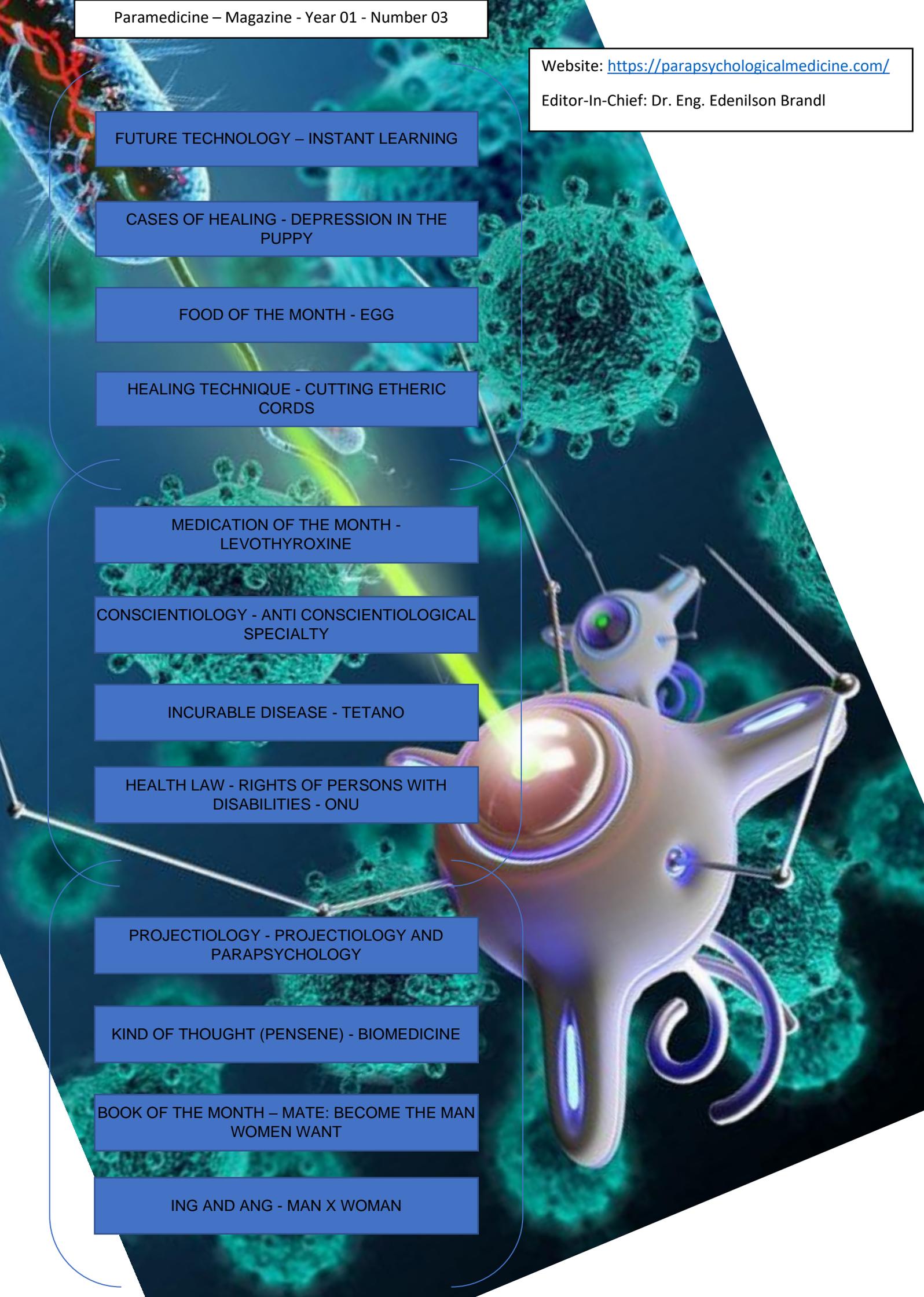
HEALTH LAW - RIGHTS OF PERSONS WITH DISABILITIES - ONU

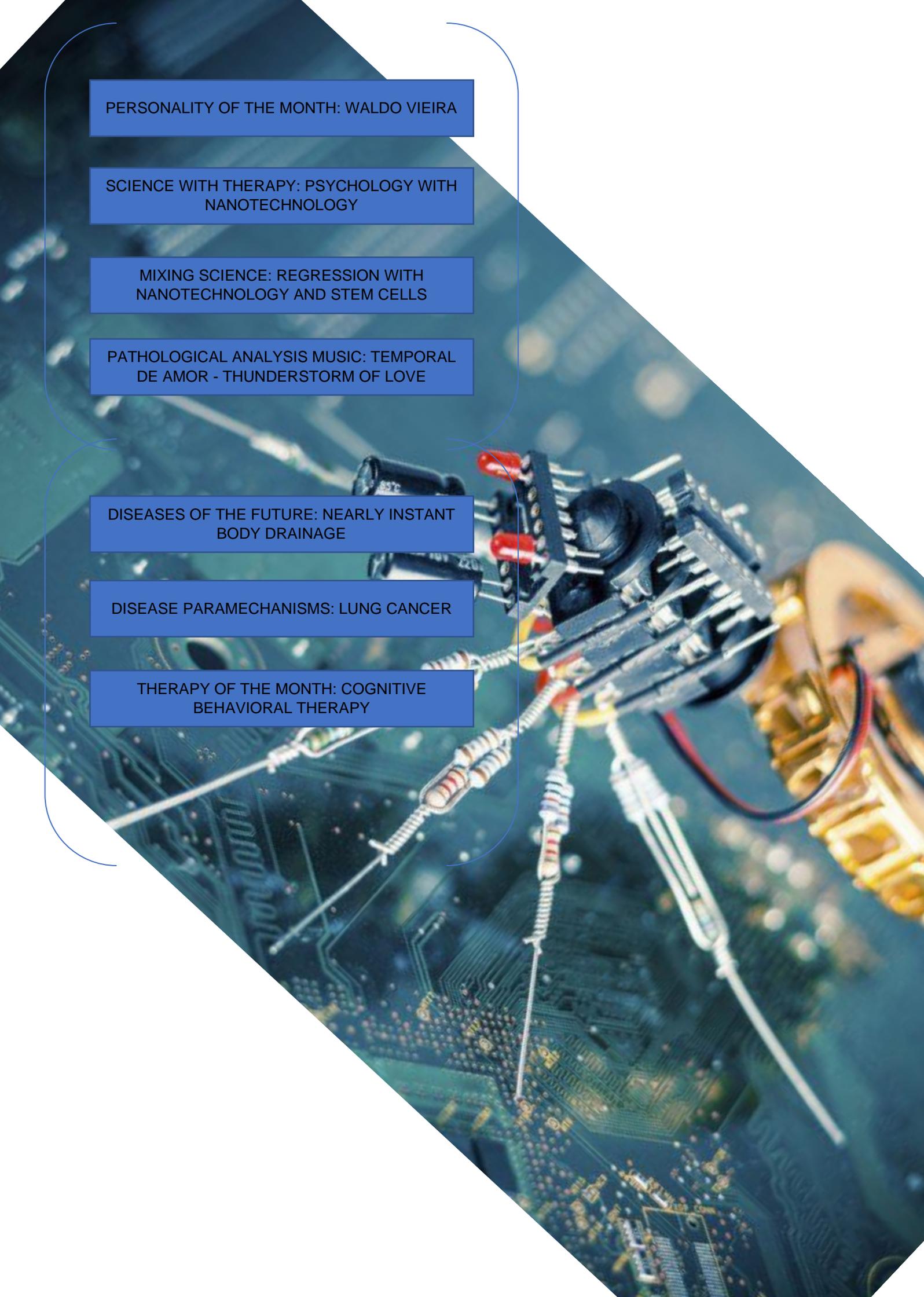
PROJECTIOLOGY - PROJECTIOLOGY AND PARAPSYCHOLOGY

KIND OF THOUGHT (PENSENE) - BIOMEDICINE

BOOK OF THE MONTH – MATE: BECOME THE MAN WOMEN WANT

ING AND ANG - MAN X WOMAN





PERSONALITY OF THE MONTH: WALDO VIEIRA

SCIENCE WITH THERAPY: PSYCHOLOGY WITH NANOTECHNOLOGY

MIXING SCIENCE: REGRESSION WITH NANOTECHNOLOGY AND STEM CELLS

PATHOLOGICAL ANALYSIS MUSIC: TEMPORAL DE AMOR - THUNDERSTORM OF LOVE

DISEASES OF THE FUTURE: NEARLY INSTANT BODY DRAINAGE

DISEASE PARAMECANISMS: LUNG CANCER

THERAPY OF THE MONTH: COGNITIVE BEHAVIORAL THERAPY

1 - FUTURE TECHNOLOGY - INSTANT LEARNING

This will be one of the technologies that will revolutionize planet earth. After that, any person on planet earth will be able to have higher education in a moment. After 4 sessions (30 days) the person will have the certification and postdoctoral certificate. It will be

made like a helmet with nano



Figure 1 Rights - Disney

waves, it will access the brain, it will access memories and with a pulse it will print 5 years of college. In advanced versions, you will be able to print entire lives in an instant, for example life copies of great doctors will be imprinted in anyone's memory in an instant.

2 - FOOD OF THE MONTH – EGG

Increase muscle mass: Eggs are rich in proteins, which provide energy for the body, in addition to having good amounts of iron and B vitamins, which improve oxygenation and the transport of nutrients in the body, promoting muscle mass gain.



Figure 2 Different Eggs

Help with weight loss: Because it is rich in protein, eggs help to prolong the feeling of satiety, reducing the desire to eat throughout the day and helping to lose weight. Eggs do not contain carbs and, therefore, are a great option to include in a low

carb diet, a style of eating where carbohydrate consumption is reduced, promoting weight loss.

Strengthen the immune system: Egg is rich in vitamin A, vitamin E and carotenoids, such as lutein and zeaxanthin, nutrients with antioxidant properties, which improve cell functions and strengthen the immune system, helping to prevent problems such as cancer and diseases. cardiovascular.

Lowering “bad” LDL cholesterol: Eggs are rich in lutein and zeaxanthin, two potent antioxidants that fight free radicals, preventing the oxidation of fat cells and lowering levels of “bad” LDL cholesterol in the blood. Therefore, the egg is considered an important ally in

the prevention of diseases such as atherosclerosis, heart attack and stroke.

Maintain skin health: Egg has great amounts of selenium and zinc, minerals that improve collagen absorption, keeping the



Figure 3 Different colours of eggs

skin firm and hydrated. In addition, the egg contains vitamin A, vitamin E and carotenoids, such as lutein and zeaxanthin, which act as antioxidants fighting excess free radicals and preventing the

formation of wrinkles and sagging.

Help fight anemia: By having good amounts of iron, vitamin B12 and folic acid, the egg helps in the fight against anemia, as these nutrients participate in the formation of hemoglobin, which is a component of red blood cells responsible for transporting oxygen in the organism.

Strengthen bones: Egg has good amounts of vitamin D and phosphorus, nutrients that improve calcium absorption and strengthen bones, preventing diseases such as osteoporosis and osteopenia, and preventing fractures.

Maintain mental health: Eggs are rich in choline, an essential vitamin that participates in the formation of acetylcholine, an important neurotransmitter for maintaining the proper functioning of the brain, improving memory and learning. In addition, the choline, present in the egg, can also help prevent neurodegenerative diseases such as Alzheimer's and Parkinson's disease.

Preserving eye health: Eggs contain huge amounts of lutein and zeaxanthin, which are powerful antioxidants that are

also present in the eyes and that fight free radicals, preventing situations such as cataracts and macular degeneration, a disease that reduces vision capacity.

Help fight depression: Eggs from hens raised outdoors and in the ground, or that feed on feed enriched with omega 3, usually contain more of this nutrient, which protects the cells of the central nervous system, improving the production of responsible substances for mood and well being, such as serotonin and dopamine and helping to treat depression.

Good for the brain: According to a study published in The American Journal of Clinical Nutrition, eggs improve brain performance and even lower the risk of dementia. This is due to the presence of a nutrient known as choline, present in the egg yolk. It is fundamental for the development of the brain region related to memory.

Gives more satiety: The presence of egg proteins is also beneficial for weight control. According to research, food contributes to satiety and helps reduce caloric intake after consumption. So, regularly adding eggs to your diet can help you lose weight.

It does not increase the risk of cardiovascular diseases: Several studies have already been carried out to prove whether the egg increases the risk of heart problems. A review of studies with more than 260,000 participants came to the conclusion that there is no association between egg intake and cardiovascular disease and stroke in healthy people. But it is worth mentioning that moderation is required.

It's good for people with diabetes: A study showed that consuming eggs regularly improves fasting blood glucose in people with type 2 diabetes. Therefore, consumption is recommended, as long as it is in moderation — ideally, not exceeding three eggs a week. Caution is necessary, as those with diabetes may be at greater risk of cardiovascular events such as acute myocardial infarction or stroke. But the egg does not need to be excluded from the diet.

Fights premature aging: Eggs are rich in antioxidant vitamins and minerals such as vitamins A and E, folic acid, zinc, magnesium and selenium. These substances reduce the action of free radicals, compounds responsible for premature aging. Thus,

consuming eggs daily helps to slow down the aging of cells, preventing diseases.

Good for the brain: Egg yolks are a source of choline, a B-complex vitamin that acts in the production of the neurotransmitter acetylcholine. In this way, it helps in brain functions such as memorization and cognition. In addition, it is fundamental in controlling heart rate, muscle activity and breathing.

Vitamin body: Vitamins are organic compounds that serve to make your whole body work. From replenishing tissues, to preventing diseases. That's why it's so important to have natural foods in your diet. Eggs are an excellent source of vitamins A, D, E and B12, which are generally good for the eyes, skin, bones and memory, respectively. Vitamins and minerals are contained in the yolk – which is nothing like a villain. You need vitamins that help your brain to function and successfully send synapses. For this, it is important to eat the egg yolk as well. "It contains choline, a B-complex vitamin, which is related to memory and has supplements that help with all the functioning". "High absorption proteins and lipids that make

important nutrients bioavailable are associated with preventing cell degeneration." According to research, people who eat eggs at the first meal of the day are satiated with fewer calories during the next 24 hours.

Balanced diet: It's not healthy, it has few benefits, but that fried egg is delicious! Unfortunately, because of the frying, the egg has an extra source of saturated fat – the one that raises bad cholesterol (LDL) because of the oil you add to fry it. "Also, you lose the antioxidants and some vitamins that are more sensitive to heat, like E." Prefer it cooked – you can put it in a salad and eat it cold – scrambled, omelettes or poached. The cholesterol contained in the egg is important for synthesizing hormones such as testosterone, which is a natural anabolic in the body, and vitamin D, which keeps cells healthy.

It can prevent diseases: Egg nutrients can also help to strengthen antibodies and prevent some diseases such as anemia and also heart disease. Doctors recommend eating this food in a moderate way and preferably cooked, because fried foods can contain more fat and cholesterol as we said at the beginning. For those who have

cholesterol problems, it is recommended to eat only the part of the egg white, which contains less fat. But if you don't have a problem with that, you can eat the whole egg. Even if you are working out and dieting, nutrients from both parts (yolk and white) are equally important for the body. It is also not recommended to eat raw eggs, due to the risk of contracting other diseases such as salmonellosis, caused by the salmonella bacteria, which remains alive in the eggs. So, nothing if you follow a tip from someone saying they consume raw egg in their diet, right? Cook the egg and the heat will eliminate bacteria from the food.

Offer Complete Protein: One egg has 6 grams of the stuff, with all nine "essential" amino acids, the building blocks of protein. This is important because they are the ones your body can't do on its own. Egg whites contain about half of this protein and only a small portion of the fat and cholesterol.

They can lower your triglycerides: Your doctor tests you for this, along with HDL and LDL. Lower triglycerides are better for your health. Eating eggs, especially those enriched with certain fatty

acids (such as omega-3), appears to reduce their levels.

Are rich in good fats: The amount of fat in eggs is always pointed out as a disadvantage of this food. But few consider the quality of these fats.

That's because most of the fat in an egg is made up of monounsaturated and polyunsaturated fats, which are considered good fats, essential for the proper functioning of metabolism. These fats make up 72% of your total fat.

In addition, eggs are rich in omega-3 fatty acids, whose health benefits are widely known, including for the brain, heart and immune system.

Against weak hair and nails, egg in them: For those who suffer from brittle hair and weak nails, it is advisable to add more eggs to their diet. This is because the food is rich in B vitamins and biotin, a coenzyme involved in the metabolism of proteins, carbohydrates and fats. Biotin is a nutrient that promotes healthy hair growth and fights brittle nails.

Good for the kidneys: The lecithin component is also very important for the normal development of

the brain and nervous system, especially during pregnancy and in early childhood. In adults it is also important for the transport and metabolism of fats and for the functioning of the kidneys. An egg contributes 55% of the Lecithin component needs of an adult and 100% of a child (1-3 years) to the diet.

Improve your Mood: Eggs, being rich in vitamin B12, can help improve your mood and keep stress at bay. They also contain other B vitamins such as vitamin B6 and folate that promote mental and emotional well-being. Egg yolks are a good source of lecithin, which works as a mood stabilizer. Eggs are also believed to help depression due to their high levels of the amino acid methionine and cysteine.

Cancer risk: A study by researchers at the University of Alberta suggests that eggs have antioxidant properties that tend to lower the risk of developing cancer and prevent cardiovascular disease. In particular, egg yolk contains two amino acids, tryptophan and tyrosine, which have antioxidant properties. However, frying or boiling eggs reduces these properties. A published study also indicates that consumption of

eggs can reduce the risk of breast cancer by 24%, as they contain choline.

Healthy Pregnancy: Eggs are considered a healthy food to eat during pregnancy. In addition to providing adequate nutrition, they help lower the risk of a child being born with mental health problems or chronic illnesses later in life. These benefits are primarily attributed to choline, a nutrient found in eggs, meats, beans, nuts and other protein-rich foods. Choline plays a critical role in fetal brain development and helps prevent birth defects. Two eggs provide about half the recommended daily amount for pregnant and lactating women. However, be careful not to eat raw or undercooked eggs.

Acne: Egg whites can be used in masks to absorb excess oil from the skin and shrink pores. They help to cure acne and reduce pimple scars and blemishes. For example, you can simply beat a quail egg white, spread it on your face, and cover it with pieces of tissue paper. Leave it on for about 10 to 20 minutes. Then remove the tissue paper and wash off the remaining substance with warm water.

15 Benefits of Quail Egg – What is it for and Properties (extra).

1. Improve vision: The huge amount of vitamin A present in quail egg helps protect vision due to the vitamin's antioxidant properties, which can help reduce problems such as macular degeneration (which involves the macula, the site of the eye near the retina) and prevent the development of cataracts, helping to improve vision.

2. Balancing Cholesterol Levels: There are many beneficial fatty acids present in quail egg, which support heart health by controlling cholesterol. HDL cholesterol (good cholesterol), for example, is present in more than 60% of the fat found in quail eggs. Despite having high levels of healthy fat and the great health benefits of quail egg, it is important to be careful if you already have cholesterol problems, as adding large amounts of quail egg to your diet can cause problems due to its percentage of saturated fat.

3. Stimulate growth: In the same way as regular chicken eggs, quail eggs also provide high amounts of protein in the diet. Protein is the main constituent of the body and essential in developmental processes. Thus, these proteins present in the egg are used by our organism to compose important constituents such as our cells, tissues, muscles, bones and blood vessels. Especially in children, the lysine present in the egg plays an important role in the development of bones. Thus, the protein present in eggs can stimulate a healthy and natural growth of the body.

4. Reduce blood pressure: The potassium present in quail eggs has a high capacity to promote blood pressure reduction. This mineral acts as a dilator in the vessels, which ultimately helps to

relieve tension and stress caused in the arteries and blood vessels when a person has high blood pressure. Importantly, the amount of potassium in quail eggs is higher than in chicken eggs. In addition to potassium, fatty acids such as docosahexaenoic acid can help regulate blood pressure in the body and reduce the risk of heart disease. The presence of vitamin E can also support these quail egg benefits.

5. Clean the body: Detoxification of the body is very important, since today we are exposed to an unhealthy environment with a lot of pollution in the water and air due to the presence of toxins, pollutants and heavy metals, for example. There are studies in the scientific literature that indicate that, by adding quail eggs to the diet, it is possible to eliminate toxins present in the bloodstream. This is because the amino acids in the quail egg are able to bind to the toxin and release these substances from the body. There is also evidence that they help reduce the size of bladder and kidney stones.

6. Prevent chronic diseases: Antioxidants such as vitamins C and A present in quail eggs help to neutralize free radicals and protect general health. Antioxidants are crucial substances in human health, as they constantly fight free radicals that cause various chronic diseases and are potential cancer-causers. Thus, the addition of quail eggs to the diet can help to avoid these diseases due to its antioxidant power. There are also scientific studies that report that the presence of the amino acid leucine in quail egg can help regulate blood sugar levels and keep insulin at proper levels, which makes it a great food to

prevent and treat diabetes, a disease chronic disease that affects millions of Brazilians.

7. Treat allergies: Quail eggs are rich in a protein called ovomucoid. This protein acts in the body as a natural antiallergic. So, if you are experiencing any symptoms of an allergic reaction such as nasal congestion for no reason, for example, you can enjoy these benefits of quail egg.

8. Improve metabolism: The B vitamins present in quail eggs result in enhanced metabolic activity in the whole body, including hormonal and enzymatic function, which have a great impact on the functioning of our metabolism. Several metabolic enzymes, for example, are "fed" by vitamins B6 and B12, playing crucial roles in energy production.

9. Increase energy: Minerals and micronutrients present in quail eggs, as well as the large amount of protein, make them a good source of energy and good mood. Especially in the morning, a breakfast rich in protein and nutrients is highly recommended for those who feel dependent on caffeine or another stimulating substance to regulate their energy levels in the morning. As it gives a lot of energy, there are benefits of quail egg also to improve performance in strength training, for example.

10. Improve Brain Function: The amino acids present in quail egg and the high protein level help to stimulate brain function and nourish the nervous system in the brain so that it maintains its proper functioning. Each serving of 5 eggs provides 119 mg of choline and 244 international units of vitamin A, which are important substances for the health of the cell membranes of

the brain. These substances protect brain cells from damage and are also capable of repairing damage.

11. Avoid anemia: Studies indicate that people who consume quail eggs regularly tend to have a lower risk of developing anemia. This is because they contain iron, which can help with the formation of red blood cells and prevent anemia. The amino acids present in quail eggs can also increase the level of hemoglobin inside red blood cells. The importance of this is in the role of hemoglobin in the body that act in the transport of oxygen and nutrients to all parts of the body.

12. Strengthen the immune system: The presence of amino acids such as lysine can bring quail

egg benefits such as promoting the production of antibodies and supporting the immune system response. Quail eggs have many amino acids and nutrients that help boost the immune system and aid in a faster recovery in general.

13. Maintain healthy skin and hair: Codrone eggs are an excellent source of protein and lysine, an amino acid that can promote collagen production in the body. Collagen is an essential protein to maintain the beauty and health of the skin, preventing sagging and wrinkles, for example. In addition, the amino acids present in quail eggs are great for promoting hair health and bringing benefits such as nutrition and healthy growth.

14. Gain lean mass: As well as being good for performance in training, quail egg is also good for the muscles. The high protein content can bring quail egg benefits to build muscle. In this way, it can also be adopted in the diet of those who seek muscle hypertrophy as a healthy source of protein along with an exercise plan suited to their goal.

15. Weight loss: Contrary to what many think, the fat content present in quail eggs does not make you fat, since they are good fats that are used by the body in a healthy way. When in a healthy eating plan, eggs can help you lose weight, as they are also rich in proteins, which help maintain lean mass.

3 - HEALING TECHNIQUE – CUTTING ETHERIC CORDS

The close relationships you have can often create an energetic connection between you and the other person, be it a relative, parent, ex-husband or boyfriend, child, close friend or co-worker, therapist, patient, boss, teacher, spouse. current partner.

There is an energetic soul-to-soul connection that is created at the beginning of every relationship. That means you have a lifetime connection to every person you have a strong emotional connection with.

These energy connections don't end when a relationship ends or



Figure 4 Etheric cords between people

when someone dies. In other words, there may be etheric cords from other lives attached to us, from every soul we know. These connections no longer serve and in fact can be an energetic exodus without your knowledge. There are many people who have an average of 4,000 to 5,000 etheric cords attached.

These connections are known as etheric cords, ropes, energy connections (they are like tubes, which can form between you and other people).

These tubes extend from one person's chakra to another's chakra, depending on the type of connection formed. Energy moves along these tubes, between the two people, sometimes flowing from one to the other and vice versa. Every human being can have many of these strings attached to themselves at some point.

Fixing cables can be created for the house, objects, country or a geographical location, for the car, for an addiction (alcohol, tobacco, gambling).

Ropes can be a temporary telepathic and energetic connection between two people, which usually doesn't last long and dissipates in a few days or even hours.

There can be spiritual cords, karmic cords, emotional cords, mental cords, sex cords, and many other cords, with other people living or dead.

There are strings of fear, guilt, control, jealousy, desire or need, envy, worry, fear of loneliness, and all sorts of negative emotions.

Ropes created out of fear are the hardest to cut. They need to be cut several times. Every time you return to a place/situation where you felt fear or worry or any of the negative emotions, you form new threads.

Unfortunately, this means that other people can gain access to your energy field (unconsciously, of course). If the other person is going through difficult times, they can draw energy for their own

needs, leaving you feeling tired and empty.

Strings can also form in a deeply intimate relationship, when one partner believes they are dependent on the other, that they cannot act otherwise, as in emotionally abusive relationships. Beliefs that create strings come from unmet needs and deep emotional patterns. So, people who were narcissistic, whether in childhood or in romantic relationships (or both), often seem to go through life attracting the same kind of people.

Emptying the cords of energy that bind an abusive narcissist is a must. Not only will the psychic ties with the narcissist be severed, but the spiritual remnants he has gathered from various partners will also be erased, which he then spreads to you when you share intimate moments with him. This can cause negative energy to be drawn into your life.

In addition to etheric cords, you may be energetically limited by past covenants and curses. Many times in your past lives you have made a covenant, or a promise, to another soul or organization, to a church. These covenants can be in

the form of contracts, vows, which are kept in the Akashic Records.

Even if no one has actually cursed you, if you believed in a previous life that was cursed, like the energy of a creed, this is usually in the akashic records inscribed as a curse.

Both past-life covenants and curses can affect life today. But you can also permanently remove them from the Akashic records.

Those who have seen the etheric cords (which are like a kind of energy and which we can also see in meditation, for example) describe them as having a dark color. The "solder" itself can be just a thin cable, or it can be strong and can be as thick as several ropes, which literally shows your attachment, mental, emotional, sexual or all at once.

The strings act to send and receive psychic energy between our chakras and the other person. The more energy we send out, the bigger the strings, and this is normal in any relationship. However, when we want to let someone go or we want to free ourselves, it is recommended to cut these ropes.

We form emotional cords every day. Some are healthy, some are not. There are unconscious energy connections. Health-damaging cables have the ability to drain energy. Once the strings are cut, you are free to connect with those who matter to you in a comfortable and independent way. Releasing cords that are not useful provides instant healing.

Therefore, every person you have had an emotional experience with is continually connected to you through an etheric (invisible) cord.

If the meeting or relationship is a loving one, the cords are a continuous source of healing energy that cannot be broken. But if the experience was negative, it is possible to receive through these "strings", daily, a

constant dose of toxic energy, anger, fear, weakness, etc. This energy feels heavy and oppressive, keeping you stuck in negative patterns, negative thoughts, and various emotional disturbances.

The cords when cut stop acting on the person. As a result, many things change and projects come to fruition faster.

4 - PROJECIOLOGY – PROJECTIOLOGY AND PARAPSYCHOLOGY

Definition. Parapsychology (Greek: para, beyond, alongside; psyché, soul; logos, treatise, study): branch of psychology addressing behavior that is still not capable of being described or explained in terms of known



Figure 5 Father Quevedo, scholar of parapsychology

physical principles, and which has an assured and irreversible role in humankind's evolution or, in other words, that which transcends psychology. Synonymy: bio-information; biopsychics; biopsychism;

biopsychoneuroenergetics; biosophy; cosmosophy; hyperpsychics; metapsychics; metapsychism; metapsychology; nomothetical psychology; paraneuropsychology; paranormalism; paranormology; paraphysics; parapsychics; parapsychism; parapsychobiophysics; parapsychologism; psilogy; psiology (Carrol B. Nash); psionics; psychic research; psychobioenergetics (Soviet term); psychobiophysics; psychoenergetics; psychotronics (Czech term); science of the paranormal; scientific spiritism; transcendent science; ultraphany (Italian term). Term. The term "parapsychology" was coined in 1889 by Max

Dessoir – a German psychologist and parapsychic researcher. Psi-gamma. Projectiology, or



Figure 6 Pedro Antonio Grisa - Specialist and scholar of parapsychology

projective parapsychology, a subdiscipline of conscientiology regarding its related phenomena, is derived from the phenomenological framework of human parapsychology in the study of subjective phenomena (psi-gamma).

Discoincidentiology.

Parapsychology can be divided by separating those phenomena

regarded as being pure paranormal phenomena into: those that are produced when the intraphysical consciousness' vehicles of manifestation are coincident (they present a unified body, holosoma); and those produced when the intraphysical consciousness' vehicles of manifestation are out of the condition of coincidence (discoincidence). Manifestations. Thus, we can see that a number of so-called pure paranormal occurrences fall within the scope of coincidentiology and others lie within discoincidentiology, namely projectiology. Nevertheless, in practice, the phenomena intermingle in their manifestations stemming either from one condition or another, constantly and intricately alternating and mixing themselves. Accreditation. Parapsychology was recognized as a science and admitted (with 165 votes in favor and 30 votes against) as a member science to the American Association for the Advancement of Science (A.A.A.S.) on December 30, 1969. Affiliation. The A.A.A.S., an international society founded in 1957, based in New York, NY, brings together approximately 200 researchers of all fields, from 25 countries. It officially

accepted, as one of its new divisions, the affiliation or accreditation of the Parapsychological Association (P.A.) – a prestigious association, the membership of which includes the most eminent parapsychologists in the world. Subdivision. This was equivalent to accepting parapsychology as being a sector of science, with the same rights as other areas. Courses. There is nothing that cannot be exhaustively researched. Research continues. Laboratories. There are currently 129 scientific parapsychology courses or laboratories in operation, spread throughout the planet in various institutions. Institutions. The following are some of these institutions: Augusto Mota Integrated Colleges, Rio de Janeiro, Brazil (post-graduate course in parapsychology); Duke University, Durham, North Carolina, U.S.A.; University of Edinburgh, Scotland; University of Freiburg, Breisgau, Germany; Long Island University, Greenvale, U.S.A.; University of California, Santa Barbara, California, U.S.A.; Utrecht University, Netherlands; Biopsychic Sciences College at Paraná, Curitiba, Paraná, Brazil. Facts. The number of facts observed at the beginning of the

era of modern science – which has existed for only 4 centuries – was so small that it was not worth dividing it into different sciences. The number of facts later grew to the point that specialization became more and more indispensable. In the current Internet age, the tendency is to continue to grow. Consensus. In a considerable number of sciences, it is rare that a consensus is reached on any concept. All unanimity indicates ignorance. Resistance. There is also a resistance, as part of the intraphysical consciousness' nature, towards modifying our concept of the world. This occurs with the author, with the reader, and with scientists in general. Theories. Innovative theories are only accepted by new generations, or when one or two generations of researchers have already passed through desoma. Factors. This seems to be due not only to arteriosclerosis, senility, dementia or Alzheimer's disease, but also to considerable influencing human factors that are understandable, to a point, in this pathological intraphysical society in which we live, which is much more of a hospital than a school. The following are 7 examples: 1. Preconceptions. Scientific preconceptions that are

very well disguised by self-corruption. 2. Status. Social status (prestige in a small group, political behavior of a mega-ego). 3. Corporatism. Professional or corporatist interests (lobbyism). 4. Money. Subservience to economic power or slavery to money. 5. Seated-on-the-fence. Personal complacency or a seated-on-the-fence attitude. 6. Washing. Brainwashing (abdominal brain). 7. Repressions. The absence of derepression. Research. Some time ago, an editor of *New Scientist*, a most prestigious scientific magazine, performed a research project in order to prove that the scientific community opposed the existence of parapsychological phenomena. The result was precisely the contrary. About 75% of those polled said they felt that these phenomena had been proven or were in the process of being proven. Scientists. The most surprising result of this research was that 40% of the scientists

interviewed declared that they accepted the reality of parapsychological phenomena because they had personally experienced them. Interests. It is ironic and regrettable that the same human interests which limit the development of parapsychic research will be responsible for its inevitable and inescapable development. This with bellicose objectives in view, such as espionage and frank political domination of consciousnesses by superpower nations who are in constant conflict in all areas, including so-called psychic warfare, consciencial warfare or psychotronic warfare, in the field of consciousness technology. Sciences. It is important to stress once again that projectiology relates to other sciences and, due to many factors, requires interdisciplinary or universalistic approaches. Growth. In the case of projectiology, we see, for the first time, that a specific research area within parapsychology requires its independent

establishment in order that science as a whole grows as one (see *The Essential Conscientiology*). Analysis. In the description and analysis of the occurrences of projectiology, only parapsychology (psychoenergetics in Soviet Russia and psychotronics in Czechoslovakia), has greater authority and sufficient technical competence for ponderable applications, making the participation of the latter in this field irrecusable and irreplaceable. Russia. The Russian Academy of Sciences (the former Soviet Union) officially confirmed the paranormal powers of the sensitive Djuna Davitashvili who was tested in its Physiology Institute on August 26, 1987. Called the D phenomenon (D refers to the first letter of the parapsychic woman's name), it is the ability of an individual to heat other bodies and cure illnesses with infrared irradiation (bioenergy) emitted from human hands.

5 - CONSCIENTIOLOGY - ANTI CONSCIENTIOLOGICAL SPECIALTY

Definology. Conscientiological anti-specialty is the quality, condition or state of the conscin

contrary to the experience of the evolutionary principles of any of the basic specialties of conscientiology, a useful

instrument for the evaluation or diagnosis of conscientiometrics. Etymology. The prefix anti derives from the Greek language, anti,



Figure 7 Debate site in conscientiology

"against, against, in opposition to". It appeared in the 16th century. The term specialty comes from the Latin language, specialitas, "distinguishing quality, specialty". It appeared in 1535. The word conscience also derives from the Latin language, conscientia, "knowledge of something common to many people; knowledge; consciousness; intimate sense", and this from the verb conscire, "to have knowledge of". It appeared in the 13th century. The compositional element logia comes from the Greek language, logos, "Science; Art; treated; full

exposure; systematic treatment of 1 theme". Factology: the conscientiological antispecialty; anti - assistance; the anti-volunteer; anti - communicology; anticonscientiometry; anticonscientiotherapy; the anticocosmos ethicology; anti - evolutiology; the anti-evolutionary routine; anti - experimentology; antigroupkarmology; the anti-mentalsomatic; anti - infocommunicology; anti - vexology; antiproexology; the antiproexis act; the antipsychosomatic; antirexology; the antisomatic; antisexosomatic;

antisubhumanity; anti - zooconviviality; the tantrum; the improbity; the self-intrusion; the groupkarmic interprion; the sophistry; stinginess; eunuchism; worldliness; food deviations; the alienation. Paraphatology: anti - despertology; anti - macrosomatology; antiparaphenomenology; antiparaphysiology; antiparapedagogiology; antiparaperceptiology; antiparasociology; antiparatechnology; anti - projectiology; antiseriexology. Example: conscientiological mini-antispecialty = the condition of

the adult's chronicified
consciential basement;
conscientiological
maxiantispecialty = the
indifferent condition of the
incomplexis on the part of the
conscin. IN POSITIONING

AGAINST SOME ADVANCED
SUBFIELD OF CONSCIENTIOLOGY,
CONSCIN IN GENERAL IDENTIFIES
MANY OTHER IDIOSYNCRASIES
AGAINST NEOIDEAS AND
VERPONS OF PERSONAL
MEGANEOPHOBIA.

Questionology. Are you an
antagonistic person entirely
convinced of the evolutionary
principles of some
conscientiological specialty? Does
this involve other neoideas? Is it
worth reversing this situation?

6 - BOOK OF THE MONTH – MATE: BECOME THE MAN WOMEN WANT

Don't let the name of this book fool you, in fact this book is a treatise on how men should behave and how to use human evolution to make them more recognized by partners who want to get closer. It helped me a lot, I learned a lot about how the

female mind works and what

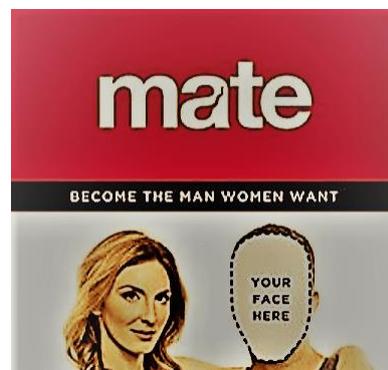


Figure 8 Partial cut of the book

they value or not. It is also very good for women, as they can teach their partners how to behave (on a positive side and in a way that is healthier and easier for him) helping the couple to be happier.

7 - ING AND ANG - MAN X WOMAN

PHYSIOLOGICAL DIFFERENCES

Girls develop right side of brain faster than boys: leads to talking, vocabulary, pronunciation, reading earlier, better memory. Boys develop left side faster than girls: visual-spatial-logical skills, perceptual skills, better at math, problem solving, building and figuring out puzzles. Girls more interested in toys with faces than boys are; play with stuffed

animals and dolls more; boys drawn to blocks or anything that can be manipulated. Women use both hemispheres of brain; corpus callosum thicker in women.

SOCIAL INFLUENCES

Studies of infants: Both men and women speak louder to boys than girl infants; they are softer and express more "cooing" with girls. Boys are rarely told they are

sweet, pretty, little doll; boys are told they are a pumpkin head or "Hey big guy". Boys handled more physically and robustly than girls, bounced around more. Girls are caressed and stroked more than boys. Up to age 2, mothers tend to talk to and look at their daughters significantly more than they do with their sons, and make more eye contact with the daughters as well. Mothers show a wider range of emotional

response to girls than boys. When girls showed anger, mothers faces showed greater facial disapproval than when boys showed anger. May influence why girls grow up smiling more, more social, and better able to interpret emotions than boys. Fathers use "Command terms" with boys more than girls; and more than mothers gave.

Developmental Differences Between Boys and Girls: Nursery rhymes, books and cartoons perpetuate stereotypes, which often promote damsel in distress, frumpy housewife, helpless senior citizen, sexy heroine and swooning cheerleader. Girls use more terms of endearment than boys. Boys get away with more aggressive antisocial behavior in school and home than girls. Girls who act as tomboys are accepted; boys who act like girls are severely reprimanded ("don't cry" "Don't be a sissy"). Girls tend to talk about other people; secrets in order to bond friendships; and school, wishes and needs. Boys talk about things and activities. What they are doing and who is best at the activity. Teenage girls talk about boys, clothes and weight. Teenage boys talk about sports, mechanics, and function of things. Age 12-18: biggest event for girls: have a boyfriend;

Age 12-18: boys are equally interested in the following: sex, cars and sports. This carries into adulthood when women talk about relationships, people, diet, clothing, physical appearance. Men talk about sports, work, money, cars, news, politics, and the mechanics of things.

VALUES AND SELF ESTEEM AS ADULTS

MEN: A man's sense of self is defined through his ability to achieve results, through success and accomplishment. Achieve goals and prove his competence and feel good about himself. To feel good about himself, men must achieve goals by themselves. For men, doing things by themselves is a symbol of efficiency, power and competence. In general, men are more interested in objects and things rather than people and feelings. Men rarely talk about their problems unless they are seeking "expert" advice; asking for help when you can do something yourself is a sign of weakness. Men are more aggressive than women; more combative and territorial. Men's self esteem is more career-related. Men feel devastated by failure and financial setbacks; they tend to obsess about money

much more than women; Men hate to ask for information because it shows they are a failure.

WOMEN: Women value love, communication, beauty and relationships. A woman's sense of self is defined through their feelings and the quality of their relationships. They spend much time supporting, nurturing and helping each other. They experience fulfillment through sharing and relating. Personal expression, in clothes and feelings, is very important. Communication is important. Talking, sharing and relating is how a woman feels good about herself. For women, offering help is not a sign of weakness but a sign of strength; it is a sign of caring to give support. Women are very concerned about issues relating to physical attractiveness; changes in this area can be as difficult for women as changes in a man's financial status. When men are preoccupied with work or money, women interpret it as rejection.

OTHER DIFFERENCES: Men are more logical, analytical, rational. Women are more intuitive, holistic, creative, integrative. Men have a much more difficult time relating to their own feelings, and

may feel very threatened by the expression of feelings in their presence. This may cause them to react by withdrawing or attempting to control the situation through a display of control and/or power. Men are actually more vulnerable and dependent on relationships than women are and are more devastated by the ending, since they have fewer friends and sources of emotional support. Men are more at ease with their own angry feelings than women are. Women are in touch with a much wider range of feelings than men, and the intensity of those feelings is usually much greater for women than men. As a result of this, many men perceive that women's feelings appear to change quickly; men may find this irrational and difficult to understand. Men tend to be more functional in approaching problem-solving; women are aesthetically-oriented in addition to being functional. Women tend to be much more sensitive to sounds and smells than men are; and women as such tend to place a greater emphasis on "atmosphere".

CONFLICTS WHICH ARISE DUE TO BASIC DIFFERENCES BETWEEN MEN AND WOMEN: The most frequent complaint men have

about women: Women are always trying to change them. The most frequent complaint women have about men: Men don't listen. Women want empathy, yet men usually offer solutions. When a woman tries to change or improve or correct or give advice to a man, men hear that they are being told that they aren't competent or don't know how to do something or that they can't do something on their own. Men often feel responsible or to blame for women's problems. Men always assume women want advice and solutions to problems, that that is the best way to be helpful and to show love; women often just want someone to sincerely listen to them. Housework: men avoid it, try to get others to do it at all costs, feel demeaned by doing it. For women, cleanliness of house is a manifestation of warm, homey nest. Men and women have different thresholds for cleanliness and dirt. Men often try to change a woman's mood when she is upset by offering solutions to her problems, which she interprets as discounting and invalidating her feelings. Women try to change men's behavior by offering unsolicited advice and criticism and becoming a home-improvement committee.

HOW TO WORK WITH THESE DIFFERENCES: When women are upset, it is not the time to offer solutions, though that may be appropriate at a future time when she is calmed down. A man appreciates advice and criticism when it is requested. Men want to make improvements when they feel they are being approached as a solution to a problem rather than as the problem itself. Men have great needs for status and independence (emphasis on separate and different); women have needs for intimacy and connection (emphasis on close and same). Women need to receive caring, understanding, respect, devotion, validation, and reassurance. Women are motivated when they feel special or cherished. Men need to receive trust, acceptance, appreciation, admiration, approval, encouragement. Men are motivated when they feel needed. A man's deepest fear is that he is not good enough or not competent enough, though he may never express this.

SUMMARY: There are major, significant differences between men and women. The differences are different, NOT better or worse. Do not judge the differences. Do not try to change the differences. Do not try to

make them go away. These are generalizations! Individual differences exist; we all have some of these qualities. To get

along, you MUST accept, expect and respect these differences. Be sure to remember these differences when communicating

about anything important, when expressing care and concern, and when solving conflicts.

8 - CASES OF HEALING - DEPRESSION IN THE PUPPY

Patient: Little puppy that the owner had lost all will to help it, because he took its friend to all places and nobody could help it. **This technique costs \$40,000. If you would like to receive more information, send a message to engbrandl@yahoo.com.br and ask about interdimensional treatment. Only 5% of a session is being shown here, it was done that way so as not to tire the reader.**

Energy attacks from past life that is doing: depression in the puppy will be healed. Rites of passage from past life that is doing: depression in the puppy will be healed. Negative synchronicity from past life that is doing: depression in the puppy will be healed. Catastrophe from past life that is doing: depression in the puppy will be healed. Work with the propheter from past life that is doing: depression in the puppy will be healed. Crime exhausted made 638 incarnations ago will be undone to solve the problem: solitude. Putative offense made 147 incarnations ago will be undone to solve the problem: solitude. Main crimes and accessories made 192 incarnations ago will be undone to solve the problem: solitude. Related crimes made 319 incarnations ago will be undone to solve the problem: solitude. Instant crimes, permanent and permanent effects snapshots made 331 incarnations ago will be undone to solve the problem: solitude. Energy will be donated to

the Uncles of your direct male ascendants from 35^o generation. Energy will be donated to the Uncles of your Great Grandparents. Energy will be donated to Aunts from your direct male ascendants from 20^o generation. Energy will be donated to Uncles of your Parents. Energy will be donated to the Nephews of your direct male ascendants from 18^o generation. Energy will be donated to your direct male ascendants from 14^o generation. Energy will be donated to your direct male ascendants from 21^o generation. It will be located in the akhasic records: Mentoring process and derivatives with others then strengthened to help cure the current illness linked to the sickness: depression in the puppy will be cut the etheric threads connected. Lives as humanoids linked to the sickness: depression in the puppy will be cut the etheric threads connected. It will be located in the akhasic records: Ascension process then strengthened to help cure the current illness linked to the sickness: depression in the puppy will

be cut the etheric threads connected. Diseases caused by attacks on the subtle bodies linked to the sickness: depression in the puppy will be cut the etheric threads connected. Diseases of extraterrestrial origin linked to the sickness: depression in the puppy will be cut the etheric threads connected. Diseases left to delay the medium linked to the sickness: depression in the puppy will be cut the etheric threads connected. Umbraline wills are undone. Pieces of yours in possession in the horologium constellation that help to cure this disease will be rescued. Rescued 3 of your personas stolen during this incarnation. Problems in this life and other lives with difficulty in concentration that increase the chance of the disease will be treated. Erased memories of lives as Pleadians will be remembered. Pieces of yours in possession in the Lyra constellation that help to cure this disease will be rescued. Pieces of yours in possession in the constellation of equuleus that help to cure this disease will be rescued.

Feelings like: "sarcastic" that can surface in this situation will be healed. Excretory System, cured. Secondary problems that generate situations against being adventurous will be dealt with. Erased memories

of lives in versions on other planets will be remembered. Feelings like: "cheating" that may surface in this situation will be cured. Problems in this life and other lives with suicidal tendencies that increase the chance

of the disease will be treated. Immune System is Boosted to Fight Infections. Feelings like: "treacherous" that can surface because of this trauma will be treated.

9 - PERSONALITY OF THE MONTH: WALDO VIEIRA

Waldo Vieira who was a great partner of Chico Xavier, having written alongside him works of

to realize his son's giftedness. Waldo Vieira's sister, Ruth Rocha Siqueira, tells us that he was very active and that in all the games or

Paranhos, who tells us that his great-grandmother liked to play the guitar for the two of them, always playing a very melancholy,



Figure 9 Waldo Vieira and the books he defends so much

great importance for the Spiritist doctrine. Born in Monte Carmelo – MG in 1932. At the age of 4 he was already literate and from a very early age he had experiences considered paranormal. To deal with this, his parents resorted to the Spiritist doctrine, helping him

studies he did as a child, Waldo was the most willing. He always liked to know more, studied and dedicated himself beyond what was necessary for his age. Creativity was also one of his characteristics. We also have an account of his nephew, Jarbas

sad song. And this lady's action, without her noticing, made spirits from the cemetery that she had a few blocks from her house all come to the meeting to listen to the music. Waldo Vieira, still 5 years old at the time, could see all these disembodied spirits coming

to them. Until one day he didn't let the lady play anymore and explained to her why she shouldn't play such songs. Waldo lived in Uberaba from 13 to 26 years old, where he dedicated himself to psychography and to the studies of extra-sensory phenomena. In his youth, he settled in Uberaba, Minas Gerais, where he graduated in Medicine and Dentistry. While still a student (1955) he personally met the medium Chico Xavier and in the 1950s and 60s they developed mediumship work together at the spiritist center "Comunhão Espírita Cristã", which they founded in Uberaba. Later, Waldo Vieira disconnected from Spiritism to dedicate himself, in a free and scientific way, to parapsychic research. This study carried out in adolescence served as the basis for Projectiology, which studies the experience of out-of-body consciousness and other parapsychic phenomena. He founded many institutions still in his student phase, in the Faculty of Dentistry, then in the Faculty of Medicine, he created a series of medical institutions, clinics and hospitals. In 1966 Waldo moves to Rio de Janeiro where he dedicates himself to increasing and organizing all his research. In 1979, he released the

book *Projections of Consciousness: Diary of Experiences Outside the Human Body*, attracting the attention of those interested in Projectiology, and in 1981 he co-founded the "Centre for Continuous Consciousness", dedicated to the research of out-of-body experiences and altered states of consciousness. In 1986, he released the treatise *Projectiology : Panorama of the Experiences of Consciousness Outside the Human Body*, with the first edition of 5000 copies, distributed free of charge among researchers and libraries in the country and abroad. The treaty consists of an exhaustive research (more than 1900 bibliographic references from 37 countries) that endorses the serious and scientific study on the subject. This treatise also underpins the studies of Projectiology and Conscientiology and is considered today the main Brazilian work on projections of consciousness. Over the years Vieira has also built up a considerable library on the projection of consciousness and related issues, including thousands of popular and scientific references on the subject. Later, conscientiology was consolidated as a neoscience with the creation of the CEAEC

campus and other conscientiocentric institutions in Foz do Iguaçu, Paraná. And in 1986, he launched the first treatise on Projectiology, an overview of the experiences of consciousness outside the human body. It took around 19 years to write this work, and more than 5,000 volumes were delivered free of charge to scholars of Spiritism. With that he founded, The International Institute of Projectiology and Conscientiology (IIPC) is a pacifist, secular, universalist, non-profit, non-doctrinal, independent institution of Education and Scientific Research, which stands out for its excellence in courses and technical publications. scientific studies on the sciences of Projectiology and Conscientiology. According to reports, Waldo has always been a tireless worker, always defending free, ethical and responsible thinking, among his qualities, consistency, creativity and exhaustive dedication stand out. He himself tells us that he would be just another one of Zephyr's lives on earth, an extraphysical consciousness that would have reincarnated in many other periods on earth to assist in the evolution of humanity. In January 2000, he took up residence at

Campus CEAC where he wrote his most audacious project, the Encyclopedia of Conscientiology. In parallel with the production of the Encyclopedia, he published 5 scientific treatises: Homo sapiens reurbanisatus (2003), Homo sapiens pacificus (2007), Dictionary of Conscientiology Arguments (2011), Dictionary of

Neologisms of Conscientiology (2014) and the Lexicon of Orthopensatas (2014). In the early hours of June 26, 2015, while recovering from surgery and a stroke, he suffered a stroke that was considered irreversible. chosen by himself. At no time in his life did Waldo act with an air of superiority wanting to make

other people inferior, despite his great talent and inexplicable intelligence. He showed them his talents and valued all the ideas these people had. Nor did he admit that anyone idolized him. And that was his life, followed by charity, study and dedication.

Learn more at: https://www.youtube.com/watch?v=VSIH-mR_5zU

10 - MEDICATION OF THE MONTH – LEVOTHYROXINE



Figure 10 One of the bestselling medicines in the world.

Levothyroxine (a thyroid hormone) should not be used alone or along with other treatments to treat obesity or cause weight loss. Levothyroxine may cause serious or life-threatening problems when given in large doses, especially when taken with amphetamines such as amphetamine (Adzenys,

Dyanavel XR, Evekeo), dextroamphetamine (Dexedrine), and methamphetamine (Desoxyn). Tell your doctor if you have any of the following symptoms while you are taking levothyroxine: chest pain, rapid or irregular heartbeat or pulse, uncontrollable shaking of a part of the body, nervousness, anxiety,

irritability, difficulty falling asleep or staying asleep, shortness of breath, or excessive sweating. Talk to your doctor about the potential risks associated with this medication. Why is this medication prescribed? Levothyroxine is used to treat hypothyroidism (condition where the thyroid gland does not

produce enough thyroid hormone). It is also used with surgery and radioactive iodine therapy to treat thyroid cancer. Levothyroxine is in a class of medications called hormones. It works by replacing thyroid hormone that is normally produced by the body. Without thyroid hormone, your body cannot function properly, which may result in poor growth, slow speech, lack of energy, excessive tiredness, constipation, weight gain, hair loss, dry, thick skin, increased sensitivity to cold, joint and muscle pain, heavy or irregular menstrual periods, and depression. When taken correctly, levothyroxine reverses these symptoms. How should this medicine be used? Levothyroxine comes as a tablet and a capsule to take by mouth. It usually is taken once a day on an empty stomach, 30 minutes to 1 hour before breakfast. Follow the directions on your prescription label carefully, and ask your doctor or pharmacist to explain any part you do not understand. Take levothyroxine exactly as directed. Do not take more or less of it or take it more often than prescribed by your doctor. Swallow capsules whole; do not chew or crush them. Do not remove the capsule from the

package until you are ready to take it. Take the tablets with a full glass of water as they may get stuck in your throat or cause choking or gagging. If you are giving levothyroxine to an infant, child, or adult who cannot swallow the tablet, crush and mix it in 1 to 2 teaspoons (5 to 10 mL) of water. Only mix the crushed tablets with water; do not mix it with food or soybean infant formula. Give this mixture by spoon or dropper right away. Do not store it for later use. Your doctor will probably start you on a low dose of levothyroxine and gradually increase your dose. Levothyroxine controls hypothyroidism but does not cure it. It may take several weeks before you notice a change in your symptoms. Continue to take levothyroxine even if you feel well. Do not stop taking levothyroxine without talking to your doctor. Other uses for this medicine This medication may be prescribed for other uses; ask your doctor or pharmacist for more information. What special precautions should I follow? Before taking levothyroxine, tell your doctor and pharmacist if you are allergic to levothyroxine, thyroid hormone, any other medications, or any of the ingredients in levothyroxine

tablets or capsules. Ask your pharmacist for a list of the ingredients. Tell your doctor and pharmacist what prescription and nonprescription medications, vitamins, nutritional supplements, and herbal products you are taking or plan to take. Be sure to mention any of the following or those listed in the IMPORTANT WARNING section: amiodarone (Nexterone, Pacerone); androgens such as nandrolone and testosterone (Androderm); certain antacids containing aluminum or magnesium (Maalox, Mylanta, others); anticoagulants ('blood thinners') such as heparin or warfarin (Coumadin, Jantoven); beta-blockers such as metoprolol (Lopressor), propranolol (Inderal, Innopran), or timolol; medications for cancer such as asparaginase, fluorouracil, and mitotane (Lysodren); carbamazepine (Carbatrol, Equetro, Tegretol, or Teril); clofibrate (Atromid); corticosteroids such as dexamethasone; medications for cough and cold symptoms or for weight loss; digoxin (Lanoxin); medications containing estrogen such as hormone replacement therapy or hormonal contraceptives (birth control pills, patches, rings, implants, or

injections); furosemide (Lasix); insulin or other medications to treat diabetes; maprotiline; mefenamic acid (Ponstel); methadone (Methadose); niacin; orlistat (Alli, Xenical); phenobarbital; phenytoin (Dilantin, Phenytek); proton pump inhibitors such as esomeprazole (Nexium), lansoprazole (Prevacid), and omeprazole (Prilosec); rifampin (Rifater, Rifamate, Rifadin); sertraline (Zoloft); simethicone (Phazyme, Gas X); sucralfate (Carafate); tamoxifen (Soltamox); tyrosine kinase inhibitors such as cabozantinib (Cometriq) or imatinib (Gleevac); and tricyclic antidepressants such as amitriptyline (Elavil). Many other medications may also interact with levothyroxine, so be sure to tell your doctor about all the medications you are taking, even those that do not appear on this list. Your doctor may need to change the doses of your medications or monitor you carefully for side effects. If you take calcium carbonate (Tums) or ferrous sulfate (iron supplement), take it at least 4 hours before or 4 hours after you take levothyroxine. If you take cholestyramine (Prevalite), colestivelam (Welchol), colestipol (Colestid), sevelamer (Renvela,

Renagel), or sodium polystyrene sulfonate (Kayexalate), take it at least 4 hours after you take levothyroxine. Tell your doctor if you have adrenal insufficiency (condition in which the adrenal glands do not produce enough of certain hormones needed for important body functions). Your doctor may tell you not to take levothyroxine. Tell your doctor if you have recently received radiation therapy or if you have or have ever had diabetes; hardening of the arteries (atherosclerosis); bleeding problems or anemia; porphyria (condition in which abnormal substances build up in the blood and cause problems with the skin or nervous system); osteoporosis (a condition in which the bones become thin and weak and break easily); pituitary gland (a small gland in the brain) disorders; any condition that makes it difficult for you to swallow; or kidney, heart, or liver disease. Tell your doctor if you are pregnant, plan to become pregnant or are breastfeeding. If you become pregnant while taking levothyroxine, call your doctor. If you have surgery, including dental surgery, tell the doctor or dentist that you are taking levothyroxine. What special dietary instructions should I

follow? Some foods and beverages, particularly those that contain soybeans, walnuts, and dietary fiber, may affect how levothyroxine works for you. Talk to your doctor before eating or drinking these foods. Talk to your doctor about eating grapefruit and drinking grapefruit juice while taking this medication. What should I do if I forget a dose? Take the missed dose as soon as you remember it. However, if it is almost time for the next dose, skip the missed dose and continue your regular dosing schedule. Do not take a double dose to make up for a missed one. What side effects can this medication cause? Levothyroxine may cause side effects. Tell your doctor if any of these symptoms are severe or do not go away: weight gain or loss headache vomiting diarrhea changes in appetite fever changes in menstrual cycle sensitivity to heat hair loss joint pain leg cramps. What should I know about storage and disposal of this medication? Keep this medication in the container it came in, tightly closed, and out of reach of children. Store it at room temperature and away from excess heat and moisture (not in the bathroom). It is important to keep all medication out of sight

and reach of children as many containers (such as weekly pill minders and those for eye drops, creams, patches, and inhalers) are not child-resistant and young children can open them easily. To protect young children from poisoning, always lock safety caps and immediately place the medication in a safe location – one that is up and away and out of their sight and reach. <http://www.upandaway.org>

Unneeded medications should be disposed of in special ways to ensure that pets, children, and other people cannot consume them. However, you should not flush this medication down the toilet. Instead, the best way to dispose of your medication is through a medicine take-back program. Talk to your pharmacist or contact your local garbage/recycling department to learn about take-back programs

in your community. In case of emergency/overdose In case of overdose, call the poison control helpline at 1-800-222-1222. Information is also available online at <https://www.poisonhelp.org/help>. If the victim has collapsed, had a seizure, has trouble breathing, or can't be awakened, immediately call emergency services at 911. Symptoms of overdose may include the following: chest pain rapid or irregular heartbeat or pulse uncontrollable shaking of a part of the body nervousness anxiety irritability difficulty falling asleep or staying asleep shortness of breath excessive sweating confusion loss of consciousness seizure What other information should I know? Keep all appointments with your doctor and the laboratory. Your doctor will order certain lab tests to

check your response to levothyroxine. Learn the brand name and generic name of your medication. Do not switch brands without talking to your doctor or pharmacist, as each brand of levothyroxine contains a slightly different amount of medication. Do not let anyone else take your medication. Ask your pharmacist any questions you have about refilling your prescription. It is important for you to keep a written list of all of the prescription and nonprescription (over-the-counter) medicines you are taking, as well as any products such as vitamins, minerals, or other dietary supplements. You should bring this list with you each time you visit a doctor or if you are admitted to a hospital. It is also important information to carry with you in case of emergencies.

11 - KIND OF THOUGHT (PENSENE) – BIOMEDICINE

Biomedicine works with research on diseases and ways to cure them to improve diagnosis and treatment. Like Medicine, it is also a course in the health area that is usually

highly sought after by



Figure 11 Biomedicine lab

students. Some subjects that make up the curriculum of the

course are Basic Microbiology, Comprehensive Training in Health, General Chemistry, Collective Health, Biochemistry, Mycology and Virology. Biomedicine has a very diversified field of activity, with more than 30 areas of

activity recognized by the Federal Council of Biomedicine (CFBM). These include Acupuncture, Environmental Analysis, Cytology, Genetics, Hematology and Public Health. As with any regulated activity, only professionals with a higher degree in the area and registration with the class council (the CFBM) can legally exercise the biomedical profession. The biomedical researches and studies microorganisms that cause diseases, in addition to seeking solutions that can prevent diseases from affecting the population. Below, understand more details about the activities carried out in the professional's day to day. develop vaccines Vaccines are medicines, usually subcutaneous, that protect people against many diseases that can be dangerous and even deadly. As they act directly on the body's immunity, they prevent you from getting sick. In order to reach this result, the biomedical doctor develops a series of research on the causative agent of the disease,

carrying out tests and experiments until the conclusion is reached as to why the use of this drug is effective. Want an example? A biomedical role in this matter is the fight against the new Coronavirus, which stopped the world in 2020. As people figure out what to do during the quarantine period, huge teams around the globe have pored over the virus to try to find not only the cure, but the preventive vaccine. Interpret clinical test results for diagnosis The results of laboratory tests are a very important parameter in the diagnosis of diseases. In the case of the biomedical doctor, he must evaluate, above all, the result of biological variation to verify the presence of viruses, bacteria and other microorganisms that are present in the patient's body. Likewise, it is their role to observe if there is any chemical imbalance in the samples collected from blood, urine, feces, saliva, which may indicate some pathology. Also, he performs biopsies to identify the presence of

cancerous tissues. With this, the role of the biomedical doctor in the interpretation of exams is of extreme responsibility to provide doctors with adequate information that can help them in the correct interpretation of the data and reach the correct diagnosis. Acting in the processes of fertilization and human reproduction Artificial fertilization or assisted reproduction is a vast field in Biomedicine, which makes many biomedical professionals have the opportunity to stand out in the best companies. The professional in this area is responsible for participating in the process of making pregnancy viable in women who are experiencing difficulties with natural methods. Specialization in embryology allows the biomedical to work from the collection and culture of materials to the process of in vitro fertilization. Among other actions, the biomedical embryologist: assesses the condition of eggs and semen; performs the separation of

materials in better conditions — such as more mobile sperm and mature eggs; do the spermogram; works on the conservation of these materials; freezes embryos, eggs and semen; participates in the intrauterine insemination team; assists patients, valuing good interpersonal communication, with information on the steps of the process and other guidelines. Handle substances and microorganisms for the industrialization of products

Industrial biotechnology is another area of Biomedicine. In it, the biomedical practitioner participates in traditional industrial processes (“bioprocessing”) and in the manufacture of bio-based products (such as fuels, chemicals and plastics) from renewable raw materials. He is responsible for analyzing, researching and manipulating microbes, microorganisms, enzymes and substances in commercial use. In most cases, the objective of their work is to

develop biotechnological tools that enable the industry to industrial manufacturing processes that are cleaner and better for the environment, with reduced costs. Industrial biotechnology is riding the wave of innovation in the agricultural and healthcare sectors. So when a person thinks like a biomedical man, he is thinking of ways to help humanity, how to use technologies to solve problems and generate great problem-solving opportunities.

12 - INCURABLE DISEASE: TETANUS

What is Tetanus? Tetanus is a serious bacterial disease that affects the neurological system, due to the toxin produced by the microorganism, messing with the regulation of the muscles so that they contract violently and spastically when provoked. Among other complications, it can even lead to death. Causes Tetanus is caused by the bacterium *Clostridium tetani*, which can

be found in soil, dust, and in animal feces. Tetanus infection begins when the spores of the transmitting bacteria enter the body through a wound or wound, where they release bacteria that spread through the bloodstream and produce a poison called tetanospasmin. Tetanus infection begins when the spores of the transmitting bacteria enter the body through a wound or wound, where they release bacteria

that spread through the bloodstream and produce a poison called tetanospasmin. This venom blocks neurological signals from the spine to the muscles, causing intense muscle spasms. The spasms can be so severe that they tear muscles or cause spinal fractures. Risk factors Some factors contribute to the development of tetanus. Look: Not having been vaccinated against tetanus or not having

had the second dose of the vaccine Being infected with another bacteria Having a wound or a wound on the skin, caused by some rusty and dirty

caused by loud sounds, physical touch, and sensitivity to light Fever Sweating Hypertension Accelerated heartbeat Seeking medical

the consultation to ask your questions too. The doctor will also ask you questions regarding your symptoms and medical history. Be prepared



Figure 12 Rusty nails can transmit tetanus

object, such as nails Swelling around the wound Tetanus Symptoms The time between infection and the first signs of symptoms is usually one to three weeks. The incubation period of the bacteria is, on average, seven to eight days. The main symptoms of tetanus are: Twitching and stiffness in the jaw Stiffness in the muscles of the neck and back of the neck Stiffness in the muscles of the abdomen Body spasms that cause pain and last for several minutes, usually

help See a doctor for a tetanus shot if you haven't already, or for a second dose. If you have not been vaccinated against the disease and are injured by a rusty object, regardless of the size of the wound, seek medical help immediately. Do not wait for symptoms to appear, as they usually take a few days to appear. at the medical appointment Describe in detail all of your symptoms to your doctor so that he or she can make the correct diagnosis. Take advantage of

and answer them with objectivity and clarity. See some examples: When did your symptoms start? Are the symptoms you experience occasional or frequent? How severe are your symptoms? Have you received the tetanus vaccine? Have you had the second dose of the tetanus vaccine? Have you recently cut yourself with a rusty object such as a nail? tetanus diagnosis The doctor will be able to confirm the diagnosis through a physical

examination, in which he will look for signs of spasms and stiffness in the muscles of the body, and also through a questionnaire regarding the medical history of the patient and his family. Laboratory tests are usually not necessary to make the diagnosis of tetanus. Unless they are done to rule out meningitis, rabies, strychnine poisoning and other illnesses with similar symptoms. tetanus treatment There is no cure for tetanus, so treatment will focus on healing the wound where the spores of the bacteria have entered and using medication to treat symptoms. In addition to properly cleaning the injured area, to avoid more serious complications, the doctor may prescribe some medications that can bring relief and comfort to the patient, such as antitoxins, antibiotics, sedatives and other pain relievers. Breathing support with oxygen, a breathing tube, and a breathing machine may be needed. Tetanus Medications The most commonly used drugs for the treatment of tetanus are:

diazepam Only a doctor can tell you which drug is most suitable for you, as well as the correct dosage and duration of treatment. Always follow your doctor's instructions to the letter and NEVER self-medicate. Do not stop using the drug without consulting a doctor first, and if you take it more than once or in much larger amounts than prescribed, follow the instructions on the package insert. Is tetanus curable? Without treatment, one in four people infected with tetanus die. The mortality rate of newborns with untreated tetanus is even higher. With proper treatment, less than 10% of infected patients die. Wounds on the head or face appear to be more dangerous than wounds on other parts of the body as they are more exposed. If the individual survives the acute phase of the illness, recovery is usually complete. Uncorrected episodes of hypoxia (lack of oxygen) caused by muscle spasms in the throat can cause irreversible brain damage. It is important to be aware that

taking the vaccine does not make the individual eternally immune to the disease. A few years after the first dose, the second dose must be taken. Living together / prognosis Taking good care of the wound, avoiding contact with external agents and other bacteria, is an essential measure to ensure recovery. Cover it with a bandage and try to keep it clean. Strictly follow the medical guidelines and take the medication correctly, especially antibiotics. possible complications Possible complications from tetanus include: Bones brittle and brittle, because of the spasms muscle dysfunction Breathing problems, pneumonia and heart failure can result from the spasms caused by the infection and lack of oxygen to the brain. These problems pose great risks to the patient's life. Prevention The best way to prevent tetanus is through vaccination. After the first dose, you must wait ten years before taking the second. Taking both doses of the tetanus vaccine is essential to ensure immunization.

Thoroughly cleaning all wounds and removing dead or heavily damaged tissue (with debris) when appropriate can reduce the risk of developing tetanus. If you have been injured

outdoors or in a way where contact with the ground is likely, contact your doctor about the possible risk of tetanus. Many people believe that injuries caused by rusty needles are the most serious.

This is only true if the needle is dirty and rusty, as is often the case. It is the dirt on the needle, not the rust, that carries the risk of tetanus.

13 - SCIENCE WITH THERAPY: PSYCHOLOGY WITH NANOTECHNOLOGY

Psychology with nanotechnology will help people a lot. Nanotechnology will be able to access somatizations in the body and brain of diseases or traumas that are still bringing mental pathologies to the person.

Accessing these traumas inserted in the flesh will undo the energetic condensations in these places. Meanwhile, the psychology professional will use trauma healing techniques to leverage this process. Physically nanotechnology will

help to undo the somatizations of years of drama, trauma and abuse, and mentally psychology will heal the emotional and intellectual blockage.

13.1 PSYCHOLOGY (MENTAL) + NANOTECHNOLOGY (PHYSICAL) + SPIRITUAL SUPPORTERS (SPIRITUAL)

The process is the same as above, with the addition of the role of a helper who will direct healings in the person's spiritual area. Thus, the person after such a session achieves mental, physical and spiritual healing.

13.2 PSYCHOLOGY (MENTAL) + NANOTECHNOLOGY (PHYSICAL) + SPIRITUAL SUPPORTERS (SPIRITUAL) + PEDAGOGUE (LEARNING)

Even in previous processes where the focus is on learning, the pedagogue inserts the person's learning needs into the process and the rest is made up of professionals in psychology, nanotechnology and helpers. And it still has the additive, that nanotechnology can also act on the entire nervous system, increasing the learning capabilities already unlocked.

13.3 PSYCHOLOGY (MENTAL) + NANOTECHNOLOGY (PHYSICAL) + SPIRITUAL SUPPORTERS (SPIRITUAL) + PEDAGOGIST (LEARNING) + PARAPSYCHOLOGY (PARABILITIES)

Along with the whole process, if the person still cannot achieve the goals due to lack of focus, the parapsychologist can put the patient under hypnosis so that he can enjoy this treatment better.

13.4 PSYCHOLOGY (MENTAL) + NANOTECHNOLOGY (PHYSICAL) + SPIRITUAL SUPPORTERS (SPIRITUAL) + PEDAGOGIST (Learning) + PARAPSYCHOLOGY (PARABILITIES) + FUTURE LIFE THERAPIST (FUTUROLOGIST)

After all the above processes, the future life therapist will be able to program/organize/plan skills in this life to achieve goals in future lives, which could be the next life, 10 lives in the future or even 100 or 1000 lives in the future.

14 - MIXING SCIENCE: REGRESSION WITH NANOTECHNOLOGY AND STEM CELLS

Regression is the technique where the person goes back to a past time to solve the problem, together with nanotechnology, people can go back to the past and when something bad is found nanorobots can keep the state better in the body so that the cure is in the best way, it is as if the nano-robots copied the best physical and physiological state

and simulated the moment of trauma in a past life or similar, so at that time there will be no somatization, or somatization of lesser content, with the stem cells things get even more serious, the person is put to live a terrible memory of the step, the nanorobots maintain the physiology better for the moment and the stem cells are inserted

together with the trauma of the past, when the person is called back it goes through the following centuries that were hit by trauma and in this process the stem cells learn everything that happened and in this life they develop in order to fight everything generating a unique, lasting and perfect cure.

15 - PATHOLOGICAL ANALYSIS MUSIC: TEMPORAL DE AMOR - THUNDERSTORM OF LOVE

The music in Portuguese and English:

| | |
|--|--|
| <p>Chuva no telhado Vento no portão E eu aqui nesta solidão Fecho a janela 'Tá frio o nosso quarto E eu aqui, sem o teu abraço Doido pra sentir seu cheiro Doido pra sentir seu gosto Louco pra beijar seu beijo Matar a saudade E esse meu desejo Vê se não demora muito Coração 'tá reclamando Traga logo o teu carinho 'To aqui sozinho 'To te esperando Quando você chegar Tira essa roupa molhada Quero ser a toalha E o seu cobertor Quando você chegar Manda a saudade sair Vai trovejar, vai cair Um temporal de amor Doido pra sentir seu cheiro Doido pra sentir seu gosto Louco pra beijar seu beijo Matar a saudade E esse meu desejo Vê se não demora muito Coração 'tá reclamando Traga logo o teu carinho 'To aqui sozinho 'To te esperando Quando você chegar Tira essa roupa molhada Quero ser a toalha E o seu cobertor Quando você chegar Manda a saudade sair Vai trovejar, vai cair Um temporal de amor Quando você chegar Tira essa roupa molhada Quero ser a toalha E o seu cobertor Quando você chegar Manda a saudade sair Vai trovejar, vai cair Um temporal de amor</p> | <p>Rain on the roof Wind at the gate And i here in this loneliness Close the window 'Our room is cold And i here, without your hug Crazy to smell your scent Crazy to taste you Crazy to kiss your kiss Kill the longing And this my wish See if it doesn't take too long Heart 'is complaining Bring your affection soon 'I'm here alone 'I'm waiting for you When you arrive Take off those wet clothes I want to be the towel And your blanket When you arrive Send the longing out It will thunder, it will fall A storm of love Crazy to smell your scent Crazy to taste you Crazy to kiss your kiss Kill the longing And this my wish See if it doesn't take too long Heart 'is complaining Bring your affection soon 'I'm here alone 'I'm waiting for you When you arrive Take off those wet clothes I want to be the towel And your blanket When you arrive Send the longing out It will thunder, it will fall A storm of love When you arrive Take off those wet clothes I want to be the towel And your blanket When you arrive Send the longing out It will thunder, it will fall A storm of love</p> |
|--|--|

Analysis:

Rain on the roof

"belonging to the planet earth process, could be focused on studying or doing something focused on helping planet earth"

Wind at the gate

"same situation as above"

And i here in this loneliness

"totally selfish in their own problems"

Close the window

"attitude to protect yourself from the situation of the planetary process of the moment"

'Our room is cold

"it makes it clear that the place where he is is someone else's, but at the same time it denotes that this person is no longer with him, due to the word loneliness above"

And i here, without your hug

"remembering good times he had, according to conscientiology, he does not miss the person, but the energies that the person carried with him" demonstrates that life at the moment is worse and that he wants to balance it with the presence of the person who has already left, shows who cannot walk alone"

Crazy to smell your scent

"babies recognize their mothers by smell, here again he hasn't grown up and lives connected to primary sensations"

Crazy to taste you

"same situation as above, but with an aggravating factor he talks about feeling her taste, do women have taste? He created a new sensation to feed the primary sensations he has."

Crazy to kiss your kiss

"here we can see colloquialism mixed with the above situations, it denotes incompetence in mastering one's own language and acerbic sexual need."

Kill the longing

"he is creating a being of his feeling, he does not think about strategies, but about physical attitudes against homesickness, one of the worst being the chosen one – killing"

And this my wish

"again denotes sexuality towards the girl"

See if it doesn't take too long

"he appears to be waiting for her with no patience"

Heart 'is complaining

"it carries what a good part of humanity carries, the symbolism that love is in the heart, where love can be divided into several parts, 3 of which are explained here:

1 – love between couples is the brain releasing substances to keep the species existing;

2 – a son's love for his mother is belonging or better programming in the subconscious that everyone has to take care of the children, because if he didn't love, not even logic would survive the incompetence in which we live;

3 – pathological love, is when the person 'needs the other to live, clearly it is a pathology created at some point in the person's existence, and it may even be before planet earth,

Bring your affection soon

"he lacks affection, it could be problems with his mother or trauma"

'I'm here alone

"it makes it clear that he can come and that something will happen his way, he is alone, no one will see"

'I'm waiting for you

"show her the effort he's making, which is waiting"

When you arrive

"he believes it will come"

Take off those wet clothes

"and it will arrive on that day, if it was not agreed, it suffers from self-delusion"

I want to be the towel

"he demonstrates sexuality again as he will rub himself against her"

And your blanket

"sexuality, he wants to warm her up"

When you arrive

Send the longing out

"he puts in her the ability to heal and improve her life"

It will thunder, it will fall

"start by talking about the weather situation"

A storm of love

It ends in sexuality, he can call it love, but from the previous words it is sexual where he receives affection and when he talks about giving something it is sexual."

Crazy to smell your scent

"make it clear that you don't have self-control, you want to smell it"

Crazy to taste you

"make it clear you don't have self-control, you want her taste"

Crazy to kiss your kiss

"make it clear that you have no self-control, you want to kiss her kiss"

Kill the longing

"speaks of death of a feeling of hers, but it only happens because of her"

And this my wish
"speak in desire before her, carnal"
See if it doesn't take too long
"is complaining"
Heart 'is complaining
"outsourced negative feelings to an organ of the body"
Bring your affection soon
"he wants to feel good about her giving him attention"

'I'm here alone
"*already commented"
'I'm waiting for you
"*already commented"
When you arrive
"*already commented"
Take off those wet clothes
"*already commented"
I want to be the towel
"*already commented"
And your blanket
"*already commented"
When you arrive

"*already commented"
Send the longing out
"*already commented"
It will thunder, it will fall
"*already commented"
A storm of love
When you arrive
"*already commented"
Take off those wet clothes
"*already commented"
I want to be the towel
"*already commented"
And your blanket
"*already commented"
When you arrive
"*already commented"
Send the longing out
"*already commented"
It will thunder, it will fall
"*already commented"
A storm of love
"*already commented"

You can watch this song here: <https://www.youtube.com/watch?v=O7q6aepVnLU>

16 - DISEASES OF THE FUTURE: NEARLY INSTANT BODY DRAINAGE

In this type of disease, the human body's immune system simply doesn't know what's going on and starts killing every cell in the human body. So, when hospitalized, the person loses body mass to the point where all the organs are in critical size. People who can withstand this process end up weighing less than 20 kg, with only the brain and skin intact, where the rest has been expelled by the immune system. This happens when several recessive genes are activated and a domino event occurs causing several variables that never had strength when activated at the same time generate a quick, tragic, unusual and non-human death. Normally in 7 days the person loses 60 to 80% of the body weight.

17 - DISEASE PARAMECANISMS: LUNG CANCER

The process of this disease seen in a para-holistic-medical-spiritual way: Abduction: Beings take the person for tests and the result or side effect of the tests is this disease. Obsession: Obsessive beings place equipment in the subtle body in the part of the lung where the disease eventually

appears. Past Lives: The person had an illness or tragically died in the lung area, as the subtle bodies take time in some cases to recover, it is normal for an illness to appear in this place because the etheric double is not perfect. Karma: A person needs to go through a problem process for

learning to occur (any kind can be), simply before incarnation that person chose that kind of illness. Combined: The person before incarnating leaves combined with the karmic group of that person that if he leaves the combined evolutionary programming, this disease will

appear to make an analysis of life be done, even if in a forced way. DNA: The person carries this problem in the DNA, where it can be seen in ancestors or past lives, this person has always had cancer for centuries, but it is less and less severe and with time it will disappear. Remembering that this process is normally programmed and is the result of a larger problem already solved. Environment: Exposure to air pollution, recurrent lung infections, chronic obstructive pulmonary disease (pulmonary emphysema and chronic bronchitis), genetic factors and a family history of lung cancer favor the development of this type of cancer. advanced age: most cases affect people between 50 and 70 years old. The risk of lung cancer and death from the disease increases the greater the intensity of exposure to smoking. Lung cancer mortality among smokers is about 15 times higher than among people who have never smoked, while among ex-smokers it is about four times

higher. Other risk factors are: occupational exposure to chemical or physical agents (asbestos, silica, uranium, chromium, alkylating agents, radon, among others), drinking water containing arsenic, high doses of beta-carotene supplements in smokers and ex-smokers. Rural workers, construction, tannery, metal smelting, industries (aluminium, rubber, cement and gypsum, printing and paper, textile, metallurgy, heavy metal, nuclear, electronics, aircraft, medical devices, glass; fertilizers), mining, battery factory, pigment production, hydraulic firefighters, plumbers, electricians, auto mechanics, miners, painters, welders, glass blowers, insulated work on ships and docks, leather care, cleaning and maintenance may be at increased risk of disease development. If the worker exposed to any of the agents or exposure circumstances mentioned above also smokes, the risk of cancer may be much greater, due to the synergistic

effect between smoking and some chemical and/or physical agents. Genetic changes related to lung cancer are usually acquired during life. Acquired mutations in lung cells are often due to environmental factors, such as cancer-causing chemicals in tobacco smoke. But some genetic changes can be due to random events that sometimes happen inside a cell, without an external cause. Genetic alterations of this life: Acquired alterations in certain genes, such as the RB1 or p16 tumor suppressor genes and the K-RAS or ALK oncogenes, are considered important in the development of non-small cell lung cancer. Changes in the TP53 tumor suppressor gene and chromosome 3 can be seen in non-small cell lung cancer and small cell lung cancer. Not all lung cancers share the same genetic changes, so there are undoubtedly changes in other genes that have yet to be discovered.

18 - THERAPY OF THE MONTH: COGNITIVE BEHAVIORAL THERAPY

Cognitive behavioural therapy (CBT) Cognitive behavioural therapy (CBT) is a talking therapy that can help you manage your

problems by changing the way you think and behave. It's most commonly used to treat anxiety and depression, but can be useful

for other mental and physical health problems. How CBT works: CBT is based on the concept that your thoughts, feelings, physical

sensations and actions are interconnected, and that negative thoughts and feelings can trap you in a vicious cycle. CBT aims to help you deal with overwhelming problems in a more positive way by breaking them down into smaller parts. You're shown how to change these negative patterns to improve the way you feel. Unlike some other talking treatments, CBT deals with your current problems, rather than focusing on issues from your past. It looks for practical ways to improve your state of mind on a daily basis. Uses for CBT: CBT has been shown to be an effective way of treating a number of different mental health conditions. In addition to depression or anxiety disorders, CBT can also help people with: bipolar disorder; borderline personality disorder; eating disorders – such as anorexia and bulimia; obsessive compulsive disorder (OCD); panic disorder; phobias: post-traumatic stress disorder (PTSD); psychosis; schizophrenia; sleep problems – such as insomnia; problems related to alcohol misuse. CBT is also sometimes used to treat people with long-term health conditions, such as: irritable bowel syndrome (IBS), chronic fatigue syndrome (CFS),

fibromyalgia. Although CBT cannot cure the physical symptoms of these conditions, it can help people cope better with their symptoms. What happens during CBT sessions: If CBT is recommended, you'll usually have a session with a therapist once a week or once every 2 weeks. The course of treatment usually lasts for between 5 and 20 sessions, with each session lasting 30 to 60 minutes. During the sessions, you'll work with your therapist to break down your problems into their separate parts, such as your thoughts, physical feelings and actions. You and your therapist will analyse these areas to work out if they're unrealistic or unhelpful, and to determine the effect they have on each other and on you. Your therapist will then be able to help you work out how to change unhelpful thoughts and behaviours. After working out what you can change, your therapist will ask you to practise these changes in your daily life and you'll discuss how you got on during the next session. The eventual aim of therapy is to teach you to apply the skills you have learnt during treatment to your daily life. This should help you manage your problems and stop them having a negative

impact on your life, even after your course of treatment finishes. Pros and cons of CBT: Cognitive behavioural therapy (CBT) can be as effective as medicine in treating some mental health problems, but it may not be successful or suitable for everyone. Some of the advantages of CBT include: it may be helpful in cases where medicine alone has not worked; it can be completed in a relatively short period of time compared with other talking therapies; the highly structured nature of CBT means it can be provided in different formats, including in groups, self-help books and online; it teaches you useful and practical strategies that can be used in everyday life, even after the treatment has finished. Some of the disadvantages of CBT to consider include: you need to commit yourself to the process to get the most from it – a therapist can help and advise you, but they need your cooperation; attending regular CBT sessions and carrying out any extra work between sessions can take up a lot of your time; it may not be suitable for people with more complex mental health needs or learning difficulties, as it requires structured sessions; it involves confronting your emotions and

anxieties – you may experience initial periods where you're anxious or emotionally uncomfortable; it focuses on the person's capacity to change themselves (their thoughts,

feelings and behaviours) – this does not address any wider problems in systems or families that often have a significant impact on someone's health and wellbeing. Some critics also argue

that because CBT only addresses current problems and focuses on specific issues, it does not address the possible underlying causes of mental health conditions, such as an unhappy childhood.

19 - HEALTH LAW - RIGHTS OF PERSONS WITH DISABILITIES - ONU

The States Parties to the present Convention, a) Recalling the principles enshrined in the Charter of the United Nations, which recognize the inherent dignity and worth and the equal and inalienable rights of all members of the human family as the foundation of freedom, justice and peace in the world, b) Recognizing that the United Nations, in the Universal Declaration of Human Rights and in the International Covenants on Human Rights, have proclaimed and agreed that everyone is entitled to all the rights and freedoms set forth therein, without distinction of any kind, c) Reaffirming the universality, indivisibility, interdependence and interrelationship of all human rights and fundamental freedoms, as well as the need to ensure that all persons with disabilities fully exercise them, without discrimination, d) Recalling the International Covenant of Economic, Social and

Cultural Rights, the International Covenant on Civil and Political Rights, the International Convention on the Elimination of All Forms of Racial Discrimination, the Convention on the Elimination of All Forms of Discrimination against Women, the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment, the Convention on the Rights of the Child and the Convention International Convention on the Protection of the Rights of All Migrant Workers and Members of Their Families, e) Recognizing that disability is an evolving concept and that disability results from the interaction between persons with disabilities and the barriers due to attitudes and the environment that prevent the full and effective participation of these people in society on an equal basis with others, f) Recognizing the importance of the principles and policy guidelines contained in the

World Program of Action for Persons with Disabilities and the Norms on the Equalization of Opportunities for Persons with Disabilities, to influence the promotion, formulation and evaluation of policies, plans, programs actions and actions at national, regional and international levels to enable greater equality of opportunity for persons with disabilities, g) Emphasizing the importance of bringing disability issues to the center of societal concerns as an integral part of relevant sustainable development strategies, h) Recognizing also that discrimination against any person, on grounds of disability, constitutes a violation of the inherent dignity and worth of the human being, i) Further recognizing the diversity of persons with disabilities, j) Recognizing the need to promote and protect the human rights of all persons with disabilities, including those who require

greater support, k) Concerned that, despite these various instruments and commitments, persons with disabilities continue to face barriers to their participation as equal members of society and violations of their human rights in all parts of the world, l) Recognizing the importance of international cooperation to improve the living conditions of persons with disabilities in all countries, particularly developing countries, m) Recognizing the valuable existing and potential contributions of persons with disabilities to the common well-being and diversity of their communities, and that the promotion of the full exercise by persons with disabilities of their human rights and fundamental freedoms and of their full participation in society will result in the strengthening of their sense of belonging to society and in the significant advancement of the human, social and economic development of society, as well as in the eradication of poverty, n) Recognizing the importance for persons with disabilities of their individual autonomy and independence, including the freedom to make their own choices, o) Considering that persons with disabilities must

have the opportunity to participate actively in program and policy decisions, including those and concern them directly, p) Concerned about the difficult situations faced by persons with disabilities who are subject to multiple or aggravated forms of discrimination because of race, color, sex, language, religion, political or other opinions, national origin, ethnic, native or social, property, birth, age or other status, q) Recognizing that women and girls with disabilities are often exposed to greater risks, both at home and outside, of experiencing violence, injury or abuse, neglect or treatment r) Recognizing that children with disabilities should fully enjoy all human rights and fundamental freedoms on an equal basis with other children and recalling the obligations undertaken to that end by States Parties to the Convention on Rights of the Child, s) Stressing the need to incorporate a gender perspective into efforts to promote the full exercise of human rights and fundamental freedoms on the part of persons with disabilities, t) Highlighting the fact that the majority of persons with disabilities live in conditions of poverty and, in this regard,

recognizing the critical need to address the negative impact of poverty on persons with disabilities, u) Bearing in mind that conditions of peace and security based on full respect for the purposes and principles enshrined in the Charter of the United Nations and the observance of human rights instruments are indispensable for the full protection of persons with disabilities, particularly during armed conflicts and foreign occupation, v) Recognizing the importance of accessibility to physical, social, economic and cultural means, health, education and information and communication, to enable persons with disabilities to fully enjoy all human rights and fundamental freedoms, w) Aware that the person has duties towards other people and towards the community to which it belongs and which, therefore, has the responsibility to strive for the promotion and observance of the rights recognized in the International Charter of Human Rights, x) Convinced that the family is the natural and fundamental nucleus of society and has the right to receive the protection of society and the State and that persons with disabilities and their families

should receive the protection and assistance necessary to enable families to contribute to the full and equitable exercise of the rights of persons with disabilities,

y) Convinced that a comprehensive and comprehensive international convention to promote and protect the rights and dignity of persons with disabilities will make a significant contribution to redressing the profound social disadvantages of persons with disabilities and to promoting their participation in economic, social and cultural life on an equal basis. opportunities in both developing and developed countries, Agreed as follows: Article 1 Prop The purpose of the present Convention is to promote, protect and ensure the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities and to promote respect for their inherent dignity. Persons with disabilities are those who have long-term physical, mental, intellectual or sensory impairments which, in interaction with various barriers, may impede their full and effective participation in society on an equal basis with others. Article 2 Definitions For the purposes of this Convention:

“Communication” includes languages, text display, braille, tactile communication, large characters, accessible multimedia devices, as well as plain, written and oral language, auditory systems and the means of digitized voice and augmentative and alternative modes, means and formats of communication, including accessible information and communication technology; “Language” encompasses spoken and sign languages and other forms of non-spoken communication; “Discrimination on grounds of disability” means any differentiation, exclusion or restriction based on disability, with the purpose or effect of preventing or impairing the recognition, enjoyment or exercise, on an equal basis with others, of all human rights and fundamental freedoms in the political, economic, social, cultural, civil or any other spheres. Covers all forms of discrimination, including refusal of reasonable accommodation; “Reasonable accommodation” means the necessary and appropriate modifications and adjustments that do not entail a disproportionate or undue burden, when required in each case, in order to ensure that persons with disabilities can enjoy

or exercise, on an equal basis with others, all human rights and fundamental freedoms; “Universal design” means the conception of products, environments, programs and services to be used, to the greatest extent possible, by all people, without the need for adaptation or specific design. The “universal design” will not exclude technical aids for specific groups of people with disabilities, when necessary. Article 3 General principles The principles of the present Convention are: a) Respect for inherent dignity, individual autonomy, including the freedom to make one's own choices, and the independence of persons; b) Non-discrimination; c) Full and effective participation and inclusion in society; d) Respect for difference and acceptance of people with disabilities as part of human diversity and humanity; e) Equal opportunities; f) Accessibility; g) Equality between men and women; h) Respect for the development of capacities of children with disabilities and for the right of children with disabilities to preserve their identity. Article 4 General Obligations 1. States Parties undertake to ensure and promote the full exercise of all human

rights and fundamental freedoms by all persons with disabilities, without any discrimination based on their disability. To this end, the States Parties undertake to: a) Adopt all legislative, administrative and other measures necessary for the realization of the rights recognized in this Convention; b) Adopt all necessary measures, including legislation, to modify or repeal existing laws, regulations, customs and practices that constitute discrimination against persons with disabilities; c) Take into account, in all programs and policies, the protection and promotion of the human rights of persons with disabilities; d) Refrain from participating in any act or practice inconsistent with this Convention and ensure that public authorities and institutions act in accordance with this Convention; e) Take all appropriate measures to eliminate discrimination based on disability by any person, organization or private enterprise; f) Carry out or promote research and development of products, services, equipment and installations of universal design, as defined in Article 2 of this Convention, which require the least possible adaptation and

whose cost is the least possible, intended to meet the specific needs of people with disabilities, to promote their availability and use and to promote universal design when developing norms and guidelines; g) Carry out or promote research and development, as well as the availability and use of new technologies, including information and communication technologies, technical aids for locomotion, devices and assistive technologies, suitable for persons with disabilities, giving priority to technologies affordable; h) Provide accessible information to persons with disabilities regarding technical mobility aids, assistive devices and technologies, including new technologies as well as other forms of assistance, support services and facilities; i) Promote training in relation to the rights recognized by this Convention of professionals and teams working with people with disabilities, in order to improve the provision of assistance and services guaranteed by these rights. 2. With regard to economic, social and cultural rights, each State Party undertakes to take measures, as far as available resources allow and, when necessary, within the framework

of international cooperation, in order to progressively ensure the full exercise of these rights, without prejudice to the obligations contained in this Convention which are immediately applicable under international law. 3. In the development and implementation of legislation and policies to implement this Convention and in other decision-making processes relating to persons with disabilities, States Parties shall consult closely and actively involve persons with disabilities, including children with disabilities, through their representative organizations. 4. Nothing in this Convention shall affect any provisions more conducive to the realization of the rights of persons with disabilities, which may be contained in the legislation of the State Party or in international law in force for that State. There shall be no restriction or derogation of any of the human rights and fundamental freedoms recognized or in force in any State Party to this Convention, in accordance with laws, conventions, regulations or customs, on the ground that this Convention does not recognize such rights and freedoms. or that recognizes them to a lesser

extent. 5. The provisions of this Convention apply, without limitation or exception, to all the constituent units of the Federal States. Article 5 Equality and Non-Discrimination 1. States Parties recognize that all persons are equal before and under the law and that they are entitled, without any discrimination, to the equal protection and equal benefit of the law. 2. States Parties shall prohibit any discrimination based on disability and shall guarantee persons with disabilities equal and effective legal protection against discrimination on any grounds. 3. In order to promote equality and eliminate discrimination, States Parties shall take all appropriate measures to ensure that reasonable accommodation is provided. 4. Under the terms of this Convention, specific measures that are necessary to accelerate or achieve effective equality for persons with disabilities shall not be considered discriminatory. Article 6 Women with Disabilities 1. States Parties recognize that women and girls with disabilities are subject to multiple forms of discrimination and, therefore, shall take measures to ensure that women and girls with disabilities have the full and equal

exercise of all human rights and fundamental freedoms. 2. States Parties shall take all appropriate measures to ensure the full development, advancement and empowerment of women, with a view to guaranteeing them the exercise and enjoyment of the human rights and fundamental freedoms established in this Convention. Article 7 Children with Disabilities 1. States Parties shall take all necessary measures to ensure that children with disabilities enjoy all human rights and fundamental freedoms on an equal basis with other children. 2. In all actions concerning children with disabilities, the best interests of the child will be given paramount consideration. 3. States Parties shall ensure that children with disabilities have the right to express their views freely on all matters affecting them, have their views duly valued in accordance with their age and maturity, on an equal basis with other children, and receive care appropriate to their disability and age, so that they can exercise this right. Article 8 Raising Awareness 1. States Parties undertake to take immediate, effective and appropriate measures to: a) Raise awareness in all of society, including families, of the conditions of persons with

disabilities and to promote respect for the rights and dignity of persons with disabilities deficiency; b) Combat stereotypes, prejudices and harmful practices in relation to people with disabilities, including those related to sex and age, in all areas of life; c) Promote awareness of the capabilities and contributions of persons with disabilities. 2. Measures to this end include: a) Launching and continuing effective public awareness campaigns aimed at: i) Favoring a receptive attitude towards the rights of persons with disabilities; ii) Promote positive perception and greater social awareness in relation to people with disabilities; iii) Promote recognition of the skills, merits and capabilities of persons with disabilities and their contribution to the workplace and the labor market; b) Foster at all levels of the education system, including all children from an early age, an attitude of respect for the rights of persons with disabilities; c) Encourage all media to portray persons with disabilities in a manner consistent with the purpose of this Convention; d) Promote training programs on raising awareness of people with disabilities and the rights of people with disabilities. Article 9

Accessibility 1. In order to enable persons with disabilities to live independently and participate fully in all aspects of life, States Parties shall take appropriate measures to ensure access to persons with disabilities, on an equal basis with others, people, the physical environment, transport, information and communication, including information and communication systems and technologies, as well as other services and facilities open to the public or for public use, both in urban and rural areas. These measures, which will include the identification and elimination of obstacles and barriers to accessibility, will apply, among others, to: a) Buildings, highways, means of transport and other indoor and outdoor facilities, including schools, residences, medical facilities and of work; b) Information, communications and other services, including electronic services and emergency services.

2. States Parties shall also take appropriate measures to: a) Develop, promulgate and monitor the implementation of minimum standards and guidelines for the accessibility of facilities and services open to the public or for public use; b) Ensuring that private entities that offer facilities

and services open to the public or for public use take into account all aspects related to accessibility for people with disabilities; c) Provide training to all actors involved in relation to accessibility issues faced by people with disabilities; d) Provide buildings and other facilities open to the public or for public use with signage in Braille and in formats that are easy to read and understand; e) Offer forms of human or animal assistance and the services of mediators, including guides, readers and professional sign language interpreters, to facilitate access to buildings and other facilities open to the public or for public use; f) Promote other appropriate forms of assistance and support for persons with disabilities, in order to ensure that these persons have access to information; g) Promote access for people with disabilities to new information and communication systems and technologies, including the Internet; h) To promote, from an early stage, the design, development, production and dissemination of information and communication systems and technologies, so that these systems and technologies become accessible at minimum cost.

Article 10 Right to life States Parties reaffirm that every human

being has the inherent right to life and shall take all necessary measures to ensure the effective exercise of this right by persons with disabilities, on an equal basis with others.

Article 11 Risk situations and humanitarian emergencies In accordance with their obligations under international law, including international humanitarian law and international human rights law, States Parties shall take all necessary measures to ensure the protection and safety of persons with disabilities who are in situations of risk, including situations of armed conflict, humanitarian emergencies and the occurrence of natural disasters.

Article 12 Equal recognition before the law

1. States Parties reaffirm that persons with disabilities have the right to be recognized everywhere as persons before the law.
2. States Parties shall recognize that persons with disabilities enjoy legal capacity on an equal basis with others in all aspects of life.
3. States Parties shall take appropriate measures to provide access for persons with disabilities to the support they need in the exercise of their legal capacity.
4. States Parties shall ensure that all measures relating to the exercise of legal capacity

include appropriate and effective safeguards to prevent abuses, in accordance with international human rights law. These safeguards will ensure that measures relating to the exercise of legal capacity respect the rights, will and preferences of the person, are free from conflict of interest and undue influence, are proportionate and appropriate to the person's circumstances, apply for the shortest period of time possible and are subject to regular review by a competent, independent and impartial judicial authority or body. Safeguards will be proportionate to the degree to which such measures affect the person's rights and interests. 5. States Parties, subject to the provisions of this article, shall take all appropriate and effective measures to ensure persons with disabilities the equal right to own or inherit property, to control their own finances and to have equal access to bank loans, mortgages and other forms of financial credit, and will ensure that persons with disabilities are not arbitrarily deprived of their assets. Article 13 Access to Justice 1. States Parties shall ensure that persons with disabilities have effective access to justice, on an equal basis with others, including

through the provision of age-appropriate procedural adaptations, in order to facilitate the effective role of persons with disabilities. with disabilities as direct or indirect participants, including witnesses, in all legal proceedings, such as investigations and other preliminary steps. 2. In order to ensure effective access to justice for persons with disabilities, States Parties shall promote appropriate training for those working in the field of administration of justice, including the police and staff of the prison system. Article 14 Freedom and Security of the Person 1. States Parties shall ensure that persons with disabilities, on an equal basis with others: a) Enjoy the right to liberty and security of person; and b) They are not unlawfully or arbitrarily deprived of their liberty and that any deprivation of liberty is in accordance with the law, and that the existence of a disability does not justify the deprivation of liberty. 2. States Parties shall ensure that, if persons with disabilities are deprived of their liberty through any process, they, on an equal basis with others, are entitled to guarantees in accordance with international human rights law and are treated

in accordance with the objectives and principles of the present Convention, including through the provision of reasonable accommodation. Article 15 Prevention against torture or cruel, inhuman or degrading treatment or punishment 1. No person shall be subjected to torture or cruel, inhuman or degrading treatment or punishment. In particular, no person shall be subjected to medical or scientific experiments without their free consent. 2. States Parties shall take all effective measures of a legislative, administrative, judicial or other nature to prevent persons with disabilities, like other persons, from being subjected to torture or to cruel, inhuman or degrading treatment or punishment. Article 16 Prevention of Exploitation, Violence and Abuse 1. States Parties shall take all appropriate legislative, administrative, social, educational and other measures to protect persons with disabilities, both within and outside the home, against all forms of exploitation, violence and abuse, including aspects related to gender. 2. States Parties shall also take all appropriate measures to prevent all forms of exploitation, violence

and abuse, by ensuring, among other things, appropriate forms of care and support that take into account the gender and age of persons with disabilities and their families and caregivers, including through the provision of information and education on how to avoid, recognize and report cases of exploitation, violence and abuse. States Parties shall ensure that protection services take into account the age, gender and disability of persons. 3. In order to prevent any forms of exploitation, violence and abuse from occurring, States Parties shall ensure that all programs and facilities intended to serve persons with disabilities are effectively monitored by independent authorities. 4. States Parties shall take all appropriate measures to promote physical, cognitive and psychological recovery, including through the provision of protective services, rehabilitation and social reintegration of persons with disabilities who are victims of any form of exploitation, violence or abuse. Such recovery and reintegration will take place in environments that promote the health, well-being, self-respect, dignity and autonomy of the person and take into account the

needs of gender and age. 5. States Parties shall adopt effective laws and policies, including legislation and policies targeting women and children, to ensure that cases of exploitation, violence and abuse against persons with disabilities are identified, investigated and, if necessary, prosecuted. Article 17 Protection of the integrity of the person Every person with a disability has the right to have their physical and mental integrity respected, on an equal basis with other people. Article 18 Freedom of Movement and Nationality 1. States Parties shall recognize the rights of persons with disabilities to freedom of movement, freedom to choose their residence and nationality, on an equal basis with others, including by ensuring that persons with disabilities : a) Have the right to acquire nationality and change nationality and not be arbitrarily deprived of their nationality on account of their disability. b) Are not deprived, because of their disability, of the competence to obtain, possess and use a document proving their nationality or other identity document, or to resort to relevant processes, such as immigration procedures, that are necessary to facilitate the exercise of their right to freedom of movement. c)

Are free to leave any country, including their own; and d) Are not deprived, arbitrarily or because of their disability, of the right to enter their own country. 2. Children with disabilities shall be registered immediately after birth and shall have, from birth, the right to a name, the right to acquire nationality and, as far as possible, the right to know and be cared for by their parents. Article 19 Independent Living and Inclusion in the Community The States Parties to this Convention recognize the equal right of all persons with disabilities to live in the community, with the same freedom of choice as others, and shall take effective and appropriate measures to facilitate persons with disabilities disability the full enjoyment of this right and their full inclusion and participation in the community, including ensuring that: a) Persons with disabilities can choose their place of residence and where and with whom to live, on an equal basis with others, and are obliged to live in a certain type of housing; b) Persons with disabilities have access to a range of support services at home or in residential institutions or other community support services, including the services of personal attendants that are necessary to

support persons with disabilities to live and be included in the community and to prevent them from being isolated or segregated from the community; c) Community services and facilities for the general population are available to persons with disabilities, on an equal basis, and meet their needs. Article 20 Personal mobility States Parties shall take effective measures to ensure persons with disabilities their personal mobility as independently as possible;; b) Facilitating access for people with disabilities to assistive technologies, devices and quality technical aids, and forms of human or animal assistance and mediators, including making them available at an affordable cost; c) Providing people with disabilities and specialized personnel with training in mobility techniques; d) Encouraging entities that produce technical mobility aids, devices and assistive technologies to take into account all aspects related to the mobility of people with disabilities. Article 21 Freedom of expression and opinion and access to information States Parties shall take all appropriate measures to ensure that persons with disabilities can exercise their right to freedom of expression

and opinion, including the freedom to seek, receive and share information and ideas, on an equal basis with others and through all forms of communication of their choice, in accordance with the provisions of Article 2 of this Convention, including: a) Providing, promptly and at no additional cost, to persons with disabilities, all information intended for the general public, in accessible formats and technologies appropriate to different types of disabilities; b) Accept and facilitate, in official procedures, the use of sign languages, Braille, augmentative and alternative communication, and all other accessible means, modes and formats of communication, at the choice of persons with disabilities; c) Urge private entities that offer services to the general public, including through the Internet, to provide information and services in accessible formats that can be used by persons with disabilities; d) Encourage the media, including Internet information providers, to make their services accessible to persons with disabilities; e) Recognize and promote the use of sign languages. Article 22 Respect for Privacy 1. No person with a disability, whatever their place of

residence or type of housing, shall be subject to arbitrary or unlawful interference with their privacy, family, home, correspondence or other types of communication, nor to illicit attacks. to their honor and reputation. Persons with disabilities are entitled to the protection of the law against such interference or attacks. 2. States Parties shall protect the privacy of personal data and data relating to the health and rehabilitation of persons with disabilities, on an equal basis with others. Article 23 Respect for the home and family 1. States Parties shall take effective and appropriate measures to eliminate discrimination against persons with disabilities in all aspects relating to marriage, family, parenthood and relationships, on an equal basis with others, so as to ensure that: a) The right of persons with disabilities, of marriageable age, to marry and to establish a family is recognized, based on the free and full consent of the applicants; b) The rights of persons with disabilities to freely and responsibly decide on the number of children and the spacing between those children are recognized and to have access to age-appropriate information and education in matters of reproduction and family planning,

as well as the means necessary to exercise those rights. c) Persons with disabilities, including children, retain their fertility on an equal basis with others. 2. States Parties shall ensure the rights and responsibilities of persons with disabilities regarding the custody, custody, trusteeship and adoption of children or similar institutions, if these concepts are included in national legislation. In all cases, the best interests of the child will prevail. States Parties shall provide appropriate assistance to persons with disabilities so that these persons can exercise their responsibilities in the upbringing of children. 3. States Parties shall ensure that children with disabilities have equal rights in relation to family life. In order to realize these rights and to prevent the concealment, abandonment, neglect and segregation of children with disabilities, States Parties will promptly provide comprehensive information on services and support for children with disabilities and their families. 4. States Parties shall ensure that a child is not separated from his or her parents against their will, except when competent authorities, subject to jurisdictional control, determine, in accordance with applicable

laws and procedures, that separation is necessary in the best interests of the child. of child. In no case shall a child be separated from the parents on the grounds of disability of the child or of one or both parents. 5. States Parties, in the event that the immediate family of a child with a disability is unable to care for the child, shall make every effort to ensure that alternative care is provided by other relatives and, if this is not possible, within a family environment., in the community. Article 24 Education 1. States Parties recognize the right of persons with disabilities to education. To realize this right without discrimination and on the basis of equality of opportunity, States Parties shall ensure an inclusive education system at all levels, as well as lifelong learning, with the following objectives: a) The full development of human potential and a sense of dignity and self-esteem, in addition to strengthening respect for human rights, fundamental freedoms and human diversity; b) The maximum possible development of the personality and of the talents and creativity of persons with disabilities, as well as of their physical and intellectual abilities; c) The effective participation of people with disabilities in a free

society. 2. In order to realize this right, States Parties shall ensure that: a) Persons with disabilities are not excluded from the general education system on grounds of disability and that children with disabilities are not excluded from free and compulsory primary education or secondary education, under allegation of disability; b) Persons with disabilities can have access to inclusive, quality and free primary education, and to secondary education, on an equal basis with other people in the community in which they live; c) Reasonable accommodations according to individual needs are provided; d) Persons with disabilities receive the necessary support, within the framework of the general education system, with a view to facilitating their effective education; e) Individualized and effective support measures are adopted in environments that maximize academic and social development, in accordance with the goal of full inclusion. 3. States Parties shall ensure that persons with disabilities are able to acquire the practical and social skills necessary to facilitate their full and equal participation in the education system and in community life for persons with disabilities. To this end, States

Parties shall take appropriate measures, including: a) Facilitation of Braille learning, alternative writing, augmentative and alternative communication modes, means and formats, and mentoring and mobility skills, and facilitation of peer support and counseling; b) Facilitation of sign language learning and promotion of the linguistic identity of the deaf community; c) Ensuring that the education of people, in particular blind, deafblind and deaf children, is provided in the languages and in the most appropriate modes and means of communication for the individual and in environments that maximize their academic and social development. 4. In order to contribute to the exercise of this right, States Parties shall take appropriate measures to employ teachers, including teachers with disabilities, who are qualified to teach sign language and/or Braille, and to train professionals and staff working in all education levels. This training will incorporate disability awareness and the use of appropriate modes, means and formats of augmentative and alternative communication, and teaching techniques and materials as supports for persons with disabilities. 5. States Parties shall

ensure that persons with disabilities have access to higher education in general, vocational training in accordance with their vocation, adult education and continuing education, without discrimination and on an equal basis. To this end, States Parties shall ensure the provision of reasonable accommodation for persons with disabilities. Article 25 Health States Parties recognize that persons with disabilities have the right to the enjoyment of the highest attainable state of health, without discrimination based on disability. States Parties shall take all appropriate measures to ensure that persons with disabilities have access to health services, including rehabilitation services, that take into account gender specificities. In particular, States Parties shall: a) Offer persons with disabilities free or affordable health care and programs of the same variety, quality and standard as are provided to others, including in the area of sexual and reproductive health and public health for the general population; b) Provide health services that persons with disabilities need specifically because of their disability, including early diagnosis and intervention, as well as services designed to

minimize and prevent further disabilities, including among children and the elderly; c) Provide these health services to persons with disabilities as close as possible to their communities, including in rural areas; d) Require health professionals to provide people with disabilities with the same quality of services provided to other people and, above all, to obtain the free and informed consent of the people with disabilities concerned. To this end, States Parties will carry out training activities and define ethical rules for the public and private health sectors, in order to make health professionals aware of human rights, dignity, autonomy and the needs of persons with disabilities; e) Prohibit discrimination against persons with disabilities in the provision of health and life insurance, if such insurance is permitted by national law, which shall be provided in a reasonable and fair manner; f) Prevent the denial of health or health care services or the administration of solid or liquid foods on grounds of disability in a discriminatory manner. Article 26 Habilitation and Rehabilitation 1. States Parties shall take effective and appropriate measures, including through peer support, to enable

persons with disabilities to achieve and maintain maximum autonomy and full physical, mental, social and professional capacity, as well as full inclusion and participation in all aspects of life. To this end, States Parties shall organize, strengthen and expand comprehensive habilitation and rehabilitation services and programs, particularly in the areas of health, employment, education and social services, so that these services and programs: a) Begin at the earliest possible stage and are based on a multidisciplinary assessment of each person's needs and strengths; b) Support participation and inclusion in the community and in all aspects of social life, be offered voluntarily and be available to persons with disabilities as close as possible to their communities, including in rural areas. 2. States Parties shall promote the development of initial and ongoing training of professionals and teams working in habilitation and rehabilitation services. 3. States Parties shall promote the availability, knowledge and use of assistive devices and technologies designed for persons with disabilities and related to habilitation and rehabilitation.

Article 27 Work and Employment

1. States Parties recognize the right of persons with disabilities to work, on an equal basis with others. This right encompasses the right to the opportunity to support themselves with work of their free choice or acceptance in the labor market, in a work environment that is open, inclusive and accessible to persons with disabilities. States Parties shall safeguard and promote the realization of the right to work, including for those who have acquired a disability in the course of employment, by adopting appropriate measures, included in legislation, with the aim of, inter alia: a) Prohibiting discrimination based on disability with respect to all matters relating to forms of employment, including conditions of recruitment, hiring and admission, permanence in employment, professional advancement and safe and healthy working conditions; b) Protect the rights of persons with disabilities, on an equal basis with others, to just and favorable conditions of work, including equal opportunity and equal remuneration for work of equal value, safe and healthy working conditions, and redress for injustices and protection from harassment at work; c) Ensuring

that people with disabilities can exercise their labor and union rights, on an equal basis with other people; d) Enable people with disabilities to have effective access to technical and professional guidance programs and to job placement services and professional and continuing training; e) Promoting employment opportunities and career advancement for people with disabilities in the labor market, as well as assistance in finding, obtaining and maintaining employment and returning to employment; f) Promote opportunities for self-employment, entrepreneurship, development of cooperatives and establishment of own business; g) Employing persons with disabilities in the public sector; h) Promote the employment of persons with disabilities in the private sector, through appropriate policies and measures, which may include affirmative action programs, incentives and other measures; i) Ensure that reasonable accommodations are made for persons with disabilities in the workplace; j) Promote the acquisition of work experience by people with disabilities in the open labor market; k) Promoting vocational rehabilitation, job

maintenance and return-to-work programs for people with disabilities. 2. States Parties shall ensure that persons with disabilities shall not be held in slavery or servitude and that they shall be protected, on an equal basis with others, from forced or compulsory labour. Article 28 Adequate standard of living and social protection 1. States Parties recognize the right of persons with disabilities to an adequate standard of living for themselves and their families, including adequate food, clothing and housing, and the continuous improvement of their conditions. of life, and shall take the necessary steps to safeguard and promote the realization of this right without discrimination based on disability. two. States Parties recognize the right of persons with disabilities to social protection and to exercise that right without discrimination based on disability, and shall take appropriate measures to safeguard and promote the realization of this right, such as: a) Ensuring equal access for persons with disabilities sanitation services and ensuring access to services, devices and other services appropriate to disability-related needs; b) Ensure the access of people with disabilities,

particularly women, children and elderly people with disabilities, to social protection and poverty reduction programmes; c) Ensure access by persons with disabilities and their families in poverty to State assistance in relation to their disability-related expenses, including adequate training, counseling, financial assistance and respite care; d) Ensure access for people with disabilities to public housing programmes; e) Ensure equal access for persons with disabilities to retirement programs and benefits. Article 29 Participation in Political and Public Life States Parties shall guarantee persons with disabilities political rights and the opportunity to exercise them on an equal basis with others, and shall: a) Ensure that persons with disabilities can participate effectively and fully in the political and public life, on an equal basis with others, directly or through freely chosen representatives, including the right and opportunity to vote and be voted on, through, among others: i) Assurance that the procedures, facilities and voting materials and equipment will be appropriate, accessible and easy to understand and use; ii) Protection of the right of persons with disabilities to vote secretly in elections and

plebiscites, without intimidation, and to stand as candidates in elections, effectively hold elected office and perform any public functions at all levels of government, using new assistive technologies, when appropriate; iii) Guaranteeing the free expression of will of persons with disabilities as voters and, for this purpose, whenever necessary and at their request, permission for them to be assisted in voting by a person of their choice; b) Actively promote an environment in which persons with disabilities can participate effectively and fully in the conduct of public affairs, without discrimination and on an equal basis with others, and encourage their participation in public affairs, through: i) Participation in organizations non-governmental organizations related to the public and political life of the country, as well as activities and administration of political parties; ii) Formation of organizations to represent persons with disabilities at international, regional, national and local levels, as well as membership of persons with disabilities in such organizations. Article 30 Participation in cultural life and in recreation, leisure and sport 1. States Parties recognize the right of persons with

disabilities to participate in cultural life, on an equal basis with others, and shall take all appropriate measures to ensure that persons with disabilities can: a) Have access to cultural goods in accessible formats; b) Have access to television programs, cinema, theater and other cultural activities, in accessible formats; and c) Have access to places that offer cultural services or events, such as theatres, museums, cinemas, libraries and tourist services, as well as, as far as possible, have access to monuments and places of national cultural importance. 2. States Parties shall take appropriate measures to ensure that persons with disabilities have the opportunity to develop and utilize their creative, artistic and intellectual potential, not only for their own benefit, but also for the enrichment of society. 3. States Parties shall take all steps, in accordance with international law, to ensure that legislation protecting intellectual property rights does not constitute an excessive or discriminatory barrier to the access of persons with disabilities to cultural property. 4. Persons with disabilities shall be entitled, on an equal basis with others, to have

their specific cultural and linguistic identity recognized and supported, including sign languages and deaf culture. 5. In order for persons with disabilities to participate, on an equal basis with others, in recreational, sporting and leisure activities, States Parties shall take appropriate measures to: a) Encourage and promote the greatest possible participation of persons with disabilities in common sports activities at all levels; b) Ensuring that persons with disabilities have the opportunity to organize, develop and participate in disability-specific sporting and recreational activities and, to this end, encourage the provision of adequate education, training and resources, on an equal basis with others; c) Ensure that persons with disabilities have access to venues for sporting, recreational and tourist events; d) Ensuring that children with disabilities can, on an equal basis with other children, participate in games and recreational, sports and leisure activities, including in the school system; e) Ensure that persons with disabilities have access to services provided by persons or entities involved in the organization of recreational, tourist, sports and leisure

activities. Article 31 Statistics and Data Collection 1. States Parties shall collect appropriate data, including statistical and research data, to enable them to formulate and implement policies to implement this Convention. The process of collecting and maintaining such data must: a) Observe the safeguards established by law, including those relating to data protection, in order to ensure confidentiality and respect for the privacy of persons with disabilities; b) Observe internationally accepted standards to protect human rights, fundamental freedoms and ethical principles in data collection and use of statistics. 2. Information collected in accordance with the provisions of this Article shall be disaggregated, in an appropriate manner, and used to assess the fulfillment by States Parties of their obligations under this Convention and to identify and address the barriers with which people with disabilities are faced in the exercise of their rights. 3. States Parties shall assume responsibility for the dissemination of said statistics and ensure that they are accessible to persons with disabilities and others. Article 32 International Cooperation 1.

States Parties recognize the importance of international cooperation and its promotion in support of national efforts to achieve the purpose and objectives of this Convention and, in this regard, shall adopt appropriate and effective measures among States. and, as appropriate, in partnership with relevant international and regional organizations and with civil society and, in particular, organizations of persons with disabilities. These measures may include, among others: a) Ensuring that international cooperation, including international development programs, is inclusive and accessible to persons with disabilities; b) Facilitate and support capacity building, including through the exchange and sharing of information, experiences, training programs and best practices; c) Facilitate cooperation in research and access to scientific and technical knowledge; d) Appropriately provide technical and financial assistance, including through facilitating access to and sharing of assistive and accessible technologies, as well as through technology transfer. 2. The provisions of this Article shall apply without prejudice to the

obligations incumbent on each State Party under this Convention. Article 33 National Implementation and Monitoring 1. States Parties, in accordance with their organizational system, shall designate one or more focal points within the Government for matters relating to the implementation of this Convention and shall give due consideration to the establishment or designation of a coordination mechanism within the Government, in order to facilitate related actions in different sectors and levels. 2. States Parties, in accordance with their legal and administrative systems, shall maintain, strengthen, designate or establish a structure, including one or more than one independent mechanism, as appropriate, to promote, protect and monitor the implementation of this Convention. When designating or establishing such a mechanism, States Parties shall take into account the principles relating to the status and functioning of national institutions for the protection and promotion of human rights. 3. Civil society and, in particular, persons with disabilities and their representative organizations will be involved and will participate

fully in the monitoring process. Article 34 Committee on the Rights of Persons with Disabilities 1. A Committee on the Rights of Persons with Disabilities (hereinafter referred to as the "Committee") shall be established to carry out the functions defined herein. 2. Upon entry into force of this Convention, the Committee shall be composed of 12 experts. When the present Convention reaches 60 ratifications or accessions, the Committee will be increased by six members, making a total of 18 members. 3. The members of the Committee shall act in a personal capacity and display high moral standing, recognized competence and experience in the field covered by this Convention. In nominating their candidates, States Parties are urged to give due consideration to the provisions of Article 4.3 of the present Convention. 4. The members of the Committee shall be elected by the States Parties, subject to an equitable geographical distribution, representation of different forms of civilization and the main legal systems, balanced representation of gender and participation of experts with disabilities. 5. The members of the Committee shall be elected by secret ballot at sessions of the

Conference of States Parties, from a list of persons designated by the States Parties from among their nationals. At these sessions, the quorum of which will be two-thirds of the States Parties, the candidates elected to the Committee will be those who obtain the greatest number of votes and the absolute majority of votes of the representatives of the States Parties present and voting. 6. The first election shall be held not later than six months after the date of entry into force of this Convention. At least four months before each election, the Secretary-General of the United Nations shall address a letter to States Parties, inviting them to submit the names of their candidates within two months. The Secretary-General shall subsequently prepare an alphabetical list of all candidates presented, indicating that they have been nominated by States Parties, and submit that list to States Parties to the present Convention. 7. The members of the Committee will be elected for a term of four years, being able to be candidates for reelection only once. However, the term of office of six of the members elected in the first election will expire after two years; immediately after the first election, the names of these

six members shall be selected by lot by the chairperson of the session referred to in paragraph 5 of this Article. 8. The election of the six additional members of the Committee will take place on the occasion of regular elections, in accordance with the relevant provisions of this Article. 9. In the event of the death, resignation or declaration of a member that, for some reason, he will be unable to continue to perform his duties, the State Party that has appointed him shall appoint another expert who has the qualifications and meets the requirements established by the provisions of this Article, to complete the mandate in question. 10. The Committee will establish its own rules of procedure. 11. The Secretary-General of the United Nations shall provide the personnel and facilities necessary for the effective performance of the functions of the Committee under the present Convention and shall convene its first meeting. 12. With the approval of the General Assembly, the members of the Committee established under the present Convention shall receive emoluments from the resources of the United Nations, under such terms and conditions as the Assembly may decide, in view of

the importance of the responsibilities of the Committee. 13. Members of the Committee shall be entitled to the privileges, facilities and immunities of experts on United Nations missions, in accordance with the relevant provisions of the United Nations Convention on Privileges and Immunities. Article 35 Reports by States Parties 1. Each State Party, through the Secretary-General of the United Nations, shall submit a comprehensive report on the measures taken in fulfillment of its obligations under this Convention and on the progress made in this regard within the period of two years after the entry into force of this Convention for the State Party concerned. 2. Thereafter, States Parties shall submit subsequent reports, at least every four years, or when the Committee so requests. 3. The Committee will determine the guidelines applicable to the content of reports. 4. A State Party that has submitted a comprehensive initial report to the Committee will not need, in subsequent reports, to repeat information already presented. When reporting to the Committee, States Parties are urged to do so in a frank and transparent manner and to take

into account the provisions of Article 4.3 of the present Convention. 5. The reports may point to factors and difficulties that have affected the fulfillment of obligations under this Convention. Article 36 Consideration of the reports 1. The reports will be considered by the Committee, which will make the general suggestions and recommendations it deems relevant and transmit them to the respective States Parties. The State Party may respond to the Committee with the information it deems relevant. The Committee may request additional information from States Parties concerning the implementation of this Convention. 2. If a State Party significantly delays the delivery of its report, the Committee may notify that State that it will examine the application of this Convention on the basis of reliable information in its possession, unless the due report is presented by the State within the period three months after notification. The Committee will invite the State party concerned to participate in this review. If the State Party responds by submitting its report, the provisions of paragraph 1 of this article shall apply. 3. The Secretary-General of the United

Nations shall make the reports available to all States Parties. 4. States Parties shall make their reports widely available to the public in their countries and facilitate access to the possibility of suggestions and general recommendations regarding these reports. 5. The Committee shall transmit to the agencies, funds and specialized programs of the United Nations and to other competent organizations, as it deems appropriate, reports from States Parties containing demands or indications of the need for advice or technical assistance, accompanied by any observations and suggestions from the Committee in relation to said demands or indications, so that they can be considered. Article 37 Cooperation between States Parties and the Committee 1. Each State Party shall cooperate with the Committee and assist its members in carrying out their mandate. 2. In its relations with States Parties, the Committee shall give due consideration to ways and means of enhancing the capacity of each State Party to implement this Convention, including through international cooperation. Article 38 Relations of the Committee with Other Organs In order to promote the effective

implementation of this Convention and to encourage international cooperation in the sphere covered by this Convention: a) Specialized agencies and other organs of the United Nations shall have the right to be represented when consideration of the implementation of provisions of the present Convention that pertain to their respective mandates. The Committee may invite specialized agencies and other competent bodies, as it deems appropriate, to provide expert advice on the implementation of the Convention in areas relevant to their respective mandates. The Committee may invite specialized agencies and other United Nations bodies to report on the implementation of the Convention in areas relevant to their respective activities; b) In carrying out its mandate, the Committee will consult, in an appropriate manner, with other relevant bodies established under international human rights treaties, in order to ensure the consistency of their respective guidelines for the preparation of reports, suggestions and general recommendations and to avoid duplication and overlap in the performance of their functions.

Article 39 Report of the Committee Every two years, the Committee shall submit to the General Assembly and the Economic and Social Council a report on its activities and may make general suggestions and recommendations based on the examination of the reports and information received from States Parties. These general suggestions and recommendations will be included in the Committee's report, accompanied, if any, by comments from States Parties.

Article 40 Conference of States Parties 1. States Parties shall meet regularly as a Conference of States Parties to consider matters relating to the implementation of this Convention. 2. The Secretary-General of the United Nations shall, within a period of six months after the entry into force of this Convention, convene the Conference of States Parties. Subsequent meetings shall be convened by the Secretary-General of the United Nations every two years or as decided by the Conference of States Parties.

Article 41 Depository The Secretary-General of the United Nations shall be the depository of the present Convention.

Article 42 Signature This Convention shall be open for signature by all

States and regional integration organizations at United Nations Headquarters in New York from 30 March 2007.

Article 43 Consent to Commit This Convention shall be submitted to ratification by signatory States and formal confirmation by signatory regional integration organizations. It will be open to accession by any State or regional integration organization that has not signed it.

Article 44 Regional Integration Organizations 1. "Regional Integration Organization" shall be understood as an organization constituted by sovereign States of a given region, to which its member States have delegated competence in matters covered by this Convention. These organizations shall declare, in their documents of formal confirmation or accession, the extent of their competence in relation to the matter covered by this Convention. Subsequently, organizations will inform the depositary of any substantial changes in the scope of their competence. 2. References to "States Parties" in this Convention shall apply to such organizations within the limits of their competence. 3. For the purposes of paragraph 1 of Article 45 and paragraphs 2 and 3 of

Article 47, no instrument deposited by a regional integration organization shall be computed.

4. Regional integration organizations, in matters within their competence, may exercise the right to vote at the Conference of States Parties, having the same number of votes as the number of their member States that are Parties to this Convention. These organizations will not exercise their right to vote if any of their member states exercise their right to vote, and vice versa.

Article 45 Entry into force 1. This Convention shall enter into force on the thirtieth day after the deposit of the twentieth instrument of ratification or accession. 2. For each State or regional integration organization that ratifies or formally confirms this Convention or accedes to it after the deposit of the said twentieth instrument, the Convention shall enter into force on the thirtieth day following the date on which that State or organization deposited its instrument of ratification, formal confirmation or accession.

Article 46 Reservations 1. Reservations incompatible with the object and purpose of this Convention shall not be permitted. 2. Reservations may be withdrawn at any time. Article

47 Amendments 1. Any State Party may propose amendments to the present Convention and submit them to the Secretary-General of the United Nations. The Secretary-General shall communicate to States Parties any proposed amendments, requesting them to notify him whether they are in favor of a Conference of States Parties to consider the proposals and take a decision thereon. If, within four months of the date of said communication, at least one third of the States Parties are in favor of such a Conference, the Secretary-General of the United Nations shall convene the Conference, under the auspices of the United Nations. Any amendment adopted by a two-thirds majority of States Parties present and voting shall be submitted by the Secretary-General for approval by the General Assembly of the United Nations and thereafter for acceptance by all States Parties.

2. Any amendment adopted and approved pursuant to paragraph 1 of this article shall enter into force on the thirtieth day after the date on which the number of instruments of acceptance has reached two-thirds of the number of States Parties on the date of adoption of the amendment.

Thereafter, the amendment shall enter into force for each State Party on the thirtieth day after the deposit by that State of its instrument of acceptance. The amendment will be binding only on the States Parties that have accepted it.

3. If the Conference of States Parties so decides by consensus, any amendment adopted and approved in accordance with the provisions of paragraph 1 of this Article, relating exclusively to articles 34, 38, 39 and 40, shall enter into force for all States. Parties on the thirtieth day following the date on which the number of instruments of acceptance deposited has reached two-thirds of the number of States Parties on the date of adoption of the amendment.

Article 48 Denunciation Any State Party may denounce this Convention by giving written notice to the Secretary-General of the United Nations. The denunciation shall become effective one year after the date of receipt of the notification by the Secretary-General.

Article 49 Accessible Formats The text of this Convention shall be made available in accessible formats.

Article 50 Authentic texts The Arabic, Chinese, Spanish, French, English and Russian texts of the present Convention shall be

equally authentic. IN WITNESS WHERE OF the undersigned plenipotentiaries, being duly authorized thereto by their respective Governments, have signed this Convention.