

# A Triple Blind Study of the Non Local Perception of Plants Infected with Tobacco Mosaic Virus

Melvin L Morse MD, Lance W Beem MS, Stephan A Schwartz, Debra Katz MSW

Overview: Remote Viewing (RV) is a non-destructive validated method by which the viewer can “see” an object, through non local perception. RV has been scientifically validated for over 3 decades. We propose a novel scientific question of medical importance: “Can RV substitute or augment current methods for evaluation of virus particles found in living cells of plants and animals?” Although we can currently image viruses to the atomic level, such methods have limitations including physical distortions, lack of real time signature, significant expense, and problems with accurate clinical assessment of viral presence.

We tested our hypothesis designing five different triple blind remote viewing protocols. We selected Tobacco Mosaic Virus (TMV) for its similarity to human AIDS and hepatitis C viruses. We wanted to attempt to view a virus in a living organism, e.g., tomato plants. There were a total of 1500 attempts to identify the presence of the virus with a total of 19 separate viewers. Our accuracy rate was between chance and 100% depending on the protocol and the viewers. During the trials, a true random number (RNG) generator was used to monitor selected viewers.

Additionally, for unknown reasons, virus infected plants maintained a longer life expectancy compared to healthy non-infected plants. This needs to be further investigated separately.

Background: Our research group is interested in developing medical applications for RV. Our goal is to train and utilize remote viewers in clinical situations involving AIDS, hepatitis C and other chronic viral illnesses as part of the patient’s medical team. A current clinical problem in treating humans infected with these viruses is the uncertainty of how long to treat patients because of clinically silent quiescent and replicating periods making the virus unavailable by blood sampling. Relapses are common after cessation of treatment with both viral illnesses.

## Materials and Methods:

Tomato plants were grown under uniform, controlled conditions. Selected plants were infected through a virus brushing technique. Presence or absence of virus was then confirmed by Dr. Robert Gilbertson, UC Plant Virologist, Davis, California. A total of 5 different remote viewing protocols were used. For two of the protocols, 5 and 8 viewers respectively made 50 attempts each to identify whether or not a plant had a virus. A Psyleron Random Number Generator (RNG), based on the electronic white noise of a semi-conductor was used to monitor selected viewers.

Results: One preliminary but lengthy protocol produced 100% accuracy in predicting the presence of virus. Subsequent briefer viewing protocols ranged from chance to 67% accuracy, the latter being statistically significant. (270 correct/400 attempts Significance confidence > 99%). Another protocol was accurate 135/250 attempts (54%,  $p=0.115$ ) By combining the results of the RNG and one viewer’s efforts, we were able to predict whether or not a plant was infected 32 times out of 35 attempts. (92% accurate, Significant confidence > 99%) Certain viewers were accurate 10/10 attempts.

DATA TABLE FOR STUDY

PROTOCOL	ATTEMPTS PER VIEWER	SUCCESSES PER ATTEMPTS	BERNOULLI'S BINOMIAL
Preliminary Protocol  Extended Remote Viewing through Stage 3 CRV	1	1/1	P=0.015
Protocol A (Ask the color on a visual screen) Complete S1A CRV session.	50	135/250	P=0.115
Protocol B : CRV session S1A but no visual screen (Meditation for all, and then just a gestalt "is plant infected")	50	270/400	P= 1.09701137063212E-12  (Highly significant)
One single viewer for Protocol B (An Air Force Air Traffic Controller trained in the morning)	50	38/50	P=0.00015  (highly significant)
Protocol C: Taking target number, ideogram only. Probing the ideogram with the pen and quickly answering if virus was present	10	48/90  However one viewer was 10/10	P=0.299  10/10 p=0.001
Protocol D: Brief quick impression if plant is healthy (meaning non infected)	10	35/70  One person was 8/10	P=0.55  (8/10 p=0.054)
Protocol E: just asking "is virus present?"	10	20/50	0.1
Protocol B: Preliminary Meditative Phase Significantly altered RNG output	1	32/35	P=2.08849087024454E-07