

# KELEA Excellerated Water and the Alternative Cellular Energy (ACE) Pathway

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## Opinion

It has generally been assumed that humans and animals can only obtain energy from food; with the mitochondria being the principal cellular component for food metabolism. Basic calculations of the daily work output of humans indicate an energy expenditure far in excess of the approximately two thousand Calories consumed each day in a typical diet. Humans must, therefore, have an alternative cellular energy (ACE) pathway that is empowered by an environmental force. Indeed, based on experimental observations, some of which are detailed herein, this force has been designated as KELEA; an abbreviation for Kinetic Energy Limiting Electrostatic Attraction. KELEA is seemingly reversibly bound to both positive and negative electrical charges. It likely provides the repulsive mechanism that prevents the ultimate fusion of electrostatically attracted opposing electrical charges. It is further proposed that KELEA is drawn to the isolated electrical charges on dipolar molecules, including water. Increasing the level of KELEA in water weakens the attachments between the electrostatically bonded water molecules. Consequently, the water molecules become kinetically more active; as can be shown in specific assays. The term “excellerated water” is being used rather than “activated water” to more specifically define water with a significantly heightened level of a non-thermal kinetic activity. The added kinetic energy present in KELEA excellerated water can be transferred from the water molecules to other types of molecules. The energy is also transferable between the molecules involved in linked chemical reactions. As such, it can be equated with chemical energy. It is likely that the fluctuating electrical activity of the normally functioning brain acts as the major receiver of KELEA from the environment. This is consistent with one of the consequences of brain damage being an overall insufficiency of energy for the ACE pathway. Individual neurons probably derive some of the energy for their own cellular needs from the repetitive depolarization of the cell. This may explain why hyperexcitability of neurons can occur in response to cell damage. Such an adaptive mechanism is unlikely to be sustainable, however, especially because of the continuing need to synthesize neurotransmitters and membrane ion channels.

The energy deficient neurons would then become quiescent and, although remaining viable, would not perform their intended specialized functions. Actual cell death would not necessarily occur till much later in the disease process. The distinction between quiescent and degenerated neuronal cells is important since the former is potentially reversible by augmenting the cell’s ACE pathway. The body can respond to an insufficiency of cellular energy (ICE) with the production of complex, self-assembling, mineral-binding, aromatic and aliphatic chemicals. These structures were initially noted in the supernatants of virus cultures obtained from patients with the chronic fatigue syndrome (CFS). The virus cultures were unusual in that the cytopathic effect (CPE) was transient, unless the culture supernatant was replaced at about every other day. This observation contrasts with that of the cultures of most viruses in which

the CPE is invariably progressive. The cellular repair in infrequently refed cultures correlates with the accumulation of particulate materials in the virus culture supernatant. The CPE would quickly reappear when the supernatant containing these materials was replaced with fresh tissue culture medium. Adding a few particles of the material to the refeeding medium would, however, prevent the CPE from redeveloping. The accumulating materials had energy-related activities including being electrostatic, occasionally ferromagnetic, and fluorescent, especially when mixed with various dyes including acridine orange and neutral red. The larger particles would slowly induce vapor bubbles when suspended in water. They could also lead to the abiotic synthesis of lipids. In addition to the typically black-colored particles, the cultures contained materials in the form of colored long thin threads and shorter, thicker fibers. Such threads and fibers could occasionally be seen rapidly forming through the self-assembly of smaller components. These components display movements well beyond those of Brownian motion. Similar complex intracellular and extracellular materials were observed in brain biopsies from virus culture positive patients. Since the mitochondria in the cells containing these materials were markedly disrupted, the materials were assumed to be providing a form of cellular energy. They were accordingly called ACE pigments. Production of ACE pigments in perspiration and in hair follicles is a notable feature of a virus-induced disease unfortunately commonly referred to as delusional parasitosis.

Another characteristic of the viruses initially cultured from CFS patients is the lack of overt inflammation in the patients or in virus inoculated animals. The viruses are apparently not effectively recognized by the cellular immune system. They were accordingly termed stealth. Many individuals are infected with these atypical stealth adapted viruses. Included approximately 10% of apparently healthy individuals and most of the tested patients with neurological symptoms. Strikingly positive results are especially common in the cultures of both blood and cerebrospinal fluids samples from severely ill patients. There is clear evidence within families of person to person and of human to animal transmission. The actual CPE varies somewhat between the cultures from different patients. Initial DNA sequencing of the prototype stealth adapted virus (stealth virus 1) from a CFS patient identified one of its sequences as being similar to a sequence in human cytomegalovirus. This sequence was subsequently shown to match far more closely to the African green monkey simian cytomegalovirus (SCMV). Other SCMV-related DNA sequences were subsequently detected in stealth virus-1. This clearly implicated an origin from a monkey used to produce polio virus vaccines. Still, other virus sequences could not be matched to any of the then available virus sequences. Some of these sequences are related to cellular genes and others to bacterial genes. Certain stealth adapted viruses have apparently also originated in rhesus monkeys. This is based upon the presence in these viruses of rhesus monkey derived cellular sequences.

Interestingly, as these viruses infect human cells, there can be a subsequent exchange of the monkey-derived genetic sequences with human cellular sequences. The incorporated monkey and human cellular sequences are genetically unstable and can, potentially cause serious diseases. The presence of the bacteria-derived sequences in certain stealth adapted viruses indicates the potential passage of some of these viruses in bacteria. This can lead to a mistaken conclusion of a bacterial cause of what is essentially a stealth adapted virus illness. More importantly, this will render the control of the spreading of these viruses much more difficult and it emphasizes the urgent need for developing effective therapies.

Enercel was initially characterized as a homeopathic product. It is produced by the sequential dilutions of herbal tinctures along with a mineral component. In contrast to the usual dogma of homeopathy, Enercel is not viewed as being limited in its clinical uses to only treating those symptoms caused by consuming toxic quantities of the tinctures. Similar to ACE pigments, Enercel was shown in tissue cultures to sustain the viability and promote the recovery of cultured stealth adapted virus infected cells. In vivo administration of Enercel has led to significant improvements in patients with various neurological and other illnesses, including those for which there are no available pharmaceutical remedies. Enercel is now characterized as one of several well-studied examples of KELEA excellerated water. A wide range of dipolar components can be added to regular, or preferably to distilled water to increase the kinetic activity of the water. These compounds include isolated ACE pigments, humic and fulvic acids, zeolites, shungite, mica, mineral oxides, antioxidants, certain pharmaceuticals, plant extracts, and even some gases. The amounts required to initiate the water excelleration process are relatively little and typically no more than a gram per liter. Moreover, the excellerating compound can be subsequently removed by zero residue filtration or at least significantly reduced by serial dilutions. Once water is significantly excellerated, it can be used to excellerate added additional water. Various oscillating electrical devices can also be used to excellerate water. Indeed, certain of the water excellerating compounds referred to earlier can achieve an effect on water that is placed in close vicinity to the compounds. In other words, certain compounds can act similarly to certain oscillating electrical devices in being able to continually receive KELEA from the environment and retransmit the energy in a manner that can more easily enter into nearby water. This KELEA transferring capacity is also acquired by water that is highly excellerated with KELEA. This is the principle behind the investigational use of wearable waterceutical pouches™ containing KELEA excellerated water. A major source of the KELEA excellerated water used in these pouches has been from a location in Southern California in which the water from a deep well is naturally excellerated by its contained minerals.

Several individuals who have begun wearing the pouches have commented upon the regaining of more heightened sense of

awareness and appreciation of themselves and of their surroundings. Some have been reminded of the sense of exuberance that they can recall from their youth. Other terms that describe the improved emotional sense of wellbeing include greater self-confidence, optimism, awe and wonderment. These feelings directly contrast with prior feelings of despair, anxiety, and depression in some of the individuals. It certainly appears that an important aspect of higher brain functioning is directly influenced by the ACE pathway. Moreover, there are additional indications that the proposed KELEA attracting function of the brain is significantly improved, such that arguably the pouches may no longer be necessary in a recovered individual. At least in terms of communicating with patients, the idea is being presented that the pouches are essentially jumpstarting the higher level of brain functioning, which can then become self-sustaining. The suppression of a possible stealth adapted virus encephalopathy in certain of these individuals is also presented as a potential mode of action of the KELEA excellerated water pouches.

A greater understanding of the ACE pathway will likely come from approved studies using KELEA excellerated water in Covid-19

infected patients. The initial testing is with the inhalation of KELEA excellerated water. This approach, as well as the subsequent planned use of wearable water pouches, are essentially being viewed as medical devices for delivering energy to the body. Among the tested individuals will be some with underlying neurological and psychiatric illnesses. The planned study will, thereby, allow for incidental clinical evaluations of improvements in these illnesses.

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