Debunking the Myth of the Electron Microscope, HIV, and Corona

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Introduction

Science progresses or so we are made to believe. Magazines print the most marvelous pictures made by so-called electron microscopes. You also "need an electron microscope to take pictures of viruses," and they "managed to acquire a picture of the [...] virus with an electron microscope."

Check for yourself and you'll find two different accounts. You either have to read between the lines or you need to listen to the carelessly outspoken definition of what's going on, that's mentioned once in the interview, where the interviewee states "electronic microscope" once and "electron microscope" for the remainder of the interview.

The usual account is that of shooting electrons straight at a surface and they either bounce off of the surface or go through it. These electrons, subatomic particles *far bigger than light*, manage to produce images of objects way smaller than what light can capture... Electrons that are in no way *diffuse* or *unpredictable*?

They managed to direct the lightning 100% and it doesn't flow in different directions when it hits a surface! Science is the new miracle!

In reality it's horse shit. The images on the Internet that are actual photographs that look like they've been blown up to an old-fashioned 320 x 200 resolution, those are the real deal. They are real photographs, that's true. They also reveal a hidden secret, when you look up different viruses, like influenza, corona, and HIV: these are all one and the same virus!

But why would you listen to me? Who am I? I'm just sitting here at my kitchen table, saying all of these things. How am I going to back this with evidence?

That's the whole point. Yes, I'm sitting here at my kitchen table, but I've also had the fortunate unfortunate pleasure of having been injected with a needle prepared by the doctor, in that he was kind enough to rub his fingers over it before I came into the room, meaning I didn't get to see it taken out of the packaging. Now I have immune system issues.

I have my gear, including my microscope, camera, camera adapter, carton and scissors, and I've been able to replicate the results produced by these people with their "million

dollar" electron microscopes right here at my kitchen table. Sit down, kick back, relax, and let me lay it all out on the table for you how I managed to produce my results.

The Gear I Used

All of the gear I used you can easily buy off the Internet, although you might want to switch to a more modern DSLR-camera, because mine isn't the latest model. You essentially need a good microscope, a camera adapter, a camera, and, to make your own dark field filters, carton, scissors, and some other items. Specifically, I have the:

- 1. Bresser Researcher Trino with the default condensor that comes with a condensor diaphragm and an underestimated and in the manual completely ignored filter tray,
- 2. Canon EOS 500D (Europe) / Ti Rebel (USA) with per 2009 maximally 15 megapixels,
- 3. Bresser T2 ring for Canon, and
- 4. Bresser SLR-camera adapter 2x T2.

You will also need *two clean microscope slides*, but no cover slides, and a *sterile needle or lancet* to draw blood. You can order them easily, typically advertised for diabetics that test their own blood. Although Bresser doesn't include dark field filters of their own when you buy their microscope, they do include a blue glass filter. You can use this to determine its size.

To be able to see the smallest of particles, you need to have dark field filters. You don't need dark field condensors that will set you back hundreds of euros. Try eBay. They sell dark field, Rheinberg, and polarization filters; just get the right size. You only need one polarization filter: two out of phase just block out all the light or interfere.

To make your own dark field filters:

- 1. Get some preferably black carton of either about 0.5mm thick or just carton of 1 millimeter thick if you want it to be sturdy. (Black paper does the job, but is flimsy.)
- 2. Put the blue glass filter supplied by Bresser on top of the carton. The final product should preferably be 1 millimeter thick. Draw either four or two circles by outlining the blue glass filter to make two dark field filters.
- 3. Cut out the circles with your scissors.
- 4. If you cut four circles of 0.5 millimeters thick, glue them together per pair, so you now have two circles, and allow them to dry.
- 5. With a pair of compasses (in Dutch *passer*) on one draw two circles, one ± 4 millimeters from the edge and one with a radius of 1 centimeter; on the other, draw two circles, one ± 4 millimeters from the edge and one with a radius of ± 6 millimeters.
- 6. Draw three legs that join the inner and the outer circle on each carton.
- 7. Cut out the carton between the legs with a knife.
- 8. If you didn't get black carton, blacken the carton with a marker on either side.
- 9. If you wish to reinforce the carton, rub glue over one side of each filter, allow it to dry, and then over the other side of the filters and allow that to dry also.

These obviously makeshift dark field filters performed not just admirably, but even perfectly for the experiment. The professionally 3D printed filters on eBay beat the shit out of the expensive dark field condensors: they cost nearly nothing and do the same job.

Figure 1 shows a scan of the two filters I made. The dark field filter with the bigger diameter is to be used at smaller magnifications. It is to be replaced by the smaller dark field filter for the largest magnification, otherwise no light comes through.

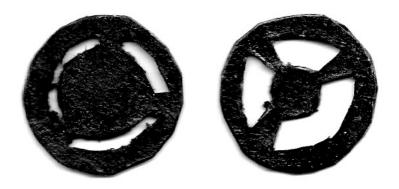


Fig. 1 My makeshift dark field filters

It's important that you center your condensor before you insert filters or do anything else. Just close down the diaphragm to do so and set your microscope to the lowest magnification. If the condensor isn't already centered when you look through your eyepieces, loosen it by unscrewing the screw, center it, and fasten as you hold it steady.

When all of the gear is set up, if your kitchen looks any bit like mine, it will look like in *figure 2*. All gear in place, you can now continue with the actual experiment.



Fig. 2 My experimental setup

The Experiment

Make sure you have your slides ready. I usually make use of the kind of sticks that you would use to eat Chinese food to balance the slide that will hold the blood on, but you can

come up with your own setup to keep the slides clean. Just put that one slide in place for you to administer the blood.

Get your lancet and prick your finger so you feel a bit of a sting. It doesn't have to hurt a lot. Put the lancet aside in a jar of sorts that will hold your dirty medical gear. Boil all dirty parts in water afterwards. Now press on your finger, massaging out a clear but not too big a drop of blood. Apply the blood to the glass slide close to one of the shorter sides.

Clean your finger briefly and dry it off.

Get the other microscope slide. Use it to smear the blood across the slide with nonuniform pressure. The result should look like the slide in *figure 3*. Note how the blood is unevenly distributed. If it's evenly distributed, the blood cells stick too closely together for you to be able to see anything smaller.



Fig. 3 The prepared slide on the microscope

When you start to focus, you don't start with the 100x objective which I used last. You start with the smallest objective, which is the 4x objective, progress to the 10x objective, the 40x, and you finish with the 100x objective, *without oil*. At first you focus without any filter. Then you slide in your dark field filter to fine tune it.

You use the bigger diameter dark field filter for the smaller objectives, and the small diameter dark field filter for the 100x objective. You try to get it as sharp as possible and with the 100x objective you alternate between getting it in focus and taking pictures, *making use of the photos to adjust the focus* rather than the eyepieces.

These were the settings I used successfully to take my picture:

- 1. Make use of the camera's *self-timer set at 2 seconds* (or a *remote*) to make sure you don't touch the camera when it takes its picture. It needs to be absolutely still.
- 2. You take pictures with as high a detail as possible, so with 100 ISO.
- 3. Set the exposure to 0.5 seconds (half a second).
- 4. The light of the microscope is set to its highest setting.
- 5. The condensor diaphragm is set to $\frac{1}{3}$ (one third) of its total aperture.
- 6. As said, I used the smallest dark field filter.

The results aren't immediately what you would expect them to be. An important part of photographing viruses consists of minor basic image processing.

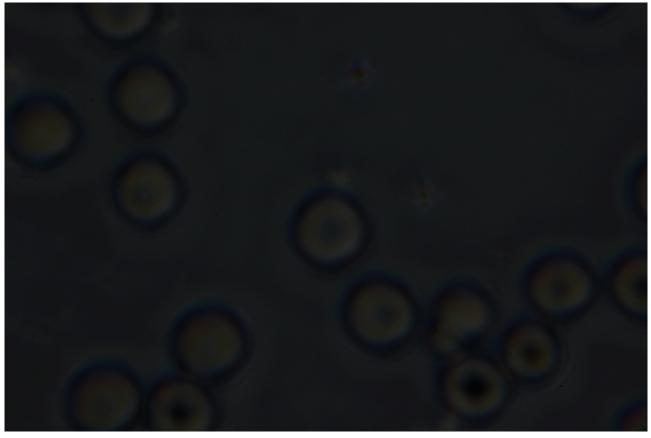


Fig 4a. The original picture scaled down

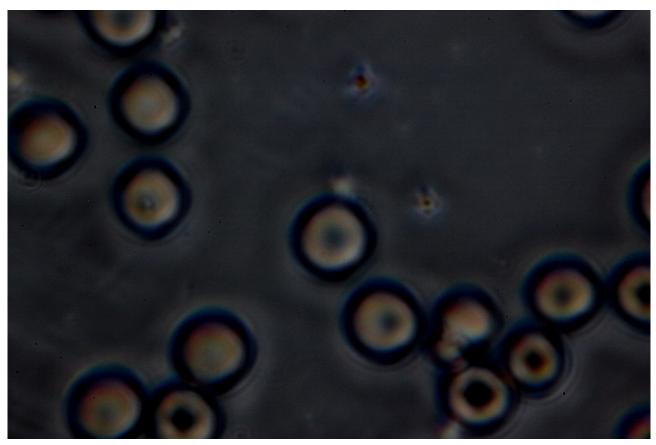


Fig 4b The processed picture scaled down

Figure 4a illustrates a scaled down version of the picture I took. Figure 4b illustrates a scaled down version of the previous image after processing. I used Canon's Digital Photo Professional 4 and set both color tone and saturation to -4. I also adjusted the curves input level: 17 to 71; which automatically set the contrast levels also.

Those big circles are actually blood cells. The smaller circles are probably blood platelets. Officially they come off as little blood cells, so maybe they just have to grow a bit. I can't tell. Either way, these aren't what we are looking for.

Viruses are way smaller. Do you see those little black dots. I don't know whether you can see it in the printout all that well, but they have a faint white circle around them. Do you for instance see the one (actually two overlapping) to the bottom right, next to the middle of the three diagonally aligned blood cells? Those little black dots are what we are looking for.

We have to examine all of the original processed picture that wasn't scaled down for printing, picking virus particles out from it, and magnify them so we may examine their structure. The difficulty resides in finding a picture of a virus that is sufficiently in focus for us to be able to examine its structure.

Don't worry about depth of field and oil. You can't put oil on top of the slide, because you have to make use of dried blood to make sure it stays still. The viruses are also thus small that they are either completely in or out of focus.

As such we have to examine every single one of the little dots and also lower intensity pictures of viruses to see which one works best for us. As you'll also see with the actual photographs of viruses on the Internet, we have to enlarge them sufficiently to examine their structure. This is detrimental to the image quality. It's not art, it's science, but it works.

Instead of cutting the pictures of the virus-particles out of a JPEG-picture, which would lead to quality loss, I wanted to make use of the processed RAW-picture in Canon Digital Photo Professional 4. This turned out not to be an option. The program doesn't allow you to cut and paste directly. I did scan the picture with my eyes using that program.

My solution was to look at the RAW image at 100% of its size and capture parts of my 2015 Macbook Air 13" screen instead. To copy the virus particles into this document, I selected the virus particles one by one with CMD + SHIFT + 5 and my mouse, copying them directly through CMD + C and CMD + V, without cropping or saving them separately.

The aim was to reduce the number of steps going from original photo to an extreme close up, cut and pasted into this document, to preserve as much as possible of the image quality. *Figure 5.1* through *5.108* show my results. Enlarging beyond pixel size turned out to be detrimental to the recognizability of the particles.

I haven't tried printing to see what would be optimal for analysis. Make sure you look straight at your screen. If you make use of the eBay dark field filters, the image quality will improve further, because the light is more uniform.





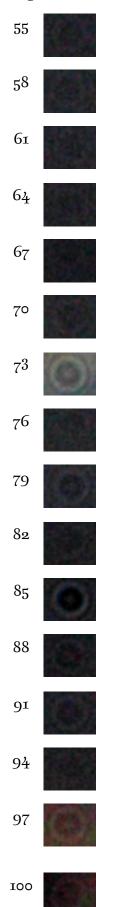






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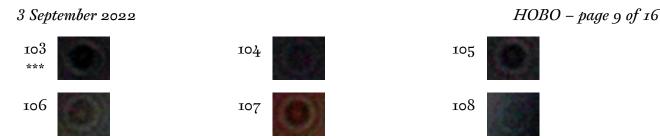


Figure 5 All the pictures I could take of virus particles in my blood from picture 4b

As you can tell, some of the backgrounds are more reddish in places. This is due to the virus particles residing on top of a blood cell. Other particles may seem longer, but it seems more likely they overlap than they be longer. You're just not looking at one particle but two instead. The particles are of uniform shape.

I find *figure 5.25** surprising, because it's so small. This either means it's something else or, more likely, it is a failed virus particle in that it was replicated by my cells without an RNA string inside of it. What can I say? Even viruses can be empty shells of themselves.

The viruses marked with ** are actually two particles. The one with *** is either deformed or, more likely, has another one of those particles without RNA to it intersecting visually.

Improving the Image Quality?

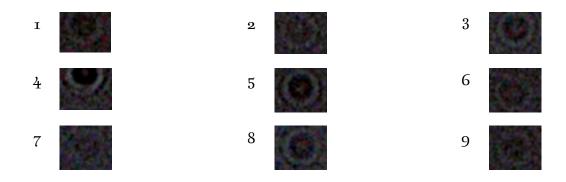
The pictures in *figure 5* were all directly copied from the processed picture. The processing done had to be minimal, because otherwise the viruses would be unrecognizable in the bigger picture. Now we have the viruses by themselves in tiny thumbnail sized pictures, we can actually process them further to raise the clarity of the picture.

Raising the contrast doesn't work, because the intensity of the pictures is so low. Instead, what I will do in Apple Pages version 12.1 (7034.0.86), is to increase the sharpness to 100%, if it helps raise the shadows from 0% to 50% or 100%, and if it helps raise the exposure to 100%.

If you want to do this, improve the images before you put them in a table, pasting them inline into a generic text area first, then paste the results into a table. In the table you can't adjust them.

If you have them in a table already like I did, you constantly have to cut and paste them out of the table, adjust them, and cut and paste them back in. I found it easier to do this making sure I had an empty document to cut and paste between the two. Otherwise, with only this document open, I had to scroll which greatly increased delays.

As you can tell, some of the images of the viruses were thus weak that when you isolate it, you can't recognize it anymore. I also don't feel I always improved the image quality.



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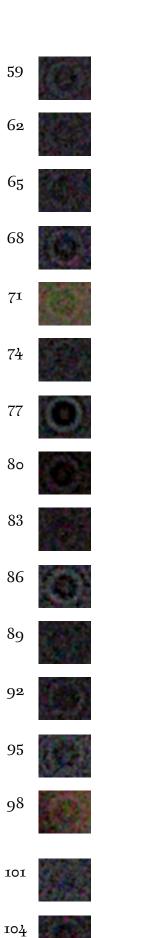












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Figure 6 All virus pictures of fig. 5 "enhanced" to try and emphasize their structure

In all honesty, although it frequently looks pretty, I don't know whether this adds anything. I don't think the analysis of these pictures improves by doing what I did.

Hypothetically, a uniform high grade dark field filter off of eBay might reduce the amount of refraction, because the relatively irregular dark field filters I cut out actually further emphasize diffraction. As such that might be the only thing that would improve the image quality with my current setup.

Interestingly enough, however imperfect my dark field filters, they can still produce these rather marvelous looking results, showing they don't use electron microscopes.

Observations

Based on what I've witnessed from my own experiment and what I see on the Internet, I've made a number of observations. Some of these observations are facts. Others are hypotheses. I usually find it best to separate them into three distinct categories: the physiological, the psychological, and the sociological.

First the *physiological*, which describes what the influenza virus looks like, how it interacts with our blood, and the cure.

Hypothesis h.1	The viral particles of the influenza virus don't have suction naps or spikes on their shell, but are smooth, round particles and what we see is the refraction of light around the viral particle.
Hypothesis h.2	The T-cells when they encounter an influenza viral particle dissolve the shell of the virus and consume the RNA, which then makes them reproduce the influenza virus in large amounts inside of them, effectively killing themselves after which they burst open, allowing the influenza virus to spread further into the blood stream.
Hypothesis h.3	The T-cells <i>can</i> kill the influenza virus, but they need to take more time to dissolve it, also breaking down the RNA, before they consume it.
Hypothesis h.4	The influenza virus always only has one RNA string in it and when researchers feel they discovered an influenza strand with more RNA strings to them, they were really just negligent in how they dissolved the shell of the virus or how many viruses they dissolved, meaning they either broke down the RNA also or broke down multiple viral particles, grouping them as one.
Hypothesis h.5	When researchers identify influenza viral particles that they feel aren't round, they are really watching viral particles that overlap visually.
Fact f.1	The influenza virus particles can reside on dry surfaces of any kind without breaking up and enter both the airways and through either

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	injection or pressure the blood stream, meaning you could infect someone's bloodstream with a firm kiss on a wound.
Fact f.2	To cure yourself from the influenza virus when it's intravascular, you have to reside in sea air for seven days and seven nights, immersing yourself in it for 24 hours a day.
Fact f.3	Spending time exercising in the outside air and ventilating your house all day helps keep intravascular influenza under control.
Hypothesis h.6	Residing in air cleaned by an air cleaner like in a museum helps keep intravascular influenza under control.
Fact f.4	To cure yourself of bronchial influenza, you need to get it out of your lungs by steaming and spend multiple hours per day in the outside air, preferably, for a quicker cure, sea air.
Fact f.5	The influenza, corona, and HIV viral particles are one and the same type of particle, the first two being bronchial, the latter intravascular in terms of its infection.
Fact f.6	You can't see the RNA string of an influenza viral particle under the microscope, because it's encapsulated in a ball sheath.
Hypothesis h.7	When a T-cell a.k.a. white blood cell produces a viral particle but fails to load it up with RNA, it looks the same but smaller.

The *psychological* focuses on the perception of the influenza virus both by researchers and patients.

Fact f.7	To study what a virus look like, you should look at the highest occurrence particles and realize that they may sometimes be in the same spot partially overlapping.
Fact f.8	When research isn't reproducible the way it is described in the article, you can't trust the research and the researcher.

The *sociological* focuses on the use of the influenza virus in a sociological context and the way society responds to it.

Fact f.9	By naming intravascular influenza differently and attributing the virus to particular groups of people, denying them the cure and handing them chemicals that kill, the virus is used to eradicate groups of people from society, silently labeled as undesirables.
Fact f.10	By naming bronchial influenza differently and implying higher lethality while denying them the cure, governments seek to confine people to their houses and countries, greatly limiting their social life and actively

attack the liberal market, while at the same time letting people die that seek to trust their governments.

Annotations

Not all hypotheses will be easy to test. *Hypothesis h.2* can easily be tested with a petri dish with T-cells. By exposing it to the influenza virus particles, it allows us to study the reproduction and destructive properties of the influenza virus in terms of the assimilation by the T-cells and their resulting self-destruction and adaptability.

These pictures were taken with a 2009 Canon EOS 500D with a 15 megapixel CMOS-sensor. Pictures on the Internet display that they have been heavily doctored. They are thus perfect that it worries me. They seek to eliminate everything that isn't the virus, fashion the virus in particular ways by also altering the appearance of the shell, or are pure fabrication.

These pictures of viruses aren't in context. There's nothing else there: no mucus, no blood, nothing. The supposed level of edge detection applied also makes sure that the experiments aren't reproducible. They look animated. They may not be the real deal, but merely illustrate the desired results. Are they real? Can we see the process of taking them?

A good experiment should be clearly illustrated and reproducible. My pictures in effect aren't as clear as quite a few I find on the Internet, but when checking every picture individually, some are clear enough to determine the shell of the virus does have the same shell as what I sometimes do find on the Internet for influenza.

According to literature, what you need to take these pictures is an electron microscope. I would like to point out that the current 2022 model of my camera already has a more than 24 megapixels CMOS sensor. The highest resolution camera Canon has to offer has a more than 32 megapixel camera to allow you to work in extreme low light settings.

Imagine I took these pictures with that camera? The resolution of the photos of the viruses would be 1.46 times as high, horizontally and vertically. That puts a very large dent in the idea that you need a different kind of microscope. My reproducible images would be of the same if not better and more honest quality than what you find on the Internet.

I should probably also point out that Canon has developed a CMOS of over 120 megapixels and even more than that by now. That means that it allows you to photograph viruses at resolutions of more than 2.8 [= $\sqrt{(120/15)}$] times as high both horizontally and vertically. It's not electron photography, it's freaking awesome light photography.

Literature on the Internet states that you identify viruses by what they look like in terms of their shell. Their shape may vary, but the shell determines its type. What I have is clearly influenza. Even with the heavily doctored images, the shells of influenza, corona, and HIV look exactly the same as if it's an inside joke.

When you check, influenza, corona, and HIV are all one and the same virus. Influenza and corona are 100% the same, also in terms of location: they are bronchial.

For HIV the shape is the same, but the location is different: HIV is intraveneus. That's also why it's so difficult to tackle. Simply steaming and a breath of regular fresh air may keep it under control, but it won't get it out of your system. It would definitely be worthwhile to see what components or combination thereof of sea air kills the influenza virus.

Seaweed has been noted to be a good dietary supplement and I know for a fact that they let water run down it in Bad Karlshafen, Germany, to alleviate all kinds of respiratory and perhaps also other problems.

I often feel great, more alive than ever, ride my bicycle to keep it under control, but I have hardly any T-cells, because influenza kills them when it can. This means I'm susceptible to diseases more than others. No T-cells mean I'm now at risk for cancer. I've eliminated a couple of minor growths on my skin. This is a problem.

I really quickly need to spend seven days and seven nights in sea air, but that's actually quite expensive and during the fall and winter opportunities shut down.

My neighbors that also call up the mail delivery people that I'm not at home even though I am, which leads to discussions on the mobile phone, love making use of my lack of immunity. They are really unhealthy and have turned walking past my front yard into some sort of a sport, which is really annoying.

The only thing I can do is get on my bicycle and ride: when I lie in bed it gets worse and I get better in the outside air. I suffer higher fatigue at the beginning of the bicycle ride than at the end of it. It's quite interesting: starting tired and coming out sweaty fresh.

My neighbors aren't the only problem.

I have my rash in places and a thin strip lump under my left armpit, so I go to the healthcare provider. I didn't get any help, instead I get queer (as in strange) questions, "Emile, have you ever had anal sex?" The guy, who came off as a really frustrated homosexual himself, kept badgering me on it. The answer quite clearly is "No."

I'm not gay, 100% heterosexual, and in so much shit, which is ironic, that I'm pretty much cut off of the world. Me not being gay had the fortunate result that I didn't get "help" in the form of AZT, too deadly a chemotherapy to prescribe it to cancer patients, because it killed them too quickly. Need an AZT break? Have a Tic-Tac.

I mean, these bastards refused to have me had my blood works done. When they finally agreed to allow me to go see an endocrinologist, I face a psychopath "doctor" that only has me tested for calcium and he rubbed the needle. That's all it takes and what made me get the rash and the lump and almost no T-cells!

That's the reality. You can and do pick up influenza everywhere, which normally is nothing to worry about: your body can handle it. It's on tables and arm rests. When you're not in a restaurant they typically don't get cleaned as frequently and it's easy to pick it up. You've survived for years, probably even decades, being infected on a daily basis.

Then some dick doctor rubs his needle without washing his hands, puts it down, runs out, and the nurse injects you with it. That's how the AIDS-epidemic started: "Nothing too queer to kill a queer!" And the solution, the cure, is perfectly simple.

I hear in The Hague AIDS is a joke. You just need sea air. Seven days and seven nights in sea air and you are rid of it. In the "Haagse Harrie," a comic book by the late Marnix Rueb, he illustrated a bald gay guy returning from the beach with sunburn that said, "Aidsje gevat!" which translates to, he caught a bit of an AIDS.

All of these fuckers, when you're smart or handsome or gay or black or a woman or guy they can't fuck or too honest or too straight forward and upfront... We don't face an AIDS epidemic, it's a global fucking killing spree that has been going on in various forms since the 1940s and it's completely insane.

The death count for AIDS alone, intravascular/intraveneus influenza, according to the Internet is higher than 40 million worldwide! Forty million murders worldwide! Is it getting through to you? And that's just counting intravascular influenza, people that should have spent a full week at the damned beach!

Think about it! They are all lying to you! I can take these pictures with a basic 15 megapixel DSLR camera and sure as hell don't willingly fire electrons at anything. The electron microscope doesn't exist. So, who are you going to trust? These lying rat bastards? Or me?

Literature

I would like to apologize, because the Internet tends to be very vague on how photographing viruses works, in that they don't describe the procedure properly in such a way one might reproduce it. I am going by my own experiment and I do reference what I read on the Internet as such, but I don't offer links. I've asked for books but have been told virology is a science without books. Good luck with that.